



The Tuesday Digest

Issue # 66

November 30, 2021

The Tuesday Digest is information compiled by Dignity Alliance Massachusetts concerning long-term services, support, living options, and care issued each Tuesday.

*May require registration before accessing article.

Quotes of the Week

Covid-19 gives us the opportunity to reimagine what optimal post-hospital care might look like after the pandemic is over, an opportunity we shouldn't squander. There is a safe alternative to nursing home-based post-acute care, one that is favored by many patients and their families and might even cost us less. We can help people recover at home.

Post-Acute Care Shifts Away from Nursing Homes, Leonard Davis Institute of Health Economics, October 27, 2021, <https://tinyurl.com/PostAcuteCareShifts>

"How often do we admit it's the 'high-socioeconomic-status white patient' that is seen as the norm that nonwhite patients are judged against?"

Dr. Martha Pavlakis, medical director of kidney and pancreas transplantation at Beth Israel Deaconess Medical Center, Boston, *Who Deserves a Lifesaving Organ?*, **New York Times (free access)**, November 24, 2021, <https://tinyurl.com/WhoDeservesLifesavingOrgans>

"What's been surprising is the lack of data and attention on nursing homes this time around."

Dr. Ashish Jha, dean of the Brown University School of Public Health, *As COVID infections spread, nursing homes lag behind on the rollout for booster shots*, ***Boston Globe**, November 27, 2021, <https://tinyurl.com/NursingHomeBoostersLag>

"This is the most concerning variant we've seen since delta. It's going to take a really high bar for something to take over for delta, and we don't know whether this is going to do it."

Eric Topol, director, Scripps Research Translational Institute, *What to know about the omicron variant of the coronavirus*, **Washington Post**,

November 26, 2021, <https://tinyurl.com/AboutOmicronVariant>

The robot was doing far more for Henry than taking care of his body. It was also feeding his soul.

*My day with Henry Evans — a quadriplegic who's gaining movement through robotics, *Washington Post, November 23, 2021, <https://tinyurl.com/RoboticsHelpingHenry>*

“Disability itself isn't a problem. It's the systems like sidewalks and other things that are a problem when they're not accepting disability as a common, natural life occurrence that it is.”

*Colleen Flanagan. Jamaica Plain resident and user of a manual wheelchair, In win for residents with disabilities, Boston must upgrade curb ramps across the city, **WBUR**, November 24, 2021, <https://tinyurl.com/BostonCurbCutUpgrade>*

“It is a remarkable result. To be able to reverse diabetes by giving them back the cells they are missing is comparable to the miracle when insulin was first available 100 years ago.”

*Dr. Peter Butler, UCLA diabetes expert, A Cure for Type 1 Diabetes? For One Man, It Seems to Have Worked., *New York Times, November 27, 2021, <https://tinyurl.com/CureForType1Dabetes>*

“I can't wait. I can smell both of those and how much I'm going to love them.”

*Stephen Sondheim, commenting on his anticipation on seeing two short documentary plays on Broadway, “Is This a Room” and “Dana H”, two days before he died at age 91, Days Before Dying, Stephen Sondheim Reflected: ‘I’ve Been Lucky’, *New York Times, November 26, 2021, <https://tinyurl.com/SondheimIHaveBeenLucky>*

“This variant [Omicron] has a large number of mutations, some of which are concerning. Preliminary evidence suggests an increased risk of reinfection with this variant.”

*The W.H.O. said a new coronavirus variant in southern Africa was “of concern,” and named it Omicron., *New York Times, November 26, 2021, <https://tinyurl.com/WHOOmicron>*

“What are the ways in which the physical environment could change to support essential caring work, and what are the ways in which we should recognize the workers?”

Urban historian Dolores Hayden, What It Means to Design a Space for ‘Care’,

Bloomberg City Lab, November 4, 2021,
<https://tinyurl.com/DesignSpaceForCare>

“Care is more comprehensive than maintenance. It encompasses social interactions and dynamics, cultural practices.”

Urban designer Justin Garrett Moore, program officer for Humanities in Place at the Andrew W. Mellon Foundation, *What It Means to Design a Space for ‘Care’*, **Bloomberg City Lab**, November 4, 2021,
<https://tinyurl.com/DesignSpaceForCare>

“As people are living longer, they need more savings. Also, people are healthier, especially at the upper end of the income distribution, so they can work longer. Those things are driving people to remain in the work force.”

Daniel Bachman, economic forecaster at Deloitte, *The Pandemic Prompted People to Retire Early. Will They Return to Work?*, ***New York Times**, November 17, 2021, <https://tinyurl.com/PandemicEarlyRetirement>

“Buildings are infrastructure, and if we want to ‘build back better,’ we need to build back with everyone in mind, and universal design should be a part of that,” “We’re making this incredible investment over the next many years, and we have the opportunity to do it right, and to benefit everyone.”

Marsha Maytum, architect, *Creating More Accessible, Inclusive Buildings*, **Bloomberg City Lab**, August 18, 2021,
<https://tinyurl.com/AccessibleInclusiveBuildings>

An essential part of [artificial intelligence] research practice involves circling back to key stakeholder groups, including patients, caregivers, and clinicians, who can provide feedback on the usability and utility of the technologies. . . . When it comes to making improvements for a better old age, actual, real-world outcomes are the only outcomes that matter.

Budding technology should be adapted for eldercare, ***Boston Globe**, November 29, 2021, <https://tinyurl.com/BuddingTechnologyEldercare>

“Even if the new variant evades the immunity from the

vaccine, it is highly unlikely that it will do so completely, so being vaccinated is critical right now.”

Dr. Shira Doron, infectious disease specialist at Tufts Medical Center, *US to restrict travel over new coronavirus variant omicron, which is likely already here*, ***Boston Herald**, November 26, 2021, <https://tinyurl.com/RestrictTravel>

“It’s coming.”

New York Governor Kathy Hochul referring to the Omicron variant of Covid-19 when declaring a state of emergency and imposing travel restrictions from South Africa, *New York City May Be at Start of Winter Surge of Covid-19*, **Bloomberg**, November 28, 2021, <https://tinyurl.com/NYCWinterSurge>

“Epidemiologists are trying to say, ‘Easy, tiger.’ This could be bad. This could be very bad. But we don’t know enough to roll that tape forward.”

