

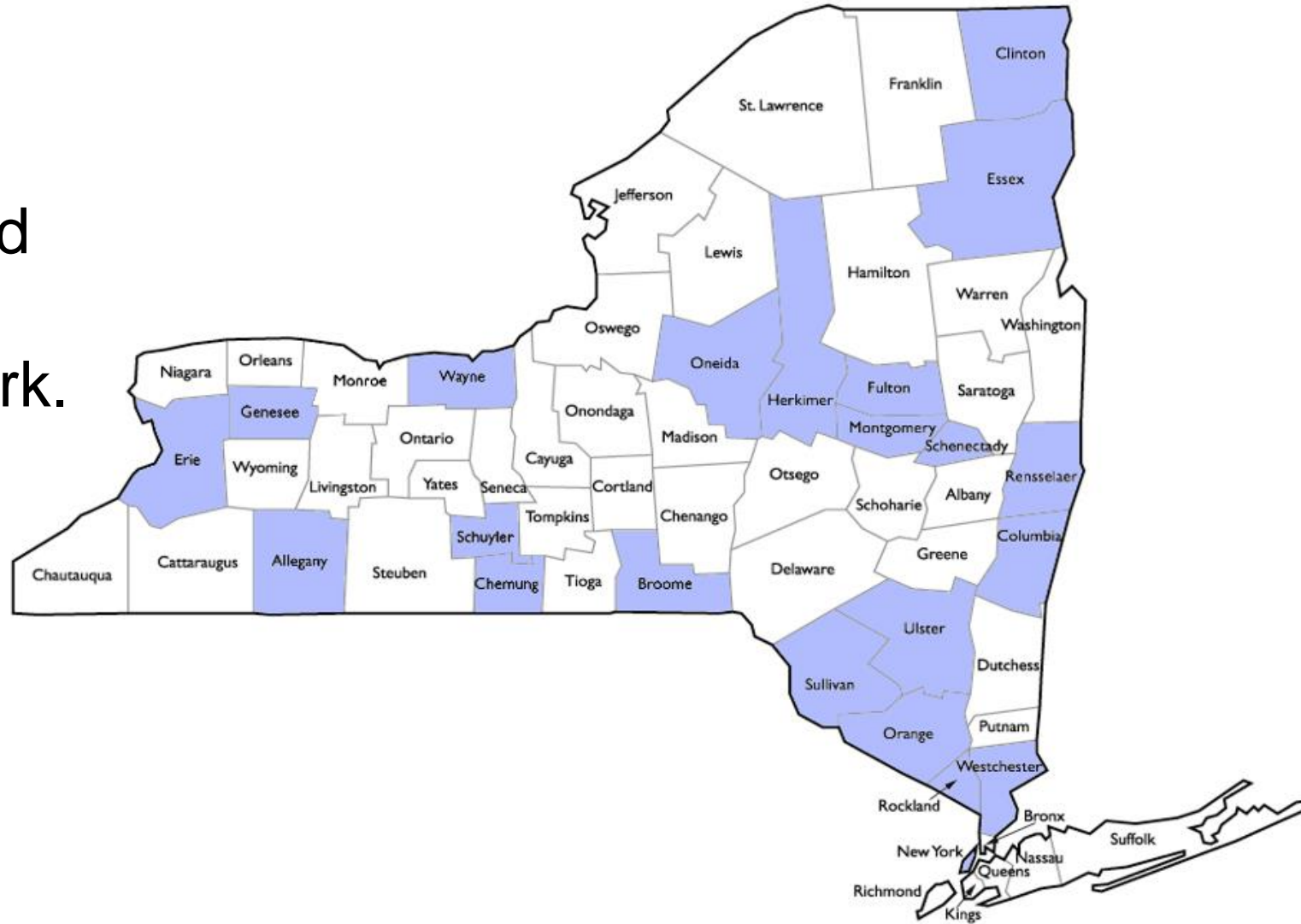


# **NYS Health, Housing, and Longevity Learning Collaborative Kick-off Webinar**

**April 13, 2022**

# WELCOME TO THE HOUSING, HEALTH, AND LONGEVITY LEARNING COLLABORATIVE

In the chat,  
please tell us  
your name and  
the county  
where you work.



- Allegany
- Broome
- Chemung
- Clinton
- Columbia
- Erie
- Essex
- Fulton
- Genesee
- Herkimer
- Montgomery
- New York
- Oneida
- Orange
- Rensselaer
- Rockland
- Schenectady
- Schuyler
- Sullivan
- Wayne
- Westchester
- Ulster

This map shows the health departments across NYS that registered for the Learning Collaborative.

