Effective messages and channels of communication used by assisted living facilities to attract residents

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EFFECTIVE MESSAGES AND CHANNELS OF COMMUNICATION USED BY ASSISTED LIVING FACILITIES TO ATTRACT RESIDENTS

by
Allyson L. Wisniewski

A Thesis
Submitted in partial fulfillment of the requirements of the Master of Arts Degree of The Graduate School at Rowan University June 7, 2005

Approved by __________________________

Date Approved 6-7-05

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The purpose of this study was to pinpoint the most effective messages and channels of communication used by assisted living facilities to attract residents. The study includes three in-depth interviews with marketing/public relations representatives from three successful assisted living facilities in Gloucester County, NJ. The author asked the representatives questions about their marketing/public relations efforts. The study also includes a content analysis of the promotional folders distributed by each of the three facilities.

The study shows that assisted living facilities should focus on building relationships with referral sources. Also, facilities should work to maintain their visibility by participating in community events and placing advertisements in local newspapers. When targeting potential residents, facilities should focus on quality of life messages. When targeting friends and family members of potential residents, facilities should focus on quality of service messages. Therefore, facilities should construct distinct messages for each target audience.
MINI-ABSTRACT

Allyson L. Wisniewski
EFFECTIVE MESSAGES AND CHANNELS OF COMMUNICATION USED BY
ASSISTED LIVING FACILITIES TO ATTRACT RESIDENTS
2005
Thesis Advisor: Dr. Donald Bagin
Corporate Public Relations Graduate Program

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channels of communication used by assisted living facilities to attract residents.

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representatives from successful assisted living facilities in Gloucester County, NJ. The
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promotional folders to analyze message content.

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on quality of service messages.
ACKNOWLEDGEMENTS

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Chapter One

Background

Assisted living facilities emerged from the elderly population’s strong aversion to nursing homes and preference for a smaller, private space rather than a larger shared area. Assisted living gained popularity in the late 1980s, but the industry exploded in the mid 1990s when assisted living companies went public. “Wall Street investors, eyeing the impending retirement of millions of baby boomers, fell over themselves trying to catch a piece of the boom.”

Most consumers seeking an assisted living facility want both an opportunity to live a normal and unconstrained life and a situation that will keep them functioning as well as they can. Assisted living facilities vary based on characteristics such as amenities offered, layout and care provided. Most assisted living offers attractive living settings, private apartments, physical environments designed to accommodate disabilities and an assurance that care is provided or arranged for to meet varying levels of need. “There is far more diversity in assisted living facilities today than a few years ago,” Robert Kramer, executive director of the National Investment Center for the Seniors Housing and Care Industries, says. “You have low-budget properties and luxury

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properties, with many levels in between. Many facilities now have special wings for dementia patients, designed to provide more safety.”

Diverse facilities result in diverse pricing systems. Some facilities charge a flat rate each month, some have tiers determined by the amount of care provided and others charge a base rate and attach fees as services are added. Most assisted living facilities are not cheap, and most residents pay to live in these facilities out of their pockets. In some cases, long-term care (LTC) insurance helps reduce costs for residents. However, most insurance policies fail to cover assisted living expenses. According to a study by the MetLife Mature Market Institute, seniors in assisted living facilities paid more than $2,100 per month on average in 2002.

“The initial market enthusiasm for assisted living attracted a wide assortment of players and the ‘grandfathering’ in of extant residential care settings without the privacy and function-enhancing amenities; as a result, the term assisted living carries no clear definition.” Quality oversight of assisted living facilities is performed by individual states, some of which do little when there is no state subsidy and some of which have developed elaborate policies requiring staffing levels or prohibiting serving persons who do not embody certain characteristics.

In the past few years, assisted living facilities popped up in nearly every suburb and city. Wall Street speculation and the rapidly aging population fueled this expansion.

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3 Donald Jay Korn, “Helping Hands: Clients who want nothing to do with nursing homes may prefer assisted living, at least for a while,” Financial Planning, April 1, 2003, p.2.
4 Ibid.
5 Ibid.
6 Ibid.
8 Ibid.
According to the American Seniors Housing Association, there are at least 10,000 assisted living facilities in the United States, 90 percent of which were built in the past decade. These facilities house nearly 800,000 elderly Americans. Although many elderly Americans reside in assisted living facilities, the boom of the 1990s was not met with as large of a demand as hoped by assisted living facilities throughout the U.S. Due to overbuilding, many owners must wait to reach 100 percent occupancy.\(^9\)

**Need for the Study**

An abundance of assisted living facilities breeds a highly competitive market. Facilities must successfully compete for residents to generate a profit and survive. Most high-end, luxury residences need at least an 85 percent occupancy rate to make a profit.\(^1\)

Now is an ideal time for assisted living facilities to effectively target the elderly population to recruit more residents. The aged population is growing, and more and more people are in need of assisted living.

Life expectancy continues to rise, and people live longer, resulting in a large expansion of the elderly population. The percentage of the U.S. population made up of people 85 years of age and older is increasing at a rate four times faster than that of the broader population. At this rate, this group will swell to about 6 million by 2011.\(^1\)

The 80-plus population is the fastest growing demographic in the United States. Therefore, experts in the field of eldercare anticipate the need for their services to exceed the need

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for childcare by 2005. The number of elderly needing long-term care is expected to double over the next 20 years, totaling nearly 14 million people.

Purpose

The purpose of this study is to determine effective messages and channels used by assisted living facilities to attract residents. Assisted living facilities must reach out to those in need of their services to capitalize on the growing elderly population.

To create effective messages and select appropriate channels for communication, assisted living facilities must first understand their audience. The potential audience for assisted living is composed of three separate groups, all with different values and life experiences shaping decision-making. This study aims to identify messages that reach all three groups: the G.I. Generation, the Silent Generation and the Baby Boom Generation.

The Baby Boom Generation is a key audience because members of this group may potentially make care decisions for their parents. Also, the oldest members of the Baby Boom generation are in their early 60s and possibly thinking of retirement options for the future.

Members of the G.I. Generation, people born between 1901 and 1924, were shaped as teens and young adults by the major events and personal experiences of the Depression and World War II. After World War II, many soldiers purchased their first homes, fueling a real estate boom. Buying a home became a symbol of success. This interpretation must be considered when convincing members of the G.I. generation to

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move into assisted living communities, thus giving up their status symbol. Another point for consideration is the fact that most members of the G.I. Generation welcomed aging grandparents into their own homes. Members of this generation often associate retirement communities with the “old folks homes,” “county homes,” and “old soldier homes” of their past.\textsuperscript{16}

The Silent Generation is composed of people born between 1925 and 1942 who are between the ages of 79 and 62. This group was influenced through personal experiences associated with the Depression, the Korean War, anti-Communist fears, the atomic bomb and McCarthyism.\textsuperscript{17} The G.I. Generation and the Silent Generation shared the experience of the Depression. Therefore, the Silent Generation also values possessions like the home as status symbols.

The Baby Boom Generation, born 1943 to 1960, is composed of people ranging in age from 61 to 44. Members of this generation were nurtured in the bountiful post-war period and believe that they are entitled to the wealth and opportunity abundant during their youth. Therefore, boomers often have a spending habit and constantly search for a new adventure or experience. This exploration is often carried out in the workplace, and ambition in the workplace also enables boomers to fund their spending.\textsuperscript{18} This generation does not show signs of retiring at the typical age of 55. Boomers do not seem to decelerate as they get older. Therefore, this study will identify effective messages that address this generation’s longing to remain young. Also, this study will pinpoint

\textsuperscript{16} Ibid.
\textsuperscript{17} Ibid.
messages targeted toward this group as children of potential residents. These messages should address potential guilt associated with group members’ unavailability to care for their parents.

