



The Dignity Digest

Issue # 80

March 11, 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

The pandemic delivered a grim reminder of chronic, ongoing issues in nursing homes and other elder care facilities. Clear and transparent data on COVID-19 deaths and cases — both generally and in nursing homes and assisted living facilities — is critical for families deciding where to place loved ones and for hospital discharge planners making decisions on patient placements.

Massachusetts seniors and their families deserve better.

Barbara Anthony, senior healthcare fellow, and Mary Z. Connaughton, director of government transparency, Pioneer Institute, a Boston-based think tank, *COVID-19: How the Baker administration ill serves those in elder care*, **WGBH**, February 11, 2022, *COVID-19: How the Baker administration ill serves those in elder care*, <https://tinyurl.com/illServedElderCare>

“When that doctor is telling you, for your convenience, you can just draw your blood down the hall, you’re just thinking this is part of your in-network visit. You don’t realize you probably should be asking before you head down the hall.”

Patricia Kelmar, a health care director at consumer group U.S. PIRG, *A glaring gap in Congress’ surprise billing law leaves patients on the hook for pricey, out-of-network lab tests*, ***STAT+**, March 8, 2022, <https://tinyurl.com/GapSurpriseBillingLaw>

“I was fired because of a part of my identity. It’s a part of me that’s really important and valuable. It has made me a better person and a better professional and they are saying that part of me — that part of my identity — is worthless by firing me.”

Katherine Lockwood, a Bourne school counselor who is disabled and pregnant, *A pregnant counselor with medical conditions asked to work*

remotely. Then the Bourne superintendent fired her, ***Boston Globe**, March 7, 2022 (updated), <https://tinyurl.com/PregnantCounselor>

“What difference does it make to me [to leave Odessa]? Although, I guess I would like to feel sunlight. I’m just waiting for my days to end.”

Anna Churilyana, blind 90-year-old resident of Odessa, Ukraine, *To evacuate or not? In Odessa, some older residents cannot flee war.*

Washington Post, March 8, 2022,

<https://tinyurl.com/OlderResidentsCannotFlee>

“We are seeing a mini epidemic of chronic fatigue syndrome.”

Benjamin Natelson, a neurologist at Mount Sinai Hospital in New York who specializes in such post-viral disorders, *Covid long-haulers face grueling fights for disability benefits*, ***Washington Post**, March 8, 2022,

<https://tinyurl.com/LongHaulersGruelingFights>

Better long Covid data could inform disability policy, public health guidance, medical research funding prioritization, and more.

Is ‘long Covid’ worsening the labor shortage?. **Brookings**, January 11, 2022,

<https://tinyurl.com/LongCovidWorseningLabor>

For some patients, recovery from acute SARS-CoV-2 infection may involve continuing, recurrent, or new symptoms and clinical findings that persist for weeks, months, or longer. . . Post-COVID conditions are associated with a spectrum of physical, social, and psychological consequences, as well as functional limitations that can present substantial challenges to patient wellness and quality of life.

Evaluating and Caring for Patients with Post-COVID Conditions: Interim Guidance, **Centers for Disease Control and Prevention**, June 14, 2021,

<https://tinyurl.com/CDCPostCovidConditions>

“There does come a point where significantly old buildings just reach the end of their life expectancy, and there’s a time to do something different, and it’s even

more true in a health care building that was designed to do something other than what it's currently doing."

Ryan Lilly, director of the Bedford-based [VA New England Healthcare System](#) network, *Veterans Affairs to recommend closing Northampton VA medical center after nationwide review of aging assets*, *MassLive.com, March 10, 2022, <https://tinyurl.com/ClosingNorthamptonVACenter>

"Veterans will always be at the center of what we do. The [Asset and Infrastructure Review (AIR)] Commission is an opportunity to redesign VA health care to maximize access and outcomes for current and future generations of veterans."

Sarah Robinson, a spokesperson for the VA Central Western Massachusetts Healthcare System in Northampton, *Veterans Affairs to recommend closing Northampton VA medical center after nationwide review of aging assets*, *MassLive.com, March 10, 2022, <https://tinyurl.com/ClosingNorthamptonVACenter>

"We're hearing from staff over and over about the strain that staffing is placing on them personally and on residents. And we have got to address the quality of care for people who are enrolled in our programs. We want to work with industry, absolutely, to get there, but everything we hear is about what kind of strain the insufficient staffing is putting on residents and on the workers themselves."

Chiquita Brooks-LaSure, administrator of the U.S. Centers for Medicare & Medicaid Services, *Biden Pledges Better Nursing Home Care, but He Likely Won't Fast-Track It*, March 3, 2022, <https://tinyurl.com/BidenPledgesBetterNHCare>

"Nursing homes getting literally three lines in the State of the Union is profound. Let us stop and realize that the White House has recognized improving quality in nursing homes as a priority."

Dr. Michael Wasserman, a geriatrician in California, *Biden Pledges Better Nursing Home Care, but He Likely Won't Fast-Track It*, March 3, 2022, <https://tinyurl.com/BidenPledgesBetterNHCare>

“Needed care can’t wait.”

Connie Garner, national public policy adviser for [Easterseals](#), *Desperate for Cash: Programs for People With Disabilities Still Not Seeing Federal Funds* **Kaiser Health News**, March 2, 2022, <https://tinyurl.com/DeseperateForCash>

“If we really want to transform how care is provided, we must — not should, could — have ongoing federal investments to support that change.”

[Bonnie Silva](#), director for the Office of Community Living at the Colorado Department of Health Care Policy & Financing, *Desperate for Cash: Programs for People with Disabilities Still Not Seeing Federal Funds* **Kaiser Health News**, March 2, 2022, <https://tinyurl.com/DeseperateForCash>

“We would not be surprised to see that number [of staffers] be higher in a new study because we know the care needs for residents and acuity levels have actually increased over the last 20 years.”

[Lori Smetanka](#), executive director of the National Consumer Voice for Quality Long-Term Care, *Biden’s Promise of Better Nursing Home Care Will Require Many More Workers*, **Kaiser Health News**, March 2, 2022, <https://tinyurl.com/BidenPromiseBetterCare>

“When you’re blind, people protect you. I missed being reckless. I missed controlling my fate and what I get to do.”

Justin Bishop, skateboarder who is blind, *A Blind Skateboarder’s Return to the Ramp*, **The New Yorker**, January 19, 2022, <https://tinyurl.com/BlindSkaterboarder>

“I know I don't have that much longer. I accept that reality. But I'm just trying to preserve quality of life so that I can parent and that I can enjoy people as long as possible.”

