



# The Dignity Digest

Issue # 73

January 21, 2022

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

\*May require registration before accessing article.

## Quotes of the Week

*"We are concerned that Omicron will be used as an excuse to shut down visitation again. We do not want to go back to the past two years of lockdowns in nursing homes and resident isolation and neglect."*

[Sam Brooks](#), program and policy manager, National Consumer Voice for Quality Long-Term Care, *Testing requirements for nursing home visits leave families stuck in 'another lockdown'*, **CNN Health**, January 19, 2022, <https://tinyurl.com/StuckInAnotherLockdown>

*"We have all seen the negative effects of restricting visitation on residents' health and well-being. For nursing homes to go back into a bunker mentality and shut everything down, that's not a solution."*

Joseph Gaugler, a professor who studies *Testing requirements for nursing home visits leave families stuck in 'another lockdown'*, **CNN Health**, January 19, 2022, <https://tinyurl.com/StuckInAnotherLockdown> long-term care at the University of Minnesota's School of Public Health,

*"This is a huge inconvenience, but what's most upsetting is that no one seems to have any kind of long-term plan for families and residents."*

Ozzie Rohm, whose 94-year-old father lives in a San Francisco nursing home, *Testing requirements for nursing home visits leave families stuck in 'another lockdown'*, **CNN Health**, January 19, 2022, <https://tinyurl.com/StuckInAnotherLockdown>

*"The fact that most individuals that are vaccinated are protected against [severe disease from] Omicron leaves me hopeful that we'll move into this sort of final chapter where*

*the virus remains endemic, but we have to worry a lot less about severe disease.”*

Scott Hensley, a vaccines researcher at the University of Pennsylvania’s Institute for Immunology, *After Omicron, we could use a break. We may just get it.*, **STAT News**, January 19, 2022, <https://tinyurl.com/AfterOmicronUseABreak>

*“We know that vaccination remains the safest strategy for protecting against Covid-19.”*

Benjamin Silk, a CDC epidemiologist, **STAT News**, January 19, 2022, *New data show those who recovered from Covid-19 were less likely than vaccinated to get infected during Delta wave*, <https://tinyurl.com/RecoveredLessLikelyRecovered>

*“People are coming to understand that [internet] accessibility is also part of diversity and it needs to be handled in the same way that you handle your other diversity efforts—that is, spread throughout your teams, integrated into your processes.”*

Samuel Proulx, accessibility specialist, Fable Tech Labs Inc., *For Users with Disabilities, Paid Apps Lag Behind Free Ones in Accessibility, Report Shows*, **Wall Street Journal**, December 20, 2021, <https://tinyurl.com/UsersWithDisabilities>

*Omicron, because of its extraordinary contagiousness and its relative mildness, has transformed the risks and the consequences of infection, but not our reading of the statistics that have been guiding us through the pandemic. Do the numbers still mean what we think they mean?*

*Do the Omicron Numbers Mean What We Think They Mean?*, **\*The New Yorker**, January 16, 2022, <https://tinyurl.com/OmicronNumbers>

*[N]o strategy or initiative will be successful without the resources to support it, and the primary focus for health systems right now must be addressing their labor challenges. As the last two years have proven, there is no one more important on the frontlines than caregivers.*

Dan Michelson, CEO of Chicago-based Strata Decision Technology, *Covid-19 is no longer the biggest issue facing hospitals. Staffing is*, **STAT News**, January 19, 2022, <https://tinyurl.com/BiggestIssueStaffing>

*“For me, this suggests that mobile phone-based interventions might not be uniquely effective, but still are effective relative to nothing or non-therapeutic interventions. Given the scalability of these interventions, that’s still good news.”*

Simon Goldberg, an assistant professor at the University of Wisconsin-Madison, *What types of mental health apps actually work? A sweeping new analysis finds the data is sparse*, **STAT News**, January 19, 2022, <https://tinyurl.com/MentalHealthAppsAnalysis>

*“[Free distribution of face masks] will not be as impactful as it would have been had we done it at the beginning of the Omicron surge or the beginning of the Delta surge.”*

Julia Raifman, a health law and public policy expert at the Boston University School of Public Health, *The Biden administration will give away 400 million N95 masks starting next week*, **\*New York Times**, January 19, 2022, <https://tinyurl.com/400millionN95Masks>

*“It’s hard for me to say straight out it’s good news. Maybe there’s good news in the sense that if you are infected your chance of becoming severely ill are decreased, but from a societal perspective it’s a very heavy burden for us. It remains a serious situation, and we need to maintain practices and behaviors we know protect us.”*

Sara Y. Tartof, a Kaiser Permanente research scientist, *US faces wave of omicron deaths in coming weeks, models say*, **Associated Press**, January 18, 2022, <https://tinyurl.com/USFacesWave>

*[H]ome-based services have gone from having a 0% share spend in Medicaid [in the early 1980’s] to over 60%, where it has now surpassed institutional spend[ing]. At the same time, the overall share of long-term care spending in Medicaid went from over half of its spending to under a third.*

*Why In-Home Care Providers Shouldn’t Scrap MA [Medicare Advantage] Strategies Over Lagging Results*, **Home Health Care News**, January 19, 2022, <https://tinyurl.com/InHomeCareMAStrategies>

*“Enrolling people in coverage without their consent is fraud,*

*and health insurance providers support protections for consumers against this sort of fraud.”*

Kristine Grow, a spokesperson for AHIP, an industry trade group formerly known as America’s Health Insurance Plans, *HHS Proposal for Marketplace Plans Carries a Hefty Dose of Consumer Caution*, **Kaiser Health News**, January 19, 2022, <https://tinyurl.com/MarketplaceCaution>

*“I suspect that many hospitals do not want to report their worker vaccination rates because they are very suboptimal and it is embarrassing. Perhaps they don’t want their peers, competitors, and patients to know that they employ health care workers who exercise poor clinical judgment.”*

Amesh Adalja, senior scholar at the Johns Hopkins Institute for Health Security, *How many health care workers are vaccinated? It’s anyone’s guess.*, **Politico**, January 19, 2022, <https://tinyurl.com/VaccinationsAnyonesGuess>

*“It’s worsened an already bad situation. More than 200,000 people have quit their jobs at long-term care facilities since the start of the pandemic because of the burnout, and many of these jobs pay very little. And these days, you can make more money doing something else.”*

NPR health correspondent Rhitu Chatterjee, *What nursing homes have been like with the spread of omicron*, **NPR All Things Considered**, January 13, 2022, <https://tinyurl.com/NHsSpreadOmicron>

Inspiration

**1. New York Times (free access)**

January 1, 2022

*10 Insightful Tips from People Who Prove It’s Never Too Late*

Let their stories be your inspiration as you set resolutions for 2022.

*Dierdre Wolownick, who climbed El Capitan for the first time at age 66.*

You first have to figure out why you think you can’t do something and ask yourself if that’s a valid point. Look, there’s somebody telling you every step of your life what to eat, what to wear, that you can’t sleep without this drug, and it’s all nonsense. You can decide for yourself what you think you’re capable of. It’s just so sad when people say, oh, I’m 50, I can’t ... fill in the blank. Try it anyway! Who cares! You might be surprised.

