

**Transcript**  
**Coronavirus Q & A – Episode 6**  
**May 8, 2020**



Alex Metricarti: Hello! I'm Alex Metricarti, Chief Marketing and Public Relations Officer for Living Branches. Today is Friday, May 8, 2020. Welcome to you and welcome to Ed Brubaker, our President/CEO, for another one of our weekly chats. I'm reminded that this is week six of our chats and for the first time we have to issue a correction. Would you like to issue the correction? Or would you like me to issue the correction, as it is really my mistake?

Edward Brubaker: Well it might have been your mistake, but I repeated the error. Essentially the error was that when we talked about the answer to the question last week about not having employees go between campuses. It is true that we don't have them go between campuses that are COVID positive or COVID negative. So persons who works at Souderton Mennonite Homes or The Willows are not going to Dock Woods. We try to minimize other persons going between campuses, and when I say persons I'm talking about employees who are direct care givers, not other persons who may just be dropping off something or minimally involved between the campuses. And so, we do have just a few, I think it may only be two, but let's just say it's a minimal number of persons that may work between campuses. And that would be between Souderton and The Willows. And so that is what we're doing. Last week I think we inferred and said nothing is happening between a campus that is positive and a campus that is negative. And that is true. But I think there may have also been the inference that it wasn't happening elsewhere as well. And so we just wanted to clarify that point. There is not same-day, unless they shower and change, etcetera, so we do try to take precautions. And we do feel that is very safe to do so, particularly with no cases, no known active cases. But we did want to make sure that was corrected. And thank you to the sharp viewer that brought that up as well.

AM: Let's start first this week with some of our test results. I'm happy to be able to tell everyone that we continue to have no residents or staff testing positive for the virus either at The Willows of Living Branches or at Souderton Mennonite Homes, which of course is very good news. On our Dock Woods campus we continue to have two residents in Dock Manor, which is our HUD housing for seniors, and then let's talk more specifically about what's going on in Harmony House and Dock Terrace, because we do have some interesting news, I think, at least, from Harmony House that I think people would like to hear about.

EB: Yes and we actually did have some good news this week. We were finding that the symptoms that people were experiencing in Harmony House, in most cases, not in every situation – I think we have a few that are still not doing as well as we would hope, but there were others that were actually doing much better. And so we did do our first round of re-testing because we were three weeks out from the original testing in Harmony House. And so we wanted to check to see where things were at. And we had some good results. I think one came back, if I recall correctly, that was still positive, which was still also something to think about

because that was three weeks out, so we also understand that seniors may shed the virus, if you will, for longer than the typical amount of time, so testing is quite important. But we were pleased to see that others had gone from negative to positive or other negatives had stayed negative. Now it's premature to celebrate too much, but we want to do some additional retesting next week. This is all part of our longer-term, not getting back to pre-March normal, but to having things ease up a bit in Harmony House, just for the residents there because it's really important for them to have the ability to get outside of their rooms, etcetera. Important for everyone, frankly, but quite important in a Memory Care unit. So we're very pleased with those results and will continue to hope for the best as we go into the next week.

AM: And then in Dock Terrace we made the decision this week to go ahead and test all of our residents. Can you talk a little bit about that?

EB: Yes we did do that. And I know on various videos we've talked about the pros and cons of testing, the importance of what are you going to do with the results, the reality of a negative result is a negative at the time of testing – it does not presuppose that someone will stay negative. And so there's so many challenges, I guess I would say, around testing. And so we don't take testing lightly. We don't just forge forward with doing testing without saying, 'What are we going to do with the results of those tests? And how is that going to impact our behavior?' Because I believe it's not just an exercise I finding out who's positive and who's negative. It's an exercise in saying who's positive and who's negative and what are we going to do with those results? What does that make as far as any changes in what we do? And so we did want to get a baseline, essentially, for everyone, or almost everyone, in Dock Terrace, the Health Care center at Dock Woods. And so we did that. And so we then were doing a co-horting of those residents. Co-horting meaning grouping the people who were positive together. Part of the reason for that is to try to keep the negative residents negative and to separate with some separation, but it also helps us with PPE management. I would say regardless of what you may hear in the media or elsewhere, personal protective equipment is not as readily available as you might think, or you might hope, or you might hear. Right now it's gowns that are the problem. We have a real challenge finding gowns and they are very expensive. And so we are doing the best we can. We have kind of shifted from the N95. We have found ways to clean the N95 masks, as well, so we can use them longer. But frankly in the industry, across the country, gowns are where the issue is. And so that is part of the reason, too, for co-horting people. It makes the management of personal protective equipment easier and more efficient in that way, to try to preserve what we have. So that was then an outcome. We said, "We need to move people." Now, I would say this: it is much easier for you and I to talk about, 'well let's look at a test, let's look at the results, let's move people around. That's easy to talk about in a meeting. It was a whole lot more difficult, and I know there were difficult family conversations this week, and understandably so, that families didn't want their loved one moved, or had some concerns about that. It was hard for staff, too, because for them, they were wanting to care for these people through their disease and illness. They know them. And now that gets shifted around and they may not be caring for the same people. So talking about what may be right or best in theory is a whole lot different than carrying it out in practice. And so honestly my heart just goes out to the staff, the families, and the residents who had to experience this. We truly felt it was