William Hanage, an epidemiologist at the Harvard T.H. Chan School of Public Health, *New Virus Variant Stokes Concern but Vaccines Still Likely to Work*, ***New York Times**, November 26, 2021, <https://tinyurl.com/VariantStokesConcern>

“If I had to guess, globally, we’re better off. In the U.S., I’m not quite as sure, given political divisions, etc., if something were to emerge in 2022.”

Computational biologist Trevor Bedford in response to the question: Do you feel we’re better prepared for the next pandemic?, *Virus expert Trevor Bedford on annual Covid boosters and the inevitable next pandemic*, **STAT News**, November 24, 2021, <https://tinyurl.com/TrevorBedfordInterview>

“My dad was just skin and bones. He had been moving six figures out of his bank accounts over the past 20 months. He was not eating, he was not drinking or taking his proper medicine.”

Todd Stein, describing the condition he found his 88-year-old father, Marvin Stein, at Thanksgiving 2018, *The Fight of This Old Boxer’s Life Was with His Own Family*, **New York Times (free access)**, November 17, 2021, <https://tinyurl.com/OldBoxersLife>

Finally, in June 2019, the two families agreed to a settlement, and together asked the court to end the guardianship. Marvin [Stein] regained control of his life. . . “Luckily, my father is considered a success story,” Todd [Stein] said, acknowledging that many people never get out

	<p><i>of guardianship. “He lived. Imagine if they didn’t have the money to fight it.” He paused and then corrected himself. “If they didn’t have money,” he said, “this never would have happened.”</i></p> <p><i>The Fight of This Old Boxer’s Life Was with His Own Family, New York Times (free access, November 17, 2021, https://tinyurl.com/OldBoxersLife</i></p> <p><i>And while Americans no longer depend on digging ditches for latrines, we’re still struggling with faith in national public health measures, racial disparities in health care, and more.</i></p> <p><i>Revisiting: A medical historian on the deadly epidemics of the Civil War, STAT News, November 24, 2021, https://tinyurl.com/EpidemicCivilWar</i></p> <p><i>“My mom and dad both died in their early 70s, so when I turned 80 two years ago, that was older than I ever expected to be. Since my parents were not role models for a vital old age, I had to figure it out for myself. I think I’ve done a pretty good job, since this has turned out to be the busiest, happiest and most successful period of my life!”</i></p> <p><i>Annie Korzen, 10 Tips for Happy Aging from a Feisty 80-Something, The Ethel from AARP, November 22, 2021, https://tinyurl.com/TenTipsFeisty80Something</i></p>
Inspiration	<p>1. The Ethel from AARP November 22, 2021 <i>10 Tips for Happy Aging from a Feisty 80-Something</i></p> <ul style="list-style-type: none"> • Don’t socialize exclusively with seniors. • Wake up with a project. • Find your community. • Imitate the blue zone lifestyle. • Move your body. • Do something you’ve never done before. • Don’t give up on sex. • Exercise your intellect. • Spend some time with a human being every day. • Make the world a better place. <p>https://tinyurl.com/TenTipsFeisty80Something</p>
Reports	<p>2. Leonard Davis Institute of Health Economics October 27, 2021 <i>Post-Acute Care Shifts Away from Nursing Homes</i></p> <p>In a new study, Rachel Werner and Eric Bressman document unprecedented shifts in post-acute care during the pandemic, with significant and sustained declines in the number of hospitalized patients being discharged to skilled nursing facilities (SNFs). As a result, SNFs took a significant financial hit, as total payments to SNFs decreased to less than half of their pre-pandemic levels, from an average of \$42</p>

million per month in 2019 to \$19 million in October 2020.

While health care utilization dropped across the board in the early days of the pandemic, the decline seen in SNFs is unique in that it has not rebounded. The consequences for the nursing home industry could be dire if these trends continue. Post-acute care admissions represent a small percentage of all nursing home admissions, but account for a major source of revenue for nursing homes that nursing homes rely on to stay afloat. Daily reimbursements for post-acute care (covered by Medicare) are considerably higher than the daily rate for long-term care stays (often covered by Medicaid).

Werner and Bressman used a multi-payer database that included more than 975,000 hospital discharges for patients who were 65 years or older. They found that post-acute care use declined in all settings early in the pandemic, including the three most common sites of post-acute care (home with home health care, SNFs and inpatient rehabilitation facilities). However, **while the use of home health care and inpatient rehabilitation rebounded quickly, the use of SNFs did not.** The percentage of patients discharged to SNF had the steepest decline, from an average of 19% of discharges in 2019 to 14% in October 2020.

The authors note that the shift away from institutional post-acute care began before the pandemic, as Medicare and other payers targeted the high use and cost of these facilities. This has put the squeeze on a critical part of nursing homes' revenue. Medicare payment for post-acute care services is an important source of nursing home revenue and is often used to cross-subsidize care for long-stay residents with inadequate payment from Medicaid. And, at the same time, occupancy rates have declined for long-stay nursing home residents, as states have shifted Medicaid-funded care out of nursing homes and into people's homes. The pandemic accelerated these trends, potentially undermining the fragile fiscal health of the nursing home industry.

Because of declining admission and occupancy rates for both post-acute and long-term care, one [industry analysis](#) concludes that nursing homes could lose \$94 billion over the course of the pandemic, and that 2,000 of them could close without financial assistance. A large influx of public funds during the pandemic has cushioned the immediate blow. But, if admission rates to SNFs don't rebound, the long-term outlook for nursing homes may be bleak.

We don't yet know whether these trends will continue beyond the pandemic, and the full implications for patients and families if post-acute care continues to shift to home, as unpaid caregivers may have to absorb the care that was once provided by Medicare-paid providers. But the impact on the nursing home industry is likely to be large and disruptive, with almost certain nursing home closures.

In a *Health Affairs* [blog post](#) last year, Werner and co-author Courtney Harold Van Houtven noted the **need to rethink post-hospital care at home, and to prepare for a future in which more intensive rehabilitative care can be provided at home.**

They pointed out the need to pay family caregivers and pay health professionals to support caregivers in delivering this care in the home. They concluded:

Covid-19 gives us the opportunity to reimagine what optimal post-hospital care might look like after the pandemic is over, an opportunity we shouldn't squander. There is a safe alternative to nursing home-based post-acute care, one that is favored by many patients and their families and might even cost us less. We can help people recover at home.

