

Transcript
Coronavirus Q & A – Episode 9
May 28, 2020



Alex Metricarti: Hello! I'm Alex Metricarti, Chief Marketing and Public Relations Officer for Living Branches. Today is Friday, May 29, 2020. Welcome to another one of our weekly video chats with Ed Brubaker, Living Branches President/CEO. Nice to see you again!

Edward Brubaker: Good to see you Alex.

AM: Let's start with a state of the situation, perhaps, with where we are with the coronavirus testing. All of this is available on our website a livingbranches.org/coronavirus. At our Dock Woods campus we continue to have residents testing positive in Dock Terrace only. We did more testing this week and had more negatives coming back from that, which we are very pleased with, but there still are some residents in Dock Terrace testing positive. We have six staff members at Dock Woods who are out right now with a positive test. At The Willows of Living Branches we don't have any staff or residents that have tested positive at this time. And at Souderton Mennonite Homes we have one new staff person who has tested positive in Park View, but no residents that have tested positive. And Ed, maybe you'd like to comment about that.

EB: Yes, and this, I would say, has happened before at Souderton, as well, so we don't want to be overly concerned but we are paying attention. One of the things we're going to do since it is the Memory Care unit at Souderton in Personal Care – we're getting all residents tested to have a baseline and see what's happening there. We did that last week in Health Care at Souderton, I think that was reported on the video last week. And we also plan to ask the staff to be tested, the ones that may have worked with that person on that day. For me it just illustrates how tenuous, I guess, I would say this situation is. And how I know we all want to loosen up restrictions, and we will over time, but it also points out that it only takes one. It really only takes one. So somehow as we move into the future we're going to need to find ways of working with coronavirus – and we will do that – but in the meantime we're learning all we can and trying to figure out what is the best way to work at this, and how can we best protect those that we serve, recognizing that nothing we do is perfect, but we will do the best we can.

AM: We had some interesting visitors on campus this week, speaking of learning all we can. Why don't you share who they were and what we experienced.

EB: We had about 10 in total – and originally we were thinking it was primarily going to be a CDC visit, but it turned out it was one lead physician from CDC, a number from HHS from various divisions of HHS, three persons from the Montgomery County Office of Health.

Somehow Souderton was originally on the pick list, which was fine, but we were also interested in, "Ok can you look at Dock Woods, too?" because that's where we've had more issues, at least to date. And they were very willing to do that. And so we didn't have to do this – it was a voluntary thing, not a punitive survey or anything like that. It was really for them to come out and be helpful to us, look at our practices, look at our policies, do a walk-through – they went in in full PPE – walked through our units. And so we were very glad to be able to host them and overall I would say it was a very good visit, very good people. The lead person, Dr. Dixon, she, I would say, was very empathetic toward our staff as well and the challenges they're going through, particularly at Dock Woods with the number of cases there. But we really did have a good visit which was basically all afternoon yesterday between both campuses.

AM: It was interesting to me – I think so many times when we hear government, especially the federal government, coming to our communities, we don't have, perhaps, a positive feeling about that. But I was struck by how much they seemed to want to help us and how open they were. And empathetic especially around what it means to wear PPE all day for our staff members and what it means to work in an environment where you are faced with the possibility that you're going to lose someone that you really care about.

EB: Right. And I think the thing we need to keep in mind is these persons were not from our survey agency, so they were not the Department of Health or surveyors coming in to say, "Are you following all of the regulations?" It was from CDC and HHS and really people that were looking at epidemiology and what we can do to become better. It was definitely a different type. We sometimes joke around here, "Oh I'm here from the government. I'm here to help." And it's like, you're kidding, right?! But these persons were all very great and very interested in looking at things. One of the things I was keenly interested in: we have this major issue – or significant, let's say – significant issue at Dock Woods and not so much at Souderton to date and at The Willows. What are we doing differently? We feel we do a lot of things the same. They really didn't point out anything. They talked about putting a puzzle together and if you remove one of the pieces - that could be the place where the virus gets in. It's just very hard to lock a campus down. And so, while it would have been nice, maybe, to hear, "Oh here is the smoking gun," they – And they're coming back. They're back today at Souderton to some work and probably at Dock Woods as well. So they may be able to give us something things in the future. But overall they were very complimentary of what we are doing, the way our staff cares for the residents, the way we're doing PPE, the way we're taking care of our HVAC systems, the way we clean. So they had very good and complimentary things to say. They didn't see anything glaring between the campuses. And so while it would have been nice, as I said, to know that, it was also nice to know that we're being consistent. And that's probably the hardest thing – one of the hardest things – about this disease: you feel is you do X, Y, and Z you can nip it in the bud and stop it and it's really, really hard to do that. And that's what they said too. This is a world-wide pandemic. It's not just in Living Branches. And so they reinforced that, too. That everyone is struggling with how to keep this in check. Overall I would say it was a very good visit, very helpful in that they gave us some pointers. They're coming back, as I said, today to help with fit testing of N-95s. We already know how to do that, but it's always helpful to learn more. They want to watch staff don and doff PPE. So I think it's a good outcome, win-win. And we really do appreciate their time. Because there was, between the county and feds and local resources, it

was 10 people I believe. So it was a significant amount of resources that was being expended and we appreciate that very much.

AM: And it can be helpful to have a second set of eyes with a fresh viewpoint looking at what we're doing.

EB: Yeah that's really what I was most enthused about, too. And also the fact that they actually walked through the unit. They had their masks and googles and face shields. But it was helpful that they were able to eyeball things and make some recommendations.

