



# The Dignity Digest

Issue # 75

February 4, 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.

*“If they don’t give you a seat at the table, bring a folding chair.”*

Former Congresswoman Shirley Chisolm,  
<https://tinyurl.com/ChisolmFoldingChair>

*There are innumerable ways to make sense of addiction and many paths to recovery. But the view of addiction as disease fails to capture much of the experience of addiction, and disease language is not necessary to make the point for humane treatment. Today, I am grateful to be in recovery from addiction. I have made peace with the idea that I am the kind of person who should not drink, at least for today. But I do not need to consider it a disease to do this. I believe that waking up to addiction is a tremendous gift, because it points us toward universal human struggles with self-control and working with our pain*

Carl Erik Fisher, addiction physician and bioethicist and the author of [“The Urge: Our History of Addiction.”](#), *It’s Misleading to Call Addiction a Disease*, **New York Times (free access)**, January 15, 2022,  
<https://tinyurl.com/MIsleadingAddictionDisease>

*“The fact is, for too many Americans, housing is unaffordable. We have an inadequate supply of homes — for both rent and for sale — and of course the lowest income families are being hit hardest.”*

Dennis Shea, executive director of the J. Ronald Terwilliger Center for Housing Policy at the Bipartisan Policy Center, *Rents are up 40 percent in some cities, forcing millions to find another place to live*, **\*Washington Post**, January 30, 2022,  
<https://tinyurl.com/RentsUp40Percent>

*“Rents really shot up in the second half of 2021. The pandemic was kind of a pause on the economy and now that things are reopening, inflation is picking up, rents are going up and people are realizing they don’t have as much disposable income as they might have thought they had.”*

Daryl Fairweather, chief economist at Redfin, *Rents are up 40 percent in some cities, forcing millions to find another place to live*, \***Washington Post**, January 30, 2022, <https://tinyurl.com/RentsUp40Percent>

*“A lot of the struggles people are having were laid bare by the pandemic. Many people don’t want to leave their homes because they’re worried about COVID. ... We are definitely looking at services, around mental health and substance abuse, that people can get to online.”*

Middlesex District Attorney Marian Ryan, *Still cautious, many older residents trim back their lifestyles in the time of COVID*, \***Boston Globe**, January 28, 2021, <https://tinyurl.com/OlderAdultsTrimBack>

*Too often, advance directives are construed as immutable guides to how one dies. We have found advance directives to be more helpful if we focus on how one wants to live.*

Dr. Ann Berger, chief of the Pain and Palliative Care team, and Margaret Mahon, nurse practitioner, at the National Institutes of Health Clinical Center, *Tough Decisions About End-of-Life Care*, \***New York Times**, January 22, 2022, <https://tinyurl.com/ToughDecisionEndOfLife>

*"We know exercise is good for us. This study provides additional evidence of the benefits at the population level: if all adults in the United States (over age 40) were to exercise just a bit more each day, a large number of deaths could be prevented each year."*

Epidemiologist Pedro Saint-Maurice, *New research suggests just 10 minutes of daily exercise could extend life*, **The Hill**, January 26, 2022, <https://tinyurl.com/TenMinutesDailyExercise>

*These findings support implementing evidence-based strategies to improve physical activity for adults and potentially reduce deaths in the US.*

*Estimated Number of Deaths Prevented Through Increased Physical Activity Among US Adults*, **JAMA Network**, January 24, 2022,

<https://tinyurl.com/IncreasedPhysicalActivity>

*During July–December 2020, 10.0% of adults aged ≥18 years received care at home from a friend or family member in the past 12 months.*

*Percentage of Adults Aged ≥18 Years Who Received Care at Home From a Friend or Family Member in the Past 12 Months, by Sex and Age Group — National Health Interview Survey, United States, July–December 2020, **Morbidity and Mortality Weekly Report**, January 14, 2022, <https://tinyurl.com/CareAtHomeFreiendFamily>*

*Online interventions such as telehealth, online exercises, and virtual social support, which could be a new normal in the COVID era, were beneficial in combating social isolation. Nurses in the community and long-term care facilities could adopt strategies and online intervention to better support the older adults, contribute to a stronger COVID-19 response and support system, and an overall better road to recovery from this crisis.*

*Psychological impacts and online interventions of social isolation amongst older adults during COVID-19 pandemic: A scoping review, **Journal of Advanced Nursing**, September 21, 2021, <https://tinyurl.com/OnlineInterventionIsolation>*

*Work has gone remote. So has banking, grocery shopping, notary services, and pretty much everything else. Hospitalization is next. It won't be easy, but it will happen. Once health care providers, payers, and regulators catch up with the technology that already exists, the hospitals of tomorrow will expand to the home as they become smaller, more affordable, and better versions of what we have today.*

*The hospital of the future won't be what you expect, **STAT News**, January 31, 2022, <https://tinyurl.com/HospitalOfTheFuture>*

*"I want grandparents to know that they are not alone, having a grandchild with a disability can feel very isolating but people with disabilities are the largest minority group in the world. You are not alone."*

*Michele Thorne, Executive Director of Care 4 the Caregivers, **Raising and Supporting Grandchildren with Disabilities**, **Next Avenue**, January 28, 2022,*

<https://tinyurl.com/GrandchildrenWithDisabilities>

*“We found a risk of dying early from exposure to air pollution, even at very low levels of air pollution across the United States.”*

Daniel S. Greenbaum, president of the Health Effects Institute, *Even Low Levels of Soot Can Be Deadly to Older People, Research Finds*, \*New York Times, January 26, 2022, <https://tinyurl.com/LowLevelsSoot>

*“While at this time original Medicare cannot pay for at-home tests, testing remains a critical tool to help mitigate the spread of COVID.”*

Statement from the Centers for Medicare & Medicaid Services, *Seniors are at high risk of COVID, but Medicare doesn't pay for rapid tests*, NPR Shots, January 24, 2022, <https://tinyurl.com/MedicareDoesntPay>

*“We do not conquer Everest, just like we do not conquer trauma. Instead, we must yield ourselves to the chasms and unexpected avalanches.”*

Silvia Vasquez-Lavado from *In the Shadow of the Mountain, For This Mountaineer, Everest Was a Challenge and a Path to Peace*\*New York Times, February 1, 2022, <https://tinyurl.com/EverestPathToPeace>

*“When boosters were first recommended, a lot of people said, ‘Do we really need to get them?’ and I think this study clearly shows they really do make a difference.”*

Dr. Sharon Balter, Los Angeles County Department of Public Health, *A study finds that vaccines provide robust protection against Omicron*, \*New York Times, February 2, 2022, <https://tinyurl.com/RobustVaccines>

*“Tennis players have won Grand Slams and gold medals in wheelchairs before but haven't had that cut through. It's got nothing really to do about me playing tennis, to be honest. It's about what I say, I guess who I am, mostly being fully proud of who I am, authentically me and challenging the status quo.”*

Dylan Alcott, an Australian quad wheelchair tennis champion, *‘He's Inspired a Nation’: Dylan Alcott Says Goodbye to Tennis*, \*New York Times, January 27, 2022, <https://tinyurl.com/DylanAlcottSaysGoodbye>

National Wear Red Day

**1. National Heart, Lung, and Blood Institute**  
Friday, February 4, 2022

	<p><i>National Wear Red Day® 2022</i>  The first Friday each February, American Heart Month, the nation comes together, igniting a wave of red from coast to coast.  From landmarks to online communities, neighborhoods to news anchors, this annual groundswell unites millions of people for a common goal: the eradication of heart disease and stroke.  <a href="https://tinyurl.com/NHLBIWearRed">https://tinyurl.com/NHLBIWearRed</a>  <a href="https://tinyurl.com/NationalGoRed">https://tinyurl.com/NationalGoRed</a></p>
Featured Essay	<p><b>2. New York Times (free access)</b>  January 15, 2022  <i>It’s Misleading to Call Addiction a Disease</i>  Annual U.S. overdose deaths recently <a href="#">topped 100,000</a>, a record for a single year, and that milestone demonstrates the tragic insufficiency of our current “addiction as disease” paradigm. Thinking of addiction as a disease might simply imply that medicine can help, but disease language also oversimplifies the story and leads to the view that medical science is the single best framework for understanding addiction. Addiction becomes an individual problem, reduced to the level of biology alone. This narrows the view of a complex problem that requires community support and healing. . .  It’s imperative to be careful about these types of deterministic stories. Such reductionistic narratives were repeatedly used as a justification for racist, oppressive crackdowns in the United States, on Chinese opium smoking at the turn of the 20th century and on crack cocaine in the 1980s, which was painted as a problem primarily in Black neighborhoods. Today, amid the opioid overdose epidemic, addiction is more likely to be called a disease, but the language of disease has not done away with the misleading notion that drugs hold all the power. . .  Not all drug problems are problems of addiction, and drug problems are strongly influenced by health inequities and injustice, like a lack of access to meaningful work, unstable housing, and outright oppression. The disease notion, however, obscures those facts and narrows our view to counterproductive criminal responses, like harsh prohibitionist crackdowns.  In contrast, today, descriptions of “brain disease” imply that people have no capacity for choice or self-control. This strategy is meant to evoke compassion, but it can backfire. Studies have <a href="#">found</a> that biological explanations for mental disorders increase aversion and pessimism toward people with psychological problems, including addiction. What’s needed now more than ever, with overdose deaths on the rise, is not fatalism or dehumanization, but hope. . .  [A]ddiction is profoundly ordinary, contiguous with all of human suffering. We cannot end it, we certainly cannot cure it, and medicine alone will never save us. But if we drop the idea of disease and open up to a fuller picture of addiction, it will allow for more nuance, care and compassion.  <a href="https://tinyurl.com/MIsleadingAddictionDisease">https://tinyurl.com/MIsleadingAddictionDisease</a></p>
Input Requested	<p><b>3. MBTA’s Department of System-Wide Accessibility (SWA)</b>  The MBTA’s Department of <a href="#">System-Wide Accessibility (SWA)</a> would like to hear your opinion! SWA has designed a survey to solicit feedback from you, the rider -or even if you do not ride that T- about how you get around in your community. SWA would like to know what barriers you still experience when getting information from the T, and what you suggest the T should do to narrow the information gap that still exist as T-related information is communicated with riders.</p>

