

**Charles D. Baker**  
Governor

**Karyn Polito**  
Lieutenant Governor



**Marylou Sudders**  
Secretary

**Cheryl Lussier Poppe**  
Secretary of Veterans' Services

# State of the Commonwealth's Soldiers' Homes

**November 1, 2022**



## Introduction and Overview

In accordance with Section 16(b) of Chapter 141 of the Acts of 2016, the Department of Veterans' Services (DVS) submits to the General Court its report on the state of the Commonwealth's two Soldiers' Homes (Homes). Pursuant to the statute:

The report shall include findings relative to: (i) the quality of care provided at the homes; (ii) the financial status of the homes; (iii) the uniformity of programs at the homes; (iv) the capital needs of the homes; and (v) the status of the United States Department of Veterans Affairs' accreditation, including the efforts necessary to maintain compliance and the efforts necessary to become fully compliant with the United States Department of Veterans Affairs' standards at each soldiers' home. The report shall also include an analysis of activities of the office, including a summary of activities undertaken to implement uniform intake policies and procedures, patient and resident eligibility requirements and rate-setting functions between the Soldiers' Home in Massachusetts and the Soldiers' Home in Holyoke.

## Overview of the Soldiers' Homes

The Commonwealth of Massachusetts operates two soldiers' homes; the Massachusetts Soldiers' Home located in Chelsea (Chelsea) and the Massachusetts Soldiers' Home located in Holyoke (Holyoke). Chelsea and Holyoke are collectively referred to in this report as the "Homes." The Homes focus primarily on providing two major services for Massachusetts veterans: long term care (nursing facility) and domiciliary residential services (room accommodations, daily meals, and social services). The Homes mission is to provide services and care to Massachusetts veterans with dignity, honor, and respect, promoting veterans' health, independence, and resilience.

This report outlines the following information for each of the Soldiers' Homes

- (i) The quality of care provided at the homes
- (ii) The financial status of the homes
- (iii) The uniformity of programs at the homes
- (iv) The capital needs of the homes
- (v) The status of the United States Department of Veterans Affairs' accreditation, including the efforts necessary to maintain compliance and the efforts necessary to become fully compliant with the United States Department of Veterans Affairs' standards at each soldiers' home.
- (vi) An analysis of activities of the office, including a summary of activities undertaken to implement uniform intake policies and procedures, patient and resident eligibility requirements and rate-setting functions between the Soldiers' Home in Massachusetts and the Soldiers' Home in Holyoke.

## Soldiers' Home in Chelsea

The Soldiers' Home in Chelsea first opened its doors to Massachusetts veterans in 1882 as the first Soldiers' Home in the Commonwealth. Today, Chelsea offers veterans quality long-term care, skilled nursing, and domiciliary/supportive services. Chelsea has a total of 187 long term care beds, and 305 domiciliary beds. Chelsea has a seven-person Board of Trustees appointed by the Secretary of Health and Human Services; each member is appointed to a seven-year term.

## Certification and Accreditation

Chelsea is surveyed annually by the Federal Department of Veterans Affairs (VA) and the Center for Medicare and Medicaid Services (CMS). Chelsea is an accredited nursing care center by the Joint Commission. The Home is certified for participation in the Federal Medicare Program. The Massachusetts Department of Public Health conducts both announced and unannounced infection control surveys at the Home, including the Infection Control Assessment Response Survey which focuses on COVID-19 management.

- **CMS:** Chelsea is surveyed annually by the Centers for Medicare and Medicaid Services (CMS) because 88-beds are certified for participation in the Federal Medicare Program. On October 22, 2021, CMS conducted their annual survey. Out of hundreds of measures, Chelsea received five deficiencies that were isolated in scope with "no actual harm with potential for more than minimal harm that is not immediate jeopardy." Chelsea submitted a Plan of Correction (POC) to address these deficiencies.
- **VA:** On February 28, 2022, the U.S. Department of Veterans Affairs (VA) conducted its annual survey of the Home's long-term care and domiciliary services. Out of 190 measures, Chelsea was cited for 8 deficiencies in long term care and 3 of 163 measures in the domiciliary, none of which were high scope or severity and are being addressed by the Home's Corrective Action Plan (CAP). Chelsea is awaiting acceptance of the CAP and certification. Notably, one deficiency was related to the VA's resident room space requirements which will be addressed by the new room layouts in the new building after the move.
- **Joint Commission:** Chelsea is surveyed every three years by The Joint Commission, an independent, not-for-profit voluntary accreditation organization. The Joint Commission last surveyed Chelsea on December 17, 2021, receiving full accreditation which is valid for up to 36 months.

