

**THE COUNCIL**

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*Minutes of the Proceedings for the*

**STATED MEETING**

*of*

Thursday, September 9, 2021, 2:18 p.m.

*The Majority Leader (Council Member Cumbo)  
presiding as the Acting President Pro Tempore*

Council Members

Corey D. Johnson, *Speaker*

Adrienne E. Adams	Vanessa L. Gibson	Mark Treyger
Alicka Ampry-Samuel	Mark Gjonaj	Eric A. Ulrich
Diana Ayala	Barry S. Grodenchik	James G. Van Bramer
Inez D. Barron	Robert F. Holden	Kalman Yeger
Joseph C. Borelli	Ben Kallos	
Selvena N. Brooks-Powers	Peter A. Koo	
Fernando Cabrera	Stephen T. Levin	
Margaret S. Chin	Mark D. Levine	
Robert E. Cornegy, Jr	Farah N. Louis	
Laurie A. Cumbo	Alan N. Maisel	
Darma V. Diaz	I. Daneek Miller	
Ruben Diaz, Sr.	Francisco P. Moya	
Eric Dinowitz	Keith Powers	
Daniel Dromm	Kevin C. Riley	
Mathieu Eugene	Carlina Rivera	
Oswald Feliz	Ydanis A. Rodriguez	
James F. Gennaro	Deborah L. Rose	

Absent: Council Members Brannan, Koslowitz, Lander, Menchaca, Perkins, Reynoso, Rosenthal, Salamanca, Vallone, and the Minority Leader (Council Member Matteo).

At the time of this Stated Meeting, there were two vacancies in the Council (22nd District, Queens and 48th District, Brooklyn) pending the swearing-in of the respective certified winners of the November 2, 2021 General Election.

The Majority Leader (Council Member Cumbo) assumed the chair as the Acting President Pro Tempore and Presiding Officer for these virtual proceedings. Following the gaveling-in of the Meeting and the recitation of the Pledge of Allegiance, the Roll Call for Attendance was called by the City Clerk and the Clerk of the Council (Mr. McSweeney).

After consulting with the City Clerk and Clerk of the Council (Mr. McSweeney), the presence of a quorum was announced by the Majority Leader and the Acting President Pro Tempore (Council Member Cumbo).

*There were 39 Council Members marked present at this Stated Meeting held in the Council Chambers at City Hall, New York, N.Y.*

### INVOCATION

The Invocation was delivered by Rabbi David Niederman, Executive Director & President, who serves as a spiritual leader at UJO of Williamsburg (United Jewish Organizations of Williamsburg and North Brooklyn), located at 32 Penn Street Brooklyn, N.Y. 11249.

Distinguished members of this legislative body of the greatest city.

Yesterday, the Jewish community celebrated,  
we all know, the Rosh Hashanah.  
We asked *Hashem* for a happy and healthy new year  
to our brothers and sisters and for all mankind.  
It is from the psalm prayers, that I stand here  
to pray for your wisdom and success  
because so many people depend on you.  
When we look for somebody to say  
the prayer for the high holidays,  
our sages instruct us to look for somebody  
who has a large family and is not rich  
but has a lot of needs  
thus he will pray from his heart.  
*Hashem* warms the heart.  
King David said in his psalms  
“A broken and pained heart, *Hashem* will not embarrass”.  
As you sit down to the solemn responsibility of passing policies and laws,  
making a difference to millions upon millions of people’s lives,  
the most important thing is that you should have a heart  
to understand and feel for those impacted by your decisions.  
Two days from now, our nation will memorialize  
the thousands who were murdered  
just a few blocks away from here  
as a result of an evil heart.  
Our nation at that time came together  
and our hearts connected.  
We shall strive to again feel for each other  
and to understand each other’s needs and vulnerabilities.  
Thus, I pray to *Hashem* to please bestow his blessing  
on the Speaker of this Council and upon all of its members.  
May you, the distinguished legislators who grace this hall  
continue to use your energies to keep our families safe,  
all of our cities and communities together,  
and to help all New Yorkers to succeed and rise

especially our friends and neighbors  
who have been devastated by Hurricane Ida's flooding.  
May *Hashem* the Almighty bestow his blessing on all of you  
as well as those who will soon chart a new path in their careers  
to succeed in all of your endeavors and uplift your neighbors.

So help us, *Hashem*,  
Amen.

Council Member Levin moved to spread the Invocation in full upon the record.

The Speaker (Council Member Johnson) acknowledged the death of thirteen New Yorkers who were killed the previous week as the remnants of Hurricane Ida devastated the city. He noted that those who lost their lives were our friends, neighbors, colleagues, and a child. The Speaker (Council Member Johnson) reminded those assembled that the storm was another tragic reminder of the climate crisis and emphasized more needed to be done to prepare the city from these extreme weather events.

The Speaker (Council Member Johnson) acknowledged the deaths of two first responders who had recently passed away from 9/11-related illnesses: retired FDNY Lieutenant Patrick J. Whalen who died on August 22, 2021 at the age of 62; and retired FDNY Firefighter Stephen Reilly who passed away on August 24, 2021 at the age of 68. The Speaker (Council Member Johnson) noted that these first responder deaths are included at each Stated Meeting as a reminder that the city's suffering and sacrifice did not end on September 11, 2001.

The Speaker (Council Member Johnson) asked for a Moment of Silence in memory of the thirteen victims who lost their lives due to Hurricane Ida as well as for their families who are coping with so much grief; and also in memory of FDNY Lieutenant Whalen and Firefighter Reilly.

At this point, a Moment of Silence was observed in the Chambers.

\* \* \*

The Speaker (Council Member Johnson) acknowledged the upcoming twentieth anniversary of the 9/11 attacks. 2,753 people were killed on September 11, 2001 in the terrorist attack at the World Trade Center in lower Manhattan. He noted those who died on that life-altering day were workers, visitors, and first responders – like many of us, they had started their day expecting to return home safely. He acknowledged that those who had died would always be remembered and that prayers for their families would continue and always be said. The Speaker (Council Member Johnson) added that the pain felt that day was also a reminder of the city's ability to rebuild and persevere despite going through such suffering.

The Speaker (Council Member Johnson) acknowledged that as of September 7, 2021, the number of coronavirus deaths in New York City had reached 33,914. He noted that despite having endured many tragedies in its history, New York's ability to recover and to remain the greatest city in the world should never be in doubt. The Speaker (Council Member Johnson) expressed his deep pride in the Council's work in making the city a better place for all New Yorkers.

The Speaker (Council Member Johnson) asked for another Moment of Silence for those that were lost twenty years ago in the 9/11 attacks.

At this point, a Moment of Silence was observed in the Council Chambers.

\* \* \*

**MESSAGES & PAPERS FROM THE MAYOR**

M-326

**Communication from the Mayor - Submitting the name of Dr. Simona Kwon to the Council for its advice and consent prior to her appointment to the Board of Health, Pursuant to Sections 31 and 553 of the City Charter.**

September 2, 2021

The Honorable Corey Johnson  
Council Speaker  
City Hall  
New York, NY 10007

Dear Speaker Johnson:

Pursuant to Sections 31 and 553 of the New York City Charter, I am pleased to present the name of Dr. Simona Kwon to the City Council for advice and consent prior to her appointment to the Board of Health.

Dr. Kwon is Associate Professor at NYU Langone. When appointed, she will fill a vacancy and serve for the remainder of a six-year term expiring on May 31, 2022.

I send my thanks to you and all Council Members for reviewing this Board of Health nomination.

Sincerely,

Bill de Blasio,  
Mayor

BDB:vm

cc: Dr. Simona Kwon, Associate Professor, NYU Langone  
Melanie Hartzog, Deputy Mayor for Health and Human Services  
Dr. Dave Chokshi, Commissioner, Department of Health and Mental Hygiene

Referred to the Committee on Rules, Privileges and Elections.

**COMMUNICATION FROM CITY, COUNTY & BOROUGH OFFICES**

M-327

**Communication from the New York County Democratic Committee recommending the name of Jenny Low to the Council regarding her appointment to the office of Commissioner of Elections of the Board of Elections pursuant to § 3-204 of the New York State Election Law.**

## ELECTION COMMISSIONER CERTIFICATION

To the Clerk of the New York City Council:

*I certify that:*

At a meeting of the Executive Committee of the New York County Democratic Committee, held on the 23rd day of August, 2021, at 370 7<sup>th</sup> Avenue, New York, NY 10001, under the provision of the Election Law and Rules and Regulations of the County Committee, a quorum being present, Jenny Low, residing at [redacted], was voted to be recommended by said committee as suitable and qualified person for appointment to the office of Commissioner of Elections to fill an existing vacancy in said office for the remainder of the current term expiring December 31, 2024, and that said designee is a registered voter of the County of New York and duly enrolled member of the Democratic Party.

Dated at New York, New York

August 23, 2021

Barry Weinberg

Secretary, New York County Democratic Committee

Referred to the Committee on Rules, Privileges and Elections.

**LAND USE CALL-UPS**

M-328

By The Chair of the Land Use Committee (Council Member Salamanca):

**Pursuant to Sections 11.20(b-d) of the Council Rules and Section 197-d(b)(3) of the New York City Charter, the Council hereby resolves that the actions of the City Planning Commission on related Application No. C 210291 ZSR (River North) be subject to Council review. This item is related to Application Nos. C 210289 ZMR and N 210290 ZRR.**

Coupled on Call-up vote.

The Majority Leader and the Acting President Pro Tempore (Council Member Cumbo) put the question whether the Council would agree with and adopt such motion which was decided in the **affirmative** by the following vote:

**Affirmative** – Adams, Ampry-Samuel, Ayala, Barron, Borelli, Cabrera, Chin, Cornegy, D. Diaz, R. Diaz, Dinowitz, Dromm, Eugene, Feliz, Gennaro, Gjonaj, Grodenchik, Holden, Kallos, Koo, Levine, Louis, Maisel, Miller, Moya, Powers, Riley, Rivera, Rodriguez, Treyger, Ulrich, Van Bramer, Yeger, the Majority Leader (Council Member Cumbo), and The Speaker (Council Member Johnson) – **35**.

*Present, Not Voting* – Brooks-Powers, Gibson, Levin, and Rose.

At this point, the Majority Leader and the Acting President Pro Tempore (Council Member Cumbo) declared the aforementioned item **adopted** and referred this item to the Committee on Land Use and to the appropriate Land Use subcommittee.

## REPORTS OF THE STANDING COMMITTEES

### Report of the Committee on Health

Report for Int. No. 1668-A

**Report of the Committee on Health in favor of approving and adopting, as amended, a Local Law to amend the administrative code of the city of New York, in relation to establishing a primary care services and patient navigation program.**

The Committee on Health, to which the annexed proposed amended local law was referred on August 14, 2019 (Minutes, page 2746), respectfully

#### REPORTS:

##### I. Introduction

On September 9, 2021, the Committee on Health, chaired by Council Member Mark Levine, held a vote on Proposed Introduction Number 1668-A (Proposed Int. No. 1668-A) and the item was reported out of committee. The legislation was previously heard by the Committee on Hospitals, chaired by Council Member Carlina Rivera, and the Committee on Health on October 31, 2019. Witnesses invited to testify included representatives from the Department of Health and Mental Hygiene (DOHMH), H+H, Federally Qualified Health Centers (FQHCs), advocacy organizations, and community-based organizations.

##### II. Background

Although the Affordable Care Act provided insurance to millions of Americans, roughly 4.7 percent of New Yorkers remained uninsured in 2018.<sup>1</sup> According to the 2018 Community Health Survey conducted by DOHMH, roughly 12 percent of New York City adult residents do not have health insurance,<sup>2</sup> and other estimates conclude that roughly 600,000 New York City residents are uninsured.<sup>3</sup>

According to a 2018 report from the Mayor's Office of Immigrant Affairs (MOIA), there are an estimated 560,000 undocumented individuals in the City and only 42 percent (about 235,000) are insured, leaving 324,800 without health insurance.<sup>4</sup> This number is expected to rise due to the United States Department of Homeland Security's (DHS) intention to alter the definition of "public charge," which would discourage immigrants and their families from accepting public benefits, including public health insurance.<sup>5</sup>

<sup>1</sup> New York State Department of Health, *Bucking National Trends, New York's Uninsured Rate Continues to Decline, Reaching a Historic Low of 4.7 Percent*, May 15, 2019, available at [https://www.health.ny.gov/press/releases/2019/2019-05-15\\_historically\\_low\\_uninsurance.htm](https://www.health.ny.gov/press/releases/2019/2019-05-15_historically_low_uninsurance.htm)

<sup>2</sup> DOHMH, *Central Harlem Community Health Profiles 2018*, 2018, available at <https://www1.nyc.gov/assets/doh/downloads/pdf/data/2018chp-mn10.pdf>

<sup>3</sup> New York City Mayor's Office, *Mayor de Blasio Unveils NYC Care Card, Details Progress Toward Launch of Guaranteed Health Care*, May 7, 2019, available at <https://www1.nyc.gov/office-of-the-mayor/news/239-19/mayor-de-blasio-nyc-care-card-details-progress-toward-launch-guaranteed-health-care#/0>

<sup>4</sup> Mayor's Office of Immigrant Affairs, *State of Our Immigrant City*, Annual Report March 2018, available at [https://www1.nyc.gov/assets/immigrants/downloads/pdf/moia\\_annual\\_report\\_2018\\_final.pdf](https://www1.nyc.gov/assets/immigrants/downloads/pdf/moia_annual_report_2018_final.pdf)

<sup>5</sup> Kaiser Family Foundation, *Changes to "Public Charge" Inadmissibility Rule: Implications for Health and Health Coverage*, August 12, 2019, available at <https://www.kff.org/disparities-policy/fact-sheet/public-charge-policies-for-immigrants-implications-for-health-coverage/>

## The Impact of Being Uninsured

Lack of health insurance can have a devastating impact on individuals, their families, and communities. In 2017, one in five uninsured adults in the U.S. went without needed medical care due to cost, and studies show that those without health insurance are less likely to receive needed preventative care and services.<sup>6</sup> Of the uninsured adults in 2017, 45 percent reported being without health insurance because of cost, 22 percent had lost or changed their employment, and 9 percent were not offered health insurance by their employer or were ineligible for coverage.<sup>7</sup> Compared to those with public or private insurance, those without insurance are more likely to postpone seeking care due to cost, have no usual source of care, and postpone or do not obtain needed prescriptions due to cost.<sup>8</sup> Individuals who identify as Hispanic are the most likely to be uninsured (19 percent), followed by those who identify as Black (11 percent), White (7 percent), and Asian (7 percent).<sup>9</sup>

In 2017, uninsured adults under age 65 were over twice as likely as those with insurance to have problems paying medical bills (29 percent vs. 14 percent), and nearly two thirds of these uninsured adults were unable to pay their medical bills at all (65 percent).<sup>10</sup> These costs are either taken on by the individual, which can result in medical debt, or by the providers, who will remain largely uncompensated.<sup>11</sup>

In April 2015, the Hastings Center and the New York Immigration Coalition released a report analyzing access to health care for those who are undocumented.<sup>12</sup> The report highlights the current gaps in our health care safety net in New York City.<sup>13</sup> For example, currently adults who are undocumented and are not Permanently Residing Under Color of Law (PRUCOL) are only eligible for Emergency Medicaid, which is limited in its scope and doesn't provide coverage of necessary services and items.<sup>14</sup>

## NYC Care

H+H remains the largest provider of health care to New Yorkers who are uninsured.<sup>15</sup> In 2014, “approximately half of the uninsured hospital stays and emergency department visits in the City occurred in the H+H system—a disproportionate share relative to every other health system in the City.”<sup>16</sup> H+H remains committed to providing care to all individuals, regardless of their ability to pay. H+H provides a plethora of specialty care services, including care for those with asthma, cancer, geriatric needs, sickle cell, mental health needs, and HIV/AIDS.<sup>17</sup> H+H also provides women's health, sleep disorder, rehabilitation, vision, and many other services.<sup>18</sup> Although H+H offers comprehensive specialty care services, accessing these services in a timely fashion is sometimes challenging; for example, as of February 2018, a person could wait up to six months to receive an appointment for specialty care services.<sup>19</sup>

<sup>6</sup> Kaiser Family Foundation, *Key Facts about the Uninsured Population*, December 7, 2018, available at <https://www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/>

<sup>7</sup> *Id.*

<sup>8</sup> *Id.*

<sup>9</sup> *Id.*

<sup>10</sup> *Id.*

<sup>11</sup> *Id.*

<sup>12</sup> The Hastings Center and The New York Immigration Coalition, *Undocumented Immigrants and Access to Health Care in New York City*, April 2015, [http://www.thehastingscenter.org/wp-content/uploads/Undocumented-NYC-Hastings-NYIC-report\\_final.pdf](http://www.thehastingscenter.org/wp-content/uploads/Undocumented-NYC-Hastings-NYIC-report_final.pdf)

<sup>13</sup> *Id.*

<sup>14</sup> *Id.*

<sup>15</sup> New York State Health Foundation, *Funding Charity Care in New York: An Examination of Indigent Care Pool Allocations*, 2017, available at <https://nyshealthfoundation.org/wp-content/uploads/2017/12/examination-of-indigent-care-pool-allocation-march-2017.pdf>

<sup>16</sup> Council of the City of New York, *Report of the Finance Division on the Fiscal 2018 Preliminary Budget and the Fiscal 2017 Preliminary Mayor's Management Report for the New York City Health + Hospitals*, March 29, 2017, available at <http://council.nyc.gov/budget/wp-content/uploads/sites/54/2017/03/819-HHC-2.pdf>

<sup>17</sup> *Specialized Health Services from A to Z*, H+H (2019) available at [https://www.nyhealthandhospitals.org/services/nyc\\_hh\\_-\\_specialized-health-services-from-a-to-z/](https://www.nyhealthandhospitals.org/services/nyc_hh_-_specialized-health-services-from-a-to-z/)

<sup>18</sup> *Id.*

<sup>19</sup> *Oversight - Examining the Status of "One New York: Health Care for Our Neighborhoods": What Progress Has Been Made and What Challenges Lie Ahead?*, Transcript (2019) available at [file:///C:/Users/EBalkan/Downloads/Hearing%20Transcript%20\(7\).pdf](file:///C:/Users/EBalkan/Downloads/Hearing%20Transcript%20(7).pdf)



To help those they serve, specifically individuals who are uninsured, H+H and the Mayor's Office announced the launch of the NYC Care program earlier this year, which has since been rolled out in the Bronx.<sup>20</sup> In addition to all of the services H+H has always provided to the uninsured community, those who are enrolled in NYC Care receive a membership card, can choose a primary care provider, and are given access to customer service representatives for assistance accessing care.<sup>21</sup> Those who are uninsured yet eligible for health insurance will receive assistance enrolling in insurance in an effort to lower the number of visits to H+H by uninsured, yet insurable, patients.<sup>22</sup> NYC Care promotes the use of primary and preventative care, which can help enrollees avoid unnecessary emergency room visits and promote better health outcomes and access.<sup>23</sup>

The Bronx is NYC Care's first site, with plans to expand to all five boroughs by 2021.<sup>24</sup> A recent study by New York City's Independent Budget Office (IBO) points out that NYC Care, which relies just on H+H facilities, is limited in its ability to impact all of New York City's most vulnerable districts.<sup>25</sup> For example, Queens Community District 7, which includes the neighborhoods of Flushing, Murray Hill, and Whitestone, does not have any public hospital facilities, yet had the highest uninsured rate in the entire City in 2017 (5.5 percent).<sup>26</sup> Similarly, Brooklyn Community District 7, which includes Sunset Park and Windsor Terrace, had an uninsured rate of 12.4 percent and no nearby public hospital facilities.<sup>27</sup>

