

# QUALITY OF CARE... QUALITY OF LIFE

Jewish Home Lifecare Annual Report 2006

INNOVATION

TECHNOLOGY

COMPASSION



COMMUNITY

DIGNITY

TRADITION



Jewish Home Lifecare

## MISSION STATEMENT

WE ARE PASSIONATE ABOUT THE  
QUALITY OF AGING.

THE SERVICES WE PROVIDE  
SUPPORT HEALTH, INDIVIDUALITY  
AND DIGNITY.

**OUR MISSION IS LIFECARE.**



TRADITION

## A TRADITION OF HANDS-ON CARING

From developing concepts of house physicians and 24-hour staff to offering home health services, adult day healthcare programs and training for healthcare professionals, Jewish Home Lifecare continually meets the diverse needs of the community with passion and creativity.

We treat the whole person and strive to improve his or her life physically, emotionally, socially and spiritually. While non-sectarian, we uphold the Judaic principles of our founders by treating elders with dignity and respect. We practice this in our continuum of care—in their homes, in the community and in Jewish Home residences and healthcare facilities.

2006 was a year of challenge and growth in our New York communities. It was also the beginning of an important change: re-envisioning long-term elder care and reinventing the concept of nursing home life. We are proud to be a leader in the culture change movement and bringing it to fruition with our “Rebuilding The Manhattan Campus” Plan, a project that will redesign the way in which elders receive services and the places where they live. Our goal is a familiar one—which we have stood by these past 160 years—to enable our elders to continue leading quality lives with dignity, respect and as much independence as possible.

Within this report, we share a few stories from the year; a handful of moments that define and reflect our commitment to our elders and to our community, now and for generations to come.

Gene D. Resnick, MD  
Chairman of the Board

Audrey S. Weiner, DSW, MPH  
President and CEO



## PURSUING EXCELLENCE: PAST AND PRESENT

The first Home for Aged and Infirm Hebrews opened in 1870 on West 17th Street in New York City. In 1883, the Home moved to its current location on West 106th Street and operated for many years as the Jewish Home and Hospital for the Aged. In 2002, the Home became known as the Jewish Home & Hospital Lifecare System to better reflect its expanded elder care services provided on three campuses and in the community.

As part of the continuing evolution of its mission—and to communicate its identity more clearly—the organization will be known as Jewish Home Lifecare. Throughout 2007 and into 2008, the name Jewish Home Lifecare will be fully identified with programs and services that reflect our heritage and anticipate our future in this ever changing field.

Jewish Home Lifecare is one of the oldest and largest non-profit, long-term care and rehabilitation systems in New York State. Throughout its history, it has been and continues to be, a leader in caring for elders. With campuses in the Bronx, Manhattan and Westchester and through the Lifecare Community Services division, 13,315 individuals were served in 2006; 32% of them receiving services from two or three Jewish Home Lifecare programs.

Strong emphasis is placed on wellness and healthy aging activities including tai chi, aromatherapy, massage, walking programs, telemedicine, falls prevention, and creative arts as well as consumer education and caregiver support. In 2006, almost 2,300 additional individuals were served by complementary programs:

- Connections Information and Referral Service
- Caregiver Support Groups
- Community Health Education Forums
- Professional Education Center Conferences

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Over 2,400 staff members, along with 1,231 volunteers (giving 154,000 hours of service), provided care and directed programs for elders in our home or in their own homes.

Jewish Home Lifecare is a dynamic organization. People turn to the Jewish Home in crisis, when they need guidance on appropriate care or to seek the best professional training. Dignity is our goal; *lifecare* the mission. We strive to fulfill this mission daily—in the benchmarks we achieved in 2006 and in our future goals; just as we have for the past 160 years.

A close-up photograph of a hand holding a white handrail with a black grip ring. The hand is positioned on the left side of the frame, and the handrail extends towards the right. The background is blurred, showing a white wall and a white handrail. The overall tone is professional and focused on rehabilitation.

### Jewish Home Lifecare Short-Stay

**Rehabilitation** staff help an increasing number of patients on the road to recovery—one step at a time. Our Short-Stay Rehabilitation Centers are the link between the hospital and home, providing up to three months of comprehensive inpatient rehabilitative therapy so an individual can return home after a serious illness, stroke, or hip or knee replacement surgery.

Together, a team of skilled professionals provide physical, occupational, and speech therapies, medical and nursing supervision, social work services, nutritional guidance, and tailor an individualized plan of care focusing on the needs of each patient and in support of his or her family.

PASSION



QUALITY

## SHORT-STAY REHABILITATION RETURNING HOME

*At 103, Bernice Oken Chodosch is clever, articulate, full of life and determined to remain independent. With the help of physical and occupational therapists at the Bronx Division of Jewish Home Lifecare, she has returned home to resume her independent lifestyle.*

After suffering falls in her Bronx apartment, Mrs. Chodosch arrived at the 816-bed nursing home and rehabilitation center frail and in need of rehabilitation.

