



The Dignity Digest

Issue # 216

December 17, 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>Holiday Distribution Schedule for <i>The Dignity Digest</i></p>	<p><i>The Dignity Digest</i> will not be issued on December 24 or 31.</p> <p>Edition #217 will be distributed on Friday, January 3, 2025. Normal Tuesday distribution will resume on Tuesday, January 6, 2025 with edition #218.</p> <p>We wish all a joyous holiday season and a new year of peace, well-being, and dignity for all.</p>
<p>Quotes</p>	<p><i>“We are quite hopeful the Trump administration would see [the staffing mandate] as one of the federal regulations that is overly burdensome and unrealistic and get repealed very early on.”</i></p> <p>Linda Couch, senior vice president of policy and advocacy for LeadingAge, the association of nonprofit providers of aging services, Nursing home staffing rule in limbo as Trump 2.0 approaches (Roll Call, December 4, 2024)</p> <p><i>“[Ending the staffing mandate] means people are going to get harmed and they’re going to die. We’ve had years of talking about how important staff is, and if they don’t have enough staff to take care of them, they don’t get their needs met.”</i></p> <p>Toby Edelman, senior policy attorney for the Center for Medicare Advocacy, which advocates the rights of nursing home residents, Nursing home staffing rule in limbo as Trump 2.0 approaches (Roll Call, December 4, 2024)</p> <p><i>“An Act to Improve Quality and Oversight of Long-term Care” [Chapter 197] law includes sweeping changes for both long-term care and assisted living facilities. Importantly, the law includes provisions that will support the long-term care workforce, protect the rights and well-being of LGBTQ+ residents of long-term care facilities, and expand state oversight to</i></p>

ensure safe, high-quality care in assisted living and long-term care facilities.

[Justice Department Releases Sixth Annual Elder Justice Report](#), U. S. Department of Justice, October 31, 2024

[From July 1, 2023, through June 30,], the [U. S. Department], working with local, state, Tribal and federal partners, pursued over 300 enforcement actions against over 700 defendants charged with stealing nearly \$700 million from over 225,000 older victims.

[Justice Department Releases Sixth Annual Elder Justice Report](#), U. S. Department of Justice, October 31, 2024

President Joe Biden has commuted the sentence of a former Indiana health care executive who led a \$19.4 million fraud scheme involving nursing homes.

[Biden grants clemency to Indiana nursing home CEO who led \\$19 million fraud scheme](#) (IndyStar, December 13, 2024)

“These aren’t cattle that you load on the back of a truck and take up to a higher pasture. And that’s the current model they’re using.”

Florida Attorney Jim Wilkes, [Florida nursing home patients were 'side by side, head to toe' with no air conditioning, food](#) (Abcactionnews.com, December 10, 2024)

“They discovered residents on cots smaller than many of the residents’ bodies side by side, head to toe with little room to walk between them.”

Florida Agency for Health Care Administration report, [Florida nursing home patients were 'side by side, head to toe' with no air conditioning, food](#) (Abcactionnews.com, December 10, 2024)

[In 2023, UnitedHealth’s denial rate of claims was 32 percent](#), compared to an industry average of 16 percent. Nonprofits had a far better record than for-profits. . . In Massachusetts, where I live, a supplemental Medicare policy from UnitedHealth costs \$251 a month. An identical policy from Blue Cross, which has the state’s best record in not denying care, costs \$212.

Robert Kuttner, [How AARP Shifts for UnitedHealthcare](#) (American Prospect, December 11, 2024)

“Except for the active adult rental market, for the most part, senior housing communities cater to older adults who are 80-plus. That isn’t to say that there aren’t people aged 75-plus or even 65-plus in some communities, but in general, the majority of residents that reside in senior housing communities are 80 and older.”

Lisa McCracken, head of research and analytics at the National Investment Center, [Senior Housing’s Supply-Demand Question](#), Multi-Housing News, December 9, 2024

“People may prefer to age in place—don’t want to leave their home, limited financial resources, little appetite for the current product, more services available in home, among other (reasons).” Better tech-enabled platforms support this trend, as well as an array of home care-related options.

Nancy Swanger, founding director of the Granger Cobb Institute for Senior Living at Washington State University, [Senior Housing’s Supply-Demand Question](#), Multi-Housing News, December 9, 2024

By 2030, all 73 million Baby Boomers will have turned 65. By 2040, the number of people aged 85 and older will have doubled in less than two decades.

[Senior Housing’s Supply-Demand Question](#), Multi-Housing News, December 9, 2024

But what’s most interesting, and has attracted surprisingly little comment, is the intersection of these two phenomena: Our planet is growing hotter and greyer at the same time. These twin phenomena, I submit, cannot be considered in isolation from one another.

They are not, I should note, problems of the same kind. Global warming is a disastrous reality and one that we should try to halt at all costs. An aging population is not a problem in that same sense. It is in fact a marker of social progress.

James Chappel, [Our planet is growing hotter and greyer at the same time](#), *The Globe and Mail, November 16, 2024

“This year’s Climate Ready Housing funding will enable energy retrofit improvements of nearly 1,000 homes across the state. This funding will lower costs for low- and moderate-income residents, improve indoor air quality for our residents and reduce greenhouse gas emissions.

Massachusetts Housing and Livable Communities Secretary Ed Augustus, [Healey-Driscoll Administration Awards \\$16 Million to Decarbonize Affordable Housing](#), Office of Governor Maura Healey and Lt. Governor Kim Driscoll, December 10, 2024

“We want Massachusetts residents to be able to access qualified behavioral health professionals when and where they and their families need them, and that will only happen if we lift barriers for entering this field. One crucial step to creating a strong behavioral health workforce is making earning a degree financially feasible for students driven to fill the roles.”

Lieutenant Governor Kim Driscoll, [Healey-Driscoll Administration Awards \\$12.4 Million to Support Behavioral Health Workforce](#) (Office of Governor Maura Healey and Lt. Governor Kim Driscoll, December 12, 2024)

“This was a massive scam, perpetrated for years. These individuals (the owners) were able to amass a fortune by pretending to be independent parties. In reality, they operated as one unit, providing terrible care to the sick, the elderly, and the poor, so they could make big profits.”

Acting New Jersey State Comptroller Kevin Walsh, [N.J. nursing home ‘scam’ highlights host of problems | Editorial, NJ.com](#), December 15, 2024

At the federal level, if President-elect Donald Trump and [his government efficiency office](#), headed by Elon Musk and Vivek Ramaswamy, really want to root out waste, fraud and abuse, start with Medicare and Medicaid scams, which eat up critical taxpayer

resources and deny quality care to those depending on it. Within that realm, the private nursing home business deserves special scrutiny.

[N.J. nursing home 'scam' highlights host of problems | Editorial, NJ.com](#), December 15, 2024

“This investigation shows that [nursing home operators] Krausman and Konig’s broader business model was to funnel as much money as possible to themselves — from a dedicated, taxpayer-funded funding stream — to support their other business interests, while providing low-quality nursing home care.”

[Burlington County nursing home with nation’s biggest fine for a safety violation this year faces Medicare and Medicaid crackdown, MSN](#),
Undated


[An analysis](#) by Truveta, a health care data and analytics company, shows that the rate of first-time A.D.H.D. diagnoses has been on the rise since 2021, but the increase has occurred only among people 30 and older. From January 2021 to October 2024, the rate of first-time diagnoses rose about 61 percent among those ages 30 to 44 and 64 percent among those ages 45 to 64. As a result, about 31 percent of first-time diagnoses are now among people ages 30 to 44, the largest proportion of any age group. (In 2018, younger adults took the top spot.)

