

NEVADA STATE PUBLIC CHARTER SCHOOL AUTHORITY

July 30, 2021

The State Public Charter School Authority Board Meeting was conducted virtually and at the following physical

location: Nevada Department of Education 2080 East Flamingo Road Board Room Las Vegas, Nevada

MINUTES OF THE MEETING

BOARD MEMBERS PRESENT IN-PERSON:

Member Erica Mosca Member Randy Kirner Member Mallory Cyr Vice Chair Sheila Moulton

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BOARD MEMBERS PRESENT VIRTUALLY:

Chair Melissa Mackedon Member Tonia Holmes-Sutton Member Lee Farris Member Sami Randolph Member Tamika Shauntee Rosales

BOARD MEMBERS ABSENT:

Member Don Soifer

AUDIENCE IN ATTENDANCE:

Kristine Burgess Jim Friedel Holly Stevenson Ashley Wilkinson Patricia Fernandez Eve Breier Jennifer McCloskey Rodney Saunders Jackie Working Tricia Wilbourne Jessica LeNeave Renee Fairless

AUTHORITY STAFF IN-PERSON: Rebecca Feiden, Executive Director Mark Modrcin, Director of Authorizing

AUTHORITY STAFF PRESENT VIRTUALLY:

Ryan Herrick, General Counsel Danny Peltier, Management Analyst I

Agenda Item 1 – Call to Order and Roll Call, and Pledge of Allegiance [00:00:47]

State Public Charter School Authority (SPCSA), Board Chair, Melissa Mackedon called the meeting to order at 9:01am, with attendance reflected above and Vice Chair Moulton facilitated the pledge of allegiance.

Agenda Item 2 – Public Comment #1 [00:02:33]

Ryan Herrick, General Counsel, said they received 6 written public comments (attached hereto). All are related to mask mandates in schools and imploring the Authority to not impose any mask requirements on students and schools. He noted that any mask mandates related to schools have always come from the Governor's office and not the Authority.

Public comment on the line:

- 1. Victor Salcido, Charter School Association of Nevada (CSAN), spoke about the newsletter from CSAN and reiterated the item related to the concerning federal action that would affect charter schools. He also flagged that CSAN is planning a seminar on September 24th at CIVICA Academy, and they are looking for presenters from charter schools in terms of best practices.
- 2. Anonymous, regarding agenda item 5 and the virtual learning component.
- 3. Anonymous with Coral Academy Eastgate, regarding agenda item 5 and the virtual learning component.
- 4. Anonymous, regarding agenda item 5 and the virtual learning component.

Public comment in the Las Vegas Board Room:

- 5. Ashley Wilkinson, parent of students in this district, related to mandated masks.
- 6. Gavin, child of Ms. Wilkinson, related to mandated masks
- 7. Riley, child of Ms. Wilkinson, related to mandated masks
- 8. Kristine Burgess, parent at Doral Academy Saddle, regarding mandated masks
- 9. Jim Friedel, parent of students at Pinecrest Academy Horizon
- 10. Holly Stevenson, parent of children at charter schools, related to mandated masks.

Agenda Item 3 – Consent Agenda [00:27:30]

a. Approval of June 25, 2021 Board Meeting Action Minutes.

Member Kirner abstained from the minutes as he was not present at the June 25, 2021 board meeting.

MOTION: Vice Chair Moulton made the motion to approve the June 25, 2021 minutes. Member Holmes-Sutton seconded the motion. The motion carried.

b. Equipo Academy Adjustment to Renewed Charter Contract [00:28:42] – request to adjust their enrollment cap in the Equipo Academy charter contract from 750 to 756 for each year of the current charter term.

c. Charter School Contract Amendment Applications:

- Mater Academy of Las Vegas changes to the mission and vision statements
- Mater Academy of Northern Nevada changes to the mission and vision statements
- Doral Academy of Nevada addition of dual credit (with conditions)

MOTION: Member Kirner made a motion to approve items b and c. Vice Chair Moulton seconded the motion. The motion carried unanimously.

Agenda Item 4 – SPCSA Executive Director's Report. [00:29:27]

a. Initiatives related to Serving All Students Equitably

Rebecca Feiden, Executive Director, said within the materials for today's meeting is the <u>update</u> for this item. This year they've taken several steps including updating their site evaluation protocol to ensure more representative focus groups and to include a component in the school presentation where schools share information regarding culturally responsive practices. They've also updated their new school amendment and renewal applications to

dig into efforts to close opportunity gaps, address disproportionate discipline practices, implement restorative justice practices, incorporate parent and community engagement, conduct staff training on diversity, equity and inclusion, as well as efforts to serve a representative population of students. Throughout the year they've looked at a range of data disaggregated by student group to better understand the performance and experiences of all of their students. They've heard from numerous schools about their efforts to elevate their focus on equity and through their community working group they continue to get input and feedback on how they can continue to increase equitable access to high quality public charter schools. Through the SPCSA's Project Aware grant, they will be providing access to a range of trainings over the coming year on diversity, equity and inclusion but also on related topics such as restorative justice practices, such as social and emotional learning and trauma informed care and instruction. Staff has also made several updates to the SPCSA website to make information more accessible. Executive Director Feiden said she has engaged directly with the school board chairs in writing and through focus groups to discuss how they can continue to elevate their focus on equity. As they look ahead, many of these efforts will continue and they are continuously looking for input and feedback. She paused to take any questions or recommendations looking ahead.

Member Randolph asked about the focus on schools items and if they will continue to hear directly from school leaders. Executive Director Feiden said she has not yet reached out to schools but intends to continue to hear from schools on this topic.

b. Summer cycle for new charter school applications [00:33:43]

Executive Director Feiden said the SPCSA is in receipt of 9 complete applications and have initiated the review process. The applications will be posted to their website next week and they are looking towards the November board meeting for potential board consideration. A list of applicants can be found alongside the materials for this meeting.

c. SPCSA staff and Authority board member update [00:34:14]

Executive Director Feiden welcomed the new board member on the Authority, Erica Mosca. Member Mosca said she is a previous CCSD teacher and has worked in policy and started a nonprofit a decade ago that supports students to be the first in their families to graduate from college but more importantly come back to our community as leaders. As a first-generation college graduate herself and someone that understands the importance of equitable education, she is excited to be a part of the board and push their vision and the strategic plan forward. Executive Director Feiden noted as staff knows, Member Kirner has not been reappointed but has graciously agreed to continue serving until they receive appointment of a new board member.

d. SPCSA Annual Initiatives for the 2021-22 school year [00:35:54]

Executive Director Feiden said SPCSA strategic plan was adopted in December of 2019 and last year staff took initiatives to further their strategic priorities. This included implementing a new based grant monitoring approach. They've wrapped up the first year and are making some improvements as they move to year 2. They also developed annual performance reports and these are now posted to their website and are aimed to be public friendly reports on academic, financial, and organizational performance and these will be updated annually. They have also completed the work of transforming their initial growth management plan working group into an ongoing community working group and are looking forward to continuing their engagement with this stakeholder group. Staff has conducted and developed base line training for new schools and new school staff to ensure they have foundational knowledge to be set up for success on topics such as federal grants and performance expectations and they have continued to evolve their site evaluations to formalize a differentiated approach to following up on and supporting their schools even in years outside of their formal site evaluation. She took a moment to thank staff.

This year, staff has decided to take a narrow but deep approach in taking on 2 substantial initiatives. First, they will be reevaluating and retooling their process and systems for collecting data, information, and reports, and disseminating data, information, and reports to meet statutory requirements as a charter school sponsor and

location educational agency. With the growth of the SPCSA's portfolio, as well as various changes to statutes and regulations, they have simply outgrown their current processes and systems and they know that this has caused some confusion and frustration amongst their schools, and they know their internal systems are not as efficient and effective as they could be. Their aim, and it may be multiple years before they reach this reality, is to ensure they have a clear consistent documentation on reporting requirements, including templates, resources, and rubrics needed to ensure consistent communication regarding compliance and reporting requirements and they want to make sure they have a user friendly, intuitive, and efficient process and software for soliciting, collecting, reviewing, approving, and accepting all of these documents. They have called this initiative Annual Reporting and Document Management.

