COUNCIL OF THE CITY OF PHILADELPHIA
PUBLIC HEARING BEFORE THE COMMITTEE OF THE WHOLE

- - -
Monday, March 4, 2002
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Room 400, City Hall
Philadelphia, PA
- - -

CONTINUED FY03 OPERATING BUDGET TESTIMONY/BILL 020001

PRESENT: COUNCIL PRESIDENT ANNA C. VERNA, Chair
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COUNCIL PRESIDENT VERNA: This is the continued public hearing of the Committee of the Whole regarding Bill 020001.

The first department to testify today is the Health Department. Would you please approach the table.

(Witnesses come forward.)

COUNCIL PRESIDENT VERNA: Good morning.

COMMISSIONER DOMZALSKI: Good morning, President Verna.

COUNCIL PRESIDENT VERNA: Please identify yourself for the record and proceed with your testimony.

COMMISSIONER DOMZALSKI: Certainly. President Verna, I'm John Domzalski, and that's D-O-M-Z-A-L-S-K-I. I'm Commissioner of the Department of Public Health.

COUNCIL PRESIDENT VERNA: Please proceed.

COMMISSIONER DOMZALSKI: Thank you.

Good morning, President Verna, and thank you for the opportunity to be here and present the Department of Public Health's operating budget for FY '03. Accompanying me this morning is Deputy Commissioner Michael Covone, who will, after my

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testimony, talk about the Behavioral Health System.

The FY '03 Health Department budget request totals $1.26 billion: $122.5 million in the General Fund and $524.2 million in the Grants Fund, and $618 million in the HealthChoices Behavioral Health Revenue Fund. In the FY '03 $1.26 billion total budget, 5 percent, or $64.9 million, comes from City tax-supported funds, which is up from $63.5 million in FY '02.

Looking at an overview of the Department, Mayor Street has made quality, comprehensive, coordinated, employee-integrated social services for children, adults, and families a high priority in his administration, and the Health Department administers a wide range of programs that provide quality social services in meeting that goal for Philadelphians.

These programs include primary care at eight neighborhood health centers, monitoring and control of communicable diseases such as tuberculosis, a specialty clinic for the treatment of sexually-transmissible diseases, and a coordination and funding and oversight of HIV/AIDS programs.

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Investments over the recent years and an infrastructure to support program development and service delivery have borne measurable results. For example, there has been a continued decline in infant mortality and in the prevalence of elevated blood levels in young children. There's been an increase in the number of pregnant women receiving prenatal care. Our commitment to the health care safety net remains strong. I will focus today on some key areas of our accomplishments and challenges.

With regard to public health emergency response, the events the September 11th and the following anthrax scare placed a sharper focus on the public-health aspects of emergency management. Emergency situations involving real or suspected agents of bioterrorism require that the Department of Health serve as the lead agency.

In mid-October 2001, there was an unprecedented number of urgent requests from citizens for assistance with mail suspected of anthrax contamination. In response, the Health, Fire, and Police Departments formed a system of rapid-assessment teams. Since October 14, 2001,

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these teams have responded to 1,263 requests. Fortunately, no evidence of contamination was found.

This national event demonstrated that local governments must prepared to mount the initial response to threatened or actual bioterrorism events, as well as the critical importance of partners such as hospitals, other health-care agencies, and traditional emergency- response agencies. Moreover, that event made clear that effective response to such occurrences requires a significant enhancement to the public health infrastructure, including surveillance systems, laboratory capacity, communications systems, and personnel.

Just as clear is that such enhancements are beyond the financial capacity of local government. This fact is recognized in the current federal budget, which provides substantial increases for infrastructure investment. It is expected that Pennsylvania will receive $37 million of this funding. At this time, we do not know what the City share will be. However, we are working aggressively to ensure that we secure sufficient funding from that source to meet our emergency response needs.

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In considering services benefitting mothers and children, the issue of lead poisoning is prominent. The effects of lead poisoning in children can result in reduced I.Q. as well as brain and central nervous system damage and even death; however, lead poisoning is also completely preventable. The prevention and control of lead poisoning is a community-wide effort requiring the assistance of medical-care providers, community and advocacy groups. The efforts of these groups combined with are own are responsible for our current and future progress in protecting our children.

In FY '95, we had approximately 3,000 newly identified children in Philadelphia with confirmed elevated blood lead levels; as a result of a variety of prevention activities, we expect fewer than 800 in FY '03. This is 800 too many, but is still a significant improvement.

Another key indicator of child health and disease prevention is childhood immunization rates. After showing a steady upward trend in immunization rates to a high of 82 percent of 2-year-olds, Philadelphia has experienced decrease of approximately 5 percent. Factors that may be contributing are the increase in the number of vaccines given to infants and the fact that the vaccines are now all injectable, so parents and doctors may be reluctant children up to five injections per visit.

Nationally this issue is being addressed through an enhanced effort to develop combination vaccines. Locally, we are working with the American Academy of Pediatrics and other groups who educate health-care providers about the safety of administering multiple vaccines simultaneously.

Maternal and child health programs in recent years have accomplished a marked reduction in Philadelphia's infant mortality, from 16 deaths per 1,000 live births in 1990 to 11.9 in calendar year '99, the latest year for which official data are available.

Two key indicators related to infant mortality -- prenatal care and smoking during pregnancy -- have shown improvement, with rates of inadequate prenatal care dropping from 10.1 percent of pregnant women to 6.6 percent over the last 6 years, and reported smoking in pregnant women

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dropping from 20.3 percent to 16.8 percent during the same period.

While public education and outreach have been successful in bringing about these improvements, we must continue to step up our efforts to reduce these statistics, which lag behind national levels. Two programs which have the highest likelihood of reducing these statistics are the Nurse Family Partnership Program, also known as the David Olds Model, and Healthy Start.

The Nurse Family Partnership Program is a nationally-recognized intensive home-visiting program for first-time mothers in areas of the City with high incidence of infant mortality, child neglect, and abuse. This program was launched in FY '02 in conjunction with the Department of Human Services and is projected to serve 400 pregnant women. The program is designed to improve pregnancy outcomes, child health development, and family economic self-sufficiency.

The Health Department is also working to combat the rise of sexually-transmissible disease in adolescents. From 1995 to 2000, reported cases of chlamydia increased 68 percent. Overall, young adults aged 15 to 24 years represent 71 percent of total cases. We are collaborating with the Family Planning Council, the Recreation Department, Philadelphia Safe and Sound, and the School District of Philadelphia to increase screening of youth for chlamydia.

With regard to HIV/AIDS services, the number of newly reported cases of AIDS in Philadelphia increased from 1,039 cases in FY '00 to 1,137 cases in FY '01. AIDS continues to disproportionately affect minority communities, with 78 percent of those living with AIDS in FY '01 being persons of color. The AIDS Activities Coordinating Office's $41.2 million budget includes $7.4 million in Centers for Disease Control and prevention funding, and $4.7 million in City tax-supported funds. AACO successfully competed for an additional $4.1 million in federal Ryan White funding for medical care and related services and expects to receive a total of $25.2 million in Ryan White dollars.

The Department continues to target its efforts to reducing health disparities among minority populations. One important activity is the

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Ryan White Congressional Black Caucus-funded storefront initiative. This initiative, which began two years ago, targets African-American and Latino communities that are most heavily impacted by the epidemic. There are three sites in Philadelphia; these are in Germantown, West Philadelphia, and in Kensington.

The storefronts are street-level, open-access service sites geared to walk-in traffic. These storefronts provide a safe place located directly in the affected community with where people at risk of HIV infection and those who they're HIV status but are not engaged in medical care can receive primary care and other related support services in a non-threatening environment.

With regard to our health centers, they continue to provide a major contribution to the Department's capacity to deliver public-health services throughout the City. These centers are the logical nexus with their communities for attacking neighborhood public-health problems. The health centers provide a range of services such as primary care for children and adults, prenatal care, family planning, and dental services.

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In order to provide greater access to health care for families throughout the City, each health center is open in the evening one day a week, and one center holds half-day Saturday clinic. In addition to expanded hours, all centers offer supervised child-play areas.

In FY '02, the health centers are projected to provide care to 91,500 individuals, who will make 328,000 to the centers, of which of 64 percent will be uninsured. We are projecting similar numbers for FY '03.

The cost of providing pharmacy services continues to increase from $4.8 million in FY '98 to a budgeted $8.1 million in FY '03. As a result of these increasing pharmacy costs and other factors, the unreimbursed costs of care costs -- that is, those costs fully supported by City tax dollars -- has increased from $10.7 million in FY '98 to a budgeted $15.6 million in FY '03. Total expenditures have increased from $29.6 million in FY '98 to a projected $38.8 million in FY '03, a 31 percent increase over the five-year period.

Turning to the environment, the proposed FY 'budget contains $13.5 million for environmental

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protection services, of which $8.5 million is in the General Fund and $5 million in Grants Revenue. Services range from overseeing manufacturing facilities to protect their quality, to conducting food service sanitation programs in relation to the over 14,000 retail food establishments that must be inspected by the Department.

Our air-management services, in addition to its regulatory function, has adopted a plan to assist Philadelphia manufacturing businesses and others that must obtain operating permits under the Clean Air Act. This year, we provided workshops for environmental managers from 73 companies. The workshops provide information geared towards simplifying the permit process, resulting in lower cost to the industry, and increased and more timely compliance.

In the past three years, West Nile Virus has appeared in the eastern United States, including Pennsylvania. In FY '01, 11 people in the Pennsylvania-New Jersey area were infected with the mosquito-borne virus, including two in Philadelphia. Our Environmental Health Services Program has acted to combat this disease by eliminating mosquito breeding. During the summer of 2001, we treated over 70,00 inlets with larvacide. We also treated other prime mosquito-breeding areas and have deployed light traps at 21 sites throughout the City in order to monitor mosquito activity.

In addition, this past October, the Department was awarded a one-year $250,000 grant from the Centers for Disease Control to develop an innovative rodent-control model for implementation in urban neighborhoods.

Turning to animal control, FY '03 will mark the end of a two-decades-old relationship with the Pennsylvania SPCA for the provision of animal control services in the City. Like other SPCAs around the country, our SPCA will no longer euthenize animals. To continue this service, the City is negotiating a lease for a facility at 111 West Hunting Park that, when renovated, will have the capacity to handle over 40,000 animals each year.

The total operating cost of the animal control program for FY '03 is $2 million, but savings from the current SPCA contract and the collocation of our Vector Control Program will reduce the net cost to $1.15 million.

Looking at our nursing home, we continue to contract with Episcopal Long-Term Care to operate the Philadelphia Nursing Home, a skilled-nursing facility, for our most needy Philadelphians. For FY '03, we are requesting appropriation of $37.1 million, with a City subsidy of $3.3 million to maintain the current census at approximately 95 percent of its available beds. The quality of care continues to be rated as high as evidenced by the latest annual survey, which occurred this fall 2001, which was deficiency-free.

Concluding, the Health Department is continuing to move forward in integrating and coordinating services with our fellow agencies. For example, the Health Intervention Program for Families is a collaborative program with the Department of Human Services to provide home-visiting services to families whose psycho-social problems put their children at risk of poor health outcomes. In this service-integrated structure, the Health Department makes a significant contribution toward the quality of life and well-being of Philadelphia's children, adults, and families.

While we do face continued challenges, we're optimistic and we're enthusiastic about meeting the challenges and seizing the opportunities that lie ahead.

Thank you for the opportunity to give testimony today. I will now turn to my colleague Deputy Commissioner Michael Covone

COUNCIL PRESIDENT VERNA: Thank you, Mr. Covone.

MR. COVONE: Good morning, President Verna and members of Council. My name is Michael Covone, Deputy Commissioner, and I'm here to present testimony on the Behavioral Health System/Mental Retardation Services component of the Health Department budget. I will present a brief overview of the fully testimony which you have in front of you.

The FY '03 Behavioral Health/Mental Retardation Services Division budget requests totals $1.09 billion: $17.2 million in General Fund resources, $456.8 million in Grants Revenue Fund; and $618 million in the HealthChoices Behavioral Health Revenue Fund.

The BHSMRS FY '03 budget will support 297 positions: 72 positions in the General Fund and 225 positions in the Grants Revenue Fund.

The Behavioral Health System consists of three major components that coordinates the City's treatment services for approximately 100,000 adults and children annually. These three components are the Coordinating Office of Drug and Alcohol Abuse, the Office of Mental Health, and the Community Behavioral Health. Mental Retardation Services is the office responsible for the development and coordination and monitoring of services for children and adults with mental retardation.

Over the last year, the Behavioral Health and Mental Retardation Services components, under the Director of Social Services, has operationalized a variety of collaborative initiatives with its sister social-services agencies in order to improve the effectiveness and efficiency of services.

Examples of these initiatives include the continued expansion of its Criminal Justice Treatment Initiatives, available to offenders with substance abuse and mental illness. Principal among the goals of these initiatives is the focus on assisting the courts and prisons in reducing prison overcrowding through early parole and direct diversion to treatment in lieu of incarceration. In FY '03, approximately 2200 clients will be admitted to treatment through these initiatives.

Over the last two years, the Department of Human Services and Behavioral Health System have focused on coordinating the management of cases involving intensive behavioral-health services for youth. As a result, the Behavioral Health System has seen increased and more timely access to inpatient care and more timely discharge to appropriate community-based care from residential treatment facilities. This has been demonstrated by a decrease in the average monthly census in residential treatment facilities from 800 beds in FY '01 to a current census of 650 as of January '02.

The accomplishments noted above represent a first step in establishing a system that is both responsive to consumer and family needs and accountable to our various funding sources and the citizens of Philadelphia. In order to further our mission, Behavioral Health and Mental Retardation Services will undertake additional initiatives during Fiscal Year '03, including the continued development and implementation of performance-based contracting for the delivery of mental-health, substance-abuse, and mental retardation services.

The development of a model of integrated case management services. The key objective of the case-management system is to assure that the delivery of these services is provided in a manner coordinated across the various social-service departments in a manner supportive to families and individuals. BHS and MRS will also continue its collaborative activities with DHS in order to assure that children with behavioral-health needs or mental retardation who are the responsibility of DHS receive timely, coordinated services in the most appropriate setting.

In closing, Behavioral Health and Retardation Services will maintain its ongoing efforts to improve accountability and assure the delivery of quality services.

Thank you for the opportunity to provide testimony this morning.

COUNCIL PRESIDENT VERNA: Thank you very much.

Mr. Domzalski, can you explain what type of services and frequency are provided by the Nurse Family Partnership Program?

COMMISSIONER DOMZALSKI: Yes, President Verna. The Nurse Family Partnership Program, the David Olds Model, is focused on aggressively and comprehensively dealing with the constellation of factors that impinge on a family, pregnant women, as well as young children and that result in outcomes ranging from infant mortality to other poor health outcomes.

It's intensive nurse visiting, where the families are visited in their homes, and the focus is on, one, you know, the mother understanding the importance of early and timely prenatal care, that referrals can be made to other social-support agencies such as housing or heat, LIHEAP, other programs such as that that might help the mother cope better with those situations. There's an ability to bring in other referral sources such as substance-abuse counselors, as the case may be.

And importantly, we're also keying on the Nurse Family Partnership to go into those homes and actually do some testing for lead early on so that we can understand whether or not the child, once the child's delivered, might be coming home to a leaded environment, and we can give the right kind of education to the mother in that context.

COUNCIL PRESIDENT VERNA: Thank you.

What is the current average wait for an appointment at a health center?

COMMISSIONER DOMZALSKI: President Verna, the current average is a moving one, and it ranges from as long as four or five weeks in our most heavily impacted center to as few as several days in one or more of our other centers.

And this is one of the issues that we are going to be addressing this year in terms of dealing with the issue where if someone calls for a health center appointment and they call the center that's got a tremendous influx of patients and they're told, Well, gee, we can't see you for three or four weeks, there may be at that very time in the system another center that can see you maybe in a couple of days, and so we'd like to centralize that process and be able to at least make the overture to the patient that even though it might not be the center that you originally called about, we might still, if that's to your liking, be able to see you in another one of our facilities.

COUNCIL PRESIDENT VERNA: And that process will take effect almost immediately?

COMMISSIONER DOMZALSKI: We're doing that now, looking at that from our appointment systems to our phone systems.

COUNCIL PRESIDENT VERNA: And what happens to their medical records; do they have to pick up their medical records when go to another district office?

COMMISSIONER DOMZALSKI: Yeah, these, President Verna, would be new patients calling for a new appointment. We don't have that kind of a wait for a patient if the physician is seeing a patient now, and says, you know, I'd like to see you back in about three or four days. We can always accommodate that so there's no need to transfer records.

And in the former case, she'd begin her care at the new center.

COUNCIL PRESIDENT VERNA: What districts are the busiest, where you would have to wait four or five weeks?

COMMISSIONER DOMZALSKI: Well, the longest wait is for adult patients --

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COUNCIL PRESIDENT VERNA: Mr. Domzalski, excuse me.

COMMISSIONER DOMZALSKI: And that's --

COUNCIL PRESIDENT VERNA: Excuse me, excuse me. We have some competition with the noise outside the building, so if you could pull the mic closer to you, it would be helpful.

COMMISSIONER DOMZALSKI: Certainly, I'm sorry. Certainly.

Yes, our center with the longest wait for appointments is for adult appointments, and that is our Health Center 6, which is presently 52 days.

The shortest wait for adults is Health Center 2 at Broad and Morris, and that's two days for a new adult appoint.

And so we have this disparity that we're hoping to iron out here so that we can make our services not only good but readily available.

COUNCIL PRESIDENT VERNA: You mentioned the escalating cost of pharmaceuticals and how you were trying to control these costs. What is the Medicaid Best Price Program? And what are the eligibility requirements and what are the assumptions in the out-years of the plan for pharmacy services?

COMMISSIONER DOMZALSKI: The Medicaid Best Price Plan is a purchasing arrangement, President Verna, that permits us to purchase pharmaceuticals at the most competitive rate of any purchaser of drugs in the system; in even huge systems, we get at least that price and sometimes we do better.

In terms of what we see in the outgoing years with the kind of increase that we've seen going from FY '95 from $4 million in expenditures in pharmacy services to our projected $8 million. That trend line continues upward.

COUNCIL PRESIDENT VERNA: Will the City be operating the Animal Control Program, or will that be done through a contract?

COMMISSIONER DOMZALSKI: It will be done through a contract.

COUNCIL PRESIDENT VERNA: And when will that be done?

COMMISSIONER DOMZALSKI: We will begin services on July 1 of this year.

COUNCIL PRESIDENT VERNA: Do we have any indication as to who you will be contracting with?

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COMMISSIONER DOMZALSKI: Yes.

COUNCIL PRESIDENT VERNA: And how much it will be costing?

COMMISSIONER DOMZALSKI: Yes, we do. Our operating costs are going to be in the neighborhood of $2 million a year, and those costs will be defrayed by the efficiencies that we will experience by collocating our Vector Control Program, which is now in rental space, which is our Rat Control Program, essentially, and the economy that will result from our not having the SPCA contract. And so those two factors brought together will bring our total operating costs down to $1.15 million.

COUNCIL PRESIDENT VERNA: Can you tell us if CBH has renewed its contract with the State?

COMMISSIONER DOMZALSKI: Yeah, I'll turn to Mr. Covone, President Verna.

MR. COVONE: CBH is currently operating under an amendment at this point in time for the January 1st period. The Law Department is in the process of finalizing the contractual negotiations. We were successful in negotiating a rate for fiscal year -- or calendar year 2002, which we believe is appropriate to continue the program.

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COUNCIL PRESIDENT VERNA: Will CBH be coming to Council for a multi-year contract with the State, or are you entering into a series of one-year contracts?

MR. COVONE: CBH will be coming to Council whether the final results of the negotiation are either a single-year or a multi-year contract. So we are planning to bring either contract to Council.

COUNCIL PRESIDENT VERNA: And when do you anticipate that will happen?

MR. COVONE: We are hoping by the end of the month to have the ordinance information to Council.

COUNCIL PRESIDENT VERNA: Thank you.

I have a number of other questions, but I see there are many other Councilmembers that want to ask questions. On the first go-around, each Councilmember will have ten minutes for questioning.

The Chair recognizes Councilman Nutter.

COUNCILMAN NUTTER: Thank you, Madam President. Generous today. Thank you.

Good morning, Commissioner Domzalski and congratulations to you.

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COMMISSIONER DOMZALSKI: Good morning, Councilman. Thank you very much.

COUNCILMAN NUTTER: Let me ask about -- I heard you, I think, as a part of your testimony talk about immunizations and the rate of immunization, I guess, that we had experienced in the past in terms of the number of children immunized.

Could you give me those numbers again, please.

COMMISSIONER DOMZALSKI: Yes. For the past several years, we were experiencing an increase in the percent of children who were covered -- that is, immunized -- in Philadelphia, and that reached a high of 82 percent. Our current projection is is that number will drop by about 5 percent due to a number of factors that come out and come to play in relation to the visits that the caretaker apparent and the pediatrician have and the number, sheer numbers, of shots that a child might be eligible for and the fact that, in fact, they are now all shots.

COUNCILMAN NUTTER: As opposed to what?

COMMISSIONER DOMZALSKI: For example, with polio, it used to be an oral administration, and now it's injectable.

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COUNCILMAN NUTTER: Okay. So I understand that there may be more shots. Why is our immunization rate decreasing by 5 percent?

COMMISSIONER DOMZALSKI: Again, we're looking at -- we don't know for sure, but the usual suspects are these, and they've been experienced in other cities, and that is, one, the parents' reluctance to subject a child to as many as five immunizations at a single visit, and also, oddly enough, the practitioner is reluctant to --

COUNCILMAN NUTTER: Well, is there a requirement that they have all five at one time? Can't you spread them out over some series of months?

COMMISSIONER DOMZALSKI: Well, the immunization schedule works better if it's adhered to --

COUNCILMAN NUTTER: Right.

COMMISSIONER DOMZALSKI: -- one month of age, two months of age.

COUNCILMAN NUTTER: Right.

COMMISSIONER DOMZALSKI: The other piece of it is the difficulty for, you know, the family to get the child bank at frequent intervals. So it's best to be able to take advantage of that immunization opportunity when it presents itself.

COUNCILMAN NUTTER: Right. Well, let me ask this question then: What can we do, what do we need to do? Is there a public education campaign and a sharing of -- I mean, look --

COMMISSIONER DOMZALSKI: There is, Councilman.

COUNCILMAN NUTTER: It is no fun sitting there watching your child get stuck five times. I mean, my daughter has gone through, I think, the full immunization schedule, but I know she got something just a couple months ago and she just turned 7.

It seems, though, at times, it's probably slightly more painful for the parents than it is for the kids.

COMMISSIONER DOMZALSKI: I think at least as much.

There are two things that can be done. Certainly, education of the practitioners, the pediatric practitioners, in the community that it is okay to do these five shots. The other piece is to make the whole process more user-friendly, and that effort involves the efforts of the CDC and the American Academy of Pediatrics and other health agencies to try to get manufacturers to develop more combination vaccines.

COUNCILMAN NUTTER: Right. Now, even at the 82 percent, I mean, is that from your perspective, and I understand you're -- you can't change the world in two months. Is 82 percent an acceptable level?

COMMISSIONER DOMZALSKI: The goal is 100 percent.

COUNCILMAN NUTTER: I understand.

COMMISSIONER DOMZALSKI: A hundred percent. And I look at that in the context of what it was in 1991, where in some neighborhoods of the City, we had immunization rates as low as 25 percent. And so that's an improvement.

COUNCILMAN NUTTER: Absolutely.

COMMISSIONER DOMZALSKI: The 82 percent is definitely an improvement. And it tracks other cities, although some cities such as Boston did achieve a rate of 90 percent at about the same time we were hitting 82.

But the acceptable and the goal is really

100 percent.

COUNCILMAN NUTTER: Well, what happens to the other 18 percent?

COMMISSIONER DOMZALSKI: There are children out there that we know are not immunized, that we have a system where we know that they're not immunized because we have an immunization tracking system, that the information in that database is compiled. And so we know when a child has missed an immunization requirement, and we'll work with the private practitioner. The system is powerful enough that we're able to generate call-back letters on the physician's own stationary to alert the family to come back.

When that doesn't work, we make home visits and try to get the children in and try to make our services available.

I think one of the pieces also has to do with the fact that we've got to look at when we are providing the services and whether or not our services are being provided at the time when it's most convenient for us or whether we need to make our services available when it's convenient for the people who need them.

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COUNCILMAN NUTTER: Okay, I'm going to want to talk about that more.

In the same area with children -- and if I missed this in your testimony, I apologize. Talk to me about the efforts by the Health Department and other parts of government with regard to the issue of lead paint and lead paint abatement and the impact of lead paint on children.

COMMISSIONER DOMZALSKI: Certainly. I'd just like to take at a step back and talk about that. The issue of lead paint has to do with that -- once a child ingests a lead-contaminated substance -- and in most cases these days, it is contaminated lead dust, household lead dust -- the child is at risk of not only brain damage, but permanent brain damage and impairment in the child's cognitive ability.

And we focus on the child between the ages of 0 and 5. What happens is when a child gets screened by a health-care provider, a blood sample is taken and analyzed for the presence of lead. If it comes back as elevated lead, then we will go out and make a home visit and try to understand the source of that lead contamination.

In the overwhelming majority of instances, that lead contamination is coming from the houses that the children live in; it is the houses that are making these children sick. And what needs to happen is that interventions need to occur in these houses, ranging from education to full-scale process, which we refer to as "abatement."

COUNCILMAN NUTTER: How many kids did the Department serve last year, or how many visits did you make? And how many children do you estimate have lead poisoning or have had lead-related contact?

COMMISSIONER DOMZALSKI: Well, the -- the medical-care people never make it easy, and it varies. And going from the action level, which is 20 micrograms per deciliter of blood once, or 2 readings over 15, we'd be talking probably about as many as maybe 5,000 children in the City in that area. When you get down a little bit lower, that number would go up.

The number we focus on are those children that we know are residing in houses that are awaiting lead paint abatement.

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COUNCILMAN NUTTER: How many houses do you think that represents in the City?

COMMISSIONER DOMZALSKI: That figure is 1400.

COUNCILMAN NUTTER: So 1400 homes that you're aware of --

COMMISSIONER DOMZALSKI: That's correct.

COUNCILMAN NUTTER: -- have -- what do you call it? Lead...

COMMISSIONER DOMZALSKI: Lead contamination.

COUNCILMAN NUTTER: Lead contamination. And how do you know about these 1400 homes?

COMMISSIONER DOMZALSKI: We made home visits. First of all, we were alerted by an elevated blood level in the child, which a practitioner obtained. It was reported to us because lead poisoning is a reportable event in Philadelphia. And so we went out and made that home visit, looked at the house, determined that there was lead paint in that -- lead contamination in the house, and we became aware of it in that fashion.

COUNCILMAN NUTTER: So let's go back to the earlier conversation. We know that there apparently is some number of children who are not adhering to an immunization schedule because we've already determined that at least 18 percent, if not now 23 percent, of the population are not adhering to an immunization schedule.

COMMISSIONER DOMZALSKI: Correct.

COUNCILMAN NUTTER: Is it correct to then assume that some high proportion of those children are also probably just not seeing a physician on a regular basis and probably have not been tested for lead and, therefore, there's a population of children who have lead poisoning that we don't even know about and concurrently homes that we have not inspected?

COMMISSIONER DOMZALSKI: That's correct, that's correct.

COUNCILMAN NUTTER: Do you have any way of estimating what that population is?

COMMISSIONER DOMZALSKI: Yes. When you look at the distribution of lead-contaminated houses in which children are residing Philadelphia, and if you look at a map of the City of Philadelphia and you look straight up and begin at the northern edge of the City and then come down and make a brief stop at Center City and then make a hard right, if you're coming from north to south, you will then end up in West Philadelphia. So it's kind of like a J.

COUNCILMAN NUTTER: Right.

COMMISSIONER DOMZALSKI: That is the lead J of Philadelphia, all right?

And we know, for example, that -- we believe we're getting a good immunization screening done in that area because the practitioners are sensitized to it, the community groups are sensitized to it, the advocacy groups are sensitized to it, and we think we're getting good coverage there.

So does that mean everyone is screened? Absolutely not. We know -- for example, we do about 40,000 lead screens a year, and in the age group we're talking about, that could be anywhere from between, I guess, maybe as many as 40,000 additional kids that we may need to be looking at, but they're in all parts of the City.

We know in that lead J that there are approximately 10,500 children born every year, so that's where we concentrate our screening activity.

COUNCILMAN NUTTER: All right.

Commissioner, I believe my time is up, but I will return to these two topics as well as others.

Thank you for the information.

COMMISSIONER DOMZALSKI: You're welcome.

COUNCIL PRESIDENT VERNA: Thank you.

The Chair recognizes Councilman Kenney.

COUNCILMAN KENNEY: Thank you, Madam President.

Commissioner, I just want to move back to the Animal Control Program again. Are you accepting responses to an RFP at this point?

COMMISSIONER DOMZALSKI: No, we are not, we're not. We're well, at this point, beyond that process. We would have welcomed enough interest in the community to have been able to done an RFP.

This is, as you know, a very specialized service, and we went out and looked at people that we might encourage to come in and help us do this service. We were met with zero interest in some cases, and the level of interest in others was not such that we were comfortable in being able to proceed in that fashion. So we decided to pick it up as we are now doing it.

COUNCILMAN KENNEY: What are we doing?

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COMMISSIONER DOMZALSKI: We are renovating a --

COUNCILMAN KENNEY: No, as far as who's going to operate it. Who's going to pick up the animals, do the service calls?

COMMISSIONER DOMZALSKI: We've created a division, a nonprofit division, in our unit that will be called the "Philadelphia Animal Control Agency," and it will employ the people that will -- that are skilled, and in fact, a lot of them will be coming over from the current SPCA function, which will be done away with. And they'll be employed in the organization.

COUNCILMAN KENNEY: So will they be City employees that will be working for the nonprofit?

COMMISSIONER DOMZALSKI: They'll be working for the nonprofit, they'll be contract employees.

COUNCILMAN KENNEY: Contract employees.

COMMISSIONER DOMZALSKI: Yes, sir.

COUNCILMAN KENNEY: And most of the current SPCA employees will be coming over to do that?

COMMISSIONER DOMZALSKI: Yeah, almost

all, all that were associated with the Animal Control.

COUNCILMAN KENNEY: How many people are there?

COMMISSIONER DOMZALSKI: 40.

COUNCILMAN KENNEY: And we'll be hiring more people?

COMMISSIONER DOMZALSKI: That will be the number. We will not be expending it beyond that.

COUNCILMAN KENNEY: So even though there's a contract, it's not a contract with an outside vendor; it's almost a hybrid kind of --

COMMISSIONER DOMZALSKI: No, it's not an outside vendor, no, sir.

COUNCILMAN KENNEY: Okay. Let's move a moment to your testimony on the nursing home.

It says for FY '03, we are requesting an appropriation of $37.1 million with a City subsidy of 3.3. Could you explain what that means?

COMMISSIONER DOMZALSKI: Certainly. When we outsourced the nursing home in 1994, and just prior to that time, the City -- it was costing the City just a little under $9 million to operate that facility at an occupancy of 255 residents. We wanted to improve the fiscal situation but also improve the care.

And we also, though, wanted to keep the facility open to the most needy Philadelphians, which, in our parlance, translates into those individuals who require the most heavy amounts of care. And to do this, we knew there needed to be a subsidy.

So we pay the $3.3 million subsidy to the operator of the nursing home, and essentially that's all of the City's costs. The rest of the cost is borne by third-party reimbursement.

COUNCILMAN KENNEY: So that's the $37.1 million appropriation.

COMMISSIONER DOMZALSKI: Yes, sir.

COUNCILMAN KENNEY: It's advanced based on --

COMMISSIONER DOMZALSKI: Well, that's our spending authority.

COUNCILMAN KENNEY: And then we wait for -- how does it work?

COMMISSIONER DOMZALSKI: The way it works is that when a resident is admitted to the home, we obtain third-party reimbursement for those days.

It's overwhelmingly medical assistance. There is some Medicare.

And then we bill the operator of the home bills for those days. And since the City is the license-holder, that money comes to the City and then we disburse it to the operator.

COUNCILMAN KENNEY: And the shortfall's 3.3.

COMMISSIONER DOMZALSKI: Yes, sir.

COUNCILMAN KENNEY: Okay, thank you.

Thank you, Madam President.

COUNCIL PRESIDENT VERNA: You're welcome.

The Chair recognizes Councilwoman Tasco. I believe that Councilwoman Blackwell and Councilman Rizzo are yielding.

COUNCILWOMAN TASCO: Yes, and I want to thank both of my colleagues for allowing me to ask these questions at this time. I may have to leave the Council chambers on some business.

I want to go back to the lead program. What is the policy on abatement of houses pre-sale? I know there was some discussion of rules and regulations regarding the abatement of lead in houses prior to sale.

COMMISSIONER DOMZALSKI: Yeah. There's a disclosure requirement that if a house contains lead paint, it must be disclosed to the purchaser, and the obligation is to have that premise abated before the transaction takes place.

COUNCILWOMAN TASCO: Is this being enforced?

COMMISSIONER DOMZALSKI: Yes. And I think there are some instances when it isn't, but by and large, when people get that notice, they understand it these days, and are either going to ask the owner of the house to abate the premises, or they're going to say, Look, since I'm going to have to have this abated, I need a consideration in the purchase price so I can have it done.

And then these houses are -- we become aware of them and then we go out and clear them to make sure that they have been abated properly.

COUNCILWOMAN TASCO: What's the responsibility of a landlord to lead abatement in houses or apartments they may rent?

COMMISSIONER DOMZALSKI: To abate that condition, to abate that condition. We issue orders to that effect.

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COUNCILWOMAN TASCO: Because you mentioned the high incidence in West Philadelphia in the J corridor. I heard West Philly and probably another area. And so some of these houses may have been inhabited for a long period of time by a family. So what happens to them? Is there an inspection process by the City to see that these homes are abated?

COMMISSIONER DOMZALSKI: There is, there is. And when we find the order that has not been complied with, that property then finds its way onto our list; that's what -- part of those 1400 houses -- in fact, almost half of them are in tenant-occupied dwellings.

COUNCILWOMAN TASCO: But in the meantime, they're on the list, so what happens?

COMMISSIONER DOMZALSKI: To the child?

COUNCILWOMAN TASCO: Yes. If they're on the list and -- if they're on the list of houses to be abated --

COMMISSIONER DOMZALSKI: Yes.

COUNCILWOMAN TASCO: -- is there a time period for the landlord to abate the property?

COMMISSIONER DOMZALSKI: It's

immediately. The issue is at this point that it isn't being complied with with the speed that the condition requires. And we're ramping up that function to make sure that we get with those landlords and in a way that doesn't impair their interests to continue to rent to children, but to make sure that they understand that responsibility, and together with the Law Department to, you know, take the necessary legal action to make that happen.

COUNCILWOMAN TASCO: What can you do to force them to -- or encourage or -- well, enforce really, because encouragement is not working. What about forcing them?

COMMISSIONER DOMZALSKI: One of the things -- I mean, what you do is, you end up with, you know, an order from the court that's either complied with or isn't, and then there's that whole process.

What needs to happen is that these properties need to be abated. And everything that -- and in order to do this, we need a whole new strategy for looking at this.

The way we have looked at this in the past has been good, appropriate, but it's been slow and it has been ineffective as measured by what's been happening to the backlog.

COUNCILWOMAN TASCO: Well, the City has to issue a license for these landlords to rent these properties. Why do we continue to issue them a license if they don't comply?

COMMISSIONER DOMZALSKI: And that's where L&I comes in. It's going to be a joint effort to ramp this whole enforcement process up. And in the final analysis, when we look at this and we have a child who really is at risk in those houses that we're concerned about, even with our present situation, we can go in and abate that house and then lien the property.

COUNCILWOMAN TASCO: And we end up with more blight.

COMMISSIONER DOMZALSKI: (Nods head.) Yeah, it's not without its difficulties, Councilwoman.

COUNCILWOMAN TASCO: Well, I think there are some people here, such as PCCY, and myself, as chair of the Committee on Health and Human Services, who would like to have a dialogue about how we can ramp this up.

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COMMISSIONER DOMZALSKI: I think we absolutely have to do that, Councilwoman Tasco. I mean, it is something that is just crying for a whole new look. We can share with you some things we plan to do differently and are doing differently as of this very moment in relation to all of this, and that dialogue would be most welcome.

COUNCILWOMAN TASCO: Thank you.

Question: How would the seller know that lead is in the house?

COMMISSIONER DOMZALSKI: There's a disclosure form.

COUNCILWOMAN TASCO: So they get a disclosure form. So do they have to have someone come in and test to see if the lead is there? 'Cause if I want to sell my house, I don't know whether I have lead or not. I'd say, Well, no, but then if you find out later there's lead, what's the come-back on me?

COMMISSIONER DOMZALSKI: There's a notice either on the agreement of sale or in connection with it that says, you know, there are these hazards you may be aware of and while -- if the owner doesn't know, then the owner can just say, "I don't know," and if that's truthful, then that's fine.

If, on the other hand, the owner knows that there's lead paint in there and does not acknowledge that, then there's a whole other set of problems that accrue to the owner in that circumstance.

But what we're finding is people are, particularly with HUD houses and the rest of it, going out and getting the lead condition of the property checked.

COUNCILWOMAN TASCO: And you say that they have to abate it?

COMMISSIONER DOMZALSKI: Yes.

COUNCILWOMAN TASCO: Okay, there's a certificate that says that it has been abated?

COMMISSIONER DOMZALSKI: Part of that certificate is -- we're part of that certification process. We will go out and make a measurement in the house after it's been worked on and determine whether or not it was abated, and if the abatement was done, whether or not it was effective.

COUNCILWOMAN TASCO: Is there any way for the seller to leave an escrow of funds for the abatement? What if they check off "I don't know," what happens?

COMMISSIONER DOMZALSKI: Well, I think, you know, for anybody in Philadelphia, just -- there shouldn't be anybody in Philadelphia that's buying a house that shouldn't be thinking about whether or not it's got lead in it, no matter what part of the City you live in, although the newer parts of the City don't have the problem; just as there shouldn't be any medical-care provider that's seeing a child under the age of 5 that isn't thinking lead.

So people need to be aware of that, and what our finding is, is that they are aware of the issue of lead. And, you know, we do have an ordinance, a disclosure ordinance, that came through this Council very helpfully that makes that a reality in Philadelphia.

COUNCILWOMAN TASCO: Let me ask my other question here. So we won't belabor this. I'm sure other people have other questions around it, but I do just want to confirm that we will follow through with you on getting together to have this discussion.

COMMISSIONER DOMZALSKI: That's most welcome, Councilwoman.

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COUNCILWOMAN TASCO: Okay, another question. How can we help low-income property owners with the abatement?

COMMISSIONER DOMZALSKI: You know --

COUNCILWOMAN TASCO: Has that been thought in the NTI Program or somewhere through the CB community?

COMMISSIONER DOMZALSKI: It's really the question of the day, and I want to first acknowledge that this is a critical public health issue, but it arises as a consequence of the condition of housing. And we need in our strategy to look at our housing and how we deal with housing in the government. I've recently been over, you know, to talk to Debra McCullough about it in the Office of Housing and Community Development. They have some programs that have to do with home stabilization.

You know, what we're seeing in these houses and part of the reason we've got this backlog is it's just not just a simple matter, as it was 20 years ago, of going in and taking care of the lead paint. Oftentimes these houses need tremendous systems repair. What I mean are -- the roof, sometimes they don't have an adequate roof.

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Sometimes the other systems, such as plumbing is just broken and they need that. Sometimes it's heating.

So these houses need a good look at comprehensively not only by public-health people, which we are prepared to do, but by people who also know the whole housing environment, and does it make sense to invest anymore money in this particular piece of property or does it make more sense to get the child and the family relocated.

COUNCILWOMAN TASCO: Well, thank you very much.

You gave us a list of professional contract services.

COMMISSIONER DOMZALSKI: Yes, ma'am.

COUNCILWOMAN TASCO: We have a $32,409,075 contract with Episcopal Long-Term Care?

COMMISSIONER DOMZALSKI: Yes, ma'am.

COUNCILWOMAN TASCO: What percentage is that of the total operational cost?

COMMISSIONER DOMZALSKI: That number is -- and I'd have to look at it. It either would have to be combined with the -- I believe that's the entire operating cost. That's our subsidy plus what the revenue produces to operate the home. It's just a little under 37 million

COUNCILWOMAN TASCO: Does Episcopal Hospital provide any support revenue for the operation of the --

COMMISSIONER DOMZALSKI: Yes. They are the employer. They employ some 504 personnel, ranging from nurses to nursing assistants to food service workers to operate the home.

COUNCILWOMAN TASCO: Do they pay for it out of this 32 million, or is that something they pay out of other revenue?

COMMISSIONER DOMZALSKI: No, it's paid out of that money.

COUNCILWOMAN TASCO: So we're paying them to manage the Philadelphia Nursing Home?

COMMISSIONER DOMZALSKI: Yes, to operate and manage.

COUNCILWOMAN TASCO: To operate and manage. So they do no contribute any money to the operation of that facility?

COMMISSIONER DOMZALSKI: Well, it depends on what conversation we're in. You know, we think that there's an awful lot being contributed, but we think that number covers the cost of operating that home.

COUNCILWOMAN TASCO: Would that have been the same cost for us if we were operating it?

COMMISSIONER DOMZALSKI: No, I don't think so, Councilwoman. When we were operating it, it was costing us almost $9 million more than we were bringing in, and the census at the nursing home, the number of residents in the nursing home at that time, was about half of what it is now, about 255 residents at that time.

COUNCILWOMAN TASCO: So what's the population now?

COMMISSIONER DOMZALSKI: This morning, it is 435.

COUNCILWOMAN TASCO: Mm-hmm.

COMMISSIONER DOMZALSKI: And that includes 18 residents who are in the hospital, 7 of whom are in the hospital longer than 15 days.

COUNCILWOMAN TASCO: What is our contract with United Way of Pennsylvania?

COMMISSIONER DOMZALSKI: I'm sorry?

COUNCILWOMAN TASCO: What is the contract for with -- what do we contract with the United Way of Pennsylvania for, the $16 million?

COMMISSIONER DOMZALSKI: United Way of Pennsylvania. Let's see if I can get assistance here. That is in the Health Department -- approaching is Deputy Managing Director Ellen Steiker, who has not only the numbers but the information.

(Ms. Steiker comes forward.)

MS. STEIKER: Good morning. This is Ellen Steiker.

The contract with United Way is for the Children's Investment Strategy, the after-school and the Beacon programs. We had to choose one department to put that initiative in, and we chose the Health Department.