The purpose of this study is not only to determine effective messages, but also to identify channels that will successfully deliver these messages. According to a study by the Pew Internet and American Life Project, the number of Americans over 65 who use the Internet jumped by 47 percent since 2000, making them the fastest growing group to tackle the online world. This study will consider this statistic and examine the use of both new and old methods of communication by assisted living facilities.

The Problem

This study was designed to answer the following questions:

1. What are the most effective messages and channels of communication assisted living facilities can use to attract consumers from the G.I. and Silent Generations?

2. What are the most effective messages and channels of communication assisted living facilities can use to attract consumers from the Baby Boom Generation? (as both potential residents and relatives of potential residents)

3. Who are the most effective audiences assisted living facilities can target to attract residents? (potential residents, powers of attorney or referral sources)

4. Do successful assisted living facilities, those with high percentages of occupancy and approved by the New Jersey Department of Health, send common messages to potential residents and their powers of attorney?

5. Do successful assisted living facilities use common communication channels to target potential residents and their powers of attorney?

Procedures

The procedures for this study were:

1. The author found the literature reviewed in Chapter 2 (Related Research) by searching the electronic databases and basic search engine of the Rowan University Campbell Library. The author used key terms like “assisted living,” “aged,” “elderly,” “communication,” “silent generation,” “baby boom,” and “retirement” to narrow the search.

2. With the help of Elinor Fritz of the New Jersey Department of Health, the author selected the three most successful assisted living facilities in Gloucester County, New Jersey. Ms. Fritz provided a list of facilities approved by the New Jersey Department of Health based on quality and resident feedback. From this list, the author chose the three facilities with the highest percentages of occupancy. The author determined the percentages of occupancy by calling each facility and asking for the maximum number of residents the facility could hold and the actual number of residents it currently holds.

3. The author interviewed the head of public relations or marketing at each selected facility to reveal the messages and channels of communication each facility uses to attract residents.

4. The author conducted a content analysis after examining folders and brochures used by the selected facilities to communicate with potential residents and their families. The author developed a coding system and implemented it to examine correlations among the materials from the three facilities. The author looked to answer the following questions: Do the materials shape an image for their respective facility?
Are similar messages communicated? Are there enough similarities among the materials to draw a strong conclusion about effective messages used by assisted living facilities?

Limitations

This study examines only assisted living facilities in Southern New Jersey, specifically in Gloucester County. Also, the author studied only three facilities in-depth. Therefore, results may not reflect the entire population of assisted living facilities in the United States.

An official ranking of assisted living communities does not exist for the state of New Jersey. Therefore, it is possible that the author did not select the most successful assisted living facilities for in-depth examination in this study.

Because of both time and access restrictions, both the residents of the three assisted living facilities under study and their powers of attorney were not surveyed during this study.

Definitions

1. Assisted Living Facility: (specific to the state of New Jersey) An assisted living residence provides apartment-style housing and congregate dining and assures that assisted living services are available when needed. There are three categories of assisted living: assisted living residences, comprehensive personal care homes (converted/residential boarding home that may not meet all building code requirements) and assisted living programs. In this study, assisted living residences
are synonymous with assisted living facilities. A maximum of two residents is allowed per resident unit.\textsuperscript{20}

2. **Assisted Living Residents:** Assisted living residents can be young or old, affluent or of low income, healthy, frail or disabled. Assisted living is also appropriate for someone who is unable to live at home but may not need the type of care provided in a nursing home.\textsuperscript{21}

3. **Elderly:** For the purpose of this study, elderly refers to anyone over the age of 55.

4. **Successful Assisted Living Facility:** A successful assisted living facility is determined based on a quality assessment by the New Jersey Department of Health and Senior Services, positive resident feedback and an occupancy of at least 85 percent.

5. **Effective Messages:** For the purpose of this study, effective messages refer to messages that cause the elderly population, children of the elderly population or referral sources to form a favorable opinion of an assisted living facility.

6. **Effective Communication Channels:** For the purpose of this study, effective communication channels deliver messages to the elderly population, children of the elderly population or referral sources from an assisted living facility.

\textsuperscript{20} Department of Health, Division of Long Term Care Systems, National Center for Assisted Living Report, 2004, pp. 85-86.

\textsuperscript{21} New Jersey Department of Health and Senior Services, Assisted Living in New Jersey Web site.
Chapter Two

Review of Related Research

Large gaps exist in the information available to consumers about the assisted living industry. These gaps and inconsistencies in information most likely occur because states have complete regulatory control over their assisted living facilities, and therefore, differ in their regulations.\textsuperscript{22} Because of these regulatory differences, various definitions of assisted living facilities exist throughout the country. For example, some facilities resemble nursing homes because of the extent of care provided to residents while other facilities provide no or minimal care. Also, some states place strict regulations on their facilities while others fail to regulate their facilities at all, leading to differences in the quality of care provided. Because of these varying characteristics, little research exists about effective ways to promote assisted living facilities.

This study focuses solely on New Jersey assisted living facilities, which are clearly defined by the New Jersey Department of Health as, “residences providing apartment-style housing and congregate dining and assuring that assisted living services are available when needed.”\textsuperscript{23} However, the author searched magazine articles, newspaper articles and Web sites about assisted living facilities on a national level to find sufficient information related to her research topic: effective messages and

\textsuperscript{22} Kevin McCoy, “3 Studies to Focus on Assisted Living.” \textit{USA Today}, Sept. 21, 2004, p. 03b.
\textsuperscript{23} Department of Health, Division of Long Term Care Systems, National Center for Assisted Living Report, 2004, pp. 85-86.
researcher repeatedly found information about assisted living facilities grouped with information about other long-term care facilities like nursing homes.

**Important Messages to Send to Long-Term Care Consumers**

“Getting Your Message Out,” an article in Nursing Homes magazine, discusses effective marketing techniques for long-term care facilities. “Effective marketing focuses on getting the right information about your organization to the right audience,” author Brent Campbell writes.24 With more than 15 years of healthcare experience, Campbell, a senior account executive at Seroka Healthcare Marketing, considers himself an expert on long-term care marketing.

Most facilities focus their marketing messages on their extensive list of services. While Campbell believes facilities should mention these amenities in their marketing messages, he does not believe they should serve as the primary focus. Instead, he believes that “human” aspects should largely compose the marketing messages. For example, family members researching long-term care facilities for a loved one most likely want to know information about fee structures, payment arrangements, activities and social structures. However, they primarily concern themselves with whether their relative will be cared for, respected and valued – the “human” aspects.25 “Developing and implementing an integrated communications plan that promotes the proper message will set you apart from your competitors, which will help increase your bottom line,”

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25 Ibid.
Campbell says. “It’s crucial that all your marketing materials share a consistent message and theme and that they accurately reflect your corporate philosophy.”

When communicating the “human” aspects of long-term care with potential residents and/or their families and friends, Campbell believes that the most important message to send addresses the issues of quality of life and right to privacy. Focusing on issues like privacy, dignity and independence helps impress the consumer more than promoting basic services like a beauty salon, laundry and in-house bank. “This kind of approach will provide the assurance that the facility and its staff will treat residents and their families as individuals rather than just purchasers of services,” Campbell says.

Facilities use various techniques to improve their residents’ quality of life. Several senior living facilities have recognized and responded to the need for quality-of-life initiatives by offering residents valid opportunities for fulfillment and personal growth. Many facilities use the six dimensional model of wellness that addresses resident needs through physical, social, emotional, spiritual, intellectual and vocational dimensions of health. A culture change often accompanies this model to ensure a community-wide environment of wellness. This includes educating staff and residents about the six dimensional approach and transforming the facility’s activity and health-related offerings into a comprehensive “whole-person” wellness program. In short, the “whole-person” approach, and the key to a high-quality life within senior living facilities, involves changing belief systems about aging – in the minds of both patients and caregivers.

