SPECIAL MEETING THURSDAY, February 4, 2021 AT 5:00 p.m., E.S.T.

Board called to order by Chairman Kusnierz.

Mr. Kusnierz said we are going to get started here. He welcomed everyone to a special board meeting of the Saratoga County Board of Supervisors and welcomed all the Supervisors that are here in person as well as those that are on the line as well as department staff and members of the public that are tuning in or in the back of the room.

Roll call was taken. PRESENT – Eric Connolly, Joseph Grasso, Philip C. Barrett, Jonathon Schopf, Michael Smith, Arthur M. Wright, Kevin Tollisen, Darren O'Connor, Thomas Richardson, Benny Zlotnick, Theodore Kusnierz, Willard H. Peck, Sandra Winney, Thomas N. Wood, III, Tara Gaston, Matthew E. Veitch, Edward D. Kinowski, John Lawler, John Lant - 19. ABSENT – Richard Lucia, Preston Allen, Jean Raymond, Daniel Pemrick – 4.

On a motion by Mr. Tollisen, seconded by Mr. Barrett, the special meeting was ratified by a unanimous vote.

Mr. Kusnierz said just a couple of housekeeping items. We are required to transcribe our proceedings and asked prior to making any statements that Supervisors state their name. He said he would try to be diligent and recognize Supervisors so that it's easier for the transcriptionist to do their job. He reminded Supervisors that we would be adhering to the rule of five-minute discussion by Supervisors to be respectful of everyone's time.

First, this meeting is a follow up to the Governor's announcement that effective February 1 2021, with approval of local health departments, schools K through 12 may participate in higher risk sports. Subsequently, Saratoga County Public Health Commissioner Dr. Dan Kuhles authorized that activity with guidelines and certain matrices that must be met, if the seven-day rolling average percentage of positivity is 4% or below. At that time, after consultation with Dr. Kuhles, Mr. Kusnierz asked the Commissioner to look at the potential, from a public health standpoint, to develop a matrix that would still provide for public health and safety, should the positivity rate bump up over the 4% threshold. He said the initial guidelines would allow student athletes to continue to participate and high-risk sports, possibly looking at the NCAA models. As a result, Dr. Kuhles is here this afternoon to report on a PILOT COVID-19 testing program for high-risk winter sports that will run from February 1 through I think on March 13. Mr. Kusnierz said the 12 school districts, Central School districts and 8 private schools that are in Saratoga County, just over 1100, winter AP winter sports athletes. This is very important to our constituencies. We are very pleased that Dr. Kuhles was able to put together some recommendations as a follow up to last week's conversations. At this time, I would ask the doctor to come forward and, and run down through his recommendations as they stand today.