All data collected in the survey will be used to improve SWA’s communication processes and assist the T in closing the information gap for older adults, individuals with disabilities, and/or non-native English speakers living in the Boston area. All information will remain confidential and not shared with any third party. The survey will take less than 10 minutes to complete and remain open until **February 16, 2022**.

The survey is available in English, Spanish, Portuguese, Traditional and Simplified Chinese <https://rebrand.ly/customersurvey5languages> and in Haitian Creole <https://rebrand.ly/CustomersurveyHaitianCreole>

**4. Centers for Medicare & Medicaid Services (CMS)**

*CMS Proposes to Add Beneficiary Protections to Medicare Advantage and Prescription Drug Plan Rules*

The Centers for Medicare & Medicaid Services (CMS) has published a [proposed rule](#) to lower out-of-pocket Medicare Part D prescription drug costs and improve consumer protections, reduce disparities, and improve health equity in MA and Part D programs.

The rule includes several provisions important to ACL’s networks. For example, it would:

- Revise marketing and communications requirements to help ensure that beneficiaries get accurate and accessible information about Medicare coverage;
- Reduce beneficiary cost-sharing for prescription drugs by redefining how the cost of a drug is determined;
- Revise regulations for dual-eligible special needs plans (D-SNPs), and in some cases other special needs plans, related to enrollee advisory committees, health risk assessments, and ways to improve integration of Medicare and Medicaid;
- Revise criteria used to review applications for new or expanded MA and Part D plans;
- Revise quality ratings for MA and Part D plans;
- Revise provider network adequacy requirements; and
- Revise timeframes and standards for MA programs associated with disasters and emergencies.

A fact sheet summarizing the proposed changes is available [here](#).

Comments can be submitted by mail or [online](#) until March 7.

**5. Centers for Medicare & Medicaid Services (CMS)**

*Proposed coverage of monoclonal antibodies directed against amyloid for Alzheimer’s patients enrolled in approved trials*

CMS has released a [proposal](#) to cover monoclonal antibodies directed against amyloid for the treatment of Alzheimer’s disease for Medicare beneficiaries who have mild cognitive impairment due to Alzheimer’s or mild Alzheimer’s dementia and who are enrolled in approved medical trials.

The memo lays out the criteria for CMS-approved trials, which must include a diverse group of participants that are representative of the Medicare population. Comments surrounding the criteria for approving trials, particularly around ensuring diversity, are encouraged.

[Comments](#) can be submitted until February 10. CMS expects to issue a final decision regarding coverage on or before April 11.

**6. The White House Office of Science and Technology Policy (OSTP)**

*White House seeks input on strengthening community health through technology*



	<p>The White House Office of Science and Technology Policy (OSTP) has published a <a href="#">request for information</a> (RFI) soliciting information on how digital health technologies are used, or could be used in the future, to transform community health, individual wellness, and health equity.</p> <p>The RFI specifically requests input on several areas of interest to ACL’s networks, including:</p> <ul style="list-style-type: none"> <li>• Barriers to the use of digital health technologies in community-based settings faced by individuals or organizations;</li> <li>• How the use of digital health technologies (including telemedicine) has changed during the pandemic;</li> <li>• How digital health technologies could be better designed with the user experience in mind;</li> <li>• How digital health technologies have been used, or could be used, in community-based settings to drive towards a reduction in health disparities or achieving health equity; and</li> <li>• Opportunities for the federal government to support the transformation of community health settings through the uptake of innovative digital health technologies and telemedicine at the community level.</li> </ul> <p>Comments are due by 5:00 PM ET on February 28 and can be submitted via email to <a href="mailto:connectedhealth@ostp.eop.gov">connectedhealth@ostp.eop.gov</a> or via phone at 202-456-3030.</p>
Request for Beta Readers	<p><b>7. MedStrong-Shed Your Meds for a Better Healthier</b>  <a href="#">MedStrong-Shed Your Meds for a Better Healthier You</a>, written by Donna Bartlett, PharmD, BCGP, RPH, is a book on aging well through deprescribing for health care consumers and caregivers. To be a beta reader, please email Donna Bartlett at <a href="mailto:donna.bartlett@mcphs.edu">donna.bartlett@mcphs.edu</a>.</p>
Inspiration	<p><b>8. *New York Times</b>  February 1, 2022  <i>For This Mountaineer, Everest Was a Challenge and a Path to Peace</i>  And yet Mount Everest, that great Mother, forces her to yield. Patriarchal societies champion summit journeys as tales of conquest. But Vasquez-Lavado understands that “we do not conquer Everest, just like we do not conquer trauma. Instead, we must yield ourselves to the chasms and unexpected avalanches.” And herein lies the wisdom of this work, aptly subtitled “A Memoir of Courage”: In a world that demands us to harden, to tell stories of strength and triumph, the bravest act can be embracing our inner child, our fears, our truths.  <i>For This Mountaineer, Everest Was a Challenge and a Path to Peace</i>  <a href="https://tinyurl.com/EverestPathToPeace">https://tinyurl.com/EverestPathToPeace</a></p> <p><b>9. *New York Times</b>  January 27, 2022  <i>‘He’s Inspired a Nation’: Dylan Alcott Says Goodbye to Tennis</i>  Alcott, a recent Australian of the year recipient, ends his career with 15 Grand Slam quad singles titles and a platform for his motivational messages, but a loss in his final match. . .  Alcott, 31, announced in November that this Australian Open would be his final tournament, drawing a finish line for a dominant career in which he won the quad singles competition at 15 of the 19 Grand Slam tournaments in which he played. Alcott also won Paralympic gold in Tokyo in 2021, making him the first man to achieve the Golden Slam in quad singles, winning all four majors and the Olympics. In his acceptance speech in Canberra, Alcott, who was born with lipomeningocele,</p>

	<p>a dysraphic condition of the spine, showed the wit and directness for which he is known. “I thought I had no chance, and then I got here, and I saw this really good-looking ramp, and I thought: I might have a chance here,” Alcott said in his ice-breaking remarks before shifting to darker reflections. Through sports, Alcott found a platform to spread his message. He first won Paralympic gold in basketball in 2008 when he was 17, later switching to tennis.</p> <p><a href="https://tinyurl.com/DylanAlcottSaysGoodbye">https://tinyurl.com/DylanAlcottSaysGoodbye</a></p>
<p>Funding Opportunities</p>	<p><b>10. 2022 AARP Community Challenge Grant</b></p> <p>The AARP Community Challenge provides small grants to fund quick-action projects that can help communities become more livable for people of all ages. This year, applications will be accepted for projects to improve public spaces; housing; transportation; civic engagement; diversity, equity, and inclusion; support efforts to build engagement for programs under new federal laws; and other innovative ideas that support people aged 50 or older.</p> <p><b>Important Dates in 2022</b></p> <ul style="list-style-type: none"> <li>• <b>January 25:</b> Application window opens</li> <li>• <b>March 22:</b> Applications due by 5 p.m. (ET)</li> <li>• <b>Mid-May:</b> All applicants will be notified by email of their status</li> <li>• <b>June 29:</b> Public announcement of the selected grantees — and work on the projects begin!</li> <li>• <b>November 30:</b> All funded projects must be completed</li> <li>• <b>December 14:</b> Deadline for after-action reports</li> </ul> <p><b>The program is open to the following types of programs:</b></p> <ul style="list-style-type: none"> <li>• 501(C)(3), 501(C)(4) and 501(c)(6) nonprofits</li> <li>• Government entities</li> <li>• Other types of organizations will be considered on a case-by-case basis</li> </ul> <p><b>Project Categories</b></p> <p>AARP will prioritize projects that support residents age 50 or over, are inclusive, address disparities, directly engage volunteers and aim to achieve one or more of the following outcome areas:</p> <ul style="list-style-type: none"> <li>• Create vibrant <b>Public Places</b> that improve open spaces, parks, and access to other amenities</li> <li>• Deliver a range of <b>Transportation and Mobility</b> options that increase connectivity, walkability, bikeability, wayfinding, access to transportation options and roadway improvements</li> <li>• Support a range of <b>Housing</b> options that increases the availability of accessible and affordable choices</li> <li>• Ensure a focus on <b>Diversity, Equity and Inclusion</b> while improving the <b>Built and Social Environment</b> of a community</li> <li>• Support communities’ efforts to <b>Build Engagement and Leverage Funding</b> available under new federal programs through laws including the American Rescue Plan Act, the Infrastructure Investment and Jobs Act, and more</li> <li>• Increase <b>Civic Engagement</b> with innovative and tangible projects that bring residents and local leaders together to address challenges and facilitate a greater sense of inclusion</li> <li>• Other community improvements, including <b>Health Services, Community Development, and Coronavirus Pandemic Recovery</b></li> </ul> <p><a href="#">Learn more</a></p>



