

AGENDA
Tompkins County Board of Health
Rice Conference Room
Tuesday, August 25, 2015
12:00 Noon

- 12:00** I. Call to Order
- 12:01** II. Privilege of the Floor – Anyone may address the Board of Health (max. 3 mins.)
- 12:04** III. Approval of July 28, 2015 Minutes (2 mins.)
- 12:06** IV. Financial Summary (9 mins.)
- 12:15** V. Reports (15 mins.)
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|-------------------------------|----------------------------------|
| Administration | Children with Special Care Needs |
| Medical Director's Report | County Attorney's Report |
| Division for Community Health | Environmental Health |
- 12:30** VI. New Business
- 12:30** **Environmental Health** (5 mins.)
Enforcement Action:
1. Resolution #ENF-15-0018 – Sammy's Pizzeria, C-Ithaca, Violations of Part 14-1 of the New York State Sanitary Code (Food) (5 mins.)
- 12:35** **Adjournment**

DRAFT

MINUTES
Tompkins County Board of Health
July 28, 2015
12:00 Noon
Rice Conference Room

Present: Will Burbank; David Evelyn, MD, MPH; Brooke Greenhouse; Edward Koppel, MD; James Macmillan, MD, President; Michael McLaughlin, Jr.; and Susan Merkel

Staff: Sylvia Allinger, Director of Children with Special Care Needs; Karen Bishop, Director of Community Health; Liz Cameron, Director of Environmental Health; Brenda Grinnell Crosby, Public Health Administrator; Frank Kruppa, Public Health Director; Jonathan Wood, County Attorney; and Shelley Comisi, Keyboard Specialist

Excused: William Klepack, MD, Medical Director; and Janet Morgan, PhD, Board of Health Member

Guests: John Laura, Resident of Freeville; and Skip Parr, Senior Public Health Sanitarian

Call to Order: Dr. Macmillan called the regular meeting of the Board of Health to order at 12:04 p.m.

Privilege of the Floor: John Laura addressed the Board regarding his concern about his neighborhood where he has lived for eight years. In that time, two of his neighbors died of cancer and another neighbor has been diagnosed with cancer. Mr. Laura wondered if there have been any studies indicating his neighborhood is sick or how to find that information. He also mentioned he has a radon mitigation setup in his basement.

Mr. Kruppa responded he is not aware of any issues in the neighborhood. There is a cancer investigation unit in New York State that has information about cancer demographics around the state and places where potential issues have been identified. Although it does not guarantee there will be a full-fledged investigation, individuals can report concerns about a specific area. When enough reports are received, there is a review to consider what action should be taken. He will email the website address to Mr. Laura. It is the most effective place to get information.

For questions and information about radon, Mr. Kruppa suggested Mr. Laura contact the Healthy Neighborhoods Program at the Health Department. Staff would visit his home to answer questions and discuss safety methods he could employ within the home.

Approval of June 23, 2015 Minutes: Mr. McLaughlin moved to approve the minutes of the June 23, 2015 meeting as written; seconded by Dr. Koppel. Ms. Merkel questioned the time recorded for the “Adjournment” of the meeting on page six. She does not recall

the meeting lasting for that length of time. Mr. Kruppa agreed that the actual time was 1:46 p.m. Dr. Evelyn added the “Out of Executive Session” time also should be adjusted to 1:45 p.m.

The vote on approval of the minutes as amended was unanimous.

Financial Summary: Ms. Grinnell Crosby stated the report has not changed from those of prior months. She commented:

- The County continues to post fringes on a regular monthly basis. This is a shift from the prior two year average when fringes were not posted for this period.
- Medical Examiner autopsy cases continue on the rise. The number of removals is also increasing. When asked if there is any unifying nature in the cases, Ms. Grinnell Crosby said she is conducting a review but has nothing to report at this time.

Administration Report: Mr. Kruppa noted he will be requesting an Executive Session at the end of the meeting to discuss personnel related issues.

Medical Director’s Report: Dr. Klepack was not present for the meeting.

Division for Community Health Report: Ms. Bishop reported:

- The Communicable Disease statistical report consists of two separate reports which is a new presentation for Board members. One report is for the monthly statistics and the other report is the year to date statistics. Responding to the Board’s suggestion at the last meeting, the layout for the statistical reports has been modified to include headings on the second page for easier reading.
- Key staff members are in the midst of transitioning to their new roles. She is grateful to have seasoned staff members who are adjusting to new responsibilities.

Ms. Bishop answered questions regarding the Communicable Disease statistical reports:

- To clear up confusion about the separate reports, she explained one is the monthly report for June; the other report is January *through* June. She thought it would be helpful having both reports to be able to see and track a pattern.
- There is concern about the number of gonorrhea cases. Staff members are working with local partners and the regional office of the New York State Department of Health (NYSDOH).

In a discussion about Lyme disease, it was noted the State requires a laboratory test for the disease to be reported (confirmed). Without those laboratory tests, the disease is probably underreported so the State’s statistics may not be an accurate representation of the number of cases. Mr. Kruppa described the Health Department’s focus is on prevention with a significant outreach campaign every spring. Information is dispersed through the media, sent to providers in the community, and posted on the departmental website.

Children with Special Care Needs Report: Ms. Allinger reported staff completed audits of records to move prescriptions forward with ICD-10 (International Classification

of Diseases, 10th Revision) coding before the October 1st compliance date. As of last week, Early Intervention (EI) records were audited and new prescriptions written. She also has been working with the school districts on preschool prescriptions. Between the two programs, there are 500 children from birth to five years of age with multiple prescriptions. By the end of July, packets will be sent to the physicians.

County Attorney's Report: Mr. Wood had nothing to report.

Environmental Health Report: Ms. Cameron mentioned County Highway is installing a storm drainage project along Ellis Hollow Road. While excavating the ditch, workers have encountered some unknown pipes. Environmental Health (EH) staff members have been identifying which pipes could be from older sewage systems. Some older systems were designed to have a discharge pipe following treatment by a sand filter. Records are being checked to identify which of those systems are still functioning and might be a problem. The systems having a sand filter provide approximately 95 percent treatment before discharge.

Dr. Koppel expressed concern that there may have been firework debris fallout over the offsite camping area at this year's GrassRoots Festival. Ms. Cameron reported festival organizers submitted a plan for the fireworks display. EH staff reviewed the plan and also contacted emergency responders, fire chiefs, and licensed pyrotechnicians. There was a fire engine on site ready to respond.

Responding to Ms. Merkel's question about the use of the new structure for categorizing temporary food service permits, Ms. Cameron replied staff members are issuing multi-day permits using the current fee structure until the new fees take effect in 2016.

Resolution #ENF-15-0017 – Collegetown Bagels-Aurora Street, C-Ithaca, Violations of Part 14-1 of the New York State Sanitary Code (Food): Ms. Cameron summarized the restaurant had food out of temperature violations upon inspection and re-inspection.

Mr. Greenhouse moved to accept the resolution as written; seconded by Dr. Evelyn.

Noting the owner is an experienced operator, Mr. Burbank was puzzled why the temperature violations occurred multiple times. Mr. Parr was not aware of the specifics of the situation. There was a problem with the cooler, so the owner is required to provide a receipt showing the cooler has been replaced or repaired.

The vote on the resolution, as written, carried unanimously.

2016 Proposed Budget Summary: For informational purposes, Mr. Kruppa provided an overview of the proposed budget. He explained the authority for the budget falls with the County Legislature upon the recommendations from County Administrator Joe Mareane. Authority for policy making at the Health Department lies with the Board of Health. Although the budget affects policy making, Mr. Kruppa does not believe any policy decisions need to occur based on the proposed budget.

Guidance from the County Administrator was to create a "maintenance of effort" budget to enable current levels of service to be maintained. In the budget process, Mr. Mareane considers a number of factors to determine a fiscal target number for each

department: mandated costs, uncontrollable costs, tax cap, etc. Early Intervention and Preschool Special Education are State mandated accounts that are a significant portion of the Health Department's budget. Once the target number was established for the department, staff members discussed ways to achieve the maintenance of effort budget goal.

Referring to the proposed budget summary in the packet, Mr. Kruppa directed attention to the appropriation, revenue and local share numbers for each program area. For 2016, the target number of \$2,771,108 was met so programming will continue. Some vacancies may be filled and some may carry through to 2016.

There are three over target requests (OTRs) to be reviewed by the County Administrator and Legislature for potential funding. Two are related to the Health and Safety program which is responsible for complying with the Occupational Safety and Health Administration (OSHA) and the Public Employees Safety and Health (PESH) requirements for 700 County employees. The program is managed by the Health Department and currently being re-evaluated due to staff retirement. Mr. Kruppa has been meeting with representatives of the City of Ithaca to discuss the possibility of sharing resources to provide those services. The two OTRs are related to expenses of the program: (1) operational costs and an increase of five hours per week, and (2) an online safety data sheet service.

The third OTR is significant and relates to staffing in the Children with Special Care Needs (CSCN) program. For some time, Ms. Allinger has been reporting on increasing caseloads. If the program is to continue providing the same high quality care, then it is necessary to look at staffing associated with the program. Currently, CSCN is fully staffed. Asking for another full time employee in a nursing position promotes awareness and discussions with the County Administrator and Legislature regarding the staffing situation.

In conclusion, the Health Department has met its fiscal target. This proposed budget will be presented to the County Administrator on August 4th. After Mr. Mareane has compiled the information from all County departments, he will report his recommended budget to the Legislature.

Mr. Kruppa answered questions regarding the 2106 proposed budget:

- Local share is 100 percent from the County.
- The mandates in the CSCN program are the services provided to the children. CSCN staff does the service coordination which is not mandated. They work with providers and put the plans together. However, as the mandated portion continues to grow, appropriate resources need to be allocated.

2015 Budget: Mr. Kruppa discussed the County Administrator's report to the Legislature regarding the projected shortfalls in the 2015 budget in both the expense and revenue sides of the ledger. There have been unexpected expenses with cost overruns for overtime in the 24/7 operations and a projected \$340,000 overage in the mandated Preschool Special Education program. On the revenue side, sales tax for two quarters in a row has been lower than projected. Mr. Mareane informed the Legislature there could be anywhere from \$750,000 to \$1,000,000 shortfall in the County budget if things continue. One of the measures being taken to mitigate that impact over the next six months is a

hiring freeze. Mr. Mareane has limited hiring to internal promotions and transfers but is honoring any existing authorizations to fill positions. Another mitigating measure is to tighten discretionary spending. Mr. Kruppa has met with Senior Leadership to discuss whether there are any major purchases that can be delayed to help offset the shortfall. He will keep the Board apprised of any changes.

Highlights from the discussion on the 2015 budget:

- Mr. Kruppa noted the hiring freeze affects the replacement of staff which could be a problem if the department is unable to fill vacancies when staff retire or leave for other reasons. At this time, the only position the Health Department does not have authorization to fill is the Health and Safety position.
- In response to a question about opportunities to reduce costs, Ms. Allinger responded the preschool program does not have control over costs because it does not administer the program. As the fiscal agent, her program pays providers and school districts to administer the program; reimbursement is through the New York State Education Department and Medicaid.
- When considering whether the Board should add its voice of concern to State leadership about the preschool program, Mr. Kruppa emphasized there already is an awareness of the huge financial burden on counties that is continuing to grow with more cases and more complex cases. The New York State Association of Counties (NYSAC) has been involved in discussions on how the program is administered and that counties have no control over the fees.
- Mr. Kruppa summarized the realities of the 2015 budget situation are the ever increasing preschool costs and not having planned for those costs to the level that is needed. As the Director, he assumes responsibility for his philosophical approach to budgets. Over the years budgeting for the anticipation of growth had increased significantly over the actual numbers. He was attempting to right size the budget based on the trends, but this year the uncontrolled costs hit a blip.

Adjourn to Executive Session: At 12:55 p.m. Dr. Macmillan moved to adjourn to Executive Session for the purpose of discussing personnel matters; seconded by Dr. Koppel; and carried unanimously.

Out of Executive Session: At 1:32 p.m. Mr. McLaughlin moved to adjourn from Executive Session; seconded by Dr. Macmillan; and carried unanimously.

Adjournment: At 1:33 p.m. Mr. McLaughlin moved to adjourn the meeting; seconded by Dr. Macmillan; and carried unanimously.

Dashboard Display thru July 2015

	Expenditures	Revenues
Health Department		
Mandates		
Non-Mandates		
Preschool Special Education (2960)		
Plng. & Coord. (Health) (4010)		
Women, Infants & Children (4012)		
Occupational Hlth.& Sfty. (4013)		
Medical Examiner (4014)		
Vital Records (4015)		
Division For Community Health (4016)		
Medical Examiner Program (4017)		
Plng. & Coord. Of C.S.N. (4047)		
Phys.Handic.Chil.Treatmnt (4048)		
Early Intervention (0-3) (4054)		
Environmental Health (4090)		
Public Health State Aid (4090)		

LAST REFRESH: August 03, 2015

EXPENDITURES

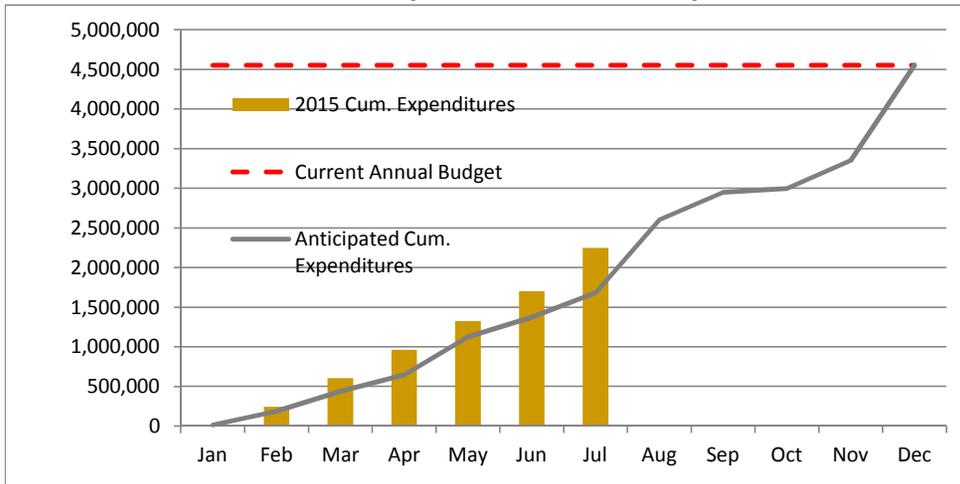
Cumulative to date compared to budget (over budget by more than 15% = Red, between 110% and 115% of budget = Yellow, below 110% of budget = Green)

