



The Dignity Digest

Issue # 90

May 20, 2022

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

*May require registration before accessing article.

Quotes of the Week

“It is not just about one’s own father and mother. It is about their generation and the generations before, whose farewell (from this life) can also be slow and prolonged, creating a time and space of long-lasting coexistence with the other ages of life. In other words, it is about the old age of life. Love for the human person that is common to us, including honoring a life lived, is not just a matter for the elderly. Rather it is an ambition that will bring radiance to young people who inherit its best qualities.”

Pope Francis, *Honor, Protect Dignity of Elderly, Pope Says at Audience*, April 20, 2022, <https://tinyurl.com/PopeHonorProtectDignity>

“No one tells you how to be an adult, let alone an adult with a disability, but there are badass people with disabilities who figured it out. Maybe they could be my mentors.”

Samuel Habib, 21 year old college student who lives with a rare neurodevelopmental disorder, *I’m a College Student with a Disability. Stop Treating Me Like a Child*. **New York Times (free access)**, May 17, 2022, <https://tinyurl.com/StopTreatingMeLikeAChild>

It really shouldn’t matter. Whether due to dementia, lupus, drug use or schizophrenia, these people cannot take care of themselves, and it is up to us, their community, to take care of them—the Barbaras—as if they were our mom.

Susan Partovi, MD, medical director for Homeless Health Care Los Angeles and co-founder of L.A. County’s Grave Disability Work Group, *It’s Not OK with My Soul*, **Generations Today**, May 18, 2022, <https://tinyurl.com/NotOkayWithMySoul>

But when Eduardo’s doctors applied for a “probate” conservatorship (usually for people with dementia or developmental disabilities), the county Office of the Public Guardian, which handles conservatorships for indigent persons, said he didn’t qualify because he had mental illness. When they applied for a Lanterman-Petris-Short conservatorship (for people with mental health issues), the county Office of the Public Conservator (which occupies the same office as the Public Guardian) said he didn’t qualify, because he had dementia.

[This] case reveals that our system was built around the idea of discrete populations that fit neatly into specific boxes—homeless, older adult, drug user, mentally ill—and thus frequently has no place for those that check “all of the above.” Although people with severe mental illness die on average [25 years younger](#) than the general population, the population of people served by the mental health system is rapidly aging.

*Round and Round We Go: Or the Way Services Work for People Who Are Homeless, **Generations Today**, May 18, 2022, <https://tinyurl.com/RoundAndRoundWeGoHomelessness>*

“Community members with lower incomes are not only vulnerable to displacement but are least able to access safe and affordable housing after a disaster,” despite having greater needs [post-disaster](#).

*American Planning Association, *Climate Change, Disasters, Aging and Homelessness*, **Generations Today**, May 18, 2022, <https://tinyurl.com/ClimateChangeHomelessness>*

An astonishing fifth of all U.S. households with older adults were found to be food insecure in July 2020. . . It is unlikely that pandemic-driven food insecurity and hunger in older adults will be resolved quickly. Even as COVID-19 restrictions begin to lift, adults will continue to need responsive, safe, person-centered access to services that can support their ongoing nutrition and wellness needs.

Perspectives on Food Security in Older Adults in the COVID-19 Era: What We Know, Where We Go, **Generations Today**, May 18, 2022, <https://tinyurl.com/FoodSecurityOlderAdultsCovid19>

“If we can see ourselves in some of these stories, that experience of empathy can actually help be the solution.”

Alex Goldstein, creator of “The Faces of Covid” website, *Listen: The faces of Covid at 1 million deaths and counting*, **STAT News (Podcast)**, May 18, 2022, <https://tinyurl.com/PodcastFacesOfCovid>

Our hypothesis is that incorporating less restrictive options into the discharge planning and healthcare decision-making process can help reduce facilities’ reliance on guardianship for discharge or benefit qualification purposes. . . Our goal is to minimize unnecessary or overly restrictive guardianships.

Elder Justice Innovations Profile: Maryland, **American Bar Association Commission on Law and Aging**, May 17, 2022, <https://tinyurl.com/ABAElderJusticeInnovations>

“Loneliness has real consequences to our health and well-being.”

Dr. Vivek Murthy, United States surgeon general, *How Loneliness Is Damaging Our Health*, **New York Times (free access)**, April 20, 2022, <https://tinyurl.com/LonelinessDamagingHealth>

“The general public recognizes how loneliness might influence our levels of distress, our emotional or mental health, but we probably don’t recognize the robust evidence of the effects on our physical health.”

Dr. Julianne Holt-Lunstad, Brigham Young University, *How Loneliness Is Damaging Our Health*, **New York Times (free access)**, April 20, 2022, <https://tinyurl.com/LonelinessDamagingHealth>

“For years people thought the best thing you could do for a lonely person is to give them support, Actually, we found that it’s about receiving and also giving back. So, the best thing you can do for someone who is lonely is not to give them help but ask them for help. So, you give them a sense of worth and a chance to be altruistic. Even if we’re getting

the best care, we still feel lonely if we can't give something back. The care is extremely valuable but it's not enough."

Dr. Stephanie Cacioppo, assistant professor of psychiatry and behavioral neuroscience at the University of Chicago, *How Loneliness Is Damaging Our Health*, **New York Times (free access)**, April 20, 2022, <https://tinyurl.com/LonelinessDamagingHealth>

"Without the connection to other people, you have bupkis."

Robin Solod, who lives alone on Manhattan's Upper East Side, *How Loneliness Is Damaging Our Health*, **New York Times (free access)**, April 20, 2022, <https://tinyurl.com/LonelinessDamagingHealth>

What is somewhat more baffling is the problem that came in dead last. According to [the Pew report](#), "more than two years into the [coronavirus pandemic](#), just 19% of Americans rate the coronavirus outbreak as a very big problem for the country, the lowest share out of 12 issues included in the survey." Two years ago, that number was [at 58 percent](#).

Why don't Americans care about the pandemic anymore?, **Washington Post**, May 16, 2022, <https://tinyurl.com/DontCareAboutPandemic>

"I wonder why some young people evacuate their cats and hamsters, but leave their parents behind."

Roman Vodyanyk, head doctor at Severodonetsk hospital in Luhansk, Ukraine, *Alone under siege: how older women are being left behind in Ukraine*, **The Guardian**, May 16, 2022, <https://tinyurl.com/AloneUnderSiege>

"I've seen everything – the Holodomor [great famine of 1932-33], the second world war, so many horrors. What else could scare me? I would evacuate if I could take care of myself. I was working my whole life. It's such a shame I can't do anything anymore."

Halyna Vasylyivna, 94-year-old resident of Kyiv's Podil district, *Alone under siege: how older women are being left behind in Ukraine*, **The Guardian**, May 16, 2022, <https://tinyurl.com/AloneUnderSiege>

"...what happens when you have a disability that is not easily seen by the naked eye?"

Samantha Joyce, curator for UVA's [Invisible Disabilities](#) exhibit, *Invisible Disabilities*, **Unbound Visual Arts**, <https://tinyurl.com/UVAInvisibleDisabilities>

