NYS Health Across All Policies/Age-Friendly NY
Roadmap Report

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Foreword

Thank you to the New York Academy of Medicine for their diligent efforts in the production of the Health Across All Policies/Age-Friendly Roadmap. With changing demographics, there is no better time than the present to help New York's communities to work collaboratively in undertaking age-friendly actions that strengthen people's connections to each other, improve health, increase physical activity, and support and advance the economic environment through proactive design and future-based planning.

Since 2011, Governor Andrew M. Cuomo has worked to make New York State more livable, sustainable and equitable for people of all ages, recognizing that all sectors of government can benefit the health and wellness of residents. Over the past eight years, New York has become a national leader in creating clean, livable, and sustainable communities by pioneering multi-faceted programs that support aging in place.

This is evidenced by New York being declared the first age-friendly state in the nation in 2017 by AARP and the World Health Organization. A driving force behind this designation has been the establishment of the Health Across All Policies approach to government. Health Across All Policies calls on all State agencies to work together to improve population health, promote healthy aging, and assist localities in planning and implementing elements to create age-friendly communities. Another driver has been New York State's health improvement plan—the Prevention Agenda. This blueprint for state and local action seeks to improve the health and well-being of all New Yorkers as well as reduce health disparities. The 2019-2024 Prevention Agenda incorporates the Health Across All Policies approach, integrating healthy aging and strategies that support local communities in improving the health and well-being of their residents.

To affirm the State's commitment to age-friendly governance, Governor Cuomo issued an Executive Order on November 14, 2018. The Executive Order directs all state agencies to include the State's new Prevention Agenda priorities and the AARP/World Health Organization Eight Domains of Livability for age-friendly communities, where appropriate, into federal and state plans, as well as agency policies, procedures, and procurements.

New York is proud of all its accomplishments as a national leader on age-friendly and healthy aging. Key to the State's success has been strong partnerships with local leaders and communities across the state. This Roadmap will help New York communities consider and include age-friendly elements of wellness and community revitalization into their planning. This multi-faceted approach will make New York's communities more vibrant, desirable places to live and work.

Sincerely,

Howard A. Zucker, M.D., J.D., Commissioner, NYS Department of Health

Greg Olsen, Acting Director, State Office for the Aging

Rossana Rosado, New York State Secretary of State

# What is Health Across All Policies/Age-Friendly NY?

Informed by a framework formalized by the World Health Organization (WHO) in 2010, New York State (NYS) Health Across All Policies/Age-Friendly NY is a collaborative approach to improving the health and quality of life for all New Yorkers by incorporating health and age-friendly considerations into the activities of state and local government.

All policies affect health.

Because the spaces and places in which New Yorkers live, learn, work, play, worship, and age are shaped by public policies governing housing, land use, transportation, education, health care and other sectors, these policies can have a significant impact on health and well-being. For example, poor housing conditions, often resulting from current disinvestment in affordable housing and historic redlining, are associated with higher rates of asthma and respiratory infections. Initiatives like NYS Healthy Homes work to mitigate the effects of these policies through weatherization assistance and interventions to reduce household exposure to allergens, pests, and mold. Proximity to parks and green space is associated with increased physical activity and lower rates of obesity. Land use policy and zoning regulations, such as the Buffalo Green Code, encourage mixed-use, walkable neighborhoods that connect people to green spaces.

1 UWPHI County Health Rankings Model

https://doi.org/10.1186/s12963-015-0044-2
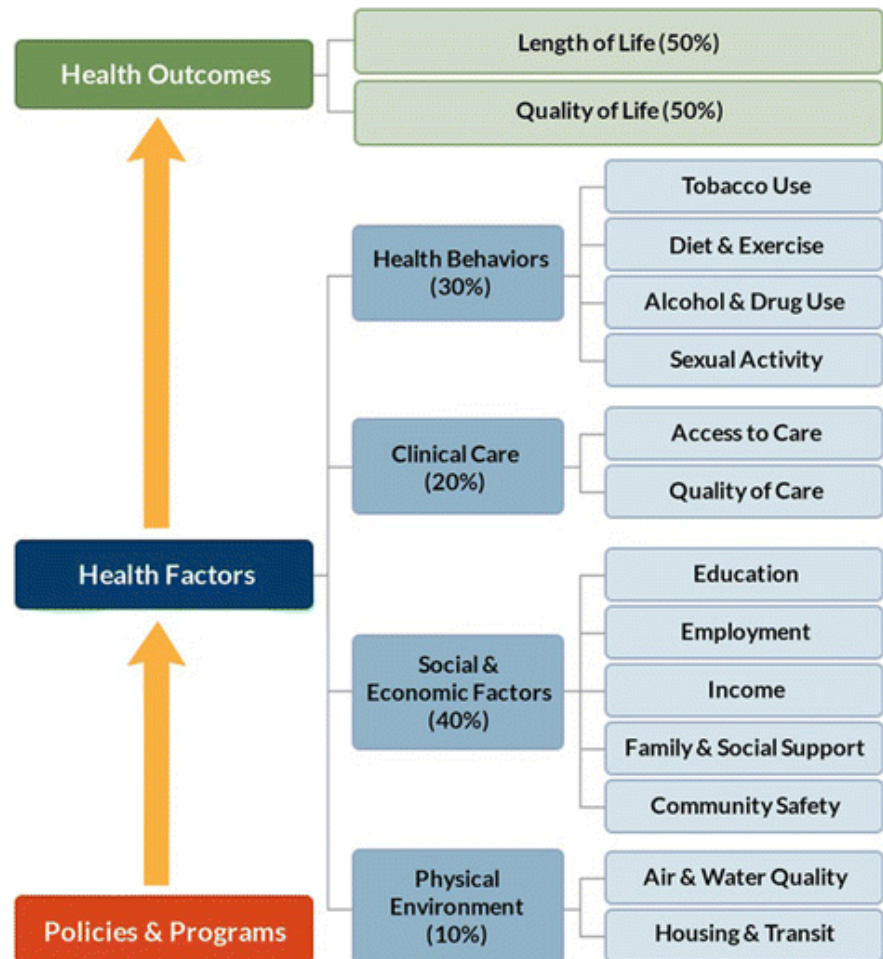
County Health Rankings model © 2014 UWPHI

Eighty percent of a person's health and well-being is determined by factors beyond health care.

While genetics and behaviors contribute to health and length and quality of life, social and economic factors, as well as the physical environment, are thought to determine 50 percent of health outcomes. These factors are collectively known as "the social determinants of health."

Healthy People 2020, the United States' 10-year national plan for improving the health of all Americans, organizes social determinants of health into five categories: 1) economic stability; 2) education; 3) social and community context; 4) health and health care; and 5) neighborhood and the built environment. People are more likely to be healthy when they experience economic stability, have access to education, have strong social and community ties, can access health and health care resources, and live in safe neighborhoods. Conversely, inequities in health outcomes often arise among groups of people who are negatively impacted by multiple social determinants, including poverty, lack of education, neighborhoods with high crime rates, and lack of access to high-quality health care, to name a few. Health Across All Policies is recognized as a leading strategy for addressing health disparities through a focus on the social determinants of health.

New York State's Approach

Signed into law by Governor Andrew Cuomo in 2018, Executive Order No. 190, *Incorporating Health Across All Policies into State Agency Activities*, "systematically considers the health implications of decisions made by all government entities regarding public policies; avoids harmful health impacts in order to improve population health and health equity; and incorporates health considerations into policies, programs, and initiatives led by non-health agencies."

This report, developed by a Steering Committee comprised of representatives of the New York State Governor's Office, Department of Health (NYSDOH), Department of State (NYSDOS), and Office for the Aging (NYSOFA), in partnership with The New York Academy of Medicine (NYAM), documents the planning, implementation, and anticipated outcomes of the "Health Across All Policies/Age-Friendly NY Initiative" and serves as a roadmap for New York State, as well as other localities considering similar initiatives.

Why Consider Age along with Health Across all Policies?

New York is one of 10 states that have formalized a commitment to Health Across All Policies through policy, program, planning, and procurement initiatives—including California, Connecticut, Massachusetts, Minnesota, North Carolina, Oklahoma, Oregon, Tennessee, and Vermont. However, New York's initiative is unique in that it emphasizes the importance of health for those in later life.

