Charles de Vilmorin

Thank you so much, Meaghan. Welcome everyone. Welcome to today's Activities Strong Executive edition webinar. As always I'm super excited to be here with you. I think there's two higher reasons today why I'm excited. One is the topic, and obviously this is a very, very important topic is the staffing crisis. So today's webinar is about solving the labor crisis, creating a better culture to attract and keep frontline talent. And the second reason I'm so excited about today's webinar is our esteemed very valuable, fantastic, awesome, amazing speakers.

So we have James Lee co-founder and CEO of Bella Groves and Charles Turner, who's the CEO of KARE. As a quick reminder Activities Strong this executive edition is all about trying to invite our clinical executives in this discussion about the all importance of activities and life enrichment are programming. A Little bit of background on who we are.

Charles deVilmorin

So I am Charles, the CEO and co-founder of Linked Senior. I started in senior 15 years ago now actually. And with two sets of profound values. One is the fact that "Old People are Cool." So this idea that we don't want to segregate on anything even age, and obviously the second thing, the reason why we're all here today is to empower, acknowledge and educate activity and life enrichment professionals. This platform connectivity strong is in partnership with Activity Connection, NAB, and NCCAP. And there's a quick reminder, our work at Linked Senior is to help you engage all of your residents, regardless of the preferences, where we sound physically and cognitively. And we have demonstrated outcomes in the form of a clinical study that was published a couple years ago. Today's presentation, exciting as I said, in many regards. I think that the best way to connect it to activities and life enrichment, and programming is the fact that when we define engagement, we should never forget that it is about creating this collaboration with the elders that we serve.

Charles deVilmorin

Right. So if you ask any activity professional or any life enrichment professional, what is the "why?" Right. Most of you, if not, all of you respond that you show up at work because you want to engage elders and again, collaborate so they can find purpose every day.

That's my quick word of introduction for today's presentation. I'd love to introduce you both. I'd like, I'd love to introduce you to both of our, again, amazing and awesome speakers. And I'll start with James. So James, first of all, thank you so much for coming back as a reminder. Happy to be next. Everyone. Go ahead.

James Lee

Happy to be back.

Charles deVilmoring

Yeah, exactly. James with, with us back in, I think January James, right? January 2021?

James Lee 04:45

One year ago.

Charles deVilmorin

Exactly one year ago. And you know, James, for me, I like the fact that you "one of us," right? You started as an activity professiona I remember.

James Lee

That's right. Yeah. It's and I still describe it as the, the hardest job I've had in senior living and I still hold to that.

Charles deVilmorin

Fantastic. And and obviously our second speaker who has an amazing first name, Charles Turner.

Charles Turner

Yep. Yea

Charles deVilmorin

And I've had the pleasure of meeting Charles years ago in a way consider Charles a friend, but sometimes beyond a friend also kind of a mentor where Charles before starting this fantastic organization called KARE, also worked in senior living, owning and operating different types of buildings. So with that, and a quick introduction, I would all also share the fact that James and Charles both have a fantastic point of common, which is that they live and work in Texas. And with that, I'll let you both start today's presentation and thank you again for joining. Charles, it's yours.

Charles Tuner 05:56

Great. Yeah. Thanks. That was an unnecessary and mostly untrue introduction for me. You can go on a lot more about James than me, but yeah, my background, I just a little bit more about it.I I've been still, I am actually an owner and operator of buildings kind of all over the Sunbelt. Before that kind of a background in technology, I can't say I'm a technical person at all.

But in 2019, a bunch of folks in the industry, industry leaders said, "hey, we need to get together and solve this labor problem." We're studying some what others were doing in the acute care space, but realizing those solutions would never scale for us. And so that's where we created Kare, Kare with a K it's why is it Kare with the K? There's no reason.

Charles Tuner

And we just wanted to be obnoxious. And those of y'all who know me I thrive in being obnoxious and immature for being almost 48 years old. We've helped a lot of communities. We're probably in 22 states, we'll be in all 50 states by the middle of this year hopefully. Helping fill open shifts, way less than the staffing agency, way less than paying overtime and things like that. And because of that we have tens of thousands of folks that work on our platform, and I say folks, meaning frontline caregivers, nurses, you know, CNAs, med tech LP, and LVNs RNs and, and some hospitality workers in some states. We have a rich, it's call database of people to hang and ask questions of. A lot of times you see workforce surveys and we ask the facilities what they think they're doing right.

Charles Turner

But it's really hard to ask, how do you get a whole bunch of frontline workers and, and ask them what they think? And so that's where James and I came up with with this study, basically asking questions. Okay. We asked the facilities from communities and we asked the frontline workers the exact same questions. Why do you want to work for a community? Why? Why do you not? Why do you come and why do you go? And see where they agreed and where they disagreed. A lot of this was or commissioned by the Texas Assisted Living Association. James and I are both in Texas, we sit on some committees there. But it's kind of taken on a life of its own with the study. We've been working with Argentum and we're working with ACA, we've been working with a lot of organizations. We're actually in the process of adding more, there's a lot of questions that we got a great responses, but sometimes James and I are like, "well, why did they answer that way?"

