

# Health and Human Services Committee Meeting Transcript – 1/13/2016

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>> Houston: Good afternoon. I'm councilmember Ora Houston. A quorum is present, so I will call the meeting of the health and human services council committee of the city of Austin to order. Today is Wednesday, January the 13th, 2016. We're meeting in council chambers, Austin city hall, 301 west second street, Austin, Texas, and the time is 2:09. We've already reminded people about their parking and whether or not they needed to get it validated. Before we start, let me clear up some confusion. The first thing -- after we do the minutes, the first thing on the agenda is citizens communications. Citizens communication is for two minutes and it's for things that are not on the agenda. So if you signed up under citizens communication, and several people did, but you want to speak on an agenda item, we'll get to that point in the -- on the agenda and at that point you will be called up to speak for three minutes. So I hope that clears up any confusion. So if you want to come and change what you've signed up for and you would rather speak on an agenda item, I'll ask staff to come pick up -- bob or somebody. Bob, can you get this in case somebody signed up under citizens communication and they really want to speak on an agenda item? Okay. So when we get to those agenda items I'll call up the public to offer communications and then I'll call up staff if it's a staff briefing. So I just want to make sure and I'll make that announcement later on as well. The first order of business is the agenda. On the agenda is to approve the minutes of the meetings we had on December the 11th.

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Welcome, councilmember troxclair. We're glad you're here. Has everybody had an opportunity to read the minutes from December 11th? >> I move approval. >> Houston: Councilmember Garza has moved approval of the minutes. Is there a second? Councilmember troxclair. All in favor let citing known by saying aye. Opposed? Unanimous on the dais. So now we're at citizens communication, which is general. It is for two minutes. We have time to hear 10 speakers. And you can speak on anything that's not on the agenda. Bob, if you can give me the sheet again, I guess nobody wanted to change. Two changes, okay. Okay. I see what you're doing. The first person is Susana Almanza. >> Good afternoon. I'm Susana Almanza -- >> Houston: Hold on a minute. Don't start her time until we get the packet. Now. >> Good afternoon, I'm Susana Almanza with poder, an environmental social justice organization. And today we're going to present a report drainage fees, capital improvements and equity in the city of Austin. Residents in east Austin have endured major flooding in the past years. East Austin residents have witnessed the loss of lives, loss of property, and our property damage due to flooding in their neighborhoods. Due to the recent flooding in east Austin, poder began to look at issues of equity regarding the use of the

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city of Austin's cip capital improvement projects. And now I'll turn it over to Eric. >> I'm a student at Texas A&M university as well as an intern with poder. This study looks at the distribution of cips and drainage fees. Drainage fees are assessed with most properties on city limits. Using the census bureau it shows where drainage cips are located, how the city determines the need and the demographics and income characteristics of census tracts in Austin. What we did was we requested an open records request from the watershed protection department and we separated the cips funded with drainage money into studies by inactive projects. So the buyouts in the bottom left corner represent about 18% of all total drainage fees, and these are mostly in south and southeast Austin specifically in the onion creek area. The map in the top left corner is all studies and these were done mostly in west Austin and these are studies that could potentially be projects in the future, but we wanted to focus on active projects and that's the map on the right. So active projects represent about 55% of all cip spending and these are the projects that -- of infrastructure that is currently being done now or in the near future to help for improved teenage conditions. [Buzzer sounds] So this next map we wanted to go ahead and restrict to the projects that are \$250,000 or more, which is 85% of total spending in projects. We wanted to look at a break down of the whole city we realized that west Austin has 65% of this money, east Austin 35%, and downtown Austin had 38%. >> Houston: Come on and wrap it up for us. >> We have four minutes. >> Houston: You have two.

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He's not -- oh, he is? I'm sorry, he is signed up. >> So we also realized there's one downtown tract in particular that receives 35% of all cip spending while 35% of tracts in Austin did not receive any money at all. So results show an extreme concentration of cip spending in the downtown area. Outside of downtown there appears to be a bias towards spending cip funds in parks areas as opposed to residential and business areas. >> So poder would like to make the following recommendations. A, reconsider the way it assesses need -- reconsider the way it assesses the need. The city should consider additional factors when assessing the need for a project. Every project has a utility cost. For every project the department does there is another project or projects that will not have the funds to do. Because the cost of projects is not currently enter into the city's decision making, problem solving for extremely expensive projects is prioritized over doing a greater number of less expensive projects benefiting residential customers. In addition, the problem score approach benefits bad behavior from a drainage perspective. Areas with a high degree of impervious cover do pay more, but since they cause more drainage issues they are much more likely to see projects in like this in their area. Residents in areas like east Austin are assessed low problem scores, despite having many drain inlets that do not adequately or efficiently funnel storm water into the drain. Projects should be proposed to rehabilitate the roads, sidewalks and inlets to use the amount on street flooding and protect residential homes and small businesses from flooding in the case of large storms. C, reconsider the way it assesses a drainage fees. The city currently charges all residential customers based on a rate times the amount of impervious cover. And a percent of impervious

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cover. A more realistic way to measure an impact would be to conceive of impervious cover -- [buzzer sounds] -- As a cost and impervious cover as a credit similar to the way that residents with solar panels sell excess electricity to power utility. Most importantly utility should base rates not only on individual

parcel land use, but the land surrounding parcels. I want to close with that and just say you've got the full report here. We'd like for you all to look at it and analyze it because there is extreme funding and this report shows that most of the money is being used downtown and in west Austin, even though we all pay drainage fees. >> Houston: Thank you so much. Young man, I'm so sorry that I cut you off. Thank you for doing the good work that you've done. >> Do you have a question? >> Houston: Clarification. >> Tovo: I can follow up. I think given it was citizens communication I'll follow up with you by email, if that's okay, with my question. >> Houston: Ryan Clinton signed up for six or citizens. >> [Inaudible]. >> Houston: Stephanie Martins? >> Hi, my name is Stephanie Martins and I run the Austin lost and found pets page. And I'm here to bring awareness to the community -- >> Houston: If you will speak into the mic. >> That one. I'm here to bring awareness to the community about trading, selling and breeding through social media of dogs, cats, all

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kinds of animals. I've come across a number of people that steal dogs that are lost and then they turn around and try to sell them two or three weeks later. And I have members of the community that I run -- there's over 5,000 people now, and some of them want to go out and do their own street justice. So it's a public may safety issue because -- a public safety issue because these ladies, nice ladies, are wanting to drive over to the east side to somebody that's involved in like illegal activity and they don't realize that their safety is at risk. And these dogs are not being vetted properly and so often they have parvo or they're not treated for rabies and wharfie get a raccoon bite and these animals hurt other people? So I wanted to say I'm in support of having a work group to look into that and to look into like updating the pet trader ordinance. That's it. >> Houston: Thank you so much for coming down. Craig Nazar, you signed up for citizens communication? >> Hello health and human services committee. My name is Dr. Craig Nazar. I'm the district 7 member of the advisory committee and a former member of that organization. We've done a very thorough analysis of the coyote issue. It was an open and inclusive process. Our analysis was based on facts and not on fear. The coyote found in Texas is a smallest subis species of coyote in America. They do not view human services and prey. Not one human, man, woman or

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child, has ever been killed by a coyote, not one. If a sky quote is following a human it is most likely because they have come to see human services as a source of food through either human intention or negligence. Coyotes, although small are the largest predator remaining in the Austin ecosystem. They help manage rat, mouse, raccoon, possum, deer and feral hog populations which cause many more problems than sky quotes do. Coyotes help keep healthy our ecosystem. They live in my neighborhood, and rarely prey on cats. Dogs are at much great danger to coyotes than cats are. One of the reasons that the animal advisory commission supported this compromise was because it promised to give us information about the effectiveness and cost to the city of the current contract with Texas wildlife services. This information has been very difficult to obtain. There are costs associated with the current policy. Animal control officers have responded to reports of animals caught in wildlife service traps. In addition to dealing with trapped coyotes, cats have been removed from wildlife service cats. The cats were brought to the animal shelter for care which resulted in leg amputations. [Buzzer sounds] All these costs come from the animal services budget. There is serious doubt whether the contract with wildlife services is in the best interest of Austin either financially or legally. A process is being worked on that would be more humane, less expensive and would not violate city ordinance ordinances, yet would allow them to address any issues that arise. >> Houston: Can you wrap it up? Your two minutes is up. >>

Yeah. We look forward to discussing this process in more detail at the appropriate time. >> Houston: Thank you so much. I have David lundstead

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signed up for general communications. >> Thank you, councilmembers. To follow up with Dr. Nazar's comments, recently a citizen and a sitting councilmember have thought it clever to put their hand in a wildlife trap to show you how wonderful they are, so I'm here to give the opposing view. This picture right here that you see is an Orange tabby caught in a wildlife services trap set on -- within the city limits on private land. This is one of the cats who had his arm amputated and you can see it's not at all harmless. Here's a closeup shot of that. And I apologize. It's difficult to look at, but it's something that you need to see. Wildlife services during the investigation readily admitted that they routinely catch domestic animals in these traps and they say that it's harmless and they just let the animals go on their way. As you can see, this trap really has no padding on it. I asked the officer who confiscated this trap if it had padding on it, and her response was, and I quote, "Maybe 20 years ago". So the last slide is the damage that is inflicted with these traps and this is actually a coyote paw, which is fairly larger than a cat's paw. So I know I need to wrap up, but I think every animal lover, every cat lover in the city should thank the chief of animal services, Hammond, for making sure that this bar barrack practice is put an end to. And I really thank the

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councilmembers who have been supportive of this and I encourage the councilmembers who are not supportive of this to take a good look look at these pictures. I know I delivered them to your office. And ask yourself if this practice is in line with the values that the city of Austin holds. And if this kind of stuff is -- [buzzer sounds] -- Within your practice that you hold in your heart -- because I know your good people. I respect you a lot. We have a disagreement, but I hope that you will consider what you've seep today. Thank you very much. >> Houston: Thank you very much. We have one more speaker signed up for general communication. Ms. Zoila Vega. >> Thank you. I'm Zoila Vega. I wanted to respond to two accusations on the traps. This was discussed at the November 10th, 2015 Travis county commissioners' court. What happened is those traps were -- some of the traps -- it's a citizen doing that. And Texas wildlife services went and tried to trap. They left some traps on the property, but they were not set. And the wildlife biologist left them because he was coming back. In the meantime the citizen set the traps from wildlife services and also set his own traps. Now, when he set both traps he didn't set them correctly because he's a citizen. So they were set in a manner that they didn't have the control that wildlife services does, that they set them to a certain weight. So a cat couldn't trigger them because it has to have a certain weight. Since the citizen set them, the cat got caught. Now, the animal cruelty, animal protection officers, knew this since January and they didn't do anything. They didn't call the wildlife services.

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They didn't call Stephen, they didn't try to find. They let it go until November to get him on the dais in front of Travis county commissioners' court. In addition this citizen has been trapping since 2013. We have a trapping ordinance. Why don't they enforce it? This is only one citizen doing this, it's not citizens, it's not multiple animals. It was one cat. Why do the animal protection officers act on this? Because they're waiting to put it in front of you as an example of why not trap? If somebody is going to trap the Texas agrilife is the best qualified person to do it because they have requirements, they have training,

they have all these procedures they have to follow. If we don't take care of aggressive coyotes this is exactly what citizens are going to do. They're going to take matters in their own hands and this is what's going to happen. Thank you. >> Houston: Thank you, Ms. Vega. That's all the citizens communications that I have. So we'll move agenda item number 3, which is the discussion and possible action on a resolution related to funding policy goals for social service contracts and the health and human services department. The proposed resolution is sponsored by councilmember sponsored by several councilmembers. Councilmember Garza, if you will present -- tee this up, and then we'll have staff here from health and human services and some folks from one voice here as well. We'll call them up. >> Garza: Okay, sure. The goal of this resolution is to update -- to reflect the changes made recently in the budget. We were able to make a significant increase to health and human services in our last budget. And this updates those goals to reflect that work.

