

# CREATING A PATH TOWARDS THE "NEXT NORMAL" IN SENIOR LIVING

*Strategies and tactics to position communities that seize the opportunity to reinvent culture and services during and after the pandemic*

**Presented by ICAA COVID-19 Senior Living Task Force**

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## Co-chairpersons

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## ICAA COVID-19 Senior Living Task Force

*Purpose, Commitment, Clarity*

The ICAA COVID-19 Senior Living Task Force generates ideas, strategies, tactics and messaging that organizations can consider, now and in the future, when planning the next models of senior living that optimize the health and well-being of older adults and team members. This includes, but is not limited to, the impact of the built and virtual environments, social activities and food/beverage services, technology, education and security; challenges to current and future business models; and approaches to build confidence in living in and visiting senior living properties.

The ICAA COVID-19 Senior Living Task Force includes representatives of for-profit, not-for-profit, and affordable housing—organizations providing active-adult and independent living, continuing care/life plan communities, assisted living, long-term care, skilled nursing and rehabilitation along with representatives from the industry associations and the suppliers that support their work.

**Organizer:** International Council on Active Aging (ICAA)

[www.icaa.cc](http://www.icaa.cc)

ICAA is a professional association that leads, connects and defines the active-aging industry and supports professionals who aspire to develop wellness cultures for adults over 50. This support includes creating wellness environments, programs and services. The association is focused on active aging—an approach to aging that helps older adults live life as fully as possible within all dimensions of wellness—and provides its members with education, information, resources and tools. As an active-aging educator and advocate, ICAA has advised numerous organizations and governmental bodies.

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## Task Force supporters



# CREATING A PATH TOWARDS THE “NEXT NORMAL” IN SENIOR LIVING

By March 2020, a skilled nursing home in Seattle garnered attention as multiple residents and staff members fell ill to a novel coronavirus, COVID-19. As the number of mortalities climbed, so did the misunderstanding that all types of senior living communities—active adult, independent living, assisted living—were experiencing similar levels of illness. One consequence of that misunderstanding is a negative perception of senior living, even when communities have provided a safe home and environment.

The COVID-19 pandemic dramatically affected the operations of all senior living organizations, costing jobs, billions in lost revenue and the emerging effects of social isolation, declines in cognitive and physical function and loss of spiritual and social engagement. Communities quickly pivoted to counteract these negative impacts by instituting many policies to keep residents and staff as safe and engaged as possible.

While the pandemic has challenged operations, COVID-19 has also presented the industry with a rare opportunity to, as a whole, re-evaluate the meaning of mission and how to best deliver the mission moving forward. As leaders, funders, investors, residents and families look to the future, there are questions to be answered: What will life in a senior living community look like next year, or in three years, or in five? Which communities will flourish, which will remain challenged, and which will cease operations? Will people want to live in senior living communities—and why?

To identify the strategic areas that will frame the “next normal” of senior living, more than 150 leaders and experts joined the International Council on Active Aging (ICAA) COVID-19 Senior Living Task Force. Task force members provided insight into two areas that will position organizations for a sustainable future:

**Optimize the health and wellness of residents and staff.** Safety during any emergency is paramount. But what structural changes are needed to create a wellness-based model that combines safety with an engaging and health promoting lifestyle? How will the culture and staffing welcome the next generations of older adults?

**Develop a new value proposition for senior living.** Once the culture, services and staffing are in place, how will organizations overcome the myths and negative perceptions about senior living? How will the types of housing and services be separated and clearly defined in the consumers’ minds?

As an aid to strategic planning, the task force members developed six strategies that can apply to many types of organizations:

1. Design, re-design and/or renovate exteriors and interiors of buildings.
2. Develop purpose-driven, caring, passionate staff.
3. Provide technology to increase connections, aid efficiency and optimize health.
4. Develop the culture of positive aging, framed by all the dimensions of wellness.
5. Establish trust by being prepared to respond to emergencies and unexpected events.
6. Update perceptions to reinforce the new value proposition of each type of senior living.

# CREATING A PATH TOWARDS THE “NEXT NORMAL” IN SENIOR LIVING

## **Themes to develop the next culture**

Several cross-cutting themes emerged among the strategies, suggesting that the value proposition of senior living is intertwined with the wellness model, which emphasizes health and well-being.

