



2020 Class Inducted into Senior Living Hall of Fame

The American Seniors Housing Association (ASHA) welcomed the 2020 class of inductees in the Senior Living Hall of Fame during the association's annual meeting in Palm Desert, CA.

Honorees were Lynne Katzmann, Juniper Communities; Alice and Emmett Koelsch, Koelsch Communities; and Margaret Wyld, ProMatura Group.

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(left to right): **Anne Tumlinson, Meredith Mills, Carrie Coumbs, Leon Grundstein**

PRE- AND POST-ACUTE CARE IN SENIOR LIVING

Capitalizing on senior living's ability to intercede, coordinate and deliver health care Integrated networks awakening to the value of strategic collaboration partnerships

Health care's traditional role in seniors housing communities typically meant coordinating a network of various third-party ancillary services that residents could readily access.

Now, with Medicare's value-based reimbursement movement gaining momentum, Medicare Advantage intervening to control utilization among its rapidly growing share of beneficiaries, and integrated care networks pushing for prevention and early intervention, the care delivery landscape is in the midst of extraordinary change.

Seniors housing stands at the crossroads, deliberating how it will respond as it faces

the prospect of moving beyond service coordination to participate in the forefront of pre- and post-acute care.

With an eye on the future, Carrie Coumbs, Right at Home; Leon Grundstein, GenCare Lifestyle; Meredith Mills, Country Meadows Retirement Communities; and Anne Tumlinson, Anne Tumlinson Innovations took turns explaining why seniors housing will be a valued partner under this new paradigm.

Coumbs opened, recalling that "for many years, seniors housing provided only coordination of pre- and post-acute health care.

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2020 Class Inducted into Senior Living Hall of Fame

Three leaders who played a prominent, pioneering role in the industry's early success and subsequent growth were inducted into the 2020 class of the Senior Living Hall of Fame during the American Seniors Housing Association's (ASHA's) annual meeting in Palm Desert, CA. The Hall of Fame provides an opportunity to recognize the achievements of those who have done so much to advance the senior living profession.

LYNNE

KATZMANN, PH.D., JUNIPER COMMUNITIES

Lynne Katzmann founded Juniper Communities, which invests in, develops and operates senior living and long-term care communities at the age of 32. Bringing with her no financial backing, a mere six year's business experience and a PhD in economics, her mission was to improve the last years of life for seniors.

Katzmann believed that a woman could and should lead this business where the customers — staff, residents and family caregivers — were predominantly women. Her goal was to make Juniper profitable for investors; and as a founder of the then nascent corporate social entrepreneurship movement, she would adhere to the double bottom line: doing well by doing good.

Today, 31 years later, CEO Katzmann continues to actively lead Juniper, now with 22 properties in three states. Juniper is ranked #12 by Crain's New York on its annual Top 50 ranking of woman-owned companies for the New York tri-state area.

Juniper's investors have enjoyed double digit annual returns while her residents, their families and Juniper Associates give the company high marks on annual customer satisfaction studies. Health-related metrics, such as low hospital readmissions, support Juniper achievements with hard data indicators.

Juniper has developed and now shared a pioneering model of integrated care that will better position Juniper and other senior living operators to participate in capitated and risk-based reimbursement. Called Connect4Life, the program integrates with other services using a "high-tech/high-touch" communications protocol that transfers information through an electronic health record (EHR) and coordinates care through a human navigator.

Lynne is now launching an operator-sponsored Medicare Advantage I-SNP, collaborating with Christian Living Communities, Englewood, CO, and Ohio Living, Columbus, OH. Under The Perennial Consortium banner, the group plans to go live with the network in 2021 and to expand via partnerships with additional operator stakeholders.



Lynne and
Andrew Katzmann

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ALICE AND EMMETT KOELSCH, KOELSCH COMMUNITIES

Emmett and Alice Koelsch risked it all on a shuttered nursing home in 1958. Guided by their family values and deeply held faith, they became innovators and leaders in the seniors housing industry.

The Koelsch family story is one of classic American success. Emmett Koelsch started his life on a farm in Great Bend, KS, and moved to Longview, WA, at 17-years-old where he worked various jobs as a milkman, construction worker, and horse logger.

He met Alice at St. Helen's Inn, where she was waiting tables. They both started at Reynolds Metals, where Emmett was employed before and after his service during World War II. After 21 years and rising to a management position, Emmett left Reynolds Metals to pursue a new business: Seniors housing.

Emmett and Alice Koelsch started their family business in 1958 with the acquisition of a nursing home in Kelso, WA, that had 52 beds, all of them empty. They moved themselves and their five children into the basement of the nursing home and got to work, buying or building every nursing home in Cowlitz County over the next 10 years.

In 1971, the couple had an idea: Provide care for those who could not live alone but did not require skilled nursing services. They built the Delaware Plaza in Longview, WA, providing meals, housekeeping and medication management for their residents, 10 years before the term "assisted living" was coined.

Emmett and Alice built a highly respected senior living business over the next 25 years. When they retired, all five of their children followed in their footsteps, starting their own seniors housing businesses with the foundation that Emmett and Alice laid. These businesses now operate over 100 communities in 21 states. The Koelsch children have never lost the values instilled by Emmett and Alice: Courtesy, integrity and treating everyone with dignity and respect.



Judy and
Aaron Koelsch

Senior Living Hall of Fame Members



Class of 2019

Debra A. Cafaro
Ventas, Inc.

Paul Klaassen
Sunrise Senior Living

Tony Mullen
National Investment Center for
Seniors Housing & Care (NIC)

Class of 2018

Granger Cobb
Emeritus Senior Living

Bill Colson
Holiday Retirement Corp.

Bill Kaplan
Senior Lifestyle

Jim Moore
Moore Diversified Services

Bill Sheriff
Brookdale Senior Living

Stan Thurston
Life Care Services

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MARGARET WYLDE, PH.D., PROMATURA GROUP

Dr. Margaret Wylde started ProMatura Group in 1984 and since that time has conducted an extensive body of research that has significantly improved the collective understanding of the 55+ market.

The numerous and noteworthy research studies she has led include: Prospective Independent Living Customers: Key Findings from a Study of Prospects and Hold Outs (2013); Unlocking the Mystery Behind Very Satisfied Customers: Make Them Feel at Home (2014); Senior Living Technology Report (2017); and People, Place, Programming: Quality of Life in Assisted Living (2019).

In addition, Dr. Wylde has had a significant impact on community planning research that defines lifestyles, residences, amenities, services, payment plans, and pricing across North America, Europe and Australia.

ProMatura's age-qualified housing expertise spans empty nester (55+) housing, as well as independent living, assisted living, care for those with Alzheimer's disease or other forms of dementia, continuing care retirement communities, and nursing care.

ProMatura has collected data since 2003 for use by investors and developers of age-qualified, service-enriched housing and provides this to the National Investment Center for the Seniors Housing & Care Industry (NIC), which uses the data to track key market trends quarterly. ■



Margaret Wylde, Ph.D.

Senior Living Hall of Fame Selection Committee

The Senior Living Hall of Fame Selection Committee is chaired by Larry Cohen, long-time industry executive and former ASHA chairman. Committee members are Lois Bowers of *McKnight's Senior Living*, Steve Monroe of *The Senior Care Investor*, Matt Valley of *Seniors Housing Business*, and John Yedinak of *Senior Housing News*.

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**PRE- AND POST-ACUTE CARE
IN SENIOR LIVING**

Medicare Part A home health nursing and therapy services dominated the seniors housing support market. But modifications to both Medicare and Medicare Advantage insurance plans have changed the seniors housing landscape dramatically.

“Communities must now deliver in-home, pre-acute, proactive health care of their own design and management to be considered part of the health care continuum. Demand is predicted to increase. The seniors housing provider is now being seen as a strategic care collaboration partner in the post-acute care arena.

“Fewer days spent in the hospital or skilled nursing, with a rapid return home, is an expectation from both the care providers and the insurance companies,” she observed. “Re-hospitalization avoidance is the new mantra for many senior housing providers. And data replacing donuts for the discharge planner, along with care outcome scorecards, are the new leave-behind pamphlets.”

In the aftermath of residents responding to a precipitating event such as a medical episode that triggers a change of heart from “I’m not ready to I need help, a practical

consequence of delayed entry is residents enter the community with more chronic health conditions to manage, lowering their length of stay within the community. And communities are being asked to anticipate or predict and report decline and act proactively. Delivering pre-acute care means engaging in preventative health,” Coumbs added.

PARTNERING ACROSS THE CONTINUUM

Seattle-based GenCare Lifestyle is in the preliminary stages of introducing Whole Life Connect, a resident-centered wellness program in partnership with the seven-hospital MultiCare Health System and Dispatch-Health, a mobile urgent care service. Rehab services are provided by Olympic Sports & Spine, while Matrix Pharmacy is GenCare’s pharmacy partner.

For those residing in assisted living or memory care, GenCare nurses coordinate and schedule all visits, whether they take place at the community or offsite at a doctor’s office. For active living residents, the RN wellness director provides support services for: Preventive and wellness care; minor illnesses and injuries or post-surgery; hospitalization or care for a serious medical condition; and hospice care.



Andrew Agins
CA Senior Living



Larry Graeve
The Weitz Company

Nadine DeNicola
The Weitz Company

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From preventive care to surgical care and home health, GenCare Lifestyle's Whole Life Connect program is designed to deliver services directly to residents. Through its collaboration with MultiCare and DispatchHealth, annual flu shots, annual wellness visits, advanced care planning, post-surgery physical and occupational therapy, surgery scheduling, and post care support are available.

GenCare characterizes its mobile care partner, DispatchHealth, as a neighborhood urgent care center interacting directly with residents, while its other care partners meet the wellness needs of residents before hospitalization or a trip to the emergency room is required. Whole Life Connect is designed to improve access, increase convenience, and bring services to the resident.

"We've created relationships where our partners provide us with a concierge type of care scenario," explained GenCare's Leon Grundstein. "We have doctors who will visit our residents in the building on a priority basis. They do in-home visits. They'll also do consultations with residents on how to improve

their health on an appointment basis, meeting with them in their apartments.

"Dispatch Health is a responder to emergency calls on a priority basis. We have a direct link call system, so they come to the building, take care of the emergency, and obviously if it requires hospitalization, then they'll shuttle them to the hospital.

"But in any case, it's a concierge direct relationship with the resident, which is an extreme confidence builder for the family and the residents themselves. This also gives us a relationship with a rehab organization called Olympic Sport and Spine. So when residents have a broken bone or joint replacement, they usually get on a protocol for rehab," he reported.

Oversight and intervention at GenCare will undoubtedly have a positive effect on residents' health, which in turn extends length of stays.

"This will hopefully reduce trips to the hospital," Grundstein commented. "Second of all, particularly with the physical therapy, it will reduce the reoccurrence of an injury, because our trainers in the buildings follow protocols



Scott Rossbach

Ally Bank

Dana Scheppmann

Capital One Healthcare

Mark Bultman

Capital One Healthcare

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shared by the physical therapy company. And the hospital will improve their record of not having recidivism for people going back for care, which will help their ratings.

“Since we instituted our Whole Life Connect program, we’ve gone from a 25-month average length of stay to 38 months,” he added.

GenCare and its hospital system partner considered opening clinics in the communities, but “we felt they wouldn’t get enough business to justify having the clinic there. We decided to eliminate the doctor’s clinic. The solution is the doctor, nurse or whatever specialty we need will come to our building and do the in-home care there,” he recounted.

SPECIALIZING IN REHAB

Country Meadows Retirement Communities operates 12 independent living and assisted living communities, as well as a skilled nursing facility, across Pennsylvania and Maryland.

Its Progressions Program at the seniors housing locations specializes in two- to eight-week rehab stays.

Progressions operates from specialized units at each community where staffing ratios run

higher and clinical expertise with ongoing education and training is emphasized. While hospital referrals are prominent, skilled nursing referrals are dominant, often due to the expiration of the 20-day Medicare post-hospital stay benefit when the \$170.50 daily co-pay kicks in.

The daily Progressions rate for stays up to eight weeks is \$135. Costs are offset by partnering with Genesis Rehab Services for on-site outpatient therapy clinics, a physician group that maintains regularly scheduled office hours at each community, a pharmacy, and a network of home health care agencies. Each provider is Medicare certified.

Approximately half of those in the Progressions Program return home, while the remainder choose to reside in either Country Meadows’ independent living or assisted living apartments.

Progressions incorporates 13 clinical management tools designed for chronic diseases with best practices for symptom exacerbation, rounding and charting. Dashboards track and analyze hospitalizations, re-hospitalizations, falls, wounds,

COUNTRY MEADOWS’ PROGRESSIONS PROGRAM

- Five days a week of therapy in on-site gyms and restorative support around the clock
- 24/7 access to nurses and regularly scheduled physician rounds
- Support with co-morbidities and chronic diseases
- Special medication, wound care and dietary support
- Coordination of care resources
- ADL assistance including two-person or mechanical lift transfers

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medications and more to guide interventions and ensure quality improvement.

All the Progressions units have a dedicated manager and restorative coordinator to interact with the therapy team and other third-party providers to ensure continuity and oversee communication with the front-line staff, clients and their families. Admissions are accepted seven days a week. Restorative programming and restorative fitness are underway 24 hours a day to advance functional improvement beyond the therapy sessions.

“Hospitals and providers’ growing involvement in chronic disease management creates an opportunity to partner in a way that we haven’t been able to in the past,” noted Meredith Mills with Country Meadows. “It aligns well with providing good, comprehensive chronic disease care, so you can keep people out of the hospital, regardless of whether you have all those resources in your own playbook.

“The family member and the resident want everything organized and coordinated for them. They want it to seem seamless. They don’t want to know that you’re coordinating with home health, hospice, physical therapy, a wound care doctor, a pharmacy, and a primary care physician. All of those entities belong to different ownership companies. They see all that as a reflection of your brand anyway, so you’ve got to own it. You’ve got to control it,” she asserted.

Mills recalled that during conversations with members of hospital C-suites, “we said you’re losing money on readmissions or you’re losing money because you’re pushing people out too quickly. You’re only letting

SNFs be a part of your preferred network if their length of stay is 14 days, and that’s too soon. You’re readmitting and losing millions of dollars. We could help.

“But it all fell on deaf ears. So we said let’s go to the other end where we already have a relationship with the discharge planners. And let’s play off a program that’s worked for us for the last 10 years that we created for our own IL and AL residents, who were often going to the hospital and coming back to us too soon, de-conditioned, not ready to go back to their IL apartment.

“Two years ago, we started offering that short-stay program in our restorative level of care to people being discharged from skilled nursing, inpatient rehabs and hospitals. In the past two years, we’ve seen over 600 non-resident patients through the program. It has to be somebody who’s never interacted with our brand before.

“We offer them a discounted rate. It is a loss leader. But on the flipside, almost 50 percent of those clients have stayed with us at the end of their two to eight weeks. And that equates to less of a loss leader than we would be paying for referral sources, of which we use none,” she pointed out.

The Progressions program has been a hit with medical professionals. “Their referrals overall, not just for this program but overall, are high quality. So although only 10 percent of our initial prospective resident referrals are coming from medical professionals, 25 percent of our move-ins come from medical professional referrals,” she said.

Country Meadows was an early proponent of generating and analyzing data to improve outcomes.

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“We are a bit obsessed with data and measuring,” Mills conceded. “All of our nurses chart on symptom exacerbation around different disease processes. They round. We’ve taken them off the carts and replaced them with medication associates, so they have the freedom to round and check in on all of our residents. And we have them doing wound tracking, hospitalization and re-hospitalization reporting, off-label antipsychotic reporting, and falls reporting.

“We do continuous process improvement and have a certain comfort level with acuity and a certain comfort level with regulation,” she commented. “We hold ourselves to that standard while still creating a homelike environment that covers the social determinants of health.”

