



# Safeguarding Home Environments: Addressing Environmental Risks for Aging and Disabled Populations in Public Housing

*National Center for Health in Public Housing*

*National Nurse-Led Care Consortium*



November 14, 2025

# Housekeeping

- All participants muted upon entry
- Engage in chat
- Raise hand if you would like to unmute
- Meeting is being recorded
- Slides and recording link will be sent via email

The Zoom logo is displayed in its characteristic blue, lowercase font. In the background, there are faint, light blue icons including a house with a heart, a person with a stethoscope, a classical building, and a plant.

# National Center for Health in Public

- The National Center for Health in Public Housing (NCHPH) is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U30CS09734, a National Training and Technical Assistance Partner (NTTAP) for \$2,006,400 and is 100% financed by this grant. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.
- The mission of the National Center for Health in Public Housing (NCHPH) is to strengthen the capacity of federally funded Public Housing Primary Care (PHPC) health centers and other health center grantees by providing training and a range of technical assistance.



# NCHPH Team



**Fide Pineda  
Sandoval, CHES**  
Manager of Training  
and Technical  
Assistance



**Jose Leon, MD**  
Chief Medical Officer



**Kevin Lombardi MD,  
MPH**  
Manager of Policy,  
Research, and Health  
Promotion



**Bob Burns, MPA**  
Director



**Chantel Murray, MA**  
Communications Manager

# Accreditation Statement

**Accreditation Statement:** The National Nurse-Led Care Consortium is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation. Each session has been approved for 1.0 NCPD contact hours.

**Success Completion Requirements:** To obtain 1.0 contact hours of nursing continuing professional development, you must participate in the entire activity, complete the evaluation, and achieve an 80% pass rate on the knowledge gain assessment following the session.

# NNCC NTTAP Team



**Jillian Bird, MS, RN**  
Director of Training and Technical Assistance



**Matt Beierschmitt, MPP**  
Senior Program Manager



**Fatima Smith, MPH**  
Project Manager



**Regina Brecker, MPH**  
Project Coordinator



**Junie Mertus, MPH**  
Program Intern





The National Nurse-Led Care Consortium (NNCC) is a nonprofit public health organization working to strengthen community health through quality, compassionate, and collaborative nurse-led care.

NNCC's mission is to advance nurse-led healthcare through policy, consultation, and programs to reduce health disparities and meet people's primary care and wellness needs.

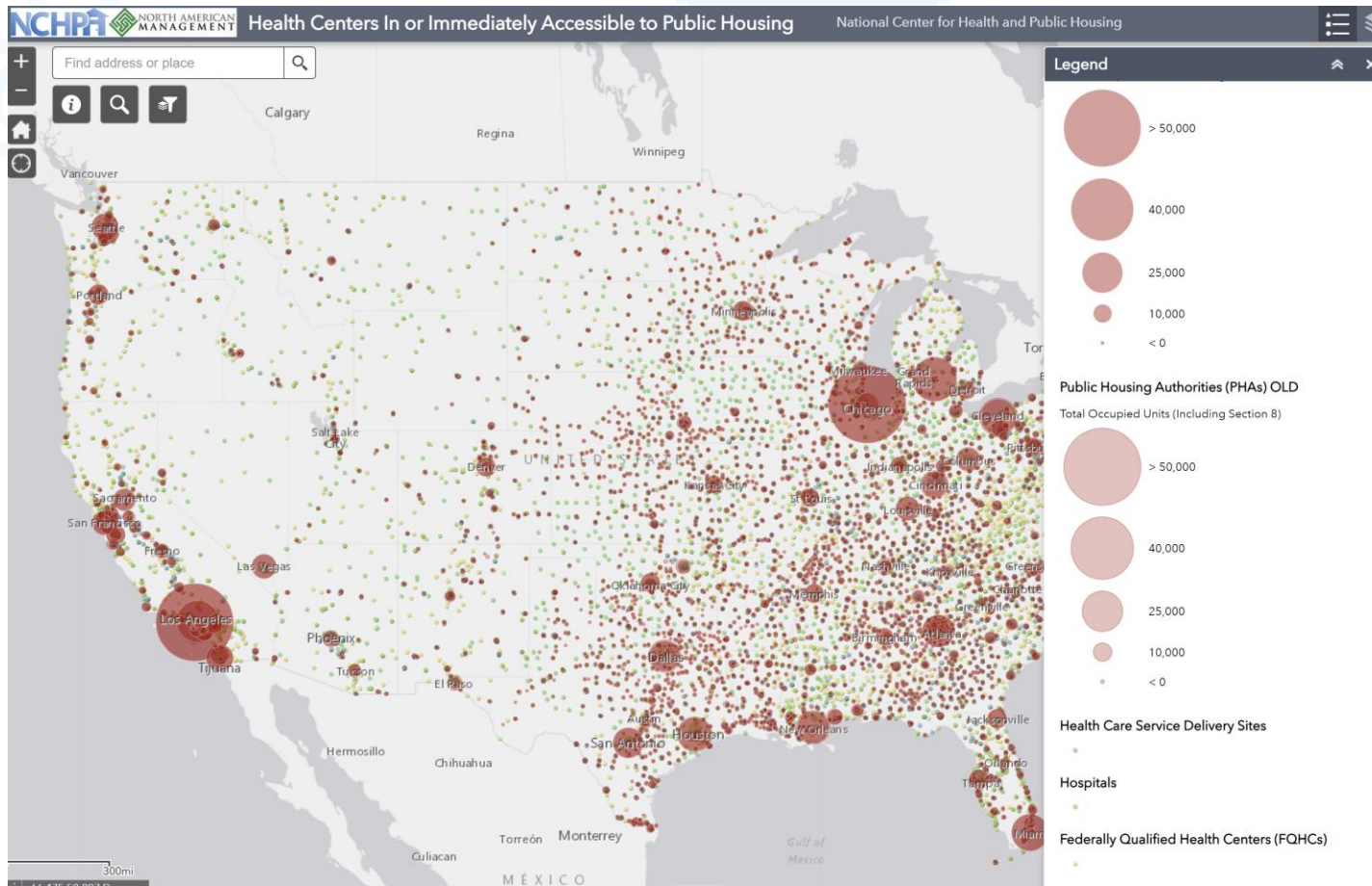
We do this through:

- training and technical assistance
- public health programing
- consultation
- direct care

NNCC's NTTAP is funded by HRSA's Bureau of Primary Health Care to provide subject matter expertise through the development, delivery, coordination, and evaluation of FREE training and technical assistance offerings to health center grantees and look-alikes.

*This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$550,000 with 0 percent financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, HRSA, HHS, or the U.S. Government.*

# Location of PHPC Health Centers and Public Housing Developments



**1,363 Federally Qualified Health Centers (FQHC)=31 million patients**

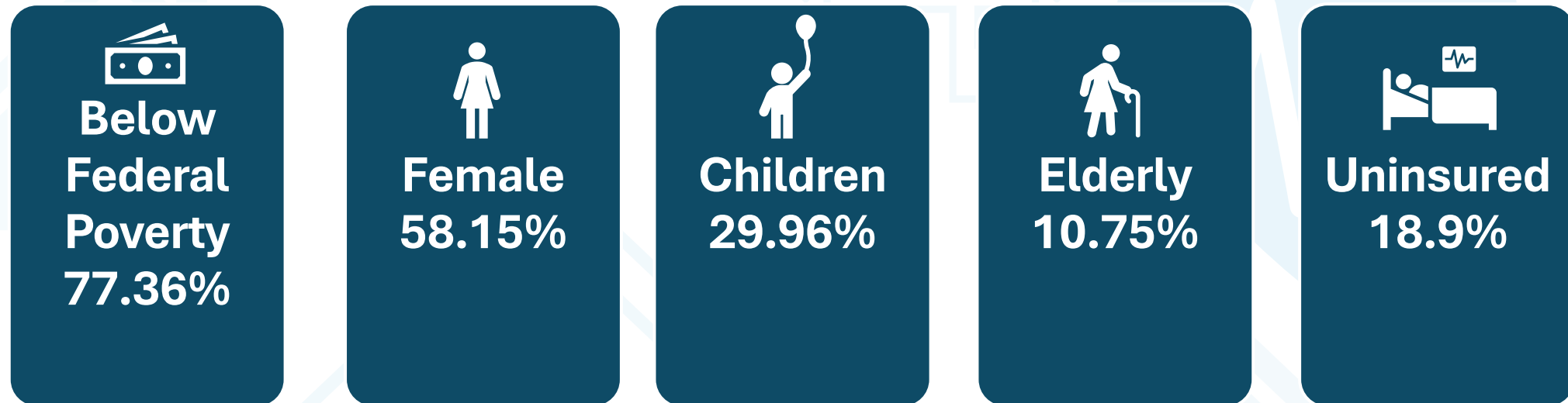
**475 FQHCs near Public Housing= 6.5 million patients**

**107 Public Housing Primary Care (PHPC) = 992,815 patients**

Source: [UDS 2023](#)