### Previous Health Access Initiatives

In October of 2015, Mayor de Blasio announced the "Direct Access" health initiative to provide reliable coordinated access to affordable care for immigrants who are excluded from federal and state support.<sup>28</sup> This initiative eventually became the Action Health NYC initiative, a one-year pilot program in coordination with H+H, which was launched in the spring of 2016 and ended its one-year demonstration on June 30, 2017.<sup>29</sup> Eligible participants were at least 19 years old, earned less than \$23,760 for a single person or less than \$48,600 for a family of four, without insurance, and not eligible for Medicaid or other health insurance through the New York State of Health Marketplace.<sup>30</sup>

Along with Action Health NYC, there have been other initiatives to meet the needs of New Yorkers who are immigrants. For example, in Fiscal Year 2016 the Council launched the Immigrant Health Initiative, which focuses on decreasing health disparities among foreign-born New Yorkers by focusing on the following three goals: improving access to health care; addressing cultural and language barriers; and targeting resources and interventions.<sup>31</sup> The \$1.5 million initiative has helped undocumented New Yorkers across the City access health care and legal services.<sup>32</sup> Additionally, in June 2014, Mayor Bill de Blasio launched the Task Force on Immigrant

<sup>20</sup> New York City Mayor's Office, *Mayor de Blasio Unveils NYC Care Card, Details Progress Toward Launch of Guaranteed Health Care*, May 7, 2019, available at <https://www1.nyc.gov/office-of-the-mayor/news/239-19/mayor-de-blasio-nyc-care-card-details-progress-toward-launch-guaranteed-health-care#/0>

<sup>21</sup> H+H, *About NYC Care*, 2019, available at <https://www.nyccare.nyc/about>

<sup>22</sup> New York City Independent Budget Office, *Are NYC Health + Hospitals Facilities Located in Community Districts with the Highest Shares of Uninsured New Yorkers?*, July 1, 2019, <https://ibo.nyc.ny.us/cgi-park2/2019/07/are-hh-facilities-distributed-in-community-districts-with-the-highest-proportion-of-uninsured/>

<sup>23</sup> H+H, *Before You Get Sick*, 2019, available at <https://www.nyccare.nyc/before-you-get-sick>

<sup>24</sup> New York City Mayor's Office, *Mayor de Blasio Announces Plan to Guarantee Health Care for all New Yorkers*, January 8, 2019, available at <https://www1.nyc.gov/office-of-the-mayor/news/017-19/mayor-de-blasio-plan-guarantee-health-care-all-new-yorkers#/0>

<sup>25</sup> New York City Independent Budget Office, *Are NYC Health + Hospitals Facilities Located in Community Districts with the Highest Shares of Uninsured New Yorkers?*, July 1, 2019, available at <https://ibo.nyc.ny.us/cgi-park2/2019/07/are-hh-facilities-distributed-in-community-districts-with-the-highest-proportion-of-uninsured/>

<sup>26</sup> *Id.*

<sup>27</sup> *Id.*

<sup>28</sup> The Official Website of the City of New York, *Mayor de Blasio Announces Plan to Improve Immigrant Access to Health Care Services*, October 8, 2015, available at <http://www1.nyc.gov/office-of-the-mayor/news/701-15/mayor-de-blasio-plan-improve-immigrant-access-health-care-services>.

<sup>29</sup> Action Health NYC, available at <http://www1.nyc.gov/nyc-resources/service/6124/action-health-nyc>

<sup>30</sup> Action Health NYC Member Handbook, available at <https://www1.nyc.gov/assets/doh/downloads/pdf/ahnyc/action-health-member-handbook.pdf>

<sup>31</sup> New York City Council Finance Division Briefing Paper, *Report of the Finance Division on the Fiscal 2018 Preliminary Budget and the Fiscal 2017 Preliminary Mayor's Management Report for the Mayor's Office of Immigrant Affairs*, May 22, 2017, available at <http://council.nyc.gov/budget/wp-content/uploads/sites/54/2017/03/002-MOIA.pdf>.

<sup>32</sup> *Id.*

Health Care Access with the goal of increasing access to health care services among immigrant populations.<sup>33</sup> The Task Force identified key barriers to health care access and recommended steps the City can take to help immigrants overcome them.<sup>34</sup>

In October 2015, the Task Force released a report of its findings and identified six major barriers to health care access for immigrants: (1) lack of affordable care; (2) inadequate cultural and linguistic competency among health care providers; (3) limited service delivery and provider capacity; (4) lack of knowledge and understanding of care and coverage options available for immigrants; (5) lack of access to high-quality interpretation services; and (6) lack of knowledge and understanding of language and translation services available to immigrants and health care providers.<sup>35</sup> To address these barriers, the Task Force formed recommendations, including to create a direct access health care program to provide uninsured immigrants and others with access to coordinated primary and preventive health care services, expand the capacity of the New York City health care system to provide culturally and linguistically competent primary and preventive health care services to immigrants, conduct public education and outreach on health care and coverage options for immigrants and the organizations that serve them, and to increase access to high-quality medical interpretation services.<sup>36</sup>

### FQHCs

Currently, FQHCs do not participate in the NYC Care program. FQHCs are community-based health care providers that receive funds from the Health Resources & Services Administration (HRSA) Health Center Program.<sup>37</sup> FQHCs provide primary care in underserved areas.<sup>38</sup> They must meet strict requirements, such as providing care on a sliding scale basis based on a patient's ability to pay, operating under a governing board that includes patients, and providing care to all individuals regardless of their ability to pay.<sup>39</sup>

According to the Community Health Care Association of New York State (CHCANYS), New York City has over 500 sites that are a part of FQHCs, and these sites serve 1.3 million patients, or one out of every seven New Yorkers in the City.<sup>40</sup> Most people who visit FQHCs receive Medicaid or coverage through the Children's Health Insurance Program (CHIP), amounting to 63 percent of total patients as of 2019, while 14 percent are uninsured, 18 percent have commercial insurance, and 5 percent have Medicare.<sup>41</sup> Most patients (75 percent) identify as Latinx or Black, and 91 percent of patients live at or below 200 percent of the federal poverty line (FPL).<sup>42</sup> In the April 2015 report by the Hastings Center and the New York Immigration Coalition, they recommend FQHCs and H+H ambulatory centers, networked with specialists and services available in H+H centers, can together improve access to primary and preventive health care, and to specialty care and other services, through primary care medical homes.<sup>43</sup>

### Efforts to Expand the Essential Plan

Section 1331(a) of the Affordable Care Act (ACA) directs the Secretary of Health and Human Services to establish a Basic Health Program that provides an option for states to offer particular health coverage.<sup>44</sup> New

<sup>33</sup> Mayor's Task Force on Immigrant Health Care Access, *Improving Immigrant Access to Health Care in New York City*, October 2015, available at [https://www1.nyc.gov/assets/cidi/downloads/pdfs/immigrant\\_health\\_task\\_force\\_report.pdf](https://www1.nyc.gov/assets/cidi/downloads/pdfs/immigrant_health_task_force_report.pdf)

<sup>34</sup> *Id.*

<sup>35</sup> *Id.*

<sup>36</sup> *Id.*

<sup>37</sup> Health Resources & Services Administration (HRSA), *Federally Qualified Health Centers*, May 2018, <https://www.hrsa.gov/opa/eligibility-and-registration/health-centers/fqhc/index.html>

<sup>38</sup> *Id.*

<sup>39</sup> *Id.* & HRSA, *What is a Health Center?*, November 2018, <https://bphc.hrsa.gov/about/what-is-a-health-center/index.html>

<sup>40</sup> Community Health Care Association of New York State (CHCANYS), *Federally Qualified Health Centers, Community Health Care Champions in New York City*, 2019, [http://www.chcanys.org/clientuploads/\\_2019/Policy/FactsNYC19final.pdf](http://www.chcanys.org/clientuploads/_2019/Policy/FactsNYC19final.pdf)

<sup>41</sup> *Id.*

<sup>42</sup> *Id.*

<sup>43</sup> The Hastings Center and The New York Immigration Coalition, *Undocumented Immigrants and Access to Health Care in New York City*, April 2015, [http://www.thehastingscenter.org/wp-content/uploads/Undocumented-NYC-Hastings-NYIC-report\\_final.pdf](http://www.thehastingscenter.org/wp-content/uploads/Undocumented-NYC-Hastings-NYIC-report_final.pdf)

<sup>44</sup> New York State Department of Health, *Essential Plan New York's Basic Health Plan*, April 2016, [https://www.health.ny.gov/health\\_care/managed\\_care/essential/2015-dec\\_annual\\_rpt.htm](https://www.health.ny.gov/health_care/managed_care/essential/2015-dec_annual_rpt.htm)

York State’s Basic Health Program is known as the Essential Plan, and the plan is a lower-cost health insurance option for individuals with family incomes between 138 and 200 percent of the FPL and for individuals with family incomes below 138 percent FPL who are lawfully present in the United States but do not qualify for federally financed Medicaid due to their immigration status.<sup>45</sup>

As of now, more than 400,000 immigrant New Yorkers have not benefited from new coverage options, such as the Essential Plan, because of their immigration status.<sup>46</sup> State Senate bill S.3900, sponsored by Senator Gustavo Rivera, and State Assembly bill A.5974, sponsored by Assemblymember Richard Gottfried, would provide adult immigrants whose status makes them ineligible for federal coverage with access to health insurance coverage that is equivalent to the coverage offered to their citizen or lawfully present counterparts.<sup>47</sup> While the cost to the State to accomplish this goal is estimated to be over \$500 million, if it were implemented, the State would be saving close to the same amount in emergency Medicaid spending.<sup>48</sup> By providing health care to all individuals, regardless of immigration status, the bill would improve public health and access to health care.

### **III. Bill Analysis**

**Proposed Int. No. 1668-A:** A Local Law to amend the administrative code of the city of New York, in relation to establishing a primary care services and patient navigation program

The proposed legislation would require the Department of Health and Mental Hygiene or another agency or entity so designated by the Mayor to develop and manage a primary care services and patient navigation program (PCSPNP), which provides primary care services and applicable patient navigator services. Such services will be offered by medical service providers, including Health and Hospitals (H+H) facilities, federally qualified health centers (FQHC), and other not-for-profit and private medical service providers. PCSPNP must ensure that that primary care services are provided in each community district and that at least one participating acute care hospital providing specialty services is provided in each borough, and shall also offer a telemedicine service providing access for patients 24 hours per day, seven days per week.

Since its initial hearing, the bill was amended to replace the term “medical home” with “primary care services” and change the name of the program to “Primary Care Services and Patient Navigation Program” (PCSPNP). It was further amended to include a definition of “EPIC care link,” and the requirement that any provider that opts in to participate in PCSPNP will have access to EPIC care link and training on its use. The bill also now includes the requirement that if DOHMH is unable to ensure primary care services in each district, it must issue a report listing any community districts in which the department failed to ensure an acute care hospital and the reason for such failure.

**(The following is the text of the Fiscal Impact Statement for Int. No. 1668-A:)**

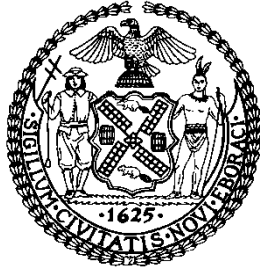
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<sup>45</sup> *Id.*

<sup>46</sup> The New York State Senate, *Senate Bill S3900*, 2019, <https://www.nysenate.gov/legislation/bills/2019/s3900>

<sup>47</sup> *Id.*

<sup>48</sup> *Id.*



**THE COUNCIL OF THE CITY OF NEW YORK  
FINANCE DIVISION  
LATONIA MCKINNEY, DIRECTOR  
FISCAL IMPACT STATEMENT**

**PROPOSED INTRO. NO:** 1668-A

**COMMITTEE:** Health

**TITLE:** A Local Law to amend the administrative code of the city of New York, in relation to establishing a primary care services and patient navigation program.

**SPONSORS:** Council Members Levine, the Speaker (Council Member Johnson), Rivera, Kallos, Chin, Eugene, Lander, Powers, and Louis.

**SUMMARY OF LEGISLATION:** Proposed Intro. No. 1668-A would require the Department of Health and Mental Hygiene (DOHMH), or another agency or entity so designated by the Mayor to develop and manage a Primary Care Services and Patient Navigation Program (PCSPNP), which provides primary care services and applicable patient navigator services. Such services will be offered by medical service providers, including Health and Hospitals (H+H) facilities, Federally Qualified Health Centers (FQHC), and other not-for-profit and private medical service providers. PCSPNP must ensure that primary care services are provided in each community district and that at least one participating acute care hospital providing specialty services is provided in each borough, and shall also offer a telemedicine service providing access for patients 24 hours per day, seven days per week.

**EFFECTIVE DATE:** This local law would take effect one year after it becomes law.

**FISCAL YEAR IN WHICH FULL FISCAL IMPACT ANTICIPATED:** Fiscal 2023

**FISCAL IMPACT STATEMENT:**

	<b>Effective FY22</b>	<b>FY Succeeding Effective FY23</b>	<b>Full Fiscal Impact FY23</b>
<b>Revenues</b>	\$0	\$0	\$0
<b>Expenditures</b>	\$0	\$0	\$0
<b>Net</b>	\$0	\$0	\$0

**IMPACT ON REVENUES:** It is anticipated that the proposed legislation would have no impact on revenues.

**IMPACT ON EXPENDITURES:** It is anticipated that there would be no impact on expenditures resulting from the enactment of Proposed Intro No. 1668-A as the designated agency would utilize existing resources to comply with the requirements of this legislation. There are areas within the five boroughs that are currently lacking FQHC's or H+H facilities, but the agency anticipates this being addressed with existing resources.

**SOURCE OF FUNDS TO COVER ESTIMATED COSTS:** N/A

**SOURCE OF INFORMATION:** New York City Council Finance Division  
Department of Health and Mental Hygiene

**ESTIMATE PREPARED BY:** Lauren Hunt, Financial Analyst

**ESTIMATE REVIEWED BY:** Nathan Toth, Deputy Director, NYC Council Finance Division  
 Crilhien R. Francisco, Unit Head, NYC Council Finance Division  
 Stephanie Ruiz, Assistant Counsel, NYC Council Finance Division

**LEGISLATIVE HISTORY:** This legislation was introduced to the full Council on August 14, 2019 and was referred to the Committee on Health (Committee). A hearing was held by the Committee, jointly with the Committee on Hospitals, on October 31, 2019, and the bill was laid over. The legislation was subsequently amended and the amended version, Proposed Intro. No. 1668-A, will be considered on September 9, 2021. Upon a successful vote by the Committee, Proposed Intro. No. 1668-A will be submitted to the full Council for a vote on September 9, 2021.

**DATE PREPARED:** September 7, 2021.

*Accordingly, this Committee recommends its adoption, as amended.*

**(The following is the text of Int. No. 1668-A:)**

Int. No. 1668-A

By Council Members Levine, the Speaker (Council Member Johnson), Rivera, Kallos, Chin, Eugene, Lander, Powers, Louis, Levin, Barron, Rose, Gennaro and Yeger.

**A Local Law to amend the administrative code of the city of New York, in relation to establishing a primary care services and patient navigation program**

*Be it enacted by the Council as follows:*

Section 1. Title 17 of the administrative code of the city of New York is amended by adding a new chapter 20 to read as follows:

**CHAPTER 20**

*Primary Care Services and Patient Navigation Program*

*§ 17-2001 Definitions. For purposes of this chapter, the following terms have the following meanings:*

*Department. The term “department” means the department of health and mental hygiene or such other agency or entity as the mayor may designate.*

*Epic care link. The term “epic care link” means a web based application that connects organizations to their community affiliates and allows for referrals into the city’s public health care system.*

*Primary care services. The term “primary care services” means medical services for which participants shall have a primary care physician or primary care practitioner, as such terms are defined in section 901 of the public health law, to help develop, direct and coordinate their plan and course of care and health management, including referrals for testing and specialty services and management of chronic conditions and diseases.*

*Patient navigator program. The term “patient navigator program” means a program which assists patients in accessing primary care and specialty services and in coordinating such care.*

*Telemedicine service. The term “telemedicine service” means a system that allows health care professionals to evaluate, diagnose and treat patients using telecommunications technology.*

*§ 17-2002 Primary care services and patient navigation program. a. The department shall, consistent with any applicable federal, state or local laws, develop and manage a primary care services and patient navigation program (PCSPNP). No individual shall be excluded from PCSPNP due to their immigration status, employment status or a preexisting medical condition.*

*b.1. PCSPNP shall offer individuals primary care services and applicable patient navigator services.*

2. Primary care services shall be offered by medical service providers, which shall include facilities operated by the New York city health and hospitals corporation and federally qualified health centers, as such term is defined in section 1395x(aa) of title 42 of the United States code, and may include other not-for-profit and private medical service providers. The department shall ensure that providers offer culturally responsive care that meets the primary language and cultural needs of those they serve.

3. The department shall ensure that primary care services are provided in each community district and that at least one participating acute care hospital providing specialty services is provided in each borough. In the event that the department, after making significant efforts, is unable to ensure primary care services in each district, the department shall issue a report to the speaker of the city council and post such report on the department's website listing any community districts in which the department failed to ensure primary care services as well as any borough in which the department failed to ensure an acute care hospital and the reasons for such failure. Such report shall be issued within one year of the effective date of the local law that added this section.

4. The department shall ensure that any provider that opts in to participate in PCSPNP will have access to EPIC care link and training on its use.

c. The department shall offer a telemedicine service providing access for patients 24 hours per day, seven days per week.

d. PCSPNP participating providers shall be offered the ability to connect to a regional health information organization for the electronic exchange of clinical information.

e. PCSPNP may impose a sliding scale fee schedule based on an individual's ability to pay for medical services provided but may not charge a participation fee. Such sliding scale fee schedule may correspond with the schedule set by federally qualified health centers, as such term is defined in section 1395x(aa) of title 42 of the United States code.

f. The department shall maintain a website accessible to the public with information about how providers and patients can opt in to PCSPNP.

g. The department may enter into contracts or agreements with third parties to implement the provisions of this chapter, including administering PCSPNP and managing communication with participants.

§ 2. This local law takes effect 1 year after it becomes law.

MARK D. LEVINE, Chairperson; ALICKA AMPRY-SAMUEL, ROBERT F. HOLDEN, KEITH POWERS, DARMA V. DIAZ, SELVENA N. BROOKS-POWERS; Committee on Health, September 9, 2021. Other Council Members Attending: Council Member Yeger.

On motion of the Speaker (Council Member Johnson), and adopted, the foregoing matter was coupled as a General Order for the day (see ROLL CALL ON GENERAL ORDERS FOR THE DAY).

### **Report of the Committee on Technology**

Report for Int. No. 1152-A

**Report of the Committee on Technology in favor of approving and adopting, as amended, a Local Law to amend the administrative code of the city of New York, in relation to requiring an online payment grace period.**

The Committee on Technology, to which the annexed proposed amended local law was referred on October 17, 2018 (Minutes, page 3879), respectfully

**REPORTS:**

## **INTRODUCTION**

On Wednesday, September 9, 2020, the Committee on Technology, chaired by Council Member Robert Holden, held a hearing to consider Int. No. 1152-A. The committee previously heard the original version of the bill, Int. No. 1152, on December 13, 2018. More information on Int. No. 1152-A and materials from the previous hearing can be accessed online at <https://go.usa.gov/xM4AW>.