Their second initiative they call the Library of Resources. Through this initiative, the SPCSA will develop a library of resources that is constantly accessible to schools, which includes guidance documents, manuals, FAQs and training videos. With this initiative, their team aims to ensure that schools can rely on documentation and training rather than phone calls to get the majority information they need. This will ensure consistency in the information they share and free up staff time to focus on core work. Staff will still need to answer questions and provide technical assistance to schools, but these activities will focus on the more nuanced and complex issues, rather than the basics. In addition, the SPSCA will have a method for regularly reviewing the content of the library of resources and making revisions. This will ensure systematic, long-term management of high-quality content.

There was further discussion between Executive Feiden and the Authority regarding the initiatives.

e. Governance Standards for Sponsored Charter Schools [00:48:10]

Executive Director Feiden said Assembly Bill 419 made a number of changes related to charter schools, among these are some new requirements with regard to governance, charter school posting and reporting requirements, and New Charter School Applications and Expansion Requests. Specific to charter school governing boards, Section 3 of AB419 lays out three new requirements:

- 1. Charter school sponsors, such as the SPCSA, must establish standards for the governance of sponsored charter schools;
- 2. Charter school sponsors must provide training or identify organizations that can provide training on the governance of charter schools; and
- 3. Each member of the governing body of a charter school must complete training before the opening of the charter school and at least every three years thereafter.

SPCSA staff have begun research to develop the governance standards for SPCSA-sponsored schools using both local and national examples. In addition, this week and next Executive Director Feiden said she will hold focus groups with charter school board members to get their input on the characteristics of effective boards. SPCSA staff anticipate providing a draft of proposed governance standards for sponsored schools to the Authority at the August 27, 2021 board meeting with the intent of finalizing the standards for the October board meeting and subsequently move into the piece regarding training.

Agenda Item 5 – COVID-19 Update. [00:49:37]

Executive Director Feiden said they again find themselves amid rising cases and test positivity rates for COVID-19. There have been a number of developments in the last few days. She gave a recap their last meeting.

The CDC's new guidance prioritizes safely returning students to in-person instruction in the fall of 2021. The guidance "emphasizes implementing layered prevention strategies (e.g., using multiple prevention strategies together) to protect people who are not fully vaccinated" and covers a range of prevention strategies including promoting vaccination, consistent and correct mask use, physical distancing, screening testing, ventilation, handwashing and respiratory etiquette, staying home when sick and getting tested, contact tracing, and cleaning and disinfection. Of note, the guidance states that "masks should be worn indoors by all individuals (age 2 and older) who are not fully vaccinated" and the updated guidance issued on July 27 reiterates the CDC's

recommendation for universal masking in K-12 schools. In addition, the guidance recommends that schools "maintain at least 3 feet of physical distance between students within classrooms" and adds that when it is not possible to maintain social distancing due to space limitations it is "especially important to layer multiple other prevention strategies, such as indoor masking." Additionally, the guidance suggests that localities monitor community indictors regarding transmission and vaccination to guide decisions on the level of layered prevention strategies. With this guidance in hand, she expects most if not all of their charter schools will be open in-person for those parents that want to bring their children to school this fall.

In the last week, there have been a number of other developments. The CDC updated their guidance for fully vaccinated individuals, they now recommend that in communities designated with substantial or high transmission, everyone, including those who are fully vaccinated, wear face coverings. It's important to note that this high and substantial category that they indicate, is based on specific transmission numbers and test positivity and there is a website kept live 24/7 and they actually send this data out to their schools every week in their weekly email, so they know where they are, low, moderate, high or substantial in terms of where their community is.

Nevada's previous emergency directives effectively tie Nevada's requirements for COVID-19 mitigation measures to the CDC. Meaning, that Nevada automatically adopted the latest guidance from the CDC. Because a majority of counties in Nevada, including Clark and Washoe, the two largest counties, are currently designated as high community transmission, masks are now required in most of the state regardless of vaccination status in indoor public spaces. She briefly noted over the last week there have been some similar developments in Clark County from both the Clark County Commission and the South Nevada Health District, both pointing towards increased use of face coverings, at least while they are in these levels of high and substantial transmission.

With regard to schools, she has been in involved in ongoing conversations with the district superintendents, the Nevada Department of Education, and the Governor's office regarding face covering requirements in schools. The most recent guidance for schools allows schools to relax face coverings for students 9 and under, while this has not changed as of yet, there may be changes in the coming days she expects they will hear something within the week.

At this point, the Clark County and Washoe County School Districts have confirmed that they will open the school year requiring masks for all students and adults. She also knows there has been resistance in this approach in their rural school districts, given the rapidly evolving circumstances, she believes the Authority should continue to recommend that schools follow all prevailing CDC guidance and any guidance provided by local health officials. Obviously, their schools are also bound by any emergency directives by the Governor's office. Therefore, given the Authority's vote last month for schools to follow CDC guidance and any guidance from local health districts, she doesn't believe there is any action needed today but she will keep the Authority members and schools informed of any further developments. Finally, please know school's have begun submitting their reopening plans and they will continue to monitor any changes or revisions to those plans. There was further discussion between Executive Director Feiden and the Authority.

A 7-minute convenience break was taken.

Agenda Item 6 – Charter School Contract Amendment Applications [01:25:11]

a. TEACH Las Vegas

Director Modrcin provided the summary of the request and staff's recommendation related to the charter school contract amendment application submitted by TEACH Las Vegas. TEACH Las Vegas is requesting that the SPCSA grant a good cause exemption request and approve two modifications to the school's charter contract:

1) To reduce its enrollment cap for the 2021 – 2022 school year from 325 to 150 students. This is request will allow TEACH Las Vegas to sublease a portion of its facilities to Explore Academy.

2) To delay the implementation of their student transportation plan to the 2022 – 23 school year. Student bus transportation was included in the approved charter application.

More information related to the amendment can be found in the supporting materials. Staff is supportive of these requests and recommends approval. Director Modrcin said he and other staff from the SPCSA team were on site Wednesday of this week and believe they are on the right track to open on August 9th. Staff believes that despite having the enrollment cap for TEACH for the upcoming year, available information suggests that the school will be financially viable for the upcoming school year until they can get back to their projected numbers that they were initially approved for. Additionally, while staff is disappointed with the current reality surrounding the student transportation plan, they do look forward to working with the school as they implement student transportation in school year 2022-2023. Member Farris emphasized the transportation piece.

Maria Pimienta, TEACH Las Vegas, said they have been in close communication with all families and all stakeholders, and having parent meetings conveying the information regarding the transportation piece. They are working diligently to enroll more students.

MOTION: Vice Chair Moulton made the motion to grant TEACH Las Vegas a good cause exemption and approve the requests of the school to:

1) Reduce the enrollment cap for the 2021 - 22 school year to 150 students across grades K - 7, and

2) Approve the school to postpone student transportation services until the 2022 – 23 school year.

Member Kirner seconded the motion. The motion carried unanimously.

b. Girls Athletic Leadership School – contingent temporary facility for beginning of 2021-22 [01:31:33]

Director Modrcin provided the summary of the request and recommendation related to the charter school contract amendment application submitted by Girls Athletic Leadership Schools (GALS). GALS is requesting that the SPCSA grant a good cause exemption request and grant temporary approval for the school to remain at its current location, the Boys & Girls Club at 920 Cottage Grove Avenue, in the short-term due to permitting delays at their permanent location. According to the information provided, GALS plans to move the school to the permanent facility, located at 4220 S. Maryland Parkway, shortly after all appropriate permits have been issued. Relocation to this facility was approved by the Authority at its April 23, 2021 board meeting. Since that time, the leadership and Board of the school has been closely monitoring facility progress to ensure a smooth transition for students, families, and staff. In recent weeks, the school has been preparing a contingency plan in case of any construction or permitting delays that would impact the availability of the permanent facility. GALS is seeking to maintain an August 9 start date to align with Clark County School District (CCSD). SPCSA staff was notified by GALS leadership in July that it did not appear permitting would occur on or before August 3rd, less than a week prior to the start of school. As a result, the school has secured a facility use agreement with the Boys & Girls Club to remain at their current site given the permitting delays at the permanent location. Staff is comfortable with the contingency plan as proposed and recommends that the Authority approves the school to open at the Boys & Girls Club and they anticipate this is a very short stay and when permitting allows, likely in August, the school will move to its permanent home less than a mile away.

