

New York City Department for the Aging

Annual Plan Summary

(Annual Statement of DFTA Programs and NYC Aging Population)

Covering

April 1, 2023 – March 31, 2024

for

The Older Americans Act (OAA)

The New York State Community Services for the Elderly (CSE) Program

The Expanded In-Home Services for the Elderly Program (EISEP)

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Lorraine Cortés-Vázquez, Commissioner

New York City Department for the Aging

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New York, New York 10007

www.nyc.gov/aging



2022 Public Hearings

The New York City Department for the Aging (DFTA) has published the 2023-2024 **Annual Plan Summary** on the DFTA website: www.nyc.gov/aging.

This Plan provides a valuable opportunity for the Department to share its goals, objectives, and program planning with the aging network.

DFTA encourages consumers, community partners, advocates, and other interested parties to attend a public hearing and comment on the Plan or give testimony on other issues that impact New York City's older adults. **To register, email:**

testimony@aging.nyc.gov

If you are unable to attend one of the hearings, please feel free to submit written testimony or comments via email (above) or mail to:

**NYC Department for the Aging
c/o Charise Lawrence
2 Lafayette Street, 4th Floor
New York, New York 10007**

All comments must be received by
[November 4, 2022](#)

We look forward to learning from you as you share your insights and ideas.

Queens

Date: October 17, 2022

Time: 10:00am – 12:00pm

Place: Sunnyside Community Services

Address: 43-31 39th Street

Sunnyside, NY 11104

Brooklyn

Date: October 18, 2022

Time: 10:00am – 12:00pm

Place: Albany Neighborhood Older Adult Center

Address: 196 Albany Avenue

Brooklyn, NY 11213

Staten Island

Date: October 19, 2022

Time: 10:00am – 12:00pm

Place: Joan & Alan Bernikow JCC of Staten Island

Address: 1466 Manor Road

Staten Island, NY 10314

Bronx

Date: October 21, 2022

Time: 10:00am – 12:00pm

Place: Casa Boricua Older Adult Center

Address: 910 East 172nd Street

Bronx, NY 10460

Manhattan

Date: October 24, 2022

Time: 10:00am – 12:00pm

Place: Leonard Covello Innovative Older Adult Center

Address: 312 East 109th Street

New York, NY 10029

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Introduction

New York City Department for the Aging

The New York City Department for the Aging (DFTA or the Department) is the lead Mayoral agency addressing public policy and service issues for the aging. It is also the largest agency in the federal network of Area Agencies on Aging (AAA) in the United States. The Department promotes, administers, and coordinates the development and provision of vital community services that help older New Yorkers aged 60+ within the five boroughs of New York City stay healthy and independent, and serves as an advocate on legislative and policy issues.

DFTA's mission is to work to eliminate ageism and ensure the dignity and quality of life of New York City's diverse older adults, and for the support of their caregivers through service, advocacy, and education.

DFTA continues its long history of collaborative partnerships with community-based organizations for the provision of programs and services, which aim to foster independence, safety, wellness, community participation and quality-of-life.

Purpose and Scope of the Annual Plan Summary (APS)

The Older Americans Act (OAA), Section 306(a)(6)(D), requires AAAs to develop an Area Plan that describes its activities for the upcoming four years. New York State also requires AAAs to submit an Annual Implementation Plan (AIP) to the New York State Office for the Aging (NYSOFA) on programs funded through federal and state resources, including the New York State Community Services for the Elderly Program (CSE) and the Expanded In-Home Services for the Elderly Program (EISEP).

The Annual Plan Summary (APS) is a synopsis of the AIP and presents DFTA's strategic goals, programming, budget, and service levels. This Plan represents the fourth year of a four-year plan covering the period April 1, 2020, to March 31, 2024.

The OAA requires the provision of various services for older adults, including access to nutrition, benefits counseling, employment opportunities, legal assistance, and in-home services. The CSE Program and EISEP require the provision of community-based services for the frail elderly. The Department works with its Senior Advisory

Council, Interagency Councils on Aging, consumers, advocacy, and provider groups, elected officials, and community boards to identify and address local needs. The allocation of Department resources is determined by legislative mandates and directives, the availability of funding, the results of demographic analyses, assessment of unmet needs, recommendations from local communities, and the availability of services through alternate sources.

Community Dialogue and Feedback

DFTA engages in ongoing dialogue with various community partners and in various forums:

- **DFTA’s Senior Advisory Council** is mandated by the OAA, Section 306(a)(6)(D), New York State, and the New York City Charter to advise DFTA and its Commissioner on matters related to the development, administration, and operations of its area plan. The Council includes representatives from the social services, health, and academic communities, as well as from among aging services consumers. The members all serve without compensation and are appointed by the Mayor for three-year terms.
- **Annual Plan Summary Public Hearings.** Public hearings provide an opportunity for older persons, service providers and advocates to identify priority needs, recommend ways to enhance services, and suggest an agenda for legislative advocacy to DFTA and its Senior Advisory Council. The Department for the Aging usually conducts public hearings annually to obtain recommendations and comments on its Annual Plan Summary. This input helps DFTA prepare its plan for upcoming fiscal years and enhance its long-term efforts on behalf of the City's elderly.
- **Public Forums and Stakeholder Sessions.** Public forums, including the Annual Plan Summary hearings and Borough Budget Consultations, encourage service providers, community leaders and the public to share their views and recommendations on aging services. Stakeholder sessions include forums to offer input into the design of solicitations and programs, as well as discussions with providers, elected officials, Interagency Councils, community boards, Borough President cabinets and older New Yorkers.

Statistical Overview of Older New Yorkers

New York City's rapidly growing older adult population of over 1.7 million is **ethnically, culturally, and economically diverse**, with a wide range of service needs. Needs assessment is the first step to ensuring that the City's older adults have access to appropriate and effective services. The Department identifies these needs through ongoing consultation with consumers, providers, advocates, and elected officials, an examination of the potential impact of policy and legislative changes on New Yorkers, and an analysis of changing demographic patterns.

The results of the 2000 and 2010 Censuses, the 2019 American Community Survey (ACS), and population projections through 2040 provide a foundation to determine the current and future needs of New York City's elderly.

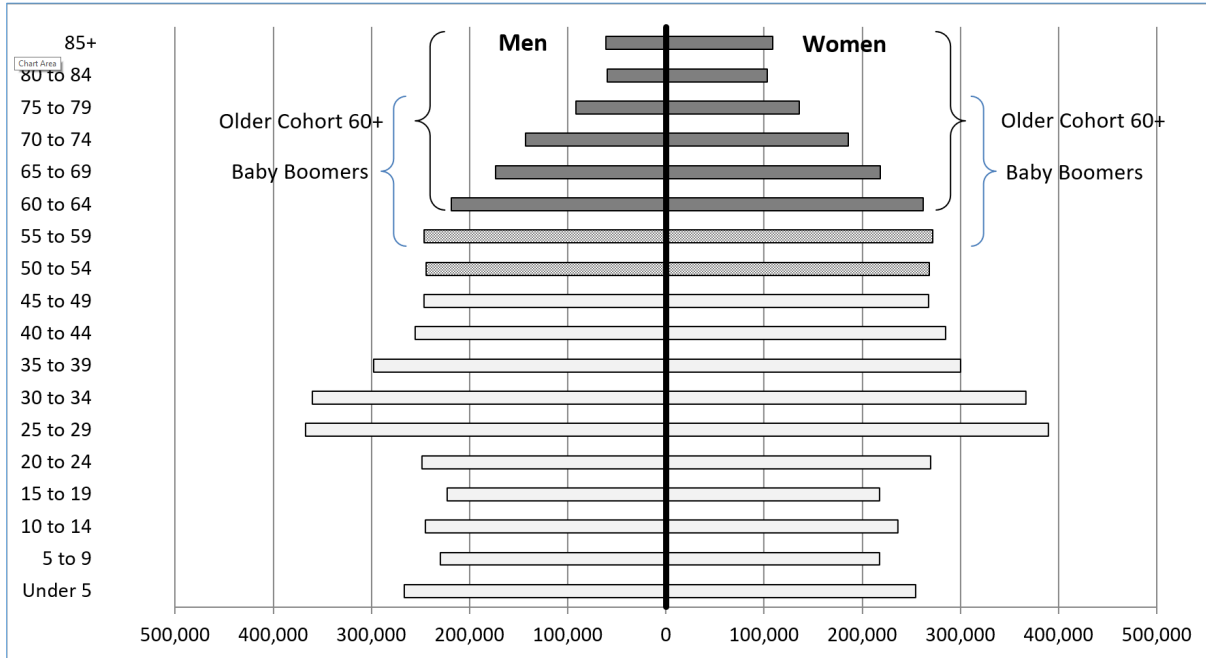
Demographics of the Aging Population: 2000-2040