*Vijaya Srivastava, who learned to swim at age 68.*

Don’t give yourself an option to give up. I never thought about quitting. If I invest mentally, I don’t quit.

*Rose Young, who learned how to ride horseback at age 63.*

Don’t be afraid of embarrassment or opening yourself up to criticism. You have to be OK with not having mastery over something. And don’t let fear stand in your way. It will get less scary every time you try.

*Russ Ellis, who recorded his first album of original music at age 85.*

Do something that involves other people. Even one other person. Getting out

	<p>of a groove — sometimes you just need company. There’s this fantasy that creativity is something you do alone, by candlelight. No! Do something with other people who are as genuinely interested as you are.</p> <p><i>Richard Klein, who moved to Mumbai to become a Bollywood actor in his 40s.</i>      Dream a big dream, then figure out what all the little incremental steps are to get there and hit those steps one by one. There are always obstacles. Loved ones can be an obstacle, money can be an obstacle. It’s not easy. There’s lots of sacrifice involved, but you can dream a big dream and make it come true.</p> <p><i>Martha Prewitt, who left her opera career behind to run her family’s farm in Kentucky.</i>      If you’re feeling stuck, being patient and not freaking out about it is so important. Everything you do gives you experience and skills and tools, wherever you go.</p> <p><i>Phyllis Raphael, who found new love in her 80s.</i>      Do something new that you normally wouldn’t do, or something you hadn’t planned on doing, or something you’re passionate about. Take an acting class or a cooking class or go to a museum. These things let you connect to other people you might not have met ordinarily. It can make your life more lively. Pick up the phone. Send an email. Think of something you want to do and then ask someone if they want to do it with you. Don’t be afraid to let things happen.</p> <p><i>Jocelyn Nicole Johnson, who published a celebrated debut book at age 50.</i>      Embrace rejection and find your people.</p> <p><i>Vica Steel, who enrolled in seminary to become a Lutheran pastor in her 50s.</i>      Be as open as you can be. Be as honest as you can be about who you are. Because ultimately, love overwhelms.</p> <p><i>Vera Jiji, who returned to playing the cello at age 62.</i>      Do not be afraid to go back to something you loved. People say no to things too quickly. We aren’t always our best friends. Your passion or skills are still there. You will remember more than you think. All the information about music I thought I’d lost was in a part of my brain that wasn’t talking to me until I tapped back into it.</p> <p><a href="https://tinyurl.com/10InsightfulTips">https://tinyurl.com/10InsightfulTips</a></p>
Biden / Federal Policies	<p><b>2. ASPE – Office of the Assistant Secretary for Planning and Evaluation</b>  <i>National Plan to Address Alzheimer's Disease: 2021 Update</i>  <a href="#">Goal 1</a>: Prevent and Effectively Treat Alzheimer’s Disease and Related Dementias by 2025  <a href="#">Goal 2</a>: Enhance Care Quality and Efficiency  <a href="#">Goal 3</a>: Expand Supports for People with Alzheimer’s Disease and Related Dementias and Their Families  <a href="#">Goal 4</a>: Enhance Public Awareness and Engagement  <a href="#">Goal 5</a>: Improve Data to Track Progress  <a href="#">Goal 6</a>: Accelerate Action to Promote Healthy Aging and Reduce Risk Factors for Alzheimer’s Disease and Related Dementias  <a href="https://tinyurl.com/NationalAlzheimersPlan2021">https://tinyurl.com/NationalAlzheimersPlan2021</a></p> <p><b>3. Kaiser Health News</b>      January 19, 2022  <i>HHS Proposal for Marketplace Plans Carries a Hefty Dose of Consumer Caution</i>      Some insurance brokers are enrolling people into Affordable Care Act health plans without their consent, perhaps for the commissions, a move that could put</p>

	<p>consumers in danger of owing back the subsidies connected with the coverage. The damage could be hundreds or even thousands of dollars.</p> <p>A consumer’s first hint that something is wrong is a big one: a letter from the IRS or a delay in their tax refund. Although the practice does not appear widespread, it has prompted the Department of Health and Human Services to seek <a href="#">changes to some oversight rules</a> affecting brokers. They would start in 2023. . .</p> <p>The changes are part of a 400-page proposed rule governing the federal health insurance marketplace and a few states that use the federal platform for their own exchanges. The new broker provision aims to deter fraudulent sign-ups by clarifying that applicants must attest that the income projections listed are correct. It also would bar brokers or services who help people enroll in coverage from using “disposable” email addresses, which disappear after a set number of days, or listing the brokers’ phone numbers instead of the consumers’ . . .</p> <p>The proposed changes come as government estimates show that at least 42% of people served by the federal health insurance marketplace likely could qualify for a <a href="#">zero-premium plan</a> based on their income.  <a href="https://tinyurl.com/MarketplaceCaution">https://tinyurl.com/MarketplaceCaution</a></p> <p><b>4. ASPE – Office of the Assistant Secretary for Planning and Evaluation</b>  March 2021  <i>Access to Marketplace Plans with Low Premiums on the Federal Platform</i>  This Issue Brief examines the availability of zero- and low-premium plans in states served by the federal Marketplace, Healthcare.gov, based on the premium subsidies available as of March 1, 2021, which does not yet include the enhanced subsidies created by the American Rescue Plan. Those subsidies will become available on Healthcare.gov on April 1, 2021, taking effect for covered enrollees as early as May 1, and are discussed in more detail later in this Issue Brief. Tables in the brief show zero- and low-premium plan availability for HealthCare.gov states overall, subset by demographic and other characteristics, and by state. The purpose of this Issue Brief is to expand understanding and awareness of the availability of low premium health plans, where they may be available, and to whom.  <a href="https://tinyurl.com/ASPEMarketplacePlans">https://tinyurl.com/ASPEMarketplacePlans</a></p> <p><b>5. National Center on Advancing Person-Centered Practices and Systems</b>  <i>NCAPPS Video Shorts: Culture and Person-Centered Practices</i>  Acknowledging and understanding a person’s racial and cultural identities is essential for providing person-centered supports. However, there are few resources that directly address the intersection of culture, language, and identity with person-centered thinking, planning, and practice. NCAPPS wants to further this conversation—a conversation that is crucial for systems to build cultural humility and cultural competence into person-centered thinking, planning, and practices.</p> <p>In a series of short videos, community members from the National Center on Advancing Person-Centered Practices and Systems (NCAPPS) share their thoughts on how their racial and cultural identities shape their expectations and views of support systems.</p> <p>NCAPPS has released the first five videos in the Culture and Person-Practices video series and will be releasing more videos during the next few weeks.  Access the videos: <a href="https://tinyurl.com/NCAPPSShorts">https://tinyurl.com/NCAPPSShorts</a></p>
Funding Opportunities	<p><b>6. National Paralysis Resource Center</b>  <i>National Paralysis Resource Center Grant Opportunities Opening Soon</i></p>

The National Paralysis Resource Center (operated by the Christopher and Dana Reeve Foundation) is announcing two grant funding opportunities through its 2022 first cycle Direct Effect and Expanded Impact Quality of Life grants initiatives that will open for applications on January 26.

