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Visitation, Vaccination, Essential Caregivers Highlight State Reopening Plans for Assisted Living

Written by: Kimberly Bonvissuto

3/22/2021

As vaccination rates increase among senior living residents and staff, states are following the federal government's lead in relaxing restrictions.

The California Department of Public Health updated its [guidance](#) in early March to expand opportunities for close contact, indoor, in-room visitation, as well as infection control measures for fully vaccinated residents and visitors. An "[all facilities letter](#)" indicates that long-term care facilities can adjust visitation guidelines according to their specific needs.

Following Centers for Medicare & Medicaid Services and Centers for Disease Control and Prevention guidance, California is allowing in-room visitation for fully vaccinated residents regardless of county COVID positivity rates, although visitors in high community spread counties will need to produce a negative COVID-19 test before visits. Visitors also will be required to wear masks and socially distance.

Compassionate care visitation also must be permitted, the state said, although visitors will be screened for COVID-19 symptoms, undergo routine testing at least weekly, wear a surgical mask while in a building and restrict their movement to a resident's room or other location designated by the facility.

Communal dining, group activities and non-essential personnel and contractor services can resume as long as masking and social distancing practices are followed.

Similarly, the North Carolina Department of Health and Human Services [updated its visitation guidance](#) for assisted living communities and other long-term care facilities to allow in-person visitation in most circumstances. In addition to updating its guidance, the department also rescinded a previous order restricting visitation in those

settings. The updated guidance no longer requires quarantining for fully vaccinated residents and lifts work restrictions for caregivers who are fully vaccinated.

In [South Carolina](#), all assisted living communities and nursing homes now required to allow outdoor visitation under updated guidelines announced Friday. All facilities also are required to allow indoor visitation, with few exceptions.

[Michigan](#) also issued visitation guidance for residential facilities on Friday. Facilities are advised to schedule visits but limit their duration and limit visitor movement, conduct health screenings, wear masks and follow safe hygiene practices, practice physical distancing, staff accordingly, optimize outdoor spaces, encourage outdoor visitation whenever possible, and conduct point-of-entry testing of visitors whenever possible.

[Pennsylvania](#), [Minnesota](#) and [Indiana](#) also are urging the state's senior living and other long-term care facilities to implement visitation guidance issued by CMS, which includes allowing compassionate care visits. The guidance allows fully vaccinated residents to have close contact with visitors wearing masks and allows indoor visitation at all times, regardless of vaccination status of the resident or visitor.

Exceptions exist, however, including limited visitation for unvaccinated residents living in counties with a 10% or higher COVID positivity rate or living in facilities with 70% or less of residents vaccinated. In addition, COVID-positive residents and those in quarantine should refrain from visitation until they meet criteria to be released from quarantine.

Minnesota also allows vaccinated residents to visit with other vaccinated individuals outside of their communities without requiring quarantine on their return, including attending worship services or other events, or shopping or eating in public establishments. The Minnesota Department of Health encouraged those outings to take place in counties with a positivity rate of less than 5%.

The New York State Department of Health also released new [guidance](#) for visitors at assisted living communities, allowing visits in private homes. But the Empire State Association of Assisted Living said that strict rules remain, including shutting down all visitation with a single positive case in a facility. Visits in private homes also require everyone to be masked and socially distanced. The number of visitors is limited, and COVID-19 screenings remain in place.

North Dakota [rescinded two executive orders](#) from Gov. Doug Burgum, giving assisted living communities more latitude in decision-making around visitation. With more than 85% of the state's long-term care residents fully vaccinated, the state has shifted to locally driven decisions in assisted living communities. The state also is providing testing supplies to all long-term care facilities as they transition to a post-vaccination phase.

Burgum rescinded two executive orders requiring assisted living communities to conduct routine COVID-19 testing of residents and staff members. Facilities are strongly encouraged to collaborate with the states' Vulnerable Population Protection Plan team and follow the continuing recommendations on testing, service and visitation in accordance with CDC guidance.

Essential caregiver training

Oklahoma is reopening visitation at assisted living communities and other long-term care facilities to visitors who complete state-certified essential caregiver training.

