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Jeffrey Wery	<p>The current metrics were proposed before we knew of the rapid and successful vaccine development. I encourage the board to consider delaying movement into Step 4 until teachers/staff have an opportunity to become vaccinated. The hybrid model is stable, and provides my children opportunity to interact with their teacher/other students while minimizing risk of exposure. We are now seeing a light at the end of the tunnel. Why should we subject District 25 employees to extra risk?</p>
Carleen Swanberg	<p>This process has become so confusing to the parents - we don't know what is approved, not approved, happening, not happening. Between running our daily lives, our own full time jobs, our childrens well-being, our family schedules....it has become near impossible to follow the weekly changes happening to school. I appreciate that we are in a pandemic. I appreciate the work our teachers are doing, I also appreciate the board's work. However, the back and forth is too much for parents to follow. I honestly went into the holiday break thinking we were going full remote for 2 weeks after christmas or what you are calling an Adaptive Pause....only to hear from others that this was not approved. Where is the clear, concise communication with clear language? I am a smart person, who reads absolutely everything you send out. I cannot make myself watch 3+ hours of board meetings, and don't think that I should have to in order to clearly understand what is happening with my childs schedule. I am asking for you to take a step back, and really look at what is being communicated to parents. Is it clear? Is it written in easy to understand language or is it 'educational jargon' that is confusing?</p> <p>I also cannot express my disappointment enough that we are not following what the catholic schools are doing by taking an adaptive pause. Surely, not all board members have watched themselves in the board videos and noticed themselves sitting about 10' apart in a gigantic room. I guess they only care about themselves, and not the kids they are sending back to school.</p> <p>Thank you Dr. Bein for your leadership, I'm sorry your fellow Board members are not nearly as wise as you are. I hope we can surround you with better team members when we get a change to vote them out.</p>
Debra Downs	<p>Now that so many more children have been infected and the virus has mutated into a 40 to 50 percent more infectious virus, an adaptive pause is necessary to prevent spread to children, staff and their families due to Christmas and New Year's gatherings. This should have started directly after Thanksgiving, but now is better than never. Protect the lives of so many and have courage to do the right thing. Respect the doctors, nurses and first responders health and all their families as well. DO THE RIGHT THING AND TAKE AN ADAPTIVE PAUSE before children or their parents die.</p>
Megan Senesac	<p>Our current and future hybrid plans include concurrent teaching (with some kids on Zoom and some kids in person) which is not considered best practice. Has the Board considered assigning teachers to teach fully remote students? This way some teachers can put their full attention toward the in person kids while other teachers are putting all their attention toward the fully remote kids. Both groups deserve the full attention of their wonderful teachers. I realize it will be hard if some kids have to change teachers mid year, but I feel the pros outweigh the cons and all of our District 25 teachers are fabulous. It could be an opportunity to have a great experience with someone new! The Barrington School District and other surrounding Districts will be adapting to this more effective Hybrid plan. Don't we want this same advantage for our students in District 25? It would be well worth the extra effort and resources to give our kids an education that aligns with what is considered best practice in the field of education.</p>
Tracey	<p>Parents supporting hybrid, do not necessarily support full in-person. These two groups should not be combined together.</p>
Tracey	<p>No remote academy! Our kids have been moved around enough. By keeping the same teachers, it will allow parents to transition their children from remote to full in-person and vice versa. Once a student is in a remote academy, if parents select to bring their child to full in-person, the student will have to change teachers once again. Remote students should be given</p>

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	EQUAL consideration to full in-person students. There is so much focus on meeting the needs of kids in school; however, ALL kids are negatively impacted this year. The needs of remote students are equally important and they should not be shuffled around/ disregarded as an exception.
Tracey	Please provide any information you might have on the availability of a vaccine and if students will be required to receive a vaccine to attend school, once available.
Kerri Hood	Please keep moving forward and get these kids in school FIVE full days per week! (Since when did full time change to 4 days!?) Again, there was no holiday surge, metrics are going down, and the vaccine is out. Stop with excuses! Those that want remote can always keep their kids remote! Nobody is asking for that to be taken away. Stop with your endless games and just do what is right for the stakeholders - THE KIDS.
Erin Felten	<p>Please keep my son in school! He has an IEP and needs to stay in his 4 day a week school week.</p> <p>ALL students deserve this, but especially IEP/504 kiddos. There is no need for an adaptive pause, and please push forward to a FULL time schedule in person for our kids with the option to stay remote.</p> <p>Hybrid was a stepping stone, it was never a permanent option. It has shown us that we can INDEED get the kids in school, and safely. Dr. Bein has said it herself, we have the best mitigation practices and our schools are safe with those mitigation practices AND, we know how to have kids in school.</p> <p>Let's do this. Let's start putting our kids first. Thank You, Erin Felten</p>
Sarah Boeche	Keep kids in school. This is getting ridiculous with all the board meetings. It has been stated by numerous associations that schools are safe.
Kellee Janus	The next phase of return to school must include 5 day/week in-person instruction. Not all employers are allowing working families to facilitate e-learning which is causing an extreme amount of stress. Not to mention the stress e-learning is causing our kids. If teachers need more plan time, then the work days need to be extended. Nothing more should be taken from our children.
Kevin Allender	<p>Dear Dr Bein and school board members.</p> <p>Please keep our kids in the hybrid model until we can move forward to five day in person classes. It is critical for the social and emotional well being of each student. Please allow the parents to choose the option that is best for their respective families. Do not cave to the teachers unions push to force our schools remote. Your support is critical to a successful learning experience for our students. Full remote learning does not deliver the results we as a community expect and you as school board members are elected to provide for each student. Now is not the time to go backwards.</p> <p>Thank you Kevin Allender</p>
Kathy Dieringer	Reopen the schools full time, 5 days a week by January 19 as you stated. There is no need for asynchronous learning on Mondays. Kids need a 5 day per week education in person, not 4. Asynchronous learning days are a waste of time! Remember why you chose the education field, to teach children!!!
Melissa Van Buren	My children are looking forward to being in school 5 days a week and learning everyday. Let me tell you about our remote Christmas themed, yes in January, gym class for 3 rd grade today. It was run and touch 3 Christmas objects, that I already put away, and come back to the computer. How amazing? Not! Even the children were commenting on it. At least when they are

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	in person they get real gym. I hope you are well underway with being on track for 5 days a week on the 19th.
Erin Wiggs	Here we are again Dr Bein. You will not get rid of us or brush us under the rug. Do your job! Get our kids back in school 5 days a week. If you cant or wont, then step down.
Tim Wiggs	Every day I listen to my children ask "Why won't the board and Bein do what's right? Why do we have to suffer because she won't fight for us!" Teachers have options to go to work or take a leave. Why wont you give our children the option of going 5 days a week?
Mark Tack	Keep schools open in-person. No adaptive pause.
Angie Godlewska	<p>The Science does NOT support the use of masks. A compilation of the Science on Masks (below). By that you are endangering the kids' health. Additionally the use of large amounts of disinfectants is lowering kids immunity, lung health and overall health.</p> <p>As a substitute for school disinfection I propose UV light. https://www.medicalnewstoday.com/articles/study-reveals-uv-led-lights-effectively-kill-the-human-coronavirus</p> <p>I will happily send my son to school once school admins and board opens the schools for kids - no mask, no chemicals. If you create a separate classroom for those kids with separate teacher - maybe thats' a great start. I think it's inhumane to even attempt keeping kids in school, separated and in masks for a disease with a 99.7% survival rate among population, and even higher survival rate among kids. As a perspective - mental hospitals are full, psychiatrists have more emergencies than ever, suicide rate is up, depression among students (and parents) is skyrocketing. The suicide rate has increased from 5% to 13%, which is super concerning, especially comparing to a feared covid mortality of 0.03%!</p> <p>For those terrified - they can have the option to wear the masks, of course, yet forcing it on kids has no value or scientific proof. Schools have never been closed because of a kid having cancer, flu, or diabetes. And those are at a higher rate of mortality rate while covid in all cases is co-mortality in people with diabetes, low immune system or low vitamin D (80% of autopsies in Italy has shown that).</p> <p>_____</p> <p>Major Medical Groups and Journals do NOT support the wearing of face masks by the public:</p> <p>From the World Health Organization (WHO):</p> <ul style="list-style-type: none"> • “There is limited evidence that wearing a medical mask by healthy individuals in the households or among contacts of a sick patient, or among attendees of mass gatherings may be beneficial as a preventive measure.14- 23 However, there is currently no evidence that wearing a mask (whether medical or other types) by healthy persons in the wider community setting, including universal community masking, can prevent them from infection with respiratory viruses, including COVID-19.” • “Many countries have recommended the use of fabric masks/face coverings for the general public. At the present time, the widespread use of masks by healthy people in the community setting is not yet supported by high quality or direct scientific evidence and there are potential benefits and harms to consider.” • potential increased risk of self-contamination due to the manipulation of a face mask and subsequently touching eyes with contaminated hands

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	<ul style="list-style-type: none"> • potential self-contamination that can occur if non-medical masks are not changed when wet or soiled. This can create favorable conditions for microorganism to amplify • potential headache and/or breathing difficulties, depending on type of mask used • a false sense of security, leading to potentially lower adherence to other critical preventive measures such as physical distancing and hand hygiene; <p>On April 21, 2020, the American Medical Association released a position paper on masks. It made several point that bring the issue of the public wearing face masks into question, including...</p> <ul style="list-style-type: none"> • “Face masks should be used only by individuals who have symptoms of respiratory infection such as coughing, sneezing, or, in some cases, fever. Face masks should also be worn by healthcare workers, by individuals who are taking care of or are in close contact with people who have respiratory infections, or otherwise as directed by a doctor. Face masks should not be worn by healthy individuals to protect themselves from acquiring respiratory infection because there is no evidence to suggest that face masks worn by healthy individuals are effective in preventing people from becoming ill.” https://jamanetwork.com/journals/jama/fullarticle/2762694 <p>Journal of Paediatrics and Child Health: June 2020</p> <ul style="list-style-type: none"> • “There is no good evidence that facemasks protect the public against infection with respiratory viruses, including COVID-19.” • “During the 2009 pandemic of H1N1 influenza (swine flu),encouraging the public to wash their hands reduced the incidence of infection significantly whereas wearing facemasks didnot.⁵There is no good evidence that facemasks protect the public against infection with respiratory viruses, including COVID-19.” https://onlinelibrary.wiley.com/doi/epdf/10.1111/jpc.14936 <p>New England Journal of Medicine- May 2020- Universal Masking in Hospitals in the Covid-19 Era</p> <p>“We know that wearing a mask outside health care facilities offers little, if any, protection from infection. Public health authorities define a significant exposure to Covid-19 as face-to-face contact within 6 feet with a patient with symptomatic Covid-19 that is sustained for at least a few minutes (and some say more than 10 minutes or even 30 minutes). The chance of catching Covid-19 from a passing interaction in a public space is therefore minimal. In many cases, the desire for widespread masking is a reflexive reaction to anxiety over the pandemic.” https://pubmed.ncbi.nlm.nih.gov/32237672/</p> <p>A review of highly rated studies:</p> <p>A meta-analysis of 17 of the best studies determined the following: “None of the studies established a conclusive relationship between mask/respirator use and protection against influenza infection.” bin-Reza F et al. The use of mask and respirators to prevent transmission of influenza: A systematic review of the scientific evidence. <i>Resp Viruses</i> 2012;6(4):257-67. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5779801/</p> <p>Face masks restrict the elimination of virus, recirculating the virus into the nasal/sinus and upper respiratory passages and can infect the brain.</p>

