



**COMMUNITY BOARD 11**  
**1741 COLDEN AVENUE**  
**BRONX, NY 10462**  
**(718) 892-6262**  
**www.nyc.gov/bxcb11**

*Borough President Ruben Diaz Jr.*  
*Chairman Albert D'Angelo*  
*District Manager Jeremy H. Warneke*

## COMMITTEES

- Leadership*
- Community Development & Budget Priorities*
- Economic Development*
- Education, Culture & Youth Services*
- Ethics & Disciplinary*
- Health & Social Services*
- Housing*
- Land Use*
- Parks & Recreation*
- Public Safety*
- Sanitation & Environmental Protection*
- Transportation*

## December 2020 District Manager's Report

As I said in November, love CB11 or hate it: make your thoughts known publicly by rating us on Google: <https://g.co/kgs/4TgyAX>.

We have 15 reviews so far with a 4.9 star rating.

Here's what some reviewers have said so far:

### **Silvia D.**

2 reviews  
a month ago

Community Board 11 has a very hard working staff who endeavor to aid the residents of the area in many different ways. The Board is active on social media and has a very good, informative website. The employees and volunteers truly care about the community and actively work with residents, local police precinct, local elected officials, employers, etc to make the area the best it can be for all.

### **Lisa Roma**

1 review  
a month ago

The Board is very involved with the community it serves. They keep us informed about local current events and news. They are welcoming and inclusive. I find that they respond quickly and are very helpful and professional. Very well run Board.

### **Camille Knight**

3 reviews  
a month ago

CB11 board members, staff and neighborhood residents and business owners have been solid support for my family and I.

We are a medically ill family. We did not begin this way but became one over the years.

When Hillary Clinton said "it takes a village to raise a child," those words stayed with me throughout my college years and years as a social worker. It is those words that became core for my family, and CB11 became our village.

I cannot express enough the heartfelt gratitude I have for CB11.

### **Andrew Castillo**

1 review  
a month ago

Always a lovely experience visiting CB11. The staff are warm and serious, and the doors is always open to constituents with a query or quandary.

In an email I sent out on December 4, I said: CB11 is now on Yelp. Write us a review by clicking [here](#).

We have five Yelp reviews so far with a no star rating currently because the five reviews aren't recommended supposedly. Why? According to Yelp:

We get millions of reviews from our users, so we use automated software to recommend the ones that are most helpful for the Yelp community. The software looks at dozens of different signals, including various measures of quality, reliability, and activity on Yelp. The process has nothing to do with whether a business advertises on Yelp or not. The reviews that currently don't make the cut are listed below and are not factored into this business's overall star rating. [Learn more here](#).

Despite this, I'm particularly proud of one review and not just because the reviewer spoke well of me, but because he is someone who—and this is documented—has been coming to our meetings since at least the year 1985. In other words, he's been around a while and knows a thing or two about our community/Board:

Community Board #11 is one of the most effective government entities in the community. Their entire staff goes above and beyond to assist the community when help is needed. I wish some of the other city government organizations were as effective as CB#11. CB District Manager is a highly competent professional who responds to organizations needs all hours, not just 9-5.

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Being a public servant comes with many benefits. Whether you are a paid employee like myself or a volunteer such as a community board member, it's always nice (sarcasm) to be baselessly attacked as a misogynist, racist...or having unwanted individuals show up to your job and threaten you. Once upon a time, CB11 even had a blogger, who—because I'm originally from Illinois—called me a cow tipper and—because one of our board members is Jewish—said that our board member “should have been a lampshade,” “Hitler should have got [her] and [her] family.” All publicly on this person's blog. (This does not justify the blogger's actions, but the blogger most likely did not know that the Nazis actually did murder some of this board member's family. For those you unfamiliar with the lampshade reference, please consult this page:

[https://en.m.wikipedia.org/wiki/Lampshades\\_made\\_from\\_human\\_skin](https://en.m.wikipedia.org/wiki/Lampshades_made_from_human_skin).)

