



The Dignity Digest

Issue # 92

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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

The poor quality of care provided by far too many of this nation’s nursing homes has been studied and documented for years. . . Policymakers and advocates at both the federal and state levels are increasingly focusing on transparency – the availability of high-quality, complete, interoperable, and accessible data on nursing home ownership, management, and financing – as a critical tool for assuring quality care and program integrity.

Nursing Home Transparency: A Critical Tool to Improve the Quality of Nursing Home Care, Long Term Care Community Coalition,
<https://nursinghome411.org/transparency/>

“The quality problems of this industry simply do not go away; they just seem to rise to public consciousness periodically.”

John A. Nyman, Journal of Policy Analysis and Management, 1986, *Nursing Home Transparency: A Critical Tool to Improve the Quality of Nursing Home Care, Long Term Care Community Coalition,*
<https://nursinghome411.org/transparency/>

“They’re raising false hopes. I hesitate to use the word quackery, but this is not scientific evidence-based medicine.”

Robert Howard, professor of psychiatry at University College London, referring to transcranial pulse stimulation treatment for Alzheimer’s Disease, *Costly Alzheimer’s treatment is spreading around the world, with virtually no science to back it up, STAT News, June 1, 2022,*
<https://tinyurl.com/CostltAlzheimersTreatment>

"The document of needed updates has been very helpful as we do our annual city budget in our capital plan. Because

of it, we're now able to identify things through an accessibility lens, which opens up other doors for funding possibilities."

Dominick Pangallo, Salem (MA) mayor's chief of staff, *Age-Friendly Salem, Massachusetts*, **AARP Livable Communities**, May 2022, <https://tinyurl.com/AgeFriendlySalem>

"It's hard to get people interested in older adults. Challenging ageism is one of our efforts and that includes raising the consciousness of people, because it's truly affecting the self-esteem of older adults."

Patricia Zaido, Founder and Chair, Salem for All Ages Task Force, *Age-Friendly Salem, Massachusetts*, **AARP Livable Communities**, May 2022, <https://tinyurl.com/AgeFriendlySalem>

The average rent affordable to an older adult on SSI is \$238, but the average rent nationwide is \$1,061 for a one bedroom.

A Shortage of Affordable Homes Is Driving the Surge in Older Adult Homelessness, **Generations**, May 18, 2022, <https://tinyurl.com/ShortageAffordableHomes>

"This is not simply a pandemic of the unvaccinated. There's still exceptionally high risk among older adults, even those with primary vaccine series."

Andrew Stokes, an assistant professor in global health at Boston University who studies age patterns of Covid deaths, *During the Omicron Wave, Death Rates Soared for Older People*, **New York Times (free access)**, May 31, 2022, <https://tinyurl.com/DeathRatesSoar>

"I don't think we should treat the premature death of older adults as a means of ending the pandemic. There are still plenty of susceptible older adults — living with comorbid conditions or living in multigenerational households — who are highly vulnerable."

Andrew Stokes, an assistant professor in global health at Boston University who studies age patterns of Covid deaths, *During the Omicron Wave, Death Rates Soared for Older People*, **New York Times (free access)**, May 31, 2022, <https://tinyurl.com/DeathRatesSoar>

“I think we are going to see the death rates rising. It is going to become more and more risky for older adults as their immunity wanes.”

Dr. Sharon Inouye, geriatrician and professor of medicine at Harvard Medical School, *During the Omicron Wave, Death Rates Soared for Older People*, **New York Times** (free access), May 31, 2022, <https://tinyurl.com/DeathRatesSoar>

Dr. Inouye, of Harvard Medical School, said she had waited for a notice from her mother’s assisted living facility about the rollout of second booster shots even as reports started arriving of staff members becoming infected. But still, the facility’s director said that a second booster shot drive was impossible without state guidance.

Eventually, her family had to arrange a trip to a pharmacy on their own for a second booster.

“It just seems that now the onus is put completely on the individual,” she said. “It’s not like it’s made easy for you.”

Dr. Sharon Inouye, geriatrician and professor of medicine at Harvard Medical School, *During the Omicron Wave, Death Rates Soared for Older People*, **New York Times** (free access), May 31, 2022, <https://tinyurl.com/DeathRatesSoar>

“It’s absolutely unrelenting — people coming, sick people coming, and people who aren’t that sick showing up in the ER more so than usual.”

Dr. Andrew Artenstein, chief physician executive for Baystate Health, which runs the largest hospital in Western Massachusetts, *ERs reach record capacity as hospitals are inundated with patients*, ***Boston Globe**, June 1, 2022, <https://tinyurl.com/ERsReachRecordCapacity>

“One of the glaring weaknesses of the system is there is no real option for families whose children fall into that category [i.e., autistic children exhibiting extremely aggressive behaviors].”

Christopher Treiber, associate executive director at the InterAgency Council of Developmental Disability Agencies, *Sabrina’s Parents Love Her. But the Meltdowns Are Too Much*, ***New York Times**, June 1, 2022, <https://tinyurl.com/SabrinasParentsLove>

"We are disappointed and concerned that (New York) nursing home operators and their trade associations

continue to spend their resources fighting commonsense resident protections rather than investing in improving care at their facilities.”

From a statement issued by 1199 SEIU Healthcare Workers East, *Nursing homes file lawsuit seeking to overturn NY law establishing staffing minimums*, **NCPR**, May 31, 2022, <https://tinyurl.com/NursingHomesFileSuit>

Caring for those who served and did come home — with wounds visible and invisible — caring for other veterans at the end of their days, repaying the debt this community owes to all who wore the uniform, well, that’s not always so easy.

Honoring their sacrifice by caring for the living, ***Boston Globe**, May 30, 2022, <https://tinyurl.com/HonoringTheirSacrifice>

“There’s a certain posture that you take when you are homeless. You lose your dignity.”

Ivan Perez, 53, homeless in North Hollywood, CA, *A Rising Tally of Lonely Deaths on the Streets*, ***New York Times**, April 18, 2022, <https://tinyurl.com/RisingTallyLonelyDeaths>

“These are profoundly lonely deaths.”

David Modersbach, researcher in Alameda County (CA), *A Rising Tally of Lonely Deaths on the Streets*, ***New York Times**, April 18, 2022, <https://tinyurl.com/RisingTallyLonelyDeaths>

“To die of heart disease, liver disease, respiratory diseases — on your own — is pretty shocking.”

David Modersbach, researcher in Alameda County (CA), *A Rising Tally of Lonely Deaths on the Streets*, ***New York Times**, April 18, 2022, <https://tinyurl.com/RisingTallyLonelyDeaths>

“Poverty is very wearing on the body. Fifty is the new 75.”

Dr. Margot Kushel, physician specializing in homeless care, *A Rising Tally of Lonely Deaths on the Streets*, ***New York Times**, April 18, 2022, <https://tinyurl.com/RisingTallyLonelyDeaths>

For those who do not find relief through available treatments, PTSD can become chronic, debilitating and even life-threatening. On average, 17 veterans die by suicide every day.

Dr. Robert Koffman, psychiatrist and retired U.S. Navy captain, *A Balm for Psyches Scarred by War*, *New York Times, May 29, 2022, <https://tinyurl.com/BalmForPsyches>

“It’s really important for me that these experiences I’m sharing are used to show people that there is hope. I’ll keep doing what I can to support this therapy until it’s legalized.”

Nigel McCourry, former Marine who was a participant in trials of MDMA-assisted therapy, *A Balm for Psyches Scarred by War*, *New York Times, May 29, 2022, <https://tinyurl.com/BalmForPsyches>

“I try to be an inspiration. A lot of people, you know, get lazy or something. And I say: ‘Look. You got to keep moving.’ That’s the secret. Just keep moving.”

Walter Lancaster, 82 years old

“I guess you just have to have the love to race, the determination to just do it.”

Lillian Atchley, 93 years old

“My consistent advice is to keep moving, keep moving, keep moving,” he said, “and have a little luck.”

