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| Logo of Dignity Alliance Massachusetts with tag line "respect. self-determination. choices."  Description generated with high confidence | The Dignity Digest  Issue # 115 November 21, 2022  *The Dignity Digest* is information compiled by Dignity Alliance Massachusetts concerning long-term services, support, living options, and care issued each Monday. | | |
|  | \*May require registration before accessing article. | | |
| Spotlight | **Axios**  November 19, 2022  ***Boomers' caregiving crisis***  **Aging baby boomers** are living longer and have better financial safety nets than previous generations.   * They're also more likely to be divorced, live far from their children and be living with debt and a chronic condition, *Axios' Tina Reed reports*.   **Why it matters:** The U.S. isn't well-equipped to handle the largest generation of elderly adults in human history.   * That's because of an already [strained long-term care industry](https://link.axios.com/click/29752289.59802/aHR0cHM6Ly93d3cuYXhpb3MuY29tLzIwMjIvMTAvMDQvaG9tZS1oZWFsdGgtbnVyc2luZy1ob21lcy1icmVha3Mtc3BlbmRpbmctZGVhbD91dG1fc291cmNlPW5ld3NsZXR0ZXImdXRtX21lZGl1bT1lbWFpbCZ1dG1fY2FtcGFpZ249bmV3c2xldHRlcl9heGlvc2RlZXBkaXZlcyZzdHJlYW09dG9w/5966e2448cc2b278018b4668Bf35177f9), fewer [caregivers](https://link.axios.com/click/29752289.59802/aHR0cHM6Ly93d3cuYXhpb3MuY29tLzIwMjIvMTAvMDQvbWlzbWF0Y2gtYmV0d2Vlbi1kaXNhYmxlZC1jYXJlZ2l2ZXJzP3V0bV9zb3VyY2U9bmV3c2xldHRlciZ1dG1fbWVkaXVtPWVtYWlsJnV0bV9jYW1wYWlnbj1uZXdzbGV0dGVyX2F4aW9zZGVlcGRpdmVzJnN0cmVhbT10b3A/5966e2448cc2b278018b4668B5ed8dd4e) to assist with their needs and a world that just isn't designed for them.   **The big picture:** By 2030, all baby boomers — which the Census Bureau defines as those born between 1946 and 1964 — will be considered seniors.   * The population of people 65 and older is expected to nearly double from 51 million people in 2017 to 95 million by 2060, per the Population Reference Bureau.   **Between the lines:** Changing family dynamics are leading to a growing gap in the number of family caregivers, Mark Mather, associate vice president of U.S. Programs at the Population Reference Bureau, tells Axios.   * Baby boomers generally had fewer children than their parents did — and their kids are more likely to have moved too far away to help out, Mather says. * Baby boomers are also more likely to be divorced, which means they may not have a partner to care for them. * Or they may have remarried with stepchildren, who studies show are less likely to care for an aging parent than biological children, says Sarah Patterson, a sociologist at the University of Michigan who specializes in demographic shifts in life expectancy.   [*Read the full story.*](https://link.axios.com/click/29752289.59802/aHR0cHM6Ly93d3cuYXhpb3MuY29tLzIwMjIvMTEvMTkvYmFieS1ib29tZXJzLWVsZGVyLWNhcmU_dXRtX3NvdXJjZT1uZXdzbGV0dGVyJnV0bV9tZWRpdW09ZW1haWwmdXRtX2NhbXBhaWduPW5ld3NsZXR0ZXJfYXhpb3NkZWVwZGl2ZXMmc3RyZWFtPXRvcA/5966e2448cc2b278018b4668Bd044bb8f)  **Axios**  November 19, 2022  ***Private equity's elder care race***  A financial arms race is forming in senior care as private capital pours into the reshaping of elder care.  **Why it matters:** The perceived dangers of private equity entering senior care have largely focused on [nursing homes](http://newyorker.com/news/dispatch/when-private-equity-takes-over-a-nursing-home), but the truth is, the dollars are flowing elsewhere.  **Reality check:** In fact, PE firms are estimated to own just 5% of U.S. nursing homes, [per an industry trade group](https://jamanetwork.com/journals/jama-health-forum/fullarticle/2786442).   * "Most of the innovation and new business models that have been developed have been about trying to keep people out of long-term-care facilities," said Devin O'Reilly, managing director at Bain Capital. * The capital is following that innovation.   **The big picture:** Older Americans are the biggest cost bucket in health care, but care delivery and outcomes are inconsistent.   * "This is a crisis for seniors to get better access to care because it's costing all of us a fortune," Advent International managing director Carmine Petrone said. * The trend of people living longer, and the extended post-work lifestyle, means that "increasingly, society is understanding that their living situation is also really important to their health care situation," added Welsh, Carson, Anderson & Stowe general partner Sean Traynor.   **Between the lines:** COVID shed light on the disparities in health care across rural communities and low-income and marginalized populations.   * Addressing health inequities is low-hanging fruit for some investors and entrepreneurs, said General Atlantic managing director and global head of health care Robbert Vorhoff. * His firm, alongside Town Hall Ventures, recently [invested in Suvida Healthcar](https://www.generalatlantic.com/media-article/suvida-healthcare-launches-in-texas-focused-on-delivering-culturally-competent-care-for-hispanic-seniors/)e, dedicated to Hispanic seniors. * "Where is the most potential to create value? It's finding people that have been least well served by the existing infrastructure." * "We've got to figure out an efficient way to deliver care to rural America," Jeremy Gelber, senior managing director at Centerbridge Partners, said. "On average, America is older and sicker."   **Context:** Investors are focused on funding care delivery and technology companies that address every facet that can help people live independently and longer.   * In-home and community-based care dominate much of the thinking. * Other large investment pockets are Medicare Advantage primary care, along with various home-based services and technologies ranging from infusion therapy to medication management. * The investment angle is huge, said Meera Mani of Town Hall Ventures. "When you're talking about 50 million people and growing that are over the age of 65, that's multiple segments with multiple needs."   **Zoom in:** The high utilization of health care among the over-65 population makes for a gold rush that can't be matched elsewhere.   * On the Medicare side, there's scale and durability of spending, whereas investing behind sicker members of younger populations is trickier, Vorhoff said. * And ultimately, "those are small dollars compared to the senior dollars," said Gelber. "[Investors] go where the dollars are because if you can manage those dollars better, in a value-based way, you have the opportunity to get paid well for it."   **The bottom line:** Elder care isn't a one-size-fits-all approach, and neither is the ever-evolving investment opportunity.  <https://tinyurl.com/PrivateEquityElderCare>  **Axios**  November 19, 2022  ***Sacrificing for long-term care***    Long-term care will become an increasingly elusive need for aging baby boomers in the next decade, forcing some to spend down their assets in order to qualify for Medicaid.  **Why it matters:** The population of middle-class seniors in America will increase 89% to 16 million by 2033, according to data from [NORC at the University of Chicago](https://www.norc.org/PDFs/Forgotten%20Middle/NORC%20Forgotten%20Middle%202022%20-%20Analysis%20and%20Findings.pdf).   * Most will have chronic conditions and mobility difficulties, and nearly 75% won't be able to afford assisted living without selling their homes, the NORC data shows. * Medicare doesn't pay for long-term care services, and just [7.5 million Americans](https://www.aaltci.org/long-term-care-insurance/learning-center/ltcfacts-2020.php) had separate long-term care insurance as of Jan. 1, 2020.   **The big picture:** Seniors with incomes too high to qualify for Medicaid are caught in a bind, having to either pay out of pocket for extended care or impoverish themselves in order to qualify for the safety net program.   * "That's not anyone's best-case scenario," Caroline Pearson, senior vice president at NORC, told Axios. "That doesn't take advantage of their long-term financial assets. It doesn't keep them healthy and in place for as long as possible." * Senior living providers say they can't provide enough affordable options for this demographic without more federal assistance. * "Frankly, the long-term care system in this country is broken," Beth Martino, senior vice president of public affairs for the American Health Care Association/National Center for Assisted Living, said in an email. * "It requires an entirely different business model and vigorously looking for loans and government programs to keep it going."   **The big question**: Pearson and others say it will take a combination of policy fixes to ease the burden on this population.   * Policymakers could pare other health care costs by capping Medicare premiums or otherwise lowering copays and other out-of-pocket expenses for older adults, said Tricia Neuman, who directs the Kaiser Family Foundation's program on Medicare policy. * Adding dental, vision and hearing benefits to traditional Medicare — as Democrats unsuccessfully [tried](https://www.axios.com/2021/06/21/schumer-sanders-dental-vision-medicare) this Congress — could also help, Neuman said. * States can also raise or eliminate asset minimums for Medicaid eligibility, and expand the availability of Medicaid home- and community-based services. The Bipartisan Policy Center [recommends](https://bipartisanpolicy.org/download/?file=/wp-content/uploads/2021/09/BPC_Health_Long_Term_Care_RV4-min.pdf) that lawmakers create a pathway for Medicare beneficiaries to buy into Medicaid home care benefits.   **What we're watching**: Rep. Thomas Suozzi (D-N.Y.) proposed a long-term care insurance system funded by employer and worker contributions to a federal catastrophic long-term care fund.   * Taking catastrophic insurance out of the private market would allow insurance companies to create better, more affordable long-term care insurance products. * But Suozzi is stepping down at the end of the year, and no one else has taken up the cause. * "It takes some bravery," said Ruth Katz, senior vice president of public policy and advocacy policy at LeadingAge, which represents nonprofit aging service providers and is trying to keep the idea alive. "A payroll tax is 'them's fighting words.' And people get really exercised about it, even though it's less than 1%."   <https://tinyurl.com/SacriifcingForLongTermCare>  **Axios**  October 4, 2022  *Home health, nursing homes look for year-end breaks in spending deal*  Long-term care and home health providers are ramping up pleas for financial relief in a year-end congressional spending deal, testing their influence against other health interests trying to tuck favorable provisions in the must-pass bill.  **Why it matters:** The wrangling over [health care "extenders"](https://www.axios.com/2019/12/20/health-care-industry-holiday-gifts) is an annual rite, but there are higher stakes this year due to labor and supply chain issues and the after effects of the pandemic.   * Nursing homes accounted for nearly one-quarter of COVID-19 related deaths in the U.S and were targeted for reforms in President Biden's State of the Union address. But the industry is a vital cog in the health care system, caring for more than 1.4 million residents, as well as discharged hospital patients. * Demand for home and community-based care surged during the pandemic, but a severe shortage of workers is threatening the option, even for people who have the financial means, per the [Washington Post](https://www.axios.com/2022/10/04/threatening%20the%20option%20of%20aging%20at%20home). Almost 5 million patients received home health services in 2017, per the [Centers for Disease Control](https://www.cdc.gov/nchs/data/series/sr_03/sr03-047.pdf). * Big home health companies like Amedisys, LHC and Aveanna that were poised to benefit from a shift to more in-home care could be hit by a steep proposed Medicare payment cut for 2023.   **Where things stand:** Congress has punted key funding decisions to the "lame duck" session, and Democrats have resisted [repurposing unspent COVID-19 funds](https://www.brookings.edu/blog/the-avenue/2022/03/11/local-leaders-deserve-time-and-trust-with-american-rescue-plan-funding/) from earlier relief packages.   * Nursing homes say there will be closures without reliable government funding as the industry grapples with negative margins and a median occupancy rate around 77%. * The home health industry is weighing [possible legal action](https://www.modernhealthcare.com/policy/home-health-agencies-make-legal-case-against-cms-proposed-cuts) to halt the cuts it's facing while also putting its hopes behind [legislation](https://www.congress.gov/bill/117th-congress/senate-bill/4605/cosponsors) from Sens. Susan Collins (R-Maine) and Debbie Stabenow (D-Mich.) which would delay the reductions until 2026.   **What they're saying:** "We've seen from past rate reductions, reductions in access to care overall and the care people receive," Bill Dombi, president of the National Association of Home Care & Hospice, told Axios.   * "Our situation is much more exaggerated than other sectors in the space," Clif Porter, senior vice president of government relations at the American Health Care Association/National Center for Assisted Living, told Axios. "We've lost 14% of our workforce during COVID and we've had very marginal and slow recovery in that workforce. It's some of the lowest levels we've seen since the 1990s."   **Yes, but:** Nursing homes and home health agencies were overpaid by the Centers for Medicare and Medicaid Services due to an unintended increase in payments to the industries stemming from the current reimbursement system.   * The agency then delayed adjustments due to the pandemic. Now, some of the adjustments are coming due. * The Medicare Payment Advisory Commission [backs payment reforms](https://www.medpac.gov/wp-content/uploads/2022/08/08152022_HomeHealth_MedPAC_COMMENT_SEC.pdf), saying the program has long overpaid for home health care. On nursing homes, it [notes the combination](https://www.medpac.gov/wp-content/uploads/2022/06/06082022_SNF_FY2023_MedPAC_COMMENT_SEC.pdf) of federal relief packages and recent changes that account for "case mix," or resources predicted to care for residents, have improved facilities' financial performance.   **Go deeper:** Medicare home health could potentially take a $810 million payment cut next year, which the industry says will force agencies to reduce their coverage areas or the volume of patient visits.   * Raymond James analyst Chris Meekins expects CMS to soften the blow when it issues a final rule, possibly next month. But the cuts could be taken off the table entirely if Collins and Stabenow insert their three-year payment delay in a year-end spending package. * Nursing homes that would have lost [$320 million under updated payment policies](https://www.cms.gov/newsroom/fact-sheets/fiscal-year-fy-2023-skilled-nursing-facility-prospective-payment-system-proposed-rule-cms-1765-p#:~:text=On%20April%2011%2C%202022%2C%20the,fiscal%20year%20(FY)%202023.) won concessions that will see reductions spread out over two years, along with a 2.7% pay bump for 2023. * CMS said the decision amounted to "taking a more cautious approach in order to mitigate the potential negative impacts on the nursing home industry, such as facility closures or disproportionate impacts on rural and small facilities." Operators say it still doesn't match the increased costs they're facing.   **What we're watching:** Biden in his [State of the Union](https://www.whitehouse.gov/briefing-room/speeches-remarks/2022/03/01/remarks-of-president-joe-biden-state-of-the-union-address-as-delivered/) called for "higher standards" for nursing homes, including minimum staffing requirements and financial incentives based on the quality of care delivered. Proposed rules could come next year.   * The industry is pushing back, saying a shortage of qualified workers and lack of funds to enforce a staffing mandate makes it unworkable. Industry-backed bills in the [House](https://guthrie.house.gov/news/documentsingle.aspx?DocumentID=387718) and [Senate](https://www.warner.senate.gov/public/index.cfm/2022/6/warner-scott-reintroduce-bipartisan-legislation-to-improve-hiring-of-caregivers-for-seniors) would, among other things, extend pandemic-era staffing flexibilities and address workforce training and retention.   **Keep in mind:** Medicare [only covers](https://www.medicare.gov/what-medicare-covers/what-part-a-covers/how-can-i-pay-for-nursing-home-care) care services in nursing home facilities or at home for short-term recovery and discharge care. Long-term care must be paid for out-of-pocket or eventually by Medicaid.   * Experts say change is needed to the long-term payment system, and that at-home health can be more cost-effective than care offered in facilities. * "We need to grow home and community-based care options while reimagining what a nursing home might look like," David Grabowski, a Harvard University health care policy professor, told Axios. * While both home health and long-term care facilities are asking for more funding, Grabowski said the home health sector looks stronger, though he noted widespread nursing home closures haven't yet materialized.   **The bottom line:** With a pileup of health spending requests packed into a post-election session, the industries will be vying with doctors, hospitals, and other provider groups for year-end gifts. "December is going to be a mess," said Meekins.  <https://tinyurl.com/YearEndBreaks> | | |