Mrs. Chodosch is a graduate of Hunter College and New York University, where she was one of eight women who enrolled in law school and one of three women and 70 men who graduated with a doctorate in law in 1929. Instead of going into law, she became a teacher, an artist, and a practicing poet.

When her husband died at age 60 in 1964, Mrs. Chodosch continued to teach English as a second language and enjoyed traveling the world and learning about other people and other cultures. Among her favorite ports of call were London, Paris, Peking, Moscow and Calcutta.

A little more than a month after arriving at Jewish Home Lifecare, having regained strength and the ability to maneuver with a walker, Mrs. Chodosch returned to her Bronx apartment, where her two sons, Stewart and Robert, often visit.

As she prepared to leave the rehabilitation center on Kingsbridge Road, Mrs. Chodosch remarked:

*"I've come to know so many of the staff members on all shifts and so many of them are now friends. I've even given some of them advice for them to live by and hopefully they consider me a friend and someone they can talk to."*

Naomi Cohen, her physical therapist, noted that Mrs. Chodosch would be greatly missed by other patients and the entire staff. "In my line of work I have met a lot of inspiring people, but Bernice stands out ahead of them all."


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*"All my life, I have believed that every day is a gift that should be cherished," said Mrs. Chodosch. "Life is beautiful and I'm glad to be alive."*

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## SHORT-STAY REHABILITATION HIGHLIGHTS

- Jewish Home Lifecare was the **first** nursing home to establish a department of rehabilitation in 1956.
- Over **80%** of all Jewish Home Lifecare rehab patients return home.
- In **2006**, Jewish Home Lifecare's three nursing homes provided short-stay rehabilitation to **2,088** individuals.
- The average time spent in short-stay rehab is **32** days.
- The Manhattan Division added **33 short-stay rehab beds** this year to meet the needs of the community: rehab admissions were up **11%** in 2006.



Jewish Home Lifecare provides the finest long-term skilled nursing care. To enrich the lives of our elders, their families, staff, and visitors, we have created “Communities of Caring” throughout the System with our “culture change” initiative. We go beyond the provision of excellent medical healthcare and create an environment that promotes choice, empowers residents and staff, nurtures our human spirit and creates kinder, gentler, and more satisfying places in which to live and work.

Culture change creates communities that engage the interests and capacities of both residents and staff, fostering growth and development. Family and friends are encouraged to be part of the communities.

Add to these warm environments the care of our skilled interdisciplinary staff of registered nurses, nurse practitioners, physicians, therapists, certified nursing assistants, and social workers, as well as special programs for those with Alzheimer’s Disease and memory impairment, and you have a continuum of care for which Jewish Home Lifecare is renowned.



## COMMUNITIES OF CARING: LONG-TERM NURSING CARE

### HELPING HANDS—YOUNG AND OLD

Jewish Home Lifecare recently added an Ambassador Volunteer Program through the AARP Foundation as part of our Communities of Caring. In an effort to bring mature, public-spirited individuals with a genuine interest and desire to assist the elderly, Ambassador Volunteers help by:

- Welcoming new residents and their families
- Answering questions and addressing concerns
- Helping familiarize new residents with their daily routine and the healthcare staff
- Assisting residents with dining
- Implementing culture change



*"I regard this as a beautiful opportunity to help. It's a gift to me."  
Catherine Marino (right)*

Catherine Courtney Marino has been involved in community service for much of her life and was one of the first AARP Ambassadors assigned to Jewish Home Lifecare. She considers herself much more than a greeter and has become part of many residents' extended families. Helping patients feel at home is an important component of the Jewish Home Lifecare Communities of Caring initiative.

## COMMUNITIES OF CARING HIGHLIGHTS

- There are currently **34** Communities of Caring operating at Jewish Home Lifecare.
- In **2006**, Sarah Neuman Center (our Westchester division) marked its first full year of operation under the Communities of Caring model.
- In **2006**, The Durst Center for Creative Arts and Alternative Therapies was established at the Westchester division. Residents are able to participate in art therapy, meditation, gentle yoga, aromatherapy, tai chi, and other techniques.
- A culture change research study is being conducted to measure the impact on residents, staff, and families. Results have focused on changes across all communities of caring and differences that have occurred over time such as increased resident satisfaction, more resident-centered care, a higher level of commitment to jobs, more choice, autonomy, and privacy in daily living.





