C. COMPREHENSIVE PLAN OF SERVICES

1. Overview of Baltimore County

Baltimore County, with its strategic location in the Baltimore-Washington region, continues to attract people to live and raise their families in a comfortable blend of historic neighborhoods, suburban communities and rural landscapes. Over the past few decades the basic demography of the County has changed from predominantly rural to an urban/suburban and rural mix. The County is the third largest land area of any political subdivision in the State of Maryland. Within its 612 square miles (plus an additional 28 square miles of water) are situated at least 29 identifiable, unincorporated communities. Baltimore County surrounds Baltimore City making access to medical services and hospitals easily available to county residents and older adults.

Baltimore County remains the largest jurisdiction in population in the Baltimore region, which includes Anne Arundel, Carroll, Harford, and Howard counties and Baltimore City. Today, the county has the third highest population in the State of Maryland (2018 US Census Bureau Estimates). The County’s overall population grew 3% from 806,560 in 2010 to 828,431 in 2018. The rate and amount of population growth since 2010 has become somewhat smaller than in past decades. This smaller growth percentage, however, reflects the county’s effort to provide better-planned, environmentally sensitive growth and to promote a level of high quality residential and economic development.

a. Senior Population

Baltimore County’s senior population (60 and over) increased from 160,415 in 2010 to an estimated 186,412 in 2017, a 15% increase, as reflected in US Census data. In 2010, 20.4 percent of the total population was over age 60; the 2017 estimate is 22.5%. As County residents become older, the agencies providing services to the elderly are experiencing more demand for services. An older population impacts the job market, the types of facilities needed for housing, medical services and increased demand on transportation and other resources. Meeting these needs over the next decade is the challenge set forth for the Baltimore County Department of Aging (BCDA). Strategic planning sessions with staff in the Department and the Commission on Aging, as well as developing partnerships to provide the necessary services, and collaboration and cooperation with other agencies within the aging service delivery system are key elements in meeting the increased demand.

b. Trends

In 2010, Baltimore County’s 75+ population was 6% of the total population. In 2017, the estimates show over 7.3% of the population are in that age category. This increase in the “oldest old” population results in a dramatic increase in the demand for services. The increase in minority seniors is also a trend having an impact on demand for services and service delivery to the senior population.

2. FY 2020

Baltimore County Department of Aging (BCDA) recognizes the challenges in providing services to a diverse elderly population. The Department of Aging has developed several resources to support the needs of caregivers, families and older adults of all racial and ethnic groups living in our County. The Department has also made great strides in addressing and understanding the needs of the County’s older LGBTQ community. BCDA further assures that staff at all levels of the organization have
opportunities for cultural awareness/sensitivity trainings to best meet the needs of an increasingly diverse population.

The number of seniors who are low-income and minority continues to increase in Baltimore County. While the number of seniors living below the poverty level remained stable, the number of seniors living between 100 and 150% of the poverty level increased from 6.5% in 2010 to 8.2% in 2017. These “near poverty” seniors are especially disadvantaged as they do not qualify for as many services as those below the poverty level.

In 2010, 16.9% of the population of the county were non-White (minority) residents. In 2017, that figure increased to an estimated 23.3%. The largest increase was in the Black population, from 12.9 to 17.6%. The Asian 65+ population, while smaller, did increase by 30%.

The Limited-English Proficient (LEP) population of Baltimore County seniors has increased from 4.4% in 2010 to 4.8% in 2017.

3. FY 2020 - 2023 Plans for Targeting Priority Populations

**Individuals with Greatest Economic and Social Need**

Our senior centers are located throughout the county and provide specific programming of interest to minority populations. The number of hours of operation at the Fleming Senior Center, which predominantly serves minorities, has recently increased. In addition, the Islamic Society Nutrition Site participates in our Congregate Meals program.

MAP of Baltimore County maintains a contract with Language Line that is available for use by all Department employees. Language Line allows individuals on the phone to use interpreter services to more effectively communicate their needs to staff by using their primary language. Our Ombudsman and Home and Community-Based Services Supports Planning programs both have Russian-speaking employees to assist with the population of LEP seniors. Additionally, the County has a contract with an in-person interpreter service if needed for home visits. While we do not have a large number of individuals with limited English proficiency attending our senior centers currently, we do accommodate anyone who has difficulties navigating the senior centers due to language in our Center Connection program. Once the individuals have become acclimatized to the center and meet people with whom they can socialize they are transitioned out of the Center Connection program.

The Department of Aging websites meet standards for web accessibility, so that they are usable by people of all abilities. All Senior Center newsletters are converted to readable pdfs each month and posted on our website.

The Jacksonville and Hereford Senior Centers continue to serve the rural population of Baltimore County. Our CountyRide program provides transportation to rural residents of all ages. Community Outreach Workers who provide services under the umbrella of MAP visit individuals residing in the rural areas to assist with benefit applications so that they do not have to travel to a Human Services benefit office that can be as much as 25 miles away.

**Advisory Council (Commission)**

The purpose of the Commission on Aging is to advise the Baltimore County Department of Aging on policy issues and to provide a liaison between groups working on behalf of Baltimore County senior citizens. They do not provide direct services. The Commission on Aging meets the second Tuesday of
the month from 9 to 10:30 a.m. at Bykota Senior Center in Towson. No meetings are held during July and August.

The Commission was established in the County Charter/Code (1988 Code, § 17-246) (Bill No. 31-99, § 3, 7-1-2004). The Commission is a 15-member board, with eight members appointed by the Baltimore County Executive and one recommendation from each of the seven (7) County Council members. Members serve three-year terms, and there are no term limits. Current members are as follows:

1. Cynthia D. Allen
2. Virginia L. Billian, M.D.
3. Frances T. Bond
4. Donald A. Gabriel, J.D., Ph.D.
5. William Lambert
6. Eula Marshall
7. Roy G. Moreland
8. Al Muhlberger
9. Mabel Murray, Ed.D.
10. Sheila H. Roman, M.D.
11. Marlene B. Siegel
12. Sherita Thomas
13. Melody Truffer
14. Catherine M. Ward
15. Vacant

Recent activities include participation on the Department’s 40th Anniversary Planning Committee with one current Commissioner who has served continually since its inception. The Annual Senior Solutions Conference for professionals also engages Commission members on the planning committee and as moderators of individual sessions.

A future activity will be having each Commissioner serve on an Age Friendly Community work group within the topic of their expertise and choosing.

4. Coordination among AAA Programs and with Other Partners

BCDA will continue to facilitate the area-wide development and implementation of a comprehensive, coordinated system for providing long term care in home and community-based settings in a manner responsive to the needs and preferences of older individuals and their family caregivers, by collaborating, coordinating activities and consulting with other local public and private agencies, including the Baltimore County Department of Health and Human Services, which administers programs, benefits and services related to providing long term care.

The Department of Aging programs conduct surveys to obtain feedback on the needs and preferences of family caregivers and older adults. Once the feedback is received, the programs develop or identify strategies to meet these needs. Senior Care, Home and Community Based Services, MAP, Home Team, and the Senior Center network are designed to provide services, programs and connections to resources to assist clients who are at risk for institutional placement and wish to remain in the community.

We offer an extensive array of health-related evidence-based programs in Baltimore County senior centers, including: Walk with Ease, Chronic Disease Self-Management Program (CDSMP), Diabetes Self-Management Program (DSMP), Chronic Pain Self-Management Program (CPSMP), Tai Chi for
Better Balance, Stepping On, Move with Balance, EnhanceFitness, Healthy Eating for Successful Living in Older Adults, and Stepping Up your Nutrition. We also offer TimeSlips, Aging Mastery Program (AMP), and Aging Mastery Program for Caregivers (AMP-C). These programs are offered via staff, independent contractors, and/or guest experts from the community including medical and academic institutions in Baltimore County.

The Individual and Family Services Division has implemented two new evidence-based programs: Dealing with Dementia, and the Program to Encourage Active Rewarding Lives (PEARLS). The Dealing with Dementia program provides caregivers with a 300+ page resource manual that outlines strategies for taking care of an older adult with dementia in the community. PEARLS is designed to help individuals with depression identify issues and develop a plan of action to empower them to problem-solve and make life changes. These two programs, combined with the Department’s other evidence-based programs, offer a robust selection of programs that promote and support independence.

As part of the MAP and Community Outreach programs, older adults are offered the opportunity to participate in Options Counseling. This guides the individual in planning for long term care needs. Topics may include living arrangements, identifying in-home support as well as the need for advance care planning. The older adult is provided with a copy of the plan so that they may implement the identified strategies.

Through the MAP and Community Outreach programs, assistance is provided to low income older adults to apply for a variety of benefits to include SNAP, energy assistance, prescription assistance, transportation or any other benefits for which they are eligible. The Community Outreach Specialists provide case management to primarily low income, home bound clients.

