

August 5, 2021

Sent via e-mail

Dr. Stephen G. Fogg, President
Board of Trustees
Clovis Unified School District
1450 Hemdon Avenue
Clovis, CA 93611-0567

Dear President Fogg:

You and your fellow trustees walk the path of those who created, in Clovis Unified School District (CUSD), a valued devotion to the highest quality education for our children, based on an equal chance for each of them and – importantly – one grounded in factually supported information. Hence, the Board meeting's departure from those standards in its July 29, 2021 meeting is of great concern to me.

There were a variety of inaccurate, and even wildly flawed, comments made regarding Valley Children's Healthcare and COVID-19 during your Board meeting. Perhaps they were made in good faith, but they were nonetheless inaccurate, and on behalf of my organization, its professionals, and the children we serve, it is critically important that I set the record straight. So I offer you and your fellow Board members the facts to improve our future communications.

One of your Board members made the statement that information regarding COVID-19 had been "demanded" from Valley Children's Healthcare. I made a thorough inquiry within my staff and found no evidence of any such "demand." As for information from Valley Children's regarding this pandemic, it is widely known throughout the Valley that for ten months running, we have produced *The State of Our Children*, a monthly snapshot on kids and COVID-19, the latest research impacting children – in addition to our own hospital and regional data. We have distributed this widely throughout the community – to public health leaders, school nurses, elected officials, community leaders, including Clovis Unified School District.

The claim made at the Board meeting that there is simply no data on kids and COVID-19, or no data that you could find, is not supportable by the abundance of information that is easily accessible in several publicly available resources. During the pandemic, local, State and Federal agencies have literally flooded the region with guidance and details to keep us informed on this disease.

Here is another claim that I found very troubling – that an individual Trustee reported having been to Valley Children's and asserted that "[they] didn't find a lot of people in the ICU that were being treated for COVID." This was offered as alleged "proof" that COVID must not be prevalent or significant here in our region. Obviously, anyone wandering around Valley Children's Intensive Care Units without authorization raises serious patient safety and privacy issues that I will need to address separately. But, for now, I can assure the Board that outside voices are in no position to make factual determinations about the level of a particular illness or disease in any of our departments.

It was also reported to me there were comments at the Board meeting that guidance from the Centers for Disease Control and Prevention (CDC) and the American Academy of Pediatrics (AAP) is not useful because those organizations "don't live here" and that, similarly, the Fresno Department of Public Health really doesn't understand Clovis because "they are responsible for the whole," and, presumably, not for Clovis in particular. This terrible pandemic has caused enormous social disruption throughout our country and our community, and I fully understand how it has tried everyone's patience and stirred our passions. But, in the midst of these trials, we still cannot suspend important facts, and as a health professional, I hope you'll realize why I feel the urgency that you consider the risks in such short-sighted considerations.

Clearly, as a school district mandated under all applicable laws, I know that you follow the guidelines of many professional organizations on math, music, sports and more. They raise universal standards created by organizations that "don't live here" either. Each day when I come in to my hospital, I am reminded that I have an enormous obligation to understand that public health is most certainly about the whole community – attending to a greater good that doesn't look at specific boundaries. That is a commonly held concept that has set us apart as a civilized society, agreeing on principles that advance beneficial public health. I realize there are dissenters, but it really does work to have generations-old childhood vaccine recommendations like the measles, polio, and smallpox vaccines which have saved millions and millions of lives. A pandemic does not respect the boundary line that makes a demarcation between the city of Clovis, or its school district, apart from Fresno or Selma or Madera. I truly believe your Board did not mean to accept the flawed position that CUSD could possibly have a separate and distinct COVID experience, carved out from the rest of Fresno County, California or the nation.

I realize the debate is passionate regarding masks, but as one who deals daily with the emotional trauma that strikes too many of our families, I implore you to weigh this carefully -- there is a significant amount of evidence about kids, COVID-19, and the science behind masks to slow its spread. Here is a snapshot of that data:

National data

The AAP, in partnership with the Children's Hospital Association, reports as of July 29, 2021 the following national trends (the source is cited here for your reference):

Cumulative Number of Child COVID-19 Cases

- 4,198,296 total child COVID-19 cases reported, and children represented 14.3% (4,198,296/29,402,405) of all cases
- Overall rate: 5.578 cases per 100,000 children in the population

Change in Child COVID-19 Cases

- 71,726 child COVID-19 cases were reported the past week from 7/22/21-7/29/21 (4,126,570 to 4,198,296) and children represented 19.0% (71,726/378,497) of the weekly reported cases
- Over two weeks, 7/15/21-7/29/21, there was a 3% increase in the cumulated number of child COVID-19 cases (110,380 cases added (4,087,916 to 4,198,296))

<https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/children-and-covid-19-state-level-data-report/>

- There are also long-term impacts of COVID-19, well-reported in adults and now appearing in children. It is prudent to minimize these potentially serious, long-term effects through precautionary measures taken now.

