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The City of New York Manhattan Community Board 8

Health, Seniors, and Social Services Committee Meeting

New York Blood Center 310 East 67th Street April 19, 2012

Community Board members in attendance: Molly Blayney, Mary Pike, Ellen Polivy, Hattie Quarnstrom, Barbara Rudder **Public member in attendance:** Jeffrey Ascherman

The meeting was called to order at 6:38pm.

Laura Lazarus and Dina Zempsky, respectively the chief operating officer and the director of case management at Lenox Hill Neighborhood House, discussed its "innovative senior center" and its case management system for atrisk seniors. Sheila Roher, a senior policy associate in the division of health policy at the New York Academy of Medicine (NYAM), explained the Age-Friendly New York City program the city implemented in 2007.

The Center @ Lenox Hill Neighborhood House is one of the initial group of eight "innovative senior centers" funded by the New York City Department of the Aging (DFTA). The community groups designated to bring these model senior centers into existence (start date of January 2012) were selected pursuant to the DFTA's competitive procurement procedure. Both the innovative senior centers and the Age-Friendly NYC initiatives are geared toward enabling the older residents of our city to remain healthy, active, and engaged.

All three presentations conveyed substantial amounts of information. Printed materials relevant to their presentations were also distributed:

- April 2012 Center @ Lenox Hill Neighborhood House Newsletter, which contained information on activities and programming, and a comprehensive calendar of activities.
- Age-Friendly NYC general fact sheet.
- Make Your Business Age-friendly: Low-cost and no-cost ways businesses can be more age-friendly.
- Fact sheet about the New York Academy of Medicine, one of the three moving forces behind the implementation of the Age-friendly NYC initiative.

Excellent materials on the topics the speakers addressed are readily available to interested board members and members of the public on the following websites:

- <http://www.lenoxhill.org/content/who-we-help/older-adult-services/senior-centers.html>
- <http://www.nyam.org/agefriendlynyc>.

All three speakers were open to questions and discussion during the course of their presentations. The points that follow are among those made during the course of their respective presentations.

Laura Lazarus, Chief of Operations, Lenox Hill Neighborhood House:

- The Center @ Lenox Hill Neighborhood House is located at 343 East 70th Street.
- The Center provides an enhanced range of services and programs for older adults whose conditions span a continuum ranging from the most frail to the most active.
- Membership in the Center @ Lenox Hill is open to adults 60 years of age and older; one must be a member to participate in its programs but there is no charge to become a member nor is there any charge for participating in the Center's programs.
- Among its innovations, the Center is now serving greater numbers of seniors; it is open 365 days a year, and its hours, which had been 9am-4pm, are now 8am-6pm, and will eventually be expanded to 8am-8pm.
- Programming has doubled, and efforts are underway to expand the available offerings still further.
- Various transportation options are available on a daily basis; the Center has two buses and four drivers, and a range of destinations is among the transportation options.
- Increased emphasis on nutrition plays a significant role in the Center's program, in terms not only of its classes and workshops but also with respect to the meals it serves: dinner will eventually be available, in addition to the breakfasts, lunches, and snacks currently available, and there will a growing number of vegetarian-based meals.
- A wide array of varied programs, services, and classes is available every week; areas include arts and education, physical health and exercise, wellness and health management, social opportunities, and nutrition education, as well as a growing range of technology/computer offerings, including opportunities for one-on-one tutoring.
- Various forms of legal assistance (workshops, walk-in legal, SCRIE, and advanced directive clinics), tax assistance, and case assistance (e.g., Medicare, Medicaid) are also available, as are financial literacy/management services.

Dina Zempsky, Director of Case Management, Lenox Neighborhood House:

- Lenox Hill Neighborhood House case managers provide social work case management services to 1,400 elderly and at-risk East Side residents on a year-round basis.
- The case managers monitor the health and circumstances of these at-risk individuals, evaluate and assess their needs, and then connect them with the services critical to their particular needs.
- The provision of those services is essential to their health, safety, and general well-being and to them being able to remain in their homes.
- Absent the involvement and assistance of their case managers, it is unlikely these individuals would be able to access themselves the care and other services they are in acute need of, as they are compromised by physical infirmity, and often by confusion, mental deterioration, and, in growing numbers of cases, dementia.
- The current clients of the case management program range in age from 60 to 103, have complex medical profiles, are frail and largely homebound, and have an average income of \$900 per month.

- They are isolated not only owing to their fragile physical condition and severely limited financial means but also, in many instances, because they do not have family or a partner or are physically distant from family.
- Too often, the only person with whom these elderly women and men have any social contact is their case manager.
- 464 of the singularly vulnerable residents in the case management program live within the CB8M district.
- It is anticipated that for fiscal year 2013, the city may cut the funding for case management services by 15%; this would be in addition to the 15% cut experienced during the present fiscal year.
- Further cuts in the funding for the case management program will mean that many of the frail elderly it serves will be put at grave risk; fewer will be able to be served, the services available will likely be both fewer in number and less comprehensive, and waiting lists will grow, as the number of aged in need of case management services is growing.