Most recently, I made my board members aware of a CB11 resident, who attacked some of us back in March. The only other thing I'll say about this resident at the moment is that he crossed the line with me in early December, which isn't the first time, but his actions did prompt me to learn of the following articles:

1. [How to Opt Out of the Most Popular People Search Sites \(lifehacker.com\)](#)
2. [How to Blur Your House in Google Maps' Street View \(lifehacker.com\)](#)

Both of which I highly encourage you to read and/or share with your family and friends.

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At the November 2020 Full board meeting as a result of the proposed by-law amendment to remove CB11's 2nd Vice Chair position, some board members expressed interest in how many other community boards have 2nd Vice Chairs.

Please see the [addendum](#) and be aware that some community boards give their 2nd Vice Chair a meaningful role and/or duties.

According to my colleague at CB4 in Manhattan, for example, their 2nd Vice Chair, per CB4's bylaws, runs a budget task force, which oversees their Board's annual Statement of District Needs and Budget Priority Requests as well as their response to the City's preliminary budget. In other words, their 2nd Vice Chair is the Chairperson of what we call the Community Development & Budget Priorities Committee.

At CB3 in Manhattan, their 2nd Vice Chair oversees meeting attendance.

The addendum is, of course, only a partial list of community board officers citywide. The emphasis is on 2nd Vice Chair, Treasurer and Sergeant at Arms/Parliamentarian, since those are germane to the proposed CB11 by-law amendments in November.

Please be aware that some other CBs have a parliamentarian, but unless that position is a member of the respective board's executive board, it is not included in the addendum.

It is worth noting that most CBs have less treasurers than they do 2nd vice chairs.

Lastly, some community boards have officer titles our board never seemed to have had, such as officers "At Large," which is probably a holdover from 1980s City government, which—in terms of the City Council—was ruled unconstitutional in federal court.

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On December 22, with the author's permission, I emailed the public—and prior to that, board members—the following COVID-19 reflection/experience, which was written by a BxCB11 resident, who prefers to remain anonymous:

#### The New Normal

Ever since the early 1990s, when I contracted pneumonia, I had been susceptible to colds and bronchitis. So, when I first started feeling bad in March, I doubled up on vitamins and Tylenol. I already had my flu shot, but my job couldn't be more demanding. So, I continued working for weeks until I found myself so tired that I could hardly get through the day.

When I began to cough and had shortness of breath, I read about the coronavirus and got tested. I was awaiting the results when I decided to see my doctor. She told me to take a

few days off, but before the day was over, I received a call from another doctor, informing me that I had tested positive for the virus and that I needed to stay home for the next two weeks.

Two days later, my friends were calling an ambulance because I could not breathe. It seemed that I had called them hysterical because I was alone, coughing, burning up and nauseous. Never having been to a hospital as a patient, I cried as the ambulance pulled away, watching my friends and home disappear behind.

The ambulance took me to a hospital in the Bronx I was not familiar with, Saint Barnabas. The nurses rushed me to the emergency room saying that my temperature was 103. They had given me an oxygen mask in the ambulance, and now, nurses and doctors began hooking me up to machines and using medical terms I never heard of, which scared me. The doctors started pumping me with medicine and oxygen, taking blood and asking questions. I spent three days in the emergency room, during which time I was sure that I was going to die, fighting to breathe. My head felt like someone was playing the kettledrums. I couldn't keep anything in my stomach, and there were beds all around me filled with people of all ages and nationalities, stacked against the walls of one huge room with the doctor stations in the middle. The noises of people moaning, crying, machine alarms going on and off and doctors barking orders were a constant until all became quiet from drugs and fatigue.

