Covid-19 and Marin County

By Woody Weingarten

Question: Has Marin County done well limiting the spread of Covid-19?

Answer: Yes, partially because it took action early and partially because of successful team efforts.

That’s the view of Dr. Lisa Santora, Marin’s deputy public health officer. When the pandemic first erupted, there were only five key people under the auspices of Marin’s Department of Health and Human Services (HHS) who could be activated to work on the problem. Now, in sync with Communicable Disease Prevention and Control and the Office of Emergency Services, 200 staffers are helping to keep the coronavirus in check.

Early containment happened in three stages, reports Dr. Santora, a family-medicine expert who’s held the deputy health officer position since 2015.

First came the January activation when “we recognized it was reminiscent of SARS, the 2003 respiratory syndrome,” she said. Daily consultations were held with representatives of the Association of Bay Area Health Officers. Dr. Santora says they agreed “Covid-19 was circulating in our community since fall 2019 because of the Bay Area’s relationship with China. We worked on the assumption it was worse than had been reported.”

The second stage, she says, was “intensifying our actions when we saw that China closed down Wuhan.”

The next marker came March 16 “when Bay Area officials united to come up with the nation’s first shelter-in-place order, which gave us the ability to flatten the curve.” By the tail of that month, public health personnel had partnered with Kaiser Permanente and MarinHealth (formerly Marin General Hospital). Since then, “we’ve been very measured about easing up restrictions” — and have amped up attention to nursing homes and other settings where older adults live and congregate.

Though it hasn’t been easy, she says her team “has been just amazing, working above and beyond every day.” The deputy also praised the Marin County Administrator’s Office and the Board of Supervisors for being “fully supportive and engaged” and that she’s “thankful for the disaster service workers, community partners and first responders who have stepped up.”

Peering into her crystal ball, she expects that a second wave of Covid-19 will dovetail with flu season and create a “twindemic.” Her hope? Every eligible resident of the county gets a flu shot.

As for the key to future control of the coronavirus, “we must stay vigilant,” she says. “Everything depends on community members adhering to the tools we already have — hand-washing, mask-wearing and social-distancing.”

Woody Weingarten is a resident of San Anselmo and a commissioner for District 2.
New Commissioners
By Woody Weingarten

There are four new kids on the Marin County Commission on Aging block — ranging in age from 48 to 88. They are Everett Brandon, Lisa Brinkmann, Julie Hanan Friedman and Wendy Nuessle.

Everett Brandon represents District 3, which includes Belvedere, Marin City, Mill Valley, Sausalito and Tiburon. He has lived in Marin City for 22 years and is on that community’s Seniors on the Move task force, which enhances the lives of older adults. He’s also co-founder and chair of a nonprofit that helps minority and disadvantaged youth get to college.

Brandon also serves as a family member of the Marin County Mental Health Board and is an ex-member of the Marin City Community Services District Board and the Marin City Community Development Corporation. The 88-year-old retiree had been a public affairs officer with the San Francisco Public Utilities Commission and executive director of the San Francisco Economic Opportunity Council.

Brandon says he joined the commission because it’s “an important organization and appropriate for my participation at this time in my life.” He hopes to be “a good learner, an able advocate, a contributor of ideas and an able representative for the needs of the elderly, locally and county-wide.” He believes “aging is not easy.”

Lisa Brinkmann, former executive director of Marin Villages and longtime mover and shaker with Autodesk and other high-tech companies, wants to have an impact “on the quality of life for older people living in their own homes…and for those who can’t live at home anymore.”

On a personal note, she explains that she’s grateful that her mother, who has Alzheimer’s, can still reside at home because she otherwise wouldn’t be able to see her due to Covid-19 constraints.

She’s one of two representatives on the Commission on Aging from the California Senior Legislature (CSL), an assemblage of 120 men and women in a shadow legislature who propose and debate bills on health and long-term care, elder abuse, affordable housing, transportation and other issues affecting older adults.

Julie Hanan Friedman, who represents the town of Tiburon where she’s lived for 62 years, says she doesn’t “know yet exactly where I fit but I definitely can help with promotion and research.” And once she decides to “do something, I dive in head-first and then see how it turns out,” she elaborates. She wants to explore “the path of what we’re not doing, especially those of us who are now alone,” and says she’s like “the old gray mare who ain’t what she used to be but still has a few kicks left.”

Career-wise, the 87-year-old “Depression baby” has had an “eclectic background” that’s included owning her own businesses, co-founding the Tiburon Pelican Players, working in affirmative action and politics, lecturing high school and college students on fashion, professionally modeling and dancing, and promoting gold jewelry.

