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COVID Relief Package Needs to Address Pandemic ‘Dangers’ to Older Adults, Provider Group Says

Written by: Kimberly Bonvissuto

2/16/2021

LeadingAge is stepping up calls on Congress to adopt a COVID relief package addressing the dangers that the pandemic poses to senior living residents and other older adults.

“Aging services providers continue to protect older adults and their staff, and in turn COVID costs continue to mount,” LeadingAge President and CEO Katie Smith Sloan said. “Providers who serve older Americans face exponential expenses. Congress must pass a robust, comprehensive COVID-19 relief bill to ensure vulnerable older Americans and the providers who serve them survive the pandemic intact.”

As part of LeadingAge’s 100 Days of Advocacy campaign calling on President Biden and Congress to make 2021 a [“new beginning for older Americans,”](#) Sloan sent letters to key congressional committee chairs — including the House of Representatives [Financial Services](#), [Ways & Means](#), [Energy & Commerce](#), [Education and Labor](#), and [Small Business](#) committees — detailing needs to protect older adults, including additional Provider Relief Funds and support for older adults in affordable housing.

LeadingAge is pushing for at least \$120 billion more in Provider Relief Funds, including \$40 to \$50 billion designated to help aging services providers pay for testing, personal protective equipment and vaccines not covered by the federal government. The association also wants providers to be able to use Provider Relief Funds up to six months after the pandemic ends, “to provide adequate time to phase back into pre-pandemic service levels.”

House reconciliation bill

The House Energy and Commerce Committee released its [draft reconciliation bill](#) last week, and it contains several provisions that align with LeadingAge’s request for aging services provider support.

The House bill would allocate \$7.5 billion for the Centers for Disease Control and Prevention to prepare, promote, administer and monitor COVID-19 vaccines. Under the bill, the CDC would receive another \$1 billion to strengthen vaccine confidence through education, \$1.75 billion to improve identification of new virus variants, and \$500 million to expand and modernize surveillance and analytics infrastructure.

The legislation also would provide \$5.2 billion to the Department of Health and Human Services to address the supply chain for vaccines and therapeutics, as well as \$500 million for the Food and Drug Administration to review and track new vaccines and therapeutics. The House bill also would allocate another \$46 billion to HHS to detect, diagnose, trace and monitor COVID-19 infections, as well as activities to mitigate the spread of the virus, which includes testing and PPE.

The bill would allocate \$1.8 billion to HHS for testing, PPE and vaccines for staff and residents in congregate care settings, including long-term care. LeadingAge said it will “continue to advocate for complete coverage of testing costs” in long-term care facilities.

Workforce issues

Workforce asks from LeadingAge include targeted funds to increase frontline staff wages, and continued funding of “strike teams” and National Guard units to relieve staffing shortages.

The House bill would allocate \$7.6 billion to establish, expand and sustain a public health workforce, including additional lab personnel, contract tracers, social support specialists and public health nurses. The bill also includes \$100 million for the Medical Reserve Corps to support emergency response efforts in communities.

Affordable housing

LeadingAge also seeks \$1.2 billion in COVID-19 relief to address the needs of older adults in HUD-assisted affordable senior housing, including \$300 million for service coordinators, \$50 million for wireless internet installation and service fees, and \$845 million for COVID-related costs, including cleaning, PPE, security and staffing.

“These recommendations reflect the real and dire needs of aging services providers, who continue to face exponential increases in expenses from testing, PPE, staffing, cleaning and other ongoing costs — even as revenues to cover these unprecedented needs have fallen substantially for many,” LeadingAge stated.

In December, LeadingAge sent the Biden transition team almost four dozen recommended [policy actions](#) for its first 30 days, 100 days and first year.

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'The Situation is Dire': Provider Group Seeks \$5 Billion in COVID Relief for Senior Living

Written by: Lois A. Bowers

2/16/2021

The next COVID-19 relief package from the federal government must include \$5 billion in funding for assisted living, independent living, memory care and continuing care retirement communities to help with personal protective equipment, staff and testing needs, Argentum said Friday.

"We are extremely disappointed that ongoing negotiations on the latest COVID-19 relief package continue to leave behind these vulnerable seniors and those who care for them," Argentum President and CEO James Balda said in a statement. "The bill's language does not come close to adequately addressing the urgent needs for those most at risk to COVID-19: residents of long-term care. These care providers cannot wait any longer — the situation is dire."