On the basis of the information Lenox Hill Director of Case Management Dina Zempsky presented, and the discussion that ensued, the following resolution was passed, unanimously, by the Health, Seniors, and Social Services committee:

Resolution Requesting the New York City Council to Restore Full Discretionary Funding for the Case Management Program

Whereas, in June 2011, Community Board 8 Manhattan passed a resolution urging the New York City Council to provide full discretionary funding for the Department for the Aging (DFTA) and urging the Mayor to baseline the DFTA budget for this fiscal year.

Whereas, It is with great disappointment that we learned that the Case Management program is yet again facing a cut to its budget on top of the cut it experienced this current year.

Whereas, Case Management works with the most vulnerable of our senior population, frail and homebound older adults who often have no other supports and by nature of their disabilities are often socially isolated.

Whereas, these clients range in age from 60 to 103, are often suffering from multiple medical and cognitive impairments, and have an average income of \$900 a month.

Whereas, without the services provided by the Case Management program, they would have no way to access needed care.

Whereas, Case Management enables these individuals to maintain life in their community, rather than being forced into higher and more costly levels of care.

Whereas, further cuts in the funding for the Case Management program will mean that many of the frail older adults it serves will be put at grave risk, fewer will be able to be served, the services available will likely be both fewer in number and less comprehensive, and waiting lists will grow.

Whereas, the number of aged in need of case management services is growing.

Therefore, be it resolved that the City Council take all possible steps to protect the vital Case Management program against any further cuts and to insure that it can provide all the services necessary to protect this very fragile and vulnerable population.

Therefore, be it further resolved that the City Council also take all possible steps to restore full funding to the Case Management program.

Therefore, be it also further resolved, that we renew our request that the senior services budget be base-lined into the Mayor's budget at a level equal to or greater than last year's allocation.

VOTE: 6-0-0

Yes: Board Members Blayney, Pike, Polivy, Quarnstrom, and Rudder, and Public Member Ascherman **No:** 0 **Abstentions:** 0

Sheila Roher, Senior Policy Associate, Division of Health Policy, New York Academy of Medicine:

- In response to outreach by the World Health Organization, New York City initiated a collaborative effort aimed at generating an ongoing dialogue assessing the strong points and the weak points of life in New York City for those in their older years.
- Launched here in 2007 as part of a global, multi-city effort to assess cities' strengths and weaknesses, Age-Friendly New York City has generated vigorous examination of what can be done to make the city more age-friendly.
- The outgrowth of this initiative has, in many instances, resulted in the identification and implementation of low cost or no cost steps that aid our older residents in remaining healthy, engaged, and contributing members of their communities and their city.
- A joint undertaking of the Office of the Mayor, the New York City Council, and the New York Academy, the first phase of this vital effort focused on aggressive and widespread outreach to a broad spectrum of the city's older residents, including immigrants, homeless, and LGBT seniors, and to other experts.
- The outreach also extended to leading figures in education, business, and numerous other areas; in addition, different professional groups were drawn into the consultations, including, e.g., architects, attorneys, and pharmacists.
- Public spaces, transportation, information and communication, housing, respect and social inclusion, social participation, civic participation and employment, and health and social services were particular areas of scrutiny and discussion.
- On the basis on these intensive and extensive outreach efforts, the city government compiled 59 recommendations for further initiatives in the areas of community and civic participation, housing, public spaces and transportation, and health and social services.
 [NOTE: See Age Friendly New York City/Enhancing Our City's Livability for Older New Yorkers.
 http://www.nyam.org/agefriendlynyc/docs/NYC_Age_Friendly_reportEnhancing- Livability.pdf>
- With the aging of the population, attitudes toward the aging seem to have worsened, rather than improved; in our society, there are few positive roles for the elderly, and the aging are often infantilized and marginalized.
- Among other things, perceptual barriers can operate to inhibit outreach to and inclusion of the elderly.

- A goal of the ongoing efforts is to instill an age-sensitive focus in the urban planning and decisionmaking process and to think about what changes can be made in the urban environment to make it more age-friendly; this is a win-win endeavor since such changes operate to improve the quality of life for everyone, not just seniors, in many instances.
- Aging improvement districts, an Age-Friendly NYC innovation, operate to bring about changes on the neighborhood level, the area in which older New Yorkers have the greatest stake. There are currently three aging improvement districts-in East Harlem, the Upper West Side, and Bedford-Stuyvesant; there are none on the Upper East Side.
- Age-friendly NYC has a variety of free materials, including "tool kits" and other useful guides for community members, including its new 2012 publication Creating an Age-Friendly NYC One Neighborhood at a Time.

Old Business:

After the presentations concluded, the co-chair distributed information received from Jorge E. Pastor, a speaker at the March 22, 2012, meeting of the committee. Mr. Pastor is the director of the youth transitioning unit of the division of family permanency services at the New York City Administration for Children's Services (ACS). The information was about volunteer opportunities for those interested in mentoring a child in foster care and was provided in response to a question posed to him by a member of the committee at the March 22 meeting. Website material about ambulance services was also provided to committee members by the co-chair as the committee has been considering whether a meeting on that topic might be useful.

New Business:

There was none.

Ellen Polivy and Mary Pike Co-Chairs Health, Seniors, and Social Services Committee