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	<p>“By wearing a mask, the exhaled viruses will not be able to escape and will concentrate in the nasal passages, enter the olfactory nerves and travel into the brain.”....“We know that people who have the worst reactions to the coronavirus have the highest concentrations of the virus early on.” Face masks will contribute to this. Article by Russel Blaylock M.D., published May 14,2020 in Technocracy News & Trends / https://www.technocracy.news/blaylock-face-masks-pose-serious-risks-to-the-healthy/ Additional articles supporting this danger:</p> <ul style="list-style-type: none"> • Evidence of the COVID-19 virus targeting the CNS: Tissue distribution, host-virus interaction, and proposed neurotropic mechanisms. ACS Chem Neurosci 2020;11:7:995-998. https://pubmed.ncbi.nlm.nih.gov/32167747/ • Nervous system involvement after infection with COVID-19 and other coronaviruses. Brain Behavior, and Immunity. https://pubmed.ncbi.nlm.nih.gov/32240762/ • Spread of a neurotropic murine coronavirus into the CNS via the trigeminal and olfactory nerves. Virology 1989;170:556-560. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7130896/ Wearing masks can increase the chance of infection <p>Most people do not even know how to wear or use them.</p> <p>https://www.news-medical.net/news/20200315/Wearing-masks-may-increase-your-risk-of-coronavirus-infection-expert-says.aspx</p> <p>US surgeon general warns against wearing face coverings.</p> <p>https://www.businessinsider.com/americans-dont-need-masks-pence-says-as-demand-increases-2020-2</p> <p>A Cluster Randomised Trial of Cloth Masks Compared With Medical Masks in Healthcare Workers (British Medical Journal).</p> <p>“The rates of all infection outcomes were highest in the cloth mask arm...Penetration of cloth masks by particles was almost 97% and medical masks 44%...Conclusions: This study is the first RCT of cloth masks, and the results caution against the use of cloth masks. This is an important finding to inform occupational health and safety. Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection. Further research is needed to inform the widespread use of cloth masks globally. However, as a precautionary measure, cloth masks should not be recommended for HCWs, particularly in high-risk situations, and guidelines need to be updated.” https://pubmed.ncbi.nlm.nih.gov/25903751/ (PMID: 25903751)</p> <p>“This study is the first RCT of cloth masks, and the results caution against the use of cloth masks. This is an important finding to inform occupational health and safety. Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection. Further research is needed to inform the widespread use of cloth masks globally. However, as a precautionary measure, cloth masks should not be recommended for HCWs, particularly in high-risk situations, and guidelines need to be updated.” https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4420971</p> <p>CDC echoes the concern:</p> <p>“Available evidence shows that (cloth masks)... may even increase the risk of infection due to</p>

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	<p>moisture, liquid diffusion and retention of the virus. Penetration of particles through cloth is reported to be high." "Altogether, common fabric cloth masks are not considered protective against respiratory viruses and their use should not be encouraged." https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html</p> <p>The British Medical Journal weighs in:</p> <p>"Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection." "The virus may survive on the surface of the facemasks."</p> <p>"Self-contamination through repeated use and improper doffing is possible."</p> <p>https://bmjopen.bmj.com/content/5/4/e006577</p> <p>Cutting edge: Hypoxia-Inducible Factor-1 negatively regulates Th1 function. J Immunol 2015; 195:1372-1376. https://rational.org/PandemicParallaxView/1372.full.pdf</p> <p>Hypoxia enhances immunosuppression by inhibiting CD4+ effector T cell function and promoting Treg activity. Cell Physiol Biochem 2017;41:1271-84. https://pubmed.ncbi.nlm.nih.gov/28278498/</p> <p>Hypoxia-driven immunosuppression contributes to the premetastatic niche. Oncoimmunology 2013; 2:1 e22355. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3583916/</p> <p>Wearing cloth masks in public can create a false sense of security and complacency in which people may neglect other hygiene practices. https://www.who.int/publications-detail/advice-on-the-use-of-masks-in-the-community-during-home-care-and-in-healthcare-settings-in-the-context-of-the-novel-coronavirus-(2019-ncov)-outbreak</p> <p>There is a danger of masks reducing oxygen (O2) levels and increasing levels of Carbon Dioxide (CO2) to unsafe levels</p> <p>"Wearing N95 masks results in hypo-oxygenemia (levels of oxygen in the blood) and hypercapnia (is increased levels of carbon dioxide), which reduce working efficiency and the ability to make correct decision."</p> <p>..</p> <p>"Medical staff are at increased risk of getting 'Severe acute respiratory syndrome' (SARS), and wearing N95 masks is highly recommended by experts worldwide. However, dizziness, headache, and short of breath are commonly experienced by the medical staff wearing N95 masks. The ability to make correct decision may be hampered, too." https://clinicaltrials.gov/ct2/show/NCT00173017</p> <p>https://www.researchgate.net/.../7332926_Headaches_and_the_N9...</p> <p>More on the danger of masks reducing oxygen levels and increasing levels of Carbon Dioxide (CO2)</p> <ul style="list-style-type: none"> • "Chronic hypoxia-hypercapnia influences cognitive function" https://www.ncbi.nlm.nih.gov/pubmed/18331781 • A recent study involving 159 healthcare workers aged 21 to 35 years of age found that 81% developed headaches from wearing a face mask... That is, a reduction in blood oxygenation (hypoxia) or an elevation in blood carbon dioxide (CO2- (hypercapnia). It is known that the N95 mask, if worn for hours, can reduce blood oxygenation as much as 20%. And proper

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	<p>oxygenation of the blood is essential for energy, mental clarity, focus and emotional well-being. Ong JJY et al. Headaches associated with personal protective equipment- A cross sectional study among frontline healthcare workers during COVID-19. Headache 2020;60(5):864-877.</p> <p>https://headachejournal.onlinelibrary.wiley.com/doi/epdf/10.1111/head.13811</p> <ul style="list-style-type: none"> • “Hypercapnia, the elevation of carbon dioxide (CO2) in blood and tissues, commonly occurs in severe acute and chronic respiratory diseases, and is associated with increased risk of mortality. Recent studies have shown that hypercapnia adversely affects innate immunity, host defense, lung edema clearance and cell proliferation. Airway epithelial dysfunction is a feature of advanced lung disease....These changes in gene expression indicate the potential for hypercapnia to impact bronchial epithelial cell function in ways that may contribute to poor
<p>Chrissy Kordalewski</p>	<p>Whether staying hybrid or moving to 4 day in person, I would like you to allow students to continue the option to go home for lunch permanently. My son likes the break in the day and even though he doesn't utilize it every day he is in person, having the option is wonderful. The sign up is easy and drop of and pick up is smooth. I also can make sure he is properly eating his lunch. Many times when he eats at school he is distracted and comes home with half his lunch. Thank you.</p>
<p>Carissa Lee Holmes, MD</p>	<p>I would like to make a request - we need more useful info when reporting community notifications on Covid cases in schools. I know that it is difficult getting parents to call and inform the school that a student has tested positive and that testing is not as easy to access as it should be. Turn around times for testing results are also very long at times. However, i think receiving notifications of positive cases weeks after that student was at school would be more informative if the notification included the statement "this student/staff member was likely contagious beginning on (date)". this date being 2 days prior to starting symptoms or having tested positive for covid (the date the test was obtained not the date the test was reported. since the district is doing contact tracing on all cases this info would be easy to obtain and would be very helpful for those who are concerned with any potential exposures to their children (even though we known close contacts are already informed) or those concerned with how decisions are made to allow in person learning or not. i appreciate your consideration on this request.</p>
<p>nancy smith</p>	<p>Recognize that the same parents pressuring for full in person are the same families that opted for air travel, went to Disney, took vacations across the country, had indoor holiday gatherings. You cannot say you are in support of the community and teachers when you are not willing to follow minimum CDC guidance intended for the greater benefit of your community. It is disappointing that you are allowing a specific value system guide your decision making .</p>
<p>Shelby Menely</p>	<p>Dr. Bein should not have the sole authority to shut down TMS for a purported “outbreak” that is not supported by any data that is made clear and logical to the parents. To use case totals going back more than two weeks, much less to OCTOBER, makes no sense based on any science.</p> <p>I commend the board for recent decisions to keep our schools open for in person learning, and I encourage a better process for debate and discussion that INCLUDES the board when it comes to decisions like the recent ones made unilaterally for TMS. Otherwise there is no assurance that decisions are being made based on the correct facts and science.</p>
<p>Leah Ross</p>	<p>To wait to eradicate Covid completely and hold these children hostage with that scientifically impossible arrogant man made up goal...continues to be an unconscionable societal action. I admire D25 for instituting the two day a week hybrid back in Oct and the board deserves our thanks as do teachers and administrators for keeping it in place so successfully!!!! This means it's time. It's time for five days a week as we SEE so clearly how healthy and safe the school ecosystems are. Cook county numbers continue to lower and vaccinate distribution is in continued process. Please don't hold up the next phase due to Cook metrics being slightly above the 8 percent mark. Look at how the schools are staying healthy anyway. Look at our local community more specifically than relying on covid at large. Stop obsessing over that which cannot be controlled and send our children into the place that CAN be controlled, the place they</p>

