TODAY’S AGENDA

Welcome
Presentation by Annalyse Komoroske Denio of LeadingAge New York
Q & A
5-minute break
Group Discussion: What role should public health play in housing?
Breakout Sessions
Next steps & Conclusion
WELCOME TO THE HOUSING, HEALTH, AND LONGEVITY LEARNING COLLABORATIVE

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

This map shows the health departments across NYS that registered for the Learning Collaborative.
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.
NYS Health, Housing, and Longevity Learning Collaborative

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Innovative Senior Housing Models for Health & Longevity

May 18, 2022

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Founded in 1961

Representing the entire continuum of not-for-profit, mission-driven and public continuing care providers

Representing more than 400 members, including:

- Multifamily Senior Housing
- Nursing Homes
- Adult Care Facilities/Assisted Living (ACF/AL)
- Home and Community Based Services (HCBS)
- Continuing Care Retirement Communities (CCRC)
- Managed Long-Term Care and PACE Plans (MLTC/PACE)
- Adult Day Health Care (ADHC)

Our Vision: LeadingAge New York is the driving force in transforming aging and continuing care services in the State of New York.
Innovative Senior Housing Models For Health & Longevity

- NORCs/NNORCs
- Home Sharing
- The Village Movement
- Other Integrated Community Models
- Multigenerational Living
- Service Coordination & SHASAM
Naturally Occurring Retirement Communities (NORCs)

- **NORC**: An apartment building or complex that wasn’t originally designed for seniors but has a large percentage of residents over the age of 60.

- **Neighborhood NORC (NNORC)**: An identifiable neighborhood or geographic area not originally designed for seniors but with a large percentage of residents over the age of 60.

- Services primarily funded by NYSOFA.
NORC Spotlight:

Co-Op City, Bronx

Services provided by JASA

- **Co-Op City** in the Bronx consists of 15,372 units and an estimated 50,000 residents.
- At least 40% of units are occupied by someone aged 60 or older.
- JASA is able to offer several on-site quality-of-life programs to senior residents, including:
  - Educational and recreational activities
  - Supportive counseling
  - Assistance with securing benefits and entitlements
  - Health-related services
  - Transportation
NNORC Spotlight:  

Albany NNORC, Albany  
Services provided by Jewish Family Services of NENY

- Jewish Family Services of NENY provides services to residents in certain neighborhoods of Albany, in collaboration with nearly 20 community partners.

- The program not only “helps seniors but contributes to the diversity and stability of their neighborhoods.”
NNORC Spotlight:

**Senior Options for Independence, Fairport**

Services provided by Fairport Baptist Homes

- Established in 2006, this NNORC allows Fairport Baptist Homes to provide in-home assessments, safety checks, and access to a variety of other services to the senior and disabled residents of Fairport/Perinton.
Home Sharing Spotlight:  

NYFSC Home Sharing Program, NYC

- The New York Foundation for Senior Citizens’ free Home Sharing Program helps link adult “hosts” with extra private space in their home with appropriate adult “guests” to share their space.

- Generally, one of the housemates must be aged 60 or older.

- Both hosts and guests benefit from reduced housing costs and the possibility of companionship.
The Village Movement creates a cooperative-type service exchange and social network of like-minded seniors in existing communities.

Members may provide volunteer service to or receive assistance from their peers, including:

- Transportation
- Light home maintenance
- Technology coaching
- Sharing service referrals
- Coordinating new and existing community programming
Village Spotlight:

Gramatan Village, Bronxville

- Gramatan Village offers a network of programming, services, and social connection with the guidance of experienced staff.
- Individuals can participate at various levels of membership based on their preferences.
Other Integrated Community Models

- **At Camphill Village, Copake**, adults with special needs and long- and short-term service volunteers live and work together in homes throughout the Village.
  - Depending on preference and abilities, residents may help with household cleaning or meal preparation, or they may work in the gardens, the bakery, or a craft studio.

- **Fellowship Community, Chestnut Ridge** houses approximately 140 elder members, co-workers, and their children on its property which includes a farm, woods, orchards, and a medical center.
  - The Fellowship aims to help seniors find purpose and meaning later in life by engaging in their community.
Multigenerational Living Spotlight:  

Sällbo, Sweden

- Sällbo contains 51 apartments, with more than half of the residents being seniors and the remaining residents between the ages of 18-25.
- Spending two hours per week with your neighbors is part of the rental agreement.
- Communal rooms are multi-purpose and include sign-up sheets for activities like cooking, gardening, and movie nights.
The Selfhelp Active Services for Aging Model (SHASAM) connects seniors in Selfhelp’s affordable housing properties with an array of community services. Services are not mandatory for residents, who can choose if and when to participate. The model addresses the five social determinants of health that Selfhelp has identified as most important for older adults:

- Economic stability
- Neighborhood and physical environment
- Food
- Community & Social Context
- Connection to health care
SHASAM: Proven Results

- 3 years
- 7 buildings
- 954 units
- 1,280 residents between the ages of 62 and 105...

  - $3,937 Medicaid savings per person, per hospitalization
  - 68% less likely to be hospitalized
  - 53% less likely to visit the emergency room

Plus...

