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**Testimony of Selfhelp Community Services, Inc.  
New York State Assembly Standing Committee on Aging  
Honorable Donna Lupardo, Chair**

**Examination of Non-Medical Programs that Support Seniors in the Community**

**Submitted by Sandy Myers, Vice President, External Affairs and Communications  
December 6<sup>th</sup>, 2017**

Thank you to Chairperson Donna Lupardo and the members of the Assembly Aging Committee for the opportunity to testify about the ways in which community-based non-medical services and programs provide cost-effective supports for older adults aging in their own homes and communities.

Selfhelp was founded in 1936 to help those fleeing Nazi Germany maintain their independence and dignity as they struggled to forge new lives in America. Today, Selfhelp has grown into one of the largest human service agencies in the New York metropolitan area, with 27 sites throughout Manhattan, Brooklyn, Queens, the Bronx, and Nassau County. We provide a broad set of important services to more than 20,000 older New Yorkers and other vulnerable individuals 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 goal of helping clients to live with dignity and avoid institutional care.

All our services are rooted in the idea that all individuals deserve to age with independence and dignity. Our services include: specialized programs for Holocaust Survivors; ten affordable senior housing complexes; four Naturally Occurring Retirement Community (NORC) programs; three case management programs; five senior centers including one of New York City's first Innovative Senior Centers; home health care and home health aide training; client centered technology programs including the Virtual Senior Center; court-appointed guardianship programs; and the Selfhelp Alzheimer's Resource Program (SHARP).

While the programs and services mentioned above are non-medical by definition, Selfhelp believes that the best outcomes for our clients and all older adults are achieved when social services support health. Recent research into some of our programs, which is shared more thoroughly throughout my testimony, have proven this as well. Further, not only is there a positive impact on the health of our clients, but there is also a reduction in costs to the healthcare system. Community-based services are a critical network of programs that work together to improve an individual's quality of life and overall health. By bringing health and social services together in policy making and funding decisions, we can best improve the outcomes for older adults throughout New York State.

## **Affordable Senior Housing as a Tool for Healthcare**

Selfhelp believes that the best outcomes for older adults are achieved when social services support client health. With the support of JPMorgan Chase, we recently conducted a study of the residents in our senior affordable housing program. We compared Medicaid data for residents in our housing in two zip codes and compared it to other seniors living in the same zip codes over two years. We found that residents in Selfhelp's affordable housing had:

- 68% lower odds of Selfhelp residents being hospitalized
- \$1,778 average Medicaid payment per person, per hospitalization for Selfhelp residents, versus \$5,715 for the comparison group
- 53% lower odds of a Selfhelp resident visiting an emergency room compared to a non-Selfhelp resident

Selfhelp's ten affordable residences offer seniors the opportunity to lead independent lives in their homes and communities. At each of our buildings, we offer the Selfhelp Active Services for the Aging Model (SHASAM), which makes available social work services, education, and recreation, as well as access to skilled nursing and home care, if and when requested by the resident.

We believe that housing plus services is the right model to ensure that seniors are able to thrive as they age in their communities. As a next step to the State's investment in senior housing capital funding in last year's budget, we are urging the Legislature to pass legislation to create a senior housing resident coordinator program. In coordination with LeadingAge NY, Enterprise Community Partners, LiveON NY, and other housing providers and advocates, Selfhelp supports a \$10 million allocation over five years to establish funding for social workers in new and existing affordable senior housing.

Service coordination includes an array of services that assist residents to remain independent by emphasizing wellness and healthy aging. This \$10 million would be used in conjunction with New York's historic commitment of \$125 million in senior housing, and would create a very cost-effective model for seniors to age in place in either the new housing constructed for them or the preexisting housing where they reside. This will result in a savings to the Medicaid program by keeping low-income seniors out of more costly levels of care such as assisted living or nursing homes.

## **Naturally Occurring Retirement Community (N/NORC) Program**

Selfhelp also provides social services at four Naturally Occurring Retirement Communities (NORCs) and Neighborhood NORCs throughout Queens. We are very appreciative of the consistent support the NORC program has received in the Legislature.

N/NORCs were founded with the ultimate goal of transforming residential complexes and neighborhoods to meet the needs of a growing cohort of older residents and enable them to remain living independently in their homes; thrive in their communities, and delay hospitalization or nursing home placement. The density of older adults and their proximity to each other further fosters creative

approaches to providing health and social services. N/NORC programs provide case management services; nursing services; recreational, social and cultural activities, and ancillary services tailored to meet the needs of each community. Programs actively encourage healthy aging by providing access to health care, promoting health and wellness activities, addressing disease prevention and responding to chronic health conditions.

Over 1,325 residents were served throughout our four NORC programs in the past year and our staff provided almost 6,500 hours of case management and health care management to the residents living in NORC developments.

The services provided by N/NORCs are crucial to the health and well-being of New York's aging communities; however, the State Office for the Aging's (NYSOFA) recently canceled Request for Applications (RFA) has led to complications in the effective planning and implementation of these programs, raising questions around future budgeting and statutory requirements set to begin January 1, 2018. Further complicating matters, SOFA recently decreased program funding to FY2015-2016 levels for the 2018 calendar year, though the Legislature allocated \$2 million in additional funding to the N/NORC program for FY2017-2018.