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I wanted to thank one voice and health and human services for all the work they did not only in this current update version, but also in the original resolution in 2014 that set out the goals of increasing our funding to health and human services, which because of extensive research that showed our health and human services department is significantly underfunded. And the services that our health and human services provides serve our most vulnerable population. They're two significant and separate portions of this resolution. The first is to reflect the work that we did in the budget and to change the timeline a little bit of how we go forward from this point. And the second is in the 2014 resolution the increases in the resolution were tied to the consumer price index and that generally falls between two and a half percent, three and a half percent. So my resolution is asking for an annual increase to three percent. And the reason there's a change from using the cpi is because there's such a wide variation in the consumer price index. For example, last year it was .8% because of the dramatic drop in fuel increases. So my hope is that the increase at the three percent range will provide some stability for our social service contract and hhsc to have some predictability in the services that we provide our most vulnerable population. So the three percent was basically a compromise and it really doesn't get us close to the annual increases that our social service contracts and our health and human services face every year. So I just want to also thank our council for all the work -- for approving this

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budget. It was significant, it was a great victory I think in our last budget. And I believe that one voice is here to provide a presentation for us. >> Houston: Thank you. I have -- is Mary Mcdowell here. And is someone else here as well? >> Susan Mcdowell. >> Houston: Did you sign in? >> [Indiscernible]. Is that okay? >> Houston: Make sure she signs in. >> Good afternoon, my name is Mary Mcdowell with people's community clinic. I'm the chief operating officer there. Today Susan and I are here as incoming chairs of the public policy committee for one voice. One voice central Texas is a coalition of 89 local social service agencies that serve our residents through all stages of life. We provide a broad spectrum of services that we'll review at a high level in later slides. I just want to take a moment to point out we not only serve the community by serving our most vulnerable residents, we also contribute over 160 million of the community in state, federal and foundation funding. We employ more than 6,000 individuals and we leverage countless volunteer hours in support of health and human services. This committee is aware that our health and human services infrastructure has been strained by the area's crisis of affordability. Not only has demand for our services increased, but also the cost of those services has increased. In terms of demand, one out of three residents of Travis county are low income. One in four children in Travis county live in poverty and appallingly, children under the age of six are the fastest growing group

living in poverty. Over the past 10 years rents

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have risen 50% while median income rose just nine percent. So while demand has increased, cost has also increased. >> I'm Susan Mcdowell, chief executive officer of life works. And I had the privilege of being part of the 2014 committee that helped develop the original resolution. And we're here to tell you today that one voice is in full support of this resolution amending the 2014 policy goals. Again, to reflect both the progress made in this year's budget and the change we're proposing from an increase to contracts from consumer price index to the three percent standard, which provides us as providers a predictable way to plan for the ever-increasing cost of doing business. Your next slide gives you just a brief background -- a chief detail on the Numbers involved. Again, accounting for the project made this year and down below the line what in addition to the three percent for contracts and the population growth for health and human services, what the 2017 fiscal year impact is. This slide gives you a very good sense. Some of you have been on council awhile, many of you have been involved in these issues for a long time, but the health and human services department either through their own programs or through contracting covers an exceptionally broad spectrum of safety net and development services.

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So this slide gives you a good sense of where the dollars are currently invested, either in city services or in the contract services. And I do want to point out that two of the very large item are basic needs and homeless services, which speak directly to the affordability crisis that we're facing as a community. So these services are necessary and I think you would be hard-pressed to find any provider that says that they feel lux sure justly funded -- lux sure justly funded. We are all facing continuous unmet needs. Rest assured that this proposal not only supports a broad safety net, but the increases allow council and staff the flexibility too to account for emerging issues or urgent issues as they arise as well. Another thing that I want to especially for size, particularly from the perspective of an agency who has a social service contract is that everything that the city contracts for has performance measures tied to it. So you often hear questions of what is this money going for? What are we getting from it? Those are all clearly laid out in the contracts. And we are evaluated regularly and at application on our effectiveness. So what you see in front of you is just a south Lamar of the result -- are just a sample of the results of the city's investment in the safety net. Finally, I do want to draw attention to just the percentage increase in health and human services relative to other departments in the city. When you lay the 20% increase to health and human services not only across other areas, but what we know about the affordability crisis in Austin, it absolutely supports and points to the need for further investment.

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>> As I mentioned earlier, I work for people's community clinic. We're not currently a city contractor, but we recognize that the success of our work, the primary care, is dependent on a broad range of services, many of those provided under city contracts. If a patient presents to us with diabetes our ability to move the needle when that patient faces unstable housing situations is very limited. Issues associated with hypertension, we can't adequately address that when the family is not clear where their next meal is coming from. This investment is not just in these agencies, but in the whole community. We've listed out some of the -- we've listed out some of the ways that there is a return on investment and you all can go through those at your leisure. Additionally one voice central Texas is prepared to work with you, as you need, as your staff needs, to better understand where this money is going and

what the impact of the community is. Thank you for your time and attention to this matter. >> Houston: Thank you. Thank you so much. Are there any questions? For one voice? Thank you. Does city staff want to come up and make some comments? >> Garza: If I may, chair, I think health and human services was just here to answer questions, but didn't have a formal presentation. >> Houston: I just wanted to know if they had anything to say since they're here. >> Thanks. Shannon Jones, director of austin-travis county health and human services. We have no presentation to make, but once again we would always like to have the opportunity to acknowledge the support that the council gave us in last's year budget and the significant impact that it is making and will be making over the next year or so.

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So any continued effort or support by council to continue those efforts certainly will be appreciated by the citizens and the department as well. >> Houston: Thank you so much. Councilmembers, any discussion? Do you want to make a motion? >> Garza: Sure. I would make the motion that we move this to the full council with the recommendation -- with the recommendation that we pass the draft ordinance. >> Houston: Okay. It's been moved and seconded that this draft ordinance be moved forward to city council for acceptance. Are there any questions, any further discussions? Councilmember troxclair? >> Troxclair: I guess I didn't realize that we planned to vote this out of committee today. This is a pretty substantial commitment that will affect not only this year's budget, but budgets many years in the future. And my preference would be to allow some time for us to think about this, think about the fiscal impact and think about whether or not this is the most responsible way to address our need for health services in the city and to give the public an opportunity to weigh in as well. So my preference would be to not vote on this today, but if it's the will of the other committee members that we move forward, I guess I'll just say yeah, I think that it's important that we talk about this in the context of the budget. We have limited dollars every year and a lot of difficult decisions of where to allocate that money. We're lucky to be in a financial position as a city right now where we have record revenues that allow us to allocate additional money to a lot of different places, including significant investments in our health and human services department, but

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setting an automatic increase, an automatic benchmark every year going forward, I think is backwards. I think that we know that we have great needs that we need to meet, but we need to look at the effectiveness of the programs, the effectiveness of the contracts and allocate money according to which programs and which contracts are having the greatest benefit and the greatest impact in our community. And yeah, I worry that this -- it occurred to me that I don't think that we would even consider an automatic benchmark like this for any other city department because I don't think it's fiscally responsible. So I wonder why it's appropriate in this case, but not in the case of our transportation department or our animal services department or every other department that we have to allocate money to each year. And I also think it's important that we look at where the money is going. And a lot of these instances, a lot of the money that we're allocating goes directly to city staff salary, which of course our city staff is important and necessary in order to administer these programs, but a lot of cases I think there's an opportunity for us to make sure that the money that we're allocating is going directly to the people that we're -- that these programs are intended to serve. So I just -- I think that these kind of benchmarks is how cities get into financially difficult positions because we're putting handcuffs on ourselves and how we spend money in the future. And we're not always going to benefit from the kinds of revenue that we have today. So I just really strongly urge us to continue to invest in health and human services in a responsible manner by taking a hard look at our budget every single year

and considering the

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impact that these kinds of decisions have not only on our city services, but also the taxpayers who are responsible for footing the bill. >> Houston: Councilmember Garza, has there been an additional public comment period to get more input on this? Or is this just to move it forward from the resolution that was passed last year? >> Garza:, a couple of things I want to point out. The Numbers in this don't change any from the resolution that was passed in 2014. It was just kind of adjust the Numbers to reflect the work that was done in our last budget. And with regards to public comment, that is the purpose of our committee system. This was posted and if anybody in the community wanted to come and speak on the issue, they could have done that today. So I'm not -- I know that one voice has been working with their 89 providers and helped us craft this resolution. So there was community input on that end as well as well as working with health and human services. >> Houston: So one of the questions -- just a minute, mayor pro tem, if I may. One of the questions I've been asking since I've been on the health and human services committee, is that we hear often from nonprofits and the people who receive the funds, but we don't really know what is the impact on the end user. And I keep asking that. I understand that we give X number of dollars to several various non-profits that have been legacy non-profits. But I'm not sure that what we have done with that money has really improved the quality of life for the people that we are serving. One example is we were talking the other day about

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child incorporated and workforce solutions, and some of the same people who are in child incorporated are now adults and receive their children in child incorporated. So there's a gap for me. That doesn't say how I'm going to vote on this particular resolution, but there are some things I've been talking to health and human services about about how do we really say what does the end user get and how do we track that because some of these programs have been in operation for 30 years or more. So we should have more baseline on how the quality of people's lives have improved. Did they get jobs, did they get in a career path? And we're still doing the same thing in some instances. I know Susan's program, so I know that's not true there, I know she can give us specific data on how people are moving through their program and this how they're going to help them raise themselves out of poverty, but some of these they're not getting that same kind of information. But I'm sure the staff will do -- yeah, please. This is not a new thing for me asking the question. >> Shannon Jones again. A couple of points. One is that we do have a -- we have reports that we share the council with regard to performance measures. That doesn't address the issue of the overall improvement in terms of the outcomes. We are in the process in the department of looking at evaluation of not only our service delivery that we have as a department, but also as our contractors. We agree that we need to be able to assess whether this investment is making a difference. We have started as part of our reorg in the department is to build our planning and evaluation unit so that we can assess those types of questions. We will be happy to share with you what we have

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northward with performance measures in terms of our contractors and what they met with those. I do understand the greater question you're asking in terms of what overall has this done. So that's the best response at this time that I can share. I'd be happy to share with you all the reports that we have gotten in terms of that. I think in some cases we have already done that. But in terms of overall we're looking in



terms of the evaluation of all of these programs so that as we come back for renewal not only do we have a recommendation, but we also have an evaluation of what they have produced as a result of those investments. >> Houston: Thank you. That would be helpful. Mayor pro tem? >> Tovo: Thank you. I'm a co-sponsor, I'm going to support the resolution. I think it's very important. And I wanted to address one of the points that was raised earlier. This was -- this discussion really started as part of the prior council and I remember some of the early conversations about the fact that while we do have metrics for some of our other departments in terms of measuring increased funding, we haven't done that with regard to our -- with regard to our health and human services contracts. For example, for many years until very recently we had -- it wasn't an automatic trigger, but the funding request that would come forward from the police department was based on a formula that the council used and to a large extent I think though we've -- that information isn't presented in the same way, our population is certainly part of the consideration of how many officers to -- that the A.P.D. Will recommend hiring each year. The same -- we have other ways of looking at population throughout the city. I believe taxicab permits for a long time too were based on the increase in population. So in those early -- I'm getting far afield here, but let me get back to the point. I think in the early conversations the point was made, and it's a good one, as our population has increased in Austin and at the same time the needs have

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gotten so much greater that we did not have a way of increasing the amount of our cities investment in those contracts and so I think this is a very important measure and is very consistent with the work that was done during the budget, and it has been an ongoing conversation, I would say, over the last several years whether or not this is the right approach for the city. >> Houston: Councilmember troxclair. >> Troxclair: I guess I'll just add I do think that we have a way of increasing the city's investment in health and human services. And that is through the decisions that we make every year during the budget process to allocate more money to certain programs. So I don't want it to sound in the absence of this resolution that there is no commitment from the council to do that, and like I said, even as we've seen in the past budget that there was a significant amount of money added to health and human services. When we talk about these automatic, there are lots of us who wish if money grew on trees we would have a three percent automatic increase for our parks department, for our libraries, for our transportation. As our population grows our need is growing across a lot of different categories, not just in health and human services. But what that translates to ultimately if we have automatic benchmarks is a corresponding increase in the cost of living via higher property taxes. So when we are committing to say we're going to raise this budget every year by three percent regardless of outcomes, regardless of metrics, regardless of performance, that -- I hope the council will see that translates directly to

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making it less affordable to live in Austin because the people of Austin who are struggling to stay in their homes, struggling to pay their taxes are the people who have to ultimately pay for this three percent increase. And so we have to view these things in the context of the affordability crisis that we are facing in this city. And I just really caution us that this is not the appropriate way to do it. >> Houston: I'm going to support the recommendation because I hear that you all are working on some outcomes that are measurable more so than they have been in the past. And because I know how health and human services has been operating on a shoestring and grants for the majority of the time that the program has been in operation, and I think that's abysmal, should never have happened. So this is an opportunity to provide the stability that you need to provide the work. Mind, body, spirit and soul all work together. So if we have a community that's unhealthy, whether that's behavioral healthwise, a physically unhealthy,

folks with diabetes, then they're not going to be able to join the workforce. There are so many compounding things that happen in their lives so we have to start focusing on not only the people's wholeness and their health, but also their education. But there's some things that say in the resolution if there's no money available then that trigger won't be pulled. Is there something that we could put in there so if there are no funds available that we could scale back on -- I'm still committed to the three percent because we're going as fast as we can growing in this city, but I think there should be a mechanism in there so that if we don't have the money, the expectation would not be that we would pull that trigger.

