

#### TESTIMONY

Presented by

# Donna M. Corrado, Ph.D. Commissioner

on

# FY 2016 Preliminary Budget

before the

New York City Council Committee on Aging & Subcommittee on Senior Centers

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# Monday, March 23, 2015 10:00 A.M.

at

Council Chambers, City Hall New York, NY 10007 Good morning, Chairperson Chin, Chairperson Vallone and members of the Aging Committee. I am Donna Corrado, Commissioner of the New York City Department for the Aging (DFTA). I am joined today by Joy Wang, Assistant Commissioner for Budget and Fiscal Operations, to discuss DFTA's Preliminary Budget for Fiscal Year 2016. I would like to share DFTA's FY '16 priorities, which build upon the Agency's accomplishments.

#### **OVERVIEW**

In FY '15, the DFTA budget increased substantially. The FY '15 budget included \$3.3 million to address rising food costs for congregate and home delivered meals, \$2.6 million for case management services, \$2.3 million for Innovative Senior Centers and \$1.5 million to support fringe costs for home care workers. Also, DFTA received \$472,000 to expand the Grandparent Resource Center (GRC) program to provide outreach in 15 New York City Housing Authority (NYCHA) developments, which are the focus of the Mayor's Action Plan for Neighborhood Safety.

We applaud Chairperson Chin, Chairperson Vallone and the members of the Aging Committee, together with Speaker Mark-Viverito and Finance Chairperson Ferreras, for securing \$20.6 million in Council funding for senior services in FY '15. Important initiatives, such as expanding Naturally Occurring Retirement Community (NORC) programs, supporting senior center needs, responding to seniors requiring home care, providing services to LGBT seniors in every borough and enhancing elder abuse services, were all made possible because of your efforts.

After sustaining budget cuts in previous fiscal years, the increased funding in FY '15 helped rebuild critical infrastructure within DFTA's programs. As the Agency prepares for the aging boom, and meeting the needs of the growing and diverse population of older New Yorkers, it is our hope that resources will meet or exceed the increasing demand.

The FY '16 Preliminary Budget projects \$257.3 million in funding. The budget includes allocations of \$114 million to support senior centers, \$34 million for home delivered meals, \$24 million for case management services, \$18 million to support home care for homebound seniors

who are not Medicaid eligible, \$6.5 million for NORC programs and \$4 million for caregiver support services.

#### FY 2016 PRIORITIES

This fiscal year, DFTA is exploring needs in geriatric mental health services, case management, home care and home delivered meals. Earlier this month, we joined First Lady Chirlane McCray in launching her mental health initiative to "shatter the stigma." Together, we held a roundtable discussion at DFTA and visited a senior center and geriatric mental health clinics to focus on the mental health needs of older adults. In addition, with the continued rise in the older adult population, issues of poverty and frailty increase as well. Consequently, the demand for case management services, home care and home delivered meals has grown.

#### FY 2015 AGENCY ACCOMPLISHMENTS

Among DFTA's accomplishments in FY '15 are the implementation of the Grandparent Resource Center Outreach Initiative in NYCHA developments; the reduction of case management caseloads; the integration of the Bill Payer Program; the administration of NY Connects; the procurement of elder abuse prevention and intervention services; and the release of the concept paper for transportation services.

#### Grandparent Resource Center Outreach Initiative

DFTA's Grandparent Resource Center – established in 1994 and the first of its kind in the nation – provides information, assistance and supportive services to those older adults who are raising grandchildren and other young relatives. As I referenced earlier, the GRC program expanded last July under the Mayor's Action Plan for Neighborhood Safety, in order to serve some of the neediest kinship caregiver families in 15 NYCHA developments. Through this initiative, GRC Community Advocates work with residents and kinship caregivers for children under 18 years old, providing information, education, trainings and peer support on raising children. The program also serves as a resource link for senior NYCHA residents to access services for older adults. The NYCHA developments included in this initiative are Butler, Castle Hill and Patterson in the Bronx; Boulevard, Brownsville, Bushwick, Ingersoll, Red Hook, Tompkins and

Van Dyke in Brooklyn; Polo Grounds, St. Nicholas and Wagner in Manhattan; Queensbridge in Queens; and Stapleton in Staten Island.

#### Case Management Caseload Reduction

Reducing high case management caseloads has been a priority for DFTA. The additional \$2.6 million for case management services this fiscal year helped bring caseloads down to 65 per case manager. Previously, caseloads were nearly 80 per case manager. We are continuously looking for creative ways to decrease and manage caseloads.

#### Bill Payer Program

The Bill Payer Program is now integrated into DFTA's case management system and permanently funded. Screened and trained program volunteers assist low-income older adults with monthly bill payment tasks. The volunteers meet one-on-one with seniors in their own homes to help them organize documents, create and follow a budget, balance their checkbooks and write checks. The participating seniors sign the checks and make all financial decisions. Through bill paying assistance, volunteers can also determine if the seniors might be eligible for benefits and entitlements, such as the Senior Citizen Rent Increase Exemption, the Supplemental Nutrition Assistance Program and the Home Energy Assistance Program.

#### NY Connects

NY Connects is a statewide, locally based point of entry system that provides one stop access to free, objective and comprehensive Information and Assistance on long-term services and supports for people regardless of age, disability or diagnosis. The strength of the NY Connects network is the rollout of the No Wrong Door/Single Entry Point system, which allows access to more than 19 different services, regardless of payment source. In New York City, DFTA will have oversight and monitoring responsibility as the Local Administrative Agency for NY Connects. In this role, DFTA will be working with the New York City Human Resources Administration, the Mayor's Office for People with Disabilities and other stakeholders to establish a No Wrong Door Hub under NY Connects. The No Wrong Door Hub will provide long-term services and supports information and connection to community resources, screening assistance, coordination of application for public benefits and linkage to the comprehensive

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assessment process for all populations, as appropriate. DFTA has received \$6.8 million to launch NY Connects locally.

#### Elder Abuse Prevention and Intervention Services Solicitation

Last October, DFTA issued a request for proposals (RFP) for Elder Abuse Prevention and Intervention Services. The elder abuse services program has a dual mission: assisting and ensuring the safety of older adults age 60 and over who have been abused; and preventing further abuse by raising awareness of these issues through outreach and educational presentations to individuals and groups. The selected providers are Neighborhood Self-Help by Older Persons Project for the Bronx; Jewish Association Serving the Aging for Brooklyn and Queens; the Carter Burden Center for the Aging for Manhattan; and the Community Agency for Senior Citizens for Staten Island. These providers will continue to offer services such as case assistance, emergency shelter referrals, safety planning, legal advocacy, support groups, medical referrals, financial assistance and educational workshops. The contracts are expected to start this July.

#### Transportation Services Concept Paper

In advance of the forthcoming Transportation Services Program RFP, DFTA released a concept paper last month. Currently, DFTA sponsors individual transportation, which assists seniors in getting to and from places they need to go in their communities. DFTA also funds group transportation to enhance community engagement for older adults by offering recreational, social and educational trips. The concept paper highlights some of the defined and developing parameters, expectations and standards of the transportation services program funded by DFTA. It is our plan to test new transportation models that exploit technologies to broaden the scope and increase the efficiency of a very limited service. We will be accepting comments from interested parties until 5:00 pm on April 16, 2015. DFTA plans to take into consideration the feedback, suggestions and comments offered by the community when crafting the upcoming transportation services solicitation. We expect to issue the solicitation this summer for contracts to commence on July 1, 2016.

# CONCLUSION

Thank you for this opportunity to testify about DFTA's Preliminary Budget for FY '16. I look forward to continuing the partnership with the City Council in these efforts. I am pleased to answer any questions you may have.

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Selfhelp Community Services, Inc. 520 Eighth Avenue, 5th Floor New York, NY 10018 212-971-7600 www.selfhelp.net

Testimony from Selfhelp Community Services, Inc. New York City Council Committee on Aging March 23, 2015

Good morning.

My name is Tova Klein. I am the Assistant Vice President of Selfhelp Community Services' Senior Communities Programs.

As you may know, Selfhelp was founded in 1936 to help those fleeing Nazi Germany to maintain their independence and dignity as they struggled to forge new lives in America. Today, Selfhelp has grown into one of the largest and most respected not-for-profit human service agencies in the New York metropolitan area, with 26 sites throughout Manhattan, Brooklyn, Queens, the Bronx, and Nassau County. Selfhelp provides a broad set of important services to more than 20 thousand elderly, frail, and vulnerable New Yorkers each year, while remaining the largest provider of comprehensive services to Holocaust survivors in North America. Selfhelp offers a complete network of community-based home care, social service, and senior housing programs with the overarching goal of helping clients to live with dignity and avoid institutionalization.

Our services are extensive and include: Specialized programs for Holocaust Survivors · Seven affordable senior housing complexes; · Four Naturally Occurring Retirement Community (NORC) programs; · DFTA funded case management; · Five senior centers including one of New York City's first Innovative Senior Centers; · Home health care; · Client Centered Technology Programs including the City's first Virtual Senior Center; · Court-Appointed Guardianship; and · The Selfhelp Alzheimer's Resource Program (SHARP).





Thank you for giving me the opportunity to present this testimony.

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I would like to thank the Committee for its attention to and advocacy for our community's elders. I would also like to thank Commissioner Corrado for her tireless advocacy on behalf of the elders whom we are all charged with serving. This is especially important in light of the blatant lack of attention paid to elders in the Mayor's proposed budget. Elders are not even mentioned in the section of the plan that highlights vulnerable populations.

Last year, funding was added to case management programs allowing us to reduce caseload sizes to 65. While not an ideal number, this caseload reduction has enhanced the quality our work. Social workers are able to more appropriately interact with their clients. We can now contact clients on a monthly basis and also provide a more intensive level of service.

The problem is that there are over 2,000 elders on the waiting list for case management services. Selfhelp's Project Pilot has about 250 individuals who have called to ask us for assistance, but whom we don't have the capacity to serve. We urge you to advocate for funding to hire enough staff to meet the needs of these elders.

Speaking of hiring new staff, we urge you to advocate for appropriate funding to enable us to pay our social workers reasonable salaries. Staff turnover is a serious problem in the DFTA network and filling the open lines is an ongoing challenge which impacts our ability to serve our clients.

As the aging population grows, so too does the number of homebound elders who are at a high risk of depression. We urge you to advocate for funding to address the critical shortage of mental health providers who know how to work with elders, especially the homebound.

Social isolation is one of the most serious issues affecting the elders of our community. Selfhelp's Virtual Senior Center is one program which has been proven to effectively and profoundly impact this problem. We believe that this promising intervention, if expanded, could change the lives of those of are afforded the opportunity to participate in it.

This is the season when we all hound our friends at the City Council for funding for the next fiscal year. It's an arduous process for us and must be a grueling one for you. The sad reality is that without this discretionary funding, our programs would not be complete. These funds pay for basic staff and OTPS, without which we couldn't do what we do. So, once again, let me thank you for what you've done in the past and urge you to continue doing so in the future.

The elders of our community are very fortunate to be living at a time when the New York City Council is advocating so strongly on their behalf. We stand with them in thanking you and encourage you to continue doing so. And please let us know if there is anything we can do to help you in this process.

Thank you.



# CITY COUNCIL FY16 AGING COMMITTEE BUDGET HEARING COUNCILWOMAN MARGARET CHIN, CHAIR MARCH 23, 2015

LiveOn NY (formerly Council of Senior Centers and Services) is dedicated to making New York a better place to age. Founded in 1979, with a membership base of more than 100 organizations ranging from individual community-based centers to large multi-service organizations, LiveOn NY is recognized as a leader in aging. LiveOn NY's membership is comprised of organizations providing an array of services including NORCs, muti-service senior centers, congregate and home-delivered meals, elder abuse, affordable senior housing, case management, NORCs and other services intended to support older New Yorkers in the community. LiveOn NY connects resources, advocates for positive change, and builds, supports and fosters innovation. Our goal is to help all New Yorkers age with confidence, grace and vitality.

LiveOn NY appreciates the opportunity to testify today. Please see our FY16 attached budget priorities totaling \$33.7 million for Department for the Aging funded services. Each of the programs included is a critical piece of the continuum of services needed to allow older adults to remain in their homes and communities and support family caregivers.

LiveOn NY is grateful for City Council's allocation of additional funding last year including elder abuse, NORCs, adult day services, 6<sup>th</sup> congregate meals, senior center rent and transportation. The de Blasio administration's FY16 preliminary budget baselined case management and meal reimbursement, but not the other funding. Therefore, our budget priorities include restoration of these funds plus additional funding.

# The \$33.7 million budget priorities for FY16 reflect community supports for all older New Yorkers addressing:

- ✓ Senior nutrition/anti-hunger programs
- ✓ Affordable senior housing supports
- ✓ Economic security access to benefits
- 🗸 Elder abuse
- ✓ Social isolation
- ✓ Supporting family caregivers
- ✓ Culturally competent neighborhood based services

# FY16 budget priorities:

- Case management \$3 million According to DFTA, there are 1900 homebound seniors on waiting lists, up from 1800 last year. Average caseloads are 65 which is lower than last year's average of around 80. *We've included a breakdown of waiting lists by city council districts.* Additional funding did help, but the need keeps growing rapidly as the 85+ population is the fastest growing segment of the city's population.
- ✓ Per meal reimbursement \$3.3 million adds 25 cents per meal
- ✓ Increase meals-on-wheels capacity \$1.8 million According to DFTA, the meals-on-wheels system is at 100% utilization. This could result in waiting lists developing for the first time in many years. This funding would increase capacity by 230,000 meals or 5%.
- ✓ 6<sup>th</sup> weekend congregate meal -\_\$500,000 LiveOn NY thanks City Council for bringing this important meal program back. We would like the funding to be restored.



aking New York a better place to age

- ✓ **NORCs \$4 million** Thank you for funding NORCs at \$2.5 million. This funding should be restored with an additional \$1.5 million for NORCs in NYCHA developments.
- Elder Abuse Victims Assistance \$1 million Last year, both City Council and the administration recognized the hidden crisis of elder abuse by allocating new funding. DFTA received \$2 million dollars added to the existing \$800,000 they had and released a \$2.8 million rfp. The additional \$1 million funded by City Council allowed for flexibility and pilot projects to bring in more services providers who are able to reach diverse, immigrant communities. We ask that the \$1 million be restored.
- Adult day services \$2.3 million City Council added \$600,000 to adult day services. These funds need to be restored with an additional \$1.9 million to bring adult day back to its original funding level. Affordable and sufficient availability of adult day is key to caregivers receiving respite from the stress of caregiving. Access to affordable elder care is the workforce issue of the 21<sup>st</sup> century, especially for women.
- ✓ Senior center rent \$800,000 Please continue the funding.
- ✓ Transportation \$500,000 We are asking for \$2 million to bring transportation funding up to the original \$4 million level.
- ✓ Innovative Senior Centers (ISCs) in immigrant communities \$2 million There are currently 16 funded ISCs citywide serving a variety of communities. About 25% of them operate in communities with predominantly immigrant populations. The remaining ISCs do serve immigrants, but not predominantly. The original ISC proposal developed by LiveOn NY included targeting underserved populations such as immigrants.
- Caregiver supports and respite \$3 million For well over a decade, funding for caregiver supports and respite has been stagnant at \$4 million in NYC. All of these funds are through the federal Older Americans Act. It is time for the city to support family caregivers who are frequently stretch financially and emotionally as their caregiving responsibilities intensify. Access to affordable elder care is the workforce issue of the 21<sup>st</sup> century, especially for women.
- ✓ ESL/Citizenship Classes at senior centers \$1 million Re-establish the ESL/Citizenship program eliminated in 2003. Learning English allows elderly immigrants to engage in their local community and receive services. It brings them out of isolation and into a peer community. This could also include cultural competency training.
- Social workers in senior centers and Section 202/affordable senior buildings \$9 million Developing broad access to social work services will help older adults receive benefits, address grief and counseling issues, crisis intervention and other concerns in a culturally competent way. MSW trained
- level of compensation is necessary. \$8 million would cover half of all the senior centers plus \$1 million for senior building service coordinators. An evaluation would be included to document the cost savings to the city that senior housing with services would bring.

LiveOn NY looks forward to working with City Council and the administration to ensure that older New Yorkers can remain in their homes and communities through a network of support services designed to meet the needs of a diverse and rapidly growing older adult population. Please contact Bobbie Sackman, Director of Public Policy, 212-398-6565 x226, <u>bsackman@liveon-ny.org</u> or Andrea Cianfrani, Deputy Director of Public Policy, x233, <u>acianfrani@liveon-ny.org</u> for further information.



