

HHS COMMITTEE #1
November 18 and 19, 2020

MEMORANDUM

November 16, 2020

TO: Health and Human Services Committee

FROM: Vivian Yao, Legislative Analyst

SUBJECT: **Meeting with Boards and Commissions**

The Health and Human Services (HHS) Committee will discuss policy priorities with Chairs of Health and Human Services Advisory Boards, Committees, and Commissions on November 18 and November 19. Raymond Crowell, Director, Department of Health and Human Services, has been invited to both meetings.

In a letter dated September 29, 2020, Committee Chair Albornoz invited the chairs to attend these meetings and requested that they identify their top two policy priorities. A sample copy of the letter is attached at ©1. The invitation letter stated that this worksession would be an opportunity to discuss policy priorities of mutual concern.

To accommodate all representatives and allow time for discussion, each Board or Commission spokesperson is asked to limit comments to three minutes.

A chart listing each group, its chair(s) or designated representative, the date scheduled for the group's presentation, and the reference number for each policy priority statement is provided on the following page. The individual commission and board statements begin at ©2.

Presentations from the represented groups will be heard in reverse alphabetical order. The order of presentations rotates from alphabetical to reverse alphabetical order from year to year in an effort to be equitable to participating groups.

DHHS ADVISORY BOARDS & COMMISSIONS

<u>Representative</u>	<u>Group</u>	<u>Presentation Date</u>	<u>Circle #</u>
Kathryn Pontzer	Victim Services Advisory Board	11/19	2-3
Wayne Swann	Montgomery Cares Advisory Board	11/19	4
Garrett Mannchen	Mental Health Advisory Committee	11/19	5-8
Monica Escalante	Latino Health Initiative	11/19	9-10
Jeff Goldman	Interagency Commission on Homelessness	11/19	11-12
Jody Burghardt	Early Childhood Coordinating Council	11/18	13-14
Tiffany Jones	Community Action Board	11/18	15-17
Wayne Miller	Commission on Veterans Affairs	11/18	18
Seth Morgan	Commission on People with Disabilities	11/18	19
Chris Jennison	Commission on Juvenile Justice	11/18	20
Desiree de la Torre	Commission on Health	11/19	21-22
Rena McPherson	Commission on Children and Youth	11/18	23
Lindsey Allard Agnamba	Commission on Child Care	11/18	24
Dr. Jean Dinwiddie	Commission on Aging	11/18	25-26
Marci Roth	Citizen Review Panel Advisory Group	11/18	27
Marquette Rogers	Board of Social Services	11/18	28
Dr. Nguyen Nguyen	Asian American Health Initiative (AAHI)	11/19	29-30
Margaret Mattson	Alcohol & Other Drug Abuse Advisory Council	11/19	31
Jacqueline Williams	African American Health Program	11/19	32-34



MONTGOMERY COUNTY COUNCIL

GABRIEL ALBORNOZ
COUNCILMEMBER AT-LARGE

September 29, 2020

Desiree de la Torre, Chair
Commission on Health

Dear Ms. de la Torre:

On Wednesday, November 18, and Thursday, November 19, the Health and Human Services (HHS) Committee will meet virtually from 8:30 a.m. to 10:30 a.m. to discuss how the County's advisory boards and commissions can further the County's policy priorities. The attached schedule shows which day each group will be presenting. I invite you to participate in your role as chair in this roundtable discussion. I have also invited Dr. Raymond Crowell, Director of the Department of Health and Human Services, to participate in the discussion.

My colleagues on the Health and Human Services Committee are interested in hearing the policy issues of concern for your group in FY21. To accommodate all groups and allow time for discussion at the meeting, one spokesperson from each board or commission will be asked to speak for no more than three minutes. Likewise, the Committee is interested in communicating to you our policy priorities. By the end of our discussion, I hope that we will have identified work plan issues that blend our mutual priorities for vital health and human services.

In preparing for this meeting, please submit your board's top two policy priorities by Tuesday, November 10, to Vivian Yao, Legislative Analyst, at vivian.yao@montgomerycountymd.gov. Please limit your remarks to one page. Priority statements will be compiled and published on the Council's website (www.montgomerycountymd.gov -- follow links to the County Council) by the evening of November 16. A link to the meeting will be disseminated to speakers prior to the start of the meeting.

The HHS worksession is a public meeting, and commission members and Executive staff are welcome to listen to the meeting online. If you have any questions, please call Ms. Yao at 240-593-1866.

Sincerely,

A handwritten signature in black ink, appearing to read "Gabe Albornoz".

Gabe Albornoz
Chair
Health and Human Services Committee

C: Evan Glass, HHS Committee Member
Craig Rice, HHS Committee Member
Raymond Crowell, Director, DHHS
DHHS Commission Staff

*Health and Human Services Committee
Work Session on Policy Issues*

Date: 11/3/2020

B/C/C Victim Services Advisory Board (VSAB)

B/C/C Representatives: Kathryn Pontzer and Juanita Rogers

The Victim Services Advisory Board (VSAB) has spent much volunteer time to survey victim-centered needs in the County and has identified funding priorities that we have routinely shared with you on an annual basis. Thank you for allowing us to serve.

One of VSAB's priorities the past few years has been advocating for additional staff for HHS Trauma Services, which are the Victim Assistance and Sexual Assault Program (VASAP) and the Abused Persons Program (APP). We recognize that these are not ordinary times. There has been a lot of covid relief spending while revenue and other taxes are down. We worry about the impact of this on the budget for VASAP and APP.

As you know, VASAP serves victims of a broad range of crimes, including rape, sexual assault, sex and labor trafficking, homicide (surviving family members), driving while intoxicated, vehicular manslaughter, bullying, terrorism, hate violence, stalking, assault, battery, burglary, vandalism and many more. APP serves victims of intimate partner violence. Among the broad scope of services, these programs are responsible for operating 24-hour crisis outreach for victims of sexual assault and domestic violence at hospitals and police stations; the Betty Ann Krahnke (BAK) emergency shelter for victims of domestic violence, sexual assault and human trafficking; individual and group counseling and support groups; accompaniment and support for victims during legal procedures with the police, state's attorney's office and other county agencies; assistance in applying to the Maryland Criminal Injuries Compensation Board and processing of crime victims compensation losses through the Montgomery County Crime Victims' Compensation Fund; and operations of the Safe Passages Center for supervised visits and monitored exchanges as well as the domestic violence male offender program, i.e., Abuser Intervention Program.

Consider the Impact of the Pandemic on Services for Victims of Crime

The impact of the pandemic on these programs is alarming. For the staff, the demand for help from victims has almost doubled in the past year. Specifically, in comparing the data for January to June 2019 with that for the same period in 2020, there has been a 91% increase in Intakes. The severity of the cases has become more critical with an increase in homicides, domestic violence, sexual violence, and more reports of strangulations. As of October 28, the Gun Violence Archive has recorded [15,437 homicides](#), murders, and unintentional gun-related deaths for 2020, already exceeding the total recorded for 2019. Montgomery County's homicide rate is up 167% compared to the same time last year. The police also report a 10.7% increase in rapes and more cases in hospitals involving child abuse. (<https://wjla.com/news/local>, Sept. 9, 2020) While calls to police for domestic violence are down, the police indicate that it may be more difficult for victims to call for help as they are locked down with their abuser. For those cases that have been investigated, they are concerned with the increase in violence. (<https://wtop.com/montgomery-county>, Oct. 16, 2020) Since April, the National Sexual Assault Hotline has found similar trends on a national and local level, including Montgomery County, where more than half of those accessing the Hotline were minors. Nearly 7 in 10 minors (68%) discussed concerns about being in a confined space with their perpetrator and 1 in 5 discussed barriers to disclosing abuse due to shutdowns and school closures. Victims of crimes in the County rely on APP and VASAP. It is anticipated that there will be an even greater demand in the upcoming year for APP and VASAP services.

Crime victims in the County have faced two obstacles because of covid --- the fear of accessing services and becoming infected, and the temporary closure of building services. Although APP and VASAP have never closed and have been providing telework intakes/assessments and counseling at an unprecedented rate, the number of victims seeking help for sexual assault and domestic violence injuries at Shady Grove

Adventist Medical Center is down, as well as the number of victims seeking shelter at BAK. VASAP staff have been working to get information to victims that these two services at the hospital and at the shelter are safe. Safe Passages has re-opened for supervised visitation on the premises, and maintained monitored exchanges throughout the pandemic. There is a waiting list of over 150 male domestic violence offenders waiting to participate in the domestic violence Offenders Program. Victim Assistants are not yet allowed to return to the courts during phase II of Montgomery County's re-opening, however they have teleworked 100% of the time serving crime victims during the pandemic.