## Resident Care

The Soldiers' Home in Chelsea follows public health guidance from the federal and state government for the safety of all veteran residents and staff. Like many long-term care facilities throughout the country, Chelsea was impacted by the COVID-19 pandemic and worked to ensure a safe environment for residents and staff. Chelsea continues to follow compliance and safety standards from the Centers for Disease Control and Prevention (CDC), CMS, the VA, and the Massachusetts Department of Public Health (DPH). Throughout the public health crisis, the Home has regularly communicated with families, residents, and staff to apprise all individuals of changes being made to the facility.

Regarding long term care, in September 2022, Veterans receive an average of 9 Nursing Hours Per Patient Day which is significantly above the CMS Five-Star requirement.

Following DPH guidance, the Soldiers' Home in Chelsea continues indoor visitation and communal activities for veteran residents. Visitation outdoors is also encouraged in the courtyard. To ensure resident safety, all visitors are screened when they arrive and are encouraged to take a rapid COVID test. The recreation department engages the veterans with entertainment, games, outings, and more.

Resident and family satisfaction with Chelsea's long term care is assessed monthly using a survey tool administered by Pinnacle Quality Insight. The survey and report focus on the overall satisfaction with the nursing care, dining service, quality of food, cleanliness, individual needs, laundry service, communication, response to problems, recommend to others, activities, professional therapy, admissions process, and safety and security. In the most recent report covering November 2021 through October 2022, Chelsea received an overall 12-month customer favorability rate of 98%, far exceeding the national average of 85% amongst Veterans' Homes. Chelsea received an overall rating of 4.8 out of 5. In January 2022, the Soldiers' Home in Chelsea was named to U.S. News & World Report's list of Best Nursing Homes.

#### Capital Projects and Needs of the Home

Chelsea is nearing the completion of significant capital projects that will benefit the quality of life and care at the Home, including building the new, state-of-the-art, 154-bed Community Living Center (CLC) and the redevelopment of the domiciliary on campus.

Chelsea has been working in close partnership with Holyoke to implement a modern electronic medical record ("EMR") system, which will support coordinated patient care, and ease administrative burdens.

The new Community Living Center will result in a 154-bed facility, providing long term care and skilled nursing to Massachusetts Veterans in a modern, state of the art facility. The facility is scheduled to open during the first quarter of Calendar Year 2023.

Chelsea pursued a public-private partnership for the domiciliary portion of its campus and announced Pennrose as the domiciliary campus redevelopment partner in September 2021 following a competitive bid process. While diversifying the unit style and income mix on the campus, the development calls for 100% veterans' preference across all housing units. The plan accommodates all current domiciliary residents into the new housing units. In November 2021, DCAMM and Pennrose executed a Provisional Designation Agreement and a License of Entry, with expectation to complete Master Development Agreements in December of 2022.

| Chelsea Capital Funding                   | Fiscal Year 2022      |
|---|-----------------------|
| John Adams building walkway & stairs      | \$278,878             |
| New Construction: Community Living Center | \$42,709,476.45 spent |
| <b>Total Capital Funding</b>              | <b>\$42,988,354</b>   |

#### Population Census

The table below summarize the total long term care and domiciliary populations at the Soldiers' Home in Chelsea as of September 30, 2022. Notably, Chelsea's veteran population also includes veterans who served in Iraq and Afghanistan, particularly in the domiciliary.

