



# Welcome Off To A Good Start Saturday, Feb 6th 2021



**Off to a Good Start**  
PHYSICAL ACTIVITY AND NUTRITION KICK-OFF EVENT



**Register Today!**

**SATURDAY  
FEBRUARY 6, 2021  
9:00 a.m. - 1:00 p.m.**

Coordinator: Anita Black Cowan

**Keynote speakers**

- Dr. Curtis Chan, MD,  
Deputy Health Officer  
San Mateo County Health
- Shireen Malekafzali  
Health Equity Officer  
San Mateo County Health
- Cooking Demo with  
V. Sheree Williams  
Publisher, Cuisine Noir
- Raffle for \$50 gift card!



**SIGN UP ONLINE OR BY PHONE**

Register online: <http://bit.ly/3c2zgvA>  
Call: (650) 652-3884

**Get 2021 Off To A Good Start!**

Go to [bachac.org](http://bachac.org) to register or call us at (650) 652-3884.



# Housekeeping

- BACHAC's steps to protect privacy
- Everyone is on mute
- Write questions in the Chat
- Session is being recorded, so if you don't want to be on video, turn off your camera
- This event is for educational purposes only and is not a substitute for seeking out a healthcare professional. Please consult your health care provider before starting any exercise program.

# Today's Intentions

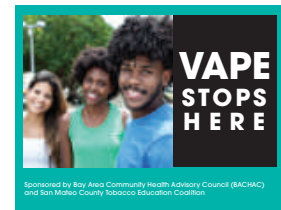
- Provide a free, fitness and nutrition program to our community
- Share relevant information to promote a healthy lifestyle
- Share relevant information about the COVID-19 Pandemic and the Vaccine
- Build an inclusive community connection
- Have Fun!!!!

# BACHAC

- A 25+ year grass roots community health organization
- Address health disparities in diverse communities across generations
- Through awareness, education, access to resources, advocacy
- In partnership/collaboration with a diverse groups
- Supporting a culture of Equity, Innovation and Inclusion

# Programs/Initiatives

- Community Mammogram Program
- Tobacco Free Education
- Off To A Good Start
- Soul Stroll for Health
- Census
- Voter Education & Engagement
- Wellness Where You Are



Sponsored by Bay Area Community Health Advisory Council (BACHAC) and San Mateo County Tobacco Education Coalition

## THE DANGERS OF VAPING

- Vaping slows brain development in teens.
- Vaping damages your lungs.
- Vaping contains nicotine which is an addictive drug.

Sign our petition at [vapestopshere.com](http://vapestopshere.com)



# OTAGS Schedule

- **9:00-9:25** – Welcome and Review of the Day
- **9:30-10:10** – The World of Weights (Anita Black-Cowan)
- **10:15-10:55** – Sit, Stand & Strengthen – Chair based Functional Fitness (Leslie Dubridge)
- **11:00-11:45** – Keynote Speakers
  - Dr. Curtis Chan, MD., Deputy Health Officer, SMC Health
  - Shireen Malekafzali, Health Equity Officer, SMC Health
- **12:00-12:40** – Cooking Demo (Vicki Williams)
- **12:40-1:00** – Wrap Up, Raffle & Closing



**BAY AREA**  
Community Health  
Advisory Council



**Anita Black-Cowan**  
BACHAC Fitness Coordinator and Expert



**BAY AREA**  
Community Health  
Advisory Council



**Leslie K. Dubridge, MA**  
Fitness Expert & Wellness Coach



# ***“Sit, Stand & Strengthen”***

## **Chair-Based functional Fitness**

Saturday,  
February 6, 2021  
*Off To A Good Start*

Active Aging Fitness Instructor &  
Trainer  
Leslie K. DuBridge



A 3D illustration of a person in a green suit sitting on a grey question mark. The person is rendered in a simple, blocky style with a large head and thick limbs. The question mark is also rendered in a similar blocky style. The person is sitting on the top curve of the question mark, which is positioned on a grey rectangular base. The background is white.

## WHAT IS FUNCTIONAL FITNESS?

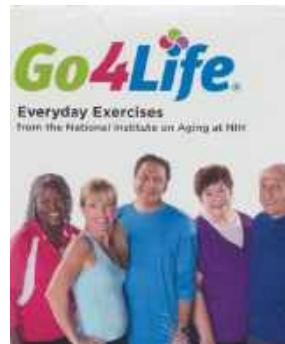
It refers to exercise that helps you with everyday activities, like:

- getting up off the floor
- carrying heavy objects
- putting something up on a shelf

By strengthening the muscles in the same way you would need to use them for certain tasks, it reduces your risk of injury and increases your quality of life.



[Exercise and Physical Activity | National Institute on Aging \(nih.gov\)](#)



**Low-Impact Fitness**



You Are  
Welcome To  
Join Our  
Tuesday  
Class!



**Go4Life "Fitness Where You Are"**  
Zoom Functional Fitness Class  
for Senior/Active Adults



[Interested?](#)

**E-mail Leslie at [lkdubridge@dalycity.org](mailto:lkdubridge@dalycity.org) for [Zoom link](#) to join!**



WHEN:

**Tuesdays**  
**Weekly at**

**9:30—10:30am**

- ♦ **Focus:** Strength, Balance, Flexibility & Endurance movements to keep you active!
- \* ♦ **Senior-friendly**, workouts & evidence-based movement.
- ♦ **Social Time/Fun/ Trivia & Nutrition Tips!**
- ♦ **Brain/Cognitive games**—to help keep you mind sharp.
- ♦ **Maintain a journey of lifestyle wellness!**



Led by Leslie K. DuBridge  
Certified Fitness Trainer, Health and Wellness Coach  
and Chair Chi Instructor

Sponsored by the Department of Library & Recreation Services  
[lkdubridge@dalycity.org](mailto:lkdubridge@dalycity.org), 650-991-8190



## Don't Forget:

- MOVE AT YOUR OWN PACE
- STOP AND HYDRATE AS NEEDED
- SLOW DOWN TO STOP IF DIZZY
- AIM HIGHER, BUT SAFELY!





**BAY AREA**  
Community Health  
Advisory Council



**Dr. Curtis Chan, MD & Shireen Malekafzali, MPH**  
**San Mateo County Health**



# COVID-19 Vaccination

Shireen Malekafzali  
Public Health Equity Officer

**Off to a Good Start**  
February 6, 2021



**SAN MATEO  
COUNTY HEALTH**  
All together better.

# THE COVID-19 VACCINE IS HERE

STAY INFORMED. KEEP WEARING  
YOUR MASK.

- Validated by the nation's top medical experts to be safe and effective
- Provided at no cost
- Phased distribution plan based on risk and level of exposure
- Widely available later in 2021



Vaccinate **ALL 58**

A safe and effective  
COVID-19 vaccine is  
one of the most  
important interventions  
to end the COVID-19  
pandemic.



# Guiding Principles for Vaccine Rollout

In active partnership with the state and federal government, San Mateo County Health is committed to being **safe**, **transparent**, and above all, **equitable** in providing COVID-19 vaccines to everyone who needs and requests vaccination

**Safety, Transparency, Equity**



# Is the vaccine safe?

- Yes, the vaccines are based on decades old science.
- The FDA used the same demanding safety and efficacy standards.
- No safety protocols were skipped.
- Record time for development due to unprecedented collaboration and funding.
- As a person of color, why should I believe a vaccine developed by the medical community and distributed by the government is safe for me given all the inequities we have experienced?
- **Rightful reluctance** given the negative and painful history of healthcare and research in communities of colors, and ongoing current health inequities.

# Is the vaccine safe?

- **National groups** representing people of color are supportive of the vaccine. Examples NAACP, UnidosUS (formerly National Council of La Raza).
- **People of color in clinical trials:**
  - Pfizer clinical trials included 81.9% White, 9.8% African American, 4.4% Asian, and <3% from other racial groups; 26.2% Latinx, 21.4% >65.
  - Moderna clinical trials included 9.7% African American, 4.7% Asian, <3% from other racial groups; 20% Latinx; 25.3% >65.
- The **National Medical Association**: professional society of African American doctors
  - December 21, 2020 found no issues that would place the Black community at higher risk for unfavorable outcomes.