Charles Turner

And we kind of double click down on some of these questions. Everybody loves it when we talk for an hour and we just present charts and graphs. A good nap. I hope we won't put everybody to sleep. But James, I don't know if you have any more color on the origin of this and, and more about Bear Wise and Bella Groves.

James Lee 08:56

No, the origin is good. I'll just repeat a little bit of what original Charles said. I come from an activities background, so I was a caregiver first and then an activities director after that. So this study is very, very personal to me, the results that came through. And the main question we have today, and the reason all of you are on this today is, what does this have to do with activities? So we're going to try to answer that, not just from Charles Turner and I's perspective, but also inviting you. I do recall last time I was on this, that it was the fastest, like most active chat session I've ever seen, so expecting more of that out of this group. But that is the central question. We're gonna present a lot of data, well, some data and some kind of commentary around what we think are some big takeaways from the study. But I challenge this group to make it relevant to your profession activities, and let's kind of get there together.

Charles Turner

And so I guess without further adieu, and my stupid joke I always have to make is why do we always say without further adieu? And what if someone wants more of it? I don't know what adieu is to be honest with you, but apparently we went less of it in our lives. Okay. I'm gonna share, let me know. I struggle sometimes with this. Can you all see my screen? Let me do that, click on point and click.

Charles Turner 10:37

I've tried to turn off my Slack notifications, but my relentless on Slack. They're still popping up, so hopefully nothing's embarrassing. But then you get to see how the sausage is made at KARE.

We've talked a little bit about the nature of the study and the why behind it. And we wanted to spell, we wanted to see if there was any myths we needed to dispel. Look as an operator. As a forboard, recovering operator for me, culture was paramount, right. And, and we've gotta build the right culture.

One of the things that I'll speak for myself is that one of the big outcomes of this study and we've cross referenced with some other folks like Best Places to Work and things like that.

Charles Turner

It turns out the conversation around culture, at least as we define it as an industry is, I'm going to say this and just make people mad, but it's generally a colossal waste of time. We're going to go through that in a little bit. There's some caveats to that, but what I think I always conceived of as culture and what, why we couldn't get what I wanted to do as a company down to that frontline workforce, let's just kind of unpack some of that. We'll get to that at the end, but there are some pre preconceived notions. Now, the first thing we're going to do, we're gonna actually talk about a little bit of the good news, right? A lot of the things that we even assuming as an industry, gosh, "we just can't pay the same as an Amazon or Walmart," or what have you.

Charles Turner

And so we asked these questions to our frontline workforce. We asked if they were going to pay you 20% more on Amazon or Walmart or something outside of our industry was going to pay 20% more, would you leave? The interesting thing that this data shows is that by and large, no. They don't want to leave. James made a really, it always makes a really good point when we go through this is that he says, "they don't, they don't wanna leave." They want to stay where they are. They just wanna be paid fairly to do that." Now we can debate what "fairly" means, and, and we're not labor economists. But they want to be paid fairly. So the reason is something that's not inherent in this, but we do a lot of research studying sort of the psychological aspects of, of a frontline care.

Charles Turner

We had a PhD industrial psychologist several years ago said to me, "Charles, what you have to understand about a frontline - the general psychological makeup of a frontline worker and senior care is almost identical to the psychological makeup of a drug addict."

And at first I got very like, violently reactive to that strongly because I thought that was very insulting. He's like, no, I'm not saying they're drug addicts. But he says, "if you look at what a drug addict does, a drug addict uses not to feel high, but really, to feel normal or to feel I guess reinforced." And he says, "if you look at the front, a lot of our frontline workforce a lot of them may have maybe they have poor life skills, or maybe they struggle with things at home that are out of their control."

Charles Turner

But he says, "when they're in front of a senior and they're providing care, they get a dopamine hit and that's very profound for them." So when they get that dopamine hit, call it not a high cause that's insulting, but they actually feel reinforced, for the one time in their life they feel reinforced, right?

It's not how they react to each other, how they interact with their peers, and their management, it's how they react to that senior. And so when you start to understand the psychological makeup of a frontline workforce, it starts to redefine culture. But that's why they want to stay in this industry, they can't get that same dopamine "hit," by working in a Walmart. And we've see this a lot. In KARE, we have people that work on our platform, maybe part-time and they work at a retailer, whatever, but they always come back to senior care.

Like in my mind, this is how identify. This is this is where I go." thought this is interesting. It's a little more optimistic than we're probably seeing that people actually by and large, people want to say saying this workforce.

James Lee 15:07

The big picture of our study was really to question do we have different perceptions on the problem? I think, well, all of us can just kind of intuitively say, "yeah, we're owners and caregivers are looking at the problem differently," but what we wanted to do was put some data and substance behind that.

In our study, in our actual paper that we wrote we, we characterized this as if the results of the owners were a person, what would that person think or feel about caregivers? And so this slide tells you 80% of the kind of leadership believe that, "hey, yeah. If, if somebody else offer 20% more pay, we're going to lose all our caregivers." If you have that mentality about your workforce, that while pay is certainly important, if owners believe there's nothing we can do.