The Age and Gender Pyramid that follows shows an overall profile of New York City's 2019 population. The area shaded in dark gray reflects the **population aged 60+**, which **comprises 1.76 million adults, or 20.6% of the City's population**. The light gray bars represent those aged 50 to 59, who comprise 1,031,444 people, or 12.4% of the population¹.

By 2040, New York's 60+ population is projected to increase to 1.86 million, a 48.5% increase from 2000. The 2040 number will thus remain at 20.6% of the total population, about one-third above the 15.6% figure in 2000.² The absolute number of residents aged 60+ will increase into mid-century as part of the overall projected increase in the New York City population.

The 1.76 million figure for the current older population is based on a sample survey. Results from these surveys can vary upward or (on rare occasions) downward each year based on the sampling methodology. Nevertheless, the underlying trend of ongoing growth in the older population has held firm in nearly all of the annual projections in recent years.

Age and Gender Pyramid for New York City (2019)³

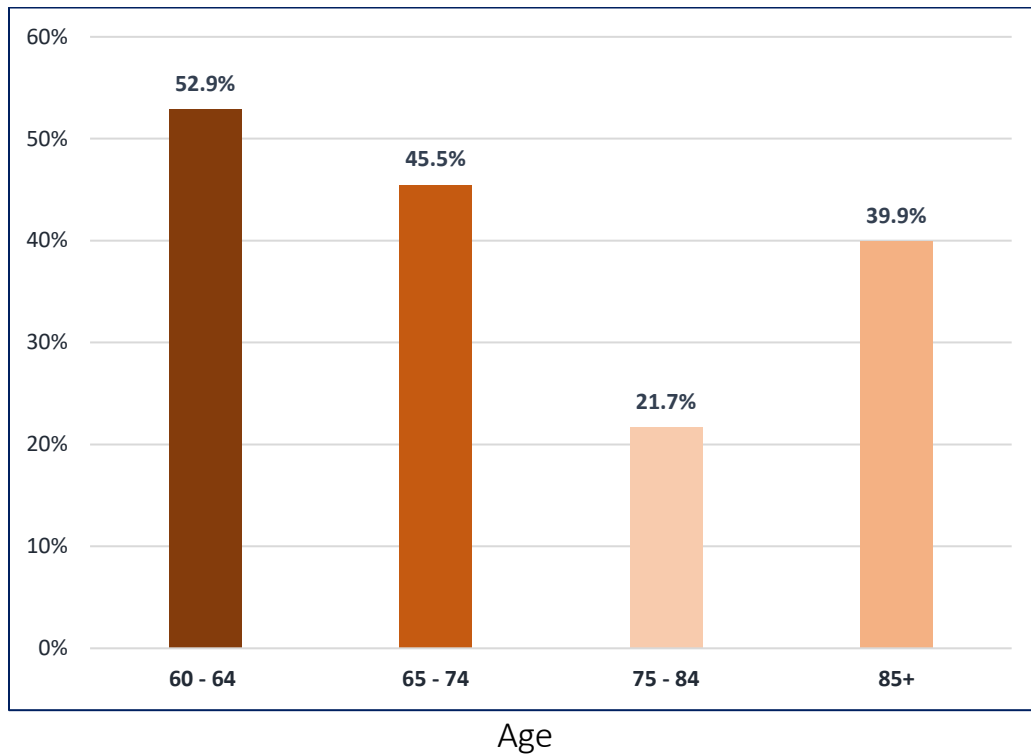


**Note: Each bar represents an age span of five years.*

Aging Within the Older Population

The City’s total older population, which increased from 1.25 million in 2000 to 1.76 million in 2019, has significantly changed in age composition. During this period, the number of residents 60-64 years and older increased dramatically, by 52.9%. The number of people aged 65-74, and the eldest group (85 and older) also grew quickly, by 45.5% and 39.9% respectively. Those between ages 75 and 84 increased moderately, at 21.7%. By 2040, boomers will be part of the oldest population group, and the growth of this 85+ group will be 71.7% between 2000 and 2040.⁴

Percentage Change of Selected Age Groups, New York City (2000-2019)⁵



Increase in Life Expectancy

New York City's life expectancy at birth remains at an all-time high of 81.3 years, an increase of 3.7 years from 2000 to 2018⁶. However, life expectancy gains are not shared uniformly across gender or race. Women continue to experience longer life expectancies at birth compared to men. In 2019, New York City women had a life expectancy of 83.6 years, while men had an average life expectancy of 78.6 years⁷. Additionally, the 2010 U.S. Census shows the Hispanic population in New York City to have had an average life expectancy at birth of 82.4 years, the White population of 81.3 years, and the Black population of 77.2 years.⁸ Life expectancy data for Asians were not available in the 2010 US Census.

As of 2019, women continue to outnumber men by 265,724 within the 60+ age group. Among those 85 and older, the number of women is almost double that of men.⁹ By 2040, the sex ratio (number of males per 100 females) for New Yorkers is projected at 80 for those 55-64, 75 for those 65-74, 67 for those 75-84, and 52 for those 85 and older.¹⁰ Thus, as is the case currently, women 85+ in 2040 will

outnumber men their age by roughly 2 to 1. This greater longevity results in more women living alone during their later years, which has various implications related to income, social isolation, and other concerns.

