

COUNCIL OF THE CITY OF PHILADELPHIA
COMMITTEE ON PUBLIC HEALTH AND
HUMAN SERVICES

Via Microsoft Teams
Philadelphia, Pennsylvania
Thursday, December 10, 2020
3:42 p.m.

PRESENT:

COUNCILWOMAN CINDY BASS, CHAIR
COUNCILWOMAN KENDRA BROOKS
COUNCILMAN ALLAN DOMB
COUNCILMAN DEREK S. GREEN
COUNCILWOMAN HELEN GYM
COUNCILMAN DAVID OH
COUNCILWOMAN MARIA D. QUINONES-SANCHEZ
COUNCILMAN MARK SQUILLA
COUNCILMAN ISAIAH THOMAS

RESOLUTION 200403 - Resolution authorizing the
Committee on Public Health and Human Services
to continue to hold hearings to assess the
City of Philadelphia's efforts, as coordinated
by the Managing Director's Office and human
services departments, to prevent and treat
abuse, addiction, and disease related to the
use of opioids...

- - -

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2 COUNCILWOMAN BASS: I

3 understand that the state law currently
4 requires that the following announcement
5 be made at the beginning of every remote
6 public hearing as follows:

7 Due to the current public
8 health emergency, City Council committees
9 are currently meeting remotely. We are
10 using Microsoft Teams to make these
11 remote meetings possible. Instructions
12 for how the public may view and offer
13 public testimony at public hearings of
14 Council committees are included in the
15 public hearing notices that are published
16 in the Daily News, Inquirer, and Legal
17 Intelligencer prior to the hearings, and
18 can also be found on PHLCouncil.com.

19 I now note that the hour has
20 come. Clerk, will you please call the
21 roll to take attendance. Members that
22 are in attendance will please indicate
23 that you are present when your name is
24 called, and also please say a few brief
25 words when responding so that your image

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2 will be displayed on screen when you
3 speak.

4 Madam Clerk.

5 THE CLERK: Councilmember
6 Henon.

7 (No response.)

8 THE CLERK: Councilmember Oh.

9 COUNCILMAN OH: I am present.
10 Good afternoon, Chairwoman and Council
11 colleagues.

12 THE CLERK: Councilmember Gym.

13 COUNCILWOMAN GYM: I am
14 present. Thank you, Council Chair, Madam
15 Chair.

16 COUNCILWOMAN BASS: Thank you.

17 THE CLERK: Councilmember
18 Green.

19 COUNCILMAN GREEN: I am present
20 in the same location I was all day.

21 COUNCILWOMAN BASS: Still
22 there.

23 THE CLERK: Councilmember
24 Thomas.

25 COUNCILMAN THOMAS: Good

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2 afternoon, everybody. Good afternoon,
3 Madam Chair. I'm present.

4 COUNCILWOMAN BASS: Good
5 afternoon.

6 THE CLERK: Councilmember
7 Brooks.

8 COUNCILWOMAN BROOKS: Good
9 afternoon. I'm present.

10 COUNCILWOMAN BASS: Good
11 afternoon.

12 THE CLERK: Chair Bass.

13 COUNCILWOMAN BASS: Good
14 afternoon. I am present.

15 THE CLERK: We're also joined
16 by Councilmember Quinones-Sanchez and
17 Councilmember Squilla.

18 COUNCILWOMAN BASS: Very good.
19 Thank you.

20 And this is the public hearing
21 of the Committee on Public Health and
22 Human Services regarding Resolution
23 200403.

24 Madam Clerk, will you please
25 read the title of that resolution.

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2 THE CLERK: A resolution
3 authorizing the Committee on Public
4 Health and Human Services to continue to
5 hold hearings to assess the City of
6 Philadelphia's efforts, as coordinated by
7 the Managing Director's Office and human
8 services departments, to prevent and
9 treat abuse, addiction, and disease
10 related to the use of opioids; and to
11 assess the City's response to the 2020
12 Restorative Investment Plan for
13 Kensington residents.

14 COUNCILWOMAN BASS: Thank you.

15 Before we begin to hear
16 testimony from the witnesses we have for
17 today, everyone who has been invited to
18 the meeting to testify should be aware
19 that this public hearing is being
20 recorded. Because the hearing is public,
21 participants and viewers have no
22 reasonable expectation of privacy. By
23 continuing to be in the meeting, you are
24 consenting to being recorded.

25 Additionally, prior to

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2 recognizing members for the questions or
3 comments they have for witnesses, I will
4 note for the record at this time that we
5 will use the Chat feature available in
6 Microsoft Teams to allow members to
7 signify that they wish to be recognized.
8 In order to comply with the Sunshine Act,
9 the Chat feature must only be used for
10 this purpose.

11 Before we call the first panel,
12 would the sponsor of the resolution,
13 Councilmember Maria Quinones-Sanchez,
14 like to make an opening comment?

15 COUNCILWOMAN SANCHEZ: Thank
16 you, Madam Chair, and to all the members
17 of this Committee. This is -- we've had
18 about a half dozen hearings of this.
19 This resolution was reintroduced after we
20 started our new session, and I want to
21 thank you and this Committee for allowing
22 us to have this space to record the
23 progress and challenges of Kensington.

24 I want to thank everyone
25 leading to today's hearing, particularly

1 12/10/20 - PUBLIC HEALTH - RES. 200403
2 the residents who you will hear from
3 directly and the Administration.

4 All of us agree that this has
5 been an all-hands-on-deck effort with
6 Project Resilience, the emergency
7 declaration by the Mayor, but we also
8 agree that if you rode by Kensington
9 today, many would say, and I know the
10 residents you'll hear from will say, our
11 containment strategy has been a failure.

12 The quality of life of the
13 residents of Kensington pre-pandemic were
14 already precarious with a hepatitis A
15 scare, trash, vandalism caused by our
16 inability to have a very focused and
17 targeted public safety strategy and human
18 services strategy for the folks that live
19 in the street.

20 I want to thank my Council
21 colleague Councilmember Squilla on this.
22 We have been a tag team on this, and I
23 appreciate the fact that he has been
24 incredibly willing and supportive to meet
25 with me and stakeholders at all hours,

1 12/10/20 - PUBLIC HEALTH - RES. 200403
2 whenever possible, to move this project
3 forward.

4 I want to thank the Police
5 Department and the Streets Department in
6 particular, because when everything else
7 does not appear to be working, the
8 residents have counted on them, Police to
9 protect them when they can and Streets
10 Department to come and just clean what
11 has become an untenable situation in
12 Kensington.

13 I want to thank our new
14 Managing Director, Tumar Alexander. He
15 has been working on this project for a
16 number of years, and his commitment to
17 understand that when we do something and
18 it doesn't work, we don't continue to do
19 the same thing and expect a different
20 outcome. We have to pivot, we have to
21 change and, more importantly, we have to
22 hear the residents.

23 I think what folks will hear
24 today is a renewed commitment that we
25 have to change and that we have to listen

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2 to the residents, and we have to, have
3 to, must restore the quality of life for
4 Kensington. And that's why today's
5 discussion is about the Restore
6 Kensington Plan that was put forth in
7 March of 2020, has been updated in June,
8 and that now really has some action
9 behind it.

10 So thank you to all of you
11 folks. I know Councilmember Domb has
12 personally been out there to Kensington,
13 and you have, Madam Chair. Thank all of
14 you for your patience as we talk through
15 this very critical issue.

16 Opioid addiction is a citywide
17 problem. Opioid addiction is a citywide
18 problem. Kensington cannot be the only
19 place where we pilot and we use a poor
20 community to try initiatives at the
21 expense of poor residents who are trapped
22 and don't have a choice.

23 Thank you, Madam Chair.

24 COUNCILWOMAN BASS: Thank you,
25 Councilwoman, and I want to thank you for

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2 your many years of dedicated work and
3 service to the community. We spoke over
4 the summer about some of the concerns
5 that you had about Kensington, and you
6 invited me to take a ride down and take a
7 look around, and I happened to be in the
8 area nearby, so I said, well, let me just
9 swing through real quick, and I was
10 surprised. I was surprised that we as a
11 city have not made, in my opinion, a
12 level of investment that clearly needs to
13 be made. In no other part of the City
14 would this be allowed to exist, and it
15 should not exist in terms of the lack of
16 resources that are pumped into the
17 community.

18 I think that there's a lot more
19 that we can do. I don't want to suggest
20 that the City has done nothing, but I do
21 think that this has to be -- we need to
22 treat this community as if it were
23 Chestnut Hill. So if we were in Chestnut
24 Hill, there would be a different level of
25 expectation in terms of what is happening

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2 and what will be found acceptable.

3 And so, again, I just really
4 want to thank you. I look forward to
5 hearing from the Administration, and I
6 look forward to our Committee through
7 your leadership, I look forward to
8 working with the Administration, not
9 working against, but working with the
10 Administration. How can we be helpful to
11 you to address this human problem that
12 has just really spiraled out of control.
13 So, again, many thanks to you, Madam
14 Chair [sic].

15 Before we have the Clerk call
16 the first panel, is there anyone else on
17 the Council Committee who would like to
18 make an opening statement?

19 (No response.)

20 COUNCILWOMAN BASS: Okay.
21 Seeing none, Madam Clerk, if you could
22 call forward the first panel.

23 THE CLERK: Tumar Alexander,
24 Managing Director --

25 COUNCILMAN SQUILLA: I hope you

1 12/10/20 - PUBLIC HEALTH - RES. 200403

2 hear me, Madam Chair.

3 COUNCILWOMAN BASS: Say again.

4 COUNCILMAN SQUILLA: Can you

5 hear me?

6 COUNCILWOMAN BASS: Mark, is

7 that you?

8 COUNCILMAN SQUILLA: Yes.

9 COUNCILWOMAN BASS: Yes, we can

10 hear you. Go ahead, Mark. Councilman

11 Squilla. Excuse me.

12 COUNCILMAN SQUILLA: Thank you.

13 I heard from Councilmember Sanchez and

14 how important this is, and this is a

15 citywide problem. Yes, it is

16 overwhelming in the Kensington area and

17 parts of our districts, but we see this

18 as progressing not only in Kensington as

19 it's starting to go --

20 COUNCILWOMAN BASS: Yes.

21 COUNCILMAN SQUILLA: -- and

22 grow into other neighborhoods and other

23 areas. So that we really need to get a

24 handle on this, and that's why it's so

25 important to have this hearing and also

1 12/10/20 - PUBLIC HEALTH - RES. 200403
2 to have the policies in place that the
3 City of Philadelphia can adhere to and
4 that everybody knows what can and cannot
5 be done. And I think the challenges that
6 we see today in Kensington will be the
7 challenges in every neighborhood across
8 the City in the future.

9 So we need to really get a
10 handle on it. We need to put our foot
11 down, and we need to make sure that these
12 resources that are being spent in
13 Kensington after we do this will not be
14 spread into any other communities. So
15 it's really important right now to have
16 this in place, and nothing better than to
17 have this hearing, Madam Chair, and I
18 appreciate your help and your willingness
19 to participate in this. So thank you.

20 COUNCILWOMAN BASS: Absolutely.
21 You know, not to belabor the point before
22 we call the first witness, but I do want
23 to point out over the summer, I had a
24 chance -- one of my books that I was able
25 to get through this summer was a book

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2 about a young woman who was from my
3 district who was caught in the throes of
4 opioid addiction, and unfortunately she
5 lost her life to it. And the book was, I
6 think it's Even If Your Heart Would
7 Listen by Elise Schiller, who I know has
8 done some advocacy work on this issue for
9 many moons now since losing her daughter
10 and actually while she was in the throes
11 of it, but that shows the reach of opioid
12 addiction, and it's not just in
13 Kensington.

14 So I just want to make sure
15 that we're all clear on that. I know we
16 all get it, that this is beyond
17 Kensington. It's in a neighborhood near
18 you. And so the point of this is how do
19 we put the resources in front of it in
20 Kensington, in Germantown, in West Mount
21 Airy, you know, whether you're in one of
22 the most challenged or a neighborhood
23 that is much more affluent.

24 But I thank you, Councilman
25 Squilla. I thank you for your comments.

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2 Is there anyone else from the
3 Committee who would like to make an
4 opening comment or statement?

5 (No response.)

6 COUNCILWOMAN BASS: No? Okay.

7 Madam Clerk, if you could call
8 forward the first panelist, first panel.

9 THE CLERK: Tumar Alexander,
10 Managing Director; Eva Gladstein, Deputy
11 Managing Director for Health and Human
12 Services; and Noelle Foizen, Director of
13 the Opioid Response Unit. And there are
14 also four additional people from the
15 Administration available for questions,
16 who are Keith Warren, the Deputy
17 Commissioner of the Streets Department;
18 Captain Francis Healy of the Philadelphia
19 Police Department; Dr. Jill Bowen, the
20 Commissioner of the Department of
21 Behavioral Health and Intellectual
22 disAbility Services, as well as Liz
23 Hersch, the Director of the Office of
24 Homeless Services.

25 COUNCILWOMAN BASS: Excellent.

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2 Thank you.

3 If we could have,
4 Mr. Alexander, if you could state your
5 name for the record and proceed with your
6 testimony.

7 MR. ALEXANDER: Good evening,
8 Chairwoman. Tumar Alexander, Managing
9 Director, City of Philadelphia.

10 COUNCILWOMAN BASS: Good
11 afternoon.

12 MR. ALEXANDER: Good afternoon.
13 Good afternoon, Councilwoman
14 Bass and members of City Council's
15 Committee on Public Health and Human
16 Services. I am Tumar Alexander. Joining
17 me virtually is Deputy Managing Director
18 Eva Gladstein and Noelle Foizen, the
19 Director of the Managing Director's
20 Office Opioid Response Unit. We also
21 have senior officials from the
22 Administration, as Sabrina just listed,
23 that's available and will be helping out
24 answering questions.

25 We are pleased to provide

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2 testimony on the status of our opioid
3 response efforts and updates on our
4 Kensington -- updates on our Restore
5 Kensington Action Plan in response to the
6 2020 Restorative Investment Plan for
7 Kensington Residents.

8 We established the Opioid
9 Response Unit in February 2020 to
10 aggressively address the opioid epidemic,
11 including targeted response activities in
12 the opioid hotspots of Kensington,
13 Harrowgate, and surrounding communities.
14 The ORU is focused on citywide opioid
15 response strategies, opioid hotspot
16 strategic coordination, and alignment of
17 resources across the Managing Director's
18 Office clusters and City departments.
19 The ORU combines the implementation of
20 the Mayor's Task Force to Combat the
21 Opioid Crisis recommendations and the
22 Philadelphia Resilience Project best
23 practices and lessons learned to enhance
24 and improve standard operating procedures
25 within City government.

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Both the ORU and the Restorative Investment Plan for Kensington Residents were impacted by the Fiscal Year 21 \$750 million budget shortfall. MDO's budget cuts also delayed the build-out of the ORU staffing unit. The Restorative Investment Plan was not funded prior to the FY21 budget finalization. Funding any initiatives that do not already have budget resources allocated in FY21 require trade-offs with other parts of the budget.

The Administration reviewed the Restorative Investment Plan this past summer and produced the Managing Director's Office Restore Kensington Action Plan. The MDO plan identified four action goals with 16 action items that the Administration would prioritize for budget negotiations, with the intent to implement by Quarter 2 of Fiscal Year 21. The action goals are as follows:
Number one, increase public safety;
number two, increase quality of life;

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2 number three, connect individuals to
3 services; number four, increase access to
4 housing.

5 The Administration received the
6 updated Restorative Investment Plan in
7 December and will provide an updated MDO
8 Restore Kensington Action Plan to the
9 community in January.

10 The following updates reference
11 the current action plan:

12 Under Action Goal No. 1,
13 increase public safety, launch
14 Kensington -- launch of Kensington
15 Special Services Police District phasing
16 in 40 officers on foot and bike patrols
17 in mid January 2021 at a temporary
18 location while the Administration
19 finalizes the lease for permanent space
20 to launch in early Fiscal Year 22. The
21 Kensington Police District is an integral
22 piece of the ORU Public Safety Strategy,
23 as it will increase capacity to provide
24 community policing interventions and
25 assist with targeted narcotic disruption

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2 and sustainment after operations. Also
3 under Action Goal No. 1, implement
4 coordinated diversion model, planning and
5 scoping now to pilot in the East Division
6 with East Service Detail officers.
7 Coordinated diversion enhances the
8 ability for Philadelphia Police to
9 disrupt nuisance public behavior,
10 focusing primarily on open-air drug use,
11 without widening involvement in the
12 criminal justice system for low-level
13 offenses, hopefully leading folks to
14 crucial treatment services.