From the AAP, "the post-COVID-19 condition called "long-haul COVID-19" is an umbrella term that encompasses physical and mental health consequences experienced by some patients that are present 4 or more weeks following a SARS-CoV-2 illness. Although the reported frequency of post-COVID-19 conditions varies widely in the medical literature, several studies show that long-term symptoms can occur in children and adolescents. One study showed that as many as 52% of young adults 16 to 30 years of age may experience residual symptoms at 6 months. A study of 129 children in Italy showed that 42.6% of children experienced at least one symptom >60 days after infection. Finally, the United Kingdom Office for National Statistics estimates that 12.9% of children 2 to 11 years of age and 14.5% of children 12 to 16 years of age still experienced symptoms 5 weeks after infection."

<https://services.ppt.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/post-covid-19-conditions-in-children-and-adolescents>

State

- As of July 29, 2021, 11.1% of COVID-19 cases in California have been in children 0-17.

<https://public.nobles.com/app/profile/haopen/role/via/COVID-19CasesDashboard2.0/CaseStatistics>

Local

- If the earlier 'color coded' tiers applied by the State were in place today, Fresno County would be considered in the 'purple' category, noting widespread transmission and the most restrictive classification for businesses, schools, and individuals. (Fresno Bee, 7/28/21)
- The Fresno County Health Officer reports more children testing positive for COVID-19 now than earlier in the pandemic, with an increase in hospitalizations of patients under the age of 18 of 20% since May. (Fresno County Department of Public Health)

<https://www.co.fresno.ca.us/departments/public-health/covid-19/covid-19-stat>

- At Valley Children's, we are experiencing similar increases in testing, positivity rates, and hospitalizations, as summarized in the chart below.

	Tests Administered	Positives	Hospitalizations	ED Visits
July 1-July 31	3480	133	30	81
June 1-June 30	3006	37	15	13
May 1-May 31	4011	61	27	20

Additional Valley Children's data since March 2020 is as follows:

Total number of children treated as inpatients who tested positive for COVID-19 = 584

Of that total number:

206 children were admitted solely with COVID-19 diagnosis (35.6%)

93 children were admitted and treated for MIS-C syndrome.

Our job, as health professionals and civic leaders, is to translate the abundance of data into the best decisions for our children. At Valley Children's, we operate from a set of facts that inform our decisions.

- We live in an area with higher than normal transmission rates of COVID-19, where added precautions such as masks and continued social distancing are recommended. Fresno County long under-performed the rest of California in moving through the earlier reopening tiers set by the Governor. Our decisions must reflect our local conditions because we do live here.
- Fresno County's vaccination rates are below the State average. In our county, 40% of adults are fully vaccinated as compared to the State rate of 63.1%. Children under the age of 12 are not yet eligible for the vaccine, making the need to protect them particularly important.
- The long-term impacts of COVID-19 on children are unknown and, given that, it is in their best interest to not be exposed to or contract the disease in the first place to prevent unknown future—and potentially significant—impacts. A child missing several weeks of school from COVID-19 is one thing. A child missing six months or longer of school from COVID-19 is an entirely different matter.
- The Delta variant of COVID-19 is more easily transmitted and more virulent in its impact than the early variants.
- Kids do get, transmit, and die from COVID-19.
- The first child in California to die from COVID-19 was at Valley Children's Healthcare.
- 40,000 kids across the country have lost at least one parent or grandparent to COVID-19, adding the suffering of grief and loss to the pandemic's impact.
- Kids belong in school. And the best way to get kids back to school and to keep them there is take every safety precaution to protect them. Masks are one of those precautions. Masks are well-documented to slow the spread of the pandemic—along with the spread of other childhood illnesses like the flu or RSV. Wearing a mask does not inhibit a child's breathing, make them sick, or transmit bacteria.

<https://www.healthychildren.org/english/health-issues/conditions/COVID-19/Pages/Mask-Mythbusters.aspx>

- Mandatory vaccines for adults in the workplace are another element to slow the spread and to keep our kids as safe as we can. Valley Children's will require all physicians, employees, volunteers, and vendors to be fully vaccinated, as of September 21, 2021.

Valley Children's Hospital has one agenda – resting on its commitment to advocate for actions, decision and policies that are in the best interests of kids and their families. Our mission cannot be involved with philosophical or political differences that distract us from that commitment. That is why, in every instance, we strive to have our advocacy be aligned with experts, science and evidence—and the national recommendations for kids to get back to school wearing a mask is one we fully support.

On behalf of Valley Children's Healthcare, I request you communicate with our professionals and outreach staff when you wish to refer to our organization, our positions or the availability of data that we can provide. I know that our staff – including our physicians – would be more than ready to set forth the kind of full and comprehensive background that will make it possible to guide informed decision-making at CUSD. It will also prevent the kind of misinformation that was unfortunately disseminated at the July 29th Board meeting.

Please reach out to me if you wish to discuss further. I will be away from the office for the next few weeks so, in my absence, please contact Lynne Ashbeck, Senior Vice President, Community Health and Population Wellness, for assistance. Lynne can be reached at lashbeck@valleychildrens.org or 559.353.7051.

Sincerely,



Todd A. Suntrapak,
President & Chief Executive Officer

cc: Susan K. Hatmaker, Board Vice President
Tiffany Stoker Madsen, Board Clerk
Hugh Awrey, Board Member
David DeFrank, Board Member
Yolanda Moore, Board Member
Elizabeth Sandoval, Board Member
Dr. Eimear O'Farrell, Superintendent