
Aligning the Senior Housing & Care Stack

Governance is step one. Intelligence is what operators buy.

The argument in four moves

01

Map the stack

An operator is not one entity. It is five disciplines, each running its own systems and asking its own questions.

02

Filter the noise

Most data conflict is integration lag or an undecided policy. Fix those once, and they stay fixed.

03

Govern six fault lines

Six metrics genuinely move. Each needs a named authority, a rule, and a record, every period.

04

Sell the intelligence

Governance is the setup. What a COO buys is knowing what moved, why, and what to do next.

Governance first. Intelligence second. Execution last.

An operator is a stack of disciplines

Each layer asks a fundamentally different question, and depends on a different structural truth to answer it.

Layer	The question it asks	The truth it depends on
Executive & Asset Management (insight)	How is each asset performing, and why did it move?	Numbers every other layer agrees on
Sales & Marketing (growth)	Who is moving in, when, and at what rate?	Move-in dates and quoted rates that hold
Clinical & Care (operations)	What does each resident need today?	Care levels that map cleanly to billing
Property & Finance (back office)	What did we bill, collect, and spend?	A unit count and rate the rent roll can defend
Workforce & HR (cross-cutting)	Who worked, and what did it cost?	Hours that reconcile from schedule to invoice

Acquisitions fracture the stack

6–12

distinct systems per building at a typical regional operator of 10–40 communities

Tools bought at different times by different teams were rarely chosen together. The larger the portfolio, the more mixed the stack becomes.

EXHIBIT 1 · REPRESENTATIVE SYSTEMS BY LAYER

Sales & Marketing	Clinical & Care	Property & Finance	Workforce & HR
Aline	PointClickCare	Yardi Voyager	OnShift
Yardi CRM	MatrixCare	RealPage	UKG
WelcomeHome	ALIS	Sage Intacct	ADP
Continuum	Eldermark		Paycom
			ShiftKey

Illustrative. The system count is a typical range, not a measured result. Vendor names are examples; inclusion does not imply a current integration, certification, partnership, endorsement, or production deployment.

THE THESIS

Data conflict is not a property of the industry. It is a property of the stack.

A multi-state operator that inherits four technology stacks is not fighting an operational problem. It is fighting an architectural fault line.

Diagnose the friction before fixing it

Before resolving any discrepancy, identify its nature. Only one of these four requires ongoing executive governance.

ONGOING GOVERNANCE Real conflict Symptom Two systems disagree on one measure, and the right answer moves month to month. Fix A named authority decides, every period, on the record.	SETTLE ONCE One-time policy Symptom A real choice between definitions. Once made, it stays made. Fix One executive decision, then a system configuration.	AUTOMATE Sync lag Symptom A change landed in one system; the other has not heard yet. Fix An automated alert or workflow.	INTEGRATE Disjointed systems Symptom Two systems hold pieces of information that never combine. Fix A technical integration, not a leadership ruling.
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Disjointed systems are missed introductions

Nobody actually disagrees; the systems have simply never met. These are solved by integration architecture, not executive rulings.

Handoff	One system knows	The other does not	What it costs
Sales → Workforce	The CRM (Aline) knows four move-ins are coming next week.	The scheduler (OnShift).	Staffing is planned for last week’s census.
Clinical → Billing	The assessment tool (PointClickCare) knows a resident moved up a care level.	Billing (Yardi).	Care is delivered at a level that is not yet charged.
Workforce → Finance	Payroll (ADP) knows exactly what agency labor cost.	The flash report, which closes before the invoice arrives.	The month closes with labor understated.

Exhibit 2 · Illustrative handoffs. Vendor names are examples only.

Five metrics to settle once

These masquerade as ongoing conflicts but are business rules. An afternoon with the CFO and a regional operations leader yields a one-page policy.

Metric	Why the systems disagree	The one-time fix
Occupancy (numerator)	CRM counts pending move-ins; census counts residents present; billing counts days.	Define “resident unit days” once and mandate it.
NOI and EBITDAR	General ledger vs. owner’s model vs. lender package.	A contract term: write the definition into the management agreement.
Community fees & bad debt	Billing vs. general ledger.	GAAP answers it; the auditor applies it.
Hours worked & FTE	Scheduling vs. timekeeping vs. payroll.	Payroll is authoritative, because it reflects what was paid.
Residents vs. occupied units	Clinical counts people; billing counts units.	Two correct answers to two questions. Compute both; label both.

Six fault lines where the answer moves

Filter out policy and integration, and six metrics remain: where more than one layer is legitimately right, and someone must make the call again next period.

