



**Fact Friday: RSV, Flu & COVID-19 Impacts on Older Adults,
CDA Stakeholder Briefing with Dr. Tomás J. Aragón, Director of the California
Department of Public Health and State Public Health Officer**

December 2, 2022

09:28:14 GOOD GOOD MORNING, EVERYONE JUST LETTING YOU KNOW WE'RE WAITING A COUPLE OF MINUTES FOR FOLKS TO COME INTO THE ROOM SO WE'VE OPENED UP THE WEBINAR.

09:28:23 SO WE'LL JUST WAIT JUST ANOTHER MINUTE OR 2, FOR FOLKS SAYS THEY'RE STARTING TO COME IN BEFORE WE START THE WEBINAR PROMPTLY. AT 9 30

09:29:48 AND GOOD MORNING, EVERYONE. I JUST WANTED TO GIVE IT ANOTHER 30 S. AS WE SEE.

09:29:52 FOLKS ARE COMING INTO OUR WEBINAR

09:30:09 OKAY. WE'LL GO AHEAD AND GET STARTED. GOOD MORNING, EVERYONE AND HAPPY FRIDAY.

09:30:14 I'M CONNIE, NAKANO. I'M COMMUNICATIONS DIRECTOR FOR DEPARTMENT OF AGING
THANK YOU FOR JOINING US TODAY.

09:30:20 WE WILL BE COVERING RSV FLU AND COVID.

09:30:25 19 IMPACTS ON OLDER ADULTS. NEXT SLIDE, PLEASE. SO WE'VE GOT 30 MIN WITH EVERYONE TODAY.

09:30:32 AND WE'VE GOT A PACKED AGENDA NEXT SLIDE.

09:30:36 DON'T SEE IT FORWARDING BUT ON OUR AGENDA WE'RE GONNA GO THROUGH A QUICK INTRODUCTION.

09:30:40 YOU'LL HEAR. OH, SORRY LOGISTICS!

09:30:45 FIRST HOUSEKEEPING JUST WANTED TO REMIND EVERYONE PARTICIPANTS ARE ALL MUTED DURING THE WEBINAR.

09:30:50 WE DO HAVE CLOSED CAPTIONING AVAILABLE SO YOU CAN ACCESS THAT BY CLICKING ON THE ICON AT THE BOTTOM OF YOUR ZOOM SCREEN, AND ALSO THIS PRESENTATION WILL BE RECORDED, AND IT'S GOING TO BE OUR ARCHIVED ON OUR CDA YOUTUBE CHANNEL NEXT SCREEN, I BELIEVE NOW WE'RE ONTO THE AGENDA.

09:31:07 SO YOU'LL FIRST HEAR FROM OUR DIRECTOR SUSAN DE MAROIS.

09:31:10 THEN WE'LL GO. WE'LL HEAR SOME INFORMATION FROM DR.

09:31:15 TOMAS, ARAGON, AND THEN WE'LL GO OVER BRIEFLY ABOUT AN OUTREACH KIT THAT WE HAVE AS RESOURCES FOR EVERYONE THAT WE'D LIKE TO ASK FOR YOU TO SHARE OUT WITH THE CONSUMERS.

09:31:28 THAT YOU SERVE. SO LET'S GET TO OH, ARE WELCOME.

09:31:32 I'D LIKE TO INTRODUCE OUR DIRECTOR, SUSAN DE MAROIS

09:31:35 THANK YOU, CONNIE, AND GOOD MORNING AND WELCOME TO EVERYONE WHO'S JOINING US ON VERY SHORT.

09:31:41 NOTICE WE WE'RE SO THRILLED THAT WE ARE ABLE TO BRING THIS INFORMATION TO YOU AT THE START OF THE MONTH OF DECEMBER, WHEN WE KNOW THAT MANY OF YOU WILL BE GATHERING WITH FAMILIES AND FAMILY MEMBERS AND FRIENDS COLLEAGUES TO CELEBRATE AND SHARE FESTIVITIES RELIGIOUS

09:32:02 CULTURAL AND END OF YOUR EVENTS, AND IT'S VERY IMPORTANT THAT WE BRING TO YOU INFORMATION AS IT'S UNFOLDING IN OUR STATE AND ACROSS OUR NATURE. NATION.

09:32:12 WE ARE JUST HONORED TO HAVE WITH US TODAY. CALIFORNIA'S DIRECTOR OF PUBLIC HEALTH AND OUR SPACE.

09:32:18 CHIEF PUBLIC HEALTH OFFICER, DR. TOMAS, ARAGON, WHO WILL BE SHARING UP TO THE MINUTE INFORMATION WITH ALL OF US AS WE ENTER THE MONTH OF DECEMBER, AND WE MAINTAIN OUR OWN HEALTH AND SAFETY AND THAT OF ALL OF WE ALL WHO WE CARE FOR AND LOVE DR.

09:32:37 ARAGON WE TURN IT OVER TO YOU AND THANK YOU SO MUCH FOR MAKING YOURSELF AVAILABLE TO THIS THIS GROUP

09:32:45 THANK YOU. THANK YOU VERY MUCH. OKAY. I'M JUST. I HAD TO CHANGE THE SHADE BECAUSE I HAD THE SUN IN MY FACE.

09:32:53 I WANNA MAKE SURE THAT IT WASN'T DISTRACTING.

09:32:55 SO LET ME GO AHEAD. I'M GONNA PUT UP MY SLIDES AND THEN WE'LL GET STARTED

09:33:12 HEY? GOOD MORNING, EVERYONE THANK YOU FOR SPENDING ON THIS TIME WITH ME THIS MORNING TO GIVE YOU A LITTLE.

09:33:18 GIVE YOU AN UPDATE ON THE THE RESPIRATORY VIRUSES THAT ARE CIRCULATING.

09:33:24 THIS WILL HAVE A STRONG FOCUS ON COVID. I WILL MENTION RSV.

09:33:27 AND INFLUENZA AS WELL, BECAUSE THEY'RE ALL IMPACTING US.

09:33:31 AND IN FACT, AT THIS TIME OF YEAR WE HAVE ALL KINDS OF VIRUSES IMPACTING US.

09:33:36 WE TEND TO TALK ABOUT THE VIRUSES THAT WE CAN DO SOMETHING ABOUT.

09:33:40 BUT THE TRUTH IS IS THAT THERE'S A LOT OF VIRUSES THAT ARE CIRCULATING AT THIS TIME OF YEAR, IMPACTING ALL ALL AGES AND SO, BUT WE DO. WHAT WE DO KNOW IS THAT PEOPLE WHO ARE OLDER OR IMPACTED MORE THAN OTHER PHONES

09:33:56 I'M JUST GOING TO GIVE YOU. I'M GOING TO START BY JUST GIVING YOU SOME BRIEF BACKGROUND, BECAUSE YOU KNOW WE ARE.

09:34:03 WE ARE NOW, YOU KNOW WE'VE HAD THIS PANDEMIC SINCE JANUARY OF 20 OF 2,020 A LOT OF THINGS HAVE HAPPENED, AND JUST BY LOOKING BACK A LITTLE BIT IT HELPS US TO UNDERSTAND HOW WE CAN TAKE ALL THIS KNOWLEDGE WE HAVE LEARNED A TREMENDOUS AMOUNT.