There are social and economic benefits associated with a large older population.

Of the 19.8 million people in New York State, 4.2 million (about 15 percent) are aged 60 and older, and this population is projected to increase to nearly 26 percent by 2040, a shift that will impact all regions of the State. Approximately 2.7 million New Yorkers (an additional 14 percent) are currently aged 50-59. A large older population can stimulate economic growth and bring added social and financial capital to communities and institutions, if older people are able to remain actively involved in public life.

According to a report from the American Association of Retired Persons (AARP) and Oxford Economics, in 2013, the New York "Longevity Economy"—defined as "the sum of all economic activity in New York that is supported by the consumer spending of households headed by someone aged 50 or older"—accounted for 46 percent of New York's Gross Domestic Product ($598 billion), supported 53 percent of jobs ($6.1 million) and 48 percent of employee compensation ($329 billion); and contributed to 44 percent of State taxes ($64 billion).

In addition to their economic contributions, older people have high rates of civic engagement. In New York State in 2015, 935,000 people aged 55 and older provided more than 495 million hours of service at an economic value of nearly $14 billion. People aged 50 and older represented 58 percent of all votes in the 2010 New York gubernatorial election.

Prioritizing health and civic participation can catalyze social and institutional change.

To sustain engagement in later life, social systems and institutions that were designed when life expectancy was much lower often require adaptation and improvement. To reap the possible rewards associated with population aging, New York State is prioritizing the health, well-being, and full participation of older adults by promoting state and local interventions that modify the built environment, provide social and technological supports, and facilitate ongoing participation of people as they age, even in the presence of chronic conditions and disability. For example, Tompkins County's Age-Friendly Ithaca Plan includes increasing enforcement efforts against age-based discrimination in the workplace and promoting multi-generational social opportunities to encourage a culture of respect and inclusion.

New York State Implementation

Key Components of Health Across All Policies/Age-Friendly NY in New York State

New York aims to become the healthiest state in the country for people of all ages.

In 1990, the United Health Fund ranked New York 40th among the 50 states in terms of health. Since that time, New York has risen to become the 10th healthiest state, marking the greatest improvement of any state in the nation. Through Health Across All Policies/Age-Friendly NY, New York continues to strive for better population health and to work toward health equity— "the state in which everyone has the opportunity to attain full health potential and no one is disadvantaged from achieving this potential because of social position or any other socially defined circumstance."

To drive progress toward these goals, New York State's Health Across All Policies/Age-Friendly NY approach is grounded in three overlapping frameworks: the New York State Prevention Agenda; the WHO Eight Domains of Livability; and Smart Growth Principles.

New York State Prevention Agenda
Prevent Chronic Disease; Promote a Healthy & Safe Environment; Promote Healthy Women, Infants & Children; Promote Well-Being and Prevent Mental Health & Substance Use Disorders; and Prevent Communicable Diseases

NYS Health Across All Policies/Age Friendly NY

Smart Growth Principles
Environmental Preservation; Mixed-Use Land Projects; Existing Infrastructure; Housing Options; Transportation & Access Choices; Community Character; Walkability; Economic Sustainability; and Spaces Designed for Personal Interaction

World Health Organization's 8 Domains of Livability
Outdoor Space & Buildings; Housing; Transportation; Communication & Information; Community Support & Health Services; Civic Participation & Employment; Social Participation; and Respect & Social Inclusion

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The New York State Prevention Agenda

The Prevention Agenda is New York State's innovative blueprint for state and local action to improve the health of New Yorkers and to reduce health disparities through an approach to prevention that focuses on the social determinants of health. Started in 2008 and informed by the New York State Health Assessment, the Prevention Agenda identifies priorities to be addressed by coalitions of local health departments, hospitals, health care providers, and other stakeholders, through evidenced-based strategies and promising practices, over the course of five years.

More than 40 percent of adults in New York State live with at least one chronic disease, and approximately 60 percent of deaths and 25 percent of hospitalizations are attributable to chronic diseases, including heart disease, cancer, stroke, and diabetes. Among low-income communities and communities of color, these conditions are often more prevalent and frequently associated with premature mortality. The Centers for Disease Control and Prevention (CDC) estimates that 80 percent of heart disease and stroke, 80 percent of type 2 diabetes, and 50 percent of cancer incidents could be prevented through smoking cessation, healthy eating, and physical activity.

In addition to reductions in morbidity and mortality, prevention also has the potential to generate significant cost savings. In 2008, the Trust for America's Health demonstrated that an investment of $10 per person in New York State ($190 million) in proven community-based interventions that promote physical activity, nutrition, obesity prevention, and smoking cessation would have resulted in an all-payer net savings of $1.3 billion in five years— a 7-to-1 return on investment.

The 2019-2024 Prevention Agenda priorities are: 1) prevent chronic disease; 2) promote a healthy and safe environment; 3) promote healthy women, infants, and children; 4) promote well-being and prevent mental health and substance use disorders; and 5) prevent communicable diseases. Each of these priorities has its own action plan that includes goals, objectives, and measurable outcomes that are publically reported through an online dashboard that tracks reductions in health disparities and the promotion of healthy and active aging across the State.

To improve health outcomes, enable well-being, and promote equity across the lifespan, the Prevention Agenda employs the following cross-cutting principles:

- Focuses on addressing social determinants of health and reducing health disparities
- Incorporates a Health Across All Policies approach
- Emphasizes healthy aging across the lifespan
- Promotes community engagement and collaboration across sectors in the development and implementation of local plans
- Maximizes impact with evidence-based interventions for state and local action
- Advocates for increased investments in prevention from all sources
- Concentrates on primary and secondary prevention, rather than on health care design or reimbursement

World Health Organization's Eight Domains of Livability

Developed in 2007, the WHO Eight Domains of Livability model uses a health across all policies approach to identify and address barriers to engagement faced by older people throughout the course of daily life within the following domains:

- Outdoor spaces and buildings
- Transportation
- Housing
- Social participation
- Respect and social inclusion
- Civic participation and employment
- Communication and information
- Community support and health services

Policymakers solicit feedback from older people in a given locality across the eight domains and use that feedback to make local resources, institutions, services, and amenities more inclusive for people of all ages and abilities. Notably, the provision of health care, where most aging-related attention and investment has been traditionally directed, is only one of eight domains within this framework, which suggests that aging must also become a focal point for government, architecture and design, urban and regional planning, arts and culture, education, and business.

As members of the WHO Global Network of Age-Friendly Communities, nearly 800 localities around the world have committed to using the Eight Domains in a cycle of continuous improvement that engages older populations and convenes diverse stakeholders to create more Age-Friendly environments. In collaboration with the private sector, this process can be undertaken at all levels of government. As of January 1, 2019, AARP, the WHO Affiliate for the United States, has worked to enroll 317 communities in the Global Network, 19 of which are in New York, including:

1. Albany County (July 2016)
2. Big Flats (September 2014)
3. Brookhaven (March 2013)
4. Broome County (July 2018)
5. Buffalo (November 2018)
6. Chemung County (April 2012)
7. Elmira (City) (August 2013)
8. Elmira (Town) (November 2013)
9. Erie County (February 2015)
10. Glen Cove (February 2018)
11. Great Neck Plaza (April 2013)
12. Ithaca (March 2015)
13. New York City (April 2012)
14. North Hempstead (November 2014)
15. Oneida County (September 2016)
16. Southport (October 2015)
17. Suffolk County (August 2013)
18. Thompkins County (March 2015)
19. Westchester County (April 2012)

With a written commitment from the Governor, New York was the first state to achieve Age-Friendly designation from AARP in December 2017, paving the way for Colorado and Massachusetts in 2018.

Smart Growth Principles

Smart Growth provides a framework for development that balances a community's economic, environmental, and social needs. It is defined as sensible, planned, efficient growth that integrates economic development, job creation, and quality of life by preserving and enhancing the built and natural environment.

The Smart Growth Principles, abbreviated below, can be used to evaluate whether a proposed project is likely to contribute to a community's overall well-being.