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	<p>have been waiting nearly a year to attend fully, their schools.</p> <p>It's time so acknowledge this. When I hear that people are worried for health and wellness over these holiday breaks, I am tempted to explain that we've essentially been on a "break" from school for nearly a year! It's not just about where people might or might not go during a HOLIDAY break. This has been one BIG holiday break since spring break 2020. That is reality. Without fully opening and bringing these kids back in you have subjected families potentially to the need or the desire to interact with far more families and go far more places than they would during a normal five day a week every day every week fully open school year.</p> <p>I can understand needing the evidence that a school ecosystem can remain safe and healthy while the virus continues to spread, as it will for some time longer I can only assume. But we have that evidence now.</p> <p>Our children should be allowed the option to proceed into the next phase. I hope that soon becomes five days as I know four days is considered the next stage. That's not full time, so I will continue to advocate for a five day a week school week, and I hope we see that choice for families soon after the four days are implemented on January 19.</p>
Troy Swanberg	<p>I would like clarification on meeting the ISBE guidelines to meet minimum public health requirements when returning to school.</p> <p>In that guidance it advises that schools shall "require 6 foot social distancing be observed to the greatest extent possible", however in Principal Morrison's messaging he indicates that "students will be seated six feet apart – where feasible."</p> <p>Feasible is not as stringent a requirement as the ISBE guidance of greatest extent possible. Feasible may have a limitation of only reasonable actions whereas greatest extent may require actions that are more extensive.</p> <p>Will SD25 be using the ISBE guideline of 6 feet to the greatest extent possible or only where feasible?</p> <p>Thank you Troy Swanberg</p>
Elizabeth Green	Open all D25 schools for FULL in person learning no later than January 19, 2021.
Joanna Sopel	Dr. Marielle Fricchione, a pediatric infectious disease specialist with the Chicago Department of Public Health says "There is not an evidence-based public health metric that can tell a local school department when to reopen" and yet here we are trying to come up with our own metrics to achieve a goal of never opening. It honestly seems like dr Bein's agenda from minute one was always to never open our schools. I would like to know why? Keep the schools open!
Jen Ortman	I would like to express my continued support to move to full time in person education with an option for remote for those families that do not want to have their children go back to school. As you can see all around us districts are electing to go back to school full time and even CPS has a plan for returning to school as they consider any risks (which they have stated are small) outweighs the benefit of in person schooling. We have the technology in place to provide in person education and remote for those that do not feel comfortable going back. Our students are fallin way behind your districts and students. Please do not continue to find ways to keep students out of the classrooms. Elementary and middle school children need interaction, need teacher involvement. This is very hard over a computer screen for 7 hours a day.
Richard Lenski	I would like to request full in person 5 days (not 4) starting on January 19th. We should be doing all that we can to get all kids back in school for five days a week. Cases are declining and vaccinations are going up. The mitigation practices are working.

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Lisa Nason	<p>When reviewing the metrics to get these kids back in school make sure they are data driven based on current knowledge of what is going on. Outdated metrics from August need to be looked over to use current information on school openings and recommendations from health officials.</p>
Kerri Hood	<p>Please review metrics and update based on new data that has been collected not just in AH, but in Chicago, Illinois and globally. The local metrics are outdated practice and should be updated. CPS is using a doubling rate, which will allow them to determine how quickly the virus is spreading in the district.</p> <p>https://chicago.suntimes.com/education/2020/12/23/22193951/cps-public-schools-reopen-new-york-covid-coronavirus-science-johns-hopkins-university-safe-ctu</p> <p>"So which metrics do scientists say schools should use?</p> <p>It's more complicated than any single number, several local and national infectious disease experts told the Chicago Sun-Times. Some argue the metric the city is using — doubling rate, which would allow schools to reopen right now — might offer an incomplete look at Chicago's epidemic. Yet every one of them says the threshold the teachers union is pushing — 3% test positivity, which likely won't be reached for months — is outdated and not particularly useful.</p> <p>"You can't really establish an absolute threshold for saying that, 'Oh, if you hit this number that means you have to close,'" said Dr. Daniel Johnson, chief of pediatric infectious diseases at the University of Chicago Medical Center. Closures could be necessary at a lower level of spread if mitigation protocols are ignored, while opening with a greater number of infections could be possible if strong rules are followed, Johnson said."</p> <p>"The Chicago Department of Public Health has recently focused on doubling time as the most important metric, which is calculated by determining how many days it will take — based on the current rate of case growth — for the number of people infected since the start of Chicago's second surge on Oct. 4 to double.</p> <p>If cases are doubling in a short amount of time, that means the city is experiencing rapid spread, or an uncontrolled outbreak. The longer it takes to double, the slower the growth of the epidemic.</p> <p>Dr. Marielle Fricchione, medical director in CDPH's COVID-19 bureau, said local data from the virus' first wave showed the change from uncontrolled to controlled transmission happened around a rate of 18 days — the new bar that CDPH set for reopening CPS.</p> <p>"There is no established metric at this time for when it is safe to reopen schools besides the presence of a controlled outbreak," Fricchione told Chicago's Board of Education at its monthly meeting earlier this month. "Changing metrics is not a reflection of chaos. Changing metrics is a reflection of good science."</p> <p>To repeat that last statement from the MEDICAL DIRECTOR: "Changing metrics is not a reflection of chaos. Changing metrics is a reflection of good science."</p> <p>FOLLOW THE SCIENCE AND OPEN OUR SCHOOLS FULL TIME!!!</p>
Kristin Keil	<p>Thank you to all the Board Members for continuing to be engaged, I appreciate your dedication to our students. This Board is the voice of our community and based on the numbers at South Middle School, 75% of our students want to be back in school full time. After reviewing the safety metrics and realizing that the desire in our community is to keep the students in person and in the buildings my hope is that you move forward and not only continue the current hybrid learning model but you vote to allow our District to move into Step 4; allowing those students who desire to be in person full time the access they want. Thank you for your time.</p>

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Diana Lane	Please keep our kid in school and do not take an adaptive pause and move towards full in person. Our kids are the ones that are suffering. We live in Arlington Heights for the school district. The schools are not delivering this remotely. My son is falling farther and farther behind and to hear teachers say the district is telling them not to teach certain things is absurd. Our children deserve better. Our children deserve a quality education and deserve to not be forgotten in this pandemic.
Carly Lisinski	I ask that the board and Dr. Bein adapt and change the metrics for full in person learning. So much data has been collected and analyzed over the last several months (by healthcare professionals), which shows that schools are a safe place for our children even when the positivity rate is above 8%. Health experts, even within our community, are telling you that kids need to be back in school full time. District 25 excels in mitigations strategies, which are working to keep our children safe. I urge you to listen to the healthcare professionals and allow our students the choice of full time, in person instruction beginning January 19th.
Jennifer Huntzicker	It is now January 2021. We know more. We should adapt to this new knowledge instead of digging in our heels and subscribing to outdated information. I'm sure you've all seen and heard the new science based reasoning that our old metrics are no longer of use. As Dr. Marielle Fricchione of the Chicago Department of Public Health stated, "Changing metrics is not a reflection of chaos. Changing metrics is a reflection of good science." We have a health department that is fully capable of deciding if and when a school should be shut down. Why are we endlessly debating this ourselves when the IDPH will do it for us? They are the health experts, not a group of parents and teachers who are obviously coming to their own conclusions full of bias and emotion. I feel we should fully disband the TAC as it has done nothing but divide our community. Once again, we now have better information about this virus. Countless scientific studies have proven that schools are safe. Actually, the 6ft space rule is even outdated. That is the default for adults, but it's "past time we recognize that kids are different and the importance of schools is different, especially for the youngest learners. Three feet should be the default distance for schools." - Joseph Allen, associate professor of exposure assessment science & Sara Bleich, professor of public health policy. They go on to say that "The risks from Covid-19 in schools are manageable. The risks to kids being out of school, however, are escalating rapidly. For the sake of our children, it's time for more scientifically justified distancing guidelines in the classroom." Everyone reading this does realize that keeping kids out of school does not mean kids are holed up at home seeing no one and doing nothing, right? A student's life and who/what they're exposed to is actually much more controlled when a student is in school 5 days a week. Please please PLEASE admit that science proves that schools can be open and that we can do so safely. Please bring our children back to what they deserve and need- full, in person school. Please also remember that any family that has high risk factors or simply has anxiety about this scary world we live in has the absolute right and privilege of staying home and learning remotely. Give CHOICE back to this community. The board needs to hold Dr. Bein accountable for an actual plan that prioritizes students and their education, one that is in person and 5 days a week. Dr. Bein answers to the board. The community has shown through endless surveys that the overwhelming majority (upwards of 75%) want their kids in person. Stop the stalling, stop the fear mongering and open up the schools.
Julie Talbot	Why must we look at metrics to close the school, per agenda for the meeting? Why are we not looking at metrics to keep our schools OPEN? I propose we don't look at any more metrics and open ALL schools, 5 days a week; closing only by emergency proclamation of the Governor. Why is Lori Bein and her Teachers Union determined to find ways to close our schools? Why is Lori Bein and her Teacher's Union holding our kids' education hostage? Home is NOT school! I find these repetitive meetings dealing with metrics, metrics that only Lori Bein understands since they are so convoluted, an insult to every parent in this district. Please Board Members, we have all had enough of the substandard education are children are receiving and open schools now! I am embarrassed to be a community member of D25, I live within 1.5 miles of FOUR private schools, all of which have been open FULL TIME since September! Why.... why can't D25 Figure this out? Two reasons: Union and Bein. Please do not be distracted by the never

