The Green House Project

CFI
CENTER FOR INNOVATION

Pioneer Network

BEYOND

NURSING HOMES

Imagining a new continuum of
eldercare unburdened by the past.

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Introduction

Among health care settings in the United States, few have a worse reputation than nursing homes. Research shows that even among eldercare settings such as assisted living communities and rehabilitation centers, "nursing home" is the only category that elicits a negative reaction from a majority of survey respondents aged 60 and older – even before a pandemic that revealed the severe flaws in nursing home care across the world.

But for all their problems, and for all their undesirability, nursing homes remain the cornerstone of the U.S. long-term care system for the simple reason that, in most markets, they're the only Medicare- and Medicaid-covered options. In-home care and private-pay senior housing can be prohibitively expensive even for middle-class families, while attempts to "rebalance" Medicaid coverage toward home- and community-based services vary widely by state and even county.

At the same time, the U.S. is grappling with a care crisis that leaders have seen coming for decades as the population ages and the health care workforce shrinks.

Nothing so far should come as a surprise to anyone who's worked in eldercare at any point in the last 20 years – or even anyone who's just attended a single LTC conference since the year 2000. This white paper argues that that lack of surprise is the root of the problem. While the challenges facing eldercare in America have long been known, the industry itself cannot imagine a future for itself that doesn't look substantially like the siloed past and present.

Talking about shifting care from one setting to another, improving the reputation of nursing homes in isolation, or layering new regulations onto inherently undesirable models doesn't take us any closer to building the future care system that we all deserve.

Even more so than in other sectors, LTC providers are extremely reluctant to look beyond what exists and take cues from other industries to forge new paths forward. But in 2023, the eldercare sector faces a stark decision: Stick with the old ways and fail to provide for the next generation of seniors, or break out of a decades-old rut and create something truly new and different.

The Challenge

C-suite leaders from across the eldercare spectrum gathered for a special session at the Center for Innovation's 2023 Ready to Impact conference in Pittsburgh. After an overview of the current landscape, session facilitator Scott Townsley – an academic and consultant with more than 30 years of experience in eldercare – challenged attendees to create a new system from scratch, unbound by current reality.

To provide inspiration, attendees were encouraged to think completely outside of the current eldercare framework, armed with the knowledge that most great innovations come from outside of any given industry: Kodak, for decades the world leader in film photography, had to be forced by competitors to adopt digital photography despite having the opportunity to lead, while Airbnb caught the entire hotel industry by surprise with its new way of providing lodging.
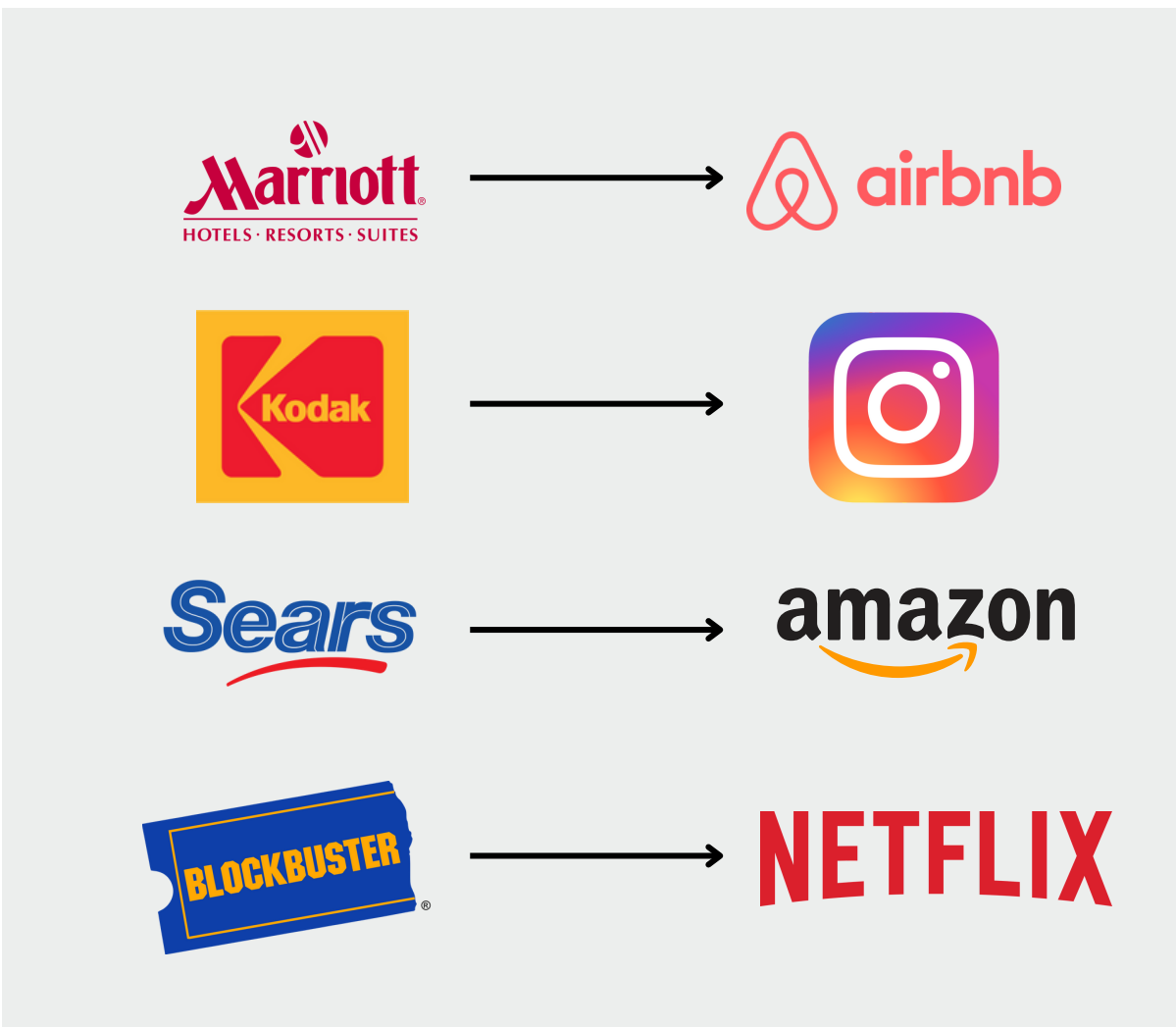
The Results