15 Also under Action Goal No. 1 is
16 expanded Police-Assisted Diversion and
17 Co-Responders Model. Funded expansion is
18 underway in both the 25th and 26th Police
19 Districts.

20 And, lastly, under Action Item
21 1, rebooting of the Safe Corridors
22 Program. Right now scoping and planning
23 are underway for return to in-person
24 school. Plan will include co-response
25 clearing of school properties before and

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2 after school dismissal.

3 Action Goal No. 2, increase
4 quality of life. Encampment policy -
5 tent and structure policy finalized
6 across City departments. Finalizing
7 enforcement procedures with the Managing
8 Director's Office of Health and Human
9 Services, Office of Homeless Services,
10 Department of Behavioral Health,
11 Philadelphia Police Department, and the
12 Managing Director's Office of Criminal
13 Justice to ensure that an interagency
14 effort to deter encampments and minimize
15 the role of police enforcement whenever
16 possible.

17 Also under Action Goal No. 2,
18 increase sanitation services. Recently
19 we've completed a three-week coordination
20 of quality of life initiatives in
21 September 2020; continuing coordinated
22 work with expanded commercial corridor
23 cleaning with CDC partners; and enhanced
24 cleaning in the community with support
25 from City Council funded for commercial

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2 corridors. Additionally, Public Health
3 funding and expanded cleaning program
4 that operates seven days a week, 12:00
5 p.m. to 5:00 p.m., and also includes a
6 HAZMAT cleaning team to address issues
7 around human waste and disinfect targeted
8 locations.

9 Expansion of Same Day Pay
10 program. Funded through FY21 and each
11 cohort of -- currently we are funded
12 through FY21. Each cohort of the program
13 participants are both housed community
14 residents and individuals experiencing
15 homelessness.

16 Lastly under Action Goal No. 2,
17 pilot community dumpsters. Currently we
18 have funding from the Community Life
19 Improvement Program coordinating
20 placement, monitoring, and collection of
21 discarded waste and refuge. This is a
22 way that we hope to limit the amount of
23 trash that's in and around that
24 community.

25 Action Goal No. 3, connect

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2 individuals to services. Expanding --
3 I'm sorry. Connect individuals to
4 services. My apologies. Funded,
5 formalizing a seasonal pilot into
6 year-round initiative, Kensington
7 Coordination Strategy. Eva will provide
8 additional information on the strategy in
9 her testimony.

10 Additionally, the ORU
11 interagency Data and Analytics Workgroup
12 will create a dashboard to track outreach
13 and engagement efforts in Kensington
14 across providers.

15 Finally, Action Item No. 4,
16 increase community investment. Working
17 with other partners developing McPherson
18 Square strategy, planning and scoping now
19 to finalize an implementation plan for
20 spring of 2021 to ensure public space is
21 both safe and secure for community
22 residents and our young people. Provide
23 dedicated funds for basic system home
24 repairs to address vandalism. And I'd
25 like to thank Councilwoman Sanchez for

1 12/10/20 - PUBLIC HEALTH - RES. 200403
2 helping push that funding through the
3 current mid-year process. We look to
4 work with both the Councilwoman and a
5 community-based partner on creating and
6 establishing that program soon.

7 Targeted basic systems home
8 repair. That's funded through Fiscal
9 Year 21. And modular housing pilot
10 program, still exploring that concept.

11 Budget resource discussions
12 with the support of District
13 Councilmembers and City leadership to
14 prioritize efforts to reduce the
15 community impact from the opioid
16 epidemic. The Restore Kensington Action
17 Plan does not represent MDO's full
18 commitment to Kensington, Harrowgate, and
19 the surrounding community. We fully
20 acknowledge that there is much-needed
21 work remaining to be done to truly
22 restore and revitalize that community,
23 and we have tasked the ORU with targeted
24 coordinated strategies to address the
25 demand and supply side of this epidemic

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2 in partnership with community leaders.

3 Now I'd like to kick it off to
4 Noelle Foizen, who is the Director of
5 ORU, who will provide an update and
6 overview of ORU Response Unit.

7 Noelle.

8 MS. FOIZEN: Thank you, Tumar.

9 Good afternoon, Chairperson
10 Bass and other members of the Committee
11 on Public Health and Human Services. I
12 am Noelle Foizen, Director of MDO's
13 Opioid Response Unit. I am joined by Eva
14 Gladstein, Deputy Managing Director,
15 Health and Human Services. We will
16 provide an overview of the Opioid
17 Response Unit and status of opioid
18 response efforts since the start of the
19 COVID-19 pandemic.

20 The Opioid Response Unit is
21 focused on 12 strategic goals that can be
22 grouped into four broad categories. One,
23 community impact and support; two,
24 prevention; three, public safety; and,
25 four, treatment. The strategic goals are

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2 further broken down into specific
3 objectives that allow the City to monitor
4 our efforts and attain our strategic
5 goals by 2025.

6 The Opioid Response Unit
7 Executive Team meets bi-weekly to track
8 those strategic objectives, monitor
9 hotspot response, and adjust posture as
10 needed. The Opioid Response Unit Exec
11 Team includes leadership from MDO, Public
12 Health, Department of Behavioral Health
13 and Intellectual disAbility Services
14 (DBHIDS), Police, Office of Homeless
15 Services, the School District of
16 Philadelphia, and the Grants Office, with
17 the District Attorney's Office, SEPTA,
18 CLIP, Streets, 311, Parks and Recreation,
19 Law Department, Prisons, Community
20 Behavioral Health, Commerce, Philadelphia
21 Fire Department, Planning, License and
22 Inspection, and Town Watch Integrated
23 Services supporting the four strategy
24 groups.

25 The Opioid Response Unit spent

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2 the first six months primarily focused on
3 COVID-19-related impacts for individuals
4 with opioid use disorder and the
5 community impact. The Opioid Response
6 Unit conducted bi-weekly virtual
7 community engagement sessions during the
8 spring and early summer with Kensington
9 area civic and community development
10 corporation leadership to provide updates
11 and address community concerns.
12 Additionally, the Opioid Response Unit
13 worked to create social distancing for
14 individuals who are unsheltered by
15 establishing a temporary drop-in center
16 with One Day At A Time (ODAAT), increased
17 food access for all who are food insecure
18 with Step Up to the Plate, connected
19 individuals to stimulus resources, and
20 expanded testing access in the community.

21 The Opioid Response Unit
22 recently regrouped and refocused
23 strategic planning and response based on
24 COVID-19-related impacts. The Opioid
25 Response Unit will release a strategic

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2 plan in the first quarter of Calendar
3 Year 2021. The following section
4 highlights key updates as of December
5 10th, 2020 for response activities in
6 Kensington, Harrowgate, and surrounding
7 communities. Eva Gladstein, Deputy
8 Managing Director for Health and Human
9 Services, will follow me and provide more
10 detail on some of these items.

11 The Opioid Response Unit Public
12 Safety Strategy Group is co-led by the
13 Police Department and MDO Criminal
14 Justice. The group meets weekly with
15 representation from the District
16 Attorney's Office, Town Watch Integrated
17 Services, SEPTA, and School District.
18 The group has three strategy goals, with
19 the focus on improving coordinated
20 narcotics enforcement, permanent closure
21 of drug corners with community
22 activation, and expansion of
23 Police-Assisted Diversion with
24 co-responders. Public Safety Strategy
25 strategic objectives to highlight are:

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2 One, implementing a revised
3 narcotics enforcement strategy that will
4 leverage officers that previously worked
5 patrol in East Division to target
6 mid-level operations.

7 Two, coordinate narcotics
8 enforcement activities with Police East
9 Service Detail to disrupt drug supply,
10 deter encampments, and decrease street
11 homeless population.

12 Three, implement place-based
13 East Division narcotics enforcement
14 strategy modeled on the successful Kipp
15 and Cambria operation to focus on the
16 supply side of narcotics enforcement.

17 Four, launch the Kensington
18 mini station in January 2021 with 40
19 officers on foot and bike patrols to
20 reduce violence and disrupt narcotics
21 supply based on community policing model.

22 Five, expand Police-Assisted
23 Diversion to the 25th and 26th Police
24 Districts, with additional co-responding
25 team, weekend hours, and Salvation Army

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2 conducting active outreach for sex work
3 and human trafficking.

4 The next strategy group is the
5 Community Impact and Support Strategy.
6 The Community Impact and Support Strategy
7 is led by MDO Health and Human Services,
8 with support from 311, Community
9 Behavioral Health, CLIP, Commerce,
10 DBHIDS, Homeless Services, Housing and
11 Community Development, Law, L&I, MDO
12 Community Services, Mayor's Commission on
13 Aging, Parks and Recreation, Planning,
14 and Public Health. The group has four
15 strategy goals focused on activation of
16 community spaces after narcotics
17 operations, developing holistic
18 trauma-informed programs to address
19 community and generational trauma,
20 expanding employment programs for at-risk
21 youth in hotspot neighborhoods, and
22 scaling affordable and permanent
23 supportive housing. Community Impact and
24 Support strategic objectives to highlight
25 are:

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2 One, finalize City social
3 service and operating department response
4 package to support police narcotics
5 enforcement activities to activate
6 community spaces after removing
7 drug-dealing operations.

8 Two, finalize procedures to
9 implement tent and structure policy to
10 provide standard enforcement guidance for
11 encampments.

12 Three, pilot encampment
13 resolution team to target Kensington
14 community hotspots and address resident
15 and business concerns.

16 Four, phase relocation of
17 Prevention Point drop-in services and
18 Point of Refuge to Beacon House with 60
19 low-barrier beds on the Temple Episcopal
20 Campus.

21 Five, expand mobile resources
22 to support the newly launched Public
23 Health-funded Kensington-based clean-up
24 program to focus on drug litter and human
25 waste. Currently the team is operating

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2 on foot, but will expand mobile resources
3 by FY21 Q3 to allow for more coverage and
4 rapid response.

5 And, six, establish a temporary
6 One Day At A Time drop-in center at
7 Visitation for the winter through March
8 31st, 2021 to provide additional indoor
9 social distancing and low-barrier
10 housing.

11 The third strategy group of the
12 Opioid Response Unit, Prevention. The
13 Prevention Strategy is led by Public
14 Health with support from DBHIDS, Fire,
15 MDO Health and Human Services, Police,
16 and Prisons. The group has three
17 strategic goals focused on reducing
18 overdoses and increasing harm reduction,
19 expanding prescriber oversight targeting
20 high-volume practices, and scaling
21 alternative response units. The Health
22 Department's Division of Substance Use
23 Prevention and Harm Reduction permanently
24 moved its field team to the Impact
25 Services building at 1952 East Allegheny

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2 to increase proximity and improve
3 coordination between this team and the
4 community most heavily hit by the opioid
5 crisis. Prevention strategic objectives
6 to highlight are:

7 One, align OD Stat, which is
8 the City's Overdose Fatality Review
9 program, and Opioid Response Unit to
10 integrate Overdose Fatality Review
11 findings and recommendations with Opioid
12 Response Unit strategic objectives to
13 improve service delivery across systems.

14 Number two, develop and
15 implement culturally competent strategies
16 to increase prevention and treatment
17 messaging in communities of color in
18 partnership with trusted sources such as
19 community and faith-based leaders.

20 The fourth strategy group is
21 Treatment. The Treatment Strategy Group
22 is led by DBHIDS with support from
23 Community Behavioral Health, Public
24 Health, Law, MDO Health and Human
25 Services, and Prisons. The group has

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2 three strategic goals focused on
3 expanding warm handoffs, expanding mobile
4 medication-assisted treatment, and
5 executing Medication First policies,
6 provider incentives, and expanded access
7 to treatment. Treatment strategic
8 objectives to highlight are:

9 One, formalize a seasonal
10 pilot, which was called the Kensington
11 Summer Strategy, into a year-round
12 initiative, the Kensington Coordination
13 Strategy. During the summer months, this
14 effort led to 33 residential placements.

15 Number two, convene monthly
16 Kensington Mobile Outreach and Engagement
17 Meetings to increase data-sharing and
18 improve coordination and efficiency among
19 multiple teams serving the community.

20 And, three, expand 24/7
21 treatment capacity.

22 We recognize that current
23 conditions in Kensington are intolerable,
24 and community members feel left behind by
25 City departments. The situation

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2 deteriorated during the COVID-19
3 pandemic, and incidents of
4 narcotics-related gun violence are
5 alarmingly high. Challenges for social
6 service response have included additional
7 COVID-19 financial resources for
8 individuals with OUD being a barrier to
9 engagement, decreased low-barrier bed
10 availability due to social distancing
11 requirements, and suspension of indoor
12 service delivery due to social
13 distancing.

14 Eva Gladstein will now provide
15 an update on health and human services
16 interventions in Kensington. I am also
17 available to answer any questions.

18 MS. GLADSTEIN: Good afternoon.
19 My name is Eva Gladstein, Deputy Managing
20 Director for Health and Human Services.
21 Thank you, Chairperson Bass and other
22 members of the Committee for the
23 opportunity to testify today. I'm going
24 to be providing some more detail on the
25 materials that Tumar and Noelle covered.

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2 I'm pleased first to report
3 that the renovations of the building
4 known as Beacon House on the Temple
5 Hospital Episcopal Campus will be
6 completed in January, and Prevention
7 Point will begin to move some of its
8 services off of Kensington Avenue to that
9 site at that time. That will include
10 some of their drop-in services as well as
11 the shelter services that are currently
12 provided at the Respite at 2917
13 Kensington Avenue. They will cease using
14 the Respite site no later than April
15 30th, 2021. In addition, Prevention
16 Point will cease using the Navigation
17 Center site located at 3247 Kensington
18 Avenue no later than June 2021. Medical
19 services and some drop-in services will
20 remain at their current site in the
21 church building, but as you can see, a
22 significant number of the services will
23 move at that time.

24 A significant program at the
25 site, which is Prevention Point's syringe

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2 service program, has been in operation
3 since 1992 and at that site since 2008.
4 They provided services to 13,500 unique
5 individuals in the year ending June 30th,
6 and there are 13 other medical, social
7 service, and treatment services that are
8 bundled in with that program, including
9 HIV testing, care, preventive medical
10 care, hep C testing and treatment,
11 overdose prevention education, and Narcan
12 distribution. It currently operates from
13 the building four days a week, as well as
14 from eight mobile sites on a weekly basis
15 serving North, Northeast, Southwest, and
16 Center City Philadelphia.

17 Presently 76 percent of the
18 syringes distributed citywide were
19 distributed in Kensington, but many of
20 the individuals do come -- who are coming
21 to the building for those services do
22 come from other neighborhoods. This
23 presents an opportunity to provide
24 syringe services in additional parts of
25 the City through the mobile sites as well

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2 as brick and mortar sites to better reach
3 those individuals and reduce the impact
4 of the volume seen at the site in
5 Kensington.

6 And I'll deflect from my
7 written testimony just to say that
8 Chairperson Bass and Councilmember
9 Sanchez and Squilla mentioned this at the
10 beginning of the hearing, that this is a
11 citywide problem, and so we need to try
12 to provide services throughout or
13 increase services throughout the City.

14 I do want to note that the
15 transition from the in-building site to
16 sites in other communities will present
17 some challenges. That will include --
18 Prevention Point has estimated the need
19 for at least five additional sites across
20 the City, purchasing vehicles and hiring
21 of new staff. That could be a mix of
22 brick and mortar sites as well as mobile
23 sites. This will likely take one to two
24 years to complete and would require
25 political support, public support, and

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2 financial support. But it could involve
3 moving up to or actually over half of the
4 individuals who are coming to the
5 building for those services. The
6 estimate is about 7,500 individuals who
7 might be able to move to other sites
8 throughout the City.

9 While it will take some time,
10 we are beginning to propose additional
11 mobile sites in the next few weeks or
12 months to begin this process and be able
13 to reduce the number of syringes
14 distributed in Kensington and complement
15 the current services at the church.

16 The Health and Human Services
17 through our Health Department and our
18 Department of Behavioral Health and
19 Intellectual disAbility Services are
20 committed to helping support this work,
21 and we'll be looking to Councilmembers
22 for their support as well as we try to
23 increase services in other neighborhoods.

