BOARD OF HEALTH COMMISSION Meeting Minutes December 14, 2021, 7:30 pm Conducted Remotely

Board members present: Chairperson Noel Chavez, Suzanne Feeney, Jennifer Fritz,

Wynne Lacey, Abigail Silva

Board members not present: Judy Ann Carter Trustee liaison not present: Susan Buchanan

Staff liaisons present: Theresa Chapple-McGruder, Cindy Hansen, Sara Semelka

- 1) Call to Order: The meeting was called to order by Chairperson Chavez at 7:30 pm.
- **2) Agenda Approval:** A motion was made and seconded to approve the agenda as presented.
- **3) Approval of Minutes:** With one minor correction to be made (MAPP instead of map), a motion was made and seconded to approve the minutes of the October 26, 2021 meeting.
- 4) Public Comment: Public comments are attached at the end of this document.
- 5) Old Business:

IPLAN Planning

Sara Semelka is our new health education manager who lives in Oak Park with her husband and kindergartener at Beye. She previously worked at the AIDS Foundation and helped create a statewide community needs assessment. Sara will lead the IPLAN process and provide updates and seek feedback from board members. We plan to finish our activities by mid-summer to write and submit the plan to IDPH soon after.

Board member Lacey asked if we were applying for a grant. Dr. Chapple replied that we were not able to apply for the grant due to dealing with COVID outbreaks. Regarding the rationale for including River Forest in our IPLAN, Dr. Chapple was provided context from core members that OPRF High School is impacted by the health-related decisions we make and therefore we include River Forest in the IPLAN. We have other services for seniors and youth with River Forest. We do not include other surrounding areas because we do not have formal processes with them.

Board Orientation: Role of Health Department

Dr. Chapple reminded board members of the 10 Essential Public Health Services document we discussed at the previous meeting. She asked board members to spend time reviewing it and we can meet to discuss what we do and where we have gaps. The CDC also has videos describing the 10 essential public health services.

Policy development and policy implementation are core functions of public health departments, meaning we are supposed to create mandates, have laws and code, and focus on enforcement as a part of the whole picture of public health.

Our national logo for public health created by NAACHO says we are to prevent negative health outcomes and preventable diseases, we are to promote positive health outcomes and positive health behavior, and we are to protect the health of that population. We protect and prevent through education and policies and ensuring there is good public health infrastructure to enforce the public health tools we have in place.

Board member Lacey questioned the same group creating and enforcing policies. Dr. Chapple said one of the essential services says create, champion, and implement policies, plans, and law, which is one function of policy development. Another function says utilize legal and regulatory actions, which is enforcement. For example, we develop a policy that a restaurant must have hot water. We go to restaurants, take their water temperature, and fine or close them if their temperature is not correct.

Public health is broad and we have major functions within one department. In creating, championing, and implementing policies, think about seatbelt laws and smoke-free buildings. We created and implemented policies and then we enforce them.

While public health has been doing this over the course of time, for many, exposure to public health is only recent with the pandemic and is not the full picture. They may think our role is to stop at education, but public health is about the health of the community and public as a whole, whereas individual health is the role of medicine.

Board member Lacey sought clarification of emergency powers. Dr. Chapple suggested the Village lawyer can explain the different codes specific to Oak Park. Paul Stephanides, Village Attorney, pstephanides@oak-park.us. Dr. Chapple noted there was discussion at a recent Village board meeting which is posted on the website.

Board member Lacey asked about the role of the health department for individuals adversely affected, such as people losing out on school or opportunities or being injured by vaccines or not being allowed to practice alternative medicine. Dr. Chapple responded that our role at open board meetings is to listen to public comments; it is not to address them. Chairperson Chavez added that we deal with populations and the whole community; not on an individual level. Board member Lacey asked where individuals affected by public policy should go for help. Chairperson Chavez suggested they share their concerns with policymakers.