| *Quotes of the Week* | *With a pileup of health spending requests packed into a post-election session, the [nursing home and home health care] industries will be vying with doctors, hospitals, and other provider groups for year-end gifts. "December is going to be a mess."*  Chris Meekins, Raymond James analyst, *Home health, nursing homes look for year-end breaks in spending deal,* **Axios,** October 4, 2022, <https://tinyurl.com/YearEndBreaks>  *As private equity continues to consolidate the home healthcare and hospice industries through acquisitions and add-on investments, it is increasingly important to ensure that private equity’s outsized profits do not come at the expense of patient care. Policymakers should implement laws that promote greater transparency and oversight over private equity transactions in the home healthcare and hospice industries to guard against excesses that could harm patients and employees alike.*  *Private Equity at Home: Wall Street’s Incursion into the Home Healthcare and Hospice Industries,* **Private Equity Stakeholder Project,** March 2022, <https://tinyurl.com/PrivateEquityAtHome>  *“This is not just an issue. This is a crisis. We are caring for patients in the hallways of our emergency departments. There is a huge capacity crisis, and it’s becoming more and more impossible to take care of patients correctly and provide the best care that we all need to be providing.”*  Anne Klibanski, president and CEO of Mass General Brigham, *RSV, covid and flu push hospitals to the brink — and it may get worse,* **\*Washington Post,**  November 20, 2022, <https://tinyurl.com/CovidFluPushHospitals>  *“It’s never too late (to follow your dream)”.*  Angela Alvarez, 95-year-old Grammy winner, *Grandmother wins her first Latin Grammy at the age of 95,* **Today – NBC,** November 17, 2022, <https://tinyurl.com/GrandmotherWinsGrammy>  *This idea that old age is associated with only declines is not true. There are studies that have been done all over the world which show that in people who keep active physically, socially, mentally, and cognitively there is increased connectivity among specific networks, and even new neurons and synapses can form in selected brain regions with older age.”*  [Dr. Dilip Jeste](https://dilipjestemd.com/), a psychiatrist who has studied aging at the University of California, San Diego, *President Biden Is Turning 80. Experts Say Age Is More Than a Number.* **New York Times (free access),** November 19, 2022, <https://tinyurl.com/BidenTurning80>  *"When people need long-term care, where are those beds going to be? If people need in-home care, which is in many ways preferable to being institutionalized, how are we going to pay for that? Right now, our health care systems are not well set up to support that kind of care."*  Michael Steinman, professor at the University of California, San Francisco's Division of Geriatrics, *Boomers' caregiving crisis,* **Axios,** November 19, 2022, [*Read the full story.*](https://link.axios.com/click/29752289.59802/aHR0cHM6Ly93d3cuYXhpb3MuY29tLzIwMjIvMTEvMTkvYmFieS1ib29tZXJzLWVsZGVyLWNhcmU_dXRtX3NvdXJjZT1uZXdzbGV0dGVyJnV0bV9tZWRpdW09ZW1haWwmdXRtX2NhbXBhaWduPW5ld3NsZXR0ZXJfYXhpb3NkZWVwZGl2ZXMmc3RyZWFtPXRvcA/5966e2448cc2b278018b4668Bd044bb8f)  *"We need to grow home and community-based care options while reimagining what a nursing home might look like."*  David Grabowski, Harvard University health care policy professor, *Home health, nursing homes look for year-end breaks in spending deal,* **Axios,** October 4, 2022, <https://tinyurl.com/YearEndBreaks>  *"This is a crisis for seniors to get better access to care because it's costing all of us a fortune."*  Carmine Petrone, managing director, Advent International, *Private equity's elder care race,* **Axios,** November 19, 2022, <https://tinyurl.com/PrivateEquityElderCare>  *The investment angle is huge. “When you’re talking about 50 million people and growing that are over the age of 65, that’s multiple segments with multiple needs.”*  Meera Mani, Town Hall Ventures, *Private equity's elder care race,* **Axios,** November 19, 2022, <https://tinyurl.com/PrivateEquityElderCare>  *“The goal of this transition is to support and build a talented team that’s prepared to begin to deliver for people on day one.”*  Kim Driscoll, Massachusetts Lt. Governor-Elect, *Here are the Healey administration’s transition policy committees,* **Mass.live.com,** November 18, 2022, <https://tinyurl.com/HealeyTransitionCommittee>  *The task may be herculean, but clean hands are needed to power wash the Augean stables.*  Margaret Morganroth Gullette, Resident Scholar at the Women's Studies Research Center at Brandeis University and a member of Dignity Alliance Massachusetts, *Next administration has tall order: dig into state’s nursing homes,* **\*Boston Globe,** November 18, 2022, <https://tinyurl.com/NextAdministrationTallOrder>  *The exponential growth in these private equity investments in recent years “has been associated with a host of trends that are negatively impacting the American people” — including an increase in nursing home mortality rates. [There is a] need to “better understand” the consequences of private equity’s involvement in health care and “the far-reaching impact” of “bankruptcies or closures following PE buyouts.”*  [Rep. Bill Pascrell](https://pascrell.house.gov/) (D-N.J.), who chairs the Ways and Means Oversight Subcommittee, *Private Equity Ownership of Nursing Homes Triggers Capitol Hill Questions — And a GAO Probe,* **Kaiser Health News,** April 18, 2022, <https://tinyurl.com/TriggersCapitalHillQuestions> | | |
| *Dignity Series*  A set of three poems published in *Generations Today* November-December 2022  By Sandy Alissa Novack  Sandy Alissa Novack, MBA, MSW, is a geriatric social worker and disability advocate. She worked for nearly two decades in housing for independent elders and younger people with disabilities, and during the pandemic. Sandy is an active member of Dignity Alliance Massachusetts and regular contributor to *The Dignity Digest.* | *Escape*  I  walk into your hospital room and all is somber  But your aide with the quick smile and hearty laugh is  there  And I can't stop myself from noticing a rope hanging outside  your window.  You and the aide had not noticed it before.  The elf in me starts a running story about how you and I will  escape down the rope to many doors below,  Where we will then start humming as if we are just out for a  walk,  While the aide still up in the room cuts the rope, and brings it  into your (now) former room,  To hide the evidence of our escape.  The aide is now doubled over with laughter,  And looks up and down out the window with me as we try to  figure out who left us the rope to escape with,  And will we run into them once you and I start descending  the rope?  We do have one obstacle: Hospital windows no longer open...  But for a few minutes there,  You, your caregiver, and I shared some levity,  And we can now address the seriousness of the  hospitalization with renewed energy and fresh eyes.  