Given Country Meadows’ expertise in coordinating so many of the resources required to assemble a continuum of care, Mills sees an opportunity to reach out beyond its locations to create an epicenter of services.

“Why can’t this become a CCRC without walls,” she said, “where you have an RN coordinating the care for people in their homes with your pharmacy delivering their meds and looking over and reconciling meds for them? Your medical director can be available for appointments at your community, and your transport people can bring them in.

“Maybe they come in for some fitness and activities, so you’re engaging with them consistently in your community, but they’re still living in their homes. Some people will never be able to afford our product, so there needs to be a solution for them. And there are going to be some people who never want to move in to your product.

“This could be something that a Medicare Advantage plan could potentially cover, as well. If you’re coordinating care and keeping them out of the hospital, they might pay the \$1,000 or \$500 a month to keep them in that setting. And nobody’s really mastered it yet, but I think somebody will,” she predicted.

CONTROLLING MEDICARE SPEND

Anne Tumlinson Innovations specializes in strategy, market assessments, data analyses, and business intelligence for post-acute care and long-term care. The firm has an extensive background in service delivery innovation, including bundled payment and Medicare Advantage ISNPs. ASHA recently engaged Anne Tumlinson and her team to create educational materials on the recent changes in Medicare Advantage and what it means for new partnerships and collaborations among senior living and health plans.

She granted that seniors housing “is in a tough spot from a data perspective, because there’s a growing imperative to be engaged in a very different way around the health and wellbeing of your residents and how much health care they’re using outside the walls of your building. Despite the difficulties, it is imperative that you have a conversation with a hospital referral partner about your performance on re-hospitalizations, length of stay and all those kinds of things”

The federal government spent \$700 billion in 2015 on Medicare. According to Tumlinson, the highest inefficiencies in that spend are on inpatient hospital stays, emergency rooms and post-acute care. Meanwhile, the per-capita cost of Medicare is projected to grow 5.1 percent a year.

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“We can’t control enrollment growth, but we can control per-capita spending. And it’s a mix of service use, intensity of services, and price of services,” she reported. “So the federal government is focused on Medicare Advantage plans, and the plans are all focused like a laser beam on changing the incentives in their relationships with providers to address this growth in services, units of service, intensity of service, and price of service.

“Where are all the high service users? Many of them are living in your buildings. So my argument is there’s really no avoiding being part of this value conversation at some point in the future. And it’s very hard to have that conversation or be part of that mix if you don’t have data on how frequently your residents are leaving your building to go to an emergency room to have an inpatient hospital stay.

“When they come back, how likely they are to readmit within 30, 60, or 90 days?” she asked. “Those are the datapoints that are going to be critical in that conversation. It’s also nice to have data on the performance of the hospitals that you are interacting with. You have to pay for it, but you can learn what the hospitals in your markets are

experiencing in terms of their performance. You can learn Hospital A has a high readmission rate for this condition or that condition. Or this hospital is sending almost all of their patients to this skilled nursing facility.”

Slowly but surely, hospitals and physicians are beginning to recognize the value of seniors housing partnerships, Tumlinson pointed out. “In the last six months to a year, we’ve had two very large health systems and one very large physician practice group come to us, completely unsolicited, and say we have a Medicare Advantage plan that we own. We have an ACO. We have our own physician house calls program. We have an enhanced primary care clinic program. We need a seniors housing strategy.

“So look around your markets and think about the hospital or health system that’s always been there. Maybe your only relationship with them has been at the discharge planner level at best. But if they’re having those conversations internally, there might be an opportunity for you to have a conversation with them,” she suggested. ■



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Bret Stephens, *The New York Times*

KEYNOTE PRESENTATION: BRET STEPHENS, *THE NEW YORK TIMES*

Predicting the future: Overcoming superficial assumptions through intelligent skepticism

10 rules for moving beyond ideological polarization and political demagoguery

Amidst the societal divides intensified by growing ideological polarization and political demagoguery, common sense is often lost in the face of predictions predicated on insufficient, circumstantial, changeable and often flat out wrong information.

Sorting through the din and clatter of clichés and herd mentalities calls for moving beyond superficial thinking with an independent sense of judgment. It means spotting continuity where others see novelty and maintaining an intelligent skepticism without succumbing to cynicism.

Looking back at lessons learned, *The New York Times*' op-ed columnist and editorial editor Brett Stephens shared his advice for parsing and questioning forecasts for the future. Stephens won the Pulitzer Prize in 2013 and while at *The Wall Street Journal* was a foreign affairs columnist and deputy editor of the editorial page.

Predicting the future is a lucrative business with a lousy track record, he asserted. High profile visionaries usually reference a time horizon that is at least five, 10 or 50 years out, so no one holds them accountable when the time comes to look back at the accuracy of their predictions.

MISSING THE MARK

Furthermore, Stephens contended that even near-term predictions based on relatively well known, general outlines often miss the mark.

He pointed to the polling experts at *The New York Times* who predicted that Hillary Clinton would win the presidency with 85 percent probability.

After Donald Trump won the presidency, Paul Krugman, winner of the Nobel Prize in economics, predicted the stock market would never recover from his victory.

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However, three years later the Dow Jones Industrial Average rose by 67 percent.

And last summer, a well-known short seller on Wall Street told Stephens with great confidence that Tesla's stock was destined to continue to tank and might even go to zero. It has since gone from about \$170 a share to well north of \$500.

"Now, if predictions about the near future tend not to work, some people think that you can make predictions about the far future by looking at mega trends. So let's look at the history of some of those mega trends," he suggested.

In the early 1960s, economist Paul Samuelson who won a Nobel Prize said if the Soviet economy continued to grow at the same pace as it had throughout the 1950s as it recovered from the Second World War, the Soviet GDP would overtake American GDP by 1984. Of course, the Soviet Union actually stagnated, declined, collapsed and ultimately vanished.

In the late 1960s, a professor at Stanford University named Paul Ehrlich predicted in his book called *The Population Bomb* that by the end of the 1970s hundreds of millions of people would be dying of starvation every single year as the result of overpopulation.

Instead, famines have virtually vanished in recent years, except in places like North Korea where they are essentially manmade. The world continues to enjoy agricultural abundance thanks to the Green Revolution and genetically-modified foods.

The conventional wisdom in the 1980s maintained that Japan would soon become the world's most powerful economy. Japan nevertheless went into a period of economic and social stagnation that has now lasted no less than 30 years.

And just a decade ago it was fashionable to predict the end of oil. Oil and gas production, meanwhile, registered massive gains throughout the world, but particularly in the U.S., which is now the world's foremost producer ahead of both Saudi Arabia and Russia in both oil and natural gas, thanks to the technology known as fracking.

"So we continue to live, even now, in a world in which all sorts of self-declared experts make all sorts of confident predictions uttered in tones of certainty that seem to brook no disagreement," Stephens observed.

For example, he noted that driverless cars and other forms of artificial intelligence-backed technologies are fanning



LuAnn Thoma-Holec

Thome-Holec Design



Brad Clousing

Senior Living Investment Brokerage

Ryan Saul

Senior Living Investment Brokerage

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fears that these advances will lead to mass unemployment. And the self-declared experts Stephens referred to predict that China will become the world's dominant economy by the year 2030, while Florida and other coastal areas will be underwater by the end of the century.

"Now, let me look at the three cases that I mentioned, starting with self-driving cars," he said. "You've probably heard that, along with this driverless car utopia, there is going to be a dystopia with millions of people thrown out of work. Two-point-six million Americans, most of them men without

college degrees, make their living as drivers. And that's not counting all the Uber and Lyft drivers, who surely number in hundreds of thousands, if not millions, of people.

"But ask yourself this: Why should the advent of self-driving cars — if that is indeed what is happening — be any different from the advent of any other major technological development or breakthrough?

"Up until about the middle of the 20th century," he continued, "it was common, even among families of relatively moderate means, to employ housekeepers and maids, usually women with low levels of education

BRET STEPHENS' 10 RULES OF HOW NOT TO PREDICT

- 1 Do not mistake a trend for the truth. Trends only hold true until they don't
- 2 Do not mistake a consensus for the truth. The herd of independent minds is still a herd, and herds have been known to stampede themselves off of cliffs every now and then
- 3 Basic laws of economics have not and will not be overturned
- 4 If something sounds too good to be true, it probably is
- 5 If similar sorts of predictions have proved wrong in the past, they will probably prove wrong in the future
- 6 Making predictions more extreme may make them more interesting; it does not make them more accurate
- 7 Humanity is a creative and adaptive species. If a prediction is based on the belief that we won't change in the face of a challenge, that prediction is almost surely wrong
- 8 Do not look for the exotic fact in the commonplace, mundane data. Look for the commonplace, mundane fact in what seems to be the exotic data
- 9 Never dismiss countervailing information as unimportant. That is usually where the real story will lie
- 10 Wishes make for lousy predictions

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and social status. Now, what happened to that particular line of work? Many things, but if I had to sum it up in just two words, I would say the words are: Washer, dryer.”

Stephens went on to explain that the advent of labor-saving devices in kitchens and mudrooms didn’t destroy employment, particularly among women. On the contrary, he noted that it was decisive in helping to liberate millions of women from much of the drudgery of housework that had defined women’s economies for generations.

“The term ‘labor-saving’ is a synonym for time-freeing, and time-freeing is, in turn, the way in which creative people discover new forms of interesting and profitable human endeavor,” he pointed out.

“What’s true of the washer/dryer is, of course, true of every other labor-saving, time-freeing, creativity-unleashing device,” Stephens explained. “From the steam engines in the 19th century that brought an end to the Age of Sail, to the airplanes of the 20th century that largely put an end to the Age of Rail, to 3D printers and other technologies in the 21st century that will put an end to all sorts

of industries today, all of these have made the world a wealthier, better place in which people will do things and work at jobs we can scarcely imagine today.”

THE BASIC LAWS OF ECONOMICS

His reference to self-driving cars illustrates that the basic laws of economics have not, in fact, been overturned.

Economist Milton Friedman noted that the focus of all successful economic policy is not to create employment. If that were the case, labor-saving devices would be abolished, so instead of having one person behind the controls of a bulldozer to dig a trench, 100 people could be employed digging trenches.

“But we don’t do that, because most of us understand that the purpose of economic policy is to increase productivity and, therefore, the stock of wealth. And that, in turn, is what creates the wealth that creates avenues for employment,” Stephens explained.

Turning to his second rule that holds if something sounds too good to be true, it probably is, Stephens predicted that the preponderance of self-driving cars is still many, many years away.



Andrew Kitts

Hunt Real Estate Capital

Tanya Hahn

National Church Residences

Doug Himes

National Church Residences

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KEYNOTE PRESENTATION

“Why is that? Because driving depends to a tremendous extent on our intuitions of what another driver might do, and it turns out that programming split-second, intuitive decisions in a manner that is demonstrably safer than driver-reliant cars is a lot harder than the geniuses at Silicon Valley thought it would be,” he reported.

His third point about looking for the common in the exotic, not the exotic in the common, applies to self-driving cars, because while they will be something new in themselves, they will not be anything new in what they essentially are, which is a labor-saving technological advance. Society has been successfully adapting to and benefiting from these advances since the dawn of the Industrial Revolution about 250 years ago.

Moving to the claim that China will soon supersede the American economy, Stephens acknowledged that the Chinese economy since the early 1980s has been growing at a rate between six percent and 12 percent a year, while the American economy has been growing at a rate of between two and three percent a year.

“Even though China started from a much lower economic base,” he said, “those sorts of growth rates seem to guarantee that sooner or later Chinese GDP is bound to overtake ours in terms of sheer size, even if Chinese GDP per capita remains much lower for decades to come.

“But our new commonplace predictions of China’s impending supremacy should raise even more alarms for us, based on my list of how not to go about making predictions. My first law of how not to predict is: Do not mistake a trend for the truth.

“Take the cases of Japan and Europe. What were we missing then when people predicted either Japan or the European Union would overtake us as economic superpowers?” Stephens asked. “We were missing the point of demography. Japan is not growing its population. Europe is not substantially growing its population. In fact, in both cases absolute population is or may soon be shrinking. And it is a basic economic fact that nations that cannot grow their populations will ultimately find it increasingly difficult to expand their economies.”



Matthew Whitlock

Berkshire Residential Investments

Cindy Baier

Brookdale

David Caleca

CS Capital Advisors

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KEYNOTE PRESENTATION

In China during the last five years due to the one-child policy and now the fact that increasing numbers of Chinese women don't want to have children or prefer to have few children, the working-age population is beginning to fall.

"That is the most important development in China, in my view. To get a sense of where they might be going in the future," he advised, "look at that countervailing piece of information, which defies the consensus that so many of you have heard about Chinese trend lines.

"A second point about China. China has borrowed a page from the Soviet Union in a different way, which is very simply that it lies about its statistics and how much its economy is growing. Now, one of the great questions for economic forecasters is just how big is the extent of the lie. They said this year that they are growing by six percent, but it's very hard to say that in an economy of about 1.3 billion people.

"But we do have one insight," Stephens observed. "In 2015, the official Chinese growth rate was seven percent, which is low by Chinese standards, but would be an astonishing growth rate here in the United States. But another point of countervailing data shows Chinese electricity consumption in the year 2015 grew only by 0.7 percent. So it means that our likely sense of China's real growth rate is being overestimated by a factor of as much as seven. Again, remember the rule that if something sounds too good to be true, it probably is."

CHINA'S ACHILLES HEEL

He added that since Xi Jinping became president eight years ago, China has reverted to a command-and-control economy with funds increasingly directed at state-owned enterprises instead of private ones. But despite the utility of state-run and command-and-control economies in wartime, there has never in history been a case in which a command-and-control economy outperformed a market economy over the long term.

"The only way in which the Chinese economy will ultimately outperform America's is if the Chinese open their economy to fair competition," he asserted.

"And the only way they will be able to do that, in the long term, is if they open up their political system, as well, to democratic standards of accountability and a predictable rule of law. Now when that happens, we might be eclipsed eventually by the Chinese, but then at that point we'll have a lot less to worry about," he commented.

Following up on his reference to global warming, Stephens conceded a recent peer-reviewed study estimates that if nothing is done, global sea levels could rise by about two feet by the end of the century. In the most extreme scenarios in the study, sea levels could rise by as much as five feet. As a point of reference, the city of Miami sits about six feet above sea level.

"The key words in this scenario are 'if nothing is done'," he pointed out. "But this gets back to our seventh rule on predictions: Don't bet against humanity's ability to innovate and adapt. In the Punjab, which is India's answer to Iowa as the breadbasket of India, farmers

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KEYNOTE PRESENTATION

started introducing higher-yielding, hardy strains of wheat.

“The result is that India, which had suffered catastrophic famines approximately once every 10 years for most of its history, has not, in fact, had a famine, although it has often had droughts, at any point in its independent history for the past 70, 71 years.

“So the question is, should the challenge of global warming be any different? There are other nations that have dealt with similar challenges,” he said. “If any of you have spent time in the Netherlands, you know that one-third of Holland is actually below sea level. There are large places in Holland that are as much as 22 feet below the sea level. But we do not think of the Netherlands as a postcard for environmental catastrophe.”

America has dramatically reduced the carbon intensity of its economy over the last 10 years, although this wasn’t done by making a conscious decision to deal with the problems of global warming. Rather, the American energy economy has moved from one that is overwhelmingly reliant on coal to one that is increasingly reliant on natural gas, and natural gas emits less CO2 into the air.

“So we’ve been able to meet many of our targets in terms of maintaining or even lowering greenhouse gas emissions, not because we actually actively pursued a climate change policy, but because we took the economically sound opportunities presented by something called fracking. And we’re going to continue to do more of that as our technological capabilities and our economic resources continue to catch up to the scale of the challenge,” Stephens predicted.