24 I also wanted to share some
25 information around homeless outreach in

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2 Kensington. The Homeless Services Unit,
3 as I think folks know, is funded and
4 overseen by the Department of Behavioral
5 Health and Intellectual disAbility
6 Services. They oversee an Outreach
7 Coordination Center as well as a group of
8 outreach teams that are provided by
9 non-profit service providers. They
10 maintain a set schedule, provide
11 engagement seven days a week, 365 days a
12 year, and 24 hours a day. They've
13 operated continuously throughout
14 stay-at-home orders and the pandemic.
15 Five of those teams serve Kensington -
16 Project Home, Prevention Point, Horizon
17 House, One Day At A Time, and a special
18 initiative team. Those teams have direct
19 access to shelters, safe havens, recovery
20 houses, and Journey of Hope, which is a
21 residential treatment program.

22 I wanted to point out that we
23 provided along with our written testimony
24 a set of materials developed by DBHIDS
25 that will give you, I think, clearer

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2 information than I might do through this
3 narrative, and that information includes
4 kind of a two-page fact sheet on how
5 homeless outreach work with the phone
6 number 215-232-1984 as well as
7 information that we'll be sharing in a
8 minute about hotspots, with maps and some
9 other materials.

10 From March 1st through October
11 31st, there were 182 unduplicated
12 placements from Kensington made through
13 these services, and 93 of these were from
14 the top five hotspots. I'm not going to
15 read all the numbers, but just to
16 indicate and again you have maps, that
17 those hotspots that we identified were at
18 2900 Kensington Avenue, 2700 Kensington
19 Avenue, 2700 Tulip Street, 2900 Emerald
20 Street, and 2000 East Somerset Street.
21 The Kensington teams are focused there,
22 but they also have their zones and they
23 respond to other calls.

24 In addition to daily outreach
25 and engagement, the Kensington

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Coordination Strategy that Noelle
referenced brings an interdisciplinary
targeted response to the street, working
to remove barriers to treatment and other
services and meeting people where they're
at, with multiple mobile outreach
providers offering services, treatment,
and shelter. This began during the
summer as a weekly effort on Tuesdays,
meeting on Tuesdays, to expand
coordination, and it was so effective,
including making 31 housing placements
just during the summer months, that a
decision was made to continue that
throughout the year. It meets every
Tuesday at 10:00 a.m., right now out of
the PAD headquarters, the Police-Assisted
Diversion headquarters, at F and
Allegheny, and community members -- at
10:00 a.m., and community members are
invited to join the huddle that begins
that work every day and to provide
feedback and assist in identifying
locations that should be hit that day.

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In addition, there's a Kensington Mobile Outreach and Engagement Meeting that operates on a monthly basis. This began the summer in July, and what that did is to coordinate across multiple outreach efforts. So we have the DBHIDS Homeless Outreach Teams who wear their orange vests and uniforms, but there are a number of other folks doing outreach in the community. That includes, again, the DBHIDS Community Wellness and Engagement Unit, but also some of our other providers, ROCK Ministries, Temple has a program, Drexel has a program, CBH member services are out there, our coordination with the Fire Department through the ARU-2, Pathways to Housing, MAT, M-A-T, or medication-assisted treatment induction through Prevention Point, the folks who are doing Police-Assisted Diversion, the Co-Responder Program, Merakey Mobile Outreach, and others. And now they've begun to work with the Salvation Army as well to coordinate the

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2 homeless outreach teams to help address
3 the needs of folks who are engaging in
4 sex work. That's a monthly meeting
5 across all of those providers, not just
6 those who are funded directly or operate
7 directly out of the coordination of
8 DBHIDS homeless outreach. And the data
9 dashboard that Noelle referenced in her
10 testimony will be an effort to take the
11 data that we have now from those multiple
12 sources to be able to cross-reference
13 them and show them in one place at one
14 time for us to be able to track our
15 progress here.

16 I also wanted to talk about the
17 need for trash pick-up and safe needle
18 disposal, because these needs have
19 certainly increased during the pandemic.
20 In response, as we mentioned already, the
21 Department of Public Health launched
22 Clean Communities Initiative right before
23 Thanksgiving. The team of ten
24 individuals are working to complement
25 other clean-up efforts. Certainly the

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2 community development coordinations and
3 CLIP have been very active doing this, as
4 well as our Same Day Pay program, but we
5 now have ten additional individuals who
6 pick up trash, discard drug litter in
7 affected neighborhoods 12:00 to 5:00
8 p.m., seven days a week. They're working
9 with community organizations, the
10 neighborhood associations to identify the
11 areas of greatest need, and I think
12 Noelle mentioned working with CLIP with
13 the HAZMAT team to clean up human waste
14 as well.

15 We've also done work in the
16 last several months with our Health
17 Department around Kensington meal
18 providers, outdoor meal providers,
19 because they are some of the major
20 contributors to trash and litter in the
21 neighborhood, and we're working to
22 address those community concerns, and we
23 have to thank community members that are
24 helping us think through some of what
25 we're doing here. So we're focusing on

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2 permitting those providers and providing
3 education to them on the community
4 impacts from litter and trash that's left
5 behind. Public Health is doing a sweep
6 of those meal providers who are not
7 permitted to ensure that by this month,
8 they will all have permits, and that
9 we're now requiring to get a permit, that
10 there be a plan for how they will remove
11 litter from the community. I have a
12 phone number in my testimony so that if
13 somebody witnesses, they can make a phone
14 call at 215-685-7495. And we'll continue
15 to try to improve on this issue.

16 We've also been asked to think
17 about the impacts of donated goods beyond
18 the outdoor meals that sometimes result
19 in a lot of trash and litter in the
20 community, because they're often not well
21 managed. And we believe that
22 identification of one or more sites that
23 can be properly supervised and organized
24 can reduce this. Currently some of these
25 donations are being made at the Ruth and

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2 Clearfield parking lot, where we're
3 providing meals through Step Up to the
4 Plate, and that's staffed and can be
5 organized well. We also believe that
6 once 2917 Kensington Avenue is vacated --
7 it used to be a thrift store. I'm not
8 sure what the landlord has in mind for
9 that, but that or another location could
10 be identified and, frankly, provide some
11 neighborhood business and activity, and
12 we'll be happy to continue to work on
13 recommendations and provide input -- get
14 input from the community but also talk to
15 City Council about this, because right
16 now we don't have any authority to
17 regulate this, but we're happy to come up
18 with some recommendations and best
19 practices and provide advice on that.

20 With that, I want to thank you
21 for the opportunity to share this update.
22 We are now available for questions, and
23 as has been mentioned before, other
24 members of the health and human service
25 agencies are available to assist with

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2 that.

3 Before I finally end, I just do
4 want to give a shout-out to DBHIDS for
5 the materials they provided. I really
6 want to encourage Councilmembers -- I
7 didn't give them their due in terms of
8 going through them in great detail, but I
9 want to just encourage everybody to
10 review them.

11 Thank you.

12 COUNCILWOMAN BASS: Well, thank
13 you. We want to thank the Administration
14 for that significant, very comprehensive
15 testimony.

16 Do we have any questions from
17 members of Council?

18 Councilman Squilla. The Chair
19 recognizes Councilman Squilla.

20 COUNCILMAN SQUILLA: Thank you,
21 Madam Chair, and thank you, Tumar,
22 Noelle, and Eva for your testimonies, as
23 you've been working on this for a long
24 time.

25 I have a couple of quick

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2 questions. One was that there were
3 13,000 individual touches at Prevention
4 Point. Do you know if out of those
5 13,000 individual touches, are there
6 multiple touches of the same individual
7 over that timeframe?

8 MS. GLADSTEIN: Likely. I
9 don't know the number, but the
10 13,000-plus are unduplicated. So many of
11 them may be coming back multiple times.

12 COUNCILMAN SQUILLA: So do we
13 have any statistics that show us they
14 come back more than once?

15 MS. GLADSTEIN: I will ask for
16 that, Councilman.

17 COUNCILMAN SQUILLA: Thank you.
18 And you had said the
19 distribution of at least Prevention
20 Point -- or I don't know if it's
21 Prevention Point or some of the other
22 providers for the syringes was up at
23 close to 76 percent in the Kensington
24 area. Out of that 76 percent, I know I
25 think the last time we spoke, it was

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2 maybe 86 or 90 percent would return. Is
3 that still the number that you're coming
4 up with?

5 MS. GLADSTEIN: I received
6 updated numbers, because the last time we
7 communicated about that we hadn't
8 accounted for -- that is the number that
9 comes back through the syringe exchange
10 itself. Then there are other ways that
11 syringes are collected, and we hadn't
12 accounted for the other mechanisms
13 through which syringes are collected.
14 Again, I can provide you with some more
15 detailed information. I don't have that
16 right in front of me.

17 It does mean -- I don't want to
18 shy away from this issue -- that there
19 are syringes that are distributed that
20 remain on the street. We can all see
21 that when we're in Kensington. So it's
22 certainly not -- nobody is claiming it's
23 100 percent. It is more than the number
24 I provided in our previous
25 correspondence, only because we haven't

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2 taken into account, for example, the
3 needle kiosks and some of the other
4 collection that is happening through the
5 Kind Program, for example, and now
6 through the Health Department program.

7 COUNCILMAN SQUILLA: Those
8 needles are just collected or -- I guess
9 collected as the person who uses them
10 puts them in or are they collected by
11 some other means? Do the users put them
12 into these collection boxes? Is that
13 what you're saying?

14 MS. GLADSTEIN: I'm sure users
15 put them in the collection boxes and I'm
16 sure other folks do as well. So some
17 needles are returned to Prevention Point
18 directly through the syringe exchange
19 program in the building or at one of the
20 mobile sites. Some go into the needle
21 collection boxes, and I'm sure the needle
22 collection boxes are being used by a
23 variety of people, not just the folks
24 actually using the needles. Some are
25 being picked up through the Kind Program

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2 operated by Impact Services, and some now
3 are being cleaned up through the Health
4 Department program that I just
5 referenced.

6 COUNCILMAN SQUILLA: But
7 they're being cleaned up as far as picked
8 up off the street; is that correct?

9 MS. GLADSTEIN: Yes. Correct.

10 COUNCILMAN SQUILLA: All right.
11 And we mentioned -- and I want to thank
12 Sanitation and everybody else who has
13 been working there. The amount of
14 resources we spent cleaning up in and
15 around that facility has been amazing
16 with CLIP and Sanitation. I'm glad to
17 hear that you are now working with the
18 people who have good hearts and are
19 looking to help those folks out on the
20 street, whether it's with food or
21 donations, but we have seen that
22 sometimes they do cause a little bit of
23 the trash that we see. So I'm glad to
24 see that they will be permitting them and
25 we will have hopefully a list of people

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2 who will be distributing food and then
3 they will be accountable.

4 Is there any type of
5 accountability that will be given if they
6 do not abide by the permit?

7 MS. GLADSTEIN: Yes. And,
8 Councilman, there's a monthly meeting
9 that the Health Department and Office of
10 Homeless Services hosts in Kensington and
11 I know community members are welcome and
12 have attended in the past, and we created
13 a calendar of those food providers who
14 are permitted, and also the Health
15 Department has a list of those who are
16 providing meals who are not permitted,
17 and that's where they're doing the sweeps
18 right now.

19 The Health Department is first
20 going to give a warning, and after -- if
21 folks don't respond after the warning,
22 what they can do is issue a ticket or
23 it's like a CVN. I'm not quite sure what
24 effect that will have. I think the
25 warning actually will have more effect

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2 than the ticket. So they are committed
3 to doing that.

4 COUNCILMAN SQUILLA: I mean,
5 listen, you don't want to punish those
6 people who want to help. We need to be
7 able to use those folks to help in our
8 areas where we have been doing feeding,
9 volunteers and organize events that we
10 have in the City. I'm sure there's folks
11 would want to do it. Sometimes they just
12 don't know what to do, but I think that
13 leads us into that citywide policy that
14 we've been talking about for years to
15 have not only an encampment policy
16 citywide but also how food will be
17 distributed, how clothing is being
18 distributed. Instead of just dropping
19 off boxes or bags of clothes on the
20 street and everybody rips through them
21 and leaves them all over the place, there
22 has to be some organization of how we do
23 that. So as we had requested, be a
24 policy on encampments. I see there's
25 going to be a policy on food

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2 distribution, but have we come up with a
3 policy on how we deal with the
4 encampments on private property and the
5 right-of-way?

6 (Pause.)

7 COUNCILMAN SQUILLA: Is anybody
8 going to answer that?

9 MS. GLADSTEIN: I'll start,
10 Councilman. I don't know if Tumar wants
11 to join me. I just actually had a
12 conversation with the Law Department
13 about this earlier today.

14 So on private property, the
15 owner can work with the Police Department
16 to indicate that it is -- essentially
17 that they haven't given their permission
18 and that it's trespassing, or they can
19 file a civil action and basically get an
20 order when the Sheriff could help them
21 enforce that.

22 I know for private owners,
23 that's probably not the answer they want,
24 but that's right now what the law
25 permits, again, as I confirmed earlier

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2 today.

3 COUNCILMAN SQUILLA: That
4 sounds contradictory to what we have
5 heard, that on a private property, it is
6 the law, the current law, that you cannot
7 encamp on private property. To have
8 somebody go to the Sheriff's Department
9 to evict somebody on their private
10 property does not make sense. I mean, if
11 somebody is on your private property and
12 we engage them with Homeless Services, if
13 they don't want to leave, they have to be
14 removed. That's the law. I mean, I
15 don't know why they would have to go
16 somewhere -- you're putting this onto an
17 individual private property owner to
18 remove them. I don't think that's really
19 what we're looking to do.

20 MS. GLADSTEIN: Maybe I wasn't
21 clear, Councilman, but the first response
22 was if they contact the Police
23 Department, they document that the person
24 does not have permission, then the Police
25 Department can assist them with the

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2 removal of the individuals.

3 I will have to say the Police
4 Department is obviously doing a lot of
5 other things, so I don't know what the
6 timing of that would be, but that was the
7 first option that's available as well.

8 COUNCILMAN SQUILLA: How about
9 Homeless Services? Can Homeless Services
10 inform the individuals that we want to
11 offer you assistance, we want to offer
12 you help?

13 MS. GLADSTEIN: Oh, absolutely.
14 Homeless outreach will go inform the
15 individuals and will encourage them and
16 connect them to services or shelter, and
17 they often will do this on private
18 property.

19 COUNCILMAN SQUILLA: But, I
20 mean, what we have been doing too on
21 private property is if they don't want to
22 go, we let them stay there. Is that
23 something in this new policy that we will
24 see written that will state that that's
25 not the case?

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2 MS. GLADSTEIN: I will have to
3 go back to the policy to see what -- I
4 think it only is addressing public areas
5 and not private areas right now.

6 COUNCILMAN SQUILLA: And so the
7 public areas, what is the policy for
8 blocking the right-of-way?

9 MR. ALEXANDER: Eva, the
10 policy -- let me jump in a little.

11 Is the policy for -- my
12 apologies, Mark, because I'm not as well
13 versed as Eva on the directive or the
14 policy yet. I think the policy for --
15 and, Eva, correct me if I'm wrong. I
16 believe the policy for blocking the
17 right-of-way is that we provide a certain
18 amount of notice, and then after that
19 notice has expired, we could then remove
20 any blockages or any, I'm going to say,
21 tents or structures from blocking that
22 right-of-way.

23 MS. GLADSTEIN: That's correct,
24 and depending upon the amount of time the
25 person or the structure has been there,

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2 then the amount of notice can be
3 adjusted. So that it can be if we're
4 actually observing the tent or the
5 structure going up, it could be as little
6 as taking action immediately, but if it's
7 already up, depending on how long it's
8 been there, as little as 24 hours notice.

9 COUNCILMAN SQUILLA: Okay. And
10 then what we saw in some of the initial,
11 I know we used to do the service days
12 where we actually go there and engage the
13 individual and give them a timeline. It
14 seems like now the policy changed that
15 where we clean up after them and give
16 them some trash bags to keep it neat, but
17 we let them stay there even if that is a
18 problem or a blockage in the
19 right-of-way. Is that true?

20 MS. GLADSTEIN: I can't state
21 that that's correct. I know we're still
22 doing the service days and the clean-ups,
23 and those have never been -- we haven't
24 posted those so that we're saying that
25 they cannot return, so people do return.

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2 There may be incidents where that has
3 occurred, Councilman, but I'm not aware.

