

It is difficult for me to express the depth of my sadness and frustration since learning that most of our local hospital systems have decided to make masking optional in the near future, as some have already done. I have been a registered nurse for 20 years, and I am the mother of a child with a high-risk medical condition. We have managed to get to this point with no one in our family testing positive for Covid, and we are doing everything in our power to keep it that way. We have had to make many sacrifices and stay relatively isolated to keep our family healthy since public health measures have been abandoned for the most part. It's painful, but it's worth it because we know that a Covid infection for our family could have devastating consequences.

We are told that we "may choose to mask" if that makes us "more comfortable." This is not about comfort. This is about safety. Of course we will be masking any time we are seeking medical care. We mask any time we need to be in indoor public spaces. Not just for our own health and safety, but because of our responsibility to keep our community safe. There is plenty of evidence that universal masking offers far superior protection to one-way masking. There is also evidence that 40-50% of people with Covid have asymptomatic cases. So just masking when one has symptoms is woefully inadequate. I can't understand why our medical facilities wouldn't want to do everything they can to lower the chances of Covid transmission for the well-being of their patients and their staff.

But it's more complicated than that. Tell me how an infant or toddler who has no way of masking is supposed to protect themselves. Or a person who must stay at the hospital for days, weeks, or months. Or a person who needs an examination or procedure involving their nose or mouth, including dental work. Or a person who is sick and vomiting. Or a person with dementia or developmental/cognitive issues that interferes with their ability to understand the importance of masking. All of these people will be in danger. They can NOT simply "choose to mask." They are completely at the mercy of those around them and they depend on OTHERS masking to protect them. How can we abandon what we KNOW is effective in preventing transmission just because it's unpopular?

We are also told that we can ask a provider to mask. Please understand the undue burden this places on patients and the very difficult position that puts us in. There are so many people who will not be able to advocate for themselves in this way. Many people find providers intimidating and are already under a great deal of stress when they are at a medical appointment. I have had many people, including my own mother, tell me how uncomfortable they were when their provider walked in unmasked, but they felt powerless to make the request because they didn't want to be seen as "difficult." Some will fear that the quality of their care could be compromised if they insist on a mask. There are many providers with an anti-mask bias, and a patient who requires masks may be treated very differently. I know first-hand of people who have been treated very unkindly when they have made these very simple requests. The power dynamic in a provider/patient relationship can be difficult to navigate, and the responsibility for safety should not have to fall each individual patient. At a **minimum** it would be my hope that medical settings could agree to a policy that if a patient or their family members (in the case of those who are unable to mask such as infants, etc.) are wearing masks, then all staff and providers interacting with them should default to also wearing masks without any discussion. I believe

that a patient wearing a mask should be understood as a request for all members of their medical team to mask.

I'm shocked and saddened that so many healthcare providers have abandoned Covid mitigation measures so readily when the science regarding aerosol transmission and the dangers of repeat infections for everyone (not just those of us who are considered "high risk") is very clear. It is astounding to me that we are at a point where we must weigh the benefit of seeking medical and dental care against the risk of contracting Covid. Masking has become optional in almost every setting, making so much of daily life unsafe and inaccessible for people who are still trying to protect themselves and their families from Covid. We are doing what we can to adapt – working from home, homeschooling, doing curbside pickup for groceries, foregoing travel, concerts, theater, etc. But healthcare is essential. Making clinics and hospitals less safe makes important medical care less safe and less accessible. There are people who are delaying important tests and procedures because of this.

Please think about the vulnerable and high-risk members of our community who are desperate to be able to receive their care in a safe setting. This can only be achieved with improved air quality and universal masking. We are at the mercy of those around us and it is entirely clear that while compliance may not be perfect, we will be much safer with a mask requirement in place.

Thank you for your time and consideration.

Allison Taylor

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From: Amanda Wodzinski  
Sent: 6/14/2023 4:51:28 PM  
To: DOH WSBOH  
Cc:  
Subject: I support masks in healthcare

External Email

As the mother of two young children who has tried so, so hard to keep them safe during this pandemic, I wish to voice my sincerest support for masking in healthcare. I can socialize them outside, I can skip taking them to the grocery store. I cannot choose to skip an emergency room visit, I cannot choose to forgo their important ophthalmology and dental visits. I shudder to think what happens to the poor person who is unable to mask during an emergency, and their infected healthcare provider just didn't feel like it....to the newborn baby who has unmasked, contagious providers. Healthcare providers should be providing SAFE care. Even in a non-emergency situation, one-way masking, as I'm sure you are aware, is not really enough, and it's quite the burden to expect young children to be the only responsible ones in the room. Their health should be protected by the grown-ups. You are the grown-ups. Protect them.