### **I. BACKGROUND**

As cybersecurity becomes the new arms race between hackers and systems, or illegitimate versus legitimate users, governments and private entities alike must develop resilient policies to address an insufficiency of laws and regulations.<sup>1</sup> Cyber threats can result in data breaches and can significantly affect our daily lives.

As many aspects of our lives have become increasingly digitalized, they also have become increasingly vulnerable to potential cyber-attacks<sup>2</sup> or other technical system failures. For local governments, such incidents could be devastating. For example, in March of 2018, the City of Atlanta suffered a cyberattack that shut down municipal courts and left its residents unable to access key services like water bill payment systems and traffic tickets.<sup>3</sup> In May of 2019, Baltimore, Maryland suffered a ransomware attack that froze thousands of its government computers and also disabled dozens of citizen services. In December 2019, a cyberattack crippled the City of Pensacola's network, which shut down the telephone systems, internet servers, and online payment systems at sanitation and energy departments.<sup>4</sup> In January of 2020, the State of New York's computer network suffered from a large cyberattack that temporarily knocked out access to several important state databases, right as the State was gearing up to deal with the COVID-19 pandemic.<sup>5</sup> Most recently, in June 2021, the New York City (NYC) Law Department was reportedly hacked, and lawyers were temporarily unable to access important documents.<sup>6</sup> Other recent cyberattacks include New York's Metropolitan Transportation Authority and ParkMobile, a mobile parking app that's popular in New York to pay for street parking.<sup>7</sup>

As some websites maintained by NYC agencies handle licensing, ticketing and take credit card payments, it is essential that people and businesses are not penalized for technical system failures that are beyond their control. In the event that a NYC government website used by residents to make online payments to the City of New York is disabled due to electronic system failure, Int. No. 1152-A would establish a 48-hour grace period to ensure that people and businesses are able to make payments following the restoration of the website without incurring late fees or interest.

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<sup>1</sup> John P. Dever, Captain James A. Dever, *A Democracy of Users*, 6 JL & CYBER WARFARE 8, 9 [2017].

<sup>2</sup> Ellis Talton, *A Lack of Cybersecurity Funding and Expertise Threatens U.S. Infrastructure*, FORBES, April 23, 2018, <https://www.forbes.com/sites/ellistalton/2018/04/23/the-u-s-governments-lack-of-cybersecurity-expertise-threatens-our-infrastructure/#10e8ce7f49e0>.

<sup>3</sup> See Ellen Cranley, *8 Cities that have Been Crippled by Cyberattacks — and What They Did to Fight Them*, BUSINESS INSIDER, Jan 27, 2020, <https://www.businessinsider.com/cyberattacks-on-american-cities-responses-2020-1>.

<sup>4</sup> See Ellen Cranley, *8 Cities that have Been Crippled by Cyberattacks — and What They Did to Fight Them*, BUSINESS INSIDER, Jan 27, 2020, <https://www.businessinsider.com/cyberattacks-on-american-cities-responses-2020-1>.

<sup>5</sup> Lucas Ropek, *Before COVID-19 Hit, New York Suffered a Cyberattack*, GOVTECH MAGAZINE, 21 April 2020, <https://www.govtech.com/security/Before-COVID-19-Hit-New-York-Suffered-a-Cyberattack.html>.

<sup>6</sup> Benjamin Weiser, *Fallout from Hack of City Law Department Could Linger for Months*, NEW YORK TIMES, July 9, 2021, <https://www.nytimes.com/2021/07/09/nyregion/nyc-law-department-hacked.html>.

<sup>7</sup> See *The M.T.A. Is Breached by Hackers as Cyberattacks Surge*, NEW YORK TIMES, June 3, 2021, <https://www.nytimes.com/2021/06/02/nyregion/mta-cyber-attack.html>; see Michael Gartland, *Cashless Parking App Introduced in NYC Last Year Victim of Data Breach*, NEW YORK DAILY NEWS, April 30, 2021, <https://www.nydailynews.com/news/politics/new-york-elections-government/ny-nyc-parking-app-parkmobile-data-breach-20210430-3nbu4fpqezh4xm7zbfzpq3ety-story.html>.

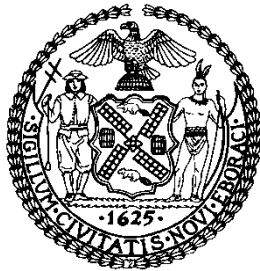
**II. ANALYSIS OF INT. NO. 1152-A**

The legislation would amend the Administrative Code of the City of New York to establish a 48-hour grace period for a system failure that disables a City website used to make online payments and that lasts 24 hours or longer, during which time neither late payment fees nor interest should be incurred for any payment due during the time of the system failure. Affected City agencies would also have the discretion to extend the grace period by up to seven days. This bill would take effect 120 days after it becomes law.

**Update**

On Thursday, September 9, 2021, the Committee adopted Int. No. 1152-A by a vote of three in the affirmative, zero in the negative, and zero abstentions.

**(The following is the text of the Fiscal Impact Statement for Int. No. 1152-A:)**



**THE COUNCIL OF THE CITY OF NEW YORK  
FINANCE DIVISION  
LATONIA MCKINNEY, DIRECTOR  
FISCAL IMPACT STATEMENT**

**PROPOSED INTRO. NO: 1152-A  
COMMITTEE: Technology**

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**TITLE:** A Local Law to amend the administrative code of the city of New York, in relation to requiring an online payment grace period. **SPONSOR(S):** By Council Members Koo, Yeger, Holden and Vallone.

**SUMMARY OF LEGISLATION:** Proposed Int. No. 1152-A would establish a 48-hour grace period for a system failure that disables a City website used to make online payments and lasts 24 hours or longer, during which time neither late payment fees nor interest should be incurred for any payment due during the time of the system failure. The bill would also allow affected City agencies to extend the grace period by up to seven days.

**EFFECTIVE DATE:** This local law would take effect 120 days after it becomes law, except that the office of the mayor and any other agency may take such measures prior to such date as are necessary for implementation of this local law, including the promulgation of rules.

**FISCAL YEAR IN WHICH FULL FISCAL IMPACT ANTICIPATED:** Fiscal 2023

**FISCAL IMPACT STATEMENT:**

	<b>Effective FY22</b>	<b>FY Succeeding Effective FY23</b>	<b>Full Fiscal Impact FY23</b>
<b>Revenues</b>	\$0	\$0	\$0
<b>Expenditures</b>	\$0	\$0	\$0
<b>Net</b>	\$0	\$0	\$0



**IMPACT ON REVENUES:** It is estimated that this legislation would have no impact on revenues.

**IMPACT ON EXPENDITURES:** It is estimated that there would be no impact on expenditures resulting from the enactment of this legislation. Impacted agencies would be able to use existing resources to fulfill the requirements of this legislation.

**SOURCE OF FUNDS TO COVER ESTIMATED COSTS:** N/A

**SOURCE OF INFORMATION:** New York City Council Finance Division

**ESTIMATE PREPARED BY:** Florentine Kabore, Financial Analyst

**ESTIMATE REVIEWED BY:** John Russell, Unit Head  
Noah Brick, Assistant Counsel

**LEGISLATIVE HISTORY:** This legislation was introduced to the Council on October 17, 2018 as Int. No. 1152 and was referred to the Committee on Technology (Committee). The Committee heard the legislation on December 13, 2018 and the legislation was laid over. The bill was subsequently amended, and the amended version, Proposed Int. No. 1152-A, will be heard by the Committee on September 9, 2021. Upon successful vote by the Committee, the bill will be submitted to the full Council for a vote on September 9, 2021.

**DATE PREPARED:** September 8, 2021.

*Accordingly, this Committee recommends its adoption, as amended.*

**(The following is the text of Int. No. 1152-A:)**

Int. No. 1152-A

By Council Members Koo, Yeager, Holden, Vallone, Barron, Rose and Gennaro.

**A Local Law to amend the administrative code of the city of New York, in relation to requiring an online payment grace period**

*Be it enacted by the Council as follows:*

Section 1. Chapter 8 of title 23 of the administrative code of the city of New York is amended by adding a new section 23-806 to read as follows:

§ 23-806 *Online payment grace period.* a. *For the purposes of this section, the following terms have the following meanings:*

*Electronic system.* The term “*electronic system*” means any website, network, online infrastructure or internally or externally accessible electronic systems constructed or maintained by or on behalf of the city.

*Electronic system failure.* The term “*electronic system failure*” means a malfunction, or unauthorized denial of service, in an electronic system that makes it impossible for one or more persons to make payments to a city agency.

b. *In the event that an electronic system failure disables, for 24 hours or more, an electronic system used by persons to make payments to an agency, such affected agency shall establish a 48-hour grace period after such system is restored, during which no late payment fees or interest will be incurred for any payment due in the time period during which such electronic system failure disabled such system, provided that if only certain persons owing payments to such affected agency are unable to make such payments due to an electronic system failure, such affected agency shall allow such persons to file claims to forgive late payment fees and interest accrued during such electronic system failure. Nothing in this section shall be construed to require such affected*

*agency to establish a grace period in addition to any grace period separately required by law or rule unless an electronic system failure extends to or beyond the end of such separately required grace period.*

*c. When an agency is required to establish a 48-hour grace period pursuant to this section, the agency head shall have the discretion to extend such grace period to a period not exceeding seven days; provided that for mayoral agencies such discretion shall be exercised by the mayor; and further provided that for boards and commissions such discretion shall be exercised by the chair of such board or commission.*

§ 2. This local law takes effect 120 days after it becomes law, except that the office of the mayor and any other agency may take such measures prior to such date as are necessary for implementation of this local law, including the promulgation of rules.

ROBERT F. HOLDEN, *Chairperson*; KALMAN YEGER, ERIC A. ULRICH; Committee on Technology, September 9, 2021.

On motion of the Speaker (Council Member Johnson), and adopted, the foregoing matter was coupled as a General Order for the day (see ROLL CALL ON GENERAL ORDERS FOR THE DAY).

### **Report of the Committee on Transportation**

Report for Int. No. 1789-A

#### **Report of the Committee on Transportation in favor of approving and adopting, as amended, a Local Law to amend the administrative code of the city of New York, in relation to side guards.**

The Committee on Transportation, to which the annexed proposed amended local law was referred on October 30, 2019 (Minutes, page 3629), respectfully

#### **REPORTS:**

#### **INTRODUCTION**

On September 9, 2021, the Committee on Transportation, chaired by Council Member Ydanis Rodriguez, held a hearing to vote on Int. No. 1789-A. Int. No. 1789-A, sponsored by Council Member Rodriguez, is a local law in relation to side guards. A previous version of this bill was heard on October 24, 2019 at a joint hearing with the Committee on Transportation and the Committee on Public Safety. At this hearing, the Committees heard testimony from the New York City (NYC) Department of Transportation (DOT), the NYC Police Department, advocates, and other interested stakeholders.

On September 9, 2021, the Committee on Transportation passed Int. No. 1789-A by a vote of seven in the affirmative, zero in the negative, with zero abstentions.

#### **BACKGROUND**

##### Vision Zero

In January 2014, Mayor Bill de Blasio announced that his Administration would commit to a “Vision Zero” initiative aimed at eliminating traffic fatalities from NYC’s streets by 2024, especially those involving

pedestrians and cyclists.<sup>1</sup> Vision Zero seeks to achieve its goals in a number of ways, including street redesigns and roadway enhancements, more effective enforcement strategies, regulatory and legislative changes, robust public education and awareness, and safety improvements to the City’s vehicle fleet.<sup>2</sup> Since Vision Zero became official City policy, agencies have transformed to prioritize safety and increase the number of new projects that help the public.<sup>3</sup> These projects have shown encouraging results, including: the City’s speed camera program reducing speeding by over 60% in locations near schools where cameras operate; increases in traffic enforcement by the NYPD to enforce moving violations most likely to kill or seriously injure; and increases in the implementation of state-of-the-art training and safety education among for-hire vehicles, public bus drivers, and City fleet drivers, among others.<sup>4</sup>

Traffic fatalities in NYC have fallen significantly, from 701 in 1991, to 381 in 2000, to an all-time low of 202 in 2018, to 246 fatalities in 2020.<sup>5</sup> 2020 marked the first year on record with fewer than 100 pedestrian deaths.<sup>6</sup> In addition, looking at the five-year averages from before Vision Zero became City policy, total fatalities are now 10% lower, and pedestrian fatalities are 37% lower.<sup>7</sup> From 2014 to 2020, as part of Vision Zero, the City: installed 1,259 speed cameras; installed 135 protected bike lane miles, with a total of 1,375 miles of protected and conventional bike lanes; provided 130,103 Taxi and Limousine Commission (TLC)-licensed drivers with updated Vision Zero training; issued 84,414 Vision Zero summonses through TLC enforcement; installed 11,327 telematics systems for City Fleet-Non Emergency Vehicles; and implemented turn calming treatments at 468 intersections.<sup>8</sup>

### Side Guards on Trucks

In NYC, trucks comprise about 8 to 12% of traffic,<sup>9</sup> but account for a large number of pedestrian and/or cyclist fatalities. Large truck crashes are more likely to result in a pedestrian or bicyclist fatality than crashes involving passenger vehicles and are more likely to be side-impact crashes due to the likelihood of being pulled into the space between the front and rear axles of large trucks.<sup>10</sup> Side guards are devices that prevent pedestrians or cyclists from falling into the exposed space between the front and rear axles of large vehicles.<sup>11</sup> Side guards, after being implemented nationwide throughout the United Kingdom in the 1980s, led to a 61% and a 20% decrease in fatalities among bicyclists and pedestrians, respectively, colliding with the side of a truck.<sup>12</sup> While current federal regulations require rear impact guards on trailers and semi-trailer trucks to reduce the risk of death or serious injury when passenger vehicles rear-end large trucks, there are no federal regulations requiring side guards.<sup>13</sup> However, several localities have adopted laws, resolutions, or ordinances requiring side guards, including: New York, Seattle, Chicago, Boston, Portland, and Washington D.C.<sup>14</sup>

In December 2014, U.S Department of Transportation Volpe Center (“Volpe”)<sup>15</sup> and the NYC Department of Citywide Administrative Services (“DCAS”), which operates the City’s fleet,<sup>16</sup> conducted and published a

<sup>1</sup> NYC. Vision Zero. *Vision Zero in New York City*. Available at: <https://www1.nyc.gov/content/visionzero/pages/>.

<sup>2</sup> *Id.*

<sup>3</sup> *Id.*

<sup>4</sup> *Id.*

<sup>5</sup> NYC. Vision Zero. *Vision Zero-Year 7 Report* (April 2021). Available at: <https://www1.nyc.gov/assets/visionzero/downloads/pdf/vision-zero-year-7-report.pdf>

<sup>6</sup> *Id.*

<sup>7</sup> *Id.*

<sup>8</sup> *Id.*

<sup>9</sup> NYC. DOT. *Improving the Efficiency of Truck Deliveries in NYC* (April 2019). Available at: <https://www1.nyc.gov/html/dot/downloads/pdf/truck-deliveries-11189.pdf>.

<sup>10</sup> NYC. Vision Zero. *Vision Zero-Year 7 Report* (April 2021). Available at: <https://www1.nyc.gov/assets/visionzero/downloads/pdf/vision-zero-year-7-report.pdf>

<sup>11</sup> *Id.*

<sup>12</sup> *Id.*

<sup>13</sup> 49 C.F.R. § 571.223.

<sup>14</sup> US Department of Transportation. Volpe Center. *Truck Side Guards Resource Page*. Available at: <https://www.volpe.dot.gov/our-work/truck-side-guards-resource-page>.

<sup>15</sup> US Department of Transportation. Volpe Center: *About Us*. Available at: <https://www.volpe.dot.gov/about-usa>. (Volpe is a center of transportation and logistics expertise operating under the US Department of Transportation).

<sup>16</sup> NYC owns and operates the largest municipal fleet in the nation, with over 30,000 vehicles.

study on side guards for the City’s “Vision Zero” initiative.<sup>17</sup> The final report identified at least 4,734 City fleet vehicles appropriate for side guard installation.<sup>18</sup> Following the report, the City passed Local Law 56 of 2015 requiring side guards to be installed on vehicles weighing over 10,000 pounds in the City fleet and vehicles licensed by the City for waste hauling services, no later than January 1, 2024.<sup>19</sup> The 8-year timeline was designed to give the City sufficient time to install side guards to new City vehicles, which is more cost efficient than retrofitting old vehicles.

Over 3,600 City fleet vehicles now have side guards installed, of which 53% have been based on new vehicle purchases and 47% done as vehicle retrofits.<sup>20</sup> In 2020 alone, 867 vehicle side guards were installed, with 2020 having the largest number of installations since 2015.<sup>21</sup> As of the end of 2020, over 80% of all trucks eligible for side guards within the City fleet have been completed, making the program the largest side guard safety program of its type in the United States.<sup>22</sup>

### **ANALYSIS OF INT. NO. 1789-A**

Int. No. 1789-A would amend the existing timeline for equipping all large vehicles in the City fleet and all trade waste vehicles with side guards, moving the deadline from January 1, 2024 to January 1, 2023. Starting with contracts registered with the Comptroller after January 1, 2023, side guards would also be required for large vehicles utilized to fulfill contracts with the City of at least \$2 million. Contractors utilizing ten or fewer large vehicles would be given 12 months following a notice to proceed to outfit trucks with side guards, and contractors utilizing more than ten large vehicles would be given 18 months to complete side guard retrofits. The law would require that agency contracts involving covered vehicles to contain the side guard requirement, and penalties of up to \$4,000 per vehicle could be issued for lack of compliance.

This local law would take effect immediately.

### **UPDATE**

On September 9, 2021, the Committee on Transportation passed Int. No. 1789-A by a vote of seven in the affirmative, zero in the negative, with zero abstentions.

**(The following is the text of the Fiscal Impact Statement for Int. No. 1789-A:)**

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<sup>17</sup> Alexander K. Epstein et al. NYC DCAS. *Truck Sideguards for Vision Zero: Review and technical recommendations for Safe Fleet Transition Plan pilot deployment* (Dec. 2014). Available at: <https://trid.trb.org/view/1348740>.

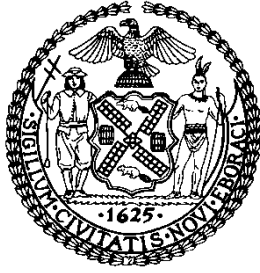
<sup>18</sup> *Id.*

<sup>19</sup> Local Law 2015/56.

<sup>20</sup> NYC. Vision Zero. *Vision Zero-Year 7 Report* (April 2021). Available at: <https://www1.nyc.gov/assets/visionzero/downloads/pdf/vision-zero-year-7-report.pdf>

<sup>21</sup> *Id.*

<sup>22</sup> *Id.*



**THE COUNCIL OF THE CITY OF NEW YORK**  
**FINANCE DIVISION**  
**LATONIA MCKINNEY, DIRECTOR**  
**FISCAL IMPACT STATEMENT**  
**PROPOSED INTRO. NO: 1789-A**  
**COMMITTEE: Transportation**

**TITLE:** A Local Law to amend the administrative code of the city of New York, in relation to side guards.  
**SPONSORS:** Council Member Rodriguez.

**SUMMARY OF LEGISLATION:** Proposed Intro. No. 1789-A would accelerate existing deadlines for vehicle side guard implementation in the City fleet and for trade waste hauling vehicles from January 1, 2024 to January 1, 2023. This bill would also require that side guards are equipped on any large vehicle to fulfill a contract with the City of at least \$2 million, starting with contracts registered on or after January 1, 2023. Side guards are vehicle-based safety devices that prevent pedestrians, cyclists, and others from being caught in the otherwise exposed space between the front and rear axles of large vehicles. Side guard requirements would not apply for street sweepers, fire engines, car carriers, off-road construction vehicles, or any specialized vehicles or vehicle types on which side guard installation is deemed impractical by the department. Failure to comply with side guard contract requirements shall include, but not be limited to, a penalty of up to \$4,000 for each city contracted vehicle that is found to be out of compliance with the legislation.