# **NYS Health, Housing, and Longevity Learning Collaborative**

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**DIANE KOLACK, MPH  
PROGRAM OFFICER  
CENTER FOR COMMUNITY  
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DKOLACK@NYAM.ORG**

# TODAY'S AGENDA

Welcome and  
Orientation

State & National  
Partners – ASTHO,  
DOH, OFA, DOS,  
and HCR

Q & A for State  
Agency partners

Review of data from  
enrollment survey

Introduction to  
Supportive Housing:  
Patricia Hernandez,  
Corporation for  
Supportive Housing

Q & A about  
supportive housing  
in NYS

Group Discussion

10:30 End of  
Meeting

# ABOUT THE LEARNING COLLABORATIVE

## **Wed. April 13 - 9:00-10:30 – Webinar 1**

Wed. April 27 - 1:30-2:30 – office hours 1

## **Wed. May 4 - 9:00-10:30 – Webinar 2**

Wed. May 11 - 1:30-2:30 – office hours 2

## **Wed. May 18 – 9:00-10:30 – Webinar 3**

Wed. May 25 - 1:30-2:30 – office hours 3

## **Wed. June 8 - 9:00 – 10:30 Webinar 4**

Wed. June 22 - 1:30-2:30 – office hours 4

Wed. July 13 - 1:30-2:30 – office hours 5

Our **webinars** will be 90 minutes. We will have formal presentations with speakers and opportunities to engage with them and your peers.

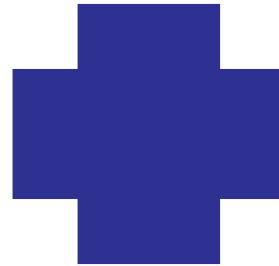
We ask that you attend all four webinars. Recordings will be posted for those who may have a conflict.

The **office hours** sessions are also on Zoom. They will be less formal and will have a theme, but no presentations. Office Hours sessions are opportunities for peer-to-peer networking and connecting.

The office hours meetings are optional, and you can attend or not, depending on your interest and availability.

# ABOUT THE LEARNING COLLABORATIVE

**Please register for each event using Zoom, even if you “accepted” the invitation on your calendar already. This helps us track who is attending the webinars and office hours sessions.**



# ABOUT THE LEARNING COLLABORATIVE



HEALTH & AGE  
ACROSS ALL  
POLICIES

NYS Work

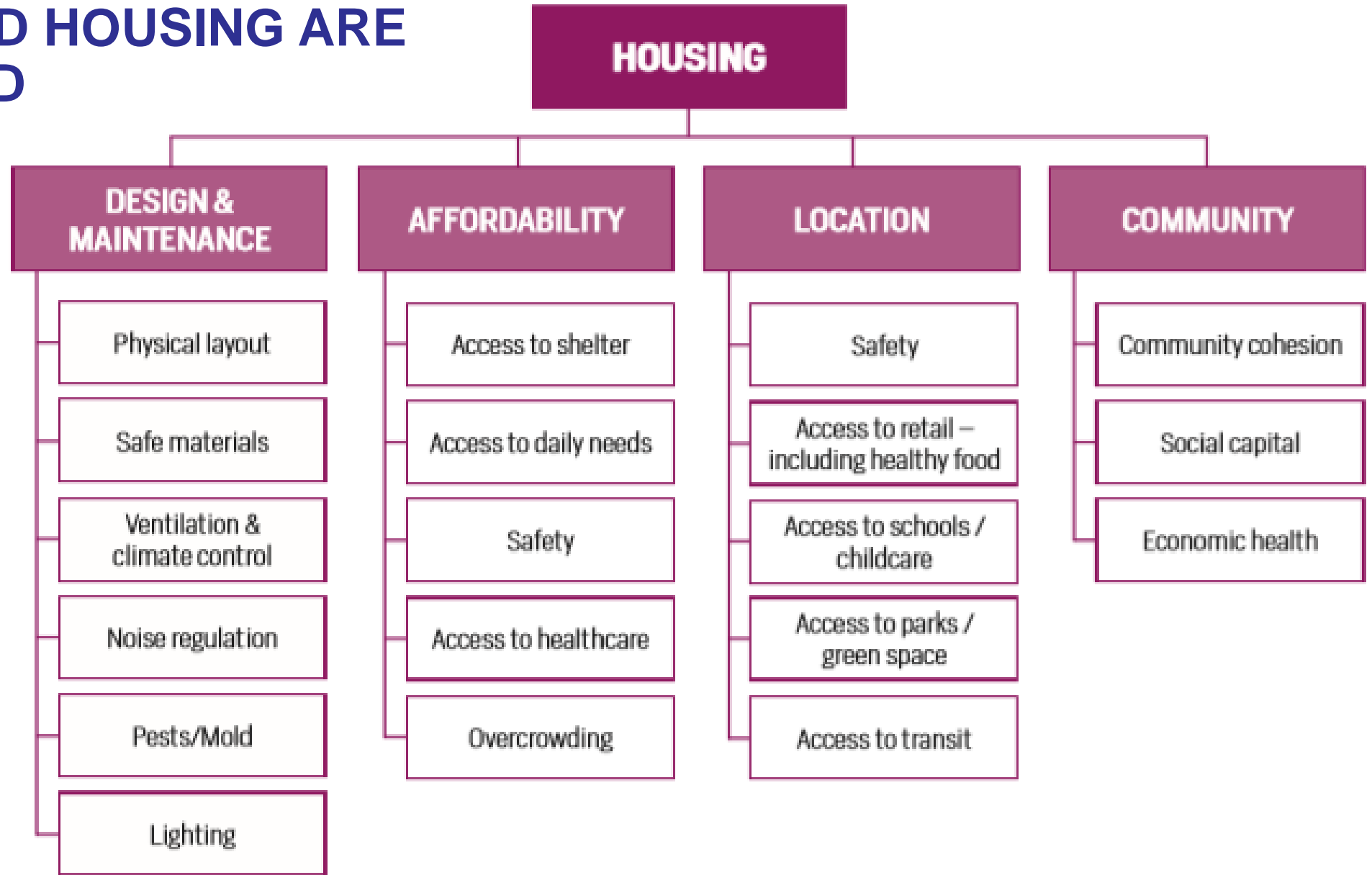
[Resources](#)

