

AGENDA
Tompkins County Board of Health
Rice Conference Room
Tuesday, September 22, 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.)

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*** (10 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.)
2. Resolution #ENF-15-0019 – GrassRoots World Café, GrassRoots Festival, T-Ulysses, Violations of Part 14-2 of the New York State Sanitary Code (Temporary Food) (5 mins.)

12:40 ***Administration*** (5 mins.)

Discussion/Action:

1. Consideration of a position on joint Public Health and Mental Health Department Head (5 mins.)

12:45 ***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 August 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: September 01, 2015

EXPENDITURES

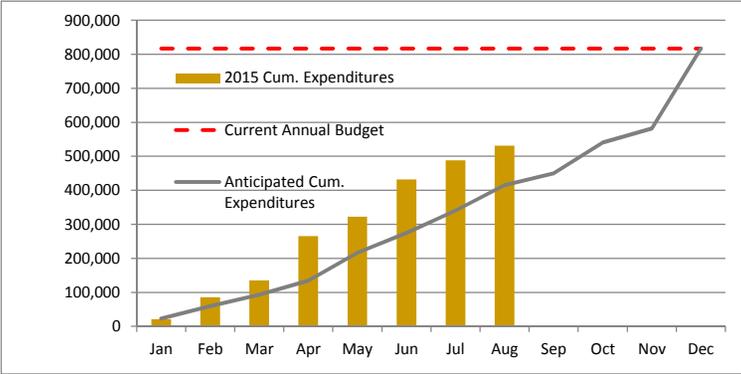
Cumulative to date compared to budget (over budget by more than 15% = Red, between 110% and 115% of budget = Yellow, below 110% of budget = Green)

REVENUES

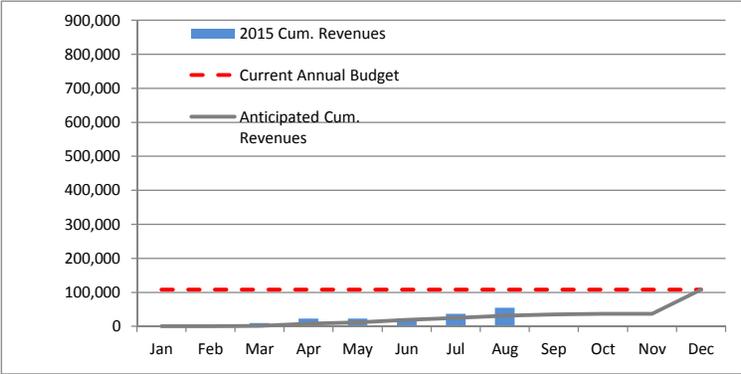
Cumulative to date compared to budget (over = Green, above 90% of budget = Yellow, below 90% of budget = Red)

Health Dept - Planning & Coordination (4010)

Cumulative Expenditures thru August 2015



Cumulative Revenues thru August 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

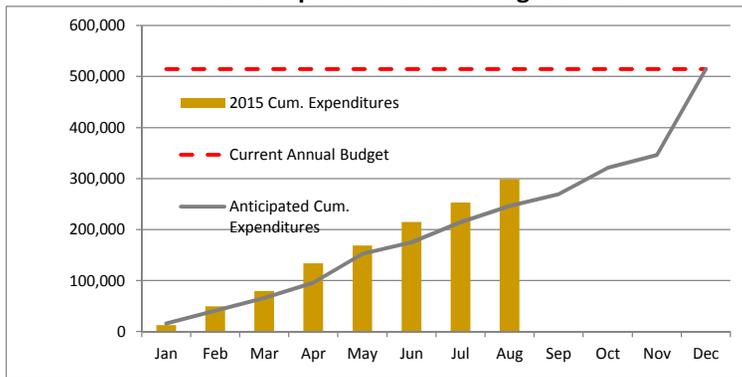
- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

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.

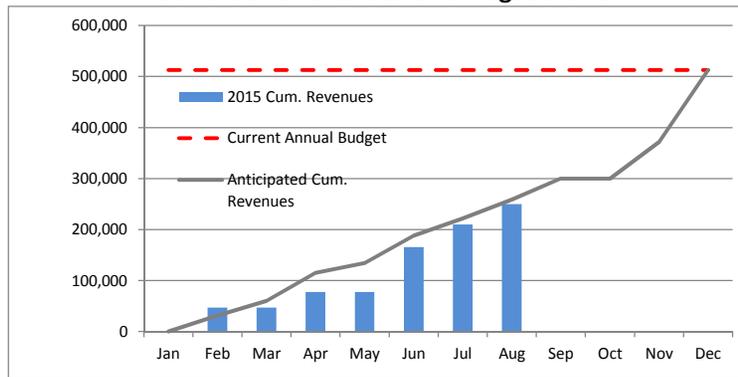
Notes: Expenditures reflected for 2015 are higher as a result of the department paying the Maintenance in Lieu of Rent in full for the year and the County posting a capital project expense in 4010 instead of the capital project account. No fringes were posted for the period thru August for 2014 and 2015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

Health Dept - Women, Infants & Children (4012)

Cumulative Expenditures thru August 2015



Cumulative Revenues thru August 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

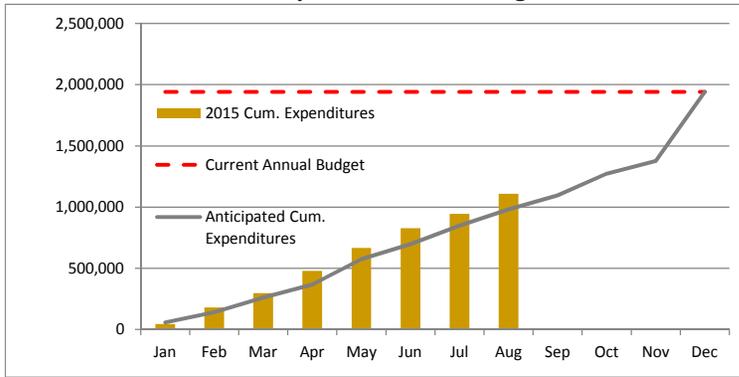
The "Anticipated Cum." line in each graph is derived by calculating the ratio of the average of the prior two years actuals for any given month to the total average actual for those two years and then applying that ratio to the current year's budget.

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

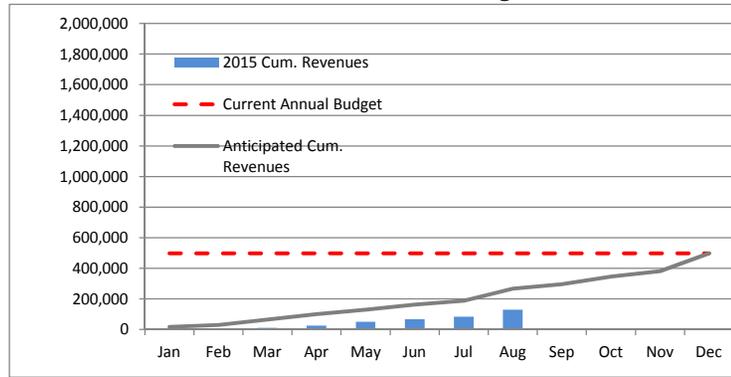
Health Dept - Division For Community Health (4016)



Cumulative Expenditures thru August 2015



Cumulative Revenues thru August 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

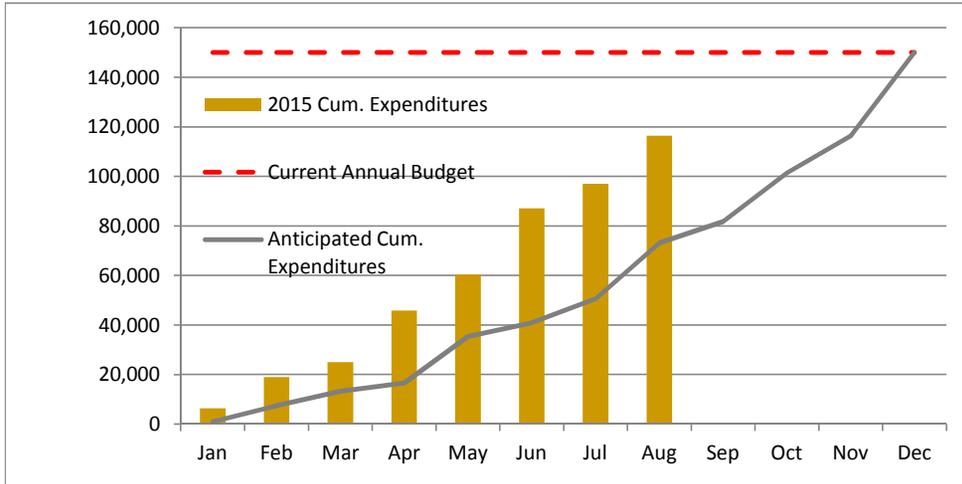
The "Anticipated Cum." line in each graph is derived by calculating the ratio of the average of the prior two years actuals for any given month to the total average actual for those two years and then applying that ratio to the current year's budget.

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 August for 2014, fringes in 2015 are being posted on a monthly basis.

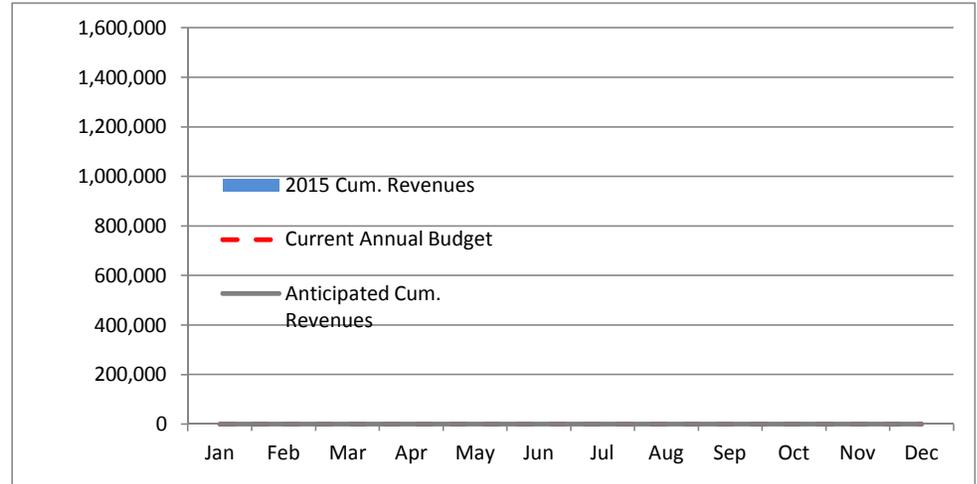
Licensed Home Care Services Agencies (LHCSA) are not permitted to bill Medicaid for home visits. The Department has a contract in place to complete billing with VNS, the prior two years accounted for billing done in house. Revenues in 2014 and 2015 are lower due to timely processing of flu billing and 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 August 2015



