



# Department of Health and Human Services

## Exploring the Issues

**Dr. Odile Brunetto**  
**Chief, Aging and Disability Services**

February 2021



# Description + Target Audience

## ► Description

- This class will provide clinicians and other human service staff with a better understanding of how the County serves older people and people with disabilities. Participants will learn about the overall mission of Aging and Disability (A&D) Services, and the programs offered by the three major areas that comprise A&D. In addition, we will discuss how services to this population are integrated within the Department, and how participants can apply this information to their own practice and client referrals. In addition to PowerPoint presentations, attendees will have the opportunity to interact with presenters as a panel, and participate in group discussions.

## ► Target Audience

- Clinicians, social workers, healthcare and human service workers serving this population, and those seeking a better understanding of programs provided across the Montgomery County Department of Health and Human Services.



# Learning Objectives

- ▶ Discuss current issues affecting the aging population and those with disabilities in Montgomery County.
- ▶ Understand the role of A&D to ensure the safety and well-being of this population.
- ▶ Summarize services provided by Assessment and Continuing Case Management; Area Agency on Aging; and Disability Services Community Service Network.
- ▶ Name three ways this information can be applied to your work and clinical practice.
- ▶ Identify opportunities to collaborate with Aging and Disability Services to provide better client outcomes.
- ▶ Name three community partners who provide A&D program services.

# Aging and Disability Services

## Mission and HHS Guiding Principles

Adopted: March 2, 2004; updated September 11, 2017

**Aging and Disability Services Mission:** Advancing a safe and inclusive community with opportunities for individuals to live well, achieve their potential, and thrive.

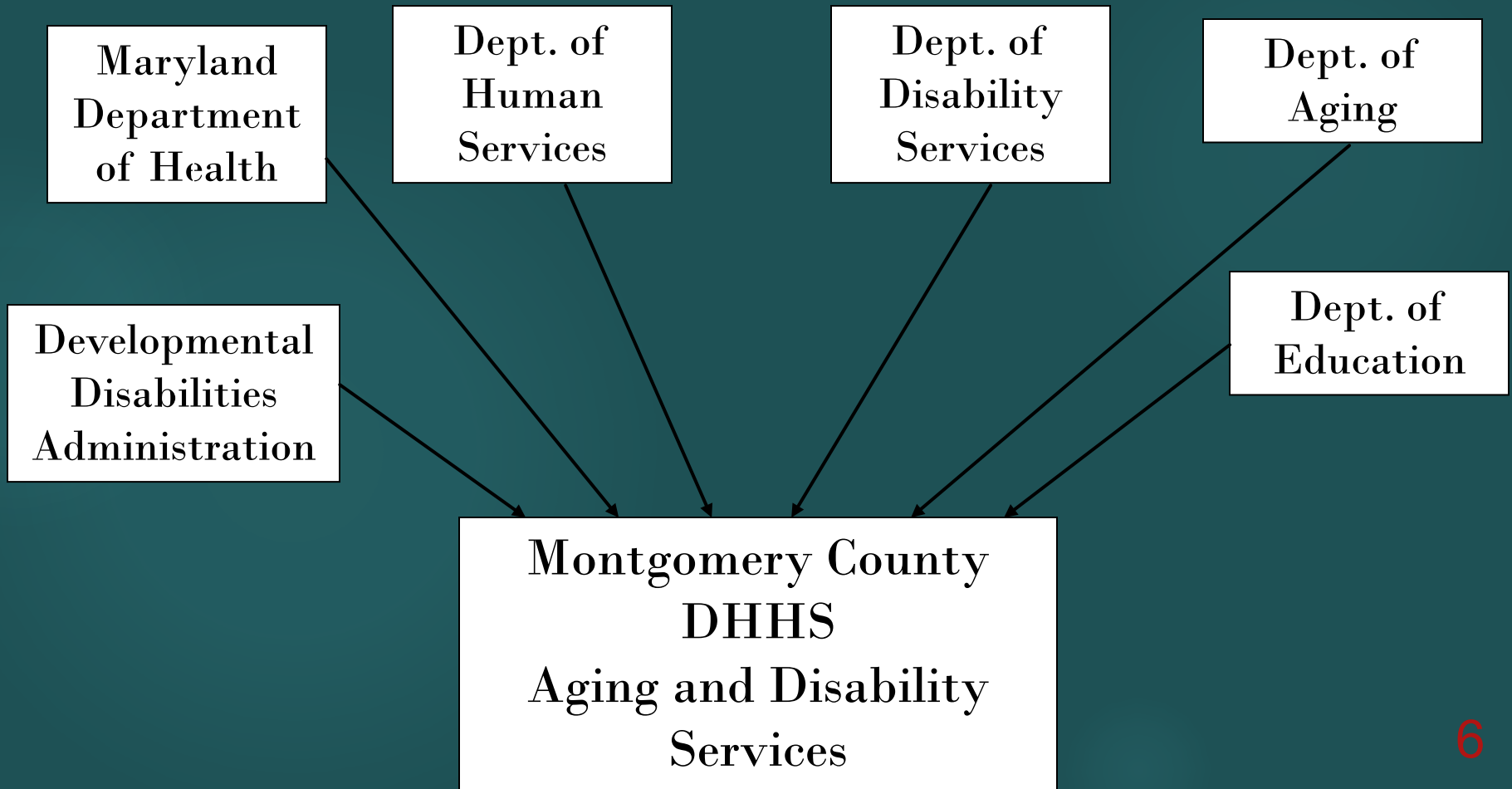
### HHS Guiding Principles:

- We will provide services that build on the strengths of our customers and the community.
- We will be responsive to the changing needs of our community.
- We will recruit and maintain competent, customer service oriented staff.
- We will make operational a “no wrong door” approach to services delivery.
- We are committed to the highest quality customer service for all those seeking services, and hold our staff accountable to demonstrate respect, professionalism, timeliness and fairness.
- We value the skill and dedication of our staff and will provide them with adequate support, resources and training to serve our customers well.

# Aging and Disability Commissions and Advisory Groups

- Commissions
  - Commission on Aging
  - Commission on Veteran's Affairs
  - Commission on People with Disabilities
- Advisory Groups
  - Age-Friendly Montgomery
  - Dementia-Friendly Montgomery
  - Adult Public Guardianship Review Board

# Regulatory and Funding Connection to State Departments



# DEPARTMENT HEALTH AND HUMAN SERVICES (DHHS) / AGING AND DISABILITY SERVICES (A&D)

Point of Entry for Aging and Disability Resource Unit (ADRU) 240-777-3000 (Voice) 240-777-4575 (TTY) 240-777-1495 (FAX)

Raymond L. Crowel, Director

**Mobility and Transportation Mgr.**  
**Shawn Brennan**  
Comm. Outreach Mgr. Gr. 28

**Commission on Aging**  
**Shawn Brennan**  
Community Outreach Manager  
Mgr. Gr. 28

**Villages Coordinator**  
Pazit Aviv, 1 Program Manager. II Gr. 25

**Dr. Odile Brunetto**  
**1 Service Area Chief**  
**MLS M1**  
1 Program Manager II Gr. 25  
1 Executive Admin. Aide Gr. 17

**Senior Fellow-Age Friendly MC**  
Marcia Pruzan, 0.15 FTE Gr. 23

**Commission on People with Disabilities (CPwD)**  
**Betsy Tolbert Luecking**  
Comm. Outreach Mrg. Gr. 28  
1 Admin. Specialist Gr. 18

**Commission on Veterans Affairs (CVA)**  
**Betsy Tolbert Luecking**  
Comm. Outreach Mrg. Gr. 28  
1 Admin. Specialist Gr. 18

**ASSESSMENT AND CONTINUING CARE MANAGEMENT**  
**Mario Wawrzusin, 1 MLS Mgr. 2**  
0.5 Office Services Coordinator (OSC) Gr. 16

**AREA AGENCY ON AGING (AAA) SENIOR COMMUNITY SERVICES**  
**Dr. Patrice McGhee, Director, 1 MLS Mgr. 2**  
1 Office Services Coordinator Gr. 16

**DISABILITIES SERVICES | COMMUNITY SUPPORT NETWORK (CSN)**  
**Kim Mayo, MLS Mgr. 2**  
1 Admin. Specialist II Gr. 21  
1 Admin. Special I Gr. 18

**Adult Public Guardianship Review Board**  
Fiona Graham, 1 Supervisory Social Worker (SSW) Gr.26

**Assistant Administrator**  
**Dr. Kimberly Johnson**  
**1 MLS Mgr. 3**  
1 Program Manager (PM) I Gr. 23  
1 Administrative Specialist II Gr. 21

**Senior Community Programs**  
**David Salem, 1 MLS Mgr. 3**  
1 Office Service Coordinator Gr. 16

**Adult Evaluation & Review Services (AERS) #1**  
**Tonia Powell 1 Nurse Mgr. II Gr. 25**  
8 CHNII Gr 24  
1 FT Contract Nurse  
1 Contract. Program Specialist  
0.5 Office Services Coord. Gr. 16

**My Turn Prog. | Contracts for People w-Disabilities**  
**Eldora Taylor 1 PM II Gr. 24**  
2 Program Specialist II Gr. 21  
1 Office Clerk

**Adult Services Intake (ASI)**  
**Virginia Beckett, SSW Gr. 26**  
5.5 SWIII Gr. 24  
1 SWII Gr. 23  
1 Program Specialist II Gr. 21  
1 Principal Admin Aide Gr. 13

**Adult Foster Care (AFC) and Project Home**  
**Karen Ellis 1 SSW Gr. 26**  
5 SWIII Gr. 24  
1 Office Services Coord. Gr. 16

**A&D Resource Unit (ADRU)**  
**Jennifer Long 1 Prog. Mgr. Gr 23**  
8 Client Asst. Spec. Gr. 20

**AERS #2**  
**Donna Klein 1 Nurse Mgr. II Gr.25**  
8 CHN II Gr 24  
2 PT Contract Nurses  
1 Contract Program Specialist  
0.5 OSC Gr. 16