Sincerely,  
Amanda Wodzinski

Sent from my iPhone

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From: Paul McClelland  
Sent: 6/14/2023 3:43:19 PM  
To: DOH WSBOH  
Cc:  
Subject: Masking in healthcare

External Email

Thank you for hearing our concerns. Those that are anti mask are very bold and loud, and we feel we don't have a voice in what feels like such an ableist society right now. I'm sure you have heard this before, but many high risk families have been and continue to be at risk of missing important health appointments and screenings because they can't risk major illness from Covid-19 or potential long COVID which many of us are at high risk for. Removing masks puts everyone at risk, including the healthcare workers. COVID aerosols can remain in the air for hours after someone has left a room, leaving everyone vulnerable. Masking and avoiding infection enables us to keep working and our kids to be present for their learning.

Masking should be standard of care in healthcare settings. If it can't be every day, at least have one or two days a week where everyone is masked and we can be safe. Whether seeking preventative or emergent care, no one should have to risk nosocomial infection to access care. Our healthcare system is incredibly strained and we need to protect the health of our providers.

Air quality in schools are a priority as well. Our students haven't been able to be in person since 2020 due to our risks, and it's not fair that they should have to risk their health and ours, in order to attend. While this is definitely important, we at least are privileged enough to be able to homeschool. Not everyone can do that. We don't have the privilege to not go to doctor appointments, but have to make an anxiety filled choice every time we have to decide either to keep an appointment or visit loved ones in the hospital.

With longer allergy and wildfire seasons and a variety of circulating airborne viruses, healthy buildings are essential. Please prioritize all essential buildings like public schools, licensing, jury duty, healthcare settings, transportation, grocery/pharmacy, etc.

As far as schools, If high quality hvac systems can't be installed, Corsi Rosenthal boxes can be built inexpensively and implemented for the fall. All essential spaces like government buildings should have clean indoor air with readings posted so people can feel more safe entering and living their lives as they deserve to...without constant fear.

Thanks again for listening and taking the time to read this. We are trusting you to protect WA state residents. Especially those that people seem to be ok with leaving behind in what is still a pandemic, to fend for themselves.  
The McClellands

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From: Sara Cohen  
Sent: 6/14/2023 1:30:58 PM  
To: DOH WSBOH  
Cc:  
Subject: Protection from airborne pathogens

External Email

Hello,  
Please accept this public comment related to today's board of health meeting.

Avoiding Covid-19 infection is still important for Washington residents. It enables us to keep working and our kids to be present for their learning.

Masking should be standard of care in healthcare settings. Whether seeking preventative of emergent care, no one should have to risk nosocomial infection to access care. Our healthcare system is incredibly strained and we need to protect the health of our providers.

It is time for a clean indoor air revolution. With longer allergy and wildfire seasons and a variety of circulating airborne viruses, healthy buildings are essential. Please prioritize WA public schools - Corsi Rosenthal boxes can be built and implemented for the fall. All essential spaces like government buildings (licensing, jury duty), healthcare settings, schools, transportation, grocery/pharmacy should have clean indoor air with readings posted.

Sara  
Washington state resident, marketing professional, parent

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From: Kaitlin Gregg Goodman  
Sent: 6/14/2023 1:50:46 PM  
To: DOH WSBOH  
Cc:  
Subject: Public comment on the WA BOH meeting

External Email

To the Washington State Board of Health -

Please accept this public comment related to the most recent Board of Health meeting.

Avoiding Covid-19 infection is still incredibly important for Washington residents. We still do not fully understand the long-term effects of Covid infection; thousands of Americans are suffering from Long Covid symptoms without clear treatment options; and hundreds of Americans continue to die each day as a result of Covid infection. Avoiding infection enables our communities to continue working, growing, learning, and thriving.

Masking should be the standard of care in healthcare settings. Whether seeking preventative or emergent care, no one should have to risk nosocomial infection to access care. Our healthcare system is incredibly strained and we need to protect both the health of our providers and patients seeking care.

It is time for a clean indoor air revolution. With longer allergy and wildfire seasons and a variety of circulating airborne viruses, healthy buildings are essential. Please prioritize WA public schools and act immediately to improve indoor air quality through better ventilation and with air filters in all school settings. Please also prioritize indoor air quality in essential spaces like government buildings (licensing, jury duty), healthcare settings, public transportation/airports, and grocery stores/pharmacies.

