



Public Health

Idaho North Central District

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Latah County

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MINUTES

Board of Health Meeting

August 27, 2026

Nez Perce County Office

Board Members Present:

Connie Osborn (via Teams)
Brad Higgins
Justin McLeod (via Teams)
Tom Lamar
Dr. Kloefer (via Teams)
Joe Gish
Vince Frazier

Staff Present:

Kayla Sprenger
Tara Macke
Sherise Bruce (via Teams)
Mike Larson
Rachael JeanBlanc
Kate Wilson

Excused:**Guests:**

The August 27, 2026, Board of Health meeting was called to order at 9:07 a.m. by Chair Tom Lamar.

Chair Lamar asked for approval of the revised May 28, 2026, Budget Hearing and Board of Health Meeting minutes as mailed.

MOTION: Vince Frazier moved, and Justin McLeod seconded the motion to approve the Budget Hearing and Board of Health Meeting Minutes as presented. Carried unanimously.

Public Health – Idaho North Central District has created a Board of Health email for public comment. Comments in response to an agenda item for a specific meeting date must be received 24 hours in advance of the applicable meeting for routing and board member review.

Public Comment

Ms. Sprenger took the opportunity to introduce Kathryn (Kate) Wilson, Division Administrator over Family and Community Health. Kate has been with us since 2018 in various roles, most recently as Program Manager over the Parents as Teachers program. Moving forward she will oversee the WIC program as well.

Financial Report

Ms. JeanBlanc presented the June FY 2026 Financial Reports:

As of the June report, we are 100% of the way through the fiscal year. June revenue year-to-date totaled \$6,580,476 with a year-to-date revenue balance of \$179,684, this is a 102.81% of budgeted revenue for the FY. Personnel expenses totaled \$3,757,640, with a year-to-date balance of \$615,152 this is 85.93% of the budgeted amount for the FY. Operating expenses year-to-date in June are \$508,387 with a year-to-date balance of \$214,613, this is 70.32% of the budgeted amount for the FY.

Ms. JeanBlanc presented the July FY 2027 Financial Reports:

As of the July report, we are 11.54% of the way through the fiscal year. July revenue year-to-date totaled \$174,629 with a year-to-date revenue balance of \$6,123,126, this is a 2.77% of budgeted revenue for the FY. Personnel expenses totaled \$400,201, with a year-to-date balance of \$3,923,554 this is 9.26% of the budgeted amount for the FY. Operating

expenses year-to-date in July are \$40,950 with a year-to-date balance of \$678,050, this is 5.7% of the budgeted amount for the FY.

MOTION: Brad Higgins moved, and Joe Gish seconded the motion to approve the June FY26 and July FY27 Financials as presented. Carried unanimously.

Write-Off Reports

None at this time.

Board Reports

Commissioner Gish presented two Resolutions, one in opposition of the COVID-19 vaccine safety and one in support of COVID-19 vaccine safety. Commissioner Gish began with a statement requesting that it be included with the minutes.

Commissioner Gish made a motion to approve 2026-08-0001. A resolution authorizing and approving Public Health – Idaho North Central District to affirm that the mRNA COVID-19 vaccines are safe and effective based on scientific evidence and further providing an effective date. Hearing no second the motion dies for lack of a second.

Commissioner Gish motion to approve 2026-08-0002. A resolution authorizing and approving Public Health – Idaho North Central District to declare that the mRNA COVID-19 vaccines are not safe and effective and further providing a effective date. Hearing no second the motion dies for lack of a second.

Commissioner Gish stated that he would be bringing a resolution to the next Board of Health meeting recognizing the vaccine injured within our District.

Please see attached for Commissioner Gish's opening statement.

Director's Report

Septic Fee Waiver for Fire Victims

Public Health is receiving Septic Fee Waiver requests from those impacted by the wildland fires. In the past Public Health has waived these fees for these victims and would like to do so moving forward.

Voluntary Pool Inspection Program

Ms. Bruce reported that there has been interest in a Voluntary Pool Inspection Program for a couple of reasons; insurance and peace of mind for these facilities. Environmental Health staff would provide technical assistance and education to those facilities requesting the voluntary program. Discussion held.

MOTION: Vince Frazier moved, and Joe Gish seconded the motion to approve the Voluntary Pool Inspection Program for one year. Carried unanimously.

