

Transcript
Coronavirus Q & A – Episode 12
June 19, 2020



Alex Metricarti: Hello! I'm Alex Metricarti, Chief Marketing and Public Relations Officer for Living Branches. Today is Friday, June 19, 2020, which we're all learning is the holiday Juneteenth, so welcome. It's nice to see you all. I'm here today with Ed Brubaker, Living Branches President/CEO for week 12 of our weekly videos. An encouraging round up in our testing this week: we have 10 residents total who are still in some form of positive testing at Living Branches, I guess, is the best way to say it. They all reside in Dock Terrace. We have five people there who are still symptomatic to some extent, but another five who have had their first negative test. And of course we need two negative tests to be counted as recovered, so we're very close, perhaps, to being through this for now - I feel like I should knock on wood – in Dock Terrace. We did testing this week in Oakwood Court and got all of those results back for residents. Oakwood Court residents and staff are negative. And of course we've tested previously at Souderton in Health Care and Park View – all of those have been negative. And we do not have anyone in Residential Living or at The Willows testing positive. So that is all very, very encouraging. From a staff perspective, our last staff person who was out with COVID has returned to work today, or is about to return to work today, so we will be through that as well. So very encouraging.

Edward Brubaker: Yes it is very encouraging news and not too many weeks ago we wondered when that day might come. We need to be vigilant and we'll talk about that later in the video, but it is very good to be at this place and really appreciate the long-suffering, frankly, of our residents but also the vigilance and diligence of our staff to help us get to this point. It's really been hard. It's been very hard. And people were committed and working to make it happen. But you know, you move forward and you kind of forget what you were feeling. And it was intense, particularly on the Dock Woods campus for a number of weeks. And not to say that we're out of it – we still need to make sure we don't go back into it, but it is certainly wonderful to be at this place.

AM: And we're getting ready now to go ahead and test all staff in baseline testing, which is something of course that the State has been wanting to see in Health Care. But we're doing more than that.

EB: Right. Exactly. Next week as Wednesday, Thursday, and Friday at Dock Woods and the following week at Souderton. And so we're doing a baseline. We ended up deciding to do almost the majority of staff – I'm not sure if there are a few that were not on that testing list. But essentially all staff will be tested. Including you and me, so we can tell the stories of our testing. Although currently the swabbing is not as invasive, shall we say, as it was before. There are new techniques out there. But we want to get that baseline. We're required to do that, but we

also want to have that baseline in addition to the other testing we've been doing on a somewhat regular basis already.

AM: You mentioned Souderton Mennonite Homes and Dock Woods in that testing. It's interesting that we're also testing at The Willows, but we've had to arrange for that. The state is not assisting us with that.

EB: Right. Exactly. And we're not exactly sure how they put all that together, but we were able to get the state helping us out with the test kits and using the state lab for Souderton Mennonite Homes and Dock Woods. For The Willows we're going to use our typical testing lab.

AM: So that will all take place before the end of the month and then we will have results back, hopefully within the week. We'll see how that goes. The big news that we learned yesterday from the Montgomery County officials, is that if all goes well, we will be moving to green next Friday. The 26th I believe that is. And so we've talked about this before but it bears repeating that green has some different meanings for us.

EB: That's right. When you think about green it opens up to how businesses operate, the number of people that are allowed to be in a certain place, and I've said this before, but I'll say it again: just because we're allowed to have up to – and I would say in the community, not within Living Branches – but in the wider community, up to 250 people, I believe it is, in the green phase that can be together. That doesn't mean it's safe. That doesn't mean we're in the clear. It just means it's another increment we can look at. But frankly, if there's a person in that group of 250 that is not wearing a mask and is a symptomatic or asymptomatic spreader, one person in 250 is too many. And so we just need to keep that in mind, that it's easy again to think, "Oh green means safe. Green means it's no longer a problem." And that could not be further from the truth. It just means where our cases are in the county, where we are in the state, that the persons in positions of authority in the state have said we believe we're in a different place and can open things up a bit. Because clearly we can't be in this lockdown position forever, or even for a very long period of time. But it still means we need to be cautious. We do not want this thing to come roaring back.

