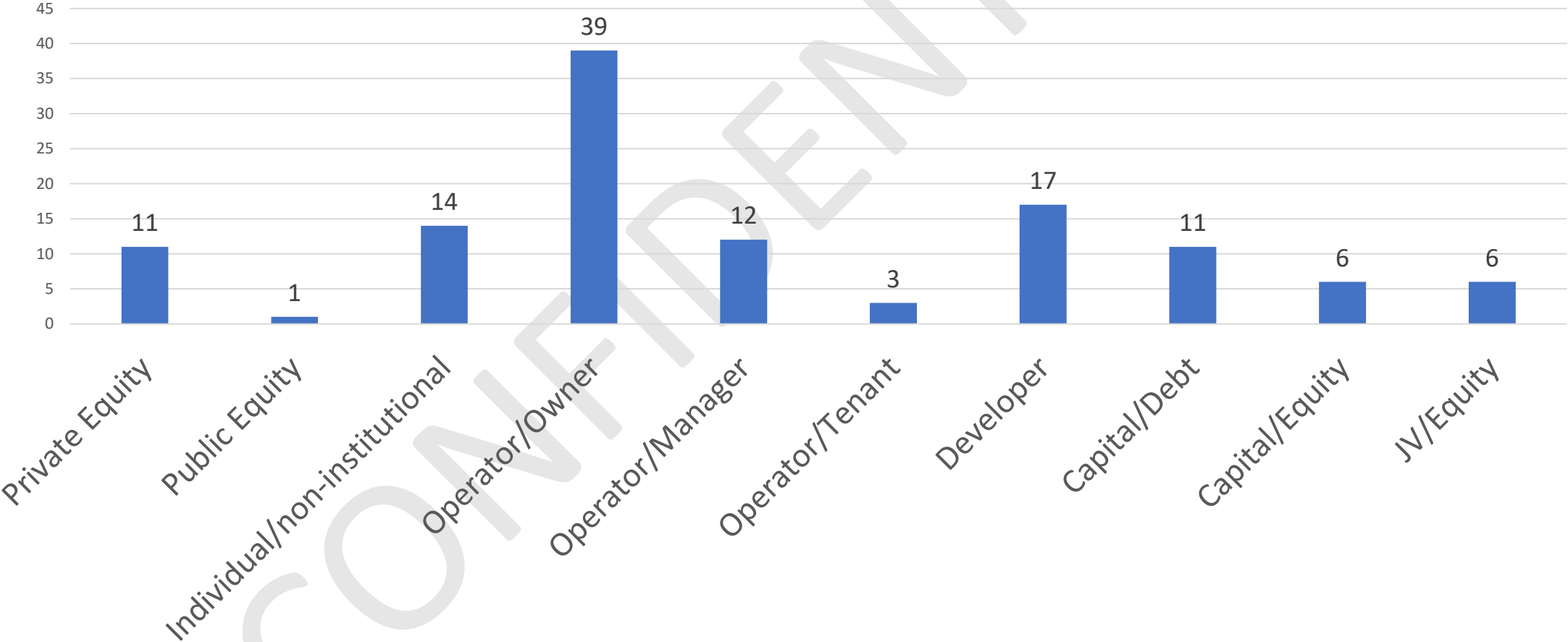
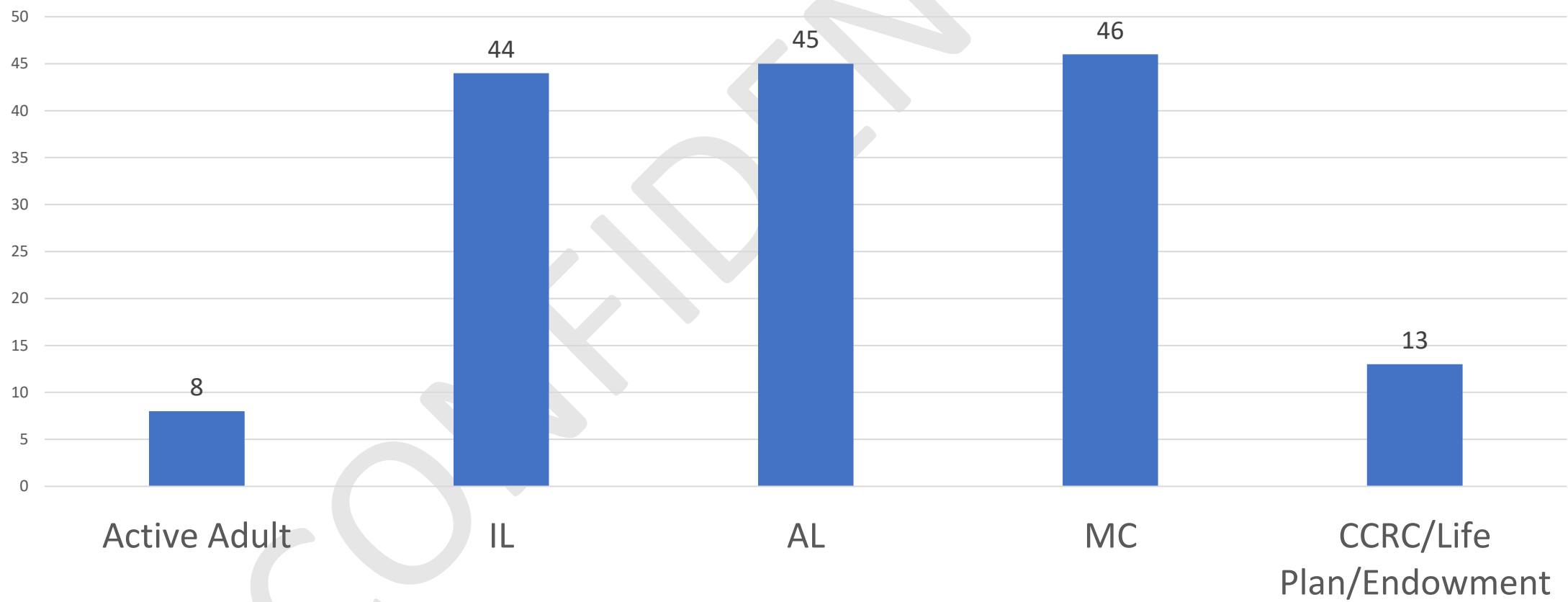


Are you an Owner, Operator, Developer, Financier?

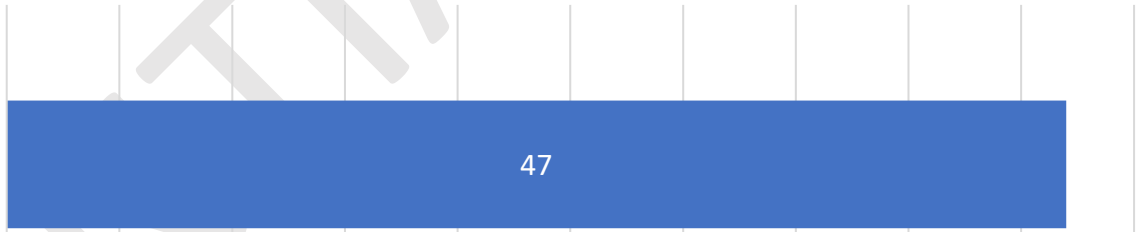


Product Type

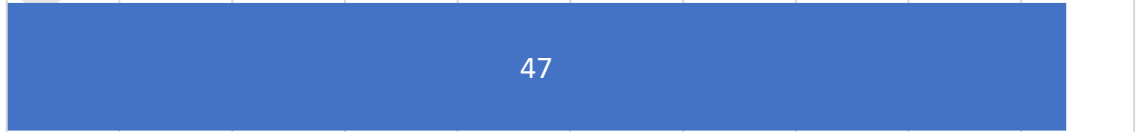


Protocols

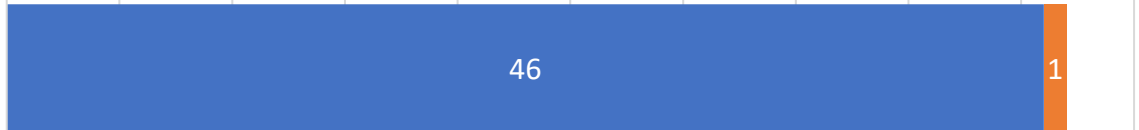
Do you have protocols in place associated with the COVID-19 Virus?



If yes, have you instituted these protocols:



Have your protocols regarding community staffing evolved?