- Challenge ageist assumptions and stereotypes.
- Recognize multidimensional wellness is a strategic imperative.
- Involve residents and staff at all levels of planning and decision-making.
- Break apart the silos that counteract teamwork by flattening organizational structures.
- Connect corporate managers to the day-to-day issues at individual properties.
- Elevate wellness leadership to the C-suite since it is a primary service.
- Apply technology, with training, to address many issues facing communities.
- Revamp revenue models to pay for infrastructure and the wellness lifestyle culture.
- Update marketing and modernize sales tactics to emphasize the active, engaged lifestyle.

These themes have surfaced in discussions among the leadership and staff in senior living throughout past years. The rapid changes that already have taken place in response to the pandemic have confirmed that each property has the ability to quickly replace the “it’s always been done this way” outlook with a new paradigm.

The expertise available in your own organization, aided by trusted advisors, along with the strategies, tactics and tasks suggested by the Task Force, make it likely that the “senior living” model can be reinvented to not only survive the pandemic, but to flourish in the post-COVID-19 world, thus providing the place where millions of older adults can enthusiastically engage in life.

# STRATEGIES, TACTICS AND TASKS



# STRATEGIES, TACTICS AND TASKS

*“As a sector we’ve evolved to a near embrace of universal designs that allow for aging in place in spaces that are adaptable to changing needs—although the increased appreciation for ‘functional’ space doesn’t give us a free pass to neglect also making that space ‘fashionable!’”*

**Sean M. Kelly**, President & CEO, Kendal System

## 1. Strategy: Design, re-design and/or renovate exteriors and interiors of buildings

Design, re-design and/or renovate exteriors and interiors of buildings			
Tactics	Short-term	Mid-term	Long-term
Minimize COVID-19 exposure by controlling access to buildings and spaces.			
Develop the business plan and capital structure to implement immediate and future structural needs.			
Install building upgrades and establish protocols to reduce risk and enhance safety.			
Determine the best use of space both during and after a pandemic or other emergency.			
Plan for shelter-in-place needs.			
Provide outdoor areas for programs, social connections and individual pursuits.			

### Minimize COVID-19 exposure by controlling access to buildings and spaces.

- Secure entries with appropriate materials (plexiglass, etc.) to manage access and allow for screening of visitors/vendors/deliveries.
- Provide a primary and secondary means for ingress and egress to maintain one-way traffic flows; add directional floor markers and signage.
- Establish flexible, comfortable and safe visiting areas for families, inside and outside.
- Meet physical distancing guidelines by separating furniture and equipment a minimum of six feet.
- Plan for a combination of virtual and in-person experiences to keep residents safe while allowing them to leave their rooms (based on level of infection and established protocols within the community).

### **Develop the business plan and capital structure to implement immediate and future structural needs.**

- Engage designers, operations team and infection control team members in a design charrette to plan for immediate and future indoor and outdoor facilities.
- Analyze current building designs and systems to determine what can be accomplished within existing operations.
- Investigate building materials, such as antimicrobial paint or laminate flooring, that can maintain the community's home-like charm while being easier to clean or disinfect.
- Test program and design concepts with existing and future residents, staff and marketing.
- Build case statement and business case for necessary improvements that includes financing options (e.g., added fees, grants, donations, insurers, CMS, loans) and projected market response.
- Deploy marketing to showcase the innovative ways the organization is maximizing safety through practices and physical improvements.

### **Install building upgrades and establish protocols to reduce risk and enhance safety.**

- Evaluate current structures in relation to attainment of "well building" characteristics: air, water, nourishment, light, movement, thermal comfort, mind.
- Investigate long-term impact of new construction or renovations for LEED certification.
- Install air filtration systems to improve air quality and reduce airborne viral transmission; develop testing protocol to measure air quality before and after installation.
- Ensure adequate ventilation, mechanical or natural, for fresh air to dilute viral particles.
- Establish regular and/or heightened maintenance schedules for all systems to maintain effectiveness.
- Evaluate installation of technologies such as ultraviolet light and bipolar ionization/continuous sterilization to disinfect, and HEPA filters to trap pollutants.
- Minimize touch where possible, e.g., installing automatic doors, voice-activated lighting and other smart home devices.

# STRATEGIES, TACTICS AND TASKS

*"...Flexibility is key during and after a pandemic, allowing for life to return to normal or the new normal."*

**Dale Boyles**, Managing Director Senior Housing, Alliance Residential Company

- Install faucets, soap and towel dispensers throughout the community.
- Install touchless infrared screening stations for people to check their temperatures.
- During staff meetings, reinforce the need for sanitation protocols; ensure that adequate supplies are available and easily accessible.

