TOMPKINS COUNTY HEALTH DEPARTMENT
Your Partner for a Healthy Community

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

AGENDA
Tompkins County Board of Health
Rice Conference Room
Tuesday, April 26, 2016
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 March 22, 2016 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*** *(15 mins.)*
Enforcement Action:

1. Resolution #ENF-16-0004 – Japan-U.S. Association, C-Ithaca, Violation of Subpart 14-2 of the New York State Sanitary Code (Temporary Food) (5 mins.)
2. Resolution #ENF-16-0005 – Pete's Grocery & Deli, C-Ithaca, Violation of Adolescent Tobacco Use Prevention Act (ATUPA) (5 mins.)
3. Resolution #ENF-16-0006 – Country Inn & Suites, T-Ithaca, Violations of Subparts 7-1 and 14-1 of the New York State Sanitary Code (Food) (5 mins.)

12:45 ***Adjournment***

DRAFT

Tompkins County Board of Health
March 22, 2016
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.; Susan Merkel; and Janet Morgan, PhD

Staff: Karen Bishop, Director of Community Health; Liz Cameron, Director of Environmental Health; Brenda Grinnell Crosby, Public Health Administrator; Frank Kruppa, Public Health Director; Deb Thomas, Senior Community Health Nurse in CSCN; Jonathan Wood, County Attorney; and Shelley Comisi, Keyboard Specialist

Excused: Sylvia Allinger, Director of CSCN; and William Klepack, MD, Medical Director

Guests: Theresa Lyczko, Director of Health Promotion Program

Call to Order: Dr. Macmillan called the regular meeting of the Board of Health (BOH) to order at 12:00 p.m.

Privilege of the Floor: No one was present for Privilege of the Floor.

Approval of February 23, 2016 Minutes: Mr. Burbank moved to approve the minutes of the February 23, 2016 meeting as written; seconded by Dr. Morgan. The minutes carried with Ms. Merkel abstaining.

Financial Summary: Ms. Grinnell Crosby referred to the December 2015 financial summary in the packet. She directed attention to her notes for three program areas with revenues in the red:

- Women, Infants and Children – Cost-of-Living Adjustment (COLA) revenues have not been posted for 2015 as of this report.
- Divisions for Community Health – Change in staffing and problems with billing processes have occurred over the last year.
- Physically Handicapped Children – There are fewer cases than in previous years.

Due to problems with the current dashboard, she is in preliminary discussions with Information Technology Services (ITS) and County Administration to look at a new one. Staff continues to work with the County to address some minor items before the books are closed for 2015. In addition, both groups are working to make adjustments in the salary and fringe lines for 2016. The budget was created with 2014 salaries and a projected fringe rate. The fringe rate came in lower than projected so money will be moved from fringe to cover salary increases. The fringe rate is currently 45.71%.

Budget Process: Ms. Merkel asked about the time frame for next year's budget process. Mr. Kruppa explained it will begin in April with the County Legislature's retreat. The Legislators will set guidelines for County Administrator Joe Mareane who will put together target numbers for the departments. In May, Environmental Health (EH) fees will be brought to the Board. In June, Public Health's proposed budget will be presented for the Board's review before being submitted to the County.

Administration Report: Board members agreed to Mr. Kruppa's request to move his ten minute presentation on the Mental Health Department to the end of the meeting.

Lead Levels in Drinking Water at Caroline and Enfield Elementary Schools
Discussion: A discussion was initiated by Dr. Macmillan who asked for an update on the results from the most recent water testing at the schools. Ms. Cameron responded EH staff collected water samples at both schools during the first week of March. Staff is analyzing the data and in the process of preparing a report for the Ithaca City School District (ICSD). At Caroline, the results were significantly lower but still elevated above the action level in some cases. At Enfield, the results were mixed. The school district is in the process of hiring a consultant to help analyze the situation. EH staff will be taking steps to move forward with sampling and to work with the consultant.

Summary of Ms. Cameron's responses to questions from Board members:

- There is a significant amount of data to review from the most recent water sampling. EH staff is putting together a report that will help explain the data.
- ICSD is providing drinking water to address any public health concern and to allow time for analysis of each specific water system.
- Caroline and Enfield have groundwater wells; therefore, water sampling at each school was required.

