



City Council FY22 Preliminary Budget Hearing
Committee on Aging
Oversight: Serving Seniors in Senior Residences
and Communities During the Pandemic
June 22, 2021

Testimony of Myung J. Lee, President & CEO

My name is Myung Lee and I am the President & CEO of Volunteers of America-Greater New York (VOA-GNY), the local affiliate of the national organization, Volunteers of America, Inc. I would like to thank the Chair of the City Council Committee on Aging, Council Member Margaret Chin, for the opportunity to submit this testimony.

Volunteers of America-Greater New York (VOA-GNY) is an anti-poverty organization that seeks to end homelessness in the New York metropolitan area by the year 2050. We focus our continuum of care to address the most prevalent causes of homelessness: (1) lack of affordable **housing**; (2) unmet **health** needs, including but not limited to mental health and substance use; and (3) lack of jobs that create **wealth**. In each of these areas we strive to incorporate strategies that address issues of racial equity. We know that our clients are confronting longstanding barriers to accessing quality housing, healthcare, and employment. Our programs are designed to ensure that our clients do not have to face these challenges alone.

VOA-GNY operates and provides services in emergency shelters, transitional housing, and permanent supportive housing for close to 11,000 men, women and children through 65 programs located in New York City, Northern New Jersey, and Westchester annually. We are one of the largest providers of services to families and individuals experiencing homelessness in the Greater New York area, serving survivors of domestic violence, people living with HIV/AIDS, veterans, and others who have behavioral health or substance use needs.

VOA-Greater New York is the sole provider of supportive housing services in City-owned single room occupancy residences (SROs). Our SROs do not yet meet the definition of a Naturally Occurring Retirement Community (NORC) and therefore do not qualify for funding designated for NORCs through the NYC Department for the Aging (DFTA), but as our tenants age and their needs become more complex, we must be able to provide them with additional supports so they are able to remain in the community they know safely, for as long as possible.

These SROs were not necessarily developed with older adults in mind, but many of our residents have lived with us for years, and in some cases, decades. An SRO cannot accommodate a live-in aide, and shared rooms do not afford the privacy needed to address a broad range of medical needs, from changing bandages to conducting an at-home dialysis procedure. To effectively meet the needs of aging adults who are experiencing or are at risk of experiencing homelessness, there must be greater public and private investment in affordable housing for aging adults.

A study published by University of Pennsylvania in 2019 noted unprecedented levels of homelessness among the late Baby Boom cohort because they have faced economic disadvantage throughout their lives, having entered the labor force and housing markets facing back-to-back recessions in the late 1970s and early 1980s. This study, which was published 11 months before the first known case of COVID-19 in New York, projected there would be 18,000 homeless adults age 55 and older in NYC by 2030, based on historical trends and demographic data.

In recent years, VOA-GNY has extended its expertise to the thoughtful, effective, and efficient development of purpose-built housing for NYC's older adults who are homeless or at risk of becoming homeless. Last month, we welcomed the first tenants into our East Clarke Place Senior Residence (East Clarke Place) in the Bronx. Designed specifically to meet the needs of older adults, the 14-story building has 122 studio and one-bedroom apartments. Thirty-seven of the apartments are reserved for chronically homeless older adults who will move into fully-furnished, accessible studio apartments with all the services they need to stay permanently housed, safe and connected. Eighty-four apartments are being filled by lottery, and those applicants must meet age and low-income requirements. The remaining unit is reserved for a fulltime live-in super. No tenant will pay more than 30% of their income toward housing.

One of our tenants, Rosalind, lived in a third floor walkup in the Bronx before she moved into a one-bedroom apartment at East Clarke Place this month, having secured the residence by way of community lottery. Rosalind is an army veteran and has been working non-stop since her service ended, most recently for 17 years at a bank on 170th and Jerome, before retiring. Rosalind receives two monthly infusions to treat her neuropathy, has had bilateral knee replacements, and had been relying on an albuterol pump to ease her difficulty breathing as she made her way up the stairs in her old walkup. Her doctor had prescribed her a motorized scooter, but she never tried to obtain one, having had no place to store it and fearing that if she left it outside her prior home, it would have been stolen.

Rosalind had been applying for housing through NYC Housing Connect since 2010, and was stunned when she learned she had “won the lottery.” Because she “lives to cook,” she’s thrilled with her brand new kitchen, with its ample cabinets and pantry. Additionally, Rosalind now looks forward to getting a motorized scooter.

While we are proud that East Clarke Place is a residence where adults can age safely and with dignity, we were astonished and heartbroken to receive 26,000 applications, including 200 that were handwritten, for only 84 low- and very low-income units for aging adults. This was a sobering reminder that there is a tremendous unmet need for affordable senior housing with on-site supports.

East Clarke Place serves as a model for how non-profits with expertise in the housing sector can partner with government to effectively meet the growing demand for permanent supportive housing. Financing sources for this \$69 million development project included Reso A grants from Council Member Vanessa Gibson and Bronx Borough President Ruben Diaz, HPD’s Senior Affordable Rental Apartments (SARA) Program, HDC’s Extremely Low- and Low-Income Affordability (ELLA) Program, NYS Energy Research and Development Authority Funds, and tax credit equity.

In the fall of 2021, Volunteers of America-Greater New York will begin the ground up construction of Andrews Avenue South Senior Residence, a 9-story building providing permanent housing in what is currently an abandoned parking lot. This development will provide affordable housing for 118 individuals earning no more than 30%-60% of the local area median income (AMI), and all of whom will benefit from rent subsidies and will not pay more than 30% of their household income. Eighty of the building's units are open to seniors who are considered low-income, and half of this number will be targeted specifically for low-income Bronx seniors. Thirty-seven of the building's units will serve chronically homeless seniors. One unit will be reserved for the building's superintendent.

Tenants will have access to resources that are not readily available in buildings in New York City including recreational activities, access to Wi-Fi, and a terrace garden where seniors will be able to plant fruits and vegetables and create a garden of their own. Every tenant will have access to a large community room, multiple lounges, reading areas, and beautifully landscaped outdoor areas that offer residents the opportunity to interact with friends and neighbors. Tenants will have laundry facilities on every floor, a bike storage room, and extra storage space. The building will also include Green and Sustainability features to achieve LEED for HOMEs Platinum certification. VOA-GNY will provide concierge resources and care coordination services that support tenants in accessing on-site and off-site services. The supportive services that will be provided will allow tenants to transition from housing instability to a life of hope, resilience, and security.

I urge members of the Committee on Aging and their colleagues in the New York City Council to prioritize funding new affordable housing units for aging adults, who deserve to live in spaces that are beautiful and designed with their specific needs in mind. VOA-GNY will continue to do its part, working in concert with public and private partners to leverage the expertise of our staff and develop more permanent supportive housing for those who need it the most.

Respectfully submitted by:

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**Testimony of
Kevin Jones
AARP New York**

**New York City Council
Committee on Aging**

June 22, 2021

**Remote Hearing
New York, New York**

Contact: Kevin Jones (646) 668-7550 | kjones@aarp.org

Subject: Oversight - Serving Seniors in Senior Residences and Communities During the Pandemic

Good morning Chair Chin and members of the Committee on Aging. My name is Kevin Jones and I am the Associate State Director of Advocacy at AARP New York, representing 750,000 members of the 50+ community in New York City. Thank you for providing AARP with the opportunity to testify at today's oversight hearing to discuss services for seniors living in senior residences and communities amid COVID-19.