There are multiple avenues that are utilized to disseminate information as it relates to long term care and the availability of public and private programs, options, service providers, and resources. Each year the Department compiles a Community Resources Directory and distributes it throughout Baltimore County and City. MAP, Community Outreach, Time of Your Life cable show and newspaper, the website, and social media are all venues through which the public obtains access to information and services.

a. **The Interagency Committee on Aging Services**

The Baltimore County Interagency Committee on Aging Services (IAC) is comprised of representatives of the following agencies:

- Baltimore County Department of Health and Human Services
- Baltimore County Police Department
- Baltimore County Fire Department and EMS
- Baltimore County Office of the States Attorney (as needed)
- Baltimore County Office of Planning
- Baltimore County Office of Permits, Approvals and Inspections
- Baltimore County Department of Recreation and Parks
- Baltimore County Public Libraries
- Baltimore County Office of Law (as needed)
- Baltimore County Executive Office

The IAC has gone through a recent revitalization to include more agencies to be more comprehensive in addressing countywide issues impacting the older population. Major issues currently being addressed include:
• Availability of dementia sensitivity training for front line employees including fire, police, and code inspectors
• Age Friendly Communities initiative being launched in Baltimore County
• Identification of illegally operating Assisted Living Facilities (ALFs) and marginal ALFs. This includes shared resources to address the issues including planning and zoning, permits, fire inspections, police responses, 911 calls for medical emergencies, Human Services/APS complaints, Ombudsman/Aging’s role, and Health and AERS visits. Recently, attorneys from Permits and Fire have been engaged to assist in the efforts to either bring facilities into compliance or have them closed.
• ADRC updates
• Inter-agency communications regarding benefit assistance follow-ups
• Ways to eliminate duplicative efforts between agencies

Likely to be considered in FY2020 are the following topics:
• Collaborative efforts to expand the availability of affordable housing for older adults in the community, which may necessitate inclusion of the Office of Economic Development
• Collaborative study of the current zoning regulations and any changes that may be needed to accommodate more creative housing solutions (co-housing, home sharing, etc.)
• Bringing together for review and analysis data collected by each agency that may help to tell the story of older adults in the community
• Work group composition for the Age Friendly Communities initiative and each agency’s commitment
• Collaborative grant possibilities

b. Community-based Services to promote independence

The Baltimore County Department of Aging’s Senior Care Program coordinates in-home and community based long term support services to county residents at risk of nursing home placement. Service coordination occurs through the Senior Resources office and case management is provided by the Department of Aging’s Community Outreach program and the Baltimore County Department of Health and Human Service through AERS and DSS. Funding for services includes personal care; chore; medication assistance/equipment; Adult Day Services; Personal Emergency Response Systems; grants to families; and, respite care. The Department contracts with private vendors to provide the identified services.

While all clients are assessed for their ability to pay privately for services, all new Department of Aging clients are offered Options Counseling. This tool identifies what the client will be able to assist with as part of their plan of care. If the client is not able to pay privately for services then applications will be made for programs such as In-Home Aide Services, Community First Choice or CPAS. If the client has Community Medical Assistance or is in need of Long Term Care Support Services, a Level 1 screen may be completed and the client placed on the registry for Home and Community Based Services. Once all options are exhausted, the client may then be placed on the Senior Care wait list. The wait list continues to have on average 200 or more clients.

The goal for the upcoming year is to work in conjunction with Baltimore County AERS to insure that each Senior Care referral has an InterRai assessment completed as part of the intake process. Each current client will also be assessed by AERS and then reviewed on an annual basis.

As part of a new Senior Care initiative, a Senior Resource Specialist has been working with clients on the Senior Care wait list to provide resources, assessments, and referrals. The Senior Resource Specialist conducts home visits to those on the wait list to assess needs, provide access to evidence
based programs, and to refer to other programs within the community. In addition, clients are assessed for and assisted in obtaining adaptive devices. Clients are also evaluated for one time only services or short term assistance which may be accessed through Senior Care or Seniors in Need (BCDA-specific fund created through fundraising efforts). The Senior Resource Specialist is also trained as a counselor for PEARLS.

Baltimore County’s home-delivered meals contractor at this time is Meals on Wheels of Central Maryland. The case managers through Aging and Health and Human Services provide ongoing case management to the home-delivered meals clients. During the initial intake, the clients are also screened for other programs and services. A Nutrition Risk assessment and screening are completed as part of the intake to determine if follow up is needed for additional nutrition services. Senior Resources and Meals on Wheels are partnering together to provide wraparound services to support people in their homes. Some of these wraparound services include grocery shopping, friendly visitors, and phone pals. By partnering together, overlap and duplication of services are prevented. In addition, wraparound services enable clients to continue to stay in their homes. Offering home-delivered meals to clients discharged from the hospital has been instrumental in preventing a readmission to the hospital. This has been a vital service as part of the Department’s Hospital to Home program, which seeks to prevent hospital readmissions for at-risk clients. This is a partnership with Northwest Hospital. As this program continues, further options for specialized meals will be evaluated.

The primary gap in resources for disabled older adults continues to be the lack of affordable and accessible housing. Many of the housing units have extensive waiting lists and the Housing Choice Voucher program is no longer accepting referrals. For older adults that require more assistance with their physical needs and daily supervision, there is also a gap in affordable Assisted Living Facilities.

In addition, funding is limited and there continues to be waiting lists for many of the needed services that includes: In-home care; adult day services; medical supplies; assistance with prescriptions; and, access to home and community based services.

Access to mental health services continues to be fragmented and it is difficult for older adults to navigate the system. The challenge is to link the client to the most appropriate provider and insure that there is a payer source for services. There is a need for more mental health providers to offer in-home services.

The Department’s MAP and Community Outreach Programs have been merged together in an effort to streamline services and reduce duplication of services. The MAP and Outreach Specialists screen clients to determine if they are eligible for Medicaid programs and provide assistance with applications as needed. Level 1 screenings are offered to clients who need Long Term Care Services and Supports (LTSS) and are placed on the registry for Home and Community Based services. Those who are eligible for Community First Choice or CPAS are referred to the Health Department for follow up.

The MAP and Community Outreach staff have access to the LTSS system and are able to look up clients and see if there is a Supports Planning agency already involved. If so, clients are referred to their Supports Planner for assistance. If there is a service identified that is not covered by the Medical Assistance program, the client may be assessed for an alternative program through MDoA, but this is as a last resort.
c. Case Management

Case Management services are provided by the Departments of Aging and Health and Human Services. There is a coordinated effort between the agencies to avoid duplication of case management services. If there is a question as to whether or not another agency is involved with a client, a supervisor is contacted for clarification. When a client is referred from one agency to another, there is a process for obtaining the needed information to insure continuity of care.

The Department of Aging has identified and is finalizing plans to purchase a software system that will support the Department’s case managers from the initial referral to the assessment to service delivery. This system will enhance the staff’s ability to see what aging programs or services the client is already receiving and the assigned BCDA case manager. It is anticipated that this will streamline the process and avoid duplication.

By utilizing the LTSS system, staff are able to look up clients and see if there is a Supports Planner involved in the case. This assists with coordination through the federal Medicaid program.

The BCDA staff who provide the case management services do not have any direct or indirect ownership or controlling interest in, or a direct or indirect affiliation or relationship with, an entity that provides services other than case management services under this title.

d. Mental Health Services

Access to mental health services for older adults continues to be a challenge. And, mental health services for older adults continue to be fragmented. To address this need and link clients to services, BCDA has the following initiatives to increase awareness of mental health issues and to reduce barriers in accessing services:

- Offer PEARLS to older adults through the Senior Resources office. The Senior Resource Specialist has been trained as a counselor and is in the process of implementing the program. It is anticipated for the first year that at least 10 clients will take part in the program. At the end of the year, the agency will evaluate the ability to expand the program and train additional counselors.

- Through the Department’s social media, provide information on mental health services and programs, tips on how to improve your mental health, and information on healthy living. Each year the Department also promotes Mental Health Awareness month.

- Through the ADRC, offer training on mental health issues in older adults and those with disabilities and how to access services.

- Assess the feasibility of offering a “Mental Health Screening Day” in the senior centers.

- Expand knowledge of and access to the Behavioral Health Administration’s Older Adult Behavioral Health PASRR Specialist. Programs that will benefit from this service include Hospital to Home, MAP/ COS, Guardianship, and Ombudsman.

- Continue to utilize the services of the Geriatric Services Team (GST) which is funded through a contract with the Department of Health as the local Core Service agency. This includes providing psychosocial group sessions at designated senior centers, individual therapy to homebound clients.
as well as consultation to staff members. The current vendor is very responsive to referrals and has expanded services throughout the county.