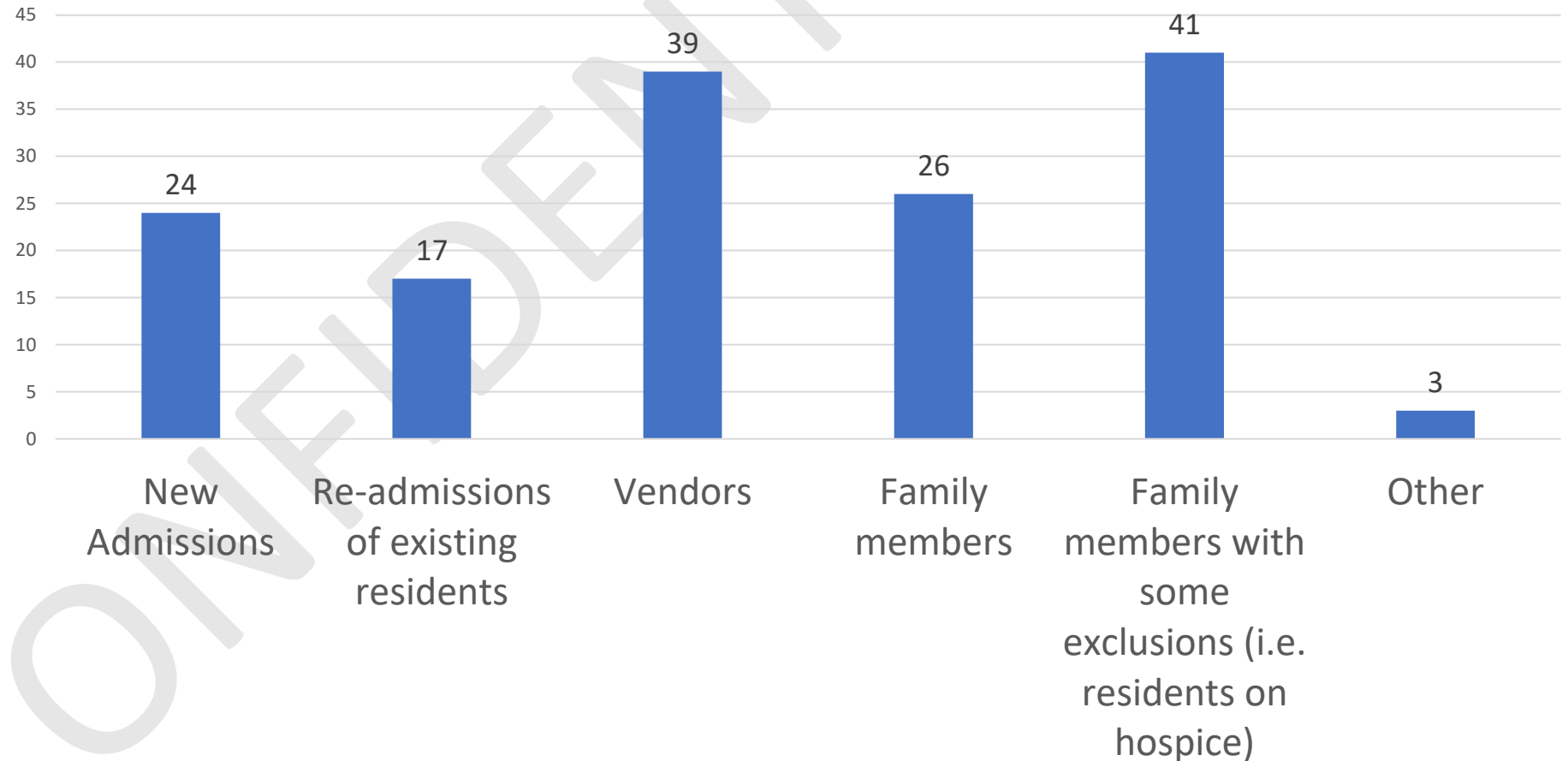


■ Yes ■ No

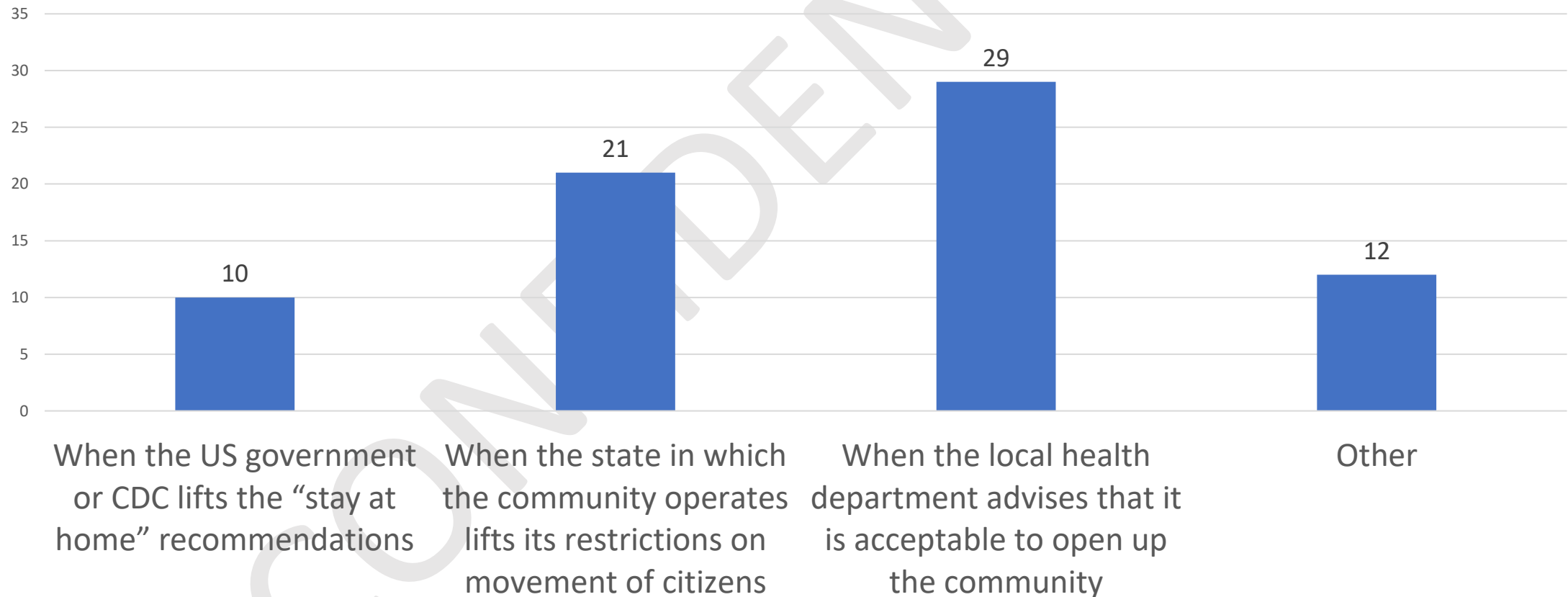
As part of your COVID-19 protocols, has your community restricted access to:

Other responses:

- Essential visitors only
- Limited new admissions based on need, re-admissions are case by case, families end of life only.
- Admissions in some locations



If you are currently restricting access to your community (i.e. no visitors unless essential healthcare personnel), when do you plan to lift that restriction?

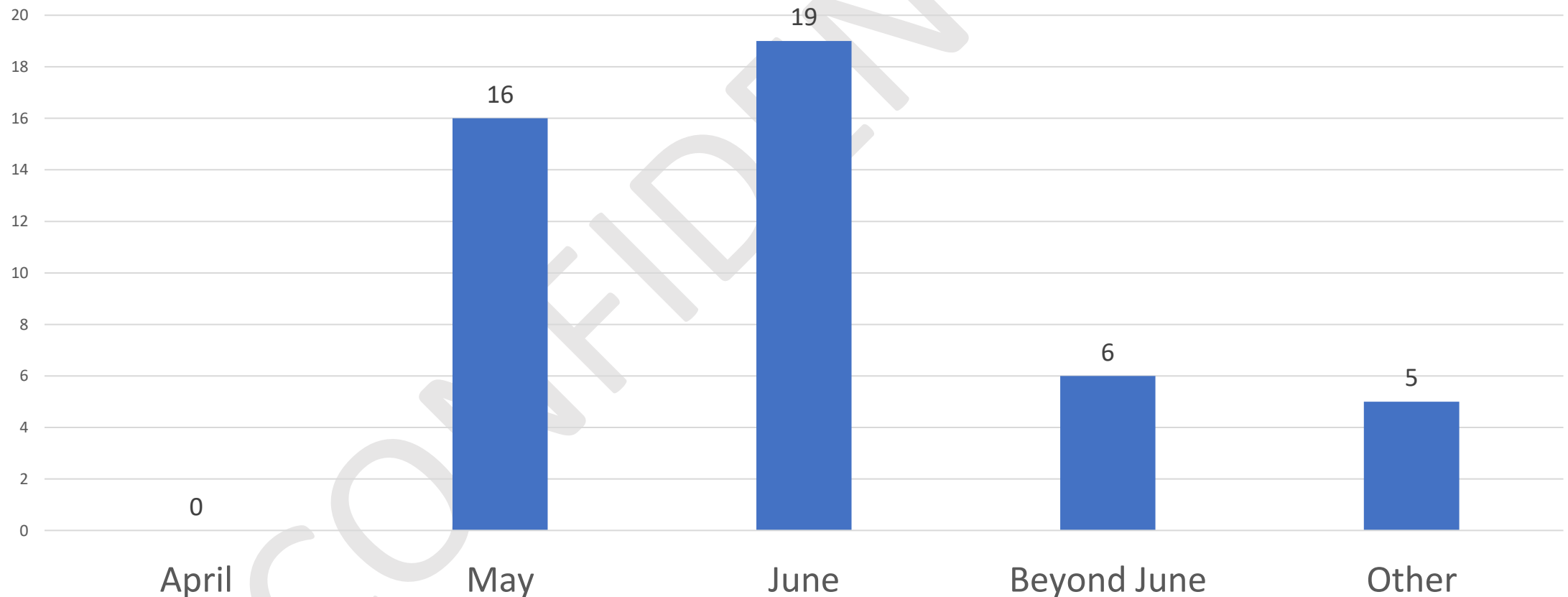


If you are currently restricting access to your community (i.e. no visitors unless essential healthcare personnel), when do you plan to lift that restriction?

Other Responses:

- When it feels safe to do so
- When we see the state lift the shelter in place order and we also think it is safe.
- Likely to be many months in the future as no testing and risks persist.
- When we deem it appropriate based upon local area and CDC guidelines - recognizing that our population is at a higher risk
- When we determine appropriate based on local, state, and federal guidelines
- When it makes sense to from a resident safety perspective
- When it is appropriate for our community.
- When the state allows us to lift the restrictions.
- Not taking a formulaic approach
- Don't know
- When we think it is advisable and safe to do so at each individual community.
- All the above and when we determine it is safe

Do you currently anticipate lifting restrictions on access to some or all of your communities in:

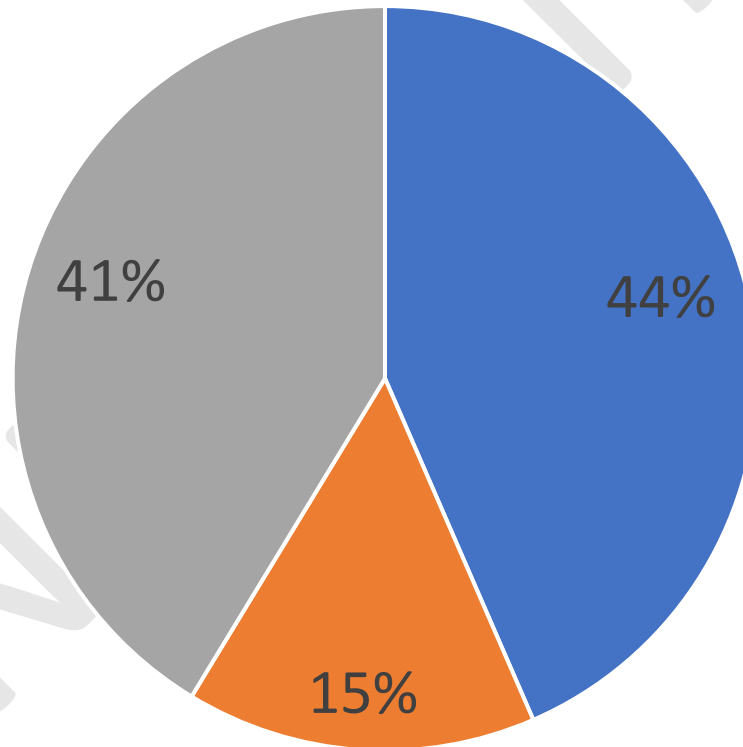


Do you currently anticipate lifting restrictions on access to some or all of your communities in:

Other Responses:

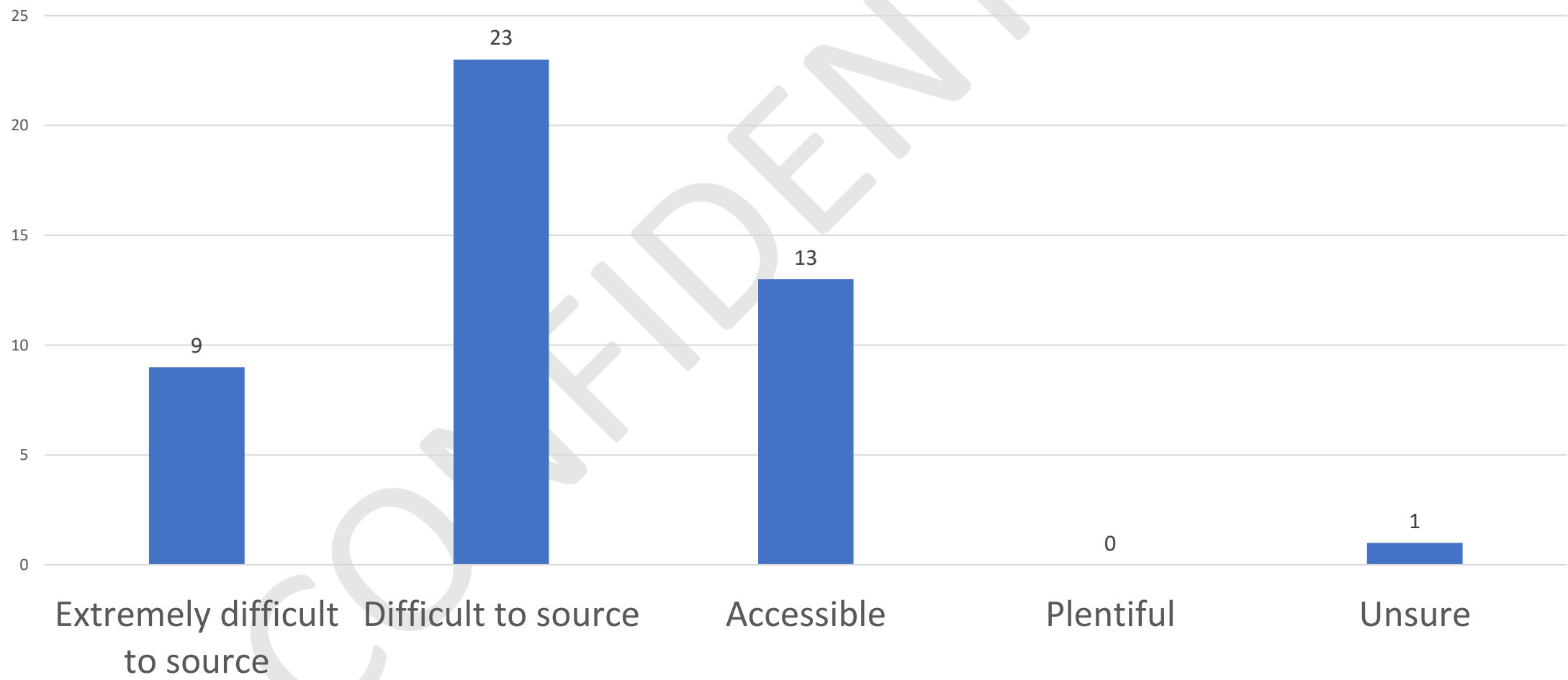
- TBD
- Can't say. Depends upon the availability of immediate testing. If we could test regularly, we would be far freer and open "on campus".
- No idea; we operate in multiple states
- We are working through plans
- Don't know

Do you intend to wait until there are no “active” cases of COVID-19 in your community before lifting the restrictions on access?

