

HHS COMMITTEE #4
April 28, 2016

WORKSESSION

MEMORANDUM

April 26, 2016

TO: Health and Human Services Committee

FROM: Linda McMillan, Senior Legislative Analyst *LMM*

SUBJECT: **Worksession:** FY17 Recommended Operating Budget
Department of Health and Human Services
Aging and Disability Services

Those expected for this worksession:

Uma Ahluwalia, Director, Department of Health and Human Services
Dr. Jay Kenney, Chief, Aging and Disability Services
Patricia Stromberg, DHHS Management and Budget
Rachel Silberman, Office of Management and Budget

Excerpt from the County Executive's Recommended Budget for Aging and Disability Services is attached at © 1-5. Also, attached at © 90- is a read-ahead paper on Home and Community Based Support Services from the December 2015 Summit on Aging. There were several of these paper on topics such as health and wellness, housing, and safety. This paper contains senior with disabilities and dementia, as well as challenges for caregivers. At ©97-100 include identified challenges and recommendations.

Aging and Disability Overview

For FY17, Aging and Disability Services is organized into 11 program areas. The County Executive is recommending funding of \$43,241,334. This is a \$1,787,164 increase from the FY16 Approved funding of \$41,454,170. The largest increase is a \$1,102,291 increase to the

supplemental payment to providers of services to the Developmentally Disabled (DD Supplement). The table on the following page shows the change in dollars since FY13.

Aging and Disability Services Expenditures in \$000's	FY13 Budget	FY14 Budget	FY15 Budget	FY16 Budget	FY17 Rec	Change FY16-17
Community Support Network for People with Disabilities	15,167	16,016	16,992	15,638	16,525	5.7%
Assessment and Continuing Case Management Services	6,954	7,121	7,654	7,955	8,695	9.3%
Assisted Living Services	1,934	1,899	2,076	2,090	2,052	-1.8%
Community First Choice	1,788	2,002	4,423	2,745	2,760	0.5%
In-Home Aide Services/Home Care Services	4,401	4,292	4,152	4,490	4,345	-3.2%
Aging and Disability Resource Unit	834	825	848	868	935	7.7%
Omsbudman Services	655	654	717	778	795	2.2%
Respite Care	928	946	980	984	1,092	11.0%
Senior Community Services	2,266	2,464	2,713	2,805	2,845	1.4%
Senior Nutrition Program	2,454	2,550	2,424	2,623	2,721	3.7%
Service Area Administration	405	460	480	478	475	-0.6%
TOTAL	37,786	39,229	43,459	41,454	43,240	4.3%

As background for this discussion, attached at © 6-27 is the FY15 Annual Report of the **Commission on Aging**, at © 28-29 is the Commission's Budget Statement, and at © 30-33 the Commission's letter to Chair Leventhal discussion FY17 priorities. Information in the Annual Report includes:

- Area Agency on Aging staff answered 23,290 calls for information,
- The Long-term Care Ombudsman Program conducted more than 3,500 visits and investigated 416 formal complaints,
- The Public Guardianship program served 126 people,
- More than 390,000 meals were served to 6,384 people through the senior nutrition plan,
- The Nurses Team conducted 2,226 Adult Evaluations and Review Services evaluations and nurse monitoring services are provided to more than 1,700 people through Community First Choice.
- The Summit on Aging was held December 3, 2015. At the Summit it was announced that Montgomery County was certified as a World Health Organization Age-Friendly City/Community.
- The Commission continued its focus on caregiver support. Its Stakeholder's Forum resulted in 16 recommendations that are included at © 23-24.

Attached at © 34-56 is the FY15 Annual Report of the **Commission on People with Disabilities** at © 57 is Commission's Budget Priorities, and at © 58-59 a letter in support of an increase to the DD Supplement. Information in the Annual Report includes:

- In 2014, the American Community Survey estimated that there are 80,427 people living in Montgomery County with a disability in the categories used (For example "with a self-care difficulty" does not show until age 5 and "with an independent living difficulty" does not show until age 18.)
- In Montgomery County Public Schools, as of October 2013, there were 17,761 students with disabilities enrolled in Special Education (about 11.5% of the student population.
- In October 2014, Statewide there were 125 children, adults, and their families on the waitlist for Crisis Resolution, 1,305 people were on the Crisis Prevention category, and 6,924 were in the Current Request category.
- As of January 2015, Montgomery County had 1,076 people on the wait list. Twenty-six people were in need of Crisis Resolution and 97 Crisis Prevention.

The FY15 Annual Report included two policy recommendations:

1. Increase health prevention strategies of secondary illnesses for people with disabilities.
2. Develop strategies to eliminate the State developmental Disabilities Waiting List.

Attached at © 60-89 is the FY15 Annual Report of the **Commission on Veterans Affairs**.

Some information about Montgomery County Veterans includes:

- 2015 was the Year of Montgomery County Veterans and their Families.
- In 2014 the U.S. Census estimated that there were 44,257 Veterans living in Montgomery County. This was about 6% of the County population age 18 and older.
- Almost 50% of Veterans served in Gulf War I and Gulf War II and about 25% in Vietnam.
- Almost 86% of Veterans are male and about 14% are female.
- About 36% of Veterans were between the ages of 18 and 54, 34% were between the ages of 55 and 74, and 28% were 75 years old or older.
- As of August 2014, the County had hired 94 Veterans and 4 Veterans with Disabilities through the non-competitive appointment of qualified persons.
- Supported the Zero:2016 effort to functionally end Veterans Homelessness. In addition to the \$500,000 Council appropriation, the report notes that the County has received 86 VASH Vouchers over the last five years, each is worth about \$13,120 per year, or a total of about \$1.1 million in annual housing assistance.
- Included information on the County's first Salute to Vietnam Veterans held October 24, 2015 and hosted by Bob Schieffer.

The FY15 Annual Report included two policy recommendations:

1. Support efforts and funding to end Veteran homelessness in Zero:2016
2. Support increased access to health/mental health for Veterans. The Commission asked that information on services be provided on County Ride-On buses and that the Mental Health Court consider how to serve Veterans.

Changes by Program Area

A. Community First Choice

Total FY17 recommended funding is \$2,760,751 for this program area that administers and operates Community First Choice (CFC), Maryland's Long Term Care Medicaid program. CFC is designed to allow people in need of long-term care to live in the community instead of institutions. The Maryland Department of Health and Mental Hygiene requires that all the local health departments provide Nurse Monitoring services but allows for this specific service to be contracted out. As the designated department the Montgomery County Department of Health and Human Services (MCDHHS) is responsible for "Nurse Monitoring" services with the objective of enhancing oversight and quality assurance of home-based personal care assistance and supportive services. MCDHHS is responsible for compliance with Medicaid Regulations, billing DHMH as a fee for service in 15 minutes increments, audit participation, notifying applicants in writing when they are not found to meet program eligibility criteria, contract management with our vendors, regular site visits to vendor agencies to ensure compliance with Medicaid regulations, review of incident reports and approval of each CFC participant's plan of service.

1. Multi-program Adjustments \$15,937

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program.

Council staff recommendation: **Approve as recommended by the Executive.**

B. Aging and Disability Services

Total FY17 recommended funding is \$934,787 for this program area that assists seniors, people with disabilities, and their families in defining service needs, locating required services and facilitating the application process to access services.

1. Multi-program Adjustments \$66,820

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program.

Council staff recommendation: **Approve as recommended by the Executive.**

C. Assessment and Continuing Case Management Services

Total FY17 recommended funding is \$8,695,051 for this program area that provides multi-disciplinary assessments, care planning, and case management services to frail seniors and

adults with disabilities to prevent abuse, neglect, exploitation, and inappropriate institutionalizations. Services include Adult Protective Services, Adult Evaluation and Review Services (AERS), Statewide Evaluation and Planning Services, Social Services to Adults, and Public Guardianship.

**1. Community First Choice (CFC) Adult Evaluation and Review Services (AERS)
\$200,000**

DHHS has shared that with this funding Adult Evaluation and Review Services (AERS) will be provided to an additional 720 eligible residents (eligibility is based on Medicaid eligibility financially and requiring a nursing home level of care). This funding will be used to hire broker staffing to complete additional AERS evaluations.

The number of AERS evaluations completed in FY15 was 3,414. The State does not allow a wait list. DHHS says that currently about 180 assessments are delayed beyond the required turnaround time of 15 days, but this number is fluid.

Council staff was concerned whether the increase in AERS evaluations would have an impact on CFC if the evaluations resulted in more people being eligible for the program. DHHS has responded:

If more people are approved for CFC, the main impact in the Department would fall on the CFC Nurse Monitoring program. The State requires that program to send nurses into CFC clients' homes to monitor their overall health. The CFC Supports Planning program (SPA) would not be directly affected, as that program caps the number of clients that it serves. However, private SPAs serving Montgomery County clients under contract with the State might need to add staff to meet the demand. The same is true of private personal care agencies serving CFC clients.

Council staff recommendation: **Approve as recommended by the Executive.**

**2. Medical Adult Daycare Services to 18 Additional Clients
\$100,000**

Currently there are 40 clients being served in Adult Medical Daycare with two (2) of the clients are people under the age of 65 with a disability. Services are provided two days per week for 52 weeks. With the additional funding, DHHS expects to serve 56 clients.

Council staff recommendation: **Approve as recommended by the Executive.**

3. Multi-program Adjustments
\$440,345

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program. This adjustment includes the reallocation of \$71,000 of operating expenses from senior community programs and a reallocation of \$221,000 in charge-backs from the Home Care and Assisted Living Services programs.

Council staff recommendation: **Approve as recommended by the Executive.**

Issue: Social Services to Adults (SSTA)

The Commission on Aging says that as of December 2015 there are 205 residents on the SSTA waiting list for case management services. They are requesting \$80,000 for one full time case manager to serve an additional 50 people. The Council also received testimony from GROWS supporting this position. CountyStat listed as one of the “factors restricting performance,” limited case management capacity due to budget constraints.

1. Is the case manager to client ratio 1:50 as implied by the request from the Commission on Aging?

Yes

2. As of March 1 there were two vacant Social Worker positions “on hold” in Community First Choice and two Program Specialist positions in the hiring process for Service Coordination (one had been vacant since 2013). Will the hiring of the two positions impact the wait list for SSTA?

No—the hiring of these 2 Social Work position in the CFC program would not affect the SSTA caseload. HHS is reclassifying these two positions to Community Health Nurse II positions to address the demand for AERS evaluations. (See AERS section above).

If the Council wanted to add resources, is a new position needed or are dollars needed to allow one of the Social Worker positions to be filled?

The Department is not requesting additional resources.

3. Is \$80,000 the correct amount for a SSTA case manager?

The total annual salary and fringe for a 1.0FTE SWIII position is \$94,297 (\$74,022 salary and \$20,275 fringe).

	FY12	FY13	FY14	FY15	FY16 (7 months)
SSTA Assessments	27	16	30	30	20
On-going SSTA Cases	333	372	365	430	403
Number of Cases on SSTA Waitlist	130	198	237	172	206

The data indicates that in FY15 DHHS did make efforts to reduce the wait list, which appears to be growing in FY16. The number of ongoing cases is increasing and does appear to warrant an additional case worker to handle the ongoing caseload.

Council staff recommendation: Add \$70,722 to the reconciliation list add a Social Worker III. This amount is based on the \$94,297 full-year cost lapsed for 3 months.

CountyStat has as a part of the Performance Improvement Plan, “Increase coordination and teamwork between case management staff and staff with the Better Living at Home program.” DHHS has provided some background on this recommendation and how DHHS is working to improve this coordination.

Better Living at Home (BL@H) Occupational Therapist staff jointly review all referrals for In-Home Aide Services made by Case management staff with the Home Care managers to determine priority status for OT assessment. This multidisciplinary review has improved communication among BL@H, Home Care and Case Management staff.

D. Service Area Administration

Total FY17 recommended funding is \$474,982 for this program that provides service wide administration.

1. Multi-program Adjustments (\$3,899)

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program.

Council staff recommendation: Approve as recommended by the Executive.

E. Community Support Network for People with Disabilities

Total FY17 recommended funding is \$16,525,461 for this program area that provides supportive employment, service coordination for young people under the Autism Waiver, resources and supports to families with children with developmental disabilities ages 3 to 13, services to help individuals stay in their homes, and general support to developmentally disabled clients and their families. The program also monitors contracts that provide services to people with disabilities including visual and hearing impairment. The program area conducts site visits to homes that serve Developmentally Disabled clients and provides financial assistance to providers that serve adults with Developmental Disabilities.

1. Enrollment Increase and Service Delivery for Developmental Disability Services Providers (DD Supplement)

\$1,053,395

2. Annualize FY16 DD Enhance for Differential Between Wages Paid and County Minimum Wage. (DD Supplement)

\$48,896

The County Executive is recommending a total of \$1,102,291 in additional funding for the "DD Supplement" to annualize the FY16 funding and to respond to the request from InterACC/DD to have the DD Supplement be equal to 8.3% of State funding to eligible organizations. (101-104)

FY16 Approved DD Supplement	\$10,542,529
CE Rec (8.3% match)	1,053,395
<u>CE Rec (annualize FY16)</u>	<u>48,896</u>
TOTAL CE Recommended	\$11,644,820

The FY16 Approved funding was adjusted to provide sufficient funds for direct service providers to be paid 25% above minimum wage (this is on-average and some employees may be paid below this amount.)

In 2016, Montgomery County's minimum wage will increase from \$9.55 to \$10.75. InterACC/DD is asking the Council to add the funds needed to continue the FY16 policy of 125% of minimum wage. **The original request was for an additional \$5,046,685 to the Executive's budget. Council staff has very recently received information that the revised estimate is \$2,155,899. This revision is based on a lower number of estimated hours provided by direct service workers. These hours are from a wage survey conducted by DHHS.**

Council staff has had limited time to review the new calculation. However, Council staff suggests there are two important questions:

1. If the minimum wage is higher, must the differential continue to be 25%?
2. Is the current thinking about this supplement, that there is a percentage match against State dollars and a differential to minimum wage, financially sustainable for the County?

Council staff provides the following observations:

- The current average wage of 125% above the minimum wage of \$9.55 is \$11.94.
- The new 2016 wage at 125% above minimum would be \$13.44
- If funding were provided to allow wages to be 20% above the 2016 minimum wage the rate would be \$12.90, an 8% increase from the current \$11.94.
- While this is substantial, it is less than the 12.5% increase in the minimum wage.

- The HHS Committee has recommended a maximum 3% increase in the DHHS contracts with non-profit providers.
- If the Council funds an additional \$2,155,899, the total increase in the DD Supplement from FY16 to FY17 would be \$3,258,190; a 31% increase.
- InterACC/DD is extremely concerned about turnover. They believe that not providing a 25% differential above minimum wage will increase turnover.
- There is another substantial increase in the minimum wage that will have a similar impact in FY18.
- As State rates increase, the amount required for a match that is a percentage of State funding will increase as well.

Council staff recommendation: Defer a final recommendation until the Committee's follow-up session to allow time for options to be developed that would provide the cost for having a wage that is 15%, 20%, and 25% above minimum wage. It is critical the amounts are agreed to by InterACC/DD, OMB, and Council understanding that InterACC/DD recommends 25% above minimum wage.

Council staff also urges the Committee to be clear that a decision in any one fiscal year does not bind the Council for a future fiscal year. In FY18, InterACC/DD is requesting an additional \$1,741,781 for a match equal to 8.5% of State funds (based on current State rates) and there will be an additional impact from the next increase in the minimum wage. Council staff expects that increases for both (and to account for expansion of services) may not be possible in FY18.

Each year, the Council includes a budget provision regarding the expenditures of the DD Supplement.

This resolution appropriates \$X,XXX,XXX to the Department of Health and Human Services to provide a supplement to organizations providing direct services to clients of residential, community supported living arrangements, day habilitation, or supportive employment provided through the Developmental Disabilities Administration. In order to receive this supplement, an organization must demonstrate to the Department that at least 75% of the funding is being used to increase the pay of direct service workers in recognition of the higher cost of living in Montgomery County compared to other parts of Maryland. Each organization must document to DHHS that the funds are being used for this purpose. Section G of this resolution includes entities eligible to receive this non-competitive payment.

2. Funds for Temporary Clerical Services

(\$41,940)

Council staff recommendation: Approve as recommended by the Executive.

3. Lease Costs for 11.North Washington Street
 (\$88,900)

The new lease is being funded in the Lease NDA and so is a reduction to DHHS.

Council staff recommendation: **Approve as recommended by the Executive.**

4. Multi-program Adjustments
 (\$84,256)

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program.

Council staff recommendation: **Approve as recommended by the Executive.**

Update:

Resource Coordination for Developmentally Disabled Adults

No Budget Change recommended for FY17

For FY16, the Council approved funding to allow the County to serve as a resource coordinator for 500 clients. Because the program had shifted between be operational and being abolished over the course of two years, a significant part of the decision was to make sure that the program is staff with County Merit positions (not broker positions) so that it could return to a program fully staffed by people with knowledge of the program and with the capacity to build and maintain working partnership with MCPS and service providers. The following is an update on the program. For FY17, the assumptions are that the General Fund will provide the \$407,687 difference between expenses and revenues.

Resource Coordination	FY16		FY17
	Approved	Projected YE exp/rev	CE Rec
Budget	960,045	550,239	1,139,377
Revenue	534,109	443,192	731,690
State Supplement*	215,643	107,047	-
* Assumes the State will fully cover the revenue deficit in FY16 because it is less than the \$215,643 committed amount.			

Are all authorized positions currently filled? No. If not, how many are still vacant?

The program currently has 3 vacancies, 2 Coordinator positions (Program Specialist II's) and one office support position (Office Services Coordinator). HHS is in the selection process for the Coordinator positions and about to begin the resume review process for the OSC position.

Has the County stopped using broker positions in place of merit position for this program?

The program is currently not using any brokers in place of merit positions.

How many clients are currently being served?

As of April 1st - 434 clients are being served. Fifty-eight (58) clients will transfer between April 1 and April 22. HHS is working with the Developmental Disabilities Administration (DDA) to get the final 8 clients transferred to reach the 500 client cap.

How is the County assisting transition-aged youth?

DHHS is currently serving 11 TYs. DHHS is assisting them through the standard Transitioning Youth (TY) process including assisting them with finding appropriate providers, completing waiver packets, working on Service Funding Plans, etc. Program staff will reach out to DDA to try to re-establish the meetings (previously coordinated by DDA) for all CCS agencies to meet with the leadership from the Regional Office to discuss TY issues.

What (if any) have been the challenges in re-establishing the program?

There have been significant challenges in re-establishing the program. The primary challenge has been with staffing. Due to specific requirements with the position (per COMAR) - the pool of eligible applicants was limited so HHS conducted two recruitments for the Coordinator (Program Specialist II) positions. Aligning Coordinator and client start dates has not occurred as planned, thus temporary/coverage Coordinators have been assigned. In addition, the clients that have transferred to MCDHHS (in general) have a very high level of need so the demand on staff has increased. In addition, DDA is going through a "transformation" process so policies are frequently changing and it has been challenging to stay on top of the various issues and provide clear guidance to the staff.

What is the current wait list for services for Montgomery County residents?

Per DDA, the future CCS client list for Montgomery County is 46 clients. We are working with DDA to finalize the details of the process, but in general the County will have to maintain its own list and notify DDA when a slot becomes available.

Council staff agrees with the Executive's recommendation to not make changes to this program for FY17. While the Commission on People with Disabilities has asked if it can be expanded and notes that there are other who want to be served by the County, The coming year will allow the program to fully operate for a full. The Committee should review this issue again as a part of the FY18 budget.

F. Assisted Living Services

Total FY17 recommended funding is \$2,051,754 for this program area that provides subsidies and case management for low-income people who live in group homes for the frail elderly and adult foster care for the frail elderly and adults with disabilities.

	Maximum or mid-Point Rate* for Double Room***	Source of Funding
Adult Foster Care Program	\$1,350	Average \$825 County subsidy and \$668** client contribution.
Project Home	\$1,376	State funded and paid directly to the client and the client's Representative Payee by the State.
Senior Assisted Living Group Home Subsidy Program	\$2,050	Subsidy and client contribution vary but maximum monthly County subsidy is \$650
Older Adult Waiver Program (now part of Community First Choice Options)	\$1,756	State/federal funded and paid directly to the provider by the State.
<p>*for Senior Assisted Living and Older Adult Waiver this is based on the Level 2 rate. Level 2 is defined in COMAR as a Moderate Level of Care that provides substantial support for two or more activities of daily living assistance with medication including the effects of medication and treatment. **average client contribution for last three months. ***Adult Foster Care rate is \$1,550 for single occupancy and \$1,350 for the shared room.</p>		

Issue: Request from the Commission on Aging – Adult Foster Care Rate

The Commission on Aging has requested \$153,180 in additional funding for Adult Foster Care to move the County reimbursement rate closer to the State rate for Medicaid. They also say that there are more people being served (115 in February 2015 vs. 121 in February 2016).

1. What is the total FY16 budget for this program?

The operating expenses for this program are \$868,500. The FY17 Recommended Budget includes the same amount.

2. If the program is serving more people, is a deficit projected?

No. A Portion of a State grant for HIV clients will be used to offset \$8,000 subsidies paid for a HIV client in AFC/ALF who became ineligible for the subsidy.

3. How much would the Commission on Aging's request raise rates if all the funding were put toward a rate increase?

Each occupancy rate for the small Assisted Living Homes would be increased by an additional \$175. Therefore, the rate for single occupancy would become \$1,725 and the double occupancy would be \$1,525.

Council staff recommendation – **Council staff recommends providing the same inflation adjustment to the Adult Foster Care rate that is provided to contracts with non-profits and residential treatment providers. This would provide some adjustment when it is provided to others. If DHHS believes that a significant change should be made to the rate, it should come to the Council through the Executive’s Recommended Budget. The HHS Committee would place three increments of \$8,685 each to the reconciliation list.**

1. Multi-program Adjustments
\$38,490

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program.

Council staff recommendation: **Approve as recommended by the Executive.**

G. Home Care Services

Total FY17 recommended funding is \$4,345,043 for this program area that provides personal care assistance to eligible seniors and adults with disabilities who are unable to manage independently. Services include personal care, chore assistance, therapeutic support, and occupational therapy.

1. Multi-program Adjustments
(\$144,806)

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program.

Council staff recommendation: **Approve as recommended by the Executive.**

H. Ombudsman Services

Total FY17 recommended funding is \$795,208 for this program area that investigates and resolves complaints made by residents, staff, and family members in nursing homes and assisted living facilities for seniors and people with disabilities.

1. Multi-program Adjustments
(\$17,563)

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program.

Council staff recommendation: **Approve as recommended by the Executive.**

I. Respite Care

Total FY17 recommended funding is \$1,091,827 for this program area that provides temporary, occasional care of frail seniors, adults and children with disabilities, and children with severe behavior and/or medical issues to give relief to families and caregivers.

1. Multi-program Adjustments

\$107,721

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program. DHHS has responded that the multi program adjustment reflects a reallocation (shift) from another cost center within Community Support Network (CSN). Previously the Respite contract was funded in two different cost centers, but in FY17 the Respite Cost Center accurately reflects the total CSN budget for Respite (including the \$70,000 for the Respite House).

Council staff recommendation: **Approve as recommended by the Executive.**

Request from Commission on Aging and Request from the Commission on People with Disabilities.

Each of these Commission's had made requests for additional funding for respite services. The Department has provided the following in response to Council staff questions.

Respite Care	FY13	FY14	FY15	FY16 ¹
Average clients served per month	101	140	151	147
¹ average per month July - February.				

The Commission on Aging says that there has been a decrease in the number of people served (1,810 through February 2015 vs. 1,175 through February 2016). If this is accurate, what is the reason for the decrease?

The 1,810 represents the total clients served (duplicated) for all of FY15. The unduplicated number of clients served as of February 2015 was 1,369 when compared to the unduplicated count for FY16 (1175) we have served 194 fewer clients. There has been a decrease in hours in FY16 because Respite has been doing more investigations and follow up before providing services to determine if clients are in a waiver receiving services 7 days a week (and would therefore are not be eligible for respite).

The background paper for the Senior Summit says that currently 453 caregivers who support frail elders are being served and that 20% are seniors. How does this relate to the Commission's data and the average per month being served?

We are unable to confirm the statistic you note about the age of caregivers. However, we reached out to the Respite Program to get updated information - FY16 YTD there are 135 caregivers of seniors receiving respite services and of those 79 are 65 and older (59%). In terms of the number of frail seniors (FS) served in the Respite Program, the average number of frail seniors served per month (duplicated) is increasing (see chart below).

Frail Seniors	FY14	FY15	FY16 ¹
Average clients served per month	34	44	54
¹ average per month July - February.			

The Commission on Aging is requesting \$100,000 for respite services. They have asked for this funding for caregivers of older adults. They indicate this could serve an additional 30 people. The Commission on People with Disabilities has requested \$100,000 to serve children and adults with severe disabilities. They estimate this will provide 42 clients with 164 care hours per year. Is the respite funding currently segregated into an amount for youth/younger adults and older adults/seniors?

Portions of the funding are restricted. Any funding received from the AAA grant (such as \$116,000 HHS was recently awarded for FY16- plus any one time only funding received) is designated for seniors and part of the HB669 funding is for Developmentally and Functionally Disabled clients (\$101,897). The remaining HB669 funding and all General Fund dollars can be used for all eligible clients.

Using the average served per month, how many more people per month does DHHS expect it could serve with \$100,000? Or, how many more hours of respite would be provided?

If Respite receives an additional \$100,000, it could serve up to an additional 42 clients (based on the current reimbursement rate for Level I services).

$\$100,000 / 14.50$ (the current reimbursement rate for Level I) = 6,897 hours.

$6,897 / 164$ hours per year (current annual cap on # of hours) = 42 clients

Council staff recommendation: Add two increments of \$50,000 each to increase the funding available for respite services to serve all eligible clients.

J. Senior Community Services

Total FY17 recommended funding is \$2,845,198 for this program area that helps coordinate community villages, services for caregivers, legal services, health insurance

counseling, visiting services, grocery shopping, transportation and mobility management, subsidized employment, and socialization for seniors with visual impairments.

1. Age-Friendly Communities Senior Fellow
\$24,132

The Executive is recommending funding a Senior Fellow to assist the Senior Subcabinet in advancing the goals identified at the CE's Summit on Aging of making Montgomery County an Age Friendly Community for a Lifetime and addressing the requirements of membership in the WHO/AARP Age Friendly Network.

Council staff recommendation: **Approve as recommended by the Executive.**

Update: Villages

DHHS has provided the following updates on current Villages and potential Villages where communities have begun the work to organize but have not formed a non-profit.

There are currently three active villages that serve a diverse and/low income community: Village of Takoma Park, Olney Home for Life, and Silver Spring Village. The Village of Takoma Park has been highly successful in serving low income seniors (approximately 50% of their membership).

There are faith based village-like programs that serve a highly diverse population. The Muslim Community Center is one such example. Additional Muslim initiatives include Islamic Society of Washington Area (ISWA) and two budding initiatives at Islamic Society of Germantown and Montgomery County Muslim Foundation.

East County currently has two developing villages: East County Village Seniors (ECVS) which serves the area around the East County Community Center and another that serves the greater Stonegate Community. St Andrew's Lutheran church is actively involved with ECVS. Both villages have a diverse leadership.

Poolesville is developing a faith based village for Western Upper County which intends to serve the low income and diverse communities in that area. There is a strong existing foundation that they plan to expand.

The City of Rockville is developing a hub and spoke model village that eventually will serve the entire city, which has a very diverse senior population. The city is considering hiring a staff person to support the village.

Extensive outreach efforts have been made with the County's faith community and the Village Coordinator is working closely with the County's liaison to the Faith Communities, Reverend Kaseman.

The Village Coordinator is working closely with IMPACT of Silver Spring and the TESS Center. Discussions are underway to possibly hire a bilingual contractor to help move this effort forward.

The Village Coordinator is partnering with HHS's Asian American Health Initiative to jointly reach out to the Asian seniors in the County.

The County Executive's recommended budget includes funding for five Villages in the Community Grants NDA: (1) Bethesda Metro Area Village (\$15,000); (2) Little Falls Village Corporation (\$10,000); (3) Olney Home for Life (\$15,000); and Village of Takoma Park (\$3,500). These proposal will come to the Council during its Community Grants discussion but Council staff highlights them because once a Village incorporates as a non-profit, it is eligible to seek funds from Executive and Council Grants. However, while still organizing and developing this source of funding is not available.

For FY16, the Council approved \$10,000* to assist emerging Villages in diverse neighborhoods with the cost of becoming an incorporated organization. As was noted in the HHS Committee discussion, DHHS has not been able to spend these funds as expected.

Senior Villages	FY16 YTD
Incorporation cost for East County Village Seniors	288
501 c 3 application for East County Village Seniors	400
Website design for East County Village Seniors - website is final design stages	2,000
Total Expenditures	2,688

*\$10,000 was originally approved. A \$2,500 reduction was approved in the Savings Plan. The FY17 budget includes \$10,000.

DHHS shared that the program is experiencing low utilization due to the following issues –

- Few villages qualify under the current restriction put on this fund (only low income and or diverse communities)
- Of the villages that do serve low income/ diverse communities, many were able to secure other larger County grants and we did not want to duplicate funding.
- One possible way of spending more in the future would be to expand the fund's scope, and allow access to all village initiatives, while prioritizing funding for low income and/or diverse communities.

Council staff suggests that the scope of the funding also allow the Village Coordinator to use the funding for some costs that might be part of the community organization process such as meeting room space and transportation. The priority should remain on diverse and moderate income neighborhoods and they may require some of this type of flexible up front funding to be able to move to the next step of seeking incorporation.

1. Multi-program Adjustments
\$16,119

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program.

Council staff recommendation: **Approve as recommended by the Executive.**

K. Senior Nutrition

Total FY17 recommended funding is \$2,721,272 for this program area that provides lunches to seniors at sites around the County, home-delivered meals, nutrition education, and physical fitness activities. Programs are administered in cooperation with public, private, and non-profit organizations. The following provides information on the number of meals served.

Update on Programs

	FY13 Approved Budget	FY14 Approved Budget	FY15 Approved Budget	FY16 Approved Budget	FY17 CE Rec Budget
Home Delivered Meals					
Older Americans Act Grant	385,224	455,561	652,759	571,668	548,066
Nutrition Services Incentive Program	58,697	50,770	88,215	58,215	58,215
Program Income	33,704	35,000	32,757	58,870	58,870
State Nutrition Grant	30,989	30,990	35,947	56,570	56,570
General Funds	171,536	252,665	200,085	222,369	210,378
TOTAL	680,150	824,986	1,009,763	967,692	932,099
People Served	985	2,430	1,975	1,893	1,823
Meals Delivered	177,808	99,103	146,269	137,683	130,419

	FY13	FY14	FY15	FY16	FY17
Congregate Meals					
Older Americans Act Grant	841,962	845,067	754,640	947,792	932,606
Nutrition Services Incentive Program	176,090	152,300	215,973	142,527	142,527
Program Income	101,112	105,000	80,198	144,130	144,130
State Nutrition Grant	92,965	92,964	88,007	138,499	138,499
General Funds	514,610	511,995	489,863	544,420	515,062
TOTAL	1,726,739	1,707,326	1,628,681	1,917,368	1,872,824
People Served	3,990	4,129	4,408	5,189	5,069
Meals Delivered	205,380	215,550	227,096	279,018	271,006

Cold Box Meal Program	Nov 2014 - Feb 2015	Nov 2015 - Feb 2016
Meals Served	23,148	19,594
Individuals Served	887	647
Total Cost	157,000	107,571

Cold Box Meal (two lunches per week delivered to seniors in low-income housing during winter months)

Please note the reduction in the Cold Box Meal Program is due to the discontinuation of three sites and the many snow days that occurred on Tuesdays and Thursdays, the 2 service days of the week. The reasons for the loss of three sites: Andrew Kim House served over 100 meals per day but decided that since most people were Korean, they didn't want the box meals. One other site said they only had a few people interested and the third site said there was too much chaos with people grabbing more than one meal and hiding them, implying that the staff was unable to control the residents so decided it was not worth the aggravation. All of the other sites are thrilled to have these meals.

1. Enhance Home Delivered Meals
\$30,000

This funding will provide approximately 8,620 meals at \$3.48 per meal. As the number of meals provided per client can vary, it does not translate directly into a number of additional clients that will be served.

Council staff recommendation: **Approve as recommended by the Executive.**

Issue: Cold Box Meal Service—Expansion

At the request of Councilmember Berliner, Council staff asked DHHS about the cost of expanding the cold box meal program. DHHS has provided the following is a cost estimate to expand to serve two more low-income senior buildings, increasing the number of meals per week, and a combination of both. The program operates for four colder weather months.

Current Sites	Number of Meals
Bauer Park Apartments	34
Churchill Senior Living	17
Covenant Village	65
Franklin Apartments	65
Hampshire Village Apartments	60
Oaks at Four Corners	40

Oaks at Olde Towne	50
Randolph Village	60
Town Center	35
Victory Court	30
Victory Forest	75
Victory Oaks	30
Victory Tower	50
Willow Manor at Cloppers Mill	25
Willow Manor at Colesville	43
Willow Manor at Fair Hill Farm	35

Costs to expand Senior Nutrition Program cold box meal service.

Current program cost plus expansion of existing sites only (for 4 months)

Table 1	Cost of Additional Service	Total Program Cost
Existing Service (2 days a week)	<i>Not Applicable</i>	\$125,436
One additional day (=3 days/week total)	\$62,718	\$188,154
Two additional days (=4 days/week total)	\$125,436	\$250,872
Three additional days (=5 days/week total)	\$188,154	\$313,588

Cost of expansion to two new sites, and additional days at existing sites, and change to total program cost (for 4 months) *Note: any expansion to new sites must provide the same level of service at existing sites, for contractual reasons. Existing sites receive meals two days/week.*

Potential Expansion Sites	Estimated Number of Meals
Charter House	60
Rebecca House	50

	Cost of Additional Service	Total Cost
Existing service (2 days/week)	\$19,325	\$144,761
One additional day (=3 days/week)	\$91,705	\$217,141
Two additional days (=4 days a week)	\$164,086	\$289,522
Three additional days (=5 days a week)	\$236,466	\$361,901

As a result of growth in the Senior Nutrition Program (SNP) and increased demands for SNP client data from the State, it is important that funding for additional SNP service be accompanied by the additional staffing to support it. The program has recently explored several possibilities for adding a Fiscal Assistant, including requesting a new position, re-purposing an existing DHHS vacancy, and hiring a position under the broker contract. Any new position would be part-time and would be paid for using Older Americans Act grant funding.

