



The Dignity Digest

Issue # 99

July 25, 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.

Spotlight:

The Shape of Care, a podcast that explores the world of caregiving



The Shape of Care is a podcast series about caregiving created and hosted by Boston-based sociologist Mindy Fried, MSW, PhD.

The second series, consisting of four episodes, has just been released.

- Episode 1: “From fear to love: An evangelical Christian and a Muslim home care worker”
- Episode 2: “Making a difference: From care work to home care activism”
- Episode 3: “Nursing assistants: the heart and soul of nursing care”
- Episode 4: “She called me her three c’s: compassion, caring and comfort”

The Shape of Care podcast aims to link personal stories to broader sociological and policy issues including:

- The nature of relationships between care workers and the people they care for, whether in a home or in an institution;
- The quality of care – or lack thereof – in nursing homes;
- Current financing of our long-term care system (via Medicaid);
- The low wage, gendered and racialized care workforce;
- The lack of comprehensive long term care policies in the U.S.; and
- The type of care we want for our loved ones as they decline.

Access the series via [the Apple link](#) or www.theshapeofcare.org.

Also see the [discussion guide for The Shape of Care podcast](#).

“The Shape of Care” illuminates the costs, financial and otherwise, of hiring (caregivers), the toll on the caregivers, and the need for a rethinking

	<p><i>of a widening hole in the infrastructure of American health care. – Phoebe Lett, The New York Times.</i></p>
<p>Spotlight: <i>An Act relative to supported decision-making agreements for certain adults with disabilities (S.2848, H.4725)</i></p>	<p><u>Take Action:</u></p> <p>Dignity Alliance Massachusetts has endorsed An Act relative to supported decision-making agreements for certain adults with disabilities (S.2848, H.4725) https://malegislature.gov/Bills/192/S2848 https://malegislature.gov/Bills/192/H4725</p> <p>Momentum has been building around this proposed legislation. There are many disability advocacy and legal services organizations promoting this bill. There is a real opportunity to get passage before the end of the session on July 31.</p> <p><u>What needs to be done:</u></p> <p>Contact your state senator and state representative. Ask them to contact the respective Chairs of the Senate or House Ways and Means Committee and ask that the Supported Decision-Making Bill (S.2848/H.4725) moved for action. The link to find legislators and their contact information: https://malegislature.gov/search/findmylegislator <u><i>Even if you have previously made contact regarding this bill, reinforce it with another call or email.</i></u></p> <p>There are hundreds of bills waiting for further action before the end of this session. Only a handful will be enacted. Please help make Supported Decision Making one of them.</p>
<p>Quotes of the Week</p>	<p><i>“I think we’re still looking for a collective sort of wisdom to bring to this question. There are lots of different symptoms and we haven’t done a very good job of figuring out the vast majority of those. What hasn’t worked so far, at least not in ways that I’ve seen it, is describing a syndrome, or</i></p>

coming up with a list of criteria for a syndrome, which is how we ordinarily approach new diseases. This entity represents actually a lot of distinct entities. There's no one long Covid."

Eric Rubin, an immunologist at Harvard Medical School and editor of the New England Journal of Medicine, *'There's no one long Covid': Experts struggle to make sense of the continuing mystery*, **STAT News**, July 22, 2022, <https://tinyurl.com/NoOneLongCovid>

"We all wondered, what's the magic stuff in the blood?"

Lee Rubin, a professor of stem cell and regenerative medicine at Harvard and the co-director of the neuroscience program at the Stem Cell Institute, *Can a 'Magic' Protein Slow the Aging Process?*, ***New York Times**, July 19, 2022, <https://tinyurl.com/MagicProtein>

"By targeting fundamental mechanisms of aging, we have the opportunity to treat or prevent multiple aging-related diseases and extend the health span. We want to make 100 the new 50."

Dr. Mark Allen, the chief executive of [Elevian](#), a pharmaceutical start-up, *Can a 'Magic' Protein Slow the Aging Process?*, ***New York Times**, July 19, 2022, <https://tinyurl.com/MagicProtein>

"I think it's concerning because ... it can spread if there are unvaccinated communities, it can cause a polio outbreak."

Walter Orenstein, a polio expert at Emory University, *N.Y. state detects polio case, first in the U.S. since 2013*, **STAT News**, July 21, 2022, <https://tinyurl.com/NYDetectsPolio>

"We've been asked to do way too much for too many years and then we have the nurses that went through Covid. I've got nurses that have only been RNs for two years and they're leaving."

Maria Peppers, a licensed practical nurse who helps nurses find remote opportunities, *As health care faces nursing shortages, burned-out nurses are flocking to remote jobs*, ***STAT+**, July 21, 2022, <https://tinyurl.com/BurnedOutNurses>

He's hoping his own experience as a musician — and a movie about that — can help show that people with disabilities don't have to be defined by them.

Disability rock star: Bringing his cause to film, **Daily Hampshire Gazette**, July 23, 2022, <https://tinyurl.com/DisabilityRockStar>

“988 is more than a number, it is a message: we’re there for you. Through this and other actions, we are treating mental health as a priority and putting crisis care in reach for more Americans.”

U. S. Department of Health and Human Services, Secretary Xavier Becerra, *U.S. Transition to 988 Suicide & Crisis Lifeline Begins Saturday*, **U. S. Department of Health and Human Services**, July 15, 2022, <https://tinyurl.com/TransitionTo988>

The United States had one death by suicide every 11 minutes in 2020, according to the Centers for Disease Control and Prevention. Suicide was the second leading cause of death for young people aged 10-14 and 25-34. From April 2020 to 2021, more than 100,000 people died from drug overdoses.