26 Ibid.
27 Ibid.
29 Ibid.
In addition to stressing quality-of-life messages, Campbell also emphasizes the importance of communicating accurate and truthful information – key points to remember in any communication plan.\textsuperscript{30} For example, a long-term care facility should only promote activities that exist and take place regularly. False promotion has the potential to destroy the respect and trust consumers have for a facility.

"What Older People Want From Long Term Care, and How They Can Get It," an article in Health Affairs, also acknowledges the importance of promoting quality-of-life issues like proper care and privacy in a long-term care facility’s marketing, public relations and advertising efforts. The article states, "Most residents and prospective residents would prefer a smaller, private space than a larger, shared one and would trade off activity programs for privacy. Competent care, in contrast, is considered a nonnegotiable necessity."\textsuperscript{31} Before the development of assisted living facilities, seniors had to trade-off their privacy for care.

Assisted living facilities should also strongly promote the quality of care they provide due to the diverse regulations placed on facilities. Because quality oversight has thus far been a matter of individual states, some do little when there is no state subsidy while others have developed elaborate policies requiring staffing levels or prohibiting serving people with certain characteristics. The press often raises questions about the safety and quality of care provided by assisted living facilities, and exposes consumers to


horror stories. Therefore, many consumers enter the assisted living market wary and skeptical.

This Health Affairs article suggests that facilities provide quality care when they afford residents a high-quality life and comfort in addition to fulfilling all health and safety standards. “Most consumers seeking long-term care want both an opportunity to live as normal and unconstrained a life as possible and a situation that will keep them functioning as well as they can.” Therefore, the article suggests that consumers want facilities to focus primarily on providing a good quality of life rather than making it a secondary focus to health and safety requirements.

Deauna Hale Turner, public relations coordinator for Eliza Jennings senior care group, recognizes that long-term care consumers also choose an assistant living facility based on whether or not it will accommodate them in the future if their health fails. “Many seniors don’t want to move if their health declines,” Turner says. Therefore, she has adapted her marketing techniques to group residential options as a continuum for seniors at various stages of health.

An article in Business Week urges assisted living consumers to ask facilities the extent of care they provide in regard to health deterioration. The article, “Where to Find a Helping Hand; The many resources you can call on to avoid pitfalls in choosing an

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32 Ibid.
33 Ibid.
34 Ibid.
assisted living facility,” tells consumers to have assisted living facilities clarify reasons for discharge and outline plans to handle specific changes in health – like dementia.\(^\text{36}\)

This article also urges assisted living consumers to compare fees when shopping for a facility and to ask specifically what up-front fees do and do not cover.\(^\text{37}\) Because most assisted living facilities are private-pay, residents bear the responsibility of footing the bills, and therefore, tend to shop carefully for the right facility while investigating all the costs.\(^\text{38}\)

Because a diverse group of assisted living facilities exist, consumers face a variety of pricing options. According to David Goldberg, vice president of the Assisted Living Federation of America in Fairfax, Va., three rate structures generally apply. “Some facilities charge a flat rate each month,” Goldberg says. “Others have three tiers. Still others charge a base rate and add fees if more services are required.”\(^\text{39}\)

Long-term care insurance complicates the pricing of assisted living further. Consumers must find out whether their insurance covers a specific assisted living facility. Coverage varies with the amount of care provided by the facility. Therefore, assisted living facilities should consider providing consumers with a financial planner and clearly outlining the costs in its marketing materials to help clarify all expenses.\(^\text{40}\)

\(^{36}\) Joan Oleck, “Where to Find a Helping Hand; The many resources you can call on to avoid pitfalls in choosing an assisted living facility,” \textit{Business Week}, July 19, 1999, Iss. 3638, p. 132.
\(^{37}\) Ibid.
\(^{39}\) Ibid.
\(^{40}\) Ibid.
Ways to Communicate with Long-Term Care Consumers

Experts suggest that long-term care facilities use a variety of communication techniques to deliver key messages to target publics.

In “Getting Your Message Out,” Campbell lists several tools – public relations, advertising, the Internet and direct marketing – to effectively deliver the messages distributed by long-term care facilities. He cites public relations as, “an extremely effective tool for creating visibility and increasing credibility within the community.”

He lists media releases, human-interest feature stories, newsletters, community events, resident events and personal calls and notes as public relations channels. According to Campbell, each public relations channel has unique benefits:

- Media Release – spreads the word about special events, new services, employees or enhancements to the facility, especially when placed in publications read by the target audience
- Human-interest feature story – captures a reader’s attention with an entertaining or poignant story to show that the facility offers a special environment
- Newsletter – informs, educates and updates the target audience about the facility, helping the facility to maintain a consistent presence in the community
- Community events – attract the target audience to the facility through appealing events like a craft sale, open house, health fair, etc.
- Resident events – create camaraderie and positive feelings that often

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result in good word-of-mouth publicity

- Personal calls and notes (to new residents and their families) – create a comfort zone that helps generate word-of-mouth publicity and differentiate the facility from others.

In “Directing the Success of a Facility,” another article written by Campbell in collaboration with Seroka & Associates coworkers Patrick Seroka and Michelle Love-Johnson, three other public relations techniques emerge as effective ways to distribute the messages of assisted living facilities. The authors suggest that facilitators should offer themselves as a resource for the community on senior-related issues, such as items to consider when moving a loved one or caring at home for an elderly family member. The authors also suggest that facilities offer staff members as “experts” to talk at speaking engagements. Thirdly, the authors deem a brochure crucial to an assisted living facility’s public relations efforts.

A facility’s brochure should include its history, philosophy, mission, services and location. The authors stress that the brochure uses themes and messages similar to those used in the facility’s other public relations efforts. Also, they suggest that it should remain up-to-date and reflect the facility’s image because the brochure often determines if a customer visits a facility for further information.

In “Getting Your Message Out,” Campbell also stresses uniformity in a facility’s communication tactics. He believes that advertising should focus on the same theme and messages used in a facility’s public relations activities. He suggests using several

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42 Ibid.
43 Ibid.
advertising channels for the greatest impact: print ads, radio and billboards. As with the public relations channels, Campbell believes that each advertising channel also has its distinct benefits:

- **Print ads** – showcase the image a facility wants to present to its target audience and may provide testimonials from residents or a resident’s family
- **Radio ads** – reinforce print ads and may present the facility’s messages to a new audience
- **Billboards** – create a memorable impression and keep the facility’s name in front of the community

In addition to public relations and advertising efforts, Campbell also suggests using the Internet to promote the long-term care facility through its own website. “A good site is easy to navigate and offers frequently updated, accurate and interesting information,” Campbell says. As more and more seniors use the Internet, its effectiveness as a marketing tool increases. According to a 2004 study by the Pew Internet and American Life Project, which was also discussed in Chapter 1 of this report, the number of Americans over 65 who use the Internet jumped by 47 percent since 2000.