The COVID-19 pandemic has had a disproportionate impact on the lives and well being of the more than 1.7 million 60+ adults in New York City, of whom 136,000 are homebound and nearly 20 percent are living below the federal poverty line. Since the start of the pandemic, older New Yorkers have made up a significant bulk of the deaths from COVID-19 and have faced unprecedented challenges in accessing critical services, such as health care, meals, technology, case management, and social activities as a result of the closures of senior centers and other in-person services across New York City due to COVID-19.

Over the course of the past year, COVID-19 has caused significant disruptions to a wide array of critical services for both homebound seniors and New Yorkers aging in their homes and/or living in NORC's. In AARP's "Disrupt Disparities 3.0" report, we found that at the height of the pandemic in New York, home health agencies in the City and across the State struggled to provide continued care to seniors as a result of significant staffing and PPE shortages. Many seniors and caretakers were left with few options for quality care as community-based providers that offered respite, adult-day care, and other related services were required to close due to COVID-19 restrictions. A large portion of older adults, who are not homebound and/or do not require caretaking services, also reported that they struggled to access primary care in person out of fears that they would contract COVID-19 and did not have sufficient access to telemedicine due to technological limitations.

Older New Yorkers in communities across the City also experienced high rates of food insecurity and social isolation in part due to closure of senior centers and in person social services. As the City's senior center providers were required to close their doors over the past year and transition their services to virtual settings, the City witnessed an increased demand for food and meal delivery services among older New Yorkers, given that tens of thousands of individuals relied on senior centers for meals throughout the week prior to the pandemic. While the City established GetFoodNYC to help meet this demand, AARP heard numerous accounts of how some of the meals prepared were not nutritionally or culturally appropriate for older adults. Without the ability to attend in

person programming and social activities offered by senior centers, older New Yorkers have also suffered from higher rates of social isolation over the course of the past year, especially those who were unable to access virtual programming offered by their senior centers because of an overall lack of access to internet-enabled technology.

Many of these issues were only compounded for NYCHA's senior residents due to a myriad of infrastructure issues that have plagued NYCHA for years, as well as the temporary shutdown of NYCHA's senior centers. While NYCHA's tenants have suffered from unsafe and substandard housing conditions for years, such as chronic elevator outages and broken air ventilation systems, these issues have had an immense impact on the well-being of NYCHA's senior residents amid COVID-19. Numerous reports have demonstrated how chronic elevator outages and lack of reliable elevator services severely disrupted the lives of NYCHA's older tenants and made it even harder for individuals who have mobility issues to access vital services during the pandemic, such as meal deliveries, groceries, healthcare, and other critical social services.

As the City begins to reopen and recover from the COVID-19 crisis, AARP recommends that the City take a series of steps in order to ensure that the City's older adults receive quality care and services that ensure their health and wellbeing moving forward.

We commend the Mayor's recent commitment to invest \$58 million into the five-year "Community Care Plan" for older New Yorkers. We believe that this investment will only serve to strengthen the City's network of care and services to help support older adults aging in their homes and communities, as well as address some of the gaps in services that became apparent amid the pandemic over the past year. However, we believe that the City Council should restore pre-pandemic funding for key initiatives, including NORCs, the Geriatric Mental Health Initiative, and the Health Aging Initiative, in the FY22 Budget in order to further support the health of our City's older adults in months ahead.

We were also eager to see the City's determination to reopen senior centers for in-person services and programming. While we believe that this will be a significant step in addressing the issues that have affected the overall wellbeing of older New Yorkers, especially food insecurity and social isolation, it will remain critical for the City to ensure that older adults continue to have access to quality home delivered meals as the City works to recover from the health and economic crises caused by COVID-19.

Specifically, AARP calls on the City Council to ensure that the City sets aside \$16.6 million in funding for home-delivered meals in order to meet the new demand among older New Yorkers.

We also believe that it remains critical for the City to address the digital divide in order to better support older adults and improve access to services. As this pandemic has demonstrated the sheer importance of ensuring that older adults have access to technology to remain connected to services and programming to reduce social isolation, we encourage the City Council to work with the Mayor and allocate \$4.4 million in one time funding in the FY22 budget to improve access to technology and technological literacy courses at senior centers, as well as provide devices directly to older New Yorkers to remain connected at home.

Thank you for providing us with the opportunity to testify at today's hearing. I am more than happy to answer any of your questions.



**New York City Council
Committee on Aging
Chair Council Member Chin
June 22, 2021**

**Oversight - Serving Seniors in Senior Residences and Communities During
the Pandemic**

Thank you for the opportunity to testify.

LiveOn NY's members include more than 100 community-based nonprofits that provide core services which allow all New Yorkers to thrive in our communities as we age, including senior centers, home-delivered meals, affordable senior housing, elder abuse prevention, caregiver support, NORCs, and case management. With our members, we work to make New York a better place to age.

With our City on the road to recovery, we are presented with the opportunity to re-envision how we serve older adults in senior residences and throughout our community. The COVID-19 pandemic uncovered the growing need for aging services as well as shined a light on the visible inequities in supporting all New Yorkers as we age.

Senior Residences

While New Yorker's have heard of the stark and heart wrenching realities that took place in nursing homes during the COVID-19 crisis, the dichotomous experiences of independent senior residences has been less explored to date. While loss was a reality across New York, HUD 202s and Senior Affordable Rental Assistance (SARA) buildings fared significantly better than one might have feared. The challenges in this relative success were significant, as providers were not only worried about safety, but of ensuring older residents remained fed and avoided social isolation during this time.

The stars in confronting these challenges were not only the non-profit organizations that stepped up to connect older residents with the City's emergency feeding programs, or in other pop-up programs such as LiveOn NY's work with World Central Kitchen, Citymeals, and others, but the Service Coordinators who remained a lifeline for tenants throughout the pandemic. It would not be an exaggeration to say that the availability of service coordinators in buildings saved lives during COVID-19.



Making New York a better place to age

Unfortunately, not all senior residences can afford to hire service coordinators or staff the building to the extent that would be ideal. **As the City looks to become a leader in public health, this, creating a fund for senior residences to hire service coordinators to assist older New Yorkers in the enhanced needs that come with aging in place, is the empirically proven first step in that direction.** Our member, Selfhelp Community Services, has research proving the effectiveness of this investment, as the presence of a service coordinator in buildings, even prior to COVID, meant reduced health care expenditures, namely: lower emergency room use, shorter stays per use, and increased use of primary care services.

Further, as the population ages, it is critical that increasing investments be made by the City to meet demand to combat this crisis-level shortage of housing supply.

Many older New Yorkers rely on affordable senior housing with services to comfortably age in place. The need for affordable senior housing with services continues to rise with many older New Yorkers living on fixed incomes that cannot keep up with rising rent cost; experiencing mobility challenges that limit housing options within an aging rental-stock. In 2016, LiveOn NY found that an estimated 200,000 older adults were on waiting lists for housing through the HUD202 program in New York City.

In addition, NYCHA developments also represent one of the few affordable housing options for older adults in our City. Just as the buildings are aging, so are the tenants that occupy them, making the need for quality, safe services in NYCHA paramount to the success of the community.

- **The City must work to continue to increase capital funding for public housing** to support ventilation upgrades and other critical infrastructure improvements that will improve both residential and community space within NYCHA;
- **Increase the supply of affordable housing by investing in the construction and preservation of 8,000 units of affordable housing annually, including 1,000 units with services to be set aside for older New Yorkers.** This recommendation is included in the New York Housing Conference led United 4 Housing Coalition report which lays out numerous goals to equitably address our City's affordable housing crisis.
- **Restore and baseline all one-time funds for NYCHA Social Clubs.** All funding for senior programming in NYCHA community spaces should not rely on one-shot funding from the Administration, but should be sustainably baselined and incorporated into the full scope of DFTA services;



Communities

While strides have been made, particularly with the reopening of senior centers, there is still more to be done. For years, the Department for the Aging (DFTA) remains critically under-resourced, receiving less than half of one percent of the overall City budget, in contrast to the rapidly increasing older adult population.