AM: No, not at all. We released last week guidance on what we will be doing as we move through yellow and green. And then we'll be releasing more guidance as we get closer to green, so we can talk about what specifically that will look like for us. And I know lots of people are eagerly awaiting that.

EB: That's right. And it's been a long time. It's been a challenging time. And certainly we want to ease into that, but still recognize that we need to maintain our cautions and be appropriate in our behavior.

AM: And that, I guess, is really going to be the balancing act for us going forward, because we've heard from residents, resident's family members, from what we've seen ourselves – of course everyone wants to get things back to normal as quickly as we possibly can, but it's going to be a very long time before I'm visiting with my favorite Health Care resident in her room in Health Care. That's just not going to be happening in the intermediate future.

EB: That's right.

AM: And we've heard some things this week – this is our twelfth video – we've been in pandemic mode for a long time and that's starting to have an impact on what we're seeing for residents. We had some things this week that were going on, as far as – and you've heard some things, just the emotional impact of this on people.

EB: Yeah that's right. I had a phone call from a family member at one of our campuses just yesterday. And the situation was their parents were both living here on campus in different levels of care, but they were reflecting on how hard it was for them emotionally, mentally, psychologically – all those impacts. We've tended to focus on: we need to keep people safe from the physical reality, physical challenge of COVID – and that's true. But what I don't think we anticipated or thought about quite as readily was: what is this going to do to the psyche of people as you go forward. And so we need to be smart, but we also need to make sure that we're not just saying, "we're keeping people safe physically," but we don't think about the emotional element of it. And it's important to look at both. To do it safely. And I think there's ways we can continue to gradually move into this. But it really is important to keep both those things in mind, because this has been a challenging, challenging time. And you need to have that human contact, too. Whether it's in a chat box, like we're doing, or there's other options for outside visitation as well.

AM: And we introduce the chat boxes fairly successfully on all three campuses this week. And I don't know what you heard, but I heard a couple of really good stories about families being so pleased to be able to go and actually see, face-to-face, their loved ones.

EB: Yeah. It's been a very hard time. And we're just glad to be at this place. Finding ways to still do it safely and appropriately, but very happy to be able to do that.

AM: I don't know how much you were thinking about this, this week, but one of the things I noticed happening this week, is that these face masks are becoming a bit more controversial, at least in the wider world. Have you been noticing that?

EB: I have noticed that. And it's interesting, too, I just picked up some lunch at Wawa today. Of course I had my mask on and went into the store. I would say nearly 100%, but as I was going in, there was a person in front of me without a mask on. And I thought, maybe they're pulling it out of their purse. In fact, they did not. They went through the store. They made their purchase and they left, and they never had it on. I don't know if they felt me glaring at them, or not. I think other people were kind of taking notice. Now the store manager didn't come over and forcibly throw them out, or anything like there. There was no altercation. But it's just interesting how things change. You know, if someone had come in with a mask five months ago, we would have thought, "what's the deal?" Now it's the other way around. However I would also say I noticed that it's almost becoming politicized. And that's what's, frankly, troubling to me. That it's about our health and our safety. This is not a political discussion. But it's become politicized. And I don't want to get deeply into that, because that's not what this is all about, except to say: Folks, let's step back, recognize that studies are showing now, as we've learned more, and these have changed, frankly, from the beginning, but as we're learning more: the transmission is through things coming out of your mouth, through droplets and other things like that that might come out when you're speaking. My mask protects you. Your mask protects me. We're socially distanced here in this room, there's a few people in here, so we're appropriately not wearing masks. But when we're in public, or in the office here, when we're interacting with each other – we're wearing masks. It's about protecting and recognizing that even surfaces they don't feel anyway are the primary way, or even a major way. That it's really what comes out of your mouth that is a problem.

AM: And nose!

