



TESTIMONY

Presented by

**Lorraine Cortés-Vázquez
Commissioner**

on

Oversight – Community Care Plan

before the

**New York City Council
Committees on Aging**

on

**October 18, 2020
11:00 A.M.**

Good morning, Chairperson Chin and members of the Committee on Aging. I am Lorraine Cortés-Vázquez, Commissioner of the New York City Department for the Aging (DFTA). I'm thrilled to be here to talk about the Community Care Plan. I am joined by Michael Bosnick, DFTA's Deputy Commissioner for Planning, Research, Evaluation and Training who will be available with me for Q&A following my testimony. Additionally, I am joined by Erin Drinkwater, Deputy Commissioner of Intergovernmental and Legislative Affairs at the NYC Department of Social Services who can answer questions regarding Intro 1219.

Benefits of Community Care

As you know, in April 2021, the Mayor released "*Building Community Care for an Age-Inclusive New York City*," the groundbreaking 5-year plan to guide the expansion of aging services to meet the needs of a growing and diversifying New York City older adult population. Through this plan, the City outlines our vision to support older adults to age in place. According to AARP, we know that roughly 90% of Americans¹ express a desire to remain living at home. But to do so, many need additional supports. Community care has been shown to keep people healthy longer and to help them avoid institutional care.

When people remain at home, they are more likely to physically thrive for a longer period than if placed in institutional care. Their mental health also remains stronger when receiving services and supports in the community rather than in institutions. The community also benefits from having older adults aging in place. Remaining at home allows older adults to continue to be socially connected and bolster their communities through their high levels of faith-based and civic engagement.

Moreover, there is a financial benefit to community care. While living in the communities they helped build, older adults spend their money locally, reinvesting in that community. Supporting a person at home also helps to decrease avoidable (re)hospitalizations, emergency room visits, and unnecessary nursing home stays. Overall, the investment of community care- including meals, in-home services, recreation, transportation- is roughly \$32,000 per older adult per year, while institutional care is about \$154,000 annually.

Community Care Outline

DFTA seeks to build on the community care elements already in place in order to promote independence, self-reliance, and well-being for the aging population. This plan supports the growing number of older New Yorkers, most of whom wish to stay at home and in their communities.

As outlined, the community care plan endeavors to phase in essential care components including the expansion of case management, home delivered meals, home care, and caregiver support. This is particularly important with anticipated growth in the older adult population, more people living longer, and the planned increase in marketing and outreach as a result of the community care investment plan. That is why future years of the plan call for increased homecare average weekly hours per client, as well as additional caregiver supports and funding to assist them as they support older adults aging in place. We appreciate the advocacy the Council has provided in the past and look forward to continuing this expansion with the new administration. It is also important to

¹ https://www.aarp.org/content/dam/aarp/research/public_policy_institute/liv_com/2014/what-is-livable-report-AARP-ppi-liv-com.pdf

establish linkages with neighborhood resources to build service synergies across the network of programs serving older people in a community. Some of these connections were encouraged in the recent older adult center (OAC) and naturally occurring retirement communities (NORC) RFP and we are optimistic that there will soon be an increased intentionality in developing relationships across community services and providers.

Access to services across the community is also essential. For in-person services, the community care plan outlines better use of transportation to reach older people isolated in service deserts and/or transportation deserts. These include areas where it is difficult to connect with essential services due to lack of easy and affordable access to public transport. Virtual programming can also help serve individuals living in hard-to-reach deserts, as well as be more attractive to those individuals who may prefer this option over in-person services. We have seen the benefit of virtual services to reduce social isolation and increase access to services, including medical appointments. Increased programming also requires that older adults have access to critical services. Currently, we are in the process of distributing 10,000 tablets through older adult centers to New Yorkers who live alone. This program includes a data plan as well as technology support and education.

Finally, because it is imperative that services reach across all five boroughs, expansion to underserved areas, including TRIE neighborhoods, is a priority. Within the provider network, expanding to the local, independent providers that are rooted in the community is also important to ensure the highest quality of services for that community. Additionally, more multi-cultural and multi-language programs, including immigrants is important.

Older Adult Centers and NORCs

As you know, the first year of this plan was a \$48 million investment in a new RFP issued earlier this year for older adult centers and NORCs. The submission deadline was in June and we were thrilled by the enthusiastic, high quality responses we received from providers.