going to be the best thing to do, but it was very hard. And I don't want to minimize that reality because it is very hard.

AM: That was an eye-opener, I think, in our meetings this week for me. I was expecting, "Oh sure, if I'm a resident and I've been rooming with somebody for months or years, of course I wouldn't want to leave them." So of course that would be difficult, but I did not consider the impact it would have on staff. I know they care for residents, but there is almost this sense of pride or control, or just, "I owe this to my residents to get them through." So it was extremely difficult for them.

EB: I would say that emotional connection, and frankly, the love that our residents have for the staff, but also the staff for the residents, is an important part of what makes this place special, but when it comes to these kinds of things, it's also what makes it very difficult. There are CNAs that work in Dock Terrace that have worked there 35+ years. These are not people who just started last week. We have newer staff as well, but the point is people have worked here for a long time and they form relationships with the residents. We have a number of staff persons who have contracted it, and the one I'm thinking of was putting in a lot of time because she wanted to help. She was intent on helping the residents and I understand from the director of Health Care services and the assistant director of Health Care services, that she is chomping at the bit to come back to work because she wants to get back to work and help care for these people. That's the kind of commitment and the type of persons our staff are. And so when you have that, they also make an emotional bond and an emotional connection. And so these things are hard. They are very hard.

AM: To summarize, when we tested all of the residents in Country Cottage and Dock Terrace, we have 54%, which is 31 individuals, who tested positive. This information is on the website and you are welcome to check it out there.

We have a hard resident question this week for you. We're starting to play "Stump Ed." This question is from Abram. And he says, "A hard question to ask but I think it needs to be addressed at some point. Why is there such a big difference in the number of cases at Dock Woods vs. Souderton Mennonite Homes or The Willows?"

EB: That is a good question and it is a hard question. I would say the short answer, and maybe even the long answer, is this: We don't know. We really don't know. And part of the challenge is, I know you expected me to give long answer, I'm not necessarily known for short ones, the point is that we really don't know, but there are various reasons that perhaps could play into this. However, I'm not going to delve into many of those because it's pure and simple conjecture not based on science, not based on facts. A lot of that may make interesting newspaper articles, it may make interesting conversation, but it's not the type of thing that is appropriate to share because it has no basis in fact. Having said that, I would say this, in addition to the fact that we don't know and this virus is a very tricky thing, the other side of it is there are more residents on the Dock Woods campus than there are at Souderton. So just as you watched the news and

saw in New York City, there was a lot of spread, a lot of people next to each other. And by no means am I comparing Dock Woods to New York City as far as size, but the point is it is a larger campus by a few hundred people than the Souderton campus. Does that have an impact? Does it now? I don't know. I know there's large nursing homes in New York City that had large numbers of persons impacted. So just even percentage-wise that's going to cause more to be impacted. But once it gets into a facility, it is very hard to control. It's a microscopic virus. It can spread in ways we don't even fully understand. So that's one reason I would say. It's a larger campus so there's more people that could be in and out, staff or residents. And I know residents in Health Care are in the facility, but there are other residents coming on campus, albeit not through the Health Care center etc. So that would certainly be one explanation. Other than that, honestly it's hard to know because, the other thing I would say is, I've read, as you can image, a huge number of articles about this, not just to try to figure out what could it be, but to understand what's going on with the disease, where is it going, and how is it progressing. And the one thing that has come through loud and clear is: do not judge a facility by the number of COVID cases they have. And these are by scientists and physicians because they said it is that hard to track. So there are 5-star rated facilities that have big challenge and there are 1-star rated facilities that have big challenge. And so we do the best we can. A friend of mine reflected when we were talking the other night on the phone, and I think he heard this on a video that I did, but it's just a truism and that is: you need to be able to go to bed at night every night and say, "I did the absolute best I could. For the residents, for the staff, for everyone involved." And say, "We don't fully understand." There are some times the why question in life is just not able to be understood, particularly at the time that it's happening. Maybe down the road we'll be understanding more about this disease, but right now it's very difficult to pinpoint what that reason is. And so I work hard with others to control the spread at Dock Woods and conversely be thankful for the time we're given at Souderton and The Willows that we have not had spread there, knowing that we don't know what the future holds. But for now we'll do the best we can and be thankful for the small things that we can be thankful for.

