

Forum on Senior Housing Development Options for Brookline
April 7, 2013

Informal notes by Joanna Baker

Moderator Mike Jacobs - 6 low income sr. buildings 400 units - HSL 700 mixed income units - 163 units in ASL

Natural Occurring Retirement Communities - NORC

Amy Schectman – Jewish Community Housing for the Elderly (JCHE), 30 years affordable housing in public and private sectors. Public Housing and rental assistance in Commonwealth of MA - leverage and attract new funds for restoring public housing. Was a VP at Hebrew Sr. Life - permitting Newbridge. Was first economic development officer in Brookline.

Challenges of doing affordable housing - Better medical, care, housing - has a point of view, congregate housing w/ supports is infinitely better quality of life. The nomenclature is to encourage to 'age at home'. Will take that on.
Informal/inlaw, roommates, etc. plus nursing home, assisted living and additional residence for seniors

\$500/day for nursing home / high cost buy in for CCRC, and for adult day health

Sr. housing can start at 65, JCHE starts at 62
Max incomes at JCHE - because are subsidized
Variable, deeply subsidized rents - based on own income, your rent will grow or fall so never paying more than 30%. Must be up to 50-80% of area need and income. 95% earn less than the Boston Area Median Income - very little money then can live decently if keep rent at under 30%.

Newer government programs fix at amount imagine could pay. Rent of \$1K rent - fixed, no ongoing subsidy, no chance to change rent

Some housing is service plus, housing only - BELIEVES IN service plus model – JCHI considers itself a failure if residents have to move to another facility.

Newest building is Framingham - 50 variable, 40 modestly subsidized, market units - affordable/not aligned with market - \$2,500/month includes 2 meals a day, utilities, services. Even if you don't qualify for subsidy.

1200 apts, 6 buildings, want some in Brookline
Uses very service intensive model - 12 social workers - 90% of residents have regular weekly contact with services coordinators so they get what they need.

Raise over \$1M year to fund programs and services with a great return for society.

How does she know it's working -

Longer Lives

Avoid/postpone nursing home altogether

increased health/reduced cognitive decline via reduced social isolation

PROTECT PRIVATE INCOME/BENEFITS

efficiency of service provision

9.25 years of avoided nursing home care. Deliver a whole range of services in their apartments, government gives \$15K per year. If at a nursing home \$105K per year or MORE.

NO-ONE WANTS TO GO TO A Nursing Home!!! With rich services, social interaction, improve both quality of life and are saving government money.

Almost all people on upper average of the long-lived came in their 70's. You live longer the earlier you go into supported housing.

Harvard School of Public Health - study - dementia - rate of decline if you live w/ daily social interaction is less than half of cognitive decline if live on your own.

Volunteerism -- Of residents, over 25% volunteer, they have 20+ volunteer programs, boosts local economy. Also, Resident Service Coordinators can help protect private income eg. abuse from annuity company, etc. If you pay a home care worker at a JCHE residence, you get 8 hours of service, not the 5.5 hours of service you get if you use a private home-health-care provider when you live in your own home.

Big administrative burden - operate with 17 sources of funding, so have to do reports to all of them.

Donors, foundations, home delivered meals (margin), direct programs from the government. Offer computer centers where promote intergenerational interaction, offer dining and housekeeping, in many languages, fitness/wellness programs, "caring choices" is homecare in addition to regular homecare.

Funding Challenges- Taking Affordable Care Act dollars from Medicare for congregate housing for the elderly to save Nursing home dollars.

Continuing Care Retirement Communities (CCRC's take a lot of land

Property Taxes

Retain residents who are lifers in our communities - better connections, keep same doctors

Assurance and contact for residents whose kids live here

Benefits - shopping, dining, volunteering

Jim Coughlin - CEO of Northbridge Companies - partner at NE based Senior Housing company. Structuring and financing new projects. 27 assets in their senior housing portfolio. 180M of assets. 8 facilities with 139 units, plus 299 units under development.