When I kept trying to ask the nurse questions, she told me to conserve my energy. I don't remember when I passed out, but when I awakened, an entire day had passed and my bedmates had all changed. At least 6 of them died. The nurse later informed me that I had suffered a stroke. She wanted to know if anyone in my family had heart trouble. I asked her to repeat what she had said. She informed me that I had a severe case of COVID-19 and my lungs and heart were not functioning correctly, causing problems with the left side of my body. By next morning, I was transferred to the Intensive Care Unit and remained there for more than two weeks. During this time, I was given a bed by a window that looked out over the rooftops adjacent to the hospital, making me wonder what was happening below.

My doctors and nurses visited me round the clock but always in space suits. I was so sick and lonely that I constantly cried. They attempted to put me on a ventilator, which brought back horrible memories of a man next to me in the Emergency Room, who literally fought not to be put on one. I hysterically declined. They explained that my lungs had shrunk and that they had given me several test medicines and were now going to try giving me plasma from a doctor who had survived the disease. If this didn't work, I was going to have to be put on a ventilator. Attempts to transfer myself to another hospital were denied, and I gave up trying to control the situation.

Slowly, I began to improve enough for me to try bedside rehab, although it was difficult hooked up to oxygen from the wall, and because I had experienced a myocardial infarction, I had to relearn walking and other basic functions all over again. I was told that due to the pandemic we weren't allowed any visitors. They had let me keep my cell phone, which allowed me to talk to friends. Without that and eventually a TV (my new best friend), I may not have survived as my roommates changed several times or I was alone in the room. And without Community Board 11 and management from my job calling to check in on me, I may have languished at that hospital even longer.

Another week passed, and I was told that I would be going to a rehab facility for further medical treatment. I had been at Saint Barnabas for a month and was still on oxygen. But they told me I needed to go as I had gotten better and I shouldn't remain there among the other COVID-19 patients.

Rehab began another three months of loneliness. I had a relapse of COVID that put me into isolation for three weeks. Rehab was difficult at first, as they tried to wean me off the oxygen concentrator and teach me how to get in and out of bed and care for myself. I was taught how to use a wheelchair and the call button. I needed to call someone to help me perform everyday things we take for granted. I felt more depressed and helpless. The aides who worked there became my friends, and many times they tried to bolster my spirits. I'll never

forget when they took me for my first shower. Because of COVID, one is only allowed bed baths. My first shower made me feel like a new person, from head to toe.

Once out of isolation, I got to actually meet some of my doctors and nurses, who tried to ease me out of my depression and loneliness. They were able to move me to a window bed where I could sit and read or just watch the people on the streets. I still had difficulty sleeping because I feared I would die in my sleep. My appetite was sporadic, and even though the food wasn't bad, I sometimes would not eat. During the last month of rehab, my friends passed by on the street to wave and bring me magazines. All the while, life had changed to what my doctor called the "new normal." In other words, my case had been severe, and I needed to understand that life would be different, that I'd have bouts of depression, fatigue, insomnia...and night sweats. Difficulty breathing would necessitate a bronchial pump, and in my case, there was the possibility that I wouldn't completely recover from my deficits.

I was outfitted with a wheelchair, a walker and all that would be needed for rehab at home. I had contracted another problem with the muscles and bones in my hips and legs and, therefore, given a "lifter" to help me get my legs and feet in and out of the shower and bed.

The therapists and I laughed because due to COVID, no one was allowed to use the gyms of the rehab facility. We were only allowed to do rehab in our rooms or in the hallways of our wards. In talking with some of my roommates, we felt cheated we weren't able to use the exercise equipment in the gyms. There were other things I experienced, which made me realize whether it was at the hospital or at rehab, management and staff were what both caused and solved problems.

The rehab facility eventually came to me about my health insurance, which would soon run out, making me responsible for the bill. I had been without pay since the end of June, and I had not given the bills which had been accruing a thought. I had always wanted to go home, but I had gotten used to my new friends and no care mode of living. Finally free of COVID, I

had people around me who cared and saw to my every need. I was scared to go home for many reasons. The fear of catching this dreaded disease again, for example, was still out there.