In this reimagined future, we will need to re-evaluate the underlying financing and payment of nursing homes to account for significant reductions in post-acute care.

	<p>What does this mean for the delivery of long-term care, and the role of nursing homes? We can't yet know the contours of the change, but it is likely that the nursing home industry is in for a rough ride.</p> <p>https://tinyurl.com/PostAcuteCareShifts</p>
Advocacy	<p>3. National Consumer Voice for Quality Long-Term Care <i>Letter Urging Senate Leadership to Include Provisions in the Build Back Better Act that Would Increase Protections for Nursing Home Residents</i></p> <p>On November 19, 2021, the United States House of Representatives passed its version of the Build Back Better Act, which included five important provisions for increased protections for nursing home residents. Sign our letter to urge Senate leadership to include these provisions in its version of the bill. If passed, these provisions would result in the most significant increase in protections for nursing home residents in decades.</p> <p>The provisions would address insufficient staffing by providing a necessary path towards achieving minimum staffing standards; require nursing homes to have a registered nurse on staff 24 hours per day; provide necessary funds to improve the survey and oversight process; provide funding that improves the accuracy and reliability of certain skilled nursing facility data; and ensure accurate information on Medicare cost reports.</p> <p>More than 186,000 residents and staff in long-term care facilities died of COVID-19. We must take action now to protect and support those living and working in long-term care facilities and prevent such a tragedy from recurring in the future. These provisions in the Build Back Better Act are a critical step in the right direction.</p> <ol style="list-style-type: none"> 1. Read the Letter 2. Sign On by Monday, December 6, 2021 <ul style="list-style-type: none"> o <i>Signing into Google is not required to complete the form.</i> <p>Note this sign on is only available to organizations.</p> <p>Individuals: Use the letter as a template and share with your Senators Find your Senator by calling the Capitol Switchboard at 202-224-3121 or going to congress.gov/members.</p>
Input Opportunity	<p>4. United Nations 2022 ECOSOC Partnership Forum - Global Online Stakeholder Consultation</p> <p>Background</p> <p>The 2022 ECOSOC Partnership Forum will be held on 2 February 2021 on the theme "Building back better from the coronavirus disease (COVID-19) while advancing the full implementation of the 2030 Agenda for Sustainable Development". Multiple actors and stakeholders will participate, including countries, the United Nations system, including international financial institutions, as well as international organizations, parliamentarians, local governments, non-governmental organizations, the private sector, civil society, scientists, academia, women, youth, and others.</p> <p>Participants will debate solutions and policies to overcome the COVID-19 pandemic guided by the SDGs. They are expected to (a) exchange new ideas, expectations and priorities which should be explored further by the Council and the high-level political forum in the following months; and (b) shine the spotlight on forward-looking actions and partnerships by countries and all relevant stakeholders that can help recover from the pandemic and accelerate progress towards the 2030.</p> <p>Agenda.</p> <p>The Partnership Forum will be held back-to-back with the Council's new coordination segment that guides and coordinates the work of the UN and ECOSOC</p>

	<p>system, as decided by the General Assembly (A/RES/75/290A).</p> <p>Global online stakeholder consultation</p> <p>To prepare for the Partnership Forum, a global online stakeholder consultation is being set up to solicit views, experiences and proposals from all stakeholders and make them widely available in advance of the event.</p> <p>Objectives</p> <p>The objective of the global online stakeholder consultation is to both mobilize stakeholders from different sectors around the ECOSOC Partnership Forum and to seek their inputs around two broad tracks:</p> <ul style="list-style-type: none"> • Track 1: sharing views on action-oriented policy recommendations that could be discussed as a priority in ECOSOC and the HLPF around key issues related to building back better from the COVID-19 pandemic while implementing the 2030 Agenda, including on issues such as financing, social protection floors, and combating climate change; and • Track 2: gathering information about forward-looking actions by Governments and various stakeholders that are making an impact on the SDGs on the ground. <p>The online consultation will also compile names of potential stakeholders’ speakers for the 2022 ECOSOC Partnership Forum.</p> <p>Format and structure</p> <p>The online consultation will be open to all stakeholders.</p> <p>The online consultation is open to all stakeholders through a dedicated online form.</p> <p>All interested stakeholders can submit their inputs here.</p> <p>Deadline to submit inputs: 3rd December 2021.</p>
Lives Well Lived	<p>5. *New York Times</p> <p>November 26, 2021</p> <p><i>Days Before Dying, Stephen Sondheim Reflected: ‘I’ve Been Lucky’</i></p> <p>There was little indication that Mr. Sondheim, one of the greatest songwriters in the history of musical theater, was unwell. He was engaged and lucid, with strong opinions and playfully pugnacious, as with the tease about his long-gestating, unfinished final musical. At one moment he complained that his memory wasn’t as strong as it had been, but he was also telling anecdotes from a half-century earlier with ease. . . He was busy right until the end. On Nov. 14 he attended the opening of an Off Broadway revival of his musical “Assassins,” directed by John Doyle at Classic Stage Company. The next night he went to the first post-shutdown preview for the Broadway revival of “Company” — a reimagined production, opening Dec. 9, in which the protagonist, who has traditionally been played by a man, is now played by a woman. And just this week, two days before he died, he did a doubleheader, seeing a Wednesday matinee of “Is This a Room” and an evening performance of “Dana H.,” two short documentary plays on Broadway.</p> <p>https://tinyurl.com/SondheimIHaveBeenLucky</p>
Ethics	<p>6. New York Times (free access)</p> <p>November 24, 2021</p> <p><i>Who Deserves a Lifesaving Organ?</i></p> <p>by Dr. Daniela Lamas, a pulmonary and critical-care physician at Brigham and Women’s Hospital, Boston</p> <p>A transplant program is also beholden to its metrics. If the one-year survival of transplant recipients is lower than expected or if transplant failure is higher than expected, a program could be put on probation or lose its certification entirely. . .</p>