Council staff recommendation: Council staff recommends adding \$91,705 to the reconciliation list which would provide 3 meals per week to all current sites and the two new sites. Council staff also notes that the issue raised about the need to provide culturally appropriate meals for this program and for enhancing this capacity in other programs is one that can hopefully be included in the strategic plan for food insecurity as proposed in Bill 19-16.

**2. Top Banana Grocery (cessation of provider service)
(\$71,740)**

This provider is no longer available. One of DHHS' home-delivered meals contractors (Meals on Wheels of Central Maryland) is piloting a grocery shopping program. DHHS notes that the new program is not widespread yet, but seems to be showing some success in early days.

Council staff recommendation: Approve as recommended by the Executive.

**3. Multi-program Adjustments
\$140,267**

Multi-program Adjustments account for compensation changes, annualizations and other items impacting more than one program.

At the request of Councilmember Berliner, Council staff asked about the cost of expanding

Council staff recommendation: Approve as recommended by the Executive.



Aging and Disability Services

FUNCTION

The staff of Aging and Disability Services shares the Montgomery County vision, where seniors, persons with disabilities, and their families are fully participating members of our community. The mission of this service area is to affirm the dignity and value of seniors, persons with disabilities, and their families by offering a wide range of information, home and community-based support services, protections, and opportunities, which promote choice, independence, and inclusion.

Program Contacts

Contact Jay Kenney of the HHS - Aging and Disability Services at 240.777.4565 or Rachel Silberman of the Office of Management and Budget at 240.777.2786 for more information regarding this department's operating budget.

Program Descriptions

Community First Choice

This program area administers and operates Maryland's new Long Term Care Medicaid program, Community First Choice (CFC). CFC Supports Planners and Nurse Monitors provide a continuum of services designed to allow people of all ages and in need of long term care to live in the community, rather than in institutions.

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	2,744,814	13.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	15,937	0.00
FY17 Recommended	2,760,751	13.00

Aging and Disability Resource Unit

This program area assists seniors, persons with disabilities, and their families, in defining service needs, locating required services, and facilitating the application process to access services.

Program Performance Measures	Actual FY14	Actual FY15	Estimated FY16	Target FY17	Target FY18
Percentage of callers to the Aging and Disability Resource Unit that received the referrals/information they need ¹	91	N/A	90	90	90

¹ No survey conducted in FY15 due to changes at the State level.

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	867,967	9.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	66,820	0.00
FY17 Recommended	934,787	9.00

Assessment and Continuing Case Management Services

This program area provides multi-disciplinary assessments, care planning, and case management services to frail seniors and adults with disabilities to remedy and prevent abuse, neglect, self-neglect, exploitation, or inappropriate institutionalization. Services include Adult

Protective Services, Adult Evaluation and Review Services (AERS), Statewide Evaluation and Planning Services, Social Services to Adults, and the Public Guardianship Program.

Program Performance Measures	Actual FY14	Actual FY15	Estimated FY16	Target FY17	Target FY18
Percentage of seniors and adults with disabilities that avoid institutional placement while receiving case management services	96.0	96.0	95.0	95.0	95.0
Number on Social Services to Adults (SSTA) waiting list ¹	237	173	200	200	200

¹ During FY15, SSTA was fully staffed, allowing the program to reduce the number of individuals on the wait list.

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	7,954,706	63.55
Enhance: Community First Choice AERS	200,000	0.00
Enhance: Medical Adult Daycare Services to 18 Additional Clients	100,000	0.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	440,345	0.00
FY17 Recommended	8,695,051	63.55

Service Area Administration

This program area provides leadership and direction for the administration of Aging and Disability.

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	478,881	3.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(3,899)	0.00
FY17 Recommended	474,982	3.00

Community Support Network for People with Disabilities

Community Support Network for People with Disabilities (CSN) provides services that enable individuals to remain in their home or in the least restrictive environment and provides general support, guidance, and assistance to clients with developmental disabilities and their families. This program area coordinates and monitors services and supports (including crisis management, intervention, and school-to-work transition assistance) to clients with developmental disabilities eligible to receive services through the State Developmental Disabilities Administration (Coordination of Community Services Program); provides service coordination to eligible young people that are funded under the Maryland Home and Community Based Services Waiver for Children with Autism Spectrum Disorder (Autism Waiver Program); and provides financial assistance to State-funded providers who serve adults with developmental disabilities. The My Turn program provides summer camp placements, support, and programmatic/financial assistance to families with children with developmental disabilities ages three to 13 years old. The Customized Employment Public Intern program provides supported employment for adults with developmental disabilities. CSN also conducts site visits to group homes that serve developmentally disabled clients in the County and monitors contracts that provide services to people with various disabilities including visual and hearing impairments.

Program Performance Measures	Actual FY14	Actual FY15	Estimated FY16	Target FY17	Target FY18
Percentage of adults with developmental disabilities provided case management services that remain at the same level of independence after receiving supportive services in the Coordination of Community Services Program	99	100	99	99	99

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	15,638,266	36.50
Enhance: Enrollment Increases and Service Delivery for Developmental Disability Service Providers	1,053,395	0.00
Increase Cost: Annualization of FY16 Developmental Disability Enhancement to Increase the Differential Between Wages Paid to Direct Service Personnel and the County Minimum Wage	48,896	0.00
Decrease Cost: Funds for Temporary Clerical Services	(41,940)	0.00

FY17 Recommended Changes	Expenditures	FTEs
Decrease Cost: Funds for Lease Costs at 11 N. Washington Street	(88,900)	0.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(84,256)	0.25
FY17 Recommended	16,525,461	36.75

Assisted Living Services

This program area provides subsidies and case management for low-income seniors who live in group homes for the frail elderly and adult foster care homes for frail seniors and adults with disabilities.

Program Performance Measures	Actual FY14	Actual FY15	Estimated FY16	Target FY17	Target FY18
Assisted Living Services - Percentage of clients remaining in community placement (i.e., not entering institutional setting) ¹	97	100	100	100	100

¹ Since Adult Protective Services (APS) always has a wait list, and Assisted Living Services derives referrals from APS, the percentage of clients served is projected to be 100% from FY16-FY18.

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	2,090,244	7.57
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(38,490)	0.00
FY17 Recommended	2,051,754	7.57

Home Care Services

This program area provides personal care assistance to seniors and eligible adults with disabilities who are unable to manage independently due to physical and/or mental impairments. Home Care Services prevent abuse, neglect, and exploitation of vulnerable adults, and enhance overall quality of life by providing personal care, chore assistance, therapeutic support, self-care education, occupational therapy intervention, and escorted transportation.

Program Performance Measures	Actual FY14	Actual FY15	Estimated FY16	Target FY17	Target FY18
Home Care Services - Number of clients served annually	326	447	437	447	447
Home Care Services - Percentage of clients with no unmet personal care needs	92	97	97	97	97

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	4,489,849	15.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	(144,806)	0.00
FY17 Recommended	4,345,043	15.00

Ombudsman Services

This program area investigates and resolves complaints made by residents, staff, and family members in nursing homes and assisted living facilities for seniors and people with disabilities.

Program Performance Measures	Actual FY14	Actual FY15	Estimated FY16	Target FY17	Target FY18
Ombudsman Services - Percentage of complaints resolved and partially resolved	88	91	92	92	92

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	777,645	6.50

FY17 Recommended Changes	Expenditures	FTEs
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	17,563	0.00
FY17 Recommended	795,208	6.5

Respite Care

This program area provides temporary, occasional care of frail seniors, adults and children with disabilities, and children with severe behaviors and/or medical issues to give relief to families and other primary caregivers.

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	984,106	0.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	107,721	0.00
FY17 Recommended	1,091,827	0.00

Senior Community Services

This program area provides funds for services that help seniors to remain independent in the community including: providing technical assistance to community 'villages', services for caregivers, legal services, representative payee services, health insurance counseling, "visitor" services, grocery shopping, transportation and mobility management, subsidized employment, and socialization for seniors with visual impairments.

Program Performance Measures	Actual FY14	Actual FY15	Estimated FY16	Target FY17	Target FY18
Percentage of clients receiving Representative Payee services that report adequate funds for food, medical care, and shelter	96	95	95	95	95

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	2,804,947	9.31
Add: Age-Friendly Communities Senior Fellow	24,132	0.29
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	16,119	0.12
FY17 Recommended	2,845,198	9.72

Senior Nutrition Program

This program area provides lunches to seniors at sites around the County and provides home-delivered meals, nutrition education, and physical fitness activities. It is administered in cooperation with a variety of public, private, and nonprofit organizations.

Program Performance Measures	Actual FY14	Actual FY15	Estimated FY16	Target FY17	Target FY18
Number of unduplicated customers served in the Senior Nutrition Program	6,265	6,384	6,776	7,145	7,538

FY17 Recommended Changes	Expenditures	FTEs
FY16 Approved	2,622,745	3.00
Enhance: Home Delivered Meals	30,000	0.00
Decrease Cost: Top Banana Grocery Delivery Services Due to Cessation of Provider Service	(71,740)	0.00
Multi-program adjustments, including negotiated compensation changes, employee benefit changes, changes due to staff turnover, reorganizations, and other budget changes affecting multiple programs.	140,267	0.00
FY17 Recommended	2,721,272	3.00

Program Summary

Program Name	FY16 APPR		FY17 REC	
	Expenditures	FTEs	Expenditures	FTEs
Community First Choice	2,744,814	13.00	2,760,751	13.00
Aging and Disability Resource Unit	867,967	9.00	934,787	9.00
Assessment and Continuing Case Management Services	7,954,706	63.55	8,695,051	63.55
Service Area Administration	478,881	3.00	474,982	3.00
Community Support Network for People with Disabilities	15,638,266	36.50	16,525,461	36.75
Assisted Living Services	2,090,244	7.57	2,051,754	7.57
Home Care Services	4,489,849	15.00	4,345,043	15.00
Ombudsman Services	777,645	6.50	795,208	6.50
Respite Care	984,106	0.00	1,091,827	0.00
Senior Community Services	2,804,947	9.31	2,845,198	9.72
Senior Nutrition Program	2,622,745	3.00	2,721,272	3.00
Total	41,454,170	166.43	43,241,334	167.09

Montgomery County, Maryland
Commissioner on Aging
Annual Report
2015



Montgomery County, Maryland
Department of Health and Human Services





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Letter from the Chair of the Commission on Aging

March 2016

The Honorable Isiah Leggett
The Honorable Nancy Floreen

The Montgomery County Commission on Aging is pleased to present its Annual Report for 2015. The Report describes the activities of the Commission as an advisor to County Government and as an advocate for the interests and concerns of older adults and their families residing in the County. The Commission on Aging takes seriously its responsibilities, including serving as the Advisory Council to the Area Agency on Aging as mandated by the Older American Act.

The Commissioners were pleased that the year ended with the County Executive's Summit on Aging in December. This was an important event, not only for the community, but also for the Commission on Aging. It was an opportunity to recognize how far we have progressed in making Montgomery County into *A Community for a Lifetime* with the *Senior Agenda* as a guidepost and framework. It was also an indication of how much more work there is to accomplish the goals of the *Senior Agenda*. A number of Commission members participated on the Summit's Advisory Group and others volunteered during the event. This has been another important year for the Commission in heightening awareness and achieving action on the concerns of the growing and diverse population of older adults residing in the County as we continued the work of making Montgomery County into *A Community for a Lifetime*.

The Commission acknowledged the challenges presented by the transition of leadership at the State level and the impact of the deficits in the FY County budget. We were encouraged that the FY16 budget contained many items that we have supported over the years, such as longer hours of operation for the recreations centers, libraries and senior centers, as well as transportation enhancements for older adults and fire prevention outreach services dedicated to seniors. We also applauded the two new proposed affordable housing projects specifically designed for older adults in Silver Spring and in Glenmont.

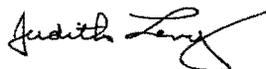
The Commission of Aging focused its efforts this year on making progress on the goals and visions of the *Senior Agenda* including a better understanding of the importance of data in directing an approach. The Commission's advocacy efforts on State legislation and County programs and budget recommendations related directly to the *Senior Agenda*. While budget recommendations this year focused on continuing to improve and enhance both current programs and new efforts, we remain sensitive to the economic issues affecting the County. We are also proud of the partnership we maintain with various Boards, Commissions and Government Agencies.

The Commission thanks County Executive Leggett for your strong leadership and committed actions on behalf of the County's aging population and the County Council for the interest and support that have helped maintain and expand programs that serve older adults.

We also give sincere thanks and recognition to the Director of the Department of Health and Human Services, Uma S. Ahluwalia and Director of the Department of Recreation, Gabriel Albornoz, who co-chair the Subcabinet on Senior Vital Living for their leadership and responsiveness to the issues raised by the Commission.

Finally, the Commission expresses its respect and deep appreciation to two individuals who have provided exceptional support and wise guidance, Dr. John (Jay) Kenney, Chief, Aging and Disability Services and Dr. Odile Brunetto, Director, Area Agency on Aging. Like so many outstanding professionals working for the County, their contributions, invaluable to the Commission have contributed enormously to the wellbeing of older adults in the County. The Commission also wishes to acknowledge the outstanding support provided by the following Aging and Disabilities Services staff: Tremayne Jones, Office Services Coordinator; Pazit Aviv, Village Coordinator; Shawn Brennan, Mobility and Transportation Program Manager; Emily Glazer, Senior Health and Wellness Coordinator; and Emily Rosenberg, Program Data Manager.

Sincerely,



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Montgomery County Commission on Aging

COMMISSION OFFICERS

Judith Levy, Chair
DaCosta Mason, 1st Vice Chair
Noelle Heyman, 2nd Vice Chair
Rudolph Oswald, Treasurer
Isabelle Schoenfeld, Secretary

COMMITTEE AND GROUP CHAIRS

Aging in Place and Community: Miriam Kelty
Commission on Aging Alumni Group: Irwin Goldbloom
Communications and Community Outreach: Barbara Multz and Rueben Rosenfeld
Health and Wellness: Noelle Heyman and Arva Jackson
Public Policy: DaCosta Mason and Rudolph Oswald
Seniors Today Task Force: Barbara Multz
Stakeholders Forum: Spencer Schron and Grace Whipple
Data Task Force: Sam Korper

COMMISSION MEMBERS

Helen Abrahams	Morton Faller	Sam Korper	Reuben Rosenfeld
Amoke Alakoye	Georgia Guenther	Judith Levy	Isabelle Schoenfeld
Noureen Chochan	Noelle Heyman	Karen Maricheau	Spencer Schron
Myrna Cooperstein	John Honig	DaCosta Mason	Sally Shea
Paul Del Ponte	Song Hutchins	Jerry Morenoff	Revathi Vikram
David Denton	Arva Jackson	Barbara Multz	Grace Whipple
Tamara Duell	Charles Kauffman	Douglas Newton	Syed Yusuf
Stephanie Edelstein	Miriam Kelty	Rudolph Oswald	

LIAISONS TO COMMISSION ON AGING

Aging and Disability Services: John (Jay) Kenney
City of Gaithersburg: Matt Kelleher
City of Rockville Commission on Aging: Monk Casper
Commission on Health: Marcia Pruzan
Commission on People with Disabilities: Seth Morgan
Department of Housing and Community Affairs: Leslie Marks
Department of Recreation: Jeffrey Bourne and Phil Smakula
Department of Transportation: Faisal Khan
Elder Women's Aging Alliance: Sarah Gotbaum
Ethnics Affairs Committee: Pat Lesnick
Housing Opportunities Commission: Gail Gunod-Green
Jewish Council on Aging: Harriet Shapiro
Jewish Foundation for Group Homes: Beth Shapiro
I Kaur Foundation: Mirin Phool
Maryland Commission on Aging: Maria V. Jimenez
Montgomery County Fire and Rescue Services: Jim Resnick
Montgomery County Police Department: Morton Davis
Office Of Community Partnerships: Austin Heyman

AGING AND DISABILITIES SERVICES/DHHS LIAISONS TO COA

Odile Brunetto, Director, Area Agency on Aging
Pazit Aviv, Village Coordinator
Shawn Brennan, Mobility and Transportation Program Manager
Emily Glazer, Senior Health and Wellness Coordinator
Jenrifer Long, Aging and Disability Resource Line Manager
Tremayne Jones, Offices Services Coordinator
Emily Rosenberg, Program Data Manager

Area Agency on Aging

The Area Agency on Aging (AAA) is responsible for the provision of a continuum of home and community-based services and provides staff support to the Commission on Aging (COA). In conjunction with community partners, the AAA is involved in administering County and State grant awards to contractors for services, public education/outreach, networking, and referrals.

AAAs were established under the Federal Older Americans Act (OAA) in 1973 to respond to the needs of Americans ages 60 and older in every local community. The AAA strives to develop a range of options that allow older adults to choose the home and community-based services and living arrangements that suit them best. The AAA is part of a national network of over 670 AAAs established under the OAA to improve the quality of life for older persons by a network that maintains a holistic view of aging. The AAA are mandated to "foster the development and implementation of comprehensive and coordinated systems to serve older individuals..."

Highlights of AAA Activities in Fiscal Year 2015:

- Staff from the Aging and Disability Services Line, a Maryland Access Point, answered nearly 23,290 calls to assist seniors, persons with disabilities and their families, providing access to information and needed short- and long-term care services offered both by the County and our nonprofit partners.
- The Long-Term Care Ombudsman program conducted more than 3,500 visits to long-term care facilities and investigated 416 formal complaints. The program has dedicated volunteer corps of 45 State certified individuals serving 225 facilities.
- The Public Guardianship program served 126 persons in need of protective services as determined by the courts, conducting more than 1,200 face-to-face contacts with these clients. Additionally, the program conducted eight education and training events for more than 400 participants.
- The Senior Nutrition Program served 6,384 clients and provided more than 390,000 meals, both in congregate sites and through home-delivered meals.
- The AAA via contracts with Gaithersburg UpCounty Senior Center and the Mobile Dentist, provided dental care and dentures to 146 seniors lacking insurance.
- The Nurses Team conducted 2,226 Adult Evaluation and Review Services (AERS) evaluations, which are mandated to enable eligible persons to receive community-based, long-term Medicaid-funded services. An additional 1,485 evaluations were assigned to the State Department of Health and Mental Hygiene or Schaefer Center contract nurses.
- The AAA currently provides nurse monitoring services via its contract partners to more than 1,700 Community First Choice Program clients. These clients receive services via the Community Options Waiver, Community First Choice, Increased Community Service, or Community Personal Assistance Service Programs of DHMH.
- The AAA Supports Planning Agency serve 450 Community First Choice clients.
- The Health and Wellness program served 700 individuals through health screening sessions and 2,115 individuals through health education sessions. The Health and Wellness program also organized Falls Prevention sessions through classes such as "Bone Builders" and Falls Prevention Month program, which served more than 1,000 individuals.
- The new Mobility and Transportation Manager continues to conduct extensive outreach and training towards promoting and helping to improve transportation and mobility options for seniors and people with disabilities and secured \$125,000 in federal grant funds for use over the next two years.
- The Villages Coordinator worked with 15 established Villages and 10 Villages under development and held the first Montgomery County Villages Gathering with more than 100 participants. ■



Enabling Legislation

The Commission on Aging, established in 1974, was operated under the auspices of the County Council until August 1987, when its operation was transferred to the Executive Branch. Chapter 27, Article III of the Montgomery County Code created the Commission on Aging under the declared public policy of the County to:

- Improve conditions of the aging or elderly in the County;
- Work toward the elimination of restrictions that impede older citizens from full participation in the mainstream of community life; and
- Assist and stimulate all levels of government and the community to be more responsive to the needs of the County's older residents.

In addition, the Commission on Aging serves as the Advisory Council to the Area Agency on Aging as described in the federal Older Americans Act. Members of the Commission are appointed by the County Executive subject to confirmation by the County Council. Under a section specifying powers and duties of the Commission, there are several provisions outlining a broad spectrum of powers. The following two subsections provide a good example of the breadth of the Commission's power:

The Commission shall have the power...

- (a) To research, assemble, analyze and disseminate pertinent data and educational materials relating to activities and programs which will assist in meeting the needs and solving the problems of the aging; to cooperate with public and private agencies, organizations, and individuals in identifying and solving the problems of the aging; and to develop and conduct, as appropriate, in cooperation with county government, other services and programs dealing with the problems and needs of the aging.
- (g) To advise and counsel the residents of the county, the County Council, the County Executive and the various departments of county, state and federal governments on matters involving the needs of the aging, and to recommend such procedures, programs or legislation as it may deem necessary and proper to promote and ensure equal rights and opportunities for all persons, regardless of their age. ■

Commission Membership

The Commission on Aging consists of no fewer than 18 members appointed by the County Executive, subject to confirmation by the County Council. Members must be County residents of whom a majority shall be age 60 and older. Members include: those who participate in or who are eligible to participate in programs under the Older Americans Act; local elected officials or their designees; individuals who are or who have been active in government, business, industry, labor, community service, religious, social services, education, and representatives of major organizations or agencies concerned with aging. ■

County Executive's Summit on Aging

County Executive's Summit on Aging

On December 3, 2015, County Executive Isiah Leggett presided over the County's Summit on Aging to celebrate substantial accomplishments and chart the future of Montgomery County as a *Community for a Lifetime*. The Summit was the second such event to take place in the County. The first was the Senior Summit held in November 2008 to identify and plan for meeting needs of the growing population of seniors in the County and ensure that Montgomery County becomes a *Community for a Lifetime* where older adults can live safe, health and vital lives. The 2015 Summit provided the opportunity to review the many policies, programs, and accomplishments resulting from the 2008 event and to focus on efforts going forward that allow seniors of all socioeconomic, ethnic, and diverse backgrounds to live and thrive in the County.

The keynote speaker was Dr. Fernando Torres-Gil, Board of Trustees, AARP, Professor of Social Welfare and Public Policy, Director, Center for Policy Research on Aging, Luskin School of Public Affairs, University of California, Los Angeles. The luncheon speaker was Jeff Kramer, Executive Directors of Strategic Alliances at Verizon. The afternoon presenter was Sandy Markwood, Executive Director of the National Association of Area Agencies on Aging.

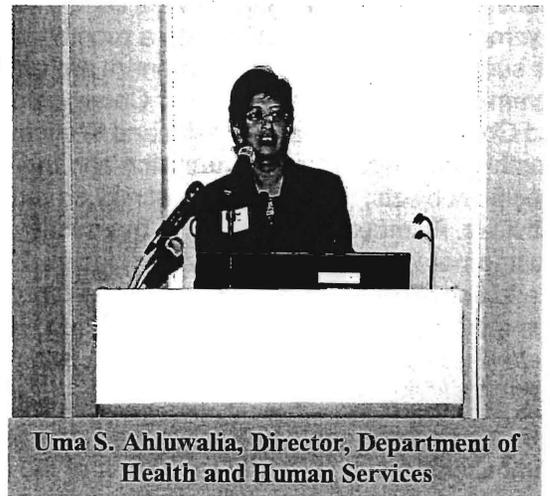
The 2015 Summit on Aging brought together more than 400 stakeholders from government, business, nonprofit, advocacy, faith-based, and health care organizations as well as County seniors. During the morning session attendees, heard from the County Executive and co-chairs of the Senior Subcabinet on Vital Living, Uma Ahluwalia, Director of Health and Human Services, and Gabriel Albornoz, Director of the Department of Recreation.

At the Summit, it was announced that Montgomery County became the first County in Maryland, to join the WHO/AARP Age Friendly Communities and the second to join the Bright Focus Foundation Dementia Friendly America Initiative.

Members of the Commission served on the County Executive's Summit on Aging Advisory Group to help plan and implement the Summit. Commission Chair, Judith Levy is the lead on the Summit's Strategic Planning Work Group and other Commissioners served on different Summit work groups.



Isiah Leggett, County Executive with attendees of Summit on Aging



Uma S. Ahluwalia, Director, Department of Health and Human Services

Commission Activities and Priorities

The Montgomery County Commission on Aging works toward making our County a place where residents can live their entire lives. By the year 2030, the senior population of Montgomery County will increase 54 percent with approximately one-in-five residents over the age of 65. Moreover, Montgomery County has the largest share of Hispanic and Asian elderly in the state and other diverse groups of older adult residents. This dramatic demographic shift has been the impetus for expanding current and establishing new priorities for senior issues.

More than 43 percent of County seniors age 65 and older, the majority of who are women, live alone. Nearly one in ten seniors has a limitation in performing activities of daily living. Depending on their income level, they need different services. For some, case management, transportation, in-home assistance, dental services, congregate and home-delivered meals are essential. In addition, respite care is often needed in situations where the senior lives with a caregiver.

The Commission has an obligation to be a responsible and effective voice for older adults in the community. In so doing, the Commission meets as a whole on a monthly basis except during the summer, when the Commissioners are engaged in Summer Studies focusing on specific topical area. The Commissioners also serve on four Commission Committees: Aging in Place and Community, Communications and Community Outreach, Health and Wellness, and Public Policy. These committees meet monthly. Both the monthly meetings of the Commission and the four Committees invite presenters to provide their expertise on specific subjects. Hence, the meetings are educational and help inform the Commission's advocacy and priority activities. All meetings are open to the public and representatives from other Commissions, Boards, Committees, Montgomery County Department, Agencies, and other stakeholders may attend and participate in these meetings. In addition, Commissioners may serve as liaisons to other groups with similar goals as the Commission's. Further, Commissioners meet with the County Executive, County Council Members, Department Directors and staff, State legislators, members of the public, and others to advance programs, services, and policies on behalf of senior residents of the County.



Commissioner Isabelle Schoenfeld, COA Chair
Judith Levy and Director of Area Agency on Aging
Dr. Odile Brunetto

With a vision and goals outlined in the Commission-developed *Community for a Lifetime: A Senior Agenda* the Commission focuses on different areas of the Senior Agenda each year. The Commission's areas of focus this year included health and wellness, caregiving and caregiver, and protecting older adults from financial abuse. The following sections describe the various activities that the Commission undertook in 2015 to support its priorities.

Legislative Activity

The year always begins with a focus on legislative activities in Annapolis. This year, Commission leadership attended the United Seniors of Maryland Legislative Breakfast and met with members of the Montgomery County delegation. Most important was the presentation by Rona Kramer, newly appointed Secretary of Aging. She emphasized the need to work together with the new Governor, to inform him and new members of the legislature on the needs of seniors. She mentioned the challenge of expected explosive growth of the number of seniors in the State over the next decades.

Commissioners, led by the Public Policy Committee co-chairs DaCosta Mason and Rudy Oswald, identified a number of bills being considered in the State Legislative session that would impact seniors. The General Assembly passed and the Governor signed three bills that the Commission supported through oral and/or written testimony. The bills were:



Commission Activities and Priorities

- Creation of a Task Force on Family Caregiving and Long-Term Supports.
- Permission for the State's Attorney to petition the court in a criminal case to freeze the assets of a perpetrator of financial crimes against vulnerable and elder adults.
- Authorization for the Transportation Network Services to operate in the State. This would include regulations for operators such as Uber and Lyft going forward.

Commission Legislative Breakfast

On November 12th, the Commission held its annual Legislative Breakfast attended by members of the Commission and members of the Montgomery County delegation to the State legislature. Fourteen State senators and delegates attended as well as two staff members representing their legislators.

Commissioner Noelle Heyman's presentation focused on caregiver support and the importance of the Care Act. Commissioner Barbara Mulitz presented on elder financial abuse and legislation needed to allow the Attorney General's Office to bring civil action on behalf of a victim, in addition to a criminal action. Members of the delegation provided excellent feedback on actions that can be taken to enhance the Commission's advocacy on these issues.

County Budget

The Commission on Aging recognized and appreciated the efforts of the County Executive and the FY16 budget that responded to needs of both vulnerable, low income, and more healthy vital older adults. After several years of cutbacks to services to seniors, the budget included increases to services for seniors across several departments. The following highlights the Commission's FY16 budget recommendations:

- Maintenance of current levels of subsidies for Respite Care Services
- Maintenance of current level of funding for Medical Adult Day Care
- Continued support for a position of a part-time Caregiver Support Fellow
- Maintain a new program in the States Attorney's Office to protect vulnerable adults against crime.
- Consider small start up grants to assist the establishment of new Villages in low and moderate income and diverse communities.

The Commissioners formed small teams and meet with individual County Council members to support the County Executive's FY16 budget enhancements for seniors, to discuss items that may not be in the County Executive's budget, and to demonstrate how they relate to the priorities of the Senior Agenda.

Commission committees identified budget priorities for FY17. The Commission continued to stress that the County consider the overall needs of older adults and the cumulative effect of programs when changes are made.

On October 14th, Commissioner, Chair Judith Levy spoke on FY17 priorities to the County Council's Health and Human Services Committee, and on October 20th, Commissioner Noelle Heyman testified at the Council's Health and Human Services Committee's FY17 Budget Forum.



Commissioner Noelle Heyman
COA Legislative Breakfast

Commission Activities and Priorities

The Commission selected Health/Mental Health, Protection of Vulnerable Adults and Aging in Place as top priority issues for seniors for both the immediate budget and for the near future. The Commission's work during 2015 demonstrated how critical it is to identify specific actions that will address high priority needs of seniors. We look forward to the County's budgeted annual action steps to move ahead.

Caregivers and Caregiving

The Commission continues to focus on caregiver services and supports with the goal of establishing a Care-givers Coalition guided by a Caregiver Coordinator in the future. For the third year in a row, the Commission conducted a Summer Study to delve further into issues effecting caregivers. The title of the summer study was Long-Term Care and Supports: Nursing Home Quality, with the objective to learn more about the challenges faced by nursing homes and their residents. The Executive Summary of this summer study is provided in this report.

On October 28th, COA held its Second Stakeholder Forum on Family Caregiving. The 87 forum attendees represented family caregivers, service providers, representatives of advocacy groups, and disease-specific organizations. Elinor Ginzler, a nationally recognized expert in family caregiving, moderated the Forum. The forum was conducted in a moderated panel format with two separate panels. The first panel consisted of six County Council members and State legislators. The second panel consisted of six representatives of service providers, advocacy organizations and the business community. Sixteen recommendations were developed, categorized by advocacy, collaboration and legislation. Recommendations were shared with the Department of Health and Human Services Director, the County Executive, and the County Council.

Commission Outreach and Partnerships

The Commission continues to form liaisons with other Boards, Commissions and Stakeholder groups. In addition, most Commission members are involved with other groups and activities supporting senior services. For example the Commission Chair Judith Levy and the Commission Liaison met with the Vital Living Network to improve collaboration between the two groups. In addition, the Commission Chair moderated a Senior Leadership Montgomery event on April 14, 2015. The panelists included Rona Kramer, Secretary of Aging; Uma Ahluwalia, Director of Montgomery County Health and Human Services and Linda McMillian, Montgomery County Council Senior Legislative Analyst.

The Commission participated at the Jewish Council for Aging Maryland 50+ Employment Expo on June 1st at the Bethesda North Marriott Hotel and Conference Center. Members of the Commission staffed a table, handed out materials, and answered questions. Guest speakers at Commission meetings included: Isaiah Leggett, County Executive; Uma Ahluwalia, Director, Department of Health and Human Services and Co-Chair, Senior Subcabinet; Jeanne Anthony, Senior Project Manager for Education and Outreach, AARP; Andrew Aurand, Maryland-National Park and Planning Committee; Betsy Carrier, Nexus Montgomery; Amy Gotwals, National Association of Area Agency on Aging, Chief of Public Policy and External Affairs; Tovah Kasdin, Director, Elder Safe Center; Gail Kohn, Coordinator, DC Age Friendly Initiative; Rona Kramer, Secretary, Maryland Department of Aging and Deborah Zimmerman, Adult Guardianship Liaison, Montgomery County Circuit Court, Family Division Services.



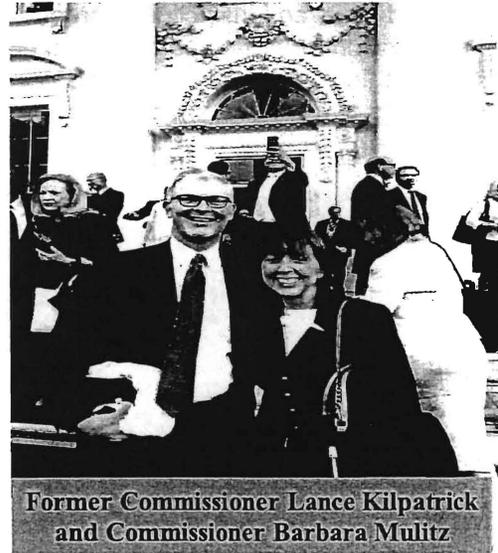
Commission Activities and Priorities

2015 White House Conference on Aging

Commission members and members of the Vital Living Network co-sponsored a White House Forums Watch Party on April 27, 2015, at the White Oak Senior Center. The purpose of the watch party was to listen to the White House Forums and to provide input and ideas for the 2015 White House Conference on Aging taking place in July 2015, from across the Country.

On July 13, 2015, Commissioner Barbara Mulitz and former Commissioner Lance Kilpatrick attended the White House Conference on Aging as invited guests. The Conference focused on the following areas:

- Ensuring retirement security
- Promoting health aging
- Providing long-term services and supports; and
- Protecting Older Americans from Financial Exploitation, Abuse and Neglect



Commission on Aging Bylaws Revision

During the Commission's Fall Retreat in September 2014, the Commissioners agreed that the COA Bylaws be reviewed and updated. Starting in the winter of 2015, a team comprised of members of the Commission worked on revising the bylaws. The objectives of the revision were: to update the information in the bylaws to reflect current reality, to improve COA functioning, and to delete information that was at a level of detail that more appropriately fits with a COA operational guidelines document than a bylaws document. The COA approved the revision at the November 19, 2015 Commission on Aging meeting and it was submitted to County Attorney Marc P. Hansen in December 2015, for consideration.

Moving Forward: The Senior Agenda and World Health Organization (WHO) Age-Friendly Communities

While the County has taken many steps to improve the quality of life for older residents, the Commission continues to believe that it is important for the County to have a comprehensive approach that sets out a direction for the future—one that will help guide and ensure progress in becoming an even better *Community for a Lifetime*.

The Commission understands the importance of establishing priorities and making sure we have a systematic approach. The *Senior Agenda*, with supportive programming and annual budgetary actions each year, demonstrates a commitment to that goal.

The Commission undertook activities that provided information about different communities across the country that are pursuing programs and policies to make their jurisdictions *Communities for a Lifetime*.

On May 28, 2015 the Commission held its Annual Meeting. Guest speakers were County Executive Isiah Leggett; Rona Kramer, Maryland Secretary of Aging; and Gabriel Albornoz, Director, Department of Recreation; Commissioner Isabelle Schoenfeld moderated a panel on the WHO/AARP Age-Friendly Communities Program. Guest panelists included Uma Ahluwalia, Director, Department of Health and Human Services; Jeanne Anthony, AARP; Gail Kohn, DC Age-Friendly Cities Initiative, and Andrew Aurand, M-NCPPC.