09:34:20 ABOUT WHAT WE WHAT WE CAN DO TO PROTECT OURSELVES. SO THIS RIGHT HERE IS JUST THE CUMULATIVE MORTALITY RATE OR DEATH RATE FROM COVID, COMPARING DIFFERENT COUNTRIES ACROSS THE WORLD OKAY, AND WHAT YOU WILL SEE IS IS THAT THERE IS A BIG VARIABILITY.

09:34:42 IN THE CUMULATIVE DEATH RATE, AND YOU'LL SEE, FOR EXAMPLE, COUNTRIES LIKE SOUTH KOREA, JAPAN, SINGAPORE, AUSTRALIA, NEW ZEALAND, NEW ZEALAND.

09:34:52 THEY'VE DONE MUCH BETTER, MUCH BETTER THAN THESE OTHER COUNTRIES, AND AS YOU GO UP YOU'LL SEE THAT.

09:34:57 DO. THE UNITED STATES IS REALLY HAS AMONG THE HIGHEST CUMULATIVE MORTALITY, WHICH MEANS THAT WE CAN ACTUALLY DO BETTER AND THAT'S WHAT WE'RE GOING TO TALK ABOUT.

09:35:07 WHAT CAN WE DO BETTER? AND WE KNOW IT CAN MAKE A DIFFERENCE, BECAUSE THAT'S WHAT THE SLIDE IS TELLING US.

09:35:12 IT'S TELLING US THAT WE DO NOT HAVE TO HAVE THE MORBIDITY AND MORTALITY THAT'S IMPACTING THAT THAT THAT THAT OCCURS FROM FROM COVID THIS IS AN EXAMPLE HERE OF THOSE WHO HAVE COMPLETED THEIR PRIMARY SERIES FOR VACCINATION YOU'LL SEE IF YOU GO

09:35:32 IT'S HARD TO SEE. BUT THERE'S AN ORANGE LINE ON THE LEFT HAND SIDE.

09:35:37 THAT'S THE UNITED STATES. THE UNITED STATES STARTED OFF REALLY FAST.

09:35:43 BUT YOU'LL SEE ENDED UP REALLY NOT NOT DOING AS WELL AS OTHER AS OTHER COUNTRIES.

09:35:48 SO WE'RE ALSO BEHIND IN IN JUST JUST GETTING PEOPLE VACCINATED AS WELL.

09:35:54 AND THAT'S CONTRIBUTING TO THAT INCREASED INCREASE.

09:35:58 MORE INCREASED MORTALITY THAT I JUST SHOWED YOU IN THE OTHER SLIDE AND THAT'S ONE OF THE PRIMARY MESSAGES IS THAT THESE VACCINES WORK.

09:36:05 THEY SAVE LIVES AND ONE OF THE AND ONE OF EMPHASIZE AS WE GO THROUGH THE SLIDES.

09:36:09 IS THAT, HOWEVER UNFORTUNATELY, THIS VIRUS IS TRICKY. IT FIGURES OUT HOW TO EVADE OUR IMMUNE SYSTEM AND OUR IMMUNITY WANES, SO THE COMBINATION OF THOSE 2 THE WANING OF IMMUNITY AND THE VACCINE AND THE THE VIRUS, GETTING SMARTER MEANS THAT WE HAVE TO KEEP

09:36:26 OUR WE HAVE TO STAY UP TO DATE WITH OUR BOOSTERS, AND THERE WE'RE NOT DOING AS GOOD A JOB HERE.

09:36:34 IT IS AN EXAMPLE FOR BOOSTERS COMPARING THE UNITED STATES TO OTHER COUNTRIES, AND YOU'LL SEE THAT WE'RE AT.

09:36:39 WE'RE AT THE BOTTOM AGAIN, AN OPPORTUNITY FOR US AS A COUNTRY TO DO BETTER.

09:36:44 THIS IS FROM THE CDC. THIS IS I PULL THIS DOWN YESTERDAY, IN WHICH YOU CAN SEE HOSPITALIZATIONS ARE GOING UP ACROSS THE COUNTRY, AND THIS IS TRUE.

09:36:54 ALSO IN CALIFORNIA, RIGHT NOW HOSPITALIZATIONS ARE OUR BEST INDICATOR OF WHATSAPP, OF WHAT'S HAPPENING WITH COVID, BECAUSE IT'S INDICATOR THAT WE CAN MEASURE WITH A LOT OF PRECISION AND SO THAT'S ONE OF THE REASONS WHY WE'RE CONCERNED AND WE'RE BRINGING THIS UP NOW AND

09:37:13 YOU'LL SEE HOW WHAT THIS IS GOING TO MEAN FOR YOU.

09:37:16 NOW THE CDC HAS 2 DIFFERENT WAYS OF SHARING INFORMATION WITH US.

09:37:22 HOW MUCH COVID IS IN YOUR COMMUNITY. THE ONE ON THE LEFT HAND SIDE IS CALLED COMMUNITY LEVELS.

09:37:30 COMMUNITY LEVELS IS BASED PRIMARILY ON HOSPITALIZATIONS. IT GIVES A LOT OF WEIGHT TO HOSPITALIZATIONS, AND THEN SOME INFECTIONS ON THE RIGHT, ON THE RIGHT HAND SIDE IS COMMUNITY TRANSMISSION THAT FOCUSES ON TEST POSITIVITY AND AS WE AND ALSO CASE RATES NOW ONE OF THE CHALLENGES WE HAVE WITH

09:37:55 TEST POSITIVES THAT THAT WITH TEST POSITIVITY BUT ONE OF THE CHALLENGES WE HAVE WITH CASE RATES IS THAT WE KNOW IT'S AN UNDERESTIMATE BECAUSE A LOT OF PEOPLE ARE NOW DOING HOME TESTING SO THIS DOESN'T END UP IN OUR SURVEILLANCE SYSTEM SO WHATEVER AMOUNT.

09:38:10 OF WHATEVER CASE RATE WE ARE ABLE TO MEASURE THE ACTUAL TRANSMISSION INTO THE COMMUNITY IS PROBABLY AT LEAST 5 TIMES THAT SO WHEN YOU LOOK AT THIS CURVE, THE WAY THAT I THINK ABOUT IT IS THAT IF IT'S ORANGE IT'S PROBABLY REALLY RED IF IT'S YELLOW IT'S PROBABLY REALLY ORANGE IF

09:38:28 IT'S BLUE. IT'S PROBABLY REALLY YELLOW. BLUE IS THE BLUE, BLUE, BLUE IS THE BEST, SO YOU CAN SEE THAT THERE REALLY IS A LOT OF TRANSMISSION.

09:38:37 NOW THE HEALTHCARE SETTINGS THE HEALTHCARE SETTINGS, ARE THE ONES THAT FOCUS ON THE THE MAP ON THE RIGHT-HAND SIDE.

09:38:45 THAT'S WHY WE CONTINUE TO HAVE REQUIRED REQUEST.

09:38:49 MASKING IN HEALTH CARE, FACILITIES, AND IN SKILLED NURSING FACILITIES, AND IN OTHER HIGH-RISK SETTINGS.

09:38:54 IT'S BECAUSE OF THE IT'S BECAUSE OF THE MAP ON THE RIGHT-HAND SIDE.

09:38:58 THE GENERAL PUBLIC IS GENERALLY GOING TO BE LOOKING ON THE MAP ON THE ON THE LEFT HAND SIDE.

09:39:04 I'M SHOWING THIS TO YOU JUST TO EMPOWER YOU WITH THE INFORMATION SO THAT YOU CAN YOU CAN.

