



Assisted Living Report Card Advisory Group Meeting

Date: 11/20/2025

Location: Hybrid meeting: Zoom virtual meeting hosted by University of Minnesota or in person at DHS (Elmer L. Anderson Human Services Building)

Attendance

Advisory Group Attendee	Organization
Todd Bergstrom	Care Providers Minnesota
Jeff Bostic	LeadingAge Minnesota
Kari Everson	LeadingAge Minnesota
Angie Kluempke	Medica (Managed Care Organization)
Naima Mohamed	Residential Care Providers of MN (RPAMN)
Laura Orr	Minnesota Elder Justice Center
Tom Rinkoski	AARP
Parichay Rudina	Ombudsman for Long Term Care
Kris Sundberg	Elder Voice Family Advocates
Tori Anderson	Stratis Health

Staff and presenters	Organization
Julie Angert	Department of Human Services
Lauren Glass	Department of Human Services
Martina Johnson	Department of Human Services
Rachel Shands	Department of Human Services
Tetyana Shippee	University of Minnesota
Tricia Skarphol	University of Minnesota
Wendy Ruyle	5 by 5 Design
Diana Lillicrap	5 by 5 Design
Observers	Organization
Mary Henschel	Community Member
Teresa Lewis	Department of Human Services

Agenda

- Welcome and brief introduction of new attendees
- DHS present:
 - DHS: Updates on 2025 QoL surveys and report card phased launch
- 5 by 5 Design present:
 - Marketing campaign planning

Progress on 2025 quality of life surveys

Resident and family survey data collection progress

- Resident quality of life surveys were completed in October.
- Family satisfaction surveys will be conducted through November.
- As of October 20, 2025:
 - 81% of in-scope settings participated in resident surveys and met margin of error (MOE)
 - 48% of in-scope settings participated in family surveys and met MOE
 - *AL setting with a licensed capacity to serve at least 7 residents as of January 22, 2025, are considered in-scope for the 2025 round of surveys.

Report card phased launch updates

Report card phased launch successes: 2025

- Launched the new Resident Health, Safety, and Staffing measures
- Achieved four timely ratings updates following the 2025 ratings schedule
- Added a new feature to link directly to MDH licensing surveys
- The number of providers with ratings has doubled, from 750 to 1500+

Report card phased launch challenges: 2025

- Maltreatment findings indicator is delayed until further notice.
- Delays in adding a new feature to link to maltreatment reports directly.
- Inconsistency of website usage data collection.

Adding maltreatment findings information to the report card

- DHS planned to add an indicator showing whether an assisted living facility had a substantiated maltreatment finding in the past 12 months, where the facility was wholly or partially responsible.
- We determined that we cannot update this indicator manually and an automatic update to this indicator would not be able to determine whether the facility itself – versus an individual – was responsible.
 - Because of these limitations, DHS is delaying launching this indicator until further notice.
- For now, DHS will add a feature that links to maltreatment reports for substantiated maltreatment findings in the past 12 months.
 - This will be located on the facility's individual ratings page.

Report card schedule for 2026

- **January**: 1) June – August 2024 MDH ratings and 2) resident survey ratings from 2025
- **April**: 1) September – November 2025 MDH ratings, 2) family survey ratings from 2025; and 3) MDH maltreatment investigations table
- **July**: December – February 2026 MDH ratings
- **October**: March – May 2026 MDH ratings

AL Report Card marketing campaign planning: 5 by 5 Design

- DHS partnered with 5 by 5 Design to help with the following goals and objectives:
- **Goal**: To successfully brand, communicate, and promote the ongoing use of the Assisted Living Report Card.
 - Identify target audiences and recommend strategies, channels, and messages to effectively reach and influence them.
 - Using audience insight and competitive comparison, define the value proposition and points of difference for the report card.
 - Create brand messages and talking points to succinctly explain the report card's purpose, benefits, and functionality.
 - Develop a straightforward and action-based one-year communications plan and implementation calendar to engage target audiences, measure outcomes, and accomplish the desired goals.

5 by 5 Design conducted the following after planning and consultation with DHS:

- Audit of report card website
- Marketplace review (trends, relevant considerations)
- Competitive evaluation
- Qualitative survey

- SWOT (strengths, weaknesses, opportunities, and threats) analysis

Key Findings:

Marketplace Trends:

- Longer pipeline to reach future audiences
- Solo agers
- Use of social media as a source of information for family members and caregivers
- Use of YouTube by aging adults

Survey Outcomes

- People look to family, friends, and referral sources for information and guidance
- Lack of trust is an issue across the industry and for some familiar with Minnesota's report card
- Beyond data integrity, people also value the ability to compare different facilities and are concerned about costs

Competitive Insights

- Other sites offer a softer and warmer marketing approach
- A few do a good job at building confidence in their research and expertise
- Some are very direct in addressing user concerns and offer additional resources
- Some are well coordinated with their social media channels to build user engagement

