



The Dignity Digest

Issue # 211

November 12, 2024

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

	<p>*May require registration before accessing the article.</p>
<p>DignityMA Zoom Sessions</p>	<p>Dignity Alliance Massachusetts participants meet via Zoom every other Tuesday at 2:00 p.m. Sessions are open to all. To receive session notices with agenda and Zoom links, please send a request via info@DignityAllianceMA.org.</p>
<p>Spotlight</p>	<p><u>PACS Group: How To Become A Billionaire In The Skilled Nursing Industry By Systematically Scamming Taxpayers</u></p> <p>Hindenburg Research November 4, 2024</p> <p>Summary: Hindenburg Research has released a scathing report alleging that PACS Group, a skilled nursing facility operator, has engaged in fraudulent practices to inflate revenue and profits. Key allegations include:</p> <ul style="list-style-type: none"> • Abuse of COVID-era waivers: PACS is accused of inappropriately using COVID-related waivers to increase Medicare reimbursements for patients who did not qualify for skilled care. • Fraudulent billing practices: The report claims that PACS has engaged in fraudulent billing practices, including billing for unnecessary therapies and services. • Misleading financial reporting: Hindenburg alleges that PACS has misrepresented its financial performance by inflating revenue and profits. • Questionable hiring practices: The report alleges that PACS hires inexperienced individuals as administrators, who are then pressured to engage in fraudulent practices. • Excessive executive compensation: The report highlights the significant compensation packages received by PACS' founders, particularly during the period of alleged fraudulent activity. <p>Hindenburg's report raises serious concerns about PACS' business practices and its long-term viability. The company's stock price has declined significantly following the release of the report, and it faces potential regulatory scrutiny and legal action. Read Report</p>
<p>Spotlight</p>	<p><u>Quality nursing home care requires quality staff</u></p> <p>The Gazette By Mary Timp November 10, 2024</p> <p>Most people don't want to be in a nursing home. That's especially so because some of our homes are scary. Dangerously scary.</p>

In fact, nearly every week, we learn of a nursing home somewhere in Iowa being cited for providing poor care. I'm not talking about things like the soup being watery or served cold. I mean egregious stuff like people who need help to turn over in bed but are left in place for so long they develop bed sores that result in open wounds that become infected, and in some instances have resulted in death.

Other cases involve people falling and being badly hurt when the falls could have been prevented.

More common is people needing help to stand and walk or use the bathroom but whose call for help goes unanswered for long periods of time.

Yes, these things happen in Iowa, in homes all over the state – in our larger cities and in small communities. Poor care knows no geographic boundary.

There are hundreds of nursing homes in Iowa. Many are doing a good job, but others are abysmal. Is there a secret sauce that separates the “good” from the “bad”? One key ingredient is the staff, the people technically called direct-care givers. Usually, we call them nurse aides or a similar name.

We have too few of these care givers, and they're almost universally poorly paid. It's common – and accurate – to say they make less than fast-food workers. This, despite them having a lot more responsibility and training.

Besides how poorly they're paid, what else is there to know about our care givers? For starters, if you're a resident of a nursing home or visit someone in a home, you see that care givers are overwhelmingly women.

Another feature of this workforce is that, given their poor pay, they often must work more than one job or multiple shifts to make ends meet. It doesn't take a rocket scientist to understand that care givers in these circumstances are often exhausted and stressed, so not working up to the standards we'd wish them to meet.

Result: Poor care.

Care givers are also big users of social supports: They shop at second-hand stores for their clothes and those of their children; they often qualify for SNAP (food stamps) and subsidized housing and childcare, when they can find it.

Over the years, when I've talked with policy makers about this situation, some – Democrats AND Republicans – flippantly remark that care givers will “work their way up.” That's not true.

There's no “working your way up.” There's no career ladder. It's true that some people “try out” health care by working in a nursing home to see if they want to train to be a nurse or another health-care professional. But that's very few people. And “incentivizing” people to leave care giving by paying them little only results in the massive turnover we see in this workforce. The result, again: Poor care.

	<p>As a public information officer for the state, with stints at both the then Department of Inspections and Appeals and the Department of Human Services, I read dozens of facility inspection reports to prepare to answer questions from reporters and the public. (You should know that unlike in some states, Iowa is fortunate to have registered nurses as inspectors; they know their stuff.)</p> <p>What I learned from that experience is how pivotal care givers are to the success of a nursing home: Inevitably, the homes cited for poor care are those that don't have enough staff to do the work. My mother was a nurse aide in a rural Iowa nursing home for 23 years. She began at the age of 52 after my father, a farmer, died suddenly during the farm crisis. Mom hung onto the farm by renting the land. And she worked "off the farm," as they say, in a local nursing home plus she was a substitute rural mail carrier. She was 75 when she finally felt comfortable enough to retire. Hers is not a unique story. Many care givers are in circumstances in which they find work in their communities to continue to live where they are, or they don't have the flexibility to take on other work. We shouldn't look down on them. We need these people. And many, like my mother, see their work as a profession. Some people are saying we need different care models. I agree. But let's remember: We'll always need care givers no matter the models we choose.</p> <p>Right now, what we desperately need to improve care in our nursing homes – to eliminate the scariness – are care givers who enjoy the work, get satisfaction from it, and want to stick with it. We should treat them like the professionals they are by hiring enough of them and paying them what they deserve.</p>
<p>Quotes</p>	<p><i>We feel confident that we have identified the bottom of the bottom dwellers and need to bring them to the attention of other professionals and the public. We are curious about why a chain like the one described in this post [Reliant Care Management, LLC] is allowed to operate with impunity.</i></p> <p><u>RELIANT HEALTH CARE MANAGEMENT LLC: THE WORST NURSING HOME CHAIN IN AMERICA</u>, Tallgrass Economics, November 10, 2024</p> <p><i>Our 5-month investigation, including interviews with 18 former employees, competitors, and an analysis of 900+ detailed facility-level cost reports, revealed that PACS' "turnaround" strategy largely boils down to systematically scamming taxpayer-funded healthcare programs.</i></p>

In one key example, PACS abused a COVID-era waiver, inappropriately accessing skilled care Medicare benefits for thousands of patients across its national portfolio of facilities, according to our investigation. We estimate the scheme drove more than 100% of PACS' operating and net income from 2020 – 2023, enabling PACS to IPO in early 2024 with the illusion of legitimate growth and profitability.

[PACS Group: How To Become A Billionaire In The Skilled Nursing Industry By Systematically Scamming Taxpayers](#), Hindenburg Research, November 4, 2024

A former PACS regional manager told us as little as one Covid case would be used to flip an entire building to Medicare: "... As soon as one person tested [COVID-19] positive in our building, boom, wildfire, every single person gets flipped [to Medicare], absolutely inappropriately".

[PACS Group: How To Become A Billionaire In The Skilled Nursing Industry By Systematically Scamming Taxpayers](#), Hindenburg Research, November 4, 2024

"They would pay a licensing fee of like \$1,000 a month or \$2,000 a month to hang someone's license... It was very common to have people's licenses covering multiple buildings and not having enough actual licensed people working. They also had the Regional Director's licenses hanging in buildings also, even though they weren't working in the buildings."

[PACS Group: How To Become A Billionaire In The Skilled Nursing Industry By Systematically Scamming Taxpayers](#), Hindenburg Research, November 4, 2024

A former administrator told us: "... part of the reason of hiring these really, really, young guys is that they don't know better. They will do whatever the upper management tells them to do...". Another said: "...they just hired young guys that had no experience in the business that didn't even understand the risk or the regulations."

[PACS Group: How To Become A Billionaire In The Skilled Nursing Industry By Systematically Scamming Taxpayers](#), Hindenburg Research, November 4, 2024

Right now, what we desperately need to improve care in our nursing homes – to eliminate the scariness – are care givers who enjoy the work, get satisfaction from it, and want to stick with it. We should treat them like the professionals they are by hiring enough of them and paying them what they deserve.

Mary Timp, [Quality nursing home care requires quality staff](#), The Gazette, November 10, 2024

Effective Oct. 1, CMS now [requires](#) nursing homes to disclose more detailed ownership information as part of an Affordable Care Act final rule issued Nov. 15, 2023.

[CMS nursing home ownership reporting: 5 things to know](#), Beckers Hospital Review, November 5, 2024

People with dementia largely were admitted to larger nursing homes, facilities that were more likely to be for-profit, nursing homes that were less likely to be hospital based, and facilities with lower star ratings.

[People with dementia more apt to be admitted to nursing homes with lower star ratings](#), McKnights Long-Term Care News, November 5, 2025

“My sister has been here 11 years, but there are some of these people who have been here for 20, 30 years, and you’re just – in a day and a half – going to throw them out of the building?”

Mary, a sister of a resident at Rochelle Rehabilitation & Health Care Center, [Rochelle nursing home residents, staff given 2 days to vacate due to sudden closure](#), Mystaline.com, November 5, 2024

“Phoenix Food Hub is a true community collaboration. . . We are able to broaden our coalition to reach and serve even more people of all ages in our communities.”

Kathryn C. Burns, CEO of Greater Lynn Senior Services, [Phoenix Food Hub](#), Greater Lynn Senior Services

“We have a clear and shared understanding of what it means [about older adults] in a marriage. We don’t have

that kind of road map for a cohabiting or living-apart-together lifestyle.”

Susan Brown, a sociologist at Bowling Green State University in Ohio who studies aging and relationships, [For Older Unmarried Couples, Caregiving Obligations Can Be Murky](#), *New York Times, November 10, 2024

[S]ome 18 months after his second wife died, and without the knowledge of any family members, the 85-year-old [billionaire founder and owner of Life Care Centers of America, Forrest Preston] “inexplicably” married Kim Phuong Nguyen, a 49-year-old Vietnamese immigrant who was the recently passed wife’s former caregiver. She and family members have a history of grifting “that spans several decades” in several states.

[Emergency Petition Seeks to Expedite Conservatorship for CEO of Nursing Home Giant Life Care Centers](#), Skilled Nursing News, November 6, 2024

Mobbing has been shown by [Janice Harper](#) and by the research and reports of the Massachusetts [Commission on Bullying](#) to harm not only the targets but also to infect the whole community. When that happens in public or subsidized housing, the target and many others lose the peaceful enjoyment of their home and it becomes ruled by mobbing and harassment.

[Sticks, Stones, Gossip & Governance Part 1 of 2](#), Stop Bullying Coalition, November 2, 2024

Under HUD Fair Housing Law, hostile environment harassment infringes on the rights of tenants and the housing provider is responsible for preventing such harassment. Under Massachusetts law, harassment that infringes on the rights of tenants is unlawful and it is the responsibility of the housing provider to prevent it. . . Regardless of the underlying motivations—racial prejudice or the low social status of tenants or competition for power and control—the situation of a person who is a target of mobbing is a constant source

of frustration and stress. Is this not "hostile environment harassment?"

[Sticks, Stones, Gossip & Governance Part 2 of 2](#), Stop Bullying Coalition, November 7, 2024

Each veteran and military family represents a link in a chain of honor that stretches back to our founding days, unwavering in their devotion to their loved ones who served in uniform. This month, we honor all of our military and veteran families. They too serve and sacrifice to answer our Nation's call to duty. We owe them a debt of gratitude we can never fully repay.

[A Proclamation on National Veterans and Military Families Month, 2024](#), The White House, October 31, 2024

It started on Monday when well-known short-seller, Hindenburg Research, targeted [nursing home operator, [PACS Group Inc.](#)] in a report alleging that the company has been "systematically scamming taxpayer-funded health-care programs."

[Nursing Home Firm Founders Lose Billions as Hindenburg Takes Aim](#), Yahoo Finance, November 8, 2024

"Our administration is committed to investing in our veterans, and this new facility represents our promise to provide them with top-tier, compassionate care. Together, we are building a future that reflects the respect and dignity our veterans deserve."