# AGE EQUALITY BUDGET: INVESTING IN COMMUNITY-BASED AGING SERVICES IS AN INVESTMENT IN NYC'S DIVERSE ELDERLY COMMUNITIES FY15-16 BUDGET PRIORITIES

#### March 9, 2015

Community-based aging services funded through the Department for the Aging have been on the front lines of serving elderly immigrants and the diverse population of older New Yorkers for many years. Current resources do not allow senior services staff to connect with the broad array and ever changing immigrant groups and other diverse populations. The \$33.7 million budget priorities for FY16 reflect community supports for all older New Yorkers addressing:

- ✓ Senior nutrition/anti-hunger programs
- ✓ Affordable senior housing supports
- ✓ Economic security access to benefits
- ✓ Elder abuse
- ✓ Social isolation
- ✓ Supporting family caregivers
- Culturally competent neighborhood based services

SERVICES	FY15 Adopted Budget	Mayor's FY16 Preliminary Budget released February 2015	LiveOn NY FY16 Budget Priorities**
Case management	\$2.6 million*	\$2.6 million*	\$3.0 million
Per meal reimbursement	\$3.3 million*	\$3.3 million*	\$3.3 million
HMDL utilization capacity	\$0	\$0	\$1.8 million
NORCs	\$2.5 million	\$0	\$4.0 million
Elder Abuse Victims Assistance	\$1.0 million	\$0	\$1.0 million
Adult Day Services	\$600,000	\$0	\$2.3 million
Senior Center rent (space)	\$800,000	\$0	\$800,000
Transportation	\$500,000	\$0	\$2.0 million
6 <sup>th</sup> weekend congregate meal	\$500,000	\$0	\$500,000
Innovative Senior Centers – immigrant communities	\$0	\$0	\$2.0 million
ESL/Citizenship classes/cultural competency training in senior centers	\$0	\$0	\$1.0 million
Social workers in senior centers & senior buildings (service coordinator)	\$0	\$0	\$9.0 million
Caregiver supports	\$0	\$0	\$3.0 million
TOTAL	\$11.8 million	\$5.9 million	\$33.7 million

\*Baselined

\*\* Includes last year's (FY 15) funding plus new funding increases to address the unmet need for aging services



# **Brief Explanation of terms:**

<u>Fiscal Year (FY)</u>: This is the calendar city government uses when allocating funding for city programs. It is different than the calendar year. The fiscal year runs as follows:

- Fiscal Year 2015 (FY15) runs from July 1, 2014 through June 30, 2015.
- Fiscal Year 2016 (FY16) runs from July 1, 2015 through June 30, 2016.

Presently, LiveOn NY is advocating for funds for FY 16 which begins on July 1, 2015 and runs through June 30, 2016.

<u>FY15 Adopted Budget:</u> This is the amount that was included in the budget adopted in June 2014 to fund the Department for the Aging (DFTA) for fiscal year (FY15) which runs from July 1, 2014 through June 30, 2015.

<u>Mayor's FY16 Preliminary Budget</u>: Mayor de Blasio released his FY16 Preliminary Budget in February 2015 which shows how much the city Administration is allocating for the DFTA programs for FY16.

<u>LiveOn NY FY16 Budget Priorities:</u> This is the amount, \$33.7 million, that LiveOn NY is requesting that the Administration and City Council provide for DFTA to fund aging services for FY16. This Includes last year's (FY 15) funding that wasn't baselined PLUS new funding for vital programs to address the city's expanding need for aging services.



# FY16 BUDGET PRIORITIES - \$33.7 MILLION -

**Case Management - \$3 million –** FY15 funding, \$2.6 million baselined, was intended to bring caseload size down to an average of 65. Additional funding is needed to ensure that caseloads don't go higher than 65. Funding is also needed to serve frail, homebound seniors on waiting lists so that a social worker is available to visit them at home, assess their needs and provide ongoing services. MSW compensation level needs to be funded to ensure there is a professionally trained social worker who can work with immigrant and diverse populations and complex situations. Funding should allow agencies to hire supervisors, who both oversee hundreds of cases and carry a partial caseload. Funding growing need and agency infrastructure are cornerstones to strengthening the case management system citywide. **FY15 baselined: \$8.1 million** 

#### FY16 additional City request: \$ 3.0 million

**Per meal reimbursement – \$3.3 million** – Additional funding would bring the meal reimbursement rate closer to the goal of \$3.35 per meal to provide healthy meals that are compliant with the City food standards. Currently, reimbursement is \$2.45 per meal for kosher and non-kosher congregate meals and non-kosher home-delivered meals and \$2.70 for kosher home-delivered meals. In order to provide a variety of meals to meet the needs of an increasingly immigrant and diverse older adult population, additional funding is necessary. \$3.3 million would add 25 cents more per meal plus additional funds for kosher home-delivered meals.

# FY15 baselined: \$3.3 million FY16 additional City request: \$3.3 million

**Increase meals-on-wheels capacity - \$1.8 million** – The current home-delivered meals program (HMDL) is at 100% utilization. In order to prevent waiting lists for home-delivered meals for frail, homebound seniors, \$1.8 million is needed to citywide capacity by 5% or 230,000 meals annually.

#### FY16 additional City request – \$1.8 million

**NORCS - \$4 million -** City Council added \$2.5 million for NORCs to fund NORC programs that weren't able to apply for DFTA's RFP plus some additional neighborhood NORCs. The request is for \$1 million of these NORC funds to be baselined. The additional FY16 request for \$1.5 million would be to target NYCHA developments with a substantial number of seniors living in large apartments. About 26,000 seniors living in NYCHA, are in large apartments. NORCs could play a supportive role in assisting seniors to possibly move to smaller apartments and to meet other needs. Funding should be baselined.

#### FY15 additional funding: \$2.5 million

FY16 request: Baseline \$1 million of City Council funds and an additional City request for \$1.5 million for NYCHA NORCs.



**Elder Abuse Victims Assistance - \$1.0 million -** A NY state study reported that about 9%, or 120,000 older adults in NYC experience physical, emotional, sexual or financial elder abuse that goes unreported. The most common form is financial abuse/exploitation. City Council allocated \$1 million last year to organizations that provide elder abuse services. These funds also included a pilot program to four organizations that work with domestic violence in immigrant communities. This funding should be renewed to allow these services and the new pilot to continue. Through the DFTA RFP, the administration added \$2 million for elder abuse victims assistance. The RFP has recently been awarded to four community based organizations with extensive experience in elder abuse services.

#### FY15 additional funding: \$1 million by City Council

FY 16 baselined: \$2 million added in via the DFTA elder abuse rfp, total funding – \$2.8 million FY16 request: \$1 million restoration funded by City Council

Adult Day Services - \$2.3 million – Social adult day care provides a supportive environment for older adults with Alzheimer's/dementia or physical disabilities. Adult day provides much needed respite and support for family caregivers, many of whom work. Original funding was at \$2.3 million. City Council allocated \$600,000, not baselined, for FY15. \$2.3 million would allow social adult day care to come back to its original funding level and meet growing need.

#### FY15 additional funding: \$600,000

FY16 request: \$2.3 million includes restoration of \$600,000 funded by City Council

**6<sup>th</sup> weekend congregate meal - \$500,000** – City Council funding reinstated this program which was eliminated. Senior centers across the city have opted in to provide an additional takeaway meal on Fridays. Funding should be baselined.

#### FY15 funding: \$500,000

#### FY16 request: \$500,000 restoration by City Council

Senior center rent (space) - \$800,000 – This funding is for senior centers paying more than 20% of their budget in rent. In FY14, DFTA shared that \$3.8 million was needed. \$1.5 million was baselined in FY15. Request to baselined additional \$800,000.

#### FY15 additional funding: \$800,000

FY16 request: Restoration of City Council funding of \$800,000

**Transportation - \$2 million –** \$500,000 funded in FY15. Operating costs of vans (insurance, maintenance, drivers, parking) – Funding to support vans operated by senior centers, homedelivered meal programs, NORCs , adult day and other aging services organizations. Vans bring seniors to these programs, take them food shopping, to medical appointments, on cultural/recreational trips and other purposes. Original funding was \$4 million. Funding should be baselined.

#### FY15 additional funding: \$500,000

FY16 request: \$2 million including the \$500,000 funded by City Council



## **BUILDING THE COMMUNITY-BASED AGING SERVICES NETWORK:**

**Innovative Senior Centers in Immigrant Communities - \$2 million** – Innovative Senior Centers (ISCs) have provided groundbreaking opportunities to older adults citywide. ISC funding allowed the first LGBT senior center and senior center for blind/visually impaired seniors in the nation to open. Expanding the ISCs to immigrant communities would be a win-win in those communities experiencing a growing number of seniors attending the local senior centers. The original ISC concept included targeting immigrant communities. Many elderly immigrants are coming to this country later in life. They bring with them poorer health, social isolation, and other needs to participate in their community with vitality and confidence. Funding existing senior centers at the ISC level would bring in the additional resources necessary to improve the health, fitness, nutrition and other needs of thousands of elderly immigrants. To date, there are 16 ISCs running successful programs. About 25% of them operate in communities with heavy immigrant populations. The remainder serve immigrants, but not ones that are predominantly immigrants.

#### FY16 request: \$2 million for ISCs in immigrant communities

**Caregiver supports and respite - \$3 million** – Establish city funding to support caregivers. Access to affordable elder care is the workforce issue, especially for women, of the 21<sup>st</sup> century. Caregivers statewide provide \$32 billion of free care to loved ones. Workplace flexibility and caregiver supports go hand in hand. We need to end "secret caregiving" where thousands of women have to juggle work and caregiving responsibilities. Caregivers often don't inform their employers of their caregiving responsibilities or all the details of their caregiving for fear of losing a promotion or a job. Providing supportive services for the caregiver herself is key to her wellbeing and of the care recipient. This includes respite care, home care or a temporary placement, to allow the caregiver to take care of things in their lives and give them a much needed break. Funding should be baselined.

#### FY16 request: \$3 million

ESL/Citizenship Classes at senior centers - \$1 million – ESL/citizenship funding was eliminated in 2003, depriving almost 2000 seniors in 38 senior centers from benefiting from ESL/Citizenship classes at their senior center. Given the rapid growth in elderly immigrants since 2003, it is time to bring back this funding stream and expand it across the city. Learning English allows elderly immigrants to engage in their local community and receive services. It brings them out of isolation and into a peer community. This could also include cultural competency training at senior centers. Funding should be baselined.

# FY16 request: \$1 million

Social workers in senior centers and Section 202/affordable senior buildings - \$9 million – Senior centers and senior buildings are on the frontlines of serving thousands of elderly immigrants and other diverse populations citywide. Developing broad access to social work services will help older adults receive benefits, address grief and counseling issues, social isolation, crisis intervention and other issues that is culturally competent. MSW compensation level needs to be funded to ensure there is a professionally trained social worker who can work



with immigrant and diverse populations. \$8 million could fund half of the neighborhood senior centers, 115, at \$70,000 a position (salary, fringes, administrative costs)

\$1 million would fund social workers/service coordinators in Section 202 buildings/affordable senior buildings to pilot the efficacy of having service coordinators. An evaluation would be included to document the cost savings to the city that senior housing with services would bring. In order to hire and retain social workers, these funds must be baselined. **FY16 request: \$9 million** 

For further information, please contact Bobbie Sackman, Director of Public Policy, (212) 398-6565 x226 or <u>bsackman@liveon-ny.org</u> or Andrea Cianfrani, Deputy Director of Public Policy, x233 or <u>acianfrani@liveon-ny.org</u>

> THE POWER OF AGING! CHAMPIONING ELDER RIGHTS!



IMPACT OF INADEQUATE CASE MANAGEMENT FUNDING: Caseloads average a social worker for every 65 frail, homebound elderly clients. Some caseloads are 65+ with a shocking 1902 on waiting lists. Waiting lists have increased by over 100 since May 2014. Average age of elders is 85+ with income averaging \$15,000-\$20,000. We are requesting \$3.3 million of new funding. Funding is used for social workers who need to be hired in a timely way at the beginning of the fiscal year or to retain case managers throughout the year. Funding to employ MSW trained social workers to decrease caseloads capped at 60-65 and waiting lists is needed.

Council Member (s)	Agency	Average Active Caseload Feb. 2015	Waiting Lists Feb. 2015
Gentile, Treyger	Benson Ridge Senior Services	52	125
Cumbo, Levin, Menchaca, Lander, Cornegy, Mealy, Eugene, Williams,	Heights and Hills	64	197
Levine, Rodriguez, Dickens	Isabella	66	56
Palma, Arroyo, Vacca, King	JASA Bronx	59	1
Richards, Ulrich	JASA RCM	66	0
Duetsch, Treyger	JASA Sheepshead Bay	66	0
Duetsch, Treyger	JASA South Brooklyn	64	0
Greenfield, Deutsch, Williams, Eugene, Maisel	JASA Storefront	67	0
Matteo, Ignizio	JCC of Staten Island	64	128
Kallos, Mark-Viverito, Garodnick Mark-Viverito, Arroyo, Torres, Gibson,	Lenox Hill Neighborhood House	69	258
Cabrera,	Neighborhood SHOPP	66	101
Chin, Mendez, Johnson, Kallos, Garodnick, Rosenthal,	New York Foundation for Senior Citizens	62	287
Koslowitz, Ferreras	Queens Community House	71	45
Cohen, Cabrera, Torres, Rodriguez, King, Vacca	R.A.I.N.	66	102
Levin, Reynoso, Cornegy, Mealy, Cumbo, Espinal	Ridgewood Bushwick Senior Citizens Council	63	0
Johnson, Rosenthal, Levine	Selfhelp Project Pilot	65	237
Vallone, Koo	Selfhelp Queens North	60	29
Lancman, Weprin, Miller	SNAP	56	88
Ulrich, Miller	Southwest Queens Senior Services	66	138
Barron, Espinal, Mealy, Cornegy, Maisel, Deutsch	Special Services	67	1
Constantinides, Dromm, Van Bramer, Crowley	Sunnyside	65	70
Rose	Volunteers of America	69	80
	Totals	65	1972

Findings as of 2/28/15

For more information, please contact Bobbie Sackman 212- 398-6565 x226 or <u>bsackman@liveon-ny.org</u> or Andrea Cianfrani at 212-398-6565x233 or <u>acianfrani@liveon-ny.org</u>



# CITY COUNCIL FY16 AGING COMMITTEE BUDGET HEARING COUNCILWOMAN MARGARET CHIN, CHAIR MARCH 23, 2015

My name is Andrea Vinet. I appreciate the opportunity to testify on behalf of LiveOn NY today. *I am proud to be a LiveOn NY Senior Activator. LiveOn NY has trained me and other older adults to advocate on behalf of community- based aging services. We understand well the meaning of unmet needs and baselining funds.* It is clear that while our numbers are growing rapidly, funding is way behind leaving waiting lists, insufficient funding for existing programs, and lack of funding for additional services needed. We appreciate City Council's historic support of senior services. The time to adequately fund aging services is long overdue as you well know.

LiveOn NY (formerly Council of Senior Centers and Services) is dedicated to making New York a better place to age. Founded in 1979, with a membership base of more than 100 organizations ranging from individual community-based centers to large multi-service organizations, LiveOn NY is recognized as a leader in aging. LiveOn NY's membership is comprised of organizations providing an array of services including NORCs, multi-service senior centers, congregate and home-delivered meals, elder abuse, affordable senior housing, case management, and other services intended to support older New Yorkers in the community. LiveOn NY connects resources, advocates for positive change, and builds, supports and fosters innovation. Our goal is to help all New Yorkers age with confidence, grace and vitality.

As an advocate, retired nurse and former caregiver for my mother, I would like to address two issues on LiveOn NY's budget priorities – the importance of access to nutritionous, affordable food and support for family caregivers.

**1. Per meal reimbursement – \$3.3 million** – Access to nutritionous, affordable food is key to both preventing and treating hypertension, diabetes, heart condition and other illnesses of aging. Additional funding would bring the meal reimbursement rate closer to the goal of \$3.35 per meal to provide healthy meals that are compliant with the City's own nutrition standards. Currently, reimbursement is \$2.45 per meal for kosher and non-kosher congregate meals and non-kosher home-delivered meals and \$2.70 for kosher home-delivered

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meals. In order to provide a variety of meals to meet the needs of an increasingly immigrant and diverse older adult population, additional funding is necessary. \$3.3 million would add 25 cents more per meal plus additional funds for kosher home-delivered meals.