REVENUES

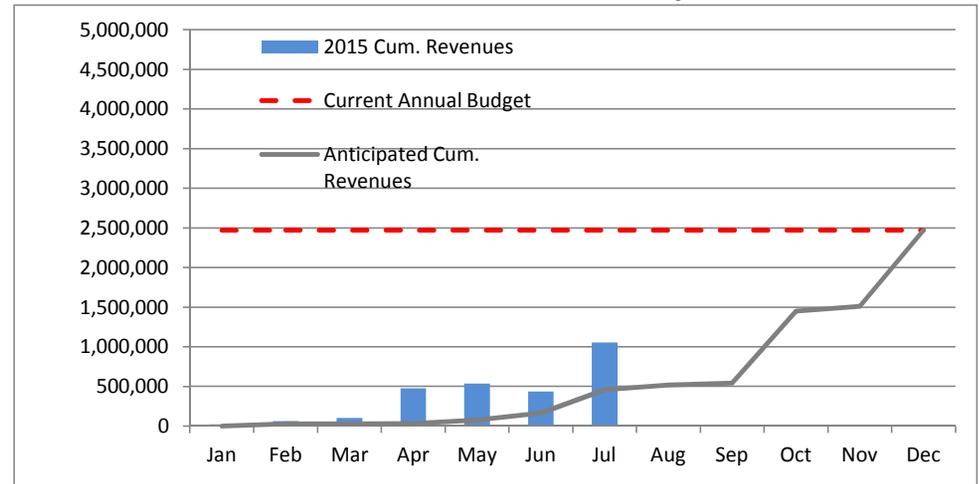
Cumulative to date compared to budget (over = Green, above 90% of budget = Yellow, below 90% of budget = Red)

Health Dept - Preschool Special Education (2690)

Cumulative Expenditures thru July 2015



Cumulative Revenues thru July 2015

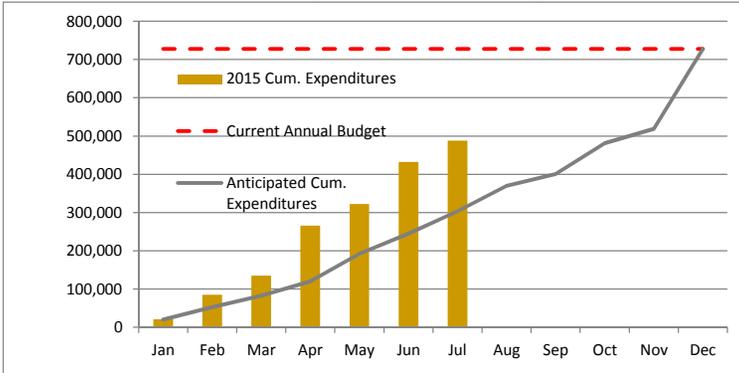


The "Anticipated Cum." line in each graph is derived by calculating the ratio of the average of the prior two years actuals for any given month to the total average actual for those two years and then applying that ratio to the current year's budget.

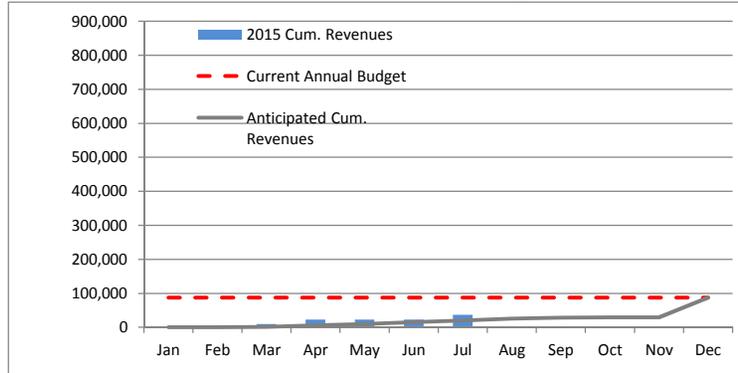
Notes: Expenditures are running high due to number of children in tuition based programs and number of related services ordered in home based programs, as well increased acuity level of the children qualifying. This program is being monitored monthly by staff.

Health Dept - Planning & Coordination (4010)

Cumulative Expenditures thru July 2015



Cumulative Revenues thru July 2015



Data Lapse:
30 days

Appropriations

- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

Revenues

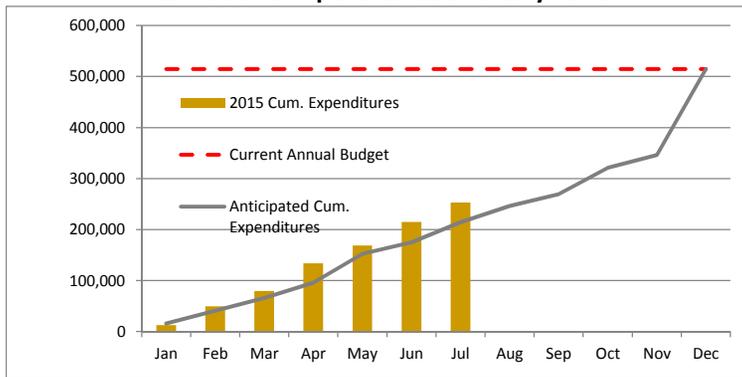
- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

The "Anticipated Cum." line in each graph is derived by calculating the ratio of the average of the prior two years actuals for any given month to the total average actual for those two years and then applying that ratio to the current year's budget.

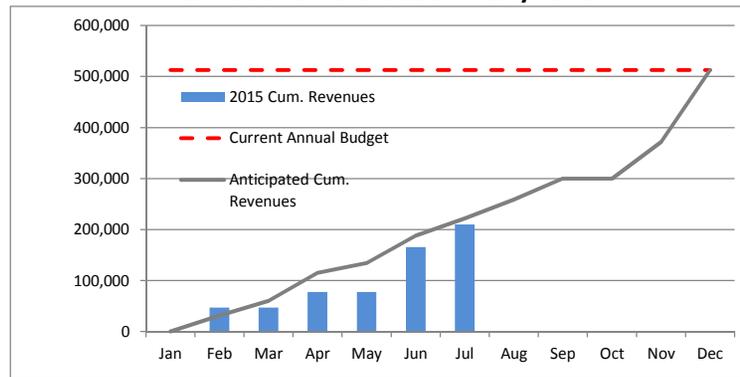
Notes: Expenditures reflected for 2015 are higher as a result of the department paying the Maintenance in Lieu of Rent in full for the year and the County posting a capital project expense in 4010 instead of the capital project account. No fringes were posted for the period thru July for 2014.

Health Dept - Women, Infants & Children (4012)

Cumulative Expenditures thru July 2015



Cumulative Revenues thru July 2015



Data Lapse:
30 days

Appropriations

- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

Revenues

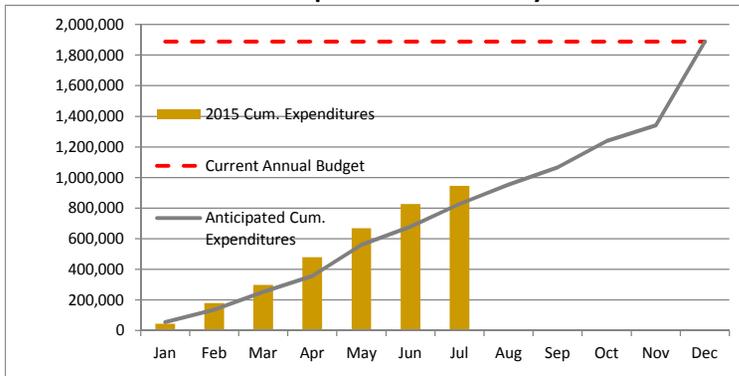
- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

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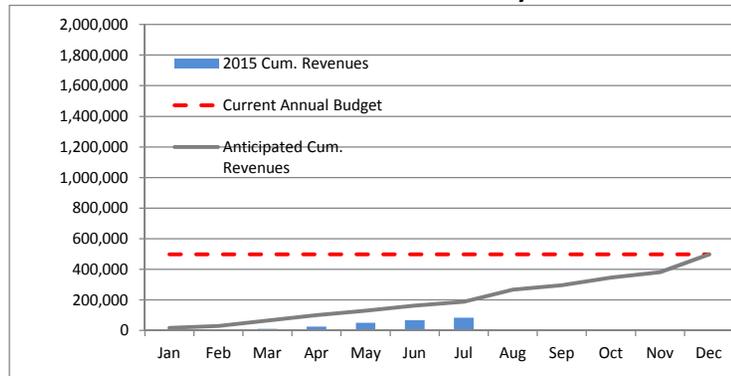
Notes: Expenditures reflected for 2015 are higher primarily due to posting of fringes to the county books (2014 did not include a fringe payment through July). The program also received special funding for a performance improvement project. in 2015. The program is 100% grant funded.

Health Dept - Division For Community Health (4016)

Cumulative Expenditures thru July 2015



Cumulative Revenues thru July 2015



Data Lapse:
30 days

Appropriations

- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

Revenues

- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

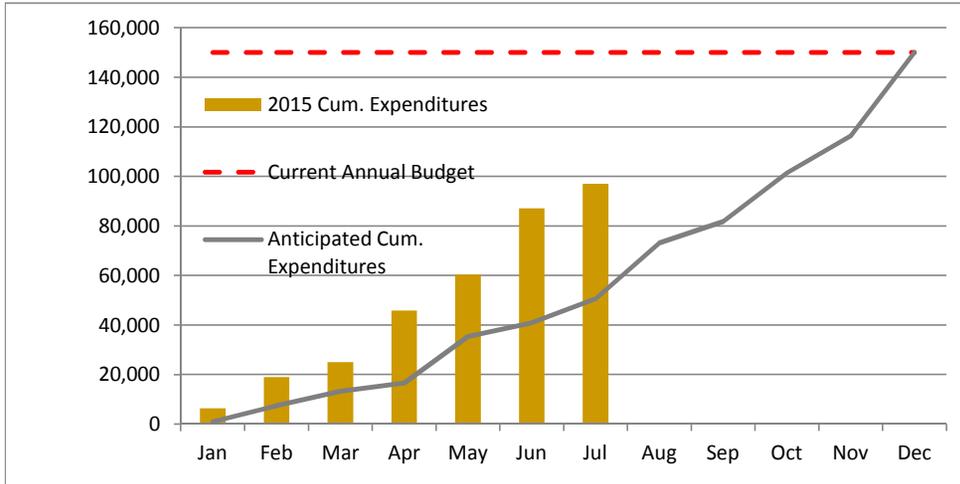
The "Anticipated Cum." line in each graph is derived by calculating the ratio of the average of the prior two years actuals for any given month to the total average actual for those two years and then applying that ratio to the current year's budget.

Notes: Expenditures reflected for 2015 are higher as a result of the department paying the Maintenance in Lieu of Rent in full for the year. No fringes were posted for the period thru July for 2014, fringes in 2015 are being posted on a monthly basis.

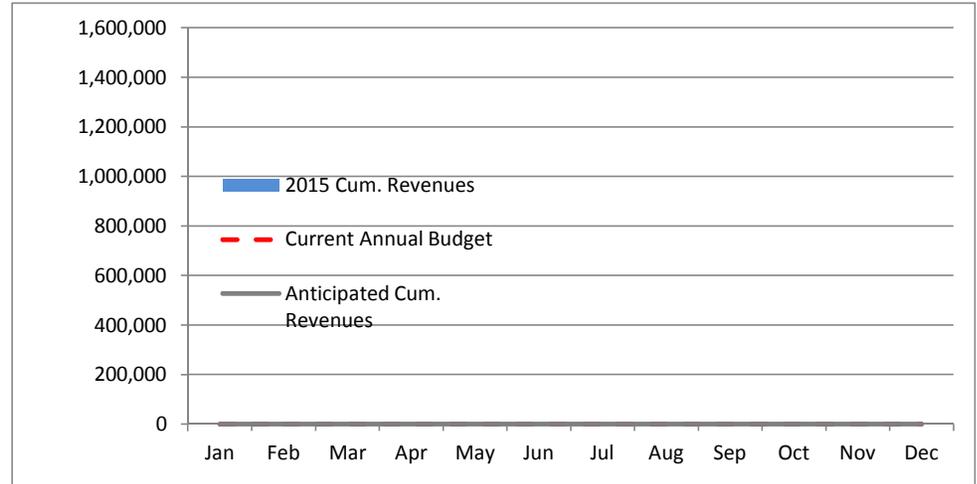
Licensed Home Care Services Agencies (LHCSA) are not permitted to bill Medicaid for home visits. The Department has a contract in place to complete billing with VNS, the prior two years accounted for billing done in house. Revenues in 2014 and 2015 are lower due to timely processing of flu billing and LHCSA billing now processed through VNS. The department has processed a significant number of bills in the past month and are currently awaiting either payment or denial. Billing procedures are currently being drafted.

Health Dept - Medical Examiner Program (4017)

Cumulative Expenditures thru July 2015



Cumulative Revenues thru July 2015

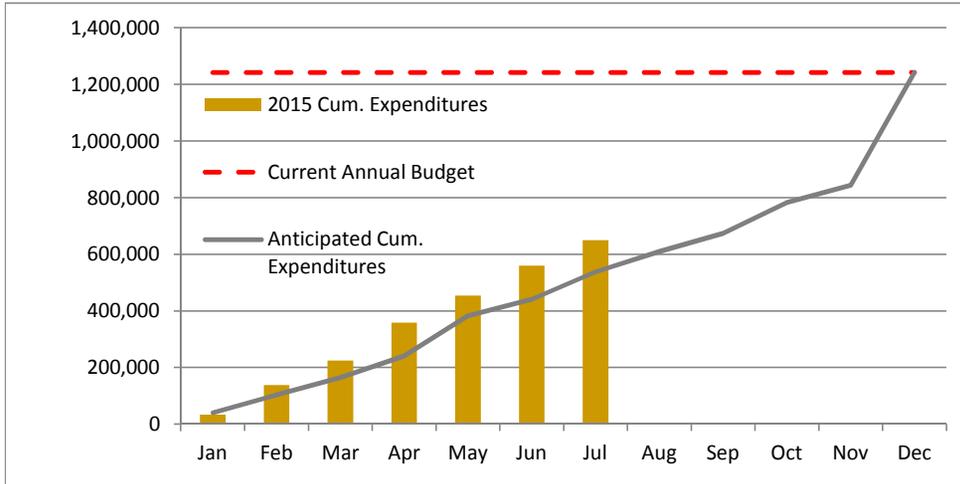


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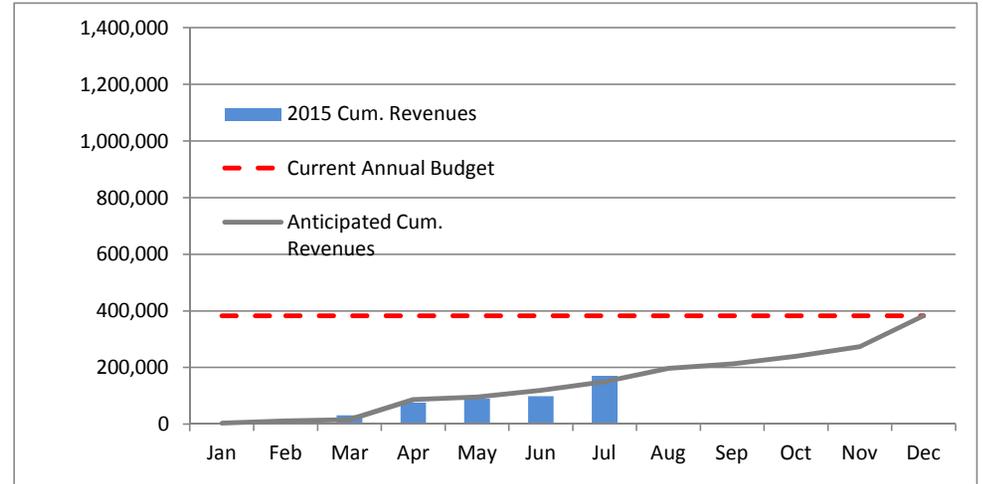
Notes: The number of cases with expenses responded to thru July 2015 (29 autopsies/5 case reviews) are higher than the prior two years (16-22, 2-4 case reviews). Expenses are often delayed pending final autopsy report. Removals are also increasing (91 in 2015, 63 in 2013 and 47 in 2014).