Lieutenant Governor Kim Driscoll, [Healey-Driscoll Administration Marks Major Milestone for New Holyoke Veterans Home During 'Topping Off' Ceremony](#), Office of Governor Maura Healey and Lt. Governor Kim Driscoll, November 7, 2024

Decades ago, old folks' homes and almshouses were replaced by nursing homes modeled after hospitals. The message portrayed was that old people would become ill, frail, in need of care and a burden to society. How different our western culture is from a vast part of the rest of the world where Elders are honored.

[How we refer to aging says a lot about our visions of the future](#) cjonline.com, November 11, 2024

“If the SNF is uncertain as to whether a certain party must be reported, it should disclose said party. As we stated in the November 17, 2023, final rule: ‘In general, this rule should be construed towards disclosure and, if in doubt about whether additional information should be released, SNFs should disclose it.’”

CMS memo regarding [the rule](#) governing “Disclosures of Ownership and Additional Disclosable Parties Information”, [CMS gives nursing homes months more to complete onerous revalidation process](#), **McKnights Long-Term Care News**, November 11, 2024

[Chair of the Highview at Northampton Residents’ Council] Danica Ali asked the Department of Public Health to delay the end date to July.

Some residents want to transition into housing instead of another nursing home and want more time to find a place to live, she told the state at a virtual public hearing Wednesday night.

“There’s not enough time to do so,” she said.

Ali told The Republican she has a Section 8 voucher and is trying to find an accessible apartment.

[As Highview of Northampton moves to close, sexual abuse allegations emerge](#), ***Masslive.com**, November 7, 2024

The [Highview of Northampton] Administrator said that the conclusion of the Facility’s investigation that they substantiated the allegations of sexual abuse, based on multiple allegations from alert and oriented residents with similar stories occurring over several days.

[SUMMARY STATEMENT OF DEFICIENCIES](#) Highview of Northampton, **Centers for Medicare & Medicaid Services**, August 15, 2024

“We had a government of too many layers, too much bureaucracy, leading to an awful result [at the Holyoke Veterans’ Home].” With the new law, and responsiveness from the Healey administration, “I am much more comfortable with where we are right now versus a few years ago. Yet, you just don’t sit back on

	<p><i>your laurels. We must be just as vigilant. Bad things can happen.”</i></p> <p>State Senator John Velis, a veteran of the US Army Reserve who is currently a major in the Massachusetts Army National Guard, Signs of progress this Veterans Day (*Boston Globe, November 11, 2024)</p> <p><i>“Primarily my patients feel left out. All of us experienced this pandemic. But the White House says the public health emergency is behind us. Now they get shuttled between doctors, or told it’s all in their head. And as a result, they feel the world has moved on and left them behind. ”</i></p> <p>Dr. Ziyad Al-Aly, a leading long COVID researcher who runs a long COVID clinic at the VA St. Louis Health Care System, ‘We just want to be heard’: Long COVID patients still feel invisible, *Boston Globe, November 9, 2024</p>
<p>Online Panel Featuring DignityMA Participants</p>	<p>Office of Middlesex District Attorney Marian Ryan Anti-Hate Anti-Bias Task Force Thursday, November 14, 2024 10:00 a.m.</p> <p><i>Panel Presentation</i></p> <p>Featured presenters:</p> <ul style="list-style-type: none"> • Jerry Halberstadt is a dedicated advocate for the rights and well-being of elderly and disabled individuals, particularly in the context of housing and community living. As the Coordinator of the Stop Bullying Coalition, Halberstadt has been at the forefront of efforts to combat bullying and abuse in multifamily housing settings • Margaret Morganroth Gullette is a prominent resident scholar at the Women's Studies Research Center at Brandeis University, where she focuses on cultural studies of age. An accomplished nonfiction writer and essayist, she is also an active advocate for age-related issues. Gullette has authored several influential works, including her latest book, <i>American Eldercide</i>, which has been nominated for a Pulitzer Prize and the National Book Award. Her contributions to the discourse on ageism and cultural perceptions of aging continue to shape discussions in her field. <p>In 2020, the Middlesex District Attorney's Office launched the Anti-Hate, Anti-Bias Task Force to address the increase of hateful, biased and racist incidents occurring in the Middlesex County. The goal of this task force is to identify, address and prevent these events from happening in the communities.</p> <p>The Task Force, made up of stakeholders, including lawmakers, mayors, faith leaders, educators and youth leaders, community advocates and law enforcement takes a multi-pronged approach to engage the community in addressing these issues. By bringing together community leaders to address these incidents, the District Attorney’s Office will be able to more rapidly respond to incidents and recognize trends that will help with targeted prevention and education.</p>

	<p>Register in advance for this meeting: https://www.zoomgov.com/meeting/register/vJlsduivpzotGpAXCIRbjxy6gjjqljZwCPw</p>
<p>Comments by Dignity Alliance Massachusetts Participants</p>	<p>Stop Bullying Coalition November 2, 2024 Sticks, Stones, Gossip & Governance Part 1 of 2 By Jerry Halberstadt Summary: The article discusses the harmful effects of mobbing, particularly in public and subsidized housing. It highlights the power imbalance between tenants and housing authorities, where tenants often feel marginalized and disrespected. A specific case study in Salem, Massachusetts, is used to illustrate these issues. The Chair of the Salem Housing Authority Board, Veronica Miranda, a tenant commissioner, has been accused of creating a hostile work environment by staff. However, an independent investigation found no merit to these claims. The article argues that the real issue lies in the breakdown of governance and the lack of collaboration between tenants, the board, the executive director, and staff. It emphasizes the importance of fostering a positive and supportive environment where everyone feels heard and respected. The article concludes by questioning whether the two key figures, Veronica Miranda and Cathy Hoog, can work together to create a more harmonious and effective housing authority.</p> <p>Stop Bullying Coalition November 7, 2024 Sticks, Stones, Gossip & Governance Part 2 of 2 By Jerry Halberstadt Summary: The report outlines a situation of alleged mobbing and hostile environment harassment against Beatrice, a tenant commissioner of the Oldtown Housing Authority (OHA). The harassment is alleged to come from both tenants and staff and is exacerbated by the actions of the executive director, Jennifer. Key allegations include:</p> <ul style="list-style-type: none"> • Racial prejudice: Beatrice, a Black woman, has been subjected to racial slurs and graffiti. • Mobbing and harassment: A group of tenants, allegedly influenced by the executive director, has been targeting Beatrice with bullying and harassment. • Failed oversight: The OHA board, particularly its chair, has failed to address the situation and protect Beatrice. • Abuse of power: The executive director has been accused of misusing her position to intimidate and control tenants and board members. <p>The report calls for a thorough investigation into these allegations and appropriate action to rectify the situation. It emphasizes the importance of protecting tenants' rights and ensuring a safe and respectful living environment.</p>
<p>Opportunity for Public Comment</p>	<p>Office of Attorney General Andrea Campbell Attorney General's Office Seeks Community Feedback To Inform Drafting Of Assisted Living Residences Regulations</p>

To submit comments:

https://massgov.formstack.com/forms/community_feedback_on_a_go_assisted_living_residences

The Massachusetts Attorney General's Office (AGO) is seeking public feedback to inform drafting consumer protection regulations for assisted living residences in Massachusetts. Members of the public can provide comments to the AGO through an online form, available [here](#).

Through regulation, the AGO seeks to protect residents of assisted living residences from unfair and deceptive acts and practices, including misrepresentation of available services, improper fees, and unlawful evictions. The aging population served by these facilities would benefit greatly from stronger consumer protections in all of these areas, and owners and operators will benefit from greater specificity regarding their legal obligations. At this time, Massachusetts does not have consumer protection regulations specific to assisted living residences.

"We know the best way to serve our constituents is by listening to them," said **Attorney General Andrea Joy Campbell**. "Every resident of an assisted living facility has the right to live in a safe and habitable environment, free from abuse, neglect, and exploitation. Our older adults deserve to age safely with dignity and respect, which is why creating consumer protection regulations for assisted living facilities is so important and responsive to their advocacy."

Assisted living residences are designed for older adults who can live independently in a home-like environment, but may need help with daily activities like housekeeping, bathing, or medication assistance.

According to the Executive Office of Elder Affairs, more than 17,000 people currently live in these residences in Massachusetts and have various options available to them. It is critical that consumers know what to expect when choosing an assisted living residence as their home.

[Chapter 93A](#), the consumer protection statute, authorizes the Attorney General to promulgate regulations to protect consumers. These regulations can require that facilities make certain disclosures about their contractual terms, and they also can declare certain acts and practices to be unlawful.

Those who wish to provide feedback on the creation of regulations can do so through an online form, which can be found [here](#).

The AGO will use this feedback to inform draft regulations and will then proceed to promulgate regulations, a process which will include the publication of proposed regulations, a public hearing, and opportunities for the public to comment on the proposed regulations.

This project is being handled by Director Mary Freeley and Deputy Director Valerie Frias of the AGO's [Elder Justice Unit](#). AG Campbell created the Unit in August 2023 to protect and promote the safety and well-being of elders through enforcement actions, legislative advocacy, and community engagement and education.

Statements of Support:

Acting Secretary Robin Lipson, Executive Office of Elder

Affairs: "We thank Attorney General Andrea Joy Campbell and her team for their dedication to protecting residents in assisted living. The demographics of these residents continues to evolve – they are now older, with more complex needs, and it is essential that we ensure these individuals are informed and protected as they navigate their living options. Elder Affairs looks forward to working with the Attorney

	<p>General’s Office as the team explores ways to address assisted living residence consumer issues.”</p> <p>Former Senator Richard Moore, Co-Founder of Dignity Alliance and Member of the Leadership Council of the National Consumer Voice for Quality Long-Term Care: “Protecting older adults in assisted living facilities from financial, or other forms of abuse, is an important goal for Dignity Alliance. Attorney General Campbell deserves high praise for taking action to expand consumer protections to this vulnerable population. And since October is designated as "Residents' Rights Month," it’s a great time to launch the development of this vital effort.”</p> <p>John Ford, Northeast Justice Center and Dignity Alliance: “The Attorney General’s concern for the residents of more than 250 Assisted Living Residences in Massachusetts echoes the concerns of many residents, their loved ones and their advocates. Their advocates in particular know the value and scope of the protections afforded by regulations issued pursuant to the Consumer Protection Act (chapter 93A), which give weight and specificity as to what would be an unfair act or practice. We applaud the Attorney General’s commitment to the growing numbers of consumers who will be protected by the regulations.”</p> <p>Kathleen Lynch Moncata and Liane Zeitz, Mass. Chapter of the National Academy of Elder Law Attorneys: “Massachusetts has a long history of pioneering consumer protections for vulnerable populations such as nursing home residents and tenants and we welcome comparable protections for consumers of assisted living residences (ALRs). ALR residents currently have little legal recourse when they do not receive the quality of care they’ve contracted for or when their rights are violated. We support Attorney General Campbell’s efforts to provide increased protections for this vulnerable population.”</p> <p>To submit comments: https://massgov.formstack.com/forms/community_feedback_on_a_go_assisted_living_residences</p>
<p>Recruitment</p>	<ul style="list-style-type: none"> • Assistant Director of Organizing, Mass Alliance of HUD Tenants • Assistant Undersecretary of Housing Stabilization, Executive Office of Housing and Livable Communities • Chief Equity Strategist, Massachusetts Law Reform Institute • Chief Executive Officer, Ethos • Chief of Staff – Housing Stabilization, Executive Office of Housing and Livable Communities • Deputy Director of Older Adult Services, City of Newton • Education Staff Attorney, Massachusetts Advocates for Children • Senior Attorney, Massachusetts Advocates for Children
<p>Guide to news items in this week’s Dignity Digest</p>	<p>Highview of Northampton As Highview of Northampton moves to close, sexual abuse allegations emerge (*Masslive.com, November 7, 2024) SUMMARY STATEMENT OF DEFICIENCIES Highview of Northampton, (Centers for Medicare & Medicaid Services, August 15, 2024)</p> <p>Nursing Homes CMS gives nursing homes months more to complete onerous revalidation process (McKnights Long-Term Care News, November 11, 2024)</p>