**2. Increase meals-on-wheels capacity - \$1.8 million** – The current homedelivered meals program (HMDL) is at 100% utilization. There have not been waiting lists for meals-on-wheels in many years. Surely, City Council and the administration do not want to allow waiting lists to start again. According to the Department for the Aging, in order to prevent waiting lists for home-delivered meals for frail, homebound seniors, \$1.8 million is needed to increase citywide capacity by 5% or 230,000 meals annually.

**3. 6**<sup>th</sup> **weekend congregate meal -\_\$500,000** – LiveOn NY thanks City Council for bringing this important meal program back. Dozens of senior centers citywide have opted to utilize this additional funding to provide one takeaway meal from the senior center. We would like the funding to be restored.

**4. Caregiver supports and respite - \$3 million –** In NY state, family members. taking care of elderly parents, spouses/partners and others provide \$32 billion of free care to the state. But they need help. *Access to affordable elder care and caregiver supportive services are the workforce issues of the 21<sup>st</sup> century, particularly for women. Studies report that women lose over \$600,000 in compensation over their career due to loss of salary, lack of job promotion, changing to part time work or leaving the workforce due to caregiving responsibilities in addition to lower Social Security, pension payments and out of pocket costs for caregiving. \$3 million would provide services to the caregiver such as information about services, counseling and support groups, and respite care – getting a break to work or do other things. Respite includes home care, adult day care and facilities where their loved one can stay overnight, if necessary.* 

Thank you for the opportunity to testify today. LiveOn NY and the Senior Activators look forward to working with City Council to ensure that there is sufficient funding for older New Yorkers and their family caregivers.



# Chinatown Neighborhood NORC 7 Mott Street New York, NY 10013

## Testimony for the City Council Aging Committee Budget Hearing March 23, 2015 Presented by Hing Lin Sit, LCSW Director, Chinatown NNORC Visiting Nurse of New York

I would like to thank the members of the NYC City Council and Margaret Chin, Aging Committee Chair, for providing me with an opportunity to speak to members of the Aging Budget Committee on behalf of the NYC NORCs and NNORC Programs. More specifically, I would like to focus on three significant areas;

- Funding of current NYC Neighborhood NORC programs and expansion of this important program
- The importance of having NORC and NNORC allocated funds that originated from the City Council, base-lined into the Department for the Aging's (DFTA) NORC Supportive Service Program
- The allocation of adequate funds to support nursing services at all NORCs.

These actions will insure the long term health and viability of these programs and their ability to support the senior residents they serve.

Since 2006, The Visiting Nurse Service of NY has been the lead agency for a Neighborhood NORC in the Manhattan Chinatown Community, funded in part by the NYS Office for the Aging (NYSOFA) and several foundations and most recently by the NYC City Council for the fiscal year 2014-2015. Our NORC provides services for more than 1000 residents with a very small operating budget.

Our base funding, from the NYS Office for the Aging (NYSOFA) in 2006 was \$143,000. Since our initial funding, the state has periodically reduced our funding due to State budget reductions. We now receive \$20,000 less than our initial grant. Needless to say, costs have increased over the years and the need for services has increased as the program has gained the trust of community residents. In addition, NYSOFA has added additional staffing requirements for NORC nursing which have stretched our budget. The value of a half time nurse is close to \$80,000. In the early years of the program, health organizations were able to provide nursing in kind. However, due to changes in the health care system and increased financial constraints, this in kind support is no longer available. The interdisciplinary approach (social service and nursing working collaboratively on resident health, wellness and needs) is critical to successful community living.



While we are always seeking foundation support, these funds are time limited, nonrenewable and restricted to specific activities. Without the recent funding support by the City Council, our program would be in a \$200,000 deficit. In addition, we would be forced to reduce the services provided to this low income immigrant community that depends upon our program for assistance and connection to health and social services.

We believe that there is great need in our immigrant community. There are 2000 seniors that reside in our NNORC footprint in Chinatown; we have touched more than 1000. We strive to reach all senior residents. However, our staff is stretched as they try to manage these needs.

Our NNORC has provided our members with great stability; NNORCs need financial stability in order to be viable. In addition, there are many other communities throughout our city that can benefit from NNORC programs. Since the projections indicate a 40% rise in the older adult population in New York City by 2040, these communities are already experiencing a growth in need. As part of a coordinated approach to aging in NYC, NNORC services can best address this need.

In summary, we urge the City Council to consider base-line funding of Neighborhood NORCs, expansion of NORC/NNORC programs to other communities and financial support of critical nursing services provided by the NORCs.

Thank you for your time and attention!

Respectfully submitted by Hing Lin Sit

I am virtually housebound. Due to the service of NORC, it has enabled me to remain in my home.

One of the service that NORC offers, that they have a nurse once a week. It used to be twice a week but recently has been cut in half. With a nurse available, I am able not to have make as many trips to my primary doctor. The nurse will monitor my blood pressure and I notify my doctor. In addition, I have other medical conditions and the nurse has been very helpful.

When we had a nurse twice a week, not only could I be monitored twice a week but the nurse was a able to do multi session workshops. For example, I participated in the workshops for heart care and diabetes. These sessions were not only educational but showed us how to maintain our health.

NORC also has many programs. For example, approximately once a month, there is a programs on brain health which includes exercises. Once a week there is a balance class to learn how to maintain your balance and fall prevention. There is not enough time to list all the classes offered.

Because I am homebound, getting fresh food is difficult. NORC had a program that had teen ages who would call every day. They would get my medicines and pick up such items as fresh fruit and diary. Sadly, this was defunded

NORC also has a housekeeper who helps us. She will help you clean the house, do laundry and the service is free unless you wish to give a donation.

Finally, NORC is a warm, friendly and knows their clients. One day I was unable to reach a neighbor

all day. The next morning I notified NORC. Since NORC knew this person, they immediately understood that there was something wrong. If I had called the police, they would have knocked on the door, received no answer and left. So I went to NORC and they responded. After verifying that she was not in the hospitals, NORC went management and they broke down her door and found her semi conscious on the floor.

NORC is a vital support to the seniors in my develop. Their service are invaluable to senior and helps keep them safe, healthy and active. I has had a profound affect on my life.

Bonnie Sue Pokorny March 23, 2015



**AARP New York** 

Testimony of Leo Asen, AARP NY State President, NYC Council Committee on Aging

FY16 Preliminary Budget Hearing February 4, 2015

> City Hall New York, New York

Contact: Chris Widelo (212) 407-3737 | cwidelo@aarp.org

#### INTRODUCTION

Good Morning Chairwoman Chin and members of the Aging Committee, my name is Leo Asen and I am the State President of AARP New York. On behalf of our State Director, Beth Finkel, and our nearly 750,000 members age 50 and older in New York City, I want to thank you for the opportunity to talk about some important provisions in the Mayor's FY16 preliminary budget.

#### **Elder Abuse Victims Assistance**

Every year, abuse and exploitation rob older Americans of \$3 billion — and this is only the amount reported. When criminals take advantage of older persons by forging a signature or coercing them to sign a will, the impact goes far beyond the pocketbook and affects the physical and emotional health of the victim.

For the 42 million family caregivers across the nation who provide a great labor of love by helping their parents and spouses live independently at home, the threat of elder abuse is daunting. While some family caregivers provide 24/7 care — assisting with finances, transportation, medication management and more — others may count on the support of paid aides to help. Entrusting the care of a loved one to a stranger can be hard enough; imagine the nightmare if that person is a criminal. In New York City, it is reported that 120,000 older adults experience some form of abuse that goes unreported and the most common form is financial abuse and exploitation.

In addition to the \$2.8 million in FY 16 baseline funding proposed in the preliminary budget, we hope the City Council, as they did in 2015, will allocate an additional \$1 million for organizations that provide elder abuse services.

#### Adult Day Services

Family caregivers provide an invaluable resource in caring for their loved ones at home – many on call 24 hours a day, seven days a week. This labor of love is worth more than

\$450 billion in unpaid care each year. Thanks to family caregivers' commitment, millions of older people are able to live at home rather than in costly institutions, like nursing homes. While family caregivers wouldn't have it any other way, it's a big job – and once in a while, they need a break. That's why respite care programs are so important.

Social adult day care is one such program that provides a supportive environment for older adults with Alzheimer's/dementia or physical disabilities. It gives that much needed break to family caregivers. Many of these family caregivers are working and raising families of their own.

Over the summer of 2013, AARP New York, the Council of Senior Centers and Services of New York City, Inc., and the NYS Caregiving and Respite Coalition, along with several other organizations concerned with the wellbeing of frail New Yorkers and their informal caregivers, convened a series of 14 listening sessions across New York State to hear directly from caregivers as well as service providers. It was very apparent from these listening sessions that caregivers are in desperate need of respite services to continue helping frail seniors age in place but are not receiving these services.

In FY 15, the City Council allocated \$600,000 for adult day services. This allocation was not base lined. AARP supports the request for \$2.3 million in FY 16 budget. Not only would this restore the \$600,000 of funding from FY 15, but would also meet the growing need in our city.

#### **Caregiver Support and Respite Care**

As stated earlier, family caregivers are a vital part of the caregiving continuum. Statewide, 4.1 million family caregivers provide over \$32 billion of unpaid care to their loved ones. AARP believes we must look for opportunities to support our family caregivers. As the Baby Boom Generation ages and the number of younger people proportionately decreases, more of us will need care, but there will be fewer family caregivers to provide it. Already, the number of caregivers in New York has grown to 32%, from 25% in the 1990s. A recent AARP report found that while there were 6.6 potential caregivers aged 45 to 64 for every person in the high-risk years of 80+ in New York in 2010, there will be just 4.8 in 2030, and only 3.5 in 2050.

Family caregivers in the city, as in the nation, tend to be working women. SOFA has identified the typical caregiver in New York as a 64-year-old woman who has either high school or some college education and spends more than 40 hours a week providing care to her mother. 85% of the care receivers are aged 75 or older and average 82.3 years of age. Of those with at least one health problem, Alzheimer's or another dementia was the most prevalent condition.

Lack of adequate support for caregivers can be costly not only to families and taxpayers, but to employers. A 2006 MetLife study found that nationally, businesses lose as much as \$33.6 billion annually in worker productivity because of employees' caregiving obligations.

In 2014, AARP surveyed NYC voters over the age of 50 on a number of topics including caregiving. Nearly half of 50-64 year old working voters are caregivers or have been a caregiver in the past five years. Among those working caregivers, two-thirds (66%) report "a good deal" to "overwhelming" levels of strain on their quality of life from caregiving responsibilities.

AARP believes it is important to establish city funding to support caregivers. Providing supportive services for family caregivers is essential to the wellbeing of the caregiver

and the person for whom care is provided. Supports include respite care, home care or a temporary placement, to allow the caregiver to take care of themselves.

AARP supports a request of \$3 million in the FY16 budget for caregiver supports and services. This funding should be base lined.

#### CONCLUSION

Chairwoman Chin and members of the Aging Committee, thank you for the opportunity to highlight a few of the many needs for NYC residents as they age. Given the demographic shift we cannot afford to delay programs and services that support NYC's older residents.



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Michael Adams Executive Director National Headquarters 305 Seventh Avenue, 15th Floor New York, NY 10001 T: 212-741-2247 F: 212-366-1947

sageusa.org Igbtagingcenter.org

#### Aging Committee, Budget Hearing

3/23/2015

Chairperson Chin and members of the New York City Council Committee on Aging, My name is Rev. Nor Thompson and I am here on behalf of SAGE – Services & Advocacy for Gay, Lesbian, Bisexual & Transgender Elders. I would like to thank you for holding this budget hearing on behalf of myself, and the LGBT older adults in New York City whom I represent today.

SAGE is the country's largest and oldest organization dedicated to improving the lives of LGBT older adults and has provided comprehensive social services and community-building programs for LGBT older adults in New York City for more than 30 years.

In June of 2014, the LGBT Caucus of the New York City Council generously provided SAGE with funding to do what we had dreamed of since our inception—to create LGBT Senior Centers in all of the boroughs of New York City, allowing older adults like myself to have access to safe, affirming programs and meals in our own communities. LGBT older adults live in every neighborhood of our city, and the City Council and the Department for the Aging has been partners with us, helping to envision and support innovative programming that will allow LGBT older adults to age in their own communities.

We know at SAGE that LGBT older adults are more likely to live alone, and to live without the caregiving support that adult children and other family members so often provide. The Senior Centers that have opened in the Bronx, Brooklyn, in Harlem and on Staten Island provide vital services such as access to LGBT health care, case management support, daily meals and legal and financial resources.

With the expansion of SAGE's sites into new communities SAGE is for the first time able to serve participants right where they live—personifying the idea of "aging in place." My center, SAGE Harlem primarily sees underserved LGBT elders of color from Central Harlem, West Harlem and East Harlem. SAGE believes that elders of color living in Harlem, Brooklyn and the Bronx deserve culturally and linguistically competent services in their home neighborhoods. Our programs are designed around our needs, and the needs of the community- focusing on issue areas such as financial literacy and security and health disparities that are prevalent in our community. Case Managers across all of SAGE's Centers work with older adults one-on-one with their housing and finance concerns by securing access to SCRIE (Senior Citizen Rent Increase Exemption), Medicaid, Medicare, home care services, Veteran's benefits, SNAP and Health Bucks at farmer's markets to

# Services & Advocacy for Gay, Lesbiat, Bisexual & Transgender Elders

#### **BOARD OF DIRECTORS**

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Washington, DC Kevin Williams New York City

Michael Adams Executive Director improve nutrition, and employment programs such as SCSEP.

Staff accompanies clients to housing court, provide referrals to housing programs, and secure legal services and financial aid with the help of community partners.

SAGE has always recognized the importance of partnership, and we are very grateful to the support we receive from our community partners. Our Brooklyn Center, the SAGE GRIOT Center is collaboration between SAGE and GRIOT Circle, who have worked for decades to support LGBT Elders of color, as well as the Staten Island Pride Center, who are our wonderful partner on Staten Island providing LGBT older adults with a welcoming and vibrant space in which to gather.

We hope that the Committee on Aging and all members of the City Council will continue to : support LGBT older adults across New York City and prioritize these funding areas in the next budget. On behalf of the LGBT older adults who rely on SAGE's Senior Centers, your support is greatly appreciated.

Thank you for this opportunity.

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#### New York City Council FY2016 Preliminary Budget Hearing Committee on Aging March 23, 2015 at 10:00am Council Chambers - City Hall

Thank you, Chair Chin and the Committee on Aging, for inviting us to speak today. My name is Eric Munson, and I am the Chief of Staff at Metropolitan Council on Jewish Poverty.

For more than four decades, Met Council has supported and championed seniors, families and adults living in poverty and near-poverty. Met Council provides immediate assistance to New Yorkers in crisis and creates pathways to self sufficiency both directly and through our grassroots Jewish Community Council network in clients' neighborhoods—right where they live. In the fight against poverty, we serve immigrants, seniors living on fixed incomes, the un- and underemployed, and all others in need. As an organization founded on Jewish values, we serve everyone with dignity and empathy, regardless of race, ethnicity or religion.

Support from New York City Council enables our case workers to assist poor and near-poor seniors across the five boroughs. In addition to individual member items for our Food, Social Services, and Metropair programs, Met Council is supported through the following City Council initiatives:

- ACES, or Access to Crisis and Emergency Services (\$600,000), which supports our Social Services Program
- Handyman Services (\$400,000), which supports Project Metropair, and
- DoVE (\$268,000), which supports our Family Violence program

We respectfully request that the Council sustains these funding streams for Met Council into FY16. As part of a coalition of Holocaust Survivor service providers, we have also requested that the Council establish a \$1.5 million Survivor Initiative for providers Citywide.