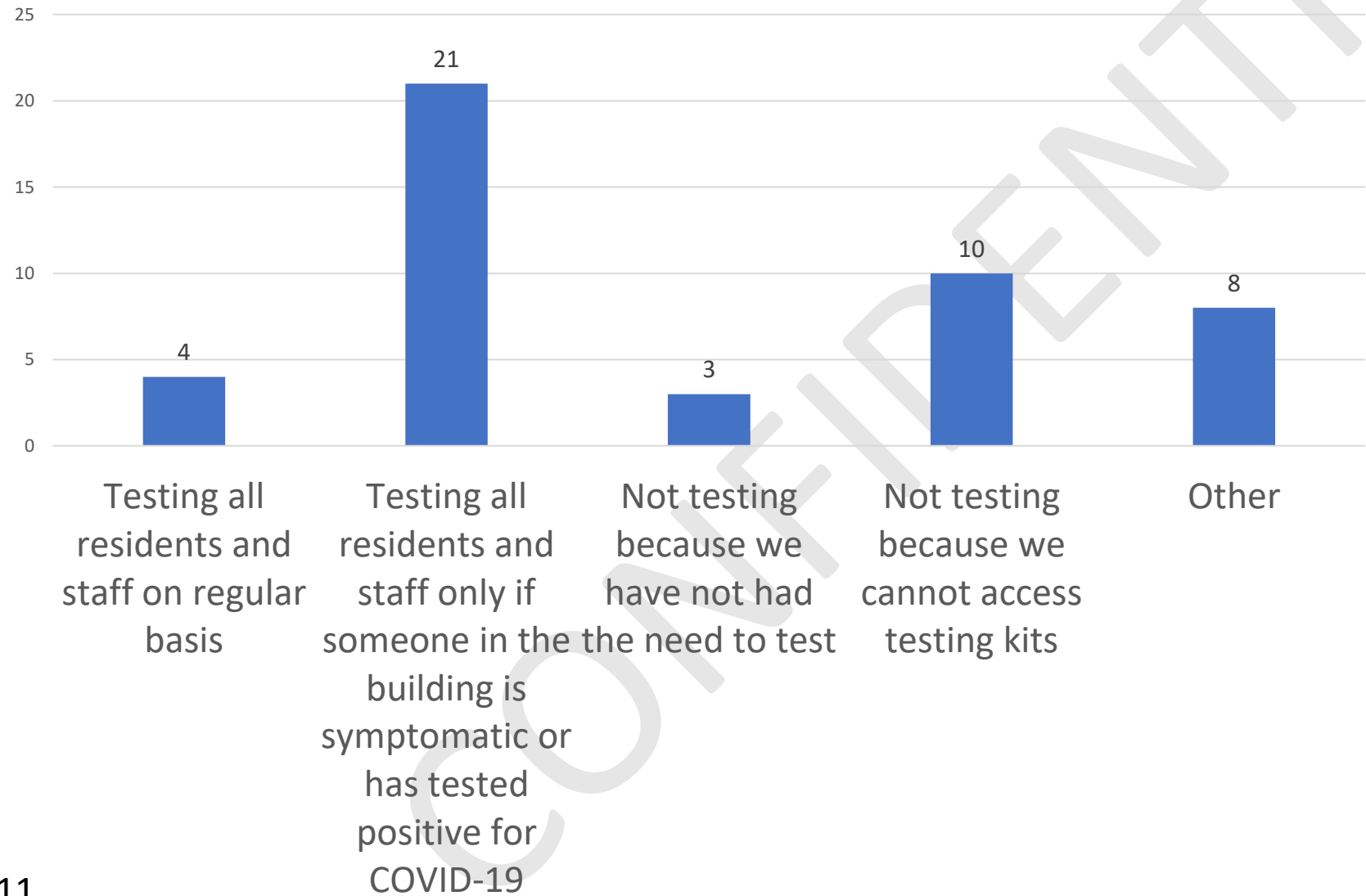


■ Yes ■ No ■ Unsure

Please describe your ability to access testing kits in the markets in which you operate:



Please describe how you are using testing:



Other responses:

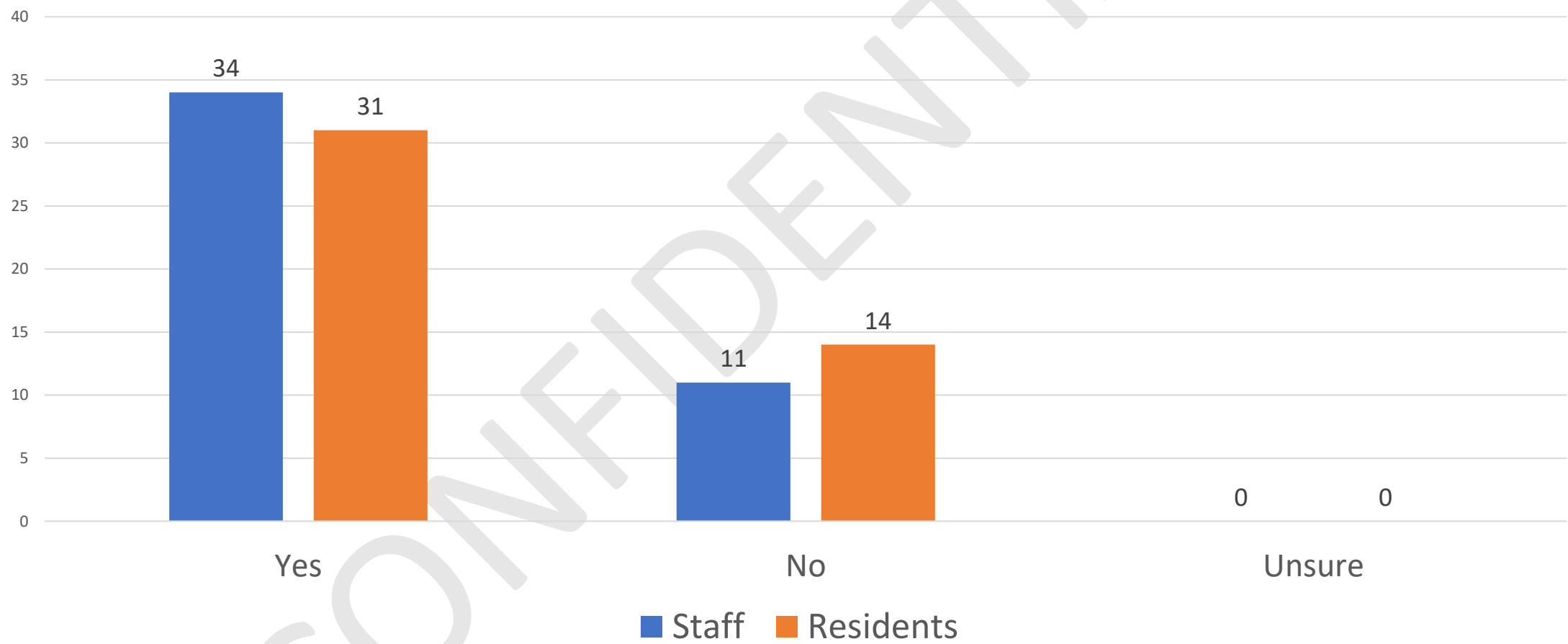
- Testing residents & staff with symptoms plus those they have been in contact with
- Testing only if there are symptoms
- County is testing if there is a positive or likely positive case
- Testing those that have come in possible contact with someone that has tested positive for COVID-19.
- Testing symptomatic only.
- We will be enhancing our testing since we reviewed 1,400 rapid tests last week
- Testing symptomatic residents, associates and those who have had contact. Testing new hires and new move ins.
- Testing symptomatic residents and staff

n = 46

Please add any additional comments about your experience with testing:

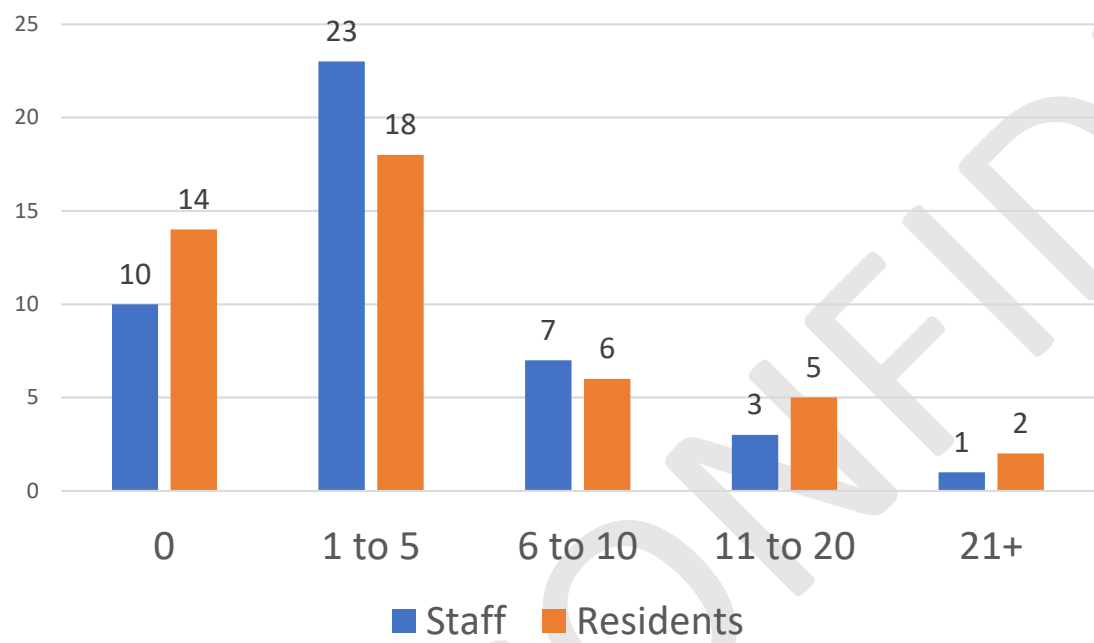
- Strategic testing. Contact tracing driven
- Goal is "regular basis" but it becomes quite costly. Need Medicare to cover residents WITHOUT a doctor sign off for regular testing and to figure out how to more regularly test staff members. Staff is the key and residents who need to attend a doctor appointment. "Regular" testing to me would be once every two weeks or upon symptoms presenting.
- Testing is still limited in our area.
- Turnaround times can be lengthy, more than 3 days.
- In hot spot communities or those that we open back up, we would test all employee's and residents if tests were readily available.
- None or few available
- Just got access and starting testing this past week.

Do you have any seniors housing communities with staff or residents who have been diagnosed with COVID-19 virus?



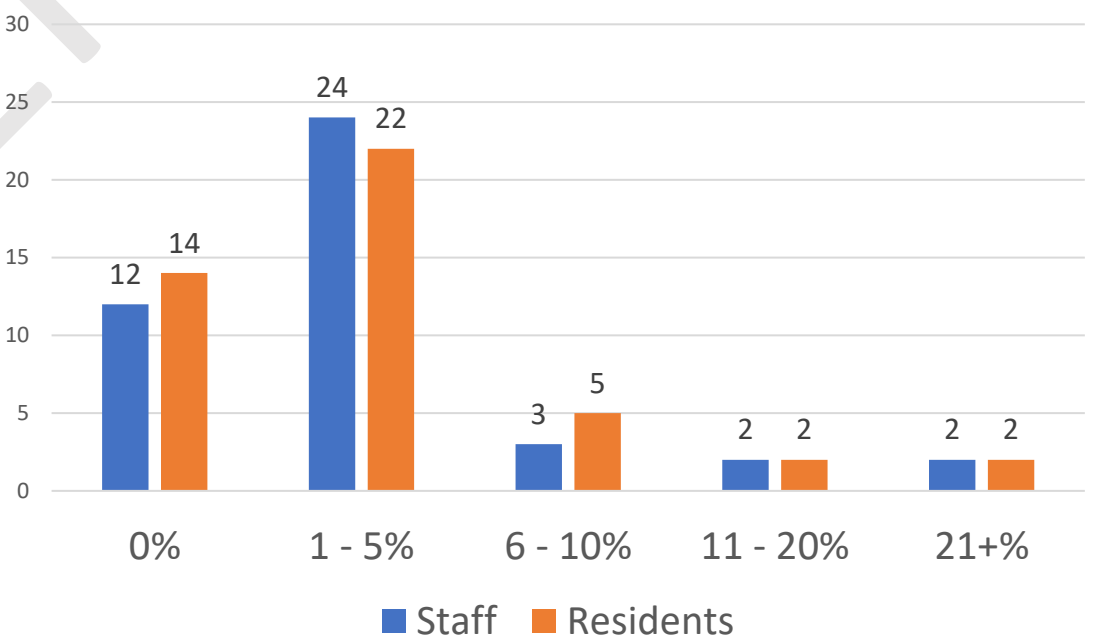
Staff: n = 45
Residents: n = 45

How many of your communities have staff or residents who have been diagnosed with COVID-19 virus?