[A.D.H.D. Diagnoses Are Surging Among Older Americans](#), New York Times (free access), December 13, 2024 (updated)

In 2023, the number of renter households spending more than 30 percent of their incomes on rent and utilities hit an all-time high of 22.6 million. This included a record-high 12.1 million severely burdened households that spent more than half of their incomes on housing costs. The most recent count marks an increase of 209,000 households in the last year, 2.2 million since 2019, and 7.8 million since 2001. With

	<p><i>this rise, half of all renter households were cost burdened in 2023.</i></p> <p><u>Renters' Affordability Challenges Worsened Last Year</u>, Harvard University Joint Center for Housing Studies, December 16, 2024</p> <p><i>Despite the modesty of the [minimum staffing] rule, it is a critical step in ensuring residents living in the most poorly staffed nursing homes in the country begin to receive better care. If the lawsuit is successful, it will place untold numbers of nursing home residents in harm's way.</i></p> <p><u>Consumer Voice Files Amicus Briefs in Support of Minimum Staffing Rule in Nursing Homes</u>, The Consumer Voice, December 5, 2024</p>
<p>Recruitment</p>	<p>See: <u>Listings on MASterList.com's Job Board</u> for all current listings</p>
<p>Guide to news items in this week's Dignity Digest</p>	<p>Nursing Homes</p> <p><u>Nursing home must pay \$400K for walking back COVID bonuses without negotiations</u> (McKnights Long-Term Care News, December 16, 2024)</p> <p><u>Training together to reshape LTC: One state tackles the dictates of a landmark nursing home report</u> (McKnights Long-Term Care News, December 16, 2024)</p> <p><u>N.J. nursing home 'scam' highlights host of problems Editorial</u> (NJ.com, December 15, 2024)</p> <p><u>Burlington County nursing home with nation's biggest fine for a safety violation this year faces Medicare and Medicaid crackdown</u> (MSN, Undated)</p> <p><u>Nursing home staffing rule in limbo as Trump 2.0 approaches</u> (Roll Call, December 4, 2024)</p> <p>Assisted Living</p> <p><u>Possible federal oversight of assisted living would be duplicative, strain resources for 'significant' work underway, industry advocates say</u> (McKnights Senior Living, December 9, 2024)</p> <p><u>Big changes coming for California assisted living providers, but groups say regulatory updates support person-centered care</u> (McKnights Senior Living, December 5, 2024)</p> <p><u>13 percent of direct care workers work in residential care settings such as assisted living: analysis</u> (McKnights Senior Living, November 4, 2024)</p> <p>Housing</p> <p><u>Renters' Affordability Challenges Worsened Last Year</u> (Harvard University Joint Center for Housing Studies, December 16, 2024)</p> <p><u>Senior Housing's Supply-Demand Question</u> (Multi-Housing News, December 9, 2024)</p> <p>Aging Topics</p> <p><u>A.D.H.D. Diagnoses Are Surging Among Older Americans</u> (New York Times (free access), December 13, 2024 (updated))</p> <p>Elder Abuse</p>

	<p><u>Justice Department Releases Sixth Annual Elder Justice Report</u> (U. S. Department of Justice, October 31, 2024)</p> <p>Workforce <u>Healey-Driscoll Administration Awards \$12.4 Million to Support Behavioral Health Workforce</u> (Office of Governor Maura Healey and Lt. Governor Kim Driscoll, December 12, 2024)</p> <p>Private Equity / Corporate Healthcare <u>How AARP Skills for UnitedHealthcare</u> (American Prospect, December 11, 2024)</p> <p>Public Policy <u>Effective Date for Massachusetts' Long-Term Care Reform Law Nears</u> (Husch Blackwell, November 25, 2024)</p> <p>Climate Change <u>Healey-Driscoll Administration Awards \$16 Million to Decarbonize Affordable Housing</u> (Office of Governor Maura Healey and Lt. Governor Kim Driscoll, December 10, 2024) <u>Our planet is growing hotter and greyer at the same time</u> (*The Globe and Mail, November 16, 2024)</p> <p>From Our Colleagues Around the Country <u>Consumer Voice Files Amicus Briefs in Support of Minimum Staffing Rule in Nursing Homes</u> (The Consumer Voice, December 5, 2024)</p> <p>From Around the Country <u>Biden grants clemency to Indiana nursing home CEO who led \$19 million fraud scheme</u> (IndyStar, December 13, 2024) <u>Florida nursing home patients were 'side by side, head to toe' with no air conditioning, food</u> (Abcactionnews.com, December 10, 2024) <u>Discussion on long-term care blames profit motives for older Kansans' suffering</u> (The Lawrence Times, December 4, 2024)</p> <p>Public Sessions</p>
<p>Briefing on Home Care Funding Shortfall</p>	<p>1. Mass Aging Access Tuesday, December 17, 2024, 11:00 a.m. <u>Briefing on Home Care Funding Shortfall</u> With elder home care and case management services facing <u>major budget shortfalls</u> this fiscal year, Mass Aging Access holds a virtual briefing call for supplemental funding. Sen. Jehlen and Rep. Stanley, co-chairs of the Joint Committee on Elder Affairs, speak. Without a funding infusion, providers across the state warn that thousands of older Bay Staters will be unable to access care, and that existing services will be reduced or triaged. <u>Register</u></p>
<p>Virtual Elder Abuse Multidisciplinary Team (MDT) Listening Sessions</p>	<p>2. U. S. Department of Justice <i>Virtual Elder Abuse Multidisciplinary Team (MDT) Listening Sessions</i> The Elder Justice Initiative (EJI) wants to hear from elder abuse MDT members. As part of the lead-up to the National Elder Abuse Multidisciplinary Team (MDT) Summit in Spring 2025, EJI is hosting virtual listening sessions to gather valuable insights from MDT members like you. Who Should Join? If you currently serve on an elder abuse MDT or have recently done so, we warmly invite you to participate by registering for one of the six sessions listed to your right. Your expertise is critical to advancing the field and shaping the future of MDTs in their vital work supporting older adults.</p>

	<p>Your Input Matters</p> <p>Each session will focus on gathering feedback on key topics essential to strengthening the work of MDTs including network definitions, best practices, data collection and emerging needs for MDTs. Your participation will directly contribute to building actionable frameworks and resources that address real-world challenges MDTs face.</p> <p>We hope you'll join this important conversation and help us shape the field to better meet the needs of older adults seeking justice, support, and recovery. If you have any questions, feel free to reach out to Talitha.j.guinn-shaver@usdoj.gov</p> <p>To register, please choose one of the following sessions:</p> <ul style="list-style-type: none"> • MDT Listening Session 1 Friday, December 20, 2024 12:00 PM – 1:30 PM Eastern Time Register • MDT Listening Session 2 Monday, December 30, 2024 12:00 PM – 1:30 PM Eastern Time Register • MDT Listening Session 3 Friday, January 3, 2025 12:00 PM – 1:30 PM Eastern Time Register • MDT Listening Session 4 Wednesday, January 8, 2025 12:00 PM – 1:30 PM Eastern Time Register • MDT Listening Session 5 Friday, January 10, 2025 12:00 PM – 1:30 PM Eastern Time Register • MDT Listening Session 6 Wednesday, January 15, 2025 12:00 PM – 1:30 PM Eastern Time Register
<p>Elder Justice Champions</p>  <p>Keck School of Medicine of USC</p>	<p>3. National Center on Elder Abuse (NCEA) <i>Apply to Be an NCEA Elder Justice Champion</i></p> <p>The National Center on Elder Abuse (NCEA) is accepting applications for its first ever cohort of Elder Justice Champions. Individuals age 60+ are encouraged to apply to serve on the board, whose mission is to inform the NCEA's projects, products, and practices with the lived experiences, perspectives, and insights of diverse older adults with the goal of preventing abuse, increasing awareness, and improving the lives and wellbeing of older people, particularly those underserved and marginalized.</p> <p>Elder Justice Champions will be expected to:</p> <ul style="list-style-type: none"> • Attend virtual monthly meetings; • Provide consultation and guidance on issues impacting older adults, aging, and elder abuse; • Offer wisdom, lived experience, expertise, and feedback on specified NCEA materials; and • Provide suggestions on elder abuse awareness campaigns <p>Applications will be accepted through January 10, 2025. Apply now.</p>
<p>Webinars and Online Sessions</p>	<p>4. Veterans Homes Council Tuesday, December 17, 2024, 11:00 a.m. Meeting</p>

The agenda includes presentations from Michael Lazo, executive director of the Massachusetts Veterans Home at Holyoke, and Christine Baldini, executive director of the Massachusetts Veterans Home at Chelsea. There will also be an informational presentation on the fiscal 2026 budget.

[Agenda and Access](#)

5. Long Term Care Discussion Group

Tuesday, December 17, 2024, 1:00 p.m.

[Making Sense of the Election: The President and the Congress and Where We Go from Here](#)

Topic:

Reprising their 2020 presentation we have two political experts who will explore the outcomes of the November elections including Congressional Committee and Administration staffing. What might this all mean for aging and long-term care policy in the coming year? We are pleased to have two experts who can speak so knowledgeably about what we might see.