During FY22 there were 6 residents admitted to the domiciliary and 31 admitted to long term care.

|                  | Long Term Care |         | Domiciliary |         | Totals     |           |
|------------------|----------------|---------|-------------|---------|------------|-----------|
|                  | Number         | Percent | Number      | Percent | Number     | Percent   |
| WWII             | 5              | 5%      | 0           | 0%      | 5          | 2%        |
| Korea            | 26             | 27%     | 2           | 2%      | 28         | 13%       |
| Vietnam          | 53             | 56%     | 72          | 59%     | 125        | 58%       |
| Persian Gulf     | 0              | 0%      | 14          | 11%     | 14         | 6%        |
| Iraq/Afghanistan | 0              | 0%      | 3           | 2%      | 3          | 1%        |
| Peace Time       | 11             | 1%      | 32          | 25%     | 42         | 19%       |
| <b>Total</b>     | <b>95</b>      |         | <b>122</b>  |         | <b>217</b> | <b>--</b> |
| <b>Men</b>       | 95             | 100%    | <b>113</b>  | 93%     | 208        | 96%       |
| <b>Women</b>     | <b>0</b>       | 0%      | <b>9</b>    | 7%      | 9          | 4%        |

\* percentages may appear higher or lower than 100% due to rounding.

| Long Term Care |           |                       |
|----------------|-----------|-----------------------|
| Age            | Number    | Percent of Population |
| 100 and Over   | 1         | 1.1%                  |
| 90 – 99        | 21        | 22.1%                 |
| 80 – 89        | 27        | 28.5%                 |
| 70 – 79        | 29        | 30.5%                 |
| 60 – 69        | 16        | 16.8%                 |
| 50 – 59        | 1         | 1.1%                  |
| <b>TOTAL</b>   | <b>95</b> |                       |

The average age of all Chelsea long-term care residents is 81 years old.

| Domiciliary  |            |                       |
|--------------|------------|-----------------------|
| Age          | Number     | Percent of Population |
| 90 and Over  | 1          | 0.8%                  |
| 80 – 89      | 13         | 10.7%                 |
| 70 – 79      | 49         | 40.2%                 |
| 60 – 69      | 45         | 36.9%                 |
| 50 – 59      | 11         | 9.0%                  |
| 40 – 49      | 3          | 2.5%                  |
| Under 40     | 0          | 0%                    |
| <b>TOTAL</b> | <b>122</b> |                       |

Included within this census are nine (9) female residents who account for 7% of the domiciliary population. The average age of all Chelsea domiciliary residents is 69 years old.

Primary areas of care at Chelsea include the current populations:

| Care Area                                   | Type of care  |
|---|---|
| Domiciliary                                 | Veterans live independently and the staff provide psychosocial support. The Domiciliary Clinical Care Unit is supported by Physicians, Nurse Practitioners, and nursing staff who provide medical care including medication administration, wound care, assistance with medical devices, and medical liaison care with alternate care community providers, immunization program and emergency medical management.   |
| Memory Care                                 | Chelsea has two dementia-friendly units which are housed on the first floor. These units are secure, with a calm, soothing, and safe environment. The veterans are encouraged to remain as independent as possible with all activities of daily living while supervised and cared for by staff. Dementia is prevalent on all units with the majority of inpatient veterans diagnosed with some type of dementia.  |
| Skilled Nursing Services<br>(CMS Certified) | Staff provides all daily care and skilled services. Skilled services include post-acute care IV antibiotic treatment, rehabilitative services, and respiratory care. Post skilled service veterans are provided with full daily care activities, physical care, medication management, and additional supportive services as necessary. All care is provided in an interdisciplinary team approach. Veterans in these areas are dependent on one or more staff members for assistance. Hospice veterans are cared for within these environments to ensure continuity of care and services. Conditions include end stage dementia, cancer, respiratory disease, and terminal disease processes. Emotional and spiritual support is also provided to veterans and their family members. |
| Long Term Care                              | Veterans have a wide range of medical concerns, are unable to live in an independent environment, and meet nursing home level of care needs. Staff provides nursing care, activities of daily living, toileting, incontinent care, eating, transferring, medication management, wound care, restorative care, maintenance care, behavioral management, and activities. Hospice care is also provided to veterans who are at end of life for various medical reasons. Support for the veteran and family members are provided in a continuum of care environment.  |