Guides	<p><b>11. Grandfamilies.org</b>  <i>Grand Resources: A Grandparent’s and Other Relative’s Guide to Raising Children with Disabilities</i>  The guide seeks to answer some of the most often asked questions from grandfamilies who have children with disabilities.  <a href="https://tinyurl.com/GRandResourcesGuide">https://tinyurl.com/GRandResourcesGuide</a></p>
Biden / Federal Policies	<p><b>12. mHealth Intelligence</b>  January 28, 2022  <i>GOP, Independent Senators Co-Sponsor Medicare Telehealth Access Bill</i>  The bipartisan legislation would eliminate Medicare’s geographic and originating site restrictions and establish policies that ensure Medicare coverage for telehealth services.  <a href="#">According to HHS</a>, almost half (43.5 percent) of all Medicare fee-for-service (FFS) primary care visits were conducted via telehealth in April 2020. Usage remained high during the first year of the public health emergency. In fact, from January to December 2020, nearly <a href="#">52.7 million Medicare FFS beneficiaries</a> used telehealth, a 63-fold increase from the year prior. .  The Telehealth Modernization Act seeks to make certain temporary policies permanent.  The bill would permanently eliminate Medicare’s geographic and originating site restriction. This restriction limits patients’ access to telehealth by requiring that Medicare beneficiaries live in rural areas and be present at a doctor’s office or other specified clinics in order to receive virtual healthcare services that are covered by their insurance.  The legislation would also ensure that individuals living in rural areas continue to have access to virtual care by requiring Medicare to provide coverage for telehealth services provided at federally qualified health centers and rural health clinics.  Additionally, the bipartisan bill would give the HHS secretary the power to solidify Medicare coverage for virtual physical therapy, speech language pathology, and additional specialty healthcare services. The HHS secretary would also have the authority to ensure continuity of virtual care and Medicare coverage for hospice and home dialysis patients.  <a href="https://tinyurl.com/MedicareTelehealthAccessBill">https://tinyurl.com/MedicareTelehealthAccessBill</a></p> <p><b>13. U. S. Department of Justice Civil Rights Division</b>  <i>COVID-19 and the Americans with Disabilities Act—recently updated with information about streateries and medical setting visitor policies</i>  On January 5, the Department of Justice updated its “<a href="#">Common Questions About COVID and the ADA</a>” to address visitation in medical facilities and accessibility of outdoor dining and retail spaces.  The guidance clarifies that the ADA requires medical facilities to allow visitors if they are needed to ensure equal access to care for people with disabilities and provides examples of situations to which this requirement may apply. It also clarifies that outdoor retail and dining spaces (sometimes called “streateries”) must be accessible to people with disabilities and provides examples of how those establishments and local governments can ensure accessibility.  <a href="https://tinyurl.com/UpdateMedicalVisitors">https://tinyurl.com/UpdateMedicalVisitors</a></p> <p><b>14. Centers for Medicare &amp; Medicaid Services (CMS)</b>  <i>No Surprises Act: Fact Sheet</i>  On January 1, the No Surprises Act <a href="#">went into effect</a>, establishing protections</p>

	<p>against surprise billing and excessive cost-sharing for people who are covered by commercial health plans.</p> <p>As we have <a href="#">discussed previously</a>, Medicare, Medicaid, Indian Health Services, Veterans Affairs Health Care, and TRICARE already provide protections against surprise billing and excessive cost-sharing. Now, people with commercial health plans will also be protected from surprise bills for most emergency care and many instances of non-emergency care. The bill also ensures that no one can be charged for out-of-network costs without notice. That notice must be accessible to people with disabilities and people with limited English proficiency. The No Surprises Act also establishes important protections for uninsured or self-paying patients, including requiring most providers to give a “good faith estimate” of costs before providing non-emergency care.</p> <p>CMS has published this <a href="#">fact sheet</a> and updated this <a href="#">webpage</a> to help people understand these protections.</p> <p><b>15. Office of Civil Rights, U. S. Department of Health and Human Services</b>  <i>Guidance on “Long COVID” as a Disability Under the ADA, Section 504, and Section 1557</i></p> <p>The Equal Employment Opportunity Commission (EEOC) has <a href="#">added a new section</a> to its COVID-19-related technical assistance to clarify when COVID-19 may be considered a disability and what that means for employers, employees, and job applicants.</p> <p>This new addition provides examples to illustrate when COVID-19 or disabilities arising from conditions that were caused or worsened by COVID-19 may meet the definition of disability under Title I of the Americans with Disabilities Act (ADA) or Section 501 of the Rehabilitation Act, which the EEOC enforces, and when employees or job applicants may be entitled to reasonable accommodations at work as a result. It also addresses nondiscrimination protections provided to employees and job applicants under the ADA and the Rehabilitation Act and clarifies that certain ADA protections apply to all job applicants and employees, regardless of whether they have a disability.</p> <p><a href="https://tinyurl.com/GuidanceOnLongCOvidUnderADA">https://tinyurl.com/GuidanceOnLongCOvidUnderADA</a></p>
<p>Call for Proposals (Deadline Extended)</p>	<p><b>16. LGBT Elders in an Ever-Changing World Conference</b>  <i>11<sup>th</sup> Annual (Virtual) Conference Call for Proposals</i>  Friday, June 22, 2022, 8:30 a.m. to 4:00 p.m.</p> <p>The 11th Annual LGBTQ+ Elders in an Ever-Changing World conference is a collaborative effort of the following:</p> <ul style="list-style-type: none"> <li>• The LGBTQIA+ Aging Project, a program of Fenway Health in Boston, Massachusetts</li> <li>• AgeSpan, formerly Elder Services of Merrimack Valley and North Shore and Over the Rainbow LGBTQ+ Coalition, and Senior Social Connection</li> <li>• Salem State University School of Social Work in Salem, Massachusetts</li> <li>• Care Dimensions, a non-profit hospice &amp; palliative care organization serving Eastern Massachusetts</li> <li>• Good Shepherd Community Care, A not-for-profit hospice and palliative care organization serving Greater Boston since 1978</li> </ul> <p>The conference presentations address the issues of older persons and caregivers of Lesbian, Gay, Bisexual, Transgender, Queer/ Questioning and + (LGBTQ+) communities and their allies. The conference strives to create an open and welcoming forum as well as a convening of community. LGBTQ+ Elders in an Ever-Changing World conference is intended for consumers, social services, educators,</p>