- Continue to make referrals to the Baltimore County Crisis Response team. The Department also receives referrals from Crisis Response and both agencies frequently consult with each other.

- Represent BCDA as a member of the Baltimore County Behavioral Health Advisory Council. In this role, the staff member represents the needs and concerns of older adults and those with disabilities. There is also input into the Council’s annual plan.

- Participate as a vendor at the annual Behavioral Health Fair hosted by the Department of Health.

- Assist the significant number of client’s 65 and under who call SHIP with stress and anxiety about transitioning to Medicare, particularly if they were on Medical Assistance. Certain mental health providers in the community only accept Medical Assistance. Therefore, the transition results in a loss of support network. The Health Department can serve as a resource in these instances. In addition the SHIP team can assist with a Medicare.gov search for mental health providers who accept Medicare.

- Conduct outreach via the SHIP program to sites with large numbers of mental health consumers such as the Baltimore County homeless shelters. Mental health providers also make referrals to SHIP regarding individual Medicare issues.

- Offer mental health services for Public Guardianship wards through community programs or by providers who visit nursing home or assisted living facility residents. Guardianship program staff arrange mental health services when appropriate for their clients; additionally, Guardianship case managers coordinate mental health evaluations and hospitalizations including admission to a geropsych unit for wards when necessary. Mental health services may also be provided in order to monitor the efficacy of psychotropic medications for individual wards.

- Chair the elder abuse prevention coalition - Baltimore County Restoring Elder Safety Today (BC-REST). Participants include mental health providers and the CSA, who assist the coalition to provide elder abuse prevention information to those with mental illness and substance abuse. At BC-REST’s annual World Elder Abuse Awareness Day event, there is often a mental health education component.

- Identify potential mental health issues when talking with MAP callers and offer help with linking to treatment. MAP staff, who receive mental health training, continue to use the suicide call protocol as indicated. MAP updates the database to insure that the list of mental health services and providers are available to clients.

- Assist with the growing number of senior center participants with mental health issues. BCDA has used the State’s Senior Center Operating Funds Grant to hire a Social Worker to assist with:
  - Confidential one-on-one appointments with individuals experiencing mental health issues
  - Development of interventions and/or behavior contracts for individuals with challenging behaviors so they can remain in the center
  - Meetings with staff to discuss any mental health issues and offer training and procedures for days when they were not on site.
o Leading support groups on topics of interest to the membership (e.g., dealing with loss, depression vs. anxiety, skills for good mental health)

o Mental health screenings

o Linking individuals to resources, and consulting with relevant parties to establish a coordinated plan

o Providing crisis intervention and updating crisis response procedures

The social worker holds regular operating hours at each larger regional senior center two days a month and assists at the smaller community senior centers when needed. In FY19, the social worker interacted with 211 unduplicated individuals in total including:

o 203 one-to-one sessions held with 95 individuals served

o 57 groups held with 136 individuals served

o Three conflict resolution meetings held

o 48 people screened.

e. Emergency Preparedness Plan

The Chief of Individual and Family Services is the primary agency coordinator with the county’s Emergency Operations Committee (EOC). The EOC conducts two emergency exercises per year. When the command center is activated, a representative from Aging may be called upon to serve in the center to coordinate the emergency response with other agencies.

BCDA has assisted in the past with shelf-stable meals, transportation, and emergency funding for people impacted by emergencies, and will do so again if called upon.

The Division Chief maintains the Emergency Operations manual for the agency. In the event of a major disaster that requires lengthy recovery, the MAP staff, including Community Outreach, are on stand-by to be assigned to county disaster recovery centers (FEMA).

• Senior Education

In the event of a planned emergency such as a hurricane or blizzard, the case managers will educate their clients about sheltering in place and evacuation. This includes providing them with information on what supplies they will need and to insure that they have at least a week’s worth of medication. Clients are supplied with “orange cards,” which allows them to document important medical information and emergency contacts. A wallet-size version of this card stays with the individual, another is given to the emergency contact, and a larger version is affixed to the refrigerator with a magnet for use by paramedics in the event of a medical emergency in the home.

MAP provides information to callers on emergency preparedness and encourages older adults to have a plan. Fact sheets are mailed out as requested.

The Baltimore County Department of Health and Human Services has an Emergency Preparedness office with staff who regularly visit the senior centers and senior apartment buildings to provide educational sessions on preparing “go bags” and preparation for sheltering in place.
• Outreach Initiative

Each case manager compiles a list of their vulnerable clients. This list is then shared with the Division Chief. These clients are contacted prior to a weather event and/or after a disaster occurs. Center Connection staff, who assist with vulnerable adults at senior centers, have access to their client lists that they can use in an emergency.

The county’s Health Department maintains contact with licensed ALFs and nursing homes. If Police or Fire Department personnel are contacted and it involves a vulnerable adult, they are referred to the Department of Aging for follow up.

• Facility Identification

A thorough inventory of Baltimore County’s senior centers has been conducted and will continue to be utilized to identify appropriate locations for reception centers in the event of an emergency. BCDA responds to requests from the Office of Emergency Management when a need arises for one or more of the centers to be used. As part of the Continuity of Operations Plan, alternative work sites have been identified for use when the main offices cannot be occupied.

• Personnel Resources and Training

The Continuity of Operations Plan delineates the roles of staff in emergencies. BCDA has one primary representative and back-up staff trained for the Emergency Operations Center. CountyRide (para-transit) drivers have received Emergency Vehicle Evacuations Training and all CountyRide staff are NIMS certified.

• Medicaid LTSS Supports Planning emergency backup

  o In each plan of service developed for the enrolled clients, there is a requirement to include an emergency contact person.
  o The client’s profile summary for enrolled clients that is in LTSS will also be maintained in the BCDA Home and Community Based Services (HCBS) Supports Planning (SP) client electronic file folder.
  o Utilizing either LTSS or the BCDA HCBS Supports Planning (SP) folder, the SP contacts will be able to verify the status of the clients.
  o Clients residing in Assisted Living Facilities and families have a responsibility in notifying the HCBS Supports Planning Agency in the event of an emergency.
  o Clients that reside independently in their homes will be prioritized due to likelihood of having little or no supportive care.
  o Assisted Living Providers will also be contacted to ensure that their back up plan has been activated if needed.

5. Nutrition and Supportive Services

a. Nutrition Services

1. Nutrition Trends
The number of congregate meals served has steadily declined over the term of the past Area Plan. This can be attributed to changes in the way individuals participate at the senior centers (fewer remain all day), the availability of low-cost options near meal sites, an increased trend toward lighter lunchtime meals (i.e., boxed lunches, healthy bowls, salad/soup and sandwich combinations), and demand for “grab and go” meals.

We are currently working on a pilot project with the Administration for Community Living (ACL) to look at best practices in congregate meal donations. The ACL staff met with focus groups of participants and non-participants at the Liberty Senior Center meal site and are drafting materials based on their discussions which are geared to increasing the amount donated in the confidential envelopes.

BCDA has developed an application that will be distributed to senior housing complexes in the county to identify any sites that want to join the program. Recent changes to the Health Department requirements (eliminating a $300 plan review fee for new commercial kitchen licenses) may assist in attracting new sites. BCDA is also planning to offer more evidence-based nutrition programs at our meal sites, including Stepping Up Your Nutrition and Healthy Eating for Successful Living, as well as expanding our nutrition education program using more food demonstrations.

According to our annual survey, compared to the previous year the proportion of younger seniors (60-69) is decreasing in the congregate meal program and the proportion of older participants (80+) is increasing. In FY17 29% were under 69 and 37% were over 80, compared to 20% under 69 and 47% over 80 in FY18. Survey results indicate younger participants in our congregate meal program desire more fish, seafood, lean meats, salads, and soups. We have also heard that younger seniors want more flexibility in the meal options (e.g., “grab and go”) and more options that cater to specific diets (e.g., Gluten-free, Mediterranean, Diabetes). The older participants that enjoyed the heavier lunch meals are decreasing in numbers.

2. Nutrition Program Administration, Contracting and Operations

We offer 35+ Eating Together Programs in all areas of the county so as to reach as many low income individuals as possible. As the program only asks for voluntary, confidential donations, we are not discriminating in any way against those who do not have the ability to pay. Almost 80% of the
individuals in the Eating Together program are 70 years of age and older, with about 40% being over 80. The 80+ are traditionally a group with greater social need and we actively recruit these individuals to our program during program intakes and registration. Our 2019 BCDA educational initiative, which will be continued in 2020, is targeted at identifying isolated seniors in the community and getting them involved in nutrition and senior center programs. We are paying special attention to raising awareness about the socialization value that our congregate meal program offers. On September 12, 2019 we will be hosting “No Senior Eats Alone Day” in Baltimore County to further encourage awareness of social isolation and, if successful, it will become an annual event. The FY18 nutrition program survey found that 71% of respondents indicated they are more socially involved with others as a result of participating in the Eating Together program.