**Group Home Site Visits and Contracts**  
1 Program Specialist II Gr. 21

**Adult Protective Svcs. (APS) #1**  
**Denise Bruskin-Gambrell**  
**1 SSW Gr. 26**  
7 SWIII Gr. 24  
1 Comm Health Nurse (CHN) Gr 24  
0.5 Office Services Coord. Gr 16

**Home Care Services Merit Personal Care Case Mgt Contract**  
**Dr. Kimberly Johnson**  
**1 SSW Gr. 26**  
1 CHN II Gr. 24  
7 Comm. Serv. Aides III Gr. 18

**Senior Nutrition Program**  
**Carol A Craig, 1 Prog Mgr. II Gr. 25**  
Vacant, 1 PM I Gr. 23  
1 Office Serv. Coord. Gr. 16  
0.5 Office Services Coord. Gr. 16

**Long-Term Care Ombudsman**  
**Eileen Bennett, 1 PM II Gr. 25**  
4.5 Prog. Mgr. I Gr. 23  
1 SWIII Gr. 24  
1 Office Services Coord. Gr. 16

**Coordination of Community Svcs.**  
**Rosemary DiPietro 1 PM I Gr. 23**  
1 Quality Assurance Lead Wkr.  
10 Prog. Spec. II Gr. 21  
1 Office Services Coordinator  
2.5 Contractor

**APS #2**  
**Julia McGlamary 1 SWIV Gr. 26**  
8 SWIII Gr. 24  
0.5 Office Services Coord. Gr 16

**Home Care Services Contract Supervisor**  
**Nina Chaiklin 1 SSW Gr. 26**  
1 Program Specialist II Gr. 21  
1 Prin. Administrative Aide Gr. 13  
Self Employed Providers

**AAA Budget and Contracts**  
**Lisa Yang, 1 PM II Gr. 25**

**Senior Group Home Subsidy**  
**Lisa Peet, 0.5 Prog. Mgr. I Gr. 23**

**Health Promotion Program**  
**Tina Purser Langley, 1 PM II Gr 25**

**Autism Waiver**  
**Karen Gipson, 1 PM Gr. 23**  
6 Program Specialist II Gr. 21  
1 Contract Staff

**Guardianship/APS**  
**Fiona Graham, 1 SWIV Gr. 26**  
8 SWIII Gr. 24  
1 CHN Gr 24  
0.5 Office Services Coord. Gr 16

**Senior Care and Adult Day Care**  
1 Sr. Care SW III Gr. 24  
.75 Sr. Care Fiscal Asst. Gr. 16

**Community First Choice (CFC)/Support Planning**  
**Peter Flandrau, PM II Gr. 26**  
4 Prog. Specialist II Gr. 21  
4 Contract Staff  
1 Office Services Coord. Gr. 16

**AAA Data and Evaluation Mrg.**  
**Dr. Erin Smith, 1 PM I Gr. 23**

**Caregiver Supports**  
**Lylie Fisher, 1 PM II Gr. 25**

**Customized Employment**  
29 Interns, Gr. 1

**Sign Language Services**

**Respite Care**

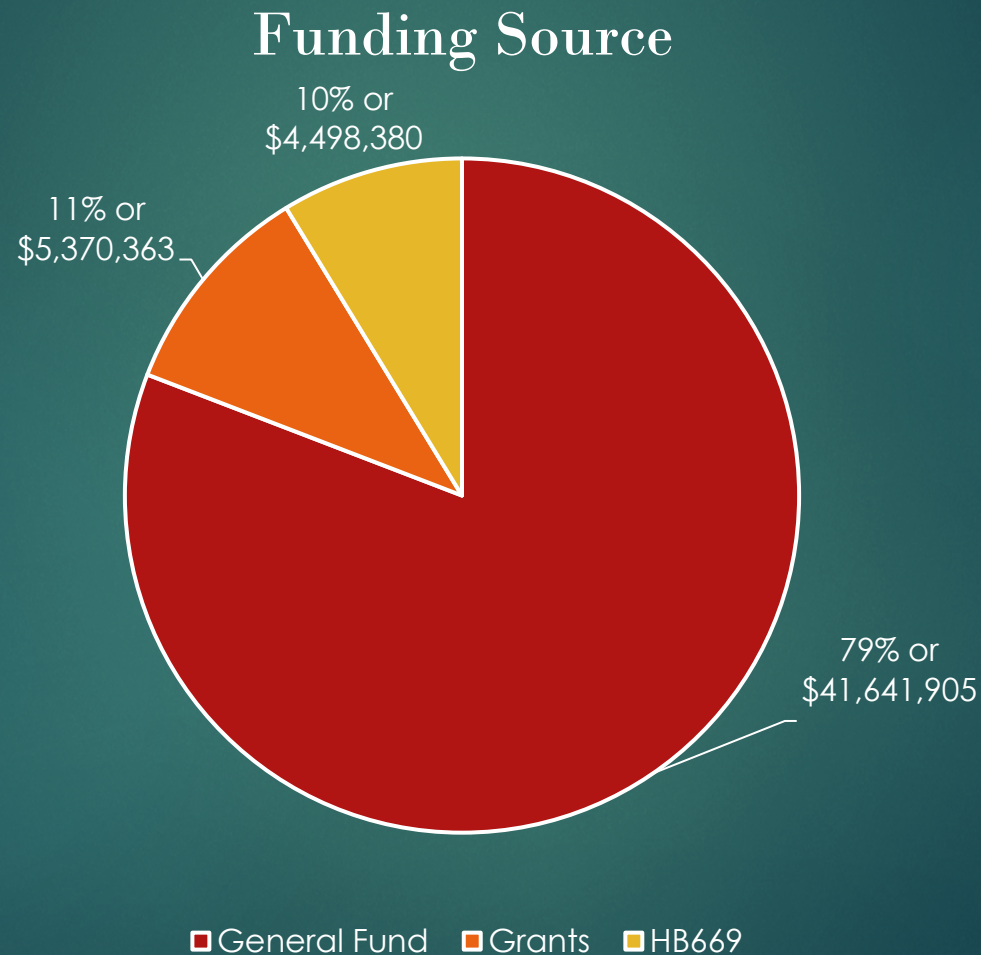
**Social Services to Adults (SSTA)**  
**Marsha Aaron 1 SWIV Gr. 26**  
6 SWIII Gr. 24  
2 Sr. Care SW III Gr. 24  
1 Office Services Coord. Gr. 16

**CFC/Nurse Monitoring**  
**Chris Shao, Nurse Mgr. Gr. 25**  
**Stella Akuchie, Nurse, Mgr. Gr. 25**  
2 Billing Specialist Gr. 21  
1 PAA Gr. 13

Last Update 11.10.2020



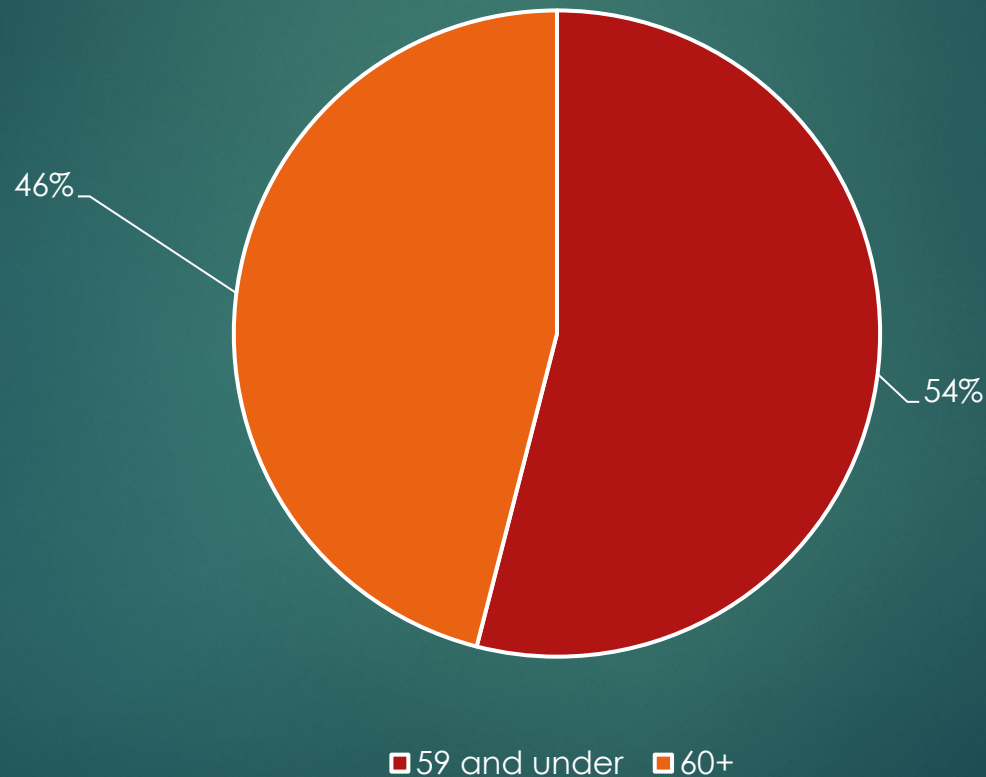
# FY19 A&D Funding (by Funding Source)