I am a public health professional with an MPH from Brown University and my spouse is a healthcare provider, and we urge the Board of Health to continue to support Covid-19 infection prevention strategies.

Sincerely,  
Kaitlin Goodman

Kaitlin Gregg Goodman  
(530) 304-9220  
kaitlin.g.goodman@gmail.com <<mailto:kaitlin.gregg@gmail.com>>

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From: Jeff Hoerth  
Sent: 6/14/2023 4:21:21 PM  
To: DOH WSBOH  
Cc:  
Subject: Comments supporting continued COVID measures

External Email

To whom it may concern:

I was unable to attend today's meeting but reviewed the materials shown to be presented.

I write to urge a continuation of measures to fight COVID infections including mask mandates in healthcare settings and air-cleaning upgrades to public buildings including schools.

I read some of the comments from the April 13th meeting. I see the anti-vaxxers were out in force. I read studies from 2022 and 2023 describing research into the effects of catching COVID and it is alarming. The cost to society will be significant if COVID is allowed to be viewed as commonplace as the flu. COVID does much more damage internally to the body than the flu. While many see financial opportunities in sickness, I would hope a Board of Health is focused on preventative measures instead.

I continue to mask in all indoor settings and at my workplace. I advocate for air circulation and use HEPA air filters. It amazes me that healthcare settings of any kind should celebrate the removal of masks. Aside from the obvious task of not making patients even more sick, early in the pandemic doctors and nurses recognized the consequences of catching COVID themselves. The turnover rate amongst staff isn't solely due to burnout. And some of that burnout can even be attributed to staff lost due to COVID.

Do not let capitalism and politics dictate decisions to protect the health of the citizens of the state of Washington. Do not sacrifice the immuno-compromised and other groups more susceptible to COVID. Do not let the loud voices of ignorant, uncaring, or ill-informed people be the basis for honest and ethical decision-making. Follow the science as was trumpeted at the start of the pandemic. And educate the public about the findings whether the public wants to hear it or not.

Jeff Hoerth  
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Kirkland, WA 98034  
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206-353-1254 <tel:(206)%20353-1254>

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From: Angela Klemp  
Sent: 6/14/2023 1:47:30 PM  
To: DOH WSBOH  
Cc:  
Subject: Public Comment on Masking

External Email

Hello,

I heard a bit about the most recent Board of Health meeting and the number of public comments some community members made against continued masking.

There are many of us who still strongly support masking and other mitigation efforts. We were thrilled when many hospital systems decided to continue masking beyond the state requirements expiring and many of us are hopeful they will extend these protections again beyond the upcoming July 3rd date.

Despite mask opponents often being the loudest, they do not speak for us all. Some of us would have liked to attend the meeting in-person and express these opinions to you directly, but it is not comfortable or safe for us to be around so many unmasked people, especially indoors in a room without proper HEPA filtration. Those of us who are immunocompromised (and those still trying to avoid an initial COVID infection) have to do daily risk calculations. It's exhausting. COVID-exposure like that adds a barrier to many of us being able to participate in our community events. Please do not add these same barriers to our ability to seek medical care. Getting treatment shouldn't pose a risk of getting sicker, and we need to also protect our physicians and staff who are at greater exposure risk.

Thank you,

Angela Klemp



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From: Aubriana Teeley  
Sent: 6/14/2023 3:10:13 PM  
To: DOH WSBOH  
Cc:  
Subject: Masking in healthcare

External Email

Hello,

As a psychologist, I want to voice my support for requiring respirator masks in healthcare. I see clients in person, and masks have helped protect me from getting Covid-19, as well as other respiratory infections from clients and parents of clients in my office. I know of at least one occasion where someone in my office tested positive for Covid shortly after I met with them, and thanks to masks, I remained negative.

To the best of my knowledge (I regularly use Cue molecular tests at home), I have not contracted Covid yet, and I hope to stay that way as long as possible. I am concerned about the effects of long Covid, as I have a colleague who had to stop practicing and close her practice due to severe brain fog. Additionally, if I get sick, I cannot provide care to clients while I am ill. This can be extremely dangerous if someone is in crisis and/or is suicidal. As someone who is self-employed, I also do not have sick time and would potentially lose thousands of dollars of income.