	<p>researchers, and public policy makers as well as service and healthcare professionals who support and work with LGBTQ+ older adults and caregivers. This year the Keynote speaker is Stu Maddux, award winning filmmaker of Gen Silent. He will present on “Social Isolation, Loneliness, and Resilience in LGBTQ Older Adults” featuring his new and timely documentary film All the Lonely People, which tells the story of the troubling increase of chronic loneliness and social isolation affecting people of all ages and backgrounds across the world.</p> <p><b>Deadline for proposed workshop presentations extended to Monday, February 14, 2022.</b> For details about submission requirements including suggested presentation topics, contact conference sponsors at <a href="mailto:lgbtqelderconference@gmail.com">lgbtqelderconference@gmail.com</a>.</p>
Advisory Members Sought	<p><b>17. Federal Emergency Management Agency</b> <i>National Advisory Council</i></p> <p>The Federal Emergency Response Agency (FEMA) is seeking qualified individuals to lend their expertise and serve on the agency’s <a href="#">National Advisory Council</a>. They are specifically seeking applicants with expertise on the needs of people with disabilities and older adults for emergency preparedness, response, and recovery. The National Advisory Council includes a geographically diverse and substantive cross-section of 35 members who advise the FEMA Administrator on all aspects of emergency management, ensuring input from and coordination with state, local, tribal and territorial governments, as well as the private and nonprofit sectors. Individuals appointed to the council bring their experience and diversity of views to provide the Administrator consensus recommendations on a broad range of issues.</p> <p>Administrator Criswell will appoint up to 14 members who will begin serving on the council in December 2022. Selected council members will guide future recommendations on topics including equity, climate readiness and workforce. The agency is accepting applications for 11 discipline-specific positions and three Administrator-selected positions. Discipline-specific positions include climate change, cybersecurity, disabilities, access, and functional needs, elected state officials, emergency management, emergency medical provider, non-elected local official, non-elected state government officials, public health and standards setting and accrediting. For more information about what each position entails, please see the <a href="#">council’s charter</a>.</p> <p>Supporting her commitment to address climate adaptation, Administrator Criswell directed the council’s charter to be updated to include climate change experts. The first climate expert began serving in December 2021. This recruitment announcement includes solicitation of a second climate expert. Newly selected members will serve up to a three-year term on the council. If other positions open during the application and selection period, FEMA may select qualified candidates from the pool of applications.</p> <p><b><i>If you are interested in applying to serve on the National Advisory Council, please follow <a href="#">these instructions</a> for submitting an application package no later than 11:59 p.m. ET March 31.</i></b></p> <p>For additional information, contact: Rob Long, Designated Federal Officer, Office of the National Advisory Council, Federal Emergency Management Agency; <a href="mailto:FEMA-NAC@fema.dhs.gov">FEMA-NAC@fema.dhs.gov</a>, 202.646.2700. <a href="https://tinyurl.com/FEMAAdvisoryCouncil">https://tinyurl.com/FEMAAdvisoryCouncil</a></p>
Learning Opportunities for Dignity Alliance	<p><b>18. Creating Accessible, Powerful Social Media Content</b> <i>Engaging Everyone: Creating Accessible, Powerful Social Media Content</i></p>

<p>Massachusetts Participants and Supporters</p>	<p><i>Part One: The Basics</i> February 16, 12:00 to 1:00 p.m. Learn how to create accessible, powerful social media content to drive your advocacy efforts in this two-part interactive workshop. Part one is designed for beginners: people who are new to using social media or have a very basic understanding of Facebook, Instagram, and Twitter. Presenters will cover the key features of each platform, the best type of content for each, how to make your content accessible, and how to post on each platform. Register for Part One: <a href="https://tinyurl.com/EngagingEveryone">https://tinyurl.com/EngagingEveryone</a></p> <p><i>Part Two: Messaging</i> March 2, 12:00 to 1:00 p.m. In part one, we covered the basics of how to create accessible posts for Facebook, Instagram, and Twitter. In part two, learn about the parts of an effective social media campaign. Presenters will walk through the parts of a campaign, how to define your message, how to influence and target your message, and how to measure your impact. Presenters will discuss different strategies and walk through campaign examples. Register for Part Two: <a href="https://tinyurl.com/PartTwoMessaging">https://tinyurl.com/PartTwoMessaging</a></p> <p>Meet the Presenters <b>Jules Good</b> (they/them) is the founder and consulting lead at Neighborhood Access. Jules is a multiply-disabled entrepreneur with a passion for leveraging design, community, and intersectional justice principles to create more accessible neighborhoods. They hold a Master in Public Policy from the University of New Hampshire. Jules has worked with nonprofits, state agencies, and private businesses to aid in making their practices and processes more accessible to the disabled community. They are deeply involved in disability justice work both locally in their current home state of New Hampshire, and nationally. <b>Samantha VanSchoick</b> (she/her) spends most of her time passionately &amp; meticulously infusing creative energy into high-impact marketing campaigns. As Director of Strategic Partnerships at CIL, a nonprofit real estate developer, Sam seeks out opportunities to create a world where all people have access to quality, accessible housing in neighborhoods of their choice. Sam serves as the Communications Workgroup Co-chair for Dignity Alliance Massachusetts, a coalition of orgs and advocates across MA that believe in dignity, choice, and determination for aging and disabled persons.</p>
<p>Webinar and online sessions</p>	<p><b>19. Washington Post</b> Friday, February 4, 2022, 1:00 p.m. <i>“CODA” film conversation with Academy Award-winner Marlee Matlin</i> “CODA” is a coming-of-age film about Ruby Rossi, the only hearing member of her family. Academy Award-winner Marlee Matlin joins The Washington Post’s Frances Stead Sellers for a conversation about the film and its history-making ensemble that features several deaf actors. Free registration: <a href="https://tinyurl.com/CODAAConversation">https://tinyurl.com/CODAAConversation</a></p> <p><b>20. Adult Protective Services Technical Assistance Resource Center (APS TARC)</b> Thursday, February 17, 2022, 3:00 to 4:00 p.m. In 2020, ACL awarded two-year state Adult Protective Services enhancement grants to Montana and Nevada to innovate and enhance practices, services, data collection, and reporting to better serve and assist clients impacted by the opioid crisis. Join ACL's <a href="#">APS Technical Assistance Resource Center</a> for an update on the key</p>

grant activities and data collected for grant year one. Learn about the successes, challenges, and work to come in grant year two.

Speakers:

- **Tammy Sever, LSW**, Social Services Chief, State of Nevada Aging and Disability Services Division-Adult Protective Services
- **Sharysse Boer**, Business Project Specialist, State of Nevada Aging and Disability Services Division-Adult Protective Services
- **Agnes Francis**, Management Analyst, State of Nevada Aging and Disability Services Division-Adult Protective Services
- **Travis Tangen**, Adult Protective Services Acting Bureau Chief, Montana Department of Public Health and Human Services

Registration: <https://tinyurl.com/OpioidMisuseAdultMaltreatment>

#### **21. National Council on Aging**

Tuesday, February 22, 2022, 12:00 to 1:00 p.m.

*February 2022 Grand Rounds: Evidence-Based Programs (EBPs) Virtual/Remote Delivery*

This call will offer participants an opportunity to learn how Administration for Community Living (ACL) grantees are offering evidence-based programs during the coronavirus pandemic. In grand rounds style, ACL grantees will share how they are delivering EBPs in the virtual/remote environment, successes of their work, and lessons learned. Join the call to learn about virtual delivery of EBPs, collaborate with others across the country, and ask questions to help your organization work towards offering and/or improving your EBP virtual delivery.

[Register here](#)

#### **22. National Center on Advancing Person-Centered Practices and Systems (NCAPPS)**

Tuesday, February 22, 2022, 2:30 to 4:00 p.m.

*Person-Centered Decision Making in Healthcare and at End of Life*

It's not uncommon for people with disabilities to confront bias when engaging with healthcare providers and systems. For example, providers might make wrong assumptions about people's decision-making abilities and their goals for care and treatment. This bias can result in inappropriate care. In this webinar, four panelists will talk about the benefits and the limitations of advance care planning as a more person-centered approach to care. Advance care planning and health care directives are written instructions that tell people who care about you, others, and providers the type of medical care you want in the event that you're not able to speak for yourself. Our panelists will cover key concepts in healthcare decision making and advance directives. They'll talk about how these can come into play with regard to culture, faith and spirituality, advocacy and lived experience, and provision of community-based services.

Registration: <https://tinyurl.com/PersonCenteredEndOfLifePlan>

#### **23. Fireweed Collective**

Wednesday, March 30, 2022, 7:00 p.m.

*Disability Justice 101 Anti-Oppressive Mental Health 101 for mental health / healing justice workers and providers*

Fee: \$50.00

Registration: <https://tinyurl.com/FireweedCollectiveOnline>

#### **24. Fireweed Collective**

Wednesday, April 27, 2022, 7:00 p.m.