## **Determine the best use of space both during and after a pandemic or other emergency.**

- Modify community rooms with expandable or half-wall partitions. Allow for some partitions to be moved to change the amount of enclosed space.
- Incorporate a circadian rhythm lighting system to improve life quality when residents spend time indoors.
- Plan for counter eating and larger restaurants; in all dining areas separate seating to allow physical distancing.
- Convert libraries, puzzle/game rooms, and similar assets into smaller dining venues to distance residents.
- Place more food preparation and serving stations throughout community, e.g., install charging stations for hot carts.
- Host groups (e.g., exercise class or lecture) in two rooms with seating in both rooms set for physical distancing. Hold the presentation in one room and broadcast to additional attendees in the second room.

## **Plan for shelter-in-place needs.**

- Intentionally create "isolation-friendly" areas (wings of health centers or independent living) that enable people to be and feel safe.
- Develop isolation areas that can expand to a full "neighborhood" or contract to single units within that neighborhood.
- To anticipate consumer preferences, plan for larger rooms and private rooms so residents can isolate more comfortably.
- Add Juliet balconies, including in assisted living and memory care, to allow for outdoor moments and connection with others.
- Especially in health center settings, consider methods to house staff during extreme outbreaks when keeping staff isolated and healthy is safer for them and the residents.



**Provide outdoor areas for activities, social connections and individual pursuits.**

- Reimagine outdoor spaces, regardless of climate/geography, to reduce social isolation and provide places for individuals, groups and visitors, e.g., dining, physical activity, games.
- Incorporate accessible design features relative to distances, lighting, grading, seating, shade structures, etc.
- Provide for separate ingress and egress, and conspicuous connectivity to main buildings, common areas and trail systems.
- Identify design features that are attractive and stimulate engagement for exercise, health and well-being pursuits or quiet reflection/meditation; provide family activity areas.
- Develop or redesign outdoor garden spaces.
- Develop a plan to expand the community's understanding and appreciation for outdoor common space; brand the spaces and their purpose.

# STRATEGIES, TACTICS AND TASKS

*“Leadership development is crucial—anyone at any level in an organization can be a leader with coaching, validation, support and training.”*

**Penny Cook, MSW,**  
President & CEO, Pioneer  
Network

## 2. Strategy: Develop purpose-driven, caring, passionate staff.

Develop purpose-driven, caring, passionate staff.			
Tactics	Short-term	Mid-term	Long-term
Value staff in all positions as capable leaders and contributors.			
Include staff members in decision-making about the organization.			
Define opportunities for personal and professional growth.			
Develop a new staffing model that minimizes organizational silos.			

### Value staff in all positions as capable leaders and contributors.

- Recruit a task force/committee of all levels of staff members to develop solutions to improve the perception and treatment of care staff and other frontline workers.
- Strengthen organizational cultural competency by embracing the diversity of staff and supporting cultural differences.
- Provide new staff with adequate orientation time to truly understand how important their role is to the entire facility.
- Respect staff members by providing equitable wages, benefits and recognition.
- Advocate for core health benefits for all members of the workforce.
- Increase the profile of workers by highlighting their skill levels and experience; recognize the staff members and programs that impact resident well-being.

### Include staff members in decision-making about the organization.

- Elevate authority of managers and staff delivering multidimensional wellness opportunities.
- Ensure that frontline and care staff members have input when establishing best clinical practices.

- Identify nursing assistants, dining and programming associates who can represent their teams at strategy meetings.
- Expand employee's power to "make things right" and to provide feedback in a blameless culture.

**Define opportunities for personal and professional growth.**

- Provide all staff with education/training opportunities and a career ladder.
- Educate staff in topics such as management and technology in addition to training required by regulation.
- Invest in health promotion and wellness education for staff, including caregivers, that focuses on real needs, such as health, finances, stress.
- Forecast company growth, review leadership turnover data (by position) and structure a succession plan for key roles within the organization.
- Identify criteria for "top-talent" employees with leadership potential and deliver a content-rich program that develops staff for leadership roles.
- Relieve department heads of administrative responsibilities to allow for in-the-moment, on-the-floor coaching to support frontline workers.
- Include staff members representing all job roles in determining employee-defined goals and strategies to be measured on a quarterly and annual basis.

