

Living In Place

NYC Health Department

JASA

SHNNY NetWorkShop

February 18, 2026

Understanding of Need

- In NYC, the older adult population (60+) is approximately 1.9 million
 - Representing 22.4% of the overall NYC population¹
- Nationally, 2.6 % of 60 - 64-year-olds experienced serious mental illness in the past year²
 - For NYC, this includes more than 21,000 that reside in Community Care Level Supportive Housing

With a large and growing older adult population, the need is clear for an increased focus on how, and where individuals will continue their aging process

¹ Substance Abuse and Mental Health Services Administration (SAMHSA). Key substance use and mental health indicators in the United States: Results from the 2021 National Survey on Drug Use and Health (HHS Publication No. PEP22-07-01-005, NSDUH Series H-57). December 2022

² United States Census Bureau. 2021 American Community Survey (ACS). Updated December 2nd, 2022. Accessed May 16, 2023.. <https://www.census.gov/programs-surveys/acs/data.html>.

Aging in Place



- Survey found that about 75% of people over age 50 want to stay in their homes or communities for as long as possible³
- Studies have also found that compared to older adults living in institutional settings, seniors who age in place are:
 - More socially engaged
 - Have better health outcomes in areas such as level of depression, physical function, and muscular strength⁴

As individuals with serious mental illness often have less social and familial support, the NYC Health Dept. sought to develop a short-term intervention to better support successful aging in place for this group

³ American Association of Retired Persons (AARP). 2021 Home and Community Preferences Survey: A National Survey of Adults Age 18-Plus. September 2022. Accessed May 16, 2023.

⁴ HUD office of Policy Development and Research. Measuring the Costs and Savings of Aging in Place. Fall 2013. Accessed June 5, 2023. A re

Living In Place – An Aging in Place program for Older Adults with Mental Illness

Mission:

- Improve equity of opportunity for older adults with mental illness to age in place, via administration of key services to promote independence
- Address social determinants of health and other obstacles to successful aging in place
- Allow older adults to maintain maximum familiarity, comfort and autonomy, for as long as possible

Program Model

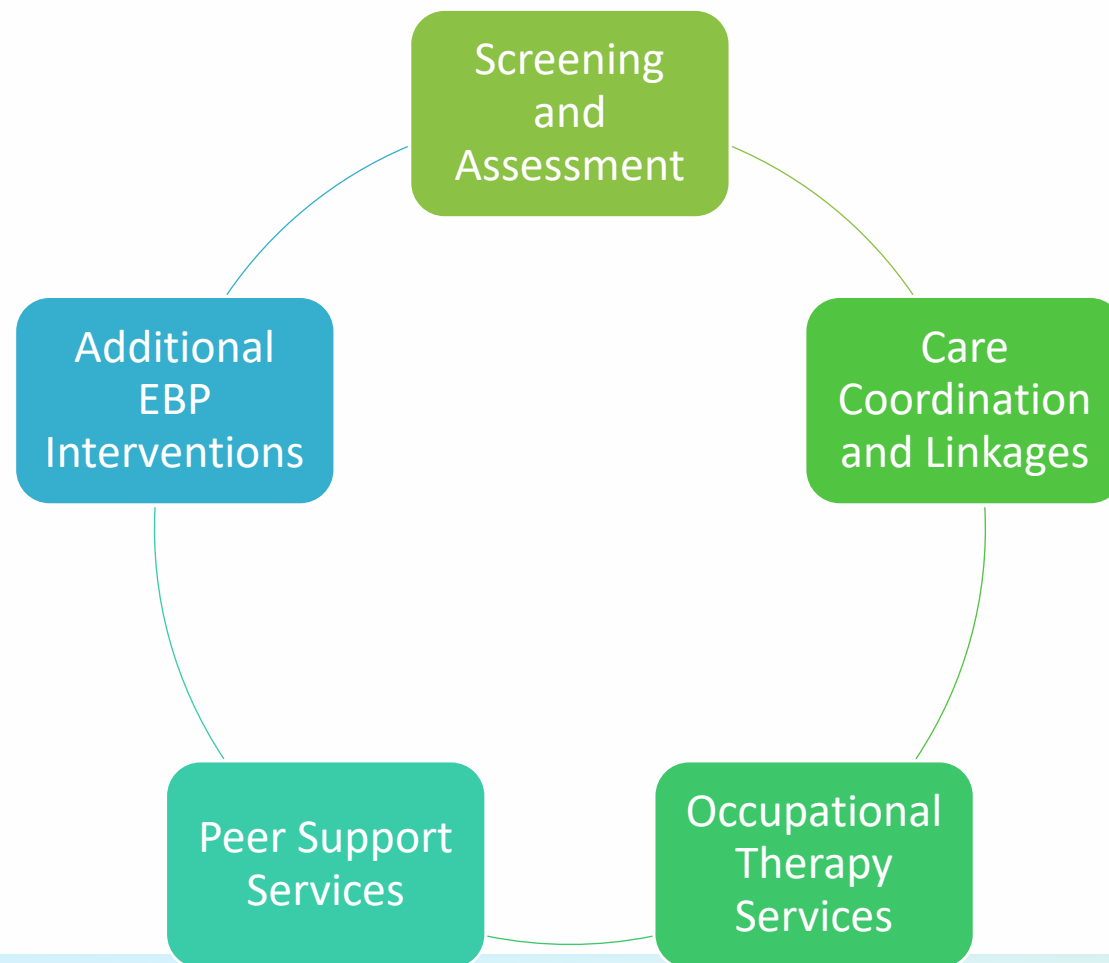
Living in Place uses a Critical Time Intervention (CTI) model

