

# ATTACHMENT

For Item

# #21

Tuesday,  
August 16, 2022

**PUBLIC COMMUNICATION RECEIVED BY THE  
CLERK OF THE BOARD**

DISTRIBUTED 08/12/2022

**From:** [Potter, Andrew](#)  
**To:** [FGG, Public Comment](#)  
**Subject:** FW: [External] End School Mask Mandates  
**Date:** Friday, August 12, 2022 1:45:43 PM

---

**From:** C English Bensch <angeldr3@att.net>

**Sent:** Friday, August 12, 2022 1:38 PM

**To:** Fletcher, Nathan (BOS) <Nathan.Fletcher@sdcounty.ca.gov>

**Cc:** Potter, Andrew <Andrew.Potter@sdcounty.ca.gov>; BOS, District1Community <District1Community@sdcounty.ca.gov>; Anderson, Joel <Joel.Anderson@sdcounty.ca.gov>; Lawson-Remer, Terra <Terra.Lawson-Remer@sdcounty.ca.gov>; Desmond, Jim <Jim.Desmond@sdcounty.ca.gov>

**Subject:** [External] End School Mask Mandates

COVID IS A COLD

THE CDC RELEASED THE FOLLOWING STATEMENT AND IT HAS BEEN ON YOUR PROPAGANDA NEWSITES



## New COVID-19 guidance from CDC focuses on individual decisions

- Those exposed to the virus are no longer required to quarantine.
- Unvaccinated people now have the same guidance as vaccinated people.
- Students can stay in class after being exposed to the virus.
- It's no longer recommended to screen those without symptoms.

August 11, 2022

PS Nathan, Monkey Pox is not deadly. Also according to everyone, except you, it is a sexually transmitted disease predominantly amongst male homosexuals.

Christy English Bensch

760.877.3351

[Angeldr3@att.net](mailto:Angeldr3@att.net)

[Sent from AT&T Yahoo Mail on Android](#)

**From:** [Gretchen Goel](#)  
**To:** [FGG, Public Comment](#)  
**Cc:** [Diane Ake](#)  
**Subject:** [External] Comment to include with next week's Agenda  
**Date:** Friday, August 12, 2022 4:25:44 PM

---

Dear San Diego County Board of Supervisors,

I have been given permission by Kristie Sepulveda-Burchit of Educate Advocate California to forward this informational message to you.

On August 11th, 2022, the CDC updated their guidance. This update causes our state and therefore our county to be in conflict at various facilities including our schools and hospitals.

School employees (including volunteers) are currently under a Vaccine Verification for School Workers state order <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Vaccine-Verification-for-Workers-in-Schools.aspx> which requires them to show proof of COVID vaccine or COVID test weekly (implemented October 15).

The CDC does not recommend screening testing in the educational environment. And if an educational setting plans to test they need to test both unvaccinated and vaccinated.

"Screening Testing

[Screening testing](#) identifies people with COVID-19 who do not have symptoms or known or suspected exposures, so that steps can be taken to prevent further spread of COVID-19.

### **CDC no longer recommends routine screening testing in K-12**

**schools.** However, at a high COVID-19 Community Level, K-12 schools and ECE programs can consider implementing screening testing for students and staff for high-risk activities (for example, close contact sports, band, choir, theater); at key times in the year, for example before/after large events (such as prom, tournaments, group travel); and when returning from breaks (such as, holidays, spring break, at the beginning of the school year). **In any screening testing program, testing should include both vaccinated and unvaccinated people.** Schools serving students who are at risk for getting very sick with COVID-19, such as those with moderate or severe immunocompromise or complex medical conditions, can consider implementing screening testing at a medium or high COVID-19 Community Level. The type of [viral test](#) used can vary and includes over the counter or [at-home testing](#) (self-testing), [point-of-care](#) rapid testing, or laboratory testing. Schools and ECE programs that choose to rely on at-home test kits for screening testing should ensure equal access and availability to the tests; establish accessible systems that are in place for ensuring timely reporting of positive results to the school or ECE program; and communicate with families the importance of following [isolation guidance](#) for anyone who tests positive. Communication strategies should take into account the needs of

people with limited English proficiency who require language services, and individuals with disabilities who require accessible formats.

Screening testing should be done in a way that ensures the ability to maintain confidentiality of results and protect privacy. Consistent with state legal requirements and [Family Educational Rights and Privacy Act \(FERPA\)](#), K-12 schools and ECE programs should obtain parental consent for minor students and assent/consent from students themselves, when applicable."



<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-childcare-guidance.html>

The updated guidance also states that only certain high-risk congregate settings should consider testing and this did not include hospitals. Therefore this state order titled Requirements for Visitors in Acute Health Care and Long-Term Care Settings is also in conflict with CDC

guidelines <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Requirements-for-Visitors-in-Acute-Health-Care-and-Long-Term-Care-Settings.aspx>

**"Testing for current infection.** Diagnostic testing can identify infections early so that infected persons can take action to reduce their risk for transmitting virus and receive treatment, if clinically indicated, to reduce their risk for severe illness and death. All persons should seek testing for active infection when they are symptomatic or if they have a known or suspected exposure to someone with COVID-19. **When considering whether and where to implement screening testing of asymptomatic persons with no known exposure, public health officials might consider prioritizing high-risk congregate settings, such as long-term care facilities, homeless shelters, and correctional facilities, and workplace settings that include congregate housing with limited access to medical care.**<sup>§§§</sup> In these types of high-risk congregate settings, screening testing might complement diagnostic testing of symptomatic persons by identifying asymptomatic infected persons (18,19). **When implemented, screening testing strategies should include all persons, irrespective of vaccination status.** Screening testing might not be cost-effective in general community settings, especially if COVID-19 prevalence is low (20,21)."

[https://www.cdc.gov/mmwr/volumes/71/wr/mm7133e1.htm?s\\_cid=mm7133e1\\_w](https://www.cdc.gov/mmwr/volumes/71/wr/mm7133e1.htm?s_cid=mm7133e1_w)

There certainly may be others.

I am writing to ask in your capacity as a Board of Supervisors member and in your capacity as local public health executive team that you advocate for our county with the state (CDPH and Governor Newsom) to immediately terminate these two state orders (possibly others) that are now in direct conflict with CDC guidance.

Thank you and I look forward to the fruits of your advocacy on behalf of the county residents you serve.

**Gretchen Goel**