Health Dept - Png. & Coord. Of C.S.N. (4047)

Cumulative Expenditures thru July 2015



Cumulative Revenues thru July 2015

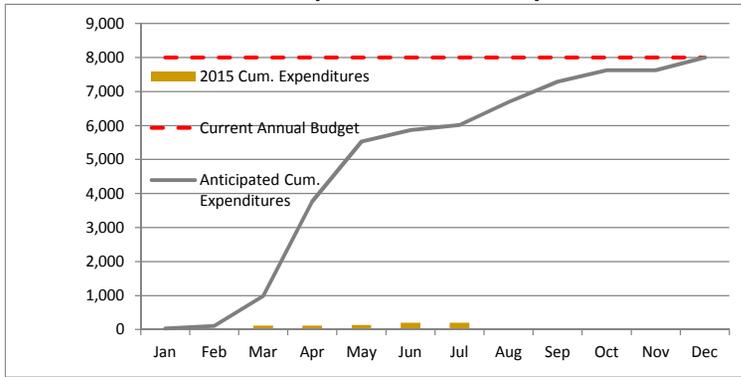


The "Anticipated Cum." line in each graph is derived by calculating the ratio of the average of the prior two years actuals for any given month to the total average actual for those two years and then applying that ratio to the current year's budget.

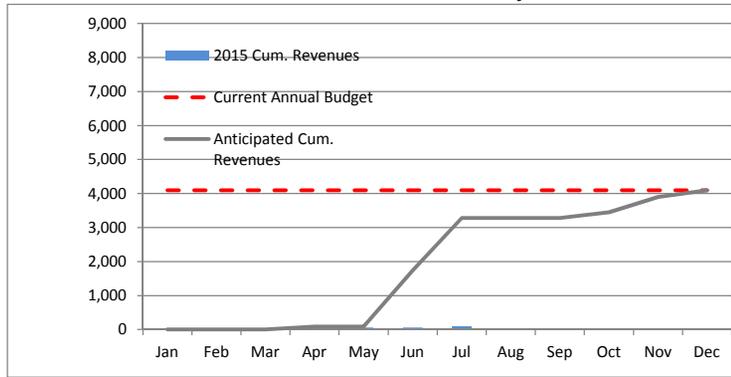
Notes: Expenditures reflected for 2015 are higher as a result of the department paying the Maintenance in Lieu of Rent in full for the year and the Department paying the Maintenance in Lieu of Rent out for the full year. In addition the program is fully staffed. No fringes were posted for the period thru July for 2014, 2015 fringes are current.

Health Dept - Phys.Handic.Chil.Treatment (4048)

Cumulative Expenditures thru July 2015



Cumulative Revenues thru July 2015



Data Lapse:
30 days

Appropriations

- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

Revenues

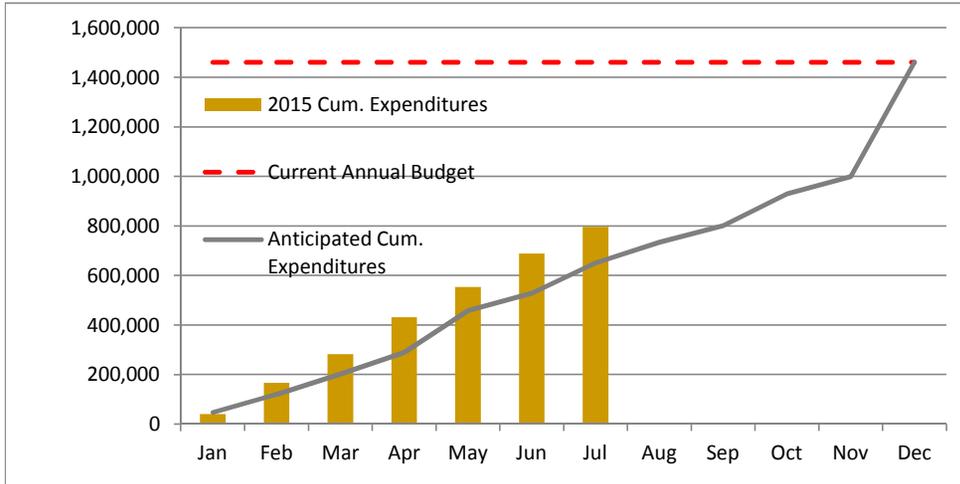
- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

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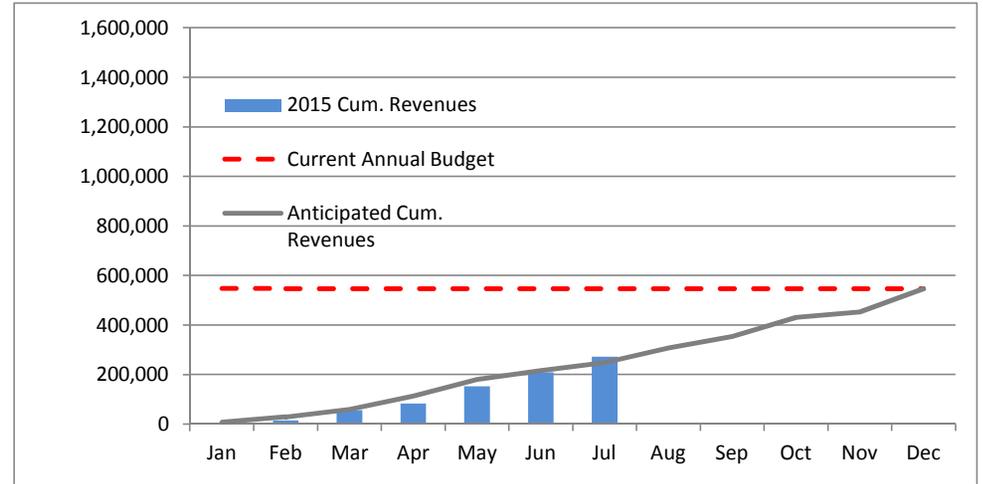
Notes: Claims for this program are done quarterly. Services rendered are based on needs from eligible families.

Health Dept - Environmental Health (4090)

Cumulative Expenditures thru July 2015



Cumulative Revenues thru July 2015



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Notes : Expenditures reflected for 2015 are higher as a result of the department paying the Maintenance in Lieu of Rent in full for the year and the Department paying the Maintenance in Lieu of Rent out for the full year.

Medical Director's Report
Board of Health
August 2015

Ayurvedic Medications

Ayurvedic healthcare treatment is an alternative form of treatment having its origin in India's healthcare systems going back at least 3000 years. Alternative remedies often involve supplements which are used by believers in this treatment system. The New York State Department of Health reports that recent testing of over the counter ayurvedic products in New York City demonstrated elevated levels of arsenic, lead and mercury. The elevated levels were as high as 27,000 times the permissible limit. These heavy metals can cause serious poisoning of the body if used. The public is urged to use caution in the use of any over the counter supplement, nutritional agent, or treatment product and to avoid these identified products in particular.

Measles

From New York City comes a report of 4 cases of measles in the month of July. All cases were imported. The cases came from the countries of China, Djibouti and Europe. One arose in an individual, who had previously received measles vaccine, but in the other cases either the individual was not vaccinated or they were infants too young for vaccination. A delay in reporting the cases helped contribute to the exposure of hundreds more individuals who were near the index cases on the airline flights, in airport terminals or came into contact in the general community. Complications in the individuals diagnosed with measles included pneumonia and hepatitis (there have been no deaths so far).

Comment: These cases continue to remind us that measles is alive and well and that continued immunization of our population is both sensible and needed. As long as measles exists on the planet we will have cases come to our country.

West Nile Virus and Equine Encephalitis - An Update on Activity in New York State for this Summer

Fortunately, no human cases of West Nile virus or eastern equine encephalitis have been reported in New York State. However, there has been detection of West Nile virus in mosquito pools in 8 New York State counties and 4 boroughs of New York City as of August 4. Eastern equine encephalitis has been detected in mosquito pools in Onondaga, Oswego and Madison counties. Chikungunya, dengue fever and malaria have been reported in travelers going to areas where these diseases are epidemic or endemic. Most notably the Caribbean is a problematic

area. On my recent travel I noticed posted warnings for travelers at customs with regard to symptoms of these diseases and warning travelers to report any symptoms that may arise after travel. These originated with the CDC and the State Health Department. There were warnings about Ebola as well.

Preventing mosquito bites is the most effective strategy within New York State and when traveling to prevent these viral diseases and malaria. Avoiding areas of high populations of mosquitoes, using mosquito repellent and avoiding dawn and dusk (when mosquitoes are most active) are primary recommendations.

Health Promotion Program

Theresa Lyczko, Director

Tobacco Control Program – Ted Schiele, Evaluator/Planner

- Statewide media workgroup, RFP for agency that will handle statewide media campaign for Point of Sale initiative over the next 4 years.
 - Read and evaluated applications. (Total 9 readers/ evaluators on the committee.)
 - Created a Survey Monkey instrument for RFP readers to log scores and comments, then compiled scores and distributed to readers for conference call, July23 during which 10 applicants were evaluated and 3 were selected for in-person presentations in Albany, August 13.
- Planning for Cornell's BEAR Walk a tabling event, College Ave., September 1.
- Met with, a MS student in Health Education at SUNY Cortland. Exploring the implementation of a smoke-free housing survey with tenants at West Village or other low income housing as an MS project, July 29
- Meeting of contractors in south central area including Cortland, Broome, Chemung County Health Departments. These are now the only health departments left with a state tobacco control contract covering 8 counties. (Tompkins is part of the Cortland contract.) Meeting held in Owego, July30
- Statewide tobacco program Technical Assistance (TA) conference call, July7

TCHD Participation and Support

- Collaborated with CHS staff and student intern to produce educational power point on Lyme Disease, Theresa Lyczko
- Lead Poisoning and Prevention Network meeting, July 16. Ted Schiele
- Attended staff satisfaction task force meeting, July 20 and worked with Human Services Coalition staff (Creating Healthy Places (CHP) grant) to purchase health themed art work for Brazo Room. Susan Dunlop.
- Media: Responded to inquiry on West Nile Virus incidence in the County. Theresa Lyczko

Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)

- Population Health Improvement Program (PHIP) meeting with Human Services Coalition Staff (HSC), July 20. Follow-up with CHA/CHIP survey results and other related information. Ted Schiele, Theresa Lyczko

Web site postings

- BOH packet & reports
- Hydrilla page for 2015 & first posting of monitoring stats
- EH Annual Report posted
- Background prep for EH Temporary Food Service training and test.

Community Outreach

- Creating Healthy Places (CHP) grant - Wellness Committee meetings at 3 separate worksites: July 7, 9 and TCHD Staff Satisfaction Task Force, July 21. Ted Schiele

- CHP – Tompkins County Worksite Wellness Coalition – Ted Schiele:
 - Meeting July 9: preparation before the meeting, and minutes distributed after
 - Drafted “boilerplate” description of the coalition for use in promotional materials and press releases.
 - Developed “Put Fruit to Work” name, logo, promotional description, hand-out, webpage (www.tompkinscountyny.gov/health/worksite)
- CHP -Municipal Health Insurance Consortium, Owning Your Own Health Committee meeting, July 15. Ted Schiele
- CHP grant wrap-up (ends in September) lunch meeting, July24. Discussion of accomplishments from Cooperative Extension, Friends of Stewart Park Human Services Coalition. Ted Schiele
- Facilitated the Diabetes Prevention Program (DPP) post – core sessions for 5 participants at Cornell University, July 1, 22. Susan Dunlop – Community Health Nurse
- Participated in the half-day retreat conducted by a New York Academy of Medicine contractor funded by NYSDOH. The purpose was to assess and streamline the collaboration among community partners providing the Diabetes Prevention Program. These include the Human Services Coalition, Cayuga Center for Healthy Living, YMCA and TCHD, July 8. Susan Dunlop, Theresa Lyczko
- Met with one large employer to discuss the potential of providing the DPP to their employees, July21. Susan Dunlop
- Met with Lifelong staff to discuss informational sessions this fall on asthma and COPD for their members, July 28. Susan Dunlop
- Met with Mental Health Department day treatment staff to discuss diabetes prevention and management for clients in the day treatment program, July 30. Susan Dunlop

Meetings, Trainings, Announcements

- Community Coalition for Healthy Youth board meeting, July 13. Ted Schiele
- Webinar: American Journal of Health Promotion: “Time for a new value proposition.” Worksite Wellness. Ted Schiele
- **Tompkins County Health Department has achieved full Centers for Disease Control and Prevention (CDC) as a provider of the Diabetes Prevention Program.** The Health Promotion Program delivers the program. Full recognition means that the organization met all of the standards required for recognition. (See attached summary). The designation is noted on the CDC website: www.cdc.gov/diabetes/prevention/recognition/index.htm

***CDC Diabetes Prevention Recognition Program (DPRP)
24-Month Recognition Evaluation***

100% were eligible for the lifestyle intervention based on either a blood-based test indicating pre-diabetes or a history of GDM. **(Met)**

Summary and Recommendations

At the 24 month reporting interval, CDC makes an initial determination regarding organization recognition status. The DPRP Standards and Operating Procedures state that organizations must meet all of the recognition standards in order to be awarded Full Recognition. Tompkins County Health Department met all requirements.