## HOME AND COMMUNITY-BASED SERVICES

Home has always been at the heart of Jewish Home Lifecare. We're proud to offer our extensive health and social services to homebound persons through our Home Health Care program, with services including:

- Visits from nurses, physicians, and therapists
- Home safety professionals who assess the safety of home environments
- Social work services to monitor mental and emotional well-being
- Home care aides to help with daily activities
- 24-hour on-call service
- Friendly Visiting Programs

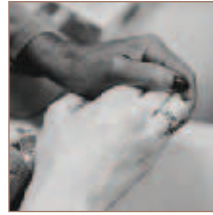
Through telemedicine technology, our staff can closely monitor the well-being of our clients, even

when they are not on site. All Jewish Home Lifecare nurses are required to take the New York State-approved continuing education credit curriculum developed by Jewish Home Lifecare focused on assessing the mental health needs of home care clients.

Our newest volunteer program in the Lifecare Community Services division pairs clients with college students. It has been tremendously successful in bringing joy and socialization to a home-bound population that is often isolated.

The Volunteer Support Program is generously funded by the Peter A. and Elizabeth C. Cohn Foundation and the UJA Federation of New York.

DIVERSITY



CARING

## HOME & COMMUNITY-BASED SERVICES

### FAMILY TIES

*Zenaida Bourbon and her 90-year old mother, Flora Vargas, feared they would have to give up the place they have called home for many years. Zenaida has congenital muscular dystrophy, and her mother has diabetes mellitus. Both of them need regular care to manage their health. As each of them gradually needed more help, they realized they could not remain living at home without assistance.*

The Jewish Home Lifecare Home Health Care program allows both women to receive the care they require while continuing to live together in their own home. Nurse Yvette Solomon comes every two weeks to provide routine check-ups and to ensure Flora maintains the protocol of her diabetes management. Their doctor visits at least once a month. The ladies also enjoy a regular schedule of visits from home health aides, volunteers, and nurses. Even when no staff is visiting, Zenaida and Flora are connected to the health center through their Health Buddies, telehealth devices that connect them to a nurse via phone line and allow them to send daily health statistics such as blood pressure, blood sugar levels, and answers to general health questions to a nurse who is ready to respond if something

seems wrong. With Jewish Home Lifecare Zenaida and Flora are doing more than staying healthy; they feel secure, at ease, and, with their steady stream of visitors, not alone.

### HOME HEALTH CARE HIGHLIGHTS

- **61%** of all Jewish Home Lifecare clients are served by community-based services through Home Health Care, Adult Day Healthcare, transportation, care management programs and within NORCS.
- The Home Health Care programs in Manhattan and the Bronx served **1,632** individuals in 2006.
- The Home Health Care program maintained **250** Health Buddy telehealth units in 2006 and introduced automatic medication dispensers to Home Care clients. Both programs have received grant funding to expand in 2007. Funding for these programs has been received from the New York State Department of Health, the Herman Goldman Foundation and the Harry and Jeanette Weinberg Foundation.
- Outcare Concept Systems, which provides national healthcare benchmark data, awarded the **“2006 Vision Award”** to the Home Health Care program for its Diabetes and Pain Management “Best Practice” programs.





## ADULT DAY HEALTHCARE PROGRAMS

For elders who are no longer able to participate in traditional senior centers' activities for socialization, Jewish Home Lifecare reaches out to bring them in. Known as medical model Adult Day Healthcare Programs, our centers offer nursing supervision and medical monitoring; physical, occupational and speech therapies; social work counseling; hot meals and a wide range of stimulating social and recreational activities.

Jewish Home Lifecare drivers pick up participants in wheelchair-accessible vans and return them home at day's end. The range of activities includes trips to museums, restaurants, parks, zoos, and other destinations of interest. Cultural holidays and events are celebrated. Additionally, Adult Day Healthcare Programs for clients with Alzheimer's disease and the visually impaired ensure tailored services for those with special needs.

INDIVIDUAL



HOME

## ADULT DAY HEALTHCARE PROGRAMS HANDS-ON TECHNOLOGY

Our groundbreaking computer-training program with OATS (Older Adults Technology Services) was tremendously popular in 2006. OATS is a non-profit organization that successfully engages, trains and supports older adults in using technology to improve their quality of life and enhance their social and civic engagement. Our relationship with OATS enabled seniors in our Adult Day Health program to participate in a two-month training course in the basic use of computers. Upon completion, participants received diplomas and their very own email address.

The best way to get a feel for the spirit at the heart of Jewish Home Lifecare is to hear from the people involved. Michelle Melendres, a second year social work intern from Columbia University School of Social Work, completed a project management assignment implementing the OATS Basic Computer Training Program at the Manhattan division's Adult Day Center. Michelle writes:

*"The program teaches elders how to use the mouse and keyboard, Windows, the Internet, and email. Classes took place twice a week with twelve students. By week seven, all 12 clients had signed up for email accounts and succeeded in sending and receiving emails with the staff. Many other clients have since expressed interest in gaining basic knowledge and skills, and they recognize the necessity of adapting to the changes in technology."*

The OATS Program is funded in part by UJA-Federation of New York and the Henry Nias Foundation.