**Develop a new staffing model that minimizes organizational silos.**

- Convene a task force/committee with representatives from all departments to brainstorm a new staff model that minimizes silos.
- Evaluate feasibility of designing a staffing structure that includes the "universal worker" concept.
- Reduce the number of part-time and casual positions, replacing with full-time positions where possible.
- Rework staffing models to ensure cross-training; offer opportunities for all staff to shadow and work with team members from other departments.
- Develop the culture of cross-team collaboration; offer training to enhance communication among teams.
- Create recruitment materials that detail the value the organization places on staff, including care partners.
- Launch a communication campaign to eliminate the stigma associated with working in the senior care sector.

# STRATEGIES, TACTICS AND TASKS

*“Technology is the present and future to connect residents to residents and programming, create opportunities, streamline processes, and keep residents informed. It is more important than ever to educate older adults on what technology can do for them.”*

**Theresa Perry,**  
Corporate Director of  
Wellness, Acts  
Retirement-Life  
Communities

## 3. Strategy: Provide technology to increase connections, aid efficiency and optimize health.

Provide technology to increase connections, aid efficiency and optimize health.			
Tactics	Short-term	Mid-term	Long-term
Anticipate future needs by involving technical staff and end users in the planning process.			
Leverage technology to enable residents and staff to access virtual resources.			
Provide training and support to residents so that technologies are utilized.			
Educate staff on the benefits of technology and how to use it.			
Use organizational and personal technologies to monitor health and increase communication.			

### Anticipate future needs by involving technical staff and end users in the planning process.

- Initiate a comprehensive review of technologies that were newly implemented or rapidly expanded as part of the response to COVID-19, e.g., online tools, telemedicine and remote monitoring.
- Deploy an engagement and well-being survey to discover unmet needs in the areas of communication, utilization, interaction and supportive or engagement services.
- Create a community engagement and well-being task force comprised of residents/tenants, family members, staff and local and corporate leadership to explore technology solutions that will most effectively meet the identified need(s).
- Identify gaps or areas in need of improvement, e.g., policies to be developed, staff additions or changes, training necessary.
- Explore engagement and well-being technology platforms that have a well-being index embedded for use and monitoring.
- Review plan regularly and update as needed. Share results, including both successes and areas needing improvement.

### **Leverage technology to enable residents and staff to access virtual resources.**

- Encourage developers/suppliers to enhance usability for older adults.
- Provide high-speed internet throughout the community(ies).
- Integrate diverse software into a single platform that supports interoperability among applications.
- Build a resident portal or application that provides the community feed, reservation and payment options, a live directory, smart home controls, events, menus, library, video streaming, COVID-19 content, etc.
- Enable technology that responds to voice commands.
- Build telehealth with wellness applications into daily operations.
- Provide tablets and computers to all residents so those without personal devices can access virtual connections.
- Install an adequate number of smart TVs, kiosks and computers so residents can take advantage of available technologies.
- Create a comprehensive digital catalog of engagement opportunities organized by dimension of wellness.
- Develop or purchase a “staff assistant” utilizing artificial intelligence so workers can quickly find COVID-19 information and activities and engagement recommendations for residents.

### **Provide training and support to residents so that technologies are utilized.**

- Survey residents/tenants and staff to better understand how comfortable residents are with using and troubleshooting hardware and software.
- Conduct resident training on how to use the technologies, e.g., make video calls, create social media profiles (like Facebook or Instagram), place online grocery or shopping orders.
- Utilize available training resources, such as YouTube videos, the Geek Squad and students.
- Train residents to become technology “master trainers” who mentor their peers through the challenges.
- Hire a tech support staff person to assist and coach residents with tech-based applications, e.g., accessing Zoom, downloading an app, troubleshooting computer issues, etc.

# STRATEGIES, TACTICS AND TASKS

*"In response to COVID-19 a variety of online tools, telemedicine and remote monitoring have been rapidly adopted by providers.... If these changes are to be put in place on an ongoing basis, it is essential to take a calculated and intentional approach to information and communications technology (ICT) implementation."*

**Jed Johnson**, Managing Director of Aging Services, CARF International

## **Educate staff on the benefits of technology and how to use it.**

- Reassure staff that technology is there to assist them.
- Survey staff on their willingness and ability to use and troubleshoot hardware and software.
- Work more closely with the end-user staff member during product development to understand the need for education and design that will improve adoption.
- Utilize staff members to endorse the technology and help with the selection process and implementation plan.
- Identify a virtual training platform for employees to access from work and from home.
- Survey staff on the effectiveness of web-only training and support.
- Encourage staff to learn and adopt new technology with a small stipend or distinction.