We are delighted to award CDC Full Recognition to Tompkins County Health Department. This is a remarkable achievement of which you should be very proud. This designation will be noted on the national registry website.

Data from Tompkins County Health Department show that participants were involved in the program an average of 256 days from the first session to the last session, and the average number of sessions attended by participants who attended four or more sessions over 12 months was 18 sessions.

A preliminary review of data from your year 2 participants (individuals that will be analyzed at 36 months) indicates the following: average session attendance in months 1-6 among eligible participants who attended 4 or more sessions was 18 sessions; average percent weight loss was 10.1% (impressive!); and program eligibility by blood test or history of GDM was 89%.

Analyses of Year 2 data for months 1-12 for eligible participants who had been in the program for at least 300 days and attended 4 or more sessions indicate physical activity minutes were documented in 79% of sessions; weight was documented in 100% of sessions; average session attendance was 5.3 sessions; and average percent weight loss was 8.9% (also impressive!).

Over the next 12 months, we recommend that you continue to monitor and evaluate participants' data in order to modify program implementation as needed. Please refer to Appendix F: Example of Using Data for Evaluation of the *DPRP Standards and Operating Procedures* as a guide to calculating your data.

Fully recognized organizations will continue to submit evaluation data every 12 months. Your organization will be re-evaluated at 36 months based on the 2015 Standards only using data from participants who attended their first session during year 2.

In addition, please also be aware of and hopefully get involved in our national campaign, Prevent Diabetes STAT: <http://www.cdc.gov/media/releases/2015/p0311-diabetes-STAT.html>.

Again, congratulations on this achievement. We thank you for your work and your contributions to the prevention of type 2 diabetes. Should you have any questions or concerns, please do not hesitate to contact us at DPRPASK@cdc.gov.

Thank you,
The CDC DPRP

Division for Community Health
August 25, 2015 Board of Health Meeting

Karen Bishop, Director of Community Health
August 2015 Report

Agenda – none

Administration –

- Core Solutions Software Implementation
 - The TCHD/Information Technology Services/Core Solutions Software Team led by Sigrid Connors, Director of Patient Services/Core Solution Project Lead met 3-5 times per week to customize forms, reports, work flow and system configuration.
 - Participated on weekly status conference calls with Core Solutions staff.
 - Core Solutions Software Team on site August 4 & 5 to review work flow.
 - Project Assistant Deidre DeMatteo provided a demonstration of Core Solutions Software to the Community Health Services staff at their August 5 staff meeting.
- Met weekly with Melissa Gatch, Supervising Community Health Nurse, Lori Sibley, Senior Community Health Nurse and Suzi Munoz, Administrative Coordinator to review their respective workloads, to provide direction in setting priorities and to support them and their staff.
- Suzi Munoz, Administrative Coordinator last day was August 10. In her short time period here Suzi was instrumental in bringing outstanding CHS claims up to date, improving CHS billing processes and participating in billing configuration in Core Solutions. Her replacement, Jeffrey Saeli, starts on August 17.
- Unable to fill vacant Community Health Nurse position in CHS to date.
- Met weekly with Cathy Sinnott, WIC Director to review program needs, staffing and budget.
- Met with Melissa Gatch, Supervising Community Health Nurse to develop influenza vaccination plan and clinic schedule for the fall.
- Provided update to local medical providers regarding the Legionellosis outbreak in the Bronx, local incidence of Legionellosis (one case in July, recovered, no link to known cases in Cortland County or Bronx, no source identified), typical local incidence of 0-1 case per year and links to pertinent clinician guidance documents.
- Division statistical reports – see attached reports. Note preliminary Clinic Stats for WIC for July.
- CD stat reports include both monthly and year to date (not annual).

- **WIC Program** – Our WIC program was successful in its application for another five year grant cycle. However, in order to meet the programmatic needs within the financial constraints of the new grant, the WIC Nutrition Educator position held by Shawn Davis was eliminated effective August 24th. Andrea Smith, WIC Nutrition Educator II resigned her full-time position effective 7/31/15. Christie Landon, WIC Nutrition Educator II moved from part-time to the vacated full-time position effective 8/31/15.
WIC Program caseload goal is to serve 1600 participants with a no show rate of 15% or less. In June, there were 1566 participants enrolled with a no show rate of 16.2%. The no show rate from January to

June 2015 has ranged from 13.3% to 16.2%. The “WIC Strong” website is up and people can apply to be on the WIC program online. We received 4 applications from the website in July. “WIC Strong” commercials have been running on multiple TV channels along with radio PSA’s promoting WIC.

July 2015 BOH Report Community Health Services

By Melissa Gatch, Supervising Community Health Nurse

CHS staffing- We continue to have a vacant Community Health Nurse (CHN) position in CHS. Unfortunately, the candidate that accepted the position in July later declined for personal reasons.

Mentoring- Ivanna Bihun, a senior Biology major at Cornell University has been interning in CHS this summer. She has been working with communicable disease staff to develop a power point presentation on Lyme disease, as well as updating general communicable disease resources. The Lyme presentation was provided to CHS staff at our monthly team meeting, will be posted on the Health Department web site, shown on the health department lobby TV and will be used for community presentations as appropriate.

Continuing Education-

- Community Health Nurse Nanette Scogin attended the Alliance Counties Public Health Conference on July 30 in Syracuse, New York.
- CHS nursing staff participated in a mandatory weekly webinar series on summaries of the relevant sections of the 13th edition of “Epidemiology and Prevention of Vaccine-Preventable Diseases” (The Pink Book). Each webinar in the series (15 in total) lasts approximately 1 hour and is a required deliverable in the Immunization Action Plan (IAP) workplan.

Communicable Disease (CD)- See attached statistical report.

- **Salmonella Typhi Case:** 19 year old college student with a travel history to India presented to the ER shortly after return to the US with complaints of high fever (104), diarrhea, chills, abdominal pain, sweats, nausea, fatigue and low back pain. Case also experienced thrombocytopenia, liver enzyme abnormality and leukopenia. After a 10-day stay in the hospital, case was discharged home. Educational material was mailed and precautions were reviewed over the telephone. Case will follow-up with stool specimens x 3.
- **Legionella Case:** 51 year old who presented to the ER with noted confusion, body aches, severe headache and no travel history. Differential diagnosis included pneumonia. Work-up included chest x-ray, CT scan of the brain, labs, urine for culture and for Legionella antigen. Obtaining a history from patient was difficult as his respiratory status became compromised to the point where he required intubation. After a 15-day stay in the hospital, he was discharged to home. Educational material was provided upon discharge. Source of infection is unknown.
- **Lyme Disease:** Confirmed case of Lyme Disease are slightly higher in Tompkins County this year compared to the same time last year. Communicable Disease staff continued to provide education on Lyme disease to residents who call our office daily with questions and concerns.

Tuberculosis (TB): One Active TB Disease:

Active TB Disease: Our current active case is continuing his TB treatment while in California for a 3-month internship. Thus far, he continues to tolerate treatment and is doing well. We anticipate his return the third weekend of August and the health department will resume Direct Observed Therapy (DOT) visits with him at that time.

Latent TB Infection (LTBI): There were **15** Tuberculin Screening Tests (TST) placed during the month of July; there were no positive results.

N.Y.S. Department of Health
 Division of Epidemiology
 Communicable Disease Monthly Report*, DATE: 03AUG15
 Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS Month=July

Disease	2015		2014		2013		2012		Ave (2012- 2014)	
	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate
AMEBIASIS	0	0.0	1	11.6	0	0.0	0	0.0	0	0.0
CAMPYLOBACTERIOSIS **	1	11.6	4	46.3	0	0.0	2	23.2	2	23.2
CRYPTOSPORIDIOSIS**	0	0.0	0	0.0	0	0.0	1	11.6	0	0.0
E.COLI 0157:H7	1	11.6	0	0.0	0	0.0	0	0.0	0	0.0
EHEC, SEROGROUP NON-O157	0	0.0	1	11.6	2	23.2	0	0.0	1	11.6
EHRlichiosis (CHAFEENSIS)**	0	0.0	1	11.6	0	0.0	0	0.0	0	0.0
EHRlichiosis (UNDETERMINED)**	1	11.6	0	0.0	0	0.0	0	0.0	0	0.0
GIARDIASIS	0	0.0	5	57.9	2	23.2	2	23.2	3	34.7
HEPATITIS B,CHRONIC	1	11.6	0	0.0	1	11.6	0	0.0	0	0.0
HEPATITIS C,CHRONIC	10	115. 8	8	92.6	1	11.6	8	92.6	6	69.5
INFLUENZA B, LAB CONFIRMED	0	0.0	0	0.0	1	11.6	1	11.6	1	11.6
LEGIONELLOSIS	1	11.6	0	0.0	1	11.6	0	0.0	0	0.0
LISTERIOSIS	0	0.0	0	0.0	1	11.6	0	0.0	0	0.0
LYME DISEASE** *****	15	173. 7	7	81.1	11	127. 4	1	11.6	6	69.5
MENINGITIS, ASEPTIC	0	0.0	0	0.0	1	11.6	0	0.0	0	0.0
PERTUSSIS**	0	0.0	1	11.6	2	23.2	2	23.2	2	23.2

Disease	2015		2014		2013		2012		Ave (2012- 2014)	
	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate
SALMONELLOSIS	0	0.0	0	0.0	6	69.5	3	34.7	3	34.7
SHIGELLOSIS	1	11.6	0	0.0	0	0.0	2	23.2	1	11.6
STREP, GROUP B INVASIVE	0	0.0	2	23.2	0	0.0	0	0.0	1	11.6
TUBERCULOSIS***	0	0.0	1	11.6	0	0.0	1	11.6	1	11.6
TYPHOID FEVER	1	11.6	0	0.0	0	0.0	0	0.0	0	0.0
WESTNILE VIRUS**	0	0.0	1	11.6	0	0.0	0	0.0	0	0.0
YERSINIOSIS	0	0.0	1	11.6	0	0.0	0	0.0	0	0.0
SYPHILIS TOTAL.....	1	11.6	1	11.6	0	0.0	2	23.2	1	11.6
- LATE LATENT	1	11.6	1	11.6	0	0.0	0	0.0	0	0.0
- P&S SYPHILIS	0	0.0	0	0.0	0	0.0	1	11.6	0	0.0
- EARLY LATENT	0	0.0	0	0.0	0	0.0	1	11.6	0	0.0
GONORRHEA TOTAL.....	1	11.6	4	46.3	0	0.0	3	34.7	2	23.2
- GONORRHEA	1	11.6	4	46.3	0	0.0	3	34.7	2	23.2
CHLAMYDIA	27	312. 7	25	289. 5	19	220. 0	22	254. 8	22	254. 8

*Based on month case created, or December for cases created in Jan/Feb of following year

**Confirmed and Probable cases counted; Campylobacter confirmed and suspect

***Not official number

**** From 2012-2015, 18 counties investigated a sample of positive laboratory results.

N.Y.S. Department of Health
 Division of Epidemiology
 Communicable Disease Monthly Report*, DATE: 03AUG15
 Through July
 Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS

Disease	2015		2014		2013		2012		Ave (2012- 2014)	
	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate
AMEBIASIS	0	0.0	1	1.7	1	1.7	0	0.0	1	1.7
ANAPLASMOSIS**	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
BABESIOSIS**	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0
CAMPYLOBACTERIOSIS**	11	18.2	16	26.5	9	14.9	13	21.5	13	21.5
CRYPTOSPORIDIOSIS**	2	3.3	7	11.6	7	11.6	4	6.6	6	9.9
E.COLI 0157:H7	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0
EHEC, SEROGROUP NON- O157	5	8.3	2	3.3	3	5.0	0	0.0	2	3.3
EHRlichiosis (CHAFEENSIS)**	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
EHRlichiosis (UNDETERMINED)**	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0
ENCEPHALITIS, OTHER	0	0.0	0	0.0	1	1.7	1	1.7	1	1.7
GIARDIASIS	4	6.6	12	19.9	4	6.6	12	19.9	9	14.9
HAEMOPHILUS INFLUENZAE, NOT TYPE B	2	3.3	0	0.0	0	0.0	1	1.7	0	0.0
HEPATITIS A	0	0.0	1	1.7	0	0.0	1	1.7	1	1.7
HEPATITIS B,CHRONIC	4	6.6	2	3.3	2	3.3	5	8.3	3	5.0
HEPATITIS C,ACUTE	1	1.7	3	5.0	0	0.0	3	5.0	2	3.3
HEPATITIS C,CHRONIC	59	97.6	58	96.0	40	66.2	42	69.5	47	77.8

Disease	2015		2014		2013		2012		Ave (2012- 2014)	
	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate
HERPES INF, INFANT =< 60 DAYS	0	0.0	0	0.0	0	0.0	3	5.0	1	1.7
INFLUENZA A, LAB CONFIRMED	288	476. 5	169	279. 6	88	145. 6	49	81.1	102	168. 8
INFLUENZA B, LAB CONFIRMED	67	110. 8	27	44.7	66	109. 2	8	13.2	34	56.3
INFLUENZA UNSPECIFIED, LAB CONFIRMED	0	0.0	0	0.0	1	1.7	0	0.0	0	0.0
LEGIONELLOSIS	1	1.7	1	1.7	1	1.7	1	1.7	1	1.7
LISTERIOSIS	0	0.0	0	0.0	1	1.7	1	1.7	1	1.7
LYME DISEASE** ****	24	39.7	15	24.8	24	39.7	12	19.9	17	28.1
MALARIA	1	1.7	0	0.0	1	1.7	0	0.0	0	0.0
MENINGITIS, ASEPTIC	0	0.0	0	0.0	1	1.7	1	1.7	1	1.7
PERTUSSIS**	1	1.7	2	3.3	5	8.3	61	100. 9	23	38.1
SALMONELLOSIS	7	11.6	4	6.6	13	21.5	10	16.5	9	14.9
SHIGELLOSIS	1	1.7	1	1.7	1	1.7	2	3.3	1	1.7
STREP, GROUP A INVASIVE	2	3.3	2	3.3	0	0.0	4	6.6	2	3.3
STREP, GROUP B INVASIVE	4	6.6	8	13.2	2	3.3	2	3.3	4	6.6
STREP, GROUP B INV, EARLY/LATE ONSET	0	0.0	1	1.7	1	1.7	1	1.7	1	1.7
STREP PNEUMONIAE, INVASIVE	2	3.3	3	5.0	6	9.9	0	0.0	3	5.0
TUBERCULOSIS***	1	1.7	3	5.0	1	1.7	3	5.0	2	3.3
TYPHOID FEVER	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0