New York City is entering a critical phase of the recovery, as we progress forward in building a New York for all ages. The City must continue to show its commitment to older adults with critical investments in senior services:

The City should support essential services that include:

- Restoring All City Council Aging Discretionary Funds To FY20 Levels
- Restore and Baseline all Executive One-Time Funds, including funds for NYCHA Senior Centers.
- Use FY21 accruals to cover costs associated with reopening in person senior services as well as \$30 million for HVACs repairs, safety precautions, and Senior Center upgrades.
- \$48 Million Cost of Living Adjustment (COLA) for essential human services workers, who have been on the frontlines throughout the pandemic.
- \$16.6 million for Home-delivered Meals that would provide \$13.6 million for weekday meals and \$3 million for weekend and holiday meals, both to increase capacity to meet new demand and bring the per-meal rate to the national average.

Thank you for the opportunity to testify.



**New York City Council Committees on Aging:
Oversight Hearing: Serving Seniors in Senior Residences and
Communities During the Pandemic
June 22, 2021**

Thank you Chair Chin for the opportunity to submit testimony for the *Oversight Hearing: Serving Seniors in Senior Residences and Communities During the Pandemic*. JASA welcomes today's hearing as an opportunity to share our experiences throughout the COVID-19 pandemic as well as suggestions as we move forward.

JASA is a not-for-profit agency that honors older New Yorkers as vital members of society, providing services that support aging with purpose and partnering to build strong communities. For over 50 years, JASA has served as one of New York's largest and most trusted agencies serving older adults in the Bronx, Brooklyn, Manhattan, and Queens. JASA has a comprehensive, integrated network of services that 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 of diverse backgrounds and include home care, case management services, senior centers, NORC supportive services, home delivered meals, caregiver support, continuing education, licensed mental health, senior housing, advocacy, legal services, adult protective services, and guardianship services.

The past 15 months have brought many challenges for everyone and particularly for older New Yorkers. Each decade of life from the age of 60, brings increasing vulnerability to COVID-19 related disease and death. This vulnerability is exacerbated in communities of color and among immigrant older adults who may have chronic health risks due to years of poor health care. This time has also highlighted the terrible toll of social isolation and loneliness and the technological divide experienced by older persons. It is clear that technology plays an essential role in every aspect of our lives, and the consequences are severe when one does not have access. Older persons who, prior to the pandemic, were independent, found themselves in a more uncertain position. The pandemic also revealed the critical role community based organizations, like JASA, play in the delivery of trusted information and services.

JASA appreciates the opportunity to share our concerns and experiences with the New York City Council through the many Aging and pandemic-focused hearings you have held this year. JASA has been explicit regarding the need for access to resources, technology and multilingual, reliable information.

New York is in a new phase, with vaccines widely available, and the COVID-19 positive results dropping steadily. JASA is continuing to work closely with the New York City Department for the Aging, and the

New York City Vaccine Command Center, as well as the New York State and federal government's efforts to vaccinate our program clients, members, and staff.

- JASA senior staff called thousands of older adult participants in our programs and services to educate them about the vaccine, encouraged them to register for vaccinations, and actively assisted in scheduling appointments and transportation.
- JASA uses our social media platforms, and wide email circulation to share up-to-date information with our employees, community partners and clients. We hosted information sessions to debunk myths and share current science with those who remain hesitant.
- JASA manages ten HUD Section 202 affordable senior housing buildings. Since the beginning of January, JASA has hosted vaccination clinics at each of the housing sites. Approximately 70% of tenants were fully vaccinated through this effort.
- Many JASA senior centers and NORC programs have hosted pop-up vaccination sites over the past few months, and JASA Bay Eden Senior Center is contracted to serve the community as a vaccination location through September.
- JASA is working in partnership with the City and the Department of Health and Mental Hygiene to arrange in-home vaccinations to home-bound individuals.

We are aware of a significant level of vaccine hesitation and JASA is eager to partner with the City to identify new ways to encourage and help facilitate vaccinations. Despite vaccination education efforts and targeted outreach to the unvaccinated, there is still a need for a concerted effort on the part of the City to reach those reluctant to vaccinate. There may be a greater response to efforts by medical professionals who speak additional languages, and or other incentives that are more attractive to specific populations. With philanthropic support, JASA recently hired a vaccine coordinator to help develop an information and engagement campaign to counter the misinformation that is currently widespread.

As congregate programming returns to DFTA sites, JASA is taking extra precautions to ensure the safety of staff and older adult participants. Everyone is eager to reopen and resume programming, albeit with understandable and relatable concerns. We will continue to look to the City for guidance and communication as we move forward.

Thank you for the opportunity to offer this testimony.

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Asian American Federation

Testimony to the New York City Council Committee on Aging

June 22, 2021

Written Testimony

I want to thank the Committee on Aging for holding this hearing and giving the Asian American Federation (AAF) the opportunity to testify on the needs of our senior community and senior service providers. I'm Dorothy Jiang, Membership and Capacity-Building Coordinator at the Asian American Federation. AAF represents the collective voice of more than 70 member nonprofits serving 1.3 million Asian New Yorkers.

We're here because 13% of the city's senior population are Asian, one in four Asian New Yorkers lives in poverty, and 72% of Asian seniors have limited English proficiency (LEP) and comprise more than two-thirds of the senior population in many neighborhoods across Brooklyn and Queens. Before the pandemic, our seniors went to senior centers for social activities, congregate meals, assistance applying for social services, and health and mental health services. Now, many seniors are still too afraid to leave their homes to go to senior centers, so they need at-home services that meet their needs. At the same time, one in four LEP-Asian seniors in the city do not have access to the Internet at home. While the reopening of senior centers is a cause for connection and celebration, our seniors and senior-serving organizations face additional crises.

One of these crises is the surge in anti-Asian violence, especially toward our elders. On March 29th of this year, someone attacked a 65-year-old Asian woman in Midtown, knocking her down and stomping on her. On April 5th, someone pushed a 77-year-old Asian man to the ground in Brooklyn. Between February 2020 and March 2021, there were over 1,700 attacks on Asian New Yorkers. And sadly, there were more hate crimes targeting Asians in the first four months of 2021 than in all of 2020. In fact, New York City now has the highest number of anti-Asian hate crimes of any city in the entire nation. This surge has understandably left seniors terrified to leave their homes.

As a result, our seniors have become more isolated with fewer resources. Our senior-serving member agencies have expressed how most of our seniors live by themselves and feel great anxiety about accessing public benefits. Asian seniors, many of whom are immigrants, have a greater need for access to these programs in part due to the continued aftereffects of the previous administration's public charge assault that resulted in immigrants disenrolling from public benefits. They feared that it would affect their and their family's chances of pursuing a path to citizenship. Our seniors have also been left struggling as our world has become increasingly virtual. Many seniors don't have smartphones or computers to get on Zoom or even open an

email account. If they do have the technology, they don't have in-language support to learn how to use it.