Dr. Kuhles thanked Chairman Kusnierz. He thanked the members of the Board for this opportunity. He said he wanted to start by reviewing some of the different types of COVID-19 tests that are available to the public. He said he would be this language in his remarks. Dr. Kuhles said there are two main categories of tests that are offered. One is a viral test, and one is an antibody test. Viral tests identifies current infection, and the antibody test may detect past infection. For the purposes of high-risk sports and our discussion today, we are interested in current infection. There are two general categories of viral tests. One is a nucleic acid amplification test a NAT. This is a PCR is in this category. That is the main kind of test. That identifies and detects the virus's genetic material, commonly done in laboratories. NAT's or PCR are gold standard test, but in some cases can take a little longer to process than other tests. Since a PCR test can detect the very low levels of the nucleic acid that cannot be cultured; a positive PCR test does not necessarily mean that an individual is infectious. They continue to shed the virus viral particles throughout a longer course of their illness, but they don't pose a risk to others around them. The Rheonix machine that this Board purchased last summer is a type of PCR machine. That specialized machine can provide these types of results within hours. That machine is as you may know, is at Malta Med. Antigen tests are another type of viral tests that are used. These instead of detecting the nucleic acid detect powerful proteins that the virus makes. They're not generally as sensitive as the PCR, the NAT's. That's particularly true if it's used in someone with no symptoms. Depending on what we call a pretest probability of infection, a result need to be confirmed with a PCR. Dr. Kuhles said the good thing about antigen tests is that they are inexpensive, are commonly used in nursing homes and in the school setting already. One particular antigen test that's common in this state is called BinaxNOW. It is a card and results are available in about 15 minutes. In response to the Chairman's directive, I reviewed recommendations and data from CDC about Covid testing. He said he communicated at length with counterparts in other counties who have college sports teams, and had some correspondence with some of those entities themselves, to learn about their experiments with these NCAA protocols and the practices. He said his conversations focus on each university or colleges use of the antigen test and PCR test. And importantly, the outcome of the local health department's investigation when an infected individual was identified. Our goal is to prevent spread. NCAA teams involved in these high-risk sports are testing student athletes, coaches and other individuals associated with the team several times per week two to three times per week. In most cases, antigen tests are the tests used. If there is a need, confirmatory PCR is done. This is also what the State Health Department does in nursing homes to antigen test and then confirmed by PCR, they use the Binex cards. When prevalence in the community as well, or when the tested person may be asymptomatic or is not a close contact, again, that's the time when there's an increased probability that that antigen test may be a false positive, as a pretest probability that we're talking about, and that's when we would go to confirmatory PCR testing. As such, these athletes at the NCAA, if there is a positive antigen, they are immediately swabbed, right away, to place on isolation, while awaiting results of the confirmatory test. If that confirmatory test is negative, isolation can be discontinued. And if it's positive the usual public health intervention starts, the individual remains isolated and a complete contact case investigation and contact tracing is performed. The individuals that he has spoken to at local health departments have had, they generally have found these protocols to be very good. And the cooperation by the college or university in the case investigation and contact tracing to be extremely helpful. Dr. Kuhles said in summary, other than periods when there's very substantial or high levels of community transmission of COVID, a testing and surveillance program, much like the NCAA has a reasonable balance between the physical and psychological benefits of health. What sports had for youth; and, maintaining our most important thing, which is the health and safety of our community, and especially our hospitals and our health care workers. This protocol adapted here, and added that he would get into the specifics in a moment, when all the other minimum requirements in the plan are met, the school minimum requirements and all other COVID community metrics are met; this PILOT program would be available during the winter sub sports session only. If the seven day rolling average percent positivity in the County, as calculated by the State Health Department is at or above 4.1%. The requirements and components of the PILOT program are that each student athlete, coach, manager, referee, official or any other individual associated with the team, must participate in the PILOT. If they do not, they will be excluded from their team, until that positivity goes back below 4%; and, all other community COVID metrics are met. The districts and schools must maintain a current up to date, electronic long list of all student athletes, coaches, managers associated with a higher risk sport, the line list must be sent to us. There will be an email address for them upon exercising this option if they choose to opt into the PILOT program. Dr. Kuhles said pre-approval from Public Health is not needed. He said they will use that extensively because we'll be taking a random sample with enough statistical power of these individuals, mainly student athletes, but coaches and others as well, twice a week. Anyone that has a positive COVID test in the last 90 days will be excluded from that because that would skew the results. As he said they may shed the virus but not be infected. That sample, twice a week different sample, they are required to be tested. They can use PCR. He said he expects that they'll use antigen tests. If that antigen test is positive, they need confirmatory PCR and that result must be done within 24 hours. The County will make available its Rheonix machine at Malta Med, for confirmatory testing if a school chooses to utilize that pathway. When that individual much like the NCAA, if there was a positive antigen test, that individual has to go on isolation, while the test is for the confirmatory test is, is pending, and everyone associated with that, that team, right all those activities have to have to stop while the confirmatory test is happening. No practice, not even individual low contact no contact, all that is now allowed for the confirmatory test is, is pending. No games, obviously, if it's on a game day. If the confirmatory test is negative, those activities can safely resume if the PCR is confirmed, and is positive, isolation must be continued. And a complete case investigation and contact tracing will be conducted rapidly by the Saratoga County Public Health. No one of course associated with that, that team or that entity can engage in any activity until cleared by Saratoga County Public Health. All of the standard practices that we have isolation, quarantine, following the schools in the state toolkit certainly applies. I think, importantly, there's a lack of data out there, as to whether sports in general or higher risk sports particular what risks they truly pose. It is challenging to tease out the conduct of the sport from the practices, behaviors and environments surrounding that sport. If you have a case, or you have two cases, is it volleyball or is it the locker room without a mask? Is it the bus ride? There are so many different factors. There are two recent studies came out. That said, one is on wrestling in the high school, which did show an association, there is no mask use there and the behaviors at a tournament were questionable. The other one is in the NFL. That