## KEEPING ELDERS YOUNG AT HEART

84-year old Coleman Mishkoff has the same energy, wit, and "joie de vivre" he possessed as a younger man, when he was a teacher and lawyer in the Bronx. Coleman feels best when he is socializing. He thrives on meeting new people—conversation keeps his mind sharp and staying active lifts his mood. The Adult Day Care Program gives him a way to connect with other seniors, nursing staff, and the eclectic Jewish Home community.

...Continued on page 15

## ADULT DAY CARE HIGHLIGHTS

- Jewish Home Lifecare instituted the first **Adult Day Health Care Program** in New York City to be operated out of a nursing home (Bronx division, 1974).
- The Day Care Programs initiated **Pedometer Programs** for their clients in **2006** as part of their Healthy Aging Initiative. Clients recorded their steps on the pedometer, and those reaching their "step goals" received awards such as new walking sneakers.
- In **2006**, The Manhattan Day Care Center installed the **first Telehealth Kiosk**, which helps clients control their diabetes.
- In 2006, 840 clients participated in the Adult Day Healthcare Programs of Jewish Home Lifecare in the Bronx, Manhattan, and Westchester.



## HELPING HANDS

To assist clients and their families with navigating the often overwhelming process of care decision-making, Jewish Home Lifecare offers information, referral services, and client-oriented needs assessment for caregivers. Our care management programs enable clients to stay at home, where they want to be, while benefiting from a complete

range of long-term care services such as nursing supervision, help with daily activities, social outings, and the assurance of regular phone contact. Care Management is Jewish Home Lifecare's way of linking hands with clients, staff, volunteers, families, and the community to provide seamless, quality care.



## CARE MANAGEMENT

### LIFECARE PLUS

*Lifecare Plus is a federal demonstration project designed to test community-based care coordination of elders and its ability to reduce Medicare costs. Jewish Home Lifecare is one of only 15 sites nationwide participating in the study and its success has received much recognition. Services offered to elders include: coordination of doctor appointments; regular phone contact with around-the-clock call service; telemedicine monitoring; medication management and escort services to doctors' appointments and errands as well as participation in the Manhattan Division's Adult Day Health Care Program. Lifecare Plus makes life for independent seniors a little easier.*

*In 2006 nearly 1,800 individuals received services and/or information from Lifecare Plus, Connections and Senior Health Partners in their homes or in community-based centers.*

### SENIOR HEALTH PARTNERS\*


*Senior Health Partners (SHP) is a care alternative for seniors who want to live at home but have health problems and limitations that could qualify them for nursing home placement. SHP's care team of nurses, social workers, rehab therapists, dietitians, and other health professionals manage clients' day-to-day needs from meals, transportation, personal care, and medication management to exercise and recreational activities. During the day, clients can attend the SHP Adult Day Center and return home in the evening. SHP's goal is to provide seniors with well-coordinated care so they can remain in their homes as long as possible.*

## CONNECTIONS—LINKING HANDS

"Connections," the Jewish Home Lifecare's telephone information and referral service, is a gateway to all the resources of our home and community-based services and three nursing home campuses. The service is designed to help families understand the available options so they can make informed decisions about the care of their family members. Expert staff assist caregivers in learning how to take advantage of Jewish Home Lifecare programs and services, while also providing much-needed advice and assurance.

*"I really appreciate your diligence in following up on our visit. Sometimes these decisions and changes are a little overwhelming. Your taking the time made me feel you were really interested and concerned about my family." — Ms. K*

\* Senior Health Partners is a Managed Long-Term Care Program approved by The State of New York and is sponsored by Jewish Home Lifecare, Metropolitan Council on Jewish Poverty, and The Mt. Sinai Hospital.



Jewish Home Lifecare continues to serve as a model for long-term care facilities in the United States, and across the world as well. Research and education have been at the heart of Jewish Home Lifecare since 1892. Dr. Simon Newton, Jewish Home's head physician at the time, wrote: "Many visitors from around the world respect and greatly approve our work." Hundreds of healthcare professionals, administrators, government officials, and students from more than 50 countries around the world have visited

Jewish Home Lifecare to observe, study, and learn. Jewish Home Lifecare began training healthcare professionals for certification in 1963 through what has evolved into our Professional Education Center. Over the years, some 2,500 medical students and fellows have completed their geriatric training at Jewish Home Lifecare.

We are a trusted resource for geriatric healthcare professionals nationwide and play a vital role in educating future generations.