Maintain Staffing Levels for HHS Trauma Services

Enhancing the staffing levels and resources for both VASAP and APP has been a priority for VSAB for the past few years. Now with anticipated budget cuts throughout HHS, we are very concerned with maintaining staffing levels. In 2012, three victim assistant (VA) positions were transferred from VASAP/APP to the Family Justice Center (FJC). VAs are important to both FJC and VASAP/APP operations, but there are critical differences. One important distinction for victims is that only the VAs from VASAP/APP can assist victims of crimes in the courtroom. They assist victims in District Court with both peace and protective orders and in Circuit Court with criminal and family law cases. Because the FJC is part of the sheriff's office, there is an inherent conflict of interest, precluding FJC VAs from appearing in court. Also, VASAP/APP, as part of HHS, are required to comply with confidentiality rules and are not subject to discoverability rules, and therefore can provide privacy assurances to victims that FJC, as part of the criminal system, cannot provide. Because of these differences, it is important to maintain a system where victims of crimes have access to help through various points of entry in the County. The County support structure for victims of crimes should include a range of access opportunities that are safe and viable for victims.

VSAB requests that you address the escalation and severity in victim crimes in the County during the pandemic by maintaining the resources, funding levels and staffing for both the Victim Assistance and Sexual Assault Program (VASAP) and the Abused Persons Program (APP).

Provide Housing for Victims of Domestic Violence

Funding one-year bridge housing and creating a system for prioritizing domestic violence victims' access to long-term housing has been a top priority for VSAB since FY 2014. VSAB was instrumental in getting bridge housing with case management services established at two Fleet Street properties for DV victims and their families until lead was discovered requiring the houses to be shut down. VSAB will continue to advocate for a permanent source of bridge housing for DV victims with case management services; a change in the County's existing policy concerning DV victims who are seeking County assistance vouchers by changing the VI-SPDAT Vulnerability Index to allow more housing options to be available to DV victims; and encouraging the Interagency Commission on Homelessness (ICH) to provide guidance for applicants who wish to obtain DV bonus funding from the U.S. Department of Housing and Urban Development as part of the Continuum of Care grants.



HHS Committee Breakfast with the DHHS BCC's Montgomery Cares Advisory Board Position Statement November 18, 2020



Overview

The Montgomery Cares Advisory Board (MCAB) provides guidance to the County Executive and County Council, which financially and operationally support the health care safety net for uninsured, low-income residents of Montgomery County. The MCAB is focused on ensuring that with the support of our essential partners, including the Primary Care Coalition, the area hospitals, the County DHHS, and the exceptional capabilities of the clinics themselves, the provider network is strong, costs are minimized, and efforts are taken to acquire new resources to ensure that needy County residents receive high quality primary care services.

In Fiscal Year 2020, the MCAB focused on programmatic gaps, budgetary concerns and monitoring the current COVID-19 pandemic effect on residents accessing care. The MCAB continues to focus on its scope and mission covering programs of the Health Care for the Uninsured unit including: Care for Kids, Maternity Partnership, Dental Services, Health Care for the Homeless, as well as the Montgomery Cares program. We are in a time of health-care transformation where activities focus on improvements in coordinated and continuity of care.

Policy Priorities

The Montgomery Cares Advisory Board has identified specific priorities for each program however the following are the overarching goals that will guide the Board in FY21:

- 1. Reducing/Eliminating Barriers to Access Care given COVID-19:** This has become increasingly important as residents are facing challenges with eligibility, attending appointments and managing telehealth/telemedicine. Additionally, the political climate is affecting our most vulnerable residents from seeking and obtaining necessary healthcare.
 - Related to this, MCAB has been closely monitoring program utilization and data within the programs. A few of the Montgomery Cares clinics have become COVID-19 testing sites for all County residents and face workforce issues with clinic staff out due to the pandemic.
 - Identify Synergies in the Healthcare for the Uninsured Programs: The MCAB will assess priority issues that affect all programs operationally such as access, eligibility/enrollment, outreach and data needs. Streamlining issues into core priorities provides a defined framework that we can present for advocacy and education. Although we will focus on overarching matters, the MCAB will also review each program individually focusing on their critical mission and functions independently.
 - Additionally, the MCAB continues its focus on ensuring that core primary care services meet patient demand while expanding other services such as specialty care, immunizations and COVID-19 and flu testing for this vulnerable population.

- 2. Identifying Synergies and Improving Quality:** The MCAB is emphasizing the need to have data and performance measures that show the effectiveness of the programs. This year, MCAB is focused on the three areas.
 - Quality Assurance data for Care for Kids, Maternity Partnership and Montgomery Cares. These reviews will focus on process and outcomes associated with the delivery of healthcare.
 - Utilize appropriate and accurate measurements to monitor quality, cost, and patient outcomes including patient satisfaction.

MCAB plans to implement these priorities with a mindset of prevention. By effective interventions and strategies delivered within an array of settings, we can introduce messages and programs aimed at preventing or delaying access to care.



Mental Health Advisory Committee's Top Three Priorities

- I. *Respond to the County's Rising Suicide Rate:*** In recent years, suicide Rates have increased nationally, especially among the youth. This trend has become further exacerbated by the COVID-19 pandemic, which has caused significant disruption to residents' daily lives, jobs, financial stability, and social networks. While experts are still studying this virus's mental health effects, most experts generally agree that the isolation required under social distancing requirements, economic anxiety created by the resulting recession, and more generally the uncertainty over when things will start to improve, is likely to result in increased suicide rates nationwide. See Castrucci, Brian C. & Norris, Tyler; *City Officials Must Act Now to Prevent a Devastating Mental Health Crisis*; Health Affairs (Sept. 24, 2020).

Over the past year, we have been investigating how Montgomery County is addressing this trend and what steps the County Executive and County Council can take to improve its response, including expanding mental health services at schools, better identifying at-risk residents, and improving residents' access to treatments that are proven to lower rates of suicide and suicide attempts. We have identified the following steps the County should take to address this growing problem.

- Increase funding for EveryMind's hotline so that it can add text and chat between 12am and 8am and follow-up calls for children who receive crisis services.
- Pass legislation to add mental-health education at the elementary, middle, and high school levels.
- Add additional support for counselors after school-based mental-health presentations. This will support the increased trend of student reporting to school counselors after mental health presentations which in turn results in counselors requesting the assistance of Mobile Crisis Teams.
- Hire DBT-specialized providers for the County's Mental Health Clinics and require non-County clinics to staff such providers (or alternatively identify incentives to attract more DBT-specialized providers to work in the County).

- II. *Improve the County's Crisis Response System:*** The County recently passed a special appropriation adding \$592,000 to expand the Mobile Crisis team by staffing three additional units. The County now provides two Mobile Crisis Units to service the entire County 24/7. Despite these gains, the County's Crisis Services needs additional resources and authority to adopt policy changes to ensure appropriate mental health services are available for residents experiencing an acute mental health crisis. This Committee also recently notified that the County did not receive requested funding from the state HSCRC to implement the Crisis Now model, which would have transformed the County's mobile crisis system by creating a County Restoration Center, expanded the capabilities of the County's crisis hotline, and restructured the mobile crisis teams to include a peer counselor. We have not yet learned of the status of another grant proposal seeking funding from the Maryland Department of Health's Behavioral Health Administration, which was submitted in June. Regardless, we strongly urge the County Council and County Executive prioritize increased funding to BHCS to drastically expand the County's crisis services. By doing so, the County would

ensure that individuals suffering from mental illness receive appropriate services and allow us to move away from putting the burden on fire and rescue and, more often, police to intervene. Expanding crisis services in this way would promote increased trust from the community and, by taking this burden from police departments, it would be an important first step in restoring trust between police and the communities they serve. In time, it would reduce costs to the County by reducing unnecessary ER visits, 911 calls, and diverting individuals away from jails, prison, and the court system. Moreover, it would promote a healthier Montgomery County and help individuals stay in the workforce, all of which would help the County's economy.

Background

The Mobile crisis team (MCT) consists of two licensed therapists and available 24/7 to respond to requests from 911 dispatchers to assist the police with acute mental health emergencies. When dispatched, the team first calls the police, who ensure the team's safety while MCT evaluates the individual. MCT provides referrals to providers and is authorized if necessary, to execute an emergency petition, or alternatively the client can voluntarily go to the ER. MCT is also dispatched to support family/witnesses following suicides and homicides. And they assist providers working on homeless outreach.

The county also runs a Crisis Center, which provides mental health services to individuals with urgent needs. The Crisis Center consists of 6 therapists working each day and 4 therapists during the overnight hours (with 8-9 therapists on evenings during the school year).

Another part of the county's crisis service is its assertive community treatment (ACT) teams. Each ACT team has at least one psychiatrist, licensed therapist, nurse, and peer counselor. The county currently has three ACT teams, two of which are run by People Encouraging People (PEP) and the third is run by Cornerstone. Another Cornerstone ACT team will be operational in a few months. Generally, there are about 100 patients per team and there is currently a waitlist to receive services from one of these teams. The greatest challenge facing the ACT teams now is hiring psychiatrists.