I want to take the remainder of my time to discuss some program expansions at Met Council over the past year. We are grateful that in FY14, with your support, every one of our anti-poverty programs expanded or fundamentally changed for the better. ſ

- <u>Social Services:</u> We created our first geriatric services manager position to streamline all our services offered to seniors. Susan Moritz makes the rounds to the JCCs and to our housing sites to ensure that case workers are providing the highest level of senior care.
- <u>Project Metropair</u>: We hired additional handymen to repair seniors' homes, enabling vulnerable New Yorkers to age safely in the homes that they love.
- <u>Holocaust Services</u>: We hired an additional dedicated Holocaust survivor social worker to support and advise a network of case workers across the City, so that they too can best serve the most vulnerable among us.
- <u>Kosher Food Network:</u> Thanks to a generous donor, our kosher food pantry system- the largest in America- now provides much needed kosher meat ahead of major Jewish holidays to increase nutrition and ensure a festive and dignified celebration.
- <u>Benefits Access</u>: We held four SCRIE (Senior Citizen Rent Increase Exemption) Enroll-a-Thons, where 75 seniors enrolled- and dozens more were educated about this essential City-sponsored program, which freezes eligible seniors' rent and in many cases helps them avoid eviction.
- <u>Family Violence</u>: Thanks to additional DoVE initiative funding from the New York City Council we hired a Russian-speaking Licensed Clinical Social Worker and a Spanish-speaking case worker for our Family Violence program, and increased staff time at the Manhattan and Queens Family Justice Centers.
- <u>Housing:</u> We completed construction of Council Towers VII in the Bronx, which will provide 78 units of affordable housing for very low-income seniors.

In conclusion, Met Council could not continue providing critical social services to thousands of needy senior New Yorkers each year without the vital partnership of New York City Council. We deeply value your leadership and partnership and look forward to working together to help the needy throughout the New York area.

Thank you. I would be happy to take any questions you have at this time.



# **Communities for Healthy Food NYC**

#### WEST HARLEM GROUP ASSISTANCE 1652 Amsterdam Avenue, New York, NY 10031 Phone: 212-862-1399 ext. 28 <u>dnotice@whgainc.org</u> <u>www.whgainc.org</u>

## West Harlem Group Assistance Submitted Testimony on Aging Budget for Fiscal Year 2016 Hearing of the New York City Council Committee on Aging

#### Submitted March 23, 2015

Thank you Chair Margaret Chin, and Aging Committee Members, for considering this testimony supporting Communities for Healthy Food's request for City Council Citywide Discretionary Funding in the amount of \$760,000. My name is Donald Notice, Executive Director for West Harlem Group Assistance Inc. known as WHGA. I am submitting this written testimony on behalf of Communities for Healthy Food and West Harlem Group Assistance.

Communities for Healthy Food (CfHF) NYC is a new, innovative approach to expand access to affordable, healthy food in four of New York City's economically challenged communities. This place-based initiative integrates access to healthy and affordable food into every aspect of our comprehensive community development work – through resident outreach, nutrition education and cooking classes, creating new or improved healthy food outlets and generating food-sector jobs. A comprehensive evaluation of CfHF is underway with the NYC Food Policy Center at Hunter College.

This new initiative, seeded by \$1.6 million from the Laurie M. Tisch Illumination Fund, addresses the interrelated issues of diet-related diseases, poverty, and unemployment to help residents live longer and healthier. CfHF taps LISC's value as an effective community development intermediary with strong neighborhood organization relationships, the ability to leverage capital and programmatic funds, and its track record as a facilitator, convener and technical assistance provider. CfHF builds on the existing work of LISC and its partners revitalizing struggling communities and improving overall quality of life.

#### **Program Partners**

- Cypress Hills LDC in Cypress Hills/East New York, Brooklyn.
- New Settlement Apartments in Mount Eden, Bronx.
- Northeast Brooklyn Housing Development Corporation in Bedford-Stuyvesant, Brooklyn.
- West Harlem Group Assistance in West Harlem.

These programs also reach some Queens neighborhoods.

These program partners are embedding healthy food strategies into community development work to:

- 1) Increase the availability of high quality, affordable, and nutritious foods;
- 2) Create new or improved healthy food outlets and venues;
- 3) Educate residents, housing staff, and community service providers about nutrition, healthy food preparation, and gardening;
- Enable economic development opportunities through creating or expanding food-related jobs, improving existing or creating new healthy food venues and fostering urban markets and food related enterprises; and
- 5) Implement a comprehensive neighborhood outreach and awareness campaign.

# West Harlem Group Assistance (WHGA) Accomplishments with an Impact on Seniors:

Here are examples of how WHGA' work with Communities for Healthy Food has affected seniors in West Harlem, the neighborhood where we build community:

- We have established a healthy food HUB in one of our formerly vacant commercial storefronts on Adam Clayton Powell Ave. In it we provide a range of healthy food and health-related resources used by everyone in the community including seniors:
  - o A weekly client choice food pantry;
  - Co-located key services and programs like nutrition and culinary education, tax preparation services, Corbin Hill farm share distribution site, grocery store tours sign-up and meeting place;
  - o SNAP (food stamp) referrals; and
  - o Health screenings.

I know I am preaching to the choir when I say that teaching nutrition and providing nutritious and healthy food is a key strategy for improving health for all people in the neighborhoods including seniors.

- We also do general intake at the healthy food HUB and just began the Food Bank's TEN Program. That program ensures wrap around services for those using the food pantry. For example, if a person is using the food pantry, we explore what other needs they might have including mental health or domestic violence services and help with other needs. Pantry clients are either referred to a partner agency or we do the work ourselves at WHGA. We serve seniors through this program.
- We are working on establishing a seniors only day at the client choice food pantry. We will coordinate with local senior centers and get the word out to other seniors in the neighborhood through our healthy food outreach worker.

#### 2014 Accomplishments for Communities for Healthy Food – 4 CDCs Combined:

- Provided more than 250,000 pounds of emergency food for close to 17,000 pantry clients.
- Started two new neighborhood farmers' markets and two farm share programs and created four new community produce gardens.
- Trained and employed 44 residents to become farm stand operators, farmers, and community chefs.
- Held CfHF program activities for close to 3,000 neighborhood residents. This includes: farm shares, youth programming, farmers market, gardening workshops and grocery store tours and cooking demonstrations.

- Hosted a variety of nutrition education and cooking classes for close to 500 neighborhood residents to increase: cooking skills to make healthy food on a limited budget; knowledge about what foods are healthier alternatives; and literacy skills to read nutrition labels.
- Equipped 500 neighborhood residents, CDC staff, and partner organizations with information about neighborhood healthy food resources and services and the importance of heathy eating, nutrition and gardening skills.
- Enrolled 600 families in public nutrition assistance programs, like the federal Supplemental Nutrition Assistance Program (SNAP), formally known as food stamps.
- Connected directly with close to 6,500 residents through neighborhood outreach campaigns to raise awareness of the importance of healthy eating, the availability of local healthy food resources, and help strengthen community networks.
- Converted four corner stores to healthy corner stores.

#### Impact of New City Council Funding

We respectfully request \$760,000 in City Council funding which would allow CfHF to expand and reach more low-income families and give individuals the tools they need to create healthier lives and build demand for healthy food, so that nonprofits, community-based organizations, city departments, and funders can partner with NYC businesses and investors to provide a better infrastructure for healthy food in underserved neighborhoods.

#### Impacts across the Four Boroughs

- Provide 275,000 pounds of emergency food for 19,600 pantry clients.
- Sell over 40,000 pounds of local produce to in need residents at farmer's markets and farm shares that CfHF started in collaboration with local nonprofits. Residents can use food stamps and NYC Health Bucks for purchases.
- Enable economic development opportunities by:
  - o Employing 34 local, neighborhood residents as farm stand operators, urban farmers, community gardeners, and community chefs; and
  - o Equipping 15 residents to incubate food businesses.
- Host a variety of nutrition education, cooking classes, and cooking demonstrations for 750
  neighborhood residents to increase: cooking skills to make healthy food on a limited budget;
  knowledge about what foods are healthier alternatives; and literacy skills to read nutrition labels.
- Equip over 300 neighborhood residents, CDC or partner organization staff with information about neighborhood healthy food resources and services, knowledge on the importance of heathy eating and nutrition, and gardening skills.
- Reach 2,500 community residents through a neighborhood outreach campaign designed to raise awareness of the importance of healthy eating, the availability of local healthy food resources, and help strengthen community networks.
- Support the conversion of 5 healthy food corner stores and their owners.
- Improve the nutrition and wellness environment at early childcare and school facilitates for 625 children.
- Enroll at least 450 families in public nutrition assistance programs, like the federal Supplemental Nutrition Assistance Program like (SNAP), formally known as food stamps.

#### About the Partners:

#### West Harlem Group Assistance (WHGA) - West Harlem

West Harlem Group Assistance, Inc. (WHGA), a community-based development corporation was established in 1971 to revitalize the under-invested West and Central Harlem communities riddled with dilapidated and abandoned buildings. Since 1971, WHGA has developed 1,037 units of affordable housing and owns 43,676 square feet of commercial space in West Harlem. WHGA owns and manages affordable housing and other commercial and community spaces; delivers an array of social and economic development programs and services; and has close ties to the neighborhood residents, allowing the organization to effectively infuse healthy food access programs and activities into their comprehensive community development work. In 2014, with the support of LISC NYC, WHGA redeveloped one of their vacant storefronts on Lenox Avenue now called the West Harlem Community Healthy Food Hub, serving as a portal to improve access to healthy food and advance educational prospects related to health and nutrition for seniors, youth, families, and adults.

#### Northeast Brooklyn Housing Development Corporation (NEBHDCo) - Bedford-Stuyvesant, Brooklyn

A leading affordable housing developer since 1985, NEBHDCo has developed and self-manages 929 residential units and 17 commercial units in 92 buildings in Central Brooklyn, and also provides tenant and community services. As one for four CDCs in LISC NYC's Communities for Healthy Food initiative, NEBHDCo owns and manages affordable housing and other commercial and community spaces; delivers an array of social and economic development programs and services; and has close ties to the neighborhood residents served, including seniors, youth, families, and adults. NEBHDCo also works with many local partners on a multi-faceted community healthy food access program, allowing them to effectively implement healthy food interventions into locally-owned assets through their comprehensive community development work.

#### Cypress Hills Local Development Corporation (CHLDC) - Cypress Hills, Brooklyn

With community residents leading the way, the mission of Cypress Hills Local Development Corporation is to build a strong, sustainable Cypress Hills and East New York, where residents achieve educational and economic success, secure healthy and affordable housing and develop leadership skills to transform their lives and community. We serve over 9,000 local residents each year, many of whom are immigrants. through affordable housing development, sustainability planning, housing counseling, community organizing, college access and persistence programs, career and education programs, and youth and family services. CHLDC is working with LISC NYC to increase access to healthy food for seniors, youth, families, and adults through comprehensive community development work. CHLDC owns and manages affordable housing and other commercial and community spaces; delivers an array of social and economic development programs and services; and has close ties to the neighborhood residents. CHLDC's strategic interventions, integrated into existing programming and locally-owned assets, are designed to strengthen the local food system and reconnect community members with all aspects of it - from garden to table, including hands-on workshops about growing food at community gardens; nutrition, health, and effective food budgeting educational sessions; expansion of Cypress Hills' youth market with onsite cooking workshops; and health screenings at a senior center, affordable housing buildings, and local schools. CHLDC is working with the Cypress Hills Child Care Corporation, serving approximately 500 children and their families, to increase healthy food options served at their early childhood facilities and engage parents in meal improvements. Lastly, Cypress Hills is working with local bodegas and restaurants to increase healthy offerings, and help increase community demand.

#### New Settlement Apartments (NSA) - Mount Eden, the Bronx

New Settlement Apartments is a community development organization based in the Mt. Eden community of the Southwest Bronx, with a 25-year demonstrated commitment to increasing preparedness and access

to high-quality public and post-secondary education, safe and affordable housing, fair and sustainable employment, and expanding opportunities for healthy and active living for youth, seniors, adults, and families. New Settlement has provided 1,022 affordable homes in 17 multi-family buildings and collaborates with community residents and develops partnerships to create services and opportunities that celebrate the inherent dignity and potential of individuals and families. NSA owns and manages affordable housing and other commercial and community spaces; delivers an array of social and economic development programs and services; and has close ties to the neighborhood residents allowing them to effectively implement healthy food access programs and activities into their comprehensive community development work. New Settlement Apartments and LISC NYC are partnering to reshape the neighborhood food landscape, with a focus on youth and families, by concurrently improving access to affordable healthy food and embedding interactive food education and nutrition promotion within New Settlement's programing and assets.

## Local Initiatives Support Corporation (LISC) – New York City

LISC NYC's mission is to help resident-focused, community-based development organizations transform distressed communities and neighborhoods into healthy places to live, do business, work, and raise families. Over the last 34 years, LISC New York has invested approximately \$2.3 billion in more than 75 New York City community development corporations and other local, nonprofit organizations. With our support, these organizations have developed over 34,600 affordable homes and more than 2.3 million sq. ft. of community and commercial space. For CfHF, LISC NYC is providing technical assistance and program management support; leveraging government and private funding; organizing trainings; creating cross-sector partnerships; completing a comprehensive program evaluation with the NYC Food Policy Center; and documenting the program model through neighborhood stories and media outlets.







NSA NEW SETTLEMENTAPARTMENTS





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Preliminary budget and oversight hearing for the Department for the Aging Aging Committee March 23, 2015

Testimony submitted by: Rachel Sherrow Associate Executive Director Citymeals-on-Wheels 355 Lexington Avenue, NYC 10017 (212) 687-1234 Rachel@citymeals.org

My name is Rachel Sherrow and I am the Associate Executive Director at Citymeals-on-Wheels. I would like to begin by thanking the Council for their continued support of aging services and Citymeals-on-Wheels which will help to deliver over 2 million meals to 18,000 homebound elderly citywide this year.

As most of you know, Citymeals-on-Wheels is a not-for-profit agency working in a public/private partnership with the New York City Department for the Aging. The Department funds the meals that homebound elderly receive Mondays through Fridays, and Citymeals-on-Wheels funds the same network of providers to deliver weekend and holiday meals. On the days the city does not provide a meal, Citymeals steps in to prevent our aging neighbors from being without food or human company. <u>In fact, Citymeals, as an</u> <u>added benefit generates revenue for New York City through the</u> <u>federal government's cash in lieu of commodities program which</u> reimburses DFTA approximately 67 cents for every meal funded by Citymeals. All of this money goes toward the city-funded weekday meals program, bringing in over \$1.3 million last fiscal year and an additional 191,000 home delivered meals for those who need it. Inhome services like meals on wheels are incredibly vital to those who are frail and vulnerable and often hidden behind their doors.

Throughout our nation and right here in NYC, our population is aging, with 17% of our city over the age of 60. By 2050, the number of older adults will double. Living longer means more struggle over access to food and daily activities of living. The poverty rate of New York City's elderly is almost twice the national average. Over 50% live below 150% of the poverty level. The average age of those who receive meals on wheels is 82 and 1.2% are over 100. 73% live alone, and the majority of them are women. New York City's younger and growing aged minority population is poorer and even less healthy. Food insecurity, or hunger among this needy population is at 16%.

The Nutrition Screening Initiative estimates that one in four senior citizens living in our communities is malnourished.<sup>1</sup> It has been estimated that up to 55% of seniors admitted to hospitals are suffering from malnutrition.<sup>2</sup> According to New York City Coalition Against Hunger's most recent hunger survey, there has been a 22% increase in food insecurity in the senior population.<sup>3</sup> To try to combat this issue of inequity, Citymeals developed a program that delivers supplemental food supplies to those who are most hungry and poor. Our Mobile Food Pantry program mirrors the pantry programs around the city except for the fact that our homebound elderly aren't able to access them or carry the bags of food home. This program began in 2011 in the South Bronx and has been replicated in Upper Manhattan, Central Brooklyn and parts of Queens and is currently serving 650 homebound meal recipients. Unfortunately although we know the need is greater, Citymeals is unable to expand the program without additional funding. Thus many are still without and remain hungry.

Thus Citymeals-on-Wheels is requesting a new initiative grant in the amount of \$1.5 million for the fiscal year ending June 30, 2016. \$1 million of this funding will be used to increase the meals on wheels rolls by nearly 1,000 homebound elderly city-wide as the system is currently at 100% capacity and we need to prepare for the growth in this graying population, and prevent wait lists for meals on wheels from starting.

We would use \$450,000 in order to increase our mobile food pantry program serving an additional 1,000 meals on wheels recipients throughout the city who are hungry and poor, while also helping them through the process of applying for benefits.