U.S. Transition to 988 Suicide & Crisis Lifeline Begins Saturday, **U. S. Department of Health and Human Services**, July 15, 2022, <https://tinyurl.com/TransitionTo988>

Our overarching goal is to make equitable, high-quality, affordable, data-informed care for mental health and substance use challenges available to the people we serve, building on the system’s evolution towards value-focused care.

Strengthening Behavioral Healthcare to Meet the Needs of Our Nation, **Health Affairs Forefront**, May 31, 2022, <https://tinyurl.com/StrengtheningBehavioralHealth>

“So (BA.5) is sort of maximized to evade immunity and those viruses were transmitting much, much more efficiently than previous variants. It’s sort of reaching a pinnacle in terms of not only being able to transmit but also to evade immune responses that are present in the population, and that’s why people are really looking at this carefully and following the surge of cases.”

	<p>Andy Pekosz, a virologist at the Johns Hopkins Bloomberg School of Public Health, <i>5 Reasons to Beware the BA.5 Omicron Subvariant</i>, AARP, July 23, 2022, https://tinyurl.com/BewareBA5</p> <p><i>“It’s a chronic issue. We have both a (housing) market failure and a government failure.”</i></p> <p>Sam Khater, Freddie Mac’s chief economist, <i>We Need to Keep Building Houses, Even if No One Wants to Buy</i>, New York Times (free access), July 24, 2022, https://tinyurl.com/NeedToKeepBuildingHouses</p> <p><i>“If government gets in the business of providing housing, we can be that countercyclical supply.”</i></p> <p>Alex Lee, Democrat of San Jose and member of California’s State Assembly, <i>We Need to Keep Building Houses, Even if No One Wants to Buy</i>, New York Times (free access), July 24, 2022, https://tinyurl.com/NeedToKeepBuildingHouses</p> <p><i>(U)nless the government builds new housing itself or creates incentives for builders . . . to keep at it when it doesn’t make sense, the housing shortage is destined to compound each time the economic winds blow against the building industry.</i></p> <p><i>The precise solution is politics, but there’s little mystery what the problem is. America doesn’t have enough housing, and someone has to build it, in bad times as well as good.</i></p> <p><i>We Need to Keep Building Houses, Even if No One Wants to Buy</i>, New York Times (free access), July 24, 2022, https://tinyurl.com/NeedToKeepBuildingHouses</p> <p><i>“He said good people did nothing, whether a friend or a country. He said if you see someone bullied, stick up for them. Do something.”</i></p> <p>David Reich, son of Auschwitz survivor Werner Reich, <i>Werner Reich, Who Learned Magic in Auschwitz, Dies at 94</i>, *New York Times, July 21, 2022, https://tinyurl.com/LearnedMagicInAuschwitz</p>
Dignity Votes 2022	<p>Candidates for State Auditor: questionnaires and interviews</p> <p>Candidates for constitutional office have been invited to participate in individual interviews with a panel of Dignity Alliance Massachusetts members as well as to respond in writing to a set of questions pertinent to the office sought. Candidates for the office of state auditor were the first to be invited. The candidates are:</p>

- Arthur Amore (R)
- Chris Dempsey (D)
- Diana DiZoglio (D)

They were interviewed by a panel consisting of

- Richard Moore, former Massachusetts Senate President Pro Tempore and Senate Chair, Joint Health Care Finance Committee
- Arlene Germain, Executive Director, Massachusetts Advocates for Nursing Home Reform
- Sandy Alissa Novack, MBA, MSW

Charles Carr, former Commissioner of the Massachusetts Rehabilitation Commission, served as moderator.

The recorded Interviews and the written responses to the questionnaire can be found at: <https://dignityalliancema.org/2022/06/27/state-auditor-q-and-a/>

Candidates for Governor, Lieutenant Governor, Attorney General, and Secretary State

Questionnaires for these offices are in the process of being prepared and will be distributed in July. Invitations for an interview with a panel of Dignity Alliance Massachusetts will be extended.

Congressional office candidates

Questionnaires for congressional candidates are in the process of being prepared and will be distributed in July.

State legislative candidates

Questionnaires for selective legislative office candidates are in the process of being prepared and will be distributed in July and August.

Fact Sheets and Issue Briefs

Prepared by Dignity Alliance Massachusetts Workgroups

Nursing Homes

- [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](#)

Home and Community Based Services

- [HCBS Fact Sheet](#)
- [HCBS Staffing Issues](#)
- [HCBS Care Coordination Issues](#)

Behavioral Health

- [Behavioral Health Fact Sheet](#)
- [BH Elder Mental Health Outreach Teams \(EMHOT\) Issues](#)
- [BH Nursing Homes and Psychotropic/Antipsychotic Drugs Issues](#)
- [Social Work Staffing Issues](#)

Housing

- [Housing Issues](#)

Veterans

- [Veterans Issues](#)