Dignity Votes 2022	<p>Fact Sheets and Issue Briefs Prepared by Dignity Alliance Massachusetts Workgroups</p> <p>Nursing Homes</p> <ul style="list-style-type: none"> • Nursing Home Fact Sheet • Nursing Home Staffing Issues • Pandemic Issues in Nursing Homes • Nursing Homes – Financial Responsibility • Nursing Homes – Oversight, Licensures, Closures • Nursing Homes – Small Home Model <p>Home and Community Based Services</p> <ul style="list-style-type: none"> • HCBS Fact Sheet • HCBS Staffing Issues • HCBS Care Coordination Issues <p>Behavioral Health</p> <ul style="list-style-type: none"> • Behavioral Health Fact Sheet • BH Elder Mental Health Outreach Teams (EMHOT) Issues • BH Nursing Homes and Psychotropic/Antipsychotic Drugs Issues • Social Work Staffing Issues <p>Housing</p> <ul style="list-style-type: none"> • Housing Issues <p>Veterans</p> <ul style="list-style-type: none"> • Veterans Issues <p>https://dignityalliancema.org/2022-facts-and-issues/</p>
Request for Input	<p>1. CMS Requests Input on the Implementation of a Minimum Staffing Standard and Equity Measures</p> <p>On April 15, 2022, the Center for Medicare & Medicaid Services (CMS) published a Notice of Proposed Rule Making (NPRM) that included requests for information regarding the implementation of a minimum staffing standard in nursing homes and input on measuring health disparities in resident outcomes. The request for information follows the Biden Administration’s February 28, 2022 proposal of significant nursing home reforms. CMS states it plans to propose a minimum staffing standard within one year.</p> <p>In its request for information on a minimum staffing standard, CMS poses seventeen questions and asks for public input. It is important that all advocates for nursing home residents take the time to respond to these questions.</p> <p>Responses to the RFI are due June 10, 2022.</p> <p>On May 25, 2022 at 3 p.m., advocates from Consumer Voice, Justice in Aging, Long Term Care Community Coalition, California Advocates for Nursing Home Reform, and Center for Medicare Advocacy will be hosting a webinar to provide information and guidance on how to write comments and respond to these questions. For webinar registration information:</p> <p>https://tinyurl.com/ConsumerVoiceMay25Webinar</p> <p>There is also a Request for Information Regarding Measuring and Addressing Health Care Disparities and Advancing Health Equity.</p> <p>For more information and to access the questions:</p> <p>https://tinyurl.com/CMSInputMinimumStaffing</p>
Film Essay	<p>2. New York Times (free access)</p> <p>May 17, 2022</p> <p><i>I’m a College Student with a Disability. Stop Treating Me Like a Child.</i></p>

The path into adulthood is a precarious one for those with a disability. Samuel Habib, 21, wants to date, leave home, go away to college. But for Samuel and millions of other young adults with disabilities, the path beyond public school and into adulthood is difficult to navigate. Samuel lives with a rare neurodevelopmental disorder caused by a [mutation in a gene known as GNAO1](#). He drives a 350-pound wheelchair, uses a communication device, and can have a seizure at any moment. In this short documentary, Samuel seeks out guidance from America’s most rebellious disability activists. He wants to learn how they built full adult lives — as a road map for himself and others. “No one tells you how to be an adult, let alone an adult with a disability,” he says. “But there are badass people with disabilities who figured it out. Maybe they could be my mentors.” www.mydisabilityroadmap.com <https://tinyurl.com/StopTreatingMeLikeAChild>

Older Americans Month



Every May, the Administration for Community Living (ACL) leads the nation’s observance of Older Americans Month. In 2022, ACL is focusing on aging in place – how older adults can plan to stay in their homes and live independently in their communities for as long as possible. The 2022 theme is *Age My Way*.

3. The White House
 May 2022
A Proclamation on Older Americans Month, 2022
 During Older Americans Month, we honor our Nation’s seniors and the tremendous impact they have made in helping build a more perfect Union. Older Americans contribute their time and wisdom to make our communities stronger, more informed, and better connected. They are our loved ones, friends, mentors, essential workers, volunteers, and neighbors. We celebrate their achievements and recommit to providing our elders with the support and services they need to thrive and age with dignity. Older adults have always been a vital source of strength and resilience in America. During the pandemic, many seniors came out of retirement to serve their communities in health care and education roles, filling job vacancies in critical shortage areas. Moving forward, we must ensure that older Americans have the appropriate resources to maintain their independence and stay connected to their communities. My Administration is committed to keeping older Americans safe and healthy as they age. The American Rescue Plan allocated \$1.4 billion to providing older adults with services for nutrition, health promotion, disease prevention, caregiver support, and long-term care. It also provided additional Medicaid funding to support millions of older adults with disabilities and to help States improve the quality of caregiving jobs. My Administration is also dedicated to improving the safety and quality of care in nursing homes — ensuring that they have sufficient staff, that families have the necessary information to support their loved ones, and that poorly performing nursing homes are held accountable. This year, we celebrate the 50th anniversary of the Older Americans Act

Nutrition Program — the first Federal program to support the well-being of older Americans through meal deliveries, nutrition services, educational programs, and counseling. We also celebrate the 10th anniversary of the National Plan to Address Alzheimer’s Disease and recommit to building upon this important work. During Older Americans Month, let us pay tribute to the seniors who raised and guided us throughout our lives, and let us renew our commitment to honoring their contributions by giving them the fullest care, support, and respect they deserve.

NOW, THEREFORE, I, JOSEPH R. BIDEN JR., President of the United States of America, by virtue of the authority vested in me by the Constitution and the laws of the United States, do hereby proclaim May 2022 as Older Americans Month. This month and beyond, I call upon all Americans to celebrate older adults for their contributions, support their independence, and recognize their unparalleled value to our Nation.

IN WITNESS WHEREOF, I have hereunto set my hand this twenty-ninth day of April, in the year of our Lord two thousand twenty-two, and of the Independence of the United States of America the two hundred and forty-sixth.

<https://tinyurl.com/OlderAmericansMonth2022>

4. Administration on Community Living

May 2022

Information on planning, participation, accessibility, and making connections regarding Older Americans Month activities including [2022 logos](#), [poster](#), [templates](#), [social media graphics](#), and [activity ideas](#).

<https://tinyurl.com/ACLOAM2022>

5. National Center on Law & Elder Rights

May 2022

Celebrating Older Americans Month

Happy [Older Americans Month](#)! Every May, the Administration for Community Living (ACL) leads the celebration of Older American’s Month, and this year’s theme, *Age My Way*, focuses on how older adults can age in their communities, living independently for as long as possible and participating in ways they choose.

Diverse communities are strong communities. Ensuring that older adults remain involved and included in our communities for as long as possible benefits everyone. Legal assistance, elder rights, and aging services professionals serve a critical role in enabling older adults to assert their rights and remove barriers to independence and self-determination. Centering equity in this work also helps ensure that older adults from marginalized and underserved communities do not face additional barriers to aging in place.

NCLER’s [trainings and resources](#) cover many ways that advocates can help older adults age their way. Here are a few recommended resources to review this month:

- What it Takes to Age in Place: Bringing Housing & Home & Community-Based Services Together ([Webinar Recording](#) & [Chapter Summary](#))
- Older Americans Act Services and the HCBS Network ([Webinar Recording](#) & [Chapter Summary](#))
- Advancing Equity for Older Adults [Webinar Series & Resources](#)
- Assessing Legal Capacity: Strategies for an Elder Rights-Centered Approach ([Webinar Recording](#) & [Chapter Summary](#))

	<ul style="list-style-type: none"> • Guardianship Termination & Restoration of Rights (Webinar Recording & Issue Brief) • Title II Auxiliary Benefits: Social Security Benefits You’ve Never Heard of and Who is Eligible for Them (Webinar Recording & Chapter Summary) https://tinyurl.com/NCLEROlderAmericansMonth
World Elder Abuse Awareness Day	<div data-bbox="613 359 906 579" data-label="Image"> </div> <div data-bbox="1045 275 1531 772" data-label="Text"> <p>World Elder Abuse Awareness Day (WEAAD) is June 15th. The purpose of WEAAD is to provide an opportunity for communities around the world to promote a better understanding of abuse and neglect of older persons by raising awareness of the cultural, social, economic, and demographic processes affecting elder abuse and neglect. WEAAD is an opportunity for people or organizations to take action to protect older people by raising awareness about elder abuse, why it occurs, and what we can do to stop it.</p> </div> <div data-bbox="493 779 1531 919" data-label="Text"> <p>6. Administration on Community Living May 2022 Materials Available to Prepare for World Elder Abuse Awareness Day resources and materials</p> </div>
Ukraine	<p>7. The Guardian May 16, 2022 <i>Alone under siege: how older women are being left behind in Ukraine</i> With many living alone in dire conditions or unable to care for themselves, these forgotten women are among those least able to escape. Halyna Vasylyvna is one of 2 million older women in Ukraine who have remained largely invisible to authorities. Most of Ukraine’s elderly people are women – they make up two-thirds of those aged over 65 and 71% of those aged above 75 – partly because Ukraine has the sixth highest proportion of women in the world. . . In Kyiv’s Holosiyevy district, there are 786 elderly people – 80% of them women like Vasylyvna – alone, unable to leave their homes, and without relatives to care for them. Since Russia attacked, the number of social workers in the local centre has collapsed by more than 75%. Those women who remain are mostly elderly themselves, and now have four times as many clients to look after. They work five days a week, earning about £170 a month to supplement their small state pensions. “We need to support both our elderly clients and ourselves,” says 65-year-old social worker Nataliya Bodnar. . . The situation for older people is particularly acute in the Donetsk and Luhansk regions where a survey of more than 1,500 over-60s conducted in March revealed the scale of the problem: 99% do not want to leave their homes; 91% need help to get food; 91% are also experiencing extreme cold, with no heating due to electricity cuts; 75% need basic hygiene items; and 34% need urgent medication for chronic illness. . . Elderly people are often the forgotten category in any humanitarian crisis – an analysis of Google news search keywords between 24 February and 22 April found that 97% of all Ukraine-headlined articles that mentioned either children or the elderly were focused on children. Only 3% mentioned elderly people, of</p>

