

The Next Generation of Care

Technology-Integrated Human Services

By: Dr. Michael Strouse



10,000 seniors retire each day (one every 8 seconds), driving a tsunami of demand for additional caregiving talent that we don't have to offer.

What is a GoodLife?

“Everyone wants a good life: a nice home in a safe neighborhood, an active, engaging, and healthy lifestyle, a close circle of friends, a sense of empowerment and control and purpose—maybe even a dog.”

The US has an exponentially growing number of seniors, people with intellectual or developmental disabilities (I/DD), traumatic head injuries, physical disabilities, mental health challenges, or degenerative conditions (like MS) who need affordable help to live independent, healthy, and fulfilling lives in their *own* homes,^{1,2}. Most face similar barriers, such as health concerns, physical safety, stranger danger, and transportation issues, or they need assistance with cooking/domestic support, money management, activities of daily living, socialization, and much more³.

Many cannot access or afford the in-home support they need to overcome these barriers because their needs are intermittent, ebbing, and flowing at unpredictable times. Ultimately, it is unaffordable and intrusive for caregivers to sit and wait *just in case*, *yet these folks need help when needed*.

As a result, most live in *fear* that someday they will be forced to trade their independence--and savings--for care in a traditional congregate facility, such as assisted living, nursing care, or group homes⁴. These facilities are designed to share staff by implementing highly centralized, departmentalized, and scheduled services that many *once* felt provided quality, cost-effective care.

Congregate care facilities, or specialized group homes, are “places” we have created where we send people to live to receive care delivered on the *provider's* terms.



These congregate care models are, by necessity, highly structured due to the collective needs of the home and require life-changing, intrusive compromises in daily living routines.

In reality, such programs are not private homes as we might think of them—and living in group homes or assisted living facilities doesn't deliver the independent, enriched, good life that most people want.

The vision of people receiving truly individualized support in order to live enriched, typical lives in small homes

and inclusive community settings is *not* new. In fact, it is many decades old and is increasingly being fueled forward by new laws and regulations—most notably, CMS's final settings rule which went into effect in March 2023. Ultimately, federal requirements and public health practices (in the wake of COVID) are *pushing care to transform from* facility-based care (such as assisted living, group homes, day centers, or other congregate care practices) *to* care in smaller, private homes in the community with one DSP supporting only one or a few people.

¹ Diamant, Michelle. (2020, February 7). Nationally, Waiting Lists For Waiver Services Growing. Disability Scoop. Retrieved on February 20, 2020 from <https://www.disabilityscoop.com/2020/02/07/nationally-waiting-lists-waiver-services-growing/27783/>

² Kohn, D., & Taylor, P. (2010, December 20). Baby Boomers Approach 65 - Glumly. Pew Research Center. <https://www.pewsocialtrends.org/2010/12/20/baby-boomers-approach-65-glumly/>

³ Strouse, M. C., Sherman, J. A., & Bowen Sheldon, J. (2013). Do good, take data, get a life, and make a meaningful difference in providing residential services! In D. D. Reed, F. D. DiGennaro Reed, & J. K. Luiselli (Eds.), Handbook of crisis intervention for individuals with developmental disabilities (pp. 441-465). New York: Springer.

⁴ Aging Source Book (2018). Aging in Place in America: Seniors Fear Loss Of Independence, Moving Into Nursing Home More Than Death. Positive Aging SourceBook. <https://www.retirementlivingsourcebook.com/articles/research-study-%E2%80%9C9Caging-in-place-in-america-%E2%80%9D%C2%9D>

"The direct care workforce has been one of our nation's most fragile workforces for over four decades..."

However, significant barriers thwart our progress for achieving this vision. Our industry has a 50-year history of insufficient funding, a never-ending—or rather *growing*—waiting list of new (and more challenging) people to serve, and a limited pool of caregiving talent. This includes over 50% of individuals with I/DD who are currently being cared for by families, of which more than 25% are over 65 and may soon be tapping into the limited pool of caregivers themselves. It also includes an ever-growing senior population, where 10,000 aging adults are turning 65 each day—that's one every 8 seconds—driving a tsunami of demand for additional caregivers that just don't exist.