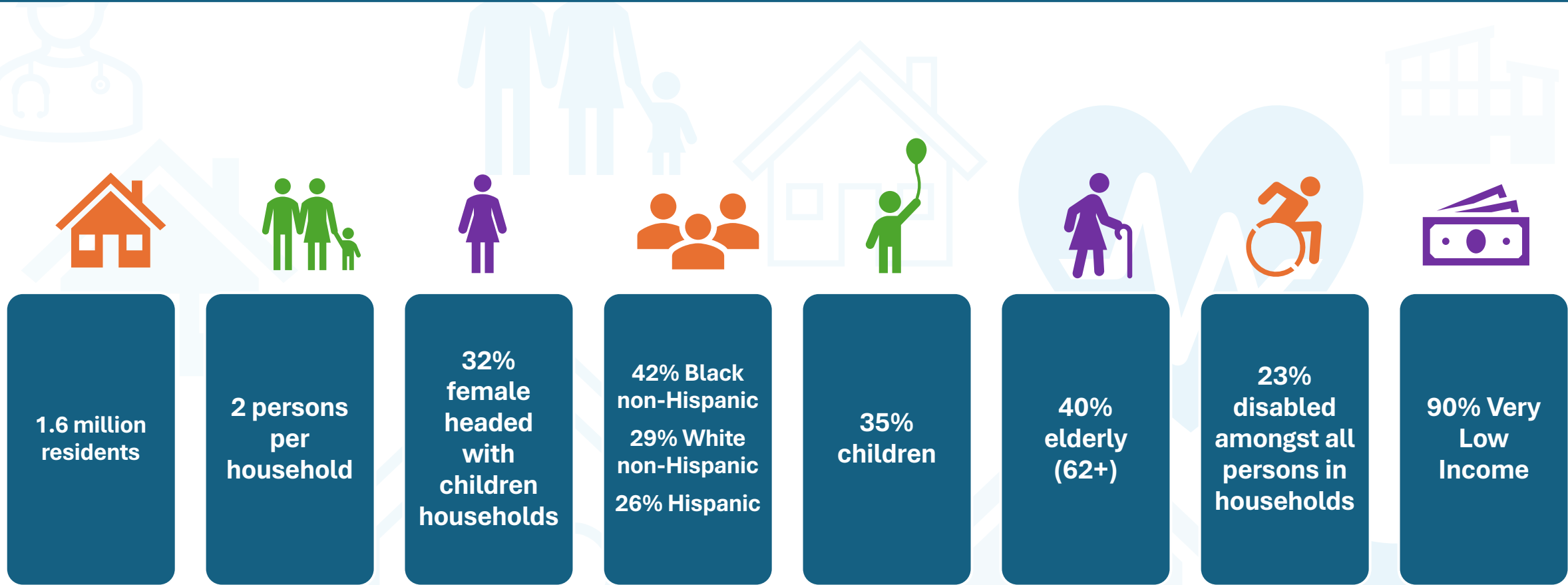


# PHPC Health Center Patient Demographics 2023



Source: [UDS 2023](#)

# Public Housing Resident Demographics 2023



Source: [HUD Picture of Subsidized Adults](#)

# Learning Objectives



Recognize key environmental hazards that affect aging and disabled populations in public housing



Learn practical strategies for mitigating environmental risks, improving housing accessibility, and creating safer living environments



Understand how to build and strengthen partnerships between health centers, housing authorities, and community organizations to address housing-related health risks and enhance the quality of life for special populations

# Guest Speakers



- **Eugene Pinzer**, HUD Policy and Standards Division (LP) Environment Scientist; U.S. Department of Housing and Urban Development
- **Taneka Blue**, HUD Lead and Healthy Homes Program Division (LM) Analyst; U.S. Department of Housing and Urban Development

# Guest Speakers



- **Diana Aguiar Briceno**,  
Housing Partnerships  
Manager



***San Diego PACE***  
*Program of All-Inclusive Care for the Elderly*

# Guest Speakers



- **Eugene Pinzer**, HUD Policy and Standards Division (LP) Environment Scientist; U.S. Department of Housing and Urban Development

# Eight Healthy Homes Principles

**1. Keep it Dry**

**2. Keep it Clean**

**3. Keep it Safe**

**4. Keep it Well-Ventilated**



# Eight Healthy Homes Principles

**5. Keep it Pest-free**

**6. Keep it Contaminant-free**

**7. Keep your home Maintained**

**8. Keep it Thermally Controlled**





# 1. Keep it Dry

- **Prevent water from entering your home through:**
  - **Leaks in roofing systems**
  - **Rain water from entering the home due to poor drainage**
  - **Check interior plumbing for any leaks.**



## 2. Keep it Clean

- **Control the source of dust and contaminants**
- **Create smooth and cleanable surfaces**
- **Reduce clutter**
- **Use effective wet-cleaning methods.**

# 3. Keep it Safe

- **Properly label and store poisons out of the reach of children**
- **Secure loose rugs**
- **Keep children's play areas free from hard or sharp surfaces.**
- **Install smoke and carbon monoxide detectors**
- **Keep fire extinguishers on hand.**



# 4. Keep it Well-Ventilated

- **Ventilate bathrooms and kitchens**
- **Use whole house ventilation for supplying fresh air**
- **To reduce the concentration of contaminants in the home.**

# 5. Keep it Pest-free

- **All pests look for food, water and shelter.**
- **Seal cracks and openings throughout the home**
- **Store food in pest-resistant containers**
- **Use sticky-traps and baits in closed containers**
- **Use least toxic pesticides such as boric acid powder.**



# 6. Keep it Contaminant-free

- **Reduce lead-related hazards in pre-1978 homes by fixing deteriorated paint**
- **Keep floors and window areas clean using wet-cleaning**
- **Test your home for radon, a naturally occurring dangerous gas that enters homes through soil, crawlspaces, and foundation cracks**
- **Install a radon removal system if levels above the EPA action-level are detected.**



# 7. Keep your home Maintained

- **Inspect, clean and repair your home routinely**
- **Take care of minor repairs and problems before they become large repairs and problems**



# 8. Keep it Thermally Controlled

- **Maintain adequate temperatures**
- **Protect residents from exposure to extreme cold or heat.**





# Eight Healthy Homes Principles

- **Eight Tips for Keeping a Healthy Home**
  - <https://www.hud.gov/sites/documents/HH8TIPS.PDF>
- **Healthy Housing Reference Manual**
  - <https://stacks.cdc.gov/view/cdc/21748>
- **Healthy Homes Program Guidance Manual**
  - [https://www.hud.gov/program\\_offices/healthy\\_homes/HHPGM](https://www.hud.gov/program_offices/healthy_homes/HHPGM)
- **REBUILD HEALTHY HOMES**
  - [https://www.hud.gov/sites/documents/HH\\_REBUILD\\_2015\\_DR.PDF](https://www.hud.gov/sites/documents/HH_REBUILD_2015_DR.PDF)
- **Post Disaster Housing Repair and Restoration**
  - [https://www.hud.gov/program\\_offices/healthy\\_homes/disasterrecovery](https://www.hud.gov/program_offices/healthy_homes/disasterrecovery)