FAULT LINE 1 Available units Licensed, rent-roll, care-configured, and physically available counts.	FAULT LINE 2 Move-in & move-out dates Lease signed, physical admission, and rent commencement.	FAULT LINE 3 Agency & contract labor Hours scheduled, worked, submitted, and invoiced.
FAULT LINE 4 Resident days Clinical, billed, and budgeted denominators.	FAULT LINE 5 Rate & RevPOR Quoted, contracted, and charged rates.	FAULT LINE 6 Care levels State assessment categories vs. internal pricing tiers.

Available units

The most overlooked conflict sits underneath everything. State compliance, finance, clinical, and maintenance each keep a valid, and different, unit count.

Impact: occupancy, RevPOR, and PPD inherit a different denominator depending on which system is queried.

EXHIBIT 3 · ONE COMMUNITY, FOUR VALID UNIT COUNTS

Unit count and source	Units	Occupancy*
Licensed (state record)	149	85.9%
On the rent roll (Yardi Voyager / RealPage)	143	89.5%
Configured for care (PointClickCare)	141	90.8%
Physically available (maintenance system)	140	91.4%

5.5 pts spread in reported occupancy: same building, same night, same residents.

**Illustrative: assumes 128 occupied units. Physically available = 149 licensed, net of 6 units in renovation, 2 models, and 1 office.*

Move-in and move-out dates

Three systems. Three correct answers. Three entirely different questions.

Day 3

Lease signed, deposit taken

The sale closed: Aline / Yardi CRM



Day 8

Admission and care start

The resident physically arrived:
PointClickCare



Day 1, next month

Rent commencement

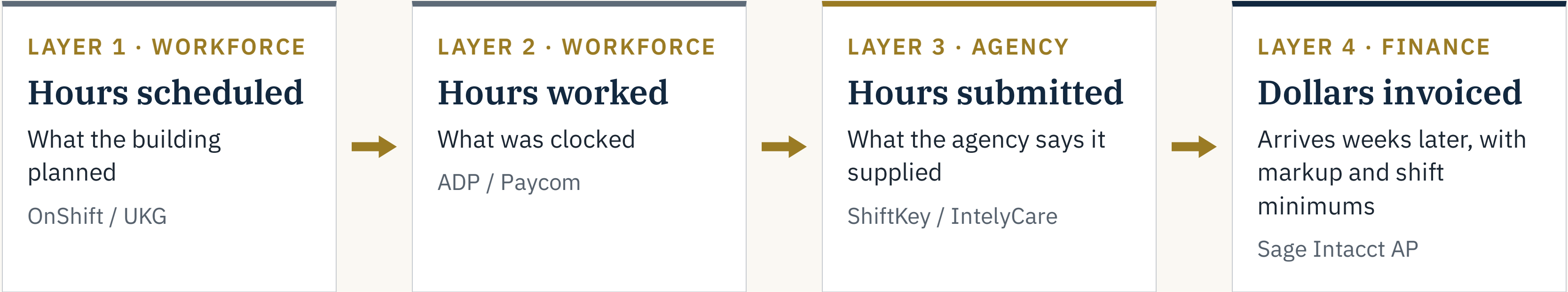
Billing begins, prorated: Yardi Voyager

Move-outs split the same way: notice given, physical departure, and billing end.

Impact: every length-of-stay figure, absorption rate, and move-out analysis inherits whichever date the reporter happened to choose.

Agency and contract labor

The gap opens when scheduling and payroll sit in different systems, and widens when third-party portals submit invoices with markups.



A gap inside one product, such as OnShift scheduling vs. OnShift time, is a configuration issue. The true fault line runs across vendor boundaries.

Resident days

Labor per resident day is the metric operators manage to. Three denominators give three different answers to whether a building is overstaffed.

Labor cost

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which resident days?

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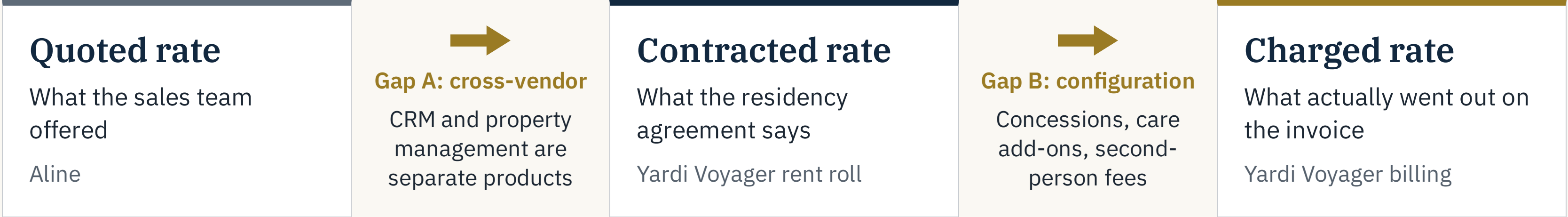
Labor per resident day

Clinical resident days Days a resident was physically in the building, under care Eldermark / MatrixCare	Billed resident days Total days charged for the month RealPage / Yardi	Budgeted census What the operating plan assumed Budget workbook (Excel)
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Each denominator is right for its own question. The governance decision is which one answers which question, and holding to it.

