Skilled Nursing Facilities

Templates: Occ Med AI Deep Research

Select and copy the specific protocol below for the niche you are researching. Fill in the [CITY, STATE] and optional [PROVIDER SERVICES] sections before running.

Skilled Nursing Facilities (SNF) Protocol

Objective: Identify and prioritize high-intensity Skilled Nursing Facilities (SNF) in a specific geographic market.

[USER INPUT REQUIRED]:

- **Target Market:** [INSERT CITY, STATE]
- **Provider Services (Optional):** [INSERT SPECIFIC SERVICES OR STRENGTHS HERE]

Phase 1: Executive Briefing (Market Health)

Provide a high-level analysis of the SNF market in this geography. Focus on:

- **Geographic Uniqueness:** What makes this specific city/region unique for senior care (e.g., aging demographics, local labor laws, or dominant health systems)?
- **Broad Occupational Health Scope:** Analyze the overall market "health"—including average turnover rates (CNA/LPN), regulatory pressures (CMS/DHHS), and the physical strain of the local workforce.
- **Service Alignment:** Mention how the provided services (if any) or broad Occ Med standards meet these specific market needs.

Phase 2: Top 6-8 Primary Targets (The "Sure" Data)

Provide a table containing only the most verifiable data points:

Organization Name	Parent/Chain	Certified Beds	CMS Staffing Rating	Primary Location

Phase 3: Strategic Narrative (The Deep Dive)

For each of the Top 6-8 targets above, provide a detailed but skimmable analysis:

- **The "Why":** Explain why this account is a priority (e.g., high bed count, low staffing stars indicating turnover, or recent expansion).
- **Workforce Profile:** Detail the specific risks: heavy manual lifting, behavioral/dementia-related injury risk, and the "Speed to Hire" urgency for their clinical

staff. Search for indicators like "Bariatric units" or "Ventilator care" which increase staff physical load.

Phase 4: Decision-Maker Map (Secondary Table)

Identify likely decision-makers. Focus on: **Nursing Home Administrator (NHA)**, **Director of Nursing (DON)**, and **VP of HR/Risk** (if part of a chain).

Organization Name	Role/Title	Likely Decision Maker Name (if found)

Ambulance & Medical Transport

Ambulance & Medical Transport Protocol

Objective: Identify and prioritize Private Ambulance and Medical Transport (NEMT) companies.

[USER INPUT REQUIRED]:

- **Target Market:** [INSERT CITY, STATE]
- **Provider Services (Optional):** [INSERT SPECIFIC SERVICES OR STRENGTHS HERE]

Phase 1: Executive Briefing (Market Health)

Provide a high-level analysis of the medical transport market in this geography. Focus on:

- **Geographic Uniqueness:** Local emergency response dynamics, municipal contracts, and regional transport corridor challenges.
- **Broad Occupational Health Scope:** The overall health of the transport workforce—stress, DOT compliance burden, and high-intensity physical risks (stretcher/stair-chair handling and high-mileage driving).

Phase 2: Top 6-8 Primary Targets (The "Sure" Data)

Provide a table containing only the most verifiable data points:

Organization Name	Service Level (911/NEMT)	Est. Fleet Size	Parent/HQ	Primary Location

Phase 3: Strategic Narrative (The Deep Dive)

For each of the Top 6-8 targets above, provide a detailed but skimmable analysis:

- **The "Why":** Focus on their contract volume (Hospitals/Systems) and the "Speed to Road" bottleneck. A "parked rig" due to slow driver clearance is a primary business pain.
- **Workforce Profile:** Detail the specific DOT/CDL requirements and the musculoskeletal risks associated with high-frequency loading/unloading and stair-chair usage.

Phase 4: Decision-Maker Map (Secondary Table)

Identify likely decision-makers. Focus on: **EMS Chief**, **Operations Manager**, **Safety Director**, or **HR/Onboarding Coordinator**.

Organization Name	Role/Title	Likely Decision Maker Name (if found)

Surgery Centers

Ambulatory Surgery Centers (ASC) Protocol

Objective: Identify and prioritize Ambulatory Surgery Centers and Outpatient Suites.

[USER INPUT REQUIRED]:

- **Target Market:** [INSERT CITY, STATE]
- **Provider Services (Optional):** [INSERT SPECIFIC SERVICES OR STRENGTHS HERE]

Phase 1: Executive Briefing (Market Health)

Provide a high-level analysis of the ASC market in this geography. Focus on:

- **Geographic Uniqueness:** Local preference for independent vs. hospital-owned surgical care and the specific surgical specialties dominant in the area.
- **Broad Occupational Health Scope:** The high-efficiency "Surgical Engine" workforce—BBP exposure risk, N95 respiratory compliance, and the critical "Speed to the OR" for staff and travelers.