suggested that it was not the conduct of football itself. Rather than behaviors surrounding the conduct of football. The locker rooms doing things they shouldn't be doing and not adhering to social distancing and those things. The data from this program, and our experiments with it, we intend to use that to make better decisions as we move forward to inform decision making for the spring sports season or summer sports season and share that with all of our colleagues and local health departments across the state. One thing that we did hear is that in this region, there's tremendous unity on this issue and safe conduct or what is needed to conduct high risk sports safely. We want to return that and share that data with others as we learn more about COVID, these sports and how it may or may not affect transmission.

Mr. Kusnierz said thank you very much, doctor. Before he opens it up, he is sure his colleagues have some additional questions; I have a few to start. First is a statement, for the benefit of those listening in. Yesterday, the positivity rate here in Saratoga County was at 4%. Today, we are down to 3.5%. So excellent news. We're moving in the right direction very quickly. We hope we can maintain that trend. Just briefly, Dr. you and I have both spoken to many different school districts or superintendents around the county. One of the concerns that I have heard and I'm sure you have as well, is we talk about the NCAA model that we're kind of looking at possibly using parts of that. Some school districts are concerned that model is not practical. Could you elaborate on or compare/contrast what your proposal may include similar to NCAA standards and what is left out and general terms just so we can inform the public school districts on that.

Dr. Kuhles said certainly. The essence of the proposal is essentially a testing and surveillance program. The NCAA in general may test three times a week. This would be twice a week. The overwhelming majority of NCAA schools use an antigen test first. Some of them will use a PCR maybe once a week, in addition to the Binex of the antigen test. This while it does not preclude the use, our proposal does not preclude the use of the initial PCR this would be Binex twice a week. So in that respects, the main differences of frequency of the testing. One of the differences though, that we have, and why his is comfortable with twice a week testing, is that we know that, transmission in schools is quite low. It is not what many epidemiologists and people in the public thought would be in August, or early September. There is an infrastructure in place in high schools and built into this plan, it's a seven page plans very detailed, that may not exist in the university or college setting. There is a lot of freedom when you go to college for your first time. He said he actually thinks that that is something that helps enhance the safeguards and effectiveness of expected effectiveness of this plan. In essence, the main difference is the frequency of testing. More for NCAA less for this, of the internal controls and infrastructure, I think, are stronger at the high school level than they are at the collegiate level, just because of the nature of the environment.

Mr. Kusnierz thanked Dr. Kuhles. He said at this time, he would open up to questions from Supervisors.

Mr. Richardson asked if the rates start to increase again, where is the cutoff where we have to stop all sporting events. Do we have a cut off number?

Dr. Kuhles thanked Mr. Richardson for that question and for the opportunity to clarify. There's not a single community COVID metric. There are groups of metrics that are in there. And likewise, there is, the turn off switch, if you will, there's not a single number or a single seven day rolling average percent positivity, that would tap the protocol. Instead, we'll use a variety of factors, including whether or not in our assessment and with the state health department, whether there is substantial community transmission occurring. And that's, that is consistent with the CDC recommendations, will certainly also look at other epidemiological factors, whether we're in the PILOT or not. Those are hospital capacity. We have to protect our hospitals and our healthcare workers. Those are whether the rate of hospital admissions is going up to too fast. And also the presence of, again, maybe it's a variant, not just a variant that transmits faster, because we'll see that in the data, but a variant that may be resistant to vaccination efforts, or that causes increased morbidity and mortality. It would be a basket of data factors that we would look at. Mr. Richardson thanked Dr. Kuhles.

