

SPARK

2025



Milwaukee, WI

Reality Check

Facts + Future Thinking

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Grappling with these realities



Demographic Divergence: 2025–2060

- Population 85+ growing rapidly
- Workforce shrinking
- Policy markers: Medicare VBC goal (2030), immigration policy, birthrate decline.



System Under Pressure

- More people living longer, more chronic disease.
- Fewer caregivers, fewer resources, outdated models.
- Medicare/Medicaid, affordable housing, workforce pipeline.



The Care Funnel

- Many older adults entering the system.
- Bottleneck: Caregivers, housing, Medicare/Medicaid resources.
- Leaks: unpaid family caregivers, people living alone, unmet needs.

2025 Findings – Nurse Executive Technology Survey

- 27 Nurses
- 1,623 communities
- 60% AL/MC/IL, 40% SNF
- 82% for-profit

Value tech that is..
Easy to use - Efficient
 Accurate - Integrated/Interoperable –
 Data security

EHRs	
AL/MC	SNF
Yardi	PCC
ALIS	MatrixCare
ECP	
August Health	
Netsmart	
*26% planning to change	

“(must) Align with human workflows relevant to assisted living. Tailor data for staff with limited scopes of practice and competency”

Biggest Challenges Impacting Care
 (besides staffing and supply cost)

74% Inefficient workflows	70% Burnout/stress/grief Resident safety	67% Documentation burden Communication gaps
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56% use AI every day!

Largest Increases of Tech “In Use”	2024	2025	▲
Staff communication (phones, pagers)	43.8	85.2	+41.4
Engagement (activities, music, games)	46.9	66.7	+19.8
Falls technology	28.1	33.3	+5.2

80+% have NO plans (at this time) for:

- Smart toilet
- Wearables/patch for assessments
- Smart bed / room hub
- Wearables for health & wellness

“My priority is implementing technology focused on enhancing resident safety, improving med management, and supporting chronic disease monitoring. Tech must be user-friendly, secure and interoperable”