Kate Hendricks Thomas, 38-year-old Marine veteran diagnosed with breast cancer, *A bill to expand VA care for veterans exposed to toxic burn pits is moving slow*, **NPR**, March 8, 2022, <https://tinyurl.com/ExpandCareBurnPits>

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| | <p><i>“Too often, nurses are stretched too thin, caring for too many patients with not enough support. We can prevent that by ensuring nurses are adequately staffed, and protecting their ability to go to hospital management, without fearing potential retaliation.”</i></p> <p>Sen. Sherrod Brown (D-Ohio), <i>Nurses, more powerful and visible after Covid, capitalize on new clout in Washington</i>, STAT News, March 9, 2022, https://tinyurl.com/NursesClout</p> |
| <p>Dignity Alliance Massachusetts in the News</p> | <ol style="list-style-type: none"> 1. Greenfield Recorder March 9, 2022 <i>My Turn: Nursing home reforms critical</i> Op-ed by Arlene Germain, Chair, DignityMA Facilities Workgroup https://tinyurl.com/GreenfieldRecorderMarch92022 2. Salem News and Gloucester Times March 9, 2022 <i>White House proposes hope for nursing home residents</i> Op-ed by Paul Lanzikos, Coordinator, DignityMA https://tinyurl.com/HopeForNursingHomeResidents |
| <p>Dignity Alliance Massachusetts Legislative Endorsement</p> | <ol style="list-style-type: none"> 3. S2695 – An Act relative to pharmaceutical access, costs, and transparency Filed by Senator Friedman, originally as S771. Summary The bill seeks to bring oversight to pharmacy benefit managers (PBMs), who play a major role in how drugs are tiered and priced on insurance plans. PBMs, who serve as brokers or ‘middle-men’ in the drug transaction process, are not currently subjected to rigorous oversight by the state, making it unclear if PBMs act in the best interest of consumers or health plans when they negotiate the price of drugs with pharmaceutical manufacturers. The PACT Act 2022 authorizes the Division of Insurance (DOI) to provide much-needed oversight by licensing and regulating PBMs—and establishing sanctions for PBMs that fail to meet certain standards. To make sure patients pay the lowest possible cost at the pharmacy counter, the PACT Act 2022 builds on federal action legislation to ensure that a patient purchasing a prescription drug is not charged a cost-sharing amount, such as a co-pay or deductible, which exceeds the drug’s retail price. The bill also takes significant steps toward ensuring that patients can get their prescription drugs from the pharmacy that they choose. This bill will allow independent pharmacists the opportunity to become licensed to dispense of specialty drugs and contract with insurance plans to provide specialty medications to patients. In addition, this bill provides patients with greater access to mail order prescriptions by allowing any network pharmacy to contract with carriers to provide mail-order prescriptions, changing the current practice where of carriers determine what pharmacies are available to patients for mail order prescriptions. https://tinyurl.com/DignityMAEndorsement2695 |

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| | <p>To help control costs further, the PACT Act 2022 requires pharmaceutical companies to notify the state in advance of new drugs coming to market, and of significant price increases for existing drugs. With advanced notification, the state’s MassHealth program can better prepare for potential cost increases by exploring ways to mitigate the cost or negotiating improved prices. In addition, advance notification will enable the HPC to focus on these cost drivers at their Cost Trends Hearings, which are held each year to examine the drivers of health care costs, identify challenges and opportunities for improving care and reducing costs in Massachusetts, increase transparency and accountability for health care providers and insurers, and help the state to meet its annual health care cost growth benchmark.</p> <p>In addition, pharmaceutical manufacturing companies and PBMs will be included in the HPC annual Cost Trends Hearings for the first time. By participating in the hearings process, manufacturers and PBMs will be required to provide public testimony on the factors that influence drug costs and provide documentation to back up their claims. The HPC will use this information to analyze how pharmaceutical industry costs impact the state’s health care market—and the ultimate cost of health care for Commonwealth residents.</p> <p>This bill also empowers the Center for Health Information and Analysis (CHIA), an independent state agency that provides objective analysis of the quality, affordability, utilization, and access to the Massachusetts health care system, to collect a range of drug cost information from pharmaceutical manufacturers and PBMs to include in its annual health care cost report, which does not currently include comprehensive data on drug costs. Collecting this data will allow policymakers and consumers to better understand the role of pharmaceutical companies in driving costs moving forward.</p> |
| <p>Inspiration</p> | <p>4. The Hill January 21, 2022 <i>New documentary chronicles blind skateboarder’s return</i> “My love for skateboarding is everything,” said Justin Bishop. Story at a glance</p> <ul style="list-style-type: none"> • Pro-skateboarder Justin Bishop, 35, was 8 years old when he was diagnosed with a rare degenerative eye disease called retinitis pigmentosa and told he would eventually go blind. • Bishop’s skateboarding career and gradual loss of his eyesight is the subject of Leo Pfeifer’s documentary, “One Day You’ll Go Blind,” released through The New Yorker. • Bishop now skateboards competitively again, sponsored by Zappos. <p>https://tinyurl.com/SkateboardersReturn</p> <p>5. The New Yorker January 19, 2022 <i>A Blind Skateboarder’s Return to the Ramp</i> In Leo Pfeifer’s “One Day You’ll Go Blind,” Justin Bishop devises ways to do tricks without seeing and recovers the freedom of recklessness. When he was eight, [Justin] Bishop was diagnosed with a rare degenerative eye disease called retinitis pigmentosa. His doctors told him that he would eventually go blind, though probably not until middle age. But, by twenty, his</p> |