## **Use organizational and personal technologies to monitor health and increase communication.**

- Show residents how to use smartphones to track their health measures, such as heart rate, blood pressure, etc.
- Connect with existing electronic medical record (EMR) provider to learn about wellness screenings, resident lifestyle interests and reporting/ dashboard functionality within the system.
- Expand telehealth practices to include mental health and rehabilitation practitioners.
- Build cottages and apartments with GPS tracking, voice reminders for medication management, and emergency alerts to add value for the consumer and peace of mind for families.
- Evaluate the use of robots to serve as caregiver in times of emergency by delivering medicine, food and so forth.

#### 4. Strategy: Develop the culture of positive aging, framed by all the dimensions of wellness.

*“First, we have to recognize our institutionalized ageism. We need to stop seeing people for who they were (as if that is no longer), but see them for who they are and recognize individual capabilities and contributions.”*

**Jay Woolford**, Executive Director, Sustainable Housing for Ageless Generations (SHAG)

Develop the culture of positive aging, framed by all the dimensions of wellness.			
Tactics	Short-term	Mid-term	Long-term
Develop an aspirational wellness and lifestyle community built on the dimensions of wellness.			
Establish a culture of self-efficacy that lifts people up to be as independent as possible.			
Emphasize an aspirational and social model of care via staff commitment and education.			
Facilitate meaningful, individualized opportunities for wellness engagement.			
Measure results of an aspirational wellness and lifestyle community model.			

#### Develop an aspirational wellness and lifestyle community built on the dimensions of wellness.

- Reframe beliefs about aging (and age-related disabilities) based on research that positive views of aging increase overall health and life span.
- Utilize the dimensions of wellness as a planning framework to examine all service areas—dining, environment, health, social, etc.—and the relation to one another.
- Engage the wisdom and experience of future and current residents and team members to replace a needs-driven model with an aspirational model of whole-person wellness, purpose and meaning.
- Define the ideal resident who will want to live in an aspirational model community and become invested in the success of the community.
- Include the concept of interdependence in the model, recognizing that people interact with and depend on one another.
- Utilize techniques such as backcasting (work backward in time from a desirable senior living future in one, 10 or 20 years) to determine what is needed to reach that future.

# STRATEGIES, TACTICS AND TASKS

*“Departments need to work together in programming for all levels of care. ...All departments should be promoting the dimensions of wellness, from administration down.”*

**Suzanne Stevens**, Fitness Manager, Kendal-Crosslands Communities

- Elevate the wellness/lifestyles leader to the management team. List the talent and expectations needed in a strategic wellness role.
- Provide marketing staff with resources to effectively communicate the community vision to prospective residents and family members.

## **Establish a culture of self-efficacy that lifts people up to be as independent as possible.**

- Re-examine ageist assumptions that underestimate the physical and cognitive abilities of older adults, which prevents them from performing at their true potential.
- Choose words and images so that residents, families and staff feel and see an independent-as-possible environment.
- Staff with leaders and team members who believe in and support the vision of advancing self-efficacy and true active aging for independent individuals.
- Empower residents to use their voices to influence decisions that impact their lives at the community and at government agencies.
- Form focus groups before all major decisions to ensure that current and future residents and frontline team members have a say in the direction of the community.
- Establish or expand resident-led or team-led programming.

## **Emphasize an aspirational and social model of care via staff commitment and education.**

- Require staff in all departments, including administration, to promote the dimensions of wellness.
- Educate all employees about whole-person wellness and the language of positive aging at orientation and annual in-services to keep it top of mind.
- Integrate the research that states a positive view of aging increases overall health and life span into all onboarding, training and in-service workshops.
- Retrain staff to optimize the function and engagement of residents to aid their independence instead of always saying, “Let me do that for you.”
- Give new team members a day to spend time talking with and listening to the residents instead of reviewing a care plan with another team member.
- Establish scheduled times for the leadership team to leave their offices and interact with both residents and frontline team members.