Clinical & Care Work Will Change



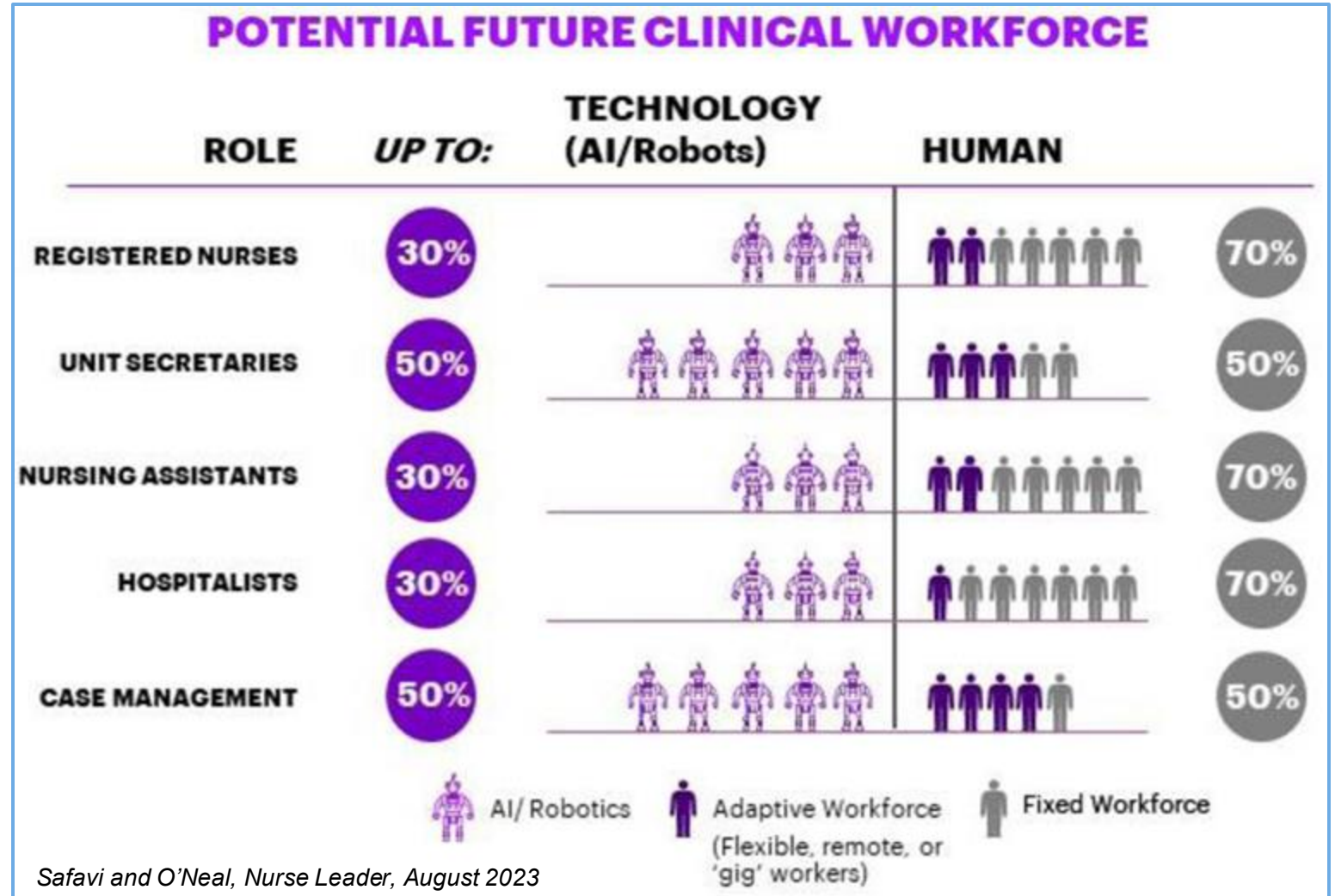
Re-think tasks, not just jobs.

Not all jobs are the same, allocation of tasks need to be understood at job-to-job basis

Shifting workload to support nurses to practice at the top of their license

Combination of nurses, adaptive workers, and technology

- Adaptive workers (e.g. virtual nursing, specialized care, lesser trained staff)