	<p>which only three touched on elderly women. Despite there being more than 50% more retirees in Ukraine than children under 15, the 390 UK NGOs operating in Ukraine are nearly twice as likely to be helping children than elderly people. https://tinyurl.com/AloneUnderSeige</p>
Exhibits	<p>8. Unbound Visual Arts June 3 through July 17, 2022 <i>Invisible Disabilities</i> Opening Reception Thursday, June 9, 2022, 6:30 to 8:30 p.m. Curator's Statement: When we look at art, much like most media, we want to be able to see ourselves in the artwork or in the space where that artwork is being showcased. Representation has been a popular topic within the last few years, being more evident in 2020. Art in general is usually a good representation of the artist, their surroundings, and their community. But what happens when you have a disability that is not easily seen by the naked eye? With disabilities such as ASD (Autism Spectrum Disorder), ADHD, Chronic Illness, and Mental Illnesses, these disabilities are not always apparent to individuals who are not familiar with them. When people are not familiar with these disabilities it lowers the probability that they will be represented in artworks, galleries, and museums. With this exhibition, it is my hope to shed some light and educate the general public about these Invisible Disabilities and how they can be properly represented. With this exhibition I want to create a safe and welcoming place for individuals who have Invisible Disabilities to come forward share their experience and their artwork. I want other galleries and museums to see what we have created and take it into their own hands so we can build a wider audience. https://tinyurl.com/UVAInvisibleDisabilities</p>
Webinars and online sessions	<p>9. The Long Term Care Discussion Group Monday, May 23, 2022, 2:00 to 3:00 p.m. <i>Integrated Care for Dually Eligible Beneficiaries and Medicaid HCBS Rebalancing: An Update from MACPAC</i> (the Medicaid and CHIP Payment and Access Commission) Over the past several years, the Commission has engaged in many conversations regarding integrated care programs for individuals who are dually eligible for Medicaid and Medicare. Their work has focused on three goals: increasing enrollment in integrated products, making integrated products more widely available, and promoting greater integration in existing products. Our presenters will share highlights from the draft chapter for the June report to Congress with a recommendation to require all states to develop a strategy to integrate coverage. They will also share high-level MACPAC comments on the Medicare Advantage proposed rule which included many provisions affecting integrated care for the dually eligible, including a plan to transition Medicare-Medicaid plans to Medicare Advantage dual eligible special needs plans, which was finalized on May 9. We'll also discuss initial thoughts on the beneficiary experience in integrated care and improving integration for dually eligible beneficiaries in fee-for-service states. Over the last two decades, federal and state policymakers have focused on rebalancing long-term services and supports (LTSS) away from institutional settings and toward home- and community-based services (HCBS). The COVID-19 pandemic has accelerated federal and state interest to promote the use of HCBS</p>

over institutional services and has exacerbated the workforce shortage. MACPAC is engaged in ongoing work focused on streamlining access to and incentivizing HCBS. The presenters will share preliminary work on considerations in redesigning the Medicaid HCBS benefit, and separately takeaways from a recently released issue brief on HCBS workforce shortages.

Speakers:

- Kirstin Blom, MIPA, is the principal analyst and contracting officer for the Medicaid and CHIP Payment and Access Commission (MACPAC).
- Asmaa Albaroudi, MSG, is a senior analyst for MACPAC.

Access the session via Zoom: <https://tinyurl.com/LTCGDMay23>

10. Encore.org

Tuesday, May 24, 2022, 4:00 p.m.

Solving the Housing Crisis, One College Campus at a Time

Session about two innovative programs that are matching older homeowners who need a little help and companionship with college students who need affordable housing.

Presenters:

- Dr. Ernest Gonzales, associate professor and director of the Center for Health and Aging Innovation, helped launch NYU's Intergenerational Home Share Program.
- Carrie Buck, executive director of Homeless Intervention Services of Orange County, partners with Cal State Fullerton on an intergenerational homesharing program.
- A student and homeowner who are currently co-living.

[Register now](#)

11. National Center on Law & Elder Rights

Wednesday, May 25, 2022, 2:00 to 3:00 p.m.

Building Capacity and Partnerships to Address Housing Issues for Older Adults

With the growing national housing crisis, elder law attorneys, legal assistance providers, and elder rights advocates will likely engage with clients experiencing housing instability and possibly homelessness. Understanding the housing services network, housing issues unique to older adults, and how to create community partnerships is key to providing effective support and legal advocacy for older adult clients with housing issues. This training will introduce the basics of the housing services network and issues older adults face in housing. We will also explore how community partnerships can enhance service delivery and how to collaborate with other aging advocates.

[This training](#) will address:

- The basics of the housing services network
- Strategies for solving housing issues unique to older adults
- Creating and maintaining community and advocacy partnerships

Presenter:

- Kevin Rabine, Three Rivers Legal Services

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

12. Cross-CTSA

Wednesday, May 25, 2022, 4:00 p.m.

Community-Based Approaches to Promoting Behavioral Health Equity: A Call to Action

Hear from the experts about their work related to community-engaged interventions that promote behavioral health equity, the role of

community/patient engagement in advancing behavioral health research as well as community perspectives.

Registration: <https://tinyurl.com/C-crossedBasedApproach>

13. The Consumer Voice, Justice in Aging, Long Term Care Community Coalition, California Advocates for Nursing Home Reform, and Center for Medicare Advocacy

Wednesday, May 25, 2022, 3:00 p.m.

Webinar on Preparing Responses to CMS Request for Input on the Implementation of a Minimum Staffing Standard and Equity Measures

On April 15, 2022, the Centers for Medicare & Medicaid Services (CMS) issued a [Request for Information](#) (RFI) regarding the implementation of a minimum staffing standard in nursing homes. The RFI contains seventeen questions, with some questions having several parts. CMS has promised to propose a minimum staffing standard within one year, and the RFI asks the public to comment on various aspects of a proposed minimum.

To ensure that CMS receives a significant support for a minimum standard, join Consumer Voice, along with representatives from Justice in Aging, Center for Medicare Advocacy, Long Term Care Community Coalition, and California Advocates for Nursing Home Reform, for a webinar on May 25, 2022 at 3:00pm EST where attendees will be provided with model comments, tips on how to respond to the RFI, and a general overview of the RFI questions.

This webinar will be geared to organizational advocates at the national, state, and local levels. However, all are invited to attend. Consumer Voice will be issuing separate tools and resources to help individuals submit abbreviated responses in support of the minimum staffing standard. Responses to the RFI are due June 10, 2022.

Registration: <https://tinyurl.com/ConsumerVoiceMay25Webinar>

14. CDC Division of Oral Health

Wednesday, May 25, 2022, 1:00 to 2:30 p.m.

Race, Racism, and Oral Health in America

CDC's Division of Oral Health is hosting the next webinar in their [Dental Public Health Lecture Series](#). These webinars are for current dental public health residents, prospective residents, and anyone interested in the field of dental public health. They are designed to help dental public health residents gain a better understanding of the [10 dental public health competencies](#) outlined in the [American Board of Dental Public Health](#). They feature experts in dental public health to provide a deeper dive into their experiences and each competency, and other current topics in the field.

