COVID-19 Communications Best Practices for Senior Care and Housing Providers

Wisconsin Department of Health Services

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Who We Are

HDG and Today’s Presenters
About HDG

• Own or manage 30+ communities in 7 states, including 3 in Wisconsin

• Provide services to consulting clients in all 50 states

• Committed to values:
  – Hospitality
  – Stewardship
  – Integrity
  – Respect
  – Humor
Leah Lindgren, MHA

As EVP, Marketing and Communications, Leah Lindgren has more than 20 years of experience in health and senior care marketing, communications, strategic planning, and consulting with a diverse background that includes serving as a principal of a consulting practice, leading the marketing department for a large teaching and research hospital and multispecialty medical group, and directing strategic planning for a health system.
Darrin Hull, NHA

As EVP, Consulting, Darrin Hull has more than 25 years of post-acute operations management experience, with particular expertise in large-scale, multi-site nursing centers and skilled nursing facility operational turnaround, as well as clinical program development, regulatory compliance, strategic health system partnering, and acquisition and divestiture advisory services; he oversaw one of Wisconsin’s largest receivership transfers with management and turnaround of 24 skilled nursing and 9 assisted living facilities.
Communications Approach During Coronavirus Pandemic

- Committed to regular, ongoing, and transparent communication with residents, families, and staff during these unprecedented times—and beyond

- Communication content needs to be in line with federal and state regulations, as well as care community values and culture

- Varying communication needs, methods, and frequency, depending if care community has positive COVID-19 cases or operational changes
Positive COVID-19 Communication

- Personal outreach by phone and in person, especially during initial stages of outbreak
- Check-ins with residents at least twice each day, for both care and emotional health
- Daily calls to families whose loved one/resident tested positive, including digital visits
- Calls twice each week to families whose loved one tested negative, but resides in a positive building
- Daily staff huddles
Communication Methods Upon New Case, Three Suspected Cases, and/or Death

- Voice messaging services which allow you to send messages to multiple audiences/recipients
  - Develop separate script and messages for families, staff, and residents (who are able to receive these messages)
- Staff email
- Family email
- Resident flyer
- Timeclock notice
- Staff huddles
- Personal visits to residents as appropriate, using necessary infection control practices
- Update website as appropriate; post link on Facebook/social media
Voice Messaging Service Content and Examples

Residents and Families
- New and suspected cases and totals weekly
- Response and prevention plan
- Operational changes
- New and evolving federal and state regulations
- Community updates: operations, activities, celebrations
- Mental health support resources
- Words of inspiration, support, and encouragement

Staff
- New and suspected cases and totals weekly
- Response and prevention plan
- Operational changes
- New and evolving federal and state regulations
- Education on PPE, COVID-19, etc.
- Mental health support resources
- Words of inspiration, support, and encouragement
Negative COVID-19 Communication

• Voice messaging services which allow you to send messages to multiple audiences/recipient
  – Develop separate script and messages for families, staff, and residents (who are able to receive these messages)
• Resident flyer
• Expectation to send updates at least twice weekly (Tuesday and Friday)
• Content similar to positive buildings; include “zero” or no cases of COVID-19 in care community
Leadership Is Essential

- Detailed planning has no substitute
- Check in on every resident at least twice a day
- Where there is a lack of communication, inaccurate information begins to spread
- Rest when you can and encourage others to do so
Evaluation and Next Steps

- Launched company-wide task force to evaluate communication: executive directors, communications, marketing, clinical, HR
- Verbal and anecdotal feedback from residents, families, and staff
- Survey families on quality and quantity of communication as part of quality improvement process
- Exploring and budgeting for software platform to enhance, streamline & improve communication with residents, families, staff
Questions?
For More Information

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Disclosure

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