# Office of Lead Hazard Control and Healthy Homes

## Safeguarding Home Environments: Addressing Environmental Risks for Aging and Disabled Populations in Public Housing

**Taneka Blue, OTD, OTR/L, CAPS**

Government Technical Representative

Older Adult Home Modification Program

Office of Lead Hazard Control and Healthy Homes

Department of Housing and Urban Development



# Home Injury Data



According to the [Centers for Disease Control and Prevention \(CDC\)](#) and the [National Electronic Surveillance System \(NEISS\)](#) database:

- ▶ 10,000+ people in America turn 65 daily – Public health advancements contributing to longer human lifecycles; life expectancy projected to continually expand, with 1/4 people expected to exceed age 65 by 2060. (article)
- ▶ Evidence indicates that risk for injuries sustained at home increases with age (65+) and:
  - ❑ Leading cause of independence loss, ER visits, overall wellness and capacity to age in place in older and disabled adults over age 65.
  - ❑ Falls claimed the lives of 38,000 adults over 65+ in 2021
  - ❑ contributed to at least 3 million ER visits due to older adult falls
- ▶ Are preventable with intentional, simple, low cost, and individualized interventions!!!

# Home Injury Factors



- ❑ Common housing related injuries affecting older and disabled individuals include: falls, fires/ burns, furniture imbalance/ tipping, strike by surfaces/ objects, fires, cuts, and poisonings, etc.

- ❑ Falls leading cause of injury, emergency room visits (fractures, internal organ injury), and death among adults over age 65
- ❑ 60% of falls happen in the home and are preventable. Common risk factors for household falls and injuries include:
  - ❑ Individual health factors: Vision/hearing loss, weakness, medication side effects, chronic conditions
  - ❑ Home Condition: Clutter, poor lighting, carbon monoxide, malfunctioning appliances, uneven floors/ surfaces, unstable bedding and furniture, poor electrical distribution, cooking malfunctions, pets

# Evidence-Based Preventative Measures



Study by Shields et al. suggests that majority of older adults hospitalized for housing related injuries return home after treatment.

Key action steps to reduce injury risk, hospitalizations, and improve life outcomes include consistent:

- ✓ Dr. visits
- ✓ Exercise/ Activity
- ✓ Medication
- ✓ Nutrition management
- ✓ Home hazard check-ups

CAPABLE study by Johns Hopkins reinforces the value of a multidisciplinary approach to fall prevention through Home modification programs

- Enable aging and disabled individuals to safely age in place with dignity

# Preventative Strategies for Household Injury Prevention

## ☐ Living Area:

- Remove throw rugs, secure/ tack down area rugs, move furniture from blocking walkway, install couch cane, replace dull/ dead lightbulbs, remove electrical cords, replace couches/ seats that are worn, too low, soft, or deep- replace with firm , fix/ replace unstable furniture, anchor furniture to wall, keep emergency contacts posted in common area of the home, keep station for phone, charging near sitting area

## ☐ Walkways/ Stairways:

- Remove objects to ensure clear walkway, install bilateral handrails to stairwell, install motion lighting to illuminate path, repair loose banisters and broken steps, install stairlift if mobility is challenging, install non-slip tread to stairs, install contrast tape and level thresholds/ doorway transitions; install shallow/ zero entry doorway threshold

## ☐ Kitchen:

- Replace cabinet and faucet knobs with lever handles; keep frequently used items within easy reach-between waist and shoulder level, install a task seat with handles for sitting/ rest breaks while cooking/ cleaning, install surge protector and avoid overloading electrical sockets, ensure appliances are in proper working order, install shelving/ racks at waist level, install smoke and carbon monoxide detectors throughout home

## ☐ Bedroom:

- Install bedrail to get in/ out of bed, install sturdy armchair to sit for daily dressing, install nightlight and install bright non-glare lightbulbs; install touch lamp at bedside, keep frequently used clothing, materials within easy reach, remove clutter and obstructions from the walking path, tuck bedding edges

## ☐ Bathroom:

- Install bathing bench, grab bars, anti- slip strips to floor, and handheld shower head in tub/ shower, install comfort height commode and grab bar, remove clutter and items from floor, install nightlight, monitor hot water temp to avoid scalding



**Federal Funding  
Opportunity**



# **The Older Adults Home Modification Program**

Funded by the U.S. Department of Housing and  
Urban Development's Office of Lead Hazard  
Control and Healthy Homes (OLHCHH)





# Program Purpose

The Older Adult Home Modification (OAHMP) Grant program takes a comprehensive and intentional approach to:

- ▶ Protect and provide support to low-income community- dwelling older adults from environmental-related health and safety hazards that impede independence.
- ▶ Promote independence, safe, and successful aging in place for vulnerable community- dwelling older adults.
- ▶ Reduce Healthcare costs by decreasing fall and injury risk The program also has the potential to reduce healthcare costs by decreasing fall and injury risk
- ▶ Demonstrate that providing client-focused, low- cost interventions in the homes of older adults is feasible and beneficial
- ▶ Build and enhance partner resources to develop the most cost-effective methods for identifying and controlling key housing-related health and safety hazards.
- ▶ Maintain affordable and accessible housing goals by improving existing owner-occupied housing stock.





# Program Services Model

- The OAHMP program model incorporates two core concepts:
  1. As people age, their needs change, and they may need adaptations to their physical environment to live safely at home
  2. For any intervention to have the highest impact, the individual's personal goals and needs must be a driver in determining the actual intervention.
- All services are voluntary for the beneficiary. Consent of the landlord, client, and/or legal guardian is required before delivery of services.
- Grantees are strongly encouraged to work with the client to complete all phases of the program model
  - The landlord, client or legal guardian may opt out at any time
- The home modifications and other services must be designed to improve general safety, improve accessibility, and improve functional abilities of the client to make tasks easier, reduce accidents and the risk of falls, and lengthen the amount of time the client can continue to safely live in their primary residence.



