

**BOARD OF HEALTH MEETING
CITY OF DE PERE, WISCONSIN – September 16, 2019**

The Board of Health of the City of De Pere, Wisconsin met in regular session in the Nicolet Conference room at City Hall, on Monday, September 16th at 5:30 p.m.

1. Call to Order

The meeting was called to order by Dennis Hibray at 5:31 pm.

2. Roll Call

Roll call was taken and the following members were present: Casey Nelson, Dennis Hibray, Ryan Jennings, Teresa Gulyas and Dr. Michael McHenry. Also present were Deborah Armbruster and Kelly Burke. Public attendees were Tara Czachor, Jennifer VanDenBusch, Megan Buczek and Amy Schauland. Dr. Erdman arrived at 5:35 pm.

3. Approval of May 20, 2019 Meeting Minutes

Casey Nelson made a motion, seconded by Dr. Michael McHenry to approve the minutes of the May 20, 2019 Board of Health Meeting. Upon vote, the motion passed unanimously.

4. Introduction of new Board of Health member – Teresa Gulyas

Teresa Gulyas introduced herself. She recently moved from Virginia. She grew up in Wisconsin. She returned to De Pere to spend time with her mom, Patricia Finder-Stone, who served on the De Pere Board of Health. Teresa graduated from the University of Wisconsin Madison and practiced in a variety of Public Health settings.

5. DRAFT 2020 Health Department Budget

Deborah Armbruster explained that not much has changed in our budget. Our programs have stayed the same. We have added the Stay at Home assistance program in the past few years. We did not add the Stepping On program in the budget because that will begin in 2020. Debbie explained the performance measures are in line with what they should be for our grants. Our consortium with Menasha is still in place for DATCP. Deborah Armbruster reported that we will continue the Consortium with Menasha. We will pay them \$2,350 for January through June, 2020. Trista doesn't need as much time with Todd, so the price is lower. After June, Trista will be on her own. We did our self-assessment for the consortium for 2019 and now we have to put the agent contract together. Once that is approved (probably in April, 2020), Trista Groth would no longer need to have Todd Drew overseeing her as we would have an independent agent contract. Then, Trista will need to be standardized within 18 months. Debbie has asked for that process to be accelerated.

Deborah Armbruster reported that it is our goal to have one additional staff member at each meeting to give updates/ overview (beside herself and Kelly Burke). With environmental health, due to legal reasons, no details can be given

in case the issue comes to a hearing in front of the Board of Health. Debbie reported that she had to involve one of the Board members with an issue recently and should that issue come to a hearing, that Board member will not be able to vote.

Casey questioned the agent contract versus the Consortium contract. Debbie explained that in the past we had our own agent contract with the State of Wisconsin and did not need to affiliate ourselves with anyone. Because we do not have a state standardized sanitarian right now, we needed the consortium to maintain an agent contract. Technically, Menasha has our agent contract right now.

Dennis Hibray summarized that according to the budget, we are looking at a 1.93% increase from last year to this year. Debbie reported that a few of our grants decreased by about \$100. However, due to raising our fees, we are bringing in more money through DATCP.

Dr Michael McHenry questioned the negative value in the medical supplies to date under the general fund. Debbie explained that this is a credit of the money we have not used in this account. We are slowly lowering the budget for this account as we tend not to use it all and increasing our office supplies budget. Debbie explained that our Helmer refrigerator was able to be paid for by our preparedness grant because we use it for all vaccine used in routine and emergency situations. Dr. Erdman questioned what vaccines our Preparedness grant was used for. Debbie explained that Preparedness money is not normally for vaccine, but we were able to purchase 120 doses of adult flu vaccine under our Preparedness grant this year which we gave to the community during a mass exercise.

Dr. Michael McHenry questioned the decrease in health and dental costs to employees. Debbie explained that our HR department did get a reduction for these expenses for next year. Casey Nelson added that there are healthy fund balances for health and dental.

Board members questioned the 83% immunization goal. Debbie reported that this number is set by the state to qualify for the grant money. Dr. Erdman added that 83% is not adequate for herd immunity; you would need 90-95%. Our personal goal is 90%. To reach this benchmark, Debbie reported that the De Pere Health department has put up a banner on Reid St. We are promoting immunizations through the schools. Sara Lornson, Erin Bongers, and Debbie Armbruster are planning to visit the clinics in De Pere with emphasis on the HPV vaccine as cancer prevention. Dennis Hibray added that it is a difficult message to promote when there are a few people on the news saying to not get vaccinated. It is frustrating for public health.

