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ASKED & ANSWERED

DANIEL REINGOLD RiverSpring Living

INTERVIEW BY MAYA KAUFMAN

ovid-19 ravaged the city's nursing homes, and they have yet to fully recover from the fatalities and financial devastation. Some never will. One industry survey found only a quarter of nursing homes and assisted-living communities nationwide are confident they will make it through the year. Hebrew Home at Riverdale, a 751-bed nursing home in the Bronx, was hit especially hard. Now its not-for-profit owner, RiverSpring Living, and CEO Daniel Reingold are embarking on a long-term transformation plan that will remake what it looks like to care for the elderly.

If you could go back, what would you do differently?

I would demand that the government provide us with the gear and the testing on day one and not have us go through those first horrible 10 weeks that we were on our own. Particularly knowing the first outbreak was in a nursing home in Washington state, we should have known long-term care was going to be a vulnerable spot.

How has the pandemic altered the landscape of nursing homes, assisted-living facilities and home care?

People want to stay home as long as they can. We expanded our home care program, and others are looking at home care as an area of growth. Ironically, as much as people were fearful of congregate care, people were much more fearful of being alone in their own apartments. So we're seeing an enormous demand for safe care that allows people to be in a social environment. The old model of the nursing home is going to change to serving three primary populations: shortterm rehabilitation, supporting advanced memory care and end-of-life care.

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WHO HE IS President and CEO, RiverSpring Living AGE 66 BORN Scarsdale, N.Y. RESIDES Scarsdale, N.Y. EDUCATION: Bachelor's in sociology, Hobart College; master's in social work, Columbia University; J.D., Benjamin N. Cardozo School of Law of Yeshiva

University FAMILY LIFE

Reingold has three grown daughters.

SEA LEGS Reingold spent the summer of 1976 in the U.S. **Merchant Marines.** The experience taught him the importance of providing social services directly in the workplace. When he got back to land, he set up an alcoholism program with the **Seafarers International** Union to tackle what he had observed was a major problem for mariners. "This is primarily men who are away for six months at a time," he said. "It's a lonely time."

How does the industry chart a course for survival post-pandemic?

We have to partner with our workforce to come up with new models of staffing. In many ways the collective-bargaining agreement that we're operating under has been the same since 1974. We need to talk about new types of job creation, career ladders, a living wage, making sure the benefits are good but not prohibitively expensive.

The Legislature this year passed new staffing requirements for nursing homes. Why has finding workers been such a challenge?

Part of it is the pure demand on the health care system. It has been stretched to its max. We're seeing calls from other states asking for health care workers to come and deal with the surge. We're not able to recruit as we have in the past from other countries because of limitations on immigration and even just the pandemic. This is kind of a perfect storm. The key right now is to hold on to the staff that we have. The staffing requirements make wonderful sense. The question is, is the Legislature going to pay for it, which will allow us to then recruit people and compete with other industries?

What's the industry's biggest challenge now?

Capital, particularly on the nonprofit side. The biggest need is for us to secure significant capital investment in buildings that have been built 30, 40 years ago and need to be retrofitted to this population and the consumer preferences. In our case, we're taking what was much more of a hospital-looking structure and converting it into something very spa-like, upscale.

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