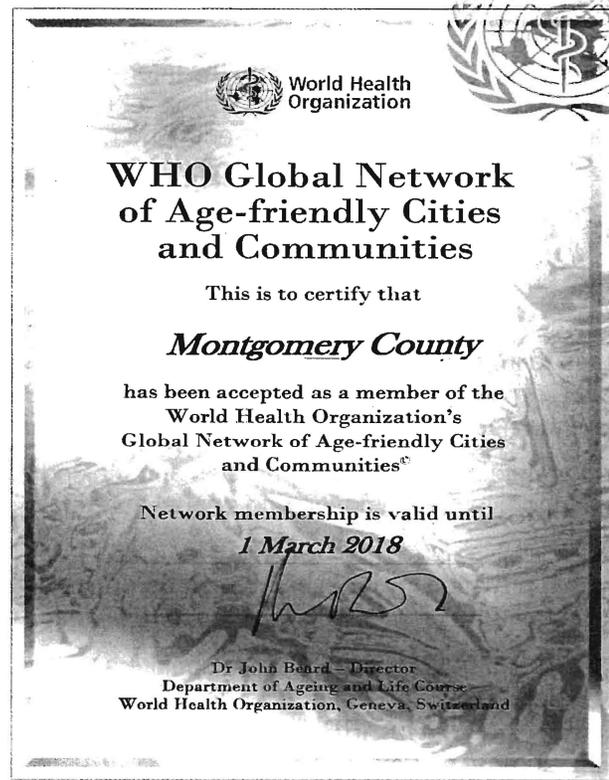
County Executive Isiah Leggett remarks included his support for the *Senior Agenda*, concern for the needs of family caregivers, accomplishments regarding safety and security in the County, concern about sufficient affordable housing, and the addition of the new Senior Fellow position focusing on family caregiving.

Commission Activities and Priorities

The Commission conducted a 2015 Summer Study to explore communities for a lifetime characteristics being implemented in seven jurisdictions across the Country. Some of the jurisdictions were following the WHO/AARP Age-Friendly Communities approach and others were informed by the National Area Agency on Aging approach. Based on the findings of the Summer Study, the Commission developed recommendations on implementing characteristics of a community for a lifetime, that were provided to the County Executive, County Council, and M-NCPPC Planning Board and Department.

On September 24, 2015, the Commission Chair, Judith Levy and Commissioner Charles Kauffman testified at a Montgomery County Health and Human Services Committee regarding the County Planning Department and the COA 2014 and 2015 Summer Studies recommendations.

After careful consideration with recommendations from Department of Health and Human Services, the County Executive accepted the World Health Organization (WHO)/AARP invitation for Montgomery County to join with Washington, DC and other communities across the United States (and internationally) in becoming a WHO Age-Friendly Community. This was announced at the December 3, 2015, Summit on Aging.■





Commission on Aging Committees and Groups

Aging in Place and Community (AIPC)—AIPC priorities are transportation, housing and support of aging in place programs/villages and public policy. AIPC has been working to develop a framework for assessing progress on meeting its priority objectives.

AIPC identified accomplishments and defined information and service needs in transportation. AIPC met with a representative from DOT Ride-On to learn about ridership and criteria for decision making about changes in service and schedules, and about accessibility of vehicles and driver training to assist seniors and people with disabilities. Other transportation-related issues discussed this year include the challenge of effective outreach to the neediest population groups; accessibility issues especially for people with mobility impairments; bus stop and sidewalk improvement; pedestrian safety; and the possibility of shuttle and/or van service to accommodate seniors.

Relative to age-friendly communities, AIPC co-sponsored with the Public Policy Committee, a proposal for a summer study on how age-friendly and livable communities are being implemented in the U.S. The study was conducted, the executive summary is in this report and the full summer study report is available on the Commission on Aging's website. <http://www.montgomerycountymd.gov/HHS-Program/ADS/COA/COAindex.html>

AIPC participated in the Montgomery County Village Gathering. AIPC Chair, Miriam Kelly organized a presentation on Village models. AIPC monitored the growth of Villages in Montgomery County and met regularly with Pazit Aviv, Montgomery County Village Coordinator. Draft chapters of the Village Guide were sent to committee members for comment and will be discussed in 2016.

Accessible and affordable housing, another priority area, was the focus of committee meetings during the last quarter. AIPC invited architects, home modifications experts, builders, and policy experts as guest speakers to learn about and consider housing issues. The Committee noted that a "Design for Life" tax credit incentive is available for home modifications for livability and visitability in Montgomery County. AIPC encouraged the Permitting Services Department to work towards greater public awareness of this tax credit incentive program. AIPC and guests engaged in wide-ranging discussion on the cost of retrofitting versus introducing code changes applicable to new construction, technological changes that will change applicable to new construction, technological changes that will change today's standards and modifications, and the need for public education.

AIPC members played an active role in the December 3, 2015, Summit on Aging by participating on the planning committee and leading working groups. Priorities for the coming year continue to be implementation of the Senior Agenda, progress on becoming a *Community for a Lifetime*, and monitoring policy, progress and opportunities and challenges in its priority areas.

Communications and Community Outreach (CCO)—CCO discussed opportunities to reach out to older adults for the December 2015 Summit on Aging. This included ideas for stakeholder outreach to encourage participation in the Summit as well as in the Summit survey and in focus groups. The goal of these activities was to provide older adults an opportunity to share concerns and needs as they age in the community.

The CCO spearheaded Commission support for a Commission on Aging Alumni Group. The Commission on Aging Alumni group's first alumni breakfast introduced former commissioners and current commissioners, and a conversation was initiated to sort out opportunities for collaboration and support, thus allowing commission activities/projects to benefit from joint efforts between current and former commissioners. As issues and challenges surrounding older adults continues to grow, the Commission is well aware of the need to work jointly with partners and alliances.

Commission on Aging Committees and Groups

Seniors Today—The cable television show, *Seniors Today* continues to present relevant and engaging programming. Programming in 2015 included a wide variety of information important to Older Adults including: Scam Protections and Reporting, Fire Safety, Conflict Resolution Center, Transportation Options, Library Innovations, Life Long Learning, Villages, Aging in Place, and Reverse Mortgages.

In June, the *Seniors Today* Program celebrated the 150th episode of the long running popular show. Congratulations to Austin Heyman, host; Michael Bruen, Director and Producer; and Commission on Aging co-producer Barbara Multz for this successful and important program. *Seniors Today* program airs on Comcast/RCN 6, Verizon 30 at the following times: Mon-(10:00am), Tues- (1:00am, 12:30pm, 6:00pm) Thurs- (2:30am, 6:00pm), Fri-(10:30am) Sat- 2:00am).

Health and Wellness (H&WC)—H&WC researches, supports and advocates for the health and wellness of Montgomery County residents and the programs that serve them and provides guidance to the Commission on Aging. H&WC Committee continued to monitor developments, progress, and needs in healthcare; care-giving and, caregiver support services; long term care and support services; hospice; public policy and legislative opportunities; and in addition, it developed possible summer study topics.

Aging and Disabilities Programs—In the Spring H&WC met with Jay Kenney, Chief, Aging and Disabilities Services, to learn more about important health care programs and initiatives in Montgomery County: Montgomery County Cares (13% are 65+), the Senior Health Insurance Program (SHIP), Health Partners, and the Leadership Institute for Equity and the Elimination of Disparities (LIEED).

Caring and Long Term Services and Supports—H&WC maintained focus on caregiving and caregivers by learning more about current caregiver support services. H&WC members and guests met with hospice providers to learn more about their services and how they work together to provide care to residents at the end of life. The committee also learned about the Med Star Medical House Call Program (which is currently based in the District of Columbia only) and other “wrap around services” now planned for low income seniors here in Montgomery County as well as learned about the Health Services Cost Review Commission and its goal of reducing hospital re-admissions.

The Committee also reviewed the Voice of Quality report on “State of Nursing Home Quality in Maryland and Washington, DC,” 2014. The issue became the topic of a Summer Study titled “*Long Term Care Services and Supports: Nursing Home Quality.*” As a follow-up to the Summer Study, H&WC coordinated a Geriatric Nurse Workforce Development meeting. Representatives from University of Maryland, Montgomery College (Health Sciences and General Education Programs), Holy Cross, Alzheimer’s Association, the Montgomery County Ombudsman Program, Fox Hill Assisted Living Facility, and the non-profit Home Care Partners met to discuss the challenges relative to developing and growing the long-term care and geriatric workforce and action steps to help improve the current situation. Many aspects of caregiving and long-term services and supports have been discussed by H&WC, including public policy and legislation.

Legislation—H&WC supported state legislation in writing or in-person testimony for the following: CARE Act, Care-giver Task Force, Paid/Safe Sick Leave. The Committee made a concerted effort to advance the CARE Act during the 2015 COA legislative breakfast in November with an excellent and informative exchange with the delegates .

Data—H&WC worked with Dennis Linders of the County Stats Office to create interactive maps to identify the location/ address and phone number for every nursing home, assisted living and adult day care program in Montgomery County, the number of staff and the number of residents for every facility. Each map stands alone or can be laid over the others to get a clear picture of the location of available facilities. A future goal: connect addresses to “googlemaps” for easy directions to each facility. Thank you to Dennis Linders and his team for their tremendous effort and helpful results.

Collaboration—H&WC liaised and participated in community education efforts with the Commission on Health, Healthy Montgomery (discharge planning to reduce hospital readmits and data tracking), Health Partners, and the Coalition for Care at the End of Life, e.g., facilitated a viewing session of Consider the Conversation videotape.



Commission on Aging Committees and Groups

Public Policy Committee (PPC)– PPC examines policies, programs, and proposals of the state, local and federal governments for their effects on the lives of Montgomery County seniors. The *Senior Agenda*, developed by the Commission and approved by the County Executive and County Council in 2012, serves as a guide to PPC in making legislative and budget recommendations.

State-Level Activities–The Commission through PPC reviewed, monitored, and/or suggested actions on more than 25 bills. These bills focused on Commission priorities of caregiving, health and wellness, and protection of vulnerable adults. PPC advocated for two bills enacted by the General Assembly that specifically involved Commission priorities: an elder abuse bill that freezes the assets of the perpetrator of financial abuse of a vulnerable adult and will help to ensure that the perpetrator has funds available to reimburse victims of the financial abuse; the other bill creates the Task Force on Family Caregiving and Long-Term Supports. The Task Force is required to study the issue and make recommendations for legislative and administrative action to the Governor and General Assembly on or before September 30, 2016. The PPC also sent a letter to the Health and Human Services Subcommittee of the House Appropriations Committee requesting restoration of cuts in the Governor's Department of Health and Mental Hygiene FY16 budget regarding certain Medicaid services and non-Medicaid Adult Day Care subsidies. The General Assembly supported the Commission's position and reinstated funds for these proposed cuts. In addition to advocating in Annapolis, PPC organized the Commission's participation in the Senior Lobby Day at the Capitol, sponsored by the United Seniors of Maryland and the Commission on Aging Annual State Legislators Breakfast. Both activities raised the visibility of Commission priorities with State legislators.

County-Level Activities–The PPC led the Commission's activities on the County's budget process. In 2015, the County Executive announced a significant budget shortfall and that cuts would be necessary in the FY16 budget. As a result, the PPC budget priorities recommended that the County Executive maintain the budget funding levels set in the FY15 budget. PPC members testified at the County Executive's budget forums and before the County Council to this effect. The Commission was particularly concerned about the FY16 budget maintaining the same level of funding for those programs in which increases were obtained in the FY15 budget. Thus the Commission focused on maintaining funding levels for Adult Day Care subsidies; reimbursement rates for Adult Foster Care Small Group Homes; a Senior Fellow Caregiver Support position; a position in the Long-Term Care Ombudsman program; and additional programs for the Adult Abuse program. As a result of Commission advocacy, the Senior Initiative of the County budget maintained all of the funds the Commission sought to protect. The Summer Study on Age-Friendly/Livable Communities included recommendations that the County create a high-level manager position and an Age-Friendly Livable Community Advisory Board. The Commission advocated before the County Council for the County to become such a community. This advocacy led to the County Executive, with the support of the County Council, to investigate the benefits of becoming an age friendly community.

Federal-Level Activities–The Commission sent letters to Maryland Senators and County representatives in Congress in support of the reauthorization of the Older Americans Act and on a proposed appropriations bill, in particular calling for protection of senior programs and benefits.



Co-Chairs of Public Policy Committee
Rudolph Oswald and DaCosta Mason

Commission on Aging Committees and Groups

Data Task Force

Commissioner Sam Korper led the Data Task Force. The Task Force objective was to review available resources and determine what new data might be collected in the future to better understand how best to measure the impact of programs available to address the needs of the older population. The Data Task Force activities included:

- Developed surveys for use by the Commission to assess data interest and attitudes about future projects (such as WHO Age-Friendly Cities) and priorities. Presented the results at Commission meetings for member discussion.
- Commission Liaison to Health Montgomery (HM)—attended the quarterly meetings of the HM Steering Committee and participated in the continuing HM efforts to establish community approaches to implementing the Obesity (Eat Well-Be Active) and Behavioral Health Task Force efforts in communities throughout the County.
- Participated on the HM Measurement and Evaluation Subcommittee as it works to develop indicators and common metrics to monitor population health trends and approaches to assist the task forces in developing and reviewing activities.
- Held meetings with representatives of CountyStat to introduce the Commission's interests in data concerning the County's older population; promote these interests in meetings introducing CountyStat to local organizations; and developed links for the participation of CountyStat staff with Commission Summer Study projects.



Commissioner Sam Korper and
Commission on Aging Chair, Judith Levy



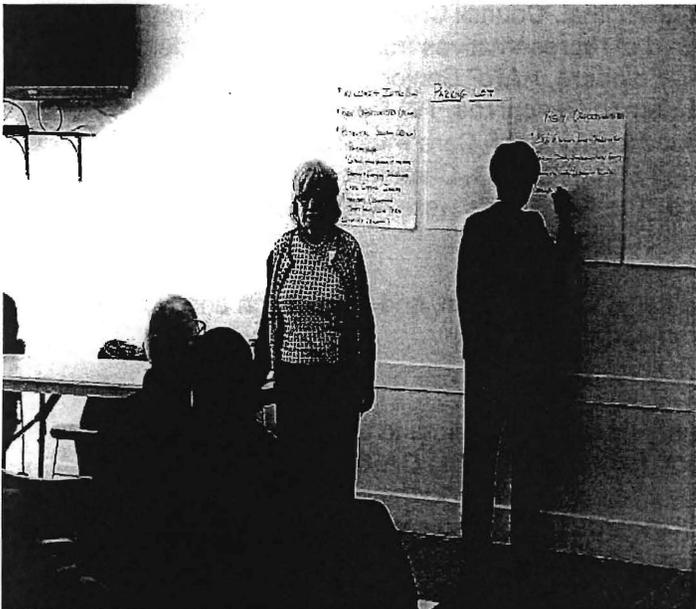
Commission on Aging Committees and Groups

Commission on Aging Alumni Group

In May 2015, at the suggestion of former Commissioner Pat Lesnick and current Commissioner Charles Kauffman, the Commission on Aging invited former members of the Commission to consider forming an Alumni Group to tap into the interests, expertise and energies of this cohort of "graduates" for the benefits of seniors in Montgomery County. In June 2015, present and former members of the Commission, met to consider the role that an alumni group might play. The discussion was spirited and many former members signed on to participate in such an endeavor. Irwin Goldbloom was endorsed as Chair.

The Alumni Group's first meeting was held in July, at which time they decided that the Alumni Group would be aligned with the COA and add ideas and an additional voice in support of the Commission's objectives. Other goals and activities considered involving alumni participation in COA committee meetings and summer studies.

The Alumni Group was invited to the County Executive's Summit on Aging. Several members participated in the planning of the program and in conducting the workgroup sessions. The Alumni Group meets monthly.



Former Commissioner Pat Lesnick at the Senior Summit on Aging



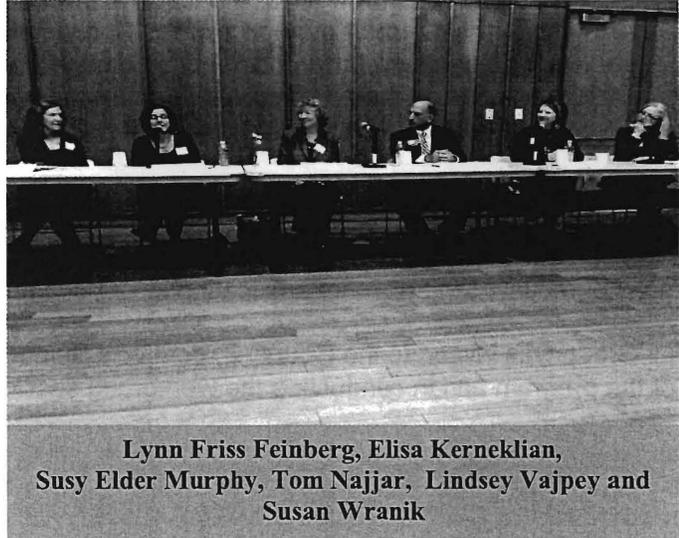
Commissioner Charles Kauffman at the Senior Summit on Aging

Stakeholder Forum “Family Caregiver Support: A Dialogue”

This year’s Stakeholder Forum, “Family Caregiving Support: A Dialogue”, held on October 28, 2015, focused on approaches to implement the recommendations made at the February 28, 2014 “Family Caregivers of Older Adults” Forum and identified other approaches which may not have been previously considered.

Eighty-seven individuals attended. Similar to the 2014 Forum, the attendees represented family caregivers, service providers, representatives of advocacy groups and disease specific organizations.

Introductory remarks were made by: Judith Levy, Commission on Aging Chairperson; Uma Ahluwalia, Director of Montgomery County Department of Health and Human Services; and Dorinda Adams, Senior Staff to the Maryland Care-givers Support Coordinating Council. The introductory remarks were followed by two panels. Panel One was comprised of County and State Legislators and other Government representatives: Roger Berliner, Councilmember; Bonnie Cullison, Delegate; Bernice Hutchinson, Assistant to Secretary Kramer, State Agency on Aging; Delores Kelley, Senator; George Leventhal, Council Chairperson; and Jeffrey Myers, Assistant to the Attorney General. Panel Two was comprised of representatives from Service Providers, Advocacy Organizations, and the Business Community: Lynn Friss Feinberg, AARP Senior Strategic Policy Advisor, Independent Living/Long Term Care; Elisa Kerneklian, Director of Human Resources, TW Perry; Susy Elder Murphy, Debra Ley Elder Care Associates, Owner Tom Najjar, Founder/President, Care Plus Incorporated; Lindsey Vajpey, Alzheimer’s Association Program and Services, and Susan Wranik, Chair Intergenerational Resource Group, Bethesda-Chevy Chase Chambers of Commerce. The two panels were moderated by Elinor Ginzler, Senior Director, Jewish Council for the Aging of Greater Washington.



Lynn Friss Feinberg, Elisa Kerneklian, Susy Elder Murphy, Tom Najjar, Lindsey Vajpey and Susan Wranik

The discussions resulted in 16 recommendations grouped by Advocacy, Collaboration, and Legislation and were shared with the County Executive and County Council. The recommendations were:

Advocacy

1. COA should advocate that the County Council and the County Executive promote to the Montgomery County State Delegation to the Maryland Legislature, support for passage of the CARE Act.
2. COA should advocate to the County Council and the County Executive to support private agencies providing private caregivers to families, to have definitive standards for training caregivers so they are proficient in the care they are contracted to provide and have adequate communication skills so they can effectively communicate with the families they serve.
3. COA should advocate that the Maryland delegation to Congress become members of the Congressional Caregiving Caucus and work toward a national strategy for the national challenge of family caregiving.
4. COA should advocate to the County Council and County Executive to support the conversation of the half-time County Caregiver Coordinator position to a full-time position.
5. COA should advocate to the County Council and the County Executive to support additional funding for the County Village Coordinator and associated activities.
6. COA should advocate to the County Council and the County Executive to support a comprehensive and coordinated effort to get information on family caregiver services to isolated and diverse communities.
7. COA should advocate to the County Council and County Executive to support a coordinated effort to make available information on long-term care insurance.
8. COA should advocate to the County Council and the County Executive to support the establishment of a private–public County Caregiver Coalition to coordinate the delivery of family caregiver services in the County.



Stakeholder Forum “Family Caregiver Support: A Dialogue”

Collaboration

1. COA should encourage family caregiver service organizations to seek creative public-private partnerships.
2. COA, the County Council, and the County Executive should encourage local Chambers of Commerce and the business community to support and help employ family caregivers.
3. COA should collaborate with the County Council once the County Mental Health Inventory is completed to help identify gaps in mental health services.
4. COA encourages the collaboration of the County’s State Delegation with the State Hospital Association to reach a compromise on making the CARE Act effective and acceptable and passable as legislation.
5. COA encourages creative collaboration of family caregiver services with Federal agencies that have responsibilities related to family caregiving that could result in innovative pilot projects.

Legislation

1. COA should encourage the Maryland Congressional delegation to support Maryland Senator Barbara Mikulski’s proposed legislation, the RAISE Act, to bring together Federal Agencies to provide a national strategy on family caregiving.
2. COA Public Policy Committee should study the feasibility of tax credits for the payment of long term care insurance.
3. COA Public Policy Committee should study the feasibility of offering tax credits to families who pay for the services of private caregivers.

2015 Summer Studies Executive Summaries

“Long Term Care Services and Supports: Nursing Home Quality” Executive Summary

Nursing Home Care and services are critically important to vulnerable adults, mostly seniors, as well as their caregivers. According to the 2014 annual report by Voice for Quality Care, Maryland Nursing Homes received a quality rating of D+ for each of the last three years. The COA wanted to increase awareness of these troubling results, gain a better understanding of the concerns and challenges faced by nursing home providers and consumers, and better understand best practices and opportunities for improvement in quality of care and services.

Commissioners invited presenters from other Montgomery County Commissions and groups to share their expertise including:

- Kathy Schoonover, Montgomery County Nursing Home Surveyor
- Eileen Bennett, Montgomery County Long Term Care Ombudsman Program
- Kim Burton, Director of Older Adults Program, Mental Health Association of Maryland (a statewide non profit)
- Theresa Lee, Director of Center for Quality Measurement and Reporting, Maryland Health Care Commission

Findings:

- The nursing home industry is heavily regulated and, as a result, complex in management, staffing, and financing.
- Nursing Home Quality surveys are based on facility ability to follow regulation to meet “minimum” standards as opposed to quality of care and quality of life for residents.
- Staffing is a major challenge impacting the quality of care. The Director of Nursing sets the tone and hires nursing staff in each facility. Many need training in soft skills such as compassion, empathy, and critical thinking.
- A troubling shift in nursing home staffing from licensed registered nurses to licensed practical nurses—who are not trained in critical thinking skills and have responsibility for greater number of patients, resulting in higher staff turnover and lower quality of care for residents.
- Discharge planning for the transition from nursing home to home or assisted living appears to be a challenge for most facilities.

High-Level Recommendations:

- Learn more about regulations governing nursing homes in Montgomery County to better understand the complexities impacting management, staffing and financing.
- Advocate for the creation of a Nursing Home or Long Term Care Coalition to support and continue the work of Maryland's new Long Term Care Culture Change Coalition.
- Advocate for expansion of the Medicaid waiver and determine which of several nursing home and long term care models provide the best patient care and quality of life. Also, advocate for the inclusion of Greenhouse and other potential alternative nursing home models into state nursing home quality survey tools.
- Advocate for increased nursing home staff education, training and support: critical thinking, people skills, and communication—especially discharge planning. Also, advocate for passage of the CARE Act.



2015 Summer Studies Executive Summaries

"Commonalities and Differences in Localities' Approaches for Aging in Community" Executive Summary

The Commission on Aging (COA) sponsored a 2015 Summer Study on "Commonalities and Differences in Localities' Approaches for Aging in Community." The objective of the study was to learn what other communities were successfully doing to create age-friendly environments and identifying where communities encountered challenges. It was also the intent of the summer study to identify opportunities for Montgomery County (MC) to improve current efforts to make the county a more age-friendly livable community. This report describes the study's background, findings, and recommendations.

The study consisted of three sessions held on June 23, June 30 and July 7, 2015. The invited presenters represented seven communities across the country including MC. Some of these localities were part of the World Health Organization (WHO)/AARP Age-Friendly Cities/Communities certification program. Others were part of the National Association of Area Agencies on Aging (n4a) Livable Communities Collaborative. In addition, there was a presentation on Livability Index. All out of state presenters participated via teleconference.

The presentations were guided by questions that presenters received ahead of time. The key findings were that although there were differences in how the communities organized and implemented their age friendly initiatives, there were significant commonalities. All the communities that were part of this summer study had a full time paid Executive Director, Coordinator, Manager, or another high-level position devoted to developing and implementing an Age Friendly/Livable Communities (AF/LC) Program. They also have an Advisory Board or Task Group comprised of representatives from different sectors of the community such as government, business, developers, academia, foundations, nonprofit, health care providers and other stakeholders. And, they typically develop a strategic plan or action plan (often informed by the results of a needs assessment survey) as a framework and for evaluation and accountability.

Based on the Summer Study findings and other considerations, the following recommendations were developed:

1. *Create a new high-level manager position, or, repurpose a high-level manager position that would be located in the Office of the County Executive and be solely devoted to the AF/LC program supporting and sustaining current age-friendly activities and programs and developing new ones.*

The Manager would coordinate with COA, the Senior Subcabinet, the MCNPPC, other key groups, attending meetings and providing input and updates. This position would also coordinate with the County Executive and Executive Departments, County Council, public, as well as other stakeholders.

2. *Alternatively, on an interim basis, until a high-level manager position can be created, the COA recommends a Senior Fellow position in the County Executive's office to fulfill some of the Manager's roles and responsibilities.*

Due to Montgomery County's current budget shortfall, COA recognizes that creating a new high-level manager position or repurposing an existing high-level manager for AF/LC may not be doable at this time. A Senior Fellow would take the initial steps to develop and implement AF/LC initiatives.

3. *Create an AF/LC Advisory Board.*

This Board would be led by the AF/LC Manager (or, in the interim, the Senior Fellow) comprised of representatives from various sectors of the County, including government, COA business community, developers, universities, health care providers, non-profits, associations, foundations, media, the public and other stakeholders in the County.



2015 Summer Studies Executive Summaries

4. *Enhance the collaboration among the Senior Subcabinet departments to develop and/or implement AF/LC initiatives that cross departments and with the Maryland National Park and Planning Commission (MNCPPC)*

The creation of the Senior Subcabinet was an important initial step in the coordination of AF/LC initiatives among county government departments. Another important step resulting from COA's 2014 Summer Study on "The Need to Improve Advocacy for Older Adults in Montgomery County Planning" was that a representative of the MNCPPC-Montgomery County Planning Department now has a seat on the Senior Subcabinet. The Senior Subcabinet members and workgroups should identify opportunities for greater collaboration.

5. *COA should coordinate closely with the AF/LC Manager (or, in the interim, the Senior Fellow) and have a seat on an AF/LC Advisory Board.*

While the Manager and the Advisory Board would spearhead major activities of an AF/LC, the COA would continue to have an important role in: monitoring, advising, and advocating for AF/LC initiatives with elected officials at the Federal, State, and County levels, government departments, other relevant stakeholder groups. COA would also continue to educate and seek input and feedback from the public about AF/LC initiatives.

6. *COA should continue to advocate for inclusion of a "Senior" section in all Master Plans and Sector Plans.*

This was a recommendation in COA's 2014 Summer Study Report on "The Need to Improve Advocacy for Older Adults in Montgomery County Planning," which COA endorsed.

The Planning Department develops master plans, reviews applications for development and analyzes various information to assist public officials plan for Montgomery County's future. The Planning Board is responsible for approval of all master plans that affect neighborhoods and how we live. As a result of the Planning Board's role in community planning their actions have a significant impact on creation of age friendly/livable communities.

To read the full reports on the above Summer Studies, visit the Commission on Aging's website at: www.montgomerycountymd.gov/HHS-Program/ADS/COA/COAindex.html ■



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COMMISSION ON AGING

Montgomery County Commission on Aging FY'17 Budget Statement

April 6, 2016

Good Evening my name is Noelle Heyman, Chair of the Commission on Aging.

The Commission on Aging greatly appreciates the support the County Executive continues to provide to seniors as reflected in the FY'17 Senior Initiative Budget. We also wish to acknowledge the County Executive's Summit on Aging, held in December 2015, which called attention to the County's accomplishments in providing needed services and programs for older adults in addition to identifying *Community for a Lifetime* priorities for the future.

The Commission is pleased to support the County Executive's FY'17 Senior Initiative budget enhancements including: increase in funds for Medical Daycare subsidies for additional clients to attend Adult Day Care program; additional funds for mandated Adult Evaluation and Review Services (AERS) evaluations; new funds for a Senior Fellow position to support the County's Age-Friendly Communities initiative. It also includes additional funds for operating and staffing a full senior program at the new North Potomac Community Center; additional funds to support Victory Crossing, a mixed-income senior development in Silver Spring; enhancing the Call-n-Ride program by decreasing the minimum age for eligibility from age 67 to 65; additional funds to provide low-income immigrant seniors with in-center and educational field trip activities, and an increase in meals on wheels.

As much as the Commission applauds these budget increases and enhancements, many of which were requested in the Commission's FY'17 budget priorities statement and/or in Commission letters, there are Commission priorities that are not reflected in an increase in funds in the County Executive's FY'17 budget and which we believe would provide additional protection and support for our County's older and most vulnerable residents. These Commission budget priorities include:

- **Montgomery County Respite Services Program** – Increase in funds to provide additional respite services for individuals who are caring for older adults in Montgomery County. As the County's senior population increases by approximately 5,000 older adults each year, the number of family caregivers also increases. The toll on many of these caregivers can result in detrimental effects on the individual caregiver, local businesses, society, and the ones they are caring for in terms of lost income, absenteeism, reduced productivity, mental and physical health challenges. Even though many families take great joy in providing care to their loved ones at home these consequences can be overwhelming. Caregivers need physical breaks to tend to their own needs. They also need emotional breaks so they can return to their caregiving duties rested and refreshed. Respite care has been shown to help sustain

Department of Health and Human Services

401 Hungerford Drive, 4th Floor, Rockville, Maryland, 20850 240-777-1120, FAX 240-777-1436

www.montgomerycountymd.gov/hhs

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For FY'17, the Commission continues to focus on key policy and budget measures to help attain the vision of a Community for a Lifetime. We continue support for and monitor implementation of the Senior Agenda and the recommendations of our Summer Studies and Stakeholder Forums.

Thank you for the opportunity to address this forum.

HHS

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COMMISSION ON AGING

RECEIVED
MONTGOMERY COUNTY
COUNCIL

October 7, 2015

The Honorable George Leventhal
Chair, Health and Human Services Committee
Montgomery County Council
100 Maryland Avenue
Rockville, Maryland 20850

Dear Mr. Leventhal:

On behalf of the Commission on Aging (COA), I am pleased to provide the COA's priorities for FY'17. The Commission on Aging believes that Montgomery County can continue to make progress in becoming a Community for a Lifetime as adopted by the Montgomery County Council resolution in 2012 and continues to concern itself with the quality of life of older adults. The Commission looks forward to the County Executive's Summit on Aging on December 3, 2015. It will provide an opportunity for the County to hear from older adults as they express their needs and priorities. The Commission looks forward to working with the Council on these priorities in the future. With one of the fastest growing senior population the Commission hopes that the Council will consider a "maintenance of effort" budgetary process for future decisions. Similar to the per pupil commitment for the school system, as the number of older adults who turn 65 increase annually, the County per senior expenditures need to be increased to maintain the same per person expenditure.

In recent times, the Commission has advocated for and received your support for the adoption of the Senior Agenda. The Council has also supported funds for new staff positions for a Transportation/Mobility Coordinator and a Village Coordinator and a part-time Caregiver Supports Manager. We also appreciated prior funding increases in 1) Adult Day Care Subsidies, 2) rates for Foster Care Small Group Homes, 3) the Long-Term Care Ombudsman Program and 4) efforts to combat Elder Abuse.

For FY17, the Commission seeks to focus on key policy issues that have been the subject of many of our activities over the last two years. Our priorities are a result of Summer Studies, Stakeholder meetings and other efforts that inform our decision-making. We are advocating for an increase in efforts that support caregivers and those to whom they provide care. In addition, the Commission is supporting the ability of older adults to age in place in a more age-friendly Montgomery County. While a great deal has been done to make the County age-friendly, the Commission believes that a more structured effort, such as seeking to become a certified World Health Organization Age-Friendly Community is needed. We are encouraged by the actions of County Executive and County Council to determine how to become an age-friendly community, and look forward to budgeting in FY17 that will begin the process.

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The following are the specifics of our FY17 recommendations for Health/Mental Health and Aging in Place. Should the County revenue picture improve, recommended FY17 budget initiatives are also included for consideration.

1. Health/Mental Health

After two summer studies and a Caregiver Stakeholder meeting, the Commission found that there is a growing population of multi-generational, diverse and low-income families in the County who increasingly find themselves caring for their older parents, grandparents and other family members. These activities also identified challenges and unmet needs faced by caregivers in the County, in particular, a single place to turn for information about services and supports.

- a. The Commission on Aging greatly appreciates the FY16 funding for a part-time Caregiver Supports Manager to develop and staff a Caregiver Support Coalition. The Commission believes and recommends that based on its findings, the County needs to fund a full time permanent Caregiver Supports Coordinator position to meet the growing needs of family caregivers. FY17 Recommendation: Additional \$40,000

- b. Provide Additional Subsidies for Respite Care and Medical Adult Day Care

Respite Service for Older Adults

The Commission on Aging recommends a funding increase for the Montgomery County Respite Services Program to provide additional respite services for individuals who are caring for older adults in Montgomery County. Even though many families take great joy in providing care to their loved ones at home, the physical, emotional and financial consequences for family caregivers can be overwhelming. These caregivers need physical breaks to tend to their own needs. They also need emotional breaks so they can return to their caregiving duties rested and refreshed. Respite care has been shown to help sustain family caregiver health and well-being, avoid or delay out-of-home placements, improve long term family stability, and reduce the likelihood of abuse and neglect. FY17 Recommendation: \$100,000

Medical Adult Day Care

Medical Adult Day Care Programs are critical in supporting caregivers by providing day time services that allow family members relief from the continuous needs of caregiving for an individual with a chronic disease as well as providing a therapeutic environment. Despite the increase in funding two years ago, there is still a waiting list for the adult day care subsidy program and the adult day care subsidy reimbursement, at \$56.00 per day, remains significantly lower than reimbursements from other programs including Medicaid and the State's Senior Care Funds Program. In addition to supporting caregivers, a Medical Adult Day Program allows individuals to age in place while receiving medical oversight and support in an interdisciplinary healthcare setting that provides social stimulation. FY17 Recommendation: \$100,000

2. Aging in Place

The Commission on Aging conducted pertinent Summer Studies in 2014 and 2015. The first study, "The Need to Improve Advocacy for Older Adults in Montgomery County Planning" advised the Commission on 1) needed enhancements to the Planning Department/Planning Board decision-making related to older adults in Master Plans and Sector Plans and (2) The COA believes that Montgomery County should become a WHO Age-Friendly City [County] because it is a comprehensive approach to ensure that the needs of older adults and everyone else in the community are met. Therefore, COA should advocate with the County Executive/Council that a task group be formed to explore the steps and resources involved in Montgomery County joining the WHO Age Friendly Cities program.