Currently, 68% of our participants are White, 26% are Black, 4% are Asian and the remainder identify as other races. We have procedures in place to accommodate anyone with limited English proficiency who wants to participate in the congregate meal program. We also have two Eating Together programs in the rural areas of Baltimore County.

With regard to meeting the needs of these priority populations, these priorities are included in our Request for Proposals when any nutrition contract is bid. We also meet on a regular basis with our caterers to discuss any needs that arise. For example, we had an individual who needed pureed meals and we met with the contractor and their case worker to determine how to best accommodate this need so the individual could remain in their home and not be moved to an institution.

We have comprehensive Nutrition Program Standard Operating Procedures that govern our operations. It is our objective to serve as many meals as the budget allocation allows each year. We are planning to add more sites to compensate for declining sites once the Health Department clarifies their kitchen requirements for housing sites.

We currently do annual surveys of all regular participants and collect weekly meal comment reports from each site which are discussed regularly with the caterers. We have a Nutrition Program Manager who is a Registered Dietitian, an Office Coordinator, two Nutrition Field Coordinators who oversee the congregate meal programs in the senior centers, and two Nutrition Site Specialists who oversee the community nutrition programs, and staff in the senior centers whose responsibilities include the nutrition program. In addition, we work with many volunteers and staff paid by the housing sites to operate the programs. All laws and regulations are strictly followed. In addition, the caterers also have Registered Dieticians on staff.

All Congregate Nutrition clients complete a registration form that provides necessary information on the participant’s economic and social demographics and emergency contacts. This information is kept confidential.

We follow all state requirements and document these in our Standard Operating Procedures Manual. In addition to senior centers, we offer our congregate meal program in housing and community sites that represent cultural and ethnic preferences. We offer Kosher and Halal meals. All of our sites are ADA compliant. Our MOUs with housing and community sites require the dining space be ADA accessible. Special plates and utensils will be provided if needed, based on notification from participants. BCDA also has a large Assistive Technology library to demonstrate what is available if people are interested. Nutrition Site Specialists, staff and volunteers with the program assist those with disabilities as needed.

Our Standard Operating Procedures detail all the equipment that should be used and they must comply with National Sanitation Foundation standards. All of the sites comply with Health
Department codes and monitoring of all sites is done on a regular basis. BCDA follows MDoA procedures for procuring catering contracts.

Nutrition education is provided at each senior center and nutrition site at least twice per year; some centers provide programs monthly. The educational programs are interactive and encourage all Eating Together clients to participate.

Our evidence-based programs complement the nutrition education programs and often include a nutrition component in the discussion. A nutrition/food page is part of the Senior Digest published eight times per year. In 2019, BCDA is planning to celebrate “No Senior Eats Alone Day” on September 12. Throughout the community, people will be asked to plan a meal with an older adult at either our Eating Together sites, in their homes, or out in community settings (i.e., restaurants, parks). The goal is to address the loneliness and social isolation of older adults by sharing a meal with someone and engaging in discussion. Local restaurants will be asked to give a discount on this day or have some other kind of dining perk. In addition, HACCP food safety/sanitation trainings are held quarterly at senior centers and nutrition sites. Each month, a brief nutrition education topic is printed on the menus and additional materials are distributed with the Emergency Meals and Farmers Market Coupon Books.

Senior Center Regional Managers, Senior Center Directors, Assistant Directors, Activity Specialists, Nutrition Program Manager, Nutrition Field Coordinators, Nutrition Site Specialists and Senior Aides working with the nutrition program are ServSafe-trained so that a certified food service manager is on site any time meals are served. Standard Operating Procedures are revised annually to include new policies and procedures. The congregate meal program is supervised by the Nutrition Program Manager who is a Registered Dietitian and licensed nutritionist and ensures all nutrition services polices are followed. The Nutrition Field Coordinators, Site Supervisors and Program Manager all conduct ongoing training for volunteers and new employees. These staff also conduct random monitoring visits to ensure policies and procedures are being followed. The staff also checks meal temperatures and food quality by tasting a meal whenever meals are ordered at the senior center where they are located.

Quarterly reports are sent to the Maryland Department of Aging and BCDA staff highlighting expenditures, units of service, unduplicated participants, program income and volunteer data. This information is tracked monthly by the Nutrition Program staff. Each month the sites are given reports which alert them to their progress in booking super special meals and use of their annual meal allotment. All client information is kept in locked cabinets or file drawers and the originals of the form are sent to the Computer Operations office for data entry into BCDA’s client database.

Congregate meal participants provide feedback on a daily and weekly basis through phone surveys and monitoring forms. This feedback includes temperature problems, shortages, quality concerns, supply problems and compliments (or complaints) to the caterer. For urgent matters, such as temperature problems, the caterer is contacted to resolve the problem immediately. Other issues are addressed with the caterer at monthly meetings. A formal survey of all participants at senior centers and nutrition sites is completed annually.

Nutrition screening is completed for each nutrition program participant by staff at senior centers and by Nutrition Site Specialists at their nutrition sites. Seniors found to be at high nutrition risk are advised to discuss the screening with their health care provider or to contact the Baltimore County Department of Aging nutritionist. Community Outreach Specialists or other county case managers complete screenings for Home Delivered Meals clients.
Seniors are made aware of the availability of nutrition counseling in the Baltimore County Department of Aging Senior Resources Directory and through Department of Aging staff, nutrition site staff, and other seniors. There is usually no more than one request per month for nutrition counseling; therefore, there is no budget line item for counseling. Several requests each week for nutrition information are satisfied by the BCDA Nutrition Office. In addition, Meals on Wheels of Central Maryland provides nutrition counseling to our clients through our Home Delivered Meals program.

b. Supportive Services

1. Federal Programs—Title III-B

   • In-home services

   In-home services are part of the care plan for many clients served by BCDA. In some cases, the services are funded by clients or families. In cases where clients need publicly-funded services, a case manager explores all available resources with the client and family, as appropriate. In the case of short-term respite, family caregivers may be referred to the National Family Caregivers Support Program to make an application for a respite stipend. Case managers from the Departments of Aging, Health and Social Services apply for Senior Care on behalf of clients, while at the same time applying for In-Home Aide Services through DSS. Clients needing in-home care are encouraged to participate in a Level 1 screening for LTSS. In-home services are part of a comprehensive care plan that may encompass many other elements, including entitlement applications or home modification.

   The Home Team Program mobilizes volunteers to provide friendly in-home and telephone visits to Baltimore County seniors, aged 60+, who lack social support from family and friends and/or are isolated and confined to their homes. Home Team volunteers provide the needed interaction, socialization and reassurance that allow seniors to remain independent longer and enjoy an improved quality of life. Many Home Team volunteers also assist with the provision of transportation to and from medical appointments and grocery shopping, along with light housekeeping. With the assistance of volunteers, the Home Team Program sorts, packs and delivers donated nonperishable food items to seniors who are at or below poverty level through a program-sponsored food drive. Volunteers also regularly pick up and deliver food from local food pantries to seniors in need. Home Team hopes to expand their escort program in the future through a transportation grant.

   • Access services

   Baltimore County Department of Aging uses the resources of publications, speaking engagements, informational events such as health fairs, and outreach opportunities to provide information to the public about the services of the Department. We also partner with Comcast and Baltimore County cable television to produce The Time of Your Life, a television series that provides information about special events and services of the Department. Social media is utilized for outreach purposes to keep the public informed about events and information on services. Our annual Power of Age Expo held in October each year displays information from dozens of service providers, both government and private.
• Legal services

The Department contracts with Maryland Legal Aid to provide services to county residents age 60 and older, with a focus on those in greatest social and economic need, and in the priority areas of the Older Americans Act. Legal Aid provides older adults with legal advice, consultation, brief legal services, and representation at administrative hearings or in court on civil matters including health care, income maintenance, nutrition, housing and utilities, protective services, employment issues, and other matters that impact the clients’ life, health or safety. Legal Aid provides a Senior Legal Hotline for quick access to legal experts. Clients under 60 are able to access this hotline as well. In addition, they provide training and consultation to Department of Aging staff, public education and outreach. The Legal Aid staff attorney participates on the Advocacy Conference Planning Committee and on BC-REST elder abuse prevention coalition.

In addition to services provided by Title III, in May the BCDA’s senior centers provide free advance directives in celebration of Law Day at all 20 senior centers. There is also additional programming throughout the year on a variety of legal topics. Advance Planning is also included in the Aging Mastery Program curriculum and programs on advanced planning are offered in the senior centers leading up to Law Day.

