



PEARL CREEK
ADVISORS, LLC

Capital Formation | John Franklin

LEADINGAGE ANNUAL MEETING - A RECAP 11.04.21

Introduction

For those of you who did not attend the LeadingAge Annual Meeting + EXPO in Atlanta this year, (and there were a lot of you), the hope is that the following will convey the atmosphere of the meeting and provide some key takeaways. For those of you who did attend, I hope the following helps you discern your own key takeaways from your time in Atlanta.

The Atmosphere

The 2021 Annual Meeting was my 31st and I almost did not make it. Earlier in the year my co-worker had contracted COVID at an industry conference. And many of my clients were choosing not to attend - for very good reasons. And when two of my co-presenters for one of my sessions chose to cancel, I was ready to throw in the towel. I even communicated to LeadingAge that we should cancel the session. I am glad that Bob Lagoyda at LeadingAge convinced me to do otherwise.



Although attendance was down to 25% of normal, it was so rewarding to reconnect with so many industry colleagues who did attend. And if LinkedIn is any indication, they felt the same way, which helped explain the high level of energy and enthusiasm. And although the Atlanta venue was not conducive to an intimate conference atmosphere, the desire to connect, and the intimate conversations that ensued mitigated the cavernous venue.

What Was Good?

A negative was wearing masks, which made connecting more difficult. On more than one occasion I failed to recognize someone walking towards me until they were right on me, and vice versa.

Thank goodness one COO flagged me down when I initially did not respond. I truly did not recognize her beneath the mask. But thanks to her, we connected and had a great conversation. And **THAT WAS A MAJOR BENEFIT TO ATTENDING THE CONFERENCE** - *meaningful one-on-one conversations with people passionate about our industry*. This does not and will not happen on zoom.

These one-on-one or small group conversations included breakfast with a board member and spouse from a community in Pennsylvania and a meal with a new CEO from a community in Louisiana. LeadingAge was the first time I had met these people, but we connected because of shared passions. And I learned something from each conversation as well as from conversations with thought-leaders like Steve Moran and Jack Cummings and my co-presenters Jill Vitale-Aussem and Ryan Frederick, both authors of terrific books.

Highlights

A highlight of the conference included the Continuing Care Hall of Fame ceremony and dinner at The Georgia Aquarium. My former colleague and now dear friend John Diffey, who served as President and CEO of The Kendal Corporation for many years was inducted. As was Bill Sims, Larry Minnix, past President & CEO of LeadingAge, and Mary Alice Ryan, President & CEO of St. Andrew's Resources for Seniors System.



Another highlight was attending a pre-view of the film "All the Lonely People", which will be released in December. You should find a way to view this documentary and if possible, donate, so that this message goes from being a movie to a movement.



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Some of the stories told by industry colleagues after watching segments of the documentary were both insightful and poignant. If the last 18 months has not taught us anything else, it has taught us that social isolation is just as damaging as COVID-19.



What Was Not Good?

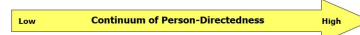
I attended only a few of the sessions, and I have to say they were disappointing. My opinion seems to be shared by almost everyone who came to Atlanta. LeadingAge will need to address this for future conferences. Regarding our own sessions, I was disappointed with the turnout - approximately 25 people at each - but the audiences had energy around our topics - “From Care to Engagement - A New Value Proposition” and “A New Value Proposition -Aligning Your Organization to Empower Residents”.

And that leads me to a general comment on what I thought would be a major theme of the conference - and that is the new value proposition, which most thought leaders and a few non-profit providers are leaning into. After the conference, on our bi-weekly industry call, I asked a group of professionals whether there seemed to be a lot of discussion and energy in Atlanta around changing from a “care model” to a “community/engagement/vitality” model. There was universal agreement that it was not. Although disappointing, it was not unexpected. And I will explain why.

During our presentation on Tuesday, Jill Vitale-Aussem shared a slide which gives an excellent explanation of the “Continuum of Person-Directedness” in the industry by using 5 stages, going from left to right, with Stage 1 being “Provider Directed” and Stage 5 being the “Citizenship Model”, where residents have connection, purpose, and agency. Stage 3 on the continuum is “Person Centered.”

Continuum of Provider-Directed to Citizenship Model

Provider Directed	Staff Centered	Person Centered	Person Directed	Citizenship
<p>Manit. makes most of the decisions with little conscious consideration of the impact on residents and staff.</p> <p>Residents accommodate staff preferences and expected to follow existing routines.</p>	<p>Staff consult residents or put themselves in residents' place while making the decisions.</p> <p>Residents accommodate staff much of the time but have some choice within existing routines and options.</p>	<p>Resident preferences or past patterns form basis of decision making about some routines.</p> <p>Staff begin to organize routines in order to accommodate resident preferences—articulated or observed.</p>	<p>Residents make decisions every day about their individual routines. When not capable of participating needs, staff honor observed preferences and if long habits.</p> <p>Staff organize their hours, patterns and assignments to meet resident preferences.</p>	<p>Residents have influence on the community, they are problem solvers, share responsibility for each other, they are expected to contribute.</p> <p>Organization & staff support people to exercise autonomy, connection and well-being, and work to remove systemic barriers.</p>



Developed by Mary Tess Oddy, Genesis Healthcare Corp. based on the model by Susan Moore and Joanne Rabin, distributed at the Honor Institute, 2005.

I have asked several industry colleagues the following question - how many non-profit organizations have achieved level 3? Most say 20%, even though 80% of senior living organizations self-identify that they are at level 3. There is obviously a disconnect here. And COVID-19 has exposed that disconnect.

The Opportunity

I think we would all agree that COVID-19 has created disruption. And that disruption creates opportunity for change. Past staffing shortages and current lower occupancy, among other challenges, might mean that we should consider doing things differently. At a recent Board Retreat I attended, both board members and staff agreed that if the organization is willing to confront reality and embrace some change, the current challenge creates opportunity.

In a white paper written several years ago I identified parallels between the Hospital Industry of the late 1990's and the Senior Living Industry today, I identified four factors required for success. Two of these were identified yet again in a recent senior living article written by Steve Moran. They are **Great Leadership** and **Sound Technology**. I would also add **Good Systems** and **Intellectual Capital**.

How an organization creates great leadership, intellectual capital, good systems, and sound technology is beyond the scope of this narrative, but it starts with great leadership. And the fact that many of our leaders are more interested in putting their best face forward instead of acknowledging reality and embracing change does not bode well for our industry. However, for those who are willing to do so, COVID-19 presents an enormous opportunity.

Disclosure:

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