This is dignity: To have people around you who see all of you,  not just your health or disability symptoms, and offer you  some relief and escape when needed.  *The Piano Man*  Hospital  Rehab  Assisted Living.  Back to the hospital  Rehab  Assisted Living.  And repeat the care continuum again.  Repeat.  Repeat.  We are limited as to where you can be discharged;  We don't want you in just any rehab bed.  You need a bed with a piano nearby.  It is playing the piano that will heal you.  Not all rehab facilities have pianos.  What? He can't leave his room to play the piano  in your function room?  My piano man is heart-broken and frustrated  But undaunted. In lieu of the piano, he can use a small,  moveable keyboard.  On goes the face mask and the disposable gloves.  He and the keyboard are united.  Patients, their caregivers, look in and listen:  In a rehab facility in Timbuktu,  Sits an elder wearing a johnny, a face mask, and nitrile gloves,  Playing the best music they will ever hear.  This is dignity: To use the gift God gave you,  No matter what your health is, no matter where you are.  *Outside*  We step outside together,  Not that easy for you to do these days with your  health.  The sun hurts your eyes at first, like a prisoner emerging  from solitary confinement.  You grip your walker more tightly.  We have gotten outside together this day  As we have loved to do for the decades past  And there is no turning back for us now either.  We walk the length of the facility's veranda to get your body  moving.  Your walk is much slower and pained than before  But determined.  We sit on the veranda bundled up in winter coats and hats.  The brisk air is clean and fresh on our faces  Unlike the stifling small room you have inside.  I so understand why you need outdoor air.  We watch some cars pull up to pick up and drop off  passengers.  A whole world is outside your single room.  Please breathe that in, too.  This is dignity: To get out in the world and inhale the life  beyond our walled-in structures. | | |
| Olmstead Class Action Suit:  Request for Input | 1. **Center for Public Representation**   Although the Commonwealth claims to provide community options for people with disabilities in nursing facilities, or those at serious risk of being admitted to nursing facilities, there is not reliable data on how many nursing facility residents could be transitioned to appropriate community living arrangements. If you know of any legislative or executive agency studies, analysis, reports, findings, recommendations, or Olmstead planning documents, including any data or data sources, that address the unnecessary institutionalization of people with disabilities in nursing facilities, please contact Jeni Kaplan ([jkaplan@cpr-ma.org](mailto:jkaplan@cpr-ma.org)) or Steven Schwartz ([sschwartz@cpr-ma.org](mailto:sschwartz@cpr-ma.org)). Information and data since 2010 are most useful. | | |
| Inspiration - Updated | 1. **Today – NBC**   November 17, 2022  *Grandmother wins her first Latin Grammy at the age of 95*  The best new artist of 2022 is a Cuban American grandmother living out her dream of being a professional musician at the age of 95.  Angela Alvarez tied with Silvana Estrada for best new artist at the Latin Grammys on Nov. 17, winning her first Grammy.  <https://tinyurl.com/GrandmotherWinsGrammy> | | |
| Dignity Votes 2022 | 1. **Healey / Driscoll Transition Team**   <https://healeydriscolltransition.com>   * Get to know Maura & Kim * Transition Committees * Share Your Ideas * Join the Team  1. **Mass.live.com**   November 18, 2022  *Here are the Healey administration’s transition policy committees*  Six “urgent” needs affecting Bay Staters, including transportation and affordable housing, forge the basis of transition policy committees unveiled by Gov.-elect [Maura Healey](https://www.masslive.com/topic/maura-healey/) and Lt. Gov-elect [Kim Driscoll](https://www.masslive.com/topic/kim-driscoll/) Friday as they ramp up preparation efforts before taking the corner office this January.  The all-female executive pair said their newly tapped committee leaders — representing a vast array of community members, as well as nonprofit and business heads — are charged with applying “an equity and affordability lens to their work, always considering the ways in which historically marginalized communities may be impacted and how to alleviate economic burdens for Massachusetts residents.”  Attorney General Healey already named Driscoll, the mayor of Salem, as the transition chair. But the incoming administration on Friday also announced the appointment of Danielle Cerny, former deputy chief of staff to former Rhode Island. Gov. Gina Raimondo, as transition director.  The six transition committees are called: “How We Get Around,” “Affordable, Abundant Housing,” “Climate Readiness, Resiliency and Adaptation,” “Jobs and a Flourishing Economy for All,” “Thriving Youth and Young Adults,” and “Safe and Healthy Communities for All Ages.”  “The goal of this transition is to support and build a talented team that’s prepared to begin to deliver for people on day one,” Driscoll said in a statement Friday morning. “Our team is working hard and continuing to engage the public by reviewing the ideas submitted to us and [gathering applications](https://www.masslive.com/politics/2022/11/maura-healey-and-kim-driscoll-want-your-feedback-and-your-resume.html) from those interested in joining our administration.”  <https://tinyurl.com/HealeyTransitionCommittee>   1. **\*Boston Globe**   November 18, 2022  *Maura Healey announces 15 transition team hires*  Ten daysafter her historic win, Governor-elect Maura Healey announced 15 committee co-chairs will join her transition team as she prepares to take office in January.  The Cambridge Democrat, who won the Nov. 8 election by a landslide, announced Friday a transition team that includes former state transportation leaders, community advocates, business and nonprofit leaders, and a former White House official.  She had previously announced that Salem Mayor Kim Driscoll, the lieutenant governor-elect, will chair the transition. The team had also launched [a website](https://healeydriscolltransition.com/) to solicit applications from those who wish to serve in the administration as well as offer the public a chance to weigh in on whatan incoming Healey administration should prioritize. . .  The transition will be led by Danielle Cerny, a former legislative aide and aide to former Rhode Island governor Gina Raimondo. Cerny is a visiting fellow at the Harvard Kennedy School, where she has focused on transitioning newly elected mayors and governors. . .  The committee focusing on youth and adults will be led by Worcester Public Schools Superintendent Rachel H. Monárrez and Amanda Fernandez, CEO, and founder of Latinos for Education.  The health committee will be chaired by Michael A. Curry, CEO of Massachusetts League of Community Health Centers, and Aisha E. Miller, vice president of real estate firm Related Beal. Miller is a former legislative aide and cabinet member under former mayor Martin J. Walsh.  <https://tinyurl.com/15TransitionTeamHires> | | |
| Survey Opportunity | 1. **Encore Boston Network**   *What Do Older Workers Want?*  What do older adults want in the workplace? Was there a “great retirement” or a “quiet firing”? If older adults are thinking about re-entering the workplace, what would entice us? To get answers to these questions and more, Encore Boston Network is joining with others in a national survey. We invite you to participate by taking 5 minutes to complete the survey. Results will be shared widely. Help us educate employers. Complete the survey and enter to win a gift card.  [**TAKE THE SURVEY NOW**](https://bit.ly/OlderAdultWorkplaceSurvey) | | |