Rate and RevPOR

This is where a concession can run for months without anyone noticing: a mix of cross-vendor gaps and internal configuration delays.



Impact: the quoted-to-contracted gap is a true cross-vendor fault line whenever the CRM and the property management system are distinct products. The contracted-to-charged gap is internal: fix it in configuration.

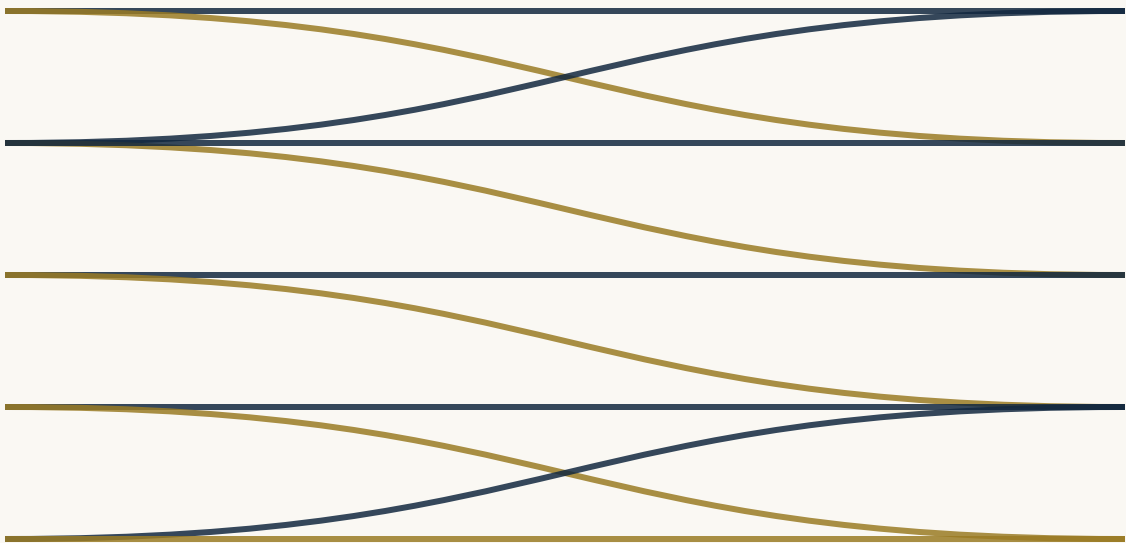
Care levels: state versus operator

Operators usually run one internal tier structure across the portfolio. The fault line is not state-to-state complexity; it is the mapping between systems.

THE ASSESSMENT RECORD

State-mandated categories, assessed by a practitioner (PointClickCare)

- State category A
- State category B
- State category C
- State category D
- State category E



THE RATE SHEET

The operator’s internal pricing tiers (Yardi billing)

- Internal tier 1
- Internal tier 2
- Internal tier 3
- Internal tier 4
- Internal tier 5

Fix: build the mapping between clinical assessment categories and billing tiers for every state the operator works in, and govern it every time either side changes.

The governance trap

A chief operating officer does not want the word “governance” explained to them.

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- 01 Selling governance on its own asks a COO to care about a problem they believe they already solved, by declaring a number in a spreadsheet.
 - 02 As an abstract category, governance is enormous and hard to prove. The buyer cannot tell where it ends.
 - 03 Governance is a necessary foundation. It is not the product they buy.

The strategic sequence

STEP ONE • THE SETUP

Governance

Settle the six numbers that genuinely need settling. Establish a named authority and a visible audit trail. Govern them quietly.



STEP TWO • THE PRODUCT

Intelligence

Reason on top of those numbers: what moved, why it moved, what to do about it, and whether last month's decision was executed.

Step one makes step two trustworthy. Step two is what a COO wants to open on a Tuesday morning.

When systems disagree, the operator governs

Definition.

Authority.

Reconciliation.