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So I'm asking. >> Troxclair: Sure. So get to some of your concerns, Ellen, I would say -- >> Garza: Approval of the resolution doesn't bind the council, it's severally a policy goal so we will consider it every budget, we'll consider it at this budget. It's simply a policy goal with regards to -- because we haven't seen increases or every other department would like to see an increase similar to this. I guess I would point out the slide that in one voice's presentation which shows from 2005 to 2015 -- and they give police, fire, parks and libraries as an example of percentage increases which range from a 270% increase to 230 increase for police where health and human services has been 20%. So other departments have seen significant increases regardless of if there is a similar resolution that anybody has ever put forward with the policy goal. So it's not binding. It's -- we have the opportunity. We were asking the city manager to consider this and say this is a policy goal of the council and at the budget it can always be reconsidered. It's just saying that we would like it in the proposed budget as we saw this time around stuff was taken out of the proposed budget and stuff was added to the proposed budget. >> Houston: Any other comments before we take a vote? Are we ready? All those in favor let it be known by raising your left hand? All opposed your right hand. [Laughter]. It passes three to one. We will refer this to the full council for consideration. The next item on the agenda is item number 4, which has to do with public toilets for -- oh, you all are here.

[2:55:47 PM]

Central health is here? Can we let them go first? They needed some time so they're now here. So if we could have a briefing on -- from central health that would be very helpful. What I've asked central health to do is come once an order to tell us know what's going on in central health and in central health and the services they're planning and providing. And then every other meeting in March we'll have someone from Dell medical school to come and talk. So we'll try to make sure that we stay in touch with what our partners are doing both at central health and at Dell. >> Good afternoon. I'm glad I don't need to speak on public toilets because I can only speak from public experience. [Laughter]. I don't have a lot of expertise except my own use. >> Houston: I'm sorry, I asked mayor pro tem tovo if we could go to central health and she graciously said yes. So we're going to let them go -- we're going to get them through and let them go back to work. >> Good afternoon and happy new year to you all. Very happy to be here to give you an update. My name is Christy Darby and I'm the vice-president and chief strategy officer for central health. First off I wanted to report to you that your most recent appointment to central health board, Dr. Richard Eun was sworn in on Friday January the eighth and he has attended one committee meeting so he's up and running. I thought you would want to know that. Central health is really a key player in forming an affordability solution for Travis county by providing access to health care for its most vulnerable residents. Keeping Austin and Travis county residents in an affordable space requires a great commitment to manage health care costs for these most vulnerable residents.

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And our role as a single purpose taxing entity in a district provides us to be statutory obligated to provide access to health care for low income residents, primarily those individuals at or below 200% of the federal poverty level and we believe that this benefits everyone in Travis county by providing a better quality of life, a healthier workforce, healthier children and we are very busy working to create an innovative health care system for those who are most vulnerable in our community. Our organization is guided by a strategic plan. The strategic plan that we're in right now is our third. We've been in existence since 2004 and our plan has four pillars, health care, health coverage, health infrastructure and health promotion. And today in the interest of I'm I'm only going to speak on two of those pillars, but I did want to briefly touch on the pillar of health promotion and health conch. In -- coverage. In health promotion I wanted to laud the work of Shannon Jones and his team here at the city. We have formed a very good working collaboration to launch the healthy austin-travis county portal and initiative, which is focused on health disparities. We're focused in the areas of diabetes, obesity, tobacco and HIV infection, working to reduce those disparities. And that's a new collaborative initiative that we launched last year. In addition, health coverage is an area where we've been working very diligently to enroll individuals in the health care marketplace, to increase the number of insured residents in our county. And I can tell you that last year we have achieved a milestone of 65,000

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individuals who were enrolled inside of Travis county. So we're making great strides in both of those pillars, but today I thought I'd focus on health care and health infrastructure. We are transforming health care we are transforming health care through a delivery system we're designing to focus on health care for our most vulnerable residents. We were able to do this because the voters allowed us to increase our tax rate in 2012 with an election in which they gave us an additional five cents in order to transform health care delivery for this population and to bring into Austin and Travis county a new medical school and new partnerships that we have redesigned to improve care. We are also very busy in very specific areas. We have a lot of need in specialty care and I'm going to speak to you about women's health care services redesign. We're also busy with the implementation of our central health Brackenridge master plan. This is a brand new opportunity for us. As you know, there are big things happening over near our Brackenridge hospital campus. The Dell medical school is under construction. The Seton family is building their new hospital, and our campus is now underway and involved in a planning effort for the redevelopment efforts, and that is very important to us to help bring us and maintain a structurally balanced budget to continue meeting our mission of health care. What we have done in 2015 to get ready for 2016 is to produce a report on demographics that helps us understand better the population trends in our county so that we can identify the needs of the community and better serve them.

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We developed this tool, and I'll pass it out to all of you, and we're more than willing to give you a more detailed description of it, this past year, but a few highlights I'll recognize is that about 42% of the central health population that is individuals who earn 20 -- less than 200% of the federal poverty level, which is approximately 44,000 a year for a family of four, and about -- let's see -- 42% of those individuals were uninsured. So it's a very high rate of uninsured for that low income population that we serve. And we know that there are about currently 33,000 families earning below the federal poverty level in 2014, which is expected to increase by 13% by 2019. So we actually purchased some data to help

us do some predictive analysis to see if the population that we're serving and we're focused on is growing, and indeed it is. The other thing that I know you're very well aware of but that our data also confirmed is that eastern Travis county, east of I-35 between highway 290 and 71, is projected to have the largest increase of families in poverty between now and 2019, and we central health have been participating in the spirit of east Austin conversation and with the community to help guide our work. And this year we will be creating our next three-year strategic plan. One of the years that we focused on in expanding health care delivery through the advent of the 1115 medicare waiver is community mobile health teams. This has been a tool that's allowed us to provide services on an as-needed basis to areas of the county

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that do not have the infrastructure that is necessary for health care and to allow us to be very flexible in where we provide care. So we piloted this in 2014, and we're going to be growing this. We grew it to 20 sites? 2015, and we're going to continue to grow it. These are teams that include a physician or a physician assistant, along with a nurse, a case manager, and a medical assistant, and an individual can walk in our make an appointment in advance, and there, as you can see, these locations are throughout -- primarily located in eastern Travis county. The way that we've used this methodology is, for example, when there were the floods on October 30th and there was a need in that area, dove springs had set up a flood release center, and the mobile health team convened and went and visited the flood center, and individuals who had immediate medical needs were treated there. So both -- I have heard two reports of individual kind of lacerations of the feet or hands, and then also individuals who experienced flooding lost their prescription medications. And so over 20 people were able to be seen to get those prescriptions refilled and stay on their medication, thereby meeting an immediate need. So this methodology is allowing us to be very responsive, and also to learn more about the areas of the county that are underserved, so in our longer term planning, when we're thinking about how to deliver health care more effectively in the future, we have this kind of information. In women's health services, the 1115 medicaid waiver has brought seven transformal projects to our community. The one that I'm going to focus on today is the

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long-acting reversible contraception, or lark. We have a contract with planned parenthood which allows us to provide this very expensive birth control methodology to low income women who are interested in making the choice of delaying a pregnancy. And so we're very pleased that that's been a successful partnership. We've also been working with a center in pregnancy program, which is a group visitation program for women who are pregnant. They get together once a month in a group visit environment, are able to both see the physician and health care provider, and also spend time together. They're really learning about child development, their pregnancy, and the stage of pregnancy, and to share and get social support. This program has been targeted toward the African American population where we're finding that the birth outcomes are less desirable than other parts of our population, and that project is ongoing. We are also working with the Dell medical school. Dr. Amy young, who's the chair of women's health of the Dell medical school, has been working on redesigning the service delivery system, really kind of standardizing some protocols across the system, pushing some of the community services, including residents, are going to be moving now outward into the communities closer to the women that are being served, and establishing centers of excellence for individuals who do have those high-risk pregnancies. So there's a lot of work going on in this area in our community and an incredible expansion of services that have been going on in the last two or three years in the area. One area of our strategic

plan is called health infrastructure, and in that, we consider facilities or buildings, as well as information technology infrastructure. And our largest project to date is the central health

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Brackenridge campus. Many of you may already know, but I found it a new piece of information to me, that when the mayor -- the first mayor of Austin, Edwin waller, planned the city grid, he actually identified the southeast corner of I-35 and 15th street to be the block for the hospital. And that is where the clinical education center, or what used to be the children's hospital, sits today. Surrounding those -- that area is now the Brackenridge campus, which is actually about 14 acres. And on that campus, it's not very walkable or negotiable right now. It's kind of a concrete jungle-like structure, and our plan is to create a new part of Austin and a new community on that campus that will be a nexus, both of innovation, education, and a place where it will really serve to be a flagship for health for our community. We're very excited about the partnerships that have been created. We've been in conversations with many partners over the course of this planning process, and our board early on adopted the following project guiding principles called mission stewardship and partnership to guide the plan in the future. We're very interested in continuing to use both the property as a place to deliver health care services, but we do believe that it also will be an area that will be residential, and mixed use, along with a marketplace that we have planned, so that everyone in our community can feel welcome there and learn further how to take care of their health and well-being. During this process, we had

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a very intensive community engagement process. We reached over 8400 individuals through various means. We hosted large community events around the county, and we also participated in small meetings in the community, along with surveys in person and online, and we used the information that we heard in that outreach to shape the property's plan. Our board of managers will be adopting the master plan on January the 27th. Our committee, the ad hoc committee, has approved and is recommending the board's full adoption of the plan. And the plan includes this community feedback. So the key themes that we heard were that we should maximize the value through mixed use. We do have a revenue situation, a hole that we need to fill, with the development of this property. We heard from the folks that we talked to that health care needs to be close to my home. So we don't think that this property needs to be the place for health care for all of our low income uninsured, especially after you've seen the demographics of where the folks who are lowest income are living and moving to, but we do feel that high very level and specialized services should be concentrated there, near and around the medical school. And the campus needs to be open, accessible, and very inclusive, a place that everyone is comfortable to live and work and play. We've been working with our partners, and this graphic shows you that the campus is right in the midst of so much activity and change in this part of the central Austin downtown area, and we have been continuing conversations with the waller creek conservancy. We have been working and talking with the Texas

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department of transportation and many other partners to bring forward what we think will be a very unique and great community asset for the future for this campus and for our city. As we look to the future, I have a couple of invitations for you. We have convened a community health champions group that's under development, and today I've brought with you here today some invitations for people to participate, and I wanted to announce that publicly. This is a initiative to bring together our community

members who want to improve access to care and the quality of care for those who need it most, so it will be an ongoing group that we will use to communicate with and learn about and continue the ongoing dialogue about health care needs in our community. From individuals with diverse backgrounds and differing perspectives. Also, on January 19th, we will be helping to host a celebration of the opening of the Sandra Joy Anderson community health and awareness center on the Houston-Tillotson campus. So we invite you to participate in that at 2:30. There will be a public event, which is a partnership for health care in that portion of town between Houston-Tillotson, Central Health, Community Care, Austin, Travis County Inner Growth Care, and the Dell Medical School. One more communication, Saturday, February 20th, from 11:00 to 2:00, we will be hosting an open house at the Central Health Southeast Health and Wellness Center. We will be opening the second phase of that project, which includes Wick Services, a teaching