| Opportunity for Input | 1. **Administration on Community Living**   *Comment on the National Strategy to Support Family Caregivers*  **Comment period closes November 30.**  The public comment period for the [2022 National Strategy to Support Family Caregivers](https://click.connect.hhs.gov/?qs=8579d7826e554e5baf01e8f63311b7e19b5e881c2df5a2f84918984ac9a53e17dc895f4f96649a47d52a029bd547bc117c154c668eaa6ec2) will close at 11:59 PM on November 30, 2022. The Strategy, which was released on September 21, 2022, was developed jointly by the advisory councils established by the [Recognize, Assist, Include, Support, and Engage (RAISE) Family Caregivers Act](https://click.connect.hhs.gov/?qs=8579d7826e554e5bb9f3656ff92204b002eb8bfb252723ab749c4020b776665b49e0fb09ec2bc10c49e3b4e6234df008fb1dded35ea33282) and the [Supporting Grandparents Raising Grandchildren (SGRG) Act](https://click.connect.hhs.gov/?qs=8579d7826e554e5b0219d03054607d8960e8b9ac92076dae581b2681151e81edcde90419f2c94371ee365502c9a1dd6b8d95f9ed6217cb40), with extensive input from family caregivers, the people they support, and other stakeholders.  The Strategy is intended to serve as a national roadmap to better recognize and support family and kinship caregivers of all ages, backgrounds, and caregiving situations. It includes nearly 350 actions the federal government will take to support family caregivers in the coming year and more than 150 actions that can be adopted at other levels of government and across the private sector to build a system to support family caregivers. ACL leads implementation of the RAISE and SGRG Acts and facilitates the work of both advisory councils. ACL is requesting comments on:   1. The most important topics/issues for the advisory councils to focus on moving forward; and 2. Issues that were not covered by the initial strategy that should be addressed in future updates.   Comments can be submitted via an [online form](https://click.connect.hhs.gov/?qs=8579d7826e554e5b56877b28006759097acaa32a8cbe295c1d413c8a1d31d099ca2043f8063eb98d155158e0c8a58190ddf75d74c5895aad). Respondents have the option to comment on each individual component of the Strategy or provide comments about the Strategy as a whole. For additional information on the Strategy, contact [Greg Link](mailto:raise.mail@acl.hhs.gov?subject=). | | |
| Reports | 1. **Private Equity Stakeholder Project**   March 2022  *Private Equity at Home: Wall Street’s Incursion into the Home Healthcare and Hospice Industries*  As the pandemic continues to change the way Americans view healthcare, the home healthcare and hospice industries continue to proliferate as viable alternatives to traditional nursing homes and hospitals. The growth of these industries has made them attractive targets for private equity investment.  The Private Equity Stakeholder Project’s latest report, *Private Equity at Home: Wall Street’s Incursion into the Home Healthcare and Hospice Industries,* highlights several large private equity- owned home healthcare and hospice companies that have been scrutinized.  While non-profits have previously constituted the majority of home healthcare and hospice companies, both sectors are now dominated by for-profit companies. Although the industries remain fragmented, private equity firms have acquired large home healthcare and hospice companies and consolidated smaller ones to establish large footholds in both industries. For-profit home healthcare and hospice companies have experienced their share of controversy, including:   * Underpaid and overworked employees (who are mostly women of color); * Medicare fraud; and * Lower quality of care compared to their non-profit counterparts.   Such problems have the potential to be exacerbated by the common private equity strategy of pursuing outsized returns over relatively short periods of time (e.g., 25% return over a period of 3-7 years).  Companies like Brightspring Health Services, Interim Healthcare and Aveanna Healthcare are examples of controversial home healthcare and hospice companies that are, or were previously, owned by private equity firms:   * Brightspring Healthcare (KKR, Onex Corporation) has been subject to a number of wage theft lawsuits and investigations related to lapses in patient care. * Interim Healthcare (Levine Leichtman Capital Partners, Wellspring Capital) has been investigated for violations of the False Claims Act, similar to other companies under its private equity owner’s control. * Aveanna Healthcare (J.H. Whitney and Bain Capital) was subject to a Bloomberg investigation that shed light on its cost-cutting practices and their relationship to staffing issues and patient neglect.   As private equity continues to consolidate the home healthcare and hospice industries through acquisitions and add-on investments, it is increasingly important to ensure that private equity’s outsized profits do not come at the expense of patient care. Policymakers should implement laws that promote greater transparency and oversight over private equity transactions in the home healthcare and hospice industries to guard against excesses that could harm patients and employees alike.  <https://tinyurl.com/PrivateEquityAtHome> | | |
| Events | 1. **Special Ceremony Celebrating the Passage of Disability History Commission Bill**   Tuesday, November 22, 2022, 2:00 to 3:00 p.m.  MetFern Cemetery, Waltham, MA  Massachusetts has passed groundbreaking human rights legislation to create a disability-led commission to investigate the history of state institutions, including locating and identifying individuals buried in nameless and unmarked graves.  Please join advocates on November 22 at 2 pm for remarks honoring former institutional residents and the passage of the Special Commission on State Institutions by Secretary of Health and Human Services Marylou Sudders, Assistant Senate Majority Leader Mike Barrett, and Representative Sean Garballey at MetFern Cemetery in Waltham, the final resting place for 296 people who once lived at the Metropolitan State Hospital and Fernald State School.  *Rain Location is Gann Academy, 333 Forest St., Waltham, MA 02452*  Information: <https://tinyurl.com/MetFernInfo>  Registration: <https://tinyurl.com/MEtFermCemetaryEvent> | | |
| Webinars and Online Sessions | 1. **Encore Boston Network**   Wednesday, November 30, 2022, 12:00 to 1:00 p.m.  *Rethinking Volunteerism*  For generations, volunteers have been helping communities solve problems. The pandemic disrupted that. But disruption can push us to reinvent our accepted approaches. Beth Steinhorn, president of VQ Volunteer Strategies and co-editor of the new book, Transforming Disruption to Impact, will help us rethink volunteer engagement for a rapidly changing world. Offered by the Encore Network.  [**REGISTER HERE**](https://www.encorebostonnetwork.org/content.aspx?page_id=4002&club_id=941588&item_id=1819768&event_date_id=255)   1. **Encore Boston Network**   Wednesday, December 14, 2022, 10:00 to 11:00 a.m.  *Mastering the Multigen Workforce*  There are now 5 generations in the workplace and people over 50 make up 25% of the labor market. But as the workforce becomes more age-diverse, can people of all ages work together? Learn about the myth of generational conflict, why mixed-age teams excel, and tips for navigating the new world of work. Kara Cohen of AARP Massachusetts will interview author and Marketplace economist Chris Farrell.  [**REGISTER HERE**](https://www.encorebostonnetwork.org/content.aspx?page_id=4002&club_id=941588&item_id=1820988&event_date_id=255) | | |
| Previously posted webinars and online sessions | **Previously posted webinars and online sessions can be viewed at:** [**https://dignityalliancema.org/webinars-and-online-sessions/**](https://dignityalliancema.org/webinars-and-online-sessions/) | | |