- Locate near existing development and infrastructure
- Increase the range of housing opportunities
- Protect open space and critical resources
- Create a vibrant mix of uses
- Create or enhance choices for getting around
- Design for personal interaction and walkability
- Respect the desired character of the community
- Be sustainable in the context of the community

The New York State Smart Growth Public Infrastructure Policy Act (SGPIPA) was signed into law in 2010 as an amendment to the Environmental Conservation Law. The goal of the SGPIPA is to ensure that state agencies consider Smart Growth Principles in their public infrastructure projects to support sustainable, healthy communities. As described in the Case Studies, New York State's Downtown Revitalization Initiative is a model of Smart Growth Principles in action.

In 2011, the State passed the Complete Streets Act, which goes further in specificity to require agencies to consider the convenience and mobility of all users, including pedestrians and cyclists, when developing transportation projects. A Case Study on NYS Complete Streets is also included in this report.

The New York State Energy Plan, adopted in 2015, instructs NYSDOS to develop plans that are oriented toward Smart Growth and transit-oriented design. It also calls for the leveraging of investments from the Energy Research and Development Authority (NYSERDA), Empire State Development Corporation (ESDC), Homes and Community Renewal (HCR), and the Department of Transportation (DOT) to incentivize Smart Growth planning. More recently, in 2018, four communities in Western New York were selected to receive awards from the State's Smart Growth Community Fund, which will support projects that include a mixture of historic restoration, placemaking, and business and innovation investments using Smart Growth Principles.

Strategies & Tactics for Implementation

A 2018 report reviewing Health Across All Policies initiatives in the United States identified two leading models of state-level implementation. California, Vermont and Massachusetts have taken a formal mandate approach through leadership-driven executive orders and other legislation requiring agency collaboration for health. Tennessee, Minnesota, and North Carolina have employed an informal collaborative approach that is project driven and focuses on convening diverse partners to address specific issues. To spread, scale, and codify Health Across All Policies/ Age-Friendly NY, New York State employs both formal and informal tactics to maximize cross-agency participation and build on existing initiatives and projects at the state and local level. These tactics include seating a steering committee; convening state agencies; and issuing an Executive Order.

Health Across All Policies/Age-Friendly NY Steering Committee

In his January 2017 State of the State Address, Governor Andrew Cuomo first announced that New York would strive to incorporate Health Across All Policies/Age-Friendly NY within State government activities. With support from the New York State Public Health and Health Planning Council's Ad Hoc Committee to Lead the Prevention Agenda,* a Steering Committee was immediately established with representatives from NYSDOH, NYSOFA, NYSDOS and the Governor's Office for Health Policy. The Steering Committee meets weekly and is charged with helping non-health agencies consider how their work can positively impact the health of people of all ages. Several members cited the added benefit of interagency brainstorming during these meetings that resulted in innovative ideas and shifts in perspective.

Convening State Agencies to Elevate Existing Health Across All Policies/Age-Friendly NY Work

In March 2017, the Steering Committee first convened their sister agencies to introduce the concept of Health Across All Policies/Age-Friendly NY and to identify current and upcoming projects that were already incorporating this approach, as evidenced by their alignment with the 2013-2018 New York State Prevention Agenda priorities and focus areas and the WHO Eight Domains of Livability.

The agencies were asked to complete a detailed matrix indicating which of their programs were working to improve health and promote healthy aging. Projects supporting New York State's health and aging objectives were found within 14 state agencies, including NYSDOH, NYSOFA, Office of Parks, Recreation, and Historic Preservation (OPRHP), Office of Alcohol and Substance Abuse (OASAS), Department of Agriculture and Markets (NYSDAM), NYSDOS, Office of Mental Health (OMH), Office of Temporary Disability Assistance (OTDA), NYSERDA, Homes and Community Renewal (HCR), Office of Children and Family Services (OCFS), Office of General Services (OGS), Department of Environmental Conservation (DEC), and DOT.

Across the 14 agencies, 235 projects were working to address Prevention Agenda priorities and 332 projects were working to address the WHO Eight Domains. Of these projects, 12 were selected as models of effective implementation of Health Across All Policies/Age-Friendly NY by virtue of their promoting health equity and environmental sustainability; supporting intersectoral collaboration; benefiting multiple partners; engaging stakeholders; and creating structural or procedural change. These 12 projects are highlighted in the case studies at the end of this report.

Under the leadership of the Governor's Office and the Steering Committee, this group of agencies has been reconvened twice a year to provide updates on their respective projects and to coordinate the rollout and scaling of Health Across All Policies/Age-Friendly NY across State government.

* Public Health and Health Planning Council (PHHPC) has a broad array of advisory and decision-making responsibilities with respect to New York State's public health and health care delivery system. It is charged with adopting and amending the Sanitary Code and health care facility, home care agency, and hospice operating regulations. Public Health and Health Planning Council (PHHPC) also makes decisions concerning the establishment and transfer of ownership of health care facilities, home care agencies and hospice programs. It makes recommendations to the Commissioner of Health concerning major construction projects, service changes, and equipment acquisitions in health care facilities and home care agencies. It also advises the Commissioner on issues related to the preservation and improvement of public health.

Executive Order

As previously stated, in November 2018, Governor Cuomo issued Executive Order No. 190, *Incorporating Health Across All Policies into State Agency Activities*. The Executive Order formalizes Health Across All Policies/Age-Friendly NY by requiring state agencies and departments to incorporate New York State Prevention Agenda priorities, the World Health Organization's Eight Domains of Livability, and Smart Growth Principles into planning, regulation and policymaking, and procurement, where practicable and feasible, to leverage the momentum of ongoing health-promoting initiatives and to inspire new cross-sector activity. "Planning" refers to agencies submitting plans to the federal government, as well as state plans under the "applicable statutory and administrative criteria." "Regulation and policymaking" refers to consideration of the interrelated frameworks that comprise Health Across All Policies/Age-Friendly NY in new legislation and decision-making. "Procurement" refers to contract solicitations, requests for proposals, and grant opportunities, where price is not the determining factor.

Using the mechanisms above, the Executive Order affords agencies the flexibility to leverage their strengths and partnerships to achieve one or more of the following goals:

- Improve alignment and coordination of the Prevention Agenda and Age-Friendly programs and policies across State entities and among public and private partners;
- Enable individuals to continue living in their communities in a manner consistent with their abilities and values;
- Expand opportunities for civic engagement;
- Strengthen infrastructure for home and community-based services;
- Build toward a future in which every New Yorker can enjoy wellness, and quality of life in strong, healthy communities;
- Leverage technology, innovation, research, health care, and business to support healthy aging and the work of family caregivers;
- Include healthy and Age-Friendly communities' initiatives in programs that support community design, planning, zoning, and development;
- Promote caregiver support;
- Provide cost-effective, high-quality services to residents, especially older adults, adults with disabilities, and their caregivers; and
- Increase consumer accessibility to health and supportive services.

The Executive Order requires all state agencies and departments to appoint a "Health Across All Policies/Age-Friendly NY Coordinator" to serve as a liaison to the Steering Committee and ensure compliance. Through these liaisons, the Steering Committee will provide support to their sister agencies by reviewing and providing feedback on draft regulations, policies, and procurements, where appropriate, as well as monitor ongoing agency progress in advancing Health Across All Policies/Age-Friendly NY through services, current initiatives, future needs, and methods of performance evaluation. The Steering Committee and its liaisons will also work together to develop metrics to measure the impact of Health Across All Policies/Age-Friendly NY on health outcomes and Age-Friendly environments.

Finally, the Executive Order encourages implementation of Health Across All Policies/Age-Friendly NY at all other levels of government within New York State.

Next Steps for New York State

Through an extensive review of Health Across All Policies implementation within states and municipalities across the country, researchers have identified process outcomes, including stronger partnerships, especially between health and other sectors, as evidenced by more collaboration; an "increased willingness to learn and consider the perspectives of other sectors"; and more frequent participation of non-governmental stakeholders in decision-making. Feedback from agency representatives interviewed for this report indicates progress toward similar outcomes in New York State.