Campbell discusses direct mail marketing as the final tool a long-term care facility should use to disseminate its messages. He notes that direct mail is an affordable

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45 Ibid.
46 Ibid.
47 Ibid.
way to update families and the entire community, especially referral sources, about the facility’s events and quality-of-life issues.49

According to Janice R. Ehlers, founder and owner of The Ehlers Group marketing and communication company, “Tools that build the recognition and trust that attract and keep customers are worth their weight in gold.”50 She suggests a combination of key public relations and marketing activities to specifically build a facility’s name recognition and trust within its community: community involvement, publicity, newsletters and an Internet presence.51

Ehlers suggests that assisted living facilities become involved in their community through special events where staff and residents mingle with other members of the community. She cites volunteering as an effective way for an assisted living facility to gain positive name recognition in the community. Many assisted living facilities throughout the country adopt charities and hold fundraising events to support them. Ehlers believes that the name reinforcement a facility receives from volunteering in the community largely outweighs that received from advertising.52

To gain publicity, Ehlers suggests inviting the media to the facility’s newsworthy special events. Before calling a reporter, the facility should ask itself if people would want to read about the event in tomorrow’s newspaper. “Reporters may cover the event if the speaker’s subject is unique, controversial or of interest.”53

51 Ibid.
52 Ibid.
53 Ibid.
“A newspaper article has a 70 percent greater retention rate than an ad.”54

Therefore, when newspapers print stories about a facility’s event or run other articles and feature stories about the facility, they have a powerful impact and make a lasting impression. According to Ehlers, assisted living facilities should merchandise these articles to increase their effectiveness as a communication tool. “Reprinting an article from a magazine or newspaper and using it as a marketing tool increases its value well beyond its original appearance.”55 Facilities can send the article to prospective consumers and referral sources. They can also distribute the articles to residents and employees to ignite word-of-mouth promotion.56

Ehlers cites the newsletter as another valuable tool for reaching out to the community. “Newsletters afford opportunities for direct communication, reinforcement of name recognition and community updates; far more frequently than a brochure.”57 When creating a newsletter, the assisted living facility should know that prospective residents will read the newsletter and take away an impression of it. Therefore, Ehlers believes that the newsletter should compliment the other communication tools in creating a uniformed image that members both recognize and trust.58

Ehlers also hails a Web site as a crucial component of an assisted living facility’s marketing and public relations efforts. However, if the facility does not promote the Web site in all of its advertisements, publications and stationery, the value of the Web site is

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54 Ibid.
55 Ibid.
56 Ibid.
57 Ibid.
58 Ibid.
Facilities should also submit their Web site to search engines like Yahoo and Google to increase consumer awareness about it.  

Web sites have the unique feature of providing immediate feedback to the facility. The facility can measure how many hits its Web site receives. Also, Web site inquiries provide the facility with valuable information. “People making Web inquiries have looked at the site and want more information; prompt response to these inquiries will pay off.” These prompt responses show that the facility is interested in serving the customer. Therefore, someone on staff should monitor and respond to inquiries on a daily basis. Ehlers suggests that facilities also examine the inquiries to see what questions are repeated. The facility should continuously update the website with information to answer these questions.

When a facility updates its Web site based on inquiries, it adapts to the needs of its target audience and increases its effectiveness as a marketing and public relations tool. According to healthcare marketing expert Peter Mansfield, if an assisted living facility develops a profile of its target audiences and gains a sense for the messages and resources that these audiences will find useful, its electronic marketing program will likely be a win-win for the facility and its customers.

According to N5R, a senior online marketing group, all Web sites targeting seniors should follow eight simple guidelines to communicate best with the target population. First, the Web site should be easy to navigate through. Therefore, the Web

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59 Ibid.  
62 Ibid.
site should remain “flat,” and the pages should look clean and simple. Second, the Web site should have large fonts, greater than 12 points in size, to make text easy to read, and each page should have a limited amount of text. Third, each function of the Web site should be explained with action words. For example, if the Web site offers a video, the words “Play Video” should appear on the page to provide the user with specific and easy-to-follow directions. Fourth, the Web site should enlarge linkable images to distinguish them from other graphics and words. This helps seniors with less dexterity click on links on their first attempt. Fifth, the Web site should use images and content representative of the target market. For example, the Web site should not use trendy words that seniors may not understand or relate to. Sixth, the Web site should use testimonials as an endorsement. These testimonials help convince seniors that a product or service is credible. Frequently updated testimonials also help boost a credible image. Seventh, a Web site should prominently display Internet privacy rights and cite security policies because seniors tend to view information online as inaccurate. Finally, a Web site should personify itself by offering a phone number or e-mail address where a browser can reach a person representing the service or company.64

In addition to Web sites, e-mail may also help assisted living facilities communicate with its audiences. Good e-mails include information the target audience would find interesting, but remain brief.65 Assisted living facilities can communicate

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effectively by sending regular e-mail newsletters or e-mail updates to prospective residents and referral services.  

Many marketing and public relations practitioners pinpoint referral services as the most important target audiences in an assisted living facility’s marketing efforts. Key referral sources include doctors, estate planners, hospital workers, social workers and churches. Facilities that maintain strong relationships with these referral sources have a significant advantage over their competitors, and these relationships are maintained by implementing a variety of communication channels. These channels help introduce a facility to a circle of professionals who serve area seniors. According to Stephen P. Wright, president of Wright Mature Market Services, “Recent national studies on how prospects and their families first heard about the assisted living community of choice found that referral sources, not advertising, were second to none in leading the way.”

Targeting Different Generations

As mentioned in Chapter 1, most assisted living consumers fall into three different groups: the GI Generation, the Silent Generation and the Baby Boom Generation. The groups have unique characteristics that assisted living communities should consider before communicating with them. Each group has different values, buying habits and views of the future as a result of different life experiences.

Most potential assisted living residents fall into the GI Generation and the Silent Generation. The GI Generation consists of people born between 1901 and 1924. This

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66 Ibid.
generation experienced the Depression and World War II as teens and young adults. Many reaped the benefits of government intervention through Social Security and Child Labor Laws. The group sparked the first senior citizen movement, resulting in the formation of AARP and the lowering of the Social Security retirement age to 62. This generation has a strong bond and members have faith in one another. About 80 percent say that they trust their generation more than others.

For many members of the GI Generation, the home became their first symbol of success. After World War II, soldiers returning from the military fueled a real estate boom by buying their first homes. Prior to this move, many had lived with their parents or in apartments.

Members of the GI Generation welcomed aging grandparents into their new homes when these loved ones required additional support. Today, this group often associates long-term care facilities with the “old folks homes,” “county homes,” and “old soldier homes” that they saved relatives from in the past.

Members of the Silent Generation, people born between 1925 and 1942, also view assisted living facilities with skepticism and view the home as an important symbol of independence and success. Members of this generation were also largely influenced by the Depression in addition to The Korean War, anti-Communist fears, the atomic bomb

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71 Ibid.
and McCarthyism. Also, the 1970s “oil shock” inflation in the prime of their lives changed their family lifestyles.\textsuperscript{72}

Despite these negative events, many believe that the Silent Generation had easy, boring lives because they were born at just the right time. Members were viewed as conformists. They married and had kids earlier than any generation, and therefore, planned their life by age 20. Then, they invented the midlife crisis.\textsuperscript{73}

Today, however, members of the Silent Generation prove to be an independent, demanding, mobile and technologically inclined generation. Therefore, several assisted living facilities have adapted to this generation’s needs by becoming more active than passive through increased flexibility in rules and schedules and a broader mix of services.\textsuperscript{74}

When promoting assisted living to both the GI and Silent generations, an assisted living facility must understand how the decision to leave “hearth and home” can be painful. Therefore, the facility should demonstrate how moving to a new home can lessen pain and inconvenience, opening the way to a more pleasurable late life. Companionship, security, housekeeping, dining and social activities should help convince these generations that assisted living is a positive change and will help them live a better life.\textsuperscript{75}

In 90 percent of the cases, adult children help make the decision about where to place parents in regard to long-term care facilities. Most of these adult children fall into

\textsuperscript{72} Ibid.
the Baby Boomer Generation. They were children of soldiers returning from World War II, largely composed of people born between 1943 and 1960. Because boomers grew up in the bountiful post-war period, they often believe they are entitled to the wealth and opportunity that seemed endless during their youth. Therefore, Baby Boomers will have a lifetime spending habit. Baby Boomers have often happily gone into depth to spend on the next new experience in life, and research shows they will continue to do so to get the most out of life and stay forever young.