Wendy Nuessle is a Fairfax resident who represents District 2, which includes Fairfax, Greenbrae, Kentfield, Larkspur, Ross and San Anselmo. She expects the commission to help her augment what she already experiences, “a balance in life.”

The 48-year-old medical social worker has worked mainly with low-income people in the Tenderloin, Hunter’s Point and Mission districts of San Francisco. The commission is a place “where people are ready to make a positive change” and she’s pleased to “be a part of that.”

Nuessle, who earned a master’s degree in social welfare from U.C. Berkeley with a focus on gerontology, is convinced that her tenure will be a “really good opportunity” to help “on the local level and have an impact on policy.”

Woody Weingarten is a resident of San Anselmo and a commissioner for District 2.
Food Safety When the Power Goes Out

By Kim Kulp, R.D.

Keeping food safe is all about temperature and time.
- Perishable foods need to be kept at **40 degrees or below**.
- If food is above 40 degrees, it is only good for two hours. After two hours it must be discarded.
- Keep the refrigerator and freezer door closed as much as possible.
- A closed refrigerator can keep food safe for up to four hours.
- A closed, full freezer can keep food safe for 48 hours.
- A closed ½ filled freezer can keep food safe for 24 hours.

Do not use taste or smell food to determine safety. You cannot taste or smell the bacteria that could make you sick.

**How to Prepare**
- Keep a thermometer in the refrigerator and freezer. This will help you determine when food has been at an unsafe temperature. Foods must be at 40 degrees or below. Food is only safe above 40 degrees for two hours.

**Food Safety Questions**

**Q:** Can I re-freeze defrosting items?
**A:** If there are still ice crystals in the frozen food, it is safe to re-freeze.

**Q:** What’s the best way to thaw frozen food?
**A:** Never thaw food at room temperature. Thaw it in cold water (not over 70 degrees), or in the microwave. Foods thawed in the microwave need to be cooked immediately.

**Q:** What does “Use By, Best By, Best Before” mean?
**A:** These dates have nothing to do with food safety. They are provided by food manufacturers based on what they consider best for quality, not safety.

**Q:** What does “Sell By” mean?
**A:** This is used for perishable foods, such as meats and dairy. These foods can be good a few days beyond the date, as long as they were stored at 40 degrees or below.

**If in doubt, throw it out!**

### General Food Guidance During a Power Outage

<table>
<thead>
<tr>
<th>Type of Food</th>
<th>Safe/Discard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beef, poultry, fish</td>
<td>Discard</td>
</tr>
<tr>
<td>Cheese, soft, shredded or low fat</td>
<td>Discard</td>
</tr>
<tr>
<td>Hard cheese or grated parmesan or Romano in a jar</td>
<td>Safe</td>
</tr>
<tr>
<td>Milk, yogurt, sour cream, buttermilk</td>
<td>Discard</td>
</tr>
<tr>
<td>Eggs, fresh, hard boiled, in custard</td>
<td>Discard</td>
</tr>
<tr>
<td>Fresh fruit, cut</td>
<td>Discard</td>
</tr>
<tr>
<td>Fresh fruit, fruit juices, coconut, dried fruit</td>
<td>Safe</td>
</tr>
<tr>
<td>Bread, muffins, pancakes, waffles, tortillas, bagels</td>
<td>Safe</td>
</tr>
<tr>
<td>Cooked pasta and rice</td>
<td>Discard</td>
</tr>
<tr>
<td>Raw vegetables</td>
<td>Safe</td>
</tr>
<tr>
<td>Cooked vegetables, baked potatoes, vegetable juice, tofu</td>
<td>Discard</td>
</tr>
<tr>
<td>Cheesecake, cream pies, cookie dough</td>
<td>Discard</td>
</tr>
</tbody>
</table>

Kim Kulp is a Registered Dietician in Marin.
Covid-19 and Long-term Care Facilities

By Girija Brilliant

In our new Covid-19 reality, I check the morning news and weather, and then go to the Marin Health and Human Services website to get the latest data on Covid-19. The numbers change from day to day, but one statistic is constant: the high percentage of Covid deaths in Marin from residents of long-term care facilities. That number has ranged from 82% to 88% of all Covid-19 deaths in the county.

This is the case in other states as well and nationally, residents of such facilities account for 60% of all Covid-19 related deaths. Locally, Marin has a variety of long-term care facilities including Residential Care Facilities for the Elderly (Assisted Living), Skilled Nursing Facilities (Nursing Homes), and other congregate living communities. Covid-19 deaths have occurred in all these settings which begs the question, why are there so many Covid-19 deaths in long-term care facilities?