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kitchen, a demonstration garden, community room spaces for health, education, and wellness, and of course more clinical spaces. But this has really been a community-led effort to increase health and wellness, and it's really considered our Southeast Hub. The location for that is 2901 Montopolis. So with that, I would close and take any questions. >> Houston: Thank you so much. Are there any questions, members? Councilmember Garza? >> Garza: Thank you for bringing up what y'all did during the flood. >> Yeah. >> Garza: I had a question about if it was possible maybe to activate a little bit sooner because my staff and I were at a shelter the night it happened, and it was Red Cross, there were actually a couple people there that needed prescriptions filled, and -- >> Okay. >> Garza: I think one of the state rep's staffers went to Huebner on 38th to get her prescription. So anyway, it's just a consideration, if that could be activated sooner, I'm sure that would be appreciated by those shelters. >> Sure. We can sure look into that. I know that we are learning as we're putting together the mobile teams. It's been quite a steep learning curve for us on how we activate and motivate and how we choose to be where we need to be, so I appreciate that feedback. >> Garza: Sure. Thank you. >> Uh-huh. >> Houston: Any other questions? Mayor pro tem? I have a couple. Thank you. At some point, there was some information about Sendero Health, in the paper a couple of months ago, and at some point in the future we'd like you to come back and explain to us what happened with that, and is that the hole that you're talking about that we've gone to -- >> Oh, no, that is not the hole I'm talking about. The revenue hole that I'm talking about refers to the lease revenue that we received from the Seton Health Care Family for the current facilities on our property. >> Houston: Okay. >> When they move across the

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street, that lease income will be reduced significantly. >> Houston: Okay. At some point in the future if you could come back and explain to us about Sendero Health -- >> We'd like to talk about Sendero Health plans with you and our strategy for a community health plan, yes. >> Houston: Okay. The other thing I have a question about, will the name Brackenridge continue to be on that track, or will we rename it something else and all that history will be gone? >> That decision has not been made yet. >> Houston: Well, would you put that in the pipe line? That's a concern to people who live here, is that the history of Austin is being erased as we build new buildings. Brackenridge gave that initial tract for a hospital, and if we forget that, we forget he gave that for a specific purpose and that's how we got here today. >> Right. I think we should have a long community conversation about that as we go forward. >> Houston: I would hope so. The last thing is, I know you're going to have some housing on your site to help -- that's going to phase into Waller -- Waterloo Park and Waller Creek. Has there been any conversation about building in places on your site for people who actually work in that area? I know that's not the demographic

you're looking for. >> Uh-huh. >> Houston: To cover your front, but housing for people who -- we talk about that all the time. People live, work, and play. >> Right. >> Houston: We didn't do it in Mueller for Dell, so I'm asking, is that a consideration that you all are saying, that some of the AIDS, orderlies, the nurses, could also live close by and walk across the street? >> We've had many conversations about this. The board -- when I say "We," the board has, and management staff as well, and what I can say about that is that we have included that consideration in our planning parameters, which become a part of the document that goes out in the rfp/rfq process for the developer of the property,

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as considerations as we move forward through the process. >> Houston: But is that a priority, or is that a consideration? That's a different -- those words mean different things. To me it's a priority that we provide some units for people who actually work there to be able to live close by. Because we talk about it, but we never do it. And so that's not a consideration to me, it's a priority. >> I really do think that that will be a conversation that will happen when we get to the point of choosing the master developer and we best understand the finances going forward of what the property can generate revenue-wise for us to fill the hole that we have for providing health care services, and then we'll be discussing that with them in the future. But the board has put it forward. I would call it a major consideration. We've been instructed to -- by the board to include it in the planning parameters in a very forward way so that it's out there for consideration. I'm not sure if I could respond whether I think they put it as a priority or consideration, but it's definitely being discussed and it's there. >> Houston: Okay. And then my last question, I promise, is -- >> You're the chair. >> Houston: No, no, I try not -- but this one is important to me because we say things and we don't follow through on them. And so this last question has to do with the availability of space for adults who have someone who is in the hospital. >> Uh-huh. >> Houston: And they can't afford to rent a hotel or motel, they don't have friends or family. Are you all considering, like it's a Ronald McDonald house for adults. I don't want to call it that, but that's the concept, so that if my grandmother is across the street and I need to be able to stay over because I live in -- this hospital serves the five county -- or the region, it serves the region, right as if. >> It does. >> Houston: It serves the region, so if I come in from Killeen and my grandmother

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is there, and I'm the primary care provider, will you all be able to offer some space for minimal rental for people to be able to go back and forth to the hospital to care for their adult? >> I don't think that I'm able to answer that question, councilmember Houston. >> Houston: Okay. Would you -- >> Because we will not be operating that hospital. That will be operated. But I do think that's a great conversation for us to have as partners in the project, to consider. I will tell you we haven't gotten to that level of specificity yet as we've been discussing the various properties and purposes and uses, but we certainly can discuss that. >> Houston: So I'm really not talking about the hospital side. >> Okay. >> Houston: I'm talking about over on the hotel side. >> Over on the 14 acres? >> Houston: On the 14 acres that you all are developing, to think in terms of at least having four or five spots where people could, not at market rate, but come and rent out a place so they could care for their adult loved one who's across the street so they would not be financially burdened. I see -- >> Yeah. I hear what you're saying, and I think we're not at that level of detail yet, but I think it's a good point and we'll definitely take that back for consideration as we move through the process. We're fairly early in the process of looking at what uses could be put on the property, and I think we're still learning, and I appreciate the feedback, and I will make sure that we put those in the MIX for consideration and as we discuss it. >> Houston: Okay. So thank you so much. >> Thank you. It's been a pleasure. >> Houston: For taking that message back to your board of

managers. >> I will do that. >> Houston: Because I understand how bureaucracies work. Yours is a large one and it's a complicated one with the relationships you have with Seton and with the university of Texas, so if we don't get the stuff in the pipeline now, it won't get there because nobody is thinking about the people who are actually -- the

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orderlies that are going to be working in the hospital. So we've got to get it in now while you're still fresh. >> I appreciate that. >> Houston: Okay? Thank you so much, and we'll see you back in a quarter. >> Okay. And we'll talk about sendero. >> Houston: Sendero hill. >> Thank you so much. >> Houston: Appreciate it. >> Uh-huh. >> Houston: Now we're back to item number 4. Thank you so much, mayor pro tem tovo for allowing that, and we're going to talk about public toilets. >> Tovo: Thank you, chair. I don't know if we have speakers. Do you want me to just say a few words about the resolution? >> Houston: I don't think we have -- no, we don't have any speakers. >> Tovo: Okay. I see some of the folks in the audience who have been involved in this issue. So the resolution that is here for committee consideration, I'm sponsoring, along with chair Houston and councilmember kitchen and councilmember Renteria, and my hope is that it will go forward to the 28th agenda with a strong recommendation from our committee. This has been an issue that's been discussed for -- for some time, and I'm really eager to see us move forward in getting some -- some kind of concrete recommendations. And so this is the subject of having, at least as a pilot program, some public toilets in the downtown area. And these would offer great social, as well as environmental benefits, not just -- well, really, for the range of people who come downtown, from those who are here visiting the city to those who are frequenting the entertainment district, not homeless individuals within our city who also need a place -- a place to go. And so this also has strong -- has strong environmental benefits, as I mentioned, we do have some bodies of water throughout Austin, including in the downtown area, that have high levels of bacteria, and it is listed as a voluntary measure that our staff are considering within our implementation plan with tceq. Chair Houston, will you grant me a pass to not spell

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out that acronym? I've suddenly forgotten what it is. The Texas commission on environmental quality, I believe. Again, there are models we can look at from other cities. , Oregon has one. Many stakeholders have been looking at this issue fool and are very supportive. This morning the downtown cluster of congregations and social service agencies had this on their agenda, and all expressed strong support, and again, many of them have been involved in this issue for a long time. I would say the downtown Austin alliance has done a lot of research on this issue. Some of the congregations downtown have done their own work. We have a great body of people who are willing to take a look at this concept and maybe make some specific suggestions about where a public toilet or several might go, and how it could be funded and what model makes the best sense for Austin. I would say that, in addition to the resolution that is in our backup, I would ask the committee again to consider this and hopefully recommend it to the full council. I would just note that there are some changes that I would want to make between now and council, and I'll just lay those out more generally. Council -- chair Houston has made some good -- very good suggestions that, for example, within -- within the "Whereas" talking about those who would benefit from strategically placed 24-hour toilets, we should certainly call out seniors, as well as individuals with differing abilities. I have quite a list of people to add to the downtown stakeholders that I'd like to read out if anyone is interested. But I would like to make that change. And then there are some other -- some other small additions here and there,



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but the main would be the resolution that you have before us that goes to council. So I'd be happy to answer -- answer any questions. >> Houston: Are there any questions? >> Tovo: Chair Houston, I forgot two important issues of substance that would be added to this resolution that I should talk about if now is a good time. The thrust of this resolution is really to get some concrete recommendations about a public restroom downtown. I think there are two other related issues that we ought to consider within this resolution. One would be to do as some other cities have done and work together to -- with our partners to come up with a map of public restrooms downtown and make that available through our partners out in the community, as well as on our website, but an important component of that would be to have real paper copies available throughout the downtown so people know where those public restrooms are. That would be run addition to the resolution, and the second would be a "Be it therefore resolved" clause to ask staff to take a look at the restrooms that are currently on property and if those are currently accessible to the public, and if not, how we could consider as a city making those available. I'll name -- or I'll cite, for example, the two we have outside of city hall, those are occasionally open to the public, but for a good part of the time they're locked. So I think as a council policy, we ought to consider, if we're looking at expanding the availability of public restrooms downtown, those might be two that we want to include within that plan. >> Houston: Any questions? Any comments? >> Garza: I have a suggestion to add. I'm wondering if the waller creek would be someone to be added because they have a -- they have some funding. Maybe they could help with the -- with the cost. >> Tovo: Absolutely. And thank you, councilmember Garza. Maybe now would be an appropriate time just to list some of the additional stakeholders that I think

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should be included, the waller creek, you've very rightly cited them. The downtown cluster of congregations and social service agencies who I mentioned, and then our city aarp. That was a suggestion from chair Houston, which I appreciate. And then I will cite specific examples of the city departments who we want to be involved in this conversation. Watershed protection, development services, parks & recreation, Austin water you're able to say health and human services, and Austin resource recovery. I think those are all relevant staff who need to be involved. >> Houston: Councilmember troxclair. >> Troxclair: So I am -- so the resolution would bring the stakeholder group together and report back to this committee. Is that correct? >> Garza: And can I ask where the idea came from? >> Tovo: Well, let's see. I will have to really track that back because it is -- it's a discussion that's been going on for a long time. As I mentioned, I think the downtown Austin alliance has researched this for a long time. I'm looking at bill rice to see if he wants to comment on that. But I will say, independent of that, individuals who are involved with some of the social service providers have mentioned it. I think there was a discussion in the echo -- in a recent echo newsletter I have here, talking about public restrooms, an individual who comes before council a lot who's involved with I believe, St. David's congregation approached me and said that they've been talking about the real need for a public restroom, so I think there are multiple individuals who worked in town who -- >> Garza: I guess you mentioned -- when I saw this I just did a quick Google search and tried to do a little bit of my own research for the come. And from what I found, the cities that have implemented public restrooms have not had success with them. I found San Diego, there's a