Most of our meal recipients are eligible for additional programs and benefits including SNAP, formerly known as food stamps. This should ideally help those having trouble making ends meet on a monthly basis. However for the older adult population, there are several barriers that remain such as; a lack of awareness about the benefits. the perception that the application process is complicated, the stigma associated with receiving entitlements, and simply not understanding what qualifies as being eligible. A larger impediment is their inability to go to a center or office to sign up for benefits. Because of this, only 1/3 of those found eligible within this population are receiving the help they need and deserve. Citymeals-on-Wheels together in a partnership with LiveOn NY (formerly CSCS), started an outreach program in Queens, which has expanded into Brooklyn, to assess and help enroll those homebound elderly who were fast tracked onto the meals on wheels program but have yet to get a full assessment from case management due to wait lists (currently at 1,900 city-wide). Since 2014, with only one social worker, we have been able to screen over 700 meal recipients, make over 250 home visits and have 103 already receiving benefits which are on average, \$107 per month. This will help lift some of the financial burdens these people have been coping, with and helps to bring much needed federal dollars into the state. We have recently expanded this program to include assessing for SCRIE, Medicare savings and in the winter will include LIHEAP.

\$50,000 of this request would go to funding the social worker to continue the benefits enrollment process for these essential benefits.

Citymeals-on-Wheels is the city's lifeline for food not only on weekends and holidays but also in times of emergency for homebound elderly. With our warehouse in Brooklyn we are able to prepare and maintain emergency shelf stable meal packages for any and all issues that arise locally and on a city-wide scale as was demonstrated with Superstorm Sandy and the most recent snowstorms we had. This winter alone between January and just two weeks ago, we delivered over 95,000 additional shelf stable meals to ensure our homebound meal recipients would have food on hand if their daily delivery was unable to get through because of the inclement weather.

Citymeals on Wheels together, with the Department for the Aging, and The New York City Council, are desperately trying to keep 18,000 elderly New Yorkers and growing, fed 365 days a year plus some extra. Bringing a meal to the door is one less struggle for the homebound to worry about financially. In addition, this food delivery is one way to prevent them from slipping into more expensive kinds of care. Evidence does support the fact that programs like meals on wheels which allows older adults to age in place, may help save costs for families, government and our health systems.<sup>4</sup> This is a savings in Medicaid costs that the city would bear if these economically disadvantaged and elderly neighbors of ours were institutionalized instead. It is in their interest and ours to keep them with us, right here in the communities where they have lived for so long.

We hope you, our partner in city government, will help us to continue to advocate on behalf of those who are often forgotten and marginalized.

As we move through our 33r<sup>d</sup> year, we thank you so much for working with us and I hope we can count on all of your support once again this year.

<sup>&</sup>lt;sup>1</sup> 2000 to 2010 Census, as reported in NYC Department for the Aging's "Census 2000: Changes in the elderly population of NYC 2000-2010. <sup>2</sup>lbid. <sup>3</sup> NYCCAH 2014 Hunger Report. <sup>4</sup>Measuring the costs and savings of aging in place. 2013. (Accessed December 3, 2014, at http://www. huduser.org/portal/periodicals/em/em\_archive.html.).

New York City Council and Aging Committee Hearing March 23, 2015, Monday at 10:00 a.m. City Hall Council Chambers

Good morning, I am Linda Hoffman, President of New York Foundation for Senior Citizens.

On behalf of the Board of Directors of New York Foundation for Senior Citizens, we are requesting and would be deeply appreciative of an allocation from each of your discretionary funds plus your support for the provision of a minimum of \$100,000 from the Speaker's city-wide fund to insure the continuation of our city-wide Home Sharing and Respite Care Program in the City's fiscal year 2015-2016 budget.

Respite care provides affordable, short-term, in-home attendant care at the low cost of \$8.75 per hour, for frail elderly who are attempting to manage at home with the help of others, thereby, preventing the need for their premature institutionalization. The program's respite care service also provides free temporary in-home care for caregivers of the frail elderly who experience a sudden inability to provide care on weekdays after 5 p.m., weekends, holidays and in emergencies. Priority for this service is given to caregivers who are providing assistance to frail elderly with annual incomes of \$40,000 or less. During the past two decades, we have provided over 6,782 frail elderly and many more thousands of their caregivers with respite care services.

Our free home sharing service matches adult "hosts", who have extra space in their apartments or houses to share with responsible, compatible adult "guests" in need of affordable housing. One of the "matchmates" must be 60 or over. During the past two decades, we have successfully matched 1,670 persons in 835 shared living arrangements.

Our program's home sharing and respite care services, the only ones of their type in New York City, help seniors of all ethnic, racial, religious and income backgrounds and sexual orientations maintain their independence alleviate the stress of financial hardship and prevent isolation. A recent Foundation cost/benefit analysis, for the three year period between October 1, 2010 and June 30, 2014, shows that our program saved New York City and State over \$29,000,000 in Medicaid expenses.

Over the years, the New York City Department for the Aging has stressed the vital need for and importance of both our home sharing and respite care services. Therefore, on behalf of New York Foundation for Senior Citizens' Board of Directors, I urge you to provide an allocation from your discretionary funds as well as support for the provision of a minimum of \$100,000 from the Speaker's city-wide fund toward this program. By so doing, you will afford the Foundation's Home Sharing and Respite Care Program the ability to continue to provide its desperately needed services that prevent homelessness and institutionalization, while ensuring essential savings in Medicaid expenses for New York City and State throughout fiscal year 2015-2016.

Thank you very much.



March 23,2015

Good morning, I am Bonnie Lumagui, I represent Educational Alliance, a multi social service agency located on the Lower East Side of Manhattan.

We are pleased to be a partner with City government in operating a neighborhood senior center, an innovative senior center and a naturally occurring retirement community supportive service program, programs and services that in our view, has benefitted many thousands of seniors and their families in this City in the most profound ways. From the most frail seniors who receive supportive services to remain in their own homes to the more robust that come into our centers for social connection, support, recreational activities and nutritious meals to keep them healthy as they age.

We look forward to working together to ensure that these programs and services remain strong and relevant far into the future. In this spirit we would like to bring to your attention an issue that we believe is relevant not only to us but all providers of services that are funded through government contracts, and that is the fact that senior center and NORC contracts are mostly 6 year contracts with no provisions for COLA and health insurance increases. We all know every year costs increase in all areas, for example; the cost of utilities, food costs and program supplies. As a consequence each year of the contract, the amount of funds available to provide services gets smaller and yet the deliverables for the contract remains the same. This places a heavy burden on the sponsoring agency – workers, who provide valuable service to the most frail and needy in our City, receive no COLA increases over the lifetime of the contract and with the continued rise in healthcare premiums, non-for profit agencies are expected to supplement government contracts.

We urge the City Council to work with the Mayor, then, to invest more deeply in providing increases to multi-year contracts. Older adults are counting on us to continue services. We are counting on you to ensure that we can continue to afford to provide these services

Good Morning

My name is Dr. Revella Levin, I am a senior, a psychotherapist. I treat seniors and the disabled psychotherapeutically without referring patients for drugs.

As we discover, just by looking around we see that people are living considerably longer than was true when they were young. It is no longer an anamoly to read in the obituary page of people living to well over 100. Consequently, there are more of the aging who need our services. Of course that requires more financing, far right politicians not withstanding. .

Many clients are unaware that contrary to their experience, people no longer just get old and die shortly thereafter. We need to help the aging to understand that they may very well live well-over 65, and be unable to work They are suprised to find that their bodies deteriorate slowly but they do not cease to exist. As a result, they have no plans for their old age.

That is one reason, we need to have more case managers and more money to pay them. We now have over 1900 patients on the waiting list for case managers. This need is not unlike a patient who needs a kidney transplant. The need is so great and donors so few, that the patient may die before he or she gets one. Without a case manager the patient may wander around without map in the jungle of providers. You more sophisticated people may take for granted that there is help to be gotten., and where to go for it. But most people don't. There were many valuable things I didn't know until David Schreir, my case manager, told me about them. We certainly don't want it to be on our consciences, to hear about an elderly person freezing to death, starving to death or dying alone of a heart attack or stroke. Clients need to know that we will try to offer them that most important of assistances, relief from the anxiety about that the helplessness of old age brings.

One way we can do that is to subsidize Meals on Wheels Because of that agency, the patient can be assured that she won't starve to death even if she can't move.

Hardly second to the physical deterioration is the

loneliness problem. It is appears to be the time of life, must vulnerable to that feeling and very probably the cause

of the high rate of suicide. For that reason, the existence of senior centers are essential for the aging. They can make friends through their meetings and get various other kinds of help. But I understand they are woefully underfunded.

So, I m asking you to fund these important agencies according to their need to help people who are living far beyond their expectations and don't want to commit suicide. Let us try to preserve our democracy and our civilization, in the midst of fighting barbarism, to whatever extent our abilities allow us. .

Thank yob.

# Testimony from Isabella Geriatric Center NORC Programs at the NYC Council Aging Committee Hearing

March 23, 2015

On behalf of Isabella Geriatric Center, the Fort George VISTAS NORC and the El Corazon Neighborhood NORC in Washington Heights, I wish to thank Councilmember Chin and the other members of the Committee for the opportunity to make this statement in support of city funded classic NORCs and the SOFA funded Neighborhood NORC Programs. I also want to thank the Council for the inclusion of discretionary dollars for the current Neighborhood NORCs this fiscal year.

Washington Heights in Northern Manhattan is home to a very large Spanish speaking older adult immigrant community striving to survive on incomes well below the poverty line. The majority never completed elementary education and face literacy challenges in both English and Spanish. Most of these seniors live in poorly maintained six story tenement walk up buildings in need of major repairs, in single rooms, or with large extended families in crowded conditions. Profound challenges in accessing quality health care, along with other barriers have led to high rates of diabetes, hypertension, and obesity, as compared to other aging communities. These seniors live with a lot of stress in their lives which the NORC programs seek to mitigate through individual and group services, home visits, activities that provide meaning and spiritual sustenance, and concrete assistance in every way possible.

As we know, low income immigrant seniors face challenges beyond those faced by the general aging population. Maintaining economic security through the maze of government benefits and navigating the healthcare system require professional assistance. Many do not have access to a primary care physician and, by necessity, use the emergency room when symptomatic. The complexity of tasks involved in managing one's multiple chronic health conditions, from filling prescriptions, to taking medications properly, to being able to contact a primary care physician and knowing when a specialist is required, requires a helping hand that is provided by the NORC team of trusted nurses and social workers, who guide seniors in managing their health on an ongoing basis. These services are critically needed to ensure that older people stay healthy and medically stable in the community.

As people live longer, we see the "old-old" population growing in our NORC programs. Many of those frail seniors in need of in-home services may be ineligible for Medicaid and afraid to spend their hard earned savings on homecare. They go without, at the expense of their safety, and mental and physical well being. They require monitoring and the safety net that a NORC program provides, which might include weekly phone calls or a friendly visitor from the Henry Street Senior Companion Program. By being on site, the NORC not only has a unique opportunity to keep those potentially "living in the shadow" engaged with others, but also to encourage an atmosphere of mutual assistance among neighbors. Instances of dementia are also on the rise, and we find ourselves increasingly engaging family members, educating and guiding them on the disorder and resources, as well as how to communicate with a parent with cognitive impairment. We use motivational counseling techniques to encourage members to accept help and we keep a watchful eye on them through the many opportunities that we have by virtue of being on site.

Isolation among seniors in the Neighborhood NORC is especially prevalent for those who live alone. Depression, anxiety, and mobility challenges may prevent seniors from going outside to

# Testimony from Isabella Geriatric Center NORC Programs at the NYC Council Aging Committee Hearing

March 23, 2015

meet their basic needs, especially if they have to navigate stairs to upper floors. All too often we hear that due to incapacitating conditions seniors lose their government benefits, stop paying bills, have no phone, and are unable to go to the doctor. These problems make these seniors especially vulnerable to isolation as they age, putting them at extreme risk. An integral aspect of the NNORC program has been to carry out ongoing and varied outreach initiatives, by both staff and members, aimed at identifying isolated seniors living in the NNORC designated buildings.

Relationship building and cultural familiarity is the cornerstone of the NORC model which lends itself to honest disclosure of personal information to the staff. Comprehensive case management and intensive case management for those seniors at highest risk have become *essential* services to ensure the health and safety of our growing elder population and to prevent the increased homelessness, wandering, and unnecessary injury or worse that we are bound to see among our growing population of cognitively impaired and isolated seniors, if there are insufficient services to support and bolster them.

Unfortunately our SOFA NNORC funding does not begin to put a dent in the growing need for comprehensive social work and healthcare services. One social service worker provides case management services to 200 members annually. With City Discretionary Council funding this year we hired an MSW to focus on our high risk case management and intensive case management clients and to make depression screenings more routine. When the funding ends in June, these services will also end.

For these reasons, we urge the City Council to support increased funding for NORC and NNORC Programs in the City Budget.

Thank you.

Carol Ban, LCSW Director of Aging in Place Programs 212 273 5200 247 w. 37 st. ny, ny 10018 www.jasa.org

## City Council Committee on Aging

FY16 Budget Hearing

## March 23, 2015

## Remarks by Molly Krakowski, Director of Legislative Affairs

Jewish Association for Services for the Aging (JASA)

Good morning. I'd like to thank Councilmember Chin for chairing today's Fiscal 2016 budget hearing on aging. My name is Molly Krakowski and I am Director of Legislative Affairs at JASA.

JASA is a not-for-profit agency serving the needs of older adults in the greater New York area. Its mission is to sustain and enrich the lives of the aging in the New York metropolitan area so that they can remain in the community with dignity and autonomy. JASA has developed a comprehensive, integrated network of services that provides a continuum of community care. Programming promotes independence, safety, wellness, community participation, and an enhanced quality of life for New York City's older adults. These programs reach over 40,000 clients and include home care, case management services, senior centers, NORC supportive services, home delivered meals, caregiver support, continuing education, licensed mental health, housing, advocacy, legal services, adult protective services, and guardianship services. We welcome today's hearing as an opportunity to share our priorities for FY16 and beyond.

According to the New York Academy of Medicine, "over the next 20 years, the number of New Yorkers age 65+ is expected to increase by nearly 50%. As a result older New Yorkers are expected to outnumber school-age children for the first time in history." The growth of our City's older adult population mirrors national and worldwide trends, and yet, the budget of the Department for the Aging (DFTA) has been continuously cut over the years. The Mayor's five-year plan does not forecast an increase, but rather a decrease, in the bottom line. JASA suggests that now is the time to invest further in services for older adults, to stay ahead of the aging trend and to prepare for the type of services and programs necessary to maintain a healthy aging population in the community at large.

Over the past number of years, aging services were included in the annual budget dance; we were pleased to find ourselves in a new situation last year with the inclusion in the budget of money for case management, elder abuse prevention and intervention, NORCs, and discretionary funding. However, this year, we are met with a budget that seems to have stopped short of recognizing the needs of seniors and scales back progress made last year. We are asking for funding to be restored, and also to invest more significantly in aging services.

Specifically, we ask the Council for the following:



## Case Management

Social workers are a vital asset in preventing seniors from isolation, financial instability, and premature institutionalization. Case management is the primary service for homebound older adults, connecting seniors with essential services (such as home delivered meals). While JASA is grateful for the increase of \$3.3 million in last year's budget, additional funding in necessary to meet the needs of this rapidly growing population.

## Senior Centers

JASA operates 21 neighborhood senior centers throughout the Bronx, Brooklyn, Manhattan, and Queens, and three on Long Island. Senior centers provide seniors a hot and nutritious meal, as well as physical fitness and health and wellness activities, classes, lectures, trips, meaningful volunteer opportunities, and intergenerational activities. Physical fitness activities are mandated by DFTA and are very popular. They are a vital component of each center's programming, providing the participants with activities that promote strength, balance, flexibility, and endurance.

Due to budget constraints, neighborhood senior centers do not have sufficient funding to cover the costs of consultants to teach these important classes. Most physical fitness activities are presently funded through the generosity of individual Council Members. It is essential that we implement more health promotion programs now, knowing that they will impact on the lives of individuals for the coming years. JASA would like to see DFTA contracts for senior centers include additional funding for these types of programs, beyond the congregate meal. Additional funding would also allow for additional culturally responsive programming, such as ESL courses and translation services.

We ask the City Council to restore the \$800,000 for senior center rents and to increase the funding provided in DFTA senior center contracts.

## **Funding for Additional Social Workers**

JASA joins with LiveOn NY in requesting funding to provide additional social workers in senior centers and Section 202/affordable senior buildings. Senior tenants would greatly benefit from a social worker on staff, in addition to the current service coordinators located in their buildings, to assist them in obtaining benefits and entitlements, counseling, and other interventions that would allow for them to safely continue living in the community. Funding additional social workers in these settings will save the City money by drawing down other funds and aid seniors to age with dignity and autonomy.

