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### Reacting to rebellion

Thoughts from the floor of the second Aging Revolution.  
by the employees of Wesley Enhanced Living



**Editor's Note:** If revolutions are carried out by organized gro citizens, then the Wesley Enhanced Living (WEL) Aging Revc provides an example of intelligent execution. September 25 n incarnation of this forward-thinking gathering of healthcare pr economists, and politicians—all of whom spoke during panel speeches to 300 long-term care providers worried about the l industry. The following story details the experiences of three who witnessed this revolution with notepads in hand.

**September 25**  
**Park Hyatt Philadelphia at the**  
**Bellevue**  
**Philadelphia**

**8:00-10:00 am**  
**Opening Session: National**  
**Leadership in Transition: Our**  
**Opportunity for**  
**Transformational Change?**

**Reactions by Dawn George,**  
**Vice President of Development**  
**and Government Affairs at**  
**Wesley Enhanced Living**

**8:30 am:** It's early Thursday morning, and I am listening to the opening

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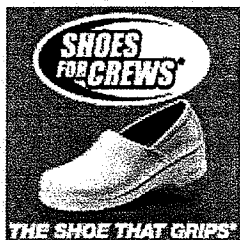
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**The Aging Revolution Summit** titled “National Leadership in Transition: *Our for Transformational Change.*” While it’s not surprising to any our nation is facing an economic and a healthcare crisis, to r most startling is the strain that caring for our aging population our country’s resources in the near future. It’s a sobering thoi consider how our federal, state, and local policy makers will r tidal wave and how entitlement programs like Social Security Medicare will survive under this pressure.

**9:12 am:** One of the panelists, Lynn Yeakel, just made a great point wr “Longevity is one of the greatest achievements of the 20<sup>th</sup> ce: developed advances in health and medicine that are allowing live much longer, clearly a testament to the breadth of humar yet there is a dire downside as well. Our current Medicare an Security systems were not engineered to accommodate a life that extends much beyond age 65. Now an antiquated, and d even useless, notion considering that 50% of men and wome this year will live to age 81 and 84 respectively. What’s more, men who reach 65 can expect to live until 91, while one in 10 expect to live to 95. So, as the panelists have pointed out, it i that we modify these overburdened systems to address curre economic and social realities—and we need to step up to the

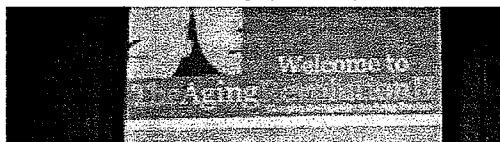
**9:47 am:** Despite the serious concerns that were raised throughout this ended on a positive note. There is a light at the end of the tur country isn’t necessarily doomed to go bankrupt in the near fi Without a doubt, all panelists concurred that there is an urger strong leadership at every level. I believe many of my colleag share my conviction that we need a national leader who is wi categorically and unapologetically begin the critical planning l produce sustainable systems to ensure that seniors—both to tomorrow—do not face the future with fear, but with confiden access to affordable, quality healthcare and housing awaits tl

**10:10-11:40 am**  
**Morning Session A—Providing Health and Housing Services to the Agin Challenging Delivery Models**

**Reactions by Jayne Capwell-Gibbs, director of Enhanced Living, Wesley Living**

**10:33 am:** As this session begins I am eager to hear the range of perspe how to best deliver healthcare and housing services to Ameri yet it is clear to all present that one inevitable reality is beginr forcefully impact each unique delivery model: Almost 70% of who are age 65 will require some type of long-term care in th: This is further complicated by another sobering fact: By 2026 population of Americans age 65 and older will double to 71.5

**11:11 am:** The dialogue initiated during this session has been timely anc provoking. We’ve been introduced to the philosophical and oq underpinnings of a variety of approaches including continuing retirement community (CCRC), Life Care at Home, and Progr



Inclusive Care for (PACE) models. I to me these mode somewhat shortsi

because they suffer from a lack of integration between housing, healthcare, a care services—all of which I feel can and should work together to provide a cohesive and affordable solution to aging Americans.