[Direct Effect](#) (Tier 1) grants are offering up to \$25,000 to nonprofit organizations for projects that clearly impact individuals living with paralysis, their families, and caregivers.

[Expanded Impact](#) (Tier 5) grants are awarded to previously funded QOL grantees whose programs and/or projects have achieved demonstrable, successful impact. Approximately four grants of up to \$100,000 each will support significant expansion of strategies and programs that are evidence-based, show innovate promising practices, and/or best practices in the field to improve quality of life for people with paralysis, their families, and caregivers.

The PRC has made changes to their grantmaking program and recommend visiting their website for an overview of the [QOL grant program](#) and the [QOL grant application process](#). Please also read the [Eligibility Criteria and Funding Restrictions](#) and [Application and Program Guidelines](#).

A free [Application Technical Assistance Webinar](#) will be held on **Wednesday, February 2 from 3:00 pm to 4:30 pm ET**. A Question & Answer period will be provided.

The PRC is not able to provide individual pre-award assistance either by telephone or email. However, questions about the application process can be submitted to [QOL@ChristopherReeve.org](mailto:QOL@ChristopherReeve.org). All questions submitted via email will be collected, aggregated, and answered in a Questions and Answers document posted on the website. **The deadline for emailed questions is Monday, February 7.**

QOL grant applications are available and are to be completed through the [online grants portal](#). **The online application submission deadline is Wednesday, March 9, 2022 at 11:59 pm ET.**

Learn more about past and current [Direct Effect](#) and [Expanded Impact](#) grants.

Registration for technical assistance webinar:

<https://tinyurl.com/ReeveFoundationTAWebinar>

#### **7. National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)**

*New Research Funding Opportunities for Minority-Serving Institutions*

New funding opportunities from ACL's [National Institute on Disability, Independent Living, and Rehabilitation Research \(NIDILRR\)](#) have been announced for the [Field Initiated \(FI\) Projects Program](#) for minority-serving institutions.

The purpose of the Field Initiated Projects is to develop methods, procedures, and rehabilitation technology that maximize the full inclusion and integration into society, employment, independent living, family support, and economic and social self-sufficiency of individuals with disabilities, especially individuals with the most severe disabilities. Another purpose is to improve the effectiveness of services authorized under the Rehabilitation Act of 1973.

- [Minority-Serving Institution: Research](#)--The purpose of this grant opportunity is to improve the capacity of minority-serving institutions to conduct high-quality disability and rehabilitation research and development. In carrying out a research activity under a FIP research grant, a grantee must identify one or more hypotheses or research questions and, based on the hypotheses or research questions identified, perform an intensive, systematic study directed toward producing (1) new scientific knowledge, or (2) better understanding of

	<p>the subject, problem studied, or body of knowledge.</p> <ul style="list-style-type: none"> <li>• <a href="#">Minority-Serving Institution: Development</a>--The purpose of this grant opportunity is to improve the capacity of minority-serving institutions to conduct high-quality disability and rehabilitation research and development. In carrying out a development activity under a FIP development grant, a grantee must use knowledge and understanding gained from research to create materials, devices, systems, methods, measures, techniques, tools, prototypes, processes, or intervention protocols that are beneficial to the target population.</li> </ul> <p>These grant opportunities close on February 8, 2022. Please visit these links for more details about the grant opportunities and application process.</p> <ul style="list-style-type: none"> <li>• <a href="#">Minority-Serving Institution: Research</a></li> <li>• <a href="#">Minority-Serving Institution: Development</a></li> </ul> <p><b>8. National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)</b> <i>New Funding Opportunity for Switzer Research Fellowships Program</i> The purpose of this program is to build research capacity by providing support to highly-qualified individuals, including those who have disabilities, to conduct research on the rehabilitation of individuals with disabilities. Fellows must conduct original research in an area authorized by section 204 of the Rehabilitation Act of 1973, as amended. This may include research, demonstration projects, training, and related activities, the purposes of which are to develop methods, procedures, and rehabilitation technology that maximize the full inclusion and integration into society, employment, independent living, family support, and economic and social self-sufficiency of individuals with disabilities. NIDILRR plans to make six fellowship awards under this opportunity. Fellowship awards will have one 12-month project period. <b>This grant opportunity closes on February 22, 2022.</b> <a href="#">View more details and application instructions.</a></p>
Public Policy	<p><b>9. Kaiser Family Foundation</b> January 18, 2022 <i>Medicaid: What to Watch in 2022</i> As 2022 kicks off, a number of issues are at play that could affect coverage and financing under Medicaid, the primary program providing comprehensive health and long-term care coverage to low-income Americans. New COVID variants are surging and the fate of the Build Back Better Act (BBBA), a reconciliation bill that includes significant changes to health coverage and Medicaid, is hanging in the balance. In addition, Governors are poised to release proposed budgets amid continued uncertainty about the health and economic trajectory of the pandemic while the Biden Administration continues to use its authority to address the pandemic and to further strategic goals to expand coverage and access and to improve equity. Within this context, this issue brief examines key issues to watch in Medicaid in 2022. Medicaid Coverage and Enrollment</p> <ul style="list-style-type: none"> <li>• Enrollment and the pandemic.</li> <li>• State decisions around Medicaid coverage.</li> <li>• BBBA and Medicaid coverage provisions.</li> <li>• Administrative actions to maintain and expand coverage.</li> </ul> <p>What to Watch:</p>



- What will happen to Medicaid enrollment when the continuous enrollment requirement ends? Will many people lose Medicaid coverage due to administrative barriers despite remaining eligible? Will people no longer eligible for Medicaid successfully transition to subsidized Marketplace coverage?
- If the BBBA passes, how will that affect Medicaid coverage and coverage options for those who are uninsured?
- If the BBBA is not enacted, will states use existing options and authority to expand Medicaid coverage?

#### Institutional and Home and Community Based Long-Term Care

- Staff and residents at long-term care facilities have been disproportionately affected by the pandemic.
- The COVID-19 pandemic brought new focus to the long-standing [unmet need](#) for home and community-based services (HCBS) among seniors and people with disabilities and [direct care workforce](#) shortages.

#### What to Watch:

- How will institutional and community based long-term care congregate settings continue to be impacted by the pandemic in terms of cases, deaths, and staffing? How will providers and staff respond now that the Supreme Court has allowed CMS’s health care staff vaccine mandate to take effect, and how will litigation challenging the rule ultimately be resolved?
- Will states retain policies adopted under emergency authorities that expanded access to HCBS after the PHE ends?
- How will existing investments help states address the need to continue to expand access to HCBS?
- If BBBA passes, how will states use additional Medicaid HCBS funding to further expand eligibility and services and bolster the direct care workforce?