To date, assisted living providers have been promised \$3 billion, or 1.7%, of the total Coronavirus Aid, Relief, and Economic Security (CARES) Act Provider Relief Fund, and have received even less, Argentum said. By comparison, according to the association, nursing homes, hospitals and other care providers have received \$145 billion, or 83%, of the Provider Relief Fund; \$27 billion, or 15%, of the total fund remains unallocated.

In a recent survey of Argentum members, more than half of senior living providers said they are operating at a loss, up 20% from October; 56% said they won't be able to sustain operations for another year.

Assisted living operators have faced a financial impact of more than \$15 billion due to the coronavirus, with 88% of providers experiencing increased costs due to overtime, 78% realizing increased costs due to PPE, 71% having increased costs associated with 'hero pay,' 61% with increased costs related to new staff, and 45% seeing increased costs related to cleaning.

Argentum said its figures come from internal member surveys by Argentum and the National Center for Assisted Living.

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 **SENIOR HOUSING NEWS**

Cadence Living Implements Covid-19 'Alarm System,' Grows Management Services Business

Written by: Tim Regan

2/9/2021

For Rob Leinbach, one of the two principals at Cadence Living, the Covid-19 pandemic is personal.

Leinbach's mother was living in an independent living community in Seattle when the pandemic hit hard early last year, and like most other senior living residents, she was forced to isolate in her room out of safety. And as is the case with many other residents, her condition quickly deteriorated.

"By summer, she needed memory care," Leinbach said during a recent appearance on the Senior Housing podcast, Transform.

Although Leinbach's mom did improve once he moved her from the independent living community in Seattle to a Cadence memory care community in Phoenix, Arizona, the experience underscored his belief that the industry's top priority after protecting residents must be finding a way back to pre-pandemic levels of engagement.

In the meantime, Scottsdale, Arizona-based Cadence is working on new ways to help keep residents safe at its now-28 communities, including a new wastewater outflow testing initiative with Pangolin Health that can identify the presence of pathogens such as Covid-19. Leinbach hopes that, when layered with traditional PCR and rapid testing, the outflow testing can act as an early warning for new outbreaks during the Covid-19 era and potentially beyond.

"The challenge with current PCR testing for individuals with coronavirus is that sometimes you have to wait two to three days for results, and if the labs are really overwhelmed, that can even go out four, five, six, or seven days," Leinbach said. "This added layer of protection allows us to analyze the data all the time. It's kind of like an alarm system."

Cadence is also making progress on its vaccination efforts, and is on track to to have held 36 clinics by the middle of February. If all goes according to plan, every Cadence community will have completed its third and final vaccination clinic for residents and team members by the end of March.

Highlights of Leinbach's podcast interview are below, edited for length and clarity. Subscribe to Transform via Apple Podcasts and SoundCloud. The interview took place in early January.

On dealing with Covid-19:

I think a lot of operators had interesting plans for 2020. And then for all of us, the plan became one thing and one thing only: protecting our residents through this pandemic. It really has been our entire team's singular focus. We've been fortunate enough to continue to measure growth from a company perspective, but it's been all-hands-on-deck all year for our residents.

We've been subject to the states' [vaccine] distribution efforts, and there's been certain states that have been a little slower than other states, as I'm sure everybody's been reading in the news.

On how the pandemic shifted Cadence's 2020 growth plans:

We came into the year thinking that there were going to be some interesting acquisition opportunities in 2020 because of some of the overbuilding in certain markets. But Covid changed everything. We just really focused on protecting our residents. Our team did a really fantastic job, I think that that was recognized. And so, we saw some third-party management opportunities increase because of those efforts and the recognition of those efforts. So we were able to add a few communities in 2020, but they were mostly on the third-party management side, as acquisitions pretty much dried up.

The result of the pandemic is that it has pushed those opportunities out. [For example], if you acquire a building in May, unless you're getting a really steep discount on the value, then you're more than likely to see some occupancy drain throughout the pandemic. So, everybody is sort of sitting on the sidelines and waiting to get through the vaccine. And there's been some PPP money and HHS money that has helped owners survive the pandemic. So, I think that opportunity is still coming, it just got pushed out a year or two.

We shifted back to looking at specific development projects, because we were now looking at a scenario where we wanted to be two or three years past, hopefully, the existence of this coronavirus. The virus had delayed a lot of the additional projects in the pipeline across the country, therefore giving demand an opportunity to catch up, whereas previously, there had been some overbuilding.