### **Facilitate meaningful, individualized opportunities for wellness engagement.**

- Develop knowledge of individual resident's interests and wellness goals using interviews, one-on-one meetings and assessments.
- Identify residents' strengths and skills, then explore how they can bring that strength or skill to the community members.
- Develop programming for multiple cognitive levels to ensure engagement of all residents.
- Focus on what residents *can* do, no matter their level of cognitive function.
- Ensure that the program calendar, committees and volunteer opportunities encompass all dimensions of wellness, reflecting individuals' interests and talents.
- Educate residents about funding sources and, within the budget, enable them to contribute to decisions for programmatic spending.
- Provide fitness programming at an appropriately challenging level based on individual assessments.

### **Measure results of an aspirational wellness and lifestyle community model.**

- Measure success indicators such as resident satisfaction and engagement, utilization, Net Promoter Score, health care costs.
- Utilize length of functional independence, length of stay at level of living and stabilized occupancy rates to measure the return resulting from attracting an engaged clientele.
- Collect attendance data and surveys to continually assess success or failure of programs and staff leaders.
- Track occupancy against enhanced wellness offerings; establish outcomes from lower turnover and increased occupancy.
- Track residents' progress towards their wellness goals in addition to collecting clinical outcomes.
- Track hospital admissions and re-admissions, fall rates and cost of care over an extended time frame to compare metrics between wellness participants and nonparticipants.
- Consider offering discounts on rents for those actively participating in the wellness program as validated by utilization.

# STRATEGIES, TACTICS AND TASKS

*"[Develop] crisis simulations, respond to specific scenarios, and then analyze everyone's actions to help people prepare for real-life situations."*

**Dennis Gradillas**, Vice President Sales, HumanGood

## 5. Strategy: Establish trust by being prepared to respond to emergencies and unexpected events.

Establish trust by being prepared to respond to emergencies and unexpected events.			
Tactics	Short-term	Mid-term	Long-term
Establish communication methods to inform staff, residents, families and providers.			
Review and update plans for emergency response and staffing.			
Reimagine what wellness-with-care will look like for each level of living, immediately and in the future.			
Increase access to medical professionals through technology.			
Develop strategy to address residents' "safe home" through management of infections or diseases.			

### Establish communication methods to inform staff, residents, families and providers.

- Relay information to families and referral sources through each property's website, Facebook and social media messages, and regular email communication.
- Establish a staffed telephone hotline to answer calls during a disaster or emergency.
- Share the policies and procedures with residents, families and providers that leadership and team members follow in responding to disasters and health maintenance, e.g., isolation procedures and infection control plan.
- Review the community disaster plan with the resident and responsible party at the time of move-in. Explain the difference between risk management and risk elimination.
- Develop marketing collateral on the protocols established to keep resident safety a priority.

### **Review and update plans for emergency response and staffing.**

- Build partnerships with physician networks and community medical support (emergency medical technicians, emergency rooms, hospitals) to better understand local resources.
- Utilize local emergency management resources to plan for disaster management and develop training that may include drills with responders, residents and staff.
- Build pipelines to make sure there is an adequate supply of personal protective equipment (PPE) on site for team members, residents and family visitors.
- Review how evacuations, shelter in place and infectious disease quarantines will be handled.
- Identify the regulations that will impact policies.
- Develop standard operating models for pandemic or crisis staffing needs; ensure cross training of functions needed during a crisis.

### **Reimagine what wellness-with-care will look like for each level of living, now and in the future.**

- Build resilience by planning how the community will meet the disaster, but also recover and thrive afterwards.
- Implement best practices for wellness services in the event of an emergency and/or isolation, recognizing the emotional toll of social isolation and the negative effects of cognitive and physical decline.
- Assist residents in planning their personal preparedness and recognizing their responsibilities to the overall community.
- Encourage self-reliance, as appropriate, so that residents feel a measure of control during recovery.
- Identify supportive services that can assist residents post-disaster, e.g., psychological support.
- Offer caregiver training to family members.

### **Increase access to medical professionals through technology.**

- Engage the clinic staff in developing policies for health care during an emergency.
- Research and select best practice electronic health records (EHR) system.

# STRATEGIES, TACTICS AND TASKS

*"Inspire and empower older adults to play an active role in risk management and maintaining independence."*

**Lori Edgerton**, Vice  
President of Sales, Grace  
Management

- Research and test technology for telehealth communication.
- Add the dimensions of wellness to telehealth to maintain psychosocial well-being, not just to treat disease.
- Establish best practices for telehealth visits by specialists.
- Explore technology to support chronic care management: sensors, artificial intelligence and others for surveillance of resident health.

