



Interagency Geriatric Mental Health and Substance Use Disorder Planning Council

Office of Mental Health

| Office for the Aging

| Office of Addiction Services and Supports

| Division of Veterans' Services

2020 Annual Report to the Governor and Legislature of New York State on Geriatric Mental Health and Substance Use Disorders





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INTRODUCTION

New York State continued to advance its efforts to meet the behavioral health and aging services needs of its older adult population in 2020, while operating within the context of the COVID-19 pandemic. The world-wide public health emergency had significant impacts on the provision of mental health and substance use disorder services and accelerated the rapid expansion of telehealth. Statewide, the proportion of Medicaid claims for telehealth services from OMH licensed clinics climbed from 35% in March 2020 to 91% in April 2020—an increase of 56%.

The pandemic also highlighted the disparities in access and gaps in services in many communities, with an acute impact on the older adult population, individuals receiving mental health or addiction services and supports, and communities of color.

The Interagency Geriatric Mental Health and Substance Use Disorder Planning Council (the Council) collaborated in several important areas affecting the behavioral, physical, and psychosocial health needs of the state's older adult population. Examples of work accomplished to address the geriatric behavioral health and other needs of the residents of New York in 2020 are noted in this report. They include but are not limited to:

- Aging in place initiatives to expand possibilities for those with serious mental illness to transition to or continue to live and age in place in the most integrated and least restrictive community settings possible;
- Age-friendly planning grants awarded to 14 counties across the state to incorporate age-friendly community principles into all relevant policies, plans, ordinances, and programs;
- A long-term care planning project to address the emerging needs of New York's aging population as individuals transition to community-based settings;
- NYSOFA's expansion of the "animatronic pet pilot" to combat social isolation and depression among older adults;
- Online certificate programs and training for case managers and other practitioners serving older adults and persons with disabilities;
- OMH and NYSOFA continued as host of SUNY Albany School of Social Welfare students in the Internships in Aging Project (IAP);
- The *Partnership Innovation for Older Adults* (PIOA) geriatric service demonstration program grant projects, made possible by the Geriatric Mental Health Act, completed the fourth of five years of operation in 2020.

GERIATRIC MENTAL HEALTH ACT

New York State enacted the Geriatric Mental Health Act in 2005. The law authorized the establishment of an Interagency Geriatric Mental Health Planning Council, a geriatric service demonstration program, and a requirement for an annual report to the Governor and the Legislature with a long-term plan regarding the geriatric mental health needs of the residents of New York. Funding to establish the geriatric service demonstration program was first approved during the state's 2006-07 budget year, and the legislation called for service demonstration projects in areas such as community integration, improved quality of treatment in the community, integration of services, workforce development, family support, finance, specialized populations, information clearinghouse, and staff training.

Amendments to the Geriatric Mental Health Act in 2008 expanded the scope of the Council to include chemical dependence and veterans. The amendments also changed the formal name of the Council to the Interagency Geriatric Mental Health and Chemical Dependence Planning Council (now the Interagency Mental Health and Substance Use Disorder Planning Council); increased membership from 15 to 19 members; added the Commissioner of Alcoholism and Substance Abuse Services (now the Office of Addiction Services and Supports) and the Director of the Division of Veterans' Affairs (now the Division of Veterans' Services) as co-chairs of the Council; added the Adjutant General as an ex-officio member of the Council; and changed requirements for Council recommendations and joint annual reports to address both geriatric mental health and chemical dependence needs.

In acknowledging the importance of aging in place, the law was amended in 2018 to foster and support collaboration between licensed or certified providers of home care services and mental health providers for the integration of health and mental health care as part of the geriatric service demonstration program. In 2019, amendments to the statute changed the formal name of the Council to the Interagency Geriatric Mental Health and Substance Use Disorder Planning Council and noted that providers of substance use disorder and/or compulsive gambling services and providers of health and aging services were able to receive Office of Mental Health geriatric service demonstration program grants in areas such as community integration, improved quality of treatment in the community or in residential facilities, workforce programs, veterans as a specialized population, information clearinghouse, and staff training.

COUNCIL MEMBERSHIP

The Interagency Geriatric Mental Health and Substance Use Disorder Planning Council is composed of the following 19 members:

- The Commissioner of the Office of Mental Health (OMH), Co-chair of the Council;
- The Director of the Office for the Aging (NYSOFA), Co-chair of the Council;
- The Commissioner of the Office of Addiction Services and Supports (OASAS), Co-chair of the Council;
- The Director of the Division of Veterans' Services (DVS), Co-chair of the Council;
- One member representing the Office for People with Developmental Disabilities (OPWDD);

- The Adjutant General;
- One member representing the Justice Center for the Protection of People with Special Needs;
- One member representing the Department of Health (DOH);
- One member representing the Education Department and the Board of Regents;
- One member representing the Office of Children and Family Services (OCFS);
- One member representing the Office of Temporary and Disability Assistance;
- Four members appointed by the Governor;
- Two members appointed by the Temporary President of the Senate; and
- Two members appointed by the Speaker of the Assembly.