MOTION: Member Shauntee Rosales made the motion (as described in <u>staff's recommendation</u>) to grant GALS Las Vegas a Good Cause Exemption and approve the request of the school to temporarily locate at the Boys and Girls Club (920 Cottage Grove Avenue) for the start of the school year with the condition that GALS complete the SPCSA Pre-Opening process prior to relocating to its permanent facility at 4220 S. Maryland Parkway. Vice Chair Moulton seconded the motion. The motion carried unanimously.

Agenda Item 7 – Nevada Connections Academy [01:35:49]

Director Modrcin said Nevada Connections Academy (NCA) serves grades 9-12 in its current 3-year charter school contract that commenced on July 1, 2020. The most recent rating from the 2018 - 19 school year had the high school at a 1-star with an index score of 13.8. Projected scores for the 2019 - 20 and 2020 - 21 school years

in today's slide but these would not be at the 3-star level and as the Authority is aware it has been made abundantly clear to the school that the expectation is for the high school to reach 3-stars by the time they are up for renewal. Preliminary data from last year showed some progress, though the school would have still been well shy of a 3-star cut off of 50 points, so to be clear they will get all available and final data for the 2020 - 21 school year in the coming weeks and then they will only get one more year of complete data at the end of the 2021 - 22 and that data could inform any recommendation regarding renewal in the fall of 2022.

Dr. McBride, Superintendent at NCA, began the NCA's update presentation (which can be found in the materials for this meeting). He shared NCA's celebrations which includes the below:

- Expected 20-21 school year graduation rate of at least 84.6%,
- Expected 20-21 school year College and Career Readiness Participation Status of approximately 52%,
- Over 80% of NCA families are returning for the 21-22 SY
- Over 95% of NCA Staff are returning for the 21-22 SY o 100+ students participated in summer school this summer.
- Two Olympians and at least one medal winner

He spoke to the school's past performance vs. their performance framework targets before Mrs. Christine Dzarnoski, Principal, took over for the slides regarding NCA's academic achievement. Dr. McBride discussed the school's graduation rates, college & career readiness, and student engagement. Mr. Scott Harrington, Board Chair, closed with sharing their board updates and training. There was further discussion between the Authority and school representatives.

Agenda Item 8 – Schools Previously Under Receivership. [02:19:20]

a. Quest Academy Update.

Director Modrcin provided a brief update regarding Quest Academy before turning it over to the school representatives to provide their update regarding the receivership at Quest Academy. Quest Academy was transitioned from receivership to a fully constituted board in August of 2020. The receivership was put into place by the Authority a number of years ago to address a number of academic and financial performance shortcoming in addition to some governance and compliance deficiencies. Quest Academy was renewed for a 3-year term that started July 1, 2020. The school is still operating under a notice at the elementary level. This means that the final results for 2020-21 school year and 2021-22 school year will be critical in any renewal decision made by the Authority.

Jackie Working, Student Support Director, said she was joined by their school's Finance and Facilities Director, Mr. McNeil. She spoke to some of the school's efforts and how she felt things were going.

b. Discovery Charter School. [02:24:59]

Director Modrcin provided a brief update regarding Discovery Charter School. The school was transferred from receivership to a fully constituted board in 2019. The upcoming school year is the 5^{th} year of the 6-year charter contract which expires June 30, 2023. The school is still operating under a notice at the elementary and middle school level at the Sandhill campus and this means that the final results for 2020 - 21 school year and 2021 - 22 school year will be critical in any renewal decision made by the Authority.

Tricia Wilbourne, Principal at Discovery Charter School, shared their teacher return for this coming school year is 93% and their student/family return is 98%. As of today, they have 422 students enrolled at Hillpointe campus and 116 students at their Sandhill campus. 64% of their enrollment includes subgroups. They have no staff vacancies and two therapy dogs that will serve students at both campuses. She talked about their academic and curriculum changes for the coming school year. Discovery Charter School is part of cohort 1 for the MTSS which is sponsored by the SPCSA.

Agenda Item 9 – Updates on approved new charter schools for Fall 2021. [02:34:44]

a. TEACH Las Vegas

This update was given during agenda item 6(a).

b. CIVICA Nevada Career and Collegiate Academy

Director Modrcin said CIVICA Nevada Career and Collegiate Academy, as the board is aware, was conditionally approved in May of 2020 to open this fall and serve grades K - 7, eventually growing to K - 12 at full scale. SPCSA staff has been working with the school and overseeing their progress in the pre-opening process, their walk through is scheduled for Monday of next week and hope to sign off on completion of that so the school can successfully open as planned on August 12th.

Dr. Eve Breier, said as of this week, they filled all their staff positions. Fully registered enrollment to date is 556 and they have about 14 pending applications, which would bring them to about 570. They have 215 applications in the queue that still need to be processed, but obviously all of those won't be because of their enrollment capacity. She spoke to the school's initiatives and community outreach and some of the professional development the staff was able to attend. There was further discussion between the Authority and school representatives regarding their enrollment and outreach.

Agenda Item 10 – Charter School Renewal Process. SPCSA staff will provide the Authority with an overview of the charter school renewal process. [02:47:58]

Director Modrcin provided the brief presentation of the charter school renewal process, which will be in front of the Authority before the end of the calendar year. He recapped the renewal timeline and key dates. Last month each of schools up for renewal received their performance reports and SPCSA staff has already provided guidance with regard to the letter of intent to renew which are due no later than September 1st and applications are expected to be received in early October and staff plans to bring recommendations before the end of the calendar year. He shared some of the information/data staff uses to make a recommendation regarding the renewals which include: academic performance, organizational performance, financial performance, site evaluation findings and other information provided in the renewal application and provided some examples.

Agenda Item 11 – Proposed Regulatory Changes (Nevada Administrative Code 388A.260). [02:52:34]

Executive Director Feiden said the SPCSA has limited regulatory authority and within that authority staff is contemplating some potential changes to existing regulations. Mr. Herrick said the one of the areas where the SPCSA has the ability to make regulations is in regard to the SPCSA application process. Executive Director Feiden said they are looking primarily at the application process here and for them that contemplates the letter of intent and charter application. For the letters of intent, they are looking at slightly shortening the length of notice from the current 120 days prior to application to more like 90 days as well as adding some information and details regarding the letter of intent. With regard to the application process, they currently have 2 applications cycles, one where they are due January 15th and the other due July 15th. They've seen over the last several schools' new openings, that schools coming out of the July cycle in particular, struggle in terms of being ready to open on time and have seen several schools receive their certificate of occupancy days before the school year started. Staff has been uncomfortable with this and have worked to back those days up to 30 days which regulation and statute allow. They have also seen schools have to delay due to late starts or run into issues finding sufficient enrollment. Also with the July timeline, their approvals will typically happen end of November or December, if they go through resubmission that puts them in January-February which is months before the beginning of the school year. Staff feels that timeline is too tight, and they are looking potentially moving it to a single cycle with applications due in the springtime and the aim of having board action by the end of summer. That will provide a full 12 months of preopening. This approach has numerous other potential advantages, with regard to staff capacity and how they allocate their time. Staff has asked for feedback from their stakeholders and generally feedback has been positive.