	<p>What makes someone a “good” transplant candidate? Maybe it is inevitable that doctors’ biases creep in when we must make fraught decisions about a scarce resource. The medical community has dealt with many similar issues before, and not always well. . . Transplant committees’ subjective sense of who is “likable” can also affect whom the team is willing to advocate and whom they are not. . . So much of transplant decision-making is about narrative, which is one reason misconceptions can take hold when patients do not speak English as their primary language. . . Perhaps most important, transplant teams are openly discussing and challenging their assumptions about who makes a “good” transplant candidate. And in doing so, more lives may be saved.</p> <p>https://tinyurl.com/WhoDEservesLifesafingOrgans</p>
<p>Biden / federal proposals / policies</p>	<p>7. Health Affairs Blog November 22, 2021 <i>House-Passed Build Back Better Would Bolster Public Health Infrastructure, Health Workforce</i></p> <p>The range of population health matters these amendments address is extensive: the long-term care needs of an aging nation; the nation’s maternal mortality crisis; mental illness; gun violence; medically underserved communities; and more. Collectively these important initiatives are grounded in the principle of health equity and will act jointly with the BBB’s strengthening of health insurance to support the health of the poorest and most vulnerable Americans. This link examines a number of the key provisions in the November 3 version of the House bill, which was passed by the House with minor amendments. Key provisions include:</p> <p>Workforce Provisions</p> <ul style="list-style-type: none"> • Direct Care Workers and Apprenticeships • National Health Service Corps (NHSC) • Nurse Corps • Teaching Health Centers • Schools of Medicine and Nursing, Children’s Hospital GME, And Palliative Care Training • Rural And Underserved Pathways to Practice Training Program <p>Public Health and Health Care Infrastructure Provisions</p> <ul style="list-style-type: none"> • Public Health Infrastructure • Gun Violence Prevention • Mental Health • Sexually Transmitted Disease • Maternal Mortality • Native Hawaiian Health Care Systems • Community Health Center Capital Grants • Ryan White Funding • Supplemental Funding for World Trade Center Health Program <p>https://tinyurl.com/BBBHealthProvisions</p>
<p>Grant Reviewers Sought</p>	<p>8. Administration on Community Living November 26, 2021 <i>ACL Seeks Reviewers for Elder Justice and Legal Assistance Grant Panels</i></p> <p>ACL’s Office of Elder Justice and Adult Protective Services is seeking reviewers and moderators for two different upcoming panels:</p> <ul style="list-style-type: none"> • Legal Assistance Enhancement Program Grants

	<p>Panel: Reviewers and moderators should have documented expertise in some or all of the following areas: legal assistance, elder justice, civil legal responses to elder abuse, neglect, and exploitation, evaluation and study design, and budget. If interested, please send resume/CV to Aiesha Gurley Parry at aiesha.gurley@acl.hhs.gov by December 6 to be considered.</p> <ul style="list-style-type: none"> • Elder Justice Innovation Grants <p>Panel: Reviewers and moderators should have documented expertise in some or all of the following areas: aging, abuse, neglect, and exploitation in the area of elder justice, guardianship, adult protective services, substance misuse, evaluation and study design, and budget. If interested, please send resume/CV to Aiesha Gurley Parry at aiesha.gurley@acl.hhs.gov by December 13 to be considered.</p> <p>Reviewer responsibilities include:</p> <ul style="list-style-type: none"> • Completing mandatory reviewer and moderator training (90 min-hour webinar). This teleconference is anticipated to take place the last week of April 2022 • Independently reviewing and scoring assigned grant applications. Reviewers will be assigned approximately 5 - 6 applications and should estimate approximately three hours per application. • Participating in a teleconference (scheduled for three hours) with other reviewers to discuss their independent application reviews. This teleconference is anticipated to take place between May 16 and June 4, 2022. • Identifying potential conflicts of interest as soon as possible once applications are assigned. • Submitting final scores and comments by the stated deadline. <p>Non-federal reviewers will receive nominal compensation for completing the tasks above.</p> <p>https://tinyurl.com/ACLGrantReviewers</p>
Webinars / Online sessions	<p>9. Stanford Center on Longevity Tuesday, December 7 through Thursday, December 9, 2021, 12:00 to 3:00 p.m. <i>The 2021 Century Summit</i></p> <p>In 2020, the Longevity Project convened the inaugural Century Summit. The virtual conference brought together leaders in business, media, policy, and research to discuss the implications of the 100-year life. Approximately 2,000 people participated in the event, which included conversations with luminaries such as: Senator Sherrod Brown (D-OH); Senator Bob Casey (D-PA); Senator Tim Scott (R-SC); Academy Award-winning actor F. Murray Abraham; Victor Dzau, President of the National Academy of Medicine; and dozens of other prominent leaders. The 2021 Century Summit, to be held virtually on December 7th, 8th and 9th will once again bring together leaders across economics, research, medicine, and government to discuss the impact of people living longer lives. Convened in collaboration with the Stanford Center on Longevity, the Century Summit will offer leaders an opportunity to present new visions on how society can restructure work, reorganize our cities, enhance lifelong learning, create new financial security, and promote greater health and vitality in the new age of longevity. Each day will offer new insights and opportunities to develop a deeper understanding of the implications of the longer life:</p> <ul style="list-style-type: none"> • Tuesday, December 7th, 12:00 to 3:00 p.m.: <i>Rethinking Care</i> • Wednesday, December 8th, 12:00 to 3:00 p.m.: <i>The Intergenerational Compact</i> • Thursday, December 12:00 to 3:00 p.m.: <i>Reinventing the Second Half of Life</i>