Events that influenced their lives include the threat of a nuclear holocaust, the Kennedy assassination and Vietnam. During Vietnam, many demonstrated their nonconformist beliefs through protesting. These beliefs helped alter many social norms such as the idea that women should stay at home and serve as housewives.

Today, boomers make up, at almost 80 million, the largest generational demographic. Among these boomers, women outnumber men and have the greatest influence on the family. Therefore, Baby Boomer women are the greatest market opportunity today, and their expertise at surfing the Web makes the Internet a prime channel for communicating with them. In 2004, women aged 35-54 represented the highest proportion of Web surfers, compared with male boomers and all other

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demographics. Women boomers, and boomers in general, lead extremely fast-paced lives, so they look to the Internet to make their lives easier.  

The fast-paced lives of many boomers stem from the balance many seek between their jobs and their families. Attempting to juggle kids and powerful careers takes time and effort. Taking care of aging parents adds to the already busy lives of Baby Boomers. According to a study by AARP, “In the Middle: A Report on Multicultural Boomers Coping with Family and Aging Issues,” 44 percent of Americans between 45 and 55 have aging parents or in-laws as well as children under the age of 21.  

Assisted living facilities should understand that children of aging parents often experience guilt because they do not have time to provide care for their loved ones. Therefore, facilities should emphasize several key messages to boomers: times have changed, and assisted living is an appropriate alternative today; caring for an aging parent is different today than in the past because families are spread geographically and most households have both spouses working; the facility provides medical care and promotes the general well-being of the parent; and the facility will care for the parent in a dignified manner, and the burden of day-to-day supervision will not be on the child’s shoulders.

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Chapter Three

Method of Research

The author implemented three research techniques to study effective messages and channels used by assisted living facilities to attract residents.

In-depth Interview

Phase 1 Selecting the Participants

With the help of Elinor Fritz of the New Jersey Department of Health and a list of New Jersey assisted living facilities certified by the Department of Health, the author selected three successful assisted living facilities in Gloucester County, New Jersey to study based on quality and percentages of occupancy. The author determined the percentages of occupancy by calling each facility and asking for the maximum number of residents the facility could hold and the actual number of residents it currently holds. The author found that Cordia Commons in Williamstown, NJ; Post House in Glassboro, NJ; and Terraces at Parke Place in Sewell, NJ had the highest percentages of occupancy at 95 percent, 89 percent and 84 percent respectively. The author interviewed a marketing or public relations manager from each of these three facilities.
Phase 2 The Questions

The author asked interviewees to identify the key messages their assisted living facilities use to attract new residents, for whom these messages are intended and what channels are used to distribute these messages. The author also asked representatives from the assisted living facilities whether or not previous research findings guided their decisions to use these messages and channels. Finally, the author asked the representatives for samples of the promotional material distributed by the facilities.

Phase 3 Analyzing the Data

The author recorded the interviews and transcribed the answers. Next, the author analyzed the answers and noted similar and distinct answers among the three interviewees. The data appears in Chapter Four. Conclusions and recommendations based upon this information appear in Chapter Five.

Content Analysis

Phase 1 Selecting a Sample

The author gathered the promotional folders used by each of the selected assisted living facilities. The author chose to subject these folders to a content analysis because all three facilities under study use similar promotional folders as their main marketing/public relations tool. The folders all contain brochures and a compilation of fliers, calendars and other materials that provide details about the facilities and their services.
Phase 2 Conducting the Content Analysis

The author reviewed all of the material in each of the three folders before selecting units of analysis and categories. The author placed the units of analysis and categories down the left side of a spreadsheet and the name of each facility across the top of the spreadsheet. The author used this standardized sheet to code the contents of the folders.

Phase 3 Analyzing the Data

The author entered all of the data into the standardized sheet and analyzed it to find consistent messages and design elements used by all three assisted living facilities. The data appears in Chapter Four. Conclusions and recommendations based upon this information appear in Chapter Five.

84 See Appendix B.
Chapter Four

The author conducted an in-depth interview with the employee responsible for marketing/public relations at each of the three assisted living facilities under study. The author used these interviews to find parallels among the messages and channels of communication used to promote each facility. The author also performed a content analysis of each of the three facilities' promotional folders to find consistencies among the facilities’ messages.

In-depth Interview Questions

The author conducted the three in-depth interviews with Jane Adams, Resident Services Director at Terraces at Parke Place in Sewell, NJ; Gina-marie Phillips, Community Relations Director at Cordia Commons in Williamstown, NJ; and Margie Riddell, Activities Coordinator at Post House in Glassboro, NJ.

The author sought to determine the answers to the following questions during the three interviews:

• Who do you primarily target when marketing your facility? (Potential residents, children of potential residents or referral sources?)
• In your opinion, what audience is the most important to communicate with in an attempt to attract more residents?
• Do you develop different messages for each of your target publics? What are they?
• Do you develop distinct messages to attract potential residents of both the GI and Silent Generations?

• What channels of communication do you use to distribute your marketing/promotional messages?

• Do you advertise your facility? Where? How often?

• Do you ever write and distribute news releases to promote your facility?

• Does your facility have a brochure? If so, to whom do you distribute it and how?

• Do you use direct mailings? If so, what is the purpose of these mailings?

• Does your facility have a Web site? If so, how do you attract people to it?

• Do you plan residential or community events? What type? How often?

• Do you distribute a facility newsletter? What is the content of this newsletter, and who receives it?

• Do you communicate with residents' friends and families? If so, what is the goal of these interactions?

• Do you visit or call referral sources?

• How do you establish a relationship with these sources?

• Do your communication efforts display an overall theme that ties them together? If so, what is this theme?

• In your opinion, what channel works the best to attract new residents?

• Have you or anyone associated with your facility conducted research to help drive your marketing/promotional decisions?
Interview Response Summary

All three interviewed subjects cited referral sources as the most important target audience to communicate with when promoting an assisted living facility. Gina-marie Phillips from Cordia Commons explained that most people enter assisted living facilities after a crisis occurs that prevents independent living. Therefore, according to Phillips, most people search for an assisted living facility for themselves or someone else in a frantic, crisis mode. In most cases, friends and family members take charge of finding a facility for an aging loved one. Phillips explained that crises usually prevent people from thoroughly exploring assisted living options. People usually turn to the assisted living facilities that have been recommended to them by an acquaintance in the community, or people seek advice at doctors’ offices, rehabilitation centers or Internet referral services.

Ms. Phillips’ parent company, Juniper Communities, requires her to engage in six face-to-face meetings per week and ten cold calls per week with potential referral sources like doctors, especially neurologists and cardiologists, and local business owners and employees. Phillips invites local businesses like beauty parlors to Cordia Commons to perform their services. She hopes that this will encourage business owners and employees to talk about Cordia Commons in the workplace.

In addition to visiting doctors’ offices and rehabilitation centers, both Margie Riddell from Post House and Jane Adams from Terraces at Parke Place use a paid online service, A Place for Mom, to refer people to their facilities. Riddell also talks to local clergy about Post House and places messages about the facility in church bulletins.
All three interviewed subjects use distinct messages to reach their different target audiences. All subjects present referral sources with factual information to help these sources become more knowledgeable about the facility. The subjects hope that the referral sources pass along their knowledge to those in need of an assisted living facility. The subjects also agreed that messages geared toward family members and friends of potential residents should focus on the facility’s quality of care. Also, the subjects all stressed that the messages geared toward potential residents should focus on the quality of life available in the facility.