Cumulative Revenues thru August 2015

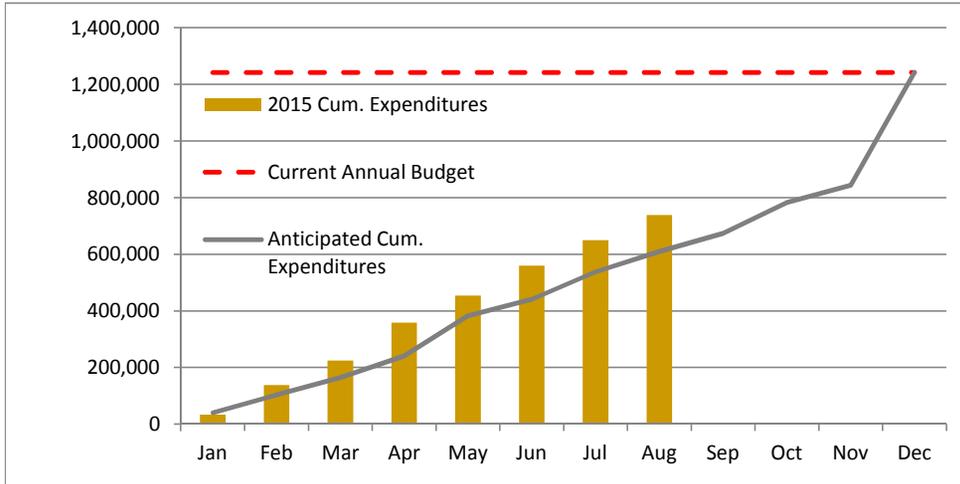


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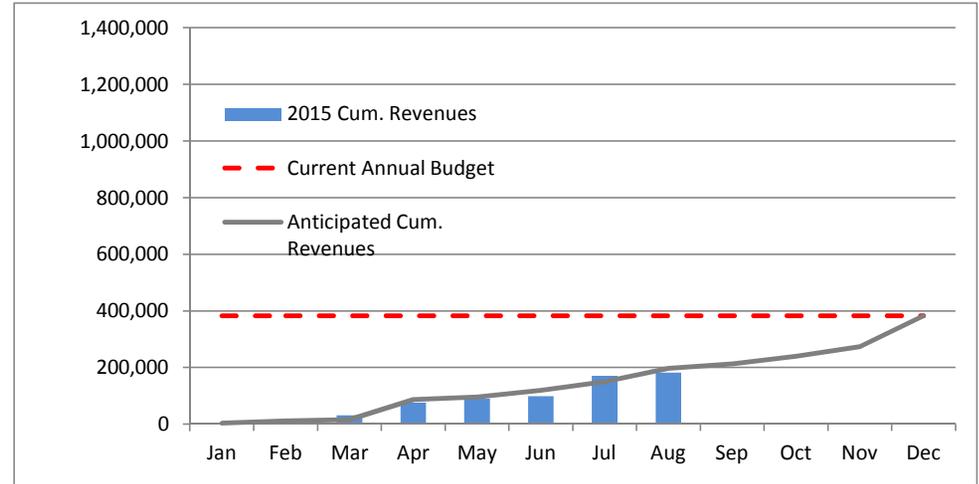
Notes: The number of cases with expenses responded to thru August 2015 (33 autopsies/5 case reviews) are higher than the prior two years (20-26, 3-4 case reviews). Expenses are often delayed pending final autopsy report. Removals are also increasing (102 in 2015, 74 in 2013 and 59 in 2014).

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

Cumulative Expenditures thru August 2015



Cumulative Revenues thru August 2015

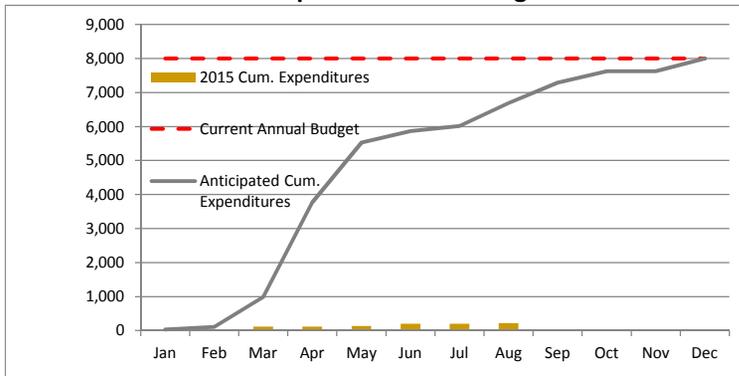


The "Anticipated Cum." line in each graph is derived by calculating the ratio of the average of the prior two years actuals for any given month to the total average actual for those two years and then applying that ratio to the current year's budget.

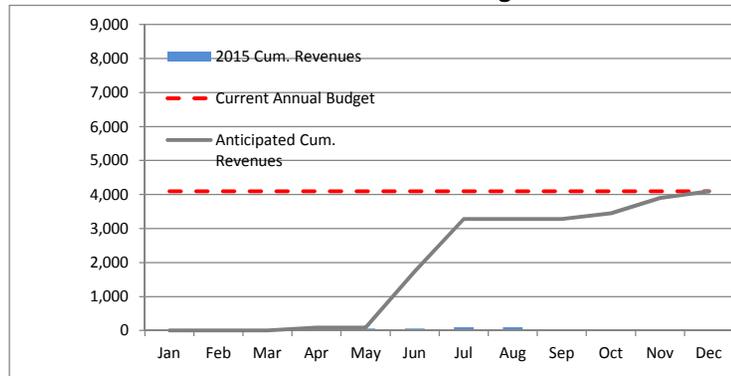
Notes: Expenditures reflected for 2015 are higher as a result of the department paying the Maintenance in Lieu of Rent in full for the year. In addition the program is fully staffed. No fringes were posted for the period thru August for 2014, 2015 fringes are current.

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

Cumulative Expenditures thru August 2015



Cumulative Revenues thru August 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

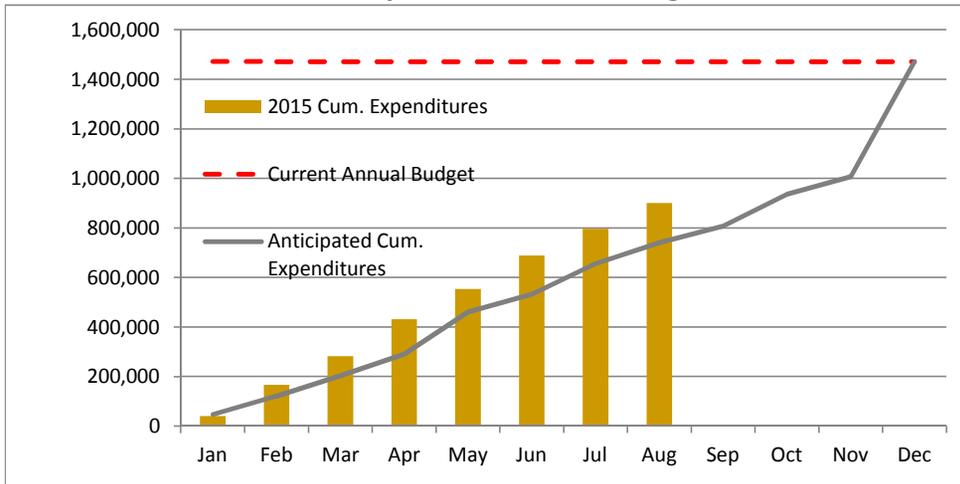
- Cumulative to date compared to budget
- Current month compared to budget
- Current cumulative compared to last year
- Consider review of adopted budget amount

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.

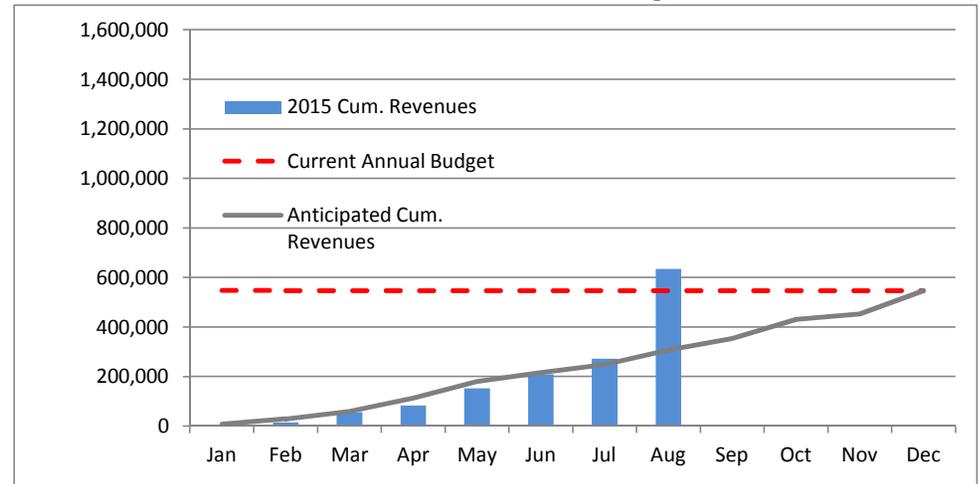
Notes: Services rendered are based on needs from eligible families, currently we only have a couple of children receiving benefits, which is less than prior years. Claims for this program are done quarterly.

Health Dept - Environmental Health (4090)

Cumulative Expenditures thru August 2015



Cumulative Revenues thru August 2015

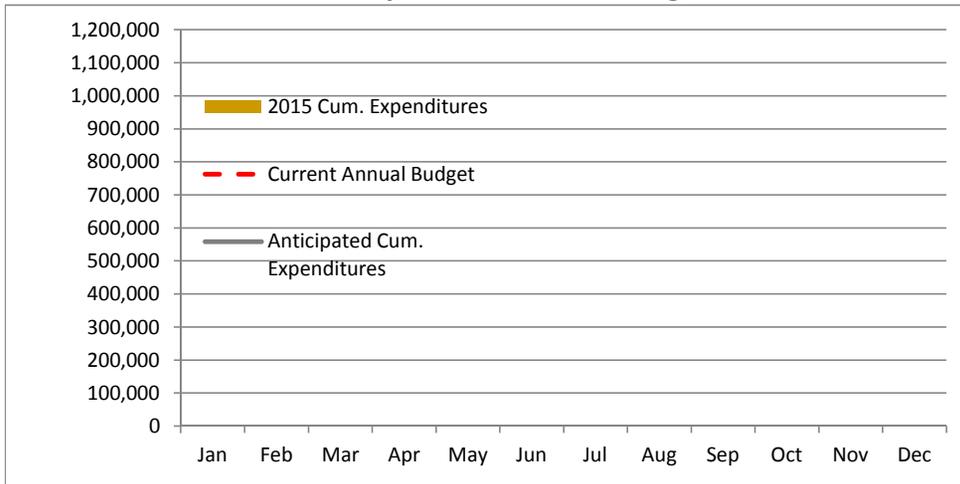


The "Anticipated Cum." line in each graph is derived by calculating the ratio of the average of the prior two years actuals for any given month to the total average actual for those two years and then applying that ratio to the current year's budget.

