



## A Conversation with Linda Gibbs Deputy Mayor for Health and Human Services City of New York

*In an era of fiscal constraint marked by shrinking budgets and an increasing demand on services, government executives are confronted with very difficult choices that go to the heart of effective leadership. This situation is ever more acute in the delivery of human services to those most in need. We continue to explore how local government executives are tackling these significant challenges, leveraging innovation, common sense, and technology to make a real difference. What is New York City doing to effectively deliver health and human services? How is the city using technology to be more efficient and effective in the delivery of these services? What common-sense approaches is the city pursuing to make a difference where it counts most? Linda Gibbs, Deputy Mayor for Health and Human Services for the City of New York, joined me on The Business of Government Hour to discuss these questions and so much more. —MJK*

### **On New York City Health and Human Services**

We provide a wide range of health and human services to a diverse and complex client population. We manage about \$20 billion in services provided by nine different agencies that employ about 80,000 people: from public health that focuses on a whole range of quality of life issues to agencies like the Department of Probation that oversees individuals under court-ordered supervision. Broadly, I think agencies in the HHS portfolio provide “helping” services for the city residents. Whether it’s a loss of a job or the onset of homelessness, we have a set of safety-net services that can help people when a crisis arises.

There are the really large agencies, such as the Health and Hospitals Corporation (HHC); it’s the largest public hospital-owned organization possibly in the world, most certainly in the country. It is composed of 11 major hospitals throughout the five boroughs and dozens of community clinics. It has tens of thousands of employees and an annual budget of \$7.5 billion. The vast majority of the people who receive services from our Health and Hospitals Corporation are individuals who are in public health insurance. We also serve everybody with a health need, so we’ll serve regardless of insurance



status. Another example, there’s also the city’s Human Resources Administration—with a \$6 billion budget and 20,000 employees—that manages the critical human services safety net, such as cash assistance and food stamps.

We also enroll folks in the Medicaid program while providing some really important crisis services ranging from support for victims of domestic violence and operating city shelters [to] providing adult protective services and elderly care.

### **On Managing New York City Health and Human Services**

Interestingly, New York City mayors have discretion on how to organize their administration. The city charter requires that a mayor have one deputy mayor, but beyond that it’s really at the mayor’s discretion. In the Bloomberg administration, there are about seven deputy mayors, with four having supervisory responsibility over city agencies.



I see my role as helping HHS agency commissioners to get their job done: to help them manage their organizations, advance strategic decisions, pursue legislative action, assist with problem-solving, and then, of course, help bring agencies together in collaboration. This is the great aspect of having the city's health and human services under one umbrella. We're pulling together all of the agencies and pursuing a more holistic view. We are using resources in a collaborative way to do better problem-solving. Instead of just managing a crisis, we try to tackle conditions that may have given rise to a specific crisis, so [as] to limit or break a cycle.

What a deputy mayor gets to do is to bring all interests throughout city government together, creating more holistic agendas while advancing solutions more aggressively. I think we have an obligation to anticipate problems before they happen, head them off at the pass, so that they don't become a crisis. The worst is when you face a crisis that was avoidable.

### **On Community-Based Human Services Delivery**

This is a theme that cuts across every human service discipline. Hundreds of millions of dollars [are] spent on homeless shelters, but not as much on community supports to prevent homelessness. Billions of dollars are spent in all kinds of adult nursing home care and living facilities, mental health facilities, and jails and prisons. Any time an individual's needs are being addressed by removing them from the community and placing them into an institution it triples, possibly quadruples, the costs.

We spend so much money housing people in homeless shelters. You have to pay the rent for the facility. You have to pay the staff to supervise the facility and security to ensure safety at these shelters. It's a costly endeavor. We know, particularly for single adults, that their homelessness has its roots in undiagnosed, untreated substance abuse, and mental health issues.

We discovered the usefulness of supportive housing. Solving single adult homelessness is not just getting them an apartment. It is also about giving them support at the community level. If they have a crisis, then there's somebody close to watch them and provide support. This is why keeping an eye on these folks before a crisis happens can get them back on the right path. It's been wildly successful and is much cheaper. It's what we want as people; nobody wants to live in an institution.

### **On the Use and Benefits of HHS Connect**

In the first term of the Bloomberg administration, I was the city's commissioner of homeless services, and I had a colleague, who was then the commissioner of probation, whose office was in the same building as mine. We started working together. I was trying to reduce the number of people in shelters while he was trying to reduce the number of people in jails. We discovered that we were basically swapping populations. They would come out of jails and into shelters, out of shelters into jails. We really should combine forces and see if we could work together on reducing recidivism and devising housing stability strategies. It sort of grew out from there, and by the time you knew it we had 10 commissioners around the table talking about populations, individuals moving in and out of our various agencies and services. We decided to create a joint case management process. When an individual is served by more than one city agency at a time, our frontline workers will combine forces and work together to plan holistically around that client's and/or household's needs. We had some brilliant ideas, but initially we could not find a way in real time to let our frontline workers know about the existence of each other in a household's life. At the time, city human services agencies had limited ability to share data due to siloed technology systems. Clients experience these silos in many ways: redundant forms, the required submission of duplicate paperwork, and having to stand in multiple lines in multiple offices.