## Funding

Chelsea is a large campus that encompasses 11 buildings with 500,000 square feet on a roughly 20-acre plot of land. As of September 30, 2022, the Chelsea census was 217 veterans (95 in LTC/SNF & 122 in the Domiciliary). As of September 30, 2022 Chelsea has a total of 308 staff members.

| Chelsea Soldiers' Home State Funding                              | Fiscal Year 2022    | Fiscal Year 2023 (Projected) |
|---|---------------------|------------------------------|
| 4180-0100<br>Chelsea Soldiers' Home Administration and Operations | \$35,500,637        | \$48,695,993                 |
| 4180-1100<br>License Plate Retained Revenue                       | \$600,000           | \$600,000                    |
| <b>Total</b>  | <b>\$36,100,637</b> | <b>\$49,295,993</b>          |

*This does not include any additional emergency expenses including executive staffing contracts, which are borne within the Executive Office of Health and Human Services.*

## Soldiers' Home in Holyoke

The Soldiers' Home in Holyoke first opened its doors in 1952. Holyoke offers veterans quality long term health care and domiciliary residential services. Holyoke has a total bed capacity of 248 long term care beds, but for infection control measures has 128 operational long term care beds. Holyoke has a seven-person Board of Trustees, appointed to a seven-year term. Appointed by the Governor, the statute requires that the composition of the Board includes residents from all four western Massachusetts counties.

## Certification and Accreditation

Holyoke is surveyed annually by the VA and is an accredited nursing care center by the Joint Commission. The Home is not certified for participation in the federal Medicare program at this time. The Home is in process of pursuing CMS certification and has had a readiness evaluation by an external consultant. Holyoke has not operated any CMS certified beds since 2012, when it relinquished its CMS certification of acute care beds. The Massachusetts Department of Public Health conducts both announced and unannounced infection control surveys at the Home, including the Infection Control Assessment Response Survey which focuses on COVID-19 management.

- **VA:** On March 7, 2022, the U.S. Department of Veterans Affairs (VA) conducted its annual Long Term Care and Domiciliary survey. Out of the 190 measures, 10 deficiencies were cited, most cited as "No actual harm, with potential for more than minimal harm." Following the acceptance of their Corrective Action Plan (CAP), Holyoke was granted a provisional certification on May 13, 2022.
- **Joint Commission:** Holyoke is also surveyed every three years by the Joint Commission, an independent, not-for-profit accreditation organization. The Joint Commission conducted its survey on June 14, 2022. The Home received nine citations out of 762 standards. The team submitted their Evidence of Standards Compliance which was accepted and received full accreditation on September 9, 2022. This accreditation is valid for 36 months.

## Resident Care

The Soldiers' Home in Holyoke provides each veteran resident a safe, pleasant environment where they can experience their highest quality of life.

Residents participate in many activities that increase positive physical, emotional, social, and spiritual health. These activities include cards, board games, computer games, music, arts and crafts, performing arts, exercise, sports, gardening, yoga, and pet therapy as well as shopping trips and scenic tours outside of the Home. The local VFWs, American Legions, and DAVs support and interact with our veterans by sponsoring picnics, ice cream socials, and bingo.

The Volunteer Program was reopened in April 2022 after a two-year hiatus due to the pandemic. Veteran residents, families and nursing staff have commented to Home management that the return of volunteers has made a positive impact on the overall community of the Home. The Home has onboarded 20 new volunteers since reopening the program. They assist with recreation activities, gardening, one-to-one visits with veterans, playing cards, and more. They have increased socialization and provided veteran residents with additional opportunities for engagement.

