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Dear Members,

We have two state updates to share with you from the Executive Office of Aging & Independence (AGE) and the Department of Public Health (DPH). Please see a summary of both updates below.

### **1. AGE & ALR Network Quarterly Check-In**

On behalf of the Executive Office of Aging & Independence (AGE), we're sharing an invitation to the next AGE & ALR Network Quarterly Check-In. This meeting is a great opportunity for staff to review updates, ask questions, and connect with peers across the network. Next week's meeting will include a discussion relevant to all staff who use the Dynamics Incident Reporting System. Please plan to attend if you submit reports using this system.

#### ***Meeting Details:***

- When: January 14, 2026, at 11:00 AM Eastern Time
- Topic: AGE and ALR Network Quarterly Check-In
- Invited Participants: Executive Directors, RCD/Wellness Directors, staff nurses, and all staff who submit reports using the Dynamics system
- [Zoom Registration Link](#)  
*After registering, you will receive a confirmation email containing information about joining the webinar.*

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### **2. DPH Flu Update**

The Massachusetts Department of Public Health (DPH) has issued a recent update on very high levels of respiratory illness across the state, driven largely by influenza A. Emergency departments are experiencing increased strain. On Monday, January 5, DPH shared the Commissioner's press release and provided an update on acute respiratory diseases, including recommended action steps for patient and resident care.

- DPH Original Email: [MA DPH - Massachusetts Reports Very High Flu Activity with Cases Climbing](#)
- Press Release: [Massachusetts Reports Very High Flu Activity](#)
- Respiratory Illness Dashboard: [Current ED Visits & Flu Activity](#)

#### ***Key Information:***

- Emergency departments are very busy, with dozens of patients with respiratory illnesses (mainly influenza A) waiting for inpatient beds.
- Influenza severity is very high statewide, with influenza A H3N2 dominating. Most H3N2 isolates nationally are of the antigenically drifted subclade K, which may reduce the benefit of prior immunity.

#### ***DPH Recommendations Issued for SNFs & Rest Homes:***

- Masking: Staff should wear masks during patient/resident encounters and in care areas. Encourage patients/residents and visitors to wear facemasks when possible.
- Managing Mild Illness at Home: If symptoms are not severe, help patients/residents rest, stay away from others, stay hydrated, and use over-the-counter medications for comfort.
- Antiviral Use: If testing confirms influenza or COVID-19, consider prescribing antivirals (e.g., oseltamivir/Tamiflu or nirmatrelvir/ritonavir/Paxlovid) to reduce

severity and duration.

- In the absence of testing, prompt empiric antiviral treatment for influenza is recommended.
- Prescribing guidance: [Antiviral Guidance for Influenza](#)
- Direct to Urgent Care: If patients/residents need evaluation but you cannot provide a visit, direct them to a local urgent care instead of the ED if clinically appropriate. [Find Urgent Care Locations](#)
- Vaccination: Encourage influenza, COVID-19, and RSV vaccination for patients/residents and staff who are not yet vaccinated. Incorporate vaccination into standing orders. The respiratory illness season lasts until spring, so there is still time to vaccinate.

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If you have any questions, please contact us at [Mass-ALA@mass-ala.org](mailto:Mass-ALA@mass-ala.org). This update is solely for general informational purposes. It is not intended to replace a full review of the cited regulations or guidance.

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