Phillips uses ads that show two older ladies laughing in a car, like Thelma and Louise, to attract potential residents. Adams explained that she sends messages to potential residents that focus on the fact that Terraces at Parke Place has high-functioning residents who take trips daily. All three subjects also emphasized the importance of developing and using messages that convey the facility’s home-like feeling. Phillips also likes to tell potential residents to think of the facility’s staff and residents as an extended family. Also, she tells members of the GI and Silent Generations that they can relate to and share memories with people who have similar life experiences – like living through the Great Depression.

All three subjects agreed that family members or friends of potential residents, mainly those individuals who serve as potential residents’ powers of attorney, must be assured that their loved ones will be taken care of. Adams tries to spend time with friends and family members on facility tours to pinpoint their reservations about assisted living. She explains to these people that times have changed and that it’s okay to have a career and allow someone else to care for their loved one. She tells these people that they can
stop by anytime. Phillips tells friends and family members of potential residents not to feel guilty about placing their loved ones in a facility. She explains that assisted living facilities provide around-the-clock care, which many people physically cannot provide on their own because of work and family obligations.

All three subjects believe that word-of-mouth serves as the most effective channel of communication to spread their facility’s messages. Both Adams and Phillips consistently place ads in local newspapers to maintain their facility’s visibility in the community. They both advertise in The Trend, the Gloucester County Times and the specialty publication, Senior Scoop. Adams has tried advertising on local radio stations, but she does not think it was effective. Phillips has advertised in the Yellow Pages and on local cable channels and the Weather Channel crawl. Phillips believes that her facility’s billboard successfully attracts the most people to her facility for tours or additional information. Her facility’s billboard sits above a busy street and directs people toward the facility.

All three subjects have written news releases to pitch feature stories about extraordinary residents. None of the subjects use releases frequently as a marketing or public relations tool. All three subjects, however, send direct mail frequently to family members and friends of potential residents to announce upcoming events. This mail helps friends and family members feel positive about a loved one’s experiences in the facility. Phillips also distributes newsletters to family members to keep them abreast of changes within the facility and upcoming events. Riddell distributes a newsletter that provides information about aging to residents. She also distributes this newsletter to referral sources and encourages them to leave it out as reading material for visitors. Because the
newsletter has Post House’s name on it, she hopes that it spreads awareness of the facility throughout the community.

The subjects all agreed that residential and community events also help spread awareness of their facilities. Adams explained that her facility holds an annual Easter egg hunt for local kids. Phillips stated that her facility holds quarterly events with residents, like senior proms, which residents’ families are invited to. She also attends health fairs, encourages experts from the facility to speak at community centers, participates in Monroe Township’s Main Street Festival and arranges in-services for community members like clergy and EMTs to train them on dealing with individuals suffering from Alzheimer’s. Riddell explained that her facility holds events for residents like dances, and invites other organizations like Rowan University to help run the events.

All three subjects view their facility’s folder as the core of their marketing/public relations material. These folders contain brochures and detailed information about the facility like activity calendars, pricing charts and sample menus. The subjects distribute these folders to people who express interest in the facility. They hope that the folders convey a positive image of the facility and provide detailed answers to common questions about the facility.

All three facilities have Web sites, but none of the subjects noted the Web site as an extremely effective marketing tool. The subjects all agreed that the Web site is best used as a resource for someone who has expressed interest in the facility and wants more information. The Web sites provide more in-depth details about the facilities. Cordia Commons, which is owned by Juniper Communities, can be found online at www.junipercommunities.com. Post House, which is owned by Assisted Living
None of the subjects have used research to guide their marketing/public relations decisions. Trial and error has guided the subjects' decisions to focus mainly on referral sources and to distribute messages about quality of care and life to potential residents and their friends and families.

Content Analysis – Units of Analysis and Categories

Through a content analysis, the author examined the communication content of the promotional folders used by the three most successful assisted living facilities in Gloucester County: Cordia Commons, Post House and Terraces at Parke Place. The author used four units of analysis to help classify the content of the folders: **Folder Cover**, **Brochure Cover**, **Brochure Contents** and **Other Folder Contents**. The **Folder Cover** unit of analysis includes all elements of the folder’s cover, including graphics, color, copy and theme. The **Brochure Cover** unit of analysis includes all elements of the brochure’s cover, which also includes graphics, color, copy and theme. The **Brochure Contents** unit of analysis includes the topics of information covered in the brochure, including the definition of assisted living and a description of the facility’s specialized services, personalized services and respite care. This unit of analysis also includes words or phrases that describe the facility’s service and the quality of life that a facility’s residents enjoy. The final unit of analysis, **Other Folder Contents**, includes all other...
information placed in the folder in addition to the brochure. This information includes dementia and Alzheimer's care, respite programs, dining information, lists or descriptions of services, floor plans, activity calendars, pricing breakdowns, a parent company description, a Medicaid description and an in-house physician list.

The author broke down each of the four units of analysis into categories to further classify the contents of the folder with greater precision and detail.\textsuperscript{85} The author created a standardized spreadsheet listing all four units of analysis and their respective categories down the left side and the three assisted living facilities across the top.\textsuperscript{86} The author used this spreadsheet to classify the content of each facility's folder.

\textbf{Content Analysis Results}

The author gathered the following results after comparing and analyzing the data reported in the standardized spreadsheet.\textsuperscript{87}

Within the \textit{Folder Cover} unit of analysis:

- 100 percent of the folders had a picture on the cover
  - Cordia Commons' folder had both seniors smiling and a family image on the cover.
  - Post House's folder had seniors smiling on the cover
  - Terraces at Parke Place's folder had the assisted living facility on the cover
- 100 percent of the folder covers used color
  - Only Post House's folder cover used four colors

\textsuperscript{85} See Appendix A.
\textsuperscript{86} See Appendix B.
\textsuperscript{87} Ibid.
• 100 percent of the folder covers had copy.
  • 66.67 percent of the folder covers displayed a facility name
  • Only Post House’s folder cover had a slogan, which read, “Living your life with choice”
  • Only Cordia Commons’ folder cover had descriptive words, which included, “life-affirming, caring and attentive.”
• 66.67 percent of the folder covers conveyed a quality of life theme.

Within the *Brochure Cover* unit of analysis:
• 100 percent of the brochure covers displayed pictures of seniors smiling
  • Cordia Commons’ brochure cover also had a picture of a family on the front.
• 100 percent of the brochure covers used color.
  • Only Post House’s brochure cover used four colors.
• 100 percent of the brochure covers displayed a facility name.
  • 66.67 percent of the brochure covers had a slogan.
  • Post House’s slogan read, “Living your life with choice.”
  • Terraces at Parke Place’s slogan read, “A Place for Living.”
• 100 percent of the brochure covers conveyed a quality of life theme.

Within the *Brochure Contents* unit of analysis:
• 100 percent of the brochures included words or phrases that contributed to the idea that its assisted living facility provides residents with a high quality of life.
  • 100 percent of the brochures stressed that residents have choices.
• 100 percent of the brochures highlighted a variety of activities

• 66.67 percent of the brochures emphasized the convenience of living in an assisted living facility.

• 66.67 percent of the brochures stressed that residents are independent unless they ask for assistance.

• 100 percent of the brochures included words or phrases that contributed to the idea that its assisted living facility provides residents with a high quality of service.