The direct care workforce has been one of our nation's most fragile workforces for over four decades. Caregivers that provide in-home care are underpaid and must often work unappealing schedules to meet needs that ebb and flow at challenging times, day and night. Over 80% of this workforce is female, increasingly multicultural with language barriers; 32% are part-time, and over 40% of DSPs hold a second job which isn't always compatible. Over 60% of DSPs are the primary breadwinner for their families, with many being single mothers. About 50% of this workforce is eligible for various public assistance programs and struggles with everyday expenses, especially housing, transportation, food, and childcare.

It isn't surprising that the annual turnover rate has exceeded 50% for over four decades or that up to 20% of all caregiving positions are chronically vacant. While this workforce has always been fragile and unstable, the conditions have dramatically worsened in the wake of COVID-19. Other workforces during the pandemic retooled to allow employees to work virtually from home or in "hybrid" roles. We've learned that employees prefer the flexibility and work-life balance of this new way of working. Now, over 65% of job seekers' first preference for employment is virtual work. Additionally, around 2.6M women left employment during COVID, and a large segment did not return to in-person work. But traditional care is not virtual, and the demand for in-home, direct care is exponentially increasing.

While getting care in your own home is a wonderful vision for everyone who wants to



Turnover

Turnover rates historically exceed 50%.



Vacancy

Chronic vacancy rates range between 12% (full-time) and 18% (part-time).



Instability

Over 36% of the caregiving workforce is employed for less than six months.



Recruitment

Past instability has generated the need to recruit over 600,000 new workers annually.



preserve their independence and way of life, delivering this care safely and consistently is *impossible* under current circumstances using traditional approaches.

How can providers ensure safe, supervised, and affordable care for fragile populations with an endless chain of new and inexperienced and often part-time caregivers working alone, serving people with increasingly complex needs?

Bailing water faster can no longer fix these challenges. As providers, families, or those who *self-direct services* attempt to deliver care under the above conditions, it is becoming increasingly clear that traditional approaches cannot give people (the customers, caregivers, providers, or the payor) what they want and need to succeed.



To make a meaningful difference, new and better models of care are needed...

And this is where we come in.



iLink Allows For A New Paradigm of Care

To make a meaningful difference in delivering truly individualized support in small homes and inclusive community settings, we need a new paradigm of care where people with a variety of needs can affordably live, age, and thrive in their own homes. **The answer for the next generation of care will be new, comprehensive, HUMAN services models that are enhanced, delivered, and leveraged by advanced technologies.**

For nearly half a century, GoodLife has worked with talented faculty and doctoral students from the University of Kansas, Department of Applied Behavioral Science, to develop next-generation service models that are leveraged by technology. By fusing these innovative service approaches with GoodLife's [iLink Technologies](#) we are redefining what's possible for delivering a good life to individuals in small homes and community settings while advancing independence, person-centered lifestyles, safety, self-direction, and privacy/intrusion. As importantly, GoodLife's iLink-enabled service models have led to significant gains in [staff stability](#) by creating new ways to improve staff schedules, reduce the reliance on part-time staff, provide more pay, and significantly reduce the number of different people involved in care while still delivering the same ratios of care.

These new service approaches were all made possible by combining iLink with new human services approaches to care--earning GoodLife's Neighborhood Network with iLink Technologies national recognition, including the Autism Speaks "Most Innovative Service Model" in 2016, and the [Moving Mountains Award](#) from ANCOR, the National Association of Direct Support Professionals (NADSP), and the University of Minnesota Research and Training Center in 2020.