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	ending delay tactics and manipulative maneuvers of Lori Bein, an ineffective leader lacking transparency, foresight and communication.
Catherine Gripper	Board members and Dr. Bein, I am writing to ask that we return to full in person learning on January 19th regardless of the community metrics. All that matters is what is happening in the schools. Schools are continuing to show they are safe and the best place for our children. Our mitigation strategies are working. Let's put our children first and continue listening to all the doctor's and experts on this matter. Thank you.
Julie Talbot	Please provide date and meeting where the "new" full time (4 days a week) was voted on. This was new information to me at the last board meeting when Lori Bein mentioned return to full time at 4 days a week. This is completely unacceptable at a time when our children are regressing further and further behind in this farce of remote education in D25. Home is NOT school, return children to the classroom FIVE days a week and do not fall victim to the manipulative maneuvers of the Teachers Union and Lori Bein.
Julie Talbot	Since the first survey last summer through the school information sent today, consistently 75% of families in D25 want in school learning! What is also consistent is the belittling of the needs of those parents wishing for choice in their childrens' education by Lori Bein and her Union! The other 25% have what they already want, yet they continue to press for everyone to be fully remote, claiming we are "a small vocal group". I would hardly call 75% of the families surveyed as a small group. And yes we are vocal as we are advocates for our children and clearly see the Union and Lori Bein consistently finding ways to close our schools and advocating only for union demands instead of for their students.
Julie Talbot	<p>The AAP, CDC, WHO and countless doctors, researchers, scientists and parents want school open, full time, 5 days a week! This study was released last week, the principal investigator is a pediatric infectious disease doctor and they essentially the bottom line of this study: Children are more likely to be infected by a family member who doesn't take the proper safety measures, than at school.</p> <p>https://www.newsnationnow.com/health/coronavirus/study-kids-more-likely-to-be-infected-by-a-family-member-than-in-a-classroom/</p>
Kris Dugan	I want to commend you as a board for keeping our schools open. It is essential to learning and social emotional growth to attend school in person. I have been watching our metrics and it has been great to see that we never got the huge spike in cases after Thanksgiving that many feared. As I type this, the 14 day rolling average is 7.79% according to the Northwestern University Covid Dashboard. That helps me to believe that our rates will not spike up after the winter holidays. With that in mind, I strongly support your decision to open the schools on Jan 19 for four day a week in person instruction. The data supports the opening. Additionally, it has been documented by the CDC that Covid-19 is NOT transmitted in schools. If, as students AND staff, we all follow proper hand-washing, mask wearing, social distancing, and following quarantine guidelines, there is no reason all schools (especially Thomas) should not open as planned on Jan 19. As an educator myself, I feel strongly that schools are a safe place and students belong back in person and the data is supporting that decision.
Brian Lisinski	<p>I urge the board to continue to give all families a choice, and move forward with the full in person option on January 19th. The only relevant metric that should be considered for reopening is if the transmission of the virus is happening within schools. Study after study continues to prove that transmission of the virus within school is lower than that of the actual community.</p> <p>Take the CDPH study just released " The estimated COVID attack rate among students at Archdiocese schools was 0.2 percent - significantly lower than the 0.4 percent rate for all Chicago children. For school staff, the estimated attack rate was 0.5 percent, compared to 0.7 percent for working-age adults in Chicago". This means you are more likely to get Covid by keeping schools closed than you are when they are open.</p>

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	I ask the board to revise the metrics to allow for the full in person option on January 19th. All families deserve a choice. Thank you!
Kellin Girard	Please give parents the choice for full-time in-person learning.
Alexis Hammond	<p>Dear Board of School District 25 and Dr. Bein,</p> <p>I ask that you use the following guidelines to return to remote learning when any of the three criteria are met. #1 - When the metrics and guidelines for full remote/adaptive Pause mirror CCDPH, ISBE, and IDPH metrics. #2 - When the CCDPH and/or IDPH recommend the school/district return to the remote model due to either an outbreak or out of an abundance of caution #3 - When the Superintendent recommends the district return to the remote model due to either evidence of transmission in a school or within the district, an outbreak, insufficient PPE/Cleaning supplies, insufficient staff, total absences, or out of an abundance of caution.</p> <p>I ask that the board recognize that the BOE has not been voted in to usurp the recommendations of the public health departments devoted to keep our community and state healthy.</p> <p>By the board refusing to make a decision and drawing out the great "metrics debate", your actions speak louder than words. By drawing out this process, the board has continued to put our community in danger of transmitting Covid-19. Some of the Board's desire to keep students, teachers, and staff in the buildings at all costs is rather transparent. I ask the board to move quickly and decisively to adopt the metrics and guidelines for full remote/adaptive pause, hybrid, and a return to in-person as defined by the CCDPH, ISBE, and IDPH metrics.</p> <p>Sincerely, Alexis Hammond Patton - 1st grader Thomas - 6th grader</p>
Nathan Ulery	<p>Of all the concerns related to a return to full in-person school, the most concerning to me is related to a lack of parental notification of COVID cases in a child's classroom.</p> <p>Currently, the district is only notifying close contacts and the entire school but without specificity regarding which classroom. Unlike other school districts, AHSD25 is not notifying parents of a positive case in their child's classroom. The student who sits next to our child all day, several days a week, could test positive, and we would not be informed. Simply stated, parents have a right to know that someone in our children's classroom has tested positive.</p> <p>While the CDC has provided a guideline that a close exposure is defined as six feet or less, it is simply a guideline and not a guarantee that the potential exposure will not result in an infection. Especially as the UK variant of this disease which is more prone to infect children and more infectious, every precaution should be out in place to protect our children from exposure and inform us if any potential exposure has occurred in our child's classroom.</p> <p>According to the Health and Human Services department, school districts are not covered by the HIPAA privacy rule. Furthermore, informing parents of a potential exposure in a classroom is no different than informing close of contacts of an actual exposure.</p> <p>Over 130 people have already signed our petition at www.parentshavearighttoknow.com demanding that the School Board instruct Dr. Bein to immediately change this policy.</p> <p>Not notifying parents is problematic because as much as staff may try to do contact tracing, there is no guarantee that children did not interact with each other or that staff remembers every interaction from previous days.</p>

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	<p>The information regarding the presence of a case in a classroom should be shared with all parents. Well informed parents can make decisions if they have this information</p> <ol style="list-style-type: none"> 1) Knowledge of a positive case allows us to be even more in-tune to potential symptoms and can put us on notice to keep our child home if anything at all is concerning 2) Knowledge of potential exposure can allow us to make better informed decisions regarding isolation from family who have pre-existing, comorbid conditions to COVID. <p>Not only are other schools proactively informing parents of positive COVID cases in their child's classroom – they are flipping classrooms to remote upon a single positive case in order to ensure that schools remain relatively free of community spread. The current proposal to only flip classrooms upon 5 positive cases is concerning. This means in a class of 20 students, 20% of the class could have COVID and parents would not be informed. It is both ironic and irresponsible that AHSD25 would inform me as a parent if there were that many flu, strep, or hand-foot-and-mouth cases in the classroom – but AHSD25 will not inform me if there are that many potentially-deadly COVID cases in my child's classroom.</p> <p>Furthermore, it is unconscionable that you would require 25% of the kids in a classroom to get COVID before you flip that classroom to remote. We are living in a global pandemic, and we all have a responsibility to stop the spread. Your actions thus far have been ill-informed, but not shutting down classrooms until there are 5 cases is irresponsible. If there is a case, the classroom should flip to remote and parents should be informed so more people are not exposed.</p> <p>Parents have a right to know so they can make the best decisions for their families and classrooms should be flipped to remote for a period of quarantine if there is a single case so we can slow the spread of this deadly disease.</p>
Kristen Ulery	<p>Dear District 25 Board of Education,</p> <p>I strongly urge you that parents need to be informed if there is a positive COVID case in their child's class, and the district should NOT be waiting until five kids have been infected to flip a classroom to remote.</p> <p>Parents need to be informed if there was a positive case in their child's class. Six-foot distancing is a guideline, not a guarantee, and this new UK variant is more contagious and impacts kids more. My child could be infected by spending six hours sitting next to a child who is contagious, and I should be informed so I can take additional precautions. For example, if I know my child may have been exposed, I can watch carefully for minor symptoms and keep him home and/or get him tested at the slightest indication he might be getting sick. If I know he could be exposed, I can postpone non-essential appointments like physical therapy or a dental cleaning to make sure those providers aren't exposed if it turns out he was contagious. I can also take extra precautions related to caring for parents or grandparents who are at high risk. If informed I can make responsible decisions to prevent further spread of the virus, but District 25 is currently denying me the information I need to make those decisions.</p> <p>I have heard some people say that notifications can't be done without violating confidentiality, but that is simply not true. As an elementary school principal myself, we have notified parents of children who were potentially exposed in classrooms or on the bus the same way close contacts are notified--without details regarding how or from whom the exposure occurred. Close contacts are told they are a close contact and that they need to quarantine until a particular date. Potential exposures can be told their child was potentially exposed and the anticipated incubation period during which they should watch for symptoms (which can be calculated by the nurse based on the date of last exposure without providing the parent with details).</p>

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	<p>I also believe that children who have potentially been exposed (such as classmates of a positive case) should work remotely until the end of their incubation period because that helps prevent community spread, and District 25's policy of not flipping classrooms to remote until 5 students have tested positive is irresponsible in a global pandemic. Especially with a more contagious strain appearing across the country, it is unfathomable that District 25 would allow 50% of the in-person students in my son's class to get sick with a serious illness before informing parents or taking any measures to stop the spread.</p> <p>Six foot distancing helps reduce community spread, but it is not a guarantee, so District 25 has a responsibility to protect the health and safety of our school community by informing parents of COVID cases in their child's class and immediately flipping classes to remote instruction for a quarantine period when there is a positive case.</p> <p>Parents who want their kids in school still care about their health, and we should be given the information we need to send them to school and still keep them safe. I have signed the petition at www.ParentsHaveARightToKnow.com to make my voice heard, and I would encourage other parents who are concerned about the lack of health information being given to parents by District 25 to do the same so these concerns are heard.</p> <p>Sincerely, Kristen D. Ulery</p>
Greg Scapillato	<p>To the Arlington Heights School District 25 Board of Education,</p> <p>I'm reaching out to you today out of an abundance of concern for our community. Parents have struggled with choices between remote, hybrid, and in-person learning, and how the metrics should be structured. There are people of good faith on all sides of these issues. Without a doubt, we all ultimately want students to return to school. Our community is looking to the school board for leadership on how and when we should move between these modes of learning.</p> <p>Though today's metrics discussion is listed as an action item, we know that you are not bound to take action this evening. On behalf of our community, I urge you to complete your deliberations and make a final determination tonight. Our students, our parents, and our community need clarity in order to choose their preferred learning mode, and permission to move past this issue. Through your choice, you have the power and responsibility to resolve this.</p> <p>I am also reaching out regarding the Board's action on October 29, limiting the superintendent's ability to determine if and when to move the district to remote learning. This decision altered the relationship between the Board of Education and the Superintendent. We understand from Illinois Association of School Boards, and Illinois School Code, this is outside best governance practices. The Board of Education knows well that the operational duties of the district should fall under the jurisdiction of the Superintendent.</p> <p>Once the Board has approved metrics, I am urging a return to those best practices for governance. The Board should pass a new motion amending Board Policy 4:180, removing the mandate for a special meeting if the Superintendent deems it necessary to move the entire district to remote learning. As suggested in the December 17, 2020 Board meeting, the Board could include language that the Superintendent will make such determination "in consultation with the Board president".</p> <p>The long deliberation on metrics, and change in governance practices, could be portrayed as actions taken out of abundance of caution. I recognize that all of our Board members are operating from a place of good intent. By shifting the dynamic between school board and superintendent, our community has lost the clarity and the Board has diluted the leadership so</p>