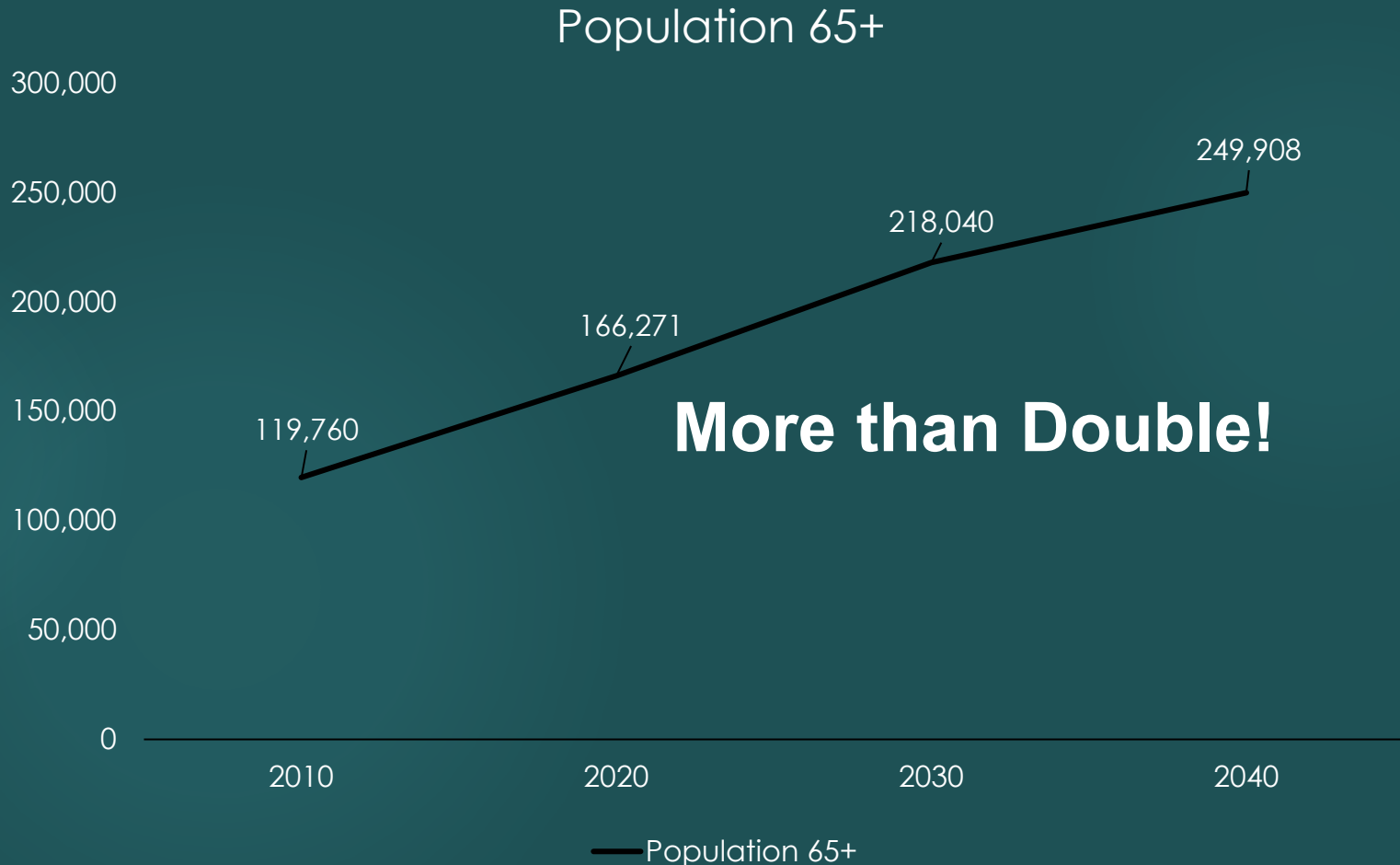


# FY19 A&D Distribution of Funding (by Population Served)

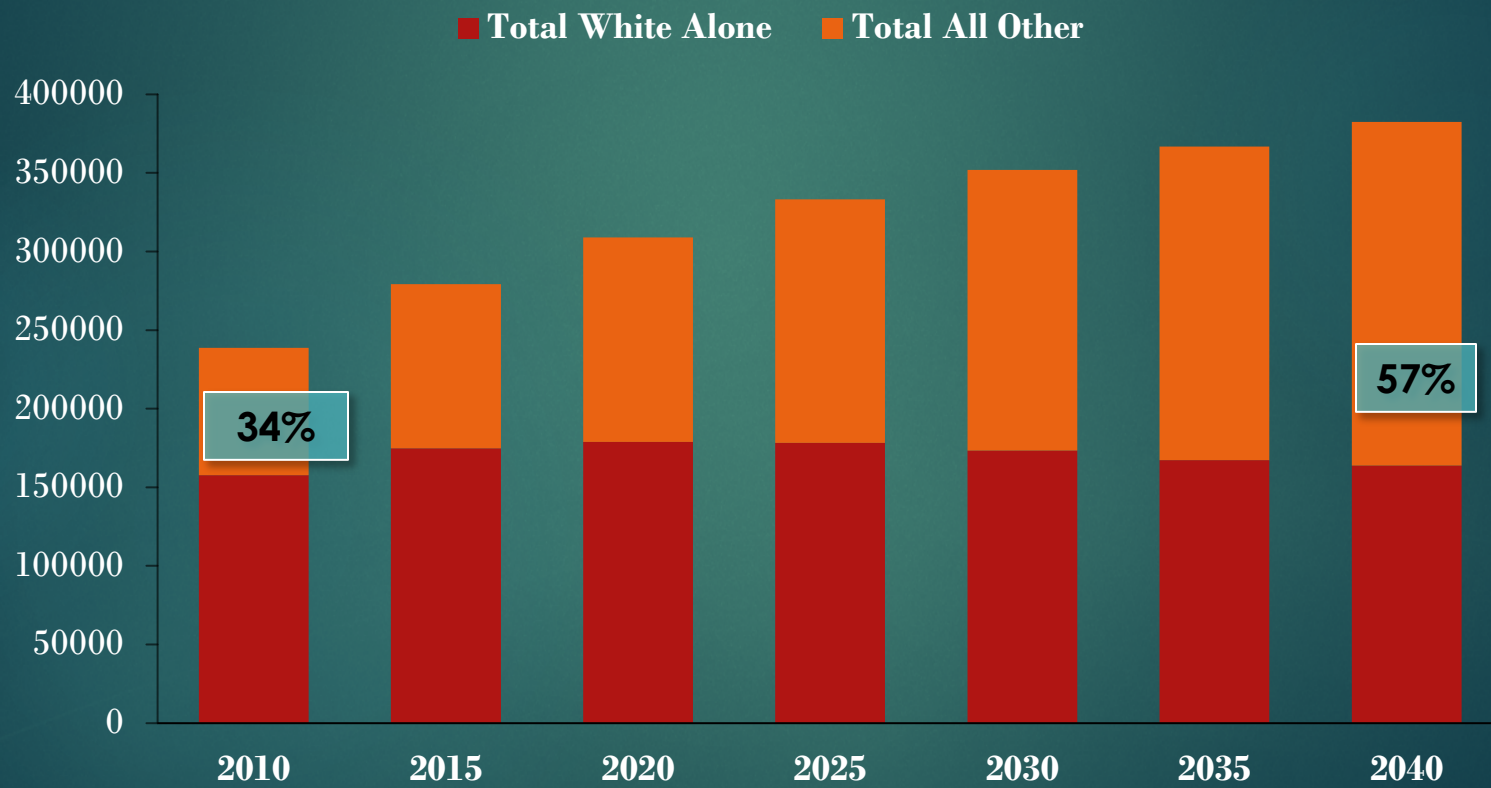
## Funding breakdown by Age Group



# Projected growth in Montgomery County's Older Population

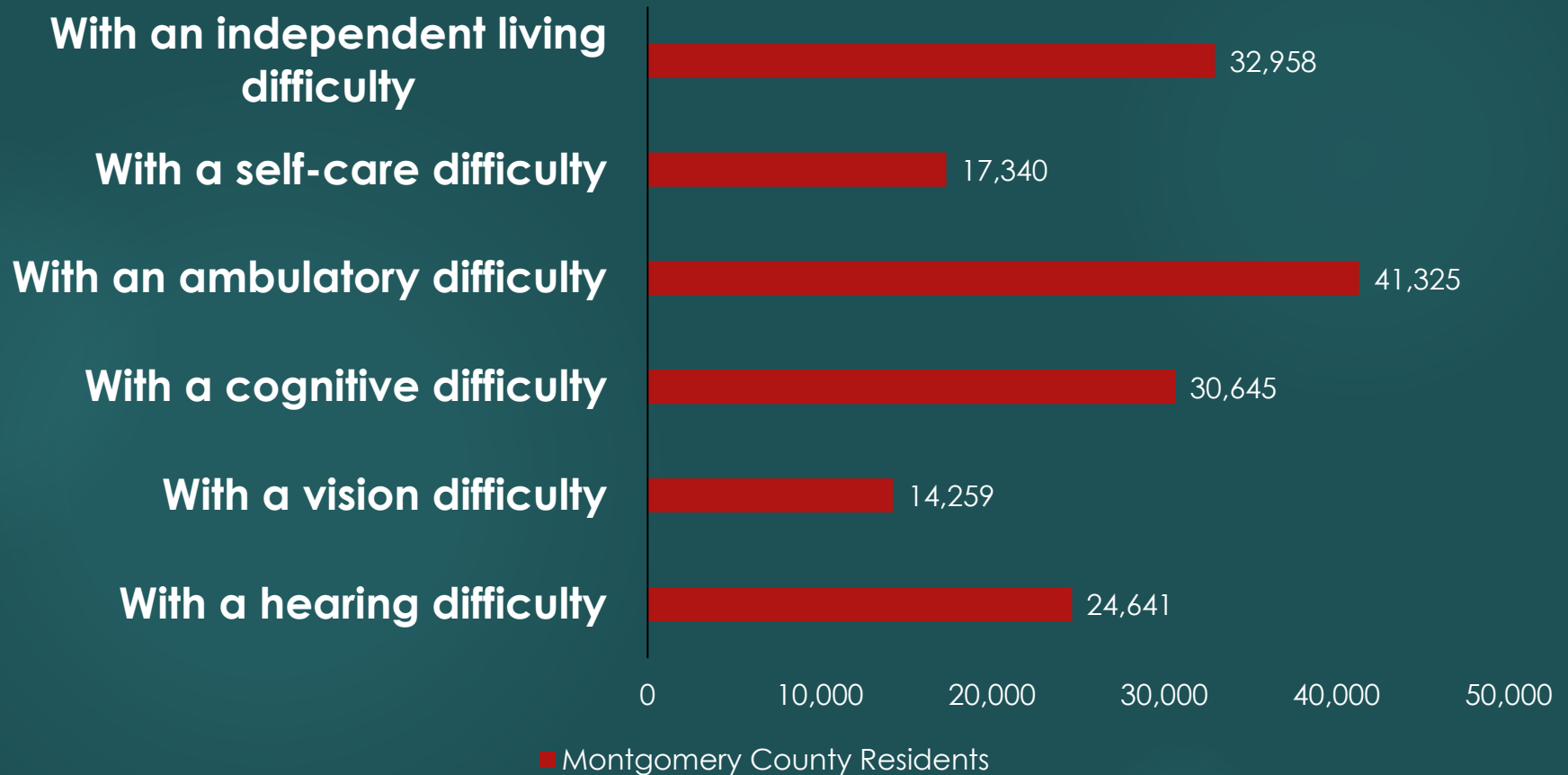


# By 2040, nearly 60% of 55+ adults will be part of a minority group



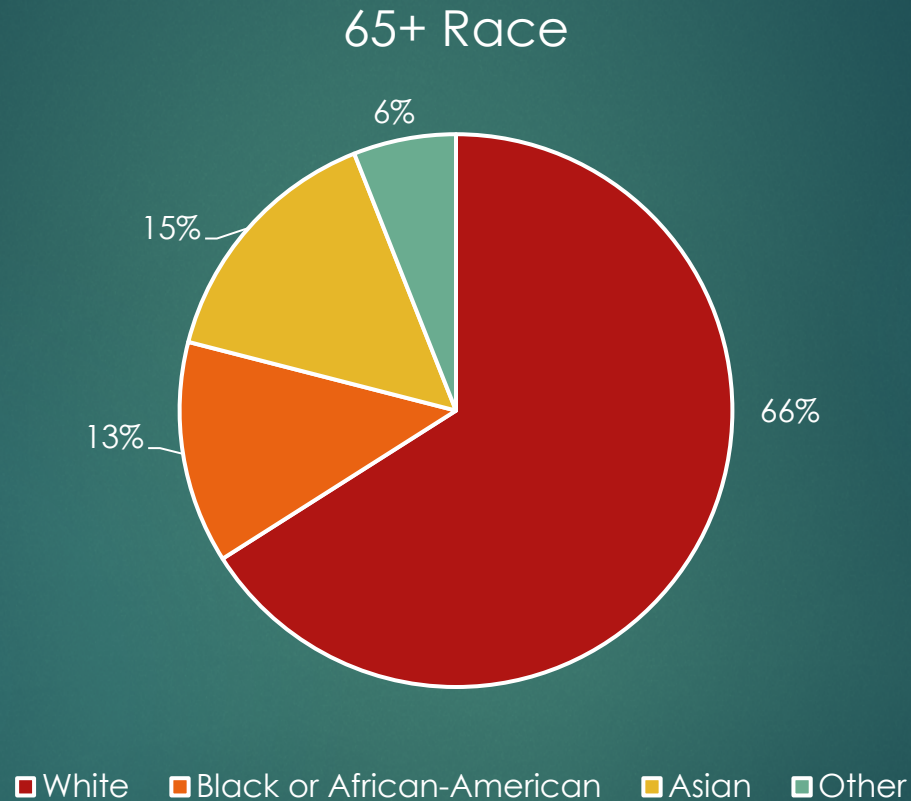