Mr. Herrick spoke about the regulatory process which will include a public workshop and public regulatory hearing. SPCSA staff will handle the workshop and at the SPCSA's November or December board meeting they

will have the regulatory hearing and both the workshop and public hearing will provide time for public comment and input and any regulatory changes approved, ultimately have to be approved by the legislative commission which is made up of legislators, and it is also subject to legislative oversight as well.

Agenda Item 12 – Long-Range Calendar. [02:59:59]

Executive Director Feiden highlighted a couple of items. At the August meeting they will have some proposed changes to their site evaluation process and a draft of their governance standards as discussed earlier. At the October meeting they do anticipate a review of academic performance, this year is unique as they will not have star-ratings but will have other data to dig into and expect to hear from schools that remain under notice due to past performance concerns. New charter school applications are expected to be during the November meeting and renewals at the December meeting. She said she believes there also was a comment about wanting to hear how the ESSER funds are used and looking to October to provide more information on that and will incorporate the focus on schools as discussed today. Member Moulton encouraged schools to share with one another about what they are doing with the ESSER funds, there is so much money and so much need.

Agenda Item 13 – Public Comment #2 [03:03:27]

There was no further public comment submitted, on the line or in the room.

Agenda Item 14 – Adjournment [03:03:17]

The meeting was adjourned at 12:04pm.

Nevada State Public Charter School Authority

Meeting

Welcome... PLEASE PRINT LEGIBLY all information in full so

that we may maintain accurate records.

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Date JVN 30, 2021
Name Ashley Willeinson
Title
Address 1156 Desert Mountain Dr.
· · · ·
Phone No. 702 - 695 - 6712
Representing Freedum
Agenda Item Mask mandate
I Request To Speak
I am a scheduled speaker
I am a visitor

I've emailed each one of your authority members and your complaint department and received an email back from Lisa Dzierbicki . And this is what she said—

So you want to follow recommendations from Southern NV Health District without any science data that masks really work for all children? Where's your science data? What about all the other recommendations by high profiled doctors that states how harmful it is to masks our children? Why do you choose to ignore the harmful science data over no data?

I have a research science evidence from Jama Pediatrics that shows children wearing masks can cause hypercapnia which is a buildup of CO2 in your bloodstream. And the signs include shortness of breath, daytime sluggishness, headache, daytime sleepiness and anxiety.

Here's an analysis by Dr. Joseph Mercola—

A German study using data from 25,930 children showed....

Here's an article about a group of parents in Gainesville, FL who sent 6 face masks to a lab at the University of FL, requesting an analysis of contaminants found on the masks after they had been worn for an average of 5.7 hours/day. The analysis detected 11 dangerous pathogens on masks.

Half of the masks.....

Knowing all these harmful facts, why do you choose to ignore them and still force our children to wear masks? This is clearly child abuse and it has to stop! You should take our recommendations as parents along with other high profiled doctors and not some health district that does not govern our life! Lift this ridiculous no science base mask mandate!

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Surgical (Age 8) Surgical (Age 9)						
Surgical (Age 10)	■Pa	thogenic 🛛 🖉 Anti	biotic-Resistant	Pathogens 🛛 Non-Pa	thogenic Biological Cor	ataminants

Dangerous pathogens found on children's face masks

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80

in COVID-19

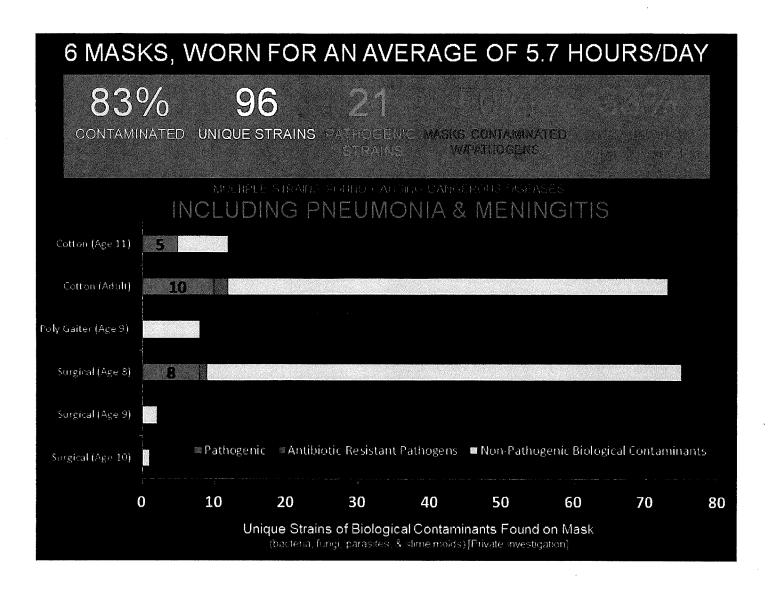
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BY JENNIFER CABRERA

A group of parents in Gainesville, FL, sent 6 face masks to a lab at the University of Florida, requesting an analysis of contaminants found on the masks after they had been worn. The resulting report found that five masks were contaminated with bacteria, parasites, and fungi, including three with dangerous pathogenic and pneumonia-causing bacteria. Although the test is capable of detecting viruses, including SARS-CoV-2, only one virus was found on one mask (*alcelaphine herpesvirus 1*).

The analysis detected the following 11 dangerous pathogens on the masks:

Streptococcus pneumoniae (pneumonia)

Mycobacterium tuberculosis (tuberculosis)

Neisseria meningitidis (meningitis, sepsis)

Acanthamoeba polyphaga (keratitis and granulomatous amebic encephalitis)

Acinetobacter baumanni (pneumonia, blood stream infections, meningitis, UTIs—resistant to antibiotics)

Escherichia coli (food poisoning)

Borrelia burgdorferi (causes Lyme disease)

Corynebacterium diphtheriae (diphtheria)

Legionella pneumophila (Legionnaires' disease)

Staphylococcus pyogenes serotype M3 (severe infections—high morbidity rates)

Staphylococcus aureus (meningitis, sepsis)

Half of the masks were contaminated with one or more strains of pneumoniacausing bacteria. One-third were contaminated with one or more strains of meningitis-causing bacteria. One-third were contaminated with dangerous, antibiotic-resistant bacterial pathogens. In addition, less dangerous pathogens were identified, including pathogens that can cause fever, ulcers, acne, yeast infections, strep throat, periodontal disease, Rocky Mountain Spotted Fever, and more. 7/29/2021

Rational Ground - Clear Reasoning on National Policy for COVID-19 » Dangerous pathogens found on children's face masks

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PATHOGEN	TYPE	DESCRIPTION
acinetobacter baumannii	Bacteria	pneumonia, blood stream infections, meningitis, wound and surgical site infections and urinary tract infections Resistant to antibiotics and very difficult to treat.
alcelaphine herpesvirus 1	Virus	Natural hosts primarily cow, but is fatal
Borrella burgdorferi	Bacteria	Causes Lyme disease
corynebacterium jeikeium	Bacteria	infection in bone marrow transplant patients
corynebacterium kroppenstedtli	Bacteria	antiblotic resistant pathogen
cutibacterium acnes	Bacteria	Causes acne, blephartis and endophthalmitis
encephalitozoon cuniculi	Bacteria	Pathogenic in immunocomprimised people
Escherichia coli	Bacteria	Found in lower intestine and can cause food poisoning
francisella tularensis	Bacteria	Causes tularemia, fever, skin ulcers, sore throat and pneumonia
mycobacterium tuberculosis	Bacteria	Causes Tuberculosis
neisseria meningitidis Serogroup A	Bacteria	Extremely pathogenic. Causes meningitis and life threatening sepsis
neisseria meningitidis Serogroup B	Bacteria	Extremely pathogenic. Causes meningitis and life threatening sepsis
neisseria meningitidis Serogroup C	Bacteria	Extremely pathogenic. Causes meningitis and life threatening sepsis
parabacteroides distasonis	Bacteria	Causes infections
porphyromonas gingivalis	Bacteria	Found in the oral cavity causing peridontal disease as well as upper gastroitntestinal tract, respitory infections
Rickettsia rickettsii	Bacteria	Rocky Mountain Spotted Fever
staphylococcus aureus	Bacteria	range of illnesses from minor skin infections to life threatening pneumonia, menigitis and sepsis
streptococcus pneumoniae	Bacteria	Major cause pneumonia
streptococcus pneumoniae serotype 19F	Bacteria	Major cause of pneumonta
streptococcus pyogenes	Bacteria	Causes strep throat
streptococcus pyogenes serotype M3	Bacteria	Causes strep throat

Here is an image of the infection *francisella tularensis*, which causes tularemia, fever, skin ulcers, sore throat, and pneumonia:



The face masks studied were new or freshly-laundered before wearing and had been worn for 5 to 8 hours, most during in-person schooling by children aged 6 through 11. One was worn by an adult. A t-shirt worn by one of the children to school and unworn masks were tested as controls. No pathogens were found on the controls; samples from the front top and bottom of the t-shirt found proteins that are commonly found in skin and hair, along with some commonly found in soil.