COUNCIL COLLABORATION

The Council and its members continued to collaborate in several important areas affecting the behavioral, physical health, and psychosocial needs of older adults in New York State in 2020. OMH hosted the quarterly meeting of the Geriatric MHSUD Interagency Council on 2/27/20. Due to COVID 19 state-wide public gathering restrictions instituted in March 2020, Council meetings held during 2020 were virtual and/or telephonic, and included reporting on work related to:

- Enhancing collaboration between behavioral health and long-term systems of care to meet individual needs;
- An overview of data collected from the current round of geriatric service demonstration grant projects, titled “Geriatric Service Demonstration Data: A Deeper Dive” presented to the Interagency Geriatric MHSUD Planning Council;
- Telephonic support for older adults through NY Connects, county operated telephone reassurance programs, peer-to-peer non-crisis warmlines, and the activation of the OMH NY Project Hope Emotional Support Hotline for additional support during the COVID-19 public health emergency. <https://nyprojecthope.org>
- OMH initiated the O-Agency Link-Outreach-Vaccinate (O-LOV) COVID-19 Vaccination Program in December 2020 to help individuals with behavioral health conditions access the new COVID-19 vaccines. Collaborating with OASAS, OPWDD, OTDA, and OCFS, OMH developed a program to vaccinate service recipients and staff of programs of all four O-agencies throughout the state.
- Continued work by the Enhanced Multi-Disciplinary Teams (E-MDT) in New York State to investigate and intervene in complex cases of elder abuse;
- An update on OMH’s aging in place demonstration project to provide immediate access to long-term services and supports in the community for individuals identified as long stay patients or those at risk of becoming long stay patients of OMH state operated residences;

- Adoption of OMH and OASAS telemental health regulatory flexibility around treatment and service planning to increase access to services during the public health emergency;
- OMH Office of Consumer Affairs Community Survey to review recipients of service's perspective on telehealth (statistics are for those age 55+), which showed a large increase with 88% of those surveyed participating in telehealth services, 86% participating from home, 85% found the experience easy and effective, and 12% felt uncomfortable or very uncomfortable using telehealth services. Of those surveyed, 24% reported that telehealth allowed them to connect with providers more than before.
- Initial planning for the fifth round of geriatric service demonstration program grants;
- Opening dialogue with NYS Department of Health (DOH) on the impacts of newly proposed regulations on individuals living with serious mental illness concerning the eligibility process for personal care services (PCS), consumer directed personal assistance program services (CDPAS), and managed long-term care (MLTC) plan enrollment.

EDUCATION AND TRAINING

Council member state agency staff from DOH, DVS, NYSOFA, OASAS, OCFS, OMH and OPWDD support several statewide conferences and education and training initiatives related to the geriatric population through assistance in planning programs, delivering presentations, and serving on expert panels, including the following programs:

Presented by the Brookdale Center for Healthy Aging on behalf of OCFS, the *2020 Adult Abuse Training Institute*, focused on the theme of "Dignity and Risk: From Client Autonomy to Involuntary Intervention", brought together more than 400 participants from a variety of public, non-profit, and private sector service providers for a three-day virtual conference on seeking justice and support for victims of adult and elder abuse. Staff from NYSOFA, OASAS, and OMH served on the institute's steering committee, and staff from DVS, NYSOFA, OASAS, OCFS, OMH, and OPWDD served as moderators and/or conducted a number of workshops on topics such as "E-MDTs -the Role they Play in Protecting Client Autonomy", "Elder Abuse and LGBTQ Older Adults", "Physiological Aspects of Aging: What's Normal and What's Not", "Building Supports for Older Victims of Identity Theft, Scams and Financial Exploitation", "Covid-19 and Racism at the Intersections of Structural and Social Determinants", "Collaborating for a Defined Purpose: Evaluating Social Isolation Through a Racial and Poverty-informed Lens", "Self-Care and Wellness for Front-Line Workers with the Elderly: Covid-19 Edition", "Crisis Intervention to Autonomy: Real-World Examples from the INSET Model".

Supporting the Geriatric Mental Health Act Service Demonstration projects, staff from NYSOFA, OMH and OASAS presented to the grantees during Learning Collaboratives on topics such as: "Substance Use Assessment for Older Adults", "Screening for Anxiety and Depression in Older Adults", "Prevention, Treatment and Recovery", "Regulatory Waivers during Public Health Emergency", and "NYS OMH Telehealth Updates" and "COVID -19 in New York State: Impact on the Public Mental Health System".

In 2020, the NYS DVS Learning Team developed and led two weeklong statewide online trainings.

OMH AGING IN PLACE INITIATIVES

In 2020, OMH continued to deploy dedicated staff resources to work in long-term care planning with a focus on enabling those with serious mental illness to age in integrated, community settings by efficiently accessing needed long-term services and supports (LTSS). OMH implemented the Long-Term Care Demonstration Pilot Project (LTCDDPP) with State-operated residences from Creedmoor (Queens) and Kingsboro (Brooklyn) Psychiatric Centers, OMH supportive housing providers SAIL (South Shore Association for Independent Living) and Heartshare St. Vincent's Health Services, and a certified home health agency Visiting Nurse Services on NY (VNS-NY). Seven individuals were transitioned from State-operated residences to SAIL and Heartshare supportive housing apartments through collaboration on:

- Care Management: health home plus care managers, OMH housing case managers, Assertive Community Treatment (ACT) team members;
- Care Transition Support: OMH Mobile Integration Team (MIT) and Pathways Home critical time intervention;
- Homecare and Nursing: OMH Community Mental Health Nurses, homecare nurses, social workers, home health and personal care aides;
- Physical and Behavioral Health: Primary care physicians and OMH clinic psychiatrists and psychologists.