<https://dignityalliancema.org/2022-facts-and-issues/>

State Election Information

	<p>The following websites contain useful, timely information about this year’s elections. (Source: <i>AARP Bulletin</i> July / August 2022)</p> <ul style="list-style-type: none"> • <i>AARP Voter Guides</i> Information about the voting process from registration to Election Day voting locations and hours. www.aarp.org/electionguides • <i>Ballotpedia</i> Information about statewide races and ballot measures. www.ballotpedia.org • <i>OpenSecrets</i> Tracks flow of money within the electoral process. www.opensecrets.org • <i>Vote411</i> Election year information provided by the League of Women Voters. www.vote411.org • <i>Vote Smart</i> On demand detailed information about individual candidates www.votesmart.org
Lives Well Lived	<ol style="list-style-type: none"> 1. Sunday Today (webcast) July 24, 2022 <i>Muriel Engelman, hero and front-line nurse in WWII, dies at 101</i> Muriel Engelman, formerly Phillips, was a front-line nurse in World War II and completed her service in the army with the rank of second lieutenant. In 2018, Engelman was awarded the French Legion of Honor, the highest order of merit by the nation she helped to free from the grip of the Nazis. Sunday TODAY’s Willie Geist remembers a life well lived. https://tinyurl.com/MurielEngelman 2. *New York Times July 21, 2022 <i>Werner Reich, Who Learned Magic in Auschwitz, Dies at 94</i> He was 16 when a fellow inmate, a magician, taught him a card trick in the barracks of the extermination camp. He called it a “miracle.” In the Auschwitz barracks where starving, emaciated, dying men were crammed six to a bed, Werner Reich’s closest neighbor was a gentlemanly German Jewish man in his 30s named Herbert Levin, who had been known before World War II as Nivelli the magician. . . Mr. Levin explained the trick, and Mr. Reich replayed the instructions in his mind for the rest of his time at Auschwitz — a distraction that helped him survive its horrors — and then through a 35-mile death march in snow and ice on the way to the Mauthausen concentration camp in Austria. Only after he was liberated and found his way to England several years later did he buy a deck of cards and perform the magic on his own. . . Mr. Reich never forgot Mr. Levin (who had taught him the card trick), nor the gift of a simple card trick that provided a frightened boy with a momentary escape and a touch of humanity. “It isn’t the value or the size of a gift that truly matters,” Mr. Reich said in the TEDx Talk. “It’s how you hold it in your heart.” https://tinyurl.com/LearnedMagicInAuschwitz
Reports	<ol style="list-style-type: none"> 3. National Adult Protective Services Association March 2018

	<p><i>Adult Protective Services Abuse Registry National Report</i></p> <p>This report presents the findings of a multi-state study, undertaken from January 2016 to February 2018, to identify key features of state adult protective services (“APS”) abuse registries in the United States. . .</p> <p>The project focused on state registries that fit the definition: “a system for maintaining the identity of individuals who are found, only as a result of an APS investigation, to have abused, neglected, or exploited seniors or adults (18 and older) with disabilities living in the community or in a facility. The purpose of such a registry is to make this information available to individuals, agencies or employers who are authorized to receive such information.”. .</p> <p>Themes arising from the information collected in this study include but are not limited to:</p> <ul style="list-style-type: none"> • Reducing access of abusers to vulnerable adults and improving hiring practices of providers through the implementation of APS abuse registries; • Significant diversity in operations and uses of APS abuse registries; • Common components of APS abuse registries include perpetrator notification and the existence of due process provisions; • Inadequate resources to operate APS abuse registries; • Length of time and administrative challenges of due process and information systems; • Tension between APS abuse registry roles in protecting vulnerable adults and punishing abusers; and • Dissatisfaction with the scope of offenders included in the APS abuse registry. <p>https://tinyurl.com/AbuseRegistry</p>
<p>Resident Rights Month: October 2022</p>	<p>4. National Consumer Voice for Quality Long-Term Care <i>Residents' Rights Month (October 1 through 31, 2022)</i></p> <p>October is Residents’ Rights Month, an annual event designated by Consumer Voice to honor residents living in all long-term care facilities and those receiving care in their home or community. It is an opportunity to focus on and celebrate the dignity and rights of every individual receiving long-term services and supports.</p> <p>Being a part of a community is essential to our well-being. Throughout the pandemic, residents of long-term care facilities were disconnected from the resident and staff communities within their facilities when activities and group dining were limited. Residents were disconnected from the broader local community when visitation was restricted, and many residents were unable to leave their facilities to participate in outside activities. This year's Residents’ Rights Month theme - Inspiring Unity within Our Community - emphasizes the importance of fostering meaningful community within the facility and encouraging residents’ connection to their local community.</p> <p>Promotional Materials Resident's Voice Challenge Activity Suggestions https://theconsumervoice.org/events/2022-residents-rights-month</p>
<p>Webinars and online sessions</p>	<p>5. New York City Gray Panthers: Transformation Tuesday Tuesday, July 216, 2022, 2:00 to 3:00 p.m. <i>Beyond Medicaid: New Models to Pay for Long Term Care</i> Panelists:</p>

- Wendy Goidel, Founder and Managing Member of Goidel Law Group PLLC and its Estate Planning & Elder Law Center
- Allison Cook, Founder of Better Aging and Policy Consulting and Chief Strategist for EmergingAging NYC
- Ben Veghte, Director of the WA Cares Fund in the Washington State Department of Social and Health Services

Register: <https://bit.ly/3o2P4mC>

6. Theater of War Productions

Wednesday, July 27, 2022

6:00 to 8:00 p.m.

Women of Trachis

Theater of War Productions will present scenes from Sophocles' *Women of Trachis* on Zoom, featuring professional actors and a chorus of hospice and palliative care nurses and home health aides, to help frame a powerful conversation about the challenges and opportunities of witnessing suffering and death and of caring for patients at the end of their lives.

This special event, hosted by the Northern New Jersey Hospice and Palliative Care Nurses Association and Samaritan Life Enhancing Care— is the fifth installment of [The Nurse Antigone](#) series, which presents dramatic readings from ancient Greek plays as a catalyst for guided discussions about the past, present, and future of nursing. Using Sophocles' ancient play about the death of the great hero Heracles to create a vocabulary for talking about death and dying, the project aims to generate compassion, awareness, connection, and much-needed healing, while celebrating and advocating for palliative care and hospice nurses at this critical time.