A parent who participated in the study, Ms. Amanda Donoho, commented that this small sample points to a need for more research: "We need to know what we are putting on the faces of our children each day. Masks provide a warm, moist environment for bacteria to grow."

The parents contracted with the lab because they were concerned about the potential of contaminants on masks that their children were forced to wear all day at school, taking them on and off, setting them on various surfaces, wearing them in the bathroom, etc. This prompted them to send the masks to the University of Florida's Mass Spectrometry Research and Education Center for analysis.

Click to view the mask reports.

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STORY AT-A-GLANCE

- > Researchers analyzed the CO2 content of inhaled air among children wearing two types of masks, as well as wearing no mask
- > CO2 in inhaled air under surgical and filtering facepiece masks came in between 13,120 ppm and 13,910 ppm; the German Federal Environmental Office set a limit of CO2 for closed rooms of 2,000 ppm
- Younger children appeared to have the highest CO2 values; a level of 25,000 ppm was measured from a 7-year-old wearing a facemask
- > The researchers believe the use of facemasks could lead to "impairments attributable to hypercapnia," which is a buildup of CO2 in the blood
- Children wearing facemasks at school have reported symptoms such as shortness of breath, dizziness, headaches, irritability, fatigue and difficulty concentrating

Mandating children to wear facemasks for long periods of time while at school and participating in other activities is an unprecedented move, one that was put into place despite no research showing the practice is safe. It's not simply a case of "something is better than nothing," because the act of mask wearing comes with a risk of adverse effects.

Now that the pandemic is more than a year behind us, evidence is starting to accumulate showing that the use of face masks in children may cause more harm than good. One of the latest studies noted that the evidence base for making face masks compulsory in schoolchildren is "weak," and looked into their effects on carbon dioxide in inhaled air.¹

Masks Increase Carbon Dioxide Inhalation

Your body produces carbon dioxide (CO2) as a byproduct of cellular function.² This odorless, colorless gas is then transported via your blood to your lungs, where it is exhaled from your body. Normally, the CO2 then dissipates into the air around you before you take another breath. In the open air, carbon dioxide typically exists at about 400 parts per million (ppm), or 0.04% by volume.

The German Federal Environmental Office set a limit of CO2 for closed rooms of 2,000 ppm, or 0.2% by volume. If you're wearing a facemask, the CO2 cannot escape as it usually does and instead becomes trapped in the mask. In a study published in JAMA Pediatrics, researchers analyzed the CO2 content of inhaled air among children wearing two types of masks, as well as wearing no mask.³

Children in the study ranged in age from 6 to 17 years, with a mean age of 10.7. While no significant difference in CO2 was found between the two types of masks, there was a significant elevation when wearing masks compared to not wearing them.

CO2 in inhaled air under surgical and filtering facepiece masks came in between 13,120 ppm and 13,910 ppm, "which is higher than what is already deemed unacceptable by the German Federal Environmental Office by a factor of 6," the researchers noted.⁴ Also important, this level was reached after only three minutes, while children wear masks at school for a mean of 270 minutes at a time.

Even the child who had the lowest measured CO2 level had a measurement threefold greater than the closed room CO2 limit of 0.2%. However, younger children appeared to have the highest CO2 values; a level of 25,000 ppm was measured from a 7-year-old wearing a facemask.⁵

The study attracted criticism and calls for retraction by those questioning mask risks to children, but in a thoughtful synopsis by Dr. Vinay Prasad, a hematologist-oncologist and

More Bad News for Masks

associate professor of medicine at the University of California San Francisco, it's noted that there are both benefits and risks to forcing children to wear masks.⁶

While large, empirical studies could answer the question of whether masks help or harm children, "we did literally zero of them," Prasad said, and the CO2 study is attempting to add some clarity. He added:⁷

"Here is the real answer to the question of whether it's worth it to mask kids: No one has any clue. During the last year and half, the scientific community has failed to answer these questions. Failed entirely.

We have no idea if masks work for 2-year-olds and above, 5 and above, 12 and above. No idea if they only work for some period of time. No idea if this is linked to community rates. No idea if the concerns over language loss offset the gains in reduced viral transmission, and if so, for what ages."

Children's Mask Complaints Could Be Caused by Elevated CO2

A German study using data from 25,930 children showed that 68% reported adverse effects from wearing facemasks.⁸ Among them, 29.7% reported feeling short of breath, 26.4% being dizzy and 17.9% were unwilling to move or play.⁹

Hundreds more experienced "accelerated respiration, tightness in chest, weakness and short-term impairment of consciousness." Additional symptoms were also reported among the children, who wore facemasks for an average of 270 minutes a day:¹⁰

Irritability (60%)	Headaches (53%)	
Difficulty concentrating (50%)	Less happiness (49%)	
Reluctance to go to school/kindergarten (44%)	Malaise (42%) Feeling weak discomfort	
Impaired learning (38%)	Drowsiness or fatigue (37%)	

More Bad News for Masks

Signs of mild to moderate hypercapnia, which is a buildup of CO2 in your bloodstream, include shortness of breath, daytime sluggishness, headache, daytime sleepiness and anxiety.¹¹

Hypercapnia is often associated with chronic obstructive pulmonary disease (COPD), which makes it harder for you to breathe, but it can also be caused by activities that limit you from breathing fresh air, such as scuba diving or being on a ventilator.^{12,13} The researchers of the featured study believe, however, that the use of facemasks could lead to "impairments attributable to hypercapnia," adding:¹⁴

"Most of the complaints reported by children can be understood as consequences of elevated carbon dioxide levels in inhaled air. This is because of the dead-space volume of the masks, which collects exhaled carbon dioxide quickly after a short time.

This carbon dioxide mixes with fresh air and elevates the carbon dioxide content of inhaled air under the mask, and this was more pronounced in this study for younger children ... We suggest that decision-makers weigh the hard evidence produced by these experimental measurements accordingly, which suggest that children should not be forced to wear face masks."

Nanoparticles, Pollutants Detected in Facemasks

Disposable plastic facemasks pose another risk in terms of the pollution they contain. A study by Swansea University researchers noted that 200 million disposable plastic facemasks are produced in China daily, and "improper and unregulated disposals" have led to a significant plastic pollution problem.¹⁵

The researchers submerged seven disposable facemask brands in water to simulate what happens with littering, when masks end up in waterways. Micro- and nanoscale fibers and particles and heavy metals, including lead, antimony and copper, were detected, raising significant environmental and public health concerns. According to a university news release:¹⁶

"The findings reveal significant levels of pollutants in all the masks tested with micro/nano particles and heavy metals released into the water during all tests.

Researchers conclude this will have a substantial environmental impact and, in addition, raise the question of the potential damage to public health — warning that repeated exposure could be hazardous as the substances found have known links to cell death, genotoxicity and cancer formation."