*Disability Justice 101 Anti-Oppressive Mental Health 101 for mental health / healing justice workers and providers \*must have attended anti-oppressive MH 101\**

Fee: \$50.00

	<p>Registration: <a href="https://tinyurl.com/FireweedCollectiveOnline">https://tinyurl.com/FireweedCollectiveOnline</a></p> <p><b>25. Massachusetts Suicide Prevention Conference</b>  Wednesday, May 18 to Thursday, May 19, 2022  <a href="#">Click here to save the date</a></p> <p><b>26. National Council on Aging</b>  Monday, June 6 to Wednesday, June 8, 2022  <i>Age + Action 2022 Virtual Conference</i>  A three-day virtual event that explores solutions to ensure equitable aging for all. Connect with colleagues, share innovative ideas, and discuss policy solutions that we can achieve together on behalf of older adults.  <a href="#">Register here</a></p>
<p>Previously posted webinars and online sessions</p>	<p><b>Previously posted webinars and online sessions can be viewed at:</b>  <a href="https://dignityalliancema.org/webinars-and-online-sessions/">https://dignityalliancema.org/webinars-and-online-sessions/</a></p>
<p>Home and Community Based Services</p>	<p><b>27. Associated Press and NORC Center for Public Policy Research</b>  <i>Telehealth and Equity</i>  Use of telehealth has been common during the pandemic among adults age 50 and older, according to a survey of adults in America age 50 and older by The Associated Press-NORC Center for Public Affairs Research. Perceptions about its advantages and disadvantages highlight some ways that telehealth may exacerbate equity issues in the health care system and other ways it may reduce disparities.  About The Long-Term Care Poll on Telehealth Among Adults Age 50 and Older:  1) Ease of scheduling an appointment (69%), meeting with a specific doctor (68%), and getting an immediate response (68%) are top reasons for using telehealth over in-person care.  2) Having a prior relationship with the doctor (69%), the option for emails or direct messages (55%), and information about insurance coverage (50%) would improve telehealth uptake.  3) 65% of nonwhite respondents cite avoiding COVID-19 as a reason to use telehealth, but 63% worry about lower-quality care.  <a href="https://tinyurl.com/yfdv2bv9">https://tinyurl.com/yfdv2bv9</a></p> <p><b>28. STAT News</b>  January 31, 2022  <i>The hospital of the future won't be what you expect</i>  Close your eyes for a few seconds and imagine what a hospital will look like 10 years in the future. If medical robots, artificial intelligence, and other technologies come to mind, you are on the right track. But if you picture these innovations happening in a sprawling hospital campus, think again.  Radical changes afoot in health care philosophy, medical technology, and treatment capability will lead to hospital-quality care being administered outside of hospitals — in primary care and urgent care center and in people's homes. These changes will create more comfortable conditions for patients, yield better outcomes, and be more affordable. . .  What's more, the stress of hospitalization, the <a href="#">presence of antibiotic-resistant microbes</a>, and other issues increase the risk of infection the longer someone is hospitalized. Unless hospitalization is absolutely imperative to receiving proper care, people are almost always better off avoiding a hospital stay. . .  Before Covid-19, telemedicine was seen by many as a niche service that would remain irrelevant to most patients and health care providers. The pandemic</p>



	<p>changed that entirely, driving 3,800% growth in telemedicine, now well on its way to \$250 billion of market value, <a href="#">according to a report</a> by McKinsey &amp; Company. Video calls and asynchronous texts with health care providers have become commonplace health care modalities for everything from skin rashes to more serious conditions. . . [E]arly diagnosis and preventive care for conditions such as heart disease, diabetes, and even pancreatic cancer will be done in the home during daily activities instead of in hospitals only after patients experience symptoms. . .</p> <p>Care after hospital discharge is also now increasingly handled through digital devices. Remote continuous monitoring technology is used to observe breathing and heart rates, blood sugar, and other indicators, identifying early warning signs of relapse for stroke, heart failure, and other serious conditions. . .</p> <p>The most impressive element of the hospital of the future does not involve hospitals at all. Johns Hopkins, Mount Sinai, and other health care organizations will furnish an individual or family with the equipment needed to administer hospital-level care in the home. In this hospital-at-home model, doctors and nurses treat patients through a combination of telemedicine, digital diagnostics, and in-person visits by medics or registered nurses to administer medicine or draw blood, for example. . .</p> <p>Going forward, nonemergency services will be pushed horizontally to outpatient clinics, patients’ homes, and remote devices. This is reminiscent of what happened to financial services, which migrated from bank tellers to drive-thru windows to far-flung ATMs and then to mobile apps on the smartphones so many people carry that now take care of almost any financial transaction.</p> <p><a href="https://tinyurl.com/HospitalOfTheFuture">https://tinyurl.com/HospitalOfTheFuture</a></p> <p><b>29. *New York Times</b> January 26, 2022 <i>Even Low Levels of Soot Can Be Deadly to Older People, Research Finds</i> The four-year air pollution study, which followed 68.5 million older Americans, was the first of its kind.</p> <p>Older Americans who regularly breathe even low levels of pollution from smokestacks, automobile exhaust, wildfires and other sources face a greater chance of dying early, according to a <a href="#">major study</a> released Wednesday. . .</p> <p>Researchers concluded that 143,257 deaths could have been prevented between 2006 and 2016 if the standard had been tightened to 10 micrograms per cubic meter.</p> <p><a href="https://tinyurl.com/LowLevelsSoot">https://tinyurl.com/LowLevelsSoot</a></p>
Housing	<p><b>30. Pro Publica</b> February 2, 2022 <i>Reno Seeks to Purchase Motels as Affordable Housing Instead of Letting Developers Demolish Them</i> The mayor of Reno did little to stop the razing of motels that housed low-income residents or to replace lost units. Following a ProPublica investigation, which may change. . .</p> <p>Schieve said the city hasn’t had the financial resources to buy and rehab motels for housing. Federal stimulus money has now made it possible to pursue such acquisitions, she said. “It’s tough to build it. It’s expensive,” she said. “With the ARPA funds, it really gives us a foot in the door.”</p> <p><a href="https://tinyurl.com/REnoPurchasesMotels">https://tinyurl.com/REnoPurchasesMotels</a></p> <p><b>31. *Washington Post</b></p>

	<p>January 30, 2022</p> <p><i>Rents are up 40 percent in some cities, forcing millions to find another place to live</i></p> <p>Rental prices across the country have been rising for months, but lately the increases have been sharper and more widespread, forcing millions of Americans to reassess their living situations. Average rents rose 14 percent last year, to \$1,877 a month, with cities like Austin, New York, and Miami notching increases of as much as 40 percent, according to real estate firm Redfin. And Americans expect rents will continue to rise — by <a href="#">about 10 percent</a> this year — according to a report released this month by the Federal Reserve Bank of New York. At the same time, many local rent freezes and eviction moratoriums have already expired. . .</p> <p>Higher rent prices are also expected to be a key driver of inflation in coming months. Housing costs make up a third of the U.S. consumer price index, which is calculated based on the going rate of home rentals. But economists say there is a lag of 9 to 12 months before rising rents show up in inflation measures. As a result, even if inflation were to subside for all other components of the consumer price index, rising rents alone could keep inflation levels elevated through the year, said Frank Nothaft, chief economist at real estate data firm CoreLogic. . .</p> <p>The pandemic has exacerbated inequalities in many parts of life, and housing is no different. Homeowners benefited from rock-bottom interest rates and surging home prices, while renters have faced surging costs with little reprieve. And unlike markups in other categories — such as food or gas, where prices can waver in both directions — economists say annual leases and long-term mortgages make it unlikely that housing costs will come back down quickly once they rise.</p> <p><a href="https://tinyurl.com/RentsUp40Percent">https://tinyurl.com/RentsUp40Percent</a></p> <p><b>32. Wall Steet Journal</b></p> <p>January 4, 2022</p> <p><i>Underused Office Buildings Get New Life as Deluxe Apartments</i></p> <p>Overhaul of 1980s office complex in Virginia raises prospect that America’s office-building surplus could be ripe for apartment conversion.</p> <p>Nationwide, there are nearly 1,000 relatively new office buildings that developers might view as candidates for residential conversion: properties built since 1980, measuring more than 100,000 square feet and at least 50% vacant, according to data from <a href="#">CoStar Group</a>.</p> <p><a href="https://tinyurl.com/UnderutilizedOfficeBuildings">https://tinyurl.com/UnderutilizedOfficeBuildings</a></p>
Behavioral Health	<p><b>33. Frontiers in Public Health</b></p> <p>December 10, 2021</p> <p><i>Correlates of Social Isolation Among Community-Dwelling Older Adults During the COVID-19 Pandemic</i></p> <p>This study assessed the correlates of social isolation among community-dwelling older adults and explored unique differences for African American and Hispanic older adults, providing a rare glimpse into COVID-19 impacts among populations typically seen as more under-resourced. . .</p> <p>In the wake of the COVID-19 pandemic, social distancing and self-isolation measures were implemented in efforts to reduce the transmission of the disease. African American and Hispanic seniors who reported adhering to these guidelines were more likely to report feelings of social isolation. While these strategies are necessary, they pose potential threats to the physical and mental health of those following such precautions, particularly because these minority populations rely more on family and community support. Many older adults, particularly within the African American and Latinx communities, tend to have less knowledge about</p>

