

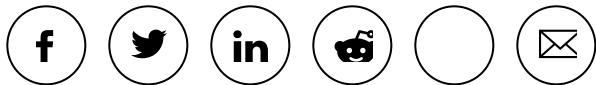
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Long-term care change is good



[Liza Berger](#)



Wednesday's presidential inauguration strikes many who have lived through or studied these changes of the guard as disconcerting. The presence of thousands of National Guard members in the Capital, coupled with the lack of spectators due to the coronavirus sets up this event to be unlike any other in history.

Ironically, this anxious and uncertain transition may strike a chord with those in long-term care. After all, the field also faces some serious growing pains as it moves from the suffering and despair caused by the pandemic to something new, different, safer.

Many, from major governmental reports to policy researchers to association heads, have talked about the T word – transformation – following the destruction wrought by COVID-19. (How befitting Wednesday's occasion that the United States surpassed the 400,000 mark in COVID-19 deaths.) Recently, Mark Parkinson, the head of the nation's largest nursing home trade group, talked about how the American Health Care Association [will unveil some bold proposals](#) this spring.

A recent book speaks particularly well about the need for the industry to change. In "Dignity and Respect: Are Our Aging Parents Getting What They Deserve?" author [Phyllis Ayman](#), an eldercare adviser, speech/language pathologist and advocate, addresses the problems that the pandemic has

worsened, such as resident isolation and poorly equipped and respected staff. (Disclaimer: I am mentioned in the acknowledgements of the book.) Here is one poignant passage that Ayman says describes the situation for residents:

The hallmark of the nursing home resident prior to the restrictions resulting from the coronavirus has been lack of sunshine, loneliness, isolation, and lack of engagement. The situation with COVID-19 created a situation even more dire and a cause for concern. Residents were confused as to why they were no longer able to see their families, some wondering if their families no longer cared. Residents were unable to leave their rooms, and some felt like prisoners. Of particular concern, confused residents with dementia, when approached by people wearing various personal protective equipment (PPEs), may recognize a voice but not a face, wondering who were these strange people now coming to attend to their care.

Ayman is not afraid to talk about what she says are the problems that some would rather not see, as another passage illustrates:

What have we learned from the virus in our nation's nursing homes?

The nursing home experience, both before and during the pandemic, can be summed up in these words:

Understaffed

Undertrained

Undersupplied

What changes will we make about the care and treatment of our elder citizens?

Ayman's book points to some of the big ideas other thought leaders are stressing as the answer to some of the field's ills. These include building on the Green House model, which emphasizes small homes marked by single rooms, resident dignity and person-centered care.

While such concepts might have seemed unrealistic at one time, they no longer are far-fetched, given the market forces and financial risk nursing homes face. Meaningful change appears to be on the horizon. But it won't be easy. It will take relentless drive and the courage to fix what is broken to move the industry toward something better and more sustainable for the long term.

Liza Berger is Editor of McKnight's Home Care. Follow her @LizaBerger19.

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