Increase in Diversity

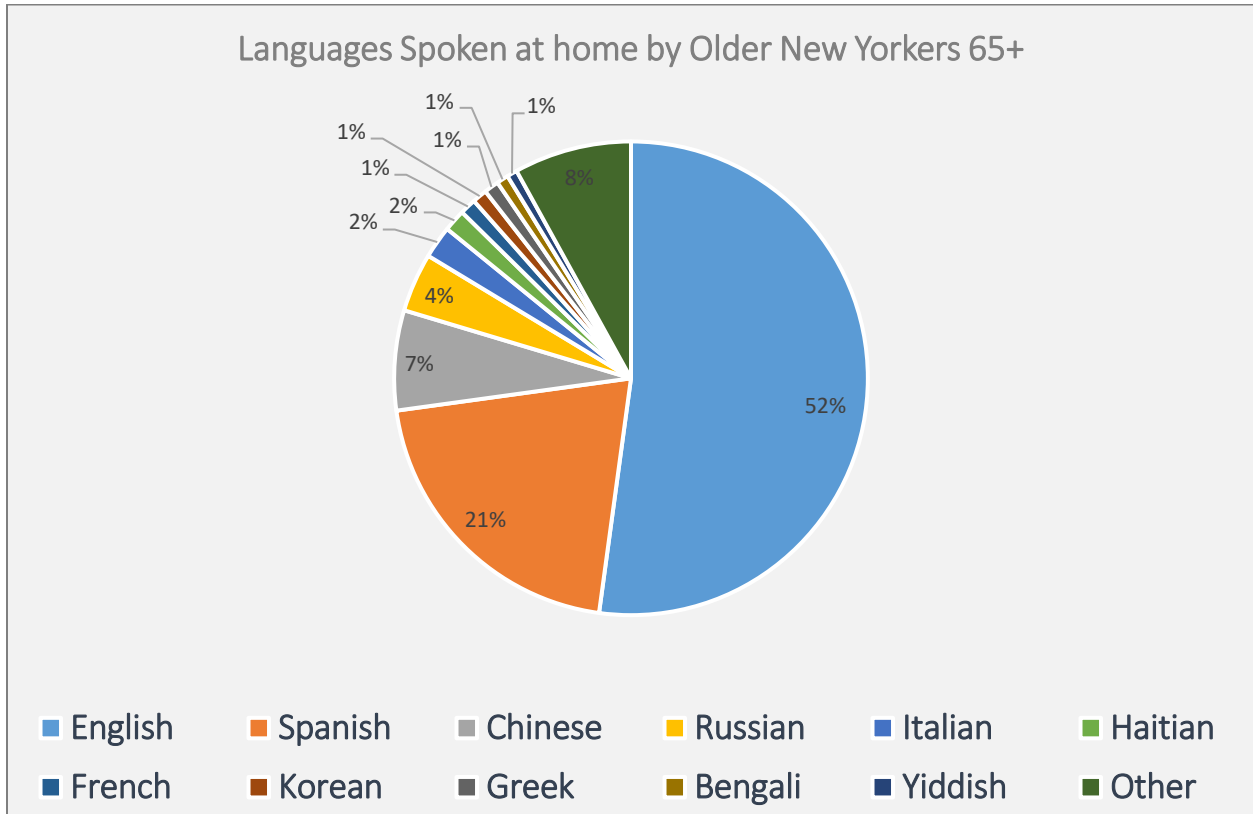
From 2000 to 2019, the non-Hispanic White older population continued to decrease, whereas the number of other ethnic and/or racial populations grew rapidly. In 2019, 59% of New Yorkers 65 and older belonged to ethnic and/or racial groups other than Caucasian, compared to 43% in 2000 and 35% in 1990. Between 2000 and 2019, the Black population increased by 65%, the Hispanic population by 105%, and the Asian/Pacific Islander population by 195%.¹¹

Table A: Race/Ethnic Composition 65+ Population in New York City, 2000-2019¹²

Race/Ethnic Profile	2000 Census	2019 ACS	% Change 2000-2019
White (Non-Hispanic)	533,982	522,727	-2.1%
Black	185,088	304,924	64.8%
Hispanic	138,840	284,425	104.9%
Asian/Pacific Islanders	59,056	174,242	195.1%
All Minorities	382,984	763,591	99.4%

Close to half of older New Yorkers speak a language other than English at home. Linguistic and cultural differences, coupled with the challenges of aging and disability, can limit older adults' access to services and have a significant impact on health outcomes. The table below shows that 20 percent of those aged 65+ speak Spanish at home, followed by Chinese (6.8%), and Russian (4%).

Table B: Languages Spoken at Home Amongst the 65+ Population in New York City, 2019 ¹³



Income and Poverty

The percentage of older New Yorkers below the Federal Poverty Level is nearly twice that of Americans in general. Whereas the United States has experienced a decline in the national poverty rate for older people, from 12.8% in 1990 to 9.9% in 2000 and then remaining relatively stable through 2019, New York City’s older adults experienced an increase in poverty from 16.5% to 17.9% for the same period.¹⁴ The 2019 Federal Poverty Level was \$12,261 for a one-person household and \$15,468 for older two-person households.¹⁵

Table C: Poverty by Race/Ethnicity for Older New Yorkers Aged 65 and Above, 2019¹⁶

Race	Total Older Cohort*	Number Below Poverty Level	% Below Poverty Level
White	509,036	63,389	12.5%
Black	292,466	56,256	19.2%
Hispanic	275,450	75,739	27.5%
Asian	170,835	39,805	23.3%

Note: Totals do not match Table A as poverty information was not available for all persons.

A substantially higher proportion of racial/ethnic groups other than the White population live in poverty – 28% of Hispanics, 23% of Asians, and 19% of Blacks. In addition, the number of older women living below the poverty level (21%) is approximately five percentage points higher than that of their male counterparts (15%), which translates to 40% higher poverty among older women relative to the population of older men.¹⁷

In 2019, the median household income for older New Yorkers was \$41,054, lower than the nation’s median of \$48,893.¹⁸ Median income also varies significantly by race. In 2019, the approximate median income of:

- Hispanic households was ~\$22,500, 59% less than that of the White population, whose median household income was ~\$55,000;
- Black households was ~\$37,500 or 32% less than for the White population; and
- Asian households was ~\$32,500, 41% less than in the White population.¹⁹

Functional Capacity and Mobility

As they age, some older adults lose independence due to decreased mobility and cognitive functions and other disabilities. In 2019, 429,411 older people (65+), or 35% of the total non-institutionalized population, reported some level of disability. Of this group:

- 26% had physical disabilities that affected walking, climbing stairs, reaching, lifting, or carrying;
- 18% had conditions that restricted their ability to go outside the home, shop, or visit the doctor;
- 10% had mental, cognitive, or emotional conditions causing difficulties in learning, remembering, or concentrating;
- 11% were limited in their ability to perform self-care activities, such as dressing, bathing, or getting around inside the home;
- 9% reported hearing disabilities; and
- 6% reported vision disabilities.²⁰

Disability rates for older New Yorkers were roughly equal to national rates (34.6% vs. 33.5% respectively). Over one-third (39%) of older women have some disability. In contrast, just under one-third (32%) of older men are disabled. However, as a result of that contrast and the larger population of older women as compared to men, women make up almost two-thirds (63%) of all disabled older adults. When examining these rates by ethnicity, older Hispanic men (35%), and especially women (49%), have higher disability rates compared with their non-Hispanic counterparts. Disability is also associated with poverty: a higher proportion of older people with disabilities were in poverty (24%) than those without (15%).²¹

Social Isolation

Social isolation is prevalent amongst older people, and evidence indicates that it can have a detrimental effect on their health and well-being, e.g., declines in physical, mental, and cognitive health. Research indicates that living alone is one of the main risk factors for social isolation. In 2019, 31% of persons age 65 and over in New York City were living alone, increasing to 38% for those aged 85 and over.²² Compounding this, the poverty rate among those 65 and over living alone (33%) was dramatically higher than among those not living alone (11%).²³ Social isolation is a complex concern for older adults, and it is important to note that living alone is not the only factor that may contribute to vulnerability for certain older individuals. Other factors include limited income, disability, inadequate access to primary care, and the population density of older people, which measures the number of persons 65 and older in an area.²⁴

Employment

In 2019, more than one out of every five workers (23%) in the American labor force were 55 or older²⁵, and projections have indicated that this age group will account for a quarter of the labor force in 2022²⁶. The aging of the baby boomer generation, coupled with other factors such as the changing make-up of the job/labor markets and of US economic structural conditions overall, will likely result in ongoing increases in the proportion of the labor market consisting of older people.