Summing up his advice for parsing and questioning forecasts for the future, Stephens maintained that “making extreme predictions may motivate people to action, and maybe that’s well and good, but it won’t necessarily motivate them to take action in the right direction. We do not improve the quality of discussion by arguing that it is the end of the world.

“Much of our social and political life is a constant struggle against the encroachment, and occasionally the tyranny, of superficial thinking. We have a responsibility as thoughtful people and as citizens to resist that kind of thinking,” he added. ■



Kathleen Ryser

Freddie Mac

Kirstin Cook

Freddie Mac



Mark Nelson

United Properties

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SENIORS HOUSING PAC & AWARDS

Advancing ASHA's Policy Priorities

2020 is a year of transition for the Seniors Housing Political Action Committee (SH PAC) as the role of chairman moves from Senior Lifestyle's Jerry Frumm to Discovery Senior Living's Richard Hutchinson.

In his parting comments, Frumm said "the PAC works hand-in-glove with the ASHA public policy committee, which I also had the great pleasure of chairing for the last couple of years.

"Talk to us about what's impacting your business. We spent a lot of time talking about workforce issues, which are very, very high on the list for most of us. And I'm really excited about some of the things that we're going to be doing going forward, but we do need your help," he added.

Looking back on 2019, Frumm reported the PAC raised \$409,624 in total contributions from 430 individuals with 85 companies. There were 120 participants at the Chairman's Circle level in 2019 contributing between \$2,000 and \$5,000. Chairman's Circle members contributed 91 percent of total SH PAC contributions in 2019.

With support from the PAC, there were a number of advances in ASHA's policy priorities in 2019:

- New tax law clarifications
- Medical expense deduction
- Workforce shortages
- Long-term care financing
- Alzheimer's research
- Regulatory oversight

The 15 Platinum Circle companies, where contributions overall were responsible for \$10,000 or more in fundraising, were:

- Allegro Senior Living
- Capital One
- Hanson Bridgett
- Hawthorn Senior Living
- HealthTrust
- JEA Senior Living
- Koelsch Communities
- Senior Lifestyle
- Senior Living Communities
- Senior Living Investment Brokerage
- Senior Resource Group
- Senior Star
- Trilogy Health Services
- Ventas
- Watermark Retirement Communities

The Top Employee Participation Award went to Senior Star, while Senior Lifestyle took the Top Company Campaign Award for its employees making the largest contribution to the SH PAC. And ProMatura Group won the Chairman's Appreciation Award. ■



Richard Hutchinson

Discovery Senior Living
Seniors Housing PAC Chairman



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Margaret Wylde, Ph.D., ProMatura Group

SENIORS HOUSING OUTLOOK

Sizing up the competitive landscape and the prospects for future growth

Insights from Australia, United Kingdom on appealing to younger residents

After weighing the ability of age-qualified communities to compete in today's market with not only one another, but other alternatives, ProMatura Group's Margaret Wylde went on to explain what communities must do to best position themselves for future growth and success.

She opened by emphasizing that home care is making it more difficult to overcome the longstanding preference for continuing to reside in the house.

While retirement communities are expensive and face extensive barriers to entry, she said, home care may be as fundamental as someone working out of a home or as extensive as a large company with agencies in hundreds of cities across the country.

"Home care is one of our biggest competitors, and it is growing faster than we are," Wylde observed. "So we need to think of ways we can compete with home. It's always been

our competition, but home care is helping it to become even a greater competitor."

Turning to the current state of the U.S. market for age 55+ communities, she maintained that supply is overbuilt and outpaces absorption. Operations are strong, although communities are pricey and over-programmed. Demand is need driven, while occupancy is trending down with high turnover.

"The higher the price, the lower the sense of value for the price paid. And what drives our price is all the amenities that we put in," Wylde noted. "All that non-revenue producing space pushes the price up. But the element of the communities that gives people the greatest sense of value, sense of home, is their residence -- the revenue-producing space.

"We're not necessarily an aspirational move, and that's one thing as an industry we can work on. Occupancies are trending down

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SENIORS HOUSING OUTLOOK

2019 DATA COMPARING THE SIZE AND SCALE OF RETIREMENT COMMUNITIES VERSUS HOME CARE:

	RETIREMENT COMMUNITIES	HOME CARE
Revenue	\$72.0 bn	\$99.4 bn
Growth 2014 – 2019	3.3%	3.7%
Growth 2019 – 2024	2.9%	5.7%
Profit	\$5.6 bn	\$7.1 bn
Businesses	40,000	416,181
Wages	\$27 bn	\$52.5 bn

Source: IBISWorld

with turnover, because we're getting them older and frailer," she added.

RATING THE INDUSTRY

Using a five-star rating, Wylde gave real estate and operations 4.5 stars each. Care came in at 3.5, because "we spend too much time selling care. Everybody knows they need the care, but we're not selling life-style as much as we're selling care. The first thing we need to do is recognize them as a customer and an adult," she contended.

Customer service and overall satisfaction each had three stars, individual lifestyle 2.5 stars, and creating home and value for price paid trailed with two stars each.

Looking at how to attract younger residents and foster a sense of feeling at home, she drew comparisons based on ProMatura research with retirement village residents in Australia and the United Kingdom, and independent living residents in the U.S.

In Australia and the UK, 25 and 17 percent of residents respectively are under age 74 compared to just seven percent in the U.S. In the 75 to 84 age quadrant, this accounts for 41 percent of Australia residents and 38 percent of UK residents, but only 28 percent

in the U.S. Move to the 85-plus age group and 66 percent of U.S. residents fall into this category, while Australia has 33 percent and the UK has 46 percent.

"They capture people at a younger age in both Australia and in the U.K. It's predominantly because in both of those countries," she pointed out, "people own their residences, and they have more single-family home product. Many of them are just small cottages. But they have a center at which they do have assisted living and nursing care."

Asked about their sense of feeling at home, 36 percent of UK residents answered affirmatively compared to 25 percent of U.S. residents. Only seven percent of UK residents do not feel at home, but more than twice as many U.S. resident at 15 percent do not feel at home.

"In response to why do you feel at home, those in the UK basically said because I own my home. The word 'own' showed up more than any other word out of about 2,000-some comments. That may be a model we want to explore more. We're always looking to see what defines home," Wylde commented.

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SENIORS HOUSING OUTLOOK

ProMatura also found that outdoor recreational facilities add to the sense of feeling at home, while the more activities that were on the calendar, the less residents felt at home.

“So the more we take away their own time, the less at home they feel,” she pointed out. “It seems like we need to get to know our customers a tad bit better in terms of what they want to do with their time, how they want to spend their time, and what makes a day have value for them.”

INTANGIBLE ASSETS

Many intangible assets have a significant impact on the success of a community. All are under the control of management and staff, according to Wylde, which means interactions with personnel, the amount of freedom and control residents/customers have, and the friendships they make affect occupancy and monetary performance.

Sales counselors, in particular, are pivotal. Their ability to develop a relationship with the customer, learn about their concerns and offer counsel on how those issues could be solved are attributes correlated with high occupancy and high fees.

“I see three evils in the industry,” she said. “One is we are paternalistic. Two, we are

ageist. Until we get rid of our ageist language, we will never appeal to a younger, more vibrant group of people. We will continue to be need-driven. And then commoditization. We have a lot of product that looks alike. Go online, and the list of services, activities, the dining — it’s the same stuff over and over again.”

She questioned the following assumptions about the priorities for customers 55+ years of age that developers and operators often take for granted:

- Intent on downsizing
- Want everything planned to fill their days
- Prefer a leisure-driven lifestyle
- Do not want to cook
- Want to live with other people their age
- Have as many amenities as possible
- Be near medical care

“We have found almost equal proportions want to downsize, upsize, or move to a residence about the same size as the one in which they live,” she reported. “We also find that the majority of people want to maintain their current lifestyle, do what they want to do when they want to do it, and have a sense of purpose.”



Mark Ivancic
Ryan Companies

Denise deFiebre
Senior Care Development

Brett Mehlman
Senior Care Development

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SENIORS HOUSING OUTLOOK

Wylde cautioned that using a cookie cutter template when developing communities in different markets is fraught with danger.

Characterizing one development approach as generic, she listed the drawbacks: Assumes everyone is the same; based on feasibility study results using secondary data; yields communities that are the same; commoditized product; and must compete on features and price.

A specific development vision revolves around: Identifying the target market; understanding the details of the customer; defines what they want at what price; differentiates product; defines a competitive edge that is difficult to duplicate; and generates prospects.

CONSUMER RESEARCH IMPERATIVE

Conducting consumer research, rather than merely completing a feasibility study, leads to knowing and building what prospects want at a price they will pay. Statistically valid analysis entails educating to share the developer's vision, assessing perceptions of concepts, involving prospects in design of the community, and testing for the percentage who will buy at what price.

"You find people who might consider moving to your property. You introduce them to the

product and run it through a statistical program," she explained. "You assess their perceptions of all of the concepts that you're going to include. They love these, because you ask them to help you build the place where they would want to live. Then you test for the percentage who will buy, and you find out what price they're willing to pay."

To draw younger prospects, Wylde suggested less money should be spent on amenities and more should go into the apartments with larger storage space. "In every study we've done for ASHA," she said, "the apartment and its livability and the comradery and the sense of belonging have the greatest impact on success.

"We all want to belong. We all want to have family. We all want to eat good, even comfort food. We have found flexibility in meal programs typically increases market share and will often attract a younger market. When we're doing a more expensive property in a more urban area, we find quite frequently that having a more flexible meal plan increases market share.

"It pays to know your customers and to learn what they want and what they're willing to pay for," she added. ■



Paul Ciccero

Arena

Mike McMillen

Arena



Deidre Schonfeldt

Hanson Bridgett

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(left to right): **Darin LeGrange, Amy Johnson, Charles Turner, Dave Wessinger**

HEALTH CARE METRICS AND TECHNOLOGY

Harnessing the promise of IT solutions to advance health care metrics

Applying data for early intervention rather than retroactive analysis

The inundation of advances upending health care metrics and technology is accelerating, spawning new opportunities, along with potential drawbacks.

During a panel discussion on tech innovation and its role in senior living, a number of overarching themes emerged. Panelists were Amy Johnson, LifeLoop; Darin LeGrange, Sentrics; and Dave Wessinger, PointClickCare; Charles Turner, KARE, moderated.

GROWTH OF TECH INNOVATION HINGES ON SENIOR LIVING'S ENGAGEMENT, COOPERATION

WESSINGER: Microsoft, Google and Apple don't care about the skilled nursing space, but they really care about the seniors housing space. Every conversation they have is about how many units can we sell through you to seniors? I'd love to tell you it's more than that, but they only want to know how

Panelists

MODERATOR:
CHARLES TURNER
KARE

AMY JOHNSON
LifeLoop

DARIN LEGRANGE
Sentrics

DAVE WESSINGER
PointClickCare

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HEALTHCARE METRICS AND TECHNOLOGY

can we get them wearables? How can we get them phones? My response is are you kidding me?

But if there are startups providing solutions, the worst thing you can do is hold them hostage to customize things for you and not help them get their product ready for the over-all market. If you help them be successful, you'll always be that leader they work with to get their solutions right.

There are more innovations being killed in health care than any other vertical space, and it's for that reason alone. People aren't prepared to take a risk or make the investment and help them move it through to get market fit. They only want to get personal fit, and that absolutely crushes innovation. We see it over and over and over again.

JOHNSON: We have thousands of customer requests. The way we've approached it is just help us build the right thing. Well, that right thing looks different to everybody else, so our job is to sort through all these requests and figure out what problem people are trying to solve. If we would've jumped at all of those customer requests, we would've been out of business a long time ago. When vendors push back, it's more because we're

trying to build the right thing for the industry, not for one customer.

Move beyond emphasizing company-specific tech fixes to broader industry-wide problem solving

WESSINGER: Anybody who has had custom software built for them knows it's generally not very good, and it's very expensive. A lot of times, in the early stages, operators come with "Here's what I need you to do" versus "Here's the problem I'm trying to solve." Those are two very different things for technologists to go and solve for you.

LEGRANGE: Customization kills a software product. If you look at Epic and Cerner, they have two different issues in the market. Epic doesn't customize anything. They install it, you're buying their platform. Cerner got into customization. If anyone is familiar with what's going on with Cerner right now, it's a mess, and it's because they have multiple types of installs out there. It kills even the biggest company. They can't keep up.

DATA NEEDS TO BE DEPLOYED FOR EARLY INTERVENTION RATHER THAN RETROACTIVE ANALYSIS

LEGRANGE: Liability is going to occur because you weren't taking precautions to actually use information. People say no one



Taylor Russ
BOK Financial



Laura Hester
Cedarwood Development



Imran Javaid
BMO Harris Healthcare
Real Estate Finance

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HEALTHCARE METRICS AND TECHNOLOGY

is responding to mom, and you have to go pull data. You pull audit logs and show them here's all the times she pushed the emergency call. But you're retrospectively using data today when everyone's already mad.

What if you actually could prospectively use the same information and be transparent with the family, saying "Hey, this week mom pushed her button 30 times. The average is 1.5. Our response time was five minutes, and the disposition, 90 percent of it, was there was no problem."

Mom might be lonely. She's pushing the button to get someone to come see her. Why don't we intervene? That's a much better conversation with the family than when they show up and are already mad because you're not responding to mom.

TURNER: The argument used to always be if I have this data, and I don't do anything with it, it's going to make me liable. So I'd rather not have the data. This is a real, true case. There was a significant incident, and they brought a lawsuit. One of the arguments of the lawsuit was that this technology exists. You chose not to put it in your building. And that case is still in litigation.

WESSINGER: Ignorance is not a defense for negligence. We have a moral and ethical responsibility to take better care of mom in that setting and know what's really happening.

You're going to have to prove that you are taking precautions to reduce your liability. This requires information to say here's how I'm going to manage risk. There's conferences that are nothing but attorneys getting together to figure out how to sue the senior living industry. If you can even get liability insurance to open a new property, you are going to have to prove you are taking precautions with things like fall intervention, fall detection.

OVERCOME FEAR OF THE UNKNOWN

TURNER: The average human being will spend two to three times more time, money and resources protecting their downside than maximizing the upside. You add this regulatory or litigation layer on top of that, and it doesn't necessarily surprise you why operators are risk-averse. Where does innovation come from with the risk of a lawsuit versus actually providing better care or lower expenses?



Aaron D'Costa

Solutions Advisors Group

Janis Ehlers

The Ehlers Group

Kristin Kutac Ward

Solutions Advisors Group

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HEALTHCARE METRICS AND TECHNOLOGY

JOHNSON: One of our big clients has 28 skilled nursing buildings. They use our product all the time, but they never launched the family portion. It was just fear that their staff is not doing their job or that something is going to go wrong. But when you show them the numbers, your staff is actually doing great. It just requires trust. Now they rolled it out to family, and they're having great success. With any technology, it takes time, and you've got to learn how to roll it out the right way, but there's fear of the unknown.

IT, IN MANY CASES, WILL REPLACE THE NEED FOR DOCUMENTATION AND IMPROVE WORKFLOW

TURNER: There are a lot of great technologies out there that have great clinical efficacy. But I don't care how great your clinical outcomes are, if you don't have the data and can't produce the workflow in order to actually make it actionable, it's going to sit on a shelf somewhere or never be used, because you don't have a process for driving results. I love the technology, but you need to know how to operationalize some of this stuff.

LEGRANGE: Technology actually helps through advancing the workflow. It's not requiring someone to say I've got to do this. It literally walks you through what you

need to do, and you can't go to the next task until you do this.