James Lee

If others pay more, we just simply are going to lose the caregiver kind of workforce issue. But if you look at that compared to what caregivers actually told us, 50% of them agreed, but that's still a 30% discrepancy. And to me, the most telling part about what you see on the screen here is that big orange line on the right hand side of your screen. That nearly 30% of people unequivocally said, "even if they paid more, I strongly disagree that I'm gonna leave senior living."

The upcoming slide is also gonna question another assumption that I think owners and leaders have, which is, "you know, well, because of COVID everyone, all the caregivers are rethinking being in our industry in the first place." So clearly you see a even more contrast than the first question. I think what this did for us, for Charles and I when we looked at this was, first of all, we need to share this with other PE with other people that our assumptions are just wrong. And earlier Charles said, "we need to double click and kind of dig to the second level question," which is where we want to go. But I think if we're going to change a problem, we have to question, "are we looking at the problem the right way?"

Charles Turner

I completely agree with you. This data also reinforces a lot of stuff. There are other studies that say, let's talk about the order of magnitude of what you call the "workforce problem." Right. And pre COVID, there was estimated, well, it was estimated like by 2030, there was going to be a shortage of like 150,000 some odd thousand and by 2040s maybe like twice, 300,000 or something like that. But the problem with that study was that it was only the incremental, how many workers do we have now? And then how many more do we need kind of with the silver tsunami? What it did not take into account was the folks that are leaving, we'll be leaving the workforce, just retirement, aging out, et cetera.

Charles Turner 18:07

So the number was really more, I'll call around it around 2 million. That was pre COVID. Okay. So over the next 10, 15 years, we, we need to find 2 million people to replace and add to the workforce we have. Now COVID hit and best estimates say that about 15% of our frontline workforce has just left. They categorically walked away from the industry. We have a labor crisis. It's here to stay, but we have a

foundation to build on. Right? And it is that once people are here and they're in the industry, and they're providing care and they're getting that "dopamine hit," they by and large wanna stay, right? I think we're weeding out people that may, may not want to be here and we're keeping the ones that really want to stay. We have those. We have foundational, so we have to kinda sell ourselves of. If you have a big heart and you wanna care for seniors we have the opportunity for you and there are more people out there that may never have considered senior care.

James Lee

Caregivers have basically told us this era this era, this COVID time has made us double down on. We see ourselves in this industry. We want to be in this industry and we see ourselves in this industry for the long term. I know that I know how much that probably contrasts with what people are feeling, executive directors, other people on the line right now who are thinking, "well, that doesn't sound real at our community, because we can't find caregivers to come work here." But but think about how often we go in survey actual caregivers. And that's the goal here? That's the purpose of studies like this is let's actually go ask caregivers what they think and then what can we do about that?

Charles Turner 19:50

That's reinforced it. Right. So we asked the communities, we asked the caregivers the exact same thing. I think the facility response, they're feeling the pain, right. They're feeling that 15 percent that walked off. When you look at an aggregate, like I need people and therefore I'm going to take that and apply it macro across my workforce. That's a little more pessimistic than when you ask each individual caregiver where like, I don't think it's as bad. I mean, it's bad. Let's not sugarcoat, but it's not categorically as bad as you think. We're asking the question five years from now. One of the things James and I talk about kind of double click, we're actually about to roll it a kind of a follow up to this question.Because now have to understand these questions were asked pre omicron. Post vaccines and kind of pro-vaccine mandates, there's been some age, there's been a few months since it's been done.

We're gonna now ask, okay. Now because of omicron, now because of vaccine mandates are these numbers changing at all? And also with like PPE requirement, OSHA requirements, and all these things, the regulations are coming that. That are here or, or are coming, frontline workers say, "I'm just getting tired of this, it's going on and on and on, I'm leaving." We're asking this questions. We don't know the answers to that yet, but we'll see. And hopefully we can kind of report back with the responses to that.

James Lee 21:27

Yeah. The last time I was here with this audience, I'm trying to recall, I think the title of the presentation was that activities is the secret sauce of senior living. And I believe that, and the basic premise of that was that our industry, for the most part treats activities is a secondary offering at the community and that the care is the most important thing that we do. But you know, my contention is, as I'm sure everyone on this call would probably agree, care is the means to the end. You do the care so that you can have a lifestyle. They're not apart from one another. One helps to get to the other. And so the bigger picture as I see it is, what is life enrichment? Activities? whatever word we choose to use to encompass that, how do we get people in our industry to kind of move towards that?

James Lee

So the underlying question there is, how do caregivers feel like activities professionals? I think that is a central premise. The, the earlier part of this presentation is questioning whether or not caregivers are

motivated by the same things that we think they're motivated by. So if we take this as truth, if we accept this as truth, that caregivers want to stay in our industry they haven't been negatively impacted by COVID to think, "no, I'm getting outta here and they wanna stick around." Now, the big question is how do we keep them around in a way they feel like they're doing more than care that they actually feel like part of an activities culture?

James Lee

Good. Yeah. And I, by the way, I can't see the chat group or the Q and A, so Charles David.., if you, if you've got anything in there.

Charles Turner

French Charles we call him.

Charles deVilmorin

Yeah. You can call me French, Charles, but I, I did like when you call me the original Charles, I really liked. that.

Charles Turner

That's fine. That again, I'm older. I am older. I'm the OG.