I had become more spiritual while at rehab, having prayers with some of the aides and nurses. One of them reminded me to ask the Lord what the next step was. The answer was to go home.

Four months after this horrible voyage started, the sun hit my face, and I was finally riding in a car on my way home. When we stopped in front of my house, my friends were waiting, and I first stared at them and my home for a long time. My friends helped me climb the stairs, and once inside, memories that flooded my mind made me cry.

I came home three days before my birthday, and it is now 5 months since I've been home. In March I was taking 2 medicines. I now take 15. Two of them are for hip and leg pain, which can be excruciating. Two for the heart. Asthma medications, a pump and others I won't try to explain. I've had sporadic therapy aides due to insurance problems and, therefore, had to learn to get through most of this by myself. The doctor was right: the new normal is fatigue, pain, difficulty ambulating, shortness of breath...and there are a few other items, which are too personal to discuss.

I haven't been out of my house since I came home. At least, if you don't count my therapist trying to get me to walk up and down my front steps. Virtual visits with doctors felt weird, not a real visit. How do I explain what I am feeling, how I'm breathing, the pain? My doctor seems sympathetic, like she understands. But does she? Does anyone? People ask me how I'm doing, but do they really want to know? COVID is disease few seem to comprehend. Even the best doctors say each patient's symptoms and travels are different. Some are cut and dry. Others are like a symphony of varied symptoms, which don't add up and should not exist in any one person, but they do. I have fallen once already. Being alone is not easy. My pain medicine puts me to sleep. My asthma pump is my third hand. Depression is always a problem,

but too many people have brought me to this point to make me give in and not accept life as it currently is, the new normal.

As I stated in the rest of my email, don't ask me for any identifying information for this person please.

Some responses I got from board members and the public:

1. I am in tears. I wish I knew and I am not ASKING YOU To say who, But when a person go through such a time as this. We need to embrace them and send them our love and support in any form. I hate to know someone this sick so close to us and I for sure cannot send a card due to the fact it is a secret. I respect that person wish, But please note If I can send a card to you so you can pass it on to them please let me know. God knows I have seen so many passed on and This is a testimony and an encouragement for me to keep trying to stay safe from this demonic creature call COVID19.
2. I think this should be shared widely. This person's experience could really help someone else. I hope this was therapeutic for the writer and I hope for a better "normal" soon
3. I was very moved by this person's experience with Covid. I am heartily sorry that he or she has gone through such a terrible and life-changing illness. No one should have to go through something like this and it pains me to think how many more others have gone through similar or worse. I live and work in this community and try to observe guidelines because I believe we have a moral responsibility to one another; to keep one another safe. It bothers me when I see others flouting the guidelines. And there are too many who do, im my opinion. Please tell this person they are in my prayers.

It was my hope that "The New Normal" would be the first among many COVID-19 experiences written by CB11 residents. As luck would have it, it was the first but definitely not the last write up:

#### Do Not Let Your Guard Down

I have worked in a hospital for 33 years, and since the start of the COVID-19 pandemic, I protected myself. However, on November 8, 2020, after going to church, I let my guard down.

On the 8th, in accordance with New York State restrictions that limited the size of religious gatherings, no more than 10 people were allowed in my church for hymnal session, which because of COVID-19 was recorded live. I was there because I play the drums. I am my church's only drummer. Present with me were my pastor, his wife, the assistant pastor, the technician, my wife and a few others. The pastor usually takes his mask off when he gives his

sermon or plays the guitar. Before leaving, we greeted and hugged each other and shook hands. My wife was the only one who stayed in the back of the room, keeping her distance.

Preparing to go to Guyana to see my parents, I needed a negative COVID-19 PCR test. I took the test on November 9 and got my results on the 10th, which came back negative. At 7am on the 11th, I boarded a flight to Guyana, but on my way, I started to develop a dry cough.

After reaching Guyana, I noticed that my throat was itchy. I also had chills and lost my sense of taste. I took Advil, and the symptoms disappeared.