Shares Amy's perspective that service-supported housing makes a difference in lives of seniors. Local market knowledge of needs and partner with communities. Assisted Living facilities offer housing, hospitality, assistance with activities of daily living (ADLs) - bathing, dressing, meals, dementia care

Excited about level of services - brain gym. Most residents pay privately for care. Some low-income residents receive subsidies through Group Adult Foster Care. With very few beds subsidized, partner with local community to have scholarship programs. 110 units in Burlington - affordable with local housing authority, manage Burlington residents, 10 beds only.

Some residents draw on the Veterans' Administrations Aid & Attendance benefit to pay for their care.

typical customer is 83 year old female - baby boomers include more men, more couples, solving a h.c. need for families. Senior Green, STAR program, Eat Fresh, Eat Local. Partner with local food growers, seasonal menus, great response from residents - can specialize. Cisco for larger national providers. STAR { sharp thinking active residents} , art therapy, socialization, voluntarism, choral groups, examples of activities.

62 unit Needham dementia care - specialized training to associates - unique program w/ dementia care. Pubs! 60% come from local communities and the rest move to be near adult children.

He is pitching a project in Brookline - do not have a cookie cutter model - Needham took over a disputed model - didn't want to look at institutional building - front is small and built into a hill. Public-private partnership Plymouth. 188 skilled nursing facility had gone bankrupt - town petrified- 85 unit assisted living and Alzheimers community.

85-110 residents is their goal.

Access to public transportation

parking for at least 40 cars

water/sewer hook up of their own so town not responsible.

High construction costs and availability of land are barriers.

Dorothy Kelly Gay - vp government relations Hebrew Senior Life - assist HSL on public policy local, state and national levels. Advocates for Sr. healthcare policies. Former mayor of

Somerville. 2003 - present at Hebrew Senior Life. Nurse and health care administrator for decades. Formerly at Hebrew Rehab.

In Brookline, HSL owns 600+ senior/disabled housing units that are a mixture of affordable, moderate, low, very low income and market rates. HSL quality housing for seniors - encourage to age in place w/ supportive services. Research evidence is available that supports their model.

Health care, housing, research, teaching. Roslindale.
Do not encourage LTC for tenants - provide at housing site

Day health at Roslindale and Brighton. Post Acute Rehab in Roslindale. First choice advantage. All 2nd year students interact with seniors at Harvard Medical School.

Largest provider based geriatric research facility in US
Best NIH funding in country.
Top 10%
Exercise, dementia, etc.

New paradigm is moving away from Nursing Home. Community Based services
Supportive housing.

Jack Satter House Revere, 266 apts. have ocean view all subsidized
Simon Fireman Community Randolph 168 apts. subsidized
260 bed health care center at Newbridge

Multi-generational at Center Communities Brookline -
Reinventing Long Term Care
Technology improving quality of life and quality of care
Serving entire community
Very green

Community - Meals, transportation, personal care, housekeeping, educational/activities., care management, social services, 24 hour emergency response and health care services.

Center Communities of Brookline: 1972, 1974, 1977 construction. Purchased in 2002, designed as independent housing with services. Funding sources: HUD, MA housing and Town of Brookline.

100 Center St. average age is 90 - 30 or 40 100 year olds, 20% are 70-79, 57% are over 80
214 units at 100 Center St.

Studio, IBR, 2BR
40% market rate

Moderate 11%

Low 22%

Very low 27%

Much more affordable than assisted living

Clinic - fully staffed at 100 Center St, own transportation, 4 licensed social workers on staff, tenants create programming

Expect a Senior Tsunami

Coolidge Corner is ideal for seniors to age in place

Size and scale for financial feasibility - current zoning very restrictive. Entire block required for development.

HSL is ready to bring services to the community to keep Brookline residents aging in place in own homes. Home Care in the next year.