Not only are masks not being recycled, but their materials make them likely to persist and accumulate in the environment. Most disposable face masks contain three layers a polyester outer layer, a polypropylene or polystyrene middle layer and an inner layer made of absorbent material such as cotton.

Polypropylene is already one of the most problematic plastics, as it's widely produced and responsible for large waste accumulation in the environment. Leading researchers from the University of Southern Denmark and Princeton University also warned that masks could quickly become "the next plastic problem."¹⁷

A performance study published in the June 2021 issue of Journal of Hazardous Materials¹⁸ also highlighted the little talked about fact that wearing masks poses a risk of microplastic inhalation, and reusing masks increases the risk.

The Link Between Masks and Advanced Stage Lung Cancer

A National Institutes of Health study¹⁹ published in February 2021 confirmed that when you wear a mask, most of the water vapor you would normally exhale remains in the mask, becomes condensed and is re-inhaled.²⁰ They went so far as to suggest that wearing a moist mask and inhaling the humid air of your own breath was a good thing, because it would hydrate your respiratory tract.

But researchers from New York University (NYU) Grossman School of Medicine revealed that when oral commensals — microbes that live in your mouth — are "enriched" in the lungs, it's associated with cancer.²¹

More Bad News for Masks

Specifically, in a study of 83 adults with lung cancer, those with advanced-stage cancer had more oral commensals in their lungs than those with early-stage cancer. Those with an enrichment of oral commensals in their lungs also had decreased survival and worsened tumor progression.

While the study didn't look into how mask usage could affect oral commensals in your lungs, they did note, "The lower airway microbiota, whether in health or disease state, are mostly affected by aspiration of oral secretions, and the lower airway microbial products are in constant interaction with the host immune system."²²

It seems highly likely that wearing a mask would accelerate the accumulation of oral microbes in your lungs, thereby raising the question of whether mask usage could be linked to advanced stage lung cancer.

Masks Developed That Test for COVID-19

Adding further support that masking leads to an accumulation of breath droplets, which you can then re-inhale, engineers from the Massachusetts Institute of Technology and Harvard University developed a face mask that tests such droplets for the presence of COVID-19.²³

The facemasks contain tiny, freeze-dried sensors surrounded by water. When the wearer pushes a button, the water is released, hydrating the sensor, which then begins the test.

Reportedly, the mask can diagnose COVID-19 within 90 minutes and is "as sensitive as the gold standard, highly sensitive PCR tests,"²⁴ which have been fraught with trouble since the beginning of the pandemic.

CDC Study Finds Masks in Schools Had Little Effect on COVID

If children are risking inhalation of excessive levels of CO2 to wear masks at school, what benefit are they receiving in exchange? Very little, if any, according to a CDC study that compared the incidence of COVID-19 in Georgia kindergarten through grade 5

More Bad News for Masks

schools that were open for in-person learning in fall 2020 with various recommended prevention strategies, such as mandatory masks and improvements to ventilation.²⁵

The study revealed that COVID-19 incidence was 37% lower in schools that required teachers and staff members to use masks and 39% lower in schools that improved ventilation, compared to schools that did not use these strategies.²⁶

Because the COVID-19 incidence at the schools was extremely low to begin with, even with a 37% reduction in incidence from staff members wearing masks, that only reduced COVID-19 incidence by about one case in the entire school. When students were masked, it also made virtually no difference. Further, ventilation led to better outcomes, reducing incidence by 39%.

Dilution methods, which work by diluting the number of airborne particles, include opening windows and doors or using fans. This led to a 35% lower incidence of COVID-19, while methods to filter airborne particles, such as using HEPA filtration systems with or without ultraviolet germicidal irradiation, led to a 48% lower incidence.

More States Ban Mask Mandates in Schools

While the CDC continues to recommend "universal and correct use of masks and physical distancing" in kindergarten through grade 12 schools,²⁷ a number of states, including Texas, Iowa, South Carolina and Arkansas, are defying the CDC's nonsensical advice and proceeding to ban mask mandates in public schools or at least make mask usage optional.²⁸

In addition to the physical risks, experts have warned that masks are likely to be causing psychological harm to children and interfering with their development.²⁹ All of these risks come at little benefit to children, as, one expert report noted, "Figures illustrate that the risk of death from this disease for this age group is negligible ... To introduce these [compulsory face covering measures] without detailed, thorough and meticulous risk assessment, is potentially reckless."³⁰

Mass, peaceful protests are often effective at compelling change, so if you're unhappy with the facemask policies at your child's school, contact your local district and let them know.

Letters

RESEARCH LETTER

Experimental Assessment of Carbon Dioxide Content in Inhaled Air With or Without Face Masks in Healthy Children: A Randomized Clinical Trial

Many governments have made nose and mouth covering or face masks compulsory for schoolchildren. The evidence base for this is weak.^{1,2} The question whether nose and mouth covering increases carbon dioxide in inhaled air is crucial. A large-

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Supplemental content

scale survey³ in Germany of adverse effects in parents and children using data of 25 930

children has shown that 68% of the participating children had problems when wearing nose and mouth coverings.

The normal content of carbon dioxide in the open is about 0.04% by volume (ie, 400 ppm). A level of 0.2% by volume or 2000 ppm is the limit for closed rooms according to the German Federal Environmental Office, and everything beyond this level is unacceptable.⁴

Methods | We measured carbon dioxide content in inhaled air with and without 2 types of nose and mouth coverings in a wellcontrolled, counterbalanced, short-term experimental study in volunteer children in good health (details are in the eMethods in Supplement 1). The study was conducted according to the Declaration of Helsinki and submitted to the ethics committee of the University Witten/Herdecke. All children gave written informed consent, and parents also gave written informed consent for children younger than 16 years. A 3-minute continuous measurement was taken for baseline carbon dioxide levels without a face mask. A 9-minute measurement for each type of mask was allowed: 3 minutes for measuring the carbon dioxide content in joint inhaled and exhaled air, 3 minutes for measuring the carbon dioxide content during inhalation, and 3 minutes for measuring the carbon dioxide content during exhalation. The carbon dioxide content of ambient air was always kept well under 0.1% by volume through multiple ventilations. The sequence of masks was randomized, and randomization was blinded and stratified by age of children. We analyzed data using a linear model for repeated measurements with P < .05 as the significance threshold. The measurement protocol (trial protocol in Supplement 2) is available online.⁵ Data were collected on April 9 and 10, 2021, and analyzed using Statistica version 13.3 (TIBCO).

Results | The mean (SD) age of the children was 10.7 (2.6) years (range, 6-17 years), and there were 20 girls and 25 boys. Measurement results are presented in the Table. We checked potential associations with outcome. Only age was associated with carbon dioxide content in inhaled air (y = 1.9867 - 0.0555 × x; r = -0.39; P = .008; Figure). Hence, we added age as a continuous covariate to the model. This revealed an association (partial $\eta^2 = 0.43$; P < .001). Contrasts showed that this was attributable to the difference between the baseline value and the values of both masks jointly. Contrasts between the 2 types of masks were not significant. We measured means (SDs) between 13 120 (384) and 13 910 (374) ppm of carbon dioxide in inhaled air under surgical and filtering facepiece 2 (FFP2) masks, which is higher than what is already deemed unacceptable by the German Federal Environmental Office by a factor of 6. This was a value reached after 3 minutes of measurement. Children under normal conditions in schools wear such masks for a mean of 270 (interquartile range, 120-390) minutes.³ The Figure shows that the value of the child with the lowest carbon dioxide level was 3-fold greater than the limit of 0.2 % by volume.⁴ The youngest children had the highest values, with one 7-year-old child's carbon dioxide level measured at 25 000 ppm.

