VILLAGE CARE
The Annual Report

Our 30th Anniversary
Celebrating Our Past,
Building Our Future
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Jan Zimmerman
Director, AIDS Day Treatment
Our 30th Year

All of us at Village Care of New York are celebrating the organization’s 30th anniversary. It’s a milestone that gives us an opportunity to reflect on the challenges of the past and on what we have accomplished, as well as to look forward as we labor to confront new and emerging needs of those we serve. In many ways, our next steps could be seen as building upon the solid foundation of care we have created for persons living with HIV/AIDS and for older adults. That would, however, belie the complexity of the tasks at hand and the diversity of needs that we face and seek to address. We see ourselves as partners with those we serve in healing body, mind and spirit. Our vision is to provide care that offers choice, promotes independence, respects privacy and treats individuals with dignity. For those with HIV infection, we will stand firm to continue to provide care and services for as long as the disease besets our community. We will continue to refine what we do in order to offer specialized services that address the impacts of the disease on individuals, meeting people wherever it is that they need us. For seniors, we will create a system of care that is home- and community-based to serve as a model for others, demonstrating that long-term care services can be delivered in more empowering settings, ending the reliance on unnecessary institutions. In this year’s annual report, we chronicle how Village Care has evolved over the years and how the organization at all levels has risen to meet community need, and we look at how we are engaging the demands ahead of us. Our story clearly shows Village Care’s continuity of purpose and our tradition of responding to critical community needs. All of what has been achieved is a tribute to board, staff and volunteers who are wholly committed to our mission of creating a caring and supportive environment for those individuals and families who entrust us with their care. Please join with us in Celebrating Our Past, Building Our Future.

Charles B. Persell
Chairman

Arthur Y. Webb
President & Chief Executive Officer

May 2007
Commitment to the Community

Village Care of New York’s storied history begins with the “rescuing” of a nursing home 30 years ago, and moves forward through a tumultuous era gripped by a deadly AIDS epidemic that demanded the development of new, innovative and unique services.

Today, facing an explosion in the population of older adults with the aging of the Baby Boomer generation, Village Care is confronting its future by taking a long, hard look at the nature and scope of long-term care services. This self-analysis, both of Village Care’s own services and the traditional offerings in long-term care, has led the organization to redefine what quality care is for those with disabling and chronic conditions. This includes reassessing the types of services and care that ought to be available, where they are most appropriately located and offered and what is desired by those in need.

Over the past decade, Village Care has dramatically shifted its geriatric program focus toward offerings that are home- and community-based, creating an array of services called SeniorChoices. The goal of SeniorChoices is to put the individual at the center of a complete complement of services – rehabilitative, medical, residential and social – that offer choice and access to care delivered at the appropriate time, and in the right place.
Over the past 30 years, Village Care has increased its capacity to respond to the needs of the community by meeting the demands of both an aging population and persons living with HIV/AIDS. Village Care is now substantially expanding the services it provides.

In many ways, the issues of aging and chronic illness are converging in the populations Village Care serves. Among those who are HIV positive, the treatment advancements that have brought longer lives have also contributed to a graying of the HIV population where the disease complicates and can worsen age-related frailties and disabilities. As the Baby Boom generation advances in age, it will swell the ranks of those expected to need care and attention because of persistent and intermittent frailty.

This has led Village Care to develop skill sets and crossover expertise in medical management, adherence and treatment appropriate for those being served throughout the entire spectrum of programs and services in SeniorChoices and the Network of AIDS Services.

The organization is now poised to embark on the latest phase of the transformation of its care for older adults with construction of a new Center for Rehabilitation and Nursing, a state-of-the-art residential facility that will anchor an expansive network of services bringing care to the community.

In AIDS care, Village Care is stepping up its outreach and has brought new services into its core competencies, including community organization and primary medical care. The Network of AIDS Services is flexible and nimble in meeting the diverse needs that exist today among those living with HIV infection.

Since the AIDS epidemic emerged, Village Care has pioneered innovative services that are patient-centered, fully involving individuals and their loved ones as partners in care.