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| | <p>vision had deteriorated so much that he was forced to quit his job at a skate shop and stop driving. Still, he skated every day, squinting at a blurry half-pipe and filling in the gaps in his vision with memory. For five years, he kept at it, in what he calls “a mad dash to max out your talent before you lose your sight,” until one night, in 2011, when he could no longer see his feet. Over the course of the next week, his vision deteriorated so much that all he could see were shadows and blurs. . . A decade after losing his sight, Bishop is skating competitively again.</p> <p>https://tinyurl.com/BlindSkaterboarder</p> |
| <p>Reports</p> | <p>6. Legal Services Corporation (LSC) <i>The Justice Gap</i> The phrase “with liberty and justice for all” in the U.S. Pledge of Allegiance represents the idea that everyone should have access to justice, not just those who can afford legal representation. In criminal cases, legal assistance is a right. Americans accused of a crime are appointed legal counsel if they cannot afford it. As a general matter, however, there is no right to counsel in civil matters. As a result, many low-income Americans “go it alone” without legal representation in disputes where they risk losing their job, their livelihood, their home, or their children, or seek a restraining order against an abuser. This “justice gap” – the difference between the civil legal needs of low-income Americans and the resources available to meet those needs – has stretched into a gulf.¹ State courts across the country are overwhelmed with unrepresented litigants. In 2015, for example, an estimated 1.8 million people appeared in the New York State courts without a lawyer.² And we know that 98% of tenants in eviction cases and 95% of parents in child support cases were unrepresented in these courts in 2013.³ Comparable numbers can be found in courts across the United States. This study explores the extent of the justice gap in 2017, describing the volume of civil legal needs faced by low-income Americans, assessing the extent to which they seek and receive help, and measuring the size of the gap between their civil legal needs and the resources available to address these needs.</p> <p>https://tinyurl.com/JusticeGapReport</p> <p>7. Kaiser Family Foundation March 10, 2022 <i>The burden of medical debt in the United States</i></p> <ul style="list-style-type: none"> • 1 in 10 Adults Owe Medical Debt, With Millions Owing More Than \$10,000. • Black Adults, Those in Poor Health, and People Living with Disabilities are Most Likely to Carry Significant Medical Debt. • Americans Likely Owe Hundreds of Billions of Dollars in Total Medical Debt. • A new KFF analysis of government data estimates that nearly 1 in 10 adults (9%) - or roughly 23 million people - owe medical debt. This includes 11 million who owe more than \$2,000 and 3 million people who owe more than \$10,000. • The analysis is based on data from the 2020 Survey of Income and Program Participation, a nationally representative survey that asks every adult in a household whether they owed money for medical bills in 2019 and how much they owe. It looks at people with medical debt of more than \$250. • The 2020 survey suggests Americans’ collective medical debt totaled at least \$195 billion in 2019, though with quite a bit of uncertainty. A small share of adults account for a huge share of the total, with considerable |

variation from year to year. The estimate is significantly higher than other commonly cited estimates, which generally rely on data from credit reports that may not capture medical debts charged to credit cards or included in other debts rather than being directly owed to a provider.

- Other findings include:
 - People ages 35-49 (11%) and 50-64 (12%) are more likely than other adults to report medical debt. They have greater health needs than younger people on average and aren't yet old enough to qualify for Medicare coverage, which may protect them from high costs.
 - Larger shares of people in poor health (21%) and living with a disability (15%) report medical debt. People in these groups are more likely to need and receive care than people in better health and without disabilities.
 - Among racial and ethnic groups, a larger share of Black adults (16%) report having medical debt compared to White (9%), Hispanic (9%), and Asian American (4%) adults.
 - Adults who were uninsured for more than half of the year are more likely to report medical debt (13%) than those who were insured for all or most of the year (9%).
 - It's not yet clear how the pandemic and resulting recession affected medical debt. Many people lost jobs and income early in the pandemic, which could have led to more difficulty affording medical care. At the same time, many people delayed or went without care, so fewer people may have been exposed to costly medical care. Shifts in insurance coverage and COVID-related cost-sharing waivers could also affect what people had to pay out-of-pocket.

<https://tinyurl.com/BurdenMedicalDebtInUS>

8. Peterson-Kaiser Family Foundation

March 10, 2022

Many households do not have enough money to pay cost-sharing in typical private health plans

Health plans use cost-sharing (deductibles, copayments, and coinsurance) as incentives for enrollees to use services efficiently and to shop for lower cost options when they do need care. Cost-sharing that is too high, however, can discourage enrollees from [getting the care](#) that they need or drive them into [financial distress](#) and even [bankruptcy](#). Enrollees in private health insurance plans may have to pay thousands of dollars to meet plan deductibles, coinsurance, and copayments. Cost-sharing in private health insurance plans has steadily increased over time. For employer-based coverage in 2021, the [average deductibles](#) for single coverage were \$2,379 for covered workers at small firms and \$1,397 for covered workers in larger firms. Similarly, deductibles in non-group Marketplace plans can be [much higher](#) for enrollees not eligible for cost-sharing reductions.

Discussion

By shifting a portion of health cost onto people using services, health plan cost-sharing reduces the expense paid by the insurer, thereby potentially lowering

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| | <p>the premium. More importantly, requiring consumers to contribute encourages them to carefully consider which services they will use, and, depending on how the cost-sharing is structured, may encourage the use of lower-cost care. While cost-sharing may reduce premiums, evidence suggests it also might discourage people from seeking needed and beneficial care.</p> <p>As cost-sharing levels have increased, so has concern about cost-related access barriers among people with private coverage. While low-income people enrolled in Medicaid or the Marketplaces face little or no cost-sharing, employer plans generally do not vary cost-sharing based on income. In 2020, just 7% of firms with 50 or more workers had programs to help lower-wage workers meet cost-sharing obligations.</p> <p>Much of the discussion around affordability of private coverage has centered on premium costs. A broader notion of affordability would focus on the ability of families, particularly low- and middle-income families, to meet potentially high out-of-pocket expenses associated with a chronic or acute illness. In addition to high cost sharing deterring needed health care, it can also create financial instability. In the U.S., nearly 1 in 10 adults owe medical debt. https://tinyurl.com/KFFNotEnoughMoney</p> |
| Ukraine | <p>9. Washington Post March 8, 2022 <i>To evacuate or not? In Odessa, some older residents cannot flee war.</i></p> <p>Across Ukraine, people are on the move seeking safety outside the country or in areas to the west, farther from Russian forces. Scenes at train stations around Ukraine have largely featured women and children tugging suitcases and toting whatever belongings they could bring. Men ages 18 to 60 are mostly prohibited from leaving.</p> <p>And then there are the elderly. Evacuating can be too taxing emotionally and physically for many. For some, like 90-year-old Churilyana, it is so impractical that it is impossible. https://tinyurl.com/OlderResidentsCannotFlee</p> |
| Biden / Federal Policies | <p>10. *STAT+ March 8, 2022 <i>A glaring gap in Congress' surprise billing law leaves patients on the hook for pricey, out-of-network lab tests</i> https://tinyurl.com/GapSurpriseBillingLaw</p> <p>11. Kaiser Health News March 3, 2022 <i>Biden Pledges Better Nursing Home Care, but He Likely Won't Fast-Track It</i></p> <p>President Joe Biden's top Medicare official suggested Wednesday that forthcoming rules to bolster nursing home staffing won't be issued under a mechanism, known as interim final rules, that would allow regulations to take effect more or less immediately.</p> <p>"While we want to move swiftly, we want to get comments from stakeholders," Chiquita Brooks-LaSure, administrator of the U.S. Centers for Medicare & Medicaid Services, said in an interview about the overhaul Biden promised during his State of the Union address. . .</p> <p>Brooks-LaSure suggested the administration's sought-after nursing home changes are not considered urgent even as nursing homes and other long-term</p> |