**11:32 am:** Right now, one panelist is presenting a visionary model called (Senior Health and Housing Initiative for Transformation), which is predicated on an approach that funnels federal, state, and private streams into a CCRC. These funds are used in a holistic manner to address housing, preventive, and acute and long-term care needs of the population. SHIFT's ultimate goal is to meet and pay for the real needs of middle income Americans now falling through the cracks. I am looking for more leaders in the CCRC and long-term care industries to take a look at this model, and raise the level of discussion among the group.

**10:10-11:40 a.m.**

**Morning Session B—Life Expectancy Off the Charts: *Where Does That Leave Us? Providers of Aging Services?***

**Reactions by Audrey Wilkins, RN, Staff Development Coordinator, Westborough, MA  
Enhanced Living**

**10:37 am:** Dr. Robert Butler is speaking and he has already brought up some interesting points about aging in this country. First, in the 20<sup>th</sup> century we gained an extra 30 years of life. I think many of the audience members knew that we were living longer, but did not realize that it was that much. Another startling fact that Dr. Butler pointed out is that we have 145 medical schools, but only 11 of these schools have geriatrics departments. Our nation's population is getting older, but our geriatric professionals are not being trained properly in senior care. This circumstance precipitates a troubling, farsighted question that we are forced to address: How will ineffective diagnoses and treatments for health issues impact our own pocketbooks, and in a macro sense, the stability of our economy?

**10:53 am:** This session is helping to dispel a common misconception: That aging in place is an economic advantage. Amid this panel discussion, I am learning that the total cost of aging in place may actually surpass the costs associated with CCRC models. This attests to some interesting and disturbing facts I have been learning throughout today at the session. The value of family caregivers' services is estimated at \$306 billion annually, which is almost twice as much as is actually spent on CCRC and CCRC services combined. And, it's remiss not to mention the price we all pay: Caregiving costs American employers between \$10 billion and \$33.6 billion in lost productivity annually. These numbers should give all of us reason to pause—and to consider senior care and housing delivery models that best accommodate and manage the financial and familial challenges.

**11:15 am:** Many interesting and compelling demographics about aging Americans have been revealed during this session. These panelists believe that the next generation of older Americans is going to be much more diverse than the seniors of today. This will not be a generation that will be content to



enter into a sedate retirement—tomorrow’s elderly will look to continually disc passions and interests. Indeed, the Baby Boomers will dema surroundings that resemble vibrant resorts, and not the perce environment of nursing homes. This is a clear sounding bell f services providers. As a nurse in this industry for 15 years, I l need to revolutionize our current approach to aging—or else consequences will be grim. Indeed, I am looking forward to b the solution and creatively addressing the desires and sensib new generation of aging Americans.

**12:00 pm**  
**Visionary Keynote: The Honorable Fred D. Thompson**

**Reactions by Jayne Capwell Gibbs, Director of Enhanced Living, Wesley Living**

**12:05 pm:** Fred Thompson opened up his keynote speech with a great l “When I was told that the subject we’d be talking about today concerns of our aging citizens, I didn’t know whether or not I be a speaker or an example.” I am looking forward to hearing Senator Thompson’s address because he seems to be a person that has mastered how to live his life with a purpose and always challenges himself.



**12:37 pm:** Fred Thompson continues to captivate the audience with his remarkable life story, a journey that has gotten all the more interesting since age 60 r remarried, had two children, starred in “Law & Order,” was di cancer, and ran for president of the United States—all of this successful career as an attorney and two terms in the U.S. S my point of view, Fred Thompson embodies the essence of t seniors—active, able achievers.

**1:00 pm**  
**David M. Walker Commentary: America, Have You Woken Up Yet?**

**Reactions by Dawn George, Vice President of Development and Govern at Wesley Enhanced Living**

**1:14 pm:** Two words best describe David Walker’s speech about our e national debt: powerful and honest. He said we suffer from a and we have strayed from principles that have mad great. We’re in a leaders and too many people are for today. Mr. Walker put when he said, “We’re no bills today, and it’s going before it gets better.”