COUNCILWOMAN TASCO: And so all of this money goes directly to United Way for those programs?

MS. STEIKER: That's correct.

COUNCILWOMAN TASCO: Okay. Can you identify in this list of 82 contractors -- and you want to give that information to the Chair -- the number of companies that are minority?

COMMISSIONER DOMZALSKI: Certainly.

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COUNCILWOMAN TASCO: Thank you.

Do I have more time? How much time do I have?

COUNCIL PRESIDENT VERNA: This will be your last question.

COUNCILWOMAN TASCO: I want to ask you just a brief question about infant mortality. I have a lot of questions about CBH, but I'll have to try and come back to that later.

Recently -- and I noticed you testified in your testimony that -- you talk about the increase and the problems in West and North Philadelphia. Recently, about six months ago, there was an article in the Inquirer that stated that the increase in the highest number of infant mortality deaths are now in West Oak Lane. I don't know if you saw that or if you all were working on that or paying attention to that.

But what is being done to address that issue in that community?

COMMISSIONER DOMZALSKI: That is a fact, and it's one of the reasons where -- you know, the infant mortality, like immunization rates and the rest of it, varies across the City. What that number is is an average for the City. And even though when we look at the unofficial figures for the year 2000, there's an even greater decline in infant mortality. We know that it's not even across the City.

And, in fact, when you look at these infant mortality rates, you see the variation from the very high infant mortality rates in District 9, in the northern part of Council District 2 and Council District 3, and in Council District 4 among the highest.

And where we looked at West Oak Lane, you know, that's an area where, you know, if we were immediately to get some money to expand the Olds project, that's where we would go because that would be the next on our list to be there.

COUNCILWOMAN TASCO: So we're waiting to get the money to do it?

COMMISSIONER DOMZALSKI: Well, we're waiting, but we also have some ability to do some infant mortality reduction-related services through our Healthy Start Initiative, which can bump up into that area as well.

COUNCILWOMAN TASCO: What about the

possibility of expanding the Momobile to that community?

COMMISSIONER DOMZALSKI: Well, they're slightly different services. I spent some of last week riding around in the Latino Momobile, and that was after coming from a series of case conferences with the agency that's providing some of our Healthy Start and some of other Olds programming. And they're significantly different services, but they would help; they would help in getting the word out, getting the message out about the need for and the importance of early, early prenatal care.

In fact, one of the conferences I was in the week before last, the mother's first prenatal care was 20 minutes before she delivered. So we need to keep hammering on this and on ourselves to get the word out.

COUNCILWOMAN TASCO: So have you begun to develop or initiate or generate or think about the kind of services that might be provided to the West Oak Lane area?

COMMISSIONER DOMZALSKI: Yeah, and I think the model would be very similar to what we're doing, you know, both in the Olds Program and the

Healthy Start in West Philadelphia where -- it's just not, as you know, dealing with constituents and the issues that come before -- that are brought to you by them, that it is a very mixed group of resources that are needed.

There was a family that we looked at last week that the baby came to our attention because she was cocaine-positive, and the home visiting team involved with the child, who was now several months old. The parents, the birth parents, were in an unsettled housing situation, had needed substantial substance-abuse counseling, as well as some vocational counseling.

You know, we haven't done our people any favors in the systems that we've created for them to jump over. For example, the father in this case needed to get a Social Security -- needed to apply for Social Security. Well, he couldn't apply for Social Security because he needed a picture I.D, and he couldn't get a picture I.D. until he presented to the picture I.D. issuers some evidence that he, in fact, had a perfect address, and what was acceptable was a utility bill. Well, he lives in a rooming house and he doesn't get utility bills. So our people had to figure a way around this so he could get the resources that he needs to be able to, you know, deal with a number of problems, including the substance abuse as well as the vocational issue so that he can eventually make a home for this child who's now living with the paternal aunt.

COUNCILWOMAN TASCO: Thank you.

COUNCIL PRESIDENT VERNA: Councilwoman, your time is up.

COUNCILWOMAN TASCO: Thank you.

I want to congratulate you too.

COMMISSIONER DOMZALSKI: Thank you, Councilwoman, I appreciate that. Thank you.

COUNCIL PRESIDENT VERNA: Commissioner, when one sells a house, isn't it required that there be an inspection for termites if they're getting a mortgage?

COMMISSIONER DOMZALSKI: As I recall that process, President Verna, it is, it's something that everyone asks for as a certification. It does not come under the Health Department, we don't administer that, but it is just my general knowledge that it is something that's sought after by everybody who buys a house.

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COUNCIL PRESIDENT VERNA: Well, then I don't know why we couldn't have an inspection for lead paint at the same time. That should be a requirement.

At this time, the Chair recognizes Councilwoman Blackwell.

COUNCILWOMAN BLACKWELL: Thank you, Madam President.

I think some of the issues I have concerns about were addressed. The others I can hold in the interest of time.

I did want to say that I'm very, very glad that we have a new plan for SPCA; that's been kind of bone of contention with me for some years, ever since Council was insulted by the former head of the SPCA.

Having said that, again, we certainly want to thank you, Commissioner. We're absolutely happy to have you at the helm of your department, and we thank you for going the extra mile and for always being on call and for doing great things.

What we would like to do in my area is, Mr. Johnson just brought to me info that our infant mortality rate in West Philadelphia is as high as it was before the Health Start stuff started. So what we would like to do is work with you and do some added workshops in the area to help disseminate information, but we'll contact you about that.

But, again, we wanted to say thank you for the great job that you've continued to do and that through the years you've always been on call, and you've just been a great person and an excellent commissioner.

COMMISSIONER DOMZALSKI: Thank you very much, Councilwoman Blackwell.

COUNCILWOMAN BLACKWELL: Thank you.

COUNCIL PRESIDENT VERNA: The Chair at this time recognizes Councilman Rizzo.

COUNCILMAN RIZZO: Thank you, Madam Chair.

Again, congratulations. You've worked hard and it must be personally gratifying to know you've come through the Health Department and now lead it.

COMMISSIONER DOMZALSKI: Thank you.

COUNCILMAN RIZZO: Commissioner, recently, I've had some interaction with the Philadelphia Corporation for Aging. We're all naturally concerned about our young people, but I'm as equally concerned about our older folks. And I would like to know what the Health Department is presently doing for our senior citizens and the interaction that we have.

After doing some initial research, I find that we have some contracts, there's money spent, there's money received with the Philadelphia Corporation of Aging specifically, and I find out it's pretty much a State-controlled agency, if I may call it "an agency," and it gets State and federal money.

But I do have some concern, and I'm not going to get specific right now, about that organization, and I would like to know our relationship with the Philadelphia Corporation for Aging and what services they provide the Health Department. And I assume I'm eventually going to be talking to the next panel, the Department of Human Services, to see what they do for those folks.

But could you be specific and tell me about your relationship with the Philadelphia Corporation for Aging?

COMMISSIONER DOMZALSKI: Sure, Councilman

Rizzo.

We work in a couple of ways with them, and all of them are relatively non-contractual. The biggest program that we have with them is around our heat, our heat program in the summer, where they operate a heat hotline for, us and we have a system of being able to respond to individuals who are elderly, who are isolated and are able to assess the environment and get them what is needed, either relocated during a particular hot spell or a fan or something of that nature. And that's where we work very closely with them.

We also work with them when we get called out to investigate a condition in a neighborhood -- maybe it's a house that's creating some sort of a sanitation problem, and sometimes we'll find that the occupant of that house is an elderly, infirm person, and we will try -- we will work with the Philadelphia Corporation for Aging in trying to attach some services quickly to that resident of that facility, that home.

But as far as a contractual relationship with PCA, we don't have one.

COUNCILMAN RIZZO: Well, I wasn't

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necessarily suggesting a contract with PCA, but I'm more concerned on being it called "Philadelphia" Corporation for Aging, and I'm starting to talk to various people within the Administration that we might be taking some lumps unfairly based on services, or expectations of services, from this organization.

And I'm finding every day that I check that we have very little interaction with them because, again, the executives over there believe that they are funded by the State, they are funded by the federal government, and really they don't provide a lot of services from what I'm understanding, and there are some rumblings right within the Administration about what they do, the way they respond to requests.

How dependent are you on them other than them answering the telephone, which I believe you could do -- you have hotlines. And we know people -- I don't understand necessarily why we even need them to do that for us, but what do we expect of them? And I want to be real candid with you.

COMMISSIONER DOMZALSKI: Yeah.

COUNCILMAN RIZZO: Do they help you? Are

they doing what you need to them to do? And this is a question where I'm trying to find out exactly what they do, and are they doing well what they do?

COMMISSIONER DOMZALSKI: Well, they do help and there are a couple of ways. One is where they actually do perform some certification functions for the State of Pennsylvania for the residents in our nursing home that would require medical assistance, so they help facilitate that.

The other thing that is being done, and it's kind of an innovative thing being done at the State level that I think we need to pay some attention to, and that is a Medicaid waiver program, which allows the Corporation for Aging to provide a constellation of services in the home of an elderly and infirm person, with the objective being to keep that person from needing institutional care. And so that's a very valuable function.

Admittedly, admittedly, the demand far outpaces the number of slots that they have, and I think sometimes that what I have experienced are persons who would really love to have attendant care and personal care in the home of an elderly person, and PCA happens not to have a slot.

Beyond that, I would certainly offer to work with you with the leadership of PCA to get to the bottom of some of the issues and particularly the service questions.

COUNCILMAN RIZZO: Well, Commissioner, that's very important to me because, again, I'm very, very concerned about our young, but I'm equally as concerned about the way we treat our seniors.

Let me give you an example. There was recently a senior citizen -- and you might have seen it in the newspaper and on the television -- where she was assaulted and almost beaten to death off of Girard Avenue.

COMMISSIONER DOMZALSKI: That's right.

COUNCILMAN RIZZO: Well, a person called me and I won't, again, identify the person, but the person was involved in an investigation of what went on there, at least the -- it was an investigation not within your department.

And this woman was almost beaten to death. She was close to 90, living by herself. I was so concerned, I went there, and when I got to the house, we would have thought maybe she was dead inside because there was no response to the door, but she finally came to the door. The oven -- she had no heat in the house, the oven was the only sole source of heat.

And I'm wondering how we could let, after the police -- she went -- they took her to the hospital and they sewed her head up, she had a arm that was broken, that there was no automatic follow-up on that person. I mean, something's not right here when a person is almost beaten to death, 90 years old or close to it, released from the hospital, taken home, and no immediate case or communication from the Police Department or somebody reading in the newspaper that this occurred, but I wouldn't want to have to depend on reading in the newspaper to start a process.

Well, we finally got the heater going, we told her how dangerous it is. The Fire Department came out the same day and put smoke detectors in the property.

But my point being, here's a lady almost beaten to death, released from the hospital back to her home. We brought her a pie, Commissioner; after the next day, I had a person drop off a pie. She opened the box and actually started to eat the pie with her hands.

COMMISSIONER DOMZALSKI: Oh, my God.

COUNCILMAN RIZZO: She hadn't had food.

COMMISSIONER DOMZALSKI: See, this is a case where, you know, certainly, you know PCA should -- but also our protective services and --

COUNCILMAN RIZZO: Two days later, Commissioner, I got a call back from PCA and, again, I'm not trying to beat them to death here. Two days later, I get a call back from PCA asking me to do the intake process for PCA. I don't know the lady; all I know is that anyone should care about a person that I just described.

So maybe I just went to the wrong organization for help. Maybe I should have come to you. But that's why -- and I am going to do whatever it takes, whether it's writing to the people that audit federal money, to the Governor, to find out why this system doesn't appear to me -- I'm not a professional and I'm going to turn to you for some guidance and assistance.

But, again, I'm very, very concerned about our senior citizens, and I feel confident that

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if we hadn't gotten there when we did, people from the Fire Department and the utilities said that she might have died in that house, and it's unfortunate that conditions like this exist.

So I'm willing to work with you, but I can tell you, if you call it "rocking the boat," I'm going to rock the boat on this one.

COMMISSIONER DOMZALSKI: Oh, absolutely. And, you know, I think the frustration and, I think, anger that, you know, justifiably evidence in relation to that case are the kinds of things that are making us in the government look at just how we need to structure our assessment capacity.

I was just talking with some people in my department as well as the DHS Commissioner, Commission Martinez, about putting together what we're calling a different social-services version of a rapid-assessment team, because oftentimes these problems don't fall within any one department or agency.

And it shouldn't be on the shoulders of Council to try and figure that out; you should be able to come to us or someplace in the government where we can work through that to get the services to the people such as this poor soul who needs it.

COUNCILMAN RIZZO: And I'm convinced that there's more people like this lady out there that -- I don't want to suggest that our seniors are overlooked, but in the twilight of their life, dignity, some care.

And I'm not sure what the Health Department does, what Human Services does for our senior citizens, but I'm going to learn more about it exactly what services are out there, you can bet, and hopefully get them that care that they need, especially during some tough times like this lady.

COMMISSIONER DOMZALSKI: I'm sure. I mean, it's just --

COUNCILMAN RIZZO: And I know that when you say that, you say that with sincerity.

COMMISSIONER DOMZALSKI: Oh, absolutely.

COUNCILMAN NUTTER: I know you --

COMMISSIONER DOMZALSKI: I take this, you know, as a personal responsibility to work with you on just these kind of issues.

COUNCILMAN RIZZO: Thank you, Commissioner.

Thank you, Madam Chair.

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COUNCILWOMAN REYNOLDS BROWN: You're welcome.

The Chair recognizes Councilwoman Brown.

COUNCILWOMAN REYNOLDS BROWN: Thank you, Madam President. (Inaudible) my colleague Councilman Ortiz was ahead.

Good morning and congratulations to you both.

Let me follow up on the lead discussion and add to the course of my colleagues about our strong interests in seeing a comprehensive strategy around lead. The biggest surprise to me, as I read in your testimony, is that it is completely preventable.

So With that said, you spoke briefly to conversations that you've had with City Housing officials. Is that the beginning of a long-term discussion, or where did that end up? What are the next steps specifically as it relates to lead?

COMMISSIONER DOMZALSKI: It's part of the beginning and, actually, the strategy of the Health Department, in conjunction with an overall strategy for the City -- I'm not sure if you can hear me Councilwoman.

COUNCILWOMAN REYNOLDS BROWN: Sure.

COMMISSIONER DOMZALSKI: It began a couple weeks ago when about eight of my colleagues and I met on a Saturday morning in the Lead Program and brought together medical personnel, social-service personnel, public- health nursing personnel, environment experts, and fiscal people to look at a new way of looking at lead poisoning and how we need to organize our services and what kinds of resources are necessary.

And we're calling that the "Lead Abatement Strike Team," and for those who are given to looking for acronyms and things, we want this to be indeed the last time we need to deal with issues like backlogs and have a strategy for dealing with this issue once and for all.

And clearly, clearly, the Housing authorities need to be involved with this. Not only was I with Debra McCullough last week but also with Carl Greene and my colleague Rob Hess in terms of vouchers and things that we might need to do to temporarily or permanently relocate people out of these houses that just cannot be invested in further.

COUNCILWOMAN REYNOLDS BROWN: It's a huge problem. So you mentioned a you few stakeholders. With regards to landlords, would not L&I be a stakeholder in that conversation and discussion as well?

COMMISSIONER DOMZALSKI: Absolutely, Councilwoman, they've got to be there, and they will be.

COUNCILWOMAN REYNOLDS BROWN: Okay. Councilwoman Tasco spoke to the role and responsibility of landlords; I did not hear an answer to the question, what is the penalty for landlords who don't obey the law?

COMMISSIONER DOMZALSKI: The penalty is, we can fine them, we can get a fine in Municipal Court or Court of Common Pleas, we can do the work and we can lien the house; all of those are very uncomfortable processes for the landlord that, one, the landlord would want to avoid, and we want to make the cost of maintaining that condition something that the landlord in fact would want to avoid while, at the same time, trying to work in a collaborative, productive way so we don't unnecessarily decrease the stock of housing in the

City.

But the bottom line has to be that if you're renting a premise and it's lead-contaminated, it's got to be abated.

COUNCILWOMAN REYNOLDS BROWN: This speaks to a follow-up to President Verna's question. If landlords are asked to honor building codes and the like and those are enforced, why can't this be put up and given as high a priority, enforcement of abatement of lead as well?

COMMISSIONER DOMZALSKI: Exactly, exactly. And part of the reason is just what we did a couple of Saturdays ago, is saying that this is no longer acceptable, all right? That that is at least as high a priority across the board that we've got to deal aggressively with this situation.

And that's part of it, just saying that. And then the question of --

COUNCILWOMAN REYNOLDS BROWN: And then putting some muscle and real teeth behind the discussion. So we all will look forward to the reports, I guess status reports, of this new strike team.

COMMISSIONER DOMZALSKI: I want to

caution you, Councilwoman: None of this is going to be, you know, easy, right out of the box.

COUNCILWOMAN REYNOLDS BROWN: Absolutely.

COMMISSIONER DOMZALSKI: It's going to take some finesse, some elegance, and some hard work and resources.

COUNCILWOMAN REYNOLDS BROWN: But finally, there's a group of professionals collectively working on this in a focused kind of way, which has not -- well, I haven't observed that since we've been discussing lead now for my third year.

COMMISSIONER DOMZALSKI: Yes.

COUNCILWOMAN REYNOLDS BROWN: Okay. The more immediate problem is -- the 1400 is a huge backlog, but speaking to more immediate steps such as removing peeling and flaking paint, repainting the area, replacing windows, doors and the like, has that been a part of the discussion with the Housing Department? because those are the more immediate steps that homeowners may or may not be able to tackle. Where are you with that?

COMMISSIONER DOMZALSKI: Yes, it's very definitely a part of it and a critical part of it because what we need is an assessment of, does it make sense for us to go in there and do that very labor-intensive work to stabilize those services and repaint them when we have a roof that isn't there or leaking badly or where we have plumbing systems that are leaking on the second floor and causing the work we're doing to be deteriorated on the first floor, so it's those systems that need to be looked at in terms of the whole abatement process.

The technical piece of abatement is not all that difficult.

COUNCILWOMAN REYNOLDS BROWN: Okay.

COMMISSIONER DOMZALSKI: What's made it difficult is the quality and the deteriorated nature of the houses that we end up dealing with and also some of the antiquated ways we've been going about things, like saying simple things, which, if I say it to you, you'll probably leap over here after me, which says that we can just say to a family, you know, "We want to come in and abate your house, how about everybody getting out of here."

COUNCILWOMAN REYNOLDS BROWN: It doesn't work that way.

COMMISSIONER DOMZALSKI: Well, I mean,

no. I mean, there's children and where we're going to put them, you know, and we get upset if we say we're going to be there at 9 and then we can't start till 10:30 because, you know, mother's got two or three children to get moving, you know, and then cleaning up at the end of the day so they can come back in.

COUNCILWOMAN REYNOLDS BROWN: Sure.

COMMISSIONER DOMZALSKI: And it's a colossal waste of resources in doing that, and it's not the family's fault.

COUNCILWOMAN REYNOLDS BROWN: And inconvenience to families.

Councilwoman Tasco also spoke to the opportunity being ripe, R-I-P-E, with the blight program. Do you agree, as the City moves to do things differently around housing and decay of housing and the like?

COMMISSIONER DOMZALSKI: Yes, yes, Councilwoman. And we've taken another first step in that regard where, as a result of meeting with Debra McCullough, we have exchanged lists, both she and her dealing with the blight program, her list of properties, and we've been running our database of houses on the backlog list against hers to see, you know, other overlapped similarities and how we address them again.

COUNCILWOMAN BROWN: So there's some connect, if you will.

COMMISSIONER DOMZALSKI: Yes.

COUNCILWOMAN TASCO: Do you think we'll ever see a day when children will no longer be poisoned by lead, or is that a panacea, is that too idealistic?

COMMISSIONER DOMZALSKI: No. I think we will see a day, and when that day comes, it will be as a result of -- just as we make all of these things that are so important for us to do now very, very obvious that in cities like Philadelphia, the end of every commercial or something ought to be, "Have your child screened for lead paint," you know. You know that if you live in a house that was built before 1978, the odds are nearly 100 percent that you've got lead contamination in that house. Learn what you can do about that.

And even in the most seriously contaminated house, with proper education and awareness on the part of the caretaker, that child

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can be prevented from getting lead poisoning or prevented from getting worse.

But the absolute end of it is to get the lead out.

COUNCILWOMAN REYNOLDS BROWN: Okay. My only comment to that would be, so often, parents are concerned about getting food on the table and making sure they have a warm place and simply don't read the literature that comes through to them in the mail. So there's a need to sort of layer the message so that it hits them several different ways in order for the connect to happen and then for them to do the follow-through to make sure that their houses are tested for lead. And that's it on lead.

Let's turn to AIDS.

COMMISSIONER DOMZALSKI: Okay.

COUNCILWOMAN REYNOLDS BROWN: In your testimony on Page 4, you mentioned -- and I would add disappointingly -- that there's been an increase, a slight increase in AIDS. And, of course, it continues to disproportionately affect minority communities.

Could you or your designee please speak to prevention and what's happening with that, given that we are continuing to see an increase.

And additionally, I would say, on Page 4, in the paragraph preceding your discussion of AIDS, you mention partnerships with Safe and Sound, the School District, DHS, and the Family Planning Council. And for reasons that I would like for you to share with me, that's not evident in the AIDS attack.

So speak to what you're doing by way of prevention, period.

COMMISSIONER DOMZALSKI: Okay. And it is prevention, it is prevention.

There was, I think, an adjective in the testimony that probably I do disagree with, and that is that, you know, when we had an increase from 1,039 diagnosed AIDS cases to 1,137, that that was somehow slight. That Isn't slight, and that is a matter of very, very serious concern.

But what I also understand is that the difference between the diagnosis of AIDS -- of HIV and the diagnosis of AIDS, with most of the diseases that we deal with, once you come in contact with the organism, you have the disease. With AIDS, it's a much more protracted process.

AIDS or HIV is an infection, and AIDS is a diagnosis, and what happens to a person after the diagnosis of AIDS is made is critically important as to whether AIDS will develop, if at all, and over what course of time. And a lot of that has to do with how early we get people into care, how early we get people to, one get tested and counseled for HIV. And then once the disease has been identified, to get the person into services.

That's why these storefronts are so important. I was in one in Germantown, and I can tell you that it's street level, it's a welcoming environment, it's something that people feel comfortable with. And just as we talked about all the needs people have, often the needs people that come to us about are not so much their health necessarily, but their hunger, and they've got no food and they've got no connection with a house. And so this is the beginning of getting those wraparound services for people so that they can begin to look at their health.

And so I can really be comfortable when people tell me, Well, you know, when you look at it over the years, this is such a variation in the number of AIDS cases that it really depends on how successful we are with the drug cocktails and how good. There's something called "HAART," which is highly active anti-retro viral therapy, and if you want or need more about that, I sure will reach out to one of my doctors here to come up and educate us about it.

But there are some issues about that and how effective that is and how effective it's becoming.

And so all of these things impinge on whether or not and how fast someone progresses from a diagnosis -- from having -- being determined being HIV-infected to actually having AIDS.

COUNCILWOMAN REYNOLDS BROWN: Is there any benefit to having a relationship, if one does not already, with the School District?

COMMISSIONER DOMZALSKI: Well, yeah. B

COUNCILWOMAN REYNOLDS BROWN: At all?

COMMISSIONER DOMZALSKI: Yes, there is, Councilwoman. And, you know, we're in two of the schools right now.

COUNCILWOMAN REYNOLDS BROWN: Okay. Are these anonymous?

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COMMISSIONER DOMZALSKI: At University City High and at Edison.

COUNCILWOMAN REYNOLDS BROWN: Okay.

COMMISSIONER DOMZALSKI: And we're doing the prevention counseling and actually doing some chlamydia and gonorrhoea testing through the health resources center in those two schools, and we hope to expand that.

We also are in, in terms of youth, about ten recreation centers.

COUNCILWOMAN REYNOLDS BROWN: Is this the first year for the schools?

COMMISSIONER DOMZALSKI: Yes.

COUNCILWOMAN REYNOLDS BROWN: Is there any way to measure impact of prevention? I don't know. I mean, you spend the dollars for preventive measures, and at what juncture do we measure the success or the impact?

COMMISSIONER DOMZALSKI: The success of the impact is going to be measured in whether or not we're having any impact on the explosive increase in chlamydia.

COUNCILWOMAN REYNOLDS BROWN: Okay.

COMMISSIONER DOMZALSKI: A big problem of chlamydia are males, and males tend to be almost 100 percent asymptomatic, so they don't know they've got chlamydia, yet they're very important in the continued transmission of that disease.

So, one, we have to get everybody to accept the adolescents to get tested; and, two, to understand, you know, healthy behaviors.

COUNCIL PRESIDENT VERNA: Councilwoman, your time is up as soon as the Commissioner finishes his answer.

COUNCILWOMAN REYNOLDS BROWN: All right. Let me close, then, where I started, and that is to say that I join the Chair of Health and Human Services, Councilwoman Tasco, and PCCY, Councilman Nutter and others who look forward to an update on this lead strike force or strike team in the months to come.

Thank you.

COMMISSIONER DOMZALSKI: Thank you.

COUNCILWOMAN REYNOLDS BROWN: Thank you, Madam President.

COUNCIL PRESIDENT VERNA: Thank you,

The Chair recognizes Councilman Ortiz.

COUNCILMAN ORTIZ: Thank you, Madam

Chair.

Commissioner, how you going?

COMMISSIONER DOMZALSKI: Good morning, Councilman.

COUNCILMAN ORTIZ: Nice to see you.

COMMISSIONER DOMZALSKI: Thank you.

COUNCILMAN ORTIZ: You know, every time we get the Health Commissioner here every year, it sort of begins to seem like that Bill Murray movie about when he goes to go see that little runt that comes out of the cave.

COUNCILMAN NUTTER: "Groundhog Day."

COUNCILMAN ORTIZ: "Groundhog Day," right, because we keep talking --

COMMISSIONER DOMZALSKI: Punxsutawney Phil.

COUNCILMAN ORTIZ: We keep brining up the same problems because it seems like we've talking about lead poisoning since I got here.

And we have Shelly (referring to Shelly Yanoff, PCCY) every year coming in and saying, you know, When are we going to take care of this? because it is government's function, this is government's function. And continuously, the promises are made that it's going to be taken care of, but it never is.

And maybe one of the by-products of the blight program is that a lot of these houses will be knocked down that have lead paint in them and so on. And that way, we will reduce our rolls of houses in the City.

But, you know, I just hope that your commitment -- because I do know you have that -- to begin establishing a task force and getting the people, because it's getting the inspectors out there and then forcing these landlords to abate this sort of thing, but it is something that we just can't afford.

And, again, you know, we talked -- and I think Marion asked the last question that she asked before she left was about infant mortality. Again, I can remember the first time we had hearings on infant mortality here in 1986, and what is our infant mortality rate today vis-a-vis what it was ten years ago in areas such as North Philadelphia? because they differ from across the City, and in order to really grasp what the real situation in infant mortality really is, you have to take it in places. What is it in Mantua and what is it in Central North Philly, and what is the infant mortality in areas such as Kensington, which it has improved, I would imagine, because of the Momobile, the Latino Momobiles and other programs that have been instituted. But in '86, we didn't have any programs, and now we have Health Start and so on.

But what are the differences? You know, what are the measurable differences between ten years ago and today in these areas? Do we have numbers for that?

COMMISSIONER DOMZALSKI: We do have numbers. And you're right, Councilman, that infant mortality, as we talk about being a citywide average, and that's just an average and doesn't tell you much, but I can tell you, for example, that the highest infant mortality rate continues to be in Council District 3, with 14.5 against, you know, the City overall average of --

COUNCILMAN ORTIZ: But wasn't it around there ten years ago? It was around 14, something like that, 10 years ago and --

COMMISSIONER DOMZALSKI: And I think that's -- to me, that's the fallacy of looking at citywide averages.

COUNCILMAN ORTIZ: Right.

COMMISSIONER DOMZALSKI: And part of what I think we need to do, in addition to looking at a whole different strategy, is we need to begin to look at our health centers as what they are: They are the principal focus for public health in a health district. And we need to be focusing on that /

And when we go into a district, when I come to your office and talk to you, I don't need to talk to you about, you know, where we go from the City, you know, where your area of concern is. I need to be talking to you about things that you can only get from the Health Department such as infant mortality rate in your particular neighborhood your concerned with. What's immunization coverage, how many kids are lead-poisoned in that neighborhood, and so --

COUNCILMAN ORTIZ: Well, those are the statistics that I want because the only way we can look at this is historically, and we got to see if it is 14 today in West Philadelphia, it was 14 today -- it was 14 ten years ago, and that's intolerable. I mean, that means that either the health centers are not functioning appropriately, and we got to see how they're reaching out and what policy they have.

It means that we don't have Momobiles such as we may have, and I'd like to see what the number is in the Latino area in terms of Kensington and so on, and whether those numbers have appreciably changed during that same period of time.

Because we do have -- and I fought for programs here: The Latino Momobile, the Health Start. Why isn't it changing? Why is it 14? Why is still in these areas of poor people. Why is it still at that level? And what is it about the health centers that we're implementing that is not reaching out to all of these families that surround those health centers? And are they appropriately staffed, do we have enough individuals to really reach out?

Because if mortality is high, I would bet you that AIDS, HIV, chlamydia, the sexually-transmitted diseases also has not gone down in any of these areas.

So we got to begin forming a strategy --

and hopefully, because you're there, I have some confidence that we might be able to do this -- that can begin attacking these areas through the health centers, through building of the health centers and the staffing around them and putting...

So I'd like to find out, what is it that you need to put more resources out there, because we have a health crisis that is affecting poor people, especially black and brown, in a much greater measure than in any other parts of City, and we may need to put more resources in there.

And I'd like to find out, what is it that you need in order for us to be able to change in this budget?

COMMISSIONER DOMZALSKI: I think what we need most of all, Councilman, is --

COUNCILMAN ORTIZ: You know, we get a lot of public relations about a lot of stuff, but kids are still dying.

COMMISSIONER DOMZALSKI: They are, they are. And while overall rates have been improved, that isn't the case in every neighborhoods, and what we need to recognize, though, is the fact that, yes, we need those health centers functioning, and they are doing a good job, but we also need the other partners that are out there, you know, the other federally-qualified health centers that are in the neighborhood, the hospital outpatient departments.

I was in -- and it's awareness and knowledge. I was in an event the week before last where we were doing something with books for babies, and I turned to one of the practitioners who was there, and we finished giving this lovely three-day-old baby a set of books that her mother was going to read her.

And I said to the practitioner, How do we know the baby's not going to a home leaded environment? And he said to me, "Lead? I thought that problem was solved."

So we haven't done enough, we haven't done enough. We can do more.

And I think there's two reasons: Because of the sentiment that's on this Council and the sentiment that, you know, is happening in Social Services with a more integrated system and the emphasis placed on this by the Mayor. So I think there's tremendous reason for optimism.

COUNCILMAN ORTIZ: Well, yeah, but tell

me how we're going to do it.

COMMISSIONER DOMZALSKI: Well, I'll tell you how we'll do it.

COUNCILMAN ORTIZ: Okay.

COMMISSIONER DOMZALSKI: I think first of all what we need to do is to look at this person that was case-conferenced the other day and at the barriers that we put up in front of that mother so that her first prenatal care was 20 minutes before she delivered. Something's wrong with that, and it's not that she had, you know, nothing else to do but to do that --

COUNCILMAN ORTIZ: But, excuse me, but that's exactly the problem. You see, we've been talking about that here now every year at this time and through the hearings. Just last year, I held hearings on HIV and the increasing amount of HIV that is being reported in Philadelphia.

COMMISSIONER DOMZALSKI: Mm-hmm.

COUNCILMAN ORTIZ: And people are very surprised that we have once again an increase in HIV and specifically in the minority communities. We know that people in Kensington, many of them have never got a prenatal examination. We have a

Momobile that consistently -- every year, the Momobile has problems getting funded, consistently. And we have -- and they come in and we get some money from somewhere and we try to expand it, but we don't expand it because some other priorities take place.

We know that it's happening, Commissioner, and you know that. I mean, why should we be surprised at this? This is 2002 and we're still surprised, and the fifth largest city in the country, we're still surprised that somebody comes in and it's the first time that they ever had prenatal care. And then we don't know how to go about and how -- let's structure a plan and let's put the money where it should be.

And I constantly am talking about how much money we give to developers and other individuals and so on, but we're not spending the money where it has to be spent, and it's constantly surprising that we have and are always asking the same questions year after year. I just want to at one point come into this Council and not have to ask any questions about lead. That is all.

Thank you.

COUNCIL PRESIDENT VERNA: Thank you.

The Chair at this time recognizes Councilman Nutter.

COUNCILMAN NUTTER: Thank you, Madam Chair.

Madam Chair, this is actually my second turn, and Councilwoman Miller has not had the opportunity, so I'd like to yield to her and I'll come back.

COUNCIL PRESIDENT VERNA: Thank you.

The Chair recognizes Councilwoman Miller.

COUNCILWOMAN MILLER: Thank you, Madam President. Thank you, Councilman Nutter.

Good morning and congratulations.

COMMISSIONER DOMZALSKI: Good morning.

COUNCILWOMAN MILLER: I, too, would just like to echo the concern that my colleagues have expressed this morning about lead abatement, and the topic of lead and its abatement has been a topic and a issue at every budget hearing too that I've attended, so it sounds like putting together a task force is really a good direction to go and will finally help begin to deal with the issue of the problem of lead here in Philadelphia.

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I have a couple questions regarding substance-abuse treatment. And, you know, this is a quality-of-life issue in neighborhoods, particularly when you constantly see the same people on and off drugs. You see 'em, they're out, they look good, they look healthy, and then before you know it, they're right back on drugs again, particularly crack.

And there seems to always be a debate around long-term versus short-term care, and I was wondering if there's a recommendation that CODAAP or your office has regarding the length of stay for an effective drug-treatment program.

Private industry doesn't seem to want to pay for inpatient long-term care, and most people kind of think that they need long-term care, and someone told me that there's been a study that says the lengthy inpatient treatment programs aren't producing any better results than the short-term inpatient programs. And I was wondering if you had any information that would either support that or disprove it.

MR. COVONE: A couple comments on that, Councilwoman.

Part of the reason the City entered into the HealthChoices Initiative five years ago was the very issue of treatment of the drug and alcohol community, and Assistant Commissioner Bencivengo can speak to some of the studies that have done on this.

But what we've tried to develop over the course of the last five years is an array of support ranging from intensive outpatient services, which means individuals can go multiple days, a week to outpatient, to the residential rehabilitation services as well. And both of those are covered services under the HealthChoices Initiative.

There have been a couple studies done as a result of folks that have been involved in treatment who have left the criminal justice system. Those studies do indicate that the longer somebody is involved in service, the less chance of them coming back through the criminal justice system as a recidivist.

COUNCILWOMAN MILLER: Mm-hmm, okay. So you're saying, then, that long-term inpatient care is better than the short-term inpatient versus sometimes people just can't even seem to get inpatient and just basically go to the outpatient.

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MR. COVONE: Well, it's generally not inpatient from a hospital-based inpatient; it's residential rehabilitation services that are provided, and they can range anywhere from 30 to 45 days as the initial. And then as a follow-up to that, there are also intensive outpatient services and routine outpatient services, which may be less frequently as well.

COUNCILWOMAN MILLER: Okay. Because out in neighborhoods, I mean, people go in and they come out and they go in and they come out and they're back on it, particularly crack, and it just seems to be a real nuisance, it's really a public nuisance in many, many parts of my district and, I know, in other parts of Philadelphia.

And I know it's hard for you or anybody to put their finger on the cure, but in reading your testimony, you did mention that you're going to do performance-based contracting and set up benchmarks for select performance standards. So what would that be?

MR. COVONE: One of things we're looking at with the performance-based contracting is just the issue that you're raising, the number of times an individual may revolve through a service, and then looking at what are the characteristics of why someone is not successful or coming back multiple times for the same service.

So what we're doing in the course of the first is year is attempting to develop some baseline information across providers and across the Behavioral Health System, which will give us information on where we're at today and be able to benchmark that going forward, both at a provider-agency level but also at an individual consumer level.

COUNCILWOMAN MILLER: Okay, well, I'd be interested in knowing the data.

MR. COVONE: And we'll be happy to keep you updated as we move forward on that initiative.

COUNCILWOMAN MILLER: Okay, great, 'cause it seems like you're spending a lot of money, and it's almost like a revolving door, in and out.

The other area I would like to ask you questions is regarding your rodent control. I think in your testimony, you talk about a new, innovative approach that you were funded for last year, and tie it into NTI.

I know that I've called Vector Control, and I think that you really don't do anything until after a demo or after a lot is cleaned.

Can you explain just the steps to actually doing the rodent control? 'cause I would imagine that with the increased NTI demolitions and lot cleanups, that that is an issue. I know for anywhere that we've had a large demolition, most people -- residents in the neighborhoods are concerned because everybody just believes -- and even if you don't see it, they just believe that the buildings are full of rodents and other types of pests.

COMMISSIONER DOMZALSKI: Yes, Councilwoman, that's a very real issue, one that as we went around on June 16th, when we began the lot cleanup, we were able to see firsthand of people not only saying "I think," but we were able to say, "Yes, you're right," because those houses -- one in particular was definitely infested with rats.

We're going to be coordinating very closely with that process. We are now, with the lot cleanup and will continue with the demolition, so that we can do the right kind of baiting in that neighborhood to keep the rodent population down and also from spreading.

COUNCILWOMAN MILLER: Mm-hmm, okay. So you're going to do certain a geographic area surrounding the lot or the building that's going to be demoed.

COMMISSIONER DOMZALSKI: Yes, particularly sewer inlets. And when we do a survey, you can see rat burroughs are pretty evident sometimes, and we do abating for those as well.

COUNCILWOMAN MILLER: Well, how large is your team? 'cause you're going to be doing this now almost citywide, in all the areas where NTI activities are going on.

COMMISSIONER DOMZALSKI: Well, I mean, with the grant that we have, that's not going to increase our staff a tremendous amount. We've got roughly right now about 28 people that are associated with Vector Control.

We do, you know, do some complaint response. We also try to get out there and do some proactive education in the neighborhoods to be able to begin, once again, charting environmentally improved blocks, where look at refuse, storage, and collection, where we look at whether or not the houses that are remaining are rodent-proof, and do people understand, you know, what the issues are and what can be done about rodent-proofing, and just an overall environmental sanitation program for the neighborhood, which can go a very long way in improving the situation with rats.

COUNCILWOMAN MILLER: Okay, all right. Thank you.

Thank you, Madam President. That's all I have.

COUNCIL PRESIDENT VERNA: You're welcome.

The Chair recognizes Councilman Nutter

COUNCILMAN NUTTER: Thank you, Madam Chair.

Good morning again, Commissioner. Commissioner, I want to go back to one of the topics that is --

COUNCILWOMAN BLACKWELL: Excuse me, Madam President.

Councilman Nutter, would you yield for a moment?

COUNCILMAN NUTTER: Absolutely.

COUNCILWOMAN BLACKWELL: Thank you.

Madam President, I absolutely -- as you know, I've already spoken for the Health Commissioner and for Naomi Post-Street and for our DHS commissioner and OESS, but I have to step out. I don't know how far you'll get and maybe by the time I come back, you'll still be with Commissioner Domzalski.

However, I certainly wanted to express my support for them. We've certainly reviewed their budgets and, as you know, we do a lot with OESS, and we certainly support their budget request, and I wanted that to get on the record just in case for some reason you breeze through before I step out, but I have to step out for an hour for a funeral, as you know, and certainly wanted to lend my support to those departments in my actions.

COUNCIL PRESIDENT VERNA: Thank you, Councilwoman

COUNCILWOMAN BLACKWELL: Thank you, Councilwoman.

Thank you, Councilman Nutter.

COUNCILMAN NUTTER: Sure, no problem, Councilwoman. I will do my best to hold Commissioner Domzalski until you return

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(Laughter.)

COUNCILMAN NUTTER: All right, I might have to go to the warehouse and pull out a few additional questions, but I keep a good number of them right here in the drawer.

COMMISSIONER DOMZALSKI: We've seen.

COUNCILMAN NUTTER: Commissioner, let me go back to a few items that I started with, and there's been continued discussion about these two issues, assuming by now that I know that you know that these are very important issues and also that they're very important to Councilmembers. Let me go through a couple of the factual pieces, and then I'd like to talk about some money.

Your testimony is that, on Page 2, in FY '95, there were approximately 3,000 newly-identified children in Philadelphia with confirmed elevated blood lead levels, and that in FY '03, you expect to have slightly fewer than 800, which, obviously, is an improvement but, by your own testimony, it's not at a place where you would like it to be.

The 3,000 identified cases in FY '95, how many homes did that represent?

COMMISSIONER DOMZALSKI: I don't know. I can find that for you. I can tell you, thought, that for 1400 homes, it represents 2100 children.

COUNCILMAN NUTTER: 1400 homes, 2100 children.

COMMISSIONER DOMZALSKI: Yes, sir.

COUNCILMAN NUTTER: Okay, that's the ratio you feel is --

COMMISSIONER DOMZALSKI: That's what the current situation is.

COUNCILMAN NUTTER: Okay. And we've talked about the fact that based on utilization or non-utilization of pediatric services or other health-related services, there is some unknown population of children who may have lead poisoning but we're not unable to track them at the moment because they're not necessarily being seen by anyone; is that correct?

COMMISSIONER DOMZALSKI: I think that may have been somewhat of a misstatement on our part, Councilman. They may be, in fact, bein screened and seen, receiving pediatric attention, but we just may not know about the result of that screening process that may or may not have gone on.

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COUNCILMAN NUTTER: Well, I understand that, but it is quite possible that there are just some children who are not being seen; is that right?

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN NUTTER: Okay. Now, let's talk about your current budget, and I know that the Health Department is a vast and fairly complex place, but I found on Page 37-69, Childhood Lead Poisoning Prevention Program, is that the program that we utilize --

COMMISSIONER DOMZALSKI: Yes, sir.

COUNCILMAN NUTTER: -- to both screen for and is this also where we do the abatement services?

COMMISSIONER DOMZALSKI: Yes. Yes, sir.

COUNCILMAN NUTTER: So the budget is $728,971?

COMMISSIONER DOMZALSKI: Actually, Councilman, the -- and I apologize. I have to give you a gross figure, which is about $3.5 million, which includes grant funds as well, some CDC funds and also some Title V funds that are for childhood lead poisoning prevention.

COUNCILMAN NUTTER: Okay, could you -- and you don't have to do it at the moment, but as I said, I found that particular page. Can you tell me where the other $2.8 million might be?

COMMISSIONER DOMZALSKI: (Addressing colleagues.) I can't see it here, but is it in the Grants Fund? Can someone point us to a page?