Board member Feeney's understanding is that we make recommendations based on public health, with different options as part of those recommendations, and then schools or districts choose what to implement. Chairperson Chavez said the board is likely to suggest a recommendation to the director and the director develops the policy.

Two components of the 10 essential public health services are to communicate effectively to inform and educate and strengthen and support and mobilize community partnerships. Dr. Chapple's approach is to always start with a conversation with the organization impacted. She presents the information and they go through options together, taking into account logistical concerns and feasibility. She has not yet had to mandate, though she has authority to do so if a consensus cannot be reached.

6) New Business:

Staffing Update

Dr. Chapple reported that we are interviewing for a farmers' market manager, two public health nurses, two sanitarian positions, a grant coordinator, and epidemiologist.

We are also seeking two fellows:

- CSTE (Council for State and Territorial Epidemiologists). This person would also spend two years with us after going through a shorter training at the CDC.
- PHAP (Public Health Associate Program) from the CDC. This would be a master'strained person who spends a year in training at the CDC and then two years at a local or state health department to get practice-based experience.

We have been recruiting for the sanitarian positions for months and have no applicants. It would be very helpful for the board to help promote our positions posted on our website: https://www.oak-park.us/your-government/human-resources-department

COVID-19 Outbreak Mitigations

Dr. Chapple reported that in the past two weeks we have had more than 20 outbreaks at all levels of schools, long-term care facilities, and daycares. Due to an outbreak, Village Hall is closed to the public and to staff until after the new year.

We are working to put mitigations in place. Our resources are being overwhelmed, including our contact tracers. Most people with COVID have many close contacts because everything is open and people are taking fewer precautions.

Dr. Chapple said the board can help by getting messaging out about ways to reduce risk and exposure. Precautions still work, like social distancing and high-quality mask wearing. We are creating a document about ways people can be exposed that they may not think is risky, like carpooling, sleepovers, birthday parties, or sharing a cup. We need to return to simple messaging and use caution as we approach the holidays.

Board member Lacey asked what the goal of the health department is since you cannot stop the spread. Dr. Chapple responded that the goal with COVID is the same with all diseases, which is to prevent preventable illness and disease. Board member Lacey asked if there's so much more restriction and mandates, are you trying to decrease

hospitalization? Are you doing more for vulnerable people versus locking down healthy people? Dr. Chapple affirmed that we do more for high-risk people and best thing we can do for the community is to prevent the preventable virus.

Board member Lacey asked when this will become just part of life? How long is the plan to continue these excessive things? Is there a date or a measurement? As a mental health professional, she was told that the beds for people with suicidal ideation are full. Dr. Chapple gave the example of HIV—a pandemic that we dealt with for years and is still changing our practices. Asking when mitigations are going to end is not how we look at viruses; we look at ways to prevent preventable diseases, which can change as we go and learn more about them. Board member Lacey said she did not feel she was subject to restrictions and mandates and enforcements during the HIV pandemic.

Board member Lacey asked Dr. Chapple to be clear for those with kids who continue to test positive at school. Dr. Chapple clarified that if you test positive, the rule is that you don't retest for 90 days unless you have new symptoms, so no one should be continuously testing positive. Board member Lacey said her kids are testing twice a week and some of those kids testing positive will continue to test positive. Dr. Chapple clarified again that they don't test people who tested positive within 90 days unless they have new symptoms. She can clarify that with OPRF if that's not the case.

Board member Lacey asked how it's dealt with if they didn't test positive but they were quarantined by close contact and then it continues to happen. Dr. Chapple answered that if you are unvaccinated and you are continuously exposed, then you could continuously have to quarantine as a result of that exposure.

Board member Lacey asked if people have to wait forever and there is no end. Chairperson Chavez acknowledged that everyone wants COVID to end but that doesn't happen with viral diseases. Measles continued to be an issue until enough people were vaccinated and experts are interpreting that's likely to happen with COVID.

