Dignity Alliance Massachusetts (DignityMA) was formed in mid-2020, motivated by the tragedy of so many deaths from COVID-19 in long-term care facilities. People from aging and disability service and advocacy organizations, individual advocates, policy makers, legal service organizations and attorneys, and concerned citizens came together to accelerate the process of transforming the Commonwealth’s antiquated model of long-term care, which prevents older adults and people with disabilities from living their lives with dignity.

DignityMA is working to shift the Commonwealth’s emphasis on long-term care from one focused on large institutional facilities, such as nursing homes sheltering hundreds of residents, to a Small House model favored by the U.S. Veterans’ Administration when institutional care is needed or preferred, and to shift the Commonwealth’s emphasis from large-scale institutional care to a model of home-and-community based care that allows people to remain in their homes and/or communities, if they are able to and so desire. We are also working to improve the quality of care and safety for people living in facilities, homes, and communities and to recognize and support caregivers in their careers so that they, too, can live lives with dignity.
There are many pieces to this long-term care puzzle that must be put in place, and DignityMA is committed to working with state agencies, the Legislature, the provider sector, and community members to ensure that state-of-the-art long-term services, care and a full array of living choices are available for all who require them within an “Age and Disability Friendly Commonwealth”.

**Decision Making with Dignity**

Dignity Alliance Massachusetts is led by a Coordinating Committee that guides the day-to-day activities of the coalition and eight Work Groups focused on the key issues areas: Legislative; Facilities; Home & Community-Based Services; Housing; Behavioral Health; Legal; Veterans; and Communications. Proposals for advocacy – whether legislation, regulations, or communication – generally arise from the Work Groups but may also be suggested by individual participants or the Coordinating Committee. After review and discussion by the Coordinating Committee, matters are presented to the full membership for discussion and consensus approval. If consensus is achieved, the matter is circulated to the full membership for approval, disapproval, or abstention, and members may also choose to add their names or the name of their organization as additional endorsements. The results of the support or opposition are then communicated to the appropriate official(s) or agency.
This year, our aim continued to be to advance policies that revolutionize long-term care, putting the dignity of individuals first, ensuring affordable options for community living, and providing living wages and benefits for caregivers and service workers in facilities and home and community-based settings. Below describes our key goals and specifics around each goal.

Goal 1: Build a More Resilient & Higher Quality Long-Term Care System
- Resident-centered care with single occupancy rooms, full-time infection prevention, falls prevention, abuse prevention, strengthened family councils, small (max. 12 residents) facilities
- Maximum nurse and staff ratios, including an update of social work regulations from the 1970s.
- Safe visitation policies in all long-term care, both congregate and home care
- Nursing homes to be the last option among choices for long-term care
- Improvements in care and treatment for older, frail inmates of correctional institutions

Goal 2: Give Meaning & Purpose to More Age-Friendly Communities
- Adoption of a Community First 1915 Medicaid Waiver
- Expanding community options and supports to ensure integrated opportunities so that all persons can remain in their homes and home communities
- Age-friendly, Americans with Disabilities Act (ADA) compliant communities with affordable, accessible housing and public transportation
- An end to ageism and ableism in every community in the Commonwealth

2022 Objectives:
**Goal 3:**
**Protect & Support Caregivers of Older Adults & People with Disabilities**
- A living wage and enhanced benefits for caregivers
- The broadest possible education in geriatrics for all health care professionals and staff
- Behavioral health and wellness programs for long-term care staff

**Goal 4:**
**Strengthen Age-Friendly Emergency Procedures & Response**
- Enhanced emergency plans, adequate supplies of testing, personal protective equipment (PPE), and vaccinations for residents and staff of skilled nursing facilities and home care aides

**Goal 5:**
**Increased Oversight, Accountability, & Transparency of Long-Term Care Providers**
- Improvements to the response to complaints and deficiencies in skilled nursing facilities
- Non-profit ownership of long-term care provider firms
2021 ACTIVITIES & ACCOMPLISHMENTS

Education & Advocacy
A large part of Dignity Alliance Massachusetts’ advocacy efforts includes informing state agencies, members of the Legislature, the provider sector, the media, and interested citizens on issues affecting older adults and people with disabilities. Throughout 2021, Dignity Alliance published The Tuesday Digest (now called The Dignity Digest), a free weekly compilation of news articles, quotes, studies, conferences and other material to inform readers and spur opportunities for engagement. The Digest has more than 500 weekly subscribers.