Mr. Kusnierz said for the record, Supervisor Kinowski has joined us. Mr. Kinowski apologized for calling in late.

Mr. Kusnierz said Supervisor Grasso is the next to speak.

Mr. Grasso thanked the Chairman and thanked Dr. Kuhles for the report and the guidance document. He personally doesn't know or thought that this should be the direction that we should be going in. Now understanding the fact that we've had such a high positivity rate within the last month or so; obviously, things are trending in a great direction for us and hopefully, actions like this, don't change that direction. Going through your report, which is obviously very detailed, he has some concerns about the compliance that we expect with some of those requirements that are listed. And then in terms of the studies, you had mentioned two studies, that it sounded like it translated in a very favorable results. He assumes that there are studies out there that did have favorable results or show that, engaging in these types of high risk activities are not going to raise the risk substantially or, or cause more transmission. Mr. Grasso said Dr. Kuhles had mentioned in the report, regarding the clusters at this time, there's insufficient data to determine whether transmission is more likely to have occurred because of the nature of a given sport. Is Saratoga County becoming the guinea pig of this with this pilot program, or are there other counties that have already gone through this process that we can rely on their data.

Dr. Kuhles said he thought he heard three questions in there. He said he would repeat them back. The first question was about compliance. He initial thought is that because we have an infrastructure in place with schools, and oversight and success in preventing transmission during the school day, he is less concerned about adherence to those rules. There is, as you noted, an extensive layer of protection built into the plan. Dr. Kuhles said what worries him is counties or states that may choose not to allow this at all. Those athletes and their parents will go to a jurisdiction where it is allowed and be some place where there isn't a school board, superintendent and people watching and make sure that there's that adherence. That may actually be a worse outcome, not just for transmission on the team, but more importantly, leading to transmission in the community setting and an increase in patients for our hospitals and healthcare workers. He thinks the place to do this and to the start is in the school, high school setting. Dr. Kuhles said the next question was do we have experience? I'm not aware that the NCAA adopted, or an NCAA like approach has been adopted to this extent, and other counties in New York State. Some counties may be looking at it. His focus is squarely on Saratoga County. Part of his investigation was talking to those entities, those counties and athletic programs that are at the NCAA level, and to determine how it's worked for them. He thinks that is a yes and a no to your question no, at the high school, but yes, overall. He said he would describe Saratoga County as a guinea pig. Studies was the next part of the question. It's a transparent plan that brings to people's attention, recent data, very limited. The wrestling example: it was a high school wrestling tournament in Florida, no masks, no other controls. That data suggested not concluded, suggested that the inherent nature of wrestling, was a likely factor in the cluster that developed. The NFL experience, that looked at kind of a pre and post after the initiation of control measures. That data suggested that it was not football itself, throwing the ball or whatever it was the behavior and environment surrounding the game of football that was likely the main cause of transmission. In his own experience in his prior position, he investigated clusters associated with lots of different sports, higher risk, low risk, summer, winter, different transmission levels in the community. There were many clusters of girls travel softball in the summer. If you look at that different temperature, humidity, outdoors, indoors, how people are spaced. The document that you have is transparent about that, and tries to inform the schools, the parents, and the school medical directors. Mr. Grasso thanked Dr. Kuhles.

Mr. Kusnierz thanked Dr. Kuhles very much. He called on Supervisor O'Connor, followed by Supervisor Richardson and Supervisor Barrett.

Mr. O'Connor thanked the Chairman. Commissioner, just one quick question. This protocol deals with schools. What about sports that are organized by private clubs, like a hockey, a youth hockey group, for example. Will these protocols or any other similar ones be applicable to that kind of a situation?