This year's study, "Commonalities and Differences in Localities: Approaches for Aging in Communities" examined at what other communities in the nation are doing to create age-friendly environments and where communities encountered challenges. The intent of these studies was to identify opportunities for the County to improve upon current efforts to make the County a more age friendly and livable community.

a. Age-Friendly Communities

The seven communities that examined in the 2015 study had a full time Executive Director or Manager position devoted to developing and implementing the Age-Friendly/Livable Communities program. The Commission recommends funding for a full time permanent high level manager position in the County Executive's Office to administer the age-friendly program and develop and staff an Age-Friendly Advisory Board. FY17 Recommendation: \$90,000

b. Increase Rates for Small Group Homes

The Commission on Aging has sought incremental increases in the payment rates for Small Group Homes in the Adult Foster Care program. The last increase in FY15 was a beginning attempt to increase the Adult Foster Care reimbursement rate, in order to reduce the gap between the County and State subsidy rates for small assisted living homes. The care providers remain hopeful that the reimbursement would continue to take into account the fact that subsidy rates remained flat for more than 20 years prior to the last increase. Additional increases are necessary in order to begin to address the financial challenges of housing, care and supervision for our most vulnerable residents. FY17 Recommendation: \$153,180

A summary of the budget implications of the Commission on Aging's policy priorities follows:

Commission on Aging FY17 Budget Priorities – Summary

1. Health/Mental Health

- Increase funding for a full-time Caregiver Support Coordinator staff position. FY17 Recommendation: \$40,000
- Provide additional subsidies for Respite Care and Medical Adult Day Care. FY17 Recommendation: \$200,000 (\$100,000 for each program)

2. Aging in Place

- Funding for a full-time permanent staff position to coordinate an Age-Friendly Community program. FY17 Recommendation: \$90,000
- Increase rates for Adult Foster Care Small Group Homes. FY17 Recommendation: \$153,180

We thank you for your ongoing support and for the opportunity to present our priorities.

Sincerely,

A handwritten signature in cursive script that reads "Judith Levy" followed by a stylized flourish or initials.

Judith Levy
Chair, Commission on Aging



COMMISSION ON PEOPLE WITH DISABILITIES ANNUAL REPORT 2015

October, 2015

Via Letter of Transmittal Electronically to:

Honorable Isiah Leggett, Montgomery County Executive
Honorable George Leventhal, President, Montgomery County Council
Uma S. Ahluwalia, Director, Montgomery County Department of Health and Human Services

The Commission on People with Disabilities is pleased to present a summary of its activities for the past year for your review. We continue to advise and consult with you on issues of concern to the safety and well-being of the over 80,000 people with disabilities who live in the County, as estimated by the US Census Bureau. The Commission continues to work to improve the lives of people with disabilities who work, visit or live here.

The Commission marked this 25th anniversary year of the Americans with Disabilities Act (ADA), landmark civil rights legislation, also advising the County on benefits to the County of partnership in advocating on behalf of the County's interests at the State and Federal levels. Under your leadership and with your support, the Commission is mandated to ensure that the County government complies with all Federal, State and local laws that guarantee the rights of people with disabilities, particularly the Americans with Disabilities Act of 1990 as amended in 2010. The Commission is involved in making recommendations to the County in regards to the Department of Justice Project Civic Access Settlement Agreement. Keeping with the spirit of disability laws, we are proud of our work with the Department of Transportation and the Council to improve taxi service, efforts of the Office of Human Resources in partnership with the Commission and the Commission on Veterans Affairs to increase the employment of people with disabilities including disabled veterans, and our partnership with the Department of Permitting Services for the Design for Life Tax Incentive Program with the goal of promoting more accessible homes for residents of all ages and stages of their life. The County is a leader in the nation on these key issues that promote a more inclusive community.

For the upcoming year, we recommend that the County increase health prevention strategies of secondary illness for people with disabilities. People with disabilities may be the largest underserved population that demonstrates evidence of health disparities. We are collaborating with the Commission on Health and the Recreation Department in advising on greater access to programs and services that promote health/wellness for people with disabilities.

We also ask that you work with us to develop strategies to eliminate the State Developmental Disabilities Waiting List. As of January 20, 2015, the Maryland Developmental Disabilities Administration reported that there are 8,169 on the State waiting list for DD Services statewide. In Montgomery County there are 1,076 on the waiting list who currently receive no services. Of these 830 are DD Eligible, 26 are in crisis resolution (need services within 3 months), 97 are in crisis prevention (need services within a year) and 707 have current need (need services within 3 years).

We wish to recognize and give our personal thanks to all Commissioners, the many community members, and the agency staff who participate in our meetings for their commitment and dedication in promoting the civil rights and independence of people with disabilities. We would like to acknowledge DHHS Director Uma Ahluwalia for continuing to meet with the Boards, Commissions, and Committees to keep us informed of important health and human services issues; Jay Kenney, Ph.D., Chief, Aging & Disability Services, Betsy Luecking, Community Outreach Manager, and Carly Clem, Administrative Specialist, for their outstanding support in providing the Commission with the resources needed to carry out our mission. This report is the result of our combined efforts.

It has been a pleasure to work with you and members of the Commission during our term of service. We are confident that you will continue to support the Commission's efforts to enhance the lives of people with disabilities. Our meetings are open to the public, and we invite you to join us for any meeting.



Seth A Morgan
Seth Morgan
Chair

Marcie Povitsky
Marcie Povitsky
Vice Chair



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COUNTY EXECUTIVE CELEBRATES 25TH ANNIVERSARY OF AMERICANS WITH DISABILITIES ACT (ADA)

Montgomery County Press Release 7/23/15



Pictured left to right: David Sharp, Chair, Maryland Statewide Independent Living Council, County Executive Isiah Leggett, Councilmember Roger Berliner, Seth Morgan, Chair, Commission on People with Disabilities, and Therese McMillan, Acting Administrator, U.S. Department of Transportation, Federal Transit Administration

On the eve of the 25th Anniversary of the ADA, Montgomery County Executive Isiah Leggett announced that the County's nine-year Bus Stop Improvement Program has enhanced accessibility and pedestrian safety at 3,025 bus stops.

In 2006, the Montgomery County Department of Transportation (MCDOT) assessed the County's 5,340 bus stops for location, pedestrian accessibility and connection, signage information, safety/security and amenities and identified 3,400 as needing improvement. Today, the Bus Stop Improvement Program has completed work on 89 percent of those stops; work continues on the remaining 275 bus stops.

Upgrades were made first to stops with the highest ridership and those deemed in most urgent need of improvement, such as stops that were not located at intersections or located alongside multi-lane roads with

fast-moving traffic. Many bus stops were moved to safer locations. Once in a specific area, enhancements also were made to surrounding stops to improve construction cost efficiency.

"We are pleased to be here today celebrating the 25th anniversary of the Americans with Disabilities Act by combining two of Montgomery County's highest priorities, promoting mass transit and maintaining an inclusive community," said Leggett. "It is essential that we find a way for our residents to move around the County without a car. At the same time, we must make sure that mass transit is available to everyone, which is why we have made such strides in converting our bus stops so that they can be used by those with disabilities as well as those without."

Montgomery County is a national leader in this arena. In trainings of other jurisdictions, U.S. Access Board staff references Montgomery County's Bus Stop Improvement Program as a model.

Improvements to the bus stops and travel pathways have included construction of:

- 1,255 ramps at 826 intersections
- 85,618 square feet of sidewalk leading to bus stops
- 166,777 square feet of five-by-eight foot concrete pads at 2,474 bus stops
- 422 "knee walls" that prevent wheelchairs from rolling onto dangerous terrain, provide seating for waiting passengers and help keep bus stops clear of debris

"We congratulate Montgomery County for improving its bus system, which provides a lifeline to people who don't drive and is emblematic of the ADA's intent to open the doors of public transportation to everyone," said Therese McMillan, Federal Transit Administration (FTA) Acting Administrator. "We know that many people with disabilities travel by bus, and we want to be sure that they can travel anywhere public transportation is offered across the country."

COUNTY EXECUTIVE CELEBRATES 25TH ANNIVERSARY OF AMERICANS WITH DISABILITIES ACT (ADA) CONTINUED

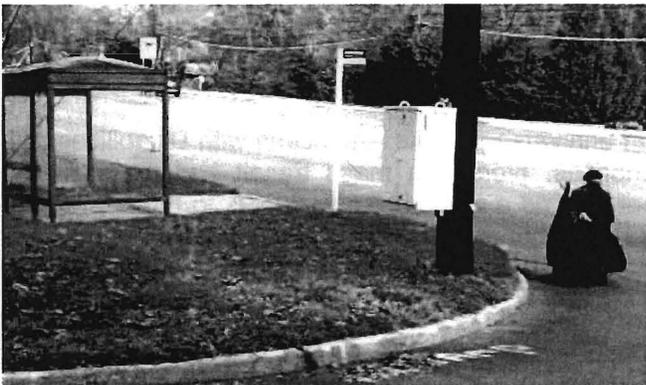
"Since the passage of the American with Disabilities Act in 1990, the County has been diligently working with the Commission on People with Disabilities to obtain advice on compliance and usability of programs and services," said Seth Morgan, M.D., Chair, Montgomery County Commission on People with Disabilities. "Now, this bus stop symbolizes the ongoing advances in inclusiveness that are a reality in our County and across this nation."

A total of 16,125 people in wheelchairs boarded Ride On buses in FY15. In addition to ensuring ADA compliance, bus stop upgrades reduce the distance to crosswalks, provide pedestrian refuge islands, establish connections to existing sidewalks, address slope issues and improve drainage.

The \$11 million Bus Stop Improvement Project was approved in the 2006-2011 six-year Capital Improvements Program budget. As well as enhancing Ride On bus stops, MCDOT is improving about 600 Washington Metropolitan Area Transit Authority (WMATA) stops and 900 stops shared between WMATA and Ride On located in Montgomery County. The average cost to improve each bus stop is less than \$3,000.

Upgrading the remaining 275 bus stops is more complex because many are located on roads not originally built to accommodate pedestrians. Enhancing these bus stops requires purchasing right-of-way from private property owners or trying to work around obstructions, such as walls and fences, which prevent installing ADA-compliant facilities. Information about Ride On routes and schedules is available [online](#).

The Bus Stop is Inaccessible to a Person in a Wheelchair



Side Walk/Curb Cut Provide Wheelchair Access



Before



After

LEGGETT AND PUBLIC SAFETY CHIEFS OFFER CRITICAL HOLIDAY SAFETY TIPS; REMINDS DRIVERS TO RESPECT DESIGNATED DISABILITY PARKING SPACES

Montgomery County News Release - 12/8/14

Montgomery County Executive Ike Leggett today joined Police Chief Tom Manger and Fire Chief Steve Lohr at the Congressional Plaza shopping center in Rockville, to encourage community members to make safety a priority this holiday season.

"We are here in a busy shopping center to emphasize awareness of seasonal and parking lot/pedestrian safety," said Leggett. "Drivers are all about trying to find an open parking space in crowded lots. Shoppers are loaded down with packages and trying to remember where they parked. Our slogan, 'Heads Up in Parking Lots,' encourages both pedestrians and drivers to be on the lookout for one another."

They were joined in that effort by County Council Public Safety committee members Tom Hucker and Sidney Katz; and by Trish Gallalee, the Chairperson of the County's Commission on People with Disabilities.

Last year, the County began an educational awareness campaign about parking lot/pedestrian safety after research showed that the number of pedestrian collisions in parking lots had increased each year between 2010 and 2012. In 2012, 30 percent of pedestrian collisions in the County occurred in parking lots. At the end of 2013, analysis showed that percentage had dropped to under 25 percent.

"During the excitement of the holiday season, we should all increase our awareness of pedestrians who are out and about," said Public Safety Committee Council member Sidney Katz. "We should be sure that when we are pedestrians, we are acutely aware of our surroundings."

Police Chief Tom Manger not only supported parking lot/pedestrian safety, but also provided important holiday crime prevention tips and designated disability parking enforcement information. "Each holiday season we deploy special units and conduct enforcement to help increase everyone's safety," said Chief Manger. "Please do your part. Take the time to become aware of important safe driving, pedestrian and holiday practices; and make sure that safety is a top holiday priority."

During the holidays, the police department deploys an Alcohol Holiday Task Force to reduce the incidents of drunk and drugged driving. The District Community Action Teams (DCATs) strengthen their focus on preventing street robberies and residential burglaries. Officers are encouraged to be on the lookout for the illegal use of designated disability parking spaces.

Senior citizens and their family and friends are asked to be especially aware that criminals frequently target seniors who are typically very willing to provide help. Seniors should be encouraged not to engage in discussion or contact with strangers asking their advice, offering to make a repair or requesting money for any reason. Call 9-1-1 if the contact is in progress or call the police non-emergency number, 301-279-8000, after the fact.



Montgomery County Executive Isiah Leggett delivers remarks at a press conference to encourage community members to make safety a priority this holiday season. Pictured to the right of Leggett is former Commission Chair Trish Gallalee.

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LEGGETT AND PUBLIC SAFETY CHIEFS OFFER CRITICAL HOLIDAY SAFETY TIPS; REMINDS DRIVERS TO RESPECT DESIGNATED DISABILITY PARKING SPACES CONTINUED

Fire Chief Steve Lohr urged citizens to look for and eliminate potential dangers that could lead to fires and injuries. "When you're making your list and checking it twice, smoke alarms are possibly one of the best gifts you can give this holiday season," said Chief Lohr. "It's a fact. Working smoke alarms save lives and I am personally asking each and every resident to check their smoke alarms and make sure they are working this holiday season."

Both police and fire rescue personnel work together on the "Shop with a Cop or Firefighter" campaign. Officers and firefighters go to busy shopping center parking lots across the County to provide extra security and safety awareness. They'll be handing out reusable shopping bags with information about parking lot safety and respecting the designated disability parking spaces.

"I helped launch the County's Respect the Space campaign in 2011," said Chairperson of the County's Commission on People with Disabilities Trish Gallalee. "On behalf of all of us who need these spaces, I am imploring drivers without disability tags or license plates not to use these spaces, even for a few minutes. Remember, those spaces also include the striped area/access aisle that allows a wheelchair lift to load and unload passengers."

Respect the Space/Disability Parking



Please Remember...

- It is illegal to park a vehicle in a designated disability parking space unless the vehicle has valid and properly displayed Disability Tags or Placards issued by a state Department of Motor Vehicles (such as the MVA).
- The fine for illegally parking in a designated disability space in Montgomery County is \$250.00.
- The individual who was issued a placard or plate must be transported in the vehicle for the vehicle to legally park in a designated disability parking space.
- Parking in a striped area/access aisle adjacent to and between disability spaces is also against the law. Those striped areas allow room for wheelchair lifts to load and unload passengers.
- Disability parking spaces are located in all parking lots and garages within parking districts for the exclusive use of those with Disability Tags or Placards. Even when vacant, they are never, even for a matter of minutes, for use by anyone else.
- If you see a vehicle without a disability tag or license plate parked in a designated disability parking space, call the police non-emergency number 301-279-8000.

Learn more at: <http://www.mva.maryland.gov/about-mva/disabilities>
Montgomery County Commission on People with Disabilities

DESIGN FOR LIFE TAX INCENTIVE PROGRAM



Design for Life, managed by the Department of Permitting Services, provides partial tax credits to property owners or home builders who install measures that improve accessibility, visit-ability and/or live-ability of residential homes. This legislation was promoted through efforts of the Commission for People with Disabilities and embraced by the County Council and the County Executive.

Credits are available for accessibility features added to single family homes and condominiums. Tax credits for improvements that make a home qualify as a visitable or livable home are available for single family homes and townhouses.

For retrofits to existing single family homes, such accessibility measures can include things like installing entry doors wide enough for wheelchairs, providing a no-step entry into the home, improving bathroom access with grab bars or roll-in showers, wider doorways, etc. This model program was initiated in Montgomery County to improve the ability of all residents to manage more successfully in homes, to improve people's ability to age in place and to make homes more accessible to visitors of all ages. More information is available at <http://permittingervices.montgomerycountymd.gov/DPS/designforlife/DesignForLife.aspx>.

Please review the following documents for a complete understanding of the Design For Life Tax Incentive Program.

- Bill 5-13 Property Tax Credit – Accessibility Features – legislation approved by the Montgomery County Council effective July 1, 2014.
- Executive Regulation 3-14 Design For Life Tax Incentives (Council Resolution 17-1267) – explains how Bill 5-13 Property Tax Credit – Accessibility Features will be implemented. Included in this Executive Regulation are definitions, application and processing procedures for requesting property tax credits and Development Impact Tax for School Improvement credits and certification procedures for the same. This executive regulation also describes the purpose and procedures for the Design for life Builder/Homeowner and Project Certification Program.
- Disclosure of Availability of Property Tax Credits for Accessibility Improvements – template for seller and buyer of new single family residential real property in Montgomery County.
- Impact Tax Credit Certification Agreement – template tax credit agreement for builders constructing multiple single family dwellings meeting Level I Accessibility Standards.
- Application for Residential Building Permit – for Single Family Dwellings, Townhouses, Duplexes
- Application for Commercial Building Permit – for Multifamily Dwellings
- Building Permit – Supplemental Design For Life Application – submitted with application for Building Permit detailing proposed Design for Life Accessibility Features and/or Level I or II Accessibility Standards.
- Design for Life Technical Guidelines - manual that provides technical guidance on the design and inspection requirements for implementation of Bill 5-13 Property Tax Credit – Accessibility Features.
- Application for Design for Life Tax Credits – submitted to DPS after work has been inspected and the final inspection approved.

For more information, please contact Simin Rasolee, Permitting Services Manager, at 240-777-6283 (V).

MONTGOMERY COUNTY COUNCIL APPROVES TWO BILLS TO IMPROVE TAXI SERVICE

Montgomery County Council Press Release - 7/21/15

The Montgomery County Council today unanimously approved Bills 33-15 and 53-14 that will improve taxi service in the County by helping the existing taxi structure better compete with new types of services. The bills will provide opportunities to have more taxicabs available to respond to calls and address working conditions in some situations for drivers.

The lead sponsor of Bill 33-15 was Councilmember Roger Berliner, who chairs the Council's Transportation, Infrastructure, Energy and Environment Committee. The bill was co-sponsored by Councilmembers Marc Elrich, Nancy Floreen, Sidney Katz, Tom Hucker, Craig Rice and Hans Riemer. The bill will create a Transportation Services Improvement Fund, impose a per-trip surcharge on certain transportation network services to finance the fund and provide for disbursements from the fund to be used to improve the delivery of accessible taxicab services and transportation services to eligible senior citizens and people of limited income.

Expedited Bill 53-14 was sponsored by Councilmembers Berliner, Floreen, Rice and Riemer. The bill was combination of three original bills directed at improving taxi service.

Key provisions of the bill address taxicab regulations for company owners and drivers, including rules for Passenger Vehicle Licenses (PVLs). The bill authorizes the issuance of 50 accessible vehicle licenses to a driver-owned cooperative to help individual drivers and spur innovation in the expansion of accessible transportation. It also creates a centralized dispatch system for all County cabs—an idea strongly promoted by Councilmember Rieme.

The bill provides for more taxicabs to be available for calls and requires the County's Department of Transportation to develop a plan to increase the numbers of wheelchair-accessible cabs (vans) that have lifts or ramps, with a goal of having 100 percent accessible taxicabs in the County by 2025.

In its 2015 session, the Maryland General Assembly passed a law regulating "transportation network companies" (TNCs), otherwise known as ride-hailing services such as Uber and Lyft. The law, which became effective on July 1, created a new regulatory framework within which TNCs in the State will operate. The law also authorized a county or municipality that licensed or regulated taxicab services on or before Jan. 1, 2015, including Montgomery County, to impose a charge of up to 25 cents on every TNC trip that originates within the county or municipality. The revenue generated from the assessments must be used for "transportation purposes."

This opened the way for Montgomery Bill 33-15 that will create a Transportation Services Improvement Fund, impose a per-trip surcharge on certain transportation network services to finance the fund and provide for disbursements from the fund to be used to improve the delivery of accessible taxicab services.

"The measures our council passed today will fundamentally reform our County's regulation of the taxi industry, and these reforms will accrue to the benefit of all – the industry, drivers, consumers, the disabled community, seniors and low-income residents," said Councilmember Berliner. "These bills address the legitimate issues of our drivers' working conditions for the first time in our County's long history of taxi regulation, and support the creation of a new, competitive, low-cost driver cooperative. Our drivers have been exploited have been exploited for too long. It needs to stop. And with this bill, it will stop. The bills also provide new funds and 66 new licenses to support service directly to our disabled residents, who have been poorly served by our existing fleets and remain unserved by the TNCs. And we also have made reforms that help our existing taxicab companies, reducing their costs, eliminating outdated regulations and providing new licenses to our smaller, newer fleets. These bills were truly a win for all stakeholders and our entire riding public."

Most County taxicab companies lease their vehicles to drivers by the day or the week, and it is up to the driver to meet their expenses and make a living. Taxicab leases are often upward of \$100 per day, and the driver keeps their vehicle full time. Under this model, the company has little direct interest in how much business the driver turns over, but if it has many drivers bringing in substantial income, demand to lease its vehicles will increase, and it may collect more money in lease fees. Under a lease system, the driver typically pays for the gas, while

MONTGOMERY COUNTY COUNCIL APPROVES TWO BILLS TO IMPROVE TAXI SERVICE CONTINUED

the company pays for any repairs. Taxicab companies that run on a lease arrangement make their money on how many vehicles are being used—in effect turning them into car rental companies that provide dispatch, marketing, insurance and credit card payment processing services.

At present there are five fleets operating in the County holding a total of 549 PVLs. In addition to the fleets that hold the majority of PVLs and engage the services of lessee drivers, there are 221 PVLs held by individuals. Individual PVL holders own their vehicles, but must affiliate with a fleet or association. Affiliation rates are substantially lower than lease rates, as they essentially represent the cost to a driver of using a fleet's dispatch and marketing.

Among the provisions of amended Expedited Bill 53-14 are a requirement of one-year maximum terms on agreements between licensees and affiliates or drivers and a prohibition on automatic renewal of agreements between licensees and affiliates or drivers. The bill will also require the County Executive to establish standardized lease/affiliation agreements, maximum lease and affiliation rates and permissible ancillary fees that may be charged to drivers.

"While the transportation industry has evolved dramatically over the years, particularly with the introduction of TNCs like Uber and Lyft, our fundamental commitment to ensuring quality service for our residents with disabilities has not wavered," said Councilmember Floreen, who chairs the Council's Planning, Housing and Economic Development Committee. "Now, TNCs will be required contribute to improved accessible services through a surcharge they will pay into the Transportation Services Improvement Fund. This is good news for our residents who have mobility challenges and rely on taxi service for their routine transportation needs."

Councilmember Hans Riemer said: "We are dealing with an industry in crisis. Our challenge was to find a way, in the face of the State's decision to allow Uber to operate, to ensure the taxi industry remains profitable for drivers and attractive for passengers so that disadvantaged populations can continue to get the service only taxis provide. I am hopeful that we have risen to meet this challenge. I put forward provisions in this bill that will greatly improve service for consumers by applying Uber-like features to the taxi industry through universal digital dispatch apps, drastically improve working conditions for all drivers and provide a framework for a new, driver-owned cooperative to emerge, dedicated to providing service that is universally accessible to all residents of our County. I was glad to support other provisions that reduce outdated regulatory burdens for the industry as a whole. My congratulations to Committee Chair Roger Berliner, who put his heart into this bill, and everyone involved. It is a new day for taxis in Montgomery County."

Councilmember Marc Elrich said: "This bill implements some important, long-overdue improvements to taxi regulations, but even more importantly, it allows the possibility of a worker-owned taxi co-op. Last year, when I met with some of the drivers and representative for the AFL-CIO, I urged them to explore the possibility of their own company rather than relying solely on our limited ability to legislate protection for them, so I'm excited both that the drivers have formed a taxi cooperative and that a good part of this legislation supports their action. For too long, the drivers have been taken advantage of by the taxi company owners, who have imposed exorbitantly high daily charges on drivers who had no ability to negotiate with taxi companies on a level playing field. A co-op will be good for drivers and for customers, especially the disabled. I appreciate my colleagues' hard work on this bill, and I congratulate the taxi drivers and the AFL-CIO, which has been tireless in bringing attention to these problems and seeking just solutions."

Bill 53-14 will require the issuance of 100 new licenses by Jan. 1, 2016. Of these, 25 will be to individuals who do not currently hold a license and 25 will go to small fleets operating in the County. Each of these allocations of 25 new licenses will include eight licenses for accessible taxicabs. The remaining 50 licenses will be for accessible vehicles, and will be issued to a driver-owned cooperative fleet, if the cooperative meets the fleet requirements of the law. If the 50 accessible licenses are not issued to the cooperative by June 1, 2016, either because it does not meet the fleet requirements of the law, or because it otherwise declines to apply for them, the licenses must also be issued to individuals who do not currently hold licenses. Under the bill, all licenses issued on or after Jan. 1, 2016 will be non-transferrable.

Please note: The Department of Transportation has notified all taxi companies that they can no longer require 24-hour advance reservations for trips necessitating an accessible vehicle.

MONTGOMERY COUNTY, MD EMPLOYMENT DATA ON HIRING OF VETERANS, DISABLED VETERANS AND PEOPLE WITH DISABILITIES

The Commission on People with Disabilities was instrumental in the implementation of employment initiatives through input, testimony and outreach. These include several internship programs for persons with disabilities: Customized Employment Public Intern Project, Quest, and Project SEARCH Montgomery.

The Commission on People with Disabilities and Commission on Veterans Affairs worked with the County's Office of Human Resources to establish employment initiatives which include hiring preferences for veteran, veteran with a disability, and person with a disability and a non-competitive hiring process for persons with disabilities, which was passed into law by Montgomery County voters in 2012.

Angela Washington, EEO Officer, has reported that since the hiring preferences and non-competitive hiring process were implemented approximately (August 30, 2015):

211 new employees have been hired:

16 non-competitive hires,

21 people with disabilities

8 veterans with disabilities

159 veterans, and

7 not identified

A Better Bottom Line - Montgomery County Government video regarding the employment of people with disabilities and veterans. (YouTube):

https://www.youtube.com/watch?v=z-2A_PbxrQA (6 minutes 27 second version)

<https://www.youtube.com/watch?v=NWOYNkEWE5s> (11 minute 42 second version)

PROJECT SEARCH MONTGOMERY GRADUATES THIRD CLASS OF INTERNS



Project SEARCH Graduates with County Executive Isiah Leggett:
Front row: Steven Seo, Langston Caldwell, Matt Digilio, Leggett, Justin Hunsinger, Spencer Jacobs, Brandon Vreeland. Back row: Brett Albaugh, Stefan Hall, Christian Erickson, Steven Eure

Project SEARCH Montgomery interns participated in a graduation ceremony on June 19 at the Music Center at Strathmore after completing a 10-month education and training program. The program is designed for individuals with intellectual and developmental disabilities who are either in their last year of high school or are recent graduates.

The interns participated in three, 10-week site rotations to learn work skills and develop workplace behaviors that will help lead to paid employment. Supported by an onsite team of job coaches and a classroom instructor, interns worked in various County departments and agencies, as well as with the cities of Gaithersburg and Rockville, Montgomery College and Montgomery Parks.

County Executive Isiah Leggett and Councilmember Sidney Katz gave remarks at the graduation ceremony and, along with Councilmember Craig Rice and former Councilmember Phil Andrews, presented the interns with certificates. Other speakers included Office of Human Resources Director Shawn Stokes and Office of Management and Budget Director Jennifer Hughes.

The graduation event provided an opportunity to publicly recognize the interns' accomplishments and provide an opportunity for family and friends to recognize the achievements that these graduates have attained.

Project Search Montgomery is a key component of Leggett's commitment to increasing opportunities for persons with significant disabilities to work in Montgomery County government. The County collaborated with the Rockville-based Ivy Mount School and SEEC, an adult rehabilitation provider.

The cornerstone of the Project Search model, which was founded in 1996 and operates at more than 150 sites nationally, is total immersion in a business setting. Participants were onsite at Montgomery County departments for a minimum of six hours a day for the past 10 months and, during that time, rotated through three different work experiences to build their skills in various job settings.

Individuals participating in the program received State funding for their job coaches and other supports. The County provided a grant for start-up costs associated with the program and provided classroom space for the interns in Rockville.

The 2015 Project SEARCH Montgomery class is the third class of graduates sponsored by Montgomery County. Fifteen interns have been hired by Montgomery County since the first class in 2013.

For more information, call Karen Hochberg at 240-777-5091.

MARYLAND'S WAITING LIST FOR DDA SERVICES

Maryland Developmental Disabilities Coalition Report - February 2015

Issue:

Over 8,000 children and adults with developmental disabilities and their families are on the Developmental Disabilities Administration (DDA) Community Services Waiting List for family support, employment programs, and community day and residential supports.

The Governor's Proposed FY 2016 DDA Budget does not include funds for people on the Waiting List and is reduced from the FY 2015 budget level to zero out any funds for those in the Crisis Resolution Category of need. Crisis resolution is defined as 'Homeless, or at risk of losing their home; at risk of harming themselves or others; Have caregiver(s) who are elderly or cannot care for them because of illness.'

In addition, there are unexpected crisis/emergencies that occur throughout the year. These are people who are not on the Waiting List as when a 90 year-old parent dies, leaving their 50 year-old son alone; or a person on the Waiting List becomes an emergency due to the death or life-threatening illness of their family caregiver. The FY 16 budget provides for approximately 60 emergencies. There are over 8,000 children and adults with developmental disabilities on the DDA Waiting List; 25 of the most elderly caregivers will receive supports from the Waiting List Equity Fund.

Recommendations:

- Provide funding in FY 2016 budget for 125 individuals in the Crisis Resolution Category - \$3 Million General Funds
- A multi-year Developmental Disabilities Waiting List Initiative is needed.

Analysis

Maryland is the wealthiest state in the nation, yet it ranks 41st in fiscal effort for individuals with intellectual and developmental disabilities (total spending) in the nation. (* State of the States in Developmental Disabilities, Braddock et al, 2012 data)

People from every county are on the waiting list

125 children and adults and their families are in the Crisis Resolution Category, meaning they are:

- Homeless, or at risk of losing their home
- At risk of harming themselves or others
- Have caregivers who are elderly or cannot care for them because of illness

1,305 people are in the Crisis Prevention Category:

- In urgent need for services, as determined by DDA
- Will be at substantial risk for meeting one or more of the criteria for Crisis Resolution within 1 year
- Have a caregiver who is 65 years old or more

6,924 people are in the Current Request Category which means they are currently in need of services such as daily living supports, housing, and/or employment.

In addition to the Waiting List, 2,814 people are on the Future Needs Registry and will need services in three or more years. (Waiting List Data Source: State Stat, May 2014)

Age Ranges

The ages of people waiting are even more astonishing:

Crisis Prevention: 3 to 85 years old

Current request 1 to 87 years old

Future Need: 0 to 86 years old

Known Primary Caregiver Age Ranges

Crisis Resolution: 19 to 88 years old

Crisis Prevention: up to 100 years old

Current Request: up to 103 years old

(Data Source: Developmental Disabilities Administration, October 2014)

MARYLAND'S WAITING LIST FOR DDA SERVICES CONTINUED

DDA WAITING LIST HISTORY

What laws have affected the waiting list?

- HB1083, introduced in 1993, requires DDA to make available services in the community rather than solely in institutions; make community choice available to individuals living in institutions; to use the savings achieved through community based services and increased federal matching funds to strengthen community service capacity, serve transitioning youth, and fund people on the waiting list. DDA served nearly 13,000 individuals during 1992.
- HB1060, introduced in 1994, created the Waiting List Equity Fund. The Fund consists of savings from transferring from institutional care to community based care for each individual who leaves a residential institution, and interest earned on the Fund. Proceeds from the sale of Great Oaks Residential Center were placed in the Waiting List Equity Fund.
- In 1998, Governor Parris Glendenning announced his Waiting List Initiative, which included nearly \$14.5 million. The five year plan would place almost 6,000 children and adults into a variety of services.
- January 2008, Governor O'Malley signed an executive order requiring the community placement or appropriate setting for all residents of Rosewood Institution. Rosewood was permanently closed in July 2009.
- In 2010, The Income Tax Check-off for the Waiting List Equity Fund passed, allowing Marylanders to donate to the WLEF through a check-off on their state income tax returns.
- In 2011, the Alcohol Sales Tax Increase went into effect, making \$12 million available to DDA to serve individuals on the waiting list.

DEVELOPMENTAL DISABILITIES SERVICES: HOW MARYLAND RATES

Maryland ranks 2nd in terms of outcomes for people with Intellectual Disability/Developmental Disability. Nationally, waiting lists for residential and community services are high and show the unmet need. Almost 317,000 people nationally are on a waiting list for Home and Community Based Services (HCBS). This requires a daunting 46 percent increase in state's HCBS programs. However, 22 states report not waiting list or a small waiting list (requiring less than 10 percent program growth.)

Source: United Cerebral Palsy (UCP) Report "The Case for Inclusion 2015"



MONTGOMERY COUNTY'S WAITING LIST FOR DDA SERVICES

Data from Janice Stallworth, Regional Director, DDA
As of January 20, 2015 – fluctuates day by day
State of Maryland: 8,169 on the waiting list for DD Services

Montgomery County:

- 1,076 on waiting list – these persons currently receive no services
- 830 DD Eligible
- 26 in crisis resolution (need services within 3 months)
- 97 in crisis prevention (need services within a year)
- 707 current need (need services within 3 years)

Services can be denied due to not being Medicaid eligible. This includes reasons such as to citizenship issues. Person receiving services must have green card and residency for 5 years, income and assets. Immigrants who do not have - or whose parents have not had - a green card for less than five years - are not eligible for SSI, and they may not be eligible for adult Medicaid. If they are not eligible for Medicaid, they can't get on the Medicaid waiver, and DDA won't provide services anymore if someone new is not on the waiver. Right now, some receive state only funded services as they don't qualify for Medicaid. If a person does not qualify for Medicaid waiver, then no Transitioning Youth Services. If you cannot get into waiver, you cannot get DDA waiver services.