The updated "life-altering" [guidelines](#) from Gov. Kevin Stitt and Health Commissioner Lance Frye, M.D., allows residents to designate one or more essential caregivers for in-person visits. Those caregivers need to undergo

a 15-minute, state-provided online training before visitation can begin.

“This new guidance is life-altering for Oklahomans living in long-term care centers and their family members who have been separated for so long,” Deputy Commissioner of Health Innovation Travis Kirkpatrick said in a statement.

The [enhanced visitation plan](#) has different requirements, depending on the vaccination status of both the resident and the visitor. If both are fully vaccinated, then masking still is required, and proof of vaccination must be provided. If neither is vaccinated, then a mask and proof of a negative COVID-19 test or an on-site rapid test may be required for a supervised, no-contact visit. If only one of them is vaccinated, then a mask and proof of a negative COVID-19 test is required for a non-supervised contact visit.

The state is providing long-term care facilities with personal protective equipment for visitation, as well as access to rapid COVID-19 tests “to give a holistic approach to prevention.”

Some states are rescinding previous orders regarding visitation and directing communities to follow recent guidance updates from the CMS and CDC.

Vaccination expansion

The Ohio Department of Aging launched a [COVID-19 Vaccine Maintenance Program](#) to continue providing vaccines to assisted living communities and nursing homes as the federal long-term care vaccination program ends. The intent is to vaccinate new employees and residents, as well as provide additional vaccination opportunities to anyone who was not vaccinated during initial on-site vaccination clinics.

Ohio Gov. Mike DeWine said that 77% of assisted living communities and 93% of nursing homes have signed up with the state for those additional vaccines through local pharmacies. The program has delivered 16,000 additional doses to those facilities, with an additional 30,000 doses scheduled through the end of March.

Pennsylvania’s Department of Human Services also recently announced that the state [expanded its partnership](#) with Rite Aid Pharmacy to vaccinate 9,000 older adults and individuals with disabilities participating in the state’s home and community-based long-term services and supports program.

The effort will extend vaccine access through vaccination clinics in March and April. More than 397,000 vaccine doses were administered in Pennsylvania through the federal Pharmacy Partnership for Long-Term Care, and more than 20,000 vaccines were administered through the Rite Aid partnership to residents and staff of long-term and congregate care settings.

Invalidating fines

Florida Gov. Ron DeSantis recently invalidated fines that local governments have used against businesses violating COVID-19 rules. The order did not cancel fines for violating state orders or those issued to assisted living communities, hospitals or other healthcare providers, however.

The [Orlando Sentinel](#) reported that a few local governments reported issuing approximately \$1.9 million in fines since the beginning of the pandemic. It was unclear whether DeSantis’ the order allows businesses to recoup fines they’ve already paid.

DeSantis previously suspended the collection of fines against individuals in September.



Long-term Care Staff Vaccine Hesitancy: Safety, Efficacy, Newness, Distrust Top Factors

Written by: Kimberly Bonvissuto

3/22/2021

Safety, efficacy and the newness of the COVID-19 vaccine, as well as distrust of the government, were among the major factors that long-term care and other healthcare workers cited as reasons for not receiving a coronavirus vaccine in a recent survey.

The Kaiser Family Foundation and Washington Post surveyed 1,327 [frontline healthcare workers](#), including workers in assisted living communities, nursing homes, hospitals, doctor's offices, outpatient clinics and home healthcare. The survey was conducted Feb. 11 to March 7 online and via telephone.

As of early March, just over half (52%) of such staff members — including 50% of employees in assisted care facilities and nursing homes — said they had received at least one dose of a COVID-19 vaccine; 42% had received both doses of a two-dose vaccine. Among assisted care and nursing home workers, 15% indicated that they had scheduled or planned to receive a vaccine, 11% had not made a decision, and 24% said they did not plan to be vaccinated.

Vaccination rates were particularly low among long-term care and other healthcare workers who were Black, worked in lower-paying jobs or had attained relatively less education. Those findings came despite such workers being prioritized for vaccination in every state.

Less than half of Black (39%) and Hispanic (44%) healthcare workers reported receiving a vaccine, compared with 57% of white workers, mirroring disparities found in vaccine uptake rates among the national adult population.