AM: Another thing we learned this week that we should share is that Governor Wolf has extended the stay at home order for Montgomery and Bucks counties at least till June 4<sup>th</sup>. I can speak for myself and say I was hoping miraculously it would be lifted sooner than that, but of course reality strikes again, and we are in this at least through June 4<sup>th</sup>. That has implications for our residents of course.

EB: Yes it does. Implications for our residents and our staff as well. I'm not sure if they have a plan in mind to kind of gradually ease us in, but it probably isn't a bad idea, because I suspect if on March 13 they would have told us June 4 is when they're lifting Montgomery County, it would have been a major problem. So in some ways, we as humans really do need to be eased into things, because it is really amazing the resilience that we have once we're dealing with challenging situations. For me it wasn't a large surprise because we were the first to go into restrictions and there's the most cases in Southeastern Pennsylvania. If you look at that from a logical standpoint and a scientific standpoint, it makes all the sense in the world. Whether or not it will extend beyond that, who knows? We don't know at this point in time. We just need to do the best we can with what we know at the present time and move forward from that. So that means, essentially things will continue as they have been here at Living Branches with the

restrictions on visitors, with all of those kinds of things. We are beginning to think about what could happen in the longer term, but frankly, we can't do too much thinking about that because we have the other day-to-day and realities of the current situation that we need to deal with as well. So that's the reality and we need to work within that.

I also know there is a special day coming up this weekend: Mother's Day. It's funny, depending who I talk to, some may say they don't celebrate that because their spouse is not their mother, but certainly we ordered some takeout to support some local businesses too, and I think that's a great way to do it. Having said that, we also had a plant order so people could order plants for their loved ones and they would get delivered here on campus. It is another good way to show you care without coming on the campus and frankly, showing you don't care, because you need to stay off campus. We know that's a challenge. We know it's a special day and people want to celebrate, but there are virtual ways that you can celebrate with your loved one, in this case, with your mother. So we want to encourage that as well. We did set up those alternatives. Hopefully people will find those to be acceptable. At the end of the day, the reality is we need to continue in this state of lockdown. We've made progress, I think, in this area. But we don't want to have an early withdrawal or an early exit take away from the progress we've made. So it's really important for us to keep discipline. I remember in my early, very short, videos: don't touch your mouth, your eyes, your nose, wash your hands – still really important stuff to do, to make sure you remember to do that. That is the primary way that things spread.

AM: There has been a lot of conversation this week, maybe increasing conversation, about "We've got to get back to normal. We've got to get opened back up again." And even talk about counting nursing home numbers as separate from the rest of the county. But I think it's very worthwhile to point out that yes our residents may be living in our communities, but our staff are not. If the number of cases increases again in the surrounding area, that will impact the residents who are living here.

EB: Yes that's right. And it's very important to keep that in mind. While this is a not-for-profit business, I do consider myself to be a business person. It is a large organization with 670 employees, 1300 residents, almost 200 million in assets, 52 million a year in income. We're not a small mom-and-pop business, and so we are a business that we need to run and do intelligently. And I recognize that you can't just shut down the economy for a long period of time. That is hugely damaging. The flip side is, this is a disease that inordinately impacts those that we serve, the population we serve, the age group we serve, so we need to double down on saying, "As we open up things in other places, what are we going to do to protect the older folks we serve?" And not just those we serve. Those in the larger community, too. Most people, frankly, don't like in retirement communities who are of these age groups. So we just need to keep that in mind. I have no problem with counting people in different ways, but however you do it, just tell the truth. Just say what you're doing. We can handle the truth. What we can't handle is something that seems like something is trying to be hidden. We are happy to be part of that conversation and welcome that as well.

AM: Well thank you, and thank you for watching. If you need information about the Living Branches response to coronavirus, all of that is on our website at [livingbranches.org/coronavirus](https://livingbranches.org/coronavirus). You can also email questions for next week's video to [coronavirusquestion@livingbranches.org](mailto:coronavirusquestion@livingbranches.org). Thank you!