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	<p>desperately needed in these challenging times. It is past time to return to those best governance practices, and unifying our community around supporting students, teachers, and administrators in the best school district in Illinois.</p> <p>Respectfully submitted, Greg Scapillato</p>
James Vanderpoel	<p>We made our holiday plans to maintain the safety of ourselves and our community and, thus, we do not want any pauses as our child needs the direct interaction with a teacher to best learn. We would like to head back to full time school but are happy to keep it hybrid until that time.</p>
Tricia Fuglestad	<p>We can replace lost learning, but we can not replace lost life. On Christmas day an elementary art teacher died from Covid after catching it from his students.</p> <p>Let's be proactive rather than reactive and change by design not disaster. The school board has made decisions that go against the recommendations of public health officials and chose metrics to support in-person instruction.</p> <p>Please reverse your course and stop putting the health and safety of those entrusted to you in danger. We have a vaccine now. We need to avoid infection and error on the side of caution. Please take an adaptive pause and use the metrics prescribed by the health officials.</p>
Amy Klehr	<p>Happy New Year! Please continue to get the kids in school full time. These kids want and need to be in school FULL TIME.</p>
Nathan Ulery	<p>The most significant concern I have related to the metrics being considered for when to adopt an adaptive pause is the concept that 5 of 6 must be red in order for a change to be made.</p> <p>Any one of these metrics could move by itself and present a significant concern related to the safety or effectiveness of in-person learning. Examples may include:</p> <ul style="list-style-type: none"> • If there is insufficient PPE and cleaning supplies, then our schools cannot be opened safely, regardless of other factors. • If absence rates of staff approach 30, 40, or 50%, then so many classes would need to be combined due to insufficient staff coverage, that it will present a health concern of a potential super spreader event. The Zoom Rooms implemented at Thomas are an example of this concern where 48 students were put in one room. • If the number of cases in Arlington Heights is in the thousands per 100,000, indicating significant community spread, then it would be unsafe to bring hundreds of individuals together in a building. • If school transmission is happening in multiple schools simultaneously or in a short period of time, then in order to stop the cycle, all schools should be closed. <p>The School Board is not consulted when Dr. Bein makes the decision to cancel school due to safety concerns related to snow and ice. Her professional judgement is trusted. The School Board cannot imagine every scenario that must be considered. Dr. Bein should be instructed to use these metrics to make decisions she believes are an appropriate balance of education and health. The requirement that 5 of 6 metrics must be read in order to move to an adaptive pause must be dropped.</p>
Christy Goduto	<p>Please continue to listen to the D25 parents and move forward with full 5 day in person learning with a remote option. We need to put the children first! Thank you!</p>
Leigh Strauss	<p>To the seven board members of District 25, you have abhorrently failed in your sworn oath to protect our schools. The lack of a decision toward creating a safety net for students, teachers, and community members, and your inability to trust the advice from public health experts shows that our current board members are incapable of safeguarding our community. There is no leadership on our board. Leaving our community without a plan for everyone's safety is inexcusable. I no longer have trust or confidence in this board.</p> <p>All members of our board must recuse themselves from further decisions on the safety of our</p>

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	<p>school community in regards to COVID-19. Further decisions must be left to the capable hands of Dr. Bein, who has proven many times that she has the tools and understanding necessary to manage this crisis, and she possesses the knowledge to translate public health guidance from multiple agencies into a safe plan that will protect our students, teachers, and community.</p>
<p>Stacey Esposito</p>	<p>I can't believe it is January and we are still talking about the same issues. I can't believe we are still filling out surveys. The survey results remain almost the same. How many more surveys are we going to have submit before our kids can return to full in person learning? It is time to put the children of the district first! The teachers have the ATA fighting for them. We need to the school board to keep fighting for our kids!</p> <p>It is time to relook at Thomas' mitigation strategies. I thought from the beginning that the middle schools should been separated from the elementary schools. If we do not change the mitigations at Thomas, they will never be at school or we will continue to provide an unstable learning experience. My son needs to be at Thomas. His social emotional needs are not being met. His social interactions take place at school.</p> <p>I'm also questioning remote Mondays. What is the purpose? Since when is 4 full days considered a full time schedule. It has left kids fending for themselves. There is no learning taking place. It is busy work with no content.</p> <p>Please get our kids back to school! Dr. Bein, stop the endless surveys! It is just prolonging the process. Make a plan which should have been done over the summer. Be a leader!!</p>
<p>Laura Culley</p>	<p>To the Board of SD25:</p> <p>I hope all of you have had a very happy new year and have had a good time to spend with your family. I have been thinking over the holiday about the metrics you have been discussing at just about every board meeting and the criteria for the decisions being made for this year. The metrics that it appears at board meetings are the criteria for decisions are the number of public comments and imprecise and changing public health metrics. The use of the number of public comments to make decisions drives more and more petitions and divisions between parents and teachers. Imprecise public health metrics leads to indecision and increasingly more complex attempts at use of these imprecise public health metrics.</p> <p>In reality, the actual metrics that we have de facto been using this year are school based metrics and not the imprecise public health metrics. I think what makes sense instead is to use two metrics: the results of parental survey on in person vs remote (which every single time it has been asked at the beginning, during the surge, and now stands at 75% who want in person) and classroom covid cases leading to a public health definition of an outbreak (5 cases). I understand that you have a motion today to consider the metrics to close the schools. Please instead make a motion to go from these imprecise metrics to a classroom by classroom evaluation of covid cases and follow the direction of parents to allow 4 days a week for all parents that want that for their students. We already have had many students start going 4 days a week in December and that has been successful so there is no reason not to go forward with 4 days for all on Jan 19. Our nearby Palatine public school district D15 is only using classroom by classroom COVID cases and is fully open for grammar school and A/B for middle school as of Jan 5. I would suggest that you review their website (https://www.ccsd15.net/Page/135) and contact Palatine school officials to learn how they came to their decision on metrics and full in person classroom differentiation.</p> <p>In terms of staffing issues, IDPH has indicated that schools can use either 10 days or 14 days exclusion. Giving this option to our schools may help with the staffing issues due to exclusion and reduces the risk to our schools. Palatine uses the 10 days exclusion as well.</p> <p>If we could decide on these simpler metrics and staffing solutions, the board could have more</p>

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	<p>time to discuss other relevant topics to the community, including the use of COVID-19 relief funds that ISBE reports can be used to mitigate learning loss by “consider[ing] a longer school year, before-/after-school programs, and summer learning opportunities”. https://www.isbe.net/documents/message-superintendent-01062021.pdf</p> <p>You could have time to discuss the Thomas closure, what has been learned and why South nor any of the grammar schools had an outbreak.</p> <p>As you meet today please cut through the noise and make the decisions that need to be made in order to meet the community needs. The majority of parents have spoken and have chosen in person learning in the survey. Please make the decision formally that you have been making informally to use district metrics and reduced exclusion days.</p> <p>Thank you, Laura Culley</p>
Kristen Ulery	<p>Dear Board of Education:</p> <p>When making a determination of whether to remain in-person or move to remote, it is essential that the Superintendent be allowed to use her judgment and make that decision the same way she decides when to close school for inclement weather. The metrics the board develops can guide her decision, but she must have the flexibility to move to remote when necessary, even if fewer than 5 of the 6 metrics are red.</p> <p>There are circumstances where one metric by itself could necessitate moving to remote: --A shortage of cleaning supplies would make it unsafe to have students in-person. --A shortage of staff may provide for better continuity of instruction if students and staff can be remote. --Significant community spread at District 25 schools should trigger a move to remote learning regardless of metrics in the broader community. --High numbers of cases in the community would make it unsafe and irresponsible to bring large numbers of students into a building together.</p> <p>It is critical that metrics are used only for guidance; they cannot be absolute. Dr. Bein must be given the authority to exercise her professional judgment in moving schools to remote learning when the situation warrants even if fewer than 5 of the 6 board-defined metrics are red.</p> <p>Kristen Ulery</p>
Dominic Franchi	Please put the children's education and mental health first. Full in person learning is necessary.
christy witherow	Please continue to work together to find solutions to allow the CHOICE for families to send their kids to school full time.
Mairin Gradek	<p>In November the Board approved the motion to plan on a return option for full in person instruction in January. The motion approved did not indicate 80% hybrid but 100% full in person model. The board needs to question why 4 days is now considered full time. Dr. Bein repeatedly stated that if metrics met in January the students would be able to attend FULL time but Mondays remove for all. That is not full time but a hybrid model. Call it what it is! I will state again that my 8th grader at Thomas has only had the option of NINE days in person this school year. How is she to be prepared to compete at Hersey with those students coming from St. James, St. Peters, Christian Liberty that has been in person this entire school year. This is such a disservice to the children of District 25.</p> <p>The board also instructed the administration to get more students in classrooms that were not at capacity. That still has NOT occurred across the district. There is no reason why all of those students have not been invited to attend 80%.</p> <p>The mitigation works. Please get our children back in class.</p>

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Melisa Andrews	<p>Yesterday I lost a family member to COVID. You the board are not taking COVID SERIOUSLY! How many more people will it take, better yet how many teachers/staff in our district need to get sick or die because you are not taking this seriously? Just follow the metrics that are outlined for you from IDPH, CCDPH, ISBE, CDC and MOST IMPORTANTLY Dr. Bein! She has outlined multiple times measures YOU should be taking because YOU took away her decision making. When the kids go back to school we will have outbreaks. This is nonsense! Start taking your responsibilities seriously and not trying to make this for your own benefit to get as many bodies in a class room as you possibly can!</p>
Steven Andrews	<p>The District should continue the creative, lower-risk solution we already have in place with the Hybrid Model until vaccines are more widely distributed. Additionally, the 7-day test positivity average hasn't been below 8% in Region 10 since October. Going through a Step 4 selection process at this time is premature. The selection process and transition should occur after we've met the metrics, not in preparation for some arbitrary date that we are unlikely to meet.</p>
Eileen Ryan	<p>Hybrid should end and full in person learning should begin on Jan 19th</p>