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| | <p>care facilities register shocking numbers of covid deaths. A KFF analysis estimated that more than 200,000 residents and staff members of long-term care facilities had died from covid as of Jan. 30, amounting to at least 23% of all U.S. deaths.</p> <p>https://tinyurl.com/BidenPledgesBetterNHCare</p> <p>12. Kaiser Health News March 2, 2022 <i>Desperate for Cash: Programs for People with Disabilities Still Not Seeing Federal Funds</i></p> <p>Last year brought an injection of hope: The federal government, through the American Rescue Plan Act that President Joe Biden signed into law in March 2021, increased funding with a 10-percentage point match that could amount to some \$25 billion in federal money for Medicaid home and community-based services, which have long faced staffing crunches. That massive infusion of cash could be used by states to buttress wages, move people off waiting lists for disability services, train more workers, or expand covered services for vulnerable elderly and disabled people, helping to keep them out of nursing homes.</p> <p>But almost a year later, Indiana, Massachusetts, New York, North Carolina, Ohio, and Washington were among 19 states as of Feb. 17 yet to receive the “conditional approval” needed from the Centers for Medicare & Medicaid Services to fully access the money. . .</p> <p>Daniel Tsai, director of the CMS Center for Medicaid and CHIP Services, said that this infusion of federal aid was a “life-changing amount of funding,” and that CMS staffers were doing everything they could alongside states to “move forward as quickly as possible.” . . .</p> <p>A 2021 survey by the American Network of Community Options and Resources, an advocacy group for providers that support those with intellectual and developmental disabilities, found that because of staffing shortages, more than three-quarters of service providers were turning away new referrals, more than half were discontinuing programs and services, and the vast majority were struggling with recruitment and retention of staff.</p> <p>https://tinyurl.com/DesperateForCash</p> |
| <p>Film Festival</p> | <p>13. Vinfen’s Virtual 15th Annual Moving Images Film Festival Saturday, March 26, 2022, 9:00 a.m. to 5:00 p.m. <i>When a Whisper Becomes a Roar: The Power of You</i></p> <p>Each year, Vinfen uses the power of film to raise awareness, foster dialogue, and combat the prejudices and discrimination often faced by people with mental health conditions and disabilities. This is a day of inspiring films and engaging panel discussions. The event is free and open to the public. Registration is required. Fee for continuing education credits for professionals.</p> <p>Films:</p> <ul style="list-style-type: none"> • <i>Wake Up</i> <i>Wake Up</i> weaves the stories of four very different communities affected by suicide – college students, veterans, the LGBT community, and gun owners. Rather than laboring on tragedy and despair, <i>Wake Up</i> focuses on the leaders of the frontlines of prevention, leaving viewers hopeful, informed, |

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| | <p>and encouraged. It also powerfully illustrates how positive change can be achieved when compassion is practiced over prejudice – an important and timely lesson.</p> <ul style="list-style-type: none"> • <i>The Definition of Insanity</i> <i>The Definition of Insanity</i> depicts the story of Judge Steven Leifman’s tireless work decriminalizing treatment of people with serious mental health conditions and a tribute to the good that can be accomplished by one individual on a mission. • <i>Autism: The Sequel</i> In 2006, HBO debuted the Emmy-winning film <i>Autism: The Musical</i>, which followed five children as they wrote and performed their own musical. <i>Autism: The Sequel</i> revisits the stars of this musical 12 years later as the original subjects, now in their early 20’s, navigate what independence means to them as they manage both the challenges and the triumphs as adults living on the autism spectrum. Registration: https://vinfen15.eventive.org/welcome |
| Arc Tank 2022 | <p>14. Northeast Arc Tuesday, April 5, 2022, 2:00 to 5:00 p.m. <i>Arc Tank 2022</i> The past 16+ months have proven to be a huge challenge in providing services and keeping people safe. These challenges have been met with innovative and creative systems. The status quo has changed. Services have changed. Expectations have changed. The use of technology has never been more important as well as the need to ensure human connections. The Northeast Arc is pleased to announce the 2022 Arc Tank! The Arc Tank funds innovative and creative ideas that are changing the way disability services are provided. This year there are awards up to \$200,000 for ideas that will positively disrupt how disability services are provided. Virtual event registration: https://tinyurl.com/NortheastArcTank2022</p> |
| In Person Event | <p>15. Boston University Wheelock College of Education & Human Development Friday, March 18, 2022, 6:00 to 8:00 p.m. George Sherman Student Union, 2nd Floor, 775 Commonwealth Avenue, Boston <i>"Developing Different Kinds of Minds"</i> Talk and book signing by Dr. Temple Grandin. A professor at Colorado State University, Dr. Grandin is a prominent author and speaker on both autism and animal behavior. She is the author of several books, including her recent title, <i>Navigating Autism: 9 Mindsets for Helping Kids on the Spectrum</i>. Registration: https://tinyurl.com/DrTempleGrandinMarch18</p> |
| Webinar and online sessions | <p>16. Long Term Care Community Coalition Tuesday, March 15, 2022, 1:00 to 2:00 p.m. <i>A Matter of Justice: Racism as a Fundamental Cause of LTC Inequities</i> Presenter: Dr. Shekinah Fashaw-Walters, health equity and aging tenure-track Assistant Professor in the Division of Health Policy & Management at the University of Minnesota’s School of Public Health. Registration: https://tinyurl.com/LTCMatterOfJustice</p> <p>17. National Center on Law and Elder Rights Tuesday, March 15, 2022, 2:00 to 3:00 p.m.</p> |

Housing Assistance Fund (HAF): Navigating the Program Guidelines and Implementation Challenges

The newly created Homeowner Assistance Fund (HAF) provides \$9.9B to states, territories, and tribes to help homeowners facing hardship during the COVID-19 pandemic. While each state, territory and tribe is establishing its own HAF program, many of the programs are similar and based on the Treasury Department's guidance. Advocates working with homeowners are facing similar challenges as they seek to help their clients access the HAF programs. This webinar will provide an overview of the program guidance, information about general program rules and issues, the interaction of HAF with other loss mitigation options, and a discussion of common implementation challenges for older homeowners seeking program access and assistance.

Presenters:

- Alys Cohen, Staff Attorney, National Consumer Law Center
- Stacey Tutt, Senior Staff Attorney and Homeownership Assistance Fund Coordinator, National Housing Law Project

Registration: <https://tinyurl.com/HAFMarch15Webinar>

18. Gray Panthers New York City

Tuesday, March 22, 2022, 2:00 p.m.

Greed over Care? Financing Nursing Homes in NYS

The New York legislature has finally enacted long overdue standards to assure safe staffing requirements for nursing homes. But there has been push back from owners as well as delay in implementation by Governor Hochul. This panel of experts will address what needs to happen in New York State and beyond.