[Nursing Home Firm Founders Lose Billions as Hindenburg Takes Aim](#) (Yahoo Finance, November 8, 2024)
[PHE Funds Wind-Down Raises Concerns of ‘Severely Restricting’ Access to Nursing Homes](#) (Skilled Nursing News, November 5, 2024)
[CMS nursing home ownership reporting: 5 things to know](#) (Beckers Hospital Review, November 5, 2024)

Assisted Living

[Quarterly update](#) (PowerPoint presentation) (Executive Office of Elder Affairs, October 16, 2024)

Caregiving

[For Older Unmarried Couples, Caregiving Obligations Can Be Murky](#) (*New York Times, November 10, 2024)

Alzheimer’s and Dementia

[People with dementia more apt to be admitted to nursing homes with lower star ratings](#) (McKnights Long-Term Care News, November 5, 2025)

Covid / Long Covid

[‘We just want to be heard’: Long COVID patients still feel invisible](#) (*Boston Globe, November 9, 2024)

[CDC Updates Vaccine Recommendations](#) (Centers for Disease Control and Prevention, October 29, 2024)

Aging Topics

[How we refer to aging says a lot about our visions of the future](#) (cjonline.com, November 11, 2024)

Guardianship

[Emergency Petition Seeks to Expedite Conservatorship for CEO of Nursing Home Giant Life Care Centers](#) (Skilled Nursing News, November 6, 2024)

[‘Disabled’ Life Care Centers owner resists medical, competency tests, son applies for emergency conservatorship](#), McKnights Long-Term Care News, November 6, 2024

Veteran Topics

[Signs of progress this Veterans Day](#) (*Boston Globe, November 11, 2024)

[Healey-Driscoll Administration Marks Major Milestone for New Holyoke Veterans Home During ‘Topping Off’ Ceremony](#) (Office of Governor Maura Healey and Lt. Governor Kim Driscoll, November 7, 2024)

[A Proclamation on National Veterans and Military Families Month, 2024](#) (The White House, October 31, 2024)

From Our Colleagues Around the Country

[RELIANT HEALTH CARE MANAGEMENT LLC: THE WORST NURSING HOME CHAIN IN AMERICA](#) (Tallgrass Economics, November 10, 2024)

From Around the Country

[Athena Health Sells 5 More Nursing Homes to National Health Care Associates for Over \\$30M](#) (Skilled Nursing News, November 5, 2024)

[Rochelle nursing home residents, staff given 2 days to vacate due to sudden closure](#) (Mystateline.com, November 5, 2024)

Public Sessions

Public Health Council, Wednesday, November 13, 2024) *Virtual meeting*

<p>Events</p>	<p>The Association of Developmental Disabilities Providers and Rep. Livingstone, chair of the Committee on Children, Families and Persons with Disabilities Wednesday, November 13, 2024, 10:30 a.m. Room 350, State House, Boston Breakfast of Champions Seven departing legislators will be recognized for their years of service. ADDP members from each honoree’s district will attend to honor the impact these lawmakers have made in supporting individuals with intellectual and developmental disabilities and people with brain injuries. Those who will be honored include Reps. Balsler, Cassidy, Garlick, Khan, S. Moran, Peake and Pignatelli. Gov. Healey and Lt. Gov. Driscoll were also invited.</p> <p>Senior Connection (formerly the Central Massachusetts Agency on Aging) Friday, November 15, 2024, 5:30 p.m. Polar Park, 100 Madison St., Worcester 50 years of serving older adults celebration</p> <ul style="list-style-type: none"> • Massachusetts Legislative Advocate Leadership Award for Older Adults Recipient: The Honorable Kimberly Driscoll, Massachusetts Lieutenant Governor • Central Massachusetts Senior Champion Award Recipient: The Honorable Diana DiZoglio, State Auditor of Massachusetts • Central Massachusetts Elder Justice Advocacy Award Recipient: The Honorable Andrea Joy Campbell, Attorney General of MA <p>More Info and Register</p>
<p>Webinars and Online Sessions</p>	<p>1. AARP Tuesday, November 12, 7:00 p.m. Downsizing and Decluttering Having too much stuff can be an impediment when people want to relocate or get health care in their homes. This interactive online class on decluttering and downsizing explores why holding on to stuff is so important to some people and shares practical tips on home organization, from involving everyone in the household in the decluttering effort and clearing one tiny area at a time to storing important papers electronically. Click here to register</p> <p>2. U.S. Access Board Wednesday, November 13 and Thursday, November 14, 2024 Annual Interagency Accessibility Forum This year’s annual Interagency Accessibility Forum (IAAF) will be held virtually on November 13 and 14. IAAF will feature a mix of presenters and speakers, workshops, and discussions led by accessibility professionals in the federal, private, academic, and other sectors. Presentation topics include best practices in managing and implementing digital accessibility imperatives including Section 508 of the Rehabilitation Act. The Access Board will be providing opening remarks and presenting several sessions:</p> <ul style="list-style-type: none"> • Welcome and Opening Remarks (Thursday, November 14, 9:30 AM): Dr. Sachin Pavithran, Executive Director. Introduction by Alison Levy, Director, Office of Technical and Information Services • That Doesn’t Need to Be a PDF (Wednesday, November 13, 11:15 AM): Kathy Eng, Senior ICT Accessibility Specialist • Exceptions in Section 508 Regulatory Language (Thursday, November 14, 10 AM): Bruce Bailey, IT Specialist

- Enhancing Accessibility on Social Media Platforms in Federal Agencies (Thursday, November 14, 11:15 AM): Amy Nieves, Public Affairs Specialist and David O’Keefe, Events and Communication Specialist
For more details on the two-day event, visit the [2024 IAAF Agenda](#). [Register](#) to join us for the 2024 Interagency Accessibility Forum. Registration is free and available through the morning of Thursday, November 14.

3. Massachusetts Office on Disability

Wednesday, November 13, 2024, 9:30 a.m.

[Decision to Disclose workshop](#)

A workshop about deciding to disclose disabilities during different stages of the employment process. Attendees will learn how to weigh the advantages and disadvantages of disclosing, how to describe their limitations, and how to handle specific employment situations.

[Register](#)

4. Massachusetts Office on Disability

Wednesday, November 13, 2024, 11:00 a.m.

[Reasonable Accommodations in Employment](#)

The Reasonable Accommodations in Employment workshop focuses on the steps a person with a disability would take to request a reasonable accommodation. Attendees will discuss how to talk about the supports needed to perform their essential job functions instead of focusing on their disability. During this one-and-a-half-hour workshop, attendees will participate in guided exercises where they:

1. describe their functional limitations and not their disability,
2. review a job description to practice identifying the essential functions of a job, and
3. draft an outline of an accommodation request based on best practice.

[Register](#)

5. Massachusetts Office on Disability

Wednesday, November 13, 2024, 2:30 p.m.

[Disability Discrimination in Employment](#)

The Disability Discrimination in Employment workshop focuses on recognizing workplace interactions that could be disability discrimination and discussing steps people can take to deter or address disability discrimination in the workplace. This one-and-a-half-hour workshop will provide information and encourage participant discussion of hypothetical and real cases. Attendees will:

1. learn how disability discrimination is defined in the employment context,
2. practice distinguishing what types of workplace interactions may be discriminatory, using hypothetical and real examples,
3. learn measures that may help prevent disability discrimination in the workplace, and
4. learn ways to document work situations that may be discriminatory.

[Register](#)

6. Alzheimer’s Association

Wednesday, November 13, 2024, 6:00 p.m.

[Navigating the Dementia Care Journey](#)

Presented by Brent P. Forester, MD, MSc., and Thomas Harrison, authors of *The Complete Family Guide to Dementia: Everything You Need to Know to Help Your Parent and Yourself*

Dementia is harder for families to care for than any other illness, but families often don’t plan ahead for this and wind up in a cycle of stress and crisis.

Journalist Thomas Harrison and leading geriatric psychiatrist Brent Forester will explain the unique challenges of dementia caregiving and the need to "care smarter, not harder" in order to help loved ones maintain the best possible quality of life. They will also discuss how families and professional caregivers can work together more smoothly to improve outcomes, not just for the person with dementia but for the family as well.

[Click here to Register.](#)

7. AARP

November 19, 2024, 7:00 p.m.

[The 6 Pillars of Brain Health](#)

Find out what your lifestyle would look like if you filled it with brain-healthy behaviors.

A lifestyle that supports brain health can make a big difference to your well-being throughout your life, and it's within your power to make the daily choices that can get you there.

AARP invites you to take a step along that path by learning about "six pillars" that support brain health. These lifestyle habits include cultivating social connections, managing stress, getting high-quality sleep and moving around more, for example.

[Click here to Register](#)

8. Alzheimer's Association

Wednesday, November 20, 2024, 12:00 p.m.

[Caregiver Conversations: Journey of Hope](#)

This is a special program co-sponsored by the Alzheimer's Association MA/NH Chapter and AARP Massachusetts. Moderated by Sandra Harris, State President, AARP Massachusetts, Co-Founder and Co-Leader of the Massachusetts Coalition to Build Community and End Loneliness. No one size fits all when it comes to caring for someone with Alzheimer's.

Caregivers may provide help with personal care, paying bills and coordinating medical care while also providing emotional support for the person living with dementia and extended family. Regardless if you are a caregiver close by or caregiving from a distance, as the disease progresses, one's role as a caregiver also changes. It is helpful to know what to expect and how to prepare. Join us for a panel discussion with caregivers as they share tips, strategies and lessons learned throughout their journey.

[Click here to Register](#)

9. AARP

Thursday, November 21, 2024, 6:00 to 7:00 p.m.

[Medicare 101: An Introduction to Medicare](#)

Medicare initial enrollment is complicated, but understanding your needs and priorities can help you make decisions. This is a free virtual seminar for information, tools, and resources to help you find the right plan.

This discussion will focus on the decisions you will be making about the best time to collect Social Security benefits and what implications those choices may have on your finances. Topics to be addressed include:

- How to estimate what your monthly Social Security payments will be
- How to apply for your Social Security benefits
- What may affect the size of your Social Security payments, such as your marital status, years in the workforce and when you opt to claim benefits

[LEARN MORE](#)

10. AARP

Thursday, November 21, 2024, 7:15 to 8:30 p.m.

	<p>Social Security 101 This discussion will focus on the decisions you will be making about the best time to collect Social Security benefits and what implications those choices may have on your finances. Topics to be addressed include:</p> <ul style="list-style-type: none"> • How to estimate what your monthly Social Security payments will be • How to apply for your Social Security benefits • What may affect the size of your Social Security payments, such as your marital status, years in the workforce and when you opt to claim benefits <p>LEARN MORE</p> <p>11. AARP Tuesday, November 26, 2024, 7:00 p.m. HomeFit About the Event Many older adults wish to stay in their homes and communities as they age, but only a small fraction of homes have universal design features, such as single-story layouts or wheelchair-accessible sinks. AARP HomeFit workshops teach participants about the types of home modifications that can help them age in place and go about their daily activities while staying comfortable and independent with a reduced risk of injury. Using the free AARP HomeFit Guide, this presentation will provide practical tips and strategies – from improving lighting to adding railings – to help you or your loved ones transform any residence into a “lifelong home.” Click here to register</p>
<p>Previously posted webinars and online sessions</p>	<p>Previously posted webinars and online sessions can be viewed at: https://dignityalliancema.org/webinars-and-online-sessions/</p>
<p>Highview of Northampton</p>	<p>12. *Masslive.com November 7, 2024 As Highview of Northampton moves to close, sexual abuse allegations emerge By Greta Jochem As Highview of Northampton moves to close by early February, resident Danica Ali asked the Department of Public Health to delay the end date to July. Some residents want to transition into housing instead of another nursing home and want more time to find a place to live, she told the state at a virtual public hearing Wednesday night. “There’s not enough time to do so,” she said. Ali told The Republican she has a Section 8 voucher and is trying to find an accessible apartment. Early last month, Highview filed a petition to close with the state, saying it plans to shut down by early February. Athena Health Care Systems, the company that runs Highview, has cited financial pressures and the high cost of fixing the building’s heating system, as well as difficulty recruiting staff as reasons to shut down. The closing also comes as unpaid bills to the city pile up, and after a recent investigation into sexual abuse of multiple residents by a staff member. Within the next two weeks, the state DPH will either approve the facility’s closure plan or provide comments on it, officials said at the hearing. The 120-bed facility had about 80 residents when it announced the closure last month, and now has 66, according to Savannah Ragali, a spokesperson for Athena.</p>

The facility, the subject of a [series published by The Republican](#) in July, was one of the most fined nursing homes in Massachusetts by the federal government in the past few years and it ranked by the state in its overall performance in the [bottom 1%](#).