Charles deVilmorin

Obviously in the chat, there's a lot going on, which is great. Please keep it up. I would be lying to say that it's all kind of rosy, there's a lot of people painting a kind of dim picture. You say dim. But I think there's two main things that are coming, which is one, obviously James, we love what you're referring to when it comes to the secret source. Some people were questioning, maybe this is a question for both in terms of the data, did you include people that had left the industry, right? Is this sample of data only for people that "stayed" and therefore is the data a little bit skewed there, or can you respond to that please? Cause I think it's important.

Charles Turner

So the answer to the question is the little bit of, I mean, sort of. These are people that are credentialed, know they're credentialed. And we know, again, a lot of it came from the data, the people that work on care. And lot of people we know. We've done other surveys. We've done some COVID specific, COVID related surveys that reinforce a lot of this data in terms of people leaving, but we still survey the people. A lot of the people on our platform who may be either, say that have left, or frankly let's call it, were sitting on the sidelines. We do know there is a population. I can't honestly say who and what because those lines are not as binary as you think. People have left the industry, but gosh, they want to pick up a little bit, make up. I work at fast food or I work at Walmart or whatever. I still wanna make more extra income. So maybe I pick up a shift or two a week or so using the credential that I have. So you have a lot of that. And I can pick and choose where I want. Beause like, "that's got COVID, it's an easy question with kind of an opaque answer. I apologize.

James Lee 25:36

Yeah. But we, we did also survey, we sent the survey to TALA members, so an assisted living association here in Texas, sent out the survey to their own caregiving team. So there's a mix of responses here from people who are currently in assisted living this kind of middle ground that Charles talked about and people who have, who are in senior living, but through organizations like KARE.

Charles Turner

Correct.

Charles deVilmorin

Charles, just one thing, if you don't mind. So in the chat, there was a lot of people kind of asking these questions, but specifically Kaylene and Martinez. So just to be clear this study, I think what Charles is saying is that, yes, it, we're not grabbing everybody, but we are grabbing some of the people that have "left". So the data might be stronger that we were originally talking about in, in the chat. So thank you very much for that.

Charles Turner 26:28

Yes. That, that is correct. And again, we have this other COVID study, we're asking people that, have you left the industry yeah. Which is not reflected in this numbers, but you can go to our website, doyouKARE.com, go to "news" or something like that and you can download that one free. You see a lot of those trends and we're actually we've long story with that study. We asked caregivers basically the exact same question starting in like April of 2020 and then three other times kind of throughout the pandemic to see how attitudes are changing and then we're about to update it again.

Charles Turner

All right. This is a good, good set of questions. We're hitting kind of a separate kind of a, we're shifting gears now to a different set of data so if there are any other questions on that we know, please let us know and the questions on this. The way you read these next couple of slides, you almost like read 'em right to left, not left to right. And this is where we were trying to expose where there are disconnects between what the communities think workers want and what workers actually want. And remember, just to clarify the nature of the questions, when we ask communities, we didn't say, "why do you think workers come or workers go?" That wasn't the question. The question was, why do, "why does a worker come to work for you?"

Charles Turner 27:52

Or "why have they left you?" So it made it very personal and the questions become a lot less abstract and more about that, call it administrator, not just about the industry itself. So you can see these are where things, we see points of disconnect, pay rate, why do people come? Okay, number one is pay rate. That's not a big surprise at all. But then we start getting into things that there's a lot of disconnect. With things that one do surprises and some things that don't. So for we know flexibility in workforce is a big, big deal. How do you guys recruiting your platform? In a weird way it's not as hard as you'd think because what we do is we provide ultimate flexibility.

Charles Turner

The vast majority of our people have a full-time job in a community. They just use us to pick up extra income here and there. I think our average active hero, everybody on our platform is a hero, they may pick up like a shift shift and a half the week. Right. So it's not a full-time job for them. It's something to

do on the side to make extra income with that credential, but they love it because we're ultimately flexible. This is some of the things, I go back to my operating days and my vice president of clinical who's wonderful and she's still a dear friend. And I ask her, I said, "okay, explain to me why all of our shifts are 6 to 2 to 10 and, and 10 to six, the response is like, "well, that's when all the, the residents wake up, that's when, you know, eight hours happens."

Charles Turner

I was like, well, "okay, are the residents waking up because that's when they wake up or are they waking up because that's when we wake them up. And that's when we do breakfast. And I said, "well, let's look at the data." We actually took our nurse call data. That's sort of a surrogate for actual activity and realized that it's not as clean as that. So, okay. What if you actually staggered your shifts in your onboarding, so that maybe you actually have gaps where you're like, "we only need some for four hours or maybe you need so much 12, right?" So you provide a broader or array of shift types where your workforce can pick up shifts that are a little more flexible through their work and up the 6 to 2 to 10 to six. Yeah, food for thought.