# Disability Types and Rates in Montgomery County Based on 2017 American Community Survey Supplemental Estimates



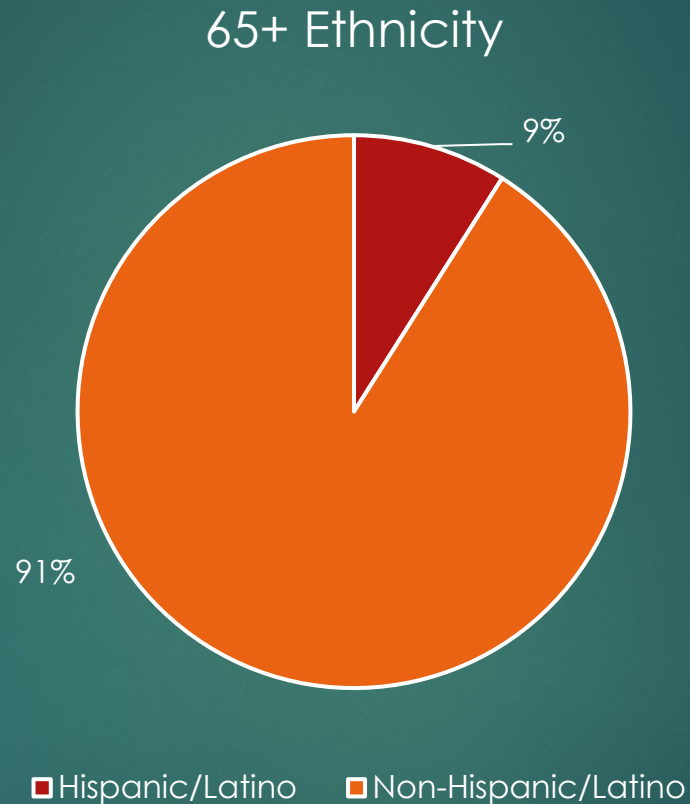
# Diversity in Montgomery County

American Community Survey, 2017



# Diversity in Montgomery County

American Community Survey, 2017

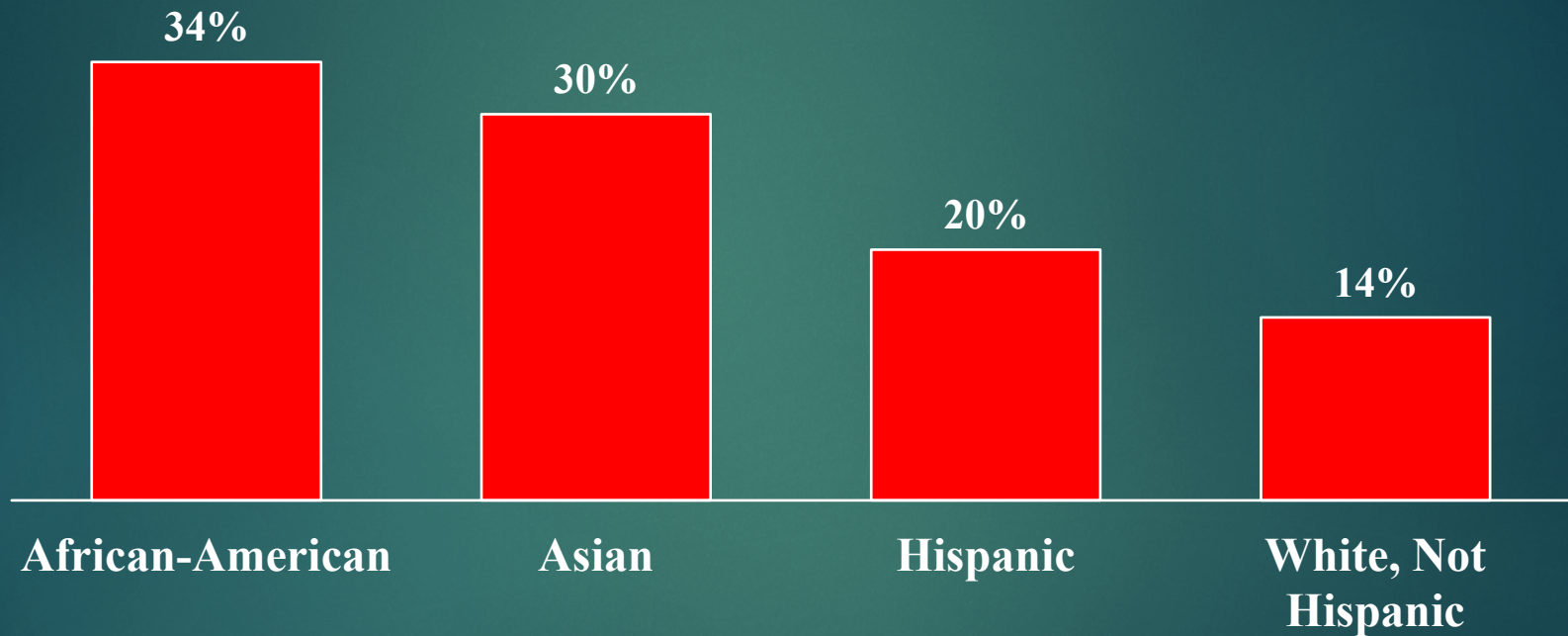




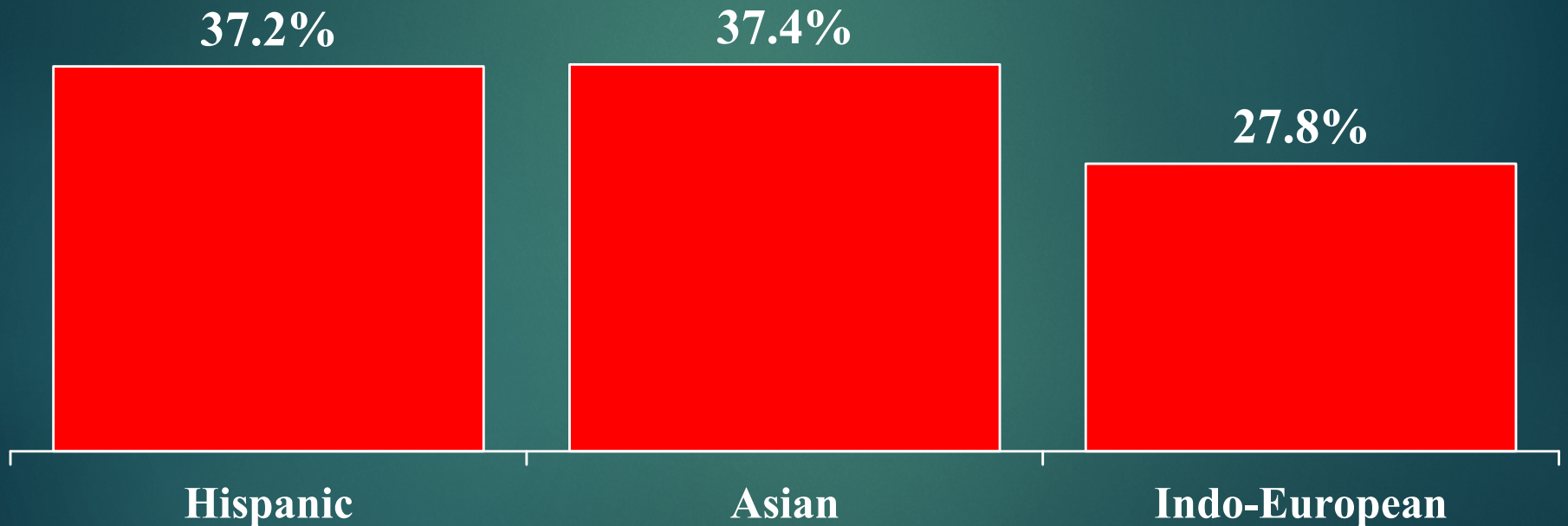
# Ethnic/Racial Minority Seniors More Likely to Have Inadequate Income