(Commissioner Domzalski confers off the record with colleagues.)

COMMISSIONER DOMZALSKI: Thank you.

Yes. We have in the lead --

COUNCILMAN NUTTER: I'm sorry, Commissioner, can you tell me tell me what you're reading from.

COMMISSIONER DOMZALSKI: Yeah. I'm reading from just a breakout that I was given to sort of help me focus on what we have in terms of existing resources --

COUNCILMAN NUTTER: Right.

COMMISSIONER DOMZALSKI: -- that are related to the part of lead poisoning that we're talking about.

We have a Lead Prevention Grant from CDC; that's 700,000.

We have a grant from HUD of $771,000.

And under the Childhood Lead Poisoning Title V provision, we have $728,000.

And those three total just under $2,400,000.

And in the General Fund, we have $1,264,000, and that --

COUNCILMAN NUTTER: All right, hold on for a second, Commissioner.

The CDC was 700,000, HUD was 771, and Title V was 728.

COMMISSIONER DOMZALSKI: Yes, sir.

COUNCILMAN NUTTER: Right? Okay. That gives me, it looks like, $2.199?

COMMISSIONER DOMZALSKI: I rounded it to -- my papers says 2.3, 2.3.

COUNCILMAN NUTTER: All right, we won't argue about it.

And the 1.244, where is that from?

COMMISSIONER DOMZALSKI: That's from the General Fund, sir.

COUNCILMAN NUTTER: From the General Fund, okay.

Now, how many -- and what was the number, 800 children this year that you expect?

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COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN NUTTER: And that represents how many households, how many new households?

COMMISSIONER DOMZALSKI: Let me see if I can get something that won't be a guess.

(Addressing colleagues.) How close are we on that?

(Commissioner Domzalski confers off the record with colleagues.)

COMMISSIONER DOMZALSKI: My expert tells me there will be about approximately 600 households.

COUNCILMAN NUTTER: That's 800 kids, 600 households.

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN NUTTER: So is it fair to say that, notwithstanding the efforts of the Department, about every year, there are 600 new households?

COMMISSIONER DOMZALSKI: Actually, yes, yes. That is the rate of intake of new work, approximately 50 a month.

COUNCILMAN NUTTER: Okay. Your earlier testimony was that there was a backlog of 1400 homes; is that correct?

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COMMISSIONER DOMZALSKI: That's correct.

COUNCILMAN NUTTER: Now, how much does it cost to treat a house? And I need to ask you what does "treat" mean?

COMMISSIONER DOMZALSKI: All right.

COUNCILMAN NUTTER: How do you make a house safe?

COMMISSIONER DOMZALSKI: There are probably 3 categories of three houses in that 1400, and 10 percent of them would be amenable to what is called "a super-clean": Two guys, two days, and the house is super-clean.

COUNCILMAN NUTTER: What does that mean, what's a super-clean?

COMMISSIONER DOMZALSKI: That means that they go in and they use a washing technique, and it's no surface -- it's no treatment of the surface; it's cleaning, cleaning of the household of dust both by washing as well as by using what are called "high-efficiency vacuums to suck up the dirt and dust, and about 10 percent of the houses would be amenable to that.

COUNCILMAN NUTTER: Does a person have to relocate for the two days while this is going on?

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COMMISSIONER DOMZALSKI: It's better to have people out, yes, to let people clean around, but it's not --

COUNCILMAN NUTTER: They can leave all of their stuff in place?

COMMISSIONER DOMZALSKI: Yes, yes.

COUNCILMAN NUTTER: Okay, tell me about the rest.

COMMISSIONER DOMZALSKI: There are --

COUNCILMAN NUTTER: I'm sorry, Commissioner. How much does that cost?

COMMISSIONER DOMZALSKI: That costs about $1,000, about $500 a day.

COUNCILMAN NUTTER: So $1,000 treatment for the 2 days.

COMMISSIONER DOMZALSKI: Mm-hmm.

COUNCILMAN NUTTER: Okay, all right. What's the rest?

COMMISSIONER DOMZALSKI: There are 60 percent that require actual surface stabilization. That means that the paint that may be peeling needs to be removed and that a suitable surface coating is applied over that condition. There may also be in that process, depending on how bad the deteriorationis, a need to replace a floor surface or two.

COUNCILMAN NUTTER: A what?

COMMISSIONER DOMZALSKI: A floor so that they can be cleaned.

COUNCILMAN NUTTER: Okay.

COMMISSIONER DOMZALSKI: And the cost for that -- and, you know, no matter -- I'm much better with the gross figures, but the cost for this may be in the neighborhood of between 3 and $5,000 a premises.

COUNCILMAN NUTTER: All right. And what about the other 30 percent?

COMMISSIONER DOMZALSKI: The other 30 percent probably need all of the above, but there's a huge question mark about them in the sense that they may need some larger-systems repair such as a roof, such as plumbing, those kind of things, before they can be adequately treated.

And this is the reason why need this -- in this new strategy, we need --

COUNCILMAN NUTTER: So we could call that maybe "major abatement."

COMMISSIONER DOMZALSKI: Yes, yes. Major

systems stabilization.

COUNCILMAN NUTTER: And what do you think off the top of your head, $10,000?

COMMISSIONER DOMZALSKI: Perhaps. I know Mr. Greene at the Housing Authority, when he talks about a rehab of a house, a basic system repair, talks in the neighborhood of $12,000.

What we need to do, since we're not housing people, we need to get all of these 1400 houses triaged and assessed with housing experts to look at just how much and to what extent they are suitable for any kind of an abatement.

COUNCILMAN NUTTER: All right. Let's talk about at least the 70 percent -- we've got 10 percent at $1,000 for a 2-day treatment. The 60 percent, the surface stabilization, how long do you think that treatment takes?

COMMISSIONER DOMZALSKI: That can be a couple of weeks.

COUNCILMAN NUTTER: A couple weeks. And that, you're saying, is estimated at 3 to $5,000 in cost?

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN NUTTER: Okay. Now, for this

upcoming year: 800 kids, 600 households. How many of them will the City attempt to treat? And who actually does the treatment?

COMMISSIONER DOMZALSKI: We do in general. There are families who become aware of the condition and have the wherewithal, the resources to do it on their own, and they will.

There are some of who will be living in landlord-controlled premises, and the landlord will have the responsibility for doing that.

Outside of that, it would fall on our City abatement crews to do this work.

COUNCILMAN NUTTER: How many people do this work?

COMMISSIONER DOMZALSKI: We presently have two abatement teams and one super-clean team.

COUNCILMAN NUTTER: And when you say "two abatement teams," is that two teams of two people?

COMMISSIONER DOMZALSKI: Two to three and a crew chief.

COUNCILMAN NUTTER: You have two abatement teams and one super-clean?

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN NUTTER: And how many people

are in that?

COMMISSIONER DOMZALSKI: That's usually two people we would deploy on the super-clean.

COUNCILMAN NUTTER: So are we talking about two abatement teams of two to three people, so that's four to six, plus a crew chief. And a super-clean team has --

COMMISSIONER DOMZALSKI: Two people.

COUNCILMAN NUTTER: Two?

COMMISSIONER DOMZALSKI: Two.

COUNCILMAN NUTTER: So you have somewhere in the neighborhood of 7 to 9 people?

COMMISSIONER DOMZALSKI: Right.

COUNCILMAN NUTTER: And how many houses will they abate?

COMMISSIONER DOMZALSKI: We have a capacity when we really get it ramped up --

COUNCILMAN NUTTER: What does that mean?

COMMISSIONER DOMZALSKI: -- to do 100 a year with the abatement teams.

COUNCILMAN NUTTER: When you say "really ramped up," what does that mean?

COMMISSIONER DOMZALSKI: We are not at that level at this point. We'll produce about 70 this fiscal year, and beginning the next fiscal year, because we'll have more of a year to work with -- we just did get one of those teams -- we'll have a capacity to do 100.

COUNCILMAN NUTTER: All right. So let's say, even at our best, which is 7 to 9 people, 100 houses.

COMMISSIONER DOMZALSKI: Right.

COUNCILMAN NUTTER: And there's 600 households identified with 1400 properties on a backlog list. Last year's backlog was 1100, which has now gone to 1400, which is soon to be 1900.

COMMISSIONER DOMZALSKI: Right. Last year we had a backlog of 1100 to a backlog this year of 1400.

COUNCILMAN NUTTER: Well, I mean, again, I commend the best efforts but, I mean, obviously the numbers are going in the wrong direction. Generally when you have a backlog, you're trying to work it down and decrease the numbers.

Let's go back to where Councilwoman Tasco was, and then I'm going to get into some of the numbers here.

The buyer/seller transaction, the

mortgage/no mortgage, people come to an agreement. Now, the earlier testimony was that the seller has to disclose if the seller knows that there's lead.

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN NUTTER: If you've lived in a house for some time some time and possibly had it painted within the last five, ten years, I will, one, assume that you did not use lead-based paint. I think it's not sold anymore; is that right?

COMMISSIONER DOMZALSKI: That's correct.

COUNCILMAN NUTTER: Okay. So if a person has painted their house a couple times and now it's time for the sale, do they have lead in the house or not, and how would they know it?

COMMISSIONER DOMZALSKI: Yes they do. How old is the house?

COUNCILMAN NUTTER: 50, 60 years, average house in Philadelphia.

COMMISSIONER DOMZALSKI: They'd probably have lead in that house.

COUNCILMAN NUTTER: Okay. Do they know it?

COMMISSIONER DOMZALSKI: They may not.

COUNCILMAN NUTTER: So they put "no"?

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COMMISSIONER DOMZALSKI: They put, "No, not to my knowledge."

COUNCILMAN NUTTER: Okay. But even if they did know it, their requirement is to --

COMMISSIONER DOMZALSKI: Disclose

COUNCILMAN NUTTER: -- disclose. What's the requirement to treat or abate either by the seller or the buyer?

COMMISSIONER DOMZALSKI: Unless there is a -- well, if you're talking about the real estate transaction and all of the ins and outs of it, I would suggest get that we get a real-estate attorney up here to talk about the real-estate transaction.

But what we're talking about here is the buyer-seller transaction where that there's a requirement that if you know, to disclose.

COUNCILMAN NUTTER: Right.

COMMISSIONER DOMZALSKI: And so by having disclosed, I, as the buyer, now know that there's a condition in there that could work to the detriment of children. And so I need to either -- I need to address that in some fashion.

And we do not get involved unless there's a child exposed.

COUNCILMAN NUTTER: Well, I understand, but let's go back to the example provided by the Council President. Specially in a mortgage situation, I mean, the mortgage company won't give you a mortgage unless you give them a certificate that you've had a termite inspection, and I think you have to have a radon inspection.

The question is: What is it that we can do as a City government in that transaction that you have to have a lead test done and you can't make the transaction unless someone, either on the seller's side or the buyer's side, abates and gives the certification that there's treatment?

COMMISSIONER DOMZALSKI: Probably we would need another piece of legislation where the responsibility is to disclose, not to abate.

COUNCILMAN NUTTER: I understand that, but that doesn't help -- it's not directed at you, but that doesn't help the subsequent child

COMMISSIONER DOMZALSKI: Right.

COUNCILMAN NUTTER: Whether they were alive at the time or subsequent. I mean, they -- you know, they just kind of, like, popped out, if you will. I mean, they're here.

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COMMISSIONER DOMZALSKI: We need more -- a different ordinance on it. I don't think I'd argue that.

COUNCILMAN NUTTER: All right. What would it take to significantly address -- I mean, it's hard to even talk about trying to deal with the 1400-property backlog when we know just from this morning that we're going to contribute to the backlog, so let's first talk about the 600 households.

How do we get it from you guys treating 100 households to at least the 600 and not consciously contribute to the increase in the backlog, and then, is there a backlog strategy? What would it take to address the 600 households in the upcoming fiscal year?

COMMISSIONER DOMZALSKI: It would take about seven teams. I think -- you know, I'd like go -- could I leap ahead just to maybe put a couple things together?

COUNCILMAN NUTTER: Sure.

COMMISSIONER DOMZALSKI: Okay. We have a backlog of 1400 houses.

COUNCILMAN NUTTER: Right.

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COMMISSIONER DOMZALSKI: All right. The only thing that's happened to that backlog in the past year is that it's gone from 11 to 14.

COUNCILMAN NUTTER: Right, and going to 19.

COMMISSIONER DOMZALSKI: The new work coming in is at the rate of about 50 a month. My view is that we cannot get engaged in managing the backlog.

COUNCILMAN NUTTER: Right.

COMMISSIONER DOMZALSKI: It's a trap that managers -- because of, I guess, the way we look at things, we fall into it. We cannot do this.

We've got to take that backlog and set it over here and deal with it separately. Now, we've got to take the new work and look at that in and of itself and deal with that. That will take seven teams to deal with that.

COUNCILMAN NUTTER: Seven teams.

COMMISSIONER DOMZALSKI: Seven abatement teams that we would use as a mixture of teams, all right? Some we would do super-clean and some we would do abatement.

COUNCILMAN NUTTER: Seven additional

teams beyond the ones that we've talked about?

COMMISSIONER DOMZALSKI: Seven just to keep up --

COUNCILMAN NUTTER: Because the ones that we talked about are dealing with the first 100.

COMMISSIONER DOMZALSKI: A total of seven.

COUNCILMAN NUTTER: Seven new teams?

COMMISSIONER DOMZALSKI: Yes. A total of seven. We already have two.

COUNCILMAN NUTTER: So you need five.

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN NUTTER: So you need five new teams. Now, what would it cost to have 5 new teams just to deal with the 600 properties?

COMMISSIONER DOMZALSKI: Probably we're talking in the neighborhood of a million and a half dollars -- with supplies, with personnel.

COUNCILMAN NUTTER: Let me ask this question: What --

COUNCILMAN ORTIZ: That does not seem like a lot of money.

COUNCILMAN NUTTER: I understand. Just...

What does it cost either the health system or the social-service system over a one-year period of time, a three-year period of time, a five-year period of time, possibly a lifetime to do nothing?

COMMISSIONER DOMZALSKI: About -- if you do the arithmetic on it, one figure I've seen is about $135,000 per child for doing nothing. If you multiply that out just with the 2100 children that we're dealing with, we're talking about somewhere in the neighborhood of $290 million.

COUNCILMAN NUTTER: So if all that math is correct, you're saying that we could make a million-and-a-half-dollar investment today and save $295 million at a later point in time?

COMMISSIONER DOMZALSKI: No. The investment would be much more, and that much more would include dealing with the backlog.

COUNCILMAN NUTTER: I'm sorry, you're right, you're correct.

COMMISSIONER DOMZALSKI: Would include dealing with the backlog. And that is a significant increase in resources.

COUNCILMAN NUTTER: I understand.

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COMMISSIONER DOMZALSKI: And it's for precisely this reason that what we're doing is pulling together people who have never worked on this problem before, and that is the housing agencies, the public-health people, the health maintenance organizations, all right, in terms of looking at what other states have done in relation to getting Medicaid waivers, because it's the houses that are making these kids sick, and so we've got these players that we need to bring to the table to deal with this.

And I include on that list not only the agencies that I've mentioned, but also HUD -- and I'm on their calendar for later this month -- but also the EPA and also the CDC.

COUNCILMAN NUTTER: Well, I understand that and, you know, I love a collaboration as much as the next person but, I mean, I'm more than prepared to sit here -- and I actually don't want to hold you here for Councilwoman Blackwell, I was certainly being somewhat facetious.

But I don't want to leave here today with a discussion about a collaboration, 'cause I would feel that I have not done what I was supposed to do.

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So what I need is -- Madam President, can we have the Budget Director and the Managing Director and any other financial person that is here to answer any questions? Can we have them at the table?

COUNCIL PRESIDENT VERNA: Certainly.

COUNCILMAN NUTTER: Thank you.

COUNCIL PRESIDENT VERNA: Is Mr. Dubow here? The Managing Director is here.

COUNCILMAN NUTTER: When I started talking about money, Mr. Dubow probably found the need to be absent from the chambers.

(Laughter.)

COUNCIL PRESIDENT VERNA: Maybe he's out in the corridor, we're checking.

COUNCILMAN NUTTER: Good morning, Madam Managing Director.

(Ms. Richmond comes forward.)

COUNCILMAN NUTTER: Good morning, Madam Managing Director.

MANAGING DIRECTOR RICHMAN: Good morning, Councilman. I am Estelle Richman, Managing Director.

COUNCILMAN NUTTER: I lost track of you

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in the room a while ago. Have you had much of an opportunity to hear some of the exchange?

MANAGING DIRECTOR RICHMAN: Unfortunately, I've heard pieces on and off, and I do know you're talking about lead poisoning and children, how's that?

COUNCILMAN NUTTER: Okay, that's a good start.

Commissioner Domzalski has taken us through some treatment processes based on a type of problem in three identified types of properties.

His testimony is that this upcoming year, we anticipate 800 kids possibly suffering from lead poisoning, which represents 600 households, with 1400 properties on a backlog list. His present staffing will only allow for the treatment of 100 of the 600 properties in the fiscal year, and so last year's backlog was 1100, which has now gone to 1400, which is soon to be 1900. So obviously, we are, in fact, contributing to the backlog problem.

What I asked him was to narrowly focus on the currently known information, separate from the backlog problem, to try to figure out a way to at least not contribute to the backlog and that we're

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dealing with what we believe is, in essence, 50 new cases a month, 600 a year.

When we went through the costs, Mr. Domzalski estimates that he needs -- not because he jumped up to the table and offered all of this information, but in response to questions, answered the question that was asked. The estimated cost is million and a half dollars for five teams to just deal with current cases. Dealing with the backlog is a separate issue.

He talked about collaboration, he talked about meeting with the EPA, L&I, and a variety of other agencies, which is all well and good.

What I need to know today is, can we, in the FY '03 budget, figure out a way to at least not contribute on the backlog, address the 600 known properties, and not have the government consciously adding to a horrendous problem but for lack of either money or direction of resources?

MANAGING DIRECTOR RICHMAN: Councilman, I certainly know the dangers of lead and the cost and the backlog from previously looking at this budget.

COUNCILMAN NUTTER: I know.

MANAGING DIRECTOR RICHMAN: The Budget

Director and I will get together with all of the relevant players and get back to you with a plan on how we plan to address the issues you just put forth, which are how do we plan to make sure that we don't contribute to the backlog? how do we begin to begin to address the backlog? and how do we address the budget issues related to both of those?

And we will have that before you vote on the Council budget testimony for this year.

COUNCIL PRESIDENT VERNA: And Mrs. Rich, I would like Mr. McPherson to also be present at your meeting so that he could fully apprise us.

MANAGING DIRECTOR RICHMAN: Okay.

COUNCILMAN NUTTER: Thank you, Madam Managing Director. Let me make sure that I completely understand what you said.

The expectation here is that before concluding the budget process, you're going to come back to us with a plan on how to deal with the 600 properties, which may, and more than likely will, have to include some additional funding or rearranging of funding sources to deal with this particular issue, at least for the 600 homes, and we'll have an additional discussion about the backlog?

MANAGING DIRECTOR RICHMAN: Yes. At least dealing with the 600 homes that would add to the backlog each year, we'll come back with either rearranging dollars or with how we will address the issues you've put forth before you complete the budget process this year.

COUNCILMAN NUTTER: Okay. And the expectation is that if that game plan ends up being acceptable, that we would either need to make some amendment to the budget, but the goal here is to identify a way to treat the 600 houses that we know of; is that correct?

MANAGING DIRECTOR RICHMAN: That is certainly the goal here.

COUNCILMAN NUTTER: Okay, all right, thank you.

COUNCIL PRESIDENT VERNA: Do you have any more questions of Mr. Dubow and the Managing Director?

COUNCILMAN NUTTER: Not at the moment. I do have more for Commissioner Domzalski, although they are budget-related questions.

COUNCIL PRESIDENT VERNA: Thank you.

And, Councilman, your time has been up.

COUNCILMAN NUTTER: I figured that. Thank you.

COUNCIL PRESIDENT VERNA: A long time ago.

The Chair recognizes Councilman Ortiz.

COUNCILMAN ORTIZ: Thank you, Madam Chair.

Since we're doing the same sort of thing that I asked before, from the lead, can we start looking in terms of how we can begin tackling the infant mortality issue along the same way and the same lines.

Commissioner, in one related question, because we do have an industry that's highly dependant and an economy that's highly dependent on restaurants and how they're serviced and so on, how many sanitation inspectors do you have in terms of restaurants and how long before an inspector goes to each restaurant? What is the timeline between inspections in restaurants today?

COMMISSIONER DOMZALSKI: We have 20 sanitarians that are associated with our retail food sanitation program; and as far as the interval is concerned, that interval now is every 17 months that we get around on a regular basis to those facilities.

COUNCILMAN ORTIZ: For cities such as Philadelphia, is there a measurable comparison that we can do between, say, Boston, Washington D.C.? What is the timeline between inspection in these areas? because if you remember a few years back, we had some problems and some rumors that began about Chinatown and almost forced the Chinese restaurant in Chinatown to almost close just because of a rumor, and all that it would take to harm an industry such as this is for something to happen. I mean, 17 months seems to be a long time between inspections.

COMMISSIONER DOMZALSKI: That's an improvement.

COUNCILMAN ORTIZ: Well, I know that it's an improvement, but still --

COMMISSIONER DOMZALSKI: When we first looked at this several years ago, that interval was 37 months. And we do think that within -- a couple things have happened 'cause all we're really talking about here is the outcome, what is the outcome of either not inspecting as frequently as other jurisdictions do or going too long, and that outcome is on, you know, the impact of food-borne illnesses in the community.

We have devoted a lot of effort through our environmental health services to doing -- it was only about three years ago where people didn't have to have any training at all to handle some of the most hazardous foods that that might be, and now all of that has changed as a result of action by the council now.

COUNCILMAN ORTIZ: Right.

COMMISSIONER DOMZALSKI: But now the food-manager certification law has gone a long way toward improving the sanitation practices in the facilities.

COUNCILMAN ORTIZ: Isn't the national standard six months?

COMMISSIONER DOMZALSKI: Well, it's all over the place; some say a national standard is every four months or every three months.

The FDA, I think, to the extent that they're doing inspections, might look at six months. We look at what's appropriate for the community.

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Certainly, we'd like to do it more frequently, but we do think with our inspections and with the improvements we have made in the process that we do have a safe retail food industry in Philadelphia, thanks largely to not only our efforts but the committed efforts from the retail and food establishment associations, including the group we just worked most specifically with, which is the Dominican Grocers Association.

COUNCILMAN ORTIZ: Right. Going back to the health centers, and you made, rightly so, an emphasis that the health centers should be the main instrument, institution that citizens look to in terms of the provision of health services.

A few years back, Councilman Cohen and myself sponsored a legislation about the staffing of those health centers. And how is the staffing? can you give us detail in terms of the services that are being provided? does each health center have a director? who are those individuals that are directing the health centers today? If you can let us know and send us a list of that.

And could you give us a staffing of each and every individual health center and what is the budget that you have now for each health center and what are the differences?

COMMISSIONER DOMZALSKI: Sure, I'd be happy to break that down, and should I send that to you?

COUNCILMAN ORTIZ: Send it to the Chair.

COMMISSIONER DOMZALSKI: Certainly.

COUNCILMAN ORTIZ: Okay? I'd like to look at how we're budgeting and the caseload that is coming in. As you stated, HIV is on the increase, chlamydia, all of these.

What is -- I'd like to see a breakdown in terms of -- by district of the sexually-transmitted diseases, how we're treating them. Also a breakdown in terms of how many people make assess of the health centers and how we are budgeting it.

COMMISSIONER DOMZALSKI: Okay, will do.

COUNCILMAN ORTIZ: And do you have vacancies in them right now that are not being filled? Do you?

COMMISSIONER DOMZALSKI: No. We have -- to answer your whole question, we do have some vacancies. For example, we had six nursing R.N. vacancies; four of those positions are filled already and we're interviewing for the last two

COUNCILMAN ORTIZ: Where were these vacancies at, in what areas of the City?

COMMISSIONER DOMZALSKI: They're in various districts; I can give you that breakdown.

COUNCILMAN ORTIZ: Do we have relationships between the community health centers and hospitals?

COMMISSIONER DOMZALSKI: Yes, absolutely.

COUNCILMAN ORTIZ: Could you detail part of that relationship, please.

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN ORTIZ: And tell us which hospitals are those?

COMMISSIONER DOMZALSKI: Yes. The relationship backs up our family medical -- our primary-care program as well as our prenatal program. And relationships that we have for prenatal run the gamut from HUP in West Philadelphia to -- well, let me just give you for primary-care services, Councilman.

Health Center 2, the backup hospital is Methodist Hospital; for Health Center 3, it's Misericordia; and the same applies for Health Center

4; for Health Center 5, it's Temple; and for Health Center 6, it's St. Joseph's; for Health Center 9, it's Medical College of Pennsylvania; for Health Center 10, it's Temple; and the Strawberry Mansion Center is Medical College of Pennsylvania.

COUNCILMAN ORTIZ: Do we have individual contracts or is it a part of a package that we do with them or --

COMMISSIONER DOMZALSKI: They're Individual contracts, and we'll be working to, I think in some cases, to a unitary contract where the terms and conditions are the same.

COUNCILMAN ORTIZ: I'd like to see some details as to those contracts, how much is it and how much we spend.

COMMISSIONER DOMZALSKI: Sure

COUNCILMAN ORTIZ: What are the services that each contract is supposed to be providing?

COMMISSIONER DOMZALSKI: Well, I could give you in general: For the health centers, it's for referral services. So if it's a situation where a patient needs to be seen by a neurologist or an orthopedic specialist or dermatologist, we would make that referral to that backup hospital for that service.

And for the prenatal program, it's for obstetrical care for labor and delivery service at the hospital.

COUNCILMAN ORTIZ: Well, do you have numbers for how many families, women are accessing the prenatal program?

COMMISSIONER DOMZALSKI: Absolutely.

COUNCILMAN ORTIZ: Do you have objectives that you place in terms of that, you know, per area?

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN ORTIZ: Do we have numbers that we try to meet, and are you meeting them? Do you have that in writing?

COMMISSIONER DOMZALSKI: Absolutely, and we can send that to you.

COUNCILMAN ORTIZ: And you can send that?

COMMISSIONER DOMZALSKI: Yes, sir.

COUNCILMAN ORTIZ: Thank you, Madam Chair.

COUNCIL PRESIDENT VERNA: You're welcome

The Chair recognizes Councilwoman Brown.

COUNCILWOMAN REYNOLDS BROWN: Thank you, Madam President.

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Following up on Councilman Nutter's analysis of the answer to the question of why the backlog? is training an issue, training of professionals that are responsible for the actual abatement of homes? You mentioned also that you're not up to speed.

COMMISSIONER DOMZALSKI: Well, you know, part of that had to do, Councilwoman, with when the second team came on during the fiscal year. So we have them on and we're up to speed; they are trained and they're working at full pace at this point.

Training is an issue -- this is hazardous work and we don't want to, as a result of protecting the -- getting the lead out in the environment to expose the people who are doing the work. So there is training, and in fact, everyone in Pennsylvania who does this work must now be certified by the Commonwealth of Pennsylvania that they've had a training course that prepares them to do the work.

COUNCILWOMAN REYNOLDS BROWN: And to what extent or how is DHS involved with the temporary, some might say, "displacement" or relocation of the family during the abatement process?

COMMISSIONER DOMZALSKI: Well, we need to sharpen that up a little bit. Right now -- and unless what we're looking at are -- with OESS to have some temporary housing facilities for a week or two where we could move people while we're doing the work, then --

COUNCILWOMAN REYNOLDS BROWN: How has that been handled in the past?

COMMISSIONER DOMZALSKI: With great difficulty; we have been trying to work around the family. At one point, we did have what were called "safe houses," but we don't have those now for a variety of reasons; a lot of it has to do with the intensity of the management that goes along with those facilities.

So to be able to have a resource -- and in fact, that was a part of the conversation in terms of the collaboration that we were talking about with Carl Greene, that we would be able to make some places available for people on a temporary basis.

COUNCILWOMAN REYNOLDS BROWN: How comfortable are you or how confident are you that the coordination of DHS is done in such a way where families are not penalized for it while that activity is going on?

COMMISSIONER DOMZALSKI: I will tell you, working with Commissioner Martinez in the past and in my new role, I have absolute confidence that she's not going to let any family be compromised by a matter such as that.

COUNCILWOMAN REYNOLDS BROWN: And I have every confidence too that that would Not happen knowingly, but we know of instances where the system may break down and DHS may become involved for the very right reasons only to discover that the reason why the children there are suffering from lead poisoning is because of the lead.

So does the contact happen on the front end, or is DHS contacted -- at what juncture is DHS a part of the process?

COMMISSIONER DOMZALSKI: It needs to occur on the front end and at every stage of the process because of just the number of issues that attend the families that we'll be dealing with.

COUNCILWOMAN REYNOLDS BROWN: And I would suspect and hope that that issue, too, is a part of the strike force that's been pulled together, to tighten the coordination.

COMMISSIONER DOMZALSKI: Absolutely. Well, that team that I mentioned is just the core; we need to add partners from DHS, from Housing on this, as well as some of the other agencies, which is really the key to solving this problem.

COUNCILWOMAN REYNOLDS BROWN: One final question. You mentioned in your testimony -- speak to the relationship with the Office of Behavioral Health and the manner in which you deal with young people who have intensive needs. What happens to the child that is too disruptive for the classroom but not seriously in a circumstance where they require residential treatment.

MR. COVONE: Well, I'll take a shot and you can add on.

COMMISSIONER DOMZALSKI: Okay.

MR. COVONE: Generally, what exists currently is that child would be potentially appropriate and appropriate for wraparound services.

COUNCILWOMAN REYNOLDS BROWN: Okay.

MR. COVONE: Which could include anything, from a therapeutic staff-support to a mobile therapist who would work with him both in the class and in the home.

COUNCILWOMAN REYNOLDS BROWN: Very well. I know about that, that's a valuable service. So that answer my question. Thank you.

Thank you, Madam President.

COUNCIL PRESIDENT VERNA: You're welcome.

The Chair recognizes Councilman Nutter

COUNCILMAN NUTTER: Thank you, Madam Chair. I'll be relatively brief and let Mr. Domzalski and other people get back to work.

Let's go in the budget book. I have four or five items, the first of which, actually, is, what's the current status -- I think last year, there was a big issue at our public schools, and I think Councilman Ortiz may have had some -- I think it was Councilman Ortiz who may have had some hearings about this particular issue.

What's going on with the drinking water at schools?

COMMISSIONER DOMZALSKI: Yes. In 1999, the Environmental Protection Agency contacted the schools, the School District of Philadelphia, and made them aware that in their view, there were drinking-water outlets in the schools that exceeded the EPA drinking-water standard for the lead, and that standard is 20 parts per billion. The issue became one of who is going to deal with the coordination of this and enforcement action.

The decision was made that the Health Department would be that entity, and we put in place a consent order and agreement with the School District of Philadelphia that required the School District to test all of its outlets, those outlets that are found to be above the standard, to take those outlets out of service, and to remediate them; that is, put in parts into the faucets or change the systems so that the outlet, the water outlet, would not be producing contaminated water.

And that in the interim, should the number of water fountains be compromised and if there were not enough to serve the children while process was going on, there's a requirement that bottled water be provided in the schools so that the children would have a safe supply of water.

COUNCILMAN NUTTER: Okay. Well, that was 1999; what's happened in the interim? How much testing has taken place since then? how many schools have either solved their problem or not solved the problem? and how much water is available in bottled form for every child in the school system?

COMMISSIONER DOMZALSKI: We have -- let's see. Okay, we're dealing with 299 buildings.

COUNCILMAN NUTTER: I understand, and 264 are school buildings.

COMMISSIONER DOMZALSKI: Right.

COUNCILMAN NUTTER: The rest, I'm assuming, have a --

COMMISSIONER DOMZALSKI: Well, to some extent, they also see children in their for different activities and so we're concerned about that as well.

COUNCILMAN NUTTER: All right, 299.

COMMISSIONER DOMZALSKI: So the total number of water outlets identified for repair or replacement is 4,504. And we presently have 92 schools that are using supplemental water; i.e., that is bottled water.

COUNCILMAN NUTTER: Well, let me understand that. Are you saying that at those 92 schools, none of the outlets are available or --

COMMISSIONER DOMZALSKI: An insufficient number is available.

COUNCILMAN NUTTER: Okay. So they're

using alternatives.

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN NUTTER: And what's going on at the other 172?

COMMISSIONER DOMZALSKI: They are either all right or they're in the process of remediation. And during that process, they have sufficient outlets. Those outlets that are producing contaminated water are turned off.

COUNCILMAN NUTTER: How do we know that?

COMMISSIONER DOMZALSKI: Inspection.

COUNCILMAN NUTTER: Was every school inspected during the course of the current school year?

COMMISSIONER DOMZALSKI: Yes, and some of them several times.

COUNCILMAN NUTTER: What's going on at the 92 schools?

COMMISSIONER DOMZALSKI: The 92 schools they are -- you know, this process has changed a little bit. I will admit that I have not always been, you know, satisfied with the progress.

And to change that, I had a meeting two weeks ago with the Chief of Staff of Mr. Nevels to go over this with the new team over there to talk about just what needs to be done, and quite frankly, some of my concern about this was informed by community residents who have called about concerns they had with the availability of bottled water. And when we looked at those usual suspects, we found that they were, in fact, accurate in that assessment and so --

COUNCILMAN NUTTER: Accurate about what?

COMMISSIONER DOMZALSKI: About there not enough water available.

COUNCILMAN NUTTER: Not enough water available.

COMMISSIONER DOMZALSKI: Right.

COUNCILMAN NUTTER: Okay.

COMMISSIONER DOMZALSKI: And so we brought this to the attention of a man by the name of Mr. Seaford (ph), who has given us his assurance -- and not only that, he has put six additional plumbing teams devoted soley to this so that by the end of this fiscal year, by the end of June, they will have something like 35 of the first 50 schools completely remediated.

COUNCILMAN NUTTER: What do you mean, 35

of the first 50?

COMMISSIONER DOMZALSKI: Those are the one that are determined to need the remediation the most in terms of being able to have a consistent supply of water that comes from an outlet as opposed to water coming from a bottled source.

COUNCILMAN NUTTER: But you gave me a number of 92 schools earlier.

COMMISSIONER DOMZALSKI: Yeah, I did. They're the number of schools that are using bottled water.

COUNCILMAN NUTTER: Okay. And I guess my question is, when will all of the 92 schools be fixed such that bottled water will not be necessary and that there will be enough outlets to serve all of the children in those schools and eliminate that particular problem?

COMMISSIONER DOMZALSKI: Mr. Seaford will be giving us a timetable; part of that timetable is that 35 will be done by the end of June.

COUNCILMAN NUTTER: All right. You're obviously the Health Commissioner, you're not the School District. At least I'm going to say for myself, that's unacceptable.

(Applause.)

COUNCILMAN NUTTER: And we'll have the schools over here shortly. Commissioner, you'll continue to do what you do in that particular area to the extent that you can push the right people to do what they need to do, but if the identification was made in 1999, and this is now 2002, and we think that we're only going to get 35 out of 92 done, first, there is no question, as best I can tell, that there's not enough bottled water at all of the schools for all of the kids.

(Applause.)

COUNCILMAN NUTTER: 'Cause I know I have to send some myself.

Second, if this was some other kind of problem, it would have been resolved. But the fact that it's in a school and we have all of these other competing priorities, and then we tell them, Well, we'll just get you bottled water -- I mean, bottled water is not the solution to this particular problem, and you know, I'm sure, from time to time that the kids are not following the directive of the sign that says "Don't Drink This Water" in the bathroom, because they're kids, so they do whatever they want to do, in many instances.

So it's not a solution, it's not an acceptable level, it's not completely within your jurisdiction, and I'll leave that there.

Let's go to Page 37-60 of the budget book, the HUD Safe Home Program, which apparently was a Grants Revenue Fund project from -- it looks like we received an appropriation in the current fiscal year. Can you tell me in about 15 words or less what the HUD Safe Program is?

COMMISSIONER DOMZALSKI: In very general terms, the HUD Safe Home Program is where we go in and check for clearance for lead, and that's the concept, but this project was not funded.

COUNCILMAN NUTTER: Was not funded

COMMISSIONER DOMZALSKI: Right.

COUNCILMAN NUTTER: Is that something we have to apply for or is it something HUD didn't fund anymore or --

COMMISSIONER DOMZALSKI: Again, you know, I understand about how vague this idea of collaboration is, but it's what's going to get us to where we need to go, and we really need to work with the key agencies on this and focus on just applying to treat 250 homes. When we have the situation that we have is that we really need to have our grant applications coordinated so we get the resources that we need from the housing authorities that are supposed to find (indiscernible) safe housing.

So, yes, we do have to apply and that grant's coming up in the next 30 days.

COUNCILMAN NUTTER: All right. So it is currently still a program of HUD and we have not applied for it?

COMMISSIONER DOMZALSKI: We have.

COUNCILMAN NUTTER: We have.

COMMISSIONER DOMZALSKI: Yes, and we are going to apply again.

COUNCILMAN NUTTER: Okay, but the book says "not awarded in FY '03."

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN NUTTER: Is that because we haven't put the application in or because of the difference in the funding cycles for HUD or --

COMMISSIONER DOMZALSKI: They did not accept our application for whatever reason.

COUNCILMAN NUTTER: I'm sorry?

COMMISSIONER DOMZALSKI: HUD did not

accept our application.

COUNCILMAN NUTTER: Did not accept our application.

COMMISSIONER DOMZALSKI: Right.

COUNCILMAN NUTTER: Do you know why?

COMMISSIONER DOMZALSKI: We're going to find out so we don't make the same mistake twice.

COUNCILMAN NUTTER: Who actually makes the application?

COMMISSIONER DOMZALSKI: It's a joint application, I think.

(Witness comes forward.)

COMMISSIONER DOMZALSKI: (Addressing colleague.) Was this the one between OHCD and us, Dick?

MR. TOBIN: Good morning, Councilman -- or good afternoon, sorry. My name is Richard Tobin, and I'm Director of the Childhood Lead Poisoning Prevention Program.

The Home Safe Program was applied for by the Lead Poisoning Program. It was designed to look at a variety of environmental insults to children that occur in old and deteriorated housing, including lead and mold and mildew and a whole array of things.

COUNCILMAN NUTTER: Right.

MR. TOBIN: It was an extremely competitive grant, there were several hundred applicants, and HUD only gave out five grants in that area last year. We intend to reapply in the coming year also.

COUNCILMAN NUTTER: But we did receive one last year?

MR. TOBIN: No, we didn't receive one last year; last year would have been the money coming into this year. HUD works on a different fiscal year than the City does.

COUNCILMAN NUTTER: Well, let me just understand this. Page 37-60 says, "Fiscal 2000 Original Appropriation, $700,000." Are you saying did not receive that?

MR. TOBIN: That was in anticipation of receiving the grant. We did not receive that, no.

COUNCILMAN NUTTER: Well, what were the five cities that were awarded the grant?

MR. TOBIN: I don't remember right offhand. I think it was Los Angeles may have been one and Boston, and there were a couple of states also, but my recollection is that there were several hundred applicants, and it ended up with five grants.

COUNCILMAN NUTTER: I can appreciate that, but I don't really care how many applicants there were; I care about Philadelphia's application.

Now, what was the quality of our application? I mean, what's the -- where do we rank in terms of other cities that have a lead problem?

MR. TOBIN: Well, the grant wasn't just for lead; it was for a variety of issues. And I think the quality of our application was excellent and it wasn't -- it was one of the very last ones that wasn't funded, or at least from what we've told by HUD, and we intend to go back again this year with an application.

COMMISSIONER DOMZALSKI: I think this is one of the reasons I'm on Mr. Pratt's calendar for -- Mr. Pratt's the head of the local HUD agency here in Philadelphia that makes those funding decisions, and I'm on his calendar for October 19th to discuss this, among other issues.

COUNCILMAN NUTTER: Okay.

The next page is the grant titled

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"Smoke-Free Families," and that also is listed as not awarded in FY '2003, although there is an estimated obligation in '02. Did we receive this grant?

COMMISSIONER DOMZALSKI: We did get this grant and --

(Addressing colleague.) Would you come up here so we can give the Councilmember the complete information?

(Witness comes forward.)

COMMISSIONER DOMZALSKI: This is Debra Roebuck; she's acting back in our Maternal and Childhood Health Program, and knows more than a little something about this.

Debra, thank you.

MS. ROEBUCK: Good morning.

COUNCILMAN NUTTER: Good morning.

COUNCILMAN NUTTER: The funding for this grant was through the --

COUNCIL PRESIDENT VERNA: Please identify yourself for the record.

MS. ROEBUCK: Excuse me, good morning. My name is Debra Darlene Roebuck.

COUNCIL PRESIDENT VERNA: Thank you.

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MS. ROEBUCK: Okay, the funding for this grant will be completed at the end of March. It was funded under the Robert Wood Johnson Foundation.

COUNCILMAN NUTTER: Okay, so we did actually receive this?

MS. ROEBUCK: We received it, and it will be completed at that day.

COUNCILMAN NUTTER: And that's the $72,185?

MS. ROEBUCK: Yes.

COUNCILMAN NUTTER: Okay. Are we going to reapply for that?

MS. ROEBUCK: There is not a opportunity to reapply at that time they issued the grant.

COUNCILMAN NUTTER: Okay, all right. Thank you.

Commissioner, Page 124, Philadelphia Asthma Initiative, we have an FY '03 obligation level of $18,920, which is a $12,000 decrease from the previous fiscal year. Can you tell me what happened in this particular situation?

COMMISSIONER DOMZALSKI: We have several asthma initiatives going on, Councilman, and I just need to focus on which one this is.

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(Addressing colleague.) Jane, do you have this or is it Ambulatory Health? No?

Well, we have three other asthma grants, and I'll have to get that information for you.

COUNCILMAN NUTTER: Get it back to me.

Last question: On Page 130, this appears to be a new grant, the Comprehensive Tobacco Control Program. Is as a result of actual settlement funds?

COMMISSIONER DOMZALSKI: Yes, it is.

COUNCILMAN NUTTER: Tell me what you're going to do with this, please.

COMMISSIONER DOMZALSKI: This is going to fund a series of tobacco cessation activities throughout the City, and we will be doing this -- we've been notified that we'll probably be eligible for up to $3.5 million for this go-around, and we'll be using it for some tobacco cessation in various venues in which we see patients, we'll be looking at areas where young people congregate, we'll be doing this in rec centers, we're going to be doing this in whatever access we can get to the schools to do this.

So it's going to be a pretty aggressive program.