09:39:09 IT HELPS YOU SORT OF TO CONSUME THE INFORMATION, BECAUSE OTHERWISE YOU WILL BE GETTING THE FULL PICTURE.

09:39:15 SO THE LEFT HAND SIDE COMMUNITY LEVELS THAT THE CDC.

09:39:19 PUTS OUT PRIMARILY FOR THE PUBLIC, HOWEVER, HOWEVER, WAITED MORE TOWARDS HOSPITALIZATIONS.

09:39:26 THE RIGHT-HAND SIDE IS GEARED TOWARDS HIGH-RISK SETTINGS, FOCUSES ON TRANSMISSION TRANSMISSION ALWAYS PROCEEDS HOSPITALIZATIONS.

09:39:35 BETTER PREDICTOR OF WHAT'S HAPPENING IN YOUR COMMUNITY TAKE IT WITH A GRAIN OF SALT, BECAUSE WE KNOW THAT THE RATES ARE ACTUALLY HIGHER THAN WHAT SHOWS UP IN THE MAP.

09:39:42 SO THIS IS THIS IS THE BACKGROUND INFORMATION I'M GOING TO SIMPLIFY THIS ALL AT THE VERY END, WITH SOME KEY MESSAGES THAT I WANT YOU TO TAKE AWAY BUT I'M JUST GIVING YOU WE'RE GIVING YOU THIS AS BACKGROUND.

09:39:53 SO NOW IN CALIFORNIA WHAT YOU'LL SEE HERE ON THE RIGHT HAND SIDE IS SO TEST POSITIVITY IS ALMOST UP TO 11%.

09:40:00 SO THAT'S GETTING VERY HIGH. THERE'S A LOT OF. WE HAVE A LOT OF RISK IN THE COMMUNITY RIGHT NOW FOR TRANSMISSION OF OF A CO COVID AND OF COURSE THE CASES ARE GOING UP AS WELL, SO YOU YOU YOU CAN SEE THAT HERE IN OUR SUMMARY THAT WE HAVE FROM OUR STATE DASHBOARD

09:40:19 NOW THE WAY CALIFORNIA HAS DECIDED TO REALLY MANAGE MANAGE THE COVID INFECTION IS REALLY THROUGH THE CALIFORNIA SMARTER PLAN.

09:40:29 SO YOU'LL ALWAYS YOU'LL HEAR A LOT OF US TALKING ABOUT THE SMARTER PLAN.

09:40:34 WHAT'S GOOD ABOUT THE SMARTER PLAN? IT WAS DESIGNED REALLY, IN SUCH A WAY THAT IT REALLY INCORPORATES OUR THINKING AND STRATEGY AROUND OTHER RESPIRATORY VIRUSES, BECAUSE WE KNOW THAT THE WE KNOW THAT FOR EXAMPLE IN WINTER THE RISK IS HIGH FOR COVID BUT WE KNOW OTHER VIRUSES, ARE

09:40:52 CIRCULATING, AND I'LL SHOW YOU A LITTLE BIT LATER.

09:40:54 ALL OF THESE, ALL OF THESE REALLY COME TOGETHER TO NOT JUST ONLY DISRUPT OUR HEALTH, BUT ALSO TO IMPACT OUR HEALTHCARE SYSTEM.

09:41:00 SO THE SMARTER PLAN STANDS FOR S. STANDS FOR SHOTS, M FOR MASK, A FOR AWARENESS.

09:41:06 R. FOR READINESS T FOR TESTING E. FOR EDUCATION, WHICH IS OUR SCHOOL SYSTEM AND RX FOR TREATMENT.

09:41:14 I'M GOING TO. I'M GOING TO TOUCH UPON SOME.

09:41:16 I'M GONNA TOUCH UPON SOME OF THESE. GO INTO A LITTLE BIT MORE DETAIL AND JUST I JUST KNOW THAT THIS IS OUR GENERAL APPROACH, THAT WE'RE TAKING, AND AND IT INCORPORATES OUR THINKING ABOUT OTHER RESPIRATORY VIRUSES THAT ARE TRANSMITTED MORE OR LESS IN THE SAME WAY AS COVID THIS IS A

09:41:32 SLIDE FROM CMS THAT JUST HAS DEATHS FROM DEATHS AND CASES FROM NURSING HOMES.

09:41:40 SO NURSING HOMES, YOU CAN IMAGINE REALLY AS BEING OUR HIGHEST RISK, HIGH RISK SETTING WHERE YOU HAVE MUCH MORE OLDER ADULTS WITH PRE. PRE.

09:41:51 PRETTY PRETTY GOOD EXISTING CONDITIONS THAT PUT THEM AT HIGHER RISK FOR COVID.

09:41:56 SO YOU CAN SEE THAT OVER TIME WE HAVE MADE. WE HAVE MADE A BIG IMPROVEMENT.

09:42:00 SO IF YOU LOOK AT JANUARY, THE TWENTIETH 20 YOU SEE THERE WE HAD A LOT OF CASES, OF COURSE, LOT OF TRANSMISSION, AND WE HAD A LOT OF DEATHS THAT'S THE ORANGE LINE COME OVER TO APRIL THE TWENTIETH 22 LOT OF TRANSMISSION THAT

09:42:14 BIG PEAK IS THE OMICRON PEAK. BUT LOOK AT THE LOOK AT THE NUMBER OF DEBTS BY BY THEN.

09:42:19 NOW, THAT'S THE REASON THAT PEAK IS MUCH SMALLER THAN BEFORE, IS REALLY HAVING TO DO WITH VACCINE.

09:42:33 AND THUS RECOGNIZING THE AIRBORNE PATHWAY THAT COVET IS TRANSMITTED, YOU CAN SEE THAT THAT COVID.

09:42:36 I'M SORRY OMICRON CONTINUES TO CAUSE A LOT OF TRANSMISSION, BUT FORTUNATELY THE DEATH RATES ARE MUCH LOWER, AND WE WANT TO KEEP IT THIS WAY. THIS IS ONE.

09:42:44 THIS IS 1 ONE POPULATION THAT WE FOCUSED ON, BECAUSE WE KNOW THAT THAT'S ONE END OF THE SPECTRUM IN TERMS OF RISK.

09:42:50 AND WE'RE MORBIDITY AND MORTALITY. SO I'M GOING TO SHOW YOU A LITTLE BIT OF THAT DATA, JUST BECAUSE IT GIVES YOU AN IDEA OF HOW WE'RE DOING HERE IN CALIFORNIA.

09:42:59 SO THIS IS NOW COMPARING NURSING HOMES ACROSS THE COUNTRY.

09:43:03 YOU CAN SEE THERE FOR RESIDENTS WHO HAVE COMPLETED THEIR PRIMARY SERIES, AND IS ABOUT ALMOST 89 89%.

09:43:11 THAT'S THAT'S THAT'S OKAY. THAT'S GOOD.

09:43:14 THAT'S GOOD. THE THE CHALLENGE IS THAT WE NOW KNOW THAT YOU NEED BOOSTERS AND SO WHEN YOU LOOK AT BOOSTERS IT'S GONNA GO.

09:43:25 IT'S GONNA GO DOWN. SO THE HERE IS NOW LOOKING AT THE DATA OF BEING UP TO DATE.

09:43:29 THAT MEANS THAT IF YOU QUALIFY FOR BOOSTER, HAVE YOU GOTTEN A BOOSTER IT'S NOT AS GOOD.