## RESEARCH & EDUCATION



### A HUMANITARIAN APPROACH TO MEDICINE

*Guido Barmaimon, a third-year medical student from Buenos Aires, Argentina, opted to spend his summer vacation studying at Jewish Home Lifecare. Months earlier, his 61-year-old father had suffered a stroke that left his right arm and leg paralyzed and required rehabilitative care in a Buenos Aires nursing home. Witnessing the impersonal approach of the doctors and nurses, Dr. Barmaimon grew interested in learning about medical care techniques for elders outside of Argentina. “My aunt, who lives in New York, spoke highly of Jewish Home, and that is how my journey here began.”*

Dr. Barmaimon joined Jewish Home Lifecare's medical student training program and immediately noticed how the organization differed from the nursing home in Argentina. Jewish Home Lifecare doctors and caregivers showed concern and care toward each of their patients, treating them as individuals. Dr. Barmaimon says that his eight-week stay solidified his belief that a personal approach is imperative for all patients, especially the elderly.

*“One hears so much about the impersonal approach that medical doctors are now taking toward their patients,” he says. “I was quickly disabused of that notion when I saw the human approach to medicine that is taught and practiced here. There’s concern here for the whole person—that’s impressive.”*

### RESEARCH AND EDUCATION 2006 HIGHLIGHTS

- Over **675** students and interns involved in the medical and healthcare fields studied and trained at Jewish Home Lifecare through the support of the Fan Fox and Leslie R. Samuels Foundation and the Lester Eisner, Jr. Center for Geriatric Education.
- The Professional Education Center provides educational programs and conferences for healthcare professionals and attracts registrants from around the world. **480** health care professionals attended six conferences on topics such as palliative care, intergeneration youth volunteer programs, and caregiving issues through the support of the Kathy and Alan C. Greenberg Center on Ethics.
- Jewish Home Lifecare debuted its “Live Long, Live Well” community health education forums. Four forums, co-sponsored with other health agencies, addressed topics such as diabetes, breast and prostate cancer, and Parkinson and Alzheimer’s diseases. Almost 700 individuals attended the forums.





## SENIOR RESIDENCES

## SENIOR RESIDENCES

## HOME SWEET HOME

*When Hipólita Cáceres' name was drawn in the lottery for one of the 49 subsidized one-bedroom rental apartments in the Kenneth Gladstone Building, it was a dream come true for her.*

At that time, Hipólita lived in a building without heat or hot water. “The paint was falling off, the plumbing didn’t work, and the landlord would do nothing except charge crazy rents I couldn’t afford,” she recalls.

Now, at the Jewish Home Lifecare’s Gladstone Building, Hipólita is happy and active. She receives the care she needs and finds friends at the Bronx Division Adult Day Healthcare Center right across the street.

*“How I love my new, cozy apartment. It’s more than I hoped for. I relax and cook all my favorite dishes, and have so many friends here, too. I still think I’m dreaming.”*

— Hipólita Cáceres

## ADULT RESIDENCES HIGHLIGHTS

- Jewish Home Lifecare provided safe, secure housing with access to healthcare services to **1,838 tenants in 2006.**
- Kittay House, our independent senior living housing in the Bronx and home to over 300 tenants, celebrated its **36th** birthday.
- A grant of **\$500,000** was received from the Bronx Borough President’s Housing Preservation Fund towards the Jewish Home Lifecare’s newest housing project for low-income seniors. Construction to begin in 2008.

## KEEPING ELDERS... continued from page 9

Coleman brings many smiles to the people involved in the program. They love to listen—with an equal mix of awe, disbelief, and amusement—to his stories of traveling and serving as a Navy Lieutenant in the Pacific during World War II. He also brings a touch of Gene Kelly to the program—seniors and staff stop to watch as he waltzes through the room with his favorite dance partner, Ruth Maderski, the therapeutic recreation specialist at Jewish Home. Coleman continues to be active in politics and votes regularly, though he jokes, *“With my luck you wouldn’t want me on your side. Everybody I’ve ever voted for lost.”*

## FUNDRAISING & DEVELOPMENT ACTIVITIES

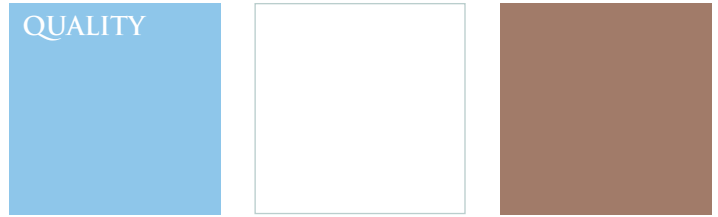
2006 was another successful year for fundraising for Jewish Home Lifecare. In the Development Department's first full year after its reconfiguration and under its new leadership, a total of \$6,916,023 was raised representing a remarkable increase of more than 82% over FY 2005.

The Development department places emphasis on creating meaningful philanthropic partnerships with individual donors and strengthening strategic alliances with foundations and organizations such as UJA-Federation as key fundraising strategies. Efforts to educate and cultivate new Jewish Home Lifecare leadership and donors are ongoing. The Heritage Society was created to define the many ways one can acknowledge those who made a planned gift.

