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**SENIOR LIVING NEWS®**

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## AIA Releases Strategies and Illustrations for Reducing Risk of COVID-19 in Senior Living Communities

**The American Institute of Architects (AIA) wants to help the senior living industry compliant with new measures that promote risk mitigation. Several resources have been developed as guidelines for living spaces with special considerations for the aging population that reside in assisted living communities.**

6/30/2020

AIA is releasing strategies and illustrations today that can help [senior living communities](#) mitigate the risk of COVID-19.

These resources were developed by a team of architects, AIA’s Design for Aging knowledge community, public health experts, and engineers, to assist with pivoting communities toward a more sustainable set of strategies that can reduce risk for residents and staff while creating a more comfortable way of life that is supportive of overall wellbeing.

In addition to the 3D model—produced by RLPS Architects—the team’s findings are detailed in a report for administrators, design professionals, and public officials. These strategies are meant to work in tandem with AIA’s other tools that can assist senior living communities with mitigation measures to safely resume activities and reopen closed spaces. These tools include a seven-step [Risk Management Plan for Buildings](#) for assessing hazards and applying strategies that reduce risk and [the AIA’s Re-occupancy Assessment Tool](#), which provides a framework of strategies for making buildings safer.

Developing mitigation strategies is particularly critical for senior living communities, where risk is amplified. The primary risk of transmission is currently considered to be close personal contact, which could occur among residents, staff, and visitors predominantly in gathering areas, such as dining rooms or common areas, and during group activities. Visit [AIA’s website](#) to access the full report.

Resources were developed from a wide range of expertise and research using a virtual charrette workshop—a method used to study specific issues in a limited time frame using an intense brainstorming session.

As part of the sessions, a group of public, environmental, and occupational health experts and physicians provided an independently developed 90-minute briefing on SARS-CoV-2 infectious disease transmission, epidemiological models, and insights into the most current research of the virus as of May.

For more detailed information on public health hazards and considerations in senior living communities, see [AIA's COVID-19 emerging research and public health data](#).

Visit AIA's website for more [COVID-19 resources for architects](#).



## Senior Living Overlooked Again as Federal COVID Relief Announced for Nursing Homes, Hospitals, Dentists

**Federal assistance for senior living is still at risk after new plans have been announced for skilled nursing, hospitals and dentists. James Balda, Argentum's President and CEO is pressing for further consideration by the Federal government at this critical time of need.**

Written by: Lois A. Bowers

7/13/2020

Announcements from federal health authorities on Friday found the senior living industry still on the outside looking in as nursing homes, hospitals and even dentists were identified as recipients of new COVID-19-related resources from the federal government.

The Centers for Medicare & Medicaid Services announced that it will deploy quality improvement organizations across the country to give "immediate assistance" to nursing homes in COVID-19 hotspot areas identified by the White House Coronavirus Task Force.

CMS also said it will implement an enhanced survey process to meet specific concerns in hotspot areas and will coordinate federal, state and local efforts "to leverage all available resources to these facilities."

"The purpose of these efforts is to target facilities with known infection control issues by providing resources and support that will help them improve quality and safety and protect vulnerable Americans," CMS said in the announcement.

The news presented an opportunity for the senior living industry to highlight the fact that senior living still has not seen any federal aid to fight the coronavirus.

"While we understand and support the need to provide added resources and services to nursing homes in hotspots, we continue to be disappointed that assisted living and other senior living communities continue to be overlooked when it comes to federal support," Argentum President and CEO James Balda said.

Senior living residents are as at-risk as nursing home residents, he pointed out, and operators are facing increased costs related to the need for additional staffing, expanded operations, personal protective equipment and test kits.

“And as states and regions continue their reopening plans, they face an uphill battle in continuing to work to protect their residents and staff from COVID-19,” Balda said. “We ask the White House Coronavirus Task Force, the administration and Congress to consider the critical needs of the 2 million seniors and 1 million employees who live and work in senior living communities across the country. Please don’t leave them behind.”