Our senior-serving member agencies are working beyond capacity to create processes to make sure our seniors are getting the services they need as efficiently and safely as possible. One organization hosted in-person computer classes before the pandemic, and now during the pandemic, they spend multiple days coaching seniors on how to join virtual counseling sessions. Another organization is using their meal delivery service to conduct mental wellness checks with trained volunteers in Queens. From May to November alone, AAF helped six senior-serving organizations to serve almost 3,000 seniors with nearly 20,000 food services and 8,500 assurance calls. Our own Hope Against Hate campaign is working toward immediate safety for Asian New Yorkers. As part of our \$10 million new initiative funding request, we can create safety ambassador programs, as requested by our seniors, in Asian enclaves across the city and set up multilingual victim support services, including mental health support and an assistance fund to help with assault-related expenses.

For all the work our senior service agencies are doing, from Fiscal Year 2002 to 2014, the Asian American community received a mere 1.4% of the total dollar value of New York City's social service contracts, a reflection of a broader, long-term trend. As we navigate the re-opening of senior centers, our City must do better to support these agencies. On the agency side, our members have questions about how centers will look different from before the pandemic, including whether only vaccinated seniors are allowed to return in-person. One of our senior-serving agencies is housed within a senior center, and it isn't clear what effect reopening will have on them. On the community side, our seniors want to return to centers, but they are afraid to leave their homes amid all this violence. Our agencies need more guidance from the City to prepare for welcoming back our most vulnerable community members. We need to invest in our CBOs because our seniors continue to reach out to our member agencies before ever reaching out to City agencies or services.

In this time of increased public anti-Asian racism, we need concrete support from our elected officials. The City must increase investment in safety net programs, such as culturally competent senior centers and food programs. We must prioritize the CBOs that have the expertise needed to make the most of every dollar in our communities. This means giving greater weight to organizations with a demonstrated track record of serving low-income, underserved immigrant communities with linguistic and cultural competency. Our CBOs are leading by example in the provision of direct services, from providing wrap-around services that include mental wellness checks, to allying with food suppliers that provide culturally competent food. It'll be our CBOs that will be instrumental in restoring trust between our most vulnerable populations and the City.

Recommendations

- Give more thorough guidance on re-opening protocols and assistance so CBOs can make as seamless a transition as possible to in-person services, like congregate meals, for our senior population.
- Provide more funding for CBOs to tackle seniors' main areas of need: food and nutrition, technology access and usage support, language support, and mental health and social isolation.

- Fund the Asian American Federation's Hope Against Hate Campaign with \$10 million in new initiative funding so we can provide community-centered solutions to the rising anti-Asian hate crisis that our seniors have asked for, like safety ambassador programs that we're ready to pilot with the very CBOs they go to for help, like the Brooklyn Chinese-American Association.
- Fund the full implementation of Local Law 30 across City agencies so our seniors have access to quality language translation when and where they need it.

Our CBOs have led by example in how to support our seniors, and this moment presents an opportunity for this City Council to show that New York City can still lead by example in protecting its most vulnerable. We at the Asian American Federation thank you for allowing us to testify and look forward to working with all of you to make sure our senior communities get the support they deserve.



**Oversight: Serving Seniors in Senior Residences and Communities During the Pandemic.
Aging Committee
June 22, 2021**

**Testimony submitted by: Rachel Sherrow
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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, and Chair Chin, for advocating on behalf of those who were the most vulnerable and isolated during the pandemic, and needed tremendous support given mostly by not for profits serving them holistically then, and now. Citymeals was able to deliver nearly 3 million meals in FY 20, to over 20,000 homebound elderly receiving meals on wheels, and 25,000 formerly congregate and newly homebound citywide due to COVID-19, an increase in our distribution of food of 25%.

Citymeals continues to consistently feed thousands weekly who are not part of the home delivered meal system; those in NORC's, senior housing, and those with aging advocates, ensuring they get food. We delivered our first emergency meals on March 5, 2020, at least a week before the city shut down, because we were concerned

something might happen which could necessitate having food on hand for our most vulnerable older adults already unable to shop and cook for themselves. This is what we do and what we want to be able to continue to do, now and in the future regardless of the emergency or crisis. We knew hunger for our recipients was an issue before the pandemic, during and will continue after we fully emerge from the crisis. We know that older adults who are vulnerable and isolated in 'normal' times, need to be assured they will continue to receive food and attention if and when we face another catastrophe.

I would also like to emphasize the fact that Citymeals along with our partners and advocates, have consistently lobbied for the support of aging services, which are continually underfunded and under-supported. Despite the growing population of older adults, aging funding has been held stagnant or worse. In addition, this pandemic has disproportionately affected our population, in regards to both their health, and by being forced to isolate for an undefined amount of time. Now that senior centers are starting to re-open we hope to see a shift in need. We hope that those who used to attend a center and get a daily meal will feel comfortable returning now that they are finally re-opening.

However, Citymeals always stands at the ready to make sure older adults around the city can get meals if necessary. We would like to

see a program implemented by the city in partnership with Citymeals to pre-supply congregate sites, NORC's, senior housing and other places older adults live, to make sure they have food on hand if they are unable to access some on their own due to a local emergency or other.

Citymeals on Wheels was founded forty years ago to fill the gap in city services, helping to provide weekend and holiday meals. More recently, Citymeals has been the de facto emergency responder for older adults beginning with 9/11, and proven over and over again throughout the years and especially during Superstorm Sandy, when we delivered hundreds of thousands of meals, working twenty-four hours a day to package and deliver meals to those throughout the city to those unable to leave their homes or cook due to power outages and fear. Once again, during the pandemic, we illustrated how resilient, focused, and productive we know we are, by securing, packaging, and delivering nearly one million emergency meals IN ADDITION TO OUR REGULAR WEEKEND AND HOLIDAY MEALS – a total of almost 4 million meals, to those older adults in need of food.

While the Department for the Aging funds the meals that homebound elderly receive Mondays through Fridays, Citymeals on Wheels funds the same network of providers to deliver weekend, holiday and emergency 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. Most people though, eat seven days a week. Without Citymeals, our most vulnerable older adults, would not have food on the days the city shuts down. In fact, Citymeals, as an added benefit generates revenue for New York City through the federal government's cash in lieu of commodities program which 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 \$1.4 million last fiscal year and an additional 180,000 home delivered meals for those who need it.

Access to food and better nutrition, is an effective way to cut medical costs and improve overall health, especially for older adults, thus making meals on wheels an incredibly vital program and Citymeals essential to the continuation of meals for those unable to shop or cook for themselves. As we know, our population is needy and hungry throughout the year, many normally live on the edge. Home delivered meals is essential in ensuring at least one nutritious meal a day is available to consume. Reliance on home delivered meals has only increased since the pandemic and has reassured many new recipients that they are not forgotten and will have food.

The daily Home Delivered Meals program throughout the city, along with support from Citymeals, remained seamless even when the city shut down services throughout because of COVID-19. As a sector, aging providers have always known how critical our services are,

but not more so then when meals on wheels staff were essential workers, making sure their recipients didn't go without food and a friendly face, risking their own lives to maintain a lifeline for our elderly neighbors. The check-in can be almost as important as the nutritious meals. The social isolation, which was an issue before the pandemic, has nearly devastated this population. Unable to socialize or even see family, or risk a trip to the doctor, afraid of infecting those in the most vulnerable group, has been very difficult and added another layer of stress for older adults already coping with health issues, income insecurity and hunger.

We also know that older adults are the fastest growing demographic, and 1 in 7 older New Yorkers lives in poverty. Living longer, and on fixed incomes means more struggle over access to food for this vulnerable group under NORMAL circumstances.