About the Speakers:

Joel White

Joel is the Founder and President of Horizon Government Affairs, a health care consultancy that represents several dozen clients and runs four coalitions comprised of 200 organizations dedicated to reforms that improve our health system. Horizon has specific issue expertise in drug pricing, coverage and reimbursement; technology and data issues; and insurance and benefit design matters. Horizon has helped enact more than 50 laws since its founding and prevented countless bad ideas from seeing the light of day.

Previously, Joel spent twelve years on Capitol Hill including as Staff Director of the Ways and Means Health Subcommittee. While on the Hill he helped enact nine laws, including the:

- 2002 Trade Act, which created health care tax credits for private coverage;
- 2003 law that established the Medicare prescription drug benefit and created Health Savings Accounts; and
- 2005 Deficit Reduction Act and the 2006 Tax Reform and Health Care Act, which reformed Medicare payment policies.

Joel also runs a charitable organization that seeks to end poverty and is on the boards of several non-profits in the patient advocacy space. He holds a B.S. in Economics from the American University and is the co-author of the book, Facts and Figures on Government Finance.

Bob Blancato

Bob is the President of Matz, Blancato and Associates. In that capacity, he also serves as the National Coordinator of the bipartisan 3000-member Elder Justice Coalition, the Executive Director of the National Association of Nutrition and Aging Services Programs and National Coordinator of the Defeat Malnutrition Today coalition.

Bob has long been recognized as a national advocate with policy expertise on behalf of older adults. He has testified numerous times before Congressional committees most recently in 2022.

Bob's prior work history includes 17 years as a staffer in Congress and an appointment by President Clinton to be the Executive Director of the 1995 White House Conference on Aging, one of four in which he has participated. He is a member of the Senior Executive Service. As a

volunteer, he is Second Vice Chair of National Board of AARP and also on the AARP Foundation. In addition, he also serves on the board of the National Hispanic Council on Aging. In 2019, Bob served on the National Advisory Committee on Rural Health and Human Services, from 2019 to 2023. Bob holds a BA from Georgetown University and an MPA from American University. Bob has won numerous awards for advocacy, most recently the American Society for Aging's ASA Hall of Fame Award in March 2020.

Accessing the Meeting:

Here is the Zoom registration link:

<https://nashp-org.zoom.us/meeting/register/tZlof-urqj4iHdHBkA6Y9x3i80x7NyCNDLqA>

After registering, you will receive a confirmation email containing information about joining the meeting.

If you have any questions. [please click here to connect to our email.](#)

6. Massachusetts Office on Disability

Thursday, December 19, 2024, 10:00 a.m.

Webinar focused on municipal commissions on disability

For individuals interested in starting the groups in their cities or towns. The commissions provide advice to local governments about the needs of the disability community.

[Register](#)

7. Executive Office of Veterans Services

Thursday, December 19, 2024, 5:00 p.m.

Virtual Town Hall: HERO Act

A virtual town hall about the new law expanding benefits for veterans. Attendees will learn how the HERO Act affects health care, education, housing and employment services.

[Livestream](#)

8. Explorers Lifelong Learning Institute (Salem State University)

Wednesday, January 8, 2025, 10:00 to 11:00 a.m.

A Driver Safety Plan for Older Drivers

Presenter: Michelle Ellicks, Registry of Motor Vehicles lecturer.

Our guest educates senior drivers about recognizing the warning signs of unsafe driving and the age-related changes that may contribute to it.

Also, many of the medications older people take can have an effect on their driving. People aged 75 and older have the highest collision rate of all drivers in the state. The new driving laws will be discussed, and how to create a specific plan for driving retirement if and when that becomes necessary.

To access this meeting over Zoom, click or copy/paste this link into your web browser: <https://bit.ly/winter25talks>

9. Explorers Lifelong Learning Institute (Salem State University)

Wednesday, January 22, 2024, 10:00 to 11:00 a.m.

Rethinking Medications

Presenter: Donna Bartlett, professor of pharmacy practice, MA College of Pharmacy and Health Sciences

Professor Bartlett will discuss her book: "*MedStrong : Shed Your Meds for a Better, Healthier You*". Many "aging conditions" such as forgetfulness, confusion, insomnia, weakness, and falling can be linked directly to overprescribing of medication.

To access this meeting over Zoom, click or copy/paste this link into your web browser: <https://bit.ly/winter25talks>

	<p>10. Northeast ADA Center Wednesday, February 26, 2024, 1:00 to 2:30 p.m. <u>Launching the new DisabilityStatistics.org: Get the latest ACS disability estimates with new tools</u> Join the launch of the new and improved DisabilityStatistics.org website from Cornell University, with new functionality and disability estimates from the 2023 American Community Survey (ACS). In this webinar, you will learn:</p> <ul style="list-style-type: none"> • Highlights of the latest ACS disability data and insights into the estimates developed by William Erickson, the researcher who supports DisabilityStatics.org • How to use the new interactive maps, charts, tables, and summaries at DisabilityStatistics.org • Plans for future development on DisabilityStatistics.org Presenters are both from the Yang-Tan Institute on Employment and Disability. They include William Erickson, senior research specialist, and Camille Lee, web and media lead. <u>Register for the DisabilityStatistics.org webinar</u>
<p>Previously posted webinars and online sessions</p>	<p>Previously posted webinars and online sessions can be viewed at: <u>https://dignityalliancema.org/webinars-and-online-sessions/</u></p>
<p>Nursing Homes</p>	<p>11. McKnights Long-Term Care News December 16, 2024 <u>Nursing home must pay \$400K for walking back COVID bonuses without negotiations</u> By Kimberly Marselas Key Points:</p> <ul style="list-style-type: none"> • Unilateral Bonus Reduction: Alaris Health, a nursing home, unilaterally reduced COVID-related bonus pay for its workers without negotiating with the union. • Labor Law Violation: The Third Circuit Court of Appeals ruled that this action violated federal labor law. • Financial Penalty: Alaris Health is ordered to pay over \$400,000 in back pay and interest to affected workers. • Legal Precedent: The court's decision reinforces the principle that employers must negotiate with unions before making changes to wages or working conditions. <p>Essentially, the nursing home failed to bargain with the union before reducing the COVID bonuses, which the court deemed a violation of labor law. This case highlights the importance of collective bargaining and the legal consequences of unilateral changes to employment terms.</p> <p>12. McKnights Long-Term Care News December 16, 2024 <u>Training together to reshape LTC: One state tackles the dictates of a landmark nursing home report</u> By Kimberly Marselas Summary: A New Approach to Nursing Home Reform The National Academies' 2021 report highlighted significant issues within the US nursing home system. To address these problems, the Moving Forward Coalition has initiated several pilot projects in Michigan. Key Initiatives:</p> <ol style="list-style-type: none"> 1. Emergency Preparedness:

- **Tabletop Exercises:** Involving nursing homes, emergency officials, and other stakeholders to practice emergency response.
 - **Collaboration and Resource Sharing:** Fostering partnerships between facilities to improve coordination and resource allocation.
2. **Leadership Development:**
- **Leadership Training:** Providing training for nursing home staff on communication, conflict resolution, and critical thinking.
 - **QAPI Project Support:** Assisting facilities in implementing quality improvement initiatives.
3. **Joint Surveyor Training:**
- **Shared Understanding:** Educating both surveyors and nursing home staff on person-centered care.
 - **Building Bridges:** Fostering collaboration between regulators and providers.

By focusing on these areas, the Michigan team aims to improve the quality of care, enhance emergency preparedness, and strengthen leadership within nursing homes. These initiatives offer a promising approach to addressing the systemic challenges facing the long-term care industry.

13. NJ.com

December 15, 2024

[N.J. nursing home 'scam' highlights host of problems | Editorial](#)

Summary: Nursing Home Scandal Exposes Systemic Failures

Key Points:

- **Substandard Care and Fraud:** South Jersey Extended Care, a New Jersey nursing home, has been accused of providing substandard care and engaging in Medicaid fraud.
- **Delayed Response:** Despite numerous complaints and poor performance ratings, authorities took a significant time to intervene.
- **Complex Ownership Structure:** The nursing home's owners allegedly used a complex network of companies to hide their involvement and siphon off funds.
- **Systemic Issues:** The case highlights broader problems in the nursing home industry, including inadequate oversight, regulatory failures, and insufficient funding.
- **Need for Reform:** The article calls for increased scrutiny of nursing homes, improved regulatory oversight, and stronger enforcement of existing laws.