# Is the vaccine safe?

- **People of color in key decision-making roles** in the development and approval.
  - Kizzmekia Corbett, PhD in microbiology and immunology, a Black research fellow at National Institute of Health
  - Dr. Jose Romero, a Latinx doctor and Chair of the CDC Advisory Committee on Immunization Practices; Other Asian and Latinx doctors, Dr. Wilber Chen, Dr. Grace Lee, and Dr. Pablo Sanchez.
  - Dr. Nadine Burke Harrison, a Black pediatrician and Surgeon General of California
  - Dr. Tomas Aragon, a Latinx physician and the Director and State Health Officer
- **Local providers of color** address reluctance:
  - Dr. Leroy Sims, a Black physician from Mills Peninsula and Senior Vice President of Medical Affairs at the National Basketball Association :  
[https://youtu.be/OtS5PmpYn\\_U](https://youtu.be/OtS5PmpYn_U)
  - Mayela Perez, a Latinx Public Health Nurse at San Mateo County:  
<https://youtu.be/aGdflvmbe98>

# Why should I get vaccinated?

- Allow us to return to having family and community gatherings and celebrations.
- Help our kids get back to a regular school life.
- Help keep our elders safe and allow us to gather with them safely.
- Help return other aspects of community and family life back.
- We have lost too many of our loved ones. We have a path out of this.

Why would you want to get vaccinated?

# How will people get the vaccine?

- Vast Majority of People - **Existing healthcare provider**
  - Kaiser, Dignity Health, PAMF/Sutter, AHMC/Seton
  - NEMS, Ravenswood, Stanford, local providers
- Residents of Long-term care facilities - **Walgreens/CVS/Safeway**
- Veterans – **Veterans Administration**
- Clients of County Health & those experiencing challenges getting vaccinated through providers - **County Health** as Safety Net Provider
  - San Mateo County Medical Center and Clinics
  - Vaccination clinics (piloted healthcare vaccination clinic last week)
- **Providers are reaching out** to their clients/patients on process for vaccination

# Why is the rollout of the vaccine so confusing and complicated?

- The **limited supply** of vaccines.
- Necessitates a **complicated prioritization** process.
- Creates **complex allocation processes** from the feds to the states to healthcare providers and counties.
- **Continued changes** on prioritization at the state.
- No provider knows **how much vaccine they will get** from one week to the next – makes it very difficult to plan.
- Every provider has a **different process for outreach**.
- **Providers have different** allocation of vaccines, different patient population, and different pace of vaccinations.
- **There will eventually be enough vaccine for everyone.**

## Phase 1a


- Health Care Workers & medical first responders
- Long Term Care Residents



[50,000]

## Phase 1b tier 1

- Adults 75+
- Adults 65+
- Essential workers in:
  - Education/Childcare
  - Emergency Services
  - Food + Agriculture



[167,000]

## Phase 1b tier 2

- Essential workers in:
  - Transportation & Logistics
  - Industrial/Residential/Commercial sectors
  - Critical Manufacturing
- Incarcerated individuals
- Homeless individuals



[72,000]

## Phase 1c

- Adults 50-64 years old
- 16+ w/ underlying health condition or disabilities
- Workers in:
  - Water & waste management
  - Defense, energy & chemical sectors
  - Communications & information technology
  - Financial services & government operations
  - Community service

[TBD]



# Timeline



- Phase 1a
- Phase 1b
- Phase 1c

• To Be Determined

• General Public



Now- February

February- April

April- June

## Estimated Timeframes

# County Health Key Vaccine Responsibilities

- **Coordination**

- Vaccine allocation to local smaller providers and engagement of multi-county entities (Kaiser, Dignity Health, PAMF/Sutter, AHMC/Seton)

- **Communication**

- Sharing information, learning from communities, and engaging with our residents and leaders to answer questions

- **Vulnerable Communities**

- Focusing on reaching our most impacted communities without providers and those challenged to get the vaccine from their providers

- **Data**

- Sharing available data on local vaccine administration and allocation

# Ensuring equitable distribution of the vaccine

- 1) Provide **transparency** in the science, data, and vaccination process.
- 2) Prioritize those that **shoulder the most risk**.
- 3) Acknowledge explicitly **the negative and painful history of health care in the US** in communities of color and current health inequities that have led to distrust in healthcare, research, and government.
- 4) **Engage community and stakeholders** to better understand their concerns and needs and respond to concerns and needs as much as possible.
- 5) **Communicate** effectively in culturally sensitive ways through trusted partners.
- 6) Overcome as many barriers to **accessing the vaccine** as possible – geographic, linguistic, cultural, physical, technological, documentation, mistrust, and more.
- 7) **Learn and improve** as we go.



# Data: Vaccination Estimates

- **Scale** of the operation:
  - Approximately 619,000 adults in SMC
  - Targeting 90% or 557,000 people to reach sufficient population immunity
  - Estimate 6,200 vaccinations per day total across vaccinators
  - Approximate County responsibility: 1,200 vaccinations per day
- **73,043** San Mateo County residents vaccinated, **89,815 vaccines distributed** (2/4).
  - 13.1% of 557,000 to reach 90% of adults
  - 11.4% of all 16+ total population
- Two new vaccine **dashboards** available
  - <https://www.smchealth.org/coronavirus-health-data>
  - Demographics of SMC residents that have been vaccinated
  - Where residents are getting vaccinated



# SMC Vaccination Efforts – Piloting and Learning

- Large-scale vaccination clinics to reach healthcare workers
- Well underway in our reach of long-term care facilities
- Pilots to reach older adults
- Learning from our pilots
- Exploring many options – pharmacies, mobile options and more



# Learning and improving

- **Sequencing release of appointments** for registration to allow populations that may require more time to sign up prior to releasing to broader group
- HPSM and County Health **robo-calls, texts, outbound calling** to reach members and providing phone support for registration
- Developing **County call-center** to offer phone-based, in-language registration support for vaccinations
- Exploring **transportation support** options with SamTRANS and HPSM

# Learning and improving

- **Improved outreach** for vaccination opportunities.
- **Easier registration** systems.
- Exploring **community-based vaccination** sites
- Identifying targeted **pathway for those unable to leave their home** (via home health agencies or public health nurses directly to homes)
- Learning about lengthier intake at vaccinations sites to **support interpretation and family support** helping to navigate older adults through paperwork
- Working hard to **continue to learn and improve**, including from healthcare partners like Ravenswood Family Health Center, Dignity Health, SMMC

# Local Community Engagement & Outreach

- **SMC Vaccine Communication Equity Working Group**
  - Targeted and countywide messaging and outreach plan
- Up-to-date Information on **website**: [www.smchealth.org/covidvaccine](http://www.smchealth.org/covidvaccine)
- **Presentations and forums** sharing vaccine information, learning from community experiences and expertise, and answering questions
- **Partnership** with key community based organizations and clinics to outreach to clients and community members in the BIPOC communities
- **SMC online notification system**
  - Sign up to get notified when you are eligible for the vaccine:  
[www.smchealth.org/covidvaccine](http://www.smchealth.org/covidvaccine)
  - **Please share with your congregations**



# Key Points to Continue to Emphasize

- The vaccine is our **best chance to overcome this health crisis**
- **The vaccine is safe** and based on sound science
  - We acknowledge the painful history of healthcare experimentation and current inequities that have created mistrust and reservations about the vaccine. We need to find ways to overcome this authentically.
- **Your provider is the best path** to getting vaccinated
  - If you don't have a provider, the County will have options available
- The vaccine is provided **at no charge to you**
- Those **vaccinated can still transmit** coronavirus
  - Continue to mask & social distance
- **There will be enough vaccine for everyone**
  - The supply shortage will not last for long
- **Sign up to get notified** when you are eligible for the vaccine:  
[www.smchealth.org/covidvaccine](http://www.smchealth.org/covidvaccine)
- For more information, visit: [www.smchealth.org/covidvaccine](http://www.smchealth.org/covidvaccine)

THANK YOU



**SAN MATEO  
COUNTY HEALTH**

All together better.