Thus, home delivered meals are integral to their survival and part of the larger safety net that has been under-funded and under-invested in over the years. Ensuring that our meal recipients have food throughout the week is what the partnership between Citymeals and the meals on wheels provider network does. Without Citymeals, tens of thousands of (currently over 20,000) homebound older adults would no longer receive meals on weekends, holidays or in times of emergency. And now when the meals on wheels rolls have increased by over 20%, it is imperative for those in need to receive

extra, supplemental food in addition to their daily meals because accessing other means of nutrition is less possible now for most of them.

Citymeals as a not-for-profit will continue to raise private dollars in order to meet the needs of our partners in the years to come.

However, we also need the support of our partners in city government to help us reach all of our recipients consistently and without a disruption in service. This kind of partnership is even more crucial in times of uncertainty or when facing potential crises like the COVID-19. Citymeals, through our Bronx warehouse, has the capacity to pre-supply both meals on wheels clients and older adults who attend senior centers, live in NORC's or other supportive housing, with shelf stable food in the event of an emergency, a closure of centers, or a suspension of meal delivery service. We keep 100,000 meals on hand and are able to package more quickly, if necessary, to assist those we normally serve and those who are older and in temporary need.

Citymeals on Wheels together with the Department for the Aging, and The New York City Council, are determined to keep older adults living safely in their own communities and at least 20,000 elderly New Yorkers who receive meals on wheels, fed 365 days a year plus some extra. We hope you, our partners in city government, will help us to continue to advocate on behalf of those who are often

forgotten and marginalized and demand increased support for senior services and emergency meals funding for Citymeals on Wheels.

As we move through our incredible 40th year, we thank you for consistently working with us and I hope we can count on your support once again this year.



Testimony to the New York City Council Aging Committee: Serving Seniors in Senior Residences and Communities During the Pandemic

Delivered on June 22, 2021

by Melissa Sklarz, Senior Government Relations Strategist

On behalf of all of us at SAGE, thank you to the City Council for holding this hearing on serving our City's elders in elder residences and community in the midst of the COVID-19 pandemic.

SAGE is the country's first and largest organization dedicated to improving the lives of LGBTQ elders. Founded in 1978, SAGE is a cornerstone of New York's LGBTQ community, providing vital services to LGBTQ elders and older people living with HIV for over 43 years. SAGE is grateful for the enduring support from the New York City Council, which has fueled our crucial services and enabled SAGE to pivot our programs and services to adapt to this new reality in the midst of a public health crisis.

The urgency of SAGE's response to COVID-19 stems from the daunting reality that LGBTQ elders and older people living with HIV are at the epicenter of this pandemic. This is not only because of their age, but also because of: (1) disproportionately high levels of underlying health conditions like HIV and diabetes; (2) higher levels of poverty and food and housing insecurity; (3) lower access to health care and supportive services; (4) social isolation and thin support networks; and (5) mistrust of government and other institutions based on historical and current discrimination and mistreatment. All of these challenges are even further exacerbated for transgender elders and LGBTQ older people of color. The cessation of in-person services and programs for older adults has made access to technology crucial, if not life-saving.

Throughout the pandemic, SAGE has been and continues to be LGBTQ elders' lifeline. Many LGBTQ elders depend on SAGE for assistance with essentials like food and access to medical support. As LGBTQ elders sheltered in place, food insecurity and social isolation became severe threats. Many turned to SAGE for social connection and community through social and educational programs.

While the pandemic rendered in-person congregate programs unsafe, SAGE reimagined our existing programs and launch new initiatives to engage LGBTQ elders safely. For food insecure LGBTQ elders, SAGE connected those SAGE participants to GetFoodNYC. Fighting isolation and keeping our constituents connected, the Virtual SAGE Center is **offering more than 100 support groups, classes, and activities each week**. SAGE has **provided compassionate, phone-based**

support to thousands of elders each week. To ensure that LGBT older New Yorkers have the support that they need to navigate life during a public health crisis, SAGE has been offering ongoing virtual and telephonic meetings, support groups, financial support services, and programs.

In addition SAGE and our developer partners recently opened New York State's first LGBT-welcoming affordable elder housing developments, Stonewall House in Brooklyn (2019) and Crotona Pride House Senior Residences in the Bronx (2020). Both developments are located in predominantly mainstream communities of color and house a population of low-income and formerly homeless individuals, ages 62 and older.

Throughout the pandemic, SAGE has supported the tenants in our City's and State's very first LGBT-friendly elder housing developments. Stonewall House, located in the Fort Greene neighborhood of Brooklyn, opened in 2019 and welcomed over 140 new residents in 2020. To support SAGE housing residents who are acclimating to their new homes and new neighborhood during a pandemic, SAGE staff have been onsite several days per week – from the beginning of the pandemic – to conduct wellness checks door-to-door, deliver groceries, and coordinate care with other providers and caregivers, all while following Covid-19 safety protocols. The team is also providing social services by email, telephone and Zoom. Moreover, the Stonewall House community is beginning to coalesce. The residents have formed a building-wide Tenants Association and have developed a strong community and support network.

In January 2021, SAGE opened the Crotona Pride House which consists of 83 units of LGBTQ-welcoming affordable housing in the East Tremont neighborhood of the Bronx. Over the last few months, Crotona Pride has begun to move in tenants. Crotona Pride House offers stable, affordable housing to predominantly low-income LGBT older adults of color. Soon, we will open the ground floor SAGE Center, providing LGBT-competent services to the building's residents and hundreds of their Bronx neighbors.

SAGE Center Bronx will provide congregate meals, programming and services to the building's residents, as well as elders living in the Tremont and surrounding Bronx neighborhoods. By collocating an older adult center in elder housing, SAGE will deliver life-saving housing, programs and services to historically underserved LGBT elders where they live, leading to their improved health and stability. Given affordable housing requirements that the residents of Crotona Pride House must be low-income in order to qualify, and that 40% of the 83 units house chronically homeless elders, we anticipate that the level of need for programs and services at to be far higher than for most older adult centers – a trend that SAGE has seen at Stonewall House in Brooklyn.

Many in this population of LGBT older adults present with complex needs, including significant medical and behavioral health issues, since they have so often been disconnected from the social safety net. Further, the generous discretionary support that SAGE receives from the Council enables SAGE to serve our existing population of elders engaging in SAGE Center Bronx's program and service offerings, but will not fuel our programs and services for the elders

residing in the building and in the neighborhood. This dynamic is one that other elder serving agencies providing services in elder residences are facing, as well.

Throughout the past 15 months, one thing has become starkly clear: the COVID-19 pandemic has showed our City how critical it is to care for older New Yorkers. Poor communities, those living at the intersections of oppressed identities, those with chronic health conditions and isolated people have and continue to bear the brunt of this catastrophic illness. LGBT elders are among those who are most at risk. As our city continues to navigate the challenges posed by the COVID-19 pandemic, we must prioritize adequately resourcing programs and services for older people in our City's elder residences.

We appreciate your support of SAGE and commitment to ensuring that our LGBT older New Yorkers are supported. Know that SAGE will continue providing the critical support, programs and services to LGBT elders, both in community and in residences, throughout this pandemic and beyond.



TESTIMONY: UJA-FEDERATION OF NEW YORK

**New York City Council Committee on Aging
Honorable Margaret Chin, Chair
Oversight Hearing: Serving Seniors in Senior residences and Communities During the Pandemic**

**Submitted by:
Ariel Savransky, UJA-Federation of New York**

June 22, 2021

Thank you, Chairperson Chin, and members of the Committee on Aging, for the opportunity to provide testimony on serving seniors in senior residences and communities during the pandemic.