Walsh's description of the snake-like network of related companies is too complicated to repeat in detail here. The principal owner is listed as Mark Weisz, but the comptroller alleges that this was a "clean" name — of a cousin — to put on applications because the real owner, Michael Konig, had been barred from owning these homes because of previous violations.

The essential question: Why are the authorities pouncing just now, when South Jersey Extended Care had consistently received poorly-run marks based on a federal star-rating system?

Surely, Medicaid-dependent nursing homes, many of whose clients are indigent, find it challenging to make ends meet. They often face cash-flow problems, resulting in dangers like food substitutions for residents

who need to be on restricted diets. In late November, state regulators alleged that [Medford Care Center in Burlington County did not have the required three days' worth of food on hand](#), a broken hot water boiler kept residents from showering, and an administrator didn't show up for months. There's an argument for improving reimbursement rates from federal and state coffers that provide Medicaid funding.

There is no good reason, however, for oversight of these homes to be so tardy and confusing. The comptroller's office can't bring criminal charges against owner-operators, but the attorney general's office can. State and county health departments also have a role in rule-setting and inspections, as was demonstrated — frequently negatively — when COVID-19 spread through these facilities. New Jersey also has the [Office of the Long-Term Care Ombudsman](#), which supposedly responds to individual complaints.

Overall, the article criticizes the slow response to the issues at South Jersey Extended Care and calls for a more robust system to protect vulnerable residents. It also suggests that increased funding for Medicaid and stricter regulations are necessary to improve the quality of care in nursing homes.

14. MSN

Undated

[Burlington County nursing home with nation's biggest fine for a safety violation this year faces Medicare and Medicaid crackdown](#)

By Harold Brubaker, *The Philadelphia Inquirer*

Sterling Manor Nursing Center, a Burlington County nursing home, received the nation's biggest fine for patient safety violations this year and is now facing a federal and state crackdown. Regulators have threatened to terminate its participation in Medicare and Medicaid, the government insurance programs that pay for most nursing home care. Regulators fined Sterling Manor \$738,590 in connection with a January complaint inspection that uncovered multiple drug overdoses by residents. Separately, in July, Sterling Manor was fined an additional \$266,450, but details on why were not immediately available.

The two fines gave Sterling Manor the highest total for financial penalties nationwide out of more than 2,300 nursing homes with fines from January through Oct. 2, an Inquirer review of federal records found. . .

Thursday the New Jersey Comptroller's Medicaid Fraud Unit jumped in, announcing its intention to suspend Sterling Manor and a nursing home in Bridgeton, Cumberland County, from Medicaid in 60 days. It's common for nursing homes to be sold or placed under alternative control under these circumstance, [as happened to facilities in Deptford and Hammonton this year](#).

Both Sterling and South Jersey Extended Care in Bridgeton provided substandard care for years and engaged in a Medicaid fraud by siphoning money to a group of related companies that operated the facilities on behalf of an owner who had no real responsibility, the comptroller's office said. . .

At the same time as announcing its intention to suspend the two nursing homes and their operators from Medicaid, the comptroller's office [released a 70-page report](#) painting a picture of how a web of related companies allegedly profited from their management of South Jersey Extended Care, which is owned on paper by a man named Mark Weisz. . .

[Michael] Konig has a checkered record in the nursing home industry. In the mid-1990s, Connecticut banned him from the business for five years, according to the Boston Globe, and later that decade Massachusetts banned him from operating nursing homes for 10 years. In both cases, authorities investigated Konig for Medicaid fraud and poor resident care. Around that time, Konig set up alternative owners for the nursing home operated in New Jersey, including Weisz at South Jersey Extended Care and Sterling Manor. But his Broadway Healthcare Management continued providing extensive services to the facilities, including staffing them, according to the comptroller's report.

15. Roll Call

December 4, 2024

[Nursing home staffing rule in limbo as Trump 2.0 approaches](#)

By Jessie Hellmann

When President-elect Donald Trump takes office in January, he will face a long-term care crisis marked by understaffed nursing homes, workforce shortages and care that is unaffordable and inaccessible for millions of people.

But he and the Republican-controlled Congress are likely to focus on relaxing regulations rather than imposing new mandates on nursing homes and long-term care, an approach similar to what Trump did in his first term. . .

"If you speak to the providers, those workers are not there. And there are other things that practically mean it can't work," said Sen. Bill Cassidy, R-La., who is slated to be the chair of the Senate Health, Education, Labor and Pensions Committee next year. . .

The rule might play a key role in negotiations over the upcoming continuing resolution. According to sources briefed on the bicameral talks, Republicans have suggested repealing the rule in order to help pay for a \$30 billion, one-year package of health care provisions set to expire later this month, including community health center funding and a moratorium on Medicaid cuts to hospitals serving lower-income patients. . .

Advocates have said nursing homes can afford to hire more staff, and they blame lack of funding on opportunistic for-profit organizations and private equity investors who siphon profits out of nursing homes. Ending the staffing mandate would be a setback for the rights and health of 1.2 million people living in nursing homes, said Toby Edelman, senior policy attorney for the Center for Medicare Advocacy, which advocates the rights of nursing home residents. . .

Trump's support of Medicare Advantage also worries nursing homes, which have long complained about low reimbursement rates and denied care from those payors. Studies have shown nursing homes in counties with high levels of Medicare Advantage enrollment experience declines in revenue and profits.

Republicans' vow to reduce Medicaid spending could impact access to care. Medicaid is the largest payor of long-term care services.

One of the ways they could do that is by moving away from Medicaid as an open-ended entitlement by shifting to a block grant system that caps federal funding to states — a proposal Republicans tried and failed to advance in 2017. Nursing homes and other health care providers fought that proposal.

Assisted Living

16. McKnights Senior Living

December 9, 2024

[Possible federal oversight of assisted living would be duplicative, strain resources for 'significant' work underway, industry advocates say](#)

By Kimberly Bonvissuto

The article discusses the potential introduction of federal legislation for assisted living by Senator Mark Kelly. While the proposed legislation aims to establish best practices, create voluntary reporting, and provide consumer information, national senior living organizations express concerns about the need for federal oversight. They argue that existing state regulations and industry initiatives, such as the Quality in Assisted Living Collaborative (QALC), are sufficient to address quality and transparency in assisted living.

Key points:

- **Federal Oversight:** Senator Mark Kelly plans to introduce federal assisted living legislation.
- **Industry Concerns:** National senior living organizations believe federal oversight is unnecessary and could divert resources from existing initiatives.
- **State Regulation:** They emphasize the importance of state-level regulation to address the diverse needs of assisted living communities.
- **Industry Initiatives:** The QALC is working to develop guidance and resources for the industry.
- **Consumer Information:** Organizations like ASHA provide resources and information to help consumers make informed decisions.

Overall, the debate centers on the balance between federal and state regulation, and the potential impact of federal legislation on the assisted living industry.

17. McKnights Senior Living

December 5, 2024

[Big changes coming for California assisted living providers, but groups say regulatory updates support person-centered care](#)

By Kimberly Bonvissuto

The California Department of Social Services has updated regulations for residential care facilities for the elderly (RCFEs) to enhance resident evaluations. Key changes include:

- **Mandatory Reappraisals:** RCFEs must conduct reappraisals for residents experiencing significant changes in condition and at least annually.
- **Expanded Definition of Significant Change:** Changes that affect physical, cognitive, behavioral, or functional conditions and necessitate a change in services are now considered significant.
- **Enhanced Documentation and Communication:** Reappraisals must involve discussions with staff, residents, and family members, and require additional documentation and communication.

Senior living associations in California, such as LeadingAge California and the California Assisted Living Association (CALA), view these changes positively. They believe the updates will support person-centered care and allow residents to age in place.

Both organizations are actively working to educate their members about the new regulations and provide support during the implementation process.

