ReiMAgine Aging: Age- and Dementia-Friendly Massachusetts Action Plan Refresh

Please provide your feedback on how to make Massachusetts more age- and dementiafriendly and how to strengthen the state's five-year-old multiyear Age-Friendly Massachusetts Action Plan.

1. What do you like about growing older in your community? Why?

As a statewide, non-profit organization, Dignity Alliance defines "community" as the entire Commonwealth. For the Commonwealth to be considered "age-and dementia-friendly," it takes more than putting up a sign on the town boundaries or website. Before Massachusetts should claim to be "age-friendly," every community needs to buy into the concept. Unfortunately, that is not yet the case. We need to consider the words of Governor John Winthrop in his sermon aboard the *ARBELLA*, when he proclaimed in 1630, " we shall be as a city upon a hill. The eyes of all people are upon us."

2.How have you been able to contribute to your communities' efforts to support aging well?

- a) Dignity Alliance has enjoyed some success in advancing age-friendly policies, perhaps most important, we supported efforts through a class action suit, "Marsters v. Healey," the settlement for which will require the Commonwealth to help at least 2400 nursing home resident to return home to their communities over the next eight years.
- b) Dignity Alliance was instrumental in efforts to revise Mass Health policy to create an Independent Assessment Entity for administering applications and assessment for long-term services and supports, and re-directing the effort to improve the system that currently provides more localized direct contact with clients on what services are available, who qualifies and how to get appropriate assistance. The improvements are expected to be designed and implemented in the next three years.
- c) Dignity Alliance played an important role in the development and enactment of long-term care reform of nursing home care and assisted living and will continue to provide input as regulations are promulgated and the reforms are implemented.
- d) Dignity Alliance actively advocates and testifies at legislative and regulatory hearings related to older adults and people with disabilities.

3. Looking forward to the next 5 - 10 years, what are the top three ways we can best support people to age well?

- a) Massachusetts needs to increase support for home and community-based supports and services over institutional care, and to protect those in nursing homes by rigorously enforcing the laws and regulations governing long-term care.
- b) Massachusetts needs to do a better job implementing its strategic plan on aging and evaluating the programs that purport to make communities and the state to be age-friendly. Leadership of aging policy needs to have a seat at the table when policy and funding decisions are made. Specifically, the Secretary of the Executive Office of Elder Affairs (or Aging and Independence if the name is changed) must be a full member of the Governor's Cabinet, as provided by current law, and not subordinate to Health and Human Services.
- c) Massachusetts needs to fully implement Diversity, Equality, Inclusion AND accessibility in its programs for older adults, especially those with dementia so that they provide the growing population of older adults with dignity and respect, and combat ageism and ableism just as rigorously as other civil rights.
- d) Within the next five years, adults over age 60 are expected to be about 25% of the Massachusetts population. There needs to be a plan to train more geriatric health care providers and to expose all health care providers to become accustomed to treating older patients. UMass Medical School at one time provided a program for all resident physicians over a weekend retreat to understand the needs and issues of providing care to those over age 60.

4. What are the factors or barriers to aging well that would make you move to another community?

- a) Massachusetts has, according to surveys, the second highest cost of living in the U.S. Older adults and people with disabilities often have limited incomes, taxes, utilities, mortgage and rental costs, transportation, and health care are significant burdens. Other states are less costly, and if those states provide needed services and supports, it will not only be younger, college-educated people who will be part of those seeking greener pastures.
- b) Enactment and enforcement of laws providing older adults and people with disabilities the ability to attend and comment at federal, state, and local meeting both in person and virtually. Government should also improve and make widely available the technology and training needed to broaden participation so that all levels of government guarantee that public policy development is both age- and able-friendly. Given the financial and personnel issues faced by the media, such a system would enable the media to cover policy development remotely in order to promote wider understanding of government activities.
- c) Social workers are an essential part of the nursing home care team, and they should receive at least equal consideration when viewing staffing needs. No one else in a nursing home is qualified to help with the psychosocial needs of both

the resident and the family, like social workers. The regulations governing social workers are outdated and some 30 years old. The number of social workers and their hours need increasing. So many residents were isolated and lonely during the pandemic in particular, and yet there weren't enough social workers on staff to help them and the anxious families who did not have access to their loved ones with lockdowns. So much suffering, and yet no one tried to bring in more social workers to help. It is the same issue now without a lockdown, so many needs go unaddressed as there are not enough social work hours to address serious needs. To have only enough social work hours to address paperwork is not going to address psychosocial needs of a real live resident. Plus, social workers will be retained if their job gives them the satisfaction of doing more than paperwork, but actually getting to work with and getting to know and help residents. That relationship building with social workers who can help them, is what long-term care needs.