**1:30 pm:** David Walker’s poignant words clarify how accepted status quo will undo us. The government overpromises and under delivers. In our society, we are addicted to debt and, in general, are pessimistic. Current policies are unsustainable. It is true that our country has a strong leader, but we must mandate more responsibility and accountability from the people who hold the power.

**1:47 pm:** Every person in this room has been changed by what they just heard. President and CEO of the Peter G. Peterson Foundation, David Walker can now do what he wasn’t able to do as Comptroller General while running the Government Accountability Office: He can now articulate specific solutions and encourage and engage grassroots efforts to put pressure on Washington to act. I am pleased that David Walker is here with us to ask these tough questions and raise these critical issues.

**2:30-4:00 p.m.**

**Afternoon Session C—Adding Up the Aging Services Dollar: Time for a Reckoning**

**Reactions by Audrey Wilkins, RN, Staff Development Coordinator, Wesleyan Enhanced Living**

**3:00 pm:** The point of this panel is to bring to light the aging services costs that are typically overlooked, but nonetheless relevant and real. And, what immediately captures the audience’s attention are the astonishing statistics presented by Gail Gibson Hunt. Gail pointed to studies that reveal that caregivers spend more than their yearly income on out-of-pocket expense related to caregiving. That’s not enough, more caregivers report being less productive at work. In fact, in a larger sense, it’s been found that caregiving can cost American employers up to \$33.6 billion in productivity annually.



caregivers spend more than their yearly income on out-of-pocket expense related to caregiving. That’s not enough, more caregivers report being less productive at work. In fact, in a larger sense, it’s been found that caregiving can cost American employers up to \$33.6 billion in productivity annually.

**3:28 pm:** If we could provide tax breaks to caregiving families as Gail suggests, I think this would be very beneficial to everyone. The caregiving burden is emotionally and time intensive, but at least some of the financial burden would be removed.

**3:45 pm:** I appreciate that the presenters in this panel are very frank about the senior healthcare problems we are facing. When you look at the current state of aging services, you have to keep in mind that it is going to require collaboration on many levels to solve the problems our society is facing.

**2:30-4:00 pm**

**Afternoon Session D—Raising the Retirement Age to 75: Do We Dare?**

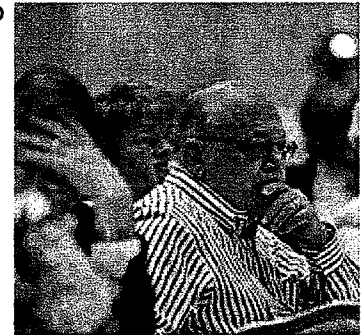
**Reactions by Jayne Capwell Gibbs, Director of Enhanced Living, Wesleyan Enhanced Living**

**2:45 pm:** As an aging boomer myself, my knee jerk reaction to whether the retirement age should be raised is an immediate “NO.” To my mind, the current retirement age is already too high.

surprise, all the panelists concurred. Despite the fact that Americans are living longer than they did when Social Security and the retirement established in 1935, each panelist is presenting his or her own objections and unique concerns about increasing the retirement

**3:27 pm:** One inescapable reality was agreed by each: For 50% of seniors and up, Social Security is the sole or primary source of income. Women and minorities especially dependent on entitlement programs. Ultimately, if the retirement age increases to age 75, nearly 10 million Americans will be left in the dust.

**3:33 pm:** Nancy Henkin is completely correct when she states that we forget the burden that seniors' families would experience if the retirement age was raised to 75. Raising the retirement age would make it impossible for many seniors to live on their own, thus making their children more responsible for their well-being. A middle-aged person will have tremendous difficulty taking care of their parent, plus their own children and spouse. The total cost on society would outweigh any perceived benefits of raising the retirement age.



**3:41 pm:** According to Laurence Kotlikoff, instead of wiping out our critical important social insurance programs we need to radically restructure these programs so they are both efficient and affordable. This is a common thought that all of the panelists have discussed today. This restructuring may include shutting down Medicare and Medicaid in its place establishing a new, federal universal healthcare program so that every American would receive a voucher for healthcare for one year and your voucher amount would be based on your total healthcare costs for the year.

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