# Briefing for Community Leaders in San Mateo County

## Supporting your community toward the light

February 6, 2021

Curtis Chan, MD, MPH  
Deputy Health Officer, San Mateo County

1. Summarize key points about FAQ
2. Provide context for key references and data.
3. Facilitate next steps for leaders to empower community.

# Key Points for Community Leaders

February 4, 2021

1. **Disease is still widespread** in San Mateo County.
2. New “UK” strain, B.1.1.7 is more transmissible.
3. Preventing deaths among older adults is a priority.
4. **Community engagement & leadership** is essential to limiting disease spread in workplaces, gatherings, and households.  
[www.cdc.gov/mmwr/volumes/66/rr/rr6601a1.htm?s\\_cid=rr6601a1\\_w](http://www.cdc.gov/mmwr/volumes/66/rr/rr6601a1.htm?s_cid=rr6601a1_w)
5. **National vaccine supply** is increasing. “Most San Mateo County residents will receive the vaccine from their primary care provider.”

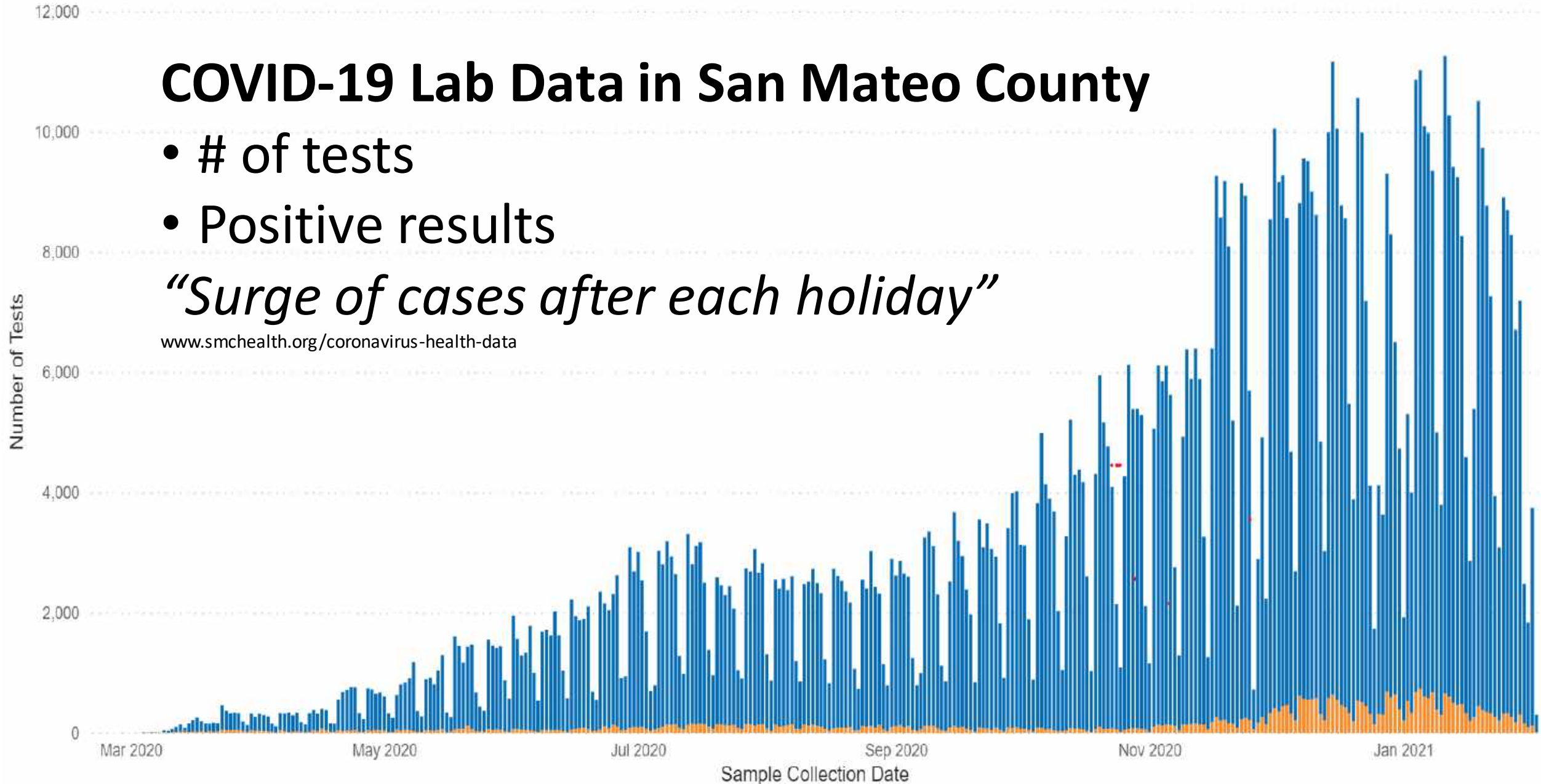
Positive Negative Inconclusive

# COVID-19 Lab Data in San Mateo County

- # of tests
- Positive results

*“Surge of cases after each holiday”*

[www.smchealth.org/coronavirus-health-data](http://www.smchealth.org/coronavirus-health-data)





# San Mateo County COVID-19 Data Dashboard



Data up to and including February 3, 2021

Select time frame for case data:

Last 30 Days

Historical

## Total Cases

# 36,451

## R-eff

# 0.80

### Cases by Sex

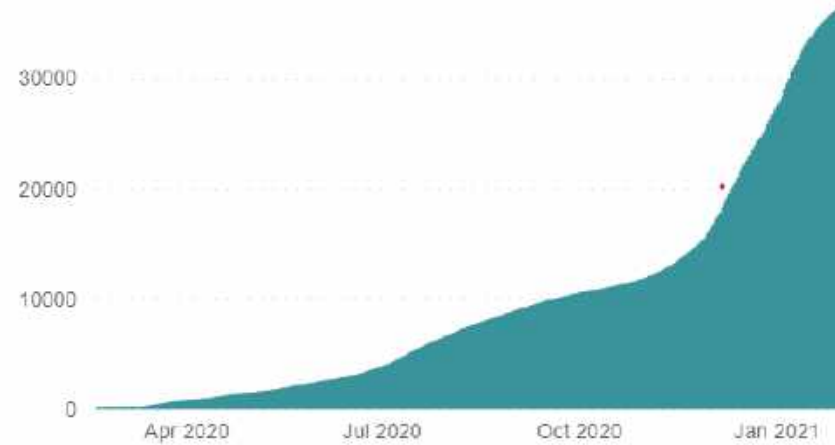
Female **18336**

Male **17767**

Unknown **344**

- R-eff is the average number of people an infected person will infect  
- Represents rate at which COVID-19 is spreading  
- Value less than 1 means decreasing spread  
- Value greater than 1 means increasing spread  
Source: [CalCat](#) ensemble for 1/30/2021, accessed on 2/3/2021