## Annual Household Income Below \$25,000

American Community Survey, 2016

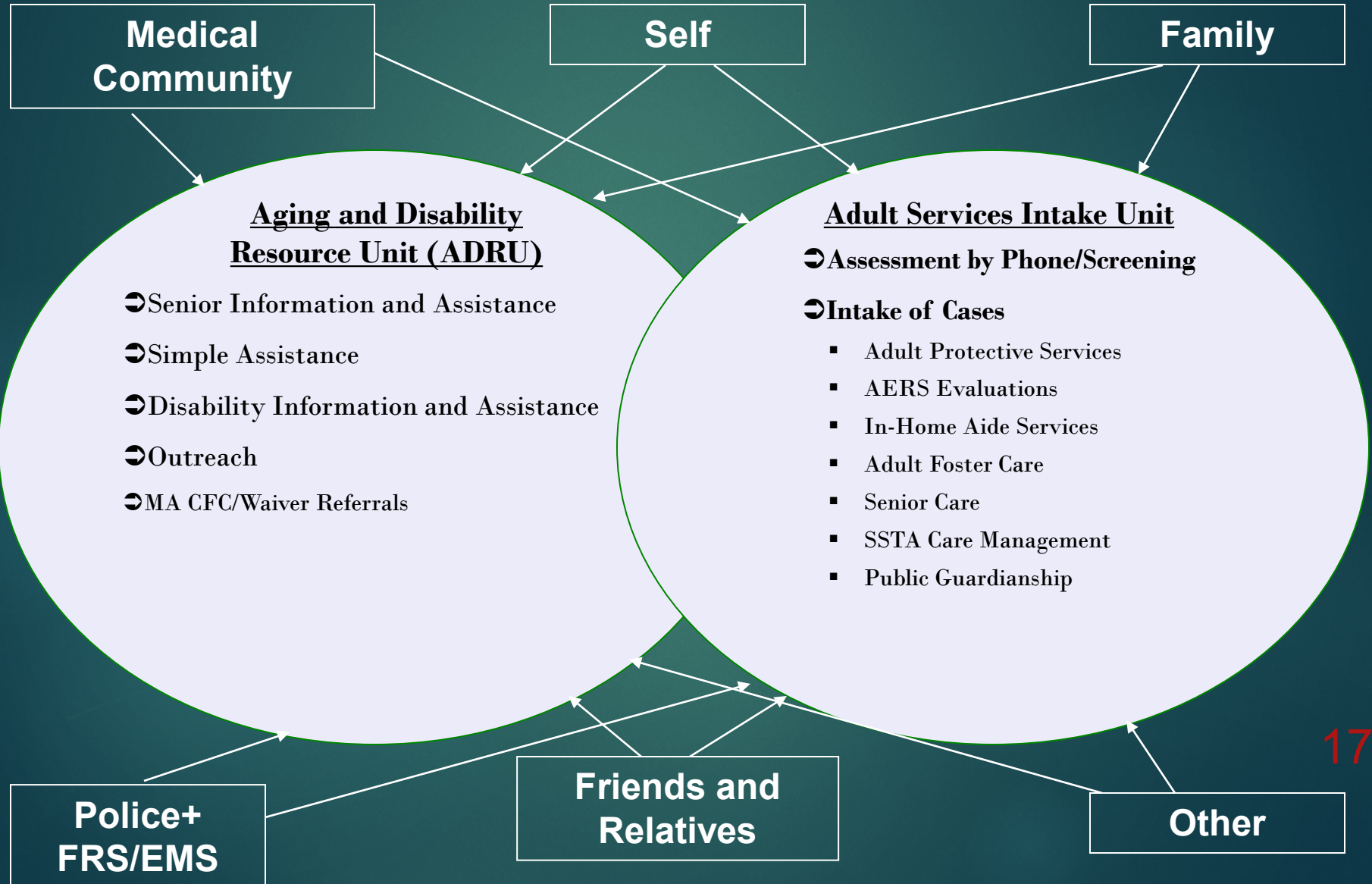


# Limited English Proficiency High Among Ethnic Older Adults



2016 American Community Survey: 65+ who speak English “not well” to “not at all”

# Assessment, APS and Care Management Services





# Assessment Services



# Assessment and Continuing Case Management Video

<https://youtu.be/6LM1aRMbduw>

Start watching @ beginning and go until 4:20



# Adult Protective Services (APS)

- State Mandated (Article 14 of the Maryland Annotated Code)
- Vulnerable Adults
  - 18 years and older
  - Lacks the physical or mental capacity to provide for their daily needs
  - Unable to make and/or implement a plan of care
  - Unable to remove self from dangerous situation

APS Unit Investigates  
allegations of

Abuse

Neglect

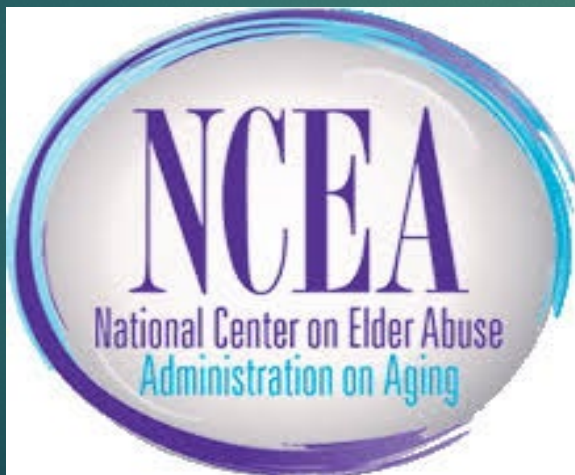
Self-Neglect

Exploitation



# What is Elder/Vulnerable Adult Abuse?

In general, elder/vulnerable adult abuse refers to intentional or neglectful acts by a caregiver or “trusted” individual that lead to, or may lead to, harm of a vulnerable adult.



# NATIONAL DATA





# SELF-NEGLECT:

is the inability of a vulnerable adult to provide for his/her physical or mental health and well-being;

## Indicators:

- ❖ Unsafe living environment
- ❖ Individual stops bathing and grooming
- ❖ Individual losing weight
- ❖ Individual not getting medical care
- ❖ Isolates self





# Exploitation:

any action which involves the misuse of a vulnerable adult's funds, property or person



## Indicators:

- ❖ Unusual banking activity
- ❖ Lack of amenities victim could afford
- ❖ Missing checks, credit cards, and or belongings
- ❖ Changes in purchasing pattern
- ❖ Newly authorized P.O.A., transfer of property
- ❖ Caregivers has control of vulnerable adults money, but is failing to provide for their needs

# NEGLECT:

Is the willful deprivation of a vulnerable adult from adequate food, clothing, medical treatment, shelter, or supervision

## Indicators:

- ❖ Unsafe living environment
- ❖ Poor bathing, grooming and dirty clothes
- ❖ Vulnerable adult losing weight
- ❖ Inadequate medical care
- ❖ Isolation
- ❖ Person with dementia left unsupervised





# ABUSE:

Sustaining of any physical injury by a *vulnerable* adult as a result of cruel or inhumane treatment or as a result of a malicious act by a person

## Indicators:

- ❖ Unexplained bruising
- ❖ Injuries about the head and face
- ❖ Strangulation
- ❖ Fractures
- ❖ Burns
- ❖ Wounds / decubitus ulcers
- ❖ Force Feeding, Restraints, Medications







# WHAT SHOULD I DO IF I SUSPECT ABUSE?

**Report Your Concerns to: 240-777-3000**

*(Mandated reporters are police, health practitioners, or human service workers)*

Include in your report to APS:

- Name, age, location/address of victim
- Describe what you observed
- Who was involved
- Who can APS contact to learn more
- APS reporters remain anonymous unless specified otherwise



# PRINCIPLES



- ❖ Adults have the right to be safe.
- ❖ Adults retain all their civil and constitutional rights unless a court adjudicates otherwise.
- ❖ Adults have the right to make decisions that do not conform with societal norms as long as these decisions do not harm others.
- ❖ Adults have the right to accept or refuse services.





# WHAT APS CAN DO?



- ❖ Examine all aspects of reported maltreatment
- ❖ Collaborate with client (+ family as appropriate) to maintain their independence, in the least restrictive environment.
  - Develop a case plan
  - Advocate with other agencies: utilize a multi-disciplinary approach
  - Arrange in-home services



# MONTGOMERY COUNTY ELDER/VULNERABLE ADULT ABUSE TASK FORCE





# WHAT APS CANNOT DO



- ❖ APS CANNOT force services on a person who has capacity to consent.
- ❖ APS CANNOT involuntarily remove someone from their home.
- ❖ APS CANNOT provide services for which there are no available resources.
- ❖ APS CANNOT enforce the law.
- ❖ APS CANNOT reveal identity of reporter.