Of frontline healthcare workers who said they had received a COVID-19 vaccine from an employer, 90% worked in assisted care communities or nursing homes, compared with 93% of those who worked in hospitals, 79% in doctor's offices or outpatient clinics and 69% of home health workers. The vast majority of the workers (70%) who were able to get vaccinated through their employer said that vaccination was easy to schedule.

Reasons for hesitancy

Concerns about vaccine safety and effectiveness were major factors in why some frontline healthcare workers said they had not received a vaccine.

Among the nearly half of healthcare workers who had not received a vaccine, 82% said that worries about potential side effects had stopped them, whereas 81% said they were taking a wait-and-see stance because the vaccine is "too new." Approximately two-thirds (65%) said that distrust in the government to ensure safety and effectiveness of the vaccines was a major factor in their decision.

A [task force of behavioral science experts](#) looking into vaccine hesitancy among senior living and skilled nursing staff members encouraged operators to focus their efforts on the “movable middle” by making vaccination easy, building trust in vaccine safety and offering incentives for vaccination.

LeadingAge also recently hosted a [town hall](#) in partnership with the Black Coalition Against COVID to address staff vaccine hesitancy.

Employer mandates

Some senior living providers are mandating employee vaccination as a condition of employment. [Atria Senior Living](#), [Juniper Communities](#), [Civitas Senior Living](#) and [ALG Senior Living](#) have implemented mandatory COVID-19 vaccination policies in recent months.

According to the KFF / Washington Post survey, of those who were not self-employed and who said they were either undecided or did not plan to be vaccinated, 65% said they would leave their job if their employer mandated vaccination, compared with 34% who said they would agree to vaccination.

According to the [CDC COVID Data Tracker](#), 2.7 million residents and staff members in assisted living facilities and nursing homes have been vaccinated.



New HHS Secretary Becerra Considered 'Friend of Long-term Care Causes'

Written by: Kimberly Bonvissuto & Lois A. Bowers

3/19/2021

Thursday's news of California Attorney General Xavier Becerra's confirmation as secretary of the U.S. Department of Health and Human Services was met with enthusiasm and pleas for pandemic-related federal resources from the senior living industry.

The Senate narrowly confirmed Becerra, the son of Mexican immigrants, as the first Latino HHS secretary in a 50–49 vote. Sen. Susan Collins (R-ME) joined Democrats in approving his nomination.

Becerra's top task will be combatting COVID-19. In his nomination, the Biden team noted that Becerra played a significant role in passage of the Affordable Care Act and other [initiatives](#) that align with key concerns of the long-term care industry.

He will lead a department that includes the Centers for Medicare & Medicaid Services; the Centers for Disease Control and Prevention; the Administration for Community Living, which includes the Administration on Aging; and the Food and Drug Administration, among many other agencies and offices.

Senior living industry experts said their focus will be on sharing with Becerra the critical need for federal resources during the ongoing pandemic.

“We are continuing to reach out to new members of the Biden administration, including Secretary Becerra, to ensure we continue to bring to light the tremendous impact the pandemic has had on senior living communities, residents and staff,” Argentum President and CEO James Balda told *McKnight’s Senior Living*.

Senior living providers have [lost more than \\$15.4 billion](#) due to the pandemic, according to calculations from Argentum. Balda conveyed that figure to Becerra in a letter on Thursday, asking that senior living operators be “urgently prioritized” for distributions from the Provider Relief Fund.

David Schless, president of the American Seniors Housing Association, said senior living has been on the front lines of the COVID crisis and has not received enough government relief relative to the “enormous cost and loss incurred.”

“We are hopeful that the secretary will make additional funds from the Provider Relief Fund available to senior living to cover losses and expenses in the second half of 2020, as he indicated was his top priority during his confirmation hearings in response to a question from Sen. Susan Collins,” Schless said.

LeadingAge previously shared that it welcomed Becerra’s [nomination](#) and considered him a “friend of long-term care causes.”

“His advocacy for access to healthcare and his interest in aging and long-term care services during his 10 years in the House of Representatives point to the attention he is likely to give to the needs of older adults during this pandemic and beyond,” LeadingAge President and CEO Katie Smith Sloan said.