Ryan Jennings asked if money was allocated to promote what the Health Department does, such as pamphlets, etc. Debbie explained that we are trying to do our advertising with the grant moneys for the specific program. We have increased office supplies by \$500 to help with additional advertising and

increasing prices. We have moved some our printing in house to help save money on our advertising. Kelly Burke explained that we have a lease with a printer company which covers all our toner. Then we just pay a small charge per print, which is a small fraction of what we would pay Badgerland Printing. It is much more cost effective to print in house. We do not use the high quality paper, but since we design the brochures ourselves, the imagery is identical. By saving the money from printing in house, we can do more advertising. Deborah Armbruster explained that we really like Badgerland Printing, and still use them for business cards and other miscellaneous items.

Dennis Hibray added that we had a Strategic Plan meeting recently and this was an area we were addressing – how we can promote public health activities and look at potential funding sources from the community to help support our programs.

Casey Nelson made a motion to approve the draft health department budget. Dr. Michael McHenry seconded the motion. Upon vote, the draft budget was approved.

6. DRAFT 2020 Board of Health Budget

Debbie reported that we cut our training budget from \$200.00 to \$100.00 because it was not being used.

Ryan Jennings made a motion to approve the draft Board of Health budget. Dr. Michael McHenry seconded the motion. Upon vote, the draft budget was approved.

7. Progress of Strategic Planning for 2020-2024

Debbie reported that we have had 3 meetings for Strategic Planning. The last time Strategic Planning was done was in 2014 for the years of 2014-2019. Now we are completing Strategic Planning for the next 5 years. We had some board members attend the meetings, giving input, which was really helpful for us. We have one more meeting and the plan will be completed for our November meeting. This has been a new process for our staff. We will meet again on October 21st and have the final Strategic Plan draft at our November meeting.

8. Community Health Updates regarding staff trainings, outreach activities and quarterly disease report

Debbie reported that the updated information is in the packet. Dennis Hibray had a question on the disease incidence rate. Debbie reported that Chlamydia is up and Lyme's is being reported more frequently. Carbon monoxide is now being reported. Dr. Erdman added that the physicians are seeing a lot of summer carbon monoxide poisonings due to power losses where people use unventilated generators. This is in addition to the occasional suicide attempt. We need to do more education on the proper use of generators and using carbon monoxide detectors. Perhaps we can find a grant for this or corporate sponsors to distribute carbon monoxide detectors. Dr McHenry suggested a program where carbon monoxide detectors are given with the sale of a generator. Debbie added that with our Stay at Home Assistance program, we do replace carbon monoxide detectors (which were donated through the Red Cross).

Teresa asked if there was anything in the budget to cover an umbrella of environmental things. She reported that she attended a program - Clean Bay Backers who were talking about coal tar sealants causing increase in pediatric cancers. Casey Nelson added that De Pere has a Sustainability committee who will be bringing that issue to City Council to ban the use of coal tar sealants. Asphalt based or concrete based would be allowed. Dennis Hibray suggested that some of the education regarding generators may be put in the city newsletter. Debbie added that we could also do an ad at the De Pere Cinema. Dennis also suggested giving Mike Warner a call at the state indicating that we have noticed an issue with carbon monoxide from generators in our area and see if they can put information together to send out.

9. Public Comment on Matters not on the Agenda

Tara Czachor, a parent who has children in the West De Pere school district stated that she appreciates the Health Departments goal of reducing communicable disease, but has serious concerns about the policies currently in use in local health departments and the Wisconsin Department of Health, which are based on recommendations made by pharmaceutical companies. She wanted to address why some parents may be hesitant to vaccinate according to CDC recommendations. Per Tara, recently the Journal Sentinel stated that 50,000 unvaccinated children have returned to school in Wisconsin. Tara clarified that there may be 50,000 children who use an exemption, but they may only be opting out of 1 required dose to attend school. This does not mean all these children are completely unvaccinated. Per the Wisconsin Department of health, only 1.1% of students had waived all immunizations during the 2018-2019 school year, which is only about 10,600 students. Per Tara, shouldn't we be questioning why parents are opting out of at least one of the required vaccines on the schedule? Tara does not believe her tax dollars should be spent by any health department on lobbying for legislation aimed at discriminating against a small minority of families who have decided that the one size fits all vaccine policy is not in the best interest of their child. By lobbying for Representative Gordon Heinz's bill to remove the personal conviction vaccine exemption, government health officials are proving they are more interested in policy than in betting societal health. Parents can consult with their trusted medical provider to make fully informed decisions regarding the use of vaccines for their children. The state should not compel or mandate the use of liability free pharmaceutical products. Tara stated that these mandates are an assault on individuals to receive full and informed consent. Informed consent allows us to choose what goes into our bodies and our children's' bodies. Tara explained that people have rational and valid reasons for not vaccinating, including seeing their child have a severe reaction. Parents are all that stands between corporate power and our children. Tara stated that as a college educated mother, she would like the Board to consider the following three questions:

1. Can we really trust pharmaceutical companies with our health and the health of our children?
2. Are the vaccines manufactured by pharmaceutical companies like Merck truly safe and effective?

3. If vaccines have not been evaluated for their carcinogenic or mutagenic potential or potential to impair fertility, can we really say that the science is settled?

Tara pointed out that according to the alliance for human research protection, first do no harm. The past 50 years have had rapid advances in drug discovery opening up collaboration between researchers, clinicians, academic institutions and profit making industries. This may lead to conflicts of interest which affect the safety of clinical trials. Tara expanded on Merck, providing an example of Vioxx, an anti-inflammatory, which researchers were concerned could cause cardiovascular issues. Despite this knowledge, Merck chose not to do studies aimed at the cardiovascular system. It is estimated that the use of Vioxx resulted in anywhere from 38-60,000 deaths prior to its removal from the market. Merck pled guilty to criminal charges and paid out large settlements and fines.

Merck is the manufacturer of the MMR vaccine and on page 6 of the product insert; it states that the MMR2 vaccine has not been evaluated for carcinogenic or mutagenic potential, or potential to impair fertility. No studies have ever evaluated these risks. Per Tara, Merck is currently being sued over 3 vaccines: Zostavax, MMR, and Gardasil. In 2010, 2 former Merck scientists filed lawsuits indicating that the efficacy studies related to the mumps portion were faked. Tara stated that medical research can be manipulated to achieve desired results.

Tara also commented on the revolving door between regulatory agencies and pharmaceutical companies. Tara stated that between 2002 and 2009, Julie Gerberding was the director of the CDC. After resigning, she began working for Merck as the president of the vaccine division. While at the CDC, she oversaw the approval of Merck's Gardasil for girls age 11-12.

Another example Tara gave is FDA commissioner Scott Gottlieb who had been appointed to Pfizer's Board of Directors weeks after resigning. Tara concluded that the top down, public health's, one size fits all policy must be mitigated by a parents right to accept or refuse pharmaceutical products which come with both known and unknown risks.

Megan Buczek came to the meeting to better understand the health department's agenda for vaccination within the community. She stated that both pro-vaccinators and anti-vaccinators want the same goal – to make the best decision for their family. She stated honest, unbiased information is extinct. People should be able to rely on doctors and government agencies for information to make informed medical decisions. She is not concerned over who is vaccinated and who isn't, but feels the one sided, biased information is segregating our community. Per Megan, new born babies are being vaccinated for sexually transmitted diseases within hours of birth. Parents who question this practice are labeled as uneducated. She stated that a student with Hepatitis B is not considered a medical threat to the community, but a healthy, child unvaccinated for Hepatitis B is a threat. It's illegal to discriminate against the sick, but legal and encouraged to discriminate against the unvaccinated. She stated that vaccinated people still carry disease and can spread it to others in the same manner the unvaccinated do. Research shows that people respond differently to vaccines and there is no way to know how long a vaccine will be effective in each person. Approximately 7% of the population does not develop antibodies at all,

so getting 95% for herd immunity is not even possible through vaccination. Vaccines have never been tested for carcinogenesis or the ability to impair fertility. Chronic health conditions in our youth have risen from 12.8% to over 54% since the passing of the 1986 childhood immunization act which made vaccines a liability free product. In June, a banner was placed in De Pere which reads Immunizations Save Lives as well as a billboard stating that measles is still a threat and asking the public if they had their vaccine. Megan stated that despite numerous comments on your social media page from residents concerned about the vaccine, not a single inquiry was publicly addressed by the department. Per Megan, there have been more reported deaths from the MMR vaccine than there have been deaths from measles in the past decade. Vaccine education within this community has been from sources which profit off of vaccine sales. Megan asked the Board of Health to break the barriers regarding obtaining unbiased information.