09:43:34 IT'S 47%. SO A KEY MESSAGE HERE BASED ON WHAT I JUST SHOWED YOU IN TERMS OF THE DATA IS STAY UP TO DATE, STAY UP TO DATE WITH YOUR BOOSTERS.

09:43:45 IT ABSOLUTELY MAKES A DIFFERENCE. IT'S SO CRITICAL, SO CRITICAL.

09:43:50 THIS IS NOW FOR STAFF. YOU SEE THIS. THE STAFF ARE 95, 95%, AND ONE OF THE REASONS WHY CALIFORNIA IS SO HIGH IS BECAUSE WE HAVE REQUIREMENTS FOR VACCIN FOR VACCINATIONS.

09:44:03 AND HERE IT IS FOR BEING UP UP UP TO DATE.

09:44:06 SO OUR 53%. WE DON'T.

09:44:09 WE HAVE A RECORD. WE HAVE A REQUIREMENT THAT PEOPLE GET BOOSTED ONCE, BUT WE REALLY WANT PEOPLE TO BE UP TO DATE.

09:44:14 SO THAT EVEN THOUGH THEY'RE EVEN THOUGH THE REQUIREMENT ONLY REQUIRES YOU TO HAVE YOUR PRIMARY AND YOUR INITIAL BOOSTER THAT'S REQUIRED.

09:44:23 THE TRUTH IS IS THAT WE REALLY WANT YOU TO BE UP TO DATE.

09:44:27 THAT MEANS THAT WE WANT YOU TO GO AHEAD AND GET GET ANOTHER BOOSTER.

09:44:31 THE ONE THAT THES AVAILABLE NOW IS THE BIVALENT BOOSTER.

09:44:34 IF YOU HAVEN'T HAD IT. OKAY, I'M GONNA TALK A LITTLE BIT ABOUT, AND THIS APPLIES TO THIS APPLIES TO ALL RESPIRATORY VIRUSES, ESPECIALLY FOR COVID SO FOR FOR COVID THIS VIRUS.

09:44:48 IS AIRBORNE. THAT MEANS THAT IT LINGERS IN THE AIR, AND IT CONCENTRATES IN THE AIR, ESPECIALLY IN YOUR IN YOUR IN YOU'RE IN SETTINGS THAT DO NOT HAVE GOOD VENTILATION.

09:45:01 DO NOT HAVE GOOD AIR FILTRATION. AND SO THIS IS PROBABLY ONE OF THE BIGGEST CHALLENGES THAT WE HAVE, AND THE THING IS IS THAT YOU CAN'T.

09:45:11 YOU CANNOT SEE IT. IT'S IN OTHER WORDS, YOU CAN HAVE AN INFECTED PERSON IN THE ROOM THAT PERSON LEADS THE ROOM.

09:45:17 OTHER PEOPLE COME IN THE ROOM AND THEY CAN GET INFECTED.

09:45:21 IT DOESN'T MATTER IF THE PERSON IS NOT IN THE ROOM.

09:45:25 IT'S NOT ABOUT HOW CLOSE YOU ARE TO THE PERSON.

09:45:27 IT'S HOW MUCH VIRUS IS CONCENTRATED IN THE AIR.

09:45:30 SO THINK THAT THE WAY TO THINK ABOUT IT IS THINK ABOUT SMOKE.

09:45:34 IF YOU'RE IF YOU'RE IN A ROOM AND SOMEBODY'S SMOKING ACROSS THE ROOM, GUESS WHAT YOU CAN SMELL THAT SMOKE IF YOU CAN SMELL THAT SMOKE, THAT MEANS YOU'RE BREATHING AIR THAT WAS CLOSE TO THAT PERSON NOW IF YOU'RE NEXT TO THAT PERSON YOU'RE GONNA GET EXPOSED TO A HIGHER

09:45:49 CONCENTRATION OF THAT SMOKE. THAT'S EXACTLY THE WAY COVID IS TRANSMITTED.

09:45:54 PEOPLE WHO ARE CLOSER TO THAT PERSON IF THAT PERSON'S NOT WEARING A MASK, THAT PERSON IS PUTTING OUT MORE AEROSOLS PEOPLE CLOSER TO THAT PERSON IS, GOING TO GET ARE MORE LIKELY TO GET INFECTED PEOPLE FARTHER AWAY ARE GOING TO GET ARE LESS LIKELY TO GET INFECTED BECAUSE THERE'S SOME

09:46:08 DILUTION EFFECT. BUT AT THE END OF THE DAY, IF THAT ISN'T BEING DILUTED.

09:46:14 OPENING THE WINDOWS, KEEPING THE DOORS OPEN, MAKING SURE THAT PEOPLE PEOPLE ARE VERY WORRYING MASKS.

09:46:22 SO THEY'RE NOT. IF A PERSON'S INFECTED AND ASYMPTOMATIC, THE OTHER CHALLENGE THAT WE HAVE THIS IS ALSO TRUE FOR INFLUENZA.

09:46:28 PEOPLE BECOME PEOPLE BECOME INFECTIOUS BEFORE THEY DEVELOP SYMPTOMS, AND AND FOR COVID AT LEAST 2 DAYS BEFORE YOU DEVELOP SYMPTOMS.

09:46:37 YOU ARE REALLY HIGHLY INFECTIOUS, AND MOST PEOPLE DON'T EVEN DEVELOP SYMPTOMS.

09:46:43 SO THAT MEANS THE VAST MAJORITY OF TRANSMISSION IS HAPPENING WITH PEOPLE AT THE TIME.

09:46:47 THEY DO NOT HAVE SYMPTOMS, AND THAT'S WHY THAT'S WHY IT'S A WHEN YOU WEAR A MASK YOU'RE NOT JUST PROTECTING YOURSELF BUT YOU'RE ALSO PROTECTING OTHER BECAUSE YOU MIGHT HAVE COVID.

09:46:59 YOU MIGHT HAVE BEEN INFECTED AT A RECENT EVENT THAT YOU ATTENDED.

09:47:04 YOU FEEL PERFECTLY FINE AND YOU DON'T REALIZE THAT YOU'RE PUTTING OUT A LOT OF VIRUS, AND BY WEARING A MASK IN A HIGHER RISK SETTING YOU'RE PROTECTING THOSE YOU'RE PROTECTING THOSE OTHER OTHER OTHER FOLKS AS WELL, SO THIS IS REALLY AN IMPORTANT THING.

09:47:17 TO REALLY UNDERSTAND, AND IT APPLIES TO. IF YOU FOCUS ON COVID, IT WILL TAKE CARE OF THE ALL THE OTHER VIRUSES, BECAUSE COVID IS THE MOST INFECTIOUS. SO, IF YOU CAN.

09:47:27 IF YOU CAN REDUCE YOUR RISK OF COVID, YOU REDUCE YOUR RISK OF TRANSMITTING AND ACQUIRING OTHER RESPIRATORY VIRUSES LIKE INFLUENZA.

09:47:38 AND RSV. THAT ARE LESS INFECTIOUS, BUT NEVERTHELESS CAN MAKE YOU ILL.