	Participants, No.	Carbon dioxide, % by volume		
Measurement		Mean (SD) [95% Cl]	Range	
Baseline				
Pretest	45	0.268 (0.108) [0.235-0.300]	0.100-0.628	
Posttest ^a	39	0.281 (0.105) [0.247-0.316]	0.100-0.525	
Main outcome			· ·	
Inhaled air with surgical mask	45	1.312 (0.384) [1.197-1.427]	0.577-2.554	
Inhaled air with FFP2 mask	45	1.391 (0.374) [1.279-1.504]	0.600-2.475	
Additional outcome			-	
Joint exhaled and inhaled air with surgical mask	45	2.650 (0.486) [2.504-2.796]	1.33-3.41	
Exhaled air with surgical mask	44	3.847 (0.678) [3.641-4.053]	1.783-4.754	
Joint inhaled and exhaled air with FFP2 mask	45	2.677 (0.386) [2.561-2.793]	1.660-3.418	
Exhaled air with FFP2	45	3.846 (0.547) [3.682-4.011]	2.592-5.24	
Carbon dioxide content in ambient air	NA	0.074 (0.003) [0.073-0.075]	0.067-0.083	

Abbreviations: FFP, filtering faceplece; NA, not applicable.

^a Posttest scores were missing in 6 children because they stopped the measurement after wearing the masks.

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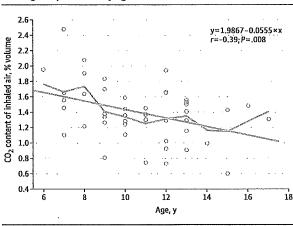


Figure. Scatterplot of Carbon Dioxide Content in Inhaled Air Under Filtering Facepiece Mask by Age

Linear regression line with locally weighted scatterplot smoothing.

Discussion | The limitations of the study were its short-term nature in a laboratory-like setting and the fact that children were not occupied during measurements and might have been apprehensive. Most of the complaints reported by children³ can be understood as consequences of elevated carbon dioxide levels in inhaled air. This is because of the dead-space volume of the masks, which collects exhaled carbon dioxide quickly after a short time. This carbon dioxide mixes with fresh air and elevates the carbon dioxide content of inhaled air under the mask, and this was more pronounced in this study for younger children.

This leads in turn to impairments attributable to hypercapnia. A recent review⁶ concluded that there was ample evidence for adverse effects of wearing such masks. We suggest that decision-makers weigh the hard evidence produced by these experimental measurements accordingly, which suggest that children should not be forced to wear face masks.

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Accepted for Publication: June 7, 2021.

Published Online: June 30, 2021. doi:10.1001/jamapediatrics.2021.2659

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Author Contributions: Dr Walach (principal investigator) had full access to all of the data in the study and takes responsibility for the integrity of the data and the accuracy of the data analysis.

Concept and design: All authors,

Acquisition, analysis, or interpretation of data: Walach, Weikl, Diemer, Traindl, Kappes, Hockertz.

Drafting of the manuscript: Walach, Traindl.

Critical revision of the manuscript for important intellectual content: Walach, Weikl, Prentice, Diemer, Kappes, Hockertz.

Statistical analysis: Walach.

Administrative, technical, or material support: Weikl, Prentice, Diemer, Traindl, Kappes, Hockertz.

Supervision: Weikl, Diemer, Traindl, Kappes, Hockertz.

Other-liaising with all other authors: Walach.

Conflict of Interest Disclosures: None reported.

Funding/Support: Mediziner und Wissenschaftler für Gesundheit, Freiheit und Demokratie eV, a public charity, has organized this study and covered only essential expenses, such as travel.

Role of the Funder/Sponsor: The funder had no role in the design and conduct of the study; collection, management, analysis, and interpretation of the data; preparation, review, or approval of the manuscript; and decision to submit the manuscript for publication.

Data Sharing Statement: See Supplement 3.

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Re: LIFT MASK MANDATE!!! #UNA00000153

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Fri 7/23/2021 2:27 PM

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New reply for the ticket #UNA00000153

Hello Ms. Burgess,

Thank you for reaching out to us regarding your concerns. Please know that the Southern Nevada Health District is monitoring the community transmission of COVID-19 and has provided mask recommendations for Clark County schools. The State Public Charter School Authority (SPCSA) encourages all sponsored charter schools to follow the recommendations of the health district. At a minimum schools must comply with the most recent guidance from the Department of Education and prevailing emergency directives regarding face coverings. However, schools may implement more strict requirements if they choose.

You are welcome to submit public comment at the State Public Charter School Authority's next board meeting on Friday, July 30, 2021.

If you have further questions do not hesitate to reach out.

Thank you,

Lisa Dzierbicki

Lisa Dzierbicki

#UNA00000153 Unassigned

Nevada State Public Charter School Authority

Meeting

Welcome... PLEASE PRINT LEGIBLY all information in full so

that we may maintain accurate records.
Date 30 21
Name Kristine Burgess
Title
Address 2301 Redwood St.
#103
Phone No. 702-355-6699
Representing duildren in Doral
Agenda Item Mask Mandate
TRequest To Speak
I am a scheduled speaker
I am a visitor

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Nevada State Public Charter School Authority

Meeting

Welcome... PLEASE PRINT LEGIBLY all information in full so

that we may maintain accurate records.

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Date
Name Jim Friedel
Title
Address 610 Bighan Creek St. Henderson, NV
· · · · · · · · · · · · · · · · · · ·
Phone No. 702-374-842/
Representing Friedel Family
Agenda Item
I Request To Speak
I am a scheduled speaker
I am a visitor

Nevada State Public Charter School Authority

Meeting

Welcome... PLEASE PRINT LEGIBLY all information in full so

that we may maintain accurate records.

Date June 30, 2020
Name Holly Stevenson
Title
Address Tien Tossa De Mar
Henderson NV 89002
Phone No. 102-378- 8339
Representing
Agenda Item
🛣 I Request To Speak
I am a scheduled speaker
I am a visitor

Good evening,

I am writing to comment for the State Public Charter School Authority public meeting regarding Covid-19 policy and use of masks for children.

I was understanding of the mask policy when schools were under directions from local and state governments to enforce mandates and they put the schools at risk of being shut down completely. I was then willing to comply and reluctantly put a mask on my children for the sake of their education, even though their risk of harm and transmission was miniscule at best.

At this time, you are not under any state or local government mandates and are under no obligation to force children to wear a mask, even unvaccinated children. As a result, I am much less willing to comply without voicing concern.

I believe questions of policies are coming from fear of cases arising from both unvaccinated and vaccinated in the valley. As a pediatric nurse practitioner, it is my professional opinion that this fear is misguided. When the vaccines were created, the hope was that they prevent people from contracting Covid-19, but the design was that they *minimize* symptoms and they have proven to be very effective in this. The cases of hospitalizations in the valley of Covid-19 are almost exclusively of unvaccinated patients. Vaccinated patients have been shown repeatedly to have minimal symptoms similar to a cold if contracting it at all. In all likelihood, Covid-19 will never fully go away, even if the entire population gets vaccinated, because of continuing mutations. Very much like influenza. As a result, it is unwise to use case numbers of the virus to determine policy. They will never be at zero.

As for the masks, countless data has supported the insignificance of viral transmission and harm in children. Countless. There are zero longitudinal studies to provide the safety of mask use in children. Zero. There has simply not been enough time to get these true lengthy studies to be sure of safety and efficacy. I, however, have witnessed anecdotally many problems related to masks in pediatric and adult populations including countless skin infections, persistent styes requiring surgical removal, and overwhelming anxiety resulting in respiratory distress.

I speak as an advocate for these children as a pediatric care provider and a parent. I encourage you to not mandate these children wear masks and be an advocate for these children as well. It is not worth the risk. Encourage vaccination for staff and students old enough to receive it, and then move on.

See you in the fall without a mask!

Karah Smith

Name: Chelsea Wilson, parent

Issue: Mask Policies

Comments:

I am speaking to you as a mother and former educator to urge you to look into the multiple studies concerning children and masks as well as the true numbers/facts concerning children and Covid. I am aware you are basing your recommendations per SNHD recommendations which are based solely off case numbers, but do you also know the rate of recovery? Do you know how many of those cases were actually serious among the under 18 demographic? Do you know the CCSD case metrics for the past two weeks?