AUTISM WAIVER REGISTRY AND CURRENT ENROLLMENT INFORMATION

September, 2015 - Per David Cross, Coordinator, The Medicaid Home & Community-Based Autism Waiver Program, Montgomery County Public Schools

Autism Waiver Registry

Statewide number of students on the Registry: About 4,000

Registry for Montgomery County as of 10/6/15: 910 (700 are estimated to be eligible)

Note: Not all students on the Registry will qualify for the Autism Waiver Program and not all students on the Registry are enrolled in Montgomery County Public Schools (MCPS). As a sample, out of the next 100 students 39 students were either no longer enrolled in MCPS or did not have an IEP (Individualized Education Program).

The students that came into the program this summer registered during the summer of 2008 so there was a 7 year wait.

The Montgomery County Autism Waiver Program currently has 254 participants and statewide there are 1,000 students in the program.

WHO HAS A DISABILITY IN MONTGOMERY COUNTY, MD? AN OVERVIEW

2014 Disability Characteristics - Montgomery County, Maryland

Total Population With A Disability	80,427
Subject	Total
Population under 5 years	67,122
With a disability	407
With a hearing difficulty	221
With a vision difficulty	303
Population 5 to 17 years	175,099
With a disability	6,991
With a hearing difficulty	708
With a vision difficulty	749
With a cognitive difficulty	5,845
With an ambulatory difficulty	717
With a self-care difficulty	1,519
Population 18 to 64 years	642,233
With a disability	34,607
With a hearing difficulty	7,654
With a vision difficulty	6,655
With a cognitive difficulty	13,676
With an ambulatory difficulty	13,308
With a self-care difficulty	4,705
With an independent living difficulty	10,427
Population 65 years and over	137,688
With a disability	38,422
With a hearing difficulty	14,247
With a vision difficulty	6,474
With a cognitive difficulty	11,169
With an ambulatory difficulty	23,697
With a self-care difficulty	8,812
With an independent living difficulty	18,802

Source: U.S. Census Bureau, American Community Survey, 2014

Persons With A Disability: Labor Force Characteristics - 2014

In 2014, 17.1 percent of persons with a disability were employed, the U.S. Bureau of Labor Statistics reported today. In contrast, the employment-population ratio for those without a disability was 64.6 percent. The ratio for persons with a disability declined by 0.5 percentage point from 2013 to 2014, while the ratio for those with no disability increased by 0.6 percentage point. The unemployment rate of persons with a disability edged down to 12.5 percent from 2013 to 2014, while the rate for those without a disability declined to 5.9 percent.

Highlights from the 2014 data:

- Persons with a disability were about three times as likely as those with no disability to be age 65 and over.
- For all age groups, the employment-population ratio was much lower for persons with a disability than for those with no disability.
- Unemployment rates were higher for persons with a disability than for those with no disability among all educational attainment groups.
- In 2014, 33 percent of workers with a disability were employed part time, compared with 18 percent for those with no disability.
- Employed persons with a disability were more likely to be self-employed than those with no disability.

Employment

Workers with a disability were more likely to be employed part time than those with no disability. Among those with a disability, 33 percent usually worked part time in 2014, compared with 18 percent of workers without a disability. A slightly larger proportion of workers with a disability worked part time for economic reasons than those with no disability (7 percent compared with 5 percent). These individuals were working part time because their hours had been cut back or because they were unable to find a full-time job.

Workers with a disability were more likely than those with no disability to work in production, transportation, and material moving occupations (15 percent compared with 12 percent). Workers with a disability were less likely to work in management, professional, and related occupations than those without a disability (31 percent compared with 39 percent).

Unemployment

The unemployment rate for persons with a disability was 12.5 percent in 2014, about twice the figure of 5.9 percent for those with no disability. (Unemployed persons are those who did not have a job, were available for work, and were actively looking for a job in the 4 weeks preceding the survey.) The unemployment rate for persons with a disability edged down by 0.7 percentage point in 2014, while the rate for persons with no disability declined by 1.1 percentage points.

Source: U.S. Department of Labor, Bureau of Labor Statistics, Persons with a Disability: Labor Force Characteristics Summary - Released June 16, 2015

MONTGOMERY COUNTY PUBLIC SCHOOLS SPECIAL EDUCATION

Number of Montgomery County Public School Students with Disabilities Ages 3 - 21 Receiving Special Education Services

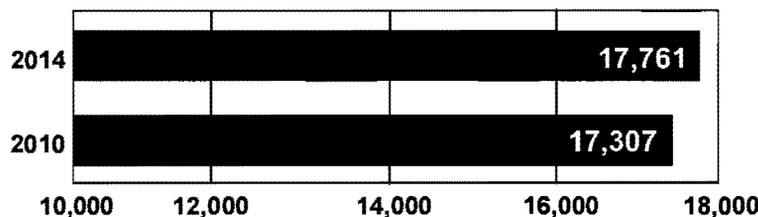
As of October, 2014, there were **17,761** students with disabilities enrolled in Special Education. This population makes up **11.5%** of the County's total school enrollment of 154,434 students.

Disability Type	# of Students 2014	# of Students 2013	% Between 2013 and 2014
Autism	2,114	2,023	+ 4.3%
Deaf	74	78	- 5.1%
Deaf-Blind	3	3	0%
Developmental Delay (Ages 3 - 9)	2,851	2,619	+ 8.8%
Developmental Delay (Extended IFSP)	131	154	- 14.9%
Emotional Disability	677	657	+ 3%
Hearing Impairment	154	157	- 1.9%
Intellectual Disability	625	620	+ 0.8%
Multiple Disabilities	307	301	+ 1.9%
Orthopedic Impairment	35	48	- 27%
Other Health Impairment	2,966	2,965	0%
Specific Learning Disability	5,314	5,369	- 1.0%
Speech and Language Impairment	2,436	2,577	- 5.4%
Traumatic Brain Injury	21	24	- 12.5%
Visual Impairment	53	62	- 14.5%
Total	17,761	17,657	

Source: Maryland State Department of Education - Special Education/Early Intervention Services Census Data 3/2015

Montgomery County School Enrollment - Special Education Ages 3 to 21

Special Education enrollment has increased by **454** students over the last five years.



of students ages 3 - 21 enrolled in Special Education in Montgomery County Public Schools

Source: Maryland State Department of Education - Special Education/Early Intervention Services Census Data 3/2015

Students with Disabilities By Race Compared with General Education Students By Race - Ages 3 to 21

¹ SWD = Students with Disabilities / GE = General Education ¹

	Grand Total	American Indian/ Alaskan Native		Asian		African American		White		Hispanic	
		Total	Percent	Total	Percent	Total	Percent	Total	Percent	Total	Percent
SWD	17,630	38	0.2%	1,277	7.2%	4,583	26.0%	5,349	30.3%	5,681	32.2%
GE	154,434	283	0.2%	21,902	14.2%	33,139	21.5%	47,976	31.1%	43,844	28.4%

Source: Maryland State Department of Education - Special Education/Early Intervention Services Census Date 3/2015

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COMMISSION'S ANNUAL MEETING WITH COUNTY EXECUTIVE

MONTGOMERY COUNTY COMMISSION ON PEOPLE WITH DISABILITIES

Seth Morgan, M.D., Chair • Marcie Povitsky, Vice-Chair

February 3, 2015

The Commission on People with Disabilities recommends that:

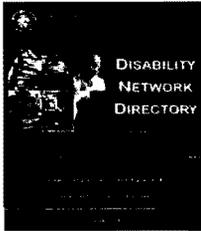
1. The County take all necessary steps to ensure the provision of quality resource coordination for people with developmental disabilities. We request that you include in the FY16 Budget continued funding for Resource Coordination for people with developmental disabilities for 1,100 clients.
2. The County to take all necessary steps to end the waiting list for residential and other services through the State Developmental Disabilities Administration (DDA). This may mean working with intergovernmental affairs to have State legislation introduced to end the DDA waiting lists. As DDA determines service eligibility, they are the limiting service in resource coordination and delivery. Most serious, residential services for persons with developmental disabilities require the parents be quite elderly (i.e., 75 years or older), the caretaker to have died, or some other serious crisis situation.
3. The Commission recommends that the County recognize people with disabilities (i.e., people with physical, developmental, cognitive, psychiatric and sensory disabilities) as a targeted group for Health Disparities Outreach. A member of the Commission did attend the Commission on Health meetings and is working to see that all County health clinics are accessible and make necessary reasonable accommodations.
4. The Commission requests the County amend the current Commission's enabling legislation to give authority to advocate/lobby directly with the State/Federal Government, with approval of the Montgomery County Office of Intergovernmental Relations. This would place the Commission on People with Disabilities on par with Commission on Veteran Affairs and Commission on Aging.

Thank you for your continued support of people with disabilities and for your leadership on these important issues.



PUBLICATIONS PROVIDED BY THE COMMISSION

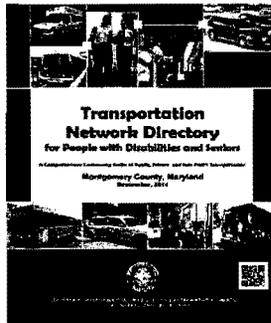
Publications Provided by the Commission on People with Disabilities



DISABILITY NETWORK DIRECTORY:

A directory of provider agencies, businesses and advocacy organizations that offer local, state and national resources for people with disabilities. The Disability Network Directory is available online at www.montgomerycountymd.gov/dnd.

TRANSPORTATION NETWORK DIRECTORY FOR PEOPLE WITH DISABILITIES AND SENIORS: A comprehensive listing of public, private and non-profit transportation in the Washington Metropolitan Region, State of Maryland and beyond. This guide was compiled to assist County residents to better coordinate their transportation needs. To download a copy of the guide visit www.montgomerycountymd.gov/tnd.



To request alternative formats of these publications, please call 240-777-1246 (V), MD Relay 711, or e-mail DHHSWebsite@montgomerycountymd.gov.

STAY ALERT!

You are encouraged to sign up for emergency alerts from **Alert Montgomery**. Montgomery County officials can use this alerting system to contact you before or during a major crisis, emergency, or severe weather alert. Alerts MAY be broadcast via the following delivery methods:

- E-mail account (work, home, other)
- Cell phone (SMS Text)
- Everbridge Mobile Member App
- Home phone (Voice)
- Cell phone (Voice)
- TTY device
- Twitter: Following "@ReadyMontgomery"
- Facebook: Add "Montgomery County MD Office of Emergency Management and Homeland Security" in friends

While signing up for Alert Montgomery is free of charge, your wireless carrier may charge you a fee to receive text messages.

<https://alert.montgomerycountymd.gov>



Montgomery County encourages all residents to put together a plan for emergencies. The County has emergency response plans in place for dealing with emergencies from snow storms to terrorist attacks.

However, each person is strongly encouraged to develop their own personal plan. Montgomery County has developed the Plan 9 Guide for residents. It is a simple guide to nine essential items to help residents shelter in-place during emergencies.

We also encourage people to request a File of Life that allows you to fill out your medical history and rescue personnel are trained to look for this File on your refrigerator. To request a File of Life, call the Health and Human Services Aging and Disability Resource Unit: 240-777-3000 (V), 240-777-2545 (TTY), or visit www.montgomerycountymd.gov/OEMHS.

Plan 9

Collect these **nine essential items** to help you shelter-in-place in the event of an emergency.



1. Water: One gallon per person per day for three days. Replace the water every 6 months.



6. Can Opener: Manual can opener in case there's no electric power. Buying foods with pull-open cans is also helpful.



2. Food: Non-perishables such as canned or packaged food. Enough to last 3 to 5 days per person.



7. Radio: Battery-powered radio and extra batteries. Crank operated or solar powered radios are also helpful.



3. Clothes: One change of clothes and footwear per person. Consider packing blankets, rain-gear, and outerwear in case of severe weather.



8. Hygiene Items: Basics like soap, toilet paper and a toothbrush. Moist toiles are useful.



4. Medications: Three days worth of prescription medications. Be sure to mark the expiration dates and change as needed.



9. First Aid: Basics like antiseptic, gloves, bandages, and non-prescription medicines. Many stores have pre-made kits.



5. Flashlight: A bright flashlight and extra batteries. Do not use candles as they are fire hazards.

COMMISSION PRESENTATIONS FOR 2014 - 2015

- Oct, 2014:** **Montgomery County's Employment Initiatives for People with Disabilities and Veterans** - Joe Adler, Director, Office of Human Resources, Montgomery County Government
- Facility Design for Caroline Freeland Park, Bethesda - Seeking Input and Advice from Commission** - Lucas Bonney, Project Manager, and Bob Green, ADA Compliance Manager, Montgomery County Parks
-
- Nov, 2014:** **The Purple Line and Accessibility Features** - Joy Hamilton, Leslie Salgado and Fred Hiser, Purple Line Management Team, Maryland Transit Partners of the Maryland Transit Administration
- Montgomery County Sidewalk Snow Removal Legislation Bill 21-14** - The Honorable Hans Riemer, Councilmember, Montgomery County Council
-
- Dec, 2014:** **Annual Planning Meeting**
-
- Jan, 2015:** **Montgomery County's Taxi Cab Regulations** - The Honorable Roger Berliner, Councilmember, Montgomery County Council
-
- Feb, 2015:** **Department Representatives Briefing on their Role and What Advice is Sought from Commission** - Charlie Butler, Recreation; Simone Geness, Montgomery County Public Schools; Francie Gilman, Libraries; Nancy Greene, ADA Title II Compliance, Angela Washington, Office of Human Resources; Faisal Khan, Transportation; Jay Kenney, Health and Human Services; Christopher Moy, Montgomery College; Susan Smith, Housing Opportunities Commission
-
- March, 2015:** **Follow-Up on Department Representatives Briefing on their Role and What Advice is Sought from Commission - Brainstorm the Priorities of Ex-Officio Members and Organize Workgroup or Work of Commission for Upcoming Year** - Charlie Butler, Recreation; Simone Geness, Montgomery County Public Schools; Francie Gilman, Libraries; Nancy Greene, ADA Title II Compliance, Angela Washington, Office of Human Resources; Faisal Khan, Transportation; Jay Kenney, Health and Human Services; Christopher Moy, Montgomery College; Susan Smith, Housing Opportunities Commission
-
- April, 2015:** **Montgomery County Parks ADA Update** - Bob Green, ADA Compliance Project Manager, and Wen Huang, Project Manager, Park Development Division, Montgomery County Department of Parks
-
- May, 2015:** **Housing Update** - Stacy Spann, Executive Director, Housing Opportunities Commission
-
- June, 2014:** **Community Conversation on Health and Well Being** - Healthy Montgomery
-
- Sept, 2015:** **Effective Advocacy Strategies at the State Level** - Melanie Wenger, Director, Montgomery County Office of Intergovernmental Relations

ABOUT THE COMMISSION

HISTORY

The Commission on People with Disabilities was established by County legislation in 1978 to advise the County Executive and County Council on the coordination and development of the County's policies affecting residents with disabilities.

MISSION

The Commission provides advice, counsel, and recommendations to the Government of Montgomery County, Maryland in general, the County Executive, and the County Council in particular. Its responsibilities involve those matters influencing the provision of services, County policies and procedures, development and implementation of state and federal laws, and any other issues affecting the lives, rights, and welfare of the people it represents. The Commission operates in belief that people with disabilities have the right to the same opportunities in life as people without disabilities; and that this right can best be ensured by a commitment to enhancing the image, status, and quality of life of all children and adults with disabilities.

MEMBERSHIP

The Commission on People with Disabilities is composed of 25 voting members who serve in a volunteer capacity. Members are appointed by the County Executive and confirmed by the County Council.

The Commission includes:

- ▶ 13 people with disabilities,
- ▶ 3 parents of people with disabilities, and
- ▶ 9 representatives of public and private service providing agencies

The Commission also includes ex-officio members that are appointed to represent the Departments of Health and Human Services, Transportation, Recreation, Libraries, Office of Human Resources, and the Human Rights Commission. There are also members who represent Montgomery College, Montgomery County Public Schools, and the Housing Opportunities Commission.



Like us on Facebook! [Facebook.com/MCCPWD](https://www.facebook.com/MCCPWD)



Sign up for eSubscribe to receive emails about disability information and resources:

www.montgomerycountymd.gov/govdelivery

MEETINGS

All Commission and Committee meetings are open to the public. The Commission welcomes visitors to join us as we serve the County and its residents. Meetings are subject to change without advance notice. Please call to confirm day and time of meetings and to request any special accommodations. As possible, we adjust meeting dates in order to accommodate days of major religious observances. You can view the Commission meeting minutes online at:

www.montgomerycountymd.gov/cpwd

MEETING SCHEDULE FOR 2015 - 2016

Full Commission Meeting

2nd Wednesday of the month,
except for July and August
101 Monroe Street, Lobby Auditorium
Rockville, MD 20850
6:00 p.m. - 7:30 p.m.

Steering Committee Meeting

3rd Wednesday of the month
401 Hungerford Drive, Rockville, MD 20850
1st Floor Conference Room
5:30 p.m. - 7:00 p.m.

Workgroups

Meet, as needed, at differing locations.

COMMISSION STRUCTURE

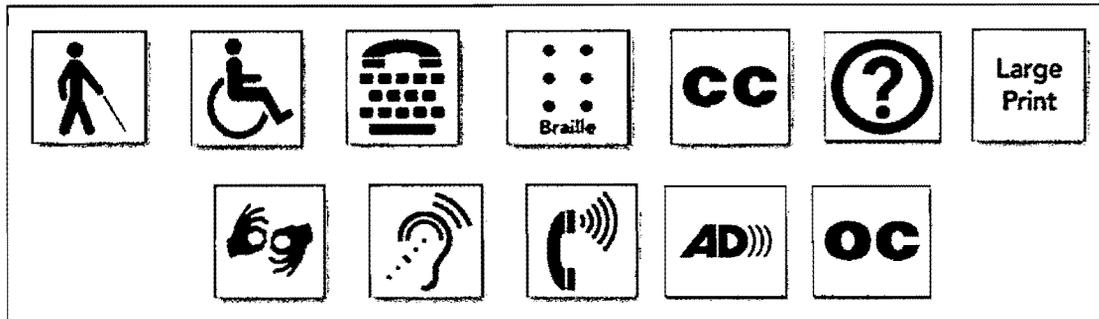
The Commission operates through a structure that is re-evaluated annually to respond to changing needs. The Steering Committee is responsible for planning and directing the activities of the Commission and for overseeing the activities of the committees.

The work of the Commission is done by Commission members and interested persons from the community. In addition, coordinators are assigned to take lead responsibility for public relations and legislation. The Nominating and Selection Committees, required for administration purposes, were also established.

Be an advocate!!! The Commission encourages that all residents with disabilities and their families communicate with their elected officials about their needs for programs and services. Go to the Office of Governmental Relations website for information on how to contact your elected officials:

<http://www.montgomerycountymd.gov/OIR/>

PURPOSE OF THE COMMISSION



- Advise the County on compliance with the Americans with Disabilities Act, Fair Housing Act of 1988 and associated laws and regulations.
- Advise on the accessibility of County services, facilities, programs, employment opportunities and communications.
- Assist County government, businesses and non-profit organizations with educational information about reasonable accommodation and universal design.

KEY AREAS OF FOCUS:

1. Americans with Disabilities Act Compliance
2. Access to Health Care and Health Disparities
3. Developing Strategies to Eliminate the State Developmental Disabilities Administration (DDA) Waiting List
4. Parks and Recreation
5. Libraries
6. Housing
7. Employment
8. Transportation
9. Legislation

Nancy Greene is the ADA Compliance Manager for Montgomery County Government programs and services. She can take complaints and issues for programs and services operated by the County at adacompliance@montgomerycountymd.gov or 240-777-6197 (Voice) or 240-777-6196 (TTY).

Web Accessibility: www.montgomerycountymd.gov/mcg/accessibility.html

The Montgomery County Office of Human Rights takes complaints and has enforcement authority in the private sector such as lack of access in housing, movie theatres, doctor's offices, hospitals, etc. They can also take complaints regarding public sector programs and services at 240-777-8450 (Voice) and 240-777-8480 (TTY). Website: www.montgomerycountymd.gov/humanrights

The Commission has no authority over the private sector. It can only advise the County Executive and County Council to take action. The contents are highlights of the key activities that have been worked on by the Commission in partnership with other departments, organizations and elected officials.

COMMISSION MEMBERSHIP LIST

2014 - 2015 VOTING MEMBERS

PEOPLE WITH DISABILITIES

Cindy Buddington	Tim Markwood
Paul Eisenhour	Seth Morgan
Alex Getachew	Jonathan Pfeffer
Hilary Kaplan	Marcie Povitsky
Arthur Livingston	Carl Prather
Kathy Mann Koepke	Katherine Radzikowski

PARENT REPRESENTATIVES

Susan Hartung
Nelson Migdal
Francesca Pellegrino

PRIVATE AGENCY REPRESENTATIVES

Larry Bram, *Easter Seals*
Tony Cancelosi, *Columbia Lighthouse for the Blind*
Richard Kienzle, *College Living Experience*
Mark Maxin, *Special Olympics*
Marie (Lu) Merrick, *Post High School at Ivymount School*
Karen Morgret, *Treatment and Learning Centers*
Anne Peyer, *Cornerstone Montgomery*
Stephen Riley, *Potomac Community Resources*
Marcia Rohrer, *Maryland State Dept. of Education, Division of Rehabilitation Services*

NON-VOTING MEMBERS

PUBLIC AGENCY REPRESENTATIVES

Charlie Butler, *Department of Recreation*
Simone Geness, *Montgomery County Public Schools*
Francie Gilman, *Disability Resource Center, Department of Public Libraries*
Nancy Greene, *ADA Compliance Officer, Department of General Services*
Faisal Khan, *Department of Transportation*
Christopher Moy, *ADA Compliance, Montgomery College*
Susan Smith, *Housing Opportunities Commission*
Angela J. Washington, Esq., *Equal Employment & Diversity, Office of Human Resources*

STAFF

Betsy Tolbert Luecking, *Community Outreach Manager*
Carly Clem, *Administrative Specialist I*
John (Jay) Kenney, Ph.D., *Chief, Aging and Disability Services*

HOW TO CONTACT YOUR COUNTY ELECTED OFFICIALS



**County Executive
Isiah Leggett**

The **County Executive** can be reached at:

Executive Office Building
101 Monroe Street, 2nd Floor
Rockville, MD 20850
240-777-0311 (V)
240-773-3556 (TTY)
ocemail@montgomerycountymd.gov



Montgomery County Council

The **County Council** can be reached at:

Stella B. Werner Council Office Building
100 Maryland Avenue
Rockville, MD 20850
240-777-7900 (V)
240-777-7914 (TTY)
240-777-7888 (FAX)
county.council@montgomerycountymd.gov

Seated, left to right: Hans Riemer, Nancy Floreen, George Leventhal and Tom Hucker. Standing: Roger Berliner, Sidney Katz, Nancy Navarro, Craig Rice and Marc Elrich.

Isiah Leggett, County Executive

Uma S. Ahluwalia, Director

John J. Kenney, Ph.D., Chief

**Montgomery County Department of Health and Human Services
Aging and Disability Services, Commission on People with Disabilities
401 Hungerford Drive, 4th Floor**

**Rockville, Maryland 20850
240-777-1246 (V) ♦ via MD Relay at 711**

**Language translation and alternative formats of this report are available upon request.
For additional information on the Commission, please call the telephone numbers or write to the
address listed above or e-mail via the contact information listed below.**

*Montgomery County does not discriminate on the basis of disability in
employment or in the admission or access to its programs or services.*

2014 - 2015 ANNUAL REPORT PREPARED BY:

Betsy Tolbert Luecking, *Community Outreach Manager*

Carly Clem, *Administrative Specialist I*





LMC 2

**MONTGOMERY COUNTY COMMISSION ON PEOPLE WITH DISABILITIES
FY 17 OPERATING BUDGET PRIORITIES**

Seth Morgan, M.D., Chair
Marcie Povitsky, Vice-Chair
April 6, 2016

Good afternoon, my name is Seth Morgan and I am Chairman of the Commission on People with Disabilities.

1. The Commission thanks you for continuing to provide Coordination of Community Services or resource coordination for 500 persons with developmental disabilities. There are a number of residents who have requested to have Montgomery County be their coordinator for community services above the 500 cap initially requested. The County has asked for a year to stabilize and effectively serve the initial 500, but it seems clear our residents want to be served by an agency located in MC that knows the residents and services available. Do you anticipate expanding the number of persons who are served?
2. We request that the Council increase Supports for Caregivers by adding \$100,000 to serve children and adults with severe disabilities in Respite Care. Hopefully, these funds could be used to provide respite for those who are on the Developmental Disabilities Administration Waiting List or in Transitioning Youth and not receiving any services. This funding will purchase 6,897 hours of respite care services and serve 42 clients @ 164 care hours per year.
3. We support that the County added \$1M to provide funding to providers of services to people with developmental disabilities for the 3rd year of the 4 year plan for expansion of new individuals entering into the system. We request that you include additional funding for Inter-ACC/DD's request that the County support an increase in the supplement in support of direct care staff wages to be 25% above the minimum wage. The minimum wage will be \$10.75 beginning July 1. Inter-ACC/DD requested \$5,462,915 with \$4.5 M of this amount tied to a goal of direct staff wages above minimum wage. We are concerned there were no provisions in this budget to help direct service staff pay rates above minimum wage. Given the cost of living in MC, the difficulty of staff positions, and the extent of training required for staff to perform their functions safely, this is a major concern. In addition, we would like to work with the County to have the State provide more funding to match the Medicaid dollars to support the thousand people from our County who are on the DDA waiting list.

Thank you for the opportunity to share with you our recommendations and your continued leadership and support of people with disabilities on these important issues.

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RECEIVED
MONTGOMERY COUNTY
COUNCIL

COMMISSION ON PEOPLE WITH DISABILITIES

April 19, 2016

The Honorable Nancy Floreen, President
Montgomery County Council

Via: Electronic Facsimile

Dear Ms. Floreen:

On behalf of the Developmental Disability Advisory Committee of the Commission on People with Disabilities, comprised of parents, service providers, county staff, and other stakeholders, interested in improving services in Montgomery County for people with developmental disabilities, we are writing to ask you to support a budget that would provide direct support staff an hourly wage that would be at least 25% above the minimum wage.

As you are probably aware, the State sets the rate for support services for people with developmental disabilities, and, as of July 1, 2016, the rate will include \$10.94 per hour for direct support staff wages. What that means in the County is that service providers will receive funding from the state to pay direct support staff only slightly more than the County's new minimum wage.

Last year, we attended the Council hearings when this issue was discussed and we clearly recall Council members stating they were not even going to "touch the line item" which provided funding to offset the increased minimum wage. It was gratifying to realize how cognizant our Council members are of the importance of this issue. The gap is larger for FY'17, and we need your support to increase the DD supplemental funding.

Individuals with developmental disabilities work incredibly hard to learn skills and behaviors that allow them to not only be included in their community, but also to work in jobs that allow them to contribute too. In order to continue to be successful, they need reliable, trained staff that is committed to working with them.

The job the direct support professionals do every day requires great physical and emotional strength. Direct support staff work evenings, nights, weekends and holidays. Staff support individuals with personal hygiene such as bathing and dressing, assist with vocational training and job coaching, medication administration and obtaining medical care as needed, assist with recreation, social and fitness activities, meal planning, shopping, and cooking, financial management, transportation; and support individuals in all aspects of daily living and work. We depend on this work force to care for our most vulnerable citizens, and it is not a minimum wage job.

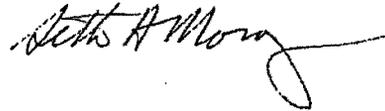
Department of Health and Human Services

401 Hungerford Drive • Rockville, Maryland 20850 • 240-777-1246 • 240-777-1288 FAX
www.montgomerycountymd.gov/hhs

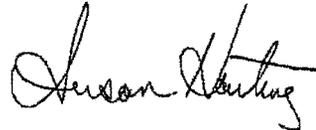
The Honorable Nancy Floreen, President
April 19, 2016
Page 2

We thank you for your on-going support of people who have a developmental disability and the direct staff who support them every day. Our committee unanimously recommends additional funding be included in the FY'17 budget to increase the DD supplement so that direct support staff can earn an hourly wage that would be at least 25% above the minimum wage.

Sincerely,



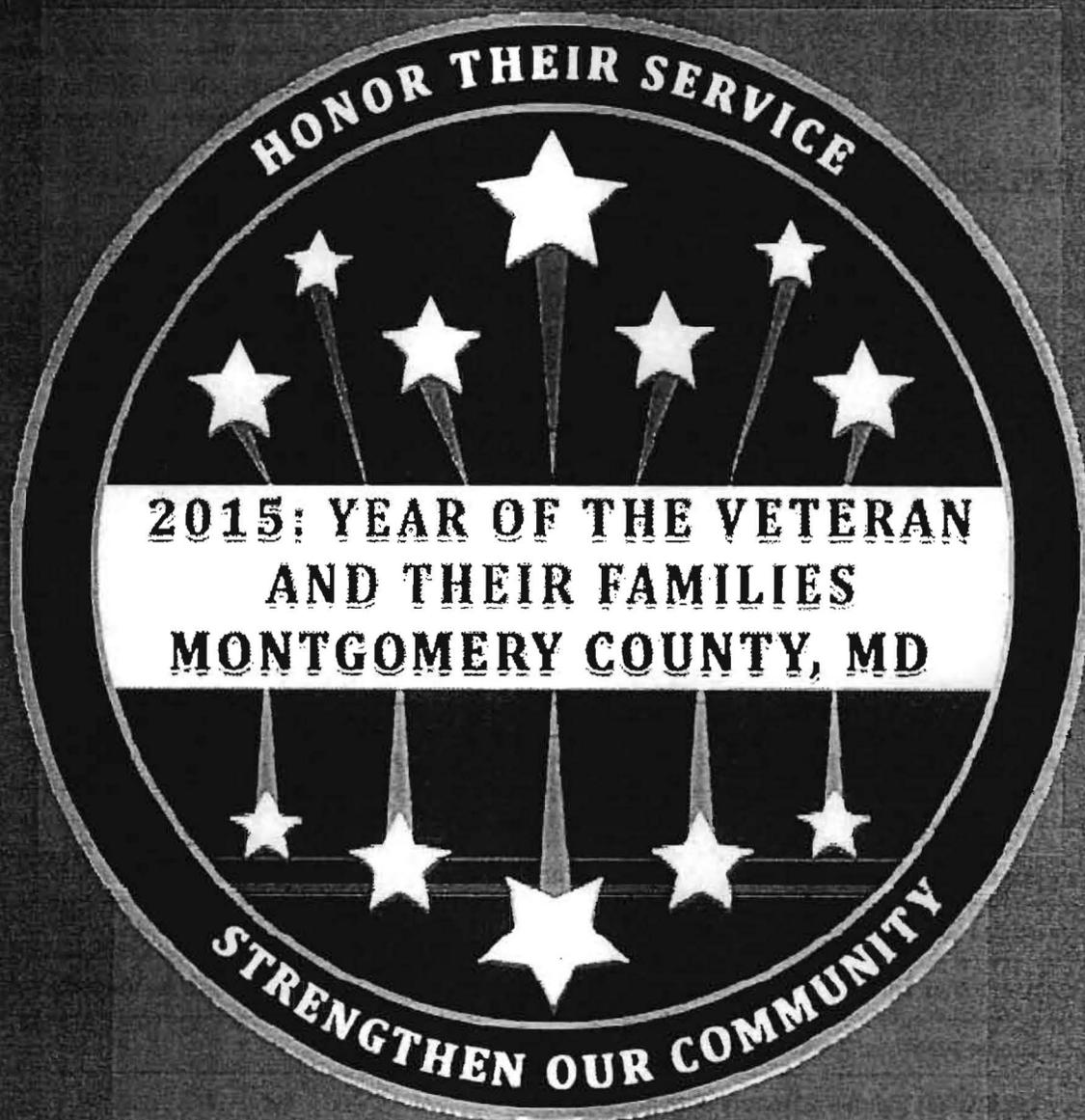
Dr. Seth A. Morgan, Chair



Susan Hartung, Chair
Developmental Disability Advisory Committee

c: Uma Ahluwalia, Director, DHHS
John Kenney, Chief, Aging and Disability Services, DHHS

MONTGOMERY COUNTY, MARYLAND
COMMISSION ON VETERANS AFFAIRS ANNUAL REPORT 2015
"Advocating for Veterans & Their Families"



Daniel J. Bullis, Chairman
Sergeant Major, U.S. Army (Ret.)

Randy Stone, Vice-Chairman
Major, United States Marine Corps

Isiah Leggett, County Executive
Captain, U.S Army, Vietnam Veteran



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MEMBERSHIP LIST 2014 - 2015

VETERANS REPRESENTATIVES

Jim Campbell, Military Officers Association of America
 Daniel Bullis, Disabled American Veterans
 Octavia Dixon, Veterans of Foreign Wars
 Ron Drach, Disabled American Veterans
 Bill Gray, Vietnam Veterans of America
 Elizabeth (Jane) McCarthy, American Legion
 Wayne Miller, Disabled American Veterans
 Randy Stone, American Legion

GENERAL PUBLIC MEMBERS

Dan Bolling
 Sharon Hodge
 Marie Wood

EX-OFFICIO MEMBERS

Jerry S. Godwin, Dept. of Economic Development
 Michael L. Subin, Office of the County Executive
 Joanna L. Starling, Montgomery College

NON-VOTING CONGRESSIONAL REPRESENTATIVES

Austin Morris, Office of Congressman Chris Van Hollen

STAFF

Betsy Luecking, *Community Outreach Manager*
 Carly Clem, *Administrative Specialist I*

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LETTER OF TRANSMITTAL



Commission on Veterans Affairs
November 6, 2015

Via Letter of Transmittal Electronically to:

The Honorable Isiah Leggett, Montgomery County Executive
The Honorable George Leventhal, President, Montgomery County Council
Uma S. Ahluwalia, Director, Montgomery County Department of Health and Human Services

The Commission on Veterans Affairs is pleased to present a summary of its activities for the past year. We continue to advise and consult with you on issues of concern to the estimated 44,000 veterans, and their families, who live in the County. Under your leadership and with your support, the Commission is mandated to research, assemble, analyze and disseminate information that will assist in meeting the needs of Veterans and their families.

We were pleased to be part of the dedication of Memorial Plaza on November 10, 2014 where 2015 was been designated as the Year of Montgomery County's Veterans and Their Families. We are working to increase outreach to the general Veteran population regarding programs, services and recognition events. We are very grateful to Neil Greenberger, County Council and Merlyn Reineke, Montgomery Community Media for organizing and including the Commission in the Honor & Gratitude Salute to Vietnam Veterans event held on October 24, 2015. We are supporting Veterans through our Veterans Education Partnership which includes Montgomery College Combat to College, Universities at Shady Grove and the University of Maryland Terp Vets.