4 COUNCILMAN SQUILLA: Okay. I
5 mean, we've been talking about this for a
6 long time. I know at this hearing we
7 were supposed to have that policy in
8 place, and maybe I'm just ornery right
9 now, but it's something that I think we
10 expected to have, because everybody needs
11 the same information. Everybody needs --
12 from the Police to the residents to the
13 Homeless Service people, everybody needs
14 to know the same thing, and giving
15 different people in different districts
16 different information as they handle it
17 differently does not work well citywide,
18 and as we're doing this now -- and I know
19 we're focusing on Kensington, but we're
20 having the encampments also, and whether
21 it's opioid related or mental health
22 related or just homeless related, they're
23 popping up and growing more and more.
24 And as we get colder into the winter
25 months, we need to be able to have

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2 something in writing that we could all
3 work with, whether it's with the City
4 Solicitor, and make sure that we're
5 adhering to that and abiding by it so
6 that everybody does the same thing.

7 We need to have something that
8 you can share with this Committee and
9 maybe share it with the Chair, who can
10 give it to us, that we could then at
11 least go over and look at it and have
12 questions with it and maybe massage it so
13 that we can all be at the same place.
14 It's just unfortunate that we don't have
15 that right now, but I'm hoping that we
16 can have it very shortly.

17 MR. ALEXANDER: That's our
18 intent, and we will provide that. I also
19 think it may be helpful to not only
20 provide it but then set up a briefing for
21 the Committee to sort of walk you through
22 it and then for us to be able to answer
23 those questions in realtime and be able
24 to do that, be able to make that process
25 a little more interactive than just

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2 sending you the document.

3 COUNCILMAN SQUILLA: All right.

4 I'll yield my further questions to

5 Councilmember Sanchez or anybody else who

6 has questions.

7 COUNCILWOMAN BASS: Thank you,

8 Councilman.

9 The Chair recognizes

10 Councilwoman Maria Quinones-Sanchez.

11 COUNCILWOMAN SANCHEZ: Thank

12 you. And I'm going to address some

13 questions to Tumar first, because I know

14 he has to leave.

15 So, Tumar, can you outline for

16 me, because I know we didn't talk about

17 it a whole lot, but a little bit more

18 around the public safety strategy

19 increase. I think one of the things in

20 this presentation and more for the record

21 is that the Police Department did

22 reconstitute its Narcotics Bureau and

23 that part of what we're talking about,

24 community policing, is not going to be

25 the piece that is as targeted as the

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2 narcotics piece that with COVID had not
3 been active there. I think that's an
4 important part of this, because
5 everything we talk about human services
6 is important, but people want to know how
7 are we going to move away from the
8 open-air markets.

9 MR. ALEXANDER: Thanks,
10 Councilwoman. I'm actually going to
11 defer to Deputy Commissioner Joel Dales.

12 And just to let you know,
13 Councilwoman, I resolved that conflict,
14 so I can stick around a little longer,
15 but DC Dales, if you want to call DC
16 Dales and his team, including Captain
17 Rosario and the inspector. I believe we
18 have the new Chief Inspector for
19 Narcotics and others on the call.

20 DC Dales.

21 DEPUTY COMMISSIONER DALES:
22 Yes. How are you? Good evening,
23 Chairperson Bass and Councilmember
24 Quinones-Sanchez. How are you?

25 So are you referring to the

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2 community relations portion of it?

3 COUNCILWOMAN SANCHEZ: No. I
4 want the narcotics one. I think part of
5 the challenge for folks is always
6 understanding that, without disclosing
7 all of what you're going to do, but I
8 think people need to know there's a new
9 structure, new leadership, and there's
10 going to be a focus.

11 DEPUTY COMMISSIONER DALES:
12 Absolutely. So what I'll do, I'll let
13 Chief Inspector Flocco, who oversees the
14 Narcotics Bureau, you can chime in and
15 explain your strategy and plans.

16 CHIEF FLACCO: Good afternoon,
17 Councilmember Bass. Good afternoon,
18 Councilmembers. As I have discussed
19 previously, I was given the opportunity
20 to kind of reform the Narcotics Bureau as
21 it relates to the East Division. I
22 received 14 members from East Division
23 that are now detailed to the Narcotics
24 Bureau. Those individuals will target
25 organizations within the Narcotics

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2 Bureau. But Councilwoman Sanchez, as you
3 and I talked the other day, the Police
4 Department is only responsible for the
5 enforcement of the narcotic laws.

6 One of the problems that I see
7 is once we make arrests, we kind of move
8 away from that area and go after another
9 group, and we don't do anything to hold
10 that area where we just made those
11 arrests. So as you well know, based on
12 those discussions, once we make an arrest
13 of a targeted area concerning a targeted
14 group, that's when other agencies have to
15 come in to hold that area, hold that
16 land, and that's not something the Police
17 Department can do, but it's working with
18 the OIG and with Noelle and your office,
19 the goal is that -- we'll take it almost
20 block by block, organization by
21 organization and prevent them from moving
22 back into that area.

23 So once we decide -- once we
24 have enough evidence or once we have
25 enough probable cause, take a particular

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2 organization down. Working through our
3 City partners, we'll let them know what
4 we did, and then that's when the other
5 City agencies are going to have to come
6 in and do something about that.

7 More so it's not just attacking
8 the street-level drug sales. It's more
9 than that. It's attacking the supply
10 chain as well as the financial end of
11 this. If we arrest somebody off the
12 street for selling narcotics, that
13 individual goes away, goes to jail, is
14 taken off the street, and all's the drug
15 dealers do is bring in another individual
16 a couple hours early, give him some
17 overtime to continue to sell. What we
18 want to do is, we want to take the stash
19 houses where you find the drugs, which
20 are traditionally not in the same area as
21 drugs are being sold, we want to get the
22 stash houses for the United States
23 currency and we want to hurt drug
24 dealers, and that's my job and that's
25 what I've been tasked with, to hurt drug

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2 dealers, and that's what I'm going to do.
3 But I can't do it by myself, and that's
4 where the other City agencies are going
5 to get involved in helping us do that.

6 COUNCILWOMAN SANCHEZ: Thank
7 you. That was an important piece,
8 because folks will -- when you hear from
9 the public testimony, I want to ensure
10 folks that we are not doing the same
11 thing as it relates to our public
12 strategy, and we appreciate the
13 complement of officers and support for
14 Captain Rosario, because the narcotics
15 piece of this is not done by the patrol
16 officers. That piece of it is to provide
17 the daily public support by patrol
18 officers through the bike and the walking
19 folks. But I also want folks to know
20 that the narcotics strategy will be
21 different, will be targeted as opposed to
22 what has happened in the past.

23 So thank you very much, Chief,
24 and I look forward to continuing to work
25 with you on that.

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2 So, Eva, let me go to you. I
3 know the issue of a policy versus
4 enforcement is much more complicated as
5 it relates to encampments and the tent
6 structure. Give us a timeline of when
7 you think you will have a clear cut what
8 we're going to do.

9 I want folks to know that when
10 they call 311 or when they call homeless
11 detail to report an encampment, what
12 should they expect? What will they see
13 as it relates to illegal encampments and
14 structures on private property as well as
15 public property?

16 MS. GLADSTEIN: So as we
17 testified earlier, we're just finalizing
18 some procedures literally down to like
19 who does what when and to the point that
20 was made by the Councilman, so that
21 there's real clarity with Police, with
22 Homeless Outreach, and other folks. We
23 expect this will be finalized in January.

24 We also, I think, failed to
25 mention that we are working to set up a

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2 new Encampment Resolution Team and expect
3 that will be available as of January as
4 well, and they will complement the other
5 actors who are already participating in
6 doing this work and be an added resource.

7 Again, to the point that was
8 made earlier, this will be a citywide
9 strategy, but for now, we'll be piloting
10 the Encampment Resolution Team in the
11 Kensington area.

12 COUNCILWOMAN SANCHEZ: Thank
13 you. I also want to thank you for
14 highlighting and acknowledging that we
15 heard the community and that we're going
16 to move some of the services that's
17 created some of the challenges from the
18 area, and I want to acknowledge
19 Prevention Point and their leadership who
20 are working with us about that.

21 There's a recognition -- this
22 is not about people not having empathy
23 for the work or understanding of the
24 work. We are now past that argument. We
25 are now in a restore Kensington mode.

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2 And so I appreciate the fact that, Tumar,
3 under your leadership with Noelle and Eva
4 and others, we're moving that.

5 So we mentioned that we are
6 going to close the thrift store respite
7 center as of April 2021. Eva, could you
8 say date certain for the Harrowgate
9 respite center? Do we have a date for
10 that one?

11 MS. GLADSTEIN: We have the
12 date of June 2021. I'm just not sure if
13 it's the beginning of June or the end of
14 June.

15 COUNCILWOMAN SANCHEZ: Okay.
16 So that's important.

17 The other issue, as we move to
18 make this a citywide effort, the
19 recognition that 76 percent of our needle
20 exchange work is done in Kensington where
21 there's 13,500 unique folks being served
22 from all over the City. One of the
23 challenging numbers that has been debated
24 by the community, and you'll hear from
25 them later, is the five million needle

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2 number, and I appreciate the fact that
3 you recognize it's going to take a couple
4 of years to move to mobile site. What is
5 the Administration prepared to say today
6 that's going to happen in the next six
7 months around the reduction of that
8 needle exchange? The request by
9 Councilmember Squilla and I is that we
10 want to see that number reduced by 50
11 percent. So tell me what is going to
12 happen immediately, as that has been one
13 of the most traumatizing datasets that
14 has been shared with residents.

15 MS. GLADSTEIN: Yeah. I don't
16 want to misspeak and I don't have the
17 exact information. From the
18 conversations I've had with Prevention
19 Point, I believe that they think that
20 there are about two million of those
21 needles of the five million or close to
22 five million that can be removed from
23 distribution in Kensington. I don't have
24 the exact date. I would say six months
25 is a good approximation, but I can't

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2 commit them to that right now. But they
3 did believe that from that 4.8 or 4.9,
4 about two million could be removed
5 through some of their early work.

6 COUNCILWOMAN SANCHEZ: We will
7 make sure that we have a hearing prior to
8 the summer. I know a lot of work is
9 going to be happening in the winter and
10 it's a different approach, but I want to
11 assure people that the commitment by the
12 Administration and again this team that
13 is on this call from the Administration
14 is, we will have a summer plan and it
15 will look different than it has the last
16 three years. So I just want to be clear
17 that we will have this conversation in
18 March, and I want folks to be really
19 certain about what they're going to see,
20 what they should expect as it relates to
21 the summer.

22 I also want to thank you around
23 the dashboard and around -- the request
24 for residents to be able to see as
25 realtime as possible who is in the

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2 neighborhood. Identifying through
3 uniform who we're interfacing with I
4 think is going to add to our attempt to
5 restore the trust that we have lost from
6 the residents of Kensington. I think
7 that kind of information is going to be
8 impactful in them seeing some of that
9 transparency and some of the information.
10 And I don't want to get into the nuances
11 around the expansion of PAD, who is
12 getting service, connectivity. I'm
13 expecting that that dashboard and the
14 creation of that dashboard is really
15 going to show us who we help, how many
16 times it takes to help someone, and how
17 we're interfacing with folks so that
18 people know what is readily available.

19 As it relates to the issue of
20 the clean-up crew, I just want to be
21 clear. That just started right before
22 Thanksgiving, right?

23 MS. GLADSTEIN: Yes.

24 COUNCILWOMAN SANCHEZ: And so
25 they will be out there seven days a week.

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2 In addition to the permitting
3 and the policy, can we get a commitment
4 from the Administration that we are going
5 to limit distribution to certain
6 locations? I understand these are
7 well-intentioned folks, but there has to
8 be a system about what we're permitting
9 and people just can't go where they want
10 to go, right? I think part of what we
11 have to move to is, as we have done with
12 some success at Ruth and Clearfield, can
13 we identify and limit those permits to
14 one or two locations versus what we see
15 now?

16 I think all of you will agree
17 that the encampment on the 3200 block of
18 Kensington has created a daily
19 distribution at Kensington and Allegheny
20 in the transportation center that impacts
21 20,000 people that have to move through
22 there. So that has a direct impact on
23 the daily commuting life of folks, let
24 alone when the school starts and we have
25 Sheridan and Elkins.

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2 Can we agree that that
3 permitting cannot be open-ended and we
4 have to be limited, and can we work with
5 the community around those selected
6 sites? Because that -- and I talk to
7 some of these folks and I try to
8 discourage them as much as possible, as
9 the captains do. We need to limit it,
10 because they can't just pop up where they
11 want, and they can't be in the
12 transportation center where we have
13 children and workers who are trying to
14 commute daily.

15 Tumar.

16 MR. ALEXANDER: I know Eva is
17 going to talk, but I just want to add, we
18 can commit to working on that. One of my
19 concerns is that -- and I think it's a
20 legal concern and we all need more advice
21 on -- is that when we were sued a few
22 administrations, maybe last
23 administration, by Chosen 300 in Federal
24 Court, which allowed them the ability to
25 be able to serve through these type

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2 activities in places, and we couldn't
3 limit that. So I will want to get
4 advice, legal advice, from our Law
5 Department, from others to tell us within
6 legality what can we do in terms of
7 permits and those activities.

8 Like Eva said, we can certainly
9 chase some of these folks -- and
10 understand that they have the best
11 intentions of heart. We can certainly
12 chase some of these folks, give them
13 warnings. We can certainly guide some of
14 these folks to areas. I want to know
15 what can we legally enforce them to do as
16 it relates to specific locations.
17 Understand, it may be different on
18 private property than it is on public
19 property, but I do think we need some
20 guidance from Law in regards to that
21 lawsuit. And I understand once we lost
22 that lawsuit, you know, that was talking
23 specifically about the Parkway, but
24 I'm -- so I need the guidance to see if
25 that applies citywide, which I'm assuming

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2 it does, and what authority we have to be
3 able to tell folks, hey, you could do
4 that in, you know, area A, B, and C, here
5 are the areas that's off limits, and try
6 to work with them.

7 I think most times, like
8 Councilman Squilla said, that when you
9 approach these folks and, like Eva said,
10 you give them a warning, there are good
11 intentions and will be willing to work
12 with us. I do think there are some that
13 we have encountered, I think all of us on
14 this call and certainly the residents,
15 who no matter how many times we say, you
16 know, can we help you better with this,
17 can we even -- can you give us an update,
18 say, hey, I'm going to be out here from
19 these hours, then we could coordinate
20 trash pick-up, there are some folks who
21 will work with us, there are some folks
22 who will not. I want to make sure that
23 legally we are doing what we can do to
24 sort of mandate and get to that point
25 that you're talking about, Councilwoman.

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2 COUNCILWOMAN SANCHEZ: For
3 public safety, again, we have the Health
4 Code issue. Right now they are setting
5 fires to keep warm at night. What other
6 kinds of emergency triggers does that
7 give us an authority to remove stuff?
8 Because right now, as we all know, around
9 the Walgreen and on the 3200 block of
10 Kensington, they actively are lighting
11 fires at night to keep warm, which could
12 cause another problem, because they're
13 right in front of businesses.

14 What, if anything, in guidance
15 has been discussed around that?

16 MR. ALEXANDER: I'm not sure if
17 I've been involved in any of those
18 conversations. I certainly can bring it
19 up in this same conversation that we plan
20 to have with Law and with the new City
21 Solicitor, City Solicitor Cortes.

22 COUNCILWOMAN SANCHEZ: Okay.
23 Thank you.

24 MS. GLADSTEIN: If I could just
25 add a little bit on the other -- the

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2 Federal Court ruling was applicable

3 throughout this city to all parkland.

4 What the Health Department has done in

5 the last month upon conversation is to

6 require the permit to have a much more

7 limited geographic area, because it used

8 to be the permit would say it could be a

9 half mile here, there or a quarter mile,

10 and now it's an intersection or a block

11 and that the permit is only approved for

12 that place. So that's one step we were

13 able to take, and we would have to

14 explore, as the Managing Director said,

15 to see what more we could do.

16 COUNCILWOMAN SANCHEZ: Okay.

17 Well, just be aware that every night in

18 the last -- at least the last three

19 nights at night when I have gone out

20 there, they have been burning in trash

21 cans to stay warm, and that is an

22 imminent danger and causes that because

23 of the density around that. So we need

24 to get some sort of direction and

25 understanding.

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2 I just want to real quick for
3 Noelle for the purposes of communication,
4 what are we prepared at the next -- the
5 monthly meetings that we are having, will
6 there be a meeting in December or January
7 where we will have more clarity around
8 this encampment strategy and what people
9 can expect to see?

