

A simple question in 1918 gave birth to Jewish Senior Life



This is the 100th anniversary of what is now Jewish Senior Life, which has often been on the cutting edge of progress in elder care. Here a staff member interacts with patients and others last year after the COVID pandemic shutdown.

By VELVET SPICER

In 1918, Gitel Cohen asked her Jewish friends a question that would set the stage for a new era in caring for the elderly in Rochester.

“Ladies, I have something to ask you. Every city has a Jewish home except Rochester. How come?” Cohen asked Meyer Amdursky, Brina Appelbaum and Sarah Meyer.

Prior to that time, Rochester’s elderly population often depended on the charity of others to perform many of their daily tasks. For the infirm or those suffering from dementia, they were relegated to the County Hospital, an understaffed public institution.

Cohen and her cohorts got to work quickly and found a large house on St. Paul Street that featured enough bedrooms to house seven residents and support staff. The home was walking distance to the nearby Orthodox community, where many of Jewish faith lived at the time. The house was \$15,000, or roughly \$200,000 in today’s dollars.

But because women could not get financing in 1920, they went to Lester Nusbaum, a furrier and devout Jew. He obtained a bank mortgage and organized a board of 35 men and women to run the new Jewish Home for the Aged, with Nusbaum as president. The home’s first residents moved in in early 1921.

“There’s a Jewish word, tzedakah, and it’s part of our Jewish values. It’s about actively caring, doing what you can for others. It’s about charity,” said Michael King, president and CEO of Jewish Senior Life, as the organization is now known. “That was the way the Jewish community approached it in 1920, that tzedakah was what we were all about as a Jewish community and we need to have this home for our elderly.”

Within a year of opening, the Jewish Home had

purchased the house next door to its location, and in 1923, a successful capital campaign raised \$40,000 for an addition that would connect the two houses and grow the facility such that eventually 65 residents were housed there.

The Jewish Home began admitting infirm elderly residents in 1926, contracting with local Jewish physicians to provide services free of charge. By 1927, the Jewish Home had 49 residents including two married couples, four totally disabled residents and nine who were partly disabled. Two-thirds of the group received financial subsidies of some kind.



King

The Social Security Act was passed in 1935 to help the elderly get out of the so-called poorhouses.

The added income security also enabled the Jewish Home to enhance its services. By 1937, there were 67 residents in the home and it was filled to capacity.

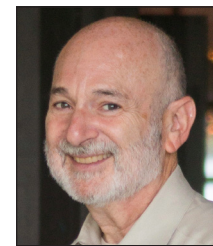
When World War II ended in 1945, the Jewish Home board moved forward on a plan to finance a new building. The board initiated a \$1 million capital campaign to build a new structure and expand the home’s medical facilities, recreational programs, social services and religious services. When no bank in Rochester would underwrite a mortgage for a nonprofit, single-purpose building, 13 board members put their own assets at risk and Erie County Savings Bank financed a \$250,000 loan.

The newly built home on St. Paul Street opened in 1950, transferring 49 male and 67 female residents. And for the first time in years, the Jewish

Home had vacancies, with the ability to house more than 150 residents.

The Jewish Home continued its growth and modernization for the next three decades, adding a 60-bed infirmary wing, a medical lab for routine tests, dental and podiatry services and increased its capacity to more than 240 residents.

New programs and an increase in residents who needed infirmary care meant the Jewish Home could expand its medical services and treat more people. But new regulations and oversight would, in 1973, have the Jewish Home opening up its beds to residents of other faiths.



Shore

During the 1980s, the Jewish Home had begun serving as a teaching nursing home, said Bernie Shore M.D., who spent three decades as medical director and seven years as a staff physician.

“We had sessions where I or other medical staff would do some teaching for nursing. We started putting on conferences internally and also for the community,” Shore recalled. “Highland Hospital internal medicine residents would come and could do a block elective in geriatrics. Then when that ended we started doing the same thing for family medicine residents.”