| Nursing Homes | 1. **\*Boston Globe**   November 18, 2022  *Next administration has tall order: dig into state’s nursing homes*  Re [“One-party rule could be mixed blessing for Healey:](https://www.bostonglobe.com/2022/11/12/metro/beacon-hills-triangle-power-has-landed-firmly-democratic-hands-what-does-that-mean-massachusetts/?p1=Article_Inline_Text_Link) When Democrats hold all the cards, unity often elusive” (Page A1, Nov. 13): The new “triangle of power” on Beacon Hill has an immense job ahead: improving nursing homes. Of the more than 20,600 Massachusetts residents lost to COVID-19, more than 6,200 of them resided in a nursing home. Tens of thousands of family members grieve these losses every day. They wonder what went wrong and who will fix it. Current survivors in these facilities, meanwhile, should be fiercely protected from infection, abuse, neglect, understaffing, and fear of closure.  In the past few years, there has been no audit of the funds provided to nursing facilities. An audit should assure the public that a significant amount of that money actually goes to staffing. Audits ought to be consolidated to cover third-party arrangements, such as rent, catering, and other areas. Are operators of these facilities meeting regulations requiring a minimum of care hours per resident and ensuring safety and comfort? Are they required to limit new admissions, given staff shortages?  While much of this will fall to the newly elected state auditor, Diana DiZoglio, the cleansing of the industry under the next administration will require cooperation among Attorney General Andrea Campbell, Governor Maura Healey, Healey’s head of health and human services — everyone ameliorating the hardships of growing older with disability. The task may be herculean, but clean hands are needed to power wash the Augean stables.  Margaret Morganroth Gullette, Newton  [Editor’s note: Margaret Morganroth Gullette is a Resident Scholar at the Women's Studies Research Center at Brandeis University and a member of Dignity Alliance Massachusetts.]  <https://tinyurl.com/NextAdministrationTallOrder>   1. **Kaiser Health News**   April 18, 2022  *Private Equity Ownership of Nursing Homes Triggers Capitol Hill Questions — And a GAO Probe*  The [Government Accountability Office](https://www.gao.gov/), for instance, is investigating the ownership of nursing homes, including by private equity firms, and expects to issue a report in the fall, said [Chuck Young](https://www.gao.gov/about/contact-us/find-an-expert/chuck-young), the GAO’s managing director of public affairs. “The full scope of what we will cover has not been set yet, however the work will likely be focused on the information [the Centers for Medicare & Medicaid Services] has about nursing home ownership and how the agency uses that information,” Young wrote in an email.  The investigation comes in response to a pre-pandemic request from House Ways and Means Committee Chairman [Richard Neal](https://neal.house.gov/) (D-Mass.). Yet the pandemic has also underscored the importance of oversight of nursing homes, in light of the [lives lost](https://www.kff.org/policy-watch/over-200000-residents-and-staff-in-long-term-care-facilities-have-died-from-covid-19/#:~:text=More%20than%20200%2C000%20long%2Dterm,deaths%20over%20this%20bleak%20milestone.) to covid-19.  [Rep. Bill Pascrell](https://pascrell.house.gov/) (D-N.J.) submitted [a second request](https://pascrell.house.gov/uploadedfiles/2021.05.27_bp_to_gao_re_pe.pdf) to the GAO in 2021 regarding private equity investments in health care. It’s in GAO’s queue, but work on it hasn’t started, Young said.  The exponential growth in these private equity investments in recent years “has been associated with a host of trends that are negatively impacting the American people” — including an increase in nursing home mortality rates, wrote Pascrell, who chairs the Ways and Means Oversight Subcommittee. He noted the need to “better understand” the consequences of private equity’s involvement in health care and “the far-reaching impact” of “bankruptcies or closures following PE buyouts.”. .  From 2010 to 2019, there was [a large increase](https://www.antitrustinstitute.org/wp-content/uploads/2021/05/Private-Equity-I-Healthcare-Report-FINAL-1.pdf) in private equity companies buying up nursing homes, along with other investments in health care. An exact figure is elusive because private purchases are difficult to track, but it’s estimated that such groups own anywhere from 5% to 11% of nursing homes nationwide.  A growing body of research shows that health outcomes in private equity-owned facilities are worse than in those under other ownership. A [February 2021 study](https://www.nber.org/papers/w28474) from the National Bureau of Economic Research found that going to a facility owned by a private equity firm increased the chance that a resident would die by 10%, compared with living in another type of facility. That study was conducted from 2005 to 2017.  A [November 2021 Cornell University study](https://jamanetwork.com/journals/jama-health-forum/fullarticle/2786442) found that residents of private equity-owned nursing homes were more likely to have emergency room visits or be hospitalized than residents of other for-profit homes. Both studies found that Medicare’s costs per resident were higher, meaning more taxpayer dollars were being spent in private equity facilities.  <https://tinyurl.com/TriggersCapitalHillQuestions> | | |
| Healthcare | 1. **\*Washington Post**   November 20, 2022  *RSV, covid and flu push hospitals to the brink — and it may get worse*  Hospitals across the United States are overwhelmed. The combination of a swarm of respiratory illnesses (RSV, coronavirus, flu), staffing shortages and nursing home closures has sparked the state of distress visited upon the already overburdened health-care system. And experts believe the problem will deteriorate further in coming months. . .  The staffing shortages extend beyond physicians and nurses, and include technicians, respiratory therapists, and other hard-to-fill jobs. . .  More than [half a million people in the health-care](https://www.bls.gov/news.release/jolts.t04.htm#jolts_table4.f.2) and social services sectors quit their positions in September — evidence, in part, of burnout associated with the coronavirus pandemic — and the American Medical Association says [1 in 5 doctors plan](https://www.ama-assn.org/practice-management/physician-health/medicine-s-great-resignation-1-5-doctors-plan-exit-2-years#:~:text=One%20in%20five%20physicians%20say,to%20recently%20published%20survey%20research.) on leaving the field within two years.  The shortages have hit the health-care system like a tsunami, according to Thomas Balcezak, chief medical officer at Yale New Haven Health Hospital. He said physicians, nurses and support staff have experienced a shift in how the public treats them compared with 2020. . .  The hospital bottleneck is only going to get worse. During the pandemic, 327 [nursing homes were shut down](https://www.ahcancal.org/News-and-Communications/Fact-Sheets/FactSheets/SNF-Closures-Report.pdf) nationwide, causing 12,775 residents to be displaced, and more were projected to close this year.  Parrinello said nursing home bed availability in her region has gone from 4,500 to 3,000 because of facility closures. But most of the capacity issues can be attributed to existing nursing homes not being able to manage their capacity. “They don’t have the staff to keep the beds open and take in those patients,” Parrinello said.  <https://tinyurl.com/CovidFluPushHospitals> | | |
| Aging Topics | 1. **New York Times (free access)**   November 19, 2022  *President Biden Is Turning 80. Experts Say Age Is More Than a Number.*  The New York Times spoke to 10 experts in aging to paint a picture of what the next six years might look like for a person of the president’s age. . .  President Biden has said it is a “legitimate question to ask anybody over 70 years old whether or not they’re fit” to serve in the White House. To those who question his fitness, he has a stock answer: “Watch me.”. .  But while the risk of life-threatening diseases, dementia and death rises faster with each passing decade of a person’s life, experts in geriatrics say that people in their 80s who are active, engaged and have a [sense of purpose](https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2734064) can remain [productive and healthy](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8493820/) — and that wisdom and experience are important factors to consider. . .  The New York Times spoke to 10 experts in aging to paint a picture of what the next six years might look like for a person of the president’s age. . .  Scientists who study aging stress that chronological age is not the same as biological age — and that the two often diverge as people grow older. It is true that older people tend to decline physically, and the brain also undergoes changes. But in people who are active, experts say, the brain continues to evolve and some brain functions [can even improve](https://www.nia.nih.gov/news/some-brain-functions-may-improve-age) — a phenomenon experts call the “[neuroplasticity of aging](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6128435/).”  <https://tinyurl.com/BidenTurning80> | | |
