

**Testimony of New York City Department of Homeless Services
Oversight: Food Access, Quality, and Inspections at DHS Shelters**

**Hearing before
New York City Council's Committee on General Welfare
November 21, 2019**

Good morning Chairperson Levin and members of the General Welfare Committee. Thank you for this opportunity to testify and speak on the important work to transform the haphazard shelter system that built up over many decades, and, in particular, food access, quality, and inspections at DHS Shelters. My name is Dr. Fabienne Laraque, and I am the Medical Director for the New York City Department of Homeless Services, joining me are our Administrative Nutritionist, Diana Salerno, and Corinne Schiff, Deputy Commissioner for Environmental Health, from the New York City Department of Health and Mental Hygiene (DOHMH).

Turning the Tide

As you know, in 2017, Mayor DeBlasio announced *Turning the Tide on Homelessness in New York City*, a plan that places community and people first in addressing homelessness: giving homeless New Yorkers, who come from every community across the five boroughs, the opportunity to be sheltered in their home boroughs, as close as possible to their support networks and anchors of life, including schools, jobs, health care, family, houses of worship, and communities they called home, in order to more quickly stabilize their lives. This will be achieved by ending the use of 360 “cluster” shelter and commercial hotel locations while opening 90 borough-based shelters in all five boroughs, which will shrink the Department of Homeless Services’ footprint by 45 percent and allow us to implement a more equitable system that takes into account the individual needs of the children and adults we must shelter. And we continue to make good on this promise - just earlier this week, we announced the planned conversion of 14 cluster buildings, used to house homeless families into over 200 affordable permanent housing units.

Office of the Medical Director

Our efforts to transform the past approach to providing shelter has included investments in how DHS delivers and ensures health care for those seeking or residing in shelter. One of those investments was adding appropriately licensed and experienced clinical staff to the office I manage – The Office of the Medical Director. These additional staff allow DHS to better respond to those in shelter with medical and behavioral health needs and to design, plan, and oversee such services.

The Office of the Medical Director has oversight with regards to medical, health, and mental health standards and related consultation needs of the DHS system. My Office, comprised of an integrated and complementary highly-skilled team: has implemented a successful overdose prevention program; is working with DOHMH and DHS' Program teams to provide hepatitis A vaccinations to street homeless clients and clients residing in mental health and substance use shelters; is developing tools and mechanisms for increasing access to care; is improving the quality of food and medical services; and works to develop standard guidelines and procedures in collaboration with the DHS Facility and Logistics Division and Program Divisions which, respectively, conduct overall shelter inspections and have oversight of all aspects of shelter operations and shelter compliance with standards.

Food Safety

Foodborne illness, obesity, and heart disease are conditions that are impacted by the food a person consumes, and particularly for foodborne illness, a serious health concern, we take strong measures to ensure shelters meet the state sanitary code, federal guidelines, the New York City Health Code, and the NYC Food Standards. The health and safety of our clients are of the utmost importance. For this reason, we invest in providing guidance, training, tools, and technical assistance for proper food services in shelters.

All shelter employees responsible for receiving, storing, preparing, and/or distributing meals to DHS clients must follow guidelines set forth by the agency, based on NYC Health Code Article 81, and federal and state guidelines. For instance, shelter employees must be trained on food safety; free of communicable diseases transmittable by food, water, hands or air; and compliant with work

requirements, such as wearing hair restraints and gloves, when serving food, and practicing good hand hygiene.

Sites that prepare, store, heat and/or distribute meals to DHS clients are required to obtain a food service establishment (FSE) permit from the Health Department and comply with the City Health Code and the food and nutrition standards. Sites are annually inspected by the Health Department, and must communicate the inspection results with DHS. As with all food service establishments in New York City, the DHS sites must have a certified NYC food handler, who has received food protection training, present during all hours of the food service operation and when receiving meals and food ingredients. DHS is regularly monitoring the status of shelters' FSE permits - as they are annual permits, there is constant surveillance of permit statuses across the DHS system to ensure sites are abiding by the DOHMH permit requirement.