09:47:43 AND THIS IS JUST A REMINDER TO THINK ABOUT THE FACILITIES THAT YOU THAT THE FACILITIES THAT YOU WORK IN, AND TO REALLY THINK THINK LIKE WHAT YOU KNOW WHEN I GO INTO A ROOM I ALWAYS THINK OKAY, ARE THEY LEAVING THE DOOR OPEN YES, LEAVE THE DOOR OPEN LET'S SOME AIR CODE LET SOME FRESH AIR IN

09:48:00 YOU KNOW. OFTENTIMES PEOPLE GET. WE'RE IN THE HABIT OF JUST CLOSED CLOSING EVERYBODY IN TO TRYING TO MAKE THE THE ENVIRONMENT MORE INTIMATE.

09:48:07 I WOULD SAY, KEEP THE DOORS OPEN, AND YOU KNOW WHAT LIP.

09:48:11 LET THE AIR, LET LET LET THE WHATEVER'S IN THE AIR, LET IT LET IT DILUTE.

09:48:16 THERE IS A RESEARCHER WHO SAYS: WHEN YOU THINK ABOUT WATER WITH WHEN WE THINK ABOUT PATHOGENS IN THE WATER, WE THINK ABOUT THE CONCENTRATION OF PATHOGEN THE WATER, AND WHAT DO WE DO WE DECREASE THE CONCENTRATION OF PATHOGENS IN THE WATER THROUGH DISINFECTION LIKE

09:48:34 CHLORINE. SO THEY SAY, WELL, IF WE DO IT FOR WATER, HOW CAN WE DON'T DO IT FOR AIR, AND IT'S ABSOLUTELY TRUE.

09:48:40 WE WANT IT. WE WANT TO THINK THAT WAY. WE DO WANT TO DECREASE THE CONCENTRATION OF PATHOGENS IN THE AIR, AND IT'S ACTUALLY GOOD IT'S ACTUALLY IN GENERAL GOOD FOR ALL OUR HEALTH BECAUSE THERE'S OTHER THINGS THAT CONSTRAINT IN THE AIR AS WELL, ESPECIALLY IN A LOT OF THESE BUILDINGS THAT

09:48:53 ARE SO AIRTIGHT, AND YOU HAVE THINGS THAT ARE COMING OFF OTHER THINGS THAT ARE CONCENTRATING IN IN IN BUILDINGS THAT HAVING TO DO WITH CHEMICALS

09:49:02 THIS IS THE THE USUAL CURVE THAT PEOPLE SHOW ABOUT THE THE VARIANCE, SO WE CONTINUE TO HAVE THEOMICRON VARIANT AND NOW, WE HAVE THE SUBVARIANCE AND THE SUBVIATE THE SUBVARIANT THAT'S NOW CIRCULATING THROUGHOUT THE UNITED STATES, AND PRIMARY AND IN CALIFORNIA IS WHAT'S CALLED THIS BQ ONE AND

09:49:21 BQ. 11. IT'S A SUBVARIANT OF THEOMICRONOMICRON.

09:49:28 IT IS JUST AS INFECTIOUS, SUPER SUPER INFECTIOUS, WITH MORE IMMUNIZATION BUT WE'RE GONNA HAVE TO SEE HOW THIS PLAYS OUT THE VACCINES WERE DESIGNED TO TAKE CARE OF THEOMICRON VARIANCE SO WE EXPECT GOOD COVERAGE WITH THE SUB VARIANCE LIKE BQ.

09:49:48 ONE, AND BQ. 1 1,

09:49:51 OKAY? SO? WHY DO WHY WHY DO I'M GONNA GIVE YOU A LITTLE BIT OF BACKGROUND AND A LITTLE BIT ABOUT WHY, IT'S IMPORTANT TO UNDERSTAND A OF HOW THESE VIRUSES WORK.

09:50:02 SO IN GENERAL, IF I WERE, IF I'M A VIRUS, I'M THINKING TO MYSELF WHAT DO I WANT TO DO?

09:50:07 I WANT TO INFECT SOMEBODY, SO I WANT TO BE MORE TRANSMISSIBLE.

09:50:11 OKAY. THAT'S GOING TO. IT'S GOING TO EVOLVE THROUGH THROUGH A TRANS. YOU KNOW, IT'S BECAUSE IT'S MUTATING THE THE STRAINS THAT GET SELECTED ARE GOING TO BE THOSE THAT HAVE AN ADVANTAGE IN TERMS OF BEING MORE TRANSMISSIBLE.

09:50:24 SO WE GET VARIANTS THAT ARE NOW MORE TRANSMISSIBLE IN GENERAL, A VIRUS, A VIRUS SAYS TO ITSELF: WELL, YOU KNOW WHAT I WANT TO MAKE PEOPLE SICK, BUT I DON'T WANT TO MAKE THEM TOO SICK BECAUSE THEY GET TOO SICK THEY'RE GONNA STAY HOME, AND OR THEY'RE GONNA DIE AND

09:50:38 THEY'RE NOT. THEY'RE NOT GONNA BE OUT TRANSMITTING, YOU KNOW, TRANSMITTING THE VIRUS SO THEY DON'T WANT TO MAKE PEOPLE TOO SICK.

09:50:44 SO IN GENERAL, THAT'S THAT'S TRUE FOR MOST VIRUSES.

09:50:47 THAT'S NOT TRUE FOR COVID. WHY IS THAT?

09:50:50 BECAUSE COVID IS TRANSMITTED PRIMARILY WHEN PEOPLE ARE ASYMPTOMATIC, SO COVID THE VIRUS COVID DOES NOT CARE IF IT MAKES YOU SICK, IT DOES NOT CARE IF IT KILLS YOU BECAUSE IT ITER, IT ALREADY HAS TRANSMITTED ITSELF TO PRIMARILY THROUGH PEOPLE WHO DO NOT

09:51:07 HAVE SYMPTOMS. SO THAT'S ACTUALLY NOT GOOD NEWS FOR US, BECAUSE THAT MEANS THERE'S ALWAYS A POSSIBILITY THAT WE CAN HAVE A NEW VARIANT THAT EMERGES THAT HAS MORE DISEASE. SEVERITY.

09:51:18 WE SAW THAT ALREADY, WITH THE ALPHA VARIANCE, AND THEN THE DELTA VARIANT THAT WERE MORE SO, THEY CAUSE MORE SEVERE DISEASE WITH ALL MACRON.

09:51:28 FORTUNATELY IT'S NOT CAUSING MORE SEVERE DISEASE, BUT IT IS SUPER INFECTIOUS, SO, AND IT AFFECTS SO MANY PEOPLE.

09:51:35 SO THAT'S HOW PEOPLE THAT'S HOW PEOPLE END UP IN THE HOSPITAL, NOT BECAUSE IT'S IT'S ONLY BECAUSE IT JUST INFECTS SO MANY PEOPLE THAT A FRACTION OF THOSE END UP IN THE HOSPITAL ARE HOSPITAL SYSTEMS END UP BEING OVERWHELMED SO I JUST MENTIONED A LITTLE BIT NOW ABOUT THE

09:51:51 VIRUS. I TALKED ABOUT INTRINSIC TRANSMISSIBILITY, IMMUNE ESCAPE WE'RE SEEING THAT WITH HOMEICRON IT WANTS TO GET AROUND THE DEFENSES THAT WE PUT UP VIRULENCE.

09:52:02 MEANS HOW SICK IT MAKES YOU. SO. I JUST FINISHED TALKING ABOUT THAT.

09:52:04 NOW US AS THE HOST. WHAT ARE THE WHAT ARE WE? WHAT ARE THE CHALLENGES THAT WE HAVE?