Dr. Kuhles said at this time, he has not approved the recreational sports activities. For the reasons mentioned, he thinks it is important to gain experience in a setting where we know that there's a solid infrastructure and oversight.

Mr. Kusnierz called on Supervisor Richardson.

Mr. Richardson said he had a quick question that is maybe for the Chairman. The Binex test, is that something the County will be able to distribute to the school districts or is that something that they will have to purchase on their own?

Mr. Kusnierz said the County administrator has been working on that issue and I'll ask him to answer your question.

Mr. Bulger thanked the Chairman. A little history on the Binex test. He asked Dr. Kuhles to correct him if he misspeaks here. That test was developed by Abbott Labs. The federal government approved and gave approval early fall, last year, and ordered 150 million of those tests. They then distributed those Binex tests throughout the Country to the States. The States have been distributing them at no charge because the federal government already paid for them and sent them to nursing homes, hospitals, a whole variety of recipients, including schools. Many of the schools across the State, certainly here in Saratoga County, already have some supply of the Binex tests. He was not sure if all 12 school districts have them. We're still trying to compile that information. If this pilot is implemented, and the school does opt in, because the rate is going up, and as the doctor mentioned earlier, then we will be in touch with them. I f they need to get additional Binex tests we will work with them to provide them. We have set aside some money. We don't think it will be all that much. We're not going to need that many in the next five weeks linked to this program. So we are ready to assist schools. If they do require help with those by Binex cards. A lot of schools as was mentioned, already had some at least enough to get going out of the gate, if needed.

Mr. Richardson asked if he heard Dr. Kuhles correcting in saying that we're going to test all of the athletes once or twice a week.

Dr. Kuhles replied no. We would take a sample of those who have the requisite statistical power twice a week. While this is only in this period of time, where we're at 4.1 and below.

Mr. Richardson said he wanted to say thank you to the good doctor, for doing an outstanding job. We think this is terrific. And he thinks all of the school districts will probably conform if they haven't already. They already have a lot of statistics that they've shared with you. And he just thinks this is great for Saratoga County. So thank you so much for all of your hard work, sir. Dr. Kuhles thanked him for his support.

Mr. Kusnierz thanked Mr. Richardson. Next, we have Supervisor Barrett followed by Supervisor Zlotnick.

Mr. Barrett thanked the Chairman. He does want to thank Chairman Kusnierz for calling this meeting to disseminate information amongst our colleagues, give the opportunity to answer questions, and get this information out to the many residents in Saratoga County that are following this issue very closely. Mr. Barrett wanted to thank Dr. Kuhles for all his effort throughout his time here during the pandemic, but certainly, since that Governor's announcement was made on Friday. From that time forward, he's had this issue as something that he's had to handle and handled quickly. But in general, he just wanted to say, allowing our students to return to athletics or any other chosen activity, as soon as possible in a safe manner is extremely important. There's a lot of reasons for that, in his opinion, the camaraderie, the life lessons, physical conditioning, mental wellness, and the memories are some of just some of the reasons why this is such an important topic. The athletes and families have made it very clear that they are eager to return to action, and they'll do what's necessary to make sure that they partner with everybody involved, to return to action in a safe manner. As a County, we should always work towards options that provide solutions that allow our student athletes to return to action. It is Saratoga County spirit and it's the American spirit that leads us to identify opportunities to move forward in a positive manner, as opposed to just staying stagnant in a position with limitations placed upon us. So in that vein, he did want to thank County leadership, and Dr. Kuhles and everybody that had a hand in this. The superintendents that he has spoken to are very supportive of not only the initial plan that was presented, but also this testing option. The feedback that he received from superintendents has been positive. He knows they look forward to moving forward. At this point, we're under that 4.1%. Hopefully, we keep going in a downward trend on the positivity rate, and everybody will be able to get back to action and do it quickly. Thank you.

Mr. Kusnierz thanked Mr. Barrett. Supervisor Zlotnick.