COVID-19 Response for OMH LTCDDPP

Many of the individuals who transitioned from State-Operated residences to independent OMH supportive housing apartments had been in the community for only a few months when New York City became the worst affected area in the United States due to the Covid-19 pandemic. Many of the gaps in services and delays in reactivating entitlements were heightened by the pandemic and services were adjusted to keep participants and service providers safe while maintaining needed wrap-around support. Adaptations and program response to COVID-19 included:

- Securing DSRIP funds for Personal Emergency Response System (PERS) and electronic medication box with reminders (MedMinder) for project participants who were not eligible for these devices or more intensive remote patient monitoring through fee-for-service Medicaid (Medicaid Managed Care enrollment not available until several months post-discharge);
- Use of ACT, HH+ and MIT team wrap-around dollars to pay for food and basic supplies to accommodate slowed processing of SSI activation;
- Coordinated emergency home food delivery for participants through GetFoodNYC;
- Visiting Nurse Services reduced, but continued to provide in-home skilled services to participants as needed, focusing on support for medication changes and management;
- Visiting Nurse Services and Community Mental Health Nurses provided education to participants on COVID-19 risks and symptoms, highlighting the importance of mask wearing and securing masks for participants when needed;
- Increased check-in calls to participants to provide needed support while day programs and clinic visits were reduced or eliminated;

- Assistance in applying for free cell phones with no/low-cost data plans through the federal Lifeline assistance program highlighted the importance of access to technology, including education in its use, for participants transitioning to the community who benefitted from close communication and coordination.

MSW Internships in Aging Project (IAP) Students Support OMH and NYSOFA Aging in Place Initiatives

SUNY Albany Master's in Social Work (MSW) students from with a special concentration in aging interned at OMH and NYSOFA working on policy and program implementation efforts designed to foster aging in integrated settings regardless of disability. IAP interns from OMH and NYSOFA began collaborating in December 2020 in a unique rotation offered through Selfhelp's Virtual Senior Center, enabling them to provide face-to-face support to isolated older adults through live streaming platforms.

PROVIDING SUPPORT FOR OLDER NEW YORKERS

NYSOFA, whose mission is to help older New Yorkers be as independent as possible for as long as possible, is a good example of a state Council member agency with a record of accomplishments and goals addressing geriatric and behavioral health needs in 2020.

Pandemic Response

Older New Yorkers were severely impacted by the COVID-19 pandemic and made up the most fatalities. Due to the severity of the virus and the ease with which it spread, a stay-at-home recommendation was put into place for individuals age 70 and older, and anyone with chronic health conditions who were also immuno-compromised. Millions of older adults stayed home, and the aging service network infrastructure had to change virtually overnight to meet basic needs and to address the impact of social isolation. Programs and services provided in senior centers, social adult day programs and other congregate settings were closed, limiting needed social interactions and access to nutrition and other services. The following were the types of programs and services that were most in demand when the stay-at-home recommendation was issued and most of the aging services network is still operating under this framework, while continuing to provide the services older adults need to remain safe in the community.

Pandemic Information, Education and Resources:

- NYSOFA was a source of accurate information on the seriousness of the virus and the safety protocols for individuals and service deliverers. This became a priority as people received inaccurate information that placed individuals, their families, and their communities at risk.
- NYSOFA launched the only tool in the country, the New York CV19 CheckUp, that evaluates an individual's risks associated with COVID-19 based on their life situation and individual behavior and provided real-time recommendations and resources to reduce those risks. <https://newyork.cv19checkup.org/>
- NYSOFA and the aging services network worked tirelessly to provide accurate information on the efficacy of the vaccines and worked to get older adults appointments, transportation, document verification, etc. to get shots in arms. The network led the way in getting home-

bound older adults in-home vaccinations.

Primary Service Adaptations During Pandemic

In addition to the 20+ traditional services and supports offered in communities throughout New York, several immediate needs rose in priority, including:

- Home delivered meals – The aging network saw an increase of between 75-100% in demand for meals. Because our network of over 800+ senior centers and congregate meals sites were closed, all meals had to be either hand delivered to the home or through a “grab and go” program that was implemented statewide. We were able to use our federal and state flexibility to purchase emergency meals on behalf of the network which reduced cost, using the states purchasing power.
- Groceries and supply deliveries – Many older individuals staying at home needed groceries and other supplies delivered to their homes. The network of aging professionals worked with food outlets to expand their delivery services if they had them, worked with stores to establish a delivery service, or shopped and delivered groceries on behalf of an older adult to help them meet basic needs, avoid going out and slow the spread of the virus.
- Medication deliveries – The network of aging professionals worked with local pharmacies to either establish or expand their prescription delivery services so that older adults could access the medications they need. Where delivery service was not available, network staff delivered prescriptions directly to their customers.
- Transportation to critical services – The pandemic did not stop the need to get to medical appointments, and aging services staff stepped up to provide transportation.
- Combating social isolation – Isolation and depression among older adults was a public health problem prior to the pandemic and increased during the pandemic with the stay-at-home order and the closure of facilities that provide services as well as social engagement through face-to-face contact. The network of aging professionals developed phone trees, wellness checks and expanded the use of technology to connect individuals to their loved ones, as well as developing platforms to engage individuals in lifelong learning, including classes based on their interests, as well as teaching how to use common technology and devices to stay engaged and enhance friendships and connections.
- Identifying and addressing elder abuse and scams – The stay-at-home order and closure of community programming impacted the ability to identify the physical signs and symptoms of elder abuse and neglect. The network of aging professionals expanded outreach and education to encourage the public to check in on their family, friends, and neighbors to keep them safe. Further, many older adults were and continue to be targets of scams, capitalizing on their isolation. These came in many forms such as charity scams, relief check scams, or phone calls, emails, or texts from what appeared to be legitimate public and private companies and organizations to click on links that would install malware and other viruses on their devices to defraud them.