DFTA Services

The Department supports a broad range of services, both directly and through over 400 direct service contracts. In Fiscal 2022 DFTA commenced new contracts based on a request for proposals (RFP) released for Older Adult Centers (OACs) and Naturally Occurring Retirement Communities (NORCs). A centerpiece of this RFP was the establishment of new OACs and NORCs in 31 community districts, while continuing to serve all 59 community districts. Many of the new OACs and NORCs are in neighborhoods identified by the City as needing an infusion of resources to promote greater equity for low income, ethnically diverse, immigrant and other groups with particularly great needs. For Fiscal 2023 DFTA is executing additional RFPs for other program areas based on the same principles of equity and community-based support of older people.

The next two sections highlight the programs, initiatives, and services through which the Department responds to the current and emerging needs of the elderly. They outline the services provided through the four areas in the **Division of Programs**, as well as through **Other Programs and Initiatives**.

Division of Programs



THE BUREAU OF COMMUNITY SERVICES (BCS)

The **Bureau of Community Services (BCS)** provides various community-based programs and services that help older adults remain active in their communities. BCS comprises the following units and programs:

- **Older Adult Centers (OAC).** DFTA currently funds 308 older adult centers (formerly known as senior centers) throughout the five boroughs, and there are additional sites affiliated with those centers. They provide congregate meals and an environment where older adults can participate in a variety of recreational, health promotional and cultural activities, as well as receive information and assistance with benefits and entitlement programs. Prior to the COVID-19 pandemic, close to 30,000 individuals attended DFTA’s older adult centers and affiliated sites daily. Starting March 21, 2022, DFTA followed City guidance and reopened the centers across the city to in-person congregate activities at full capacity. The OACs offer hybrid services, a combination of congregate meals and Grab and Go meal services. In addition, contracted providers provide in-person and virtual programs, and continue telephone contacts with older New Yorkers.
- **Home Delivered Meals.** The Home Delivered Meals (HDM) program provides meals each weekday to hungry and homebound older adults, and its partnership with Citymeals on Wheels supports weekend, holiday, and emergency meals for these recipients. All home delivered meals meet prescribed dietary guidelines. DFTA funds 24 HDM programs.
- **Healthy Aging Initiatives** include the **Health Promotion Services Unit**, and healthy aging-related, grant-funded projects. The **Health Promotion Services Unit** coordinates evidence-based programs throughout the older adult center and NORC networks to promote Chronic Disease Management and Prevention, Falls Prevention, Exercise, and Social and Mental Health and well-being. Its network of older adult volunteers conducts health education programs and activities for older New Yorkers, including Stay Well exercise classes and Keep on Track Blood Pressure Monitoring.

- The **BCS Nutrition Unit** includes dietitians and nutritionists who serve as experts for the Department’s community partners and for seniors living in the community who attend congregate meal programs or receive home delivered meals. They ensure that older adults receive nutritious meals that meet all city, state, and federal guidelines. They also provide extensive technical assistance on meal planning, recipe development, food safety, and City Agency Food Standards. The nutrition unit will oversee the execution of a new ACL Grant – the Virtual Smart Living Initiative. The Virtual Smart Living Initiative is a three-year project that will take a holistic approach to address the nutritional, social, and mental health needs of older New Yorkers.
- The **NORC and Senior Housing Initiatives Unit**. Senior Housing staff provides information on and referrals for low-income housing for older adults, as well as assistance on other housing-related issues. The Unit also oversees the Naturally Occurring Retirement Community Supportive Service Programs (NORC SSPs), which provide case management, assistance with entitlements and benefits, assistance with health care management, wellness activities, and other social and educational programs. There are currently 36 NORC SSP contracts funded by DFTA.
- **Transportation Services**. The Department provides transportation for older adults through contracted non-profit organizations. These providers transport older New Yorkers who have no access to, or cannot use public transportation, to older adult centers and essential medical, social service and recreational appointments. The program serves all five boroughs through eight transportation programs.

THE BUREAU OF SOCIAL SERVICES (BSS)

The **Bureau of Social Services (BSS)** provides various programs and services that help older adults remain active in their homes. BSS oversees the following:

- **Caregiver Services**. DFTA contracts with 12 caregiver organizations. Nine of the contracts are geographically based, while three are citywide programs focused primarily but not exclusively on three populations: the

LGBTQ community, the blind and visually disabled, and Asian populations. These organizations support caregivers by providing information on long term care topics and resources; assisting with accessing benefits and entitlements; offering individual counseling, support groups and care-related training; linking caregivers with in-home, congregate, and overnight respite care; and offering supplemental support services. Results from the caregiver strain index assessment tool indicate that the caregiver programs help to lower caregiver stress. The contracted caregiver program developed virtual programming in response to the Pandemic and have continued to offer those services to caregivers.

- **Case Management.** Case management services help older persons with functional impairments gain access to appropriate services, benefits and entitlements needed to age safely at home and maintain their quality of life. Case Management is the gatekeeper for DFTA funded in-home services such as home delivered meals, home care, friendly visiting, and the Bill Payer program. DFTA funds 21 case management programs.
- **Home Care.** The Home Care program is designed for low-income older adults 60 years of age and older who have unmet needs in activities of daily living and do not qualify for Medicaid or other ongoing insurance-funded home care. The goal of this program is to maintain older adults safely at home and prevent or delay the placement of frail elderly individuals into more expensive Medicaid-funded nursing homes. There are currently five home care programs. An RFP was released in Fiscal Year 2022.
- **Friendly Visiting.** The Friendly Visiting program matches homebound older adults with dedicated volunteers who commit to making weekly home visits to the older adults in their own homes. Friendly visiting helps reduce loneliness and feelings of isolation and supports older adults in maintaining community connections and re-engaging in social activities. DFTA oversees 15 Friendly Visiting programs. The success of this program has led DFTA to create a new program to combat social isolation among older adults called Friendly VOICES (see below).

- **Friendly VOICES.** The Friendly VOICES program works to limit social isolation among active older adults by providing them with friendship and social engagement through phone or virtual one-on-one relationships and small groups.
- **Home Sharing.** The Home Sharing Program was established over three decades ago by the New York Foundation for Senior Citizens with State and private funding. Home Sharing became a program of the City over a decade after its inception when it became clear the service was a useful, safe way to help older adults find roommates, where this arrangement engenders various financial, social, and other benefits. The Home Sharing program involves contracted staff using a combination of matchmaking software for compatibility and social work staff oversight, matching older adults with roommates to reduce the older adult's risk of social isolation while creating affordable housing opportunities for both hosts (person with space in their home for a guest) and guests (person needing a place to live). At least one of the matched pair must be an older adult. The Home Sharing Program will be transferred to DFTA's Office of Elder Justice in Fiscal Year 2023.
- **Social Adult Day Services.** Social Adult Day is a supervised program for cognitively impaired and/or physically frail older adults, with program components designed to reduce isolation and maximize individual capabilities through socialization, structured activities, and nutritious meals. These services, combined with transportation and access to case managers, provide respite to caregivers of these participants. DFTA oversees nine discretionary Social Adult Day Service programs. The programs offered virtual programming throughout the pandemic and have since return to in person services.
- **Mental Health Initiatives.** DFTA oversees three contracted mental health programs and five grant funded programs. The **Geriatric Mental Health Program (DGMH)** embeds mental health clinicians in community based older adult centers. Mental health clinicians provide engagement activities and programs, conduct mental health assessments, consultation to staff, and provide mental health treatment. The **Hub and**

Spoke Program is similar to DGMH in that mental health clinicians are embedded at older adult centers where the clinicians provide clinical services at the main site with the addition of providing only engagement activities/programs and assessments at older adult centers (spoke sites) within the same communities where the main clinical site is located.