10 MS. FOIZEN: So the next
11 meeting is the Elbira (ph) meeting on
12 December 21st. I do not believe we'll be
13 talking about the encampment strategy at
14 that meeting, but the next meeting with
15 the civics is in January, and we can
16 definitely have that on the meeting
17 agenda.

18 COUNCILWOMAN SANCHEZ: Okay.
19 Thank you.

20 MS. FOIZEN: I'm sorry. Just
21 to talk about the fire question that you
22 had. I didn't have a chance to brief
23 Tumar or Eva on that, but that has been
24 flagged by the Police Department, and I
25 started working with the Fire Department

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2 to try to figure out what we can do about
3 that, because it is a huge public safety
4 concern. So we are meeting and talking
5 and trying to figure out all that
6 strategy, and we'll share that with you.

7 COUNCILWOMAN SANCHEZ: Okay. I
8 want to leave -- I don't know if the rest
9 of my colleagues -- I know we have other
10 panels and we've delayed this hearing, so
11 I don't want to manipulate any more time.
12 I just want to make sure that for the
13 purposes of folks who are watching and
14 the residents, all of the materials
15 related to this hearing and your
16 testimony and your real details around
17 some of this stuff is available. They
18 can contact our office or obviously the
19 Chief Clerk's Office and get this
20 information. There's a lot of
21 information.

22 I particularly want to thank
23 you for the information around outreach
24 and in some of the hotspots, and I
25 encourage folks to get those documents

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2 and view them and to give us any feedback
3 on additional sites that they may see
4 that is not there.

5 Lastly, I want to just give
6 Deputy Commissioner Keith Warren an
7 opportunity to speak to the level of
8 tonnage and trash that we have been
9 collecting. Again, the two people that
10 people appreciate the most, because it
11 gives direct impact, has been the Police
12 response to some of the issues and then
13 the Department of Trash.

14 So if he can briefly come
15 forward and speak to kind of the level of
16 volume that we've been seeing, because we
17 have increased volume citywide because of
18 this pandemic. I think no one has an
19 idea of the amount that has been in
20 Kensington, some driven by some of the
21 food distribution, some by obviously the
22 folks with goodwill, but also people
23 really being on lockdown in this
24 community.

25 And so thank you to DC Warren

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2 and CLIP members. We really, really do
3 appreciate all these folks, and I really
4 want to thank them personally in the way
5 that they treat residents and respond to
6 those multiple calls that we have.

7 DC Warren.

8 You're muted.

9 DEPUTY COMMISSIONER WARREN:

10 Pardon me. I'm sorry. Can you hear me
11 now?

12 COUNCILWOMAN SANCHEZ: Yes.

13 DEPUTY COMMISSIONER WARREN:

14 Can you hear me?

15 COUNCILWOMAN SANCHEZ: Yes.

16 DEPUTY COMMISSIONER WARREN:

17 Good afternoon, everyone. I'm Keith
18 Warren, the Deputy Commissioner of
19 Streets for Sanitation Operations. I'd
20 like to thank all the Councilmembers
21 present and the Managing Director for
22 inviting me to speak about the situation.

23 For any of you who lived
24 through the summer in Philadelphia, as
25 Councilwoman stated, trash tonnages aided

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2 by the pandemic was severely increased in
3 the City itself and exponentially in the
4 opioid-affected area. Just referring
5 back to some of the stats that Noelle
6 gave earlier, during the three-week
7 summer initiative where we diverted a
8 crew, one single crew, which is all we
9 could actually spare because of the rest
10 of the trash situation in the City, in
11 that three-week period the crew collected
12 360.61 tons of trash in the opioid area.
13 To put that in perspective, a normal week
14 of trash collection in our heaviest
15 neighborhood is about 420 tons. So in a
16 three-week period, in a very condensed
17 area in Kensington and Harrowgate, one
18 crew collected over 360 tons of trash.

19 In addition to that, over a
20 six-week period assisted with Noelle and
21 complaint-driven trash services based on
22 the transient population in Kensington,
23 my crews have served out of a 13-man
24 short dump crew, which is responsible for
25 the whole city, but about 35 percent of

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2 our calls are down in Kensington. Over
3 the last six weeks, we've served 25
4 complaints from the Opioid Response Team,
5 and that has netted -- I want to get this
6 number right -- 1,093.89 tons of trash
7 and debris.

8 So the problem, as everyone has
9 stated, is real, and if you combine
10 normal trash collection with what's being
11 added to by the opioid problem and
12 compounded by the virus, the tonnages are
13 just through the roof.

14 I will call particular
15 attention to the same block that
16 Councilwoman just spoke about, the 3200
17 block of Kensington Avenue. We service
18 that block every day, every day at 7
19 o'clock in the morning, and I guarantee
20 you by 9 o'clock in the morning, you
21 can't tell that we've been through, and I
22 can verify that you can't tell that we've
23 been through by the amount of calls I get
24 about it every day.

25 So that's just an example. We

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2 are working very closely with Noelle and
3 the Police and MDO and Council on some
4 strategies, but even if we service some
5 of these places every day, the community
6 buy-in, the programs that are being
7 fielded by the community, we need all our
8 partners to help us to assist with these
9 problems, and hopefully we can come up
10 with a long-term solution to solve the
11 issue.

12 Council has been very
13 supportive. I'd like to thank all the
14 Councilmembers on board in this call.
15 You've all been working very well with
16 the Sanitation Department, providing us
17 with resources and being patient and
18 understanding that we can't just drop
19 normal core services and run and address
20 each and every complaint that we get, but
21 we do try to make sure that we can
22 accommodate the request of the people,
23 because we do realize that certain parts
24 of the City is being held hostage by
25 trash and litter and things like that,

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2 and we're doing all we can to answer
3 those calls and take care of the place as
4 quickly as possible.

5 Thank you.

6 COUNCILWOMAN SANCHEZ: Thank
7 you. Thank you, Deputy Commissioner
8 Warren. And, again, we will continue.
9 We will work with you.

10 I just want for the folks, for
11 the residents, we are working with the
12 Department of Streets on a camera
13 strategy, and both Councilman Squilla and
14 I are prepared to provide significant
15 resources so that we can really tackle
16 what has been the more egregious daily
17 dumping situations.

18 As I tell everyone, we have had
19 a hepatitis A challenge prior to the
20 pandemic. We have a lot of human waste,
21 and when we see trash, that means someone
22 had to clean up to come outside their
23 house, and I'm not going to ask people
24 who have to clean human waste to come
25 outside their house to then take that bag

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2 in their house. And so as ugly as it
3 looks, after I've been cursed out several
4 times by block captains who do this
5 daily, I think the City and the Streets
6 Department have worked with us. I'm just
7 going to ask folks particularly when
8 they're taking out loads of trash because
9 they're cleaning up, please call 311 and
10 let us know so that we can better
11 coordinate that. But I'm not going to
12 ask anybody who has to clean human waste
13 to come outside their house to take that
14 bag back in their house. We just need to
15 know about it so that we can help
16 facilitate it, and that's part of the
17 strategy around the localized dumpsters
18 in the area that we'll be working
19 towards. But I just want folks to know
20 we hear you, we've listened, and we are
21 not going to -- we're going to be
22 empathetic to the fact that if you
23 cleaned up -- so any bags that folks see,
24 that means somebody took the time and
25 cleaned up -- we're going to pick it up.

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2 As my block captains -- I won't
3 shout them out, because they curse me out
4 all the time -- say, I'mma put it there
5 and y'all going to come pick it up,
6 Maria. And, yes, we will. But we do
7 that because of the coordination with the
8 City and the Department. So I thank you
9 very much.

10 Madam Chair, I want to --
11 because we have started this hearing so
12 very late, I want to give an opportunity
13 to the community residents who have been
14 so patient.

15 COUNCILWOMAN BASS: Absolutely.

16 COUNCILWOMAN SANCHEZ: They've
17 been patient for three years and now
18 they've been patient for four hours. So
19 that they can put their testimony on the
20 record.

21 Thank you, Tumar, Noelle, Eva,
22 and all of the team for working through
23 this Restore Kensington list. We got a
24 lot of work to do. None of us are going
25 anywhere, and we're committed and we'll

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2 continue to hear the residents out.

3 Thank you, Madam Chair.

4 COUNCILWOMAN BASS: You're very
5 welcome, and I want to thank everyone
6 from the Administration for being here
7 and for your testimony. Greatly
8 appreciate it.

9 If we could have, Madam Clerk,
10 if we could have you call Panel No. 3.

11 THE CLERK: Sonja Bingham,
12 Darlene Burton, Brooke Feldman, Alicia
13 Crosby, and Shannon Farrell.

14 COUNCILWOMAN BASS: If we could
15 have folks come in that order and state
16 your name for the record in that order
17 and proceed with your testimony. The
18 first person was Sonja Bingham. Sonja,
19 are you there?

20 MS. BINGHAM: Good evening.
21 Yes. Hi. My name is Sonja Bingham.
22 Sonja as in Tonya. I am a new Harrowgate
23 resident. I moved here from East
24 Kensington in June of 2019. I sold my
25 house because my children are going to

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2 college and I don't want them to incur
3 any college debt.

4 I have never really ever
5 actually lived in a community of color
6 before. This is my first experience, and
7 it has been a nightmare. It has been
8 exhausting. It has been a real
9 eye-opening experience for me to see the
10 disparity of resources of common sense
11 items that plague our community.

12 A typical day for me is, I get
13 up in the morning. I go for my morning
14 workout, walk, whatever, and then I come
15 back. I get my rake, my broom, my
16 shovel, my bag, and I get to work, and I
17 go up and down Madison, I go across on
18 Jasper. Just recently I put my foot
19 down. I'm no longer picking up feces,
20 right? Like I'm just not doing that
21 anymore. I've had it.

22 And I look at -- I think most
23 disappointing in this is, what I'm
24 starting to realize is that the narrative
25 that I've heard all my life about black

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2 lives don't matter, people of color, you
3 know, are given less resources and less
4 consideration is actually true. We can
5 take this whole situation back to 30
6 years ago when we had the crack epidemic.
7 Our community was criminalized. We were
8 thrown in jail because the white
9 communities were being adversely affected
10 by the crack epidemic. In this
11 community, you have the children and the
12 grandchildren have the same crack
13 criminals that were thrown in jail -- I'm
14 hearing somebody talking -- and we're
15 watching --

16 COUNCILWOMAN BASS: Can I
17 ask -- I'm sorry, Sonja.

18 Can I ask if you are not Sonja,
19 please mute your phone so that we can
20 hear. There is some background noise.
21 Thank you.

22 MS. BINGHAM: Thank you.

23 And so we're watching now once
24 again our lives not being prioritized.
25 We're seeing now that the opioid crisis

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2 has changed color, it's now a white
3 community, mainly from what I see living
4 here in my community. We now have to be
5 understanding. We now have to be
6 patient. We now have to watch as same
7 issues, drug addiction, is now all of the
8 sudden miraculously we need resources for
9 these people. And I'm not saying don't
10 supply resources. I'm not saying nobody
11 should have food, they shouldn't have
12 health that they need, but it should not
13 be my problem. I don't have a problem
14 with drugs. I do more than my fair share
15 of due diligence in being a person in my
16 community that I embody be the change
17 that you want to see, and my resume is
18 full of it.

19 But what I'm seeing is that
20 when we ask for simple things like do you
21 know there's a hepatitis A breakout, I
22 have not seen the Streets Department
23 clean my street, except for one day when
24 we had the protest, and it was like a
25 miracle. It was like seeing a unicorn

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2 come down my street. And it's crazy,
3 because I've lived all over the City.

4 When I first moved here from New York, I
5 lived in Center City. Streets were
6 cleaned. We never had this problem.

7 I also have watched how we have
8 all of these organizations that have all
9 of these meetings, and to the credit of
10 Liz Hersch and her team and Noelle, she
11 invited us in to have some discussions
12 about the trash that these meal
13 engagement people -- and just by us being
14 able to have some input to give our
15 perspective, we started to see a
16 difference in that.

17 So we have a lot of these
18 organizations who, I might say, are not
19 necessarily serving their own
20 self-interest by creating
21 resolution-driven initiatives.
22 Management issues, management-driven
23 issues are more what they're involved in,
24 because it would go against their
25 self-interest to resolve it, right? You

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2 view our Prevention Point, you need to
3 give out needles and all these things,
4 you would shut down if the opioid crisis
5 was resolved.

6 So we see a lot of these
7 conversations happening, and the
8 residents, there's a community of
9 residents that live here, and we're not
10 being brought to the table to be a part
11 of the conversation. We don't want to
12 keep anything from anybody, but we want
13 our voices to be heard, because we can
14 help with some solutions and resolutions,
15 as just proven with the trash and the
16 clothing that I pick up every single day
17 because somebody gave somebody a new
18 jacket and I can tell who is getting
19 what, because on any given day, it's
20 either somebody got new underwear,
21 somebody got new socks, somebody got
22 jackets, somebody was giving out jeans.
23 I know because I clean it up, and it's
24 just -- it shouldn't be this exhausting
25 to live in the City.

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2 I watched how we have the
3 encampment at the Ben Franklin Parkway.
4 Within six months, it was resolved, and
5 I've sat here listening for months. We
6 had our first meeting with multi City
7 agencies. For months we listened and
8 waited and watched you strategize on how
9 to resolve this, but miraculously when an
10 encampment was in a portion of the City
11 where the demographic and the tax bracket
12 was completely different, it was
13 resolved. Yet we're trying to figure out
14 how to do things that are just common
15 sense. People can't be on the street.
16 They can't be on your property. They
17 can't be. You have to move them along.
18 If people get arrested, you see them
19 shooting up drugs, you give them a state
20 order. They should not be allowed to
21 keep coming back to the area in which the
22 blight is continuing to be a problem for
23 the residents.

24 We want to know why we have the
25 drug dealers. Well, if I'm Starbucks,

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2 I'm not going to open up my next location
3 in a town of 100. I'm going to go to
4 where there's a town of 10,000. You want
5 to know why we have so many drug dealers?
6 Because the drug addicts are allowed to
7 live on our streets. That's why we have
8 open-air markets.

9 I mean, some of these things
10 are really not that difficult to -- if we
11 just think about it just from a purely
12 topical point of view. We can't allow
13 people to keep coming back. We will put
14 you in a police diversion program. You
15 can no longer come to this area.

16 There are things that I believe
17 are well-intended that are coming here,
18 but they're not for the residents. We
19 are being overlooked, and quite frankly,
20 we're tired of it. We don't want another
21 Prevention Point. We don't want a
22 Safehouse. We don't want any more
23 services being brought to our community
24 that don't directly benefit the
25 residents.

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2 When was the last time there
3 was a meeting about what can we do for
4 the residents? Can we get them better
5 lighting? Can we start to fix up the
6 facades? Can we start to fix up their
7 sidewalks? What can we do to try to make
8 reparations for the years of neglect, for
9 the years of non-oversight that has
10 plagued this community?

11 At some point, we have to start
12 to begin to have those kinds of
13 conversations, because we're watching our
14 kids see that bad behavior is what gets
15 the attention, not the people who are
16 living here. It's very, very difficult
17 for me to get services. If I didn't have
18 contacts with people within the City, I
19 wouldn't get some of the things that I
20 have done. I should not be the
21 exception. This should be available to
22 everyone, and it's not. It's really just
23 not.

24 Part of the problem with the
25 trash is as a direct result of people

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2 being allowed to live here. It is the
3 O.K. Corral. It is wide. It is well
4 known throughout the tri-state area, I
5 might say, as just last witnessed by the
6 last looting incident we had when we had
7 the second bout of civil unrest. And you
8 knew that our corridors were compromised,
9 and our resources were pulled from our
10 community to go protect West Philly and
11 Center City, and we were left with
12 nothing. Our pharmacies were looted. We
13 had -- seniors could not get their
14 medication.

15 We are continuously overlooked,
16 left out of conversations, and I'm
17 really, really, really disappointed and
18 very much -- I wanted to not believe a
19 lot of the black lives don't matter, but
20 I'm seeing that there's a real valid
21 argument in it.

22 And I thank you for your time.

23 COUNCILWOMAN BASS: Well, I
24 thank you for your time and for really
25 showing exactly how you feel, letting us

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2 know exactly how you feel and some of the
3 challenges that you've been through.

4 Do we have any questions from
5 members of Council?

6 (No response.)