09:52:09 WELL, WE HAVE WANING IMMUNITY, YOUR IMMUNITY WANES WHETHER YOU GET WHETHER YOU WERE VACCINATED, OR WHETHER YOU RECOVERED FROM AN INFECTION.

09:52:19 SOCIAL BEHAVIORS WE'RE SPENDING A LOT MORE TIME.

09:52:21 WE'RE GOING BACK TO INDOOR ACTIVITY, SPENDING TIME WITH LOVED ONES ATTENDING BIG EVENTS, BASKETBALL GAMES, THINGS LIKE THAT WHICH IS, BY THE WAY, REALLY IMPORTANT.

09:52:31 SO IT'S REALLY IMPORTANT FOR US AS HUMANS TO REALLY BE CONNECTING SOCIALLY, THAT INCREASES THE RISK.

09:52:38 IT'S A TREND, BUT I'M JUST LETTING YOU KNOW THAT THAT'S JUST ONE OF THE THINGS THAT IMPACTS A RISK THE ENVIRONMENT.

09:52:43 THAT YOU'RE IN? IS IT AN INDOOR SETTING?

09:52:45 IS IT A PLACE AS WELL VENTILATED? AND THEN WHAT WHAT MEASURES DO YOU TAKE TO REDUCE THE RISK?

09:52:50 WHERE ARE YOU? A MASK VENTILATING THE PLACE, HAVING AN AIR CLEANER?

09:52:55 MY WIFE IS A SCHOOL TEACHER, YOU KNOW. LAST YEAR SHE WAS IN HIS CLASSROOM WITH FIRST GRADERS EVERY SINGLE DAY, AND IN THE ROOM SHE HAD AN AIR CLEANER TO KEEP TO BE

CLEANING THE AIR BECAUSE SHE HAD A ROOM PACT OF KIDS WHOM I KNOW I'M CONFIDENT SOME FRACTION OF HAD COVID

09:53:15 WHEN WHEN THEY WERE IN, WHEN THEY WERE IN THE CLASSROOM.

09:53:19 OKAY. SO THIS. NOW THIS THIS HERE IS SHOWS YOU HOSPITALIZATIONS AND THIS IS ONE OF THE THINGS THAT I WANT YOU TO READ, THOUGH PEOPLE DON'T REALIZE.

09:53:31 IS THAT SO? THOUGH THAT RED CURVE GOES RED CURVES ARE THE PROPORTION OF PEOPLE WHO TEST POSITIVE FOR COVID.

09:53:39 THE TOP LINE IS A TOTAL CENSUS FOR A HOSPITAL, AND YOU CAN SEE THAT THE TOTAL CENSUS IS OVER A 100% IN THE BAY AREA IN SACRAMENTO AND SAMOQUINE VALLEY AND IN SOUTHERN CALIFORNIA AND IF YOU LOOK AT THE RIGHT HAND RIGHT BOTTOM CURVE THAT'S FOR ALL OF

09:53:57 CALIFORNIA. YOU CAN SEE THAT WE'RE A HUNT OVER A 100% CENSUS.

09:54:02 SO WHAT AM I? WHAT IS THIS TO SAY IS THAT THE HOSPITALS RIGHT NOW ARE SUPER SUPER.

09:54:07 BUSY ESPECIALLY RIGHT. NOW, THE KIDS ARE THE PEDIATRIC.

09:54:12 THE KIDS ARE BEING IMPACTED BUT IT ALSO IMPACTS ADULT CARE WHEN THE HOSPITALS GET SO SO FULL THAT IT IMPACTS OUR ABILITY TO ACCESS CARE FOR OTHER CONDITIONS THAT YOU HAVE MIGHT BE A STROKE A HEART ATTACK.

09:54:23 IT BECOMES VERY DIFFICULT, BECAUSE THEY'RE THEIR CAPACITY IS FULL. IT'S HARD, AND IT'S HARD TO TRANSFER PATIENTS TO OTHER HOSPITALS, BECAUSE EVERYBODY'S FULL ON THAT BOTTOM RIGHT HAND.

09:54:34 YOU'LL SEE IT'S RED. THAT'S COVID.

09:54:35 YOU SEE, BLUE, THAT'S THAT'S INFLUENZA.

09:54:40 SO RIGHT NOW IN CALIFORNIA COVID IS GOING UP AND INFLUENZA'S GOING UP RSV.

09:54:50 WE DON'T HAVE AS GOOD DATA THAT IN GENERAL MIGHT BE LEVELING OFF RIGHT NOW PEAKING A LITTLE BIT IN IN GENERAL.

09:54:56 BUT RIGHT NOW FOR THE THE THINGS THAT WE'RE ABLE TO MEASURE AND DO THINGS ABOUT.

09:54:59 IT'S THOSE 2. OKAY. LET ME KEEP GOING. I'M GONNA GO A LITTLE FASTER BECAUSE I'M GONNA I'M GONNA TRY TO END. THIS.

09:55:05 THIS HERE IS JUST TO REMIND FOLKS THAT IS NOT ONE THING AT ONE THING, AND IT'S ONE INTERVENTION BY ITSELF.

09:55:12 IS NOT SUFFICIENT. THEY'RE NOT. EACH ONE IS NOT PERFECT.

09:55:17 IT'S PUTTING THESE TOGETHER TOGETHER THAT MAKES MAKES THE DIFFERENCE.

09:55:23 OKAY. I WANTED JUST TO LET PEOPLE KNOW. THE OTHER THING THAT WE'RE CONCERNED ABOUT IS LONG.

09:55:28 COVID. SO A SMALL PERCENTAGE OF PEOPLE WHO BECOME INFECTED, EVEN IF YOU HAVE MILE INFECTION, CAN GO ON TO DEVELOP LONG.

09:55:36 COVID, AND LONG, COVID, I'M GONNA SKIP TO THIS SLIDE.

09:55:39 HERE IS LONG. COVID. CAN IMPACT YOUR CARDIOVASCULAR SYSTEM AS WELL AS YOUR NEURAL LOGICAL SYSTEM, SO IT CAN MAKE PEOPLE HYPERCOAGULABLE.

09:55:50 SO YOU CAN HAVE HEART ATTACKS, YOU CAN HAVE STROKES.

09:55:53 WE HAVE PEOPLE HAVE BRAIN FOG, AND THE MORE SEVERE DISEASE THAT YOU HAVE, THE MORE LIKELY YOU ARE TO DEVELOP LONG COVID AND LONG COVID CAN OCCUR ANYWHERE WITHIN THE FIRST YEAR, AFTER HAVING BEEN INFECTED, SO YOU CAN HAVE A HEART ATTACK A YEAR LATER THAT'S RELATED TO THE COVID, THAT YOU

09:56:11 HAD A YEAR AGO. DOES THAT MAKE SENSE? THIS IS REALLY IMPORTANT FOR PEOPLE TO REALIZE, BECAUSE THEY THINK.

09:56:17 OH, I REQUIRE FROM COVID, AND A YEAR DOWN THE LINE.

09:56:20 THEY HAVE A HEART, ATTACK AND AND AND IT'S REALLY IT'S THE CODE, BECAUSE IT'S THIS: THIS VIRUS ATTACKS THE MANY DIFFERENT ORGANS SYSTEMS AND IT IMPACTS US IN A VERY PROFOUND WAY.

09:56:32 WAY. AND THIS IS REALLY IMPORTANT. THIS IS ANOTHER REASON WHY YOU DO NOT WANT TO GET INFECTED OKAY, I'M GONNA BE WRAPPING UP HERE.