# CAPACITY TO CONSENT



- ❖ Can the client understand relevant information?
  - Do you know that you have a serious cut on your leg?
- ❖ What is the quality of the client's thinking process?
  - How can you get treatment for your wound?
- ❖ Is the client able to demonstrate and communicate a choice?
  - Do you want to get treatment for your wound?
- ❖ Does the client appreciate the nature of his/her own situation?
  - What will happen if you don't get your wound treated?





# MYTHS AND FACTS

- ❖ Myth #1: Referrals to APS usually result in nursing home placement.
  - Fact: APS focuses on the least restrictive intervention possible. Whenever, possible services are provided in the victim's home.



**GUARDIANSHIP:** Court determination that a person with severe disabilities requires a medical /property decision maker

### Competency

- ❖ Ability to make and communicate informed decisions regarding ones finances and/or health care

### Requires

- ❖ Two certificates, by a physician, psychologist or clinical social worker
- ❖ Decided in a court of law

### Enforceability



# What other agencies work with Adult Protective Services?

- ▶ The State's Attorney's Office
- ▶ Law Enforcement (Family Crimes Unit)
- ▶ Department of Aging
- ▶ Department of Health
- ▶ Licensure and Regulatory Services
- ▶ Office of Health Care Quality
- ▶ Attorney General's Office
- ▶ County Attorney's Office
- ▶ Housing Code Enforcement
- ▶ Animal Control
- ▶ Local hospitals, home health agencies, private for profit/not for profit agencies, faith communities



# Social Services to Adults

Provides assessment and case management to vulnerable adults so as to prevent unnecessary institutionalization; prevent or avoid abuse, neglect, and/or exploitation.

## Eligibility:

- Adults 18 or over
- Functional disability
- Assets less than \$20K, +\$3000 for each additional family member
- Other financial resources reviewed to determine level of need

## Case Management Services:

- Comprehensive Assessment of needs and functioning
- Information and Referral
- Voluntary program
- Crisis Intervention
- Coordination and monitoring of Services received from community and government programs

## Waitlist

- Referrals for SSTA Assessment are triaged and placed on a Waitlist prior to assessment (Current SSTA Waiting List 298).
- Referrals come from 7-3000, eICM Referral, and from APS investigations directly

# SENIOR CARE

Statewide service program providing eligible seniors with gapfilling funds to purchase products and services necessary to help them remain in their homes or the least restrictive placement in the community.

## ALLOWABLE EXPENDITURES:

- Adult Day Care
- Medications
- Transportation
- Home Delivered Meals
- Emergency Response System
- Medical Supplies and Equipment
- Others: Glasses, Dental Emergency,
- 20% Co-Pay for Medicare

## ELIGIBILITY CRITERIA

- **Age:** 65 and over
- **Disability:** Moderate or Severe
- **Residence:** within Montgomery County
- Risk of institutionalization or more restrictive placement
- **Financial Criteria:**
  - Individual Annual:** \$34,092 or less, **Assets:** \$11,000 or less
  - Couple Annual:** \$44,580 or less, **Assets:** \$14,000 or less

## WAITLIST:

- Maintained due to high demand for gap-filling funds
- Applicants scored based on level of need and length of time on Waitlist



# Home Care Basic Facts

- FY19 Budget: \$4.4 million
- In FY18, Home Care served a total of 279 clients
  - **77% frail seniors**
  - **23% adults with disabilities**
- Client Profile: low income, moderate to severely disabled adult, who lives alone and is isolated, with minimal family/caretaker assistance
- Average vendor cost per client who receives personal care annually is \$10,348
- Approximately 269 clients who receive personal care are served monthly
- Clients receive an average of 8-9 hours of personal care services weekly. (Statewide average is 6 to 8 hours weekly)
- Waiting List information:
  - **the Home Care personal care waiting list averaged 59 clients monthly**



# Eligibility for Home Care

An individual is eligible for In-Home Aide Service (IHAS), if the individual (has a need for the service based on an ADL [Activities of Daily Living] score and a prioritized ranking triage score) and:

- is receiving case management services;
- is unable to secure the service from another resource -
  - Medicare
  - Private insurance
  - Family
  - Community First Choice (MDH)
  - Other Community Resources;
- is willing to accept the service; and
- agrees to pay an assessed fee.

COMAR 07.06.12.03

# COMMUNITY RESIDENTIAL SERVICES/ADULT FOSTER CARE

## Purpose

Community Residential Services, Adult Foster Care Program (AFC) provides ADL care to adults with disabilities, and frail elders, in family homes or in Assisted Living Homes, as a lesser restrictive alternative to nursing homes.

## AFC/PH Eligibility

1. 18 years or older, Montgomery County resident
2. Typical referrals are via APS
3. Requires supportive housing which includes ADL care, room and board, and protective oversight, due to a disability which renders the individuals unable to live independently.
4. Does not require services beyond capacity of the AFC program.
5. AFC providers typically cannot meet the following needs:
  - Volatile behavior patterns
  - Active alcohol and drug usage/treatment
  - Awake overnight supervision
6. Applicant agrees to pay toward the cost of AFC placement from personal income and resources.
7. County funds must be the fund of last resort
  - Verification of income and assets must be provided.
  - Applicant must apply for all benefits for which they are eligible such as Social Security, Medical Assistance, Medicare, Medicare D, Public Assistance to Adults (PAA), Metro Access, CFC Waivers.
  - Applicant or current client in placement must apply for and accept appropriate supportive housing available in the Public Mental Health system or The Developmental Disabilities Administration.



# The “Balancing Act”

**PROMOTING THE VITAL  
AND  
PROTECTING THE  
VULNERABLE**



# Area Agency on Aging (AAA)

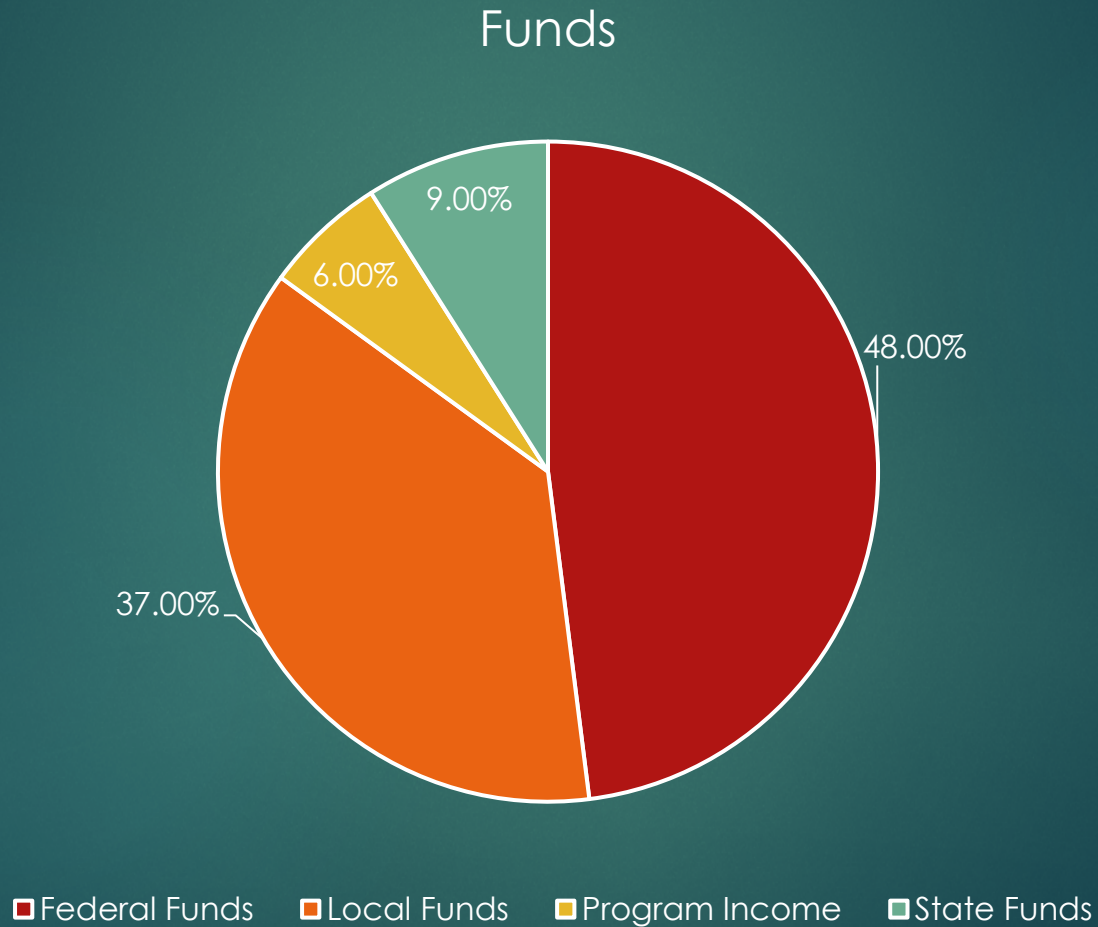
- AAAs were established under the Older Americans Act (OAA) in 1973 to respond to the needs of Americans 60 and over in every local community.
- Provide a range of options that allow older adults to choose the home and community-based services and living arrangements that suit them best.
- The OAA is expected to be reauthorized by Congress in 2019.

# Commission on Aging

- The Commission on Aging (CoA) was established in 1974, and has operated under the County Executive since 1987.
- The CoA was created 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 governments and the community to be more responsive to the needs of the County's older residents
  - Also serves as the advisory council to the Area Agency on Aging as required by the Older Americans Act
- The CoA operates with several committees, 28 commissioners serve on the CoA.
- All activities of the CoA are open to the public.
- The CoA meets monthly except during the summer when they conduct summer studies.
- CoA has a webpage and a Facebook page.