Roy Englert, 99 years old

“Run every day, even if it’s a short distance,” she said. “I can’t run very much now, but when I can’t run anymore, I’ll still walk.”

Yvonne Aasen, 90 years old

These 90-Year-Old Runners Have Some Advice for You, **New York Times (free access)**, May 23, 2022 (updated), <https://tinyurl.com/90YearOldRunnerAdvice>


“I came here because that is what I was interested in — I wanted to continue my education. It’s wonderful, actually. It keeps you alive, and keeps you interested.”

Elly Pollan, 92 year old grandmother of six and great-grandmother of four, upon the receipt of her bachelor’s degree from Lasalle University, *After a lifetime of learning, a 92-year-old Newton woman earns her college degree*, *Boston Globe, May 18, 2022, <https://tinyurl.com/LifetimeOfLearning>

<p>Dignity Votes 2022</p>	<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>
<p>Reports</p>	<p>1. Massachusetts Advisory Council on Alzheimer’s Disease and All Other Dementias April 2022 <i>Annual Report</i> This report is the Council’s second annual report. The Commonwealth has 130,000 residents diagnosed with dementia³, supported by over 340,000 family caregivers and an estimated 130,000 or more residents currently living with dementia without a formal diagnosis. The state plan includes recommendations and implementation plans around seven focus areas or “workstreams”:</p> <ol style="list-style-type: none"> 1. Caregiver Support and Public Awareness 2. Diagnosis and Services Navigation 3. Equitable Access and Care 4. Physical Infrastructure 5. Public Health Infrastructure 6. Quality of Care 7. Research <p>https://tinyurl.com/AlzheimersReportApril2022</p> <p>2. AARP Research 2021 <i>AARP Member Opinion Survey in Massachusetts: Life Experiences & Concerns</i> Topics covered:</p> <ul style="list-style-type: none"> • Financial • Health

	<ul style="list-style-type: none"> • Work / Retirement • Housing & Independent Living • Social Connectiveness • Demographics <p>https://tinyurl.com/AARP2021MassachusettsSurvey</p>
Lives Well Lived	<p>3. *New York Times March 9, 2022 <i>Kent Waldrep, Athlete Whose Injury Led to Advocacy, Dies at 67</i> Partly paralyzed as a college football player, he had a role in the inception of the Americans with Disabilities Act and raised money for spinal cord research. . . In 1982, with his renown growing in disability circles for having traveled to the Soviet Union and returning home to Texas to start the short-lived International Spinal Cord Research Foundation, he was appointed to the National Council on the Handicapped by President Ronald Reagan. Mr. Waldrep eventually became vice chairman of the council, a federal agency that assesses laws and programs affecting the disabled. (It was renamed the National Council on Disability in 1988.) He started the Kent Waldrep National Paralysis Foundation in 1985, and in 1994, he and the University of Texas Southwestern Medical Center in Dallas created the Kent Waldrep Foundation Center for Basic Research on Nerve Growth and Regeneration. It was endowed with more than \$10 million raised by Mr. Waldrep’s foundation. . . “We used his funding to seed a tremendous amount of research,” Dr. Luis Parada, a developmental biologist and neuroscientist who directed the center for 21 years, said in a phone interview. “What I admired in addition to Kent’s large personality and motivation was that he understood that I was going to ask fundamental questions of neuroscience that were essential to understand and tackle the problem, like how nerve cells die and how do we keep them alive. He wasn’t seeking claims that we would solve the problem in the short term.” https://tinyurl.com/KentWaldrep</p>
Inspiration	<p>4. New York Times (free access) May 23, 2022 (updated) <i>These 90-Year-Old Runners Have Some Advice for You</i> [T]he athletes competing at the National Senior Games track and field event had a few more gray hairs than their teenage counterparts. They also had grandchildren cheering for them in the stands. Many of the runners were 75 to 99 years old and didn’t pick up running until they were in their 60s. Some needed a bit of assistance getting their shoes on before making their way to the start line. But all shared in their determination to compete — and to complete each race. They had plenty of advice for younger runners who hope to follow in their footsteps around a 400-meter oval. Stay consistent, stay persistent and stay in motion, they said. https://tinyurl.com/90YearOldRunnerAdvice</p> <p>5. *Boston Globe May 18, 2022 <i>After a lifetime of learning, a 92-year-old Newton woman earns her college degree</i></p>

	<p>Elly Pollan worked 20 years as an accountant and raised five children with her husband in New York state. She’s been a staunch advocate for education, but one achievement — a college degree — seemed out of her reach.</p> <p>Now 92 and living at Lasell Village in Newton, she finally reached that goal on May 14. After taking college classes for more than a decade, she was awarded an associate’s degree in liberal studies during Lasell University’s commencement. . .</p> <p>Over the past 12 years, Pollan has taken an average of three classes each semester, according to university spokesman Ian Meropol. That includes courses in the spring, summer, and fall. . .</p> <p>Pollan, who is also active on local committees at Lasell Village, has no plans to stop learning. She’s currently studying a course catalog for the summer semester at Lasell — so far, she’s eyeing a class on painting, and another on the economy.</p> <p>https://tinyurl.com/LifetimeOfLearning</p>
Policy Briefs	<p>6. Long Term Care Community Coalition</p> <p><i>Nursing Home Transparency: A Critical Tool to Improve the Quality of Nursing Home Care</i></p> <p>A new LTCCC policy brief details how reforms in nursing home transparency – high-quality, complete, interoperable, and accessible data on ownership, management, and financing – can improve resident care and program integrity in US nursing homes.</p> <p>This policy brief covers:</p> <ul style="list-style-type: none"> • Past efforts to improve transparency • Biden Administration reform proposals • State legislative efforts • Recommendations for critically needed reforms <p>Issues:</p> <ul style="list-style-type: none"> • <i>Ownership Transparency:</i> Nursing homes are increasingly for-profit entities, operated by multi-state or national chains or owned by private equity firms. • <i>Financial Transparency and Accountability:</i> The complexity of ownership and management structures hampers the ability of regulators to effectively monitor how taxpayer dollars are being spent and to ascertain a nursing home’s financial health. • <i>Public Information:</i> Public information provided by state nursing home websites, CMS’s Care Compare, and other federal data systems are largely state-centric and focused on a single facility. This greatly impedes the public’s ability to assess care across multiple states, by chains, or by common owner or operator. <p>Download the full policy brief or individual sections at https://nursinghome411.org/transparency/</p>
Biden / Federal Policies	<p>7. U. S. Department of Health and Human Services</p> <p>May 10, 2022</p> <p><i>Public Health Emergency Extended Past July 15, 2022</i></p> <p>The Department of Health and Human Services (HHS) Secretary Becerra and the Centers for Medicare & Medicaid Services (CMS) Administrator Brooks-LaSure sent a letter to governors on May 17 stating they did not know when the emergency would end, but urged states to take the necessary steps to prepare for the coming wave of Medicaid redeterminations. CMS also released a slide deck that lays out enrollment flexibilities states can apply for and reminds states to consider how to distribute renewals throughout the year since they will be</p>