Established more than 100 years ago, UJA-Federation of New York is one of the nation's largest local philanthropies. Central to UJA's mission is to care for those in need. UJA identifies and meets the needs of New Yorkers of all backgrounds and Jews everywhere. UJA connects people to their communities and responds to crises in New York, Israel and around the world, and supports hundreds of nonprofit organizations serving those that are most vulnerable and in need of programs and services.

Over the last year, the COVID-19 pandemic has dramatically and disproportionately impacted the lives of those living in poverty, further lifting-up the effects of systemic inequality and the real challenges New York City faces. In response to these needs, UJA's network of human services partners has been on the front lines since the pandemic hit, assisting thousands of New Yorkers of all backgrounds, throughout the five boroughs. UJA's partner nonprofits provide a wide range of services and did so throughout the pandemic, including in the areas of early childhood education and childcare, mental health supports, case management services, services for survivors of domestic violence, access to food, and a wide range of senior services.

Providers of services for older adults have played a critical role throughout New York City's ongoing COVID-19 response and recovery efforts. Whether small community-based organizations or large nonprofits serving clients throughout all five boroughs, each has provided essential services to vulnerable older adults forced to remain in their homes throughout the pandemic crisis. UJA's partner nonprofits provided mental health support to seniors suffering from the effects of isolation and food insecurity, delivered food packages to Holocaust survivors and helped the most vulnerable – including Holocaust survivors and the frail elderly – access vaccines.

New York City is in a critical phase of the recovery and the senior services network is now focused on vaccine outreach and engaging older adults to return to in-person activities and break out of a year of sustained social isolation. With the May 3rd announcement about reinstating grab-and-go meals at senior centers; the June 3rd announcement regarding the reopening of senior centers for outdoor activities immediately and indoor activities June 14th; the Senior Center Cooling Center RFP; the NDA Senior Services RFP due June 28th; the DFTA Older Adult Centers and NORC RFP that was due June 10th; and the extension documents for current senior centers, senior services providers are extremely strapped in terms of resources. UJA wants to enable centers to focus on maximizing access and safety with this return to some in-person programming. The ultimate mission is to support the older adults who rely on services and ensure that they have the resources they need to live safe, healthy lives in the homes and neighborhoods. Although UJA agrees that the senior services network needs changes to better serve older adults in New York City, and there were promising concepts in the new Older Adult Center and NORC RFP that will start on that path to innovation, UJA calls on the City to be a stronger partner with providers throughout this process to ensure that changes are made in a responsible and collaborative manner, and providers are given the time and capacity to prepare adequate responses.

Despite the fact that an overwhelming majority of the nonprofit senior service sector came together to [highlight issues with this RFP](#), in addition to the competing priorities that senior providers are dealing with right now, the RFP continued to move forward. UJA joined with over 80 other nonprofits in expressing grave concerns about the provider community's ability to respond to RFP while at the same time expecting them to reopen, vaccinate staff and clients, operate cooling centers, and negotiate contract extensions, in addition to providing other services for those that are multiservice providers. The sector requested specific changes be made to the RFP, detailed answers to be provided for questions submitted

and time to submit quality bids to achieve the overall goals of the RFP, yet DFTA refused to provide such accommodations.

UJA submits the following recommendations:

1) Ensure continuity of funding for NORCs

- a. NORCs receive funding from three sources – DFTA funding, City Council discretionary funding and NYSOFA funding. As the mayoralty intends to award funding for new NORCs, there is a good possibility that some existing NORCs will not be awarded DFTA funding through the new RFP and they are in very real danger. The City Council must keep NORCs stable by continuing to invest City Council dollars or some NORCs may be forced to close. Because new contracts are slated to begin in October, these NORCs could potentially close this summer if the City Council does not step in.

2) Use City Tax Levy for the Older Adult Center and NORC RFP

- a. Currently, the Administration’s plan is to use stimulus money to fund this RFP, which will result in a \$40 million shortfall in 2024. UJA urges the Council and the Administration to consider the catastrophic impact this gap will have on clients and providers and we call on the City Council and Administration to use City Tax Levy for this RFP or consider a smaller award using stimulus funding, but one that does not require a cut in two years.

UJA also submits the following budget recommendations for inclusion in the FY 22 budget:

1. Supporting Older Adults Throughout COVID-19 and Beyond

UJA is appreciative of the investments included in the Executive Budget to both better support older New Yorkers through programs such as Senior Centers, as well as to support the human services sector at large. More specifically, UJA is deeply appreciative of the decision to implement the \$10 million of outstanding model Senior Center budget funding promises; and include \$39.4 million towards Senior Centers and NORCs. These investments are an important step towards bolstering a system that has been critical to supporting older New Yorkers through the historically difficult fight against COVID-19.

In addition to the full restoration of all Council Aging Initiatives to FY20 levels, UJA would like to highlight the following recommendations and requests for the New York City FY 2022 budget:

Naturally Occurring Retirement Communities (NORCs)

Classic and Neighborhood NORCS are multi-age housing developments or neighborhoods, respectively, that were not originally developed for older adults, but are now home to a significant number of older people. Throughout the COVID-19 health crisis, NORCs have provided vital response services to thousands of older New Yorkers, making continued investment in this program critical. NORC staff provide wellness checks to address mental health and social isolation; assist seniors in accessing food and other supplies, coordinate services in residential buildings not developed specifically for seniors, and now, help older adults navigate New York City’s complicated vaccine process. These activities were crucial prior to COVID-19 and have become even more important since.

Without the support of the City Council many NORC programs would not be able to continue to provide critical services to so many older adults in New York City. In order to sustain and strengthen the NORC program, the Council must continue to fund discretionary NORCs. UJA and its partners have heard that many Council Members believe that discretionary-funded programs in their district will be baselined when in fact those programs are ineligible (Neighborhood NORCs are an example). Ultimately, this will

threaten the services that so many older New Yorkers have come to rely upon and in which the City Council has invested funding and time over many years should the council choose to stop funding these programs.

In addition, there are three key supports needed in the FY22 City Budget:

i. Restore \$5.4 million to the NORC City Council Initiative, including \$1.3 million to support health and nursing services.

The FY21 final budget included \$5.4 million in City Council NORC Initiative funding to support dozens of NORCs and Neighborhood NORCs. This included \$1.3 million to fill a funding gap for health and nursing services in NORCs. The Council must restore these funds to ensure these programs can continue to provide services to NORC residents.

ii. Baseline \$1 million for NORC Programs

The FY20 and FY21 budgets included \$1 million from the Administration to support certain NORC programs previously funded by the Council; however, these funds were never baselined. If this funding is not restored, the future of these NORC programs is uncertain.

iii. Achieve Salary Parity for DFTA-Funded NORCs: \$1.7 million

While successfully providing healthcare, social services, and socialization opportunities to thousands of New Yorkers – and helping to defray Medicaid costs – NORC staff has been struggling with chronically low salaries, as contracts do not include cost escalators and have not allowed for meaningful raises in many years. The NORC network has seen high turnover rates for all positions, including directors and case managers. This is particularly challenging given recent increases to senior center staff salaries through the Department for the Aging (DFTA)'s FY 2018 "model budget" process. The disparity created through this exercise has yielded a scenario where senior center and NORC staff have similar responsibilities, workload, and client demands, but one staff makes significantly more than the other. On average, systemwide, senior center staff make roughly \$15,000 more than NORC staff.

2. Elie Wiesel Holocaust Survivor Initiative

UJA urges the Council to maintain its \$4 million investment in the Elie Wiesel Holocaust Survivors Initiative in FY22. In the wake of COVID-19, New York City's estimated 36,000 Holocaust survivors are among the most vulnerable to its impact.