Masking in healthcare is important to me as a private citizen as well. I do not want to have to worry about contracting Covid when going for routine medical screenings or treatments. I have already stopped donating blood at Bloodworks Northwest because masks are no longer required. As much as I would love to help out my community and save lives, I'm not willing to risk my own to do so.

And finally, please prioritize clean, healthy air in all public buildings, especially schools and healthcare!

Thank you,  
Dr. Aubriana Teeley

Aubriana Teeley, PsyD (she/her)  
Licensed Psychologist  
AMT Psychology  
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Client portal: <https://www.therapyportal.com/p/teeleypsych/>

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.therapyportal.com%2Fp%2F>>

The above email may contain patient identifiable or confidential information. Because email is not secure, please be aware of associated risks of email transmission. If you are a patient, communicating to AMT Psychology via email implies your agreement to email communication. The information is intended for the individual named above. If you are not the intended recipient, any disclosure, copying, distribution or use of the contents of

this information is prohibited. Please notify the sender by reply email, and then destroy all copies of the message and any attachments.

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From: angela Bartholomaus  
Sent: 6/14/2023 4:50:31 PM  
To: DOH WSBOH  
Cc:  
Subject: Future of Public Health - We Deserve a Future

External Email

To Whom It May Concern,

We say "we have the tools", yet I see no adoption of ventilation standards (how many air exchanges required an hr?), CO2 monitors, sensor tech to detect covid in air from PNNL, Corsi Rosenthal boxes and n95+ (especially universally in healthcare). We have tools, yet are refusing to use them. 10 days of quarantine are also needed, not 5, as people still infectious after 5 days.

I have been infected multiple times now at the doctors office because people are not wearing n95+ and sick staff is allowed to work. This last time staff in a surgical (not effective against covid spread) gave me covid. One way respirator use is not effective and I have no way to protect myself. I am up to 5 covid infections and multiple rounds of organ damage. This is with "mild" illness as we call it and me even being partially asymptomatic. I was never hospitalized, young and even being vaccinated has not protected me.

I have been in lockdown since 2020. I caught COVID in the first wave and only leave my house to go to the dr. My young child stopped walking from this illness and suffered tremors, brain fog, fatigue, loss of use of hands and feet, etc as he got long covid as well. Im tired and sad we ignore science showing we cant live with this. Vascular damage adds up we get with every infection and cant feel. Cancer from the inflammation is on the rise, plus there are recent studies showing the fusing of brain cells from infection, dementia increasing, heart damage, etc and nobody is spared. Some only think they are special enough to not be.

We need to start requiring universal n95 in hospitals by everyone as covid spreads like cigarette smoke in a room. High risk cant protect themselves as this is a community issue that takes all parties. Far UVC, sensors to detect in air, Corsi Rosenthal boxes, etc should all be installed starting in schools and hospitals. I cant send my kids to school. Fixing thie issue takes a layered approach. Im an engineer and that is how you get rid of risk. I cant participate in society, nor can my family.

WHO says 1 in 10 infections lead to long covid. Lets do a math problem. How long will it take for our population to have the majority disabled with long COVID by getting 1 infection a year? The answer is 7 years. Now, we know 1 infection a year is a low estimate as every season is covid season, since it is not endemic and a pandemic happening around the world and not seasonal. Let's change it to 2 infections a year and we are now at 3.5 years for over half our population to be disabled by long COVID.

The time to act is now. Not when the majority of us are disabled. My children deserve a future. There is no science backing getting this repeatedly is fine for your health and all the research shows exactly the opposite. Did you know HIV starts with a mild illness, then the long term consequences set in years later as they are showing with COVID and CD8 T cells? How many people now say they are sick all the time (hint: it is because they have wrecked their immune system with a covid infection)? Each infection must be avoided, even if vaccinated and just because you were fine the first time, you eventually wont be. You also cant necessarily feel organ damage, dementia, vascular damage.

Angela

Sent from my iPhone

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From: Lindy Greer  
Sent: 6/14/2023 1:32:57 PM  
To: DOH WSBOH  
Cc:  
Subject: Masks in healthcare

External Email

I can't begin to describe how profoundly disappointed and scared I am that masking might go away in healthcare settings.

When we learn better, we should do better. And it's really that simple.

We learned a lot from the AIDS epidemic and blood borne pathogens. It's time we start saying the truth, that covid is airborne and how aerosols work. The general public doesn't understand and this is a huge failure of public health and our government leaders.