Legislative
The Legislative Work Group studies current Congressional, State Senate, and House legislation to determine which bills align with Dignity Alliance’s mission and goals. Additionally, the group educates Dignity Alliance participants on the Legislature and legislative process, works closely with other work groups to advance bills which support the mission. It oversees Dignity Alliance’s Legislator Awards.

In 2021, Dignity Alliance Massachusetts’s Legislative Work Group coordinated with other DignityMA Work Groups and reviewed and recommended 70 state legislative bills and 10 federal legislative bills, which addressed our goals, for endorsement and recommended passage of several FY ’22 state budget amendments for housing vouchers, behavioral health, and other issues. The Legislative Work Group also led DignityMA in coordinating testimony for major bills.

In addition, DignityMA sought and received an Opinion from the State Ethics Commission on lobbying, Developed Dignity Alliance’s response to Senate Committee on Reimagining Long-Term Care; provided support for the Veterans Long-Term Care Work Group in enacting Chapter 15 of the Acts of 2021, including advocating for $200 million funding for small long-term care homes for veterans around the Commonwealth; and developed criteria for selecting Dignity Alliance Massachusetts first “Outstanding Dignity Legislator” awards.
Facilities

The Facilities Work Group (Nursing Homes, Rest Homes, and Assisted Living) addresses quality of care and quality of life issues affecting residents. This workgroup focuses on developing policy recommendations on a wide range of issues, including safe staffing levels, visitation rights for nursing home residents during a pandemic, COVID-19 vaccinations for long-term care staff, nursing home closure policies protecting resident rights, and more.

In 2021, the Facilities Work Group worked closely with other DignityMA Work Groups team to support state and federal legislative bills supporting DignityMA’s goals.

The Facilities Workgroup provided written and oral testimony on nursing home issues, including, but not at all limited to testimony on:

- Proposed amendments to 105 CMR 150.000 Standards for Long Term Care Facilities new definition for “Hours of care per resident per day (HPRD), implement 3.58 HPRD minimum (including .5 RN HPRD), reduction of number of beds per room in existing nursing homes to no more than two, plus related construction requirements; and

- The following bills at a Joint Committee on Elder Affairs Hearing:
  - S.413/H.733 An Act to improve employer standards for Massachusetts nursing homes
  - S.414/H.727 An Act to ensure quality of care in nursing homes
  - S.406 An Act relative to small house nursing homes – construction of “small home” nursing homes which house 10-14 residents and returns control, dignity, and a sense of well-being to residents, while providing high-quality, personalized, person-centered care.

In addition, the Facilities Work Group advocated for transformation throughout the year, working alongside other DignityMA Work Groups and providing its long-term care expertise, experience and recommendations for improved accountability, transparency, and both resident and staff care and safety. The following examples highlight some of the Work Group’s efforts and accomplishments:

- Authored: “Recommendations to Achieve a Successful Transition for Nursing Home Residents in Both Voluntary and Involuntary Nursing Home Closures.”

- Requested that the Massachusetts State Auditor undertake the following audits:
  1) The July 1-2016-June 30, 2018 report addressing timely investigation of high priority complaints by the MA Department of Public Health;
  2) The overuse and misuse of anti-psychotics and other psychotropic medications with nursing home residents; and
  3) Providing transparent information regarding COVID-19 deaths
• Prepared a Resolution Calling on Nursing Home Providers and Caregivers: Mandate COVID-19 Vaccinations to Protect All in their Care; Updated Visitation Policy and Isolation Prevention 2020 Recommendations and a Resolution Calling on Nursing Home Providers and Caregivers - Mandate COVID-19 Initial and Booster Vaccinations to Protect All in their Care.