We continue to encourage cooperation, coordination and collaboration among all agencies and non-profits that serve veterans so that everyone works together to provide the best services possible to veterans and their families. We have established a close relationship with Serving Together which is a resource and referral source for Veterans and their families. The Office of Human Resources hiring initiatives for disabled veterans and veterans has led to as of August, 30, 2015 the hiring of 167 veterans including eight disabled veterans. We are pleased with the County's efforts to end homelessness amongst veterans and to assist in obtaining permanent housings with the Zero 16 campaign. We are working to increase VA presence in the County and were happy to learn in August, 2015 of the VA's intent to establish Community Based Outpatient Clinic in the County in 2016.

We wish to recognize and give our personal thanks to all Commissioners, the many community members, and the agency staff who participate in our meetings for their commitment and dedication. We would like to acknowledge DHHS Director Uma Ahluwalia for her role in meeting with the Boards, Commissions and Committees to keep us informed of important health and human services issues, Dr. Jay Kenney, Chief, Aging and Disability Service, Betsy Luecking, Community Outreach Manager, and Carly Clem, Administrative Specialist, for their outstanding support in providing the Commission with the resources needed to carry out our mission. This report is the result of our combined efforts.

It has been a pleasure to work with you and members of the Commission during our term of service. We are confident that you will continue to support the Commission's efforts to enhance the lives of our Veterans. Our meetings are open to the public, and we invite you to join us for any meeting.

Sincerely,

Dan Bullis, Chair



Randy Stone, Vice-Chair

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2015 YEAR IN REVIEW

Commission on Veterans Affairs Dan Bullis, Chair • Randy Stone, Vice-Chair

Montgomery County's Commission on Veterans Affairs supports various county initiatives and organizations that support veterans and their families during their transition to the civilian workforce. Their work has resulted in:

- The Commission was pleased to join with the County Executive and County Council on November 10, 2014 in declaring "2015: The Year of Montgomery County's Veterans and their Families." This declaration acknowledges the service and sacrifice of our veterans and their families while shedding light on their needs such as employment assistance.
- The County Council passing legislation in 2009 for the County's hiring preference for people with disabilities and veterans including disabled veterans. As of October, 2015, the County has hired 167 veterans including 8 disabled veterans.
- The County's Office of Human Resources signed on as a partner with the Maryland Department of Veterans Affairs when they launched Operation Hire July 1, 2015.
- The County Executive was notified on August 18, 2015 by the Department of Veterans Affairs of their intention to lease space for a Community Based Outpatient Clinic in Montgomery County.
- The Maryland Department of Veterans Affairs had dedicated a Veterans Benefits Specialist to the County. The position has remained unfilled since August 18, 2015.
- The Veterans Education Partnership was established by the work of the Commission and working to increase outreach to the general veteran population regarding programs and services including supporting veterans at Montgomery College Combat to College Program, Universities at Shady Grove Veterans Services and the University of Maryland Terp Vets.
- The Commission continues our fight against veteran homelessness through our support of Veterans Affairs Supportive Housing (VASH) vouchers and the Zero 16 Campaign to End Veteran homelessness. As part of Montgomery County's Fiscal Year 2016 budget, an appropriation by the County Council in the amount of \$500,000 was approved to provide housing and supportive services to functionally end veteran homelessness in the County. The funding is reoccurring every year and is available to veterans who have received less than an honorable discharge and are therefore not eligible for VA programs. The County has received 86 VASH vouchers over the last five years, each worth \$13,122 or \$1.1 M per year in housing subsidies
- The Commission supports the good work of the Silver Spring Vet Center. Operated by the U.S. Department of Veterans Affairs, Vet Centers provide free readjustment counseling to combat veterans and their families to help with the transition from military to civilian life. Counseling can help with issues such as employment assessment, PTSD, sexual trauma, substance abuse, and screening and referral for medical issues such as traumatic brain injuries and depression. The Silver Spring Vet Center is located at 2900 Linden Lane, Silver Spring, MD 20910.
- The Commission supports the work of Serving Together, which is a collection of local community-based resources for veterans, service members and their families. Its goal is to provide clear guidance on how to access the care and support they need. This includes support during transition to the civilian world and job placement.
www.servingtogetherproject.org

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2015 YEAR IN REVIEW

- The Commission continually seeks out job placement resources for veterans and their families. We support Bob Pelletier and the team at Montgomery Works-Partner of the American Job Center Networks and Tony Cancelosi of Columbia Lighthouse for the Blind for their work on veteran hiring.
- MOAA Transition Support to Veterans in Montgomery County Business and Networking Group (BANG) – The Military Officers Association of America Transition Group for Northern VA and Southern MD is concerned that military service members transitioning back into civilian life are unprepared when seeking employment. The Northern Virginia (NOVA) Chapter of the Military Officers Association of America (MOAA) Business and Networking Group (BANG) was created in 1996. BANG is a monthly program that provides business and networking assistance. Each month an employer is invited to speak about their company and offers assistance as well as accepting resumes. In addition BANG sends out a weekly e-mail broadcast that provides employment opportunities, veterans' updates, and job fair announcements. The group is open to non-military job seekers and networkers. The Montgomery County Chapter of the MOAA started BANG in Montgomery County and held its first meeting with students at Montgomery College on November 3, 2015. The Commission has endorsed and supports this project of the Montgomery County MOAA of creating BANG in the County.
- To honor our veterans the County at the suggestion of the Commission has installed and supports a digital TV display in the Rockville Memorial Library and a 55 inch digital display between the entry doors at the Silver Spring Civic Building at Veterans Plaza that has the photos and names of those County residents who have been KIA back to World War II and current announcements of Veteran related activities. This display was developed and is maintained by Commission staff.
- The Honor & Gratitude Salute to Vietnam Veterans was held on October 24, 2015 at the Universities at Shady Grove. Over 200 Vietnam Veterans and a crowd of over 800 attended this event that was planned to honor the service of Vietnam Veterans and Vietnam Era veterans. The event is viewable on YouTube at: <https://m.youtube.com/watch?v=z8qYy7nXksY>.
- The Veterans Tribute Concert was held on November 3, 2015 at the Silver Spring Civic Building at Veterans Plaza. Dan Bullis, Randy Stone and Mike Subin were all featured speakers. It was attended by about 125 veterans, family members & the general public. Mike Subin welcomed all who were there on behalf of the County Executive. Dan Bullis urged attendees to thank the veterans they met & to honor their service. Randy Stone spoke about music and how it affected him & his fellow Marines in Iraq & Afghanistan. It made them think of home. It also made them think about why they were half way around the world, fighting for the freedom of others & for the freedoms we enjoy here at home. The 19th Street Band played a mix of Americana, Country & Rock 'n Roll on their acoustic instruments. The audience thoroughly enjoyed the show. This concert was funded by the Walter Reed Society and we give thanks to that organization.

LOOKING AHEAD FY 16 PROJECTS & INITIATIVES

Commission on Veterans Affairs
Dan Bullis, Chair • Randy Stone, Vice-Chair
November 2015

- 2015 Year of the Veteran and Family Review
- Veteran Friendly Business Initiative
- Vietnam Veteran Memorial to be located in County
- Community-Based Outpatient Clinic to be located in County
- MDVA Hiring of Veterans Benefits Specialist for County
- Veteran Hiring Initiatives
- Veteran Outreach to Greater Community
- Veterans Education Partnership
- Montgomery County Veteran Survey
- Zero:16 Campaign to End Veteran Homelessness
- Montgomery County Homefront Cable TV Program
- Silver Spring Civic Building Veterans Plaza Display
- Rockville Memorial Library Veterans Display
- Silver Spring Veterans Day Concert
- HUD - Veterans Administration Supported Housing (VASH) vouchers
www.hudexchange.info/hud-vash/hud-vash-eligibility-requirements

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COMMISSION POLICY PRIORITIES FY 16

**MONTGOMERY COUNTY COMMISSION ON VETERANS AFFAIRS
MEETING WITH THE HEALTH AND HUMAN SERVICES COMMITTEE, COUNTY COUNCIL
Top Two Policy Issues for Fiscal Year 2016 (FY16)
Dan Bullis, Chair • Randy Stone, Vice-Chair
October 15, 2015**

On behalf of the Commission on Veterans Affairs, we want to thank you for your efforts on behalf of the County's estimated 46,000 veterans. Here are the Commission's top policy issues for FY16:

1. Support Efforts & Funding to End Veteran Homelessness in Zero:16

With the Zero 16 Campaign, we thank the Council for providing the support needed to end homelessness amongst the veteran population and to assist veterans to obtain permanent housing. According to the Chapman Todd, Zero 16 Campaign Coordinator there are 33 veterans remaining to be housed by the end of the year. We ask that the Council ensure that the \$500,000 will be recurring and not a one time expenditure to continue to provide rapid rehousing in the upcoming year.

2. Support Increased Access to Health/Mental Health for Veterans

We ask the Council to work with us to increase access in the County to health/mental health care for veterans. The County and its contractors need to encourage veterans and their families to enroll them in the VA health care system and we ask that information be provided on County Ride On buses as to how to enroll. Recent studies indicate that 1 out of 5 veterans returning from Iraq or Afghanistan have some type of mental health issue from Traumatic Brain Injury to Post Traumatic Stress Disorder. We recommend that you continue/increase funding to support agencies serving Veterans and their families such as Serving Together of the Mental Health Association, Easter Seals and Bethesda Cares. We understand that there are plans underway for a Mental Health Court and request some consideration for how veterans might be served there or a separate Veterans Court.

To provide greater access to health care, we are pleased that the VA Medical Center in D.C., will be establishing a Community Based Outpatient Clinic in the County in 2016.

As you are aware the County Executive and then President Craig Rice designated 2015 as "The Year of Montgomery County. As part of this year's activities, we have been working with Neil Greenberger and Meryn Reineke of Montgomery Community Media to plan the County's first Salute to Vietnam Veterans to be held on October 24, 2015 at the Universities of Shady Grove. Bob Schieffer formerly with Face the Nation is our MC. We hope that you can attend.

Thank you.

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LETTER TO GOVERNOR LARRY HOGAN REGARDING PURPLE LINE



Commission on Veterans Affairs
May 18, 2015

Via: Electronic Transmission

The Honorable Lawrence J. Hogan
Governor, State of Maryland
State House
Annapolis, MD 21401

Dear Governor Hogan:

In November 2014, Montgomery County Executive, Ike Leggett, and the President of the Montgomery County Council, Craig Rice, made a momentous decision. They declared that 2015 would be the year of Montgomery County's veterans and their families. The declaration, among other things, recognized our County veterans' enduring vigilance and military service and applauded their continuing public service to our County as reservists, civic volunteers, coaches, educators and legislators. Montgomery County's Commission on Veterans Affairs is charged with coordinating events to celebrate Montgomery County veterans and their families in 2015. It is also charged with identifying issues of importance to Montgomery County veterans and their families to ensure they receive the support and recognition they so richly deserve. Construction of the Purple Line is one such issue.

We strongly urge you to support the construction of the Purple Line. The Purple Line will help so many of our military retirees, active duty, veterans and their families who use medical services at Walter Reed National Military Medical Center (WRNMMC). The Purple Line will provide a direct means of transit to WRNMMC, which will positively impact the ability of our service members, veterans and their families to receive the medical attention they need. Both WRNMMC and Naval Support Activity - Bethesda (NSA-B) have experienced a tremendous explosion in growth over the past five years due to the consolidation on the NSA-B/WRNMMC campus of various military institutions.

Some statistics say that the number of personnel working aboard NSA-B has increased by about 45% since the Congressionally-ordered Base Closure and Realignment Commission decisions of 2005 with an increase of almost 100% of annual visits to NSA-B during that same time. The Purple Line will aid those employees of WRNMMC and NSA-B by decreasing the amount of traffic and congestion in that part of the County. Less time in traffic will equate to more time providing medical treatment to service members, veterans and their families. It will also alleviate the commuting pressures on the invaluable employees of the National Institutes of Health (NIH) and students at the Uniformed Services University of the Health Sciences (USUHS). Less time in traffic will equate to more time for NIH employees to complete their critical and scientific work and USUHS students to prepare themselves for future careers in medicine rendering assistance to our veterans and their families. Construction of the Purple Line, by some estimates, will improve access to transit options for approximately 12,000 personnel at NSA-B and the approximately 20,000 employees of NIH.

2015 is a crucial year for Montgomery County veterans and their families. Governor Hogan, you have an incredible opportunity to positively shape their lives and thank them for their years of tireless and courageous service to the State of Maryland and our Nation. We respectfully urge you to fund the construction of the Purple Line. Funding for the Purple Line shows support for our veterans and their families. They have stood shoulder to shoulder for us; let us now stand shoulder to shoulder for them and build the Purple Line.

I am available to answer any of your questions. Thank you for your time and consideration, Governor Hogan. Please feel free to contact the Commission on Veterans Affairs Office at 240-777-1246.

Respectfully

Daniel J. Bullis
Chair

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VAN HOLLEN, LEGGETT ANNOUNCE VASH HOUSING VOUCHERS FOR HOMELESS COUNTY VETERANS

Congressman Van Hollen News Release - April 20, 2015

Today Maryland Congressman Chris Van Hollen and Montgomery County Executive Isiah Leggett announced that the Housing Opportunities Commission of Montgomery County has been granted \$72,776 in new Veterans Affairs Supportive Housing (VASH) vouchers by the U.S. Department of Housing and Urban Development (HUD).

“Montgomery County has been a leader in the effort to ensure every veteran has access to resources that help them thrive as civilians, and I’m proud that the budget I’ve put forward allows for increased funding for vital programs for our veterans such as HUD-VASH,” said Congressman Van Hollen. “No veteran should have to worry about not having a roof over their head, and this program helps keep our commitment to care for those who have bravely served our nation.”

County Executive Leggett said, “As a veteran myself, I am very sensitive to the plight of veterans with families who find themselves homeless. I am very grateful to Congressman Van Hollen for his efforts and support. I am grateful as well to the Department of Housing and Urban Development for its commitment to helping those who have valiantly served their country make their way during difficult times.”

BACKGROUND:

Montgomery County, MD has been at the forefront of helping homeless veterans. Congressman Van Hollen, Montgomery County Executive Isiah Leggett, and the County’s Commission on Veterans Affairs have been strong advocates of this program.

This supportive housing assistance is provided through the HUD-VASH Program, which combines rental assistance from HUD with case management and clinical services provided by VA. The \$72,776 grant for Montgomery County is part of \$65 million in grants announced by the Department of Housing and Urban Development today to support the housing needs of more than 9,300 homeless veterans across the country. In Montgomery County, the Housing Opportunities Commission provides rental assistance to homeless veterans while nearby VA Medical Centers offer support services and case management.

MIKULSKI, CARDIN, VAN HOLLEN AND LEGGETT ANNOUNCE DEPARTMENT OF VETERANS AFFAIRS HAS BEGUN LOCATION SEARCH TO LEASE SPACE FOR COMMUNITY-BASED OUTPATIENT CLINIC IN MONTGOMERY COUNTY

Montgomery County, Maryland News Release - 9/1/2015

Today U.S. Senators Barbara A. Mikulski and Ben Cardin (both D-MD), Maryland Congressman Chris Van Hollen, and Montgomery County Executive Isiah Leggett announced that the U.S. Department of Veterans Affairs (VA) has begun searching for a location in Montgomery County for a new Community-Based Outpatient Clinic (CBOC). While the VA's goal is for no veteran to be more than 30 minutes from medical care, many of Montgomery County's veterans face a much longer drive to reach the VA Medical Center in Washington, D.C. The VA's search is a promising sign that after years of delay, veterans in the region will have access to the quality care they deserve.

"Maryland veterans who have fought on the front lines shouldn't have to stand in line for the care and benefits they have earned and deserve," Senator Mikulski said. "With a new Community-Based Outpatient Clinic in Montgomery County, veterans will be able to access the care they need from a doctor in their own community. Promises made to our veterans and military families must be promises kept."

"It is an honor to work on behalf of Maryland's veterans to ensure that they have access to convenient and quality health care," said Senator Ben Cardin. "I applaud the VA for its steps to identify a location for the first-ever Community-Based Outpatient Clinic in Montgomery County and urge the agency to make similar efforts for all Maryland veterans who face lengthy travels to receive the health care they so merit."

Congressman Van Hollen said, "Veterans who fought for our country should not have to fight gridlock and other obstacles get access to health care, which is why I have long pushed for a new Community-Based Outpatient Clinic to better serve our region's veterans. With the process for selecting a location within Montgomery County underway, the long wait for more accessible care is finally almost over."

County Executive Leggett said, "I am very pleased to hear that the Department of Veterans Affairs (VA) is planning to open a Community-Based Outpatient Clinic here in Montgomery County. In 2008, I established the Montgomery County Commission on Veterans Affairs to give our veterans a voice in how the County can best serve them, and they said having services here in the County is a priority. Thanks to Congressman Chris Van Hollen and Senators Ben Cardin and Barbara Mikulski for making it happen."

The VA is searching for space to lease in the area of Rockville and Gaithersburg. Of the more than 44,600 veterans living in Montgomery County, more than 10,000 are enrolled in the VA health care system. According to statistics provided by the VA, over 4,000 of these veterans live within easy driving distance of the general area.

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Proclamation

Montgomery County Maryland

WHEREAS, the vigilance and military service of the residents of Montgomery County who served in the Armed Forces has been instrumental to the preservation of the freedom, security, justice and prosperity enjoyed by all in the County; and

WHEREAS, our local active duty military members, retirees, reservists, National Guard and their families are our neighbors, volunteers, coaches, teachers, educators, legislators, colleagues in civic clubs, religious institutions and many more; and

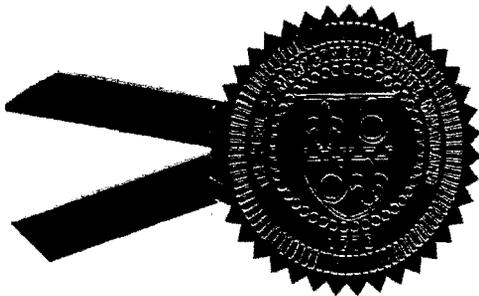
WHEREAS, the families of our 46,000 veterans in Montgomery County are forever diligent in their support, dedication, love and endurance through long separations, multiple tours of duty, and the challenges associated with post-deployment conditions; and

WHEREAS, Montgomery County wishes to honor our Veterans and their families. The year 2015 is a fitting time for Montgomery County to celebrate and honor our Veterans and their families;

NOW, THEREFORE, DO WE, Isiah Leggett as County Executive, and Craig Rice as County Council President, declare that 2015 shall be the year of

MONTGOMERY COUNTY'S VETERANS AND THEIR FAMILIES

We encourage all of our residents to join us in honoring our Veterans and their families for their courage and sacrifice.



Signed this 10th day of November in the year 2014.

County Executive

County Council President

COUNTY CABLE AND COMMISSION LAUNCH MONTHLY HOMEFRONT TV SHOW HIGHLIGHTING VETERANS AND THEIR FAMILIES

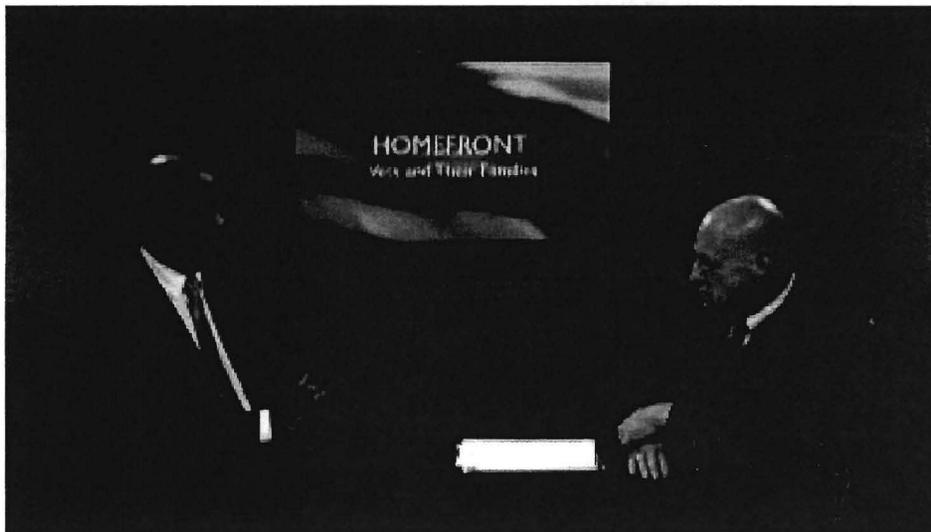
Immediate Release: Tuesday 20 October

HOMEFRONT Vets and Their Families

County Cable Montgomery and the Commission on Veteran's Affairs have launched a new monthly show called "Homefront" that provides information on topics and services for veterans and their families living in Montgomery County. The show's inaugural segment, which began airing recently, features County Executive Isiah Leggett, a Vietnam veteran, discussing the programs and services the County offers. Leggett created the Commission on Veterans Affairs in 2008.

The 15-minute program airs on Comcast/RCN channel 6 and Verizon channel 30 on Sundays at 6:30 p.m. and 10:45 p.m. and on Fridays at 10:30 p.m. The show is also available for viewing on demand on the County Cable Montgomery website at <http://montgomerycountymd.gov/ccm>.

For more information on the Commission on Veterans Affairs, go to www.montgomerycountymd.gov/HHS-Program/ADS/CVA/CVAIndex.html.



Homefront host Mike Subin interviews County Executive Isiah Leggett.

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MONTGOMERY COUNTY, MD SALUTES & HONORS VIETNAM VETS

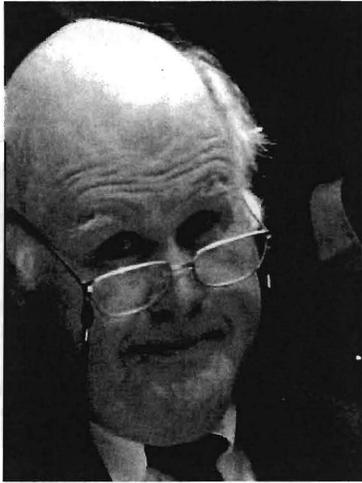
October 24, 2015

*Event Planners Neil Greenberger, Montgomery County Council, and
Meryln Reineke, Montgomery Community Media*



Huey helicopter sent over from Andrews Air Force Base to honor Vietnam Veterans.

OUR COMMISSIONERS WHO SERVED DURING VIETNAM WAR



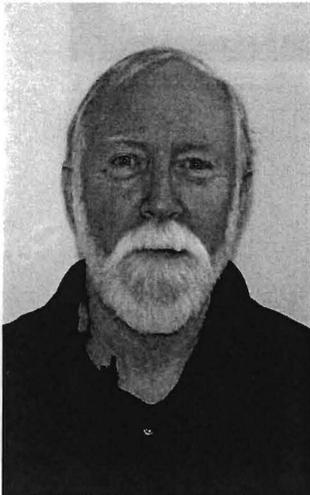
James Campbell
Representing the Military Officers
Association of America



Daniel J. Bullis, Chairman
Representing Disabled
American Veterans



Ron Drach
Representing Disabled
American Veterans



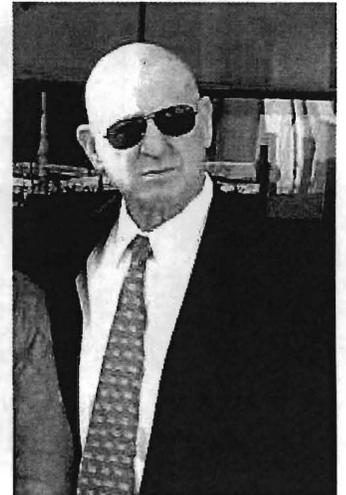
Bill Gray
Representing Vietnam
Veterans of America



Jane McCarthy
Representing
American Legion



Wayne Miller
Representing Disabled
American Veterans



Mike Subin
County Executive
Designee

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5 FORMER VIETNAM POWS AND COUNTY RESIDENTS ATTEND MONTGOMERY COUNTY EVENT THAT HONORED VIETNAM VETERANS

County Council Press Release: 10/20/15

ROCKVILLE, Md., October 19, 2015 - Everett Alvarez, Jr., Fred Cherry, Michael Cronin, Hubert Clifford Walker and Larry Stark, each of whom endured horrendous conditions as a prisoners of war during the Vietnam War, but who emerged with a determination to return with "our personal integrity, our reputation and with our honor," all will be present on Saturday, Oct. 24, as Montgomery County honors the men and women who served the nation during the Vietnam War. The event will take place at the Universities at Shady Grove in Rockville, starting at 10:30 a.m.

The gathering of the five former POWs, each now a resident of Montgomery County, will mark a rare public appearance by the five together.

The Vietnam War - which changed the lives of those who served and altered the political scene back home—ended for the United States in 1975. Bob Schieffer, who recently retired as host of *CBS News' Face the Nation*, will be the host and guest speaker for *Honor and Gratitude: Montgomery Salutes Vietnam Veterans*. It will be the first significant event in the 40 years since the war ended to honor the County's Vietnam veterans. It is estimated that between 130 and 140 Montgomery County residents lost their lives in the Vietnam War. There are more than 13,000 Vietnam veterans currently living in the County.

County Executive Ike Leggett (who is a Vietnam vet), Council President George Leventhal and the County Council will lead the special ceremonies at the Universities at Shady Grove at 9630 Gudelsky Drive in Rockville. The event will be recorded and broadcast on many of the public cable television channels that compose the County's PEG (Public, Education, Government) organization, which is hosting the event. In addition, the PEG organization has been recording the stories of many of the veterans for a documentary that will be broadcast after the event.

Among the speakers will be U.S. Senator Benjamin Cardin; U.S. Congressmen John Delaney and Chris Van Hollen; and Maryland Secretary of State John Wobensmith, a Navy veteran who served at the National Security Agency during the Vietnam War.

The program will include a look back at some of the significant events of the U.S. involvement of the conflict that dates to July 8, 1959, when two U.S. military advisers were killed in a raid at Bien Hoa. More than 800 people are expected for the Oct. 24 event, including those who were present in major actions of the 11-year U.S. involvement. Those events included attacks on the USS Maddox in August 1964 that led to Congress on Aug. 7, 1964, passing the Gulf of Tonkin Resolution that gave President Lyndon Johnson the power to take whatever actions he saw necessary to defend South Vietnam against Viet Cong forces.

Honor and Gratitude: Montgomery Salutes Vietnam Veterans event organizers are currently seeking to contact more of the veterans who will be honored on Oct 24. Those veterans, or family and friends of the veterans, seeking more information about the event should call 301-424-1730 / ext. 350. Additional details, including how to register to attend the free event, can be found on the event's web site at: <http://www.mocovietnamvets.org/>

"It has been four decades since our Vietnam veterans returned home," said County Executive Leggett. "We want to take this opportunity to acknowledge their courage and patriotism and say thank you for making the world a better place. As a veteran of the Vietnam War, I know the sacrifices that were made by members of our military during times of war. This event is a perfect way for all of us to pay tribute to these brave and honorable men and women."

Mr. Schieffer was a reporter for more than half a century and 2015 marked his 46th year at CBS News and his 24th anchoring *Face the Nation*. Prior to joining CBS in 1969, he was a reporter at the Fort Worth Star-Telegram where he was the first reporter from a Texas newspaper to report from Vietnam.

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5 FORMER VIETNAM POWs AND COUNTY RESIDENTS ATTEND MONTGOMERY COUNTY EVENT THAT HONORED VIETNAM VETERANS - CONTINUED

Mr. Schieffer has won virtually every award in broadcast journalism including eight Emmys, the overseas Press Club Award, the Paul White Award presented by the TV News Directors Association and the Edward R. Murrow Award given by Murrow's alma mater Washington State University. In 2008, he was named a living legend by the Library of Congress. In 2013, Mr. Schieffer was inducted into the National Academy of Arts and Sciences Hall of Fame.

Other speakers at the event will include veterans who served in various aspects of the Vietnam conflict. The event will honor their service and also will look at how those experiences influenced their lives since.

Retired Navy Commander Alvarez, Jr., who was the first American aviator shot down over Vietnam and held prisoner for 8 ½ years, will be among the featured speakers at the event. He holds numerous military decorations including the Silver Star, two Legions of Merit, the Distinguished Flying Cross, two Bronze Stars and two Purple Hearts.

Commander Alvarez, the grandson of Mexican immigrants, was a 26-year-old Navy pilot based on the USS Constellation aircraft carrier in the South China Sea on Aug. 5, 1964, as tensions were heightening in the area. He was part of a bombing mission over North Vietnam sent in retaliation after a reported North Vietnamese attack a day earlier on two U.S. destroyers. The attack became known as the Gulf of Tonkin incident and led to the start of significant escalation of U.S. military action in Vietnam.

In a recent interview with the BBC News, Commander Alvarez, who now lives in Potomac, said he survived imprisonment in what became known as the "Hanoi Hilton" thanks to the mutual support of the other prisoners who communicated with each other by tapping on the prison walls.

"We had a philosophy that you didn't ever let your fellows down," he said in the interview. "If they couldn't take care of themselves, you took care of them because you knew darned well they would do the same. And we had a goal. We were determined to come home with our personal integrity, our reputation and with our honor."

Retired Air Force Colonel Cherry, who now lives in Silver Spring, was on a combat mission on Oct. 22, 1965, when his F-105 Thunderchief fighter-bomber was shot down over North Vietnam. Colonel Cherry ejected and was subsequently captured, becoming the first and highest ranking black officer to become a prisoner of war in Vietnam. Subjected to harsh interrogation and repeated torture, he spent more than seven years as a prisoner of war in Hanoi until his release on Feb. 12, 1973.

Colonel Cherry was awarded the Air Force Cross, the Silver Star, the Legion of Merit, two Distinguished Flying Crosses, two Bronze Stars, two Purple Hearts, the Meritorious Service Medal and the Outstanding Service to the Military Community award from the Tuskegee Airmen.

Mr. Cherry's life is the subject of the book, *Two Souls Indivisible: The Friendship That Saved Two POWs in Vietnam*, by James S. Hirsch.

Retired Navy Captain Cronin, a pilot, was on his second tour of duty in Vietnam and had flown 175 missions when his A4 Skyhawk was shot down over North Vietnam on Jan. 13, 1967. He was released after the Paris Peace Accords were signed on March 4, 1973. Captain Cronin earned two Silver Stars, the Legion of Merit, the Distinguished Flying Cross, four Bronze Stars, 15 air medals and two Purple Hearts.

After returning home, Captain Cronin was amazed to learn no U.S. law existed to declare war crimes to be an offense that U.S. courts would prosecute because, after six years of torture, he said he understood that such a law was crucial to protecting U.S. service personnel. During the mid-1990's, while flying as a commercial airline pilot and while studying for his law degree, Captain Cronin conceived the idea of the War Crimes Act of 1996, which states that any war crimes committed by or to a U.S. Armed Services member or U.S. national are federal crimes as required by the Geneva Conventions.

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5 FORMER VIETNAM POWS AND COUNTY RESIDENTS ATTEND MONTGOMERY COUNTY EVENT THAT HONORED VIETNAM VETERANS - CONTINUED

Retired Air Force Colonel Walker, who now lives in North Bethesda, was held as a prisoner of war in North Vietnam from Jan. 14, 1968, until his release on March 14, 1973. He was a crew member of an EB-66C aircraft with the call sign "Preview 01." It departed Takhli Royal Thai Airbase on a single aircraft mission to selectively jam enemy radar for an ensuing strike mission. However, Preview 01's F-4 fighter escort aircraft were drawn away by a MiG-21. As soon as the Phantoms had been drawn off and engaged in aerial combat with the MiG, two other North Vietnamese planes came from low altitude and shot down Preview 01 with an air-to-air missile.

All seven crewmen were able to eject, but they were in enemy territory. Four were eventually captured, but their status was unknown. It was years later that military intelligence learned that each of the four had in fact been captured and each man's status was changed to prisoner of war. Colonel Walker was awarded the Silver Star, the Bronze Star and the Legion of Merit.

Mr. Stark was working as a Navy civilian in Hue, which is in the northern part of South Vietnam. He was heading an industrial relations office that had the responsibility of hiring Vietnamese to work for various military organizations. During the 1968 Tet offensive, Hue came under attack. Mr. Stark and others tried to hold off the enemy from their buildings, but on Jan. 31, 1968, he was captured and held for 5 ½ years. Mr. Stark's family did not know he was alive until just a few days before his release on March 05, 1973. He was one of only two Department of Defense civilian employees who were captured. In 1962, President Kennedy had authorized that civilians could be eligible for a Purple Heart medal if they were involved in combat. On Jan. 4, 2010—more than 40 years after his service—Mr. Stark was presented with Prisoner of War and Purple Heart medals at the Washington Navy Yard. "This gentleman lost half a decade of his life in captivity and served as part of the Department of Defense when he was captured," said Assistant Secretary of the Navy Juan Garcia at the ceremonies. "That kind of sacrifice is rare. We haven't had anyone held for that long in [recent] conflicts; it doesn't happen like that anymore. So it is an honor to be here to meet and be part of a ceremony for a real American hero."

Other featured speakers at the event will include retired Brigadier General Wilma Vaught, who ended her service after 28 years in the U.S. Air Force as one of the most decorated women in U.S. military history and who was one of the few military women to serve in Vietnam who was not a nurse. Brigadier General Vaught, who retired in 1985, forged new paths and pioneered opportunities for the servicewomen who would follow. When she was promoted to brigadier general in 1980, she became one of a handful of women to have achieved that distinction.

While her military accomplishments are extraordinary, General Vaught's most lasting contribution likely will be her successful efforts related to the Women In Military Service For America Memorial. She was the driving force that built and now operates the \$22.5 million memorial, which is located at the gateway to Arlington National Cemetery. The Women's Memorial is the nation's only major memorial to pay tribute to the nearly 3 million women who have served in the U.S. military.

Another speaker will be retired Army Lt. Colonel Douglas "Lamar" Allen, Jr., a Burtonsville resident who was awarded the Distinguished Flying Cross for flying his helicopter in a monsoon to rescue numerous wounded and injured soldiers who were pinned down after an ambush.

In March 1969, during heavy inclement weather in the central highlands of Vietnam, he was flying on a different assignment when he monitored that a "sister" ground unit had been ambushed and had wounded soldiers still under attack, but needed numerous wounded to be extracted. The normal Medevac (evacuation) units indicated they were grounded due to the weather and could be hours from sending help. Lt. Colonel Allen broke into the discussion and indicated he and his crew were in position to could try and assist.