## Culturally Appropriate Home Delivered Meals

JASA serves 625,000 meals annually; 470,000 are kosher meals. JASA welcomed the muchneeded relief the City Council provided in the FY15 budget, increasing the reimbursement rate for culturally appropriate meals by 50 cents. Despite the increase, providing kosher home delivered meals continues to cost JASA an addition \$1.00-\$1.50 per meal. JASA's home delivered meals projects a deficit of \$300,000 for FY15. We ask the City Council to continue to revisit the reimbursement rates for culturally appropriate home delivered meals as the aging community grows in numbers and diversity.

## **Naturally Occurring Retirement Communities**

Recently, this Committee held a hearing on Naturally Occurring Retirement Communities (NORCs), and, as you heard then, there are many neighborhoods that would benefit from the services NORCs provide.

JASA provides services at 10 NORCs and is responsible for providing a variety of services, but without sufficient funding to implement them. For example, there are sometimes nursing vacancies in NORC programs that remain unfilled for significant periods of time or the weekly nursing commitment is reduced because our nursing services partners have internal fiscal priorities. This is an unfunded mandate. Without additional funding to enable NORC program sponsors to pay for nursing services, at some point providers may have to choose between competing vital services. The NORC RFP identified group services and activities as "optional" -- but they are essential for supporting social and community engagement and reducing isolation. We also see opportunities to expand NORC services with an interdisciplinary approach, tying together services from NORCs, senior centers, case management, and others. Those individuals who do not live in designated NORCs would benefit from community nursing services. Lack of funding is a serious and potentially insurmountable impediment.

## Affordable Senior Housing

Despite the recent discussion of affordable housing in New York, there has been considerably less talk of the specific lack of housing options for older adults. JASA receives calls daily inquiring about housing options for seniors; we receive calls regularly from Council Members seeking to assist constituents in this housing crisis. Clearly, the time has come for agencies in aging and supportive housing to work together to explore opportunities to meet the needs of the housing crisis, which will only grow as the boomer community grows older and frailer.

JASA operates eight senior houses in Brooklyn, Manhattan, and Queens. The average wait list for JASA housing is over 15 years. At this time there are no new federal Section 202 housing developments in the works. Most new housing developments in New York are unaffordable for seniors on fixed incomes; there are no new Section 8 vouchers being offered, and non-profit housing development is priced out of most available property by larger luxury developments.

JASA urges that the City include senior housing as a part of any new affordable housing legislation and tax credit programs and that a portion of apartments in any new 80/20 building be set aside for low-income elderly.

Although we do not believe that all the housing problems can be fixed immediately, we would like to use this opportunity to encourage the City to bring together seniors and representatives in the fields of aging and housing to begin discussions on how to create and implement plans for affordable senior housing.

JASA firmly believes that older adults should be able to age in place, in their homes and communities. As NYC 's real estate market continues to heat up, and neighborhoods are rezoned, seniors need protection against harassment and displacement from their neighborhoods. The adoption of a Right to Counsel in eviction proceedings (Int. 214 of 2014) will allow more vulnerable seniors to remain in their affordable homes.

## Elder Abuse Prevention and Intervention

JASA is a recognized leader in elder abuse prevention and intervention, providing educational sessions for hundreds of professionals annually through the Elder Abuse Training Institute. JASA is also the lead co-sponsor of the Annual NYC JASA Elder Abuse Conference. This "best practices" conference is an interagency collaborative effort, involving a variety of community-based providers and attracting a broad professional and lay audience.

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Through JASA LEAP, our Legal and Social Work Elder Abuse Programs in Brooklyn, Manhattan, and Queens, which are currently funded by the City Council, JASA staff helps prevent and resolve abuse for approximately 700 persons annually. JASA LEAP offers a unique service model: an interdisciplinary team approach of a social worker and lawyer offers a safety net to seniors who have become victims of physical, psychological, and/or financial abuse.

Maintaining dedicated funding for elder abuse prevention and intervention is essential. All abuse is unacceptable, but there are specific issues and interventions affecting older adults that make them susceptible to abuse; this includes physical and cognitive frailty and dependence on other people – and these are not addressed in domestic violence programming.

We are grateful that the funding for elder abuse was base lined and that the Council recognized the urgency of elder abuse services and increased funding for these programs through FY 2015. For every one case reported, an estimated 24 go unreported. Given the severe vulnerability of victims of elder abuse, we urge you to continue your leadership role in expanding funding for elder abuse programs in the FY16 budget.

## Mental Health

In FY 15, the City Council's Geriatric Mental Health Outreach Initiative was base lined; for the past three years, JASA has used its grant to support in-home treatment for Medicare-only homebound clients as well as for community-based psychiatric assessments, screening, and outreach/education under the auspices of JASA's NYS-licensed geriatric outpatient clinic. The Department of Health and Mental Hygiene (DOHMH) is expected to issue an RFP in FY16; it is important that DOHMH include in-home treatment options as part of the scope of services in the RFP so that providers can maintain these services for a particularly frail and vulnerable cohort of the senior population. Any loss of these services may place a vulnerable population at additional risk. Geriatric clinic services are not adequately funded currently and providers will not be prepared to help the homebound, frail population as it continues to grow.

Thank you for the opportunity to offer this testimony on issues relevant to supporting New York City's aging population. JASA looks forward to working with the City Council, the Mayor, and the Department for the Aging toward a senior-friendly budget in FY16.



VISONS/Services for the Blind and Visually Impaired Testimony for Aging Committee Hearing "How Access-A-Ride Serves the City's Senior Population" Monday March 23, 2015 Testimony provided by Natasha Deleon & Ann DeShazo, LMSW Director of VISIONS at Selis Manor <u>adeshazo@visionsvcb.org</u> 646-486-4444 ext. 11

On behalf of VISIONS/Services for the Blind and Visually Impaired, I would like to thank you for this opportunity to testify on this important service for the City's Seniors.

VISIONS is an innovator of service delivery and we strive to meet the needs of New York City's youth, adults and seniors living with vision loss. VISIONS provides FREE services for low income, multi-disabled and ethnically diverse individuals and families. We focus on assisting our seniors with vision loss with developing and maintaining healthier lifestyles, providing an atmosphere that encourages social connections, ensuring they all receive information in their format of choice, and can access counseling and support. VISIONS provides nutritious hot meals, opportunities for physical activity, education seminars, adapted technology training, photography and sculpture classes, cultural events and intergenerational services. VISIONS also sponsors Blindline® a database and call center that provides information and referrals to resources and connects blind NYC residents with the NY City Council website.

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extensive experience of how the Access-a-Ride service impacts our clients. More than half of VISIONS clients are over 60 and a majority has low incomes. Through funding from the NYC Department for the Aging and New York City Council Members, VISIONS senior center has over 600 registered participants and a caregiver support program enrollment of over 750.

There is an ongoing and growing need for transportation services for seniors with vision loss. It's important to note that we have hundreds of participants that use Access-a Ride AAR, and we have VISIONS employees and interns with vision loss that use the AAR service as well. Below are just a few quotes from employees and seniors regarding their problems with the AAR services:

- 1.)"You can't rely on them to pick you up on time. There is no way to use GPS to locate the drivers anymore. I experience dispatchers telling me the driver will arrive in 5 or 10 minutes and it's over an hour later."
- 2.)"I think drivers need some formal training on how to work with people who are disabled, especially people with vision loss."
- 3.) "Drivers need to pay more attention to the addresses when picking people up. I live in a complex with multiple buildings and numbers and the drivers are consistently pulling up to the wrong building or entrance complaining that I am not at the right location."
- 4.)"I am an elderly woman and I can't deal with shared rides that are extremely long. I have had many experiences in which drivers pick up people after me and drop them off first making me late to my appointments. It might be helpful if the dispatcher plans the routes better and everyone can get to their destinations as close to their times as possible. One

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example: I was picked up at 7am from Queens going to VISIONS at Selis Manor at 23<sup>rd</sup> street in Chelsea and I did not arrive until 11:30am. The class I attend begins at 10:30 and ends at 11:45."

5.)"If I were over an hour late to work every day I would be fired."

# Permanent Expansion of the Taxi SmartCard/E-Hail Pilots

While currently a pilot program in just two city neighborhoods, we strongly recommend that the Taxi SmartCard program or something similar should be made permanent and expanded citywide immediately. Allowing eligible Access-A-Ride consumers to use yellow or green taxis and/or for-hire-vehicles for their travel allows for the maximum flexibility to serve an individual's transportation needs and has proven to offer significant time and cost savings. This program offers a more fully integrated experience enabling seniors with vision loss to hail or ehail a taxi or car thus avoiding long waits, avoid the need to schedule in advance, and avoid missed pickups by Access-A-Ride vans.

I would like to thank all the city council committee members for allowing me an opportunity to comment on such an important service. I would be happy to answer any questions.



## STATEMENT SUBMITTED TO THE COMMITTEE ON AGING OF THE NEW YORK CITY COUNCIL

Proposed FY 2016 Budget for New York City's Senior Services March 23, 2015

Thank you to the Committee on Aging for convening this hearing. I am Howard Shih, Director of Research and Policy at the Asian American Federation. The Federation's mission is to raise the influence and well-being of the pan-Asian American community through research, policy advocacy, public awareness and organizational development.

Established in 1989, the Federation is a pan-Asian non-profit organization representing a network of community service agencies in the Northeast. These agencies work in the fields of health & human services, education, economic development, civic participation, and social justice.

We are here today to highlight the ever-growing Asian seniors in New York City, and the resources required to meet the needs of this population.

## Immigrants are driving the growth in the senior population.

The Department of City Planning highlights the changing demographics of the senior population in New York City in their most recent Newest New Yorkers report. Immigrants are becoming bigger share of the senior population in the City due to two demographic trends. First, the large wave of immigrants arriving after the immigration reforms of 1965 are now aging into the senior population. Second, some seniors are also immigrating later in life, with about 10 percent of the City's immigrant seniors arriving since 2000. About 1/3 of these recently arrived senior immigrants were from China. About 15 percent of Chinese, Indian and Filipino seniors arrived since 2000. Almost half of Bangladeshi and a third of Pakistani seniors arrived since 2000, reflecting the more recent immigration history of those two communities.

# Asians are the fastest growing part of the senior population in New York City

We can see the impact of these trends most clearly among the Asian population. From 2000 to 2013, the Asian senior population grew 80 percent, faster than all other major race and ethnic groups in the city. Nearly 124,000 Asian seniors reside throughout the five boroughs.

# While Chinese are still the majority of Asian seniors, immigration and settlement trends are increasingly diversifying and dispersing the Asian senior population.

Chinese seniors remain the largest Asian ethnic group, making up 57 percent of the Asian senior population. Indian seniors are the next largest, with 15 percent of the population. The next largest

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were Filipino and Korean seniors, who were 9 percent of the Asian senior population. Bangladeshi, Japanese and Pakistani seniors round out the rest of the large Asian communities in the city, each representing 2 percent of the Asian senior population.

Geographically, each of the major Asian groups in the city has settled in several distinct patterns. Chinese seniors are nearly equally split between the Chinatowns of Brooklyn, Manhattan and Queens. Indian and Korean seniors were largely in neighborhoods in Queens. Bangladeshi and Pakistani seniors are found in neighborhoods in Queens, Brooklyn and the Bronx. Japanese seniors are concentrated within neighborhoods of Manhattan. As the Asian senior population disperses, our member agencies will require increasing the number of sites that provide services that match their language and cultural needs.

## Asian seniors face linguistic and economic challenges.

And the needs of Asian seniors are great. Overall 1 in 4 Asian seniors live in poverty, with poverty rates reaching as high as 35% for Bangladeshi seniors and 30% for Chinese seniors.

Language barriers remain high among Asian seniors. More than 90% of Chinese and Korean speaking seniors had limited English proficiency (LEP). Among Bengali speakers, 88% were LEP. More than 3 in 4 Urdu speakers and half of Hindi speakers were also LEP. Even among Filipinos who have a reputation of high English proficiency, 44% of Tagalog speakers identified themselves as LEP.

Access to affordable health insurance is also a concern for Asian seniors. Overall 5% of Asian seniors have not health insurance coverage, compared to 2 percent of all seniors. And only 24% of Asian seniors had additional private coverage, compared to 43% of all seniors.

## Culturally competent services increase utilization and effectiveness of the services.

Community-based organizations with roots in their neighborhoods are best placed to getting Asian seniors the help they need. Asian seniors, particularly more recently arrived ones, are less likely to know what services and programs are available to help them acclimate to life in New York City and to address life events as they occur. Having the language and cultural expertise and connections to the community allow our member agencies to reach our seniors. Asian seniors are more likely to utilize services that reflect their traditional values and ethnic identities. Culturally competent programs will also understand the cultural and generational barriers that stop seniors from seeking help, particularly around mental health services.

## Recommendations

On behalf of our member agencies that serve Asian seniors, we request resources for following priorities:

1. The Chinese and Korean senior populations have grown by 65 to 70 percent since 2000, but funding for senior centers targeting that population has not kept up with this growth. We request more funding to support these important community hubs for our seniors.

- 2. In a city where more than one in ten seniors are Asian, no Asian-led homebound meal provider has a direct contract with the city. Our member agencies who are sub-contractors for homebound meals often find that their programs are cut first when the city's budget axe falls on the contracting agency. We request the restricting of contracts to enable Asian senior centers to contract directly for homebound meals.
- 3. No major senior housing has been built in the city in many years. Few, if not none, of the existing senior housing serves the diverse language, cultural and dietary needs of Asian seniors, in particular South Asian seniors. We applaud the Mayor's recent plans to build 10,000 units of senior housing, but this is not enough. We request the creating of more senior housing,
- 4. Both Queens and Brooklyn do not have a senior center with regular hours serving South Asian seniors. We request that Council address this gap.
- 5. Increasing need for in-language and culturally competent health and, in particular, mental health services for Asian seniors.
- 6. Ask that any new or restored federal or state funding (for example, New York State Community Services for the Elderly Program (CSE)) coming to the city be spent address the imbalance in funding to the Asian community and help agencies directly serving Asian seniors build their capacity.
- 7. Amend the contracting process in order to acknowledge that Asian-led agencies providing services directly to Asian seniors are in the best position to use additional dollars cost effectively.
- 8. Please provide support to conduct research to study the most effective programs, best practice models and demographics changes of the senior population so we can work together to fill service gaps.

Thank you!

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Testimony of New York Asian Women's Center Before the New York City Council Committee on Aging

March 23rd 2015

Good Morning Chairperson Chin, distinguished members of the committee; my name is Aditi Bhattacharya and I am the One Again Program Manager at New York Asian Women's Center. The New York Asian Women's Center (NYAWC) is the largest Asian American focused domestic violence agency in the country, a premier anti-human trafficking serving organization, and a national demonstration project that provides model services to survivors of sexual assault. The Center provides a safe haven through multi-lingual support programs and shelter services. Thank you so much for allowing us the opportunity to speak today.

As you know, the population of seniors in NYC is rapidly growing. Of all the racial and ethnic groups, Asian seniors are the fastest growing population. Between the year 2000 and 2010 the number of Asian seniors has grown by 54%. There are well over one hundred thousand Asian seniors in NYC.

With this increase seniors will need many more services – including senior programs, health care and housing. But, I am here to advocate for funding to prevent and assist seniors experiencing elder abuse because with the increase in elderly there will be an increase in elder abuse.

We are aware that a majority of Asian seniors are married and are more likely to be living at home. Asian seniors are less likely to receive social security benefits than other major races and ethnic groups. For seniors age 65 or older, the poverty rate of Asians ranked the second highest among four major race and ethnic groups, right below that of Hispanics.

In the Asian community there is a variety of victims but the most common example involves a victim who lives with the abuser. In the Asian community there is a variety of perpetrators but the most common example is a relative or in-law."

Perpetrators of elderly abuse are often family members, spouses or significant others. Familial piety or placing family before self is a highly valued principle in Asian culture. Yet Asian seniors endure abuse at the hands of their allegedly loyal children at an alarming rate. Shrouded in secrecy and denial, Asian seniors face financial exploitation, neglect and outright physical violence with few places to turn for help. Moreover, family loyalty itself shrouds these acts in secrecy and often deters Asian seniors from reporting the abuse and seeking help. Involving service providers or law enforcement can be viewed as bringing shame to their families which forces Asian elderly abuse survivors to suffer in isolation, without the support needed to deal

with the trauma that they are enduring. In addition, the fear of being forced to live in a nursing home prevents seniors from reporting instances of abuse. The stigma associated with living in a nursing home while having grown children reflects negatively on the seniors.