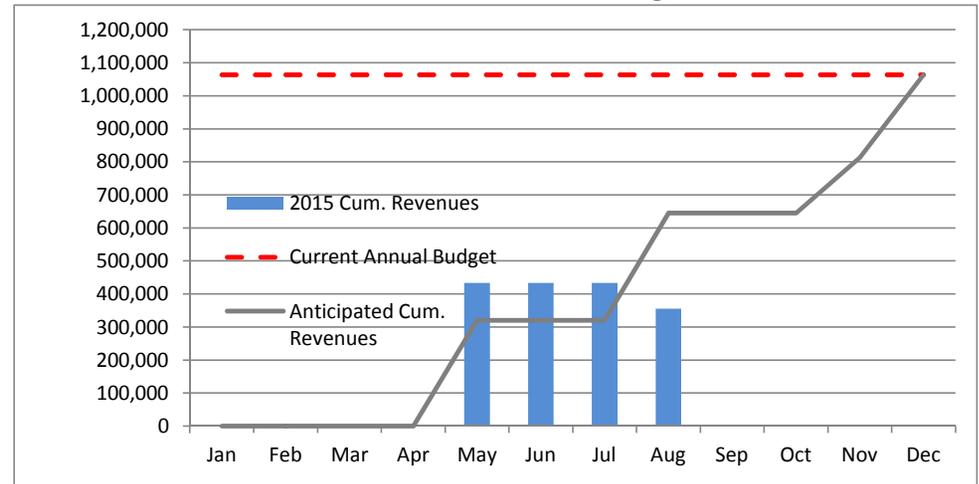
Notes : Expenditures reflected for 2015 are higher as a result of the department paying the Maintenance in Lieu of Rent in full for the year. No fringes were posted for the period thru August for 2014, 2015 fringes are current.

Health Dept - Public Health State Aid (4095)

Cumulative Expenditures thru August 2015



Cumulative Revenues thru August 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: The state aid reduction in 2015 is a result of a revision in the final claim for 2014. The department submitted the final claim for 2014 including the Accela project which was subsequently denied, thus reducing our state aid by approximately \$77,690. The department is evaluating methods to seek reimbursement in 2015 on the project following further discussions with NYSDOH. In addition the second quarter claim (\$328,134) is not posted in the county financial system.

**Public Health Director
Report
September 2015**

- My time continues to be split between Public Health and Mental Health. The County Administrator is evaluating future steps.
- I attended a demonstration of the County's new WebEOC program which will make coordinating and tracking emergency response activities during an event easier and more accessible to responders.
- I have had discussions with the Health Homes leadership at the Mental Health Department and Sylvia Allinger about the possible coordination of efforts as Health Homes expands to children in 2016. EI care management is part of the Health Homes expansion and we want to make sure we position Tompkins County to effectively address these changes.
- I continue to work with our Electronic Health Record vendor and our internal implementation team to ensure we have a configured and functioning system. Go live is currently scheduled for October 1st, but may get delayed to give more time to work the bugs out.

Medical Director's Report Board of Health September 2015

Resuscitation and CPR

As most of you know the County has installed automatic defibrillators in many of its buildings as of this date, including two here at the Department of Health. In my role I hope to oversee the program and review any use of the defibrillators during an after action report and also helping to determine if a meeting with the participants would be useful and helpful.

Interestingly an article in "Ask Amy" in the Ithaca Journal appeared in the middle of August concerning a 91 year old father of the writer. The distress of the writer concerned her belief that her father should be offered the benefit of resuscitation, while in fact he had executed an advance directive some years prior which specifically prohibited resuscitation. If the writer had realized the statistics about resuscitation it could have been a great deal of consolation for her in this matter and also saved her family a great deal of grief.

In the young and healthy an unexpected stoppage of breathing and circulation is often do to an accidental cause or sometimes premature cardiac disease. In these persons resuscitation has a much higher probability of a successful outcome compared to people advancing in age or who have chronic disease, especially of a severe nature. In general out of hospital resuscitations are not as successful as in hospital ones. However, they can at times be successful especially in the aforementioned low risk group.

In the high risk group, out of hospital resuscitations have a very low probability of success and this success is improved only slightly when these events occur in hospital. In general when you are elderly and when you are suffering from advanced chronic disease there are very good reasons why your heart or your breathing would stop (it is usually your heart that stops in the adult population). Those factors are not removed or mitigated by resuscitation and therefore the success of the procedure in terms of immediate survival and also in terms of survival beyond the immediate period and in terms of complications which can ensue are worsened.

As we use the onsite defibrillators throughout the County we need to be cognizant of these facts and stand ready to help our colleagues who may be part of that first response team to deal with the potential failures of the effort and to on the other hand celebrate the occasional good success that it will have.

From U.S. Department of Health and Human Services National Center for Health Statistics Report on trends in sexual activity, contraceptive use, and childbearing among teenagers aged 15-19:

A 2011-2013 national survey showed that about half of female and male teenagers in the age group of 15-19 had experienced sexual intercourse. This percentage had declined between those two years by 14% for females and 22% for males over the past 25 years.

79% of females and 84% of males had used a contraceptive method at first sexual intercourse with the condom remaining the most common contraceptive method.

Young women who did not use a method of contraception at first intercourse were twice as likely to become teen mothers as those who did use a method.

Comment: The gratifying statistic here is the percentage of teenagers who used a contraceptive method at first intercourse. The implications for teenage motherhood are a strong impetus for us to continue the promotion of contraceptive methods.

Coca Cola and Your Health

Coca Cola has decided that calories don't count as much as your activity does when it comes to losing and keeping your weight at a healthy level. Flying in the face of public health Coke chose to adopt the position of the minority of researchers and ignore the majority of scientists who focus on achieving a healthy weight. Conveniently the Corporation's position would tell all of us not to worry about drinking soda (most of which the company hopes would be a Coca Cola product) and instead Coke wants us to focus on our activity. Following this advice would conveniently boost Coke's sales and its stock price making its investors happy but would be at the expense of our waistlines.

It has been well established that being active at least 30 minutes, five times a week (to the extent that we get our heart rates up and our lungs working more vigorously) has the benefit of helping us to live longer and healthier. However, if you are trying to reduce your weight, the most you can reasonably expect from activity is for it to complement your reduction of food and beverage calories. Activity will help motivate you to reduce your portions. Activity will make you feel stronger, more fit, and better. But activity burns far fewer calories than you might guess. My patients not uncommonly have come into my office and said, "Dr Klepack, I started being more active like you said but I haven't lost any weight!" It was back then that I started giving them an informative wheel that the NYS Department of Health provides which has on it a great number of foods and beverages, how many calories they have and how many minutes it takes to burn those calories. The activities listed are walking, jogging, swimming, and bicycling. When I show them that wheel they get the picture. They can eat far more in 1 minute than they can burn in 30 min of jogging! A simple plain bagel is 160 calories and takes 8 minutes of jogging to burn. We can quickly eat our way to a calorie surplus that we can't possibly get rid of by activity. There just isn't that much time in a day!

So calories have to be our concern. Reducing portions is a way to get there. Using smaller plates, glasses, and bowls will help you reduce your portions (one automatically takes less food because these smaller items fill up more quickly). Mindful eating is also important – especially when you are eating out or at a party.

Unlike Coca Cola, Public Health has nothing to gain by you following our advice – except you being healthier. Don't be unduly influenced by this self serving message from the soda industry.

William Klepack, MD
Medical Director
Tompkins County Health Department
55 Brown Road
Ithaca, N.Y. 14851
phone [607-274-6674](tel:607-274-6674)
fax [607-274-6680](tel:607-274-6680)

Health Promotion Program
Theresa Lyczko, Director

Tobacco Control Program – Ted Schiele, Planner/Coordinator

- Statewide Media Workgroup: Member of committee charged with selecting an advertising agency for statewide tobacco control media. Attended oral presentations in Albany, August 13 by three candidates who scored highest on the RFP. The agency selected is Pickney Hugo Group of Syracuse. The contract is approximately \$3.4 million over 4 years. Additional duties pre- and post-presentations meeting.
- Letter to the Editor published in *Ithaca Journal*, August 26 in response to their editorial about upstate smoking rates. The letter focused on the importance of smoke-free apartments, especially in taxpayer subsidized housing.
- Completed report on Ithaca College survey done last spring by a Health Promotion class at Ithaca College (IC). The survey measured attitudes about a tobacco-free IC campus among students, faculty, and staff. The report was submitted to Cortland County Health Department (lead agency for the tobacco control grant) as part of the contractor's end-of-year report to the NYS Bureau of Tobacco Control.
- Drafted Reality Check recruitment materials to be mailed to middle and high school health teachers and principals at each school district in Tompkins County (attached).
- Contacted Ithaca Housing Authority about establishing building-wide smoke-free policies. They support the concept.
- U.S. EAP webinar on smoke-free public housing, August 5.
- Monthly statewide Technical Assistance conference call, August 4.
- Monthly tri-county area meeting in Cortland August 11.

TCHD Participation and Support

- Meeting with Karen Bishop to discuss partnership activities related to the Peace of Mind (POM) campaign, i.e., education and outreach on STD prevention and testing, August 27. Reviewed POM website and current data on STDs, Ted Schiele, Theresa Lyczko
- Attended the staff satisfaction committee meeting, August 18. Susan Dunlop, Community Health Nurse
- Met individually with division managers and WIC Director to explore strategies for collaboration with and HPP support for EH, CSCN and CHS programs now that Health Promotion Program is part of Administration. The discussion included a review of HPPs programs and outreach activities. Theresa Lyczko
- Attended NYSDOH calls on new cooling towers regulations in response to outbreak of Legionnaire's Disease in the Bronx, August 7 & 17. Theresa Lyczko
- Met with CHS intern as part of the orientation process, August 12 and new CSCN staff, August 4, Theresa Lyczko
- Media: Responded to 2 calls – WSKG and a student journalist – regarding the updated school immunization requirements for the 2015 – 2016 school year. Theresa Lyczko
- Media: Submitted a press release for EH: "Catch the Bat" which illustrated the process and included information on the risk of rabies from an infected bat, August 11. Theresa Lyczko

Web site postings

- Immunization alert, Catch the Bat, Rabies, Rabies clinic dates
- Temporary Food training project

- POM site update and data updates

Community Health Assessment (CHA)

- Participated in a conference call of the region's Population Health Improvement Plan (PHIP) steering committee, August 5. Theresa Lyczko
- Met with Tompkins County PHIP coordinator for project updates, August 31. Ted Schiele, Theresa Lyczko