Village Care has matured both as a provider of care and as an organization capable of managing complex operational demands as well as capital programs that often accompany program growth. As it has expanded services for both older adults and persons with HIV/AIDS, Village Care has engaged in a number of capital construction projects, which since the mid-1990s have included: The $76 million Rivington House skilled nursing facility; $4.2 million development of two adult day health centers; a $14.2 million senior living/assisted living residence; $6 million in Village Nursing Home renovations, and $1.3 million to develop the Red Hook Community Center in Brooklyn.

Over the past 30 years, Village Care has increased its capacity to respond to the needs of the community by meeting the demands of both an aging population and persons living with HIV/AIDS. Village Care is now substantially expanding the services it provides.
n 1975, a proprietary nursing home in the West Village neighborhood failed, leaving more than 240 residents and their families in the lurch.

Pessimism prevailed in the era. And for nursing homes it was no different. Scandals had rocked the industry, with overcrowding, dismal conditions and poor care contributing to a negative image of nursing homes that persists to today, and which providers are still trying to shake.

Conditions at the nursing home at 607 Hudson Street were not ideal. It, too, was overcrowded and care was poor. When the for-profit owners essentially walked away, leaving staff and residents to fend for themselves, officials at the New York State Department of Health were disinclined to do anything but commence action to shut down the facility.

Closure would have meant that those living in the facility would have been spread far and wide in nursing homes throughout the metropolitan area, away from familiar neighborhoods and distant from their families.

The state saw this as the best solution to a bad situation.

The people who lived in the Village and its environs, those who had family members in the nursing home, or who had relied on it in the past, saw it differently.

The 1970s was also a time of activism, and those with a stake in the downtown community recognized that not only could they “save” this facility and keep loved ones nearby, but they could also transform it into a caring and important resource for frail and chronically ill individuals.

Creating a Community Resource

"...all rivers must have a beginning."

American Indian proverb
Residents at Village Nursing Home are entertained by one of the many volunteers who regularly help out in our programs.
RESCUING A NURSING HOME

What came of this is the stuff of legends.

In nearly a two-year-long struggle against the odds, members of the community spearheaded a quest to raise money to purchase the failed nursing home and to block the state’s closure efforts. No donation was too small in this grassroots campaign as hats were passed at public meetings and numerous bake sales were held. They recruited whomever they could from within and without the community. Then-First Lady Rosalynn Carter championed their cause, visiting the nursing home with media in tow. “Rosalynn Carter comes to lunch at Village Nursing Home,” blared the headline on the front page of The Villager newspaper.

The new, not-for-profit Village Nursing Home was incorporated on September 20, 1977, after nearly eighteen months of receivership, and the board met for the first time that October.

The hard work of the community “saved” a much-needed resource and transformed it into a skilled nursing residence where staff and board were aware of community needs and dedicated to meeting them. Perhaps just as significantly, a tradition of responsiveness had been established and, likely unrecognized at the time, the foundation was laid to create a much broader community organization.

By the early 1980s, with a $6.5 million federal grant from the Department of Housing and Urban Development, major renovations to Village Nursing Home were completed and the once-overcrowded facility now housed a manageable 200 persons.

The new decade, however, brought a new, and deadly, challenge to the community.
Engaging the Fight Against a Deadly Disease

“This AIDS stuff is pretty scary. I hope I don't get it.”

Robert Mapplethorpe, photographer, who died at 42 of complications from AIDS on March 9, 1989

The members of the community who sat on the board of Village Nursing Home found themselves by the mid-1980s to be in a deadly epidemic’s epicenter. They were first-hand witnesses to the devastation this new incurable, untreatable disease was having as it cut a swath across Greenwich Village and its neighboring communities. The disease, which we now know as AIDS, was unmerciful – it took the community’s best and brightest along with those who toiled every day to keep things going. The disease didn’t care.

With the same concern about the needs of their community displayed nearly a decade earlier, the nursing home’s board of directors in 1985 committed itself to take action and began to plan its response to AIDS. Confronting the disease in those days meant mostly finding ways to provide comfort and support for those with the infection for which treatments were entirely experimental and most often ineffective. A white paper was prepared for the board, which then formed a special committee to lay out a formal plan. That plan, put forth in 1986, called for development of a day program, a home care program and a skilled nursing facility dedicated to AIDS patients.

Two years later, with the opening of the first AIDS Day Treatment Program in New York City, the board and staff created a model not for just the city and state, but for other municipalities across the country seeking to find ways to engage those living with HIV/AIDS with medical and alternative treatments along with social and support services.