## Capital Projects and Needs of the Home

The Soldiers' Home in Holyoke continues implementing several large projects to support the Home's residents and staff. These projects include an Electronic Medical Record project, which will support

coordinated patient care, and ease administrative burdens, transitioning into the construction management phase for a new Soldiers' Home, and construction to create negative pressure spaces on the Home's isolation unit, completion of the project is expected in early 2023.

The comprehensive capital project to replace the long-term care building continues to progress. The Home has met the established milestones for submission to the VA's State Home Construction Grant program, which resulted in the opportunity to apply for a conditional grant from the VA on August 7, 2022. As of September 30, 2022, the Home received approval of its conditional grant request. This approval authorizes \$164 million to be paid to the Commonwealth to finance the beginning of construction of the new Home. With full reimbursement, the Home will receive 65% of project costs reimbursed by the VA.

The design for the replacement long-term care building follows the VA Small Home Model, modified to meet veterans' needs as well as the requirements of the land on which the building is situated. This process is moving forward, with the design phase wrapping up and the project transitioning into its construction management phase. In March 2022, domiciliary residents were transitioned to new accommodations so that the building can be demolished to build the new long-term care building.

The Home completed the Refresh Project in November 2021. This initiative to improve resident comfort and infection control measures revitalized the facility and enhanced amenities for veteran residents.

These amenities include:

- The Media Room - The media room is a new addition to the Home, which replaced the old library. The media room has computers, internet access, printers, books, and periodicals.
- The Hair Salon – The hair salon has new furniture and a wheelchair-accessible sink. A hairstylist is available every Thursday to provide shampoos, haircuts, and styling.
- The Cherry Hill Exchange – The Cherry Hill Exchange is also a new addition to the Home. The exchange is a store that stocks necessities, toiletries, clothing, greeting cards, reading glasses, games, books, and more. All items in the Cherry Hill Exchange are free of charge.
- The Canteen – The Canteen is the central gathering spot for residents, has new furniture, several brand-new smart televisions, one large-screen television, and new electronic bingo equipment.
  - The Canteen Snack Bar reopened this spring and has many affordable offerings for veteran residents and staff.
- The Greenhouse – The greenhouse reopened this summer, and the veteran residents have enjoyed tending to plants, flowers, and seedlings.
- The Victory Garden – The Victory Garden is a flower and vegetable garden; it was relocated to a new area on the grounds for accessibility and included raised beds for easy reach.
- The Solariums – The Home will be painting the unit solariums with accent colors. Colors selected are based on research that suggest that they will encourage relaxation, appetite or activity.

### Population Census

Holyoke's population consists of veterans from Vietnam, WWII, Korean War eras, and Vietnam era veterans. The tables below summarize the total Long-Term Care and Domiciliary populations at the Soldiers' Home in Holyoke as of September 30, 2022.

Holyoke resumed admissions in December 2021 and has since admitted 51 residents.



| Long Term Care    |            |                       |
|-------------------|------------|-----------------------|
| Service Era       | Number     | Percent of Population |
| WW II             | 16         | 15%                   |
| Korea             | 29         | 27%                   |
| Vietnam           | 57         | 52%                   |
| Persian Gulf      | 1          | 1%                    |
| Iraq /Afghanistan | 0          | 0%                    |
| Peace Time        | 5          | 5%                    |
| <b>Total</b>      | <b>108</b> | <b>100%</b>           |
| <b>Men</b>        | <b>105</b> | <b>97%</b>            |
| <b>Women</b>      | <b>3</b>   | <b>3%</b>             |

| Long Term Care |            |                       |
|----------------|------------|-----------------------|
| Age            | Number     | Percent of Population |
| 90 and Over    | 39         | 36%                   |
| 80 – 89        | 39         | 36%                   |
| 70 – 79        | 27         | 25%                   |
| 60 – 69        | 3          | 3%                    |
| Less than 60   | 0          | 0%                    |
| <b>Total</b>   | <b>108</b> | <b>100%</b>           |