Mr. Zlotnick thanked the Chairman and said just a couple of quick points here. Do you have numbers, on the school districts; they are well below our County average. Do you have any number of what can you give us a general idea of what an average school district is running for a rolling average?

Dr. Kuhles said that he can't calculate a rolling average for a school district because we don't have a denominator, which is the number of individuals tested. They know their positives. We know that numbers are low, but we cannot calculate a similar statistic. Further, the CDC recommends the use of the County and community broader community level data to inform this, this sort of decision-making. He cannot answer the question directly other than other than to say that we know it's low. He said we also know that up to 40% of people can be asymptomatic. That's more common in with younger ages. Those people may also not seek out testing. So it's, like most things COVID, it's kind of a Rubik's Cube. It's hard to get a very clear black and white straight answers. He said he is not trying to be evasive.

Mr. Zlotnick said that he understood that. Thank you. Just one more question. Over the holidays, everybody was all worried about people getting together and we saw a spike in January, where we were up significantly. And it seems like it's taken a little bit longer than everybody thinks it's a 10 day thing, but he thinks it takes longer for that to actually work its way through. Is there any concern that with the week off in February, we see again, a rolling up, a small spike because the kids have a week off from school, and they are back to doing things like they did the week that they had off between Christmas and New Year's.

Dr. Kuhles said it's certainly a possibility. But one of the things that's in the plan that he hopes all the superintendents in schools have done is a player pledge. It's actually not a player pledge, it's a player coach pledge. Everybody associated whether we're in a pilot program or not in a pilot program, everybody associated with sports, needs to understand that the choices that they make, with the choices you and I make every day, can affect the individuals around them, their teammates, supervisors, and parents. We think those player pledges and coach pledges would be powerful. We heard from many parents and have heard from many athletes, that how determined they are to do this right. There is the infrastructure in place before the break, and after the break. He is sure the coaches and schools will be reminding them of that. But ultimately, much like you and I every day, is the combination of choices that we all make as a community that will determine whether the rate will go up or the rate will go down.

Mr. Kusnierz said thank you, doctor, next to speak is Supervisor Peck followed by Supervisor Lant and the Supervisor Smith. Before you begin, Supervisor Peck, would any Supervisors on the line like to get into the speaking lineup? Hearing none, go ahead, Supervisor Peck.

Mr. Peck thanked the Chairman. Thank you Dr. Kuhles, not only for this program you are putting together but really in the short time that you have been here in Saratoga County. The work you've done has been magnificent, during a very difficult time. He wanted to thank you for that. Just so he's clear on the testing protocol, does that only take effect when the seven day average is 4.1? Is that when the testing begins? Or is it beginning on day one?

Dr. Kuhles said no, it would take effect so long as other measure metrics are met. Schools would have to choose to opt in when that goes to 4.1 so long as it's not widespread.

Mr. Peck said so other metrics are in place right now. We're at 3.5 today. So we are moving forward with winter sports. It's when we hit 4.1 that testing would need to begin and also keeping in mind the other metrics and community metrics.

Dr. Kuhles said correct. And he would just say that the high risk sports they have to conform to the minimum requirements that are detailed in the plan. And it's for high school sports only not the recreational leagues to Supervisor O'Connor's question.

Mr. Peck said okay, he wanted to thank you because it is an issue throughout this County and throughout the State the clamoring of student athletes looking to gain that experience and exposure and we want to do it in a safe manner and he appreciates all your assistance.

Dr. Kuhles said thank you. He just want to let you know he is blessed with a wonderful team at the Health Department. All the departments are helping us, your support; all the members of the board have made a difference with the morale and just getting through this tough time. So thank you.

Mr. Kusnierz thanked Supervisor Peck. Supervisor Lant.

Mr. Lant thanked the Chairman. He thanked Dr. Kuhles for the great job he has done mainly during this. He said he didn't know if it was the school system or coaches that called the director Gavin Park and asked to use Gavin Park for practice. The director is against it and he does have a couple of board members who are. Mr. Lant said he has a town board at seven o'clock that event and asked Dr. Kuhles how he felt having them use Gavin Park. They want to practice basketball. They set their measures and procedures.