**EFFECTIVE DATE:** This local law would take effect immediately. However, the local law would only apply to contracts registered by the comptroller on or after January 1, 2023, and would not apply to renewals, exemptions or modifications of contracts entered into prior to January 1, 2023.

**FISCAL YEAR IN WHICH FULL FISCAL IMPACT ANTICIPATED:** Fiscal 2023

**FISCAL IMPACT STATEMENT:**

	<b>Effective FY22</b>	<b>FY Succeeding Effective FY23</b>	<b>Full Fiscal Impact FY23</b>
<b>Revenues</b>	\$0	\$0	\$0
<b>Expenditures</b>	\$0	\$0	\$0
<b>Net</b>	\$0	\$0	\$0

**IMPACT ON REVENUES:** It is estimated that there would be no impact on revenues resulting from the enactment of this legislation due to an assumption of full compliance with the legislation.

**IMPACT ON EXPENDITURES:** It is estimated that this legislation would not impact expenditures because it accelerates an already existing deadline for vehicle side guard implantation codified in Local Law 56 of 2015. The corresponding Fiscal Impact Statement for Local Law 56 of 2015, Proposed Intro. No. 198-A, anticipated a cost of \$12 million between Fiscal 2016 and Fiscal 2025 for the installation of side guards on between 4,000 and 4,500 vehicles. Currently, the Mayor’s Office of Legislative Affairs estimates that 668 vehicles would be affected by Proposed Intro. No. 1789-A. In addition, the Mayor’s Office of Legislative Affairs anticipates that vendors would incorporate the cost of equipping vehicles with side-guards into City contracts, but this cost is undefined.

**SOURCE OF FUNDS TO COVER ESTIMATED COSTS: N/A**

**SOURCE OF INFORMATION:** New York City Council Finance Division  
Mayor's Office of Legislative Affairs

**ESTIMATE PREPARED BY:** John Basile, Senior Financial Analyst

**ESTIMATE REVIEWED BY:** Nathaniel Toth, Deputy Director  
Stephanie Ruiz, Assistant Counsel

**LEGISLATIVE HISTORY:** This legislation was first considered by the Committee on Transportation (the Committee), at a hearing held jointly with the Committee on Public Safety, as a Preconsidered Introduction on October 24, 2019 and the bill was laid over. The legislation was introduced to the full Council as Intro. No. 1789 on October 30, 2019 and was referred to the Committee. The legislation was subsequently amended and the amended legislation, Proposed Intro. No. 1789-A, will be considered by the Committee on September 9, 2021. Upon successful vote by the Committee, Proposed Intro. No. 1789-A will be submitted to the full Council for a vote on September 9, 2021.

**DATE PREPARED:** September 7, 2021.

*Accordingly, this Committee recommends its adoption, as amended.*

**(The following is the text of Int. No. 1789-A:)**

Int. No. 1789-A

By Council Members Rodriguez and Gennaro.

**A Local Law to amend the administrative code of the city of New York, in relation to side guards**

*Be it enacted by the Council as follows:*

Section 1. Section 6-141 of the administrative code of the city of New York, as added by local law 56 for the year 2015, is amended to read as follows:

§ 6-141 Side guards in the city fleet *and on city contracted vehicles*. a. Definitions. For the purposes of this section, *the following terms have the following meanings:*

*City contracted vehicle. The term "city contracted vehicle" means any large vehicle that is utilized within the city on a weekly or more frequent basis to fulfill requirements material to the scope of a contract registered with the comptroller, where such contract has an estimated value of \$2 million or more. This definition does not include agency on-call emergency contracts, including on-call storm emergency contracts, or the following types of contracts that are governed by rules of the procurement policy board: emergency procurements; intergovernmental contracts; government to government contracts; and contracts for the provision of work or services by public utilities.*

*Department. The term "department" means the department of citywide administrative services.*

*Large vehicle. The term "large vehicle" means a motor vehicle with a manufacturer's gross vehicle weight rating exceeding 10,000 pounds. "Large vehicle" does not include street sweepers, fire engines, car carriers, off road construction vehicles, or any specialized vehicles or vehicle types on which side guard installation is deemed impractical by the department pursuant to subdivision c of this section.*

*Notice to proceed. The term "notice to proceed" means the written direction to a contractor by an agency to commence work pursuant to a registered contract.*

*Side guard. The term "side guard" means a device fit to the side of a large vehicle designed to prevent pedestrians and bicyclists from falling into the exposed space between the front axle and the rear axle of such vehicles. Except where otherwise authorized by rule of the department, side guards[:] shall allow for a maximum 13.8 inch ground clearance, maximum 13.8 inch top clearance up to four feet in height, and a minimum 440 pound impact strength; must achieve a smooth and continuous longitudinal (forward to backward) impact surface*

flush with the vehicle sidewall; may include rail style guards, provided that such rails be no less than four inches tall and no more than 11.8 inches apart; and may incorporate other vehicle features such as tool boxes and ladders, *subject to the approval of the department.*

b. Side guards. *1. No later than January 1, [2024] 2023, all large vehicles in the city fleet shall be equipped with side guards.*

*2. No later than 12 months from the issuance of a notice to proceed pursuant to an individual contract utilizing 10 or fewer trucks, and 18 months for an individual contract utilizing more than 10 trucks, any city contracted vehicle covered by such contract shall be equipped with side guards.*

c. The department shall have the authority to promulgate any rules necessary to administer the provision of this section, including but not limited to rules establishing side guard specifications that depart from the default specifications set forth in subdivision a of this section when such departure is deemed necessary by the department, as well as rules governing when the installation of side guards on certain city vehicles or city contracted vehicles is impractical *or will disrupt provision of public safety or public health services* and will not be required. *Such rules may also govern when written exemptions may be authorized, including due to limitations in vendor capacity to supply side-guards and circumstances in which city-owned trucks are in the order cycle for replacement.* The department shall be authorized to inspect side guards and side guard specifications for compliance with the requirements of this section.

*d. Enforcement. All agency contracts involving city contracted vehicles shall contain the requirements of this section, and shall be enforced as part of each agency's oversight with respect to each contract. The department shall provide technical guidance to each contracting agency with respect to their oversight responsibilities pursuant to this section. Contract requirements shall include, but not be limited to, a penalty of up to \$4,000 for each city contracted vehicle that is found to be out of compliance with the requirements of this section.*

§ 2. Subdivision f of section 16-509 of the administrative code of the city of New York, as added by local law 56 for the year 2015, is amended to read as follows:

f. On or after January 1, [2024] 2023, the commission may refuse to issue a license or registration to an applicant that has failed to demonstrate to the satisfaction of the commission that such applicant will at all times meet the requirements of section 16-526 of the code, or any rule promulgated pursuant thereto, in the performance of such license or registration.

§ 3. Subdivision b of section 16-526 of the administrative code of the city of New York, as added by local law 56 for the year 2015, is amended to read as follows:

b. Side guards. No later than January 1, [2024] 2023, all trade waste hauling vehicles shall be equipped with side guards.

§ 4. This local law takes effect immediately; provided, however, that the provisions of subdivision b of section 6-141 of the administrative code of the city of New York, as amended by this local law, and the provisions of subdivision d of such section 6-141, as added by this local law, shall apply to contracts registered by the comptroller on or after January 1, 2023, and shall not apply to renewals, exemptions or modifications of contracts entered into prior to January 1, 2023.

YDANIS A. RODRIGUEZ, Chairperson; FERNANDO CABRERA, PETER A. KOO, DEBORAH L. ROSE, MARK D. LEVINE, RUBEN DIAZ, Sr., ROBERT HOLDEN, SELVENA N. BROOKS-POWERS; Committee on Transportation, September 9, 2021.

On motion of the Speaker (Council Member Johnson), and adopted, the foregoing matter was coupled as a General Order for the day (see ROLL CALL ON GENERAL ORDERS FOR THE DAY).

## Report of the Committee on Veterans

Report for Int. No. 647-A

### Report of the Committee on Veterans in favor of approving and adopting, as amended, a Local Law to amend the administrative code of the city of New York, in relation to peer support services for veterans.

The Committee on Veterans, to which the annexed proposed amended local law was referred on March 7, 2018 (Minutes, page 1008), respectfully

#### REPORTS:

On September 9, 2021, the Committee on Veterans, chaired by Council Member Dinowitz, held a hearing on Proposed Int. 647-A, a local law in relation to peer support services for veterans, sponsored by Council Member Eugene and reported the item out of committee. This legislation was previously heard at a hearing of this committee on June 19, 2018, at which the committee received testimony from representatives from the New York City Department of Veterans' Services (DVS) and veterans' advocates and service providers.

#### I. BACKGROUND

##### *Veterans' Needs*

Approximately 18 million veterans live in the United States.<sup>1</sup> Veterans are demographically diverse by age, family structure, education, and income and display a variety of needs that cannot fully be addressed by a one-size-fits-all strategy.<sup>2</sup> The most commonly identified veterans' needs include support services that address mental health needs, physical health needs, employment and housing.<sup>3</sup> Barriers that decrease veterans' access to support services include a lack of awareness about existing benefits and services, excessive paperwork, a perceived low quality of services and stigmatization.<sup>4</sup> The bill presented at this hearing seeks to alleviate some of these challenges by offering additional peer support services and resources to New York City veterans.

#### II. Bill Analysis

**Proposed Int. 647-A** - A Local Law to amend the administrative code of the city of New York, in relation to peer support services for veterans

This bill would require the Department of Veterans' Services (DVS), in partnership with local veteran service organizations, to establish a telephone hotline to provide peer support services and information to veterans. The bill requires the hotline be staffed by certified veteran peer specialists. The veteran peer specialists will provide counseling and referral services for callers. DVS would be required to post the peer support hotline telephone number and the hours of operation on its website.

**(The following is the text of the Fiscal Impact Statement for Int. No. 647-A:)**

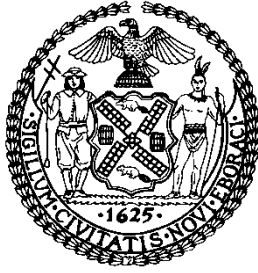
<sup>1</sup> Jonathan E. Vespa, *American Community Survey Report*, (June 2020), available at <https://www.census.gov/content/dam/Census/library/publications/2020/demo/acs-43.pdf>.

<sup>2</sup> Clearinghouse for Military Family Readiness at Penn State, *Supporting United States Veterans: A Comprehensive Recent Review of Veteran-Focused Needs Assessment*, p. 5 (Oct. 16, 2017), available at [https://militaryfamilies.psu.edu/wp-content/uploads/2020/01/Veterans\\_Assessment.pdf](https://militaryfamilies.psu.edu/wp-content/uploads/2020/01/Veterans_Assessment.pdf).

<sup>3</sup> *Id.*

<sup>4</sup> *Id.*





**THE COUNCIL OF THE CITY OF NEW YORK  
FINANCE DIVISION  
LATONIA MCKINNEY, DIRECTOR  
FISCAL IMPACT STATEMENT**

**PROPOSED INT. NO. 647-A**

**COMMITTEE: Veterans**

**TITLE:** A Local Law to amend the administrative code of the city of New York, in relation to peer support services for veterans.  
**SPONSORS:** Council Members Eugene and Yeger.

**SUMMARY OF LEGISLATION:** This bill would require the Department of Veterans’ Services (DVS) to coordinate with veteran service organizations to establish a hotline to provide peer support services and information to veterans.

**EFFECTIVE DATE:** This local law would take effect 180 days after it becomes law.

**FISCAL YEAR IN WHICH FULL FISCAL IMPACT ANTICIPATED:** Fiscal 2023

**FISCAL IMPACT STATEMENT:**

	<b>Effective FY22</b>	<b>FY Succeeding Effective FY23</b>	<b>Full Fiscal Impact FY23</b>
<b>Revenues (+)</b>	\$0	\$0	\$0
<b>Expenditures (-)</b>	\$12,500	\$50,000	\$50,000
<b>Net</b>	\$0	\$0	\$0

**IMPACT ON REVENUES:** It is estimated that there would be no impact on revenues resulting from the enactment of this legislation.

**IMPACT ON EXPENDITURES:** It is estimated that there would be a de-minimus startup cost to set up the hotline, a partial year cost of \$12,500 in Fiscal 2022 and a recurring yearly Other Than Personal Services (OTPS) cost of \$50,000 beginning in Fiscal 2023 for the maintenance and operational cost of the hotline.

**SOURCE OF FUNDS TO COVER ESTIMATED COSTS:** General Fund

**SOURCES OF INFORMATION:** New York City Council Finance Division  
Mayor’s Office of Legislative Affairs  
Department of Veterans’ Services

**ESTIMATE PREPARED BY:** Sebastian Palacio Bacchi, Senior Financial Analyst

**ESTIMATE REVIEWED BY:** Nathaniel Toth, Deputy Director  
John Russell, Unit Head  
Noah Brick, Assistant Counsel

**LEGISLATIVE HISTORY:** This legislation was introduced to the Council as Intro. No. 647 on March 7, 2018 and was referred to the Committee on Veterans (Committee). A hearing on the legislation was held by the Committee on June 19, 2018, and the legislation was laid over. The legislation was subsequently amended, and the amended legislation, Proposed Intro. No. 647-A, will be considered by the Committee on September 9, 2021. Upon a

successful vote by the Committee, Proposed Int. No. 647-A will be submitted to the full council for a vote on September 9, 2021.

**DATE PREPARED:** September 7, 2021.

*Accordingly, this Committee recommends its adoption, as amended.*

**(The following is the text of Int. No. 647-A:)**

Int. No. 647-A

By Council Members Eugene, Yeger, Riley, Rose, Gennaro and Ampry-Samuel.

**A Local Law to amend the administrative code of the city of New York, in relation to peer support services for veterans**

*Be it enacted by the Council as follows:*

Section 1. Title 31 of the administrative code of the city of New York is amended by adding a new section 31-111 to read as follows:

*§ 31-111 Peer support services. a. Definitions. For purposes of this section, the term “veteran peer specialist” shall mean an individual who is a veteran and is certified as a peer specialist in New York State.*

*b. The department shall coordinate with veteran service organizations for the purpose of establishing a hotline to provide peer support services and information to veterans. Such hotline shall be staffed by veteran peer specialists and shall provide counseling and referral services for callers.*

*c. The department shall post on its website the peer support hotline telephone number, telephone operating hours and any additional information deemed by the department to be relevant.*

§ 2. This local law takes effect 180 days after it becomes law.

ERIC DINOWITZ, *Chairperson*; ALICKA AMPRY-SAMUEL, MATHIEU EUGENE, ALAN N. MAISEL, PAUL A. VALLONE; Committee on Veterans, September 9, 2021.

On motion of the Speaker (Council Member Johnson), and adopted, the foregoing matter was coupled as a General Order for the day (see ROLL CALL ON GENERAL ORDERS FOR THE DAY).

## Report of the Committee on Women and Gender Equity

Report for Int. No. 1828-A

### **Report of the Committee on Women and Gender Equity in favor of approving and adopting, as amended, a Local Law to amend the administrative code of the city of New York, in relation to establishing an advisory committee on female genital mutilation and cutting and making technical amendments in connection therewith.**

The Committee on Women and Gender Equity, to which the annexed proposed amended local law was referred on December 19, 2019 (Minutes, page 4864), respectfully

#### **REPORTS:**

##### **I. INTRODUCTION**

On September 9, 2021, the Committee on Women and Gender Equity, chaired by Council Member Darma V. Diaz, held a vote on Proposed Int. No. 1828-A, sponsored by Council Member Alicka Ampry-Samuel, related to establishing an advisory committee on female genital mutilation and cutting and making technical amendments in connection therewith, and the item was reported out of committee. This bill was originally heard at a hearing of this Committee, then-chaired by Council Member Helen K. Rosenthal, on December 12, 2018, at which the Committee heard testimony from the NYC Commission on Gender Equity (“CGE” or “Commission”) and the Mayor’s Office to End Domestic and Gender-Based Violence (ENDGBV), as well as activists, advocacy groups, experts in the field of gender equality, health care providers, legal services providers, service providers, and other interested stakeholders.

##### **II. BACKGROUND**

Female genital cutting (FGC), also known as female genital mutilation or female circumcision,<sup>1</sup> is defined by the World Health Organization (WHO) as “all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons.”<sup>2</sup> FGC is a historical and cultural practice performed in over 30 countries, primarily in Africa, Asia and the Middle East.<sup>3</sup> Some types of

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<sup>1</sup> This paper utilizes the term “female genital cutting,” rather than “female genital mutilation” to give deference to the affected women and girls, often migrants, who live in the midst of a dominant discourse categorizing them as “mutilated” and sexually disfigured. While “female circumcision” is another common term, “female genital mutilation” is also referenced in recognition of the fact that it is the most commonly used term, including in terms of usage in legislation and treaties. Further, while this paper also utilizes the acronym FGC, FGM is also often shortened to FGM/C in recognition of updated and current language. See S. Johnsdotter, *The Impact of Migration on Attitudes to Female Genital Cutting and Experiences of Sexual Dysfunction Among Migrant Women with FGC*, 10(1) CURRENT SEXUAL HEALTH REPORTS 18-24 (2018), available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5840240/>; S. Fried, A. Mahmoud Warsame, V. Berggren, E. Isman & A. Johansson, *Outpatients’ Perspectives on Problems and Needs Related to Female Genital Mutilation/Cutting: a Qualitative Study from Somaliland*, 2013(1) OBST. AND GYN. INTL (2013), available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3784275/>; U.S. Department of Health and Human Services, Office on Women’s Health, *Female Genital Mutilation or Cutting* (last visited Dec. 7, 2018), available at <https://www.womenshealth.gov/a-z-topics/female-genital-cutting>; New York Department of Health, *Female Genital Mutilation/Female Circumcision Reference Card for Health Care Providers* (last visited Dec. 7, 2018), available at [https://www.health.ny.gov/community/adults/women/female\\_circumcision/providers.htm](https://www.health.ny.gov/community/adults/women/female_circumcision/providers.htm) (explaining why it is “more appropriate” to use FGC/FC than FGM).

<sup>2</sup> World Health Organization (hereinafter WHO), *Female Genital Mutilation: Key Facts* (Jan. 31, 2018), available at <http://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation>.