James Seagle - Rogerson Communities President - joined 1973, 19 communities, 4 adult day programs

IF you want to get old, get rich. As a country, we have turned away from affordably housing with services programs. The trend now is to keep people at home until they need skilled nursing.

At end of Carter Administration - started to fall apart. 2007-2011 HUD Admits need for affordable housing went up by 50%. Losing ground in keeping people housing. If don't have housing, won't have services, health, socialization.

His focus on middle income (by request of panel organizers) – Those with incomes under 30K can get rent subsidy and Medicaid to pay for medical bills (not covered by Medicare). IF seniors have incomes over 30K they get zero - they are hurting the most. Those in the moderate income group will need subsidies.

STRENGTH TRAINING is most important exercise for elders.

100 Units affordable in Roslindale. Pond home in Wrentham. Was 50% occupied when they came in. Own 40 acres - created - Community at Pond Meadow developed on site of farm house/rest home - buy in was \$175K, now entry fee model where get 95% of money back. Clustered housing units. 800 dollar monthly fee for one bedroom apts. Does not include services. Allows middle income people to sell house and move in for quite some time and purchase services when become necessary a la carte.

Spring House - manages them. Upscale. Needed better management. Sophia Snow house - Roslindale. Rest home needed to modernize and serve middle income people. Took property

and built half a facility and moved existing residents into it while renovated other half. Buy in of \$225K. Monthly fees are \$890; Affordable to middle income people. 66 Independent Living apts. and a bunch of rest home beds which provide medications.

Assisted Living facilities very expensive. People wait too long to move into Assisted Living. \$7,500 monthly fee because need more care. These models let people come in when much more able and live in community for a longer time. Neighboring residents support one another. Independent Housing neighbors have cooked and taken care of the cat, etc. informal network that provides supports when return from hospitalization.

Elizabeth Carleton - home for aged couples, Walnut & Columbus in Roxbury. Section 202 - lawyers get lots of work. Hale House on Marlboro St. - old line facility - needy population that doesn't fit elsewhere. Walnut House at Carleton housing formerly homeless mentally ill people.

Hong Lok House in China Town building 75 units of HUD and tax credit housing and adult day program.

Last model of middle income housing – marriage of an old time rest home/nursing home facility - goal of servicing middle income people. Will have 200 units moderate income independent living. Village model, private rooms, open into community space. Like a family with staff staying there. A community.

Are not paying attention to elder care. 1973 it was booming with geriatric research and funding.

If don't turn attention back to this there will be a huge amount of displacement and heartache. Elders falling into homeless population. The situation is criminal. In Brookline will have to think bigger to do affordable & middle income housing for seniors.

Lifestyle housing - Jack Dolly - northland residential MBA/Master of Science in real estate. For Sale Housing. Not providing senior care. Dartmouth/Hanover alums and faculty to stay/return to the community ages 50+ who didn't need services. Leverage Hanover community - Dartmouth Hitchcock medical center. One mile away and on college self-funded bus line - fell into senior housing. Move from primary home with good health, mentally cogent with first floor living and doorways and kitchens/bath w/ accessibility for wheelchairs. Helped customize independent living units at Newbridge.

Belmont Woodlands - townhouse living. What age restriction? Not needed. Product that is age targeted by design. Brookline has no land. McLean Hospital in Belmont had land that wealthy people could downsize into. Elevators in half of floor plans. Add in-law/help suites. Attract folks in 60s

Ruthann Dobek – Director, Brookline Council on Aging, MSW

Home care
Employment
Diversity
Intergenerational
Defined need for senior center and got it funded

Be Brief, open it up for discussion = demographics to go back to - Over 10K seniors live here. An increase from 2000 - 2010 - increase of over 10%. Only a small percentage is in specialized housing. The rest live independently. Growing demographic. Stagnation in funding/development a big challenge for policy makers. Buildings of Center Communities of Brookline - last constructed 1977. Brookline Housing Authority 190 Harvard St. also built over 20 years ago. Last built Assisted Living is Epoch. Goddard House is over 20 years old. Lost rest homes and nursing homes in that time.