We are concerned that investments made by the Legislature are not considered a stable funding source for program contracts that are longer than one year, which poses challenges for expansion of the N/NORC program when NYSOFA re-releases the RFA in the future. As you well know, enhanced funding is vital to ensuring that N/NORCs can continue to provide services, particularly health care management services, and grow their programs to meet the needs of a rapidly increasing aging population. We request that the Legislature examine the recent changes and impact of the withdrawn RFA on providers, and work to protect the current funding level for the N/NORC program. Older adults across New York rely on N/NORC services to remain healthy and stably housed; without these services, their options for receiving appropriate community-based care would be decreased.

### **Utilizing Technology to Address Social Isolation**

As our population ages, so too does the number of homebound individuals who are at a high risk of social isolation and depression. Social isolation is one of the most serious issues affecting the elders of our community, and Selfhelp's Virtual Senior Center is one program which has been proven to effectively and profoundly impact this problem.

The Virtual Senior Center (VSC) engages homebound seniors, who are no longer able to get to their local senior centers, into the larger community by using technology to connect them with other participants in a range of activities. A cornerstone activity of the program is its interactive, real-time classes where participants can hear, see and talk with each other in an interactive session. Over 40 classes are typically offered each week ranging from art history to current events to museum tours to weight training and other exercise programming. This groundbreaking program effectively reduces social isolation by creating social networks, connecting them to each other and to the outside world.

On top of the personal relationships, the program serves as a link to the digital world. Participants gain comfort with technology, utilizing the computer to join classes, email, Skype with their family, read the news, browse the web, play games, and more.

In addition, the program has been shown to break down barriers of digital literacy, reduce social isolation by up to 85% and improve participants' quality of life by 97%. As one of our participants said, *"The program is truly extraordinary. We're homebound. It's a gift. I live alone but I don't feel alone."*

Through independent research, Selfhelp assessed the impact of the Virtual Senior Center on the health of participants, and we found:

- 85% reduction in social isolation as a result of participation in the VSC
- 51% increase in self-reported health status because of VSC participation
- 97% of participants reported that the VSC improved their quality of life

Launched in 2010 with 6 participants, today the program has become a lifeline for over 400 participants throughout New York City, Long Island, Baltimore, Chicago, Pittsburgh, and San Diego. The platform also has the ability to engage people who speak a language other than English. In the last year, we offered 3,234 classes in English, Mandarin, Korean, and Russian on over 870 unique topics. 23% of classes were facilitated in a language other than English, and as we look at a growing immigrant senior population, offering programs like the VSC in a client's native language is crucial.

We would also like to use the VSC platform as a tool to provide one-on-one, Medicare and Medicaid-reimbursed teletherapy services to homebound older adults. The video-chat technology is HIPAA compliant and only invited participants are able to access the platform. One feature, "Chat," allows participants to invite each other to one-on-one video-based chats. These can happen at a moment's notice or can be scheduled. Leveraging the scheduled functionality, Selfhelp would seek to schedule private, secure one-on-one chats with geriatric mental health providers. This would enable therapy services to a difficult to reach population that is suffering from significant mental health issues often stemming from being isolated.

There are currently a number of pieces of legislation that have been introduced in the legislature to move us closer to this goal, and we encourage the State to move them forward in this year's session.

### **Ensuring Independence Through NY Connects**

As the contracted provider for Queens NY Connects Program, we know firsthand the importance of providing specialized information and assistance on long term services and support options for age 60+, individuals with physical disabilities, caregivers and providers.

The recent statewide media campaign was very successful in informing more individuals about this resource. By identifying a centralized service to access information on available resources and services, at no cost to the individual, the program has encouraged cross collaboration of information between community-based programs and services. Further, we are now able to better identify unmet needs that

affect the health and welfare of individuals, which has a very real and direct financial impact on health care institutions.

In the last 12 months of operation, our NY Connects program received over 4,525 calls from individuals, caregiver and professionals all seeking information on resources and services. Most notably the requests were for affordable housing, transportation, escorting to medical appointments and how to access much needed in-home services. In the twelve months prior, the program received 2,980 calls. Even with the increase in calls, we experienced the loss of two staff positions due to budget cuts. As NY Connects continues to be a resource for the growing needs of New Yorkers, we urge the State to increase investment to ensure a robust program.

### **Community Services for the Elderly**

Community Services for the Elderly (CSE) funding is a powerful funding tool throughout the state due to its flexibility, which allows counties to fund the most critical and appropriate programming for each area. These services may include transportation, social adult day care, home delivered meals, case management and other similar supports.

Unfortunately, an estimated 16,000 older New Yorkers are on waiting lists for these critical supports, a number that, without investment, is likely to grow due to increased awareness from New York Connects and the rapidly growing aging population.

We echo LiveOn NY's request to invest an additional \$24 million to existing funding.

### **Conclusion**

Thank you for your time. For further questions, I can be reached at [smyers@selfhelp.net](mailto:smyers@selfhelp.net) or 212-971-7627.