Learning Objectives:

- Understand the development and use of race/ethnicity categories in analysis of population data in the U.S.
- Understand ways to measure the impact of racism on health and well-being.
- Understand the role of racism on the persistence of oral health inequities in the U.S.

Presenter: Raul I. Garcia, DMD, MMedSc, Professor and Chair, Department of Health Policy and Health Services Research at the Boston University Henry M. Goldman School of Dental Medicine.

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

	<p>15. AgeSpan, California State University-Sacramento, Care Dimensions, Good Shepherd Community Care, LGBTQIA+ Aging Project Fenway Health, Over the Rainbow Social Group, and Salem State University School of Social Work Friday, June 24, 2022, 9:00 a.m. to 3:00 p.m. <i>11th Annual LGBTQ Elders in an Ever-Changing World (VIRTUAL) Conference</i> This year’s keynote speaker is award-winning filmmaker Stu Maddux, who will present “Social Isolation, Loneliness, and Resilience in LGBTQ Older Adults.” Loneliness and isolation are being called the other hidden epidemics during the COVID era. Maddux will discuss his very timely documentary, <i>All the Lonely People</i>, which shares first-hand accounts of LGBTQ adults who have been featured in the documentary and have triumphed over the challenges of feeling alone. In addition, Maddux will highlight social engagement strategies that have helped people around the world reach out and connect. Conference flyer: https://conta.cc/3jlp8R4. Conference Fee: \$95 - with CEUs / \$75 - no CEUs \$25 - Seniors and Students Register at: https://2022lgbtqeldersconference.eventbrite.com</p>
<p>Previously posted webinars and online sessions</p>	<p>Previously posted webinars and online sessions can be viewed at: https://dignityalliancema.org/webinars-and-online-sessions/</p>
<p>Nursing Homes</p>	<p>16. The National Consumer Voice for Quality Long Term Care (Podcast) May 12, 2022 <i>A Conversation with Nursing Home Residents: Part II</i> In the newest episode of the <i>Pursuing Quality Long-Term Care</i> podcast, we continue our conversation with long-term care residents about the importance of these reforms. We speak with two residents to discuss the problems they face in their day-to-day lives from inadequate staffing, the ways nursing home ownership has impacted their lives throughout the pandemic, as well as what can be done to improve their lives in long-term care. https://tinyurl.com/ConversationsNHResidentsPartII</p>
<p>Home and Community Based Services</p>	<p>17. Generations Today May 18, 2022 <i>Perspectives on Food Security in Older Adults in the COVID-19 Era: What We Know, Where We Go</i> he term “food insecurity”—limited or uncertain availability of nutritionally adequate and safe foods, or limited or uncertain ability to acquire acceptable foods in socially acceptable ways—is often used as a measure of where hunger can occur. The United States Department of Agriculture (USDA) defines hunger as a “potential consequence of food insecurity that, because of prolonged, involuntary lack of food, results in discomfort, illness, weakness or pain that goes beyond that usual uneasy feeling.” Some population groups—including older adults, as well as Black, Indigenous and other racial/ethnic minority groups—can experience food insecurity and hunger at higher rates than others. . . A 2018 study found the presence of food insecurity among older adults with chronic conditions added 11% to healthcare costs. . . In 2019, the University of Michigan National Poll on Healthy Aging found that among U.S. adults ages 50 to 80, one in seven (or 14%) had experienced household food insecurity in the past year. Earlier that year, the USDA found that 7.2% (or 1,842,000 households) with older adults were food insecure.</p>

	<p>https://tinyurl.com/FoodSecurityOlderAdultsCovid19</p> <p>18. Under the Radar with Callie Crosley – WGBH May 13, 2022</p> <p><i>Local innovators seek to improve the elder care industry</i></p> <p>The pandemic has accelerated the systemic problems elders face, like caregiver burnout, nursing home shutdowns and worsening isolation. Not to mention the ever-increasing price tag that comes with such care. But inspired by global models and local successes, innovative solutions are on the rise. During May, Older Americans Month, we're giving an up-close look at specific ways to improve the systems and culture that support and sustain elders.</p> <p>GUESTS:</p> <ul style="list-style-type: none"> • Jessica Kim is cofounder of ianacare, a Boston-based startup that provides tech-enabled caregiver support through employers and health plans. • Joe Carella is executive director of the Scandinavian Living Center, an assisted-living facility specializing in community-centered living in Newton, Mass. • Marlena del Hierro is a gerontologist and VP of partnerships at Seniorly, an online platform providing access and insight to thousands of senior living communities across the country. <p>https://tinyurl.com/UnderRadarLocalInnovators</p>
Housing	<p>19. Generations Today May-June 2022</p> <p>The May-June issue of <i>Generations Today</i> deals with Housing, Homelessness and Hunger as critical foundations of economic security. Joy Moses of the National Alliance to End Homelessness frames rising rates of homelessness as a life-course issue in Over the Edge: Older Adult Homelessness in Contemporary America. Sarah Canham, of the University of Utah builds on the life-course perspective, then examines the role of discrimination, stigmatization and dehumanization in Causes of Homelessness Among Elders and How We Might Eliminate 'Homeism.' Next, Justice in Aging's senior housing attorney Patti Prunhuber uses startling statistics on housing costs to argue that A Shortage of Affordable Homes Is Driving the Surge in Older Adult Homelessness.</p> <p>20. Generations Today May 18, 2022</p> <p><i>Round and Round We Go: Or the Way Services Work for People Who Are Homeless</i></p> <p>Serious mental illness and substance use disorders are common among people experiencing homelessness. . . The federal government estimates that in 2020, there were about 580,000 people who were chronically homeless in the United States, of whom 120,000 (or about 20%) had a serious mental illness and 98,000 with chronic substance use issues (17%).</p> <p>Other figures, however, put the prevalence much higher—at more than 75% for both, among unsheltered people nationwide. The fuzzy boundaries of when substance “use” becomes “abuse” or when the understandable distress of being unhoused becomes a diagnosable mental health condition help explain the disparity.</p> <p>These debates matter because they drive perceptions of the origins of homelessness and appropriate policy responses. Advocates for “Housing First” argue that housing costs are the core drivers of homelessness, and the solution is to give people homes—with voluntary services attached.</p>

	<p>https://tinyurl.com/RoundAndRoundWeGoHomelessness</p> <p>21. Generations Today May 18, 2022 <i>Climate Change, Disasters, Aging and Homelessness</i> Communities across the globe face unprecedented environmental challenges attributed to climate change, increasing population and devastating pollution. These challenges threaten individual health and quality-of-life and are likely connected to the frequency and severity of natural disasters, which are on the rise. One population that is especially vulnerable to extreme weather and disaster events from climate change are older adults experiencing homelessness. . . According to the Internal Displacement Monitoring Centre (IDMC), globally 14 million people are left homeless every year after experiencing a natural disaster. The dearth of affordable housing in the United States is a notable barrier for reducing and preventing homelessness, before and following a disaster. https://tinyurl.com/ClimateChangeHomelessness</p>
Behavioral Health	<p>22. Generations Today May 18, 2022 <i>It's Not OK with My Soul</i> Susan Partovi, MD, the medical director for Homeless Health Care Los Angeles and co-founder of L.A. County's Grave Disability Work Group, shares insights from her work. https://tinyurl.com/NotOkayWithMySoul</p>
Loneliness	<p>23. New York Times (free access) April 20, 2022 <i>How Loneliness Is Damaging Our Health</i> Even before the pandemic, there was an “epidemic of loneliness,” and it was affecting physical health and life expectancy. The human brain, having evolved to seek safety in numbers, registers loneliness as a threat. The centers that monitor for danger, including the amygdala, go into overdrive, triggering a release of “fight or flight” stress hormones. Your heart rate rises, your blood pressure and blood sugar level increase to provide energy in case you need it. Your body produces extra inflammatory cells to repair tissue damage and prevent infection, and fewer antibodies to fight viruses. Subconsciously, you start to view other people more as potential threats — sources of rejection or apathy — and less as friends, remedies for your loneliness. . . Loneliness, as defined by mental health professionals, is a gap between the level of connectedness that you want and what you have. It is not the same as social isolation, which is codified in the social sciences as a measure of a person’s contacts. Loneliness is a subjective feeling. People can have a lot of contact and still be lonely, or be perfectly content by themselves. . . In a 2018 study by the Kaiser Family Foundation, one in five Americans said they always or often felt lonely or socially isolated. . . An often-cited meta-analysis by Julianne Holt-Lunstad of Brigham Young University compared the risk effects of loneliness, isolation and weak social networks to smoking 15 cigarettes a day. . . A paradox: People are more connected now than ever — through phones, social media, Zoom and such — yet loneliness continues to rise. Among the most digitally connected, teenagers and young adults, loneliness nearly doubled in</p>