	<p>unable to redistribute renewals in future years. For the letter, click here, and click here for the CMS slide deck.</p>	
<p>World Elder Abuse Awareness Day</p>		<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>
	<p>1. National Center on Elder Abuse Wednesday, June 8, 2022, 1:00 to 1:30 p.m. NCEA’s WEAAD Twitter Chat (#WEAADChat) Questions to be discussed:</p> <ul style="list-style-type: none"> • Q1: What are some community supports essential for aging with dignity and respect? #WEAADChat • Q2: Why are these supports so important for #PreventingElderAbuse? #WEAADChat • Q3: What is one thing we can all do to strengthen community supports for #WEAAD? #WEAADChat • Q4: What are you doing to highlight community resources and supports for #WEAAD this year? #WEAADChat <p>https://tinyurl.com/WEAADTwitterChat</p> <p>2. National Center on Elder Law & Rights <i>World Elder Abuse Awareness Day</i> June 15th is World Elder Abuse Awareness Day (WEAAD). This day provides an opportunity for communities around the world to promote a better understanding of abuse and neglect of older people by raising awareness of the cultural, social, economic, and demographic processes affecting elder abuse and neglect.</p> <p>The WEAAD website has tools available for advocates and programs to spread the word about WEAAD throughout the month of June and amplify accurate information about aging, expose ageism, and promote the end of elder abuse. Templates for social media posts, trainings, press releases, and more are available on the WEAAD page. You can also share your planned events and find more information on how to participate in this month’s national awareness events, including the Walk for WEAAD and the #WEAAD615 Challenge. Join the virtual event on June 15th to get the latest data and resources to promote elder justice all year long: Federal Partners Take on the WEAAD 6-1-5 Challenge! Advocates across many disciplines have a role in addressing elder abuse and promoting elder rights. Older adults benefit from person-directed, trauma-informed approaches to provide protection, redress, and ensure ongoing</p>	

	<p>stability. NCLER’s Elder Justice Toolkit contains actionable resources for civil legal aid attorneys and advocates to respond to elder abuse, utilizing trauma-informed and culturally competent strategies.</p> <p>These additional resources provide guidance and support for a wide-range of professionals:</p> <ul style="list-style-type: none"> • National Center on Elder Abuse Publications • Adult Protective Services Technical Assistance Resource Center • National Long-Term Care Ombudsman Resource Center: Abuse, Neglect & Exploitation in Long-Term Care Facilities • SAGE & National Resource Center on LGBT Aging: Mistreatment of LGBT Elders • National Indigenous Elder Justice Initiative • Elder Abuse Guide for Law Enforcement (EAGLE) • FrameWorks Talking Elder Abuse Communications Toolkit <p>Register here for the WEAAD 2022 Virtual Event</p> <p>3. Administration on Community Living May 2022 Materials Available to Prepare for World Elder Abuse Awareness Day resources and materials</p>
Virtual Conferences	<p>4. NASW Massachusetts Chapter Thursday, June 16, 2022, 8:30 a.m. to 3:45 p.m. <i>Nursing Home Conference 2022: Differences Matter: Equitable Social Work Practice with Older Adults</i> CONFERENCE AGENDA: 8:30am: Conference begins</p> <ul style="list-style-type: none"> • 8:30 - 8:45am: Welcome remarks by Rebekah Gewirtz, NASW-MA Executive Director, and Frank E. Baskin, NASW-MA Nursing Home Committee Co-chair • 8:45 - 10:15am: Keynote Address: Diversity, Equity, Inclusion & Opportunity in Long-Term Care Settings with speaker Dr. Macie P. Smith, Ed.D. • 10:15 - 10:30am: Morning screen break • 10:30 - 12:30pm: Panel Discussion with speakers Julie Sahlings, LICSW, and Mary Ellen Hopkins, LCSW • 12:30 - 1:30pm: Lunch screen break • 1:30 - 2:30pm: Workshop “Public Policy and Action to Change DPH Nursing Home Social Work Regulations” with speaker Frank E. Baskin, LICSW • 2:30 - 3:30pm: Workshop “LGBTQ+ Equity in the Nursing Home” with speaker Lisa Krinsky, LICSW. • 3:30 - 3:45pm: Conference ends <p>Participants will learn about:</p> <ul style="list-style-type: none"> • The experiences and issues residents, families, and staff encounter when working in nursing homes and other older adult congregate settings with respect to diversity, equity, and inclusion. • Strategies for effective and appropriate interventions to use to keep providing services and aiding residents in need. • General issues about race, culture, impairment, LGBTQ+, religion etc. when working with older adults and in older adult congregate care that inform social work practice. <p>5.5 CEUs for social workers Registration closes June 14</p>

	<p>Registration: https://tinyurl.com/NASW2022Conference</p> <p>5. 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://2022lgbtgeldersconference.eventbrite.com</p>
Conference	<p>6. LeadingAge Massachusetts Tuesday, June 7, 2022, 9:00 a.m. to 4:45 p.m. <i>2022 LeadingAge MA Annual Conference & Exhibition</i> Four Points by Sheraton Hotel, Norwood, MA</p> <ul style="list-style-type: none"> • Keynote Address: <i>Breakout from Burnout</i>, Keshawn Hughes, Certified Neuro Coach and Leadership Consultant, NeuroSavvy Leadership • General Session: <i>Opening Doors to Aging Services: Raising Awareness, Improving Perceptions</i>, Susan Donley, Senior Vice President, LeadingAge • General Session: <i>Why and How to Advance Diversity, Equity, and Inclusion in Aging Services Organizations</i>, Candace Cramer, CEO, Goddard House Assisted Living, Walter Ramos, President & CEO, Rogerson Communities, and Philippe Saad, Principal, DiMella Shaffer • Breakout Sessions (First Round): <ul style="list-style-type: none"> ○ <i>Understanding our Current Labor Shortage Crunch and Finding Solutions</i>, Greg Bunn, Executive Director, MassHire Metro South/West Workforce Board ○ <i>Discovering Resources in Your Own Backyard</i>, James Fuccione, Executive Director of the Massachusetts Healthy Aging Collaborative, Naomi Prendergast, President & CEO of D’Youville Life and Wellness Community, Patty Roggeveen, CEO, Sophia Snow Place ○ <i>Reach for the Stars – Making the Most of Your Five-Star Reports</i>, Susan Chenail, RN, CCM, RAC-CT, Senior Quality Improvement Analyst, LeadingAge New York • Breakout Sessions (Second Round): <ul style="list-style-type: none"> ○ <i>The Future of Work: Robots, Millennials, and Workflex, Oh My!</i>, Kim Gaskell, Executive Director, LNHA, RiverWoods Durham ○ <i>Advancing the Technological Literacy of Residents</i>, AJ Avakian, Director of IT, North Hill, John Dixon, Director of Education, Lasell Village, Karen Pollack, Director of Community Relations, Springhouse ○ <i>The Evolution of Person-Centered Approach to Dementia Care and Key Elements of a Successful Dementia Program</i>, Rachael Percoco,

	<p>MSPT, DPT, Director of Outpatient Services, Preferred Therapy Solutions. Letha Kowalsky, PT, Regional Director of Clinical Services, Site Coordinator of Clinical Education, Preferred Therapy Solutions</p> <p>For more information and registration contact Elissa Sherman, esherman@LeadingAgeMA.org</p>
Podcast	<p>7. Stanford Center on Longevity – The Longevity Project</p> <p>Recorded on May 24, 2022 via Zoom <i>Virtual Panel on the Great Retirement</i> Insights into the Great Retirement</p> <p>Every month for the last year, on average more than 4 million American workers have left their jobs.</p> <p>The Great Resignation, or the Big Quit, is an unprecedented movement of Americans out of their jobs. For the most part, workers who left their jobs during the Great Resignation were simply moving to other, more preferred jobs, rather than leaving the labor force. For these workers, the tight labor market of the Great Resignation was an opportunity to find a new job with better pay and benefits, more flexible work conditions, a career path, or just a better boss. But the vast movement of workers also included a much higher than usual number of retirements, many of them unplanned and driven by the financial and public health issues of the pandemic. The Federal Reserve Board of St. Louis has estimated that there were more than 2 million more retirements than would be ordinarily expected during the first year of the pandemic. This is the Great Retirement, and it is likely to have significant consequences as this new group of early retirees consider their long-term financial conditions and as the tight labor market grapples with the loss of millions of capable workers.</p> <p>Why did these workers leave the work force and what are the issues that they face in light of an earlier-than-expected retirement?</p> <p>The insights below are drawn from: (1) an AIG Life & Retirement survey of 2,202 U.S. adults ages 25-75 conducted online by Morning Consult between April 12- April 15 and (2) focus groups conducted by the Schlesinger Group for the Longevity Project.</p> <ul style="list-style-type: none"> • The pandemic drove millions of Americans into early retirement. Of the respondents who retired during the pandemic, only 40% said that their retirement was already planned. A range of unexpected economic and health circumstances drove the other 60% out of the workforce. • Health concerns led the way in the reasons for retirement during the pandemic, with 25% citing health as a primary reason for retirement. Health concerns were enhanced during the pandemic by fear of isolation. In focus groups, recent retirees expressed fear of getting sick and being isolated from their family caregivers. • Many recent retirees also cited job loss and the difficulty of finding new work during the pandemic as reasons for early retirement. In focus groups and verbatims, recent retirees spoke about stress of the pandemic, fears of job loss and rapid changes in the work environment as additional reasons for early retirement, as well as the difficulty of starting over in such a harsh economic climate. • Early retirement brings with it a host of financial concerns, with the risk of inflationary pressures of particular concern to the retirees of the pandemic. Concerns about inflation are widespread in all age groups in the survey, but they are particularly strong among recent retirees, with 71% citing it as a source of