PROTECT and Clinical Services – for Homebound Older Adults (PACS-HB) is an in-home, evidenced-based program for victims of elder abuse referred from DFTA funded Elder Abuse programs. PACS-HB also provides in-home clinical counseling for clients from DFTA Case Management Programs.

Tele-PROTECT, a Department of Justice funded grant that involves partnership between DFTA and Weill Cornell Institute of Geriatric Psychiatry, aims to deliver evidence-based mental health intervention to victims of elder abuse and/or elder crime utilizing virtual or telephonic PROTECT services. DFTA is a partner with four mental health programs (CAPE/Commonpoint Queens, Jamaica Hospital Medical Center, OHEL, and SPOP) who are recipients of the NYS Office of Mental Health grants, Partnership to Support Aging in Place in Communities Severely Impacted by COVID-19, to improve the mental health and substance abuse needs of older adults in communities underserved and impacted by COVID by connecting them to the DFTA aging services network.

RISE addresses the reassurance and supportive counseling needs of older adults who do not qualify for traditional clinical interventions provided through DGMH. Supportive counseling services are provided by trained and supervised volunteers and social work interns in the provision of supportive mental health counseling to older adults. Utilizing social work interns in direct service also has the added benefit of building the workforce for future professionals in the mental health field.

- **Missing Persons.** Since 2010, DFTA has worked with the NYPD's Silver Alert Notification System. Silver Alert locates individuals over 60 years of age with a diagnosed cognitive impairment and who have been reported missing and are deemed to be in imminent danger. DFTA Caregiver Support unit reaches out to caregivers of older adults reported missing.

Caregiver support services, through DFTA's contracted caregiver, support programs, is offered to these caregivers so they can receive assistance with care planning to ensure the safety of the older adult in the community.

- **Caregiving Support.** In response to constituent advocacy efforts, the City Council enacted Local Law 97, which required DFTA to work with other City agencies and non-profit entities on the implementation of a survey that identified caregiver needs. Results of the 2017 Survey of Informal Caregivers in New York City reported that the primary needs were for information and service referrals, respite services, and transportation. A successful media campaign advertising 'Caregiving Support' has resulted in over 3,400 requests for information through 311. Based on the survey results, Caregiver contracts received an increase in funding in fiscal year 2018 for respite and supplemental services, which was identified as a prime need, and programs continue to offer the services to caregivers in need.

THE BUREAU OF DIRECT SERVICES (BDS)

The **Bureau of Direct Services (BDS)** provides various services and programs that help older New Yorkers make an impact in their communities either as workers, caregivers, mentors to children, or as providers of public service. The Units that make up the Bureau of Direct Services are as follows:

- **The Foster Grandparent Program (FGP)** is federally funded by AmeriCorps and sponsored by DFTA. It is an older adult volunteer program whose primary focus is providing social and emotional support, as well as tutoring in reading and math, to children and youth with special and exceptional needs. Low-income New Yorkers are placed in a variety of community sites, such as Head Start Programs, day care centers, schools, hospitals, and family courts. Approximately 300 Foster Grandparent volunteers serve throughout the five boroughs.
- **The Grandparent Resource Center (GRC)** provides supportive caregiver services to older adults raising their grandchildren via virtual and in-

person programming. As a partner for the Mayor’s Action Plan (MAP) for Neighborhood Safety, which is planned to expand from 15 NYCHA developments to about 30 citywide in 2023, the Grandparent Resource Center collaborates with other City agencies and community leaders to address, seek, and engage the grandparents/older adult caregivers of children under 18 years old who reside within these NYCHA developments and surrounding communities. In addition, the GRC team provides intergenerational programming, food insecurity resources, and assistance with elder abuse and other older adult issues at MAP sites. The GRC was one of 260 AARP Community Challenge awardees nationally out of more than 3,200 applications, as well as one of six winners in New York State and the only recipient in New York City. The GRC was also awarded The Brookdale Foundation’s Relatives as Parents Program (RAPP) grant. Additionally, the New York State Kinship Navigator and the New York State KinCare Coalition established the Cura Awards in 2015 to annually recognize the outstanding achievements and contributions of those involved with kinship care. Kinship caregivers served by GRC have been recipients of the Outstanding Kinship Caregiver Award for the past six years and in 2022, the GRC was selected for the Outstanding Organization award.

- **The Health Insurance Information Counseling and Assistance Program (HIICAP)** helps older adults navigate the complexities of all components of Medicare. HIICAP publishes “**A Closer Look at Medicare and Related Benefits for New Yorkers**” annually. The book is translated into Spanish, Chinese, and Russian, and is available in print and online. HIICAP conducts public outreach presentations and workshops to older adults, community partners, and other groups on Medicare, Medicaid, Medigap, Elderly Pharmaceutical Insurance Coverage (EPIC), and Medicare’s preventive services. New York State certified counselors provide assistance with Medicare Part D prescription plan selection, Medicare Savings Programs, and enrollment by appointment and via telephone, among other services. In addition, HIICAP has 21 community-based sites citywide that offer 15 different languages. HIICAP also received the NYC Top Performer award from the NYSOFA State Health Insurance Assistance Program.

- The **Senior Employment Unit** operates the **Title V Senior Community Service Employment Program (SCSEP)**, which provides training and employment opportunities for adults 55 and older, including job search skills workshops, career advisement, job fairs, customized employer recruitment for specific occupations, as well as computer technology and customer service training. SCSEP participants or Community Service Aides complete community assignments in nonprofit or government agencies to gain skills and training, while earning the minimum wage for approximately 20 hours per week. In addition to community assignment placements, SCSEP provides ongoing support to the participants upon finding employment, including retention and career advancement support and non-related support through partnerships with other city agencies and the NYC Workforce1 Career Center network.
- Retired professionals 55+ may apply through SCSEP to participate in the **ReServe Program**. Candidates are matched with a specific short-term project in a New York City agency or a non-profit organization. Selected participants, called "**ReServists**," work on projects up to 15 hours a week and receive a stipend for their contribution. ReServe matches this talent with the expressed needs of the employer to help fill critical gaps, such as support for social workers, strategic planning, foundation outreach, administrative support, event planning, and Information Technology administration.
- **Silver Stars** is a new program that offers City agencies the opportunity to fill business needs with experienced retired City employees. The program also offers an opportunity for City employees to phase into retirement by allowing them to supplement their income and maintain a productive, social, and vibrant lifestyle without the demands of traditional full-time employment. Phased retirement also allows older adults to support organizational growth by sharing their knowledge and experience with newer employees.
- **Silver Corps**. Silver Corps is the latest addition to the agency's older adult workforce development portfolio. Funded by AmeriCorps Seniors as a Senior Demonstration Program, Silver Corps is a service-to-work model for older adults age 55+ with income up to 400 percent of the Federal

Poverty Level. Silver Corps participants will serve in volunteer placements with nonprofit and government agencies while also receiving upskilling, training, and credentialing covered by the program to transition to unsubsidized employment for long-term self-sufficiency.