Marketing Strategy Recommendations

1. Audience focus is caregivers and referral sources
 - a. Toolkits for referral sources
 - b. Targeted communications that empathize with caregivers' concerns
 - c. FAQs for caregivers
2. Clear messaging
 - a. Ads with a singular, clear message
 - b. Reels, videos, and other quick-view tools to share important and hard-hitting info
 - c. Clear action steps, FAQs, and how-to details
 - d. Consistency of campaign images, messages, and calls to action
3. Credibility
 - a. Direct messages about data collection and provider relationships
 - b. Images and messages that portray DHS's accountability for wellbeing of Minnesotans
 - c. Transparency, even when issues arise
4. Messaging

- a. Points of difference between the Assisted Living Report Card and other tools out there (e.g., it's convenient, it's impartial, it's flexible)
- b. Value proposition (e.g., find more options, feel more confident)

Targeted audience messages

1. Assisted living residents: Find the facts, then find your next home
 - a. Sample headlines:
 - i. Choose with confidence
 - ii. Make your next move with confidence
 - iii. Let data help drive your decision
 - iv. Move with confidence
2. Caregivers: Find peace of mind
 - a. Sample headlines:
 - i. Better informed, more confident
 - ii. Select with confidence
 - iii. Choose with con
 - iv. Help your loved one make the next move with confidence
3. Referral sources: Refer with confidence
 - a. Sample headlines:
 - i. Let data drive the decisions
 - ii. Help your clients make the next move with confidence
 - iii. Use data to help drive the decision
 - iv. A tool that makes a complicated task easier
4. Advocates: Data to give you confidence
 - a. Sample headlines
 - i. A trusted tool to make your job easier
 - ii. A resource you can rely on for better-informed options
 - iii. Data to drive decisions
 - iv. Let data drive decisions
 - v. Better information for better outcomes

Initial Marketing and Communications Plan Recommendations

1. Get organized – collect, create, and customize language, graphics, and templates and engage partners to prepare for success.
2. Launch within existing communications channels/create new materials – evaluate and track efforts on existing communications and typical channels.
3. Launch with new materials and expand reach with advertising – implement new tools and channels to expand connections and run paid ad campaign for search engines and social media.

4. Evaluate results of communications plan – report and refine strategy for the new year.

Overall campaign KPIs

- Increase in site traffic
- Month-over-month increase in engagement of campaign content
- Brand awareness and positive brand association achieved with referral and advocate audiences by end of campaign

Advisory Group questions and answers related to marketing campaign planning

Question: Who are the competitors included in the marketplace evaluation?

Response from 5 by 5: We identified those as having some best practices that we wanted to highlight - Elder Care IQ, A Place for Mom, Ohio Long-Term Care Guide, and AssistedLiving.org.

Comment from DHS: A state agency such as DHS typically does not use competitors as terminology to describe other resources - this is typically used in marketing. When we say competitor, it is more to describe other resources competing for your attention, as well as peers.

Comment: In your first strategy, you listed caregivers as a primary target. In my work, I have found a new segment in that group that I'll call pre-caregivers - individuals in their late 40s/early 50s who are anticipating taking care of their parents, friends, etc. They are good at researching information and asking questions and I find a different group of people than current caregivers.

Response from 5 by 5: This lines up directly with our statement about this being a pipeline. We need to communicate with those searching for information and trying to plan 5-10 years out, not just individuals who need care now.

Question from DHS: What from the points of difference slide resonates with you when thinking about the report card?

- **It's convenient:** online access makes it easy to compare multiple providers all in one place, anytime, anywhere.
- **It's impartial:** the data is collected and shared for the wellbeing of Minnesotans, making it unbiased and trustworthy.
- **It's flexible:** the search and sort options are customizable based on individual needs.

Response from a group member: The flexibility of people being able to use the AL Report Card website and search in ways they want seems to be the highest reaction I get when I talk to individuals about the report card. The convenience is really apparent to anybody who is adept enough to use the internet search. I would say flexibility is my first choice in terms of importance.

Question: How do you envision this value proposition going? Is this the content you are trying to market or is it an idea that you want the advisory group to respond to?

Response from 5 by 5: A little bit of both. This presentation summarizes all the value that is being provided through this tool. I do not see this as showing up in an ad because it is too much and we do not want to overwhelm people. We will have to create a variety of different communications where value is included in all communications that hit different points.

Follow-up comment: If you are asking about content and not just packaging, then I have one more piece to add and I want to hear other group members' thoughts. There are different measures of quality and each person values different things when they choose an assisted living facility. We are not pushing one measure; we have multiple measures they can prioritize. They are resident quality of life, family member satisfaction, resident health outcomes, safety, and staffing. This is more content for the value proposition.

Follow-up response from 5 by 5: I agree. We are summarizing options that matter most to you and I think we could lean into that a little more as we continue. I would say overall this is like an elevator speech where you have 2 minutes to tell someone what the tool does.

Comment: You mentioned a short video of someone describing how they used the website or how they found it valuable. People react to personal testimony than they do to a very well-placed statement. It is significant and gives individuals attachment when they hear that someone else finds this tool valuable.

Response from 5 by 5: You are right. One of the reasons our strategy was to be emotional with our approach is because people will respond better to stories, to testimonials, and to actual footage. We want to make sure they include key points from the value proposition when telling their own stories.