Sophocles' *Women of Trachis* tells the story of Heracles—the strongest of all Greek heroes—who has been unintentionally poisoned by his wife, Deineira, after she discovers that he has fallen in love with a younger woman. In an attempt to win back her husband's affection, she mistakes a lethal toxin, which was given to her by a dying centaur years ago, for a love potion. Deineira sends Heracles a robe dipped in the liquid. When Heracles puts on the robe it immediately eats through his skin, muscle tissue, down through his bones to the marrow. Heracles falls to the ground, clutching his sides, crying out in pain, calling for his teenage son, Hyllus, to come to his aid and to help him put an end to the seemingly endless waves of pain.

<https://tinyurl.com/WomenOfTrachis>

7. Joint Public Meeting of the National Advisory Committees on Seniors and Disasters (NACSD) and on Individuals with Disabilities and Disasters (NACIDD)

Thursday, August 4, 2022, 2:00 to 4:00 p.m.

Join NACSD and NACIDD members, distinguished guests, federal leaders, and subject matter experts as the two committees (convened by ASPR) provide a status update on their work since March on national public health and medical preparedness, response, and recovery, specific to the needs of older adults and people with disabilities in disasters.

The agenda includes time to hear from the public. The floor will be open to hear as many relevant comments as possible. **Please send your request to present before the committee by Friday, July 29**, to NACSD@hhs.gov and NACIDD@hhs.gov and include the name of the speaker, organization, and a full explanation of the intended comments.

	<p>Meeting materials will be made available to the public on the NACSD and NACIDD event pages. Register for the meeting</p>
Previously posted webinars and online sessions	<p>Previously posted webinars and online sessions can be viewed at: https://dignityalliancema.org/webinars-and-online-sessions/</p>
Assisted Living	<p>8. Rebusiness Online June 2, 2022 <i>Blueprint Negotiates Sale of 86-Unit Senior Living Campus in Brockton, Massachusetts</i> Blueprint Healthcare Real Estate Advisors has negotiated the sale of Connemara Senior Living, an 86-unit independent living, assisted living and memory care community located in the southern Boston suburb of Brockton. The community was originally built in 1990. Elevation Financial Group https://elevationfinancialgroup.com/, an Orlando, FL based real estate investment company, acquired the property and plans to convert it to an affordable seniors housing complex. The seller and price were not disclosed. https://tinyurl.com/VonnemaraBrockton</p>
Behavioral Health	<p>9. Health Affairs Podcast July 22, 2022 <i>The 988 Lifeline, Mental Health, and More</i> Listen to Health Affairs' Kathleen Haddad and Ellen Bayer discuss the new hotline and mental health initiatives in the Bipartisan Safer Communities Act. https://tinyurl.com/998Podcast</p> <p>10. New York Times (free access) (podcast) July 22, 2022 <i>A Top Mental Health Expert on Where America Went Wrong</i> There's a paradox that sits at the center of our mental health conversation in America. On the one hand, our treatments for mental illness have gotten better and better in recent decades. Psychopharmaceuticals have improved considerably; new, more effective methods of psychotherapy have been developed; and we've reached a better understanding of what kinds of social support are most helpful for those experiencing mental health crises. But at the same time, mental health outcomes have moved in exactly the wrong direction. In the United States, there is a death by suicide about every 11 minutes, and about half of those who die by that method have not received mental health care. Rates of anxiety, depression and eating disorders have skyrocketed among young people in recent years. From 2009 to 2015, rates of emergency room visits for self-harm more than doubled for girls ages 10 to 14. In this conversation, we discuss why our current medical system is so inadequate at helping people with mental illnesses of all stripes, why psychiatric research and patient outcomes are so wildly out of step, the story of how the U.S. government systematically divested from mental health care in the 1980s, and the fragmented system of care that those decisions created. We also touch on why it's so difficult to find the right therapist; which treatments we know work really well — and why we so often fail to implement them; why mental health is not just a medical problem, but also an economic and social one; what public policy can, and importantly can't, do to solve our mental health crisis; the relationship between loneliness and mental illness; how the loosening of family and social ties is impacting our collective mental health and more. https://tinyurl.com/MentalHealthWentWrong</p>