Infection isn't inevitable, but it absolutely will be if masking is dropped in healthcare settings. It's wrong! Do not give in to the anti-vaxxers and anti-maskers. You have a choice, and it's a moral responsibility on your part to keep people as safe as possible.

Millions of people have compromised immune systems and they deserve to get healthcare and not get sick with covid and other airborne diseases while getting healthcare.

Lindy Greer

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From: Evelyn E Dial  
Sent: 6/14/2023 3:34:46 PM  
To: DOH WSBOH  
Subject: Please recommit to Covid-19 mitigation measures

External Email

To whom it may concern:

Please accept this public comment related to today's board of health meeting.

Avoiding Covid-19 infection is still important for Washington residents. It enables us to keep working and our kids to be present for their learning.

Masking should be the standard of care in healthcare settings. Whether seeking preventative or emergent care, no one should have to risk nosocomial infection to access care. Our healthcare system is incredibly strained and we need to protect the health of our providers.

It is time for a clean indoor air revolution. With longer allergy and wildfire seasons and a variety of circulating airborne viruses, healthy buildings are essential. Please prioritize Washington's public schools: Corsi Rosenthal boxes can be built and implemented for the fall. All essential spaces like government buildings (licensing, jury duty), healthcare settings, schools, transportation, grocery/pharmacy should have clean indoor air with readings posted.

Many of us, like myself, are already experiencing chronic illness and are trying our best to avoid infection or reinfection with Covid-19. However, it is too big an expectation for individuals alone. We need the support of public health to protect those who want to avoid getting sick.

I would love the opportunity to deliver this message to you all in person at one of your meetings. But the lack of mask requirements, ventilation standards and other mitigation measures makes it a dangerous environment for me. These are the types of barriers that vulnerable folks are faced with just trying to live our daily lives: risking infection to access medical care, to go to work, to go to the grocery store, or to send our children to school.

This is why we need to set and maintain Covid mitigation measures like masking in healthcare settings and indoor air quality standards.

Thank you for considering my comment.

Sincerely,  
Evelyn Dial

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From: Roberta Klarreich  
Sent: 6/14/2023 4:56:33 PM  
To: DOH WSBOH  
Cc:  
Subject: Public comment on today's BOH meeting

External Email

I'm writing to share my comment, since I am unable to attend unmasked in-person meetings for safety reasons. I want you to be aware that because your meeting had limited access, you heard this afternoon from a sampling of people who do not represent all Washington residents.

I am writing in support of the protective measures that should never have gone away: mask requirements in public settings, especially health care settings, schools, and public transit; and a push for serious upgrades to air quality (filtration and ventilation). All people have a fundamental right to basic safety and the ability to protect ourselves from disease, and to access public places.

Please do the right thing and make all spaces safe where people have to be. We need mask mandates in public places, education and access to high-quality masks such as N95s, and push for better air quality. Kids and teachers deserve to breathe clean air all day in school. We all deserve that.

Thank you for your attention to my comment.

Roberta Klarreich  
Seattle

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From: Anitra Gorham  
Sent: 6/14/2023 5:42:13 PM  
To: DOH WSBOH  
Cc:  
Subject: Keep masking in healthcare settings

External Email

Dear members of the Washington State Board of Health,

I was unable to attend today's meeting. However, I wanted to provide public comment to the effect that masking has been an important tool in reducing in-hospital and in-healthcare infections, and the dropping of the mask requirements in healthcare settings create an increasing barrier to accessing care.

Healthcare settings should retain masking not just for COVID, but to reduce transmission of flu and other respiratory infections. This would make accessing care less risky for those with compromised immune systems, but also would protect the health of our valuable healthcare staff.

Masking will make healthcare more accessible to the most vulnerable members of our community, and reduce harm.

Sincerely,

Anitra Gorham



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From: Anna Klastorin Levine  
Sent: 6/14/2023 2:20:25 PM  
To: DOH WSBOH  
Cc:  
Subject: Public comment for today BOH meeeting

External Email

☐ please accept this as a public comment.

For the safety of the staff, patients, and families I urge you to continue the mask mandates in hospitals. Medical facilities are one of the few spaces still safe and inclusive for everyone, from kids too young to mask or be vaccinated to the immunocompromised, disabled, or high risk. Medical care is not "optional" care and all need to be able to safely access.

Our family asks that you please keep your offices and hospital open and equitable to all by requiring masks for all above 2 who are able to wear one so we continue protecting each other. Not just from COVID which is still an ongoing issue but from all the other illnesses circulating due to immunity theft from so many COVID infections in our local population.