	<p>primary concern.</p> <ul style="list-style-type: none"> • Despite economic concerns, recent retirees are not looking (at least yet) to return to the workforce. Only 15% of recent retirees said that they miss working and only 19% indicated that they would want to work part-time in retirement, but factors such as concerns about inflation, a safer work environment or a more favorable employment environment could draw them back into the work force in the future. <p>Participants are:</p> <ul style="list-style-type: none"> • Sergio Avedian, Senior Contributor at the Rideshare Guy • Veena Dubal, Professor of Law, University of California, Hastings College of the Law • Paul Oyer, Professor of Economics, Stanford Business School • Alexandra Ravenelle, Assistant Professor of Sociology, University of North Carolina, Chapel Hill and author of Hustle and Gig <p>https://tinyurl.com/PanelGreatRetirement</p>
<p>Webinars and online sessions</p>	<p>8. Housing and Services Resource Center Thursday, June 9, 2022, 2:00 to 3:00 p.m. <i>Addressing Housing Accessibility through Cross-Sector Partnerships: A Closer Look at Home Modification Collaborations at Work</i> Home modifications that increase safety and support in the home environment can promote independence and community participation. Effective home modification service delivery involves professionals and funding sources from the aging, disability, housing, and health care sectors. In this Housing and Services Resource Center webinar, attendees will learn about types of partners to engage in cross-sector collaboration for expanding access to home modification. Presenters will share first-hand experiences with establishing partnerships across the housing, aging, and disability sectors, including assistive technology. They will discuss how collaboration has helped them to meet the home modification needs of people with disabilities and older adults. Resources for educating consumers and identifying home modification services and funding sources in each state will also be provided. By participating in this webinar, attendees will:</p> <ul style="list-style-type: none"> • Become familiar with the various professionals and agencies involved in home modification services and programs, funding sources, and how services are delivered; • Consider the potential partners in their states and communities that offer opportunities for collaboration; and • Explore how partnerships can augment their programs and connect the people they serve to home modifications. <p>Register for the webinar</p> <p>9. AARP Tuesday, June 21, 2022, 7:00 p.m. <i>Making Sense of Professional Care Options You Can Get at Home & Who Pays</i> Topics covered:</p> <ul style="list-style-type: none"> • How to assess the level of care needed at home and where to start your search for professional help. • Ways to pay for caregiving support: Which support options are covered by insurance? What low-cost or no-cost programs are available? <p>Registration: https://tinyurl.com/MakingSenseCareOptions</p> <p>10. AARP</p>

	<p>Tuesday, July 21, 2022, 7:00 p.m.</p> <p><i>You Got This! New Options Caregivers Are Using to Reduce Care at Home Challenges</i></p> <p>Topics covered:</p> <ul style="list-style-type: none"> • What’s possible, including at-home caregiving skills you can learn and deliver yourself. • Tools and technology to help create a safer care environment. • Options to save time, reduce stress and help cover out-of-pocket costs. <p>Registration: https://tinyurl.com/MakingSenseCareOptions</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>11. NCPR May 31, 2022 <i>Nursing homes file lawsuit seeking to overturn NY law establishing staffing minimums</i> A group of about 80 nursing homes filed a lawsuit seeking to overturn New York’s law that established staffing minimums and resident-care spending levels for nursing homes. The state law, which was approved in 2021, requires every facility to maintain daily staffing hours equal to 3.5 hours of care per resident per day by a certified nurse aide, licensed practical nurse, or registered nurse. The law also requires nursing homes to spend at least 70% of revenue on direct resident care, and at least 40% of revenue on resident-facing staffing. . . The 2021-22 state budget allocated \$64 million and the 2022-23 budget allocated \$123 million for nursing home staffing — but none of those dollars have been distributed to providers, the lawsuit claims. A statement issued by 1199 SEIU Healthcare Workers East asserted the lawsuit misrepresented many issues connected to the staffing-minimum and spending-level requirements. The union noted other states, including Massachusetts, Florida, and California, have similar measures requiring staffing minimums at nursing homes. New Jersey and Massachusetts also recently enacted requirements linked to spending on resident care, the labor group added. https://tinyurl.com/NursingHomesFileSuit</p> <p>12. Skilled Nursing News May 30, 2022 <i>Nursing Homes See Movement on Staffing Agency Reform</i> [Nursing home o]perators and the state associations that represent them have pressed lawmakers to pass legislation on the largely unregulated staffing agency industry, with the exception of a few states that have had such measures in place for decades. https://tinyurl.com/StaffingAgencyReform</p> <p>13. Skilled Nursing News May 24, 2022 <i>Nursing Home Advocacy Group Pushes Back on ‘Unattainable’ Staffing and Spending Law</i> As the nursing home workforce emergency worsens across the country, aging services organizations are pushing back on “illegal and unconstitutional” staffing laws.</p>

	<p>LeadingAge New York, for example, on Monday filed a lawsuit seeking to overturn two state mandates: one requiring a minimum staffing ratio and another which dictates where nursing homes may direct their funds. . .</p> <p>Under the staffing-minimum law, the state’s 600 nursing homes need to provide 3.5 hours of care per resident per day. Of the 3.5 hours, no less than 2.2 hours of care must be provided by a certified nursing assistant (CNA) or nurse aide. At least 1.1 hours of care must be given by a registered nurse (RN) or licensed practical nurse (LPN). . .</p> <p>Arkansas, Connecticut, Massachusetts and Rhode Island are among other states to adopt permanent increases to nursing home minimum staffing requirements after the pandemic began, according to a report from the Kaiser Family Foundation. Georgia adopted a permanent decrease to account for the staffing shortage, while Oregon and South Carolina have temporary decreases in place for the same reason. . .</p> <p>The law also stipulates that 70% of a nursing home’s revenue is to be spent on direct resident care and at least 40% spent on staffing. It also states that nursing home operators in the state are required to return all profits in excess of 5% to the state, regardless of the quality of care or whether the operator sustained losses in prior years. . .</p> <p>On a national level, more than 400,000 long-term care employees have left the workforce since the start of the pandemic, according to data from the Bureau of Labor Statistics (BLS).</p> <p>A May report from the Office of the Assistant Secretary for Planning and Evaluation (ASPE) found between December 2020 and December 2021, skilled nursing facilities lost more than 145,000 workers.</p> <p>https://tinyurl.com/UnattainableStaffing</p>
Housing	<p>14. Daily KOS May 29, 2022 <i>Three women left to die in 'sweltering' heat of apartment complex, attorney says</i> Three seniors were left to die in a Chicago apartment complex after temperatures hit about 100 degrees and property managers refused to provide air conditioning, according to attorneys for two families of the victims. . . https://tinyurl.com/SwelteringHeat</p> <p>15. Generations May 18, 2022 <i>A Shortage of Affordable Homes Is Driving the Surge in Older Adult Homelessness</i> For most low-income older adults, where they will live as they age is shaped by whether they can afford to continue to live in their homes and communities. Increasingly, what is missing is an affordable and accessible place to live. The primary reason for the sharp rise in older adults experiencing homelessness is economic—they simply can’t afford the rent. To be considered affordable, housing should cost no more than 30% of one’s income. Today, more than 3 million older adults live in households that are severely rental cost burdened, paying more than half of their incomes for housing, leaving them one unplanned medical or car repair bill away from eviction. It also means that they have less to spend on food, healthcare, and other basic needs. Data continues to show that the share of renters who face unaffordable rents increases with age. . . What has caused this dire shortage of affordable homes? The nation’s publicly subsidized housing is a vital source of stable, affordable homes for more than</p>