## Resources

NYS Health and Age Across All Policies includes the [WHO 8 Domains of Livability for healthy aging](#), [Smart Growth](#), [Health Across All Policies](#), and principles of health equity. Following are resources to support this work. Click on the blue text for the full resource list in each category. If you have resources you'd like to add to our list, please reach out through our [contact page](#). To learn more about our work, please visit the [Center for Healthy Aging](#) and the [Center for Community Partnerships and Policy Solutions](#). To see examples of this work across NYS, please visit our [NYS Work](#) page.

We will post webinar slides, recording, and resources from our Learning Collaborative on the NYAM Health & Age Across All Policies website, <https://www.nyam.org/haaap>

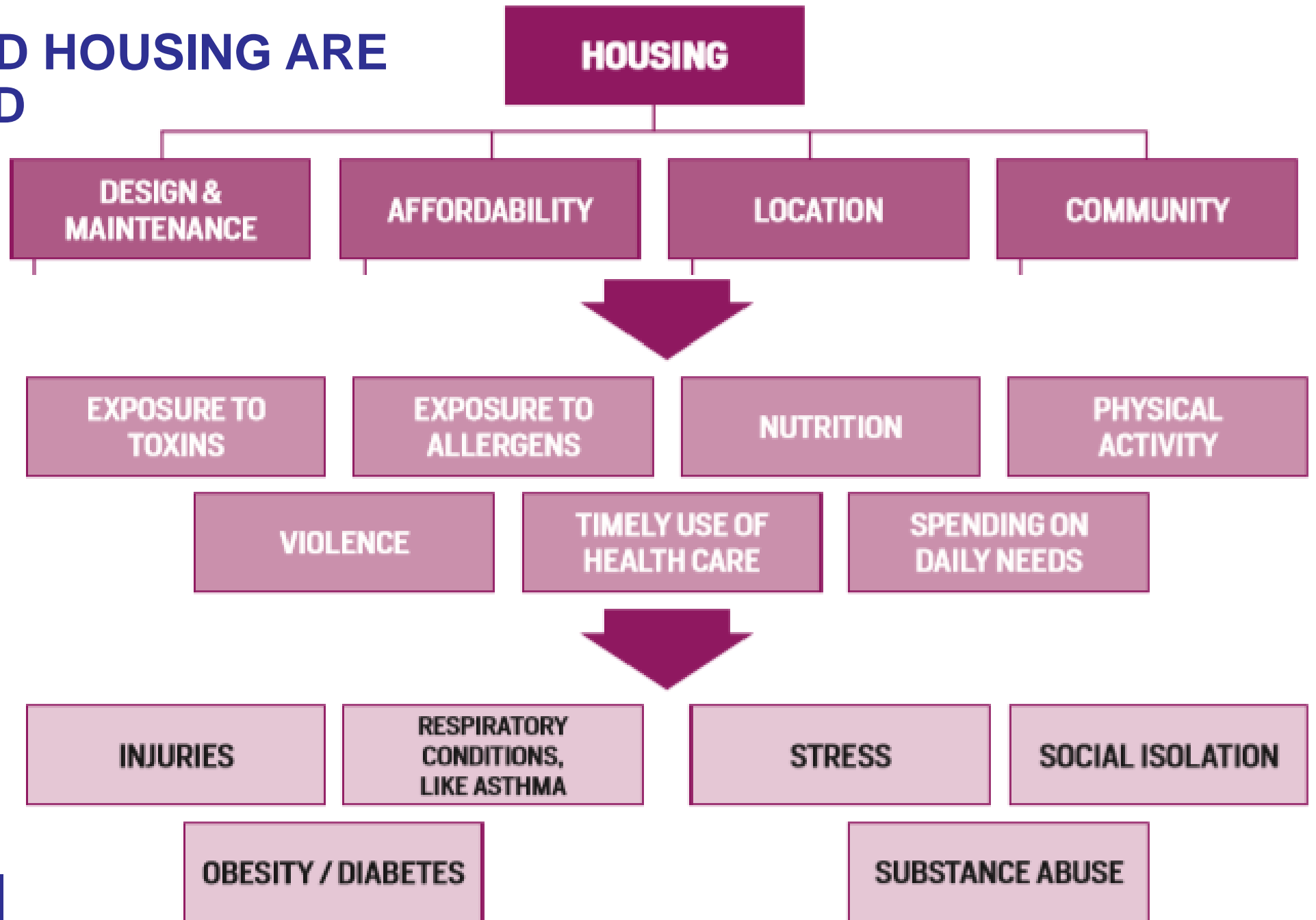
# HEALTH AND HOUSING ARE CONNECTED



Source:  
<https://www.nyam.org/publications/publication/east-harlem-neighborhood-plan-health-impact-assessment/>  
Kimberly Libman, PhD, MPH; Shauneequa Owusu, MS; Lindsey Realmuto, MPH