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

19. Administration for Community Living, along with federal partners at the Department of Labor, Department of Education, and the Social Security Administration

Tuesday, March 22, 2022, 3:00 to 4:30 p.m.

How Blended, Braided or Sequenced Funding Can Help Drive Employment, Equity, and Inclusion

Demand for workplace talent is high. Remote work opportunities may be with us to stay. These conditions offer new opportunities for expanded access to workforce activities for people with disabilities.

To ensure that workforce programs are ready to meet this demand and can support job seekers and career changers equitably, programs often need to draw on a range of different funding sources. The ability to blend, sequence, or braid funding with other resources becomes an essential ingredient to support employment, equity, and inclusion. Yet, each source of funding usually comes with specific goals, target populations, and performance indicators.

In this federal interagency webinar hosted by the LEAD Center, state practitioners across the workforce system will discuss how they successfully applied innovative, collaborative resource sharing that benefits both businesses and job seekers with disabilities.

[Register for the webinar on March 22 at 3:00 P.M.](#)

20. Long Term Care Community Coalition

Tuesday, March 29, 2022, 1:00 to 2:00 p.m.

What is Nursing Home Culture Change?

Many nursing home residents must adhere to strict schedules and regimens for rising, dressing, eating, bathing, and sleeping. The culture change movement seeks to transform nursing homes to focus on resident choice and create a homelike environment for residents. In this program, Nina Loewenstein (LTCCC legal analyst) presents on:

- The history of culture change
- Culture change models
- Research on resident outcomes in culture change settings
- Policy recommendations

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

21. Elder Justice Initiative – Department of Justice

Tuesday, April 19, 2022 to Thursday, April 21, 2022

The Role of Decision-Making Capacity in Elder Justice Cases that Reach Civil and Criminal Courts

The Symposium will highlight what we know today about the aging brain and its impact on decision-making and discuss the protocols and tools available to assess decision-making capacity. The Symposium will then focus on the myriad of ways that perceptions of an older adult's decision-making capacity can have profound implications on their treatment in criminal and civil proceedings. These may include elder abuse or fraud prosecutions not being pursued; unnecessary or inappropriate guardianships being imposed; and civil legal remedies being denied to older victims of elder abuse, neglect and financial exploitation.

Tuesday, April 19, 2022, 1:00 to 4:50 p.m.

Welcome and Introduction to the Symposium

Advances in Aging Brain Research and Its Relevance for Decision-Making

Presenters:

- Charles P. Sabatino, JD, Consultant, Aging and Law
- Jason Karlawish, MD. Professor of Medicine, Medical Ethics and Health Policy, and Neurology; Co-Director, Penn Memory Center; Director, Outreach, Recruitment, and Retention Core of the Penn Alzheimer's Disease Research Center

To provide a scientific foundation for the Symposium, this session describes how advances in cognitive science (aging brain, dementia, social cognition, and neuroscience) inform our understanding of decision-making capacity in older adults. Multiple health conditions can impair a person's capacity to make decisions. Some of these health conditions cause decisional impairments that are ephemeral, situational, or context specific. Others cause capacity to diminish over time. This is especially true when the condition is progressive cognitive impairments caused by Alzheimer's disease and related diseases. Notably, a diagnosis of cognitive impairment (MCI or dementia) does not determine whether a person lacks decisional capacity. Therefore, an understanding of the aging brain and cognitive impairment specifically, can and should inform a capacity assessment.

The Role of Clinicians in Conducting Forensic Decision-Making Capacity Assessments with Older Adults

Presenters

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| | <ul style="list-style-type: none"> • Eric Drogin, JD, PhD, ABPP, Harvard Medical School, Affiliated Lead of Psycholegal Studies, Psychiatry, Law, and Society Program, Brigham and Women’s Hospital • Daniel Marson, JD, PhD, Professor Emeritus, Department of Neurology, Heersink, School of Medicine, University of Alabama at Birmingham • Laura Mosqueda, MD, FAAFP, AGSF, Professor of Family Medicine and Geriatrics, Keck School of Medicine of the University of Southern California, Director, National Center on Elder Abuse • Facilitator: Lisbeth Nielsen, PhD, Director, Division of Behavioral and Social Research, National Institute on Aging <p>In both civil and criminal cases, a key piece of evidence may be a decisional capacity assessment. Significant advances in both research on the aging brain and tools/methods for assessing capacity have been made in recent years. The current prominence of issues related to protecting autonomy, understanding cultural lenses, and ensuring access to justice for all citizens has resulted in greater awareness of the concept of decisional capacity and greater scrutiny of how decisional capacity is assessed by clinicians. With this increased attention comes opportunities to address concerns and improve current processes utilizing the most current evidence. This panel of clinical experts will discuss: best practices for conducting capacity assessments; information that should be contained in the referral letter to the clinician; guidance for justice system professionals on clinician qualifications and the content of capacity evaluation reports; and guidance to clinicians on assessing capacity and providing expert testimony. Finally, the panelists will discuss how to promote the dignity and independence of older adults to the greatest extent possible when capacity issues arise in court cases.</p> <p>Registration: https://www.justice.gov/elderjustice/symposium</p> |
| Recorded webinars | <p>22. Long Term Care Community Coalition</p> <ul style="list-style-type: none"> • Assisted Living: Identifying Policy to Promote Quality Assurance, Safety, and Quality of Life • Arming Your Advocacy: Leveraging LTCCC’s Resources to Promote Resident-Centered Care • Broken Promises: An Assessment of Federal Data on Nursing Home Oversight • A Guide to Nursing Home Oversight & Enforcement • Enforcing the Nursing Home Reform Act • The Hidden Profits Behind Poor Nursing Home Care |
| Previously posted webinars and online sessions | <p>Previously posted webinars and online sessions can be viewed at: https://dignityalliancema.org/webinars-and-online-sessions/</p> |
| Nursing Homes | <p>23. Kaiser Health News <i>“Neglect Unchecked” series</i> Previous coverage of issues about nursing home quality by Kaiser Health News:</p> <ul style="list-style-type: none"> • Care Suffers as More Nursing Homes Feed Money into Corporate Webs • ‘Like A Ghost Town’: Erratic Nursing Home Staffing Revealed Through New Records • Medicare Takes Aim at Boomerang Hospitalizations of Nursing Home Patients • Infection Lapses Rampant in Nursing Homes but Punishment Is Rare |