Major gifts and grants were received for clinical training, medical research and cultural, educational, and intergenerational programming throughout Jewish Home. Among these gifts from foundations were:

- **J.E. & Z.B. Butler Foundation** for the Intergenerational Youth Program and the Geriatric Career Development Program
- **Peter A. & Elizabeth S. Cohn Foundation** for the Lifecare Community Services division is Volunteer Support Program
- **Dextra Baldwin McGonagle Foundation** for Alzheimer's Disease research
- **The David Berg Foundation** for an Elder Abuse Training Program and Conference
- **The Herman Goldman Foundation** for technology based programs in Lifecare Community Services
- **Stella & Charles Guttman Foundation, Inc.** for the Geriatric Career Development Program
- **The Leir Charitable Trust** for Parkinson's Disease Research
- **Henry Nias Foundation** for the Adult Day Programs
- **The Pinkerton Foundation** for the Intergenerational Youth Program
- **Fan Fox & Leslie R. Samuels Foundation** for palliative care programs
- **AARP** and the **Henry & Lucy Moses Fund, Inc.** for The Dining Assistants Program in the Bronx nursing home
- **New York City Department of Aging** for the Intergenerational Youth Program
- **New York State Department of Health** for telemedicine demonstration projects for diabetes control
- **Department of Housing and Urban Development** for Webb Avenue HUD Section 202 senior housing

*A nutritious cooking demonstration took place in Westchester as part of Sarah Neuman Center's "friend-raising" efforts.*



- **Bronx Borough President's Office through the Department of Housing and Preservation** for Webb Avenue HUD Section 202 senior housing
- **1199 SEIU Training & Upgrading Fund** for various staff education sessions

Additionally, UJA-Federation provides support to facilitate professional development, enhance Jewish Life programming, and to address Jewish communal issues.

Preparation for the Capital Campaign included completion of a capacity study and subsequent Board approval of the Campaign. Jewish Home will formally apply to UJA-Federation in 2007 for inclusion in its Capital Campaign.

The second annual "Stay at Home" Gala was a success once again and much enjoyed by residents, patients and clients throughout Jewish Home Lifecare. Each division celebrated at their own special events centered around food, music, entertainment and, most of all, fun. The third annual Gala will be held in November, 2007.

The support of our friends in the philanthropic community is measured not only in dollars but also by the commitment to those we serve. Each contribution helps us continue our mission to deliver the highest quality of healthcare and community services to older adults and support for their families.

*Residents participate in activities at the 2006 Stay-At-Home Gala.*



## HANDS ON WORKFORCE

Quality care delivery depends on a qualified staff. Jewish Home Lifecare recognizes that respect, empowerment, positive employee relations, and formalized, regular recognition programs contribute to high staff satisfaction and lower-than-industry average staff turnover rates.

A staff satisfaction survey, conducted every two years, is an important tool in keeping Jewish Home staff turnover rates low. The 2006 survey was completed by more than 1,600 employees, who shared views on our work environment and feedback on communication issues. For the first time, staff satisfaction was higher for those working on Communities of Caring than for staff working on traditional skilled nursing units.

The culture change journey is the fruit of a unique relationship between management and labor. Jewish Home has been working with 1199 SEIU, a healthcare workers union, to put the needs of residents first and transform the environment of the nursing home.



*Staff and their families enjoyed the Annual Employee Picnic.*

In 2006, Jewish Home Lifecare employed 2,448 full-time employees, a slight increase over 2005. Staff turnover is lower than The New York City and New York State and national averages. Nursing turnover is also significantly lower when compared to city, state and national averages.

Employee Relations activities for staff include wellness programs, Weight Watchers at Work, focus groups, tuition reimbursement, Jones Fund Nursing scholarships, Employee of the Quarter Program, the Employee Recognition Program, retirement and service anniversary celebrations, and sports teams.

## VOLUNTEERS

One of Jewish Home Lifecare's distinguishing features is the commitment to engage and build community. Volunteers, individuals of all ages, ethnicities, and religious backgrounds from public, private, and government sectors, come to share their special talents, skills, and education with our elders.

- In 2006, over **1,200 people** volunteered at one of the nursing homes or through the Lifecare Community Services division.
- According to the Points of Light Foundation, the rate of value of a volunteer is just over \$18 per hour. **In 2006**, Jewish Home volunteers provided **154,000 hours** of services valued at **\$2.8 million**.
- Recruitment is key to any active volunteer program. Jewish Home volunteer departments recruit volunteers and establish partnerships in their communities to support their programs.

The Lifecare Community Services division's Volunteer Support Program completed its first year of operation with 27 volunteers and 1,323 hours of service to 39 clients. The program was created to help alleviate isolation of homebound elders who don't have family or friends with whom they can socialize. Volunteers provide companionship, conversation, listening time, and new skills (such as using computers) to elders in Manhattan. Client feedback has been extremely favorable.