The other thing is infrastructure always gets overlooked, but none of this works unless the infrastructure can support it. We see over-building with people putting fiber all the way to the room. Fiber doesn't need to come all the way into your room. It's overbuilt, but then a lot of communities are under-built that can't support the bandwidth need. That's an investment that has to be made to support any of this.

WESSINGER: You'll have empowered caregivers working with good clinical decision support tools that allow them to direct their time and effort to the right people at the right time. That will become a reality. It'll be very mobile technology for use where they work. It'll be somewhat passive. You won't see it as in-your-face technology. Technically, we'll be much more empowered, and we'll see folks making much better decisions to the benefit of the individuals that live there.

EVOLVING FROM VENDOR STATUS TO BECOME PARTNERS

WESSINGER: If you treat our team well, that's how we become good partners. Just like



Mike Pokora

Willis Towers Watson



Jason Dopoulos

Lancaster Pollard

Jennifer Berland

Hanson Bridgett

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HEALTHCARE METRICS AND TECHNOLOGY

your staff, they're going to go to the wall for you if you treat them well.

Some clients will show up to sign a deal, and you never hear from them again. Then they wonder a year later why they haven't gotten where they need to be. Executive leadership brings accountability to work together to make sure we're connected at multiple levels. That allows everyone to work together and get through things faster.

I hate it when we're told it's your problem. Go solve it and let me know when you're done. And if my team shows up, great, but it's really not my problem.

LEGRANGE: It's a joint problem when technology isn't viewed as a strategic investment. Even hotels use technology strategically to mine data about people's preferences. We need to be able to show ROI, whether it's a cost reduction, new revenue, or better satisfaction. To view tech as a strategic asset, we have to have ROI.

WHAT WILL THE IDEAL SENIOR LIVING COMMUNITY LOOK LIKE IN FIVE YEARS?

LEGRANGE: It's an integrated delivery system. It's somebody taking first-dollar risk on the premium, because I believe that's what's going to save Medicare. Medicare

will not survive with the aging population in the current model. We have to find ways to keep people healthy and well where they are and avoid hospitalizations and high-expense settings. That's our perfect client in five to 10 years. And I think there's going to be a lot more of them in five to 10 years.

The largest player in senior living one day could be Aetna or Humana. It's going to be the insurer. They're going to figure out those are my beneficiaries in the communities. And what better way to manage their health and wellness than underneath my Medicare program?

WESSINGER: You're either taking on risk, or you're being managed by somebody who is. In some way, shape or form that will affect you. I also believe communities' reach will move beyond just their buildings and will extend into the broader community, because of the tools they have, the intelligence they have, and the capabilities they have.

EXPANDING SENIOR LIVING'S REACH TO INCLUDE HOME CARE AND OTHER COMMUNITY-BASED SERVICES

LEGRANGE: We're looking at being able to extend this platform out into the broader community. We're talking about how to bring



Michelle Kelly

National Health Investors

Tod Petty

Lloyd Jones



JR Southerland

Yardi Systems

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HEALTHCARE METRICS AND TECHNOLOGY

people who live at home closer to your community to combat loneliness and allow them to engage, so when they are ready to move into an assisted living community, this might be where they come. Extending engagement platforms, even emergency call, can all be done today through the senior living community. This allows them to address home care as part of their program.

JOHNSON: Building products to support vertical markets is definitely an area that we focus on. Home health just makes sense.

WESSINGER: Everything is moving to the right, meaning if you're in skilled, you're moving to the right with either home health or senior living. It's definitely not going the other way. There are a lot of synergies between those environments. Those that are doing well in home health care tend to be the ones that are tightly coupled with senior living communities. The logistics make a lot of sense. There are stronger partnerships and more ownership moving across the continuum than I've ever seen in the past for those synergy reasons.

Those that are on the bleeding edge are involved in group economics or some sort of network that would allow them to negotiate

as a whole, whether it happens to be a region or an entire state. They say I'll take your money, but I'm taking it for this rate, and I'm going to control it through the continuum. I have partners, or I'll do it myself. I have this quality outcome. And you can't have the conversation if you don't have data today.

You can bring other partners to the table with more data and be held accountable if you support a care model. Those are the ones we see that are having the most success and combining those services. They have relationships with health systems, and believe me, they don't know more about your business than you do. They're looking for somebody to stand up and say I take risk. I know how to do it, and here's how I'm going to perform.

HOW TO ANTICIPATE AND PREPARE FOR THE FUTURE

JOHNSON: It goes back to the partnership discussion. What do you foresee your problems being in three years, and how can we partner and build the right thing, not just for you, but for the industry? We're having conversations with so many different providers to help us with their vision. Every six months we're sitting down with our big clients and



Michele Gipp

Arent Fox

Jill Steinberg

Arent Fox



Brad Dubin

Kandu Capital / Bloom Senior Living

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HEALTHCARE METRICS AND TECHNOLOGY

saying what do you see coming? What are your biggest challenges?" We're not saying we can solve all of them, but we need to understand it. Technology has come a long way, so becoming obsolete or a lack of support are going to be less of an issue.

LEGRANGE: You have to hold us accountable with contractual commitments to advance the technology. There has to be financial reparations for not keeping it current. There are contracts in other industries that do this all the time. It forces the vendor to stay current.

WESSINGER: Most other industries pay a lot more money for technology than you do. As a vertical market, this is a very small, totally addressable market. When you budget, if you're budgeting sub of one percent for technology, you're probably missing the boat. Most are in the six or seven percent range that are moving forward with technology. We're not even close here, and when we talk about getting to two percent it's like a root canal or pulling teeth out. If you look at other industries and how they've moved technology, there is a continued investment there. If you're working with a partner, understand the ownership structure. We continue to

control the business, because private equity doesn't understand the economics of this space. We would be pushed to do very different things. You have to understand what their interests and strategies are. That can change at any time.

TURNER: Software is a lot easier to upgrade than hardware. And you have to have a data strategy. You can buy this sensor technology because it does a really good job, and this nurse call system does a really good job. But at the end of the day, you need some sort of common data model and data hub, so when that hardware piece becomes obsolete, I can get something else that still feeds into my data. I'm still getting the KPIs that I want.

That's where I see technology in our space fail. This may have been cool technology five, 10 years ago, but it's not supported anymore, and it doesn't integrate with anything. I'm going to have to rip and replace all my infrastructure, because it was a standalone technology. Don't buy anything until you figure out how do I really want to measure my business, and how do I keep continuity around my data model? Start buying the technology that feeds into that. That's where so many folks have failed, because they look at everything on a standalone basis. ■



Lisa Widmier

CBRE Capital Markets

Hedy Rubinger

Arnall Golden Gregory



Doug Schiffer

Allegro Senior Living

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WHERE YOU LIVE MATTERS UPDATE

WYLM digital media platform continues upward trajectory in building traffic, generating awareness

Website redesign, new video, community locator tool invigorate consumer outreach

In 2015, the American Seniors Housing Association had recently completed an intensive, multi-faceted strategic planning process with a five-year vision for promoting quality and innovation, advancing research, exchanging strategic business information, and influencing legislative and regulatory matters.

One of the plan's foremost goals was educating the general public on the benefits of senior living and shaping perceptions of the senior living experience.

The platform for this effort was a digital network supporting a website and social media to share resident and family experiences, provide statistical data, and feature research and input from authoritative third-party sources affirming the positive aspects of senior living.

As the fifth year of the Where You Live Matters consumer education initiative gets underway in partnership with senior living marketing firm GlynnDevins, this digital media campaign has achieved a number of notable milestones.

After the January 2016 launch of the Where You Live Matters website, there were 21,050 sessions for the year. Four years later in 2019, that number grew more than 12 times over to 261,772, thanks to ongoing investments in building awareness and driving consumer traffic. Visitors have been engaged and empowered by the extensive selection of video, editorial and infographic content.

With the addition of a community locator tool in April 2018, consumers had another resource to tap into on their senior living journey. Over 4,000 communities with comprehensive contact information for each location are now included. Consumers average well over seven minutes on the locator tool researching various communities.

The Where You Live Matters website went through a major upgrade in 2019 with a comprehensive redesign focused on functional elements, technical improvements and clear calls to action.



Janel Wait
GlynnDevins



A SENIOR LIVING RESOURCE

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WHERE YOU LIVE MATTERS UPDATE

WYLM digital media platform continues upward trajectory in building traffic, generating awareness

The overhaul also included:

- Improved categorization of content
- Most recent and top blog highlights
- Updated information architecture to accommodate future growth
- Decreased bounce rates due to slow page load time

Over 50 percent of Where You Live Matters traffic comes from mobile devices, so the website redesign had a mobile-first emphasis before addressing tablet and desktop formats.

In addition to introducing a new website design, a new video was completed in 2019 and premiered during ASHA's 2020 Annual Meeting shortly before it was added to the Where You Live Matters home page.

Janel Wait and Ashley Alpert from GlynnDevins explained how the video captures snippets of different residents' lives. Each person tells how "they've always been" a certain way. Some are touching, some are funny, and some are surprising. The viewer discovers what gives residents joy and makes them unique can be expressed in a place where they're cared about and feel at home.

The goal is to introduce a compelling, emotional, impactful video that overcomes negative perceptions and opens eyes to the realities of senior living today.

The video is available so ASHA members can edit and revise it for their marketing and promotion campaigns. It can be used by sales and marketing teams, adapted to include community and/or company logos at the end, added to member websites, and used on members' social media channels.

Where You Live Matters helps sales teams provide prospects with unbiased, research-based information on the benefits and value of living at a senior living community. By providing ASHA with contact information to identify the primary sales and/or marketing executive at member organizations, marketing and sales teams can access new research, videos, checklists, news stories and trends to use in their marketing and sales efforts.

To receive regularly scheduled updates and recommendations on how Where You Live Matters can help build vital, trusting relationships with prospects, email ASHA's Megs Bertoni at mbertoni@seniorshousing.org to provide contact information for your primary sales/marketing executive. ■



Ashley Alpert

GlynnDevins



A SENIOR LIVING RESOURCE

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(left to right): **Jonathan Barbieri**, **Jamison Gosselin**, **Christy Van Der Westhuizen**, **Meghan Lublin**

PRODUCING DIGITAL MARKETING ROI

Generating, demonstrating ROI for digital marketing investments

Tracking websites, SEO, digital advertising and social media

Return on investment (ROI) from marketing spend overall, and from digital channel expenditures in particular, always draws considerable scrutiny as annual budgets take shape and results are tracked throughout the year.

This oversight and measurement typically revolves around:

- Productivity of various lead sources in the promotional mix
- Budget and spend commitments
- Prioritizing initiatives within the overall marketing program
- Determining whether senior living's marketing spend is sufficient compared to mainstream marketing practices
- Assessing if too much emphasis is placed on the sales function without sufficient support from marketing

Marketing leaders from four organizations traded perspectives on balancing strategic and tactical investments to maximize

Panelists

MODERATOR:
JAMISON GOSSELIN
G5 Digital Marketing

JONATHAN BARBIERI
The Hearth Communities

MEGHAN LUBLIN
Sunrise Senior Living

CHRISTY VAN DER WESTHUIZEN
MBK Senior Living

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marketing's impact and fully leverage digital's outreach potential. The participants were Jonathan Barbieri, The Hearth Communities; Meghan Lublin, Sunrise Senior Living; and Christy Van Der Westhuizen, MBK Senior Living. Jamison Gosselin, G5 Digital Marketing, moderated.

GOSSELIN: There's a lot of different ways to look at ROI in the senior living space. It could be move-ins. It could be the conversion rates. It could be a cost per lead or a cost per move-in. Sales teams, the money you're spending on a sales force and sales enablement strategy, and sales training also come into this. And then you're also talking about your Internet listing services.

Meghan, how do you measure ROI on your marketing spend and are there any particular systems or methods that you're using today?

LUBLIN: It is a tricky question, particularly in our business where the life cycle of a lead is so long. It's not consumer packaged goods, where you conduct marketing and someone purchases a product. But we do talk about how much money did we put in and how many move-ins did we end up getting.

We can say we're investing hundreds of thousands of dollars into Google. It's

generating tens of thousands of leads. We have a conversion ratio of X, so you can expect that we're going to get about 300 move-ins from that. But that's only part of this story. There are so many other elements that went into shaping a person's decision on whether or not they even wanted to visit our website before we get to have a conversation with them.

The very best way we can measure ROI is when we focus on digital. We do have our leads automatically populating in our CRM, so we can at least have some great data right off the bat. The more data, the better. Trends are still a big part of the story and will help us shape where we can put more money, what's working, and where we can pull back.

We have 330 communities. What works in one market may not work in another. We know that in certain markets we have to invest more in our relationship-building with local businesses or health providers. We're still going to see it come through the Internet usually, but we need attribution modeling to start to gauge what is working best.

My two tips are: Do not fall into the CPL trap, which is how much was the cost per lead,



Lynn Wallace

Retirement Center Management

James Gray

Bridgewood Property Company

Steve Blazejewski

PGIM Real Estate

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because, again, just because you're buying junk, it doesn't make it valuable to your business. Dollars can equal volume. Volume isn't always great. As long as it's quality, then you're onto something.

And my other tip is don't follow the same formula every time to get your answer. Tag everything you can possibly tag when you're doing things like direct mail, when conversations are happening with the director of sales. As much as we can track, the better we're going to have insights into that full journey of the customer.

VAN DER WESTHUIZEN: It's incredibly important to track everything you're doing, such as using a unique phone number, so when the lead comes in it's attributed correctly. It's important for us to figure out where our money is going and what bucket it is part of.

We have a corporate director of marketing. Her main focus is we need to get more impressions and more clicks and more users. And then the sales portion comes into focus for me. We're looking at how many inquiries are we getting from that? Are they all qualified? And then let's talk about how many tours we're getting, how many move-ins

we're getting. We do look at that conversion rate quite a bit.

A trend is not necessarily truth, but it does give you a good indicator about what's going on. Is it a people problem? Is it a process problem? We take a good, organic look to make sure we're getting the phone to ring or getting the Contact Us forms and being able to attribute them in the correct category. And we make sure the people process of the sales-qualified leads is top notch. We spend a lot of time on both of those pieces of the puzzle.

BARBIERI: I tend to be a numbers guy, so I want to start with what's the end goal? How much revenue do we need? How many beds do we need to fill? And how can I, with a scientific or mathematical formula, predict these things so we can forecast and course correct?

We split the sales funnel into two pieces to align our resources: Marketing qualified leads and sales qualified leads. Within this funnel, the soft facts have become fewer, and the hard facts that you can actually look at, you can touch, and from my perspective put into a mathematical equation to predict things have become powerful. And then you marry that with the fast-paced



Lundat Kassa

Bellwether Enterprise

Tom Vellis

Spring Hills Senior Communities

Alex Markowits

Spring Hills Senior Communities

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changes with which you can make a lot of the digital placements.

With that mathematical equation, we've found it to be not only accurate, but a feed-back loop that allows for course correction, not only in the direction of the business, but also in the data that we're aggregating. We can change, we can course correct in what we're gathering and, therefore, learn more and really create some good returns there.

VAN DER WESTHUIZEN: The ability to course correct very quickly without a lot of layers of decision-making is crucial. When you're starting to see trends and starting to see changes, the ability to switch game plans or increase one thing and decrease another is crucial to be as effective as possible.

GOSSELIN: We're not going to get into a scientific conversation on MTA right now, but I think multi-touch attribution applies to the customer journey. We talk about a customer journey and always said it's this, then they move to this, then they move to this, then they move to this, and then they move to this, and then they move in. But it doesn't happen that way, does it? It's a very difficult thing to have to attribute people.

We at G5, and through our systems we've developed, have seen there's 10.7 touch points along the way of that consumer journey. They're coming into certain areas, they're coming out. They will walk back in, they come out. Qualitatively, what part of the customer journey do you think about when you want to spend dollars in that customer journey?

