



Patricia Caldwell, left, and Nancy Harvey

During fiscal year 2020 SPOP provided behavioral health care to older New Yorkers during a period of unprecedented urgency. In March of 2020, in response to the Covid-19 outbreak, the New York State on Pause Executive Order, and emergency public payor coverage of telehealth, SPOP transitioned immediately to virtual connection. We trained our staff and clients in the necessary technology and protocols, provided equipment to support remote work, and rolled out telehealth with no interruption of service. The agency completed more than 21,000 client sessions agency-wide, a 15% increase over the previous fiscal year; 7,700 of those sessions were for telehealth. We provided direct professional services to over 900 adults and related support to 1,000 older adults and caregivers.

At the peak of the Covid-19 pandemic, when all older adults were confined to home and considered at highest risk, our clients exhibited elevated symptoms of anxiety, depression, grief, suicidality or substance misuse, and SPOP clinicians provided

psychotherapy, psychiatry and other services to address their needs. We fast-tracked the most urgent cases, connected clients to emergency meals or housing assistance, provided orientation and support for telehealth technology, and partnered with hospitals and medical providers to coordinate support for older adults with a goal to keep them safe and healthy.

Client response to telehealth has been overwhelmingly positive, as measured in surveys and anecdotal feedback. We learned that it is easier for our most frail clients to engage in therapy when they can remain safe at home, without the challenges of inclement weather or transportation. For many isolated adults the

weekly call from SPOP was the only opportunity to express complex emotions and work toward long-standing treatment goals. For those coping with the stress of a crowded apartment, the sessions were a private and confidential exchange with a trusted professional. For those who had lost a loved one, we offered free online bereavement support groups and a safe place to grieve. We provided services via both video/computer and audio/telephone connection; the experience highlighted the divide between those who have internet access and those who do not, and the telephone connection enabled us to serve a diverse spectrum of older adults in the community.



Nancy Harvey marked 30 years of leadership of SPOP while working remotely.

Highlights of the year included:

- The City Department for the Aging/Thrive NYC awarded SPOP a *three-year renewal contract* in support of nine clinic satellite offices at designated senior centers in Manhattan.
- Following a comprehensive application process, SPOP received approval from New York State Education Department's State Board for Social Work as an *approved provider of continuing education* for licensed social workers.
- We strengthened our relationships with *key community partners*, including New York-Presbyterian and Mount Sinai hospital systems, the NYC Department for the Aging, Thrive NYC, SAGE, and dozens of medical and aging services providers.

- We established four new clinic satellite locations at high-need senior centers, including GRIOT Circle, a center for older LGBT adults of color, located in downtown Brooklyn.
- In a client survey 76% of respondents reported *greater ability to manage a crisis*.
- We offered *eight bereavement groups*, including online groups during the pandemic and special groups for those who had lost a friend or loved one to Covid-19.

This year we faced the greatest challenge in SPOP's 40-plus years of serving older New Yorkers. Thanks to the generous support of individual, foundation, corporate, and government funders, the thoughtful leadership of our Board of Directors, and the diligent and creative work of our staff, SPOP was able to meet that challenge and provide professional care that kept older adults safe. Thank you.

Nancy Harvey, LMSW CHIEF EXECUTIVE OFFICE

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The SPOP behavioral health clinic offers community-based services including individual, couples or group psychotherapy; psychiatry; assessments; and processing of all inquiries and referrals. Based on at our central office, the clinic also offers appointments at satellite sites located throughout Manhattan and in Downtown Brooklyn and in the home for clients with a physical or psychiatric disability.



Our staff is comprised of psychiatric social workers, psychiatrist. psychiatric nurse practitioner, and intake peer workers; many are proficient in a second language. Clinicians are all trained in treating older adults and have subspecialties in cognitive behavioral therapy, dialectical behavior therapy, family/couple therapy, narrative therapy and other modalities. Intake staff respond to some 1,500 referrals and inquiries each year from hospitals, senior centers, aging services providers, and individuals and family members. We screen incoming clients for general health, behavioral health disorders, and specialized situations such as caregiver distress or substance misuse. We also assess clients for social determinants of health such as housing, meals, social isolation or economic insecurity, and we connect them to other service providers to ensure that their concrete needs are met in tandem with behavioral health care.