#### Access, Social Determinants of Health, and Health Equity

- In response to the pandemic, states took action to increase the use of telehealth to expand access to care and also to increase the scope of coverage (and availability of telehealth) for behavioral health services.
- In KFF’s 50-state budget survey, most states reported that the COVID-19 pandemic prompted them to expand Medicaid programs to address social determinants of health, especially related to housing supports.
- The Administration and the majority of state Medicaid programs [are implementing initiatives](#) to address disparities in health care by race/ethnicity in Medicaid.
- State Medicaid agencies and Medicaid MCOS are implementing a variety of activities aimed at promoting the take-up of COVID-19 vaccinations.

#### What to watch?

- How will states continue to leverage Medicaid to help address SDOH and racial equity and how will the Administration support these efforts through investments, guidance, and demonstration waivers?
- How will Medicaid agencies continue to work with public health agencies, providers, managed care plans and enrollees to facilitate access to vaccines and boosters?

<https://tinyurl.com/MedicaidWatch2022>

#### 10. MassHealth

January 2022

*MassHealth PCA Program: FI Transition Information Session*

	<p>Slide deck that MassHealth is using for the presentation on the transition of the fiscal intermediary (FI) for the Personal Care Assistant (PCA) program  <a href="https://tinyurl.com/PCAFITransitionSlideDeck">https://tinyurl.com/PCAFITransitionSlideDeck</a></p>
<p>Webinar and online sessions</p>	<p><b>11. MassHealth</b>  Friday, January 21, 2022, 11:00 to 1:00 p.m.  <i>MassHealth FI Transition Meeting</i>  Password: 002504  <a href="https://tinyurl.com/MassHealthFISession">https://tinyurl.com/MassHealthFISession</a></p> <p><b>12. Administration on Community Living</b>  Tuesday, January 25, 2022, 12:30 to 4:30 p.m.  <i>Upcoming Joint Meeting: RAISE Family Caregiving Advisory Council and Advisory Council to Support Grandparents Raising Grandchildren</i>  ACL is pleased to announce the first joint meeting of the <a href="#">RAISE Family Caregiving Advisory Council</a> and the <a href="#">Advisory Council to Support Grandparents Raising Grandchildren (SGRG)</a> as they come together to begin development of the National Family Caregiving Strategy.  The virtual meeting is open to the public. Registration is not required to attend via webinar. The webinar link will be open for access (live) 5 minutes prior to the meeting start time. A copy of the agenda will be posted prior to the meeting. All information for this meeting will be posted on both Council’s web pages. For more information, please visit the <a href="#">RAISE</a> or <a href="#">SGRG</a> pages.</p> <p><b>13. Benjamin Rose Institute on Aging and the Elder Justice Coalition</b>  Tuesday, January 25, 2022, 1:30 to 3:30 p.m.  <i>Elder Justice Innovations: Helping Individuals Transition from APS to other Community-Based Supports</i>  A select group of grantees will discuss their work focused on the various community services that help individuals transition from short-term Adult Protective Service programs to community services in their area to prevent the recurrence of abuse.  Speakers:</p> <ul style="list-style-type: none"> <li>• Hilary Dalin, Director of the Office of Elder Justice and Adult Protective Services at the Administration for Community Living.</li> <li>• Farida Kassim Ejaz, PhD, Senior Research Scientist at the Center for Research and Education at Benjamin Rose Institute on Aging.</li> <li>• Marian Liu, PhD, Assistant Professor at Purdue University. She is also the Co-Chair of the National Adult Protective Services Association’s Research-to-Practice Interest Group.</li> <li>• Dr. Zachary Hass, PhD, assistant professor at Purdue University.</li> <li>• Joy Solomon, Esq., Vice President of Elder Justice and Spiritual Engagement at RiverSpring Living and the Director and Managing Attorney of The Harry and Jeanette Weinberg Center for Elder Justice at the Hebrew Home at Riverdale.</li> <li>• Kavita P. Ahluwalia, DDS, MPH, Diplomate of the American Board of Dental Public Health.</li> <li>• Traci Lee, MA, Program Administrator for State of Utah Adult Protective Services  Registration: <a href="https://tinyurl.com/ElderJusticeInnovations">https://tinyurl.com/ElderJusticeInnovations</a></li> </ul> <p><b>14. National Center on Law and Elder Rights</b>  Wednesday, January 26, 2022, 2:00 to 2:45 p.m.  <i>Programs to Keep Older Adults Connected to Energy and Utility Services</i>  Many older adults face challenges affording properly heating and weatherizing</p>

	<p>their homes, as well as keeping up with other utilities. This training will provide information about federal utility assistance programs such as the Low-Income Home Energy Assistance Program (LIHEAP), the new Low-Income Household Water Assistance Program (LIHWAP), the low-income Weatherization Assistance Program (WAP), and additional protections for those with serious illnesses. These programs can help older adults stay safe and healthy, reducing the dangers that arise from a lack of access to utilities. We will also discuss ways that advocates can connect older adults to these utility assistance programs.</p> <p>Speaker: Olivia Wein, National Consumer Law Center</p> <p>A link with access to captions will be shared through GoToWebinar’s chat box before the webcast start time.</p> <p>NOTE: Due to the high volume of participants, computer audio will be the only option to listen to the presentation.</p> <p>This webcast will be recorded &amp; available on our website. The recording &amp; training materials will also be emailed to all registrants within a few days after the training.</p> <p>Registration: <a href="https://tinyurl.com/EnergyAndUtilityServices">https://tinyurl.com/EnergyAndUtilityServices</a></p> <p><b>15. Administration for Community Living and Centers for Medicare and Medicaid Services</b></p> <p>Thursday, January 27, 2022, 4:00 to 5:30 p.m.</p> <p><i>Webinar on HCBS Settings Regulation: Where Are We Now and Where Are We Going</i></p> <p>The requirements of the Home and Community-Based Services (HCBS) Settings Rule provide an opportunity to enhance the quality of HCBS and provide additional protections to individuals that receive services. With the transition period coming to a close on March 17, 2023, it’s important to understand both the current state of the transition and what will be needed going forward to ensure continued compliance.</p> <p>This webinar will include an overview of the criteria for home and community-based settings and the heightened scrutiny process, as well as what is required of states to comply with the rule. It will also explore how ACL and CMS are collaborating to ensure successful implementation of the rule and how ACL is supporting our networks and encouraging engagement as states work toward implementation and beyond.</p> <p><b>Speakers:</b></p> <ul style="list-style-type: none"> <li>• Alison Barkoff, Principal Deputy Administrator, Administration for Community Living</li> <li>• Melissa Harris, Deputy Director, Division of Long Term Services and Supports, Disabled and Elderly Health Program Group, Centers for Medicare &amp; Medicaid Services</li> </ul> <p>Registration: <a href="https://tinyurl.com/HCBSSettingsRegulation">https://tinyurl.com/HCBSSettingsRegulation</a></p> <p><b>16. U. S. Census Bureau</b></p> <p>Thursday, January 27, 2022, 2:00 to 3:00 p.m.</p> <p><i>Census 101</i></p> <p>Introduction to information on the agency, locations, and the agency’s most prominent censuses and surveys.</p> <p>Registration: <a href="https://tinyurl.com/Census101Webinar">https://tinyurl.com/Census101Webinar</a></p>
Previously posted webinars and online sessions	<p><b>Previously posted webinars and online sessions can be viewed at:</b></p> <p><a href="https://dignityalliancema.org/webinars-and-online-sessions/">https://dignityalliancema.org/webinars-and-online-sessions/</a></p>
Nursing Homes	<p><b>17. CNN Health</b></p> <p>January 19, 2022</p>

*Testing requirements for nursing home visits leave families stuck in 'another lockdown'*

As Covid-19 cases rise again in nursing homes, a few states have begun requiring visitors to present proof that they're not infected before entering facilities, stoking frustration and dismay among family members.