Board of Health Work Plan

Chairperson Chavez sent the work plan to board members and she does not recommend any changes at this point. She asked board members to review it and send any changes to her and she will forward it to the Board of Trustees.

Open Meetings Act

Dr. Chapple reminded board members that the Open Meetings Act precludes us from having discussions outside of the public's viewing or over email. We circulate the agenda in advance and can include topics you wish to be discussed.

Chairperson Chavez asked how many board members have done the training. Dr. Chapple responded that the state's website has been down and once it becomes available, Clerk Waters will send it to new board members.

Public Comments:

Gail Galivan:

I'm writing in behalf of anonymous Oak Park residents and in behalf of myself, an employee in Oak Park concerning unlawful and discriminatory mandates (there is no state of emergency) and unlawful and discriminatory quarantines, partially based upon false positive test results by forced discriminatory testing practices. Studies now show that the unvaccinated and the vaccinated carry equally carry transmissible viral load according to published research and acknowledged by Dr. Sanjay Gupta. Some parents wish to remain anonymous to avoid further discrimination, segregation, and child bullying. The issues addressed here are outlined below. Please respond in writing and thank you for your attention. And below the issues addressed are safety and efficacy, all cause mortality, vaccine immune escape, false positive test rates, not percentages because of increase in testing but with the increase of testing population, the rates of false positive are higher. Disclosure of quarantine details including type of positive test and cycle threshold if it's a PCR test. So there's a lot of unknown that people are being quarantined. We don't know exactly if the tests are accurate and these other issues. So below this I suggest that we have a follow-up to this forum and go deeper into these issues. And I'm suggesting that municipalities risk liability under federal law and making decisions that cause coercion of medical interventions, especially of not taking into consideration vaccine immune escape and safety and efficacy issues, VAERS data with disability and death, including myocarditis in young adults where there's no such thing as a mild case. I have included links so that this information can be presented through the expertise of Dr. James Lyons-Weiler.

Dory Rodriguez:

Hello, I'm an Oak Park resident. We have family of kids in D200 and D297. And you know, the mitigation policy to remove unvaccinated students from class at the high school due to close exposure, not infection, is discrimination. If you look at the Oak Park High School website, I included the link in my email, there are 88 students out on quarantine due to close contact. These are those that are not vaccinated. It is finals week. They have very little to no support depending on who their counselors are and how they've coordinated with the teachers. These kids and their families are struggling. The vaccinated students with close contacts are not guarantined even though it is a fact that COVID vaccines do not stop transmission or infection. If you look on that data on the Oak Park River Forest High School website, 81% of cases that have occurred are vaccinated. Again I included the snippet of that in the email. I also included the executive order by Governor Pritzker that was submitted on September 21st. The executive order is lengthy. It's four pages. I included a few highlighted items that I would question the Oak Park Department of Health why we are not following these mitigations. Number one, CDC's close contact definition excludes students who are within three feet of an infected student, laboratory confirmed or clinically compatible illness, if both the infected student and the exposed students correctly and consistently wore well-fitting

masks the entire time. Another point, the term close contact does not include a student who was in three to six feet of a confirmed or probable case in a classroom setting if both confirmed case or probable case and close contact were consistently masked for the entire exposure period. Close contact does not include individuals who are fully vaccinated or who tested positive for COVID within the prior 90 days and are currently asymptomatic. Another point, confirmed case or probable case for a minimum of 10 days following onset date of symptomatic or date positive of test. So I included a few other snippets from there. I know I only have one minute left. The other point I made in the email to your board, I think it's time that we recognize naturally acquired immunity. We have a lot of people in our community that have had COVID; they had it before vaccines were available. We can prove immunity through blood test; we can show IGG antibodies. These kids and community members that have this proof I believe should be entitled. We know for a fact now that naturally acquired immunity is durable and it's long lasting. I believe we are teaching our kids to fear viruses and the only way to health is medical intervention and that's simply not true. Thank you for your time.