## **Develop strategy to address residents' "safe home" through management of infections or diseases.**

- Create policies to implement and carry out recommendations from the Department of Health Services and Centers for Disease Control and Prevention.
- Re-examine infection control practices with experts in the field.
- Upgrade staff training to insure competence in infection control.
- Establish procedures to regularly remind staff, residents and visitors about the vital importance of personal hygiene and building sanitation.
- Review product options to effectively clean surfaces and high touch areas.
- Establish best practice isolation and infection control procedures for emergency response.
- Modify delivery of wellness offerings to maintain compliance with infection control guidelines.
- Establish protocols to provide medications, takeout dining, etc. through contactless procedures.

**6. Strategy: Update perceptions to reinforce the new value proposition of each type of senior living.**

*“Push for positive stories in the media...to counter the only stories that make it to press. Unless you are connected to senior living through work or a loved one, there is a likelihood that you still do not differentiate between the old perception of a ‘nursing’ or ‘old folks’ home and a modern state-of-the-art senior or assisted living community.”*

**Scott Eckstein**, Managing Director, Development, Operations & Training, Active Living International

Update perceptions to reinforce the new value proposition of each type of senior living.			
Tactics	Short-term	Mid-term	Long-term
Collect data to provide evidence of the benefits of senior living.			
Explain levels of living in a language consumers and media understand.			
Choose wording and stories that present an accurate and appealing picture of senior living.			
Develop partnerships to educate consumers and the media about the aging process and senior living.			

**Collect data to provide evidence of the benefits of senior living.**

- Survey members of the community at large to gauge what they already know and want to know about the aging experience, aging services and senior housing.
- Conduct consumer research to focus on the future (desires, lifestyle, wellness vs. care) and build messaging around the findings.
- Compare the COVID-19 life experience, infection and death rates among a defined age group living in independent living, assisted living and memory care against the same cohort in your country (United States, Canada, etc.).
- Commission a study to identify the emotional impact of social isolation on individuals living in senior living compared to those living outside of senior communities.

**Explain levels of living in a language consumers and media understand.**

- Survey people, internally and externally, to uncover what people think about the terminology of senior living.
- Use clarifying language, without industry jargon, to overcome mistaken assumptions based on a community’s name or population.

# STRATEGIES, TACTICS AND TASKS

*“Reframe aging (and age-related disabilities) based on research that positive views of aging lead to more engagement with healthy eating and exercise, and that positive views of aging increase overall health and life span.”*

**Jill Vitale-Aussem,**  
President & CEO, The  
Eden Alternative

- Initiate an effort by industry groups to encourage operators to make name and branding adjustments that may include retiring the term “retirement community” and the words “senior” and “assisted living.”
- Reframe descriptions of levels of living to demonstrate that residents are capable and to counteract the perception that a need for assistance is a downward spiral.
- Create infographic showcasing the services offered, subsidized and provided to residents in independent living, assisted living and memory care, e.g., meals served, rides provided, groceries purchased, medical access, etc.

## **Choose wording and stories that present an accurate and appealing picture of senior living.**

- Showcase the positive stories and valuable benefits (especially during COVID) residents and stakeholders experienced in senior living that they would not have experienced living in private homes.
- Distribute testimonials from families, residents and team members that speak to the safety and security of living in a community for older adults.
- Adjust marketing messages to reframe senior living as the place where residents find purpose.
- Utilize images and wording that reflect the diversity of the aging experience (GLBT+, race, ethnicity, spirituality, abilities, etc.).
- Emphasize that the right resources and adaptive strategies empower older adults to pursue their interests and participate as active resources for society by donating their time and expertise as educators, mentors, advisors and volunteers.
- Highlight the hard work and dedication of the frontline staff.
- Update descriptions to emphasize abilities, not disability, and “doing with” instead of “doing to” regarding systems of support.

## **Develop partnerships to educate consumers and the media about the aging process and senior living.**

- Work together with organizations, such as LeadingAge, Argentum, AHCA, ICAA and ASHA to create campaigns that show what life in senior housing is and isn't.
- Establish a permanent “think tank” institute/academy to explore the evolution of perceptions of aging.