• Other Services

Our Communications office develops numerous publications for distribution throughout the County, including our Time of Your Life newspaper and the Community Resources booklet. The Radio Reading Program, through a grant from BCDA, provides Interpreting/Translation services to those persons who cannot read for themselves. BCDA’s 20 Senior Centers have numerous classes and activities for their members which provide them with much needed physical activity and recreation, some of which are described in the next section.

2. Federal Programs—Title III-D

Health education presentations and screenings are provided on an ongoing basis to help seniors learn ways to improve their health and quality of life. Baltimore County has partnered with various health organizations, hospitals, colleges/universities and businesses for health programs and screenings.

The agency currently offers the following evidence-based programs at BCDA senior centers, funded in part or whole through Title IIID funds and with the cooperation of community partners: EnhanceFitness, Stepping On, TimeSlips, Move with Balance, CDSMP/DSMP/CPSMP, Aging Mastery Program, Aging Mastery Program for Caregivers, Fit and Strong, Tai Chi for Better Balance, and Walk with Ease.

Over the past several years, evidence-based programs have been developed to address the many challenges faced by the senior population as they age, by preventing the progression of existing chronic conditions, the onset of new chronic conditions and the incidence of falls and injuries, while maintaining or improving healthy behaviors. Throughout the timeframe of this Area Plan, BCDA will continue to develop partnerships and find more avenues of funding to add more evidence-based programs to meet the increasing needs of the senior population. In FY19, BCDA hired a 20-hour/week program specialist to assist the Program Coordinator with the expansion of evidence-based programs in the community, thus providing more evidence-based exercise and workshop opportunities to assist the senior population with living longer, living well.
3. Federal Programs—Title III-E—National Family Caregiver Support Program (NFCSP)

a. Implementing NFCSP

Through a grant from NFCSP, the Baltimore County Department of Aging Caregivers (BCDACG) program serves family caregivers, regardless of their primary residence and household income, who are providing hands-on care assistance for Baltimore County seniors age 60 and over. Baltimore County grandparents aged 55 and over caring for grandchildren under age 18 are eligible for the Grandparents program. Family caregivers and grandparents caring for adult relatives age 18 to 59 with developmental disabilities are served through the NFCSP grant as well.

- Education, Training and Support

One-to-one in-home consultation and incoming counseling phone calls to BCDACG are included in this category. Referrals for consultations come through Maryland Access Point (MAP) of Baltimore County and from other county programs and agencies. Individuals also call directly for services. BCDACG staff, including specialists, the manager and the office assistant, provide services and support in this category. Services in this category are non-means tested. The BCDACG program is the county’s designated service unit, supported by NFCSP funding and County matching funds. Services are integrated through referrals internally and externally.

- Respite Care

A family caregiver of any age, regardless of household income, caring for a Baltimore County senior and assisting with two or more major ADLs is eligible for up to $300 per fiscal year per family. Respite Applications are submitted by case managers of the BCDA Community Outreach (COS) program, as well as BCDACG staff. All documentation and processing of stipend checks is done internally within Baltimore County government. There are no contracts with Respite providers or vendors. Services in this category are non-means tested. The BCDACG program is the county’s designated service unit, solely supported by NFCSP funding for Respite. Services are integrated through referrals internally and externally.

- Supplemental Services

A family caregiver of any age, regardless of household income, caring for a Baltimore County senior and assisting with two or more major ADLs is eligible for up to $300 per fiscal year per family. The majority of caregivers request medical supplies such as adult briefs, pads, medical supplies not covered by insurance or nutritional supplements. Occasionally, requests are made to supplement the cost of a piece of equipment. Supplemental Services applications are submitted by BCDA COS case managers as well as by BCDACG staff. All documentation and processing of stipend checks is done internally within Baltimore County government. There are no contracts with providers or vendors for Supplemental Services. Services in this category are non-means tested. The BCDACG program is the county’s designated service unit, solely supported by NFCSP funding for Supplemental Services. Services are integrated through referrals internally and externally.
• **Access Assistance**

Services in this category are captured by the COS program and MAP of Baltimore County. MAP certified information and referral specialists (CIRS) provide family caregivers with assistance, information and referrals in the MAP office via telephone, email and in-person, regardless of the caregiver’s income. Follow-up is done via mailings, over the telephone and in-person visits as needed. This assistance and support is offered regardless of the caregiver’s and the family income. All contacts and follow-ups are documented. One worker from COS and one CIRS from MAP are paid for by NFCSP funding and County matching funds.

• **Information Services**

BCDACG information and outreach services includes, but is not limited to: caregiver group presentations throughout the community, monthly resource sessions in senior centers, presentations to college students at Towson University, Johns Hopkins Called to Care Caregiver Cafes, outreach in public libraries, fliers and ads, weekly BCDA Facebook posts, information tables at community health fairs, Project DOCS literature racks in physician offices and major county hospitals, quarterly Caregiver Connection newsletter via mailing and email, general mailings, caregiver exhibits at the BCDA Power of Age Expo, spotlight appearances on Cable television shows, an annual spring Caregiver Mini-Conference, annual National Family Caregivers Month celebrations in November, and various newspaper advertisements and articles.

b. **Integration into a comprehensive system of services for older individuals**

New initiatives include: Evidence-based programming through Dealing with Dementia workshops, Aging Mastery Program for Caregivers (AMP-C) and, in the future, PEARLS, Powerful Tools for Caregivers and more. A designated BCDACG staff person will implement the Dementia Friendly program in Baltimore County. A partnership with the Community College of Baltimore County (CCBC) will result in a class for caregivers to learn hands-on techniques from college nursing staff.

Information services are coordinated and provided by all BCDACG staff. MAP of Baltimore County provides Speakers Bureau opportunities for BCDACG staff participation. Partnerships with entities such as Easter Seals, Johns Hopkins Called to Care and AARP Maryland have resulted in collaboration on outreach events. All offerings in the information services category are free of cost to participants. Services in this category are non-means tested. The BCDACG program is the county’s designated service unit, supported by NFCSP funding, County matching funds and in-kind support. Services are integrated through referrals internally and externally.

c. **Grandparents and other older relative caregivers**

Through the Catholic Charities Kinship Navigator Program and the COS program, Supplemental Services stipend applications are completed with qualified kinship caregiving families. Eligible are Baltimore County grandparents age 55 and over, regardless of household income, having primary care responsibility of one or more minor grandchildren under age 18 or an adult child with a developmental disability age 18 to 59. Eligible grandparents can receive up to $250 per fiscal year per family. The majority of requests are for clothing (school uniforms, winter coats and other clothing). All documentation and processing of stipend checks is done internally within Baltimore County government. There are no contracts with providers or vendors for Supplemental Services.
BCDACG program works closely with Catholic Charities Kinship Navigator Program staff who offers support as well as ongoing case management services for grandparent kinship caregivers. BCDACG program refers grandparents to that program for support services. BCDACG program coordinates with the Kinship Navigator Program to make annual presentations to grandparent gatherings. Occasionally, invitations are extended by Baltimore County Public Schools (BCPS) to speak to groups about this issue. In collaboration with Catholic Charities and Baltimore County Department of Social Services, BCDA periodically produces Parenting another Generation, a newsletter for grandparents.

Services for grandparents are non-means tested. BCDACG program is the county’s designated service unit, solely supported by NFCSP funding. Services are integrated through interagency partnership and referrals internally and externally.

NFCSP funding for 2020 through 2024 will sustain the mandated services as outlined above. With NFCSP funding, the BCDACG program will maintain the program services and the level of integration within Baltimore County’s existing comprehensive system for services for older adults. All programs, services and resources for family caregivers and grandparent kinship caregivers in this jurisdiction are non-means tested and are offered free of charge. Baltimore County Department of Aging Caregivers Program will maintain the high standards and quality services with continued funding from the National Family Caregivers Support Program.

4. Federal Programs—Title VI

Ombudsman Program: Priorities and Plan

a. Priorities

1. Ombudsman Program Priorities
   o Create a Dementia 101 Series for residents at Long Term Care sites. The program will develop a fact sheet in conjunction with the Alzheimer’s program on the basics of Dementia, TIPS and Tools as they encounter members in the LTC settings and resource/contact numbers. The program will also create an educational visit schedule hosting a liaison from the Alzheimer’s Association to talk about Dementia via there “I have Alzheimer’s” series. Designated local nursing homes and ALFs will be chosen based on requests that have come from residents or resident/family councils, staff/volunteers or complaint calls the program has received.
   o Enhance the volunteer recruitment process to include a diverse group of volunteers. Continue to provide volunteer training and incorporate the latest information on regulations and policies.
   o Ensure consistent visits to Assisted Living Facilities and focus on the 1-4 bed homes as well as provide oversight to facilities that have frequent complaints. The Ombudsman team will continue to follow up on any new sites that open.