	<p>11. U. S. Department of Health and Human Services July 15, 2022 <i>U.S. Transition to 988 Suicide & Crisis Lifeline Begins Saturday</i> On Saturday (July 16, 2022), the United States will transition the 10-digit National Suicide Prevention Lifeline to 988 – an easy-to-remember three-digit number for 24/7 crisis care. The lifeline, which also links to the Veterans Crisis Line, follows a three-year joint effort by the U.S. Department of Health and Human Services (HHS), Federal Communications Commission (FCC), and the U.S. Department of Veterans Affairs (VA) to put crisis care more in reach for people in need.</p> <p>The National Suicide Hotline Designation Act, signed into law after the passage of bipartisan legislation in 2020, authorized 988 as a new three-digit number for suicide and mental health crisis. All telephone service and text providers in the United States and the five major U.S. territories are required by the FCC to activate 988 no later than July 16. https://tinyurl.com/TransitionTo988</p> <p>12. Health Affairs Forefront May 31, 2022 <i>Strengthening Behavioral Healthcare to Meet the Needs of Our Nation</i> During the COVID-19 crisis, the number of adults reporting adverse behavioral health conditions has increased sharply, with higher rates of depression, substance use, and self-reported suicidal thoughts. Communities of color, children, and older adults have all experienced disproportionate harm, and many have also forgone needed behavioral health care. It is critical that we improve access to behavioral health care, and CMS is taking action to ensure that people with Medicaid and CHIP, Medicare, and Marketplace coverage can get the care they need, when they need it. . .</p> <p>In Medicare, following Congressional action, CMS in the final 2022 Physician Fee Schedule permanently extended access to telehealth—originally a flexibility made available during the pandemic—by allowing people to access telehealth services for the diagnosis, evaluation, and treatment of behavioral health conditions. . .</p> <p>CMS is encouraging states to advance coverage of behavioral health care as part of the Affordable Care Act’s (ACA) Essential Health Benefits (EHBs). The ACA requires most health plans in the individual and small group markets to provide coverage in ten categories of EHBs, including mental health and substance use disorder treatment. . .</p> <p>CMS is working to strengthen the integration of behavioral health with primary care, which can further improve access for many of the people we serve. Our goal is to utilize investments and policies to make routine the provision of behavioral health care in the primary care setting (including pediatric primary care), building on the Collaborative Care Model and general behavioral health integration payment codes. . .</p> <p>The CMS Innovation Center has tested multiple models and demonstrations that have included a focus on behavioral health, with particular emphasis on integration of physical and behavioral health care services; a notable example is the Comprehensive Primary Care Plus (CPC+) Initiative, a primary care model that has required behavioral health integration. https://tinyurl.com/StrengtheningBehavioralHealth</p>
Housing	13. New York Times (free access)

	<p>July 24, 2022</p> <p><i>We Need to Keep Building Houses, Even if No One Wants to Buy</i></p> <p>Right now, builders have too many homes and not enough people to sell them to. In the long term, the United States has the opposite problem: Not enough houses for all the people who want them. . .</p> <p>The United States has a deep, decades-old housing shortage. Also, at the moment, homebuilders across the country are pulling back on development because they can't sell enough homes.</p> <p>How can both of these things be true? That riddle is at the heart of the boom-bust nature of housing, where an excess of regulation and the mixed incentives of the market mean there is never a supply that lines up with demand. One way or the other, solving it will require more building during downturns, and, most likely, some sort of public program to subsidize it. . .</p> <p>The problem facing Hayden and other builders is simple: Sales of new homes are falling — down 15 percent this spring from a year earlier — at the same time that a wave of homes, begun before the jump in interest rates, are hitting the market. The number of homes that have been completed but not yet sold hit a 15-month high in May. Redfin, the real estate brokerage, recently reported that buyers are trying to back out of sales agreements at the fastest pace since the early weeks of the pandemic.</p> <p>“Demand has slowed enough that builders are finding themselves with homes and no buyers for them,” said Ali Wolf, chief economist with Zonda, a housing data and consulting firm. “That is a problem we haven’t faced in years.”. .</p> <p>If the slowdown continues for more than a few months, as many economists predict, the next step will be to cut back on future land development. The likely effect of this would be that when housing gets going again, builders will remain behind. So, families will once again be clamoring for homes, getting one will once again depend on winning a lottery — and the housing shortage will continue to crush family finances and make it harder to build wealth. . .</p> <p>Last year, Freddie Mac estimated the nation’s housing supply deficit at 3.8 million units, up from 2.5 million in 2018. Other analysts come up with different figures, but pretty much everyone agrees that the country hasn’t been building nearly enough homes to keep up with demand, especially for middle and lower-income families. The failure to build those units is the single biggest contributor to the affordability crisis that in recent years has spread from a few coastal cities to a much larger swath of the country. . .</p> <p>The housing market has responded so quickly to the Fed’s actions because it is built on debt, making it ultrasensitive to interest rates. Builders borrow money to build new homes, then sell them to buyers who, for the most part, borrow 80 percent or more of the home’s cost. When banks pull back on credit by raising monthly borrowing costs, it causes buyers and builders to retreat for different versions of the same reason, which is the fear they will be left with property they can no longer afford and might be worth less than they paid for it to boot.</p> <p>https://tinyurl.com/NeedToKeepBuildingHouses</p>
Veteran Services	<p>14. Sunday Today (webcast)</p> <p>July 24, 2022</p> <p><i>Muriel Engelman, hero and front-line nurse in WWII, dies at 101</i></p> <p>Muriel Engelman, formerly Phillips, was a front-line nurse in World War II and completed her service in the army with the rank of second lieutenant. In 2018, Engelman was awarded the French Legion of Honor, the highest order of merit</p>