	<p>prevalence between 2012 and 2018, coinciding with the explosion in social media use. https://tinyurl.com/LonelinessDamagingHealth</p>
<p>Holyoke Soldiers' Home / Veterans Services</p>	<p>24. National Conference of State Legislators August 15, 2019 <i>A Path to Employment for Veterans with Disabilities</i> Significant progress has been made at the state level in recent years to lower barriers and find better approaches to employing people with disabilities. One such effort is the "Work Matters: A Framework for States on Workforce Development for People with Disabilities," which is among collaborations undertaken as part of the State Exchange on Employment and Disability, a unique state-federal initiative funded by the U.S. Department of Labor's Office of Disability Employment Policy. . . According to the latest data from the U.S. Census Bureau, 18.2 million veterans live in the United States today, making up 7.3% of the population. Almost one-third of these veterans have a service-connected disability. . . Veterans are more likely to have a disability than nonveterans. In 2018, 4.7 million veterans, or 25%, had a service-connected disability, according to the U.S. Bureau of Labor Statistics. That number is 41% for post-9/11 veterans. Among all veterans with a disability, 29% had a rating of less than 30%, while 41% had a rating of 60% or higher. Disability ratings above 60% are more common among recent veterans. . . In 2018, the 10 most common service-connected disabilities among new compensation recipients were, in order: tinnitus, limitation of flexion (knee), hearing loss, lumbosacral or cervical strain, limitation of motion of the arm, scars, limitation of motion of the ankle, post-traumatic stress disorder, migraine and paralysis of the sciatic nerve. https://tinyurl.com/EmploymentForVeterans</p>
<p>Guardianship Reform</p>	<p>25. American Bar Association Commission on Law and Aging May 17, 2022 <i>Elder Justice Innovations Profile: Maryland</i> [T]he "healthcare-to-guardianship pipeline" (the pipeline). . .refers to the scenario in which a person enters the healthcare system while experiencing diminished capacity, and without a clear legal representative in control. The medical facility treats the person and then, when they no longer need acute medical care, files for guardianship in order to discharge them. Skilled nursing facilities also use guardianship to get patients qualified for medical assistance (Medicaid) so that bills are paid, and services can continue. While this can be beneficial in the short term, it often becomes detrimental, as the guardianship is often plenary and remains in place even if the precipitating event is resolved. Once the guardianship is in place, it becomes difficult to remove. While the person subject to the guardianship suffers the most direct harm, the pipeline is also problematic for courts, public guardianship agencies, and other stakeholders, as it increases the burden on all. . . There is a better appreciation of how less restrictive options such as supported decision-making, can enable older adults and people with disabilities to exercise their autonomy and can be used to avoid, limit, or terminate a guardianship. https://tinyurl.com/ABAElderJusticeInnovations</p>
<p>Covid-19</p>	<p>26. STAT News (Podcast) May 18, 2022</p>

	<p><i>Listen: The faces of Covid at 1 million deaths and counting</i></p> <p>When Covid-19 began tearing across the U.S. in March 2020, Alex Goldstein started posting on Twitter the pictures and stories of people who had died from the disease. He was worried the spreading virus might mean months of trouble, sickness, and sadness, and wanted to stay connected to the humanity of the loss. More than two years later, as the U.S. marks the grim milestone of 1 million people dead from Covid-19, Goldstein is still at it. The account, @FacesOfCovid, has now memorialized more than 7,000 people — parents and grandparents, children and siblings, Special Olympians, health care workers, barbers, teachers, bus drivers, Holocaust survivors, security guards, and more.</p> <p>https://tinyurl.com/PodcastFacesOfCovid</p> <p>27. Washington Post May 16, 2022 <i>Why don't Americans care about the pandemic anymore?</i> A million have died of covid-19. But the country is ready to just move on? What is somewhat more baffling is the problem that came in dead last. According to the Pew report, “more than two years into the coronavirus pandemic, just 19% of Americans rate the coronavirus outbreak as a very big problem for the country, the lowest share out of 12 issues included in the survey.” Two years ago, that number was at 58 percent. . .</p> <p>[T]he failure to recognize and prepare for a problem guaranteed to resurface in the second half of this year seems like a failure at both the elite and mass public level. Leaders and experts have lost the ability to educate the public — and the public simply no longer cares to be educated.</p> <p>https://tinyurl.com/DontCareAboutPandemic</p> <p>28. *Wall Street Journal April 30, 2022 <i>China's Covid-19 Defenses Have a Missing Piece: Vaccinating the Elderly</i> Only half of Chinese over 80 have received two vaccine doses, a much lower rate than the population at large. While about 88% of Chinese people had received two doses of Covid-19 vaccines as of mid-March, the ratio among those over 80—those most at risk of severe illness and death from an infection—was just 51%.</p> <p>https://tinyurl.com/MissingPieceVaccination</p>
	<p>*May require registration before accessing article.</p>
<p>Dignity Alliance Massachusetts Legislative Endorsements</p>	<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 rmoore8473@charter.net.</p>
<p>Websites</p>	<p>Help Age International https://www.helpage.org/</p> <p>HelpAge International is the secretariat to a global network of organisations promoting the right of all older people to lead dignified, healthy, and secure lives.</p> <p>Our vision Our vision is a world in which all older people can lead dignified, healthy, and secure lives.</p> <p>Our mission is to promote the wellbeing and inclusion of older women and men and reduce poverty and discrimination in later life.</p>

	<p>We work with older women and men in low and middle-income countries for better services and policies, and for changes in the behaviours and attitudes of individuals and societies towards old age.</p> <p>Like Right Now Films https://likerightnowfilms.com</p> <p>Live Right Now Films leverages the power of documentary film to promote greater inclusion of children and adults with disabilities through documentary films, public awareness, and worldwide outreach.</p>
Previously recommended websites	The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: https://dignityalliancema.org/resources/ . Only new recommendations will be listed in <i>The Tuesday Digest</i> .
Previously posted funding opportunities	For open funding opportunities previously posted in <i>The Tuesday Digest</i> please see https://dignityalliancema.org/funding-opportunities/ .
Nursing Home Closures	Closure Notices and Relocation Plans available at: https://tinyurl.com/MANursingHomeClosures
Websites of Dignity Alliance Massachusetts Members	See: https://dignityalliancema.org/about/organizations/
State Budget FY 2023	<p>Commonwealth of Massachusetts</p> <p>The Governor has submitted his proposed budget for FY 2023. The budget has been considered, amended, and voted on by the House of Representatives. The budget is now before the Senate. Below are pertinent excerpts from the Executive Summary of the Senate Committee on Ways and Means Fiscal Year 2023 Budget Recommendations:</p> <p>Health & Human Services</p> <p>Access to health care and the programs that keep our citizens safe is one of the most important components of the Commonwealth’s ongoing recovery and critical to supporting and building a post-pandemic future that equitably benefits all. To that end, this budget makes targeted investments to strengthen our state’s safety net and provides resources to ensure equitable access to health care services essential to the overall well-being of our individuals, families, and most vulnerable populations.</p> <p>MassHealth</p> <p>The Committee’s budget funds MassHealth at a total of \$18.56 billion (\$7.19 billion net), providing over 2.1 million of our Commonwealth’s children, seniors, and low-income residents access to comprehensive health care coverage.</p> <ul style="list-style-type: none"> • \$267.8 million for the Children’s Behavioral Health Initiative, supporting a community-based system of care, guaranteeing that children with MassHealth coverage receive the behavioral health services they need for success at home, in school and throughout life. • \$75 million for nursing facility direct care staff and patient quality supports to continue investments for the nursing home industry. • \$73.2 million to expand the Medicare Savings Program to 225 per cent of the federal poverty line. • Annualizes the costs of fully restoring dental coverage for adults, which was originally included in the FY 2021 GAA. <p>Mental Health</p>

The Committee's budget recognizes that the last year has had a wide impact on mental health and prioritizes mental and behavioral health by investing nearly \$1 billion in mental health services and prevention programs, with a focus on ensuring continued access to comprehensive services and supports for adults and children.