18. McKnights Senior Living

	<p>November 4, 2024 13 percent of direct care workers work in residential care settings such as assisted living: analysis By Lois A. Bowers The article highlights the distribution and characteristics of direct care workers in the US, focusing on residential care facilities, home health, nursing facilities, and nonresidential services. Key findings:</p> <ul style="list-style-type: none"> • Distribution: 13% of approximately 3,000,000 direct care workers are in residential care facilities, 37% in home health, 29% in nursing facilities, and 21% in nonresidential services. • Demographics: Direct care workers are predominantly female, low-wage earners, and a significant portion are Black and over 50. • Skill Mix: Nursing homes have the highest proportion of RNs and LPNs, while HCBS settings have the highest percentage of aides. • Employment: Direct care workers in residential care facilities are more likely to be citizens and work full-time compared to those in HCBS settings. • Policy Implications: The Medicaid access rule focuses on payment adequacy for HCBS workers but lacks minimum staffing requirements, unlike nursing homes. <p>This analysis provides valuable insights into the direct care workforce and its role in long-term care, highlighting disparities and policy implications.</p>
<p>Housing</p>	<p>19. Harvard University Joint Center for Housing Studies December 16, 2024 Renters' Affordability Challenges Worsened Last Year By Whitney Airgood-Obrycki Summary: Worsening Rental Affordability Crisis Key Findings:</p> <ul style="list-style-type: none"> • Record-High Cost Burden: A record number of renter households are now spending more than 30% of their income on rent and utilities. • Impact Across Income Levels: Affordability challenges are affecting renters of all income levels, not just low-income households. • Rising Rents and Stagnant Wages: Rapidly rising rents coupled with stagnant wages have exacerbated the affordability crisis. • Shrinking Affordable Housing Stock: The number of affordable rental units is declining, particularly for low-income households. • Limited Relief: While recent increases in multifamily construction may have slowed rent growth, the future of rental affordability remains uncertain. <p>Conclusion: The rental affordability crisis continues to worsen, with millions of American renters struggling to afford housing. To address this issue, policymakers and stakeholders must work to increase the supply of affordable housing, provide rental assistance to low-income households, and implement policies that support wage growth.</p> <ul style="list-style-type: none"> • A new research brief • America's Rental Housing 2024 report <p>20. Multi-Housing News December 9, 2024 Senior Housing's Supply-Demand Question By Anca Gagiuc</p>

	<p>Senior Housing Market: A Balancing Act Between Supply and Demand</p> <p>Key Takeaways:</p> <ul style="list-style-type: none"> • Strong Recovery Post-Pandemic: The senior housing industry has shown resilience, with occupancy rates nearing pre-pandemic levels. • Supply-Demand Imbalance: While demand is increasing, construction activity remains low, potentially leading to a future shortage. • Evolving Resident Needs: The aging population's diverse needs require a range of senior living options, from independent living to memory care. • Aging in Place vs. Senior Living: The decision between aging in place and moving to a senior living community is influenced by factors like health, finances, and social needs. • Investment Opportunities: The industry offers potential for investment, especially in value-add opportunities and new developments, particularly in high-demand markets. <p>Challenges and Opportunities:</p> <ul style="list-style-type: none"> • Balancing Supply and Demand: Developers need to carefully assess future demand to avoid oversupply or undersupply. • Meeting Diverse Needs: The industry must adapt to the evolving needs of seniors, offering a variety of housing options and services. • Addressing Affordability: Finding ways to provide affordable senior housing is crucial, especially for middle-income individuals. • Leveraging Technology: Technology can enhance the quality of life for seniors and streamline operations for providers. <p>As the senior population continues to grow, the senior housing industry will need to navigate these challenges and capitalize on emerging opportunities to ensure the well-being of older adults.</p>
<p>Aging Topics</p>	<p>21. New York Times (free access) December 13, 2024 (updated) A.D.H.D. Diagnoses Are Surging Among Older Americans By Christina Caron Summary: Late-Life ADHD Diagnoses on the Rise Key Points:</p> <ul style="list-style-type: none"> • Increased Awareness: Growing awareness of ADHD and its symptoms has led to more adult diagnoses. • Underdiagnosis in Women and Minorities: Women and people of color are often underdiagnosed, particularly in childhood. • Impact of Social Media: Social media has played a role in raising awareness and encouraging self-diagnosis. • Lifelong Struggles: Undiagnosed ADHD can lead to lifelong challenges in areas like academics, relationships, and career. • Positive Impact of Diagnosis: Late-life diagnoses can provide relief, improve self-understanding, and lead to effective treatment. <p>The article highlights the increasing number of adults, particularly women, who are being diagnosed with ADHD later in life. This trend is driven by increased awareness, changing societal attitudes toward mental health, and the availability of effective treatments.</p>
<p>Elder Abuse</p>	<p>22. U. S. Department of Justice October 31, 2024 Justice Department Releases Sixth Annual Elder Justice Report</p>

	<p>The Justice Department's sixth Annual Report to Congress highlights its extensive efforts to combat elder fraud and abuse. During the past year, the department achieved significant milestones, including:</p> <ul style="list-style-type: none"> • Enforcement Actions: Pursued over 300 enforcement actions against over 700 defendants, recovering nearly \$700 million stolen from over 225,000 older victims. • Victim Support: Returned millions of dollars to victims, froze over \$27 million in fraudulent transactions, and supported over 4,600 victim assistance organizations serving over 200,000 older victims. • Public Awareness: Conducted nearly 1,000 elder justice events and trainings, including the first Elder Justice Law Enforcement Summit, to raise awareness and share best practices. • Collaboration: Worked closely with local, state, Tribal, and federal partners to combat elder fraud and abuse, including a coordinated public awareness campaign with other federal agencies. <p>The report underscores the department's commitment to protecting older adults from fraud, abuse, and neglect. By combining enforcement efforts, victim support, and public awareness initiatives, the department aims to create a safer environment for older Americans.</p> <p>To report elder financial fraud, call the National Elder Fraud Hotline, 1-833-FRAUD-11 (1-833-372-8311). For more information on the department's elder justice activities, please visit www.elderjustice.gov.</p> <p>Annual Report to Congress</p>
<p>Workforce</p>	<p>23. Office of Governor Maura Healey and Lt. Governor Kim Driscoll December 12, 2024 Healey-Driscoll Administration Awards \$12.4 Million to Support Behavioral Health Workforce</p> <p>Summary: Supporting the Next Generation of Behavioral Health Professionals</p> <p>The Healey-Driscoll Administration has allocated \$12.4 million to 37 colleges and universities in Massachusetts to support behavioral health students completing unpaid internships and field placements. This funding aims to:</p> <ul style="list-style-type: none"> • Grow the behavioral health workforce: Increase the number of qualified professionals in the field. • Promote diversity and equity: Support a more diverse range of students entering the field. • Address workforce shortages: Help meet the increasing demand for mental health and substance use services. <p>Key Points:</p> <ul style="list-style-type: none"> • Funding Allocation: \$12.4 million to 37 colleges and universities. • Eligibility: Undergraduate and graduate students pursuing careers in mental health or substance use disorders. • Program Goal: To provide financial support for unpaid internships and field placements, making these experiences more accessible to students. • Impact: Strengthen the behavioral health workforce and improve access to care for individuals in need. <p>By investing in the next generation of behavioral health professionals, the state aims to enhance the overall well-being of its residents and address the growing mental health crisis.</p>
<p>Private Equity / Corporate Healthcare</p>	<p>24. American Prospect December 11, 2024</p>

	<p><u>How AARP Shills for UnitedHealthcare</u> By Robert Kuttner <i>Why does the supposed advocate for the elderly steer them to the industry's worst insurer?</i> The article highlights the problematic relationship between AARP and UnitedHealthcare:</p> <ul style="list-style-type: none"> • UnitedHealthcare's Poor Record: The insurance giant has a reputation for denying necessary medical claims, with a significantly higher denial rate than industry averages. • AARP's Conflict of Interest: AARP, a nonprofit organization ostensibly advocating for seniors, receives substantial kickbacks from UnitedHealthcare. This financial incentive compromises AARP's objectivity and potentially influences its recommendations to members. • Misleading Members: AARP directs its members towards UnitedHealthcare, often without full disclosure of the financial relationship. This can lead to members choosing a subpar insurance plan. • Tax Implications: AARP's non-profit status allows it to avoid paying significant taxes on the substantial income it receives from insurance companies. • Public Backlash: Members of AARP's online community have expressed frustration and anger over UnitedHealthcare's treatment. <p>The article suggests that the recent attack on UnitedHealthcare's CEO could serve as a catalyst for change:</p> <ul style="list-style-type: none"> • Increased Scrutiny: The incident may lead to greater public scrutiny of both UnitedHealthcare and AARP's practices. • Potential for Reform: There's a possibility that AARP could reevaluate its relationship with UnitedHealthcare and explore alternative partnerships. • Strengthening Medicare: The article emphasizes the importance of protecting traditional Medicare and resisting privatization efforts. <p>Ultimately, the article exposes a troubling example of corporate influence and raises questions about the effectiveness of nonprofit organizations.</p>
<p>Public Policy</p> <p>Editor's note: The effective date of Chapter 197 was December 5, 2024.</p>	<p>25. Husch Blackwell November 25, 2024 <u>Effective Date for Massachusetts' Long-Term Care Reform Law Nears</u> By Crystal M. Bloom and Rebecca Rodman On September 6, 2024, Massachusetts Governor Maura Healy signed "An Act to Improve Quality and Oversight of Long-term Care" into law. This law includes sweeping changes for both long-term care and assisted living facilities. Importantly, the law includes provisions that will support the long-term care workforce, protect the rights and well-being of LGBTQ+ residents of long-term care facilities, and expand state oversight to ensure safe, high-quality care in assisted living and long-term care facilities. However, the new law also creates additional reporting and oversight requirements for long-term care facilities that will create an increased operational and administrative burden for long-term care facility licensees and applicants for licensure. We can expect the Massachusetts Department of Public Health (DPH) to update its long-term care facility regulations to operationalize these changes. These updates may mitigate some of the burdens but will also</p>

necessarily include increased requirements that will affect operators of long-term care facilities.