# Funding Overview



To date, HUD's OLHCHH awarded over \$75 million in grant funding to 75 experienced organizations to provide adaptive home adjustments through low-impact maintenance and repair projects in the primary residences of eligible low-income older Americans under its Older Adult Home Modification Program (OAHMP).

- Three-year grants with awards ranging from \$1,000,000- \$2,000,000 million each.
  - The average cost of home modifications per housing unit is \$5,000 (includes labor, contractor services, materials/ supplies associated with structural modifications and adaptive equipment
  - Funding is not linked to insurance or health coverage
- By Congressional mandate and appropriation law, at least one-third of the funding awarded to experienced organizations serving older adults in substantially rural communities each year
- Grant funds and resources are available to non-federal entities to increase the safety, accessibility, and functionality of homes owned and inhabited by low-income adults aged 62 and older to promote aging in place.



# Older Adult Home Modification Program (OAHMP) Goal

The goal of the home modification program is to enable low-income older adult homeowners to remain in their residence through low-cost, low barrier, high impact home modifications to reduce fall and injury risk, improve general safety, increase accessibility, and performance with activities of daily living.

- Enables community- dwelling older adults to remain in their private homes to “age in place,” rather than transition to nursing homes or other assisted care facilities.
- Home mods may also provide secondary/ mutual benefit to caregivers who serve the homeowner, and/or other members of the household