- \$514.3 million for Adult Support Services, including assisted outpatient programming and comprehensive care coordination among health care providers.
- \$274.8 million for DMH hospital and community-based services, including a \$5 million contract for an additional 30 continuing care beds at a third-party facility.
- \$111.8 million for children's mental health services, including \$3.9 million for the Massachusetts Child Psychiatric Access Program (MCPAP) and MCPAP for Moms to address mental health needs of pregnant and postpartum women.
- \$20 million to recapitalize the Behavioral Health, Access, Outreach and Support Trust Fund to support targeted behavioral health initiatives.
- \$12.7 million for the Forensic Services Program, which increases funds for mental health assessments and consultations in juvenile court clinics by \$1.5 million.
- \$12.5 million in the Department of Housing and Community Development and \$7 million in DMH line items for housing vouchers for DMH clients to transition into housing and community-based services.
- \$10 million for emergency department diversion initiatives for children, adolescents, and adults.
- \$8 million for student behavioral health services at the University of Massachusetts, state universities and community colleges.
- \$7 million to expand jail diversion initiatives to divert individuals with mental illness and substance use disorders from the criminal justice system and connect them with appropriate treatment.
- \$1 million investment to expand Safe Haven housing to end chronic homelessness for people with mental health conditions.

Public Health

Ensuring and maintaining access to high quality public health services continues to be central to our state's ongoing recovery and integral to our long-term economic health and post-pandemic future. To that end, the Committee's budget invests \$876 million in public health programs and services, further reinforcing the Senate's efforts to support access to quality care essential to overall well-being of our citizens.

- \$56 million for domestic violence prevention services.
- \$40.4 million for early intervention services, to ensure supports are accessible and available to infants and young toddlers with developmental delays and disabilities, including funds to support health equity initiatives.
- \$35.2 million for HIV/AIDS treatment and prevention.
- \$190 million in DPH hospital operations to meet higher staffing costs and ensure sick individuals receive the care they require.
- \$19.8 million for school-based health programming and services.
- \$18 million for family and adolescent health, including \$7.8 million for comprehensive family planning services and \$6.7 million to enhance federal Title X family planning funding.

- \$14.7 million for family health services, including sexual and reproductive health counseling, education and clinical services for low-income adolescents and adults.
- \$15 million for grants to support local and regional boards of health.
- \$10 million for the Safe and Successful Youth Initiative, \$6.5 million for Youth At-Risk matching grants and \$2 million for youth violence prevention grants.
- \$8.3 million for maternal and child health, including pediatric palliative care services for terminally ill children and their families.
- \$7.9 million for the Sexual Assault Nurse Examiner (SANE) and pediatric SANE programs, providing safe and integrated services to protect children from abuse.
- \$7.9 million for suicide prevention and intervention, including \$650,000 for Samaritans Inc. and \$200,000 for the Call2Talk suicide prevention hotline.
- \$2.7 million for the Childhood Lead Poisoning and Prevention Trust Fund.
- \$2 million for grants for improvements in reproductive health access, infrastructure, and safety.

Substance Use Disorder Treatment

In every corner of the Commonwealth, the scourge of substance abuse remains prevalent impacting families and their loved ones without prejudice. To continue our efforts to preserve access to care and services at this critical time, the Committee’s budget invests \$209.3 million to support these individuals and their families through the continuum of substance use disorder treatment and intervention services.

- \$10 million for the expansion of low threshold housing to support homeless individuals affected by substance use disorder.
- \$10 million for additional family supportive housing programs in the Commonwealth to ensure families struggling with opioid use disorder have the shelter and care they need.
- \$7 million for ten new recovery centers to enhance geographic access to services.
- \$7 million for investments to address shortages in the addiction treatment workforce through outreach and recruitment efforts and support for continuing education.
- \$5 million for investments in the substance use disorder workforce, including training on medication management, medication-assisted treatment, and treatment of co-occurring disorders.
- \$3 million for the Massachusetts Access to Recovery to help individuals with opioid use disorder reenter the workforce.
- \$3 million for multi-disciplinary, team-based substance use treatment.
- \$3 million for technical assistance to providers working in communities of color to support equitable access to recovery in Massachusetts.
- \$2 million for case management and residential rehabilitation services to help individuals transition between levels of treatment and find support through each step of recovery.
- \$2 million for workforce recruitment in collaboration with educational institutions and vocational-technical high schools.
- \$1.5 million to ensure deaf and hard of hearing individuals and deaf-blind individuals have access to tailored substance use disorder services.
- \$100,000 to improve early intervention programming and care for newborns diagnosed with neonatal abstinence syndrome.

People with Disabilities

The Committee's budget invests over \$2.38 billion across a range of services and programs that assist and support people with intellectual and developmental disabilities. This ensures equal and fair access to opportunities for these individuals, who meaningfully contribute to our Commonwealth.

- More than \$260 million for the DDS Community Day and Work Program, which includes a \$7.4 million increase over the FY 2022 GAA and the balancing forward of FY 2022 funds to support staffing recovery.
- \$90.6 million for DDS to support respite and family services.
- \$84 million to fully fund Turning 22 services to help young people with disabilities transition to adulthood.
- \$42.3 million for specialized services for adults with autism, which will provide services to an additional 300 adults in FY 2023.
- \$27.1 million for DDS Transportation services to ensure individuals can access services despite ongoing staffing shortages.
- \$27 million for the Massachusetts Commission for the Blind services.
- \$24.9 million for head injury treatment services.
- \$22.6 million for head injury treatment services.
- \$10.5 million for the Disabled Persons Protection Commission, including funding to support the caregiver abuse registry mandated by Nicky's Law.
- \$8.6 million for the Massachusetts Commission for the Deaf and Hard of Hearing.
- \$8.4 million for services for children with autism.
- \$8 million for the 11 independent living centers across the state providing networks of support to help individuals of all abilities access opportunities and build community.

Elder Affairs

As we recover and build anew in our Commonwealth, we must continue to do all that we can to protect our senior population. To that end, the Committee's budget dedicates resources to support several programs and services that focus on ensuring our elders receive the necessary supports and home care to support their overall health and wellness.

- \$278.7 million in total for the elder home care program and case management, providing critical health and social services to help seniors remain in their homes.
- \$78.4 million for home care case management services to assist ASAPs in providing services to elders.
- \$42.8 million for the Protective Services Program to prevent elder abuse and neglect.
- \$22.4 million for grants to local Councils on Aging.
- \$12 million for Meals on Wheels and other nutrition programs for seniors.
- \$11 million in housing related programs for older adults receiving benefits through the Elder Homeless Placement, Congregate Housing and Supportive Housing programs.
- \$2.5 million for Geriatric Mental Health Services.
- \$1 million for the Serving the Health Insurance Needs of Everyone (SHINE) Program to assist all residents on Medicare with insurance information and counseling.

Veterans

Reflective of our tireless commitment for veterans, the Committee’s budget once again prioritizes our support for the brave men and women who have served valiantly to protect our way of life. As such, this budget makes investments to maintain our Commonwealth’s leadership in veteran affairs, aiding those who deserve it and promoting access to quality services to meet the changing needs of our veteran population.

- \$68.2 million for veterans’ benefits provided by municipalities, including cash, fuel and rent assistance, employment training and placement and health benefits.
- \$48.7 million for the Chelsea Soldiers’ Home, including funds to finalize preparations of the new Community Living Center.
- \$28.4 million for the Holyoke Soldiers’ Home.
- \$9.1 million for Veterans’ Outreach Centers providing peer counseling, employment skills building and job search assistance, substance use disorder counseling and other services.
- \$2 million for veterans’ mental and behavioral health services through the Home Base program.
- \$626,490 for outreach and services targeted to women veterans.