Please keep up the great work by keeping masks in place after early July.

Thanks so much  
Anna Levine and family

Sent from my iPhone

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From: Rachel Jackson  
Sent: 6/14/2023 2:19:57 PM  
To: DOH WSBOH  
Cc:  
Subject: Re: please keep masking in health care

External Email

Please accept this public comment related to today's board of health meeting.

On Wed, Jun 14, 2023 at 12:58 PM Rachel Jackson <gururae@gmail.com  
<mailto:gururae@gmail.com> > wrote:

Hello,

I am a Seattle area resident and am writing to beg that you do not end required masking on July 3rd  
<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fnwhrn.org%2Fregional-healthcare-organizations-adopt-joint-consensus-statement-on-the-continuation-of-masking-in-healthcare-facilities%2F&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cffc269fba43d4016b20208db6d1d1886%7C1>>  
. I could not attend the meeting in person because there was no indication that there would be Covid precautions there. I have multiple co-morbidities that make it very dangerous for me to catch Covid.

Removing the mask mandate will endanger our families and community members and allow the virus to spread in this high risk setting further killing and disabling Washingtonians. Patients deserve care, not covid.

We have already lost over 15,500 Washingtonians to Covid. Keep the mask mandate and keep Washingtonians safe.

There is no good reason to end masking. The people most vulnerable to Covid are also the people who most need access to safe healthcare...and they need to access it more frequently than less vulnerable people.

Doing things to take care of your health shouldn't make you sick. "No Preventable Harms."

- Rachel Jackson

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From: Cheryl Robinson  
Sent: 6/14/2023 1:19:46 PM  
To: DOH WSBOH  
Cc:  
Subject: Include in Public Testimony for Board of Health

External Email

I am writing to advocate for masking in healthcare facilities. Especially for families like mine, with someone recovering from a recent organ transplant, this is lifesaving and also a matter of equity. Even though I may not be high risk, those in my family are and I need to do all I can to protect them by receiving care in facilities where masking is an infectious disease standard practice. Thank you for your time and consideration.

Respectfully,  
Cheryl Robinson

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From: Rachel Jackson  
Sent: 6/14/2023 1:00:30 PM  
To: DOH WSBOH  
Cc:  
Subject: please keep masking in health care

External Email

Hello,

I am a Seattle area resident and am writing to beg that you do not end required masking on July 3rd

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fnwhrn.org%2Fregional-healthcare-organizations-adopt-joint-consensus-statement-on-the-continuation-of-masking-in-healthcare-facilities%2F&data=05%7C01%7Cwsboh%40sboh.wa.gov%7C6c6534ade1f741c738d608db6d11d1ce%7C1>>  
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Doing things to take care of your health shouldn't make you sick. "No Preventable Harms."

- Rachel Jackson

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~ Rachel Jackson (she/her)

Vox Fabuli Puppets

<<https://gcc02.safelinks.protection.outlook.com/?url=http%3A%2F%2Fwww.voxfabuli.com%2F&data=059>

Vox Fabuli, Vox Dei

Watch the C R E E P Y D O L L trailer

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fyoutu.be%2FkbY9x7Szcw4&data=>

Official Selection of the Poulsbo, Crypticon Seattle, and Sarah of Horror Film Festivals  
2022

IG: voxfabuli

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.instagram.com%2Fvoxfabuli>

Twitter: puppetmanos

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Ftwitter.com%2FPuppetMANOS&da>

My working day may not be your working day. Please do not feel obliged to reply to this email outside of your normal working hours.

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From: Allison Taylor  
Sent: 6/14/2023 1:55:09 PM  
To: DOH WSBOH  
Cc:  
Subject: testimony for WA Board of Health meeting



*attachments\20063595220B47D0\_WABOH testimony 6-15-23.pdf*

External Email

Please find my testimony for the upcoming meeting attached.

Thank you for your time and consideration.  
Allison Taylor

It is difficult for me to express the depth of my sadness and frustration since learning that most of our local hospital systems have decided to make masking optional in the near future, as some have already done. I have been a registered nurse for 20 years, and I am the mother of a child with a high-risk medical condition. We have managed to get to this point with no one in our family testing positive for Covid, and we are doing everything in our power to keep it that way. We have had to make many sacrifices and stay relatively isolated to keep our family healthy since public health measures have been abandoned for the most part. It's painful, but it's worth it because we know that a Covid infection for our family could have devastating consequences.

