Commission on Aging Montgomery County, Maryland



Briefing Book 2022

Website Information

For more information regarding the Montgomery County Commission on Aging and its work, please visit the Commission's website at www.montgomerycountymd.gov/coa. There you will find the CoA's calendar of events; committee minutes; links to the CoA's cable TV program, 50+ in Montgomery County; and links to multiple resources including reports, fact sheets, and letters of testimony.

In addition, another website, the Montgomery County Senior Site, provides information on such topics as consumer issues, employment, caregiving, housing, safety, older adult services, calendar of events, and senior center locations. It was established by former County Executive, Isiah Leggett, and is maintained by the County's Public Information Office. That website can be found at https://www.montgomerycountymd.gov/senior.



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Executive Summary

The objective of this briefing book is to provide information regarding concerns that significantly impact the health, welfare, safety, and quality of life of older adults in our County. The issues that we discuss are expected to continue to expand as the older adult population grows and require both near-term and long-term plans to address the challenges. The topics described in this book include:

Affordable Housing – Looking at the income that older adults need to live independently in Montgomery County, the monthly figure for a renter is \$33,840/year (37 percent higher than the national average), \$44,268/year for an individual with a mortgage (40 percent higher than the national average), and \$26,568/year for an individual without a mortgage (31 percent higher than the national average).

Transportation, Driver Safety, and Pedestrian Safety – Older residents who no longer drive, or who never learned to drive, rely on public and other transportation options. Many of them cannot afford taxis, Uber, Lyft or similar options, or cannot navigate their systems. Regarding driver safety: road design and markings, as well as signage and targeted safe driver education, deserve attention. In addition, infrastructure improvements for pedestrian safety are needed, particularly for older residents.

Assisted Living Affordability and Access – The price for assisted living in Maryland averages \$5,000/month, or \$164/day and \$60,000/year. Almost all assisted living services are paid for by residents (or their families) out of their personal funds. Medicare does not cover assisted living costs.

Caregiver Support – More than 1-in-5 Americans (21.3 percent) are caregivers, having provided care to an adult or child with special needs at some time in the past 12 months. Family caregivers face a financial burden caring for a loved one and payment for their services needs to be expanded.

Elder Abuse, Neglect, and Exploitation – The National Council on Aging states that at least approximately 1-in-10 Americans aged 60+ have experienced some form of elder abuse.

Health and Social Services – Some important issues that must be continuously monitored for the older population include hearing loss, food insecurity, social isolation, oral health, and behavioral health, including suicide prevention.

Quality of Care in Long-term Care Facilities – In 2017, the Maryland Health Care Commission's Nursing Home Compare website identified approximately one-third of Montgomery County nursing homes as falling "below" or "much below" the national average in overall quality measures. In addition, the State has reduced the number of staff who perform surveys of skilled nursing facilities, and additional financing for the Long-term Care Ombudsman Program is needed.

Social Isolation and Mental Health – Social isolation is a major risk factor for hypertension, heart disease, and early onset dementia, and costs the Medicare program \$6.7 billion in additional spending annually. The COVID pandemic has elevated the problem even more.

Home and Community Based Services: Access and Affordability – Three factors – the overall increase in the number of older adults with self-care limitations, 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 supported services.

Cross Cutting Issues – It is imperative that our leaders consider our County's diversity, its methods of communications, and the systemic problem of ageism to ensure that the County remains a community for a lifetime.

About the Commission

Vision

To enable older adults to live quality lives, regardless of their abilities, so that Montgomery County is their community for a lifetime.

Mission

Recognizing Montgomery County's diversity and that older adults are the fastest growing demographic in the County, the CoA will serve as a valued voice for these older adults.

Diversity, Equity, and Inclusion Commitment

We are committed to being a just, inclusive, anti-racist, anti-agist, and equitable community that values and honors the unique qualities, wisdom and lived experience of all people. We are steadfast in our commitment to foster a diverse, equitable, and inclusive community, where all are able to meaningfully contribute and thrive.

Purpose

The CoA serves as an advocate for the health, safety, and well-being of the County's older residents. It supports both safety net services for the frail elderly and programs to meet the interests and needs of older adults who want to age in their communities.