Officials in California, New York and Rhode Island say new Covid-19 testing requirements are necessary to protect residents — an enormously vulnerable population — from exposure to the highly contagious Omicron variant. But many family members say they can't secure tests amid enormous demand and scarce supplies, leaving them unable to see loved ones. And being shut out of facilities feels unbearable, like a nightmare recurring without end.

Severe staff shortages are complicating the effort to ensure safety while keeping facilities open; these shortages also jeopardize care at long-term care facilities — a concern of many family members. . .

California was the first state to announce [new policies for visitors to nursing homes](#) and other long-term care facilities on Dec. 31. Those took effect on Jan. 7 and remain in place for at least 30 days. To see a resident, a person must show evidence of a negative Covid-19 rapid test taken within 24 hours or a PCR test taken within 48 hours. Also, Covid-19 vaccinations are required. . .

New York followed California with a [Jan. 7 announcement](#) that nursing home visitors would need to show proof of a negative rapid test taken no more than a day before. And on Jan. 10, [Rhode Island announced](#) a new rule requiring proof of vaccination or a negative Covid-19 test.

<https://tinyurl.com/StuckInAnotherLockdown>

**18. The National Consumer Voice for Quality Long-Term Care**

January 19, 2022

*How Private Equity and Other Ownership Practices Harm Nursing Home Residents*

Over the past several years, private equity firm ownership of nursing homes has drawn significant attention from advocates, academics, and legislators. A study released in February 2021 found that private equity ownership of nursing homes increased the short-term mortality of Medicare residents by 10%, resulting in 20,150 more deaths over a twelve-year period. Private equity nursing home owners are concerned with profit. They use complicated, but legal, economic practices to divert Medicare and Medicaid dollars away from residents' care and into their own pockets. However, many of the economic practices of private equity firms are used by many nursing home operators in the United States.

This past November, at the Consumer Voice's annual conference, experts Eileen O'Grady and Ernest Tosh gave an overview of how private equity ownership of nursing homes harms residents, and also shed light on economic practices common to almost all nursing homes. These practices result in little accountability for the billions of taxpayer dollars nursing homes receive each year and result in poor care and negative outcomes for residents.

<https://tinyurl.com/PrivateEquityAndNursingHomes>

**19. CT Mirror**

January 19, 2022

*Lamont orders nursing home visitors to be vaccinated or tested for COVID*

[Connecticut] Gov. Ned Lamont on Wednesday issued a new emergency order requiring visitors to nursing homes to be vaccinated or have proof of a recent negative COVID test before they can enter a facility. . .

Under the new emergency order, visitors must comply with any one of the

	<p>following:</p> <ul style="list-style-type: none"> <li>• Provide proof that they are fully vaccinated against COVID-19 and, if eligible, under FDA or CDC guidance, have received a COVID-19 vaccine booster;</li> <li>• Provide paper or electronic proof of a negative COVID-19 test result from either a rapid antigen test that was completed within the previous 48 hours or a PCR test that was completed within the previous 72 hours; or</li> <li>• Take a rapid antigen test at the nursing home. . .</li> </ul> <p>On Jan. 6, [Connecticut] Department of Public Health Commissioner Dr. Manihsa Juthani issued guidance that asked nursing homes to accept COVID-positive people from hospitals to help alleviate the strain in those facilities. State officials stressed it wasn't a mandate, but the guidance says hospitals should alert DPH if a nursing home facility will not take a COVID-positive person.</p> <p><a href="https://tinyurl.com/LamontOrdersNHVisitors">https://tinyurl.com/LamontOrdersNHVisitors</a></p> <p><b>20. NPR All Things Considered</b> January 13, 2022 <i>What nursing homes have been like with the spread of omicron</i> COVID-19 infections are sky-rocketing in nursing homes. Deaths among residents are only a fraction what they were in 2020. But staffing shortages have worsened and are affecting the care of residents.</p> <p><a href="https://tinyurl.com/NHsSpreadOmicron">https://tinyurl.com/NHsSpreadOmicron</a></p>
Home and Community Based Services	<p><b>21. Home Health Care News</b> January 19, 2022 <i>Why In-Home Care Providers Shouldn't Scrap MA [Medicare Advantage] Strategies Over Lagging Results</i> Changes have allowed MA plans to pay for additional at-home services, whether through primarily health-related benefits or Special Supplemental Benefits for the Chronically Ill (SSBCI). Those changes aren't major on the surface, and adoption hasn't been as swift as some would like.</p> <p><a href="https://tinyurl.com/InHomeCareMAStrategies">https://tinyurl.com/InHomeCareMAStrategies</a></p>
Behavioral Health	<p><b>22. STAT News</b> January 19, 2022 <i>What types of mental health apps actually work? A sweeping new analysis finds the data is sparse</i> The meta-review of [mobile mental health tools], published on Tuesday in <a href="#">PLOS Digital Health</a>, examined 14 meta-analyses that focused specifically on randomized control trials for mental health interventions, including treatments for depression, anxiety, and smoking cessation. In total, the review included 145 trials that enrolled nearly 50,000 patients. The review found universal shortcomings in study design, leading the researchers to write that they "failed to find convincing evidence in support of any mobile phone-based intervention on any outcome." . . . Eight of the interventions, however, were found to hit a slightly lower bar of having "highly suggestive" evidence — though that came with the caveat that the effect of the interventions and the strength of the evidence both "tended to diminish as comparison conditions became more rigorous."</p> <p><a href="https://tinyurl.com/MentalHealthAppsAnalysis">https://tinyurl.com/MentalHealthAppsAnalysis</a></p>
Alzheimer's / Dementia	<p><b>23. U. S. Health and Human Services</b> <i>HHS Emphasizes Healthy Aging to Delay Onset of Alzheimer's Disease and Related Dementias</i> Annual update to national Alzheimer's plan adds focus on risk reduction.</p>