Home & Community Based Services (HCBS)

The Home and Community-Based Services Work Group focuses on improving and promoting access to home and community-based services as an essential component of the Commonwealth’s long-term services and support continuum.

The group advocates for programs and services that keep individuals in their homes and communities so that they can receive the necessary, person-centered care in the least restrictive setting while preventing the unnecessary admissions to nursing homes. It also works to enhance the Commonwealth’s long-term services and support continuum so that nursing home residents, who do not oppose it, might transition home or back to their community with appropriate care. This Work Group also examines the many factors that impact one’s ability to receive care at home, including service capacity and delivery and the state’s waiver and other specialty programs.

• Provided Testimony on behalf of:
  o [S89/H1305](#) Act allowing a Spouse to Be a Caregiver
  o [S418/H745](#) Act to Establish Personal Care Homes
  o [S184/H446](#) Warranty Protection for Persons with Disabilities

• Outreach:
  o Submitted letter to Joint Committee on Ways & Means & House Committee with recommendations on Federal Stimulus
  o Sent correspondence to various stakeholders with recommendations on ARPA Spending
  o Sent recommendations to various stakeholders on alleviating the homecare staffing crisis

• Advocacy
  o Development of Recommendations for Reform, containing detailed proposals to improve HCBS capacity and service delivery
  o Co-authored letter for renewal of the Community First Choice 1115 Waiver
Housing

The Housing Work Group has undertaken a pilot to provide 50 Alternative Housing Voucher Project (AHVP) vouchers to transition people out of nursing homes through the independent living center network.

In 2021, the Housing Work Group created the AHVP Nursing Home Pilot. Over the winter of 2021, the Work Group met with the Department of Housing and Community Development (DHCD) and convinced the agency to create a pilot program with the independent living center (ILC) network. The pilot allocated 50 vouchers specifically for people coming out of nursing homes. These individuals would receive support from the ILCs to tackle and turn in the necessary paperwork to receive these vouchers and undertake searches for housing. Approximately 100 nursing home residents applied for the vouchers and 85 were eligible.

The AHVP Nursing Home Pilot is ongoing. The emphasis on housing as a key to transitions from nursing home facilities back to the community will continue.

Behavioral Health

The Behavioral Health Work Group advocates with the Massachusetts Rehabilitation Commission for appropriate and accessible behavioral health services for older adults and adults under 60 so they can remain in the community; and advocates with the Executive Office of Elder Affairs for appropriate and effective behavioral health services for adults who live in nursing homes so that they have opportunities to move to the community.

In 2021, the Behavioral Health Work Group joined with the Legislative, Facilities, Home and Community Based Services and Legal Work Groups to advocate to end the overuse and misuse of antipsychotics and other psychotropic medications with nursing home residents. As part of their advocacy efforts, the group solicited an audit by the MA State Auditor. Efforts have begun to organize around the goal to increase social work hours in nursing homes in order to provide more appropriate and effective resident care.

Legal

The Legal Work Group provides feedback and guidance to other work groups and to the organization as a whole pertaining to laws and procedures. Additionally, the group analyzes cases for their relevance to Dignity Alliance and helps draft and edit position papers for other work groups.

In 2021, the Legal Work Group worked on many legal and legislative endeavors related to nursing home resident health and safety during Covid-19; nursing home visitation; vaccine requirements; and more. The group also fielded inquiries from DignityMA members pertaining to law and regulations governing nursing facilities and home and community-based programs and services.
Veteran Services

The Veteran Services Work Group supports issues related to older veterans and those with disabilities related to issues around long-term care services and support.