LUBLIN: The most obvious part is we have to show up online. That's where people are starting their research. They may not decide to convert in that very moment, but you have to be there. You also have to be known in your market. Your reputation has to precede you, so you need to figure out the right balance to promote awareness around your community and what you're all about. Some of that is branding. Some of that is advertising, which we'll talk about later. How much is too much? It is a little bit more difficult to measure. So it's trying to strike a balance for both.

So much of where we're moving in our investment is data tracking. Before when we would say a Google ad converted, it could be 18 different versions of an ad and we wouldn't know which one was the source of the lead. What happened to the person who



Michael Schonbrun

Balfour Senior Living

Phill Barklow

Balfour Senior Living



Barr Levy

Sabra Health Care REIT

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clicked on that ad? Did they come in for a tour, or are you just talking to them over the phone and nurturing them for six months? When they came in for a tour, then what? Are they shopping other people?

We know the majority of our move-ins happen within 90 days of them contacting us. And then we have this long stretch, and then we have another pop of move-ins after that. Well, it's because often they have an event. They've started the conversation, they go dark for a while, and then somebody has something happen, and they say we can't put it off anymore.

Thinking about our spend, we want to understand what's happening in that dark period. It's those people that we need to nurture, when they don't think they're ready yet, with resources to stay in touch with them, keep top of mind, and then ultimately be their choice when it is time.

VAN DER WESTHUIZEN: That's why marketing automation platforms are important right now to make sure we're touching our prospects and staying top of mind through different educational pieces, in addition to so many other things that marketing automation can do. We're working toward that multi-touch

and utilizing marketing automation platforms to remain top of mind.

BARBIERI: I completely agree. I call it the Kohl's method for us. Does anybody get Kohl's Cash in their email? You just ignore it until you don't, right? Until you need to go buy something, and you go to Kohl's to save 20 percent.

With that methodology, we've taken the leads and tried to allocate them into different buckets. What's the value of a particular lead? If they move in within the first 90 days, obviously we know the value. It was quick, and now they're part of our community. But it's the leads that we want to measure a little further out, and with technology, you can do that effectively.

We've been able to manage a much larger base of leads in a higher-quality format, and then value their engagement via lead scoring through this process to then identify back to the team when's the appropriate time to engage. Because nobody wants to be annoying to a consumer who's not ready for that. You want to find that right time.

You can forecast, again, with some surprising accuracy what these leads are going to do, and it really goes back to that marketing



Denise McQuaide

Benchmark Senior Living



Grant Saunders

KeyBank Real Estate Capital

Tim Robeson

PGIM Real Estate

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automation on the front end. When we've taken that information, we not only follow up with what somebody's leaving in terms of their email address or their phone number, but we then affix that to their IP address. We can see when they're visiting us.

You're creating content to engage the consumer that's helpful at the appropriate time. That engagement becomes more personalized to the individual. And then based on their click activity, their visits back to the website, you know now is an appropriate time to call them.

LUBLIN: We have extensive training on our CRM. We start tracking them when we hear from them. And it doesn't always have to be when they're having a conversation. That's where we are getting way more sophisticated on what their experience is like with the website.

The beauty is we have all of that automated. The individual salesperson doesn't have to do anything. Those behaviors, those interactions with our website are getting recorded without needing a human to track them. Where we need the human is to dig deeper.

They're making an informed decision to commit to talking to you. Where we need better data is that part of it. Before we even hear from them, we need to start learning better about what's going on in their brain. Are they talking to a doctor and talking about symptoms? Are they talking to a neighbor that says, "You know what? My mom was really happy living at that community?" Were they researching? Were they dealing with lead aggregators, where they see A Place for Mom commercial and thought, "Well, maybe

I'll get some advice from them. I'm not ready, but we'll just start the conversation."

So back to the CRM. Number one, having a tool that can do a lot of the work for you in an automated fashion is incredibly important. And number two, well-trained salespeople can maximize their interaction with that sales tool, and they understand the value of good data being put in.

GOSSELIN: When you think about the promotional mix, which of your marketing programs do you think provides a good return on investment?

BARBIERI: We moved pretty quickly into marketing automation and managing data as effectively as possible to reach that end goal, occupancy and revenue. In doing so, we made the strategic decision to strip out several programs. I call them traditional marketing. Anything printed we don't do. Anything mailed, unless it's a bill, we don't do. It allowed us to focus more aggressively on the things we could adjust on a daily basis and then measure very quickly.

What we found insightful was the digital aspect was extremely productive for us. Because of the amount of information it inherently came with, as well as our speed to understand all aspects of that lead, it was incredibly valuable. We have the ability to follow up with those specific leads in more of an automated fashion, so we can embrace that consumer on a continual basis and let them guide the journey. That's where we put a huge emphasis.

We've seen about a 15 percent increase in our web conversion specifically, and that's where we've seen the biggest and the most pronounced increase in productivity, as well

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as performance. If you're searching online, you can type in senior living, and it may be a critical moment in your life and it may not, but our ability to understand from that point forward what that consumer is telling us aligns our teams very quickly. By doing that, it allowed us to scale pretty dramatically to a much larger reach.

We want quality leads, but we understand that not everybody is ready. We want to fill that sales funnel with people we can manage effectively and then focus on the people we believe are in that 30- to 90-day window.

VAN DER WESTHUIZEN: We still do traditional print advertising. My favorite is the double-sided inserts that fall out of the Sunday paper when our potential residents or family members open them. Especially important is the call to action. Is it an event, or is it something to draw them to your community?

Direct mail has worked great in some of our markets. In my previous life we had a community that was struggling in the Las Vegas market. We started doing direct mail, obviously to qualified individuals. We had an amazing response rate, but it was based on the call to action, as well as what the

event was. It was a very attractive event for people who were looking for the independent living situation.

We believe in some of the traditional advertising sources, yet at MBK 30 percent of our leads come from our website. That is our top one, so we're not ignoring the digital aspect of our spend, but we want to balance it with our traditional advertising at this point, because we are seeing the return on investment there.

GOSSELIN: You said something interesting about the brand aspect of the inserts. One thing we often don't think about in the equation is the more intangible value of brand marketing. That's been the toughest part to try and get attribution for. How do you think about the intangible value of the different marketing programs?

LUBLIN: We've started to find an increase in brand searches. So instead of saying "assisted living in McLean, Virginia," they're searching "Sunrise assisted living in McLean, Virginia." We see people are actually seeking us out by our name. We know they're not seeking us out by our name because of a digital ad. It doesn't line up. They're seeking



Mary Christian

Cushman & Wakefield

Stefan Oh

American Healthcare Investors

Amy Sitzman

Blueprint Healthcare Real Estate Advisors

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us out because they heard about us from someone else. Maybe it's the professionals, maybe it's grassroots, maybe we're part of another church organization and building relationships there.

Sunrise brands all of its communities, for the most part, as a Sunrise. We're doing a brand study where we can do, essentially, a research poll that starts to gauge what is your level of awareness with the following names and start to do brand health assessments. That's the other way we're measuring it.

When I look at this, the mix is much more similar to what Christy described. Our website is still our highest lead source, but in tougher times, like it is now, marketing budgets aren't growing much, so you have to make the call whether I am going to put more into digital, which, frankly, is getting more and more expensive.

The ads you could get on Google two years ago cost double today. That's going to continue to climb, so my dollars don't stretch as far. I can't also then choose to do all this brand building, awareness building, and oh, by the way, let's measure that brand awareness building. It's tough right now. You have to start making some difficult decisions.

GOSSELIN: There's a lot of attention being paid right now to the Internet listing services like A Place for Mom, etc. What is the opportunity cost if you don't use them? Or if you do use them, what's the opportunity cost for using them? Where could you otherwise use that money? When you think about the return on investment from Internet listing services, what's your perspective?

VAN DER WESTHUIZEN: This is a hot topic. We utilize online lead aggregators and

welcome them. We did a study based on average cost, monthly cost, what care level they were, average length of stay, and we found that the average cost for a lead from one of our online lead aggregators was 3.6 percent. So we feel like it is a pay-for-results.

We don't pay per lead. We pay per move-in. And for us, really looking at where we want to grow, that made sense for us. We are continuing to utilize the online lead aggregators, as well as the mom-and-pop referral agencies. Families are going online, and of course I'd like our website to be number one, but in case someone else beats me out, I want to be considered. We're going to continue to value those relationships and those leads that we get from them.

BARBIERI: For us, it's more of a community-by-community decision, based on the performance, the community, the needs, and then our reach that we can get via our marketing efforts. I try to look at it as an entire mix. If you look at it as a math equation, what do you need to get at the end of the day, how do they fit into there? Do they add or detract? And then if you look at your overall cost of acquisition, is it above or below?

GOSSELIN: We've talked a lot about lead generation, but obviously the sales force comes into play, especially when you start talking about qualification of the lead, moving through to the tour, post-tour activities, and then a move-in. How do you consider sales performance when you think about the overall return on investment for what you're spending on leads and then how would you consider the cost of conversion when it comes to sales?

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VAN DER WESTHUIZEN: We're always evaluating our sales effectiveness, always looking at inquiry-to-tour, tour-to-move-in. We're looking at their outside sales efforts, as well. We're also looking at the number of leads that are received from professional referral sources.

We mystery shop our folks via phone and in person, and those are incredibly important to evaluate the success of our sales team. You can't have sales without marketing, and you can't have marketing without sales. They have to be married to each other.

BARBIERI: I completely agree. One of the things we changed a little bit is we've added an earlier stage for many consumers. We've been directing people to a secondary sales force, which is virtual. We found that consumers want to engage in text and chat. And sometimes, whether it's the emotional state they're in, maybe it's the time of day, they just really aren't ready to have that conversation.

By directing people there, we've seen two things happen. The leads coming from those sources have increased dramatically. And then when we do a feedback and actually engage the consumer, we do a

questionnaire after they wind up joining our community. It is one of the areas that they give us the best feedback about, because I call it meeting somebody where they are if they're not ready to have that conversation.

GOSSELIN: Meghan, is there anything that you are working on today at Sunrise from a marketing or sales perspective that you see as being very valuable in terms of showcasing ROI or producing ROI?

LUBLIN: We've talked a lot about marketing automation. In most cases, it's a tool that you can put into your system so it's a keep-in-touch, keep-in-mind type of resource. We certainly have marketing automation in place. We have a great CRM in place. We have great salespeople in place. But they don't all connect. You end up having all these different reports, and you're trying to connect the dots. We've taken great steps to have the systems talk to each other. Our next step is data scrubbing so we can move to a lead-scoring model.

Lead scoring can be rules-based, so A plus B equals C. Or you can have a much more AI-focused lead-scoring resource. In that case, it would take all of the data you start feeding to it over a period of time



Steve Levy

Senior Lifestyle

Kathryn Sweeney

Blue Moon Capital Partners

Jon DeLuca

Senior Lifestyle

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and start to develop a probability of these leads converting.

We're currently working on trying to design a way of giving us better insight and learning when we're putting all of this money into these channels. We're not on TV, and we don't do a ton of print advertising, because, again, it's costly, but we need to understand what it's doing for us. That's what I'm most excited about right now.

BARBIERI: Marketing automation is the wave of the future. I was looking at a research paper from Deloitte that said over the next three years the industry should expect to increase their spend here by 200 percent. I know that may sound dramatic, but it's powerful when you see the productivity there. As a company that is now on a journey to being more sophisticated, with each step forward the amount of insights you get and the amount of productivity, which then generates actionable items, which generates revenue, is right there. It's not like delayed gratification.

VAN DER WESTHUIZEN: We are in the thick of things with changing our CRM with a marketing automation platform attached to it. That was really important for us. We also

have started 24/7 live web chat, as well, to engage with our website visitors. We've also done an online care assessment tool to engage and get folks unstuck in figuring out what the next step is and what their options are. We've rolled out a lot of things in the past seven or eight months, and then changing CRMs and rolling that out is the next investment that we're making in our marketing and sales efforts. Not for the faint of heart, that's for sure.

GOSSELIN: How do you look at pilots, and when you do you say, "Yeah, let's go nationwide or portfolio-wide, or let's shut this one down."

LUBLIN: We've done a couple of different pilots. For the most part, usually it starts with a few communities. But we did a big test in the D.C., Maryland and Virginia market on a big digital ad push at once. We knew search volume would go up, but as we talked about earlier, more money doesn't just equal more leads or qualified leads. We saw the volume coming in, but you have to give it time to see if it's quality or not.

What we found was Maryland produced a ton of qualified leads. Virginia produced a ton of junk. So do you just give up on



Richard Nix
Yardi Systems



Talya Nevo-Hacohen
Sabra Heath Care REIT

Lukas Hartwich
Green Street Advisors

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Virginia? We can't. We have a ton of buildings there. We have to crack that nut and figure out why was the exact same methodology working 10 miles over a big bridge and not working in Virginia? We're still in this pilot mode of trying to figure out what to do with some of this information. We want to continue it with Maryland, but what are we going to do about Virginia?

BARBIERI: When you're spending a lot of time in digital, digital doesn't always perform the same way. Things are changing on the background of the algorithm. Your spend could be different. Your word choice could be different. I tend to think some of it just has to be an embedded algorithm. I've seen that more in the social media spend. We've gone more heavy into social media for lead development, because it's less expensive than Google, and it does have some merit, especially if you can create a good brand strategy and storyline around it.

VAN DER WESTHUIZEN: Pilots are very challenging for the community teams, because we're already asking them to do so much, and then we're adding something new and training them on it, with the hope that the pilot will go well and will move forward

company-wide, but knowing that may all be for naught. Finding the right teams to pilot is really crucial.

A lot of times the top-performing teams are in multiple pilots among multiple disciplines, because they're so reliable, they're so dependable. There tends to be five or 10 communities who are pilot-heavy. Make sure that when you do a pilot, you're giving it equally across your portfolio, as opposed to just picking the obvious choices.

GOSSELIN: How do you feel about putting pricing on your websites?

VAN DER WESTHUIZEN: We do. We have our starting-at rates for all of our communities.

BARBIERI: We don't, but we will. It adds transparency. They're going to get there anyway.

LUBLIN: We're piloting it. We have an internal struggle with it, to some degree. They can get the information through places like A Place for Mom. We want them to come to us.

We don't want to lose the opportunity to have the conversation before somebody sees a price. We know in certain markets, if they're doing cost comparison only, that's a risk for us. At the same time, we want to



Kevin McMeen

MidCap Financial Services

Joe Weisenburger

Welltower



Allison Holland

JLL

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meet customers where they are. And frankly, if that's what they're coming to find out first and foremost, we should be honest about what we cost.

GOSSELIN: A lot of leads come from adult children. How do you target the adult children in a meaningful way?

LUBLIN: Facebook will give you a ton of information. For social media in particular, you can access demographic information, so ads are served to people that fall within those demographics. You can purchase lists and access it that way, as well. I would say, for us, the best way to do it is to become a part of the local fabric of the community. It's much more authentic than the generic postcard people get in the mail.

BARBIERI: That's related to push marketing. For pull marketing, you have to have the right keywords on your websites so it's keyword-optimized.

VAN DER WESTHUIZEN: We've done some purchased email lists, based on demographics. MBK is moving forward with a resident and family referral program. We're trying to target adult children, but what a great, awesome experience if the adult child tells their friends and family about what a great experience that they've had. We're trying to reach the adult children through resident and family referrals at this point.

GOSSELIN: Are you looking at marketing analytics? And if so, what specifically are you looking for in terms of the quality of that marketing analytics?

VAN DER WESTHUIZEN: We are looking at business intelligence platforms to pull all the data together. We probably use

10 different systems that don't necessarily talk to each other. We need to pull it into one dashboard that has everything we need. I'd like to be there by the end of the year, so we can make better holistic decisions, based on a lot of intelligence as opposed to one silo.

