

Transcript
Coronavirus Q & A – Episode 44
June 11, 2021



Alex Metricarti: Hello! I'm Alex Metricarti, Chief Marketing and Public Relations Officer for Living Branches. Today is Friday, June 11, 2021. Welcome to you and welcome to Ed Brubaker, our President/CEO. Nice to see you – it's been a while!

Edward Brubaker: Good to see you again. Yes, it has been a while. I don't know what number video we're up to now, but it feels like eventually we'll be winding these down, too. But yes, it's good to be back.

AM: Let's start with our Covid counts on our campuses, which is easy because the number is zero. At the present time we do not have staff or residents testing positive for Covid, which is great news because almost 10 days ago we had a person test positive who was a resident in Dock Terrace. So maybe we should talk about that for a second, because I did get a fair number of emails from family members saying, "How is this possible? What's going on?"

EB: That's right. And lest we think there's no staff out – there are no staff positive, but we do have some – I think it's two, maybe? – that are out right now because of exposure. And I can't remember if the staff persons are vaccinated or not, but the point is, it's still around. Related to Dock Terrace – that was an interesting situation because they had been tested and were negative in the hospital. They came from the hospital and then our protocol is to do a day four and a day 11 test after they come out of the hospital. On day four they tested positive. So that meant the wing they were on was now an exposed wing. Then they were put in isolation – the plastic barrier was put at their door. And unlike in the past, only that room was a red zone and not the entire hallway. So a lot of things have changed in that regard. Then on day 11 they tested negative. It was an odd situation. We believe it was a true positive test, but there were other complications with the reality of their health and the efficacy of the vaccine is not the same for everybody depending on their underlying health conditions. The other things to say, too, is that the vaccine does not mean you will never get Covid. That is a mistake to say that. It is still a success when it tapers down symptoms. That's a key thing to keep in mind. I had a physician tell me the other day that he hates the term "break-through case" because it makes it sound like, "It broke through the vaccine. The vaccine is supposed to say no to Covid!" That's not really quite true. It doesn't 100% prevent it – it's only 95% efficacy, but also, it's about reducing the risk of exposure and transmission and also your own symptoms. We don't want to come across or have people think that was not a success for the vaccine. The other thing is we thought the person was negative when they came to us and it wasn't until day four that they tested positive. So did they get it in the hospital? We don't know where they contracted it or how it happened. What we also don't know is, were they transmitting the virus? We'll talk in a bit in why we think it was minimal to no transmission, so there's a lot of factors there. I totally understand why people would say, "I thought we were done with this." Well number one, we are not. In fact Grand View –

a physician there was telling me they have six Covid-positive patients and there were only 16 in Bucks County, so they had a significant number of them. But the reality is, it's not gone. It is shifting to a younger population of 40s, 50s, 60s and people are still dying. There are some local deaths I was told about recently. So it's still out there but it's so different and the way we manage this disease going forward will continue to change and shift and morph. But for us to think there's not going to be any more cases or shut downs, that's not true. Because we're going to close down again for the flu like we did in the past. Crazy enough, we didn't have any of that – none – zero flu this past winter. That is so unusual! But we used to close down for flu or norovirus or whatever. So we need to find perspective and balance.

AM: And I think it is important to point that we're not going to achieve eradication of Covid but we certainly can manage it. We're feeling more confident in our ability to do that now. I know you had a conversation with the director of Health Care services at Dock Woods about what having the majority of staff and residents vaccinated has done in this particular case.

EB: Yes it makes a huge difference. And your comment too about eradication – the way that polio is eradicated – it may not happen with Covid. Time will tell. But yes, in the particular case with this is, she was reflecting that this was the first resident case where we had to do protocol testing since December. December, if you recall, was pre-vaccine. So this was the first time post-vaccine – so we have to do a baseline test of all staff and all residents and then two more tests – I think it's day seven and day 14. So that's a total of three. It was the first time since the beginning of Covid in this particular case at Dock Terrace that at the first round of testing, no one else tested positive. And then that was true of day seven. And then I don't know –

AM: We haven't done day 14 – that's Monday.

EB: And we anticipate that to be the same. That to me is a big deal. It shows the vaccine works. And I want to emphasize that, too, because there are still people out there for whatever reason who are not taking the vaccine. And in some ways may be depending on us who did take the vaccine or other reasons – whatever they may be. But I still encourage, cajole, highly recommend getting the vaccine. It is so helpful. Maybe we can eradicate it if everyone gets the vaccine. We're not there yet. Our numbers are good between staff and residents. But that illustration of Dock Terrace I believe, is an illustration of how the vaccine works.

AM: We're going to be talking a lot more about vaccines in the coming weeks and months because some of the regulations related to vaccination have changed, especially for skilled nursing.

EB: That's right! And basically what has changed is as part of our survey process in Health Care, we need to show that we have educated residents and staff about the vaccine – the

safety of the vaccine, the need for the vaccine, etc. And it needs to be documented for skilled nursing, or as we call it, Health Care. So there's going to be a lot of that coming. So for those people who thought it was in the past, well sorry, it's going to continue. We're back! It's going to continue but it's an important thing to continue to educate and show people we're so fortunate to have the ability to get the vaccine. We have some local physicians who were kind enough to make themselves available to us to educate. They both happen to be female which is wonderful, because one of the things that people talk about is infertility and the vaccine, which is not factually based. So we need to help people understand and talk to them in calm, appropriate settings in order to talk about this. The latest I was hearing was about magnetizing. I saw a video and the illustration the woman was doing ended up kind of being a fail. There's just so many stories out there of things that are unfortunately just not true. You know, as my mother used to say, "just because you saw it on the internet doesn't mean it's true." Ha, she never said that. I'm not sure that she knew what the internet was, but you know what I'm saying. We need to get our information from trusted sources.