09:56:39 I'M GONNA THIS IS ACTUALLY A SLIDE TO GIVE A LITTLE BIT OF OPTIMISM.

09:56:44 THIS IS THE CUMULATIVE DEATH RATE WHICH REMEMBER. I SHOWED YOU THE FIRST SLIDE WHERE THE UNITED STATES HAD THE HIGHEST CUMULATIVE DEATH.

09:56:49 WELL, THIS IS NOW THE CUMULATIVE DEATH RATE COMPARING CALIFORNIA TO THE CALIFORNIA TO THE MOST POPULAR STATES IN THE COUNTRY, AND YOU CAN SEE THAT CALIFORNIA IS IS DOING BETTER.

09:57:01 THAT'S FANTASTIC. AND THIS IS THIS IS THIS: IS REALLY IT.

09:57:06 WE HAVE TO GIVE THANKS AND GRATITUDE TO REALLY ALL CALIFORNIANS.

09:57:11 EVERYBODY PROVIDERS PEOPLE LIKE YOU WHO ARE WHO ARE TAKING CARE OF FOLKS AND HAVE COME TOGETHER SO THIS IS REALLY A COMMUNITY EFFORT OF US REALLY SLOWING DOWN TRANSMISSION AND AND IT HAD IT HAD A BIG IMPACT BECAUSE WHEN WE DELAY TRANSMISSION THAT BODICE TIME TO LEARN ABOUT HOW THE VIRUS IS

09:57:31 TRANSMITTED, BOUGHT US TIME TO DEVELOP VACCINES, BODICE, BODICE, TIME TO DEVELOP GOOD TREATMENT.

09:57:37 SO ALL THESE THINGS HELP SAVE LIVES. SO THAT'S WHY OUR CUMULATIVE MORTALITY IN CALIFORNIA IS LESS THAN OTHER STATES, AND THIS IS TRUE EVEN AFTER YOU ADJUST FOR AGE AS WELL, WE STILL END UP DOING.

09:57:47 BETTER. SO THIS IS THIS IS FANTASTIC. OKAY. WE'RE GOING DOWN TO THE LAST FEW SLIDES.

09:57:54 THIS CURVE HERE I PULLED DOWN FROM THE CDC TODAY YOU'LL SEE HERE.

09:57:58 IT IS RISK OR COVID INFECTION, HOSPITALIZATION AND DEATH BY AGE GROUP.

09:58:03 YOU SEE CASES IN THE FIRST ROW, HOSPITALIZATIONS IN THE SECOND ROW, DEPTH IN THE FOURTH ROW.

09:58:11 NOW, IF YOU JUST LET'S JUST LOOK AT DEATH IF YOU GO ACROSS YOU'LL SEE THE REFERENCE GROUP IS THE REFERENCE GROUP IS 18, TO 29 YEAR OLDS.

09:58:20 SO, IF YOU'RE IF YOU ARE 40 TO 49 YEAR OLD, YOU'RE 10 TIMES MORE LIKELY COMPARE TO SOMEBODY WHO'S 18 TO 29 YEAR OLD, 10 TIMES MORE LIKELY TO DIE OF COVID, IF YOU'RE 50 YEARS OLD, YOU'RE 25 MORE 25 TIMES MORE

09:58:40 LIKELY KEEP GOING UP IF YOU'RE GOING ALL THE WAY UP INTO THE SIXTIES.

09:58:44 SEVENTIES AND EIGHTIES. YOU SEE EIGHTIES. YOU'RE 340 TIMES MORE LIKELY TO DIE.

09:58:51 THIS IS ONE OF THE BOTTOM LINES THAT I WANT TO EMPHASIZE TO YOU THE STRONGEST PREDICTOR OF HOW A POOR OUTCOME AND THIS IS TRUE FOR COVID AND INFLUENZA IS YOUR AGE EVEN IF YOU EVEN IF YOUR OTHER EVEN IF YOUR HEALTHY, YOUR AGE IS THE STRONGEST PREDICTOR

09:59:10 THAT'S GOING IN CALIFORNIA. WE'RE ENCOURAGING PEOPLE.

09:59:13 EVERYONE WHO TEST POSITIVE SHOULD BE EVALUATED, WHETHER YOU NEED TREATMENT OR NOT, AND IN CALIFORNIA, YOU KNOW, WE RECOMMEND.

09:59:19 IF YOU'RE 50 YEARS OR OLD, YOU SHOULD ABSOLUTELY GET TREATED, TREATED FOR COVID, AND OF COURSE, IF YOU HAVE OTHER MEDICAL CONDITIONS THAT INCREASES YOUR RISK TOO ABSOLUTELY ABSOLUTELY BUT AGE.

09:59:33 IS THE BIGGEST PREDICTOR, BUT SUPER IMPORTANT, SUPER IMPORTANT TO KNOW.

09:59:37 LET'S JUST END UP NOW, HERE. SO HERE ARE 5 TIPS NUMBER ONE.

09:59:43 GET VACCINATED, STAY UP TO DATE, AND IF YOU TELL POSITIVE, PLEASE GET TREATED.

09:59:50 GET TREATED REALLY REALLY IMPORTANT. HAVE A TREATMENT PLAN. YOU SHOULD ALREADY BE TALKING TO YOUR PRIMARY CARE, DOCTOR.

09:59:57 THERE SHOULD BE A NOTE, AND YOU SHOULD ALREADY KNOW YOUR DOCTOR SHOULD ALREADY KNOW IF YOU TEST.

10:00:01 POSITIVE, WHETHER YOU'RE GOING TO GET TREATMENT. HAVE IT IN YOUR TREATMENT.

10:00:06 HAVE A TREATMENT PLAN AHEAD OF TIME TO FACILITATE MAKING SURE YOU GET ON TREATMENT BECAUSE YOU HAVE TO GET STARTED WITHIN 5 DAYS.

10:00:12 STAY HOME WITH YOUR SICK TEST FOR COVID. IF YOU'RE POSITIVE, GET EVALUATED FOR TREATMENT, ACTIVATE THAT TREATMENT PLAN WEAR A MASK WHEN I SAY WEAR A MASK, WOULD I REALLY MEAN IS WHERE A GOOD MASK A MASS THAT HAS GOOD FIT.

10:00:27 INFILTRATION, THE BEST ONES ARE GOING TO BE, N. 95.

10:00:31 THAT'S WHAT WE'RE REALLY MEAN. THAT'S WHAT WE WANT TO, OF COURSE, WASHING YOUR HANDS AND THAT'S ALWAYS TRUE, ESPECIALLY WITH THINGS LIKE RSV.

10:00:37 WHICH CAN BE TRANSMITTED A LOT THROUGH A CONTAMINATED SURFACES, AND OF COURSE COVER YOUR COUGH.

10:00:43 AND WHAT'S THE EASIEST WAY TO COVER YOUR COUGH IS TO WEAR A MASK.

10:00:47 SO ON OUR WEBSITE WE HAVE SOME RECOMMENDATIONS FOR HOW TO LOOK AT, HOW TO ADJUST, WEARING A MASK.

10:00:56 WHETHER DEPENDING ON THE COMMUNITY LEVELS THE WAY. TAKE WE, YOU CAN TAKE A LOOK AT THIS IN GENERAL.