The company has “several years of outstanding bills” due to the city, Northampton Finance Director Charlene Nardi said at the hearing. In total, it owes the city more than \$230,000 in unpaid real estate taxes and water and sewer fees, Nardi told The Republican.

Last week, the city filed a lien on the property, citing \$62,000 in unpaid taxes from fiscal year 2023, according to records filed with the Hampshire Registry of Deeds.

The land is owned by “Leeds Landlord MA LLC,” an entity state records show is managed by Lawrence G. Santilli, president and CEO of Athena Health Care Systems and the majority owner of Highview of Northampton. The closing is “super unfortunate,” said City Commissioner of Health and Human Services Merridith O’Leary. “Facilities like these are few and far between.”

“It’s a sad reality it will close,” said state Sen. Jo Comerford, D-Northampton. She urged Athena to work with the city to avoid the property becoming abandoned.

While residents are moved elsewhere, O’Leary asked for Athena to communicate with the city. “It’s a barrier we’ve had in the past, communication,” she said.

When nursing homes in Western Massachusetts have closed, patients have been transferred to facilities in other parts of the state, as far as 100 miles, said Paul Lanzikos, co-founder of the [Dignity Alliance Massachusetts](#), a disability and senior advocacy group.

“We are very concerned about the transfer of patients,” Lanzikos said. Residents should be transferred to facilities in the area when possible, said state Rep. Lindsay Sabadosa, D-Northampton. Moving patients long distances has caused “enormous stress,” she said.

When nursing homes close, they are required to find another facility for residents that meets their needs and must take into account input from patients and their family, according to a spokesperson for the state DPH. One woman who has lived at Highview for two years while recovering from paralysis is moving back home to Springfield, she told The Republican. “Thank God,” said the woman, who did not want to use her name to protect her privacy.

The woman said she feels for the facility’s workers — many of whom are like family to her — over losing their jobs. In a letter to employees last month, Santilli said employees will be given priority status if they apply to jobs at other Athena facilities. Its closest locations are a hospice in Springfield and a rehabilitation and skilled care center in Sandisfield.

The facility is confident it can transfer residents to other facilities, either owned by Athena or other companies, said Dennis Billings, Athena’s regional director of operations for Massachusetts.

It’s difficult to recruit and retain staff and the facility has operated at a financial loss for years, Billings said at the hearing. It’s a “universally challenging time in the health care industry,” he said.

Abuse investigation

Not discussed at the hearing was a report [recently made public](#) by the U.S. Centers for Medicare and Medicaid Services that says five residents reported they had been sexually abused by a Highview staff member, a

certified nursing assistant. Some reported that abuse happened multiple times.

An internal investigation by the facility substantiated the allegations and terminated the employee at the end of July, the government report says. The man worked at the facility for more than a year.

The facility reported the allegations to health officials and police were involved, the report says. The government report notes that police conducted interviews at the facility. A message left with the Northampton Police Department seeking comment on the matter was not immediately returned.

The health investigators concluded the facility failed to protect residents from abuse.

In many cases, residents said the CNA digitally penetrated them. In one case, the man reportedly exposed himself to a resident, the report says.

One resident said they had been inappropriately touched by the CNA multiple times and had not reported it because they feared retaliation.

“The residents said they did not report the incidents to staff right away due to embarrassment and humiliation,” the government report says, “and during their interviews they became emotional, visibly upset and disturbed by having to talk about and relive the trauma of their individual incidents.”

Ragali said she can’t comment on the allegations.

“While we cannot comment on specific resident care or employee issues, we have strong policies, training and reporting protocols in place to assure that resident care meets our high standards,” she wrote in a statement. Athena takes “immediate steps” to address reported abuse,” she said.

“This includes notifying law enforcement and public health officials,

suspending or terminating the involved employee, conducting our own internal review, and communicating with all staff to reinforce training on

identifying and addressing potential concerns about resident care.”

13. Centers for Medicare & Medicaid Services

[SUMMARY STATEMENT OF DEFICIENCIES](#)

Highview of Northampton

August 15, 2024

Based on interviews and records reviewed, for five of five sampled residents (Resident #1, Resident #2, Resident #3, Resident #4 and Resident #5) who were alert, oriented and able to make themselves understood by staff, the Facility failed to ensure these residents were free from abuse by a staff member. On 07/28/24, Resident #1 reported that he/she had been touched in a sexually inappropriate and unsolicited manner by one of the Facility's male staff members (later identified as Certified Nurse Aide (CNA) #1).

During the course of the Facility's and local law enforcement investigations, Resident #2, Resident #3, Resident #4 and Resident #5, also reported they had been inappropriately touched in a sexual and unwanted manner by CNA #1. All five resident's accountings of the sexually abusive incidents were very similar, their descriptions and recollections of the incidents remained consistent, with all five residents reporting they were touched and/or spoken to by CNA #1 in a sexually inappropriate manner. The Residents' said they did not report the incidents to staff right away due to embarrassment and humiliation, and during their interviews they became emotional, visibly upset and disturbed by having to talk about and relive the trauma of their individual incidents. . .

The Administrator said that during the course of their investigation and during interviews with a random sample of six alert and oriented residents

	<p>that resided on the South Unit, where the accused CNA (#1) worked, sexual abuse allegations, involving CNA #1, were reported by Resident #2 and Resident #3.</p> <p>The Administrator said that the conclusion of the Facility's investigation that they substantiated the allegations of sexual abuse, based on multiple allegations from alert and oriented residents with similar stories occurring over several days, and therefore CNA #1 was terminated from the facility on 07/30/24.</p> <p>During a second in-person interview on 08/15/24 at 4:23 P.M., the administrator said that on 08/12/24, when a fourth allegation of sexual abuse, involving CNA #1, was reported (by Resident #4), the Director of Social Services expanded the investigation to interview additional alert and oriented residents, but said the sample did not include Resident #5 (who reported an allegation of abuse related to CNA #1 to the DPH surveyors on 08/15/24).</p>
<p>Nursing Homes</p>	<p>14. McKnights Long-Term Care News November 11, 2024 <u>CMS gives nursing homes months more to complete onerous revalidation process</u> By Kimberly Marselas Summary: The Centers for Medicare & Medicaid Services (CMS) has extended the deadline for nursing homes to revalidate their ownership information. This decision comes after significant pressure from industry groups like LeadingAge and the American Health Care Association, who argued that the original deadline was too short and the requirements too complex. The extension provides nursing homes with more time to comply with the new regulations, which aim to increase transparency and accountability in the industry. However, industry groups remain concerned about the complexity of the process and the potential burden on providers.</p> <p>15. Yahoo Finance November 8, 2024 <u>Nursing Home Firm Founders Lose Billions as Hindenburg Takes Aim</u> By Angel Adegbesan It started on Monday when well-known short-seller, Hindenburg Research, targeted the firm in a report alleging that the company has been “systematically scamming taxpayer-funded health-care programs.” Shares sank 28%, at the time it was the worst one-day rout since PACS Group’s initial public offering in April. As the firm’s majority holders with close to 55 million shares apiece, cofounders Jason Murray and Mark Hancock, took the brunt of the hit. They’ve incurred paper losses of \$1.26 billion each on their stakes in PACS Group through Thursday’s close. A well-received IPO had initially seen Murray and Hancock’s wealth swell to over \$2 billion apiece as the stock doubled from its \$21 a share listing price less than seven months out from its debut, but those gains were quickly slipping away. The short report was only the beginning of their troubles. Two days later, PACS said it received an unspecified number of civil investigative demands on its reimbursement and referral practices that “may or may not” be related to the Hindenburg report. The stock spiraled by another 39%, hitting</p>

another grim milestone as shares closed below the IPO price for the first time. . .

Hindenburg accused PACS of abusing a Covid-era waiver to drive higher reimbursements from the government's Medicare program as well as of fraudulent staffing practices. . .

The nursing home firm, which manages about 284 nursing facilities across 16 states and serves more than 27,000 patients daily, also postponed the release of its third quarter results but issued preliminary key operating metrics for the quarter.

16. Skilled Nursing News

November 5, 2024

[PHE Funds Wind-Down Raises Concerns of 'Severely Restricting' Access to Nursing Homes](#)

By Amy Stulick

Summary:

The end of the Public Health Emergency (PHE) has had a significant negative impact on the financial viability of nursing homes, particularly nonprofit facilities.

Key findings:

- **PHE funds were crucial:** These funds helped nursing homes remain profitable during the pandemic.
- **Post-PHE financial strain:** Without PHE funds, nursing homes are facing severe financial challenges, including losses per resident day.
- **Staffing shortages and increased costs:** Higher labor costs, reduced occupancy rates, and increased reliance on agency staff have contributed to these financial difficulties.
- **CMS staffing mandate:** The CMS staffing mandate, while necessary for quality care, poses a significant financial burden on nursing homes.
- **Long-term care financing:** The study highlights the need for a sustainable long-term care financing system to ensure the future of the nursing home industry.

Unless significant changes are made to Medicare and Medicaid reimbursement rates or other funding sources, many nursing homes may face closure or reduced services, ultimately impacting the quality of care for residents.

17. Beckers Hospital Review

November 5, 2024

[CMS nursing home ownership reporting: 5 things to know](#)

Effective Oct. 1, CMS now [requires](#) nursing homes to disclose more detailed ownership information as part of an Affordable Care Act final rule issued Nov. 15, 2023.

Here are four things to know about the requirement:

1. Nursing homes already are [required](#) to disclose ownership and managerial information under section 1124(a) of the Social Security Act. The final rule implements requirements under section 1124(c) of the Social Security Act that requires facilities to disclose detailed information about their ownership and management as well as parties associated with the facility and ownership structures of those parties.
2. CMS form 855A has been [revised](#) to collect the additional data.
3. CMS Medicare administrative contractors will notify facilities between October and December to collect ownership, managerial and related party information.