**Primary areas of care available at Holyoke:**

| Care Area             | Type of care  |
|-----------------------|---|
| Domiciliary           | Closed in March of 2022   |
| Dementia special care | Based on their clinical needs, veterans in this program may have memory loss and/or exhibit behaviors such as wandering off the premises, and therefore require special care. The staff provides physical assistance with personal care needs (e.g., assist with eating and toileting).   |
| Hospice               | Staff provides end of life care to veterans and emotional support to the family. The veterans being cared for range from end stage dementia to cardiac or respiratory disease and terminal illnesses, such as cancer. The staff also provides physical assistance with personal care needs. Hospice patients are currently integrated with other inpatient populations rather than cohorted separately. |
| Long-term Care        | Veterans have a wide range of medical concerns and are unable to live in an independent environment. As needed, staff provides nursing care, activities of daily living, toileting, incontinent care, assistance with eating and transferring, medication management, wound care, restorative care, maintenance care, exercise and social activities.   |

### Funding

The Homes are funded through the Commonwealth's annual General Appropriations Act ("GAA") on an annual basis. All reimbursements received from patients and/or the VA (except for a small amount of retained revenues) reverts to the Commonwealth's general fund to offset the operating costs. Daily Care charges for

both Homes are \$30 per day for Long Term Care (and Skilled Nursing services at Chelsea), and \$10 per day for Domiciliary services. Holyoke's domiciliary closed in FY22. Rates may be waived or reduced based on monthly income or for some qualifying disabled veterans. The rates charged to patients / residents have not increased over the 16 years.

The Soldiers' Home in Holyoke has 4 buildings with 243,000 square feet on a roughly 15-acre plot of land. Holyoke has a total of 304 staff as of September 30, 2022.

Below are the GAA funding levels for the Homes for FY2022 and FY2023 (projected):

| Holyoke Soldiers' Home State Funding                                 | Fiscal Year 2022    | Fiscal Year 2023 (Projected) |
|--|---------------------|------------------------------|
| 4190-0100<br>Holyoke Soldiers' Home Administration<br>and Operations | \$27,119,113        | \$28,345,683                 |
| 4190-0101<br>Holyoke Antenna Retained Revenue                        | \$5,000             | \$5,000                      |
| 4190-0102<br>Pharmacy Co-Payment Retained Revenue                    | \$110,000           | \$110,000                    |
| 4190-0200<br>Holyoke Telephone and Television<br>Retained Revenue    | \$50,000            | \$50,000                     |
| 4190-0300<br>Holyoke 12 Bed Retained Revenue                         | \$804,385           | \$828,974                    |
| 4190-1100<br>License Plate Retained Revenue                          | \$400,000           | \$400,000                    |
| <b>Total</b>   | <b>\$28,488,498</b> | <b>\$29,739,657</b>          |

*This does not include any additional emergency expenses including executive staffing contracts, which are borne within the Executive Office of Health and Human Services.*

## Updates Across Both Homes

### Infection Control

- Staff are mandated to be vaccinated against COVID-19, unless they received an exemption for medical or religious reasons, per a Baker-Polito [Administration vaccine mandate for long-term care \(LTC\) staff](#), including the Soldiers' Homes in Chelsea and Holyoke, to strengthen infection control and protect vulnerable residents. All Soldiers' Home staff, including contracted staff, are mandated to be vaccinated and have at least one booster against COVID-19. 100% of active staff meet the requirements.
- Mandatory COVID-19 testing for employees at the Soldiers' Homes has been in place since September 2021. The Homes will continue to follow federal and state requirements regarding surveillance testing to help safeguard the health and safety of staff and residents.
- Daily symptom checking and routine staff surveillance are important tools used by the Homes to protect staff, residents and visitors and will remain in place. Staff who are not feeling well are instructed not to come to work and to contact their health care provider. If staff show any signs of COVID-symptoms, they are required to self-quarantine at home.
- The Homes continued to communicate with families during the public health crisis. This includes updates on the usage of PPE throughout the facility, visitation protocols, and testing protocols for both residents and staff.
- The Homes are supported by MA DPH epidemiologists who are available and do provide consultation regarding infection prevention and control.