7 COUNCILWOMAN BASS: No? Okay.
8 So we'll go to our next speaker. Thank
9 you very much, Ms. Bingham.

10 Our next speaker is Darlene
11 Burton. Ms. Burton, are you here?

12 (No response.)

13 COUNCILWOMAN BASS: Darlene
14 Burton?

15 (No response.)

16 COUNCILWOMAN BASS: If not,
17 we'll move on. If she comes on, we will
18 come back. We will circle back to her.

19 Ms. Brooke Feldman.

20 MS. FELDMAN: Hello.

21 COUNCILWOMAN BASS: Are you
22 here? Okay. Hello, Brooke.

23 MS. FELDMAN: I am here.

24 Hello.

25 COUNCILWOMAN BASS: Hello. How

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2 are you?

3 MS. FELDMAN: I am good. Thank
4 you for sticking with us today.

5 COUNCILWOMAN BASS: Absolutely.
6 Please state your name for the record and
7 begin your testimony.

8 MS. FELDMAN: Sure. My name is
9 Brooke Feldman and I want to thank you
10 for the opportunity to testify today.

11 I want to check to see if
12 you're hearing an echo, because I hear an
13 echo on myself. Let me take it out.
14 Does this sound better?

15 COUNCILWOMAN BASS: I see
16 Councilwoman Sanchez nodding.

17 MS. FELDMAN: Okay. I'll take
18 the nod.

19 So thank you so much for the
20 opportunity to testify today. I know
21 that everyone had a long day, and it's
22 extremely meaningful that you all are
23 sticking with having this hearing even
24 after hours.

25 I submitted my written

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2 testimony, and I just want to kind of
3 focus on -- there were two
4 recommendations that were in my written
5 testimony. One is that we have a
6 tremendous opportunity with the opening
7 of the Commissioner position for the
8 Department of Behavioral Health and
9 Intellectual disAbility Services to
10 really look at the leadership. I
11 appreciate the hard work of all our City
12 officials, but I can tell you as someone
13 who has attended a number of these
14 hearings -- and this is my first time
15 testifying in front of this Committee. I
16 listen in and I attend these hearings
17 religiously, and I appreciate the hard
18 work that is being done, but I think the
19 evidence is in front of us that what has
20 been happening isn't working. And I
21 appreciate Councilmember Quinones-Sanchez
22 mentioning that whole insanity, repeating
23 the same thing, expecting different
24 results. I don't know if she read my
25 testimony and stole that line, but that's

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2 what it feels like, you know. It really
3 does feel like that we're repeating the
4 same thing and expecting different
5 results, and it's consistently the
6 special initiatives and the pilot program
7 and having a steering committee with the
8 same people discussing the same things
9 and expecting to come up with different
10 solutions. And for those of us who are
11 out here, both for folks like Sonja, who
12 I've come to love and appreciate, who is
13 fighting for her community, and then for
14 folks like me who I was really focused on
15 fighting for people who are struggling
16 with homelessness and health challenges
17 and substance use disorders, I think for
18 all of us, we look around and we just see
19 that it is not happening and it's time
20 for something different.

21 So the one recommendation in my
22 testimony is that we see the opportunity
23 for new leadership, just like we saw the
24 opportunity when the Philadelphia Police
25 Department Commissioner position opened

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2 up. There was an opportunity for
3 stakeholder input, stakeholder
4 involvement, and just hearing that the
5 community -- I guess recognizing the
6 community has a voice and who is serving
7 them in these leadership positions.

8 But the second recommendation
9 is really what I want to focus on and,
10 that is, I think over the past few years,
11 besides learning how the dog and pony
12 show plays out on these hearings
13 sometimes, what I learned that's even
14 more important is that when we stop and
15 listen to each other, we actually can
16 come up with more solutions than when
17 we're stuck fighting with each other. I
18 think for years, it was harm reduction
19 advocates versus residents, right? And
20 it was like if you were someone who was
21 fighting for the people who were
22 struggling with homelessness and
23 addiction, it was easy to be dismissed as
24 someone who didn't care about the
25 community resident concerns. And then

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2 vice versa. I know that residents were
3 told if they didn't support Safehouse or
4 they didn't support Prevention Point or
5 they were saying things like we want this
6 out of our community, they were dismissed
7 as not caring about people who struggle
8 with addiction or homelessness. And for
9 me when I sat down and kind of shut up
10 for a minute and listened to folks like
11 Sonja, like Shannon, like other
12 residents, like the Councilwoman, what I
13 realized is that we agree on far more
14 than we disagree on, and that it's not
15 that people who are focused on those
16 struggling with addiction don't care
17 about the impact of residents and it's
18 not that residents don't care about the
19 struggles people experiencing
20 homelessness and addiction go through,
21 and that we actually agree on more than
22 we disagree on.

23 So the second recommendation in
24 my testimony was to really have -- let me
25 actually read it, because I think I wrote

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2 it better than I'll say it -- an
3 organized, ongoing, meaningful convening
4 of Kensington residents, civic
5 association leaders, people who use drugs
6 and those who work with them, harm
7 reduction advocates, anti-homelessness
8 advocates, and treatment and homeless
9 service providers, along with City
10 officials and elected officials, to
11 really go through the struggle.

12 In my time working for one of
13 our bureaucracies in this city, I had --
14 I worked under Roland Lamb, and he used
15 to always say the struggle continues, but
16 the victory is certain, and for the first
17 couple years I didn't know what the hell
18 he was talking about and it took a little
19 while for me to understand that we have
20 to struggle through some things in order
21 to get to the other side and to get
22 solutions. And for me, the most
23 meaningful, I think, endeavor that I
24 experienced over the past couple of years
25 and when I had the most hope, I can tell

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2 you it's not sitting in one of these
3 hearings hearing updates of all the
4 amazing things that are being done,
5 because my friends are still out there
6 dying and I still get calls from Sonja
7 about trash on K&A, right? The most
8 meaningful sort of moments of progress
9 for me have been having these
10 conversations of struggles and realizing
11 that we agree on so much and that if we
12 work together, we're going to get
13 somewhere, but we need support and having
14 an organized way of doing that.

15 And so that's my big ask, is
16 that we have some way of bringing
17 together community folks, harm reduction
18 folks, City officials, and that instead
19 of people sitting in buildings or I guess
20 now on Zoom calls and coming up with
21 solutions, that we engage everybody who
22 is out here living it and seeing it.

23 And some of the things that I
24 know that we can agree on, because I've
25 had these conversations, are a sanctioned

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2 encampment. That was something that was
3 promised back in July or August, and
4 there's been no movement that I've seen
5 on that, and in a location that works for
6 residents and for people who use drugs
7 and for those of us who work with them.
8 I don't think it is an unreasonable idea
9 that we can come together, have some
10 difficult conversation, use language that
11 maybe one or the other doesn't like, but
12 come up with a location that works for
13 everybody.

14 Also getting rid of the City's
15 tone-deaf smoking policy. There are
16 people who will leave the streets of
17 Kensington today if they could go into
18 inpatient addiction treatment and not be
19 told that they could not go outside to
20 smoke a cigarette.

21 I am all for people quitting
22 smoking. I know most of you on this
23 meeting have heard me talk about this. I
24 want people to quit smoking, but when we
25 have people who are injecting fentanyl

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2 who say, I want to go into treatment but
3 I won't because I can't go outside to
4 smoke, that's another person who is
5 littering, whose needles are on the
6 ground, who is still experiencing
7 homelessness in Kensington and
8 contributing to the problem. So getting
9 rid of that policy is something that
10 people from all sides of the argument
11 seem to agree on, but yet we still have
12 this policy.

13 And I want to say for the
14 record that there are many of us who
15 would identify as harm-reduction
16 advocates who are heartbroken over the
17 conditions that kids living in Kensington
18 have to live with. I heard a story of
19 there being a shooting and a body laying
20 on the ground on Emerald Street and
21 little kids walking by and stopping and
22 seeing that body on the street. And I
23 can't even imagine my nine-year-old
24 seeing a body laying on the street and
25 how that would impact their entire life.

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2 And that is normal, and that shouldn't be
3 normal. And so I care about that, and I
4 know many of my comrades in harm
5 reduction care about that.

6 And the last thing, and then
7 I'll stop, because usually I am -- I get
8 cut off constantly when I am in these
9 hearings. Revolutionizing our treatment
10 system. There is nothing that is more
11 frustrating as somebody who still goes to
12 funerals for people who are dying that
13 don't need to die than hearing all these
14 amazing things about the behavioral
15 health system, yet every single day
16 seeing the barriers people face when
17 they're trying to get help.

18 This idea that people want to
19 be stuck in homelessness and they want to
20 be stuck struggling with addiction and
21 that they want to be stuck being sort of
22 a nuisance to a community is a lie. Most
23 people do not want to be living in the
24 conditions they're living in, and every
25 day there are people who are trying to

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2 get help who face all kinds of barriers
3 along the way. And I know firsthand that
4 it often takes like a call string or a
5 call-in favor, someone calling their
6 Councilmember, someone who knows how to
7 navigate the system to get somebody into
8 treatment, and it shouldn't be that way.
9 If it was easier to access treatment and
10 remain in treatment and remain in housing
11 resources that work for people, then we
12 would have less of a problem than we have
13 today. And so we really need to
14 revolutionize our treatment system, move
15 away from these little projects, the
16 special initiatives and pilots and
17 whatever words we use, because it's not
18 working for a lot of people.

19 Thank you so much for the
20 opportunity to testify.

21 COUNCILWOMAN BASS: Well, thank
22 you so much for your testimony, and as
23 always, you're always a wealth of
24 information. You're not in the 8th
25 District, but I know that you're always

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2 out and advocating on behalf of the
3 community. Even when you're beating us
4 up, we still appreciate you. We know
5 you're working hard. We know you're
6 working hard, Brooke.

7 MS. FELDMAN: And Councilmember
8 Bass, if I could tell you -- I wrote this
9 down as a note. When you referenced that
10 book, If Only -- Even If Your Heart Will
11 Listen, what you read in that book -- and
12 I wish every Councilmember and especially
13 the Health and Human Services folks on
14 this call read that book. It paints the
15 status quo picture of somebody to access
16 treatment that works for them, and Elise
17 Schiller's daughter didn't have to die,
18 and that's a story not about opioids, and
19 please can we stop just talking about
20 opioids.

21 COUNCILWOMAN BASS: Yes.

22 MS. FELDMAN: But it tells you
23 the story of how difficult it is for
24 someone to get help who is looking for
25 it. This is not an indictment on

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2 Philadelphia's behavioral health system
3 that I love and I believe in and know
4 that could do better, but that book is
5 like -- that will tell you what people
6 are experiencing right now in your
7 districts and across the City.

8 COUNCILWOMAN BASS: I could not
9 agree with you more. That book was
10 really -- you know, there's very few
11 books that I would call game-changers or
12 life-changers for me, but I will say that
13 that was one of them. It was really,
14 really well written and just -- you felt
15 like it was happening right in front of
16 your very eyes. It was an excellent
17 read, and I do highly recommend it to the
18 Committee.

19 I do believe that the author
20 did provide copies to members of the
21 Health and Human Services Committee, but
22 if not, I'm certainly more than willing
23 to share my copy if anyone would like to
24 read it, because it's just such a
25 compelling story, and I think it really

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2 does shed new light and insight into a
3 struggle that we are all trying to figure
4 out what to do. We may have different
5 thoughts and ideas and suggestions, but
6 we all want to solve this very serious
7 problem.

8 Councilwoman Sanchez, did you
9 have a statement? I thought I saw you --
10 okay. No?

11 COUNCILWOMAN SANCHEZ: No. We
12 can go through the rest of the panel. We
13 have some folks --

14 COUNCILWOMAN BASS: Very good.
15 Very good.

16 So next was Luis Ramon Soto.

17 COUNCILWOMAN SANCHEZ: He's not
18 coming, and neither is Alicia Crosby
19 because of obviously our delay. I
20 believe Shannon Farrell is here.

21 COUNCILWOMAN BASS: So we have
22 lost them? Okay. Well, let's bring up
23 Shannon Farrell, if you are here.

24 MS. FARRELL: I'm here.

25 COUNCILWOMAN BASS: Hi,

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2 Shannon. Can you please state your name
3 for the record and then begin with your
4 testimony.

5 MS. FARRELL: Sure. My name is
6 Shannon Farrell and I am the President of
7 the Harrowgate Civic Association. Thank
8 you today for giving us this opportunity
9 to come and speak with everybody and
10 listen to what the Managing Director's
11 Office and everybody had to say about
12 what we're going to be doing moving
13 forward.

14 And so I had a lot written down
15 and I don't know that this is -- that
16 it's going to be relevant after listening
17 to the plans, but what I do think is this
18 is -- I'm going to follow up an awful lot
19 with what Brooke said, but first I want
20 to say that our children, our community
21 on a daily basis have to walk down the
22 street avoiding human waste, used
23 needles, dodging bullets, and watching
24 for aggressive dealers on their corners
25 just to walk to a friend's house or

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2 corner store and, when school is open, to
3 school. Sometimes they can make a
4 three-block walk straight from their
5 house to school and they go out of their
6 way to avoid areas and make it a much
7 longer walk on Ontario Street to go to
8 Webster.

9 So that's what I always speak
10 about, and that's what always is my
11 focus, is our children. And recently we
12 had an eight-year-old little girl shot
13 getting off the El station at K&A, and
14 that's -- there's no words to describe
15 that anymore. Saying that it's
16 frustrating, heartbreaking, there's just
17 no words for that. It's everything, that
18 feeling to know that a child was getting
19 off the El to go home and got shot. And
20 that's what it has come down to.

21 And I've met with the City for
22 three and a half years now, with Tumar
23 and Eva and Noelle, and as individuals, I
24 think they do care about the community.
25 Tumar and Noelle especially I work very

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2 closely with, and they've done a lot for
3 the community. So it's like Sonja said,
4 you can contact them and ask them like we
5 have tires have to be picked up, there's
6 trash on this corner, this house has to
7 be sealed up, and it's very quick to
8 happen in that manner and in that
9 fashion, but the plan, again, doesn't
10 address the fact that we are still going
11 to leave hundreds of people on the street
12 and we're going to constantly have to
13 clean up after them.

14 We have done meeting them where
15 they're at, and it hasn't worked. We
16 promised the community we were going to
17 be patient, we're going to meet them
18 where they're at, we're going to support
19 a lot of things that isn't going to be
20 for us but for them, because we need them
21 to get help and go into housing, go into
22 rehabs, go into anything to get them off
23 of the street, and it just -- it hasn't
24 worked. And even when you get more off
25 of the street, more come, because there's

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2 just such a draw here with the drugs.

3 And people come here for the drugs. Drug
4 dealers from other areas now come here to
5 deal drugs, and that causes violence as
6 well.

7 We have -- our Police
8 Department has been really great and
9 fantastic. We've literally called them
10 for fear of our lives, and I watch their
11 hands be tied by what the City worries
12 about, lawsuits, how they've been sued,
13 worrying about confrontations with users
14 and their advocates, telling us you can't
15 arrest your way out of this, but we
16 haven't figured out a way out of this.

17 So to follow up on what Brooke
18 said, and this is something that I can't
19 see for other people, but I spoke to
20 other individuals in the community about
21 this who attend these meetings with me,
22 and I know that it's not popular with
23 Councilmembers that I spoke to about it,
24 but I agree with Brooke and I think that
25 it's time that we move forward with a

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2 sanctioned encampment somewhere away from
3 residents. Otherwise, this is never
4 going to end. This is never going to
5 end. And I was one of the people that
6 came to you when the tunnels were filled
7 and said we have to move these tunnels
8 and these people out of the tunnels,
9 because the residents have to be able to
10 access it, and the people that lived
11 right by the tunnels, it was horrible
12 conditions for them to be living in.

13 But the positives of that was
14 that everybody is located in one place
15 and our neighborhood wasn't as trashed as
16 it is now, because everybody was going to
17 one place to meet them where they were
18 at.

19 The problem is where they're at
20 now is spread through the neighborhood,
21 and you can't always locate them, and
22 there's just too many spaces. And it's
23 just uncontrollable and it's
24 overwhelming, and it's unfair to us.
25 It's unfair to our Police Department.

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2 We're all overwhelmed. We're all
3 traumatized. And I think that it would
4 be easier to have more -- I think there
5 was more success with getting people from
6 the tunnel to get into services.