Community programs focus on a network of senior centers and aging services providers that host licensed clinic satellite locations. As the Manhattan provider for the ThriveNYC and NYC

Department for the Aging program of Clinicians in Older Adult Centers, our staff screens older adults, leads educational programs, and provides on-site therapy and referrals at nine centers. We provide LGBT-supportive therapy at the Edie Windsor SAGE Center in Manhattan and GRIOT Circle, a senior center in Downtown Brooklyn serving older LGBT adults of color. At VISIONS at Selis Manor. we offer specialized psychotherapy for older adults managing vision loss. This year our network of Community Programs and satellite locations grew to 18 sites in nearly every neighborhood of Manhattan and in Downtown Brooklyn.

In March of 2020 all Clinical Services. Community Programs and Intake

transitioned to virtual connection or telehealth during the Covid-19 pandemic. In response to a statewide state-at-home order, SPOP immediately researched options for telehealth services, equipment needs, connectivity licensing, and reimbursement procedures, and shifted to telehealth with no interruption of service. We provided ongoing training to all staff, purchased equipment needed for remote work, and assessed our client population to determine the appropriate mode of service (video or audio-only) for each client.

During 2019-20 we:

- Completed over 16,300 professional services, including 6,500 telehealth sessions.
- Provided services to 760 clinic clients
- Processed 1500 referrals and inquiries
- Assessed 240 individuals for social determinants of health
- Offered several groups during the year including:

Women in Transition – for women in recovery from substance use and recovering from depression

The Support Group – for clients adjusting to disability or coping with isolation

Peace of Mind Group - for women mastering anxiety

Taking Care – a support group on managing distress during the Covid-19 outbreak, offered through DOROT's University Without Walls

We measure outcomes based on ability to engage in treatment, progress toward goals, and feedback through confidential surveys. Last year:

- More than 70% of survey respondents reported *decreased or stabilized hospital emergency room usage*
- 76% of survey respondents reported *increased ability to manage a crisis*
- 97% of clients made *progress toward treatment goals*

MW, AGE 82, IS A BILINGUAL (SPANISH-ENGLISH) WOMAN. AT INTAKE SHE PRESENTED AS CONFUSED, anxious, fearful, and isolated. During intake it became apparent that she had not eaten for over 24 hours and had no food at home.

The bilingual intake worker immediately called 311 with MW on the line to request emergency meals from GetFoodNYC. The worker also contacted a nearby senior center, arranged for home-delivered meals, and connected her to a case manager for ongoing support. At the same time, MW completed the intake process, enrolled in the clinic, received training in telehealth technology, and is now receiving services via telehealth.

MK, AGE 75, IS A DIVORCED WHITE MALE WITH POOR PERSONAL CARE HABITS. He suffers from intense depression, panic, suicidal thinking, alcohol overuse and inability to cope with the ups and downs of relationships. He tends to be controlled by others including partners and roommates. At the start of treatment MK had little or no self-confidence or sense of self-worth and poor personalcare habits. He has been at SPOP for 5 years; treatment has focused on using behavioral changes to improve self-esteem. He has made a huge turnaround and recently handled a relationship break-up with without decompensating. MK sees the SPOP nurse practitioner regularly and is being tapered off medications as his anxiety improves.

MK is an example of success. His selfcare has improved radically and he now adheres to regular appointments with his primary care doctor. He is sober, attentive to his personal cleanliness, grooming and exercise, and is continuing treatment by telehealth during the Covid-19 outbreak.

CT, AGE 75, IS AN EXAMPLE OF AN INTAKE SITUATION THAT REQUIRED TIME AND EXPERTISE above and beyond what we generally experienced pre-Covid. At intake he presented as highly anxious about Covid-19, completely isolated, and agitated. During the case opening assessment it became apparent that he was in throes of addiction and misuse of alcohol and prescription drugs. The LCSW/Case Opener conducted a crisis intervention and was successful in helping him develop a safety plan and accept assistance in securing appropriate help. The LCSW facilitated expedited admission to a hospital inpatient center, where he received treatment.