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| | <ul style="list-style-type: none"> • Half The Time, Nursing Homes Scrutinized on Safety by Medicare Are Still Treacherous |
| Housing | <p>24. Today March 8, 2022 <i>Woman starts tiny home company to help fight homelessness</i> With hundreds of thousands of people experiencing homelessness in America, Amy King started a company called Pallet to combat the issue and give people a second chance. https://tinyurl.com/SmallHomeCompany</p> <p>25. *New York Times <i>The Housing Situation Is Dire. But Progress Is Still Possible.</i> In the South Bronx, developers found ways to build an array of sleek, affordable apartments in two subsidized housing developments. Is this a way forward? Good news is hard to come by on the housing front. The eviction moratorium has expired. Experts now predict skyrocketing home prices may rise indefinitely. According to a Pew study, more American adults today consider affordable housing a major worry in their communities than crime, drugs or Covid-19. . . But slowly, despite NIMBY resistance, more states are undoing single family zoning rules and legalizing so-called accessory dwelling units or ADUs, meaning basement apartments, backyard cottages and converted garages. https://tinyurl.com/SitauationDireProgressPossible</p> |
| Behavioral Health | <p>26. Agency for Healthcare Research and Quality <i>Antipsychotic and Antidepressant Use and Expenses in the United States Between 2013 and 2018</i> This data visualization allows users to explore trends in the use of antidepressants and antipsychotics according to age group, sex, race / ethnicity, and family poverty status. Estimates are based on the 2013 Medical Expenditure Panel Survey-Household Component and the 2018 MEPS-Household Component.</p> <ul style="list-style-type: none"> • MEPS Statistical Brief #534: Comparison of Antidepressant and Antipsychotic Utilization and Expenditures in the U.S. Civilian Noninstitutionalized Population, 2013 and 2018 • MEPS Statistical Brief #535: Comparison of the Total Number of People in the U.S. Civilian Noninstitutionalized Population Purchasing One or More Antidepressant or Antipsychotic Prescriptions by Select Sociodemographic Characteristics, 2013 and 2018 • MEPS Statistical Brief #538: Average Expenditures per Prescription Antidepressant Fill in the U.S. Civilian Noninstitutionalized Population by Select Sociodemographic Characteristics, 2013 and 2018 <p>https://tinyurl.com/AHRQAntipsychoticUse</p> |
| Worker / Caregiver | <p>27. STAT News March 9, 2022 <i>Nurses, more powerful and visible after Covid, capitalize on new clout in Washington</i> https://tinyurl.com/NursesClout</p> <p>28. Kaiser Health News March 2, 2022</p> |

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| | <p><i>Biden’s Promise of Better Nursing Home Care Will Require Many More Workers</i></p> <p>The Biden administration has identified core impediments to better nursing home care in its proposed overhaul of the industry, but turning aspirations into reality will require a complex task: mandating adequate staffing levels for all homes without bankrupting those that can’t afford far higher labor costs. President Joe Biden’s proposals for the nation’s 15,000 skilled nursing facilities — released in advance of his State of the Union address Tuesday night — would lead to the most substantial increase in federal nursing home regulation since Congress reformed the industry in 1987. The centerpiece of the effort is establishing minimum staffing levels for facilities. To date, the Centers for Medicare & Medicaid Services requires “adequate” staffing but specifically mandates only a skeleton crew of round-the-clock nursing coverage and one registered nurse who works at least eight hours each day.</p> <p>CMS has rebuffed requests to mandate higher staffing levels in the past, saying each facility should “make thoughtful, informed staffing plans.” But multiple examinations — including a thorough CMS study in 2001 — have concluded staffing levels are frequently inadequate, particularly on nights and weekends. Studies have found that homes with higher staffing levels have fewer patient injuries. The 2001 study set a standard that many nursing homes currently don’t meet, saying optimal care required roughly one staffer for every seven short-stay patients — like those recovering from a hospital stay — and one staffer for every six long-stay residents.</p> <p>https://tinyurl.com/BidenPromiseBetterCare</p> |
| <p>Long Covid</p> | <p>29. *Washington Post March 8, 2022 <i>Covid long-haulers face grueling fights for disability benefits</i> Patients and doctors say safety net is unprepared for novel claims stemming from the pandemic</p> <p>Deepa Singh, 30, of Louisville, has been seriously ill for two years, racked with extreme fatigue, racing heartbeat and memory problems from long covid that she says prevent her from working. Adding to her distress, she says, has been a grueling — and so far, unsuccessful — battle for disability payments. . .</p> <p>Patients cite a litany of symptoms that defy verification through basic medical tests. They become exhausted at the merest exertion. They can’t remember simple words. Their hearts feel like they are fluttering. Yet neurological exams, EKGs and chest X-rays come back clean. . .</p> <p>Specialized tests can measure a few long covid-related problems, such as a central nervous system disorder called dysautonomia, which affects the body’s ability to regulate itself. But there are months-long waiting lists for the tests, doctors and patients said. . .</p> <p>In the United States, covid has infected more than 79 million people and claimed more than 950,000 lives. Doctors have estimated there are 750,000 to 1.3 million or more Americans too sick with long covid to return to their jobs. A recent analysis published by the Brookings Institution, based on data from various studies, suggested that long covid disabilities and workplace absences could account for 15 percent of America’s 10.6 million unfilled jobs. . .</p> |

The Social Security Administration said it has received about 23,000 disability applications since the beginning of the pandemic that include a mention of covid in some way — less than 1 percent of all annual claims, it said.

<https://tinyurl.com/LongHaulersGruelingFights>

30. Brookings

January 11, 2022

Is 'long Covid' worsening the labor shortage?

Millions of COVID-19 patients have developed a range of [debilitating symptoms](#) that last for months or even years. They are being diagnosed with “post-acute sequelae of COVID-19”—or more colloquially, [long Covid](#). Yet we know little about these people—how many there are, why they stay sick, or what the impact is on their lives. Among these knowledge gaps is the fact that public health and economics experts have almost no understanding of long Covid’s economic burden. . .

The Centers for Disease Control and Prevention [estimates](#) that through October 2021, just over 100 million Americans between the ages of 18 and 64 have contracted COVID-19. And studies [suggest](#) that between 27% and 33% of COVID-19 patients still experience symptoms months after infection. That means 31 million working-age Americans—more than one in seven—may have experienced, or be experiencing, lingering COVID-19 symptoms. . .

Crafting the right questions about long Covid is critical. To do so, the Census Bureau and BLS should work with National Institutes of Health teams researching long Covid as well as long Covid patient advocacy groups—these patients are best placed to identify trends and potential data pitfalls that survey designers might otherwise miss. . .

Access to this data will help policymakers and businesses better predict how today’s labor market conditions may evolve. It may also prompt the government to improve disability standards so that people with long Covid can request accommodations or secure benefits; issue health guidance that takes into account the economic burden of large-scale disability; and provide more federal dollars for long Covid research and medical care. The possibilities are vast, but first, we need the data.