The next morning, I woke up with pain in my skin and joints but no headaches. That afternoon, my pastor called to say that he tested positive for COVID and most likely contracted it from a funeral service. He wanted me to get tested because everyone who was at the hymnal session—excluding my wife—tested positive too. I told him where I was, and it seemed like I had COVID because of my symptoms. I drank ginger and lemon tea and took Advil at least three times a day. I was scheduled to come back to the United States on the 19th, but on the 14th, I could not bear the pain. At 10pm, I booked a flight to travel back home the following day.

Reaching home at 4pm on a Sunday, I rested and went for a COVID test in the morning. On Tuesday, I got my results and was told that I had to quarantine for the next 14 days. I called my doctor, who told me to buy a pulse oximeter to monitor the oxygen levels in my blood. I did. The average range was between 95 and 100 percent, but mine was between 76 and 79 percent. My doctor told me to go to the emergency room.

My sons took me, and after an X-ray, I was transferred to the ICU because my lungs were infected. They had given me three units of oxygen, hooked me up with an IV and gave me a medication called baricitinib, a drug authorized by the FDA two weeks prior for emergency use in combination with remdesivir for the treatment of COVID. The drug was a five day treatment.

After two days, I started to feel better. After three days, I improved enough to be taken out of the ICU and into a regular room. They reduced the oxygen units I needed from three to two. The fourth day, from two to one. Also on the fourth day, I got to eat solid food for the first time in a while. The doctor came back every hour to check on me and told me that on the fifth day, once I finished my last dose of medication, they will remove the oxygen unit and let me breathe on my own.

When the fifth day came, the unit was removed. The doctor came around 3pm, and everything was so good that he discharged me. I felt good but still a little weak.

I was home for a full week before I saw a pulmonologist, who cleared me with the condition that I continue to drink a blood thinner for nine more days (to prevent clots and a stroke).

All in all, I must say that COVID-19 is very rough and that I'm lucky to be alive. Even now after my recovery, I have slight memory loss, which may last a few more weeks.

Happy to be home, I am thankful for the nurses and doctors who treated me like family, but please do me and everyone else a favor. Please take care of yourself and do not let your guard down: wear a mask, practice social distancing, do not touch your face in public and wash your hands.

In response to this second COVID piece, someone said to me that ‘most of the people who have contracted COVID-19 so far have had bad experiences. So, what exactly is the purpose of showing these ones to the rest of CB11?’

I’m not sure that that’s exactly true. I mean, the definition of a “bad experience” is debatable. Regardless, my response was “both cases are a reminder of how bad things are, were or could be. A reminder not to let one's guard down.”

I'll also add that while there is or seems to be light at the end of this terrible tunnel, known as 2020 A.D., the terribleness clearly isn't over yet. It's going to carry into 2021, and not just economically, which—believe it or not—is reflected in the current cuts to community board budgets citywide (\$3,628 this fiscal year; \$8,153 next fiscal year).

If you have been following the news recently:

- The first Congressperson, 41 year old Congressman-elect Luke Letlow, just died of the virus (<https://www.politico.com/news/2020/12/29/luke-letlow-covid-congress-452218>).
- A nurse tested positive for COVID-19 more than a week after receiving the vaccine (<https://nypost.com/2020/12/30/california-er-nurse-tests-positive-for-covid-19-a-week-after-getting-vaccine/>).
- And the first U.S. case of the highly contagious United Kingdom variant was found in a Colorado man who had no travel history (<https://www.nytimes.com/2020/12/29/health/uk-coronavirus-variant-colorado.html>).

Despite all the negativity, I'm happy to share any positive COVID-19 stories, if anyone has one they would like to share. "Do Not Let Your Guard Down" is more positive than "The New Normal" in my opinion. I mean, our medicine and collective knowledge of COVID seems to have progressed to the point of providing better outcomes for those afflicted. Still, I admonish you to not let your guard down.