	<p>An estimated 6 million Americans have Alzheimer's disease or a related type of dementia. That number is expected to more than double by 2060 due to the aging of the Baby Boomer generation, making dementia a major public health issue as well as a challenge for the health care system and the economy. Dementia also can be incredibly difficult for the families of people with the disease. In addition to seeing their loved one struggle with the disease, family members and friends provide the majority of care for people with dementia living in the community. Further, the chance of developing dementia is not equal—Black and Latino Americans are more likely to develop the condition, as are women, and people with certain types of chronic diseases, like high blood pressure, diabetes, or depression. . .</p> <p>In addition to this year's added goal on healthy aging and risk reduction, the plan has five other existing ambitious goals to:</p> <ul style="list-style-type: none"> <li>• Prevent and Effectively Treat Alzheimer's Disease and Related Dementias by 2025</li> <li>• Enhance Care Quality and Efficiency</li> <li>• Expand Supports for People with Alzheimer's Disease and Related Dementias and Their Families</li> <li>• Enhance Public Awareness and Engagement</li> <li>• Improve Data to Track Progress</li> </ul> <p><a href="https://tinyurl.com/HealthyAgingDelayAlzheimers">https://tinyurl.com/HealthyAgingDelayAlzheimers</a></p>
Workforce / Caregiving	<p><b>24. New York Times video</b> December 27, 2022 <i>We Know the Real Cause of the Crisis in Our Hospitals. It's Greed. Nurses would like to set the record straight on the hospital staffing crisis.</i> In the Opinion Video, nurses set the record straight about the root cause of the nursing crisis: chronic understaffing by profit-driven hospitals that predates the pandemic. "I could no longer work in critical care under the conditions I was being forced to work under with poor staffing," explains one nurse, "and that's when I left." They also tear down the common misconception that there's a shortage of nurses. In fact, there are more qualified nurses today in America than ever before. <a href="https://tinyurl.com/RealCauseOfCrisis">https://tinyurl.com/RealCauseOfCrisis</a></p> <p><b>25. STAT News</b> January 19, 2022 <i>Covid-19 is no longer the biggest issue facing hospitals. Staffing is</i> [Staffing] challenges were the number one issue that CEOs and CFOs from 20 of America's most prominent health systems shared at this year's recently concluded <a href="#">40th Annual J.P. Morgan Health Care Conference</a>. While nearly every industry is currently facing staffing problems, the issue in health care is especially acute due to the demands and burnout associated with being on the frontlines of care throughout the last two years. 5 strategies for overcoming staffing shortages in health care</p> <ul style="list-style-type: none"> <li>• Investing in current workforce.</li> <li>• Accelerating clinician education.</li> <li>• Looking outside the U.S. for recruiting.</li> <li>• Developing a flexible approach to staffing.</li> <li>• Deploying telehealth to increase access and efficiency.</li> </ul> <p><a href="https://tinyurl.com/BiggestIssueStaffing">https://tinyurl.com/BiggestIssueStaffing</a></p>
Covid-19	<p><b>26. Free At-Home COVID-19 Tests</b> Residential households in the U.S. can order one set of 4 free at-home tests from</p>

USPS.com. Here's what you need to know about your order:

- Limit of one order per residential address
- One order includes #4 individual rapid antigen COVID-19 tests
- Orders will ship free starting in late January

<https://special.usps.com/testkits>

**27. QCovid® risk calculator**

QCovid® is a clinical decision tool intended to support conversations between clinically trained professionals and patients about COVID-19 risk.

QCovid was developed as a model to estimate a person's risk of being hospitalised or dying due to catching coronavirus.

<https://tinyurl.com/QCovidRiskCalculator>

**28. eldercare.locator**

*Healthy Aging in a Pandemic World: What Older Adults and Caregivers Need to Know Now*

This brochure describes some of the changes that families, friends and caregivers may notice and highlights the need to check in and check up on issues that may need attention among the older adults in their lives, poses questions readers can and should ask themselves and their loved ones at this stage of the pandemic—and provides information on how older adults, caregivers and families can connect to services that can help address these changes. Available in English and Spanish.

<https://tinyurl.com/HealthyAgingPandemicWorld>

**29. STAT News**

January 19, 2022

*After Omicron, we could use a break. We may just get it.,*

But the tsunami that is the Omicron wave is tempting us all the same, in large part because of an inescapable fact: By the time it crashes, the immunological landscape in this country — and in much of the world — is going to be profoundly altered. Far more people will have some immunity to Covid-19 than was the case before the wave began. Many will have what is effectively hybrid immunity, from vaccination and infection.

As a result, some experts think we may get a bit of a break from the Covid roller coaster after Omicron. It could be a respite, if you will, after the punishing months of the Delta and Omicron waves, with their millions of cases, which began at the beginning of last summer.

<https://tinyurl.com/AfterOmicronUseABreak>

**30. Politico**

January 19, 2022

*How many health care workers are vaccinated? It's anyone's guess.*

U.S. officials still don't know exactly how many hospital workers remain unvaccinated, a blind spot that makes it difficult for public health officials to predict and assess vulnerabilities at facilities already facing staffing crises.

The lack of reliable immunization data, more than a year after vaccines were first made available to health care workers, could most immediately complicate Biden administration efforts to get ahead of a surge, or assess how many federal personnel might be needed in a region and prop up overwhelmed hospital systems. . . As of the end of December, about three in four hospital workers — 77.6 percent — were fully vaccinated, the Centers for Disease Control and Prevention said, but those figures, which include non-medical staff such as custodial and cafeteria workers, come from only about 40 percent of the nation's hospitals. About four out of five nursing home staffers are fully vaccinated, [according to the CDC](#). Nursing

homes have been required to submit weekly data since last May and roughly 90 percent do so, according to an agency spokesperson. Hospitals, however, won't have to submit data until May 15 under a federal rule released by CMS in August. . . Health care facilities, including hospitals, nursing homes, hospices and other providers that accept payments from CMS, must comply with the vaccine mandate or risk losing access to Medicare and Medicaid funding.

Under the CMS requirement, all staff at health care facilities, such as hospitals, nursing homes and hospices, must be fully vaccinated in the next two months or risk losing federal funding from Medicare and Medicaid — big payers for the industry. . . More than 99 percent of doctors and close to 90 percent of nurses were vaccinated, she said. The vaccination rate dropped off substantially — in the 30 to 40 percent range — for those in more operational roles, such as transportation and food service workers.

<https://tinyurl.com/VaccinationsAnyonesGuess>

**31. \*New York Times**

January 19, 2022

*The Biden administration will give away 400 million N95 masks starting next week.* [T]he administration announced that it would make 400 million nonsurgical N95 masks available free of charge at community health centers and retail pharmacies across the United States. The White House said that to “ensure broad access for all Americans,” there would be a limit of three masks per person.

<https://tinyurl.com/400millionN95Masks>

**32. STAT News**

January 19, 2022

*New data show those who recovered from Covid-19 were less likely than vaccinated to get infected during Delta wave*

New [data](#) released Wednesday showed that both vaccination and prior infection offered strong protection against infection and hospitalization from Covid-19 during the Delta wave — and that case and hospitalization rates were actually lower among people who had recovered from Covid-19 than among those who had been vaccinated. . . Studies have shown that while prior infection seems to generally protect otherwise healthy people from severe disease in the face of Omicron, it does [not offer much of a shield](#) against infection. For vaccinated people, [boosters restore](#) some of the protection that's been lost in the face of Omicron, but studies have also shown that some of the most powerful protection is generated when people who've had Covid are also vaccinated.

<https://tinyurl.com/RecoveredLessLikelyVaccinated>

**33. MassLive.com**

January 19, 2022

*New COVID cases continue to dip in Massachusetts as state reports 14,647 new infections, 3,187 hospitalizations*

Massachusetts public health officials reported 14,647 new [COVID-19](#) cases on Wednesday, marking a continued decline in new cases and a slight drop in hospitalizations for the second day in a row after the weeks of record totals as the highly contagious omicron variant spread.