This did re-focus our attention to the high barrier-to-entry markets, and we've really been looking coastal. And that was just intensified, because you definitely want to make sure that you're in areas where the demand is much-needed coming out of this. And there are all sorts of design changes that have been going on throughout the development industry, such as multiple entries, filtration systems, different wings and smaller dining venues where you can separate out individuals within the community.

The lesson for us is that diversity is key. If you've got all your eggs in one basket, and something hits to affect that basket, then you're in a little more trouble than if you're well-diversified. We are doing active adult, we're also continuing to do our age-in-place IL-AL-memory care communities. We license the entire building for assisted living, and we're putting full kitchens into every unit. That gives us the flexibility. If there's a hit to independent living, we can still move in assisted living residents. If there's a hit to assisted living, we can still move in independent living residents. And we're looking at affordable, as well.

On Cadence's new outflow Covid testing initiative:

I believe we're the first senior living operator to partner with an outflow testing company. The challenge with current PCR testing for individuals with coronavirus is that sometimes you have to wait two to three days for results, and if the labs are really overwhelmed, that can even go out four, five, six, or seven days. And so you've got this gap where somebody who is positive might be spreading the virus within the community.

With outflow testing, what you do is you put a sample box that is immersed in the sewage outflow from the community, and it is collecting data 24/7 in real time. And that data is being uploaded to our partner, Pangolin Health, which is then analyzing that data with its labs. It can tell you in real time when you have coronavirus in your building. And if we have multiple outflows, we can isolate within the building where that positive result is occurring, and then immediately lock that down and test everybody and do contact tracing from there.

It's in tandem with PCR testing and rapid testing, but this added layer of protection allows us to analyze the data all the time. It's kind of like an alarm system, if you will, that will allow us to be more proactive in stopping the

spread. The plan is to roll it out across the country, based upon the infrastructure timing from Pangolin because it's their sample boxes that we're installing.

I think the other neat thing about this technology is that you don't have to just test for coronavirus. You can test for anything. The industry has had shutdowns of our communities before with things like norovirus. We're going to be able to get to see whatever is coming out of that outflow, whatever we want to test for going forward. It's data- and analytical-driven, and it's going to give us a foot up on everyone.

On whether the pandemic will make senior living engagement or wellness programming harder in the future:

I hope not. At the end of the day, we're humans, and what we need is that connection. We need that engagement, we need that interaction, we need to be able to hug people. Does [the pandemic] make me realize and recognize the importance of outdoor space? 100%. But does it make me think that we're not going to get to a place where we're hugging each other and connecting as human beings? I sure hope not.

I want to give you a personal example. When this pandemic started, my mother was in independent living in a community in Seattle. And as everybody knows, Seattle got hit [by Covid-19] first and hard. She was locked down as an independent living resident in her apartment for months, and she deteriorated so quickly. By summer, she needed memory care — she just skipped over assisted living — so I had to drive up to Seattle this summer, put her in a car, drive her back down to Arizona and place her into the memory care [neighborhood] of one of our communities here. It was pretty shocking to see how fast isolation can affect residents.

Now that she's in a memory care setting where we have all those protections in place, my mom is getting engaged on a daily basis with activities and friends and being able to go out in the gardens. She's actually improved substantially since going from independent living and into memory care. So it's really been a lesson in the importance of engagement.

The biggest unfortunate circumstance of the pandemic has been the limitation of family visitation. Although my mom is now getting engaged and she's doing well, I still can't go hug her. We have implemented supervised visitation, but it's with masks, it's at a safe distance and it's just not the same. So, it is the most challenging thing about this pandemic.

What we're really looking forward to on the other side of this vaccine is bringing back the outside community back into our community, and bringing our inside of the community back out to the outside community. It's that community interaction and human interaction that we so incredibly value. Our team has adapted by using iPads and doing window visits and doing, like I said, supervised outdoor visits. And in some cases, if the community [Covid-19] count surrounding them was low, we could get them inside the building in an isolated area that was disinfected after every visit.

So, we've been doing everything possible to make that interaction happen in a safe way. Social distancing, that term does not exist in our communities. It's physical distancing, because we're constantly socially engaging. We've done spaced-out small group activities, we've done hallway activities, we've done Zoom entertainment and bands playing outside the window. The team has been great about being as creative as possible to create an engagement and to make it as normal as possible. At the end of the day, we really do need to get on the other side of this vaccine, so we can bring the outside world back into the communities.

On what Cadence is preparing for in 2021:

We've been fortunate that we've been able to have the growth we've had over the last couple of years. We like our size and where we are now. The first six months for us is going to be focusing on execution and bringing

back the joy to the communities that existed pre-coronavirus, getting through the vaccine, and re-engaging with the outside community. I think that's the immediate goal for us.