	<p>All registered attendees will receive a link to the livestream platform a few days before the start of the Century Summit. No software download will be necessary. The link to the livestream platform is not available at this time but will be posted in the Online Event Page and distributed via a separate email communication from Eventbrite about 48 hours before the start of the event. Free registration at: https://tinyurl.com/Stanford21stCenturySummit</p> <p>10. Elder Justice Coordinating Council Tuesday, December 7, 2021, 11:00 a.m. to 1:30 p.m. <i>Fall 2021 Virtual Elder Justice Coordinating Council Meeting</i> The Elder Justice Coordinating Council brings together leaders from across the federal government to address issues of elder justice nationally. Council members include the leaders of federal departments, agencies, and entities administering programs related to abuse, neglect, or financial exploitation. The Fall 2021 EJCC meeting, the first of the Biden-Harris administration, will feature updates from federal leaders including HHS Sec. Xavier Becerra, as well as a discussion of the history and future of federal elder justice efforts. https://tinyurl.com/ElderJusticeCouncilFallMeeting</p>
Previously posted webinars and online sessions	<p>Previously posted webinars and online sessions can be viewed at: https://dignityalliancema.org/webinars-and-online-sessions/</p>
Request for Abstracts	<p>11. Health Affairs <i>Request For Abstracts—Disability and Health</i> Health Affairs is planning a theme issue on disability and health, to be published in October 2022. They plan to publish peer-reviewed articles from leading researchers, scholars, analysts, and health care stakeholders. Content will include original research, analyses, and commentaries to provide a multidimensional perspective on disability and health. Deadline: December 20, 2021 Preparation and formatting guidelines Submit abstracts via our online submission form Queries: HealthAffairs_disability_health_queries@projecthope.org Need assistance with your submission? Send email to: Submit_Help@healthaffairs.org</p>
Nursing Homes	<p>12. *Boston Globe November 27, 2021 <i>As COVID infections spread, nursing homes lag behind on the rollout for booster shots</i> A Connecticut nursing home had planned to roll out COVID booster shots to residents at the beginning of this month. But before it could start the program, the coronavirus swept through the home, Geer Nursing and Rehabilitation Center in North Canaan, infecting 89 people, including 67 residents. Nearly all were fully vaccinated. Eight of the residents died from COVID, according to the home, which described all as having “serious underlying health issues.” . . . Booster programs have taken on more urgency given that nearly 4,000 new COVID cases are reported every week in nursing homes, according to federal data, and experts say many of the case clusters are occurring in homes that have yet to administer the extra doses. . . And in some places, outbreaks among residents may still be occurring because vaccination rates among nursing home staff members continue to lag behind national averages. . . Unlike last winter’s concerted federal push to vaccinate residents and staff in nursing homes, the booster rollout has been sluggish and piecemeal, health</p>

experts said. Public information is sparse: About 42% of Americans older than 65 have received a booster shot, according to federal reports, but there is no data available yet on U.S. sites to track nursing home booster programs. . . Residents of assisted living facilities are particularly at risk because there does not appear to be a coherent strategy, he said. New outbreaks complicate matters by putting booster programs on hold until the cases subside. . . But other pandemic-related problems continue to plague nursing homes, some of which still have large numbers of unvaccinated workers, although the average staff vaccination rate has now reached 74%. Looming close is the federal mandate to immunize staff, although numerous states are suing to block the rule.

Many facilities are also coping with severe and costly staffing shortages. Some say the decision by CMS earlier this month to require nursing homes to allow unfettered visitation of residents is complicating their efforts. Some said they were caught off guard by the announcement that visitation was now being allowed for all residents at all times, which could introduce new community infections into the homes.

<https://tinyurl.com/NusringHomeBoostersLag>

13. Leonard Davis Institute of Health Economics

October 27, 2021

Post-Acute Care Shifts Away from Nursing Homes

In a new [study](#), [Rachel Werner](#) and [Eric Bressman](#) document unprecedented shifts in post-acute care during the pandemic, with significant and sustained declines in the number of hospitalized patients being discharged to skilled nursing facilities (SNFs). As a result, SNFs took a significant financial hit, as total payments to SNFs decreased to less than half of their pre-pandemic levels, from an average of \$42 million per month in 2019 to \$19 million in October 2020.

While health care utilization dropped across the board in the early days of the pandemic, the decline seen in SNFs is unique in that it has not rebounded. The consequences for the nursing home industry could be dire if these trends continue. Post-acute care admissions represent a small percentage of all nursing home admissions, but account for a major source of revenue for nursing homes that nursing homes rely on to stay afloat. Daily reimbursements for post-acute care (covered by Medicare) are considerably higher than the daily rate for long-term care stays (often covered by Medicaid).

Werner and Bressman used a multi-payer database that included more than 975,000 hospital discharges for patients who were 65 years or older. They found that post-acute care use declined in all settings early in the pandemic, including the three most common sites of post-acute care (home with home health care, SNFs and inpatient rehabilitation facilities). However, **while the use of home health care and inpatient rehabilitation rebounded quickly, the use of SNFs did not.** The percentage of patients discharged to SNF had the steepest decline, from an average of 19% of discharges in 2019 to 14% in October 2020.

The authors note that the shift away from institutional post-acute care began before the pandemic, as Medicare and other payers targeted the high use and cost of these facilities. This has put the squeeze on a critical part of nursing homes' revenue. Medicare payment for post-acute care services is an important source of nursing home revenue and is often used to cross-subsidize care for long-stay residents with inadequate payment from Medicaid. And, at the same time, occupancy rates have declined for long-stay nursing home residents, as states have shifted Medicaid-funded care out of nursing homes and into people's homes. The

	<p>pandemic accelerated these trends, potentially undermining the fragile fiscal health of the nursing home industry.</p> <p>Because of declining admission and occupancy rates for both post-acute and long-term care, one industry analysis concludes that nursing homes could lose \$94 billion over the course of the pandemic, and that 2,000 of them could close without financial assistance. A large influx of public funds during the pandemic has cushioned the immediate blow. But, if admission rates to SNFs don't rebound, the long-term outlook for nursing homes may be bleak.</p> <p>We don't yet know whether these trends will continue beyond the pandemic, and the full implications for patients and families if post-acute care continues to shift to home, as unpaid caregivers may have to absorb the care that was once provided by Medicare-paid providers. But the impact on the nursing home industry is likely to be large and disruptive, with almost certain nursing home closures.</p> <p>In a <i>Health Affairs</i> blog post last year, Werner and co-author Courtney Harold Van Houtven noted the need to rethink post-hospital care at home, and to prepare for a future in which more intensive rehabilitative care can be provided at home. They pointed out the need to pay family caregivers and pay health professionals to support caregivers in delivering this care in the home. They concluded:</p> <p><i>Covid-19 gives us the opportunity to reimagine what optimal post-hospital care might look like after the pandemic is over, an opportunity we shouldn't squander. There is a safe alternative to nursing home-based post-acute care, one that is favored by many patients and their families and might even cost us less. We can help people recover at home.</i></p> <p>In this reimagined future, we will need to re-evaluate the underlying financing and payment of nursing homes to account for significant reductions in post-acute care. What does this mean for the delivery of long-term care, and the role of nursing homes? We can't yet know the contours of the change, but it is likely that the nursing home industry is in for a rough ride.</p> <p>https://tinyurl.com/PostAcuteCareShifts</p>
Home and Community Based Services	<p>14. *Boston Globe November 29, 2021</p> <p><i>Budding technology should be adapted for eldercare</i></p> <p>These developments, when applied to monitoring devices, have the potential to enable precision and adaptive, data-driven interventions, granting clinicians and caregivers critical insight into the health status of patients. . . Wearable and contactless health and activity sensing devices, including smartwatches, have been adopted over the last decade, and many have monitoring capabilities related to such wellness-related factors as physical activity, sleep, and stress. These technologies have the potential to help older adults age safely in their own homes by detecting acute adverse events like falls, as well as predict the onset and progression of chronic illness. . . However, many of these technologies, starting with most wearable health-monitoring devices, have not been developed with older adults and their caregivers in mind. Specifically, many existing health technologies are burdensome for older adults to use, are not sufficiently accurate for medical purposes, and sometimes come with algorithmic biases that make them less effective for older users. . . An especially promising research thread involves applying artificial intelligence to shortcomings of current technologies deployed in the service of aging at home and patients with AD/ABDR. There are three broad settings where AI has the potential to make a remarkable difference in how older adults and their care providers interact with such technologies. First, AI</p>