### Total Cases by Episode Date



## Total Deaths

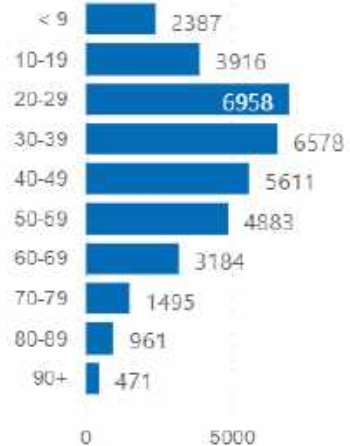
# 395

### Deaths by Sex

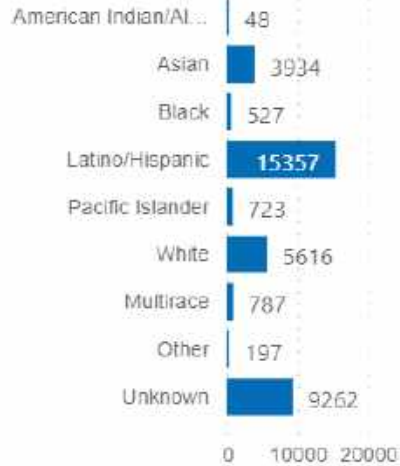
Female **194**

Male **201**

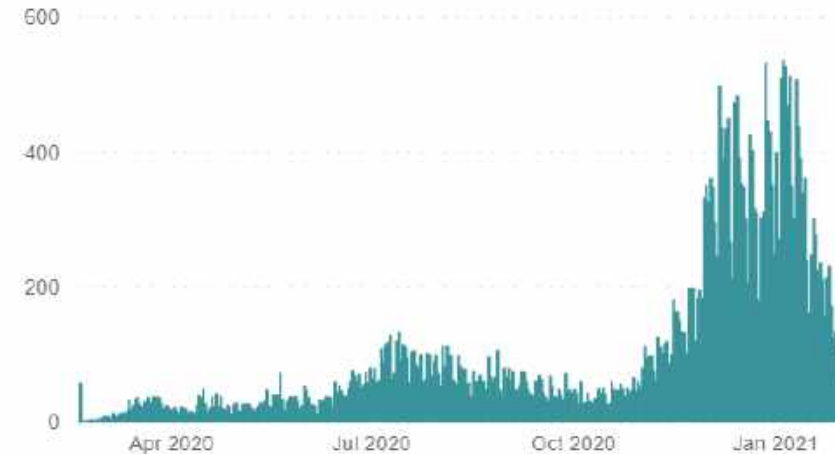
### Cases by Age Group



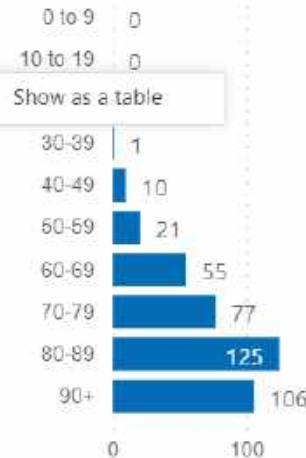
### Cases by Race/Ethnicity



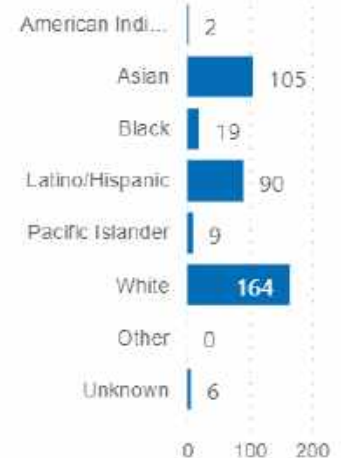
### Cases by Episode Date



### Deaths by Age Group



### Deaths by Race/Ethnicity



# COVID-19

ACT NOW!



Your Health

Vaccines

Cases & Data

Work & School

Healthcare Workers

Health Depts

More

## Your Health

Things You Need to Know

Symptoms +

Testing +

How it Spreads -

Ways COVID-19 Spreads

Reinfection

Protect your Home from COVID-19

New COVID-19 Variants -

Variant Cases

Prevent Getting Sick +

If You Are Sick +

People at Increased Risk +

Daily Activities & Going Out +

Travel +

## New COVID-19 Variants

Updated Jan. 15, 2021 Languages Print

Information about the characteristics of these variants is rapidly emerging. Scientists are working to learn more about how easily they might spread, whether they could cause more severe illness, and whether currently authorized vaccines will protect people against them. At this time, there is no evidence that these variants cause more severe illness or increased risk of death.

### What we know

Viruses constantly change through mutation, and new variants of a virus are expected to occur over time. Sometimes new variants emerge and disappear. Other times, new variants emerge and persist. Multiple variants of the virus that causes COVID-19 have been documented in the United States and globally during this pandemic.

The virus that causes COVID-19 is a type of coronavirus, a large family of viruses. Coronaviruses are named for the crown-like spikes on their surfaces. Scientists monitor changes in the virus, including changes to the spikes on the surface of the virus. These studies, including genetic analyses of the virus, are helping us understand how changes to the virus might affect how it spreads and what happens to people who are infected with it.

Multiple COVID-19 variants are circulating globally:

- In the United Kingdom (UK), a new variant called B.1.1.7 has emerged with an unusually large number of mutations. This variant spreads more easily and quickly than other variants. Currently, there is no evidence that it

US COVID-19 Cases  
Caused by Variants  
View a map showing the number of confirmed cases in each state.

[View Cases](#)

## COVID-19 Variants:

CDC (January 15, 2021): *These variants seem to **spread more easily and quickly** than other variants, which may lead to more cases of COVID-19. Currently, there is no evidence that these variants cause more severe illness or increased risk of death.*

John L. Colgate, MD<sup>1</sup>; Melissa S. Balke, MD<sup>1</sup>; Kara D. Lee, MD<sup>1</sup>; Henry Q. Wilson, MD<sup>1</sup>; Krista E. Shuman, MPH<sup>1</sup>; Robert J. Brangman, MD<sup>1</sup>; Natalie B. Peltola, MD<sup>1</sup>; Alex Cline, MPH<sup>1</sup>; Carrie Reed, PhD<sup>1</sup>; Alicia M. Ho, MD<sup>1</sup>; H. Rupp Taylor, MD<sup>1</sup>

On October 20, 2020, this report was posted as an MMWR Early Release on the MMWR website (<https://www.cdc.gov/mmwr>). Improved understanding of transmission of SARS-CoV-2, in view of the current coronavirus disease 2019 (COVID-19) risk, helps households control and prevent transmission. However, few studies have systematically characterized the transmission of SARS-CoV-2 in U.S. households. We prospectively reported transmission rates by setting and days on transmission rates from children are limited. To assess household transmission, a non-interventive study was conducted in Nashville, Tennessee, and Marshfield, Wisconsin, commencing in April 2020. In this study, proxy infections were defined as the first household member...

MMWR / November 6, 2020

...and household members were tested sequentially until all members to complete symptoms duration and all collected specimens, used media only or nasal media and also samples, daily for 14 days. For this analysis, specimens from the first 7 days were used for SARS-CoV-2 using CDC (2020) protocols. A total of 191 enrolled household contacts of 131 index patients reported having no symptoms on the day of the associated index patient's illness onset, and among those 91 contacts, 102 had SARS-CoV-2 detected in either nasal or oral specimens during follow-up. For a secondary infection rate of 12% (95% confidence interval [CI] = 6%–18%) among household members in which the index patient was aged 18 years, the secondary infection rate from index patients aged <12 years was 73% (95% CI = 51%–94%) and from index patients aged 12–17 years was 38% (95% CI = 22%–56%). Approximately 12% of secondary infections were identified within 5 days of the index patient's illness onset, and additional transmission occurred whether the index patient was an adult or a child. In some household transmission of SARS-CoV-2, contacts and contacts rapidly after the index patient's illness onset, persons should self-isolate immediately in the case of COVID-like symptoms, at the time of testing as a result of a high-risk exposure, or at the time of a positive result, whichever comes first. Cautioning on isolation, all...

This content cannot be used for any purpose other than to cite it in your work. See <https://www.cdc.gov/mmwr> for more information.

## YOUR HEALTH

# What to Do If You Are Sick

Updated Dec. 31, 2020

Languages ▼

Print

## Steps to help prevent the spread of COVID-19 if you are sick

If you are sick with COVID-19 or think you might have COVID-19, follow the steps below to care for yourself and to help protect other people in your home and community.