The Museum of Modern Art Prime Time program presented on-site art-making workshops for our participants and invited a small group for a museum tour.

The Personalized Recovery Oriented Services (PROS)

program provides group-based rehabilitation support to older adults diagnosed with serious mental illness. Our program is the only one of its kind in New York State and is defined by three key features:

- we focus on recovery and rehabilitation, new concepts for many adults whose lives have been defined largely by their illness
- although the program is open Monday-Friday 9:00-3:00, participants are encouraged to attend on a part-time basis and also participate in community-based activities and programs
- participants play an active role in the design and structure of rehabilitation groups – which means they gain skills in cooperation, planning and communication

The PROS population is marginalized on multiple levels. For most participants this is their first experience in a recovery-oriented setting after a lifetime of care in a "maintenance" environment. We use a collaborative program model that focuses on goal-setting and acquisition of life skills needed to achieve individual goals.

We offer 50-60 groups each week (in Spanish and English) as well as psychiatric services, medication management, communal meals, and integration with medical care. This fiscal year we served 71 adults from throughout Manhattan, the Bronx and Brooklyn.

All PROS groups and sessions transitioned to telehealth in March 2020. We learned immediately that this presented unique challenges. Our PROS participants needed to remain connected as a community – groups are a central feature of the program structure – and yet most had little access to technology, the internet, or telephone service with unlimited minutes. Our staff huddled to find creative solutions to keep our participants engaged, which included:

Scheduling groups for a time when a family member or aide is available to help

the participant dial in for a call or enter a zoom meeting

- Holding the weekly community meeting by conference call to ensure maximum participation
- Looping recovery counselors into prescriber appointments to make certain the participant has no connection problems during the session
- Setting up three-way calls to support participants and teach them how to navigate automated telephone answering systems at medical offices or entitlement programs

A handful of participants came in as needed to receive medications and staff were available during program hours to provide emotional and practical support. The result was that participants remained safe, with no increase in our hospitalization rate.



We expanded our staff to include part-time psychiatric nurse practitioner, which means we now have prescriber coverage three days per week. This has meant greater integration of overall medical care and fewer absences for off-site appointments.

We hosted visitors from the hope & grace initiative for a holiday party.

spoke above a whisper, and was reluctant

Highlights of the year included:

- We coordinated with staff at Lighthouse Guild to transition eight adults into PROS after the closure of their Continuing Day Treatment Program. Five of these participants have full vision impairment or are partially-sighted and we welcomed the opportunity to adapt our program to meet their needs.
- We hosted a workshop with Asphalt Green's Skills in Motion program to encourage our participants to move and exercise more.
- We expanded our menu offerings thanks to the culinary training and skills of our new kitchen aide.
- We continued our daily community meetings, with many meetings now led by PROS participants rather than staff.
- We hosted an intern from Touro School of Social Work.

YT IS A 65-YEAR-OLD WOMAN WHO HAS LIVED IN NEW YORK MORE THAN 30 YEARS. She first visited our PROS program in early 2019 and engaged in multiple conversations with staff before she decided to enroll last May. She grew up in Haiti and reported that she had felt depressed as a teenager and young woman but never knew how to discuss her feelings or seek help. Even now she struggles with her family relationships, and she speaks about how difficult it was to live in a culture where mental illness was a taboo subject.

Unlike most PROS participants, this is her first engagement in mental health treatment. During her early months at PROS she suffered from acute shyness, rarely

to engage with staff or other participants. Working in individual meetings with her recovery counselor, YT started to gain confidence, speak up in groups, and make friends. She spoke about wanting to serve as an advocate for others who were disenfranchised by mental illness. When a recent PROS graduate visited and spoke about having become a certified peer specialist, YT applied for the highly competitive peer training program. She was accepted and has been attending the program, continuing her studies remotely during the Covid-19 outbreak. We expect that she will graduate in the months ahead and will soon be employed as a peer specialist in another program.



SPOP's *Bereavement Support* program offers non-sectarian group support for adults of all ages from throughout the region. We receive referrals through word-of-mouth, faith-based organizations, hospitals, and social service agencies.