## INTERGENERATIONAL YOUTH PROGRAMS

Youth volunteers in Jewish Home Lifecare's Intergenerational Youth (IGY) Program have been active at the Manhattan and Bronx campuses for over 15 years. They support elders directly in therapeutic recreation activities, provide assistance with dining, and transport residents through the campuses. The IGY programs empower disadvantaged youth, nurture their interest in healthcare as a career, provide safe space after school, and offer mentoring and life skills training all under the skilled supervision of Jewish Home staff.

### Funders of the IGY program include:

- J.E. & Z.B. Butler Foundation
- The Pinkerton Foundation
- Harry and Jeanette Weinberg Foundation
- William Zell Charitable Remainder Trust
- New York City Department for the Aging (Bronx only)
- The Frances and Benjamin Benenson Foundation

Although it doesn't have a formal IGY program, the Westchester division worked with 99 youth volunteers in 2006, many of them participating in the 1199 Summer Youth Employment program for children of Sarah Neuman staff who are members of 1199 SEIU.

### Geriatric Career Development Program

The Geriatric Career Development (GCD) program was established in October 2006 to provide youth who might not finish high school with opportunities to learn about geriatric issues and health care careers in a nursing home setting. GCD provides training in direct patient care through lectures, competency training, and exams and by assisting nursing staff. The program fosters establishment of a nurturing relationship with a nursing home elder who serves as a mentor to the student.

GCD is a three-year program for high school sophomores to seniors, and students participate eight hours per week. Twenty-seven students were recruited from the Marie Curie High School for Medicine, Nursing and Allied Health Professions in the Bronx. They have all passed competency exams in clinical areas. By 2009, Jewish Home expects to have 80-90 students enrolled in GCD.

### GCD Funders

- The Altman Foundation
- J.E. & Z.B. Butler Foundation
- The Stella and Charles Guttman Foundation
- New York City Department for the Aging
- The Reader's Digest Scholarship and Leadership Fund of the New York Community Trust

### GCD Partners

- Mosholou Montefiore Community Center
- Jewish Board of Family & Children's Services
- Marie Curie School for Medicine, Nursing & Allied Health Professions
- Health Opportunity High School
- DeWitt Clinton High School

2006 VOLUNTEERS			
	Youth	Adult	Total
Manhattan	338	183	521
Bronx	182	183	365
Westchester	99	219	318
Lifecare Community Services	n/a	27	27
		<b>TOTAL</b>	<b>1,231</b>

## 2006 FINANCIALS

### CONSOLIDATED BALANCE SHEET

The following summary of financial information was prepared by Loeb & Troeper for Jewish Home Lifecare. The complete, audited financial statement, including related notes and Loeb & Troeper's opinion as independent auditors, may be obtained by writing to Jewish Home Lifecare, 120 West 106th Street, New York, NY 10025 or to the New York State Department of Law, Charities Bureau, 120 Broadway (Third Floor), New York, NY 10271-0332.

ASSETS	2006	2005	LIABILITIES AND NET ASSETS	2006	2005
<b>CURRENT ASSETS</b>			<b>CURRENT LIABILITIES</b>		
Cash and cash equivalents	\$6,172,916	\$5,894,693	Line of credit	\$9,699,497	\$9,699,497
Cash – resident funds	897,605	742,410	Accounts payable and accrued expenses	30,524,061	28,347,541
Investments	59,344,999	55,047,148	Accounts payable – construction	400,370	79,177
Investments – resident funds	1,379,558	1,182,254	Accrued salaries and related liabilities	7,338,772	7,394,828
Accounts receivable (net of allowance for doubtful accounts of \$6,281,000 in 2006 and \$6,191,000 in 2005)	43,232,961	51,523,670	Resident funds	2,277,163	1,924,664
Inventories – at cost	867,146	726,402	Accrued pension payable	5,527,000	6,700,000
Contributions receivable	1,686,466	1,702,469	Accrued interest payable	32,602	33,812
Prepaid expenses and other receivables	774,153	776,718	Annuity obligations	47,520	
<b>Total current assets</b>	<b>\$114,355,804</b>	<b>\$117,595,764</b>	Estimated liabilities to third parties	7,153,356	7,761,902
			Security deposits and other liabilities	613,753	573,630
			Current portion of long-term debt	3,253,944	3,197,561
			<b>Total current liabilities</b>	<b>\$66,868,038</b>	<b>\$65,712,612</b>
<b>LIMITED USE ASSETS</b>			<b>LONG TERM LIABILITIES</b>		
Cash and cash equivalents	\$15,160,844	\$14,828,555	Accrued pension payable	\$958,974	\$2,386,076
Investments	5,754,216	8,673,977	Capital leases payable	12,075	32,775
Accrued interest receivable	22,150	6,649	Mortgages payable	44,269,170	46,882,940
<b>Total limited use assets</b>	<b>\$20,937,210</b>	<b>\$23,509,181</b>	Loans payable	5,327,948	5,540,416
			Capital advance	13,240,899	13,006,901
			<b>Total long-term liabilities</b>	<b>\$63,809,066</b>	<b>\$67,849,108</b>
<b>OTHER ASSETS</b>			<b>Total liabilities</b>		
Intangible pension plan asset	\$392,935	\$579,213		<b>\$130,677,104</b>	<b>\$133,561,720</b>
Investments	6,024,193	4,992,611	<b>NET ASSETS (EXHIBIT B)</b>		
Beneficial interest in gift annuities	1,104,232	297,678	Unrestricted	\$96,081,552	\$93,150,967
Contributions receivable	442,646	142,435	Temporarily restricted	27,165,345	24,878,105
Fixed assets (net of accumulated depreciation and amortization of \$165,954,162 in 2006 and \$153,333,467 in 2005)	116,691,174	109,570,605	Permanently restricted	6,024,193	5,096,695
<b>Total other assets</b>	<b>\$124,655,180</b>	<b>\$115,582,542</b>	<b>Total net assets</b>	<b>\$129,271,090</b>	<b>\$123,125,767</b>
			<b>TOTAL LIABILITIES AND NET ASSETS</b>		
<b>TOTAL ASSETS</b>	<b>\$259,948,194</b>	<b>\$256,687,487</b>		<b>\$259,948,194</b>	<b>\$256,687,487</b>