### Stay home except to get medical care

- **Stay home.** Most people with COVID-19 have mild illness and can recover at home without medical care. Do not leave your home, except to get medical care. Do not visit public areas.
- **Take care of yourself.** Get rest and stay hydrated. Take over-the-counter medicines, such as acetaminophen, to help you feel better.
- **Stay in touch with your doctor.** Call before you get medical care. Be sure to get care if you have trouble breathing, or have any other [emergency warning signs](#), or if you think it is an [emergency](#).
- **Avoid public transportation, ride-sharing, or taxis.**

MMWR / December 11, 2020

### Summary of Guidance for Public Health Strategies to Address High Levels of Community Transmission of SARS-CoV-2 and Related Deaths, October 2020

Stephanie A. Hens, PhD<sup>1</sup>; Melissa S. Balke, MD<sup>1</sup>; Kara D. Lee, MD<sup>1</sup>; Henry Q. Wilson, MD<sup>1</sup>; Krista E. Shuman, MPH<sup>1</sup>; Robert J. Brangman, MD<sup>1</sup>; Natalie B. Peltola, MD<sup>1</sup>; Alex Cline, MPH<sup>1</sup>; Carrie Reed, PhD<sup>1</sup>; Alicia M. Ho, MD<sup>1</sup>; H. Rupp Taylor, MD<sup>1</sup>

On October 20, 2020, this report was posted as an MMWR Early Release on the MMWR website (<https://www.cdc.gov/mmwr>). To the 10 months since the first confirmed case of coronavirus disease 2019 (COVID-19) was reported in the United States in January 20, 2020, approximately 134 million cases and 27,127 deaths have been reported in the United States. On October 20, the number of new cases reported to the United States in a single day exceeded 100,000 for the first time, and in December 1, the number of daily deaths exceeded 1,000. With similar numbers, more than 600,000 cases and 100,000 deaths were also reported in Wisconsin, with approximately 30% of transmission from asymptomatic persons. The United States has reached a phase of high level transmission where a coordinated approach to implementing all evidence-based public health strategies at both the individual and community levels is essential. This summary guidance highlights evidence-based strategies to address high levels of transmission. These...

...strategies were to reduce SARS-CoV-2 transmission from the current high level. These strategies will provide a bridge to a future with stable, moderate and high transmission settings of effective measures, which will reduce the average number of secondary infections to a range of average 1.0 to 1.5.

#### Recommended Public Health Strategies

1. **Control new waves of infection and control size of the next wave.** Public health strategies should include: (1) reducing transmission of SARS-CoV-2, particularly in light of winter; (2) the approximately one-half of new infections are transmitted by persons who have no symptoms (25% of asymptomatic cases); (3) the benefits of such strategies for the community should be weighed against the burden on the community of the need; (4) to prevent the spread of SARS-CoV-2, strategies for health care workers and other essential personnel (ECWs) should be implemented, including such as use of masks and other personal protective equipment (PPE).

...and testing close contacts of persons with illness (100%) to help identify persons at risk for severe illness or death from infection with SARS-CoV-2. The rates of cases (COVID-19), by geographic region, and with persons of various general practice equipment and with both patients, in geographic areas, by increasing rates of identification and isolation, hand hygiene and environmental disinfection, and by allowing, maintaining, availability and high community coverage and effective COVID-19 vaccines. In communities, these strategies can reduce SARS-CoV-2 transmission, long-term impact on health and death, and mitigate the burden of economic impact. Community health workers of these strategies require health equity practices. Health care workers, including the behavior of essential personnel, and support the availability of a quality, coordinated health care system through quality 1) infection and control, 2) individual, household, and community health care...

[www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html](https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html)



🏠 Your Health

Things You Need to Know

Symptoms +

Testing +

Vaccines +

How it Spreads -

Ways COVID-19 Spreads

Reinfection

**Protect your Home from COVID-19**

New COVID-19 Variants

Prevent Getting Sick +

If You Are Sick +

People at Increased Risk +

Daily Activities & Going Out +

Travel +

Children & Teens +

Stress & Coping +

Pets & Other Animals +

YOUR HEALTH

## Protect your Home from COVID-19

Updated Jan. 5, 2021 Languages Print



COVID-19 can spread anywhere, even places where you feel safe, like your home. If even one person in your [household](#) gets COVID-19, it can spread to others in your home. Learn what you can do to keep COVID-19 outside your home, and if it gets in your home, what you can do to keep it from spreading.

### What is a household?

- Anyone who currently lives in and shares common spaces in your housing unit (house or apartment)
- Households can include family members and or people who aren't related to you, like roommates
- People who don't currently live with you (for example, college students who return home from school on breaks) are part of different households

## Keep COVID-19 Outside Your Home

When you leave your house for work, to run errands, or for any other reason, you have a chance of being exposed to COVID-19 and bringing it back to your home.

The chances of being exposed increase when you

- Have close contact with other people (closer than 6 feet)
- Spend more time with other people
- Spend time in crowds (more than 10 people)
- Spend time in indoor spaces, particularly if poorly ventilated

Keep COVID-19 outside your home! When around people who don't live in your home, wear a mask, wash your hands, and stay at least 6 feet apart to protect yourself and prevent bringing COVID-19 into your home.

### Wear a Mask

- [Wash your hands](#) before putting on your mask.



PRISCILLA ZUBIA, left, and her sister Joanna tested positive for the coronavirus in October. They share a one-bedroom apartment in South L.A. with brothers Favian and Jonathan, who also contracted the virus. **COLLEEN ORL**

# 'An American tragedy'

A family tried to protect their father from the coronavirus. For many in L.A., simply being at home carries its own risk.

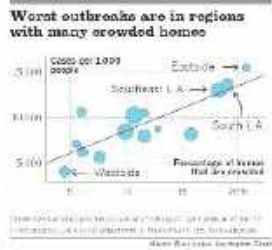
By Brittany Mejia

**T**oward off the deadly virus that had invaded his small apartment, Jose Guadalupe Zubia slept in a surgical mask and cracked open a window beside his bed. Two of his sons, who slept in the living room with their father, also kept their masks on all night. One pulled the covers over his head, hoping to keep the infection from spreading.

Jose's two daughters shut themselves in the bedroom they shared. When they used the apartment's only bathroom, they wiped everything down with Lysol.

The sons and daughters all tested positive for the novel coronavirus in October. Jose, a 59-year-old mechanic, was the only one who tested negative.

The children were determined to protect their diabetic father. But they lived crammed together, along with two dogs, in a one-bedroom apartment in South Los Angeles with two beds occupying much of the living room. Before they got sick, one of Jose's grandsons often spent the night, too.



Record CICYLY TYSON

## EDD failings push millions to the brink

Ten scoring audits and news of more file claims as agencies face the state agency's budget crisis.

By Brittney Mejia

**SACRAMENTO** — EDD is a year into the COVID-19 pandemic. Out of state, the federal unemployment benefits system remains closed to claims for workers in the states after their efforts to reestablished unemployment have been stalled by canceled payroll taxes, overwhelmed claimants and other factors.

EDD is out of work, and the state is still looking for ways to pay benefits to workers who are still unemployed and need help with their families and other needs.

EDD is a year into the COVID-19 pandemic. Out of state, the federal unemployment benefits system remains closed to claims for workers in the states after their efforts to reestablished unemployment have been stalled by canceled payroll taxes, overwhelmed claimants and other factors.

## Anxious wait for second doses

After a first vaccine shot, many face delays and a dwindling supply of second doses.

PRISCILLA ZUBIA, left, and her sister, Joanna, tested positive for the coronavirus in October. They share a one-bedroom apartment in South L.A. with brothers Favian and Jonathan, who also contracted the virus.

COLUMN ONE

# 'An American tragedy'

A family tried to protect their father from the coronavirus. For many in L.A., simply being at home carries its own risk.

By Brittany Mejia

**T**oward off the deadly virus that had invaded his small apartment, Jose Guadalupe Zubia slept in a surgical mask and cracked open a window beside his bed.

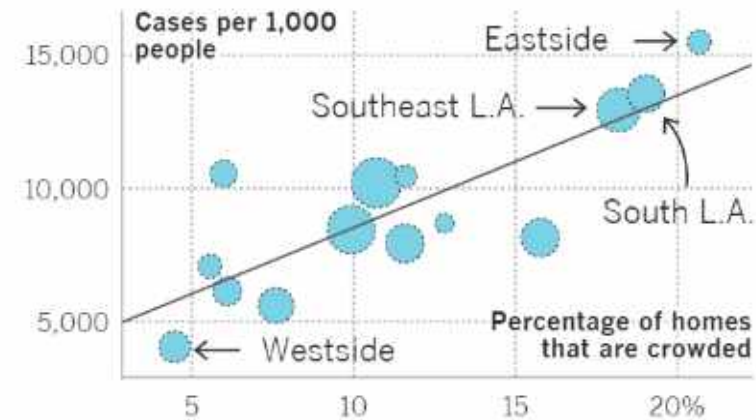
Two of his sons, who slept in the living room with their father, also kept their masks on all night. One pulled the covers over his head, hoping to keep the infection from spreading.

Jose's two daughters shut themselves in the bedroom they shared. When they used the apartment's only bathroom, they wiped everything down with Lysol.