	<p>4. One-third of Medicare enrolled nursing homes will be notified to revalidate ownership information in October, and the remaining two-thirds will get notices in November or December.</p>
<p>Assisted Living</p>	<p>18. Executive Office of Elder Affairs October 16, 2024 <i>Quarterly update</i> (PowerPoint presentation) Download the slides here.</p>
<p>Caregiving</p> 	<p>19. *New York Times November 10, 2024 For Older Unmarried Couples, Caregiving Obligations Can Be Murky By Paula Span <i>What should be expected of an intimate partner when a companion suffers a health crisis? Seniors and their families increasingly confront the question.</i> This article explores the challenges and complexities faced by older unmarried couples as they navigate aging and potential caregiving needs. It highlights the increasing trend of cohabitation and living-apart-together relationships among older adults, driven by changing societal attitudes, longer lifespans, and the desire for independence. Key points from the article include:</p> <ul style="list-style-type: none"> • Legal and Financial Considerations: Unmarried couples often lack the legal protections and financial benefits afforded to married couples. This can lead to difficulties in making medical decisions, managing finances, and inheriting assets. • Caregiving Responsibilities: Unmarried partners may face uncertainty regarding caregiving obligations, especially in situations where one partner's health deteriorates. • Advance Care Planning: It is crucial for unmarried couples to engage in advance care planning, creating legal documents like wills, power of attorney, and healthcare proxies to ensure their wishes are respected. • Emotional and Social Support: While unmarried partnerships can offer companionship and support, they may lack the formal recognition and social support structures associated with marriage. <p>[U]nmarried partnerships among older Americans continue to climb. Census data from 2023 showed that of Americans ages 65 to 74, 3.9 percent of men and 2.6 percent of women, almost 1.1 million people, were living with a partner, not a spouse. Twenty years earlier, the proportions were just 1.7 percent for men and 1 percent for women. Among those 75 and older, almost 400,000 people were cohabiting, a similar numerical leap over two decades. It's more difficult to measure the number of partners who don't share residences, informally known as L.A.T.'s (for "living apart together"), but experts believe those relationships are also on the rise. . . Earlier in life, cohabiting relationships tend to be less stable and less happy, researchers have reported. But among older couples, the relationship quality is almost indistinguishable from that reported by married couples. The unions last longer than those of younger cohabitators, and generally end only with one partner's death. The article emphasizes the importance of open communication, legal planning, and a clear understanding of each partner's expectations and responsibilities. By addressing these issues proactively, older unmarried couples can navigate the challenges of aging with greater confidence and security.</p>

<p>Alzheimer's and Dementia</p>	<p>20. McKnights Long-Term Care News November 5, 2025 <u>People with dementia more apt to be admitted to nursing homes with lower star ratings</u> By Kristen Fischer Summary of the study: People with dementia are less likely to be admitted to high-quality nursing homes. A recent study found that individuals with dementia are less likely to be admitted to nursing homes with higher staffing ratings compared to those without dementia. This disparity in access to quality care could contribute to poorer outcomes for people with dementia. The study analyzed data from over 5.6 million people discharged to nursing homes between 2011 and 2017. Key findings include:</p> <ul style="list-style-type: none"> • Disparity in access: People with dementia were more likely to be admitted to lower-rated nursing homes with fewer staff. • Impact on outcomes: Higher staffing ratings were associated with lower mortality and readmission rates, especially for people with dementia. • Call for action: The study highlights the need to improve access to high-quality nursing home care, particularly for people with dementia. <p>The researchers suggest that addressing staffing shortages and ensuring equitable distribution of resources could help improve the quality of care for individuals with dementia.</p>
<p>Covid / Long Covid</p>	<p>21. *Boston Globe November 9, 2024 <u>'We just want to be heard': Long COVID patients still feel invisible</u> By Adam Piore Long COVID, a condition affecting millions, has left many feeling isolated and misunderstood. The article highlights the experiences of individuals struggling with debilitating symptoms, including fatigue, brain fog, and organ damage. Many patients have faced skepticism from medical professionals and a lack of effective treatments. Some have found relief through experimental therapies, while others have discovered self-management strategies. The article emphasizes the need for increased awareness, research, and support for long COVID patients. According to its <u>official definition</u>, long COVID occurs after a COVID-19 infection, lasts for at least three months, affects one or more organ systems, and includes hundreds of possible symptoms and diagnosable conditions, including crushing fatigue, pain, and a racing heart rate.</p> <p>22. Centers for Disease Control and Prevention October 29, 2024 <u>CDC Updates Vaccine Recommendations</u> The Advisory Committee on Immunization Practices (ACIP) to the Centers for Disease Control & Prevention (CDC) met at the end of October to vote on updates to COVID-19 vaccination recommendations. CDC now recommends a second dose of the 2024/2025 COVID vaccine for individuals over the age of 65 and individuals who are moderately or severely immunocompromised. This second dose is recommended six months after the first dose. Read more <u>here</u>. While the Centers for Medicare & Medicaid Services (CMS) no longer requires vaccination of healthcare personnel and does not require vaccination of residents, nursing homes are required to educate residents and staff on vaccination and to offer access to these vaccinations. Nursing homes must also continue to report vaccination</p>

	<p>rates of both residents and staff through the National Healthcare Safety Network (NHSN).</p>
<p>Aging Topics</p>	<p>23. cjonline.com November 11, 2024 How we refer to aging says a lot about our visions of the future By Connie Mason Michaelis I have a faint memory of reading Marshall McLuhan’s book "Understanding Media: The Extensions of Man" in a Western Civilization class in college. Actually, all I remember about the book was his powerful notion, which simply put is, “The message is in the medium.” Winston Churchill said something very similar to this after WWII: “We shape our tools, and thereafter our tools shape us.” As I was thinking about the language we use to describe all things pertaining to aging, it brought me back to this idea. It is not only the medium that shapes us, but the language we use in that medium. The messages about aging are wrapped in a lot of negative words. I struggle with this constantly in my writing — being careful to use positive, uplifting language. Do words like elderly, old folks, frail, geriatric, over-the-hill, senile, feeble, declining and demented make you feel depressed? All social media, starting with television years ago, has created a message about old people. First of all, they are invisible. They are hidden because who wants to look at a person with white hair and wrinkles? Messages about growing old are always negative. Even greeting cards are overloaded with jokes and derogatory remarks about over-the-hill birthdays. Decades ago, old folks’ homes and almshouses were replaced by nursing homes modeled after hospitals. The message portrayed was that old people would become ill, frail, in need of care and a burden to society. How different our western culture is from a vast part of the rest of the world where Elders are honored. The tools we built — pseudo-hospitals to house old people — have defined aging in America. No wonder the connotation of going to a nursing home is so objectionable. Today we have new, innovative, and beautiful communities that support Elders. The ability to live and thrive is available, but the message continues to be, “Don’t even think or talk about aging.” The subject is taboo. But thankfully there is a blossoming new philosophy and language that values wisdom, experience and maturity. Truly, we can become Modern Elders as Chip Conley, CEO of the Modern Elder Academy, calls us. So let me suggest we drop the negative vocabulary and use words like residential community instead of nursing home, Elder not elderly, cognitively challenged instead of demented, seasoned not senile, wise one instead of old-fashioned, mature not ancient. I love words like dapper, thoughtful, experienced and spunky when applied to older people. I’ve met so many and have learned from these wise ones. Be kind with those words and images because all of us are headed there — if we’re lucky.</p>
<p>Guardianship</p>	<p>24. Skilled Nursing News November 6, 2024 Emergency Petition Seeks to Expedite Conservatorship for CEO of Nursing Home Giant Life Care Centers</p>

	<p>By Amy Stulick</p> <p>Key Points:</p> <ul style="list-style-type: none"> • Emergency Petition: The son of Forrest Preston, CEO of Life Care Centers of America, filed an emergency petition to become his father's conservator. • Reason for Petition: Forrest Preston's inability to fulfill his duties as CEO due to mental incapacity. • Son's Role: The son seeks limited powers to protect his father's well-being and make critical business decisions on behalf of Life Care. • Concerns from Executives: Life Care executives express concerns about Forrest Preston's absence, neglect of responsibilities, and mental capacity. • Potential Flight Risk: The son fears his father may be a flight risk due to his wife's actions. • Financial Misappropriation: Allegations of financial misconduct and isolation by Forrest Preston's wife and her family. • Court Proceedings: An emergency hearing is scheduled for November 12th, with a full hearing set for mid-January. <p>Forrest Preston founded Cleveland, TN-based Life Care Centers in 1970 and remains the board chairman and sole owner. His net worth was estimated by Forbes at \$1.2 billion last year. Life Care consists of more than 200 skilled nursing facilities and assisted living communities in 28 states and has more than 30,000 employees.</p> <p>In essence: The situation involves a family dispute, a company in need of leadership, and concerns about the well-being and financial security of the CEO.</p> <p>25. McKnights Long-Term Care News November 6, 2024 <u>'Disabled' Life Care Centers owner resists medical, competency tests, son applies for emergency conservatorship</u> By James M. Berklan Summary:</p> <ul style="list-style-type: none"> • Forrest Preston, the 91-year-old billionaire founder of Life Care Centers of America, is at the center of a contentious legal battle. His son, Aubrey Preston, has filed an emergency petition for conservatorship, citing concerns about his father's mental capacity and well-being. • The petition alleges that Forrest Preston has been increasingly isolated and influenced by his wife, Kim Phuong Nguyen Preston. There are concerns about potential financial mismanagement and plans to take Forrest Preston out of the country. • Life Care's executives have also expressed concerns about Forrest Preston's ability to fulfill his duties as CEO due to his declining mental state. • The court is set to hear the emergency petition on November 12th, with a full hearing scheduled for mid-January. 1 The outcome of these hearings will determine the future of both Forrest Preston and Life Care Centers of America.
<p>Veteran Topics</p>	<p>26. *Boston Globe November 11, 2024 <u>Signs of progress this Veterans Day</u> Editorial Board At a topping off ceremony Thursday, Governor Maura Healey, along with other state and local officials, put the highest and final beam on what will be</p>



the new Holyoke Veterans Home. [According to a statement issued by her office](#), it was a moment that “brings us one step closer to our goal of providing Massachusetts veterans with the highest standard of care.” The good news on Veterans Day 2024 is that there’s reason to accept that as a statement of fact — not just one of spin or wishful thinking. What was formerly known as the Holyoke Soldiers’ Home has provided care for veterans since 1949. In more recent times, it is best known for a terrible tragedy — the deaths of 76 veterans who died there in 2020 during the early days of the COVID-19 pandemic. It was a time of great medical uncertainty, for sure. However, several investigations, [including one by the Globe Spotlight team](#), found that gross mismanagement and underlying failures of communication between leadership at the facility and in state government led to what could have been preventable. The facility was run by Bennett Walsh, a politically connected hire with no prior health care experience, who was chosen by then-Governor Charlie Baker. Decisions made by Walsh and others, described as [“utterly baffling.”](#) led to the deaths, according to several investigations. As attorney general, Healey brought criminal charges against Walsh and the facility’s medical director. [Both were ultimately sentenced to three months of probation after acknowledging in pleas that the facts in the case could result in a guilty verdict.](#) In 2022, the state also agreed to pay \$56 million to settle a class action lawsuit brought by the families of veterans who died. With help from Representative Richard Neal of Springfield, the state secured \$264 million in federal funding for construction of the new Holyoke facility. It is scheduled to accept its first residents in late 2026 and will include a memorial to those who died in 2020. A Chelsea facility for veterans, which was also subject to [lawsuits by family members after the deaths of 31 veterans during the pandemic](#), has already been replaced with a new one.

That’s good news. The other good news is that there’s also reason to believe that positive changes go beyond construction of new buildings. After the Holyoke tragedy, Massachusetts passed legislation creating the first-ever Cabinet-level secretariat of veterans’ services. Once she took office, Healey appointed Jon Santiago, a doctor and former state representative, who is also a major in the US Army Reserve, to serve as Secretary of Veterans Services under the new governance model. During a recent meeting with the Globe editorial board, Santiago attributed the Holyoke tragedy to “a lack of resources, accountability, and leadership.” Under the Healey administration, he said, the state has entered a “transformative era.”

More state money has been allocated to veterans’ services. In addition, the veteran’s facilities in Chelsea and Holyoke are now fully licensed by the Department of Public Health and led by executive directors who are fully licensed. There is a direct chain of command from each executive director to Santiago — something lacking at the time of the pandemic. As Santiago acknowledged to the editorial board, however, challenges remain. For example, more work is needed to ensure more equity in veteran care, as well as broader access to these facilities. In the past, who you knew in the political world was viewed as the key to admittance. In August, however, Healey signed the Hero Act into law, which is supposed to increase benefits, modernize services, and promote inclusivity. State Senator John Velis, whose district includes the Holyoke Veterans Home, said the state has made “monumental strides” since the pandemic-

linked deaths. Velis, who served on the legislative oversight committee that investigated that tragedy, attributes that to the new governance model and to the responsiveness of Santiago and others in the Healey administration. "If there is a question, comment, or concern, it is being flagged," Velis told the editorial board in an interview. Before the reform legislation cleared up the chain of command, "we had a government of too many layers, too much bureaucracy, leading to an awful result," said Velis, a veteran of the US Army Reserve who is currently a major in the Massachusetts Army National Guard. With the new law, and responsiveness from the Healey administration, "I am much more comfortable with where we are right now versus a few years ago."