For answers to this question, I reached out to Dan Steckline, program coordinator of Marin County’s Long-term Care Ombudsman Program, who provided the following possible explanations:

**Advanced age:** The Centers for Disease Control (CDC) has identified those age 85 and older as having the greatest risk for severe illness from Covid-19. Many residents in long-term care settings fall into this age category.

**Chronic medical conditions at any age:** The CDC has identified cancer, chronic kidney disease, COPD, heart conditions, compromised immune systems, obesity and type 2 diabetes as known risks for severe illness from Covid-19. Asthma, high blood pressure, dementia and liver disease are also possible risk factors. Residents in long-term care facilities are likely to either be of advanced age and/or have one or more underlying medical conditions that put them at risk of serious illness from Covid-19.

**Shared living spaces and caregivers:** Many long-term care residents live in close proximity to others. Nurses, therapists, hospice staff and personal care providers usually work with multiple residents and some work additional shifts in other facilities. This shared live/work environment poses a risk for the introduction and spread of Covid-19 to a vulnerable population without adequate infection control planning and execution.

**Covid-19 testing:** A big challenge with Covid-19 is that it can be transmitted by someone who is asymptomatic. Without frequent testing and quick test results, it can be difficult to know if Covid-19 is being spread before finding out many residents and staff have been infected.

Although the percentage of deaths due to Covid-19 in Marin County remains high in long-term care facilities, Steckline had some positive news to report. There is currently an adequate supply of PPE, facilities continue to receive information and training on Covid-19 prevention, mitigation best practices and the availability of testing and turnaround time for test results are improving. Governor Newsom recently announced the opening of a new testing laboratory which will increase Covid-19 testing capacity in California and reduce turnaround times for test results to better serve healthcare providers, essential workers and those living in long-term care and other congregate living communities.

Girija Brilliant is a commissioner from Mill Valley.
Book Review: Real Change
By Girija Brilliant

Sharon Salzberg is the American Buddhist teacher who first brought the practice of loving-kindness meditation to the West. She has taught for over 40 years and written many books, beginning with the seminal Loving Kindness. Her most recent book, Real Change, builds on her teachings to focus on the intersection of mindfulness and social action. She had written most of the book before the COVID-19 virus. In her introduction she notes, “In these times of great loss and uncertainty, we can each look for what can sustain, what can help provide assurance that something is intact.”

She teaches that meditation is not a substitute for action but rather a way to free ourselves from anxiety and fear, and have the energy to stay active and engaged in working for change and equity. Sharon interviewed activists and social change agents in a variety of fields for this book, and the pages are filled with quotes from them as they recount their challenges and what helped them overcome them.

She discusses in detail how anger can be transformed to courage. She points out that even righteous anger can exact a cost. It can move us to action but can also take over. “One of the issues of chronic anger is the narrowed vision it fosters. Can we recognize the best way forward when we are so enraged?” Her solution is to observe or witness our anger, not suppress it, but listen and pay attention. This listening has the potential to “become a source of great energy that can be directed towards change.”

The voices of those she’s interviewed speak powerfully in this book, as they add their experiences and their struggles to the conversation. Real Change is inspiring, clearly written and impactful. Sharon writes like a good friend giving wise advice.

Girija Brilliant is a commissioner from Mill Valley.

Three generations in Woodacre.
From right to left: 473-INFO unit supervisor (Chloe Cook), her daughter (Anne) and mother (Susan).
New Age-Forward Coordinator

By Amy Dietz

Sara Robinson is eager to take on the position as the County of Marin’s Age-Forward coordinator because it is an equity-focused collective effort among the County, the Board of Supervisors, the Commission on Aging, local municipalities and nonprofits, the leaders in the unincorporated areas and the community members.

The plan for creating an Age-Friendly County of Marin is a framework for establishing a universal practice of creating and adapting services, programs, policies, places and spaces to be livable for all ages. Such a practice involves weaving or embedding an “age-forward” approach to help the County advance a more equitable community for all residents across their lifespan.

County Administrator Matthew Hymel said that the Age-Forward framework is “making progressive enhancements to the ways we create and manage policies, how we interact and work together and how we envision an ideal future for a community that is experiencing a rapid growth rate among its oldest generations.”

After a career in strategic leadership, community building and program development in the private and nonprofit sectors, Robinson received a MS in Gerontology and began leading the Age-Friendly San Anselmo Committee, the Marin Age-Friendly Network and volunteering with Marin Villages.

"This position aligns with what I value as a gerontologist: connection in community and the creation of person-centered initiatives viewed through an equity lens. Ageism has received more public attention during the pandemic, along with racism and other forms of injustice and inequity. The solutions, improvements and policies that come from this framework, in conjunction with the County's complementary plans and efforts, will create a more equitable County," said Robinson.