# HEALTH AND HOUSING ARE CONNECTED



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# NYS APPROACH TO HEALTH & AGING



Used with permission from The New York Academy of Medicine

# **NYS Health, Housing, and Longevity Learning Collaborative**

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# **NYS Health, Housing, and Longevity Learning Collaborative**

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# **NYS Health, Housing, and Longevity Learning Collaborative**

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# **NYS Health, Housing, and Longevity Learning Collaborative**

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# **NYS Health, Housing, and Longevity Learning Collaborative**

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# Q&A



**BREAK (5 MIN)**

# **NYS Health, Housing, and Longevity Learning Collaborative**

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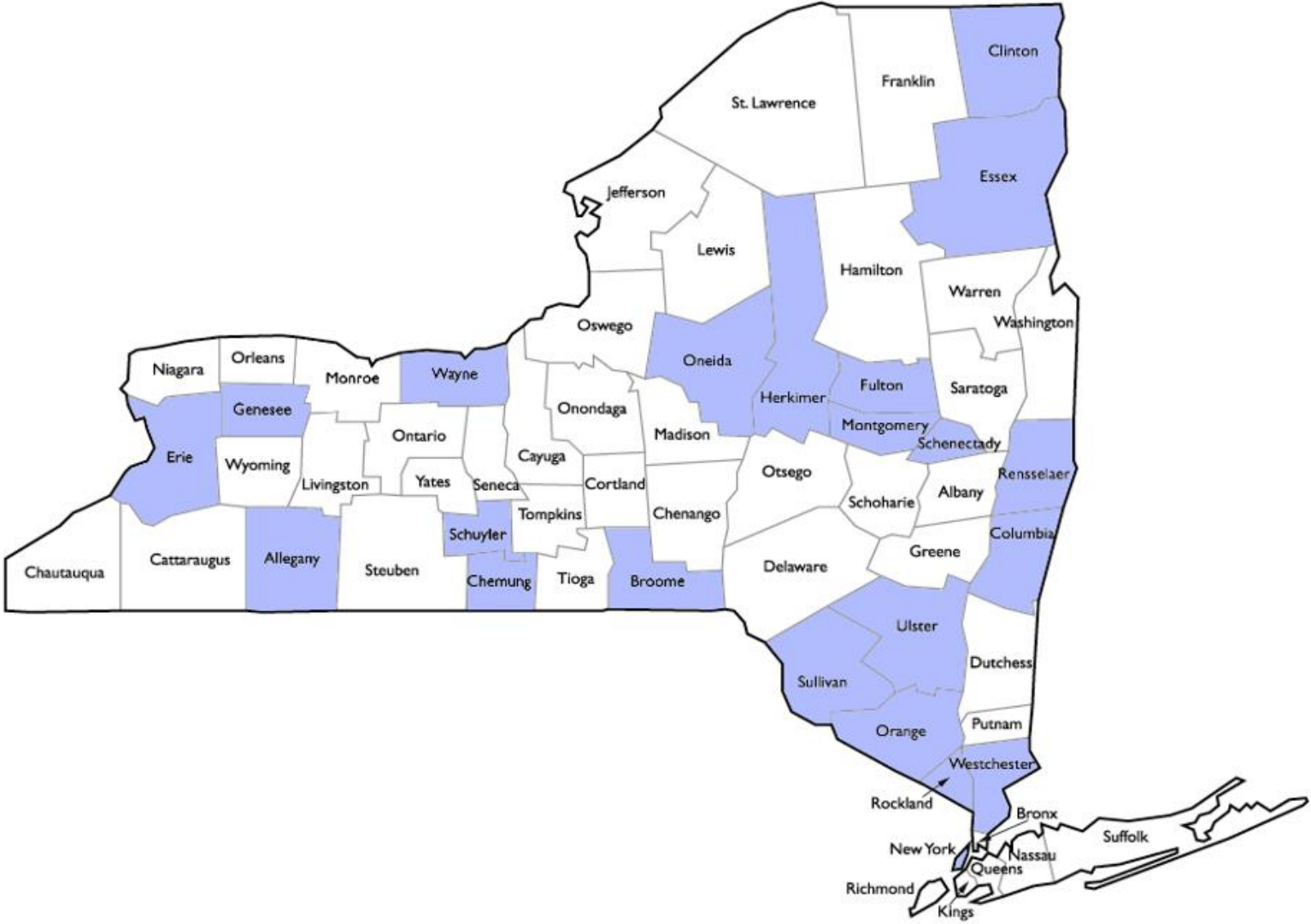
**KANA TATEISHI, MS  
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KTATEISHI@NYAM.ORG**