	<p>algorithms may be trained to spot concerning patterns in data flows that correspond to beneficial, and adverse, health outcomes. Second, AI can help package data flows in such a way that they become more immediately useful to caregivers and clinicians. And finally, AI tools may help future designers create increasingly adaptive, even personalized, treatment technologies. https://tinyurl.com/BuddingTechnologyEldercare</p> <p>15. Leonard Davis Institute of Health Economics November 18, 2021 <i>Moving Health Care into an At-Home Model</i> Penn LDI Virtual Panel Eyes Potential Seismic Shift for Hospitals Driven by Pandemic Experience Transcript from expert panel discussion. https://tinyurl.com/HomeCareNewFrontier</p> <p>16. Bloomberg City Lab November 4, 2021 <i>What It Means to Design a Space for ‘Care’</i> Planners and designers are linking labor, social services, and maintenance to building projects by prioritizing the concept of “care.” Once people see it, the need for care is hard to unsee. In an architectural context, care links the labor of cleaning with the design of the surfaces to be cleaned, physical infrastructure with social services for its users, landscape with mental health. Care can be demonstrated through org charts and through organizing, through serving food and setting aside land to grow food, through creating public space and training people to take care of it. . . Designing multi-generational housing also comes with long-range planning built into the program. Bay State Commons Cohousing, a condominium project designed by French 2D under construction in Malden, Massachusetts, offers a look at how care can be incorporated into multifamily housing today. . . Other accommodations are planned for aging: The grounds are graded for accessibility, and one of the studio units could be used by a long-term caregiver. https://tinyurl.com/DesignSpaceForCare</p>
Housing	<p>17. Harbor Health PACE Program NEW Affordable Housing Opportunity Harbor Health PACE Program has a new affordable housing opportunity at the Anne M. Lynch apartments in South Boston, in collaboration with Harbor Health PACE Beacon Communities and Boston Housing Authority. These brand-new apartments are available for seniors 62 years of age and older with chronic health care needs who can safely live in the community with help of on-site PACE staff. Please note, income guidelines and rent restrictions will apply. Please contact , Celina Conway at Harbor Health PACE Program to learn more and apply 617-533-2428 or cconway@hhsi.us. Learn more here</p>
Behavioral Health	<p>18. Leonard Davis Institute of Health Economics November 5, 2021 <i>Strategies to Repair a Broken System: Mental Health Care</i> A Penn LDI Virtual Conference Explores Latest Research and Innovations with Ten of the Field’s Top Minds Transcript from expert panel discussion. https://tinyurl.com/BrokenSystemMentalHealth</p> <p>19. The Hill</p>

	<p>October 29, 2021 <i>It's time to pay for mental health care in America</i> Half of all Americans will meet criteria for a mental disorder in their lifetimes. To meet their needs requires fundamental and radical change to our mental health system. First, we must ride the tide of public opinion toward transforming our mental health care system. . . Second, we must make permanent the emergency provisions that allow for telehealth to be reimbursed comparably to traditional face-to-face therapy by major insurance companies into permanent policy. . . We concurrently must invest in training and supporting mental health professionals to deliver quality care, hold them accountable for providing this care, and incentivize them to work in the public sector. . . [Y]es, mental health is health [and] it's past time to radically improve the system and start by paying for it. https://tinyurl.com/PayForMentalHealthCare</p>
Guardianship	<p>20. New York Times (free access) November 17, 2021 <i>The Fight of This Old Boxer's Life Was with His Own Family</i> Marvin Stein lived an eventful and prosperous life. But a battle among his family over his fortune broke out, and he suddenly found himself powerless to fight for himself. https://tinyurl.com/OldBoxersLife</p>
Covid-19	<p>21. Bloomberg November 28, 2021 <i>New York City May Be at Start of Winter Surge of Covid-19</i> New York City may already be seeing signs of a winter spike in Covid-19 even though holiday travel, gatherings and colder weather are just getting started. The city's positive test rate rose to a two-month high as hospitals admitted more than 100 new virus patients on Friday, contributing to a 25% jump in hospitalizations in just two weeks. The city has 463 people in the hospital for Covid-19, up from 370 on Nov. 12. The seven-day average of residents testing positive for the virus -- the lowest in the state of New York -- has climbed above 2% for the first time since the end of September. https://tinyurl.com/NYCWinterSurge</p> <p>22. *Boston Globe November 27, 2021 <i>As COVID infections spread, nursing homes lag behind on the rollout for booster shots</i> A Connecticut nursing home had planned to roll out COVID booster shots to residents at the beginning of this month. But before it could start the program, the coronavirus swept through the home, Geer Nursing and Rehabilitation Center in North Canaan, infecting 89 people, including 67 residents. Nearly all were fully vaccinated. Eight of the residents died from COVID, according to the home, which described all as having "serious underlying health issues." . . . Booster programs have taken on more urgency given that nearly 4,000 new COVID cases are reported every week in nursing homes, according to federal data, and experts say many of the case clusters are occurring in homes that have yet to administer the extra doses. . . And in some places, outbreaks among residents may still be occurring because vaccination rates among nursing home staff members continue to lag behind national averages. . . Unlike last winter's concerted federal push to vaccinate residents and staff in nursing homes, the booster rollout has been sluggish and piecemeal, health</p>

experts said. Public information is sparse: About 42% of Americans older than 65 have received a booster shot, according to federal reports, but there is no data available yet on U.S. sites to track nursing home booster programs. . . Residents of assisted living facilities are particularly at risk because there does not appear to be a coherent strategy, he said. New outbreaks complicate matters by putting booster programs on hold until the cases subside. . . But other pandemic-related problems continue to plague nursing homes, some of which still have large numbers of unvaccinated workers, although the average staff vaccination rate has now reached 74%. Looming close is the federal mandate to immunize staff, although numerous states are suing to block the rule.