<sup>3</sup> The United Nations Children Fund reports that FGC is found in countries beyond those listed in many guides and the 29 that the United Nations covers, and the total worldwide number is unknown. United Nations Children’s Fund (hereinafter UNICEF), *Female Genital Mutilation/Cutting: A Statistical Overview and Exploration of the Dynamics of Change* (2013), available at <https://data.unicef.org/resources/female-genital-mutilationcutting-statistical-overview-exploration-dynamics-change/>; WHO, *Supra* note 2; See Owolabi Bjalkander, Donald S. Grant, Vanja Berggren, Heli Bathija & Lars Almroth, *Female Genital Mutilation in Sierra Leone*:

FGC are also reported to occur among certain ethnic groups in Central and South America, and Eastern Europe.<sup>4</sup> FGC is practiced in households at all educational levels and social classes, and occurs among many religious groups<sup>5</sup> for various sociocultural reasons, varying from one region and ethnic group to another.<sup>6</sup> While FGC is condemned as a human rights violation by many international treaties and conventions,<sup>7</sup> where it is practiced, FGC is often performed in line with social norms “to ensure that girls are socially accepted and marriageable, and to uphold their status and honor and that of the entire family.”<sup>8</sup> Other historical reasons and purposes expressed for the practice, beyond safeguarding virginity before marriage or enhancing fertility, range from cleanliness and beauty to acting as a rite of passage into adulthood.<sup>9</sup>

However, FGC has no known health benefits, and women and girls who have undergone FGC procedures are at great risk of suffering both short- and long-term health complications, including increased risks during childbirth, psychological trauma, and even death.<sup>10</sup> Further, the painful and traumatic procedure is performed mainly on children and adolescents between the ages of infancy and 15 and without anesthetic.<sup>11</sup> It is therefore also frequently performed without full, informed consent, with or without coercion.<sup>12</sup> Accordingly, FGC has been widely recognized as a violation of basic human rights, including the principles of equality and non-discrimination on the basis of sex, the right to life when the procedure results in death, and the right to freedom from torture or cruel, inhuman or degrading treatment or punishment, as well as the rights of the child.<sup>13</sup>

It is estimated that over 200 million women and girls worldwide who have experienced FGC.<sup>14</sup> According to the United Nations Population Fund (UNFPA), if the current rate continues, a further 68 million girls could be subjected to FGC by 2030.<sup>15</sup> Additionally, a rise in international migration has increased the number of women and girls who have undergone or are at at-risk of undergoing the practice in Australia, Canada, Europe, and the United States (U.S.).<sup>16</sup> In the U.S. alone, the Centers for Disease Control (CDC) estimates that in 2012, approximately 513,000 women and girls, of whom 33 percent were younger than 18 years of age, were either victims of FGC or at risk of being subjected to it.<sup>17</sup> Moreover, experts believe the practice has slowly been

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*Forms, Reliability of Reported Status, and Accuracy of Related Demographic and Health Survey Questions*, 2013(1) OBSTETRICS AND GYN INTL 1–14 (2013), available at <https://www.hindawi.com/journals/ogi/2013/680926/>.

<sup>4</sup> WHO, *Supra* note 2.

<sup>5</sup> Population Reference Bureau (hereinafter PRB), *Female Genital Mutilation/Cutting: Data and Trends Update 2014 – Infographic* (2014), available at <https://www.prb.org/infographic-fgm/>.

<sup>6</sup> WHO, *Care of Girls & Women Living with Female Genital Mutilation: A Clinical Handbook* (2018), 16-7, available at <http://apps.who.int/iris/bitstream/handle/10665/272429/9789241513913-eng.pdf?ua=1>.

<sup>7</sup> See, e.g., Human Rights Watch, *They took Me and Told Me Nothing: Female Genital Mutilation in Iraqi Kurdistan* 1, 8 (2010), available at <https://www.lawschool.cornell.edu/womenandjustice/upload/They-Took-Me-and-Told-Me-Nothing.pdf> (describing several international treaties, including a Convention of the Elimination of All Forms of Discrimination, or CEDAW, Committee decision in 1990 calling on all states to eradicate FGC).

<sup>8</sup> UNICEF, *Female Genital Mutilation/Cutting: A Statistical Overview and Exploration of the Dynamics of Change* (2013), available at <https://data.unicef.org/resources/female-genital-mutilationcutting-statistical-overview-exploration-dynamics-change/>; WHO, *Supra* note 2.

<sup>9</sup> WHO, *Supra* note 6.

<sup>10</sup> WHO, *Supra* note 6.

<sup>11</sup> B.D. Williams-Breault, *Eradicating Female Genital Mutilation/Cutting: Human Rights-Based Approaches of Legislation, Education, and Community Empowerment*, HEALTH AND HUMAN RIGHTS JOURNAL (Aug. 2018), available at [https://www.hhrjournal.org/2018/08/eradicating-female-genital-mutilation-cutting-human-rights-based-approaches-of-legislation-education-and-community-empowerment/#\\_edn49](https://www.hhrjournal.org/2018/08/eradicating-female-genital-mutilation-cutting-human-rights-based-approaches-of-legislation-education-and-community-empowerment/#_edn49); Equality Now, *End FGM* (last visited Dec. 7, 2018), available at [https://www.equalitynow.org/end\\_fgm?locale=en](https://www.equalitynow.org/end_fgm?locale=en).

<sup>12</sup> B.D. Williams-Breault, *Supra* note 11.

<sup>13</sup> *Id.*

<sup>14</sup> The United Nations Population Fund (hereinafter UNFPA), *Female Genital Mutilation (FGM) - Frequently Asked Questions* (Feb. 2018), available at <https://www.unfpa.org/resources/female-genital-mutilation-fgm-frequently-asked-questions>.

<sup>15</sup> UNFPA, *UNFPA-UNICEF Joint Programme to Eliminate Female Genital Mutilation* (Feb. 6, 2018), available at <https://www.unfpa.org/unfpa-unicef-joint-programme-eliminate-female-genital-mutilation>.

<sup>16</sup> WHO, *Supra* note 6.

<sup>17</sup> H. Goldberg, P. Stupp, E. Okoroh, G. Besera, D. Goodman & I. Danel, *Female Genital Mutilation/Cutting in the United States: Updated Estimates of Women and Girls at Risk, 2012*, Public Health Reports, Vol. 131, (Mar.-Apr. 2016), 4, available at <https://www.uscis.gov/sites/default/files/USCIS/Humanitarian/Special%20Situations/fgmutilation.pdf>; PRB, *Summary of PRB Methods to Produce Estimates of Women and Girls Potentially at Risk of FGM/C in the United States* (last visited Dec. 7, 2018), available at <https://assets.prb.org/pdf15/prb-unitedstates-fgmc-methodology.pdf>.

picking up speed across the country; based on available data, it is estimated that FGC cases have tripled since 1990.<sup>18</sup>

In the U.S., the risk for FGC is especially high in areas with substantial ties to countries where FGC is legal or frequently practiced.<sup>19</sup> The state of New York is considered a “hotbed” for the practice.<sup>20</sup> According to the Population Reference Bureau (PRB), a nonprofit organization specializing in statistical collection and supply, approximately 10 percent of the at-risk women and girls in the U.S. (or 48,000) live in New York, which is second only to California.<sup>21</sup> Additionally, the majority of women and girls at risk of FGC in this country reside in cities or suburbs of large metropolitan areas, and the New York-Newark-Jersey City Metro Area ranks first among all metropolitan areas in the country, with an estimated 65,893 women and girls at risk of FGC.<sup>22</sup>

From a legislative perspective, while many governments in Africa and elsewhere have taken steps to eliminate the practice of FGC in their countries,<sup>23</sup> the U.S. is an example of a country that has outlawed the practice of performing or assisting in the FGC procedure completely.<sup>24</sup> In the U.S., federal law established that it is a crime to perform FGC on a girl younger than 18 or to take or attempt to take a girl out of the U.S. for FGC, though women and girls who have experienced FGC are not considered at fault.<sup>25</sup> However, it should be noted that a November 20, 2018 District Court ruling, *U.S. v. Nagarwala*, found that Congress lacked authority under the Commerce Clause to adopt the 1996 federal law banning FGC and that the power to outlaw FGC belongs to individual states.<sup>26</sup> As of the date of this hearing, the decision has not been appealed.<sup>27</sup> Only 27 states have

<sup>18</sup> H. Goldberg, P. Stupp, E. Okoroh, G. Besera, D. Goodman & I. Danel, *Female Genital Mutilation/Cutting in the United States: Updated Estimates of Women and Girls at Risk, 2012*, Public Health Reports, Vol. 131, (Mar.-Apr. 2016), 1, available at <https://www.uscis.gov/sites/default/files/USCIS/Humanitarian/Special%20Situations/fgmutilation.pdf>.

<sup>19</sup> Samantha Allen, *New York Cracks Down on Female Genital Mutilation*, THE DAILY BEAST (Dec. 2, 2015), available at <https://www.thedailybeast.com/new-york-cracks-down-on-female-genital-mutilation?ref=scroll>.

<sup>20</sup> *Id.*

<sup>21</sup> PRB, *Supra* note 17.

<sup>22</sup> When considering New Jersey, 13 percent of all women and girls at risk of FGC live in the NYC metropolitan area. *Id.*; Samantha Allen, *Supra* note 19.

<sup>23</sup> Samantha Allen, *Supra* note 19.; Nina Strohlic, *The U.S. Female Genital Mutilation Crisis*, THE DAILY BEAST (Dec. 2, 2015), available at <https://www.thedailybeast.com/new-york-cracks-down-on-female-genital-mutilation?ref=scroll>; Elise B. Johansen, Mai Ziyada, Bettina Shell-Duncan, Adriana Marcusan Kaplan, and Els Leye, *Health Sector Involvement in the Management of Female Genital Mutilation/Cutting in 30 Countries*, 240(18) BMC Health Serv. Res. (2018), available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5883890/>.

<sup>24</sup> Pub. L. 104-208, § 645, 110 Stat. 3009-546 (1996); UNFPA, *Supra* note 14; The Center for Reproductive Justice, *Female Genital Mutilation (FGM): Legal Prohibitions Worldwide* (Dec. 11, 2008), available at <https://www.reproductiverights.org/sites/crr.civicactions.net/files/documents/Fact%20Sheet%20FGM%202002-2009.pdf>; Khama Rogo, Tshiyi Subayi, Nahid Toubia & Eiman Hussein Sharief, *Female Genital Cutting, Women's Health, and Development: The Role of the World Bank*, THE WORLD BANK 1, 15 (Jul. 2007), available at <http://documents.worldbank.org/curated/en/743811468194329407/pdf/558320PUB0Wome1C0Ddisclosed071221101.pdf>; The Center for Reproductive Rights, *Briefing Paper: Legislation on Female Genital Mutilation in the United States* (2004), available at [https://www.reproductiverights.org/sites/default/files/documents/pub\\_bp\\_fgmlawsusa.pdf](https://www.reproductiverights.org/sites/default/files/documents/pub_bp_fgmlawsusa.pdf).

<sup>25</sup> FGC has been illegal in the U.S. since 1996 and vacation cutting was criminalized by the 2013 passage of the Transport for Female Genital Mutilation Act. The 1996 provision criminalizing the practice was enacted by Congress as part of the *Illegal Immigration Reform and Immigrant Responsibility Act of 1996*, or Pub. L. 104-208, § 645, 110 Stat. 3009-546 (1996). The statute amends chapter 7, entitled “Assault,” of title 18 of the U.S. Code by adding a new section 116. (*See* 18 U.S.C.A. § 116 (Supp. 1997)). With two exceptions, this legislation provides that “whoever knowingly circumcises, excises, or infibulates the whole or any part of the labia majora or labia minora or clitoris of another person who has not attained the age of 18 years shall be fined under this title or imprisoned not more than 5 years, or both.” (18 U.S.C.A. at § 116(a)), although the statute exempts a surgical operation if such operation is “necessary to the health of the person on whom it is performed, and is performed by a person licensed in the place of its performance as a medical practitioner.” (18 U.S.C.A. at § 116(b)(1)). The statute states that “no account shall be taken of the effect on the person on whom the operation is to be performed of any belief on the part of that person, or any other person, that the operation is required as a matter of custom or ritual.” (18 U.S.C.A. at 116(c)). The statute also exempts an operation if it is “performed on a person in labor or who has just given birth and is performed for medical purposes connected with that labor or birth by a person licensed . . . as a medical practitioner, midwife, or person in training to become such a practitioner or midwife.” (Pub. L. No. 104-208, § 645(c), 110 Stat. 3009- 546, 709 (1996)). The law went into effect in 2007.

<sup>26</sup> *See U.S. v. Nagarwala*, U.S. District Court, Eastern District of Michigan, No. 17-20274 (2018), available at <https://content-static.detroitnews.com/pdf/2018/US-v-Nagarwala-dismissal-order-11-20-18.pdf>.

<sup>27</sup> As of December 11, 2018, it is unclear whether the “Michigan case” decision would be appealed, and the state of New York continues to reference to the federal legislation in providing guidance on protections. *See* New York State Department of Health, *Supra* note 1; Jonathan Stempel, *Judge voids U.S. Female Genital Mutilation Law*, Reuters (Nov. 20, 2018), available at <https://www.reuters.com/article/us-usa-crime-genital-mutilation/judge-voids-u-s-female-genital-mutilation-law-idUSKCN1NP2OR>; Pam Belluck, *Federal Ban on Female Genital Mutilation Ruled Unconstitutional by Judge*, NEW YORK TIMES (Nov. 21, 2018), available at

passed their own laws criminalizing the practice of FGC since 1994, and it is likely that states wanting to bring cases after the ruling will need to pass laws or use existing assault or abuse laws.<sup>28</sup> Further, it should be noted that the state of New York bans the practice of FGC under the state Penal Law,<sup>29</sup> while the state Public Health Law was amended in 2015 to address outreach and education about FGC.<sup>30</sup>

### III. FEMALE GENITAL CUTTING (MUTILATION/CIRCUMCISION)

The WHO has distinguished four major types of FGC, the first three types being of increasing invasiveness, and the last a general category of unclassified genital injuries.<sup>31</sup> These include:

1. **Type 1:** Often referred to as **clitoridectomy**, and which refers to the partial or total removal of the clitoris, and/or the prepuce, which is the fold of skin surrounding the clitoris;
2. **Type 2:** Often referred to as **excision**, and which refers to the partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora;
3. **Type 3:** Often referred to as **infibulation** and the most severe type, which refers to the narrowing of the vaginal orifice through the creation of a covering seal formed by cutting and repositioning the labia minora and/or labia majora, sometimes through stitching, with or without removal of the clitoris (clitoridectomy);<sup>32</sup> and
  - a. **Deinfibulation** refers to the practice of cutting open the sealed vaginal orifice, which is often necessary for improving health and well-being as well as to allow intercourse or to facilitate childbirth.<sup>33</sup>
  - b. **Re-infibulation** refers to the procedure to narrow the vaginal orifice after deinfibulation, also known as re-suturing.<sup>34</sup>
4. **Type 4:** which includes all other harmful procedures to the female genitalia for non-medical purposes, such as cauterizing, incising, piercing, pricking and scraping the genital area.<sup>35</sup>

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<https://www.nytimes.com/2018/11/21/health/fgm-female-genital-mutilation-law.html>; Stephen Loiaconi, *Michigan Case Presents First Test of Federal Law Against Female Genital Mutilation*, WJLA (last visited Dec. 7, 2018), available at <https://wjla.com/news/nation-world/michigan-case-presents-first-test-of-federal-law-against-female-genital-mutilation>.

<sup>28</sup> Samantha Allen, *Supra* note 19.

<sup>29</sup> The New York State Prohibition of Female Genital Mutilation Act of 1997, added section 130.85 to the Penal Code. (see N.Y. Adv. Legis. Serv. 618, § 2 (1997)). The Act states that a person is guilty of FGC when he or she “knowingly circumcises, excises, or infibulates, the whole or any part of the labia majora, labia minora, or clitoris of another person who has not reached eighteen years of age.”<sup>29</sup> In addition, “a parent, guardian, or other person legally responsible and charged with the care and custody of a child less than eighteen years old, [who] knowingly consents to the circumcision, excision or infibulation of whole or part of such child’s labia minora or labia majora or clitoris” is also guilty of FGC. (N.Y. Penal Law at § 130.85 (1) (b)). FGV is classified as a class E felony, which is punishable by up to four years’ imprisonment. (N.Y. Penal Law at § 130.85 (3)). The law exempts from this prohibition circumcision, excision, or infibulation that is “necessary to the health of the person on whom it is performed, and is performed by a person licensed in the place of its performance as a medical practitioner.” FGC is also permissible when it is “performed on a person in labor or who has just given birth and is performed for medical purposes connected with that labor or birth by a person licensed in the place it is performed as a medical practitioner, midwife, or person in training to become such a practitioner or midwife.” However, the law does not permit any account to be taken of “the effect on the person on whom such a procedure is to be performed of any belief on the part of that or any other person that such procedure is required as a matter of custom or ritual.” See N.Y. Penal Law § 130.85 (1997).

<sup>30</sup> N.Y. Pub. Health Law §207(1) (k); The Office of Assemblywoman Amy Paulin, *Amy Paulin’s Legislation Regarding Female Genital Mutilation Approved by Assembly and Senate* (Jun. 17, 2015), available at <https://nyassembly.gov/mem/Amy-Paulin/story/64339/>; New York State Assembly, *A00134 Memo* (last visited Dec. 7, 2018), available at [https://assembly.state.ny.us/leg/?default\\_fld=&bn=A134&term=2015&Memo=Y](https://assembly.state.ny.us/leg/?default_fld=&bn=A134&term=2015&Memo=Y); Samantha Allen, *Supra* note 19.

<sup>31</sup> WHO, *Supra* note 2.

<sup>32</sup> B.D. Williams-Breault, *Supra* note 11.

<sup>33</sup> WHO, *Supra* note 2.

<sup>34</sup> B.D. Williams-Breault, *Supra* note 11.

<sup>35</sup> WHO, *Supra* note 2.

FGC has no health benefits, and there are numerous immediate, short-term and long-term health complications that stem from the practice. FGC interferes with normal body functions and can negatively affect several aspects of a girl's or woman's life, including her physical, mental and sexual health, as well as her relationship with her partner and other family members.<sup>36</sup> Further, as an erogenous zone, the clitoris and surrounding genital tissues have a dense nerve supply and are particularly sensitive.<sup>37</sup> As FGC is often performed without anesthetic, the practice is also known to cause severe and immediate pain.<sup>38</sup> Other immediate and short-term physical health complications include:

- **Severe pain and injury to tissues;**<sup>39</sup>
- **Hemorrhage** (severe hemorrhage can lead to *anemia*), which is the most common and life-threatening complication of FGC;<sup>40</sup>
- **Hemorrhage shock**, which can result in death within a relatively short time if the patient fails to receive adequate medical treatment;<sup>41</sup>
- **Infection and septicemia**, which may occur when FGC is conducted in unhygienic surroundings and with dirty instruments, and if there is a lack of proper wound care following the procedure;<sup>42</sup>
- **Genital tissue swelling**, which is typically caused by cutting and damaging genital tissues but may also be caused by an acute local infection;<sup>43</sup> and
- **Acute urine retention**, which may be the result of injury, pain and a fear of urinating, or occlusion of the urethra during infibulation.<sup>44</sup>

Women and girls who undergo FGC can also suffer health complications and conditions that surface months or even years following the procedure.<sup>45</sup> Long-term gynecological and urogynecological health consequences stemming from FGC include:

- **Chronic vulvar pain**, which often manifests during sexual intercourse but may arise during daily activities, and has been linked to mental health disorders, including *anxiety*, *depression* and *post-traumatic stress disorder*;<sup>46</sup>
- **Clitoral neuroma**, a benign tumor, resulting from the section or injury of a nerve, which can be asymptomatic or it may cause pain upon stimulation;<sup>47</sup>
- **Reproductive tract infections (RTIs)**, including bacterial vaginosis, RTIs can be painful, may be accompanied by abnormal vaginal discharge, can be recurrent and, if left untreated, may become persistent and lead to pelvic inflammatory disease;<sup>48</sup>

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<sup>36</sup> WHO, *Supra* note 6.

<sup>37</sup> *Id.* at 94.

<sup>38</sup> *Id.*

<sup>39</sup> *Id.* at 87.

<sup>40</sup> *Id.* at 99.

<sup>41</sup> *Id.* at 100.

<sup>42</sup> *Id.* at 102.

<sup>43</sup> *Id.* at 104.

<sup>44</sup> *Id.*

<sup>45</sup> *Id.* at 114.

<sup>46</sup> *Id.* at 122.

<sup>47</sup> *Id.* at 124.

<sup>48</sup> *Id.* at 126.