"I just said to my crew that we need to do this and no one said not to," said Lt. Colonel Allen. "Due to the weather and to stay out of enemy ground fire—we were flying at tree top level, but knowing the area of operations, I felt confident we could find them and hopefully get in and out quickly. Everything was moving pretty quickly, but they carved out a landing area for us and we were in and out in about two minutes. We got all six wounded out and they say we saved several lives. I thought it was 60-40 that we could make it, and we were lucky. In those situations, you just did whatever needed to be done to assist your fellow soldiers."

5 FORMER VIETNAM POWs AND COUNTY RESIDENTS ATTEND MONTGOMERY COUNTY EVENT THAT HONORED VIETNAM VETERANS - CONTINUED

Also speaking will be Tom Murphy, a current Rockville attorney who was seriously wounded in Vietnam and ironically ended his long recovery in nearby Walter Reed Army Hospital.

Pfc. Murphy was with the 25th Infantry Division of the Army in June 1969 when his unit was on patrol in an area known as Parrot's Peak, close to the Cambodian border. A major battle erupted at Fire Base Washington about two miles away as two North Vietnam regiments attacked a much smaller American company.

"At first light, we went out to the edge of the jungle, marching toward the fire base on patrol," he said. "Most of the area had been cleared and was open. I was on line with my unit searching the area, and there was not much out there except this lone tree. And from behind this tree jumps an NVA soldier with an AK-47. He didn't even have a helmet on. I had an M-16. He shot me and I shot him. I lived and he died."

Mr. Murphy was awarded a Purple Heart for his service actions. He went on to become a Rockville attorney and eventually became the first Vietnam veteran to be elected president of the Bar Association of Montgomery County, as well as the Maryland State Bar Association.

"So many in our community heroically served our nation, and the world, 40 years ago," said Council President Leventhal. "Oct. 24 will be a day where our County recognizes those whose actions helped that had such a great impact on our nation. There have been many books written, and many movies made, about the people we will honor, but on this day, we will personally thank—and hear directly from—some of the men and women who did so much to shape the life and freedom we know today."

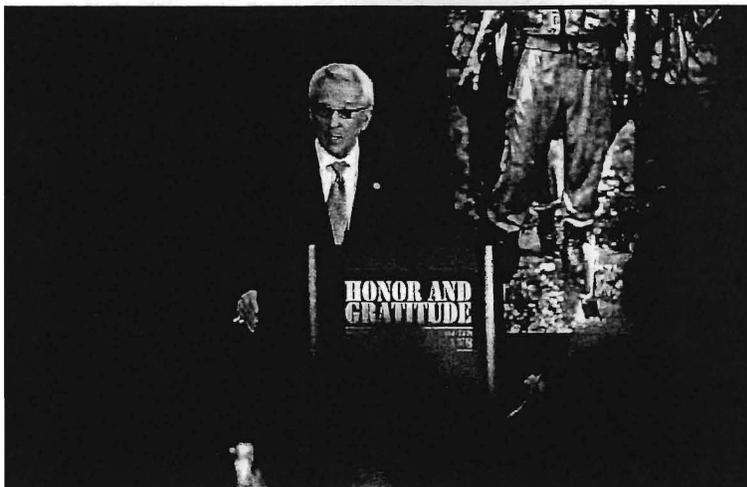
An important part of event will be the opportunity to record the stories of the Montgomery residents who served in Vietnam.

"Whether they were troops in the jungles, on helicopters and bombers, serving on the ships, the river patrol boats, in the medical corps or the troops supplying them all, there are stories that have yet to be told about Vietnam," said Merlyn Reineke, chair of the PEG Governing Board. "This event will introduce a new generation to the sacrifices made by the brave men and women in Vietnam, and as the County's cable providers, we will be there to preserve these stories so future generations will know about their heroism. It is hard to believe there has never been a major event to honor Montgomery County's Vietnam vets, but we think this is the right time to salute them."



Five former POW's and County Residents, seated left to right: Retired Navy Commander Everett Alvarez, Jr.; Retired Air Force Colonel Fred Cherry; Retired Navy Captain Michael Cronin; former Navy Civilian Larry Stark; Retired Air Force Colonel Hubert Walker.

TOM MURPHY SHARES AMERICAN ANTHEM



At the Montgomery County Salute to Vietnam Veterans event on October 24th Tom Murphy quoted lyrics from American Anthem. Tom is a current Rockville attorney who was seriously wounded in Vietnam and ironically ended his long recovery in nearby Walter Reed Army Hospital. Pfc. Murphy was with the 25th Infantry Division of the Army in June 1969 when his unit was on patrol in an area known as Parrot's Peak, close to the Cambodian border. A major battle erupted at Fire Base Washington about two miles away as two North Vietnam regiments attacked a much smaller American company. Mr. Murphy was awarded a Purple Heart for his service actions. He went on to become a Rockville attorney and eventually became the first Vietnam veteran to be elected president of the Bar Association of Montgomery County, as well as the Maryland State Bar Association.

These lyrics were written for the movie *The War* by Ken Burns for his World War II story. Regardless of the conflict, the words remain very meaningful. YouTube rendition: www.youtube.com/watch?v=sdjnAFqpg4

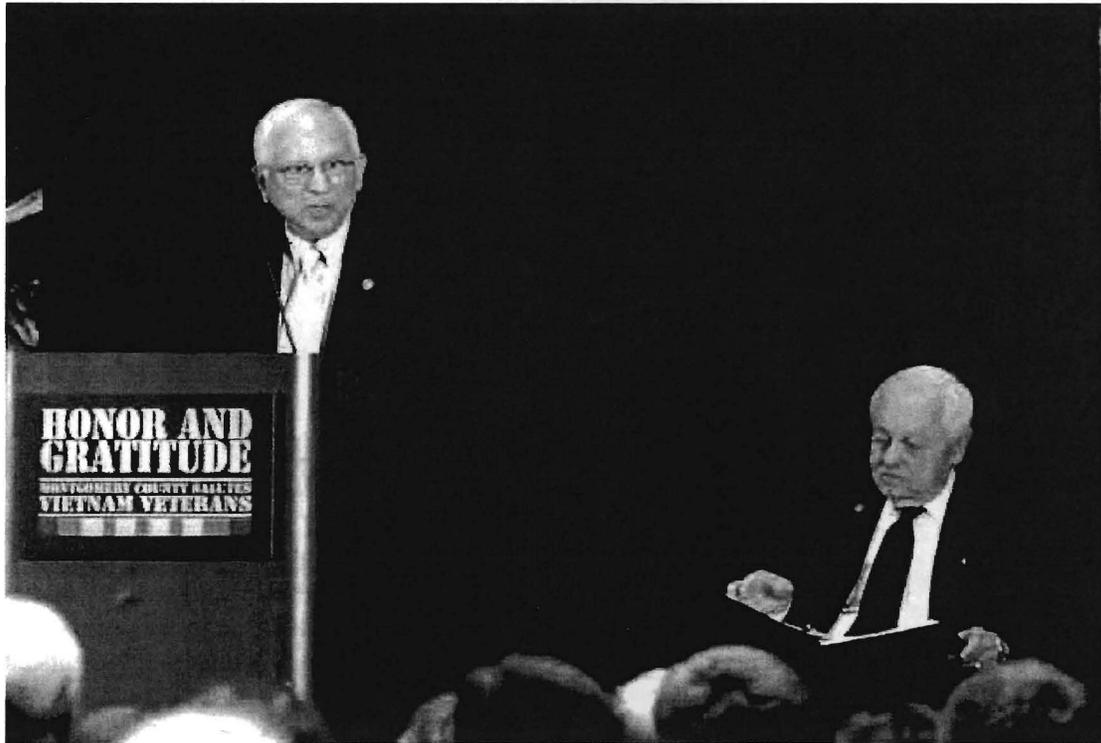
Music and Lyrics by Gene Scheer / Performed by Norah Jones for The War

All we've been given by those who came before,
The dream of a nation where freedom would endure.
The work and prayers of centuries have brought us to this day.
What shall be our legacy, what will our children say?
Let them say of me I was one who believed in sharing the blessings I received.
Let me know in my heart when my days are through,
America, America, I gave my best to you.

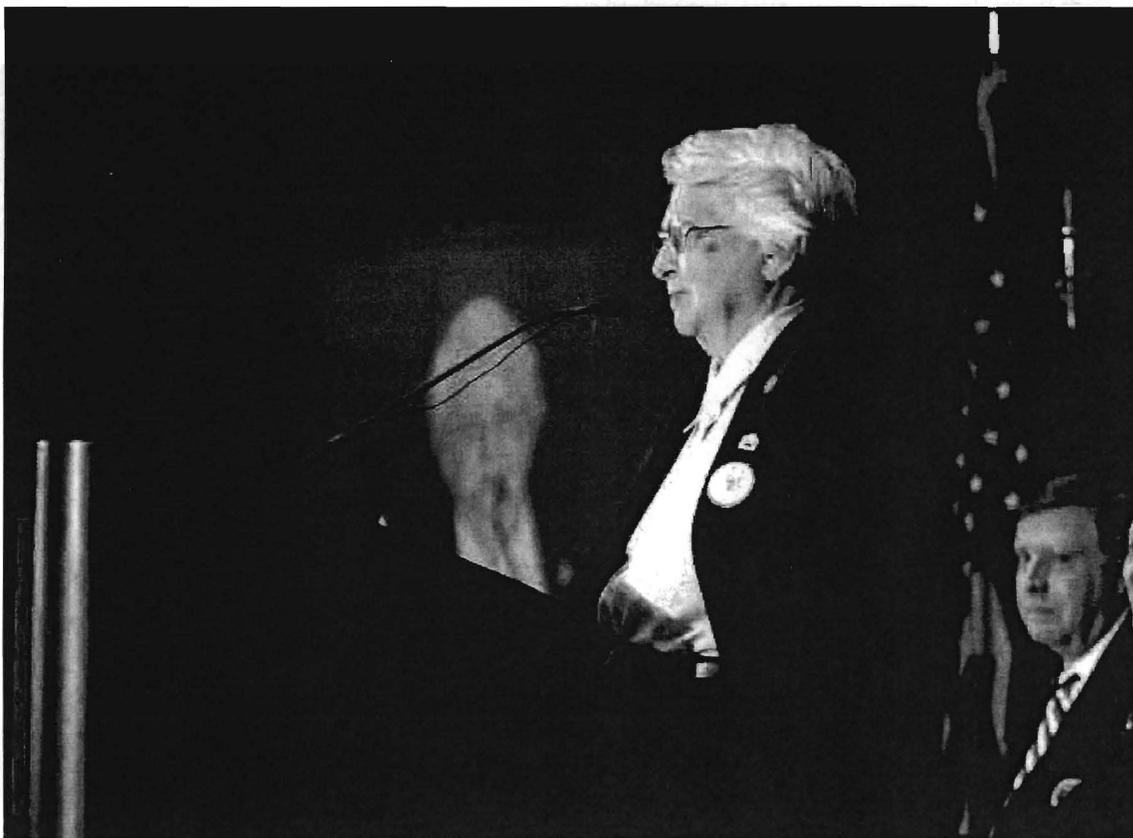
Each generation from the plains to distant shores,
With the gifts they were given were determined to leave more.
Battles fought together, acts of conscience fought alone,
These are the seeds from which America has grown.
Let them say of me I was one who believed
In sharing the blessings that I received.
Let me know in my heart when my days are through,
America, America, I gave my best to you.

For those who think they have nothing to share,
Who feel in their hearts there is no hero there,
Though each quiet act of dignity is that which fortifies,
The soul of a nation, that will never die.
Let them say of me I was one who believed
In sharing the blessings I received.
Let me know in my heart when my days are through,
America, America, I gave my best to you.
America, I gave my best to you.

MONTGOMERY COUNTY, MD SALUTES & HONORS VIETNAM VETS



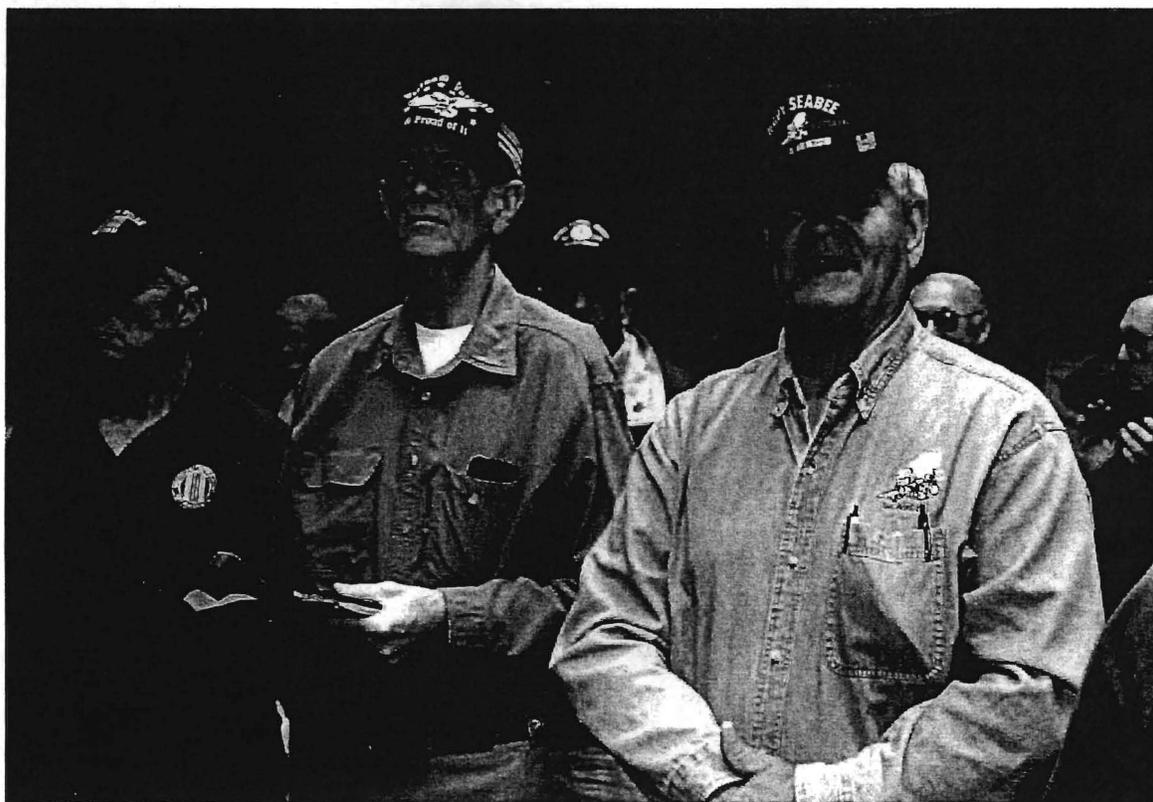
Everett Alvarez, Jr. was the first American aviator shot down over Vietnam and was held prisoner at Hanoi Hilton for 8 1/2 years. Seen here with Bob Schieffer, MC, formerly of Face the Nation.



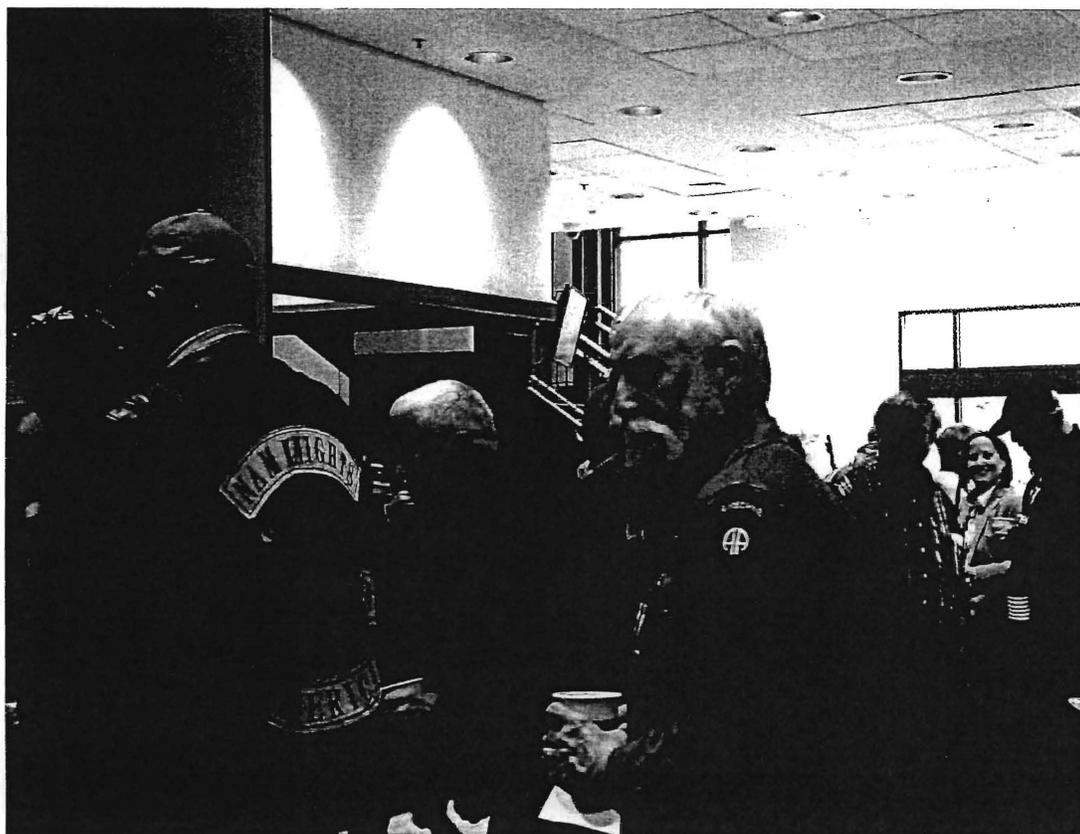
Brigadier General Wilma Vaught retired after 28 years in the Air Force and served in Vietnam. She later went on to lead the effort to build the Women in Military Services for America Memorial.

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MONTGOMERY COUNTY, MD SALUTES & HONORS VIETNAM VETS



*Vietnam Veterans Dave Gudes, Bill Bennett, and Roland Kauffman.
Roland is a former Commissioner with the Commission on Veterans Affairs.*



Bill Gray, Vietnam Veteran and first Chair of the Commission on Veterans Affairs, with Nam Knights.

MONTGOMERY COUNTY, MD SALUTES & HONORS VIETNAM VETS



Nam Knights of America (Montgomery County) joined us at the event.



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FIRST LADY MICHELLE OBAMA & DR. JILL BIDEN VISIT SILVER SPRING VET CENTER



First Lady Michelle Obama and Jill Biden meet with Team Leader Wayne Miller, right, and Marital Family Therapist Tamia Barnes, left, during a visit to a Vet Center in Silver Spring, MD. (AP Photo/Kevin Wolf)

Associated Press - April 17, 2015

Silver Spring, Md. — Wayne Miller was 18 when he lost his leg and became temporarily paralyzed after being hit by a mortar round during the Vietnam War.

He told his friends he'd been in a motorcycle accident.

"It was a tough time," said Miller, who had to readjust his social life while being cared for by his parents.

Now 64 and walking with only a slight limp from his metal left leg, Miller is a social worker and the team leader of the Silver Spring Vet Center.

On Friday, Miller served as guide during a visit by Michelle Obama and Jill Biden, who toured the therapeutic services center as part of their Joining Forces initiative, which highlights the need to provide resources and support for military members and their families.

"There are a lot of veterans who don't know that these resources exist, and that's the thing that we want to change," Obama said. "Every vet, every family member should know that there are places like this that feel like home, with people who are professional, that are trained, who know how to deal with any issue that you all encounter."

"The reason we're here today is to listen to you, listen to your experiences and learn from you," Biden said to the small group before closing the round table so clients could share their stories privately.

The center opened two years ago in a nondescript brick building just off I-495. It provides services ranging from bereavement support to sexual trauma therapy — help that Miller said is invaluable now and would have been just as helpful for him when he returned home after being injured.

"How does a family deal with a veteran?" said Miller, who served as a U.S Marine Corps corporal in south Vietnam. "How does a person with a disability deal with their family?"

Those are the types of questions the staff of five handles daily at the center.

Miller said the center was designed to encourage a sense of home and place of safety. A red, white and blue "welcome home" sign hangs in the reception area next to a coffee pot. Therapy rooms and offices are painted in subdued colors, and patriotic artwork hangs on many of the walls.

"It's more of a home than a hospital," he said. "The nice part about this place is that we were able to give it all the love."

Counselor Tamia Barnes' office got the approval of both Obama and Biden, who called her room "very warm and inviting."

Decorated with comfortable leather seats and children's artwork on the walls, Barnes said she wanted a "private practice feel" for clients who come to see her for marriage and family therapy sessions.

Barnes said the center also handles compulsive hoarding issues, substance abuse, anger management; whatever problem a military member or their family is struggling with, they work to create a solution.

"If there is a treatment needed, we are allowed to treat that need," Barnes told the women. "I'm thankful you are all here. I feel like we're one of the best-kept secrets."

VETERANS ADMINISTRATION SILVER SPRING VET CENTER SERVICES



Silver Spring Vet Center Staff, Left to Right: Ed Benedict, Michael Gatson, Tai Harmon, Tamia Barnes, Wayne Miller, Courtnee Hawkins

Readjustment Counseling Services

After war, some veterans experience psychological and social distress and difficulties in readjusting to civilian life. In 1979, the Department of Veterans Affairs established Vet Centers to assist Vietnam-era veterans with such problems. Congress later expanded Vet Center services to include combat veterans of other conflicts. These services are available at Vet Centers in all 50 states, Puerto Rico, the US Virgin Islands and Guam.

Services Available

- Individual counseling
- Marital and family counseling
- VA benefits assistance and referral
- Substance abuse counseling and referrals
- Primary health care for basic medical needs
- Pre-employment assistance and employment counseling
- Discharge upgrade information
- Community, social service and medical referrals
- Sexual trauma / harassment counseling (veterans of all eras)

The Vet Center also has a network of federal, state, city and community resources to help you. We will try to address any concerns or problems you bring to us.

At the Vet Center, you can expect help from professional counselors who will treat you with respect and understanding. Many of the counselors are also war veterans, so they understand your problems first hand, and have the training and skills to help solve them.

There is no charge for the assistance you receive at the Vet Center because of your sacrifices and efforts for this country. Veterans applying for assistance are asked to bring a copy of their Military Separation or Military Discharge (DD214) with them.

Vet Center Combat Call Center
1-877-WAR-VETS (927-8387)

National Suicide Hot Line
1-800-273-8255 (Toll Free)

**Bereavement Counseling for
Surviving Family Members**
202-461-6530 (V)

Location and Hours of Operation

2900 Linden Lane, Suite 100
Silver Spring, MD 20910
301-589-1073 (V)

Monday - Thursday: 8:00 a.m. to 7:30 p.m.

Friday: 8:00 a.m. to 4:30 p.m.

Second Saturday of month:
7:30 a.m. to 4:30 p.m.

Eligibility

War Zone Veterans - All Eras Including:

WWII

Three eligible categories

European-African-Middle Eastern Campaign Medal

(7 Dec 1941 to 8 Nov 1945)

Asiatic-Pacific Campaign Medal

(7 Dec 1941 to 2 Mar 1946)

American Campaign Medal

(7 Dec 1941 to 2 Mar 1946)

American Merchant Marines in Oceangoing Service

7 Dec 1941 to 15 August 1945

Korea

27 June 1950 to 27 July 1954

(eligible for the Korean Service Medal)

Vietnam

28 Feb 1961 to 1 May 1975

Lebanon

25 Aug 1982 to 26 Feb 1984

Grenada

23 Oct 1983 to 21 Nov 1983

Panama

20 Dec 1989 to 31 Jan 1990

Persian Gulf

2 Aug 1990 to -

Somalia

17 Sept 1992 to -

Bosnia-Herzegovina, Croatia, Kosovo, Albania
(former Yugoslavia operations)

Global War on Terrorism/OIF/OEF

11 Sept 2001 -

PROJECTED NUMBER OF VETERANS IN MONTGOMERY COUNTY, MD

The U.S. Census Bureau, 2014, estimates that there are approximately 44,257 veterans living in Montgomery County, Maryland. According to a 2014 American Community Survey conducted by the U.S. Census Bureau, 12.6% of Americans self-reported as being a veteran. The Census Bureau defines as veteran as men and women who have served (even for a short time), but are not currently serving, on active duty in the U.S. Army, Navy, Air Force, Marine Corps, or the Coast Guard, or who served in the U.S. Merchant Marine during World War II. People who served in the National Guard or Reserves are classified as veterans only if they were ever called or ordered to active duty, not counting the 4 to 6 months for initial training or yearly summer camps. All other civilians are classified as nonveterans.

Veteran Population of Montgomery County, MD - 2014		
Subject	Veterans	Total Population
Civilian Population 18 years and over	44,257 (6.0%)	785,028
Period of Service	Veterans	% of 46,533
Gulf War II (9/2001 or later) veterans	10,842	24.5%
Gulf War I (8/1990 to 8/2001) veterans	10,975	24.8%
Vietnam era veterans	11,064	25.0%
Korean War veterans	4,824	10.9%
World War II veterans	4,602	10.4%
Gender	Veterans	% of 44,257
Male	37,972	85.8%
Female	6,285	14.2%
Age	Veterans	% of 44,257
18 to 34 years	5,399	12.2%
35 to 54 years	11,507	26.0%
55 to 64 years	6,284	14.2%
65 to 74 years	8,542	19.3%
75 years and over	12,525	28.3%

Source: U.S. Census Bureau, American Community Survey, 2014

Montgomery County, MD Veteran Demographics - By City (2009 - 2013)

United States Census QuickFacts only includes data for incorporated places with a population of 5,000 or greater.

Ashton-Sandy Spring	333
Aspen Hill	2,115
Bethesda	3,427
Burtonsville	309
Chevy Chase	621
Clarksburg	537
Damascus	765
Darnestown	337
Four Corners	516
Gaithersburg	2,805

Germantown	3,128
Glenmont	506
Kemp Mill	709
Poolesville	240
Layhill	269
Leisure World	1,620
Montgomery Village	1,414
North Bethesda	2,442
North Kensington	636
North Potomac	737

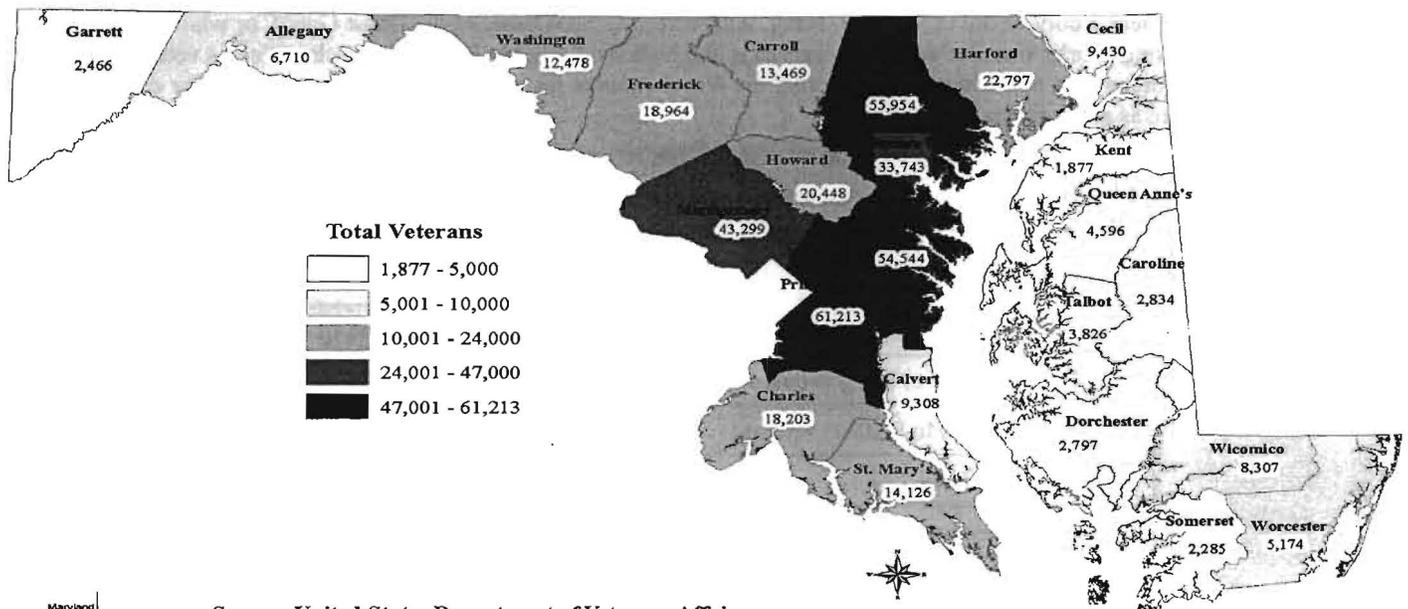
Olney	1,789
Poolesville	240
Potomac	2,429
Rockville	3,115
Silver Spring	3,427
South Kensington	529
Takoma Park	596
Travilah	589
Wheaton	2,028

Source: U.S. Census QuickFacts 2009 - 2013

PROJECTED NUMBER OF VETERANS IN MONTGOMERY COUNTY, MD

Projected Number of Veterans in Maryland - 2015

Projected Veterans in Maryland: 428,861



Source: United States Department of Veterans Affairs
 Map prepared for the Maryland Department of Veterans Affairs
 by the Maryland Department of Planning

MONTGOMERY COUNTY VETERANS ENROLLED IN THE VA HEALTH CARE SYSTEM

Montgomery County, MD - Veterans Enrolled in the VA Health Care System By Zip Code (2013)

	Silver Spring / Wheaton / Kensington / Aspen Hill / Colesville	Germantown	Rockville	Potomac	Gaithersburg / Montgomery Village
Zip codes covered	20901, 20902, 20903, 20904, 20905, 20906, 20907, 20908, 20910, 20914, 20915, 20916, 20918, 20895, 20993, 20997	20874, 20876	20847, 20848, 20849, 20850, 20851, 20852, 20853, 20857	20854	20877, 20878, 20879, 20882, 20883, 20884, 20885, 20886, 20898, 20899
Veteran population (number)	8,869	3,188	3,000	2,734	4,317
Veterans percentage of population	4.3%	3.69%	4.8%	6.1%	4.6%
Elderly (65 years old+) percentage of total population	13%	5.1%	14.0%	19.2%	9.3%
Percentage of population below poverty line	7%	6.3%	4.7%	2.7%	6.95%

Source: US Census Bureau, 2013

KEY CONTACTS FOR THE VA AND OTHER RESOURCES



Serving Together is the County's place to find all programs and services for veterans. The Veteran and Family Peer Navigator can help you find information on financial assistance, employment programs, benefits services, housing and homelessness assistance, and more. You can reach the Peer Navigator at 301-738-7176 Monday through Friday from 9:00 a.m. to 4:30 p.m. or by e-mail at peernavigator@servingtogetherproject.org. To view their online resource directory or calendar of events visit www.servingtogetherproject.org.

Maryland Department of Veterans Affairs (MDVA)

Phil Munley, Director of Program Services
E-mail: pmunley@mdva.state.md.us

410-230-4444 x 6457 (V)

The MDVA Service and Benefits Program provides assistance to the men and women who served in the Uniformed Services of the United States, their dependents, and survivors in obtaining benefits from the U.S. Department of Veterans Affairs, Department of Defense, State of Maryland and other programs for veterans and their families. The MDVA is currently working to hire a full-time Veterans Benefits Specialist (VBS) for Montgomery County. This person will work out of Montgomery College in Rockville.

Silver Spring Vet Center

Wayne Miller, Team Leader/Director
2900 Linden Lane, Silver Spring, MD 20910
E-mail: wayne.miller3@va.gov

301-589-1073 (V)
202-273-9116 (Bereavement Counseling)

Open Monday - Thursday, 8:00 a.m. to 7:30 p.m.; Friday 8:00 a.m. to 4:30 p.m.; Second Saturday each month 7:30 a.m. to 4:30 p.m.. Walk-ins are permitted during these hours, but appointments are requested. After hours appointments as needed. Veterans must show proof of service. The center provides benefits counseling and assistance with navigating the VA and paperwork, as well as employment counseling, counseling on PTSD and sub-PTSD, substance abuse counseling, family and marital counseling, psychological counseling related to readjustment, coordination and referral with doctors, employment related issues, assistance with basic needs such as food, shelter and clothing, medical and legal referrals, homeless assistance and will work with Montgomery County to find shelter placement, sexual trauma counseling, community outreach, bereavement counseling, and more. All services are provided at no cost to the veteran and their family. **Directions:** The Silver Spring Vet Center is located near the intersection of Seminary Road/Capitol View Avenue. You can also take the #5 Ride On Bus from either the Silver Spring Metro Station or the Twinbrook Metro Station and be dropped off at the Capitol View Avenue stop.

Outreach at Piccard - Department of Veterans Affairs Medical Center

1301 Piccard Drive, Room 1005, Rockville, MD 20850

The Department of Veterans Affairs Medical Center (VAMC) is providing outreach services to veterans at the County's Crisis Center. VAMC Homeless Outreach Staff and Veteran's Justice Outreach Staff are available for both drop in and scheduled visits. The VA will be available to assist veterans by making referrals and connecting veterans who are eligible for VA services with the VA healthcare system. Maryland's Commitment to Veterans (MCV) is also providing staff to be on-site to assist veterans and their families with coordinating behavioral health services, including mental health and substance abuse services - either with the VA or Maryland's Public Health System; facilitate transportation to behavioral health appointments; provide information and referrals related to employment, education, housing or VA benefits; and provide outreach to educate residents, veterans and community groups about MCV.

- Fatmata Kamara, VA Outreach Social Worker
E-mail: fatmata.kamara@va.gov, 202-253-9261
Ken Barnum, VA Outreach Social Worker
E-mail: kenneth.barnum@va.gov
Office Hours: Monday, 10:00 a.m. to 2:00 p.m.
(Staff alternate Mondays)
- Karen Carrington, Veterans Justice Outreach
E-mail: karen.carrington2@va.gov
Office Hours: Tuesday, 1:00 p.m. to 4:00 p.m.
- Melissa Barber, Regional Coordinator, MCV
E-mail: mbarber.mcv@gmail.com, 410-725-9971
Wilson Smith, Outreach Specialist, U.S. Vets, 202-734-8298
Clayton McGee, Senior Outreach Specialist, U.S. Vets, 202-573-4961
Office Hours: Thursday, 10:00 a.m. to 2:00 p.m.
(Staff alternate Thursdays)
- Julie Riggs, Peer Navigator, Serving Together
E-mail: peernavigator@servingtogetherproject.org, 301-738-7176
Office Hours: Friday, 10:00 a.m. to 2:00 p.m.

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CONNECT WITH THE COMMISSION



Visit us on the web! Read Commission Agendas, Meeting Summary Minutes, testimony, and more: www.montgomerycountymd.gov/cva. Our **Veterans Affairs website** has information on programs and resources, County events, and listings of Montgomery County fallen heroes dating back to World War II: www.montgomerycountymd.gov/veterans.