2. Systemic Advocacy
   o Provide training to providers on the discharge planning process after the discharge notice is issued.
   o Provide education to Long Term Care sites on the new Emergency Preparedness regulations.
   o Provide education to Long Term Care providers on resources for residents with behavioral health concerns.
   o Provide support and consultation to the IAC as it relates to the county’s coordinated strategy for addressing emergency closures of Assisted Living Facilities.
b. Visitation

The Ombudsman program has added a new Ombudsman position which will enhance the program’s ability to visit long term care facilities. With the addition of the position, the facilities will be reassigned to insure adequate coverage throughout the County.

The Ombudsman will assign all volunteers to Assisted Living Facilities depending on which field office they work from to include Catonsville, Towson, Parkville and Dundalk. This year the program added 3 new volunteers. In addition to the volunteers, the program utilizes student interns from the local colleges and universities. Each student is assigned to facilities and completes a designated project that enhances the lives of the residents.

The Ombudsman program has developed a telephone reassurance program designed for those residents that have minimal support systems.

c. Volunteers

The recruitment process for volunteers is an ongoing process. The program utilizes RSVP, newspaper ads, program presentations and the newsletters through Ombudsman and the BC-REST coalition. All of the screening is completed by the Ombudsman program manager.

The Ombudsman program will evaluate the feasibility of adding one additional volunteer training in the fall. All candidates will have the opportunity to participate in the local training held in the spring or in any statewide trainings throughout the year. As part of the training, CEU’s are offered quarterly and volunteers receive e-blasts monthly to keep them abreast of upcoming events and program updates.

Volunteers are invited to the monthly staff meetings throughout the year which promotes a sense of team building and cohesiveness.

Each year there is an annual Ombudsman Volunteer recognition and celebration.

d. Councils

The Ombudsman program has updated three brochures which provide information on the role of the Family Council and the Resident Council for both nursing homes and Assisted Living Facilities. These brochures highlight roles of each setting, the rights of the councils, state and federal regulations and how the Ombudsman can provide education and advocacy assistance.

The Ombudsman program plans to provide mini signs, inserted in an upright plastic sleeve holder that can sit in the lobby areas in the all nursing facilities and designated ALFs for families, residents and the general public to see how to reach the program for assistance, as well as listing the website to the local program. The program will also provide all current family council presidents a copy of the updated Family Council (FC) brochure with a note advising of the program’s ability to attend any meetings with an invitation, provide any industry updates or talk about any local educational opportunities. The FC brochure will also be inserted in the “welcome folder” prepared for all ALF quarterly visits made throughout the year.

The program has also added resources and updated the Advocacy and Aging Education Lending Library.
e. Coordination

The Ombudsman program will continue to develop effective working relationships with other agencies and organizations. This will include:

- Involvement in a statewide team responding to ALF emergency closures; long term care issues; relocation of residents; and, data collection.
- Co-chair the BC-REST coalition and coordinate the annual World Elder Abuse Awareness Day event.
- Continue to consult with Maryland Legal Aid as it relates to long term care issues.
- Create and distribute the program newsletter, The Advocate, and the BC-REST newsletter.
- Develop an annual program fact sheet to share with other agencies, organizations and stakeholders.
- Participate on the Department’s Advocacy conference committee.
- Continue to provide consultation and support to Department of Aging programs and to county agencies. Provide training for new Home and Community Based Service providers, for the staff at the Caroline Center, and to the local AERS office.
- Provide information and literature at identified events to include the Power of Age Expo and agency conferences.

Elder Abuse

a) Education

The Department of Aging has a multi-pronged approach to providing education to older adults, families, caregivers, staff and community members. Education and prevention activities include:

- Programs offered in the senior centers include an annual Law Day; Advance Directives; how to identify and report abuse; healthy relationships and how to identify scams.
- Through the SHIP office, seminars are provided to the community on Identity Theft and Medicare Fraud and Abuse.
- Community organizations can request a speaker on Elder Abuse through the Speaker’s Bureau.
- At the Power of Age Expo, individuals and organizations can also request a speaker on Elder Abuse.
- Information packets on Elder Abuse and how to report have been distributed to each senior center.
- The Ombudsman team provide support and consultation to the Department’s staff members and to other county agencies.
- Support and promote the Department’s Advocacy conference for professionals.
- Dissemination of information through brochures and articles in the Time of Your Life newspaper.

b) Reporting

The Ombudsman program refers all complaints of abuse that occur outside of nursing homes to Adult Protective Services. The program receives and reviews all police reports to insure that any community elder abuse case is referred to APS. In addition to referrals to APS, the program also works with the police and fire departments as well as the county’s economic crime unit.
c) **Financial Exploitation**

Maryland Legal Aid is providing seminars on Money Smart Training for Older Adults in the Senior Centers. In addition to these seminars, Maryland Volunteer Legal Services is also a resource to provide seminars on estate planning which assists in minimizing financial exploitation of the older adult.

d) **Trends**

- There is a gap in service delivery for older adults who may be experiencing neglect or abuse and do not meet the criteria for APS intervention.
- With an increase to social media, older adults are at risk for exploitation including financial and physical abuse.
- There is an opportunity to provide education to the judicial system on Elder Abuse and sensitivity towards older adults who are working towards a resolution.

5. **Other Federal Programs**

- **State Health Insurance Assistance Program (SHIP)**

  Baltimore County SHIP continues to educate and assist Medicare beneficiaries and their families, as well as case managers and social workers. The counseling is provided in an unbiased and objective manner by a team of volunteers, who assist callers to better understand their choices and the decisions they have to make in regard to their Medicare benefit. The volunteers are recruited and trained by SHIP staff to address questions on all facets of Medicare: A, B, C, D, Medigaps, and appeals. In addition, they assess beneficiaries for their eligibility for financial programs to assist with Medicare and prescription costs: Qualified Medicare Beneficiary (QMB), Specified Low Income Beneficiary (SLMB), Maryland Senior Prescription Drug Assistance Program (MDSPDAP), and Social Security Extra Help. Staff provide guidance and serve as a resource for the volunteers and to handle complex issues.

  The Federal government does not notify all individuals turning 65 about their need to take action regarding the Medicare benefit to prevent possible future penalties, therefore Baltimore County SHIP mails “Happy Birthday” postcards to residents turning 65 on a monthly basis. The cards market the monthly in-depth workshops, “Transitioning to Medicare,” for those new to Medicare. The workshops are separately marketed to younger persons with disabilities.

  During the fall, additional volunteers are recruited to assist with Part D Open Enrollment, which is conducted at area senior centers and in the SHIP office. A key issue that impacts the Open Enrollment season has been and may continue to be the unexpected termination of Medicare Advantage Plans. The beneficiaries have consistently been overwhelmed by the choices they need to make through no fault of their own.

  An overreaching factor facing SHIP is its ability to only assist a finite number of beneficiaries during Open Enrollment. Every month approximately 700 individuals turn 65 in Baltimore County, therefore SHIP is not able to provide individual assistance to everyone seeking help. This will necessitate a change in focus to one wherein SHIP will be educating beneficiaries about the steps to do their own Part D research. In addition, legislation has been passed that will require the State of Maryland Retirees to obtain Part D plans for 2020. Regardless of whether or not the State provides the retirees with enrollment assistance, SHIP will have a spike in calls, because of their familiarity with the program from prior contact.
An ongoing goal is to expand the ability of the SHIP team to provide Medicare presentations within the community. Staff, as well as trained volunteers, conduct workshops created by the Program Manager. The SHIP staff markets the programs to area senior apartments, senior centers, faith based communities, pre-retirement groups and local community groups. The presentations focus on Medicare Basics for those new to Medicare and Medicare Changes for those already on Medicare.

Outreach to younger persons with disabilities is conducted through the *Time of Your Life* newspaper, *Time of Your Life* Comcast television program, radio, Facebook, senior center programs, partnership with the Image Center, Department of Aging web site, Community Resource Booklet, Power of Age Expo, and health fairs.

In addition, SHIP works closely with MAP and the Community Outreach Specialists (COS). MAP accesses all calls and sends daily referrals to SHIP for those needing more education and assistance with Medicare issues than MAP can provide. In return, SHIP refers callers to MAP for questions about food stamps, housing, help with personal care, and energy assistance. COS submits questions to SHIP about their clients’ Medicare issues. SHIP refers frailer clients without family assistance to COS for in-home care assessments, help with QMB/SLMB applications and other low income assistance.

- **Senior Medicare Patrol Program (SMP)**

  BCDA administers the Senior Medicare Patrol (SMP) program to help decrease the loss of Medicare funds due to fraud. Baltimore County SMP educates the public on how to protect themselves from and how to identify Medicare fraud. The focus of all of the SMP fraud messages is the need for all Medicare beneficiaries to carefully read their Medicare Summary Notices or Explanation of Benefits in order to detect and report possible fraud or abuse. This message is conveyed with each client contact, whether via individual counseling, group presentations, or at a health care booth. Potential fraud or abuse cases are reported and followed up by SMP staff as complex issues.