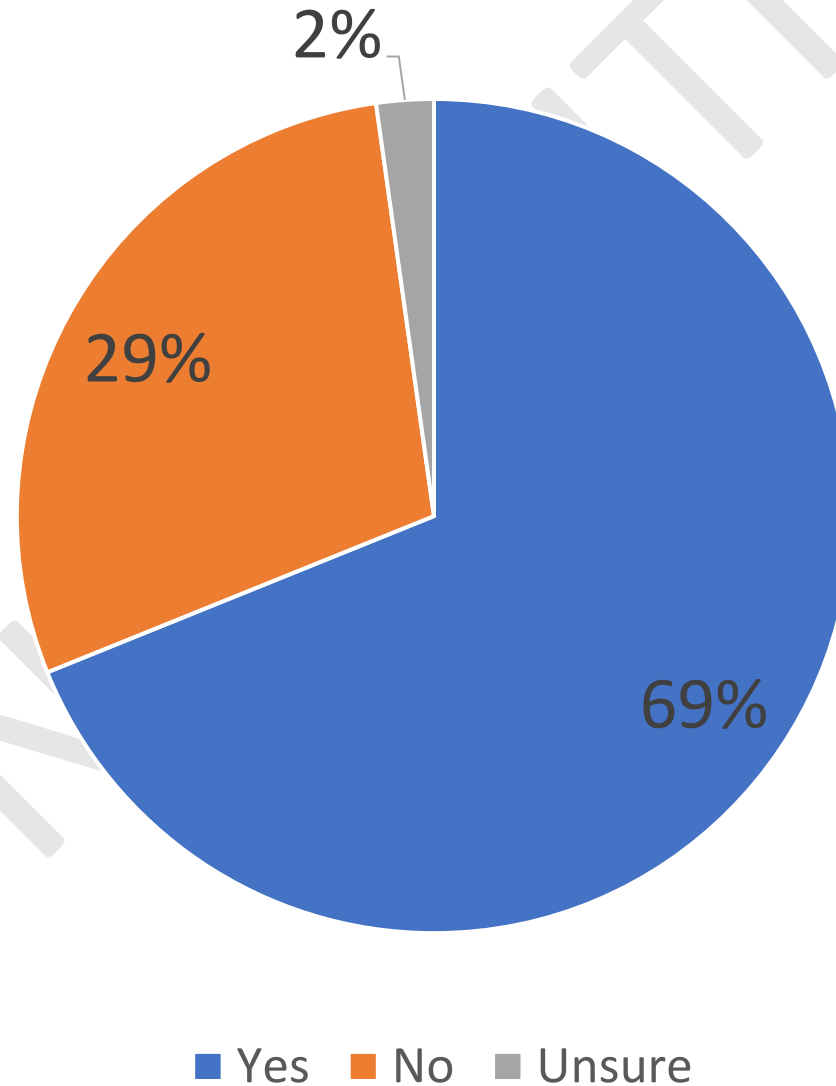
Staff n = 44 Residents n = 45

What percentage of your communities' staff or residents have been diagnosed with COVID-19 virus?



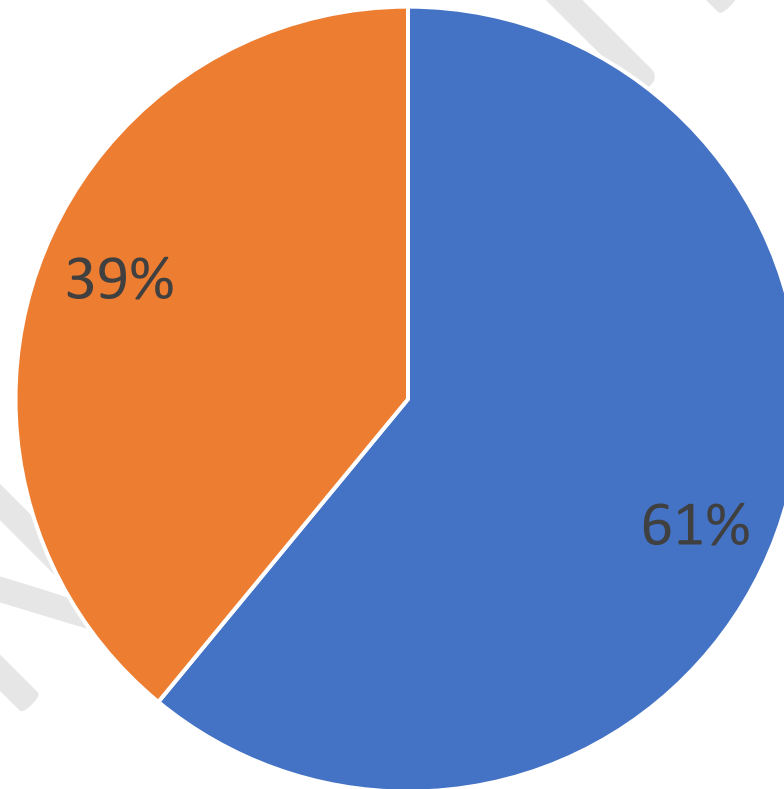
Staff n = 43 Residents n = 45

Has COVID-19 affected your ability to staff your communities?



Have you taken any of the following steps with regards to your community staffing:

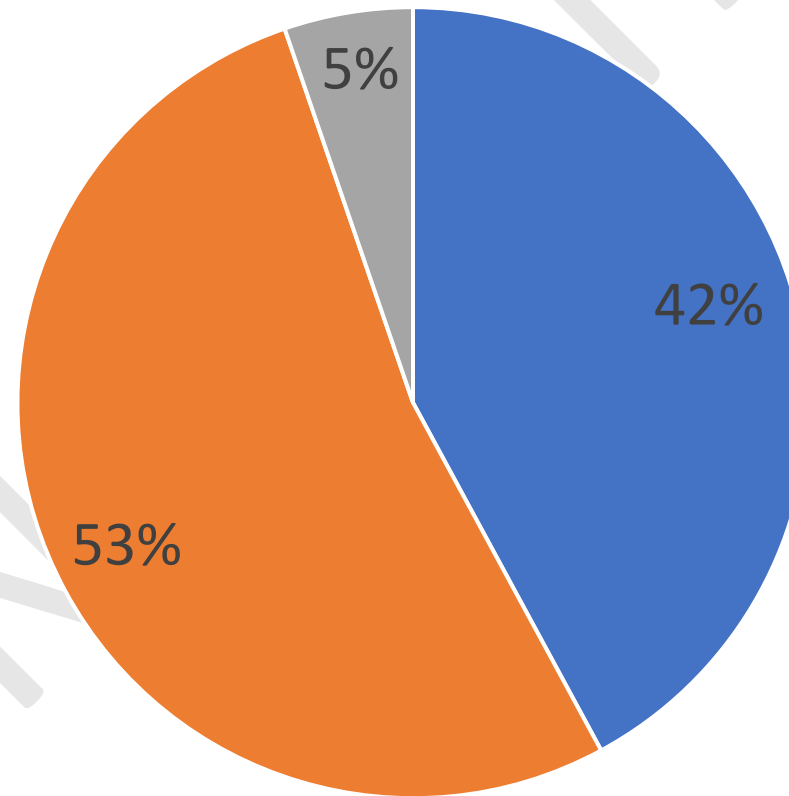
Added sick time benefits?



■ Yes ■ No

n = 41

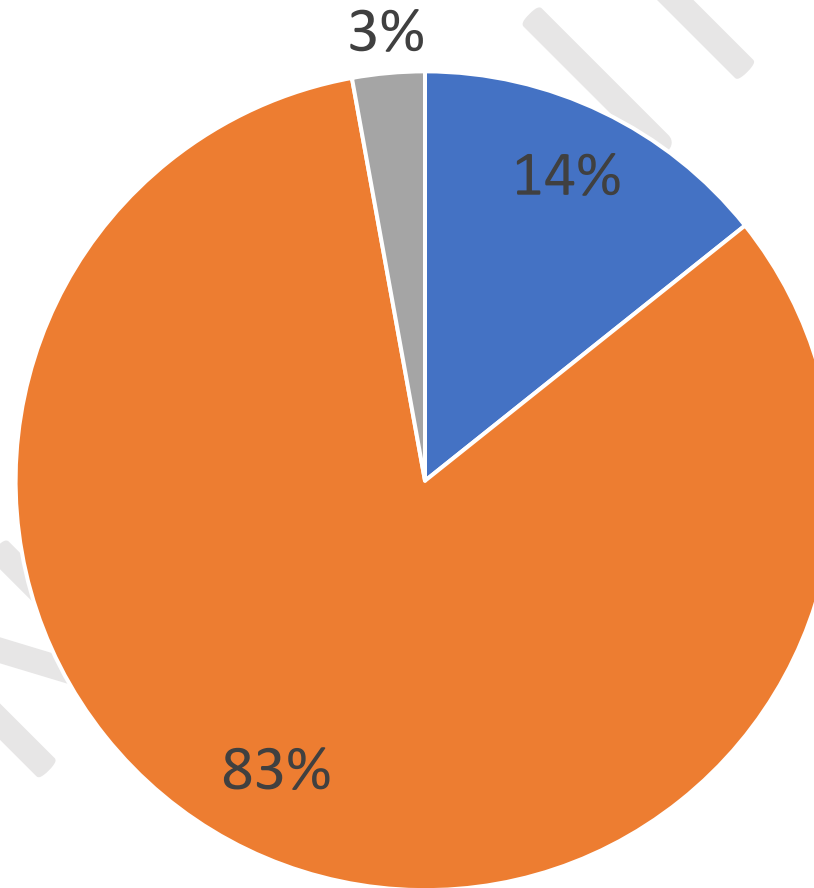
Have you taken any of the following steps with regards to your community staffing:
Added personal time?



■ Yes ■ No ■ Unsure

n = 38

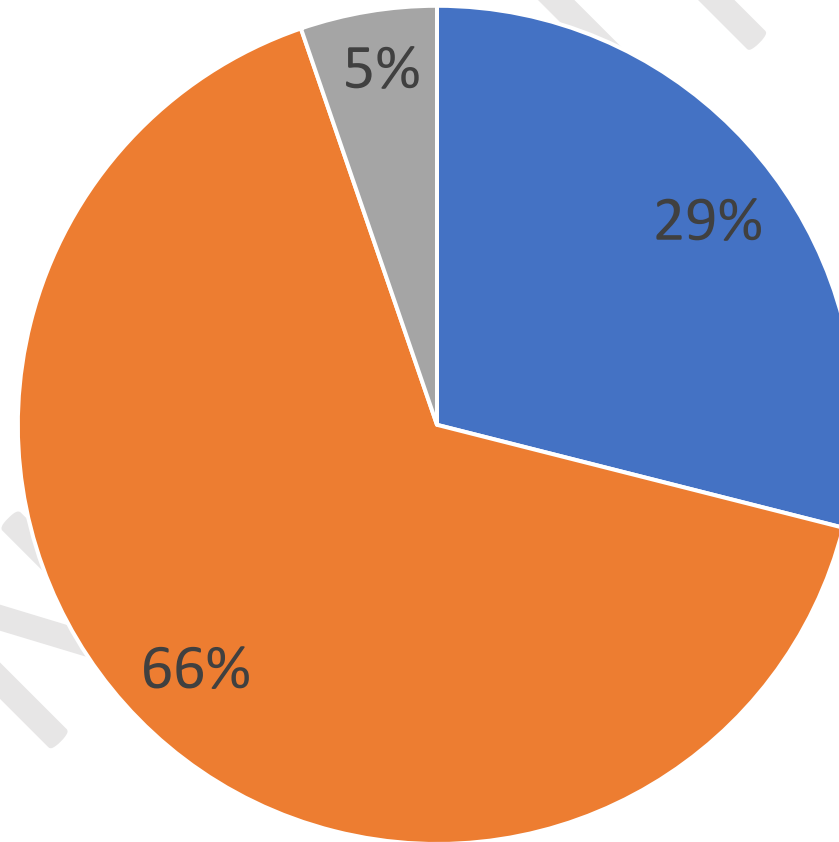
Have you taken any of the following steps with regards to your community staffing:
Added holiday pay?



■ Yes ■ No ■ Unsure

n = 35

Have you taken any of the following steps with regards to your community staffing:
Added childcare benefits?

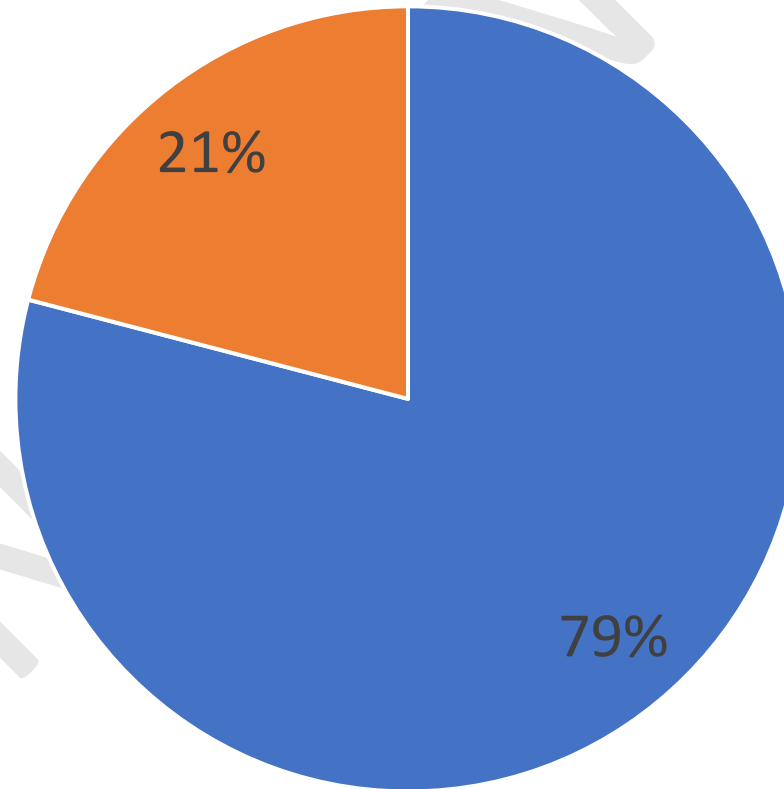


■ Yes ■ No ■ Unsure

n = 38

Have you taken any of the following steps with regards to your community staffing:

Increased wages or other benefits?