- **Menstrual problems** (such as dysmenorrhea, which is painful menstruation, and difficulty in passing menstrual blood), which may be a result of tight infibulation or severe scarring leading to narrowing of the vaginal orifice, not allowing normal menstrual flow;<sup>49</sup>
- **Urinary tract infections (UTIs)** (often recurrent), mostly affecting women and girls who have undergone infibulation, it may occur due to obstruction and stasis of urine or due to injury of the urethral opening, affecting the normal flow of urine, causing it to stagnate and making it susceptible to bacterial growth;<sup>50</sup>
- **Painful or difficult urination**, possibly caused by a UTI, or difficulty passing urine due to damage to or partial obstruction of the urethral opening so that “urine can only exit drop by drop and will frequently continue leaking after urination has stopped;”<sup>51</sup> and
- **Epidermal inclusion cysts and keloids** in the genital area, which can cause discomfort during sexual intercourse and possible obstruction of the vaginal opening during childbirth.

Given the numerous health complications that women and girls may suffer as a result of having undergone FGC, there are also numerous sexual and reproductive health, family planning and psychological consequences of the procedure. With regard to sexual health, the removal of highly sensitive genital tissue, and the clitoris in particular, may affect sexual sensitivity and lead to sexual problems, including low sexual desire and pleasure, pain during sex, difficulty during penetration, little to no lubrication during intercourse, and reduced frequency or absence of orgasm.<sup>52</sup> Furthermore, FGC is associated with an increased risk of human immunodeficiency virus (HIV).<sup>53</sup>

FGC is also associated with a number of obstetric complications, including an increased risk of Caesarean section (C-section), post-partum hemorrhage, recourse to episiotomy, difficult labor, obstetric tears/lacerations, instrumental delivery, prolonged labor and an extended maternal hospital stay.<sup>54</sup> Though a direct association between FGC and obstetric fistula has not been established, the causal relationship between prolonged and obstructed labor and fistula indicates that both conditions could be linked in women who have undergone FGC.<sup>55</sup> Perinatal risks of FGC include a higher incidence of infant resuscitation at delivery and intrapartum stillbirth and neonatal death.<sup>56</sup>

Lastly, as aforementioned, FGC procedures can be a traumatic experience, adversely affecting the survivor’s mental health. They physical and sexual health complications that may arise from FGC can also have negative psychological consequences, as can any follow-up medical procedures.<sup>57</sup> Undergoing FGC has been associated with a range of mental health problems, including:

- **Depression;**
- **Anxiety disorders;**
- **Post-traumatic stress disorder (PTSD);** and
- **Somatic complaints**, which are physical pains that lack an organic cause.

The impact of such psychological complications has not been widely researched, and not every girl or woman who undergoes FGC suffers from related mental health issues.<sup>58</sup> The mental health status can be affected by the individual’s sociodemographic characteristics, such as culture, socioeconomic background, ethnicity, education

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<sup>49</sup> *Id.* at 130.

<sup>50</sup> *Id.* at 132.

<sup>51</sup> *Id.* at 136.

<sup>52</sup> WHO, *Sexual and Reproductive Health: Health Risks of Female Genital Mutilation (FGM)* (last visited Dec. 7, 2018), available at [https://www.who.int/reproductivehealth/topics/fgm/health\\_consequences\\_fgm/en/](https://www.who.int/reproductivehealth/topics/fgm/health_consequences_fgm/en/).

<sup>53</sup> *Id.*

<sup>54</sup> *Id.*

<sup>55</sup> *Id.*

<sup>56</sup> *Id.*

<sup>57</sup> *Supra* note 6 at 239.

<sup>58</sup> *Id.*



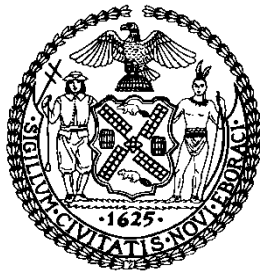
and age; whether the individual resides in her community of origin or is a migrant; the rate of acceptance of the practice in the community and society in which she resides; the attitudes of health care providers; and the legality of FGC where she resides.<sup>59</sup>

#### IV. PROPOSED INT. NO 1828-A

Proposed Int. No. 1828-A would establish an advisory committee on female genital mutilation and cutting (FGM/C) within the Mayor's Office to End Domestic and Gender-Based Violence (ENDGBV). The advisory committee, headed by the ENDGBV commissioner or their designee, would make recommendations to engage communities and agencies in decreasing, with the goal of eventually eliminating, the practice of female genital mutilation and cutting in the city, and would identify supportive community-based and culturally-responsive resources for people who have undergone female genital mutilation and cutting. According to the legislation, the mayor would appoint advisory committee members from various fields, including City government, healthcare, and non-profit organizations, among others, the advisory committee would be required to meet a minimum of two times per year for two years, after which time ENDGBV would assess the continued need for such advisory committee, and ENDGBV would also be required to report on the advisory committee's activities in its annual report, or if the advisory committee were dissolved, continue to include a description of the office's work in relation to FGM/C in its annual report.

Since introduction, this bill was amended to clarify that the committee would be advisory in nature, and that it would engage communities and focus on assisting with resources. The legislation was also amended to update the advisory committee's duties and further specify who would be involved with the advisory committee, as well as to allow ENDGBV to evaluate whether the advisory committee is still necessary after two years, and to clarify that the required reporting will done through ENDGBV's annual report rather than through a separate report.

(The following is the text of the Fiscal Impact Statement for Int. No. 1828-A:)



**THE COUNCIL OF THE CITY OF NEW YORK**  
**FINANCE DIVISION**  
 LATONIA MCKINNEY, DIRECTOR  
**FISCAL IMPACT STATEMENT**

**PROPOSED INTRO. NO. 1828-A**  
**COMMITTEE: Women and Gender Equity**

**TITLE:** A local law to amend the administrative code of the city of New York, in relation to establishing a committee on female genital mutilation and cutting, and technical amendments in connection therewith.

**Sponsors:** By Council Members Ampry-Samuel, Rosenthal, Cumbo, Chin, Koslowitz, Ayala, Louis, Kallos, Adams, Gjonai, and Rivera (by request of the Brooklyn Borough President).

<sup>59</sup> *Id.* at 240.

**SUMMARY OF LEGISLATION:** Proposed Intro. No. 1828-A would require the establishment of an advisory committee on female genital mutilation and cutting (FGM/C) within the Mayor’s Office to End Domestic and Gender-Based Violence (ENDGBV). The committee, headed by the ENDGBV commissioner or their designee, would make recommendations to engage communities and agencies in decreasing, with the goal of eventually eliminating, the practice of female genital mutilation and cutting in the city, and would identify supportive community-based and culturally-responsive resources for people who have undergone female genital mutilation and cutting. The mayor or their designee would appoint advisory committee members from various fields, including City government, healthcare, and non-profit organizations, among others. The advisory committee would be required to meet a minimum of two times per year for two years, after which time ENDGBV would assess the continued need for such advisory committee. ENDGBV would also be required to report on the advisory committee’s activities in its annual report, or if the advisory committee were dissolved, continue to include a description of the office’s work in relation to FGM/C in its annual report.

**EFFECTIVE DATE:** This local law would take effect 90 days after becoming law.

**FISCAL YEAR IN WHICH FULL FISCAL IMPACT ANTICIPATED:** Fiscal 2023

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**FISCAL IMPACT STATEMENT:**

	<b>Effective FY22</b>	<b>FY Succeeding Effective FY23</b>	<b>Full Fiscal Impact FY23</b>
<b>Revenues (+)</b>	\$0	\$0	\$0
<b>Expenditures (-)</b>	\$0	\$0	\$0
<b>Net</b>	\$0	\$0	\$0

**IMPACT ON REVENUES:** It is anticipated that there would be no impact on revenues resulting from the enactment of this legislation.

**IMPACT ON EXPENDITURES:** It is anticipated that there would be no expenses resulting from the enactment of this legislation. ENDGBV already has sufficient resources to support the committee meetings and the submission of the required report.

**SOURCE OF INFORMATION:** New York City Council Finance Division

**SOURCE OF FUNDS TO COVER ESTIMATED COSTS:** N/A

**ESTIMATE PREPARED BY:** Nevin Singh, Financial Analyst

**ESTIMATE REVIEWED BY:** Eisha Wright, Unit Head  
Regina Poreda Ryan, Deputy Director  
Noah Brick, Assistant Counsel

**LEGISLATIVE HISTORY:** This legislation was introduced to the Council on December 19, 2019 as Intro. No. 1828 and was referred to the Committee on Women and Gender Equity (Committee). The Committee heard the legislation in a joint hearing with the Committee on Health on October 28, 2020, and the legislation was laid over. The legislation was subsequently amended and the amended version, Proposed Intro. No. 1828-A, will be considered by the Committee at a hearing on September 9, 2021. Upon successful vote by the Committee, Proposed Intro. No. 1828-A will be submitted to the full Council for a vote on September 9, 2021.

**DATE PREPARED:** September 8, 2021.

*Accordingly, this Committee recommends its adoption, as amended.*

**(The following is the text of Int. No. 1828-A:)**

Int. No. 1828-A

By Council Members Ampry-Samuel, Rosenthal, Cumbo, Chin, Koslowitz, Ayala, Louis, Kallos, Adams, Gjonaj, Rivera, Levin, Barron, Rose and Gennaro (by request of the Brooklyn Borough President).

**A Local Law to amend the administrative code of the city of New York, in relation to establishing an advisory committee on female genital mutilation and cutting and making technical amendments in connection therewith**

*Be it enacted by the Council as follows:*

Section 1. Subchapter 7 of chapter 1 of title 3 of the administrative code of the city of New York, as added by local law number 38 for the year 2019, is renumbered subchapter 8; sections 3-170, 3-171, 3-172 and 3-173 of such subchapter, as added by such local law number 38, are renumbered 3-180, 3-181, 3-182 and 3-183, respectively; and a new section 3-184 is added to such subchapter to read as follows:

§ 3-184 *Advisory committee on female genital mutilation and cutting. a. Advisory committee established. There shall be an advisory committee on female genital mutilation and cutting established by the mayor or the mayor's designee. The advisory committee shall make recommendations to engage communities and agencies in decreasing, with the goal of eventually eliminating, the practice of female genital mutilation and cutting in the city and identify supportive community-based and culturally-responsive resources for people who have undergone female genital mutilation and cutting.*

*b. Duties. The advisory committee shall make recommendations to address, without limitation:*

*1. Enhancing access to guidelines and trainings for educators, non-profit organizations, law enforcement and healthcare providers to assist in (i) the identification and protection of individuals at risk of undergoing female genital mutilation and cutting, and (ii) reporting instances of female genital mutilation and cutting;*

*2. Preventing and responding to the practice of female genital mutilation and cutting, including through culturally-sensitive public information about female genital mutilation and cutting;*

*3. Improving the collection of data concerning the practice of female genital mutilation and cutting among individuals and communities in the city, to the extent allowed by law;*

*4. Improving the coordination of systems and services for, as well as the response of agencies to, individuals and communities affected by the practice of female genital mutilation and cutting; and*

*5. Providing opportunities for input from, as well as soliciting and considering the recommendations of stakeholders including, but not limited to, community and faith-based groups, advocacy organizations, survivors of female genital mutilation and cutting and social service providers.*

*c. Membership. 1. To the extent practicable, the advisory committee shall include, but need not be limited to, the following members, provided that such members appointed by the mayor shall serve for a two-year term:*

*(a) The commissioner of the office or such commissioner's designee, who shall serve as chair;*

*(b) The commissioner of children's services or such commissioner's designee;*

*(c) The commissioner of health and mental hygiene or such commissioner's designee;*

*(d) The director of the office of immigrant affairs or such director's designee;*

*(e) The police commissioner or such commissioner's designee;*

*(f) The executive director of the commission on gender equity or such executive director's designee;*

*(g) The chancellor of the department of education or such chancellor's designee;*

*(h) Each borough president or each such borough president's designee;*

*(i) The chief executive officer of the New York city health and hospitals corporation or such chief executive's designee;*

*(j) Three medical professionals, including two or more licensed physicians, appointed by the mayor who have extensive experience working with patients who have undergone female genital mutilation and cutting and training healthcare providers on related issues;*

*(k) Three representatives appointed by the mayor from non-profit organizations that work with individuals who have undergone or are at risk of undergoing female genital mutilation and cutting;*

*(l) An expert in the field of public health data collection and analysis appointed by the mayor who has relevant research experience and expertise; and*

*(m) Three individuals appointed by the mayor who have undergone female genital mutilation and cutting.*

*2. The mayor shall make all appointments required by this section no later than 90 days after the effective date of the local law that added this section.*

*3. Appointed members of the advisory committee shall serve without compensation.*

*d. Meetings. The advisory committee shall meet at least two times per year.*

*e. Assessment. No later than two years following the first meeting of the advisory committee, and every two years thereafter, as applicable, the office shall assess the need for the advisory committee. If such committee is deemed unnecessary, the advisory committee shall be dissolved following the submission of the subsequent report required pursuant to this section.*

*f. Report. The commissioner of the office shall include each year in the annual report prepared and submitted in accordance with section 3-181 a description of the advisory committee's activities and recommendations. After dissolution of the advisory committee, if applicable, the commissioner of the office shall continue to include in such annual report a description of the office's work in relation to female genital mutilation and cutting.*

*§ 2. This local law takes effect 90 days after it becomes law.*

DARMA V. DIAZ, *Chairperson*; LAURIE A. CUMBO, BEN KALLOS; FARAH N. LOUIS,; Committee on Women and Gender Equity, September 9, 2021.

On motion of the Speaker (Council Member Johnson), and adopted, the foregoing matter was coupled as a General Order for the day (see ROLL CALL ON GENERAL ORDERS FOR THE DAY).

## **GENERAL ORDER CALENDAR**

*There were no additional items listed on the General Order Calendar.*

**ROLL CALL ON GENERAL ORDERS FOR THE DAY  
(Items Coupled on General Order Calendar)**

- |     |                     |  |
|-----|---------------------|--|
| (1) | <b>Int 647-A -</b>  | Peer support services for veterans.  |
| (2) | <b>Int 1152-A -</b> | Requiring an online payment grace period.  |
| (3) | <b>Int 1668-A -</b> | Establishing a primary care services and patient navigation program.   |
| (4) | <b>Int 1789-A -</b> | Side guards.   |
| (5) | <b>Int 1828-A -</b> | Establishing an advisory committee on female genital mutilation and cutting and making technical amendments. |

The Majority Leader and Acting President Pro Tempore (Council Member Cumbo) put the question whether the Council would agree with and adopt such reports which were decided in the **affirmative** by the following vote:

**Affirmative** – Adams, Ampry-Samuel, Ayala, Barron, Borelli, Brooks-Powers, Cabrera, Chin, Cornegy, D. Diaz, R. Diaz, Dinowitz, Dromm, Eugene, Feliz, Gennaro, Gibson, Gjonaj, Grodenchik, Holden, Kallos, Koo, Levin, Levine, Louis, Maisel, Miller, Moya, Powers, Riley, Rivera, Rodriguez, Rose, Treyger, Ulrich, Van Bramer, Yeger, the Majority Leader (Council Member Cumbo), and The Speaker (Council Member Johnson) – **39**.

**The General Order vote recorded for this Stated Meeting was 39-0-0 as shown above.**

*The following Introductions were sent to the Mayor for his consideration and approval:  
Int. Nos. 647-A, 1152-A, 1668-A, 1789-A, and 1828-A.*

## INTRODUCTION AND READING OF BILLS

Int. No. 2394

By Council Members Gibson, Dromm, Levin, Adams and the Public Advocate (Mr. Williams).

### A Local Law to amend the administrative code of the city of New York, in relation to the application for New York city identity cards by incarcerated persons

*Be it enacted by the Council as follows:*

Section 1. Paragraph (2) of subdivision b of section 3-115 of the administrative code of the city of New York, as added by local law number 35 for the year 2014, is amended to read as follows:

(2) The administering agency shall designate access sites, including at least one site located within each of the five boroughs of the city of New York, where applications for such card shall be made available for pick-up and submission. *The administering agency shall also designate access sites at each city correctional facility.* The administering agency shall also make applications available online.

§ 2. Paragraph (1) of subdivision c of section 3-115 of the administrative code of the city of New York, as added by local law number 35 for the year 2014, is amended to read as follows:

(1) The New York city identity card shall display, at a minimum, the cardholder's photograph, name, date of birth, address, and an expiration date, provided that the administering agency may by rule establish procedures to protect the addresses of victims of domestic violence or *provide* alternate requirements for applicants who lack a permanent address *including incarcerated persons residing in a city correctional facility as described in subdivision d of section 9-128.* Such card shall [also], at the cardholder's option, display the cardholder's self-designated gender. Such identification card shall be designed in a manner to deter fraud.

§ 3. Paragraph (1) of subdivision d of section 3-115 of the administrative code of the city of New York, as added by local law number 35 for the year 2014, is amended to read as follows:

(1) Proof of identity. [In order to establish identity, an] *An* applicant shall be required to *establish identity.* *The administering agency may by rule determine the weight to be given to each type of document provided in this paragraph and may require that an applicant produce one or more of the following documents:*

- (i) a U.S. or foreign passport;
- (ii) a U.S. state driver's license;
- (iii) a U.S. state identification card;
- (iv) a U.S. permanent resident card;
- (v) a consular identification card;
- (vi) a photo identification card with name, address, date of birth[,] and expiration date issued by another country to its citizens or nationals as an alternative to a passport for re-entry to the issuing country;
- (vii) a certified copy of U.S. or foreign birth certificate;
- (viii) a Social Security card;
- (ix) a national identification card with photo, name, address, date of birth[,] and expiration date;
- (x) a foreign driver's license;
- (xi) a U.S. or foreign military identification card;
- (xii) a current visa issued by a government agency;
- (xiii) a U.S. individual taxpayer identification number (ITIN) authorization letter;
- (xiv) an electronic benefit transfer (EBT) card; [or]
- (xv) *a book and case number, or New York state identification number utilized by the department of criminal justice services, assigned to any person incarcerated in a city correctional facility; or*
- (xvi) any other documentation that the administering agency deems acceptable. [The administering agency may by rule determine the weight to be given to each type of document provided in this paragraph, and require that an applicant produce more than one document to establish identity.]

§ 4. Section 9-128 of the administrative code of the city of New York is amended by adding a new subdivision d to read as follows:

*d. The department of correction shall provide eligible incarcerated persons the opportunity to apply for a New York city identification card issued pursuant to section 3-115 and provide notice of such opportunity and necessary assistance in completing such applications, including providing written documentation of the incarcerated person's book and case identification number or New York state identification number for identification purposes, a photo of the incarcerated person to submit with the application and a letter stating that the incarcerated person has resided in the city of New York for at least 15 days and lacks a home address, if applicable. Such eligible incarcerated persons shall include the following:*

- 1. any incarcerated person in the custody of the department of correction on pending felony charges, who has not been sentenced and who has been in custody for at least seven days; and*
- 2. any incarcerated person who has been sentenced and will serve 10 days or more in any city correctional institution.*

§ 5. This local law takes effect 120 days after it becomes law, except that the commissioner of social services/human resources administration shall take such actions as are necessary for its implementation, including the promulgation of rules, prior to such effective date.

Referred to the Committee on Criminal Justice.

Res. No. 1737

**Resolution calling upon the United States Senate to pass, and the President to sign, H.R. 8 (Bipartisan Background Checks Act of 2021).**

By Council Member Gibson.