Disease	2015		2014		2013		2012		Ave (2012- 2014)	
	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate	Fre q	Rate
VIBRIO - NON 01 CHOLERA	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0
WESTNILE VIRUS**	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
YERSINIOSIS	0	0.0	2	3.3	1	1.7	0	0.0	1	1.7
SYPHILIS TOTAL.....	3	5.0	5	8.3	1	1.7	3	5.0	3	5.0
- LATE LATENT	1	1.7	1	1.7	1	1.7	0	0.0	1	1.7
- P&S SYPHILIS	2	3.3	4	6.6	0	0.0	2	3.3	2	3.3
- EARLY LATENT	0	0.0	0	0.0	0	0.0	1	1.7	0	0.0
GONORRHEA TOTAL.....	38	62.9	17	28.1	17	28.1	17	28.1	17	28.1
- GONORRHEA	38	62.9	17	28.1	17	28.1	16	26.5	17	28.1
- GONORRHEA,DISSEMINA TED	0	0.0	0	0.0	0	0.0	1	1.7	0	0.0
CHLAMYDIA	201	332. 5	162	268. 0	150	248. 2	178	294. 5	163	269. 7

*Based on month case created, or December for cases created in Jan/Feb of following year

**Confirmed and Probable cases counted; Campylobacter confirmed and suspect

***Not official number

**** From 2012-2015,18 counties investigated a sample of positive laboratory results.

Division for Community Health
PROGRAM Statistical Highlights for Board of Health - 2015

Community Health Services Maternal Child - MOMS Services	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	YTD 2015	Total 2014	Total 2013
Client Caseload	186	219	245	274	296	319	347						1886	519	513
# of Client Admissions	33	26	29	22	23	28	27						188	321	354
# of Client Discharges	32	33	39	28	28	18	29						207	357	351
Maternal & Infant Clinic Visit	34	21	26	27	31	18	18						175	355	382
Maternal & Infant Home Visit	73	63	74	73	66	75	97						521	758	980
Total Home & Clinic Visits	107	84	100	100	97	93	115						696	1113	1362
On Call Visits															
Maternal & Infant On Call Visits	0	0	0	0	0	0	0						0	0	5
Rabies On Call Vaccinations	2	0	0	0	4	2	1						9	37	30
TB DOT On Call Visits	0	0	0	4	0	0	0						4	11	3
Total # On-Call Visits	2	0	0	4	4	2	1						13	48	38
Total # Home, Clinic, On-Call Visits	109	84	100	104	101	95	116						709	1161	1400
Childbirth Education															
# of Childbirth Education Classes	1	2	1	0	3	0	0						7	16	15
# of Childbirth Education Moms*	10	5	4	0	6	0	0						25	54	49

Community Health Services Public Telephone Contact Log	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Total 2015	Total 2014	Total 2013
Communicable Disease (including STD, HIV, Rabies and TB)	59	132	135	112	306	147	147						1038	593	1934
Immunization Appointments	45	78	90	89	113	81	81						577	381	1853
Maternal Child/Family/MOMS	251	437	302	218	142	164	203						1717	1729	3520
Miscellaneous	25	56	56	67	54	51	72						381	249	543
Total	380	703	583	486	615	443	503	0	0	0	0	0	3713	2952	7850

* CBE = total is duplicated count
 DOT = Direct Observe Therapy Visits
 MOMS = Medicaid Obstetrical and Maternal Services
 UA = Unavailable at this time

All current statistics are considered preliminary as data is continually collected and updated.

Division for Community Health
CLINIC Statistical Highlights for Board of Health - 2015

Community Health Services	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	YTD 2015	Total 2014	Total 2013
Immunization Clinics															
# of Immunization Clients	27	13	18	25	20	54	36						193	319	272
# of Immunizations Administered	43	24	24	45	33	69	51						289	534	434
Children 0 - 19 yrs.	34	14	15	34	17	36	30						180	423	321
Adults 20 yrs. & over	8	10	9	11	16	33	21						108	111	113
# of Influenza Immunizations	7	4	1	2	0	0	0						14	917	971
Rabies Vaccination Program															
Post-Exposure Clients	5	8	4	2	7	16	4						46	106	91
Post-Exposure Clinic Vaccinations	8	9	4	2	13	44	8						88	267	210
Tuberculosis Program															
Cumulative TB clients	3	3	3	4	4	4	4						25	4	3
Active TB Admissions	0	0	0	1	0	0	0						1	4	1
Active TB Discharges	1	0	2	0	0	0	0						3	2	3
TB Direct Observe Therapy Home Visits	75	54	56	29	15	0	0						229	269	251
# of Tuberculosis Screening Tests*	6	10	9	6	17	37	15						100	421	532
Anonymous HIV Counseling & Testing Clinics															
# of HIV Clinics - including Walk-Ins	10	10	10	7	9	14	3						63	99	71
# of Clients Counseled & Tested	7	11	14	6	9	8	3						58	96	84
HIV Positive Eliza & Western Bloc	0	0	0	0	0	0	0						0	0	0
WIC	Jan	Feb	Mar	April	May	June	*** July	Aug	Sept	Oct	Nov	Dec	YTD 2015	Total 2014	Total 2013
Newly Enrolled**	66	51	64	49	64	46	53						393	430	UA
Total Participants Served	560	504	547	516	493	555	545						3720	4889	UA
Participants w/Active Cks - Total=Avrg**	1331	1333	1373	1331	1338	1325	1341						9372	1386	1507
Total Enrolled - Total=Average**	1557	1547	1585	1561	1562	1562	1557						10931	1689	1797
No-Show Rate (%) - Total=Average	14.5%	13.8%	13.4%	14.7%	14.3%	15.2%	13.9%						14.1%	18.3%	15.3%
% Active Participation - Total=Average	66.6%	66.7%	68.7%	66.6%	66.9%	66.8%	67.1%						67.2%	69.3%	75.6%
% Caseload Target (FY15=2000)Total=Avrg	77.9%	77.4%	79.3%	78.1%	78.1%	78.1%	77.9%						78.2%	84.4%	UA

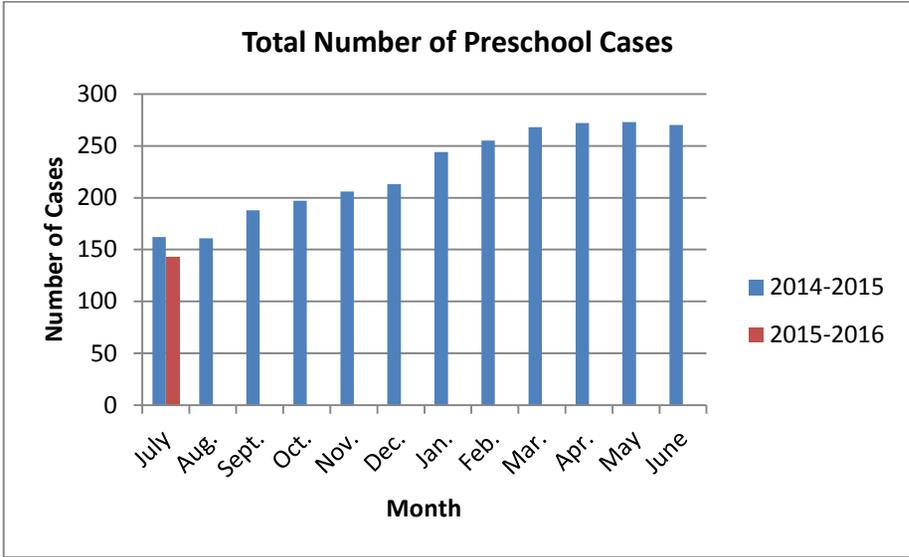
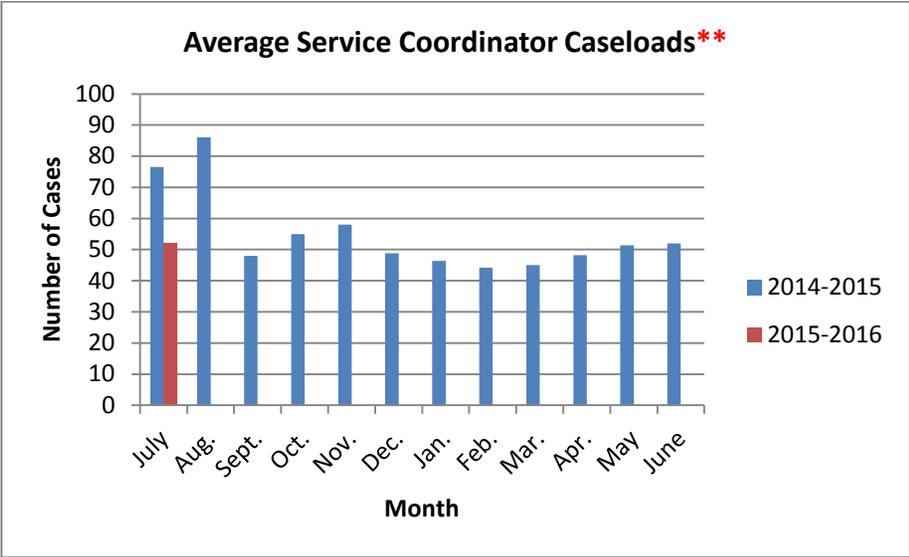
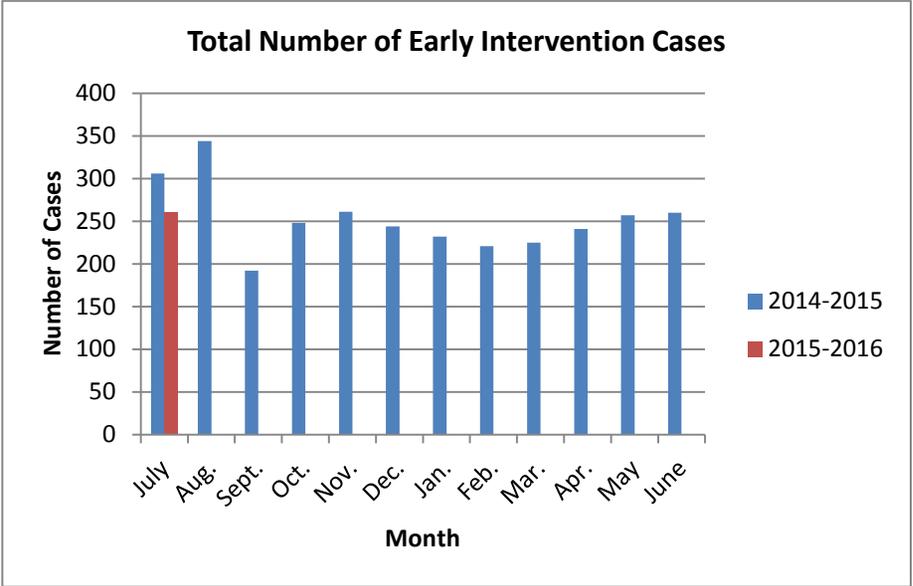
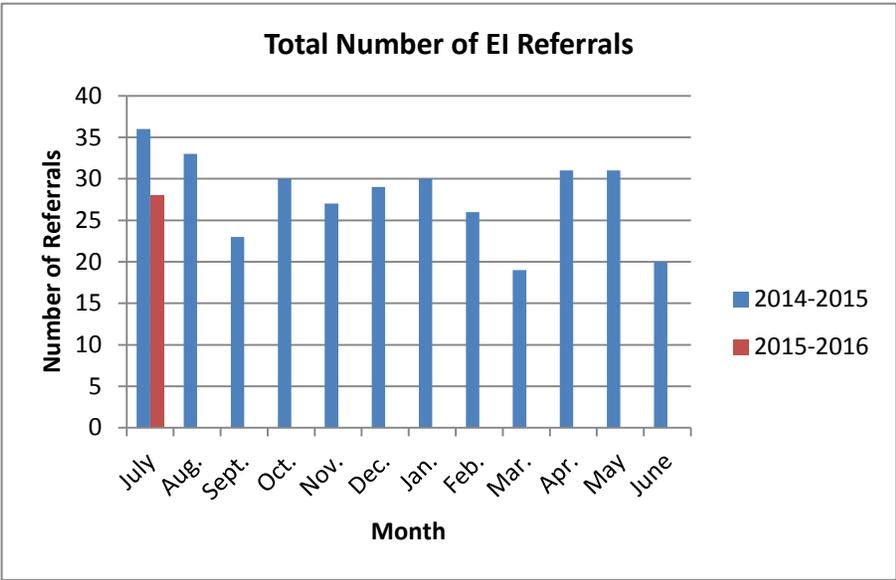
UA = Unavailable at this Time

*Tuberculin Screening Tests - formerly described as PPD's (Purified Protein Derivative)

**New in March 2014, Information taken from the WICSIS CM015T Final Report; YTD represents the average number

***Preliminary numbers

Statistics Based on Program School Year



****Beginning December 2014, the number of full-time Service Coordinators increased from 4 to 5.**

**Children with Special Care Needs Division
Statistical Highlights 2015**

EARLY INTERVENTION PROGRAM

Number of Program Referrals	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2015 Totals	2014 Totals
Initial Concern/reason for referral:														
-- DSS Founded Case				3	5	1	3						12	4
-- Gestational Age					1	2							3	9
-- Gestational Age & Hearing													0	1
-- Global Delays				1		1	1						3	9
-- Hearing													0	1
-- Physical														
-- Feeding	1	2	1	1	2	1	1						9	14
-- Gross Motor	7	2	4	5	4	2	5						29	73
-- Gross Motor & Feeding													0	1
-- Gross Motor & Fine Motor					1								1	2
-- Gross Motor & Social Emotional													0	1
-- Fine Motor													0	2
-- Social Emotional	4	2		2			1						9	10
-- Social Emotional & Adaptive								1					1	1
-- Speech	15	16	7	13	13	10	17						91	138
-- Speech & Adaptive													0	1
-- Speech & Cognitive				1		1							2	1
-- Speech & Feeding					1								1	8
-- Speech & Fine Motor			2			1							3	3
-- Speech & Hearing													0	1
-- Speech & Gross Motor	1	1	3	2	1								8	19
-- Speech & Sensory				2										
-- Speech & Social Emotional	1	1	1	1	2								6	15
-- Adaptive													0	0
-- Adaptive/Feeding													0	2
-- Adaptive/Sensory	1												1	1
-- Vision													0	1
-- Qualifying Congenital / Medical Diagnosis		1	1		1								3	3
-- Child Find (At Risk)		1											1	14
Total Number of Early Intervention Referrals	30	26	19	31	31	20	28	0	0	0	0	0	185	340