We stepped back and focused on basically a technology solution. We had to find a way to get dozens of data systems to communicate. We had to both create that technology that would allow the information to be exchanged, but also build in the intelligence to recognize the common client—that the Linda Gibbs in Agency A is the same Linda Gibbs in Agency

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— Linda Gibbs



B, etc. We called this project HHS Connect: it connects the data of all of our partner agencies and identifies shared clients, pulling up a full family profile of that individual. It uses innovative technologies to improve the city's ability to serve its health and human services clients while providing better customer service and online access. It's extraordinarily secure, sharing client information without compromising confidentiality.

Individual agency workers now can enter the information about a household and see the entire city contact that that household has across agencies. They can draw on that information to facilitate applications or consideration for services for a client. Homeless services offers a great example of the benefit gained from this system. We've reduced the amount of time it takes to actually complete a homeless application from something like 22 hours—spread over three days in an office—down to six hours on average. It makes the client's life so much easier. At the same time, it's really

improving the efficiency of individual workers' actions, and helping us to be more effective in dealing with problems more quickly. We're just on the cusp of rolling this out. The future is to now build in social networking capability, creating avenues for our frontline workers to work more collaboratively: also incorporating a joint scheduling that can help workers to be more sensitive to better managing their own and the clients' time.

We'll also be able to better understand good and bad client outcomes, analyzing the sequence of services and identifying patterns of services and behaviors that produce good outcomes.

### **On Strengthening New York City's Nonprofit Partners**

Social services nonprofit organizations are very critical in delivering frontline services within New York City. [In FY 2009 New York City agencies providing social services relied on 1,300 service providers to deliver \$4B of services through 3,700 contracts.] Helping these nonprofits manage through the recession has been one of the most challenging conversations. We lost state and federal funding. The resulting budget cuts translated to reductions in frontline services provided by these nonprofits. At the same time, money these nonprofits depended on from charitable donations also took a hit. The nonprofits were really in distress at a time [when] we needed them to be strong. This crisis provided the impetus to focus on a practical plan to strengthen nonprofits working with the city.

We devised an exciting set of initiatives that we've been rolling out, focusing on improving nonprofit management. We're really focusing on how to help nonprofits be stronger and more resilient during tough economic times. The city is a partner at the table, not simply as a funder, but as a party of interest in ensuring the strength of the nonprofit community. We created a program that partners nonprofits with business leaders in the city, who gave their private time to guide this initiative, bringing all kinds of private partners to the table. The focus of this initiative centered on strengthening



Deputy Mayor of Health and Human Services Linda Gibbs joined Mayor Michael Bloomberg at City Hall to discuss revisions to the juvenile justice system.

nonprofit leadership and management by providing technical assistance and forging partnerships with successful businesses.

Another critical part we didn't have was access to information on which nonprofit was doing well and which was really in crisis. Through the use of technology, we've developed a set of indicators for nonprofits focusing on their fiscal health, staffing, organization, and client service outcomes. Using these indicators, nonprofits can compare themselves to other nonprofits. We call this initiative the NYC Human Services Data Project (HSDData). This project is also connected to an initiative we have that seeks to streamline and reform procurement with the city.

Our third way of helping nonprofits involves streamlining the city's procurement process to reduce burdens on these nonprofits. We needed to make it easier for them to work with the city and provide critical frontline services. We're replacing our procurement system with a single master service agreement for every nonprofit. Our HHS Accelerator is a major new initiative that will reengineer the relationship between us and community-based service providers by creating a centralized document management system, speeding selection, standardizing contracts, and regulating post-award actions. Basically, we're standardizing contracting practices and reducing administrative requirements across the city's agencies over four years. Nonprofit organizations will be able to submit their qualifications in advance to register for procurement opportunities. It will reduce paperwork and time, and move to a truly electronic environment.

The great benefit of the mayor's third term has been the time to actually do these things. I think by the time this administration is done we're going to have a strong foundation built, which others can build upon.

### On Redefining the Poverty Measure in New York City

We had a very ambitious agenda to look at poverty in new ways within New York City. We have a significant social safety net, spending large sums of money helping people who are poor in order to deal with specific crises. The number of people in poverty seems just intractable. We've recognized that we had to shake things up. We've needed to think about and identify new approaches. We really needed to test our assumptions and develop a set of innovative new ideas to tackle poverty.