A spokesperson for the National Center for Assisted Living said that given the “tremendous tragedy and challenges” of the past year, the association hopes to work with Becerra on “ensuring that long-term care is regarded as a pivotal part of our healthcare system and prioritized for ongoing resources in order to battle COVID-19.”

“When we get through this, we hope to have a national discussion with HHS and other stakeholders about how we can learn from this experience and properly support long-term care facilities as we prepare for a rapidly growing elderly population,” NCAL said.

Senior living-related cases

As California’s attorney general, Becerra’s has been involved in several senior living-related cases, not always siding with operators. Just this week, he was part of a coalition that [filed a lawsuit accusing Brookdale Senior Living](#), the country’s largest senior living company, of lying to the Centers for Medicare & Medicaid Services to inflate the star ratings awarded to some of its California skilled nursing facilities and of improperly handling discharges and transfers from SNFs.

In February, Becerra announced that a nurse providing care to a former California assisted living resident had been [charged with felony elder abuse](#) for failing to properly assess the woman’s failing health, ultimately leading to her death.

Earlier this year, Becerra elevated and expanded The Golden State’s [efforts to uncover and pursue fraud, abuse and neglect cases](#) by announcing additional resources for the California Department of Justice Medicaid Fraud Control Unit, making it a full-fledged division.

In 2019, he said that his office would “[vigorously go after facilities](#) that violate the law and endanger the residents they are charged to care for” after the owner of a senior living community was found guilty of elder abuse and involuntary manslaughter in connection with the death of a resident with dementia who was struck and killed by a car while he was out walking or jogging.

Becerra also was one of five attorneys general filing a lawsuit in 2019 [challenging a federal rule](#) they said targeted working immigrants and their families by creating unnecessary new barriers to lawful admission to the United States. The “public charge” rule potentially affected older adults and their caregivers, according to one advocacy group.

He also has supported California’s [aid-in-dying law](#), which lets doctors prescribe lethal medications to patients who are determined to have less than six months to live.

SENIOR HOUSING NEWS

Rise of the Clinical Executive: Senior Living Providers Expand Expertise in Light of Pandemic

Written by: Chuck Sudo

3/18/2021

Senior living’s response to Covid-19 over the past year cemented the industry’s years-long paradigm shift toward greater clinical capabilities and integration across the care continuum. This shift was ongoing, pre-pandemic, due to rising acuity among residents and shifts in health care payment systems, among other factors.

Especially in light of Covid-19, providers throughout the space are investing in expanding clinical capabilities and expertise, including adding chief clinical officers or similar roles to leadership teams, or bringing new talent into these positions. Recent examples include Milestone Retirement, which [named](#) a chief clinical officer; JEA Senior Living, which [hired](#) a new VP of clinical services; and Ascension, which [brought on](#) a chief medical officer of senior care.

Such leaders are tasked with building and recruiting for other clinical leadership positions, forming partnerships with health systems, leveraging data and technology to achieve favorable health outcomes, and work with sales and marketing teams to use clinical expertise as a tool for generating leads and increasing occupancy.

Clinical leaders must accomplish these goals but strike a balance between health care and hospitality, which still plays a prominent role in the space, Senior Lifestyle Corporation Chief Clinical Officer Paula Adams told Senior Housing News.

Adams spent her entire career in positions across the health care continuum before [joining](#) the Chicago-based operator — which has a portfolio of about 200 communities across the country — in 2017. She compares the paradigm shift within senior living now to how boutique hospitals changed the makeup of the acute care sector 20 years ago, by adopting elements from hospitality to a health care setting.

The successes of blending hospitality and acute care means that there are clinicians with experience in both

realms, which will be essential for providers looking to hire clinicians for their C-suite.

“You’re merging the two worlds,” she said. “Fortunately, there are [clinicians] out there who can do both.”

Instilling confidence in consumers

Covid-19 highlighted the importance of having robust infection control systems and strong clinical partnerships in senior living, and the pandemic also dramatically eroded occupancy across the industry. Strengthening clinical capabilities and rebuilding census are goals that go hand-in-hand, and clinical executives can drive both objectives.