More effective intra- and cross-agency collaborations and an increased consideration of health and equity were noted by nearly all of the interviewees. For example, new intergenerational and affordable housing initiatives will have co-located medical services and Smart Growth features, such as accessible green spaces, as described in the Intergenerational Housing and Vital Brooklyn Case Studies. Additionally, through initiatives such as Adventure New York and the Long Term Care Planning Project, also detailed in the Case Studies, New York State agencies are leveraging local expertise and support from community-based organizations and other non-governmental stakeholders.

To spread and scale Health Across All Policies/Age-Friendly NY, in 2019, the Steering Committee will issue a request for applications for local implementation across the State. Through a public-private partnership with The New York Academy of Medicine, co-funded by the Health Foundation of Western and Central New York and the New York State Office for the Aging, grantees will receive technical assistance to support implementation, through a 12-month peer-to-peer learning collaborative. The learning collaborative will consist of both virtual and in-person convenings, as well as the creation of a website.

The Steering Committee will also promote opportunities for additional cross agency collaboration. For example, policy actions underway at several state agencies that support NYS Health Across All Policies/Age-Friendly NY were featured at the 2019 Population Health Summit. This was the first time that local health departments, hospitals and other local community agencies learned how working with other state agencies could support local community health improvement efforts.

In the future, New York State can look forward to system level policies, practices, and funding to support health and aging across all sectors, as well as strengthened partnerships and cross-agency relationships that reinforce collaboration and support more effective governance. To measure success, the development of process and outcome metrics, as well as accountability structures, will be a central task of the Steering Committee. Through improvements to the physical and social environment, new programs, greater efficiencies, and collective action, Health Across All Policies/Age-Friendly NY aspires to improve the health and quality of life for residents of all ages across New York State.

Case Studies

New York State Healthy Homes Pilot

"It is exciting to come to the table and work jointly despite different focus areas."– NYSDOH representative

Brief Statement of Evidence Base

Poor housing conditions are associated with health conditions such as asthma and respiratory infections. Research demonstrates positive impacts on the health of children with asthma when multi-trigger, multicomponent health interventions that also address housing defects and support sustained environmental changes are made in the home. Research also demonstrates the positive health impacts of energy efficiency and the benefits to residents of the associated cost savings.

Initiative & Key Agency Partners

The New York State Healthy Homes Pilot is a joint pilot project between NYSERDA and two offices from NYSDOH —the Asthma Control Program from the Office of Public Health and the Medicaid Redesign Team from the Office of Health Insurance Programs. The project also engages health care providers through Managed Care Organizations (MCOs).

Description

Using an integrated, comprehensive approach, the New York State Healthy Homes Pilot aims to reduce avoidable emergency department visits and hospitalizations; improve overall health, safety, and comfort; reduce carbon emissions; and provide energy cost savings for residents. The project will target high asthma burden regions of NYS to provide a coordinated suite of interventions, namely (1) home-based asthma services including in-home asthma self-management education and identification of environmental asthma triggers to be addressed through integrated pest management, provision of vacuums, asthma-friendly cleaning kits, mattress and pillow covers, and other asthma management tools; (2) energy efficiency, services such as assessment of possible health and safety issues, education, air sealing, insulation, HVAC improvements, and in-home education; (3) home injury prevention tools and services such as smoke alarms, carbon monoxide alarms, stair repair, and bathroom grab bars; and (4) training to support clinical providers, intervention service providers, and MCOs implementing the work at the local level through community-based partnerships. The pilot supports the State's overall transition of the Medicaid program's health care delivery system to a Value-Based Payment (VBP) model which expands opportunities to address the social determinants of health (SDH) impacting the root causes of poor health outcomes. The pilot project will contribute to the evidence base supporting innovative care models designed to address substandard housing as an SDH, improve quality of life and health outcomes for individuals and families, and reduce avoidable health care costs, consistent with the goals of Medicaid payment reform.

Process & Progress

Although NYSERDA and NYSDOH have coordinated in the past, it was primarily for purposes of research and information sharing. The New York State Healthy Homes Pilot is the first co-developed initiative between the two agencies to maximize their impact on health, energy, and housing. Data sharing was a primary challenge in the

pilot design because of variations in protocols and requirements; legal teams from both agencies engaged to unify an approach for ensuring security of pilot participant data. The planning process also involved extensive outreach and input from stakeholders to inform the project and the evaluation criteria. Workload and scheduling complexities aside, both agencies have invested staff, time, and resources into the project which has contributed to a shared sense of satisfaction and purpose. A representative from the NYSDOH said, "It is exciting to come to the table and work jointly despite different focus areas."

Sustainability is a key feature of the New York State Healthy Homes Pilot. This is a forward-thinking initiative that supports an expanded reach of residential energy efficiency, strong health outcomes, and Medicaid payment reform goals. The New York State Healthy Homes Pilot has been developed in tandem with the transition to VBP for Medicaid services so that it supports efforts that are already underway by payers, health care providers, and community-based organizations. NYSERDA was particularly keen on identifying a way to fund energy efficiency to reduce energy burden among low-income New Yorkers by demonstrating the cost effectiveness of weatherization and home modifications to the health care system through a reduction in emergency room visits and hospitalizations for asthma. (Energy Burden is a ratio that measures income to energy utility costs.) The NYS Healthy Homes Pilot was inspired by Governor Andrew Cuomo's Health Across All Policies initiative and supports goals laid out in the New York State Roadmap for Medicaid Payment Reform. It is an incredible step toward cross-sector collaboration, where services that support energy efficiency, for example, improve outcomes in the health and human services domain, which is exactly the type of model and collaboration that VBP or payment reform seeks to facilitate. The pilot was also designed to address New York State Prevention Agenda priorities related to the built environment and chronic disease prevention and management.

The New York State Healthy Homes Pilot was planned with a rigorous evaluation component to demonstrate the value and impact of integrating residential energy efficiency, health and safety measures, and comprehensive health services within the VBP framework. For the NYSDOH, the pilot will establish protocols and practices for embedding functional bidirectional referral systems across clinical and community settings to support the coordination of services designed to address the SDH. At a granular level, the reality of the partnerships necessary for such a multicomponent intervention is a tremendously challenging logistical undertaking. As a continuation of this work, NYSERDA is looking at how to build health considerations into the Authority's work across sectors. The planning, implementation, and evaluation of NYS Healthy Homes will be accomplished over three to four years. The pilot is expected to launch in 2019.

Advice for municipalities considering a similar project

"Build in the time to develop relationships. A project like this is more than the sum of its parts. It takes a group of people with varying expertise. Cooperation and collaboration are key." – NYSERDA representative

"Don't give up. A lot of work goes into the startup and the planning, but it is extremely rewarding. Bringing the right partners to the table is vital. Even though agencies have different perspectives, you can find opportunities for alignment to achieve shared goals." – NYSDOH representative

Advance Care Planning Initiative

"Health Across All Policies continues to help us look outside the box about who we should be approaching to work with. It has made us look outside the agency if we can. Even internally, we are branching out and considering how other departments can interact with what we are doing." – NYSDOH representative

Brief Statement of Evidence Base

Research shows that advance care planning, defined as having an advance directive, durable power of attorney or having discussed preferences for end-of-life care with a next-of-kin, is associated with improved quality of care at the end of life, including increased use of hospice and fewer in-hospital deaths.

Initiative & Key Agency Partners

The Advance Care Planning Initiative led by the Aging and Long Term Care Team at New York State Department of Health (NYSDOH), charged with finding innovative policy solutions for aging and long-term care to improve quality of life for New Yorkers. In this intraagency project, the team partnered with other NYSDOH bureaus and offices including Emergency Medical Services, Legal, and the Office of Minority Health.

Description

The 2018 Governor's State of the State address committed NYSDOH to launch an educational campaign on advance care planning to encourage New Yorkers and their health care providers to have conversations about end of life care preferences and to encourage people to utilize advance care directives, such as Health Care Proxies, Living Wills, Do Not Resuscitate (DNR) orders, and Medical Orders for Life Sustaining Treatment (MOLST). The Advance Care Planning Initiative also includes a redesign of the relevant section of the NYSDOH website with the goal of helping providers and the public learn more about advanced care planning, why the conversation is important, and how to broach it. The initiative's target population is the public over the age of 18—all of whom should have a Health Care Proxy in place. In addition to improved quality of care at the end of life, advance care planning can impact retirement, financial planning, health care, and safety and security issues for New Yorkers. "Our goal is to encourage people to have these conversations now rather than engaging in crisis management due to lack of planning," said a NYSDOH representative.