Recommendations

1. Identify ways to decrease MCT downtime. Although MCT is intended to ease the burden on police and ensure those experiencing an acute mental health crisis receive appropriate interventions, there are significant barriers to ensuring it is achieving those goals. After being dispatched to a home, MCT therapists are required to wait for two patrol officers to arrive on the scene before meeting with the client. However, because these calls are often considered a low priority for police, it frequently takes at least 30 minutes for the necessary units to arrive. During that time, the county's MCT must wait in the car with nothing to do, wasting time and resources, delaying needed mental health care to those who need it, and reducing the number of people MCT is able to help.
2. Increase the number of MCT units. Even with the added MCT units created by the recent special appropriation, more MCT units are needed to ensure crisis services is able to respond to every appropriate call.
3. Improve the data MCT collects. One barrier to assessing the county's needs with respect to the MCT is the lack of data available. In particular, the county does not currently track (1) the amount of time MCT waits before police units arrive; (2) the number of people MCT is able to successfully link to mental health services; (3) the number of people MCT is able to divert from unnecessarily going to the ED or entering the criminal justice system. By collecting this data, the county could better determine how many MCT units are necessary to meet the county's needs, as well as the benefits and savings MCT provides compared to the costs to the county of adding

another MCT. MCT staff have reported that the electronic health records system they are required to use is not properly designed for their needs and does not provide for the required data collection. Accordingly, one way to improve the quality of data that MCT collects is to fund the development of an improved EHR for the MCT.

4. Follow up with individuals after meeting with MCT. Currently, MCT does not follow up with clients due to lack of staff. Such follow up would increase the likelihood that clients connect with mental health services, decreasing the likelihood of subsequent 911 dispatches, ED visits, or the individual entering the prison system. We therefore recommend the Council provide the necessary funds to ensure MCT has the staff necessary to provide follow-up services and ensure clients connect with ongoing mental health services.
5. Ensure better coordination between MCT, the police CIT team, the county's Crisis Center, and the crisis hotlines (note that EveryMind also runs a crisis hotline for the County, but is unable to coordinate with Crisis Services or the Mobile Crisis Teams).

III. *Environmental Impacts on Mental Health and Resilience:* As the ongoing coronavirus pandemic has made clear, continued access to quality mental health services during a state of emergency is critically important. Yet, ensuring access to these services during a state of emergency requires substantial planning and resources. The growing threat of climate change is likely to present its own unique challenges to ensure county residents have access to mental health services. Accordingly, we recommend the county take steps to include a mental-health component to its plans to address climate change.

On December 5, 2017, Montgomery County was the first county in the country to adopt a **climate emergency** resolution. This affirmed the county's understanding and commitment to the threat of global warming. Since then, County Executive Marc Elrich set carbon reduction goals of 80% by 2027 and 100% by 2035. The County also established five work groups to examine how best to meet these goals and invested in a consultant to develop the Emergency Climate Action and Resiliency Plan (eCARP). The resulting plan has adopted a **health frame** that highlights health co-benefits of a green economy and other mitigation and adaptation efforts. This frame gives our community the motivation to act now and feel the benefits now and well into the future. The health frame should also highlight the related mental health co-benefits of the proposed policy changes.

Similarly, while many agencies have been involved in this planning process, it has not included a representative for Behavioral Health and Crisis Services. Yet, ensuring adequate funding for and access to quality mental health services, which will promote residents' health, wellbeing, and resilience, should be included as a critical element of any climate change response plan.

Priority Focus Areas

- Recommend the inclusion of a mental-health representative to the eCARP and Department of Environmental Protection work group and other related meetings, to report back to MHAC, ensuring mental health services are adequately represented in county climate change plans.
- Recommend that the county expand the health frame to include mental health and request the development of research-based recommendations related to crisis situations and ways to build community resilience before, during, and after crisis events as part of our preparedness efforts.
- MHAC will actively partner with environmental groups and other committees working to address climate change to raise awareness of the growing body of research linking climate change to mental health concerns.
- Partner with Montgomery County Public Schools to ensure mental health is included in climate change, environment, and preparedness activities.

- Recommend inclusion of the MHAC in county-sponsored climate change and emergency preparedness events to educate the public more broadly.



November 10, 2020

The Honorable Gabriel Albornoz
Chair, Health and Human Services Committee
Montgomery County Council
100 Maryland Avenue
Rockville, MD 20850

Dear Councilmember, Albornoz:

On behalf of the Latino Health Steering Committee (LHSC) of Montgomery County, we want to thank you for the opportunity to offer our policy priorities for fiscal year 2021.

The LHSC is an independent group of volunteer professionals and community leaders who advise and provide technical assistance for the Latino Health Initiative (LHI). As an independent group, we advocate for activities that relate to the well-being of the Latino populations in the County.

Our two policy priorities for FY21, reflecting the priorities of the *Blueprint for Latino Health in Montgomery County, Maryland 2017-2026* and our shared commitment to improving the health and wellbeing of Latinos across the County are to:

1. Maintain supports to curtail the impact of the COVID-19 pandemic in the Latino community

The COVID-19 pandemic has had a devastating and unprecedented impact on the health, socio-economic, and overall wellbeing of the Latino community. Due to a range of factors, the Latino community has disproportionately high rates of infections from the coronavirus as well as hospitalizations and deaths. The economic impact has also been devastating leaving thousands of Latinos in the County at increased need of food, financial assistance, and healthcare services, among others.

We applaud the response of the Montgomery County Government to address many of these issues through the allocation of resources to support programs that help feed our families, offer financial supports, and enhance access to existing services. Such programs have served as the lifeline for so many struggling Latino families in the County. Programs like EARP and rental assistance program have truly meant the difference in being able to feed their families, keep the lights on, and not be forced from their homes.

We are also grateful for the allocation of specific funds aimed to address the needs of the Latino communities through the *Por Nuestra Salud y Bienestar* Initiative. This comprehensive, wraparound program has been able to support culturally and linguistically appropriate community outreach, communications campaign, testing, case management, and food assistance programming. This program serves as a lifeline for our low-income, limited English proficiency, uninsured community by providing information and resources to them where they live, work, and play. Just in the last two weeks the program has also reached over 10,000 Latino residents with COVID-19 prevention strategies and

resource info fielded over 300 calls from Latino residents looking to connect to both County and provided over 4,000 COVID-19 tests.

We urge Montgomery County to continue to allocate the necessary funding to maintain the invaluable work and progress made by Salud y Bienestar as well as supporting programs such as contact tracing, EARP, rental assistance and food distribution programs. This initiative is a vital resource to vulnerable community members that are also a lifeline for the County by working in essential industries like construction, commercial cleaning, and service industries. It brings the services in to the neighborhoods of a community that has been one of the hardest hit by the pandemic and lack many of the vital supports needed to overcome this pandemic.

To build public trust, it is important that more COVID-19 data be shared with the public on a regular basis. We are in dire need for data stratified by age, race, ethnicity, and zip code for number of new cases and per capita rates, number and rates of tests, positivity rates, hospitalization rates, and mortality rates. In addition, we recommended that the percent of new cases that are linked to at least one other case be presented by age, sex, race and ethnicity. Mortality data should be presented within age categories because that is where you really see the disparities.

2. Increase the number of Latinos serving in decision-making level positions in the Department of Health and Human Services and other County Entities

Proportional representation of Latinos at all levels of the County's workforce continues to be a significant problem that hinders the County in its ability to develop and deliver culturally competent programs and services that respond to the entire community's needs. Without constituents' diverse backgrounds being reflected in the composition of decision-making bodies, the decision-making process is unnecessarily handicapped. Programs and services are short sighted and may be ill-conceived, resulting in community members not accessing critical services, while also limiting the Latino community's ability to fully integrate themselves into the fabric of County life.

These disastrous outcomes have become further magnified during COVID. Trust needs to be rebuilt with a community that was hit the hardest during the past months. Having highly qualified Latinos who understand our community, within the highest levels of the County government is essential for the development and execution of sound policies and strategies aimed at achieving social justice, inclusion and equity.

Counting on the support of the HHS Committee to provide necessary resources and policy perspectives will be important to continuing our joint work to achieve equity and social justice for the most vulnerable populations in our County.

Sincerely,

Monica Escalante
Co-Chair, LHSC
Latino Health Steering Committee

Michelle LaRue, M.D.
Co-Chair, LHSC
Latino Health Steering Committee

C: Latino Health Steering Committee Members
Rich Madaleno, Chief Administrative Officer, Montgomery County
Dr. Raymond Crowel, Director, Montgomery County DHHS
Sonia E. Mora, MPH, Senior Manager Latino Health Initiative Montgomery County DHHS



Interagency Commission on Homelessness (ICH)

TOP POLICY PRIORITIES FOR FY 21

Jeff Goldman, Chair and Ebony Johnson, Co-chair

This year the Homeless Continuum of Care has been severely impacted by COVID-19. The pandemic has only exacerbated the long-standing struggles of people experiencing homelessness and furthered the racial disparities in housing, eviction rates, and health outcomes. People experiencing homelessness are most at risk of COVID-19 complications and living in congregate facilities increases the likelihood of infection. The Continuum of Care and the Interagency Commission on Homelessness have taken many steps to mitigate the spread of COVID among the homeless population including universal testing, securing PPE for both clients and staff, spreading out the shelter populations, suspending terminations, and most importantly, housing people as quickly as possible. Recognizing that housing is the only way to end homelessness and ensure the health and well-being of the people we serve; the ICH recommends the following:

Long-term Housing Subsidies

The Continuum of Care has received additional federal funding through the Emergency Solutions Grant to provide Rapid Rehousing for those exiting homelessness. Due to the high housing costs in the area and the bleak economic outlook over the next several years, many households will require a permanent housing subsidy when RRH support ends. The ICH recommends the following:

- Advocate for additional federal Housing Choice Vouchers reserved for people exiting homelessness or the Rapid Rehousing program. HUD has recently released a NOFA for new Housing Choice Vouchers through the CARES Act.
 - **This group recommends that HOC applies for 100 new vouchers and receive all or at least of portion of referrals from the Coordinated Entry System.**
- Support program changes to the Rental Assistance Program to target households currently experiencing or at imminent risk of homelessness. Increase maximum subsidy amount from \$200 to \$400 or 25% of Fair Market Rent per month.
 - **COST: \$4 million to serve the same number of households with a higher subsidy amount**
- Secure set-asides of Housing Choice Voucher turnover for people exiting homelessness or the Rapid Rehousing program.
- Advocate that the Rent Supplement Program take referrals from Coordinated Entry.
- Advocate for an increase in the Housing Initiative Fund to meet the growing need for housing for households exiting or with a history of homelessness
- Dedicate at least 10% of all newly produced or preserved affordable housing units to households exiting (or with a history) of homelessness

Barriers to Accessing Housing

The ICH recognizes that households experiencing homelessness face many barriers to accessing housing. People experiencing homelessness are disproportionately people of color, particularly Black or African American. They are denied housing based on poor credit, criminal backgrounds, and poor rental history which are all exacerbated by structural racism. Unfortunately, the route to investigate these denials is too cumbersome for many individuals. This group recommends the following to address these barriers:

- Support “ban the box” legislation
- Support “just cause” eviction legislation
- Advocate that HOC review eligibility criteria on criminal backgrounds and rental history
- Develop an independent pathway to investigate housing discrimination and illegal practices at housing complexes that is not client driven

Development of Deeply Affordable Permanent Housing

The ICH calls on the County to execute on the opportunity to purchase a hotel portfolio to re-imagine as extremely affordable micro-units. The biggest barrier to ending homelessness is housing. Many individuals experiencing homelessness have regular income but are unable to find housing that is affordable to them. By providing micro units at an extremely affordable rate these individuals will be able to self-resolve and end their experience with homelessness. The ICH recommends the following:

- Purchase available hotel portfolio and reopen as extremely affordable micro units.
 - **The total cost is unknown at this time. Rough estimate for capital costs \$10-15 million**



Early Childhood Coordinating Council Priorities for 2020-2021

Presented to the Montgomery County Council
Health and Human Services Committee
November 18, 2020

The Early Childhood Coordinating Council (ECCC) was established by Bill 13-15 and is Montgomery County's local Early Childhood Advisory Council for the State of Maryland. The ECCC monitors, advocates, and makes policy recommendations for the development of a comprehensive system of early care and education (ECE) in Montgomery County that supports children entering school ready to learn.

The ECCC is comprised of a variety of stakeholders and professionals with expertise in the early childhood field including: County parents, business and foundation representatives, child care providers, local ECE associations' representatives, Montgomery County Public Schools (MCPS) staff, Maryland State Department of Education (MSDE) staff, Montgomery County Libraries and County Government representatives. Our collective knowledge and expertise about ECE, the importance of school readiness, and the needs of children and families in Montgomery County allows the ECCC to examine, discuss, problem solve, and provide a comprehensive perspective about early care and education to County officials. The ECCC will also take into consideration the action plan of the Montgomery County Early Care and Education Initiative and will align priorities accordingly.

Specifically, the ECCC will focus on the following for the 2020-2021 year:

Priority 1: Mental Health and Social/Emotional Well-being of children, families, and the early childhood workforce: Supporting the wellness of families and their children, as well as the early care and education workforce caring for and teaching young children.

- Public awareness of available resources regarding mental health and social-emotional well-being for children and families.
- Training and technical assistance provided on the Pyramid Model on social-emotional development of children for child care professionals.

Priority 2: Child Care Sustainability and Systems: Integrating a broad approach to the sustainability of child care as an industry, as a workforce, and as a provider of enriching and educational experiences for young children.

- Develop actionable recommendations that focus on the direct support of child care programs to aid in the industry’s recovery from the economic and enrollment effects of the COVID-19 Pandemic.
- Support the development of a local “LOCATE” service to increase community members’ knowledge about child care options, improve access, and connect families with available child care providers.
- Support the use of and make future recommendations for the Working Parents Assistance program to address the developing needs of families in the community.
- Continue to promote current and alternative pathways for early childhood credentials at Montgomery College and other higher education institutions.

Priority 3: Advocacy: Focusing on communication with MSDE, as well as allowing the ECCC to shift its areas of focus to address a broad range of topics and needs as they come up throughout the year. This will also allow the ECCC to support different groups, projects, and initiatives in the service of a building a more comprehensive ECE system. Montgomery Moving Forward (MMF) will be a primary partner of the ECCC on advocacy.

- Partnering with Maryland Family Network and other organizations across the state on the Pritzker funded Building Better Beginnings prenatal through three project.
- Licensing regulations revisions, temporary and permanent.
- Training regulations revisions.



Montgomery County Community Action Board's Testimony
County Council HHS Committee Priorities Meeting for Boards, Committees, and Commissions
November 18, 2020
Tiffany Jones, Chair

Foundations

The COVID-19 emergency has brought to the surface many of the economic inequalities that have always existed in our community. The Community Action Board (CAB) has worked for over 55 years to reduce these disparities in Montgomery County. The board's priority issues highlight some of the greatest needs in our County – all of which have been exacerbated by the emergency situation.

CAB supports a whole family approach to addressing community needs that breaks down silos and reduces barriers for individuals trying to navigate services. The TESS Community Action Center, the County's first bilingual, community-based program, is a model for this approach, assuring access to critical services and resources delivered by public and private agencies and organizations.

CAB promotes the Community Action principle of maximum feasible participation – ensuring that diverse voices are heard in the planning process. Stakeholders must be included in the planning process in order to develop responsive policies and programs in the County.

Overarching Issues

To begin, the CAB recognizes two critical overarching issues that have a significant impact on all of the key policy priorities listed below. The first is the **digital divide**. Lower-income households are less likely to have access to technology and internet connections. This places these households, both adults and children, at an extreme disadvantage. CAB strongly recommends expanding universal Wi-Fi throughout the County, along with programs that provide computers to those who cannot afford them. Doing so will reduce barriers for those struggling with the issues outlined in this testimony.

The second underlying issue is **racial equity**. African American and Hispanic community members were disproportionately impacted by all of the issues highlighted below, even before the COVID-19 pandemic began. The emergency has only exacerbated these disparities. The CAB utilizes an equity lens in all of its decision making and applauds the efforts of County

leadership to do the same. The board believes that in addressing all of the important issues highlighted here, the County is in a position to bring about real systemic change and address some of the deep-seated racial inequities in the County.

The Board has identified the following community issues as critical to increasing the social and economic mobility of our neighbors.

Housing and Utility Expenses

Concerns:

- An affordable housing crisis already existed in Montgomery County before COVID-19. This has been exacerbated.
- Households are falling behind on their rent and utility bills. Moratoriums allow people to stay in their homes and have access to electricity, gas, and water, but a crisis could arise when the moratorium ends.

Recommendations:

- Moratorium on evictions and utilities cut-offs must be extended through the pandemic. Expand support to help pay arrearages and consider models for forgiveness.
- Expand rental assistance to households so that people will not lose their housing when the moratorium ends due to a backlog of unpaid rent.
- Expand utility assistance so that people will not go into debt paying utility bills when moratorium on cut-offs ends.

Early Childhood Education

Concerns:

- Concerns for child care providers who had to close (and may remain closed due to restrictions) which drives up costs, reduces the supply of providers, and limits access, placing burdens on lower-income households and the already underpaid child care workforce.
- Need to address the technology divide – children in lower-income households do not have access to the same technology and this may cause the opportunity gap to widen.
- Disproportionate impact of the lack of place-based care on lower-income households.

Recommendations:

- Continue and increase financial support for child care providers so that they can stay in business and maintain the capable workforce required for quality child care.

- Expand child care support for lower-income parents – many of whom are low-wage workers who cannot work from home.
- Expansion of Early Childhood Services, including Head Start, Early Head Start, and PreK.
- Comprehensive birth to five services to enable children to enter school ready to learn and reduce opportunity gaps that were exacerbated during COVID-19.

Economy, Employment, and Workforce Training

Concerns:

- High unemployment – especially for low-wage workers in service industry.
- Undocumented individuals unable to apply for services, although they are disproportionately impacted by unemployment.

Recommendations:

- Expand unemployment insurance benefits and ensure that all those who are eligible have the information necessary to apply.
- In the long-term, expand workforce development programs so that people have access to training that leads to higher-paying jobs with better benefits.
- Expand supports for undocumented residents who are facing unemployment.