- Supports vulnerable individuals during a “critical time” of transition
- Core Components include:
 - Time limited
 - Phased approach
 - Decreased service intensity over time
 - Community based (services primarily happen in individual’s natural environment(s))
 - Small Caseloads and full case reviews
 - Team meetings and supervision
 - Service dollars/wrap around funds available to meet some urgent needs

Team Composition (at minimum):

- Program Coordinator, LMSW or LMHC
- Wellness Specialist
- Peer Specialist
- Occupational Therapist (OT)

Service Components





Proud to be the go-to agency for older New Yorkers

Living in Place Program

*Funded by NYC Department of Health
and Mental Hygiene and Public Health
Solutions*

What is JASA?

JASA is the go-to non-profit serving older New Yorkers. JASA supports more than 40,000 older adults and their families annually.

With over 50 locations and a staff of 2,000, JASA offers a continuum of services and programs to address vital needs and help older adults live safely and confidently in the community, including:

- Home-Delivered Meals
- Affordable Senior Housing
- Legal Services
- Older Adult Centers
- Elder Abuse Prevention



LIVING IN PLACE: SCOPE OF PROGRAM

JASA's Bronx Living in Place program provides Critical Time Intervention (CTI) case management and other support services, to enable older adults, ages 55 and above, with serious mental illness (SMI) to age in place in their residences.

Services address social determinants of health specific to the aging population which disproportionately impact individuals with SMI, leading to an acceleration of the aging process and a decrease in the ability to age in place

LIVING IN PLACE: PROGRAM STRUCTURE

Following an initial screening/intake assessment period to determine eligibility, services are provided to each eligible participant for a maximum period of six (6) to nine (9) months in four (4) distinct phases:

- Phase 1: Pre-CTI (45 - 60 days) – Focus on developing a trusting relationship with client; weekly visits generally occur
- Phase 2: Transition (45 – 60 Days) - Make home visits, engage in collaborative assessments, meet with existing support, give support and advice to client and caregivers, begin introduction to new supports, weekly visits generally occur
- Phase 3: Try-Out (45 – 60 days) - Observe operation of support network including new linkages, modify support network as necessary, encourage client to take more responsibility and independence, bi-weekly visits generally occur
- Phase 4: Transfer of Care (45 – 60 days) – Ensure that supports can function independently of Living in Place program, complete transfer of services, monthly visits generally occur

LIVING IN PLACE: ELIGIBILITY CRITERIA

- ~~55~~ years or older
- Have documented diagnosis of Serious Mental Illness (SMI)
- Currently engaged in psychiatric care with mental health stability/individual is at their baseline
- Have a demonstrated need for additional support for the individual to remain in their current residential setting
- Reside in the 5 boroughs:

***For JASA, must reside in the Bronx for JASA**

*Exclusionary criteria

- Currently living in shelter or Adult Care Facilities, as defined and licensed by the NYS Department of Health
- Currently enrolled with an Assertive Community Treatment (ACT) or Intensive Mobile Treatment (IMT) programs

LIVING IN PLACE: ACCEPTABLE DOCUMENTATION

Verification of identity:

- Government issued ID or other documentation

Verification of SMI and engagement in mental health care (3 options):

- Psychiatric Diagnosis Attestation Form attesting to the individual's diagnosis, that the individual is engaged in mental health care and demonstrating mental stability (signed off by a licensed professional: LCSW, LMHC, MD, NP) OR
- Psychiatric and Comprehensive Assessment completed within the last 12 months OR
- Psychiatric assessment created more than 12 months with the latest two psychiatric notes

Referral Process



- Reach out to Living in Place Provider for the borough in which the individual resides
- Living in Place Provider sends Referral Form and Attestation Form, if needed
- Complete and submit Referral Form and documentation of SMI diagnosis and mental health care to Living in Place Provider (maybe via Attestation Form)
- Living in Place Provider sets up time to meet individual
- Living in Place Provider completes ADL and IADL screenings with individual to verify support needed to assist aging in place
- Individual is enrolled in the program



Living in Place Providers:

Bronx

Jewish Association for the Aged
(JASA)

Contact Person: Irene Tsikitas

Phone: 646-373-0145

Email: itsikitas@jasa.org

Manhattan

Henry Street Settlement

Contact Person: Edrei Conton-
Pelaez

Phone: 347-573-2179

Email: Epelaez@henrystreet.org

Brooklyn and Staten Island

Ohel

Contact Person: Gjylasfije (Julie)
Lula

Phone: 929-475-1672

Email:

Gjylasfije_Ljulja@ohelfamily.org

Queens

Breaking Ground

Contact Person: Kristina Stuart

Phone: 347-205-4321

Email:

Kstuart@breakingground.org

Data Collection and Analysis of Outcomes

Aggregate (Program-Level):

- Participant demographic data
- Analyze outcomes by race/ethnicity

Individual (Participant-Level):

- Length of time from program referral to enrollment (timely access)
- Number of visits over the course
- Length of enrollment
- Connections to care
 - Number and type of referrals made to other services
 - Successful/confirmed connections to other services

NYC Health Department Contacts

General questions regarding Living in Place may be directed to the NYC Health Department as follows:

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