Process & Progress

The team has been researching best ways to encourage people to talk with their health care providers about advance care planning. To start, a Request for Information was solicited from hospitals, community-based organizations, and health care providers to understand the current landscape of advance care planning in New York State. To collect and aggregate the best available resources, the team focused on developing relationships and communications with partners at the local level, utilizing a bottom-up/top-down approach. They also reached out to other states and municipalities that have instituted similar initiatives.

New York State has very low hospice utilization rates—ranking 48th out of 50 in the US in 2015. This is one metric that the team will be tracking to determine whether an impact has been made. Achieving buy-in from the health care sector is another key strategy of this initiative. The initial launch of the initiative was to employees of the Department of Health to encourage them to have end-of-life conversations with their families and loved ones. The educational initiative is ongoing.

Advice for municipalities considering a similar project

"Think outside the box. There are so many moving parts and pieces that come together. You think a health system is a hospital but then you have insurance companies and community organizations, home care—health is not just about medical." – NYSDOH representative

Adventure New York

"Having a personal connection to our mission that includes getting people healthy keeps you going."
—DEC representative

Brief Statement of Evidence Base

Proximity to parks and green space is associated with increased physical activity and lower rates of obesity. Some evidence suggests that increasing access to parks and green space may lead to higher rates of participation in physical activity and improved physical fitness among community members.

Initiative & Key Agency Partners

Adventure New York is an initiative by DEC. The New York State Department of Environmental Conservation (DEC) is the state agency charged with protecting natural resources. The agency is the largest land-owner in New York State. In addition to regulating and conserving natural resources, DEC promotes recreational use of public lands and green space statewide. The DEC works with OPRHP on this initiative.

Description

Through Adventure New York, DEC is improving recreational infrastructure and facilities to make them more accessible and user-friendly, and hosting programs to encourage New Yorkers to get outdoors, get active, and try something new. To leverage resources and broaden outreach, DEC has collaborated with OPRHP, community-based organizations, local outdoor clubs, and municipal agencies on projects including the First Time Camper Program (a guided weekend camping experience for families), Outdoors Day (introductions to archery, fishing, and other outdoor recreation), and I Bird NY (to encourage everyone, regardless of age or location, to try bird watching). This ongoing initiative was launched in 2017 with the opening of the Five Rivers Environmental Education Center in Delmar, New York.

Process & Progress

Launched in 2017, the initiative is pushing the agency in a new direction, focused on user experience, proactive public engagement and partnerships. Because outdoor recreation crosses several divisions at DEC, improving intragency communication has been an important tactic. With the new focus on partnerships, DEC spent considerable effort achieving buy-in at the local and municipal levels. That coordination has also led to leveraging resources with private sector partners, particularly regarding outreach and promotion. Adventure New York is one way that DEC is being more proactive with the public.

Adventure New York is expected to expand access to healthy active outdoor recreation, connect people with nature and the outdoors, protect natural resources, and boost local economies. The majority of DEC's land is open and does not have formal entrances, so tracking usage can be challenging. An evaluation of the First Time Camper program revealed that 100 percent of participants planned to go camping again, and many already did before the summer ended. DEC has a goal to bring their programs to new and diverse populations, including older adults, multi-generational families, and urban and suburban communities. At nearly a dozen Outdoors Day events across the State, DEC reached nearly 3,000 New Yorkers in the inaugural year of the event. Through Adventure New York, new partners have contacted DEC about working together and providing input on recreational facility improvements.

Advice for municipalities considering a similar project

"Be persistent and be positive. Implementing initiatives like Adventure New York can be both challenging and rewarding. Having a personal connection to our mission that includes getting people healthy keeps you going. There is never a shortage of ideas, but resources are finite. Partners can help fill in gaps when we are not able to do so."
– DEC representative

Vital Brooklyn: Affordable Housing RFPs

"Do not diminish the importance of community input. Empower the hopeful recipients of the project to define what health means to them—whether that means increasing access to healthy foods, exposure to daylight, a medical facility on the first floor, or something else. It is imperative that they are at the table at the outset."
– HCR representative

Brief Statement of Evidence Base

Decisions made about community development are directly related to the health and well-being of community residents. This growing awareness has led developers, planners, and health professionals to embrace a more holistic approach to building neighborhoods. Research shows that the design, maintenance, affordability, location, and community setting of housing stock can impact physical and mental health.

Initiative & Key Agency Partners

Vital Brooklyn is a multi-agency project with eight integrated areas of investment: Affordable Housing; Community-based Health care; Open Space and Recreation; Healthy Food; Education; Economic Empowerment; Community-based Violence Prevention; and Resiliency. The project represents a new model for community development, health, and well-being. The New York State Department of Health (NYSDOH) and HCR are leading the effort in cooperation with ESDC, and OTDA, OMH, and OPRHP. They are also working in partnership with local hospitals and health care organizations, elected officials, and community residents. These State investments in affordable health care and housing are part of a comprehensive, holistic, place-based strategy to improve wellness for the entire community.

Description

Central Brooklyn is one of the most disadvantaged areas of the State in terms of rent burden, chronic disease, limited access to healthy foods and opportunities for physical activity, high rates of violence and crime, high rates of unemployment and poverty, as well as inadequate access to high-quality health care and mental health services. Through Vital Brooklyn, which began in 2017, new affordable housing is being built on hospital land with co-located health and wellness amenities and Age-Friendly features. This development is subject to a Request for Proposal (RFP) review process that includes priorities put forth by the residents of Central Brooklyn. This is the first time that HCR has conducted RFPs for affordable housing prior to commencing development. Vital Brooklyn aims to improve the quality of life for residents of Central Brooklyn by creating more opportunities for health and well-being and increasing access to safe, affordable rental housing.

Process & Progress

In the year prior to the announcement of Vital Brooklyn, NYSDOH held community listening sessions regarding health care in Central Brooklyn. In response, the Governor's Office encouraged assembly districts to convene community advisory committees to put forth their individual priorities at the start of Vital Brooklyn. Some of these priorities included maximizing the number of units, affordability for all, accessible green space, and creating housing for populations such as older adults, people with disabilities, and people who were formerly homeless or incarcerated. The development proposals were scored and weighted heavily toward addressing community priorities and green spaces.

This is a new collaboration and a notable example of many agencies working together toward a place-based approach to Health Across All Policies/Age-Friendly NY. Office of Recreation Parks and Historic Preservation (OPRHP) provided input on how to best incorporate green space. Offices of Temporary and Disability Assistance (OTDA) and OMH contributed to the planning and delivery of supportive services. Empire State Development Corporation (ESDC) is facilitating the development of the largest affordable housing site, which is being financed by HCR. The Governor's Office and NYSDOH have provided strategic leadership and played a significant role in the project development and implementation.

Achieving buy-in from stakeholders and other agencies was a key strategy for Vital Brooklyn. State agencies are not always accustomed to focusing on very specific geographic areas. Using data and research to emphasize the benefits and necessity of incorporating wellness-related amenities into affordable housing has been useful in the project's cross-agency communication efforts. The New York State Health Department (NYSDOH) and HCR have worked hard to ensure they are meeting the needs of the community while accomplishing the goals of the program.

Although Vital Brooklyn is targeted in one geographic area, there are hopes that the community-informed RFP process, if successful, will be incorporated into future work around the State. Additionally, New York State now acknowledges health as both a driver and an outcome of housing policy and development.