Emergency Preparedness

- Attended County Public Information Officer meeting, August 26. Theresa Lyczko

Community Outreach

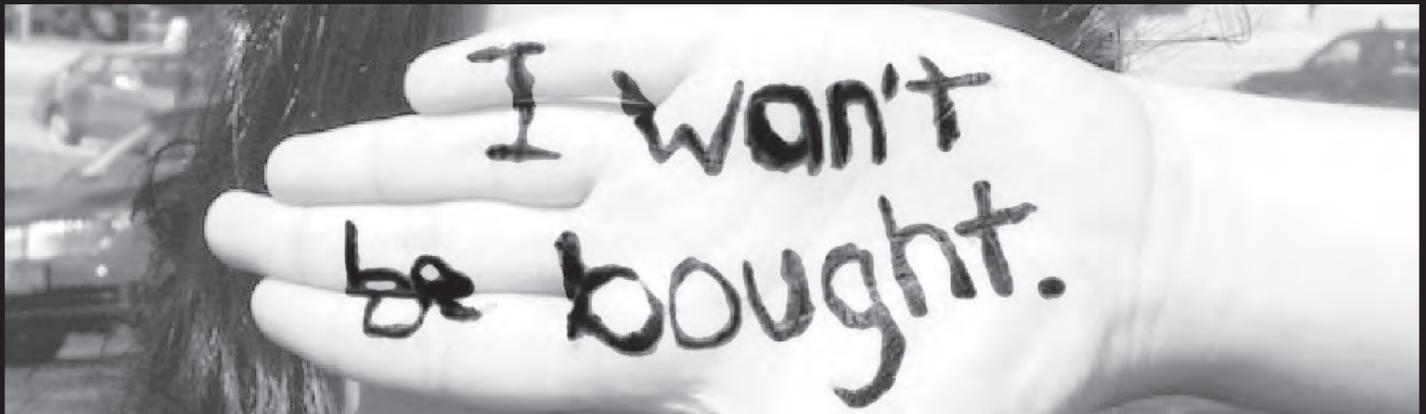
- Creating Healthy Places (CHP) - Greater Tompkins Health Insurance Consortium: Attended meeting of Joint Committee on Plan Design as a guest, August 6 and Owing Your Own Health Committee as a member, August 19. Ted Schiele
- CHP - Wellness Committee meetings attended: CFCU, August 4 and TCHD, August 18. Ted Schiele
- TC Worksite Wellness Coalition Put Fruit to Work initiative: developed a mailer that was sent to all Tompkins County employers with 5-plus employees. Developed a webpage for the initiative and Coalition. Met or corresponded with GreenStar, P&C Fresh, Rosie app, Ithaca Farmers Market regarding possible tie-in promotions with the initiative. Ted Schiele
- CHP – Attended Friends of Stewart Park board meeting and as Secretary recorded and submitted minutes, August 11. Attended informational meeting at the Community Foundation to assess potential for grant funding for FSP, August 13. Theresa Lyczko
- Met with HR staff at IC to develop strategies to promote the Diabetes Prevention Program (DPP) to IC staff, August 13. Susan Dunlop
- Attended the annual Latino picnic (invited) at Stewart Park. Promoted the DPP and the Healthy Neighborhoods Program, August 15. Susan Dunlop
- Met with HR director at Therm Inc. to discuss the DPP and possibilities for staff participation, August 21. Susan Dunlop
- Facilitated the DPP post- core session at Cornell University; 4 participants, August 19. Susan Dunlop

Meetings and Trainings

- Health Planning Council, Executive meeting, August 26. Theresa Lyczko

REALITY CHECK

Reality Check is a youth-led movement with the goal of exposing the truth about tobacco and the manipulative marketing practices that the tobacco industry uses to target youth.



**WE WANT AN EMPOWERED,
SMOKE-FREE, TOBACCO-FREE
GENERATION!**

**TOBACCO COMPANIES
CONTINUE TO TARGET US.
THEY MUST BE STOPPED!**

JOIN US!

Contact your local coordinator:

Melissa Potter, RC Coordinator
607-756-3416
mpotter@cortland-co.org

Ted Schiele, Tompkins Co. Coordinator
607-274-6712
tschiele@tompkins-co.org

www.facebook.com/realitycheckctc

www.realitycheckofny.com

Dear Teacher / Principal / Youth Coordinator:

We need your support getting **Reality Check (RC)** in Tompkins County!

What Is Reality Check?

REALITY CHECK is a teen led, adult supported program. RC works across New York State to expose Big Tobacco's manipulative and deceptive marketing tactics.

REALITY CHECK strives to build change in our communities through grassroots education, mobilization, political education and media campaigns.

REALITY CHECK engages youth as leaders and activists in the movement against tobacco use and the tobacco industry.

IN REALITY CHECK, the youth voice holds the tobacco industry accountable for its actions, and calls on society to change the social norms that support those actions.

Who Joins Reality Check?

Teens age 13–18 who want to be heard, open eyes, and change minds. Teens who want to use and develop their talents in public speaking, digital communications, or social activism. RC links with youth nationwide and around the world to fight the tobacco industry.

Is Reality Check in Tompkins County?

We are focusing our efforts on bringing Reality Check to Tompkins County. We're going all out to let Tompkins teens know about RC.

How Do Teens Find Out About Reality Check?

Often teens' first introduction to RC comes thanks to teachers, staff, and program coordinators like you. We are available to present to health classes, after school clubs, and programs that encourage community involvement. We appreciate any opportunity to meet students.

When Can Teens Learn More About Reality Check?

On **Sunday, Sept. 27, 2015**, Reality Check is hosting a *free* training and ropes course adventure at the at **Greek Peak Adventure Center** in Virgil. Teens from 8 Southern Tier counties will be there. It's a chance for teens to have fun and learn all about RC. Go to our Facebook page for more info (facebook.com/realitycheckctc).

What's Next?

Contact us! We look forward to speaking with you and how you can help support our program.

Ted Schiele, Tompkins Coordinator
tschiele@tompkins-co.org
(607) 274-6712

Melissa Potter, Lead RC Coordinator
mpotter@cortland-co.org
(607) 756-3416

www.facebook.com/realitycheckctc

www.realitycheckofny.com

Students in Reality Check learn:

- **Public speaking** skills.
- **Communication** skills.
- **Advocacy skills** through working with local, state and federal elected officials.
- **Media skills** in working with the newspapers, news stations, radio and more.
- About **corporate tobacco**, from their history to the present.
- About **advertising and marketing**, and how media impacts people's beliefs, attitudes and behaviors.
- Skills in **problem solving**.
- How to **plan** events, activities, and initiatives.
- **Creative** ways to advocate for a cause.
- How to mobilize others to **take action!**

Students in Reality Check will gain:

- A greater **understanding of community change**.
- **Self-confidence** and **self-awareness**.
- Awareness of the power of youth voice.
- Great opportunities that will build towards their future.
- Experience to put on resumes, scholarship applications, job applications, college applications, etc.
- Community exposure, recognition and **community service hours**.
- Opportunities to travel.

Students involved in Reality Check have a choice:

- We believe family and school is a priority and we know that schedules are busy.
- A student's involvement during events and presentations is according to his or her strengths and how comfortable he or she is with what they're doing.
- Students choose how involved they want to be in Reality Check.
- Students do not have to come to every meeting, event, or activity.
- All we ask is that the student communicates their schedule and potential conflicts with the adult support staff and with other members.

Division for Community Health
September 22, 2015 Board of Health Meeting

Karen Bishop, Director of Community Health
September 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 and reports and review work flow and system configuration set up.
 - Participated on weekly status conference calls with Core Solutions staff.
 - Roger Cotrofeld, from Information Technology Department created a number of forms in Core based on input from the TCHD software team.
 - Planning for a Go Live date of 10/01/15 with staff training on the software prior to that.
- Jeffrey Saeli, Administrative Coordinator began on August 17 and has participated in Core Solutions Software meetings and completed initial orientation to CHS programs and billing processes.
- Interviewed several candidates for the vacant Community Health Nurse position to date. No decision to hire has been made.
- Mentored Karen LaCelle, Community Health Nurse in Immunization Action Plan Grant activities.
- Met weekly with Cathy Sinnott, WIC Director to review program needs, staffing and budget.
- Interviewed several candidates for the vacant WIC Nutrition Educator II position. No decision to hire has been made.
- Provided update to local medical providers regarding the new NYS school immunization requirements effective 9/01/15.
- Co-Presented with Karen LaCelle to the Ithaca City School District nurses on 9/2 at their request regarding the new immunization requirements. The event was well attended and successfully answered many questions.
- Division statistical reports – see attached reports. Note preliminary stats in red.
- CD stat reports include both monthly and year to date (not annual).

August 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. We are currently interviewing to fill the position and hope to offer the position in the next few weeks.

Communicable Disease:

- **Salmonella:** 21 year old food handler diagnosed with Salmonella. GI symptoms have resolved but case continues to be restricted from work as a food handler as repeat stool specimens remain positive for Salmonella species. Case has received education and counseling. Environmental Health is coordinating with his employer on his behalf.

Tuberculosis: Active TB Disease: 25 year old foreign born college student with active pulmonary TB returned to Tompkins County at the end of August from out of state. 4 months of treatment has been completed to date and case is tolerating medications without problem and remains asymptomatic. 2 drug treatment regimen twice weekly initiated once case returned to Tompkins County. Staff is providing Directly Observed Therapy (DOT's) twice weekly. Plan is to complete 6 months of treatment.

Suspect TB Disease: 22 year old foreign born college student entering US in August. Patient had 1-2 month history of fever and productive cough and initially treated for pneumonia. Work-up from the college revealed a positive QFT, CXR with left lower lobe infiltrate and pleural effusion. CT of the chest included cavitation and airspace consolidation within the right lower lobe. Case was referred to TB consultant for follow up. Three sputa specimens sent to Wadsworth lab with results AFB (Acid Fast Bacillus) smear negative and PCR negative for MTB. Culture is pending. 4- drug treatment initiated at the end of August given clinical presentation and strong suspicion of active TB disease. Patient is currently isolated at home per protocol. Staff is providing daily DOT visits. Contact investigation has been initiated.

Latent TB Infection (LTBI): There were **17** Tuberculin Screening Tests (TST) placed during the month of August; there were no positive results.

N.Y.S. Department of Health
 Division of Epidemiology
 Communicable Disease Monthly Report*, DATE: 01SEP15
 Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS Month=August

Disease	2015		2014		2013		2012		Ave (2012-2014)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
AMEBIASIS	0	0.0	0	0.0	0	0.0	1	11.6	0	0.0
ANAPLASMOSIS**	0	0.0	0	0.0	1	11.6	0	0.0	0	0.0
BABESIOSIS**	0	0.0	1	11.6	0	0.0	0	0.0	0	0.0
CAMPYLOBACTERIOSIS**	3	34.7	0	0.0	2	23.2	2	23.2	1	11.6
CHIKUNGUNYA**	0	0.0	1	11.6	0	0.0	0	0.0	0	0.0
CRYPTOSPORIDIOSIS**	0	0.0	3	34.7	3	34.7	4	46.3	3	34.7
E.COLI 0157:H7	0	0.0	1	11.6	0	0.0	0	0.0	0	0.0
EHEC, SEROGROUP NON-O157	0	0.0	1	11.6	0	0.0	0	0.0	0	0.0
GIARDIASIS	1	11.6	6	69.5	0	0.0	2	23.2	3	34.7
HAEMOPHILUS INFLUENZAE, NOT TYPE B	1	11.6	0	0.0	0	0.0	0	0.0	0	0.0
HEPATITIS B,CHRONIC	2	23.2	2	23.2	0	0.0	1	11.6	1	11.6
HEPATITIS C,ACUTE	0	0.0	0	0.0	1	11.6	0	0.0	0	0.0
HEPATITIS C,CHRONIC	4	46.3	9	104.2	9	104.2	14	162.1	11	127.4
INFLUENZA A, LAB CONFIRMED	2	23.2	1	11.6	0	0.0	0	0.0	0	0.0
LEGIONELLOSIS	0	0.0	0	0.0	1	11.6	1	11.6	1	11.6
LYME DISEASE** ****	4	46.3	7	81.1	12	139.0	1	11.6	7	81.1
MALARIA	0	0.0	0	0.0	1	11.6	0	0.0	0	0.0
PERTUSSIS**	0	0.0	2	23.2	0	0.0	25	289.5	9	104.2
SALMONELLOSIS	1	11.6	1	11.6	1	11.6	2	23.2	1	11.6
SHIGELLOSIS	0	0.0	0	0.0	0	0.0	3	34.7	1	11.6
STREP,GROUP A INVASIVE	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	2	23.2	0	0.0	1	11.6
VIBRIO - NON 01 CHOLERA	0	0.0	0	0.0	0	0.0	1	11.6	0	0.0
YERSINIOSIS	0	0.0	1	11.6	0	0.0	1	11.6	1	11.6