	<p>900,000 low-income households, of which a large majority have incomes below the poverty line and more than 70% are headed by a person of color. Yet decades of federal disinvestment in affordable housing have meant that as of 2021, there were only 37 affordable and available affordable rental homes for every 100 renters with extremely low incomes—defined as those households living at or below the poverty line, or 30% of the area median income (AMI), whichever is greater.</p> <p>Six specific actions to take to reverse trends:</p> <ol style="list-style-type: none"> 1. Expand all HUD-assisted affordable housing programs, including vouchers, public housing, the Housing Trust Fund and the Section 202 housing program targeted to low-income older adults; 2. Fully fund the federal Housing Choice Voucher program to expand access to rental assistance to all renter households who qualify, and adopt similar rental assistance programs at the state level; 3. Preserve and protect the existing federally assisted housing stock whose affordability restrictions are expiring to prevent the loss of hundreds of thousands of affordable housing units. 4. Establish stronger renter protections, including banning discrimination against voucher holders so that landlords can't arbitrarily refuse to accept a voucher for the stated rent; 5. Require a greater percentage of new and rehabilitated units be physically accessible to meet the growing needs of older adults with disabilities; and 6. Enact the SSI Restoration Act of 2021 to bring the federal benefit rate for SSI recipients up to at least the federal poverty level. <p>https://tinyurl.com/ShortageAffordableHomes</p>
Homelessness	<p>16. *New York Times April 18, 2022 <i>A Rising Tally of Lonely Deaths on the Streets</i> More than ever, it has become deadly to be homeless in America, especially for men in their 50s and 60s. An epidemic of deaths on the streets of American cities has accelerated as the homeless population has aged and the cumulative toll of living and sleeping outdoors has shortened lives. The wider availability of fentanyl, a particularly fast-acting and dangerous drug, has been a major cause of the rising death toll, but many homeless people are dying young of treatable chronic illnesses like heart disease. More than ever, it has become deadly to be homeless in America, especially for men in their 50s and 60s, who typically make up the largest cohort of despair. In many cities the number of homeless deaths doubled during the pandemic, a time when seeking medical care became more difficult, housing costs continued to rise and when public health authorities were preoccupied with combating the coronavirus. . . A study by the Los Angeles County Department of Public Health found that homeless people are 35 times as likely as the general population to die of a drug or alcohol overdose. They are also four times as likely to die of heart disease, 16 times as likely to die in a car crash, 14 times as likely to be murdered and eight times as likely to die of suicide. . . A key distinction among the homeless population today is the graying of the destitute.</p>

	<p>Margot Kushel, a doctor specializing in homeless care, has tracked the rise of the average age of homeless people in the San Francisco Bay Area from their mid-30s three decades ago to their mid-50s today.</p> <p>But even that rise in age does not tell the full story of their vulnerability, she said. Homeless people in their 50s are showing geriatric symptoms: difficulty dressing and bathing, visual and hearing problems, urinary incontinence. . .</p> <p>A quarter of the homeless people she began studying nine years ago are now dead. The median age of death was 63, well below the average U.S. life expectancy of 77.</p> <p>https://tinyurl.com/RisingTallyLonelyDeaths</p>
Assisted Living	<p>17. Commonwealth of Massachusetts <i>FY 2023 Budget</i></p> <p>The following amendment was adopted by the Senate: <i>Transparency and Accountability for Assisted Living Residences</i></p> <p>“SECTION 56A. Notwithstanding any general or special law to the contrary, there shall be an assisted living commission to study and recommend policies to ensure assisted living residences adequately meet the health and safety needs of residents. The study shall examine: (i) the current statutory and regulatory oversight of assisted living residences; (ii) assisted living best practices in other states; (iii) the benefits and disadvantages of licensing or certifying residences; (iv) marketing information communicated by residences to potential residents and families; (v) regulatory procedures for opening, closing or changing ownership of a residence including determination of need processes and clustering of facilities; (vi) trends in incident reports made to the executive office of elder affairs and the long term care ombudsman’s office and resolutions of such incidents; (vii) methods to provide transparency of information for potential consumers and family members researching and comparing residences; (viii) safety standards; (ix) existing consumer protections in statute and regulation; and (x) the provision of health care services in residences.</p> <p>The commission shall consist of: the secretary of elder affairs or a designee, who shall serve as chair; the commissioner of public health or a designee; the assistant secretary of MassHealth or a designee; the long term care ombudsman or a designee; the chairs of the joint committee on elder affairs or designees; and 8 members to be appointed by the governor, 1 of whom shall be a representative of the Massachusetts chapter of the National Academy of Elder Law Attorneys, 1 of whom shall be a representative of LeadingAge Massachusetts, Inc., 1 of whom shall be a representative of the Massachusetts Assisted Living Association, Inc., 1 of whom shall be a representative of AARP Massachusetts, 1 of whom shall be a representative of the New England chapter of the Gerontological Advanced Practice Nurses Association, 1 of whom shall be a representative of the Massachusetts chapter of the Alzheimer’s Association and 2 of whom shall be residents or family members of residents at an assisted living residence.</p> <p>The commission shall meet not less than 6 times, including at least 1 public hearing, and shall produce a report detailing recommendations, which shall be published online by the executive office of elder affairs.</p> <p>The commission shall file its report and recommendations, including proposed drafts of any necessary legislation or regulations, to the clerks of the senate and house of representatives, the joint committee on elder affairs and the house and</p>

	<p>senate committees on ways and means not more than 1 year following the effective date of this act.” https://malegislature.gov/Budget</p> <p>18. Salem News May 27, 2022 <i>Assisted living owners seek tax break for rehab</i> <i>The new owners of an assisted living facility in downtown Beverly are seeking state tax credits to renovate the building.</i> Monarch Communities and Welltower, which took over the former Oceanview assisted living facility at 3 Essex St. on Jan. 1, said the tax credits will help them restore the building in a historically appropriate way. The companies told residents last month that they must move out by July 19 so the renovation work could be done. The request for a tax break comes as residents of the facility are facing a July 19 deadline to move out of the building. Monarch Communities, the Maryland-based company that took over as the facility’s operator on Jan. 1, informed the 67 residents in April that they must move out so that the building can be renovated. The building is owned by Welltower, a real estate development company. . . Families and advocates say finding a new facility on such short notice is difficult, particularly for residents who are on government programs that pay lower rent than residents who pay privately. https://tinyurl.com/TaxBreakForRehab</p> <p>19. Health Affairs May 2022 <i>End-Of-Life Care in Assisted Living Communities: Race and Ethnicity, Dual Enrollment Status, And State Regulations</i> Assisted living communities are the final home for many of their residents, most of whom are older, frail, and cognitively or functionally impaired. Yet little is known about end-of-life care in this setting. We examined associations of both death at home and home hospice care with individual characteristics, such as race or ethnicity and dual Medicare-Medicaid enrollment; community characteristics; and the stringency of state-level assisted living regulations. Of the 100,783 fee-for-service Medicare beneficiaries residing in 16,560 assisted living communities who died in 2018–19, almost 60 percent died at home, 84 percent of them with home hospice. In predicting the likelihood of death at home, dual Medicare-Medicaid enrollment was more important than race or ethnicity; in contrast, race was a stronger predictor than dual enrollment for hospice care at death. Residents were less likely to die at home or with home hospice in states with lower regulatory stringency regarding assisted living communities. These findings may help inform efforts to ensure equitable access to desired end-of-life care in this setting and suggest an important role for state-level regulation. https://tinyurl.com/EndOfLifeAssistedLiving</p>
Behavioral Health	<p>20. *New York Times June 1, 2022 <i>Sabrina’s Parents Love Her. But the Meltdowns Are Too Much.</i> <i>Unpredictable violence, chaotic outbursts, and countless trips to the emergency room. What happens when an autistic teenager becomes unmanageable at home?</i></p>