Our online **Veterans Network Directory** is a list of providers, agencies, businesses and advocacy organizations that offer: *benefits and claims assistance, counseling and wellness supports, disability supports, education and tuition assistance, emergency and financial assistance, employment and job training, health care, homelessness, housing, legal services, memorials, military spousal and family member supports, respite care, support groups, survivor and dependent benefits, and tax benefits:* www.montgomerycountymd.gov/vnd.



Like us on Facebook! [facebook.com/MCGCVA](https://www.facebook.com/MCGCVA)



Sign up for eSubscribe to receive emails about Veterans information and resources. www.montgomerycountymd.gov/mcg/esubscribe.html

COMMISSION PRESENTATIONS FOR 2014 - 2015

November, 2014: *Satellite Meeting held at Flower Valley Elementary School*
Presentation of the History of the Commission and its Priorities in 2015 – Top Policy Issues for the Council - Jerry Godwin, Chair; Commissioner Dan Bullis and Bill Gray

Presentation - Ed Chow, Secretary, Maryland Department of Veterans Affairs

December, 2014: **Outreach Mission of the Washington, DC VA Medical Center in Montgomery County –**
Brian A. Hawkins, Medical Center Director, DCVAMC

January, 2015: **Strategic Planning: 2015 Shall be the Year of Montgomery County's Veterans and Their Families**

March, 2015: **Mission and Programs of Montgomery County's Public Information Office –**
Ohene Gyapong, Deputy Director, Public Information Office

April, 2015: *Satellite Meeting held at Easter Seals in Silver Spring*
Remarks – George W. Owings, III, Secretary, Maryland Department of Veterans Affairs

May, 2015: **Update and Planning for Montgomery County Salutes Vietnam Veterans Event –**
Merlyn Reineke, Executive Director, Montgomery County Media, and Neil Greenberger, Legislative Information Officer, Montgomery County Council

June, 2015: **Veterans Economic Communities Initiative –** *Sharisse Y. O'Banion, Consultant, Washington, DC Metro Area Economic Liaison, Office of Transition, Employment and Economic Impact, U.S. Department of Veterans Affairs*

Department of Defense (DoD) Congressionally Directed Medical Research Programs (CDMRP) –
Ann Dodelin, Consumer Reviewer Administrator, Peer Review and Science Management, SRA International, Inc.

Sept, 2015: **Zero16 Campaign to End Veteran and Chronic Homelessness In Montgomery County –**
Chapman Todd, Zero16 Campaign Coordinator, and Nili Soni, Montgomery County Continuum of Care Coordinator, Special Needs Housing

Update on Hiring and Expectations of Veterans Benefits Specialist for Montgomery County –
Phil Munley, Director, Veteran Service Program, Maryland Department of Veterans Affairs

Oct, 2015: **The Work of Serving Together –** *Julie Riggs, Veterans and Family Peer Navigator; Serving Together, Mental Health Association of Montgomery County*

7TH ANNUAL TRIBUTE TO AMERICA'S VETERANS CONCERT

SSTCi would like to thank everyone
who made our
**7th Annual Tribute to
America's Veterans Concert**
possible.

**MONTGOMERY COUNTY
COMMISSION ON VETERANS AFFAIRS**

THE 19TH STREET BAND

Our special guests:

DAN BULLIS

*Sergeant Major, U.S. Army (Ret.)
Chairman, Montgomery County Commission on Veterans Affairs
Commander, American Legion Post 41, Silver Spring, MD
Vice President, Walter Reed Society*

RANDY STONE

*Major, United States Marine Corps
Iraq (2005–2006) and Afghanistan (2010–2011)
Vice Chairman, Montgomery County Commission
on Veterans Affairs*

with Special Remarks from

COUNTY EXECUTIVE

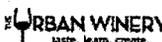
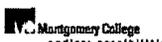
IKE LEGGETT

Vietnam Veteran

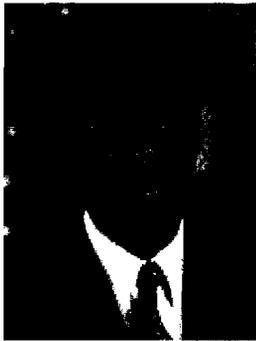
THANK YOU TO ALL OUR GENEROUS SPONSORS



silver spring town center INC.



HOW TO CONTACT YOUR COUNTY ELECTED OFFICIALS



**County Executive
Isiah Leggett**

The **County Executive** can be reached at:

Executive Office Building
101 Monroe Street, 2nd Floor
Rockville, MD 20850
240-777-0311 (V)
301-251-4850 (TTY)
ocemail@montgomerycountymd.gov



Montgomery County Council

The **County Council** can be reached at:

Stella B. Werner Council Office Building
100 Maryland Avenue
Rockville, MD 20850
240-777-7900 (V)
MD Relay 711
240-777-7888 (FAX)
county.council@montgomerycountymd.gov

Seated, left to right: Hans Riemer, Nancy Floreen, George Leventhal and Tom Hucker. Standing: Roger Berliner, Sidney Katz, Nancy Navarro, Craig Rice and Marc Elrich. Photo by Clark W. Day

**Isiah Leggett, County Executive
Uma S. Ahluwalia, Director
Montgomery County Department of Health and Human Services
401 Hungerford Drive
Rockville, Maryland 20850
240-777-1246 (V) or via MD Relay 711**

**Language translation and alternative formats of this report are available upon request.
For additional information on the Commission, please call the telephone numbers or write to the
address listed above or e-mail via the contact information listed below.**

2014 - 2015 Annual Report Prepared By:

Betsy Tolbert Luecking, *Community Outreach Manager*
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Carly Clem, *Administrative Specialist I*
carly.clem@montgomerycountymd.gov

HOME AND COMMUNITY BASED SUPPORT SERVICES

**COUNTY EXECUTIVE'S SUMMIT ON AGING
DECEMBER 2015**

READ AHEAD PAPER



MONTGOMERY COUNTY, MARYLAND

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HOME AND COMMUNITY BASED SUPPORT SERVICES

BACKGROUND

The health status of older Americans has improved over the past several decades (West et. al. 2014). In 2010 approximately three-fourths of adults age 65 years and older reported their health status to be “excellent,” “very good,” or “good.” (Schiller et. al., 2012). However, as individuals age the percentage reporting excellent or very good health decreases. For example, while only 3% of individual’s age 65-74 report a self-care disability, that figure more then triples among individuals age 75 and over (14% among women and 9% among men). Moreover, although current research portends a continued decrease in the disability rate among seniors, the overall dramatic growth in the number of older Americans means that there will still be an increase in the number of older adults with disabilities. This national trend holds true for Montgomery County residents (Figure1).

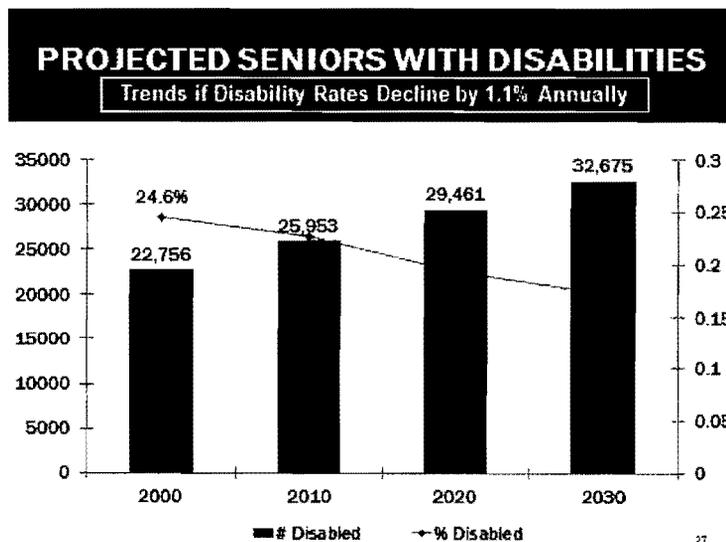


Figure 1

The increase in community-dwelling (i.e., non-institutionalized) Montgomery County residents projected to have a diagnosis of Alzheimer’s Disease or a Related Disorder is particularly challenging (Figure 2).

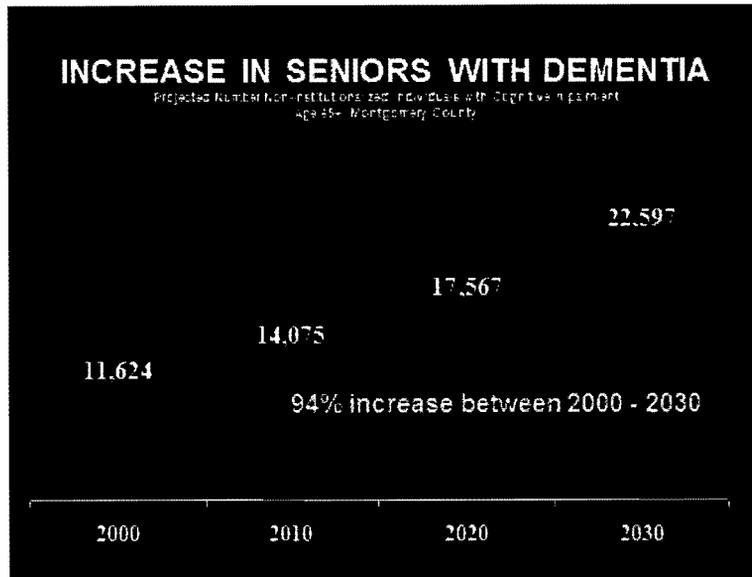


Figure 2

This increase in the overall number of older adults with self-care disabilities needs to be considered in the context of the by now well-established fact that the vast majority of older adults want to grow old in their own homes and, if that is not possible, at least in the same community (AARP, 2010). In 2005, 81 percent of householders aged 65 and older were homeowners, and only 3% had relocated to other dwellings in the past year (U.S Census Bureau, 2006; U.S. Department of Housing and Urban Development, 2006). A 2005 County survey found that not only did most seniors want to remain in their community but 75% of seniors age 65 and over stated that they want to always live in their current residence.

Another factor that makes the focus on the accessibility, availability, affordability and acceptability of home and community-based support services imperative is the critical role and diminishing availability of informal caregivers. Family and other informal caregivers are the largest source of long-term care in the United States (Houser and Gibson, 2008). However, decreased fertility patterns, increased labor force participation, increased labor force mobility and family geographic dispersion have raised concerns about the availability of family caregivers (Davitt, et. al., 2015). In fact, research on what is referred to as the “dependency ratio” or availability of the number of potential

family caregivers to those requiring care, projects a sharp decline in availability for the reasons mentioned above (Figure 3).

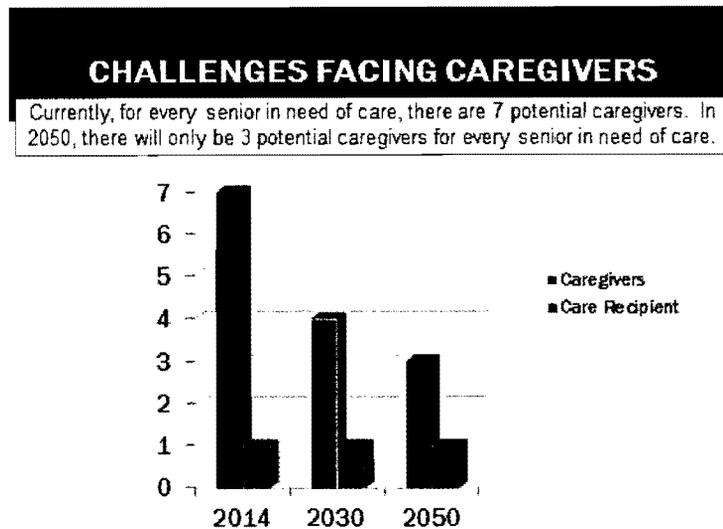


Figure 3

These three factors--the overall increase in the number of older adults with self-care limitations (despite the projected decrease in the disability rate), the strong preference of the majority of older adults wishing to “age in place/home,” and the reduced availability of unpaid family caregivers—make it imperative that we focus on the accessibility, availability, affordability and acceptability of long-term home and community support services.

HOME AND COMMUNITY-BASED SUPPORT SERVICES

There is no single agreed upon list of the discrete yet interconnected services that comprise the home and community-based system of support services. The specific services and programs are unique to each community and even region of the Country. What is needed in an urban setting may be different from what is needed in a suburban or rural setting. Conceptually, home and community-based support services refer to those services and programs that enable the growing population of older adults to sustain their independence and age in place in their own homes and communities with safety, dignity and choice. (U.S. Administration for Community Living (ACL), Community Innovations for Aging in Place (CIAIP) 2015).

Figure 4 (below) presents one model of services required for all older adults to successfully age in place—the services listed in the center and under the heading “Vulnerable Adults” are typically among those thought of as home and community support services.

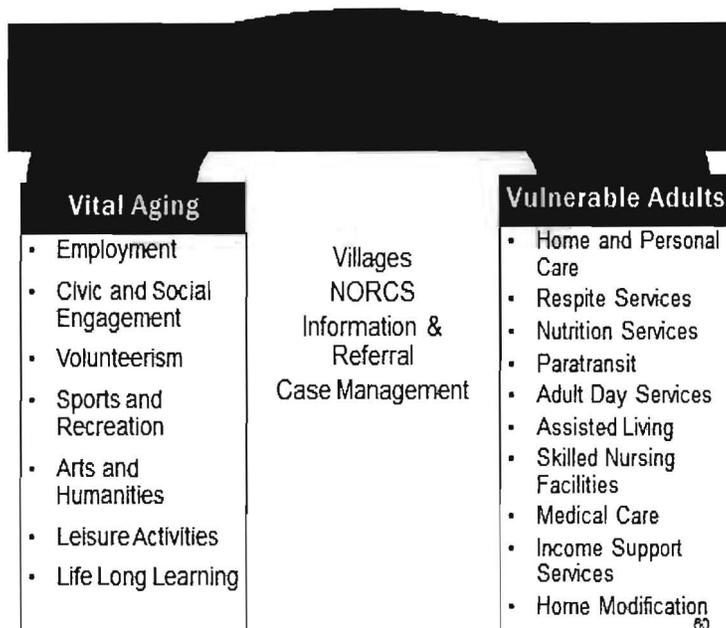


Figure 4

Additionally, Figure 5 presents a more comprehensive model of a “system” of long-term services and supports“ that include institutional, linkages, and community-based services.

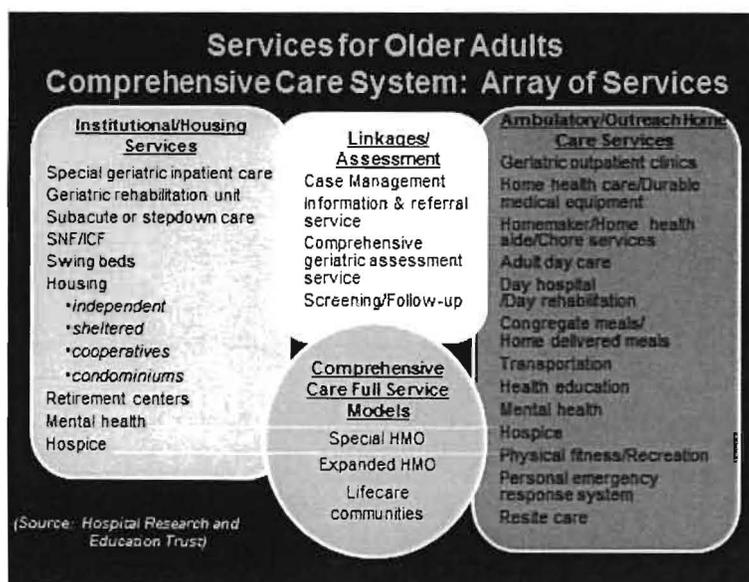


Figure 5

SELECT ACCOMPLISHMENTS

Long-term services and supports that have been implemented to help achieve the County Executive's goal of "Ensuring Vital Living for All of Our Residents," include:

- Senior Nutrition Program (SNP) Congregate Services:
 - Expanded the congregate meals services to four Adult Day Centers, two Congregate Housing Service Programs and residents with limited English skills are being served by six contractors who have the language skills needed to communicate with these residents. Provided 225,555 meals to 4,407 seniors at 42 congregate meal sites in FY15, i.e., 20% more clients than served in FY13.
 - Recently opened new lunch programs at White Oak and Mid-County Recreation Centers.
 - Improved choice by offering either hot or cold meal options.
- Senior Nutrition Program - Home Delivered Meals
 - Doubled the number of meals delivered to the most frail and vulnerable residents age 60+ who are home-bound due to illness or disability. There's no waitlist for this program.
 - Served 1,977 homebound seniors with meals delivered to their homes in FY15, i.e., twice as many clients served compared with FY13, after expanding the number of buildings served to include 900 seniors residing in 18 low-income housing sites; and,
 - Initiated criminal background checks for all volunteers.
- Community-Based Health and Social Support Services
 - In-home nurse monitoring services for more than 2,000 senior and disabled clients (FY15) receiving care through Community First Choice Program, a Medicaid waiver program.
 - Friendly visitor, escorted grocery shopping, legal assistance and Alzheimer's services (FY15) via supportive (contractual) services.
 - Dental Care for Seniors in partnership with the City of Gaithersburg to serve 141 older adults via the Community Clinic, Inc. and Mantoni Mobile Dentistry.

- The In-home personal care and chore services (sliding fee scale) served more than 300 persons to assist vulnerable seniors remain safe and cared for in the community, while preventing unnecessary institutionalization; 76 more are on the waitlist.
- Home Care Chore services: Continued support to low-income frail elderly people with disabilities who need such support to help avoid institutionalization.
- Heavy Chore services: Continued services to seniors with hoarding issues to prevent eviction, condemnation or to correct health/safety conditions
- Enrolled 451 Montgomery County residents in Medicaid's new Community First Choice program between April and September 2015
- Mental Health Services for homebound seniors including coordination of medication with medical providers.
- Enhanced Older Adults Waiver Program to provide more case management and long-term services.
- Continued public guardianship program – span of program expanded recently as the caseload increased by almost 25% in one year, from 77 individuals to 101 individuals.
- Increased State Senior Care Gateway Grant to expand senior care service capacity and avoid institutionalization.
- Increased Adult Foster Care reimbursement rate for 122 clients in senior assisted living homes (increased from \$1,350/month in 2012 to \$1,550/month.)
- Provided Senior Group Homes Subsidy to 14 clients in FY15.
- Continued to offer respite service, on a short-term basis, to nearly 500 family caregivers who support frail elders. Currently, 453 caregivers are being served; 20% are seniors.
- Increased subsidies for Adult Day programs to help 30 individuals access the program two days per week, starting in 2014. Such programs provide clients socialization and medical supervision while providing respite for family caregivers.
- Caregiver Outreach: Approved a Senior Fellow position, along with operating funds, to coordinate outreach re: available services.

- The County has continued its Medication Management program that distributes throughout the community File of Life medical cards and 4x/day, 7 days/week pill boxes.
- HHS serves as lead agency of the Montgomery County Coalition for Care at the End of Life to encourage discussion and preparation of advance directives.
- Each year Montgomery County participates in a national falls prevention awareness day providing free workshops on falls prevention. This includes information on how to improve balance and what home modifications can be done to prevent falls and other hazards.
- The County created a new position, the Village Coordinator. The Village Coordinator is expanding the potential for new Villages in all parts of the County in addition to helping sustain on-going Villages. The Village movement is an outstanding opportunity to address residents social isolation among other issues.

Neighborhood Assistance with Activities of Daily Living:

- Continued convenient collection of refuse and recycling for frail residents:
- Continued exemption for curbside refuse and recycling for any individual who is unable to bring containers to the curb, due to physical limitations. Currently 1,149 residents use this exemption.

CHALLENGES

The County is confronted by a number of challenges in the coming years as it relates to ensuring that people have adequate supports to enable them to remain living independently in the community as they age. Challenges that need to be considered include, but are not limited to:

- Older adults and caregivers are often unaware of the public and private resources that do exist in the community.

- Older adults and caregivers frequently find the health and social services systems difficult to navigate.
- The cost of home and community-based support services make them unaffordable to a large segment of the population. Especially affected are seniors that are above income threshold to be eligible for public assistance programs (e.g. Medicaid Waivers) but lack the income and assets to purchase services in the private marketplace.
- Long-Term Care Insurance remains out of reach for many 'Boomers' and "sandwich generation" residents who are over-income and asset levels to qualify for public programs.
- The demands of caregiving for a family member with a chronic disabling condition impacts the physical and mental health of caregivers, their income, workplace performance and retirement benefits. A 2013 AARP study found that about 1 in 5 workers between the ages 45 and 74 had either taken leave or quit a job to care for an adult family member in the past 5 years. That amounted to an average \$303,880 in lost income (including pension and Social Security benefits) per caregiver according to a MetLife estimate.
- As one of the most racially and ethnically diverse communities in the U.S., Montgomery County providers of HCBS must be able to deliver these highly 'personal' services in a culturally competent, responsive and acceptable manner. This remains a challenge for many agencies in the long-term care arena.
- Although there is a belief that Boomers are in general healthier than previous generations, research published in the Journal of the American Medical Association in 2013 showed that Boomers were in worse health than their parents at about the same age. They had more disabilities and higher rates of chronic diseases. Just 13% of the studied Boomers said they were in excellent health, compared with 32% of people from the previous generation. Boomers were more likely to be obese, exercised less, and had higher rates of hypertension and high cholesterol. The connection between this lower health status and the future need for both health and supportive community services is self-evident.
- As reported in this paper, 75% of seniors age 65 and over stated that they want to always live in their current residence. However, the great majority of the homes that seniors want to age in were not designed to accommodate the physical and cognitive challenges of residents as they age-in-place. The U.S. Centers for Disease Control and Prevention states that "Each year, millions of older people—those 65 and older—fall. In fact, one out of three older people fall each year, but less than half tell their doctor. Falling once doubles your chances of falling again. Treating fall injuries is very costly. In 2013, direct medical costs for falls—what

patients and insurance companies pay—totaled \$34 billion. Because the U.S. population is aging, both the number of falls and the costs to treat fall injuries are likely to rise.” Many of these falls occurs in the person’s home. There are multiple risk factors for falls including physical conditions and home hazards.

- An AARP Research Study defines social “isolation” as “the experience of diminished social connectedness stemming from a process whereby the impact of risk factors outweighs the impact of any existing protective factors. A person’s lack of social connectedness is measured by the quality, type, frequency, and emotional satisfaction of social ties. Social isolation can impact health and quality of life, measured by an individual’s physical, social, and psychological health; ability and motivation to access adequate support for themselves; and the quality of the environment and community in which they live.”

RECOMMENDATIONS AND ACTION STEPS

Opportunities available to Montgomery County Government to address challenges include, but are not limited to:

- Increase awareness of existing public and private long-term services and supports among seniors and family caregivers by conducting an extensive outreach and education campaign via multiple media modalities in a wide range of languages.
- Ensure adequate staffing and other resources to provide accurate and convenient Information and Referral/Assistance services, Seniors/Caregiver Help Lines, and Navigator/Connector functions. This includes maintaining an accurate, current and accessible (i.e., user-friendly) Senior Website (with information available in the primary languages spoken by Montgomery County residents).
- Advocate for expansion of federal and State financed long-term services and supports to address the lengthy wait list--specifically the Medicaid Waivers that provide a robust package of services to eligible individuals and other options to enable aging-in-place such as Medical and Social Adult day Programs, personal Care Assistance, Assisted Living/Group Home subsidies, etc.)
- Promote the purchase of Long Term Care Insurance that covers both the cost of nursing homes and community support services.

- Support the key “Best Practices for Removing Barriers to Equal Employment” advocated by AARP, Alzheimer’s Association and the National Alliance for Caregiving. Specifically:
 - Adopt a policy to value caregiving employees based on job performance rather than questioning their commitment due to competing caregiver responsibilities.
 - Provide workplace flexibility and alternate work schedules
 - Eliminate “no-fault absenteeism” policies for employees on stricter hourly schedules.
 - Provide education and training to managers on the stressors experienced by family caregivers and how to support caregivers while optimizing workplace productivity
 - Offer eldercare support, resources and referral services for employees with caregiving duties
 - Implement recruitment practices to target the hiring of skilled people with caregiving responsibilities who are looking to re-enter the workforce.
- Through dialogue, education and training ensure that caregiving employees who provide services are culturally competent, responsive and acceptable.
- Incorporate technology in the planning and delivery of services to promote maximum independence, dignity and choice.
- Provide information, education and training on risks for falls and other hazards through a variety of approaches more than once a year.
- Seek funds to enable professionals to conduct home assessments and provide recommendations on home modifications as preventive measures in addition to after the fact solutions.
- Expand the Friendly Visitors and other Programs that address the issue of social isolation.
- Provide more funds to expand the number of Villages and to support and sustain Villages and NORCs.

Montgomery County InterACC/DD

LMC

Request for Increase in Montgomery County's Match Of Maryland Developmental Disabilities Administration Revenue

April 6, 2016

InterACC/DD, is a collation of 31 providers of adult services supporting over 3,000 Montgomery County residents who have developmental disabilities. The coalition represents \$129 million in annual revenue from the MD Developmental Disabilities Administration. The coalition employs more than 4,000 staff.

Background: For over 30 years, Montgomery County Government provided a match to state funded services for county residents with intellectual and developmental disabilities. These critical funds are paid on behalf of each County resident directly to local provider agencies licensed and funded by the Maryland Developmental Disabilities Administration (DDA) to supplement wages for Direct Support Professionals (DSP) supporting people in residential, employment, day and community support services. There are currently more than 3,000 Montgomery County residents with intellectual and developmental disabilities receiving these supports in Montgomery County.

In FY 15, Montgomery County implemented the first year of a four-year plan proposed by InterACC/DD to restore the percentage of the County match to the pre-recession level of 8.7%. The first two years of the plan were successfully implemented, and Montgomery County fully funded the increase to the DD supplement including funding new individuals entering the system each year. The DD supplement in FY 16 is 8.0% of the total DDA revenue received by agencies for services to support County residents. In December, 2015, the third year of the four-year plan sought an increase of \$1,053,395 for a match of 8.3%. It is expected that DDA revenue will increase by 6.3% to fund the approximately 100 new individuals entering the system and a small rate increase.

Request for Increase in Matching Funds: The Montgomery County match is an essential resource to provide competitive wages to Direct Support Professionals whose work positively impacts the lives of thousands of Montgomery County's most vulnerable residents and their families. The partnership among DDA/Montgomery County Government and County providers of services is vital to enable County residents with developmental disabilities to live quality lives.

Chart 1: Proposed Four-Year Plan to Restore County Match to Pre-Recession Level

FY	STATE FUNDS	COUNTY MATCH	AMOUNT OF INCREASE REQUESTED	% OF COUNTY MATCH
FY 15	121,537,394	9,425,923	956,822	7.7
FY 16	129,974,130	10,395,343	969,420	8.0
FY 17	138,162,500	11,448,738	1,102,291	8.3
FY 18	155,182,583	13,190,519	1,741,781	8.5

Projected increase in DDA revenue of 6.3% per year.

The County Executive's FY 17 Budgeted Montgomery County Match is highlighted in green. This chart reflects the last two years of the four-year pre-recession plan.

Member Agencies: Abilities Network/EFMR, The Arc Montgomery County, CALMRA, CHI Centers, Compass Inc., Community Support Services, Inc., CSAAC, Full Citizenship, Head Injury Rehab and Referral, Jewish Foundation for Group Homes, J.P. Kennedy Institute, Jubilee Assn., MedSource, R.O.I., SEEC, Target, Inc. The Rock Creek Foundation, Treatment and Learning Centers, and other Providers and government agencies serving individuals with developmental disabilities



Montgomery County InterACC/DD

While this additional \$1,102,291 is consistent with the effort to restore providers back to the 2008 percentage of support, it does not address the impact of the 2014 legislation which raised the Montgomery County minimum wage. The shortfall resulting from the increase in the Montgomery County minimum wage was addressed by the County in its allocation of \$146,688 to the DD Supplement for FY 16, as the County recognized that direct support staff should be valued and paid above the County minimum wage. To address this issue, DD providers within Montgomery County urged the County to create a separate allocation in the budget for FY 16 (and moving forward) to account for the resulting shortfall between the state reimbursement rate and the County minimum wage threshold. The allocation was based on the amount that the County determined was the value—*beyond minimum wage*—of direct support services to individuals with developmental disabilities. The County supported the standard that direct support services should be funded to a level that is at least 125% of the Montgomery County minimum wage in order to implement the intent of the minimum wage in Montgomery County and to maintain services to the County’s most vulnerable citizens.

Impact on FY 17 Budget: The FY 17 budget poses a huge challenge for Montgomery County for nonprofit human service providers. In July 2016, the Montgomery minimum wage of \$10.75/hr. will be \$2.00 more per hour than the State minimum wage. The DD funding rate that human service providers are paid is based upon the State minimum wage—not the prevailing County wage—and although the amount that the State will include in the service reimbursement rate for direct support wages will rise to \$10.94/hour in July, it just barely exceeds the \$10.75/hr. Montgomery County standard, and it will be woefully short of the “125% of County minimum wage” threshold that was supported in the FY 16 budget discussions. In July 2016, that 125% calculation will equate to \$13.44/hr. Without this allocation, direct support services will erode to minimum wage jobs in 2017.

DD Minimum Wage Deficiency Calculation

As noted, the third year of the four year pre-recession plan requested an increase of \$1,053,395 to the base of the FY 16 DD Supplement which has been included in the County Executive’s budget. In addition, the County Executive has added \$48,896 toward the minimum wage offset. However, in order to reach 125% of the Montgomery County minimum wage, total County funding needed would equal \$16,691,007 in FY 17. This calculation takes into account the July 1, 2016 implementation date for the stepped up Montgomery County minimum wage. The present FY 16 supplement and \$146K add-on accounts for \$10,542,031 of this total. With the CE increase of \$1,102,291, Montgomery County’s inclusion of the 3rd year of funding for the pre-recession plan (as addressed on Page 1) would bring the DD Supplement to \$11,644,322, leaving a shortfall of (\$5,046,685).

FY	State Min Wage	Mont Co Min Wage	DDA Wage Factor Assumption (3.5%-FY17)	125% over Mont Co min wage	Supplement Factor (needed)	% over Minimum Wage	Total Supplement to all MoCo DD providers each year w/6.3% growth	Proposed MoCo Funding of 4 yr restoration plan and min wage supp	Difference
FY16	8.25	9.55	\$ 10.41	\$ 12.09	1.68	26.56%	\$10,542,031	\$10,542,031	-
FY17	8.75	10.75	\$ 10.94	\$ 13.44	2.50	25.00%	\$16,691,007	\$11,644,322	\$ (5,046,685)

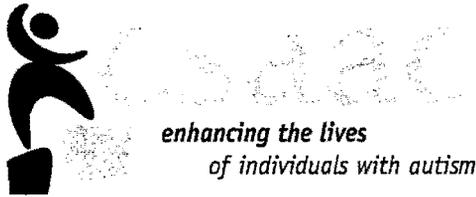
Shortfall	
\$5,046,685 * 25%	
\$4,328,253	24%
\$3,609,821	23%
\$2,891,390	22%
\$2,172,958	21%
\$1,454,526	20%
\$736,094	19%

These calculations are based on the actual hours of work provided within the County for direct support services and it anticipates a growth rate of 6.3% as we have traditionally seen in the County. These calculations do not include an allocation for the costs associated with the Sick and Safe Leave legislation that was passed earlier this year. The chart to the left reflects the shortfall for each percentage over minimum wage down to 19% above the local minimum wage.

While we recognize that the amounts sought are significant, these calculations provided herein are the real costs to the provider community under the County’s minimum wage structure. **We ask that the Council consider “making us whole” again, as promised in 2014 by adding an additional \$5,046,685 to the DD Supplement.**

* includes additional \$48,896 from County Executive budget to support minimum wage compliance





8615 East Village Ave., Montgomery Village, Maryland 20886

**Montgomery County Council – FY 17 Budget Hearing /Developmental Disabilities Funding
Lawrence Rossomondo, CSAAC – Interim Executive Director**

April 6, 2016

Montgomery County non-profit service provider, Community Services for Autistic Adults and Children (CSAAC) maintains a staff of 630 employees, 540 of whom provide direct supports to Montgomery County's citizens. Every day, CSAAC provides services to approximately 300 individuals diagnosed with autism who reside in Montgomery County offering lifespan services to children as young as 18 months through adults who are in retirement.

Like all of the county's non-profit human service agencies, CSAAC cannot control the reimbursement rate we receive from the state and county for our services. The state establishes rates for services rendered through the Developmental Disabilities Administration, and Montgomery County has historically supplemented these funds with what has been called "the DD Supplement." With the onset of the 2008 recession, this supplement had eroded for several years until a plan was developed to allocate county resources so that this Supplement could return to 2008 levels.

For the last two years, Montgomery County has implemented a plan to restore the percentage of the county match to the pre-recession levels. The third year of this four year plan includes an increase of \$1,053,395 which Mr. Leggett has included in his proposed FY17 budget. In addition, last year, an additional computation of \$146K was provided in the FY16 budget so that direct support professionals could maintain a wage rate at 125% of the county minimum wage. The FY17 contemplates a \$48,896 addition to the \$1.053M increase. While this additional \$1.1M of budgetary allocation is consistent with the effort to restore providers back to the 2008 percentage of support, *it does not adequately address the impact of the 2014 legislation which raised the Montgomery County minimum wage.*

As the county minimum wage increases this July to \$10.75/hr, provider agencies will require additional resources from Montgomery County in order to meet the higher minimum wage requirements and this need will continue in FY18.

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LMC

DD Minimum Wage Deficiency allocation

The County must maintain a separate allocation in the budget to account for this coming deficiency. The allocation would be based on the amount that the County determines is the value - beyond minimum wage - of direct support services to individuals with developmental disabilities. . In order to implement the intent of the minimum wage in Montgomery County and to maintain services to the County's most vulnerable citizens, the Council recognized last April the need to allocate an amount that keeps direct support funding at 25% above the local minimum wage. We cannot let direct support jobs become minimum wage jobs.

In order to keep direct support wages at 25% above the coming Montgomery County minimum wage increase in FY17, providers would need an extra \$5M of support through a DD Minimum Wage Deficiency allocation above the presently proposed FY17 DD Supplement of \$11.6M. While we recognize that this is a significant amount, it is necessary to protect Montgomery County's citizens impacted by developmental disabilities and we cannot let human services supports erode to a minimum wage job. All of you have seen the hard work that is done at CSAAC and the county's other human service providers and you know that direct support is anything but a minimum wage job. Please remain consistent with your astute recognition last April that direct support professionals should be funded at 125% of the county minimum wage

Respectfully submitted,



4.6.16

Lawrence Rossomondo, Interim Executive Director
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