

June 30, 2020

Dear all Residents of RiverWoods Exeter, RiverWoods Durham, and Birch Hill,

For the past several months we have altered our operations to address the challenges of COVID-19. As new cases and active cases have declined we have begun to reevaluate our operations and guidelines. For some that is not fast enough, and for others it is too fast. We will not really know if it is “too fast” or “too slow” until this pandemic is solidly in our rear-view mirror, but one thing I do know for sure is that there really isn’t a “one right answer” for this. Scientists are adjusting as new information is gathered, governments are adjusting as new information is gathered, and so are we.

Of course, we worry about a spike in cases (like some states are seeing), we worry about the additional risk of more people leaving campus, and we worry about next Fall as people spend more time indoors and flu season arrives. We also worry about the health impacts that are caused by the isolation that folks are experiencing. The inability to see your family, do your favorite activities, go to restorative (and safe) places has impacted the health of many of you. Like I said above, there is not one good right answer for any of this. No matter the guidelines of the community, you have the ability to keep your personal circle tight to reduce your risk. Our goal, as we adjust and evolve in this timeframe, is to balance the needs and desires of many different viewpoints.

We are trying to find that right balance, between what would be too risky and what would be too restrictive. To do that we are using seven-day averages of new and active case counts to see if community spread (i.e. your likelihood of contracting the virus from being out in the external community) is declining. That continues to seem to be the case. Occasionally the new case count may be impacted by an outbreak at another facility, whereas we focus more on actual community cases – but we take all measures into consideration. With the continuing decline in cases we will implement several changes as of July 8th. They are described on the attached chart. I will just expand on a few areas:

Beginning Wednesday, July 8th, the following operational procedures will be updated:

- **Leaving Campus**

The “trackers” will go away and residents will be free to leave campus and return without quarantine. There are several things we would **STRONGLY** discourage you from doing for now – like being in restaurants or movie theaters, being around people who wouldn’t pass our regular screening (like folks who, in the past 14 days, have traveled to certain hotspots, who have been on a plane or public transportation recently, and/or have been exposed to someone who is positive for COVID-19) and being around large groups of people who you do not know.

The opportunity to leave campus freely comes with a responsibility to keep yourself and your community safe – please consider that when you choose where you go and who you are around. **This also means you need to have your mask and hand sanitizer** with you for times when you would be encountering anyone else from the public (grocery shopping, picking up take-out food orders, etc.).

If you leave campus prior to July 8th you will fall under the previous quarantining guidelines. We have chosen July 8th as the starting point because it allows us to track a seven-day lookback through June 30th. With the “period of uncertainty” around symptoms, due to a delay in onset, we believe this to be a reasonable time period.

- **Self-Quarantine**

This will still be important and necessary under certain specific circumstances. We have attached a “screening questionnaire” for you to use. If at any time you are not able to pass the questionnaire you should self-quarantine and call the wellness clinic.

- **Gathering on campus (with other residents)**

More people leaving campus increases our risk, even with the community spread declining. That means we have to be even more diligent about wearing a mask and appropriate spacing. Please read the attached article that speaks to the benefits of wearing a mask. Always a good reminder, and this one is clear and direct, with a reasonable amount of science!

Additionally, if you are gathering with friends to chat or have a drink – please BYOE (Bring your own Everything). If you want to provide snacks for your friends, use individual containers – the passing and sharing of snacks is just not a good idea for now. Germs, mouths, sharing... all things to be avoided as much as possible.

- **Family and Friend Visits**

We will allow for more informal family visits on campus, with the following stipulations:

1. Your family members or friends have to pass our screening (temperature, travel, symptoms, exposure).
2. Your family members or friends will not be allowed in the building for any reason, even for bathroom usage.
3. You are responsible for sanitizing the outside chairs or tables where you visit with your family (we will provide the cleaning supplies).
4. Please bring alcohol-based hand rub and use it frequently during your visit.
5. You and your family members will need to wear a mask during these visits.

- **Contact Tracing**

We will ask you to keep track of where you go offsite and who you spend time with (other residents) during this stage. The countries that have “opened well” have been good at contact tracing – knowing who you have been around (and writing it down) will help us if we do have someone test positive in the future. We will provide you with a notebook to keep track of this.