Flexibility

NYSOFA was operating under a federal and state disaster declaration that allowed for flexibility in

funding to be able to meet locally determined needs, ideas, and innovations. These flexibilities recognized the local, regional, and state differences and allowed the network of aging professionals to be creative in how they meet a spiking service demand and allowed for innovation to meet those service demands, and other emerging needs generated by the public health emergency. These innovations, particularly around combating isolation, included expansions of our animatronic pet project, expansion of web-based connectivity platforms and user technology literacy assessment and education, landline outreach for those unable to use technology-based platforms, pushing out OMH's Mental health helpline

Other Innovations in 2020

- Home Share Replication

NYSOFA is working with two communities to replicate the successful Vermont Home Share Program that links older individuals interested in sharing their home with an individual looking for a home. While many get into these arrangements for economic reasons, data clearly shows that both the older adult and the individual benefit from the reciprocal arrangement with such gains as increased socialization, task assistance and mutual support.

- GoGo Grandparent

This service was launched to provide an additional transportation option throughout New York State. The service provides an opportunity for older adults to engage in the gig economy by becoming drivers for their peers. This model uses trained drivers who understand the issues older adults face to provide door-to-door transportation.

- TCare/CaringWire/ArchAngels Pilot

NYSOFA is working with several innovative technology platforms that help caregivers reduce stress and link to community resources. These platforms help to assess a caregiver's stress intensity level, develop a care plan, and link to local support services that help them continue to provide care for their loved one in the community and avoid more costly and high intensity care in the clinical environment.

- FEMA Nutrition and Restaurant Project

NYSOFA worked with DHSES and FEMA to successfully apply for emergency meal funding given the large increase in demand. NYSOFA will continue to work with the county Offices for the Aging to expand the restaurant program that allows federal and state funding to be used to purchase meals for older adults at restaurants, continuing to meet nationally recognized nutritional standards.

- Council on the Arts Pilot

NYSOFA partnered with the NYS Council on the Arts and Lifetime Arts to bring professional artists into the homes of older adults via technology platform. Arts and culture are important to many people, and this program helped connect professional artists and older adults with an interest in the arts.

- Virtual Senior Center & Get Set Up

NYSOFA worked with the Association on Aging in New York to launch two platforms that

offer a variety of virtual classes and programs in the home. One platform is successfully being piloted in 10 counties and NYSOFA has purchased 50,000 classes on behalf of older adults. Combined, there are more than 13,000 older adults utilizing the platforms that offer more than 600 different classes.

- Technology Support – Tech assessment

Given the expansion of technology, telehealth and programs and services being delivered using technology, NYSOFA added a technology screen to the comprehensive assessment tool so that individuals who can afford, use, or be taught to use technology can be immediately linked to the variety of programs and services that are now offered electronically. Individuals who cannot or choose not to use technology can be served in a traditional way.

Age-Friendly Planning Grant Program

NYSOFA, in partnership with DOH, DOS, the Health Foundation of Western and Central New York, the New York Academy of Medicine, and AARP, funded [planning grants](#) awarded to 14 counties in 2019 to help communities across the state incorporate healthy, age-friendly community principles into all relevant policies, plans, ordinances, and programs.

In 2020, NYSOFA worked to expand the replication of Executive Order 190 to 5 more counties, to build features of livable communities into the county planning and procurement. Executive Order 190 requires all state agencies to incorporate age-friendly health objectives from New York State's Health Prevention Agenda and the American Association of Retired Persons (AARP)/World Health Organization (WHO) domains of livability into their planning, procurement, procedures, and policies.

Animatronic Pet Pilot to Combat Social Isolation

In 2019, New York State became the first state in the nation to test the use of animatronic pets with isolated community-based older adults. New York piloted 60 Joy for All Companion Pets (30 cats and 30 pups) with socially isolated older adults living at home in 12 counties across the state: Broome, Cattaraugus, Clinton, Essex, Franklin, Lewis, Livingston, Onondaga, Orleans, Schuyler, St Lawrence counties; and the City of New York. In partnership with the Alzheimer's Association of Northeastern New York, pilot participants were identified using a [6-item loneliness scale](#). Animatronic pets are often used to assist people with Alzheimer's disease and other dementias as a form of calming pet therapy, but data has shown that using pets to decrease social isolation is [highly successful](#) – 70% of the pilot participants reported a decrease or significant decrease in feelings of social isolation after one year.