EB: And nose, that's right. And so, I guess I would also ask our viewers to consider that. Let's make it about health, not about politics. This is about good health, good appropriate precautions. Now I would say recently I was at an event that was outside and there were not masks. It was a very small group of people, but it was outside and it was an eating event so we were appropriately physically distanced. And so you felt safe and appropriate in that setting, because you can't really eat with a mask on anyway. But we were appropriately distanced and it was outside, which is a big deal – a big difference – inside and outside. But I would just encourage all of us to not waste these last three months. This has been a challenging time and I think one of the worst things that can happen is that we get too crazy and this thing comes roaring back, like it is in some states. It may not be roaring back – it may be first phase in those states – but the point is, it's not that hard to wear a mask. Let's just do it to protect the agony, frankly, that we went through these last few months. And so I would just reflect on that, that it's important. You know, you're out in public, you're in the grocery store, you're in a store, you're in Wawa, you're in a restaurant, except obviously while you're eating, but let's be aware of that. And I would say let's also frequent businesses that do the safe thing, too, because we're in this together. Let's frequent those businesses that also seem to have the health of the wider community in their minds as well.

AM: If you've been at all on Facebook in the last two weeks, you will have seen information about how wearing a mask is perhaps hazardous to your own health, which I think is almost a

perversion of the scientific information that we've learned about face masks. So you and I have been steeped in coronavirus for the last twelve weeks. There is no hazard to a person who does not have a preexisting lung condition for wearing a face mask.

EB: Yeah that's right. And some people aren't able to wear N95s because it does filter out the air and you don't get enough air. And so you may need to use a surgical mask or something like that. But it would be very, very few and I'm not a physician, so I'm not sure who would be in that category, but very few who can't psychically wear a mask. I just think, let's do it folks, let's just do it. Let's not make a big deal about. Let's just do it. And not make it into something that it's not. And at the end of the day, too, Alex, if it's proven that it doesn't help, it still wasn't a waste. You know, it's like, it doesn't hurt us, it doesn't bother us, let's just do it and try to make this world a safer place. And maybe be more kind to one another in that way, too.

AM: It really does seem like a kindness. Because as you said, my mask protects you and so I think if we're going to have society regain function in any normal, meaningful way, we have to look out for each other.

EB: Yeah, that's right. And I think that's a word we can gain from today, too. That we need to look out for each other. And in the wider society, I'd just like to see more of that – looking out for each other instead of, you know, grabbing at each other's throats. Let's work together. Let's be together. Let's find unity, rather than what separates us.

AM: I think that is a great idea. Well this is a short week for us. I feel like we should maybe talk for another 10 minutes to make everyone happy.

EB: Well I don't know if it makes them happy or not.

AM: We should probably let everyone know that we will not have a video next week. Our videographer Mike will be on vacation, so that's wonderful. And things are slowing down a bit, as far as the information we have to relay, so I think it's safe for us to take a week off.

EB: Yeah I think so too, and maybe before we close today, I just want to say thank you to our viewers. We've heard feedback from you and really appreciate your feedback, your questions. And would really ask for that to continue to come in. We're not sure where this videotaping each week is going to go in the long-term, because we're not going to do this for the next 10 years, but we do need to take a look at it and what's going to be most beneficial to you our viewing audience. So thank you for tuning in. I also want to say thank you also to our residents. This has been a challenge. You have been incredibly long-suffering through this process. It's been hard. It's been a challenge and I really do appreciate the way you've made the most of it and been

resilient. To our staff, as well. All staff, and I know on the campus where we had COVID – it has been incredibly hard. And I just want to acknowledge that and acknowledge the wonderful work that you've done during that time. It really warms my heart to know the good work and the excellent care that you have provided to our residents during this very challenging time. So let's keep working at this stuff together – wear our masks, wash our hands, keep our fingers out of our mouth, nose, and eyes, and just do those things that we know work, so that together we can get to the other side of this, however long that takes. But thank you for that.