Throughout the COVID-19 pandemic, social workers funded through the Survivor Initiative continue to provide the specialized care that survivors require due to the trauma they experienced during the Holocaust. There are many unique struggles survivors face today: the isolation, the return of memories of hiding, rationing food, being away from family, as well as sickness and death. They are also among the most vulnerable and susceptible to COVID-19. Because of this funding, survivors are not alone.

Restoring and baselining \$4 Million will support:

- **Case Management to access benefits and support.** Case Managers are specially trained in the psychological impact of the Holocaust.
- **Mental Health Services** including home visits to help survivors work through the traumas that now manifest in sleep disturbance, anxiety, depression and inability to trust
- **Trauma Informed Care** provided by professionals who recognize and avoid possible triggers, thereby reducing the potential for re-traumatization
- **Crisis Prevention** to help stave off eviction and hunger
- **Legal Services and entitlement counseling**

- **Emergency Financial Assistance** for food, housing, prescriptions, medical and dental care
- **Socialization Programs** to reduce isolation
- **Training & Support** for Caregivers and home health aides working with survivors
- **End of Life Care** including hospice and ethical wills

New York City must continue its commitment to Holocaust survivors. It is crucial to provide specialized care and support programs for survivors to enhance their quality of life and allow them to live out their remaining years with dignity. **UJA asks that \$4 million be restored and baselined to support Holocaust survivors living in poverty.**

3. \$16.6 Million for Home Delivered Meals Program (HDM)

The Home Delivered Meals Program has played a critical role in New York City’s COVID-19 response efforts. As older adults continue to remain at home, many do not have family or friends that are able to help them acquire food. While New York City launched GetFood to help address this issue, demand for the HDM program also increased. Currently, an estimated 18,000 homebound older adults receive home delivered meals across New York City; however, enrollment in the HDM program at the peak of the pandemic was 21,000. Even then, more seniors qualified and should have been enrolled in HDM instead of being directed to GetFood NYC.

Beyond simple meal provision, the HDM Program provides important supports for homebound older adults. Recipients of home delivered meals are chronically disabled due to heart disease, mobility challenges, diabetes, arthritis or severe vision impairment and are reliant on these supports, that now, in a pandemic, serve as a critical lifeline for these older New Yorkers. Regular meal deliveries provide health and psychological benefits beyond nutrition and can act as an access point for other critical support services, which help older adults continue to live healthfully and safely in their homes.

However, the New York City per meal reimbursement rate is only \$9.58, which includes food, transportation costs and staff. This is far below the national per meal rate for urban areas of \$11.78. This low rate does not reflect the actual cost of meal provision and delivery, nor does it account for the high cost of culturally competent meals, such as kosher or halal. A survey by LiveOn-NY of New York City showed that nonprofit HDM providers showed that many organizations lose thousands of dollars every year providing home-delivered meals.

UJA requests the following investments to support the Home Delivered Meals Program:

- **\$13.6 Million for FY22 increased demand and adequate per meal reimbursement rates**
- **\$3 Million for FY22 weekend and holiday meals provided by City Meals on Wheels**

Conclusion

Thank you for the opportunity to submit testimony. UJA looks forward to working closely with the Council and the Administration in order to continue to provide the services and supports seniors need in their communities during this unprecedented time. Please contact Ariel Savransky at savranskya@ujafedny.org or 212-836-1360 with any questions.



**Testimony of United Neighborhood Houses
Before the New York City Council Committee on Aging
Council Member Margaret Chin, Chair, Aging**

Oversight – Serving Seniors in Senior Residences and Communities During the Pandemic

**Submitted by Tara Klein, Senior Policy Analyst
June 22, 2021**

Thank you for hosting today's important hearing on serving seniors in senior residences and communities during the pandemic. United Neighborhood Houses (UNH) is a policy and social change organization representing 44 neighborhood settlement houses, including 40 in New York City, that reach over 765,000 New Yorkers from all walks of life. A progressive leader for more than 100 years, UNH is stewarding a new era for New York's settlement house movement. We mobilize our members and their communities to advocate for good public policies and promote strong organizations and practices that keep neighborhoods resilient and thriving for all New Yorkers.

Older adults are the age group most vulnerable to COVID-19, and settlement houses have acted phenomenally on the frontlines to meet their emergency needs throughout the pandemic. Over this time settlement house programs provided older people with food via home delivered meals programs, referred and signed people up for GetFood NYC deliveries, and partnered with private sources as well as NYCHA to coordinate free food deliveries in buildings. They assisted older adults in accessing financial benefits through one-on-one case assistance, and provided mental health supports through senior centers and NORCs. They have provided older adults with access to COVID-19 tests and vaccines – through referrals, serving as NYC direct enrollers for vaccine appointments, and by hosting their own testing and vaccination sites in partnership with the State and City. This has all taken place as congregate settings like senior centers remained closed to in-person activities.

On top of this laudable work, over the last several months providers have prepared applications for the Department for the Aging (DFTA)'s Older Adults Centers/Naturally Occurring Retirement Communities (NORC) Request for Proposals (RFP), as well as planned to reopen centers to in-person activities including cooling centers, grab and go meals, and regular senior center/NORC activities. As we enter a new phase in pandemic recovery with these in-person activities resuming, it is critical that we look to lessons learned in order to strengthen the aging services network, both in the next few months as RFP contracts are awarded and as we look ahead toward a new Administration in January.

Recommendations:

Ensure Contract Transition and Service Continuity Plans: New contracts are slated to begin on October 1, 2021. Given the high number of applicants versus number of planned contracts, it is likely there will be some new centers and that some existing centers may lose contracts and close. We have concerns about the feasibility of awards being selected and announced quickly enough for a strong transition plan to be in place. This is important for continuity of service for older adults whose centers may close. Community outreach and transportation plans will be key in these cases. For new centers, there may be limited time to hire staff, purchase equipment, and promote centers to the neighborhood. If necessary, DFTA should consider delaying the contract start dates to allow for this type of planning. Current contracts are in place until June 2022 with an expectation they will be canceled when new contracts begin, so a start date delay should not be a problem if it is needed. The Council must monitor the status of the RFP awards and speak up if a delay is warranted.

Provide FY22 Council Funding for Senior Centers and NORCs: Notably, the Administration's Community Care Plan will bring major investments that will allow senior centers and NORCs to expand and enhance services, including via this procurement. We are grateful to see \$39.4 million in the Executive Budget in the first year, as well as the long-promised \$10 million for the senior center "model budget." However, it is unclear whether this funding will cover all existing needs, including NORC nursing hours that the Council previously covered. The Council must follow these planned investments carefully and utilize its FY22 discretionary funding to ensure continuity of service. Most importantly, the Council must fund the senior centers and NORCs it currently supports for at least July through September 2021 until new contracts are scheduled to begin. It must also have a funding plan in place for these centers in case contracts begin later than October 1st. Finally, the Council must consider supporting centers that may lose their DFTA contracts to ensure older adults do not lose access to services. While there is still uncertainty about what RFP awards will look like, we urge the Council to set aside adequate funding to ensure a smooth transition to new contracts.