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COUNCILMAN NUTTER: Now, let me ask this question in conjunction with that, and then I think I'll be completed. On Page 3 of your testimony, you are -- your testimony is that 16.8 percent of pregnant women were reported smoking?

COMMISSIONER DOMZALSKI: Yes, sir.

COUNCILMAN NUTTER: Down from 20.3 percent?

COMMISSIONER DOMZALSKI: Yes, sir.

COUNCILMAN NUTTER: Will some of these funds be targeted to deal with that kind of issue?

COMMISSIONER DOMZALSKI: Absolutely.

COUNCILMAN NUTTER: Okay. And, lastly, this may be more the jurisdiction of L&I, but it's related to tobacco.

I'm informed recently and have one of the packages. There is this continuing issue with young people having access to tobacco, either through single sales of cigarettes, or now there is a product on the market called a "Blunt Wrap," which is a tobacco products which is sold in grocery stories and other places that makes it easier for people to essentially wrap whatever it is that they want to wrap, and most of them are not wrapping tobacco.

COMMISSIONER DOMZALSKI: Right.

COUNCILMAN NUTTER: What, if anything, is the Health Department doing about that particular issue?

COMMISSIONER DOMZALSKI: The Blunt Wrap -- and I have to get some advice on this.

(Addressing colleague.) Is this included under the Sinai amendment, Nancy? No, it isn't?

What we're doing about tobacco sales, which is a huge issue, is that we are enforcing the ordinance that requires that tobacco sales not be made to minors, and we do that by investigation. We also do that by working with a community agency called "TEACH," where we actually go out and have people attempt to make buys who are under age, and then make that referral to L&I for a citation if, in fact, the sale is made to someone under age.

COUNCILMAN NUTTER: Are those prevention efforts citywide as well as the investigations?

COMMISSIONER DOMZALSKI: Yes, yes.

COUNCILMAN NUTTER: Okay. I'd like to talk with yourself and probably Commissioner MacLaughlin at another point in time about this whole Blunt Wrap issue.

COMMISSIONER DOMZALSKI: Certainly.

COUNCILMAN NUTTER: I appreciate it.

Thank you, Madam Chair.

COUNCIL PRESIDENT VERNA: You're welcome.

Commissioner, when do you expect the additional federal funding for public health emergency response to be made available to the State?

COMMISSIONER DOMZALSKI: We're going to know more about that in the next couple of weeks. The Secretary of Health of the Commonwealth of Pennsylvania and I have been invited to meet with the federal government this coming weekend to talk about just what the local needs are and how that money ought to best be distributed.

In the federal system, the money will go first to the State Health Department, and then it will be made available for us. And for a number of reasons, the Secretary of Health has generally reposed his confidence in us to represent all of the local health jurisdictions in Pennsylvania and making clear what our needs are and how that money needs to be spent.

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So we expect to know probably very, very quickly, and maybe in the next the 90 days, about how much we'll be able to secure of that and when it will come.

COUNCIL PRESIDENT VERNA: Can you elaborate on the what the types of enhanced systems protective gear and personnel costs are that you're seeking from the State?

COMMISSIONER DOMZALSKI: I will, Council President.

The issue of bioterrorism is, in a lot of ways, a lot like stuff we do every day in the Health Department. There are some 60 diseases of public health significance that are required by law to be reported to the local health department, and when we get those reports, we review them, we follow up on them, we try to find out whether or not there are any similarities in the persons who have been diagnosed with the condition, and make interventions as appropriate.

That system, while it's very good for the diseases we're talking about most of the time, is not as good as it needs to be when we're talking about an event of bioterrorism. With bioterrorism, it's different than, say, a bomb going off. When a bomb goes off, you know the bomb went off; when this bomb goes off, you may not know about it for three, five, six, eight, ten days, depending on what the incubation period is of the agent that's involved.

And so what we want to do is enhance our surveillance systems out in the medical-care community, particularly the large hospitals and emergency departments, where they may not have laboratory-confirmed disease to report to us, but there may be a constellation of symptoms that are showing up that are of significance to our infectious-disease docs to say that, Hey, we may we looking out there for something of that nature, and that's the nature of what we want to enhance.

COUNCIL PRESIDENT VERNA: Thank you.

Mr. Covone, can you tell us, when an individual enters the prison, whether sentenced or he is a detainee, are they screened for drug use?

MR. COVONE: I do not believe they are screened for drug use, entering the prison.

COUNCIL PRESIDENT VERNA: Why aren't they screened?

MR. COVONE: That has historically been

the case, and I honestly cannot speak to the why of there has never been a screening.

COUNCIL PRESIDENT VERNA: You know, as I said, if someone's sentenced and he has been using drugs, how do we deal with this? If we don't screen them, how do we know what their problem is?

MR. COVONE: To follow up, I'm going to ask Assistance Commissioner Bencivengo to come up and speak to that.

I also think that at certain times during the year, there is some screenings that are done at the Roundhouse to try and get some assessment of the number of individuals who are coming into the criminal justice system who may have drug and alcohol issues there.

(Witness comes forward.)

COUNCIL PRESIDENT VERNA: Good afternoon.

MR. BENCIVENGO: Mark Bencivengo, Assistant Health Commissioner of the Behavioral Health System.

The individuals are not screened when they go into State Road. There is, however, a very aggressive release program, early-release program, that's going on in there called the "Forensic

Intensive Recovery Program."

Actually, when one looks at screening versus self-report, there's not a great deal of difference between whether or not the self-report yields more or less than the screening, and these individuals who acknowledge that they have a substance-abuse problem, how long they've been using and what they've been using, that's generally quite accurate.

In Philadelphia, we're generally dealing with cocaine, heroin, marijuana, or alcohol use. There are a variety of other drugs, as you know, but Philadelphia is a fairly conservative city, unlike some of the other cities out on the West Coast where there's a much larger array of drugs. We think we'd pick up, through self-reporting, A lot of what's going on and is --

COUNCIL PRESIDENT VERNA: What percentage would you say?

MR. BENCIVENGO: What percentage of people up on State Road have a substance-abuse problem?

COUNCIL PRESIDENT VERNA: Mm-hmm.

MR. BENCIVENGO: 70 to 80.

And as you pointed out, about a third of the people that are in the county jail are there pre-trial, so they have not been sentenced yet.

COUNCIL PRESIDENT VERNA: All right, thank you.

The Chair recognizes Councilman Ortiz.

COUNCILMAN ORTIZ: Thank you, Madam Chair.

Along the same line, but first a question on -- you did not -- did you promise to send the 92 schools that are currently still not in compliance with getting rid of the lead problem in their fountains? I would like to have a list of those schools. Can you send that?

COMMISSIONER DOMZALSKI: Absolutely.

COUNCILMAN ORTIZ: Around February of this year, we were told that that problem had been solved about the schools and, obviously, you say we have 92 still with a big problem and others that still have large areas of their system that are still with problems with lead and those fountains cannot be used. So I'd like to see what schools these are and what is the plan that the Health Department has in place.

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In terms of the prison and the drug-addiction problems and the transmittible diseases, as people who come out of Curran Fromhold and State Road, do we have a process in which the Health Department takes -- and these individuals come into the Health Department system? 'cause a lot of -- a lot of them are coming out with transmittible disease -- HIV, chlamydia -- out of those systems.

And I want to know, do we have a follow-up program for these individuals to integrate them into a case-management system by the Health Department or DHS or whatever?

COMMISSIONER DOMZALSKI: We do.

COUNCILMAN ORTIZ: What is that?

COMMISSIONER DOMZALSKI: As far as the transmissible diseases --

COUNCILMAN ORTIZ: Tell me how it works. You're in prison and you're going to be released; what happens?

COMMISSIONER DOMZALSKI: Well, in prison, we would -- most of these diseases are symptomatic, and --

COUNCILMAN ORTIZ: I understand. You're Robert C. Jones, you know, and you're going to be released at 3 o'clock this afternoon, you are suffering from HIV; what happens to you once you walk out onto State Road from there? What does the City do? where does he go? does he have a support system that is going to be able to carry him across? Do we have that in place?

COMMISSIONER DOMZALSKI: Yes.

COUNCILMAN ORTIZ: Tell me how it works.

COMMISSIONER DOMZALSKI: The person that you just described would be counseled before release and would also be given a supply of medications and then counseled about the importance of seeking a primary-care provider. If the person has a physician that he or she is seeing, then we would encourage that person to continue with that process.

If the person tells us, "I don't know who to see, I never had any medical care," we tell him, "Come to our health centers." And if he asks which one, we'll say, "Here are a list of the centers and their addresses. Pick one that you think would be most convenient for you to come to."

And then we work with the health center, and no appointment is required and we get that patient in immediately.

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COUNCILMAN ORTIZ: That's sort of haphazard. I mean, you're leaving it to individuals really that have very little structure to their lives.

COMMISSIONER DOMZALSKI: Right.

COUNCILMAN ORTIZ: They're coming out of prisons, and obviously they're coming out of prison with something that is going to impact negatively in neighborhoods that they're going to be living in.

Shouldn't we have in place a system in which they come out of that prison with a case manager that they're supposed to see at a designated health center, and that information then goes to that health center, and if that guy doesn't show up at an appointed meeting and session, that then that is notified.

Because this is about HIV, this is about chlamydia, this is about very, very dangerous situation on viruses that we have, and we have certainly no control built in as people come out of these prisons.

COMMISSIONER DOMZALSKI: You're a hundred percent on this, a hundred percent correct, Councilman.

What we've done is build in now a layer of case management, where we have a person agree to allow us to make a referral, respecting confidentiality, to a case-management agency that will then be able to follow up and do that, exactly what you're saying. That is relatively new.

(Addressing a colleague.) Joe, did you want to help me with this?

(Witness comes forward.)

MR. CRONAUER: I'm Joe Cronauer, Co-Director of the AIDS Office, City of Philadelphia (AACO).

Yeah, every person who tests HIV-positive through the AACO counselors at the prison -- we do all of the HIV testing -- are given the option of being referred either to a case manager that's actually stationed at the prisons or a new program that we're in week two of a six-week process of getting started with, which is a care outreach program, so that every individual is linked with somebody on site, at the prisons, that not only works with them at that point, but is also available upon discharge for up to a three-month period to continue to work with the individual to make sure that they're placed in the treatment once they are out of the prisons.

COUNCILMAN ORTIZ: How long has that been in place?

MR. CRONAUER: The case-management program has been in place for two or three years.

COUNCILMAN ORTIZ: At the prison?

MR. CRONAUER: Yes, yeah. And certainly we're aware that that program was not able to handle the quantity of people with HIV coming out of the prisons that we believed need additional assistance and linking into care in the community, which is why we've now begun the care outreach program to augment that so that we know that certainly by the middle of the summer, we're going to be able to link every single individual who chooses that option because -- certainly we can't make them do this, but every individual who will chooce that option will be presented with a one-on-one contact, an individual that will be there for them to guide them into care.

COUNCILMAN ORTIZ: Shouldn't we be much more proactive, knowing what HIV does and knowing the impact that it can have and the result of transmitting the disease in our neighborhoods and to our city? Shouldn't we be more proactive in making sure that there is a follow-up to see that "X Y or Z" doesn't show up to one of the case managers?

Does that happen? In other words, if someone doesn't show up, what happens?

MR. CRONAUER: If someone does not show up to an appointment with the case manager?

COUNCILMAN ORTIZ: Mm-hmm.

MR. CRONAUER: That case manager tries to locate that person and set up another appointment.

COUNCILMAN ORTIZ: Tries?

MR. CRONAUER: Tries to. I would actually have to go back and talk to the provider about that to see --

COUNCILMAN ORTIZ: Do we have any data in terms of this program that began three years ago and that has now been supplemented by more in terms of how we're doing and how many individuals came out and how many individuals we actually kept in touch with and are within a system of case management? Do we have number on that?

MR. CRONAUER: I can provide that for you, yes.

COUNCILMAN ORTIZ: Yes, I'd like that.

Thank you.

COUNCIL PRESIDENT VERNA: Thank you.

Are there any other questions from members of the committee?

(No further questions.)

COUNCIL PRESIDENT VERNA: Commissioner, thank you very much. And thank you very much for doing such a fabulous job. We really appreciate it.

COMMISSIONER DOMZALSKI: You're welcome, Madam President. Thank you so much.

COUNCIL PRESIDENT VERNA: Thank you.

MR. MCPHERSON: The next agency is Safe and Sound.

COUNCIL PRESIDENT VERNA: We'd like to continue on with our hearings so if you're having discussions, please do so in the corridor.

(Witnesses come forward.)

COUNCIL PRESIDENT VERNA: Good afternoon, welcome, and thank you for your patience.

MS. POST: Good afternoon.

COUNCIL PRESIDENT VERNA: Please identify yourself for the record and proceed with your testimony.

MS. POST: Thank you. Naomi Post,

President and CEO of Philadelphia Safe and Sound.

Good afternoon Council President Verna and members of City Council. I am Naomi Post, President and CEO of Philadelphia Safe and Sound. Today I'm here to present testimony on the budget and operations of Philadelphia Safe and Sound, its relationship to the City, and to answer any questions you might have.

As you may know, Philadelphia Safe and Sound operates on a calendar-year budget from January through December. Our total proposed budget for calendar-year 2002 is $2,868,590, compared to $2,874,252 in 2001.

Of that amount, we anticipate revenue of $2,432,690 from the Robert Wood Johnson Foundation; $410,000 from other primarily grant-funded sources; and $25,900 from individual corporations and foundations. The Robert Wood Johnson Foundation grant award comes to the City.

Since Philadelphian Safe and Sound's six full-time staff are employees of the City's Recreation Department, salaries and benefits are paid directly by the City. The balance of the Robert Wood Johnson Foundation and other grant funding is passed to Safe and Sound from the Department of Human Services.

We anticipate spending approximately $549,290 for salaries and fringe benefits, $905,754 direct costs such as rent, utilities, equipment, and supplies; and $1,413,550 for various contract services.

The structure of Safe and Sound is best understood within the concept of its inception and its history. In 1995, the Robert Wood Johnson Foundation solicited applications related to comprehensive plans to improve the health and safety children in urban areas. Twenty cities throughout the United States, including Philadelphia, submitted proposals to what is now known as the Robert Wood Johnson Foundation Urban Health Initial. Philadelphia was one of eight cities selected to engage in a two-year planning process, and in 1997, was one of five cities awarded an initial four-year implementation grant.

In 2001, the City was successful in receiving another four-year implementation grant to continue its work. We are now in the seventh year of this ten-year initiative. The other Urban Health

Initiative cities are Baltimore, Detroit, Oakland, and Richmond.

The mission of the Urban Health Initiative cities, in the broadest terms, is to improve the health and safety of children. While the grant is generally non-prescriptive, one major condition is that it prohibits direct service delivery. Sites are encouraged to implement plans that support system reform and which assist the City in incrementally going to scale with services designed to improve the lives of children.

This guidance from the Foundation epitomizes the role that Safe and Sound has developed in relation to the City. Our express mission is to be a resource development and technical-assistance agent working constantly to support and strengthen the City's service delivery system and always in coordination with the City's priorities.

There is variance in the strategies each side is advancing, and each developed a slightly different agency model. For example, in Richmond, the initiative called "Youth Matters" functions under the auspices of the local Chamber of Commerce.

Philadelphia elected to have the City receive its award in our initiative, "Philadelphia Safe and Sound," initially reported to the former mayor's Children and Families Cabinet.

During the first two years of implementation, Safe and Sound's governing board, which was the children's cabinet, along with other advisors, such as the Robert Wood Johnson Foundation fellows, determined that the best interests of the initiative would be served by converting to 501(c)(3). The reason for the conversion to the nonprofit was twofold:

First, while the Initiative would continue to provide assistance to the City, we knew that over time, we would have to leverage charitable dollars to complement the Robert Wood Johnson Foundation and government contributions. And in this regard, it should be noted that although our Robert Wood Johnson Foundation award is greater than previous-year allocations this year, the amount received will decrease in each subsequent year. Each site will be securing charitable and competitive governmental dollars to compensates for decreasing foundation awards over time.

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Second, and of equal importance, was the recognition of the critical need to broaden the membership of our governing board to include private-sector partners. Such a change reflected an acknowledgment that government alone cannot resolve the conditions our children and families face. Diverse leadership and a strong public and private partnership is needed to create and sustain the changes the City is seeking to accomplish.

Safe and Sound is a non-profit corporation, which has a board of directors composed of City officials and representatives from the business foundation and faith communities. In keeping with our grant conditions and our philosophy that supports the Initiative supports change within government with guidance from the private sector, the Robert Wood Johnson Foundation Grant remains payable to the City, which contracts with Safe and Sound for the purpose of implementation. The City details employees to the corporation and the corporation has the ability to contract for other services to support its work.

As President and CEO of the corporation and as a City employee, there are multiple levels of accountability. While the mission is guided by our board, I have continued to report to the Director of Social Services within the Managing Director's Office. Further, the Robert Wood Johnson Foundation has established a National Program Office, which is responsible for providing all five entities with oversight and guidance while monitoring our progress.

The Foundation has also engaged New York University Wagner School to evaluate this multi-year effort in each city. Robert Wood Johnson Foundation fellows, who connect to and support the work, have been selected by the Foundation. The Philadelphia fellows are John Delaney of the District Attorney's Office, Janice Davis of the Philadelphia Finance Department, Alba Martinez of the Department of Human Services, and Ann Schenberger from the Southeastern Regional Office of the Department of Public Welfare, Paul DeLorenzo from the Office of Children's Policy, and, of course, your esteemed colleague Councilwoman Reynolds Brown.

In connection with fiscal matters, we report to the City, to our board of directors, and to the National Program Office. We secure independent audits and also have also been audited by PriceWaterhouse in connection with a randomized foundation audit. While the scrutiny to which we are subjected is intense, we welcome it, as it serves to enhance our accountability.

I recognize that the unique structure of Safe and Sound has left some people confused about its relationship to the City and its mission, but our mission is quite simple and our relationship to the City less complicated than might appear.

Philadelphia Safe and Sound exists to provide support and technical assistance to a city which has determined that improving the lives of its youngest residents is a high priority. In other words, Philadelphia Safe and Sound is, as its logo suggests, "The City's Campaign for Kids."

Philadelphia Safe and Sound operates both as an arm of City government and as a technical-assistance resource to it. In this capacity, the City, through the Division of Social Services, can: Direct our efforts to assist in the development of new projects; facilitate cross-department efforts, as we have done to produce the Children's Report Card and Children's Budget; and support citywide initiatives, such as the Children's Investment Strategy.

As a 501(c)(3) and an RWJ grantee, we are able to tap into resources and experts across the country on behalf of the City, secure private funds to help expand City services, and stay on the cutting edge of emerging research and best practices. The City and its vision drive our focus for its children and families. Allow me to explain to you what that means and how we operate to fulfill that role.

As you proceed through these hearings, you will be receiving extensive testimony about the City's efforts to meet its many mandated responsibilities. Much of what Safe and Sound does is to find the most effective strategies and resources available to assist the City agencies in that work. These include activities like Safe and Sound's participation in the development of the Youth Violence Reduction Partnership. YVRP, after a year of intensive planning, was first introduced in the 24th Police District in June 1999. Today, that project has helped reduce youth homicides by 63 percent in the 24th Police District, and it is now being replicated in the 25th District. Preliminary data from the 25th District shows a decrease in homicides from 25 a year to 8 a year, a decrease of 68 percent for our targeted age group.

In connection with the Youth Violence Reduction Partnership, Philadelphia Safe and Sound co-chairs the project along with John Delaney of the District Attorney's Office, and we host the weekly meetings. We request, receive, and analyze police homicides data, which serves to inform and guide the efforts.

We secured over a million dollars in federal funds from the Juvenile Accountability Block Grant to pay for the street-worker component of the project. And when acting Police Commissioner Johnson emphasized to us, as he did to the general public during his recent testimony that we cannot arrest our way out of the problem, we convened all of our stakeholders. The net result was the creation of the Recreation Department's Teen Centers.

For the Teen Centers, we convened the group, we provided research and guidance, and we secured federal funding in the amount of $225,000 for the Recreation Department. We've also developed the evaluative tools necessary to measure the effectiveness of the centers and reaching and successfully intervening with high-risk youth.

While the precise activities in which we engage can vary, our mission and role is to identify proven strategies to assist the City in developing and implementing them effectively and then to step back as the City institutionalizes and replicates them and responds to its mandated responsibilities. The gain is improved outcomes for kids and a more efficient use of City funds and resources and more effective resulting services.

Our contribution does not end there. We also indirectly help to generate other resources on behalf of the City. For example, we have facilitated funding for evaluation projects, and the City's integrated data project has been launched with foundation funds that Philadelphia Safe and Sound helped to secure. As mentioned earlier, we assisted in securing federal funds for YVRP and Teen Centers, and we supported the City's request for TANF funds for home visitation and CIS.

These are only isolated examples of an

ongoing commitment that we have to support City services. Because of my direct-report relationship to the Director of Social Services, this commitment is always aligned with that office's responsibilities and priorities.

One of our newer challenges has been to take the knowledge and information gained in producing the Report Card and use that as a spring board for developing an intensive mapping capacity that can cross-reference multiple risk and asset information about kids, families, and our neighborhoods. This is providing new and more informed viewpoint to guide how and where the City's targeting its services and resource.

This type of intensive mapping information assisted the City in identifying targeted zip codes to receive priority consideration under the Children's Investment Strategy (CIS). The CIS was developed by the City to respond to and to improve the Report Card outcomes. The Report Card represents the City's commitment to track and understand the state of our children and youth.

We are not satisfied with those outcomes and always recognize that documenting the current outcomes was only the beginning. The next step was to research proven strategies and approaches for improving those outcomes, and that search led to a focus on the non-school hours and the critical and pivotal role those hours play on how our children fare.

Through an exhaustive exercise, we were able to help the City estimate that approximately 100,000 of our school-aged children have no supervised after-school options. As a result, the Mayor encouraged City agencies to join forces in developing new and expanded after-school and youth-development opportunities.

The CIS is more than an increased availability of services; it is built on research-based strategies that have demonstrated the ability to contribute to improve student attendance and performance and safer school and community environments. The CIS is not a silver bullet; it is a proven approach that, if carefully implemented and supported, can change the way schools, parents, providers, and communities join forces to benefit kids. The CIS is lead by the Mayor and an oversight committee composed of public and private leaders across the City.

As you have learned in previous testimony, there are over 100 new after- school programs operating, serving approximately 4,608 school-aged children. Additionally, 11 new Beacon Grants have been announced. Beacons are a nationally-researched school-based community-center model that was developed in New York City and has been replicated in other parts of the country.

It is equally important to discuss how Beacons fits into the overall strategy for community-based programs. Beacons, Family Centers, Teen Centers, and other community-collaborative models share many core principles and strategies, but each has its own specific mission and objective.

Our challenge is to find the most effective ways to combine these resources where they coexist. Need in this city more than outstrips resources. The strengths and various scopes represented by these different models offer new opportunities to combine these efforts.

For example, the strong family-support focus of a family center, working side by side with the after-school and youth-development expertise of a Beacon can only benefit a neighborhood. The City is now positioned, with its evolving mapping and targeting capacities, to more planfully position and resource these programs.

Our strategic system reform effort consists of ongoing technical assistance and guidance and helping government officials develop, reform, and restructure operations and systems based upon data, research, and best practices.

Safe and Sound has focussed on four primary initiatives to strategically reform Philadelphia's systems.

Our first initiative is the Report Card on the well-being of children and youth in Philadelphia. The Report Card tracks the well-being of children using 27 key indicators that objectively measure progress toward 5 desirable results, and it is intended to guide public and private investments and policy decisions.

Second, the Children's Budget, a companion document to the Report Card, annually measures and analyzes all government spending for children in Philadelphia. This document allows comparison between government spending-decisions and areas of need as depicted by the Report Card. The Children's Budget presents data by funding source, the purpose of the spending, and the type of services being provided. It provides comparisons of spending for children over time. This type of analysis will be increasingly critical in future years, since patterns and trends in investments and results become clear when viewed over a long period of time.

Together, the Report Card and the Children's Budget illustrate the need for expansion and improvement of programs and services to strengthen the development of children and to reduce the level of risk behaviors.

Many of these outcomes can be improved through greater front-end investments in youth-development and after-school activities. Yet the Children's Budget reveals that only about 10 cents of every public dollar currently spent on children are devoted to preventive and development services. Clearly, there is potential to change these outcomes by redirecting a larger portion of overall spending for children away from the current high-end crisis intervention and corrective services

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to more effective, proactive prevention and early-intervention strategies.

Our third system reform effort, the Children's Investment strategy, has been developed to do just that. As I mentioned earlier, the centerpiece of this strategy is an effort to provide access to after-school and youth-development activities to the 100,000 children and youth currently without access.

Our fourth system reform effort supports the City's Integrated Data Management Project. Safe and Sound is providing technical assistance to the City on the development of a secure, integrated system. The project involves integrating the data systems of five social-service agencies with those of the School District and the Police Department. An integrated data management system will allow greater data and information exchange among City agencies to foster better coordination and effectiveness.

Beyond major system reform, another key role for Safe and Sound is development and monitoring of research-based programs that reduce antisocial behavior among high-risk youth. These programs are based on best practices that research has proven are successful in improving the health and safety of children. In this role, Safe and Sound provides research and development to the City by researching and testing innovative models to improve child and youth well-being.

Many of the resources this City needs, as is the case with all municipalities, are controlled or influenced by state government. We believe that elevating issues related to the best interest of children and families to create consensus across the State and in Harrisburg is critical to our success. It is for this reason that Safe and Sound is cofounder statewide coalition, Folks Five For Kids, Pennsylvania's campaign for children and families.

As I have indicated in my testimony, Safe and Sound will continue to be responsive to the needs of the City, its youngest residents, and their families. We do so, recognizing that in order to substantially improve the well-being of children, a unity of voice and mission, which is non-partisan and which includes private-sector partners as well as local, state, and federal partners, is critical to our success

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I appreciate the opportunity to testify before you, and I am happy to answer your questions.

COUNCIL PRESIDENT VERNA: Thank you very much.

The Chair recognizes Councilman Nutter

COUNCILMAN NUTTER: Thank you, Madam President.

Good morning, President Post. And I see Commissioner Richman is back. I'm sorry, I mean Managing --

MS. POST: Managing Director Richman has joined me.

COUNCILMAN NUTTER: -- Director Richman is back. Thank you.

I have just a couple quick questions. Philadelphia Safe and Sound, as you mentioned on your first page of testimony, is in the seventh year of what's anticipated to be a ten-year initiative?

MS. POST: That's correct.

COUNCILMAN NUTTER: Okay. And what would be the anticipation at the ten-year mark with the City? Is there a proposal to do anything beyond the ten-year point, and how would with continue some of these activities?

MS. POST: I think that there are certain officials within the City and members of the board who think that beyond that ten-year period, it would be helpful to have an entity such as Safe and Sound around to provide technical support and technical assistance to the City.

Whether that would continue to be Safe and Sound or whether the functions of Safe and Sound would be integrated into City government is very unclear to me, and I don't think we've had enough discussion and debate to be able to advise you of the plans beyond the ten years.

COUNCILMAN NUTTER: Okay. On the foundation side of this discussion, do they have any thoughts beyond the ten-year time period, or is there any discussion -- I mean, all of the cities pretty much started at the same time?

MS. POST: Yes.

COUNCILMAN NUTTER: For the Robert Wood Johnson Foundation side, do you know if they're anticipating providing either extended funding? Or what's their expectation of the cities at the ten-year mark?

MS. POST: With this last four-year

implementation grant, the Robert Wood Johnson Foundation decreases the amount of its commitment every year. It has encouraged each site to do fund-raising both from government resources as well as charitable resources to reach a level of sustainability.

Each model is a little bit different. If I look at Oakland, which is more closely connected to government than the other sites, Oakland is now -- the county is now picking up 50 percent of the costs of the operation of that particular initiative.

I think in Philadelphia, as we explore the continued need for this service, we would try to lend public and private funding to continue the work in some fashion, either within government or through a separate entity.

And Miss Richman may want to respond to that as well.

MANAGING DIRECTOR RICHMAN: This is actually the third major Robert Wood Johnson Grant that the City has gone after of this nature that are long-term systems-change grants. One was Health Care for the Homeless, Philadelphia Health Care

Corporation; and the other was Philadelphia Mental-Health Care Corporation, which was applied to for care for chronic mental illness.

Both of those the City continued to support when the initial grant from Robert Wood Johnson ran out because they do give us an opportunity to find best practices and basically pilot things to determine whether they would be effective for the City.

While the decisions have not been made as of yet for the continuing role, when the Safe and Sound or the Urban Health Initiative Grant from Robert Wood Johnson expires, we certainly will look at the other models that have been very successful for this city and see whether it fits in that, but those decisions have not been made as of yet.

COUNCILMAN NUTTER: Okay. On Page 2 of the testimony -- and I think it goes back at some point to Page 1 -- the reference was made to the other -- maybe it's in the first paragraph. There are six full-time staff who come from the Recreation Department?

MS. POST: That's correct.

COUNCILMAN NUTTER: Okay. And I mean,

that -- that's the entire complement of Safe and Sound?

MS. POST: Well, you'll notice that we contract out well over a million dollars for other services. The full-time City employees would be those six. There may be other people participating and working a 40-hour week but not necessarily as City employees on contract, without paying fringe benefits or...

We have some contracted consultant services is what I guess I'm trying to say in my very inarticulate fashion.

COUNCILMAN NUTTER: No, that would not be the case from you.

All right, so you pay for some other contract services, but those people are not public employees; they're just additional.

MS. POST: That's correct.

COUNCILMAN NUTTER: Okay. The Children's Report Card and Children's Budget, that started two years ago or --

MS. POST: Our first publication was in June of 2000, which was the initial release, and a second was June 2001. And we anticipate releasing the third edition in June of this year.

COUNCILMAN NUTTER: And how would you compare that to -- or is it more localized or more intense information? How would that compare to -- I think annually there's something produced by the Annie Casey called "Kids Count"?

MS. POST: Yeah, the Kids Count Report is by far more general and actually because it looks more globally less accurate than the Report Card indicators that we measure every year.

COUNCILMAN NUTTER: Okay. I think one of the questions that I've had from time to time -- and my recollection is that you may have been here two years ago or three years ago as a part of the Recreation Department testimony, although I'm not sure that you actually testified. I seem to have some recollection that you were actually in the room on a previous budget hearing.

MS. POST: This is my first occasion to join you.

COUNCILMAN NUTTER: Okay. We're pleased to have you.

MS. POST: Thank you.

COUNCILMAN NUTTER: I thought I had seen

you here once before. Maybe it was a different occasion.

On Page 3 of the testimony, there is a great amount of discussion about activities in the 24th and 25th Police Districts, and I think we heard, maybe in Capital Budget -- I've not been to every police district in the City. I think the 24th and 25th, are they together either presently or soon to be together in a new building?

MS. POST: Yes, yes.

COUNCILMAN NUTTER: Okay. One of the things that I have not completely understood about Philadelphia Safe and Sound -- and I'm sure it's in some of the materials -- is just where does it function? Is it primarily a localized program? is it a citywide program?

I know the testimony then starts talking about Beacons, and I know that they're all over the place and some teen centers -- Recreation was in last week, and we did determine that there was no teen center in the western and northwestern part of Philadelphia, which we'll continue to talk with Recreation about.

Where does Safe and Sound function?

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MS. POST: Our work is really citywide.

COUNCILMAN NUTTER: Okay.

MS. POST: And although some of the initiatives we may be supporting or advancing target specific neighborhoods, our data and our work is citywide.

If we look at the 24th and 25th Police Districts, the reason those two districts were initially selected for the Youth Violence Reduction Project and the Teen Centers had to do more with the data. We looked at the number of homicides for young people 24 to 7 years of age, and where those numbers were the highest is where we began our work.

If you look at the expansion plan for the Youth Violence Reduction Project that has been agreed upon by the partners -- and that's the District Attorney's Office, Adult Probation, Juvenile Probation, the School District, the Police Department, and others, clergy and street workers -- the next area of penetration would be in the 12th Police District, again, because as you look at homicide trends, there's an escalation in the 12th District in particular for that age population of 24 and under.

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So it's a data-driven initiative that tries to harness resources to expand to those areas of the City most in need of that level of intervention. It targets specifically kids most likely to kill or be killed.

COUNCILMAN NUTTER: I understand. Could you give us a sense of what may happen -- and I understand that if you're in Year 7 and you're not sure what happens in Year 10 either on the City side or on the Foundation side, it may not be the time to start embarking on a wide variety of new initiatives, but if we can suspend some of that reality for a second, given how the data is driven, I mean, what would you envision in some other areas for expansion to be, based on the data?

MS. POST: We actually helped the City partners to create a three- to five-year expansion plan that begins this July when we anticipate moving into the 12 Police District, and it anticipates every July thereafter, moving to another police district -- I think three additional district.

We call them "District X" because you really need to look at the data at the time that you're prepared to expand, and that's going to drive where you make your investment. And sometimes trends change in terms of the kinds of activities that result in escalating violence. Drug trafficking or possession of guns may be highly concentrated in one area, but because of strategic law enforcement, it may move to another.

So we decided to reserve any recommendation for expansion beyond this year until we're closer to a point when we're ready for expansion so that we can look at the data then.

COUNCILMAN NUTTER: Okay. The reason I asked you the question is I know that the 12th is primarily in Southwest Philadelphia but also -- I mean, there's, unfortunately, a significant amount of relationship between some of the activities in the 12th moving north to the 18th and then concentrating themselves also to some extent in the 19th. And more specifically, there are some areas in the borders between the 18th and 19th that have a serious amount of that kind of activity going on.

To the extent that there are any expansion opportunities for the police have changed some of their designations, I don't know whether that whole area is now Southwest or West Detectives, but there is a fair amount of that kind of activity going on over there, and I would ask if we could give them some attention.

MS. POST: We certainly would.

COUNCILMAN NUTTER: Okay. Also on Page 5, either from yourself or Managing Director Richman, is it possible to get a list, if not a potential mapping, of what we now have? The Beacons, the Family Centers, and the Teen Centers are all mentioned together, and sometimes --

MS. POST: We certainly can send that to you. I think what we'd like to do is to send you the after-school programs since there are well over 100; the Beacons, of which there are 11; the Teen Centers, where there are now 2; as well as the Family Centers. And we can break it down on a type list by zip code, and we can probably also map it for you.

COUNCILMAN NUTTER: Thank you for the recommendation.

Actually, the other part of, I think, the communication of the program -- its reach, its depth has been just trying to keep track of after-school programs, different places where different things are going on, and what our ability is to either promote them or let people know that they exist.

I mean, we know that since the last administration, there has been an expansion of after-school programs throughout the City, and in many instances, we hear about the communicating of where they actually are, what they do, how they function, and operate; it seems to be more on a happenstance kind of basis. And, I guess, if you live near one, you know; if you're a few blocks away, you may not know.

So I think it may help all of us if we have that kind of information and can point people in the right direction.

Let me just ask a couple last questions your testimony Page 6 and into Page 10. I don't know when you may have come into the room this morning, but there was a fair amount of extensive discussion with the Health Commissioner specifically about lead and lead poisoning and a variety of different other things.

Your testimony going from the bottom of 6 into 7, where you talk about 10 cents of every public dollar currently spent on Philadelphia children -- I'm sorry, only about 10 cents of every public dollar currently spent on children are devoted to preventive and development services.

Could I ask you to -- I know that you've thought about this. Could I ask you to give us some of your either ideas or recommendations as to how we might improve that number? What should we be doing? I mean, I don't know what the right number is, but, I mean, even for me, 10 cents sounds a bit low if it's children's dollars.

Do you have a range of what the number should be and some of the recommendations for things that we should be doing?

MS. POST: Yeah, I'm probably closer to you, Councilman, in that I'm not sure what it should be, but I know it shouldn't be 10 cents on every dollar.

One of the things that I am particularly encouraged about is the manner in which our various City agencies are responding to both this Children's Budget and Report Card. I think when we report out next year, we will see a different picture, and I know that I don't want to steal Commissioner Martinez's thunder, but she'll be talking extensively about the tremendous investment the Department of Human Services has made in prevention services.

Some of our challenge relates to the fact that most of the money that comes into the City of Philadelphia happens to be categorical dollars that are traditionally triggered by aberrant behaviors or other problems that families experience.

What we've worked hard to do with our various departments is to try to identify those dollars that are discretionary so that they can be moved into the area of prevention, early-childhood development, after-school, youth development, the David Olds model, home visitation, nursing that you heard testimony about and other parenting programs.

I think we also have to aggressively advocate for what I consider on a statewide level to be some budget-neutral waivers. For example, if you look at the Department of Human Services and its needs-based budget, if it happens to be really, really efficient and not expend all of the dollars allocated by the State, it then loses those dollars, they goes back to the State, and the next year, the budget is smaller because the need is considered to be less.

I'd like to see a statewide system that has incentives for municipalities, that if they save money by diverting them from crisis intervention, that they can reinvest in prevention.

So part of what I talked about, I think, at the latter part of the testimony is the statewide coalition that's looking at how do we leverage more federal and state dollars and have a greater ability to be flexible in our spending patterns to be able to pool and divert funding.

COUNCILMAN NUTTER: Okay, let me ask this one last question; I know some of my other colleagues have questions.

With regard to the Beacons, is it correct that the State grant does not cover the entire cost of the Beacon schools? Is it 11 sites or 13 sites?

MS. POST: It's 11 right now.

COUNCILMAN NUTTER: Okay. Does the State grant cover the entire cost or is there a bit of a funding gap?

MS. POST: I'd like to get back to you on that. I think that the money that we have dedicated this year, which is about $325,000 per site, is enough for the initial development of the program. There is an expectation that we're not paying 100 percent for all of the services.

Part of the goal of the Beacon is to reach out to other community-based organizations as well as public agencies to collocate systems and to have referral systems because it can't be a one-stop shop where we fully fund, and there might be some redundancies with other community-based organizations.

We did look for those agencies that had capacity to do additional fund-raising as well because we know that in order to achieve the quality of services and the diversity of services that we want within the Beacons, there may be a need to leverage additional not just only resources but dollars as well to expand and enhance.

COUNCILMAN NUTTER: Okay, thank you.

Madam President, I'll come back. Thank you.

COUNCIL PRESIDENT VERNA: You're welcome.

The Chair recognizes Councilman Kenney.

COUNCILMAN KENNEY: Thank you, Madam Chair.

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Good afternoon and thank you for your testimony.

When was the decision made to use City employees from the Rec. Department to come over to work with Safe and Sound, and how was that process conducted, and what was the rationale behind it? And it's for either witness.

MS. POST: Well, I'm going to speak to that very briefly, and then I think Miss Richman, who was on the Mayor's Children's Cabinet, should address that issue.

The individuals working with Philadelphia Safe and Sound have always been City employees, so I don't think that there was a decision after we received the grant to detail people to Safe and Sound; we were always City employees funded through the Recreation Department. So I'm probably less clear on the precise decision.

If you're asking, when was the decision so convert Safe and Sound from an exclusively governmental operation to a 501(c)(3) organization? that occurred in 1999 under the previous administration. And, again, that was a recommendation from the then-Mayor's Cabinet and the

Robert Wood Johnson fellows as well as the National Program Office.

At that point in time, it did not appear to make a lot of sense to discontinue the employment of those people who had been dedicated to the work because of that conversion to a nonprofit organization.

Miss Richman, would you like to add anything?

MANAGING DIRECTOR RICHMAN: Originally when Robert Wood Johnson released this RFP in early 1996, the City determined we were going to respond to it. There was a few opportunities that can go after a ten-year foundation grant. There were two years of planning and two four-year pieces of this grant.

Because it was described as a "Health and Safety Grant," the Health Department was the lead agency on applying for the grant, along with the Department of Human Services and the Department of Recreation. At that point, the three commissioners -- former Commissioner Michael DiBardineras (ph) and former Commissioner Joan Reeves and myself -- determined that we wanted to do a model that put the grant in the City as opposed to outside of the City, and we would use the Recreation Department for that vehicle to staff the grant.

For the first few years of the Planning Grant, we proceeded in that way, and the Recreation Department employees became the essence of that grant, and the early leaders were high staff members within the Department of Recreation.

Once we received the grant -- and we received the full grant after the two years of planning -- and we reviewed it, we determined that as this was progressing -- and the things we wanted it to do and the primary point in that were the violence initiative and the after-school initiatives -- we began to think whether or not it would be better to have that grant a private nonprofit. And that's the direction we moved into at that point in time.

Thus, in about 1999, early 1999, we began to move towards creating a private nonprofit, but we wanted to maintain the continuity. The City employees that had been part of it we wanted to continue to be part of it. And hence, by the time Naomi Post-Street had been hired, those decisions had already been made.

COUNCILMAN KENNEY: So that I understand the mechanics of it, the $549,000 for City employees is directly from the City; they just pay the employees directly? Or is the money given to Safe and Sound, and then they pay the employees? The City cuts a check and --

MS. POST: I'll defer to Ellen Steiker on this, but my understanding is that the Robert Wood Johnson Grant comes to the City of Philadelphia. There is then an allocation to the Department of Recreation to from that grant to cover what we call our "Class 100 funds." The balance of the Robert Wood Johnson Grant would then flow to the Department of Human Services, which we then invoice for our expenses.

COUNCILMAN KENNEY: Okay, so it's -- they hold the money and it's almost like a spend-down type of a situation.

MS. POST: That's correct.

COUNCILMAN KENNEY: What do the other four cities do, Baltimore, Detroit, Oakland and Richmond? What is the construct of their situation; are they using city employees? does the money flow through their department of human services or recreation? What exactly do they do?

MS. POST: We are probably the only truly government model of the five cities and, quite frankly, the Foundation wanted to test different kinds of models to see if one might be more effective than another in achieving the mission of improving the health and safety of kids. So each is structured differently.

If we look at Richmond, which is functioning under the auspices of the Chamber of Commerce, those employees are employees of the Chamber of Commerce, not really Youth Matters, although they have begun to identify themselves as Youth Matter employees, and Youth Matter has a 501(c)(3) and they are connected to and closely coordinate and respond to the Chamber.

I'm less clear about the structure of the others, but if you want that information, I can get that for you.

COUNCILMAN KENNEY: At your leisure, I'd like to just take a look at that.

MS. POST: Certainly.

COUNCILMAN KENNEY: Is there any plan, or are there any plans, to expand the complement of City employees associated with Safe and Sound in the near future so we're looking at six and probably no more than six?

MS. POST: That's correct, sir.

COUNCILMAN KENNEY: Page 2 of the testimony indicates that in conjunction with fiscal matters, the Safe and Sound organization reports to the City, to a board of directors, and the National Program Office, and that you secure independent audits and have also been audited by PriceWaterhouse in connection with a randomized Foundation audit.

Does Safe and Sound pay for those audits to be conducted?