	<p>by the nation she helped to free from the grip of the Nazis. Sunday TODAY's Willie Geist remembers a life well lived. https://tinyurl.com/MurielEngelman</p> <p>15. U. S. Department of Health and Human Services July 15, 2022 <i>U.S. Transition to 988 Suicide & Crisis Lifeline Begins Saturday</i> VA administers the Veterans Crisis Line through the Lifeline's national network. Because of VA's partnership with the Lifeline, the Veterans Crisis Line is affected by this transition to a new number. Veterans and their loved ones can now Dial 988 then Press 1 to reach the Veterans Crisis Line. "988 has been a long time coming and will serve as a critical resource during a crisis when every second counts. The new, shorter number will help ensure Veterans have easier access to the Veterans Crisis Line," said VA Secretary Denis McDonough. https://tinyurl.com/TransitionTo988</p>
Caregivers	<p>16. *STAT+ July 21, 2022 <i>As health care faces nursing shortages, burned-out nurses are flocking to remote jobs</i> Burned out and fed up with their work conditions, nurses are stepping away from the bedside in droves, leaving empty positions and for-hire signs lingering in hospitals and clinics around the country. Some of those nurses are now hunting for remote roles, which have grown more popular as telehealth has taken off. It's a hot job market: Care Medical, the practice powering Amazon's virtual-first medical platform Amazon Care, has offered \$15,000 sign-on bonuses for "mobile telehealth registered nurses." While hiring is expanding for many long-established remote nursing roles, two newer job titles are growing especially rapidly. One is chronic care management, with both individual practices and companies like CareHarmony hiring nurses to identify resources and coordinate care for patients with diabetes and other chronic conditions. And companies like Circadia Health, which sells technology to support remote patient monitoring, are hiring nurses to keep tabs on changes in patient condition captured by sensors for so-called hospital at home programs. https://tinyurl.com/BurnedOutNurses</p>
Covid	<p>17. AARP July 23, 2022 <i>5 Reasons to Beware the BA.5 Omicron Subvariant</i></p> <ul style="list-style-type: none"> • BA.5 is "maximized to evade immunity." • It's very contagious. • Symptoms still send some to the hospital. • Most Americans are under-vaccinated. • Reinfections come with risks. <p>https://tinyurl.com/BewareBA5</p> <p>18. STAT News July 22, 2022 <i>As new variant spreads, a crucial drug to protect the most vulnerable goes vastly underused</i> (E)ight months after the Food and Drug Administration first authorized Evusheld, a drug to protect patients whose immune system can't make enough antibodies, only a tiny fraction of the roughly 7 million patients who might be eligible have</p>

	<p>received it. Hundreds of thousands of doses sit on shelves in hospitals and infusion centers across the country, even as a new coronavirus variant rips through the population. . .</p> <p>Transplant and cancer patients who have heard of the therapy sometimes see doctors who don't know what it is and won't prescribe it. Doctors who treat transplant and cancer patients say they see patients who don't know it's an option.</p> <p>https://tinyurl.com/CrucialDrugUnderused</p>
<p>Long Covid</p>	<p>19. STAT News July 22, 2022 <i>'There's no one long Covid': Experts struggle to make sense of the continuing mystery</i></p> <p>To a person, scientists expressed eagerness for better studies, better funding, better participation, with urgency bubbling up from specialists in cardiology, neuroscience, epidemiology, pulmonology, and immunology. Yet these are still early days for research into long Covid. Recognized since 2020, its definition is still sometimes debated, although most definitions include symptoms that persist weeks or months after acute infection and include fatigue, headache, shortness of breath, memory problems, GI issues, and joint and muscle pain. . .</p> <p>Epidemiologist Sairam Parthasarathy of the University of Arizona painted the picture of prevalence, setting it at 43% of all Covid cases based on pooled evidence of 50 studies. He called out the risk of long Covid as greater than the risk of developing diabetes and asthma, citing a study from Italy that estimated it at 25%. And in the U.S., disadvantaged populations, including Native American and Hispanic people, are disproportionately more likely to be hospitalized for Covid. "It's a few that may actually carry the burden of the many, and we need to address this," Parthasarathy said. . .</p> <p>There are lessons from another familiar disease: cancer. Michelle Monje, a neuroscientist and neuro-oncologist from Stanford, has previously connected long Covid effects in the brain to the cognitive impairment called "chemo brain" that follows treatment with methotrexate. Now she says long Covid also resembles what happens in the cytokine storm that follows the cancer immunotherapy CAR-T. In all three cases, inflammation disrupts immune cells in the brain called microglia, which ordinarily maintain healthy neural circuit function but when inflammation strikes, become neurotoxic. In mice, she found that depleting microglia with a small molecule that targets a necessary growth factor receptor allows microglia to come back to normal and rescue the cognitive deficits after cancer therapies. "This is something that we have not yet tested, but are in the process of testing in the context of long Covid," she said.</p> <p>https://tinyurl.com/NoOneLongCovid</p>
<p>Medical Care</p>	<p>20. Health Affairs July 21, 2022 <i>The Medicare Value-Based Care Strategy: Alignment, Growth, And Equity</i></p> <p>As the nation's largest health care payer, responsible for more than one in five dollars spent on health care within the United States, Medicare plays a key role in transitioning the health care system away from fee-for-service, which incentivizes quantity of care, and towards value-based care, which incentivizes high-quality care and smarter spending. The passage of the Affordable Care Act served as a catalyst for innovative payment and care delivery models that reward better care, smarter spending, and health in all facets of life. Over the</p>

past decade, Medicare has made significant progress in moving towards value and advancing accountable care. In Traditional Medicare, the Medicare Shared Savings Program brings together groups of doctors, hospitals, and other health care providers as Accountable Care Organizations (ACOs) to take responsibility for improving quality of care, care coordination, and health outcomes for groups of beneficiaries. The Shared Savings Program went from recruiting its first health care provider participants in 2011 to its current status as one of the largest value-based purchasing programs in the country, covering more than 11 million people with over 525,000 participating clinicians. Physician groups in the Shared Savings Program achieve [higher quality ratings compared to their counterparts not in the program, and the program has saved the Medicare Part B Trust fund \\$6 billion dollars or more over the past five years.](#)

Alignment

- First, CMS is exploring how to better leverage and align its programs to move toward more accountable care models and programs, which can help transform care delivery.
- Second, also in Traditional Medicare, CMS is aligning value-based arrangements across the Center for Medicare and the Innovation Center.
- Third, CMS is exploring ways to align MA with value-based efforts in Traditional Medicare, including the Shared Savings Program and Innovation Center models.
- Finally, CMS intends to further align our Medicare value-based efforts with Medicaid. Alignment between Medicare and Medicaid, the two largest public purchasers of health care, would amplify health system transformation.