Comment: I think it is important to remind people that visiting/touring a facility and seeing how it operates is also important. I would be in favor of this type of messaging as well.

Response from 5 by 5: I think that could be woven into a secondary message. We want to be careful not to promote any one facility. This message could be placed in the how-to information or when we are talking about giving them an action step; once you have used this tool, visit the facilities.

Comment from DHS: I want to reiterate that we will take all ideas and suggestions brought forward today into consideration prior to moving forward with development and finalization of our marketing plans.

Question: The message to assisted living residents or those moving to assisted living soon is to find the facts, then find your next home? I think it is a good message. A group member noted earlier that maybe facts do not matter to some people. It might be good to have several messages for older people who are looking for assisted living. If we know they have different values, facts may be one of the values, but not the main value – just trying to understand if it is one message or multiple messages.

Comment from a group member: I agree with you. While I think that people search for meaningful data, this is a very emotional decision for people. Emotions that people carry are significant, but they do not take away from data-driven things. I think choosing with confidence is a good message and we need to be aware that emotions play a huge part in the decision.

Question: How different is this messaging from other options? Wouldn't they use a similar headline- choose with confidence? What is different about us (AL report card)?

Response from 5 by 5: In our research, we did look at messaging from other peers and we will go back through this information before we launch any sort of marketing efforts. As of last spring, no one was pushing this idea of choosing with confidence or using facts to drive decisions.

Comment: For the messaging to caregivers, in the first paragraph under Find Peace of Mind, in the last sentence where it says contains answers, I would replace 'answers' with the word 'information.'

Response from 5 by 5: Can you talk more about that nuanced difference to make sure I am really following your thought process?

Response from a group member: I do not want to presume that people will find answers in one source of information. To me, answers imply that this is going to solve all the problems. I hope this is helpful for people, but it provides them with a level of information so that they can decide with confidence.

Comment: The use of the word loved one can potentially isolate those people who are caring for a friend or working with someone through an organization, etc. I am wondering how others respond to this language and are there other suggestions that we can use instead?

Response from a group member: When you think of demographics, there are quite a few older adults, solo agers, who do not have family members helping them and they may have a friend and other people in their networks serve as that role. I think we could explore other options.

Response from a group member: Would it be OK to remove loved one and just say, "as you help choose an assisted living facility?"

Comment: For messaging to referral sources, what do we mean by referral sources? Is this MCOs (managed care organizations), case managers, counties. I would not want this to be replacing the work that referral people are supposed to be doing or strong language that indicates this is an all-powerful tool that is going to be correct in referring people. To me, it reads strongly in this area.

Response from 5 by 5 design: I would say it is all those positions, but it might also be medical providers. Anyone in the position to help someone searching for an assisted living facility.

Comment: I suggest removing the word 'rigorous.' I do not think it is necessary and when I think of the term rigor, I think of a certain amount of human effort and we need to be candid about how this tool processes or simplifies a large amount of data. I am viewing this term from the age of skepticism about how much work is done by algorithms and artificial intelligence.

Comment from DHS: The resident and family survey process is a large effort for the purpose of populating data on the report card that we do not have anywhere else. It does process the MDH survey data and we do go through quite a bit of effort to translate that data into star ratings.

Comment: We could use the term unique instead- you can't get this information anywhere else.

Comment: Under the sample headlines, the last one would be my preference, "a tool that makes a complicated decision easier." A lot of people are looking for some instrument to help them make a good decision. For the people I meet with, the term 'data-driven' would resonate the least.

Comment: There are different audiences here. I am a researcher and individuals in my field care about the words rigorous, valid, and reliable. If the word rigorous does not resonate with some group members, how about the words valid or reliable? What are better words to use since they mean different things to different people? I strongly believe that what we are doing is valid and reliable – random samples and all the best methodological approaches. How do we translate that to these audiences?

Comment from a group member: I prefer the word reliable. The term rigorous, I understand from a research point of view what that means, but I am not sure what the value has for a general audience that I deal with regularly.

Question: I am curious if these types of messages were used at the launch of the nursing home report card - were they similar, different?

Comment from a group member: Three focus group members shared that there has not been this level of marketing directed towards the Nursing Home Report Card and no real marketing campaign. There were some instances of increased advertising when more funds were available, but not comparable to the level of marketing discussed at today's meeting.

Question: The slide that names the four target audiences (residents, caregivers, referral sources, and advocates) is missing the provider community. If the goal of your marketing and communications strategy is to have positive awareness and brand association, I think you need to go back and look at the provider community being one of those audiences as well.

Response from 5 by 5: That is good input. Early in this process we looked at a lot of audiences and there was a conscious decision to narrow in on these top four key audiences. There might be merit in reviewing if providers should receive targeted messages or at least be aware of these messages.

Advisory Group Next Steps

- Today's meeting slides and notes will be posted to the project webpage: www.mn.gov/dhs/assisted-living-report-card
- Our next meeting will be held on Tuesday, January 27, 1-3pm. Our tentative agenda includes:
 - Vital Research review of 2025 resident and family surveys round.
 - DHS updates on phased launch and marketing campaign.