Charles Turner 30:11

But we never implemented anything. I kind of wish we did was too hard to move that battleship. But then the other thing's, the one that always strikes me here is a big disconnect are the benefits. Because every frontline work is like, "hey, I come to a building because of benefits", and some you'll see later they leave because of benefit. But then you ask them and we don't show the slide on here. You ask them, " okay, would you forego, if we basically paid you a dollar or two more would you forgo benefits? And like categorically the response was, "yeah, absolutely, yes." I'd rather have a little bit higher pay and then benefits. So I think we struggle a lot with articulating the value of the benefits they're getting. And also I'm looking at what we're paying in wages.

Charles Turner 30:57

Like, what are we just paid everybody's premium?Like a hundred percent premium, or like, you can get higher wage, higher wage and and you have to cover your own benefits or lower wage on a hundred percent coverage benefits, would we actually have a better retention? Again, that's food for thought. Other things on here, you know we see this over and over again, working with friends. It's not a big of a deal as we think it is. I think there's a big disconnect. I think they're like, we don't really care about our coworkers. We care about management. We'll get to that in a second, but we don't really care about that. And there's actually a heavier emphasis on how nice the facility is that that surprised me. They prefer that's more of an emphasis than just than I think the community thought as well. And James, I dunno if you had any further insights on these bullets.

James Lee

Yeah. You know, when I look at flexibility of work schedule, I know on the screen, it looks like 8.6 to 7.0 is not a big discrepancy. But if, if you look at it, percentage wise, it's a 16% difference between what caregiver said and what we owners and leaders thought. I like to expand my thought on flexibility just from schedule to look at what caregivers value is flexibility. And so again, just my activities hat brings me back to this question of how is this relevant to activities professionals. I think about how do do you infuse flexibility to caregivers in their role about how they want to serve residents? So one of the questions I've dealt with at every level of position in senior living is downtime for caregivers And alot of

activities people will tell me, "well, I would love caregivers to be involved in activities, but they never have time.

James Lee 32:41

They have to run to do this and do that. And so one of the practical ways that our company, our operating company Bella Groves is trying to solve that is yes, we're addressing pay, we're addressing benefits. But beyond that, once people are there, they want to feel good about the work. One of the things we've done is structure our caregiving ratios in, we are memory care by the way, to a four to one ratio, meaning every four residents, there's gonna be one caregiver. That means that we have built in downtime. We have said activities and programming is a critical part of your job and specific to memory care. You can't always plan it. You can't put it on a checklist. So we, the owners have to structure the organization in a way that you can do that. So for me, that gets to flexibility. This result on the screen here, when it says flexibility of work schedule, doesn't just mean, "can I work a different shift at different time" It also means do I have flexibility in how I work within my shift? Do I have flexibility of not just running ragged for eight hours, but also incorporating downtime?

Charles deVilmorin

You know, James, there there's one comment that's been coming up and you kind of alluded to that here, which is, I think her name is Tara, Tara white. Tara was saying that with the pandemic and the staffing crisis, she's been pulled in different departments, different disciplines like nursing and dining and transportation and so on. We're, we're hearing that all the time from activity professional. So there's a joke saying, "well, at least you got job security," but I think, I think we could go beyond that and also recognize that this idea of the universal worker model, we've been trying to implement that for years. And I'm hearing from you, James, that you've as the owner of your organization, you are proactively implementing that in the form of a downtime. Is that kind of a good way of looking at it?

James Lee 34:49

Yeah. I would say, so what is a universal worker? I mean, what do we think a universal worker is? Most organizations probably make caregivers exclusive to ADLs. Your full time job. 99.9% of your job should be assistance of daily living. So I think if you think about how many hours a day does a resident receive physical care, ADL support? A universal worker, if you just took mathematically, you should take that proportion of time allotted for care. So let's say your resident gets four hours of care, physical care a day, doing math in real time. So one out of every six hours of their day is care related.

Then the other part of it is, okay, how much of their time is in what we would categorize as activities? I know it sounds lofty, but in an ideal world, you've got the same mix. So caregivers in a universal role should be allotted that time portion of the time equal to resident needs is care. Some of its dining, some of its programming, and there there's a lot of things. For our company, Bella Groves, our caregivers are universal. They they do the care, they do the programming, they do the meal service, the specialized roles like cooking or housekeeping or maintenance, we've got people covered for that. But if it has to do with the quality of that resident's day, that's a universal caregiver in my mind,

Charles deVilmorin

As you were talking, a lot of people emphasized how much flexibility was important. Sorry Charles.

James

Yeah. I want to say one, there was a point I was gonna get to before that question and I just remembered it. Talking directly to the people who are on this webinar, more than me wanting you to take this particular study or this specific data back to your organization and doing something with it. I think in aha-moment, I'd love for people to have is go do your own research, do your own study. Charles and I, before this study only had just other references to kind of point at and say, "Hey, look, loook at that study. And now that we did this study, it's prompted more questions and we're goin ro go to a second level study. One of the points I made in the linked senior conversation a year ago, which I'll reiterate now is take control of these problems, put 'em in your own hands, go get the data yourselves.