Growth

- Growth of accountable care relationships in both Traditional Medicare and MA can improve quality and increase savings for Medicare beneficiaries by promoting innovative care delivery that better provides whole-person care. However, over the past several years, the number of beneficiaries assigned to ACOs participating in the Shared Savings Program has plateaued.

Equity

- Health equity is fundamental to high-quality care for all people. For far too long, profound inequities have existed across our health care system that are often rooted in [intersecting social determinants of health](#). The design of value-based arrangements in Medicare can be an important tool for advancing health equity by encouraging the movement of care upstream to address the health-related social needs and disparities that can lead to or exacerbate poor health outcomes.

Summing Up

- These three strategic priorities of alignment, growth, and equity are interrelated and reinforce each other. Alignment and growth are connected: When value-based models are aligned it becomes easier for health care providers to understand how they can succeed and provide high quality care, which lowers barriers to participation and accelerates adoption of value-based arrangements.

<https://tinyurl.com/HAMedicareValueBasedCare>

21. STAT News

July 21, 2022

	<p><i>N.Y. state detects polio case, first in the U.S. since 2013</i></p> <p>New York State reported Thursday that it has detected a case of vaccine-derived polio in an unvaccinated adult in Rockland County, north of New York City, the first such case in the United States since 2013. . .</p> <p>The Centers for Disease Control and Prevention said in a statement that while the risk is low for people who are vaccinated, there is risk for those who have not had the recommended three doses of injectable polio vaccine.</p> <p>“Most of the U.S. population has protection against polio because they were vaccinated during childhood, but in some communities with low vaccine coverage, there are unvaccinated people at risk,” the statement said. “Polio and its neurologic effects cannot be cured, but can be prevented through vaccination.”</p> <p>https://tinyurl.com/NYDetectsPolio</p>
Disability Topics	<p>22. *Daily Hampshire Gazette</p> <p>July 23, 2022</p> <p><i>Disability rock star: Bringing his cause to film</i></p> <p>Northampton man aims to make independent movie about a musician who uses a wheelchair.</p> <p>For the last few years, Jeremy Macomber-Dubs has been advocating for people with disabilities. As someone who uses a wheelchair because he struggles with the effects of brittle bone disease, Macomber-Dubs know it’s a challenge to navigate a world where access for people with mobility issues is often limited at best.</p> <p>Now Macomber-Dubs, the chairman of Northampton’s Disability Commission, is taking that effort to a new arena. He’s hoping to make an independent movie about a rock guitarist, one using a wheelchair to get around, who gets a shot at the big time — but which might also destroy his friendship with a good friend and fellow musician.</p> <p>The proposed film, called “Tallywhacker,” is based somewhat on Macomber-Dubs’ own life story, including the fact that he’s played electric guitar for years and has gigged with a number of bands.</p> <p>https://tinyurl.com/DisabilityRockStarMacumberDubs</p>
Aging Topics	<p>23. *New York Times</p> <p>July 19, 2022</p> <p><i>Can a ‘Magic’ Protein Slow the Aging Process?</i></p> <p>Several years ago, scientists studying aging at the Harvard Stem Cell Institute used a somewhat Frankensteinian technique known as parabiosis — surgically joining a young mouse and an old mouse so that they share blood — to see what would happen to the heart and skeletal muscle tissue. They knew from previous research that putting young blood in old mice caused them to grow biologically younger, and that young mice exposed to old blood aged faster.</p> <p>The Harvard researchers, Amy Wagers and Dr. Richard Lee, found that the old mouse’s heart tissue had been repaired and rejuvenated, becoming young again. In fact, the size of the old mouse’s heart had reduced to that of a young heart.</p> <p>https://tinyurl.com/MagicProtein</p>
End of Life	<p>24. Theater of War Productions</p> <p>Wednesday, July 27, 2022</p> <p>6:00 to 8:00 p.m.</p> <p><i>Women of Trachis</i></p>

	<p>Theater of War Productions will present scenes from Sophocles' <i>Women of Trachis</i> on Zoom, featuring professional actors and a chorus of hospice and palliative care nurses and home health aides, to help frame a powerful conversation about the challenges and opportunities of witnessing suffering and death and of caring for patients at the end of their lives.</p> <p>This special event, hosted by the Northern New Jersey Hospice and Palliative Care Nurses Association and Samaritan Life Enhancing Care— is the fifth installment of The Nurse Antigone series, which presents dramatic readings from ancient Greek plays as a catalyst for guided discussions about the past, present, and future of nursing. Using Sophocles' ancient play about the death of the great hero Heracles to create a vocabulary for talking about death and dying, the project aims to generate compassion, awareness, connection, and much-needed healing, while celebrating and advocating for palliative care and hospice nurses at this critical time.</p> <p>Sophocles' <i>Women of Trachis</i> tells the story of Heracles—the strongest of all Greek heroes—who has been unintentionally poisoned by his wife, Deineira, after she discovers that he has fallen in love with a younger woman. In an attempt to win back her husband's affection, she mistakes a lethal toxin, which was given to her by a dying centaur years ago, for a love potion. Deineira sends Heracles a robe dipped in the liquid. When Heracles puts on the robe it immediately eats through his skin, muscle tissue, down through his bones to the marrow. Heracles falls to the ground, clutching his sides, crying out in pain, calling for his teenage son, Hyllus, to come to his aid and to help him put an end to the seemingly endless waves of pain.</p> <p>https://tinyurl.com/WomenOfTrachis</p>
	*May require registration before accessing article.
Dignity Alliance Massachusetts Legislative Endorsements	<p>Information about the legislative bills which have been endorsed by Dignity Alliance Massachusetts, including the text of the bills, can be viewed at: 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>
Websites	
Previously recommended websites	The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: https://dignityalliancema.org/resources/ . Only new recommendations will be listed in <i>The Tuesday Digest</i> .
Previously posted funding opportunities	For open funding opportunities previously posted in <i>The Tuesday Digest</i> please see https://dignityalliancema.org/funding-opportunities/ .
Nursing Home Closures	Closure Notices and Relocation Plans available at: https://tinyurl.com/MANursingHomeClosures
Websites of Dignity Alliance Massachusetts Members	See: https://dignityalliancema.org/about/organizations/
State Budget FY 2023	<p>Commonwealth of Massachusetts</p> <p>The Conference Committee Report on the FY 2023 State Budget (H. 5050) was enacted on July 18.</p> <p>https://malegislature.gov/Budget/FY2023/ConferenceCommittee</p> <p>The budget is now on the Governor's desk for his review and approval or veto. He has ten days for the review. The Legislature may consider overrides of any vetoes by the end of the current Legislative session scheduled for July 31.</p> <p>FY23 Budget highlights (Courtesy of AARP Massachusetts)</p>