- **Travel in General**

We are adjusting these guidelines based on the case counts in New Hampshire. Any time you travel outside of New Hampshire, Vermont or Maine (all with low case counts) you are exposing yourself and the community to more risk. While this is your decision to make, please remember that you make that type of decision for yourself AND your neighbors.

We will continue to track the data supplied by the Department of Public Health and will continue to adjust (with more or fewer restrictions) as the data indicates. That is *our* responsibility. **Your** responsibility is to yourself and your neighbors. Whether inside or outside the community, please use your best conservative judgement about where to be and when. Limit your exposure to people you don't know, wear your mask, keep alcohol-based hand rub with you at all times, maintain six foot social distance as often as you can, and begin to log places you've gone and people who you spend time with.

A Word on Masking and Distancing:

In a best-case scenario, we would maintain six feet distance from one another at all times **and** always be wearing a mask. That will be the most effective way to not spread any germs. However, there are some situations that simply do not allow for wearing a mask, like having a drink with a friend or exercising outdoors. In those situations, maintaining a six-foot distance is absolutely critical. There are other situations where it is difficult to maintain a six-foot distance, like playing cards or ordering food in dining. In that case, wearing a mask is absolutely critical. The best situation would be masking **and** distancing, but in times when we cannot do both, you must be able to do the other.

The past few months have been trying for all of us, and the reality is that we are not at the end. Things are not *back to normal*, and they won't be until we have a vaccine that is widely distributed; but they **are** better. Let's be clear, normal will look different going forward, and based on what we have learned these past few months, some things will never return. There is a chance, always a chance, that until there is a widely distributed vaccine, we will have residents and staff test

positive for COVID-19. If we do, we have a solid plan in place for quarantine procedures, communication, and testing. As we've all experienced, every four weeks things adjust, and we adjust with them. Thank you for your patience and commitment to keeping our communities strong. Stay healthy my friends!



Justine Vogel
TRWG CEO

Item	Description	Timing
<p>Leaving Campus</p>	<p>Residents can freely exit and enter the community BEGINNING JULY 8th without quarantine provided:</p> <ul style="list-style-type: none"> • Residents check daily for symptoms and report any symptoms promptly to the wellness clinic (if you don't have a thermometer they are available on Amazon). • Residents agree to avoid/not go to: <ul style="list-style-type: none"> ○ Restaurants ○ Bars ○ Movie Theaters ○ Churches ○ Other places where it is difficult to wear a mask if not able to socially distance. 	<p>July 8</p>
<p>Family & Friend Visits (on campus / outside)</p>	<p>Residents may invite family or friends to visit onsite / outside. Please note the following four things:</p> <ol style="list-style-type: none"> 1) Your family member or friend will need to pass our screening (travel, symptoms, exposure questions, and have his/her temperature taken). 2) It will be your responsibility to sanitize any high touch areas where you and your family or friends may have gathered. 3) For now, your family or friends are still not allowed to come into the building for any reason 4) You and your family must wear a mask during these visits. <p>More information to follow from your Executive Director related to the specific process for your community.</p>	<p>July 8</p>

Item	Description	Timing
In person resident committee meetings	Allowed, so long as you are able to maintain 6-foot social distance, all members wear a mask and the meeting membership does not exceed room capacity.	July 8
Cards/Games (with other residents)	<p>Allowed – provided that residents:</p> <ul style="list-style-type: none"> • Wash hands before, after and during playing (alcohol-based hand rub will be provided in common rooms). • Wear a mask. • Log people who are participating (for contact tracing if necessary). <p>Please do not share snacks.</p>	July 8
Activity Spaces	Open – capacity to be determined based on room size and proper distancing – each community to determine a “per room” number.	July 8
In person Wellness Clinic Visits	<p>Available – provided all wear masks and Nurse Practitioner or Wellness Nurse uses proper PPE. Visits will be by appointment only.</p> <p>REMINDER, IF YOU HAVE COVID SYMPTOMS PLEASE CALL THE WELLNESS CLINIC, DO NOT GO IN PERSON.</p> <p>Please see the follow up memo from your Executive Director related to Wellness Clinic procedures.</p>	July 8
Outside contractors in apartments (as hired by resident) ex. Comcast	Allowed provided that contractor screens in and is escorted to room where he/she will be working. Prior approval from the Director of Facilities or Executive Director is required.	July 8
Regular transportation for grocery and other	To begin based on each community’s ability to properly staff and serve. Limited seating for distancing.	7/22