<https://tinyurl.com/LongCovidWorseningLabor>

31. Centers for Disease Control and Prevention

June 14, 2021

Evaluating and Caring for Patients with Post-COVID Conditions: Interim Guidance

Key Points

- The term “Post-COVID Conditions” is an umbrella term for the wide range of physical and mental health consequences experienced by some patients that are present four or more weeks after SARS-CoV-2 infection, including by patients who had initial mild or asymptomatic acute infection.
- Based on current information, many post-COVID conditions can be managed by primary care providers, with the incorporation of patient-centered approaches to optimize the quality of life and function in affected patients.
- Objective laboratory or imaging findings should not be used as the only measure or assessment of a patient’s well-being; lack of laboratory or imaging abnormalities does not invalidate the existence, severity, or importance of a patient’s symptoms or conditions.

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| | <ul style="list-style-type: none"> Healthcare professionals and patients are encouraged to set achievable goals through shared decision-making and to approach treatment by focusing on specific symptoms (e.g., headache) or conditions (e.g., dysautonomia); a comprehensive management plan focusing on improving physical, mental, and social wellbeing may be helpful for some patients. Understanding of post-COVID conditions remains incomplete and guidance for healthcare professionals will likely change over time as the evidence evolves. <p>https://tinyurl.com/CDCPostCovidConditions</p> |
| Covid-19 | <p>32. National Institute of Health March 8, 2022 <i>COVID-19 immune response improves for months after vaccination</i> At a Glance</p> <ul style="list-style-type: none"> Researchers showed that B cells evolve after COVID-19 vaccination to help improve protection against SARS-CoV-2 over time. A better understanding of how the immune system responds to COVID-19 vaccination could lead to more effective and longer-lasting vaccination strategies. <p>https://tinyurl.com/ImmuneResponseImproves</p> <p>33. WGBH February 11, 2022 <i>COVID-19: How the Baker administration ill serves those in elder care</i> The Massachusetts Department of Health is charged with reporting deaths to the public. But the department’s reporting has been flawed — with changing definitions, inconsistencies for different types of elder care facilities and the use of ranges rather than specific numbers. As late as this past spring, the agency was reporting more than 9,000 long-term care deaths. Then it entirely replaced that figure with a total that was thousands of deaths lower. This wide gap, attributed to a change in definition of a COVID-19 death, has not been clearly explained.</p> <p>The fact is, we should know exactly how many elder care deaths occurred. . . Eventually, in April 2021, the state began to conspicuously publish total COVID-19 case and death numbers for each nursing home, as well as how many occurred during the previous 14 days. But there was no improved transparency for assisted living facilities. The nursing home statistics proved crucial to informed decision making during the worst days of the pandemic and during the first phases of vaccine distribution.</p> <p>Yet in July 2021, the state abruptly stopped publishing data on elder care facilities anywhere except in the Aggregative Report. . .</p> <p>It’s been a mess. And the messiness reduces our ability to draw lessons and prepare for the future — especially when it comes to protecting such a vulnerable population. As a result, we believe the state should convene a special, independent state commission to:</p> <ul style="list-style-type: none"> Examine institutional and external variables that allowed the large number of cases and deaths in elder care facilities; Establish protocols to track deaths and other metrics; and Make recommendations regarding infection control and prevention procedures to ready the state for future pandemics. <p>As part of this work, the commission must provide an understandable explanation of the change in COVID-19 death criteria that resulted in the</p> |

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| | <p>number decreasing from 9,000 to about 6,200 deaths of nursing home and assisted living residents. The public deserves to know how many elder care facility residents died during the pandemic. Finally, it must resume regular, accessible, and transparent reporting of COVID-19 cases, deaths, and vaccination rates in every elder care facility.</p> <p>https://tinyurl.com/IIIServedElderCare</p> |
| Veteran Services | <p>34. *MassLive.com March 10, 2022 <i>Veterans Affairs to recommend closing Northampton VA medical center after nationwide review of aging assets</i></p> <p>The U.S. Department of Veterans Affairs plans to recommend closing its nearly century-old medical center in Northampton, a move that could relocate nursing home care and rehabilitation programs to a VA facility in Newington, Connecticut, while transferring outpatient and mental health services to a VA clinic in Springfield and community providers.</p> <p>The recommendations are laid out in a report to be unveiled Monday by VA Secretary Denis McDonough. They follow a nationwide assessment that began in December of 2018 as part of an effort to “modernize or realign facilities” over the next several years to meet future demand for veterans, according to the VA MISSION Act of 2018 and VA officials. . .</p> <p>The market assessment is not linked to a 2020 report from the VA’s Office of Inspector General, which recommended ways to improve care and safety in Northampton.</p> <p>https://tinyurl.com/ClosingNorthamptonVACenter</p> <p>35. NPR March 8, 2022 <i>A bill to expand VA care for veterans exposed to toxic burn pits is moving slow</i> President Biden's son was one of many veterans who may have been sickened by burn pits. Advocates say the White House and Congress have been slow to officially link the health problems to the pits.</p> <p>https://tinyurl.com/ExpandCareBurnPits</p> |
| Disability Rights | <p>36. *Boston Globe March 7, 2022 (updated) <i>A pregnant counselor with medical conditions asked to work remotely. Then the Bourne superintendent fired her.</i></p> <p>[Katherine] Lockwood is pregnant and has a number of medical conditions that put her at high risk for a severe COVID-19 infection, including cystic fibrosis and diabetes, according to a complaint she filed last month with the Massachusetts Commission Against Discrimination. Her doctors wrote letters to her employer saying she needs to work remotely this school year, but [the Bourne School Superintendent] refused to honor the requests.</p> <p>https://tinyurl.com/PregnantCounselor</p> |
| Resources for National Consumer Protection Week | <p>37. National Center on Law and Elder Rights <i>Resources for advocates:</i></p> <ul style="list-style-type: none"> • Federal Trade Commission: National Consumer Protection Week Resources and Social Media Outreach • NCLER Training: Protecting Older Adults against COVID-19 Related Scams and Obtaining Relief from Financial Distress (Webinar Recording & Chapter Summary) |