Elder abuse services are very urgently needed for the Asian community. To our knowledge there is no organization providing elder abuse services for the Asian elderly except NYAWC. We are partners in a grant funded by the Federal Office on Violence Against Women (US DOJ). The program led by the Kings County District Attorney's Office is to provide training, coordinated response, outreach and services to Asian women and men 50 years of age and older in Brooklyn. In addition, we have received Elder Abuse Enhancement Funds as part of the Speakers Initiative.

Culturally competent and language appropriate services for Asians experiencing elder abuse is a critical need. Over the last year we have provided workshops for Asian seniors and trainings for professionals. We have found that there has been an increase in Asian survivors seeking help. We feel that this is because the outreach that we are conducting in the community is provided in the survivor's native language and is addresses cultural nuances that exist.

In order to really address elder Abuse in the Asian community we are asking the Council Committee on Aging for two things. First we petition the committee to continue supporting the Elder Abuse Enhancement funds that were allocated at \$1 million in fiscal year 2015. Secondly, we request your assistance in supporting our request to the speaker to allocate \$200,000 of the Elder Abuse Enhancement funds to the New York Asian Women Center. These funds will allow us to take a three-pronged approached at addressing Elder Abuse in the Asian community. Through these funds we will be able to provide community education and outreach in a variety of Asian language; train professionals who often come in contact with Asian seniors; and to provide linguistically and culturally appropriate comprehensive services to Asian elder abuse survivors throughout New York City.

Thank you for your time, attention and for this opportunity to express an important problem. We hope you will recommend funding to help toward the solution.



FOR THE RECORD

## **HAI Capital Funding Request**

**Project Title:** Wheelchair-Accessible Cultural Access Bus Funds Requested: Borough President Brewer: \$75,000 City Council: \$75,000 Total: \$150,000

#### About the Program:

HAI is seeking Capital Funding to purchase a brand new Starcraft commercial bus, which will comfortably accommodate 10 wheelchairs along with 12 ambulatory passengers. There is no other bus with this capacity in NYC. The HAI bus will transport frail elderly, wheelchair-bound, injured veterans, and other mobility impaired individuals to artistic and cultural destinations in NYC. This service is invaluable to the hundreds of nursing, rehabilitation, and group homes who use the bus to give their otherwise isolated residents the opportunity to take part in NYC's vibrant cultural life.

The new bus will be second in a fleet of three that HAI is working diligently to rebuild after we were forced to retire our entire fleet last year due to age and maintenance issues. HAI's transportation program has been a unique public service offering to disabled New Yorkers for decades. For over 25 years, HAI operated a fleet of three specially-modified MTA buses that transported frail elderly and mobility impaired individuals to cultural events around the city. After the program's halt last January, the response from NYC's nursing and rehabilitation homes was overwhelming. We received calls nearly every day from concerned recreational specialists, whose residents were now confined to their homes, without an opportunity to access NYC's cultural offerings. As the need for such a transportation service was more apparent than ever, HAI worked tirelessly to finance a brand-new bus with the capacity to transport 10 wheelchairs an an additional 12 ambulatory passengers. While the new bus has enabled HAI to provide cultural opportunities for hundreds of isolated New Yorkers since its launch in October, our capacity to serve the demand is greatly limited when compared with our original fleet of three.

This cultural access bus will provide rides for over 7,000 wheelchair bound and frail elderly passengers annually, servicing many nursing and rehabilitation homes in Manhattan. Some examples of facilities include Mary Manning Walsh, Amsterdam Nursing Home, Jewish Home, and Dewitt Rehab. The most common destinations will be Manhattan's many cultural attractions, including Broadway shows, Radio City Music Hall, NY Philharmonic summer concerts in Central Park, Shakespeare at the Delacorte Theatre, and various museums. The bus will visit other NYC destinations on a less frequent basis, such as Cunningham Park, the Brooklyn Museum, Brooklyn Botanic Garden, and the Bronx Zoo.



#### About HAI:

Hospital Audiences Inc. d/b/a Healing Arts Initiative (HAI) exists to remove barriers to arts and culture. We are a NYC based nonprofit agency with an unyielding commitment to making the arts accessible to all New Yorkers, especially individuals who are isolated and marginalized due to nstitutionalization, hospitalization, disability and illness, as well as at-risk youth in low-income neighborhoods – audiences most in need of the healing role of the arts.

Established in 1969, HAI began its work by providing on-site performances at psychiatric wards and prisons around the NYC area. Since then, HAI has grown exponentially and is now a multi-faceted cultural access organization. Each year, HAI touches the lives of more than 198,000 New Yorkers whose access to the arts has been limited by health, age or income. We rely on a pool of over 350 artists of varying disciplines and offer an array of arts, education and wellness programs including: live performances at health and social service facilities; free and low-cost tickets to cultural events; participatory arts workshops for K-12 students; audio description services for blind and visually impaired theater patrons; group transport on our wheelchair-accessible bus; and presentation of original music and dance at mid-to-large scale venues in NYC.

This past year, HAI has increased our reach to the city's underserved in all facets of our programming. Our on-site arts studio has tripled service, the Education Department launched in-school and afterschool initiatives in 4 Manhattan schools, we have built a strategic plan to increase the depth of our arts programming in NYC nursing homes, and last April, HAI partnered with the NY Mets to present the first annual Developmental Disabilities Awareness Day at Citi Field.







1081Coney Island Ave. Brooklyn New York 11230. Phone 718-434-3266 Fax 718-859-2266 www.copousa.org

FOR THE RECORD

March 23 , 2015 Good Morning,

My Name is Mohammad Razvi, Executive Director of Council Of Peoples Organization.

COPO's mission is to assist low income immigrant families, particularly South Asians and Muslims, to reach their full potential as residents of New York City. COPO empowers marginalized communities to advocate for their rights and understand their responsibilities as Americans. It helps to build community relations amongst Muslim and non-Muslim community groups. It works to establish connections between the communities and various government agencies.

We provide multiple services to the community. We are the only Halal Senior Center in NYC. We provide essential services to the Seniors , such as food , transportation, socialization and benefit enrolment . We serve 200 meals a week due to limited resources. Attached is the New York Times Article "Poverty Looms Large for Citys Aging Immigrant Population Study Says" The increase in the immigrant senior of South Asians population is great and according to the 2010 census is currently 46% increased and project to go to 86% in coming years. We need the support and put programs for theses hard working members of society.

Thank you, Mohammad Razvi

# The New York Times N.Y. / Region

Poverty Looms Large for City's Aging Immigrant Population, Study Says



Hiroko Masuike/The New York Times

Wahid Ali, center, and his wife, Sabira Khatoon, received medical exams in Brooklyn, N.Y. By KIRK SEMPLE Published: July 25, 2013

Published: July 25, 2013

After retiring from his job as a security guard in 2011, Wahid Ali's days became a struggle against tedium. Speaking only limited English and with few friends, he had little to do, and mainly stayed at his home, a small rented room in an illegal basement apartment in Coney Island.

But the tougher fight was financial. Mr. Ali, 78, had meager savings, and his wife had not worked since they immigrated to the United States from Pakistan in 2006. So the couple depended on his monthly Social Security check of less than \$600.

"It was extremely difficult," he said, especially putting enough food on the table.

These are increasingly familiar concerns within New York City's surging immigrant population.

As is the case in the rest of the country, the city's residents are skewing older. Yet a new study, to be released Thursday, reveals that immigrants are the driving force behind this trend, posing enormous challenges to local government agencies and social service organizations.

From 2000 to 2010, the number of immigrants in the city aged 65 and older increased by about 30 percent while the corresponding native-born population dropped by 9 percent, according to the study by the Center for an Urban Future, an independent research organization in New York.

The foreign-born now represent 46 percent of the city's population aged 65 and older, a proportion far higher than their share of the city's overall population (37 percent).

"I think it's the biggest demographic trend that nobody is talking about," said Jonathan Bowles, the center's executive director.

Besides being one of the fastest-growing demographic groups, older immigrants are also among the most vulnerable. "Many in this group are not only poised to strain the social safety net but fall through it entirely," the study said. On average, older immigrants have far lower incomes and far smaller retirement savings than older native-born residents, and they receive fewer benefits from entitlement programs like Medicare and Social Security. Nearly 24 percent of all older immigrants in the city live in poverty, compared with 15 percent of their native-born counterparts, the study said.

In addition, language obstacles conspire with a lack of education and cultural barriers to keep many older immigrants from finding out about, and seeking help from, government agencies and community-based advocacy groups.

Last year, Mr. Ali found some relief from his struggles at the Council of Peoples Organization, a community group focused on South Asian Muslims that had opened a senior center at its office in Coney Island. He now spends his

days there, eating free meals, making friends, watching Pakistani satellite television programs and "hanging out," he said through a translator. The center has also helped him and his wife apply for additional government assistance and get medical help.

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The organization's executive director, Mohammad Razvi, said the center opened last year after clients began asking if they could take some of the canned food that had been donated for disaster relief in Pakistan. That desperation and level of poverty within his own community caught Mr. Razvi off guard.

## "I was in shock," he said.

The senior center, he added, was the first in the city specifically intended for Muslims. The organization is now expanding the building to accommodate the demand for senior services.

With its extensive public transportation networks, concentration of health care centers, array of immigrant enclaves and proliferation of immigrants' services groups, New York City may be one of the better cities in the country to grow old in.

Yet in interviews, advocates for older immigrants said that the needs of the growing population were far from being met and that more financing, from both public and private sources, was needed to meet current, and especially future, demand.

This is a concern underscored in the Center for an Urban Future's report, which noted that government financing for senior housing and services had declined significantly in recent years, including a 20 percent drop in city financing for senior services since 2009.

There are now at least 463,000 immigrants aged 65 and older living in New York City, the largest population of its kind in any city in the United States, according to the report, which was based in part on census data.

The growth is largely attributable to the aging of the people that arrived in the United States during the 1980s and 1990s, decades that saw a sharp increase in immigration, Mr. Bowles said.

Among the array of challenges that these immigrants now face, poverty arguably looms largest; about two out of every three elderly people in New York living below the poverty line are immigrants, the study said.

An array of factors puts older immigrants at a greater risk for poverty than older native-born people. Immigrants tend to earn significantly less over the course of their working lives than native-born people and therefore receive less in benefits from Social Security, and many do not qualify at all for the program or have not enrolled, the study said. As a result, 31 percent of older immigrants do not receive Social Security benefits, compared with only 18 percent of older native-born people, according to the study.

Kit Fong Lee, who volunteers at a senior center in Lower Manhattan run by the Hamilton-Madison House, said the center's clients, most of whom are Chinese immigrants, received Social Security benefits of, on average, about \$600 a month, around half the national average. Some clients scrape by collecting soda cans on the street, she said, or by relying on relatives.

"The life is not easy," said Ms. Lee, 74, a retired information technology specialist for IBM.

The most significant barrier preventing older immigrants from taking advantage of social services in the city is their inability to communicate with service providers in a language they know well, the study asserted: About 60 percent of older immigrants have limited English proficiency, and more than a third live in households in which no one over 14 years old can speak English fluently.

"When I go to Manhattan, I can sometimes get lost," Soon Kim, 88, said through an interpreter. "When I get sick I can't describe how sick I am." Ms. Kim visits a senior center in Corona, Queens, run by Korean Community Services of Metropolitan New York.

Language barriers can lead to social isolation, advocates said, which in turn can lead to mental illness and suicide. The problem is compounded in some immigrant communities where there is little conversation surrounding mental health issues.

"Even if it is recognized, they won't be ready to go for treatment because there's a stigma attached to it," said Sudha Acharya, executive director of the South Asian Council for Social Services in Flushing, Queens. "They won't think it's something serious."





For more information Call COPO - Ph: 718-434-3266 Ext (125) 1083 Coney Island Avenue, Brooklyn, NY 11230 New York City Council Committee on Aging New York City Council Fiscal Year 2016 Preliminary Budget

March 23, 2015

Public Testimony by Janet Fischer, Chief Administrator, Senior Services at Henry Street Settlement

Janet Fischer Chief Administrator, Senior Services Henry Street Settlement 265 Henry Street New York, NY 10002 212-477-0455

I am Janet Fischer, Chief Administrator for Senior Services at Henry Street Settlement, where we have three DFTA contracts including our Vladeck Cares NORC, our Good Companion Senior Center, and our Meals on Wheels program.

Historically NORCs in NYC are a collaboration of three partners, CBO, housing partner, and health partners. In the case of Vladeck Cares, our health partner is Visiting Nurse Services (VNS) of New York who has provided us with in-kind nursing support. These in-kind nurses have been an essential component of our NORC program, providing daily health assessments and screenings, home health consultations, group health education programs, and specific in-home care services. Working in collaboration with our case management staff, these nurses coordinate assessments, services plans and also note health trends among our seniors. This service is particularly critical for our multi-cultural, low income, high risk seniors many of whom suffer from diabetes, hypertension, and obesity.

Unfortunately due to changes in the healthcare marketplace health partners like VNS have been forced to cut back their in-kind nursing hours at NORC sites throughout the City. Now NORC

providers are struggling to find a new way to get the critical nursing services to our seniors that meet the minimum of 21 hours per week set by DFTA, for which we were given no additional funding for.

Recently we reached out to our fellow NORCs and discovered that the vast majority of these programs are in the same position as Henry Street, in that they believe that their seniors would benefit substantially from more in-house nursing hours. A copy of the nursing survey is attached to my testimony so that the members of this committee can see the exact extent of this need. The one factor that is holding back all the NORCs in meeting their nursing needs is money. Based on an hourly rate of \$75 per hour we believe that by providing \$1 million in additional support for nursing at the NORCs in the NYC FY16 budget we will be able to meet the nursing and health goals set by DFTA. Equally important, without these additional nursing hours we will be short changing our NORC seniors, especially the most vulnerable ones who depend on us for a whole range of health and social services. However with additional nursing funds we will be able to help seniors to age in place in their homes, and not only improve their quality of life, but this will be a substantial savings over the cost of institutionalizing these seniors. We respectfully believe that these funds will allow the NORCS in NYC to support an expanded nursing role that is essential for strengthening NORCs and for meeting the needs of our most vulnerable seniors.

We would also like to respectfully request that the FY16 City budget allocate funding to DFTA so that they can provide COLA increases to all staff covered under the agency's contracts. When we provide these COLA increases on our own, Henry Street and other agencies like us, often have to do so at the expense of the services we provide. This expense takes funding away from services that support the program such as consultants who provide health/exercise services and recreational services. Therefore we view these raises as essential in keeping quality, experience staff who on a daily basis are providing vital services to our city's aging population.

Thank you again for this opportunity to testify.

