

**McKnight's**  
**POWER PANEL**

**PREPARING TO THRIVE  
AFTER THE COVID-19 STORM**

Executive-level senior housing and care partners advise on key operational issues.

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## PANELISTS



**Pritma Chattha, DNP, MHR, RN**  
Head of Healthcare Innovation, Apploi

Pritma is a Yale University-educated nurse executive with 18 years of healthcare experience advocating for patients at the bedside and in the boardroom. She currently serves as the Head of Healthcare Innovation at Apploi — a leading healthcare recruitment and credentialing platform that helps facilities hire qualified candidates faster.

She has worked in a variety of clinical settings across the life span of nursing; over the last decade, she has honed her expertise as a health informaticist, building and improving electronic health records and credentialing platforms. She is the immediate former Executive Director of Electronic Quality and Safety for Alberta Health Services, the largest health system in Canada. She enjoys rethinking healthcare processes to provide safer, better and more accessible healthcare.



**Jeff Ryan, FACHE**  
CEO, Legacy Healthcare Services

Jeff Ryan serves as the Chief Executive Officer of Legacy Healthcare Services. Formally trained as a physical therapist and athletic trainer, he earned a bachelor's degree in education from Temple University, a master's degree in physical therapy from Hahnemann University, and a Master of Business Administration degree from The Johns Hopkins University.

Prior to joining Legacy, he served as Chief Operating Officer and Senior Vice President of Finance at Cancer Treatment Centers of America (CTCA) - Philadelphia. Prior to that, he served as the Director of Operations at Hahnemann University Hospital and later, as the Chief Operating Officer of the Hahnemann University Hospital Physician Practice Plan. He also has held several leadership positions in rehabilitation at Pennsylvania Hospital and with the Temple University Department of Orthopedic Surgery and Sports Medicine.



**Fil Southerland**  
Director/Healthcare Solutions, Yardi Systems Inc.

Fil Southerland has been involved with the long-term care post-acute care (LTPAC) industry for more than 15 years, and currently serves as Director of Healthcare Solutions at Yardi Systems, where he leads initiatives in electronic healthcare records and interoperability. Prior to his time at Yardi, he served as founder and Chief Technology Officer of ALMSA Inc., a nationally recognized cloud-based electronic health provider in the assisted living industry.

With expertise in health information technology, digital privacy, and LTPAC policy and interoperability initiatives, he is passionate about using technology to improve outcomes for residents and care providers.

The most recent *McKnight's* Power Panel session delivered excellent advice from a trio of industry veterans. Featured panelists included Pritma Chattha, DNP, MHR, RN, head of healthcare innovation at Apploi; Jeff Ryan, CEO of Legacy Healthcare Services; and Fil Southerland, director/healthcare solutions at Yardi Systems. *McKnight's Long-Term Care News* Executive Editor James M. Berklan moderated the discussion.

One of the liveliest exchanges touched on how staffing satisfaction can be improved.

“Staff are looking for flexibility, so the more you can provide, the better,” said Chattha. “It’s really important to sit down with your people and listen to them instead of assuming what they need. Then develop a staffing program that has the applicable flexibility required of your people to get the best from them.”

For Southerland, the key to staff satisfaction is technology “at the point of care, which allows the caregiver to have a voice.”

An uptick in technology at Yardi has allowed nurses to develop care plans that create a feedback loop from the caregivers on how well the plans are working, as well as “if they’re taking additional time or if there are additional needs or preferences.” Piggybacking on the importance of flexibility, Southerland noted that “another advantage of going digital is you can remotely monitor many of the workflows in the community, which gives a lot more flexibility and adaptability to your organization.”

Ryan, who started out in academic medicine, recalled that the professors taught residents “a patient doesn’t care how much you know until they know how much you care.” As “culture keeper and CEO” of Legacy, he has adapted the aphorism to mean “an employee doesn’t care how much an executive



knows about finance and IT, until they know that you care about them.”

Workforce retention has been one of the field’s most vexing problems. In what has become a fiercely competitive job market, everyone agreed it was paramount that

leveraging digital solutions, is key.”

Chattha stressed the importance of looking at the company’s benefits program to “really improve upon your offering.” While she doesn’t necessarily suggest overhauling a benefits program, she encourages

**“DEVELOP A STAFFING PROGRAM THAT HAS THE APPLICABLE FLEXIBILITY REQUIRED OF YOUR PEOPLE TO GET THE BEST FROM THEM.”**

— PRITMA CHATTHA, APPLOI

employers stand out from other nearby providers, and employers in other industries.

“Healthcare workers have been through a lot and they’re looking for organizations that are organized,” said Chattha. “Ensuring that your recruitment and onboarding process is organized and effective, which means

companies to remain flexible: “Not all employees want 401(k)s. Some prefer mental wellness days or childcare benefits, so just think outside the box and be very transparent.”

When it comes to communicating with Gen Z and Millennials, Ryan stressed the importance of responding immediately “or they’re



on to the next person who does.” Learning this forced Legacy to alter the way they work.

“What got us here, is not going to get us there,” Ryan said. “We started looking at recruiting not as to how we see it, but how the person being recruited sees it and then built our recruitment process around them instead of us.”

What worked in the past, Southerland agreed, is no longer applicable. Where once “operational

good community reputation” and a place that “folks want to come and work.”

### I.C., COMMUNICATION TAKE CENTER STAGE

The panel also touched on some longstanding issues, not just pandemic flashpoints, along with lessons learned along the way.

Ryan pointed out that infection control practices have become

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**— JEFF RYAN, LEGACY HEALTHCARE SERVICES**

was separated from clinical and care,” today it’s more important to be able to integrate the two “so that you’re not overloading staff.” It’s critical to make “good operational decisions based on the acuity levels in your community” to build “a really

“much more sophisticated as an industry.” To that end, he pondered how the pandemic might help control flu spread within senior living communities in the future. Another important advance has been the rise of communication and teamwork.

“We have become better communicators and collaborators,” he noted. “We are all talking much more now and collaborating and I think that is the new future and it’s going to make a big difference in this industry.”

In the spirit of collaboration, Chattha envisions facilities and operators partnering with specialty providers to bring telehealth more steadily into their facilities, and hiring or retraining CNAs to support telehealth operations so that an operator can have a competitive advantage.

“There are all sorts of remote patient monitoring tools that can be leveraged in innovations that have come out of the pandemic,” said Chattha. “So really, it’s about keeping your eye on what opportunities exist out there to partner with — tech firms and specialist providers — so that you can get that care faster into your facilities and even add that as an additional service line to attract new residents and clients to your facilities.”

For Southerland, something “near and dear” to his heart remains “transitions of care and coordinating care between the various providers.” He explained that 37% of transitions “result in some type of adverse event. The majority of those events are preventable, if you have the data on hand.” To that end, digitizing workflows, automating clinical move-ins and engaging medication reconciliations go a long way toward creating “a positive journey of care.”

The panelists agreed during a closing segment that proper care today “takes a village.” As final points of emphasis, they overlapped one another in highlighting “collaborations between operators, physicians, NPs, home health companies and rehab companies coming together to not just enjoy a great quality of life, but an exceptional clinical aspect of care in communities.” ■