Item	Description	Timing
External speakers or performers presenting OUTSIDE of the building	Allowed, provided that performer/speaker screens in. Capacity for in person events on the grounds of our communities will be based on spacing and location.	July 22
In-person Marketing Tours	<p>Prospective residents to screen in and receive a hosted tour. These tours will not include residents as a part of the tour, the prospective resident will not be allowed to bring family members, and the tours will not include dining.</p> <p>Family members of prospective residents will have access to virtual tours.</p>	July 22
Regular Housekeeping	To begin regular housekeeping in August, emergency or need based housekeeping will be available now. Residents may not be in the home while housekeeping is under way.	August
Regular Work Orders	To begin regular work orders in August, emergency or need based housekeeping will be available now. Residents may not be in the home while work order is under way.	August
Outdoor Dining	This will continue to be based on availability and will be “take out” for now. We will not serve meals at this time. If you choose to eat together please “BYOE” (bring your own everything) so we are not increasing risk by sharing food or utensils.	TBD by each community
Medical clinics in our Wellness clinics	Medical clinics (podiatry, hearing aid, dermatology, etc.) will begin when outside providers are ready to return and based on an evaluation by the Nurse Practitioner (based on where else the provider serves).	Based on provider availability, see updates from your Exec. Dir.
Bus capacity	All riders must wear a mask. Bus capacity based on bus size and distancing. Campus	Ongoing

Item	Description	Timing
	services will log all travelers for contact tracing.	
Self Quarantine If	Based on screening measures. We will share a screening questionnaire for all residents that will ask about travel, exposure and symptoms (will include airplane travel, cruise ships, visits to hot spots, potential direct exposure when known). PLEASE SEE ATTACHED FORM.	Ongoing
Staff Screening	To continue indefinitely.	Ongoing
Outside (outdoors)? performers / Educational sessions / for in person events to be held inside the community	No timeframe yet.	TBD
Family Visits (on campus / inside)	No timeframe yet.	TBD
Indoor / Served Dining	No timeframe yet.	TBD
In-person Marketing events	No timeframe yet.	TBD
Contact Tracing assistance	Logging for: Fitness E-calls Enhanced Home Salon IT Work Work Orders Food Delivery to Quarantined residents Activities Cleaning Transportation	

Resident Self Quarantine Screening Listing

Please self- quarantine and call the Wellness Clinic for further instruction if any of the following are true:

1. International travel within the past 14 days.

2. Travel by public transportation (bus, train, plane, cruise ship, ride share) within the past 14 days.

3. Being in close contact with anyone, outside of work, who is either confirmed or presumed positive for COVID-19 or has been asked to quarantine due to COVID-19 in the last 14 days.

4. Any of the following symptoms (Not related to a known or diagnosed medical condition such as allergies, asthma or chronic lung disease such as COPD/emphysema):

- Fever
- new or change in cough
- runny nose
- nasal congestion
- shortness of breath
- chills
- muscle pain
- severe fatigue
- new loss of taste or smell
- nausea, vomiting, diarrhea
- sore throat

5. Temperature greater than 100°.

6. Are a new move in to the community.

Opinion | Dr. Malcolm Butler: Why you should wear a mask (It's the air you share)

Dr. Malcolm Butler

Jun 25, 2020

I was speaking with my neighbor the other day, whose age makes him both wise and at high risk should he contract COVID-19. I was wearing a mask — he was not. “Yeah, I don’t do that,” he said. I thought, “He must not understand how the COVID-19 virus is transmitted, because if he did, I think he would wear a mask.”

He went on to say, “The science around this changes all of the time, so who are you supposed to trust?” As a scientist, I am OK with some uncertainty as we learn more about diseases. For instance, it was believed that ulcers were caused by stress — now we know that they are largely an infectious disease. It’s the nature of scientific discovery that our “mental model” of how the world works evolves over time. The nature of how we understand COVID-19 is continuously evolving, which is normal and correct — and clearly frustrating.