Accessibility and Responsiveness of Human Service Ecosystem

Concerns:

- Service navigation challenges persist and have been exacerbated during the pandemic. Those in need of assistance often confront an overwhelming system of services that is complicated and difficult to access.
- Accessing services is a challenge for many people due to language barriers, lack of technology, stigma, and lack of familiarity with the system and services available.
- Eligibility requirements may pose challenges.
- The cliff effect leads to people being kicked off of benefits too soon.

Recommendations:

- Improve navigation so that community members can access multiple services in one location using a streamlined process. Utilize the hub model.
- Increase outreach regarding available services utilizing different languages and diverse outreach techniques (social media, ad campaigns, flyers, etc.).
- Adjust eligibility requirements to make it easier for people to apply for services (i.e. reducing documentation requirements, allowing flexibility for virtual applications, imposing categorical eligibility, etc.),
- Reduce eligibility recertification requirements so that people do not need to keep reapplying for services so frequently.

Commission on Veterans Affairs
Policy Issues for FY 22
November 18, 2020
Wayne Miller, Chair - Robert Koffman, Vice-Chair

The Commission on Veterans Affairs is grateful for the support the County has provided for funding programs that benefit the quality of life for Veterans and their families. We recognize that the COVID-19 public health crisis is placing difficult and unprecedented pressures on programs and services of the County. Given our experiences with the COVID-19 pandemic, our priority is to promote and support mental health and physical wellness programs for Veterans and their families, including the spouses and the children of those who have been killed in service to our country. In March, 2019, Executive Order 13861, known as ***The President's Roadmap to Empower Veterans and End a National Tragedy of Suicide*** (PREVENTS) was signed by the President and this bi-partisan effort calls for the development of a two year comprehensive plan to empower Veterans and end suicide through coordinated suicide prevention, prioritized research, and strengthened collaboration across the public and private sectors. In March, 2020, as many as 20 American Veterans took their life every single day. Collectively, we can improve Suicide Prevention programs by lessening stigma, and changing the culture around suicide through knowing available local resources, caring enough to watch out for one another, and having the courage and conviction to act. By signing the PREVENTS Organization pledge (<https://www.reach.gov/>) you commit to take a stand. Using "Moments to Reach" toolkit (attached) the Commission will increase outreach efforts to help thwart this scourge. In recognition of Veteran's Day, we ask that you join us.

We continue to be pleased with the County's efforts to end homelessness amongst Veterans and to assist in obtaining permanent housing as was highly successful during the Zero:16 campaign. We are considered to be in the top 10 jurisdictions in the country in serving homeless Veterans due to the Council supporting the Commission's request to fund housing for Veterans not eligible for Veterans Assisted Supportive Housing (VASH) vouchers. Montgomery County has been the direct recipient of 98 HUD VASH vouchers and an additional 25 ported HUD VASH vouchers from DC and other states. We are in strong support of Bethesda Cares outreach expansion to Veterans and support the funding of \$647,000 for Veteran housing. This funding will accomplish many County priorities such as the addition of permanent affordable housing for homeless populations and achieving racial equity through sound housing policy.

Serving Together was created to coordinate the system of care for Veterans, service members and their families so the entire community can better identify those Veterans and direct them to supports that are in place for them. This organization is a recipient of an annual \$150,000 Community grant from the County and we recommend this continues.

Warrior Canine Connection (WCC) enlists Warriors recovering from the visible and hidden wounds of war in a therapeutic mission of learning to train service dogs for their fellow Veterans. WCC's eighty acres is located in Seneca State Park in Boyds. WCC offers much-needed resources for Veterans within the County. Currently, WCC has 100 dogs in its two-year training pipeline and anticipates doubling the number of Veterans served in 2021. Given the current pandemic and critical need to provide increased mental health care support for our most vulnerable populations, WCC provides a therapeutic activity in a natural, healing environment. With ample space for critically important socialization while ensuring physical distancing, Veterans and Wounded Warriors learn to train Service Dogs for other Veterans and Wounded Warriors. WCC receives an annual Community grant of \$50,000 from the County. An increase in funding will expand WCC's capacity to serve even more county Veterans through collaborative efforts with other county Veteran Service Organizations. Recommend increasing funding.

Team River Runner of Walter Reed has a kayaking program at Seneca Creek at Riley's Lock where they meet every Sunday May through October. With encouragement from the Commission, Montgomery Parks received a grant from the State to fund ADA Accessibility improvements to the existing ramp used by motor boats which will be renovated at Seneca Landing Special Park at Riley's Lock. Montgomery Parks' fully funded and constructed the new accessible floating launch for canoeists and at the park upstream of the existing boat ramp. The accessible launch areas can be used by the public in gaining access to the beautiful Potomac River. One of the accessible launches has been installed and is being used by Team River Runner and the general public. A cement walkway to the launch has been installed with the entire area to become Americans with Disabilities Act compliant. Prior to the installation, wounded Veterans enter the Potomac River where power boats are launched. Thank you for your continued support of Veterans. Photo of Veteran using accessible launch:

www.montgomerycountymd.gov/HHS-Program/Resources/Images/Veterans/robhunter6%20gettingonslider6.jpg

Commission on People with Disabilities
Policy and Budget Issues before the County Council HHS Committee
FY22 Operating Budget - November 18, 2020
Seth Morgan, MD, Chair

1. Pedestrian and Bicycle Safety as it Relates to People with Disabilities

The most important transportation priority of the Commission is to ensure pedestrian safety for everyone. Currently, the County has numerous transportation plans and projects which affect pedestrian safety including the Bicycle Master Plan, Safe Streets to Schools, Pedestrian Master Plan, Vision Zero, Visually Impaired Urban Navigation Study and Pilot Design and Complete Streets Design Draft. This fragmented approach is not only confusing for the public but also leads to a haphazard design that puts people of all ages and abilities at risk. We are asking the County to align the plans to have a consistent and comprehensive approach to pedestrian safety. This will result in effective transportation planning to prevent serious or fatal accidents. We ask that any transportation project include input from people with disabilities before implementation.

- The County's adoption of Vision Zero to prevent serious or fatal accidents should be focusing on the basics of pedestrian safety. The County needs to provide for a safe way for people to walk particularly for vulnerable populations including people with disabilities, children and seniors. Being forced to walk in the street amongst parked cars should not be the only option. We recommend that the County make sidewalks a priority in neighborhoods where people with disabilities live and on main streets to schools. This aligns with the Vision Zero strategy to eliminate all traffic fatalities and severe injuries, while increasing safe, healthy, equitable mobility for all. The Commission recommends that the Montgomery County Department of Transportation (MCDOT) pursue greater sidewalk installation as it promotes a safer way for people to walk. This may require County legislation to make it a requirement versus having homeowners being able to deny them in front of their homes.
- Until safety concerns are fully addressed, the Commission recommends a moratorium on the installation of floating bus stops and designated bicycle lanes. During that time, we will evaluate the proper placement of bike lanes. In the State, there are 4 different designs of floating bus stops making them both unpredictable and inconsistent. The installation of bike lanes and floating bus stops present a serious safety concern for people who are blind, have low vision, are hard of hearing or who have a mobility disability. We recommend a simplified and more detailed safety review encompassing all transportation initiatives to assure uniformity of goals and inclusiveness of concerns of people with disabilities before plans are implemented.
- MCDOT is promoting scooters and bikes to increase transit options but unfortunately, they too often block sidewalks and endanger people with disabilities as a tripping hazard or barrier to passage.

2. COVID-19 Pandemic and People with Disabilities

The Pandemic has had a detrimental impact on all residents but even more on people with disabilities. We encourage the Council to fund and monitor programs that promote mental and physical health and wellness. We recommend the following:

1. Grants or other monetary support for expanded mental health services for children and adults with disabilities including their caregivers.
2. Continuation/enhancement of monetary support for Personal Protective Equipment (PPE) to providers of services to adults with disabilities.
3. Maintenance/enhancement of the annual supplement to providers of services to adults with developmental disabilities.
4. Many individuals with disabilities have lost jobs due to the pandemic. We recommend planning and monitoring to ensure that people who need help securing employment get the help they need. During this time of COVID, we are finding more and more participants having virtual interviews with computers for first-round interviews in entry-level positions.
5. Respite Care for Caregiver Support continues to be needed.
6. Food insecurity is an issue for many, and we hope to continue to provide information to the public on food sites. At the suggestion of the Council, a new Disability Site was created to enhance communication with the public on disability issues.
7. Housing and Housing First. Need to promote housing opportunities. HOC recently received 100 HUD vouchers for non-elderly disabled persons, ages 18-62. We need to ensure Fair Housing Compliance and non-discrimination.

THE MONTGOMERY COUNTY COMMISSION ON JUVENILE JUSTICE

TOP TWO POLICY PRIORITIES FOR FY-21

During FY-21, the Commission on Juvenile Justice will focus on its work-plan, which was developed by the Commissioners for the coming year. The Commission on Juvenile Justice recognizes the importance of supporting and advocating on behalf of opportunity youth, generally defined as people between the ages of 16 and 24 who are neither in school nor working, some of whom may have been involved in the juvenile justice system and detained. These young people represent a social and economic opportunity: many of them are eager to further their education, gain work experience and help their communities. The Commission on Juvenile Justice's priorities for FY-21 reflect its commitment to promoting these young people and enriching Montgomery County through the opportunity that they represent.