James Lee

So if you have questions in you're feeling frustrated about you know, I'm asked to go do stuff as a lifestyles director, I've gotta go do meals and do stuff, but I rarely get it back the other way, survey your own teams, right? I mean, obviously work with your executive director and kind of have a bigger picture in mind, but go get your own data. And I think if we do a better job of understanding our workforce, the teams that we report to every single day, that's the start of providing better solutions. And so Charles and I are trying to do that at a macro level here to, to help the industry, but you can do this exact thing for your 50 team members in your community, right? That's one thing I really wanted to say during the course of this conversation is this is one survey. But the bigger thing is find your own information, collect your own data so that you can be part of recommending solutions and not being perceived as complaining about the problem, right? We issue that challenge to ourselves too.

Charles Turner

Cool. So this next set is, is in a weird way, same set of questions ask negatively, right? Why have you left? Not why have you come? Why have you left? Or specifically remember, we ask communities this. Not "why do people leave," but "why have they left you?. That's a very important distinction. We kind of read these things, right? To left and start with the things that kind of everyone agrees. Okay. Low pay again, even the communities at this point are like, "oh no, we don't provide low they're relative to the frontline workers. Oh, we don't provide low pay." Yeah. They leave the low pay or we can't do it. Or we don't, it's all deemphasized for the communities. The next two disrespect for management and poor company facility culture.

Charles Turner 39:45

I want to pause on this, because I think those two questions need to be taken sort of an aggregate cause in my mind, they're actually the same question. The disrespect for management, again, just to be clear, we didn't ask why do people leave facilities or communities? Why do they have left you? And basically in this one, the community said, "well, we don't have a poor culture," or "I'm not disrespectful." And the frontline workers are going, "oh no, you really, really are."

The reason I say it needs to be, I think taking an aggregate with the next one of poor company and facility culture is because other research we look at, we'll talk about this in a second, how we define culture, it may be a little different. And so if there's one thing to drill in on as a creating a culture, let's not talk much about how we do fun things.

Charles Turner

Let's not confuse morale with culture. And culture for the frontline worker is, do you respect me? Do you respect what I do that I can do my job and get my, kind of crude, again, get my dopamine hit. Don't get in the way of getting my dopamine hit and honor me for what I do. This is one where if I'm the head of HR, one of the first things I'm doing is I'm double clicking into this question, by the way we actually are. We literally yesterday started formulating the kind of the second level of that one question because this is the one that has probably one of the biggest disconnect between the community and our frontline heroes is what does that mean when you, what does that mean when you say disrespect and which role in the community tends to be the most disrespectful? We have theories, but we want, we don't want to talk about theory at this point.

But that's where, okay, let's work on that interpersonal relationship. As soon as someone becomes a it's a supervisory problem, let's work on the supervisor. Let's figure out how that supervisor, what are the dynamics that are created cause of that? The other thing is, you may think you have a good culture again, using our data at KARE our communities rate our heroes, but heroes also rate our communities. If you ever want to see what, what your culture's like on your knock shift, we've got the data. It can be pretty interesting sometimes as a sidebar. The lack of team work and coworkers, I'm going to drill into this one. Even though everyone's kind of in agreement, people leave because a lack of teamwork from coworkers. Let me tell you from a management standpoint, again, I put my operator hat on and what's not necessarily reflected in this data, but we do have other survey data that reflects this is we ask, I personally ask 150 frontline caregivers, CNAs.

Charles Turner 42:30

What is the number one thing that makes you mad when you go to work? Based on trying to understand what a big demotivator? I would assume. I think everybody assumes, oh, lack of respect. Turns out that's actually number two. The number one response we got almost verbatim from everybody out of 150, about two thirds said the exact same thing. The number one thing that pisses me off when I go to work is when I, excuse my language, literally have to pick up the sh*t that the previous shift did not do. And so you think about that, like how would you like to come to work and realize, "okay, I got my day planned down my 80 hours. I gotta manage the activities I gotta do. Oh, wait, oh, stop. I gotta… the previous shift didn't do their stuff." Whether did or didn't is up for debate.

Charles Turner,

Well, here's one things that I always go back to my operating days and we have an electronic health record system just like everybody else does. Right. I would challenge, I looked at my data, my communities, our best nurses and our lowest turnover were the ones where at the end of every shift, those ADLs were checked off in the system before the next shift started. This is a management problem. This is not a, a worker problem. This is a management problem. Whoever's overseeing ADL management needs to say, "no, we we're going to build a culture that we close these things out after every shift so the next shift can start fresh." I noticed our best nurses, the ones that had the best reviews, the lowest staff turnover were the ones that did that.

Charles 44:07

And the ones that had the highest staff turnover, it was reflected in the data. If you're an HR professional, the first thing you need to do, go to your head of clinical and say, "let me to your nurse call data and see if there's a correlation because I bet you there is. Going through real fast, poor help. This is one that kind of shocks me. Again everybody wants more benefits. I just don't think they want to pay for

'em because when you offer a higher wage and lieu of benefits, they're gonna take that higher wage every single time, not every single time, but a lot. And then you can kinda see the rest. The one I thought was interesting, I think there's probably some inherent data skewing and this one is the very first one is communities say, yea people leave because they didn't like the responsibilities. That's probably true for some people. But I think by and large, I don't think frontline workers, don't like their job. There's a big disconnect there, James. I don't know if you have any other color input on these.