- Form a public relations and branding strategy coalition, including older adult consumers, among organizations across different sectors.
- Conduct a national and industry-wide public relations effort through broadcast media, social media and article placement to showcase the appreciation of current residents who are happy to be in their senior living communities before and during COVID.
- Plan a social media push among all participating operators focused on positive results and happy residents and families (i.e., Twitter, Instagram, Facebook, etc.).
- Develop and implement a multi-nation effort to strengthen the recognition, appreciation and overall value of older adults in an increasingly aging world.

# MOVING FORWARD





## **Evolving the next future**

When the founders created “old-age” homes in the late 1800s, their purpose was to provide a safe home for older adults who could not live with their families. Today, the goal of providing a safe home remains, but the arrival of the COVID-19 pandemic has forced residents, leadership, staff and families to quickly pivot and adapt to the new reality. While forward-thinking decision makers are currently managing the day-to-day response, they are also looking ahead to how the people, places and culture will evolve, given that personal interactions and services will likely be affected for years to come.

## **Begin the journey**

The strategies, along with the tactics and tasks, are intended to trigger actions that individual organizations can take. Each property is at an individual starting point, yet all can take the time to think about what their mission is, and how to deliver it in today’s environment.

- Bring together a team of individuals who are 100% committed to starting the journey of exploring mission, and the actions needed to achieve it.
- Discuss, research and develop a comprehensive blueprint for embracing and moving to your envisioned model.
- Engage all stakeholders by assigning tactics and tasks to members of the organization in all departments and all roles.
- Define “short-term, mid-term, long-term” actions depending on the current status of the people and physical plant.
- Ensure that all planning and implementation remains focused on a vision for today—and for the future.
- Revisit your action plan routinely to evaluate successes and challenges, and revise as needed.

Quality of life—the feelings of safety, well-being and comfort—is the reason why older adults choose to reside in senior housing. The ability to effectively balance safety with opportunity will define the communities that continue to feature the best possible home for the aging population.

# RESOURCES



## **American Geriatrics Society**

COVID information for older adults, caregivers  
<https://www.healthinaging.org/a-z-topic/covid19>

## **American Health Care Association/ National Center for Assisted Living**

AHCA/NCAL Guidance and resources  
[https://www.ahcancal.org/facility\\_operations/disaster\\_planning/Pages/Coronavirus.aspx](https://www.ahcancal.org/facility_operations/disaster_planning/Pages/Coronavirus.aspx)

## **American Society on Aging**

Resources on COVID-19  
<https://www.asaging.org/blog/cdc-covid-19-coronavirus-resources>

## **Argentum**

Coronavirus Preparation and Response Toolkit  
<https://www.argentum.org/coronavirustoolkit/>

## **Centers for Disease Control and Prevention**

Considerations for Retirement Communities & Independent Living (update July 2020)  
<https://www.cdc.gov/coronavirus/2019-ncov/community/retirement/considerations.html>

Shared & Congregate Housing  
<https://www.cdc.gov/coronavirus/2019-ncov/community/shared-congregate-house/index.html>

## **Government of Canada/ Gouvernement du Canada**

PDF graphics, videos  
<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/awareness-resources.html>

Infection prevention and control for COVID-19: Interim guidance for long term care homes  
<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevent-control-covid-19-long-term-care-homes.html>

## **Gerontological Society of America**

Infographics English and Spanish Ageism and COVID-19, physical distancing, aging and immunity  
<https://www.geron.org/programs-services/covid-19-updates>

## **International Council on Active Aging**

Creating your blueprint for a wellness-based community  
[https://www.icaa.cc/business/wellness\\_blueprint.htm](https://www.icaa.cc/business/wellness_blueprint.htm)

ICAA Career Path for Wellness Professionals  
<https://www.icaa.cc/careercenter.htm>

ICAA COVID-19 Response Center  
<https://www.icaa.cc/covid19response/overview.htm>

## **LeadingAge**

Information for Life Plan Communities  
<https://leadingage.org/coronavirus-information-life-plan-communities>

## **One Shared World**

Declaration of Interdependence  
<https://oneshared.world/pledge/>

## **World Health Organization**

COVID-19 and food safety: guidance for food businesses  
<https://www.who.int/publications/i/item/covid-19-and-food-safety-guidance-for-food-businesses>

## Strategy planning worksheet

**Level of living:**

**Strategy:**

**Tactic:**

### Tasks

Short-term

Midterm

Long-term

Short-term	Midterm	Long-term

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