

HEBREW SENIORLIFE

Supporting Older Adults through the COVID-19 Pandemic

DECEMBER 2020

*"I'm just so proud of how **nimble** our leaders and our staff have been. Watching people convert operations on a dime in an effective and caring way, **communicating well**; being able to move quickly, **manage through crisis... and be humble about it.**"*

– KIM BROOKS, CHIEF OPERATING OFFICER, HEBREW SENIORLIFE

WHEN HEBREW SENIORLIFE (HSL) discovered the first cases of COVID-19 in its senior living community, they had some sense of what was in store for them. Nursing homes and senior living communities across the country had already witnessed first-hand the devastating effects of COVID-19 on older adults, a population that quickly proved to be especially vulnerable to the novel coronavirus. HSL acted swiftly to ensure the health and safety of its senior residents by instituting a shelter-in-place policy for residents and restricting visitors while shutting down most on-site operations and transitioning many staff to remote work. While those restrictions were critical to saving lives, they also created significant challenges for the HSL staff in meeting the day-to-day medical and non-medical needs of senior residents. HSL knew they had to completely rethink their operations to adjust to this new reality. One of the steps HSL took was to **utilize components of an existing HPC-funded program—the Right Care, Right Place, Right Time (R3) program**—to inform the system they put in place to meet the needs of all HSL residents during the pandemic.

ABOUT HEBREW SENIORLIFE

HSL, an affiliate of Harvard Medical School, offers integrated senior living and health care services for seniors. Based in Boston, HSL has provided communities and health care for seniors, research into aging, and education for geriatric care providers since 1903. HSL has six campuses in the Greater Boston area, and serves more than 3,000 seniors each day.



PROGRAM AT A GLANCE

Originally conceived for the HPC's Health Care Innovation Investment Program and continued through the HPC's SHIFT-Care Challenge, HSL's R3 program embeds wellness teams composed of wellness coaches and nurses into senior living communities. These teams conduct regular outreach to and check-ins on residents and help them manage health care needs, access social supports, and connect to other community-based social, medical, and behavioral health organizations. The goal of R3 is to improve outcomes and quality of life by providing better connection to outpatient and community-based services, ultimately reducing the need for acute care services. Prior to the pandemic, the R3 program served 400 high-risk residents at seven affordable housing sites and focused on addressing their health-related social needs. In response to the COVID-19 pandemic, HSL expanded components of the R3 program to all HSL residents and reconfigured its services to address new challenges presented by the pandemic.

*"The [R3 program] was **so foundational and appropriate** that, when [the pandemic] hit, everyone **jumped into gear to apply the principles broadly.**"*

– KIM BROOKS

SCALING AN INNOVATIVE APPROACH

RESPONDING TO A CRISIS

When HSL implemented the shelter-in-place order, it **exponentially expanded the number of residents receiving R3-like supports**. “We had [systems] in place for the 400 seniors enrolled in R3 and then suddenly had to expand that for all 1,700 seniors living across our communities,” said Brooks. As a critical early step, they established call centers and engaged volunteers and staff to contact every resident on a regular basis. During those contacts, they posed a standard set of questions to residents: Did they have medication, groceries, or basic supplies like toilet paper? If not, HSL established a system to deliver those items to the residents, even setting up onsite grocery stores to rapidly assist people who needed food. Call center staff and volunteers also asked residents about COVID-19 symptoms to monitor the risk of an outbreak. To ensure that these supports were accessible to all, **HSL expanded the availability of bilingual staff** for residents with limited English proficiency, such as increasing hours of a chaplain at one site who speaks Haitian Creole.

HSL leadership also recognized the impact of social isolation on residents, particularly on residents experiencing mental health issues or cognitive impairment. “We spent years building these congregate programs and opportunities for socialization and connection...[and] all of the things that we’d created all of a sudden were completely unwound,” said Brooks. To support residents in isolation, the HSL team **modified existing cognitive and social activities so residents could participate from the safety and comfort of their apartments**. Instead of their usual menu of in-person activities, HSL offered safe alternatives such as meditation and virtual games over the phone. HSL staff also delivered weekly printed activity packets including trivia, physical exercises, information on radio and tv programs, and dementia-friendly brain games. At several sites, HSL **increased the hours of private aides who were part of the housing team**. These aides visited residents in their apartments, spending the majority of their time focused on supporting residents with cognitive issues in addition to their physical and mental health needs. In addition, across the different communities, HSL built on preexisting work to streamline the private aide system by coordinating with aging services organizations to reduce the number of aides going in and out of multiple buildings each day.

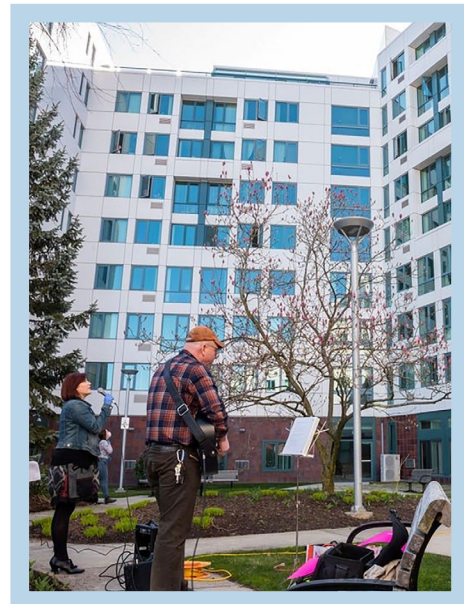
ADAPTING TO A NEW NORMAL

In the early stages of COVID-19, HSL leadership focused on expanding and adjusting to meet residents’ immediate needs. Once systems and processes were in place to do that, the HSL team was able to begin contemplating the longer-term adjustments that would be required if the pandemic persisted.