Advice for municipalities considering a similar project

"Obtain leadership support from the highest levels and have ongoing communications among state agencies. Assemble a team with a common goal. Have ongoing and incessant communication with the local community. The earlier that begins, the easier the collaboration and more seamless the project will be. Clear communication and effective leadership are key." – NYSDOH representative

Intergenerational Housing Initiative

"I am hopeful that this will be the first of many types of intergenerational communities that the State of New York will undertake to improve the lives of individuals and communities. This is one of the most exciting things I have done in my career." – OCFS representative

Brief Statement of Evidence Base

Neighborhoods are comprised of both physical and social features that shape health behaviors, contribute to stress, and, ultimately, impact health outcomes. Research shows that people who live in places with more social cohesion, as indicated by high levels of social inclusion, social capital, and social diversity, are more likely to report good health.

Initiative & Key Partners

The Intergenerational Housing Initiative will design and establish a planned community of older adults, families that commit to adopting children from foster care, and individuals with intellectual and/or developmental disabilities in mixed income housing with onsite support services. The initiative is a cooperative effort by OCFS, NYSOFA, Office for People with Developmental Disabilities (OPWDD), HCR, the developer, Beacon Communities Development LLC, and two service providers, Northern Rivers Family of Services and the Center for Disability Services.

Description

The goal of the Intergenerational Housing Initiative is to create a supportive, multigenerational, affordable housing community that encourages independent living, aging in place, and mutual support. The site will be in Guilderland, Albany County, located within walking distance to a library, YMCA community center, and public transportation. The project is expected to include 65 housing units, including 80 percent for adults aged 55 and older, 10 percent for foster parents moving toward adoption, and 10 percent for persons with disabilities. Residents will be encouraged to provide service to the individuals residing in the community each week, such as helping with grocery shopping, snow shoveling, changing lightbulbs, or providing homework help. The anticipated benefits for both older adults and residents with development disabilities include a reduced risk for social isolation and increased ability to live independently. The project also strives to provide increased stability and social cohesion to support foster children and their families.

Process & Progress

This health-supportive model of mixed income housing draws from the World Health Organization's Eight Domains of Age-Friendly Communities as well as Smart Growth Principles such as walkability, spaces designed for personal interaction, and transportation access. Developing cross-sector relationships and buy-in with other agencies and stakeholders in the town of Guilderland have been key. The interagency team held meetings to synchronize their messaging to improve the quality and utility of local media stories covering the project. The team also met with local leaders to showcase the project and anticipated outcomes ahead of any requisite approvals. They also cite the helpfulness of having a public-private partnership with an experienced senior housing developer. Although this team does not have any specific projects other than Intergenerational Housing planned, one participant noted that gathering to work from a Health Across All Policies/Age-Friendly NY perspective has created alignment among human services agencies and deepened insights into the needs of the various populations they serve.

In addition to overall well-being, health status, and social cohesion, some of the factors and metrics under consideration for evaluating the success of the initiative include education and adoption outcomes for foster children; maintenance of independence, reduced need for assisted living among older adults, and delayed transition to nursing care; the ability of adults with developmental disabilities to gain employment; and the prevalence of community members providing assistance to each other.

Advice for municipalities considering a similar project

"Identify everyone who should have a role in your project, invite them early and often, and make sure you have really clear lines of communication about roles and responsibilities. Hold yourself accountable to the targets you set. Don't give up and don't take no for an answer. At every impasse, consider what it will take to keep moving forward and get the project done." – OCFS representative

"High-level support is important but it also critical to engage county and local-level stakeholders to utilize their expertise and coordinate resources." – NYSOFA representative

Age-Friendly Health Systems Initiative

"The Health & Age Across All Polices framework has helped us look beyond the Department of Health to think about who we should be approaching to work with on projects. Even internally, we are branching out to see what other divisions are doing and how it interacts with the work we are doing." - NYSDOH representative

Brief Statement of Evidence Base

During hospital stays, many older adults face complex health issues, resulting from multiple chronic conditions or negative effects of drug interactions, that can be compounded by the social and emotional experience of aging. Research and practice show adopting the tenets of an Age-Friendly Health System—improving patient satisfaction, reducing unnecessary medication, addressing mental health needs, and ensuring opportunities for mobility to reduce fall-related injuries among older adults—can lead to fewer and shorter hospital stays, fewer adverse drug events, cost savings, and better health outcomes.

Initiative & Key Agency Partners

New York State's Age-Friendly Health Systems initiative is an evidence-based patient-centered care model that aims to achieve better health outcomes for older adults through a partnership between NYSDOH, the Institute for Health care Improvement (IHI), and the John A. Hartford Foundation. According to AARP, 90 percent of New York residents surveyed say they want to retire in New York. Age-Friendly Health Systems strives to help ensure they receive the best care as they age.

Description

With the baby boom generation entering older adulthood, there are currently over 7.3 million people over the age of 50 in New York State, and this number is projected to grow past 8.2 million by 2040. In Governor Cuomo's 2018 State of the State address, he expressed the goal of having at least half the State's health systems designated as Age-Friendly by 2023. An Age-Friendly Health System is one that improves quality of care and decreases negative

outcomes for the older adults that are served. The Age-Friendly Health Systems Initiative uses the evidence-based 4M Model of Care:

- What Matters: align care with special health outcome goals and care preferences;
- Medication: ensure that all medications are necessary and do not interfere with what matters;
- Mentation: prevent, identify, and treat depression, dementia, and delirium across settings of care; and
- Mobility: ensure each older adult moves safely every day to maintain function and ability to do 'what matters.'

Over the next five years, the Age-Friendly Health Systems team, led NYSDOH, will educate hospitals and other health care organizations about what it means to be Age-Friendly and support the implementation of the "4Ms" Framework of Age-Friendly Care.

Process & Progress

Implementing an awareness strategy was the first phase of the project. The New York State Department of Health (NYSDOH) created webpages with resources and webinars to make information about the initiative publicly available. Engaging the first wave of stakeholders has been relatively easy given the high level of interest in the project and a demonstrated eagerness to participate. However, NYSDOH foresees buy-in being a bigger issue in the second year of the project when they begin branching out to organizations that may not have an established interest in Age-Friendly health solutions.

Since it began in August 2018, 15 New York State organizations have joined the IHI National Action Community to pursue recognition as an Age-Friendly Health System. Emergency departments can also elect to specifically pursue geriatric accreditation through the American College of Emergency Departments. Using a Plan-Do-Study-Act model for improvement, the Action Community will pilot the effort and help develop measures to scale up over the next five years to include more health care providers. The New York State Department of Health (NYSDOH) is currently working to secure funding to establish an NYS-specific Action Community.

Advice for municipalities considering a similar project

"It is important to think outside the box. There are so many moving parts and pieces that need to come together. For example, you might think a health system is just a hospital, but there are also insurance companies and community organizations that need to be considered as part of the system of providing health care. You need to consider whether the health care system is interacting with homecare and caregivers as well." – NYSDOH representative

Aging Innovation Challenge

"It's not just the Department of Health that needs to focus on issues related to health – we need to bring in different sectors. We approached this project with a different mindset than we've used in the past and forged partnerships to try something new." – NYSDOH representative

Brief Statement of Evidence Base

Recent research has demonstrated that design contests can be an effective way to solicit innovative solutions for health problems, while also raising awareness of issues and expanding community engagement. Developing new products may help older New Yorkers to remain in their communities as their needs change.

Initiative & Key Agency Partners

The Aging Innovation Challenge (the Challenge), a product design contest aimed at inspiring young people to develop new ideas to support the health and daily activities of older adults, was a partnership between NYSDOH and crowdsourcing technology company HeroX, in collaboration with the State University of New York (SUNY) and ESDC.

Description

Governor Cuomo's 2017 State of the State address included a proposal to leverage technology to accommodate the needs of New York's aging population. The Challenge incentivized young people to design creative new products for independent living to support older adults and their caregivers. The Challenge targeted students from New York's colleges and universities, including students from the SUNY system. HeroX assisted in designing the challenge, managed the crowdsourcing platform, and played a role in advertising the Challenge and attracting submissions for the competition. The ESDC and FuzeHub, a non-profit organization that supports manufacturing partnerships, provided guidance for prototype development. Thirty-five eligible entries were received, and out of 24 semi-finalists, five teams were selected by representatives from NYSDOH and NYSOFA to showcase their work at the SUNY Global Center in New York City. Two winners from Corning Community College and Syracuse University were selected to share a $25,000 prize equally. The winning inventions were GripM8 (pronounced Grip Mate), a hand-held device that allows users to better grip eating utensils, writing implements and personal care items, and Pneu-Strength, an inflatable seat cushion, a mobility device that provides help moving from sitting to standing positions.