Disease	2015		2014		2013		2012		Ave (2012-2014)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
SYPHILIS TOTAL.....	1	11.6	2	23.2	0	0.0	0	0.0	1	11.6
- P&S SYPHILIS	1	11.6	2	23.2	0	0.0	0	0.0	1	11.6
GONORRHEA TOTAL.....	3	34.7	3	34.7	2	23.2	3	34.7	3	34.7
- GONORRHEA	3	34.7	3	34.7	2	23.2	3	34.7	3	34.7
CHLAMYDIA	27	312.7	37	428.5	18	208.5	17	196.9	24	277.9

*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: 01SEP15
 Through August
 Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS

Disease	2015		2014		2013		2012		Ave (2012-2014)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
AMEBIASIS	0	0.0	1	1.4	1	1.4	1	1.4	1	1.4
ANAPLASMOSIS**	0	0.0	1	1.4	1	1.4	0	0.0	1	1.4
BABESIOSIS**	1	1.4	1	1.4	0	0.0	0	0.0	0	0.0
CAMPYLOBACTERIOSIS**	14	20.3	16	23.2	11	15.9	15	21.7	14	20.3
CHIKUNGUNYA**	0	0.0	1	1.4	0	0.0	0	0.0	0	0.0
CRYPTOSPORIDIOSIS**	2	2.9	10	14.5	10	14.5	8	11.6	9	13.0
E.COLI 0157:H7	1	1.4	1	1.4	0	0.0	0	0.0	0	0.0
EHEC, SEROGROUP NON-O157	5	7.2	3	4.3	3	4.3	0	0.0	2	2.9
EHRlichiosis (CHAFEENSIS)**	0	0.0	1	1.4	0	0.0	0	0.0	0	0.0
EHRlichiosis (UNDETERMINED)**	1	1.4	0	0.0	0	0.0	0	0.0	0	0.0
ENCEPHALITIS, OTHER	0	0.0	0	0.0	1	1.4	1	1.4	1	1.4
GIARDIASIS	5	7.2	18	26.1	4	5.8	14	20.3	12	17.4
HAEMOPHILUS INFLUENZAE, NOT TYPE B	3	4.3	0	0.0	0	0.0	1	1.4	0	0.0
HEPATITIS A	0	0.0	1	1.4	0	0.0	1	1.4	1	1.4
HEPATITIS B,CHRONIC	6	8.7	4	5.8	2	2.9	6	8.7	4	5.8
HEPATITIS C,ACUTE	1	1.4	3	4.3	1	1.4	3	4.3	2	2.9
HEPATITIS C,CHRONIC	63	91.2	67	97.0	49	70.9	56	81.1	57	82.5
HERPES INF, INFANT =< 60 DAYS	0	0.0	0	0.0	0	0.0	3	4.3	1	1.4
INFLUENZA A, LAB CONFIRMED	290	419.8	170	246.1	88	127.4	49	70.9	102	147.7
INFLUENZA B, LAB CONFIRMED	67	97.0	27	39.1	66	95.5	8	11.6	34	49.2
INFLUENZA UNSPECIFIED, LAB CONFIRMED	0	0.0	0	0.0	1	1.4	0	0.0	0	0.0
LEGIONELLOSIS	1	1.4	1	1.4	2	2.9	2	2.9	2	2.9

Disease	2015		2014		2013		2012		Ave (2012-2014)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
LISTERIOSIS	0	0.0	0	0.0	1	1.4	1	1.4	1	1.4
LYME DISEASE** ****	28	40.5	22	31.8	36	52.1	13	18.8	24	34.7
MALARIA	1	1.4	0	0.0	2	2.9	0	0.0	1	1.4
MENINGITIS, ASEPTIC	0	0.0	0	0.0	1	1.4	1	1.4	1	1.4
PERTUSSIS**	1	1.4	4	5.8	5	7.2	86	124.5	32	46.3
SALMONELLOSIS	8	11.6	5	7.2	14	20.3	12	17.4	10	14.5
SHIGELLOSIS	1	1.4	1	1.4	1	1.4	5	7.2	2	2.9
STREP, GROUP A INVASIVE	3	4.3	2	2.9	0	0.0	6	8.7	3	4.3
STREP, GROUP B INVASIVE	4	5.8	10	14.5	4	5.8	2	2.9	5	7.2
STREP, GROUP B INV, EARLY/LATE ONSET	0	0.0	1	1.4	1	1.4	1	1.4	1	1.4
STREP PNEUMONIAE, INVASIVE	2	2.9	3	4.3	6	8.7	0	0.0	3	4.3
TUBERCULOSIS***	1	1.4	3	4.3	1	1.4	3	4.3	2	2.9
TYPHOID FEVER	1	1.4	0	0.0	0	0.0	0	0.0	0	0.0
VIBRIO - NON 01 CHOLERA	1	1.4	0	0.0	0	0.0	1	1.4	0	0.0
WESTNILE VIRUS**	0	0.0	1	1.4	0	0.0	0	0.0	0	0.0
YERSINIOSIS	0	0.0	3	4.3	1	1.4	1	1.4	2	2.9
SYPHILIS TOTAL.....	4	5.8	7	10.1	1	1.4	3	4.3	4	5.8
- LATE LATENT	1	1.4	1	1.4	1	1.4	0	0.0	1	1.4
- P&S SYPHILIS	3	4.3	6	8.7	0	0.0	2	2.9	3	4.3
- EARLY LATENT	0	0.0	0	0.0	0	0.0	1	1.4	0	0.0
GONORRHEA TOTAL.....	41	59.4	20	29.0	19	27.5	20	29.0	20	29.0
- GONORRHEA	41	59.4	20	29.0	19	27.5	19	27.5	19	27.5
- GONORRHEA, DISSEMINATED	0	0.0	0	0.0	0	0.0	1	1.4	0	0.0
CHLAMYDIA	228	330.1	199	288.1	168	243.2	195	282.3	187	270.7

*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 Clinical Statistics	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	YTD 2015	Total 2014	Total 2013
Maternal Child / MOMS Services															
Client Caseload	174	168	168	165	167	162	171	153							
# of Client Admissions	33	26	28	31	27	31	28	25					229	321	354
# of Client Discharges	32	28	36	25	38	24	33	22					238	357	351
Maternal & Infant Clinic Visit	29	19	26	27	27	19	17	13					177	355	382
Maternal & Infant Home Visit	73	62	73	72	71	75	91	85					602	758	980
Total Home & Clinic Visits	167	135	163	155	163	149	169	145	0	0	0	0	1246	1113	1362

On-Call (Weekend) Nursing Visits to Patients															
Maternal & Infant On Call Visits	0	0	0	0	0	0	0	0					0	0	5
Rabies On Call Vaccinations	2	0	0	0	4	2	1	14					23	37	30
TB DOT On Call Visits	0	0	0	4	0	0	0	0					4	11	3
Total # On-Call Visits	2	0	0	4	4	2	1	14	0	0	0	0	27	48	38

Total Home, Clinic, On-Call Visits	169	135	163	159	167	151	170	159	0	0	0	0	1273	1161	1400
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Childbirth Education															
# of Childbirth Education Classes	1	2	1	0	3	0	0	0					7	16	15
# of Childbirth Education Moms*	10	5	4	0	6	0	0	0					25	54	49

Telephone Contact Log by Call Purpose (CHS Staff)															
Communicable Disease (including STD, HIV, Rabies and TB)	59	132	135	112	306	147	147	192					1230	593	1934
Immunization Appointments	45	78	90	89	113	81	81	86					663	381	1853
Maternal Child / Family / MOMS	251	437	302	218	142	164	203	348					2065	1729	3520
Miscellaneous	25	56	56	67	54	51	72	62					443	249	543
Total Calls	380	703	583	486	615	443	503	688	0	0	0	0	4401	2952	7850

* CBE Total is duplicated count

DOT = Direct Observe Therapy Visits

MOMS = Medicaid Obstetrical and Maternal Services

Shaded areas indicate revisions from the previous report

Community Health Services Clinical Statistics	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	YTD 2015	Total 2014	Total 2013
Immunizations (Reported to NYSIIS, Updates May Be Pending)															
# of Immunization Clients	27	13	18	25	20	54	36	86					279	319	272
# of Immunizations Administered	43	24	24	45	33	69	51	**52					289	534	434
Children 0 - 19 yrs.	34	14	15	34	17	36	30	17					197	423	321
Adults 20 yrs. & over	8	10	9	11	16	33	21	35					143	111	113
# of Influenza Immunizations	7	4	1	2	0	0	0	0					14	917	971
Rabies Vaccination Program (Internal Data, Reporting to NYSIIS May Be Ongoing)															
Post-Exposure Clients	5	8	4	2	7	16	4	40					86	106	91
Post-Exposure Clinic Vaccinations	8	9	4	2	13	44	8	116					204	267	210
Tuberculosis Program															
Cumulative TB clients	0	0	0	1	0	0	0	0					1	4	3
Active TB Admissions	0	0	0	1	0	0	0	0					1	4	1
Active TB Discharges	1	0	2	0	0	0	0	0					3	2	3
TB Direct Observe Therapy Home Visits	75	54	56	29	15	0	0	2					231	269	251
# of Tuberculosis Screening Tests*	6	10	9	6	17	37	15	17					117	421	532
Anonymous HIV Counseling & Testing Clinics															
# of HIV Clinics - including Walk-Ins	10	10	10	7	9	9	6	10					71	99	71
# of Clients Counseled & Tested	7	11	14	6	9	8	3	7					65	96	84
HIV Positive Eliza & Western Bloc	0	0	0	0	0	0	0	0					0	0	0
Women, Infants, Children Clinic															
Monthly New Enrollments	66	51	64	49	64	46	46	58					444	430	UA
Total Participants Served	560	504	547	516	493	555	555	547					4277	4889	UA
Participants w/Active Checks	1331	1333	1373	1331	1338	1325	1325	1341					10697	1386	1507
Total Enrolled (summary is an Average)	1557	1547	1585	1561	1562	1562	1562	1557					1562	1689	1797
% No-Show	14.5%	13.8%	13.4%	14.7%	14.3%	15.2%	15.2%	13.9%						18.3%	15.3%
% Active Participation	66.6%	66.7%	68.7%	66.6%	66.9%	66.8%	66.3%	67.1%						69.3%	75.6%
% Caseload Target (FY15 Target = 2000)	77.9%	77.4%	79.3%	78.1%	78.1%	78.1%	78.1%	77.9%						84.4%	UA