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| | <ul style="list-style-type: none"> • NCLER Training: Defending Older Adults from Home Equity Theft, “We Buy Houses” and Foreclosure Rescue Scams (Webinar Recording & Chapter Summary) • NCLER Training: Using Consumer Law to Help Survivors of Elder Abuse (Webinar Recording & Chapter Summary) • NCLER Training: Using Consumer Law to Protect Nursing Facility Residents (Webinar Recording & Chapter Summary) • National Consumer Law Center: Brochures for Advocates and Older Consumers • National Center on Elder Abuse Scam Flyers: Looking for Love Flyer- Tips on How LGBT Older People Can Avoid the Sweetheart Scam, Tips for Avoiding Veterans Scams, and The Grandparent Scam. <p>38. Federal Trade Commission Bulk Order Scam Brochures (free to order, including brochures in Spanish)</p> |
| State Budget | <p>Commonwealth of Massachusetts <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. https://malegislature.gov/Budget</p> |
| List of Special Focus Facilities | <p>Centers for Medicare and Medicaid Services <i>List of Special Focus Facilities and Candidates</i> https://tinyurl.com/SpecialFocusFacilityProgram</p> <p>CMS has published a new list of Special Focus Facilities (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>What can advocates do with this information?</p> <ul style="list-style-type: none"> • 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. • Post the list on your program’s/organization’s website (along with the explanation noted above). • Encourage current residents and families to check the list to see if their facility is included. • Urge residents and families in a candidate facility to ask the administrator what is being done to improve care. |

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| | <ul style="list-style-type: none"> • 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. • 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. <p>Massachusetts facilities listed</p> <p>Newly added to the listing</p> <ul style="list-style-type: none"> • Marlborough Hills Rehabilitation and Health Care Center, Marlborough https://tinyurl.com/MarlboroughHills <p>Massachusetts facilities not improved</p> <ul style="list-style-type: none"> • Attleboro Healthcare, Attleboro https://tinyurl.com/AttleboroHealthcare <p>Massachusetts facilities which showed improvement</p> <ul style="list-style-type: none"> • None <p>Massachusetts facilities which have graduated from the program</p> <ul style="list-style-type: none"> • Oxford Rehabilitation and Health Care Center , Haverhill https://tinyurl.com/OxfordRehab <p>Massachusetts facilities that are candidates for listing</p> <ul style="list-style-type: none"> • Hillcrest Commons Nursing and Rehabilitation Center, Pittsfield https://tinyurl.com/HillcrestCommons • Medway Country Manor Skilled Nursing and Rehabilitation https://tinyurl.com/MedwayManor • Parkway Health and Rehabilitation Center https://tinyurl.com/ParkwayHealthCenter • Revolution Charwell https://tinyurl.com/RevolutionCharwell • Vero Health and Rehabilitation Center of Amesbury https://tinyurl.com/VeroAmesbury • Vero Health and Rehabilitation Center of Revere https://tinyurl.com/VeroRevere • Vero Health and Rehabilitation Center of Watertown https://tinyurl.com/VeroWatertown • Vero Health and Rehabilitation Center of Worcester https://tinyurl.com/VeroWorcester • Wareham Healthcare https://tinyurl.com/WarehamHealthcare • Worcester Rehabilitation and Health Care Center, Worcester https://tinyurl.com/WorcesterHealthcare • https://tinyurl.com/SpecialFocusFacilityProgram |
| Nursing Home Compare | <p>Centers for Medicare and Medicaid Services (CMS)</p> <p><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 Care Compare website 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"> • Staff turnover: 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. |

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| | <ul style="list-style-type: none"> • Weekend staff: The level of weekend staffing for nurses and registered nurses at a nursing home over a three-month period. <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>https://tinyurl.com/NursingHomeCompareWebsite</p> |
| Long-Term Care Facilities Specific COVID-19 Data | <p>Massachusetts Department of Public Health <i>Long-Term Care Facilities Specific COVID-19 Data</i> <i>Coronavirus Disease 2019 (COVID-19) reports related to long-term care facilities in Massachusetts.</i></p> <p>Table of Contents</p> <ul style="list-style-type: none"> • COVID-19 Daily Dashboard • COVID-19 Weekly Public Health Report • Additional COVID-19 Data • CMS COVID-19 Nursing Home Data |
| | *May require registration before accessing article. |
| Dignity Alliance Massachusetts Legislative Endorsements | <p>Information about the legislative bills which have been endorsed by Dignity Alliance Massachusetts, including the text of the bills, can be viewed at: https://tinyurl.com/DignityLegislativeEndorsements</p> <p>Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at rmooore8473@charter.net.</p> |
| Websites | |
| Previously recommended websites | The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: https://dignityalliancema.org/resources/ . Only new recommendations will be listed in <i>The Tuesday Digest</i> . |
| Previously posted funding opportunities | For open funding opportunities previously posted in <i>The Tuesday Digest</i> please see https://dignityalliancema.org/funding-opportunities/ . |
| Nursing Home Closures | Closure Notices and Relocation Plans available at: https://tinyurl.com/MANursingHomeClosures |
| Websites of Dignity Alliance Massachusetts Members | See: https://dignityalliancema.org/about/organizations/ |
| DignityMA Call to Action | <ul style="list-style-type: none"> • The MA Senate released a report in response to COVID-19. Download the DignityMA Response to Reimagining the Future of MA. • Advocate for state bills that advance the Dignity Alliance Massachusetts' Mission and Goals – State Legislative Endorsements. • Support relevant bills in Washington – Federal Legislative Endorsements. • Join our Work Groups. • Learn to use and leverage Social Media at our workshops: Engaging Everyone: Creating Accessible, Powerful Social Media Content. |
| Access to Dignity Alliance social media | <p>Email: info@DignityAllianceMA.org</p> <p>Facebook: https://www.facebook.com/DignityAllianceMA/</p> <p>Instagram: https://www.instagram.com/dignityalliance/</p> <p>LinkedIn: https://www.linkedin.com/company/dignity-alliance-massachusetts</p> <p>Twitter: https://twitter.com/dignity_ma?s=21</p> |

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| | Website: www.DignityAllianceMA.org | | |
| Participation opportunities with Dignity Alliance Massachusetts Most workgroups meet bi-weekly via Zoom. Please contact workgroup lead for more information | Workgroup | Workgroup lead | Email |
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| | Veteran Services | James Lomastro | jimlomastro@comcast.net |
| <i>The Dignity Digest</i> | For a free weekly subscription to <i>The Dignity Digest</i> : https://dignityalliancema.org/contact/sign-up-for-emails/ Editor: Paul Lanzikos Primary contributor: Sandy Novack MailChimp Specialist: Sue Rorke | | |
| Note of thanks | Thanks to the contributors to this issue of <i>The Dignity Digest</i> <ul style="list-style-type: none"> • Tim Brown • Wynn Gerhard • Arlene Germain • Dick Moore 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 paul.lanzikos@gmail.com.</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 <u>The Tuesday Digest</u> and <u>The Dignity Digest</u> are available at: https://dignityalliancema.org/the-tuesday-digest/</i></p> <p><i>For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.</i></p> | | | |