In 2020, NYSOFA expanded on the original pilot and purchased and distributed more than 2,500 pets to isolated older adults. In addition to New York's project, many other states followed New York's lead and replicated the program. One study from Alabama showed that engagement with the pets increased each month for a one-year period, clearly demonstrating that the bond with these pets and their use for comfort and connectivity increased over time. NYSOFA received a statewide award and recognition, voted on by our peers, by the New York State Technology Enterprise Corporation (NYSTEC) for Population Health Innovation Summit session on Targeting the Effects of Social Isolation.

Villages Technical Assistance Center

In 2019 NYSOFA and the Albany Guardian Society partnered to create the first-of-its-kind Villages

Technical Assistance Center ([VTAC](#)) to support and expand the Village movement in New York State. The Village movement is based on the idea of "neighbors helping neighbors" to make it possible for older adults and those with physical and/or behavioral health challenges remain independent in their homes. Villages are membership-driven, grassroots, nonprofit organizations run by volunteers and/or paid staff that coordinate access to a variety of services. Residents, typically age 50 and older, form a non-profit membership organization to provide access to services that make it possible for them to age in place. Services usually include transportation, grocery shopping, meals, personal care, home health care, light home maintenance and repair, technology assistance, education, and social activities. With additional Villages in development, there are currently more than 19 of them in the state and 200 in the country. NYSOFA continued its support for the VTAC in 2020 and is currently working with communities to finalize readiness reviews to help get their programs operational.

Online Training Academy

New York is the first state in the nation to offer validated, skills-based, online certificate programs and training for case managers and other practitioners serving older adults and persons with disabilities. The training is delivered in partnership with Boston University's Center for Aging and Disability Education and Research.

Changes in the fields of health and long-term care have rapidly evolved to address challenges faced by a growing number of older adults and others unable or needing assistance to perform basic activities needed to live independently. New models of health and mental health care delivery that shift the balance towards community-based services, stronger integration of LTSS with primary and acute care, and improved cooperation between aging and disability networks all signify the magnitude of the policy and service developments. Developing a qualified, adaptable, and sustainable workforce within the aging network to support and coordinate services to older adults and younger adults with disabilities is a critical public policy challenge.

Highlights of NYSOFA Goals for 2021

- Working with OMH and DOH on an aging and mental health anti-stigma campaign.
- Expanding the use of automated companion pets.
- Significantly increasing behavioral health screenings through the state's expanded and enhanced "No Wrong Door" service access.
- Strengthening relationships between local area agencies on aging and behavioral health care providers to increase referrals for treatment.
- Recruitment and awareness campaign to increase capacity and rides through GoGo Grandparent, a ride hailing service for older adults.
- Expansion of technology platforms and solutions for older adults to stay connected
- Linking caregivers to mental health services as the pandemic has had a significant impact on depression, anxiety, COVID-induced trauma, and suicidal thoughts.
- Engaging businesses to better understand and assist working caregivers by distributing the Caregivers Guide for Business and distributing surveys to better understand working

caregivers, their experiences and support needs.

SERVING NEW YORKERS WHO SERVED

Created in 1945 and renamed in 2019 as the Division of Veterans' Services, DVS is the state agency whose mission is to provide quality support, advice, and advocacy for New York State veterans, service members, and their families by helping them obtain the state and federal benefits they earned due to their military service.

The New York State Division of Veterans' Services (DVS) advocates on behalf of New York's veterans and their families, as individuals and as a group, to ensure they receive benefits granted by law for service in the United States Uniformed Services.

The DVS provides free benefits advising. Experienced and dedicated advisors — each a veteran — work in a network of field offices across the state and offer veterans and their families professional help to resolve social, medical, and economic matters. More than half of the state's veterans are older adults age 65 or older.

Restoration of Honor Act

In 2019, the Restoration of Honor Act was signed into law in New York State. The Restoration of Honor Act authorizes DVS to restore access to State Veterans Benefits to veterans with an Other-Than-Honorable Discharge (OTH) or a General Under Honorable Conditions Discharge due to the following:

- Post-Traumatic Stress Disorder (PTSD)
- Traumatic Brain Injury (TBI)
- Military Sexual Trauma (MST)
- Sexual Orientation
- Gender Identity

In November 2020, the Restoration of Honor Act became effective, and decisions began to be sent out. DVS conducted its own digital campaigns across social media to further inform veterans and their families about the Restoration of Honor Act. Additionally, to spread awareness and gain consensus within the veterans' sphere on this program, DVS engaged in community partnerships with local organizations across the state.

To ensure a seamless implementation process, training to our partner organizations, veterans service organizations, and county partners was conducted prior to the effective date and continues to be made available to any organizations that request one. All state agencies with public-facing staff completed training on the Restoration of Honor Act.

Those who receive an "honorable" for the purposes of state veterans' benefits are able to access over 50 potential benefits and programs that were previously unavailable to them. It also presents the opportunity for DVS staff to assist these veterans with upgrading their official discharge status with the Boards of Military Records for their service branch, creating an opportunity for further life-changing programs and benefits.