The 20th Street day program was followed in 1991 with the city’s first AIDS-specific Certified Home Health Agency and in 1995 with a Community Case Management Program.

In the early 1990s, the organization began working on an ambitious goal to create its signature AIDS care project – a new 219-bed residential skilled nursing facility dedicated to the care of those with HIV infection that would be the capstone to a Network of AIDS Services. In 1992, a financing package for the $76 million capital project was secured that included a combination of state monies and donations from corporations, foundations and individuals.
Acupuncture has long been an offering at Village Care’s adult day health programs.
A nurse from the Certified Home Health Agency interviews a new patient in his apartment.
In 1995, Rivington House – The Nicholas A. Rango Health Care Facility opened in a historic lower East Side school building, the interior of which had been completely reconstructed to create a state-of-the-art nursing home for those with AIDS. The facility also included a second day treatment program. The residence was named after Nick Rango, a member of the Village Nursing Home board starting in 1981 and one of the leading figures in the organization in spearheading the response to the AIDS epidemic. He became director of the New York State AIDS Institute in 1988 where he remained until his death in 1993.

Within a year of Rivington House’s opening, new treatment drugs – protease inhibitors – increased the prospects for survival of everyone with the disease.

Renamed as Village Care of New York a year earlier, the organization in 1996 sponsored a leading edge conference at the New York Academy of Medicine where AIDS clinical experts and practitioners told of the promise of these new therapies, or drug “cocktails” as they were called by some. The conference also laid the foundation for treatment adherence concepts to help those with the disease cope with and manage the often-difficult regimens demanded by these new miracle drugs.

AIDS remains incurable and continues to claim many lives. As many as 4,000 die annually in New York City alone. For large numbers of those with the disease, however, treatments that first emerged in the mid-1990s, and which have been developed and refined since, have brought longer and healthier lives. This, in turn, has brought new challenges to those with the disease and to care providers, including meeting the demand for expanded out-patient services and supportive housing.

**Table: Revenue (in millions)**

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<tr>
<th>Year</th>
<th>Revenue (in millions)</th>
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<tr>
<td>1985</td>
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<td>1990</td>
<td>$10</td>
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**Graph: Admissions**
Village Care is committed to engaging the AIDS epidemic for as long as it continues to impact residents of New York City, and to creating the services that are required to meet the specific needs of individuals with HIV infection, whatever their life circumstances.

As the AIDS epidemic has evolved, Village Care’s Network of AIDS Services has adapted, creating new responses and addressing collateral health and psychosocial needs in an era when HIV can be effectively treated for many with the infection. Despite the great strides that have been made, however, AIDS continues to spread and has been growing in particular among women and black men. At the same time, other sub-groups within the infected population, such as those over 55, bring new treatment and service demands. Meanwhile, HIV surveillance statistics indicate that as much as a quarter of those in New York City who are HIV positive are unaware of their infection.

As a result, for Village Care, this has been a time of specialization in AIDS services.

Breakthrough treatments that have allowed many with HIV infection to live longer and healthier lives have also brought new demands on the Network in terms of providing access and appropriate services, whether it is in supporting individuals to maintain the often strict demands of medication regimens through a treatment adherence program, or in engaging persons through a unique “peer marketing” approach in which those living with HIV/AIDS reach out to other HIV-positive persons in the community to encourage testing and treatment. Prevention, both primary and secondary, has seen a renewed emphasis in the Network and new services, such as primary medical care and dental care, have been added to reach out to an underserved population that is often poor and clustered within minority populations.

In the Red Hook area of Brooklyn, where women make up 60 percent of the population and where 72 percent of the population is African-American, women of color are at particularly high risk for HIV infection. In reaching out to this community, Village Care established the Red Hook Community Center, which offers a safe haven for women and their families to connect to services, participate in educational programs and obtain information and AIDS prevention services. The Red Hook initiative has offered Village Care the opportunity to expand its community organizing skills and experience.
Despite the advancements in treatment, the AIDS epidemic continues to be entrenched in the New York community and there are many individuals who are not connected to services, or who have been disconnected from AIDS care. While there are many among today's HIV-infected population who have a more stable health situation, there are others with a wide range of medical and social needs, as well as those who are not receiving services at all who need prevention education and treatment.