1. Youth In Adult Facilities: The Commission on Juvenile Justice plans to focus on ways of eradicating Youth involved in the justice system within Montgomery county who are detained in Adult Facilities. The Commissioners will work actively with legislators to assist in writing a bill that will address this issue. The Commission is having Delegate David Moon and Delegate Brooke Lierman to our Commission meeting in October and we will discuss with them how the Commission can find a legislator to work with us on this issue.

2. Child Interrogation Action Bill: The Commission prides itself on advocating for the rights and fair treatment of Juvenile Offenders within Montgomery County. The Commission is working to engage in research and advocacy that will help us understand the need for legislation such as the Child Interrogation Action Bill. The Commission would like to work toward advocating for legislation that allows for either legal or parental counsel while a Juvenile is being interrogated by Law Enforcement officials.



Montgomery County Commission on Health (COH) Fiscal Year 2021 Priorities

The Commission on Health (COH) respectfully submits its Fiscal Year 2021 (FY21) Priorities. The COH is focused on four key public health priorities: **School Health, Public Health Data and Modernization, Communicable Diseases and Racial Equity**. We plan to coordinate and align these efforts with our fellow Boards, Committees, and Commissions that have identified the same or similar priorities. Together, we believe we can address the following public health priorities.

A. School Health

Studies have shown that poor health can put education at risk – kids with poor health tend to have higher absenteeism rates, lower academic concentration, and higher risk of learning disabilities. Conversely, education can create opportunities for better health – adults with a good education tend to have better jobs, access to health care, live in healthier neighborhoods, and live longer lives.

We are significantly concerned with the impact of the COVID-19 pandemic on student learning. In FY21, our focus will be on supporting efforts to ensure a safe return to the classroom. This will include identifying ways to ensure all school age children are current on their vaccinations and providing recommendations on vaccine distribution plans.

B. Public Health Data and Modernization

Modernizing the public health approach by integration of newer technology to improve processes and the County's ability to respond to public health efforts is critical to addressing health equity. The recent pandemic has reinforced that there needs to be a continued focus on updating systems to improve ER standards. Additionally, leveraging new technologies will help ensure efficient and effective data collection, processing and reporting.

In FY21, the COH will continue to advocate for the County to invest in building its epidemiological capacity as state-of-the-art data collection and analysis capability is integral to support the health needs of the County's residents.

C. Communicable Diseases

The COVID-19 pandemic has brought the burden of communicable disease to the forefront. While all can benefit from routine immunizations, reducing cultural, language, and other barriers to recommended vaccinations is essential to promote equity. The County also continues to bear the burden of other infectious diseases such as sexually transmitted infections and tuberculosis. A closer examination of the epidemiological data shows a number of conditions with increasing trends and demonstrated disparities by race/ethnicity, age, sex, and geographic area.

In FY21, we plan to review this data and advise public health planning to better target efforts and resources to meet the evolving needs of a changing population in the County. We hope to continue to encourage focus on science-based approaches to preventing communicable diseases, with specific attention on routine influenza vaccinations for everyone over six months of age. We also plan to work to help counter misinformation that could reduce the willingness of County residents to receive recommended vaccinations, including one for COVID-19.

D. Racial Equity

The Commission on Health (COH) is dedicated to identifying, addressing, and correcting racial disparities in Montgomery County. We stand beside every Montgomery County resident, employee and visitor in the quest to make Montgomery County a safe and supportive environment for everyone regardless of their race or ethnicity. Residents of color, regardless of income, lag in access to healthcare and high-quality education.

This year, the COH plans to ensure that racial disparities are addressed in all the priorities we have identified. We are committed to advising the County Executive and the County Council on racial equity, social justice, and inclusion throughout the County's public health issues, programs, services and to monitor and assess racial and equity needs of residents in this county.

We look forward to working with our government leaders, community organizations, and community as we work together to continue to enrich the health of the residents in Montgomery County.



COMMISSION ON CHILDREN AND YOUTH

Top Policy Priorities Presented to the Health and Human Service Committee of the County Council November 18, 2020

Presenter: Ms. Renae McPherson, Chair

Overview:

The Commission on Children and Youth (CCY) promotes the well-being of Montgomery County's children, youth, and families so that all young people may realize their full potential and become contributing, productive adults. We do this by supporting policy and budget decisions that promote the safety and well-being of children and youth, and by working so that they have access to successful futures.

2020-2021 Commission on Children and Youth Priorities

The Commission will advance its mission in FY 21 through a focus on two priorities:

Priority 1: Strengthening Youth and Law Enforcement Relationships

As a result of the recent concerns regarding the poor interactions between secondary school-aged students of color and the School Resource Officer (SRO), the Commission on Children and Youth seeks to analyze and review the major components and effectiveness of the SRO training program. The Commission intends to use this data to make recommendations on how to inform the development of new structures that enhance the safety and learning of ALL students; eliminate mistreatment of students on the basis of race, disability, and/or sexual orientation and gender identity; and strengthen the relationship between the SRO and the entire school community.

Priority 2: Coordinated Services for Children and Youth

The Commission on Children and Youth seeks to create a public initiative that would ensure the existence and awareness of equitable, inclusive, accessible and supportive infrastructures across all County agencies and institutions. Our aim is that this initiative would help to create a stand-alone coordinating entity that allows for a centralized information platform with accessible directories of resources and supports for children and youth of Montgomery County.

Additionally, the Commission is planning to host a *virtual* version of its annual **Youth Having a Voice** roundtable event. This year will mark the 14th year the Commission has hosted this gathering of teens from across the County to discuss issues that are important in their lives. Not only do youth have the opportunity to speak out, but adults – members of the County Council, Board of Education, HHS senior leadership and others – have the chance to hear, learn, and act on the concerns of the youth. Stay tuned for details!

The Commission is committed to its mission and appreciates your support in our efforts. We look forward to working with you this year. Please feel free to inform us about how we may best support your efforts and partner to benefit the County's children and youth.



COMMISSION ON CHILD CARE

**Top Policy Priority
Presented to the
Health and Human Service Committee of the County Council
November 18, 2020**

Presenter: Ms. Lindsey Allard-Agnamba, Chair

Overview:

The mission of the Commission on Child Care is to advise the County Executive and County Council on the development, implementation, and effectiveness of government policies, programs, and services that enhance community support for quality, affordable and accessible child care.

2020-2021 Commission on Child Care Top Priority

The Commission will advance its mission in FY 21 through a focus on the following priority:

Provide feedback to the County Council and County Executive on both the Early Care & Education Initiative (ECEI) Action Plan and Montgomery Moving Forward's "Roadmap for Developing a Public-Private ECE Coordinating Entity" in an effort to support the County's child care system response and recovery with a specific focus on equity and operational recovery.



COMMISSION ON AGING

HHS Committee Meeting November 18, 2020

Priorities for FY22 Budget

The Commission on Aging thanks the County Council, and this Committee, for the strong support you have provided to older adults over the years. We support your commitment to advancing racial equity and social justice throughout our community. We also recognize that the current public health emergency is placing unprecedented financial and emotional pressures on the County. Our two highest priorities for FY22 are: (1) to ensure that the County has sufficient staff to investigate and address issues of abuse, neglect and exploitation of vulnerable adults, and to protect and assist those who lack the capacity to care for themselves; and (2) to protect renters at risk of eviction, including older adults, with the legal assistance they need to avoid losing their homes.

HHS needs two additional Social Worker positions in HHS, one in Adult Protective Services (APS) and one in the Public Guardianship Program.

We ask the Council to fund these two very much needed positions. APS investigates allegations of abuse, neglect, self-neglect, and/or exploitation of vulnerable adults who lack the physical or mental capacity to provide for their daily needs. APS investigations increased 53% from FY15 to FY19. The number of cases dropped slightly in FY20 due to a reduction in reporting due to COVID-19 social restrictions, but by September 2020 investigations were back to pre-COVID-19 levels. APS served more than 970 at-risk residents in FY20. Financial exploitation cases continue to rise, and in FY20 made up 36% of APS cases. Investigations can be complex, and they require trained and licensed staff.

Public Guardianship provides substitute decision-making for adults whom the court has determined lack the capacity to make their own decisions about housing, safety, or medical care, and who have no appropriate family member or loved one to serve in this role. Cases are ongoing and time-consuming. After increasing for years, Public Guardianship caseloads dropped in FY20 due to the COVID-19 related deaths of 15 clients. However, numbers are trending upwards. In addition, financial exploitation cases requiring the appointment of a guardian of the property increased by 8% in FY20. Public Guardianship also provides services to continuing APS clients who are not under guardianship, conducts guardianship assessments after receiving referrals from hospitals, and provides services to clients of the Social Services to Adults program.

In these trying times, vulnerable older adults may be more isolated and targets for abuse, neglect, and exploitation. As state mandated services, neither APS nor Public Guardianship can be curtailed due to funding shortages.

Older renters need legal assistance to avoid eviction from their homes.