• 100 percent of the brochures stressed that its staff treats each resident as an individual with unique needs

• 66.67 percent of the brochures highlighted a respectful staff.

• 66.67 percent of the brochures highlighted a warm, friendly and/or caring staff

• 66.67 percent of the brochures stressed that its staff provides residents with support if needed

• 66.67 percent of the brochures highlighted a dedicated staff.

• Only the brochure for Terraces at Parke Place defined an assisted living facility.

• 66.67 percent of the brochures listed specialized services.

• 66.67 percent of the brochures listed personalized services.

• 66.67 percent of the brochures included information about respite care.

Within the Other Folder Contents unit of analysis:

• 66.67 percent of the folders had additional information about dementia and/or Alzheimer’s care

• 100 percent of the folders had additional information about respite care.
• 100 percent of the folders had additional information about dining services, including a sample menu.

• 100 percent of the folders had additional information about both personalized and specialized services, including amenities offered by their facilities.

• 66.67 percent of the folders included sample monthly activity calendars.

• 66.67 percent of the folders included pricing information.

• 66.67 percent of the folders included parent company information.

• Only the Terraces at Parke Place folder contained facility floor plans.

• Only Cordia Commons’ folder contained Medicaid information.

Only the Terraces at Parke Place folder contained an in-house physician list.
Chapter Five
Summary, Conclusions and Recommendations

Summary

The purpose of this study was to determine effective messages and channels used by assisted living facilities to attract residents. To uncover the most effective messages and channels assisted living facilities use, the author studied three New Jersey Department of Health-approved facilities that have successfully recruited residents, proven by their high percentages of occupancy. The author interviewed a representative from each of the three facilities who handles marketing and public relations. The author also performed a content analysis of the promotional folders distributed by each facility to assisted living consumers and referral sources. Through both the interviews and the content analysis, the author hoped to detect similarities among the messages and channels of communication used by the three successful facilities and form a conclusion about effective assisted living marketing and public relations.

In-depth Face-to-Face Interviews

The author conducted three in-depth, face-to-face interviews with Jane Adams, Resident Services Director at Terraces at Parke Place in Sewell, NJ; Gina-marie Phillips, Community Relations Director at Cordia Commons in Williamstown, NJ; and Margie Riddell, Activities Coordinator at Post House in Glassboro, NJ. The author conducted all
three interviews between April 25, 2005 and April 29, 2005. The author recorded, transcribed and summarized the interviews. The summary appears in Chapter Four of this study.

Content Analysis

The author performed a content analysis to examine the communication content of the promotional folders used by the three successful assisted living facilities under study. The author used units of analysis and categories to help classify the content of the folders. The author arranged the units of analysis and categories along the left side of a spreadsheet, perpendicular to the names of the three facilities, listed across the top of the sheet. The author used this spreadsheet to note specific content elements for each folder.

Conclusions

In-depth Interviews

All three interview subjects cited referral sources as the most important target audience to communicate with when promoting an assisted living facility. All three subjects also said that word-of-mouth is the best channel an assisted living facility can use to spread promotional messages and that a facility should develop distinct messages for different audiences. The subjects agreed that assisted living facilities should send messages focused on quality of service to family members and friends of potential residents and messages focused on quality of life to potential residents. They also agreed that referral sources should receive mostly factual information about the facility.
The subjects noted that they lack a full-proof strategic approach to marketing their facilities because people often find themselves in need of assisted living after an abrupt crisis. Therefore, the facilities have trouble detecting potential consumers. Because of this unpredictability, the subjects explained that facilities must continuously keep themselves in the public eye through advertisements, community involvement and connections with referral sources.

Content Analysis

The content analysis explored the content of the promotional folders distributed by each of the three assisted living facilities under study. Each facility provides these folders to interested consumers and referral sources. The folders are designed to promote the facilities to all audiences.

The author found that all of the folders contained a brochure, and that all of these brochures had content that appealed to both potential residents and friends and families of potential residents. The content analysis showed that 100 percent of the brochures contained content related to both quality of life and quality of service.

The author explored both the quality of life and the quality of service content in-depth. The author found that 100 percent of the brochures mentioned choices and activities when highlighting quality of life. Also regarding quality of life content, 66.67 percent of the brochures emphasized the convenience of living in an assisted living facility and the independence residents enjoy.

The author found that 100 percent of the brochures mentioned that staff members treat residents as individuals with unique needs when highlighting quality of service.
Also regarding quality of service content, 66.67 percent of the brochures mentioned a respectful, warm, dedicated staff that supports resident needs.

In addition to quality of life and service content, 66.67 percent of the brochures listed specialized services, personalized services and respite care information.

Each facility’s folder also contained inserts to provide more information than that covered in the brochure. The author found that 100 percent of the folders had additional information about specialized services, personalized services, respite care and dining services. Also, 66.67 percent of the folders housed information about dementia and/or Alzheimer's care, facility activities, pricing and the parent companies of each facility under study.

The content analysis helps show that factual information helps consumers and referrals services learn about the facility to make informed decisions or recommendations. The specific analysis of the brochure, however, shows that quality of life and quality of service messages are key components of an assisted living facility's marketing and public relations efforts. All three analyzed brochures contained content related to quality of life and quality of service.
Recommendations

Because of the unpredictable circumstances that cause many people to enter assisted living facilities, assisted living marketing and public relations practitioners should target referral sources, not potential residents, as their primary target audience. These practitioners should create personal goals to reach out to at least 10 local businesses a week via phone and visit at least five of these potential referral sources in person. After making initial contact, the practitioner should create a schedule for keeping in contact with these sources. The practitioner should provide referral sources with factual information about the facility and possibly invite the sources to the facility to get a feel for it.

Assisted living marketing and public relations practitioners should maintain their facility's visibility by advertising in local newspapers, especially those sections targeted toward seniors. If facilities are not located in high-traffic, visible areas, they should place billboards in busy locations to alert consumers of their existence.

Assisted living facilities should produce marketing materials that include both quality of life and quality of service messages. These messages assure potential residents that they can live a comfortable, independent life in the facility. Also, they help convince the friends and families of potential residents that their loved ones will receive the necessary level of care to help them remain healthy and safe.

Because assisted living facilities do not have one consistent, identifiable target audience, these facilities must develop messages and promotional materials that appeal to all groups: referral sources, potential residents and friends and family members of potential residents.
Recommendations for Continued Study

A continuation of this study should focus on examining the marketing and public relations materials and activities of assisted living facilities outside of Gloucester County, NJ. Also, a researcher should attempt to compare and contrast the marketing and public relations efforts of other senior care facilities like nursing homes and rehabilitation centers with those of assisted living facilities.

If granted access to assisted living residents and their families, a researcher should hold focus groups or in-depth interviews with these subjects to explore the exact messages and materials that initially attracted them to their selected facility. Also, through these focus groups or interviews, the researcher should attempt to pinpoint why the subjects decided on their facility. The researcher should compare and contrast the results from these focus groups or interviews with those gathered from the in-depth interviews with the assisted living representatives in this study. This analysis would show if the studied facilities understand and provide exactly what their targeted audiences want to know when searching for an assisted living facility; it would show whether the results of this study are valid and reliable.
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Content Analysis Category Definitions

The following definitions appear in order of appearance on the standardized spreadsheet.