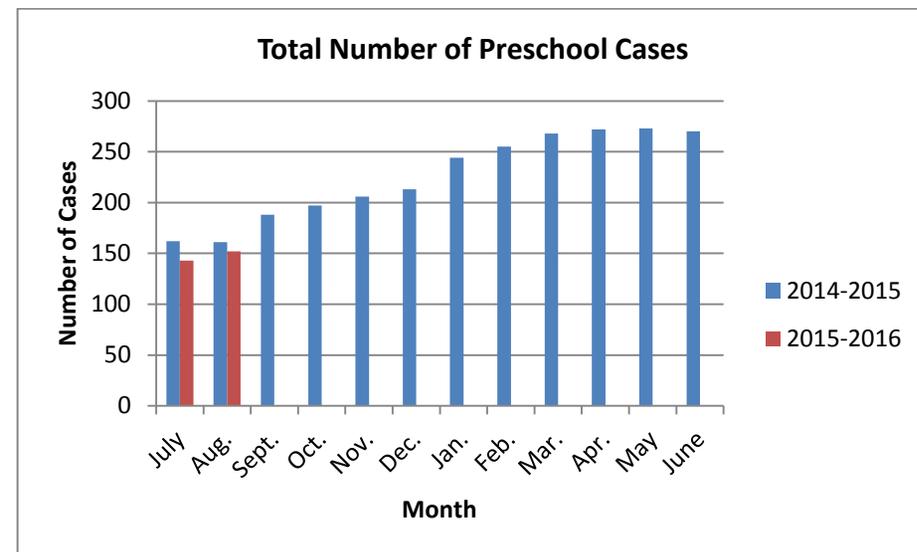
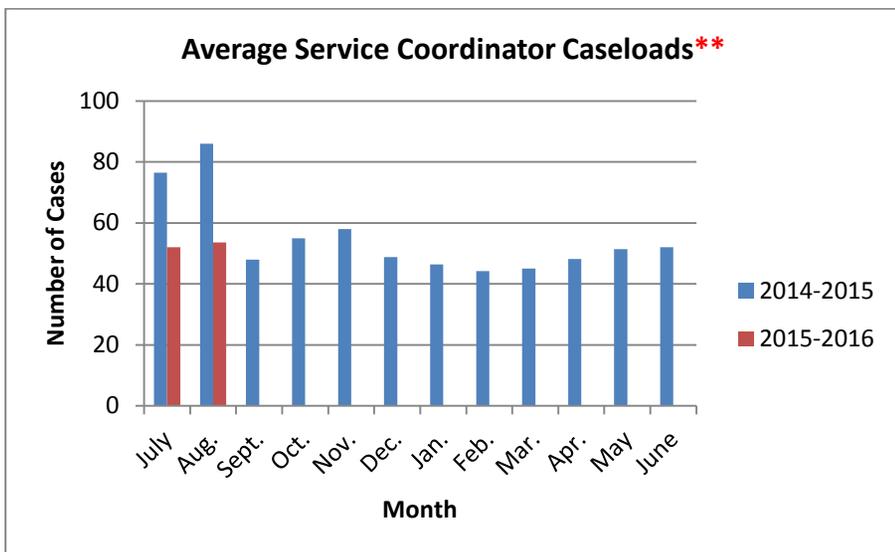
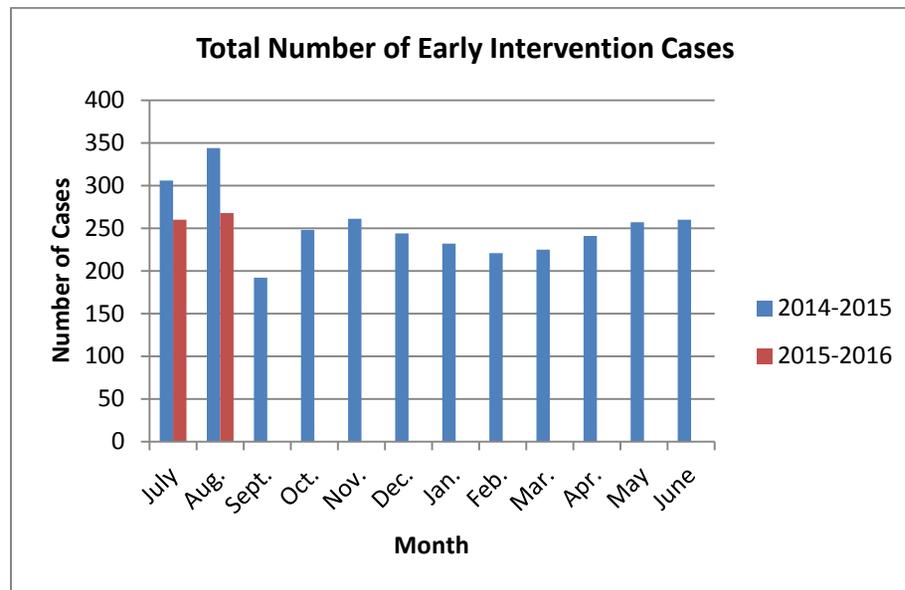
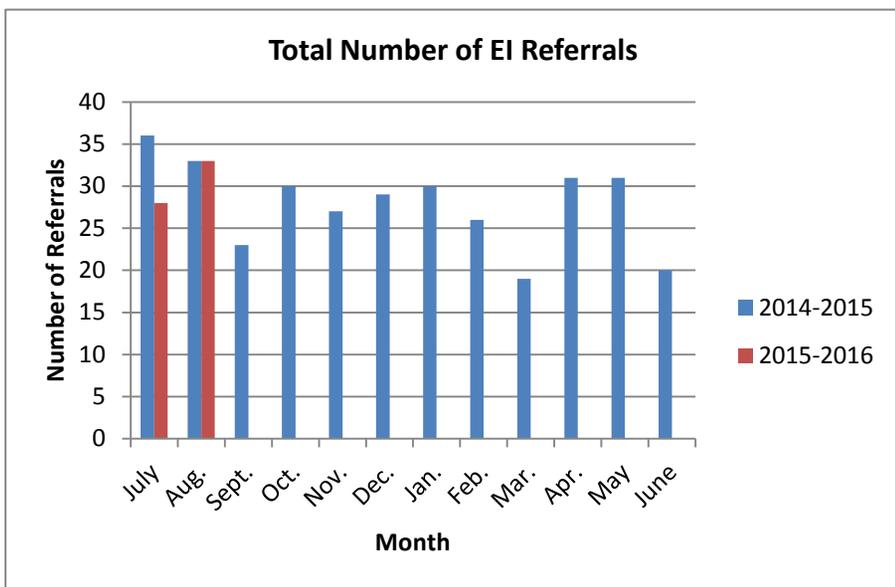
123 Red numbers indicate preliminary data; subject to revision

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

** # of Immunizations administered understates actual activity; Rabies activity updates to NYSIIS pending

UA = Unavailable at this time

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	5					17	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	1					10	14
-- Gross Motor	7	2	4	5	4	2	5	11					40	73
-- Gross Motor & Feeding								1					1	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	15					106	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	33	0	0	0	0	218	340

Caseloads														
Total # of clients qualified and receiving svcs	189	193	195	210	228	230	231	225						
Total # of clients pending intake/qualification	43	28	30	31	29	30	29	43						
Total # qualified and pending	232	221	225	241	257	260	260	268	0	0	0	0		
Average # of Cases per Service Coordinator	46.4	44.2	45	48.2	51.4	52	52	53.6	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	25					191	285
-- IFSP Meetings	49	44	54	36	56	51	40	26					356	545
-- Amendments	20	12	15	12	19	16	15	12					121	170
-- Core Evaluations	34	29	25	22	13	24	22	15					184	248
-- Supplemental Evaluations	0	5	10	5	6	4	7	8					45	50
-- DSS Visit	2	0	3	4	1	0	0	15					25	2
-- EIOD visits	5	8	8	10	9	2	3	7					52	27
-- Observation Visits	4	14	23	21	18	26	38	42					186	299
-- CPSE meetings	1	3	8	2	7	11	8	10					50	91
-- Program Visit	0	0	3	2	1	1	0	0					7	9
-- Family Training/Team Meetings	0	1	3	0	0	1	0	1					6	9
-- Transition meetings	15	16	9	5	5	6	13	4					73	122
-- Other Visits	0	0	5	1	0	3	5	2					16	25
IFSPs and Amendments														
# of Individualized Family Service Plans Completed	49	44	54	36	56	51	40	26					356	535
# of Amendments to IFSPs Completed	23	15	17	20	21	21	20	16					153	233

Services and Evaluations Pending & Completed														
Children with Services Pending														
-- Assistive Tech	0	0	0	0	0	0	0	0						
-- Audiological	0	0	0	2	0	0	0	0						
-- Feeding	0	0	0	0	0	0	0	0						
-- Group Developmental Intervention	0	0	0	0	0	0	0	0						
-- Nutrition	0	0	0	0	0	0	0	0						
-- Occupational Therapy	1	2	0	5	5	0	0	4						
-- Physical Therapy	0	0	0	0	2	0	0	0						
-- Social Work	1	2	0	1	1	1	0	0						
-- Special Education	1	0	0	0	0	0	1	0						
-- Speech Therapy	1	3	2	5	2	0	0	0						
# of Evaluations Pending	8	9	7	8	8	17	6	10	0	0	0	0		
Type:														
-- Diagnostic Psychological	4	5	0	2	1	2	1	1						
-- Developmental Pediatrician	0	0	2	1	1	1	1	1						
-- Other	0	0	0	0	0	0	0	0						
-- Supplemental Evaluations	4	4	5	5	6	14	4	8	0	0	0	0		
Type:														
-- Audiological	0	0	1	1	4	5	0	0						
-- Auditory Brain Response (ABR)	0	0	0	0	0	0	0	0						
-- Feeding	0	0	0	0	0	0	0	0						
-- Physical Management Clinic	0	0	0	0	0	0	0	0						
-- Physical Therapy	2	1	0	0	1	1	0	1						
-- Speech	0	2	1	0	0	3	1	2						
-- Occupational Therapy	1	1	3	4	1	5	3	5						
-- Psychological	0	0	0	0	0	0	0	0						
-- Vision	1	0	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	11	0	0	0	0	67	83
Type:														
-- Diagnostic Psychological	0	1	0	2	1	2	0	1					7	6
-- Developmental Pediatrician	0	0	2	0	0	0	0	0					2	1
-- Other	0	0	0	0	0	0	0	0					0	0
-- Supplemental Evaluations	8	5	10	5	6	5	9	10	0	0	0	0	58	76
Type:														
-- Audio	3	1	1	0	0	2	1	1					9	9
-- Feeding	1	0	1	0	1	0	1	0					4	2
-- Occupational Therapy	2	3	3	3	4	2	4	5					26	30
-- Physical Management Clinic	0	0	0	0	0	0	0	0					0	0
-- Physical Therapy	1	1	2	0	1	0	1	1					7	11
-- Psychological	0	0	0	0	0	0	0	0					0	0
-- Social Emotional	0	0	0	0	0	0	0	0					0	0
-- Speech Therapy	1	0	3	2	0	1	2	3					12	23
-- Vision	0	0	0	0	0	0	0	0					0	0
Diagnosed Conditions														
Autism Spectrum														
-- Children currently diagnosed:	4	4	5	7	8	9	10	10						
-- Children currently suspect:	2	11	9	10	15	15	16	18						
Children with 'Other' Diagnosis														
-- Agenesis Corpus Collosum	1	1	1	1	1	1	1	1						
-- Bells Palsy	1	1	1	1	0	0	0	0						
-- Bronchopulmonary Displasia (BPD)	1	2	2	3	2	2	2	2						
-- Cardiac Anomaly	0	1	1	1	1	0	1	0						
-- Cerebral Palsy (CP)	2	3	2	2	2	2	3	2						
-- Chromosome 8 Abnormality	0	0	0	0	1	0	1	1						
-- Chromosome 18Q Deletion	0	0	0	0	0	0	1	1						
-- Chromosome 22Q Deletion	1	1	1	1	1	1	1	1						
-- Cleft Lip/Palate	2	2	2	1	1	1	2	2						
-- Crouzon Syndrome	1	1	1	1	1	1	1	1						
-- Down Syndrome	1	0	1	1	1	1	2	2						
-- Failure to Thrive	0	0	0	0	1	1	1	1						
-- Feeding Difficulties	0	2	0	0	1	0	2	1						
-- Hydrocephalus	0	1	1	0	0	0	0	1						
-- Hydronephrosis	1	1	1	1	1	0	1	1						
-- Hypotonia	0	0	1	1	1	1	2	0						
-- Macrocephaly	1	1	1	1	1	1	1	1						
-- Macroglossia	0	0	0	1	1	1	1	1						
-- Meningocele	0	0	0	0	1	0	0	0						
-- Microcephaly	1	1	1	1	1	1	1	1						
-- Optic Nerve Hypoplasia	0	0	0	0	1	1	1	1						
-- Pierre Robin Syndrome	1	1	1	1	1	1	1	0						
-- Plagiocephaly	2	2	3	2	2	2	2	1						
-- Prematurity	8	8	8	8	9	6	14	14						
-- Prematurity (Micro)	3	2	4	4	2	2	3	2						