	<p>Sabrina, who was given a diagnosis of autism coupled with a rare genetic disorder, has exhibited aggressive behavior since she was a little girl. Now she towers over her parents. When she is happy, she gives them great big hugs, knocking them slightly off balance. When she is feeling shy, she crouches behind them. When she is frustrated, she sometimes hits them.</p> <p>There have been so many 911 calls this past year that the family invited over several police officers and paramedics to meet Sabrina under more positive circumstances, when they weren't restraining her or strapping her to an ambulance stretcher. . .</p> <p>There is no widely recognizable name for the crisis that has gripped the Benedict family. But dozens of New York families with an autistic child are struggling through a version of it right now. What the children and their caregivers are going through is not new. . .</p> <p>"One of the glaring weaknesses of the system is there is no real option for families whose children fall into that category," said Christopher Treiber, an associate executive director at the InterAgency Council of Developmental Disability Agencies.</p> <p>A half-century ago, many children with autism ended up in notorious state institutions like the Willowbrook State School on Staten Island, where those with developmental disabilities were left untended in filthy wards or strapped to beds.</p> <p>https://tinyurl.com/SabrinasParentsLove</p> <p>21. U. S. Department of Health and Human Services May 6, 2022 <i>HHS Launches New Maternal Mental Health Hotline</i> The U.S. Health and Human Services Department's Health Resources and Services Administration (HRSA) announced the launch of the Maternal Mental Health Hotline, a new, confidential, toll-free hotline for expecting and new moms experiencing mental health challenges. With an initial \$3 million investment, the hotline launched on Mother's Day, May 8, 2022, with counselors available to provide mental health support. . .</p> <p>The hotline is accessible by phone or text at 1-833-9-HELP4MOMS (1-833-943-5746) in English and Spanish.</p> <p>https://tinyurl.com/MaternalMentalHealthHotline</p> <p>22. AARP Research May 2022 <i>How Older Adults Are Managing Their Emotional and Mental Well-Being</i> <i>2022 AARP Healthy Living Survey of Adults Age 50 and Older</i> Recent survey reveals older adults are poised to bounce back after the pandemic has taken its toll on their mental and emotional well-being. . .</p> <p>While most older adults say their emotional and mental health are very good, many say they have been bothered by anxiety and depression. . .</p> <p>In addition to COVID, increased anxiety among the 50-plus can be attributed to personal challenges, domestic politics, and the Russian invasion of Ukraine. . .</p> <p>While older adults have faced emotional challenges over the past few years, they are resilient and feel they have what it takes to bounce back and thrive.</p> <p>https://tinyurl.com/AARPEmotionalWellBeing</p>
Age Friendly Communities	<p>23. AARP Livable Communities May 2022 <i>Age-Friendly Salem, Massachusetts</i></p>

	<p>Salem submitted its age-friendly action plan, Salem for All Ages, in 2016.</p> <p>Actions and Achievements</p> <ul style="list-style-type: none"> • In 2020 launched the Salem Skipper, an on-demand, low-cost rideshare service operated by the city. • Passage in 2021 of an ordinance allowing accessory dwelling units (or ADUs), which are secondary living quarters that exist on the same property lot as a primary residence. • Updated the city's Americans with Disabilities Act (ADA) plan. The resulting report provided element-by-element photographs showing compliance problems and then made recommendations with cost estimates for each accessibility issue. <p>https://tinyurl.com/AgeFriendlySalem</p>
Alzheimer's / Dementia	<p>24. STAT News June 1, 2022 <i>Costly Alzheimer's treatment is spreading around the world, with virtually no science to back it up</i></p> <p>The treatment, known as “transcranial pulse stimulation,” is largely unproven, but it has exploded far beyond German borders: In just two years, around 85 clinics across Europe, Asia, the Middle East, and the United States have begun offering the therapy. Storz Medical, the Swiss-based manufacturer of the device, said at least 1,500 patients in 23 countries have undergone a total of about 10,000 treatment sessions. . .</p> <p>Yet anecdotes aren't sound evidence, and the science behind TPS is far from convincing, experts say. Studies of its efficacy are limited and their methods questionable, and there's no real understanding of how the technology acts on the brain beyond speculative theories, experts say. The treatment is also largely unregulated and expensive, costing thousands of dollars that patients have to pay out of pocket. Critics accuse clinicians adopting the technology and Storz Medical of taking advantage of families desperate for help. . .</p> <p>In a pilot study with no control group, Beisteiner reported in 2019 that after two to four weeks of TPS treatment, 35 Alzheimer's disease patients showed significant improvements on a test of memory and speaking abilities. The effects lasted at least three months. A follow-up study analyzing 17 of these patients' brain scans showed that these improvements were associated with a reduction in degeneration in brain networks implicated in Alzheimer's disease. And in a paper published this past February, the team found that these same patients' depression scores dipped after two to four weeks of TPS treatment.</p> <p>But critics say the science is still premature. . .</p> <p>Even if the risks of physical harm turn out to be negligible, experts say patients face other kinds of harm. The full treatment generally costs between \$3,000 and \$6,000, depending on the clinic, and there is currently no health insurance — public or private — that covers these costs.</p> <p>https://tinyurl.com/CostlyAlzheimersTreatment</p> <p>25. *Wall Street Journal May 22, 2022 <i>Alzheimer's Researchers Probe New Treatment Paths</i> After Aduhelm's downfall, other drugs target different drivers of poorly understood disease.</p>

	<p>The amyloid hypothesis, posited in the 1990s, proposes that amyloid-plaque formation leads to a cascade of negative effects including the accumulation of tau, inflammation, cell death and the loss of synapses, the junctions through which nerve cells known as neurons communicate with each other. . .</p> <p>But new data have poked holes in the hypothesis. A 2020 meta-analysis of 14 clinical trials involving drugs that target amyloid found the medications largely effective at clearing at least some plaque, but the drugs mostly had no or a small effect on cognition among Alzheimer’s patients.</p> <p>Two clinical trials involving Aduhelm were included in the analysis. One showed no cognitive benefit to patients, while the other suggested some benefit. Biogen halted the trials after an independent data-monitoring committee concluded the drug wasn’t helping patients. . .</p> <p>Another theory is that a dysfunctional immune response involving cells called microglia could contribute to Alzheimer’s. Microglia account for about 10% of the cells found in the brain. They remove debris, pathogens and toxic proteins including amyloid plaque. When microglia aren’t functioning properly, possibly because of a genetic mutation or other age-related factors, their ability to clear plaque diminishes. . .</p> <p>More than 140 drugs are in the pipeline as potential Alzheimer’s treatments, including drugs that target tau and microglia function, according to a survey of registered clinical trials in the U.S. Three other amyloid-targeting monoclonal antibodies, which are in the same class as Aduhelm, are in development. One, called lecanemab, was submitted this month by co-developers Biogen and Japan-based Eisai Co. to the Food and Drug Administration for potential approval.</p> <p>https://tinyurl.com/NewTreatmentPaths</p> <p>26. Massachusetts Advisory Council on Alzheimer’s Disease and All Other Dementias April 2022 <i>Annual Report</i></p> <p>This report is the Council’s second annual report. The Commonwealth has 130,000 residents diagnosed with dementia³, supported by over 340,000 family caregivers and an estimated 130,000 or more residents currently living with dementia without a formal diagnosis. The state plan includes recommendations and implementation plans around seven focus areas or “workstreams”:</p> <ol style="list-style-type: none"> 1. Caregiver Support and Public Awareness 2. Diagnosis and Services Navigation 3. Equitable Access and Care 4. Physical Infrastructure 5. Public Health Infrastructure 6. Quality of Care 7. Research <p>https://tinyurl.com/AlzheimersReportApril2022</p>
Health Care	<p>27. *Boston Globe June 1, 2022 <i>ERs reach record capacity as hospitals are inundated with patients</i></p>