**Whereas**, In March 2021, H.R. 8 (Bipartisan Background Checks Act of 2021), sponsored by Rep. Mike Thompson, was passed by the U.S. House of Representatives; and

**Whereas**, H.R. 8, if passed, would help address the national epidemic of gun violence in the U.S., where at least 29 mass shootings with 4 or more fatalities have occurred in the past five years, including 3 this year in Boulder, CO, Atlanta, GA, and Indianapolis, IN that left over 25 dead; and

**Whereas**, There has been a sharp national increase in shootings, generally, during the pandemic, with over 19,000 people killed in shootings and firearm-related incidents during 2020—the highest death toll recorded in 20 years, according to the Gun Violence Archive; and

**Whereas**, New York City mirrors this trend, with 602 shootings wounding or killing 678 victims this year, as of June 7, compared to 358 shootings striking 409 people during this same period last year; and

**Whereas**, H.R. 8 would, if passed, help to prevent gun violence by prohibiting firearm transfers between private parties, unless a licensed gun dealer, manufacturer, or importer first takes possession of the firearm to conduct a background check; now, therefore, be it

**Resolved**, That the Council of the City of New York calls upon the United States Senate to pass, and the President to sign, H.R. 8 (Bipartisan Background Checks Act of 2021) .

Referred to the Committee on Public Safety.

Int. No. 2395

By Council Members Gjonaj and Yeger.

**A Local Law to amend the administrative code of the city of New York, in relation to increasing the fines for the unlawful use of all-terrain vehicles and dirt bikes**

*Be it enacted by the Council as follows:*

Section 1. Section 19-196 of the administrative code of the city of New York, as added by local law number 28 for the year 2017, is amended to read as follows:

§ 19-196 All-terrain vehicles, including dirt bikes. a. Definitions. For the purposes of this section, the following terms have the following meanings:

All-terrain vehicle. The term “all-terrain vehicle” has the same meaning as set forth in subdivision 1 of section 2281 of the vehicle and traffic law, which includes dirt bikes, or any successor provision.

Operate. The term “operate” means to ride in or on, other than as a passenger, or use or control the operation of an all-terrain vehicle in any manner.

Person. The term “person” means an individual and does not include officers or employees of any governmental agency acting in an official capacity, or private individuals or entities acting pursuant to agreements with governmental agencies.

b. No person shall operate an all-terrain vehicle in the city of New York, except that, in the case of property other than a street or a park, an all-terrain vehicle may be operated only with the consent, written or conspicuously posted consistent with applicable law, of the owner or lessee, or operated by an individual owner or lessee.

c. The violation of subdivision b of this section constitutes a violation punishable by a fine *of no less than 375 dollars, but not to exceed [500] 750 dollars for the first offense and of no less than 750 dollars, but not to exceed [1,000] 1,500 dollars for any subsequent offense.*

d. A person who violates subdivision b of this section shall be liable for a civil penalty of [500] 750 dollars. A person committing a second or subsequent violation of subdivision b of this section shall be liable for a civil penalty of [1,000] 1,500 dollars. Civil penalties pursuant to this subdivision are recoverable in a proceeding before the office of administrative trials and hearings pursuant to chapter 45-A of the charter, or in a civil action or proceeding brought in the name of the city.

e. Any act prohibited by this section additionally constitutes a traffic infraction punishable by a fine *of no less than 375 dollars, but not to exceed [500] 750 dollars for the first conviction, and of no less than 750 dollars, but not to exceed [1,000] 1,500 dollars for any subsequent conviction.*

§ 2. This local law takes effect 60 days after it becomes law.

Referred to the Committee on Public Safety.

Int. No. 2396

By Council Members Holden and Yeger.

**A Local Law to amend the administrative code of the city of New York, in relation to prohibiting the use of a vehicle to reserve a parking space and prohibiting the continuous parking of a vehicle in the same location for more than five consecutive days**

*Be it enacted by the Council as follows:*

Section 1. Subchapter 2 of chapter 1 of title 19 of the administrative code of the city of New York is amended by adding a new section 19-175.8 to read as follows:

§ 19-175.8 *Restrictions on parking. a. Prohibiting the use of a vehicle to reserve a parking space. Notwithstanding any rule or regulation to the contrary, a person shall not use a vehicle to reserve or attempt to reserve a parking space or to prevent a vehicle from parking on a public street, except as otherwise permitted by law. A person found to be in violation of this subdivision shall be liable for a civil penalty of \$95 for each violation.*

*b. Prohibiting the parking of a vehicle for more than five consecutive days. When parking is not otherwise restricted, a person shall not continuously park a vehicle in the same location on a public street or roadway in any area, including a residential area, for more than five consecutive days.*



*c. Outreach. Beginning no later than the effective date of this local law, and continuing for 90 days thereafter, the commissioner, in collaboration with relevant agencies and relevant stakeholders, shall conduct culturally appropriate outreach in the designated citywide languages, as defined in section 23-1101, to alert vehicle owners and relevant stakeholders to the parking restrictions established by subdivisions a and b. Such outreach shall include, but need not be limited to, posting information on relevant agency websites.*

*c. The commissioner shall promulgate rules necessary and appropriate to the administration of this section.*

§ 2. This local law takes effect 90 days after it becomes law, except that the commissioner of transportation shall take such measures as are necessary for the implementation of this local law, including the promulgation of rules, before such date.

Referred to the Committee on Transportation.

Int. No. 2397

By Council Members Moya, Kallos, Salamanca, Rosenthal, Dinowitz, Levine, Menchaca, Lander, Brannan, Adams, Powers, Feliz and Reynoso.

### **A Local Law in relation to severance pay for hotel service employees**

*Be it enacted by the Council as follows:*

Section 1. Definitions. For the purposes of this local law, the following terms have the following meanings:

Closure. The term “closure” means the closure of a hotel to the public commencing on or after March 1, 2020 and where such hotel has not reopened and recalled 25 percent of its workforce by October 1, 2021.

Covered hotel service employee. The term “covered hotel service employee” means, with respect to a hotel, a person who, as of March 1, 2020, had been employed for one year or more to perform work in connection with the operation of such hotel and who was not during such time a managerial, supervisory, or confidential employee or otherwise exercising control over the management of such hotel, and has a legal right to be recalled to their previous position.

Hotel. The term “hotel” means a transient hotel as defined in section 12-10 of the New York city zoning resolution.

Hotel employer. The term “hotel employer” means any person who owns, controls or operates a hotel.

Hotel service. The term “hotel service” means work performed in connection with the operation of a hotel.

Mass layoff. The term "mass layoff" means (i) a reduction in force which is not the result of a closure and which results in a layoff during any 30-day period for 75 percent or more of the employees at the establishment; (ii) the failure to reopen a hotel for transient use to the public; or (iii) maintaining an average offered occupancy rate of less than 50 percent.

Offered occupancy rate. The term “offered occupancy rate” means, with respect to a hotel for a particular night, the number of rooms in such hotel available and offered for occupancy for such night divided by the total number of rooms in such hotel.

§ 2. Severance. a. Whenever there is a hotel closure, a hotel employer shall provide to each covered hotel service employee, severance pay for such week in the following amount, provided that no such employee need be provided such pay for more than 30 weeks:

(i) for the weeks commencing September 6, 2021, but before December 19, 2021, \$500; and

(ii) for the weeks commencing December 20, 2021, but before April 3, 2022, \$1,000.

b. Whenever there is a mass layoff, a hotel employer shall provide to each covered hotel service employee, severance pay for such week in the following amount, provided that no such employee need be provided such pay for more than 30 weeks:

(i) for the weeks commencing October 4, 2021, but before January 16, 2022, \$500; and

(ii) for the weeks commencing January 17, 2022, but before May 2, 2022, \$1,000.

c. Such severance pay shall be provided to such employee within five days after the end of such week.

d. The payment of severance pay pursuant to subdivision a shall not affect an employee’s legal right to be recalled to their previous position.

e. The payment of severance pay pursuant to subdivision a shall be in addition to any severance or similar pay already paid or otherwise owed for periods prior to October 1, 2021.

§ 3. Applicability. a. This section shall not apply to:

- (i) a covered hotel service employee who is recalled full-time;
- (ii) a covered hotel service employee who is covered by a collective bargaining agreement that provides for a greater level of severance pay for a given week; or
- (iii) a hotel that has closed permanently and has or is in the process of converting to an alternate use, provided that covered hotel service employees are offered severance in an amount of not less than 20 days pay per year of service at the same rate that such employee is paid for paid days off and provided that such severance was specifically tied to the conversion of the hotel.

b. If a hotel reopens, its obligations to pay the severance for a covered hotel service employee shall cease on the sooner of the date such employee is recalled, or four weeks from the date on which such hotel reopens.

§ 4. Remedies. a. A hotel service employee for a hotel who has not received severance pay owed pursuant to this local law may bring an action in supreme court against a hotel employer for violation of this local law.

b. If the court finds that such employee has not received severance pay in violation of this local law, the court shall award to such employee twice the amount of severance pay owed pursuant to this local law and such employee's reasonable attorney's fees and costs.

c. For violations of this local law, the commissioner of consumer and worker protection may issue an order directing compliance.

§ 5. This local law takes effect immediately.

Referred to the Committee on Consumer Affairs and Business Licensing.

Res. No. 1738

**Resolution calling on the New York State Legislature to pass, and the Governor to sign, S.1553B/A.6399A, the Clean Slate Act.**

By the Public Advocate (Mr. Williams).

**Whereas**, According to the National Institute of Justice, nearly 1 in 3 American adults has a prior arrest or criminal conviction on their record; and

**Whereas**, According to the Legal Action Center, in New York even a single past conviction can mean a lifetime of obstacles and barriers to critical employment, licensing, housing and educational opportunities; and

**Whereas**, According to Clean Slate New York, a coalition of over 100 advocacy groups, nearly 2.3 million New Yorkers are shackled by their convictions and perpetually excluded from our state's economy and society; and

**Whereas**, According to the Brennan Center for Justice, people who have been to prison lose an average of \$484,400 in earnings over their lifetime; and

**Whereas**, As determined by the Economic Policy Institute, racial disparities and socio-economic discrimination are rampant throughout the criminal legal system, and statistical data shows that convictions for even low-level offenses result in cyclical harm and structural instability for individuals, families and communities; and

**Whereas**, On January 13, 2021, New York Senator Zellnor Myrie and New York Assembly Member Catalina Cruz introduced S.1553B/A.6399A, the Clean Slate Act, which would automatically seal conviction records after someone has completed their sentence, is off of parole or probation, has not incurred any new charges or convictions in New York State during the waiting period, and the conviction to be sealed is not a sex offense; and

**Whereas**, According to reports from various media outlets, only approximately 2,500 of an estimated 600,000 eligible people, or less than 0.5 percent, have had their records sealed since New York's current application-based sealing law went into effect in 2017; and

**Whereas,** Giving people access to jobs, housing, education and licenses to practice a trade increases their participation in the economy and reduces the likelihood they will return to prison, thereby making our communities safer and more prosperous; and

**Whereas,** Numerous other states, including Pennsylvania, Michigan, Utah and Connecticut, have already passed “Clean Slate” legislation; and

**Whereas,** Excluding individuals with criminal records from full participation in society creates a system of perpetual punishment, contributes to intergenerational trauma and exacerbates racial and economic inequality; and

**Whereas,** The Clean Slate Act works to ensure that individuals are well integrated into society and have opportunities to move forward after having paid their debts to society; now, therefore, be it

**Resolved,** That the Council of the City of New York calls on the New York State Legislature to pass, and the Governor to sign, S.1553B/A.6399A, the Clean Slate Act.

Referred to the Committee on Public Safety.

Int. No. 2398

By Council Member Van Bramer.

**A Local Law to amend the New York city charter, in relation to updating the open culture program for art and cultural institutions and making the program permanent**

*Be it enacted by the Council as follows:*

Section 1. Chapter 67 of the New York city charter is amended by adding a new section 2508 to read as follows:

§ 2508. *a. Definitions. For the purposes of this section, the following terms have the following meanings:*

*Artistic or cultural event. The term “artistic or cultural event” means an event or programming offered or run by an eligible art and cultural institution or a cultural venue, including but not limited to cultural performances, rehearsals and classes.*

*COVID-19. The term “COVID-19” means the disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).*

*Cultural venue. The term “cultural venue” means an entertainment facility in the city of New York intended or designed to be used for a performance in front of a live audience.*

*Eligible art and cultural institution. The term “eligible art and cultural institution” means: (i) an art or cultural group, organization or institution within the city of New York that is a member of the cultural institutions group, as determined by the department of cultural affairs, or that is eligible to apply for a grant through the cultural development fund administered by such department, (ii) a person providing documentation of funding or who would have been eligible to apply for funding from a borough arts council or the New York city artist corps program within the prior two years, or (iii) a person or an organization with fiscal sponsorship from an art and cultural organization that falls into categories (i) or (ii).*

*Fiscal sponsorship. The term “fiscal sponsorship” means a relationship between an eligible art and cultural organization or a cultural venue, and a group or individual whose activities fall within the sponsoring organization or venue’s mission, that enables the sponsoring organization or venue to apply for the program established by this section, on behalf of such sponsored group or individual.*

*Office. The term “office” means the mayor’s office of citywide event coordination and management established pursuant to executive order number 105, dated September 17, 2007, or another office or agency designated by the mayor to perform the functions of such office set forth in this section.*

*Open space. The term “open space” means any portion of a roadway, or outdoor spaces on a sidewalk or curb lane adjacent to an eligible art and cultural institution, designated by the department of transportation, in consultation with the office, that may be used by an eligible art and cultural institution or cultural venue for an outdoor artistic or cultural event, with at least one such location per community district.*

*Open streets.* The term “open streets” has the same meaning as such term is defined in section 19-107.1 of title 19 of the administrative code of the city of New York.

*Program.* The term “program” means the open culture program established pursuant to subdivision b of this section.

*b. Open culture program.* By April 1, 2022, the office, in consultation with the department of transportation, the department of buildings, the police department, the fire department, and any other agency designated by the mayor, shall establish an open culture program pursuant to which an eligible art and cultural institution or cultural venue may utilize an open space for an artistic or cultural event. The office shall, in consultation with relevant agencies, establish eligibility and use guidelines and policies for such program, and promulgate any necessary rules; provided, however, that such program shall include the following elements:

1. There shall be no fee for participation by an eligible art and cultural institution or cultural venue in such program, except as provided for in subdivision d of this section.

2. An eligible art and cultural institution or cultural venue utilizing an open space for an artistic or cultural event may produce such event for no charge to an audience, request audience donations before, during or after such event, or charge for tickets; provided, however, that such institution or venue may not physically exclude a member of the public from viewing such event from a publicly accessible location outside the open space assigned for such event.

3. An artistic or cultural event must comply with any applicable requirements on outdoor cultural events and gatherings set by applicable federal or state law or regulations or any applicable directive from the governor or any agency of the state of New York.

4. The program shall provide that permission for an eligible art and cultural institution or cultural venue to use an open space will only require an application to one city agency, and that to the extent practicable such application place a minimal burden on such institution or venue. A determination that such application is approved or denied shall be made within five business days of application submission by an eligible art and cultural institution or cultural venue.

*c. Designation of open spaces.* The department of transportation, in consultation with the office, shall designate locations to be open spaces, considering suggestions from council members and factors including but not limited to the effects on traffic, public safety, quality of life, and suitability for use of such locations for performances. Such open space shall include all open streets. The department of transportation shall post online a list of such open spaces by April 1, 2022.

*d. Allowable fees.* 1. In accordance with paragraph 1 of subdivision b of this section, only an application fee of \$20 may be charged for application and participation in the program, provided, however, that applicants seeking a permit to use or operate a sound device or apparatus must pay the applicable fee in accordance with subdivision h of section 10-108 of the administrative code of the city of New York.

2. Nothing in this section shall waive any penalty or fine that may be issued for such event for violation of any applicable rule, law or order.

*e. Compliance with other laws.* 1. Nothing in this section shall relieve an eligible art and cultural institution or cultural venue from their obligation to adhere to all emergency executive orders issued pursuant to section 24 or 29-a of the executive law, and to all local, state, and federal requirements relating to health and safety. An eligible art and cultural institution or cultural venue participating in the program shall adhere to all applicable guidance and regulations issued by the department of transportation, the department of cultural affairs, the department of buildings, the department of health and mental hygiene, the New York state department of health, and any other agency. Such institution or venue shall also adhere to all local, state and federal requirements relating to accessibility for people with disabilities.

2. The following laws and rules are suspended only to the extent necessary to implement this program, provided that the office or any relevant agency may further limit the waiver of such laws and rules in program guidance to effectuate the establishment of the program:

(a) Paragraph a of subdivision 2 of section 16-118 of the administrative code of the city of New York, to the extent such paragraph would prohibit the obstruction of a flagging or curbstone as part of the program.

(b) Subdivision b of section 16-122 of the administrative code of the city of New York, to the extent such subdivision would prohibit movable property to be left, or any obstruction to be erected, in a public place as part of the program.

(c) Section 21-111 of the administrative code of the city of New York, to the extent such section would require an eligible art and cultural institution or cultural venue to obtain a public solicitation license in order to solicit donations as part of this program.

(d) Paragraph r of subdivision 1 of section 1301 of the New York city charter, section 22-205 of the administrative code of the city of New York, headed "Movie-making, telecasting and photography in public places," and chapter 9 of title 43 of the rules of the city of New York, to the extent any such provision may require a permit for any filming or rigging in connection with an event covered by the program.

(e) Sections 2-03 and 2-04 of title 34 of the rules of the city of New York, to the extent such sections would require a permit and a fee for the use of a tent or umbrella as part of the program.

(f) Sections 7-02 and 7-04 of title 34 of the rules of the city of New York, to the extent such provisions would apply to the installation or construction of an improvement or other structure as part of the program.

(g) Chapter 1 of title 50 of the rules of the city of New York, to the extent necessary to: (i) suspend all deadlines and fee schedules for a roadway event occurring as part of the program, (ii) allow the office to modify or eliminate any timeframe or deadline for an agency or applicant to review or comment on an application submitted as part of this program in order that the office may make a timely determination as required by paragraph 4 of subdivision b of this section; and (iii) allow the office to establish application and use guidelines for the program.

f. Reporting. On an annual basis, the office shall submit to the mayor and the speaker of the council and post on the office's website a report evaluating the open culture program, including any recommendations for modifications or expansion. Such report shall also include, but not be limited to:

1. A list and evaluation of locations that were utilized for open culture over the previous 12 month period, including with any available details related to the physical characteristics of such locations and feedback on the types of artistic or cultural events the location is best suited to, as well as information related to whether any participating location was only available for part of the year;

2. An overview of significant benefits and challenges with the open culture program, and potential solutions to such challenges, including but not limited to the need for barricades or production support;

3. Available information about opportunities to add additional locations to the open culture program, and information on opportunities for eligible art and cultural institutions and cultural venues to suggest additional locations;

4. An overview of any outreach conducted by the office or other city offices related to the open culture program;

5. Information from any surveys or feedback collected from open culture program participants, disaggregated by attendees and permit holders, where applicable, and including information on the demographic make-up of eligible art and cultural institutions and cultural venues;

6. How many eligible art and cultural institutions and cultural venues applied to the open culture program and did not receive a permit, including to the reason why the permit was denied, where such information is available.

7. Any available information related to the economic impact of the open culture program, including but not limited to the economic impact of such program on art and cultural institutions and cultural venues, as well as the economic impact on businesses located in close proximity to the locations that hosted an artistic or cultural event; and

8. An overview of potential funding or opportunities for support for eligible art and cultural institutions and cultural venues.