The sons and daughters all tested positive for the novel coronavirus in October. Jose, a 59-year-old mechanic, was the only one who tested negative.

The children were determined to protect their diabetic father. But they lived crammed together, along with two dogs, in a one-bedroom apartment in South Los Angeles with two beds occupying much of the living room. Before they got sick, one of Jose's grandsons often spent the night, too.

## Worst outbreaks are in regions with many crowded homes



Circles sized according to the population of the region. Case rates as of Jan. 27. Times analysis, L.A. County Department of Public Health, U.S. Census Bureau

[See Family, A12]

**HEALTH ADVISORY: Community Interventions to Limit Surge of COVID-19**  
*Recommendations to limit social & household transmission*

December 8<sup>th</sup>, 2020

**Summary**

Health and social providers, community organizations, and local agencies are advised to support new recommendations that limit the surge of COVID-19 cases. With worsening pandemic fatigue amidst new restrictions, community members can be empowered by understanding that the virus is very transmissible even without symptoms, to choose recommendations in 3 areas:

- Always mask in public, particularly when talking.
- Small "Social Support Bubble" with only 1-2 households.
- Mask – Isolate – Quarantine – Test. Immediately as symptoms develop or after a possible exposure.

**Background**

Surge in cases. Like much of the region, state and nation, San Mateo County is surging with more COVID-19 cases in all regions, ethnicities, and age-groups, particularly young adults. Much of the transmission appears to occur in households and because of indoor social gatherings, as well as insufficient or inconsistent use of face coverings.

State of California established a San Mateo County Stay-at-Home order when R0 capacity falls below 1.0.

Bay Area Counties must consider the many months of worsening of mental health conditions, social isolation, and pandemic fatigue.

San Mateo County: To all county residents:

1. **Support for community health.** In general, businesses and community members have followed public health guidelines to ensure that all people in San Mateo County are safe, including vulnerable communities.
2. **Recognizing pandemic fatigue.** Governmental requirements and health recommendations must consider the many months of worsening of mental health conditions, social isolation, and pandemic fatigue.
3. **Belief in science.** San Mateo County residents and workers have followed disease control principles throughout the pandemic, including:



January 5, 2021

**HEALTH ALERT: Mental Health and Substance Use  
During the Pandemic**

**Summary**

San Mateo County Health is providing updated information regarding: 1) adverse mental health conditions, substance use, and other impacts of toxic stress caused by the coronavirus disease 2019 (COVID-19) pandemic; 2) the virus and its epidemiology; and 3) recommendations for healthcare and social services to prevent, identify, and treat mental health and substance use conditions.

**Background**

In its August 14<sup>th</sup> Morbidity & Mortality Weekly Report (MMWR), the CDC reported "elevated levels of mental health conditions, substance use, and suicide ideation." In a survey of 5,412 adults in the U.S. during the week of June 24-30, 2020, 41% reported at least one adverse mental or behavioral health condition. Compared to pre-pandemic periods in 2019, the prevalence of anxiety disorder (25%) was 3x higher and depression (24%) was 4x higher among adults. As the pandemic has worsened and surged since then, the increase of toxic stress, "pandemic fatigue," and social isolation have affected mental health outcomes and substance use. In its December 1<sup>st</sup> Health Advisory, the CDC alerted healthcare professionals about the "substantial increases in drug overdose deaths across the United States," with the largest increases in the West. The CDC also reported that "the number of people at risk of overdose and those who need to expand prevention and response activities."

In San Mateo County, there are a substantial increase in cases of substance use. An epidemic of mental health and substance use issues appears evident in the increased need for acute services, such as those provided by the county's [Behavioral Health and Recovery Services](#):

- Number of calls to the Behavioral Health & Recovery Services Access Call Center have been increasing since March 2020. Length of calls has increased as well.



# Health Alerts:

- Community Interventions to Limit Surge of COVID-19
- Mental Health & Substance Use during the Pandemic

[www.smchealth.org/general-information/current-alerts-reports](http://www.smchealth.org/general-information/current-alerts-reports)

# Epidemic of Mental Health & Substance Use – reflected in BHRS data.



## Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020

Mark E. Cullen<sup>1,2</sup>, Barbara L. Lund MA<sup>3</sup>, Ianita Brantley MD<sup>4</sup>, Joshua F. White PhD<sup>5</sup>, Alex Chaturvedi MPH<sup>6</sup>, Bahadur Nyal PhD<sup>1</sup>, Matthew D. Wilson PhD<sup>1,2</sup>, Rebecca Sullivan PhD<sup>5,6</sup>, Elizabeth R. Farrow PhD<sup>1,2</sup>, Laura E. Blegen PhD<sup>1,2</sup>, Charles A. Chouinard MD<sup>1,2</sup>, Mark L. Hoenes MD<sup>1,2</sup>, Paul A. Sharita M.D.C. Haganman PhD<sup>1,2</sup>

The coronavirus disease 2019 (COVID-19) pandemic has been associated with mental health challenges related to the morbidity and mortality caused by the disease and to mitigation activities, including the impact of physical distancing and stay-at-home orders.<sup>1</sup> Symptoms of anxiety disorder and depressive disorder increased simultaneously in the United States during April–June of 2020 compared with the same period in 2019 (1,2). To assess mental health, substance use, and suicidal ideation during the pandemic, representative panel surveys were conducted among adults aged ≥18 years across the United States during June 24–30, 2020. Overall, 40.9% of respondents reported at least one adverse mental or behavioral health condition, including symptoms of anxiety disorder or depressive disorder (30.9%), symptoms of a substance- and stressor-related disorder (TSRD) related to the pandemic<sup>3</sup> (26.8%), and having started or increased substance use to cope with stress or emotions related to COVID-19 (15.9%). The percentage of respondents who reported having seriously considered suicide in the 30 days before completing the survey (10.7%) was significantly higher among respondents aged 18–24 years (25.5%), minority racial/ethnic groups (Hispanic respondents [18.6%], non-Hispanic Black [black] respondents [15.1%]), self-reported racial/ethnic groups for adults<sup>4</sup> (30.7%), and essential workers<sup>5</sup> (21.7%).

**INSIDE**

- 1022 Characteristics of Marijuana Use During Pregnancy — Eight States, Pregnancy Risk Assessment Monitoring System, 2017
- 1064 Top Food Category Contributors to Sodium and Potassium Intake — United States, 2015–2016
- 1070 Serious Adverse Health Events, Including Death, Associated with Reported Mental-Related Food Safety and Contaminant Incidents — Arizona and New Mexico, May–June 2020
- 1074 COVID-19-Associated Multisystem Inflammatory Syndrome in Children — United States, March–July 2020
- 1081 Hospitalization Rates and Characteristics of Children Aged ≥18 Years Hospitalized with Laboratory-Confirmed COVID-19 — COVID NET, 16 States, March 1–July 25, 2020
- 1089 Transmission of SARS-CoV-2 Involving Remotely Working Employees in a Nursing Home — Maryland, April 2020
- 1095 Facility-Wide Testing for SARS-CoV-2 in Nursing Homes — Sweden, U.S. Territories, March–June 2020
- 1100 Notes from the Field: Seroprevalence Estimates of SARS-CoV-2 Infection in Convenience Samples — Oregon, May 11–June 18, 2020
- 1102 Notes from the Field: Emergency Visits for Complications of Injuring Involuntarily Injuring/Injured Patients — United States, 2016–2018
- 1106 Notes from the Field: Multistep-Resistant Tuberculosis Among Workers at Two Food Processing Facilities — Ohio, 2019–2017
- 1107 QuickStats

Continuing Education opportunities available at [https://www.cdc.gov/mmwr/mmwr\\_continuingeducation.html](https://www.cdc.gov/mmwr/mmwr_continuingeducation.html)

<sup>1</sup> <https://www.cdc.gov/mmwr/preview/mmwrhtml/6911a1111a1.htm>  
<sup>2</sup> Disorders classified as TSRDs in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) include posttraumatic stress disorder (PTSD), acute stress disorder (ASD), and adjustment disorder (AD), among others.  
<sup>3</sup> A self-reported condition was not reported. The definition of a substance-related disorder for adults is a person who had provided support care to a patient or friend aged ≥18 years to help them deal with or cope with stress or emotions related to COVID-19. The definition for children and adolescents was a parent or caregiver who had provided support care to a child or adolescent, including a parent's concern about their child's adjustment, coping for emotional stress, and talking regularly to one another on drugs.  
<sup>4</sup> Essential workers status was self-reported. The comparison was between employees responsible for a 5,000+ who also worked in essential or nonessential. The data analysis includes only those who reported a self-reported essential worker status.