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The Comptroller's Office is performing an audit of all 59 community boards' websites. In the meantime, with the help of an intern, I more or less conducted my own audit, coming up with the following [addendum](#).

Someone said to me in response to me keeping tabs on the other boards that they don't appreciate me doing this. While I agree that some of my emails regarding this stuff can bend on the negative, I think it very much helps for everyone to see how all community boards city-wide are operating. CB11 doesn't nor should it live in a bubble.

As for the real audit, I said to the Comptroller's Office:

Historically, Bronx Community Board 11 (CB11) doesn't meet formally in December. It is meeting formally this December, however, after the Board was reminded that it should be meeting.

Most information for the purposes of your audit should be available via the CB11 website:

Calendar: <https://www1.nyc.gov/site/bronxcb11/meetings/calendar.page>

Agendas: <https://www1.nyc.gov/site/bronxcb11/meetings/agendas.page>

Minutes: <https://www1.nyc.gov/site/bronxcb11/meetings/minutes.page>

In accordance with the New York State Public Officers Law, Article 7, Sections 104.1 and .2, I print and post the CB11 meetings and events calendar in the storefront windows of the CB11 office, i.e. both the Morris Park Avenue and Colden Avenue sides, and I email notices of CB11 meetings to the news media. See attached examples, which were sent to the NYCity News Service, News 12, NY1, *The City*, *The Bronx Chronicle*...and/or the *Bronx Times Reporter*.

My interpretation of Public Officers Law, Article 7, Section 106.3 is that minutes of CB11's public meetings need to be available upon request two weeks subsequent to any public meeting and not necessarily posted on CB11's website. But because the City Charter says that CB11's website shall provide "minutes from past meetings for the past twelve months," our minutes do get published, although not immediately. There is always a lag time between our meetings and the final, formal adoption of minutes, which occurs at subsequent meetings. Despite the formal adoption process, minutes usually are published on the CB11 website in advance.

Sorry for the delay in just now sending you the above information. I'm probably neglecting something. COVID has been a real challenge for my Community Board, my staff and for me personally, but as I have previously stated to you and others, publicly and/or privately, I very much appreciate this audit because the CB11 staff strives to make Community Board 11 as open, informative and as transparent as possible.

And in a follow up to the Comptroller's Office, I said:

One thing I should add to my email from yesterday in response to the Comptroller's current audit of community boards is that while DOITT (the City Department of Information Technology) often does a phenomenal job in uploading pdf documents to CB11's (Community Board 11's) website, my staff and I didn't always have to rely on DOITT for this and other edits/updates.

Since the start of the pandemic, DOITT has taken away community boards' ability to make certain direct edits to their websites, which has created unnecessary lag time in updating our sites. DOITT is working on restoring our previous editing capacity. Until then, however, my staff and I am sometimes faced with problems such as this below, which can lead to problematic and/or stressful situations.

Sincerely,

Jeremy

District Manager  
Community Board 11  
Bronx, New York  
[www.nyc.gov/bxcb11](http://www.nyc.gov/bxcb11)

**From:** Warneke, Jeremy (CB)  
**Sent:** Thursday, November 19, 2020 6:26 PM  
**To:** Webmail  
Tin ; Alfred, Ronnel  
**Subject:** FW: Upload request

; Lau,

This was never done, it seems like.

**From:** Warneke, Jeremy (CB)  
**Sent:** Friday, November 13, 2020 12:56 PM

**To:** Webmail  
**Subject:** Upload request

Can the attachment be uploaded to the following location in Teamsite:  
assets/bronxcb11/downloads/pdf/meetings/minutes/2020/10?

Jeremy

District Manager  
Community Board 11  
Bronx, New York  
[www.nyc.gov/bxcb11](http://www.nyc.gov/bxcb11)

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On December 12, I emailed CB11 board members the [addendum](#). A majority of CB11 meeting minutes authored by board members since 2019 are authored by women, which on the surface doesn't seem equitable.