- **MIPPA**

  The SHIP team of staff and volunteers strive to assess every client contact for their eligibility for programs to assist with Medicare and prescription costs: Qualified Medicare Beneficiary (QMB), Specified Low Income Beneficiary (SLMB), Maryland Senior Prescription Drug Assistance Program (MDSPDAP), and Social Security Extra Help. If potentially eligible, the team completes on line applications for Extra Help and mails applications for the other programs. Daily calls are made to the State Buy-in Program to determine application and benefit status, as well as actions beneficiaries need to take to obtain or maintain the benefits.

  Each SHIP presentation has a section devoted to publicizing MIPPA. In addition, the programs are marketed in the *Time of Your Life* newspaper, *Time of Your Life* Comcast television program, Baltimore County web page, Image Center, and the Southeast Network. MIPPA enrollment events are held at low income senior housing, libraries and community fairs. To expand the outreach to low income seniors and younger persons’ with disabilities, SHIP staff collocates at Farmers’ Market distribution sites.
• **Medicaid Claiming Reimbursement through Federal Financial Participation**

The Aging & Disability Resource Center (ADRC) is supported through the Federal Financial Participation (FFP). Currently there are 15 staff members who participate in the FFP and respond to the random emails to verify activity for a specified time. The latest addition to the FFP is the Nursing Facility Program Educator as a transition from Money Follows the Person. FFP supports the Hospital to Home initiative and the contractual IMAGE center staff members who provide coverage and support in the MAP office.

• **Retired Senior Volunteer Program**

See Volunteerism below.

• **Farmer's Market Nutrition Program**

In FY2019, 952 Senior Farmer’s Market Coupon Books will be distributed at seven locations around Baltimore County on Friday, July 12 from 9 – 11 a.m. or until the supply runs out. The coupon book has a value of $30 and can be used at farmers’ markets throughout the State of Maryland. Due to demand, only one coupon book is provided per household and individuals may only proxy for one other person. In addition, books are given to the Community Outreach clients and the Baltimore County Department of Health and Human Services for allocation to homebound clients. The seven coupon distribution sites are located in schools. These sites were selected because they are easily accessible, have plenty of parking, are dispersed throughout the county and provide a greater sense of anonymity than if they were distributed at the senior centers. This year we are trying to expand the nutrition education component offered at each site using student volunteers and food demonstrations. The school board will not approve “pop-up” farmer’s market stalls at the sites on distribution day.

6. State Programs

• **Public Guardianship**

In certain circumstances, elderly incompetent persons may need a guardian of person appointed by the Circuit Court to take responsibility for managing their needs for safe and appropriate housing, support, medical care, social and recreational needs, and other non-financial areas. Where there is no available or appropriate family member to be appointed, the Court may appoint the Director of the Department of Aging as the guardian of person. The Public Guardianship program provides case management and coordination services as the delegated decision-maker on behalf of the Director. In Baltimore County, the Public Guardianship program is managed by a full-time Program Manager, who oversees and supervises 3 full-time Guardianship Coordinators, 1 part-time Case Assistant, and an Office Assistant.

The manager evaluates each petition filed in Baltimore County for the appointment of a guardian of the person for elderly (65 and over) persons, and when appropriate conducts pre-hearing assessments of the potential ward to determine a preliminary plan of action should the Director be appointed as the guardian. Because the Director of BCDA is defined by statute as the guardian of person of last resort, the manager also assists in investigating other potential candidates for appointment as guardian of the person prior to the court hearing, and testifies in court when necessary.
Following the appointment of the Director as guardian, the Public Guardianship program staff provide case management and coordination services to ensure the physical, medical, mental health, social, and recreational needs of the disabled person (the “ward”) are appropriately met. This often involves coordinating services with physicians, other caregivers, moving wards to safe and appropriately supported living environments, obtaining clothing and needed equipment, collaborating with other agency programs to obtain needed services, attending care plan conferences, consenting to medical treatment, including emergency treatment, and advocating for the ward’s needs. In some instances, there are family members with whom to maintain contact. The case manager/coordinator also works closely with the ward’s guardian of property or representative payee (where one exists) to coordinate financial support of the ward’s needs. This also includes advocating for the establishment, where possible, of a pre-paid, pre-needs burial arrangement for each ward. By state regulation, each ward is to be seen at least quarterly. The Public Guardianship staff work closely with the Circuit Court judges to provide humane and effective end-of-life care for each ward, including change of code status (e.g., implementation of a DNR order) and admission to hospice care when appropriate. Program staff are available 24 hours a day, 7 days per week via cell phone to address emergency concerns.

- **Senior Care**

  (See above, Community-based Services to promote independence)

- **Other state funded programs outside of MDoA.**

  CountyRide provides paratransit service throughout Baltimore County and to Baltimore City Partnership Hospitals, covering over 600 square miles Monday through Friday. Our transportation serves seniors over 60, Persons with Disabilities ages 18-59, and residents of the rural area of all ages. CountyRide provides door-to-door service for seniors and persons with disabilities requiring additional load time.

  The following programs may be available to CountyRide clients. Standing Rides allows clients going to partnership hospital locations to ride regularly, for a limited period (e.g., for chemotherapy). Center Connection allows eligible senior center clients to reserve a trip to a Baltimore County Senior Center three weeks in advance on pre-scheduled days. The Shopping Shuttle program is designed for clients to travel in a group to a pre-selected destination for different types of shopping. Senior Center Coordinators and Senior Apartment Coordinators assist in the recruitment of participants for these shuttles. Shuttles are demand response and are requested by the coordinators once per month.

  CountyRide publishes a newsletter distributed to the 20 County senior centers, housing buildings and mailed with all new client Welcome Packages. Articles appear on occasion in the Baltimore County Department of Aging *The Time of Your Life* newspaper, other community papers and on Baltimore County Department of Aging’s social media accounts. A Baltimore County Department of Aging cable TV show for County residents features CountyRide service every other year. Staff are available to speak to interested groups and to recruit shuttle coordinators.

  Presentations were made during the Fiscal Year in different communities/locations throughout the County to advertise service, create shuttle services and to coordinate services to senior centers. Special emphasis was on low to medium income housing locations or where limited transportation is available. The listing on the Baltimore County Library website and the Baltimore County Government website is also kept up to date.
The Transportation Advisory Board meets quarterly.

7. Senior Assisted Living Group Home Subsidy Program

The Senior Assisted Living Group Home Subsidy (SALGHS) coordinates with multiple Department of Aging programs to promote community independence, prevent social isolation, assist with transportation, administer benefit checkup screenings with Maryland Access Point, provide healthy meal programs, and welcome senior center enrollments. In addition, the Ombudsman program advocates and maintains standards for residents’ rights and provides education and training to providers to focus on independence-wellness service plans in the ALF communities.

8. Supports Planning for Medicaid Community Long Term Services and Supports

The Home and Community Based Services Program (HCBS) provides Supports Planning to 330 clients. The staffing includes six Supports Planners, a Manager, an Office Assistant and the Nursing Facility Program Educator (NFPE). In an effort to strive for fiscal sustainability of the program, staffing has been restructured to include three long term contractual employees. The other three Supports Planners continue to be County employees who are bi-lingual and provide case management to the Russian population in Baltimore County. While the NFPE is supported through FFP, the HCBS Manager provides supervision and oversight to this program.

The program has not been accepting new referrals as there was a request to cap the number of clients at 200. Over the past few years, the number of clients being served has decreased through attrition. The goal for the upcoming year is to stabilize staff, maintain a 1:55 caseload ratio and start to incrementally accept new clients. The ability to accept new clients will continue to be evaluated based on the program’s financial viability.

9. Focal Points—Senior Centers

The Baltimore County Department of Aging meets the challenge of providing effective operations responsive to the changing needs and interests of its older adult constituency. Through the 20 multipurpose senior centers, which serve as focal points in their respective communities, the Department delivers its services and programs. The nine regional centers - Ateaze, Bykota, Catonsville, Cockeysville, Essex, Liberty, Parkville, Pikesville, and Seven Oaks - have additional programs and services that allow seniors to remain independent in the community:

- The Center Connection Program is designed for individuals who need supportive services to participate in center activities, but do not need physical assistance or close supervision. Center Connection participants receive individual assistance to meet new people, choose activities and register for classes.
- Community Outreach Specialists also maintain offices in these and other community senior centers. The caseworkers meet with elderly clients either in their homes or in the centers and provide application assistance and provide supportive case management.
- Home Team coordinates trained volunteers that provide individual support of case managed seniors living in the community.
- The Senior Center Social Worker maintains office hours two days a month in each regional center for one-on-one consultations with members, group discussions, and staff training. As needed, the social worker will also assist at the community senior centers with members’ behavioral issues and staff support.
All of the senior centers act as the hub for a variety of offerings. The Department provides educational presentations and conducts research for seniors on Medicare Part D in its network of senior centers. Annually, the senior centers are the distribution points for shelf stable meals. In addition to serving as meal sites, the centers host nutrition and health education programs and screenings. Creative arts and lifelong learning are core service elements in the senior centers. Classes are provided by a variety of qualified and certified staff including CCBC instructors, county program technicians, independent contractors, community professionals and volunteers. The centers are also the venue for special arts and humanities events. All center programming is responsive to the diverse constituency in each community. Centers provide a wide array of evidence-based wellness programs, physical fitness classes and 13 of the centers have senior friendly fitness centers.