Support for Children and Working Families

As we move forward together and work to support the health and wellbeing of our communities, we know that our children and families have been disproportionately impacted by the COVID-19 pandemic. To ensure we do not lost sight of this, the Committee’s budget commits to continuing our long-standing support for this vulnerable population as we work to recover and build a post-pandemic future for our Commonwealth that lifts our children and working families in need during this uncertain time.

TAFDC/EAEDC Benefits

The Committee budget recognizes the importance of ensuring that public assistance levels are not undermined by inflation. To that end, the Committee’s budget recommends continuing efforts to tackle “deep poverty” by providing a 10 per cent increase to Transitional Aid to Families with Dependent Children (TAFDC) and Emergency Aid to the Elderly, Disabled and Children (EAEDC) benefit levels compared to Fiscal Year 2022, ensuring families receive the economic supports they need to live, work, and provide stability for their children. Combined with the employment supports provided by the Department of Transitional Assistance, these rate increases will boost economic mobility and equip the Commonwealth with a better-trained workforce as we recover from the 2019 novel coronavirus.

School Clothing Allowance

The Committee acknowledges the high cost of living for working families with children in school. In response, the Committee’s budget provides a \$400 per child clothing allowance for families receiving TAFDC benefits, a \$50 increase over the FY 2022 level. This benefit is dispensed in September and helps alleviate the financial burden of back-to-school costs on working families, while also ensuring that all students have new, weather-appropriate clothing heading into the fall and winter.

- \$356.6 million for Transitional Assistance to Families with Dependent Children (TAFDC) and \$140.7 million for Emergency Aid to Elderly, Disabled and Children (EAEDC) to provide the necessary support as caseloads increase, and continue the Deep Poverty increases.

- \$286.2 million for DCF Social Workers, supporting the Department’s ongoing efforts to reduce caseloads for social workers.
- \$72.8 million for DCF family support and stabilization services.
- \$30.5 million for Emergency Food Assistance to ensure that citizens in need can navigate the historic levels of food insecurity caused by COVID-19.
- \$28.3 million for Family Resource Centers to grow and improve the mental health resources and programming available to families, including \$2.3 million for the Juvenile Court Mental Health Advocacy Project administered by Health Law Advocates, Inc.
- \$20 million for the Healthy Incentives Program, including \$8 million in funds carried forward from FY 2022, to ensure continued access to healthy food options for 90,000 SNAP households and support for local farmers.
- \$15.6 million for the DTA Employment Services Program to help low-income people move toward economic independence, including \$1.3 million for programs operated by the Office of Refugees and Immigrants and \$200,000 for the DTA Works Internship Program.
- \$14 million in grants to rest homes caring for Supplemental Security Income (SSI) and EAEDC recipients.
- \$9.5 million for DCF Lead Agencies to connect children with community-based services.
- \$5 million for the Secure Jobs Connect program, providing job placement resources and assistance for homeless individuals.
- \$4.4 million for the Office of the Child Advocate, including \$300,000 for the Transition Age Youth Pilot to provide housing support for children aging out of DCF care.
- \$3.5 million for the Center on Child Wellbeing and Trauma, providing trauma-informed training to professionals and organizations that work with children
- \$3 million for Children Advocacy Centers, including \$950,000 for the Massachusetts Children’s Alliance and \$325,000 for the Department of Public Health to allocate among the centers to improve the critical supports available to children that have been neglected or sexually abused.
- \$3 million for the annual child’s clothing allowance, which provides TAFDC families with \$400 per child to purchase clothes for the upcoming school year.
- \$1.6 million for Project Bread to support the Child Nutrition Outreach Program (CNOP) and the FoodSource Hotline.
- \$750,000 for the Foster Care Parents Campaign to recruit and support foster families.
- \$500,000 in the Supplemental Nutrition Assistance Program (SNAP) Employment and Training Transportation program, providing \$80 per month to cover transportation costs of SNAP clients participating in job training programs.

Housing

Workers need housing and access to housing helps families seeking economic stability and security. Understanding that the COVID-19 pandemic has disproportionately impacted many over these last two years, the Committee’s budget invests over \$850 million, increasing support for housing stability and homelessness assistance programs and maintaining critical relief for families and individuals in need.

- \$213.2 million for Emergency Assistance Family Shelters.

- \$210 million for Residential Assistance for Families in Transition (RAFT), including \$60M carried over from the March supplemental budget. To avoid a “Cliff Effect” and provide households with a transition from the federal Emergency Rental Assistance Program (ERAP), this budget recommends upholding the emergency level maximum amount of rental assistance that a household can receive of \$10,000 and allow eligible households facing a housing crisis to access both RAFT and HomeBASE.
- \$175 million for the Massachusetts Rental Voucher Program (MRVP), including \$20.7 million in funds carried forward from FY 2022, and recommend structural program changes that, starting January 1, 2023, will allow households to pay no more than 30% of their income for rent to receive rental vouchers for up to 110% of fair market value.
- \$92 million for assistance to local housing authorities.
- \$83.3 million for assistance for homeless individuals.
- \$56.9 million for the HomeBASE diversion and rapid re-housing programs, bolstering assistance under this program to 2 years with a per household maximum benefit of \$20,000.
- \$19.3 million for the Alternative Housing Voucher Program (AHVP) providing rental assistance to people with disabilities, including \$5.6 million in funds carried forward from FY 2022 and \$2.5 million for grants to improve or create accessible affordable housing units.
- \$8.5 million for assistance for unaccompanied homeless youth.
- \$8.2 million for the Housing Consumer Education Centers (HCECs).
- \$5 million for Resident Service Coordinators at local housing authorities.
- \$5 million for sponsored-based supportive permanent housing.
- \$3.9 million for the Home and Healthy for Good re-housing and supportive services program, including \$250,000 for homeless LGBTQQ youth.
- \$2.5 million for the Office of Public Collaboration to support housing dispute mediation efforts across the Commonwealth.
- \$1.8 million for the Tenancy Preservation Program.

Economic Development and Workforce Training

The economic and workforce development needs of every community, every region and every employer have been impacted by this pandemic, which has spared no one. As such, working to support the long-term economic health of our Commonwealth and shape a post-pandemic future that equitably benefits all people is a top priority on our to-do list. Playing to our strengths, the Committee’s budget supports our workers, our economy and relies on the ingenuity and work ethic of the people who call Massachusetts home.

- \$24 million for summer jobs and work-readiness training for at-risk youth through the YouthWorks program.
- \$20 million to invest in businesses in socially and economically disadvantaged communities, particularly those disproportionately impacted by the criminal justice system. This includes \$5 million in direct grants to businesses that focus on reaching markets made up of members of these communities.
- \$17 million for the Workforce Competitiveness Trust Fund to connect unemployed and under-employed workers with higher paying jobs.
- \$15.4 million for Career Technical Institutes to increase our skilled worker population and provide residents access to career technical training opportunities.
- \$10 million for One-Stop Career Centers.

- \$7.5 million for grants to community foundations to provide emergency economic relief to historically underserved populations across the Commonwealth.
 - \$7 million for Small Business Technical Assistance grants.
 - \$2.5 million for the Massachusetts Technology Collaborative Innovation Institute.
 - \$2.5 million for the Advanced Manufacturing Program.
 - \$2.5 million for the Massachusetts Cybersecurity Innovation Fund, including \$1.5 million to continue partnerships with community colleges and state universities to provide cybersecurity workforce training to students and cybersecurity services to municipalities, non-profits, and small businesses.
 - \$2 million for the Massachusetts Manufacturing Extension Partnership.
 - \$2 million for Regional Economic Development Organizations.
 - \$1.3 million for microlending grants to support small businesses
 - \$1 million for employment programs for young adults with disabilities.
- <https://malegislature.gov/Budget>

Nursing homes with admission freezes

Massachusetts Department of Public Health
Temporary admissions freeze
 On November 6, the state [announced](#) that it would require certain high risk nursing homes and rest homes to temporarily stop all new admissions to protect the health and safety of residents and prevent further COVID-19 transmission. Stopping admissions enables homes to focus resources such as staff and PPE on the health and safety of its current residents and enables the home to stabilize before taking on new residents. Homes that meet certain criteria will be required to stop any new admissions until the Department of Public Health has determined that conditions have improved, and the facility is ready to safely care for new residents. The Commonwealth will work closely with homes during this time and provide supports as needed to ensure resident health and safety. There are a number of reasons why a facility may be required to stop admissions, and the situation in each facility is different. Some of the factors the state uses to make this decision include:

- Number of new COVID-19 cases within the facility
- Staffing levels
- Failure to report a lack of adequate PPE, supplies, or staff
- Infection control survey results
- Surveillance testing non-compliance

Facilities are required to notify residents’ designated family members and/or representative when the facility is subject to an admissions freeze. In addition, a list of facilities that are currently required to stop new admissions and the reason for this admissions freeze will be updated on Friday afternoons, and as needed when the Department of Public of Health determines a facility can be removed from the list.