Below is a summary of the main changes that licensees and those interested in acquiring a long-term care facility should keep in mind.

New requirements related to notices of intent to acquire a long-term care facility

Timing

Currently, DPH must complete its suitability review for a new licensee within 90 days after the applicant submits a Notice of Intent to Acquire a long-term care facility. The department allows itself one 30-day extension, but if the department does not issue a determination of suitability within that timeframe, the applicant is deemed suitable and may move its licensure application forward.

The new law permits DPH to extend that 90-day period at will, with no outside limit to the time the department may take. It remains to be seen how the department operationalizes this timeframe, but this has potential to slow down transactions since a transfer of ownership cannot be completed until the applicant is deemed suitable by the department.

Notice requirements

At the same time an applicant submits a Notice of Intent to Acquire, the applicant must also provide notice to the current staff of the facility and any labor organization that represents the facility's staff of the applicant's plans to retain or not retain the facility staff and to recognize and bargain with any labor organizations currently representing the facility staff.

To comply with this requirement, a potential acquirer will need to work with the current owner to identify all staff and labor unions prior to filing the Notice of Intent to Acquire. If the notice is not provided, the department may deem the application incomplete and require the applicant to start over, further delaying the transaction.

Parties of interest to the department

The department's suitability review is expanded by the amended statute. The suitability review now includes a review of the applicant, all owners with at least a five percent share, and any management companies that will be used by the applicant to manage operations at the long-term care facility.

In making a suitability determination, DPH must review the following:

1. The criminal history and, to the extent possible, civil litigation history of all owners and contracted management companies. The civil litigation review includes but is not limited to litigation related to the operation of a long-term care facility, such as quality of care, safety of residents or staff, employment and labor issues, fraud, unfair or deceptive business practices, and landlord-tenant issues, whether complete or pending. The statute does have privacy protections for this requirement. Any information obtained by the department for its suitability review that is related to criminal or civil litigation will be kept confidential and exempt from disclosure under the public records law.
2. The financial capacity of all owners and any management companies to establish or operate a long-term care facility. This review shall include a review of any recorded liens or unpaid fees or taxes in Massachusetts or other states.
3. The history of all owners and management companies in providing long-term care in the commonwealth and other states, if any. The department will consider quality measures, compliance with statutes and

	<p>regulations related to long-term care facilities, and CMS Quality Rating Systems. This review includes, if applicable, the involvement of any private equity firms.</p> <p>Additional requirements of note</p> <p><i>Notices related to changes in information, particularly changes to financial status</i></p> <p>Every applicant for licensure and current licensee must maintain records of all information provided to the department and must notify the department in writing as soon as practicable of any change to that information. Most particularly, an applicant or licensee must notify the department of any change in financial status, including bankruptcy filing, default under a lending agreement or lease, the appointment of a receiver, or the recording of any lien. Failure to provide timely notice will subject the applicant or licensee to sanctions, including monetary or licensure sanctions.</p> <p>The statute does not indicate what is considered “timely notice.” It is to be hoped that the department will specify a timeframe in its amendments to 105 CMR 153.000. Otherwise, applicants and licensees will be vulnerable to an unclear, possibly inconsistent standard. Further, unlike the protections provided for criminal and civil litigation matters, this section of the statute does not have any confidentiality protections.</p> <p><i>Department review of management contracts</i></p> <p>Prior to entering a contract with a management company, an applicant or licensee must receive approval from the department that the management company is responsible and suitable to manage a long-term care facility. Applicants and licensees must provide the department with the same information that is required for a suitability review of an applicant.</p> <p>After department approval an applicant or licensee may enter a contract with the management company and must include a written agreement that requires the company to comply with all applicable federal, state, and local laws, regulations and rules. That written agreement must be provided to the department. Any payment terms in the agreement do have confidentiality protections and are exempt from the public records law.</p> <p><i>Provisional licenses</i></p> <p>For the first time, the statute gives DPH the right to issue a provisional license to a long-term care facility. A provision license may be issued for up to one year and can be issued at the discretion of the department for public necessity or to prevent undue hardship to an applicant or licensee.</p> <p>Depending on how DPH implements this change, this could help new facilities, or those that are making changes to their operations, as DPH may be willing to issue a provisional license to allow a facility to operate when it cannot yet comply with all licensure requirements.</p> <p><i>What this means to you</i></p> <p>These changes are effective December 5, 2024. We anticipate that the department will update its regulations to reflect these changes, which will provide further information as to how these changes will affect the operations of long-term care facilities. We will update this article to reflect those regulations, and any guidance issued by the department.</p>
Climate Change	<p>26. Office of Governor Maura Healey and Lt. Governor Kim Driscoll December 10, 2024</p>

[Healey-Driscoll Administration Awards \\$16 Million to Decarbonize Affordable Housing](#)

Summary of the Climate Ready Housing Program Announcement

The Healey-Driscoll Administration announced the third round of funding awards for the Climate Ready Housing program. This program helps affordable housing properties reduce energy use and emissions through renovations and electrification. This benefits residents by lowering their energy costs and improving indoor air quality and comfort.

Key Points:

- \$16 million was awarded to 13 projects this round.
- Projects will improve energy efficiency in 997 affordable housing units.
- Two decarbonization approaches are supported: Deep Energy Retrofits (DER) and Zero Carbon Emissions Over Time (ZOT).
- The program aims to help Massachusetts achieve net zero emissions by 2050.
- Next round of funding expected to open in March 2025.

Resources:

- Program website: <https://www.lisc.org/massachusetts/our-work/green-homes/climate-ready-housing-program/>

Awardees and their Projects:

The announcement details awardees and their projects, including the number of units impacted, type of decarbonization approach, and expected energy use reduction.

27. *The Globe and Mail

November 16, 2024

[Our planet is growing hotter and greyer at the same time](#)

By James Chappel

History moves fast. Almost every day, headlines describe life-changing technologies, from self-driving cars to genome editing. But history moves slow, too. One of the benefits of historical thinking is that it asks us to think – not just about those headlines, but about the slower, long-term processes that are transforming our world, often under our noses. A thought experiment: Imagine that an alien zipped by our planet once a decade and wrote dispatches back home. What would that alien find fit to report?

Beyond the churn of daily events, there are two major features of our century that will stand out to those living in the distant future – or to extraterrestrial visitors. Each has gotten a good deal of attention, albeit in different quarters. First of all, our planet is getting hotter, which is already causing all manner of disruptive weather events. And secondly, our planet is getting older. The global collapse of birth rates, combined with improvements in public health, is transforming the demographic makeup of our species. For most of human history, most people have been young. Our entire world is organized around the rearing and instruction of the young, and the employment of the middle-aged. That world is going to have to change, as the number of children dwindles and the population of those older than 65 continues to explode in size – in Canada, in my native United States and around the world.