Process & Progress

The Challenge marked the first time NYSDOH, ESDC, and SUNY worked together with a crowdsourcing organization like HeroX. The project required a cross-sector communications strategy to make the goals and benefits clear to each of the partners, who were coming from very different backgrounds and perspectives —economic development, technology and manufacturing, crowdsourcing, and education, as well as health and aging. The project team embraced a forward-thinking mindset and developed memos that focused on alignment and common interests to move the project forward. Engaging diverse partners in new ways also came with some inherent complexities. Different goals and visions, for example, made alignment across sectors sometimes challenging. Coordinating schedules around competing priorities to meet the tight project deadlines was difficult at times. The team remedied these issues by keeping all partners regularly updated and maintaining flexibility with one another to achieve their objectives.

At the conclusion of the contest, New York State Health Commissioner Howard Zucker said, "This year's event showcased some of the best young entrepreneurial minds New York's college and universities have to offer. It was an honor to name GripM8 and Pneu-Strength as the co-winners of the Aging Innovation Challenge for their creative and far-reaching solutions to improving the quality of life of aging New Yorkers and their caregivers."

Advice for municipalities considering a similar project

"It is important to understand that it always takes longer than you expect. I attribute a lot of our success to getting high level buy-in from state agencies and having a really organized project manager on staff." – NYSDOH representative

Long Term Care Planning Project

"Through this project, NYSOFA and NYSDOH hope to further recognize the role of home- and community-based long-term care services in helping older adults maintain autonomy and stay better connected to their communities."
– NYSOFA representative

Brief Statement of Evidence Base

Over half a million people currently use long-term care in New York State; 84 percent are aged 65 and over, and 40 percent are aged 85 and over. By 2030, it is projected that more than 5.3 million New Yorkers will be over the age of 60. One study found that of people turning age 65 now, 70 percent will need assistance with activities of daily living for an average of three years (3.7 for women and 2.2 for men).

Initiative & Key Agency Partners

The Long Term Care Planning Project is an initiative led by NYSDOH and NYSOFA.

Description

Long-term care under this project refers to those services that support individuals and their caregivers in the home, in the community or in a facility. They are a mix of social and medical services that assist with activities and instrumental activities of daily living, such as bathing, dressing, eating, shopping, preparing meals, bill paying, etc., as well as home-delivered and congregate meals, adult day services, health insurance counseling, benefits and application assistance and transportation services.

New York State's Long Term Care Planning Project (LTCPP) will inform policymakers about the projected and desired needs of older adults in New York by examining the State's long-term care system. The LTCPP includes a comprehensive public survey and five public meetings on topics sourced from survey data and stakeholder input. Recommendations from older adults, caregivers, health professionals, and others who are involved in long-term care will be used to determine the most cost-effective, evidence-based interventions to include in a strategic Long Term Care Plan to shape policies and programs over the next decade.

Process & Progress

Although the collaboration between NYSOFA and NYSDOH builds upon previous cross-agency work, the LTCPP is a new way of exploring the issues and engaging the public. The 2018 statewide community survey gathered information from service providers from the health and social service sectors, users of services and caregivers. The survey also served as an outreach tool to help achieve buy-in and announce the project.

Throughout 2019, NYSOFA and NYSDOH will coordinate resources to co-host public LTCPP meetings on the following topics:

1. Aging and Long-Term Care Services – Improving Coordination, Communication and the Consumer Experience;
2. Evidence-Based Interventions in Aging and Long-Term Care;
3. Family Caregiving Support;
4. Analyzing, Expanding and Supporting the Long-Term Care Workforce; and
5. Financing Alternatives to Public Programs, including Medicaid.

The LTCPP is innovative in its incorporation of non-medical home and community-based long-term care services to address the social determinants of health for older adults. This focus on improving social determinants of health aligns with the agency goals of both NYSDOH and NYSOFA. As a result, the cross-agency Long Term Care Planning Project has not encountered any implementation issues.

The LTCPP is expected to benefit caregivers and older New Yorkers by improving long-term care policies and programs, enhancing workforce capacity, promoting caregiver support, and increasing access to cost-effective, high-quality services that enable individuals to continue living in their communities in a manner consistent with their abilities and values.

Advice for municipalities considering a similar project

"Acknowledge that creating 10 year policy recommendations can sometimes be challenging when stakeholders are focused on the present and near term—and include this in your plans." – NYSDOH representative

"Your outreach should amplify the voices and concerns of patients, families, and communities."
– NYSOFA representative

Downtown Revitalization Initiative

"Downtown revitalization is more than quality of life amenities and community beautification . It is the future of local and regional economic development." – NYSDOS representative

Brief Statement of Evidence Base

Many small and mid-sized cities have struggled because their local economies were built around a single industry; when those companies left, their economies were devastated. While it is still critically important to attract major employers to replace these lost jobs and create a new economy, there is also an emerging and complementary shift toward place-based approaches to revitalization that support jobs, businesses, and quality of life. Indeed, many companies are locating in or near vibrant downtowns because that is where their talent pool wants to live.

Initiative & Key Agency Partners

Governor Cuomo's Downtown Revitalization Initiative (DRI) has provided $100 million annually for downtown community development and revitalization in all regions of the State. Each year, 10 communities are selected (one in each region of the State) to receive $10 million each to develop a Strategic Plan that identifies projects to be funded with the award and then for project implementation. The program is coordinated by NYSDOS, which houses the state planning operations, in close partnership with DHCR as well as ESDC; several other agencies participate in project implementation. More specifically, the DRI is a project of the Office of Planning, Development and Community Infrastructure, one of four divisions at NYSDOS under the umbrella of the Office of Community Transformation, focused on cross-cutting inter-disciplinary work that supports sustainable and equitable community development.

Description

The Downtown Revitalization Initiative (DRI) is transforming downtown neighborhoods into attractive and walkable communities for residents of varying ages, incomes, abilities, mobility and cultural backgrounds. The DRI award criteria incorporates many of the Eight Domains of Livability, Smart Growth Principles, and opportunities to improve public health, consistent with the New York State Prevention Agenda. Applicants are also expected to leverage other public and private investments to catalyze more projects and continued, sustained revitalization.

To apply, communities submit narrative-based applications to the by Regional Economic Development Council (REDC) in which they are located. Regional Economic Development Councils (REDC) are multi-disciplinary regional entities comprised of appointees from business, academia, local government, and non-governmental organizations. Governor Cuomo established the REDC in 2011, five years before the 2016 launch of the Downtown Revitalization Initiative. These regional councils allow the State to be flexible and responsive to the unique and diverse needs of each region of the State.

Once the REDCs select the 10 regional winners, NYSDOS and HCR provide planning support to develop a strategic investment plan and identify and develop key catalytic projects. Tremendous emphasis is placed on public outreach and engagement during the planning process to ensure community support for the plan and its component projects. Toward that goal, the projects and strategies are ultimately chosen by a Local Planning Committee, composed of community leaders and stakeholders. (Note: Downtowns that do not receive a DRI award can still receive priority funding for downtown revitalization projects through other state grant programs.) This place-based, community-informed approach to planning seeks to capture the market of both millennials and baby boomers, who both have shown a preference for living in downtown areas.

Process & Progress

The DRI is not just a big money drop. Starting with the application process, municipalities are encouraged to take stock of their achievements in everything from Age-Friendly communities to innovations in storm water management, and to share their narrative vision for the future. The lead agencies provide support, advice and technical assistance on strategic planning, procurement, and implementation to ensure that projects support one another and the overall community vision for community revitalization. This holistic, integrative approach creates synergies among housing affordability, job creation, recreation, infrastructure and other areas, and finds opportunities to leverage outside investment.