5. What are big actions or policies that will better support people as we grow older in our communities?

- a. Restore the Secretary of Elder Affairs to full cabinet status and establish an interagency coordinate council to understand that older adults need services from other agencies such as housing and transportation.
- b. Strong leadership, including a permanent appointee as Secretary with full participation in the Governor's Cabinet it vital to the implementation of the ReiMAgine Aging policies
- c. Creation of a Massachusetts Inter-Agency Coordinating Council, chaired by the Secretary of Elder Affairs and including all of the agencies that impact the lives of older adults and people with disabilities is essential to share communication, information and programs to improve services for this population and offset the limiting effects of a stove-piped bureaucracy. This coordination is already in place at the federal level through the Administration for Community Living.

6.What are the **top 5** aging-related topic areas that you think should be addressed in the statewide Age-and Dementia-Friendly action plan? (Please select your top 5 topics.)

Please select at most 5 options.

Accessible Communication (e.g., Create accessible information about community news, events, resources, and services; translate materials into languages other than English and create communication materials in formats accessible for the blind, visually impaired, deaf, and hard of hearing communities.)

Ageism and Age Discrimination (e.g., Promote the value and contributions of older adults in their communities, reduce stigma associated with aging and disability, including cognitive impairment.)

<u>X - Caregivers</u> (e.g., Support paid and unpaid caregivers, including those living with dementia and their caregivers; respite care and social/supportive day programs.) Climate Resilience (e.g., Build community capacity for older adults' climate resilience, preparation and advocacy for hazard mitigation, extreme heat safety, and climate adaptation actions.)

Dementia Education and Support (e.g., Train and provide information for caregivers to support people with dementia; increase connection and collaboration between of community-based social services providers, community-based organizations, and dementia care coordination resources.)

<u>X - Digital Equity</u> (e.g., Increase older adults' affordability and access to digital devices, online access, and digital literacy.)

Economic Security (e.g., Explore family caregiver tax credit; increase opportunities for workers without access to retirement saving plans at work to create their own savings accounts; increase access to healthy and nutritious food; and increase employment opportunities for older adults.)

Education about Aging (e.g., Educate thought leaders, policy makers, and communities on issues related to aging, and older people.)

Health and Wellness (e.g., Increase social and physical activity opportunities; improve access and affordability of health care coverage for older residents; increase the use of state benefits such as Medicare savings program.)

<u>X - Home and Community Based Care</u> (e.g., Increase programs that assist people to stay in their homes, in-home services, villages, intergenerational living, etc.)

<u>X - Housing</u> (e.g., Increase affordable housing options for older adults, including service enriched housing, assisted living, etc.)

Loneliness and Social Isolation (e.g., Increase programs that facilitate connection and communication for lonely or socially isolated older people.)

Planning for a long life (e.g., Assist people and caregivers plan for themselves and the future of their care recipients; increase financial literacy education, etc.)

Policy change (e.g., Establish and update state policies to be inclusive of older adults and caregivers.)

<u>X-Transportation and Mobility</u> (e.g., Improve access and affordability of transportation services, including two-person assist, and supportive transportation options.)

7. Are there any other aging-related topic areas that you would like to add?

All of the above issue areas and the ability to move progressive policies in each area forward are dependent upon our effective **response to Ageism and Ableism**. Discrimination based on age or physical/mental/behavioral abilities must be addressed to build public consensus to advance programs and services on any of these issues.

8.Any other information or ideas you would like to share:

In reviewing the list of priorities, it is important to note that transportation is vital to addressing the limited mobility of some older adult and people with disabilities. It should be free and all forms need to be accessible for those with mobility issues.

Housing that is both affordable and accessible is of limited value without the option for services and supports that older adults and people with disabilities need to live independently. Housing locations need to be near community services. If built in areas where land is less expensive, these areas need to be supported with transportation services.

Caregivers, especially those who are unpaid, need and deserve tax credits to ease the burden of needing to spend time giving care as opposed to earning more through employment.

Training caregivers to serve the needs of an increasingly frail older adult community is essential. Training nursing home surveyors to recognize the absence of person-centered care is vital to preventing abuse and improving care.