Early on, nursing home communities recognized the importance of having mental health support to deal with psychological and behavioral issues in nursing homes. Restraints were common, but so were medications to manage behavior. It was crude, Shore said of early practices nursing home personnel used to control behavior.

In 1990, Shore and his colleagues at the Jewish Home were among the first nationwide to remove restraints.

“It was a risky business at the time. It was not the standard of care. The impression was if you removed restraints from people you would have lots of falls, lots of injuries and lots of lawsuits,” Shore said. “The people who got tied up the most were the people who were most behaviorally out of control, and those were actually the people who were most likely to be hurt (by being restrained). They were people who would try to keep getting up, who would slide through the restraint, who would get stuck in bedrails.”

And there was a social and psychological effect from being seen in restraints, Shore said, because people would treat them differently or refuse to talk to them. So the staff at the Jewish Home began studying residents to find individuals who might be candidates for removal of restraints.

“It turns out restraints are quite dangerous. It

makes people more dependent, they get more illness, they decline cognitively, they decline socially," Shore explained. "It took a lot of education, not only for staff, but for families of residents at the home."

Within two years, the Jewish Home went from 49 percent of residents using restraints at least sometime to 1 percent. And that has become the standard nationwide.

"Because nobody had been doing it, we were among the five to 10 in the country to do this and first in the region," Shore said.

Jewish Senior Life also had its hand in end-of-life and advance directives. The home initiated guidelines for care, a program in 1987 to ensure people would have a way to express their preferences for life-saving treatment like CPR and ventilators, Shore recalled.

Using the Physician Orders for Life Sustaining Treatment that began in Oregon, Jewish Home staff, working with physician Patricia Bomba M.D., developed the Medical Orders for Life Sustaining Treatment that is used statewide now.

Meanwhile, by the 1980s it had become clear that the Jewish Home had outgrown its St. Paul Street facility. In 1981, the board, which was led by its first woman president, Ruth Rosenberg, purchased 20 acres of land on Winton Road South for \$400,000. The groundbreaking for the new facility took place in 1983 and the new building was dedicated in June 1985. Residents moved in one week later.

"We moved 250 residents in one day," King noted of that opening 35 years ago. "When the Jewish Home was built and opened in 1985 it was state-of-the-art, and it was built like every other nursing home: some private, some semi-private (rooms), long corridors. That's the way the medical model was set up back then."

But times have changed and the Jewish Home has addressed those changes.

"Now, today, we've gone back to small houses," King said. "It's like 'Back to the Future' for us — we started out back in 1920 in a small home and today we've learned that small, intimate spaces make a big difference in the way care is delivered and the relationships that are built with our residents between the staff and the residents."

In 2017, the Jewish Home completed construction on its Green House cottages, three three-story buildings that house 108 residents. The cottages represent a new standard in senior living, one that gives elders a more meaningful life, empowers staff and creates a real home for residents.

Residents have private rooms with built-in wardrobes and entertainment centers, and the home furnishes flat-screen televisions. Unlike at most nursing homes, each room has its own bathroom, complete with a European-style shower that can be accessed easily by those in wheelchairs, private medicine cabinets, grab bars and a heat lamp.

"We have to celebrate our past but it is about looking to the future," King said about Jewish Senior Life's centennial. "We completed this \$80 million transformation project. We transformed the way skilled nursing care is going to be delivered and became the third largest Green House community in the country. Then we came inside and completely gutted Farash Tower so we have all private rooms, small, intimate spaces, dining up on the floors. All the things you would like to have at home we now have in our home."

Once the Green House homes opened, construction crews were able to get started on Farash Tower, which underwent nearly two years of gutting and renovations. Walls were removed and put up to enable each room to be private. Each floor got its own therapy



Weinberg

gym so that residents and acute therapy patients could rehab on their own floor, and every floor has its own kitchen and dining room to better serve residents. Jewish Senior Life is a continuing care community so its offerings are broad. With more than 1,000 employees, the organization has the Summit at Brighton for independent living; Wolk Manor for assisted living and enhanced assisted living; the Lodge at Wolk Manor for assisted living memory care; the Jewish Home for long-term care; the mySuccess short-term rehabilitation program; a neurobehavioral rehabilitation program; the Atkin Center for Outpatient Rehabilitation program; adult day health care retreat program; Marian's House residential daytime retreat; physician house calls and more.