Another announcement from the federal government, however, has Argentum feeling “hopeful,” Balda said.

The Department of Health and Human Services announced Friday that it is opening the Enhanced Provider Relief Fund Payment Portal to dentists who previously may not have been eligible to receive monies through the fund.

“This second phase of General Distribution will continue to expand to include other providers submitting applications for future relief funding opportunities or as directed by HHS,” the agency said.

“While the senior living industry is still awaiting financial support from the federal government, we remain hopeful that this action by HHS indicates COVID-19 relief for state-licensed healthcare providers is moving to the next level of consideration,” Balda said.

The HHS announcement also included news of an additional \$3 billion for safety net hospitals and \$1 billion more for rural and suburban hospitals.



## The Mental Health Toll of COVID-19 — And What You Can Do About It

**Keeping your mental health as a priority is more important than ever. A new study from the Society of Human Resources Management has just been published to help us all understand the impact that mental health has on everyone around us.**

Written by: Lois A. Bowers

7/13/2020

It should come as no surprise to anyone reading this column that the pandemic has had mental health effects on workers. Recent research on the topic may surprise you, however.

A study by the Society of Human Resources Management quantifies the impact. Although the survey was not limited to senior living or healthcare workers, it did find that those who lived with a vulnerable person — such as a

health worker or other essential employee, those aged 65 or more years, or an immunocompromised individual — experienced more severe effects. Overall, women and younger workers were more affected as well.

For instance, women (51%) were more likely than men (47%) to report feeling down, depressed or hopeless “often.” And half of Generation Z employees (51%) — the oldest of whom are 24 — agreed that their work makes them feel burned out compared with 24% of baby boomers.

#### Other findings:

- 22% to 35% of employees reported experiencing symptoms of depression “often,” and as many as two-thirds said they were experiencing depressive symptoms at least “sometimes.” The most commonly reported symptom was feeling tired or having little energy.
- More than one-third reported “often” feeling tired or as if they have little energy. The symptom was more common among women (56%) compared with men (43%), and among generations, it was most common among members of Gen Z (44%) and least common among baby boomers (26%).
- 22% of employees reported “often” having trouble concentrating. Among the various generations, this symptom was most commonly reported among members of Gen Z (31%) and was least commonly reported among baby boomers (11%). And it was more commonly reported among women (54%) than men (45%).
- 41% of employees reported feeling burned out from their work, and 45% reported feeling emotionally drained from their work. Also, the younger the employee, the more likely he or she was to report feeling emotionally drained from work. The range was a high of 47% among Gen Z members to a low of 29% among baby boomers.
- A significant number of employees said they were exercising less frequently, eating less healthfully and not getting enough sleep to feel rested upon waking.

Results were based on a random sample of 1,099 U.S. employees. Fifty-eight percent of the sample said they lived with at least one person considered to be a member of a vulnerable population, such as a healthcare worker, an essential employee, someone over 65 years old or someone who was immunocompromised. See more results [here](#).

But what can employers do with this information? How can you help employees?

“COVID-19 is taking a toll on our minds and emotions in a million little ways,” said SHRM President and CEO Johnny C. Taylor Jr., SHRM-SCP. “Now, more than ever, employers should double down against stigmas and guarantee employees know of the resources, benefits and accommodations available.”

Taylor’s point — ensuring that employees know about the mental health resources available through work — is one of five tips shared in a recent [Harvard Business Review article](#). Other advice from the HBR authors:

- Ask your direct reports and co-workers, “Are you okay?” Peers and managers are the two groups with whom employees are most willing to address mental health.
- Practice supportive listening and “seek to genuinely understand, and ensure that people feel heard. And don’t be afraid to open up yourself.”
- Communicate weekly or even daily about mental health. “When it comes to discussing mental health specifically, people say that far and away the most effective form of company communication is a phone call directly from one’s manager,” the authors wrote.
- Survey employees regularly to spot problems early, and don’t forget to take care of the managers, who are taking care of their teams.