10:01:04 THE WAY THAT I WANT YOU TO THINK ABOUT IT IS IS THAT IF YOU HAVE THE HIGHER THE RISK TAKE PRECAUTIONS, TAKE PRECAUTIONS TO HIGHER THE RISK, AND WHAT IS THE HIGHEST RISK AGE SO IF YOU'RE OLDER YOU SHOULD BE TAKING PRECAUTIONS, SO IF I'M IN A PUBLIC

10:01:22 I'M 63 YEARS OLD WHEN I GET ON THE AIRPLANE.

10:01:26 IF I'M IN PUBLIC TRANSPORTATION WHEN I GO TO THE GROCERY STORES I ALWAYS HAVE A I ALWAYS HAVE AN N 95.

10:01:32 THAT'S WHAT I WEAR. I DON'T CARE WHAT ANYBODY I DON'T CARE WHAT ANYBODY ELSE THINKS ABOUT ME.

10:01:37 I WANT TO PROTECT MYSELF AGAINST INFECTION. I WANT TO PROTECT MYSELF AGAINST LONG COD I WANT TO PROTECT MY WIFE AND CO-WORKERS, AND I WANT TO PROTECT MYSELF, AND SO THAT'S WHAT I DO AND SO THAT WAY, WHEN I DO GET TOGETHER WITH MY FAMILY.

10:01:51 YOU KNOW WHERE WE'RE WE? WE TRY TO REDUCE THE RISK WE WE'RE NOT WEARING MASKS IS FOR THE SPECIAL MOMENTS WHERE WE WANT IT.

10:01:57 WE WANT TO TAKE, BE ABLE TO, YOU KNOW NOT NOT NOT HAVE, MASS BECAUSE WE'VE REDUCED THE RISK AND SO THIS IS A WAY TO REALLY THINK ABOUT IT.

10:02:05 SO I'M GOING TO END THERE, AND AND THERE MIGHT BE TIME FOR A FEW QUESTIONS, OR I THINK WE'RE RUNNING OVER. THANK YOU.

10:02:16 THANK YOU. DR. OLIGON. THAT WAS VERY, VERY VALUABLE INFORMATION, AND I KNOW IT'S A LOT OF INFORMATION AND TOUGH TO GET IN SUCH A SHORT AMOUNT OF TIME.

10:02:24 WE ARE UP ON TIME SO I DON'T THINK WE HAVE TIME FOR Q.

10:02:28 A. BUT THEN THANK YOU FOR ALL THAT HAVE SUBMITTED SOME QUESTIONS THROUGH THE Q. A.

10:02:32 CHAT. IF YOU DO HAVE ADDITIONAL QUESTIONS, WE WELCOME YOU TO SEND IT TO US DIRECTLY, AND WE'LL GET THOSE ROUTED AND ANSWERED.

10:02:40 YOU CAN SEND IT DIRECTLY TO COMMUNICATIONS AT AGING. CA: A.

10:02:44 GOV: JUST REALLY QUICKLY BEFORE WE WRAP THE CALL. I KNOW WE'RE UP ON TIME, AND SOME FOLKS HAVE ALREADY LEFT, BUT WE'LL ALSO SEND OUT ANOTHER EMAIL WITH ALL THESE RESOURCES AND ALL THE LINKS AND INFORMATION AND ALSO THE SLIDE DECK AS WELL, WE'LL SHOW THAT OUT I WANTED TO GO OVER

10:02:59 REALLY QUICKLY WITH YOU GUYS OUR OUTREACH TOOLKIT THAT WE HAVE.

10:03:02 SO I'LL JUST SHARE MY SCREEN REALLY QUICKLY, SO I CAN SHOW YOU WHERE YOU CAN FIND IT ON OUR WEBSITE LET ME GET THE RIGHT SCREEN HERE

10:03:12 OOPS. OKAY. YOU CAN SEE MY SCREEN IF YOU GO TO DEPARTMENT OF AGING AGING.

10:03:18 DOT CA.GOV IF YOU SCROLL DOWN TO UNDER HIGHLIGHTS YOU'LL SEE IT, SAYS OUTREACH TOOLKIT RSV.

10:03:27 FLU: AND COVID-19 IMPACTS ON OLDER ADULTS.

10:03:30 IF YOU CLICK HERE, YOU WILL SEE THAT WE HAVE A TOOLKIT THAT HAS SOCIAL MEDIA POSTS.

10:03:37 IF YOU CLICK ON HERE YOU'LL SEE THERE'S IMAGES AND SOME SUGGESTED LANGUAGE THAT YOU CAN UTILIZE.

10:03:43 WE ALSO HAVE SOME INFORMATION. IF YOU SEND OUT NEWSLETTER ARTICLES OR RESOURCES THAT YOU WANT TO BE ABLE TO SEND OUT TO THOSE THAT YOU SERVE.

10:03:51 SO THERE'S SOME INFORMATION HERE, AND ALSO ADDITIONAL RESOURCES, AND ALSO HERE'S A LINK TO A RADIO SPOT THAT WE JUST CREATED.

10:04:00 IT'S A 15 S SPOT. SO IF YOU DO RUN YOUR OWN AD CAMPAIGN AS WELL, YOU CAN USE THAT 15, S, YOU CAN ADD YOUR OWN 15 AND MAKE A 30 S IF YOU RUN 30.

10:04:10 SECOND SPOT. SO THERE'S FLEXIBILITY WITH THAT SPOT AS WELL AND ALSO THERE'S ADDITIONAL RESOURCES HERE AS WELL FOR VACCINATIONS.

10:04:18 WE'VE HAD SOME DIRECT MAIL PIECES THAT HAVE GONE OUT.

10:04:22 ALL THESE ARE FREE TO REQUEST. IF YOU CLICK ON EACH ONE, YOU CAN SEE THAT YOU CAN DOWNLOAD THE FILE IF YOU'D LIKE TO PRINT IT.

10:04:33 SOME OF THEM ARE AVAILABLE. YOU CAN ORDER, AND YOU CAN DISTRIBUTE THEM AS WELL.

10:04:37 SAME WITH OUR AGING RESOURCE GUIDE. THIS IS AVAILABLE IN ENGLISH, CHINESE, VIETNAMESE, KOREAN, AND ALSO SPANISH.

10:04:44 THESE ARE ALSO AVAILABLE WHERE YOU CAN VIEW, ONLINE AND YOU CAN ALSO ORDER THEM IF YOU'D LIKE TO DISTRIBUTE THESE GUIDES AS WELL.

10:04:52 AGAIN, WE'D LIKE TO THANK EVERYONE TODAY FOR JOINING US.

10:04:55 WE KNOW WE'RE A LITTLE OVER ON TIME, BUT WE'LL SEND AN EMAIL OUT WITH ALL THESE RESOURCE LINKS ALL THE INFORMATION THAT WE'VE SHARED TODAY. THANK YOU.

10:05:03 TO OUR SPEAKER, DR. TOMAS, ARAGON. THANK YOU VERY MUCH FOR THE INFORMATION.

10:05:07 IT'S BEEN VERY VALUABLE TO OUR COMMUNITY. AND THANK YOU, SUSAN, AS WELL.

10:05:12 AGAIN. THIS WHOLE RECORDING EVERYTHING HAS BEEN RECORDED TODAY. SO IT'LL BE UP ON CDAS YOUTUBE. CHANNEL.

10:05:18 WE'LL SEND OUT ALL THE RESOURCE LINKS TO EVERYONE THAT HAS ATTENDED TODAY.