Having clinicians in executive roles provides sales and marketing teams with another tool to generate leads and interest from seniors and their families considering a move to senior housing. Moreover, it provides peace of mind among prospects and their loved ones that their health care needs will be addressed, ALG Senior Chief Medical Officer, Dr. Kevin O’Neil, said during a recent webinar hosted by SHN.

Hickory, North Carolina-based ALG Senior supports around 160 communities across the Southeast U.S., and a significant portion of its move-ins have done so because of a health care need.

“It’s important that this is a marketing advantage to know that these health care needs and the wellness needs of our residents are being addressed,” he said.

Clinical leadership can take the lead in effectively communicating with residents, potential move-ins and their families on a range of subjects, from everyday health and wellness needs to changes in a provider’s response to extreme events such as Covid-19, Dr. Sandra Petersen, consultant to Pegasus Senior Living’s health and wellness team, said during the webinar.

Petersen started working with the Dallas-based provider in February 2020, to help it launch a new memory care program. The pandemic forced her to become a [“field commander”](#) in Pegasus’ Covid-19 response. The provider operates a portfolio of 37 communities.

In addition to spending her entire career in health care, notably as a geriatrician, Petersen spent five years in the Texas National Guard, working in disaster management. The mix of experiences prepared her for her current work.

“Training is a huge need across the organization,” she said. “We’re busy and trying to keep on top of all the regulations and the quick changes that are happening, especially as we see the states starting to open up some.”

Senior Lifestyle recognized the shift to a health-care based model years ago, and the clinical team regularly works with the provider’s sales and marketing teams, updating them on clinical initiatives and advancements and their results, so that sales leaders can introduce this information to prospects.

Especially during Covid-19, prospects and their families are updated on Senior Lifestyle’s infection control protocols — what is being done to keep communities safe and clean, the impact of infection control on dining programs and activities, and how infection control will evolve as initial vaccination efforts in long-term care wind to a close.

“Our prospects and their families need reassurance, and rightly so,” Adams said. “The education to the sales team from the clinical team was tight before; it’s even tighter now to make sure there’s a clear understanding, and it can be communicated.”

Building clinical partnerships

Clinical executives are expected to be the point people in building relationships with health systems and third-party vendors across the care continuum. These services can include in-house rehab and mental health partnerships, pharmacy services, telehealth and telemedicine initiatives, and home- and community-based services.

The shift in senior living to a health care-based model makes third-party partnerships critical, Petersen said. And these partnerships will become more essential as a growing number residents struggle with the effects of over a year of isolation from families, friends and each other.

“We’re seeing this huge mind-body connection that we know is a big part of geriatrics,” she said. “Supporting that through mental health services is something that is critical.”

Adams has spearheaded several joint venture initiatives with third-party vendors during her time at Senior Lifestyle. Notably, one of its pharmacy partners also has a wellness and rehab therapy program, enabling seamless coordination between a resident’s pharmacist, rehab specialist, physical therapist, wellness director, and the provider.

“It’s an exciting adventure for us because, in the past, [the process was] very fragmented,” she said.

Senior Lifestyle uses telehealth and telemedicine services in its skilled nursing cohorts, and Adams sees potential for expanding that to lower acuity levels of care. The provider piloted a telemedicine program in a handful of assisted living facilities last year, but it struggled because it involved multiple physicians for each resident, instead of a primary caregiver as on in the nursing home side. But the provider plans to continue exploring ways to expand the service to lower acuity settings.

Most recently, Senior Lifestyle implemented electronic health record (EHR) and medication management platforms. And the provider worked with Salesforce, which rewrote its Risk Connect online incident report platform in order to enter Senior Lifestyle’s Covid-19 community data so that updated information was available to residents and families daily.

Adams believes that technology will expedite the gathering of data, using it to explore and improve resident outcomes, and Senior Lifestyle will continue to explore ways to implement tech moving forward.

Stronger health system alignment

Perhaps most importantly, a clinical leader drives alignment with a health care system.

Most of ALG Senior’s resident population receives Medicare or Medicaid benefits, or both, O’Neil said.