**THE  
NEW YORK  
ACADEMY  
OF MEDICINE**

## **Starting Line: Expression of Interest Form Responses**

# HOUSING, HEALTH, AND LONGEVITY LEARNING COLLABORATIVE PARTICIPANTS



- Allegany
- Broome
- Chemung
- Clinton
- Columbia
- Erie
- Essex
- Fulton
- Genesee
- Herkimer
- Montgomery
- New York
- Oneida
- Orange
- Rensselaer
- Rockland
- Schenectady
- Schuyler
- Sullivan
- Wayne
- Westchester
- Ulster



# What do you think are the biggest housing challenges for older adults in your county?

“Affordable housing; Accessible housing that meet the needs of an older adult - one level living, safe housing concerns with grab bars in showers, handrails, updated fire safety, etc.”

*- Learning Collaborative participant*

# What do you think are the biggest housing challenges for older adults in your county?

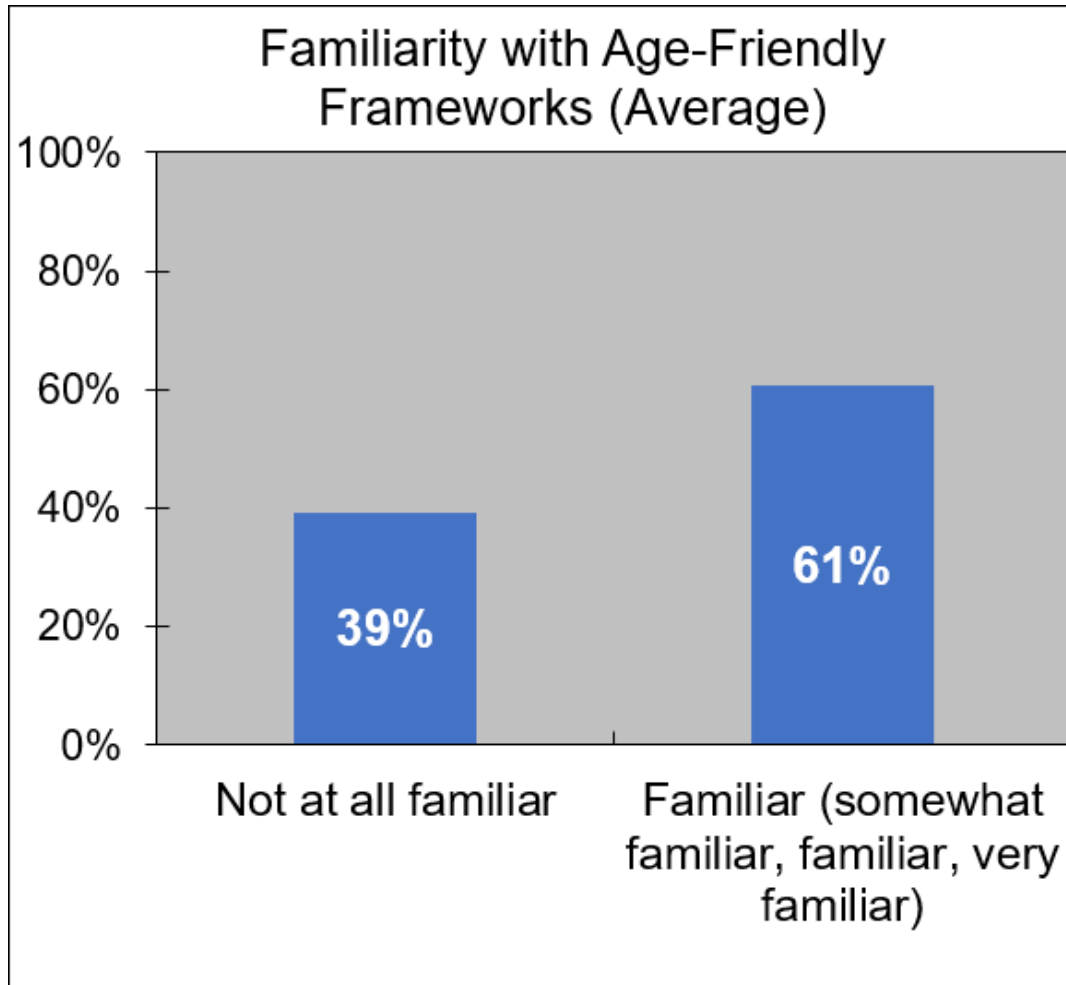
“There is a significant lack of affordable, accessible housing for older adults in our county.