The need is there: 37% of employees responding to the SHRM poll said they have not done anything to cope with their depression-related symptoms.



## Short-staffed on a Holiday Weekend, Senior Living Community Successfully Weathers COVID-19 Storm

**Stone Valley Assisted Living and Memory Care in Reno, NV had to find a way to effectively prevent the spread of COVID-19 and staff for the 4<sup>th</sup> of July weekend after screening test came up positive for two employees. The leadership had to keep seniors from getting infected while maintaining the fundamental precautions until more help was available.**

Written by: Kimberly Bonvissuto

7/13/2020

A perfect storm of a holiday weekend and nine employees testing positive for COVID-19 left a Reno, NV, assisted living and memory care community in a staffing emergency, testing its policies, its supply levels and its ability to care for residents.

After an employee at Stone Valley Assisted Living and Memory Care, owned by Sunshine Retirement Living, tested positive for the virus outside of the community on June 16, the community immediately tested all of its 32 employees and 47 residents, following up with two additional rounds of testing as a precautionary measure.

All tests in the first round of testing on June 17 came back negative. Some employees and residents tested positive on the second round on June 23, however, at which time the community notified the Nevada Department of Health and Human Services.

After a third round of testing, done "out of an abundance of caution," the results came back Friday, July 3, at the start of the holiday weekend. The results revealed that several employees who were asymptomatic and had tested negative on the prior two tests were now testing positive.

"All positive employees were sent home to quarantine. This caused a temporary shortage of employees during the national holiday," Kena Phillips, regional director of operations Southeast for Sunshine Retirement Living, told *McKnight's Senior Living*. Two employees, who were asymptomatic and lived together, volunteered to continue working, if necessary, to continue providing essential services to residents, she added.

"In our continuing discussions with the NDHHS, we were advised to keep those employees on shift because of the temporary intense staffing shortages caused by sending employees home to quarantine," Phillips said, adding that the Center for Disease Control and Prevention's guidelines allow asymptomatic, COVID-19-positive employees to work in these "special circumstances." "We contacted all community employees who had tested negative, as well as five local temporary staffing agencies, but we were unable to secure the staffing necessary

to provide the essential and amplified care to our assisted living and memory care residents.”

The community also was advised that it could not transport asymptomatic residents to local hospitals since those beds were reserved for the most serious cases. All of its residents who had tested positive, Phillips said, had mild or no symptoms.

The NDHHS Division of Public and Behavioral Health spokesperson told *McKnight's Senior Living* that the division “has worked with Stone Valley to ensure the health and safety of residents and staff, and the Division is continuing their investigation into this facility.”

The CDC provides [Contingency and Crisis Capacity Strategies](#) for healthcare facilities facing staffing shortages due to COVID-19, including allowing “healthcare personnel with suspected or confirmed COVID-19 could return to work before the full [Return to Work Criteria](#) have been met.”

Those strategies include each affected employee reporting his or her temperature and absence of symptoms before each shift, wearing a face mask and leaving work if “even mild symptoms” develop. Facilities also should restrict those employees from contact with severely immunocompromised patients (or residents) but can allow them to provide direct care for patients with confirmed or suspected COVID-19 and can allow them to provide director care for patients without suspected or confirmed COVID-19 “as a last resort.” The CDC also notes that these individuals should be prioritized for testing.

After receiving staffing relief on that Sunday afternoon, all employees who tested positive no longer were working at the facility. All employees who tested positive are self-quarantining and will not return to the community until they test negative and no longer are exhibiting symptoms, Phillips said. As of Friday, the community was caring for 10 residents who tested positive for COVID-19.

“We created a separate quarantine area in the community for these residents to recuperate, keeping the positive residents separate from those residents who tested negative or recovered,” Phillips said. “Additionally, we continue to test employees and residents to ensure there are no unknown positives. We are also continuing to work closely with the Nevada Department of Health and Human Services.”