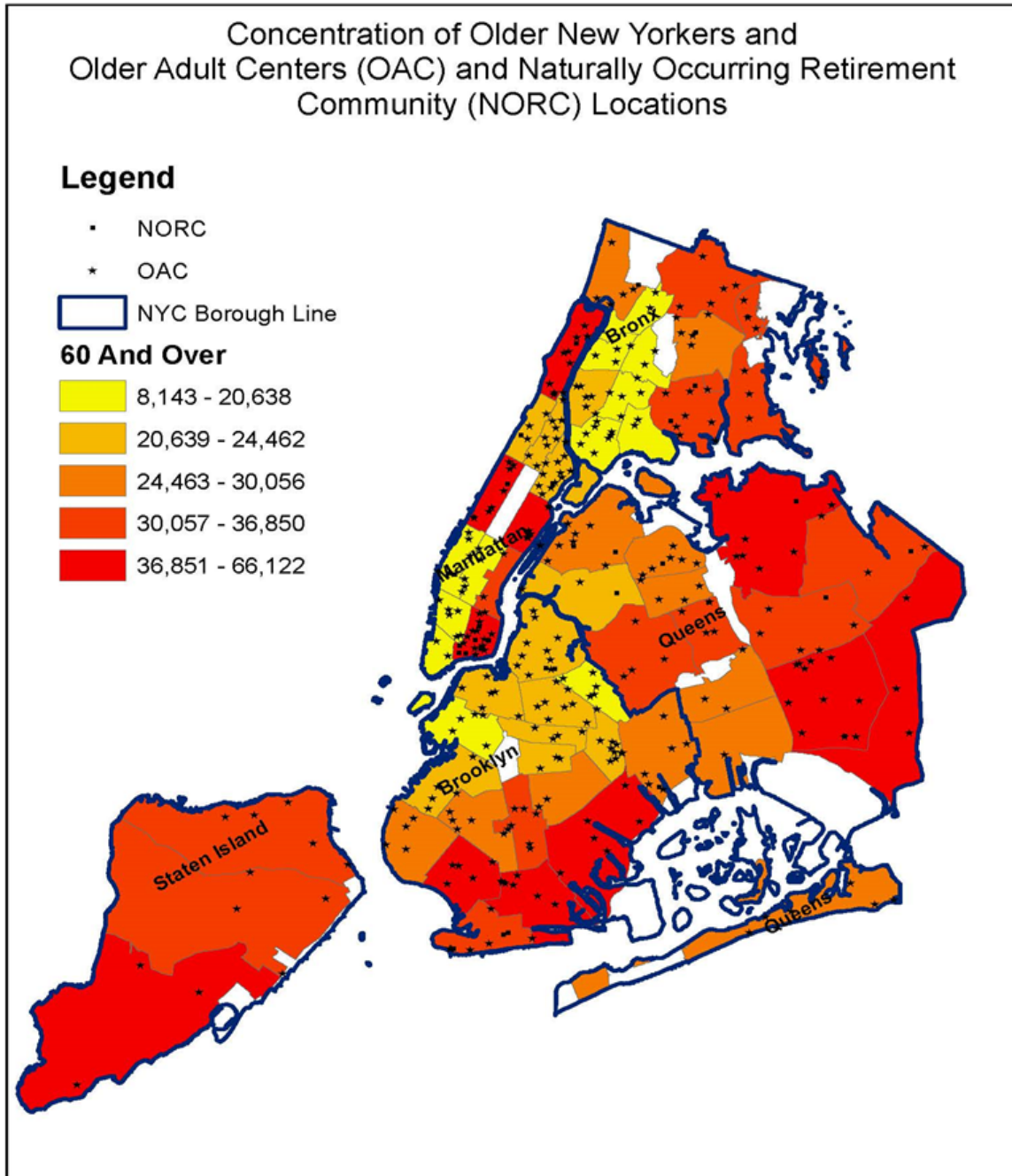
THE OFFICE OF ELDER JUSTICE

The **Office of Elder Justice** works to inform older New Yorkers about protecting themselves from crime and abuse, and helps victims of crime address their safety, emotional and financial concerns. The Office of Elder Justice is made up of the Elderly Crime Victims Resource Center, Elder Abuse Prevention and Intervention Services, the Bill Payer Program, and Multidisciplinary (MDT) teams, Home Sharing, and Tenancy and Eviction Support Services (Formerly known as Assigned Council Project).

- **Elderly Crime Victims Resource Center (ECVRC).** The Elderly Crime Victims Resource Center provides direct services to victims of crime and elder abuse and supports capacity building by providing training to groups that work with older adults on how to identify the signs of mistreatment and provide proactive intervention. The ECVRC and its community partners provide crisis intervention, counseling, advocacy, information and assistance, emergency financial assistance, and legal services referrals.
- **Elder Abuse Prevention and Intervention Services.** The program provides support to older adults who are experiencing maltreatment (physical, sexual, financial, psychological, and/or active or passive neglect) by someone who has a “trusting” relationship with the elder (a spouse, a sibling, a child, a friend, a caregiver, etc.). DFTA providers offer direct services with the objective of employing elder abuse intervention strategies to increase the client’s sense of control, and to provide a range of legal and social service options for ending abuse. In addition to direct services, providers conduct community-based presentations and trainings on elder abuse prevention and intervention to support capacity building and awareness. This year, the program expanded from five providers to eight providers citywide.

- **Multidisciplinary Teams (MDTs).** Multidisciplinary teams bring together key stakeholder in their borough(s) that work with agencies serving victims of elder abuse in an effort to coordinate and enhance service delivery in challenging cases that require multi-agency response. These teams comprise groups of professionals from diverse disciplines who come together to provide comprehensive assessment and consultation on abuse cases. MDTs provide training and outreach to professionals to assist with triage, case coordination and response.
- **The Bill Payer Program (BPP).** The Bill Payer Program focuses on bill payment for older adults and supports with financial safety, literacy, and empowerment and helps prevent fraud and exploitation. Since 2019 the BPP has sub-contracted out the work of paying household bills to a private bill payer service. The sub-contractor provides remote bill paying services for clients year-round. The Bill Payer Program continues to conduct live ongoing monthly webinar series called “Chat with the Friendly Expert”. The series invites experts in the arenas of financial literacy, economic empowerment, benefits and entitlements, and fraud and exploitation to present and give older adults and their families the opportunity to pose questions.
- **Tenancy and Eviction Support Services (TESS).** Tenancy and Eviction Support Services program provides social service, case assistance and other support services to adults 60 years and older who are at risk of being evicted from their homes. Through the provision of comprehensive direct social services, TESS strives to help older adults preserve their long-term tenancy, address their social service needs, and allow them to remain safe in the community. The program receives referrals from legal service providers via the courts. TESS is presently operating in the borough of Brooklyn and Manhattan.

Concentration of Older New Yorkers around OACs and NORCs



Other Programs and Initiatives

GOVERNMENT AFFAIRS

The **Government Affairs Unit** acts as the agency's primary liaison to elected officials, community boards, aging services providers, and advocates in order to promote DFTA's mission and priorities. The Unit prepares DFTA's city, state, and federal legislative agenda, and represents the Commissioner at public hearings, high level meetings and community events. The unit also analyzes pending legislation and keeps the agency abreast of any relevant legislative developments. The Unit continues to engage key stakeholders and residents who use DFTA services to advance agency goals of combatting ageism and promoting the dignity and inclusion of older adults in New York City. Currently, some of these include such interagency or intergovernmental initiatives as:

- Raising broad awareness about transportation-related matters and services for older adults, including changes to MTA bus routes, DOT's pedestrian safety initiatives, and DFTA's on-demand car service pilot program—*DFTA My Ride*;
- Supporting the State and Federal government's efforts with the Affordable Connectivity Program (ACP) because affordable access to the internet helps to reduce barriers to critical aging services; and
- Advancing key Community Care Plan efforts such as the expansion of Older Adult Centers and NORCs, and Case management stakeholder engagement.