There are also areas of our county that have no access to public transportation, so if an older adult is unable to drive, they have no access to grocery stores, pharmacies, or health care.

**Many older adults have expressed concern that they will not be able to continue living in their communities when they can no longer drive due to this lack of access, but there are no options for many as far as senior housing.”**

*- Learning Collaborative participant*

# To what extent are you familiar with the following frameworks?



Age-Friendly Frameworks	Familiar	Not at all familiar
NYS Health Across All Policies/Health in All Policies	<b>82%</b>	18%
Dementia Friendly Communities	<b>54%</b>	46%
AARP Age-Friendly Communities	<b>61%</b>	39%
WHO 8 Domains of Livability	<b>54%</b>	46%
Age-Friendly Health Systems (The 4 M's)	<b>50%</b>	50%
Age-Friendly Public Health	<b>64%</b>	36%



# **NYS Health, Housing, and Longevity Learning Collaborative**

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**PATRICIA HERNANDEZ**

**DIRECTOR, METRO TEAM (NY, NJ, & PA)  
CORPORATION FOR SUPPORTIVE  
HOUSING**

**PATRICIA.HERNANDEZ@CSH.ORG**



**CSH** 30 Years of Supportive Housing Solutions



# Supportive Housing and Older Adults

# What We Do

CSH is a touchstone for new ideas and best practices, a collaborative and pragmatic community partner, and an influential advocate for supportive housing.



# Older Adults with Housing & Services Needs wishing to Age-in-Community

- Includes Adults 50+
  - Experiencing homelessness
  - Inappropriately institutionalized, or
  - Current aging in supportive housing who desire to age healthily and safely in their homes for as long as they can
- Supportive housing is seen as an ideal solution to address the needs of aging tenants with adaptable housing models and flexible service packages.



# Housing Continuum in NY

## Permanent Housing



# Supportive Housing: A Powerful Social Determinant

Supportive housing combines affordable housing with services that help people who face the most complex challenges to live with stability, autonomy and dignity.





# Supportive Housing Models

## **Project-Based or “Congregate”**

- Buildings typically have not more than 40% of units designated as “supportive housings” and the remaining units are affordable and available to the wider community. These building have onsite case management. Some smaller projects are 100% supportive housing.

## **Tenant-Based or “Scattered Site”**

- This model typically utilizes vouchers to rent units on the private market, and case managers visit the tenants and connect them to community-based services.

# Financing Supportive Housing

Putting together the financing for a housing project can be thought of like a three-legged stool with *capital*, *operating*, and *service* funding each comprising a leg. The budget for each of these three pieces can include multiple funding sources braided together.

Capital

Operating

Services

Financing



# Who lives in Supportive Housing?

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- Chronically Homeless Individuals
- Aging Adults
- Child Welfare Involved Families
- Justice-Involved
- Adults with Intellectual & Development Disabilities
- Adults with Behavioral Health Needs
- Youth





# Supportive Housing

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**In NYS, 67% of supportive housing residents are age 50+\***

*\*NYS OMH Child and Adult Integrated Reporting System (CAIRS), residents of OMH supportive housing (Scattered and Single-Site) as of January 2, 2018.*



# Key Components of Quality Supportive Housing

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- Follows Housing First Model
- Targets households with multiple barriers
- Housing is affordable
- Provides tenants with a lease
- Engaged tenants in flexible, voluntary services
- Coordinates among key partners
- Supports connecting with community



# Improved Health Outcomes through Supportive Housing

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- Reduction in health care costs
- Improved access to ambulatory care
- Increased adherence to medications
- Overall improvement in well-being
- Cost savings for public systems