# NORCS NURSING SERVICES SURVEY – JANUARY 2015

Program Name:	Responder:	Q1: Nursing Partner:	Q2: Hrs. Weckly Provided:	Q3: Partner Agreed Hrs.	Q4: Additonal Hrs. Needed:
1199 NORC	Nicole Thomas	Mark-Viverito	0	0	0
Big Six NORC Program	Brooke Samuelson	Selfhelp Community Services	10.5	10.5	4
Chinatown NORC	Hing Lin Sit	VNSNY	14.5	14.5	21.5
Clearview NORC Director	Gary Barbad	VNSNY	20	10	10
Deepdale CARES	Laura Greenblatt	North Shore/LIJ Health	8	8	24
Goddard Riverside West Side NORC	Kaitlin Nelson	VNSNY	6	6	6
Good Neighbors NNORC Jewish Community House of Bensonhurst	Faye Levine	MJHS (Metropolitan Jewish Health System)	17.5	17.5	4
Grand Street Settlement	Mei Guey Jan	ReServe	22	22	18
Hamilton Madison House	Isabel Ching	VNSNY	7.25	7.25	7.25
Hudson Guild	Cheryl Kamen	VNSNY	14	14	21
Isabella	Carol Ban	Isabella Home Care	18	13	15
Jasa Bushwick/ Hylan-Family Friendly NORC	Jean Dumay	ICS-Independent Care System	14	14	7
JASA Warbasse Cares	Karin Stieber	VNS and Prime Health	11.4	11.4	7

Northridge/Brulene/Southridge NORC	Patricia L. Kaufman	Selfhelp Community Services	10.5	10	0
Penn South Program for Seniors	Nancy Spannbauer	VNS/Jewish Home Lifecare	14	14	7
Phipps	Josephine Roman	RN Volunteer	6	6	8
POB Cares/Project PACE	Alana Rosenstein	North Shore LIJ Health System	17.5	17.5	0
Queens Community House Forest Hills NORC	Evelyn Gottlieb	North Shore Long Island Jewish Home	7	7	5
Queensview/ North Queensview	Donna DeCielo	Selfhelp Community Services	10.5	10.5	18
Riis Settlement	Robert Madison	VNSNY/Consultant	11	11	3
Rochdale Village NORC	Sherba Austin	VNSNY	15	10	8
SAGE HARLEM CENTER	Cluis Jones	E-Linc (Elder LGBT Interprofessional Collaborative Care Program)	2	2	2
Spring Creek	Theodora Ziongas	VNSNY/Partners In Care	14	14	21
Stanley Issac Center	Janet Conroy- Quirk	VNSNY	18.5	13.5	6.5
Vladeck Cares	Betsy Smith	VNSNY	12	12	23



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Testimony of United Neighborhood Houses Before the New York City Council Committee on Aging Subcommittee on Senior Centers

## Honorable Julissa Ferreras, Chair, Committee on Finance Honorable Margaret Chin, Chair, Committee on Aging Honorable Paul Vallone, Chair, Subcommittee on Senior Centers

#### Presented by Kevin Douglas, Co-Director of Policy & Advocacy Preliminary Budget Hearing March 25, 2014

Good morning, my name is Kevin Douglas and I am here on behalf of United Neighborhood Houses (UNH), New York City's federation of settlement houses and community centers. Rooted in the history and values of the settlement house movement begun over 100 years ago, UNH promotes and strengthens the neighborhood-based, multi-service approach to improving the lives of New Yorkers in need and the communities in which they live. UNH's membership includes 38 agencies employing 10,000 people at 525 sites across the five boroughs to provide high quality services and activities to over 500,000 New Yorkers each year.

Typical member agency programs include: pre-kindergarten and afterschool, youth employment and college access, adult education and workforce development, mental health counseling and homelessness prevention, and services for older adults. Essentially, our members provide "onestop" shopping for all community members—be they children, youth, immigrants, older adults or working families.

#### Aging Population & UNH Agency Services

According to a 2013 report by the City Comptroller, by 2030 New York City will be home to 1.84 million people over the age of 60 - fully 20% of the total population. The promise and potential of these New Yorkers to share their experience and skills with their neighbors and communities is only limited by the degree to which the City proactively provides the tools they need to age in place. Unfortunately, for a significant number of these older adults, their wisdom and capacity to give back are often accompanied by higher incidences of poverty, disability and isolation.

In order to help meet the needs of these older adults, UNH member agencies provide an extensive array of services, including: Senior Centers, Innovative Senior Centers, Home Delivered Meals, Case Management, Naturally Occurring Retirement Communities (NORCS), Caregiver Supports, Social Adult Day Care, Home Care, Eviction Prevention, Section 202 Supportive Housing for Older Adults, Assisted Living Facilities, Nursing Homes, Community Based Care Transition and Telephone Reassurance.

Through this wide range of supports, our agencies have developed a strong expertise in serving older adults, as well as an awareness of gaps in service. Based on this experience, we recommend the City make the following investments in services to support older adults.

#### Older Adult Services Recommendations

#### Case Management—Support \$3m investment

Case Management supports are an integral part of supporting the health and wellness of older adults. UNH and our member agencies believe in proactively supporting individuals rather than simply responding to problems when they arise. For homebound elderly adults, case management is their link to the outside world that prevents isolation and enables them to remain in their homes as opposed to more costly institutionalized settings.

Unfortunately, most case mangers for older adults are severely overburdened with ratios as high as 75 older adults per worker. In addition, there are over 1,900 older adults around the City waiting to access case management services. UNH recommends an increase to the City's older adult case management program from \$2.6m, as proposed in the Mayor's preliminary budget, to \$5.6m. This investment would allow the Department for the Aging (DFTA) to reduce case loads to no more than 65 per case manager, and well as reduce City-wide wait lists.

## NORCs—Support \$4m investment

Naturally Occurring Retirement Community (NORC) services are an important tool for maintaining the health of entire communities of older adults. While case management services support older adults scattered throughout the City, NORC services are centralized in geographic concentrations of older adults. Supports typically include social and medical services as well as educational and recreational activities. Much like case management services, these supports promote the independence and wellness of older adults, with the added benefit of building and reinforcing neighbor-to-neighbor connections. The benefits of building this sense of community are as important as, if not more important than, the actual direct services themselves. Bringing together older adults in a geographically defined community helps reduce isolation as familial relationships and friendships wane over time.

While the Mayor's preliminary budget maintains last year's funding level of \$2.5m, UNH urges an additional investment of \$1.5m to expand NORC services in NYC Housing Authority (NYCHA) buildings.

#### Human Services System Recommendations

In addition to these targeted investments in support of the older adult population, there are several systemic issues facing the nonprofit human services sector that negatively impacts the ability of providers to offer high-quality and consistent services to their community. Chief among those issues is the largely under-compensated nonprofit workforce. Without livable wages, front-line staff are prone to seek better

employment opportunities, which leads to high turnover in the sector. This turnover jeopardizes the ability of providers to maintain the kind of close relationships with the community they need in order to serve them effectively. In addition, turnover is costly, given the expense of recruiting new staff and providing them with training required to carry out job functions.

While nonprofit agencies recognize the worth and contribution of their employees, they are hamstrung in their efforts to fairly compensate them by government contracts that fail to provide even minimal Cost of Living Adjustments (COLAs), much less meaningful workforce investments. In fact, human service nonprofit providers have not recieved City COLAs since 2008. However, over that same period of time, the City has settled many contracts with unions, providing for increases in recognition of the escalating costs in areas such as rent, utilities and medical care. Without these COLAs, providers have little means to support increases in staff salaries on their own.

In order to support the workers caring for the City's older adults, **UNH recommends a 10% COLA for human service contracts spread over FY16 and FY17— 5% in each year.** However, COLAs on top of already inadequate contracts will not solve the problems facing the City's nonprofit agencies and workforce. In order for COLAs to be meaningful and support the successful delivery of services in to the future, the City must first commit to raising the wages of workforce, while also supporting the development of career ladder opportunities. As City leadership grapples with the challenge of closing the burgeoning wealth gap, we call on the City to take a tangible step towards that goal by phasing in a wage floor of \$15/hr. for the lowest-paid nonprofit social services employees. This increase must be supported by adjustments to city contracts. In addition, UNH encourages the City to work with the sector on assessing career ladder opportunities and developing a comprehensive strategy to create opportunities for advancement.

Thank you for the opportunity to testify, and we look forward to working with you to improve the health and wellness of our City's older adult population.

For additional information: Kevin Douglas: kdouglas@unhny.org or 917.484.9321

# Penn South Social Services, Inc.

290 Ninth Avenue Suite 21K, New York, NY 10001 212-255-3570 • 212-255-3785(fax) • <u>president.psss@gmail.com</u>

# Testimony at City Council Committee on the Aging, March 23, 2015

I am Bonnie Williams, President of Penn South Social Services, Inc., sponsor of the Penn South Program for Seniors, a program that works in the Mutual Redevelopment Houses, Inc., co-op located in Chelsea. We have over 2,000 apartments, and 5,000 residents, a large percentage of whom are seniors. I'm here to speak about funds for NORCS, but especially about two aspects of our work, and the need for funding.

As a NORC receiving operating funds from both the State Office for the Aging (SOFA) and from the City Department for the Aging (DFTA), we are required by those agencies to find and report in-kind nursing services as well as support from the management of the Co-op. We have Mutual's continued support, however, we have lost two days of in-kind nursing service that had been provided by Jewish HomeLife Care. Seemingly, all the nursing agencies are rethinking their ability to give in-kind services, yet we are required to have them. As they are **non-reimbursable** items in both the SOFA and DFTA grants, we have relied on in-kind services, and these are now in jeopardy.

This is a major concern. NORCS ability to give nursing service to clients is a major component of care that allows seniors to 'age in place'. Without a regular visit from a nurse, the client can lose ground, forget medications, over medicate, become unable to help themselves, fall, have major injury, and end up in a ceaseless, hopeless round of hospitalization, re-hospitalizations, nursing homes, etc. And there is another important point – the money the governments pay NORCS to provide care to seniors in their homes is miniscule compared to the savings of thousands of dollars when the government has to pay for hospitalizations and nursing home care. We hope that funds for nursing care will be added to the grants. We hope that both DFTA and SOFA will begin to investigate the growing problems of NORCS meeting their criteria for in-kind services and will institute reimbursable nursing funding if in-kind care continues to falter.

My second request is that funds should be provided for transportation for seniors who need escort services to medical appointments and treatments. Our senior program had, for a short while, a small grant from a man whose sister was a regular participant at the program until her death. His grant was used for an escort service. However, he did not renew his gift. In the 2013-14 fiscal year, we took a small portion of our Councilman's gift and re-established the fund. We can provide a person to take someone out for dialysis, chemotherapy, cat scans, MRI's, etc., until the money runs out. This is such a vital service for seniors who live alone and have little or no family or friendly resources. This kind of humane aid should be a primary concern of our funding agencies.

These are small items in a large budget request, but they are important aspects of the care that NORCS give their clients every day, and deserve to be included in the funding. Thank you.



# TESTIMONY

# Budget Hearing: Administration for Children's Services and Human Resource Administration

Presented to

New York City Council, Aging Committee

Monday, March 23, 2015

Prepared By:

Mallory Nugent Policy Analyst for Human Services and Poverty Reduction

Esther Lok Assistant Director, Policy, Advocacy and Research

Submitted By:

Jennifer Jones Austin Executive Director/CEO

Federation of Protestant Welfare Agencies, Inc. 281 Park Avenue South New York, New York 10010 Phone: (212) 777-4800 / Fax: (212) 414-1328 My name is Mallory Nugent and I am the Policy Analyst for Human Services and Poverty Reduction at the Federation of Protestant Welfare Agencies (FPWA). I would like to thank Chairman Chin and the members of the Aging Committee for the opportunity to testify on critical programs that would strengthen the service delivery system for seniors throughout New York City, and allow older adults to age in healthy and successful ways, which are some of the main goals of FPWA's **Campaign for Successful Aging**.

FPWA is an anti-poverty, policy and advocacy nonprofit with a membership network of nearly 200 human service and faith-based organizations. We have been a prominent force in New York City's social services system for more than 92 years, advocating for fair public policies, collaborating with partner agencies, and growing its community-based membership network to meet the needs of New Yorkers. Each year, through its network of member agencies, FPWA reaches close to 1.5 million New Yorkers of all ages, ethnicities, and denominations.

FPWA envisions being a driving force of building a city of equal opportunity. We represent more than 30 senior serving agencies, who offer a wide range of services to older adults. We look forward to working with Council Member Chin, Council Member Vallone and the members of the Aging Committee and Senior Center Subcommittee on efforts that would reduce poverty, advance upward mobility and achieve shared prosperity.

Seniors need to be provided with greater opportunities for community-based supports and linkage to benefits and entitlements, enabling them to achieve economic security. Given the high poverty rate as well as the projected growth of the older adult population, sufficient supports within the senior services delivery system need to be in place now and for the future. We hope the City will consider making the following investments:

- 1. Add a Licensed Master Social Worker (LMSW) in all senior case management agencies
- 2. Invest in Social Adult Day Services
- 3. Identify programs and policies that would improve the economic security of older adults
- 4. Increase the capacity of vital programs serving seniors

# 1. Add a Licensed Master Social (LMSW) in all Case Management Agencies

With the aging of the baby boomers, New York City's senior population is set to grow significantly in the coming years. In particular, the 75+ population will experience a 27% increase, expanding from 419,483 in 2010 to 581,903 in 2030. New York must prepare now to meet the needs of this population in a way that is both cost effective and client focused.

FPWA recommends the Mayor and the City Council to allocate \$2.08 million in the city's FY 2016 budget to increase the capacity of senior case management agencies to serve clients with intense or higher levels of need. Specifically, this funding would provide each senior case management agency, DFTA-funded and non DFTA-funded, an LMSW. The LMSWs will be responsible for clients with intensive or higher level of needs. Their caseload would be kept at 25 seniors/ case, as compared to 65 seniors/ case manager in the general case management setting. Examples of intense or higher level of needs include, but are not limited to, impending eviction, unsafe living situation, hoarding and home infestation with bed bugs.

As of January 2015, there are approximately 1,900 individuals on the general case management wait list. While many seniors who are on the wait list have been connected to meal services, they are awaiting their home visit and assessment. FPWA's proposal will increase the capacity for general case management by transferring seniors with intense or higher need to the LMSWs, thereby freeing up space for general case management to take clients who are currently on the wait list. This proposal would allow general case workers to continue serving clients with lower level of needs, making more efficient use of their time.

One of the potential target populations of this proposal would be older adults who are at the beginning stage of dementia, without family and other informal supports. Another potential target is people who are declining cognitively, and have no informal supports to organize care. Through the provision of intensive case or care management, seniors are allowed to successfully age in place, in the homes and in communities where they are a part of. Furthermore, it provides the seniors with a sense of dignity and provides the city with a cost effective alternative to nursing home placements.

## 2. Invest in Social Adult Day Services

Nationally, an estimated 5.4 million Americans currently have an Alzheimer's Disease (AD) diagnosis. Within this population, approximately 200,000 individuals are under the age of 65. Throughout the coming decades, the aging of the baby boom generation is projected to result in an additional 10 million people living with AD. Today, there is a new case of AD every 68 seconds. By 2050, it is expected that there will be one new case of AD every 33 seconds, or nearly a million new cases per year.

To address the rising population of dementia and Alzheimer's Disease, **Social Adult Day Services (SADS) resources need to be increased to the previous allocation of \$2.3 million.** Without access to SADS programs, seniors who are not eligible for Medicaid but cannot afford to pay for SADS privately would be unable to access this service.

SADS provide therapeutic programming that helps seniors, including those with AD, maintain their everyday functioning and are also an important source of respite for caregivers. Transportation remains a high need for SADS programs and transportation allocations should include funds to support SADS programs on a consistent basis. FPWA urges the City Council to restore SADS funding to the previous allocation in the amount of \$2.3 million. We also support SADS programs receiving reimbursement for services for assisting caregivers in need of respite.

# 3. Identify programs and policies that would improve the economic security of older adults

By 2030, there will be 1.84 million older adults age 60 and older in New York City, which represents a 47% increase from 1.25 million in 2000. In addition, it is estimated that the poverty rate among New York City's older adult population is 32%. As living and health care costs continue to increase, many older adults struggle to maintain their homes. Ensuring older New Yorkers have the maximum independence and continue to contribute to the city's economic well-being is a key priority for FPWA. We urge leaders of our city to research and

support programs and policies, individually as well as in combination that would improve the economic security of older adults. We also recommend looking into promising models such as the digital entrepreneurship program for older adults, and polices such as increasing the minimum wage, and on the creation of a senior and disability tax credit.

# 4. Increase the capacity of vital programs serving seniors

The city's restructuring efforts during the previous administration and the economic downturn during the Great Recession has led to budget cutbacks impacting older adults. Sadly, funding to provide services for older adults has yet to be restored to the pre-recession level. FPWA recommends the Mayor and the City Council to commit making the following investment in the city's FY 2016 budget:

- Add \$9 million to fund social workers in senior centers and affordable senior housing
- Add \$3 million for senior case management system
- Add \$4 million to support Naturally Occurring Retirement Communities (NORCs) (\$2.5 million would be utilized to ensure no NORCs will be closed, while \$1.5 million would expand NORCs within NYCHA buildings)
- Baseline \$1.2 million in the Executive Budget to support the expansion sites of SAGE Centers
- Add \$3.3 million to increase meal reimbursement for senior centers and meals on wheels
- Restore \$2 million in senior transportation
- Add \$1.5 million to expand the capacity of meals on wheels to meet the rising case management caseloads
- Invest \$1.5 million to fund a new Holocaust Survivor Initiative
- Include 5% COLA on all human service contracts

We thank the City Council for the opportunity to testify. We hope that you will strongly consider our budget and policy priorities for FY 2016 during this year's budget negotiation process.

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