	<ul style="list-style-type: none"> • Common Application for SNAP – codifies language (no longer a budget item) • Medicare Savings Plan – increases the eligibility limits • Operation ABLE – earmarked funding • Personal Needs Allowance for nursing home residents • Leaves of Absence for nursing home residents • MA Legal Assistance Corporation (provides legal assistance for residents who are older and/or low income) – Increased 17% • Personal Care Attendant Council (personal care workers for those with disabilities) – Increased 64% • MassHealth Nursing Home Supplemental Rates – Increased 29% • Emergency Aid to Elderly Disabled and Children (the very poorest of the elder/children) – Increased 43% • One Stop Career Centers – Increased 57% • Mass Service Alliance – Increased 57% • MA Rental Voucher Assistance – Increased 18% • Executive Office of Elder Affairs Administration – Increased 64% • Community Choices Program – Increased 12% • Supportive Senior Housing – Increased 2% • Elder Home Care Purchased Services – Increased 8% • Elder Home Care Case Management – Increased 21% • Elder Protective Services – Increased 19% • Geriatric Mental Health – Increased 107% • Elder Congregate Housing – Increased 45% • Elder Nutrition Program – Increased 15% • Councils on Aging – Increased 36% • Home Care Aid Rate Add-on – Increased 43%
Assisted Living Residences Closures	<ul style="list-style-type: none"> • Motif by Monarch (previously Landmark at Ocean View), Beverly, July 2022 • Connemara Senior Living, Brockton, Summer 2022 • Landmark at Longwood, Mission Hill, Boston, Summer 2022
Nursing homes with admission freezes	<p>Massachusetts Department of Public Health <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
- 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 July 19, 2022.

Name of Facility	City/Town	Date of Freeze	Qualifying Factor
Dedham Healthcare	Dedham	7/6/2022	Infection Control
Norwood Healthcare	Norwood	6/28/2022	New cases
Oosterman's Melrose Rest Home	Melrose	12/18/2021	Noncompliance Testing
Overlook Masonic He6althcare	Charlton	6/28/2022	New cases
Regalcare at Worcester	Worcester	7/6/2022	Infection control
Rivercrest Long Term Care	Concord	6/28/2022	Noncompliance Testing
Royal of Cotuit	Mashpee	6/28/2002	New cases
Savoy Nursing and Rehab Center	New Bedford	4/19/2022	Infection control
Sudbury Pines Extended Care	Sudbury	7/6/2022	New cases

List of Special Focus Facilities

Centers for Medicare and Medicaid Services

List of Special Focus Facilities and Candidates

<https://tinyurl.com/SpecialFocusFacilityProgram>

Updated June 29, 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.

	<ul style="list-style-type: none"> • 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"> • Highview of Northampton (added in June) https://highviewnorthampton.com/ • 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 • Savoy Nursing and Rehabilitation Center, New Bedford (added in June) No website • 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 • Watertown Rehabilitation and Nursing Center, Watertown (added in June) No website https://tinyurl.com/SpecialFocusFacilityProgram
<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).</p> <p>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> <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	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		
Participation opportunities with Dignity Alliance Massachusetts Most workgroups meet bi-weekly via Zoom. Please contact workgroup lead for more information	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 Samantha VanSchoick Lachlan Forrow	prisoreilly@gmail.com svanschoick@cil.org 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>	For a free weekly subscription to <i>The Dignity Digest</i> : https://dignityalliancema.org/contact/sign-up-for-emails/ Editor: Paul Lanzikos Primary contributor: Sandy Novack MailChimp Specialist: Sue Rorke		
Note of thanks	Thanks to the contributors to this issue of <i>The Dignity Digest</i> <ul style="list-style-type: none"> • Ann Bowen • Mike Festa • Judi Fonsh • Mindy Fried • Margaret Morganroth Gullette • Anna Krieger • Dale Mitchell • Dick Moore Special thanks to Paul Spooner with the MetroWest Center for Independent Living for assistance with the website and MailChimp versions of <i>The Dignity Digest</i> . <i>If you have submissions for inclusion in <u>The Dignity Digest</u> or have questions or comments, please submit them to paul.lanzikos@gmail.com.</i>		
<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>			

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.