Yet, he added, "you just don't sit back on your laurels. We must be just as vigilant. Bad things can happen."

The difference now is that the system seems to be set up better to respond to them. On this Veterans Day, let us remember that watchfulness is needed to make sure that recent, awful history never again repeats.

27. Office of Governor Maura Healey and Lt. Governor Kim Driscoll

November 7, 2024

[Healey-Driscoll Administration Marks Major Milestone for New Holyoke Veterans Home During 'Topping Off' Ceremony](#)

Governor Maura Healey, Lieutenant Governor Kim Driscoll, Congressman Richard Neal, Veterans Services Secretary Jon Santiago, and other local officials marked a major milestone in the reconstruction of the Holyoke Veterans Home with a traditional "topping off" ceremony, placing the highest and final beam on the new facility. . .

Since breaking ground, the Holyoke Veterans Home reconstruction project, led by Commodore| Walsh Joint Venture and its partners, has achieved significant progress. Today's ceremony marks a key milestone in this journey, honoring the longstanding construction tradition of placing a final beam at the highest point of the structure. This beam, signed by residents, staff, tradespeople, and elected officials, pays tribute to the veterans who will call this home and to all who have contributed to making this reconstruction possible. . .

The Massachusetts Veterans Home at Holyoke has served as a long-term health care facility for veterans since 1949, playing an essential role in the community for over seven decades. This state-of-the-art reconstruction project will accommodate 234 long-term care beds, offering a range of new clinical spaces, a memory care floor, and a 40-person Adult Day Health Program for veterans residing in the community. Additionally, a Memorial Garden at the entrance will honor those who have served, particularly those lost during the COVID-19 pandemic. . .

Construction on the new building remains on schedule, with completion expected in late 2026 and full site restoration anticipated by summer 2028.

28. The White House

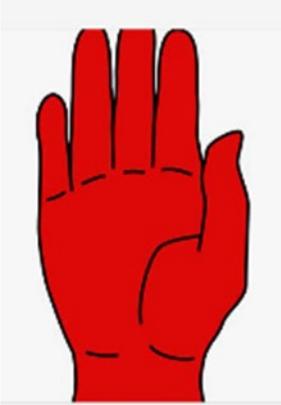
October 31, 2024

[A Proclamation on National Veterans and Military Families Month, 2024](#)

Summary:

President Biden's message honors the sacrifices of military and veteran families. He highlights the importance of supporting these families through various initiatives, including:

- **Expanding benefits for veterans exposed to toxic substances:** The PACT Act provides increased benefits and healthcare to veterans affected by toxic exposure.

	<ul style="list-style-type: none"> • Addressing military and veteran suicide: The administration is working to prevent suicide by supporting families and providing mental health resources. • Combating veteran homelessness and financial insecurity: Efforts are underway to provide housing and financial assistance to veterans. • Protecting veterans and families from fraud: Initiatives are in place to protect military and veteran families from scams and fraudulent activities. • Reforming military justice: The administration has implemented reforms to address sexual assault and domestic violence in the military. • Supporting military families: Various measures have been taken to support military spouses, caregivers, and children, including job security, affordable housing, and childcare. <p>The President concludes by emphasizing the personal connection he has to military families and expresses gratitude for their sacrifices.</p>
<p>Public Policy</p>	<p>29. Greater Lynn Senior Services <u>Phoenix Food Hub</u> Phoenix Food Hub is a one-stop shop where individuals and families at risk of nutrition insufficiency can access a variety of resources to help them better manage their overall health and well-being. It is a collaborative project spearheaded by Greater Lynn Senior Services (GLSS) as part of the Lynn Food Policy Council. Services include healthy cooking classes; nutrition counseling and education; assistance applying for SNAP and related benefits; information about, and referral to, other community resources; and access to an on-site food pantry operated and funded by Catholic Charities.</p>
<p>From Our Colleagues Around the Country</p> 	<p>30. Tallgrass Economics November 10, 2024 <u>RELIANT HEALTH CARE MANAGEMENT LLC: THE WORST NURSING HOME CHAIN IN AMERICA</u> By Dave Kingsley The data analytics system we have developed at the Center for Health Information & Policy (CHIP) – our nonprofit research organization – gives us the capability to drill into our extensive data on the nearly 15,000 skilled nursing and long-term care facilities in the U.S. We feel confident that we have identified the bottom of the bottom dwellers and need to bring them to the attention of other professionals and the public. We are curious about why a chain like the one described in this post is allowed to operate with impunity. RELIANT HEALTH CARE, LLC: AN EXTREMELY LOW PERFORMING MISSOURI NURSING HOME CHAIN Reliant Care Management, LLC owns 21 Medicare & Medicaid funded skilled nursing facilities in the State of Missouri – four are in the Kansas City Metropolitan Area. In our work across the United States in cities, counties, states, and regions, we have not encountered a chain with lower federal ratings on quality of care. In this alert, we will lay out the case for a high level of concern among families, ministers, social workers and others who might have an occasion to find a skilled nursing facility for a loved one or a client. LOOK FOR THE RED HAND The Center for Medicare & Medicaid Services as the federal regulatory agency for Medicare and Medicaid funded skilled nursing has a complicated rating system for each facility that ranges from I for low performing facilities</p>

to 5 for high performing facilities. Facilities with a rating plus a red hand have incidents that present a danger to patients. It is rare for a chain of even a few facilities to have more than one red hand. Nevertheless, of the 21 Reliant facilities 9 have a red hand (see table below).

Red hands are signs of poor quality of care. In addition to incidents that place patients in immediate jeopardy, ongoing neglect often occurs due to a lack of adequate staffing. Nursing staffing is measured by the number of nursing hours per resident day (HPRD). The current average of the 14,516 skilled nursing facilities in our data file is 3.8 (3 hours & 48 minutes) HPRD for RN, LPN, and CNA staffing – which most experts agree is far too low. Nevertheless, nursing homes with an HPRD of 2 or less are quite rare – only 7 tenths of 1 percent or 103 out of 14,516 facilities.

As the table below illustrates, the hours per resident day column indicates that Reliant facilities are extremely understaffed (“HOURS” was somehow deleted from the column – it should be “HOURS PER RESIDENT DAY”). Indeed, HPRDs in the low 2s and 1s for an entire chain is appalling.

FACILITY	ADDRESS	CMS RATING	RED HAND	PER RESIDENT DAY
BRIDGEWOOD HEALTH CARE CENTER	1515 TROOST AVE., KANSAS CITY MO, 64131	2		1.1
BERNARD CARE CENTER	4335 W. PINE AVE, ST. LOUIS, MO, 61308	1		2.3
CHARITON PARK HEALTH CARE CENTER	902 MANOR DR., SALISBURY, MO, 65281	1		1.7
CRESTWOOD HEALTH CARE CENTER	11400 MEHL AVE. FLORISSANT, MO, 63033	1		1.9
EASTVIEW MANOR HEALTH CARE CENTER	1622 E. 28 TH ST., TRENTON, MO, 64683	1		1.8
EDGEWOOD MANOR HEALTH CARE CENTER	11900 JESSICA LANE, RAYTOWN, MO, 64138	1		2.7
FOUR SEASONS LIVING CENTER	2800 HIGHWAY Tt, SEDALIA, MO, 65301	1		1.6
GREENVILLE HEALTH CARE CENTER	117 SYCAMORE ST., GREENVILLE, MO, 63944	4		2.3
GREGORY RIDGE HEALTH CARE CENTER	7001 CLEVELAND AVE., KANSAS CITY, MO, 64132	1		1.6
HERITAGE CARE CENTER	4401 N. HANLEY RD., SAINT LOUIS, MO 63134	1		2.5
LEVERING REGIONAL HEALTH CARE CENTER	1734 MARKET ST., HANNIBAL, MO 63401	SPECIAL FOCUS FACILITY*		1.5
MILAN HEALTH CARE CENTER	52435 INFIRMARY RD., MILAN, MO, 63556	1		2.1
NATHAN RICHARD HEALTH CARE CENTER	700 E. HIGHLAND AVE., NEVADA, MO, 64772	2		2.0
NICK'S HEALTH CARE CENTER	253 E. HIGHWAY 116, PLATTSBURG, MO 64477	1		1.7
NORTH VILLAGE PARK	2041 SILVA LANE, MOBERLY, MO, 65270	1		1.2
PARKWAY HEALTHCARE CENTER	2323 SWOPE PARKWAY, KANSAS CITY, MO 64130	1		2.3
PORTAGEVILLE HEALTH CARE CENTER	290 W. STATE HIGHWAY, PORTAGEVILLE, MO, 63873	1		
SENATH SOUTH HEALTH CARE CENTER	SENATH, MO	1		1.6
ST. ELIZABETH HEALTH CARE CENTER	649 S. WALNUT STREET, ST. ELIZABETH, MO 65075	2		2.2
STONECREST HEALTH CARE CENTER	2 <u>HIGHWAY</u> , VIBURNUM, MO, 65566	2		2.3
WESTVIEW NURSING HOME	CENTER, MO, 63436	1		1.6

*According to CMS, a Special Focus Facility has, “More problems than other nursing homes (about twice the average number of deficiencies),”

More serious problems than other nursing homes,” and “A pattern of serious problems that have persisted over a long period of time.”

Special Focus Candidates: Not quite bad enough to be a Special Focus Facility yet but moving in that direction. It is truly phenomenal to see a chain of this size with one SFF and two SFF candidates.

THE NURSING HOME CLASS DIVIDE AND THE RELIANT BUSINESS MODEL

If you’ve seen one nursing home, you’ve seen one nursing home. If you’ve seen one nursing home chain, you’ve seen one nursing home chain. If you’ve seen one state nursing home system, you’ve seen one state nursing home system. Nevertheless, similarities in patterns and practices can be seen in the SKN/LTC system. For instance, some chains accept Medicare but not Medicaid, some accept Medicaid and Medicare, some have very little Medicaid while others have mostly Medicaid as a payor. The amount of contract labor used, and the price paid for it varies from chain to chain and so forth.

With 90 percent of its bed days reimbursed by Medicaid, Reliant has an extremely high number of patients who are in long-term care and too poor to pay out of pocket. The company runs mostly large facilities (120-250 beds) and a small proportion of small facilities (approximately 60 beds). Bed size varies between and within chains. However, the pattern we see is this: the larger facilities in number of beds tend to be in poorer neighborhoods and serve a disproportionate number of Medicaid patients. We have also noticed that these “big” facilities with mostly Medicaid bed days tend to be rated lower in CMS Nursing Home Care Compare quality measurement system.

Some Significant Reliant Financial Information:

- Average bed size of 113.5 (versus 90 nationwide but Reliant has a mix of a few small and very large facilities).
- Patient revenue: \$161.6 million
- Net operating income: \$3.3 million
- Payments to Home Office & Wholly Owned Subsidiaries: \$28.8 million
- Reliant owned businesses supplying goods and services: management, therapy, pharmaceuticals, medical supplies, laundry subsidiaries (real estate side of the business is unknown at this time due to a lack of information)
- All therapy services are contracted out to Reliant owned therapy subsidiary
- Reduced labor costs through extreme low staffing and below average wages

WHO OWNS RELIANT CARE MANAGEMENT, LLC AND WHAT ARE OFFICIALS AND AUTHORITIES DOING ABOUT THIS CHAIN?

According to CMS ownership records, Reliant is owned by one individual – Mr. Rick DeStefane (see, e.g.: [Find Healthcare Providers: Compare Care Near You | Medicare](#)). Information (perhaps PR and propaganda) about Mr. DeStefane can be found on the Reliant website ([Rick DeStefane | Reliant Care Management, LLC | St. Louis](#)). We cannot be a judge of Mr. DeStefane’s character. We can only ask why his SKN/LTC facilities are rated lower than even some of the most scurrilous chains we have analyzed.