Continuous Learning Network

In 2020, the NYS DVS Learning Team developed and led two weeklong statewide online trainings. Over 140 people attended the first of these trainings, with over 160 attending the second. The speakers at these trainings included Chief Judge Margaret Bartley of the United States Court of Appeals for Veterans Claims, Board of Veterans' Appeals Chairman Cheryl Mason, several highly experienced NYS DVS subject-matter experts, and many of the nation's leading attorneys for veterans and their families, including John Wells of Military-Veterans Advocacy, Beth Kubala of the Wohl Family Veterans Clinic at Syracuse University School of Law, Pete Kempner and Jessica Penkoff of Volunteers of Legal Service, Coco Culhane and Melissa Molfetas of Veteran Advocacy Project, Samantha Kubek of the New York Legal Assistance Group, and nationally recognized Elder Law attorney Victoria Collier — all of whom graciously donated their time and expertise to provide these trainings. These trainings covered topics ranging from discharge upgrade appeals to non-service-connected pension cases to federal education benefits to a wide range of nuances regarding VA disability compensation claims. Also trained were key skills from client interviewing to evidence gathering and synthesis to advocacy writing.

Pension Poaching

Pension poaching is one of the most prevalent problems in the nation affecting older veterans and their family members. Although federal law prohibits anyone from charging a fee for representing a veteran or a veteran's family member in an initial claim for benefits from the United States Department of Veterans Affairs (VA), pension poachers trick veterans and their families into paying fees for these services with enticing public messaging, banking on the notion they will never be reported to federal authorities. This deceptive, predatory practice has been the subject of nationally distributed reports by the VA and the Federal Trade Commission, and leaders within the United States Senate are advocating for national legislation that would address this financially and emotionally damaging problem.

New York has led the national efforts to ensure that pension poachers are not permitted to operate within our state's borders. In 2019, New York enacted the Pension Poaching Prevention Act — Section 349-F of the General Business Law — which remains the strongest anti-pension poaching statute in the United States. The Pension Poaching Prevention Act established a cause of action for New York's Attorney General to prosecute any pension poacher doing business in New York for committing a deceptive act in the conduct of business, trade, or commerce. Additional penalties can be imposed if the victim of the pension poaching is over the age of sixty-five.

Any individual who is the victim of a pension poaching scheme in New York, or any individual who encounters pension poachers in New York, is strongly encouraged to contact SOFA, DVS, or the New York State Attorney General's Office as soon as possible so the Attorney General's Office can investigate this situation and prosecute the wrongdoers. Through this vigilance, and thanks to the strong protections of this law, pension poachers will be brought to justice, and businesses thinking about engaging in these deceptive practices toward our state's heroes will be deterred from doing so.

Justice For Heroes

New York State through the New York State Division of Veterans' Services has also improved access to justice for older veterans and their families through their Justice For Heroes grants, in which five

law schools — Albany, Buffalo, Hofstra, Syracuse, and Touro — have received \$50,000 apiece for each of the last four years to better address veterans’ unmet legal needs. Several efforts launched or augmented by these funds have focused specifically on serving older veterans and their families, a vital component of this work given that the majority of veterans in New York State are over the age of sixty-five.

For instance, Touro Law Center used a portion of their Justice For Heroes funds to establish collaborative programs with their Aging & Longevity Institute and their Veterans’ & Servicemembers’ Rights Clinic focusing on serving older veterans, including providing a tremendous range of services to veterans who are residents of the long-term care facility at the Northport VA Medical Center. Buffalo Law School’s Veterans’ Legal Practicum used these funds to establish help desks at VA medical facilities in Buffalo and Batavia, programs they transformed into virtual help desks after the start of the COVID-19 pandemic. Albany Law School’s Veterans’ Rights Pro Bono Project also established a partnership with VA Medical Center in Albany and set up multiple opportunities for older veterans to receive free legal advice and assistance in a wide range of practice areas, including tax law matters, property law issues, VA benefits advocacy, and the drafting and execution of wills, health care proxies, powers of attorney, and other advance care directives.

Through these projects and other endeavors funded by the Justice For Heroes grant, older veterans and their family members can receive free legal services in a variety of much-needed areas. Additionally, the work funded by these grants serves to educate and inspire the law students who are mentored by highly credentialed faculty members in providing this direct legal assistance, helping to ensure that the next generation of attorneys includes plenty of ardent advocates for veterans and their families, and for older New Yorkers.

GERIATRIC SERVICE DEMONSTRATION GRANTS

Background

Round Four of the Geriatric Service Demonstration program grants, which are made possible by the Geriatric Mental Health Act, concluded its fourth year of operation in December 2020. The *Partnership Innovation for Older Adults* (PIOA) project comprises eight awards totaling

\$9 million over the five-year grant period. The PIOA projects created local “triple partnerships” of mental health, substance use disorder, and aging services providers to innovatively address the unmet needs of older adults with behavioral health issues.

Each of the service demonstration projects was required to outreach and serve the target population of older adults (age 55 or older) whose independence, tenure, or survival in the community is in jeopardy because of a behavioral health problem. In addition, each partnership project was to:

- Identify at-risk older adults in the community who are not connected to the service delivery system or who encounter difficulties accessing needed services;
- Mobile Outreach and Off-site Services are used to assess unmet needs for behavioral health and aging services – as well as unmet needs related to areas such as physical health, cognition, social isolation, self-neglect, abuse, housing, financial; resources/benefits, and legal issues – and connect them to needed services;

- Link individuals to behavioral health services and home and community-based, non-medical, aging support services to meet their needs.
- Utilize one or more technological innovations to better serve the target population and innovatively address the unmet needs of the target population. In 2020, due to the need for social distancing during the COVID-19 public health emergency, the expanded use of technology (telephonic and telehealth services) became critical to maintaining service connection and providing supports to older adults in the community.