Amy Schauland reported that she has seen multiple posts on the Health Department's Facebook page regarding vaccinations: measles, flu and HPV. The posts do not include the risks of the vaccines, only the perceived benefits. True informed consent required full disclosure of what can go wrong and is just as important for our public health department to discuss as the benefits. We know there are risks to vaccinating. Our federal government has paid out over 4 billion dollars in vaccine injury compensation since the 1980's. A 3 year review by The Harvard Medical School reported that less than 1% of vaccine reactions are reported to VAERS and this is the only system we have for determining vaccine injuries. In 2016, 59,000 adverse events were reported by VAERS, which included 432 deaths and over 10,000 ER visits. That's 1 percent. The real numbers could be closer to 43,000 deaths and 1 million ER visits. Per Amy, we cannot say that vaccines are safe and effective based on the fraction of events captured in VAERS.

In 1920 there were 7,575 measles related deaths in the United States. In 1960, there were 360 measles related deaths. This was 3 years before the vaccine was used and the death rate dropped by 95%. There are other factors besides vaccines that decrease mortality rates. Per Amy, if you want to make sure vaccines are as safe as they can be, then call upon congress to repeal the Vaccine Injury Act of 1986 which gave vaccine manufacturers legal immunity from death or injury caused by their vaccine. Manufacturers can't be sued if their products harm, and yet we have state governments mandating their use. The De Pere Health Department should be advocating for research and testing to be developed that would identify individuals most at risk of reacting badly to a vaccine due to genetics or environment before a single vaccine is used. Amy asked the board to demand that VAERS be made mandatory and ask for a large scale study comparing vaccinated and unvaccinated peer groups. The CDC and HHS have refused to conduct such a study. Per Amy, smaller studies have found that vaccinated children have higher rates of allergies, eczema, learning disabilities, ADHD and neurodevelopment disorders than unvaccinated children. Today over 50% of our children have at least 1 chronic disease. We are failing at health. Amy stated that for the first time in decades, children are projected to have a shorter lifespan than their parents. Are you surprised that parents are

questioning and rejecting the recommendations of mainstream agencies? Amy pointed out the corruption of profits before people, an epidemic of sick kids, and healthcare providers who ignore red flags. Amy stated that there are holes in the vaccine program that should not be filled with coercion, fearmongering or mandates or removal of exceptions. Be courageous enough to change recommendations that aren't evidence based and don't hold up to scrutiny. Our kids deserve our very best and we can do so much better.

10. Future agenda items

Ryan Jennings stated that during our strategic plan meeting we discussed having our Board of Health meeting as an awareness of the activities of the health department and one way to accomplish this would be to televise the meetings on the closed circuit TV. This would help show the public and raise money for what we do, the bike rodeos, the car seat fittings, and other special clinics. This would be a move to raise awareness. It is uncomfortable to discuss communicable disease in an open forum, yet all our data is available for public viewing. Dennis clarified that we maybe losing opportunities to generate funding because we are not using the media like other departments. Per Ryan, people don't know what the health department has to offer – everything from radon test kits to special events, vaccinations and other clinics. If people don't know, they can't take advantage of it. Ryan would like to discuss having the Board of Health video record their meetings.

Dr. Mc Henry and Dr. Erdman stated we had discussed it in the past, but it is worth discussing again.

Dennis Hibray asked if the Board would like to discuss the public statements that were given. Dr. Erdman stated that vaccines are effective. He agrees with the public attendees on some of the drug manufacturer claims but there is good research in support of vaccinations. Dr. Erdman is concerned with the health of the community which is maintained by immunizations. Dr McHenry added that we are committed to vaccinate. Dennis Hibray added that we follow the State of Wisconsin guidelines and recommendations regarding vaccination. Dr McHenry stated that we are happy to listen to the statements but are not required to take up future discussion on them.

After further discussion, it was decided that the Board of Health will not discuss any anti-vaccination concerns as a future agenda item.

11. Adjournment

Casey Nelson made a motion to adjourn the meeting. Dr. Michael McHenry seconded the motion. The meeting adjourned at 6:55 pm.

Respectfully Submitted,
Kelly Burke
Health Department Office Assistant