James Lee 44:57

I think this is just kind of good compare and contrast to the first slide. But the overall points here are the same as before. And the thing I'll reiterate is go find the data of your team at your community. And the thing I like about research and finding that data is that it's the most objective place you can start from. Emotions are high right now. People are fatigued. People are angry, people are frustrated. Everybody on this call and not on this call has an opportunity to influence their environment. We can influence that from a position of, "we're off and we're gonna air out our grievances now," or, "okay, I'm going to do, I'm going try to do something about this and a starting point." Anybody can take this torch. Anybody, anybody can take it on their team, but why not us? Why not you? The lifestyles force of our industry lead that effort of just finding better information about what's going on on your team and have that as a starting point. That's all I had to say about that particular slide, Charles.

Charles Turner

Cool

Charles deVilmorin

Can I add a quick thing here, Charles Turner? I really love your point here because, I mean to be honest, I knew about it, but I didn't know. I didn't know that that it was before, and actually it was number one. Right. And I think that's this idea of accountability. I mean James like you said, for me, and a lot of people I know it feels like January was a whole year by itself in terms of like, you know, pardon my English, but crap. It was a very tough month considering the 18 last month we've had before. And there was a number of people like Rene at one point also talked about this fact that it was management's job to instill accountability. But what you James was saying is that we also, as activity professional can take the first step, right? That's your message here, correct?

James Lee 47:06

It is. And I think one of the points we made in our earlier webinar was that for me, I still consider myself an activities professional. I've had a lot of roles since the technical role of lifestyle director, but I think the way I characterized it before is that you just take on the clothing of the operator or the salesperson or whatever role you kind of grow into in senior living. But that was my mentality. I got into the role of activities and I realized this is the most important thing we do. And because there wasn't upward mobility within my organization from that department the only other way to get there was I need to keep growing in positions of influence, but at heart I'm an activities director. And I truly believe that. And that was the advice I gave in the previous call conversation. And it's, it's the same one here is don't leave it to your regional directors or your HR director, your VP of people, operations, to go do these surveys, get the data yourselves. And I think that that kind of approach adds more credibility to anybody coming to the table with solutions.

Charles Turner

Yep. Thanks. Here's sort of point of discussion. So this is a couple weeks ago. We took about almost about half our company to Cabo as like my team hit a big goal. They thought I was joking and I wasn't, and we ended up taking to Cabo. We had an absolute blast. But this picture, I love this picture because this is a really, for us as a great reflection of KARE's culture. We instill kind of, this rock n' roll, us against the world. Kind of in your face bowl, orange obnoxious culture. And this is what we want, and we set goals based on that. Work hard, play hard, live and whatever kind of you want to call it. Start going to the research.

Charles Turner

There are other cultures, like, let's take this and put it on, on a seal community. You can build, you know, something very similar to this. You can one that say, Hey, we're gonna be very, you know, technology forward. We can one that's, we're gonna be very professional, very hospitality driven. These are all, these are all fine. But when, when we start talking about frontline workers understand, you know, the research that we have, they don't, this is not what they, this is not what they aspire to when they, when they think of culture first and foremost, what they think of culture as a culture of respect.

They see themselves, especially as we're going through COVID, we have a workforce shortage. They know they can work anywhere. They want to go not where they have the best culture, i.e., like something like this, but where they feel the most respected and honored for doing what they do and at the same time being compensated for it. They know that they can go work. They know they can go work down the street for a dollar more an hour. Unfortunately, we're gonna have to keep up with that. There's just, there's not a lot of ways around it.

James Lee 50:27

I think Charles froze, but I'm not sure the exact point he was trying to make. But I think to carry it forward here on this culture slide, I think the point Charles was trying to make was that going back to the larger study, our study challenging perception, and it was challenging what do one group of people in our, in our organizations think that's the upper management and what do people at the ground level feel? So to Charles has this kind of point about culture is kind of overemphasized or misunderstood. The thing that I'll maybe agree to as part of that oh…we lost Charles. The thing that I'll agree to as part of that is culture is, I think oftentimes we think that culture is top down and I really do understand why it can feel that way.

James Lee

I've been in a lot of situations where I felt frustrated and just exacerbated exasperated and felt like there's nothing I can really do about it. But this is the group here, this audience, these are the culture warriors. I saw in the chat group. A lot of people kind of superficially refer to it as the 'fun girls' or the 'fun people.' But if, if we are all about fun, that also means culture. That also means let's go lead the studies on culture. What does it look like at our team? What does it look like for us? And if you want to influence change with internally within your organization, you define what life enrichment is. I think I saw that question pop up is like, how do you define life enrichment? Well, it's defined, however you see it for your group of people. I think Charles is hopping back on here. But I also know we're kind of wrapping up on our time here. Original Charles, we got eight minutes left. So however you want to kind of direct us to a summary.

Charles deVilmorin

There, there is a question I do want to ask before the end to actually both of you Charles, thanks for joining back. Obviously this is a great state of where we stand, and what your data shows, and obviously, hopefully things are gonna improve, but I'd love to hear from you both. What kind of innovation are you seeing? You know, Charles, I'd love you to spend a little bit more time explaining what KARE is also. And so anything that you feel is "innovative" or that you'd like to see these days will be a, that would be great way to kind of sum it up a little bit.

