My name is Eric Lee and I’m the director of policy and planning at Homeless Services United. Homeless Services United (HSU) is a coalition representing the mission-driven, homeless service providers in New York City. HSU advocates for expansion of affordable housing and prevention services and for immediate access to safe, decent, emergency and transitional housing, outreach and drop-in services for homeless New Yorkers. Thank you Chair Levin and Members of the General Welfare Committee for allowing us to testify before you today.

HSU strongly supports the creation of additional isolation capacity to enable anyone placed in a congregate or shared shelter space with the opportunity to self-isolate. This option should extend not only to those in the DHS shelter system but also to those sheltered in HRA DV shelters in shared units as well as those in DYCD shelters. In order to best protect the health and safety of our clients and staff, the City must provide opportunities to maintain social distance throughout all residential settings.

Without universal access to PPE equipment and ample testing for staff and clients, social distancing is the only effective way to stop the spread of COVID-19. We are heartened that the bill calls for private rooms for individuals, as shared rooms do not go far enough to prevent spreading from asymptomatic carriers. We have heard disconcerting accounts from street homeless individuals who did not feel safe sharing hotel rooms; some reported being placed with another person with a hacking cough. Our shelter providers were hesitant to send elder and other elevated risk clients to hotels out of concern that they might be placed with someone who could endanger their health.

Hotel capacity should be brought online Citywide to ensure that clients are able to stay in close proximity to their areas of support. Individuals are less likely to accept a hotel room if they do not know where they are going, and it’s far away from anything familiar. In terms of logistics, transportation to and from isolation hotels has been a major bottleneck that clogs DHS’ COVID hotline, and having hotels nearby the referring program could alleviate this issue.

While we strongly endorse the expansion of additional hotel capacity, significant new funding for staffing is needed to bring these units online in a timely manner. Given the physical layout differences of hotels compared to shelters, securing and regularly checking on people in private rooms takes more person-power than providers currently have, and DHS must provide incentive wages for ALL direct service staff, including security and residential aides in order to staff up these roles. Without adequate funding for personnel, expanding DHS hotel capacity will be take substantially longer.

This challenge staffing hotels belies the larger challenge our non-profit providers face managing essential staff without the proper recognition or resources needed from the City. Shelter providers are seriously struggling with maintaining staffing at their programs as staff become sick or call out for fear of becoming ill. OMB has committed to incentive pay for direct-service staff lines, but is so narrowly defining it that agencies estimates that only 20% to 40% of their shelter staff would receive an increase. It’s so small a percentage of staff that providers are actually concerned that giving it would
only further demoralize their workforce. Security and front desk attendants that ascertain that every person entering the shelter is not a health risk to other residents, facilities staff that clean and sterilize the rooms and public spaces, and residential aides who check on the well-being of the clients would not receive an increase. Homeless services staff are risking their lives, are not given hazard pay, and must do so without adequate supplies of PPE equipment. Being called “essential staff” rings hollow when it’s words not action.

We are grateful to the Council for recognizing these profound challenges and appreciate your support in righting these wrongs. Giving residents the option to have a private room to self-isolate is an important step and, if coupled with appropriate support for the nonprofits who would staff and operate these hotels, is something we believe could protect the health and safety of thousands of New Yorkers as we continue to grapple with this crisis. Thank you for the opportunity to testify.