Updated on May 19, 2022

Name of Facility	City/Town	Date of Freeze	Qualifying Factor
Bear Mountain at Sudbury	Sudbury	5/10/22	Infection control
Caldwell Home Extended Care	Fitchburg	2/9/22	Noncompliance Testing
Elaine Center at Hadley	Hadley	5/3/22	Noncompliance Testing
Lanessa Extended Care	Webster	4/20/22	Inadequate staffing
Mt. Greylock Extended Care Facility	Pittsfield	5/3/22	New cases

	Oosterman's Melrose Rest Home	Melrose	12/18/21	Noncompliance Testing
	Savoy Nursing and Rehab Center	New Bedford	4/19/22	Infection control
	The Meadows of Central Massachusetts	Leicester	4/12/22	Infection control
	Vantage at South Hadley	S. Hadley	5/3/22	Noncompliance Testing
	Willows at Worcester	Worcester	5/17/22	Noncompliance Testing
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 Updated April 27, 2022 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. 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. 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. • 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 (updated April 27, 2022)</p> <p>Newly added to the listing</p> <ul style="list-style-type: none"> • None <p>Massachusetts facilities not improved</p> <ul style="list-style-type: none"> • Marlborough Hills Rehabilitation and Health Care Center, Marlborough https://tinyurl.com/MarlboroughHills <p>Massachusetts facilities which showed improvement</p> <ul style="list-style-type: none"> • Attleboro Healthcare, Attleboro https://tinyurl.com/AttleboroHealthcare <p>Massachusetts facilities which have graduated from the program</p> <ul style="list-style-type: none"> • None 			

	<p>Massachusetts facilities that are candidates for listing</p> <ul style="list-style-type: none"> • Bourne Manor Extended Care Facility https://bournemanor.org/ • 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 • RegalCare at Worcester No website • Revolution Charwell https://tinyurl.com/RevolutionCharwell • Vantage at South Hadley No website • Vero Health and Rehabilitation Center of Amesbury https://tinyurl.com/VeroAmesbury • Vero Health and Rehabilitation Center of Revere https://tinyurl.com/VeroRevere • Watertown Health Center No website https://tinyurl.com/SpecialFocusFacilityProgram 																				
<p><i>Nursing Home Inspect</i></p>	<p>ProPublica <i>Nursing Home Inspect</i> Data updated November 2021 This app uses data from the U.S. Centers for Medicare and Medicaid Services. Fines are listed for the past three years if a home has made partial or full payment (fines under appeal are not included). Information on deficiencies comes from a home’s last three inspection cycles, or roughly three years in total. The number of COVID-19 cases is since May 8, 2020, when homes were required to begin reporting this information to the federal government (some homes may have included data on earlier cases). Massachusetts listing: https://projects.propublica.org/nursing-homes/state/MA</p> <p>Deficiencies By Severity in Massachusetts (What do the severity ratings mean?)</p> <table border="0"> <thead> <tr> <th># reported</th> <th>Deficiency Tag</th> </tr> </thead> <tbody> <tr> <td>233</td> <td>B</td> </tr> <tr> <td>70</td> <td>C</td> </tr> <tr> <td>6,739</td> <td>D</td> </tr> <tr> <td>1,754</td> <td>E</td> </tr> <tr> <td>452</td> <td>F</td> </tr> <tr> <td>517</td> <td>G</td> </tr> <tr> <td>23</td> <td>H</td> </tr> <tr> <td>59</td> <td>J</td> </tr> <tr> <td>22</td> <td>K</td> </tr> </tbody> </table>	# reported	Deficiency Tag	233	B	70	C	6,739	D	1,754	E	452	F	517	G	23	H	59	J	22	K
# reported	Deficiency Tag																				
233	B																				
70	C																				
6,739	D																				
1,754	E																				
452	F																				
517	G																				
23	H																				
59	J																				
22	K																				
<p>Nursing Home Compare</p>	<p>Centers for Medicare and Medicaid Services (CMS) <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 that will help consumers have a better understanding of certain staffing information and concerns at facilities. 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. • 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. https://tinyurl.com/NursingHomeCompareWebsite</p>														
<p>Long-Term Care Facilities Specific COVID-19 Data</p>	<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 														
<p>DignityMA Call to Action</p>	<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 														
<p>Access to Dignity Alliance social media</p>	<p>Email: info@DignityAllianceMA.org Facebook: https://www.facebook.com/DignityAllianceMA/ Instagram: https://www.instagram.com/dignityalliance/ LinkedIn: https://www.linkedin.com/company/dignity-alliance-massachusetts Twitter: https://twitter.com/dignity_ma?s=21 Website: www.DignityAllianceMA.org</p>														
<p>Participation opportunities with Dignity Alliance Massachusetts</p> <p>Most workgroups meet bi-weekly via Zoom.</p> <p>Please contact workgroup lead for more information</p>	<table border="1"> <thead> <tr> <th data-bbox="483 1526 894 1598">Workgroup</th> <th data-bbox="894 1526 1065 1598">Workgroup lead</th> <th data-bbox="1065 1526 1526 1598">Email</th> </tr> </thead> <tbody> <tr> <td data-bbox="483 1598 894 1743">General Membership</td> <td data-bbox="894 1598 1065 1743">Bill Henning Paul Lanzikos</td> <td data-bbox="1065 1598 1526 1743">bhenning@bostoncil.org paul.lanzikos@gmail.com</td> </tr> <tr> <td data-bbox="483 1743 894 1814">Behavioral Health</td> <td data-bbox="894 1743 1065 1814">Frank Baskin</td> <td data-bbox="1065 1743 1526 1814">baskinfrank19@gmail.com</td> </tr> <tr> <td data-bbox="483 1814 894 1881">Communications</td> <td data-bbox="894 1814 1065 1881">Pricilla O’Reilly</td> <td data-bbox="1065 1814 1526 1881">prisoreilly@gmail.com svanschoick@cil.org</td> </tr> </tbody> </table>	Workgroup	Workgroup lead	Email	General Membership	Bill Henning Paul Lanzikos	bhenning@bostoncil.org paul.lanzikos@gmail.com	Behavioral Health	Frank Baskin	baskinfrank19@gmail.com	Communications	Pricilla O’Reilly	prisoreilly@gmail.com svanschoick@cil.org		
Workgroup	Workgroup lead	Email													
General Membership	Bill Henning Paul Lanzikos	bhenning@bostoncil.org paul.lanzikos@gmail.com													
Behavioral Health	Frank Baskin	baskinfrank19@gmail.com													
Communications	Pricilla O’Reilly	prisoreilly@gmail.com svanschoick@cil.org													

		Samantha VanSchoick Lachlan Forrow	lforrow@bidmc.harvard.edu
	Facilities (Nursing homes, rest homes, assisted living)	Arlene Germain	agermain@manhr.org
	Home and Community Based Services	Meg Coffin	mcoffin@centerlw.org
	Housing	Shaya French	sfrench@bostoncil.org
	Legislative	Richard Moore	rmoore8743@charter.net
	Legal Issues	Clarence Richardson	Clarence@massnaela.com
	Veteran Services	James Lomastro	jimlomastro@comcast.net
<i>The Dignity Digest</i>	<p>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</p>		
Note of thanks	<p>Thanks to the contributors to this issue of <i>The Dignity Digest</i></p> <ul style="list-style-type: none"> • Wynn Gerhard • Colin Killick • Dale Mitchell • Dick Moore • Steve Schwartz <p>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>		
<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: https://dignityalliancema.org/dignity-digest/ For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.</i></p>			