I am pleased to report that the conclusion of the RFP is imminent. At this time, all proposers have been notified if their submissions have been determined eligible or not. Those who have been deemed eligible are in the process of contract negotiations. One of the main goals of this RFP was to adjust services to reflect the changing demographics of this city, as well as encouraging further innovation and collaboration. We think the providers deemed eligible will allow this to be realized. Once the public notice of awards is complete, we can share an official list of awardees publicly. In the meantime, I can offer some highlights of what we expect following contract negotiations.

Overall, we expect the network of older adult centers to increase significantly. In the Community Care Plan, we commit to 25 new centers or NORCs and we are on track to exceed that. The Committee will be particularly pleased to hear that we also anticipate that many current discretionary-funded sites will be baselined as well as adding new providers to DFTA's network. I hope that Council will continue to use this discretionary funding towards services for older adults, such as creative aging arts programs. Many of these sites are in underserved communities and are served by smaller, ethnic-based organizations. Overall, with these investments, we expect the capacity of our centers and NORCs.

The RFP embodies the goals of the community care plan, all centered on keeping older New Yorkers in good physical and mental health, and in a strong state of well-being, in order to live safely in their communities and homes. Several key goals are innovative programming with an

emphasis on collaborations with other neighborhood and community resources; increased marketing and outreach to connect with people in service and transportation deserts and to reach the always diversifying population of older New Yorkers; and increased virtual programming to reach people unable or reluctant to travel to physical sites.

Additionally, the first year of the community care plan saw the fulfillment of the model budget, which was a previously made commitment in new City funds towards the OAC program to begin the process of right-sizing center contracts and eliminating inequities across the system. The final \$10 million infusion of funds from this original model budget exercise was included in the FY 2022 budget.

Introduction 1219

Also being heard today is Introduction 1219, which would require the Department for Social Services (DSS) to work in coordination with the Department of Health and Mental Hygiene to establish a program to assist low-income older adults with preparations necessary to eradicate bed bug infestations in their dwellings. DSS would also be required to work with the Department for the Aging to engage in outreach to eligible older adults regarding the availability of the program. Relevant agencies look forward to further discussions with the sponsor.

Conclusion

There are many components to the community care vision that are required for it to be successful long term. What we have been able to accomplish in the first year of this plan, would not have been possible with the Council's advocacy, support, and deep commitment to older New Yorkers. Strategic investments must be made going forward to continue to support this targeted expansion of services. Thank you for the opportunity to speak with you about the community care plan.



Thank you Chair Council Member Chin, Speaker Johnson, members of the Aging Committee, and Commissioner Lorraine Cortez Vazquez for your time and the opportunity to speak to you.

My name is Philip Chong, President & CEO at Quincy Asian Resources Inc. (QARI), a non-profit immigrant social service agency based in New York City and Massachusetts. We have been serving the Asian and immigrant communities since 2001. We provide wrap-around services and programs in youth development, family and elder support, food security, social justice, adult education, and workforce development.

During the pandemic, QARI has been working tirelessly to help support our clients to access food, vaccination, comfort, and important information to navigate the unprecedented challenging time. In 2020, Quincy Asian Resources Inc was awarded as the anchor Pan Asian meal provider to prepare and deliver culturally sensitive meals to elders and vulnerable families across all five boroughs. In the past twelve months, we have delivered over 1.8 million meals to the people in the City.

As we all know, the pandemic has created many barriers and challenges in all aspects of our lives. We faced as many challenges as you can imagine from limited resources, supply chain disruption, labor shortage, and increasing food prices. As an immigrant and Asian American myself like many other immigrants and refugees, we fight for our survivorship and advocate for others to ensure they are being taken care of.

For the silver lining, through this program, our immigrant restaurant owners could reopen and provide hundreds of employment opportunities to the immigrant communities; and elders showed their appreciation or called us to say how much they enjoyed the Pan Asian meals that we provided especially during the winter time when the major snow storm made our door to door delivery to become extremely challenging. But we know we cannot give up because the elders have been counting on us.

Unfortunately, we faced even more challenges when we witnessed increasing Asian hate crime in the City and across the country in the last 20 months. Elders that we serve continue to raise the question to us whether they made the mistake to move to this country. In May, QARI worked with two community members, Julianna Lee and Oanh Nguyen, to distribute whistles to elders in New York City, Los Angeles, and Massachusetts. In thinking about how they could help support vulnerable elders, they connected with QARI and the #TheWhistleAgainstAAPIHate project was born. In New York, QARI partnered with City Harvest at its mobile food pantries, Charles B Wang Community Health Center, New York Chinese Consolidated Benevolent Association, Protect Chinatown, NY Visiting Nurse to distribute these whistles to our elders.