MS. POST: We pay for our independent audit; we did not pay for the PriceWaterhouse, as we were selected randomly by the Foundation, so the Foundation paid for that.

COUNCILMAN KENNEY: Is there a copy of the audit available?

MS. POST: I have the audit for 2000 that I can make available to you; our 2001 audit is not yet available, but we can send it to you when it is completed.

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COUNCILMAN KENNEY: What is the cost of that audit, just in general terms?
MS. POST: Our accounting services -- and it probably would be a bit broader than the audit our --
(Addressing colleague) Denise, correct me if I'm wrong, is it $14,000 a year?
COUNCILMAN KENNEY: The question I have is, would it be more fiscally better for Safe and Sound if they allowed, for example, the City Controller to audit, which would save the organization money? And would the City Controller's audit be an acceptable document for Foundation purposes and other types of things?
(Witness comes forward.)
MS. STEIKER: This is Ellen Steiker.
In general, Safe and Sound is a 501(c)(3), and each 501(c)(3) has to have their own independent audit. If the City Controller wants to audit, they also have the prerogative to do so.
COUNCILMAN KENNEY: But wouldn't the City Controller's audit eliminate the need for a privately-secured audit?
MS. STEIKER: No, it would not.

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COUNCILMAN KENNEY: Have we pursued that, or do we know for sure if -- have we asked whether or not that would be acceptable?

MS. STEIKER: There are certain requirements, you know, reporting requirements, to the State, for example, and to grant funders that are not normally done by the City Controller.

COUNCILMAN KENNEY: Okay.

There was a -- the other question I have is on funding. Of the $410,000 that does not come from the Foundation, what are the sources of those dollars?

MS. STEIKER: The sources are the Department of Human Services for a projected $370,000; and, again, that's a combination of various grant-funded sources that are in the General Fund, where most of DHS's funding is located.

And beyond that there's about 40,000 that will come through HealthChoices from CBH to fund one physician who has some association with that.

COUNCILMAN KENNEY: Okay. Does Safe and Sound act in any way as a contractor for other agencies within the City? Do they have any contracts with the Health Department or with any other City-related agency? Is there a relationship the other way, where Safe and Sound is a contractor for those?

MS. POST: No, no.

COUNCILMAN KENNEY: Okay. I heard on the radio myself some of the advertisements for Safe and Sound, and I believe they have conducted a pretty extensive advertising campaign. Could you give me an idea as to what the cost of that campaign was and what it was supposed to accomplish and how we quantify the results of the ad campaign?

MS. POST: I believe you're talking about the radio ad campaign that was launched the latter part of this previous calendar year.

COUNCILMAN KENNEY: Or any other types of advertising that may have been done.

MS. POST: I can get those costs to you, Councilman. You're talking about from our inception in 1998 to date?

COUNCILMAN KENNEY: Mm-hmm.

MS. POST: I can get those costs for you.

I think last year, we spent about 40 to $50,000 on radio advertisements to elevate really the visibility of Philadelphia Safe and Sound, again, in anticipation of having to raise private dollars to supplement our foundation and governmental grants over the next four years.

We are kicking off this year a campaign to raise approximately $4 million to fill the anticipated gap as that Foundation funding decreases. And we had conducted a feasibility study, the net result of which was, as corporations and foundations heard about our work, they were inclined to be supportive, but that our visibility was so tremendously low, that we needed to make an effort to reach that population of people who control those foundation and corporate dollars. Thus, most of the concentration of those ads happen to be where business people listen -- KYW News and others.

COUNCILMAN KENNEY: I heard it on WIP, so that says something about my listening habits, I guess.

MS. POST: There you go.

COUNCILMAN KENNEY: The $1.4 million in contractual spending, could you give us an idea as to what types of services are contracted for by Safe and Sound with those dollars?

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MS. POST: Certainly. I can give you a more extensive list, but generally speaking, that includes costs for evaluation, that includes the costs for developing and producing Report Cards and Children's Budgets.

That includes our medical consultant, who's a physician we share with Temple, who works on our weapon-related intentional surveillance system work and our substance-abuse incidents and prevalence study.

It relates to the consultants and technical assistants for the City's integrated data initiative.

It relates to costs associated with building some capacity for the Children's Investment Strategy.

It involves the cost of a part-time consultant to help us refine our mapping capabilities.

It relates to technical assistance and IT assistance internally as well.

But we can get you a more comprehensive breakdown.

COUNCILMAN KENNEY: Thank you.

Are there any plans at this date to allow Safe and Sound to be used as a repository or a recipient of any of the funds negotiated as a result of the new stadium development with the Phillies and Eagles as part of the Children's Fund?

MS. POST: No, sir. I believe that those funds are restricted and will be managed by the Philadelphia Foundation

COUNCILMAN KENNEY: Okay, so all of that money is going directly to them?

MS. POST: That's correct.

COUNCILMAN KENNEY: Okay. Does Safe and Sound receive any TANF money or access to TANF money? There was mention of TANF in the testimony, and my question is two-part: Is that, in fact, the case? and, two, are there restrictions on the use of TANF that are supposedly going directly to families?

MS. POST: Can I answer that in two parts? The reference in the testimony that I think you're alluding to relates to our technical assistance and support to the City as it crafted its needs-based budget to ask for additional TANF money to support the launching of the David Olds model as well as its CIS.

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I'll defer to Ellen in terms support and special grants that come to Safe and Sound.

COUNCILMAN KENNEY: And the second part of my questions is, are there any restrictions on TANF which requires it go directly to families as opposed to this kind of planning process?

MS. STEIKER: There are restrictions on TANF funds. They need to go to provide direct services and they normally go to contract agencies who have to keep track by individuals to make sure not only that they're going to direct services, but that the individuals who are receiving them meet specific guidelines.

And so none of the TANF dollars are going to administrative functions; they're going to direct services and the oversight of those direct services by United Way and PHMC. They're not going through Safe and Sound.

COUNCILMAN KENNEY: Okay, thank you.

Just one final thing, and I know my time's coming to an end for this round.

I want to thank Safe and Sound. I've been involved with a youth athletic association in South Philadelphia for about 35 years now, and recently, the Mayor attended a fund-raising event and presented a $150,000 grant check from Safe and Sound, and it's a wonderful program that deals with after-school programs for children and athletic opportunities and summer camp and some of good things that, you know, this organization has been trying to promote and advise City agencies on.

The grant was in the amount of $150,000, and I'm just curious as to what process there is for other similar organizations within the City who do that kind of work to access that kind of money and apply for a similar-size grant or grants similar to or less than that.

MS. POST: I certainly would like to take credit for that because you've been so gracious in your expression of appreciation, but that was not Philadelphia Safe and Sound money, and I don't think I'm clear about what you're speaking about.

Safe and Sound has not given $150,000 to any organization in the City of Philadelphia for the purposes you've just described. However --

COUNCILMAN KENNEY: Well, then I apologize because at the event that I attended, there was a large ceremonial check that had the

Mayor's signature and yours and "Safe and Sound" at the top of the check, so if I'm mistaken, I apologize.

MS. POST: That probably was more symbolic. I am certain -- although I can stand corrected by Miss Richman -- that that's probably part of the Children's Investment Strategy in which this city invested close to $6 million in after-school programs throughout the City of Philadelphia, and that organization was probably one of many recipients of dollars to support those kinds of services.

There was a request for proposals that went out that we could share with you as well as criteria that a team of people used to select the recipients for that first round of expansion. I didn't personally participate on that team, but I can get to you the criteria for selection as well as the full list, as I promised to Councilman Nutter, of all agencies, which will include that one too, I'm sure, that received funding under that $6 million.

COUNCILMAN KENNEY: Well, regardless of how it happened, whoever's responsible I'd like to thank 'cause it is a wonderful program and it's doing a lot of work -- good work for kids in South Philly, and if more can be coming for other organizations, that would be appreciated.

That's my final question for this.

COUNCIL PRESIDENT VERNA: Thank you.

The Chair recognizes Councilman Clarke.

COUNCILMAN CLARKE: Thank you, Madam Chair.

Good afternoon.

MS. POST: Good afternoon.

COUNCILMAN CLARKE: I actually wanted to ask a question and kind of give you some kudos to the organization on the organizing side. I actually have a lady -- Cynthia Vance is her name?

MS. POST: I know who you mean.

COUNCILMAN CLARKE: All right, I had to mention her name.

MS. POST: See, that's an age thing, Councilman. I can't remember Cynthia's last name either.

COUNCILMAN CLARKE: She's actually done a good job in organizing up in the lower triangle part of my district.

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MS. POST: That's great.

COUNCILMAN CLARKE: And to be honest with you, I didn't know that Safe and Sound did that type of work in terms of community-organizing and pulling together various entities throughout the community, and they were actually instrumental in pulling a project -- putting it back on the table, one that was, you know, when I was a staff person for the former Council President that we had promised on one of those campaign trails, and it kind of got lost in the shuffle, and it was put back on the front burner, and I think we're going to actually end up getting it done.

Can you talk to me about the organizing aspect of Safe and Sound in communities? And they weren't specifically targeted to children and youth; it was more of a community-type of effort.

MS. POST: Sure, I'll speak about that, but there has been a transition in the community-organizing for a variety of reasons.

We have had have in our employ in the past eight community organizers that worked in different neighborhoods to create agendas for community, and they did that door-to-door solicitation to help identify leadership within the community as well as areas of need and priorities for that particular community, and the range of their activities could be from helping to establish a PAL Center for after school, to building playgrounds in the area, to doing lot and trash cleanup, to creating a more extensive plan for how particular properties or services were to be deployed. And they served as a bridge between community and government for those particular purposes.

And we still are very closely connected to the community organizers and we meet with them frequently and we coordinate with them, but they have transferred over to the Mayor's Office of Community Services.

COUNCILMAN CLARKE: Okay.

MS. POST: One of the reasons for that transfer was a desire within this city to ensure a community voice within the Neighborhood Transformation Initiative, and it was believed that the highly-skilled community organizers of Safe and Sound could connect to and support that particular initiative.

We still engage them; in particular, they're going to be involved in the Beacon process because the Beacons have to do a lot of community outreach to tie the energies of different agencies together to avoid duplication and replication and also need to do extensive outreach to attract participants in the program.

So we still are closely connected, we still meet with them regularly, we still have one common staff person that goes back and forth between both agencies, but they've been detailed to MOCS for the purpose of NTI.

COUNCILMAN CLARKE: Thank you, did a good job. Thank you.

Thank you, Madam Chair.

MR. MCPHERSON: Councilwoman Brown.

COUNCILWOMAN REYNOLDS BROWN: Thank you very much.

I do have one point of information in response to my colleague Councilman Kenney's question that I just shared with him and that I would like to put on the record.

The bond counsel for the stadiums made it exceedingly clear over six months that all of those dollars collected as a result of the stadium deal in were not to be in any way tied to the City or any entity of the City, and consequently, we, in our homework, learned that the Philadelphia Foundation was appropriate to serving as the receiver of those dollars.

With regards to the Beacon schools, you mentioned that it is a goal with Beacon schools that they be community anchored and have a partnership with the surrounding community, but is that not also a criteria that in order to be selected as a Beacon school, there has to be a connect, that the school has to have a connect with the immediate environment -- immediate community.

MS. POST: That's correct. The lead agency that was selected to operate the Beacon in a particular school had to demonstrate a closeness to the community and awareness of community need. And, again, I can share with you the particular criteria on how that's worded.

But our expectation was that that organization would be familiar with, sensitive to, and connected to the community in which it was going to be venued.

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COUNCILWOMAN REYNOLDS BROWN: Did the mapping also apply in the selection of the Beacon schools?

MS. POST: I'm sorry, Councilwoman, I didn't hear you.

COUNCILWOMAN REYNOLDS BROWN: Did the mapping also apply in --

MS. POST: Oh, yes. There was a number of criteria that were used, and we can share them with you, but certainly the mapping helped the City to determine where it was going to prioritize; not that the investment exclusively in those neighborhoods, but that priority might be given to particular neighborhoods based on the mapping.

And then there were a number of other factors as well that the City took into consideration in making its decisions.

COUNCILWOMAN BROWN: Thank you very much.

Thank you, Mr. Chairman.

MR. MCPHERSON: Councilman DiCicco.

COUNCILMAN DICICCO: Thank you, Mr. Chairman. Maybe you'll take a cut in pay.

COUNCILMAN CLARKE: (Inaudible, off-mic.)

COUNCILMAN DICICCO: A big cut, as

Councilman Clarke said, but then you get the title.

(Laughter.)

COUNCILMAN DICICCO: Good afternoon.

MS. POST: Good afternoon, Councilman.

COUNCILMAN DICICCO: I just want to follow up briefly on Councilman Kenney's question concerning the $150,000 grant that was issued to the EOM community in South Philadelphia in my district. You said that it was from where; what was that organization? Or did the Managing Director say where it was from?

MANAGING DIRECTOR RICHMAN: This is Estelle Richman.

Let me clarify. Those were after-school grants that went to any number of agencies. This was not the highest grant that we gained for after-school agencies. We gave them -- I believe there were 100 agencies that received these after-school grants, and they were all based on demographics that were set by Social Services at that point on what had to happen to both qualify for those grants and receive them.

But there were 100 agencies that received grants anywhere from about 15,000 to

170,000.

COUNCILMAN DICICCO: And I do appreciate the EOM getting that money, they do a great job.

Is there any interaction with the District Councilperson as to the applications and how the District Councilperson would like to see some of that money distributed? because EOM is one of those agencies that does have an ability to raise money, where other neighborhood groups don't have the same ability. And when we're dealing with a limited number of monies, I was wondering if there's an opportunity for the District Councilperson to be involved in at least the discussion.

I mean, we'd like to see an equal amount all over the City and the highest amount possible, but we understand we have a limited amount of funds.

MANAGING DIRECTOR RICHMAN: I will refer this back to Naomi in a second.

We do do a request for proposals; the proposals are guided by data that we've collected around the crime rate in each one of the areas. The proposal did go to each Councilperson, all of you, and these proposals were released in the summer to be reviewed.

I did personally review the listing of how people scored, whether it was a good proposal, how much they had requested, did they meet the guidelines of the proposal in terms of the crime rate that they picked to choose to activate. So there are many of these.

They were not distributed just, you know, in a geographic as much as it was what areas of the City have the highest crime rate that these after-school programs are meant to resolve. So that was the basis that the decisions were recommended to me that we made those decisions.

But RFPs in general, we really hope to make sure that the Council offices have them so that if people call you or ask you about them, that you have a copy of these grants.

Naomi?

MS. POST: I don't have anything further to add. I mean, I think we always want to have input and dialogue with the Councilpeople. I don't think that these decisions are guided by that input, although we certainly are receptive to it. There was objective criteria, and then there was a committee of people, some of whom were City staff,

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some of whom were employees from the private sector, who reviewed a host of these applications based on a scoring system. And then when those scores were aggregated, certain recommendations were made to the Managing Director's Office based on how agencies scored.

The only thing I'd like to amend is, although we targeted neighborhoods based on reports of abuse and neglect and teen parents and juvenile (indiscernible) petitions and homicides and crime and narcotics and other risk factors, we also looked at census date for concentrations of numbers of school-aged kids and also didn't use exclusively the highest-risk neighborhoods because the concept of the Children's Investment Strategy is that after-school and youth development will become universally available.

And although we may prioritize certain neighborhoods, there will be new rounds and further expansion over this 3 to 5 years until we can reach at least 100,000 children.

COUNCILMAN DICICCO: Thank you. I would agree that -- not having seen the list, and I'm not suggesting that it wasn't sent to me; it quite possibly was, and I apologize if it was and I'm not out of turn here asking this question.

But I would agree that -- I would have to assume, I should say, that other community centers, community groups, if within my district made application as well, and South Philadelphia is where I come from and I don't live very far based from the EOM, but based on my six and a half years in Council, I would say that there are some other neighborhoods, especially to the north, which probably, in my opinion, would better qualify for a grant of that size, if there are no other grants given within my district.

So, again, without having that data in front of me, I'm just kind of speaking off the top of my head, EOM, which is between the 3rd and 4th Police District, are probably the least problematic of the communities within the district that I currently represent.

So going forward, again, I'm not suggesting that I should pick the sites, but I would like to be a party to that because, you know, as a District Councilperson, we do have a lot of interaction with these groups, and I kind of know which groups are able to raise money as opposed to groups that have a difficult time raising funds as well.

MS. POST: We welcome your participation.

COUNCILMAN DICICCO: Thank you.

Thank you, Madam Chair.

COUNCIL PRESIDENT VERNA: Thank you.

The Chair recognizes Councilman Nutter

COUNCILMAN NUTTER: Thank you, Madam Chair, and let me say the Chair has improved dramatically since Mr. McPherson was making the calls.

COUNCILMAN MARIANO: (Inaudible, off-mic.)

COUNCILMAN NUTTER: I'll be glad to yield to Councilman Mariano. This is my second turn and he came in subsequent to that. That's fine.

COUNCIL PRESIDENT VERNA: Since the Councilman is willing to yield, the Chair recognizes Councilman Mariano.

COUNCILMAN MARIANO: Thank you, Madam President. Thank you, Councilman Nutter. I just thought it was a round and another round.

First of all, let me thank you for Safe

and Sound. The first time I ever ran into Safe and Sound was probably in '96, up at (indiscernible) Marine School

MS. POST: Theresa Dimitri and --

COUNCILMAN MARIANO: Right.

MS. POST: Yes, a number of us were there.

COUNCILMAN MARIANO: It was a very economically diverse area, and it's right in the middle of the 25th Police District, and probably if they could have picked a place to start Safe and Sound in my district, this would be perfect, because of everything Safe and Sound does -- and I'm familiar with a lot of it strictly because it seems to be the test pattern that Robert Wood Johnson was looking for when they got their Safe and Sound was the 25th Police District, and I was confused of both, but it's the 25th.

So after, you know, the weapons, the WRISS weapons-related injuries surveillance system and the Safe Corridor thing that we didn't mention, when the (indiscernible) was built, it was in a area that needed a public school, and it needed a public school, like, very badly because of the economic status of the neighborhood, and where a lot of Catholic schools were leaving the area, the public schools were the Beacon, you know, and I hate to use that word "Beacon" 'cause you're using that, but it was a place where you probably wouldn't put a public school, 'cause it was a industrial area.

And when we put a public school there, it became, Well, now we have a public school here, now there's all these other problems that we deal with putting this public school in a traditionally industrial area, but the kids live there, and the schools have to go where the bases where the kids are, so we had kids getting home from school and going through corners that were major drug corners. That was my first time I came in contact with Safe and Sound, so in my mind, I thought, Well, that's what Safe and Sound does. They do a lot of other things.

Three weeks ago, we did the Teen Center up at Rivera at Fifth And Allegheny. Now, they picked Rivera for probably the same reasons that they picked (indiscernible) because of the same economic area, the same conditions, older kids. You notice at (indiscernible), we have a grade school, now what do we do with these children when they're out of grade school and high school, after high school? You know, they're still using Marin (ph) to go from 2:30 or 3:30 when school closes to get to 5:30, 6:30, when mom and dad come home from work or the caretaker's there, which works good.

But now, the Teen Center, now, I didn't know a lot about the Teen Center. I went up with Councilwoman Blackwell basically because the next Teen Center's in her district, and she was sort of spying on 'em to see how it was going, it was probably a good case for her to spy on. I was amazed 'cause I wasn't involved. I mean, I knew when it was happening, I was happy that they picked Rivera because Rivera has a PAL Center, and it's centrally located for what we need.

But the Teen Center is a great thing because the kids actually run the Teen Center, and any other District Councilpeople here that aren't aware of it, I invite everyone to come up to Rivera to see it because the kids run everything: They're responsible for the money, they're responsible for the hours, they're responsible for the management, they're responsible for what they want to do with the program, the actual physical plant, which takes the whole gamut.

I mean, we have an area that has a whole lot of problems. The little kids are being taken care of. Now, the older kids, who we tend to forget. Now, I live in the next census tract up in Juniata Park, and one of the main problems in Juniata Park right now is it's not quite the same economic status as Marin and Rivera is, but it's not far away right now. So as this changes, we're going to find out that it spreads out. I see some of the kids from Juniata are having the problems 'cause they're writing into the local newspaper, and a Teen Center would be perfect. Now, I'm not asking for another Teen Center, but maybe some of them could just go down there, but regardless.

Now, the other things that I think you do and I know you do is the Olds model for the health -- I guess it's a nurse that does visiting.

MS. POST: It's a great program, it's a great program.

COUNCILMAN MARIANO: And, again, the same economic status, the same growth area, where kids are -- you know, it's boom and the kids are there.

Some of these young women wouldn't get a visit, you know, and then they go through three four months, and the formative months of pregnancy without getting a visit from a doctor, you know, just because of the way it is, and nobody knows where to go.

This is a good program and, you know, if you want to give 150, $250,000 for my district, feel free to do it, whether it comes from you or from the Managing Director's Office or from anybody that wants to do it, we're looking on moving up and getting these things done.

MS. POST: We'll certainly talk to both commissioners about expansion in that area. And, again, they did use data. It's a phenomenal program for which we did a lot of research. It's been around for over 20 years, highly researched, extremely effective, so we'd like to see it expanded as well.

COUNCILMAN MARIANO: I appreciate it.

MANAGING DIRECTOR RICHMAN: Councilman, let me just clarify where I believe sometimes people may misunderstand.

Safe and Sound -- the money from the City will not go to Safe and Sound for this program, they don't do the contracting with the other agencies. They've done the research, they've done the best practices, they've done all the behind activity that allows the Health Department to do the contracts

COUNCILMAN MARIANO: Or the Rec. Department to do the contracts 'cause it seems to --

MANAGING DIRECTOR RICHMAN: Or the Rec. Department to do the contracts for the Teen Centers. They're the people who go online, who do the research, who do all of the information-gathering so the departments can then do the contracts and the monitoring of these programs. They may help set the standards, they may help be a part of that brain trust, but they aren't the ones who receive or give out the money.

COUNCILMAN MARIANO: One of the main things that I wanted to mention -- this will be the last thing that I mention -- is that you spoke in here about the Integrated Data Management Project. Very many times we find out, especially in the departments that I deal with -- I mean, I deal with some departments more than others, but there are people receiving multiple services from the City of

Philadelphia, and a lot of it may be repeated. If this system does come on line, I don't know, but I'm sure some cost projections that possibly the Managing Director's Office has -- I see Alba nodding her head over there, so either I'm doing good or I'm right on that.

People go out, right? I mean, you got the same people doing the same things, and it's the City footing the bill, so maybe there could be some cost effectiveness there that could possibly --

MS. POST: I think it will probably mean better service as well as cost-effectiveness, and this has been a mission of our now-Managing Director for some time, so I'm pleased to be a part of that project in advancing in and providing technical assistance.

COUNCILMAN MARIANO: Thank you very much.

Thank you, Councilman Nutter.

That's all I have.

COUNCIL PRESIDENT VERNA: Councilman Nutter, would you mind yielding to Councilman Ortiz?

COUNCILMAN NUTTER: Sure. I'm the yield master today.

COUNCILMAN ORTIZ: Good morning -- good

afternoon.

MS. POST: Good afternoon.

COUNCILMAN ORTIZ: It's going to be a long day today. Good afternoon.

Estelle Richman, I'm glad you clarified that because of the questions that I wanted to ask was about Safe and Sound involved in program implementation, and Estelle just made clear that you do research and data-gathering and then the different departments contract out and monitor.

MS. POST: That's correct. We might do some evaluation of some projects.

For example, the Behavioral Health System launched the Multi-Systemic therapeutic Intervention Program, which is a program, again, a blueprint program based on research that intervenes with young people in the juvenile justice system who have emotional- disturbance and mental-health disorders who have a propensity to be violent, and it's a extremely intensive community-based program that provides services not just to the individual client but to those people with whom that client comes into contact: Family and school and other people.

We provide evaluation for that particular project, again, in connection with the Teen Centers. We are the ones who develop the evaluative forms and will help the Recreation Department understand whether those centers are having the intended impact.

But we don't do the actual program implementation for any of the services that the City offers.

COUNCILMAN ORTIZ: Good, we want to get that clear on the record.

We currently have around 46 young men and women, young kids in the after-school program, but the actual need in terms of our after-school programs is much greater than that. And the numbers of students and school-aged kids that are not in a after-school program, what is their total number currently, 46, 48,000 or more?

MS. POST: Our number is based on the research that we did a little over two years ago for the City of Philadelphia, again, using resources from Temple University, St. Joe's, and the University of Pennsylvania.

Census data as well as resource and mapping information suggest very strongly that this city needs to research approximately 100,000 more children in after-school and youth development, and while we're encouraged by the degree to which the City has invested this year, I think it's a phenomenal investment of over $12 million. We still have a long way to go.

The other thing I would keep in mind is although the official Children's Investment Strategy might suggest 12 million, when Commissioner Martinez comes up and testifies, I'm sure she'll be sharing with us some of the prevention and programming in the non-school hours that the new Prevention Unit is advancing as well.

But we still have tremendous challenge. It's a multi-year strategy. Certainly we need the dollars to advance it. But, again, you need the technical assistance, you needed training, and you need the monitoring to ensure that that investment is reaping what you hope to reap at the end of the day.

COUNCILMAN ORTIZ: We have projected 11 Beacon Centers. Have those 11 areas been chosen as of this time?

MS. POST: Yes, and I can share that list with you, Councilman. And the Beacons are scheduled to open on April 1st; they've not yet begun to provide service.

The one caveat is with a new School District administration, we have to renegotiate a facility-use agreement with that district, and we have been meeting with them and hope to bring closure to that relatively soon so that we can meet that April 1st target.

COUNCILMAN ORTIZ: Is the agreement just going to be for the use of the facility, or is there going to be actual incorporating of school personnel into the Beacon Program?

MS. POST: The lead agency has the option of hiring and incorporating school personnel into the Beacon Program, and the Beacons don't just start operating at 3 o'clock in the afternoon; they have to tie closely to the academic day and the needs of that particular school as well as the community so it becomes kind of seamless in terms of the services, interventions and enhancements and activities offered to that child and his or her family.

COUNCILMAN ORTIZ: But you have budgeted, you said, $325,000 initially for every Beacon, and how is that budget going to break down? And it's going to be almost --

MS. POST: I can send you a complete --

COUNCILMAN ORTIZ: How many services are we going to be able to provide, and maybe in terms of the school system and the school board or whatever they are called.

MS. POST: Well, they certainly will benefit from the Beacons since the research indicates that Beacons and these kinds of programs improve academic achievement, so we hope that they'll be full partners at the table.

I can send you a description of the kinds of services offered at the Beacons, and again, they vary ever so slightly, depending on community in which they're venued.

I do know that our goal for at least the after-school youth development component for the Beacons, which is only one of the many services, is that each Beacon be serving by the end of June approximately 100 young people, and that by the end of December this year, that they be serving a minimum of 300 children.

The goal for what we call "full development of the Beacons," because, again, they have to evolve over time, is that they serve annually 1,000 children and families.

COUNCILMAN ORTIZ: How do you project the costs as they increase in terms of students that are served? And how is the money going to be projected and found in order to provide these services?

MS. POST: I'm not sure I understand the question. Are you talking about the cost per child and how we're going to ensure sustainability?

COUNCILMAN ORTIZ: As more children come into it, and you have initial budgeting of 325, but as the program grows and services more students, there's obviously going to be an incremental aspect in terms of the cost, and how are we projecting budgeting for that?

And whether -- well, you said that the contracting agency will work with the school that they're going to be looking to, but shouldn't that be a part of the overall negotiation as to what contribution the school system should be contributing to this overall program?

MS. POST: We are, as a city, negotiating

School District so that individual Beacons and after-school programs do not have to engage the School District, and we will come up with an agreement between the City of Philadelphia and the School District.

COUNCILMAN ORTIZ: Is that part of the overall agreement that we're working on?

MS. POST: Right, right, it is part of the overall agreement.

COUNCILMAN ORTIZ: It is?

MS. POST: Well, in terms of staffing, I mean, when you occupy a school building, there are certain staff that may need to be present, whether it's security staff or building, maintenance staff or building engineers, and those would be School District employees.

So to the extent what that they need to stay beyond the typical 5 o'clock hour, that negotiation is occurring between the City of Philadelphia and the School District to reach an agreement, and individual providers of service are not obligated to engage in that negotiation.

COUNCILMAN ORTIZ: Right.

MS. POST: In terms of the cost of the

Beacons, this first year, the City dedicated -- and again, I could be corrected, Ellen -- $325,000, with an expectation that that budget per Beacon would grow to $450,000 annually next year, when they are fully operational. So this was a partial-funding year as they build up their services.

COUNCILMAN ORTIZ: I'll come back in a second, ma'am.

COUNCIL PRESIDENT VERNA: Thank you.

The Chair recognizes Councilwoman Miller. Councilman Miller, are you ready?

COUNCILWOMAN MILLER: Yes. Thank you, Madam President.

Thank you, Councilman Nutter.

I guess what I want to say basically is that I think Safe and Sound is a really good program. I've enjoyed working with them. I think the people that's been working in my district have been a valuable part of things that we're trying to do.

Last week, we had a big community meeting in Nicetown and Cynthia Barnes was there, and Cynthia and I have met prior to the meeting, and we're doing a lot of organizing and we're trying to

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get funding for the (indiscernible) office that was there. Anytime you have a extra pair of hands to help you organize and deal with community problems, we welcome it.

I am concerned, though, about the Beacon Schools and who got the contract. Last week, I asked the Recreation Department if they would send a copy of the list. Commissioner Estelle and I -- I keep calling her "Commissioner."

Managing Director Estelle Richman and I had a discussion about the Beacon Schools in my district a few weeks ago, and I'm still not sure who actually got the contract, and I need more information regarding that.

And I think we're all sitting around here wishing for a Teen Center in our district 'cause last week, when the Recreation Commissioner described those centers, I mean, they sound like really great centers.

MANAGING DIRECTOR RICHMAN: Councilwoman, the list has been prepared and is just going through our process now to be able to be sent to the Council President, and you should have it in a few days.

COUNCILWOMAN MILLER: Okay, thank you.

So that's basically what I wanted to say. I would love to have a Teen Center, can't wait to find the information out about the Beacon Schools, and we have a Family Center, and I'm not sure whether we have a Youth Access Center, but anything you're putting together, we want it in the 8th district.

Thank you.

MS. POST: Thank you, Councilwoman.

COUNCIL PRESIDENT VERNA: Thank you.

The Chair recognizes Councilman Nutter

COUNCILMAN NUTTER: Madam Chair, I'm sure there must be someone else who wants me to yield to them at this moment.

(Laughter.)

COUNCILMAN NUTTER: I think I will yield to myself.

With regard to the various centers or facilities -- and I know I had asked the question earlier about the Teen Centers, and then on Page of the testimony, right in a row, there's Beacons, Family Centers, Teen Centers. I think I may have confused myself based on testimony the other day. Councilwoman Miller reminds me that what I asked about with Commissioner Richard, I think, was actually the RECS, which I think is a computer base. I thin it's RECS, which is an acronym for some of the schools that are going to have increased --

MS. POST: Technology.

COUNCILMAN NUTTER: -- technology and computerization, and this may be a part of the Digital Divide Program.

I wrote down in the budget book in Recreation that those were in -- I think these are the names of Rec Centers: Feltonville, Meyers, Lawn Crest, Simons, Gaithers, McVeigh, and Grays Ferry. Now that, I think, is not -- I mean, they're certainly not Beacons, I don't think Family Centers or Teen Centers; I think that those are the --

MS. POST: Youth Access Centers, probably.

MANAGING DIRECTOR RICHMAN: Youth access Centers.

COUNCILMAN NUTTER: Youth Access Centers.

We've got a lot of stuff.

MANAGING DIRECTOR RICHMAN: That's correct. But those will be on your mapping also.

COUNCILMAN NUTTER: Okay, all right.

Those are the Youth Access Centers, which are different than Teen Centers,

MS. POST: Yes, that's correct.

COUNCILMAN NUTTER: Which, I think, there are actually only two Teen Centers; is that right/

MANAGING DIRECTOR RICHMAN: That's correct.

MS. POST: That's correct.

COUNCILMAN NUTTER: Okay, and they are...?

MS. POST: At rivera and McVeigh at this point in time

COUNCILMAN NUTTER: Rivera?

MS. POST: Yes, which I think is the 5th.

COUNCILMAN NUTTER: And McVeigh, which -- McVeigh is also a Youth Access Center, okay.

MS. POST: I'd like to just mention about the Teen Centers. They were developed in response to a request from acting Commissioner Johnson. As the Youth Violence Reduction Project achieved a level of success in the 24th and 25t Police District, he challenged us to try to create a model that might entice older youth who are not inclined to go to the typical after-school programs to come to a program and participate, after which we might be able to connect them to services to assist them in getting jobs or back involved in schools.

The Teen Centers were that concept based on research, and I think the Recreation Department is doing a phenomenal job in moving that forward. We had hoped to expand the Teen Centers next year and, in fact, Safe and Sound has already secured some federal funding to build two more Teen Centers -- not build, but have the Recreation Department implement two more Teen Centers next year. And, of course, the Police Department would like us to do that in conjunction with the expansion of the Youth Violence Reduction Project because works well in tandem.

I certainly agree that we need more resources for kids for programming in non-school hours, whether it's the Youth Access Centers or the Beacon Centers or the after-schools or the Teen Centers; it shouldn't be just one model, but it should be universally available to all kids and families.

COUNCILMAN NUTTER: Right, yeah. I mean, if you're in a situation where you have a variety of these entities all in the same place, I mean, on the one hand, I think that's certainly great for the folks there; on the other hand, it's probably also indicative of a whole host of factors that lead to having those at that location, which may not necessarily be something you want to jump up and down about, because it's a sign of something else going on.

On the other hand, I would ask President Post and Managing Director Richman -- we've had this discussion internally, both of you have been around in a variety of capacities in different parts of the government for some time.

On the neighborhood revitalization kind of discussion -- I will not drag you through an NTI discussion, but similarly, there is -- in the expenditure of resources. There is the age-old debate over places that clearly, by every measurement and indicator, have enormous need, and we naturally put resources in those places.

And then the question is always left for everywhere else, where there might be signs of these kinds of problems, whether it's on the housing and neighborhood revitalization side, or now even in the children's services and opportunities that are available to children, whether they end up on the radar screen in the Report Card as produced by Safe and Sound or the Kids Calendar or anybody's measurement, we are always left to then try to figure out what goes on in other places.

And I would only ask, even as it's laid out in your testimony, the discussion we had earlier, Page 6 into Page 7, for the neighborhoods that are not necessarily showing all of the signs of distress, I would only ask for continued sensitivity and look-see at those other places, because they seem to fall in the prevention side of the discussion, but where you don't necessarily have the luxury of doing a lot of prevention, you deal with immediacy.

And so whether it's a Youth Access Center, and in the discussion I had with Commissioner Richard last week and the lack of one on the north side of Market and in the northwest part of the City, or when we went through this other list of the Beacons, of which I know there is one in the 4th District at 56th and Vine, Family Centers, the Teen Centers, all of these various opportunities, I think sometimes even if it's one, if you can't get three or four, if there is something that we've targeted different neighborhoods to have those things.

And I know we obviously have funding and budgetary constraints, but I would like to continue to advocate and push for as decisions are being made, that we at least try to figure out how we're trying to serve a variety of different youth and their needs, because just because they haven't gotten in trouble or have not decided to either kill somebody or put themselves in danger and end up being killed themselves, you know, in the realm of "there but for the grace of God," I mean, sometimes they wind up in that situation as well, and where there is nothing, it's not necessarily an indication that everything is all right.

MS. POST: I agree with you, certainly.

COUNCILMAN NUTTER: The federal money that was secured on Page 3, the $225,000, either how was that secured or what federal program were you able to access to get to the $225,000?

MS. POST: Those dollars come from the Juvenile Accountability Block Grant money that comes to the City of Philadelphia. I sit on the coordinating body for those dollars, as does John Delaney and Denise Clayton from my staff. We provided technical assistance to the Recreation Department to apply for those funds and sat in the body that helped to determine priorities within the City for what should be funded.

Those funds are specifically earmarked to reduce risk behaviors, so you'll see that they're typically used to support programs like the Youth Violence Reduction Project, the Teen Centers. Sometimes we use those funds for equipment purchase within the court system, scanning programs, fingerprint programs, but it's tied to juvenile justice and our need to create effective prevention programs to prevent further penetration into the system or to keep kids out of that system.

COUNCILMAN NUTTER: And what exactly is the Children's Investment Strategy? Is that --

MS. POST: That's an initiative of the Mayor's, and what it encompasses is this philosophy that children should have access to after-school and youth development, and the Mayor publicly announced a challenge, indicating that this City wanted to serve, at a minimum, 100,000 more children, and that this city should be looking to redirect or raise approximately $150 million.

There is an Oversight Committee for the Investment Strategy that is cochaired by the Mayor, by David L. Cohen, and by Janet Haas the William Penn Foundation, and there are a number of public and private folks that sit on that Oversight Committee, including Councilwoman Blondell Reynolds and Council President Anna Verna, who sit on that committee along with business and foundation people for oversight purposes.

COUNCILMAN NUTTER: And the $150 million is principally to be raised either privately, foundation, and some combination of directed or redistricted City dollars?

MS. POST: It would be from a variety of sources, yes.

COUNCILMAN NUTTER: Okay. If we ended up raising the $150 million, would we be able to serve 100,000 kids after school? I mean, where would we do all of this?

MS. POST: Capacity-building is yet another challenge, which is why we have a multi-year

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I would like to see -- and people can agree or disagree, and I know that there's that guiding body that directs us -- as many of these programs as possible in school buildings. I'd like to see as many of these programs connected to, you know, the academic achievement in the school day and seamless services for children universally.

And I know there are some pros and cons to locating in school buildings, and different kinds of programs need different kinds of venues, but to the extent that we can closely connect to the school, we know that research suggests that that's going to have the greatest impact on attendance, performance, and reduction of risk behaviors.

COUNCILMAN NUTTER: Philadelphia Safe and Sound -- there's obviously been a tremendous amount of discussion here this morning -- primarily is a data and research provider, or is it a service-provider, or is it a coordinator?

MS. POST: One thing I can clearly say is we're not a service-provider. Sometimes we are a coordinator, sometimes we do convene groups of people to achieve a particular goal. We certainly do a lot of data and research and fiscal analysis as well.

We are, essentially, what the City wants us to be. And I'll give you another for example.

When the Report Card came out and the Health Commissioner and the Commissioner of DHS were concerned about abuse and neglect, they can turn to Safe and Sound through the Division of Social Services and say that they want research done on what really works to reduce abuse and neglect and what kind of models have been tested with scientific rigor, and we're the people who go out and do that research and make that information available to them.

COUNCILMAN NUTTER: And what, if any, entity was available prior to -- I guess it was '97 or '96. I mean, who would they have turned to in the past to get that kind of information, or would someone have just been pulled from some project somewhere possibly?

MANAGING DIRECTOR RICHMAN: Speaking as a former commissioner, you really didn't have someone doing that, and you often did not take advantage of some of those opportunities that have the most

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cutting-edge programs, because you either pull someone from something else, change priorities, or redistrict the staff in such a way that in many times, you undermine it yourself from some of the things you were doing.

Just let me add that when Robert Wood Johnson put this RFP out. They were looking for systems change. They specifically did not want these grants funding programs and doing implementation because implementation of the programs very rarely, if ever, create systems change.

And their point of these and the longevity of these grants was to look at how do you begin to get a system to change so at the end of a grant, you've actually produced something different, that it can be sustained as opposed to a grant to a program, that when the money goes away, the program goes away.

COUNCILMAN NUTTER: Okay. A couple last questions.

I heard some of the discussion back and forth when the issue was raised about some grant opportunities. I don't necessarily need to get into all of the earlier discussion, but what I could not figure out from some of the back-and-forth was, where did the money actually come from? And there was reference made to RFPs that apparently come possibly to our offices.

Who is actually issuing an RFP, and who is cutting the check for whoever's getting grant dollars?

MS. POST: The actual RFPs, although they might have been drafted or supported or provided technical assistance in drafting by Safe and Sound, are issued by the Office of Children's Policy within the City of Philadelphia, which reports to the Division of Social Services in the Managing Director's Office.

That's a mouthful, Councilman.

COUNCILMAN NUTTER: I was still on O-F-F dot of...

MS. POST: Office of Children's Policy, which functions under the umbrella of the Division of Social Services, which is venued in the Managing Director's Office.

COUNCILMAN NUTTER: Okay. So the Office of Children's Policy issues RFPs to groups of organizations to get funding for whatever their thing is, and I think the part I didn't understand was, you're saying that the RFPs are sent to us if we knew of someone who may want to participate or something like that?

MS. POST: Yes. I can confirm with Mr. DeLorenzo, who's the Director of the Office of Children's Policy. My understanding is that he did send to all locally-elected officials copies of that RFP. There will be another series of RFPs for further expansion of both Beacons as well as after-school, and I will check with that office to ensure every Councilperson is on that list.

COUNCILMAN NUTTER: And by my asking the question, I'm not in any way indicating that I did not get it. I mean, you know that there's a fair amount of paper that flows through the government.

Is it possible to get a list of, I guess, the successful applicants or the successful recipients of any of the various grants and some kind of listing, either broken out by Council District, name of entity, and how much?

MS. POST: I can break it down by zip code. My machine doesn't sort by Council District, because that wasn't one of the fields, but if I break it down by zip code, you can probably locate those that are venued in your district.

COUNCILMAN NUTTER: Absolutely. I can do the zip code thing.

You made mention of eight community organizers, which sounds like an earlier activity by Safe and Sound, and then it sounded like they drifted over to MOCS; is that correct?

MS. POST: I probably wouldn't say "drifted over"; I might say they planfully relocated to MOCS, but they're still connected to Safe and Sound.

COUNCILMAN NUTTER: Okay. Well, I understand they didn't just not show up one day, but they were sent over, okay.

This is my last question. What is the Health and Safety Fund? Or is that not pertinent to this particular discussion?

MS. POST: It's not pertinent to my testimony, but Ellen Steiker might be able to respond to that question.

MANAGING DIRECTOR RICHMAN: The Health and Safety Fund is actually the dollars we use to support child-care entities that need to do usually something that is structural capital in nature, some repairs to their residence, some repairs to where they will have children located. So it's really bricks-and-mortar dollars that go to child-care applicants.

COUNCILMAN NUTTER: Okay, I'm sorry, Director. Obviously, that doesn't go with Safe and Sound, but who is that a part of, or what is that a part of, which department?

MANAGING DIRECTOR RICHMAN: It comes directly out of the Social Services Division. The contract themselves lie with the Health Department.

COUNCILMAN NUTTER: Oh, okay, I guess we'll have to bring Mr. Domzalski back. No, I'm only kidding.