Both of these phenomena have excited a good deal of investment and commentary. While most countries are loath to do much about it, we do at least recognize that climate change is real, and that it is a problem, and that something ought to be done about it (by someone, anyway, and

	<p>preferably someone else). The same can be said for population aging. Old-age pensions constitute a mammoth proportion of the federal budget in Canada, as they do in most developed countries. And in recent decades, the private sector has seen this as an opportunity for fabulous profits, investing in chains of nursing homes and assisted-living facilities. But what's most interesting, and has attracted surprisingly little comment, is the intersection of these two phenomena: Our planet is growing hotter and greyer at the same time. These twin phenomena, I submit, cannot be considered in isolation from one another.</p> <p>They are not, I should note, problems of the same kind. Global warming is a disastrous reality and one that we should try to halt at all costs. An aging population is not a problem in that same sense. It is in fact a marker of social progress. People live longer because public health is better, and birth rates fall because women have more autonomy over their reproductive choices. Population aging, in short, should be welcomed as the inevitable byproduct of major social advances.</p>
<p>From Our Colleagues Around the Country</p>	<p>28. The Consumer Voice December 5, 2024 <u>Consumer Voice Files Amicus Briefs in Support of Minimum Staffing Rule in Nursing Homes</u></p> <p>Over the past two weeks, Consumer Voice, along with several other nursing home resident and worker advocacy groups, filed amicus briefs in support of the recently finalized <u>minimum staffing rule</u>, in two different lawsuits. The first brief was filed on November 25, 2024 in <u>American Health Care Association, et. al., v. Becerra</u>. The case, filed by the nursing home lobbying groups American Health Care Association (AHCA), Leading Age, the Texas Health Care Association, and three Texas nursing facilities, seeks to prevent the federal government from requiring a level of minimum staffing in nursing homes designed to protect nursing home residents from harm. Consumer Voice has strongly supported the rule and heralded it as one of the most significant increases in protections for nursing home residents in decades. The <u>second brief</u> was filed on December 3, 2024 in <u>Kansas v. Becerra</u>. In this case, Attorneys General from twenty states filed suit against the federal government attempting to block the minimum staffing rule. Consumer Voice previously issued a <u>statement</u> on this suit, pointing out how shameful it was for these states' top law enforcement officers to try and block a rule that would save an estimated <u>13,000 lives</u> annually. Since the Biden Administration announced its plans to implement a minimum staffing rule, the nursing home industry and its lobbying organizations have spent millions trying to prevent its implementation. The rule, designed to address the poorest-performing homes in the country, is modest. The final standard is well below what Consumer Voice recommended in its <u>comments</u> on the proposed rule. Despite the modesty of the rule, it is a critical step in ensuring residents living in the most poorly staffed nursing homes in the country begin to receive better care. If the lawsuit is successful, it will place untold numbers of nursing home residents in harm's way. Read Consumer Voice's <u>summary of the rule</u>. It is essential that we all stand with nursing home residents and workers as the billion-dollar nursing home industry seeks to derail this critical protection.</p>
<p>From Around the Country</p>	<p>29. IndyStar December 13, 2024</p>

[Biden grants clemency to Indiana nursing home CEO who led \\$19 million fraud scheme](#)

By Tony Cook

President Joe Biden has commuted the sentence of a former Indiana health care executive who led a \$19.4 million fraud scheme involving nursing homes owned by Marion County's public health system. Former American Senior Communities CEO James Burkhart was among nearly [1,500 people](#) whose sentences Biden commuted Thursday as part of what the [White House has described](#) as the largest single-day act of clemency in modern history.

As the top executive of Indiana's largest nursing home operator, Burkhart and several co-conspirators orchestrated a [massive fraud and kickback scheme](#) involving a web of shell companies. He then spent the money on private jets, vacation homes, diamond jewelry and gold bars. Most of the stolen money came from the Health & Hospital Corporation of Marion County, a public health agency that owns nursing homes and operates Eskenazi hospital.

Burkhart pleaded guilty in 2018 to conspiracy to commit fraud, conspiracy to violate the health care anti-kickback statute, and money laundering. He was sentenced to 9.5 years in federal prison. Until the FBI raided his Carmel home in 2015, Burkhart was a major player in Indiana's health care industry. He had millions of dollars in public money at his disposal [thanks to an arrangement](#) between American Senior Communities and the Health & Hospital Corp. of Marion County that allowed them to collect extra Medicaid money available only to publicly owned nursing homes.

He earned a salary of more than \$1 million a year, not including the money he skimmed from sham contracts, and was a significant campaign contributor to both Republicans and Democrats. An FBI informant who wore a wire caught Burkhart boasting about how he spent "a lot of money on politicians."

Attorneys for Burkhart did not immediately respond to messages from IndyStar.

The White House and the U.S. Department of Justice did not provide explanations for individual commutations. But those whose sentences Biden commuted on Thursday had been placed on home confinement during the COVID-19 pandemic and "have successfully reintegrated into their families and communities," according to a fact sheet from the White House.

The federal Bureau of Prisons website shows Burkhart, 60, was assigned to the residential reentry management field office in Detroit, which primarily manages federal offenders in halfway houses or on home confinement. His release date was listed as Sept. 22, 2025.

30. Abcactionnews.com

December 10, 2024

[Florida nursing home patients were 'side by side, head to toe' with no air conditioning, food](#)

By Adam Wasler

A Florida state report revealed serious issues with Aventura at the Bay nursing home's handling of resident evacuations during Hurricane Helene. Here's a summary:

	<ul style="list-style-type: none"> • Unprepared Evacuation: The nursing home lacked an approved emergency plan and sought (but was denied) a waiver from the evacuation order. • Improper Shelter: Residents were evacuated to a small church with no working air conditioning or refrigerator, overcrowding them and hindering proper care. • Communication Breakdown: Family members weren't informed about residents being moved twice during the storm. • Repeated Issues: This wasn't the first time Aventura at the Bay had evacuation problems. Residents faced similar situations during Hurricanes Idalia and Milton. • State Action: The state has issued a moratorium on new admissions and found deficiencies in the facility's emergency plans. <p>Key Concerns:</p> <ul style="list-style-type: none"> • Resident Safety: The overcrowded, unsanitary church environment put residents at risk. • Continuity of Care: Frequent evacuations disrupt care routines and negatively impact residents. • Family Communication: Lack of communication with families creates undue stress and worry. <p>Lawyer's Perspective: Attorney Jim Wilkes argues that facilities in evacuation zones pose a constant threat to residents and calls for an end to such practices.</p> <p>Nursing Home's Response: Aventura at the Bay denies wrongdoing but acknowledges concerns and highlights their efforts to improve emergency preparedness plans. The report raises serious questions about Aventura at the Bay's ability to care for its residents during emergencies.</p> <p>31. The Lawrence Times December 4, 2024 <u>Discussion on long-term care blames profit motives for older Kansans' suffering</u> By Sherman Smith The article highlights the dire situation of long-term care in Kansas, particularly for individuals like Dee Miller whose disabled husband requires intensive care. The profit-driven nature of the industry, coupled with a lack of government regulation, has led to a system that prioritizes financial gain over patient well-being. Many facilities are understaffed, leading to poor quality of care and even premature deaths. The article criticizes the Republican-controlled Legislature for its unwillingness to intervene and regulate the industry, allowing for practices that exploit vulnerable individuals. The situation underscores the need for increased oversight and regulation to ensure that long-term care facilities provide adequate care and prioritize the needs of residents.</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 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 rmoore8473@charter.net.</p>
<p>Websites</p>	<p>Yang-Tan Institute on Employment and Disability https://www.ilr.cornell.edu/yti</p> <p>Housed in Cornell University’s School of Industrial and Labor Relations, the Yang-Tan Institute on Employment and Disability (YTI) conducts research and provides continuing education and technical assistance on many aspects of disability in the workplace. Building on work that began in the 1960s, researchers and practitioners at the institute have helped companies, labor organizations, government agencies, schools, and communities throughout the United States and abroad to accommodate and integrate individuals with disabilities. Our team consults with business and industry, and with policy makers, educators, disability advocates, and rehabilitation practitioners.</p> <p>The institute is working toward a world where people with disabilities are fully included in the workplace and community by advancing knowledge, policies, and practice that enhance equal opportunities for all people with disabilities.</p> <p>YTI contributes to developing inclusive workplace systems and communities in a variety of ways. Our team engages in research and produces scholarly articles, develops training materials, conducts training sessions domestically and internationally, and offers technical assistance on a wide array of disability-related matters. Our expertise embraces legal mandates and operational issues, providing an all-encompassing perspective that enables us to help transform public policy into practice.</p> <p>Elder Justice Initiative (EJI) (U. S. Department of Justice) https://www.justice.gov/elderjustice</p> <p>The mission of the Elder Justice Initiative is to support and coordinate the Department’s enforcement and programmatic efforts to combat elder abuse, neglect and financial fraud and scams that target our nation’s older adults. We engage in this work by focusing on the following mission areas:</p> <ul style="list-style-type: none"> • Building Federal, State, and Local Capacity to Fight Elder Abuse