Values

Everything the CoA does is guided by compassion, collaboration, reliability, integrity, and respect.

Goals

The goals of the CoA are to:

- Advocate for the safety net for older adults regardless of budgetary pressures;
- Monitor County government programs to increase responsiveness to the needs of older adults;
- Focus attention on the capacity of older adults to participate fully in community life;
- Advocate for the range of support services for older adults who choose to remain independent in their community and/or their own homes ("Aging in Place").

Affordable Housing

Montgomery County is facing serious affordability and supply problems in the rental housing market. As a result, older residents of the County are finding it increasingly difficult to age-in-place in their homes and communities. Older adults are the fastest growing age group in Montgomery County. By 2040 the Montgomery County older adult population (age 60+) is projected to increase from 233,592 to 315,666, an increase of 35 percent. Life expectancy is also increasing, with the population of older adults age 85+ expected to increase by approximately 77 percent between 2019 and 2030.

The County is home to significant numbers of low- and moderate-income older adults: 12 percent of households headed by an individual age 60+ have income less than 150 percent of poverty or \$18,210 per year for a single person. Housing costs are an issue, particularly for renters. For 24 percent of older adult homeowners, housing costs exceed 30 percent of their income; 56 percent of older adult renters spend more than 30 percent of their income on rent. Looking at the income that older adults need to live independently in Montgomery County, the monthly figure for a renter is \$33,840 a year (37 percent higher than the national average), \$44,268 a year for an individual with a mortgage (40 percent higher than the national average), and \$26,568 a year for an individual without a mortgage (31 percent higher than the national average).

Transportation, Driver Safety, and Pedestrian Safety

Transportation enables older adults to maintain independence and quality of life for older adults, but many older residents lack access to convenient affordable transportation, and face obstacles as pedestrians. Older residents who no longer drive, or who never learned to drive, rely on public and other transportation options to get to medical appointments, shopping, and social, educational, religious, and other activities. In some areas of Montgomery County, public transportation is limited or even non-existent. Public options may be difficult for older and disabled residents to access because they are unable to walk from their homes to public transportation locations. Programs such as MetroAccess are helpful but often are perceived as inconvenient or unsafe. Some Montgomery County transportation programs have restrictive eligibility requirements. Many older adults cannot afford taxis, Uber, Lyft or similar options, or cannot navigate their systems. In addition, these ride programs are not always accessible for people with disabilities. Flash Pass, free Ride-On, and other County initiatives are important programs that improve transportation for older adults.

As for driver safety, although the accident rate of older drivers is low compared to those under age 34, road design and markings, especially merge lanes and turn lanes, as well as signage and targeted safe driver education, deserve attention.

In addition, infrastructure improvements for pedestrian safety are needed, particularly for older residents who walk more slowly than the norm and are prone to trip on brick sidewalks, broken pavement, and uneven steps. Traffic light timing for longer "cross times" where older residents live and congregate, as well as safe landing spaces in medians and at major intersections, are critical. Safe and accessible sidewalk, curb cuts and well-lit and maintained pathways would reduce accidents and encourage more older people to walk in their communities.

Assisted Living Affordability and Access

Assisted living facilities provide care to older adults and individuals with disabilities who are having difficulty living independently, but who do not need the daily skilled nursing services provided in a nursing home. Assisted living, however, is expensive, and with few exceptions, must be paid for from personal funds.

According to Genworth's Cost of Care Survey Data from the National Senior Living Cost Index, the price for assisted living in Maryland averages \$5,000 a month, or \$164 a day and \$60,000 a year. Almost all assisted living services are paid for by residents (or their families) out of their personal funds. Medicare does not cover assisted living costs.

While the State of Maryland offers several programs that assist low-income, disabled, and some older adult individuals, eligibility guidelines (financial and medical) are strict and waiting lists are long.

One way to delay the need for older adults to enter assisted living and nursing care is to support them at home and in their independent living environments, doing things such as 1) providing assistance in managing medications, 2) helping vulnerable older adults with daily living strategies, and 3) providing older adults with caregivers.

