



# PETITION FOR ADOPTION, AMENDMENT, OR REPEAL OF A STATE ADMINISTRATIVE RULE

Print Form

In accordance with [RCW 34.05.330](#), the Office of Financial Management (OFM) created this form for individuals or groups who wish to petition a state agency or institution of higher education to adopt, amend, or repeal an administrative rule. You may use this form to submit your request. You also may contact agencies using other formats, such as a letter or email.

The agency or institution will give full consideration to your petition and will respond to you within 60 days of receiving your petition. For more information on the rule petition process, see Chapter 82-05 of the Washington Administrative Code (WAC) at <http://apps.leg.wa.gov/wac/default.aspx?cite=82-05>.

## CONTACT INFORMATION *(please type or print)*

Petitioner's Name Jennifer Slater

Name of Organization \_\_\_\_\_

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## COMPLETING AND SENDING PETITION FORM

- Check all of the boxes that apply.
- Provide relevant examples.
- Include suggested language for a rule, if possible.
- Attach additional pages, if needed.
- Send your petition to the agency with authority to adopt or administer the rule. Here is a list of agencies and their rules coordinators: <http://www.leg.wa.gov/CodeReviser/Documents/RClist.htm>.

## INFORMATION ON RULE PETITION

Agency responsible for adopting or administering the rule: Board of Health

**1. NEW RULE - I am requesting the agency to adopt a new rule.**

The subject (or purpose) of this rule is: See attached Letter

The rule is needed because: See attached Letter

The new rule would affect the following people or groups: Minor children in WA state, parents, guardians

**2. AMEND RULE - I am requesting the agency to change an existing rule.**

List rule number (WAC), if known: \_\_\_\_\_

I am requesting the following change: \_\_\_\_\_

This change is needed because: \_\_\_\_\_

The effect of this rule change will be: \_\_\_\_\_

The rule is not clearly or simply stated: \_\_\_\_\_

**3. REPEAL RULE - I am requesting the agency to eliminate an existing rule.**

List rule number (WAC), if known: \_\_\_\_\_

*(Check one or more boxes)*

It does not do what it was intended to do.

It is no longer needed because: \_\_\_\_\_

It imposes unreasonable costs: \_\_\_\_\_

The agency has no authority to make this rule: \_\_\_\_\_

It is applied differently to public and private parties: \_\_\_\_\_

It conflicts with another federal, state, or local law or rule. List conflicting law or rule, if known: \_\_\_\_\_

It duplicates another federal, state or local law or rule. List duplicate law or rule, if known: \_\_\_\_\_

Other (please explain): \_\_\_\_\_

Date: March 18, 2022

To: The Washington State Board of Health Members

From: Julie Barrett and Emily H. Ling-Conservative Ladies of Washington (CLW)

Subject: Petition for a New Rule Adoption Prohibiting the Addition to the Daycare or School Requirement any Emergency Use Authorization product or any licensed medical formulation that has not completed Phase III clinical trials unless specific pediatric hospitalization and death rates are reached.

Dear Board of Health Members:

We are requesting that the WA State Board of Health (BOH) adopt a new permanent rule prohibiting the Board from adding to the daycare and school requirements any drug under an Emergency Use Authorization (EUA) or any licensed product formulation that has not yet completed Phase III clinical trials unless pediatric hospital capacity in the state of Washington is greater than 50% and the pediatric death rate is  $\geq 1\%$  for the disease the drug or formulation is intended to prevent or treat. This new rule request pertains to all avenues through which the Board has authority to add medical intervention requirements, including through regular or emergency rule-making.

We are requesting this rule because the BOH has assembled a Technical Advisory Group (TAG) to consider the addition of COVID-19 mRNA vaccines to the list of immunizations required for children to attend daycare and school in WA state. After more than two years of individual states in the US and countries all over the world analyzing and documenting the effects of Covid-19 infection on the population as well as the side effects and transmission of the virus, it has been demonstrated worldwide that children are at low risk for negative outcomes from Covid-19. The pediatric hospitalization and death rates resulting from the contraction of Covid-19 are low. Mandating a Covid-19 vaccine under an EUA for children who are not at high risk for hospitalization or death from Covid-19 is unwarranted at this time.

This new rule would affect and impact minor children and their parents and guardians in WA State.

The Addendum attached provides a list of resources to support this petition. Please provide adequate time to present more information if requested.

Sincerely,

Julie Barrett, Founder and CEO, Conservative Ladies of Washington  
Emily H. Ling, Member, Conservative Ladies of Washington

## Addendum

1. **The CDC's best estimate of the infection fatality ratio for children ages 0-17 years is 0.00002, meaning that infected children have a 99.998% infection survivability rate.**

Source: [www.cdc.gov/coronavirus/2019-ncov/hcp/planning-scenarios.html](http://www.cdc.gov/coronavirus/2019-ncov/hcp/planning-scenarios.html)

2. **COVID-19 Infection, Hospitalization, and Death By Age Group**

Source:

[www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-age.html](http://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-age.html).

3. **Pediatric mortality rate from Covid-19 is Rare**

Sources:

<https://www.ncmd.info/news/covid-deaths-children-rare/>

<https://www.nature.com/articles/s41591-021-01578-1>

4. **Data is not known for vaccine efficacy and safety for Covid-19 recovered children.**

The COVID-recovered population in this 5-11yo age group could be extremely large, with 1.8 million documented infections in this age group, and with 1 in 4.2 infections reported, up to 8 million children may have had asymptomatic exposure. **What is the expected benefit of vaccination to this group, and is it outweighed by the risks?** <https://maheshshenai.substack.com/p/the-most-neglected-subgroup-vaccination?s=r>

5. **Hospitalizations in 5-11 year-olds is the lowest for all pediatric age groups**

Hospitalizations in the 5-11 yo age has always been the lowest for all pediatric age groups since the start of the pandemic, at currently at 0.5 hospitalizations /100k persons per week. Cumulatively, there have been roughly 20 hospitalizations/100k over the entire course of the pandemic. <https://maheshshenai.substack.com/p/the-most-neglected-subgroup-vaccination?s=r>

6. **While unvaccinated 5-11 year-olds have one of the highest rates of infection compared to other vaccinated age groups, the risk of mortality and severe disease still remains the LOWEST amongst age groups.**

<https://www.cdc.gov/mmwr/volumes/70/wr/mm7036e2.htm>

<https://maheshshenai.substack.com/p/the-most-neglected-subgroup-vaccination?s=r>