|  | \*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](mailto:rmoore8473@charter.net). | | |
| Websites | **Massachusetts Senior Medicare Patrol (SMP) Program**  [**https://www.masmp.org/**](https://www.masmp.org/)  The *Massachusetts Senior Medicare Patrol (SMP) Program* is a statewide partnership between community-based organizations and mainstream agencies. Our objective is to reach and educate Medicare and Medicaid beneficiaries, family members, caregivers, and professionals on the importance of being engaged healthcare consumers to prevent [healthcare errors, fraud and abuse](https://masmp.org/errors-fraud-abuse/).  The MA SMP Program is designed to provide education and resources on how to address healthcare errors, fraud and abuse for Medicare and Medicaid beneficiaries, family members, caregivers, and professionals, with a focused effort on reaching limited English proficient, Native Americans and other hard-to-reach populations. | | |
| 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 *The Tuesday Digest.* | | |
| Previously posted funding opportunities | For open funding opportunities previously posted in *The Tuesday Digest* please see <https://dignityalliancema.org/funding-opportunities/>. | | |
| Nursing Home Closures | * **Quincy Health and Rehabilitation Center LLC, Quincy**   126 beds; current census: 77  Owner: Waschusett Healthcare  Star rating: 2 stars  Target closure: December 7   * **Attleboro Healthcare, Attleboro**   120 beds  Owner: Next Step Healthcare  Star rating: Special Focus Facility  Target closure: December 29   * **Dedham Healthcare, Dedham**   145 beds  Owner: Next Step Healthcare  Star rating: 1 star  Target closure: December 29   * **Gloucester Healthcare, Gloucester**   101 beds  Owner: Next Step Healthcare  Star rating: 3 stars  Target closure: December 30   * **Chetwynde Healthcare, West Newton**   75 beds  Owner: Next Step Healthcare  Star rating: 2 stars  Target closure: December 30  **NOTE: Admission freezes have been initiated in all facilities with closure plans.**  Closure Notices and Relocation Plans available at: <https://tinyurl.com/MANursingHomeClosures> | | |
| Pending nursing home change of ownership in Massachusetts | * Royal Health Cape Cod * Royal Health Cotuit * Royal Health Falmouth * Royal Health Megansett * Royal Health Meadow View – North Reading * Royal Health Wayland * Royal Wood Mill – Lawrence * Royal Health Fairhaven * Royal Health Braintree * Royal Health Norwell   <https://www.royalhealthgroup.com> | | |
| Websites of Dignity Alliance Massachusetts Members | See: <https://dignityalliancema.org/about/organizations/> | | |
| Assisted Living Residences Closures | * **Motif by Monarch** (previously Landmark at Ocean View), Beverly, July 2022 * **Connemara Senior Living,** Brockton, Summer 2022 * **Landmark at Longwood**, Mission Hill, Boston, October 5, 2022 | | |
| Nursing homes with admission freezes | **Massachusetts Department of Public Health**  *Temporary admissions freeze*  On November 6, the state [announced](https://www.mass.gov/news/baker-polito-administration-announces-additional-measures-to-protect-health-of-older-adults) that it would require certain high risk nursing homes and rest homes to temporarily stop all new admissions to protect the health and safety of residents and prevent further COVID-19 transmission.  Stopping admissions enables homes to focus resources such as staff and PPE on the health and safety of its current residents and enables the home to stabilize before taking on new residents. Homes that meet certain criteria will be required to stop any new admissions until the Department of Public Health has determined that conditions have improved, and the facility is ready to safely care for new residents. The Commonwealth will work closely with homes during this time and provide supports as needed to ensure resident health and safety.  There are a number of reasons why a facility may be required to stop admissions, and the situation in each facility is different. Some of the factors the state uses to make this decision include:   * Number of new COVID-19 cases within the facility * Staffing levels * Failure to report a lack of adequate PPE, supplies, or staff * Infection control survey results * Surveillance testing non-compliance   Facilities are required to notify residents’ designated family members and/or representative when the facility is subject to an admissions freeze. In addition, a list of facilities that are currently required to stop new admissions and the reason for this admissions freeze will be updated on Friday afternoons, and as needed when the Department of Public of Health determines a facility can be removed from the list.  **Updated on November 17, 2022. Red font – newly added**   |  |  |  |  | | --- | --- | --- | --- | | **Name of Facility** | **City/Town** | **Date of Freeze** | **Qualifying Factor** | | Attleboro Healthcare | Attleboro | 8/31/2022 | Closure notice | | Belvidere Healthcare Center | Lowell | 11/15/2022 | New cases | | Cape Heritage Rehab and Health Cen. | Sandwich | 10/26/2022 | Infection Control | | Care One at New Bedford | New Bedford | 11/8/2022 | New cases | | Charwell House Health and Rehabilitation | Norwood | 9/14/2022 | Infection Control | | Chetwynde | West Newton | 9/1/2022 | Closure notice | | Dedham Healthcare | Dedham | 7/6/2022 | Infection Control | | Elaine Center at Hadley | Hadley | 11/1/2022 | New cases | | Glenridge Nursing Care Center | Medford | 11/8/2022 | New cases | | Gloucester Healthcare | Gloucester | 9/1/2022 | Closure notice | | Lanessa Extended Care | Webster | 10/4/2022 | Infection control | | Life Care Center of the North Shore | Lynn | 11/15/2022 | New cases | | Parsons Hill Healthcare & Rehab Center | Worcester | 11/1/2022 | New cases | | Quincy Health and Rehabilitation Center LLC, Quincy | Quincy | 8/10/2022 | Closure notice | | Shrewsbury Nursing & Rehab Center | Shrewsbury | 11/8/2022 | New Cases | | Webster Manor Healthcare & Rehab | Webster | 11/1/2022 | Infection control | | Worcester Nursing & Rehab Center | Worcester | 11/8/2022 | New cases | | | |
| List of Special Focus Facilities | **Centers for Medicare and Medicaid Services**  *List of Special Focus Facilities and Candidates*  <https://tinyurl.com/SpeciialFocusFacilityProgram>  Updated October 26, 2022  CMS has published a new list of [Special Focus Facilities](http://act.theconsumervoice.org/site/R?i=Do5aNQZrWGM6olxiu2AJ4_afiElWm1WVgvZ1RbpcuQ2JtPUriN0edA) (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 July 27, 2022)**  **Newly added to the listing**   * None   **Massachusetts facilities not improved**   * Attleboro Healthcare, Attleboro   <https://tinyurl.com/AttleboroHealthcare>  **Massachusetts facilities which showed improvement**   * Marlborough Hills Rehabilitation and Health Care Center, Marlborough   <https://tinyurl.com/MarlboroughHills>  **Massachusetts facilities which have graduated from the program**   * Oxford Manor, Haverhill * Worcester Health Center, Worcester   **Massachusetts facilities that are candidates for listing**   * Charwell House Health and Rehabilitation, Norwood   <https://tinyurl.com/Charwell>  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225208>   * Medway Country Manor Skilled Nursing and Rehabilitation, Medway   <https://www.medwaymanor.com/>  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225412>   * Mill Town Health and Rehabilitation, Amesbury   No website  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225318>   * Plymouth Rehabilitation and Health Care Center   <https://plymouthrehab.com/>  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225207>   * Savoy Nursing and Rehabilitation Center, New Bedford   No website  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225423>   * South Dennis Healthcare, South Dennis   <https://www.nextstephc.com/southdennis>  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225320>   * Tremont Health Care Center, Wareham   <https://thetremontrehabcare.com/>  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225488>   * Vantage at Wilbraham   No website  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225295>   * Vantage at South Hadley   No website  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225757>   * Watertown Rehabilitation and Nursing Center, Watertown (added in June)   No website  Nursing home inspect information:  <https://projects.propublica.org/nursing-homes/homes/h-225425>  <https://tinyurl.com/SpeciialFocusFacilityProgram> | | |