When the pandemic began, scientists believed it was similar to influenza. We know a great deal about influenza. The last great pandemic involved influenza. It was a natural place to start. Influenza is spread by droplets, and COVID-19 is spread by droplets, so we deployed influenza-type strategies of hand washing and hygiene, wiping down surfaces, social distancing, etc. When that wasn’t enough, we used more draconian measures that included stay home orders and closing all but essential businesses.

Now we understand how COVID-19 is not like influenza; let me explain.

COVID-19 seems to fit the “eighty-twenty rule” of biology. 80% of the disease is caused by 20% of the transmission. Here’s how that 20% works with this virus.

Imagine a keyhole, and only a specific shape can fit through that hole. The COVID-19 virus has a specific shape and must land on a specific keyhole to pass through the lining of your nose, mouth, or lungs and into your bloodstream. These keyholes are spread out randomly. So, it takes multiple hits for a virus to infect you. If you are peppered with enough virus, eventually one will land on the keyhole, pass through and cause an infection. The total volume of virus that peppers your system is the key. How much time you are in contact with an infected person and the time sharing their air determines if you will contract COVID-19.

Both COVID-19 and influenza are transmitted via droplets. But unlike influenza, the droplets that remain suspended in the air are what matter most. Influenza is all about big droplets that land on surfaces, which we touch, and then carry up to our mouths, or eyes. COVID-19 is about small droplets that remain floating in the air that we share.

Imagine your tonsils as the breeding ground of the COVID-19 virus. Anything that pushes air past the tonsils will collect and expel virus. Singing, yelling, breathing hard, coughing, all will generate large droplets filled with virus. Talking or just breathing release small virus-containing droplets. The big droplets contain lots of virus but fall to surfaces within 6 feet — and yes, you could contract the virus from those surfaces, but it is difficult. Very small droplets float around for a long time, but don't contain many viruses, and aren't that infectious.

So, what about medium sized droplets? Medium sized droplets carry medium volumes of virus. And here is the key: medium sized droplets float around long enough to start to evaporate off their water. As the water evaporates, they turn into small droplets that can float around all day. But instead of carrying just a small volume of virus, these dried-out medium-sized droplets contain a medium volume of virus. They become concentrated "super-infectors."

Outside, humans don't share much air. Floating droplets dissipate, and we are all pretty safe. Inside, with minimal air movement, we share a lot of air, and receive multiple hits from virus-laden droplets. Thus, carpooling with extended family for celebrations like birthday parties, or even gathering in someone's living room for a memorial service, with singing and sobbing, are more dangerous.

This is why wearing a mask is so important. I must confess that at first the whole universal masking thing made no sense to me. As a physician I have been trained to use a mask in a very specific way to avoid transmitting something like tuberculosis from one patient room to another when working in a hospital. Universal masking violates my medical training. So how could it work?

In China and Italy and New York City — all of the hotspots — the curves finally started to bend only after universal masking was imposed. Why?

Masks, even cloth masks, retain the biggest droplets and those nasty medium sized droplets. Only the small droplets that aren't very infectious can get through. When an infected person wears a mask, and remember that you are most infectious before you even start to feel sick, the total volume of virus floating around in the air that we share is dramatically reduced. Because 80% of infections come from droplets floating around in the air, the simple act of wearing a mask is enough to stop the pandemic spread. How I wish we had known that in March.

It turns out that in COVID-19, masking is the next best thing to a vaccine. And probably nobody reading this will receive a vaccine before June of 2021.

Many say, "You cannot make me wear a mask." That is true, but why wouldn't you want to? You wear a mask to protect those around you, to beat the pandemic, to keep the economy open. Just like not smoking in restaurants or speed limits — they exist as public health interventions that make sense. I hope with a better understanding of how COVID-19 is transmitted, wearing a mask will make sense too.

Reminders:

Don't stop washing your hands and don't start touching your face. You can still contract COVID-19 from droplets on surfaces.

80% of COVID-19 appears to be transmitted through the air — the air you share.

Masking during COVID-19 is the next best thing to a vaccine.

Dr. Malcolm Butler is the chief medical officer at Columbia Valley Community Health and the health officer at the Chelan Douglas Health District.