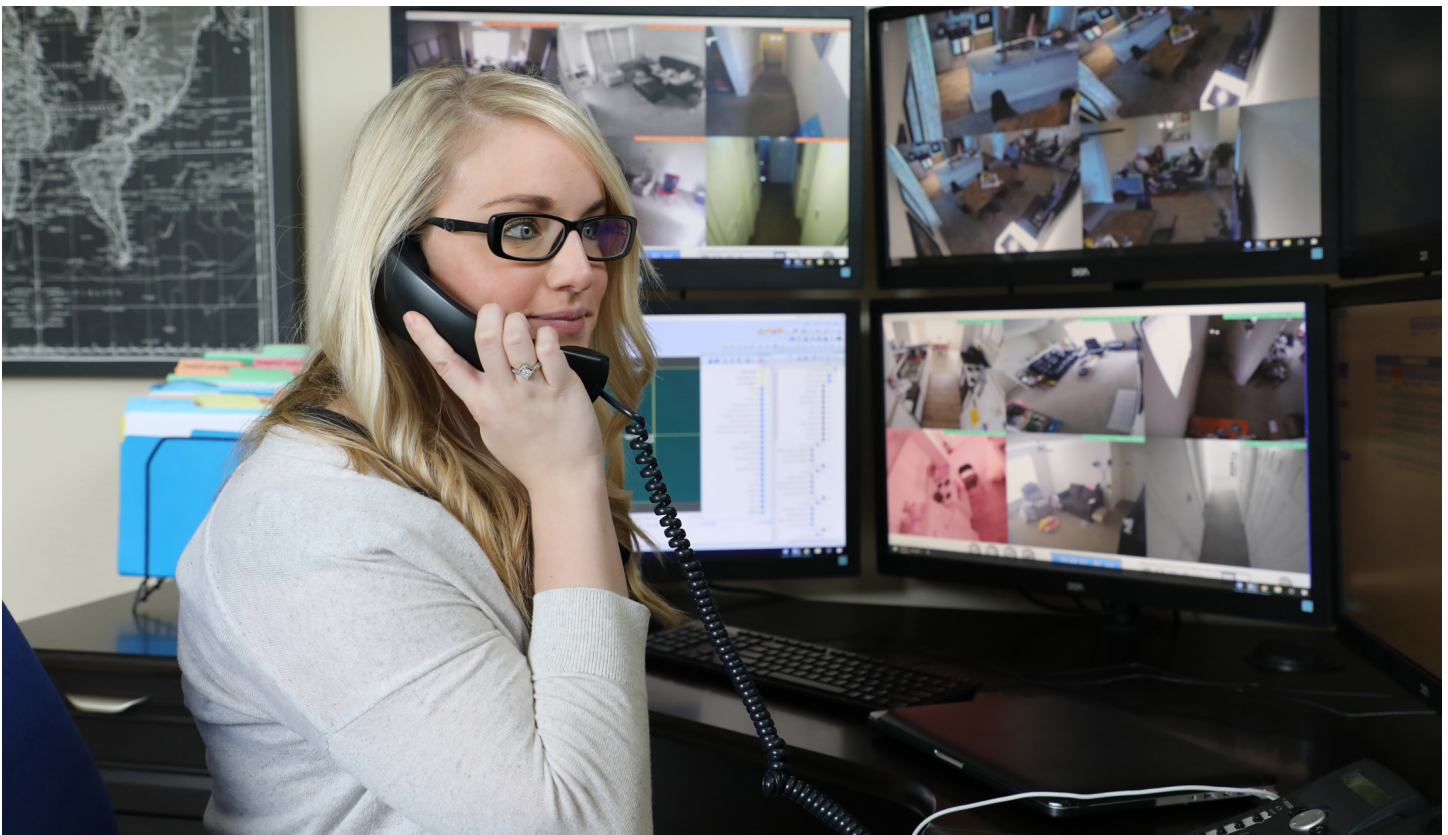
iLink Technologies

Redefining What's Possible

What is “iLink Technologies”?

iLink Technologies is a comprehensive technology infrastructure designed to deliver high-quality, next-generation care. iLink is a combination of smart home technologies (iLink Home) and intelligent software (iLink Assist) that are seamlessly integrated to connect individuals, homes, and neighborhoods to the resources and support provided by family members or best-practice community services (HCBS) providers.

iLink is intelligent, easy to use, and can deliver the right care through a deeply-connected human touch at the right time. iLink allows providers to reenvision how to deliver services--cultivating new and affordable human support models that help those with a wide range of needs live better, safer, more private lives in smaller, more inclusive home and community settings.



iLink Assist

A Cloud-based Platform for Remote Support

iLink Assist 3.0 is iLink's intelligent, cloud-based software that connects people and smart homes to remote support. Its customizable logic filters out customer-defined events that do not require support and alerts remote support professionals to check on the needs that arise. iLink Assist advances privacy by limiting unnecessary intrusions and improving one's access to caregiving professionals.

iLink's in-home sensors, optional cameras, intercoms, help pendants, and remote-controlled home automation are all integrated with iLink Assist. The result? Here are a few examples:

Example 1

Professional life coaches can remotely help people live independently, reminding them of med times and observing medication administration, helping coach a person to cook a meal, being virtually available for an intermittent need, and, if necessary, deploying a family member or direct support professional to provide help.