LUBLIN: It's the most important thing we're working on right now. But, again, it's at what expense? We're taking antiquated resources and trying to retrofit them with plug-ins to give us the data we need. That's probably the biggest area where I personally am focused.

BARBIERI: We wanted to get there, but the question was how to pay for it. Therein lies the reason why we got rid of a lot of print. We have an integrated business intelligence tool in our CRM system, and it pulls information from our website, email and most every source. It let us save further money and then reallocate the money.

We've been able to be more effective with our spend and more proactive with our spend. So, not just reacting to what the conditions are in the marketplace, but also being able to predict where we want to be. Then the question becomes, if it's an over-bedded marketplace, how do you get a more aggressive share of that population? By having that insight, you can then predict where you're going to go and, therefore, allocate the resources. Or if you do have to blow your budget apart, at least explain to somebody why you're doing it. ■

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Jeanne McGlynn Delgado, Vice President of Government Affairs for the American Seniors Housing Association

LEGISLATIVE UPDATE

Legislation to overcome workforce shortage tops policy priorities for 2020

Options include immigration reform, apprenticeship programs and reforming visa programs

A year-end breakthrough in an otherwise uneventful 2019 opened the way for Congress' passage of a massive \$1.4 trillion spending package, adding almost \$50 billion in new spending. It also extended dozens of tax credits and incentives.

"Throughout the whole year, it seemed like Congress lived up to its reputation as a do-nothing Congress. But given deadlines and the threat of a government shut-down with the holidays upon them, they moved into action," said Jeanne McGlynn

2019 APPROPRIATIONS PACKAGE

- Funding for the government through September 2020
- A two-year extension of the medical expense deduction 7.5 percent income threshold
- A \$350 million increase in Alzheimer's research funding
- The SECURE Act, providing retirement savings incentives
- NFIP and TRIA extensions
- Medicaid Spousal Impoverishment Protections, repeal of Cadillac tax, etc.

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LEGISLATIVE UPDATE

Delgado, Vice President of Government Affairs for the American Seniors Housing Association (ASHA).

As 2020 gets underway, McGlynn Delgado noted that the year's upcoming slate of elections have the Democratic presidential primaries running from February to June. In the Senate, one-third of the seats held by 23 Republicans, 12 Democrats and two open will be up for re-election, along with all 435 seats in the House.

"There will be a lot of activity and fundraising with a need for PAC dollars so we can help folks that are supportive of our industry stay in office," she observed.

Congress' agenda for the year will center on 2021 appropriations, expiring tax provisions, health care including drug pricing and surprise billing, and judicial nominations.

Zeroing in on ASHA's priorities for 2020, she said the senior living workforce shortage tops the list. "Our industry is hard hit, because we're among what's considered the fastest growing job category in the country. When the Bureau of Labor Statistics puts out their annual list of where the fastest growing jobs are, the number two, three and four

positions are all direct care workers such as home health care aides and CNAs."

She cited U.S. Department of Labor statistics showing the U.S. economy had 7.4 million job openings in June 2019, but only six million people were looking for work. Furthermore, in 2015 there was a demand for approximately 2.3 million paid direct care workers.

Based on projected demand, by 2030 an estimated 3.4 million direct care workers will be needed to work in long-term services and supports settings, according to the Department of Health and Human Services. Federal policy options for overcoming this workforce shortage include immigration reform, promoting apprenticeship programs, and reforming current visa programs.

"We're taking a hard look at legislation that touches on the workforce shortage. There are a lot of new training programs and new funding," McGlynn Delgado reported. "The Department of Labor has an apprenticeship program, and we know at least two of our member companies have been approved for registered apprenticeship programs for CNAs.



Camilla Burke

Cappella Living Solutions



Wayne Kaplan

Premier Senior Living

Mike Goldberg

Venue Capital

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LEGISLATIVE UPDATE

“There’s bipartisan legislation that will revise how a Pell Grant can be used. Instead of simply covering college tuition, it could be used for what they deem to be training programs in workforce shortage areas or in high-skilled positions. And we can’t ignore immigration reform, which is certainly a way to address this in terms of numbers. We are a part of a larger coalition that’s working to enact reasonable immigration reform.

“A bill that’s been introduced in the House would create what they call a lesser-skilled visa category that would fit nicely in the direct caregiver job description. It’s a small-scale program. The number of visas would be approximately 65,000 to 85,000 a year servicing all industries,” she added.

This House bill, H.R. 1740, provides a platform for the industry to talk about labor shortages in senior living and calls for reasonable immigration reform. It recognizes the lack of U.S. visa programs covering the year-round non-agricultural, less-skilled sector; ensures U.S. workers are not displaced by foreign workers; provides all workers with the same labor law protections;

and strengthens national security by providing for the screening of foreign workers.

Long-term care financing is another focal point for 2020. According to researchers, 24 percent of Baby Boomers have no retirement savings. Of the 55 percent that have some savings, 42 percent of those have less than \$100,000.

There will be 14.4 million middle income seniors in 2020, and 60 percent will have mobility limitations and 20 percent will have high health care and functional needs. Projections indicate 54 percent of these seniors will not have sufficient resources to pay for seniors housing.

“We’re working with Senator Toomey from Pennsylvania on a bill that will allow you to make tax-free, penalty-free withdrawals from your 401(k) to buy long-term care insurance. The long-term care insurance market has dried up, for the most part. When you go from over 100 carriers in 2004 to less than 12 today, you know there’s a problem. As a result, what is out there is very expensive. It’s important to encourage any efforts to energize that product,” she commented.



Brian Sunday

AEW Capital Management

Jack Lewin

M&T Bank

Jeff Erhardt

White Oak Healthcare REIT

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LEGISLATIVE UPDATE

Turning to health care delivery in assisted living and independent living, McGlynn Delgado pointed out how Medicare Advantage (MA) rule changes have created an opportunity for the senior living industry. Plans now have the flexibility to include supportive services, opening the door to innovative business collaborations.

ASHA has a research Initiative underway with Anne Tumlinson Innovations (ATI) to prepare a two-phased educational program to not only inform ASHA members of the near and long-term opportunities related to MA plans, but also explain how to engage with MA plans, how to form MA plans, and how to position your company to provide these new benefits.

“We’ve hired Anne Tumlinson, who is an expert on Medicare Advantage. She put together a toolkit that we will release in two webinars. They take you through the process of how you need to prepare for reaching out to plans if you want to participate in them, or if you just want to see what’s in your area,” she added.

ASHA continues to support funding for Alzheimer’s research, recognizing this is

the most expensive disease in America. In 2018, the cost of care was estimated at \$277 billion (\$186 billion is the cost to Medicare and Medicaid, and \$60 billion is for out-of-pocket costs).

There are 5.7 million Americans living with Alzheimer’s today. That number will jump to 7.1 million by 2025, and if no cure or treatment is discovered by 2050, that number grows to 13.8 million.

ASHA partners with the Alzheimer’s Association to support their advocacy efforts to secure NIH funding for Alzheimer’s research and worked together to back the Senate Labor-HHS Appropriations Subcommittee’s proposal for a \$350 million increase in NIH research for fiscal year 2020.

McGlynn Delgado closed by stressing that “we need to get out there and educate Congress about who we are. We are someone’s home. On the Hill, they want to come up with anything they can and make sure people can age in place and stay at home. Well, they don’t know — or they don’t understand — that we offer that as well.” ■



Steven Levin

Hana 2.0 Property Group

Alice Katz

The Vinca Group

James Palda

Steadfast Companies

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(left to right): **Adam Kaplan, Wendy Nowokunski, David Barnes, Alan Butler, Jesse Jantzen**

CEO DISCUSSION

Transcending tumultuous times with new initiatives for a new era

Looking ahead at consumer preference shifts and the promise of technology

Guiding senior living communities with incisive foresight and a poised, steady hand calls for transcending what in recent years has been a persistent series of fundamental, pervasive challenges to growth and prosperity.

The list is all too familiar:

- Moving beyond recruitment to build career and leadership opportunities
- Offsetting rising labor costs and wage compression
- Anticipating upcoming shifts in consumer preferences
- Harnessing the elusive promise of technology
- Offering a compelling alternative to remaining in the house
- Melding hospitality with health care

CEOs from six senior living organizations explained how they are strategizing and following through to position themselves for future success in the face of these

Panelists

MODERATOR:

ADAM KAPLAN

Solera Senior Living

DAVID BARNES

Watermark Retirement Communities

ALAN BUTLER

Erickson Living

JESSE JANTZEN

Lifespace Communities
(formerly of Lutheran
Life Communities)

WENDY NOWOKUNSKI

The Northbridge Companies

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CEO DISCUSSION

tumultuous times. The participants were: David Barnes, Watermark Retirement Communities; Alan Butler, Erickson Living; Jesse Jantzen, Lutheran Life Communities prior to recently moving to Lifespace Communities; and Wendy Nowokunski, The Northbridge Companies. Adam Kaplan, Solera Senior Living, moderated.

KAPLAN: Can you share your top strategic priority for 2020?

NOWOKUNSKI: I'm sure it's something we all are challenged and faced with, but workforce development is something we are very focused on as a company and have several initiatives which I'm happy to talk about later. But I would say that's our number one focus.

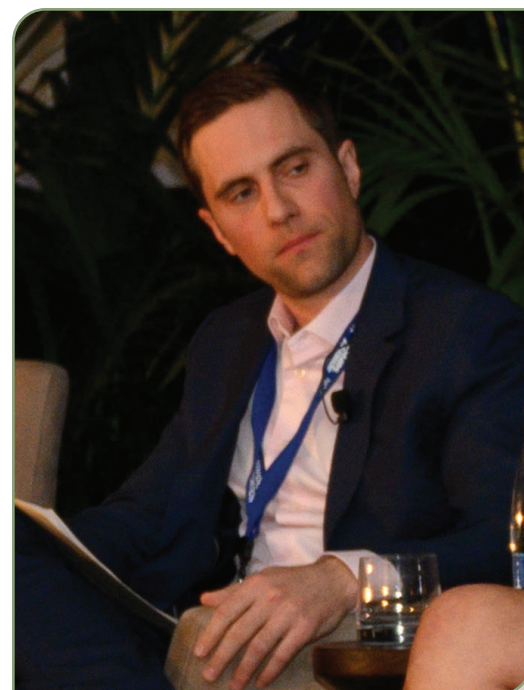
BARNES: I agree. Talent retention, recruiting keeps me up at night. How do you maintain your culture as you grow with a geographically diverse footprint?

BUTLER: Talent is a big part of it, but when you couple that with our growth plan for the next four to five years, it's certainly a challenge.

JANTZEN: I came here two years ago and have really been focused on turnaround and getting some foundational components in place. We've made good progress on that front, so in 2020 we're finishing on getting the foundation in place and looking at opportunities for growth.

KAPLAN: We're in a war for talent across both the front lines and even at senior levels of our organizations. What are a few of the top strategies your organizations are deploying to attract, train, develop and engage your talent?

NOWOKUNSKI: The frontline tends to be more of an issue for us than leadership at the communities. One of the things that we



adam
kaplan

Solera Senior Living

have focused on is what I call the barbell approach. The younger generation and the older generation are the two areas that we're focused on, because there's such a shortage between those ages of 28 to 40.

As an industry, we don't just need to focus on recruitment and retention. We need to focus on developing a whole new workforce out there. That's why we're starting very young with high schools. We have programs

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CEO DISCUSSION

with all of our local high schools. It's actually a program called Seniors to Seniors that we created where high schools require credits for community service.

We've developed a program where students actually come and work with the residents. They get credit. We have graduations. They get interested. They get introduced to what could be a career choice.

On the opposite side, everybody is always talking about how do we serve the age wave. I say let's ride the age wave, because 25 percent of our frontline staff is over the age of 55. That's an intentional focus that we have. It's a huge demographic.

There's a lot of people out there looking for a change or needing to continue to work or wanting to have purpose. We've made great strides in attracting the 55 to 70 staff. Those are two things that we're really focused on.

BUTLER: You have to attract, develop and retain. We created Erickson University with a lot of resources and online training. We bring people into Baltimore on a regular basis, whether that's people on the frontline, in the middle of their career, or even the later part of their careers. We're trying to build programs for their career ladders.

We talk a little bit about the college-educated folks out there, but we have plenty of people without college educations. We need to show them a way that they can grow within our company and build career ladders for them. The back door has to get shut so the front door can be successful.

JANTZEN: As we've shifted the culture as part of our turnaround, we've focused on the leadership. Again, our organization started 127 years ago. Our focus has been on getting the right leadership team in place because it's so crucial. You get the right executive director and then they surround themselves with the right team.

BARNES: We always felt we had a pretty good culture at our leadership level, but how do you really drive it throughout the communities? We launched last year a storytelling platform that we built ourselves called Ripples. The idea is really simple. We can celebrate how associates connect to our mission, how they connect to our operating principles and tell stories that can promulgate across the whole enterprise.

We're trying to celebrate what our associates do quite naturally when they get up. If you can get them to connect to why they're



Matthew Robinson

Longview Senior Housing Advisors

Ann Lacey

Artemis Real Estate Partners



Monique Bimler

KeyBank Real Estate Capital

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CEO DISCUSSION

working for you or why they're working in that building and how we're serving our seniors and our fellow associates, it will take its own momentum and go. That's how we build our culture from the ground up.

KAPLAN: We're seeing changes in minimum wages. States and cities are enacting laws that are going to have significant implications on the services industry as a whole. If you learned that a law was passed in which the federal minimum wage would be set at \$15 as of January 1, 2021, and that it was going to increase significantly above inflation for several years thereafter, what would you do?

BUTLER: It's not a hypothetical, unfortunately. We've been dealing with it in many states. It's not only the minimum wage you have to deal with, but you also have to deal with the wage compression. Obviously if someone's been working with you for 12 years and making \$16, now that you're forced to hire for \$15, you have to deal with it.

It's an economic issue, but it's not just wage that keeps people. You need to create a culture where they want to stay with you, even though maybe they can make 25 cents, 50 cents or a dollar more down the street.

But you've just got to deal with it from an economic perspective. We have to start underwriting deals differently. It's part of our due diligence. We look around at states we're in and what are these schedules and when are they going to happen. You've just to look at it from all different angles.

Certain markets already have enacted increases. To me, it speaks to efficiencies. We have large-scale communities, so we have a little bit of an advantage in some cases, because we can spread it over a



david
barnes

Watermark Retirement
Communities

pretty decent base. But it still says you need to be more efficient. If there's roles that you can automate, you can offset some of the costs with efficiencies.

JANTZEN: We talk to our associates and also talk to the residents. Rather than letting this just come and sneak in under the radar, we are very transparent as to what does this mean.

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CEO DISCUSSION

When we're implementing the efficiencies, it can't be seen as a takeaway from the resident. They're going to say, "Really? You're raising rates and taking away employees that we've known? Why are you eliminating these jobs?" We're engaging them in some of the problem-solving so they own it with us, rather than it being the management, the ownership, against the residents' interests.

NOWOKUNSKI: Our associates are our biggest asset. They are what makes the difference in our residents' lives. We talk to our residents, too, because they know and they value our associates. This has already been enacted in New England. We're already paying above the minimum wage.

I would love to be able to pay them \$20 an hour or whatever, but it comes down to looking at efficiencies. How can we work better? How can we let our residents know that this is happening and this is part of it and how do we work together to create efficiencies? How do we work together to ensure that our associates are being valued and not just monetarily, but through recognition.

JANTZEN: This also has highlighted the benefits component of the work that we do, so now there's more attention to benefits. We're

bringing more attention to make sure that we're competitive in our benefits and not just doing the same old thing.