Caregiver Support

Informal caregivers providing unpaid physical and emotional support for older or disabled family members, friends, or neighbors can themselves experience significant financial, emotional, and physical consequences as a result of their caregiving responsibilities.

According to the 2020 AARP and National Alliance for Caregiving report, 2020 Report Caregiving in the U.S., more than 1-in-5 Americans (21.3 percent) are caregivers, having provided care to an adult or child with special needs at some time in the past 12 months. This totals an estimated 53.0 million adults in the United States, up from the estimated 43.5 million caregivers in 2015. Unpaid caregivers of older, frail, or disabled individuals include spouses, adult children, other family members, friends, and neighbors. They help with physical activities including bathing and dressing, preparing meals, paying bills, shopping, housework, transportation, medication compliance, and often more complex health-related tasks.

Caregivers' savings are eroding: 22 percent exhausted personal short-term savings and 12 percent exhausted long-term savings. Six in 10 caregivers report working while caregiving (61 percent) and the majority have experienced at least one work-related impact (61 percent). Family caregivers face a financial burden caring for a loved one and payment for their services needs to be further explored.

As Baby Boomers age, the number of individuals needing care is expected to far outnumber the number of caregivers; more individuals will need care and there will be fewer family members and friends available to provide that everyday help.

Elder Abuse, Neglect, and Exploitation

Elder abuse is a national issue that is left to local governments to police and protect their most vulnerable residents. According to the National Council on Aging, elder abuse includes physical abuse, emotional abuse, sexual abuse, financial exploitation, neglect, and abandonment. Perpetrators include children, other family members, and spouses – as well as staff at nursing homes, assisted living, and other facilities.

Reliable numbers on the prevalence of elder abuse are hard to come by and different studies have reported inconsistent findings. The National Council on Aging states that at least approximately 1-in-10 Americans aged 60+ have experienced some form of elder abuse. Some estimates range as high as five million older adults who are abused each year. One study estimated that only one in 24 cases of abuse are reported to authorities. Abusers are both women and men. In almost 60 percent of elder abuse and neglect incidents, the perpetrator is a family member. Two-thirds of perpetrators are adult children or spouses.

Social isolation and mental impairment (such as dementia or Alzheimer's disease) are two factors that make older adults vulnerable to abuse. Recent studies show that nearly half of those with dementia experienced abuse or neglect. Interpersonal violence also occurs at disproportionately higher rates among adults with disabilities.

In Montgomery County, Adult Protective Services' investigations increased by 24 percent between FY13 and FY17. Between FY17 and FY18 the increase was 11.4 percent. In FY18, cases of financial exploitation were 34 percent.

Health and Social Services

Montgomery County provides older residents with a wide range of health, recreational, and social services, either directly or through coordination with non-profit and other organizations, and at senior centers, clinics, and other locations. With our increasing older population, however, and the growth in the number of low-income, immigrant, and culturally diverse older adults, the need for these services is growing.

Some important issues that must be continuously monitored for the older population include:

- Hearing loss
- Food insecurity
- Social isolation
- Oral health
- Behavioral health, including suicide prevention

In addition, the County should continue to investigate and implement "Wrap-Around Services" – coordinated, highly individualized and community-based services that support the basic needs of older adults. These services help keep older adults active and healthy as they "age in place."

Quality of Care in Long-term Care Facilities

Often, residents of long-term care facilities in Montgomery County do not all receive the care they need and deserve. State resources for investigating complaints are inadequate, and the County's long-term care ombudsman program, which advocates on behalf of residents, lacks sufficient resources.

A 2014 report by the Maryland-based advocacy organization *Voices for Quality Care* gave several Montgomery County nursing homes a D+ quality rating for three years in a row. In 2017 the Maryland Health Care Commission's Nursing Home Compare website identified approximately one-third of Montgomery County nursing homes as falling "below" or "much below" the national average in overall quality measures. In addition, by the beginning of March 2021 about 23.5 percent of Montgomery County's COVID deaths occurred in nursing homes.

Earlier this Spring the State's Office of Health Care Quality ceased the Memorandum of Understanding between the State and Montgomery County that allowed ten County staff to perform surveys of the County's local skilled nursing facilities. With this move, the State hired seven surveyors for the entire State, with only four conducting skilled nursing facility surveys.