Village Care’s commitment is to continue to expand its reach to these individuals in order to continue to improve the organization's capacity to meet the needs of difficult-to-serve populations and to address the diverse needs of those living with HIV/AIDS,
In the 1990s it was becoming clear that something was happening. The nation was beginning to see a cohort of older adults who were living longer, and staying healthier longer, for whom the available array of traditional long-term care services centered in the nursing home was neither appropriate nor desirable.

By the mid-1990s, Village Care, whose roots went deeply back to those community activists who responded to the needs of older adults in the 1970s, was looking to develop programs that would champion the concepts of supporting community living and promoting independence, privacy, respect and dignity. Already there were greater demands on Village Nursing Home, for example, as people needed and wanted a place, not where they would come to spend the rest of their days, but where they could receive services they needed to get them back on their feet and return home.

In recognition of this, the Village Care board outlined a vision of care for older adults that saw the development of a range of services focusing on community care.

In 1996, with funds from the state Legislature, the sixth floor of Village Nursing Home was reconstructed with new rehabilitation equipment and facilities and the Short-Term Rehabilitation Unit providing discrete residential care was opened.

Seemingly in rapid succession, new initiatives took form and were launched: Village Care Plus, Inc., a licensed home care agency; Village and Chelsea adult day health centers; The Village at 46th & Ten, apartment living for seniors; Village and Chelsea senior information centers.

With this dramatic expansion, by mid-2002, services for older adults that just a few years before had been concentrated in a single residential care facility, Village Nursing Home, were being transformed into an array of programs that provide care for those living at home and which promote community care options.

“We turn not older with years, but newer every day”.
Emily Dickinson, 19th Century American Poet
Keeping participants engaged is a critical role for adult day health center staff.
Village Care also needed to address the fact that not only was the existing Village Nursing Home an aging facility and physically incapable of meeting today’s care needs, but that large-scale residential care nursing facilities are increasingly out-of-step with the demands of individuals and their families seeking a continuing care remedy.

In 2004, the state selected Village Care as one of two long-term-care reform demonstration projects to evaluate and implement programs and to test new models that encourage community-based care and promote consumer choice. Subsequently, the organization conducted an arduous and comprehensive certificate of need process together with the New York State Department of Health to create a broad plan to transform long-term care in the extended Manhattan community that Village Care serves.

This plan calls for Village Care to:
- Decertify half of its skilled nursing home beds, and close the aging Village Nursing Home.
- Construct a new $42 million Center for Rehabilitation and Nursing, focusing on short-stay rehabilitation and on palliative and end-of-life care.
- Expand community care opportunities with a Medicaid Assisted Living Program and additional Long-Term Home Health Care Program slots.
- Establish a Program of All-inclusive Care for the Elderly (PACE), which provides a managed care option for persons who are nursing-home eligible to receive a wide range of at-home care and services.
- Create a care advocate program to provide professional guidance to help seniors and their families arrange services that best meet individual needs and help maximize independence.

The planned, new 105-bed Center for Rehabilitation and Nursing will provide the community with state-of-the-art, residential rehabilitation care in a unique setting designed to promote restoration and recovery. An affiliate of NYU’s renowned Rusk Rehabilitation Network, the Center will be the hub of Village Care’s expansive system of home and community-based care. This new facility will also include a discrete palliative care/end-of-life residential program that will be a pleasant, comforting and caring place for individuals and their families. The Center has been designed to create intimate and home-like areas that will function like neighborhoods, with a bright and airy open-space design, a unique interior garden conducive to promoting healing and a roof deck and garden. Other amenities, such as a spa on each residential floor, will break with the traditional concept of a nursing facility.

This Center will be a place of healing and hope, and of comfort and compassion.

With the expansion and addition of new services, Village Care expects that by 2010 its SeniorChoices complement will be able to nearly double the number of persons with nursing home-level needs receiving care to some 1,550 individuals annually. At the same time, as many as 800 persons at home will be able to access needed services such as home health care, home care and health clinic services that will help them continue to live independently; this represents more than three times the number currently served.
Village Care’s short-stay rehabilitation program offers appropriate and timely interventions to help residents recover quickly and return home.