Division Updates

Ms. Bruce provided an update on the new software for Environmental Health, Enterprise Permitting and Licensing. New software can be difficult, right now the focus is on training. Environmental Health and clerical staff are meeting weekly to ensure questions and concerns are being addressed.

Ms. Macke provided an update on staffing. Five employees have left in the last few months; three to retirement, one due to a reorganization and another for personal reasons. To date, we have replaced 4. This can be difficult trying to compete with private wages. In past years we have tried to absorb duties to be more fiscally responsible. This is no longer an option as our current employees are overwhelmed.

Mr. Larson provided an update on Rabies. To date we have sent 36 specimens from our District, five have been positive for rabies. Mr. Larson reviewed the required process for transport and testing of specimens.

October IAB Meeting

IAB will be held virtually October 22, 2026 with a short Board of Health meeting prior to the start.

NEXT MEETING: Thursday, October 22, 2026, at 8 a.m. at the Public Health office in Nez Perce County.

MEETING ADJOURNED: 10:07 a.m.



Tom Lamar
Board Chair



Attest: _____
Kayla Sprenger, Director
Secretary to the Board

Board Minutes approved on October 22, 2026.

Our Board should address these resolutions because public health depends upon accurate risk communication, informed consent and public trust. Local health authorities administer vaccines and influence what residents are told by physicians, schools and public institutions. When substantial safety questions remain unresolved, examining them is central to this Board's responsibility.

Idaho Code Section 39-410 gives this Board authority, control and supervision over the district health department and its programs. Section 39-414(2) authorizes actions that are necessary and reasonable for protecting public health and preventive health when supported by scientific evidence. These nonbinding resolutions fall within that public-health policy role, although they would not regulate vaccines or bind state or federal agencies.

The original Pfizer trial reported approximately 95 percent relative effectiveness against symptomatic disease during its initial observation period. It was not designed to establish an all-cause mortality benefit, prevention of transmission or long-term safety. Post-authorization surveillance subsequently established that mRNA vaccination can cause myocarditis and pericarditis, especially in younger males. Human studies also demonstrated that vaccine mRNA and lipid components can enter the bloodstream and remain detectable for days or weeks. That does not establish chronic harm, but it justifies further investigation of biodistribution and persistence.

This issue now extends beyond COVID-19. On August 5, 2026, the FDA approved Moderna's MFLUSIVA, the first U.S. mRNA seasonal influenza vaccine, for people 50 years of age and older. Public Health—Idaho North Central District offers immunizations through its five offices. If MFLUSIVA is recommended, procured and placed on the District's formulary, it could therefore be administered through our health district.

Evidence concerning one vaccine cannot automatically be transferred to another; the formulations, dosages and antigens may differ. Nevertheless, questions about mRNA distribution, antigen persistence, adverse-event monitoring and informed consent now have direct relevance to products this District may be asked to recommend and administer. These resolutions can establish the standards of evidence and disclosure this Board expects before supporting additional mRNA products.

The raw U.S. VAERS data provide further reason for scrutiny. Through approximately June 2026, primary COVID-19 vaccine reports included **19,331 reports classified as deaths and 97,669 additional serious, nonfatal reports**. From 1990 through 2019, VAERS recorded approximately **4,730 death reports and 45,600 nonfatal serious reports for all vaccines combined**.

These are reports, not verified vaccine injuries. COVID reporting requirements, the unprecedented vaccination campaign and heightened awareness limit historical comparisons, and VAERS alone cannot establish causation. But reports of this magnitude constitute a safety signal warranting rigorous investigation.

That brings us to **"the dog that didn't bark."** Federal agencies investigated specific conditions such as myocarditis, thrombosis, Guillain-Barré syndrome and anaphylaxis. What remains absent is a large, controlled, longitudinal federal study of people reporting persistent vaccine injury that includes clinical examinations and measurements of vaccine-specific mRNA, spike protein, lipid nanoparticles and tissue distribution.

Finally, declining to vote should not be mistaken for neutrality. Defeating both resolutions, tabling them indefinitely or taking no action would make no official finding that the vaccines are either safe or unsafe. It would leave existing District policies and communications unchanged, provide staff no new direction and create no clear record of where Board members stand.

A recorded vote—whether approving or rejecting a resolution—creates transparency and accountability. If additional evidence is required, postponement should identify that evidence and establish a date for reconsideration. Otherwise, nonaction preserves the status quo while leaving these questions unresolved as mRNA technology enters another vaccination program.