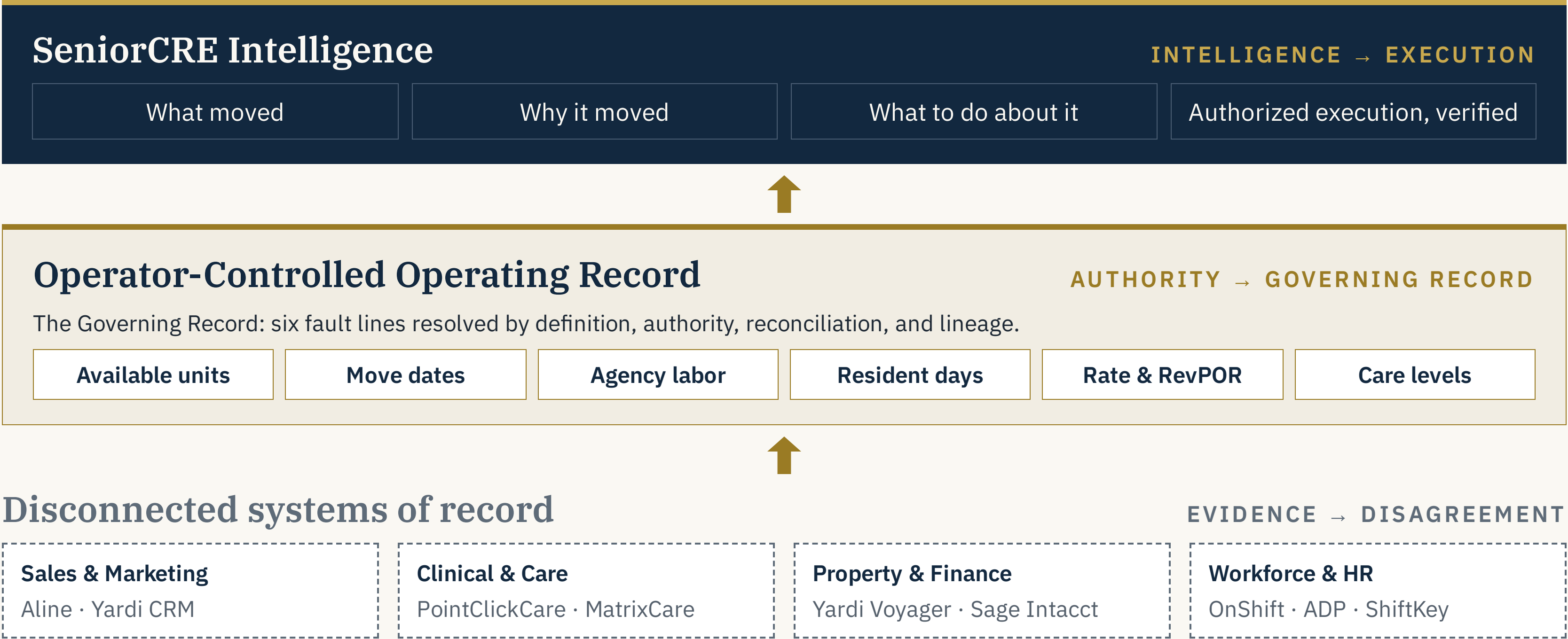
Lineage.

The four that make data governable, carried into practice through six controls.

Control	What it requires of a fault-line number	Financial-controls analogue
Shared definitions	One written definition per metric, used by every layer	Chart of accounts
Source authority	A predetermined system of record for each input	System-of-record designation
Reconciliation	Documented resolution whenever sources disagree	Account reconciliations
Decision lineage	Each number traceable to its sources and rulings	Audit trail
Human authority	A named person decides where the rule does not settle it	Delegation of authority
Repeatability	Same answer, same way, every community, every period	Standardized close

Set the standard, not the system. Govern first. Replace only by choice.

The complete stack, aligned



Illustrative design intent. Pre-production: governed record screens are built, not yet validated.

Giving operators their month back

THE CHEAP PART The hour spent pulling a Yardi report and dividing resident days to settle an occupancy number.	WHAT OWNERS PAY FOR The days spent building T-3 and T-6 comparisons, combing the general ledger, and working out exactly why EBITDAR moved.
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The manual way	About three days · one asset · one spreadsheet
The design objective	Portfolio-wide · automated · by the 11th of the month

Make sure the number is right. Then tell me what it means.

Illustrative. The manual timeline is a typical estimate, not a measured result; the platform row states a design objective, not validated production output.

SUMMARY

Aligning the layers

- 01 Map the enterprise stack, and accept its complexity.
 - 02 Filter out the noise from disjointed systems and one-time policies.
 - 03 Govern the six true fault lines, quietly.
 - 04 Layer intelligence on governed data to explain the month.
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Shift the burden of stack friction to the platform, and the senior housing & care C-suite can stop arbitrating data and start driving operating performance.

Request an Executive Briefing

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