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story out of San Diego that says who will clean them, as San Diego wrestles with maintenance of two

restrooms ordered by makers they had trouble with funding and maintenance. They ended up did the San Diego, it sounds like, says restroom will be removed, likely in the next month. Basically, their public toilets will be installed. They ended up all closing and instead just opening up a public restroom in the homeless shelter. Portland, it sounds like kind of -- Portland was in a little bit different situation, I think, because they had -- they were marketing their own kind of brand of public restrooms, but -- it says the city lost a key ruling in a lawsuit filed by utility rate payers. They must spend \$618,000 from water bureau funds on new efforts. And then I found Boston, an article that says Boston basically found that they were unreliable. It sounds like maybe they ended up using a fee in order to fund them, and then Seattle had free public toilets, but this says after spending five million dollars on five automatic public toilets, Seattle is calling it quits. They have become so filthy, so overrun with drug abusers and prostitutes, although use was free of charge, many of the city's people refused to step inside them. That's what I found so far. So I wanted to understand why we were making -- I don't know, again, I feel like we don't have a whole lot of information about the things that we're voting on today, but -- >> Houston: So I can only speak from my personal perspective, is that I first became aware of the fact that we didn't have public toilets in Austin when we had a huge pile of dog poop out on town lake several

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years ago, and talking about the bacteria levels in the city. And that's when we started pick it up -- I don't remember -- the scoop it up. It was a huge mountain of poop. And I started thinking, well, the people that we have that live on the street, where do they go? They do all their business, wash and bathe in our creeks, and nobody seemed to be -- even care about that. But then I went to Los Angeles, and around Echo Lake, there were public toilets, and what they did with people who were homeless is they gave them a job. And so that was their job, to go around and make sure -- and they had supervision from staff, but the staff would have been doing it anyway, but this was a way to get them with a sense of responsibility. They got paid, not, you know, \$13 an hour, but nine dollars an hour. So this is a way that they made that work in Los Angeles. And then I was in Cloudcroft, New Mexico, and they had a public toilet. And I thought what's wrong with Austin, we have so many visitors coming into town, and young millennials who drink at night and need to go to the bathroom before they can either get in their transportation network car or find their own car, and so you can't just go into a hotel and say, I need to go to the bathroom. So it started to make sense. I know Republic Square, they're redoing that design. They're going to put a public toilet over there, but I think it's something that we should at least be looking at, and this is only to direct the mayor to start looking at it. >> City manager. >> Houston: Yeah, the city -- @manager, I'm

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Houston: Councilmember -- @garza?, >> Garza: I think it's the trail foundation, maybe they can be added to provide their experience and how they've been able to keep the resource clean and not a place for bad things. >> Tovo: I'd like to move approval of the draft resolution before us, with the understanding that there will be these edits and other additions made before it goes to council, and just so -- just in the name of transparency, will include this original one, as well as the revised and that backup that goes to council on the 28th. >> Houston: Is there a second? It's been moved and seconded that the revised resolution be forwarded to council for consideration. All in favor, let it be known by saying aye. >> Aye. >> Houston: Opposed? Are you abstaining? Abstaining? Three for and one abstention, and we will move that item forward to council. Item 6, the mayor of Austin sent a referral to the health and human services committee on August the 15th. August 3rd of 2015. And we had -- it's regarding the spay/neuter shelter intake by reducing -- reducing animal shelter intake to include spay

and neuter. Before we have the staff presentation, I'd like to call up the people who have signed up to speak on that item, and remember, you have three minutes. Darrell gross. >> Do you mind if I go last? >> Houston: No, you go first. You have to go first.

[3:43:00 PM]

>> I've given you guys copies of a resolution from the Austin neighborhood council, a copy of a resolution from the president of south Austin democrats, a copy of a resolution from the capital area Progressive democrats, a copy of a letter from animal trustees of Austin, a copy of a letter from hemancipets are board of directors, copy of letter from animal care societies, copy of resolution from the citizen-led Austin public safety partnership, all calling for a spay/neuter resolution. The first thing you're going to -- I want to make clear is this is not a mandatory spay/neuter resolution. That's no-kill propaganda. There are alternatives for people who don't want to spay and neuter their pets. We were told to pass resolution and support of a no-kill would cost the city approximately \$650,000, a one-time budget increase. The shelter budget under no-kill has gone from \$5.2 million to a little over nine million dollars. It sounds kind of like a contract for able battleship or something, it's so over budget. Yes, they have achieved no kill, but no kill is a very shallow number. It's euthanizing less than 10% of the animals, and in the shelter all you've got to do to achieve no kill is bottleneck intake, quit euthanizing animals and adopt them to anybody, regardless of whether or not they're qualified to own that particular kind of animal. I'm so confused about this whole thing because, basically, by allowing Austin pets alive to operate our old animal shelter, every animal that's at Austin pets alive and old shelter came out of our new she recalled. We've already doubled kennel space but I've got an article here where they're asking - actually, they're going to get another

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\$5.4 million to build 80 new kennels, and at the same time I've got an e-mail from the animal advisory commission saying, well, we were counting the animals wrong and we're really not all that overcrowded. The shelter is operating the way it's designed to operate, which is at maximum capacity, which means if you have floods, when you have things like the fourth of July, you have no additional capacity for those additional animals. I mean, I don't operate my checking account at 100% capacity. I try to hold reserve in it. I don't drive my car at 100% capacity. I'm not a good public speaker. I don't like being here. Very uncomfortable, but you've got the packet, you've got my card. I hope that when I contact your office and ask to speak to one of your council AIDS, that you will respond. I've already talked to several councilmembers and their AIDS and I'm helping you guys will show me the same courtesy. I do better one-on-one than in a crowd like this. I'll tell what you Lee Leffingwell told mayor Adler. When you're sitting behind that dais and you've got 200 people screaming in the city council chambers, you need to remember you represent the other 800,000 citizens of Austin. This is more about shelter overcrowd, it's about humane treatment of animals, about fiscal sustainability, and about public safety. Thank you. >> Houston: Pat nordecka. >> Good afternoon. No-kill is fallacy. An idea with no solution. And we have no solution to our intake/pet over population problem in Austin, Texas. We are leaving animals on the street to be hit by

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cars, to crawl into a ditch and suffer and die by themselves, and to cause wrecks when cars try to avoid them. This cries out for a solution to the problem, and the solution to the problem is a spay/neuter ordinance. Not a mandatory spay/neuter ordinance, but a spay/neuter ordinance that will significantly

cut down on the intake and the number of animals that we leave on the streets because our shelter is always closing its doors because they are full. We keep adding kennels that, yes, the kennels are donated, but that doesn't allow for the staff to clean them, to maintain them, for the food for the animals, nor for the vet care. As I said, spay/neuter is the solution to the problem. By significantly cutting down on our intake, as Waco did, Waco put in a spay/neuter ordinance two years ago. It went into effect a year and nine months ago. They have already decreased their intake by 2000 animals. And this is what we need in Austin. We can't just keep closing our doors. We can't keep building kennels. And we certainly need to close the town lake facility that was to be closed when we built the new shelter. We're spending a horrendous amount of money to keep no-kill, which is fallacy, in place. Let's spend that money on spay/neuter. Waco city council, when they

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passed the spay/neuter ordinance, put up \$100,000. Waco is not a no-kill shelter, it's a true animal control facility that is to protect the health and safety of the public, and yet they have an 88.7% save rate. It's time for us to do the same. Thank you. >> Houston: Thank you so much for sharing that information with us. The next person is Pat Veil Strellis. Ty pronounce that right? >> Yes. >> Thank you, madam chair. You did pronounce it right, I just gave it a little bit of a Cuban flare. Anyway, I was a member of the animal advisory commission from 1992 until the mid-2000s, and during that time we passed the first no-kill resolution. You are now operating under the second one that was passed in 2010. We also passed -- recommended as an animal advisory commission a spay/neuter ordinance. We worked on it for a very long time, and then that ordinance was not approved by council. So it had a lot of opposition and I'm here to propose some alternatives that are not exactly like the last one, but I think could work for Austin this time around. The first thing that I request that you consider, as a way to reduce intake and address the homeless pet problem, is to change the current city ordinance that allows the city staff to spay/neuter on second impoundment and make it a requirement that there be spay/neuter the other first impoundment. I do agree that we need to

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have some exemptions to that, for example, sick or elderly pets should be exempted from that requirement, but I think with that exemption, perhaps as recommended or discussed with city input and citizen input and the animal advisory commission, you could begin to spay and neuter all of the animals that come into the shelter that are now going back home, running loose again, and getting picked up a second time. So I request that you consider spay/neuter the spay/neuter on first impoundment as a requirement. And I have second request. Right now the animal services has a donation fund that began the fiscal year with a balance of about \$400,000. A hundred thousand of that \$400,000 was generated by spay/neuter deposits that were not claimed. Animals left the shelter intact. The citizen reclaiming had paid a spay/neuter deposit promising to get their animal fixed and did not do so. That generated money into the spay/neuter fund because they didn't fix them. We could take that hundred thousand dollars and use it to spay other animals that we're currently not getting to as a way to offset the fact that we didn't do it while we had them. Now, hopefully, the spay/neuter on first impoundment will reduce the number of people that are paying deposits, but there are still going to be some that go out because they're puppies and kittens, too young, too sick. If, when they pay that deposit, we keep it and turn around and put it towards spay/neuter, then we didn't have a net loss. We spay-neutered somebody else. So those are two things I would like you to consider as ways to move forward on this, but not necessarily do it in a way that is onerous. Thank you. >> Houston: Thank you. Ryan Clinton.

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>> Thank you, madam chair, Ms. -- Mayor pro tem and be councilmembers. I want to take a step backwards first and say I hope you guys know you have an extraordinary animal services department. We started with a great animal services department a few years ago, and we now have new leadership in the last six months and they've done a truly extraordinary job, to the extent we're saving 97-98% of the animals coming to the shelter. This blows away any community similar to us in size and scale. The only communities doing better are very, very small communities, and I hope that you guys, even considering this, can at least acknowledge how great of a job that your staff is doing. I think we've gone from great to greatest in animal services in Austin. They've done an extraordinary job. Second, I think that you can hear that we are -- there's a little bit of an ideological war going on. Some people believe that we should be doing everything we can to save every animal that comes in the shelter and other people think that animal control should be enforcing statutes and going into people's homes and regulating people. I want to talk to you a little bit about the no-kill plan developed in Austin that was ultimately passed. The reason is, it was a many years long process, with a lot of input including the people you're hearing from today. Through that process, a spay-neuter ordinance, or mandatory, whatever you call it, they've recently agreed to drop the word mandatory from the name so they can call it something else, but an ordinance designed to force people to spay and neuter this is pets or suffer some consequence for not doing so, which is a mandatory spay-neuter ordinance, it was considered but taken off the table during that process because the council said what we want is you to recommend the best practices across the country, and the programs and policies that are proven to increase shelter outcomes or decrease shelter intakes. Spay neuter ordinance or mandatory is not proven to do so. In fact, it's proven to

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increase cost, increase intake, and increase deaths at the shelter. All of the large national animal welfare organizations are against these ordinances. All of the veterinary medical associations are against these ordinances. And it's because of the unintended consequences. The unintended consequences are, the veterinary community that they list is fear that rabies vaccines will not be taken, and therefore, rabies will be going up. It will be less safe, not more. Increasing shelter intake, increasing shelter killing, increasing shelter cost, that's what we're seeing in the communities that adopt these ordinances all over the country. In fact, the aspca has done the most extensive study and analysis of these ordinances and what they said is that there's no credible evidence that these ordinances have worked in any community to either increase spay/neuter compliance rates or decrease shelter intake. But instead, what has been proven is that they cause harm. And -- [buzzer sounding] If there's any questions on the process, I'm happy to speak with you. I've met with most of you individually on this issue, but to the extent that you have any more questions, I'm happy to meet with you. Thank you. >> Houston: Mr. >> Tovo: Mr. Clinton, I'm sorry, you're away from the dais. I missed a little bit of what you were saying and I just wondered if you could recap. You were saying that in the communities that have adopted these kinds of ordinances, it has tended to drive people away from veterinary care? I missed the connection to rabies so if you could just go over that again. >> Sure. That's actually the concern of the veterinary medical associations, and their concern is, is that if you require, when someone goes to a vet, to try to get veterinary characterization or you require them when they go into a public rabies