## CONSOLIDATED STATEMENT OF ACTIVITIES

	UNRESTRICTED	TEMPORARILY RESTRICTED	PERMANENTLY RESTRICTED	TOTAL	
				2006	2005
<b>OPERATING REVENUES AND OTHER SUPPORT</b>					
Inpatient	\$192,969,674			\$192,969,674	\$186,894,192
Outpatient	56,435,662			56,435,662	54,601,289
Apartment rentals	3,782,888			3,782,888	3,390,193
Other operating revenues	5,271,238			5,271,238	5,247,668
Contributions	441,941			441,941	168,966
Net assets released from restrictions	3,522,905	\$(3,522,905)			
<b>Total operating revenues</b>	<b>\$262,424,308</b>	<b>\$(3,522,905)</b>		<b>\$258,901,403</b>	<b>\$250,302,308</b>
<b>OPERATING EXPENSES</b>					
Inpatient	\$174,641,370			\$174,641,370	\$174,441,693
Outpatient	57,080,503			57,080,503	54,728,383
Housing	4,178,963			4,178,963	3,103,420
Other programs	4,980,555			4,980,555	4,815,439
Administrative and general	24,857,269			24,857,269	23,721,855
<b>Total operating expenses (includes interest of \$3,500,545 in 2006 and \$3,626,746 in 2005)</b>	<b>\$265,738,660</b>			<b>\$265,738,660</b>	<b>\$260,810,790</b>
<b>OPERATING LOSS</b>	<b>\$(3,314,352)</b>	<b>\$(3,522,905)</b>		<b>\$(6,837,257)</b>	<b>\$(10,508,482)</b>
<b>NONOPERATING EXPENSES</b>					
Contributions – unrestricted	\$1,351,198			\$1,351,198	\$1,368,213
Contributions – restricted		\$3,721,233	\$1,051,000	4,772,233	3,059,610
Legacies and bequests	177,566			177,566	289,597
Fund-raising activities	(1,840,099)			(1,840,099)	(1,710,357)
Investment income	6,316,144	2,116,834		8,432,978	3,972,133
Other nonoperating revenues					30,983
<b>Nonoperating gain</b>	<b>\$6,004,809</b>	<b>\$5,838,067</b>	<b>\$1,051,000</b>	<b>\$12,893,876</b>	<b>\$7,010,179</b>
Change in net assets before other changes in net assets	\$2,690,457	\$2,315,162	\$1,051,000	\$6,056,619	\$(3,498,303)
Curtailment gain on pension	88,704			88,704	
Reclassifications	151,424	(27,922)	(123,502)		
Change in net assets (Exhibit C)	2,930,585	2,287,240	927,498	6,145,323	(3,498,303)
<b>Net assets – beginning of year</b>	<b>\$93,150,967</b>	<b>\$24,878,105</b>	<b>\$5,096,695</b>	<b>\$123,125,767</b>	<b>\$126,624,070</b>
<b>NET ASSETS – END OF THE YEAR (Exhibit A)</b>	<b>\$96,081,552</b>	<b>\$27,165,345</b>	<b>\$6,024,193</b>	<b>\$129,271,090</b>	<b>\$123,125,767</b>



RESEARCH

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