The current national poverty measure establishes the amount of money you need to live above the poverty line as the cost

of food times three. It was determined back in 1956 when this measure was established. Spin forward 55 years later and food is now about a seventh of what a household would need to spend in order to get by and be above that poverty line. We believe the world has just changed tremendously with two-earner households, transportation, and childcare. We established a new measure for gauging the city poverty levels, one that takes into account the cost of housing, child care and clothing, among other expenses not included in the formula used by the federal government. We thought we needed an accurate and honest measurement of poverty. We took a consensus approach developed two decades ago by the National Academy of Sciences and we implemented it in New York City. The end result was rather than a poverty rate of about 19 percent we, in fact, have a poverty rate that is about 24 percent.

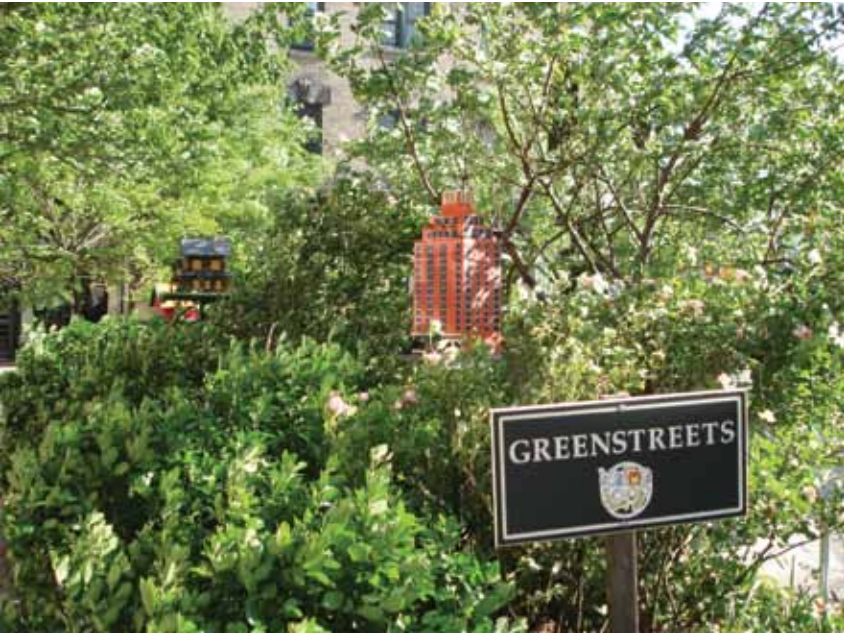
The federal poverty standard doesn't accurately portray poverty within the city and that then fuels bad policy decisions. As a result, we don't recognize where policy works and we're not clear where we may need to target services. It has taught us more about the dynamics involved in understanding poverty within the city.

### On the Aging of New York City's Population

The city's elderly population is growing. Increasingly, there's a greater share of the population 65 and older in New York City. I think in the next decade we're going to have more New Yorkers who are older than 65 than younger than 18. This is a seismic shift in the demography of the city. We have



Jessica Frank Lopez, Deputy Mayor Linda Gibbs, Tom Nelson, Edward Ryan pose following the presentation of the first Age Friendly City Award.



Launched in 1996, Greenstreets is a citywide program to convert paved, vacant traffic islands and medians into green spaces filled with shade trees, flowering trees, shrubs, and groundcover.

to think about the implications of such a shift. How is the aging of the city's population going to change the expectations that citizens have of their government? How is it going to change our civil society?

The Department for the Aging has traditionally provided a pretty discrete set of services within the 300 senior centers that are across the city. Historically, these services centered largely on a food program—feeding the elderly. Today, our senior centers are being used for much more—as centers for healthy living, social engagement, cultural engagement, and physical activity. How can we use our 300 senior centers as sort of a point of energy and activity to engage this ever-growing population?

We actually put out a call to all agencies asking them to imagine a role that their agency might take to help us plan for and anticipate this growing senior population. Agencies came back with really interesting, creative ideas that I would

never have imagined. For example, for our elderly population social isolation is a huge issue. Working in collaboration with the city's Parks Department, we wanted to create opportunities to draw individuals out of their apartments to safe places. Through our Green Streets Program, we converted cement boulevards and little intersections into green spaces, planting trees, beautiful plants, and installing benches. It was a great opportunity to improve the visual quality of these communities while also creating safe spaces for people to enjoy.

## On the Future

We really have to work on this integration issue among our agencies. How do we make sure that collaboration among agencies is hardwired? Technology is one way, but to me it's actually the ownership of shared initiatives. We've focused on a collaborative board type of leadership. We're also starting to build shared services across our agencies, so that we have support units that do things that are not unique to a particular agency. We're building more shared services across city agencies. We're also investing in evaluation and knowledge-gathering, instilling in our agencies an obligation to be self-reflective, curious, and innovative. It is really important to create a culture and give permission to take risks, constantly looking at the next frontier of improvement we need to work on. There is no resting on our laurels, but a constant push for improvement and building that into our organizations. ■

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