The Long-term Care Ombudsman Program, which is mandated under the *Older Americans Act*, uses staff and volunteers who are trained and certified to advocate for high quality care and protection for nursing home and assisted living residents. The program receives some Federal and State funding, but it is inadequate to meet the need; additional County support is essential.

Social Isolation and Mental Health

For an older person, social isolation can have devastating consequences for physical and mental health. In addition, social isolation increases older adult vulnerability to elder abuse and or fraud.

Social isolation, defined as a lack of meaningful contact with others, has been called a new major silent killer and a public epidemic. A recent report by the National Academies of Sciences, Engineering, and Medicine and funded by the AARP Foundation elevates social isolation and loneliness to the level of health problems, associating them with a significantly increased risk for early death from all causes. Social isolation is a major risk factor for hypertension, heart disease, and early onset dementia, and costs the Medicare program \$6.7 billion in additional spending annually. The report noted that 43 percent of adults age 60 or older in the U.S. report feeling lonely.

The Pandemic Effect: A Social Isolation Report, published in October 2020 by the AARP Foundation and the United Health Foundation, found that for adults age 50 and older who have experienced social isolation during the pandemic, half report feeling less motivated, more than four in 10 (41 percent) report feeling more anxious than usual and more than a third (37 percent) have felt depressed. While social engagement generally is declining across the generations, individuals in the 55-64 age group have weaker ties to family, friends, and neighbors, and are less likely to engage in church/community activities than their counterparts 20 years ago.

A variety of factors can contribute to isolation of older adults, including living alone, mobility limitations, a lack of transportation options, frailty, and lack of opportunity. Especially concerning is the impact of isolation due to language or cultural barriers.

Home and Community Based Services: Access and Affordability

The health status of older Americans has improved over the past several decades. As individuals age, however, the percentage reporting excellent or very good health decreases. Although current research indicates a continued decrease in the disability rate among older adults, 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.

The increase in the overall number of older adults with self-care disabilities needs to be considered in the context of the fact that the vast majority of older adults want to age in their own homes and, if that is not possible, at least in the same community. 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; 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.

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.

Cross Cutting Issues

Diversity: Montgomery County is a minority-majority County; it is important to work with the diverse communities that make up our County. Ways that older adults in these communities could use County assistance and benefit from partnerships with nonprofit organizations that are serving these populations, include: (1) better communications, in language-accessible, print-based material of County programs and services and also County information on radio stations/cable TV programs whose listeners/viewers are from culturally diverse communities; (2) County transportation services that partner with diverse communities' older adult service providers to identify translation needs of the users of the transportation services; and (3) County senior center offerings that are sensitive to diverse cultural dietary needs and cultural programming, to help reduce older adult social isolation.

Communications: Within Montgomery County, there is a wealth of information for older adults but there is not a strong strategy to distribute it consistently. Information about County services, supports, and resources must be easy for older adults and their families to access; the lack of easily available information is consistently cited as an issue by older adults and their families. Making information easier to access could include improvements to the 311 non-emergency phone system, County website navigation, and availability of materials in venues that older adults frequent such as libraries and recreation centers.

Ageism: Ageism is stereotyping of, and discrimination against, individuals or groups because of their age. This may be casual or systematic. It is a bias against older adults that diminishes their contributions to our community and fails to recognize the many contributions they currently make and will make in the future.

Commission on Aging Organization and Core Activities

Commission activities include monthly meetings of the full Commission, the Executive Committee, and each of the four standing committees: Aging in Community, Health and Wellness, Communications, and Public Policy. In addition, task forces are convened to deal with specific issues. Committees explore topics and issues within their scope and identify challenges and gaps in services and supports. These issues may include such things as budget requests for programs for older adults or advocating at the County- or State-level for laws, services, or programs. The committees often present their research to the full Commission for consideration for further action. The CoA also engages in concentrated studies of other age-relevant issues, which in recent years have included affordable housing, hearing loss issues, and the need for financial assistance to help cover the high cost of assisted living. Focus or Task Groups are created as needed to examine discrete issues such as ageism; employment discrimination; and racial equity, dementia services and policing. The CoA also co-produces the monthly County Cable Montgomery program, 50+ in Montgomery County (formerly Seniors Today), which informs the community about issues, programs, and activities for older adults. Commissioner Katie Smith, hosts the program, which is broadcast several times each month and available for on-line viewing.