Baltimore County covers a large geographic area; therefore, BCDA utilizes a decentralized system with many focal points in the county so that older adults and their families can access services and programs. Its network of 20 centers with convenient locations enables the Department to be responsive.

In 2020, it is our goal to pursue a county-wide senior center accreditation from the National Council on Aging’s National Institute of Senior Centers. Accreditation will enable us to apply for more grant opportunities from NCOA and serve as pilot sites for new projects. It will also enable us to review our operations based on the nine accreditation standards and make enhancements. Most centers were last accredited through 2004 - 2005.

10. Volunteerism

Volunteers are a key component to the operation of BCDA. Volunteers of the Home Team provide friendly in-home visits and telephone reassurance to isolated, homebound seniors. Volunteers also pick up items from local food pantries and deliver them to the homes of food insecure seniors. For FY2020, the Home Team applied for the Senior Rides grant to enhance and expand the Friendly Visiting Program to better support independence, relieve transportation barriers, promote social inclusion into the community, and ensure a higher quality of life for a growing number of eligible homebound, socially isolated seniors. Volunteer drivers will provide eligible rides to homebound seniors enrolled in the Program. Potential riders will go through a thorough evaluation/screening for appropriateness prior to a volunteer being placed. Successful completion of the volunteer vetting process with a background check and signed position description is required for all eligible volunteers prior to placement. The position description outlines all responsibilities, qualifications, training opportunities and recognition events for volunteers.

The Long Term Care Ombudsman program recruits and trains volunteers as an extension of the Ombudsman staff. The volunteers attend extensive training conducted by the State Ombudsman program as well as through the local Ombudsman office. The training that the volunteers attend is approved through the State office. Once the volunteers complete the training, they are certified as Ombudsmen through a testing system. The volunteer Ombudsmen are then able to conduct site visits, accept complaints and work with family and resident councils. The volunteer Ombudsmen document their visits and provide follow up as needed. Volunteers continue to attend training throughout the year to stay abreast of regulation and program changes. The Ombudsman Manager hosts events throughout the year to recognize the volunteers.

The foundation of SHIP is the strong corps of volunteers who are specifically recruited and trained to perform Medicare counseling, Medicare D education and counseling, and community presentations. The volunteers attend extensive training to insure they stay on top of changes to
Medicare and receive any updates. Volunteers also have to take a test to demonstrate their knowledge regarding the various Medicare programs. The SHIP Manager conducts annual performance evaluations and provides feedback on strengths and opportunities for improvement. The SHIP volunteers are very dedicated and enable the program to provide support and education to thousands of county residents.

Nutrition volunteers assist in serving the congregate meals in senior centers and housing sites. They receive regular training from the Nutrition Program staff on such topics as safe food handling, proper portioning and policies and procedures.

Volunteer experts teach in the evidence-based programs including the Aging Mastery Program, Stepping On, CDSMP, DSMP, and PSMP.

Under the Retired & Senior Volunteer Program (RSVP), more than 1,100 volunteers are assigned to 32 non-profit and government agencies in Baltimore County. The agencies range in focus from education, environmental stewardship, advocacy, hunger relief, and more. Baltimore County’s 20 senior centers are also among the list of agency partners. Volunteers assist with a host of tasks including teaching, leadership, fitness monitoring, and sewing baby blankets for Project Linus. Volunteers are integral to the operation of the centers.

D. PUBLIC INPUT AND CONSUMERS RIGHTS

1. Public Hearings/Views of Recipients

As one of over 600 Area Agencies on Aging in the country, Baltimore County is canvassing a large cross-section of its population to help outline service needs for the seniors in our community. BCDA recently conducted a brief survey which asked individuals to prioritize aging issues of concern from a list of 15 areas. These were distributed in all senior centers, through Time of Your Life, and at the annual Volunteer Luncheon. Approximately 900 surveys were received. Highlights of the survey indicated that the area of most concern is the cost of medical care and medications followed by affordable housing. Other significant areas of concern were the ability to remain in one’s home and transportation. A full analysis of the survey is available for review and is provided as an addendum to this narrative.

2. Advocacy

BCDA will continue to serve as the advocate for older individuals by responding to policies, programs and actions that affect older individuals.

- The inter-agency elder abuse coalition, Baltimore County Restoring Elder Safety Today (BC-REST), chaired by BCDA, provides a forum for discussion of proposed legislation, policies, and programs related to the issue of elder abuse. The coalition includes a number of active advocacy groups, including the Baltimore County Association of Senior Citizens Organizations, the Legal Aid Bureau, AARP and the Washington legislative liaison to the National Association of Professional Geriatric Care Managers. Issues of importance are highlighted in BC-REST’s electronic newsletter, which reaches over 300 individuals. This group successfully advocated for the reinvigoration of the statewide Project Safe program, which educates the general public and the banking community about financial exploitation.

- BCDA’s Ombudsman Program monitors and comments on pending legislation and policies affecting individuals in long-term care facilities. The Ombudsman Program has been active at
the state level advocating for a more coordinated response to individuals affected by ALF closures and better communication regarding facility care issues with the state Office of Healthcare Quality. The Ombudsman Program educates residents and the public about residents’ rights, culture change and other important topics.

- Many programs at the Department of Aging work to ensure that seniors and people with disabilities are able to live in the most desired setting feasible. For example, the Community Outreach Specialists provide case management services to hundreds of at-risk seniors whose care plans (including in-home services, assistance with entitlement applications, volunteer supports, home delivered meals, etc.) allow them to remain in their homes rather than moving to long-term care settings. Case management includes a component of advocacy to ensure that clients receive all supportive services for which they are eligible.

- Options Counseling is an important component of individualized advocacy. Options Counseling in the nursing home setting allows individuals an opportunity to explore the possibility of transitioning to a community setting and gives them the support to do so. Options Counseling in MAP enables clients to partner with a counselor who serves as an advocate as the client manages challenging life transitions. In one recent Options Counseling case, two brothers with disabilities were struggling to cope with daily life after the death of a sister who had been their primary caregiver. The Counselor advocated for them with the landlord to have additional time to pay their rent and organize their apartment. Additionally, the Counselor advocated with a volunteer organization to provide some supportive services that allowed the brothers to weather the transition and learn the skills they needed to run their household independently.

- Each Senior Center Council Board has an advocate whose role is to keep the membership apprised of issues of concern for older adults. Many of them also participate in Baltimore County Association of Senior Citizen Organizations (BCASCO) which serves as a non-profit and non-partisan voice for senior issues.

3. Grievance Procedure

A written grievance procedure incorporating the requirements established by the State Department of Aging is published in our printed materials and is posted at all senior centers and nutrition sites. The Baltimore County Department of Aging Grievance Procedure is described herein.

**Baltimore County Department of Aging Grievance Procedure**

In consonance with minimum requirements established by the Maryland Department of Aging following is the AAA grievance procedure for older adults who are dissatisfied with or denied services per *Article 306(a)(6)(P).*

- Each applicant or service participant will be informed, in writing, at the time of any action affecting the provision of services of his/her right to an appeal hearing;

- Each applicant or service participant will be provided a reasonable time, not to exceed 20 days, in which to submit a written appeal letter which must include the applicant’s or service participant’s name, address and telephone number and his/her signature; and must clearly identify the issue(s) and
contain a full statement of his/her position on the issue(s) along with pertinent facts and reasons in support of his/her position.

- The AAA will acknowledge, in writing, within 10 days, the receipt of the appeal letter, and begin an agency review of the action, which is the basis of the appeal.
- The applicant or service participant will be notified, in writing, of the results of the review.
- If requested by the applicant or service participant, within 10 days after receipt of the response, a meeting will be provided to provide the participant an opportunity to present a statement of facts and additional pertinent information.
- The applicant or service participant will be informed, in writing, of the date, time and place of the meeting.
- After a meeting has convened, the AAA will issue a written final decision to the applicant or service participant within 10 days after the meeting.