Divided into groups, attendees came up with their own visions for an ideal eldercare system. While each group had different areas of focus, several recurring themes emerged:

Community

The days of segregating elders into age-specific communities have long since passed. People of all ages require community connections to feel emotionally and spiritually healthy.

Whether it's pursuing familiar hobbies, learning new skills, hosting friends and family, and staying connected with existing social networks – including religious, professional, and cultural associations – the ideal eldercare system of the future must put human connection at the center of care delivery.

Customized

No two people of any age are alike, whether in terms of personality, desires, or care requirements. Far too often, the current "system" forces people into settings that do not meet their specific needs for financial and logistical reasons – think elders living in areas where the only Medicaid-covered LTC services are offered in outdated nursing homes.

Whatever the future brings, providers must offer highly customizable services that meet older people where they are, not the other way around.

Coordinated

"Care coordination" has been a buzz-phrase in health care for years now, but it contains a fatal flaw: In the vast majority of cases, coordination only happens once there's an acute health event to manage.

As we age, we experience growing concerns about specific events, such as running out of money in retirement or experiencing a specific health condition such as Alzheimer's. But we stubbornly refuse to think about a future where we will need increased services and supports – and the industry obliges by declining to offer any concrete options even to those curious about care planning.

A truly coordinated system would provide in-person and virtual care hubs where people can access information, plot out their future options, and interact with independent care coordinators who have no incentive to steer elders into any particular service.

Person-Centered

Similar to customization, the groups all incorporated some element of person-centered care practices in their visions. While the concept seems almost painfully obvious – the people receiving the care should have input into how that care is provided and tailored to meet their specific needs – person-centered care is sorely lacking in many LTC settings, where provider efficiency trumps normal human interactions.

Imagine a CNA waking residents up at 6 a.m. for medication and breakfast without first asking if they're morning people or prefer to sleep in, or requiring residents to press a call button and wait to receive water or a snack.

In a person-centered care system, providers would already know about each person's preferences before they begin receiving the services, allowing for a seamless experience where care recipients feel valued and human.

Location Agnostic

Think about the wide variety of places the people in your life call home, from dense urban centers to sprawling suburbs to lightly populated rural areas and everywhere in between. Similarly, the groups of eldercare leaders had a wide variety of ideas for the physical locations where services could be provided, indicating a desire to move away from the one-size-fits-most world of nursing homes, assisted living communities, and memory care centers.

From an Airbnb-style rental model to all-age community centers to accommodative housing rentals with in-home supports, the places where elders receive care should look as diverse as the places where people of all ages live.

Tech/AI-Enabled

Perhaps due to the LTC community's long-standing resistance to adopting new technology – as evidenced by the number of nursing homes that still fax paper records – attendees were eager to envision futuristic tech solutions, such as an AI avatar that serves as a care coordinator and exercise companion for elders, or online marketplaces that match caregivers and services to seniors needing support.

While we must be careful not to replace human connections with technological simulacra – few people would mistake a robotic pet for the real deal – enhancing elders' lives with technology remains a powerful opportunity.