Charles Turner

So if I understand your questions, sorry, like most the variously thing ever your internet just goes down. But so you're asking the question of like what innovations that we have to possibly improve some of this, right?

Charles deVilmorin

Great. What do you see working right now?

Charles Turner 53:32

I'll talk a little bit about KARE and what we do, and because again, we have tens of thousands of people working on our platform and the data we can get from that is that we see a lot of, we see a lot of evidence of I would say less than optimal behavior by by communities. One of the slides we don't have to show it…..these are two shift posts. Basically what happens with KARE is we pre-vetted, you pre-qualified, drug background check tens of thousands of people to work on our platform. And a community says, "hey, I can't fill an open shift," the community sets the pay rate. We don't set the pay rate.

Charles Turner

You decide how much you wanna pay a caregiver. And then, I can apply and James can apply and you see my five star rating and James' five star rating. You pick James because why wouldn't you? Here gets paid the next business day, as long as they get a four or five star rating. They're reinforced, they get compensated for doing better work. We also do a lot of meta analysis on stuff like this, right. That says, okay, these are two different shift postings. This literally took me five seconds to do it. Like I clicked on one building, clicked on another building, look at the shift descriptions. One is, "hey, this is what we expected you.

Charles Turner

And this is the attitude we expect you to have, right? And then we will honor you, once you come. You're part of our team. You're not separate. The other one is ADLs. Now, if you were a frontline caregiver, which one do you want to work for, right? I think there's a lot of tonality of just how you correspond. Like, I don't know if you guys use orange shift or smart links or whatever, do staff scheduling, how you do messaging. You have the data, you actually have a lot of more, we're all tech based now, how do you honor caregivers? And just look, you just start auditing how people to each other. And that's what we do. Wage agnostic, I'm gonna work the one on the left, not the one on the right, that is a big way of doing. And then of course, we always talk about wages and things like that. That's a whole other conversation, which we have a lot of macro data on, but I would honestly look at you, you already have EHR systems, you already have written communication. I would just audit that stuff and see how people communicate.

Charles deVilmron

James, any last thoughts before we wrap up?

James Lee 56:01

Yeah, going back to the continuation of this thought that I consider myself an activities professional and I've grown into other roles with an ulterior motive to make what I learned about senior living in that role 13, 14 years ago. I've taken that with me to every role. I hope others would believe this that have worked with me. I've taken that spirit and just added it to whatever role I've been in. And so today I'm able to be the head of an organization we just started and now we get to test all of that. And so you asked about innovation and here's my answer to that, data. We think data belongs to operators or sales people or whoever it doesn't. It belongs to whoever collects the data. And so one of the theories that I have, or we all hold to be true is that the social determinants of health are as important, if not more than ADLs.

James Lee

And I think French Charles, originals, Charles you made that point some time before as well. I believe that to be true, I'm gonna prove it with data through our company. So how we track our activities, what we we even categorize as activities, we're educating our customers about it. And then we're collecting data to compare against other people who aren't collecting that data. I could really chase that into rabbit hole, but the succinct way to say this is data is not for the business owners in the suits. The data is for whoever needs it to get their mission accomplished. So if your mission in your heart is that activities is the heartbeat of any senior living community, get the weapons to get your job done.

Charles deVilmorin 57:54

Yeah. I thank you so much, James for remembering that. Yeah we definitely believe wholeheartedly that engagement is as important, sometimes more important and then medicine. So thanks for the reminder that, my quick thought again, that I really like about your presentation and your data is basically the fact that all of this is a conversation, right? Like a lot of what you've highlighted in your presentation today is the disconnect, unfortune disconnect between the operator, the frontline people, people that leave, people that's stay. And so on.

But what I do like about your work here is also the message of empowerment, right? Basically there is a difference. It can be solved, it can be fixed, and James and both you also Charles you know, providing tools and explaining how this could be done.

Charles deVilmorin

And obviously one of them is data. And one of them is this idea of empowerment. I do want to thank you both again for for participating in today's, I mean, actually presenting, participating, like actually helping us build this amazing webinar and experience. All of you on the audience, thank you so much for joining again, these are the contacts of Charles and James please are free to ask them more details about the study and their work with the idea that both of them have very tangible tools that can help us go further. And some, actually one of them is this tip sheet that they help us put together. So, James Charles, thank you so much again for joining, awesome presentation, very valuable, very timely. Just as a quick quick announcement, I said that call and exciting things were happening in Texas.

Charles deVilmorin

I actually have one of them, one here, which is that there is a frontier management community that has an amazing activity director who goes by the name of Edward, and Edward on March 9th has decided with a former NFL player and their residents to put up a fashion show on the idea that beauty does not

go away with age, and sometimes quite the opposite. So all of the information about that particular event, again, March 9th 2:00 PM central role is going to be available on our ActivitiesStrong Facebook group. And as a reminder, we recently revamped our whole activity, strong webpage. So you can find all the information about upcoming events. And I do want to highlight this big half day event we have coming up in two weeks, all about validation, all about dementia and memory care. And excited to partner with an organization called the Validation Training Institute with that James, Charles. Thanks again. Feel free to always be welcome on these webinars and in the meantime, be well and wishing you an amazing day.