The state now averages nearly 17,400 new cases daily, according to [The New York Times](#) — a dip compared to recent averages exceeding 20,000. Last Wednesday, the state Department of Public Health reported 22,184 new cases. . .

DPH also reported 199 new deaths, a sharp increase compared to recent averages. . . At least 20,696 Massachusetts residents have died from COVID-19 and nearly



1.4 million have contracted the virus since the pandemic began.

<https://tinyurl.com/CovidCasesDip>

**34. The Hill**

January 18, 2022

*At least 20 percent of Americans have been infected with COVID-19, data show*

The data shows more than 66,400,000 Americans have been infected with the coronavirus since the pandemic began in early 2020. The country has seen more than 850,000 deaths. About 63 percent of the population is now fully vaccinated, though that figure significantly varies by locality — from about 48 percent in Alabama and Wyoming to nearly 87 percent in Washington, D.C.

<https://tinyurl.com/20PercentInfected>

**35. Associated Press**

January 18, 2022

*US faces wave of omicron deaths in coming weeks, models say*

The seven-day rolling average for daily new COVID-19 deaths in the U.S. has been trending upward since mid-November, reaching nearly 1,700 on Jan. 17 — still below the peak of 3,300 in January 2021. COVID-19 deaths among nursing home residents [started rising slightly two weeks ago](#), although still at a rate 10 times less than last year before most residents were vaccinated. . .

A study, posted online and cited during a recent White House briefing, found patients with omicron had a 53% lower risk of hospitalization with respiratory symptoms, a 74% lower risk of ICU admission, and a 91% lower risk of death. The study, which has not yet been peer reviewed, comes from researchers at Kaiser Permanente and University of California, Berkeley.

<https://tinyurl.com/USFacesWave>

**36. \*The New Yorker**

January 16, 2022

*Do the Omicron Numbers Mean What We Think They Mean?*

COVID's winter surge holds a deeper lesson about the perils of interpreting data without a full appreciation of the context. . .

It is a positive development that we're able to engage in this discussion at all. With Alpha and Delta, almost all COVID hospitalizations were related to the infection. The situation is different with Omicron—a function both of its diminished ability to replicate in the lungs and of its superior capacity to infect people who've been vaccinated or previously contracted the virus. Still, parsing the numbers in a moment of crisis can seem a subordinate aim. Omicron is imposing an undeniable strain on the health-care system. Last week, a quarter of U.S. hospitals reported critical staffing shortages. Many have postponed non-urgent surgeries, and some have asked their employees to continue working even after they've been infected. Some states have called in the National Guard; others have enacted "crisis standards of care," whereby overwhelmed hospitals can restrict or deny treatment to some patients—I.C.U. beds, ventilators, and other lifesaving resources—in order to prioritize those who are more likely to benefit.

But this wave, too, shall pass—possibly soon. At the end of it, the vast majority of Americans could have some degree of immunity, resulting from vaccination, infection, or both. In all probability, we'd then approach the endemic phase of the virus, and be left with a complex set of questions about how to live with it. What level of disease are we willing to accept? What is the purpose of further restrictions? What do we owe one another? A clear-eyed view of the numbers will inform the answers. But it's up to us to paint the targets.

	<a href="https://tinyurl.com/OmicronNumbers">https://tinyurl.com/OmicronNumbers</a>
	*May require registration before accessing article.
Dignity Alliance Massachusetts Legislative Endorsements	Information about the legislative bills which have been endorsed by Dignity Alliance Massachusetts, including the text of the bills, can be viewed at: <a href="https://tinyurl.com/DignityLegislativeEndorsements">https://tinyurl.com/DignityLegislativeEndorsements</a> Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at <a href="mailto:rmoore8473@charter.net">rmoore8473@charter.net</a> .
Websites	<b>Christopher and Dana Reeve Foundation</b> <a href="https://www.christopherreeve.org/">https://www.christopherreeve.org/</a> The Christopher and Dana Reeve Foundation is dedicated to curing spinal cord injury by advancing innovative research and improving the quality of life for individuals and families impacted by paralysis. Core beliefs: <ul style="list-style-type: none"> <li>• We believe in empowering those affected by paralysis with the best knowledge, resources, and support.</li> <li>• We believe in the power of "we" not "me." We believe you should not be alone.</li> <li>• We believe in cures that improve and enhance "lives well-lived."</li> <li>• We believe that every story is unique, and <a href="#">we invite you to share yours</a>.</li> <li>• We believe that people with paralysis have a right to a life with dignity.</li> <li>• We believe in a diversity of research done collaboratively and responsibly without impediment.</li> </ul> <b>MBTA Reduced Fare Program</b> <a href="https://www.mbta.com/fares/reduced">https://www.mbta.com/fares/reduced</a> Affordable, accessible transportation is important to older adults and people with disabilities. MBTA's reduced fare program is open to people with disabilities, Medicare cardholders, people 65 and older. The reduced fares for those who qualify are \$1.10 for subway rides, 85 cents for bus rides, and \$30 for a monthly link pass, which entitles the holder to unlimited bus and subway travel. Lower one-way fares at about half price are also available on commuter rail and ferries.
Previously recommended websites	The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: <a href="https://dignityalliancema.org/resources/">https://dignityalliancema.org/resources/</a> . 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 <a href="https://dignityalliancema.org/funding-opportunities/">https://dignityalliancema.org/funding-opportunities/</a> .
Nursing Home Closures	<b>Stonehedge Rehabilitation and Skilled Care Center</b> 5 Redlands Road West Roxbury, MA, 02132 <ul style="list-style-type: none"> <li>• Scheduled to be closed by February 10, 2022 <a href="#">Notice of Intent to Close and Draft of Closure Plan (PDF)</a>   <a href="#">(DOC)</a></li> <li>• <a href="#">DPH Comments on Draft of Closure Plan (PDF)</a>   <a href="#">(DOC)</a></li> <li>• <a href="#">Stonehedge Response to DPH Comments on Draft of Closure Plan (PDF)</a>   <a href="#">(DOC)</a></li> <li>• <a href="#">DPH Approval of Closure Plan (PDF)</a>   <a href="#">(DOC)</a></li> </ul> Closure Notices and Relocation Plans available at: <a href="https://tinyurl.com/MANursingHomeClosures">https://tinyurl.com/MANursingHomeClosures</a>