We bring in PayActiv so they can get cash advances easily. It makes their life better. More flexibility in scheduling. Instead of being rigid and say these are the rotations, we're leveraging software to be able to schedule more effectively. All of those components have helped us to continue that relationship, because there's a lot of markets we're dealing with where we're above that \$15 point.

BUTLER: I would agree about benefits. Wages are one element, but the cost of benefits with 15,000 employees is significant. Managing benefits is almost a full-time job, but certainly something that we have to maintain, as well.

NOWOKUNSKI: Yes.

BARNES: We're hopeful that will attract the Millennials and people that want to be able to get access to their funds more quickly than the typical two-week process.

KAPLAN: We've seen significant shifts in terms of consumer preferences. How are you positioning or repositioning your projects for the next generation of residents



Michael Grust
Senior Resource Group



Judd Harper
The Arbor Company

Scott Larche
Sentio Investments

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CEO DISCUSSION

and influencers in order to deliver a better customer experience?

BARNES: My mom just moved into one of our communities where we launched in 2019 what we call the Elan Collection. These are high-end, high barrier-to-entry markets. The one she just moved into has five dining venues she can select from. She gets a \$500 a month swipe card with flex spending, so she can eat in any of the dining venues. She can do a massage. She can buy a bottle of wine.

She's learned how to spend \$500 very quickly, so we're working on that. We're looking at creating flexible offerings that will resonate with people. Quite frankly, I'm ready to move into one of our Elan Collection buildings right now.

BUTLER: We have some mature communities that have been around for 25 or 30 years, so we're repositioning those older communities, whether that's changing the dining venues, adjusting apartments when repositioning and so forth. We spend significant amounts of time on those mature communities.

Then, you couple that with the newer communities that are more flexible. The units have much more open floor plans. We're building health care units that we call concept units. They're flexible units where you can actually move a wall and make it a two-bedroom very easily as opposed to two one-bedrooms. Creating some flexibility in the new designs is almost the easier part for us.

The harder part is the older communities, going back and redoing things that at the time made all the sense in the world, but 25 years later it's a lot more challenging.



alan
butler

Erickson Living

KAPLAN: About 20, 25 years ago at this meeting when a couple of CEOs were asked would you move into one of your communities, they all said no. How do you restructure them and rebuild and renovate them so they are more appealing to people?

NOWOKUNSKI: You've got to ask your consumer. We do have some older communities, so when we go through a refresh of that community to reposition it, we are

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CEO DISCUSSION

engaging our families, our residents and our associates.

A lot of the things we see are based around lifestyle choices. We could not survive without a pub in our community. We've incorporated it into our dining room. It works very well. We have an artist-in-residence program where we bring professional artists in. We have art studios that are fully-equipped.

My dad lives with us at one of our communities. He's taken over the art studio. He's probably done about 38 pieces since he's been there and had a gallery opening. It's fabulous, so it's really knowing the consumer and building to that.

BUTLER: We've found great benefit in the lifestyle component with different dimensions of wellness. It's not a high-dollar cost, but yet we get a lot of value out of creating a sense of community. They want their friends to come and join and it helps in the occupancy and other efforts, but also it gives them a place that they feel truly is their home. It's been a good return.

KAPLAN: Of all the communities in your portfolio, which community would you want to live in and why?

BARNES: There was a study done 10 or 15 years ago that found the number one preference driver for our prospective residents is choice. Our whole theme 30 years ago was to entertain our residents. We've shifted that dramatically to learning how to engage our residents.

We started something called Watermark University, which is a slight twist on most universities that are for the associates and their skill development and their career paths and all that. We designed Watermark University around the concept that we've got a talented group of people working and living in our communities. So a Watermark University faculty member is going to be an associate. It could be a resident. It could be a family member. They put together their course catalogs for the quarter, and it's all about whatever they're going to teach.

Our associates might teach conversational Greek. I teach fly fishing. We go out in the parking lot, and we catch cars and trees and have a lot of fun. Let's not put the video in and push play. Let's actually get our residents engaged in teaching.



Jeff Zuckerman

Alliance Residential Company

Nick Stahler

Marcus & Millichap

Dale Boyles

Alliance Residential Company

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CEO DISCUSSION

We have a resident who really resisted moving in. His daughter finally just said, “Dad, you’re moving in because you’re taking medications at home. You’re isolating yourself.” He finally moved in. He was a retired professor. The community life director found out and got him to teach a course.

The daughter came in tears three or four months later to the executive director and said, “My dad is a whole new man. He’s now re-engaged in life.” He was teaching Watermark University courses all over the place. So shifting away from entertaining to engaging is another important thing that we’ve been trying to do for the last 15 to 20 years.

BUTLER: You asked the question which community would you live in? It’s like asking which of my three daughters do I love the most? Whether we have a community that’s 30 years old or a new one, at the end of the day we pride ourselves on our culture and what we do in an Erickson community.

You should be able to close your eyes and whether you’re in Colorado or whether you’re in New England or Florida, you should be able to know that you’re in an Erickson community with the quality of the services. We pride ourselves in engaging the residents and making sure their life is enriched.

My parents moved into one of our communities six years ago. It was great from a perspective of a son as opposed to the CEO of the company. I’ll tell you, anybody that has parents living there, they have a direct line to the CEO. My mother thinks I know everything that’s happening every minute of every day at her community, which is not the case.

But it’s nice from a perspective of a child to see what’s happening each day, the



jesse
jantzen

Lifespace
Communities

comfort that you get knowing that they’re taken care of, the socialization. When my mother is sick or my father has an issue, there’s other people that rally around, so we have to continue to stress the cultural side of bringing people together and making sure they’re active and doing all the things that we want to do.

We spend a lot of energy and effort with our medical practices, making sure the wellness

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CEO DISCUSSION

programs continue to evolve. The owner of our company committed \$10 million to wellness initiatives over the next five years. We haven't figured out how to spend it yet, but we're surely going to use it wisely.

KAPLAN: If you could sit down with the CEO or an executive at one of the great technology companies like Amazon, Google or Apple and ask them to develop a game-changing technology for senior living, what would be at the top of your wish list?

BUTLER: Predictive health care. Is there a way to predict health care outcomes? Wouldn't it be nice if you could predict if somebody is likely to have Parkinson's or whatever, and then you can address it early?

JANTZEN: How do you connect sensors and technology that gather data with the machine-learning component, the artificial intelligence? You bring that together and then we're able to anticipate desires, needs and not just on the health care side. So you come to a community to live life to the fullest and not just to be there for some period of time as you're in a diminishing place.

I don't think we're far off. I would love to have what we call a wellbeing index, where a fitness bracelet knows when someone went in and did tai chi. Oh, she's playing bridge. You could build out a chart that would show her different dimensions of wellbeing. Here's where a resident is engaging, or maybe here's where you could work on it a little bit. We've got a couple of vendors that we're working with that have pieces of it, but no one seems to have put it all together quite yet.

NOWOKUNSKI: I would love a wearable that can do things like that. I know this exists,

because at Disney they have this. You're able to pay for things and get into your apartment or your room. It has an emergency call and gathers data. It's so simple, and it's there.

BARNES: The technology is sitting right there. We've got to find someone who can put it all together for us.

KAPLAN: Is there anything anyone on the panel is doing from a technology perspective today that's really making a difference in operations?

BUTLER: Technology is something we think of at three levels: Helping the employee, helping the residents and helping the company. We created a program called Erickson Now, which connects the resident to everything going on in the community, whether that's the dining menu, their medical records, or scheduling a meeting or activity room.

We've spent five or six years developing this and using residents for our beta test. Trust me, as you all know, they have a strong opinion so they tell you when things are good and tell you when things aren't so good. That's something we're the most proud of.

BARNES: With the Elan Collection, we're looking at Circadian lighting and rhythms and how do you use the light that's around you. We've got a vendor that does geo-fencing. They'll launch drones to go look for a resident who may have gotten past the geo-fence. There's a lot of promising technology.

We have a director of innovation we hired three years ago that is doing nothing but scouring and looking at technology. There's so much to choose from. You've got to decide which way you're going to go and invest your dollars wisely.

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CEO DISCUSSION

NOWOKUNSKI: One of the biggest challenges you have is the implementation and the upfront costs. There has to be a cost benefit to it. Given the fact that we tend to be a very high-touch industry, implementation takes longer than what we would hope or intend.

The technologies we're using are mostly related on the operations' side and being able to gather data to be more efficient and effective in providing services. We have tested a tremendous amount of technology with our residents. We've been beta sites for Google on all sorts of different types of programs.

You're absolutely right. The residents are very, very opinionated. We all would be. It's in process, and it will have to be part of the future.

JANTZEN: It's easy to get distracted with the shiny, new technology of the day. We try hard to apply a filter that says how is this an enabler, either for the residents, for our associates, or for the organization. How does it propel us?

KAPLAN: In November, *The Wall Street Journal* published an article, "A Once Hot Bet on Housing for Seniors is Cooling Off." At the most basic level, this article suggests that technology, in tandem with home care, will be extremely disruptive to our industry. How do you see this playing out in senior living?

NOWOKUNSKI: This is not one-size-fits-all. Some people prefer life care communities. Some people prefer assisted living. Some people prefer active adult communities. All of us in this room are probably living in a different environment from each other, so why should seniors be different?

Home care is probably our number-one competitor, because people want to stay



wendy
nowokunski

The Northbridge
Companies

in their homes. But when you look at the impact that socialization has, the ability for people to live together and to have purpose, to get up in the morning and not to be isolated in their homes, that's what makes a difference in senior living as opposed to being in a home care environment.

I saw it with my dad, who is turning 90 this month. He moved in with us at 85. He was diagnosed with Parkinson's at 81. He was on a walker. He wasn't eating right. His Parkinson's was getting the best of him. He is

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CEO DISCUSSION

turning 90. He does not use a walker. He walks up and down the stairs and walks around outside every day. He does art. He writes a journal of free expression, getting the associates and the other residents to contribute articles at 90-years-old.

It does make a difference to live in a community setting. But people are going to choose, and they're going to want options.

BARNES: The big miss on the article was the power of the human connection. I was at our community and someone said your mom is in the dining room. She's 91. I went back to say hello during breakfast and there she is, talking with three new friends she had just met. That would not have happened in her home.

As senior housing leaders, it's our responsibility to create an environment so compelling that when they look at those two choices, they choose us because they can have those kinds of interactions, that kind of engagement.

JANTZEN: Disruption doesn't have to be a death knell. It could be a wake-up call for how do we reinvent ourselves.

BUTLER: At the end of the day, we strongly believe socialization is how people can live a better life. After my mom and dad moved in one of our communities, my dad had a mini-stroke the first three or four months that he was there. My mom doesn't drive all that much, so I look at what would have happened had they been in their home and what actually happened in one of our communities?

My mom calls me and says, "I'm at the hospital with your dad." Then I asked the question, "How did you get there?" "Transportation took me. I'm going to do this and I'm going to leave at 5:00. They're going to pick me up. I'm going to have dinner with my friends. You can, after work, spend the evening with Dad," she said.

What would it have been like had they been at home? Now, my mother doesn't really drive. My dad would be at the hospital. I'd have to try to manage my life, get my mom to and from, worry about what she's doing when she gets home versus spending the time with the person in the hospital, because that's the reality of my parents' lives.



Lucas McCurdy

Bridge the Gap

Joshua Crisp

Bridge the Gap

Sara Mitchell

Bridge the Gap

Phillip McCall

Bridge the Gap

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CEO DISCUSSION

Forward, my dad comes out and starts working out. Hadn't worked out in 20 years. Starts working out. He says, "I have this nice young woman," and the young woman is probably 40-years-old, but whatever. My dad's 85. "She helps me." I said, "What does she do?"

"Well, she has a whole program for me that tells me what to do," he said. "I just go to the gym, and she tells me how to do it. I'm just going to follow. She also helps me with eating. She tells me I can only have dessert two times a week." I said, "Well, Mom's been telling you that for 50 years." He goes, "Well, you know what? I just listen to her and not your mother." So, that's the way it works.

But the long and short of it, now he's lost 20 pounds. He's healthier. He said, "I'm healthier at 80 than I was at 70." I asked the question, "Why wouldn't you have just joined a gym?" He said, "You know, I never wanted to leave your mother. I just walk downstairs or go over to another building. I'm not leaving your mother at a community versus leaving her at home."

To me, getting those messages out to the adult children, as much as it is to the seniors, is our challenge, but the home will always be, to me, the biggest competitor of all these senior homes.

BARNES: During that shift going from home to a retirement community, I was important to make sure mom maintained her independence. My sister and I are teaching my 91-year-old mother how to use Lyft. It's like, "Mom, you live in a retirement community, but that doesn't mean you have to stay inside the walls of the retirement community. Take a Lyft. Go downtown and watch a play. You

used to do that. Six months ago, you did that in your home. Why are you stopping that now?" We've been really working with her on maintaining independence inside a retirement community.

KAPLAN: Are you investing equally in your hospitality and health care capabilities, or are you investing in one area more than the other?

JANTZEN: Our organization has been around for a long, long time. We've done health care really well at the expense of not focusing on hospitality. In the last couple of years, we've been saying how do we not lose what we do well from the health care component and how do we bring in this other dimension, because it's about the life style as a community. We're seeing that it's both. We can't trade off and say we're leaving the health care to focus just on the life style. We have to be able to do both.

BUTLER: The size of our company with the amount of our independent living units absolutely speaks to the hospitality. When I think of hospitality, I think of culture. But we have an entire medical practice with hundreds of people that work in that one area of our business. It's something that we're proud of, something that we've had for many years.

We see it as both are equally important. I couldn't pick one over the other. Obviously, people come in the front door. They want their life style. They want all of the pieces of hospitality, but they also come in knowing the health care is there, whether that's home care, the medical centers, the assisted and memory care and so forth. To me, it's equal.

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CEO DISCUSSION

JANTZEN: I look at it as they're both ends to a means. When I hear stories of Wendy's father doing art, he may need strong health care in order to do that. He may need an environment of hospitality. He may need all sorts of things to do that, but in the end you've got to have those building blocks.

KAPLAN: Is there anything that your organization is doing proactively today or looking at in the future in order to make the product more affordable for the consumer?

BUTLER: We're doing a tremendous amount of development. I look back 10 years ago to what it cost to build a resident building or a health center and at what it is today, and it's a significant increase. It used to be 12 months, let's say, to build a 100-unit resident building. It can take 20 months today.

The general contractors were telling us consistently that it's the lack of subcontractors. The supply just isn't there from the bad times of '08 or '09, but that's money. If you do 10 buildings and it takes you an extra five or six months, there's a cost component of time.

Certainly the rising cost of construction is outpacing anything that we can deal with on entrance fees, because entrance fees aren't following the cost of construction. We have a lot of challenges in terms of how to manage it. I call it square foot creep. Every unit wants to get bigger and bigger and bigger and bigger. Again, sometimes that's the times that we're dealing with. The market is pretty strong, so people are paying for the 1900-square-foot units. I always ask the question, "What's going to happen when we hit a wall? Is the 1200-unit, 1100-unit going to be more desirable?"

So watching square footage, being a little more careful with the community space, not over-doing it, being a little more efficient there is important. The refund model may ultimately have to evolve. For years, we were 100 percent refundable. We turned to 90 percent, but I think there's ways to economically offset it with less refunds, so we're looking at all the different levers. We're all facing it, but at the end of the day, you still have to solve it. Otherwise, you're going to limit your growth. ■



Lesley Roberts

Kwalu

Paul Kynard

SeniorTV



Mike Andreasen

LCS

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(left to right): **David Baker, Susan Kayser, Jed Johnson, Anja Rogers**

ACCREDITATION AND QUALITY STANDARDS

Accreditation: A teaching tool on the journey to excellence

Collaboration, education improve performance with better outcomes

The prospect of accreditation and voluntary quality standards playing a more prominent role in senior living raises quite a few questions, along with countless opinions on the merits and consequences.