	<p>navigating newer technologies that provide information on how to manage social distancing and serve as an outlet to stay connected with friends and family when people are unable to meet in person (21). Minority populations are also more reliant on smaller social networks that are associated with places where they congregate, such as religious organizations, for psychological and social support, and when these avenues are taken away, it is more difficult for them to avoid isolation (21). Because African Americans and Hispanic Americans were disproportionately affected by COVID deaths, the loss of social network and the experience of grief could further exacerbate isolation in this vulnerable population (21). Individuals within the Latinx community who also have low English proficiency may have less access to linguistically relevant information about COVID-19, self-isolation, and keeping their loved ones safe (22).</p> <p>For those with caregiving needs, such as bathing, preparing meals, managing their finances, and other day-to-day activities, our findings reveal a strong positive association with COVID-induced social isolation, across all racial/ethnic subgroups. This aligns with the notion that adults who are functionally dependent on family members or other forms of community support are at a higher risk for isolation because they rely on these social and community connections. Minority older adults who had extended-family caregivers and lived in a multi-generational home still experienced high levels of loneliness if they did not feel that they were contributing to their surrounding community (23). Unfortunately, it appears that COVID-19 continues to negatively impact those who are most vulnerable physically, and this pattern remains strong across racial/ethnic population sub-groups. Strategies to mitigate the impact of social isolation need to focus on these vulnerable adults.</p> <p><a href="https://tinyurl.com/SocialIsolationCommunityElders">https://tinyurl.com/SocialIsolationCommunityElders</a></p> <p><b>34. Journal of Advanced Nursing</b> September 21, 2021 <i>Psychological impacts and online interventions of social isolation amongst older adults during COVID-19 pandemic: A scoping review</i> <b>Conclusion:</b> The COVID-19 pandemic has taken an emotional toll on older adults' psychological wellbeing and has highlighted the untapped strengths of older adults facing isolation. Online interventions, which could be a new normal in the COVID era, were beneficial in combating social isolation. Strategies by various stakeholders were recommended to tackle the barriers of online interventions. <b>Impact:</b> With the COVID-19 pandemic still in progress, this review provides insights on the psychological impacts of social isolation amongst older adults. Nurses in the community and long-term care facilities could adopt strategies and online intervention to better support the older adults, contribute to a stronger COVID-19 response and support system, and an overall better road to recovery from this crisis.</p> <p><a href="https://tinyurl.com/OnlineInterventionIsolation">https://tinyurl.com/OnlineInterventionIsolation</a></p>
Workforce / Caregiving	<p><b>35. *Washington Post</b> February 1, 2022 <i>4.3 million Americans left their jobs in December as omicron variant disrupted everything</i> The high number of people leaving their jobs came amid immense pressure on workers and parents, many of whom had to juggle multiple responsibilities as case numbers surged at the end of 2021. Another wrinkle has been the more than 2 million people who have left the labor</p>

	<p>force entirely, dropping out to care for family members or children with schools and day cares in disarray, or prompted into early retirements. Economists hope that conditions align to prompt some of those people back to the labor force and increase the country’s participation rate, but it is extremely unlikely that happened during the latest surge.  <a href="https://tinyurl.com/AmericansLeftWork">https://tinyurl.com/AmericansLeftWork</a></p> <p><b>36. American Hospital Association</b>  January 25, 2022  <i>Workforce Issues Remain at the Forefront of Pandemic-related Challenges for Hospitals</i></p> <ul style="list-style-type: none"> <li>• As demand for hospital care remains high and patient acuity for both COVID-19 and non-COVID-19 care has increased, hospitals are facing a critical shortage of workers necessary to meet that demand.</li> <li>• To help mitigate critical staffing challenges, hospitals have been forced to make more extensive use of expensive contract labor firms for a variety of health care staff to ensure patient care and overall hospital operations are not compromised.</li> <li>• Rising hospital labor costs have had broad impacts on overall hospital finances, further lowering operating margins and pushing many hospitals closer to their financial brink.</li> </ul> <p><a href="https://tinyurl.com/WorkforceIssuesForefront">https://tinyurl.com/WorkforceIssuesForefront</a></p> <p><b>37. *New York Times</b>  January 23, 2022  <i>A Shrinking Band of Southern Nurses, Neck-Deep in Another Covid Wave</i>  The exodus of medical workers during the pandemic has been especially brutal for the small, nonprofit safety-net hospitals where millions of Americans seek care. Even as new cases <a href="#">peak and begin to decline in the Northeast and Upper Midwest</a>, the nation’s hospitals are still confronting a crushing influx of patients. . . Even as new cases <a href="#">peak and begin to decline in the Northeast and Upper Midwest</a>, the nation’s hospitals are still confronting a crushing influx of patients.  <a href="https://tinyurl.com/ShrinkingBandOfNurses">https://tinyurl.com/ShrinkingBandOfNurses</a></p> <p><b>38. Morbidity and Mortality Weekly Report</b>  January 14, 2022  <i>Percentage of Adults Aged ≥18 Years Who Received Care at Home from a Friend or Family Member in the Past 12 Months, by Sex and Age Group — National Health Interview Survey, United States, July–December 2020</i>  During July–December 2020, 10.0% of adults aged ≥18 years received care at home from a friend or family member in the past 12 months. Among both men and women, the percentage of adults who received care in the past 12 months increased with age. Women were more likely than men to receive care among those aged ≥18 years (11.5% and 8.5%, respectively), 45–64 years (12.4% and 8.5%, respectively), and ≥65 years (17.7% and 13.2%, respectively).  <a href="https://tinyurl.com/CareAtHomeFreiendFamily">https://tinyurl.com/CareAtHomeFreiendFamily</a></p>
Covid-19	<p><b>39. Library of Congress</b>  February 2, 2022  <i>Library Releases Growing Coronavirus Web Archive Collection</i>  Collection Includes 450 Web Archives Documenting COVID-19 Pandemic.  The collection, which now includes 450 web archives, aims to balance government, science, business, and policy content with human stories that will give future historians a sense of how the COVID-19 pandemic impacted the daily lives of</p>

individuals, families, and communities. . .

The Coronavirus Web Archive team continues to seek good examples of items that represent how Americans and people from across the globe are responding to the pandemic. The collection includes topics such as containment efforts, legal responses, human resource approaches, virtual education methods, unemployment trends, and artistic responses to the global challenge.

Library subject specialists are currently collecting content on vaccine rollouts, testing, virus variants, face mask guidance and developing subjects, such as guidance for students and teachers returning to the classroom. New content will continue to be released monthly, following a one-year embargo, as a part of this ongoing collection.

<https://tinyurl.com/LOCCovidCollection>

**40. \*New York Times**

February 2, 2022

*Covid is killing people in the U.S. at far higher rates than those in other wealthy nations.*

Two years into the pandemic, the coronavirus is killing Americans at far higher rates than people in other wealthy nations, a sobering distinction to bear as the country charts a course through the next stages of the pandemic.

The ballooning death toll has defied the hopes of many Americans that the less severe Omicron variant would spare the United States the pain of past waves. Deaths have now surpassed the worst days of the autumn surge of the Delta variant and are more than two-thirds as high as the record tolls of last winter, when vaccines were largely unavailable.

The only large European countries to exceed America's Covid death rates this winter have been Russia, Ukraine, Poland, Greece and the Czech Republic, poorer nations where the best Covid treatments are relatively scarce.

<https://tinyurl.com/CovidKillingUSHigherRates>

**41. \*New York Times**

February 2, 2022

*A study finds that vaccines provide robust protection against Omicron.*

The Omicron variant of the coronavirus may be more infectious than its predecessors, but a [report](#) published Tuesday by the Centers for Disease Control and Prevention confirms what researchers in other countries have found: vaccines provide solid protection against severe disease, hospitalization and death, and [boosters](#) greatly multiply those benefits. . .

Although [cases](#) have been declining across much of the country, an average of about 140,000 Americans remain [hospitalized](#) with Covid-19 — slightly above the pre-Omicron peak — and an average of about 2,500 people are dying each day, the vast majority of them [unvaccinated](#).

<https://tinyurl.com/RobustVaccines>

**42. \*New York Times**

February 2, 2022

*Coronavirus Briefing*

**A higher death rate**

In the initial stages of the Omicron surge, American health officials looked at how other countries were withstanding the worst effects of the new variant and were reassured. But as the Omicron wave begins to subside, we're getting a fuller picture of how the U.S. fared during the latest surge — [and the data is sobering](#).

Compared with other wealthy countries, the coronavirus in the U.S. is killing people at much higher rates. Since Dec. 1, when the first Omicron case was detected in the U.S., the share of Americans who have been killed by the coronavirus has been at least 63 percent higher than in any other large, wealthy nation, according to a Times analysis of mortality figures. . .

Hospital admissions in the U.S. also swelled to much higher rates than in Western Europe, leaving some states struggling to provide care. Americans are now dying from Covid at nearly double the daily rate of Britons and four times the rate of Germans.