All CoA meetings are open to the public. In addition, to help inform the Commission's priorities and advocacy, full Commission and committee meetings frequently include invited guests who share their expertise on important topics. Meetings are also attended by representatives from other Montgomery County commissions, boards, committees, departments, and agencies, and interested stakeholders. Several Commissioners serve as liaisons to other relevant organizations and groups.

With the exception of its co-sponsorship of the 50+ in Montgomery County cable television program and discrete community outreach and education efforts, the Commission does not administer or operate programs, or adopt or enact regulations or legislation.

Commissioners are in frequent contact with the County Executive, County Council members, department directors and staff, State and Federal legislators, members of the public, and others to advance programs, services, and policies on behalf of County older adults. At the County level, the CoA provides oral and written testimony on legislative, budget, and program issues and priorities pending before the County Council. In addition, CoA members meet with the County Executive, members of the Council, and executive branch directors; have ongoing communication with department staff; and collaborate with other County boards, committees, commissions, and stakeholders on issues of mutual interest. CoA members also engage with non-profit partners, private sector groups, and other stakeholders to identify challenges and develop solutions.

At the State level, the CoA responds to proposed legislation in the General Assembly and communicates with relevant State agencies and members of the Montgomery County delegation on issues of concern to older adults in the County. Members also testify at County and State hearings.

At the Federal level, the CoA writes letters on priority issues to appropriate Congressional representatives. Members also support Congressional and Executive Branch outreach conducted by national organizations that represent the older adult population on issues affecting Montgomery County residents.

Current Commission Members

Wayne Berman, Neal Brown, Virginia Cain, Elizabeth Carrier, Jean Dinwiddie, Joyce Dubow,
David Engel, Nkiru Ezeani, Arunima Ghosh, Mona Grieser, Morris Klein, Bob Levey, Kendell Matthews,
Nanine Meiklejohn, Yvette Monroe, Ruby Moone, Sibo Ncube, Karon Phillips, Laurie Pross,
Richard Ricciardi, Edgar Rivas, Beverly Rollins, Barbara Selter, Katie Smith, Mary Sweeney, Tho Tran,
Marsha Weber, T. Ryan Wilson, Arthur Williams, Janice Zalen

Enabling Legislation

The Commission on Aging was established by Montgomery County in 1974 pursuant to a requirement of the Federal *Older Americans Act of 1965*, that there be an Advisory Council to the Area Agency on Aging. (42 U.S.C. Sec. 3001 et. seq.; MC Code Article III, Sec. 27-34.)

Among the powers granted to the Commission are the following:

(f) To study and investigate by means of public or private meetings, conferences and public hearings, conditions which may result in unmet needs or in discrimination or prejudice because of age.

(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.

(h) To work to remove the unmet needs or discrimination or prejudice on the basis of age in such areas as housing, recreation, employment, education, community services and related matters. (MC Code Article III, Sec. 27-34)

Commission on Aging Budget Priorities

The CoA develops annual budget priorities that take into consideration the mission set forth in the enabling legislation and information and data from County agencies, elected officials, and outside experts.

FY23 Budget Priorities

- Fund the expansion of in-home care to more older County residents.
- Increase funding to help market/promote services available for older adults.
- Fund the Access HEARS program.
- Restore the items that were cut from the escorted transportation program.
- Expand funding for the Housing Initiative Fund.
- Fully fund the Licensure and Regulatory Nursing Home Inspections Program.
- Fund a fulltime facilitator for the Age-Friendly Montgomery Program.

FY24 Budget Priorities

- Hire one full-time equivalent position within Aging and Disability Services to serve as a Coordinator for older adult communications and outreach.
- Increase funding for In-Home Aide Services for both DHHS staff and contract budgets.
- Monitor progress of the Access HEARS pilot and provide funds if needed.
- Support villages' efforts to improve cost efficiency and equity.
- Conduct a Telecare/Telehealth demonstration project to improve access to healthcare and support.
- Increase funding for mental health outreach for older adults to eliminate waiting lists.
- Provide funding and assign staff to plan a Summit on Aging in 2023.
- Provide funds to conduct the "Passenger Assistance Safety and Sensitivity" certification training.
- Provide gap-filling transportation services to older adults and residents with disabilities.