As we think of many of our parents and grandparents and their vulnerability as AAPI elders, we hope that the whistle will provide a sense of protection from potential harassment and harm, and a reminder that their community is standing with them. Given the little control we hold over random acts of violence and hate, even small things can have a big impact. Each whistle is accompanied by a note in Chinese, Vietnamese, Korean and English to share our message to elders that their community is listening, and standing by with care and support for them.

We know our work cannot stop here when the GetFood program is coming to an end in November. With the track records that we have, we have developed a multilingual digital platform for SNAP recipients to purchase fresh produce from the local farmers. In the meantime, we are planning to launch the nation's first clean energy powered mobile food distribution network focusing on plant-based in New York City to provide access to fresh produce and culturally sensitive meals to our elders and the vulnerable families. What the pandemic has taught us is the importance of distributing timely and effectively to our clients.

As the Department for the Aging and the New York City Council work together to devise a strong vision and Community Care Plan that will determine for our City innovates the senior service system to be more responsive to the needs of our immigrant seniors, we ask you to keep immigrant-centered providers and voices at the table. We are looking forward to collaborating with DFTA in different innovative ways to help support our elders and their families. As the QARI slogan says, we are immigrants supporting immigrants. We are STRONG and immigrants are STRONG.

Thank you for your time.



**Testimony of
Kevin Jones
AARP New York**

**New York City Council
Committee on Aging**

**Oversight – NYC’s Community Care Plan
October 18, 2021**

**Remote Hearing
New York, New York**

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

Good morning Chair Chin and members of the City Council Committee on Aging. My name is Kevin Jones and I am the Associate State Director for Advocacy at AARP New York, representing the 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 the Community Care Plan and the City's investments to help New Yorkers age with dignity in their communities.

As many of you participating already know, older adults are one of the fastest growing populations in New York City and will continue to make up a greater portion of the City's total population in the years ahead. New York City's older adult population is also becoming increasingly diverse as the City has seen the most significant growth of adults above the age of 65 in Black, Hispanic, and Asian/Pacific Islander communities over the past 20 years, and it is anticipated immigrant New Yorkers will make up more than half of the City's older adult population soon.

In addition to the growth in New York City's older adult population, we have witnessed a growing desire among New Yorkers and others across the country to remain in their communities as they age.

In a national survey that AARP conducted back in 2018, we found that 76% of Americans above the age of 50 said that they would prefer to age in their current home, and 77% stated that they would like to continue living in their community as long as possible. However, we found that only 59% said that they believed that they would be able to remain in their communities as they grow older.

These demographic shifts and changing sentiments among older New Yorkers will require the City to adapt to the growing needs of this population, as well as ensure that older adults have access to high quality services and a continuum of care that will allow them to age with dignity in their homes.

However, the City's budget for aging-related services continues to remain woefully underfunded as the Department for the Aging's budget remains about half of a percentage of the City's total budget through FY22. We also know that many of the City's neighborhoods that are witnessing the fastest growing older adult populations lack access to a nearby older adult center or NORC. Additionally, the OACs and NORCs that operate in low income communities of color have historically suffered from inequitable funding allocated by the City, thereby impacting their ability to deliver comprehensive and quality aging-related services to their clients.

We commend the City for their recognition of these issues and for their recent efforts to address them with the launch of the Five-Year Community Care Plan, along with their initial investment of \$39.4 million in the FY22 budget. We are eager to see the opening of 25 additional older adult centers/NORCs focused in historically underserved communities of color, as well as the expansion of community-based aging services to meet the needs as the City's older adult population continues to grow.

We believe that the City's expansion of community-based services and programming for older adults is a critical step towards helping more New Yorkers remain in their homes and age with dignity in their own communities, which has been shown to often improve both physical and mental health outcomes, as well as avoid stays in nursing homes and related facilities. These investments into community-based care and services have also been proven to save taxpayers money as these services can reduce the frequency for older adults to be hospitalized or placed in a nursing home.

However, as the City begins to allocate the Community Care Plan funding to providers in the coming months, we encourage the Mayor and DFTA to ensure that these funds are distributed equitably and involve City's full network of local community-based organizations in the process.

During the COVID-19 pandemic, we witnessed how the City's network of local nonprofits and community-based organizations went above and beyond to meet the increased demand for meals, health services, and other vital programs among the City's population of older adults. These organizations are a key piece to ensuring that older New Yorkers are provided with culturally competent and high-quality services in their communities in the years to come.