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Megan Geltner Tricia Montesano Kristina Finch Amanda Bhansali Jen Anderson Alexis Hammond Ana De La Rosa Kecman Stephanie Keadle Lauren Salsinger Kim Dunning Melisa Andrews Julia Piontek Ann Poyer Jennifer Black- Foltin Geoffrey Foltin Liz Chlopowicz Emily Eisenhuth Janine Flauter Kristen Christiansen Susan Allison Kathryn Stutzman Pat Litberg Melissa Buchberger Pamela O'Connor Tricia Fuglestad Patricia Gunger Amy Haber Laura Friedlein Judie King Jennifer Eichorn Bliss Hansen Joseph Kim Jill Larsen Steve Chiappe Megan Hill Gina Heuer Beckie Hejna Jamie Impastato Meg Thomson Whitney Simon Nicole Keith Meghan Yarbrough Kate May Michelle Walsh Camille Ziemann Kristie Burmeister Jennifer Schmidt Amy Johnson Kate Murray Amy Ksiazk Amy	<p>**ALL ADDRESSES ON FILE**</p> <p>**UPDATES TO SD25 PARENTS DEMANDING SAFE SAFE EDUCATION: Current Signature Count - 564</p> <p>Verbiage changed to note current demand that schools are returned to remote learning until IDPH and CCDPH Guidelines indicate that it is safe to so**</p> <p>January 7, 2020 School District 25 School Board 1200 South Dunton Avenue Arlington Heights, IL 60005</p> <p>CC: Dr. Lori Bein, Superintendent Illinois School Board of Education Dr. Carmen I. Ayala, State Superintendent of Education Kevin Jauch, Regional Superintendent of Education for North Cook County Governor J.B. Pritzker Senator Ann Giles pie Senator Mark Walker Congresswoman Janice Schakowsky Thomas W. Hayes, Mayor of Arlington Heights The Arlington Heights Patch The Daily Herald The Mount Prospect Journal Chicago Tribune WGN Chicago MSNBC CNN NBC5 Chicago CBS News</p> <p>To the Members of the School Board: The COVID-19 pandemic is still real, it is still out of control, and it is devastating our community, our state, and our nation. The latest vetted, scientific evidence continues to uphold that allowing in-person school with the current COVID-19 infection and community spread metrics is not only unsafe for those in attendance, but is also accelerating the spread of this deadly disease . Despite this evidence, despite guidance from the Illinois School Board of Education (ISBE) , the Illinois Department of Public Health (IDPH), Cook County Public Health , and the Executive Order from Illinois Governor J.B. Pritzker, you, the School Board members of School District 25 (SD25) are not only refusing to take the recommended Adaptive Pause/return to full remote, but are forging ahead to a return to full in-person attendance by January 19. This is in blatant defiance of not only the guidelines given by the aforementioned governmental departments to which you answer, but also in defiance of the guidelines set and published BY YOU. In light of these truths, we, the undersigned parents and taxpayers of School District 25 (SD25), hereby petition and demand the following: 1) We demand that metrics and guidelines for full remote/Adaptive Pause, hybrid, and return to full in-person school for the district MUST mirror CCDPH, ISBE and IDPH metrics, and not be formed and continuously manipulated by SD25 school board members, none of whom are infectious disease experts. If the ISBE and IDPH metrics and guidelines for attendance are updated based on new science, then SD25's metrics and adherence to those guidelines must mirror those updates. SD25 schools must adhere to these metric-based guidelines at all times, as all other surrounding school districts are doing. Based on these metrics, School District 25 has been in the COVID positive danger zone for 6 weeks as of December 17. We demand that all SD25 schools be returned to remote learning until the above metrics indicate a safe return to</p>

First and Last Name	Public Comment
<p>Heisler Kelly Pricemoore Joshua Price- Moore Becki Bloxsom Melanie Romero Jeff Lisy Roberta Novak Jaclyn Aprati Stacey Tobin Jerry Shirts Beth Deiter Jennifer Porto Heather Lockhart Kristen Clark Jeff Clark Maria Palmer Mary Hannon Michael Hannon Kate Zbierski Robb Zbierski Shaun Marusek Megan Nuccio Frank Nuccio Jennifer Bates Marcy Meyer Evan Meyer Elizabeth Lundgren Christine Arce Jennifer Mindykowski Christy Walsh Jamee McBride Laura Ness Meghan Grell Kathy Sutton Terri McDonnell Marcie Selvaggio Patrick Stevens Theresa Fowler Sharon Barber Ellie Branson Gina Tyson Robyn Swanson Rebecca Reiter Nina Koufalias Ana Fergus Kelly Drucker Lisa Lightcap Tracy Roth Louis Arce Kirsten Boyce Jeanette Hanik Kevin Michael Prajka Maidankar</p>	<p>in-person school.</p> <p>2) We demand recognition by the Board that, according to SD25's own survey results, the majority of parents, teachers, and staff members want the School Board to use these metrics to make the decisions for remote, hybrid, or in-person school attendance for SD25.</p> <p>3) We demand that the Board continue to recognize the expertise in educational matters that Superintendent Lori Bein's PhD in Education affords her, and commit to upholding her right to vote on the adaptation of any educational model, to take her expert recommendations into serious consideration on any matter for which it is given, and to continue to allow her to carry out the duties of her appointed office.</p> <p>4) We demand recognition of the scientifically proven fact that coronavirus can be transmitted by small aerosol particles , and that increasing the number of students in a building for long periods of time means that unmasking to eat, drink, or for any other reason while inside a school building puts that person in immediate danger of COVID infection .</p> <p>5) We demand that School Board members adhere to the IASB guidelines and Oath of Office to which they agreed upon confirmation in their elected posts.</p> <p>6) We demand that, as per the aforementioned Oath of Office and IASB guidelines, any School Board member who has publicly expressed a bias in a matter before the Board recuse themselves from voting on that matter. It has come to the attention of many SD25 parents that one or more current Board Members had posted a "Reopen Schools" sign in their yard for public view (photo of signage can be provided upon request). While at least one member removed their sign, it does not change the fact that a bias has been established, and to present themselves as an unbiased representative of SD25 parents and the SD25 community as a whole to vote on decisions regarding remote vs. in-person schooling would be a violation of the conflict of interest directive in the School Board Code of Ethics whether the sign remains in a board member's yard or not.</p> <p>7) We demand that SD25 provide full and timely transparency to the members of the SD25 community into reported COVID-19 numbers from SD25 schools, with a break-down by number of students, teachers, and staff members infected or exposed. Current notifications have proven to include inaccurate statements—members of the SD25 community have come forward to contradict letters to parents stating there were no close contacts, advising that they had, in fact, been notified by IDPH that they were a close contact with a COVID infected individual at an SD25 school on the date mentioned in the notification letter. Also, the numbers on the COVID dashboard is often behind more than a week. Incorrect and inaccurate information impedes the ability of SD25 families and community members to make informed decisions. This must be remedied immediately.</p> <p>It is an undebatable truth that we all want our children back in schools as soon as it is safe to do so, as is the fact that education is better when administered by qualified teachers who have dedicated their lives to educating our kids. Socialization is also undeniably important to the mental health of our children. However, education can be made up with adaptive curriculums over the course of one or more years, as can socialization. The trauma from losing a parent, grandparent, or beloved teacher to death from COVID-19—or the child suffering long-term damage or dying from COVID themselves—is irreversible. The coronavirus does not discriminate based on financial situation, neighborhood, or political affiliation, nor does School District 25 live in a bubble unaffected by other communities within our county and state; the current circumstances require all community members to make lesser sacrifices in order to mitigate the horrific death and permanent physical and mental damage of this pandemic. In addition to the fact that a return to full remote learning based on current metrics is simply the moral, "right" thing to do, a refusal by this board to take action to protect our children, families, and community from the dangers of the COVID-19 pandemic is a litigious offense—one that is likely not covered by the District's liability insurance . For the sake of everyone in this community, we, the parents and taxpayers whom you were elected to represent, demand that you immediately implement and adhere to the above requirements.</p>

First and Last Name	Public Comment
<p>Jennifer Amling Katie Peterson Rachael Hooker Kelley Balmer April Berry Kelsey Anstandig Lynn Bengtsen Phil Bengtsen Rebecca Burns Peter Burns Monica Hinchey Sarah Canace Rob Nesvacil Kaitlin Koralik Lindsay Arndt Jenica Polifka Garrett Polifka Karri Ophus Jennifer Licato Renee Burns Megan Kelly Katy Domsten Eric Riggi James Licato Margaret Kearns Kevin Kearns Jani Graziano Julie Coon Ryan Christie Kevin M. Gross Michelle S. Friedman-Gross Bryan Branson Jeremy Glass Jeanne McCullough Tim Lintner Virginia McDonnell Melissa Gilland Carol Nesvacil Katelyn Gustafson Jenny Haefliger Sheila Crowley Mary Blatter Theresa Warren Sara Michael Nicole Bielawa Tony Montesano Kendra Lintner Sharon Todd & Katelyn Lorenz Larry Bauerle Lesley Daniel Debbie Solus</p>	

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<p>Eileen Herbster Kimberly Musolf Adam Musolf Aaron Coon Julie Gartrell Karen Jones Tom Galazka Christine Organ Tom Tyson Kelli McDonald Amy Darby Kim Eckert Anita Langdon Joe Eckert Jodi Copersmet Casey Whitaker Amy Simonetti Kathie Avvisati Joanna Esposito Marilyn Briggs Patricia DeCorah Erin Lowery Mallory Sullivan Diane Polifka Elizabeth Wilson Carrie Kuczak Barb Donahue Jeremy Pearl Allison Anderle Paul Wakefield Oxana Corbett Jenifer Hope Tim Morkert Amy Derken Pam Wuich Shane Yarbrough Kelly Darby Kerri Connelly Maurice Finnegan Megan Kalweit Marianne Baltowski Janelle Dufer Melissa Fasuna Jennifer Mckown Peggy Delwo Gary Delwo Toni Stuller Craig Stuller Maureen Pajerski Charles Richardt Jerry Oakes Nicole Oakes Lisa Oakes Max MacCready Lauren</p>	