The Jewish Home also has diversified and recently began a partnership with Heritage Christian Services Inc. on Project Search, a program that pairs an agency that serves individuals with intellectual and development disabilities with a business that can offer internships in a variety of areas.

"You can have 10 interns. They come onto our campus Monday through Friday for 10 months. They have classroom time on campus and rotations of work training around our campus. Heritage Christian Services provides job coaches and job trainers," said King, who learned about the program through involvement with his own special needs son. "We've hired many of them ourselves. Or they can go out and get a job in the community. There is such a shortage of opportunities for those with developmental disabilities in our country. All they need is a chance, a little longer learning curve and an employer that is flexible and willing to do that."

Among the 20 employers statewide that offer the program, the Jewish Home is the only senior living community.

The Jewish Home has changed tremendously in its first 100 years, but one thing that has remained the same is its desire to provide the highest level of care for its residents, said board Chair Margot Weinberg M.D.

"At the level of the CEO and executive staff and the employees, they have so much compassion and are so creative. They can pivot and change to what the needs are. It's been remarkable to watch that," Weinberg said. "They're given room to try new things. Employees are so happy to be there. They seem to treat each other like one big family. When the employees feel that way it carries over to how they treat the residents."

Monique Jenerson-Caven is a licensed practical nurse who has worked at the Jewish Home for 25 years. She agreed with Weinberg.

"It's a great place to work. I enjoy the residents and staff," Jenerson-Caven said. "It's a family atmosphere."

She said that when colleagues outside the

home find out where she works they often ask how to get a foot in the door.

"We really care about the residents and I think that's what makes it unique," she said.

Shore recalled his first interview when he came to the Jewish Home.



Jenerson-Caven

"I was really impressed by them — they were smart and really interesting — and the sense of dedication and commitment to what they were doing," Shore said. "Throughout my working career, the people were top notch, good values, good ethics, curious,

interested in learning and caring and considerate people. It was a pleasure working with them."

King said Jewish Senior Life's success began with that first home opened a century ago.

"I think what sets us apart is our culture. Our culture started 100 years ago because we're founded on some Jewish values that translate to anybody. It's about compassion, integrity. These values translate into how our care is being delivered," he said. "We look for people who have servant hearts, that are passionate about the elderly that make a good fit in the organization. This culture has been carried on by some great people ahead of me."

And as the Jewish Home embarks on its next 100 years its leaders have plans that will continue that tradition. The trend of people wanting to age at home will be a key part of the organization's plan moving forward, Weinberg said. And King noted that the nursing home is looking at wearable technology for its rehab patients. At 88 beds, the Jewish Home is the largest post-acute provider in Rochester and monitoring the health of those patients is crucial.

The Jewish Home also is placing a focus on the LGBTQ+ community through its diversity and inclusion initiative.

"What we've learned is across the country, many senior living communities are not positioned — meaning the staff aren't trained around the LGBTQ community — so that when you're a resident coming in, some of them we've learned go back into the closet because the organization isn't positioned to be welcoming and open to this," King explained. "We're going to spend this year working with an outside organization training all our staff so that the LGBTQ community will know that we're open, diverse and sensitive to their particular issues."

In addition, the Jewish Home may well enter the affordable housing industry at some point in the near future.

"We think there's a big need for not only moderate level housing for middle-income folks, but also low-income housing. We think there's a big need in Brighton and other areas of Rochester for truly affordable housing, income-based housing," King said. "We're going to be rolling up our sleeves and taking a look at this over the next few years. This is for individuals who struggle who are paying 30 or 40 percent of their income on housing."

"It's a whole different ball game for us," he added.

But that's what Jewish Senior Life is known for. vspicer@bridgetowermedia.com / 585-653-4021 / @Velvet_Spicer