At the beginning of the pandemic, call center conversations between staff and patients focused on assuring safety and basic needs. Over time, as they formed stronger relationships, those **conversations shifted** and residents began to use the

*“Converting to quarantine operations is just an unbelievable feat, so we knew we were creating a ton of work for ourselves and a lot of expense, but really felt like it was **one of the only ways we were going to be successful.**”*

– KIM BROOKS



*"The first week, we were running around to pharmacies picking up needed items and then as time went on, our teams put **systems in place...** for the long-term that would allow for efficient ordering and delivery."*

– KIM BROOKS

check-in calls to express more personal concerns. "People started to get more into talking about [how] they were **lonely**, they didn't have enough to do, they **missed their families**. We heard a lot from people about not being able to get out and about and **move and exercise** and the impact that was having on them," said Stephanie Small, MSW, Executive Director, Simon C. Fireman Community.

Call center conversations with residents also unearthed some unexpected issues. For example, some residents identified **banking** as a source of anxiety. Rather than putting the residents and the broader HSL community at risk by allowing residents to go to the bank themselves, staff at one site worked with a local bank to develop a process to handle banking tasks for residents. "We had to create this whole new process, probably for 30 people each week to do their very minor banking, but it was really a priority for them, making them anxious, and was creating the possibility that they would go out [and risk exposure to the virus]," said Small.

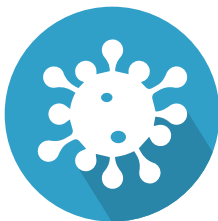
HSL staff also started hosting **video calls – some with residents and others with family members** – to provide updates and allow everyone to ask questions. These calls helped family members understand what was happening with their loved ones and encouraged them to work with HSL in meeting the residents' pressing needs. "**The families were really engaged**. It was a good way for us to answer questions for them, and they **partnered with us**," said Small. For example, before the pandemic, many residents went grocery shopping on their own by driving themselves, taking a taxi, or taking the weekly HSL bus. During the pandemic, many family members started going grocery shopping or to the pharmacy for their loved ones instead. "[The families] were all doing the check-in calls and making sure they were delivering whatever was needed to the main lobby, so [HSL staff] could deliver it up to the apartment," said Small.



HSL has experienced challenges engaging with and supporting some residents during the pandemic. For example, residents with memory difficulties continue to struggle with remembering to wear their masks when walking around the buildings. Other residents grew tired of the frequent check-in calls and outreach from HSL staff. In response, staff worked with them to come up with a check-in schedule that felt comfortable to them while still ensuring that their physical and emotional needs were being met.

THE SECOND WAVE

While HSL eased restrictions and safely resumed limited programs across the sites when there were fewer cases, it also prepared for the second COVID-19 surge. With the benefit of insights from the first few months of the pandemic, HSL leadership has discussed **how they could do things differently** from their initial response. In anticipation of supply chain issues, they are taking a proactive approach to managing supply inventory. Additionally, HSL has updated its approach to ensure that enough staff are available to handle a myriad of onsite issues through a centralized staffing function that allows them to redeploy remote support staff to sites in need. HSL has invested significant effort in trying to bring affordable, efficient, onsite COVID-19 testing to the resident population as part of a strategy to safely resume more programming. As most testing initiatives have been focused on nursing homes and schools, rather than independent living communities, HSL has explored options that make sense for their situation. Effective use of personal protective equipment, modified programming, and contact tracing have also been critical to HSL's preparation for the second surge.



KEY TAKEAWAYS

In reflecting on the pandemic, HSL leadership offered the following as the most important lessons from their COVID-19 response:

- » **BE NIMBLE.** “[We were] just moving really quickly—being nimble and ready to act immediately based on new information,” said Brooks. HSL staff have been able to adapt programming in response to new information about the virus as well as the evolving needs of residents.
- » **APPROACH THE SITUATION WITH HUMILITY.** “[Our staff were] willing to learn from everyone else around them and not think that they had to solve everything themselves. They relied on colleagues for solutions and shared protocols readily,” said Brooks.
- » **BE TRANSPARENT.** HSL emphasized the importance of open and honest communication with staff, residents, and families in building trust and preventing the spread of COVID-19 in its communities.
- » **MAKE DECISIONS, STICK TO THEM, AND DOCUMENT.** HSL noted the importance of making decisions and sticking to them, as well as documenting them for future reference. “You have to make decisions and you have to stand by those decisions,” said Small. “We’re [focused on] saving lives and we’re going to do what we think is best.” Additionally, having a record of new processes was key to ensuring that everyone was informed and aligned on what they were meant to do.
- » **SUPPORT STAFF MEMBERS.** The HSL leadership team reflected on the significant emotional impact the pandemic has on staff who go into the communities every day to care for a population that has been hard hit by the pandemic. They actively worked to ensure that all staff had taken some time off in the past few months, hosted Zoom support sessions for staff with a focus on identifying and acknowledging their trauma, and HSL’s Spiritual Care team also offered support. As Small emphasized, “I think the staff were rock stars. People jumped right in, were so creative...and gave it everything.”

HSL COVID-19 RESPONSE RESOURCES

HSL put significant effort into developing protocols, policies, tools, and communication materials in response to COVID-19. All of its resources are publicly available for the benefit of other organizations. Visit [HSL’s website](#) for more information.