Take Action for Aging in the FY22 Budget: Even with the Community Care Plan investments, DFTA's budget remains less than 1/2 of 1% of the City's overall budget, despite a rapidly-growing population and increasing needs resulting from COVID-19. In the final days of the FY22 City Budget negotiations, we remind the Council to take on the Action for Aging budget recommendations to help strengthen the aging services network. These include:

- \$16.6 million for home delivered meals (HDM) to meet new demand and bring the per-meal rate to the national average, and to allow older adults who received GetFood meals to transition to traditional HDMs with higher quality meals and social services.
- \$48 million for a 3% COLA to support the full human services sector.
- Council discretionary funding to meet new and growing needs, including:
 - Restoring cuts from FY20, including \$2.04 million that was eliminated from the Healthy Aging initiative.
 - \$2.86 million for the Geriatric Mental Health Initiative (a DOHMH initiative), to meet growing mental health needs and allow programs to expand.
 - \$4.4 million for technology needs at senior centers and for individual older adults.
 - \$5.4 million for the NORC initiative, to support NORCs that are not eligible to be DFTA-funded NORCs.

Ensure Advance Notice and Sufficient Time to Providers: During the pandemic, providers were often challenged when DFTA would inform them of major operational changes with an unrealistically short timeframe to prepare and carry out the orders. While some of this was unavoidable due to an unprecedented and rapidly-changing world, the pattern of poor notice has accelerated in unnecessary ways. Friday evening emails for changes expected early the next week are all-too-common. A similar issue arose when the RFP unexpectedly included NORCs without any advance warning or any concept paper, leaving applicants in a position of scrambling to get necessary work completed on a short timeline. DFTA and other City agencies who play a role in the work of DFTA contractors, such as the Department of Health and Mental Hygiene, must take care to work together closely when issuing guidances, and must work more time into the implementation of guidances that they give to providers. The Council must also request DFTA and any other relevant City agencies share these guidances with them, monitor the timeline, and identify when it appears unrealistic for providers in their districts. Further, future RFPs across any and all City agencies must include fair and realistic timelines, including at least 30 days to apply after any final documents or addenda are released. The Council could explore addressing this issue through procurement reform.

Work With Providers in the Next Administration: While DFTA often points to monthly borough-based calls with providers and input they gathered to develop the RFP, providers have shared with us that these have not been meaningful exercises and they do not solicit or take provider feedback into account. Providers know their neighborhoods, older adults, and their workflows best; it is in the City's best interest to listen to and learn from them. As we move into 2022 and a new Administration, we urge DFTA and the City Council to systematically work in partnership with providers, as well as umbrella organizations like UNH that speak for many providers, as they make decisions. This must be done in a meaningful and substantive manner.

Thank you. To follow up, please contact me at tklein@unhny.org.



Visiting Nurse Service of New York
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www.vnsny.org

Oversight Hearing for the NYC Council Committee on Aging
Visiting Nurse Service of New York (VNSNY)
VNSNY's NORC Nursing Services During COVID-19

Tuesday, June 22, 2021

Good Morning Chair Chin and Members of the New York City (NYC) Committee on Aging. My name is Rhonda Soberman, Manager of Program Development for VNSNY and I appreciate the opportunity to testify about VNSNY's Naturally Occurring Retirement Community (NORC) nursing program in 30 NORCs serving more than 13,000 seniors in 22 NYC Council Districts. We also wanted to make sure that these critical services are included in the Fiscal Year (FY) 2022 Budget.

The largest free-standing not-for-profit home and community-based health care organization in the United States, VNSNY touches the lives of nearly 40,000 New York residents each day. For over 125 years, VNSNY has been there for New York during many of its biggest public health emergencies (PHEs) and natural disasters. Since the COVID-19 PHE began in March 2020, *VNSNY has cared for more than 6,500 COVID-positive New Yorkers and vaccinated thousands of frontline staff and homebound New Yorkers.*

Overview of NORC Nursing Services

As a result of City Council funding, by the end of FY2021, VNSNY NORC nurses will have provided more than 12,000 hours of NORC nursing services.

The NORC programs provide critical social services and health care linkages that support successful community living – which is especially important during PHEs. The NORC model focuses on both the health and social needs of senior residents in their housing community and is one of the most effective ways of providing support for a growing aging population. NORC programs develop “community” and promote the concept of neighbors helping neighbors to encourage healthy aging in their community.

NORC nursing focuses on client assessment, health education, health resources, health care advocacy, and linkages to necessary health care services. The concept of a “team approach to care” is very significant in the NORC model. The nurse is a valued and important member of the interdisciplinary team, helping staff and clients alike better understand health-related issues and concerns and their impact on the client's ability to remain at home. NORC nurses develop important relationships with community residents and work to empower residents to address their chronic health conditions. All these efforts are aimed at reducing unnecessary emergency room (ER) visits and avoidable hospitalizations, while increasing positive health outcomes and resident satisfaction.

NORC Nurses Supported Vulnerable Seniors Throughout COVID-19

Our goal throughout the PHE has been to help seniors – especially those suffering from chronic health conditions – avoid unnecessary ER visits and hospitalizations which could place them at greater risk. The NORC nursing program has been there for our seniors throughout the pandemic. During the early months of COVID-19, we quickly transition from in-person to telephonic services for our NORC clients. As concerns and misinformation grew about COVID-19, VNSNY NORC nurses, in coordination with our social service partners sponsored events and distributed factual information to dispel myths and educate residents of practical ways to stay healthy and address their health concerns.

Our NORC nurses helped clients get the healthcare services they needed when doctors' and other healthcare providers' offices were closed or operating under reduced hours. In one case, a NORC client was trying unsuccessfully to reach his doctor about a health care issue of concern. Our nurse, Dana Evans, addressed his frustration and anxiety and offered to advocate for him. With her assistance, he was able to secure the information from his doctor and reduce his anxiety.

Our NORC nurses also empower seniors to become partners in their own care – a critical element to successful aging in place. Before the pandemic, VNSNY NORC nurse Nicole Alvarez, who serves many residents whose primary language is Spanish, educated her clients to use the health equipment they have at home, such as blood pressure monitors and pulse oximeters. That teaching proved critical during the PHE. Nicole worked closely with members as they monitored their own vital signs. She was able to assess their health over the phone and link those in need to medical care.

Once the COVID vaccine became available, one of our NORC nurses realized that seniors in her community were reluctant to get the vaccine. They appeared unwilling to ask questions in group education programs. She creatively developed a "vaccination hotline," allowing seniors to call her and privately express their concerns. As a result, the NORC saw an increase in the number of seniors getting vaccinated.

Council Funding for Vital Senior Services

We are concerned about the status of NORC nursing funds. NYC Department for the Aging (DFTA) recently released an RFP for NORCs based on its Community Care Plan with the expectation that NORCs would be able to include nursing services within this application. VNSNY joins our NORC program and service partners in stressing that the Council must continue its funding of NORC nursing services in FY2022 to maintain and sustain service stabilization in senior communities. As it is unclear whether adequate funds will be included for the 30 NORCs we are currently serving, let alone any new NORCs that may be awarded.

Council funding would help address some of the potential issues related to the Community Care Plan RFP, including 1) GAP funding for nursing services: since the RFP won't be awarded until several months into FY2022, there will be a funding gap from July 1 until the DFTA RFP award date, resulting in no nursing services for this time period, 2) due to the budget complexity, which included a 50% program match, many of our current NORC programs may be faced with reduced hours of nursing due to their own budgetary constraints, and 3) needed support for programs who did not qualify for the RFP or who are not granted an award but still provide services to our most vulnerable seniors. Those communities will be unable to sustain nursing services without City Council funding support.

Conclusion

NORCs are the "natural" outgrowth of the longstanding commitment the City Council and NYC DFTA have demonstrated to help our seniors live and thrive in the communities they call home. NORC nursing services helped seniors age in place long before COVID-19 and during the PHE. We urge the Council to continue this important investment as the NORC program expands. Thank you for your continued support. VNSNY looks

forward to working with the Council to ensure that our seniors have the appropriate nursing services and access to the care they deserve.