In addition to the funding that has already been allocated under the Community Care Plan, we urge the City to set aside funding in the next budget cycle to provide older adult centers and NORC providers with additional funds that they can use to invest in technology and technological literacy services in order to help address the digital divide and improve access among older New Yorkers.

Thank you for providing me with the opportunity to testify today. I am happy to answer any questions.

John K. Carroll
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Janet E. Sabel
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Alexander H. Ryley
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Civil Practice

Testimony of
The Legal Aid Society

on

Int. 1219-2018, presented before

The New York City Council's Committee on Aging

Alexander Ryley
Director of Elder Law
Civil Practice
The Legal Aid Society

June 18, 2021

The Legal Aid Society appreciates the opportunity to comment on Int. 1219-2018 and thanks the Committee on Aging for convening this hearing.

WHO WE ARE

The Legal Aid Society is the oldest and largest not-for-profit public interest law firm in the United States, working on more than 300,000 individual legal matters annually for low-income New Yorkers with civil, criminal, and juvenile rights problems in addition to law reform representation that benefits all two million low-income children and adults in New York City. The Society delivers a full range of comprehensive legal services to low-income families and individuals in the City. Our Civil Practice has local neighborhood offices in all five boroughs, including the Brooklyn Office for the Aging, along with centralized city-wide law reform, employment law, immigration law, health law, and homeless rights practices.

BED BUG INFESTATIONS DISPROPORTIONATELY AFFECT OLDER ADULTS

The prevalence of bed bug infestations in New York City disproportionately impacts older New Yorkers, in part because eradication protocols often include very labor-intensive attention to the physical contents of the infested apartment – work that a disabled older adult may be unable to perform. But these infestations disproportionately affect older New Yorkers for other reasons too, as follows:

- A bed bug extermination usually requires not just the movement of large furniture items; in addition, one usually must remove all objects from the walls and from within drawers, carefully bagging all items for inspection. Seniors who are wheelchair- or bed-bound, or who have other mobility-related or visual impairments, may be unable to perform these relatively simple, though crucial, tasks.
- Social isolation tends to increase as people age. Many New Yorkers are so socially isolated that they are unable to identify even one person to name as a medical decision-maker in a health care proxy form. Such isolated seniors likely will have no network of friends or relatives to ask for assistance with preparing their homes for bed bug eradication.
- Although reporting the presence of bed bugs to one's landlord should be a tenant's first step upon discovering an infestation, older tenants may be reluctant to so

inform their landlords for fear of having to perform extermination-related tasks in their apartment that they will find difficult or even impossible. A delay in reporting the problem can lead to a larger infestation, and even legal action against the tenant by the landlord.

- The more cluttered the home, the more difficult bed bug extermination will be. Recent studies have found that hoarding behavior is more prevalent among older adults and tends to worsen as the hoarder ages. Because hoarders are more likely to be older adults, the most challenging exterminations are likely to involve the homes of older people – who, as just discussed, may lack the ability to complete all of the steps necessary for a successful eradication.

INT. 1219-2018

The Legal Aid Society supports this bill's goal of providing assistance to older New Yorkers with bed bug infestations in their dwellings, and its requirement that such assistance shall include not just the moving of furniture and heavy equipment, if necessary, but also other services such as the laundering of clothing and the bagging of personal items.

But a clear obstacle to the success of such a program is a lack of awareness of the program by those seniors who require its services. Possible means to ensure awareness of the program could include:

- A provision requiring that, where a landlord, coop or condo board, and/or exterminator is aware of the presence of a bed bug infestation in the home of an elderly person, said landlord, coop or condo board, and/or exterminator must notify the Department, in the same way that a landlord must inform a marshal of the presence of an elderly or disabled person in an apartment before eviction, and the marshal must then contact Adult Protective Services before proceeding with an eviction.
- Coordination between DSS and DFTA and other agencies that serve older people, such as the Department of Finance, which could include, with its SCRIE and SCHE mailings to seniors, correspondence describing DFTA's bed bug program.

A BROADER PROBLEM: PREPARING HOMES FOR REPAIRS

The problem of seniors' inability to prepare their homes for the correction of Housing Code violations long predates the reemergence of bed bugs in New York City.

Some seniors live in apartments with Housing Code violations that can be corrected only after heavy furniture has been moved, and many of these older tenants cannot move the furniture themselves. Landlords of these tenants often refuse to move the furniture and perform the work, citing potential liability either as a genuine concern or as a pretext so as to avoid responsibility.