■ Yes ■ No

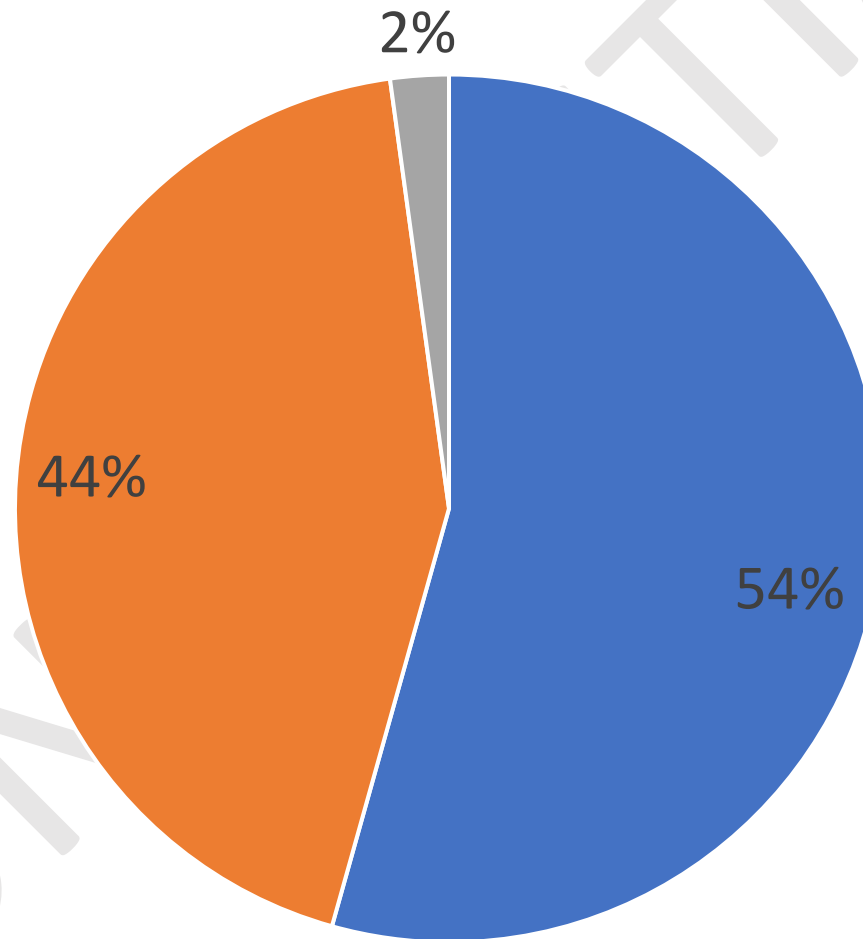
n = 43

Have you taken any of the following steps with regards to your community staffing:

Other (Please explain)?

- Ran a bonus payment.
- Meals, TLC, flexibility, messages of support, including a video sent to all communities that was from all of our executives and regionals
- Appreciation gift cards, free meals, take home meals, banners of recognition & thanks
- Added hero pay at one facility in a market with tougher staffing issues.
- Care packages
- Continue to maintain much more flexibility for staff during these times.
- More incentives, free meals, good bags, gift cards etc.

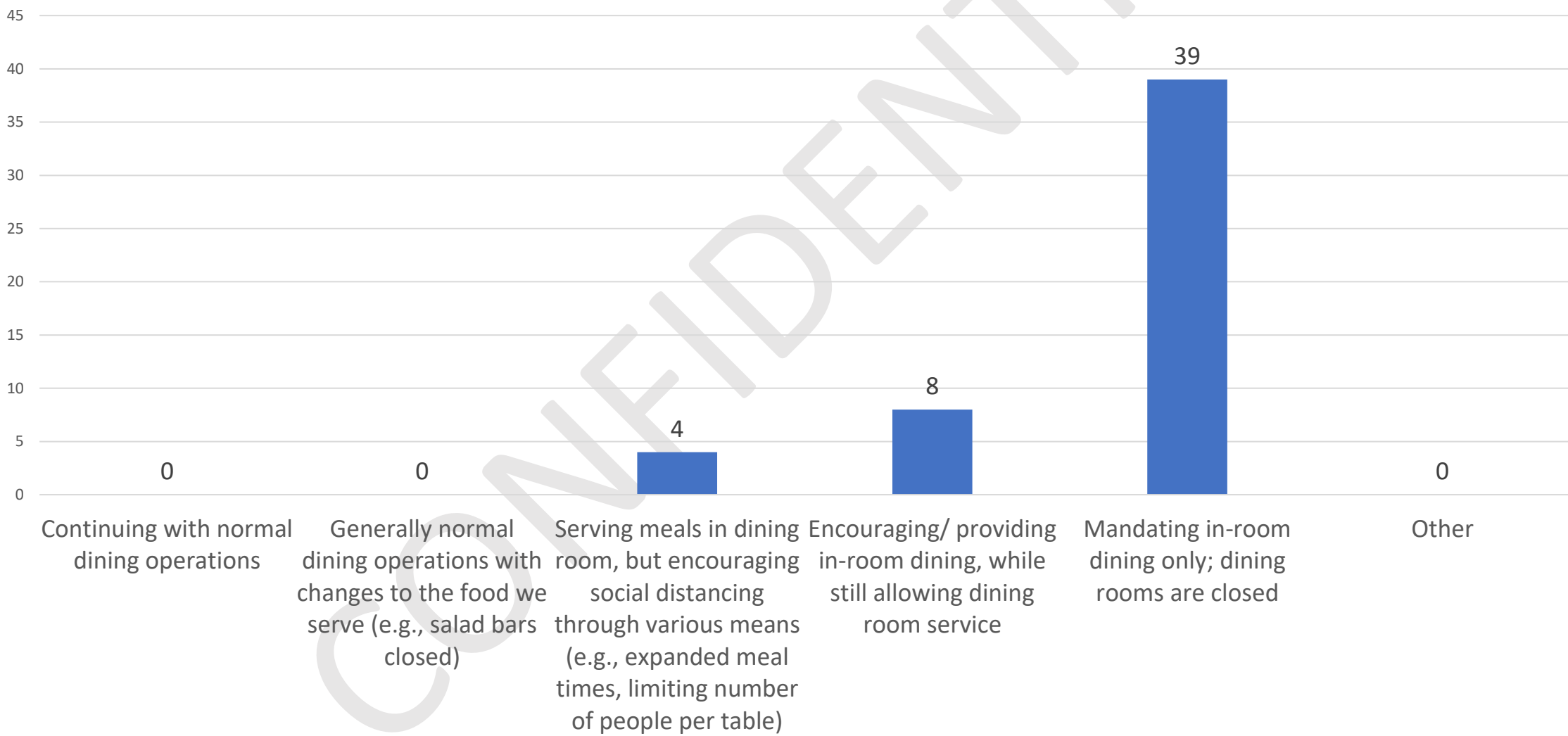
Have you had any residents move out due to concerns related to COVID-19?



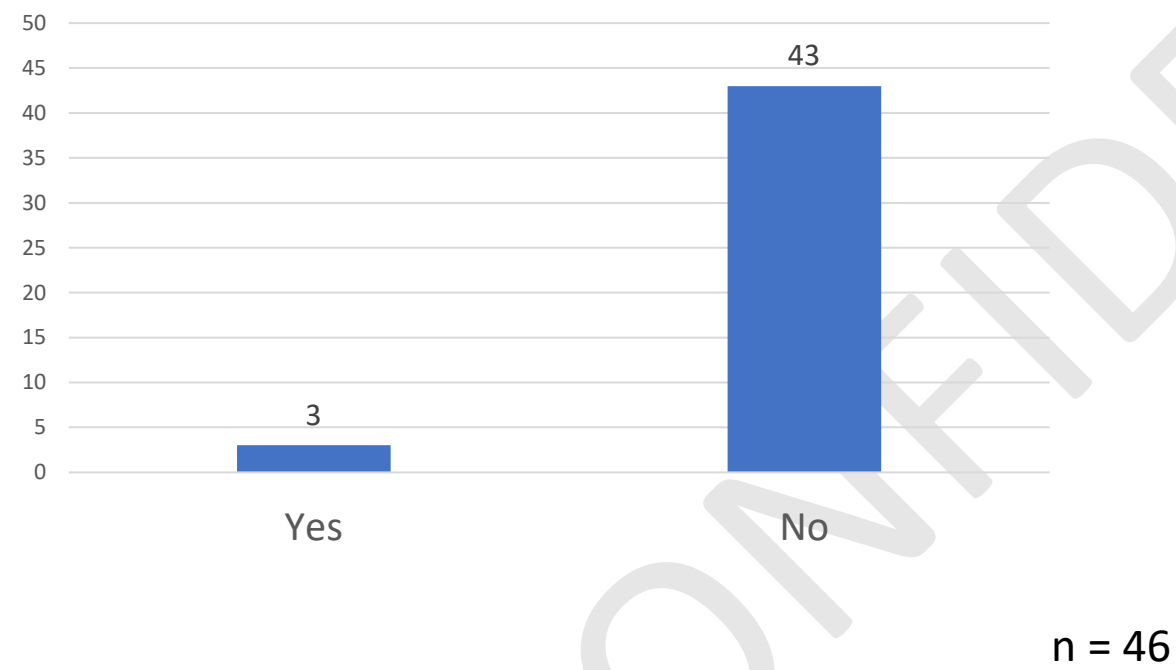
■ Yes ■ No ■ Unsure

n = 46

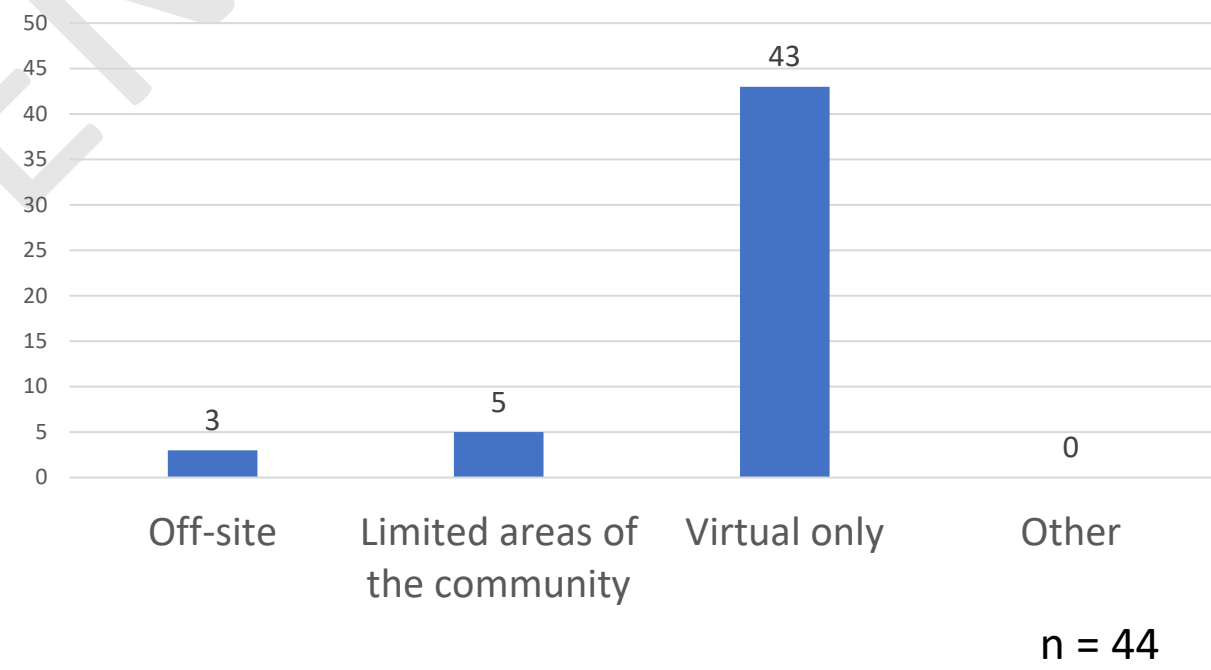
What, if any, changes have you made to your dining operations (for your communities without a known case of COVID-19)?