He recognizes that most of the residents in ALG Senior’s communities will eventually be involved in a value-based care system in the future. The paradigm shift is an opportunity to create an integrated care model, while not losing sight of the hospitality elements that initially attract seniors to the space.

An integrated care model allows providers to get residents the preventative care they need on site, reduce the need for emergency room visits and EMT calls, drive more positive health outcomes and allow residents to stay in communities longer.

“We have to understand that the vast majority of our residents do have significant health care needs,” he said.

“Much of that can be better addressed by having providers who are coming on site, and having clinical leaders that will help oversee the type of care and the quality that’s being provided.”

Covid-19 is also presenting the industry with clinical leadership opportunities to strengthen providers’ position within the health care continuum.

Prior to the pandemic, ALG Senior actively positioned itself as a valued partner for hospitals and managed care organizations, O’Neil said. He believes there is a great opportunity for providers to become part of a larger health care ecosystem.

For O’Neil, the pandemic provided openings to look at alternatives for providing necessary geriatric care and help residents achieve positive outcomes in mobility, mentation, medication and resident engagement. This allowed ALG Senior to become more hands-on with exercise programs in non-group settings, and review prescriptions protocols to ensure that anti-psychotics were not being over-prescribed.

At ALG Senior, a significant area of focus is centered on addressing geriatric programs in communities without adversely impacting the safety and quality of life and quality of care of our residents. O’Neil compared the review to inspecting a ship as it was about to leave harbor, to ensure that it was free of dents and leaks. To ensure ALG Senior’s protocols were satisfactory, his team worked with human resources and facilities management teams, incentivized workers to reduce turnover and address outbreaks in communities as they arose.

“I’ve always said geriatrics is a team sport,” he said. “It’s all of us working together.”

SENIOR HOUSING NEWS

Mather, Kendal Use Data and Creativity to Recharge Referrals during Covid-19

Written by: Tim Regan

3/16/2021

When the Covid-19 pandemic hit, many referral sources wilted — but in the year since, some providers have found a way to keep leads flowing by utilizing digital messaging, harnessing data and investing in less-traditional sales and marketing channels.

For example, when more traditional sales methods used by Kendal Corp. lost effectiveness last spring as the pandemic gained steam, the organization realized it had to act fast in ramping up its ongoing digital marketing strategy.

And Kendal is not the only senior living provider to have switched up its sales and marketing tactics to better capture leads and referrals in the age of Covid-19. Evanston, Illinois-based Mather also upped its digital game when the pandemic struck last year. The organization’s sales and marketing teams overhauled their digital marketing efforts to include more paid search and mobile-friendly web layouts.

“It’s been all about investing in digital tools, and our digital partners, to understand where we should maximize our efforts,” Brenda Schreiber, Mather’s senior vice president of marketing said during the recent SHN Sales Summit.

Restacking the deck

One of the immediate effects of the Covid-19 pandemic was that resident referrals — once a reliable source for move-ins — dropped off a cliff.

At Kendal communities affected by the pandemic, referrals from residents slowed significantly, according to Howard Braxton, director of sales and marketing at Kennett Square, Pennsylvania-based Kendal Corp. The organization has a portfolio of 13 affiliated communities.

“Residents were saying to us, ‘We feel very comfortable, we know that players here — the staff, the other residents, et cetera — we know how you’re managing things,’” Braxton said during the SHN Sales Summit. “But we don’t want to be the ones to ask our friends to join us here ... because we don’t know what’s right around the corner.”

Similarly, leads and resident referrals ebbed and flowed with the virus at Mather’s three communities in Illinois and Arizona, Schreiber said.

Both companies responded to the slowdown by doubling down on residents. For example, Kendal began organizing virtual panels where current residents could tell prospects about their experience living in senior housing. The effort was part of the organization’s larger pivot to virtual and live remote events as a result of the pandemic.

Last summer, Mather’s research arm, Mather Institute, surveyed the provider’s residents to get a sense of how they felt living in their communities. The results showed that 88% feel safer living at a Mather community than in their previous homes, and that 93% of residents believe their health and safety are top priorities of Mather.

“We hear from residents that they do tell their friends that they were taken care of, that they had everything available to them,” Schreiber said.