We therefore urge the Committee to consider legislation that would require the Department to offer assistance to older adults who cannot prepare their apartments for the correction of *any* Housing Code violation, not just that pertaining to bed bug infestations.

For more information, please contact Alex Ryley at AHRYley@Legal-Aid.org, or at 646-284-5194.



NEW YORK CITY COUNCIL COMMITTEE ON AGING

Monday October 18, 2021, 11:00 a.m.
SUBJECT: Int 1219-2018

My name is Peter Kempner. I am the Legal Director and Senior Law Project Director at Volunteers of Legal Service (VOLS). VOLS was established in 1984 and our purpose is to leverage private attorneys to provide free legal services to low-income New Yorkers to help fill the justice gap.

Our Senior Law Project focuses our services on helping low-income New York City seniors plan for the future by obtaining wills and other advance directives. This planning ultimately allows seniors to make their wishes clear, empower their chosen caregivers, and allows them to age in place in the community for as long as is feasible.

In addition to our life planning services we operate a legal advice hotline for seniors. Legal issues related to fear of eviction and homeless tops the list of questions we hear about from our clients.

While both New York State and New York City have taken significant steps to protect the rights of low-income tenants in recent years, landlords continue to push forward with their efforts to force out long term tenants in rent regulated housing, many of whom are seniors. The Housing Stability and Tenant Protection of 2019 eliminated many of the perverse incentives landlords had to force out long term tenants, such as high vacancy rent increases and high rent deregulation. The Universal Access to Counsel program now ensures that seniors at or below 200% of the federal poverty level receive free representation in eviction proceedings. Even as these reforms and programs represent progress in reducing evictions and homelessness among New York City seniors, many threats remain unaddressed.

One of the most challenging situations a senior can find themselves in, is a bedbug infestation. Beyond the bites, property damage, and the trauma that an infestation can cause, this is a situation that can put a senior at risk of eviction and homelessness. Many landlords are eager to bring a holdover proceeding based on a nuisance claim where a senior tenant is the victim of a bedbug infestation. In fact, one of the few types of eviction cases that have been allowed to move forward in the face of the recent and current pandemic related eviction moratoriums are holdover proceedings where the landlord is alleging a tenant is causing a nuisance in the subject premises.

Many seniors who are fully willing to cooperate with their landlord in taking the needed steps to treat and hopefully eliminate a bed bug infestation, may find themselves unable to do so because of physical limitations and disability.

As Int. 1219-2018 clearly recognizes, for a bed bug infestation to be properly abated the tenant must declutter, bag personal items, and move heavy furniture and appliances. Otherwise, the efforts will be in vain. Seniors with able bodied friends and family members or those who have the financial resource to hire help will be able to properly prepare an apartment for bed bug remediation. Sadly, this leaves behind the most isolated seniors who have the least resources. These are the very seniors who if evicted will face homelessness because they will not have anyone to take them in nor will they have the financial wherewithal to find safe and affordable alternative housing.

I have seen bedbug related nuisance holdover proceedings play out repeatedly in Housing Court. The parties reach a stipulation of settlement under which the tenant agrees to grant access or the Judge orders access for bed bug treatment in the subject unit. When the workers arrive, they are unable to effectively treat the problem because of the conditions in the apartment, leading to the landlord returning to court with complaints about the tenant's lack of cooperation and allegations of tenant recalcitrance. Too often this spirals out of control ending with a frustrated Judge letting the execution of a warrant of eviction go forward. Legal services attorneys are often able to tap into the resources of either non-profit or government agencies to avoid this outcome, but these resources are scarce and often difficult to locate. The mandate in Int 1219-2018 that the services be the subject of educational and outreach campaigns will ensure that seniors in need and their advocates will be able to avail themselves of the program.

Beyond the human toll of homelessness resulting from a bed bug infestation, from a cost-benefit perspective it is clearly preferable to invest taxpayer dollars in a program like the one outlined in Int 1219-2018 than to pay much more to house a senior in a shelter or other type of transitional housing. In addition, homelessness leads to deteriorating health outcomes for seniors resulting in increases in Medicare and Medicaid expenditures. These seniors may also find themselves more likely to end up in a nursing home or other facility, most often at taxpayer expense.

Our hope is that the assistance and support program outlined in Int 1219-2018 will save disabled New York City seniors from eviction, homelessness, and the spiraling negative impact that will have on their health and wellbeing.

Thank you for allowing us to submit this testimony and for supporting the needs of New York City's seniors.

Peter Kempner, Esq.
Legal Director