



**Council of Senior Centers & Services of NYC, Inc.**

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**DEPARTMENT FOR THE AGING (DFTA) SENIOR CENTER RFP  
CITY COUNCIL COMMITTEE ON AGING HEARING**

**CITY COUNCIL COMMITTEE ON AGING  
CHAIR, COUNCILWOMAN MARIA DEL CARMEN ARROYO**

**SUBCOMMITTEE ON SENIOR CENTERS  
CHAIR, COUNCILMAN JAMES VACCA**

**December 4, 2008**

The Council of Senior Centers and Services (CSCS) is the central organization in NYC representing the 329 senior centers and a broad array of community-based services for the elderly. CSCS' 200+ members provide services to 300,000 older New Yorkers including multi-service senior centers, congregate and home-delivered meals, transportation, case management, home care, adult day services, elder abuse, intergenerational, caregiver supports, NORCs, health and wellness programs, housing, mental health, cultural events, opportunities for volunteerism and other services.

***CSCS commends City Council, under the leadership of Speaker Christine Quinn, for aggressively opposing the Department for the Aging's senior center rfp. There has been thoughtful, widespread concern about both the senior center rfp and the timing of it. This is not about resistance to change. It is simplistic to say "change is hard". This is about deep concern that the city's plan is seriously flawed and is being put forward at the wrong time. It does not reflect an understanding of how older New Yorkers live in their neighborhoods. It is a restructuring imposed on seniors, not planned with them. It does not incorporate concerns put forth by community service providers who understand the nuances of local neighborhoods, the seniors they serve and how to provide services. CSCS and its over 200 members support City Council's position and ask the Bloomberg administration to withdraw the senior center rfp.***

We are proud to learn that the NYC Feedback Citywide Customer Survey, released yesterday and announced at a press conference by Mayor Bloomberg and Public Advocate Betsy Gotbaum, reported a 92% customer satisfaction rate with senior centers. This is a remarkable accomplishment. Seniors are overwhelmingly satisfied with their senior center.

It has recently been announced that the nation has been in a recession since December, 2007. Older New Yorkers have been living this well before the official announcement. Seniors are becoming poorer in this city and are turning more to senior centers. This is not the time to pull the rug out from them by closing senior centers or causing turmoil. It is clear that the city is hiding behind the rfp process and plans to close a substantial number of senior centers.

Coupled with budget cuts, this is a recipe for disaster for seniors and for providers working hard on the front lines every day. Yes, staff will lose jobs. Most employees live in NYC – many of them living in the community they work in. While we count the loss of other types of jobs, the city needs to take into account the loss of jobs created through the community-based social services network. Social services is an economic engine for jobs as well as goods and services purchased locally yet no one talks about a bailout here.

As you will see by the seven pages of questions regarding the rfp, there is much confusion among service providers as to how to meet the requirements. Feedback from some service providers who attended the December 2<sup>nd</sup> bidder's conference was one of disappointment and frustration. DFTA staff did not answer questions, replying mostly that the information was already in the rfp or it will be in an addendum. If the rfp were clear, then providers wouldn't be asking the questions in the first place. It remains to be seen how much additional information will be in the addendum. DFTA remarked that many of the budget questions were "meal centric". This shows that DFTA doesn't understand that the senior centers are to some extent "meal centric" as they are one of the major nutritional programs for the elderly in the city. Meanwhile, the tock clicks towards January 23<sup>rd</sup>, the submission date.

On the most basic level, the \$500,000 for "neighborhood" senior centers and \$1 million for "hubs" is insufficient to carry out the programmatic requirements within the rfp. The typical \$350,000 senior center budget that DFTA funds now, usually has more money in it from City Council, Borough President, state funding and private fundraising. Simply put, if agencies have to utilize a substantial amount of the money for health and wellness programs, there will be insufficient money for meals, casework, transportation – all historically core services at senior centers. While no one is opposed to bringing in health and wellness programs or evidence based programs, the money is not there.

***At the bidder's conference DFTA stated that agencies would have to budget for:***

- Software used to report data to DFTA - The city would determine which software but not pay for it.
- Vehicles – Even if an agency has vans now, they have to budget as though they do not. This means the purchase of vans would have to be included in the budget. Transportation is now funded either within a senior center's budget or in a separate transportation contract.
- Rent – senior centers located in NYCHA, city owned or city leased sites, that do not currently pay rent, must include the cost of rent in the budget. DFTA maintains that rent will not be actually charged. After asking DFTA how they would know how much rent to include, DFTA's response was "do the research". That was not a particularly helpful response.
- Evidence based programs – these programs can be very costly to get staff trained. The Stanford model can cost \$15,000. DFTA stated that agencies can not assume in their budgets that resources from other city agencies like DOH will be available to the senior centers. If the city has resources for training, why are they withholding it from senior centers?
- Computers – If a senior center wants to be a "hub", it must have a computer lab. Cost to create a lab and purchase computers must be within the bottom line of the proposal.
- Nutritionist – There are requirements for use of a registered nutritionist in the rfp and the cost to be borne by the provider.

These are all new expenses. Add to this that City Council and Borough President funds that senior centers use to supplement costs of meals and services are already in the budget as the administration unilaterally took these funds and added them into the rfp.

Excluding centers by changing facility requirements - The physical plant requirements of the rfp will preclude many senior centers from even applying as they do not have enough rooms that can hold 25 people for an activity. In doing this, DFTA has changed the facility requirements in place for 35 years as many are located in church and synagogue buildings as well as other community sites. DFTA had to do this with the knowledge that many centers would be excluded from the rfp process and would close. Funding for renovations, where possible, is not available. NCOA Evidence-Based Health programs state the number of participants should ideally be 12-16.

DFTA's track record on restructuring and implementing services causes much concern. The case management restructuring, which began April 1, 2008, is still causing serious problems including inordinately high caseloads of over 100 (twice the 65 stated in the rfp), waiting lists for new clients to get assessed, gridlock in getting new clients on to meals-on-wheels because case managers are not able to make the initial assessment, and difficulty doing follow up because case managers are overwhelmed.

We remain concerned that the roll out of the meals-on-wheels restructuring will cause turmoil as it did in the Bronx. Transitions have been anything but seamless as DFTA claims. Before stability is reached in these programs, agencies are being asked to do rfp's for all the senior centers. It is too much, too quickly and DFTA needs to take responsibility to clean up the havoc it has caused before moving ahead with this rfp.

In this difficult fiscal time, as the chief advocate for the city's elderly, DFTA has an important role to play in uniting seniors, service providers and government to protect seniors. Seniors and the service network have entered this fiscal crisis overwhelmed and fearful of DFTA and its restructuring initiatives. Waves of budget cuts threaten to eviscerate services even further as need grows. Withdrawing the senior center rfp would signal to seniors and providers that DFTA and the administration have taken their concerns seriously and recognize that we must all put seniors first. It is all our jobs to provide stability for seniors during these unstable times.