We are told that we "may choose to mask" if that makes us "more comfortable." This is not about comfort. This is about safety. Of course we will be masking any time we are seeking medical care. We mask any time we need to be in indoor public spaces. Not just for our own health and safety, but because of our responsibility to keep our community safe. There is plenty of evidence that universal masking offers far superior protection to one-way masking. There is also evidence that 40-50% of people with Covid have asymptomatic cases. So just masking when one has symptoms is woefully inadequate. I can't understand why our medical facilities wouldn't want to do everything they can to lower the chances of Covid transmission for the well-being of their patients and their staff.

But it's more complicated than that. Tell me how an infant or toddler who has no way of masking is supposed to protect themselves. Or a person who must stay at the hospital for days, weeks, or months. Or a person who needs an examination or procedure involving their nose or mouth, including dental work. Or a person who is sick and vomiting. Or a person with dementia or developmental/cognitive issues that interferes with their ability to understand the importance of masking. All of these people will be in danger. They can NOT simply "choose to mask." They are completely at the mercy of those around them and they depend on OTHERS masking to protect them. How can we abandon what we KNOW is effective in preventing transmission just because it's unpopular?

We are also told that we can ask a provider to mask. Please understand the undue burden this places on patients and the very difficult position that puts us in. There are so

many people who will not be able to advocate for themselves in this way. Many people find providers intimidating and are already under a great deal of stress when they are at a medical appointment. I have had many people, including my own mother, tell me how uncomfortable they were when their provider walked in unmasked, but they felt powerless to make the request because they didn't want to be seen as "difficult." Some will fear that the quality of their care could be compromised if they insist on a mask. There are many providers with an anti-mask bias, and a patient who requires masks may be treated very differently. I know first-hand of people who have been treated very unkindly when they have made these very simple requests. The power dynamic in a provider/patient relationship can be difficult to navigate, and the responsibility for safety should not have to fall to each individual patient. At a minimum it would be my hope that medical settings could agree to a policy that if a patient or their family members (in the case of those who are unable to mask such as infants, etc.) are wearing masks, then all staff and providers interacting with them should default to also wearing masks without any discussion. I believe that a patient wearing a mask should be understood as a request for all members of their medical team to mask.

I'm shocked and saddened that so many healthcare providers have abandoned Covid mitigation measures so readily when the science regarding aerosol transmission and the dangers of repeat infections for everyone (not just those of us who are considered "high risk") is very clear. It is astounding to me that we are at a point where we must weigh the benefit of seeking medical and dental care against the risk of contracting Covid. Masking has become optional in almost every setting, making so much of daily life unsafe and inaccessible for people who are still trying to protect themselves and their families from Covid. We are doing what we can to adapt – working from home, homeschooling, doing curbside pickup for groceries, foregoing travel, concerts, theater, etc. But healthcare is essential. Making clinics and hospitals less safe makes important medical care less safe and less accessible. There are people who are delaying important tests and procedures because of this.

Please think about the vulnerable and high-risk members of our community who are desperate to be able to receive their care in a safe setting. This can only be achieved with improved air quality and universal masking. We are at the mercy of those around us and it is entirely clear that while compliance may not be perfect, we will be much safer with a mask requirement in place.

Thank you for your time and consideration.

Allison Taylor



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Thank you for your time and consideration.

Allison Taylor



2. "Hospital-onset COVID" should be defined as infections diagnosed after 5+ days of hospitalization. The CDC currently defines hospital-onset COVID as as only those cases diagnosed in people who are still in the hospital after 14 days of hospitalization. This vastly underestimates

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fpubmed.ncbi.nlm.nih.gov%2F34315942%2F> hospital-acquired COVID, particularly because with current variants, it only takes 2-3 days from COVID exposure to developing symptoms

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fjamanetwork.com%2Fjournals%2Fama%2F1932708%2F>, and because the average hospital stay is only about 5.4 days

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdc.gov%2Fnchs%2Fdata%2F2021%2FHospAdmis.pdf&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C> 2021%2FHospAdmis.pdf&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C

The evidence that informs these suggestions includes:

During the first three months of 2023, U.S. hospitals reported an average of 1231 patients per week

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fhealthdata.gov%2FHospital%2FCovid-19-Reported-Patient-Impact-and-Hospital-Capacity%2F62h-syeh&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C>

that had caught COVID during their stay, with a high of 2287 patients with hospital-acquired COVID in the first week of January 2023 (using the 14-day cutoff). The UK has documented even higher rates