<https://tinyurl.com/CoronavirusBriefingFeb22022>

**43. STAT News**

January 31, 2022

*Moderna wins full approval for its Covid-19 vaccine, as Novavax seeks authorization for its version*

The approval of Moderna's vaccine, Spikevax, makes it the country's second fully licensed vaccine to protect against SARS-CoV-2. It's also the first product the Cambridge, Mass., biotech has brought through licensure in the United States. The Pfizer and BioNTech vaccine, Comirnaty, became the first to be fully approved [in August](#). . . The Novavax vaccine is given in two doses spaced 21 days apart; the company recently announced plans to test a booster shot. The vaccine can be stored at fridge temperature and does not have the elaborate cold-chain requirements of the mRNA vaccines. It includes an adjuvant, a compound that boosts the impact of the vaccine.

<https://tinyurl.com/ModernaWinsFullApproval>

**44. \*New York Times**

January 29, 2022

*When Omicron Isn't So Mild*

For those with underlying medical conditions, the latest pandemic wave has still posed a threat. . .

Throughout the pandemic people . . . have been at higher risk for serious illness from Covid because they have underlying medical conditions, like asthma, diabetes, heart, or lung disease. More than half of American adults have at least one [underlying chronic condition](#), and for many of them, the Omicron wave hasn't been as mild as it has for the larger, healthier populations around the world. . .

The majority of those hospitalized with severe illness during the Omicron surge are unvaccinated, public health experts say. But some who were vaccinated and have underlying conditions have also been at risk for more serious illness caused by the virus, and for the infection potentially worsening their existing diseases, increasing their chances of hospitalization. . .

In some cases, these patients may have had a "smoldering" case of diabetes or hypertension that a Covid case pushed over into serious illness. . . In other cases, individuals who had successfully been managing their conditions before becoming infected. . . are coming in with high blood sugar levels or worrying hypertension. Others, like transplant or cancer patients — although fully vaccinated — are not able to mount a sufficient immune response to protect themselves from serious disease when they become infected.

Doctors say these admissions — often categorized as "with" Covid rather than "for" Covid — have had significant effects on stressed hospitals.

<https://tinyurl.com/WhenOmicomIsntMild>

**45. \*Boston Globe**



January 28, 2021

*Still cautious, many older residents trim back their lifestyles in the time of COVID*

The view from home: 'This virus is nothing to play around with.'

Many older Massachusetts residents continue to lead tentative and isolated lives as the pandemic drags on, even as younger folks return to work or school, checking apprehensions at the door. . . The risks are clear. Americans over 75 have suffered the greatest toll from the virus, with 444,819 deaths as of Jan. 26, followed by those ages 55 to 74, mostly baby boomers, with 324,485 deaths. Together those groups account for more than 89 percent of COVID-19 fatalities, according to the Centers for Disease Control and Prevention. . . The risks are clear. Americans over 75 have suffered the greatest toll from the virus, with 444,819 deaths as of Jan. 26, followed by those ages 55 to 74, mostly baby boomers, with 324,485 deaths. Together those groups account for more than 89 percent of COVID-19 fatalities, according to the Centers for Disease Control and Prevention. . . Within the older population, a substantial subset of people has resigned themselves to a lifestyle fundamentally different from the one they'd known until early in 2020. It's a lifestyle governed by anxieties and precautions, FaceTiming with relatives, cooking at home, and binging on Netflix. Some have become intimately familiar with CDC guidance and Massachusetts case numbers, tracking surges, variants, and wastewater test levels.

<https://tinyurl.com/OlderAdultsTrimBack>

**46. NPR Shots**

January 24, 2022

*Seniors are at high risk of COVID, but Medicare doesn't pay for rapid tests*

As of Jan. 15, [private insurers will cover the cost](#) of eight at-home rapid COVID tests each month for their members — for as long as the public health emergency lasts. Finding the tests will be hard enough, but Medicare beneficiaries face an even bigger hurdle: The administration's [new rule doesn't apply to them](#).

It turns out that the laws governing traditional Medicare don't provide for coverage of self-administered diagnostic tests, which is precisely what the rapid antigen tests are and why they are an important tool for containing the pandemic

<https://tinyurl.com/MedicareDoesntPay>

**47. Mortality and Morbidity Weekly Report**

January 21, 2022

*Racial and Ethnic Disparities in Receipt of Medications for Treatment of COVID-19 — United States, March 2020–August 2021*

Analysis of data from 41 health care systems participating in the PCORnet, the National Patient-Centered Clinical Research Network found lower use of monoclonal antibody treatment among Black, Asian, and Other race and Hispanic patients with positive SARS-CoV-2 test results, relative to White and non-Hispanic patients. Racial and ethnic differences were smaller for inpatient administration of remdesivir and dexamethasone.

**What are the implications for public health practice?**

Equitable receipt of COVID-19 treatments by race and ethnicity along with vaccines and other prevention practices are essential to reduce inequities in severe COVID-19–associated illness and death.

<https://tinyurl.com/RacialEthnicDisparitiesCovid>

**48. Centers for Disease Control and Prevention**

*CDC Updates Consumer Mask Webpage*

The Centers for Disease Control and Prevention (CDC) has [updated](#) its webpage

	<p>describing the types of masks and respirators used to prevent transmission of COVID-19 to help people determine which options are best for them. The updated page lays out the protection provided by available masks and respirators, noting that some types of masks and respirators provide better protection than others. <a href="https://tinyurl.com/MaskWebpageUpdate">https://tinyurl.com/MaskWebpageUpdate</a></p>
Disability	<p><b>49. Next Avenue</b>  January 28, 2022  <i>Raising and Supporting Grandchildren with Disabilities</i>  About 2.7 million children in the United States are being raised by grandparents, other relatives, and close family friends with no parents in the home. . . . Despite the benefits, grandparents lack an automatic legal relationship to their grandchild and without that, they may not be able to access certain services that might help them provide for that child.  When these children have disabilities, accessing resources is even more critical. . . . "Grandparents can take two roles when it comes to helping a grandchild with a disability. If they retain their traditional role, they act as a concrete support in time of need to the parent and a vital source of support for the family. If they take on the role of raising a child with a disability and become a kinship placement, then they take on a much larger role and must learn to navigate different systems of care, to cope with the stress of raising that child, and learn how to cope with problem behaviors."  <a href="https://tinyurl.com/RaisingDisabledGrandchildren">https://tinyurl.com/RaisingDisabledGrandchildren</a></p> <p><b>50. *New York Times</b>  January 27, 2022  <i>What Does a Forehand Winner Sound Like? Clink, Blip-Blip-Blip!</i>  At the Australian Open tennis tournament, new technology is translating the movement of the ball into sounds to help blind and low-vision fans follow the action. Rapid, echoing pops go off in Michael Marshall’s ears when he listens to an Australian Open tennis match, followed closely by high- and low-pitched clinks. Three pops on the left signal that the ball landed close to the line; a low-pitched clink means that the player returned it with a backhand stroke.  Without context, these noises might sound like arcade sound effects or some new version of Morse code — but each one is a message meant to help people who are blind or have limited vision follow the game. A new technology, called Action Audio, is being tested on a large scale for the first time at this year’s Australian Open, where every match in the Rod Laver Arena is <a href="#">available on a livestream</a> with this accessibility feature.  <a href="https://tinyurl.com/ForehandWinner">https://tinyurl.com/ForehandWinner</a></p>
Longevity	<p><b>51. The Hill</b>  January 26, 2022  <i>New research suggests just 10 minutes of daily exercise could extend life</i>  New research suggests just 10 minutes of daily exercise for those above the age of 40 could extend life expectancy.  In a <a href="#">study published by</a> the JAMA Internal Medicine journal on Monday, researchers found 10 minutes of exercise a day could have saved the lives of around 110,000 people aged 40 to 85 per year.  An increase to 20 or 30 minutes of exercise a day could save even more lives.  <a href="https://tinyurl.com/TenMinutesDailyExercise">https://tinyurl.com/TenMinutesDailyExercise</a></p> <p><b>52. JAMA Network</b>  January 24, 2022</p>