Along with regular food service inspections completed by DOHMH, DHS, as part of the Routine Site Review Inspection which is our primary tool to inspect and assess the physical plant conditions of our shelters to ensure they are in compliance with codes, regulations, and laws, also conducts semiannual food service inspections of all DHS directly-run and contracted shelters. If necessary, a corrective action plan must be submitted to DHS within 14 business days.

Shelters are required to develop and implement procedures to ensure meals meet the food safety standards outlined in local, state and federal food sanitation codes, and to conduct regular food safety quality tests to maintain high food safety standards.

An important point to underscore is that when food is delivered, good food safety management is essential. Shelters must ensure that all food ingredients and meals received are not expired, are properly labeled, are of acceptable temperature and quality, and are subsequently stored according to sanitary standards.

To assist shelters in their efforts to ensure food safety and abide by food sanitation codes, DHS has issued a procedure bulletin that outlines all the food safety points I have mentioned, as well as other important areas to prevent food-borne illnesses, such as:

- Proper heating, reheating, or cooling of meals
- Monitoring of served food, refrigerator and freezer temperatures

- Proper washing of cooking and serving utensils and sanitizing of dishes and food contact surfaces

To support shelters in their efforts to comply with food safety standards, we develop training tools and guidance documents, offer corrective action plans, and are developing a webinar which shelter staff will have to review annually to keep up with their training on food safety. In addition, the DHS nutritionist provides regular technical assistance to shelter staff to assist with implementation of food safety standards.

Nutrition

Obesity is a risk factor for many health conditions including diabetes, cardiovascular disease, and hypertension. In New York City, obesity is epidemic: more than half of adult New Yorkers are overweight or obese. The rate of childhood obesity is rising - nearly half of all elementary school children and Head Start children are not at a healthy weight. As the Administration testified in the Council's Food Equity hearing in September, we are well aware of the concern of access to nutritious and healthy food for low-income New Yorkers — with our Administration partners and sister agencies, we are committed to increasing this access. An example is the creation and implementation of the *Plentiful* app to increase food pantry usage and help clients reduce the amount of money spent on food. Moreover, scientific evidence indicates that health outcomes are directly tied to access to adequate nutritious food.

New York City created the New York City Food Standards to reduce the prevalence of obesity-related health conditions by increasing access to healthy foods and improving dietary intake. These standards set forth the amount of nutrients, including sodium, protein, fat and sugar, and the types of food to be used (for example, whole grain products). Today, the Standards apply to the approximately 250 million meals and snacks per year that are served in places such as schools, senior centers, homeless shelters, child care centers, after school programs, correctional facilities, public hospitals and parks.

At DHS, we work closely with shelters to comply with the NYC Food Standards which contain standards for purchased foods as well as meals and snacks served. The Food Standards overarching goal is to help lower the risk of obesity, diabetes and cardiovascular disease for New Yorkers served

by City agencies – a goal carried out by increasing the amount of fiber and decreasing the amount of fat, sodium, and sugar in clients’ diet.

DHS’ Administrative Nutritionist works with DHS sites to monitor compliance with the NYC Food Standards, review meal menus and portions and conduct or review nutrient data analyses to ensure healthy nutrition standards are met, and provide technical assistance to staff on means to enhance nutrition and improve meal service.

Annually, DHS collects food metrics data from shelters and sites to comply with the NYC Food Standards and include in the Mayor’s Food Metrics Report, as well as to identify areas that need to be addressed to make sure clients are being served nutritious and healthy food.

Client Service

As part of our ongoing effort to improve the nutritional health of our clients, three initiatives we are currently working on are: to provide available interactive nutrition demonstrations with healthy eating lessons to increase acceptance and consumption of fruits and vegetables; implement *Meatless Mondays* at DHS-run shelters; and carry out an increase in the caloric intake standards for male clients in the shelter system to ensure clients receive sufficient calories for their daily living according to their needs. This particular change follows current federal dietary guidelines. Previously, the recommended calorie intake standard was 2,000 for both men and women.

We recognize that some of our clients come from different backgrounds and have different needs. For clients who have medical conditions or dietary restrictions, such as requiring kosher or hallal meals, DHS’ reasonable accommodation policy requires that their dietary needs are met.

As you’ve heard, DHS is committed to working with our shelters to ensure that our clients receive nutritious and safe meals. Thank you for this opportunity to testify and I look forward to your questions.