Caseloads														
Total # of clients qualified and receiving svcs	189	193	195	210	228	230	231							
Total # of clients pending intake/qualification	43	28	30	31	29	30	29							
Total # qualified and pending	232	221	225	241	257	260	260	0	0	0	0	0		
Average # of Cases per Service Coordinator	46.4	44.2	45	48.2	51.4	52	52	0	0	0	0	0		

**Children with Special Care Needs Division
Statistical Highlights 2015**

EARLY INTERVENTION PROGRAM

Family/Client visits	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2015 Totals	2014 Totals
-- Intake visits	28	15	22	27	25	23	26						166	285
-- IFSP Meetings	49	44	54	36	56	51	40						330	545
-- Amendments	20	12	15	12	19	16	15						109	170
-- Core Evaluations	34	29	25	22	13	24	22						169	248
-- Supplemental Evaluations	0	5	10	5	6	4	7						37	50
-- DSS Visit	2	0	3	4	1	0	0						10	2
-- EIOD visits	5	8	8	10	9	2	3						45	27
-- Observation Visits	4	14	23	21	18	26	38						144	299
-- CPSE meetings	1	3	8	2	7	11	8						40	91
-- Program Visit	0	0	3	2	1	1	0						7	9
-- Family Training/Team Meetings	0	1	3	0	0	1	0						5	9
-- Transition meetings	15	16	9	5	5	6	13						69	122
-- Other Visits	0	0	5	1	0	3	5						14	25
IFSPs and Amendments														
# of Individualized Family Service Plans Completed	49	44	54	36	56	51	40						330	535
# of Amendments to IFSPs Completed	23	15	17	20	21	21	20						137	233

Services and Evaluations Pending & Completed	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2015 Totals	2014 Totals
Children with Services Pending														
-- Assistive Tech	0	0	0	0	0	0	0							
-- Audiological	0	0	0	2	0	0	0							
-- Feeding	0	0	0	0	0	0	0							
-- Group Developmental Intervention	0	0	0	0	0	0	0							
-- Nutrition	0	0	0	0	0	0	0							
-- Occupational Therapy	1	2	0	5	5	0	0							
-- Physical Therapy	0	0	0	0	2	0	0							
-- Social Work	1	2	0	1	1	1	0							
-- Special Education	1	0	0	0	0	0	1							
-- Speech Therapy	1	3	2	5	2	0	0							
# of Evaluations Pending	8	9	7	8	8	17	6	0	0	0	0	0		
Type:														
-- Diagnostic Psychological	4	5	0	2	1	2	1							
-- Developmental Pediatrician	0	0	2	1	1	1	1							
-- Other	0	0	0	0	0	0	0							
-- Supplemental Evaluations	4	4	5	5	6	14	4	0	0	0	0	0		
Type:														
-- Audiological	0	0	1	1	4	5	0							
-- Auditory Brain Response (ABR)	0	0	0	0	0	0	0							
-- Feeding	0	0	0	0	0	0	0							
-- Physical Management Clinic	0	0	0	0	0	0	0							
-- Physical Therapy	2	1	0	0	1	1	0							
-- Speech	0	2	1	0	0	3	1							
-- Occupational Therapy	1	1	3	4	1	5	3							
-- Psychological	0	0	0	0	0	0	0							
-- Vision	1	0	0	0	0	0	0							

**Children with Special Care Needs Division
Statistical Highlights 2015**

EARLY INTERVENTION PROGRAM

Services and Evaluations Pending & Completed (continued)	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2015 Totals	2014 Totals
# of Evaluations Completed	8	6	12	7	7	7	9	0	0	0	0	0	56	83
Type:														
-- Diagnostic Psychological	0	1	0	2	1	2	0						6	6
-- Developmental Pediatrician	0	0	2	0	0	0	0						2	1
-- Other	0	0	0	0	0	0	0						0	0
-- Supplemental Evaluations	8	5	10	5	6	5	9	0	0	0	0	0	48	76
Type:														
-- Audio	3	1	1	0	0	2	1						8	9
-- Feeding	1	0	1	0	1	0	1						4	2
-- Occupational Therapy	2	3	3	3	4	2	4						21	30
-- Physical Management Clinic	0	0	0	0	0	0	0						0	0
-- Physical Therapy	1	1	2	0	1	0	1						6	11
-- Psychological	0	0	0	0	0	0	0						0	0
-- Social Emotional	0	0	0	0	0	0	0						0	0
-- Speech Therapy	1	0	3	2	0	1	2						9	23
-- Vision	0	0	0	0	0	0	0						0	0
Diagnosed Conditions														
Autism Spectrum														
-- Children currently diagnosed:	4	4	5	7	8	9	10							
-- Children currently suspect:	2	11	9	10	15	15	16							
Children with 'Other' Diagnosis														
-- Agenesis Corpus Collosum	1	1	1	1	1	1	1							
-- Bells Palsy	1	1	1	1	0	0	0							
-- Bronchopulmonary Displasia (BPD)	1	2	2	3	2	2	2							
-- Cardiac Anomaly	0	1	1	1	1	0	1							
-- Cerebral Palsy (CP)	2	3	2	2	2	2	3							
-- Chromosome 8 Abnormality	0	0	0	0	1	0	1							
-- Chromosome 18Q Deletion	0	0	0	0	0	0	1							
-- Chromosome 22Q Deletion	1	1	1	1	1	1	1							
-- Cleft Lip/Palate	2	2	2	1	1	1	2							
-- Crouzon Syndrome	1	1	1	1	1	1	1							
-- Down Syndrome	1	0	1	1	1	1	2							
-- Failure to Thrive	0	0	0	0	1	1	1							
-- Feeding Difficulties	0	2	0	0	1	0	2							
-- Hydrocephalus	0	1	1	0	0	0	0							
-- Hydronephrosis	1	1	1	1	1	0	1							
-- Hypotonia	0	0	1	1	1	1	2							
-- Macrocephaly	1	1	1	1	1	1	1							
-- Macroglossia	0	0	0	1	1	1	1							
-- Meningocele	0	0	0	0	1	0	0							
-- Microcephaly	1	1	1	1	1	1	1							
-- Optic Nerve Hypoplasia	0	0	0	0	1	1	1							
-- Pierre Robin Syndrome	1	1	1	1	1	1	1							
-- Plagiocephaly	2	2	3	2	2	2	2							
-- Prematurity	8	8	8	8	9	6	14							
-- Prematurity (Micro)	3	2	4	4	2	2	3							

**Children with Special Care Needs Division
Statistical Highlights 2015**

EARLY INTERVENTION PROGRAM

Diagnosed Conditions (continued)	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2015 Totals	2014 Totals
Children with 'Other' Diagnosis (continued)														
-- Sensorineural Hearing Loss	2	1	2	3	5	3	3							
-- Torticollis	6	6	5	6	5	5	3							

Early Intervention Discharges														
-- To CPSE	10	0	1	0	0	1	4						16	79
-- Aged out	1	1	2	3	1	0	0						8	2
-- Declined	1	2	3	0	0	3	2						11	19
-- Skilled out	7	1	3	4	4	8	4						31	36
-- Moved	5	4	4	1	0	3	4						21	24
-- Not Eligible	13	13	8	2	6	7	4						53	71
-- Other	3	5	0	0	0	0	0						8	17
Total Number of Discharges	40	26	21	10	11	22	18	0	0	0	0	0	148	245

Child Find														
Total # of Referrals	2	1	2	0	0	1	0						6	19
Total # of Children in Child Find	13	15	17	17	17	17	10							
Initial Consents Sent	0	1	0	0	2	1	0						4	10
Initial Consents Resent	0	0	0	0	0	0	0						0	0
Consents Returned	0	0	0	0	1	0	0						1	3
ASQs Sent	0	10	6	3	2	3	4						28	43
ASQs Returned	0	3	3	0	2	0	5						13	42
MD Letters sent with ASQ Results													0	0
Total # Transferred to Early Intervention							0						0	5
Total # of Discharges							4						4	9

**Children with Special Care Needs Division
Statistical Highlights 2015**

PRESCHOOL SPECIAL EDUCATION PROGRAM

Clients Qualified and Receiving Services	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2015 Totals	2014 Totals
Children per School District														
-- Ithaca	135	142	147	152	151	147	84							
-- Dryden	22	21	21	20	21	22	14							
-- Lansing	21	24	27	28	28	28	8							
-- Newfield	24	25	26	26	27	27	15							
-- Groton	27	27	30	31	31	31	16							
-- Trumansburg	13	13	13	11	11	11	5							
-- Spencer VanEtten	0	0	1	1	1	1	0							
-- Newark Valley	1	1	1	1	1	1	0							
-- Odessa-Montour	0	1	1	1	1	1	1							
-- Candor	1	1	1	1	1	1	0							
-- Moravia	0	0	0	0	0	0	0							
-- Cortland	0	0	0	0	0	0	0							
Total # of Qualified and Receiving Services	244	255	268	272	273	270	143	0	0	0	0	0		

Services Provided	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals	Totals
Services Received by Discipline														
-- Speech Therapy (individual)	146	161	164	174	164	163	57							
-- Speech Therapy (group)	2	6	6	6	6	6	1							
-- Occupational Therapy (individual)	47	53	54	55	57	62	29							
-- Occupational Therapy (group)	2	3	3	3	3	3	0							
-- Physical Therapy (individual)	30	31	32	33	32	33	11							
-- Physical Therapy (group)	0	0	0	0	0	0	0							
-- Transportation														
-- Birnie Bus	24	22	25	24	24	24	18							
-- Ithaca City School District	35	35	37	37	37	35	31							
-- Parent	1	2	2	2	2	3	4							
-- Service Coordination	27	28	30	33	33	34	7							
-- Counseling	45	48	49	56	51	50	29							
-- 1:1 (Tuition Program) Aide	6	6	6	6	6	6	2							
-- Special Education Itinerate Teacher	24	27	29	28	27	25	14							
-- Parent Counseling	21	21	22	24	23	22	6							
-- Program Aide	2	3	0	3	4	5	2							
-- Teaching Assistant	3	3	3	3	3	4	3							
-- Psychological Services	0	0	0	0	0	0	0							
-- ASL Interpreter	0	0	0	0	0	0	0							
-- Audiological Services	0	0	0	0	0	0	0							
-- Teacher of the Deaf	1	1	1	1	1	1	0							
-- Auditory Verbal Therapy	0	0	0	0	0	0	0							
-- Teacher of the Visually Impaired	0	0	0	0	0	0	0							
-- Nutrition	4	4	4	4	4	4	0							
-- Assistive Technology Services	1	2	1	0	0	1	0							
-- Skilled Nursing	1	1	1	1	1	1	0							
-- Vision	1	1	1	0	0	0	0							
Total # of children rcvg. home based related svcs.	183	192	203	209	210	208	90							

**Children with Special Care Needs Division
Statistical Highlights 2015**

PRESCHOOL SPECIAL EDUCATION PROGRAM

Number of Children Served Per School District Attending Tuition Based Programs	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2015 Totals	2014 Totals
-- Ithaca	36	37	38	39	38	37	34							
-- Dryden	8	8	7	6	6	6	4							
-- Groton	1	1	6	2	2	2	3							
-- Lansing	4	5	6	5	5	5	2							
-- Newfield	6	6	2	6	7	7	7							
-- Trumansburg	6	6	6	5	5	5	3							
-- Odessa-Montour	0	0	0	0	0	0	0							
-- Spencer VanEtten	0	0	0	0	0	0	0							
-- Moravia	0	0	0	0	0	0	0							
-- # attending Franziska Racker Centers	32	34	34	31	31	31	25							
-- # attending Ithaca City School District	29	29	31	32	32	31	28							
Total # attending Special Ed Integrated Tuition Progr.	61	63	65	63	63	62	53	0	0	0	0	0		

Municipal Representation Committee on Preschool Special Education														
-- Ithaca	0	8	22	12	0	0	0						42	184
-- Dryden	0	0	11	7	0	0	0						18	64
-- Groton	0	0	0	0	0	0	0						0	20
-- Lansing	0	0	3	0	0	0	0						3	22
-- Newark Valley	0	0	0	0	0	0	0						0	1
-- Newfield	0	0	2	2	0	0	0						4	25
-- Odessa	0	0	0	0	0	0	0						0	1
--Trumansburg	0	0	1	2	0	0	0						3	10

ENVIRONMENTAL HEALTH DIVISION
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ENVIRONMENTAL HEALTH HIGHLIGHTS July 2015

Outreach and Division News

Hydrilla: Anne Wildman participated in the local and state-wide Hydrilla Task Force monthly meeting and conference call. The 2015 season herbicide treatment of the Hydrilla infestation in Cayuga Lake was initiated on July 21st with the application of low-dosage, sustained-release fluridone pellets over 30 acres of the southeast corner of the Lake. Water quality monitoring is conducted weekly in the treatment area and surroundings, as well as at the SCLIWC (Bolton Point) raw water intake. Based on plant growth observation, treatment with the contact herbicide endothall is scheduled to begin in the Cayuga Inlet and Fall Creek in the latter part of August, to be followed a few weeks later by low-dose fluridone in both locations, also accompanied by appropriate water quality monitoring.

State Aid Discussions: NYSDOH had previously contacted TCHD and requested that we resubmit our 4th quarter 2014 State Aid claim because *"Eligible claims for 'technical assistance' under Article 6 are only eligible for the Individual Water and Sewage Program (previously 40-2, now 40-2.54) but only for counties where a permit program does not exist (usually established through a local sanitary code)."* This was quite the surprise to us and potentially very costly. On July 14, Brenda Crosby, Karen Johnson, Adriel Shea, and Liz Cameron participated in a confusing conference call with a number of NYSDOH staff from OPHP, CEH and our Regional Office about state aid for technical assistance for individual sewage systems. At the end of the conversation, NYSDOH indicated that they would process our 4th quarter 2014 State Aid application with a few revisions. During the call, however, selected NYSDOH staff repeatedly stated that, if you have a permitting program, technical assistance provided to homeowners for individual sewage is not eligible for state aid and that guidance clarifying this was being prepared. On July 20, TCHD participated in a follow up call with members of the Conference of Environmental Health Directors (CEHD). CEHD has since sent a letter to NYSDOH expressing the concern with this change in the interpretation and requesting to be involved in development of the guidance documents.