### Electronic Medical Records for the Soldiers' Homes

Both Soldiers' Homes, the Department of Veterans' Services, and the Executive Office of Health and Human Services have collaborated to procure an Electronic Medical Record System (EMR). This project received approval for funding from the VA State Home Construction Grant Program for 65% federal VA matching funds. The five-year projected costs of the EMR implementation are approximately \$10M.

Following a competitive procurement, in 2022 EOHHS executed a contract in March 2022 with Wellsky Corporation to provide an EMR system for the two homes.

An EMR will enable the Soldiers' Homes to increase patient safety and dignity, better support the clinical team, ensure regulatory compliance, and improve billing. Future EMR Objectives and Project goals include:

- Improvements in clinical access and patient care
- Development of an interoperable, cloud-based, secure, agile infrastructure
- Enhancement of billing and fiscal management

### Uniformity and Collaboration on Policies and Procedures

The Homes operate under similar policies and regulations, except for the structure and appointment of the Boards of Trustees and Superintendents as specified by statute.

Subject Matter Experts (SME) at both Homes continue to review all existing agency policies and amend or implement as needed. Policies are often shared between homes to promote uniformity and allow for the introduction of best practices, which happens across leadership including Superintendents, and medical and nursing leadership. Given the differences between services offered and the building layouts of the Homes, there are circumstances in which policies differ between Homes.

The Superintendents of both Homes interact on a regular basis and work collaboratively with their

counterparts in other states to exchange ideas and best practices, maintain proficiency with VA and CMS standards and regulations, and monitor industry changes. The Superintendents are directly supervised by the Secretary of DVS, work closely with the Assistant Secretary for Veterans Homes (filled in accordance with M.G.L. Chapter 115 § 12) and meet with her and her senior management to exchange information and identify additional opportunities for collaboration and continuous improvement to better serve the long-term care needs of veterans and their families.

Additional uniformity includes

- The Homes are uniform in the basic and daily care fees they charge.
- The Homes collaborate with outside health care providers and agencies to help care for and support the veterans. Both Homes collaborate with their VA medical center of records: in Chelsea that is the Bedford VA, and in Holyoke that is the VA of Central and Western Massachusetts located in Leeds.

### Eligibility and Admissions

The Homes serve only veterans residing in Massachusetts. The term “veteran” is defined by MGL Ch. 4, §7, Cl. 43. To prove veteran’s status a resident must present proof of his or her military service, which is usually done by supplying a copy of her or his Department of Defense Form DD-214.

Both Homes operate admissions on a first-come, first-served basis. Holyoke changed its practice to better align with Chelsea when it reopened admissions in December 2021.

### Future of the Soldiers’ Homes

In August of 2022 Governor Baker signed Chapter 144 of the Actions of 2022, which modifies the organizational structure of the Department of Veterans’ Services and elevates the Secretary of Veterans’ Services to a Cabinet-level position. Briefly, the changes include:

- Elevates the Department of Veterans’ Services to a cabinet level secretariat.
- Modifies the membership of and revises the roles and responsibilities of the local Boards of Trustees for each Home.
- Authorizes the Secretary to appoint (and remove) the Superintendents.
- Establishes and defines the roles and responsibilities of the statewide Veterans Homes’ Council.
- Renames the Soldiers’ Homes as “State Operated Veterans Homes.”
- Requires DPH to survey the State Operated Veterans Homes.
- Requires that the State Operated Veterans Homes apply for CMS certification.
- Requires certain positions at the Department of Veterans Services including an ombudsman for each State Operated Veterans Home, a Deputy Secretary of Veterans’ Services, and an Executive Director of Veterans’ Homes and Housing.

The law becomes effective November 1<sup>st</sup> with staggered implementation dates of January 1<sup>st</sup> and March 1<sup>st</sup>.

### Conclusion

Both Soldiers’ Homes continue to operate at their highest capacity to best serve their resident veterans with dignity, honor, and respect. Leadership continues to push forward on critical initiatives to continue and improve care of residents now and for future generations, including modernizing technology and building new long term care facilities.