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<p>MacCready Shannon Hull Tom Wuich Erin Matray Maria Caruso Katie Cosgrove Fred DeMarco Stacy Marini Kelly Ellsworth Allison Vercimak Angelica Andrews Kelly OSullivan Steven Andrews ALODIA C. KENDAL Terri D'Acquisto Lisa Parciak Holly Schafer Kelly DeRosa Jennifer Leigh Diva Pagnotto Ellie Hicks Susan Weres Mr and Mrs R Fraser Alice Dahl Sue Villanova Sean Conroy Sarah Galla Katherine Scortino Lauren Gonke Michelle Brinson Cynthia Mc Intyre Nick Larse Michael McIntyre Ken & Sue Kowols Talia Dohman Dr. Matthew Kinney Carol Vittore J Gerdes Kristen Cordell Sharon Korb Melissa Conroy Jeremy Fischer Sarah Dempsey Kelly McMillen Douglas Hammond Sarah Ivy Tracy Bauman Carol Hrejsa Cary Dohman Kara Bolf Christina Dastice Mariam Ghaith Christine</p>	

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<p> Bishop Patrick Braun Molly siegel Karen Galazka Michele Hilgart Bridget Schank Alexis Christensen Amanda Sharpe Mercedes Ritchey Michelle Kasprzak Lisa Groh Bruce Adlon Marjorie Kinney Holly Furman Nancy Sudlow Summer Sander Matt Sander Samantha Brex Nicole hildebrandt Josh Sharpe Herb Musolf Ann Musolf Jason Ivy Linda Norris Deanna Amelio Sue Thomson Scott Corbett Amy Graziano Jim Graziano Bob Andrews Susan Petersen Amy Doman James Doman Karen Joseph David Petersen Lisa Ragone Peters James D Jones Janet Reed Colleen Kave AJ Draut Randi Lamb Jamee falknor Jennifer Nebel Sridevi Ganesan Todd Cordell Kevin & Cindy Vander Klay Taylor Lindsey Anthony Pagnotto Kate Limbers Laura Zoumboulis Lauren Stump </p>	

First and Last Name	Public Comment
<p> Timothy Schank Kristin Allen Anne Porto Greg Domsten Tricia Hasan Phil Copersmet Kimberly Bolaños Mary Kate Schoenbeck Ann Gemmel Amy Kalkwarf Ben Kalkwarf Shobha Gupta Sophia Vassos Mary Vassos Dian Davis Charles P. Davis Elaine Vassos Dominick Vassos Dawn Frenzel Bryan Frenzel Lynn Kaniff Joseph Impastato Alexis Rabe Elizabeth Wolff David Peterson Sharon Anderson Chris Fries Terry Peterson Heather Doman Jessica Mitilineos Michelle Felde Rachel Hendrickson Caryn Solvsberg Pattie Manning Laurie Ford Brian Cosgrove Kristine Miller Thomas Serritella Michael Kuehl Kelly Loch Steve Rish Martie Salemi Anne Ingratta Chris Stahlmann Lawrence E. Rhyner Danielle Rubel Zachary Novick Kathryn Coughlin Sharon Lee Gabriela Porras Clara Nesvacil Nick Rubel Judy </p>	

First and Last Name	Public Comment
Newman Laura Ondrovic Kaitlin Fajks Tina Fries Ethan Williams Lisa A. Jones Cristina Small Tara Houx Brad Houx Richard Watson Sandra Scharff Heidi Sliwinski Amanda Lace Graham Lace Prajka Maidarkar Amanda Forssander Marissa Mannella Steven Mannella Diane Thompson Maria Bauer Krista Weil Maureen Stukenberg Ashley Almdale Nancy Wielondek Judy Schoenfeld Michelle Petersen Diana Sayavongsa Chant Sayavongsa Brian Bates Chris Hooker Paul Schoenbeck Erik Poyer Kim Thoma Ryan Hrejsa Mike Bauer Stephanie Luzio Ellyn Ward Ryan Berry Michelle Eidle Joseph Luzio Asako Hoichi Phyllis Koclanis Andrew Rabe Jason Ksiazk Mark Nebel Jim Small Mark Allison Matt Hrtanek Cassie Hrtanek Valerie Pajerski Sarah Armsey Shannon Diederich Roopa	

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Prasad Lisa Rottenberg Lisa Doty Christina Perez Judy L Pozdol Jon Jacobson Spiro Anagnostakos Daniel Lillie Lucy Lillie Amy Kuehl Gayle Hassan Lauren Mucha Joan Redmon Mike Haefliger Jacqueline Raitano Virginia Coglianese Calvin Bell Traci Sara Erin Lakomski Blair Christensen Jurgita Andrisiunaite Heather Kral John Chlopowicz Chris Chlopowicz Ryan Chlopowicz Jennifer Skilbeck Steve Skilbeck Heather Garrard Nancy Webber Charles Thompson Kari Ugent Michelle Burke Carleen Swanberg Troy Swanberg Jill Helmann Tony Gibbs Clayton Kalweit Melissa Gibbs Katie Bagg Beth Miller Matt Burns Nicole LaBeau Joann Langley Pete Burns Jack Lockhart Patrice Treleaven Michael Treleaven Ben Dodge Carrie Hagan Bethany Larson Natalie Malley Anna Maria Scatena	

First and Last Name	Public Comment
<p> Lisa Welch Ryan Malley Donna Hynek Katherine Redmon Cindy Wilson Randall Warren Tara Zapatka Patrice Costello Dave Zapatka Katie Wilson Rebecca Fahnoe Noleen Nelson Autumn Valencia Myles Wilson Anthony Kuch Todd Slowinski Lindsey Pearl Danielle Schuh Egan Malley Michael Gogliotti Jim Valentine Heather Martin Susan Gogliotti Patti Schulstad Wendy Danley Vicki Proffitt Nancy Richardson Julianna Cucci Marc Sporcich Linda Bearden Betty Nichols Stephanie Lazzari John Lazzari Aimee Hall Julia Piontek John Piontek Bruce Braun Allison Kulla Ian Wilson Nancy Velasco Jennifer Lundeen Gary Parciak Stacey Bratek Michael Andrews James Tobin Chris Deiter Deborah Freudenberger Mary Fey Larry Andrews Sal D'Acquisto Sal D'Acquisto Jr Sal L D'Acquisto Sr Kelly Fox Tom </p>	

First and Last Name	Public Comment
Lakomski Ayah Jaber Roger Sharpe Maribeth O'Dell Amanda Taylor Dan Bratek Lance Schulstad Katherine Pozniak Ellen Sharpe Deb Artman Colleen Engle Raymond Siebert Margaret Short Anna Lange Nicole Barbieri Jackie Hallmark Ann Genmel Kathleen Wohlbrandt Daniel Puccini Michele Lara Ana Kecman Emily Morrison Debra Kowalczyk Joanne Kohn Beatrice O'Donnell Stephen Sutton Eric Sutton Jolanta Jill Stark Michael Stark Jason Ksiazk Nicolle Grasse Leigh Strauss Daniel Strauss Ana Kecman Virginia McDonnell Kelly McMillen	
Kate May	Irresponsible and reckless. That is how you have been playing with the lives of our teachers, staff, and students. The fact that metrics STILL have not been finalized by this district in January of 2021, almost a full year after we have learned about the coronavirus, is abhorrent. You took this job away from the one person doing hers. So, STEP UP. Make a decision. Tonight. It is your only job here. A job you asked for. How will you calculate the risk for the human lives you are charged with? It's time. It's past time. Decide. You are expecting us to.

First and Last Name	Public Comment
Sean Molina	<p>Members of the School Board and Dr. Bein,</p> <p>Thank you again for all of your continued time and efforts during this unprecedented time. As you continue to discuss the transition to move our children back to an in person learning environment, I would like to reiterate my support in bringing our children back as soon as safely possible. The past few months in our hybrid model has shown that having our children in the classroom has not resulted in any super spreader events. The mitigation efforts that are being utilized has proven to be effective throughout the school year despite whatever changes in the general population have occurred. You as a board stood firm and kept our students in class over the recent months which has proven to be a decision that did not have the negative ramifications that so many people believed would occur. To that end given what we have seen within each of the school, moving to a full 5 day in person schedule should be done January 19th regardless of any arbitrary testing metric. The use of a positivity testing metric is one that does not accurately reflect how a virus is impacting an area. People will only test if there is a need to test. If we were to test the entire population at one time the true positivity rate would be far less that what is being reported at this time. Additionally, if one were to look at the breakdown of what demographics have been significantly impacted by the virus in terms of severity of cases, etc. school age children have proved the least impacted. All things being considered the negative effects of remote learning and lockdowns are far more impactful than the virus itself. I encourage the board to return our students to a normal in person learning environment January 19th.</p> <p>Thank you. Sean Molina</p>
Alina Laurie	<p>Please open our schools 5 days a week starting January 19th. Our schools are safe for our kids and our staff exactly as they are right now. The virus is here to stay, there will always be "cases" counted. Public Health officials have stated over and over again that in-person learning in schools is safe right now. Metrics don't need to change.</p>
Gina Tyson	<p>I urge you to reconsider the point to point distancing in the classroom. This is not the spacing CDC is recommending. They continue to recommend 6 feet of space between people. We should adhere to that guidance. There is a new covid variant spreading that is significantly more transmissible, especially in children. If there was ever a time to be vigilant about healthcare guidance now is that time. Any space less than 6 feet is unacceptable and irresponsible.</p>
Amanda Bhansali	<p>There is a new variant of COVID that is spreading across the USA. Children are proving more susceptible to this new variant. Protect our children (and school staff)- take an adaptive pause the next time Cook County is over 10%!</p>
Todd Witherow	<p>I ask the board to listen to the 75% majority who for the last six months and five surveys continues to desire in person learning for their children. As a whole we have spent too much time discussing metrics and not defining what, if anything more, is needed to create safe, healthy learning spaces for our children and teachers.</p> <p>We are not a divided community. Consistently over five surveys the last six months the input the community has provided has been incredibly consistent.</p> <p>Please Eliminate the metrics adopted previously and adopt a CCPHD recommendation based approach for school and classroom decisions. Allowing us to achieve a full in person and full remote plan on 1/19.</p>