# Older Adult Home Modification Grant Funding (Funding Amounts Approximate by year)

2021 \$30M – 32 Awarded Grants

\$500,000

Minimum Award

\$1,000,000 ,000

Maximum Award

2022 \$15M - 14 Awarded Grants

\$500,000

Minimum Award

\$1,250,000 ,000

Maximum Award

2023 \$30M – 29 Grants

\$500,000

Minimum Award

\$1,250,000 ,000

Maximum Award

**2024- Now accepting proposals!!!**

\$1,000,000

Minimum Award

**Deadline: November 19, 2024**

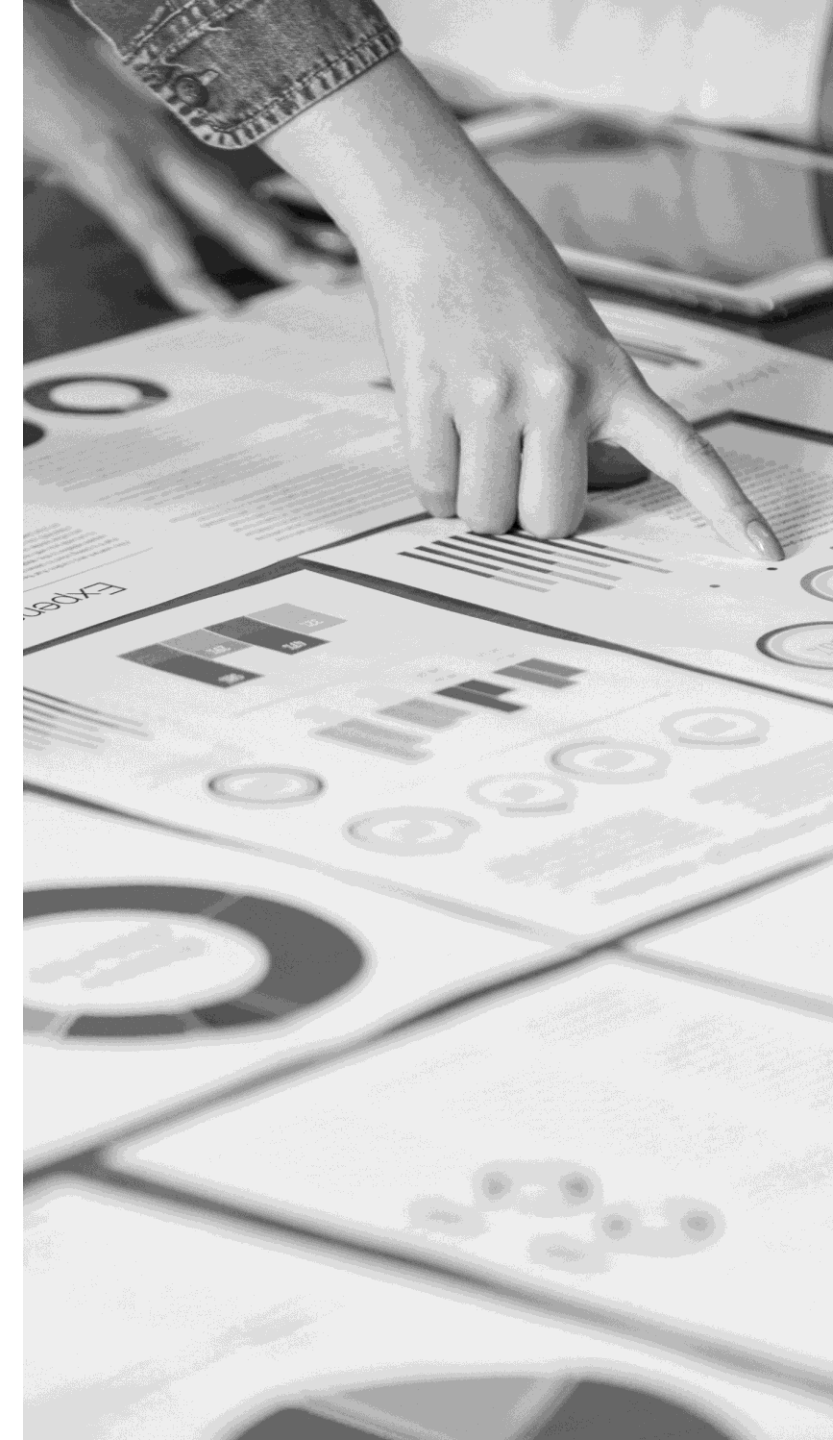
\$2,000,000

Maximum Award



# Who Can Apply?

<b>Eligible Applicants</b>	County, state, city, township, special district governments; Non-profit organizations having a 501(c)(3) status; Public housing agencies
<b>Program-Specific Requirements</b>	Eligible applicants need to have at least 3 years of experience in providing services to elderly persons.
<b>Urbanized Area or Substantially Rural Designation</b>	Applicants must designate in applications the target area as urbanized area and/or substantially rural area, utilizing the Tool developed by HUD.
<b>Program Beneficiaries</b>	Low Income homeowners and renters aged 62 or older
<b>Awards</b>	Cooperative Agreements: \$1,000,000- \$2,000,000 for a 36-month performance period





# Who Qualifies for Services?

## OAHMP Program Participant Eligibility Criteria:

- Low-Income homeowner and rental-occupants aged 62 and older of the primary residence where the home modifications will be installed
- Program initially open to Homeowners only- later expanded to renter-occupied homes with 2023 funding
- Low income: Household income at or below 80% of local area median income (AMI) living in rental and/or owner-occupied housing is eligible for grant assistance.



# What Can These Funds Pay For?

The following activities can be supported using OAHMP funding:

Installation of adaptive equipment and low impact modifications to support independence with Activities of Daily Living (Bathing, dressing, toileting, meal prep, housekeeping, etc.)

Installation of ramps, grab bars, and other adaptive measures to increase ability to safely enter, exit, and mobilize in/ around the home

Tools, and environmental modifications to support caregivers in providing care/ support for the older adult occupant

# What Can These Funds Pay For?

Fire safety equipment, Carbon Monoxide Testing and Monitor Placement

Replacement of railings, lighting, electrical hazards, ramps, or damaged stairs

Smart home/ technology modifications to support memory, vision, and hearing impairment concerns in the home

Resources to build capacity for home modification interventions such as trainings

Conducting targeted outreach and marketing for program enrollment



# OAHMP Funds Cannot Pay For

Applicants may **not** use grant funds for any of the following activities:

Purchase of rental or real property

Housing upgrades to increase property value/ bring a home up to code

Extensive rehabilitation, home remodeling, Roofing

16

Construction/demolition of housing units or detached buildings as a means of healthy home intervention and/or the replacement of such structures

Durable Medical Equipment

# OAHMP Funds Cannot Pay For

Applicants may not use grant funds for any of the following activities:

Purchase or Lease of Equipment. The purchase or lease of equipment having a per unit cost in excess of \$5,000 is not an allowable cost unless prior written approval is obtained from HUD

Medical treatment costs; The cost of services delivered by a registered nurse are allowable as a component of an evidence-based model.

Any work on a housing unit that is not a primary residence, leased, or owned by the beneficiary is not allowed<sup>17</sup>

Any work in tribally owned housing units is not allowed

Obvious duplication of Medicare/ Medicaid benefits received is not allowed (i.e. adaptive equipment already ordered by a medical provider)

**\*\*\*Grantee nor the beneficiary is required to determine whether Medicare or Medicaid benefits exist for the services or equipment provided under this grant**



# Client/ Home Assessment and Modifications



## Who is authorized to complete assessments?

- Qualified Licensed Occupational Therapist (OT)
- Qualified Licensed Occupational Therapy Assistant (COTA)
- Qualified Certified Aging-in-Place Specialist (CAPS)\*\*

## Who is authorized to complete home repairs/modifications?

- Licensed Contractor qualified to perform home modifications

\*\*While there is flexibility in using a CAPS or COTA to complete the client/home assessment and proposed modification plan, each aspect must be reviewed and approved by a licensed Occupational Therapist before any modifications begin\*\*