	<p><i>Estimated Number of Deaths Prevented Through Increased Physical Activity Among US Adults</i></p> <p>in this cohort study, we estimated that approximately 110 000 deaths per year could be prevented if US adults aged 40 to 85 years or older increased their MVPA by a small amount (i.e., 10 minutes per day). Similar benefits were observed for men and women and for Mexican American, non-Hispanic Black, and non-Hispanic White adults. To our knowledge, this is the first study to estimate the number of preventable deaths through physical activity using accelerometer-based measurements among US adults while recognizing that increasing activity may not be possible for everyone. However, 1 week of monitoring may not reflect changes in activity over time, and the observational study design limits the direct determination of causality.</p> <p><a href="https://tinyurl.com/IncreasedPhysicalActivity">https://tinyurl.com/IncreasedPhysicalActivity</a></p>
End of Life	<p><b>53. *New York Times</b> January 22, 2022 <i>Tough Decisions About End-of-Life Care</i> Readers offer personal stories in response to a doctor’s guest essay about advance directives.</p> <p><a href="https://tinyurl.com/ToughDecisionEndOfLife">https://tinyurl.com/ToughDecisionEndOfLife</a></p>
State Budget	<p><b>54. Commonwealth of Massachusetts</b> <i>Governor’s Proposed Budget for FY 2023</i> January 26, 2022</p> <p>The annual budget process begins each year when the Governor files recommendations as a bill with the House of Representatives. Under the state Constitution, the Governor must submit a proposal by the 4th Wednesday of January or, in the event of a new term, within five weeks later. This bill is called House 1 or "House 2" depending on the year.</p> <p><a href="https://malegislature.gov/Budget">https://malegislature.gov/Budget</a></p>
List of Special Focus Facilities	<p><b>55. Centers for Medicare and Medicaid Services</b> <i>List of Special Focus Facilities and Candidates</i> <a href="https://tinyurl.com/SpecialFocusFacilityProgram">https://tinyurl.com/SpecialFocusFacilityProgram</a></p> <p>CMS has published a new list of <a href="#">Special Focus Facilities</a> (SFF). SFFs are nursing homes with serious quality issues based on a calculation of deficiencies cited during inspections and the scope and severity level of those citations. CMS publicly discloses the names of the facilities chosen to participate in this program and candidate nursing homes.</p> <p>To be considered for the SFF program, a facility must have a history (at least 3 years) of serious quality issues. These nursing facilities generally have more deficiencies than the average facility, and more serious problems such as harm or injury to residents. Special Focus Facilities have more frequent surveys and are subject to progressive enforcement until it either graduates from the program or is terminated from Medicare and/or Medicaid.</p> <p>This is important information for consumers – particularly as they consider a nursing home.</p> <p><b>What can advocates do with this information?</b></p> <ul style="list-style-type: none"> <li>• Include the list of facilities in your area/state when providing information to consumers who are looking for a nursing home. Include an explanation of the SFF program and the candidate list.</li> <li>• Post the list on your program’s/organization’s website (along with the explanation noted above).</li> </ul>

	<ul style="list-style-type: none"> <li>• Encourage current residents and families to check the list to see if their facility is included.</li> <li>• Urge residents and families in a candidate facility to ask the administrator what is being done to improve care.</li> <li>• Suggest that resident and family councils invite the administrator to a council meeting to talk about what the facility is doing to improve care, ask for ongoing updates, and share any council concerns.</li> <li>• For long-term care ombudsmen representatives: Meet with the administrator to discuss what the facility is doing to address problems and share any resources that might be helpful.</li> </ul> <p><b>Massachusetts facilities listed</b></p> <p>Newly added to the listing</p> <ul style="list-style-type: none"> <li>• Marlborough Hills Rehabilitation and Health Care Center, Marlborough <a href="https://tinyurl.com/MarlboroughHills">https://tinyurl.com/MarlboroughHills</a></li> </ul> <p><b>Massachusetts facilities not improved</b></p> <ul style="list-style-type: none"> <li>• Attleboro Healthcare, Attleboro <a href="https://tinyurl.com/AttleboroHealthcare">https://tinyurl.com/AttleboroHealthcare</a></li> </ul> <p><b>Massachusetts facilities which showed improvement</b></p> <ul style="list-style-type: none"> <li>• None</li> </ul> <p><b>Massachusetts facilities which have graduated from the program</b></p> <ul style="list-style-type: none"> <li>• Oxford Rehabilitation and Health Care Center , Haverhill <a href="https://tinyurl.com/OxfordRehab">https://tinyurl.com/OxfordRehab</a></li> </ul> <p><b>Massachusetts facilities that are candidates for listing</b></p> <ul style="list-style-type: none"> <li>• Hillcrest Commons Nursing and Rehabilitation Center, Pittsfield <a href="https://tinyurl.com/HillcrestCommons">https://tinyurl.com/HillcrestCommons</a></li> <li>• Medway Country Manor Skilled Nursing and Rehabilitation <a href="https://tinyurl.com/MedwayManor">https://tinyurl.com/MedwayManor</a></li> <li>• Parkway Health and Rehabilitation Center <a href="https://tinyurl.com/ParkwayHealthCenter">https://tinyurl.com/ParkwayHealthCenter</a></li> <li>• Revolution Charwell <a href="https://tinyurl.com/RevolutionCharwell">https://tinyurl.com/RevolutionCharwell</a></li> <li>• Vero Health and Rehabilitation Center of Amesbury <a href="https://tinyurl.com/VeroAmesbury">https://tinyurl.com/VeroAmesbury</a></li> <li>• Vero Health and Rehabilitation Center of Revere <a href="https://tinyurl.com/VeroRevere">https://tinyurl.com/VeroRevere</a></li> <li>• Vero Health and Rehabilitation Center of Watertown <a href="https://tinyurl.com/VeroWatertown">https://tinyurl.com/VeroWatertown</a></li> <li>• Vero Health and Rehabilitation Center of Worcester <a href="https://tinyurl.com/VeroWorcester">https://tinyurl.com/VeroWorcester</a></li> <li>• Wareham Healthcare <a href="https://tinyurl.com/WarehamHealthcare">https://tinyurl.com/WarehamHealthcare</a></li> <li>• Worcester Rehabilitation and Health Care Center, Worcester <a href="https://tinyurl.com/WorcesterHealthcare">https://tinyurl.com/WorcesterHealthcare</a></li> </ul> <p><a href="https://tinyurl.com/SpecialFocusFacilityProgram">https://tinyurl.com/SpecialFocusFacilityProgram</a></p>
Nursing Home Compare	<p><b>56. Centers for Medicare and Medicaid Services (CMS)</b> <i>Nursing Home Compare Website</i></p> <p>Beginning January 26, 2022, the Centers for Medicare and Medicaid Services (CMS) is posting new information on the <a href="#">Care Compare website</a> that will help consumers have a better understanding of certain staffing information and concerns at facilities.</p>

	<p>This information will be posted for each facility and includes:</p> <ul style="list-style-type: none"> <li>• <b>Staff turnover:</b> The percentage of nursing staff as well as the number of administrators who have stopped working at a nursing home over the past 12-month period.</li> <li>• <b>Weekend staff:</b> The level of weekend staffing for nurses and registered nurses at a nursing home over a three-month period.</li> </ul> <p>Posting of this information was required as part of the Affordable Care Act, which was passed in 2010. In many facilities, staffing is lower on weekends, often meaning residents have to wait longer or may not receive all the care they need. High turnover means that staff are less likely to know the residents, recognize changes in condition, or implement preferred methods of providing care. All of this contributes to the quality-of-care residents receive and their quality of life.</p> <p><a href="https://tinyurl.com/NursingHomeCompareWebsite">https://tinyurl.com/NursingHomeCompareWebsite</a></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: <a href="https://tinyurl.com/DignityLegislativeEndorsements">https://tinyurl.com/DignityLegislativeEndorsements</a></p> <p>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>.</p>
Websites	<p><b>Care 4 the Caregivers</b>  <a href="https://care4thecaregivers.org/">https://care4thecaregivers.org/</a></p> <p>Care 4 the Caregivers aims to reduce caregiver burnout and build the resiliency of caregivers of children with disabilities by providing them with easy to access tools that focus on mindfulness, education, and community.</p> <p>Care 4 the Caregivers offers an informational space, an empowering environment and programs and services that help families strengthen and thrive.</p> <p><b>Centers for Medicare &amp; Medicaid Services (CMS)</b>  <i>No Surprises Act</i>  <a href="https://www.cms.gov/nosurprises">https://www.cms.gov/nosurprises</a></p> <p>See how new rules help protect people from surprise medical bills and remove consumers from payment disputes between a provider or health care facility and their health plan.</p> <p><b>Library of Congress Coronavirus Web Archive</b>  <a href="https://www.loc.gov/collections/coronavirus-web-archive/about-this-collection">https://www.loc.gov/collections/coronavirus-web-archive/about-this-collection</a></p> <p>A joint website from the White House, Department of Health and Human Services (HHS), and the Centers for Disease Control and Prevention (CDC) to provide updated information regarding the Coronavirus pandemic, or COVID-19, to the American public.</p>
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	<p><b>Stonehedge Rehabilitation and Skilled Care Center</b>  5 Redlands Road  West Roxbury, MA, 02132</p> <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> </ul>

	<ul style="list-style-type: none"> <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> <p>Closure Notices and Relocation Plans available at:  <a href="https://tinyurl.com/MANursingHomeClosures">https://tinyurl.com/MANursingHomeClosures</a></p>																														
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>
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<b><i>The Dignity Digest</i></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 MailChimp Specialist: Sue Rorke																															
<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>• Judi Fonsh</li> <li>• Anna Krieger</li> <li>• Dick Moore</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 <u>The Dignity Digest</u> 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. 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>																															



*For more information about Dignity Alliance Massachusetts, please visit [www.DignityAllianceMA.org](http://www.DignityAllianceMA.org).*