Lastly, President Post, you indicated in an earlier discussion between us $325,000 for the Beacons as start-up, and that that was enough, but I thought I heard in a later discussion that when they're fully operational, I heard the figure of $450,000.

MS. POST: That's correct. I think for this partial year, when we don't anticipate the

Beacons being fully operational -- and, again, I'll stand corrected by Ellen from our Budget Office if I'm wrong.

The City allocated $325,000. It is expected that they will be fully operational in the next fiscal year, and the City has committed $425,000 per Beacon to support operations the operations then.

COUNCILMAN NUTTER: Okay, and the $25,000, I mean, that was what I was getting to in our earlier discussion, was there a gap. It sounds like there's a $25,000 gap between City funding at 425 and fully operational at 450?

MS. STEIKER: There is no gap, as a matter of fact. The question is, what goes directly to the Beacon School and what may be held back for technical assistance or for payments to the School District for use of facilities? But there is no funding gap for next year; in fact, there's room for expansion.

COUNCILMAN NUTTER: Okay. I'm just trying to understand the distinction between the 425 and the 450.

MS. POST: I misspoke. It's 450.

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COUNCILMAN NUTTER: Oh. And the City's providing 450.

MS. POST: Yes.

COUNCILMAN NUTTER: Oh, okay, all right, I'm sorry. Thank you. Thank you very much.

MS. POST: My mistake. Thank you, Councilman.

COUNCIL PRESIDENT VERNA: Thank you.

Are there any other questions from members of the committee?

(No further questions.)

COUNCIL PRESIDENT VERNA: I would like to suggest that perhaps in writing, we can get information on where the Teen Centers are, what they do; Beacon Schools, exactly what that program entails, where they will be located? And we have a number of other programs.

I think it would be really very helpful to everyone if we could have that in writing and as to where the locations are.

MANAGING DIRECTOR RICHMAN: Council President, we will provide for you a listing to all of these programs; the definitions; where they're located; and if there's a partner, who the partner is, because between many of these, it's a private nonprofit partner along with the school; the zip code location of them; and who the key contact person is, if you run additional information.

We should have all of that to you on the timeline that we've set to get feedback.

COUNCIL PRESIDENT VERNA: Wonderful. Thank you.

Thank you again for your patience.

The committee will stand in recess for a half hour. We will return here at 3 o'clock.

(Council stands in recess.)

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(Proceedings resume.)

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(Proceedings now being stenographically recorded by Brian Rasco.)

COUNCIL PRESIDENT VERNA: The Committee of the Whole is now back in session. The next department to testify will be the Department of Human Services.

(Witnesses came forward.)

COUNCIL PRESIDENT VERNA: Good afternoon.

COMMISSIONER MARTINEZ: Good afternoon, President Verna.

COUNCIL PRESIDENT VERNA: Please identify yourself for the record and proceed with your testimony.

COMMISSIONER MARTINEZ: Yes. My name is Alba Martinez and I'm the Commissioner of the Department of Human Services. And joining me is the Department of Human Services finance director.

Madam President, I was ready to skip my testimony and start with questions, although maybe you want me to just read my testimony.

COUNCIL PRESIDENT VERNA: You don't have to read it in its entirety. But I think if you would summarize it and we will then give a copy of it to the stenographer.

COMMISSIONER MARTINEZ: Very well.

COUNCIL PRESIDENT VERNA: I'm sure the members are in their offices and they can hear your testimony.

COMMISSIONER MARTINEZ: Okay. I'm here to present our fiscal year '03 operating budget request and to report to council on the progress we have been making.

Our general fund budget request is $530,445,000, which represents an increase of 11 percent over the department's FY '02 estimated obligations. Of this request, it is expected that fully 92 percent will be offset by federal and state revenues, making the city's share of DHS's expenditures $41,600,000. For each Human Services' budget dollar, the city will contribute only eight cents toward building up the quality of family life in Philadelphia.

Since 1988, the city's net contribution in dollars has been reduced by 52 percent while overall expenditures have increased 306 percent. The significant decrease in the city's share has been brought about by a combination of enhanced revenue generation from several federal and state funding sources, as well as diversion of costs to other federal and state programs.

The department's agenda strikes at the core of what we all want for our city: improved quality of family life. This year we began implementation of our Blueprint for Excellence, a strategic roadmap for increased performance. The work efforts described in our Blueprint center around building safety nets to support families in need or in crisis, building bridges with our partners for efficient and effective service delivery, building supports, competence and accountability for our staff to ensure quality outcomes for our consumers, and building fiscal responsibility, accountability and sustainability across our service systems.

Increases in expenditures are directly related to the increased need for child protection and to prevent child maltreatment and neglect from occurring. There was a 4.8 percent increase in abuse and neglect reports between July and December of FY '01 and during the same period in FY '02, requiring 7,130 investigations. The number of families accepted for in-home services also continues to rise, following a trend which began in '98.

Placement services have shown a slight decrease, resulting from our enhanced capacity to serve children in their own homes. However, many of the children in our care now require highly specialized programs and services to meet their needs. In January of this year, there were 7,728 children in out-of-home care.

Maintaining a full complement of qualified staff is essential to meeting our mission to ensure children's safety and permanence. Efforts to fully staff DHS with highly qualified people were implemented last fiscal year and will continue throughout this year and the next.

As a result of these efforts, we hired 134 new employees to fill chronic vacancies. We face continuing challenges in recruitment, particularly of bilingual social workers, and are investing in additional recruitment efforts to achieve full staffing, which is essential to ensure child protection, meet state-mandated caseload ratios, and sustain full state licensure.

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In the past year, important programmatic additions, changes and improvements have been implemented to advance our commitment to community access. We established the Division of Community-based Prevention Services, dedicated to developing a network of community-based services to divert families from DHS and build a neighborhood-based safety net for children and families. DHS has increased its investment in prevention activities by over 12.5 million in FY '02, and projects an additional increase of 13.4 million in FY '03.

A major focus of the community-based prevention services has been the development of a system of voluntary services for families who do not require child protection services. The core of this service are our 19 community family centers, located in neighborhoods throughout the city and offering case management, parenting education and support, linkage to other health and social services, and a variety of youth programs.

Among the most exciting of our prevention initiatives has been the funding of a network of 45 new community-based programs that provide education and support to high-risk families to enhance the parenting skills of parents and caregivers. Over 3,000 families will be served through this program this fiscal year, and we plan to at least double the number of programs and families served in FY '03.

In partnership with Family Court and the behavioral health system, pre-hearing case conferences were instituted in August 2001 for new petitions filed in Family Court. These conferences offer not only an opportunity to share information, define problems and discuss possible solutions, but also to quickly engage services for families so that children can return home safely and permanently in a faster time frame consistent with national outcome standards.

This fiscal year we have seen a steady increase in the number of children being made available for adoption. Between FY '01 and FY '02 the number of children assigned to our adoption section has more than doubled. The number of finalized adoptions in FY '01 was 469. While the number of finalized adoptions in FY '02 will increase only slightly, the impact of the increased terminations of parental rights will be more evident in FY '03.

To foster permanency solutions for children, we have embarked on two significant campaigns to raise public awareness about children who need out-of-home-care. This effort yielded over 300 calls to the foster care home recruitment hotline and over 200 families referred to foster care agencies to begin the process of becoming foster parents. In addition, DHS is collaborating with the National Adoption Center, the Statewide Adoption Network, the Faith-based Partnership for Adoption and others in the creation of a campaign and strategy to recruit 150 new adoptive parents for Philadelphia's children.

Law enforcement initiatives in recent years, such as Operation Sunrise, have been a primary factor in the dramatic rise in new delinquency cases, an increase of 31 percent from 1999 to 2001. During the same period, admissions to the Youth Study Center increased from 6100 in '99 to nearly 6300 in '01. Despite these increases, we are proud to report that the average daily population at the Youth Study Center has declined 15 percent over the last 12 months to 115, from a peak of 135 in February 2001.

But the efficiency and usefulness of the Youth Study Center, as you are well aware, has long been waning. Considerable progress has been made this year to move us closer to the reality of building a new facility. During the last 12 months, juvenile justice partners have met regularly and have agreed that a 150-bed center should be built. A space plan sets forth detailed staffing, programming, and living space needs, and 18 million is requested in the capital budget in addition to the original 30 million already appropriated.

Counsel President Verna, in the sake of time, I'm happy to begin taking questions.

COUNCIL PRESIDENT VERNA: Thank you.

Can you tell us what, if any, changes have been made in the area of foster care?

COMMISSIONER MARTINEZ: Yes. Well, in the area of foster care, we are right now engaged in a major effort to bring performance-based contracting into Philadelphia. And this will engage our providers in a discussion around achieving the time frames for permanency for children in accordance with the national outcomes.

And in addition -- and I assume that you might be referring to a change we recently made that moved direct foster parents to provider agencies. Is that the question specifically?

COUNCIL PRESIDENT VERNA: Mm-hmm.

COMMISSIONER MARTINEZ: Well, the department has approximately 5,000 children in placement. 3,478 of them are in foster care. 1,971 are in kinship care, which means that they're with relatives or other people that they knew prior to coming into placement. Historically, the department also had approximately 150 children in direct foster care, which means that there was no provider agency working with that family and with the department to provide services.

This has been a historical trend in the last five years for the department to contract out most of its placement services. And in the last two years, we've done a careful analysis of our direct foster care program. And we found that while the parents are amazing and they're excellent, that they were really not getting the same type of services and supports that foster parents were getting in our provider network. And so a decision was made, for practical reasons and based on best practice and for quality assurance reasons, to transition all direct foster homes into our provider agency network. And that process is happening right now.

It's approximately -- I can give you the exact numbers. But I believe that there's between 100 and 120 children and perhaps 70 foster parents. The children will not be moved. And we have gone through careful analysis to choose five or six agencies that we thought would be the ideal ones for this transition.

And in the next month we are going to have meetings between the foster parents and the agencies. We're trying to give the foster parent options. And there will be discussions to match the right foster parent to the right agency.

I recognize that some foster parents are deeply upset about this change, and we are doing everything we can to explain as much as possible why this change is needed. However, for practical reasons, the department is better off monitoring a system of care rather than also being a provider agency itself for only 120 children.

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COUNCIL PRESIDENT VERNA: Thank you.

You mentioned the replacement of the Youth Study Center in your testimony. Has a site as yet been determined for the new center?

COMMISSIONER MARTINEZ: No, President Verna, it has not. However, the Capital Programs Office has done a survey with the assistance of a number of departments and also some private entities in the city about potential sites based on their size and accessibility to public transportation and their availability.

They have done a survey of publicly owned sites and privately owned sites. And it is my understanding from the director of the office, Rick Tustin, that they're scoring these sites, as we speak, in accordance with the priorities that the juvenile justice stakeholders, which include the Court and the Managing Director's office and the District Attorney and the Public Defender, in accordance with all out of their preferences, and that list of sites will be presented to Mayor Street for his review and his decision.

COUNCIL PRESIDENT VERNA: Do you anticipate the center to be operational within the proposed five-year plan?

COMMISSIONER MARTINEZ: Well, I believe we can. I believe we can get it done. I believe that we've made tremendous progress this year. I recognize that site selection is a critical step in the process. And if that process moves smoothly, then I do believe that we can have a new Youth Study Center in five years. I firmly believe that.

COUNCIL PRESIDENT VERNA: Thank you.

In your testimony, you state that DHS will be establishing five support centers this fiscal year. Please explain for the record what support centers are and where the new centers will be located.

COMMISSIONER MARTINEZ: The support centers are a business and programmatic enhancement to DHS. And they actually don't call for a whole lot more staff than we already have. They really represent a reorganization. And I'd like to explain what they are in the context of what we had.

DHS has historically spent most of its resources in delivering services. And our services are very, as you know, complex. We have caseloads that are, for the most part, mixed. We have children that are at home receiving services, and then we have children in placement receiving services. We have children that are one year old, and we have children that are 17. We have children with no behavioral health needs and children with severe behavioral health needs.

We're also operating within a context that the law and best practice changes again and again and again. And yet we have a work force that stays for a very long time in city government. So therefore what they came in learning doesn't necessarily apply five years later.

So these support centers were created to support the people within DHS and also our provider agencies that do the work with the kids and the families. And there are five of them. One is a behavioral health and wellness center, and this one is developed in partnership with our behavioral health system in the city.

And what we do there is we provide technical assistance, consultation and teamwork with the staff of DHS and again our providers, because we have 300 provider agencies that we contract with to serve our kids and families. So we're there for them when they hit a rough spot.

Generally, those children that we cannot help early on end up institutionalized with behavioral health problems. We know that institutionalization of children is not the ideal for them. We know that that should be the last resort. So just as one example, this behavioral health and wellness center is allowing us to troubleshoot cases very, very early on and to provide support to staff when there wasn't that kind of support before.

In addition, we have a staff development center. And that staff development center will allow us to shift our focus from only on-the-job-training, for people who start their careers at the department, to lifelong training. It's also allowing us to integrate all training activities within the department under one director.

And in addition, we're going to develop better partnerships with colleges and universities that will help us train not only our social service staff, but also our supervisory staff because supervisors, in our view of the department, have to serve as coaches and they too need a great deal of training and support.

The third one of these support centers is a quality assurance center. DHS is one of the largest city departments. Next year our budget will be almost $600 million. And it is troubling to see we simply do not invest enough in quality assurance.

These systems do not self-correct. We need to constantly be monitoring how we're doing, and if we're not doing well enough, then we need to be aggressive about fixing it so that we don't have to deal with another ten-year civil rights lawsuit which cost the city millions and millions of dollars. The quality assurance center will allow us to continuously be looking critically at how we're doing and also being publicly accountable.

The other support center is a policy and planning support center. And what that allows us to do is just what the name says, do better strategic planning. One of the challenges that we face in government is that when you start a program, if you're not careful, you move on to the next thing and that program will stay there for the next 30 years without being re-evaluated.

So we believe that given our serious

mandate and given the amount of money we spend, that we need to have an aggressive agenda around planning, strategic planning, and also policy development because DHS represents 50 percent of state dollars in child welfare. So we must provide a leadership role around policy and child welfare and juvenile justice.

Last but not least is a clinical and educational support center. And that support center will allow us to partner more closely with the school system because we know that there are many children in the City of Philadelphia that are not doing well educationally.

And we also know -- and we're collecting data that confirms this -- that the experience of foster care and juvenile justice is often directly tied to even worse performance educationally. And we feel that we have a responsibility to identify that problem and to correct it.

But again, the unique thing about these support centers is that we're not requiring a whole lot more staffing for them. We're simply reorganizing. We did add three new director positions. But these centers will pay off tremendously in terms of the quality and the depth of services the DHS will be able to deliver for the city.

COUNCIL PRESIDENT VERNA: The three new directors, have they been with the office for a number of years and they're being elevated?

COMMISSIONER MARTINEZ: There is one new director who comes from the outside who's actually worked in child welfare in the city. The others are being elevated or have been elevated.

COUNCIL PRESIDENT VERNA: And where will the support centers be located?

COMMISSIONER MARTINEZ: They will be located in our main building at 1515 Arch Street.

I might add, President Verna, that we are also developing a housing support center in partnership with Rob Hess, the Deputy Managing Director for Homeless and Adult Services, and that one we might co-locate somewhere else.

So that's an additional support center that we did not mention in the testimony. And that's also going to be critical for us because we recognize that housing barriers sometimes prevent families from being reunified and the department does not believe that lack of housing and lack of furniture and basic needs should keep a family apart.

COUNCIL PRESIDENT VERNA: Could you explain for the record what TANF, T-A-N-F, what that stands for?

COMMISSIONER MARTINEZ: Temporary Assistance to Needy Families. And that's the federal funding stream that replaced Aid to Families with Dependent Children.

COUNCIL PRESIDENT VERNA: So who's eligible for the program and what are the lifetime limits?

COMMISSIONER MARTINEZ: Well, the lifetime limits on TANF were the lifetime limits that were imposed on people who were receiving public assistance, cash public assistance during the Clinton administration. And for Pennsylvania, the first families to hit the so-called wall will hit in March of 2002. So it's really a limit on receiving cash assistance. And individuals were encouraged for the last five years, as you well know, to engage in some kind of work activity to stop the clock.

Some families in the city have not been

able to get off of cash assistance. And so in March, unless some extensions are granted, which we believe they will be and there's a number of efforts to make sure that nobody is made homeless as a result. But it is possible that some families will lose cash assistance when they hit that wall. And if not in March, unless the law dramatically changes, in the next couple of years.

COUNCIL PRESIDENT VERNA: Thank you. The Chair recognizes Councilwoman Brown.

COUNCILWOMAN BROWN: Thank you, Madam President. Good afternoon.

COMMISSIONER MARTINEZ: Good afternoon.

COUNCILWOMAN BROWN: Let me first congratulate you on the first publication of the comprehensive parenting guide.

COMMISSIONER MARTINEZ: Thank you.

COUNCILWOMAN BROWN: I suspect you may have published that for clients, but mothers like myself could probably benefit as well.

Who funds it? Is it a grant or is that from the general fund?

COMMISSIONER MARTINEZ: The parenting efforts of the department are funded through our needs-based budget and through our general fund. It's all child welfare money.

COUNCILWOMAN BROWN: And at some juncture might a guide like that be presented or available for students and parents of our school children?

COMMISSIONER MARTINEZ: Well, absolutely. Absolutely. The guide is part of DHS's vision to be much more aggressive at communicating with the public the services that are available for them because in the first year that I spent at DHS, I spent a lot of time just talking to people and assessing what the needs were, what our strengths were, which we had many, and also what our gaps and weakness were.

And one weakness that quite frankly terrified me is that not even my own staff often knew the services that were available for clients. Then when you went to the community, you would find that people thought that there weren't services available when in fact there were.

So we have made a major commitment to public accessibility. And that includes marketing, for lack of a better word, the services that are available to people. We've distributed 50,000 parenting guides already. The first run cost us a dollar each. We're right now about to issue a second edition in less than a year, another 50,000. These are costing us less than a dollar because we're also having people complete for our services. And we distribute them through schools, recreation centers, libraries. We have a line, 215 P-A-R-E-N-T-S, and people call that line to request it.

So absolutely. We will continue to print these so long as there is a need and a demand for them because we believe that by putting information in the hands of the public and parents and caregivers we will help prevent abuse and neglect. We firmly believe that the more information that is available to people when their problems arise all over the city, all over the city, the more impact we will have on preventing abuse and neglect and delinquency.

COUNCILWOMAN BROWN: Well, I commend you for that tremendous effort.

Last year during your testimony you expressed concern about the impact, not value, but the impact of the family care centers. And you made it clear to us that your department would be looking at how they're operating closely and making changes. What's new and different this year?

COMMISSIONER MARTINEZ: Well, the family centers, for one, are providing a lot more services this year than they ever have before. And I certainly heard loud and clear council's questions and concerns about the investments in family centers. I would like to speak briefly about it while I afford David Fair the opportunity to step up and also report out to council on what we have done.

We have expanded the menu of services that are available in the family centers. We have set standards for family centers that they must meet in order to continue providing services, and we have built a referral bridge between Children & Youth and these family centers.

(Witness came forward.)

MR. FAIR: That's what we did. So I don't know what else there is to say.

COMMISSIONER MARTINEZ: You can make something up.

(Laughter.)

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COUNCIL PRESIDENT VERNA: Identify yourself.

MR. FAIR: I'm sorry. My name is David Fair. I'm director of Community-based Prevention Services for the Department of Human Services.

For this fiscal year or actually towards the end of the last fiscal year, we've required all of the existing family centers -- there are 19 of them -- to re-compete for these funds, not really in a broad general competition but according to the new standards that we had developed and the new performance expectations that we had developed for them for this current fiscal year.

At this point all family centers are required to provide four basic services. They're required to have professional case managers available primarily for families referred by DHS to the family center from among the 700 or so families that are investigated every month for abuse and neglect but which are not brought into SCOH or into placement services. We have 700 families that are reported for abuse and neglect every month that we do a full investigation on but the situation doesn't rise to the level of a substantiated case.

Before the creation both of this division and the diversion mechanism that Alba referred to, DHS generally would give a phone number or maybe not even that to some of these families and hope that they didn't come back. Now, we are making a direct referral, when we can, to one of the local family centers, and the case managers are responsible for helping that family to connect to service that they may need without having to bring them into the formal child protection system.

Each of the family centers is also required to provide after school and youth development programs according to the new core standards. They are required to provide parenting education programs according to the same standards that we established for the 45 new community-based programs that we funded through our requests for proposal a few of months ago.

And they're also required to show us a formal referral arrangement between that family center and 28 other kinds of services ranging from the local food bank to intensive behavioral health services or whatever it is the family might need. The basic concept is that family centers will be a place in which DHS feels comfortable and safe in making a referral of a family that has been referred to us, DHS, for some reason but who we do not think needs to have the more intensive services of the child protection system.

We're not limiting the services to those families. But we're trying to design a service system through the family centers that's capable of meeting the needs of those families as well as others in the community that might be referred there.

COUNCILWOMAN BROWN: Okay then. That certainly sounds like a dramatic improvement from last year, starting with the implementation of standards. That alone puts --

MR. FAIR: If I could just say one more thing I forgot.

COUNCILWOMAN BROWN: Sure.

MR. FAIR: We're also collecting a lot of data. Prior to this year, the family centers, which had been operated out of the Mayor's cabinet for children and families, had very simple reporting requirements. We now have established a web-based reporting system where the family centers themselves enter in data into a central data base that's maintained at DHS.

We're not fully in operation yet. So don't ask me for data from it. But the idea is that we could ask that data base for any information on these families and what services they're getting out of the prevention system as a whole, not just the family centers, and most importantly track the level of risk of those families of eventual involvement in the abuse and neglect system and whether we have kept them out of that system, which is our primary prevention goal.

COUNCILWOMAN BROWN: Absolutely.

Commissioner, you spoke or articulated very well the "why" you're moving towards performance-based contracting in foster care on Page 7 of your testimony. Can you share with us how you selected the agencies? You gave a number. The criteria that you used to select those agencies to start with this new procedure, performance-based contracting.

COMMISSIONER MARTINEZ: The performance-based contracting initiative will impact on all agencies that provide foster care services.

The agencies that I referred to selecting was for the transition of the direct foster parents.

But in terms of performance-based contracting, every nonprofit provider of foster care services will be part of that initiative. We are going to begin some part of performance-based contracting this July 1, and we hope to roll out a full performance-based contracting model for the next fiscal year.

And we are working with Illinois, which created it and has won some national awards for performance-based contracting, as a learning partner. We're also working with the Fell School of Government because it's very important that this be done properly. Under no circumstances do we ever want DHS or the city to be seen as pushing kids out of the system, because that's not what it's about.

It is, however, about making clear that timely decision-making is imperative for children in our care. And we want to set standards and we want to measure performance of all providers in the system, which again is ultimately measuring our own performance. And acceptable options -- acceptable outcomes in performance-based contracting are reunification in a safe home or adoption.

COUNCILWOMAN BROWN: Yes.

COMMISSIONER MARTINEZ: We also have a third option that we're beginning to implement in the state, which is called permanent legal custodianship, which allows a caretaker to accept full custody with a subsidy but without government intrusion. So they would continue to get a subsidy until the child is 18 but the government would not have custody, they would, which gives them a lot of decision-making power.

COUNCILWOMAN BROWN: That is a relatively new option, is it not?

COMMISSIONER MARTINEZ: It is a relatively new option and we are working out the details. It is slower than we would want it to be in implementation, but we are going to get there. And it is a very good option.

Illinois used it a number of years ago because they got a waiver from the federal government to implement it. And the State of Pennsylvania recently issued a bulletin allowing us to do it. But yes, it is a very good option for children that cannot be adopted for whatever reason.

They can still achieve permanency.

COUNCILWOMAN BROWN: With a family member, extended family member?

COMMISSIONER MARTINEZ: Yes. And an interesting statistic that I think is important is that in Illinois, once performance-based contracting was implemented, their rate of moving children to permanency went up in the first year from 8 percent to 32 percent. And those dollars then can be reinvested in other types of services to help those families in after care, for example, or placement prevention.

COUNCILWOMAN BROWN: Thank you. One more, Council President?

COUNCIL PRESIDENT VERNA: Yes.

COUNCILWOMAN BROWN: Thank you.

You spoke to the relationships that you're enjoying cultivating with universities and colleges in the area and you also spoke to the recruitment for bilingual professionals. So I need to commend you for thinking out of the box. If you have a need, you got to go to where they are.

How is that recruitment effort coming with regards to I believe it's Puerto Rico, number one? And number two, have you explored the relationship with area colleges specifically as it relates to the need for bilingual professionals if in no other way to sort of get them on line so that at the end of that training and academic experience there is an opportunity for them at DHS?

COMMISSIONER MARTINEZ: Thank you for the opportunity to address that question since I know that it's sparked some interest.

DHS has been extremely aggressive and proactive in recruiting social workers almost since the moment I walked in the door. I took over the leadership of DHS February of the year 2000, and in April or May we were already on radio advertising and also in a media campaign to recruit social workers because we had a significant number of chronic vacancies. And we -- let me just look at the statistics here.

For example, I believe they had 171 vacancies when I took over and we now have 88. And during the same period our staffing has increased by 51. So we've made a dramatic impact on increasing the numbers of social workers. That was critical to us because it was difficult for me to expect people to accept a reform agenda within DHS when we were struggling with a lot of understaffing.

This issue of recruitment of social workers, I might add, is also a national problem. I have read a lot of articles where there's discussion about how difficult it is to retain child welfare employees because of the high stress nature of the work and because of the high caseloads. So I thought it was really important to do that.

Unfortunately, our recruitment efforts did not give us enough results in terms of the recruitment of bilingual staff. And that's why we're taking our bilingual recruitment campaign to the next level.

We've been partnering very closely with the Office of Central Personnel. We moved to monthly testing, sometimes bimonthly testing for social workers. We added the category of social worker II to the types of employees we could hire. And social worker II's allow us to hire people with experience, with Masters degrees and experience, and pay them a little more.

We have advertised in regional newspapers. The highest concentration of Latino residents of Pennsylvania are in this region. So we've started in the regional newspapers that go into Delaware and New Jersey, the radio. We've used radio and we continue to use radio. And unfortunately, we are competing with our 300 providers for bilingual staff.

I also might add -- and this did not come out in the press -- that the Department of Human Services is under agreement with the Office of Civil Rights of the Health and Human Services Department, and we have agreed to be very aggressive about improving the quality of our services for Spanish-speaking clients.

So this is why we are engaging in this trip. We've received at least 81 resumes as of last week. We've scheduled 40 interviews. And God I hope I come back with some results after all this press.

COUNCILWOMAN BROWN: You should know that the crisis is not specific only in the profession of social work. We're suffering from the same kind of thing in education with teachers and finding qualified teachers who are bilingual in math and the sciences.

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COMMISSIONER MARTINEZ: That is correct. I came to the city in 1985. And since 1985 there have been discussions. I remember reading a report from the Human Relations Commission about the critical need to recruit additional bilingual capacity to the city work force. But now that I run DHS, I see firsthand the terrible consequences that that has in the lives of children and families.

You can't investigate a sexual abuse case and communicate effectively through an interpreter. You can't take a hotline call and put people on hold until you get an interpreter and say that we're providing optimal service. While we are doing the best we can, it is simply not good enough.

COUNCILWOMAN BROWN: Surely. Again, I commend the out-of-box thinking.

I'll rest at this time, Madam President.

COUNCIL PRESIDENT VERNA: Thank you. The Chair recognizes Councilman Ortiz.

COUNCILMAN ORTIZ: Thank you, Madam Chair.

Commissioner, how many kids are on the adoption list right now? I'm very interested in adoption.

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COMMISSIONER MARTINEZ: The statistics I have, Councilman, at this point is we have -- in 2001 we had 641 terminations of children that then moved into the adoption unit. That represented a 34 percent increase over the previous year. We had 469 adoptions this year versus 650 last year. However, we are engaged aggressively in a campaign to identify adoptive parents for a number of children that are in our care for whom we have no adoptive resources. That number is 200.

COUNCILMAN ORTIZ: What is the number, the totality of the kids that have had their parental rights terminated that are under our care and are eligible for adoption but for one reason or another we haven't been able to get them adopted?

COMMISSIONER MARTINEZ: Approximately 200. We have 200 children who have no adoptive resource identified. And I don't want to guess the number, but there's a number of children also in the unit for whom we have an adoptive resource identified and their adoption process is underway.

The number that worries me the most is the one where we have no adoptive resource identified, and that's approximately 200 children at this point.

COUNCILMAN ORTIZ: Of Philadelphia kids that just fall into our system.

What are the agencies that we have contracted with to do this service for us or do we do it directly?

COMMISSIONER MARTINEZ: Councilman, I can get you the entire list of agencies. But I will say that it is quite a number of them. We partner with the Statewide Adoption Network and also with Diakon, which is an organization that we transfer money to and they then subcontract with a number of agencies, Concilio being one of them, Lutheran being of them, Bethana. We may have over 15 agencies right now, perhaps more, that are doing this work. And I will get you that information.

Our challenge at DHS is being more aggressive about coordinating that work in a way that gives us the results we want.

COUNCILMAN ORTIZ: At the time a family expresses an interest in adopting a child, how does a family go about it and what is the time line expected from the application and the process to the child being given to that family permanently?

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COMMISSIONER MARTINEZ: Well, when a family -- and I'm going to invite Wanda, if she would like, to come and help me address this question in more detail. There's a number of ways to answer the question.

(Witness came forward.)

COMMISSIONER MARTINEZ: If a family expresses interest in adopting and they have a home study completed, then the process moves faster because the next step is to identify a match, to match the family with an appropriate child, and then begin the process of moving toward a decision on both ends that this is the right fit and then moving it towards adoption. If a family is interested in adopting and they do not have a home study, then the first step is to complete a home study application.

MS. MIAL: Hi, I'm Wanda Mial. I'm a deputy Commissioner at DHS.

The only thing I would add is that the time line is affected by whether the child has lived with the family that's interested in adopting them.

COUNCILMAN ORTIZ: Let's say that someone --

MS. MIAL: If they have, then there's

already been clearance. There's a process in place for clearance.

COUNCILMAN ORTIZ: -- goes in to DHS and wants to adopt one of the kids that we have.

MS. MIAL: I'm sorry?

COUNCILMAN ORTIZ: If someone doesn't have any of it -- because I'm an advocate of adopting Philadelphia kids. I have two of them. So I keep telling people. I say, we have the kids in the system. I say, why don't you just go to DHS and ask to adopt a kid. And people, they will constantly come back and they say we tried that and it didn't work for whatever reason. I want our kids to get adopted because I've been fortunate.

How do we get people not to go to Honduras or Romania or China to adopt kids from Philadelphia and go right to DHS? How do we begin and how do they start, from the moment they walk in through the door to the moment that they can say they can begin painting the room blue or pink?

COMMISSIONER MARTINEZ: First, I have a little bit more information for you, which is that a completion of a home study takes three months, and once a match is identified, a child must live in a potentially adoptive home for six months prior to finalizing an adoption.

DHS is right now -- in terms of your question about how we market, for lack of a better word, the opportunities for local adoption, I agree that DHS can do a lot more and we are doing a lot more.

First, we have entered into a joint venture with the National Adoption Center, a national organization based in Philadelphia with whom DHS had no formal agreement. And we have entered into a formal agreement and created a line called the Philly Kids Connection. So DHS is beginning to advertise -- perhaps you have seen them -- about the opportunity to adopt children locally.

COUNCILMAN ORTIZ: How long does it take to terminate parental rights usually?

COMMISSIONER MARTINEZ: Well, it depends. The law now says if a child is in care 15 out of 22 months, then a petition must be filed with the Court unless there are compelling reasons not to do so. Once the petition is filed, though, after the 15 months, that process is in the hands of the

Court and can take six months, can take a year, can take much longer. One of the areas that DHS is now tracking more aggressively because we want to and because we have to under the law is how long it takes.

The average length of stay for children in our care is I believe approximately four years. But I will get you that information. That means that, of course, some children get reunited or adopted quicker and some are there much longer.

MS. MIAL: We've also engaged in stronger partnerships with Family Court and with our law department to really aggressively increase the efforts around termination of parental rights and have really improved those procedures. And that really shows in our numbers of terminations filed last year or granted last year.

COUNCILMAN ORTIZ: Have you any data on that that we can see and look at? Because, like I said to you, I'm very, very much interested in how this is done, implemented and how we can expand it and get more of our kids into more Philadelphia families.

How is it done, how is the cultural

done, the cultural aspect done in terms of Puerto Rican kids being targeted? Because we come in different colors. And at one point in time there was a policy that if you had Puerto Rican white kids as such, they would be -- and many of them actually ended up outside of Philadelphia somewhere in suburbia. And I want to know how is that being done, what is the policy in terms of the cultural aspect of families and matching with that.

COMMISSIONER MARTINEZ: Well, adoption work is an area that we are going into much deeper. We've started to go in much more deeply in the last three to six months, and we are going to do some major work in the next year. I want to first say that one of our current negotiations is with an entity that we will join forces with to find adoptive families for children that do not have adoptive families right now because we believe that DHS needs external help to accelerate that.

On the issue of decisions made around culture or race or color, I need to say here what I say everywhere that I'm asked, which is that DHS absolutely does not discriminate in any way, shape or form. And if I found out that there was a decision being made that was contrary to that belief, I would hold the person or persons accountable.

I don't know what happened at DHS in the past, but I can tell you that right now I think people would know much better. However, I will also add that we are in the process of writing our vision for adoption and making it widely known. It goes back to the issue of staff development, Councilman, which is that we cannot expect our staff to change with the times and grow unless we also build an infrastructure to lead them and train them and retrain them continuously.

But I assure you, I assure you that the standard for matching a child with a family is we find the best type of family where they're going to be loved, nurtured and developed, and race, religion, all of those types of issues are secondary. There's no predetermined matching on the basis of race or anything else.

COUNCILMAN ORTIZ: I held hearings with the Police Department to try to reform the way they deal with women and families that go through a process of abuse and rape. And the advocates and the Police Department finally agreed with the advocates to set up a center, co-location center. And part of that is DHS's role within that.

We haven't been able yet to -- is it open? We're moving from Frankford?

I'll ask you, because we're moving from Frankford to Episcopal Hospital. And one of the issues is DHS's role and presence within the center. And you and I have spoken over the few months that this has gone on.

And again, you said you were trying to get the staff ready at that point and getting it focused into this. Where are we now?

COMMISSIONER MARTINEZ: Well, I certainly am pleased that I have some progress to report. DHS has now specialized sex abuse investigations into three units which represents one supervisor and five social workers, which means that we have three supervisors, 15 social workers, under one administrator that only do, only will do sex abuse investigations. That is a necessary prerequisite for co-location.

I was very concerned that we had 125 investigators of child abuse and neglect rotating sex abuse investigations because it is an area that requires a great deal of expertise. And especially when you are collaborating with specialized partners, in the Police Department, for example, and with the Children's Alliance, then it wasn't conducive to the ideal form of collaboration.

The next step for us is massive training, based on best practice, of sex abuse investigation. And co-location then becomes a real possibility if it is what the department chooses to do and if it fits within the time line of the other partners. We can co-locate absolutely or we can co-locate by having space within another entity where our staff can work out of.

I believe that either way we will end up spending a lot of time in the police office where the Children's Alliance and the Police Department --

COUNCILMAN ORTIZ: Well, it's not the police office. It's multiple offices that holds the police but also multiple services that are in there and obviously DHS's role within that because it's been a very disturbing aspect of women and children going through a process that it is one almost abusive to the women and families to one that is much more sensitive and conducive to the investigation and making the families cooperate in a much saner actually, because there's insanity sometimes when you go down to Frankford, and much more caring environment.

And the presence of DHS within that unit is, from every report, every study that I've seen and that we were able to get through our hearings, essential. This is a one step type of situation in which we can bring the families and process and investigate, do the interviewing and so on.

So I would hope that I would get a time line from you as to when we're going to be able to integrate fully the services that we're talking about and that the hearings brought out that are needed so we can get that time line.

COMMISSIONER MARTINEZ: I would be happy to share that with you. And I agree philosophically with the need to co-locate. And the reason, of course, why I erroneously referred to it as the police office is because they will have the bulk of the people there. But I do recognize that it is a co-located facility where we will have nonprofit partners, the police and the child welfare system, among others.

COUNCILMAN ORTIZ: Madam Chair, I guess my time is coming to a close.

COUNCIL PRESIDENT VERNA: Thank you. The Chair recognizes Councilman Nutter.

COUNCILMAN NUTTER: Thank you, Madam Chair. Good afternoon.

COMMISSIONER MARTINEZ: Good afternoon.

COUNCILMAN NUTTER: Just a couple questions.

I was struck by actually Councilwoman Reynolds-Brown mentioned and had asked you some questions about the -- you have a parenting guide?

COMMISSIONER MARTINEZ: Yes.

COUNCILMAN NUTTER: And you had indicated that you had distributed 50,000 copies. Was that last fiscal year?

COMMISSIONER MARTINEZ: This was in the last six months, in this fiscal year.

COUNCILMAN NUTTER: And you're anticipating distributing another 50,000, although I thought I heard earlier that they cost you a dollar the first go-round and now you've I guess --

COMMISSIONER MARTINEZ: We're going to

get them at a little bit less than a dollar is my understanding.

COUNCILMAN NUTTER: This can potentially complicate the area, and I'm sure you've thought of it. So if it's been looked at and decided, don't worry about it.

I'm wondering, though, whether there might be some opportunities to lower the cost even more either by advertising, appropriate advertising that some people -- and you'd have to establish guidelines; as I said, it can get a little complicated -- where you may end up getting it either at a significantly reduced cost, if not for free, although, again, ads can get complicated.

Or secondly, as a city product -- I think technically we've gotten rid of the print shop. But I just wonder whether there's a way to obviously significantly reduce the cost, have more of them available. And I think what Councilwoman Reynolds-Brown said, I'm sure that there are a lot of parents, whether they are a part of the system, if you will, or not, who could utilize the information.

I've not seen the guide, but I'm sure it would be helpful. If you have a special section for fathers dealing with smart little girls, that would be particularly --

COMMISSIONER MARTINEZ: We were thinking about developing a program just for you.

COUNCILMAN NUTTER: Well, I need a program. So that would be very helpful.

But what I'm struck by is the department probably provides a whole host of services or it could at least point people in the right direction who may generally think that, well, I don't really have any problems, so why would I ever call the Department of Human Services. Quite honestly, some people are probably trying to do their best at some level to stay away from the Department of Human Services --

COMMISSIONER MARTINEZ: That's right.

COUNCILMAN NUTTER: -- lest they end up in the system. And for some people -- we've had contact with our constituents. They feel like once they kind of get in, you literally cannot get out. And you just don't want that level of involvement in your family life. You just want some information, but you're not necessarily looking for a case worker or somebody to kind of spend the rest of your life with you.

So I think that to the extent that the marketing campaign or the public education campaign can somehow convey to people that you don't have to have these kind of bad things going on in your family or that you haven't -- you know, it's only people who have done something wrong or who have been reported by somebody or who are somehow not doing what they're supposed to do end up getting service from DHS.

And while I was somewhat joking earlier, in a more serious fashion, I think -- I mean, those kinds of booklets and guides we should try to get to everyone. I mean, all of us need help in a variety of different ways, whether we want to acknowledge it or not.

And I'm sure that the concepts in the guide can be very helpful to people as you try to figure out in this crazy world, even though our parents may have figured it out in an even crazier world with less resources, they didn't have the internet and a whole host of other things. It's a struggle just trying to do what you're supposed to do and point your kids in the right direction, kind of keep it all together, whether it's a single head of household or Ozzie and Harriet type or everybody's working, money's coming in, things are going well.

I mean, we all have our various issues and things that we need to contend with. And to some extent, I think the department has just kind of become a place where it's almost -- for some people it's a great day if you don't have any contact with the Department of Human Services because you don't want to be over there. There are a lot of people who could get the benefit of DHS and not necessarily be a part of the system.

COMMISSIONER MARTINEZ: Well, we absolutely share your vision. And that's, in part, why we created the Community-based Prevention Services division.

We will never shy away or speak less loudly about our agenda to protect kids from abuse and neglect delinquency. However, we also see ourselves as having a much broader role in the city in terms of supporting every parent because the Department of Human Services I believe has to be the department that speaks out around parenting and gives people help all over the city wherever they need it.

As we are able to more effectively impact on the deep end of the system, which we are aggressively doing, that will free up more money to do some of the earlier intervention, earlier prevention and primary prevention we need to do.

One of the striking experiences for us around this parenting guide is that it took us around six to eight months to compile the information. We collaborated with Safe and Sound and PCCY to get all that information, and it's parenting programs all over the city, not necessarily at all funded by DHS. It's really programs that hospitals run, that child care centers run, that churches run in every neighborhood, in every neighborhood. And this had never been compiled.

The new edition will have those programs plus 47 new programs that DHS is funding. But it's certainly a vehicle that we are using to market everybody's work around parenting.

And I agree with you that the day DHS is seen by people -- and I believe it's starting to happen -- as a place where you can go for help to find an after school program for your kid, or your kid is missing school, what do you do around truancy. That doesn't makes you a bad parent. That makes you a parent with an issue you have to deal with, if your kid has a behavioral health need.

This happens all across classes. It's not about economics. I think that poverty exacerbates a lot of problems. However, it is not about poor people. Behavioral health issues and truancy happens everywhere. We need to be a resource for all families in the city.

And we also, I might add, developed a customer -- we have a customer service initiative and we have a new number, 683-4-D-H-S, which allows people to call DHS for information and not go through the hotline. They used to have to go through the child abuse hotline to get to anybody. And we get many calls from people who are interested in adopting, being foster parents or finding out about programs for their kids.

And yes, it is a challenge because we have a reputation of being in the intervention business. But we're really trying to get away from that because we think we'll be more useful to the city that way.

COUNCILMAN NUTTER: On Page 3, there's mention of 19 Community Family Centers.

COMMISSIONER MARTINEZ: Yes.

COUNCILMAN NUTTER: Could you, either in coordination with your earlier testimony or on your own, forward to the Chair a site list of where the 19 centers are? If they're mentioned in the budget book somewhere, you can point me in that direction.

COMMISSIONER MARTINEZ: We will coordinate with Safe and Sound and we'll make that available to you.

COUNCILMAN NUTTER: How do you decide where to put a family center?

MR. FAIR: My name is David Fair. I'm director of Community-based Prevention Services. The 19 existing family centers, the location of those family centers was determined by the Mayor's cabinet for children and families in a previous administration. We haven't added any new family centers in the last two years, though our budget request under the needs-based budget for the state for next year would allow us to -- if we get the full amount, would allow us to open up four new family centers.