**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	4						
-- Spina Bifida	0	0	0	0	0	0	0	1						
-- Torticollis	6	6	5	6	5	5	3	3						
Early Intervention Discharges														
-- To CPSE	10	0	1	0	0	1	4	1					17	79
-- Aged out	1	1	2	3	1	0	0	2					10	2
-- Declined	1	2	3	0	0	3	2	2					13	19
-- Skilled out	7	1	3	4	4	8	4	3					34	36
-- Moved	5	4	4	1	0	3	4	3					24	24
-- Not Eligible	13	13	8	2	6	7	4	11					64	71
-- Other	3	5	0	0	0	0	0	0					8	17
Total Number of Discharges	40	26	21	10	11	22	18	22	0	0	0	0	170	245
Child Find														
Total # of Referrals	2	1	2	0	0	1	0	0					6	19
Total # of Children in Child Find	13	15	17	17	17	17	10	10						
Initial Consents Sent	0	1	0	0	2	1	0	0					4	10
Initial Consents Resent	0	0	0	0	0	0	0	0					0	0
Consents Returned	0	0	0	0	1	0	0	0					1	3
ASQs Sent	0	10	6	3	2	3	4	0					28	43
ASQs Returned	0	3	3	0	2	0	5	0					13	42
MD Letters sent with ASQ Results													0	0
Total # Transferred to Early Intervention							0	1					1	5
Total # of Discharges							4	0					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	87						
-- Dryden	22	21	21	20	21	22	14	18						
-- Lansing	21	24	27	28	28	28	8	9						
-- Newfield	24	25	26	26	27	27	15	15						
-- Groton	27	27	30	31	31	31	16	15						
-- Trumansburg	13	13	13	11	11	11	5	5						
-- Spencer VanEtten	0	0	1	1	1	1	0	0						
-- Newark Valley	1	1	1	1	1	1	0	1						
-- Odessa-Montour	0	1	1	1	1	1	1	1						
-- Candor	1	1	1	1	1	1	0	1						
-- Moravia	0	0	0	0	0	0	0	0						
-- Cortland	0	0	0	0	0	0	0	0						
Total # of Qualified and Receiving Services	244	255	268	272	273	270	143	152	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	60						
-- Speech Therapy (group)	2	6	6	6	6	6	1	1						
-- Occupational Therapy (individual)	47	53	54	55	57	62	29	30						
-- Occupational Therapy (group)	2	3	3	3	3	3	0	0						
-- Physical Therapy (individual)	30	31	32	33	32	33	11	11						
-- Physical Therapy (group)	0	0	0	0	0	0	0	0						
-- Transportation														
-- Birnie Bus	24	22	25	24	24	24	18	20						
-- Ithaca City School District	35	35	37	37	37	35	31	32						
-- Parent	1	2	2	2	2	3	4	3						
-- Service Coordination	27	28	30	33	33	34	7	7						
-- Counseling	45	48	49	56	51	50	29	31						
-- 1:1 (Tuition Program) Aide	6	6	6	6	6	6	2	4						
-- Special Education Itinerate Teacher	24	27	29	28	27	25	14	14						
-- Parent Counseling	21	21	22	24	23	22	6	9						
-- Program Aide	2	3	0	3	4	5	2	2						
-- Teaching Assistant	3	3	3	3	3	4	3	3						
-- Psychological Services	0	0	0	0	0	0	0	0						
-- ASL Interpreter	0	0	0	0	0	0	0	0						
-- Audiological Services	0	0	0	0	0	0	0	0						
-- Teacher of the Deaf	1	1	1	1	1	1	0	0						
-- Auditory Verbal Therapy	0	0	0	0	0	0	0	0						
-- Teacher of the Visually Impaired	0	0	0	0	0	0	0	0						
-- Nutrition	4	4	4	4	4	4	0	0						
-- Assistive Technology Services	1	2	1	0	0	1	0	0						
-- Skilled Nursing	1	1	1	1	1	1	0	0						
-- Vision	1	1	1	0	0	0	0	0						
Total # of children rcvg. home based related svcs.	183	192	203	209	210	208	90	94						

**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	37						
-- Dryden	8	8	7	6	6	6	4	6						
-- Groton	1	1	6	2	2	2	3	3						
-- Lansing	4	5	6	5	5	5	2	2						
-- Newfield	6	6	2	6	7	7	7	7						
-- Trumansburg	6	6	6	5	5	5	3	3						
-- Odessa-Montour	0	0	0	0	0	0	0	0						
-- Spencer VanEtten	0	0	0	0	0	0	0	0						
-- Moravia	0	0	0	0	0	0	0	0						
-- # attending Franziska Racker Centers	32	34	34	31	31	31	25	28						
-- # attending Ithaca City School District	29	29	31	32	32	31	28	30						
Total # attending Special Ed Integrated Tuition Progr.	61	63	65	63	63	62	53	58	0	0	0	0		

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

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

Ph: (607) 274-6688
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ENVIRONMENTAL HEALTH HIGHLIGHTS

August 2015

Outreach and Division News

Legionella: NYC is recovering from an outbreak of Legionnaires' Disease in the South Bronx. Over one hundred individuals contracted the disease, resulting in multiple deaths. Subsequently, on August 17, Governor Cuomo enacted emergency regulations for *Protection Against Legionella*. A common source of Legionella is cooling towers. The emergency regulations require cooling towers to register with NYSDOH within 30 days, collect samples, and have a maintenance program. Steve Maybee and/or Liz Cameron participated in conference calls on the issue on August 7, 11, 18, 20 and 25. An Environmental Health and Medicine class at Ithaca College is helping us with the identification of potentially affected facilities and outreach.

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. The timing for treatments is based on plant growth. Treatment with endothall, a contact herbicide, began in the Inlet on August 18. The Inlet was closed for one day during the application. Treatment in Fall Creek began on August 25. Water quality monitoring is conducted weekly in the treatment area and surroundings, as well as at the SCLIWC (Bolton Point) raw water intake.

Nate's Floral Estates Mobile Home Park: Liz Cameron and Steve Maybee met with Ithaca City Alderperson Cynthia Brock and Walter Hang on August 13. Cynthia and Walter presented information and expressed continued concern about subsurface conditions. Liz Cameron and Steve Maybee met on-site with representatives from the New York State Department of Environmental (NYSDEC) on August 18. Cynthia and Walter had previously met with NYSDEC. They are currently reviewing information on the park.

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)."* In a call on a separate issue in August, NYSDOH stated that they are now on the same page that we are and counties with sewage system permitting programs will not be treated differently than other counties. NYSDOH also indicated that local health departments will have a chance to review draft guidance on the topic. We are hopeful that this issue has been resolved.

Personnel Changes: Multiple interviews for two Public Health Sanitarian vacancies were conducted during August. Congratulations to René Borgella and Joel Scogin, our new Public Health Sanitarians. René started work on August 31 and will be focusing on the ATUPA (Adolescent Tobacco Use Prevention Act), Temporary Food and Food Service programs. Joel's first day will be September 14. Thank you to the members of the EH Selection Committee – Clayton Maybee, Anne Wildman, Cyndy Howe, Kristee

Morgan, and Adriel Shea. Having their different inputs and viewpoints helped tremendously in the selection process.

Unfortunately for us, the Healthy Neighborhoods Program (HNP) is losing another Project Assistant Danielle Prince. Danielle has accepted a full-time position at Tompkins Community Action. Danielle's last day is September 20th. The HNP team is reviewing options and applicants.

Training

Liz Cameron participated in the EPA webinar on *Distribution Operation Options for Small Systems to Address Disinfection Byproducts (DBPs)* on August 18 from 2-3.

Rabies Control Program

There were four confirmed cases of rabies in Tompkins County during August of 2015. Four bats were captured and submitted to the NYS Wadsworth Laboratory for testing where the presence of rabies was indicated. Fortunately, three of the four rabid bats had no known exposures. However, one of the rabid bats was found in a room where two people were sleeping. Both of these people initiated rabies post-exposure prophylaxis due to potential exposure to the rabid bat.

Key Data Overview				
	This Month	YTD 2015	YTD 2014	TOTAL 2014
Bites¹	30	122	111	167
Non Bites²	45	69	74	86
Referrals to Other Counties	1	16	27	43
Submissions to the Rabies Lab	68	182	150	190
Human Post-Ex Treatments	47	85	87	103
Unvaccinated Pets 6-Month Quarantined³	0	2	0	0
Unvaccinated Pets Destroyed⁴	0	1	0	0
Rabid Animals (Laboratory Confirmed)	4	9	6	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	13	56	41	58	3	0	3	10	0	0	0	0
Dog	12	91	59	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	0	0	2	0	0	0	0
Sheep/Goat	0	0	0	0	0	0	0	0	0	0	0	0
Domestic	0	2	0	0	0	0	0	1	0	0	0	0
Raccoon	0	1	1	1	0	1	1	5	0	2	1	3
Bats	0	2	4	6	59	3	62	145	4	5	2	5
Skunks	0	0	1	2	0	0	0	0	0	0	2	3
Foxes	0	0	0	0	0	0	0	3	0	1	0	0
Other Wild	2	2	4	5	0	2	2	8	0	1	1	1
Totals	27	154	111	167	62	6	68	182	0	9	6	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:

- | | |
|---|--|
| Borg Warner Building #2, T-Lansing | Metzgar Smoke Shack BBQ, T-Groton |
| Butch's Bar-B-Q, Throughout Tompkins | The Nines, C-Ithaca |
| Casablanca Mediterranean Cuisine, C-Ithaca | NY Garden, V-Groton |
| Country Club of Ithaca Snack Shack, T-Ithaca | Rodeway Inn & Suites, T-Ithaca |
| Dryden Queen Diner, V-Dryden | Stella's Barn Restaurant and Gift Shoppe, T-Newfield |
| First Presbyterian Church in Ithaca, C-Ithaca | TC Action-Casey Center, V-Dryden |
| Lansing Pizzeria, T-Lansing | TC Action-Groton, V-Groton |
| Lincoln Street Diner, C-Ithaca | Tokyo Hibachi, Sushi & Asian Bistro, C-Ithaca |
| McGraw House, C-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 HAACP 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:

4-H Acres, T-Dryden
 Collegetown Bagels-Aurora St., C-Ithaca
 Corner Store, C-Ithaca
 Lian Hua, C-Ithaca
 Macro Mama, Throughout Tompkins

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:**Mama Teresa Pizzeria, 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 two refrigerated storage units were observed to be at 54-67°F and 52-62°F respectively. The products were either discarded or moved to functioning refrigeration to be chilled to 45°F or less during the inspection.