Websites of Dignity Alliance Massachusetts Members	See: <a href="https://dignityalliancema.org/about/organizations/">https://dignityalliancema.org/about/organizations/</a>																														
Access to Dignity Alliance social media	Email: <a href="mailto:info@DignityAllianceMA.org">info@DignityAllianceMA.org</a> Facebook: <a href="https://www.facebook.com/DignityAllianceMA/">https://www.facebook.com/DignityAllianceMA/</a> Instagram: <a href="https://www.instagram.com/dignityalliance/">https://www.instagram.com/dignityalliance/</a> LinkedIn: <a href="https://www.linkedin.com/company/dignity-alliance-massachusetts">https://www.linkedin.com/company/dignity-alliance-massachusetts</a> Twitter: <a href="https://twitter.com/dignity_ma?s=21">https://twitter.com/dignity_ma?s=21</a> Website: <a href="http://www.DignityAllianceMA.org">www.DignityAllianceMA.org</a>																														
<b>Participation opportunities with Dignity Alliance Massachusetts</b>  Most workgroups meet bi-weekly via Zoom.  Please contact workgroup lead for more information	<table border="1"> <thead> <tr> <th>Workgroup</th> <th>Workgroup lead</th> <th>Email</th> </tr> </thead> <tbody> <tr> <td>General Membership</td> <td>Bill Henning Paul Lanzikos</td> <td><a href="mailto:bhenning@bostoncil.org">bhenning@bostoncil.org</a> <a href="mailto:paul.lanzikos@gmail.com">paul.lanzikos@gmail.com</a></td> </tr> <tr> <td>Behavioral Health</td> <td>Frank Baskin</td> <td><a href="mailto:baskinfrank19@gmail.com">baskinfrank19@gmail.com</a></td> </tr> <tr> <td>Communications</td> <td>Pricilla O'Reilly Samantha VanSchoick</td> <td><a href="mailto:prisoreilly@gmail.com">prisoreilly@gmail.com</a> <a href="mailto:svanschoick@cil.org">svanschoick@cil.org</a></td> </tr> <tr> <td>Facilities (Nursing homes, rest homes, assisted living)</td> <td>Arlene Germain</td> <td><a href="mailto:agermain@manhr.org">agermain@manhr.org</a></td> </tr> <tr> <td>Home and Community Based Services</td> <td>Meg Coffin</td> <td><a href="mailto:mcoffin@centerlw.org">mcoffin@centerlw.org</a></td> </tr> <tr> <td>Housing</td> <td>Shaya French</td> <td><a href="mailto:sfrench@bostoncil.org">sfrench@bostoncil.org</a></td> </tr> <tr> <td>Legislative</td> <td>Richard Moore</td> <td><a href="mailto:rmoore8743@charter.net">rmoore8743@charter.net</a></td> </tr> <tr> <td>Topical Conversations</td> <td>Lachan Forrow</td> <td><a href="mailto:lforrow@bidmc.harvard.edu">lforrow@bidmc.harvard.edu</a></td> </tr> <tr> <td>Veteran Services</td> <td>James Lomastro</td> <td><a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a></td> </tr> </tbody> </table>	Workgroup	Workgroup lead	Email	General Membership	Bill Henning Paul Lanzikos	<a href="mailto:bhenning@bostoncil.org">bhenning@bostoncil.org</a> <a href="mailto:paul.lanzikos@gmail.com">paul.lanzikos@gmail.com</a>	Behavioral Health	Frank Baskin	<a href="mailto:baskinfrank19@gmail.com">baskinfrank19@gmail.com</a>	Communications	Pricilla O'Reilly Samantha VanSchoick	<a href="mailto:prisoreilly@gmail.com">prisoreilly@gmail.com</a> <a href="mailto:svanschoick@cil.org">svanschoick@cil.org</a>	Facilities (Nursing homes, rest homes, assisted living)	Arlene Germain	<a href="mailto:agermain@manhr.org">agermain@manhr.org</a>	Home and Community Based Services	Meg Coffin	<a href="mailto:mcoffin@centerlw.org">mcoffin@centerlw.org</a>	Housing	Shaya French	<a href="mailto:sfrench@bostoncil.org">sfrench@bostoncil.org</a>	Legislative	Richard Moore	<a href="mailto:rmoore8743@charter.net">rmoore8743@charter.net</a>	Topical Conversations	Lachan Forrow	<a href="mailto:lforrow@bidmc.harvard.edu">lforrow@bidmc.harvard.edu</a>	Veteran Services	James Lomastro	<a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a>
	Workgroup	Workgroup lead	Email																												
	General Membership	Bill Henning Paul Lanzikos	<a href="mailto:bhenning@bostoncil.org">bhenning@bostoncil.org</a> <a href="mailto:paul.lanzikos@gmail.com">paul.lanzikos@gmail.com</a>																												
	Behavioral Health	Frank Baskin	<a href="mailto:baskinfrank19@gmail.com">baskinfrank19@gmail.com</a>																												
	Communications	Pricilla O'Reilly Samantha VanSchoick	<a href="mailto:prisoreilly@gmail.com">prisoreilly@gmail.com</a> <a href="mailto:svanschoick@cil.org">svanschoick@cil.org</a>																												
	Facilities (Nursing homes, rest homes, assisted living)	Arlene Germain	<a href="mailto:agermain@manhr.org">agermain@manhr.org</a>																												
	Home and Community Based Services	Meg Coffin	<a href="mailto:mcoffin@centerlw.org">mcoffin@centerlw.org</a>																												
	Housing	Shaya French	<a href="mailto:sfrench@bostoncil.org">sfrench@bostoncil.org</a>																												
	Legislative	Richard Moore	<a href="mailto:rmoore8743@charter.net">rmoore8743@charter.net</a>																												
	Topical Conversations	Lachan Forrow	<a href="mailto:lforrow@bidmc.harvard.edu">lforrow@bidmc.harvard.edu</a>																												
Veteran Services	James Lomastro	<a href="mailto:jimlomastro@comcast.net">jimlomastro@comcast.net</a>																													
<b>The Dignity Digest</b>  For a free weekly subscription to <i>The Dignity Digest</i> : <a href="https://dignityalliancema.org/contact/sign-up-for-emails/">https://dignityalliancema.org/contact/sign-up-for-emails/</a> Editor: Paul Lanzikos Primary contributor: Sandy Novack, MBA, MSW, LICSW, ACSW, CSW-G MailChimp Specialist: Sue Rorke, MetroWest Center for Independent Living																															
<b>Note of thanks</b>  Thanks to the contributors to this issue of <i>The Dignity Digest</i> <ul style="list-style-type: none"> <li>• Wynn Gerhard</li> <li>• Dick Moore</li> <li>• Lisa Orgettas</li> <li>• Annette Peele</li> </ul> Special thanks to Paul Spooner with the MetroWest Center for Independent Living for assistance with the website and MailChimp versions of <i>The Dignity Digest</i> . <i>If you have submissions for inclusion in The Dignity Digest or have questions or comments, please submit them to <a href="mailto:paul.lanzikos@gmail.com">paul.lanzikos@gmail.com</a>.</i>																															
<p><i>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 Dignity Digest" is obtained from publicly available sources and does not necessarily represent positions held by Dignity Alliance Massachusetts.</i></p> <p><i>Previous issues of The Tuesday Digest and The Dignity Digest are available at: <a href="https://dignityalliancema.org/the-tuesday-digest/">https://dignityalliancema.org/the-tuesday-digest/</a></i></p> <p><i>For more information about Dignity Alliance Massachusetts, please visit <a href="http://www.DignityAllianceMA.org">www.DignityAllianceMA.org</a>.</i></p>																															