7 I remember the City telling me
8 that, that you's had a really good ratio
9 of people that were coming out and
10 accepting services. Well, they're not
11 accepting services as often on the
12 street. I do think that you's don't put
13 enough effort into it. I never run into
14 outreach from the City. The only people
15 I actually ever see on the Avenue are
16 people who work for Prevention Point.

17 I don't know why we don't have
18 tents set up places. When we were
19 emptying out the tunnels, it was bizarre,
20 I couldn't walk a block without running
21 into a team of people that were out there
22 to engage, and now I could walk all over
23 the neighborhood days in a row and not
24 run into anybody. So the service has
25 been very much decreased.

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2 I think that the fact that we
3 talked about housing and I think that the
4 fact when I read an article that the Ben
5 Franklin Parkway was being cleared out, I
6 read a story about a couple that only
7 lived in Philly for a year and was
8 getting a house, but I watched some
9 residents live in my community and on my
10 street and they've never been given a
11 house.

12 I just read an article about
13 the Holiday Inn and that everybody who
14 has been at the Holiday Inn is being
15 offered housing, and yet when we talk to
16 Housing from our neighborhood, I am
17 constantly told there's just not enough
18 housing. And I don't hear too many
19 people turning it down and I don't think
20 they'll all accept it. I know they
21 won't, but I think that it would be
22 better served if you's had started these
23 things here and done more of that here.
24 I just don't think that the effort that's
25 been put into other places is being put

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2 here.

3 I support a 50 percent decrease
4 with Prevention Point. I don't want them
5 in my neighborhood anymore. I think I've
6 made that more than clear. 4.7 million
7 needles dropped in my neighborhood, and
8 no matter what number the City has come
9 back with with how they've come in,
10 whether through the Kind team, returned
11 to Prevention Point, the red boxes,
12 that's leaving hundreds of thousands of
13 needles on our streets, and that's
14 unacceptable. That's unfair to us.

15 We have lived through the drug
16 epidemic, the hep A breakout, violence
17 epidemic, overdose epidemic, and now a
18 pandemic. Our children -- my
19 seven-year-old doesn't know life not to
20 be like this. He doesn't remember not
21 living like this. And for the people
22 that want to constantly say, well, that's
23 Kensington and Harrowgate and they've
24 always been like that, I'm 43 years old
25 and I've lived here my entire life, and I

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2 never had to dodge a bullet when I was a
3 kid. I didn't have to dodge a bullet
4 until a few years ago. I didn't have to
5 walk over human waste. People didn't
6 take over our neighborhood. This didn't
7 happen. It was not like this. It's
8 never been like this. This is
9 unacceptable. And when I hear people say
10 that, I think they're making an excuse to
11 not do anything about the issue. I heard
12 it from some people in the
13 Administration. I've heard the District
14 Attorney say it over and over, and I
15 don't like that. And I met with all of
16 you about this. And I feel like there
17 are people in this Administration that
18 want to do this, but I feel like also
19 you's work separately, you's have
20 different theories. And no matter what
21 it is, in the end if we don't have a way
22 to help the people who are suffering with
23 addiction and homelessness in my
24 community and have a place for them to
25 go, like a sanctioned encampment, we're

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2 going to have this conversation every
3 time, because there's nothing we can do
4 about the fact that they're not willing
5 to go and get help yet.

6 And I also want to say that
7 when I've met with the City in the past
8 and discussed the homeless users, they've
9 always been quick to say, Shannon,
10 remember, homelessness isn't a crime and
11 they're human beings. And then when I
12 tell them that the same human beings tell
13 me that they cannot get help at the NET,
14 because once they detect a mental health
15 issue, they're booted to the street.

16 They're afraid to go into shelters
17 because they feel that they're violent,
18 just from the very people who they spend
19 their time with on the street. They rob
20 one another and beat one another up as
21 well. They say, no, we don't find that
22 to be true. They tell stories.

23 You know, so when I have an
24 issue with the fact that they're robbing
25 us, living on our street and buying drugs

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2 from violent drug dealers, then I'm
3 reminded they're human beings, but when I
4 tell the City that they're complaining
5 about their own services, the City then
6 calls them liars.

7 So I think that this is very
8 frustrating for me. This is hard to live
9 with and constantly sit in meetings and
10 listen, and no matter what the end
11 result, no matter what it is, the plans
12 are always the same, and we're relying on
13 people who are not ready to get help,
14 that have mental health issues to accept
15 help and get off the street and they're
16 not ready. And so we've been doing this
17 for three and a half years since I've
18 been meeting with you, and that's just
19 not happening. So we need another
20 solution, and we need our community to be
21 safe again and we need our kids to be
22 able to use the playground. We need our
23 kids to be able to go to their library.
24 We need our kids to be able to go to
25 school and feel safe.

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2 They can't use our playgrounds.

3 They can't walk to school safely. They
4 even go into the schoolyards and leave
5 needles and human waste behind. And any
6 plan that doesn't include moving this
7 population to a sanctioned encampment or
8 into housing with a good, solid plan, not
9 that we hope this works, then we're going
10 to be doing the same thing over and over.
11 Like Brooke said, this is the definition
12 of insanity, is what we're continuing to
13 do. No matter what good intentions there
14 are and good efforts that we're putting
15 in, it hasn't worked. It's not working,
16 and now the violence is out of control.

17 And the other thing I want to
18 point out is -- and I love Brooke dearly
19 and we've been meeting a lot lately -- is
20 that one of the other things that's very
21 frustrating to us is that you's listen an
22 awful lot to people who don't live here
23 that tell you what they think our
24 neighborhood needs, as if we're idiots,
25 and none of that ever includes moving and

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2 helping and pushing for more rehab and
3 people to -- the focus to remove them
4 from the street. It's always, well,
5 that's -- we have Mural Arts here. Let's
6 have a storefront, have them come in and
7 do all these wonderful things. That's
8 great, but that's not what this community
9 needs. We don't want that. We want a
10 storefront with a store in it that we can
11 go in and purchase things. Maybe we want
12 a yoga studio. Maybe we want the Pretzel
13 Factory, who was going to open up on
14 Kensington Avenue, but it didn't because
15 the conditions of the Avenue.

16 We know what our community
17 needs, and right now our community needs
18 to be free of this. Our kids have to
19 recover. We want them to grow up and we
20 want them to be successful, and we're
21 setting them up for failure.

22 So I want to thank you for the
23 opportunity to say this all today. I
24 know many of you have heard it over and
25 over before. And I do want to thank

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2 everybody for all the efforts that they
3 have done to this part. And the Streets
4 Department and CLIP are amazing. I want
5 to say that. They are amazing, and so is
6 a lot of the people that work in the
7 MDO's Office as well. And our Police
8 Department is forever -- I'm always going
9 to be grateful to them, because they are
10 always in our corner, and fairly too.
11 They're very fair about how they handle
12 the situations.

13 So I want to thank you all.

14 COUNCILWOMAN BASS: Well,
15 Shannon, I want to thank you for always
16 being an advocate for the community, and
17 I can tell you that we hear you, and I
18 agree with you that any idea,
19 suggestions, input in terms of what the
20 community wants should come from the
21 community.

22 I think sometimes people have
23 good intentions, but if you don't live
24 there, then you really should focus on
25 the community in which you live in and

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2 allow the people who live in Harrowgate
3 and other neighborhoods to be able to say
4 what it is that is important to them,
5 because they are the main beneficiary of
6 any changes, improvements or a lack
7 thereof. So I thank you for being on the
8 call.

9 Do we have any questions from
10 members of Council?

11 (No response.)

12 COUNCILWOMAN BASS: If not,
13 we're going to move to our next panel.

14 Madam Clerk, can we have you
15 call Panel 2?

16 COUNCILMAN SQUILLA: Madam
17 Chair --

18 THE CLERK: I think Councilman
19 Squilla is talking.

20 COUNCILWOMAN BASS: Oh, I'm
21 sorry. Councilman Squilla.

22 COUNCILMAN SQUILLA: Yes. Can
23 you hear me?

24 COUNCILWOMAN BASS: I can
25 barely hear you, but I hear you. Is it

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2 possible to speak up a little bit?

3 COUNCILMAN SQUILLA: Do I sound
4 any better?

5 COUNCILWOMAN BASS: That's much
6 better.

7 COUNCILMAN SQUILLA: All right.
8 Thank you.

9 COUNCILWOMAN BASS: There it
10 is. There you are. We hear you loud and
11 clear now.

12 The Chair recognizes Councilman
13 Squilla.

14 COUNCILMAN SQUILLA: Thank you.
15 I had AirPods in, so I guess that wasn't
16 sounding too good.

17 But I just want to thank the
18 community members who are testifying. I
19 know Brooke and Shannon and Sonja how
20 much time they have given to the
21 community, and so they know exactly what
22 they're dealing with. And even though
23 not everybody has the same idea of how to
24 deal with it, they know that doing the
25 same thing over and over again is

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2 insanity, and they know that what we're
3 doing right now is a failed experiment in
4 that area, and so we need to make
5 changes. We need to make positive
6 changes, and we need to be able to listen
7 to the folks who are living there day in
8 and day out.

9 A lot of times we listen to
10 experts and the people who tell us what
11 we should be doing, but when you're in
12 the field and you're looking at it and
13 working with it day in and day out, you
14 get a sort of different perspective of
15 how to deal with this problem. And if
16 we're just going to just clean up after
17 the mess every day and we're arguing that
18 right now and the resources that we're
19 spending to do that is amazingly high,
20 we're not fixing the problem.

21 So until we fix the problem,
22 until we come up with a plan -- and I
23 don't mind changing ideas and changing
24 plans to come up with ideas to try to
25 work through this, but until we do that,

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2 we're going to be just spending dollar
3 after dollar on cleaning up after it and
4 not help anybody in the process.

5 So I want to thank them for
6 their testimony, and we'll continue to
7 work with those folks in the community,
8 as Councilmember Sanchez has stated. And
9 I know there's a lot of people to
10 testify, so I'm not going to ask any
11 questions, unless something dramatic
12 happens.

13 So thank you.

14 COUNCILWOMAN BASS: Thank you,
15 Councilman. Thank you for your advocacy.

16 And so now we're going to ask,
17 Madam Clerk, if you could call Panel 2
18 forward.

19 THE CLERK: Casey O'Donnell,
20 President and CEO of Impact Services;
21 Maria Gonzalez, President and CEO of
22 HACE; and Susan Post, Executive Director
23 of Esperanza Health Center.

24 COUNCILWOMAN BASS: Wonderful.
25 Thank you.

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2 And Casey O'Donnell, if we
3 could have you start first. Are you on
4 the line, Casey?

5 MR. O'DONNELL: I am. Can you
6 hear me?

7 COUNCILWOMAN BASS: Yes. We
8 can hear you well. If you could state
9 your name for the record and proceed with
10 your testimony, that would be great.

11 MR. O'DONNELL: Sure. Thank
12 you. Casey O'Donnell, President and CEO
13 of Impact Services.

14 Prior to neighbors testifying,
15 I had to go on another Zoom briefly, so
16 if any of this is redundant, I apologize.

17 I've been doing this work at
18 K&A and throughout Kensington for the
19 last seven years, and I didn't think that
20 it could go any further down, and lately
21 I can say I'm hoping this is bottom and
22 the only place to go is up, and so I am
23 hopeful.

24 I have spoken with the
25 Councilwoman multiple times over the last

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2 few weeks, planning and trying to
3 understand where we're headed as a
4 neighborhood in the City, and I'm hopeful
5 that all of the resources that have been
6 brought in to clean are making a
7 difference.

8 K&A was actually cleaned today,
9 and I was surprised. We have guys
10 working over the weekend cleaning. We're
11 still trying to figure out how to tackle
12 McPherson Square and some of the other
13 rougher spots. I am hopeful about the
14 police station. I am hopeful about
15 changes to access to treatment, but
16 honestly, I am most hopeful about trying
17 to understand what is acceptable in
18 public space.

19 I don't know how many people on
20 this Zoom call feel safe every day, but I
21 can tell you that the basic social
22 contract in Philadelphia has deteriorated
23 to the point where only a select group of
24 neighborhoods feel the basic protections
25 that every Philadelphian deserves.

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2 The idea of trauma and stress
3 only affecting a portion of our
4 population on a day-to-day basis is
5 unacceptable, inequitable, and actually
6 despicable. Every Philadelphian deserves
7 physical safety, emotional safety, and
8 moral safety. And this idea of moral
9 safety is our living up to our
10 agreements, and frankly, that's where we
11 have failed. If we want to bring safety
12 to this neighborhood, the families and
13 the kids that live there, we absolutely
14 have to decide what is acceptable in
15 public space. And that safety can also
16 be afforded to the people who use drugs,
17 and that means finding a sanctuary space
18 for them to go so they can receive the
19 services they need and so that public
20 space is free of feces, exposure to
21 violence, exposure to all of the
22 challenges we've heard.

23 And I will say that when I was
24 cleaning on McPherson a couple weeks ago,
25 while the park was full of trash, the

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2 trash cans were actually empty. So

3 residents have brought trash cans out to

4 McPherson with the hope that people will

5 use them, and the trash cans were empty.

6 And so this isn't just about more

7 receptacles, which I think is important,

8 but this is about taking responsibility

9 for public space.

10 And, again, I hope this is

11 bottom, and I hope we can all remain

12 hopeful. And I want everyone who has not

13 spent time at Kensington and Clearfield

14 to come by and walk around and see if you

15 feel safe. I don't bring my son there

16 anymore for clean-ups because it's simply

17 not safe and I'm not going to expose him

18 to it, and that is such a privilege and a

19 choice for me and my family, and we need

20 to afford that to everybody in the

21 neighborhood.

22 So if you have not come and

23 spent a day and walked around the block

24 and felt like you weren't in danger, you

25 need to come do that, because it will hit

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2 home.

3 Thank you for the opportunity
4 to provide testimony.

5 COUNCILWOMAN BASS: And I want
6 to thank you for your very insightful
7 testimony. Thank you for being with us,
8 Mr. O'Donnell.

9 Our next speaker, Maria
10 Gonzalez. Maria, are you here?

11 MS. GONZALEZ: Yes, I am. Can
12 you hear me?

13 COUNCILWOMAN BASS: I can hear
14 you well. Please state your name for the
15 record and then begin your testimony.

16 MS. GONZALEZ: Yes. Hello.
17 Good evening. My name is Maria Gonzalez.
18 I'm President of HACE.

19 Thank you, Councilwoman, for
20 the opportunity and, Councilmembers, to
21 speak today. At HACE, we're very
22 grateful for all the investments that
23 have been made in the clean-up of the
24 Conrail line in 2017 that addressed the
25 encampments that had been there for over

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2 30 years. That has brought a big relief
3 to our community in being able to have
4 some safety at least around the Conrail
5 Viaduct, and we have been working with
6 Impact and our other partners to make
7 sure that that area remains clean.

8 Now, while that has been a
9 positive, we still have the negative in
10 where our community still is not our own.
11 We're still dealing with issues of
12 safety, as it has been said here before,
13 needles in our playgrounds and in our
14 open recreational areas and our seniors
15 feeling unsafe in our community, where
16 they don't feel just safe going out their
17 door to go to shop or even to go to the
18 corner bodega because they feel that
19 they're going be accosted, and it has
20 happened on many occasions. And it's sad
21 that we have to actually create fences to
22 make sure that we keep our seniors safe,
23 and that shouldn't be the case.

24 I have been a big advocate with
25 many of our partners initially to provide

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2 supports to the persons that have been
3 suffering from addiction, because they're
4 very vulnerable, and I understand that,
5 and it's really a tough situation where
6 folks are suffering from this illness and
7 addiction, but I think now what we have
8 seen is that that equation is very
9 one-sided, where there's a lot of
10 supports and investments to help those
11 folks and our communities are suffering.
12 And mind you, we have a very poor
13 community that is suffering through high
14 unemployment and now with everything
15 that's happening with the pandemic and
16 the looting that happened as a result of
17 the social unrest, has really set us back
18 decades, where many of our businesses are
19 still shuttered, which means that we have
20 higher unemployment in our neighborhoods
21 and makes it tougher to bring investments
22 into the neighborhood after this is over,
23 and hopefully 2021 will be a much better
24 year, because we have to convince people
25 that it is safe and it is -- this

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2 neighborhood is worth investing and our
3 residents are worth investing in.

4 So while we are looking at one
5 side of the equation, we're still
6 forgetting the other, and we have -- our
7 neighbors feel trapped, and they need
8 supports just like any of the
9 communities. They want to do good for
10 their families. They want a good, decent
11 job. They want safe streets. They want
12 beautiful open spaces for their children,
13 and they want a good education.