The CoA has for several years advocated to increase affordable housing options for older renters, including through the Housing Initiative Fund. We appreciate the County's efforts to preserve affordable housing and to provide rental assistance, financial help for housing providers, a resource website, and a short-term contract for in-court representation. We note that in October 2020, at the recommendation of the COVID-19 Access to Justice Task Force, the State designated \$11.7 million for grants to non-profit organizations for eviction and other housing-related legal assistance. It is as yet unclear when, how, and to whom funds will be distributed.

Eviction destabilizes families, impacts health, and increases homelessness. Low-income, immigrant, and Black and Latinx households are more likely to be rent-burdened and at this difficult time, working members of these households are more likely to fall ill and/or lose their jobs, increasing the risk of eviction. At-risk households are also likely to include older adults: 13.3% of Black, 17.3% of Asian, and 20.4% of Latinx older adults in the County live in multigenerational households. (2018 Study on the Housing Needs of Older Adults.)

Many older adults in the County are rent-burdened: 61% of renters age 65 and older pay more than 30% of their income for rent. Many also face job losses that can lead to eviction. To date, 9% of households approved for COVID Rent Relief, which requires loss of income, had a head of household aged 60 or older. Older adults also face other precipitating events. A person on a fixed income may need to buy medicine rather than pay rent. Someone with declining cognitive skills may forget to pay rent or fail to pay on time. When a frail elder requires personal or housekeeping assistance, a housing provider may seek to evict her. For an older person, lack of legal representation in these instances can be disastrous. They may move out, or fail to appear in court, or agree to a judgment for possession. They may not know that they have legal rights such as the right to request accommodations under the Fair Housing Act or other laws. Evictions can result in homelessness. Of 369 people in shelters or on the street in the County, 32% are age 55 or older; 13.3% are 62 or older. While less frequent, evictions of older adults may also result in avoidable nursing home placement.

Current State and Federal moratoria are only postponing what could be a tidal wave of evictions. Moreover, not all households are protected by the moratoria, and the moratoria do not prevent property owners from threatening eviction, or from filing eviction actions in court. Once in court, the vast majority of landlords, but very few tenants, have a lawyer. Tenants with lawyers have a better chance of reaching agreements with landlords so they can remain in their homes. We ask the Council to continue to fund existing initiatives, and in FY22, to create a stable program to provide legal assistance to renters in eviction proceedings. We ask also that any eviction legal assistance program consider the needs of older adults. The pandemic has exacerbated this very serious problem, but it is not new. It must be addressed for the long term.

Closing

The CoA appreciates the Council's commitment to serving our older residents. We have identified other items for which we will advocate during the budget cycle. They include addressing food insecurity by expanding senior nutrition programs; raising awareness of older adult services; maintaining the Housing Initiative Fund; and maintaining and expanding senior adult programs.

Citizen's Advisory Panel for Children

Priority Statement for Meeting with
Chair of the Health and Human Services Committee
Montgomery County Council
October 2020

The Mission of the Citizen's Advisory Panel is to examine the extent to which the County Child Welfare Agency effectively implements the child protection standards and State plan under Child Abuse and Neglect Federal legislation, 42 USC section 5106a(b).

The Panel is a multidisciplinary group of expert professionals and private citizens whose responsibility is to ensure that maltreated children receive the services and support they need. We have members with varied backgrounds, all committed to the safety and welfare of children. The panel works collaboratively with the County's Department of Child Welfare Services. Some of this year's focus remains the same from last year and several items have been delayed in moving forward due to the Pandemic.

This year's focus will include the following agenda items:

- Providing support for the implementation of START program, which is a new evidence-based practice model for addressing drug and alcohol abuse in certain high-risk families being served by the child welfare system.
- Working with child welfare staff to analyze foster parent recruitment practices and develop new, creative outreach techniques to increase foster parent recruitment.
- Collaborating with other Boards & Commissions to focus on mental health issues of youth in care, and in particular the issue of suicide.
- Focus on Families First legislation and increasing prevention services in the larger community.

The Panel greatly appreciates the support that has been provided by the County Council to the residents of the County.

Montgomery County Board of Social Services
Priorities Statement for Meeting with Gabe Alborno, Chair of the Health and Human Services Committee
Montgomery County Council
November 10, 2020

Good morning. My name is Marquette Rogers and I am the Chair of the Montgomery County Board of Social Services (BSS), which provides advisory oversight to social services programs within Montgomery County that are funded by the Maryland Department of Human Services (DHS). These programs include: State funded income support programs and emergency stabilization programs; mandated child protective services and foster care programs; and mandated adult protective services and Home care services.

As the Board of Social Services, it is our responsibility to ensure that those individuals in our community who have the greatest challenges and least resources receive the support they need. The COVID-19 pandemic has exposed and exacerbated the economic and social inequalities found across our country and right here in Montgomery County.

I know each of you have been very busy recently. I wanted to take a few moments of your time to recognize the exemplary work that you are doing every day on the behalf of some of our most vulnerable residents. Simply put, you are putting the “human” in human services. The communities you serve look to you...not just for your support for basic necessities, but for hope in knowing that there are people striving to creating a better tomorrow for everyone. I wish to express my sincerest appreciation on behalf of the Board for each of you, as you have been a steady, comforting presence for these individuals and families.

I also want to recognize the work that our Department of Health and Human Services has done throughout this period. There is so much that the Department has achieved in such a short amount of time that we all can be immensely proud of. Those achievements include: 1) continuing to connect with the families they serve in a virtual setting; 2) supporting the stand-up of distribution hubs and various emergency assistance programs, 3) making non-stop deliveries and personal interactions; and 4) being a constructive presence in communities that have been hardest hit by the virus.

This year, the Board is continuing to prioritize and support greater trauma informed education, which this Committee and full Council has expressed interest in, knowing that trauma-informed practice is central to social services. In addition, the Board will be taking an interest in the growing needs and challenges facing our undocumented residents, impacted by the COVID-19 pandemic. Many undocumented families are suffering financial hardship due to loss of employment as well as facing education challenges in reduced school and childcare options. They are also facing difficulty in keeping food on the table and understanding how to apply for healthcare and other health services during the pandemic.

I would like to conclude by saying that while our main areas of focus are these two policy priorities, we are also monitoring federal executive and legislative changes that may have a considerable impact on human services access and delivery to the county. We continue to monitor Public Charge and any impacts to SNAP, Medicaid, and other major income supports that are vital to our community.

At some point in the future, the immediate public health crisis will end. However, the families that we advocate for will continue to need your support and your guidance. Despite the tough work that lies ahead, I am firm in my belief that as a county, we will emerge better off, in no small part, because of you. The Board greatly appreciates the partnership that we have with all members of this esteemed committee. Thank you.

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Introduction:

For the fiscal year 2021, AAHI proposes to put into action the recommendations and priorities in accordance to the Blueprint for the Asian American Health Initiative, 2020 – 2030, such as support for community- and faith-based organizations’ capacity to implement health and wellness educational programs for the Asian American community of the County, while maintaining the Behavioral Health and Senior Wellness Programs in order to continue serving a wider range of needs of Asian American residents of the County.

Blueprint for the Asian American Health Initiative, 2020 – 2030:

The Asian American community and AAHI Steering Committee appreciate the County Council’s support in the prioritization of the needs of this diverse community. With this support, the Blueprint was published last fiscal year. The Blueprint is designed to create a roadmap for the decade ahead and serves as a guide for improved health and wellness for Asian American communities. The four core priority areas identified include Community Engagement (conducting outreach to raise awareness, educate, and enhance access), Community Empowerment (provide technical assistance to increase knowledge, skills, and confidence in addressing), Capacity Building (create models and tools to demonstrate promising practices), and Change Catalyst (influence changes to improve systems to better serve Asian Americans). AAHI welcomes organizations and service providers from all sectors to use the Blueprint as a guide towards a collaborative effort in advancing Asian American health and wellness and achieving equity for all communities in Montgomery County.

Health and Wellness Programming Targeted for Asian Americans:

AAHI prioritizes the need to identify the root causes of illness and to provide more culturally and linguistically competent education with a wellness focus to help individuals become more self-sufficient and confident in their ability to effectively prevent and manage disease. A holistic approach to prevention, by focusing on healthy lifestyle and addressing all the dimensions of wellness (physical, emotional, intellectual, environmental, financial, occupational, social, and spiritual wellbeing) before the onset of disease and disability can be a powerful tool to empower an individual to elevate their state of wellness. With a growing diverse Asian American population in the County, a number of whom are limited English proficient, of immigrant and refugee status, and of older age, there are unique challenges facing this population.

Prioritizing Behavioral Health and Senior Wellness within the Asian American Community:

There is increased concern of a growing Asian American older adult population with a myriad of chronic diseases compounded by several social and access barriers. Asian American older adults are the largest minority and the fastest growing subgroup in Montgomery County at 15%. Senior health and wellness programming remain a priority for AAHI. Existing challenges that face seniors include loneliness, social isolation, stress and burden of caregiving, economic challenges, and lack of adequate healthcare coverage. The past few years of sustained work with Asians in the Behavioral

Health area has exposed some emerging unmet needs of this population-segment which requires a careful focus. Notable trends disproportionately affecting the Asian American population are related to mental health and include low mental health service utilization, higher rates of attempted suicide and suicidal thoughts in youth, and prevalence of post-traumatic stress disorder in refugees. Cultural differences and stigma may contribute to underreporting of mental health problems among Asian Americans. To address the challenge of cultural and social stigma tied to mental health, AAHI has developed a series of multilingual photonovels and videos as outreach tools to overcome these barriers. In FY2021, AAHI will continue with the development and outreach using these tools to address the challenges of Asian Americans during and after the COVID-19 pandemic.