Mather’s marketing team also took those results and added them to the organization’s outreach efforts, with the goal of showing prospects that senior living communities are still safe, engaging places to live.

“I think in the long run, resident referrals will come back,” Schreiber said. “The positivity that the residents shared with their friends has continued this entire time. It’s now up to those folks they referred to inquire and make the move.”

Thinking differently

In overhauling their sales and marketing plans to attract referrals, Mather and Kendal also implemented several new and innovative practices.

Kendal took its marketing efforts a step further by surveying residents, taking notes on the various personality types within its communities and the ZIP codes in which they lived before moving into senior housing.

Specifically, residents were surveyed on their background, interests and hobbies, college history, career and travel preferences. Then, the company created specific email blasts for each ZIP code.

“[We are] segmenting and understanding the population we have within the community already to ... track those same types of individuals from the general community around us,” Braxton said.

The organization also held live video tours where prospective residents or their families could view a walkthrough of the property and ask questions in real time.

“In the first three months that we actually really delved into the video event platform and presentations, we found the increase to be significant in certain areas of prospects attending virtually,” Braxton said. “We chalked that up to people feeling like they could attend last-minute ... or people choosing not to come out to our community because they didn’t feel like leaving their home.”

Doing so resulted in a “windfall” for Kendal, he added.

“It helped us, as we got into July, August, September, to develop a more robust response ... and thus, move-ins really started to come back to us,” Braxton said.

Both organizations are also contacting prospects directly through new methods, such as by texting or through remote video conferencing services.

“Whichever way you wanted to communicate with us, whether it was FaceTime, texting, emailing, Zoom — we’re in,” Schreiber said. “Texting has become very popular, and I don’t see that going away, either.”

Kendal also has noted an uptick in texting and emailing among prospective residents and their families, Braxton said.

Some of those changes in prospect behaviors might have something to do with the way the pandemic altered their preferences. For instance, Mather has noted an uptick in online inquiries, with its forthcoming community in Tysons, Virginia, accounting for nearly 85% of total new prospects — and 70% of that traffic comes from a mobile device.

“We have to ensure that our mobile experience actually converts people to the leads that we need,” Schreiber said.

The organization also has invested more heavily in webinar platforms with greater visibility over prospects, and in more digital tools to aid the sales process.

Traditional methods remain

While both Kendal and Mather implemented new techniques to keep up with prospects and leads during the pandemic, the old ways still remain.

For example, direct mail is still a crucial component in both organizations’ marketing strategies. Mather launched new campaigns to differentiate itself, and put out advertorials extolling the health and wellness benefits of living in senior housing.

“We believe that print ads and direct mail certainly drive traffic,” Schreiber said.

Still, it’s all about finding the right balance.

“We constantly are looking for multichannel opportunities, so, if we’re in print, there’s usually an online version at this point, and possibly even some retargeting ads,” she added.

Both Mather and Kendal also are making inroads with universities, a sector that has in the past collaborated with

the senior living industry but hasn't traditionally served as a big referral source.

"George Mason University [in Fairfax, Virginia] has an arts program, and we were able to get in front of their artists and have a VIP artist meet-and-greet over cocktails to get in front of people," Schreiber said. "[Being] virtual has allowed us opportunities to get in front of the right people in the right time, and create these really wonderful engaging experiences."

Working with universities and other institutions is Kendal's "trademark," and it's something the organization will continue to do, Braxton added.

"It's more of a community awareness builder," Braxton said. "[It's also] lifelong learning for the residents who live with us, as well as promotional opportunities."

While Mather's sales staff don't use leads from purchased lists of emails, Kendal started using them in recent months. The organization uses purchased lists in a similar fashion to how it uses direct mail ads, according to Braxton.

And while both organizations have reinvented their sales processes in big ways in the past year, they are also looking forward to the day senior living communities can reopen to in-person tours across the board.

"While digital and virtual events and chat functions and seeing each other through Zoom or other platforms has been an incredible part of this past year — and I still think we'll continue that into 2021 — the missing piece is really developing relationships at an emotional level," Schreiber said. "I do see in-person coming back, but I see virtual staying with us for quite some time, and taking a hybrid approach all through 2021."