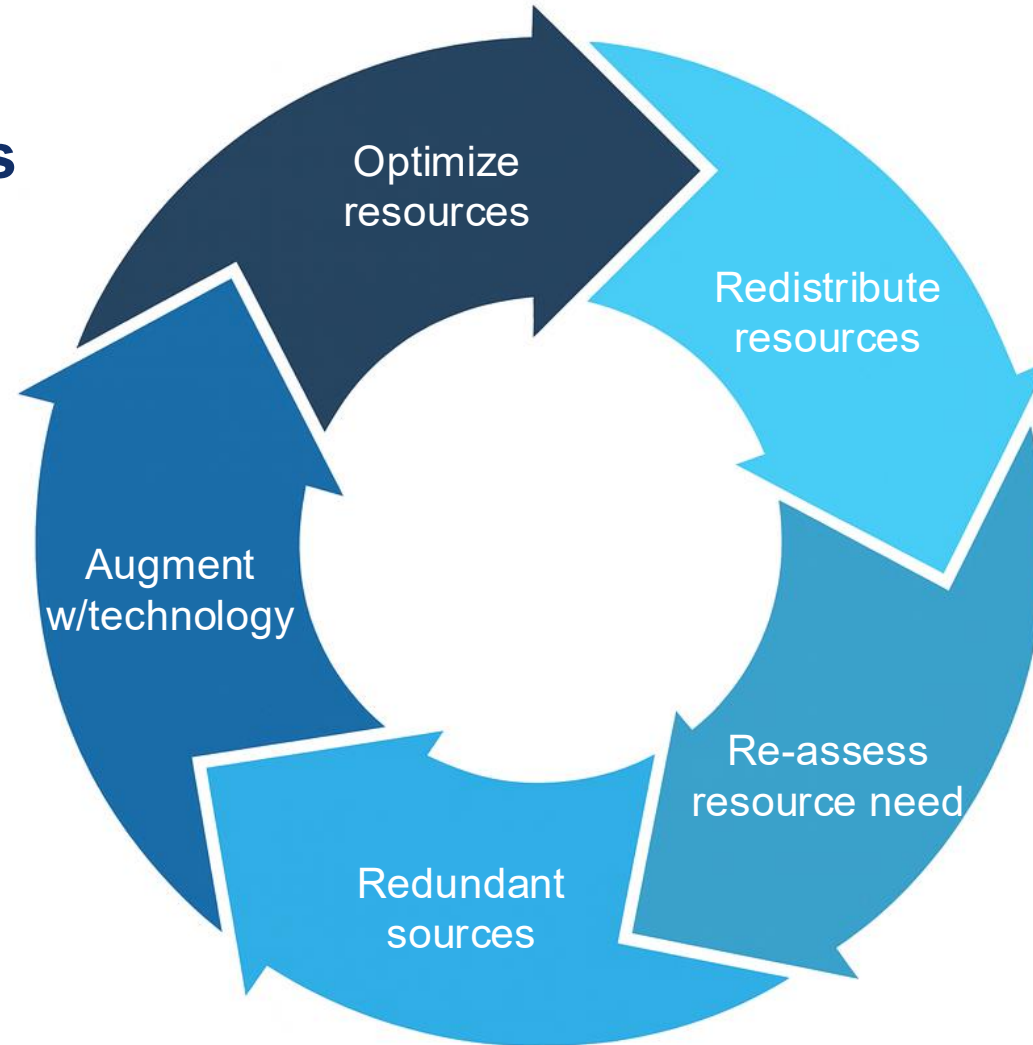


We all have the same number of hours in a day. How will we re-imagine clinical and care work?



Understand Realities of Stressed Resources

- *Workforce*
- *Housing*
- *Healthcare access*
- *SDOH*
- *Funding*



Applying New Tools to Reimagine Resource Optimization

- *AI Agents*
- *Software*
- *Hardware*
- *Robotics*

Pragmatic Discovery

Tethered to Reality

- Intentional data collection
- QoM Calls – SLCC
- Site visits, staff interaction
- Provider-led meetings
- Pilots (change dynamics)



Future Thinking

- In-person discovery & collaboration @ DS ITC
- Immersive learning and relationship development with leading visionaries, investors, researchers, developers.
- Global learning

Building as Caregiver™

A vision for intentional investments in senior care/living, creating an environment more *intuitive and responsive* to the people who live and work within, generating desired outcomes in quality, accessibility, satisfaction & cost.



Current Discovery Work



Role of Ambient
Technology in
Supporting Dataflow for
Clinicians in Senior
Living & Care Settings