Geriatric Service Demonstration Grantee adaptations to COVID-19 in 2020

The COVID-19 public health crisis has highlighted the severe impact of health care access disparities and the social determinants of health (SDOH) on underserved racial and ethnic minorities and other vulnerable populations, including older adults with behavioral health conditions. The public health emergency compounded the risk for social isolation, increased anxiety and depression, and increased substance use among older adults. The PIOA's flexible design enabled the Partnerships to respond to both urgent and emerging needs of older adults in their communities. As older adults are most at risk for severity and mortality from COVID-19, the PIOA programs were able to shift their service model from primarily face-to-face service delivery in the community to the use of telephonic communication and telehealth platforms, all while maintaining, and sometimes increasing, contact with program participants. Food insecurity quickly became a critical need as many older adults who participated in Senior Center meals, received home delivered meals or used public transportation for shopping were unable to access these services. The Partnership members quickly redeployed staff and resources and used existing relationships and service connections between aging services and behavioral health service agencies to provide for the wholistic needs of their project participants.

Project Descriptions and COVID-19 service adaptations:

Central Nassau Guidance & Counseling Services' triple partnership includes the Family & Children's Association (FCA) and the Nassau County Office for the Aging, with each of the three agencies responsible for delivering a specific set of services county-wide. Their program, called the "Link-Age Project," is designed to identify the need for services and utilizes care coordination to connect older adults to a range of supports delivered by more than 75 collaborative agencies in Nassau County.

- FCA staff previously assisting clients with household chores transitioned to shopping and delivering food to reduce food insecurity;
- Provided clients with gift cards to local restaurants, assisted with pick-up and delivery of purchased meals;
- Shifted to all virtual services (assessment and counseling) using free and/or no-cost telephone and online video platforms, provided technology education and support to reduce social isolation;
- Increased online presence and outreach to inform community of continued resource for referrals and services;
- Increased check-in calls with former and current clients;
- Nursing staff increased follow up calls, and assisted with prescription delivery and renewal;

- Clients were provided PPE, COVID education, connected with vaccine access and scheduling.

CoveCare Center's triple partnership project, called "Senior Partnership Services," includes the Putnam County Office for Senior Resources and the National Council on Alcoholism & Other Drug Dependencies/Putnam. Providing care management, behavioral health treatment, and recovery coaching for older adults, most services are delivered on-site in the homes of seniors or elsewhere in the community to support aging in place.

- Increased check in frequency to active and participants discharged within past 30 days;
- Increased monitoring for symptoms of depression, anxiety, and stress;
- Assisted with linkages to access food, medicine, PPE, and cleaning supplies;
- Increased connection to community-based services and supports specific to COVID response.

The goal of *Family Services of Westchester's* triple partnership, which includes the Westchester County Department of Senior Programs and Services and the Lexington Center for Recovery, is to reduce the isolation and decline that can accompany untreated behavioral health and unaddressed aging issues. Their program provides mobile outreach and behavioral health services and utilizes a model telehealth intervention program.

- Shifted to telephonic and telehealth screening, assessment, and psychotherapy visits;
- Access and engagement improved. Participants preferred telephonic contact vs. face-to-face visits due to safety concerns;
- Modified Ride Connect service to "Shop and Drop" grocery shopping program;
- Modified TIPS Program – Senior electronic medical follow up program. Added "TIPS in Touch" program – telephone follow up calls by student interns to older adults to reduce social isolation;
- Caregivers Coaching Program – telephonic support and increased use of social media to inform community of services.

Flushing Hospital Medical Center's partnership, which includes the New York City Department for the Aging (DFTA), provides culturally and linguistically competent behavioral health and aging services for a population of older adults in a community-based senior center in Flushing, New York. The population consists of Chinese speaking older adults; many have unmet behavioral health needs that put their independence, tenure, or survival in the community at risk.

- Shift to Telephonic and telehealth screening, assessment, and psychotherapy visits;
- Providing group support through telehealth platform –triage based on need;
- Partnered with DFTA, providing home delivered meals and outreach to individuals who would usually engage in Senior Center meals and activities;
- Started outreach to discharged service users, and increased check in with current participants to reduce social isolation.

The *Institute for Family Health's* triple partnership includes the Ulster County Office for the Aging and Step One Child & Family Guidance Center Addiction Services. Their program utilizes mobile outreach to engage older adults who are not connected with the county's traditional behavioral health and aging services and provides care navigation and behavioral health and aging services to older adults to increase access to services and reduce barriers to engagement in services.

- Shift to Telephonic and telehealth screening, assessment, and psychotherapy visits;
- Providing technical support to participants to develop new technology skills;
- Increased outreach to participants due to remote work and lack of travel time needed;
- Redeploying OFA senior center staff to deliver cooked food and pick up/delivery of frozen meals, grocery shopping services;
- Encouraging/teaching participants to use patient health portal to maintain access to healthcare.

The "Niagara Partnership for Healthy Aging," includes the *Niagara County Department of Mental Health*, the Niagara County Office for the Aging and Northpointe Council. Its focus is on creating a strong, connected network of behavioral health and aging services providers and leveraging other existing supports to meet the needs of at-risk older adults in Niagara County, helping them not only remain safe in the community but also flourish.