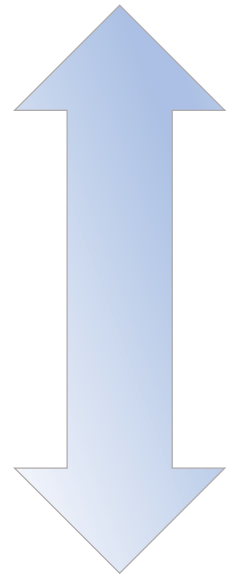
# Growing Needs of Older Adults

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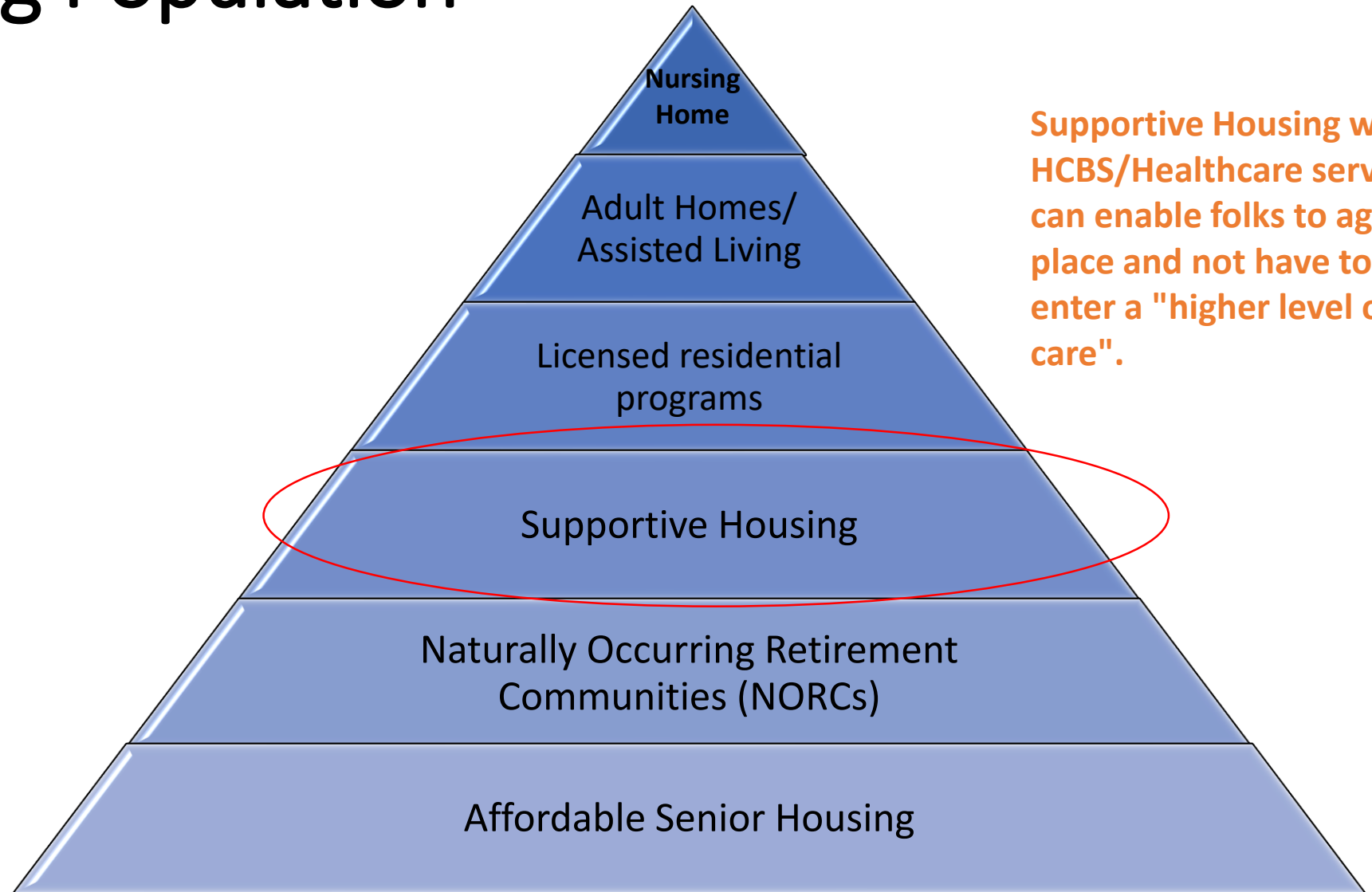
- Premature aging (for those with current or previous history of homelessness)
- Accessibility challenges and performing ADLs
- Limited services for geriatric mental health
- Increased needs for older adults with behavioral health
- Isolation and loneliness
- Increased complex medical needs
- Cognitive decline, including dementia
- Risk of institutionalization

# Housing and Support Services Needs for a Growing Aging Population

Highest Expense  
and Support Need



Lowest Expense  
and Support Need



Supportive Housing with HCBS/Healthcare services, can enable folks to age in place and not have to enter a "higher level of care".