Role of Robotics in
Supporting Caregivers
in Senior Living & Care
Settings

You Help Us Think Differently

*While Keeping Us
Tethered to Reality*

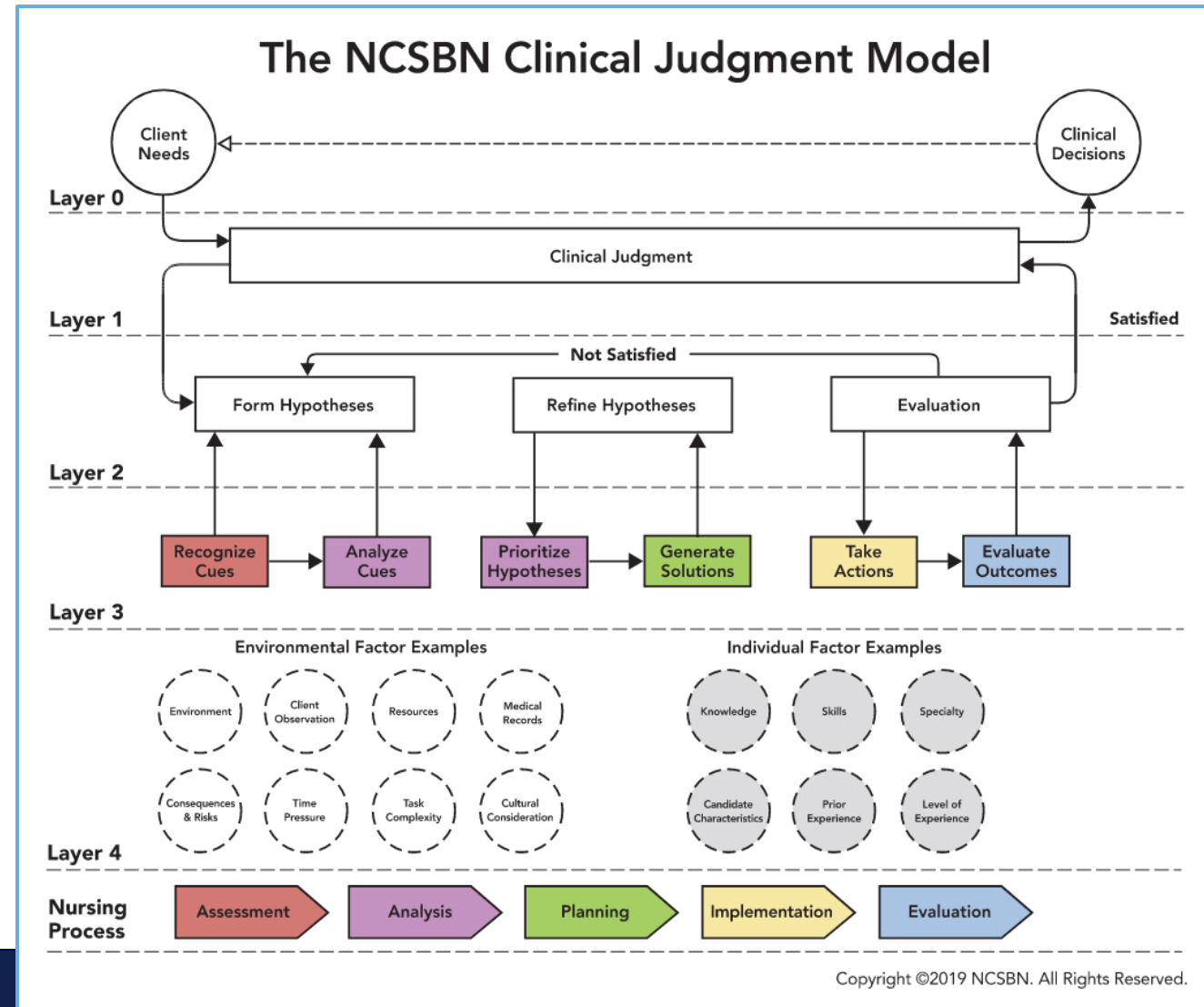
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SPARK 2024 – Reality – Tech - Possibility



NCLEX Changes, Schools Respond

When nurses fail to **notice, act, and communicate**, it jeopardizes meeting professional requirements for care delivery, outcomes, safety, compliance, and caring for the person.



JUNE JONES, LPN / 12 HOUR DAY SHIFT

Goal: Generate a timeline depicting a "successful" shift of an LPN working a day shift in a senior care/living environment and the key tasks, jobs, and decisions needed to achieve a successful shift.



What are the metrics of a "successful" shift for June?

- Residents feel well cared for and satisfied
- Staff receive clear, complete information on assignments to be successful
- All meds safely & correctly administered & documented
- All treatments safely & correctly done & documented

- All Residents received appropriate and timely ADL support
- Call lights answered timely
- Smooth Administration & discharge process
- No adverse events
- All documentation complete

- Staff assignments re-distributed during shift as needed
- Staff able to take breaks & meals
- June able to take breaks & meals
- June can access her DON & Dept Heads for help & support
- Able to leave on time