Many facilities are also coping with severe and costly staffing shortages. Some say the decision by CMS earlier this month to require nursing homes to allow unfettered visitation of residents is complicating their efforts. Some said they were caught off guard by the announcement that visitation was now being allowed for all residents at all times, which could introduce new community infections into the homes.

<https://tinyurl.com/NusringHomeBoostersLag>

23. *The Economist

November 27, 2021

How Europe should deal with covid-19

A fourth surge is causing panic and muddled thinking. . . The European Union is recording nearly a quarter of a million cases a day, more than at any time in the pandemic. Eleven months after vaccination first got under way, intensive-care wards in some regions are almost full. The World Health Organisation warned this week that 700,000 more Europeans could die by March.

<https://tinyurl.com/EuropeCovid19>

24. *Boston Herald

November 26, 2021

US to restrict travel over new coronavirus variant omicron, which is likely already here

<https://tinyurl.com/RestrictTravel>

25. Washington Post

November 26, 2021

What to know about the omicron variant of the coronavirus

Omicron has sparked alarm among epidemiologists worried the new variant's mutations could make it more transmissible. Scientists are racing to learn more as new cases are confirmed. . . There is too little research to draw conclusions, with experts urging caution but not panic. Studies are underway to examine how vaccines hold up against the new variant, with some experts expressing initial optimism that they will offer protection. Officials in South Africa said most of those hospitalized with omicron had not gotten immunized.

<https://tinyurl.com/AboutOmicronVariant>

26. *New York Times

November 26, 2021

New Virus Variant Stokes Concern but Vaccines Still Likely to Work

The Omicron variant carries worrisome mutations that may let it evade antibodies, scientists said. But it will take more research to know how it fares against vaccinated people.

<https://tinyurl.com/VariantStokesConcern>

27. *New York Times

	<p>November 26, 2021 <i>The W.H.O. said a new coronavirus variant in southern Africa was “of concern,” and named it Omicron.</i></p> <p>There is no proof yet that the variant is more contagious or lethal, or could diminish the protective power of the vaccines, but uncertainty on those questions was one factor in the speed with which countries around the world moved to restrict travel from the region. https://tinyurl.com/WHOOmicron</p> <p>28. STAT News November 24, 2021 <i>As vaccination efforts falter, the U.S. must get serious about Covid-19 testing and reporting</i></p> <p>Testing must be seen as a coordinated public health measure, not just something done to diagnose Covid-19 cases or for individuals wanting to clear themselves for travel, theater, and social events. To get through this winter, the U.S. will need more widespread and purposeful deployment of tests. Without a systematic testing strategy and local results of those tests, public health interventions such as masking, distancing, and travel recommendations cannot be effectively deployed. https://tinyurl.com/SeriousCovidTestingReporting</p> <p>29. STAT News November 24, 2021 <i>Virus expert Trevor Bedford on annual Covid boosters and the inevitable next pandemic</i></p> <p>https://tinyurl.com/TrevorBedfordInterview</p> <p>30. STAT News November 24, 2021 <i>Revisiting: A medical historian on the deadly epidemics of the Civil War</i></p> <p>Diseases like smallpox, measles, and dysentery killed two-thirds of the 1 million people who died in the Civil War. “Chronic diarrhea” and the stigma of smallpox scars plagued soldiers and others for decades afterward. And while Americans no longer depend on digging ditches for latrines, we’re still struggling with faith in national public health measures, racial disparities in health care, and more. https://tinyurl.com/EpidemicCivilWar</p> <p>31. Standard-Examiner November 19, 2021 <i>Study shows atrial fibrillation leads to higher COVID-19 risk</i></p> <p>The study showed patients with a history of atrial fibrillation who have COVID-19 are not only more likely to need hospitalization, ventilator support and intensive care, but are also 62% more likely to suffer a major cardiovascular event, such as heart failure hospitalization. These people are also 40% more likely to die than people who do not have the condition. https://tinyurl.com/AFibCovidRisk</p>
Disability	<p>32. STAT News November 26, 2021 <i>The pandemic has deeply affected many people with eating disorders</i></p> <p>[D]ata from a large national health insurer showed substantial increases in hospitalizations among people with anorexia nervosa, bulimia nervosa, and other eating disorders, such as binge-eating disorder, starting in the second half of 2020. Hospitalization rates for these conditions roughly doubled compared to the rates in the prior two years.</p>

<https://tinyurl.com/PandemicEatingDisorders>

33. WBUR

November 24, 2021

In win for residents with disabilities, Boston must upgrade curb ramps across the city

The [federal] consent decree requires Boston to install or upgrade an average of 1,630 curb ramps per year until all of them meet ADA standards. They'll be prioritized based on how heavily they're trafficked, and if they're near public transportation or other key areas. The city allocated an extra \$25 million to do the work in fiscal 2022. Officials hope to complete the project by the end of 2030, when Boston celebrates its 400th birthday.

<https://tinyurl.com/BostonCurbCutUpgrade>

34. *Washington Post

November 23, 2021

My day with Henry Evans — a quadriplegic who's gaining movement through robotics

In 2002, at age 40, Henry Evans suffered a massive stroke that left him mute and with severe quadriplegia. Since then, other than his ability to turn his head and the limited use of one finger, he lies paralyzed in bed. Henry cannot speak, but he can communicate with his eyes, using a "letter board" to painstakingly spell out words letter by letter by shifting his glance, which his wife, Jane, strings together into sentences. . . Like others with a severe disability, Henry is dependent on caretakers to help him eat, shower, move about, even scratch an itch. . . After seeing a TV interview with health-care roboticist Charlie Kemp, Henry reached out to see whether Kemp had used robots to serve as extensions or surrogates for body parts. The result has been a 20-year collaboration between them, with Henry acting as a beta tester of the robots that Kemp and others create.