Panera Bread Bakery & Café #1381, C-Ithaca

Potentially hazardous foods were not kept at or below 45°F during cold holding. Product in a refrigerated storage unit was observed to be at 50°F. The product was discarded during the inspection.

Silver Line Tap Room, V-Trumansburg

Cooked or raw foods were subjected to cross-contamination from raw foods. Storage was rearranged during the inspection.

Dryden Community Center Café, V-Dryden

Potentially hazardous foods were not kept at or below 45°F during cold holding. Products in a cooler were observed to be at 50 and 51°F. The products were rapidly chilled to 45°F or less before use.

Napoli Pizzeria, C-Ithaca

Enough refrigerated storage was not maintained so that potentially hazardous foods were stored below 45°F. Products that had been stored in a non-functioning refrigeration unit and subsequently moved to a working unit were observed to be at 65-69°F. The products were discarded during the inspection.

Temporary Food Service Operation Permits are issued for single events at one location. The Food Protection Program issued 50 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:

Acapulco Mexican Grill, T-Ulysses
 Al's Concessions, T-Ulysses
 American Legion Post 770, T-Ulysses
 AnnLee Concessions, T-Ulysses
 Coleman French Fries, T-Ulysses
 Coleman Fried Dough, T-Ulysses
 Coleman Oreo/Funnel Cake, T-Ulysses

Dusenberry Sportsman's Club, V-Dryden
 Fowler's Taffy, T-Ulysses
 Grainful, T-Ulysses
 Jerry's Lunch Concessions, T-Ulysses
 Ladder 46 Food Command, T-Ulysses
 Oakes Pizza, T-Ulysses
 Oakes Popcorn, T-Ulysses

Oakes Soft Serve, T-Ulysses
 Santillo Catering, T-Ulysses
 Santillo Concessions, LLC, T-Ulysses

Wegman's Food Markets, T-Ulysses

Critical Violations were found at the following establishments:

No critical violations were observed at temporary food service operations.

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:

Dos Amigos, Throughout Tompkins
 IC-Sandella's Café, T-Ithaca

Plans Approved:

Scooby Steve's, T-Danby

New Permits Issued:

Salt of the Earth, Throughout Tompkins
 Scooby Steve's, T-Danby
 Spring Buffet, C-Ithaca
 Subway-Commons, C-Ithaca
 The Westy, C-Ithaca

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

Engineering Plans Approved

- Beck Farms Worker Housing, 600 GPD Sewage System, Dryden-T
- 429 Lansing Station Road, 220 GPD Replacement Sewage System, Lansing-T
- 172 Breed Road, 220 GPD Sewage System, Lansing-T
- Scooby Steve's Ice Cream Shop, New Non Community PWS, Danby-T

Problem Alerts/Emergency Responses

None

Healthy Neighborhoods Program

HEALTHY NEIGHBORHOODS PROGRAM	MONTH	YTD 2015	YTD 2014	Total 2014*
# of Initial Home Visits	51	268	187	426
# of Revisits	5	98	58	98
# of Asthma Homes (initial)	8	46	31	67
# of Homes Approached	24	358	392	2034

*Covers the calendar year (January through December)

Outreach

- On August 1, Jasmin conducted outreach at the Southside Community Center Food Pantry (20 reached).
- On August 4, Samantha provided materials at the Tompkins County table for National Night Out at Conway Park in the City of Ithaca (50 reached).
- On August 6, Jasmin conducted outreach at the Overlook Apartments Mobile Food Bank of the Southern Tier (50 reached, 23 visits).
- On August 15, Pat tabled at the Groton Olde Home Days (50 reached, 3 visits).
- On August 20, Pat provided information at the DSS Healthy Living Class in the Court House (35 reached, 6 visits). Pat also provided flyers to the Women's Opportunity Center.
- On August 24, Samantha attended the INHS Home Inspection Class and provided flyers and an overview of the program (10 reached).
- On August 25, Samantha conducted outreach at the Hasbrouk apartments welcome event (20 reached, 2 visits).

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	5	5
B: Total Environmental Inspections:				
B1: Due to A1	0	0	2	3
B2: Due to A2	0	2	5	8
C: Hazards Found:				
C1: Due to B1	0	0	0	0
C2: Due to B2	0	2	5	6
D: Abatements Completed:	0	1	0	0
E: Environmental Lead Assessment Sent:	0	1	4	5
F: Interim Controls Completed:	0	0	2	3
G: Complaints/Service Requests (w/o medical referral):	6	40	37	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	5	6
- Dust Wipes	0	2	4	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
6/23/15	Jin Wu	Xiang Lan Liang	Repeat Critical Violations	\$400	Penalty Payment due 8/15/15.	Facility Closed – 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 – Awaiting Payment
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.

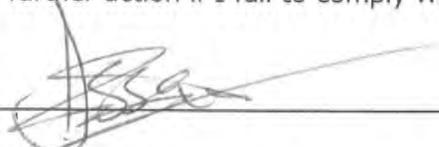
I agree to pay a penalty not to exceed \$400 for these violations following adoption of a resolution by the Board of Health. (**Do not** submit penalty payment until notified by the Tompkins County Health Department.)

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
www.tompkinscountyny.gov/health/eh

Ph: (607) 274-6688
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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 checked & tightened seal Service Fittings - Replaced caps. to Cont cool 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			



Frank Kruppa
Public Health Director
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CERTIFIED, REGULAR, & ELECTRONIC MAIL

September 9, 2015

Lissa Farrell
Fingerlakes GrassRoots Festival
PO Box 941
Trumansburg, NY 14886

**Re: Tompkins County Board of Health Draft Resolution # ENF-15-0019
GrassRoots World Café, Temporary Food Service, GrassRoots Festival, T-Ulysses**

Dear Ms. Farrell:

Thank you for signing the Stipulation Agreement on September 3, 2015, for the GrassRoots World Café.

Enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, September 22, 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, and Case Summary

pc: F:\EH\FOOD (SF)\TEMP FSE (STF)\Facilities\GrassRoots World Cafe\Draft Resolution 15-0019.docx
ec: Tompkins County Board of Health (via; Shelley Comisi, TCHD)
JennyLynn Finnan, Manager of GrassRoots World Café; Supervisor T-Ulysses; James Dennis, TC Legislature; TCHD:
Elizabeth Cameron, P.E., Director of Environmental Health; Frank Kruppa, Public Health Director; Anne Wildman;
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-15-0019 FOR

**GrassRoots World Café
Fingerlakes GrassRoots Festival, Owner/Operator
Trumansburg Road, T-Ulysses
Trumansburg, NY 14886**

Whereas, it is a violation of Part 14-2 of New York State Sanitary Code (NYSSC) to store potentially hazardous foods at improper temperatures; **and**

Whereas, on July 17, 2015, while operating at the Finger Lakes Grassroots Festival, the Tompkins County Health Department (TCHD) observed a critical violation which included potentially hazardous foods stored at improper temperatures between 45°F and 140°F. A large bowl of cooked pasta was observed stored in walk-in cooler at a temperature of approximately 56°F; **and**

Whereas, on July 18, 2015, while operating at the Finger Lakes Grassroots Festival, the TCHD observed a critical violation which included potentially hazardous foods at improper temperatures between 45°F and 140°F. Approximately five pans of cooked pasta, two pans of cooked rice and pasta salad and 50 pounds of soft cheese were observed at temperatures between 51°F and 58°F; **and**

Whereas, Lissa Farrell, a representative of Fingerlakes GrassRoots Festival, signed a Stipulation Agreement with Public Health Director's Orders on September 3, 2015, agreeing that GrassRoots World Café 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 Lissa Farrell, Operator, is ordered to:**

1. Pay a penalty of \$400 for these violations, due **November 13, 2015**. (**Do Not** submit penalty payment until notified by the Tompkins County Health Department.); **and**
2. Provide an adequate amount of refrigerated storage to maintain Potentially Hazardous Food at or below 45°F at all times during cold storage; **and**
3. Monitor refrigerated storage temperatures on a log sheet twice a day during operation. The temperature log shall contain the name of the storage unit checked, the temperature of the storage unit, the person's initials taking the temperatures, and the time the temperature is taken. The temperature logs shall be available at all times; **and**
4. Maintain all potentially hazardous food temperatures at or below 45°F or at or above 140°F at all times during hot holding, cold holding, and storage and comply with all the requirements of Subpart 14-2 of the NYSSC.

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

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

STIPULATION AGREEMENT AND ORDERS # ENF-15-0019

**GrassRoots World Café
Fingerlakes GrassRoots Festival, Owner/Operator
Trumansburg Road, T-Ulysses
Trumansburg, NY 14886**

I, Lissa Farrell, as a representative for Fingerlakes GrassRoots Festival, agree that on July 17 and 18, 2015, GrassRoots World Café was in violation of Subpart 14-2 of the New York State Sanitary Code.

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. Provide an adequate amount of refrigerated storage to maintain Potentially Hazardous Food at or below 45°F at all times during cold storage; **and**
2. Monitor refrigerated storage temperatures on a log sheet twice a day during operation. The temperature log shall contain the name of the storage unit checked, the temperature of the storage unit, the person's initials taking the temperatures, and the time the temperature is taken. The temperature logs shall be available at all times; **and**
3. Maintain all potentially hazardous food temperatures at or below 45°F or at or above 140°F at all times during hot holding, cold holding, and storage and comply with all the requirements of Subpart 14-2 of the NYSSC;.

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: Lissa Farrell Date: 9/8/15

Lissa Farrell is hereby ordered to comply with these Orders of the Public Health Director.

Signed: Karen Bishop for Frank Kruppa Date: 9-3-15
Frank Kruppa
Public Health Director

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

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

CASE SUMMARY – FOR RESOLUTION # ENF-15-0019

**GrassRoots World Café
Fingerlakes GrassRoots Festival, Owner/Operator
Trumansburg Road, T-Ulysses
Trumansburg, NY 14886**

Compiled September 2015

Date	Action
9/3/15	Meeting held with GrassRoots Festival operator and TCHD staff. Stipulation agreement signed.
7/18/15	Re-Inspection at GrassRoots Festival: Potential hazardous food observed stored at improper temperatures between 45°F and 140°F. Five pans of cooked pasta, two pans of cooked rice and pasta salad and 50 pounds of soft cheese were observed at temperatures between 51°F and 58°F.
7/17/15	Inspection at GrassRoots Festival: Potential hazardous food observed stored at improper temperatures between 45°F and 140°F. A large bowl of pasta was observed in walk-in cooler at a temperature of 56°F.
7/16-7/19/15	Permit to operate issued for GrassRoots World Café at GrassRoots Festival