In 2021, the Veteran Services Work Group advocated on behalf of veterans living at the Holyoke Soldiers’ Home, where at least 77 veterans died due to the Covid-19 pandemic and management failures.

The Work Group led DignityMA’s efforts urging the Commonwealth to put aside its proposal to construct a 235-bed, long term care facility and, instead, follow the Veterans Administration’s Small House Model Design Guide to create resident-centered communities focused on the needs and preferences of veterans. The Small House Model provides exceptional rehabilitative and hospice care and chronic disease management, with sufficient staff and equipment to support all personal care and assistance needs, using intentional communities of approximately 10 residents living in homes with private bedrooms with full baths. The guiding principles are autonomy and dignity.

Communications

The Communications Workgroup raises awareness of Dignity Alliance and initiatives and shares topical news and resources. Members of this group update the website, brainstorm content, campaign ideas and educational opportunities, and advocate through social media and public relations.

In 2021, the Communications Work Group advocated for change through media efforts, including coordinating communications planning and execution; outreach as op-eds, news releases, and letters to the editors; social media activities; and coordinating communications activities among the Work Groups.

Dignity Alliance Workgroups

Coordinating Committee – Co-Chairs: Bill Henning & Paul Lanzikos
Legislative – Chair: Richard T. Moore
Facilities & Regulations – Chair: Arlene Germain
Home & Community Based Services – Chair: Meg Coffin
Behavioral Health – Chair: Frank Baskin
Housing – Co-Chairs: Shaya French & Bill Henning
Communications – Co-Chairs: Samantha VanSchoick, Priscilla O’Reilly, & Chris Hoeh
Legal Issues – Co-Chairs: Jeni Kaplan and Clarence Richardson
Veterans – James Lomastro, Ph.D
Participants:
• Doris Bardwell, RN
• Frank E. Baskin, LICSW*
• Joe Bellil
• Charles Carr, former Commissioner, Mass. Rehab. Commission*
• Meg Coffin*
• Cassie Cramer
• Judi Fonsh, MSW
• Lachlan Forrow, MD*
• Shaya French*
• Nomita Ganguly
• Arlene Germain*
• Wynn Gerhard, Esq.
• Pamela Goodwin
• Jerry Halberstadt
• Bill Henning*
• Sandy Hovey
• L. Scott Harshbarger, Former Attorney General
• Chris Hoeh*
• Jeni Kaplan, Esq.*
• Colin Killick*

(*) Designates Member of Coordinating Committee

• James Lomastro, PhD
• Linda Landry
• Paul J. Lanzikos, Former Secretary of Elder Affairs*
• Posie Mansfield
• Richard T. Moore, Former Senate President Pro Tempore*
• Sandy Alissa Novack, MBA, MSW
• Priscilla O’Reilly*
• Lisa Orgettas
• David Polakoff, MD
• Vicky Pulos
• Clarence Richardson, Esq.*
• Yashira Ruiz
• Marlene Sallo
• Stephen Schwartz, Esq.
• Sue Rorke
• Kate Symmonds
• Scott Trenti
• Alison Weingartner
• Samantha VanShoick*

Organizations:
• Alzheimer’s Association of Massachusetts & New Hampshire
• Boston Center for Independent Living
• Center for Living & Work
• Center for Public Representation
• COP Amputee Association
• Disability Law Center
• Disability Policy Consortium
• Disability Resource Center
• Easter Seals Massachusetts
• Greater Boston Chapter, United Spinal Associates
• Greater Boston Legal Services
• Hospice & Palliative Care Federation of Massachusetts
• Massachusetts Advocates for Nursing Home Reform
• Massachusetts Law Reform Institute
• MetroWest Center for Independent Living
• Mystic Valley Elder Services
• Mass NAEAL (National Academy of Elder Law Attorneys)
• Older Adult Behavioral Health Network
• O’Reilly Communications
• SeniorCare, Inc.
• Stavros Center for Independent Living
• Stop Bullying Coalition