AM: Specific suggestions. One of the things that they talked to us about is the possibility that they may be able assist with some testing. And I know that's been a hot topic in Pennsylvania and all over the US now. And we talk about it regularly, but they could be of assistance to us.

EB: That's right. And we've talked about this almost weekly on the video because it's that important of a topic, number one, and it's something that has been evolving, honestly, from the beginning to now. The county is giving different regulations, and that's not to slam them, that just to say you learn. You learn more things along the way. The challenge is if you test today, and I come back negative. That doesn't mean I'm negative tomorrow or the next day or the next day. I've said this before also. So, for me, ultimately if we can get to daily rapid testing so we can also test visitors and families, that would be wonderful. But I can say again, regardless of what you hear in the media, it's just not as accurate as we would love it to be. And so there's some work to be done in that regard. But we are coming to the point and we really believe we need to do a baseline test of staff as well, particularly the staff in the care facilities. They're able to work with the National Guard and bring them in. So we're working at that. Bruce Alder and Kathy Shott are going to be doing some work with that to coordinate that. That would be for the first baseline and what we do after that we'll have to figure out. But we do feel it's important because it's been true for a while that we've know you have asymptomatic spreaders. They don't have symptoms but they're shedding the virus. I heard recently as much as 80% of the people would be in that category. I'm not sure if that's really everyone, but suffice it to say, even if it's 40-50-60% and you're spreading and you don't know – in fact the person at Park View – she was very surprised and shocked that she was positive. That's what happens. And so we feel we need to have a baseline and we also wanted to immediately test all residents in Park View just as we did very early on, I think April 15th was when we did Harmony House. So you're learning new things along the way and trying to figure out new things and testing is becoming an important element. And we always felt it was. Ultimately, daily testing would be wonderful. We'll see if we ever get to that point.

AM: Well clearly there's no capacity for daily testing.

EB: There's not.

AM: We've speed the speed in which we are getting test results back is declining because so many people are testing right now.

EB: Exactly. And I was listening to NPR today and really, at minimum, across the country we need 900,000 tests a day and we're not anywhere close to that. So, yeah, that's really the issue.

AM: One of the other big things, of course, that's happening in Pennsylvania is that next Friday, supposedly, we're all going to yellow in the categorization of where the counties are. And so while I, of course, would be delighted to throw open the doors and celebrate a yellow status, that doesn't really mean much for us, does it?

EB: Yeah that's correct. And when you look at the difference between red and yellow for facilities and organizations such as ours, it really doesn't mean much. It talks about you shouldn't have more than 25 persons together at one time. We're not even going to be going to those points. We're not going to have small event for Residential Living in Summit View or Fisher Auditorium or anything like that. So churches and other places like that are impacted in that regard, but as far as visitors coming, as far as residents needing to be in their rooms, that does not change from red to yellow. I say unfortunately but the reality is we really need to be at that place, so I say unfortunately from the perspective of, "wow, this has been a long time." But the flip side is we really need to be sure we do those things that keep our residents safe. And so you're right – there really isn't a lot of difference. I would also say even as we go to green that doesn't mean that we're going to be green. Because again, we're in a different category than the general public who are opening up business in Pennsylvania. And so it is different for us. And it's different in Residential Living than it is in Personal Care and Health Care. We have a task force that's going to be working on that and working with the Coronavirus Response Team. We also want to find ways of getting feedback, particularly from Residential Living residents because they would be in a different category than the care facilities. But this is going to be a slow process. And I know hair care and hair salons were a big question coming in and they are not opening until the green phase. Honestly I did cut my hair a little bit last week because it was getting in my eyes. So I trimmed it a little bit. I'll be honest, one of the reason I am not doing it is because my hair salon, or whatever you want to call it. The place I get my hair cut is closed. But we're in this together. So while I may take scissors to it at home I'm not going to go out and get it cut somewhere, because we are in this together. And if our residents can't, we shouldn't either. That really is green phase for hair care.

AM: I was talking with my mom last night about this, because this is a hot topic in our household. She was sharing that her hairstylist has said she's willing to cut hair in her home and so my mom made an appointment because she just can't take it anymore. And the day before she was going to her appointment, she read a news article about a hair stylist who was cutting

hair at home, who was wearing a mask, made sure everyone who was getting their hair cut was also wearing a mask, and she was asymptomatic and ended up spreading it to 41 different people.

EB: Wow.

AM: So my mom cancelled her appointment. She's wearing more hats. But yeah, the risk is real.

EB: And I know it's annoying and frustrating, and all those kinds of things, but this is the reality for us right now. I would also say we got some feedback, too, about residents in Personal Care and Health Care who may not be as able to do their own hair. And we did speak to the campus executives and the care staff are really doing what they can to make sure the residents' hair is washed and combed and taken care of. And so they are filling in for some of the things that the hair stylist would have normally done. So those provisions are happening, but as far as the actual salon being open, that will not happen until at least the green phase.

AM: And I think, maybe just to recap there, we know that yellow is coming. We have a subcommittee that is working on that. We actually have some communication that will be going out this afternoon, Friday, to residents so that they have a little more feeling of where we are. But it's going to be slow going.

EB: Yeah. It really will be. And that's the challenge, but that's the reality, too. And so we'll have to find ways to deal with it.

AM: The questions I had this week from residents were mostly focused on hair care and testing and visitation, which I think we've covered in all of this. So maybe I will just say, thank you everyone for watching. Thank you to those of you who participated last week in our giveaway with MHEP. We ended up having 36 people who entered and we gave away five sets of tickets, so we'll have to look for some other fun things we can do in weeks to come. Thank you all, and have a great weekend.