Additional Information:

Among County residents aged 60 years and over, Asian Americans are the largest racial minority at 14.6%, while 30.4% of those over 65 have some sort of disability. Limited English proficiency (LEP), cultural barriers, unfamiliarity with how to navigate the U.S. healthcare system, and lack of community network all impact the physical and mental wellbeing of Asian Americans. These sets of conditions provide an ideal recipe for chronic diseases like heart disease, poor cognitive performance, early onset of dementia, and depression, in addition to acute conditions and premature deaths.

1. Continuation of Activities to Educate County Residents on the Harms of Substance Misuse

a. Protecting Youth from Social and Behavioral Risks Due to COVID Isolation. COVID has brought unprecedented disruptions to daily life and many social changes, including significant impacts on our youth. These include closure of schools, restriction of after school activities such as sports and clubs, and enforced social distancing and isolation from peers. Scientific reviews of the effects of social isolation and loneliness have shown that “Children and adolescents are probably more likely to experience high rates of depression and probably anxiety during and after enforced isolation ends.” Loades, *J Am Acad Child Adol Psych*, 2020. Isolated youth may be vulnerable to greater drug, alcohol, and tobacco access; as well as to other environmental dangers such as unsecured weapons and unsupervised use of risky online sites when parents are working or when supervision is otherwise unavailable.

AODAAC, the Montgomery County Parent-Teacher Association, and Mothers Against Drunk Driving have collaborated to design a virtual prevention education program. It will inform parents about the added risks to youth during the COVID period. “Protect Your Family: Keep them Safe at Home,” is a brief and engaging presentation to raise parental awareness of major threats to teens and tweens who may spend hours home alone. The information enables parents to initiate meaningful conversations to gain insight into their children’s feelings and understand the ways they may need additional support. Each of the potential risks can be explored further via the vetted and authoritative additional information sources provided.

b. A Mini-Series to Educate the General Public on Substance Use is in the early planning stage. This learning series is envisioned as approximately 4 presentations planned for Spring 2021 addressing the addiction cycle, stigma, major classes of misused substances and their behavioral and physical effects, the value of early prevention interventions for youth at risk, and treatment models and delivery systems.

c. Identification of Improvements to Enhance Educational Value of the County-Hosted AODAAC website. A new AODAAC committee has been formed to review the site and to recommend feasible changes. The purpose of the review is to determine ways to enhance the content, audience reach, and format of the website to provide timely educational materials on substance misuse to county residents. Featured content would include fact sheets, county statistics, news features, and upcoming events. The information posted will be materials produced by vetted and authoritative groups.

2. Continuation of Advocacy for Legislation Related to Substance Use Prevention, Treatment, and Public Policy

Given the importance of having a voice in legislation that can affect the county’s ability to support evidence-based actions around prevention and treatment in the county, AODAAC will continue its tradition of legislative advocacy. During the past several years, AODAAC has tracked pending legislation at the state and county levels related to substance use. A yearly Legislative Retreat acquaints members with the processes and standards for preparing testimony and to review relevant proposed legislation. Last year, AODAAC members reviewed pending bills to identify several of highest priority and prepared both written and oral testimony to advocate for or against bills. After approval by the county, testimony is forwarded to the relevant legislative bodies and individual members may volunteer to present testimony orally.

3. Partnerships Development In addition to the two top priorities described above, AODAAC is also continuing to actively pursue partnerships with other BBCs—as well as outside organizations—around topics such as suicide prevention and tobacco control.

Montgomery County Council
Health and Human Services Committee

Work session: November, 2020

Policy Issues Submitted by the African American Health Program (AAHP) Executive Committee

Dr. Martin Luther King, Jr. stated, *“Of all the forms of inequality, injustice in health is the most shocking and inhuman”*

Health disparities and racial inequities adversely affect the Black community in Montgomery County in the following areas:

AAHP is dedicated to reducing the Infant Mortality rate to below the Healthy People 2020 (HP2020) goal of 6.0. According to Healthy Montgomery 2013-2017, the Infant Mortality rate for Blacks in Montgomery County is currently at 8.3 percent. The AAHP Start More Infants Living Equally healthy (SMILE) program was developed to address Infant Mortality utilizing evidence based strategies. AAHP has seen an increase in homeless pregnant women which involves more complex interventions.

- Black women are two to three times more likely to die from pregnancy related causes than white women. The CDC defines pregnancy related death as death of a women during pregnancy or within one year of the end of a pregnancy from pregnancy complications. This disparity exists despite the educational level the black woman. According to the CDC, “cardiomyopathy, thrombotic pulmonary embolism, and hypertensive disorders of pregnancy contributed more to pregnancy-related deaths among black women than among white women”.
- Much has to be done to close the gap as it relates to Black maternal mortality. Utilization of standardized protocols to treat and identify complications experienced by pregnant Black women should be implemented. Identification and removal of racial bias in the treatment of Black women will aid in closing the disparity.

Coronavirus disease 2019 (COVID-19) is a respiratory illness that is highly contagious and can spread from person to person. COVID-19 was first reported in the US on January 21, 2020, and, first reported in Montgomery County, MD on March 5, 2020. Those at higher risk for contracting COVID-19 include persons with serious underlying medical conditions such as heart disease, diabetes, and lung disease. African Americans/Blacks are disproportionately affected by these underlying medical conditions hence are at higher risk for serious adverse outcomes, including death.

- The evidence for this differential impact includes long term existing chronic health and social disparities:

- 1) Higher rates of underlying health conditions in African Americans/blacks (e.g. hypertension, chronic lung conditions, asthma, diabetes, kidney disease, and others);
 - 2) Socioeconomic factors (decreased access to health care, poverty issues, and other multiple negative social determinants of health.
- AAHP is not surprised that the top COVID zip codes mirror AAHP’s geographic hot spots. Priority for COVID testing should be in the geographic hot spots (i.e., East County, Gaithersburg, Lower Silver Spring) where the largest concentration of African Americans/Blacks reside and where there is a disproportionate rate of coronavirus infection and deaths of African Americans/Blacks.
 - It is important to educate African Americans/Blacks about the increased risk for the coronavirus and to immediately dispel any misinformation within the communities that African Americans/Blacks have protection from this disease. Stem complacency and COVID fatigue by enumerating ways to stay safe and avoid the disease. Encourage individuals to take steps if they might be sick such as have an increased temperature, trouble breathing, etc.
 - Racial profiling is defined as *"any police-initiated action that relies on the race, ethnicity, or national origin, rather than the behavior of an individual or information that leads the police to a particular individual who has been identified as being, or having been, engaged in criminal activity"* (“Racial Profiling”, Philosophy and Public Affairs, April 2004 edition). In addition, racism has raised its ugly head. The death of George Floyd and so many other African Americans/Blacks have further highlighted the racial divide in this country. As a result, racial trauma is weighing heavily on African Americans/Blacks. While racial profiling has always been a problem, living through COVID has exacerbated this issue, especially with the requirement to wear masks and the fear that many African American/Black males have around being profiled or killed for doing so. Recent police-initiated actions directed at Black people underscore the inequities experienced by Blacks in Montgomery County. Racial profiling has a serious negative impact on mental health.
 - There is growing concern that individuals, especially seniors, are disconnected from their social network of family and friends while quarantined and are unable to perform normal activities. As a result, there is a need to address social isolation, which has been exacerbated by the COVID pandemic. According to an article in Health Affairs (Holt-Lunstad, June 20, 2020, para. 6), there is “evidence that links social isolation to increased risk of death from all causes and increased morbidity across a variety of physical health outcomes”. Many in the African American/Black population already have high risk conditions that lead to poor health outcomes and are prone to experiencing social isolation and loneliness (Holt-Lunstad, June 20, 2020, para. 5).

With the onset of COVID-19 the AAHP is in position and will continue our work focusing on health disparities. While progress has been made in areas such as Infant Mortality, additional milestones must be achieved in identified zip codes with poor health outcomes. AAHP will continue incorporating primary and secondary prevention strategies that target our priority areas

- infant mortality, cardiovascular health and diabetes, STI/HIV/AIDS, cancer, oral health. AAHP will strive to reduce the incidence and prevalence of morbidity and mortality associated with these health disparities through the utilization of performance measures.

A decrease in health disparities improve the overall health of Montgomery County Maryland and assists in the achievement of the priority outcome of Thriving Youth and Families and a Thriving Economy. AAHP appreciates having this opportunity to share its priorities, as well as, having input into the future policies of Montgomery County and the County Council. Having partnerships with the County Council and the Department of Health and Human Services that strive to eliminate health disparities and improve the number and quality of years of life for African Americans and people of African descent in Montgomery County, are valuable.