First and Last Name	Public Comment
Robert Culley	<p>By now, I believe the Board has recognized that using number of COVID cases as a metric is flawed at best and useless at worst. The only metrics that are useful are the COVID survival/fatality rates and hospital resource availability. In Illinois, as of 1/2/21, the survivability rates of those below 60 years old is 99.9%. The percentage of hospital beds being used is 73% (normal) and ICU usage is 78% (normal).Please keep on the path to have 4 or 5 day per week in-person instruction by the middle of January. You have been courageous in fighting for our children. Keep doing what is best for them and not the ATA or Dr. Bein.</p>
Tricia Fuglestad	<p>I'm troubled by my inbox this morning, the day following the riots at the capital, giving teachers advice on reassuring children that they are safe. That isn't true. The schools are not safe. We have no way of knowing if children are coming to school with COVID. They could be spreading or breathing in a potentially deadly virus that could sicken their teacher, classmates, and families. Close the schools until the vaccine can be administered.</p>
Jennifer zakaras	<p>Please consider the needs of our most vulnerable students, those in special education. They need consistency and sending them home to work remotely is not in their best interest especially since they have been in person, thriving, for months now. My son would be crushed if he no longer was able to go to school. And how do we explain to him we don't know for how long or even why it was necessary?</p> <p>Also, please consider proving more information in the emails about people testing positive in the school. As parents, we would like to know if it was in the classroom. Names do not need to be provided or even if they were a teacher or a student which will help with confidentiality. Outside of the classroom would be considered low risk and not a deciding factor if we felt we should keep our son home.</p> <p>Please remember our children, your students, are little humans, not just a number or a metric.</p>
Michelle Casillas	<p>Special Ed - Keep moving for full in person for all, four days a week is not fully open, we need to move to 5 days asap. 4 days was NEVER the option, full open means five days. It can be done, my daughter has been attending since 9/1 for half days and we have been safe and it is working out great, moving into the 4 days for her was wonderful, she needs to be in the full week. School is 5 days not 4.</p>

First and Last Name	Public Comment
Liz Osterhues	<p>TOPIC: Current metrics concern, Revise Communication and Quarantine protocols Dear Dr. Bein and D25 School Board Members,</p> <p>I am concerned about our continued metrics debate, the constant looming threat of taking an Adaptive Pause, the protocols in place for notifying families of positive COVID cases and the standards currently in place for quarantining students.</p> <p>Why is a group of non-medical experts trying to devise metrics when no health organization has been able to do so? “There are no definitive public health metrics for reopening schools at present.” This statement was made by Chicago Department of Public Health Medical Director, Dr. Marielle Fricchione, on Tuesday, Jan 5, 2021, at a press conference with CPS CEO Dr. Janice Jackson. There are NO definitive public health metrics by any health organization, yet D25 continues to spend countless hours creating, discussing, revising and recreating their own metrics. I understand the need for a guideline so we all understand when it is or isn’t safe to be in-person and to what degree, but you are not experts with the necessary knowledge or expertise to be creating these metrics or determining what criteria to include in a metric. You are educators, IT executives, police officers, sales and marketing managers - all important and respected professions, but unfortunately none of which have the necessary skill set to determine the safety or lack there of to determine in-person or remote schooling. I agree with the need for an internal report card in order to assess resources (staffing, mitigation tools, etc.) but coming up with numbers and qualifiers related to external criteria (community positive cases, etc.) needs to be done so under the guidance of scientifically based data and health and medical experts.</p> <p>While there is no public health metrics available, there is a recently published study by Dr. Fricchione and Dr. Arwady and their team (the only one of its depth in the U.S.) that tracked COVID-19 transmission in non-public schools in Illinois, a study consisting of almost 20,000 students, and it concluded that schools are safe and not a source of Covid-19 spread. Students need to be in school. Rather than using valuable time to create impossible or flawed metrics, I implore you to use the time to read the research that clearly shows where students should be - in school.</p> <p>Until organizations such as CCDPH and IDPH order our schools to close, I ask Dr. Bein and the Board to stop bringing Adaptive Pause to the table. You sent us surveys asking for our input and we’ve completed them. 75% of families want in-person learning, 25% want remote. Done. And while you have an obligation to represent and listen to the wants and needs of our community, your ultimate decision to meet our differing needs must be based on facts and expert guidance regarding what is best for students and staff. The 25% who want to be remote currently have that choice, as they should. 75% of families want to be in-person. This is great but can only be granted if data and science support in-person learning. And it does. Scientific research, current data, countless health experts and health and disease prevention organizations all show schools to be safe. D25 determinations for full remote/Adaptive Pause, hybrid, and return to full in-person schooling MUST mirror CCDPH, ISBE and IDPH issued guidance. So please, if you won’t listen to the surveys you created and asked us to complete, listen to the overwhelming amount of research and data that say kids need to be in school. Look at recent research by Dr. Fricchione, Dr. Arwady, et al., listen to the AAP President, Lee Beers who’s following statement is supported by research, “Children absolutely need to return to in-school learning for their healthy development and well-being, and so safety in schools and in the community must be a priority.” The Adaptive Pause suggestion needs to stop and our focus needs to be on HOW to get these kids into school, full-time, safely. We should resume consideration of AP when, and only when, health officials recommend it.</p> <p>As we look toward moving our students to full in-person learning, I admit, I am scared to send my medically complex child to school. I am scared because all of this is so unknown. But I have</p>

First and Last Name	Public Comment
	<p>to trust the doctors, researchers and data that continue to show that schools, when stringently following layered mitigation protocols, are safe places for learning. I have to push aside my fear and focus on the advice and data provided by the experts - and not the politics pushed by our politicians and media. In the face of fear vs science, we must choose science. BUT in order for science to prevail, we MUST follow it. Every part of it. D25 can't pick and choose what they want to follow. Follow it all. Follow and adhere to the guidelines set by the CDC, CCDH, and IDPH. Look at local school data. Look at the schools in our community that are successfully doing in-person and follow their plan. Don't recreate the wheel (because your wheel may fail). Use the wheel that is being used with proven success. Look at Wayside, St. Peter, St. James, other districts such as D69. Learn from them. Look at the mitigation protocols and the procedures of the schools in Dr. Fricchione's study and duplicate them. Duplicate not just their layered mitigation steps such as face masks, hand hygiene and distancing, but also duplicate their communication procedures and quarantine protocols for positive COVID cases. In private schools in our community, as well as public schools in other districts, schools proactively inform parents of positive COVID cases in a child's classroom. In contrast, D25 relies on contact tracing before notifying parents. This is problematic and dangerous. If my child has been in a classroom all day with a child who tests positive, I should be notified. Other districts and other schools (some less than a mile from Westgate) are doing it; why aren't we? Furthermore, other districts, and again our local private schools, are moving in-person classrooms to remote with a single positive COVID case - thus better ensuring the schools remain free from community spread. In contrast, D25 requires 5 positive cases in a classroom before quarantining and moving to remote. How on earth does this make any sense? We have a potentially deadly virus and it requires 5 cases of it to close a classroom? Are you really okay with this? Because I'm not. A single positive case in a classroom and the classroom should move to remote. Yes, there will be interruptions. But I think we would all prefer 10 days remote versus much of our school year. It's not easy, but it's safest and will prevent community spread. And perhaps those families who are inconvenienced by the quarantine yet still behave and socialize as if it were 2019, may reconsider and adjust their dangerous behavior - thus helping to bring down our overall community numbers.</p> <p>As always, thank you for your dedication to our school district and the continued time, effort and work you put into serving our students, families and local school community. Thank you for putting our students first. I hope you had a happy new year and I wish a peaceful, healthy and blessed 2021 for all of us. And an end to COVID.</p> <p>Respectfully, Liz</p>
Debra Downs	<p>The covid-19 numbers are huge and it is spreading fast. Schools should go to remote only numbers for at least two weeks, before someone ends up dying. PLEASE TAKE AN ADAPTIVE PAUSE Before someone gets sick and dies. It's obvious it is too dangerous to have in person classes right now!</p>

First and Last Name	Public Comment
Maryann Zaleski	<p>Dear Board Members,</p> <p>I hope this email finds each one of you healthy and happy. I hope you all were able to relax, unplug, and recharge over the holiday break.</p> <p>I will keep this short and sweet- I understand today's meeting is regarding the metrics we will be using to shut down schools in our district or call for remote learning once again. This conversation has been had multiple times now, and while data and science is constantly evolving, we are not doing our school district any favors by paying attention to regional or county numbers. Please make a motion to eliminate the metrics approved for full in-person for January 19th and instead follow the metrics of our individual schools and zip codes, as they seem to better represent our immediate community.</p> <p>Moving forward, also please start to discuss how the achievement gaps of our students will be assessed as a district. Whether we want to make this comparison or not, our students will inevitably be compared to other students in other states, private schools, and schools within our state that have chosen to provide students a choice for in-person or remote learning this entire school year. While some may say making these comparisons is unfair or unjust, they will be made irregardless of what any of us feel. That's a fact, especially when decisions need to be made regarding enrollment numbers, school choice, and government funding. Please look into what the plan is for assessing those gaps in achievement by the next school year and how teachers may be expected to adjust their instruction.</p> <p>Thank you for continuing to represent the community and trying to address the difficulties the Covid-19 pandemic has presented. Please work together in creating a plan for our parents to have a choice in how their child receives instruction.</p> <p>Sincerely, Maryann Zaleski</p>
<p>The following comments were received after the submission deadline and were not included in the January 7, 2021 Board meeting.</p>	
Stacey Cooke	<p>In regards to the conversation on what metrics to use when deciding to go fully remote, I want to ask you to reconsider your mind set. Why have the people entrusted with our children's education, such as Lori Bein, had such a laser focus on how to keep our kids out of school? It is unfathomable to me. It feels like a constant and unrelenting passion for how to NOT have our children in school. I implore you to work on solutions for making full time in person a choice, rather than focus on metrics which multiple sources (CPS CEO, American Academy of Pediatrics, and more) have repeatedly say do not reflect the safety of in person learning. The metrics don't matter - that is NOT your wheelhouse. If there is an outbreak and the school needs to be closed, IDPH is going to tell you. Let those health and safety experts do their jobs - and you, the people entrusted with our children's EDUCATION can focus on that, getting them the best education.</p>