In her 30 years at the Council on Aging we have gone backwards in housing programs. The vast majority of seniors are living independently in their homes. Need to be creative. Brookliners know what community services the Senior Center provides. Needs: Specialized housing, transportation, health care, social workers, home makers, bringing resources from personal care to socialization at Senior Center, enhance by our Library, cultural institutions, etc.

New Council on Aging perspective - BCAN - Brookline Community Aging Network. Financing challenge and one killer for homeowners is property taxes. Concerned about the impact on low-income seniors of increasing property taxes. Participants in the Senior Property Tax Work-Off program take to \$1K off their property tax by providing town with services. Need more subsidies.

Repair/Referral - concern for handy people, plumbers and electricians, etc. Vet and screen them all.

Challenge to be creative and address growing needs.

Another theme - myth in gerontology - if parents make one move, that will be it. A continuum/spectrum. People can now be elderly for 25 years or more. Housing needs may change in that time. Brookline has among the lowest percentage of multigenerational family units in commonwealth of MA. Policy wise w/ zoning or creativity to create more in-law apartments for home care - property tax relief for multi-generational families. Need to pull all speakers to look at programs and look outside the box in terms of community services.

A final issue to be addressed is the need for long term care. Nursing Homes - some folks will always exist, at the end of life, who need skilled nursing. Bringing nursing-home services to single family home units. Co-housing is another model that may be of interest to some seniors in Brookline Seniors wanting to live close to their grown children. New models: Siblings moving back in together after widowhood. Friends, co-housing, etc. Need to be

addressed. Urges policy makers, citizens, fellow housing experts, gerontologists to be creative and innovative to look at these issues for the next generation.

Moderator: no new housing except ASL's in last 25-30 years. None of the other actors besides Hebrew Senior Life are active in Brookline.

How can they help the town?

Amy would love to be in Brookline. Mecca for a good place for Seniors to live. Space/Land and service intensive models. Also (controversial) NON PROFIT DEVELOPER - Raise money for recycling right back into building. Can leverage private philanthropic programs/dollars. Challenge is length of time and investment to put together a project in Brookline. Projects are better are because of the extensive public process. GREAT PUBLIC PROCESS, on the other hand, it is LENGTHY, and developers who do not have deep pockets cannot afford to keep properties during a lengthy project review process. Amy has worked for Town of Brookline. Preserved character of neighborhoods and public process have perfected AND support development side so they can learn to be responsive faster.

Town will need to invite Hebrew Senior Life in and partner to make on new development on Center Street work.

James Seagle - was advised by Evelyn Greenma - predecessor of Ruthann - "don't go there" it will take you forever and you'll never get anywhere. Real Estate development is 90% politics, 9% site control and 1% everything else.

A nonprofit needs \$8M to get to closing before building. To include nonprofit that has that kind of money, Brookline has to reduce the politics - very plain, clear and supportive.

Dorothy - when Hebrew Senior Life bought buildings that are Center Communities - own the block from Williams to Fuller. 104 units at 202 housing at 112 Center St. Bought House as part of package so that could explore building on that site one day in the future. Create more community space for all of Brookline. Zoning restrictions make that impossible at this time. Don't have deep pockets - restrictions gives them pause. If Brookline made changes in zoning - have good relationship - Would love to develop something, Can't do it because of financial feasibility.

Jack Dawley for profit perspective. Had to hold Belmont property for 5 - 6 years before he could build it. 1.5M out of pocket. Inclusionary component = affordable component. Can be difficult to find affordable people in some instances.

Jim Coughlin - 3 year battle in Newburyport - This is a great community. Lots of people interested in investing here. Attracting investment and showing clarity about what will be created at the finish line.