We would also ask Mr. DeStefane to show the taxpaying public Reliant’s consolidated financial reports, e.g., income statement, balance sheet, and cash flow statement. We have no idea of the extent of personal wealth accruing to Mr. DeStefane and his family’s assets but we believe that the

	<p>public has the right to know. Our federal and state governments have failed the public by allowing nursing home providers to hide their finances.</p> <p>What are Missouri and federal legislators and regulators planning to do about Reliant? Are they even tuned into the ratings discussed in this bulletin? What are local politicians, health departments, ministerial alliances, and other individuals and organizations with an obligation to protect the vulnerable aging and disabled populations with a need for institutional nursing care doing about Reliant? Certainly, it is not OK to allow nursing homes this bad to operate below the radar.</p>
<p>From Around the Country</p>	<p>31. Skilled Nursing News November 5, 2024 Athena Health Sells 5 More Nursing Homes to National Health Care Associates for Over \$30M By Amy Stulick Summary: Athena Health Care Systems, a Connecticut-based operator, has sold five of its 15 facilities to New York provider National Health Care Associates for over \$30 million. This is the second significant asset sale by Athena this year, with another facility, Abbott Terrace Health Center, set to close due to CMS reimbursement issues. In June, Athena sold five other properties to National Health Care Associates.</p> <p>32. MystateLine.com November 5, 2024 Rochelle nursing home residents, staff given 2 days to vacate due to sudden closure By Blake Dietz Summary: Rochelle Rehabilitation & Health Care Center, a nursing home in Rochelle, Illinois, is facing an abrupt closure. Staff and residents were given only two days' notice to find alternative accommodations. The sudden closure has caused significant distress for both residents and staff. Families of residents are outraged at the short notice and the potential impact on their loved ones, many of whom have been at the facility for decades. The facility's owner, Petersen Health Care, declared bankruptcy earlier this year and transferred management to Highlight Healthcare. Highlight Healthcare's decision to close the facility has left many questions unanswered.</p>
<p>Public Sessions</p>	<p>33. Public Health Council Wednesday, November 13, 2024, 9:00 a.m. <i>Virtual meeting</i> The agenda includes updates from Department of Public Health Commissioner Robbie Goldstein, a vote on a determination of need request by Weymouth Endoscopy, and an informational presentation about the public health hospital system. Agenda and Livestream</p>
<p>Support Dignity Alliance Massachusetts</p> <p>Please Donate!</p>	<p>Dignity Alliance Massachusetts is a grassroots, volunteer-run 501(c)(3) organization dedicated to transformative change to ensure the dignity of older adults, people with disabilities, and their caregivers. We are committed to advancing ways of providing long-term services, support, living options and care that respect individual choice and self-determination. Through education, legislation, regulatory reform, and</p>

	<p>legal strategies, this mission will become reality throughout the Commonwealth.</p> <p>As a fully volunteer operation, our financial needs are modest, but also real. Your donation helps to produce and distribute <i>The Dignity Digest</i> weekly free of charge to almost 1,000 recipients and maintain our website, www.DignityAllianceMA.org, which has thousands of visits each month.</p> <p>Consider a donation in memory or honor of someone. Names of those recognized will be included in The Dignity Digest and posted on the website.</p> <p>https://dignityalliancema.org/donate/</p> <p>Thank you for your consideration!</p>	
<p>Dignity Alliance Massachusetts Legislative Endorsements</p>	<p>Information about the legislative bills which have been endorsed by Dignity Alliance Massachusetts, including the text of the bills, can be viewed at: https://tinyurl.com/DignityLegislativeEndorsements</p> <p>Questions or comments can be directed to Legislative Work Group Chair Richard (Dick) Moore at rmoores8473@charter.net.</p>	
<p>Websites</p>		
<p>Blogs</p>		
<p>Podcasts</p>		
<p>Previously recommended websites</p>	<p>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 Dignity Digest</i>.</p>	
<p>Previously posted funding opportunities</p>	<p>For open funding opportunities previously posted in <i>The Tuesday Digest</i> please see https://dignityalliancema.org/funding-opportunities/.</p>	
<p>Websites of Dignity Alliance Massachusetts Members</p>	<p>See: https://dignityalliancema.org/about/organizations/</p>	
<p>Contact information for reporting complaints and concerns</p>	<p>Nursing home</p>	<p>Department of Public Health</p> <ol style="list-style-type: none"> 1. Print and complete the Consumer/Resident/Patient Complaint Form 2. Fax completed form to (617) 753-8165 <p>Or</p> <p>Mail to 67 Forest Street, Marlborough, MA 01752</p> <p>Ombudsman Program</p>
<p>Money Follows the Person</p>	<p>MassHealth</p> <p>Money Follows the Person</p> <p>The Money Follows the Person (MFP) Demonstration helps older adults and people with disabilities move from nursing facilities, chronic disease or rehabilitation hospitals, or other qualified facilities back to the community.</p> <p>Statistics as of September 27, 2024:</p> <p>710 people enrolled, most in nursing facilities</p> <p>173 people transitioned out of nursing facilities</p> <p>10 people through the cycle since 2023, off the program, living independently in the community.</p>	

	<p>38 people approved for AHVP (Alternative Housing Voucher Program) nursing home vouchers, 14 currently in use Open PDF file, 1.34 MB, MFP Demonstration Brochure MFP Demonstration Brochure - Accessible Version MFP Demonstration Fact Sheet MFP Demonstration Fact Sheet - Accessible Version</p>
<p>Determination of Need (Pending proposals)</p>	<p>Massachusetts Department of Public Health Lasell Village, Inc. – Conservation Long Term Care Project</p> <p>Lasell House is a thirty-eight (38) bed Medicare certified skilled nursing facility, located in Newton.</p> <p>This project is a phased renovation of the third floor Skilled Nursing Facility Lasell House. The facility has twenty-five (25) total bedrooms accommodating up to thirty-eight (38) residents. At present, all twenty-five (25) bedrooms have a toilet and sink with only one of the twenty-five (25) bedrooms having its own shower (the Special Care Isolation Bedroom). The other patients are currently transported to the Tub/Shower Room resulting in patients having to wait to receive a shower when the room is not occupied.</p> <p>Upon completion of the phased renovation, the facility will provide skilled nursing care in seventeen (17) Private Bedrooms and three (3) Semi-Private Bedrooms. The Semi-Private Bedrooms will be able to accommodate two residents or allow for a couple to remain together as they age through the Continuum of Care. The twenty (20) total bedrooms accommodate twenty-three (23) licensed beds with each bedroom having a full bathroom including toilet, sink, and shower. A select number of rooms will also be outfitted with additional structural blocking within the ceilings to accommodate Hoyer lifts in the future if they are needed. The tub room will be relocated to the lower level within the same building and located directly off the elevator. Service spaces will include a nursing station and two charting stations, a rehabilitation gym, dining space with nourishment kitchen, clean linen, clean utility room, medication room, oxygen storage, general storage, and public bathrooms. A new Linen Chute will be integrated into the building from the third floor emptying into a new Soiled Linen Room located in the lower level. The chute will alleviate the need for soiled linen closets to be located on the unit and will assist with infection prevention.</p> <p>The feel of the existing facility is reminiscent of a hospital setting as was typical of most skilled nursing facilities when Lasell House was constructed. One of the goals of this renovation, and one that is tied to Lasell’s overall desire to improve the culture is to create a more homelike and welcoming feel within the facility. To achieve this goal, the new design does not include a central nurse’s station and instead locates nurses and charting stations directly off the corridors so that they are easily accessible and able to monitor patients without being in the main circulation space. While finished materials still need to be durable and meet the fire rated standards for a skilled nursing facility, the design team will choose warm and inviting materials that would feel more like a home setting. Patient bedrooms will have new beds, bedside cabinets, bureaus, chairs, and window treatments as part of the renovation. Common areas will have new furniture, tables, and other accessories.</p> <p>Regarding building systems, the existing main mechanical, electrical, and plumbing infrastructure will remain, and the new design will connect to these existing systems. Improvements for patient comfort will be made by providing</p>

	<p>each bedroom with its own thermostat to independently control heating and cooling as currently two bedrooms share a single thermostat control. Additionally, the existing windows on the third floor will be replaced with new high-performing energy efficient windows. The roof on the building will be replaced as it is past its useful life.</p> <p>The Maximum Capital Expenditure (MCE) for the project is \$6,703,239.35.</p> <p>Application Documents</p> <ul style="list-style-type: none"> • Application (PDF) (DOCX) • Capital Costs (XLSX) • Affiliated Parties (PDF) (DOCX) • Change in Service (PDF) (DOCX) • CPA Report (PDF) (DOCX) • Attachments (PDF) (DOCX)
<p>Nursing Home Closures (pending)</p>	<p>Massachusetts Department of Public Health <i>Highview of Northampton</i> <i>Closure date: February 6, 2025</i> Notice of Intent to Close (PDF) (DOCX) Massachusetts Nursing Home Survey Performance Tool and the CMS Nursing Home Compare website.</p>
<p>Nursing Home Closures</p>	<p>Massachusetts Department of Public Health <i>Marion Manor, South Boston</i> <i>Closure date: September 11, 2024</i> <i>Bridgewater Nursing & Rehab, Bridgewater</i> <i>Closure date: May 24, 2024</i> <i>Savoy Nursing and Rehabilitation Center, New Bedford</i> <i>Closure date: April 3, 2024</i> <i>New England Sinai Hospital Transitional Care Unit</i> <i>Closure date: April 2, 2024</i> <i>South Dennis Health Care, Dennis</i> <i>Closure date: January 30, 2024</i> <i>Arnold House Nursing Home, Stoneham</i> <i>Closure date: September 22, 2023</i> <i>Willimansett East, Chicopee</i> <i>Closure date: June 6, 2023</i> <i>Willimansett West, Chicopee</i> <i>Closure date: June 6, 2023</i> <i>Chapin Center Springfield</i> <i>Closure date: June 6, 2023</i> <i>Governors Center, Westfield</i> <i>Closure date: June 6, 2023</i> <i>Emerson Rehabilitation and Transitional Care Unit</i> <i>Closure date: May 17, 2023</i> <i>Stonehedge Rehabilitation and Skilled Care Center, West Roxbury</i> <i>Closure date: February 10, 2022</i> <i>Heathwood Healthcare, Newton</i> <i>Closure date: January 5, 2022</i> <i>Mt. Ida Rest Home, Newton</i> <i>Closure date: December 31, 2021</i> <i>Wingate at Chestnut Hill, Newton, MA</i> <i>Closure date: October 1, 2021</i></p>