Nate's Floral Estates Mobile Home Park: In June, Environmental Health learned that Nate's Floral Estates had requested an amendment to the City of Ithaca Zoning that would allow an expansion of the park. Liz Cameron attended the City Planning and Economic Development Committee meeting on July 8 and expressed our concern with future expansion due in part to the unknown conditions in the expansion area. Liz Cameron, Steve Maybee, Eric Shearer, and Skip Parr met with City staff on July 13 to discuss the oversight at the existing park. We continue to coordinate with the City, NYSDOH and NYSDEC on both the requested zoning amendment and oversight of the existing park.

Fingerlakes GrassRoots Festival: The Fingerlakes Grassroots Festival this year went off successfully from a public health perspective, fireworks and all. We are very appreciative of the efforts by Anne Wildman and the other eight EH staff that contributed significantly to the public health safety and success of the event. The event was held July 16 to 19 without significant incidents. There is one enforcement action pending for one of the temporary food vendors.

Ellis Hollow Storm Drainage Project: Tompkins County Highway Department is working on a storm drainage improvement project on Ellis Hollow Road. In the course of their ditch work, they intersected discharge pipes of an unknown origin. They contacted us due to concerns that these pipes could be on-site sewage system discharge pipes. The houses along this stretch of Ellis Hollow Road are on lots that slope toward the street with the houses constructed close to the road and the water supply well in back - leaving very little room for the sewage system. Some of the lots are less than an acre and were grandfathered under the Tompkins County Sanitary Code. In the past on difficult lots such as these, the sewage system might include a sand filter that discharged to an effluent

pipe and then to a drainage ditch. (The sand filter provides a high level of treatment, approximately 95% biological treatment.) Some of the pipes affected by the storm drainage project were these sewage discharge pipes. Steve Maybee, Eric Shearer, Adriel Shea, and Liz Cameron worked with Highway and their Project Engineer to identify potentially affected sewage pipes and handle them correctly during the storm drainage project.

Second Dam, Six Mile Creek Complaint: A death related to jumping into Six Mile Creek near the Second Dam was reported in the news. Illegal swimming in this area has been an on-going issue. The City and Town of Ithaca continue to look into effective measures to curb this problem and will involve EH in discussions and meetings.

HNP: Joan Bobier from NYSDOH performed a program review on July 14, 2015. This was the first review of Tompkins County’s HNP by NYSDOH and the program was given praise by Ms. Bobier. Kudos to Samantha Hillson, Pat Jebbett, Cyndy Howe, and Skip Parr for establishing our well-respected program!

Accela: Temporary Resident permits are now handled through Accela and the public may apply online through our website.

Personnel Changes: Unfortunately for us, the Healthy Neighborhoods Program (HNP) is losing Project Assistant Jasmine Cubero. We’re happy for Jasmine and wish her success in her new full-time position in DSS. And we’re happy that Danielle Prince will be joining our HNP staff on August 18th to ease our transition pains. Danielle will be helping with outreach and education in HNP on a part-time basis for approximately five months.

Training

On July 16, Steve Maybee, Adriel Shea, Chris Laverack and Liz Cameron participated in a webinar provided by NYSDOH on grant funding for public water systems.

Rabies Control Program

There were no confirmed cases of rabies in Tompkins County during July of 2015. However, in the beginning of August a bat was confirmed rabies positive by NYS Wadsworth Laboratory (not included in the table below). It resulted in rabies post-exposure prophylaxis for one person who was sleeping in the same room as the bat was found.

A press release was drafted to instruct residents how to capture bats in an effort to prevent unnecessary post-exposure prophylaxis treatment. The press release provides a link to a how-to video released by NYSDOH.

Key Data Overview				
	This Month	YTD 2015	YTD 2014	TOTAL 2014
Bites¹	22	92	86	167
Non Bites²	7	24	34	86
Referrals to Other Counties	1	15	24	43
Submissions to the Rabies Lab	33	126	74	190
Human Post-Ex Treatments	8	33	43	103
Unvaccinated Pets 6-Month Quarantined³	0	2	0	0
Unvaccinated Pets Destroyed⁴	0	1	0	0
Rabid Animals (Laboratory Confirmed)	0	5	4	12

¹“Bites” include all reported bites inflicted by mammals and any other wounds received while saliva is present.

²“Non-bites” include human exposures to saliva of potentially rabid animals. This also includes bats in rooms with sleeping people or young children where the bat was unavailable for testing.

³When an otherwise healthy, unvaccinated pet has contact with a rabid animal, or suspect rabid animal, that pet must be quarantined for 6 months or euthanized. Quarantine must occur in a TCHD-approved facility (such as a kennel) at the owner’s expense. If the pet is still healthy at the end of 6 months, the exposure did not result in rabies and the pet is released.

⁴ Pets must be euthanized if they are unvaccinated and have been in contact with a rabid or suspect rabid animal and begin to display signs consistent with rabies. Alternatively, a pet is euthanized if a prescribed 6-month quarantine cannot be performed or the owners elect euthanasia instead of quarantine.

Reports by Animal Type												
	Bites				Animals sent to the NYS Rabies Laboratory				Rabid Animals			
	Mo	YTD 2015	YTD 2014	Total 2014	By TCHD	By Cornell	Totals		Mo	YTD 2015	YTD 2014	Total 2014
							Mo	YTD				
Cat	7	43	29	58	1	0	1	7	0	0	0	0
Dog	12	79	49	94	0	0	0	7	0	0	0	0
Cattle	0	0	0	0	0	0	0	1	0	0	0	0
Horse/Mule	0	0	1	1	0	1	1	2	0	0	0	0
Sheep/Goat	0	0	0	0	0	0	0	0	0	0	0	0
Domestic	1	2	0	0	0	0	0	1	0	0	0	0
Raccoon	0	1	1	1	0	0	0	4	0	2	1	3
Bats	2	2	1	6	22	0	22	88	0	1	2	5
Skunks	0	0	1	2	0	0	0	0	0	0	0	3
Foxes	0	0	0	0	0	1	1	4	0	1	0	0
Other Wild	0	0	4	5	0	0	2	6	0	1	1	1
Totals	22	127	86	167	27	6	33	126	0	5	4	12

Food Program

The results of food service establishment inspections conducted in Tompkins County can be viewed directly on the Environmental Health website (<http://www.tompkinscountyny.gov/health/eh/food/index>). Inspections can be sorted to meet the needs of the viewer (by facility, date, etc.) by clicking on the column heading of interest. This is a valuable tool for easily providing information to the public.

Routine facility inspections are conducted to protect public health. The inspections are made without advance notice to ensure that food processes are adequate, safe, and meet code requirements. It is important to keep in mind that inspections are only a "snapshot" in the entire year of a facility's operation and they are not always reflective of the day-to-day operations and overall condition of the operation.

The following inspections were conducted with no critical violation(s) noted:

- | | |
|---|---|
| 2 nd Floor, C-Ithaca | Dolce Delight, T-Ithaca |
| AIS/ESOL Northeast Summer Feed, T-Ithaca | Dougs Fish Fry, Throughout Tompkins |
| Barnes & Noble Booksellers, C-Ithaca | Dunkin Donuts-Collegetown, C-Ithaca |
| Bright Future Summer Feed, C-Ithaca | Empire Livestock Marketing, V-Dryden |
| Cactus Heads, Throughout Tompkins | Fat Jack's BBQ, C-Ithaca |
| Capital State Kitchen, C-Ithaca | Freddy's Place, V-Newfield |
| Cass Park Concessions, C-Ithaca | Frosty Cow, T-Dryden |
| Cayuga Lake Creamery, Throughout Tompkins | Gangnam Station, C-Ithaca |
| Celia's Ice Pops, Throughout Tompkins | Gateway Kitchen, C-Ithaca |
| Chanticleer, C-Ithaca | GIAC Kitchen, C-Ithaca |
| Chili's Grill & Bar, C-Ithaca | GIAC Summer Feed, C-Ithaca |
| Comfort Inn, C-Ithaca | Gimme! Coffee-CU Gates Hall, C-Ithaca |
| CU-Robert Purcell Dining, C-Ithaca | Gimme! Coffee-State St., C-Ithaca |
| CU-Robert Purcell Mobile Hot Dog Cart, C-Ithaca | ICSD Boynton Middle School Summer Feed, C-Ithaca |
| CU-Robert Purcell Summer Feed, C-Ithaca | Insomnia Cookies, C-Ithaca |
| CU-Trillium Dining, C-Ithaca | Iron Owl Kitchen, Throughout Tompkins |
| CU-Trillium Dining Summer Feed, C-Ithaca | Ithaca High School Summer Academy Summer Feed, C-Ithaca |
| Dennis Homemade Ice Cream, T-Newfield | |

Linda's Corner Diner, T-Lansing
 Mental Health Association Summer Feed, C-Ithaca
 Moakley House, T-Ithaca
 Mystic Water Kava Bar & Yoga Studio, C-Ithaca
 Newfield School Summer Feed, V-Newfield
 Northside Community Center Summer Feed, C-Ithaca
 Northstar House, C-Ithaca
 Old Mexico, C-Ithaca
 Pelican Barbecue, Throughout Tompkins
 Pre-school Northeast Summer Feed, T-Ithaca
 Purity Ice Cream, C-Ithaca

Regal Cinemas 14, V-Lansing
 Rhine House, C-Ithaca
 Sacred Root Kava Lounge and Tea Bar, C-Ithaca
 Silky Jones, C-Ithaca
 Southside Community Center, C-Ithaca
 Southside Community Center Summer Feed, C-Ithaca
 Spicy Asian, C-Ithaca
 Starbucks Coffee #11932, C-Ithaca
 Tamarind, C-Ithaca
 TC3 Athletics Facility, T-Dryden
 TST BOCES Summer Feed, T-Ithaca

The Hazard Analysis Critical Control Point (HACCP) Inspection is an opportunity for the establishment to have the health department review food processes in the facility to make sure that all potential hazards are identified and to assure that the best food safety practices are being used.

No HACCP inspections were conducted this month.

Re-Inspections are conducted at any establishments that had a critical violation(s) to ensure that inadequate or unsafe processes in a facility have been corrected.

The following re-inspections were conducted with no violations noted:

Boatyard Grill, C-Ithaca
 Bravo, V-Freeville
 Carrozza Pizza Co., V-Dryden
 Chipotle Mexican Grill #1661, C-Ithaca
 Easy Wok, V-Lansing
 Gorgers Taco Shack, C-Ithaca
 Kendra's Café, T-Lansing
 Mate Factor, Grassroots Festival
 Pizza & Bones, V-Dryden
 The Star Truck, Throughout Tompkins
 Super 8 Motel, C-Ithaca
 Taughannock Farms Inn, T-Ulysses

Critical violations may involve one or more of the following: the condition of food (e.g. food that may be at improper temperatures on delivery or damaged by rodents), improper food cooking and storage temperatures (e.g. food cooked to and/or held at improper temperatures), improper food preparation practices (e.g. preparing ready-to-eat foods with bare hands), and water and/or sewage issues (e.g. low disinfection levels in the water system). These critical violations relate directly to factors that could lead to food related illness.

Critical Violations were found at the following establishments:

Bravo, V-Freeville

Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F during cold holding. Products in two cold holding units were observed to be at 51-53°F and 54-59°F respectively. Products were either moved to functioning refrigeration units or discarded during the inspection.

Chipotle Mexican Grill #1661, C-Ithaca

Potentially hazardous foods requiring cooking were not heated to 140°F or above. Product placed on the hot service line within 5 minutes of the inspection was observed to be at 116-118°F. The product was removed from service and rapidly reheated to the appropriate temperature before return to service.

Boatyard Grill, C-Ithaca

Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F during cold holding. Products in a refrigerated storage unit were observed to be at 50-52°F. The products were moved to a functioning cooler to be chilled to 45°F or less before use.

Corner Store, C-Ithaca

Potentially hazardous foods were not pre-chilled to 45°F or less before use as recommended. Product for use in customer orders was observed to be at 54°F. The product was removed from service to be chilled to 45°F or less before use.

Mate Factor, Grassroots Festival

Potentially hazardous foods were not stored under refrigeration. Product for customer service was observed to be at 57°F. The product was discarded during the inspection.

Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F. Products in a cold holding unit were observed to be at 51-56°F. The products were rapidly chilled to 45°F or less before use.

Macro Mama's, Throughout Tompkins

Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F during cold holding. Products in a non-functioning refrigerated storage unit were observed to be at 50-59°F. Products in cambros were also observed to be at 50-58°F. All products were discarded during the inspection.

The Shack, C-Ithaca

Precooked, refrigerated, potentially hazardous foods were not reheated to 165°F or above within two hours. Product in a hot holding unit was observed to be at 112°F and had been in unit for more than two hours. The product was discarded during the inspection.

Lian Hua Chinese Kitchen, C-Ithaca

Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F. Products in a cold holding unit were observed to be at 51-58°F. The products were discarded during the inspection.

Dryden Community Café, V-Dryden

Potentially hazardous foods were not kept at or below 45°F during cold holding. Product in a carafe for customer service was observed to be at 53°F. The product was removed from service and rapidly chilled to 45°F or less before use.

Temporary Food Service Operation Permits are issued for single events at one location. The Food Protection Program issued 33 temporary permits.

Temporary food operation inspections are conducted to protect public health. The inspections are made without advance notice to ensure that the food processes at the event are adequate, safe, and meet code requirements. The operation must correct Critical Violations during the inspection. When a Temporary Food Operation has Critical Violation/s, a re-inspection is conducted when the event is longer than one day.

The following inspections were conducted with no violation(s) noted:

AAU Basketball, T-Ulysses
 American Legion Post 770, T-Ulysses
 Ben & Jerry's, T-Ulysses
 Buchi Kombucha, T-Ulysses
 Girl Scouts Troop 40144, T-Newfield
 Iroquois Kitchen, T-Ulysses
 Lao Village, T-Ulysses

MacDonald Farms, T-Ulysses
 Newfield Lioness & Newfield Lions, T-Newfield
 Newfield Project Graduation, T-Newfield
 Outback Kate's, T-Ulysses
 Pig Vicious BBQ, T-Dryden
 Real Falafel, T-Ulysses
 Stonecat Café, T-Ulysses

Tompkins Trust Banking on a Cure, T-Ithaca

Critical Violations were found at the following establishments:

Grassroots World Café, Grassroots Festival

Potentially hazardous foods were held at an improper temperature. Product in the walk-in cooler was observed to be at 56°F. The product was rapidly chilled to 45°F or less. Liquid waste was also found to be improperly disposed of. The plumbing was corrected during the inspection. During a re-inspection products in the walk-in cooler were observed to be at 51-58°F. Products were either discarded or moved to functioning refrigerated storage. Board of Health action will be pursued.

New York Pizzeria, Grassroots Festival

Potentially hazardous food was held at an improper temperature. Products in a refrigerated storage unit were observed to be at 51-58°F. Products in a separate unit were observed to be at 58°F. The products were discarded during the inspection.