Discussion

Linda Jason - Two synagogues whose memberships have dropped -Kehillath Israel or Ohabei Shalom – should be encourage to do a senior living development.- Amy - Challenge with synagogues or churches - lay leadership - length of time from intention to ability to deliver is 10-20 years. Time Delay - decision making in a synagogue rests with hundreds of people who are as diverse as town meeting.

Dorothy agrees with Amy –

Eunice White TMM pct. 2 - North Brookline is the most densely populated area in the state (?) There is little available land for construction on the scale being discussed. She proposes converting Dexter Park to senior housing. Acquisition strategy.

Looking at Expiring use properties. Town out in front and inviting a developer to do that. Renovation costs are extraordinary in converting buildings when they built for different purposes. Seller who was mission driven with HSL. Won't find that many owners who are going to be in that situation. 12M to put in community space before replaced wiring, etc. Hundreds of thousands to bring them up to code.

Creativity - even if didn't have Hebrew Senior Life or Jewish Community Housing for the Elderly but independent housing at Dexter Park with support services, advertising it for seniors - co-housing. NORC. Small apartment buildings are senior focused. Creativity in this direction. Doesn't have to be structured Sr. Housing with all the amenities.

Joseph Ross, formerly TMM 12, proposes taking Hancock Village by eminent domain for senior housing. - Developer wants to develop without worries about impact on the school system - can take by eminent domain

Betsy Shure Gross - pct. 5 TMM, funding a challenge - a conversation about number of seniors - 6-7K school children, fearfully discussing overrides. Over-rides for seniors and children to be innovative and creative. Deal with two problems at once.

Gerard Badler - campus continuum - College affiliated - visited one at U Michigan and Rochester Institute of Technology - provide seniors with auditing of college classes, socialize, find volunteer outlets on and off campus. Visiting with the communities. Consortium of local colleges and universities. Cultural institutions in the area. Lasell College in Newton uses that model.

Same problem - site the program. Community has to accept the density. Lasell village is in Newton. It's a good model.

Subsidy for affordable housing or to keep housing affordable is BIG. Need State and National Support.

Free policy change - town housing trust and state - favors family housing over senior housing. Think about free up existing pots of money by not disfavoring senior housing.

Public funding - 3% of budget used to be for affordable housing. It went into prisons and now down to 1%. Need to put state feet to the fire. Mass Housing MHFA has no housing production program. HUD has no housing production program. Seriously delinquent in getting back on that horse.

Regis tried to follow Lasell model without success.

Regina Frawley, TMM South Brookline - few services, highest percentage of people over 60 living in S. Brookline. Want to age in place. Infrastructure in S. Brookline. Homes that can be purchased. Bournemouth needed relief from Town for long term use on their land. Underused building for senior center.

Income test - don't have to pay \$50 for trash, \$50 for water meter per quarter. Social Security COLA won't cover actual COLA. "earned entitlement" Reduce fees that hit seniors.

Debbie Katz lives near high school. She is not a Town Meeting member. She came because she has an elderly mom in Brookline. As a baby boomer, she starting to think ahead. Was excited to hear about how to think proactively. How to continue a commitment to this conversation to raise awareness for people who are beginning to think about what they will do.

Interest in public policy - GBIO - collaboration between faith groups to influence policy.

Homeowner in Salisbury Road area - zoning of single family homes. Cannot make additions or modifications. Adult child or caregiver have apt. there. Roger Blood of Brookline Housing Advisory Board - accessory units, worked to bring an article to Town Meeting to bring authorized accessory unit to Warrant. AARP and policy support. Seniors might move into accessory and have another family subsidize them/socialize them. Live-in assistance. Measure got a lot of support. Fell a little short of 2/3 in TM. With some support based on sessions like this, we may be able to make that pass this time around.

Edie Brickman TMM precinct 4 - no votes came because the proposal was not sufficiently thought through. She wonders what would happen to the accessory unit when the property changed hands.