Advance planning proved to be key to the community’s success when it encountered this challenge. As soon as it became apparent that the virus was spreading throughout the country, Sunshine Retirement Living immediately began purchasing additional personal protective equipment from all possible sources, Phillips said.

“Because of this early action, we were able to provide comprehensive PPE, including N95 masks, disposable gowns, face shields, gloves and shoe covers for our employees at each of our communities, including Stone Valley,” she said. “All employees, including those two who volunteered to stay that day, continue to wear PPE to help protect them and our residents.”

Phillips expects that studies will “shed crucial light on what has transpired and how policies and procedures might evolve” in the coming months and years. For now, Sunshine Retirement Living’s focus remains on the health and safety of its residents and employees “by implementing the strictest health and safety policies guided by the CDC and other health authorities,” she said.

“We do believe, however, that because we were so proactive in securing significant amounts of PPE in the very early days of the pandemic, purchasing Viktor Scientific’s Respira-ID tests for all of our communities, and strengthening our already vigorous infection prevention protocol, we were in a better position to help protect our residents and employees,” Phillips said.

*In other coronavirus-related news:*

- Assisted living communities and nursing homes in Minnesota will be allowed to [open their doors](#) to certain resident family members and outside caregivers in an effort to help monitor residents' health and alleviate the effects of long-term isolation and loneliness. Facilities will designate the "essential caregivers," who will be permitted to make scheduled visits of up to three hours per day under [new guidelines issued Friday](#).
- Oregon health officials have a plan to [test everyone](#) at assisted living communities in the state for COVID-19. Testing will be offered to all residents and staff members, with the goal of testing 25% of staff members every week. Those communities in areas with high testing rates will see widespread testing first.
- Omnicare is partnering with the state of Texas to provide [COVID-19 point-of-care testing](#) for assisted living facilities and nursing homes throughout the state, Gov. Greg Abbott announced Friday. The partnership will provide on-site, same-day testing and results for both facility staff members and residents. The test sites will help enable a goal of processing up to 100,000 tests in the first month alone, the partners said. Testing in assisted living began the day before the announcement.
- [Data from Virginia](#) suggest that the prevalence of COVID-19 in assisted living is similar to that in nursing homes, thereby warranting similar resources. Of the 241 outbreaks in long-term care facilities to date, 82 were in nursing facilities and 71 were in assisted living, according to the Department of Health.
- Florida Gov. Ron DeSantis said the state received the results of 57,000 COVID-19 tests of long-term care staff members and found a 2.3% [positivity rate](#), which he called "low" and "good news." Almost 200,000 staff members work at long-term care facilities throughout the state.
- With COVID-19 cases urging in Dallas County, TX, some long-term care facilities are answering a desperate [call for help](#). [Presbyterian Village North](#) in Dallas was one of the first communities in the county to be designated to operate a stand-alone COVID-19 unit. It is now at capacity, with 16 patients. In June, just five long-term care facilities were designated to operate COVID-19 units. Today there are 14.
- Atlanta-based law firm Troutman Pepper has launched a new [multistate tracking survey](#) to help nursing homes and other long-term care facilities navigate the ever-changing guidance related to COVID-19. The survey covers federal and state orders and guidance documents concerning operations, emergency measures and partial immunity for nursing homes and long-term care facilities.
- Owners, operators, workers, agents and volunteers of independent living communities and age-restricted housing should strive to maintain [confidentiality](#) and remain cognizant of federal privacy laws in sharing COVID-19 information. The Centers for Disease Control and Prevention advises that communities maintain confidentiality in accordance with the Health Insurance Portability and Accountability Act privacy rule and offers suggestions on how to inform the community that a fellow resident has the virus.
- Students from Bnai Brith Synagogue in Savannah, GA, showed up outside Buckingham South, an assisted living facility, to blow bubbles and [share](#) signs of encouragement with residents. The children held up signs reading "we love you," "We miss you," "have a happy day" and smiley faces.