- ↑ # and **duration** of calls to Behavioral Health & Recovery Services Access Call Center
- ↑ referrals for adults (by 51%) & youth (by 100%) to the behavioral health clinicians embedded in primary care.
- ↑ 31% in **domestic violence** victims served from March to November 2020 relative to same time period in 2019.
- ↑ 430% in overdose-related referrals to Medication Assisted Treatment outreach/response team.
- ↑ 21% in San Mateo Medical Center Emergency Department treatment of opioid use disorders since March 2020, compared to the same period last year.

# Resources for leaders to inform their community about preventing COVID

- Review resources that explain 2 science concepts & 3 strategies.
- Engage community members with accurate information & dialogue.
- Add pictograms & instruction sheets to newsletters, emails, social media.
- Learn what community members are suggesting as improvements

Resources:

<https://cmo.smcgov.org/covid-19-outreach-toolkit>

[www.smchealth.org/coronavirus](http://www.smchealth.org/coronavirus)

[www.smcgov.org](http://www.smcgov.org)

## Recommendations for Communities to Prevent COVID-19



**A**

Always mask in public, especially when talking



**I**

Insulate your household and any small, stable "Social Support Bubble" from the virus



**M**

Mask, isolate, self-quarantine, test

## Recommendations for Communities to Prevent COVID-19



### A

Always mask in public, especially when talking



### I

Insulate your household and any small, stable "Social Support Bubble" from the virus



### M

Mask, isolate, self-quarantine, test IMMEDIATELY if concerned about symptoms or exposure



Learn more, visit: [smcgov.org](http://smcgov.org)

COUNTY OF SAN MATEO 

## Recomendaciones para las comunidades para prevenir el COVID-19



### S

Siempre use mascarilla en público, especialmente al hablar



### A

Aísle su hogar y cualquier pequeña "burbuja de apoyo social estable" del virus



### M

Mascarilla, aislar, autoaislamiento, prueba de IMMEDIATO si se preocupan los síntomas o la exposición



Para más información, visite: [smcgov.org](http://smcgov.org)

COUNTY OF SAN MATEO 

## 社区预防COVID-19的建议



### A

在公共场合戴好口罩，尤其是在交谈时候



### I

隔离你的家庭并限制你的社交活动。



### M

如果担心自身或接触他人新冠病毒，立即戴口罩、隔离、自我隔离、测试。



对于更多信息，请访问：[smcgov.org](http://smcgov.org)

COUNTY OF SAN MATEO 

# TWO SCIENCE FACTS: (Football coaches and singers may not know)

- **Most transmissions (~65%) are from people without symptoms**
- **Airborne droplets increase by talking, shouting, and singing**



**Always wear your mask,  
especially when talking**





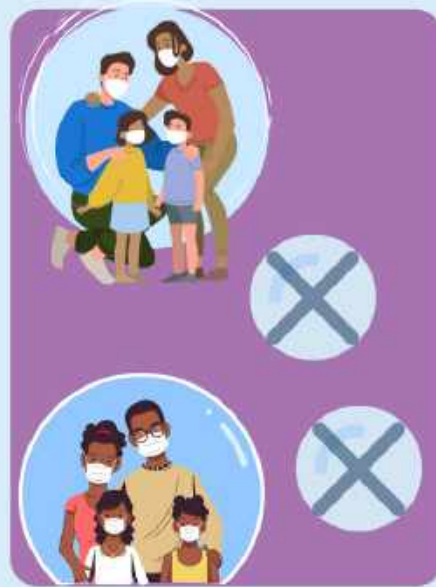
# Insulate Your Household Support Bubble

*We recognize the importance of family members and others who provide essential physical, mental, and emotional health support. Insulate your household and social-support bubble by:*



**L**

Limit size of bubble to only 1-2 households.



**E**

Ensure bubble members are "mutually exclusive". Don't gather with other bubbles or individuals.



**A**

Always mask and minimize contact with people outside your bubble.



**N**

Notify other bubble members if anyone has symptoms.

# COVID-19 INCUBATION TIMELINE

COVID-19 has up to a 14 day incubation period

John Exposed 22 People Before Having Symptoms

## DAY 0

John was **exposed** to COVID-19

## DAY 7

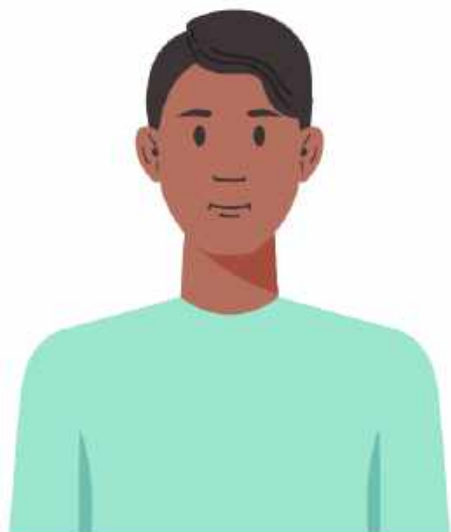
John became symptomatic, then tested **positive**

**MOST CONTAGIOUS**

2 days before, through 5-10 days after symptoms first appear

## DAY 6

Thinking he didn't have COVID-19, John went to work and to a family gathering. He had no symptoms but was contagious and now **exposed 22 people**



Most transmissions (~70%) are from someone **WITHOUT** symptoms or **BEFORE** developing symptoms

# Concerned about symptoms or exposure?

## IMMEDIATELY:

Mask · Isolate · Self-Quarantine · Test



### MASK

The person experiencing symptoms and **EVERYONE** in the household needs to wear a mask



### ISOLATE

in a different room with windows open



### SELF-QUARANTINE

for household members and close contacts should be considered



### TEST

the person with symptoms immediately, and any contacts developing symptoms



Most transmissions (~70%) are from someone **WITHOUT** symptoms or **BEFORE** developing symptoms



# Mask – Isolate – Quarantine - Test

Concerned about symptoms or exposure?

**IMMEDIATELY:**  
Mask - Isolate - Quarantine - Test



## MASK

The person experiencing symptoms and **EVERYONE** in the household needs to wear a mask.



## ISOLATE

in a different room with windows open



## QUARANTINE

for household members and close contacts should be considered



## TEST

the person with symptoms immediately, and any contacts developing symptoms



Most transmissions (~65%) are from someone **WITHOUT** symptoms or **BEFORE** developing symptoms



¿Preocupado por los síntomas o la exposición?

**INMEDIATAMENTE:**  
Mascarilla - Aíslese - Cuarentena - Prueba



La mayoría de las transmisiones (~65%) son de alguien **SIN** síntomas o **ANTES** de desarrollar síntomas

担心有新冠病毒的症状或接触到了新冠病毒?

**立即:**  
戴口罩 - 隔绝 - 隔离 - 测试



大多数传播 (~65%) 来自没有症状或在出现症状之前的人。

# Prevent Household Transmission of COVID-19

If you have any of the following:

- a. **Symptoms** of COVID-19
- b. **Had close-contact** with suspected or confirmed COVID-19 case
- c. **Test taken** for COVID-19, awaiting results
- d. **Diagnosis** of COVID-19

**IMMEDIATELY:**

Call your medical provider. Read CDC Info: [www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick](http://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick)

## Mask

## Isolate

Stay in a separate room and avoid common areas.

## Self-Quarantine

All household members & close contacts should quarantine.

### Science Facts:

- a. Most (70%) transmission of COVID-19 are from people without symptoms.
- b. Incubation Period: After exposure, symptoms typically develop in 2-7 days (up to 10-14 days).
- c. People with COVID-19 are most infectious 2 days before and 5 days after symptoms first appear.