Conclusions

If eldercare providers continue to rely solely on the ideas and concepts presented at major industry conferences, there will be nothing stopping outside competitors from entering the scene and redefining aging for themselves. The current big names in eldercare will become the Kodaks, the Sears Roebucks, and the Blockbuster Videos of their time – successful giants in one era that didn't have the vision or foresight to adapt before someone else did it for them.

Most white papers end with a neat conclusion for readers to take away, but this one's a little different: There will never be a single conclusion about the future of eldercare that will magically meet everyone's needs, or help leaders build a continuum of care that serves each elder at every point along their aging journeys.

If there's one thing the industry should take from this exercise, it's that one size fits none – and thinking big about the future starts with thinking small and focusing on the individual people and caregivers who make up the eldercare landscape.

As leaders, caregivers, residents, and families alike consider these big-picture questions, here are a few guidelines to follow:

Consider divergent and broad problem statements, not convergent and narrow ones. If you focus on a small problem within the system, you just might fix it – but you'll never address the root causes of those problems. Then, use those problem statements to set massive impact goals versus modest impact goals: There's really nothing in the LTC sector that wouldn't benefit from significant change, so don't negotiate away your big dreams before you even make it to the table.

Embrace diverse perspectives. Don't dismiss the ideas of people without direct long-term care experiences. People who aren't burdened by decades of the status quo are the ones who usually make the most progress by challenging that status quo. But far too often, they aren't even given a seat at the table – and if they are, asking the simple question of "why are things this way?" is seen as "difficult" or "negative."

Choose surprising and disorienting over safe and predictable. The most innovative ideas rarely come from people concerned primarily about avoiding risk or taking short-term profits over long-term success.

Accept being wrong sometimes. Not every idea in this white paper will end up being proven right 20, 30, 40, or 50 years from now, and that's more than okay – because those who determine "right" and "wrong" are often those most entrenched in the current system. If leaders are focused on being "right," they'll end up only generating ideas that conform to the status quo.

If we're lucky, we'll all be consumers of senior services one day. Let's start by thinking of what we'd need to feel at home, and then work toward making that a reality for everyone.
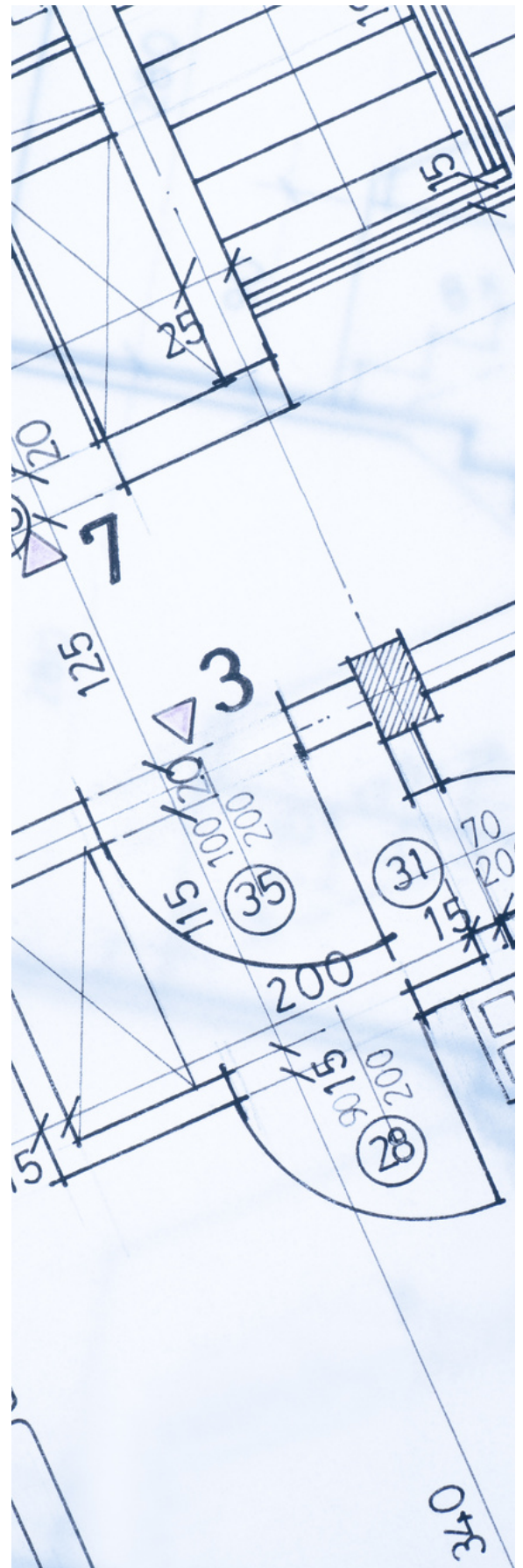
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