Quality standards, with their promise of moving beyond merely monitoring the capacity to perform by focusing on improving outcomes through collaborative accreditation partnerships, were the crux of a panel discussion when the American Seniors Housing Association's Executive Board met during the 2020 Annual Meeting.

Participants were David Baker, MD, the Joint Commission; Jed Johnson, CARF International; and Anja Rogers, Senior Star. Susan Kayser, Esq., Duane Morris LLP, moderated.

KAYSER: Many of you are probably aware that Argentum, the trade association, recently sought approval by ANSI to be the

Panelists

MODERATOR:
SUSAN KAYSER, ESQ.
Duane Morris LLP

DAVID BAKER, MD
The Joint Commission

JED JOHNSON
CARF International

ANJA ROGERS
Senior Star

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developer of voluntary standards for senior living. And Argentum's application was approved last fall.

ANSI is an acronym for American National Standards Institute. It's a private organization. ANSI doesn't set standard itself. Rather, it entertains applications from other organizations to become the standard-setting organization for a particular industry.

ANSI has a very broad reach, covering many industry segments of all sorts. It approves organizations to develop standards in technology, electrical systems and biotechnology. These are only a few of the areas.

This Argentum development has renewed discussion about accreditation in senior living. In the time we have today, we'll talk a little bit about some of the benefits of accreditation and what is involved in becoming accredited.

Could you give us some insights on the function that accreditation serves that's different from a governmental agency or periodic inspection system? And what do you view as the most important benefit of accreditation, as a general matter?

BAKER: The biggest difference is one of philosophy. The government programs are clearly punitive. And their model is if you hit

people with big enough fines, then that will promote quality.

We believe in collaboration. One of our mottos is evaluate, educate and inspire. We're the external eyes and ears to look at an organization and advise them on where they have problems, but we also help them improve by providing them with leading practices. What are other organizations doing? Our surveyors see literally hundreds of organizations. They can share what they're seeing in other organizations to help improve.

Government programs look at what's called conditions of participation or similar regulations. And that's all they look at. There are many times where organizations are meeting those standards, but they could clearly go above and beyond. So we try and help those organizations achieve the highest level of quality and safety possible.

JOHNSON: The accreditation process makes for a more healthy survey and a more productive survey, in comparison to a typical licensing inspection. It's focused on performance improvement, so you'll be providing better service today than you provided yesterday.



Laverne Joseph

Retirement Housing Foundation



Lisa Brush

Symphony Senior Living

Brian Benson

Palatine Capital Partners

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ROGERS: It's a third-party, unbiased perspective. Being able to listen to what other people have to say, what they've experienced, and move closer to that journey of excellence is the greatest benefit for your associates, your residents and all stakeholders.

KAYSER: What prompted CARF to develop an accreditation program for senior living?

JOHNSON: The roots of our senior living accreditation were in the continuing care retirement industry. The organization that originally was home to CCRC accreditation was LeadingAge. They saw the need for that independent, outside voice, rather than having that entity be affiliated with a provider association. It came over to CARF in 2003.

On the aging services side, internally within CARF the first standards that emerged in the late 1990s were actually in adult day services, growing out of the industry's desire for quality conformance.

KAYSER: David, could you tell us a little bit about what the Joint Commission has planned and why it has undertaken this effort for senior living?

BAKER: We accredit across the entire spectrum of health care. We are best known for working with hospitals, but we are also engaged in ambulatory, behavioral health, skilled nursing facilities, long-term care rehab, nursing care, and home care. Assisted living is becoming more and more integrated with the health care system.

We've been working with some of the largest systems in the country, and they started asking "have you thought about developing an accreditation program in assisted living, because we're looking to partner with assisted living organizations".

You all know about bundled payment. Organizations are saying we used to put patients in skilled nursing facilities after surgeries. Now they're sending patients home that same day. Well, sometimes the home's not a safe environment, so they want to be able to send their patients to assisted living facilities. All of these different factors came together.

I'll be the first to say this is different than what we have done for other programs, because it's the individual's home that we're



Paul Donaldson

PRDG Architects

Alice Donaldson

PRDG Architects

Doris Maultsby

ASHA

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talking about. As we go forward, we want to develop a comprehensive program that looks at the quality and the safety issues across the spectrum, both with standards as well as performance measures. But we have to preserve the autonomy, the decision making, the independence, the right to choose what individuals want to do and the risks that they want to take.

Our goal is to have a product focusing on assisted living with medically intensive programs that are either delivering services or coordinating services.

JOHNSON: The standards are ever evolving. For example, both the Joint Commission and CARF over the past year have met with the Alzheimer's Association. Both of our organizations went through a process working very closely with the association, looking at the standards that we currently have in place with respect to dementia care and making sure that those are in alignment with the association's dementia care practice recommendations. Those are areas of collaboration, and those standards are not static, they're always evolving over time.

It's important to specifically think about that dementia care arena. It's very easy on your

website or in your marketing materials to say you provide memory care. But what does memory care really entail? Consumers, as well as payers, are going to be looking in the future to see what are the criteria and what is the validation that you're providing memory support in a meaningful way.

BAKER: Jed said something really important. The philosophy of both of our organizations revolves around engaging stakeholders in the community. All of the stakeholders should have a say in what the standards of care should be. From our perspective, when we can create learning communities and share leading practices, when we have webinars and we have customers presenting to customers on what they've done, that's what people love. They don't want to hear us pontificate and read off a list of standards. They want to hear about real-world experiences.

KAYSER: You've touched on some of the specific issues that might affect accreditation in assisted living, but are there other unique issues you'd like to expand on?

BAKER: What's unique from our perspective is this is the individual's home. We cannot go the medical model route when we're talking about assisted living programs. Residents



Adam Cohan

Greystar



Bob Thomas

Senior Star



Ben Burke

CA Senior Living

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may be offered services after assessments have been conducted to understand what would be optimal, but the facility needs to have the systems in place to make sure that residents still have the right to choose.

When I was reading Atul Gawande's book, *Being Mortal*, there were parts where often families had their loved ones in assisted living facilities. And they emphasize the safety issues. But if you're thinking about the person who is living there, they still want to be able to choose what to do. From an accreditation standpoint, that's a fine balance. That makes this unique compared to other things we've done.

JOHNSON: It's the duality of focusing not only on the individual, the resident, but also focusing on that family member and caregiver. There's the health and wellness focus, along with the hospitality versus the more clinical aspects. Those are unique differences in this industry, so it's important to develop and continue to evolve those standards to make sure they're relevant.

KAYSER: Anja, what was Senior Star's motivation in becoming CARF accredited?

ROGERS: In 2001, we took on an assisted living building. At that time, our portfolio was

independent living only. We needed a way to know we were providing the best care possible in the most efficient way possible. So we looked for others that could help us with that, and CARF became one of those avenues. They were a teaching tool for us on this journey to excellence.

Our first assisted living community was accredited in 2003. Then between 2009 and 2015, our company as a whole grew tremendously. We were focusing on getting things leased up, so once that occurred, we decided in 2016 to accredit everything we have, with the exception of a few small properties.

I'd like to share a quick story to put all this together. Sixteen years ago, we had emergency procedures that primarily addressed fire and severe weather. Now we have a comprehensive program that provides response plans for over 40 different areas. Today, we have a different world with active shooters, with bomb threats. It's unfortunate, but it is the world we live in. This journey has taken us now to have procedures that are very, very relevant. And in a company of our size, I'm not sure we would have that knowledge and would have been able to embark on these areas.



Loren Shook

Silverado



Blake Peeper

Bridge Seniors



Billy Meyer

Columbia Pacific Advisors

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This is not a manual that sits on the shelf. It is an active way of doing business. Every associate has to understand those plans. The residents do. The families do. Even our outside referral sources understand what's happening in that building. In the event of an emergency, everyone goes into that mode. I naturally know what to do. We're able to sleep a little bit better at night knowing that we're not perfect, but definitely knowing that we've got a large team that's working on keeping everyone safe, with many different aspects of what that safety might look like. An added bonus of CARF over time relates to our associates. People coming into our organization are seeking excellence. Accreditation gives us a little bit of a head start on recruitment. And then for residents and their families, there's a sense of pride, and they feel more comfortable in their home.

KAYSER: Have you been able to quantify some of the benefits you've seen?

ROGERS: Those enhanced systems that I was talking about regarding safety translate into associate safety. When we started in 2015 to become accredited, we had a worker's comp mod of 1.24. That's just enough to choke you, because we all know how expensive that is. Last year in 2019 with three

years into accreditation, our experience mod is 0.84. We attribute a lot of that to CARF. Our worker's comp claims in 2019 reached an all time low.

Prior to CARF, we averaged 4.2 deficiencies on our state surveys. Today, on average it's 1.4. And then for resident and family satisfaction, we actually grew over 20 percent in this three-year CARF period. Today, 91.5 percent of our families and residents will refer our community to someone else. We're very proud of that. We attribute all of the things I just shared with you as part of our process to excellence and CARF being part of that.

KAYSER: Can you describe some of the mechanics that were involved when Senior Star became CARF accredited?

ROGERS: We first got all of our leadership on board with the concept. Then, with all leaders on board, we went to all staff — that's 1,300 associates — to help them all understand the importance of accreditation and their role in it, and what therefore the outcomes would be. After that, we created a small team in our corporate office. No one had this as a full-time job, but it was an add-on to their job. Then we deemed CARF champions in every community. So it could have been a nurse. It could have been an



Bill Kaplan
Senior Lifestyle



David Smith
The Gatesworth Communities

Rebecca Townsend
Solutions Advisors Group

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executive director. It could have been a program manager. Whoever seemed to be most excited about the accreditation process were the people we sought out.

We did review our policies and procedures and looked at how those were in alignment with CARF's recommendations. We implemented ways to get feedback better than we had before from our associates, residents, family members, and our referral sources as well. We used that feedback to prepare strategic plans. That was another change for our organization.

Then we provided training, and we did that through webinars and through site visits. We have 12 buildings ranging anywhere from 133 units to 346, with IL/AL and memory support in several of them, and in some cases just IL. It took us about six to eight months. Again, everyone continued their same role in the organization. This was just an added lift.

To do our 12 buildings, the cost was \$85,000. Our communities ranged anywhere from \$5,300 to \$10,600 to get accredited. The reason for the difference is everyone has the same application fee, which I believe is \$995. But how many surveyors you have in your particular community determines what the added cost is. And then, of course, you pay for the travel of the surveyors. For our 12 communities and their unit size, that equates to \$13 a unit a year. In our case, we achieved the three-year accreditation, so you are not paying any of those fees again for another three years, which is the max accreditation.

Talking about the outcomes I went over earlier, we more than made up for that cost with some of the stats I gave you. The improvement we have experienced through accreditation, the pride that our

associates have, and the confidence our referral sources have makes that \$85,000 priceless. Overall, it was one of the best investments we made.

KAYSER: What do you think might prompt broader use of accreditation in senior living? And is there an interplay with the state licensing agencies in connection with accreditation?

JOHNSON: The most recent experience in that realm would be in the state of Idaho. Just last year Idaho passed legislation that recognizes assisted living accreditation in lieu of certain aspects of state licensure. They had a backlog of surveys that had not occurred.

The state licensing division went to the state and said we'd like to hire a new state licensing team. The state was not predisposed to expanding the state workforce. So they pushed that decision back to the state licensing entity and said can you explore what might be some other options?

To their credit, they pulled together the right players around the table, so they had the ombudsman, the state licensing folks themselves, and the provider association. One solution was to move forward with pursuing accreditation. Interestingly, it also shifts the financial burden from the state, because it'll be the provider that will pay the costs of accreditation and eliminate the need for some of those state licensing visits.

For the state of Idaho, CARF crafted a 277-page crosswalk between their state licensing standards and the standards that we have within CARF accreditation with respect to the assisted living industry. A crosswalk looks at the similarities, what are the areas of difference, so that would be the tool we would use

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when comparing and contrasting standards across different entities.

One factor that came up from the ombudsman side was they wanted to make sure they still had the capacity to come in and do visits based on complaints or critical incidents. That's factored in. And they wanted to make sure those reports that were received back from the accreditation entity would then be shared publicly, just like the licensing reports. I do think that is an emerging trend.

I've had a number of phone calls over the past four or five months from two different states with respect to assisted living and another state with respect to adult day services that are exploring options related to not complete deemed status, but recognizing accreditation and scaling back some of those state licensing visits as a result.

BAKER: When we were doing the market research for our assisted living product, it was interesting, because there was very little awareness about accreditation. But once that was described to both potential residents, as well as family members, they said they would be very interested and would take a look at facilities that had accreditation. So hopefully there will be a direct value

proposition for accreditation that's made clear.

I also think, unfortunately, one of the other potential drivers is bad news. At some point, there's a tipping point where federal regulators and state regulators say we need to force this issue. Hopefully, it'll take place from the positive perspective of improving quality and safety and improving quality of life and outcomes for residents.

KAYSER: Do you think broader adoption of accreditation by senior living providers is likely to obviate the need for federal oversight of senior living?

JOHNSON: If you think about some of the stories that have come out about assisted living facilities and the problems, you worry the entire industry could be tarred by that. So in addition to the benefits of accreditation for individual facilities, to be able to have this awareness that the industry as a whole is taking steps to move quality and safety forward will be helpful if you can really address those issues. If the penetration is broad enough to prevent some of those biggest problems, I think that will help.

KAYSER: I mentioned at the beginning of this session the ANSI/Argentum developments.



Tom Finley

Ascent Living Communities

Susie Finley

Ascent Living Communities



Matt Wittemann

Meyer Senior Living Studio

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Do you see voluntary standards for senior living being developed by one organization appointed by ANSI as a viable alternative to broad use of accreditation?

JOHNSON: There's an importance of having an independent outside entity as opposed to provider-driven and provider organization-associated standards. With that said, I do think there can be a role, certainly, at the provider level of developing guidelines and encouraging quality.

But, for example, Idaho would not have considered recognizing accreditation if it was an accreditation that was being conducted by a provider association. That would have just been a nonstarter from their perspective. And I don't think that would move forward at the state and/or at the federal level. I do think with having both CARF and the Joint Commission involved, states, consumers and providers are going to appreciate having choice in this space, but I don't think that's going to come from a provider-oriented association.

BAKER: Our process is a very different model from ANSI. As Jed said, what we

ideally do is work with stakeholders, and they've written the guidelines. We're not the experts. It's people in the industry who are the experts. We work with them to develop the standard. We're a consensus-based organization. That's what it's about. It's trying to create industry standards across a broad spectrum of issues, whether it is emergency management, whether it's safe use of medications, all of these things. The ANSI process is too narrow and it's too specific. We favor a different model than the ANSI model.

KAYSER: Do you see a correlation between accreditation and patient and family satisfaction?

JOHNSON: We gather information from those organizations that are accredited. It's self-reported information. They provide us feedback. What they've seen is not only an increase in satisfaction of persons served, so that would be residents and family members, but they've also seen an increase in satisfaction from staff as well. But that's self-reported information that is gathered in the post-accreditation process. ■



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Capitol Seniors Housing

Samira Madhany
The Carlyle Group

Tom Levy
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Juniper Communities
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Koelsch Communities
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ProMatura Group
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Bret Stephens
The New York Times

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David Barnes
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Anne Tumlinson Innovations, LLC

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Jerry Frumm
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Virtual webinar at 2:00PM (EST)

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Rising Leaders and Mid-Year Meeting
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OCTOBER 6, 2020
Fall Executive Board Meeting
Marriott Marquis, Washington, DC

OCTOBER 7, 2020
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RPM Italian, Washington, DC

NOVEMBER 5 TO NOVEMBER 6, 2020
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John Powell, Bellwether Enterprise
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3rd

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