The second thing is something that I mentioned earlier: a listening tour, and then how do we take those responses from the listening tour, how do we convert those into being the most innovative, progressive, team-oriented senior living operator out there? That's what we want to be, and we're fortunate we have employees that want to get better every day. But the truth is every operator needs to get better every day. And so, we understand that, and we're going to be pushing a commitment to culture this year. And then on the actual community growth side, we've really been looking at a development pipeline, and we're still focused about two years out. So, we want to make sure that we're outstanding in our current portfolio and then we're looking forward, two to three years out.

SENIOR HOUSING NEWS

A Constant Trauma: Senior Living Providers Face Mental Health Crisis Among Covid-19 Workforce

Written by: Chuck Sudo

2/11/2021

Over a year has passed since the [first known case](#) of the novel coronavirus in the United States was reported in Snohomish County, Washington on January 20, 2020. During that time, essential workers — including frontline workers in senior housing and long-term care — have not gotten a break, continuing to work every day to keep basic needs fulfilled.

The protracted fight against Covid-19 is laying the foundation for an emerging mental health crisis among essential workers, psychotherapist Doris Klinkhamer told Senior Housing News. Many essential workers are being asked to perform jobs that pay at or slightly above minimum wage, and are at risk of being exposed to the virus while on the job.

This comes with added physical, mental and emotional stress. People are more prone to anxiety and depression during extreme events, and susceptible to increases in alcoholism and substance abuse. A new [study](#) from the NYU School of Global Health published in the journal Preventive Medicine revealed that people suffering from anxiety and depression are drinking more during the pandemic.

The pandemic may also be contributing to an increase in suicides. Japan's health and welfare ministry [reported](#) nearly 20,919 suicides in 2020 — a 3.9% increase after a decade of decline, with women and children notably taking their own lives at higher rates.

Labor has been one of the biggest challenges and expenses that senior living providers have faced during the pandemic, and a mental health crisis among the industry's workforce could extend these challenges by resulting in higher rates of absenteeism and turnover.

Compounding matters, 2020 was a year full of extreme, stressful events, including Black Lives Matter protests across the country and a contentious election and its aftermath including an insurrection at the Capitol in Washington, D.C..

“The past year was a constant trauma,” Klinkhamer said.

Senior housing providers have been proactive to protect the mental health of frontline workers throughout the pandemic. Many have provided enhanced benefits such as flexible scheduling, additional personal time off and sick leave, and “hero pay” wages. Others, such as ALG Senior and Miami Jewish Health, have taken extra steps to ensure the wellbeing and good mental health of their workers, such as by establishing call-in hotlines, and implementing protocols and smaller group meetings for staff to check in on each other and better identify signs that they need a mental health break.

This will be necessary in the coming months, as the Biden administration lays the groundwork for a [more concerted federal response](#) to the pandemic, Miami Jewish Health Senior Vice President for Behavioral Health, Dr. Marc Agronin, told SHN. A geriatric psychiatrist, he is also chief medical officer for the MIND Institute at Miami Jewish Health.

The organization provides senior health care services and living options including independent living, assisted living, home health and long-term care, affordable senior housing and a program of all-inclusive care for the elderly (PACE).

With the total death count from Covid-19 expected to exceed 500,000 by the end of February, he sees a protracted response even as the vaccination effort continues.

“We are in the midst of a surge in the [outside] community, similar to what happened last spring,” he said. “It’s important for people not to let up their guard.”

Warning signs

With many senior living and care settings already struggling to recruit and retain when the first wave of positive cases swept through the country last spring, frontline health care workers have not had a break.

In parts of the world where the coronavirus first hit hard, there are already signs of PTSD among health care workers. A [study](#) of nurses in China exposed to Covid-19 released last June revealed a PTSD incidence of 16.83%.

In August, the Centers for Disease Control and Prevention (CDC) released the results of a nationwide [study](#) conducted at the end of June which found that 40% of respondents reported symptoms of anxiety, depression or increased substance abuse. More than 10% indicated thoughts of suicidal ideation over the past 30 days, versus 4% in 2018.

Frontline workers in long-term care must contend with stress from actual and feared exposure to coronavirus at work, and financial loss if they miss extended time from work due to quarantine or other illness. Moreover, while frontline staff have adapted to wearing personal protective equipment (PPE) as the pandemic endures, the current surge in positive cases and deaths dovetails with concerns expressed by some segments of the population about getting vaccinated, Agronin told SHN.

