

# Overcoming Post-Pandemic Challenges in Senior Care with InfeXBloc™

History tells us that a medieval castle that relied only on its moat to keep the enemy out lost when the enemy was already inside. To overcome that, the security architecture of a castle always had to have a way to sniff out and resist and neutralize defectors who were already inside. This is a concept that is of great importance today in for senior care communities who must weather the COVID-19 storm and rebuild trust. These facilities must now accept the uncomfortable notion that



an infection, such as coronavirus/MRSA/C-Diff/Pneumonia, could already be inside, ready to take down our facilities and our seniors, rather than assuming that our moat will protect us (we have seen 'lockdowns' as our moat).

This is also a notion that has proven to be effective in other industries...

For example, in the aftermath of 9-11, in the commercial aviation industry, every visitor or passenger approaching the airport was by default designated unsafe. Then, through a series of provable and repeatable safety checks, he was designated safe while inside the perimeter. This was achieved by implementing checkpoints set up at multiple concentric perimeters within the airports - a practice inspired by a military doctrine called defense-in-depth as contrasted to castle-and-moat. Anytime the passenger exited a perimeter, his security disposition had to be reset to back to unsafe.

With the advent of public clouds, in the cybersecurity industry, key paradigms were shifted. Authentication and authorization systems switched from:

- 'Default allow unless explicitly denied access' to 'default deny unless explicitly allowed'.
- Firewall rules for virus scan software systems switched from 'blacklisted websites' to 'whitelisted websites'.

**The InfeXBloc™**  
architecture was created  
to shift the senior care  
industry and adopt this  
same paradigm change to  
enhance safety and care.

### **Implicit-Trust Policy**

The operating model for Senior Care Facilities before March 2020 - the model which failed to protect our residents with the attack of Coronavirus - was implicit-trust based. Everyone was 'safe' unless they proved otherwise.

This meant that our energies were focused on actual caregiving. Facility infrastructure was more directed to caregiving needs, e.g., fall prevention features, like grab bars in corridors and bathrooms, non-slippery ambulatory surfaces, clutter-free rooms, etc.

### **Proven-Trust Policy**

In the proven-trust policy, we reject the comfort of the assumption that all is automatically safe inside the Senior Care facility and instead embrace the danger of the bug being already present inside. Thus, everyone is 'unsafe' unless proven otherwise.

For years, we acknowledged that Influenza, MERS, C-Diff, Pneumonia, and other diseases are infectious and often appear in our facilities. Yet, Coronavirus and its high fatality rate have gotten everyone's attention and shown us that assuming our facilities are safe spaces is no longer an option.

As a consequence, Senior Care facilities must now focus on caregiving as well as stopping infection spread and must adopt a new safety architecture that addresses the inherently large attack surface area.

## Two Approaches Working in Synergy

The InfeXBloc™ proven-trust safety architecture consists of a combination of two distinct approaches working together to keep residents, staff, and visitors safe:

- Implement strong perimeter to keep the infection from entering the facility
- Implement maximum transmission friction to block cross-transmission inside the facility.

With InfeXBloc™, each resident's room is designed to defend itself in order to maximize resistance to infection transmission within the facility and the micro-community of human and non-human actors (residents, caregivers, visiting families, caregiving equipment, etc.) inside every RCFE is taken into account. When each contact between these actors is sandwiched between disinfecting steps, we greatly increase the resistance for infection transmission.



To learn more about how the InfeXBloc™ architecture can take your RCFE from an implicit trust to a proven trust model so that you can enhance safety and regain trust after the COVID-19 storm, check out [www.infexbloc.com](http://www.infexbloc.com).

INFEXBLOC™ PILOT SITE

# Golden Springs Ranch





## About Ashish Warudkar

Ashish has worked in the software industry for 30+ years including 19+ years in the healthcare sector. He also has been an entrepreneur for over two decades and provides consultation to “Golden Springs Ranch” which is an upcoming InfeXBloc™ home in Palmdale, California which will introduce the innovations discussed in this paper to provide its precious residents with a safe happy home and their families with peace of mind.

### Ashish Warudkar is trained at:

<b>IIT Bombay</b>	Mechanical Engineering
<b>UCI</b>	Predictive Analytics (7/8)
<b>Harvard</b>	Disruptive Innovation Strategy with Clayton Christensen
<b>MIT</b>	Advanced Certificate for Executives in Management, Innovation & Technology Architecture & Systems Engineering of Complex Systems Platform Strategy – Building & Thriving A Vibrant Ecosystem Business Dynamics – Diagnosing and Solving Complex Business Problems Executive Certificate in Strategy and Innovation
<b>Product School</b>	Product Management
<b>BWW</b>	Network Marketing
<b>Oren Klaff</b>	Pitch Mastery

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**Meetup:** Monthly meeting (first Sunday 6pm CA time) of Senior Care Accountability Network  
<https://www.meetup.com/Senior-Care-Accountability-Network-SCAN/>