# Area Agency on Aging Funding





# Area Agency on Aging Programs

- Aging and Disability Resource Unit (ADRU)
- Adult Evaluation and Review Services (AERS)
- Senior Nutrition Program
- Long Term Care Ombudsman Program
- Supports Planning Agency
- Group Home Subsidy Program
- Health Promotion Program
- Villages Program
- Mobility and Transportation Program
- Community First Choice Nurse Monitoring
- Caregiver Supports Program

# Area Agency on Aging Programs

- Caregiver Supports Program

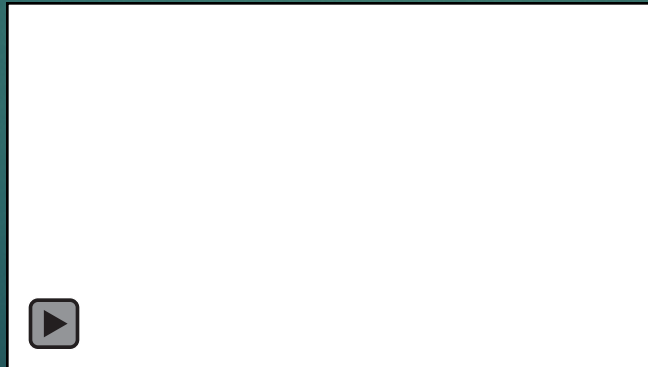
[https://archive.org/details/Did\\_You\\_Know\\_67\\_-\\_Montgomery\\_County\\_Caregiver\\_Support\\_Program](https://archive.org/details/Did_You_Know_67_-_Montgomery_County_Caregiver_Support_Program)

@ 35 Seconds until 4:10

- Bone Builders Program

<https://www.youtube.com/watch?v=VX0PfE566LQ>

- Transportation





# Area Agency on Aging Contracted Service

- Alzheimer's Association - Telephone helpline and community education for caregivers and individuals affected by dementia
- Adventist Healthcare + Holy Cross Health – Self-Management of Diabetes Workshops and other chronic diseases
- Jewish Council for the Aging – Employment programs for older people (SCSEP, Employment Expo, and Career Gateway); Interages and related programs (a volunteer tutoring program); Escorted Transportation; SHIP
- Legal Aid Bureau – Legal services for older people
- Every Mind - Friendly Visitor Program; Representative Payee
- Senior Connection – Transportation and Grocery Shopping Service
- Mobile Dentist – Basic dental services and dentures
- Respite Services of Montgomery County – Respite care
- Nurse Monitoring – Potomac, Advanced, Visiting Angels, Specialty, Candid

Community Services for Adults and People with Disabilities provides select services that are essential for eligible participants to remain healthy and well-cared for outside a skilled-nursing facility.

### **PERSONAL CARE AND SAFETY**

- ▶ Case management
- ▶ Personal care aide and nurse monitor
- ▶ Assisted living services
- ▶ Medical day care

### **DAILY LIVING SUPPORTS**

- ▶ Dietician/nutritionist services
- ▶ Home delivered meals
- ▶ Environmental assessment
- ▶ Accessibility adaptation
- ▶ Assistive devices and DME/DMS
- ▶ Behavioral consultation
- ▶ Family or consumer training
- ▶ Senior Center Plus

### **HEALTHCARE**

- ▶ Medicaid acute, primary, and preventive services
- ▶ Pharmacy services
- ▶ Medicare Part A, B, and D premiums paid
- ▶ Medicare co-payments and deductibles paid

Older adults are able to live safely at home or in an assisted living setting



Availability is limited in the CFC program, and there are only two ways of accessing services.

- ▶ Individuals with Community Medicaid can call and initiate the process to confirm eligibility and receive services through the Community Personal Assistance Services and Community First Choice programs. Individuals seeking the Community Options Waiver level of services would need to apply in one of two ways:
  1. After having Long-Term Care Medicaid in a nursing facility for 30 days- apply for the Community Options Waiver program and seek a transition back into the community.
  2. Receive an application from the State based after being selected from the Waiver Registry. There are ~23,000 names on the registry and the State is now sending out Waiver applications to 300 people/month from the registry based upon date of entry.
- ▶ Potential participants can add their names to the CFC Registry (CO Waiver only) by calling 1-844-627-5465 (toll-free) or 1-240-777-3000 for a Level One Screen. Residents with Community Medicaid can call the numbers and initiate the request for services right away (at the CPAS or CFC level).

# Age-Friendly Montgomery

- ▶ A community that is designed to meet the changing needs of all County residents, with a focus on our rapidly growing and diverse older population.
- ▶ Recognized as an age-friendly community in 2015 by World Health Organization (WHO) and AARP.
- ▶ Ten work-groups devised to match up with WHO/AARP Domains with members from government, non-profits, and businesses
  - ▶ Civic and Social Involvement
  - ▶ Communication and Outreach
  - ▶ Elder abuse prevention
  - ▶ Employment
  - ▶ Transportation and Mobility
  - ▶ Housing
  - ▶ Health and Wellness
  - ▶ Home and Community-Based Services
  - ▶ Planning, Outdoor Spaces, and Buildings
  - ▶ Senior Public Safety



# Dementia Friendly Montgomery

- ▶ Montgomery County was recognized a Dementia Friendly community in 2015
- ▶ Dementia Friendly America, “is a multi-sector collaborative on a mission to foster ‘dementia friendly’ communities
- ▶ Montgomery County HHS has partnered with BrightFocus Foundation and the County’s public safety team to support caregivers and their families
- ▶ Developed a speaker’s bureau to reach out to businesses in the County.

# Aging in Place

## Vital Aging

- Employment
- Civic and Social Engagement
- Volunteerism
- Sports and Recreation
- Arts and Humanities
- Leisure Activities
- Life Long Learning

Villages  
NORCS  
Information &  
Referral  
Case Management

## Vulnerable Adults

- Home and Personal Care
- Respite Services
- Nutrition Services
- Paratransit
- Adult Day Services
- Assisted Living
- Skilled Nursing Facilities
- Medical Care
- Income Support Services
- Home Modification



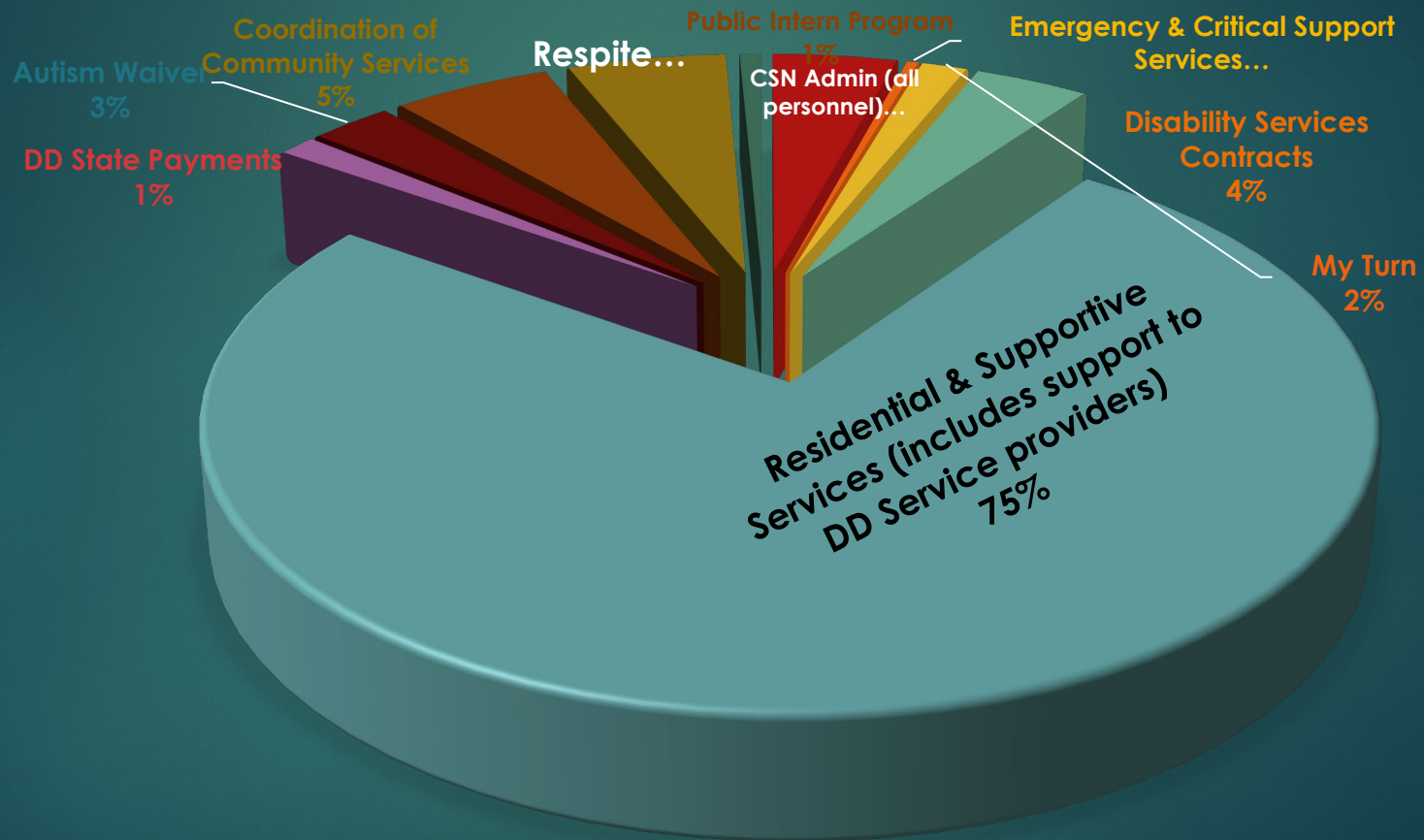
# CSN PROGRAMS

- My Turn
- Autism Waiver
- Coordination of Community Services
- Support to Developmental Disabilities Providers
- Respite Services
- Contracts and Outreach Services
- Customized Employment