Phase 2: Top 6-8 Primary Targets (The "Sure" Data)

Provide a table containing only the most verifiable data points:

Organization Name	Ownership Model	Primary Specialties	Est. OR/Surgical Blocks	Primary Location

Phase 3: Strategic Narrative (The Deep Dive)

For each of the Top 6-8 targets above, provide a detailed but skimmable analysis:

- **The "Why":** Focus on their independence, surgical volume, and specialized physical risks (e.g., Orthopedic, Spine, or Total Joint centers).
- **Workforce Profile:** Detail the specific compliance needs (BBP/Sharps injury protocols) for specialized clinical staff in high-turnover surgical environments.

Phase 4: Decision-Maker Map (Secondary Table)

Identify likely decision-makers. Focus on: **ASC Administrator**, **Director of Nursing (DON)**, and **Clinical Director**.

Organization Name	Role/Title	Likely Decision Maker Name (if found)

4. Dental Group & DSO Protocol

Objective: Identify and prioritize Large Dental Practices and Regional Dental Groups (DSOs).

[USER INPUT REQUIRED]:

- **Target Market:** [INSERT CITY, STATE]
- **Provider Services (Optional):** [INSERT SPECIFIC SERVICES OR STRENGTHS HERE]

Phase 1: Executive Briefing (Market Health)

Provide a high-level analysis of the Dental landscape in this geography. Focus on:

- **Geographic Uniqueness:** Consolidation trends in the local market (Independent vs. Regional DSO) and any specific local healthcare labor dynamics.
- **Broad Occupational Health Scope:** The specialized risks of the dental workforce—Sharps/BBP injury management, ergonomic strain, and high-volume compliance for hygienists/assistants.

Phase 2: Top 6-8 Primary Targets (The "Sure" Data)

Provide a table containing only the most verifiable data points:

Organization Name	Group Type (DSO/Ind)	Number of Locations	Main Specialty	Primary HQ

Phase 3: Strategic Narrative (The Deep Dive)

For each of the Top 6-8 targets above, provide a detailed but skimmable analysis:

- **The "Why":** Focus on total workforce volume (Hygienists/Assistants) and the administrative burden of managing safety/OSHA protocols across multiple sites.
- **Workforce Profile:** Detail the specific turnover patterns and high-risk specialties (Oral Surgery/Periodontics) where sharps injury protocols are most critical.

Phase 4: Decision-Maker Map (Secondary Table)

Identify likely decision-makers. Focus on: **Practice Administrator**, **Office Manager**, or **Regional Operations Manager (DSO)**.

Organization Name	Role/Title	Likely Decision Maker Name (if found)

Dental Group & DSO Protocol

Dental Group & DSO Protocol

Objective: Identify and prioritize Large Dental Practices and Regional Dental Groups (DSOs).

[USER INPUT REQUIRED]:

- **Target Market:** [INSERT CITY, STATE]
- **Provider Services (Optional):** [INSERT SPECIFIC SERVICES OR STRENGTHS HERE]

Phase 1: Executive Briefing (Market Health)

Provide a high-level analysis of the Dental landscape in this geography. Focus on:

- **Geographic Uniqueness:** Consolidation trends in the local market (Independent vs. Regional DSO) and any specific local healthcare labor dynamics.
- **Broad Occupational Health Scope:** The specialized risks of the dental workforce—Sharps/BBP injury management, ergonomic strain, and high-volume compliance for hygienists/assistants.

Phase 2: Top 6-8 Primary Targets (The "Sure" Data)

Provide a table containing only the most verifiable data points:

Organization Name	Group Type (DSO/Ind)	Number of Locations	Main Specialty	Primary HQ

Phase 3: Strategic Narrative (The Deep Dive)

For each of the Top 6-8 targets above, provide a detailed but skimmable analysis:

- **The "Why":** Focus on total workforce volume (Hygienists/Assistants) and the administrative burden of managing safety/OSHA protocols across multiple sites.
- **Workforce Profile:** Detail the specific turnover patterns and high-risk specialties (Oral Surgery/Periodontics) where sharps injury protocols are most critical.

Phase 4: Decision-Maker Map (Secondary Table)

Identify likely decision-makers. Focus on: **Practice Administrator**, **Office Manager**, or **Regional Operations Manager (DSO)**.

Organization Name	Role/Title	Likely Decision Maker Name (if found)