AM: We are going to continue our commitment to transparency. We, of course, have been reporting our Covid-positive cases on our website, and now we're going to start doing that with vaccine percentages.

ED: Yeah, so we want to report vaccine percentages for residents, staff, etc. Yeah – it kind of puts us maybe in a bit of a vulnerable spot – because we're going to tell it how it is, but I think that's what we've been doing. We're committed to this, and some people may like it, or may not like it because of what their own perspective of is as to what's good enough or not good enough. But, we just feel that it's the right thing to do and we want to let people know. We have to report it to CMS for healthcare, so they're going to be publishing the data. If it happened as well as it did with the state, the accuracy levels were not always stellar, to be honest. Our accuracy – I would say – was pretty close to 100 percent with what we post, and we're going to post more than just what is required by CMS. It's part of who we've tried to be pre-pandemic, during the pandemic, and post-pandemic, so we've chosen to do that.

AM: We have a little bit of good news, I guess, too! We're continuing to relax some of our restrictions on campuses. One of the things that we're going to be able to do, starting the end of this month – June 28, I think, in particular – is that families and residents are going to be able to have family gatherings on our campuses again. Which I think will be great!

ED: Yeah, that's right. I think it's June 28, you said. I think it's just another part of the opening and re-opening – I would say – thoughtful reopening, but also understanding what the regulations are and how that happens. It just really feels good to be at this place and we're just glad to be here. It is not over, but I really feel we're in a good place and it feels good to be able to do these things. It's so important to have those connections with family and other human beings.

AM: I promised a couple of staff persons that I would make sure that we mentioned that family gatherings are not including memorial services at this time. Maybe we better talk a little bit about why that is.

ED: Yeah, and memorial services are just totally different events. Kind of trying to restrict the numbers, where the people are coming from, and how close they're sitting together –

AM: - Are they vaccinated? –

ED: Yeah, are they vaccinated...there's just so many variables with the introduction of all those people, as opposed to a smaller, more confined family gathering. So, those are very different. At some point – absolutely, we want to be opening for that again. We're just not ready to do that yet. At the end of the day, it's for the protection of those we serve and for our staff as well.

AM: We've certainly had some memorial services in the past where every seat was full and it was jam-packed.

ED: That's right, and I remember one huge memorial service just pre-Covid. I remember someone shaking my hand, and then I saw them later on seemingly blowing their nose like they had a cold. I think I immediately went to my office and popped a few Airborne, ha. But, you know, you think about that stuff and we weren't doing that for the last year. So my immuno-defenses are probably lower because we weren't doing that stuff, but it helped. Masks didn't just protect us from Covid, but it helped us with the flu and many other things, too. It'll be interesting to say, "how should we evaluate that for the future?"

AM: Yeah, but we do want to get back there.

ED: Oh, absolutely.

AM: Any closing thoughts for us?

ED: Yeah, I guess a reflection on the vaccine – and I harp on this a lot and I don't really apologize for it to be honest, because I think it's that important. I'm reading a book by Sebastian Younger and it's called "Freedom." The idea is "what do we think freedom is?" and "who's actually free and who's not free?" Well, we all have different opinions about that, right? So, we hear a lot of that in our society. "Nobody's going to tell me what to do," and those kind of things.

It's just fascinating because I think we've lost, maybe in some ways, a sense of the interdependency that we really have. I mean nobody – nobody – is truly independent. The last time I checked, I didn't refine my own gasoline; I go to Bergey's to get that, right? I don't build my own car, I don't grill my own food – although Lucy has got some wonderful lettuce this year in our garden – but you go to the grocery store; we're interdependent. We depend on the federal government, PennDOT, and other federal systems to create interstate highway systems. We are in this together, and we can't just thumb our nose at things we don't like under the guise of freedom. So this book has been just very fascinating to read of what we, kind of, have now distilled freedom to be in this country, which is so distorted in many ways. His one reflection was that, to restrict persons using water – let's say in California because of a drought condition – is no more a totalitarian regime than, you know, modifying how we give out water on a life boat. If you have a gallon of water, you're not going to allow one person to drink it all at once. That's not totalitarianism; that's community. The vaccine is community as well. To say that, "we don't want the vaccine because we don't do that stuff that's not tested or put things in our body that isn't a foreign thing." I mean, diet soda is a foreign thing – some people use to clean rust off of pipes. You know, it's like let's really distill this down and say, "are we in this together...are we in this together?" I'd like to think that we still are. Frankly, as I look at our staff and our residents over the past year, we are in this together. I was on another video this morning with Missio Seminary and reflected that, sometimes if you read Facebook and Twitter, you can get depressed.

AM: Very quickly! Yep.

ED: It's like, you've got to be kidding me. Is that a nice way, or an appropriate way, to speak to another human being? Would you do that if you were in person? I hope not, frankly, but maybe you would – I don't know, but I'd hope not. But if you want to be inspired by humans, come to a retirement community, or go to a nursing center, and see how staff have gone above and beyond to care for the residents. So the antidote to Twitter and Facebook is to come to Living Branches, observe what happens. You will be inspired by human beings and what they can do. For me, that's what I want to keep dwelling on. I just need to stay off those other social media things that just depress me.

AM: That's probably good advice! Thank you! Thank you to our viewers and if you have questions, please feel free to send them to me at coronavirusquestions@livingbranches.org. I'm happy to ask them to Ed in a future edition our video, or visit our website at livingbranches.org/coronavirus for more information.