	<ul style="list-style-type: none"> • Promoting Justice for Older Americans • Supporting Research to Improve Elder Abuse Policy and Practice • Helping Older Victims and Their Families <p>Duke Aging Center https://agingcenter.duke.edu/ Duke Aging Center is the University's multidisciplinary hub for aging research and research education. With affiliated investigators and trainees from diverse Schools, Departments, Centers, and Institutes across the institution, all aging-roads at Duke lead to the Aging Center.</p>		
Blogs			
Podcasts			
YouTube Channels	AARP Massachusetts Contains 164 videos on a variety of topics		
Previously recommended websites	The comprehensive list of recommended websites has migrated to the Dignity Alliance MA website: https://dignityalliancema.org/resources/ . Only new recommendations will be listed in <i>The Dignity Digest</i> .		
Previously posted funding opportunities	For open funding opportunities previously posted in <i>The Tuesday Digest</i> please see https://dignityalliancema.org/funding-opportunities/ .		
Websites of Dignity Alliance Massachusetts Members	See: https://dignityalliancema.org/about/organizations/		
Contact information for reporting complaints and concerns	<table border="0"> <tr> <td style="vertical-align: top;">Nursing home</td> <td> Department of Public Health 1. Print and complete the Consumer/Resident/Patient Complaint Form 2. Fax completed form to (617) 753-8165 Or Mail to 67 Forest Street, Marlborough, MA 01752 Ombudsman Program </td> </tr> </table>	Nursing home	Department of Public Health 1. Print and complete the Consumer/Resident/Patient Complaint Form 2. Fax completed form to (617) 753-8165 Or Mail to 67 Forest Street, Marlborough, MA 01752 Ombudsman Program
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Money Follows the Person	MassHealth Money Follows the Person 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. Statistics as of December 6, 2024: 934 people enrolled, most in nursing facilities 251 people transitioned out of nursing facilities 42 people in the eligibility process 64 people approved for AHVP (Alternative Housing Voucher Program) nursing home vouchers, 26 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		
Determination of Need (Pending proposals)	Massachusetts Department of Public Health Lasell Village, Inc. – Conservation Long Term Care Project Lasell House is a thirty-eight (38) bed Medicare certified skilled nursing facility, located in Newton. 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.

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.

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. 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 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.

The Maximum Capital Expenditure (MCE) for the project is \$6,703,239.35.

Application Documents

- [Application \(PDF\)](#) | [\(DOCX\)](#)
- [Capital Costs \(XLSX\)](#)
- [Affiliated Parties \(PDF\)](#) | [\(DOCX\)](#)
- [Change in Service \(PDF\)](#) | [\(DOCX\)](#)
- [CPA Report \(PDF\)](#) | [\(DOCX\)](#)

	<ul style="list-style-type: none"> • Attachments (PDF) (DOCX)
<p>Nursing Home Closures (pending)</p>	<p>Massachusetts Department of Public Health <i>Phillips Manor Nursing Home</i> <i>Closure date: February 25, 2025</i></p> <ul style="list-style-type: none"> • Notice of Intent to Close (PDF) (DOCX) • Draft of Closure and Relocation Plan (PDF) (DOCX) <p>Notice of Intent to Close (PDF) (DOCX) “We would additionally request a one-year temporary deactivation of our license as we are in the architectural phase of evaluating the building.”</p> <p>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>Highview of Northampton</i> <i>Closure date: December 6, 2024</i></p> <p><i>Marion Manor, South Boston</i> <i>Closure date: September 11, 2024</i></p> <p><i>Bridgewater Nursing & Rehab, Bridgewater</i> <i>Closure date: May 24, 2024</i></p> <p><i>Savoy Nursing and Rehabilitation Center, New Bedford</i> <i>Closure date: April 3, 2024</i></p> <p><i>New England Sinai Hospital Transitional Care Unit</i> <i>Closure date: April 2, 2024</i></p> <p><i>South Dennis Health Care, Dennis</i> <i>Closure date: January 30, 2024</i></p> <p><i>Arnold House Nursing Home, Stoneham</i> <i>Closure date: September 22, 2023</i></p> <p><i>Willimansett East, Chicopee</i> <i>Closure date: June 6, 2023</i></p> <p><i>Willimansett West, Chicopee</i> <i>Closure date: June 6, 2023</i></p> <p><i>Chapin Center Springfield</i> <i>Closure date: June 6, 2023</i></p> <p><i>Governors Center, Westfield</i> <i>Closure date: June 6, 2023</i></p> <p><i>Emerson Rehabilitation and Transitional Care Unit</i> <i>Closure date: May 17, 2023</i></p> <p><i>Stonehedge Rehabilitation and Skilled Care Center, West Roxbury</i> <i>Closure date: February 10, 2022</i></p> <p><i>Heathwood Healthcare, Newton</i> <i>Closure date: January 5, 2022</i></p> <p><i>Mt. Ida Rest Home, Newton</i> <i>Closure date: December 31, 2021</i></p> <p><i>Wingate at Chestnut Hill, Newton, MA</i> <i>Closure date: October 1, 2021</i></p> <p><i>Halcyon House, Methuen</i> <i>Closure date: July 16, 2021</i></p> <p><i>Agawam HealthCare, Agawam</i> <i>Closure date: July 27, 2021</i></p>

	<p><i>Wareham HealthCare, Wareham</i> Closure date: July 28, 2021 <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 <i>Phillips Manor Nursing Home</i></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> https://tinyurl.com/SpecialFocusFacilityProgram 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 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</p>

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.nextstephpc.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/>
Nursing home inspect information:
<https://projects.propublica.org/nursing-homes/homes/h-225332>
- Charwell House Health and Rehabilitation, Norwood (27)

	<p>https://tinyurl.com/Charwell 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 Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225723/ • Glen Ridge Nursing Care Center, Medford (13) https://www.geneshcc.com/glenridge Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225523 • Mill Town Health and Rehabilitation, Amesbury (26) No website Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225318 • Parkway Health and Rehabilitation Center, West Roxbury (7) https://www.bearmountainhc.com/locations/parkway-health-rehabilitation-center/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225497 • Pioneer Valley Health & Rehabilitation Center, South Hadley (24) https://pioneervalleyhealth.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225757 • Plymouth Harborside Healthcare (4) https://www.nextstephc.com/plymouth Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225284/ • Plymouth Rehabilitation and Health Care Center (22) https://plymouthrehab.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225207 • Royal Norwell Nursing & Rehabilitation Center (4) https://norwell.royalhealthgroup.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225482/ <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/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225063/ • Oxford Rehabilitation & Health Care Center, Haverhill https://theoxfordrehabhealth.com/ Nursing home inspect information: https://projects.propublica.org/nursing-homes/homes/h-225218/ <p>No longer operating</p> <ul style="list-style-type: none"> • South Dennis Healthcare, South Dennis https://tinyurl.com/SpecialFocusFacilityProgram
Nursing Home Inspect	<p>ProPublica Nursing Home Inspect Data updated April 24, 2024 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</p>

	<p>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 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> 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> CMS has released data giving state licensing officials, state and federal law enforcement, researchers, and the public an enhanced ability to identify common owners of nursing homes across nursing home locations. This information can be linked to other data sources to identify the performance of facilities under common ownership, such as owners affiliated with multiple nursing homes with a record of poor performance. The data is available on nursing home ownership will be posted to data.cms.gov and updated monthly.</p>																																																

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 																																														
Access to Dignity Alliance social media	Email: info@DignityAllianceMA.org Facebook: https://www.facebook.com/DignityAllianceMA/ Instagram: https://www.instagram.com/dignityalliance/ LinkedIn: https://www.linkedin.com/company/dignity-alliance-massachusetts Twitter: https://twitter.com/dignity_ma?s=21 Website: www.DignityAllianceMA.org																																														
<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 Forrow</td> <td>lforrow@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 Forrow	lforrow@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	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/																																														
REV UP Massachusetts	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. Website: https://revupma.org/wp/ To join REV UP Massachusetts – go to the SIGN UP page .																																														
The Dignity Digest	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"> • Richard Moore • Sue Rorke 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: https://dignityalliancema.org/dignity-digest/</i></p> <p><i>For more information about Dignity Alliance Massachusetts, please visit www.DignityAllianceMA.org.</i></p>	