2021 Commission on Aging Accomplishments

- The CoA continued to meet and advocate for issues facing older adults in Montgomery County even during the throes of the global COVID-19 pandemic.
- The CoA continued to identify, monitor, and develop solutions to problems that older adults face because of the COVID-19 crisis.
- The CoA established a new Communications Committee to raise awareness of both the CoA and County programs for older adults.
- The Health and Wellness Committee developed a "Hearing Loss Fact Sheet" that was distributed to individuals throughout Montgomery County and worked with staff from Access HEARS to develop a pilot proposal for hearing assistance for County older adults.
- The CoA hosted a virtual Legislative Breakfast for members of the Montgomery County delegation to the Maryland General Assembly.
- The CoA lobbied for resources to be included in the County budget for: two additional social worker positions in HHS, one in Adult Protective Services and one in the Public Guardianship Program; legal assistance for older adults to avoid eviction from their homes; expanding senior nutrition programs; increasing funds to raise awareness of older adult services; expanding the Housing Initiative Fund; maintaining and expanding senior adult programs; expanding home- and community-based services to more older adults in the County including residents who are ineligible for Medicaid; funding the Access HEARS Program which would help to supply hearing devices and support to lower income residents; and restoring cuts to the Escorted Transportation Program administered by the Jewish Council for the Aging and expanding financial eligibility for the service.
- Members met individually (virtually) or via conference call with members of the County Council to advocate for older adult programming and resources.
- The Commission Chair testified twice before the County Council through Zoom calls in support of the CoA's budget priorities on issues affecting older adults.
- The Commission advocated to the County Executive, County Councilmembers, and members of the Montgomery County delegation to the Maryland General Assembly for the resolution of problems facing the County due to the termination of the Memorandum of Understanding with the State that enabled County staff to conduct inspections and investigate complaints in nursing facilities within Montgomery County.
- The CoA sent several letters to State and local legislators in support of laws, programs, and services affecting older adults.

Age-Friendly Montgomery

In 2014, the CoA learned about a World Health Organization initiative called Age-Friendly Cities. To learn more about it, the commission conducted a summer study in 2015, and, upon completing its research, recommended that the County enroll in the Initiative. Supported by the County Executive and County Council, the County enrolled in the program via the AARP Age-Friendly Network of Communities that is affiliated with the World Health Organization. This took place at the County's 2015 Summit on Aging.

As a highly collaborative program, Age-Friendly Montgomery plans, implements, and conducts those programs and services that support older residents so that they can live and thrive in Montgomery County throughout their lives. It operates under the framework of the AARP Network of Age-Friendly States and Communities which is designed to help localities in the US and across the globe (through the World Health Organization) prepare for and support the needs of the rapidly growing older population. Several Age-Friendly Montgomery efforts are initiated and undertaken with advocacy by the Commission on Aging.

The Age-Friendly structure has proven to be a highly successful model for cross-government and outside organization work. It shares common interests with the commission and its committees and task forces. The Age-Friendly Senior Fellow, the commission chair, and many commission members regularly participate in the work of these groups.

Difference Between the CoA and Age-Friendly Montgomery. The CoA is an advisory-only body established under the *Older Americans Act*. It does not develop or conduct any programming or services itself. The CoA belongs only to Montgomery County and was 1) in place decades before there was an Age-Friendly movement, and 2) was the driving force behind the County joining the AARP Age-Friendly network.

The Age-Friendly program is part of a national and global network. Montgomery County's participation in Age-Friendly is a public/private partnership between government and the community.

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The CoA is composed of volunteers who are passionate about issues of importance to older adults. CoA members have years of experience working on concerns relevant to older adults and include pharmacists, physicians, lawyers, college professors, former Congressional staff, and executives with the Federal, State, and County governments, as well as advocacy organizations such as AARP and GROWS.

www.montgomerycountymd.gov/coa