<https://tinyurl.com/RoboticsHelpingHenry>

35. Bloomberg City Lab

August 18, 2021

Creating More Accessible, Inclusive Buildings

As the U.S. debates where to invest in infrastructure, architects and disability advocates say the principles of universal design will benefit everyone. . . More than one billion people worldwide live with a disability that could inhibit their ability to access a building or infrastructure. Looking at mobility issues in the U.S. alone, there are about twice as many people with mobility disabilities as available wheelchair-accessible housing. . . Universal design, also known as "inclusive design," is the architectural and creative process of ensuring infrastructure in the built environment is accessible to all, regardless of age, ability, or any other demographic. . .

<https://tinyurl.com/AccessibleInclusiveBuildings>

Longevity	<p>36. *New York Times November 17, 2021 <i>The Pandemic Prompted People to Retire Early. Will They Return to Work?</i> Retirement isn't always forever. Over the course of a business cycle, about 20 percent of people are working within 12 months after they first report being retired, according to calculations by Goldman Sachs. The question now is how many people who took early retirement because of the Covid-19 pandemic will return to work. Will it be more than the usual one-fifth or less or about average? . . . Retirees are being pulled in opposite directions. On one hand, as the pandemic comes under control it becomes safer for retirees to resume working. On the other hand, household balance sheets are much stronger now in many ways than they've ever been, so the need to work has lessened. https://tinyurl.com/PandemicEarlyRetirement</p>
Medical Care	<p>37. *New York Times November 27, 2021 <i>A Cure for Type 1 Diabetes? For One Man, It Seems to Have Worked.</i> A new treatment using stem cells that produce insulin has surprised experts and given them hope for the 1.5 million Americans living with the disease. https://tinyurl.com/CureForType1Dabetes</p>
Other	<p>38. Joint Center for Housing Studies of Harvard University November 15, 2021 <i>Do Older Homeowners with Mortgages Cut Back on Health Spending?</i> Between 1989 and 2016 the share of homeowners 65 and older with outstanding mortgages doubled, and the outstanding loan-to-value ratio tripled from 13 to 39 percent. Older homeowners with mortgages are more likely to be cost-burdened (pay more than 30 percent of their income for housing) than older homeowners who don't have a mortgage, but it is not clear whether older owners are tapping debt to meet basic needs or using debt to purchase amenities that improve their quality of life. https://tinyurl.com/OlderHomeownersMedicalExpenses</p>
	*May require registration before accessing article.
Dignity Alliance Massachusetts Legislative Endorsements	<p>Information about the legislative bills which have been endorsed by Dignity Alliance Massachusetts, including the text of the bills, can be viewed at: https://tinyurl.com/DignityLegislativeEndorsements Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at rmoore8473@charter.net.</p>
Websites	<p>Robots for Humanity https://r4h.org/ Robots for Humanity (R4H) is about using technology to extend our capabilities, fill in our weaknesses, and let people perform at their best. Henry Evans is the inspiration and instigator of R4H. Henry suffered a tragic stroke when he was 40 years old, rendering him mute and quadriplegic. Through robotic technology, Henry continues to find ways to explore and interact with the world. Devices developed by members of Robots for Humanity thus far range from an interactive laser mounted on his glasses, to a very expensive humanoid robot (PR2) which serves as Henry's body surrogate, to various flying quad rotors. This site tells the story of Henry's quest to inspire engineers the world over to devote part of their time developing innovative ways for disabled people to interact with the world.</p>

Previously recommended websites	The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: https://dignityalliancema.org/resources/ . Only new recommendations will be listed in <i>The Tuesday Digest</i> .		
Previously posted funding opportunities	For open funding opportunities previously posted in <i>The Tuesday Digest</i> please see https://dignityalliancema.org/funding-opportunities/ .		
Nursing Home Closures	<p>Heathwood Healthcare 188 Florence St. Chestnut Hill, MA 02467 Scheduled to be closed by January 5, 2021</p> <ul style="list-style-type: none"> • Notice of Intent to Close (Word) • Draft of Relocation Plan (Word) <p>Closure Notices and Relocation Plans available at: https://tinyurl.com/MANursingHomeClosures</p>		
Websites of Dignity Alliance Massachusetts Members	See: https://dignityalliancema.org/about/organizations/		
Access to Dignity Alliance social media	Email: info@DignityAllianceMA.org Facebook: https://www.facebook.com/DignityAllianceMA/ Instagram: https://www.instagram.com/dignityalliance/ LinkedIn: https://www.linkedin.com/company/dignity-alliance-massachusetts Twitter: https://twitter.com/dignity_ma?s=21 Website: www.DignityAllianceMA.org		
Participation opportunities with Dignity Alliance Massachusetts Most workgroups meet bi-weekly via Zoom. Please contact workgroup lead for more information	Workgroup	Workgroup lead	Email
	General Membership	Bill Henning Paul Lanzikos	bhenning@bostoncil.org paul.lanzikos@gmail.com
	Behavioral Health	Frank Baskin	baskinfrank19@gmail.com
	Communications	Pricilla O'Reilly Samantha VanSchoick	prisoreilly@gmail.com svanschoick@cil.org
	Facilities (Nursing homes, rest homes, assisted living)	Arlene Germain	agermain@manhr.org
	Home and Community Based Services	Meg Coffin	mcoffin@centerlw.org
	Housing	Shaya French	sfrench@bostoncil.org
	Legislative	Richard Moore	rmoore8743@charter.net
	Topical Conversations	Lachan Forrow	lforrow@bidmc.harvard.edu
Veteran Services	James Lomastro	jimlomastro@comcast.net	
<i>The Tuesday Digest</i>	For a free weekly subscription to <i>The Tuesday Digest</i> : https://dignityalliancema.org/contact/sign-up-for-emails/		
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Tuesday Digest.

If you have submissions for inclusion in The Tuesday Digest or have questions or comments, please submit them to paul.lanzikos@gmail.com.

Dignity Alliance Massachusetts is a broad-based coalition of organizations and individuals pursuing fundamental changes in the provision of long-term services, support, and care for older adults and persons with disabilities.

Our guiding principle is the assurance of dignity for those receiving the services as well as for those providing them.

The information presented in "The Tuesday Digest" is obtained from publicly available sources and does not necessarily represent positions held by Dignity Alliance Massachusetts.

Previous issues of The Tuesday Digest are available at: <https://dignityalliancema.org/the-tuesday-digest/>

For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.