Kristi Murray:

A parent in District 97 and OPRF High School. My letter is stating my concern and frustration with the policies enacted by the Oak Park School District, Oak Park and River Forest High School, and the Oak Park Health Department in regards to the ongoing guarantine protocols for healthy children. My child has been guarantined while healthy and has suffered from low grades, missing work, and teacher unwillingness to open her Zoom or post assignments on their pages. He returned to school with a ridiculous amount of work and a lack of school support with one teacher commentating on how often he was absent, which of course is the school's doing. With the help of an out-of-district tutor and a lot of parent support, we're hoping he will pass his classes. I know of families whose children who have been guarantined two times or more. I can't imagine how this is affecting them when it's only happened to us once and how we experienced it. This is detrimental to their educational experience and success. I'm quoting District 97 equity policy, at the very beginning of the statement: It is the right for every student to have an excellent and equitable educational experience. District 97 is committed to racial equity, the success of every student, and to achieving our mission of creating a positive learning environment for all students that is equitable, inclusive, and focused on the whole child. Quarantining healthy children outwardly presents them to the community as unvaccinated and therefore are bullied, ostracized, and discriminated against, and of course are therefore segregated for their or their parents' beliefs or medical decisions. You are creating an exclusive and unsafe learning environment for all. The window to the classroom Zoom plan used by the high school and the middle school and the elementary school is not focused on the whole child. It is not a substitute of classroom learning. The collaboration, communication, and social engagement that happens in the classroom is lost. I'm also adding that I'm a District 97 teacher so I see this on the other end. Here are some easy solutions to keep everyone safe. If a student actually has COVID, then send them home with Zoom as their best option. Close contacts should be tested and can be done every few days, as done in other districts in

which you test in. If they are negative, the student should stay in school. If they are positive, again sent home to Zoom. To that end, if a student shows a negative PCR test, proving the rapid test false, they should be able to test back in. While my arguments are related to the schools, they are following your protocols that are not in line with schools around us or around the country. Let's work at keeping our healthy kids in school. Thank you.

N. Pruszynski:

I am an Oak Park resident and mother to children in both D97 and D200 OPRD High School. The IDPH/ISBE have issued guidelines for a test-to-stay program that allows close contact exposures to test on days one, three, five, and seven and remain in school when they test negative with minimal disruptions to their school schedule. I would like clarification as to why Oak Park's own health department is not using this protocol. Instead, all students (regardless of their antibody or negative test status) are excluded until day 11 after exposure. This is blatantly discriminatory and punitive. It does not take into account the mental health and well-being of our students. Illinois has put in place measures to ensure our students are able to safely stay in school. Why is Oak Park opting not to use these measures? Thank you, N. Pruszynski, BSN.

Test-to-stay protocol: ISBE and IDPH now allow a strategy for close contacts to remain in school following exposure to COVID-19 through a test-to-stay protocol, as has been documented by the CDC. Following any indoor exposures (with the exception of household exposures), if schools test close contacts on days one, three, five, and seven from date of exposure with an NAAT (such as a PCR test) or rapid antigen test with emergency use authorization by the FDA, close contacts who were masked during the entire exposure are permitted to remain in the classroom as long as the results are negative. Rapid antigen testing (e.g. Binax Now) may be most appropriate for tests to stay given the short turnaround time for results. Testing must be conducted in school and preferably should be performed at the start of the school day before entering the classroom. If the close contact is identified five days or more from the date of exposure, adjust testing accordingly, ideally on days five and seven after the last exposure. When testing in the outline cadence is not possible due to weekends and holidays, students and staff who are not fully vaccinated should be tested at the earliest possible opportunity. Test-to-stay is only applicable when both the COVID-19 confirmed case and close contact were engaged in consistent and correct use of well-fitting masks, regardless of vaccination status (universal masking), as required by executive order 2021-18.