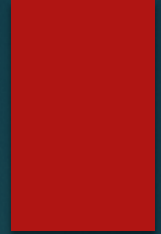
# CSN FY19 budget by program

TOTAL CSN BUDGET: \$23,534,684



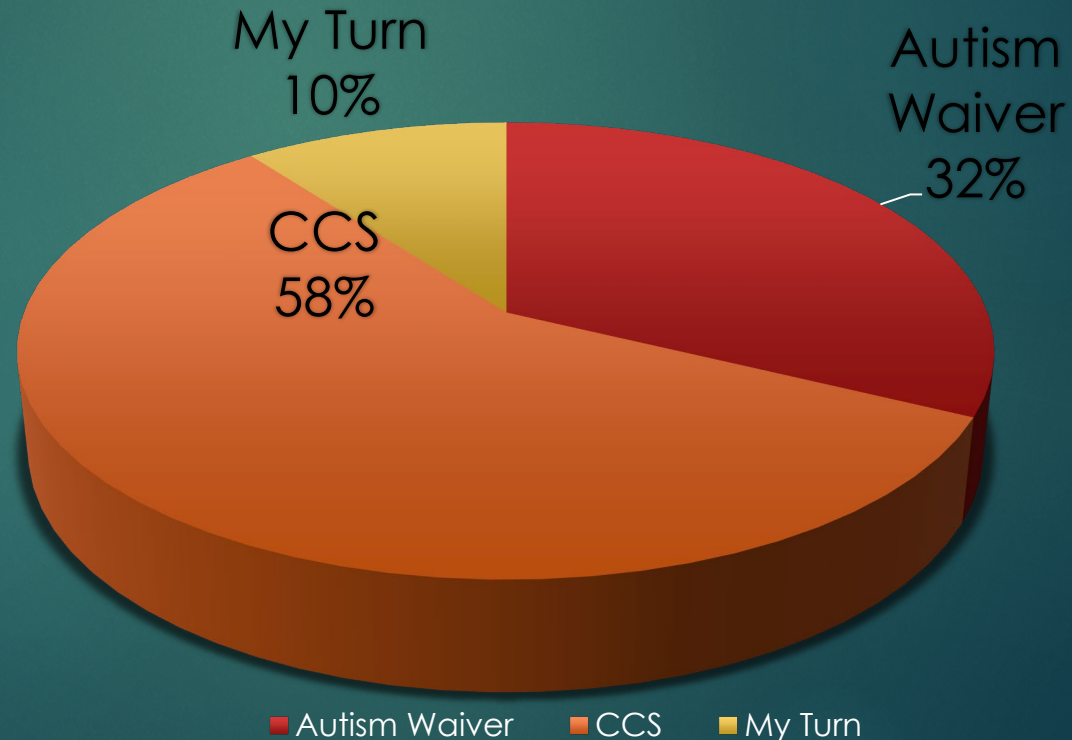


# CSN Client breakdown by program as of September 2018



Total CSN clients: 829

## CSN Clients by Program



# My Turn

Eldora Taylor, Program Manager , x7-1173

- My Turn - supports families with children (ages 3 to 13) who have a developmental disability
- The goal is to link the family and the child to available resources that will establish a circle of community supports





# My Turn Program Eligibility

- They must reside in Montgomery County and meet the following eligibility criteria:
  - Children must have a diagnosed developmental disability as defined by the State of Maryland Developmental Disabilities Administration.
  - A severe chronic disability that is attributed to a physical or mental impairment other than the sole diagnosis of mental illness or a combination of mental and physical impairments.
  - The disability is likely to continue indefinitely and results in an inability to live without external supports.
  - Must provide current IEP and psychological

# My Turn

## How to Access?

- Any family residing in Montgomery County who is caring for a child diagnosed with a developmental disability (that is not receiving long term funding through any county or State programs) may call for an intake interview.
- Referrals can be made to the program from school personnel or professionals in the community currently working with the children.

Montgomery County Department of  
Health and Human Services

Community Support Network

240-777-1216





# Autism Waiver Program

Karen Gipson, Program Manager, x7-4266

- Service Coordination is provided via a contract with Montgomery County Public Schools to provide case management services for children approved and enrolled in the Autism Waiver Program
- In order to obtain Service Coordination, the child must be approved through MDH/MSDE
- Links enrolled children up to age 21 and their families to services





# Autism Waiver Program

## Program Eligibility

- Must be determined “technically” eligible
- Financial Eligibility – based on the child’s income and resources. MDH determines financial eligibility
- Medical Eligibility – by a licensed Psychologist or Certified School Psychologist



# Autism Waiver Program

## How to Access?

- There is a waiting list to access the Autism Waiver. Many children are on the AW registry (waiting list) for years before a space becomes available.
- No assessment done before children are placed on the waiting list.
- Montgomery County's AW Program is currently serving 266 children.



# Coordination of Community Services

Rosemary DiPietro, Program Manager,  
x7-4589

- Provide case management for persons on the Waiting List for services as well as for persons receiving services funded by the Developmental Disabilities Administration (DDA)
- Coordination of Community Services (CCS) Program assists individuals with intellectual/developmental disabilities and their families in learning and gaining access to resources in their community, planning for their future, and accessing needed services and supports
- Role of CCS has changed in recent years because of DDA's Transformation Plan including the transition to Person Centered Plans
- MCDHHS' CCS Program has a client cap of 500 clients



# Coordination of Community Services

## Eligibility

Maryland State Law [Health General ‘ 7-101(e)] defines developmental disability as a severe chronic disability that:

- is attributable to a physical or mental impairment, other than the sole diagnosis of mental illness, or to a combination of mental and physical impairments;
- is manifested before the individual attains the age of 22;
- is likely to continue indefinitely;
- results in the inability to live independently without external support or continuing and regular assistance; and
- reflects the need for a combination and sequence of special, interdisciplinary, or generic care, treatment, or other services that are planned and coordinated for that individual.

# Coordination of Community Services

## How to access?

- Contact DDA's Southern Maryland Regional Office at 301-362-5100
- Complete written application
- CCS completes a “Comprehensive Assessment”-
  - Personal interview and secure documentation of disability from applicant
  - Prepare & submit report to the DDA Regional Office

*DDA makes the determination of eligibility*



# Coordination of Community Services

## Service Categories

The CCS program provides case management services to the following client categories:

- Waiting List
  - Crisis Resolution
  - Crisis Prevention
  - Current Request
- Ongoing Services

# Coordination of Community Services

## Transitioning Youth

- ▶ DDA-funded services are not an entitlement. Funding for TY services comes, in part, from one of DDA's three federal waiver programs: Community Pathways, Family Supports, or Community Supports. Waivers allow the DDA to provide specific services through funding from the federal Centers for Medicare and Medicaid Services (CMS). Transitioning Youth comprise a special category of eligibility and priority for services
- ▶ Additionally, the Governor's Transitioning Youth Initiative (GTYI) earmarks funds in the DDA budget for eligible students leaving school. This initiative, in collaboration with the Division of Rehabilitative Services (DORS), has been able to fund supported employment and other day services for eligible graduating students who otherwise may not have received DDA services.
- ▶ CCS staff assist families as they transition from the school system into the adult system. The age of transition begins at 14 and ends at 21.





# Coordination of Community Services

## New DDA Waivers

### Family Supports Waiver

Provides individual and family supports for children birth to 21 with developmental disabilities that are on the DDA Waiting List. The waiver is capped at 400 individuals with a budget cap of \$12,000 annually

### Community Supports Waiver

Provides supports for individuals of all ages with developmental disabilities that are on the DDA Waiting List. The waiver is capped at 400 individuals with a budget cap of \$25,000 annually.

# Respite Services

- Respite services are currently provided via a contract with the Arc Montgomery County
- Provides temporary relief and support for the primary unpaid caregiver who provides ongoing care to frail elderly persons, children and adults with disabilities, and/or children with severe medical or behavioral needs.
- If you have clients in need of respite – call 301-816-9647 to begin the application process.
- Once the application is completed and returned, the staff work with the families to locate the most appropriate provider. Financial subsidies are available on a sliding scale.





# Respite Services

## New Policy Changes (effective July 2018)

- ▶ Current Respite Clients that are receiving in-home supports via **state funded programs** - Keep the hourly cap the same for them but end services mid -year:
  - ▶ Those receiving more than 40 hours/week of support will have access to 48 hours until December 31, 2018 and will no longer be eligible for county respite services.
  - ▶ Those receiving 40 hours or less of support/week will have access to 140 hours for until December 31, 2018 and will no longer be eligible for county respite services.
- ▶ In addition, no new in-home state paid programs (Autism Waiver, Community First Choice, REM, Community Pathways/New Directions, Family Supports Waiver, Maryland Community Supports, etc.) are eligible to apply for county respite services effective July 1, 2018.

# **Financial Assistance to DD Providers**

## **Eldora Taylor, Program Manager, x7-1173**

**The County provides financial assistance to 32 DDA licensed providers who support residents with developmental disabilities in the following services:**

- Day/Supported Employment
- Residential
  - Personal Supports, ALU

**The FY19 budget includes a total of \$17.5 million**


**Budget pressures as a result of increasing minimum wage**




# Contracts and Outreach Services

- Sign language interpreting services
- Transportation
- Mentoring and Companion Services
- After school care and camps
- Community Inclusion/advocacy
- Media services/Community Integration for the visually impaired
- Group Home Site Visits





# Customized Employment Public Intern Project



- An initiative to create flexible work opportunities for individuals with significant disabilities to fulfill work requirements of County Departments.
- Utilizes customized employment techniques to create a true match between the department's needs and the interests of the job candidate with the disability
- Positions are part time and temporary (anywhere between 2-18 hours/week - not to exceed 900 hours within 2 years of work)



# Work Group on Meeting the Needs of Residents with Developmental Disabilities

73

- ▶ Council requested the creation of this group in Resolution #18-989.
- ▶ Workgroup met throughout the summer and early fall to discuss issues and develop recommendations
- ▶ Resulted in a report that includes system wide recommendations and white papers on several topics including Coordination of Community Services, Employment, Housing, and Recreation



Thank You!

Questions?