No Paws or Claws Fundraiser, V-Trumansburg

Potentially hazardous food was held at an improper temperature. Products for customer service were observed to be at 128°F, 118°F and 104°F. All products were removed from service and rapidly reheated to 165°F or above before use.

Newfield Recreation Department, V-Newfield

Potentially hazardous foods were held at an improper temperature. Product for customer service was observed to be at 124°F. The product was removed from service and rapidly reheated to 165°F or above. Product was also observed at 52°F. The product was removed from service and rapidly chilled to 45°F or less before use.

Pre-Operational inspections are conducted, following a thorough review of proposed plans, at new or extensively remodeled facilities to ensure code compliance prior to opening to the public.

The following pre-operational inspections were conducted:

Comfort Inn, C-Ithaca
Luna/Loco, C-Ithaca
Rodeway Inn, T-Ithaca

Plans Approved:

Rodeway Inn, T-Ithaca
Texas Roadhouse, C-Ithaca

New Permits Issued:

Mr. Bailey's Hot Dogs & More, Throughout Tompkins
Silo Truck, Throughout Tompkins
ZaZa's Cucina, C-Ithaca

The Food Protection Program received and investigated one complaint related to issues and/or problems at permitted food service establishments.

Engineering Plans Approved

- 48 Dassance Road, 330 GPD Sewage System, Newfield-T
- Walnut Ridge Dairy, 150 GPD Sewage System, Lansing-T
- Rogues Harbor, 850 GPD Replacement Sewage System, Lansing-T

Problem Alerts/Emergency Responses

- A Boil Water Order for the Country Garden Apartments was in effect from 7/23/15 through 7/30/15 due to insufficient disinfection. Corrections were made to the systems the following day by a water treatment specialist.

Healthy Neighborhoods Program

HEALTHY NEIGHBORHOODS PROGRAM	MONTH	YTD 2015	YTD 2014	Total 2014*
# of Initial Home Visits	37	217	196	426
# of Revisits	10	93	48	98
# of Asthma Homes (initial)	4	38	30	67
# of Homes Approached	30	334	521	2034

*Covers the calendar year (January through December)

Outreach

- On July 21, Samantha and Jasmin conducted outreach at the Salvation Army Kitchen Cupboard Food Pantry (1 visit, 10 reached)
- On July 23, Samantha and Jasmin tabled at the Loaves and Fishes dinner (20 reached)
- On July 25, Jasmin conducted outreach at the Southside Food Pantry (20 reached)
- Throughout July, Jasmin distributed flyers and posters for our program throughout Ithaca on community bulletin boards and to organizations

Childhood Lead Program

CHILDHOOD LEAD PROGRAM	MONTH	YTD 2015	YTD 2014	TOTAL 2014
A: Active Cases (total referrals):				
A1: # of Children w/ BLL>19.9ug/dl	0	0	0	0
A2: # of Children w/ BLL 10-19.9ug/dl	0	1	4	5
B: Total Environmental Inspections:				
B1: Due to A1	0	0	2	3
B2: Due to A2	0	2	4	8
C: Hazards Found:				
C1: Due to B1	0	0	0	0
C2: Due to B2	0	2	4	6
D: Abatements Completed:	0	1	0	0
E: Environmental Lead Assessment Sent:	0	1	3	5
F: Interim Controls Completed:	0	0	1	3
G: Complaints/Service Requests (w/o medical referral):	6	34	31	55
H: Samples Collected for Lab Analysis:				
- Paint	0	1	0	0
- Drinking Water	0	0	0	0
- Soil	0	1	2	2
- XRF	0	1	4	6
- Dust Wipes	0	2	3	6
- Other	0	0	1	1

Summary of Open BOH Enforcement Actions:

Date of BOH Action	Facility	Owner/ Operator	Basis for Action	Penalty Assessed	Next BOH Order Deadline	Status
7/28/15	CTB-Aurora Street	Ramsey Brous	Repeat Critical Violations	\$400	Proof of repair or replacement of refrigeration storage due 8/15/15.	Awaiting Compliance
6/23/15	Jin Wu	Xiang Lan Liang	Repeat Critical Violations	\$400	Penalty Payment due 8/15/15.	Awaiting Payment
6/23/15	Stella's	Matthew Garner	Violation of BOH Orders - Repeat Critical Violations	\$800	Proof of Repair or replacement of refrigeration storage	Facility Closed
3/24/15	Upstate District Nazarene	Stanley McLain	Violation of BOH Orders (Water) – Modifications without Approval	N/A	Monthly MOR & Sampling Submittals	Monitoring Compliance
12/10/13	Ulysses WD #3	Town of Ulysses	Public Water System Violations – Disinfection Byproducts	N/A	Complete construction of TTHM reduction project or implement operational changes by 9/15/15.	Monitoring Compliance
12/11/12	Village of Dryden PWS	Village of Dryden	Public Water System Violations – Arsenic and Storage Tank Replacement	N/A	Revised engineering study due 6/15/15.	Monitoring Compliance



Frank Kruppa
Public Health Director
55 Brown Road
Ithaca, NY 14850-1247

ENVIRONMENTAL HEALTH DIVISION
www.tompkinscountyny.gov/health/eh

Ph: (607) 274-6688
Fx: (607) 274-6695

CERTIFIED, REGULAR, & ELECTRONIC MAIL

August 7, 2015

Issam Chafee
Sammy's Pizzeria & Restaurant Inc
215 E State St
Ithaca, NY 14850

**Re: Tompkins County Board of Health Draft Resolution # ENF-15-0018
Sammy's Pizzeria, C-Ithaca**

Dear Mr. Chafee:

Thank you for signing the Stipulation Agreement on July 27, 2015, for the Sammy's Pizzeria.

Enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, August 25, 2015**. You or a representative has the right to speak to the Board for a few minutes prior to them taking action. If you wish to speak to the Board, please contact Skip Parr or me at (607) 274-6688 at least one day before the meeting. If you plan to attend, please arrive by 12:00 p.m. (noon).

Sincerely,

C. Elizabeth Cameron, P.E.
Director of Environmental Health

Enclosures – Draft Resolution, Stipulation Agreement and Orders, Case Summary and Written Statement/Receipt

pc: F:\EH\FOOD (SF)\FSE (SF)\Facilities (SF-4)\Sammy's Pizzeria\Draft Resolution 15-0018.docx
ec: Tompkins County Board of Health (via; Shelley Comisi, TCHD)
Mike Niechwiadowicz, Ithaca Building Department; Mayor Svante Myrick; Nathan Shinagwa, TC Legislature; TCHD: Elizabeth Cameron, P.E., Director of Environmental Health; Frank Kruppa, Public Health Director; Kristee Morgan; Skip Parr; Brenda Coyle
scan: Signed copy to Accela

ENVIRONMENTAL HEALTH DIVISION
<http://www.tompkins-co.org/health/eh>

Ph: (607) 274-6688
Fx: (607) 274-6695

DRAFT RESOLUTION # ENF-15-0018 FOR

**Sammy's Pizzeria
Sammy's Pizzeria & Restaurant Inc, Issam Chafee, Owner/Operator
215 E State Street
Ithaca, NY 14850**

Whereas, the owner/operator of a Food Service Establishment must comply with the regulations established under Part 14-1 of the New York State Sanitary Code; **and**

Whereas, on June 1, 2015, the Tompkins County Health Department observed critical violations which included failure to provide and maintain enough refrigeration storage to maintain potentially hazardous food at or below 45°F. Approximately ten four-pound blocks of cheese were observed in Cooler #4 at 54°F; **and**

Whereas, on June 23, 2015, the Tompkins County Health Department observed critical violations which included failure to provide and maintain enough refrigeration storage to maintain potentially hazardous food at or below 45°F. Two containers of breaded chicken were observed at temperatures between 62°F and 65°F in Cooler #10 (Pepsi Cooler); **and**

Whereas, Issam Chafee, Owner/Operator, signed a Stipulation Agreement with Public Health Director's Orders on July 27, 2015, agreeing that Sammy's Pizzeria violated these provisions of the New York State Sanitary Code; **now therefore be it**

**Resolved, on recommendation of the Tompkins County Board of Health,
That Issam Chafee, Owner/Operator, is ordered to:**

1. Pay a penalty of \$400 for these violations, due **October 15, 2015**. (**Do Not** submit penalty payment until notified by the Tompkins County Health Department.); **and**
2. Provide an adequate amount of refrigeration storage to maintain Potentially Hazardous Food at or below 45°F at all times during cold storage.
3. Provide proof of repair showing the proper functioning of the summit cooler next to the coffee grinder issued by a commercial refrigeration repair specialist or provide proof of purchase of replacement refrigeration equipment that is commercial grade and meets NSF (National Sanitation Foundation) standards to the Health Department by **August 15, 2015 (Completed 7/27/15)**.
4. Comply with all the requirements of Subpart 14-1 of the New York State Code for Food Service Establishments.

ENVIRONMENTAL HEALTH DIVISION
<http://www.tompkins-co.org/health/eh>

Ph: (607) 274-6688
Fx: (607) 274-6695

STIPULATION AGREEMENT AND ORDERS # ENF-15-0018

Sammy's Pizzeria
Sammy's Pizzeria & Restaurant Inc, Issam Chafee, Owner/Operator
215 E State Street
Ithaca, NY 14850

I, Issam Chafee, as a representative for Sammy's Pizzeria, agree that on June 1, 2015, and June 23, 2015, Sammy's Pizzeria was in violation of Subpart 14-1 of New York State Sanitary Code for failure to provide and maintain refrigeration equipment to hold potentially hazardous foods at required temperatures during cold storage.

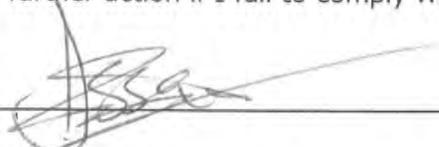
I agree to pay a penalty not to exceed \$400 for these violations following adoption of a resolution by the Board of Health. (**Do not** submit penalty payment until notified by the Tompkins County Health Department.)

I also agree to comply with the following Orders when signed by the Tompkins County Public Health Director:

1. To provide an adequate amount of refrigeration storage to maintain Potentially Hazardous Food at or below 45°F at all times during cold storage ; **and**
2. To provide proof of repair of Cooler #4 and Cooler #10 by a commercial refrigeration repair specialist or provide proof of purchase of replacement refrigeration equipment that is commercial grade and meets NSF (National Sanitation Foundation) standards to the Health Department **by August 30, 2015;**
3. To comply with all the requirements of Subpart 14-1 of the New York State Code for Food Service Establishments

I understand this agreement is offered as an alternative to a formal administrative hearing and that I am subject to further action if I fail to comply with the orders.

Signed: _____



Date: _____

07/27/15

Issam Chafee is hereby ordered to comply with these Orders of the Public Health Director.

Signed: _____

Frank Kruppa
Public Health Director

Date: _____

7/28/15



Frank Kruppa
Public Health Director
55 Brown Road
Ithaca, NY 14850-1247

ENVIRONMENTAL HEALTH DIVISION
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CASE SUMMARY – FOR RESOLUTION # ENF-15-0018

**Sammy's Pizzeria
Sammy's Pizzeria & Restaurant Inc., Issam Chafee, Operator
215 East State Street, C-Ithaca
Ithaca, NY 14850**

August 2015

Date	Action
07/27/2015	Signed stipulation and receipt for cooler repair received by TCHD.
07/9/2015	Stipulation agreement sent by TCHD. Office conference scheduled for 7/29/15.
06/23/2015	Re-inspection by TCHD: Violations: Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F during cold holding. Products in a cold holding unit were observed to be at 55-60°F.
06/01/2015	Inspection by TCHD: Violations: Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F during cold holding. Products in a cold holding unit were observed to be at 54°F.
12/12/2014	Inspection by TCHD: No violations noted.
05/21/2014	Re-inspection by TCHD: Violation observed on 04/23/2014 was corrected.
04/23/2014	Inspection by TCHD: Violations: Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F during cold holding. Products in a cold holding unit were observed to be at 48-58°F.
07/11/2013	Re-inspection by TCHD: Violations observed during inspection of 06/14/2013 were corrected.
06/14/2013	Inspection by TCHD: Violations: Potentially hazardous foods were not kept at or below 45°F during cold holding. Product in a cooler was observed to be at 55-59°F. Potentially hazardous foods were not stored under refrigeration except during necessary preparation. The facility was not adhering to conditions of the waiver from temperature control for pizza.
04/13/2012	Re-inspection by TCHD: Violations observed during inspection of 03/22/2012 were corrected.
03/22/2012	Inspection by TCHD: Violations: Potentially hazardous foods were not stored under refrigeration except during necessary preparation. The establishment was not adhering to the conditions of the waiver from temperature control for pizza. Enough refrigerated storage equipment was not operated so that potentially hazardous foods were stored at or below 45°F. Products in a cold holding unit were observed to be at 55-64°F.
12/28/2011	Re-inspection by TCHD: Violation observed on 12/14/2011 was corrected.
12/14/2011	Re-inspection by TCHD: Violations: Potentially hazardous foods were not kept at or above 140°F during hot holding. Product in a hot holding unit was observed at 127-137°F.
12/01/2011	Inspection by TCHD: Violations: Precooked refrigerated potentially hazardous foods were not reheated to 165°F or above within two hours. Precooked product was observed in a steam table for service at 70°F.
10/14/2010	Inspection by TCHD: No violations noted.
11/01/2002	Permit to Operate Sammy's Pizzeria issued.

Inclusion Through Diversity

Ken Sanderson 6.3263
 134 Graham Rd. APT 2A1
 Ithaca NY 14850 6073270774

07/27/15

To : Board of Health

Dear Sirs or Madam

Regarding the violations, it has been fixed, All cooler remains of Temp 40° or below now.

the problem was fixed after 1st inspection but one of my employees turn the fan off

I hope i do get fined with max penalty.

My Regards
 Sammy

NAME Sammy's Pizzeria		SHIP TO	
ADDRESS The Commons		ADDRESS	
CITY, STATE, ZIP Ithaca NY 14850		CITY, STATE, ZIP	
ORDER NO.	TERMS	DATE 6/26/15	
WHEN SHIP	HOW SHIP	SALESPERSON	
QUANTITY	DESCRIPTION	PRICE	AMOUNT
	pepsi 1 Door cooler - Found low Refrigerant charge - Added Refrig 414B (Hot Shot) - leak check & tightened seal Service Filtrage - Replaced Kap. to cont run cooler out to verify front of condenser / left the bottom front off to get better air movement - Temperature is coming down but too slowly - Service call		75.00
	Refrigerant 35-		110.00
BUYER			