8. An overview of potential funding or opportunities for support for eligible art and cultural institutions and cultural venues.

g. Suspension. The department of transportation, upon consultation with the office and the department of health and mental hygiene, may suspend the program upon a determination that use of open space as part of the program may materially impact public health and safety efforts to contain the spread of COVID-19. The office shall promptly provide written notice to the speaker of the council of any such suspension.

§ 8. This local law takes effect on April 1, 2022.

Referred to the Committee on Cultural Affairs, Libraries and International Intergroup Relations.

L.U. No. 838

By Council Member Salamanca:

**Application No. N 210270 ZRY (Elevate Transit: Zoning for Accessibility) submitted by the Metropolitan Transportation Authority (MTA) and the New York City Department of City Planning pursuant to Section 201 of the New York City Charter for an amendment of the Zoning Resolution of the City of New York, creating Article VI, Chapter 6 (Special Regulations Applying Around Mass Transit Stations) and modifying related sections, Citywide.**

Referred to the Committee on Land Use and the Subcommittee on Zoning & Franchises.

L.U. No. 839

By Council Member Salamanca:

**Application No. C 180395 ZMQ (106-02 Rockaway Beach Boulevard Rezoning) submitted by RBB II LLC pursuant to Sections 197-c and 201 of the New York City Charter, for an amendment of the Zoning Map, Section Nos. 30a and 30b by eliminating from an existing R5D District a C2-3 District bounded by Rockaway Freeway, Beach 106<sup>th</sup> Street, Rockaway Beach Boulevard and Beach 108<sup>th</sup> Street and changing from an R5D District to an M1-3 District property bounded by Rockaway Freeway, the centerline of a Railroad Right of Way, Beach 106<sup>th</sup> Street, Rockaway Beach Boulevard, and Beach 108<sup>th</sup> Street, Borough of Queens, Council District 32, Community District 14.**

Referred to the Committee on Land Use and the Subcommittee on Zoning & Franchises.

L.U. No. 840

By Council Member Salamanca:

**Application No. C 200306 ZMK (307 Kent Avenue Rezoning) submitted by 307 Kent Associates pursuant to Sections 197-c and 201 of the New York City Charter for an amendment of the Zoning Map, Section No. 12d, by changing from an M3-1 District to an M1-5 District property bounded by South 2nd Street, a line 300 feet northwesterly of Wythe Avenue, South 3rd Street, and Kent Avenue; changing from an M3-1 District to an M1-4/R6A District property bounded by South 2nd Street, a line 210 feet northwesterly of Wythe Avenue, South 3rd Street, and a line 300 feet northwesterly of Wythe Avenue; and establishing a Special Mixed Use District (MX-8) bounded by South 2nd Street, a line 210 feet northwesterly of Wythe Avenue, South 3rd Street, and a line 300 feet northwesterly of Wythe Avenue; Borough of Brooklyn, Council District 33, Community District 1.**

Referred to the Committee on Land Use and the Subcommittee on Zoning & Franchises.

## L.U. No. 841

By Council Member Salamanca:

**Application No. N 200307 ZRK (307 Kent Avenue Rezoning) submitted by 307 Kent Associates pursuant to Section 201 of the New York City Charter for an amendment of the Zoning Resolution of the City of New York, modifying APPENDIX F for the purpose of establishing a Mandatory Inclusionary Housing area for property in the Borough of Brooklyn, Council District 33, Community District 1.**

Referred to the Committee on Land Use and the Subcommittee on Zoning & Franchises.

## L.U. No. 842

By Council Member Salamanca:

**Application No. C 210289 ZMR (River North) submitted by Richmond SI Owner LLC pursuant to Sections 197-c and 201 of the New York City Charter for an amendment of the Zoning Map, Section No. 21c, eliminating from an existing R6 District a C2-2 District bounded by Richmond Terrace, Hamilton Avenue, a line 100 feet westerly of Stuyvesant Place, a line 100 feet southwesterly of Richmond Terrace, and Nicholas Street; eliminating a Special Hillside Preservation District (HS) bounded by Richmond Terrace, Stuyvesant Place, Hamilton Avenue, a line 185 feet westerly of Stuyvesant Place, a line 185 feet southwesterly of Richmond Terrace, and Nicholas Street; changing from an R6 District to an R7-3 District property bounded by Richmond Terrace, Stuyvesant Place, Hamilton Avenue, a line 185 feet westerly of Stuyvesant Place, a line 185 feet southwesterly of Richmond Terrace, and Nicholas Street; establishing within an existing R6 District a C2-4 District bounded by Richmond Terrace, Hamilton Avenue, and Stuyvesant Place; establishing within a proposed R7-3 District a C2-4 District bounded by Richmond Terrace, Stuyvesant Place, Hamilton Avenue, a line 185 feet westerly of Stuyvesant Place, a line 185 feet southwesterly of Richmond Terrace, and Nicholas Street; and establishing a Special St. George District (SG) bounded by Richmond Terrace, Hamilton Avenue, a line 185 feet westerly of Stuyvesant Place, a line 185 feet southwesterly of Richmond Terrace, and Nicholas Street; Borough of Staten Island, Community District 1, Council District 49, as shown on a diagram (for illustrative purposes only) dated May 3, 2021, and subject to the conditions of CEQR Declaration E-614.**

Referred to the Committee on Land Use and the Subcommittee on Zoning & Franchises.

## L.U. No. 843

By Council Member Salamanca:

**Application No. N 210290 ZRR (River North) submitted by Richmond SI Owner LLC pursuant to Section 201 of the New York City Charter for an amendment of the Zoning Resolution of the City of New York, modifying Article XII, Chapter 8 (Special St. George District) and related Sections, and modifying APPENDIX F for the purpose of establishing a Mandatory Inclusionary Housing area; Borough of Staten Island, Community District 1, Council District 49.**

Referred to the Committee on Land Use and the Subcommittee on Zoning & Franchises.

L.U. No. 844

By Council Member Salamanca:

Application No. C 200291 ZSR (River North) submitted by Richmond SI Owner LLC, pursuant to Sections 197-c and 201 of the New York City Charter, for the grant of a special permit pursuant to Section 128-62\* of the Zoning Resolution, to modify the rear yard requirements of Section 23-47 (Minimum Required rear yard); the permitted obstruction requirements of Section 128-31 (Rooftop Regulations) and Section 33-42 (Permitted Obstructions); the height and setback requirements of Section 128-33\* (Maximum Base Height) and Section 128-34\* (Maximum Building Height); and the planting requirements of Section 128-42 (Planting Areas); in connection with a proposed mixed-use development, on property located at 24 Stuyvesant Place (Block 13, Lots 82, 92, 100 and p/o Lot 8), in an R7-3/C2-4\*\* District, within the Special St. George District (SG)\*\*, Borough of Staten Island, Community District 1, Council District 49. \*Note that Sections 128-33, 128-34 & 128-62 are proposed to be change under a concurrent related application for a Zoning Text change (N 210290 ZRR). \*\*Note that this site is proposed to be rezoned by changing R6(HS) & R6/C2-2(HS) Districts to an R7-3/C2-4(SG) District under a concurrent related application for a Zoning Map change (C 210289 ZMR).

Referred to the Committee on Land Use and the Subcommittee on Zoning & Franchises.

NEW YORK CITY COUNCIL

**A N N O U N C E M E N T S**

**Friday, September 10, 2021**

Subcommittee on Zoning & Franchises

Francisco Moya, Chairperson

**See Land Use Calendar**

Hybrid Hearing - Council Chambers - City Hall.....10:00 a.m.

**Monday, September 13, 2021**

Subcommittee on Landmarks, Public Sitings and Dispositions

Kevin C. Riley, Chairperson

**See Land Use Calendar**

Hybrid Hearing - Committee Room – City Hall.....10:00 a.m.

Committee on Housing and Buildings

Robert Cornegy, Jr., Chairperson

**Int 1817** - By Council Members Cumbo, Barron, Cornegy and Kallos - **A Local Law** to amend the administrative code of the city of New York, in relation to affordable housing lottery processes.

**Int 2259** - By Council Member Cornegy - **A Local Law** in relation to an extension of the deadlines for inspection and correction of building gas piping systems in certain community districts.

**Int 2262** - By Council Members Cornegy, Kallos and Chin (by request of the Mayor) - **A Local Law** to amend the New York city building code, in relation to final inspections for temporary construction equipment permits and prohibiting stand-off brackets.

**Int 2263** - By Council Members Cornegy and Chin (by request of the Mayor) - **A Local Law** to amend the New York city building code, in relation to the definition of major building.

**Int 2264** - By Council Members Cornegy and Chin (by request of the Mayor) - **A Local Law** to amend the New York city building code, in relation to cold-formed steel construction.



**Int 2265** - By Council Members Cumbo, Chin, Kallos, Louis and Rivera - **A Local Law** to amend the administrative code of the city of New York, in relation to stove safety knobs.

**Int 2276** - By Council Members Moya and Chin (by request of the Mayor) - **A Local Law** to amend the New York city building code, in relation to construction superintendents, and repealing sections 3310.8.3 and 3310.8.6 of the New York city building code in relation to inspections required by site safety managers or coordinators, and in relation to reasonable prudence required by site safety managers or coordinators to ensure safety.

**Proposed Int 2278-A** - By the Public Advocate (Mr. Williams) and Council Members Koslowitz, Holden and Chin (by request of the Mayor) - **A Local Law** to amend the administrative code of the city of New York and the New York city building code, in relation to the licensing of general contractors.

**Int 2309** - By Council Members Kallos, Rivera, Rosenthal, Reynoso, Gibson, Powers, Ayala, Brannan, Gennaro, Moya, Adams, Dromm and Levine - **A Local Law** to amend the administrative code of the city of New York, in relation to requiring registration for short-term rentals and booking services.

**Int 2321** - By Council Members Cornegy, Yeger and Gennaro - **A Local Law** to amend the administrative code of the city of New York, in relation to creating a hardship program for inspection and correction of building gas piping systems.

**Int 2361** - By Council Members Cornegy and Yeger - **A Local Law** to amend the administrative code of the city of New York, in relation to creating a questionnaire related to the inspection and correction of building gas piping systems.

**Int 2377** - By Council Members Cornegy and Holden - **A Local Law** to amend the administrative code of the city of New York, in relation to extending the physical scope of **gas piping inspections**.

**Preconsidered Int \_\_\_ - By Council Member Lander** - **A Local Law** to amend the administrative code of the city of New York, in relation to requiring a certification of no harassment prior to approval of construction documents or issuance of permits for demolition or renovation of certain buildings.

Council Chambers - City Hall.....11:00 a.m.

Committee on Land Use

Rafael Salamanca, Jr., Chairperson

**All items reported out of the Subcommittees**

AND SUCH OTHER BUSINESS AS MAY BE NECESSARY

Committee Room – City Hall.....1:00 p.m.

**Tuesday, September 14, 2021**

Committee on Women and Gender Equity

Darma V. Diaz, Chairperson

**Oversight** - Menstrual Equity in New York City.

Committee Room – City Hall.....9:00 a.m.

Committee on Transportation jointly with the  
Committee on Environmental Protection and the  
Committee on Resiliency and Waterfronts.....

Ydanis Rodriguez, Chairperson

James F. Gennaro, Chairperson

Justin Brannan, Chairperson

**Oversight** - City and MTA Resiliency Efforts and Preparation for Storms.

Council Chambers - City Hall.....10:00 a.m.

Committee on Cultural Affairs, Libraries &  
International Intergroup Relations

James Van Bramer, Chairperson

**Oversight** - The Reopening of Culture in New York: The Return of Indoor Programs, Open Culture, and COVID-19.

Committee Room – City Hall.....12:00 p.m.

Committee on Public Housing

Alicka Ampry-Samuel, Chairperson

**Oversight** - Utilities in Public Housing and NYCHA’s Winter Preparedness.

Committee Room – City Hall.....3:00 p.m.

### Wednesday, September 15, 2021

#### Committee on Youth Services

Deborah Rose, Chairperson

**Oversight** - NYC Youth Count.

Committee Room – City Hall.....9:00 a.m.

#### Committee on Criminal Justice

Keith Powers, Chairperson

**Oversight** - The Condition in Our City's Jails.

Council Chambers - City Hall.....10:00 a.m.

#### Committee on General Welfare

Stephen Levin, Chairperson

**Int 149** - By Council Member Levin - **A Local Law** to amend the administrative code of the city of New York, in relation to updating the report on utilization of and applications for multi-agency emergency housing assistance.**Int 1641** - By Council Members Levin and Ampry-Samuel - **A Local Law** to amend the administrative code of the city of New York, in relation to maximizing efficiency at department of social services/human resources administration centers.**Int 1642** - By Council Member Levin - **A Local Law** to amend the administrative code of the city of New York, in relation to requiring the mayor's office of operations to report on the exits from city-administered facilities and the financings, starts and completions of permanent housing for those exiting city-administered facilities.**Int 1794** - By Council Members Ampry-Samuel, Louis and Kallos - **A Local Law** to amend the administrative code of the city of New York, in relation to de-escalation and trauma-informed training for department of homeless services employees.**Int 2081** - By Council Members Moya, Kallos, Yeger, Chin and Cornegy - **A Local Law** to amend the administrative code of the city of New York, in relation to enhancing the application for and the transparency of the one-shot deal program.

Committee Room – City Hall.....12:00 p.m.

#### Committee on Consumer Affairs & Business Licensing

Diana Ayala, Chairperson

**Int 499** - By Council Member Koslowitz - **A Local Law** to amend the administrative code of the city of New York, in relation to allowing corporations, partnerships and other business entities to obtain newsstand licenses.**Int 508** - By Council Members Rosenthal, Menchaca, Kallos, Cornegy and Ayala - **A Local Law** to amend the administrative code of the city of New York, in relation to the prohibition of requiring low-wage workers to enter into covenants not to compete and also to require employers to notify potential employees of any requirement to enter into a covenant not to compete.**Int 974** - By Council Members Rosenthal, Miller, Rivera, Cornegy and Ayala - **A Local Law** to amend the administrative code of the city of New York, in relation to the disclosure in employment advertisements of mandatory arbitration and non-disparagement clauses in employment contracts.**Int 2318** - By Council Members Ayala, Brannan, Moya, Chin, Gibson, Kallos, Rosenthal, Salamanca, Miller, Lander, Menchaca, Rivera, Powers, Riley, Dinowitz, Levine, Koslowitz, Reynoso, Adams, Holden, Levin, Feliz, Cumbo, Louis, Ampry-Samuel, Cornegy and Brooks-Powers - **A Local Law** to amend the administrative code of the city of New York, in relation to the licensing of labor service providers.**Int 2397** - By Council Member Moya - **A Local Law** in relation to severance pay for hotel service employees

Committee Room – City Hall.....3:00 p.m.

### Friday, September 17, 2021

#### Committee on Mental Health, Disabilities & Addiction

Farah N. Louis, Chairperson

**Oversight** - Coordinating City Agencies to Address Serious Mental Illness.

Committee Room – City Hall.....9:00 a.m.

Committee on Small Business

Mark Gjonaj, Chairperson

**Int 568** - By Council Members Treyger and Ayala - **A Local Law** to amend the administrative code of the city of New York, in relation to reducing civil penalties where food service establishments donate left over food.

**Int 1796** - By Council Members Levin, Gibson, Reynoso, Ayala, Lander, Chin, Van Bramer, Dromm, Kallos, Menchaca, Rivera, Rosenthal, D. Diaz, Rose, Koslowitz and Ampry-Samuel - **A Local Law** to amend the administrative code of the city of New York, in relation to the regulation of commercial rent.

**Int 2000** - By Council Members Gjonaj, Cumbo, Cornegy, Moya, Louis, Koo, Holden, Brannan and Vallone - **A Local Law** to amend the administrative code of the city of New York, in relation to the equitable distribution of emergency funding by borough.

Council Chambers – City Hall.....10:00 a.m.

Committee on Environmental Protection

James F. Gennaro, Chairperson

**Oversight** - Electrifying New York City's School Bus Fleet.

Committee Room – City Hall.....12:00 p.m.

**Monday, September 20, 2021**

Committee on Aging jointly with the  
Committee on Economic Development

Margaret Chin, Chairperson  
Paul Vallone, Chairperson

**Oversight** - Home Delivered and Emergency Meal Services for Seniors through DFTA’s HDM Program and GetFoodNYC.

Committee Room – City Hall.....10:00 a.m.

Committee on Governmental Operations

Fernando Cabrera, Chairperson

**Int 1867** - By Council Members Rodriguez, Menchaca, Dromm, Cabrera, Chin, Kallos, Miller, Van Bramer, Levin, Reynoso, Rivera, Ayala, Lander, Cornegy, Adams, Ampry-Samuel, Levine, Louis, Powers, Rosenthal, R. Diaz, Cumbo, Eugene, the Public Advocate (Mr. Williams), Perkins, Koo, Salamanca, Riley, Barron, Dinowitz, Gibson, Brooks-Powers, Feliz and Moya - **A Local Law** to amend the New York city charter, in relation to allowing lawful permanent residents in New York city to vote in municipal elections.

**Int 2316** - By Council Members Salamanca and Holden - **A Local Law** to amend the New York city charter, in relation to city agency attendance at council hearings.

Council Chambers - City Hall.....10:00 a.m.

Committee on Higher Education

Inez Barron, Chairperson

**Oversight** - Update on Mental Health Resources for Students at CUNY.

Committee Room – City Hall.....1:00 p.m.

**Thursday, September 23, 2021**

*Stated Council Meeting.....Agenda –1:30 p.m.*

The following comments were among the remarks made by the Speaker (Council Member Johnson) during the Communication from the Speaker segment of this meeting:

The Speaker (Council Member Johnson) wished a *shana tova* and a happy, sweet, and prosperous New Year to all those who had celebrated Rosh Hashanah that week. He asked that the Year 5782 bring joy to all who celebrated the new year. He also wished an easy and meaningful fast to those who observe Yom Kippur. The Speaker (Council Member Johnson) expressed his pride that many people of the Jewish faith had come to New York City from around the world. He emphasized that the city should be one that respects all religions especially in the face of the recent rise in anti-Semitism. He expressed his gratitude that he lived in a city which celebrated Rosh Hashanah for Jewish New Yorkers and for all Jews around the world.

The Speaker (Council Member Johnson) acknowledged that Communications Director Jennifer Fermino was leaving the Council. He noted that for more than three years, Ms. Fermino had been a hard worker for the Council as well as a trusted advisor. The Speaker (Council Member Johnson) noted that she had previously worked at the New York Post and had become the City Hall Bureau Chief for the Daily News. He thanked her for all of her service to the Council and the city and wished her well in her future endeavors. At the request of the Speaker (Council Member Johnson), those assembled in the Chambers gave Ms. Fermino a round of applause.

Shortly before the adjournment of this meeting, the Majority Leader and Acting President Pro Tempore (Council Member Cumbo) congratulated Council Member Riley on his marriage which took place on August 31, 2021. She also acknowledged that Council Member Koo had recently celebrated a birthday and she wished him a happy birthday.

Whereupon on motion of the Speaker (Council Member Johnson), the Majority Leader and Acting President Pro Tempore (Council Member Cumbo) adjourned these in-person proceedings to meet again for the Stated Meeting on Thursday, September 23, 2021.

MICHAEL M. McSWEENEY, City Clerk  
Clerk of the Council

*Editor's Local Law Note: Int. Nos. 2291, 2311-A, 2333-A, 2335-A, 2356-A, and 2359-A, adopted at the July 29, 2021 Stated Meeting, were returned unsigned by the Mayor on August 30, 2021. These items had become law on August 29, 2021 due to the lack of Mayoral action within the Charter-prescribed thirty day time period. These bills were assigned subsequently as Local Laws Nos. 89 to 94 of 2021, respectively,*