| *Nursing Home Inspect* | **ProPublica**  ***Nursing Home Inspect***  Data updated November 2022  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>  **Deficiencies By Severity in Massachusetts**  [(What do the severity ratings mean?)](http://anha.org/uploads/ScopeSeverity2018.pdf)  # reported Deficiency Tag  [250](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=B&state=MA) **[B](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=B&state=MA)**  [82](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=C&state=MA) **[C](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=C&state=MA)**  [7,056](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=D&state=MA) **[D](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=D&state=MA)**  [1,850](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=E&state=MA) **[E](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=E&state=MA)**  [546](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=F&state=MA) **[F](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=F&state=MA)**  [487](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=G&state=MA) **[G](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=G&state=MA)**  [31](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=H&state=MA) **[H](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=H&state=MA)**  1 \_\_\_\_\_\_\_\_\_\_\_\_I  [40](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=J&state=MA) **[J](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=J&state=MA)**  [7](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=K&state=MA) **[K](https://projects.propublica.org/nursing-homes/findings/search?action=show&controller=state&id=MA&search=&ss=K&state=MA)**  2\_\_\_\_\_\_\_\_\_\_\_\_L | | |
| Nursing Home Compare | **Centers for Medicare and Medicaid Services (CMS)**  *Nursing Home Compare Website*  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:   * **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.   Posting of this information was required as part of the Affordable Care Act, which was passed in 2010. In many facilities, staffing is lower on weekends, often meaning residents have to wait longer or may not receive all the care they need. High turnover means that staff are less likely to know the residents, recognize changes in condition, or implement preferred methods of providing care. All of this contributes to the quality-of-care residents receive and their quality of life.  <https://tinyurl.com/NursingHomeCompareWebsite> | | |
| Data on Ownership of Nursing Homes | **Centers for Medicare and Medicaid Services**  *Data on Ownership of Nursing Homes*  CMS has released data giving state licensing officials, state and federal law enforcement, researchers, and the public an enhanced ability to identify common owners of nursing homes across nursing home locations. This information can be linked to other data sources to identify the performance of facilities under common ownership, such as owners affiliated with multiple nursing homes with a record of poor performance. The data is available on nursing home ownership will be posted to [data.cms.gov](https://nam02.safelinks.protection.outlook.com/?url=http%3A%2F%2Flem.memberclicks.net%2Fmessage2%2Flink%2Fc487d80a-54dd-4399-86c9-710488a160e6%2F16&data=05%7C01%7Cdroush%40strategiccares.com%7C68ada20fe8434fd9cbbc08daa0f947d3%7Cf9dded746cba4369b0bcc2aea0475c48%7C0%7C0%7C637999289781093402%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=4HpiwBLwf4RVullRX6UEBDAd0S1p1VTIZhEM9Z%2BUF3g%3D&reserved=0) and updated monthly. | | |
| Long-Term Care Facilities Specific COVID-19 Data | **Massachusetts Department of Public Health**  *Long-Term Care Facilities Specific COVID-19 Data*  *Coronavirus Disease 2019 (COVID-19) reports related to long-term care facilities in Massachusetts.*  **Table of Contents**   * [COVID-19 Daily Dashboard](https://www.mass.gov/info-details/long-term-care-facilities-specific-covid-19-data#covid-19-daily-dashboard-) * [COVID-19 Weekly Public Health Report](https://www.mass.gov/info-details/long-term-care-facilities-specific-covid-19-data#covid-19-weekly-public-health-report) * [Additional COVID-19 Data](https://www.mass.gov/info-details/long-term-care-facilities-specific-covid-19-data#additional-covid-19-data) * [CMS COVID-19 Nursing Home Data](https://www.mass.gov/info-details/long-term-care-facilities-specific-covid-19-data#cms-covid-19-nursing-home-data) | | |
| DignityMA Call to Action | * The MA Senate released a report in response to COVID-19. **Download the** [**DignityMA Response to Reimagining the Future of MA**](https://dignityalliancema.org/wp-content/uploads/2022/02/Reimagining-the-Future-of-MA.pdf). * **Advocate** for state bills that advance the Dignity Alliance Massachusetts’ Mission and Goals **–** [**State Legislative Endorsements**](https://dignityalliancema.org/legislative-endorsements/). * **Support** relevant bills in Washington **–** [**Federal Legislative Endorsements**](https://dignityalliancema.org/federal-legislative-endorsements/). * **Join** our [**Work Groups**.](https://dignityalliancema.org/about/working-groups/) * **Learn** to use and leverage Social Media at our workshops: [**Engaging Everyone: Creating Accessible, Powerful Social Media Content**](https://dignityalliancema.org/2022/02/09/social-media-workshops/) | | |
| Access to Dignity Alliance social media | Email: [info@DignityAllianceMA.org](mailto: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](http://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](mailto:bhenning@bostoncil.org)  [paul.lanzikos@gmail.com](mailto:paul.lanzikos@gmail.com) |
| Behavioral Health | Frank Baskin | [baskinfrank19@gmail.com](mailto:baskinfrank19@gmail.com) |
| Communications | Pricilla O’Reilly  Samantha VanSchoick  Lachlan Forrow | [prisoreilly@gmail.com](mailto:prisoreilly@gmail.com)  [svanschoick@cil.org](mailto:svanschoick@cil.org)  [lforrow@bidmc.harvard.edu](mailto:lforrow@bidmc.harvard.edu) |
| Facilities (Nursing homes, rest homes, assisted living) | Arlene Germain | [agermain@manhr.org](mailto:agermain@manhr.org) |
| Home and Community Based Services | Meg Coffin | [mcoffin@centerlw.org](mailto:mcoffin@centerlw.org) |
| Housing | Bill Henning | [bhenning@bostoncil.org](mailto:bhenning@bostoncil.org) |
| Legislative | Richard Moore | [rmoore8743@charter.net](mailto:rmoore8743@charter.net) |
| Legal Issues | Jeni Kaplan | [jkaplan@cpr-ma.org](mailto:jkaplan@cpr-ma.org) |
| Veteran Services | James Lomastro | [jimlomastro@comcast.net](mailto:jimlomastro@comcast.net) |
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| *Dignity Alliance Massachusetts is a broad-based coalition of organizations and individuals pursuing fundamental changes in the provision of long-term services, support, and care for older adults and persons with disabilities.*  *Our guiding principle is the assurance of dignity for those receiving the services as well as for those providing them.*  *The information presented in “The Dignity Digest” is obtained from publicly available sources and does not necessarily represent positions held by Dignity Alliance Massachusetts.*  *Previous issues of The Tuesday Digest* and *The Dignity Digest are available at:* [*https://dignityalliancema.org/dignity-digest/*](https://dignityalliancema.org/dignity-digest/)  *For more information about Dignity Alliance Massachusetts, please visit* [*www.DignityAllianceMA.org*](http://www.DignityAllianceMA.org)*.* | | | |