PRESS AND PUBLIC INFORMATION (PPI)

The **Press and Public Information Unit (PPI)** promotes the agency's services and resources in the community through media and public outreach. The unit oversees internal and external communications. This includes managing press inquiries, DFTA's public-facing website, social media channels, the creation and distribution of marketing materials, and media campaigns. In addition, the Unit organizes the agency's press events and helps prepare senior leadership and DFTA staff for public speaking engagements and events.

In Calendar Years 2020 and 2021, the PPI team continued its promotion of DFTA's programs and services through press coverage, public facing channels and media campaigns.

This year, PPI continues its aggressive approach to garnering earned media opportunities for DFTA to highlight key priorities and initiatives. These include (1) expanding older adult employment opportunities through our newly launched Silver Stars program, which creates job opportunities for City retirees; (2) raising public awareness about financial scams, online safety, and services available through our Bill Payer Program, and (3) reminders concerning best health practices in relation to COVID-19 vaccines and boosters. Recently, the Unit also advanced DFTA's important efforts in elder abuse and tablet distribution.

Finally, the Unit will continue to encourage a safe return to normalcy following the peak of the 2020 public health crisis through a paid media campaign promoting the many in-person services, programs, and benefits available at DFTA's 300+ older adult centers across all five boroughs. This will be among a variety of forthcoming PSAs the PPI Unit will develop and launch.

AGING CONNECT

DFTA's **Aging Connect** is an information and referral contact center connecting older adults, professionals, and caregivers to age-inclusive resources, services, and opportunities. Aging Specialists assist callers in over 200 languages and are available Monday-Friday, 8:30AM – 5:30PM. To further streamline efforts, DFTA worked closely with the Mayor's Office of Correspondence and 311 to improve data and information sharing processes and continued adherence to citywide response times. Additionally, Aging Connect oversees agency correspondence, volunteer opportunities as well as the Senior Farmers Market Nutrition Program and NY Connects.

- The **Senior Farmers Market Nutrition Program (SFMNP)**: An annual fresh produce benefits program. In partnership with the New York State Department of Agriculture, during the Summer of 2022, we distributed nutritional information and 43,000 coupon booklets redeemable at farmers markets and stands across the city.
- **NY Connects**: A statewide system that provides person centered counseling; public education and outreach; and information & assistance to individuals of all ages in need of long-term services and supports. NY Connects will continue to conduct targeted outreach to underserved communities and

focus on cultivating & strengthening existing and new partnerships to enhance care transition services with local acute care providers, community health clinics, skilled nursing facilities, and other institutions.

This year, Aging Connect will also continue efforts to engage the private sector to offer meaningful volunteer opportunities for older New Yorkers as well as create opportunities for Corporations, including ‘Adopt an Older Adult Center,’ an endeavor currently under development.

THE BUREAU OF PLANNING, RESEARCH, EVALUATION AND TRAINING (PRET)

PRET is responsible for producing a wide range of data reports and special analyses that enable DFTA, its providers, and oversight agencies to track progress in the Department’s delivery of services to older New Yorkers. The bureau also carries out formal research to advance knowledge within the aging field nationally. PRET is responsible for the Department’s development/fundraising function, in addition to collaborating with the Aging in New York Fund (ANYF) on development efforts benefiting ANYF as the not-for-profit affiliate of DFTA. PRET oversees the planning stages of numerous program development efforts, including the preparation of RFPs and other solicitations. Additionally, PRET coordinates efforts with other DFTA program areas and with ANYF to promote connections between health care plans and providers on one hand, and the network of aging services providers on the other.

PRET also oversees the **Health Care Integration Projects**. Launched in 2017 under DFTA’s non-profit arm Aging in NY Fund (ANYF), DFTA’s management services organization (now known as Community Care Link) is comprised of a network of community-based organizations looking to partner with healthcare organizations and primary care practitioners to seamlessly and efficiently deliver services in an accessible, culturally appropriate, and cost-effective manner. In June 2020, DFTA implemented its first pilot with a health care provider – Healthfirst – linking Medicare Advantage members with aging services providers who assess their needs, navigate them to needed referrals, and connect or re-connect them to a PCP in the case that they have not recently visited one. A full-scale post-pilot phase began in November 2021, where we are working with nine community-based organizations across the five boroughs who speak directly with members and evaluate their healthcare and social service needs to address their social

determinants of health. From November 2021 to August 2022, the project yielded close to a 40% success rate. As of September 2022, DFTA is continuing to work with Healthfirst to close care gaps for members who have pressing healthcare and social concerns. DFTA is looking forward to growing this project with Healthfirst, specifically to bolster health equities in underserved communities, as well as expanding to other potential healthcare partners.

Finally, the bureau carries out the provider training and capacity building functions of the agency, offering a wide range of curricula that promote professionals' knowledge base and skill sets.

SOCIAL ADULT DAY CARE (SADC) OMBUDS OFFICE

In response to widespread community concern about the proliferation of underregulated social adult day programs, DFTA was designated as the **SADC Ombuds Office** through Local Law 9 of 2015. DFTA's SADC Ombuds Office is charged with registering all social adult day programs operating in New York City and receives and responds to SADC-related complaints or inquiries. In February 2020, Rules for Local Law 9 of 2015 were promulgated authorizing the Office to issue civil penalties for violations of the NYS Office for the Aging's Social Adult Day Regulations.

OFFICE OF PUBLIC & PRIVATE PARTNERSHIPS

The **Office of Public & Private Partnerships** is responsible for developing and overseeing all of the Department for the Aging's public-private and strategic partnerships. Focus areas include establishing and maintaining relationships with private sector partners to achieve DFTA's mission, building and coordinating complex, highly visible campaigns on ageism, social isolation, and other older adult challenges, and liaising with the Age Friendly Commission to advance DFTA priorities. The office oversees "DFTA My Ride", a three-year on-demand car service pilot for eligible older adults and individuals with disabilities, developed by DFTA in partnership with the New York City Department of Transportation. The program provides free on-demand transportation for older adults ages (60+) and people with disabilities (18+) living in some neighborhoods in Bronx, Brooklyn, and Queens. In November 2021, the Office of Public & Private Partnerships launched

the “**Combatting Ageism: A Diversity, Equity, Inclusion (DEI), and Belonging Approach**” forum series in partnership with AARP National and AARP New York to influence the adoption of ageism within DEI frameworks and securing partnerships for the Ageless New York anti-ageism media campaign. This year, the Office of Public-Private Partnerships continued its Diversity, Equity and Inclusion (DEI) strategy and invited sister agencies to join online conversations focused on Ageism and Building and age-inclusive New York. By adopting the DEI approach, City agencies not only create a culture of change internally, but they also influence the thousands of providers and vendors they work with. The most recent online sessions we conducted drew an average of 64 agencies and 128 attendees, all representing DEI, Equal Employment Opportunity (EEO) and Agency Professional (APO) leadership.

Projected Resources and Expenditures

July 1, 2022 - June 30, 2023

The Department receives funding from a variety of sources to support the broad range of services described above. Many state and federal grants require the City to “match” a certain proportion of their funding. A significant portion of City tax levy funds are dedicated to match state and federal grants. Most DFTA-funded services are provided through contracts with community-based organizations. DFTA also provides several services directly, including older adult employment assistance, the Elderly Crime Victims Resource Center (ECVRC), and other services for special populations.

The budget figures shown on the following tables are based on information as of September 2022 and are subject to change. Table D (Page 30) lists DFTA’s revenue sources. For City Fiscal Year 2023 (July 1, 2022- June 30, 2023), **the Department's budget is projected at approximately \$543 million**, approximately 11% more than Fiscal Year 2022. City funding represents 64% of the Department’s budget; federal funding 28%; and state funding 8%. Table E (Page 32) reflects planned support for each of the Department's contracted services.