- Shifted all in-home counseling and case management to telephonic support; to assist with emotional stability, connection to needed resources, reduce social isolation;
- Adapted modality of treatment as requested, people prefer shorter check-in calls to longer counseling sessions as many do not have access to Wi-Fi or smart phones;
- Niagara county website updated regularly to inform public of resources during COVID-19;
- Linkage to Aging partner's home-delivered meals; the Niagara County Office for the Aging has partnered with FeedMore WNY.

The *Onondaga County Department of Adult & Long-Term Care Services* and its partners, Liberty Resources, Aurora of Central New York, and Helio Health are expanding services for a diverse population of older adults. Called the "Senior Health and Resource Partnership (SHARP) Project," the program seeks to increase the integration of aging and behavioral health services while addressing barriers to accessibility such as limited English language proficiency, cultural mores, poverty, cognitive and physical impairments, perceived shame, and isolation.

An important addition to the services offered through SHARP, Aurora of Central New York offers specialty services to deaf and hard of hearing individuals, and those with visual impairments.

- Played an active role in the county's emergency preparedness response related to adult feeding, nursing, and mental health needs;
- Increased outreach to community making new contacts and connecting older adults to project services through telephonic and video platforms (as available).

The *Orange County Department of Mental Health's* triple partnership includes Catholic Charities of

Orange County and the Orange County Office for the Aging. Their program, called the “Welcome Orange Geriatric Initiative (WOGI),” offers older adults behavioral health assessment and treatment services and linkages to existing aging and other community-based services.

- Telephonic and telehealth screenings, assessment, and psychotherapy visits;
- Partnered with O.C. Crisis Call Center and OFA to increase access to home delivered meals and community food resources;
- Increased use of social media for outreach to community members and providers.

Grant Evaluation

OMH staff in the Office for Population Health and Evaluation (formerly the Office for Performance Measurement and Evaluation) continue to collect and review data reported by each of the geriatric service demonstration projects to inform and support their efforts and to conduct implementation and outcomes evaluations of their work. The *Partnership Innovation for Older Adults* (PIOA) Mid-Grant Evaluation Report” was completed in December 2019 and showed the many ways the project has been effective in both providing and improving services to the older adult population. This work continued in 2020 during the public health emergency by further reducing service silos and increasing integration between the mental health, substance use disorder and aging supports service providers. As the critical need to provide services in innovative ways increased during the public health emergency, community networks were strengthened, and new connections and relationships were developed to meet the needs of older adults in New York State. Round Four of the Geriatric Service Demonstration projects will conclude in December 2021, and a final grant evaluation report, to be completed in early 2022, will provide insight into the development of service delivery models that meet the needs of older adults and identify gaps in the community system of care.

Grant Project Support

OMH staff in the Division of Adult Services’ Bureau of Program and Policy Development continued to provide ongoing program operational support for the grant projects in 2020. With responsibilities for assigned projects that include on-site and off-site consultation and project oversight, they also approved contract work plans, monitored contract deliverables, reviewed requests for program and/or budget changes, worked with OMH field office staff, facilitated communication with others at the agency, served as grant project advocates, and helped troubleshoot and problem solve with and on behalf of the grantees.

OMH staff also worked closely with contract staff responsible for the operation of New York State’s Geriatric Technical Assistance Center (GTAC), established by OMH in 2012 to provide programmatic and fiscal training and technical assistance for the geriatric service demonstration program. Staffed by the National Council for Behavioral Health, GTAC’s work with the *Partnership Innovation for Older Adults* projects in 2020 included:

Although on-site visits from GTAC and OMH staff to the PIOA grantees were not possible due to 2020 COVID-19 travel restrictions, GTAC and OMH were able to rapidly pivot to “virtual” site visits, Learning Collaboratives, and coaching calls with each grantee. Learning Collaborative meetings were held in December 2019, and September and December of 2020. The Learning Collaboratives focused on peer to peer sharing and presentations to educate or support their work on project goals,

workflows, business practices, and individual needs for technical assistance in these ways:

- Individual coaching calls with each grant project in January, April, August, and October;
- Virtual site visits with each grant project in May and October 2020 to review project progress and provide targeted support;
- Financial and sustainability webinar and follow up coaching calls beginning in June 2020 focused on developing plans for program sustainability, costing out services and developing partnership budgets, developing a program value proposition to support the long-term success of each partnership;
- Hosting three virtual Learning Community meetings of grantees that covered topics such as “Sharing Client Success Stories”, “COVID-19 Service Adaptations”, “Developing Your Value Proposition”, “Sustainability Planning”, using technology with older adults, engaging clients through virtual platforms;
- Motivational Interviewing Affinity Series focused on the use of motivational interviewing techniques with older adults to effect change and improve health literacy; and
- Biweekly meetings between GTAC and OMH program staff for program planning, support, and monitoring of grant deliverables.

SUMMARY

Identifying, planning for, and addressing the behavioral health and aging services needs of older adults in New York State makes full use of the provisions of the Geriatric Mental Health Act and the collaborative efforts of the Interagency Geriatric Mental Health and Substance Use Disorder Planning Council and its members. State agency initiatives related to aging in place, the provision of support and aging services for older New Yorkers, help for older adult veterans and service members and their families to obtain the state and federal benefits earned as a result of military service, and the lessons being learned from the *Partnership Innovation for Older Adults* service demonstration program grants support New York State efforts to provide for some of our most vulnerable citizens, and allow them to live and thrive in the communities of their choice.