Sara has begun meeting with County department heads and community leaders to implement this year's priority action items. They will determine what opportunities are available based on what efforts are already in motion.

Amy Dietz is a senior program coordinator for the AAA.

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Transportation in Marin

By Allan Bortel

Lost in the news about Covid-19, fires, elections, etc. were some important changes in Marin Access transportation age limits (changing to 65+), paratransit fares (raised to $3 per trip for local trips) and a broadening of transit opportunities for low-income riders.

Marin Transit formed Marin Access in 2010 to focus on the problems of transportation for anyone who cannot or chooses not to drive. The programs are funded by Marin County’s Measure B (a ballot measure passed in 2010). The various programs were developed by Marin Transit and are delivered by contractors including MV Transportation, West Marin Senior Services, and Whistlestop Wheels (a division of the nonprofit senior services provider newly named Vivalon). Measure B provides about $700,000 a year for seniors and disabled transportation needs, funded by a $10 vehicle registration fee paid to DMV each year.

At mid-year 2020 the local paratransit fares were increased from $2 to $3. A new low-income fare assistance program grants eligible clients $20 per month credit to use on local paratransit and the base $4 fare for the Catch-A-Ride taxi service. The latter program subsidizes up to $14 above the base $4 taxi fare. Volunteer driver program reimbursements were increased to 60 cents a mile.

In addition, the on-demand Connect service was added to the Uber app and the service area expanded from San Rafael to Novato and down to Corte Madera. Marin Access clients pay a flat fare of $3 per trip and general public riders pay a per mile fare. Vehicles are wheelchair accessible like on paratransit buses.

Until recently, due to differing eligibility requirements, each program required a separate application. Now applicants fill out a single form online for all Marin Access services. For more information, visit www.marinaccess.org, www.connect2transit.org or call 415-454-0902.

Allan Bortel is the senior senator in the California Senior Legislature (CSL) from Marin County.
Marin County’s Equity Priorities

By Brent Ainsworth and Amy Dietz

A recent statewide analysis from the Robert Wood Johnson Foundation ranked Marin as No. 1 among all 58 California counties for racial disparity. Overall, Marin is 85% white and one of the oldest (in terms of average resident age) counties in California.

Marin didn’t necessarily end up that way naturally. Government-endorsed redlining on maps prevented non-white people from securing loans, purchasing homes and building in certain neighborhoods. Over decades, unequal educational opportunities, unjust application of law enforcement, lack of access to healthcare, and inadequate access to healthy food, along with broad and overarching overt and covert racial discrimination, correlated with poor outcomes.

Although the practice of redlining was outlawed, its racial remnants are evident today. While racial and economic segregation are not unique to Marin, they perpetuate inequities for people of color by dictating where they can live and limiting long-term social and economic mobility.

Addressing the need for action, the Marin County Board of Supervisors defined equity as: “Just and fair inclusion in the County where all can participate, prosper, and reach their full potential. Equity efforts seek to rectify historic patterns of exclusion.” Aligning with these efforts, the Marin County Department of Health and Human Services (HHS) adopted a Strategic Plan to Achieve Health and Wellness Equity in 2018.

The plan identifies race and racism as a common factor driving health and wellness inequities. “When we lead with race we are acknowledging and confronting the policies, programs and practices that are critical to achieving not only an equitable county but society as a whole,” wrote former HHS director Dr. Grant Colfax.

Marin County’s equity officer, Anyania Muse, emphasizes that progress toward racial equity will catalyze progress in addressing other inequities. “Advancing racial equity requires expanding beyond program delivery to addressing underlying policies and barriers that create unfair systems for people of color and perpetuate inequities and disparities,” she said.

The Marin County Commission on Aging has made equity a priority by forming a new committee focused on equity, outreach and advocacy. A recent needs assessment conducted by the Area Agency on Aging found that people of color were more than twice as likely to be food insecure in comparison to white adults (21% vs. 8%) and that 19% felt that they were not respected as members of their community compared to 3% of white adults. With an emphasis on ensuring actions taken toward achieving equity relate to and impact older adults, the committee will explore ways and means to promote equity and racial justice and advocate for needed changes throughout Marin County. They will be working closely with Sara Robinson (see pg. 6) on the County’s Age-Forward plan, which includes many opportunities for equity.

“We must simultaneously address racial equity, anti-racism, and social justice. … this can be the tide that lifts all boats,” Muse said.

Brent Ainsworth is a public information specialist for the County of Marin. Amy Dietz is a senior program coordinator for the AAA.
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