	<p><i>Halcyon House, Methuen</i> Closure date: July 16, 2021</p> <p><i>Agawam HealthCare, Agawam</i> Closure date: July 27, 2021</p> <p><i>Wareham HealthCare, Wareham</i> Closure date: July 28, 2021</p> <p><i>Town & Country Health Care Center, Lowell</i> Closure date: July 31, 2021</p>
Nursing homes with admission freezes	<p>Massachusetts Department of Public Health <u>Highview of Northampton</u></p>
Massachusetts Department of Public Health Determination of Need Projects	<p>Massachusetts Department of Public Health <i>Determination of Need Projects: Long Term Care 2023</i> <u>Navigator Homes of Martha's Vineyard, Inc. – Long Term Care Substantial Capital Expenditure</u> <u>Royal Wayland Nursing Home, LLC – Conservation Long Term Care Project</u> 2022 <u>Ascentria Care Alliance – Laurel Ridge</u> <u>Ascentria Care Alliance – Lutheran Housing</u> <u>Ascentria Care Alliance – Quaboag</u> <u>Berkshire Healthcare Systems, Inc. – Windsor Long Term Care Conservation</u> <u>Fairlawn Rehabilitation Hospital-Hospital/Clinic Substantial Capital Expenditure</u> <u>Long Term Centers of Lexington – Pine Knoll – Long Term Care Conservation</u> <u>Long Term Centers of Wrentham – Serenity Hill – Long Term Care Conservation</u> <u>Next Step Healthcare LLC-Conservation Long Term Care Project</u> <u>Royal Falmouth – Conservation Long Term Care</u> <u>Royal Norwell – Long Term Care Conservation</u> <u>Wellman Healthcare Group, Inc</u> 2020 <u>Advocate Healthcare, LLC Amendment</u> <u>Campion Health & Wellness, Inc. – LTC - Substantial Change in Service</u> <u>Heywood Healthcare, Inc. – Hospital/Clinic Substantial Capital Expenditure</u> <u>Notre Dame Health Care Center, Inc. – LTC Conservation</u> 2020 <u>Advocate Healthcare of East Boston, LLC.</u> <u>Belmont Manor Nursing Home, Inc.</u></p>
List of Special Focus Facilities	<p>Centers for Medicare and Medicaid Services <i>List of Special Focus Facilities and Candidates</i> <u>https://tinyurl.com/SpecialFocusFacilityProgram</u> Updated April 24, 2024 CMS has published a new list of <u>Special Focus Facilities</u> (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</p>

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)

Newly added to the listing

- Somerset Ridge Center, Somerset
<https://somersestridgerehab.com/>
Nursing home inspect information:
<https://projects.propublica.org/nursing-homes/homes/h-225747>
- South Dennis Healthcare
<https://www.nextstephc.com/southdennis>
Nursing home inspect information:
<https://projects.propublica.org/nursing-homes/homes/h-225320>

Massachusetts facilities not improved

- None

Massachusetts facilities which showed improvement

- Marlborough Hills Rehabilitation and Health Care Center, Marlborough
<https://tinyurl.com/MarlboroughHills>
Nursing home inspect information:
<https://projects.propublica.org/nursing-homes/homes/h-225063>

Massachusetts facilities which have graduated from the program

- The Oxford Rehabilitation & Health Care Center, Haverhill
<https://theoxfordrehabhealth.com/>
Nursing home inspect information:
<https://projects.propublica.org/nursing-homes/homes/h-225218>
- Worcester Rehabilitation and Health Care Center, Worcester
<https://worcesterrehabcare.com/>
Nursing home inspect information:
<https://projects.propublica.org/nursing-homes/homes/h-225199>

Massachusetts facilities that are candidates for listing (months on list)

- AdviniaCare Newburyport (3)
<https://www.adviniacare.com/adviniacare-country-center/>

	<p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225332</p> <ul style="list-style-type: none"> • Charwell House Health and Rehabilitation, Norwood (27) https://tinyurl.com/Charwell <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225208</p> <ul style="list-style-type: none"> • Fall River Healthcare (9) https://www.nextstephc.com/fallriver <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225723/</p> <ul style="list-style-type: none"> • Glen Ridge Nursing Care Center, Medford (13) https://www.genesishcc.com/glenridge <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225523</p> <ul style="list-style-type: none"> • Mill Town Health and Rehabilitation, Amesbury (26) No website <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225318</p> <ul style="list-style-type: none"> • Parkway Health and Rehabilitation Center, West Roxbury (7) https://www.bearmountainhc.com/locations/parkway-health-rehabilitation-center/ <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225497</p> <ul style="list-style-type: none"> • Pioneer Valley Health & Rehabilitation Center, South Hadley (24) https://pioneervalleyhealth.com/ <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225757</p> <ul style="list-style-type: none"> • Plymouth Harborside Healthcare (4) https://www.nextstephc.com/plymouth <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225284/</p> <ul style="list-style-type: none"> • Plymouth Rehabilitation and Health Care Center (22) https://plymouthrehab.com/ <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225207</p> <ul style="list-style-type: none"> • Royal Norwell Nursing & Rehabilitation Center (4) https://norwell.royalhealthgroup.com/ <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225482/</p> <p>Massachusetts Facilities that have graduated from the program</p> <ul style="list-style-type: none"> • Marlborough Hills Rehabilitation & Health Care Center, Marlborough https://marlboroughhillsrehab.com/ <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225063/</p> <ul style="list-style-type: none"> • Oxford Rehabilitation & Health Care Center, Haverhill https://theoxfordrehabhealth.com/ <p>Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225218/</p> <p>No longer operating</p> <ul style="list-style-type: none"> • South Dennis Healthcare, South Dennis https://tinyurl.com/SpecialFocusFacilityProgram
<p><i>Nursing Home Inspect</i></p>	<p>ProPublica <i>Nursing Home Inspect</i></p>

	<p>Data updated April 24, 2024</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 border="1"> <thead> <tr> <th>Deficiency Tag</th> <th># Deficiencies</th> <th># Facilities</th> <th>MA facilities cited</th> </tr> </thead> <tbody> <tr> <td>B</td> <td>284</td> <td>198</td> <td>Tag B</td> </tr> <tr> <td>C</td> <td>108</td> <td>85</td> <td>Tag C</td> </tr> <tr> <td>D</td> <td>7,496</td> <td>1,469</td> <td>Tag D</td> </tr> <tr> <td>E</td> <td>1,965</td> <td>788</td> <td>Tag E</td> </tr> <tr> <td>F</td> <td>656</td> <td>317</td> <td>Tag F</td> </tr> <tr> <td>G</td> <td>568</td> <td>384</td> <td>Tag G</td> </tr> <tr> <td>H</td> <td>44</td> <td>33</td> <td>Tag H</td> </tr> <tr> <td>I</td> <td>3</td> <td>2</td> <td>Tag I</td> </tr> <tr> <td>J</td> <td>57</td> <td>27</td> <td>Tag J</td> </tr> <tr> <td>K</td> <td>8</td> <td>5</td> <td>Tag K</td> </tr> <tr> <td>L</td> <td>5</td> <td>2</td> <td>Tag L</td> </tr> </tbody> </table> <p>Updated April 24, 2024</p>	Deficiency Tag	# Deficiencies	# Facilities	MA facilities cited	B	284	198	Tag B	C	108	85	Tag C	D	7,496	1,469	Tag D	E	1,965	788	Tag E	F	656	317	Tag F	G	568	384	Tag G	H	44	33	Tag H	I	3	2	Tag I	J	57	27	Tag J	K	8	5	Tag K	L	5	2	Tag L
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Nursing Home Compare	<p>Centers for Medicare and Medicaid Services (CMS) <i>Nursing Home Compare Website</i></p> <p>Beginning January 26, 2022, the Centers for Medicare and Medicaid Services (CMS) is posting new information that will help consumers have a better understanding of certain staffing information and concerns at facilities.</p> <p>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 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>																																																
Data on Ownership of Nursing Homes	<p>Centers for Medicare and Medicaid Services <i>Data on Ownership of Nursing Homes</i></p> <p>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</p>																																																

	nursing homes with a record of poor performance. The data is available on nursing home ownership will be posted to data.cms.gov and updated monthly.																																													
DignityMA Call 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 																																													
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<p>Participation opportunities with Dignity Alliance Massachusetts</p> <p>Most workgroups meet bi-weekly via Zoom.</p> <p>Interest Groups meet periodically (monthly, bi-monthly, or quarterly).</p> <p>Please contact group lead for more information.</p>	<table border="1"> <thead> <tr> <th>Workgroup</th> <th>Workgroup lead</th> <th>Email</th> </tr> </thead> <tbody> <tr> <td>General Membership</td> <td>Bill Henning Paul Lanzikos</td> <td>bhenning@bostoncil.org paul.lanzikos@gmail.com</td> </tr> <tr> <td>Assisted Living</td> <td>John Ford</td> <td>jford@njc-ma.org</td> </tr> <tr> <td>Behavioral Health</td> <td>Frank Baskin</td> <td>baskinfrank19@gmail.com</td> </tr> <tr> <td>Communications</td> <td>Lachlan Farrow</td> <td>lfarrow@bidmc.harvard.edu</td> </tr> <tr> <td>Facilities (Nursing homes and rest homes)</td> <td>Jim Lomastro Arlene Germain</td> <td>jimlomastro@comcast.net agermain@manhr.org</td> </tr> <tr> <td>Home and Community Based Services</td> <td>Meg Coffin</td> <td>mcoffin@centerlw.org</td> </tr> <tr> <td>Legislative</td> <td>Richard Moore</td> <td>rmoore8743@charter.net</td> </tr> <tr> <td>Legal Issues</td> <td>Stephen Schwartz</td> <td>sschwartz@cpr-ma.org</td> </tr> <tr> <th>Interest Group</th> <th>Group lead</th> <th>Email</th> </tr> <tr> <td>Housing</td> <td>Bill Henning</td> <td>bhenning@bostoncil.org</td> </tr> <tr> <td>Veteran Services</td> <td>James Lomastro</td> <td>jimlomastro@comcast.net</td> </tr> <tr> <td>Transportation</td> <td>Frank Baskin Chris Hoeh</td> <td>baskinfrank19@gmail.com cdhoeh@gmail.com</td> </tr> <tr> <td>Covid / Long Covid</td> <td>James Lomastro</td> <td>jimlomastro@comcast.net</td> </tr> <tr> <td>Incarcerated Persons</td> <td>TBD</td> <td>info@DignityAllianceMA.org</td> </tr> </tbody> </table>	Workgroup	Workgroup lead	Email	General Membership	Bill Henning Paul Lanzikos	bhenning@bostoncil.org paul.lanzikos@gmail.com	Assisted Living	John Ford	jford@njc-ma.org	Behavioral Health	Frank Baskin	baskinfrank19@gmail.com	Communications	Lachlan Farrow	lfarrow@bidmc.harvard.edu	Facilities (Nursing homes and rest homes)	Jim Lomastro Arlene Germain	jimlomastro@comcast.net agermain@manhr.org	Home and Community Based Services	Meg Coffin	mcoffin@centerlw.org	Legislative	Richard Moore	rmoore8743@charter.net	Legal Issues	Stephen Schwartz	sschwartz@cpr-ma.org	Interest Group	Group lead	Email	Housing	Bill Henning	bhenning@bostoncil.org	Veteran Services	James Lomastro	jimlomastro@comcast.net	Transportation	Frank Baskin Chris Hoeh	baskinfrank19@gmail.com cdhoeh@gmail.com	Covid / Long Covid	James Lomastro	jimlomastro@comcast.net	Incarcerated Persons	TBD	info@DignityAllianceMA.org
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Bringing People Home: Implementing the Marsters class action settlement	<p>Website: https://marsters.centerforpublicrep.org/ Center for Public Representation 5 Ferry Street, #314, Easthampton, MA 01027 413-586-6024, Press 2 bringingpeoplehome@cpr-ma.org Newsletter registration: https://marsters.centerforpublicrep.org/7b3c2-contact/</p>																																													
REV UP Massachusetts	<p>REV UP Massachusetts advocates for the fair and civic inclusion of people with disabilities in every political, social, and economic front. REV Up aims to increase the number of people with disabilities who vote.</p> <p>Website: https://revupma.org/wp/ To join REV UP Massachusetts – go to the SIGN UP page.</p>																																													

<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"> • Wynn Gerhard Special thanks to 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 Digest@DignityAllianceMA.org.</i>
<p><i>Dignity Alliance Massachusetts is a broad-based coalition of organizations and individuals pursuing fundamental changes in the provision of long-term services, support, and care for older adults and persons with disabilities.</i></p> <p><i>Our guiding principle is the assurance of dignity for those receiving the services as well as for those providing them.</i></p> <p><i>The information presented in “The Dignity Digest” is obtained from publicly available sources and does not necessarily represent positions held by Dignity Alliance Massachusetts.</i></p> <p><i>Previous issues of The Tuesday Digest and The Dignity Digest are available at:</i> https://dignityalliancema.org/dignity-digest/</p> <p><i>For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.</i></p>	