Village Care will offer a full array of services dominated by community options and choices with high-quality, inpatient rehabilitation care and a compassionate end-of-life environment, all designed to address the impact of persistent and intermittent frailty in the most optimal way possible.

Village Care’s vision is to make growing old in the community sustainable, by offering older adults access to services and supports that are affordable, safer and which effectively combine medical and non-medical interventions. The organization envisions care that is patient- and consumer-focused and which offers care management and advocacy for older adults and their families both within its SeniorChoices programs and in the broader community.
Financial Information

CONSOLIDATED CONSOLIDATED STATEMENT OF ACTIVITIES
DECEMBER 31, 2006 AND 2005

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<th>Revenues, Gains and Other Support</th>
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<th>2005</th>
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<td>Grants &amp; contributions</td>
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<td><strong>Net assets—end of year</strong></td>
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<td><strong>$35,745,259</strong></td>
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### CONSOLIDATED BALANCE SHEET
**DECEMBER 31, 2006 AND 2005**

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<th>2006</th>
<th>2005</th>
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<td><strong>Current Assets</strong></td>
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<td>Accounts receivable</td>
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<td><strong>Liabilities and Net Assets</strong></td>
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<td>Accounts payable and accrued expenses</td>
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<td><strong>Total unrestricted net assets</strong></td>
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<tr>
<td><strong>Total liabilities and net assets</strong></td>
<td>$123,398,489</td>
<td>$117,206,530</td>
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</tbody>
</table>
## Donors

Through the support of corporations and foundations and the generosity of individual donors, Village Care of New York receives considerable assistance each year in its efforts to respond to community needs and to expand the organization’s caring reach.

These gifts help make sure that Village Care can continue its innovative pursuit of care and services for older adults and persons living with HIV/AIDS that provide both high quality and consumer satisfaction.

### Giving Level

**$50,000 +**
- Carnegie Corporation of New York

**$25,000 - $49,999**
- Gay Men’s Health Crisis, Inc.
- Estate of James Wilder Green
- Jerome Robbins Foundation
- Mr. David H. Sidwell
- J. T. Tai & Company Foundation, Inc.
- Mr. Henry van Ameringen

**$10,000 - $24,999**
- Alexander Infusion, LLC
d/b/a Avanti Health Care Services
- Bank of America
- Mr. Milton Gottlieb and Ms. Barbara Gottlieb
- Mr. Peter Gottlieb and Mrs. Roberta Gottlieb
- M-A-C AIDS Fund
- The Bruce & Nancy McGaw Foundation, Ltd.
- Mr. and Mrs. Trevor R. Stewart
- Stockamp & Associates, Inc.
- Stonebridge Medical

**$5,000 - $9,999**
- 1199 SEIU New York’s Health & Human Services Union
- Boehringer Ingelheim Cares Foundation, Inc.
- Evercare New York, Inc.
- Isabella Geriatric Center, Inc.
- Michael Anthony Contracting Corp.
- Milbank Memorial Fund
- Perkins Eastman Architects, P.C.
- Dr. Evelyn Redlich
- Roche Laboratories Incorporated
- Mr. Barry Skovgaard and Mr. Marc Wolinsky

**$2,500 - $4,999**
- Anonymous
- Bloomberg L.P.
- Bronx AIDS Services
- Ms. Teresa Civello
- Continuing Care Leadership Coalition Cortel Business Solutions
- D&J Ambulette Service
- Gallagher Benefit Services, Inc.
- Hamilton Cavanaugh & Associates
- Mr. Seymour Klausner and Ms. Margaret McCarthy
- The Edith and Herbert Lehman Foundation, Inc.
- The Litwin Foundation, Inc.
- Loeb & Troper C.P.A.
- Morgan Construction Enterprises, Inc.
- New York University Office of Government & Community Affairs
- Professional Placement Associates, Inc.
- Travers, O’keefe & Associates, Inc.
- Vanguard Charitable Endowment Program