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clinic to spay and neuter their pets, and they don't want to or can't afford to they're going to stop

coming to rabies clinics and stop getting veterinary care. That's the big concern is that we are going to essentially create a situation where we're putting so many obstacles and barriers on pet ownership and veterinary care, they're going to shy away from it. >> Tovo: Thank you very much. >> Houston: Ms. Vega. >> I would like to donate my time. >> Houston: We don't donate time. That's in city council meetings. But you can talk when she finishes. >> Sorry. >> Houston: You've got three minutes. >> I'm sola Vega. I'm not really familiar with this case, because there was no data published on the backup. So I think it's very unfortunate that you're asking us to speak before staff speaks, because I have nothing to go on. I can read the Waco case, and I can read the Los Angeles case, as was posted in the backup, but what is the data in Austin? So, you need to identify the problem in order to solve it, okay. So where is the data? What I would like to see, you need to be fiscally responsible, of course. If the problem is -- the question was, how can you reduce intake to the shelter. Okay. What are the sources of the intake? Where are those animals coming from? That's the problem that needs to be resolved. I can imagine that a majority or a large number of cats is because they're feral, but, what about the dogs? Any animal getting adopted is spade or neutered, where are the dogs coming from? The dogs are bred because they're aggressive breeds and people tend to sell those, then that's a different problem to address. So, if spay and neuter is going to solve it, is that the problem

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that we're trying to solve? Let's go back. Now, the other thing is, I'd like to be able to participate. I would like for a working group, we can sit down in exchanges like this. This was started in 2010. In 2010, the question was, do you want to have a no-kill center or the spay and neuter. Now we have the no-kill center, now the next step, would the spay and neuter help or not, what can help, what is the data. Regarding the working group, if you see me running out of breath, I'm intimidated by the group. They have this idea, they're passionate about it, but they tend to bully everybody else. If I'm running out of breath, it's because I'm uncomfortable. I'm intimidated. Let's form a working group where we can share ideas based on the data. Where is that data? Let's see. I had one more. So, the suggestions are excellent, for instance. So, if we could have some kind of working group where we can look at the data and then decide where to go. Thank you. >> Houston: Thank you. Mr. Fulsome, do you want to comment? [ Off mic ] >> Houston: Thank you so much. Let's see. George Armstrong. [ Off mic ] >> He doesn't want to speak. >> Houston: Oh, I'm sorry. Thank you for being here. Okay. Ms. Hammond? We're ready for your briefing.

[4:01:25 PM]

>> Good afternoon. My name is tawny, chief animal services officer for the city of Austin. I'm presenting on the council committee agenda item referral to discuss and obtain information and public input on strategies to reduce animal shelter intake. The referral I am asked the following topics to be considered, current data on intakes related to animal issues, is city of Austin measures planned to take into account populations of cats and dogs and manage intake and adhere to the no-kill resolution, the pros and cons of a spay/neuter ordinance, the ordinances in Waco and los Angeles. Current data on intakes, calls from 2012 to 2015 increased 24% from 25,237 to 31,501. We would expect to see an increase in requests for animal-related services because of continued population growth and increased population density, and will continue to see these increases in the future. Travis county population to include the city of Austin increased over approximately 11% in the last five years. Public requests for assistance with stray and loose animals and sick, injured animals are the majority of the calls, but fluctuate from year to year. In 2015, we had 15,107 calls for stray or injured animals compared to 16,342 calls in 2012. Number 2, the second point of the referral, the city of Austin measures planned to take into date to control populations

of cats and dogs and manage shelter intake and adhere to the no-kill resolution. Austin will celebrate five years of no-kill success in March 2016. Every year since 2011, Austin has saved greater than 90% of the homeless animals who enter the shelter, earning Austin the title of America's largest

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no-kill city. Through partnerships and the Progressive life-saving approach to control, Austin is a beacon of hope to other cities and towns throughout the United States and even the world. These policies, programs, and partnerships were laid out in a series of recommendations put forth by the animal advisory commission and approved in 2010. The no-kill implementation plan was modeled on best practices and animal sheltering, and the plan has proven it works. After five years, it is still the recommendations from the no-kill plan that guide our efforts today. In 2010, the commission's directive was to look at other successful cities and recommend policies and procedures that were proven to be effective at reducing animal intake and increasing live animal outcomes in those cities. Recommended strategies for increasing live outcomes included focusing on strengthening the adoption program, and rescue partnerships, creating a large-scale foster program, increasing live outcomes for feral cats and building a broad base of public awareness advocacy. The following is a brief overview of recommendations of the no-kill plan which have been implemented and the results. The Austin animal center has live rates above 90% for every month. In 2015, they averaged a life outcome rate of over 94%. Decreased shelter intake from a more than 23,000 animals entering the system per year to fewer than 18,000 per year. In 2000, the intake per thousand residents was 27 animals. Today, the intake per thousand residents is about 15 animals. This is despite a steady increase in population size. While there is some volatility in intake numbers, the general trend is a decline in intake. Prevention and intake diverse programs are working. The Austin animal center does

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7,000 adoptions per year and sends 5,000 pets per year to rescue groups. Austin Pets Alive takes nearly 3,500 animals per year. Austin Humane Society takes between 500-600 pets per year. Austin animal center has 140 total partners helping us to save the vast majority of animals. 2,500 were placed in foster homes in 2015. Foster homes increase shelter capacity by freeing up kennel and cage space at the shelter, and more than half of the animals that went to foster last year were adopted directly out of foster homes. Saving the city resources, and preventing the stress caused by the animal having to return to the shelter. Many of these pets are too young or too sick to thrive in a shelter environment. A dedicated staff person ensures families have support. To increase live outcomes for feral and community cats, the plan specified creating a program through a partnership to spay/neuter stray cats and return them to the community. In partnership with Austin Humane Society, approximately 1,200 stray cats were spayed or neutered and returned to the community just last year. Austin animal center has strengthened its media presence on social media and in the community. Austin animal center has over 60,000 followers on Twitter, Instagram, and Facebook. They participate in spots, the website should be more friendly by May. Other elements which have been implemented are the 24-hour kill list hold, call before killing, reclaim their pet, in euthanasia is the only other outcome, and a moratorium on it when there are empty cages. The program is run by Austin Pets Alive.

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The Austin animal center has implemented return for stray animals picked up. Last year, more than 500 stray animals were returned. The shelter provides micro-chips for all adopted pets, and free microchips

and tags are available to the public. The city funds spay/neuter surgeries for owned pets. These are primarily done at mobile clinics in nine different zip codes, including the highest intake Numbers. Public educators on staff also assist with transport to clinics if pet owners are unable to arrange for their own. In fiscal year '15, almost 8,000 owned pets were spay/neutered and vaccinated. 900 pets received free vaccines. Families received information at a clinic. The other item, number 3, the pros and cons of instituting the spay/neuter ordinance. Spay/neuter programs are very important. There's no doubt that spay/neuter programs are a very important part of the equation, but the impact on the community varies depending on how it's implemented. That's an important point. We assist, earn courage, educate, and provide spay/neuter through current programs and policies which I described in the previous sections and will mention here again briefly. We run a spay/neuter outreach program to provide services and education in low-income and high-intake areas, fund thousands of spay/neuter surgeries for owned pets and community cats through our partnerships. Additionally, all animals adopted to public and transferred to rescue are spay/neutered prior to leaving the center. Lastly, spay/neuter services are offered to those reclaimed stray pets. On the second impound, the pet is required to be altering prior to being reclaimed. This works to reduce the population of homeless pets, despite rapid population growth. The key barriers to people getting their pets spayed or neutered are financial limitations, lack of information, and access to

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veterinary services. We do not advocate the passing of a spay/neuter ordinance because of this. There are several reasons for this. No major animal welfare organization promotes or endorses this as a means to increase live outcomes, or decrease shelter outtake, including aspca, American veterinarian medical association, and the humane society of the United States. What these organizations do support is effective community outreach to give residents the information they need to make a decision on the topic and facilitating access to spay/neuter services, all of which our current programs strive to do. Spay/neuter ordinances have the potential for many unintended consequences. In many instances, including los Angeles and Kansas City, intake and euthanasia increased. The burden of criminalized unaltered dogs falls hardest on lower-income neighborhoods. According to the humane society United States, nationally, the majority of pet owners spay and neuter their pets. However, the lower the income neighborhood, the lower income the neighborhood, the less likely pets are spayed and neutered. Only 4% of owners cited a mandatory requirement as a motivation to get their pets altered. Almost three-quarters of owners cited a desirer to prevent unwanted litters and a belief that it's the right thing to do, again, pointing to the need for effective programs to bridge resource and education gaps, and not criminalize the behavior. Criminalizing behavior does not induce compliance. Mandatory spay/neuter frequently increases intake due to pet owners being unwilling or unable to comply with the law. And so choosing to surrender pets, or surrendering pets in lieu of citation and fines. Mandatory spay/neuter can make owners reluctant to reclaim lost pets. It's been shown to make some owners less likely to comply

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with other ordinances, such as obtaining vaccinations. Mandatory spay/neuter would result in increasing staffing needs in a department that is already understaffed. The last item -- the types of ordinances adopted by the communities such as Waco and los Angeles. Los Angeles and Waco both adopted mandatory spay/neuter to questionable efficacy. Los Angeles' intake and euthanasia increased. Los Angeles dedicates \$1.2 million annually just to mandatory spay/neuter. In addition to mandatory spay/neuter, the city of Waco also instituted a surrender fee and disposal fee at the same time for



animals that are brought to the shelter. So, if overall intake has declined, it's difficult to know what the predominant factor was. Santa Cruz, California, implemented mandatory spay/neuter. In ten years, their budget doubled. It should be noted Santa Cruz is a Progressive community that instituted other programs. Kansas City implemented it for pit bulls, increasing intake of pit pull-type dogs, euthanasia of the dogs, and using between animal control animals and the public about what they were in the first place -- confusion. After nine years, 79% of the dogs are still unaltered. In the words of the aspca position statement, to the knowledge of the aspca, the only method of population control that has demonstrated long-term efficacy in reducing the Numbers of animals entering the shelters is the voluntary sterilization of owned pets. There's evidence that sterilizing very specific, at-risk subpopulations of companion animals, such as cats and animals in shelters, can contribute to reductions in overpopulation. In contrast, the aspca is not aware of any credible evidence demonstrating a statistical significant enhancement in the reduction of shelter intake or euthanasia as a result of the

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implementation of a mandatory spay/neuter law. In conclusion, the Austin animal center is modeling animal welfare best practices to reduce intake currently. I will continue to evaluate any and all programs and policies that will utilize precious resources appropriately. I'm in regular communication with animal welfare leadership around the country, and I can assure you we're committed to staying abreast of changes. As we look for ways to reduce shelter intake, we know the biggest barrier is being resource and animal protection. According to the national animal care and control field staffing levels, the city of Austin only has a third of the animal protection officers needed. Much of the education information, sharing, and assistance happens in the neighborhood prior to an animal becoming lost or surrendered to the animal center. Additionally, according to the office of the city auditor here in Austin, priority one calls are not being answered within two hours during the day. Currently, animal protection officers are only scheduled seven days a week from 7:00 A.M. To 5:00 P.M. With one officer scheduled from 2:00 P.M. Until midnight. Thank you for your attention. >> Houston: Thank you. Are there any questions? >> I have a question. >> Houston: Councilmember troxclair. >> Troxclair: I didn't see it on the agenda sheet. Was this a recommendation from the animal commission? >> No. This is a referral item from the mayor's office and council. It came down in August -- a council committee agenda item referral for me to look into this and come report to you all. >> Troxclair: Okay. I mean, I didn't ever remember -- normally when he refers things it's because we had a discussion on the dais of something. I didn't remember discussing this on the dais, so I was trying to pinpoint the genesis of the conversation. Does anybody remember? >> Houston: Go ahead. >> I remember during our policy sessions, things have come up,