# Determining the Housing Need in the Community

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- [The Continuum of Care \(CoC\)](#) is a collective body of community stakeholders, a planning process for addressing local need for homeless services, a geographic region encompassed in the planning process, and a source of homeless assistance funds from HUD.
- CoCs must collaboratively assess the need for homeless services, evaluate and rank projects, and submit a single, consolidated application to HUD for funding.

# Development of the Coordinated Assessment and Placement System (CAPS)

- To meet the HUD requirement of Coordinated Entry System, the NYC Continuum of Care (CoC) developed the Coordinated Assessment and Placement System (CAPS).
- In its full development, CAPS is a tool that streamlines and improves the assessment, prioritization, housing matching, and placement system for homeless and at-risk households within NYC's five boroughs.





# Four Main Components to CAPS



**UNIVERSAL  
ASSESSMENT**



**VULNERABILITY &  
PRIORITIZATION**



**REFERRAL &  
PLACEMENT**



**EVALUATION**

# Components of a Healthy Aging Model in Supportive Housing

- Healthy Aging Team/Staff
- Data Infrastructure
- Enhanced Training
- Partnerships
- Building Community
- Age Friendly Designs





## The Talmage Gateway Supportive Housing

San Diego, CA

- St. Paul's PACE – Wakeland Housing & Development Corp. Partnership
- 200 Formerly Homeless Individuals 55+ Housed
  - Expansion across city and state

# Innovations in Supportive Housing

## Pairing Supportive Housing with PACE

- **PACE:** Program for All Inclusive Care for the Elderly
- Provides comprehensive, coordinated medical, social, and in-home services for older adults age 55+
- Financed through Medicaid (and usually Medicare)
- Increase in PACE / Supportive Housing Partnerships across the country

# Medicaid and Housing (1115 Waivers)

- Create incentives for health care delivery systems to fund tenancy support services as an option within the “Whole Person Care Pilots. Includes Outreach, Engagement in services for supportive housing and Move in Costs (e.g. security deposits).
- Medicaid funds used for tenancy support services, billed monthly on a per diem rate
- Have Medicaid fund Pre-Tenancy, Tenancy Sustaining Services and , Supportive Employment

# "Supportive Housing" Resources for Older Adults

ESSHI (Empire State Supportive Housing Initiative)	SARA (Senior Affordable Rental Apartments)	AIRS (Affordable Independent Residences for Seniors)
<p>Provides services and operating financing up to \$25K per supportive housing unit. Capital comes from several NYS and NYC sources.</p>	<p>SARA provides capital gap financing in the form of low-interest loans of up to \$75,000 per unit.</p> <p>New York City Department for the Aging also dedicated \$5,000 of service funding for each non-supportive housing unit, for a period of five years.</p>	<p>Incentivizes developers to set aside housing units for low-income seniors by enabling zoning allowances permitted under the NYC Zoning Resolution.</p> <p>This program incentivizes developers by increasing the density, or Floor Area Ratio (FAR), allowed on development sites, thereby increasing the revenue for the developer and the number of units in a project</p>
<p><b>Frail Elderly/Senior:</b> Any person who is age 55 and older, who is enrolled in Medicaid, and requires assistance with one or more activities of daily living or instrumental activities of daily living.</p> <p>Eligible persons are referred from a Skilled Nursing Facility (SNF), or identified as homeless by a Health Home, hospital, Managed Care Organization (MCO), medical respite, Managed Long-Term Care (MLTC), Performing Provider System (PPS), or shelter</p>	<p>Projects developed with SARA funding are required to set aside 30% of the units for homeless seniors referred by a City or State agency, typically the New York City Department of Homeless Services. Eligible adults 65+.</p>	

# Resources

- [Healthy Aging in Supportive Housing Toolkit - CSH](#)
- [Impactful Innovations: Serving a Vulnerable Aging Population - CSH](#)
- [AARP HomeFit Guide](#)
- [Health System Investments in Housing: A Development Guide](#)
- [Centering Equity in Health and Housing Partnerships in Times of Crisis and Beyond](#)
- [Policy Brief: Summary of State Actions on Medicaid & Housing Services – CSH](#)
- [HOME-ARP and Supportive Housing: A Great Pairing - CSH](#)

# Q&A



## **DISCUSSION:**

**What do you hope to get out of this learning collaborative?  
What resources would be most helpful to you?  
Anything else you'd like us to know?**



**THANK YOU**