**$1,500 - $2,499**
- Mr. Alan Andolsen and Mrs. Barbara Andolsen
- Ms. Elizabeth Butson
- Mr. Herbert H. Fillmore
- Dr. Daniel M. Fox
- Goldman, Sachs & Co.
- Hirschen, Singer & Epstein LLP
- Hudson Castle Group, Inc.
- Mr. Jon Klein and Ms. Sue Klein
- Ms. Glennna R. Michaels
- Mr. Gopiganth Om.Raju
- Ms. Patricia M. Owens
- Mr. Carl Pellicane
- Mr. Charles Persell and Mrs. Caroline Persell
- Mr. Lawrence Peters
- Nicholas Rango Revocable Trust
- Ms. Nancy Schwartz-Weinstock and Mr. Steven P. Weinstock
- Tibotec Therapeutics
- Unitex Textile Rental Services

**$1,000 - $1,499**
- Bedford Barrow Commerce Block Association
- Cabrini Eldercare Consortium
- Cabrini Nursing Home
- Mrs. Emma DeVito and Mr. Robert DeVito
- Mr. and Mrs. Sanjay Dutt
- Mr. William Eppel
- Mr. and Mrs. John Fabian
- Rev. Msgr. Charles J. Fahey
- Fidelity Charitable Gift Fund
- Mr. David Finkelstein
Dr. Ellen Flaherty and Mr. Mel Aaron  
Mr. Louis J. and Mrs. Linda A. Ganim  
HSBC  
Dr. Lambert N. King  
M & M Sanitation  
Med-Apparel Services, Inc.  
Morningside House Nursing Home Co., Inc.  
Ms. Deborah Pines  
Mr. Ira Pittelman and Mrs. Carole Pittelman  
Precision Health Inc.  
RBC Dain Rauscher  
Mr. Jeffrey Sachs  
Shannon Group  
St. Vincent’s Hospital  
Mr. Joseph Tringali  
Mr. Arthur Y. Webb and Mrs. Sally Webb  
Wise Construction  

$500 - $999  
Mr. Farouk Abdool  
Ms. Kathleen S. Andersen  
Anonymous  
Ms. Eleanor S. Applewhaite  
Mr. Robert J. Aquino  
Bendiner & Schlesinger, Inc.  
Mr. William Bernstein and Mrs. Martha Olson  
Mr. Jerome E. Biga  
Mr. John G. Bove  
Mr. Michael E. Brown  
Canon Business Solutions-Northeast, Inc.  
The Carl Jacobs Foundation  
Mr. Michael T. Clarkston  
Collins, Dobkin & Miller LLP  
Ms. Valerie Collins  
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Dashal 20, LLC  
Ms. Marilyn O. Dimling  
Prof. Rose Dobrof  
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Ms. Virginia Dwan  
Mr. Jeffrey Edelstein and Mr. Mark Finley  
Far West Tenth Street Block Association  
Gilead Sciences, Inc.  
Mrs. Mary Grasso and Dr. Cono Grasso  
Greenwich Village Funeral Home  
Mr. J. Roberto Gutierrez and Mrs. Rosita Gutierrez  
Hachette Filipacchi Magazines, Inc.  
The Health Search Group  
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Mr. Calvin J. Jackson  
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Love Dog Adventures, LLC  
James A. Macdonald Foundation  
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The New York Community Trust  
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Premier Consulting Group, Inc.  
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Mr. Richard S. Wallgren  
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Acme Exterminating  
Ms. Rebecca Acosta-Castro  
Mr. John M. Ahern  
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21
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Mr. Mark Rosenberg and Rabbi Rachel Mikva
Dr. Allan Rosenberg
Royal Health Care Services
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Ms. Shirley A. Wright
Ms. Ann Wyatt
Mr. Osmay F. Yalis
Ms. Dawn M. Zappetti
Mr. Timothy Zdyb
Ms. Katherine Zito
Mission Statement

Village Care of New York is a community-based, not-for-profit service organization serving the elderly, persons living with AIDS and individuals in need of medical and rehabilitation services. In so doing, we are guided by the people we serve in concert with staff, administration and the Board of Directors.

The organization’s mission is to create a caring and supportive environment in which all whom we serve, including their families and partners, are respected for their uniqueness and are encouraged to treat themselves and others with kindness and respect. We strive to engage individuals in an interactive process of healing the body, mind and spirit in a therapeutic environment accepting people as they are so as to nurture good physical and mental health. We recognize and support self-directed care so that people we serve can maintain their independence and control their own care.