14 So I think that there has to be
15 more investment to this side of the
16 equation, where we're really looking at
17 our families as also being victimized as
18 well. And I don't like to use that
19 label, but, yes, they have been
20 victimized, and we're not really focusing
21 on them and their needs and their
22 families.

23 So I think as we're looking at
24 strategies, we really need to consider
25 the needs of our long-term residents and

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2 how can we bring additional investments
3 for them to be able to do better and the
4 children do better and they can feel safe
5 in our neighborhood and we can have
6 additional investments in our community.

7 Thank you.

8 COUNCILWOMAN BASS: Thank you
9 so much for your testimony.

10 And I don't see any questions
11 from members of Council, and so our next
12 speaker called by the Clerk was Susan
13 Post. Is Susan available? Susan, are
14 you still with us?

15 MS. POST: Yes, I'm still with
16 us.

17 COUNCILWOMAN BASS: Wonderful.
18 Wonderful. Susan, please state your name
19 for the record and proceed with your
20 testimony.

21 MS. POST: Yes. Hi. I'm Susan
22 Post, the Executive Director of Esperanza
23 Health Center, and I'm thankful and
24 grateful to be able to speak to you today
25 regarding our community.

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2 For some of you Councilpeople
3 that may not be as familiar with
4 Esperanza, we're a bilingual faith-based
5 health center that serves in North
6 Philadelphia. We're trying to provide
7 high-quality, affordable, comprehensive
8 primary care and also community health
9 services. We came into Kensington about
10 12 years ago in a leased spot on
11 Kensington Avenue, and in these years,
12 we've become more committed and dedicated
13 to trying to engage the whole community
14 in health services, and last year, we
15 were able to open up a new
16 state-of-the-art health center on the
17 corner of K&A, and we've been able to
18 expand our medical staff to be able to
19 serve more people.

20 So we're committed for the long
21 run, long term. We hope to be walking
22 alongside you all as we try and make
23 improvements in our community in years to
24 come. We know that the opioid situation
25 is killing our community, and there's

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2 many people that are in need of
3 healthcare, both those who are suffering
4 from the addiction and the community
5 residents who experience trauma and all
6 the healthcare risks that come to
7 everyone with the state of our community
8 right now.

9 We were grateful for the City's
10 2018 Resilience Project, and we
11 appreciated that it involved a
12 community-driven public strategy to
13 address the opioid crisis. It gave me
14 hope for what's possible with a real
15 strategic investment of resources by the
16 City and also taking into account other
17 agencies and our neighbors. But since
18 the conclusion of that first Resilience
19 Project, I just feel really like -- and
20 with COVID-19 beginning, I feel like
21 there just really hasn't been enough
22 effort or strategy to actually push back
23 against all that's happening, and I think
24 that the effects have been really
25 damaging for our community.

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2 I don't think there's enough
3 being done to limit open-air drug use and
4 dealing. It's rampant, as our neighbors
5 have mentioned. Esperanza frequently
6 responds to overdoses, sometimes multiple
7 times in a day, on the sidewalk right
8 outside our clinic.

9 The number of people living on
10 the sidewalks of Kensington continues to
11 grow. The lack of sanitation is
12 overwhelming. We need to do more, and we
13 need to do it collaboratively, and that's
14 going to be vital to the health of the
15 entire City, not just Kensington.

16 So we applaud -- I applaud the
17 Restorative Investment Plan efforts that
18 we have and I just heard about for
19 Kensington. I still feel overwhelmed and
20 I really don't know if what has all been
21 stated is going to actually be enough,
22 but on behalf of Esperanza, we're happy
23 that the City is trying to address both
24 the residents and those who are suffering
25 from opioid use disorder.

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2 In light of your goals, I want
3 to ask that you would consider these
4 priorities from the healthcare
5 standpoint:

6 Increase the City's capacity
7 for inpatient rehab opportunities for
8 opioid use disorder patients.

9 Number two, find creative
10 solutions for sheltering individuals that
11 are still using substances, as
12 homelessness is a massive barrier to the
13 recovery.

14 Three, I know that you -- that
15 this is happening, but I think it has to
16 happen more. Deploy the additional
17 outreach workers to serve as bridges to
18 rehab, to getting to emergency shelters
19 and other linkages. In my estimation, I
20 think this would go a long way and maybe
21 even further than the increasing of
22 police presence.

23 And then, lastly, just
24 improving the sanitary conditions
25 throughout the entire community, which

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2 has been stated several times already. I
3 think more can be done to increase access
4 to safe needle disposal, and I think more
5 bathroom -- public restrooms would really
6 be important.

7 I don't want us to overlook the
8 tremendous assets of Kensington upon
9 which our city can build. My colleagues
10 that just spoke, the residents who spoke,
11 while they're rightfully angry, they are
12 engaged, and there are many churches,
13 agencies, and people and Esperanza Health
14 Center who want to add to the solution,
15 but we need the City to engage more.

16 With this resolution, we ask
17 the City to invest, invest, invest. Take
18 immediate action and consider long-term
19 strategies to ensure that Kensington is
20 safe and healthy for all who live in it
21 and all who enter into this community.

22 Thank you very much for taking
23 my testimony.

24 COUNCILWOMAN BASS: Thank you
25 very much for your patience and for being

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2 here with us today, that very important
3 testimony.

4 I don't see any requests for
5 statements or questions for the panel
6 from my colleagues, but I do see that
7 Councilwoman Sanchez would like to make a
8 closing statement, and anyone else from
9 the Committee who would like to make a
10 closing statement, please just let us
11 know by raising your hand or going into
12 the Chat.

13 The Chair recognizes
14 Councilwoman Maria Quinones-Sanchez.

15 COUNCILWOMAN SANCHEZ: Thank
16 you, Madam Chair. I'm very, again,
17 grateful to this Committee. As you know,
18 I chaired this -- I was Vice Chair of
19 this Committee for many years with you,
20 and while I don't run this Committee, I
21 appreciate the fact that this Committee
22 has been instrumental in documenting the
23 work that has gone on in Kensington.

24 And I want to end where Susan
25 spoke to. One of the biggest challenges

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2 I have as an elected official for the
3 district that I serve is that I also want
4 to be its greatest cheerleader. The work
5 that I do is about strengthening the
6 resilience that already exists in these
7 communities, people who overcome the many
8 challenges of the institutional
9 historical underinvestment and sometimes
10 hostile policies against poor people in
11 the City. So I want to end there.

12 There is a lot of great things
13 happening in Kensington. It is the work
14 of Esperanza Health and Impact Services
15 and HACE under the leadership of Casey,
16 Maria, and Susan. It is the partners on
17 the ground, the many church members and
18 clergymen. Just this morning I was on a
19 call with Reverend Buddy from ROCK
20 Ministries.

21 We know that some of the things
22 that are happening there sometimes happen
23 despite us, not because of us, but just
24 the love of residents and other folks to
25 step up to the plate. And, again, I'm

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2 very grateful and thankful for the work
3 that the Administration has done and has
4 tried to do over the years, but it hasn't
5 worked. This has been a failed policy.

6 As someone who was doing harm
7 reduction before it was a term, I have
8 the greatest respect for Jose and
9 Prevention Point, and I understand their
10 perspective. I don't have to agree with
11 their perspective. The one thing, as
12 Brooke mentioned, through this
13 conversation is, I don't want to engage
14 in the discussion about empathy and
15 support and help, because we're beyond
16 that. I think the residents of
17 Kensington allowed us to put two respite
18 centers there. They allowed us to
19 initially put Prevention Point there.
20 They were willing to work with us, and we
21 made commitments, and I say "we" as a
22 city, and we failed them. So now we've
23 got to restore Kensington.

24 So the conversation is very
25 different. Just yesterday I was having a

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2 conversation with some of the funders of
3 harm reduction policies, and as was
4 stated earlier, many of these folks who
5 study these policies and want to pilot
6 them in Kensington, Kensington cannot be
7 utilized as someone's pilot for failed
8 policies anymore. It is my job, as it is
9 Councilmember Squilla's job, to protect
10 the residents of Kensington. It is all
11 of our jobs, elected and appointed
12 officials who work for these residents,
13 to restore Kensington. That is my only
14 goal. That is going to be my focus. We
15 have to restore.

16 As Casey said, I hope this is
17 rock bottom. I thought we hit rock
18 bottom two years ago. Then I thought we
19 hit rock bottom when we had hepatitis A.
20 Then I thought we hit rock bottom when we
21 had the pandemic, and then the shootings
22 began. The level of open-air drug
23 markets and the 40 to 50 encampments hit.

24 So I hope this is rock bottom.
25 But what I will not tolerate is us doing

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2 the same thing. We need a deeper dive
3 into behavioral health services. What
4 we're doing, that dashboard is a step in
5 the right direction, but I agree with
6 Brooke. What we are doing is not
7 working, and if we make a decision that
8 we're going to meet people where they are
9 and then we understand that they cannot
10 make decisions because they have a mental
11 health disease -- and I said this years
12 ago. If they can't make decisions about
13 themselves, they should not be able to
14 make decisions about how an entire
15 community lives.

16 And so that's not an either/or.
17 That's an "and." So if we recognize that
18 people are not in their right state of
19 mind, then we need to address them.

20 I give really kudos to Shannon,
21 who is involved in some of this work, and
22 when she says, look, do a sanctioned
23 encampment somewhere else, just don't
24 impact my child anymore, I think it is
25 time for us to listen to the residents in

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2 Kensington. And they do have better
3 strategies and they do understand this,
4 because they live this every single day.

5 So I want to just, again, thank
6 the Administration. I know we worked on
7 a lot of items leading up to this hearing
8 to be able to say something different
9 than we've had in the past, to be able to
10 demonstrate to folks that we are
11 listening, but we have a lot of work to
12 do, a lot of work to do. And just when
13 you look at the ledger, the amount of
14 investment that we're making for the
15 folks who are unsheltered and need
16 support and then you look at the ledger
17 about what we're doing to invest in the
18 long-term folks that are trapped, it is
19 still not a balanced view. The policies
20 are still not balanced, and that's what
21 we're going to be discussing as we move
22 forward, is how do the residents of
23 Kensington feel like we're listening to
24 them and not just subjecting them to
25 failed policies that entrap them and put

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2 their children in harm's way.

3 So thank you, Madam Chair.

4 Thank you to all my colleagues who have
5 been supportive. I've been in this
6 conversation for a long time. Many of
7 you have been very supportive as we've
8 added resources, as we've asked for
9 policy changes, but I will take nothing
10 different than removing all of these
11 services that we've not been able to
12 manage until they're removed from the
13 corridor, until we reduce at least by 50
14 percent the needle exchange and we make
15 this citywide. This has to be citywide.
16 Kensington can no longer be the guinea
17 pig failed experiment. Poor, people of
18 color, working-class communities should
19 not be subjected to it. And in this
20 space of social justice when we talk
21 about equality and disparities, the
22 health disparities that we saw here,
23 whether it was testing for COVID and
24 other things that eventually we got, this
25 Administration has to demonstrate in

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2 Kensington that it has heard the civil
3 unrest and it has heard the cries of
4 these residents of Kensington.

5 So thank you to Councilmember
6 Squilla for always partnering with me on
7 this work. We don't have all the answers
8 and we don't have endless resources, but
9 we've got to work smarter. Working hard
10 is one thing. Working smarter is where
11 we have to go.

12 So thank you, everyone. Thank
13 you to all my colleagues.

14 Thank you, Madam Chair.

15 COUNCILWOMAN BASS: Thank you,
16 Councilwoman, and thank you for all of
17 your hard work for years and years and
18 years to make a difference in the
19 community. So we really recognize that
20 and thank you so much.

21 I want to recognize Councilman
22 Derek Green and then Councilman Allan
23 Domb for brief remarks.

24 Councilman Green.

25 COUNCILMAN GREEN: I'll be very

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2 brief. I just want to thank you, Madam
3 Chair, for holding this hearing. I know
4 we've had these hearings in the
5 neighborhood over the years --

6 COUNCILWOMAN BASS: Yes.

7 COUNCILMAN GREEN: -- through
8 this Committee. And I just want to thank
9 my colleague Councilmember Maria
10 Quinones-Sanchez and Councilmember
11 Squilla, who have been working on this
12 issue for a very, very long time and
13 working collaboratively and being
14 advocates for so many residents in the
15 community, like Brooke Feldman and
16 Shannon Farrell and all the other
17 organizations, like Casey O'Donnell from
18 Impact and Maria Gonzalez from HACE and
19 Esperanza. I really appreciate this
20 conversation. And as we go into 2021,
21 hopefully we'll be moving in a new
22 direction through all the energy and
23 passion and work that all of the
24 advocates as well as I know Alicia with
25 Councilmember Sanchez have taken to try

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2 to address this issue.

3 So thank you for a very engaged
4 conversation, and it demonstrates we
5 still have so much more work to do as we
6 go into 2021.

7 COUNCILWOMAN BASS: Thank you,
8 Councilman.

9 The Chair recognizes Councilman
10 Domb.

11 COUNCILMAN DOMB: Thank you,
12 Madam Chair, for hosting this also. I
13 want to echo my colleague Councilman
14 Green's comments. And Councilmember
15 Sanchez and Councilmember Squilla, thank
16 you for everything you've been doing
17 here, and I just want you both to know
18 that whatever you need from me, I will be
19 available. I'll do whatever I can to
20 support you both.

21 I drove through on Sunday
22 afternoon at 4 o'clock, this past Sunday,
23 I drove up from Girard Avenue up
24 Kensington and got all the way to
25 Kensington and Allegheny, and what I saw

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2 was horrible. It embarrassed me as a
3 resident of this city to see that going
4 on.

5 So you're absolutely right. We
6 have to do better. This is unacceptable.
7 The amount of trash I saw Sunday
8 afternoon, the people hunched over, it
9 was worse than a third-world country.
10 Worse. And it's a disgrace we're
11 allowing this to happen. We have to fix
12 it.

13 So I stand with both of you.
14 Whatever I can do to help, please call
15 upon me. I'll be happy to help and do
16 anything I can. It's just heartbreaking
17 to see that. So thank you for everything
18 you're doing.

19 And thank you, Madam Chair, for
20 this hearing. Thank you.

21 COUNCILWOMAN BASS: Thank you,
22 Councilman.

23 Councilman Squilla. The Chair
24 recognizes Councilman Squilla.

25 COUNCILMAN SQUILLA: Thank you,

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2 Madam Chair. Just a quick comment. I
3 want to thank my colleagues for hanging
4 in here the whole time. It's an
5 important issue. It's something that is
6 no longer just associated with
7 Kensington, and we really need to make
8 sure that people realize that this could
9 be every neighborhood in each part of our
10 City of Philadelphia if we don't come up
11 with a solution.

12 So I wish I had the answers
13 right off the top of my head. I don't.
14 But working together, I think we'll come
15 up with it, and as long as we're willing
16 to adjust and change and try new things,
17 I think we'll get to a point where we'll
18 see positive results.

19 So thank you all for indulging
20 us on this, and we appreciate all your
21 support and thoughts, and hopefully we'll
22 see some positive results in the future.

23 Thank you.

24 COUNCILWOMAN BASS: Thank you,
25 Councilman.

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2 And I see also, I just want to
3 recognize that we did have greetings and
4 statements of support from Councilmembers
5 who are still with us, Councilman Isaiah
6 Thomas, Councilwoman Helen Gym,
7 Councilwoman Kendra Brooks, Councilman
8 David Oh. So we want to thank all the
9 members of the Committee for hanging in.
10 It's been a really long day today. It's
11 been an exceptionally long day in City
12 Council, so we do thank everybody for
13 staying in and listening to about nine
14 hours worth of testimony today all
15 together.

16 So that being said and seeing
17 as there is no one else here to testify
18 on this resolution, I want to thank all
19 the panels of witnesses for their
20 participation today. We value your
21 opinions. And this concludes the public
22 hearing of the Committee. We will now
23 recess this hearing until the call of the
24 Chair.

25 I want to thank you all very

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2 much for your attendance, and be blessed

3 and be safe. Thank you so much,

4 everyone. Take care.

5 (Committee on Public Health and
6 Human Services concluded at 6:08 p.m.)

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CERTIFICATE

I HEREBY CERTIFY that the
proceedings, evidence and objections are
contained fully and accurately in the
stenographic notes taken by me upon the
foregoing matter, and that this is a true and
correct transcript of same.

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RPR-Notary Public

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