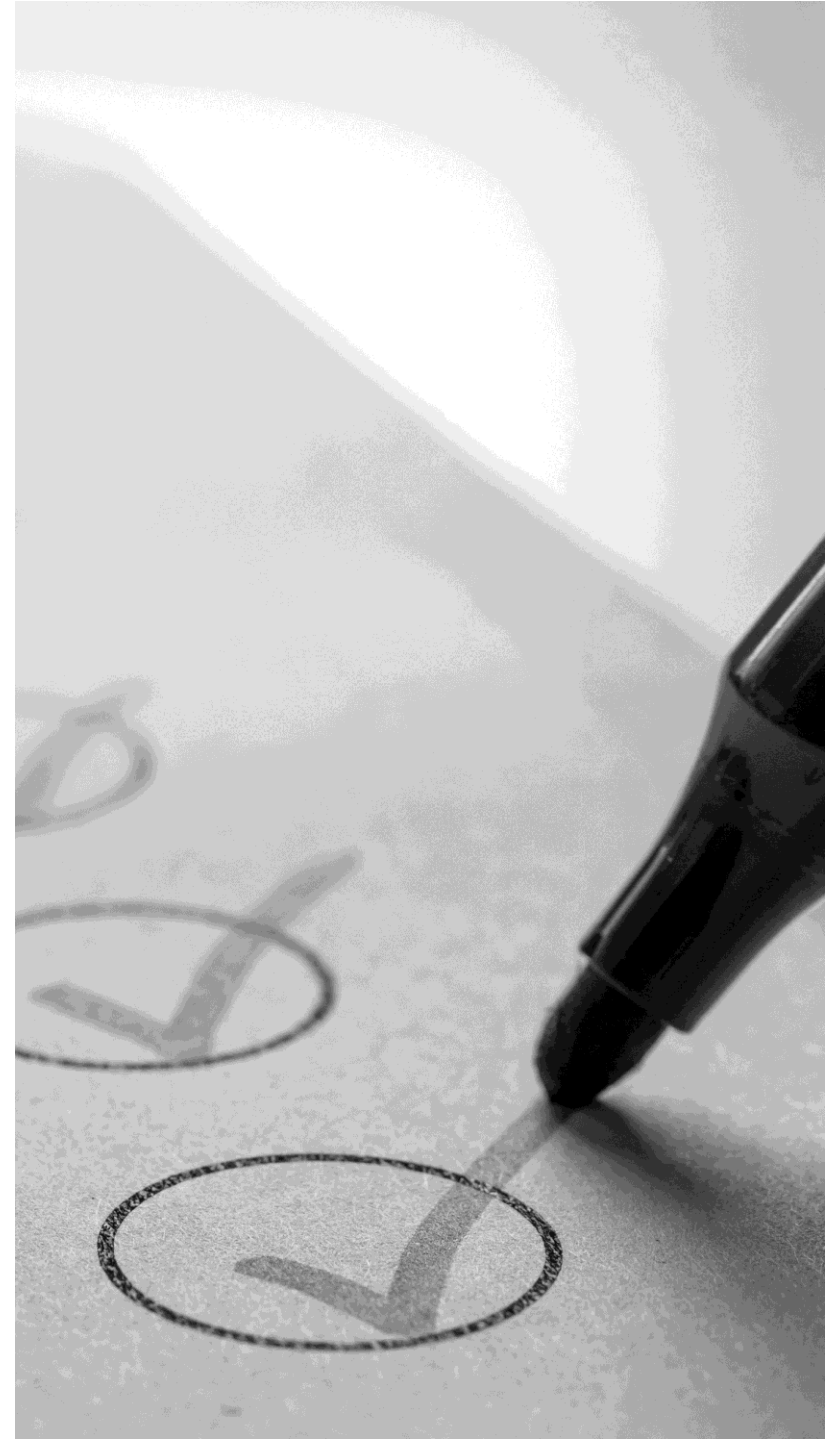
# Additional Program Criteria

Per 24 C.F.R. § 5.105(a), all OAHMP grantees to comply with all civil rights and nondiscrimination requirements and ensure that any additional beneficiary criteria does not result in discrimination against any federally protected class.

OAHMP grantees may lawfully impose additional beneficiary criteria within their individual programs such as:

1. The physical condition of the primary residence.
2. The home previously received home modification benefits under the OAHMP program.

Per 24 C.F.R. § 5.105(a). The grantee must comply with all civil rights and nondiscrimination requirements and ensure that any additional beneficiary criteria do not result in discrimination against any federally protected class.



# How to Find Out More About This Funding

OLHCHH Website

[https://www.hud.gov/program\\_offices/healthy\\_homes](https://www.hud.gov/program_offices/healthy_homes)

OLHCHH Funding Opportunities

[https://www.hud.gov/program\\_offices/healthy\\_homes/grant\\_opportunities](https://www.hud.gov/program_offices/healthy_homes/grant_opportunities)

Older Adult Home Modification Grant (OAHMP)

[https://www.hud.gov/program\\_offices/cfo/gmomgmt/grantsinfo/fundingopps/fy2023\\_oahmp](https://www.hud.gov/program_offices/cfo/gmomgmt/grantsinfo/fundingopps/fy2023_oahmp)