- Only 2% of Selfhelp SHASAM building residents are transferred to a nursing home per year.
SFY 2023 Capital Budget Highlights

$300M TO CONSTRUCT HOUSING TARGETED TO LOW-INCOME SENIORS

$150M TO REHABILITATE OR REPLACE PUBLIC HOUSING OUTSIDE OF NYC

$100M FOR NFPS TO REPURPOSE UNDERUTILIZED HOTEL AND OFFICE SPACE STATEWIDE FOR AFFORDABLE AND SUPPORTIVE HOUSING PURPOSES

$85M TO HELP LOW-AND MODERATE-INCOME HOMEOWNERS SECURE FINANCING TO CREATE ADUS

Plus...

- Nearly $1.5B to expand broadband infrastructure and access across the State
Questions?

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Q&A
BREAK (5 MIN)
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HOUSING STRATEGIES INCLUDED IN STATE PLANS ON AGING AND MASTER PLANS ON AGING

Common themes across the state aging plans include:

• Improving individuals’ ability to age in place, such as through in-home supports and wraparound services (CA, FL, IL, MD, MA, MN)

• Expanding resources for local Area Agencies on Aging (AAAs) (CA, FL)

• Reducing homelessness risk for older adults (CA, FL, IL, MN)

• Expanding innovative pilot/demonstration projects (CA, PA)
### State Plans on Aging Scanning

#### Improving individuals’ ability to age in place, such as through in-home supports and wraparound services (CA, FL, IL, MD, MA, MN)
- Educate builders on universal design (FL, MN)
- Support person-centered counseling services for individuals who want to remain in the community or transition from nursing homes (MD)
- Update design standards for state-funded senior housing (MA)

#### Expanding resources for local Area Agencies on Aging (AAAs) (CA, FL)
- Scoping options for AAA and county government technology and data interoperability (CA)
- Increase resources allocated to AAAs (FL)

#### Reducing homelessness risk among older adults (CA, FL, IL, MN)
- Outreach and education on housing rights and prosecuting violations of housing discrimination laws (CA, FL)
- Funding hotel conversations, purchase of multifamily housing buildings, and modular constructions (CA)
- Supporting a housing locator system and hiring housing coordinators (IL)
- Training homeless service providers on issues specific to older adults, like cognitive decline (MN)

#### Expanding innovative pilot projects (CA, PA)
- CA Adult Family Homes Model: Allows up to two adults to reside with a family, with the family receiving a stipend and support from a local Family Home Agency for caregiving.
- PA Shared Housing and Resource Exchange (SHARE): Funded by Money Follows the Person, similar to CA model. Home-seekers receive a bedroom and use of common areas; homeowner receives help around the house, rent, or a combination of both.
- PA Elder Cottage Housing Opportunity: Elder cottages are small, separate, manufactured residences for older adults that are temporarily places in the side or back of a host family (typically relatives or close friends).
HOUSING STRATEGIES INCLUDED IN STATE HEALTH IMPROVEMENT PLANS (SHIPS) AND STATE STRATEGIC PLANS

This scan focused on states who address housing affordability or stability (rather than only environmental health hazards). Common themes among state health plans include:

• Expanding access to affordable housing (AK, CT, FL, NC, OH, OR)
• Reducing experience and risk of homelessness (AK, CT, NC)
• Improving cross-sector partnerships to support housing stability (CT, LA, NC, OR, VT)
• Improving housing standards and rehabilitating substandard housing (CT, IA, OH, SC, VT)
### SHIP and Strategic Plan Scanning

**Access to affordable housing** *(AK, CT, FL, NC, OH, OR)*
- Increase number of households assisted by rental assistance vouchers.
- Create common intake application in multiple languages to access SNAP, WIC, and housing assistance programs.
- Establishing an Office of Housing and Homelessness within the Department of Health and Human Services.
- Support programs designed to increase home ownership among people of color.
- Expand affordable housing programs, including the Housing Choice Voucher program.

**Reducing experience and risk of homelessness** *(AK, CT, NC)*
- Expand Homeless Management Information System to all homeless programs.
- Increase funding and support services in areas of the state with higher rates of homelessness.
- Reduce barriers that keep formerly incarcerated persons from obtaining housing (e.g., education of rights).
- Partner with local housing authorities to offer housing navigation assistance and case management.

**Developing cross-sector partnerships** *(CT, LA, NC, OR, VT)*
- Collaborate with economic and community development partners (e.g., business incentives).
- Launch a regional pilot program with Medicaid to address beneficiaries’ non-medical drivers of health.
- Use healthcare payment reform levers to encourage flexibility in using healthcare resources to support access to housing.

**Improving housing standards and rehabilitating substandard housing** *(CT, IA, OH, SC, VT)*
- Invest Community Development Block Grant funds into rehabilitation activities.
- Expand loan and grant programs that support housing weatherization.
DISCUSSION
What role should public health play in housing?
Why should public health be part of the housing conversation?

- Whole-person
- Comprehensive
- Injury prevention
- Improving housing stability
- Safety, prevention, protective
- Indoor Air Quality (IAQ), Safety, Healthy
- Pandemics, lowered medical cost, early intervention
- Smoking cessation

- Housing impacts health
- Population
- Prevention, collaboration
- Hard to change behavior
- Livable community

- Some landlords need more oversight
- Social determinant
- Chronic disease management
- Role of public health in housing: inform with data about importance of stable housing - this may force more funding to follow
- Stability, preventive abilities, cooperation.
- Safe, affordable housing helps keep people in their social network
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/spring-2022-housing-lc/
THANK YOU