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.theguardian.com%2Fsociety%2Fpeople-likely-caught-covid-while-hospital-inpatients-in-england&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C>

, but the UK defines hospital-onset COVID as cases diagnosed after 7 days of hospitalization. The Biden administration never released data

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.politico.com%2Fnews%2F2023/04/27/cdc-streamline-hospital-covid-19-data-reporting-requirements&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C>

showing how prevalent COVID spread has been inside individual hospitals, and the CDC stopped requiring hospitals to report

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.aha.org%2Fspecial-bulletin%2F2023-04-27-cdc-streamline-hospital-covid-19-data-reporting-requirements&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C> hospital-onset COVID in April 2023.

COVID has been one of the top five

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.nih.gov%2Fnews-events%2Fnews-releases%2F2023-04-27-cdc-streamline-hospital-covid-19-data-reporting-requirements&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C>

2021&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C

major causes of death

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cnn.com%2F2023%2F05%2F04%2Ffourth-leading-cause-of-death%2Findex.html&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C>

in the US since 2020, and many of those deaths were likely due to hospital-acquired COVID, which has a 5

<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.ncbi.nlm.nih.gov%2Fpmc%2Farticle%2FPMC6111111%2F&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C>

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<<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2F12ft.io%2Fproxy%3Fq%3Dhttps%3A%2Fwww.cdc.gov%2Fncb%2Fnews%2Fpress%2F2023%2F03%2Fdie-of-covid-after-catching-virus-while-in-hospital-20230330&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0e2170111%7C>

p5cwjx.html&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C1  
% mortality rate. This is significantly higher than several of the other infections CMS  
includes in its HAC Reduction Program. Catheter-Associated Urinary Tract Infection has a  
mortality rate of 2.3%  
<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.cdc.gov%2Finfectioncontrol%  
, Surgical Site Infections for Abdominal Hysterectomy and Colon Procedures have a  
mortality rate of 3%  
<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fqualitynet.cms.gov%2Ffiles%2F62  
, and Clostridioides-difficile (C. diff) infection has a mortality rate of 7.9%  
<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fpubmed.ncbi.nlm.nih.gov%2F356  
. Thus, hospital-onset COVID is well worth preventing.

Nearly 40% of all US residents

<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fciviqs.com%2Fresults%2Fcoronav  
are concerned about COVID outbreaks. Preventing COVID in the hospital is an equity  
issue. People of color continue to suffer disproportionate rates of COVID deaths  
<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fmedicalxpress.com%2Fnews%2F2  
05-declines-racial-disparities-covid-  
mortality.html&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C  
. Half of health workers  
<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.va.gov%2Fboston-  
health-care%2Fnews-releases%2Fwhy-did-some-covid-positive-healthcare-staff-still-go-  
to-  
work%2F&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0  
go to work with COVID symptoms, amid huge health worker shortages. CMS needs to  
protect both patients and health workers.

Even when community transmission is low, healthcare settings are the most likely place  
where people getting care for COVID could encounter vulnerable patients who could be  
harmed by COVID. Covid outbreaks are already happening in

<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.forbes.com%2Fsites%2Fbru  
area-hospital-reinstitutes-face-mask-mandate-after-covid-19-  
outbreak%2F&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C  
hospitals that ditched masks. If your hospital roommate has COVID, you have a 4 in 10  
chance of catching it  
<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fpubmed.ncbi.nlm.nih.gov%2F341  
from them. No one should go to the hospital for a heart attack, an elective surgery or to  
deliver a baby and catch COVID.

In spite of these facts, hospital administrators lobbied public health departments

<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.bostonglobe.com%2F2023%  
groups-call-mass-keep-mask-mandates-health-care-  
settings%2F&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C1  
to end COVID protections in healthcare. Vulnerable patients can still become severely ill  
or die from COVID. Anyone can get Long COVID, which disables over 4 million people  
<https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.brookings.edu%2Fresearch%  
data-shows-long-covid-is-keeping-as-many-as-4-million-people-out-of-  
work%2F&data=05%7C01%7Cwsboh%40sboh.wa.gov%7Cbf0b5260bc9d441f5dc008db6d3d65dc%7C11d0  
in the United States. Hospitals should be protecting us from COVID when we are in their  
care.

Sincerely and desperately,

Natalie McNair  
Longview, WA