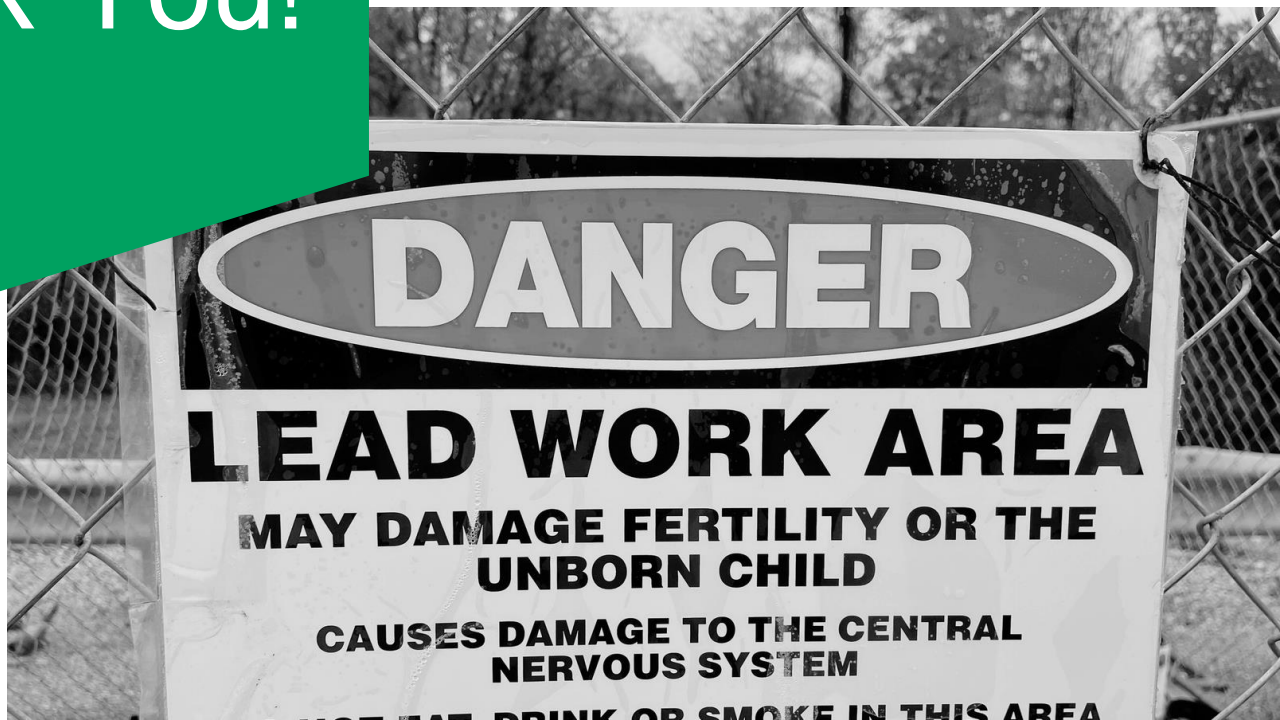
**\*\*For all interested applicants: It is imperative to review the Notice of Funding Opportunity (NOFO)\*\***

[https://www.hud.gov/sites/dfiles/CFO/images/Older\\_Adults\\_Home\\_Modification\\_FR-6800-N-69.pdf](https://www.hud.gov/sites/dfiles/CFO/images/Older_Adults_Home_Modification_FR-6800-N-69.pdf)





Thank You!



**DANGER**

**LEAD WORK AREA**

**MAY DAMAGE FERTILITY OR THE UNBORN CHILD**

**CAUSES DAMAGE TO THE CENTRAL NERVOUS SYSTEM**

**DO NOT EAT, DRINK OR SMOKE IN THIS AREA**



# Connect: Taneka Blue

OAHMP Program Administrator  
Government Technical Representative

[Taneka.M.Blue@HUD.gov](mailto:Taneka.M.Blue@HUD.gov)

(202) 402- 6846



# Guest Speaker



- **Diana Aguiar Briceno,**  
Housing Partnerships  
Manager



***San Diego PACE***  
*Program of All-Inclusive Care for the Elderly*



# Q & A Session



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### All Hazards Emergency Preparedness and Response Competencies for Health Center Staff

To successfully perform their assigned emergency/disaster roles, health center staff must understand how their organization will respond to hazards, including the use of altered management structures and modified operations. The National Nurse-Led Care Consortium (NNCC) and the Community Health Care Association of New York State (CHCANYS) created a set of competencies to improve the emergency and disaster preparedness of all health center staff. This publication provides a comprehensive overview of those competencies and sub-competencies, as well as a description of their development process. The competencies are intended to form the foundation of health center staff education and preparedness for all-hazards emergency and disaster response and will allow health centers to direct their limited training time and resources to cover the most essential preparedness aspects.

#### **ALL HAZARDS EMERGENCY PREPAREDNESS AND RESPONSE COMPETENCIES FOR HEALTH CENTER STAFF**

*Recommendations from the National Nurse-Led Care Consortium (NNCC) and Community Health Care Association of New York State (CHCANYS).*

September 2022

This publication is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling



# Upcoming Trainings

## **December 3rd, 2024- 3 PM EST - Vaccine Hesitancy and Misinformation as a Community Concern**

- *Registration:*

[https://uso2web.zoom.us/webinar/register/WN\\_qO81gu4GRUGNbTfvzLFwJQ](https://uso2web.zoom.us/webinar/register/WN_qO81gu4GRUGNbTfvzLFwJQ)

## **December 5, 12 & 19, 2024- 3 PM EST - Optimizing NPs for Health Equity: Increasing Access to Primary Care and Enhancing Hypertension Control (3-Part Series)**

- *Registration:*

[https://uso2web.zoom.us/webinar/register/WN\\_SPjCfxn\\_RrqWzS1yki4nrA](https://uso2web.zoom.us/webinar/register/WN_SPjCfxn_RrqWzS1yki4nrA)



# Thank You!

If you have any further questions  
or concerns for NNCC please reach out to  
Fatima Smith [fasmith@phmc.org](mailto:fasmith@phmc.org)

## Subscribe for the Latest Updates

Subscribing to our email newsletter is the best way to learn about all of  
NNCC's free webinars and other online learning opportunities.

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# Contact Us

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**Robert Burns**

Program Director  
Bobburns@namgt.com

**Jose Leon, M.D.**

Manager of Clinical Quality  
jose.leon@namgt.com

**Kevin Lombardi, M.D., M.P.H.**

Manager of Policy, Research, and  
Health Promotion  
Kevin@namgt.com

**Fide Pineda Sandoval, C.H.E.S.**

Training and Technical Assistance  
Manager  
Fide@namgt.com

**Chantel Moore, M.A.**

Manager of Communications  
Cmoore@namgt.com

Please contact our team for Training  
and Technical Support  
703-812-8822

**Thank you!**