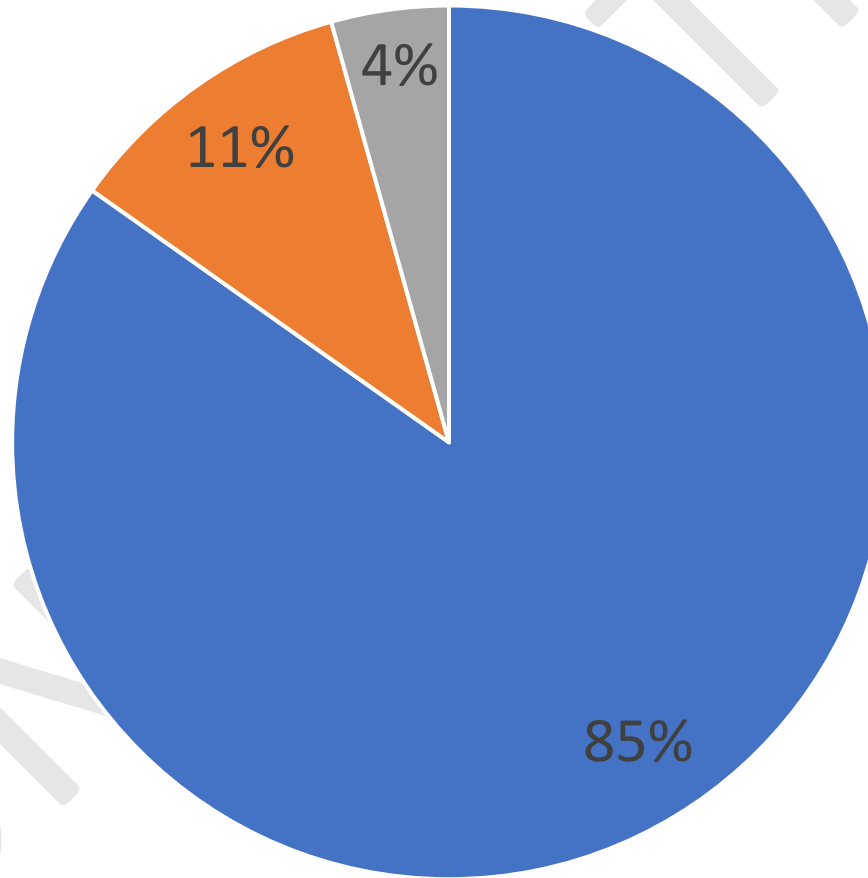
Are you conducting tours as usual
(with or without pre-screening)?



If no, are you conducting tours:



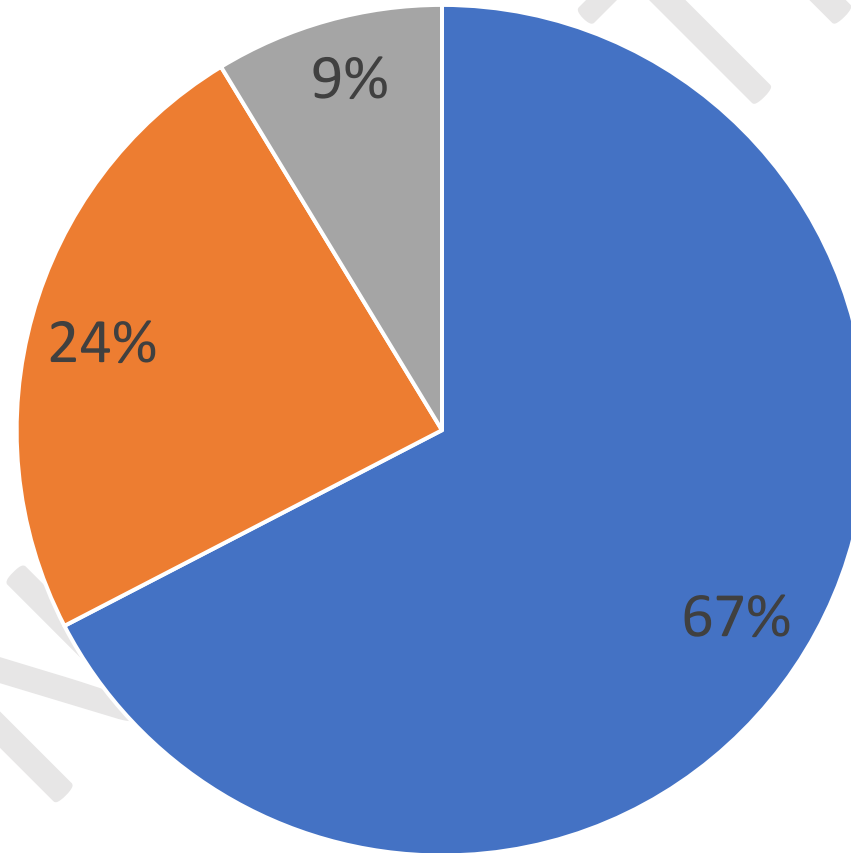
Have you had any prospects cancel plans to move-in due to COVID-19 fears?



■ Yes ■ No ■ Unsure

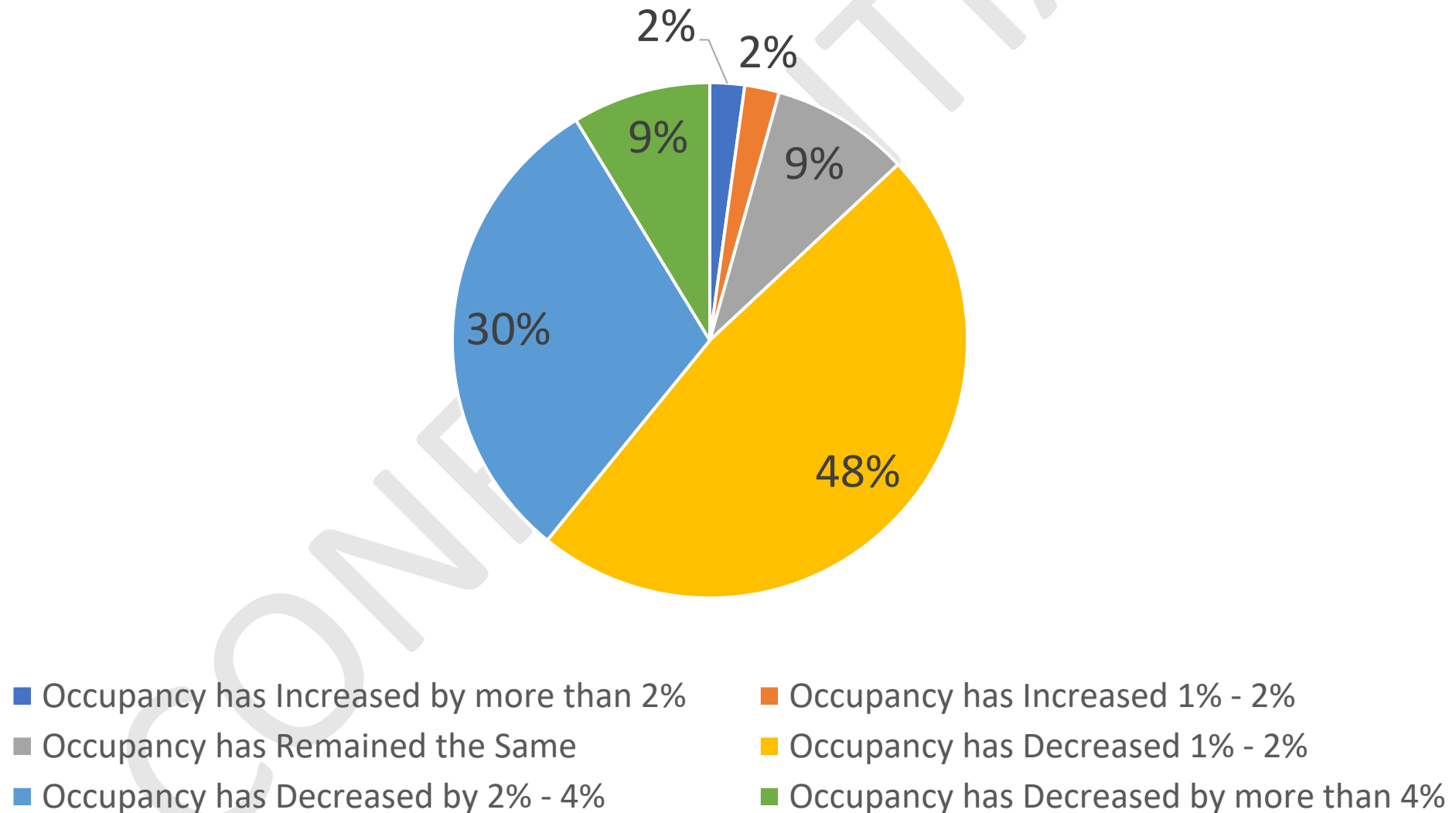
n = 46

Do you expect to move-in new residents before
the end of this month?

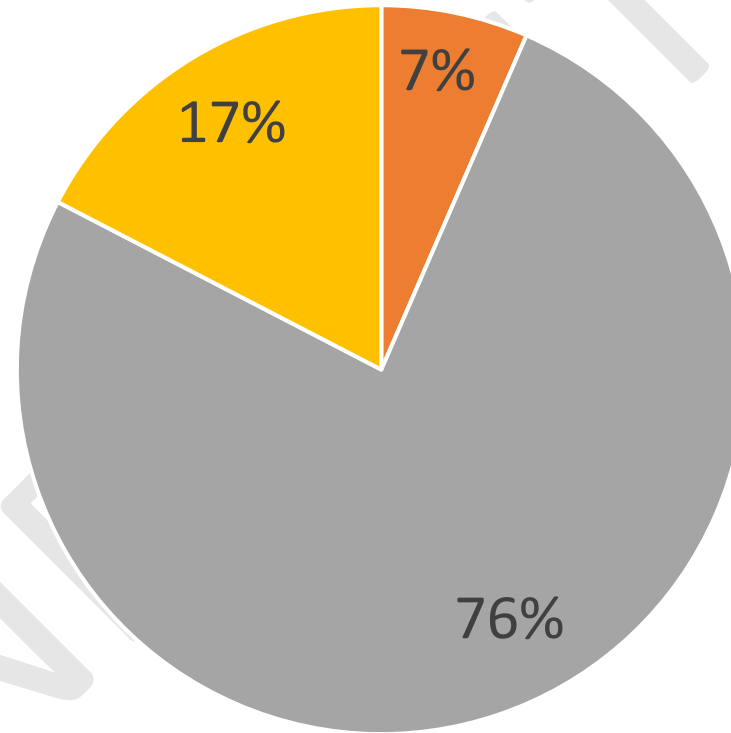


■ Yes ■ No ■ Unsure

Since the emergence of COVID-19 in the U.S., please note the impact to your community's occupancy rates:

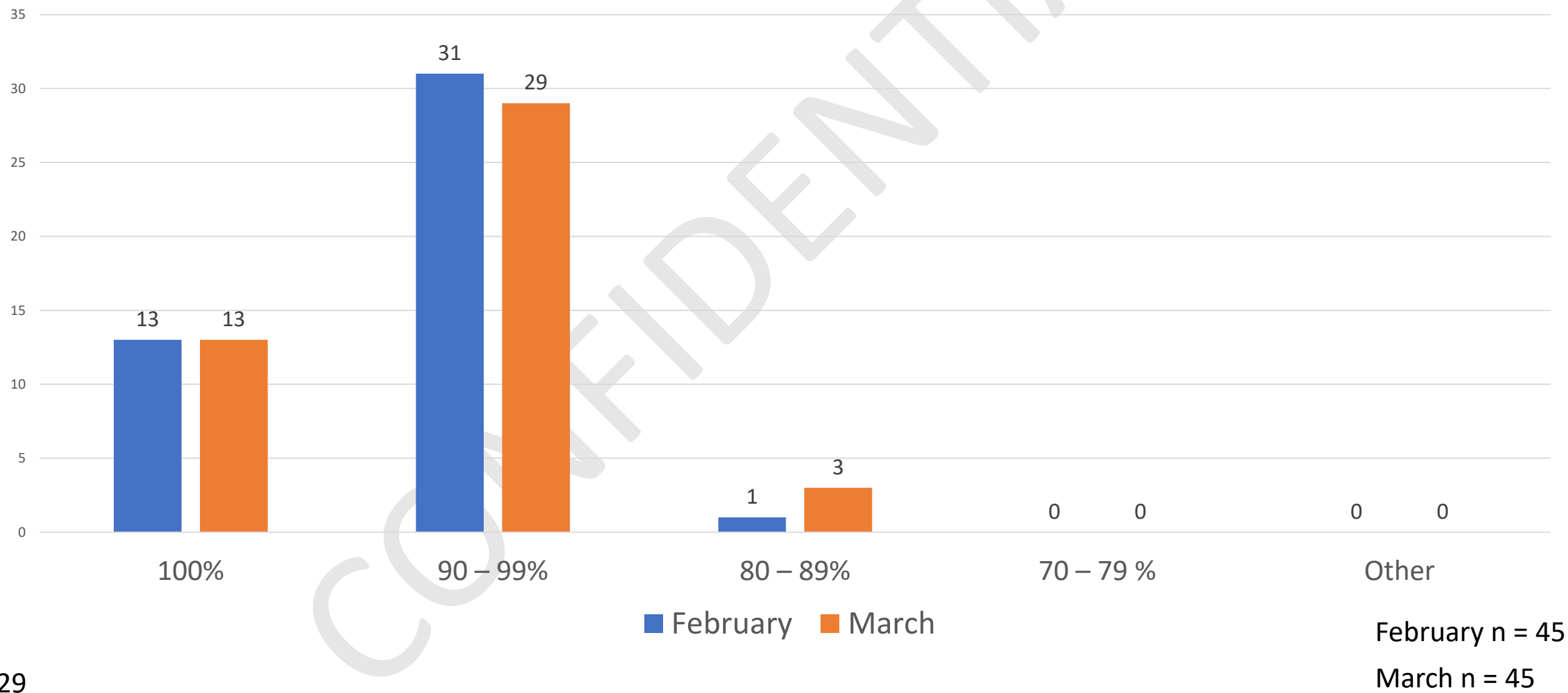


Since the emergence of COVID-19 in the U.S. markets that you operate, please select the answer that best characterizes prospect traffic at your communities:

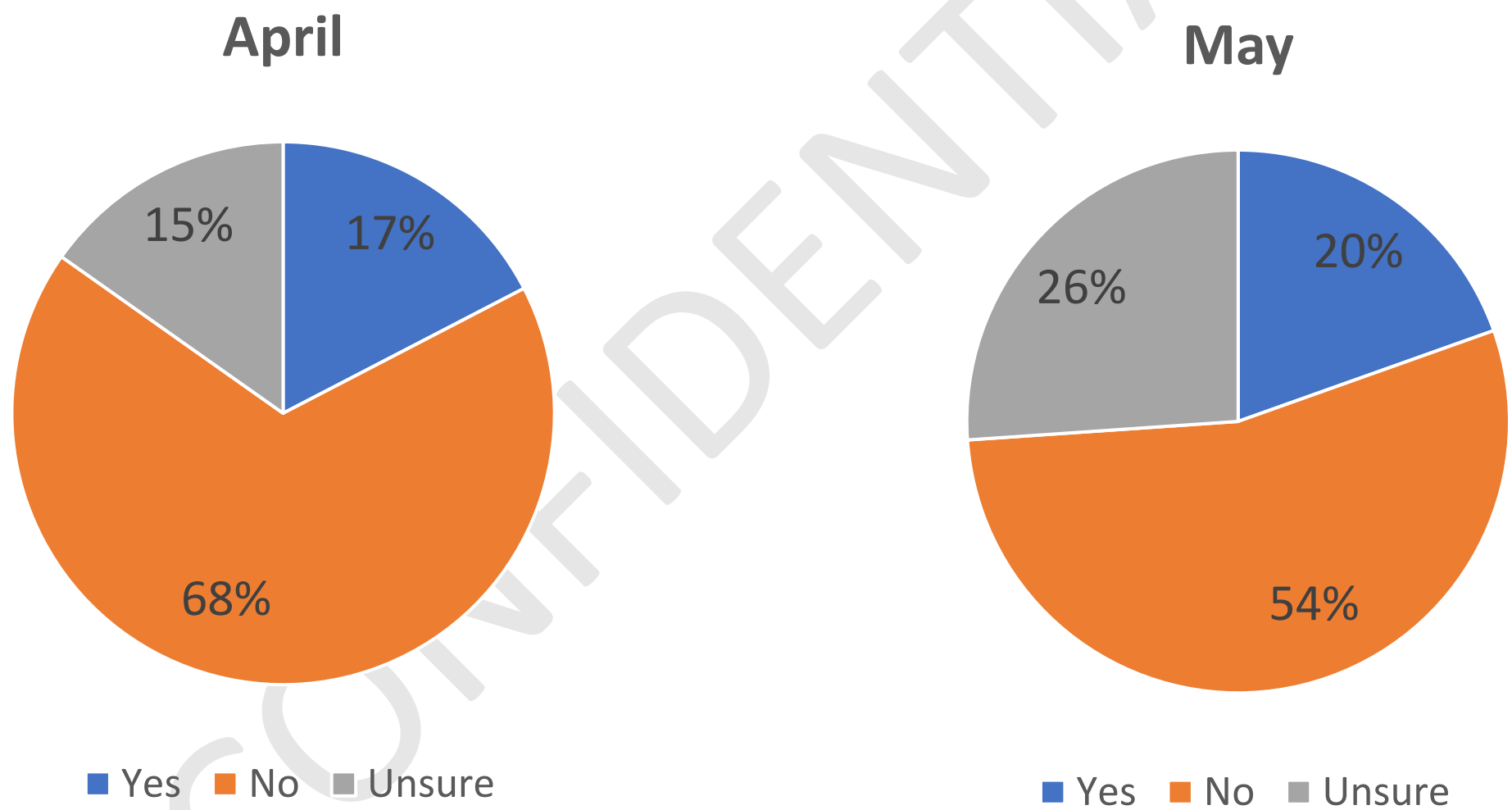


- Somewhat less prospect traffic/move-ins
- Significantly less prospect traffic/move-ins
- We are effectively not moving any new residents in to our communities until the crisis abates

Since the emergence of COVID-19 what was your percentage of rent collected in February and March?

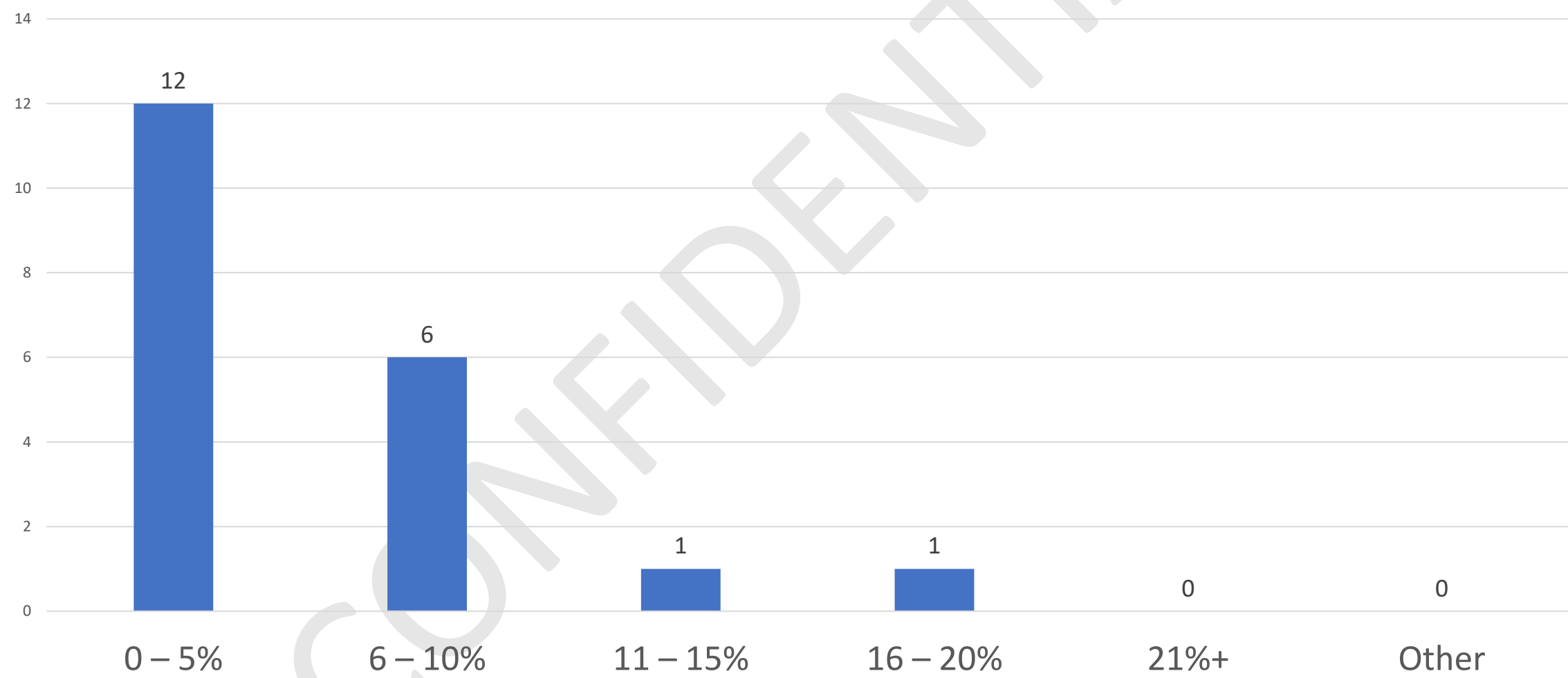


Do you anticipate rent delinquency in April and May?



April n = 46
May n = 46

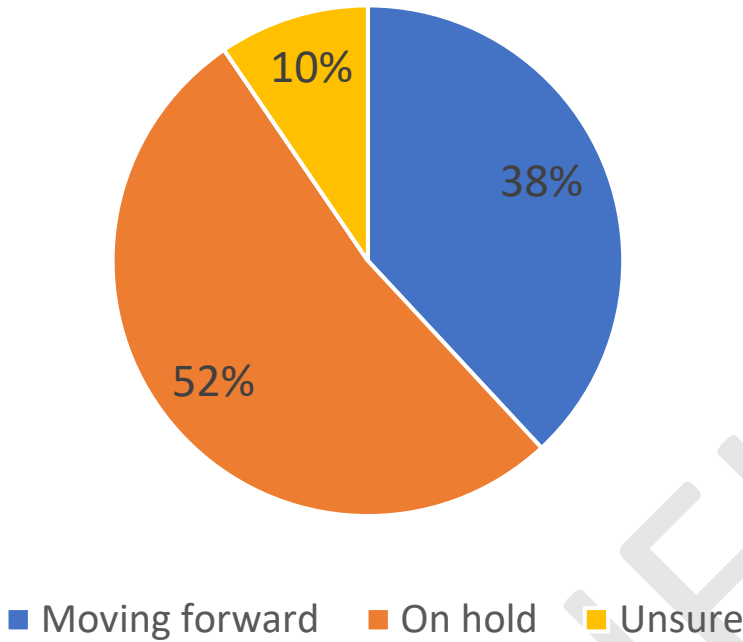
If you anticipate rent delinquency, what percentage?



Are you involved in a current capital transaction?

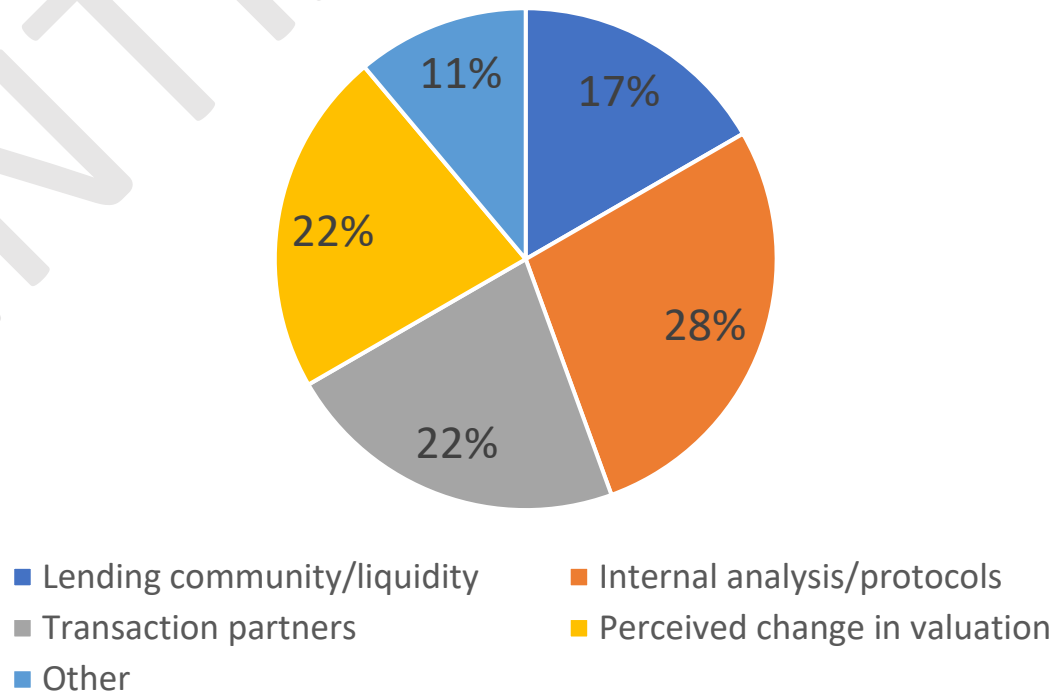


Is your capital transaction?



n = 21

If you answered on hold or terminating, do you attribute this to:

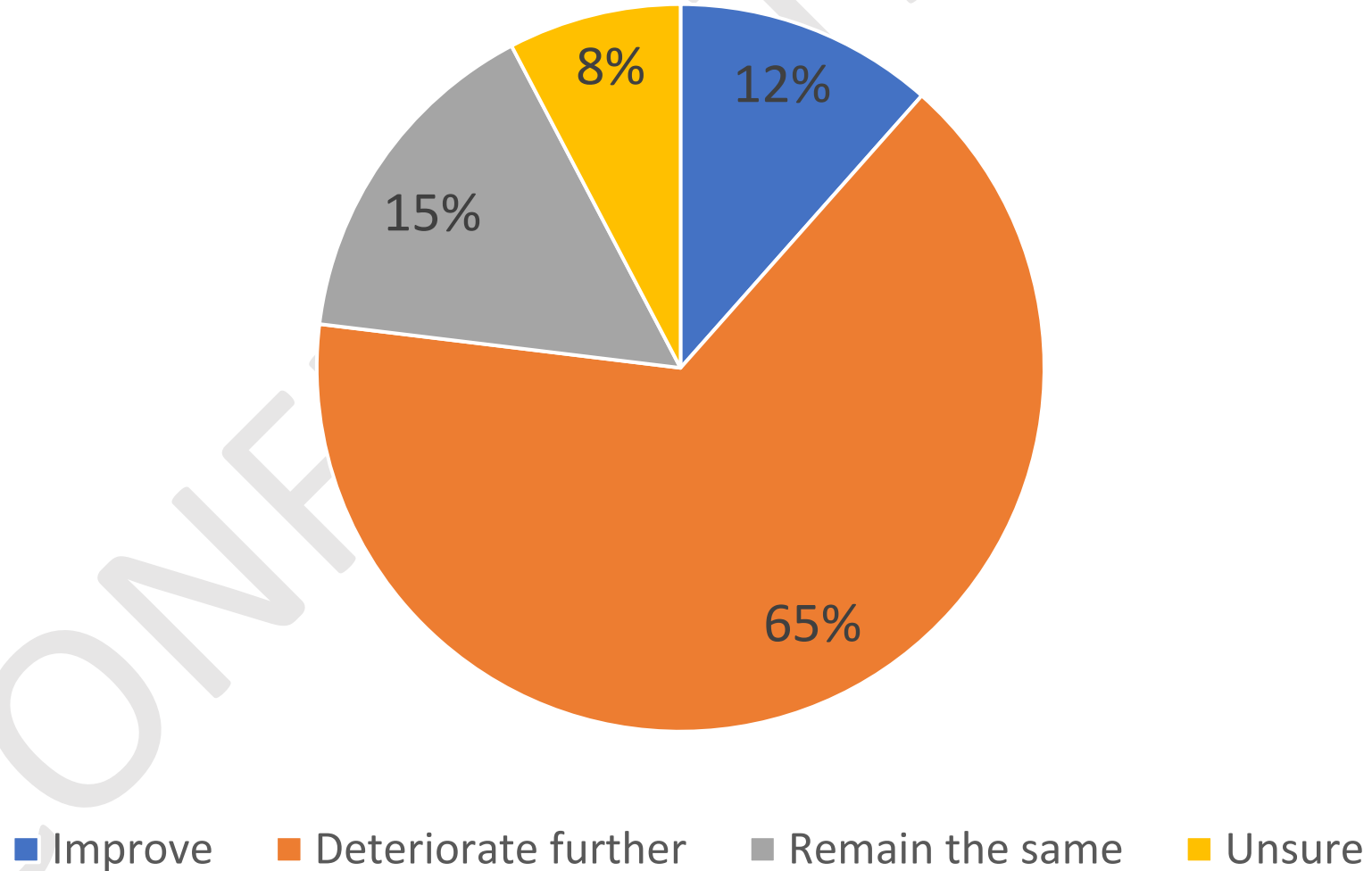


Other responses:

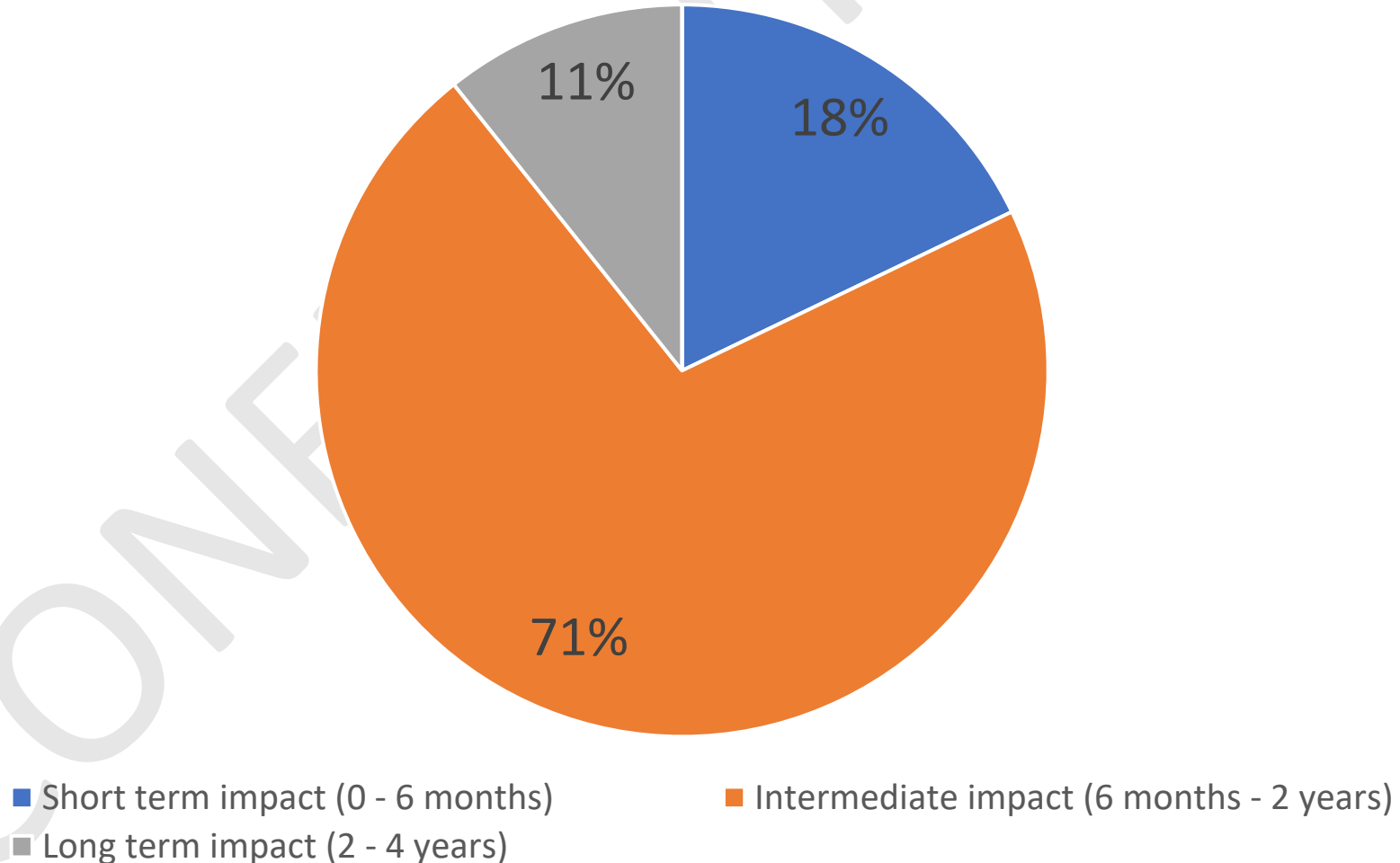
- Lenders pausing to get a better understanding of risk
- General uncertainty

n = 10

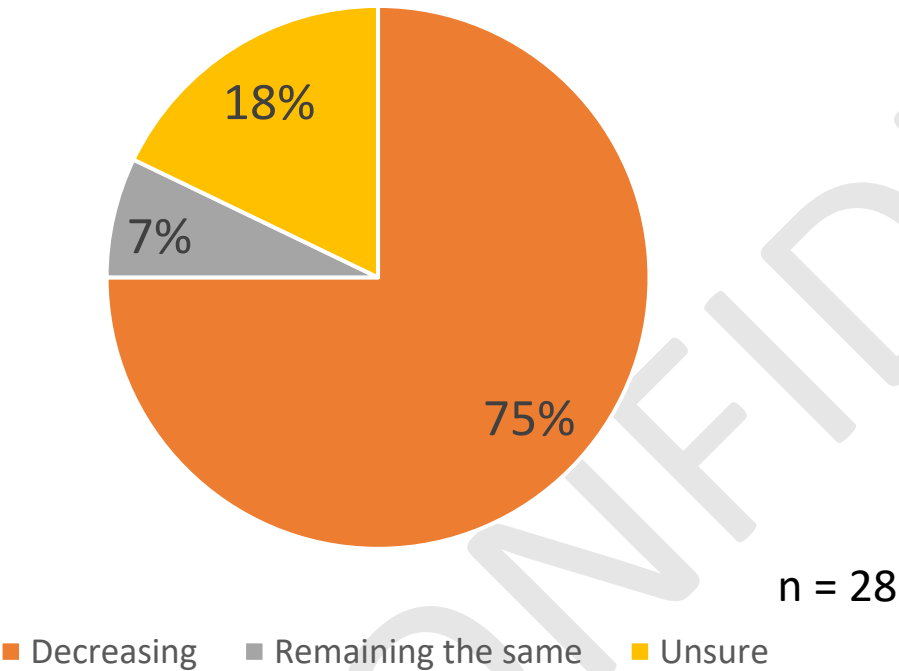
Do you anticipate current capital markets will:



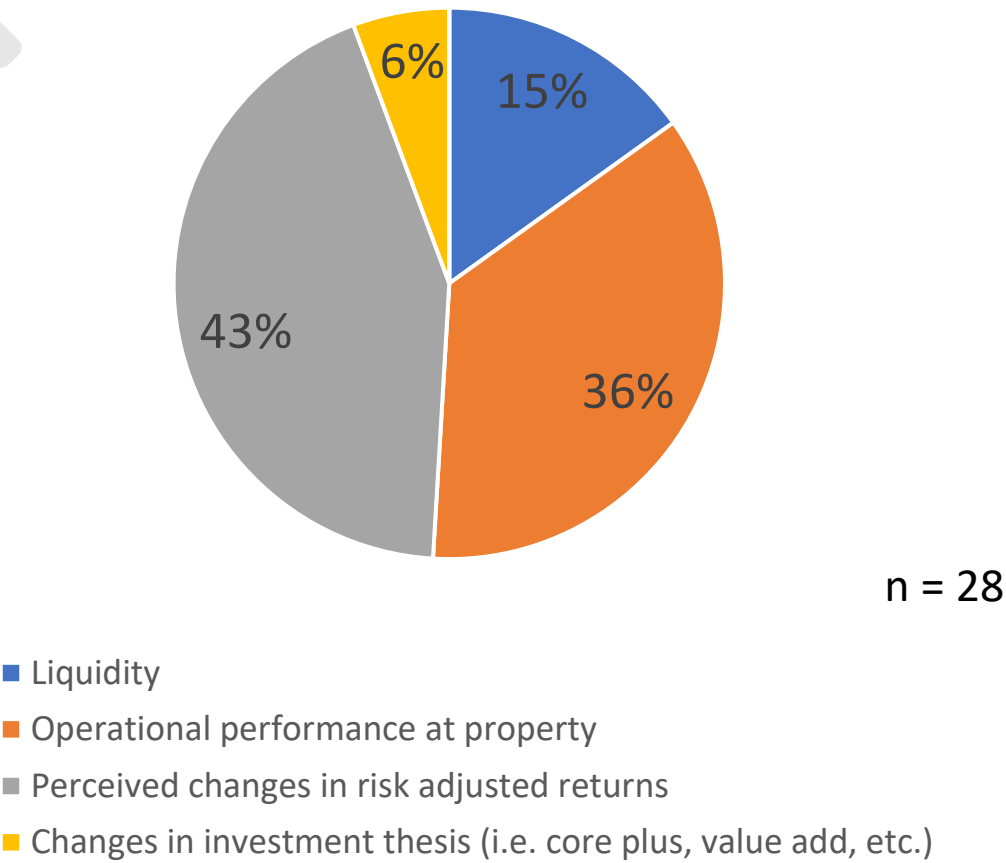
Do you think that the COVID-19 pandemic will have an adverse impact on sector valuations that will last:



With regards to transaction marketplace, do you anticipate market values:



Based on your answer do you attribute this to:



What is your greatest concern at this time?

- Staffing. Testing.
- An outbreak resulting in a number of deaths.
- Health and safety of residents and staff.
- Occupancy decline.
- Negative perception of industry.
- What's the new normal for communities
- Getting painted with the same brush as skilled.
- Testing and stress/anxiety for the resident. If no testing, then "freedom" on campus remains a challenge. If we have regular testing, then we can manage stress/anxiety/depression/healthy exercise.
- The ability to get past the shelter in place so we can move resident in and calm down staff and families.
- Health Departments need to report on negative test results, recoveries, and stop with deaths that are non-related i.e. Hospice deaths.
- Testing and PPE.
- The unknown duration of the pandemic and the long-term impacts on staffing, occupancy, resident/family ability to afford rent and services, revenues and business recovery time.
- Lack of visibility into the availability of more robust and widespread testing of the general US population, as well as potential treatments for COVID 19.

What is your greatest concern at this time? (cont.)

- Continued elevated costs along with a reduced number of move-ins will eventually create a severe financial bind
- Continuing to provide safe environments for our residents and associates. When to "open" up and working with all stakeholders (residents, families, and associates)
- How long we need to restrict access for tours and the move-in of new residents.
- Staffing
- Access to PPE
- That Covid-19 spreads within one or more of our communities. Also, that the economic fall out from this pandemic will be devastating for so many.
- Testing and Stimulus participation for Senior Living
- Keeping our residents and employees safe
- People concerned about moving to congregate care even though we haven't been negatively impacted
- Staffing, Occupancy dropping, Increased Payroll
- The states not realizing the guidelines need to be different for senior living. In addition, the country opening too quickly and therefore putting our employees at risk subsequently risking the health of our residents.
- The disease infecting many residents/staff in one building
- Determining when it's safe to move in new residents
- Safely opening our buildings and our nation
- Keeping staff healthy so they can continue to work