1. **Senior(s) Smiling**: a photograph on the folder cover of one or more seniors smiling

2. **Family**: a photograph on the folder that includes more than one person and conveys the idea that the people in the photograph are related

3. **Assisted Living Facility**: a photograph or drawing on the folder of a building resembling an assisted living facility

4. **2-color**: a folder cover consisting of only two colors

5. **4-color**: a folder cover consisting of four colors

6. **Facility Name**: the name of an assisted living facility on a folder cover

7. **Slogan**: a sentence or phrase on the folder cover

8. **Descriptive Words**: independent words on the folder cover that describe some element of an assisted living facility

9. **Quality of Life**: elements of the folder cover hint to the enjoyable lifestyle assisted living residents experience

10. **Senior(s) Smiling**: a photograph on the brochure cover of one or more seniors smiling

11. **Family**: a photograph on the brochure cover that includes more than one person and conveys the idea that the people in the photograph are related

12. **Assisted Living Facility**: a photograph or drawing on the brochure cover of a building resembling an assisted living facility

13. **2-color**: a brochure cover consisting of only two colors
14. **4-color**: a brochure cover consisting of four colors

15. **Facility Name**: the name of an assisted living facility on a brochure cover

16. **Slogan**: a sentence or phrase on a brochure cover

17. **Descriptive Words**: independent words on the brochure cover that describe some element of an assisted living facility

18. **Quality of Life**: elements of the brochure cover hint to the enjoyable lifestyle assisted living residents experience

19. **Quality of Life Content**: elements in the brochure that hint to the enjoyable/pleasurable lifestyle assisted living residents experience

20. **Privacy**: use of the word or another word or phrase in the brochure that means having space to oneself

21. **Comfort**: use of the word or another word or phrase in the brochure that means at ease

22. **Celebratory**: use of the word or another word or phrase in the brochure that means cheerful or happy

23. **Choices**: use of the word or another word or phrase in the brochure that means having options

24. **Activities**: use of the word or another word or phrase in the brochure that hint to the idea that residents can participate in various events

25. **Home-like**: use of the word or another word or phrase that means like one’s prior living space

26. **Convenience**: use of the word or another word or phrase in the brochure that means handiness or ease
27. **Independence**: use of the word or another word or phrase in the brochure that means self-sufficient

28. **Safe/secure**: use of either word or another word or phrase in the brochure that means protected

29. **Self-esteem**: use of the word or another word or phrase in the brochure that means valuing oneself

30. **Individuality**: use of the word or another word or phrase in the brochure that means having and maintaining a unique personality

31. **Well-being**: use of the word or another word or phrase in the brochure that means having one’s mind, body and spirit fulfilled

32. **Quality of Service Content**: elements in the brochure that suggest the level of service assisted living residents experience

33. **Respectful**: use of the word or another word or phrase in the brochure that describes the facility’s staff as polite

34. **Warm**: use of the word or another word or phrase in the brochure that describes the facility’s staff as friendly and caring

35. **Support**: use of the word or another word or phrase in the brochure that describes the facility’s staff as helpful

36. **Dedicated**: use of the word or another word or phrase in the brochure that describes the facility’s staff as devoted workers

37. **Personal Approach**: use of the phrase or another phrase or word in the brochure that describes the way the facility’s staff handles each resident in a unique manner
38. **Attentive:** use of the word or another word or phrase in the brochure that describes the facility’s staff as alert

39. **Supports Changing Needs:** use of the phrase or another phrase or word in the brochure that describes the facility’s capability to care for patients in need of different levels of care

40. **Collaborative:** use of the word or another word or phrase in the brochure that hints to the idea that the facility’s staff works together

41. **Innovative:** use of the word or another word or phrase in the brochure that hints to the idea that the facility’s staff uses modern ideas and procedures to care for residents

42. **Definition of Assisted Living:** description of what an assisted living facility contains in the brochure

43. **Specialized Services:** a list or description in the brochure of a facility’s services that improve residents’ quality of life, including meals, activities, medically trained staff members, seminars, television and telephone access, housekeeping and laundry

44. **Personalized Services:** a list or description in the brochure of a facility’s services that cater to a resident’s unique needs, including assistance with medication and varying levels of staff support

45. **Respite Care:** a description in the brochure of a facility’s program which offers temporary, short-term living arrangements for individuals currently living at home

46. **Dementia an Alzheimer’s Care:** an insert in the folder that describes a facility’s capability to handle individuals suffering from dementia or Alzheimer’s
47. **Respite Programs:** an insert in the folder that describes a facility’s program which offers temporary, short-term living arrangements for individuals currently living at home.

48. **Dining Services:** an insert in the folder that describes a facility’s food preparation and distribution.

49. **Sample Menu:** an insert in the folder that resembles a resident’s daily food options.

50. **Services Listed:** an insert in the folder that lists or describes a facility’s personalized services, specialized services and/or amenities.

51. **Personalized:** an insert in the folder that lists or describes a facility’s services that cater to a resident’s unique needs, including assistance with medication and varying levels of staff support.

52. **Specialized:** an insert in the folder that lists or describes a facility’s services that improve residents’ quality of life, including meals, activities, medically trained staff members, seminars, television and telephone access, housekeeping and laundry.

53. **Floor Plans:** an insert in the folder that shows the set-up of a resident’s room.

54. **Monthly Activity Calendar:** an insert in the folder that shows the different activities available to residents on a monthly basis.

55. **Pricing Breakdown:** an insert in the folder that illustrates the costs associated with assisted living.

56. **Parent Company Description:** an insert in the folder that gives information about the company that owns the assisted living facility.
57. **Medicaid Discussion**: an insert in the folder that mentions medical insurance

58. **In-house Physician List**: an insert in the folder that lists the doctors who work in

    the assisted living facility
APPENDIX B
## Assisted Living Promotional Folder Contents

<table>
<thead>
<tr>
<th>A. Folder Cover</th>
<th>Cordia Commons</th>
<th>Post House</th>
<th>Terraces</th>
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<tbody>
<tr>
<td>1. Picture</td>
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</tr>
<tr>
<td>a. Senior(s) Smiling</td>
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<td>X</td>
<td></td>
</tr>
<tr>
<td>b. Family</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>c. Assisted Living Facility</td>
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<td></td>
<td>X</td>
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<tr>
<td>b. 4-color</td>
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<tr>
<td>b. Slogan</td>
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| B. Brochure Cover       |            |            |          |
| 1. Picture              |            |            |          |
| a. Senior(s) Smiling    | X              | X          | X        |
| b. Family               | X              |            |          |
| c. Assisted Living Facility |            |            | X        |
| 2. Color                |                |            |          |
| a. 2-color              | X              |            | X        |
| b. 4-color              |                | X          |          |
| 3. Copy                 |                |            |          |
| a. Facility Name        | X              | X          | X        |
| b. Slogan               |                | X          | X        |
| c. Descriptive Words    | X              |            |          |
### Assisted Living Promotional Folder Contents

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<td>e. Activities</td>
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<td>f. Home-like</td>
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<td>g. Convenience</td>
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<td>h. Independence</td>
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<td>i. Safe/secure</td>
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<td>j. Self-esteem</td>
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<td>k. Individuality</td>
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<td>l. Well-being</td>
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| 2. Quality of Service Content | |
|-------------------------------| X | X | X |
| a. Respectful | X | X | |
| b. Warm | X | X | |
| c. Support | X | X | |
| d. Dedicated | X | X | |
| e. Personal approach | X | X | X |
| f. Attentive | X | |
| g. Supports changing needs | X | |
| h. Collaborative | X | |
| i. Innovative | X | |

| 3. Definition of Assisted Living | |
|--------------------------------| X | |

| 4. Specialized Services | |
|-------------------------| X | |

| 5. Personalized Services | |
|--------------------------| X | X | |

| 6. Respite Care | |
|-----------------| X | X | |
## Assisted Living Promotional Folder Contents

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<td>8. Parent Company Description</td>
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<td>9. Medicaid Discussion</td>
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<td>10. In-house Physician List</td>
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