COUNCILMAN NUTTER: Where do you anticipate those to be?

MR. FAIR: The current plan is to rely on the data that Safe and Sound representatives were talking about earlier in terms of targeting the location of those family centers so it's consistent with the broader children's investment strategy, with the location of the beacons and where the highest number of reports of abuse or neglect are occurring and where the need might be the greatest.

COUNCILMAN NUTTER: Now, what are the five DHS support centers mentioned on Page 6?

COMMISSIONER MARTINEZ: The five support centers are actually not a whole lot of new staff. They don't represent a whole lot of new staff. They represent a reorganization within the Department of Human Services. And they respond to a finding that I made when I came in, which was that the bulk of our services -- the bulk of our investment in staffing and personnel was in providing direct service.

A challenge that our direct service staff face -- and not only our own DHS staff, but the provider social workers -- is that there's a lot of complexity and specialization within their cases that they lack. So these support centers are designed to provide technical assistance, co-case management and support to DHS social workers and to provider social workers in dealing with specific types of cases.

For example, our behavioral health and wellness support center was developed in partnership with the behavioral health system. And what we have there is people who are able to step into a very, very complex case. DHS sometimes has to place children and has a very hard time finding the appropriate placement for them because of their behavior. So our support center is then able to intervene and make sure that a child does not stay hospitalized longer than they have to, so that we can find them the least restrictive setting and do other kinds of troubleshooting.

COUNCILMAN NUTTER: Let me try to understand. At the bottom of Page 6, you make reference to the five DHS support centers and then they are apparently by type. So one would be the behavioral health and wellness?

COMMISSIONER MARTINEZ: Yes.

COUNCILMAN NUTTER: Now, maybe I'm attaching too much to the term "centers".

COMMISSIONER MARTINEZ: Yes, maybe.

COUNCILMAN NUTTER: Are these just kind of offices somewhere within -- you're over at One Parkway; right?

COMMISSIONER MARTINEZ: They're a reorganization of some staff, and we have changed their role within the organization. Rather than being folks who do a function and then pass it on, do a discrete function within a chain, they are really in a support function. They help other people do their job better. And their job is done when the other employee achieves a successful outcome for the child.

COUNCILMAN NUTTER: So if someone was having a problem with a behavioral health issue, that a staff person was working with a constituent, a resident, a citizen, the case has become complex or some other issues, they would be able to go to this support center?

COMMISSIONER MARTINEZ: That's right.

COUNCILMAN NUTTER: And talk to people who have either more expertise or more experience in that area?

COMMISSIONER MARTINEZ: And troubleshoot until the problem gets resolved.

COUNCILMAN NUTTER: And present what their issue was or what the problem was and get backup and support from a person in the support center?

COMMISSIONER MARTINEZ: That is correct, as opposed to the old way, which is that if you're a social worker and you have 30 families in your caseload and in one of them you have a major behavioral health crisis, you drop everything else to deal with that crisis or you push that crisis back and do everything else. And these support centers are really our redesign of DHS so that the people who handle the bulk of the cases feel supported. And that is a major shift from the past.

Behavioral health is one of them. We will develop a housing one, which is not reflected here, with Rob Hess. We will have a clinical and educational one which deals with physical health issues and education. And then the other ones are also critical but are more around policy and planning and quality assurance and staff development. And they are all designed to increase the quality of our practice and our results.

COUNCILMAN NUTTER: Page 7 of the testimony, near the top, this is with regard to the Youth Study Center. It says, "The department is also focusing efforts on more effective management of staff. As a result of employing effective strategies at the Youth Study Center to reduce the number of special staff assignments and in shift staffing changes, we are projecting a surplus in overtime of nearly $800,000."

This is a slightly confusing phraseology. What do you mean a "surplus in overtime"? Do you mean you have a savings in overtime of $800,000?

COMMISSIONER MARTINEZ: Yes, yes. Since it had never happened, we didn't know how to describe it.

(Laughter.)

COUNCILMAN NUTTER: You get a special star because the Commissioner made a funny and it was a very good one.

So what happens to the $800,000 in overtime savings? Do you get to keep them and redirect them or has the Grinch back there collapsed them into something else?

COMMISSIONER MARTINEZ: It gets reprogrammed.

COUNCILMAN NUTTER: You knew who I was talking about, didn't you? Let the record reflect that Commissioner Martinez turned in the appropriate direction at the appropriate person in the back.

All right. So you don't get to keep the money?

COMMISSIONER MARTINEZ: No.

COUNCILMAN NUTTER: Well, I commend you for the effort and the savings.

COMMISSIONER MARTINEZ: Thank you.

COUNCILMAN NUTTER: My last question is we've had a recent situation where we needed to have some discussion. Without going into the particulars of that, which are at the moment less important than the larger issue, I would like to ask if you could work with, at a minimum, the Managing Director -- there may be others, possibly the health department -- in some special situations for the development of some written protocols around the issue of placement of facilities, primarily private operators, whether nonprofit or for profit, in how we make some of the decisions around who's located where and types of services.

First, let me say that there is no question that the various members of our community, Philadelphians, one, have a right to receive a variety of services throughout the city; two, if there are living circumstances involved, people who need services have a right to live anywhere in the city, and as long as their facility or building or structure is in compliance with all the various codes or they get whatever approvals that they need, again, they should be able to live whether they want and be in compliance.

On the other hand, to the extent that we can communicate at an early stage of a proposal, a project, a development, a contract, a financing and help to ensure that whatever is proposed to happen, if it is going to happen, can happen in as smooth a way with as much public notice as is reasonable, I think that it will help to cut down on some uncomfortable and difficult situations for a variety of parties, whether it's the provider, the government, elected official and certainly yourself as Commissioner.

And I think that in some situations we've done that well. In some other situations, a few things have happened that have caused us to have some difficulties. And I think to the extent that there might be any written protocols around that that we can agree to, that are reasonable, that everyone knows what they're supposed to do, when they're supposed to do it, it might help to prevent some uncomfortable situations for again either services recipients, neighborhood people and certainly everyone in the government.

And I would like to -- I'd just like to encourage that we do that on a going forward basis, have that information shared, and then everyone would know what to do.

COMMISSIONER MARTINEZ: Thank you. I have definitely discussed this particular matter with the Director of Social Services and the Managing Director. And I believe that we will continue to discuss how we can improve this type of communication early on in the future. And thank you for your help and your patience in this.

COUNCILMAN NUTTER: Absolutely. Thank you. Thank you, Madam Chair.

COUNCILWOMAN BLACKWELL: You're welcome. Councilman Rizzo.

COUNCILMAN RIZZO: Thank you, Madam Chair.

Commissioner, were you here when I had a conversation with the Health Commissioner earlier today?

COMMISSIONER MARTINEZ: Yes.

COUNCILMAN RIZZO: I want to go back over that. And for the benefit of the folks that weren't here, I'd like to just restate part of what I said earlier.

I'm concerned about the services to our senior citizens. And I know because annually I visit Riverview. So I do know some of the things you do. But everyone in this room has a neighbor on their block that's a very senior citizen that may be home alone, that might not be in the best of health, might not have hot water, might not have all the essential services that we need each day to live comfortably.

And I know in your department you're very focused on the young. But I also would like to hear your focus on the scenario that I just described, about our elderly that are home alone. Just recently -- and you heard the story I believe that I told about the lady that was beaten badly and just left in her home alone until we got the call through an interested person.

I'd like to know what you do in the area of care for our seniors and the relationship -- and I'm going to ask the same question of you -- the relationship to the Philadelphia Corporation for Aging because I'm starting to learn after looking at that agency very carefully, even though it has the name the Philadelphia Corporation for the Aging, it might not be doing a whole lot of things for Philadelphians.

So could you comment on your organization's work with our seniors? Outside of Riverview. I think we all understand that. I'm talking about the people that may be home alone.

COMMISSIONER MARTINEZ: Well, Councilman, I think that that, first of all, was a compelling and disturbing story. And I want to say that having a 96-year-old grandmother who is one of my favorite people in the world and I've seen how she struggled, even with a support system, I can tell you that I'm personally very connected to the issue.

I will say that when I came to the Department of Human Services I was struck by the fact that we had this huge mandate and array of services for children and youth in the abuse, neglect and delinquency arena, but yet in the senior services the only segment in our portfolio was Riverview. That was the only area where DHS had resources to spend on senior citizens.

I engaged in conversations immediately with then Social Service Director Richman to transfer the oversight of Riverview to Adult Services because I did not believe, given the huge challenge I had with abuse, neglect and delinquency, that I could do a good enough job monitoring and supporting Riverview because I realized that the needs that Riverview represents, in terms of who ends up there, was huge.

But I will tell you what I did see in my short time overseeing Riverview: that the connection between PCA and city departments was not strong enough. And I echo your sentiments. Not that they don't do the work, because I know they do fabulous work. But the connections between our city departments -- and I will include DHS in this -- and PCA is simply not strong enough and it needs to be stronger. And I will take some responsibility because even though we do not have as one of our mandates to provide services to the elderly, there are many elderly people that we come in contact with.

In fact, I had a referral from a council person this week of a grandmother who's been raising her three children and simply is at the end of her rope and can't do any more. Do we remove those children or do we design special services to support that grandmother so that she is successful?

We have some contracts that specialize in providing services to relatives who are caring for their children. Often those relatives are their grandparents and often they are older people.

So DHS can do more, and you have my commitment that that is an area where I am not comfortable that we're doing enough. I did want to invite, however, Rob Hess, since he's been supervising Riverview for the last six months at least to nine months, to share with you where Riverview is.

COUNCILMAN RIZZO: I think I heard you answer the question about the grandmom. Thank God for grandmoms and grandpops, but especially grandmothers because if it weren't for grandmothers raising children all over again, we'd be in real big trouble.

COMMISSIONER MARTINEZ: That's right.

COUNCILMAN RIZZO: And I think I heard you answer the question, which I hope is the answer, is that I'd like to give that grandmom the help that she needs to do that rather than just take the kids away.

COMMISSIONER MARTINEZ: Absolutely. Absolutely.

COUNCILMAN RIZZO: And again, I understand all the good work at Riverview. But I would hope that someday we can be where we need to be where the 85-year-old lady that is by herself, that never gets out of the house for weeks and weeks at a time, that may be heating her home with her oven, may be without the basic necessities of life, gets some care, because again I am very, very committed to this because many of these senior citizens have given a lot to make this city, this state, this county a better place. And in that part of their life, I don't want them to be forgotten for one minute. So whatever we need to do to be there for them, I want to be there and be part of that.

COMMISSIONER MARTINEZ: Well, I thank you for your leadership on the issue.

(Witness came forward.)

COMMISSIONER MARTINEZ: Do you want to add something?

COUNCILMAN RIZZO: I'd like to hear about Riverview.

MR. HESS: Sure. My name is Rob Hess, Deputy Managing Director for Special Needs Housing. Thank you, Councilman, for that question.

There's really two parts to that answer besides the PCA piece. PCA gets involved with adult protective services for folks that are 60-plus. They also have a variety of attendant care programs and some other services.

But even before folks would have to be interacting with PCA, we would come in contact with them very often through Adult Services through our relocation services. That is to say, if there is a senior citizen living in substandard housing or L & I has found the house to be unsafe, then of course our relocation services would go in at any time, 24 hours a day, seven days a week, do an assessment and provide the kind of services that that individual or family would desperately need and want.

And that could include actually relocating the family, say, in PHA senior housing. It could be temporary relocations. It could be a variety of things based upon the situation and the circumstances that that family faces. And so another option, of course, may be Riverview home.

And at Riverview home, again, that's -- we view that as a transitional facility. So folks could move there, be assessed, get the kind of services they need, and then we'll find the highest and best housing outcome for them and help them move on to that outcome.

COUNCILMAN RIZZO: Can I just comment on

that? Certainly, I know that we can move people from a residential environment to a substitute housing or substitute shelter like Riverview. But I think that the Commissioner's grandmother or some of the senior citizens that I know, the last thing in their life they want to do at 89, 90, 91, 92 years of age would be their whole life's possessions put in a shopping bag and taken to Riverview.

I'm talking about the things that we can give them along the way, quality of life, a visit. Again, this is new to me. But I'm learning that there's lots of things we can be doing. And I know that there's a lot of services out there that once the right connection is made that provides some of our seniors, especially the ones that are living alone, some very, very basic care.

So I know that we can move people out of their homes, and obviously, we would do that if they were without heat or they were in a situation that is substandard. But I'd like to prevent it from becoming substandard because again I know -- again, to repeat, the seniors that I know, the last thing that they will want to do -- and I think you'd have to do it forcibly, and many times I'll bet that's the way you have to do it to get them out of their home because they're afraid while they're at Riverview that some burglar is going through the second floor, chopping a hole in their roof and taking whatever's left.

MR. HESS: Councilman, it sounds like you've been talking to the Managing Director because that's the kind of advice and guidance that we routinely get. We do every thing we can to maintain an individual in their home, and when that's not possible, to relocate them in another home.

Riverview or the shelter system would certainly be an absolute placement of last resort. And even then, we view those facilities as a point of entry, not a point of destination to our service system. So that is to say that ultimately we want folks to be able to move back into the community as quickly as possible with the appropriate support services.

COUNCILMAN RIZZO: And just to comment about the Managing Director, there are a lot of issues that you can call her 24 hours, seven days a week. But that is the one that is top on her agenda because when I had this problem, Estelle Richman said to me, If you need me seven days a week, 24 hours a day, when it comes to the care of our senior citizens, don't hesitate to reach out to me. So I'll confirm that that is the fact.

But I think this is going to be my issue for a while, and I just want to make sure that everybody is ready for it.

COMMISSIONER MARTINEZ: Absolutely.

COUNCILMAN RIZZO: Thank you, Commissioner.

COMMISSIONER MARTINEZ: Thank you.

COUNCILMAN RIZZO: Thank you, Madam Chair.

COUNCILWOMAN BLACKWELL: Thank you, Councilman. Councilman Ortiz.

COUNCILMAN ORTIZ: Grandmothers are good. Without them, we wouldn't have no mothers. One step at a time.

How many employees totally in DHS?

COMMISSIONER MARTINEZ: We have as of January 31st, 19 -- I'm sorry. 1792 as of January 31st. Wait.

No. As of January 31st, '02, 1840.

COUNCILMAN ORTIZ: How much?

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COMMISSIONER MARTINEZ: 1743 filled.

COUNCILMAN ORTIZ: 17,000 what?

COMMISSIONER MARTINEZ: 1792 on the general fund.

COUNCILMAN ORTIZ: Oh, 1700. Okay. I was wondering.

COMMISSIONER MARTINEZ: No, that's two years from now, 17,000.

(Laughter.)

COUNCILMAN ORTIZ: I was wondering here.

COMMISSIONER MARTINEZ: 1792 are on the general fund, and 87 are grant funded.

COUNCILMAN ORTIZ: Right now in terms of social workers, you have a vacancy of how many? How many of those are -- how is that broken down?

COMMISSIONER MARTINEZ: Well, it is complicated because the way that the budget process is developed, these numbers kind of automatically move in the budget from year to year. So I have been making significant changes and reprogramming.

My numbers are not exactly the numbers reflected in the budget. The APL has not changed. My numbers show me that I have eight vacancies in social workers at this point in time.

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COUNCILMAN ORTIZ: Eight vacancies?

COMMISSIONER MARTINEZ: Only eight. For next year, however, we are requesting an additional 75 employees in Children & Youth and approximately 55 of those will be social workers. So we have 63 vacancies as of the next fiscal year.

COUNCILMAN ORTIZ: And out of that, you plan to make that 41 or more bilingual positions?

COMMISSIONER MARTINEZ: Well, over time I would like to see DHS's work force be representative of our client population's need for bilingual services. I would like to, by the time I'm done, have an 8 percent bilingual work force.

11 percent of the children in foster care are of Latino descent. 16 percent of the children in the delinquent system are of Latino descent. So we believe that 8 percent of the work force should be fluent in Spanish. That will not happen overnight. It will be a gradual process.

Turnover at DHS has slowed down, but there is still turnover. For example, next year we will have 23 employees that will leave the department as part of the DROP Program. So there will be continuing opportunities to hire bilingual staff.

COUNCILMAN ORTIZ: Could you give us a breakdown of the employees that you currently have so that we can have an understanding of who goes what, who goes where, who performs what jobs and so on?

COMMISSIONER MARTINEZ: Absolutely, yes.

COUNCILMAN ORTIZ: And again, I'd like to see a greater degree of Latinos. 16 percent. And I think that's meaningful since we haven't progressed from three in the last 15 years.

I'd like to see what are the numbers of the people that are supervising in social work and actually performing the work of case work and so on down the line and the breakdown, the ethnic, racial breakdown of the staffing both at the supervisory level and the lower levels.

COMMISSIONER MARTINEZ: I will be happy to provide that information for you.

COUNCILMAN ORTIZ: In the last year, how many people have come on board?

COMMISSIONER MARTINEZ: I believe we've hired 134 social workers and 171 total in the last year.

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COUNCILMAN ORTIZ: 134?

COMMISSIONER MARTINEZ: So 171 total. 134 of them social workers.

COUNCILMAN ORTIZ: And what did the other 40, 35 do?

COMMISSIONER MARTINEZ: Clerical support, administrative functions, work directly related to supporting social services, security in the Youth Study Center, for example, maintenance in the Youth Study Center. We've been extremely conservative and focused on meeting the critical programmatic needs of the department.

COUNCILMAN ORTIZ: The issue of TANF, because it was all right in the last few years, we had a very robust economy. However, lately I was reading in the New York Times the other day about the breakdown right now in terms of people that were supposed to move off welfare rolls but can't because of the economy, because of the way it is performing, and it's affecting New York and Chicago and so on.

I was wondering what is the impact that is having on us and our ability to be able to keep on decreasing the welfare rolls?

COMMISSIONER MARTINEZ: I don't have the

exact numbers here. I can certainly get them. But in Philadelphia, the caseloads, like everywhere else in Pennsylvania, have decreased in terms of people who are receiving cash assistance. However, those that remain on the caseloads are often those that are most difficult to place in jobs.

And the Managing Director, in partnership with the Department of Public Welfare, has created a program called maximizing participation. It's the Maximizing Participation Program, MPP, that provides case management and other types of activities for people who have been exempted from work force requirements. And that program is actually very important for us because the people who are engaged in those types of activities will not get cut off of TANF.

But the ultimate goal of the state is that they do engage in some form of work activity or being permanently disabled, you know, that there's some resolution to their TANF case.

COUNCILMAN ORTIZ: Do we have any numbers? I know there's going to be waivers and it's going to probably be extended. But do we have any numbers of people and families that will be hitting the wall, as they say, on this month?

COMMISSIONER MARTINEZ: Councilman, I don't have the numbers off the top of my head. We can get them for you just to make sure that they are accurate. There are projections around that. But as you say, it's a moving target because the state right now is considering regulations to allow people in need to continue receiving benefits and avoid a crisis.

I believe that the state is strongly considering what it can do to prevent people from getting cut off. But it is a possibility.

COUNCILMAN ORTIZ: Of that 134 that are brand new social workers, what is the breakdown of that? How many of those were Latinos and African American, white? What is the breakdown of that?

COMMISSIONER MARTINEZ: Only six of them were fluent in Spanish of the 134.

COUNCILMAN ORTIZ: Fluent and being Latino are two different things.

COMMISSIONER MARTINEZ: Well, fluency. I can't speak to you specifically about their ethnic origin. I know one of the six is non-Latino. The other five are probably Latino and fluent. At least one of them is not Latino.

COUNCILMAN ORTIZ: Fluency is one thing. Ethnic background is another.

COMMISSIONER MARTINEZ: I will get you that information. I can tell you the breakdown of DHS staff overall. It's 71 percent African American, 24 and a half percent white, 3 percent Hispanic and 1.32 percent other.

COUNCILMAN ORTIZ: You could stand a big improvement in the Latino area, especially the professional ones, because I would imagine that of that 3 percent Hispanic, a lot of them are clerical and so on.

COMMISSIONER MARTINEZ: The 3 percent is overall DHS staff. It includes, me, for example, and it includes non-social workers.

In the social worker staffing, however, we did do some research and found that 3 percent of our social work staff is, in fact, fluent in Spanish because for purposes of complying with the Office of Civil Rights, fluency is first and foremost the accessibility issue that we look at. So 3 percent of our social worker staff is fluent in Spanish.

COUNCILMAN ORTIZ: But again, for my

benefit --

COMMISSIONER MARTINEZ: We will do the racial breakdown for you.

COUNCILMAN ORTIZ: Thank you. Because fluency is another thing.

COMMISSIONER MARTINEZ: Yes.

COUNCILMAN ORTIZ: Latino and Puerto Rican is a totally different thing.

COMMISSIONER MARTINEZ: So you would like to see the breakdown in terms of the job classification?

COUNCILMAN ORTIZ: Job classification and ethic background of individuals.

COMMISSIONER MARTINEZ: Very well.

COUNCIL PRESIDENT VERNA: Councilman, are you finished with your questioning?

COUNCILMAN ORTIZ: Yes, I am.

COUNCIL PRESIDENT VERNA: Thank you. I guess there are no further questions.

COMMISSIONER MARTINEZ: Thank you very much.

COUNCIL PRESIDENT VERNA: Thank you very much. We appreciate your patience.

The next department to testify is the

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Office of Emergency Shelter and Services.

(Witness came forward.)

COUNCIL PRESIDENT VERNA: Good afternoon. We do have a copy of your testimony. We will give it to the stenographer so it can be included in the transcript. You can summarize, if you will.

MR. HESS: Thank you, Madam President, and members of City Council. My name is Rob Hess. I am the Deputy Managing Director for Special Needs Housing. I'm joined today by Emily Camp-Landis, the assistant deputy managing director for special needs housing; Sally Fisher, the director of OESS; and Richard Shaeffer, the administrative services director for OESS.

I am pleased and honored to offer this testimony on the Office of Emergency Shelter Services' budget request for fiscal year 2003 as well as on the challenges and opportunities that lie ahead in the area of homeless services.

As presented to counsel, the proposed fiscal year 2003 budget of the Office of Emergency Shelter and Services is $36,991,209, of which $17,198,620 is in the general fund and $19,792,589 are grant revenues. In the interest of the late hour and being brief, I will move on to really the focus of our work over the last year and moving into the next year.

We really are shifting homeless programming away from emergency responses and toward more permanent solutions of prevention and diversion efforts on the front end, permanent, affordable housing with appropriate supports on back end, and a coordinated system of shelter and transitional housing that helps families and individuals move to a permanent home faster and with more dignity.

And to that end, this current fiscal year we've actually reduced the size of emergency shelter by 10 percent. And the fiscal year 2003 budget anticipates an additional reduction of approximately 5 percent. What we hope to accomplish there is shorter lengths of stay in shelter, moving people again much more quickly to the appropriate, permanent housing location with appropriate support of services.

One other significant accomplishment I'd like to highlight briefly is the November 2001 opening of the Ready, Willing and Able program in

Philadelphia. As you know, this will be a 70-bed facility on Bainbridge Street that really will be an employment training program where folks will work. And it is envisioned that within 18 months, the average being around 16 months, men will graduate from this program.

Graduation means they will have remained drug and alcohol free, they will be working full time, and they will be living in unsubsidized housing in the community. It is our anticipation that of those that graduate, 85 percent will continue to be drug-free, living in unsubsidized housing and working full time some 18 months after graduation.

I would also point to a couple of other efforts that we'll really be focused on this coming here, the first of which is our movement over the next three years to performance-based contracting where we really are making investments based upon agreed-upon outcomes and holding service providers accountable for the results that they're able to achieve.

We mentioned earlier that we have the front door of our shelter system, prevention and diversion really need to be a focus and will be during the coming year. The first thing we want to do is help people avoid entering our shelter system to the degree possible. Once they do enter the shelter system, we want to reduce their average length of stay so that they can move into the appropriate transitional or permanent housing with the appropriate supportive services provided to them in a coordinated, integrated way as quickly as possible.

I think I would like to finish my opening remarks by saying that the work that is done in our city to address and end homelessness is a group effort undertaken by service providers, advocates, religious institutions, community leaders and our government. And it's been my privilege over the last year to come to a great community and see the great work being done in this area by service providers, by community groups, by elected officials and community leaders. And it really has been a privilege.

We are positioned well to take the next step, to move the bar to the next level and really begin reducing the size of our shelter system and being able to address the issue of people experiencing homelessness in our community in a more humane and appropriate way.

I would finally point to the fact that the most recent U.S. Conference of Mayors Report on Hunger and Homelessness highlighted Philadelphia and St. Louis as the only two cities out of the 27 surveyed across our nation that showed a decline in the use of emergency shelter last year. The survey also showed, however, an increase in the use of emergency food programs by Philadelphians, echoing a national trend. If the recession continues, we can expect to see our best efforts at preventing and ending homelessness undermined.

To help minimize the impact that that could have, we are leading the Division of Social Services' integrated case management initiative, a long-term project that can have a strong positive impact on the outcomes for families with multiple supportive service needs. That is to say that the family that may have once had eight or ten social service systems or social workers giving them direction will ultimately, we expect, be limited to a lead case manager that's acting in a coordinated way to make it much easier for that family to navigate our systems. And we're excited about that effort.

All of our efforts, though, are dependent upon the partnership of city, state and federal funding. And so as we look at our goals and objectives and the good work that's already been done, we have to know and understand that we have to have our partners in place, being the federal and state government as well, in a committed way to reach our ultimate goal of eliminating chronic homelessness in our city.

Again, I appreciate the opportunity to testify here today and I'd be happy to answer any questions anyone may have.

COUNCIL PRESIDENT VERNA: Thank you, Mr. Hess.

Please explain the Ready, Willing and Able program. When did the program start in Philadelphia?

MR. HESS: Council President, the program started on November 1st of this year.

COUNCIL PRESIDENT VERNA: And you've said that the participants are being housed on

Bainbridge Street. Where?

MR. HESS: 1211 Bainbridge Street.

COUNCIL PRESIDENT VERNA: Can you explain what the program does?

MR. HESS: Yes. The program is really very exciting. The program is targeted to single men that have had histories of involvement with our shelter system, some criminal histories, some histories of substance abuse, and really in New York has given men with these situations a new start and great hope.

In other words, what happens is men come into the program. From Day One, they're tested to ensure they're drug-free. They're given a job. They're actually paid while they're in the program. And so the work that they're doing is allowing them to earn some money. And some of that money goes into savings, and some of it they can use for their own personal needs. But over 18 months they learn life skills. They learn employment and training skills, job skills that lead to jobs that pay a minimum of $8.25 cents an hour.

And so again the graduation criteria is that the men are working full time, they're living in unsubsidized housing in the community and that they've remained drug and alcohol free. So those are the three specific outcomes that we're buying with our investment of Ready, Willing and Able. But even better, we continue to track men after graduation. And it is our expectation that 85 percent of the men that graduate from the program will remain drug-free, remain fully employed, remain living in unsubsidized housing in the community some 18 months after graduation.

COUNCIL PRESIDENT VERNA: Thank you.

What are the areas of employment that you are able to place the participants in? I know that Mr. Mifflin was in one day last week and said that there are about six or seven that were assigned to the Fairmount Park. What other areas are the participants placed?

MR. HESS: Well, Council President, inasmuch as the program just started November 1st, these men are a long way from graduation. However, 25 men minimum -- and it's been closer 50 over the last month -- are working daily in Fairmount Park primarily in the area along Kelly Drive. They're cleaning up that area. They're raking. They're learning basic landscaping skills that they'll be taught through the work with Fairmount Park.

Now, landscaping is not going to be the highest and best outcome job for every man that comes through the program. It's a starting point. Now, some of those men will choose to go into the landscaping business and those skills will be honed over the next 12 to 18 months and they should be placed in commercial landscaping positions. Many of the other men have other skills and they'll end up doing other things.

In New York City, for example, it is not uncommon to see men get their CDL license and be truck drivers, or work in the service industry, the hotel industry, a variety of different kinds of positions. I think they've even had a couple that moved on to things such as a physician's assistant in one case in the New York program over the last year. So that assessment will be made in terms of what the man wants to do, what the capabilities are, and what's available in the local economy to support his position.

COUNCIL PRESIDENT VERNA: Did you indicate what the length of the program is? Did you say 18 months?

MR. HESS: It can be up to 18 months. We hope the average here and expect the average here in Philadelphia will be between 12 and 14 months. So that's our expectation.

COUNCIL PRESIDENT VERNA: And you will be tracking the progress of these men once they've finished the program?

MR. HESS: Yes.

COUNCIL PRESIDENT VERNA: What types of support service will be available for them?

MR. HESS: The men that graduate from the program will always have an open door at Ready, Willing and Able. If they run into another bump in the road in life, they can return to Ready, Willing and Able to get additional case management support, crisis support and any other kind of support that they may need in order to be successful.

It's one of the beauties of the program. In fact, anyone that enters the program and perhaps relapses and has to leave the program for treatment can then return afterwards. So that's one of the real beauties of this particular program.

COUNCIL PRESIDENT VERNA: Could you

explain the terms and conditions of your contract with The Doe Fund?

MR. HESS: I can. Let me refer to my cheat sheet, though, so that I get all those facts correct for you, Madam President.

This is a performance-based contract. Under the contract with The Doe Fund, it is our expectation in terms of deliverable outcomes that 100 percent of the participants will develop a service plan; that is to say, a case management plan for their time at Ready, Willing and Able. 100 percent of the participants will maintain clean living space while at the facility, and they will actually be the ones cleaning and maintaining the facility throughout their stay.

100 percent of the men will attend the monthly house meetings. 25 percent of the participants will participate on the resident advisory board for the facility. 60 percent will complete life skills training. 60 percent will receive GED's or improve their reading and math level by two grades after 12 months in the program.

55 percent will graduate, meaning again that they secure private sector employment at 8.25

an hour or more and by the 18th month of participation secure their own housing, unsubsidized housing in the community, and of course, remain drug and alcohol free.

Then of the graduates from the program, we'll continue to track them again beyond graduation. 85 percent of the graduates will remain drug-free, employed and independently housed some 18 months after graduation. And 55 percent of those graduates who are fathers will contribute time and/or financial support to their children. So those are the initial measurable outcomes that are part of the Ready, Willing and Able contract.

COUNCIL PRESIDENT VERNA: You indicated that the participants of this program will be paid. Would they be paid under The Doe Fund?

MR. HESS: That is correct. They'll be paid largely out of PWDC funding that will go to The Doe Fund, and they're paid at I believe it's an average of 5.50 an hour.

COUNCIL PRESIDENT VERNA: You mentioned your partnership with PHA in providing a reliable supply of housing for homeless households ready for more permanent housing arrangements. Could you elaborate on the Good Neighbors Make Good Neighborhoods program and will the NTI program offer the opportunity for additional housing for this population?

MR. HESS: Council President, the Good Neighbors Make Good Neighborhoods program is a joint venture and collaboration between PHA and the Division of Social Services operated by Adult Services. We have available to us 500 housing choice vouchers that can be utilized to help move people from our emergency shelter or transitional housing into permanent housing with supportive services; that is to say that any family that moves through this program will receive a minimum of a year of intensive case management support and that's integrated across our system.

So a family -- we would identify a family that's ready to move but for permanent housing. We would look at their case record. We would see what social service agencies or departments or offices are already working with that family, assign a lead case manager who would coordinate all of those activities and who would stick with that family for at least a year once they move into permanent housing to ensure that they are a good neighbor, but also to ensure that all the members of that family are receiving the kinds of social service support that will help them be successful in their new housing.

COUNCIL PRESIDENT VERNA: Thank you. The Chair recognizes Councilwoman Blackwell.

COUNCILWOMAN BLACKWELL: Thank you, Madame President. Madam President, I wanted to say that we've come a long way with OESS. As you see, we have training for homeless people as well as job training for people who are low income that comes out of the department. So we've come a long way with what we do in terms of homelessness.

And naturally, when I saw that we had a 10 percent and a 5 percent additional cut in shelter services, I was concerned. But when we transfer that to transitional housing, it means they get better services and more training. So certainly we commend this department and their leadership on what we're doing with OESS and certainly believe that they're worthy. Certainly, their budget request is worthy of our support and we're happy to support them in this regard. We thank Mr. Hess for the work that he does.

MR. HESS: Thank you.

COUNCILWOMAN BLACKWELL: And Sally -- we call Sally every day -- and everybody, Mr. Shaeffer. Thank you.

COUNCIL PRESIDENT VERNA: Are there any other questions of the committee? I can't believe this. Wonderful. Thank you so much for your patience.

MR. HESS: Thank you, Council President.

COUNCIL PRESIDENT VERNA: The next department to testify is the Department of Public Property.

(Witness came forward.)

COUNCIL PRESIDENT VERNA: Good afternoon. Please identify yourself for the record and proceed with your testimony.

COMMISSIONER PEREZ: Good afternoon. Council President, with your indulgence, I'll skip through the testimony and just touch on a few highlights.

COUNCIL PRESIDENT VERNA: That would be fine.

COMMISSIONER PEREZ: For the record, my

name is Andres Perez, Commissioner, Department of Public Property.

The department's fiscal '03 budget request totals $206,842,271 in all funds. It reflects a decrease of $2,121,000 over our '02 estimated obligations of $208,963,526. In the General Fund, in Class 100, the request -- there's a slight increase to cover the anticipated salary increases. Class 200, there's a number of adjustments, some negative, some positive, which results in an overall reduction of I think it's 2.1 million, almost 2.2 million.

The General Fund request totals include 64,229,000 for city support of SEPTA, 14,538,714 for space rental, 27,290,000 for utility charges, 15.7 million for telecommunication services, and 45,609,603 for core departmental operations.

We've basically continued the implementation of the city's space plan. Where an opportunity has presented itself to reduce expenses, we've done so. At this point, it's very stable. We are still receiving savings from the original set of relocations and consolidations.

There are a few much smaller leases that may present some opportunities as renewal dates come up, and so we plan to do that in the year 2003. Some of the reductions you see in the '03 budget come from one-time expenses associated with renovations that took place during '02 that are not repeated in '03, as well as actual rent savings.

Facilities maintenance area, we will again continue our approach of contract to support for our major high-rise office areas. That contract is due to be reissued before the next fiscal year. Meanwhile, since the previous fiscal year, we'll be also adding on the Fleet Maintenance facility at 63rd Street, the new 24th/25th Police District, which should be open before July 1, and the Police Forensic Laboratory, which will come into place approximately third quarter or fourth quarter of '03.

Communications area, we are well into the 800 megahertz radio program implementation. We've actually begun handing out radios first to the Water Department. Currently, Public Property is changing over its radios. And very shortly we'll be moving on to the Fire Department, continuing on into '03 with the Streets Department and the Police

Department as the major clients that will be converted in '03.

Special events support continues as it has in the past. Approximately 50 to 60 percent of our overall departmental overtime from both Building Services and Communications ends up supporting special events requests throughout the city. On that note, I'd like to close my testimony and move to questions.

COUNCIL PRESIDENT VERNA: Thank you, Commissioner.

In your testimony, you say that there will be increased responsibilities in FY '02 and FY '03 as a result of new maintenance or custodial contracts for the combined Fleet Maintenance/Streets facilities at 3033 South 63rd Street. I think it was like three years ago we were told that we had to obtain that property like yesterday and we haven't moved in there yet?

COMMISSIONER PEREZ: Several units of the Streets Department are in the building. There are some final improvements being made for the Fleet Department to completely move in. There's a partial presence there. We're very close to -- rather, the

Capital Program Office is very close to finishing that up.

I don't know the start date of the street survey, the street sanitation unit. I do know the salt dome was up in time for the pseudo snowfall.

COUNCIL PRESIDENT VERNA: Isn't this where Fleet Management is supposed to be going?

COMMISSIONER PEREZ: Yes.

COUNCIL PRESIDENT VERNA: I just want to call to your attention very early on when this was being negotiated it was agreed upon that there would be an advisory committee formed with the community.

Are you aware of that?

COMMISSIONER PEREZ: I have to admit that no, I'm not, not at this point.

COUNCIL PRESIDENT VERNA: Well, before this really goes into effect I think there has to be an advisory committee.

COMMISSIONER PEREZ: We will do that.

COUNCIL PRESIDENT VERNA: Set forth as was promised to the community.

COMMISSIONER PEREZ: We will do that, Councilwoman.

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COUNCIL PRESIDENT VERNA: Commissioner, I notice that in Class 100 you have 17 less employees for FY '03?

COMMISSIONER PEREZ: Yes.

COUNCIL PRESIDENT VERNA: Why is that?

COMMISSIONER PEREZ: It's normal attrition plus some disciplinary actions we took resulting in termination of employees. The number is staying high because of the Class 100 freeze. However, we are permitted to hire a small number of critical positions.

COUNCIL PRESIDENT VERNA: What positions do these 17 people have?

COMMISSIONER PEREZ: Virtually all of them are blue collar and technicians from Building Services and from the Communications Division. I don't have the classifications in front of me, but I can certainly provide them to you.

COUNCIL PRESIDENT VERNA: I would appreciate that.

Can you tell me how many of your employees will be eligible for the DROP Program in '03?

COMMISSIONER PEREZ: Based on the

October report of enrollees, it's 19.

COUNCIL PRESIDENT VERNA: How many?

COMMISSIONER PEREZ: 19. The first year impact is only three people.

COUNCIL PRESIDENT VERNA: That would be '03?

COMMISSIONER PEREZ: Yes.

COUNCIL PRESIDENT VERNA: In August of '03?

COMMISSIONER PEREZ: Yes, Councilwoman.

COUNCIL PRESIDENT VERNA: So actually in FY '03 you're going to have 36 less employees?

COMMISSIONER PEREZ: In '03, the DROP impact I believe is only three people.

COUNCIL PRESIDENT VERNA: Oh, I thought you said 19?

COMMISSIONER PEREZ: 19 are enrolled spread over several years.

COUNCIL PRESIDENT VERNA: Oh, '04. That's right. So the following year.

COMMISSIONER PEREZ: Right. The first wave is only three.

COUNCIL PRESIDENT VERNA: Okay. I did want Councilman Rizzo to hear this, and I want some of my other colleagues to hear it.

For some time members of council have been saying that we need more office space. When I spoke with Judge Massiah-Jackson, she indicated to me that the judges that are presently housed at Lord & Taylor will be moving into City Hall in order that we save that kind of money.

Do you have any knowledge of that?

COMMISSIONER PEREZ: Yes. It's been worked on, planned for, for approximately two years, going back to the former managing director. The actual details, I don't know. I do recall that there was 50,000 square feet rented in that building for the courts nearly ten years ago and that ten-year lease is coming to term.

All of them are going to be relocated either into City Hall spaces, which are court spaces, or into the Justice Center. The majority of them are coming back to this building.

COUNCIL PRESIDENT VERNA: I think we had asked you once before, and I will ask you again, to please find council some space because council members feel very strongly that they need more space. So if you can accommodate that with us, I think we would really appreciate it.

COMMISSIONER PEREZ: We'll follow up. I'll discuss the issue with the Managing Director and follow up.

COUNCIL PRESIDENT VERNA: And would you get back to me personally, please?

COMMISSIONER PEREZ: Yes.

COUNCIL PRESIDENT VERNA: Yes, the Chair recognizes Councilman Rizzo.

COUNCILMAN RIZZO: Madam President, I appreciate all the consideration you've given the request. I think if you had a power saw and a drill, you would have probably taken care of our request.

But I think it's terrible that we have a situation where council staffs have grown, like public property staffs have grown, and we can't have an office space to have our staff under one office space. There's no place -- Commissioner, it just can't run efficiently. And it doesn't seem like it's a Public Property priority or a Managing Director priority to try.

Maybe it's the torture you give us back to create this type of a work environment. It probably does not meet even the minimum standards that office planners work with. We have people tripping over each other, cords running through walkways, people that have to walk two offices away to talk to their staff. It's just terrible. And it needs to be corrected.

This is City Hall. There's a lot of space here. I see all the construction going on. And council offices can't have the proper work area to conduct the business for the city?

I really think -- I've been here six years and for six years have been asking. And the President, this current President of City Council just basically says there is no space available in this building.

We can't even find a space to stash record boxes that we have to store from one fiscal year to the other, not even a place to store things. So I would appreciate you give this top priority like 800 megahertz radios and the other projects that you do. Maybe I shouldn't use that one as an example because that took too long. So I would appreciate that you give this top priority.

COMMISSIONER PEREZ: Thank you,

Councilman.

COUNCILMAN RIZZO: Thank you, Madam Chair.

COUNCIL PRESIDENT VERNA: You're welcome.

COUNCILMAN ORTIZ: Thank you, Madam Chair.

COUNCIL PRESIDENT VERNA: You're welcome. Did you want to be recognized?

COUNCILMAN ORTIZ: Yes, my light is on.

I've been here 18 years. My staff is -- you've been to my office. I have everybody (indicating). So I would welcome to have the ability to have new offices, to be able to expand so that the staff can have the privacy that it needs when we're talking to constituents. So I urge.

But I have one question of the Commissioner that I have to ask because we've been working -- this council held hearings. We approved the money. The Police Department has been very enthusiastic, Timoney and Commissioner Johnson, in terms of the co-location center at Episcopal.

I went very early -- was it last winter?

COMMISSIONER PEREZ: Yes.

COUNCILMAN ORTIZ: Last winter and I actually went through the facilities at Episcopal Hospital that we were renting. And it's not into effect yet, it's not functioning. And I would like to find out because Timoney assured me that it would be up and running. Timoney is gone. I want to know why is this not going on. Why isn't it functioning?

COMMISSIONER PEREZ: The quickest way to describe that is we're at impasse on certain very difficult points with the management of the Episcopal Hospital system. And it all boils down to reconciling some very serious insurance and liability issues that were not addressed up front.

We had come to terms on basic financial conditions. But as negotiations of the fine details proceeded, we've gotten bogged down on that main point, insurance, liability, indemnification. We've elevated that problem-solving to the president's level and to the managing director's level and hope it's resolved in the next couple of weeks.

COUNCILMAN ORTIZ: The advocates have been on top of me.

COMMISSIONER PEREZ: Yes, they have.

COUNCILMAN ORTIZ: The advocates have

been all over. We've had hearings. We thought we had made incredible progress. And it's really abominable that after two years, a year and a half, a year after locating the place that this would fit into. And I asked Commissioner Martinez when is she going to be able to give us plans so that she can move in there. And now to find out that this is not yet functioning is disheartening, to say the least.

COMMISSIONER PEREZ: It is.

COUNCILMAN ORTIZ: So when can we -- maybe I should ask you. Maybe the Managing Director can give me an answer as to when I can pop the cork, I can pop the cork on these facilities.

COUNCIL PRESIDENT VERNA: Councilman, are you finished?

COUNCILMAN ORTIZ: I'm waiting for the Managing Director.