The COVID-19 school guidelines passed down by the CDC all across the nation are unnecessarily harming our kids, they have been wreaking havoc for nearly 18 months now. We know so much more now than we did even six months ago. Many doctors, scientists, and children's psychologists have been warning about the damage being done to our children mentally and psychically, yet it seems here we go full steam ahead (or backwards in my opinion) doing things such as masking and now vaccinating our least vulnerable population.

The CDC has flip-flopped on its position several times since March of 2020, leaving many confused and leading them to do their own research which is abundantly available by credible doctors, scientists, and psychologists. Now the CDC is recommending once again that children wear masks all day long in schools, despite the fact that these practices are not evidence-based and there is no longterm safety data on such practices. Moreover, of the small amount of children who contract COVID, only 0.00%-0.19% of children are dying from it. Credible international reports suggest that children are at extremely low risk of harm from COVID, with a 99.99% recovery rate. In fact, scientific studies show that the virus is almost entirely transmitted by adults. There are multiple studies now confirming this, also many concerning the relative ineffectiveness of cloth masks.

When the benefit of a medical intervention is in question, it is crucial to consider the potential harm. Social isolation through mandatory school masking causes substantial harm for children. For kids, there's nothing more important than facial expressions, according to a world-renowned psychiatrist and medical ethicist Peter Breggin, M.D. Being in a masked environment, isolation, or quarantine isolation goes contrary to that.

Let alone the health risks ineffective cloth masks pose to our children such as bacterial infections.

In past pandemics, we have trusted parents to make responsible choices for their children — choices like keeping kids home when they're sick or choosing to mask or vaccinate in this case. The presence of a novel virus that barely affects children is no reason to remove parental choice. Nor is it a valid reason to experiment with novel medical interventions that have not been adequately studied for long-term safety in children and where the "benefits" clearly do not outweigh the already multiple documented harms.

I urge you to reflect on the multifaceted damage that we are inflicting on our children and to move our state forward by putting kids first. It's imperative that we restore trust in our communities — and place that trust back where it belongs; with parents.

As a mom and always a teacher the saying:

"Know better, Do better"

keeps coming into my mind regarding all these policies and changes. We now absolutely know better information and the harm we have caused by not stepping up and doing what is right by our kids, now it's our responsibility to actually do better for them.

Thank you for your continued leadership during these unprecedented times. Please immediately support policies to lift harmful COVID-19 guidelines in our schools and return our kids' learning environments to normal. There comes a time when the insanity must end, we have absolutely reached that crossroads concerning our children and these policies and practices that are doing more harm than good. I am hoping for our leaders to do what is right, the time has come.

Thank You.

Chelsea Wilson Las Vegas Realty Group Lic. #S.1086048 (702) 672-7561 To Whom It May Concern,

I am writing you on behalf of Ellison, Michael and Robert Korr and all children in the state. My findings throughout the last 1.5 years raise significant concerns, both medically and legally, of masking children. Masks are ineffective for the purpose claimed by the mandates, carry potential harm on the grounds of both health and well-being, and are only authorized for use by Emergency Use Authorization.

Covering a child's airways every day is not conducive to their health considering breathing and immune function are intimately related. Medical experts have been using the same physiological understanding for decades that breathing fresh air is necessary for optimal lung health.

Health includes the mental, emotional, social, and behavioral pieces of the human experience. Children rely heavily on connection and facial expression to thrive, which is why the environment within the schools is so crucial.

I want my children to be safe. Does a mask make children MORE safe or LESS safe?

- --[if !supportLists]-->• <!--[endif]-->FACT: The chance of a child dying from Covid-19 rounds to zero.
- --[if !supportLists]-->• <!--[endif]-->FACT: The chance of an asymptomatic child transmitting Covid-19 rounds to ZERO.
- --[if !supportLists]-->• <!--[endif]-->FACT: Children and anyone healthy are extremely resilient and natural exposure to viruses helps build and even stronger immunity.
- But the RISKS of mask-wearing for children are high:
- --[if !supportLists]-->• <!--[endif]-->Inhaling the slow build up of CO2 can cause headache, dizziness, impaired cognition
- --[if !supportLists]-->• <!--[endif]-->Suffocation for babies or toddlers who cannot communicate when they need more oxygen
- --[if !supportLists]-->• <!--[endif]-->Inhaling micro-mold caused by trapped water vapor from exhalation which causes sore throat and respiratory infection
- --[if !supportLists]-->• <!--[endif]-->Ingestion of bacteria or parasites on the mask from kids' unwashed hands touching it, which can lead to pinworms or digestive illness.

Our community is seeing evidence of ALL these issues in children.

I'm also going to attach a link with study after study on the ineffectiveness of masks. Please take the time to review them all.

Mask Studies

LET KIDS BREATHE.

Thank you for taking the time to consider the health and safety of my child.

Sincerely,

Kathryn Korr

6967 Casa Encantada St

Las Vegas, NV 89118

I urge everyone to consider the effects that masks in schools can make.

I'm not denying the fact that when a child sneezes, a mask can catch their sneeze or cough like their shoulder would. But again, many doctors believe the small particles can still go through and around these cloth and drug store masks because they are not N95 therefore masks can't claim to completely stop infection.

Some doctors, including pediatricians here in Las Vegas, believe that masks do more harm than good in instances where kids rewear dirty masks for several days, they are worn for a prolonged time, it makes it so kids Keep touching their face with dirty hands in trying to fix them, etc. While I don't know how masks affect oxygen levels and such, I sure know that they make breathing uncomfortable and it's uncomfortable for my kids as well. Not just a little, but enough that I believe it interrupts their thinking and focus and learning.

I also have talked with pediatricians that believe masks increase anxiety and mental health of kids gets damaged with masks. The "suffocating" feeling of them, not being able to see the smiles of their friends and teachers, not being able to read lips while learning about speech and letter sounds, wearing a masks in the hot Las Vegas sun.... All of it is wrong.

Lastly, let's remember that more children have died from suicides here in Clark County than Covid. Let's remember that kids who do catch Covid have very mild symptoms. Let's remember that kids don't spread Covid as easily. The data is out there. Doctors and pediatricians have spoken.

Let's do more for our kids. Let's keep them learning, in the classroom, in person, mask free. Thank you.

- Priscilla Davis Las Vegas resident

From:	Ana Aguilar
То:	SPCSA Public Comment
Subject:	My statement for the meeting on July 30th 2021
Date:	Thursday, July 29, 2021 9:37:40 PM

Hello,

I am a parent of a third grader and I am concerned about masks being mandated at school. There has been very little research on long term effects of face masks on children, I am worried that there will be side effects either physically or mentally. It should be the parents choice whether they want to put a mask on there child. I really hope you consider my statement and every other parent that is speaking on this topic. Enough is enough!

Our voices should matter. Our voices should be heard. We're the voice of every child these kids should not be masked! Their facial expressions as well as their teachers should not be covered!

This is NOT in their best interest and is a detriment to their health. Please make the right choice. Let the masking be up to the parents who are in charge of their childs health. You all I'm sure know and have seen first hand how masking these kids has been affecting them. Mask wearing causes Stress, headaches, anxiety, only to name a few. This is not acceptable and should not be ignored.

I am writing you today so you will take action. Our children should not be deprived of oxygen. Especially since there is plenty of scientific data regarding kids and covid. These children are the lowest group at risk and have a 99.99% recovery rate. Scientific study shows that this virus is almost entirely transmitted by adults. These kids have suffered enough!

This is a choice that needs to be in the hands of the parents. Let us be heard! Do Not mask these kids. I am hoping every parent's voice as well as mine is heard and that you will do what is right. Free our childs smiles!

Thank you,

Kayla Roberts

Sent from Yahoo Mail on Android