Our mission and the programs we offer reflect the experience from our many years of assisting people as they face the physical, emotional and spiritual challenges associated with illness, aging, disability and death. We are guided by these experiences and the knowledge gained in a partnership between the people we serve and ourselves as we make our mission a reality for those in our care.

We constantly strive to improve our performance and programs through innovations in services and by helping others in a supportive environment. We respect the contributions of all our staff and encourage them to participate in the planning of our programs and activities. We support and engage in research to increase our competency and knowledge in the delivery of care.

Our commitment to quality care builds on the proven effectiveness of current standards and practices, and integrates new and emerging technologies, protocols and approaches to optimize the quality of care and quality of life of the people we serve. We embrace services that are holistic in nature, integrating traditional with alternative therapies to support the individual, while operating within the guidelines of New York State, federal and local codes.

We share a mutual obligation to strengthen our competency in relationships with our diverse communities where we work to respect people of all cultures, genders, sexual orientation, races, ages, and creeds in an environment of hope and acceptance. Competency includes improving the health of our community by increasing measurable access and availability of services, and partnering with others to mutually benefit the communities we serve.

Village Care of New York is committed to maintaining fiscal viability and the credibility of our programs while making prudent investments in new efforts and programs to meet the needs of the individuals and groups in our care. By taking measured risks, our organization seeks to forge new approaches and establish new pathways for the people we serve.

Leadership is key to our success. Our organization encourages and supports staff to seek leadership roles within the organization and within the communities it serves and the organization itself seeks a leadership role in the broader professional, advocacy, and civic arenas.
Programs

NETWORK OF AIDS SERVICES

AIDS Day Treatment
121B West 20th Street
New York, New York 10011
Tel: 212.337.9220
Fax: 212.633.6587

45 Rivington Street
New York, New York 10002
Tel: 212.539.6450
Fax: 212.539.6455

Certified Home Health Agency
112 Charles Street
New York, New York 10014
Tel: 212.337.5611
Fax: 212.366.5317

Community Case Management Program
112 Charles Street
New York, New York 10014
Tel: 212.337.5705
Fax: 212.337.5759

Rivington House
Nicholas A. Rango
Health Care Facility
45 Rivington Street
New York, New York 10002
Tel: 212.477.3100
Fax: 212.477.3121

Treatment Adherence Program
112 Charles Street
New York, New York 10014
Tel: 212.337.5854
Fax: 212.337.5787

Village Care Health Clinic
121B West 20th Street
New York, New York 10011
Tel: 212.337.9290
Fax: 212.337.9275

45 Rivington Street
New York, New York 10002
Tel: 212.539.6265
Fax: 212.539.6391

SENIORCHOICES

Chelsea Adult Day Health Center
121A West 20th Street
New York, New York 10011
Tel: 212.337.9260
Fax: 212.337.9299

Village Adult Day Health Center
644 Greenwich Street
New York, New York 10014
Tel: 212.337.5870
Fax: 212.337.5899

Village Nursing Home
607 Hudson Street
New York, New York 10014
Tel: 212.337.9400
Fax: 212.255.9459

The Village at 46th & Ten
510 West 46th Street
New York, New York 10036
Tel: 212.977.4600
Fax: 212.977.4848
Website: www.villagehousing.org

Village Senior Information Centers
51 Seventh Avenue
New York, New York 10011
Tel: 212.337.5800
Fax: 212.367.1905

45 Rivington Street
New York, New York 10002
Tel: 212.539.6265
Fax: 212.539.6391

OTHER SERVICES

Long-Term Home Health Care Program
112 Charles Street
New York, New York 10014
Tel: 212.337.5611
Fax: 212.366.6516

Village Care Plus, Inc
Licensed Home Care
154 Christopher Street
New York, New York 10014
Tel: 212.337.5730
Fax: 212.366.1177

ADMINISTRATIVE LOCATIONS

Corporate Office
154 Christopher Street, 1st Fl.
New York, New York 10014
Tel: 212.337.5600
Fax: 212.366.5528

Village Center for Care Fund
154 Christopher Street
New York, New York 10014
Tel: 212.337.5750
Fax: 212.337.5759

www.vcny.org
Email: info@vcny.org
We’re here for you.

154 Christopher Street
New York, New York 10014
Tel: 212.337.5600
Fax: 212.366.5528

www.vcny.org