The Department of State, HCR, and ESDC remain involved throughout the DRI implementation to assist with developing relationships, achieving buy-in, and coordinating resources. The New York State Department of State (NYSDOS) is the lead agency for many of the public projects, HCR works on housing efforts, and ESDC leads economic development and job creation plans. Other state agencies pitch in with technical assistance and resources along the way. As part of their Downtown Revitalization Initiatives, communities must also establish local planning committees with stakeholders, civic leaders, business owners, activists, and artists. Hence, working partnerships and relationships are formed both locally and regionally.

Advice for municipalities considering a similar initiative

"Communities applying for DRI should demonstrate that they've conducted significant public outreach and engagement on the projects and strategies they wish to advance. Public input and buy-in are critical to the program's success." – NYSDOS representative

Complete Streets

"Complete Streets are streets for everyone." – DOT representative

Legislative Foundation and Initiative

The New York State Complete Streets Act (Chapter 398, Laws of 2011) was signed into law by Governor Cuomo in 2011. Pursuant to the statute, consideration must be provided for complete street design features for projects undertaken by DOT, municipalities and public authorities that receive both State and federal funding and/or are subject to DOT oversight. Specifically, any State agencies, municipalities or public authorities subject to the Act are required to consider convenient access and mobility on roadways by all users, including, pedestrians, bicyclists, motorists and public transportation users through the use of Complete Streets design features in the planning, design and construction of projects.

Key Agency Partners

The New York State Department of Transportation (DOT) works directly with the New York State Association of Town Superintendents of Highways (NYSAOTSOH); the New York State County Highways Superintendents Association (NYSCHSA); the Cornell Local Roads Program (CLRP) and individual municipalities on the implementation of the Act as well as the development of local Complete Streets initiatives. The New York State Department of Transportation (DOT) also partners with NYSDOH, the New York State Education Department (NYSED) and the NYSDOS on supporting Complete Streets efforts through programs such as Creating Healthy Schools and Communities and the Downtown Revitalization Initiative. In addition, DOT developed checklists, tools and information to guide and support State and locally-administered projects that are subject to the law.

Defining Complete Streets

Complete Streets are streets for everyone. They are designed and operated in a way that enables safe access for all users, including pedestrians, bicyclists, motorists and public transportation users of all ages and abilities. There is no singular design method for Complete Streets projects; each one is unique and should conform to its community context. A Complete Streets project may include: sidewalks, bicycle lanes or wide paved shoulders, special bus lanes, comfortable and accessible public transportation stops, frequent and safe crossing opportunities, median islands, accessible pedestrian signals, curb extensions, narrower travel lanes, roundabouts, and more. In evaluating specific Complete Streets activities, project sponsors should assess potential alternatives early in the planning process to properly consider appropriateness, safety and costs for a specific location.

Process & Progress

In support of Complete Streets project sponsors, DOT has developed guidance, checklists, plans, toolkits, and funding information to support municipalities in their efforts to improve streetscapes and provide transportation options at the local level. This information may be found on DOT's Complete Streets website. This information is updated regularly to include community best practices.

The New York State Department of Transportation (DOT) cites working across sectors and with partners as the cornerstone of successful Complete Streets initiatives. A representative from NYSDOH remarked that schools are essential partners because they advance and demonstrate the value of Complete Streets, in terms of walkability, pedestrian safety, and providing ways to support physical activity. The Creating Healthy Schools and Communities grant opportunity administered by NYSDOH focuses on increasing opportunities for physical activity as inactivity is a risk factor for almost every chronic disease.

The New York State Prevention Agenda 2019-2024 recommends the adoption of Complete Streets resolutions, policies, or ordinances to support active transportation and recreational physical activity for people of all ages and abilities. More than 130 municipalities across the State have adopted Complete Streets policies, with more considering such policies in the future.

Advice for municipalities considering a similar initiative

"Establishing both local level and cross-sector partnerships are critical to the success of implementing Complete Streets policies. A variety of street-level changes can be implemented in one to three years, whereas more significant projects may take five to 10 years for implementation to be complete." – NYSDOH representative

Vital Brooklyn Food Box

"We are learning how schools and health care systems can work well with the existing food programs around New York State. These cross-sectoral partnerships are needed, replicable, and timely." – NYSDAM representative

Brief Statement of Evidence Base

When healthy food is inaccessible, people may opt for unhealthier alternatives that are often high-calorie and lack nutritional value. Diets consisting of these kinds of foods are associated with higher rates of health issues like obesity, cardiovascular disease, and Type 2 diabetes.

Initiative & Key Agency Partners

Vital Brooklyn is a multi-agency project with eight integrated areas of investment: Affordable Housing; Community-Based Health care; Open Space and Recreation; Healthy Food; Education; Economic Empowerment; Community-Based Violence Prevention; and Resiliency. The project represents a new model for community development, health, and well-being. Through Vital Brooklyn, NYSDAM is working to improve access to healthy food by investing $1.2 million in four key initiatives: 1) Mobile Markets Grant Program, 2) Food Insecurity Screening Pilot Program, 3) UFT Community Learning School Youth Markets, and 4) a Food Hub feasibility study. These initiatives provide economic benefits to New York State farmers and food businesses and health benefits to New York residents. NYSDAM's key partners in the Vital Brooklyn initiative include GrowNYC, the United Federation of Teachers (UFT), and SUNY Downstate Medical Center (SUNY Downstate).

Description

Mobile Markets Grant Program

To address the high rates of chronic disease and food insecurity among residents in Central Brooklyn, NYSDAM is making healthy food more accessible and available. In 2018, NYSDAM's Mobile Markets Grant Program funded five organizations to operate 31 mobile farmer's markets located in 12 Brooklyn neighborhoods. Through local partnerships, the mobile markets concentrate outreach specifically to customers from public housing, senior centers, Women, Infants, and Children (WIC) Program offices, and shelters to provide affordable, fresh, locally sourced food to these high-need populations.

Food Insecurity Screening Pilot Program

The goal of NYSDAM's Food Insecurity Screening Pilot Program is to integrate food security assessments into the broader health care system. Through community input, food insecurity among older adults was identified as a priority for Central Brooklyn. In this pilot program, older adults are screened for food insecurity during routine visits to their health care providers. As needed, they are given direct benefits to purchase fresh food at farmer's markets and referred for dietary counseling. NYSDAM is initially partnering with health care providers at SUNY Downstate and hopes to expand the program further.

UFT Community Learning School Youth Markets

TheNew York State Department of Agriculture & Markets (NYSDAM) has set up Youth Markets at UFT Community Learning Schools (CLS) to teach students how to manage and operate farm stands—providing them with entrepreneurial skills and increasing access to fresh, local food for community residents. UFT Community Learning Schools (CLS) are public schools with embedded services for health, safety, and other needs as well as extra-curricular programming that serves the needs of the community. Through a partnership with Grow-NYC and the UFT, NYSDAM is operating Youth Markets in 12 Central Brooklyn schools. During the winter, which is off-season for the markets, the CLS participants run a food box program, in which consumers pay wholesale prices for a box of freshly packed seasonal produce, each week. These Food Box program sites are open to anyone within the local community of the school and individual sites will accept Supplemental Nutrition Assistance Program (SNAP) benefits to purchase boxes.

Food Hub Feasibility Study

NYSDAM has awarded funds to a local community-based organization to conduct a feasibility study regarding the potential of a food hub in Central Brooklyn to improve the food supply chain infrastructure and increase access to healthy foods for residents and local businesses.

Process & Progress

NYSDAM's efforts were developed in tandem with the community and locally elected officials through the Vital Brooklyn community engagement process. The agency notes that local partnerships have been critical to the successful planning and implementation of these projects and initiatives. UFT was instrumental in the identification of school sites to host the youth markets. NYSDAM's Food Hub Feasibility Study was developed out of community recommendations to use healthy food as a platform for economic development and workforce capacity. Engaging health care professionals and educators in addressing food insecurity is fairly new for the agency but something they hope to learn from and replicate in other high-need communities around New York State.

Advice for municipalities considering a similar project

"Integrating community input is extremely helpful for understanding the needs in a certain area. One of the most important takeaways from this process was that broad, undifferentiated services are not always able to serve everyone we are trying to reach. Instead, specific populations, like seniors or perinatal mothers, need targeted programming to have their needs adequately met." – NYSDAM representative

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