Table D: Projected Fiscal Year 2023 Budget

July 1, 2022 – June 30, 2023

State Funds	
Crime Victims Program	\$372,208
Foster Grandparents Program State	\$18,443
Community Services for Aging	\$10,072,924
Supplemental Nutrition Assist. Prog.	\$10,509,762
Expanded In-Homes Services	\$18,546,806
Congregate Services Initiative	\$152,288
Unmet Need	\$4,014,270
Transportation Program	\$395,804
Sub-Total State	\$44,082,505
Federal Funds	
Title III C Nutrition Services	\$18,849,277
Title III B Supportive Services A	\$10,270,814
Foster Grandparent Grant	\$1,698,359
Title V NCOA Employment Program	\$1,393,478
Title V Senior Community Services Employment. - Year 4 Of 5	\$3,579,495
Nutrition Program for The Elderly	\$10,272,714
Title XX Social Service Block Grant	\$20,551,332
New York CONNECTS Expansion & Enhance-BIP	\$3,652,258
HIICAP - Health Insurance Assistance Pm	\$594,175
Title III D Health Promotion	\$667,026
Title III E Caregiver Support	\$3,514,168
MIPPA Year	\$452,940
Senior Health Improve & Nutrition (SHINE)	\$387,212
Virtual Nutrition Counseling	\$251,200
Falls Prevention	\$88,574
Department Of Justice Protect	\$114,011
CMC6 of the American Rescue Plan	\$3,137,567
HDC6 of the American Rescue Plan	\$1,185,519
COVID19 - Expand Vaccine Access	\$21,341

COVID 19 - Vaccine Access	\$203,894
Local and State Aid	\$63,883,509
<i>Sub-Total Federal</i>	<i>\$144,768,863</i>
Intra-City Funds	
Reserve-Other Services/Fees	\$183,971
Temp Care - Other Services/Fees	\$350,000
Facilitated Enrollment	\$22,500
<i>Sub-Total Intra-City</i>	<i>\$556,471</i>
Other Category	
OMH - Strive Community	\$50,000
AARP Community Challenge Grant	\$15,240
Local Government Records Management	\$74,859
<i>Sub-Total Other Category</i>	<i>\$140,099</i>
<i>Total Grant Budget</i>	<i>\$189,547,938</i>
Community Development Block Grant	
Community Development	\$4,060,210
<i>Sub-Total CDBG</i>	<i>\$4,060,210</i>
<i>Total Grant Budget With CDBG</i>	<i>\$193,608,148</i>
<i>City Tax Levy Per Budget Unit</i>	<i>\$349,758,127</i>
<i>Total Agency Budget</i>	<i>\$543,366,275</i>

Table E: Planned Support by Community-Based Service

July 1, 2022 – June 30, 2023

FY 2023 PLANNED BUDGET		
ACCESS SERVICES		\$82,602,175
Case Management	\$41,136,196	
Transportation/Escort	\$5,108,853	
Information & Referral/Outreach	\$36,357,126	
NUTRITION SERVICES		\$249,163,102
Congregate Meals	\$187,845,528	
Home Delivered Meals	\$60,158,371	
Nutrition Education	\$1,045,536	
Shopping Assistance/Chore	\$113,667	
IN-HOME & CARE SERVICES		\$38,127,972
Home Care	\$35,000,000	
Friendly Visiting	\$1,800,000	
Telephone Reassurance	\$1,327,972	
LEGAL ASSISTANCE		\$1,372,588
EMPLOYMENT RELATED SERVICES		\$6,934,400
Senior Employment	\$5,333,656	
Foster Grandparent Program	\$1,600,744	
OTHER SOCIAL/HEALTH PROMOTION SERVICES		\$162,358,036
Education/Recreation	\$112,381,057	
Elder Abuse	\$5,030,846	
Health Promotion/Screening	\$21,670,205	
Caregiver	\$8,124,445	
NORCS	\$14,749,201	
Residential Repair	\$402,282	

Frequently Used Acronyms

AAA – Area Agency on Aging

ACL – Administration for Community Living

ACS – American Community Survey

AIP – Annual Implementation Plan

APS – Annual Plan Summary

CSE – New York State Community Services for the Elderly Program

DFTA – Department for the Aging

EISEP – Expanded In-Home Services for the Elderly Program

HIICAP – Health Insurance Information Counseling and Assistance Program

MIPPA – Medicare Improvements for Patients and Providers Act

NORC – Naturally Occurring Retirement Community

NORC SSP – Naturally Occurring Retirement Community Supportive Service Program

NYCHA – New York City Housing Authority

NYSOFA – New York State Office for the Aging

OAA – Older Americans Act

OAC – Older Adult Center

RFP – Request for Proposal

ENDNOTES

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- ¹ 2019 ACS 1-Year, Table S0101, U.S. Census Bureau.
- ² 2000 Census; New York City Department of Planning, “New York City Population Projections by Age/Sex & Borough, 2010-2040”, December, 2013.
- ³ 2019 ACS 1-Year, Table S0101, U.S. Census Bureau.
- ⁴ 2000 Census; New York City Department of Planning, “New York City Population Projections by Age/Sex & Borough, 2010-2040”, December, 2013.
- ⁵ 2000 Census and 2019 ACS 1-Year, Table S0101, U.S. Census Bureau.
- ⁶ Bureau of Vital Statistics “Summary of Vital Statistics 2018”, July 2020, Table M25, p 75. The New York City Department of Health and Mental Hygiene (DOHMH).
- ⁷ Ibid, Table M25, p. 75.
- ⁸ Ibid. Table M24, p. 74.
- ⁹ 2010 Census and 2019 ACS 1-Year, Table S0101, U.S. Census Bureau.
- ¹⁰ New York City Department of Planning, “New York City Population Projections by Age/Sex & Borough, 2010-2040”, December, 2013.
- ¹¹ 2000 Census and 2019 ACS 1-Year, Table S0103, U.S. Census Bureau.
- ¹² Ibid.
- ¹³ 2019 ACS 1-Year, Table S0103, U.S. Census Bureau, 2019 ACS 5-Year PUMS Custom Table.
- ¹⁴ 2019 Census Table 3. Poverty Status of People by Age, Race, and Hispanic Origin: 1959 to 2019, 2019 ACS 1-Year, Table B17001.
- ¹⁵ Poverty Thresholds for 2019 by Size of Family and Number of Related Children Under 18 Years, US Census Bureau.
- ¹⁶ 2019 ACS 1-Year, Tables B17001B, B17001D, B17001H, B17001I.
- ¹⁷ 2019 ACS 1-Year, Table B17001.
- ¹⁸ 2019 ACS 1-Year, Table, B19037B, B19037D, B19037H, B19037I.
- ¹⁹ Ibid.
- ²⁰ 2019 ACS 1-Year, Table S1810.
- ²¹ 2019 ACS 1-Year PUMS Custom Tables.
- ²² 2019 ACS 1-Year PUMS Custom Tables.
- ²³ Ibid.
- ²⁴ Gusmano, Michael K. and Victor G. Rodwin. “The Elderly and Social Isolation.” Testimony to the New York City Council Committee on Aging, February 13, 2006.
- ²⁵ 2019 ACS 1-Year, Table S2301, 2019 ACS PUMS Custom Table.
- ²⁶ of Labor. Bureau of Labor Statistics. “Employment Projections: 2012-2022 Summary.” Available at: https://www.bls.gov/news.release/archives/ecopro_12192013.pdf