## Test

A viral test only tells if you are infected now. If you test negative and start to feel sick, you may need to get tested again.



Every household member (over 2 years old) should wear a mask, even at home.

1. Stay home, in a separate room if Also, use separate bathroom and avoid common areas as much as possible, until:
  - >10 days since symptoms first appeared AND
  - >24 hours since the last fever (without fever-medication) AND
  - symptoms have improved.
2. Tell your "close contacts".
  - "Close Contacts" is anyone who was within 6 feet of an infected person for a total of 15 minutes or more.
  - An infected person can spread COVID-19 starting 2 days before the person has any symptoms or tests positive for COVID-19.
  - Notify your employer.
3. Your "close contacts" should quarantine:
  - If possible, stay in a separate room for at least 10 days after their last exposure (14 days is safer).

### Additional Instructions for Isolation or Quarantine:

- Wash your hands well and often.
  - Open windows to increase ventilation
  - Stay home. Do not go to work, school, public areas.
  - Do not allow visitors into your home.
  - If your symptoms are severe or concerning, call your medical provider or 911.
1. Considerations for who should get tested,
    - People who have symptoms of COVID-19.
    - People who are "close contacts"
    - People who have taken part in activities that put them at higher risk for COVID-19 because they cannot socially distance as needed, such as travel, attending large social or mass gatherings, or being in crowded indoor settings
  2. To get tested, contact your medical provider or schedule with a community test site: [www.smchealth.org/covid-19-testing](http://www.smchealth.org/covid-19-testing)
  3. Utilize the MIST strategies in this document.

## Instructions for preventing transmission within households

- Prepare for someone becoming positive in the future
- Consider how to best isolate and quarantine individuals in a home.
- Use immediately if concerned about symptoms or exposure to COVID-19. Don't wait for positive tests.

# Getting the Vaccine & Vaccine Safety



**Most residents will receive their vaccine from their primary health provider when it is their turn.**

Please contact your provider or health plan about your eligibility.



For more information on the County's vaccination plan, go to [www.smchealth.org/covidvaccine](http://www.smchealth.org/covidvaccine).



COUNTY OF  
SAN MATEO



SAN MATEO  
COUNTY HEALTH  
All Together Better.



**La mayoría de los residentes recibirán la vacuna de su proveedor de atención primaria cuando sea su turno.**

Comuníquese con su proveedor o plan de salud sobre su elegibilidad.



Para obtener más información sobre el plan de vacunación del Condado, visite [www.smchealth.org/covidvaccine](http://www.smchealth.org/covidvaccine).



**大部分居民会在轮到他们的时候从自己的家庭医生那里注射疫苗。**

请联络您的家庭医生或医疗保险了解疫苗注射资格。



更多关于县内的疫苗接种计划信息，请登陆：  
[www.smchealth.org/covidvaccine](http://www.smchealth.org/covidvaccine)。



- <https://www.smchealth.org/covidvaccine>
- <https://www.smchealth.org/post/statement-vaccine-equity>
- COVID-19 vaccines are safe and effective: m-RNA technology, large clinical trials, expanded safety monitoring system
- Address inequities -- of distribution, prioritization, information, registration, access
- What are the activities that can be implemented quickly to improve access to care?



**BAY AREA**  
Community Health  
Advisory Council

# Keynote Speakers Q & A



**BAY AREA**  
Community Health  
Advisory Council

*I'm getting the vaccine because:  
I want to volunteer  
again at my church.*

*- Lisa Tealer, Executive Director  
Bay Area Community Health Advisory Council*

#StopTheStigma  
#RollUpYourSleeve  
[smchealth.org/coronavirus](https://smchealth.org/coronavirus)



COUNTY OF SAN MATEO



## COVID-19 TESTING

Quick and easy testing at no cost to you  
No information shared with ICE

Simple oral swab test  
Children 5+ can be tested with guardians  
Walk-ups are welcome (pre-registration preferred)  
If you are COVID positive resources are available to you and your family.  
See below for more information\*

Every Wednesday Starting  
Wednesday, November 11<sup>th</sup>  
4:00 PM-7:00 PM  
St. James Church  
825 Monte Diablo Avenue,  
San Mateo

Register online:

<https://ourstjames.com/press/2020/10/28/>



\*If you test positive: A County Health contact tracer will call you to talk about your recent close contacts and how we can help support you and your family if you need to isolate. You may be eligible for wage support, housing and meals at a hotel, or food delivery and care for loved ones while you isolate at home.

A positive test for COVID-19 can be scary and unsettling.  
We want to provide the support you need to focus on your care.

<https://www.smchealth.org/covid-19-vaccination>

<https://www.smchealth.org/covid-19-testing>

<https://covid19.ca.gov>

<https://www.bachac.org/covid19-resources>







**BAY AREA**  
Community Health  
Advisory Council



**Vicki S. Williams, MS**  
Publisher, Cuisine Noir

# Freestyle Sheet Pan Meal w/ Brown Rice -Ingredients

- 1 medium bell pepper (red, yellow or orange), medium chopped
- 1 small white or red onion, medium chopped
- 1 cup cauliflower florets, sliced
- 1 small zucchini, sliced medium rounds
- 1 cup baby carrots
- 1 fennel bulb, sliced thin
- 1 small jalapeno, sliced in thin rounds
- ½ teaspoon smoked paprika
- ½ - 1 teaspoon garlic powder
- ½ - 1 teaspoon onion
- ¼ teaspoon black pepper
- 5 – 6 sprigs fresh thyme
- 2 tablespoons olive oil
- ½ - 1 pound turkey sausage, tofu or vegan sausage (or no meat at all)
- 1 cup brown rice
- 3 cups vegetable broth
- 1 tablespoon dry parsley flakes

# Freestyle Sheet Pan Meal w/ Brown Rice - Preparation

1. Pre-heat oven to 375F.
2. In a medium pan, add broth and rice and cooking on low-medium heat for 40-45 minutes until all broth has been absorbed and rice is tender. Add parsley, stir and set aside.
3. On a half sheet pan or baking sheet, add all vegetables, spreading them out so they all can cook evenly.
3. If adding protein, mix in with the vegetables and toss around to spread out.
4. Sprinkle seasonings on top of vegetables and protein and mix together.
5. Add olive oil and toss to coat all ingredients as evenly as possible. Add fresh thyme around the sheet pan and put into the oven for 30 – 35 minutes, doing one toss after 20 minutes so both sides of vegetable and protein cook.
6. In a bowl, place rice on the bottom and vegetables and protein on top and serve hot.

# Freestyle Sheet Pan Meal w/ Brown Rice – Tips & Notes

1. Have fun by trying different vegetables and seasonings. You can add turmeric, rosemary, etc.
2. Each meal can take on a different flavor profile, so Italian, Mediterranean, etc.
2. By prepping the vegetables ahead of time, all you have to do is pull them out, arrange on the sheet or baking pan, season and you'll have a meal in no time.
3. This also will be great with shrimp, chicken and flank steak. I would advise sautéing the chicken and steak on the stovetop and adding it into the vegetables afterward. You don't want to mix these two raw meats with the uncooked vegetables.



**BAY AREA**  
Community Health  
Advisory Council

# Keynote Speakers Q & A

# What's Coming?

- Check out BACHAC's Knowledge for Life [blog](#)
- The February blog contributor will be Anita!!

Monday, Feb. 8<sup>th</sup> 7-8pm (PT)

- Monthly BACHAC Meeting
- Send email to [aachacsanmateo@gmail.com](mailto:aachacsanmateo@gmail.com) to receive monthly letter, agenda and zoom/call-in instructions

Saturday, Feb. 20<sup>th</sup> 10:30am-12:30pm (PT)

- 29<sup>th</sup> Annual Black History Month Program





**Please complete the survey when you receive  
it.**

**Your feedback MATTERS!**

# Raffle

- BACHAC Swag Bags
- Gift Cards, 2-\$25 gift cards, 1 - \$50 gift card
- Must be present on-line to win







**THANK YOU!**  
**Anita, Leslie, Stacey, Dr.**  
**Curtis, Shireen, Vicki &**  
**all of you!**



**To learn more about BACHAC**  
**[www.bachac.org](http://www.bachac.org)**