“The challenge [now] is addressing many of the concerns people have about the vaccine, especially with frontline caregivers,” he said.

Proactive approaches

In the early weeks of the pandemic, Miami Jewish Health took several steps to address the mental and emotional

wellbeing of its staff. The provider established a staff hotline to field workers' concerns, whether related to medical conditions or mental health, Agronin said.

Miami Jewish Health has a mental health staff on its campus, consisting of two psychiatrists, two psychologists, and a nurse. This team regularly circulates among the workforce to develop relationships and touch base with staff, remind workers that the mental health team is available for any questions and concerns, and to urge frontline workers to share when they might feel they need more intense clinical contact, at which point they will be referred to the provider's employee assistance program for counseling.

Another strategy that made a difference in staff wellbeing and controlling anxiety is assigning a full-time doctor to communicate with anyone who has questions about Covid-19, and assists staff members who test positive for the coronavirus with managing their quarantines and organizing when they can return to work.

"This doctor has played such a key role in reducing the routine anxiety people will have regarding testing and general management of Covid-19," Agronin said. "He's an amazing resource for anyone who has questions or concerns."

ALG Senior also sprang into action to protect the wellbeing of its staff, Chief Human Resources Officer Mary Raddant told SHN. The Hickory, North Carolina-based operator — formerly known as Affinity Living Group — supports a number of communities across the southeastern U.S.

ALG Senior did several rounds of resilience training for its leaders to make them more self-aware on what actually is useful and helpful for them to elevate the mood of workers. Pastoral counseling is offered for interested groups and individuals. And ALG Senior improved its employee assistance program, so that every employee and their families, including part-time staff, can have up to three counseling sessions for free.

"With what everyone has been going through — not just in our local communities but in the entire world in this last year — it's been a very different experience, and one that has been challenging for all of us," Raddant said.

A war with no winner

What is not in doubt is how frontline workers have risen to the challenge during the pandemic.

As communities across the country went into lockdowns, frontline staff became the primary connections to residents, and served as conduits between residents and their families during Covid-19's early weeks while residents learned how to handle communication tools such as tablets to keep in touch with their loved ones.

The stress employees continue to endure is undeniable and in many instances, cannot be placed into words. One frontline worker at Revera Senior Living compared caring for residents during the pandemic to "a war that had no winner" in a [report](#) detailing the provider's Covid-19 response.

That compassion and fatigue is constant across the industry, ALG Senior Chief Medical Officer, Dr. Kevin O'Neil, told SHN. This is why the operator consistently reinforces to its staff the importance of self-care and wellbeing.

"You can't help others if you're emotionally and physically depleted yourself," he said.

To that end, the human resources departments at ALG Senior and Miami Jewish Health frequently collect data and conduct surveys among staff to gauge their job satisfaction and identify signs of burnout.

Agronin believes these check-ins reinforce workplace relationships, and the feedback received enables leadership to take immediate action.

“Surveys work really well, because then we can take our time to analyze it and go through [the data],” he said.

Vaccinations not a reset

The arrival of vaccines to long-term care signal that the fight against Covid-19 has turned a corner. But it will still be months before a post-pandemic landscape is clear.

Attention will now turn to educating staff on the benefits of vaccines. Many nursing homes, and to a lesser extent hospitals, are seeing staff [reject being vaccinated](#). Some administrators have taken to incentivizing staff to get vaccinated. Still, in some instances, 80% of staff are rejecting vaccinations.

ALG Senior is undertaking educational initiatives to educate its frontline workers on the benefits of receiving the vaccine as a moral imperative to protect themselves, their families and the residents in their care, O’Neil told SHN. Once those efforts have been exhausted, ALG Senior will make staff vaccinations mandatory, similar to how the organization requires all staff to receive flu vaccines every year.

He compares this approach to seat belt laws: flouting those jeopardize the driver as well as others.

“We all value our autonomy to refuse or consent to medical treatments,” he said. “But your autonomy ceases when your actions can jeopardize others in the population.”

Miami Jewish Health is also undertaking an educational initiative to break down resistance among its frontline staff toward being vaccinated. Agronin is confident that, as those who resist see the impact of people being vaccinated, it will do more to assuage lingering fears than any outreach.

“It’s ironic that even as we have a vaccine, and we see the light at the end of the tunnel, we still are in the midst of this pandemic, as strong as we were last spring,” he said.