Example 2

iLink Assist can alert remote caregivers when a resident's stove is on, but no one has been in the kitchen for a specified time. It will also send an alert if the stove is on past a specific time of night or if the burner is too hot. If these scenarios require immediate intervention, caregivers can remotely turn the stove off and coordinate with deployed staff.

Example 3

When someone gets up in the middle of the night to use the bathroom and then returns to bed promptly, this typical behavior won't cause an alert; however, if someone gets up and goes to the bathroom but doesn't return to bed within a specified time, iLink Assist will alert remote caregivers who can remotely check-in or provide direct support.

Example 4

Suppose an overnight caregiver fails to enter a bedroom and provide a required bedside check. In this situation, an alert can be sent to remote supervisors who can communicate with the staff to complete the task and provide training on demand.

Thrive at Home



The Possibilities are Endless



iLink is fully customizable and designed to offer high-end data security so customers can breathe easy knowing their information is safe.

iLink Lets you Focus on What Matters

Because iLink Assist is fully customizable, the automation and alert protocols can be designed to meet the specific needs and abilities of the residents in each home.

iLink does all the heavy lifting so that unnecessary intrusions are eliminated and meaningful, direct care can occur at the moment and place of need.



Who is iLink Designed For?

iLink has 2 primary customers:



iLink Direct

For individuals and/or families who self-direct care.

iLink's virtual staffing systems will generally include 360° cameras (which serve as advanced sensors and allow for a wide range of customer privacy controls); two-way, full-duplex intercoms; motion detectors; health, behavioral, and safety sensors; and home automations. Once installed, iLink residents can balance privacy with support and safety, avoiding congregate care and living more affordably with greater independence.

**ILINK SYSTEMS START
AT \$149 PER MONTH!**



iLink Infrastructure

For providers of community-based services

With an infrastructure powered by iLink Technologies, community providers can focus on delivering a virtual support ecosystem to their customers. By allowing their remote support professionals to see, hear, feel, talk, and act, iLink enables providers to *remotely* monitor safety, behavioral, and health needs; provide life-coaching to support independent living; deploy, supervise, and support in-home caregivers, control home automation, and remotely deliver professional services (such as behavioral/health/training support) *on demand*.

**This ecosystem will
empower providers to
deliver support in small,
inclusive homes.**

What is iLink's Approach to Privacy?

Privacy is extremely important and iLink's goal is to help deliver the least-intrusive approach to care as possible. iLink has been carefully designed to deliver maximum choice, self-direction capabilities, and privacy. iLink's system works with or without cameras, especially if customers have significant independent living and self-direction skills. However, iLink's advanced cameras allow for best-practice remote care while offering a gradient of [privacy features](#), which in-person staff cannot offer.

Any background or area within a room can be digitally blurred or blocked from view so that eyes are never intruding. iLink's cameras can also function as highly-sophisticated sensors that can determine movement direction, and individual proximity, which has significant advantages for advanced care.

For individuals who self-direct their support, iLink's cameras can be controlled (turned on, off, or turned on "privacy" mode or a digitally blurred mode) with a single push of a button on a wall or with a smartphone. When cameras are on, indicator lights around the home will signal people in the home that cameras are being used. Because relationships are prioritized, iLink offers simple ways to let its customers know who is helping them today virtually.





Improving Lives with iLink Technologies

Many of us use remote support technologies and services leveraged by technologies daily to live a better life. We work virtually and travel less, using video conferencing technologies with cameras to have human interactions personally and at work. We communicate by Facetime or What's App. We self-direct food, meals, goods, and services using advanced technologies and deliver them virtually anywhere, on our demand. We visit clinics less often, use telemedicine more, and even receive counseling remotely. We use technology-leveraged service models to eliminate and reduce activities we don't want to do and redirect our time and resources to pay for what we want to do more. We meet new friends socially through social technology apps that include video chats. We embrace technologies to have more personal human connections.

For many, the pandemic's silver lining has

been life balance. If virtual technology and technology-leveraged human services can improve and support our lives and we prefer them, then isn't this, by definition, less intrusive than other methods? As we make our own decisions about how to live a better life, shouldn't we want what's now proven possible to help people with greater needs live a better life too? We think so.

GoodLife's policies for the use of technology are designed to advance best-practice care, personal safety, independence, and self-direction while balancing privacy and intrusion.

For video blogs and more information about GoodLife's technology-leveraged services, including its Neighborhood Network service model, visit mygoodlife.org/videos.



iLinktechnologies

Privacy • Safety • Independence

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