Dr. Kuhles said the plan is silent on whether the practice or game needs to be on school property or not. He said what's more important than whether it's on school property or not is that the control measures are in place. He added that as you know things like people should be masked whenever possible. Certainly, that means in the locker room, on the sidelines, when they're not playing things of that nature. Separate from this pilot program, so long as those things are being adhere to he didn't think it mattered whether it's at Gavin Park or another gym.

Mr. Lant asked if the building should be sanitized when they're done. He added that the facility is cleaned every day.

Dr. Kuhles said what we know about the viruses, it causes tremendous morbidity and mortality, but structurally, it's not a particularly hardy virus. Frequent routine cleaning and disinfection of high touch surfaces that is already being done in conjunction with the New York forward guidance are very effective.

Mr. Kusnierz thanked Supervisor Lant. I believe Supervisor Wood has dropped off the call for the record. Supervisor Smith.

Mr. Smith asked, after reading the plan if Dr. Kuhles was recommending the players be masked in a basketball game.

Dr. Kuhles responded that the individuals associated with a sport, whether it's a coach or a player, should be masked whenever possible.

Mr. Smith said he had heard that players, coaches and on the sidelines.

Dr. Kuhles said the document is clear and provides the recommendations from the American Academy of Pediatrics. In most cases, masks are well tolerated. There are specific sports that the AAP calls out where a mask may be harmful. Such as wrestling when it can pose a choking hazard or competitive dance or cheerleading where it could choke or impair vision the person you have in the air and he can't see you and they break a leg. There are sports not listed as high risk such as swimming or a sport maybe like ice hockey when mask gets saturated. It makes it very hard to breathe. A very small number of individuals may have a medical condition, where they have increased risk of respiratory problems. The ultimate decision really needs to be made by the school district's medical director who knows the sport players but we recommended adherence to the AAP.

Mr. Kusnierz asked Supervisor Smith to use the mic for the benefit of those on the call. Mr. Smith said it was going to be basically up to the schools to make that call. Dr. Kuhles said the school medical director should follow the AAP the American Academy of Pediatrics guidance.

Mr. Smith told Dr. Kuhles that he has done a phenomenal job with what's going on and he commended him on that. He said he walked in with Dr. Kuhles today and had the opportunity to chat with him for a minute. He said his last thought: do you perceive this as being the potential stepping-stone towards bringing all the kids back to school? If the high risk sports are approved and moving forward, that to him seems like that's a stepping stone towards bringing those seven through 12 year olds or seventh to 12th graders back full time. He was reading through and saw a recommendation on separation is only three feet now. He didn't know when that changed. He said he knows there are a lot of parents that are saying if you can get high risk sports back in the schools, how come we can't open the school for all students.

Dr. Kuhles said there are many European countries that currently use three meter/three feet rule. He said we also know that the presence of variants in some of these countries are highly transmissible and are causing them to reconsider three feet and going to the six feet. Ultimately, the Governor will decide who is going back to school.

Dr. Kuhles said that is not his decision. He said the job he has is to communicate risk to the Board and to the parents, and Saratoga County. He thinks the data is quite compelling. And to Supervisor Richardson's point he thinks it's a testament. He said he was on the phone with the BOCES superintendent, those teachers and the staff, the administration, they have done an amazing job in tough circumstances, keeping our kids, teachers safe. He thinks the data in the general school setting is quite clear how to make that decision on whether it's going to return safely. He said the data is clear with the measures that are in place. That has been very effective with kids in school, and a whole host of parameters. He said he knows many kids the only place they get a solid meal once or twice a day is at school.

Mr. Kusnierz thanked Supervisor Smith. Next we have Supervisor Zlotnick, followed by Supervisor Peck.