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and he would say, offer it to committee. I don't remember the exact time, but I'm wondering if that's when it happened. >> Houston: I don't remember the exact time, either. It was in August. We had just gone through a budget where we just approved additional funding, and so there's always that, how are we doing with reducing shelter intakes, because we don't have unlimited money. And so I think that was about the kennels and stuff. But that's -- >> Mayor Adler signed this August 3rd. >> Houston: Yeah. That was right after we approved the budget. >> Troxclair: Okay. Yeah. I mean, I guess I remember us talking about the animal services and things like that. But I didn't remember a specific discussion about, you know, a mandatory spay/neuter provision, so I was just curious. Thanks. >> Houston: And I have a question about reporting. You do some reporting to the health authority on a monthly basis, is that correct? >> All of our reports are -- we report to the animal advisory commission. And all of them are

online. We have a very robust -- I think one of the best in the city -- site on the website. The animal services website. Of all of our reports. All of that data is public information. >> Houston: So, let me just ask you a question. >> It's out there. >> Houston: You talk about the total number of animals impounded, the total number of animals destroyed, the date of disposition of an animal, the purchase price, the fees. All of that is in the city code. You report that online, and not to the health authority. >> Yes. >> Houston: So we need to look online. >> It's online. It's posted monthly. >> Houston: Okay. I just don't think we knew it. And this is going to be something that we'll have to continue, so we needed to know where to find it. Would it be possible for you to send the members of this committee the things that you're reporting on, the seven items

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that you're reporting on to the health authority? Could you just send it to us so we don't have to go online and look for it? >> I think -- I report to the assistant city manager, so I don't report to the health department. >> Houston: No, not the health department. >> Or the committee. >> Houston: The way that the ordinance is written -- I mean, the chapter is written, 3.127, it says the manager of an animal shelter shall file a monthly report with the health authority. >> I understand. >> Houston: That's the information that I'm looking for. >> I understand. We are the health authority. >> Houston: So you report to yourself? [ Laughing ] >> We report our data to the public. And it's posted online. >> Houston: File a monthly report with the health authority. >> Monthly. >> Houston: That's perhaps something that we need to ask, who is the health authority? Because the code says the health authority. And that can't be the same people. >> I think in other jurisdictions, it may fall under that. In other jurisdictions, it may be the police department. Am I correct that we post our data monthly? So it's available. It's out for the public. It's a really good site. Ctm and -- has done a great job in that presentation of information. It's very easy to source -- look at. >> Houston: Director, I think what I'm asking is, according to the city code you're supposed to be reporting to a health authority. So we might need to ask assistant city manager who that is. And what I'm asking is, could you send those seven items to the four of us so that we don't have to go online and look for it. >> Which seven items was it that you wanted us? >> Houston: The total number of animals impounded, the total number destroyed, a description of each animal impounded under the care of the animal shelter and the dates of its impoundment

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or acceptance, the date of sale -- I don't think you all sell animals. But disposition of an animal, the purchase price, the amount of fees. >> Okay. >> Houston: There are a lot of things in this code that might need to be looked at. And that probably is one of them, so we'd like to have that information. Because, again, what we're hearing from the community is that there are more and more cats and dogs. And until we roll out whatever this proactive plan is that you're going to do, you know, we'll still be getting more and more animals in the shelter, and there'll be times when we'll be overcrowded in all of our shelters. And so we just want to stay abreast of it and kind of take a look at it in a year and see where we are as far as intakes. >> And that's what we do on a regular basis. >> Houston: Okay. >> I think the concern that there's more animals in the building is because they're alive. And we get them adopted out and we work with our rescue partners. So I think there's probably a misunderstanding of what a no-kill facility looks like versus a pound. >> Houston: We all understand what no-kill is. But I'm having a problem with -- if we don't find some way to stop the intakes, then we'll be getting more and more requests. And we don't have -- it's a fiscal impact that I'm trying to get at. >> I understand. The only point that I think's really important here is our intake has gone down. We're continuing to implement these Progressive programs. Our job's not done yet. It's every day continuing and moving into the

future. So I would -- I beg to differ with some of the folks in the community that have posed some opinions, because statistically, intake's going down. >> Houston: We'll go online and look for that. >> Yes, ma'am. >> Houston: Thank you. >> Thank you, ma'am.

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>> Houston: So while you're here -- no, if you'll sit down, we'll go on to item number 7, which is about adopting an ordinance that generally prohibits cruelty and promotes humane treatment of animals. And so several people have signed up for item number 7. David is the first person to speak, and you have three minutes. >> Good afternoon, David, chair of the animal advisory commission. I'm speaking in that role. The commission took up this item mainly because of comments made during the circus elephant bullhook discussion, specifically on councilmember Houston's amendment to strike part of that. And I'm paraphrasing here, but this is councilmember Gallo -- I think all things addressed with this section are things we wouldn't want to have happen to any animal. I'd like to be more inclusive of all animals, not just elephants. Councilmember Tovo spoke in opposition to striking these items. She says, it's important to codify this so there's no vagary. The vagueness of torture is articulated in some fashion in our local code again, so regarding against the bullhook being replaced by other instruments of pain. The mayor spoke in favor of striking these. He says, "I'm going to support the amendment to strike this language from this ordinance in part because I don't want these kind of things to be limited to just elephants." So, I looked very carefully at the comments when we went into this. Instead of starting from scratch, we decided to take a look at what those items actually were, which was part C of the original ordinance. So, for example, number one, depriving the elephant of food, water, or rest. Already in the city code. Electricity, that was problematic because of training

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collars and the borderless fences. Three was too specific to elephants. Four was too specific to bullhooks, so that left us with five, the use or display of a baseball bat, ax handle, pitchfork, or similar tool. So, like I said, instead of reinventing the wheel, we just took that simple phrase and we added what I consider the key to this, we added those devices with -- or a device of similar design for similar purpose. So, that was why we did this. And I think -- it's my opinion, at least -- that we did exactly what council asked us to do that day. And one more thing I want to say. Normally the commission would not send you such specific language, but it was already basically -- the work was already done for us, so we just decided to send a very specific recommendation instead of just broad language. So that's why we did that. So I'll let Ms. Hammond address most of the issues, but I wanted to try to get what I could in within three minutes. So if there's no questions, I'll be finished. >> Tovo: Thanks so much for being here. >> Yes. >> Tovo: So, the recommendation -- I'm trying to understand the description of the recommendation, actually. [ Beeping ] >> Tovo: It will close any loophole created by the council eliminating similar language in the bullhook ban. >> Right. >> Tovo: And extends these protections to all animals. So, you feel that this does not in any way weaken our bullhook ban? >> No. I mean, my intent was to strengthen the bullhook ban. >> Tovo: Right. >> Because the HSUS and the animal earnest group were afraid that by striking some of those items that someone, for instance, might take a baseball bat, hammer a nail in it, and

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use it as a bullhook. So that's why I was very clear that I had two goals. One was to close those loopholes, or perceived loopholes, and also to honor council's request that we expand it to all animals. I

saw it as an opportunity to do both. And I think the comments were very valid, and I think it's a very great idea to expand it to more animals. >> Tovo: Great. That opportunity to do that. >> Tovo: Thank you. >> Houston: Dr. Nazar, how did you pronounce that? Nazar. No. You don't want to speak? [ Off mic ] >> Houston: That's fine. Oh, he's going to speak now? >> The original intent of this, of course, was to protect elephants. And I think that's still really important. And I think it has a very long-term effect. I don't know if you noticed, but barnuh has decided to retire the elephants a year and a half earlier. I think this comes from citizens speaking up, if you can't do it humanely, you couldn't do it. The original spent of this is very important, it's important we don't lose that, and continue on supporting this ordinance the way the city council seemed to want to do it. >> Houston: Thank you sir. Mayor pro tem has a question. >> Tovo: I don't, actually. I want to thank Dr. Nazar for pointing out that in the last couple days, Feld entertainment did make the announcement they're retiring their elephants this may. And it is certainly, in part, attributable to the fact that cities across the country have

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adopted similar bans on bullhooks. And I just really appreciate the work of all of our community members who have advocated that the city of Austin do the same for so many years. >> Houston: Ms. Vega, do you have comments on item number 7? >> No. I think it's a really good thing. I just wanted to add that I'm also Dr. Vega. You are using doctors, but, if you call him doctor, I'm doctor, too. >> Houston: I didn't know. I will call you Dr. Vega from now on. >> It's just a joke. Thank you very much. >> Houston: Dr. Mayor pro tem, would you like to -- >> Tovo: I am not a doctor or a lawyer. >> I'm ajuris doctor. >> Houston: Those are all the the -- citizens signed up. I'll ask Ms. Hammond to come back and give us a briefing on that. >> I wish I was a doctor. [ Laughing ] My name is tawny, chief animal services officer. I'll be brief. On August 6th, city council approved an ordinance that would make it illegal to use a bullhook to train an elephant, or to display a bull hook in the presence of an elephant, taking effect October 1st, 2016. During the course of that meeting, various councilmembers expressed the need to consider an ordinance to protect all animals, review the state code regarding animal cruelty to see if it provides adequate coverage, and to review any existing city animal-related ordinances before considering additional ordinances. And I have here the transcript from that August 6th meeting. It's about 50 pages just on the elephant bullhook conversation

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referencing the need to look at more globally. And so, we reviewed the entire transcript from that meeting several times. The chair of the animal advisory commission put a work group together comprised of an animal protection officer, the state director for the humane society, the animal commissioner advisor, and the chair. I met with them. After reviewing local and state code, they brought a recommendation to staff and the animal advisory council in October 2015. It was concluded that animals had adequate protection from general cruelty under state code. And city ordinance that addresses proper care of animals. What is missing is the protection of all animals from instruments of pain that may have been used in their training and control before coming to Austin and while in Austin. The work group removed language from the original elephant ordinance that they considered redundant and unnecessary when addressing all animals. The bullhook ordinance was reads, the person may not use a bullhook to train or control an elephant, or display a bullhook in the presence of the elephant. The language for the proposed ordinance that you have in front of you today, training and control of an animal, is a person may not train or control an animal by the use of a baseball bat, ax handle, pitchfork, bullhook, or device of similar design for similar purpose. It does not apply to livestock. We proposed it would take place October 1st, 2016. Key to the language is, device of similar design for

similar purpose. This covers what was intended originally and covers all animals, and it closes -- when we're talking about loopholes, that would allow someone to control an animal with an implement originally used to beat and frighten the animal. The Austin police department animal cruelty unit has reviewed this and is supportive.

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>> Houston: Thank you so much. Dr. Mayor pro tem. >> Are we posted for action, actually? >> Houston: No, just a briefing. >> Tovo: Thank you. >> Houston: Councilmember Garza. >> Back to us -- >> Houston: No. Nothing? I've got some comments. A couple of the things that we've been looking at is that the state guidelines talk about cruel manner. You know, they talk about torture. There's definitions of torture. Why is it that we're not using that kind of language rather than the bullhook and the baseball bat, and the same things that we took out of the elephant ordinance? >> Just precisely what I had mentioned in overview is that we feel animal protection cruelty unit -- excuse me, the Austin police department cruelty unit and animal protection officers feel that there's adequate language in the state code for cruelty. But there's not anything that specifies a device. And that's where we give examples. Pitchfork, baseball bat, handle, to train, coerce, frighten, an animal. >> Houston: Wouldn't that be torture, whatever you use? >> You and I might call it torture. We heard during the testimony, four or five hours about elephants, that it was necessary. So, we are saying that we don't allow it. And we don't consider it torture. This is just my recommendation. And this is -- again, it has the police department's support, and the humane society. And that's the gap we found after the analysis. >> Houston: And is someone here from the police department that could speak to this? >> Animal protection and the police department are in the room. Sergeant Perez.