COUNCIL PRESIDENT VERNA: Is the Managing Director here?

COUNCILMAN ORTIZ: She's right there.

COUNCIL PRESIDENT VERNA: Oh, I didn't see her.

(Witness came forward.)

COUNCILMAN ORTIZ: When can we expect to

crack open the champagne and give birth to this baby?

MANAGING DIRECTOR RICHMAN: This is Estelle Richman, Managing Director. I actually have an unrelated meeting with Temple on Thursday, and I hope to actually get some of these issues on the table and get them resolved. And if we can make it all come together, then maybe you can crack open the champagne on Friday.

I'm not quite sure it will go quite that fast. But it is on my agenda now. I will be directly handling it at my level. I am very much, as you know, in favor of this co-location. So I will do whatever I can do at this point to make sure this gets on a very fast track.

COUNCILMAN ORTIZ: I appreciate it. Thank you. I don't have any further questions.

COUNCIL PRESIDENT VERNA: Thank you.

Mr. Perez, in your testimony you state that your FY '03 Class 800 request will be the same as for FY '02. Doesn't this payment represent the city's water bill and isn't there a rate increase in FY '03?

COMMISSIONER PEREZ: The Class 800

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numbers are received from the Finance Department and presumably reflect any anticipated adjustments up or down. The number has not really stayed exactly the same year to year each year it's submitted.

COUNCIL PRESIDENT VERNA: Well, if there is supposed to be a rate increase in '03 and another one in '04, how would you be able to absorb this increase if you have the same allocation as '02? Mr. Dubow, was that an oversight on your part?

MR. DUBOW: Rob Dubow, budget director. It may have been. We think that we'll be able to meet that cost. But you're right. The rate increase may challenge that assumption.

COUNCIL PRESIDENT VERNA: How much of a difference do you think there would be? Would you say it's about 400,000?

MR. DUBOW: Probably. Maybe 400, 420, something like that.

COUNCIL PRESIDENT VERNA: All right. So you'll make that adjustment?

MR. DUBOW: We'd probably want to go back and take another look at where we think it will really wind up this year and see whether that 14 million next year will be sufficient.

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COUNCIL PRESIDENT VERNA: You mentioned that you will be forwarding to City Council legislation dealing with the public right of way during the third quarter of FY '02. When in March should we expect to receive this piece of legislation?

COMMISSIONER PEREZ: I'll have Deputy Commissioner Joseph James respond.

(Witness came forward.)

MR. JAMES: Good afternoon. Joseph James, deputy commissioner, Department of Public Property.

Council President, we expect towards the latter part of this month to be able to have that prepared and presented to the Managing Director for submission to the mayor's office for submission to City Council.

COUNCIL PRESIDENT VERNA: Okay. Thank you.

What are the assumptions in the five-year plan with regards to the SEPTA subsidy?

COMMISSIONER PEREZ: I'm going to ask Mr. Zearfoss to come forward and help us with that.

(Witness came forward.)

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COUNCIL PRESIDENT VERNA: Good afternoon.

MR. ZEARFOSS: Good afternoon. I'm Chris Zearfoss from the Office of Transportation.

The basic assumption provided to us by SEPTA in response to our call for information for our five-year plan update was to have normal inflationary adjustments. I think it was around three, three and a half percent a year over the next five years, with no changes in service levels.

COUNCIL PRESIDENT VERNA: But the projected subsidy is below the FY '03 amount in both FY '04 and FY '05.

MR. ZEARFOSS: The 1968 bonds that were floated to enable the purchase of the old PTC --

COUNCIL PRESIDENT VERNA: This is the subsidy.

MR. ZEARFOSS: I'm sorry?

COUNCIL PRESIDENT VERNA: We're talking about the subsidy.

MR. ZEARFOSS: I'm informed that they're in the same line item in the appropriation. And those have been running about four and a half, 4.7 million a year, and the last payment is coming up in

August of 2002. So you'll have one installment in August and then that will be it for the paying off of that bond issue. There had been two payments, February and August, for the past -- since 1969.

COUNCIL PRESIDENT VERNA: All right. Thank you.

MR. ZEARFOSS: You're welcome.

COUNCIL PRESIDENT VERNA: I have one last question. What does the city receive annually from the 911 surcharge?

COMMISSIONER PEREZ: It's approximately a million dollars a month.

COUNCIL PRESIDENT VERNA: And what are the eligible uses of those funds?

COMMISSIONER PEREZ: There's a 60/40 breakdown, 40 percent for support of 911 related operating expenses and 60 percent is reserved for capital -- it's the opposite. It's the reverse. Let me have Vince Costello address that, please.

(Witness came forward.)

MR. COSTELLO: For the record, Vince Costello, Department of Public Property.

Councilwoman, the initial Act 78 legislation allowed municipalities to charge 60 percent in salaries and benefit costs out of the 911 funds collected. The remaining 40 percent could be set aside for 911 related equipment.

The act has recently been amended to allow us to charge 70 percent to salaries and benefits and 30 percent to equipment. We have not chosen to do so and instead of have kept the 60/40 ratio that we started off with.

COUNCIL PRESIDENT VERNA: Once the 800 megahertz system is completed, will the surcharge continue, and if so, how will the funds be used?

MR. COSTELLO: The surcharge will continue. There is always great need in a heavily used environment, equipment environment such as both police and fire to constantly update or change out equipment to meet the technologies available today. We won't have the same heavy, constant drain that we have on the radio system.

But nevertheless CAD systems, new telephone systems, recording equipment -- they take a lot of wear and tear, considering the amount of use that they get 365 days a year. So there will always be a need to replenish that equipment and use the 911 surcharge funds to do so.

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COUNCIL PRESIDENT VERNA: Thank you. The Chair recognizes Councilman Nutter.

COUNCILMAN NUTTER: Commissioner, I just have a couple items.

One, there is an issue up at Shawmont School where apparently the city owns a piece of property that may abut the Shawmont School. And I believe that we are looking to pave an area, possibly fence it, as a play area for the kids up there. I wrote to you back in December and copied the appropriate facilities person at the school district.

Do you have any additional information on what's going on with that?

COMMISSIONER PEREZ: I don't have an update. It was forwarded to law for action.

COUNCILMAN NUTTER: To who?

COMMISSIONER PEREZ: The law department for follow-up. I have a normally scheduled meeting with them tomorrow, and I'll be glad to give you the update as soon as possible thereafter.

Normally, there is not a big problem with school district properties outside of the usual indemnification and liability issues that we seem to always resolve.

COUNCILMAN NUTTER: With regard to cable television, notwithstanding the actions of the Congress, either in the '96 Telecommunications Act or possibly the Act of 2000 or any other act that the Congress may have passed, because of this franchise agreement situation and the general notion that everything is local and that we have control over the entire universe, there are many, many complaints about various aspects of the cable TV franchising system or service from either of the various providers.

It I think is fairly clear that notwithstanding our franchise agreement, we have very little control, as we would best understand the term, over what the cable operators do, whether it's on pricing, switch-over or conversion of system from analog to digital.

I know that there are provisions in our franchise agreements that talk about some service standards. But it is not clear again what we can do and what the extent of our authority or jurisdiction is to compel the service providers to provide the level of service that residents want.

So I have two questions in that regard. One, do you have any advice or recommendation as to what we can do to get quicker resolution to problems or ensure that the cable companies are adhering to the terms and conditioning of their service agreements in providing service to Philadelphians?

COMMISSIONER PEREZ: Deputy Commissioner Joseph James has been on point with this set of problems that seem to really have gotten bigger than they used to be in the past year. I'd like to ask him to talk about what we've done with the law department to try to hone in on the issue and get some improvement.

MR. JAMES: Good afternoon, Councilman.

The issue as far as the authority and advice that the department can provide to the city is that we are and have been for some time meeting with both of the cable operators in the City of Philadelphia on a monthly, if not quarterly basis, to discuss those specific issues.

We continuously track their service requirements and their service levels, and in some cases now we are taking a much harsher stand as we believe there are certain provisions in the franchise agreement that speak to customer service level standards as far as answering the call, billing questions, responding back to complaints about service issues. We have elevated the discussions to the managing director's office as well as to the law department that we think we maybe need to take a more aggressive stance.

We have not publicly done that because we have not had the opportunity to further discuss this with the Managing Director so that we can apprise her of the full context of the issue. And I think with the advice of the law department, we plan to take a stauncher position with both operators.

COUNCILMAN NUTTER: I appreciate that update. What's the recourse for the average subscriber? I mean, they're having whatever problem they're having. They often call us. We often refer them to you guys. Constituents often call back and say that either in some instances they didn't get resolution to their problem or a city person said, Well, we don't really control what goes on with the franchises, and they express at times the feeling that they're in a complete vicious cycle of going nowhere other than a 30, 40, 60, 70 dollar cable bill.

Now, I understand that cable is not necessarily one of the enumerated unalienable rights. I mean, you can either have it or not have it. But if you have it and you're paying your bill and you're not getting service and people have a contract with us, I think it's reasonable to expect that we might actually be able to do something.

What's the average subscriber left to do?

MR. JAMES: I mean, it's a fair and reasonable expectation that you should get the service that you certainly pay your money for. And in cases where it's been elevated to us where we have the opportunity to get some resolution, we have certainly worked our very hardest to do that.

We do find ourselves in the same position sometimes that we're somewhat inadequate in the way the law allows us to pursue certain endeavors because of the federal regulations that kind of supercede our local regulations.

And you're right that it's entertainment. It's a service. It's something that you don't necessarily have to have. But people should be able to get what they pay for.

COUNCILMAN NUTTER: Did you indicate that you've done a tracking over the past year or so of the various complaints?

MR. JAMES: Yes. We always track the service level complaints, and we discuss those complaints with the cable operators when we meet with them.

COUNCILMAN NUTTER: Can you provide to us, by way of the Chair, a report that indicates on a monthly basis what those complaints have been, where they've come from by either zip code designation, council district designation?

Obviously, I don't think we need to know what individual subscriber had some particular problem. But if you could get us a report that indicates what the nature of the problem was, the frequency, what franchise area or what council district, that would be very helpful.

MR. JAMES: We'll be certainly glad to do that.

COUNCILMAN NUTTER: You'll do that for either fiscal year or calendar year?

MR. JAMES: We will do that on a

calendar year. They provide us an annual report, and we will track it on a calendar.

COUNCILMAN NUTTER: Lastly, Commissioner Perez, from time to time I have need to be in touch with you with regard to a property transfer process. Every now and then what seemingly is a relatively simple transaction often becomes somewhat complicated.

You know that we've been trying to get resolution, for instance, to the property at 222 Hermitage Street, which has been I think through virtually every system that we possibly have. But in other situations, every now and then, something will get caught up or hung up somewhere.

Can you tell me, specific to that property but then more generally, are there some circumstances or red flags that cause certain transactions to get hung up?

COMMISSIONER PEREZ: The answer is yes. But the problem actually goes back to the evolution of the city's residential land bank to the early years of OHCD and the old Vacant Property Review program, council Ordinance 14600 I believe, which created an avenue for both acquisition and disposition of tax delinquent properties or donations of tax delinquent properties.

As programs have changed and used that methodology, the method by which transfers occur under the Vacant Property Review Committee's aegis, which is a council committee, not an administration committee, although we're well represented in the voting membership.

COUNCILMAN NUTTER: Yes, I would say.

COMMISSIONER PEREZ: The focus, what I'll say the focus of the broader group of agencies on an individual transaction really depends on how much funding is around for acquisition, treatment and disposition.

While all that's been going on for 15 or 20 years, we have acquired through sheriff's sale properties that have an inherent market value. They're not your $100 North Philly 1,000 square foot vacant lots. They're in decent or marketable neighborhoods, and they tend to sit around longer than the derelict ones until a request to acquire comes along, that is, from someone who's interested in seeing it going to sale or getting it through VPRC for market value.

The membership of VPRC doesn't always articulate market value when the initial discussions start. And what I'm trying to say here is if it's in the land bank, it's generally regarded as low value, waiting to be used in some housing program. But someone does come along every now and then and say, I want that. The protocol that's been established, in addition to disposition beginning with VPRC approval, also includes a council resolution supporting the transaction.

Unfortunately, because people have changed, because the programs change, although my unit, my real estate unit has been virtually the same except for one change in 15 years. On the other end of that, Redevelopment Authority, PHDC, OHCD, consolidations, expansions, reallocation of staff, the situation now is that RDA has that real estate responsibility.

When a person comes in and says I want that, it's near my house, it's next to me, I'll pay market value, if they don't say I'll pay market value, it just moves along to VPRC. And someone at VPRC is likely to say we shouldn't do that. We shouldn't give it to him or her. It was acquired with federal funds X years ago. It's got to be transacted for market value or the person is otherwise Section VIII, Category 1, Category 2 eligible.

I tend to get it when it's gone too far. I mean, the problem was brought to my attention by you actually, not by the several layers of people below me, some of whom are not my employees. At least at the VPRC level, Vacant Property Review Committee level, at least would give cause for someone to say let's see how this transaction gets done with individual X.

It's usually simple. It really is. It's usually next door, on the left or the right of the property, the rear of the property, and it's small. And if we tried to sell it, we could. But in all likelihood, the buyer would just offer it right back to the homeowner for a slightly higher take.

So there's a conflict that has not been clearly resolved over the years where sometimes those properties fall in that crack. The program staff of the housing groups takes it all away. And my real estate person who goes to those meetings may be the one who says no, we shouldn't do that. It should be sold or it should be market value negotiated through another agency.

COUNCILMAN NUTTER: Well, as I think you well know, though, in that particular case --

COMMISSIONER PEREZ: The individual who is victimized by all that really doesn't understand any of what I've just explained.

COUNCILMAN NUTTER: And I didn't before it actually happened. And the fact of the matter is that it had actually already been approved by the VPRC with public property personnel, whoever sits on the committee, and it got stuck later on. So I appreciate the explanation.

The question is we've passed the resolution that's necessary. When is this going to get completed and transferred to the particular constituent who has been incredibly inconvenienced by how long this particular transaction has taken when many, many others have been done in a much shorter period of time? When can I expect that this is going to be finished?

COMMISSIONER PEREZ: I will meet with Mr. Coates as soon as our calendars can accommodate the meeting in order to facilitate that transfer.

COUNCILMAN NUTTER: Commissioner, do you really think you need to have a meeting?

COMMISSIONER PEREZ: Well, it's my agency that put the block.

COUNCILMAN NUTTER: I understand that. I guess what I'm asking is for you to remove the block as the Commissioner. The person has done everything that they're supposed to do. Council has passed a resolution authorizing this transfer. I mean, this has been going on for well over a year, possibly two from start to finish.

COMMISSIONER PEREZ: I will clear it up.

COUNCILMAN NUTTER: I don't understand how anybody can stop something if a Commissioner says this is what we're doing. I guess I've not worked on that side of the house where you guys are. But it is beyond me to understand how any public employee, if given the proper direction, does not carry out their responsibility. And it is an insult to the citizens to have to deal with this kind of nonsense. It is a complete and utter at this point waste of my time to have to continue to chase around after one property.

The person has done everything that they were asked to do even when the rules were changed in the middle of the game. They dealt with that. So here we are today having this conversation. Your response was you would have to talk to Mr. Coates, see about schedules. It seems to me it's a phone conversation, end of discussion, should be completed tomorrow. And I need to have a date. I need a date certain.

I will not leave here until I have a date certain by which this will be done. This hearing will not end until I have a date.

COMMISSIONER PEREZ: And I'm not in a position to do that, Councilman. A real estate settlement isn't going to happen that fast. An agreement between the agencies to facilitate it --

COUNCILMAN NUTTER: I suggest you order some dinner.

COMMISSIONER PEREZ: -- can certainly happen that fast, but not the actual real estate settlement.

COUNCILMAN NUTTER: I want a date by which this entire transaction will be completed.

COMMISSIONER PEREZ: I will endeavor to

give you that tomorrow.

COUNCILMAN NUTTER: Not good enough.

COMMISSIONER PEREZ: Well, that's the limit of my jurisdiction at the moment.

COUNCILMAN NUTTER: What impacts your jurisdiction?

COMMISSIONER PEREZ: Pardon?

COUNCILMAN NUTTER: What is impacting or impeding your jurisdiction? You're the Commissioner of public property. Your agency is standing in the way of this transaction.

COMMISSIONER PEREZ: By charter, we cannot do direct transactions. It's got to be done through the Redevelopment Authority and the real estate unit.

COUNCILMAN NUTTER: The resolution for the Redevelopment Authority has been passed already.

COMMISSIONER PEREZ: I understand that.

COUNCILMAN NUTTER: They're not the obstacle here.

COMMISSIONER PEREZ: I understand that.

COUNCILMAN NUTTER: Well, what's the answer? What is the problem?

COMMISSIONER PEREZ: I don't know.

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COUNCILMAN NUTTER: All right. I'll take that.

COMMISSIONER PEREZ: I don't know. What I'm trying to explain to you is if it's been so focused on that everything is in place for a quick settlement, it'll happen as soon as the buyer can get to the settlement table.

COUNCILMAN NUTTER: The buyer has to be told when to come to the settlement table. They've been ready for two years.

COMMISSIONER PEREZ: That's right.

COUNCILMAN NUTTER: So what's your testimony? Tell me the result of this.

COMMISSIONER PEREZ: The result of this is that barring any legal problem that I'm not aware of -- and there doesn't seem to be one -- that the settlement should be authorized.

COUNCILMAN NUTTER: When?

COMMISSIONER PEREZ: As soon as the individual can be contacted and all paper work is in place.

COUNCILMAN NUTTER: When are they going to be contacted?

COMMISSIONER PEREZ: Generally,

Councilman, the only problem to a quick settlement, besides the buyer's availability, is title insurance. If it's in place and valid, settlement can happen any time they can get to the same table.

COUNCILMAN NUTTER: Commissioner, I want you to give me date specific when certain actions are going to take place. I want to know when you're going to have the necessary conversation with the Redevelopment Authority. I want to know when my constituent is going to be contacted. I want to know when a settlement conference of whatever it is that they have to do is going to be scheduled, and I need to know that today. I want to know when those items are going to happen. Somebody's got to be able to tell me that.

COMMISSIONER PEREZ: I'll be glad to call you later after I'm able to reach individuals and let you know what those circumstances are going to be.

COUNCILMAN NUTTER: So you're going to call me by midnight tonight and give me an answer to this question?

COMMISSIONER PEREZ: Yes.

COUNCILMAN NUTTER: I'm sorry?

COMMISSIONER PEREZ: Yes.

COUNCILMAN NUTTER: All right. Thank you. Thank you, Madam Chair.

COUNCIL PRESIDENT VERNA: The Chair recognizes Councilwoman Brown.

COUNCILWOMAN BROWN: Thank you, Madam President. Good afternoon, Commissioner. I have two questions.

One is a follow-up to the testimony of Alba Martinez and the Youth Study Center. Are you or your department involved in those discussions with regard to a site, a new site for the Youth Study Center?

COMMISSIONER PEREZ: We have a passive role. Our role is limited to the actual acquisition of the site. That's still in progress. That is being managed on their end. And as soon as a site is selected and it requires our involvement, we'll do that, primarily through the law department.

COUNCILWOMAN BROWN: And that's standard operating procedure?

COMMISSIONER PEREZ: Yes.

COUNCILWOMAN BROWN: Okay then.

Secondly, might you know or have any

idea how much vacant space we have here in City Hall?

COMMISSIONER PEREZ: I don't know the exact number because there are a number of spaces in the building that are not usable for storage or office space and are cost prohibitive for conversion purposes. They tend to be the outerway rooms in the upper levels of the 8th and 9th floor.

COUNCILWOMAN BROWN: I ask because more and more across the country and currently here in our city we have the federal government that's taken one of its buildings and responded to the still urgent need for child care.

Has that request ever been made to your department for the city to identify and use space for child care in a city building?

COMMISSIONER PEREZ: No. It's been an idea that's been tossed around in a space planning context where from time to time a sentiment has been expressed about how fortuitous it would be if we could, in the process of acquiring and renovating spaces, also create child care space.

COUNCILWOMAN BROWN: What has been the outcome of those discussions? How long ago were they?

COMMISSIONER PEREZ: They go back to the beginning of the space plan in 1992. The final plans for the buildings did not incorporate that kind of space because it was all high-rise and the ground floors did not lend themselves to child care facilities.

We really only literally acquired the One Parkway building. Everything else has been a rental or a gut rehab of existing space, like the Municipal Services Building.

COUNCILWOMAN BROWN: That was ten years ago. Has there been subsequent conversation or strategic thinking since?

COMMISSIONER PEREZ: Not that I'm aware of. But I wouldn't be on the front end of that kind of discussion.

COUNCILWOMAN BROWN: Where would that begin?

COMMISSIONER PEREZ: That would more than likely happen probably at cabinet.

COUNCILWOMAN BROWN: Cabinet level. Okay then. Thank you very, very much. I needed to know where to start with that. So you've given me some instruction. Thank you very much. Thank you, Madam President.

COUNCIL PRESIDENT VERNA: You're welcome. The Chair recognizes Councilman Rizzo.

COUNCILMAN RIZZO: Thank you, Madam Chair.

Commissioner, you jogged my memory about the 800 megahertz radio system, and I think it might be nice to get an update on this very significant project and very expensive project.

My first question, before you give me that update, I'd like to know, you refer to it as the $52 million expenditure. I did some arithmetic. Could you tell me how much from the conception of the project, engineering studies, consultants, how much money has been budgeted and then today how much has been spent? And I'm talking about every dime, from consultants, from A to Z.

MR. COSTELLO: We, of course, have not expended all the money for the system yet, Councilman. As you understand, we have not paid for the Police Department radios nor have we paid for some of the construction that's still going on, such as police dispatch center, airport dispatch center.

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I believe we've spent out of the current allocation approximately $34 million at this point in time.

COUNCILMAN RIZZO: Let me just make sure you understand what I want. I want how much total money has been budgeted, how money has been put aside. You referred to it as 52 million. In my arithmetic, it adds up to a different number.

How much total money has been budgeted for 800 megahertz radio, with all the dollars?

MR. COSTELLO: Approximately 56 million, as I recall, Councilman.

COUNCILMAN RIZZO: So why are we calling it a $52 million system?

MR. COSTELLO: That was the original contract directly with Motorola.

COUNCILMAN RIZZO: So now we've actually budgeted 56 million?

MR. COSTELLO: Yes, sir, we have.

COUNCILMAN RIZZO: Are we going to spend it all?

MR. COSTELLO: I believe we will. My number did not include, as you asked, the engineering studies dating back to 1992. I mean, you could probably place another million dollar price tag on the consultant dollars and engineering dollars spent.

COUNCILMAN RIZZO: So it will be a $56 million system, not a $52 million system?

MR. COSTELLO: Yes, sir.

COUNCILMAN RIZZO: I'm going to jump now -- and I think, Mr. Costello, you might want to stay there because I'm going to come back to you. No, let me ask the question now since we're on the communications stuff, the cable TV stuff.

How many stations, channels do we have control of right now? Let's just use an example, the Comcast system. How many channels, Board of Education, City of Philadelphia, which I only see activity -- like tonight I hope this is still being broadcast.

MR. COSTELLO: Yes, it is.

COUNCILMAN RIZZO: How many channels do we have control over in this government?

MR. COSTELLO: One channel, Channel 64. We do not count the school district as under our control.

COUNCILMAN RIZZO: Let's just talk about

that. How many channels in the school district?

MR. COSTELLO: Two channels for the school district.

COUNCILMAN RIZZO: And they are?

MR. COSTELLO: 55 and 56, I believe. 54 and 55.

COUNCILMAN RIZZO: 54 and 55. And we have no control over those?

MR. COSTELLO: They've been allocated to the school district since the franchising process in 1985.

COUNCILMAN RIZZO: And we have one channel, Channel 64 for council?

MR. COSTELLO: 64 for us.

COUNCILMAN RIZZO: And that is it? There's nothing else?

MR. COSTELLO: Drexel University has a channel. Community College has a channel. Who am I forgetting?

COUNCILMAN RIZZO: LaSalle.

MR. COSTELLO: LaSalle. And the state also has a channel.

COUNCILMAN RIZZO: Now, here's where I'm going with this. I turn those channels on and I rarely see anything on the Board of Education channel. And I was just in a conversation with an executive from Comcast and I said, Look, these channels seem to be just sitting there doing nothing. Even if it were temporary, for a temporary period of time, a year, two years, how much revenue do you think the city could receive from leasing these back to do paid programming?

And apparently, they are right now in discussion with Temple, from what I understand, to do a similar situation. Would there be any reason why we wouldn't want to possibly receive millions and millions of dollars from Comcast, which I understand it might be millions and millions, many millions of dollars to allow them to use these channels if we're not going to use them effectively? Because I don't see anything of substance, at least maybe it's not when I'm watching television.

But whenever I surf the channels, whether it's early in the morning, late at night, midday, I never see anything on Channel 54 or 55. Would we be open to discussion to possibly gain revenue from the use of those unused, in my opinion, channels?

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MR. COSTELLO: Councilman, I can tell you that prior to the renewal of franchise agreements with the current franchise holders there was a proposal floated specifically by Comcast to take control back of most of those collegiate channels. The colleges that were programming or at least attempting to program those channels were very, very unhappy about that, so unhappy and made their displeasure so pronounced that Comcast eventually dropped the idea.

There's always a thin line as to who actually has those channels. I mean, if the cable company is willing to compensate the city, state, university, school district, whatever the case might be for the give-back of those channels even on a part-time basis, that's probably something that could be negotiated.

It's not always been clear to me that they are -- they are really channels allocated by the cable operator, given to them through the FCC, that they have made available to us as part of a franchising commitment.

COUNCILMAN RIZZO: With public access, that controversy that we hear constantly -- I'm surprised they're not here, the folks, this year -- where would they be in this realm? Where is public access eventually supposed to show up on television? What channel?

MR. COSTELLO: The obligation that the franchisees have had to the city is that if and when the city creates public access, they will have to make channel space available.

COUNCILMAN RIZZO: So there would be some interest in talking to Comcast or whatever. Do we still have Wade?

MR. COSTELLO: We have Urban CableWorks in Area 2, and Comcast has Areas 1, 3 and 4.

COUNCILMAN RIZZO: Right. So there would be some interest in at least talking about some part-time use of our cable channels. And I know that presently one of the universities is talking -- I believe it's Temple. And I haven't heard this from Comcast. I heard it from a person that works there. That they are currently negotiating with Comcast to receive revenue for the part-time use of that channel.

MR. COSTELLO: Actually, Temple is negotiating with Comcast to gain back the channel which they relinquished a few years ago.

COUNCILMAN RIZZO: Maybe I have it backwards. But what I would like to explore is the fact that the Board of Education channels, are they -- in your opinion, are they well utilized or are they utilized or is it just that message that says Board of Education on it?

MR. COSTELLO: Well, I think down through the years the cable television staff at the Board of Education has been very pleased with the effort they've put forward to put programming out there, educational programming. Like everyone else, I think what they're able to do is somewhat constrained by budget.

I know when they first started they had a pretty substantial budget. That has been cut back significantly over the years. So they are constrained in the types of innovative things that they can do, more of the live programming and things of that sort.

So I think it's in the eye of the beholder. But I've always gotten the impression that the adult education and the ongoing educational programs are very worthwhile.

COUNCILMAN RIZZO: Thank you for that.

My final question is, and I've received calls from police officers and also have had people that are involved with Townwatch, Commissioner, tell me that the conditions of the police stations, especially the older police stations, are deplorable. Now, I have occasionally visited police stations. I visited one the 14th recently. It leaves a lot to be desired. It's an old building.

What about the need for furniture? Who is the person -- is it the captain of the district that's responsible to ask for chairs that aren't broken or get chairs that are broken replaced, a table, if they need a table?

From what I understand, some of our police stations are places that the average folk don't want to be, even a visit to report an incident or even just stop by to say hello to the police officers that work inside. What are the conditions of police stations? And you are responsible to take care of those. So I would appreciate your comments on why I'm hearing that they need a lot -- there's a lot to be desired in some of those locations.

COMMISSIONER PEREZ: There is a lot to

be desired. The Department of Public Property has been responsible for the mechanical maintenance and support of police buildings for several years now. They retained custodial support. And custodial support, in tandem with the behavior of the residents of the facility and visitors of the facility, are the two levels of effort that if one overcomes the other, the building does not look good no matter how well it's maintained mechanically, no matter how much the Capital Program Office invests in systems upgrade and general office area upgrades.

It's just a matter of time before the heavy traffic, the wear and tear. And the transient nature of the non-civilian police worker. They're in. They're out patrolling and they're back in. They don't stay there very long. The white collar support workers do. The command staff, of course, do.

We have not really been able to -- when I say "we," the city, the two departments combined, haven't been able to do much about that and probably won't until something different happens with the custodial resources.

We're not going to be able to change the inflow of traffic. Some places are much busier than others. They ought to be cleaned more often. The floors need to be addressed several times a day, not just once at night when no one's there. The same thing with toilets. They need constant service. They just can't be cleaned once at night on the second or third shift when there's almost nobody around.

So the custodial program has to address or the custodial resources has to address the peak public use, period. And I don't know how the department, the Police Department plans to do that.

COUNCILMAN RIZZO: What is the rationale? Is it the rationale because the Police Department doesn't feel secure to have Public Property do it? They would like to keep it under the umbrella of the Police Department?

COMMISSIONER PEREZ: I don't want to put words into their mouths, especially with a brand new Commissioner at the helm of the Police Department. But we, meaning the department, undertook a privatization initiative, focused on custodial improvements. That is one reason why City Hall looks so much better than it used to. There's direct accountability. There's penalties. There's a number of ways of addressing non-performance or poor performance.

The police have 23 field facilities in addition to the academy and the headquarters. The academy and the headquarters probably consume a substantial part of their custodial resources, not leaving a whole lot for the field per station.

COUNCILMAN RIZZO: Then are you proposing -- is it a given that if something would change, the only alternative is privatization? Does the Department of Public Property have the ability to do the same work that the Police Department does but with more attention to detail?

COMMISSIONER PEREZ: We haven't really analyzed that issue in detail. It involves an economic analysis and a comparison. It involves setting standards.

One of the keys for the difference we make in our buildings now is that we set a minimum standard that all the workers have to live up to. We set minimum standards for all of the areas that are accessible to custodians.

One item that we will always encounter

in police buildings is restricted areas. There's obviously evidence rooms and other sensitive information rooms. And sensitive material rooms don't lend themselves to be cleaned by some, forgive the expression, but a tourist custodian.

The police personnel are familiar. They're city employees. And they may have more access than a contracted worker. But they still don't have full access to some of the most sensitive areas.

To answer your question more bluntly, we really haven't pushed the analysis, the discussion that far. We can certainly look at it. Because of the nature of police facilities, hard use, two to three shifts, seven days, we have to look at it a little bit differently than these large buildings that we're dealing with.

COUNCILMAN RIZZO: What do we need to do tonight? And I don't need you to call me at midnight. What do we need to do to get the ball rolling here, to see, A, are the complaints that I'm hearing legitimate? And you kind of concur that there are some problems out there, that things could be better.

An example, there's a need for folding chairs. There's some need for tables at the 14th District.

COMMISSIONER PEREZ: That's a slightly different matter. And I'm sorry. I forgot that point which you had made.

Departments essentially budgetarily are on their own when it comes to equipping themselves with furniture and office equipment and related artifacts. If they don't plan for it in their Class 300 and 400 budget allocations, they can't do it very well.

In the case of a far-flung organization, a multi-site organization, the commissioners and senior staff would also have to deal with allocation. So that even if the funds are available for large conversions, allocation of one district versus another or one area versus another are issues that they have to address.

In the course of police area renovations, where we've collaborated with the Capital Program Office to do make-overs, change-overs, we automatically incorporate systems furniture. That limits the problem of old furniture to the practice of recycling free-standing furniture in private offices and file cabinets, which are so expensive they normally don't get wholesale replaced.

COUNCILMAN RIZZO: I understand. Great. Final question. I was handed a note to ask.

Whatever ever happened -- we have a missing cable TV channel. Whatever happened to Channel 63?

MR. COSTELLO: That channel was provided for the state PCN network. Just part time.

COUNCILMAN RIZZO: So then I asked the question how many channels do we have. Somebody left out Channel 63.

MR. COSTELLO: Channel 63 is programmed part time as primarily a character-generated channel. The actual video is done exclusively on Channel 64.

COUNCILMAN RIZZO: But Channel 63 still belongs to the city, and if you want it back or if you could earn six million dollars a year in revenue from Comcast, then that's on the table? It still belongs to you; correct?

MR. COSTELLO: Yes, sir.

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COUNCILMAN RIZZO: Okay. Thank you, Commissioner and Director Costello and the rest of the staff.

COMMISSIONER PEREZ: Thank you.

COUNCILMAN RIZZO: Madam Chair, thank you.

COUNCIL PRESIDENT VERNA: You're welcome. Thank you very much. I'd like to thank all of you.

The next department to testify is Fleet Management.

(Witness came forward.)

COUNCIL PRESIDENT VERNA: Mr. Harrison, we do have a copy of your testimony, which will be given to the stenographer. Because of the time, I would ask you to please summarize. We would appreciate it.

MR. HARRISON: My name is Riley Paul Harrison, the fleet manager for the Office of Fleet Management.

Thank you for allowing me to present my FY 2003 general fund budget. Our request is 50.4 million; for the water fund, it's 6.8 million, and for our aviation fund, it's 7.5.

Fleet Management will continue to implement the best fleet management practices and policies that govern both the acquisition, assignment, maintenance and relinquishment of all city-owned vehicles. We have an asset value exceeding $248 million, and it's because of our strict preventive maintenance program that we have been able to sustain a safe and reliable fleet.

We have also created a neighborhood snow-fighting fleet. We have implemented a Phase I fleet reduction city-wide. We continue to conduct general fund revenue generation through city-wide auction activities.

We continue to create educational opportunities for our people, including the high school internship program. We are continuing to expand our Automotive Service Excellence Master Certification program, and again focusing on our facilities and upgrading our infrastructure, which improves our productivity.

In conclusion, OFM will continue to provide quality service in a fiscally prudent manner. Thank you very much for the opportunity to appear before you, and I'll be happy to answer any questions you may have.

COUNCIL PRESIDENT VERNA: Thank you very much, Mr. Harrison.

With the new maintenance or custodial contracts that you will be combining at the facility at 3033 South 63rd Street, is that going to be an expanded facility for you?

MR. HARRISON: That is a consolidated facility that previously we were operating out of 7th and Pattison and Delaware and Spring Garden, and we relocated our resources there. We're approximately 60 percent operational from a Fleet Management standpoint. And we principally support the department of streets, their sanitation and highway division.

And the maintenance services for the building and the grounds is housed I believe in Public Property. They're the household company, if you will. I don't have an internal resource to do those types of services. So I have to depend on Public Property or the Streets Department, Building Services to do those maintenance activities.

COUNCIL PRESIDENT VERNA: Mr. Harrison, you do recall when the city was acquiring this property it was agreed upon that there would be an advisory committee?

MR. HARRISON: I'm aware of that, Madam President.

COUNCIL PRESIDENT VERNA: Has any action been taken on that?

MR. HARRISON: I don't know if the Capital Program Office has contacted anyone from the community group to start establishing the advisory board. But I will contact them through the managing director's office.

COUNCIL PRESIDENT VERNA: I would appreciate that because that was a commitment that was made.

MR. HARRISON: Yes, ma'am.

COUNCIL PRESIDENT VERNA: In your testimony, you indicate that you are going to have a decrease of 42 positions. How will you be able to effectively operate?

MR. HARRISON: Over the past 12 to 18 months, we've had a convergence of different activities. Principally over the last eight to nine years, the injection of new equipment within our fleet, opportunities to improve and enhance preventive maintenance, increased productivity and training of our personnel and the consolidation of two of our principal facilities, one at Delaware and Spring Garden and 7th and Pattison, gave us an opportunity to rethink some of our manning structures and had an opportunity to hand back, if you will, several of our budgeted positions.

COUNCIL PRESIDENT VERNA: Are the 42 positions presently unfilled?

MR. HARRISON: I believe yes, they're presently unfilled.

COUNCIL PRESIDENT VERNA: One of the areas of city school district consolidation that has been discussed is Fleet Management. Can you tell us what the status is?

MR. HARRISON: Yes, Madam President. We had several meetings with our current counterparts in the transportation division of the school district. We had an opportunity to compare resources and assets, visit their facilities. They visited our facility.

And we made 11 recommendations to them on some of our best fleet management practices that may improve or at least control some of their costs, one of those being the fuel management system that the city vehicles are under, which now they are fully implemented on the FUME system.

And there's some other basic recommendations that they are looking at I believe through this new group, this SRC group. And I'm sure there will be a lot of follow-up meetings as a result of our recommendations.

COUNCIL PRESIDENT VERNA: But are we actually still talking about consolidation?

MR. HARRISON: I don't know if you want to use the word "consolidate" as to look for opportunities to centralize certain functions. In other words, we have the established infrastructure for a fuel management system, which they agreed to share. We have an established accounting system, a FACTS system, fleet accounting computer tracking system. It's available to them if they want to take advantage of that.

We made recommendations in terms of life cycle of vehicles which we enjoy on the general fund side, and they're welcome to take some of those recommendations. And there's some other things in terms of training and challenging as far as facility upgrades. Again, they're recommendations that they can take or not take based on their needs.

COUNCIL PRESIDENT VERNA: Thank you.

On Page 5 of your testimony, the chart indicates an increase in the number of vehicles purchased in FY '03 from FY '02. How does that coincide with the directive to reduce the fleet? You indicated that your goal was to reduce the size of the city's fleet by 1 percent a year over the next three years.

MR. HARRISON: Thank you for asking the question. We had an opportunity to work with all our departments to have them identify, once we gave them the information on low-use vehicles based on the FUME's data. And we identified 81 pieces of equipment that were either under-utilized or each department indicated that they did not need anymore in their fleet.

So we moved them into either relinquishment activity or we moved them into the reserve snow fleet or into other activities as far as pooling equipment. And we plan to do this each year, to have a 1 percent reduction.

But what has happened is that as we

reduced the fleet of 81, there were new need programs. For instance, the Police Department, we were renting I believe 46 unmarked, nondescript police vehicles and it was more cost effective to purchase pre-owned vehicles over a five-year period. So, in fact, by reducing the 46 rentals that doesn't appear on our inventory, we increased our fleet by another 48 vehicles to offset the 46 that were rented.

There were other increases in our fleet, again, offsetting the 81. The Water Department added some Vactors and some inlet cleaning trucks for new need programs they had. We have our division of aviation because of some security issues that wanted to increase their fleet for perimeter security.

So those vehicles that were reduced resulted in adding vehicles because of new needs and new programs, approximately 83. That's a long answer for how we reduced and added.

COUNCIL PRESIDENT VERNA: Thank you, Mr. Harrison.

MR. HARRISON: But it gives us an opportunity to at least stabilize the fleet. In other words, take out the under-utilized, but because of the new need programs to add.

COUNCIL PRESIDENT VERNA: Thank you, Mr. Harrison. The Chair recognizes Councilman Rizzo.

COUNCILMAN RIZZO: Thank you, Madam Chair.

I'd like to start off by first saying that the fleet looks great, it runs great, and you've got some of the sharpest technicians. I would put them up against the private sector any day. I've talked to some dealerships that we do business with. And when those cars are brought back in warranty, they're basically told what's wrong with them. So I just want to compliment you on the looks of the fleet.

Also, to piggyback on what President Verna just said, I think I also made a suggestion that you look at PGW to see if there are any opportunities. And I would appreciate you pursuing with PGW's fleet manager -- I think his name is Leo Middlemiss -- to see if there's any opportunities there also for economies because I think as well as our fleet management is run, I think that they could learn a little bit.

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I don't say that with any disrespect. PGW apparently has some good people over there. But I think that it would be very helpful for them to have a meeting with Fleet Management to see the way you do things.

And I want to thank you for another program. And I think President Verna will be interested in this. It hasn't been discussed publicly yet, but I think it will be kind of a neat program.

The mural arts program, Madam Chair, might become mobile. We might, with the mural arts program and Fleet Management, be able to start doing some murals on our sanitation vehicles that will be mobile throughout the city. So Mr. Harrison has already been very cooperative. We met with Jane Golden from Fleet Management. We met with Commissioner Johnson from the Streets Department.

This is not an original idea. I want to be up-front about that. One of my staff was in Chicago, and Mrs. Daly run a very, very comprehensive mural arts program out there and they've included the sanitation vehicles. So we're going to see, since our program is doing so well here, that -- how it will work with all our fleet vehicles, especially the sanitation vehicles.

So thank you very much for being cooperative. You didn't resist at all to have your vehicles painted up distinctively. Thank you, Mr. Harrison.

COUNCIL PRESIDENT VERNA: That will not be an advertising program, will it?

COUNCILMAN RIZZO: It will be something geared towards the community. So in your district, Council President Verna, you're going to have to start thinking of some themes.

COUNCIL PRESIDENT VERNA: Some logo.

Mr. Harrison, I read in your testimony about the successful high school internship program. I think now that you're in Southwest Philadelphia you would really be a good neighbor by offering that service to Bartram High School students.

MR. HARRISON: We are always looking for additional schools that want to participate in the program. And I will make sure that we contact them to see if they have an industrial arts program that they would want to participate.

COUNCIL PRESIDENT VERNA: And I would

also try Southern High School. But as I said, as a good neighbor, since you are in Southwest Philadelphia now, Bartram High School, it really is not that far from your location.

MR. HARRISON: Okay.

COUNCIL PRESIDENT VERNA: The Chair recognizes Councilwoman Blackwell.

COUNCIL BLACKWELL: Thank you, Madam President.

I only wanted to thank Riley Harrison for his patience and for the work that Fleet Management continues to do for us in council. Thank you.

MR. HARRISON: Thank you, ma'am.

COUNCIL PRESIDENT VERNA: Thank you very much. We appreciate your patience.

The next department to testify was the Historical Commission. Dr. Tyler was here earlier. He is recuperating from surgery. However, we all have copies of his testimony. It will be made part of the record. And if council members have any questions that they would like to direct to Dr. Tyler, we will have a call-back date.

With that being said, we will stand in

recess until tomorrow, Tuesday, March the 5th, at 9:30. Thank you all very much.

(Proceedings ended at 6:31 p.m.)

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CERTIFICATE

WE HEREBY CERTIFY that the foregoing proceedings of the Council of the City of Philadelphia's meeting of the Committee of the Whole, on Monday, March 4, 2002, are contained fully and accurately in the stenographic notes taken by us, and that this is a true and correct transcript of same.

RE: Ordinance No. 020001

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JOSEPHINE CARDILLO, REGISTERED REPORTER AND NOTARY PUBLIC

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BRIAN L. RASCO, COURT REPORTER

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