Mr. Zlotnick thanked the Chairman. He said he was looking at the list. And he sees what we'll call high risk sports. There is football and contact lacrosse. Those are the last he's heard scheduled to be possibly redone in the spring. If this pilot program proves successful, will this be able to be duplicated in the spring. When we hear spring sports, we think of golf, tennis, or outdoor track. They're not real contact sports. He asked if this program is already going to be running, would that cause the same kind of concerns for those outdoor individual sports?

Dr. Kuhles said the State Health Department; the New York State Government defined the different sport risk levels? Certain sports have been allowed to play and these high risk ones have. Just to be clear, it's not his assessment of the list. He thinks part of this is designed to look at the conduct of the sport itself, is a hockey, is it lacrosse or volleyball? Or is it the behaviors surrounding that. We certainly use the data to inform decision-makers. He said he thinks it will come down to, what he just mentioned, seeing clusters. Whatever sport they're playing, they run them risk of transmission and closers.

Mr. Kusnierz thanked Supervisor Zlotnick. He said just for the record. Supervisor Lant has been excused to attend his Town Board meeting. Next, we have Supervisor Peck followed by Supervisor Connolly.

Mr. Peck said he had a quick response to Supervisor Smith's comment. He said it was his understanding that the section two athletic board in preparation, since the Governor's announcement is going to be requiring masks except for a medical excuse.

Mr. Kusnierz thanked Supervisor Peck. Supervisor Connolly.

Mr. Connolly thanked Dr. Kuhles for all the work that he has done and are doing. He said that overall he is support of moving forward and finding a way for our student athletes to be able to play sports again. He has to wonder how well equipped we are, as an organization, should the numbers go back up and we hit that 4.1. And then we're dealing with somewhere around 1100 student athletes and, 20 different school districts. Is your staff going to be prepared for that situation and still be able to do all of the other very important work that you're doing? Have we counted that cost very carefully, if it does hit 4.1? Do you see us adding staff members? Do we have them on standby? Are we prepared if this thing does go the wrong way?

Mr. Kuhles thanked Mr. Connolly for the questions and the opportunity to clarify. We are averaging now, in the last week, 70 something cases a day. Just a few weeks ago we were well over 200/250 cases a day. Because of your support, and the positions that you approved and created both before he came here and after with the contact tracers, and the positions that are going to be before you at the next board meeting there is capacity. The sampling will be roughly 300. And, even if you assumed, 10% of those were positive, how many will get confirmed. And what's nice about doing this in the school setting is there's kind of those controls built in. We know where the person is. We have their phone number, if they don't answer the phone, we know where they are during the day. The principal can get them. There's a requirement in here by their parents to fully cooperate. What we found in the community setting is that many people, for whatever reason, may choose not to participate in the public health investigation, or may not answer the phone. They may not give us all the information that we need. And they may not tell us the full truth and all of the contacts. He thinks he would be more concerned if our first time out of the gate was adult hockey league at night or something like that. It's a good point that has been raised and it's something that we will factor in. What is our experience over these five weeks if we use 4.1. How does that translate to different levels of transmission or to the recreational league. We'll let data drive our decisions.

Mr. Chairman thanked Supervisor Connolly. He asked if any Supervisors on the call wish to speak. He said with that we would wrap up. First, he said he would like to comment that Saratoga County is extremely fortunate to not only have a medical doctor on staff serving our residents, but to have an epidemiologist. He didn't think there's too many Counties across New York State that can boast of that level of expertise. He said it is serving our residents extremely well. Moving forward with this process to get our kids back into high-risk winter sports and not sure we could have gotten there without having Dr. Kuhles on staff. So thank you to all the good work you're doing. We appreciate the time out you took out of your busy day to present this proposal or recommendation and guidance to the full board of Supervisors and kudos to all your staff. Thank you. With that, I'll entertain a motion to adjourn.

On a motion by Mr. Smith, seconded by Ms. Gaston the meeting adjourned by a unanimous vote.

Respectfully submitted,

Pamela A. Wright, Clerk