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>> Houston: Thank you for being here. You've been here since before 2:00. >> Yes. [ Chuckling ] I'm the supervisor for the animal cruelty unit for Austin pd. >> Houston: And so I guess my question for you is, how often do you see people using these kinds of implements to train animals? >> Well, we haven't had a cruelty case that involved bullhooks. We have had some cases where an object was used to abuse the animal. But . . . >> Houston: But that should be covered under something else. This is about training. >> Yes. >> Houston: The reason to put this back in is to keep people from training and controlling animals with these implements. So I'm trying to see what the data shows to support putting that language back in. >> Well, there's no offense to, you know, brand-ish a baseball bat, you know, to an animal, or a pitchfork, or a stick. It actually has to be used at it would fall under the cruelty statute of the penal code. >> Houston: Okay. So, we have no real data to sub-substantiate that you all have found instances where animals were being trained with any of these kind of implements that we're wanting to put back into our code? >> Yeah. As far as I'm aware, we get

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cases where it's reported animal cruelty. And after looking into it, it's more of a training-type issue. Does that make sense to you? No? >> Houston: No. Tell me what that means. >> That we look into the case, and it doesn't fall under the cruelty statute. So, because the person was, you know, training the animal. >> Houston: And so are there a lot of those? >> Um -- >> Houston: Because they're saying there's a gap there. So if there's a gap, to me, that means that there's some data to say that this is happening and we have no way, as either in your department, or in animal protection, to be able to fine or provide a penalty for this training with these implements. >> Yes. We do get a report in. >> Houston: You do get

them reported. >> And I don't have the data with me to show you the Numbers over the years, but I know that we do get them reported. >> Houston: Could you get us some data? >> Yes, ma'am. >> Houston: Or is that on the website, too? >> No, I'll get you the data. >> Houston: Could you get us some data to show how many incidents of cruelty or abuse you all have gone out on, and you found that it was not -- it was more of a training situation where they were using a bat to threaten or intimidate a dog, or a cow -- no, livestock isn't included in this, right? Okay, I'd appreciate that so I know what's the magnitude of what we're talking about here. >> Okay. >> Houston: Because we're being very specific, and there are some things in state law about torture, but it doesn't speak to training. So I'll really emphasizing on

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the training component, and where do we get that. Is this anecdotal, or is this something that we actually know is happening. >> Yes, ma'am. >> Houston: Thank you. >> I think one of the things when we talked about the data and instances, if there's not a log and something, you may not find any record of it, because the police department, the fire department, and other agencies are not documenting something they can't enforce. I don't know what senator Perez and the staff will pull together, but remember, the purpose of what we were presenting, my recommendation, was a gap about -- that it would be unlawful to do that. So if it's not unlawful yet, we're going to be very hard-pressed to give you any statistics of instances of something being unlawful that doesn't exist yet. What I'm hearing from officers is that when they go out to traveling circuses and large animals are brought into the city and things like that, these animals that have been beaten and coerced into standing on their head or other things, those same type of tools are still on the site and are being used to move animals around. Nobody's being cited. So, giving you hard fact statistics would be difficult. >> Houston: We're still talking about circus animals? >> Show animals. >> Houston: Is that in the recommendation? >> It says all animals. >> Houston: But you're talking about show animals and traveling circuses and things like the shriners that come into town. >> I'm just talking about statistics right now. I don't think that you're going to find any statistics where pd, police department, or animals protections saw this, because they wouldn't track it if there's no citation. >> Houston: Let's say we add this back into the code. How will we track it then? Who would notify you that an animal is being trained, or would we just assume, because somebody is standing on their head, that something negative happened to them and they were

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threatened to stand in an awkward position? Officers and the cruelty department would, if we had a law on the books, there would be a citation and we could track that data. >> Houston: Hmm. Okay. >> I have a question. Is this going -- are y'all bringing this back as an rca at some point, a recommendation for council to consider some action? >> Yes. It was a recommendation through the animal advisory commission and from staff, the work group that put this together is recommending this. This is proposed language. >> Because it's on our agenda as a briefing. I'm just curious. Are you -- I guess I don't know what the process is. If we can't vote on it to move forward to the council, I guess are you going to bring it -- was that your intent? >> That was the intent. >> Garza: Okay. >> The intent would be to go to council for a vote. >> Garza: Okay. >> Thank you for that clarification. >> Garza: Thank you. >> Houston: And that would be on both items 6 and 7. >> Six wasn't a vote. Seven was. Six was a briefing. >> Houston: Well both of them were briefings, because we were 3rd -- I closed my book now -- August the 3rd -- is it -- >> There is no -- >> This is the 13th. It was trying to get you before this committee, because the mayor had sent us both referrals to just hear the information. So we were not prepared to take a vote on either of those today. It was just to get information. >> Fair enough. >> Houston: Back to them.

>> Fair enough. >> Houston: Mayor pro tem doctor. >> Tovo: So, I think the difference, though, between the two items is that the request -- the referral to this committee

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with regard to the cruelty ordinance, the specific question was consider whether the city should adopt an ordinance that protects animals and prohibits cruelty. There was a particular question the work group and the staff evaluated. And now the staff are prepared to make a recommendation to council to adjust the ordinance language in the way they've described. With regard to the other issue, chair, were you suggesting that six -- were you asking the question of whether six was headed to council in some fashion? Because that -- I'm sorry, I misunderstood. That one was just much more general in terms of an analysis, and didn't appear to have any particular question -- well, it did have questions that were being answered, but not a particular proposal. Okay. Thank you. >> Houston: Assistant city manager Lumbreras. >> I'm disappointed you didn't refer to me as a doctor. >> Houston: I didn't know you were a doctor. Let me see the hands of people who are not doctors in this room. Everybody else I'll call a doctor from now on. >> I'm just kidding. >> Houston: I know you are. >> I certainly don't mean to -- assistant city manager. This is a bit different, that staff is experiencing. I think that's why Ms. Hammond is in an awkward situation. The first item is an item that seemed like it was pending out there, and it got referred to this committee to do something with it. Obviously, you've heard, you know, both sides of it, and you've heard staff give you a recommendation, and give you the context and the basis for why it originally wasn't a part of the no-kill plan that started from the community, the animal advisory commission, and ultimately got approved by council. The second issue is a referral from a recommendation from the animal advisory commission. And like any other commission that you have out there, you know, it's up to the council to either, you know, move it forward or not. And certainly you have a recommendation from your chief animal services officer that

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she, certainly, is comfortable making a recommendation. So I think it would be helpful to get some direction from this group in terms of what you want to do with either of the two items, if you want to do anything with them. But I think at the end of the day we would just simply try to respond to number one, the first one that was referred. And then the second one that has been forwarded by the animal advisory commission. And then ultimately, your call in terms of whether you want to move forward or not. >> Houston: Actually, both were referred by the mayor. >> Okay. >> Houston: Both items. >> My apologizes for not picking up on that second piece. >> Houston: But I still understand what you're saying. >> But it still holds true it will be ultimately up to you as to how you want to move forward. >> Houston: Let me say that for me, we've been a no-kill shelter for five years. Some of the comments that I've heard this evening from other people that are wanting to look at other ways to do -- reduce the shelter intake, I'm not notprepared to move that item forward today. I think some of the people here were not participants in that working group that talked about spay/neuter or what other options are available. And I've heard some suggestions of other things that may have an impact on reducing the shelter intake, although I understand it's down from last year. I've just not gone to the website to look at that. So I need to look at that. So, I would be willing to have some more conversation about how to reduce shelter intakes, including the information that you're going to be proactive in going out to the community. I think you're coming out to a town hall meeting next Saturday to help people in my community understand the importance of being responsible pet owners. I still have concerns about how this wording is. It still looks like it's specifically for elephants or circus animals. And so as we broaden this to make sure that all animals,

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however we define animals in our city code, are protected from cruelty in training and in any other way, I would still like to have some conversation about that. But if this is something that has to go through, I will let my councilmembers have that ability to talk about that now. Councilmember Garza. >> Garza: Yeah. I just -- I read it as -- it is -- it's -- the purpose was to make it as broad as possible. And that it does include all animals. Even though there was specific examples of the circus animals, this is trying to be broad. And it's not just -- it's all animals, with the exception of the livestock. It does not apply to animals defined as livestock. And I would be more than happy and willing to make up the motion to forward this with staff's recommendation to take the board or commission recommendation, which was -- it looks like a 10-0 vote. But it's not posted as action. So I'm just wondering if this speaks to our next agenda item, can we add this to the next agenda item as an action item? >> Houston: Mayor. >> Tovo: I wonder, it's not unprecedented for the staff to bring forward a recommendation to council, too. We've heard and discussed it. Though we weren't posted for action and didn't take a formal action, I'm not sure that I necessarily need to see this back again next month. I would be happy for -- maybe it's completely kosher for us to just ask the staff -- provide direction from the dais. We would welcome this on a future council agenda for council consideration at this point. If my colleagues are comfortable with that, just to kind of keep it moving forward rather than keep it coming back. >> Garza: I would say you are a better visionary than I,

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because that's even a better idea. >> Houston: Councilmember troxclair, you've been quiet. >> Troxclair: I thought I would let the rest of y'all talk, you know, for once. [ Laughing ] I was very vocal on our other items, so. I mean, I want to understand if this is an issue that needs to be addressed. I was interested in the response from -- and the data that our animal services department was going to provide us about whether or not this is a problem that we're really seeing in the city, because it seems to me like the vast majority of cases are being addressed through state law that covers cruelty of animals. But if it's a problem that can be easily addressed, maybe -- I don't have that information. I was surprised to hear that it -- that he felt like there were those cases. So I just -- I want more information about that. >> Houston: Okay. So -- >> Tovo: So what does that mean in terms of -- what were you asking the staff to do? >> Houston: I think some of us are asking the staff for more information about animal cruelty in the city, and how often that has occurred, and what kinds of cruelty that is over the past -- at least year for that particular one. That's number 7, item number 7. And it doesn't have anything to do with bullhooks, or any of those other implements. It just has to do with what you see out in the field when you go out and you get a call from 311 about cruelty to animals. I think that's what we're trying to see. Because if there's a gap, we need to know what that gap is, and does this really fill that gap. So, I'm not willing to make the recommendation until I get more data on 7. >> Garza: I guess, just to make sure that this -- so I understand, too, and the staff knows the direction -- I guess since we can't officially take

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action or vote, my assumption would be it would be at the discretion of the chair to either give the direction for it to come back as an action item to this committee, or for them to bring it back as an action item before the entire council, with that data that you're asking for. >> Houston: I'd like the data before we get to the full council. I would like to have them come back before this committee with the data before we go to council. That's what happens. We get to council and we don't have the data until



that morning. >> Garza: Okay. >> Houston: So if we could get the data first, and then come back and either at the next meeting, then we could refer it on. >> Garza: Okay. >> Houston: To full council. >> Garza: It would be posted as an action item. >> Houston: It would be posted as an action item. >> Tovo: Chair. My concern is that we're in a little bit of the same quandary we were in with the smoke complaints, where people were not -- we had no data about smoke complaints because we don't have an ordinance on the books that governs smoke complaints. And I think that's what we were hearing from our animal services officer. We don't have an ordinance on the book that speaks to this particular provision, so they will likely not have any data that's responsive to this specific provision. But did you mean for more general data about animal cruelty? >> Houston: My request was to the Austin police department, who does go out and look at animal cruelty situations. When they call 311, it's my understanding that there's a unit in APD that goes out and looks. I want data from them about what they're finding out there in the community. I know animal services doesn't, but I'm talking about the police department now so that we have more general information, okay. >> Tovo: Okay. >> Houston: Okay? Any more discussion on that item? All right. I'd like to remind you that this

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year, that the committee meetings are being held every other month. Our next meeting is March the 9th, 2016. Possible agenda items for the March health and human service committee agenda include del medical school update. We've asked Dr. Johnston to please be here with us. There will be a staff briefing on coyote management policies of the city of Austin and Travis county. Is there anything else that we need to put on the agenda? Yes? >> Troxclair: I sponsored an equity resolution, and there were two parts. >> There was a health part, which the stakeholders were very happy with the outcome of that. But there's another part to it, which is the tool. And some of the stakeholders are concerned that that part has stalled a little bit. So maybe -- just a staff briefing on next steps for the equity tool going forward. >> Houston: Can you make sure that Mr. Jones is . . . I'm not sure he's over that equity tool. >> Garza: He is. >> Houston: Is he? >> Garza: Or maybe the city manager. >> Houston: I thought -- >> Madam chair. >> Houston: Yes, sir. >> Health and human services. Shannon vetted that with city management. There might be some other city departments that would be involved with that, including economic development. We'll make sure and get with city management and Shannon and others to make sure that we get that moving and prepared for the March 9th meeting. It may not be at the lead, but we'll be prepared to present on that. >> Houston: Thank you. Anything else that we need to add to that agenda? Without objection, this meeting of the health and human services committee is adjourned at -- what time is it? 4:53 P.M. Thank you so much.