We offer 10-week bereavement support groups throughout the year, all led by trained volunteers. The groups meet in the afternoon or evening at our conference room, and we offer one-on-one telephone support as needed. The program is fully coordinated with the clinic, with a seamless process to refer bereavement participants for therapy or other services as appropriate. All program volunteers receive supervision.

This year we offered eight ten-week groups, six for spousal/partner bereavement; one for non-spousal loss; and one for anyone who had experienced loss relating to Covid-19. We shifted all groups to a virtual connection in March of 2020

A total of 71 individuals participated in the Bereavement Support program.

Training

SPOP has a long-standing program of training in topics at the intersection of aging and behavioral health, with modules offered to social workers and other staff of agencies that serve an older population. In 2019, our program achieved a major milestone when the New York State Education Department's State Board for Social Work recognized SPOP as an approved provider of continuing education for licensed social workers. We have developed five training presentations:

- Hiding in Plain Sight: Substance Use in Older Adults
- Identifying Mental Illness in Older Adults

- Loss and Bereavement
- Recognizing and Working with Suicidality in Older Adults
- Working with Clients with Challenging Behaviors

This year we expanded those offerings to include materials focused specifically on loss and grief associated with the Covid-19 pandemic, and we shifted all offerings to virtual connection in March of 2020. We provided extensive training to staff and volunteers at the senior centers that host our clinic satellite sites.

A grant from the Manhattan Borough President supported staff training at designated sites, which we provided this year at SAGE, DOROT, and Lantern Community Services.



SPOP extends gratitude to the following elected officials, government agencies, and institutional funders that provided financial support in 2019-20.

Manhattan Borough President Gale A. Brewer

New York City Council Member Ben Kallos

New York City Council Member Mark Levine

New York City Council Member Bill Perkins

New York City Council Member Keith Powers

New York City Council Member Helen Rosenthal

New York City Council Geriatric Mental Health Initiative

New York City Council Department for the Aging

New York City Council Department of Health and Mental Hygiene

New York State Office for the Aging

New York State Office of Mental Health

New York State Department of Health, Child, and Adult Food Care Program

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Assistant Director, PROS

Statement of Activities Year Ended June 30, 2019



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Program services	\$4,130,521	
Contributions	\$1,333,792	
Investment income	\$26,507	
Other income	\$225,735	
Total revenue and support	\$5,716,555	

\$3,870,079
\$608,759
\$102,779
\$4,581,617
\$1,521,367 \$2,656,305 \$1,134,938

Olinic Satellite S

SPOP Main Office, Clinic, and Bereavement Support 302 West 91st Street, New York, NY 10024

SPOP PROS/Personalized Recovery Oriented Services 188 West 88th Street, New York, NY 10024

Clinic Satellite Sites:

EAST HARLEM

Leonard Covello Senior Center, 312 East 109th Street

LOWER EAST SIDE/CHINATOWN

- Manny Cantor Center, 197 East Broadway
- Mott Street Senior Center, 180 Mott Street

EAST VILLAGE

Sirovich Senior Center, 331 East 12th Street

YORKVILLE/UPPER EAST SIDE

- Carter Burden Network. 1484 First Avenue
- Isaacs Center, 415 East 93rd Street
- James Lenox House, 49 East 73rd Street
- Lenox Hill Senior Center, 343 East 70th Street

ROOSEVELT ISLAND

Carter Burden Roosevelt Island Senior Center, 546 Main Street

MIDTOWN/CHELSEA

- The Edie Windsor SAGE Center, 305 Seventh Avenue
- Encore Community Services, 239 West 49th Street
- Project FIND/Woodstock Neighborhood Senior Center, 127 West 43rd Street
- VISIONS at Selis Manor Senior Center, 135 West 23rd Street

UPPER WEST SIDE

- Project FIND Hamilton House, 141 West 73rd Street
- Red Oak Senior Center, 135 West 106th Street

WASHINGTON HEIGHTS

■ Riverstone Senior Center, 99 Fort Washington Avenue

BROOKLYN

- Heights and Hills, 81 Willoughby Street
- GRIOT Circle, 25 Flatbush Avenue