	<p>Executives say patients are coming in to emergency departments because they can't access primary care or mental health care, or have seen their health deteriorate after delaying treatment for illnesses earlier in the pandemic. Hospitals are having a hard time discharging patients who should not go directly home, due to staffing shortages and longer stays at nursing homes and rehabilitation centers. And the strains on inpatient care ripple all the way to the emergency department. . .</p> <p>The tidal wave of illness comes just as COVID cases have become less of a burden for hospitals. Two-thirds of COVID patients currently in Massachusetts hospitals would have been there regardless of their infection because of other health issues. Though it has caused fewer cases of serious illness in recent weeks, COVID has complicated hospital operations. Patients with COVID still need to be isolated, and staff caring for them have to wear personal protective equipment, both of which eat up more time and resources.</p> <p>https://tinyurl.com/ERsReachRecordCapacity</p>
<p>Holyoke Soldiers' Home / Veterans Services</p>	<p>28. *Boston Globe May 30, 2022 <i>Honoring their sacrifice by caring for the living</i> Remembering those sacrifices is always the right thing to do. But it is also the easy thing to do.</p> <p>Caring for those who served and did come home — with wounds visible and invisible — caring for other veterans at the end of their days, repaying the debt this community owes to all who wore the uniform, well, that's not always so easy. That, too, requires remembering but also acting, committing energy and resources to the ongoing care and treatment of veterans in ways big and small. .</p> <p>But on this Memorial Day in one small but meaningful gesture, the Massachusetts Senate approved a measure that would make LGBTQ veterans discharged during the 17 years of the military's now-repealed "don't ask, don't tell" policy eligible for the first time for a host of state veterans benefits, like tuition waivers at state universities. Vets discharged because of the policy became eligible for federal benefits under new guidance issued by the VA this fall.</p> <p>That gets back to the ongoing inter-branch controversy over how to reform governance of the Holyoke Soldiers' Home. Competing versions of those reforms have been in conference committee since March 21. Since then, yet another report on the COVID-related deaths of 76 veterans at the home was issued, this one by state Inspector General Glenn Cunha. Cunha concluded that Governor Charlie Baker, state Health and Human Services Secretary Marylou Sudders, and the home's board of trustees failed to follow the law that outlined how the Holyoke superintendent should be hired.</p> <p>The Senate version of the bill closely follows recommendations by a special legislative commission that investigated the Holyoke tragedy, and similar ones issued by Cunha, creating a cabinet-level secretary for veterans affairs with the power to hire and fire the superintendent at Holyoke. Both the Senate and the House bills would require that the superintendent be a licensed nursing home administrator, but the House version muddies what should be a clear chain of command in the hiring process.</p> <p>https://tinyurl.com/HonoringTheirSacrifice</p> <p>29. *New York Times May 29, 2022</p>

	<p><i>A Balm for Psyches Scarred by War</i></p> <p>MDMA-assisted treatment for post-traumatic stress disorder “represents real hope for long-term healing,” health experts say.</p> <p>Mr. McCourry, a former U.S. Marine, had been crippled by post-traumatic stress disorder ever since returning from Iraq in 2004. He could not sleep, pushed away friends and family and developed a drinking problem. The numbness he felt was broken only by bouts of rage and paranoia. He was contemplating suicide when his sister heard about a novel clinical trial using the psychedelic drug MDMA, paired with therapy, to treat PTSD. Desperate, he enrolled in 2012. “I was willing to do anything,” he recalled recently. . .</p> <p>PTSD is a major public health problem worldwide and is particularly associated with war. In the United States, an estimated 13 percent of combat veterans and up to 20 to 25 percent of those deployed to Iraq and Afghanistan are diagnosed with PTSD at some point in their lives, compared with seven percent of the general population. . .</p> <p>[T]here is growing evidence that MDMA — the illegal drug known as Ecstasy or Molly — can significantly lessen or even eliminate symptoms of PTSD when the treatment is paired with talk therapy. . .</p> <p>Veterans frequently struggle with the readjustment process after returning from war, but they often do so quietly. “By and large, soldiers don’t like to reveal that they have any problems, so they tend to minimize their symptoms,” said Dr. Elspeth Cameron Ritchie, the chair of psychiatry at MedStar Washington Hospital Center and a specialist in military and veterans’ issues. “Many don’t like to talk about their feelings.”</p> <p>Some veterans, including Mr. McCourry, also experience a phenomenon called moral injury, which frequently occurs alongside PTSD and can complicate treatment. According to Dr. Robert Koffman, a psychiatrist and retired U.S. Navy captain, moral injury develops in service members who feel responsible for perpetrating or for failing to prevent an act that violates their deeply held beliefs. The result is often intense feelings of shame and guilt. . .</p> <p>For those who do not find relief through available treatments, PTSD can become chronic, debilitating and even life-threatening. On average, 17 veterans die by suicide every day, Dr. Koffman said. . .</p> <p>Trauma can result in enduring changes in genes, hormones and the brain, according to Dr. Yehuda of Mount Sinai. People with PTSD often show exaggerated levels of stress hormones, for example, and tend to have heightened activity in the amygdala, the brain region associated with processing threats and danger.</p> <p>https://tinyurl.com/BalmForPsyches</p>
Covid	<p>30. *Bloomberg June 1, 2022 <i>NYC Covid-Case Data Suggest a Plateau in Latest Infection Surge</i> New York City’s recent surge of Covid-19 appears to be easing, new city data show.</p> <p>Nearly 1,600 people tested positive for Covid-19 as of May 28, the latest date for which data is available. That day also marked the first time since May 5 that the seven-day rolling average of confirmed cases was below 3,000.</p> <p>https://tinyurl.com/NYCCovidPlateau</p> <p>31. New York Times (free access) May 31, 2022</p>

	<p><i>During the Omicron Wave, Death Rates Soared for Older People</i></p> <p>Last year, people 65 and older died from Covid at lower rates than in previous waves. But with Omicron and waning immunity, death rates rose again. Despite strong levels of vaccination among older people, Covid killed them at vastly higher rates during this winter’s Omicron wave than it did last year, preying on long delays since their last shots and the variant’s ability to skirt immune defenses.</p> <p>This winter’s wave of deaths in older people belied the Omicron variant’s relative mildness. Almost as many Americans 65 and older died in four months of the Omicron surge as did in six months of the Delta wave, even though the Delta variant, for any one person, tended to cause more severe illness.</p> <p>While overall per capita Covid death rates have fallen, older people still account for an overwhelming share of them. . .</p> <p>Nationwide Covid deaths in recent weeks have been near the lowest levels of the pandemic, below an average of 400 a day. But the mortality gap between older and younger people has grown: Middle-aged Americans, who suffered a large share of pandemic deaths last summer and fall, are now benefiting from new stores of immune protection in the population as Covid deaths once again cluster around older people. . .</p> <p>Deaths have fallen from the heights of the winter wave in part because of growing levels of immunity from past infections, experts said. For older people, there is also a grimmer reason: So many of the most fragile Americans were killed by Covid over the winter that the virus now has fewer targets in that age group. . .</p> <p>The rebalancing of Covid deaths was so pronounced that, among Americans 80 and older, overall deaths returned to pre-pandemic levels in 2021, according to a study posted online in February. The opposite was true for middle-aged Americans: Life expectancy in that group, which had already dropped more than it had among the same age range in Europe, fell even further in 2021.</p> <p>https://tinyurl.com/DeathRatesSoar</p>
Long Covid	<p>32. AARP Research</p> <p>May 2022</p> <p><i>The Long Road of Long COVID</i></p> <p>The [AARP] poll found that 66% of older adults infected with the virus had moderate to severe symptoms, and 6% were hospitalized; 6% had no symptoms. Women more than men reported severe symptoms, and there also were differences by race and ethnicity. Significantly more older Latino individuals (50%) got COVID than their white (29%) and Black (10%) counterparts, and people of multiple races (21%), according to AARP. Infection rates were higher for those ages 50–64 (34%) compared to adults 65 and over (23%).</p> <p>Three-quarters of adults over age 50 who had symptomatic COVID continued experiencing effects after the typical one to two week period, at least to a small extent. Most common were fatigue, cough, and cognitive problems such as brain fog. Most adults (60%) did not see a physician to address their ongoing COVID-related symptoms.</p> <p>https://tinyurl.com/AARPLongCovidRoad</p>
	*May require registration before accessing article.
Dignity Alliance Massachusetts Legislative Endorsements	Information about the legislative bills which have been endorsed by Dignity Alliance Massachusetts, including the text of the bills, can be viewed at: https://tinyurl.com/DignityLegislativeEndorsements

	Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at rmoore8473@charter.net .
Websites	Housing and Services Resource Center The Housing and Services Resource Center provides housing resources and homelessness services, behavioral and mental health services, independent living services and other supportive services, and others who are working to help people live successfully and stably in the community. The goal is to foster collaboration and cross-sector partnerships.
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	Commonwealth of Massachusetts 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 results of the debate in the Senate and outcome of proposed amendments can be viewed at: https://malegislature.gov/Budget/FY2023/SenateDebate The following amendment was adopted by the Senate: <i>Transparency and Accountability for Assisted Living Residences</i> “SECTION 56A. Notwithstanding any general or special law to the contrary, there shall be an assisted living commission to study and recommend policies to ensure assisted living residences adequately meet the health and safety needs of residents. The study shall examine: (i) the current statutory and regulatory oversight of assisted living residences; (ii) assisted living best practices in other states; (iii) the benefits and disadvantages of licensing or certifying residences; (iv) marketing information communicated by residences to potential residents and families; (v) regulatory procedures for opening, closing or changing ownership of a residence including determination of need processes and clustering of facilities; (vi) trends in incident reports made to the executive office of elder affairs and the long term care ombudsman’s office and resolutions of such incidents; (vii) methods to provide transparency of information for potential consumers and family members researching and comparing residences; (viii) safety standards; (ix) existing consumer protections in statute and regulation; and (x) the provision of health care services in residences. The commission shall consist of: the secretary of elder affairs or a designee, who shall serve as chair; the commissioner of public health or a designee; the assistant secretary of MassHealth or a designee; the long term care ombudsman or a designee; the chairs of the joint committee on elder affairs or designees; and 8 members to be appointed by the governor, 1 of whom shall be a representative of the Massachusetts chapter of the National Academy of Elder Law Attorneys, 1 of whom shall be a representative of LeadingAge Massachusetts, Inc., 1 of whom shall be a representative of the

	<p>Massachusetts Assisted Living Association, Inc., 1 of whom shall be a representative of AARP Massachusetts, 1 of whom shall be a representative of the New England chapter of the Gerontological Advanced Practice Nurses Association, 1 of whom shall be a representative of the Massachusetts chapter of the Alzheimer’s Association and 2 of whom shall be residents or family members of residents at an assisted living residence.</p> <p>The commission shall meet not less than 6 times, including at least 1 public hearing, and shall produce a report detailing recommendations, which shall be published online by the executive office of elder affairs.</p> <p>The commission shall file its report and recommendations, including proposed drafts of any necessary legislation or regulations, to the clerks of the senate and house of representatives, the joint committee on elder affairs and the house and senate committees on ways and means not more than 1 year following the effective date of this act.”.</p> <p>The Senate budget included \$75 million in funding for nursing homes of which \$56.25 million would go for an add-on for direct care staffing costs, \$18.75 million for supplemental payments for quality improvement, and \$10 million in funding for rest home rate increases as well as language setting the asset limit at \$2,000 for eligibility for EAEDC for rest home residents, fixing a change that had been made in the FY22 budget that had eliminated the asset limit.</p> <p>On May 26, 2022, the budget was passed by the Senate to be engrossed. It is now numbered H4701.</p> <p>The budget will now be considered by a Conference Committee consisting of three Senators and three Representatives.</p> <p>https://malegislature.gov/Budget</p>
<p>Nursing homes with admission freezes</p>	<p>Massachusetts Department of Public Health</p> <p><i>Temporary admissions freeze</i></p> <p>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:</p> <ul style="list-style-type: none"> • 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 <p>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</p>

needed when the Department of Public of Health determines a facility can be removed from the list.

Updated on May 27, 2022

Name of Facility	City/Town	Date of Freeze	Qualifying Factor
Caldwell Home Extended Care	Fitchburg	2/9/22	Noncompliance Testing
Lanessa Extended Care	Webster	4/20/22	Inadequate staffing
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

Centers for Medicare and Medicaid Services

List of Special Focus Facilities and Candidates

<https://tinyurl.com/SpecialFocusFacilityProgram>

Updated May 25, 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.

What can advocates do with this information?

- 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.

Massachusetts facilities listed (updated April 27, 2022)

Newly added to the listing

- None

Massachusetts facilities not improved

- Marlborough Hills Rehabilitation and Health Care Center, Marlborough

	<p>https://tinyurl.com/MarlboroughHills</p> <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"> • 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 • Plymouth Rehabilitation and Health Care Center (added in May) https://plymouthrehab.com/ • Revolution Charwell https://tinyurl.com/RevolutionCharwell • Tremont Health Care Center, Wareham (added in May) https://thetremontrehabcare.com/ • 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 <p>https://tinyurl.com/SpecialFocusFacilityProgram</p>																				
<p><i>Nursing Home Inspect</i></p>	<p>ProPublica</p> <p><i>Nursing Home Inspect</i></p> <p>Data updated November 2021</p> <p>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="1"> <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
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Nursing Home Compare	<p>Centers for Medicare and Medicaid Services (CMS) <i>Nursing Home Compare Website</i> 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.</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 		
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 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>		
Participation opportunities with Dignity Alliance Massachusetts	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

<p>Most workgroups meet bi-weekly via Zoom.</p> <p>Please contact workgroup lead for more information</p>	<p>Samantha VanSchoick Lachlan Forrow</p> <p>Facilities (Nursing homes, rest homes, assisted living)</p> <p>Home and Community Based Services</p> <p>Housing</p> <p>Legislative</p> <p>Legal Issues</p> <p>Veteran Services</p>	<p>Arlene Germain</p> <p>Meg Coffin</p> <p>Shaya French</p> <p>Richard Moore</p> <p>Clarence Richardson</p> <p>James Lomastro</p>	<p>svanschoick@cil.org</p> <p>lforrow@bidmc.harvard.edu</p> <p>agermain@manhr.org</p> <p>mcoffin@centerlw.org</p> <p>sfrench@bostoncil.org</p> <p>rmoore8743@charter.net</p> <p>Clarence@massnaela.com</p> <p>jimlomastro@comcast.net</p>
<p><i>The Dignity Digest</i></p>	<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>		
<p>Note of thanks</p>	<p>Thanks to the contributors to this issue of <i>The Dignity Digest</i></p> <ul style="list-style-type: none"> • Frank Baskin • Candy Kuebel • Dick Moore <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>.</p> <p><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.</i></p> <p><i>Previous issues of The Tuesday Digest and The Dignity Digest are available at: https://dignityalliancema.org/dignity-digest/</i></p> <p><i>For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.</i></p>			