Mr. Kruppa shared additional information:

- There will be a public release of information after the report is prepared by EH staff; ideally it will be a joint effort with ICSD.
- Tompkins County Health Department (TCHD) does not recommend testing at this point. If parents have concerns, they are encouraged to talk to their child's primary healthcare provider who knows the child's health history and can speak about other potential exposures to lead.

Discussion related to messaging:

- Dr. Morgan described a meeting she recently attended at Belle Sherman Elementary School with the ICSD Superintendent, the school district nurse, and a small group of parents. The parents raised the question about who has the authority to mandate that all children in the schools be tested for lead. Mr. Kruppa stated there would be a public health recommendation to test children if there was an immediate and imminent risk to children. However, lead is not an immediate and imminent risk; the risk is over time.

- According to Mr. Kruppa, staff is monitoring two pediatric offices every week to find out how many children have been tested for elevated blood lead levels. No cases have been detected. The report in *USA Today* that one child was found to have an elevated blood lead level was incorrect.
- Concerned about the messaging, Mr. Greenhouse thought it would be beneficial to have the ICSD publish a link on their webpage to the information presented on the TCHD website. Dr. Morgan commented that the suggestion of linking to the TCHD information has been proposed to the Superintendent who agreed it is a good idea. Mr. Kruppa added the ICSD has been deferring to the professionals.
- Dr. Evelyn inquired whether other local communities were concerned about their water systems. Ms. Cameron advised there is information for schools posted on the EH website. Staff is working with the schools that have contacted the department.
- From a communications point of view, Ms. Lyczko reported staff updates the TCHD website and includes the date that the information was last reviewed so readers know it is current.
- Mr. Greenhouse suggested reaching out to PTA Presidents with messaging about the information on the TCHD website. Mr. Kruppa replied that staff has reached out to a few PTAs but will investigate reaching out to the remaining groups.
- Mr. Kruppa emphasized that the TCHD message to parents is: (1) check with your doctor if you have any concerns regarding your child, (2) bottled water is being distributed to students so the exposure to lead has been eliminated, and (3) TCHD is working with the ICSD to find a solution.

Concluding remarks conveying staff appreciation:

- Dr. Macmillan expressed his appreciation for the staff members who have worked on this issue.
- Dr. Morgan added she thought TCHD staff is doing a great job. She had heard from the ICSD head nurse that Gail Birnbaum, one of the nurses in Community Health Services (CHS), had provided an excellent presentation of information and handouts at a previous meeting.
- Mr. Kruppa noted the work on this issue has touched almost every Division at the department. In EH, Ms. Cameron and her staff have put in numerous hours investigating, looking for solutions, and disseminating information to the public regarding the water situation. Ms. Bishop and her CHS staff have provided health information to the school district, talked to healthcare providers, and sent out numerous messages. Ms. Lyczko as the Public Information Officer has fielded calls from numerous media sources and Ms. Grinnell Crosby in Administration also has responded to calls. He concluded his remarks by saying, “It has been a complete team effort and a testament to what public health can do when you have dedicated people willing to put in the work and effort to protect their community.”

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

Division for Community Health Report: Ms. Bishop noted that her staff sends out weekly influenza surveillance data to local providers. She reported there has been one

influenza-associated pediatric death. The four-year-old child lived downstate, was unvaccinated and had underlying medical health conditions. That news has encouraged staff to work harder to promote our influenza prevention message and vaccination campaign. Flu vaccine is still available at TCHD by calling for an appointment.

Children with Special Care Needs Report: Ms. Thomas, Senior Community Health Nurse, represented Ms. Allinger at the meeting. She had nothing to add to the report.

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

Environmental Health Report: Earlier in the meeting, Ms. Cameron provided a report and answered questions regarding lead levels in the drinking water at Caroline and Enfield elementary schools. She had nothing to add to her report.

Quality Assurance and Performance Improvement Program Policy and Procedure: Ms. Bishop explained the policy was revised as a result of a desk survey of Licensed Home Care Service Agencies by the New York State Department of Health (NYSDOH). Our program was cited for not consistently reviewing both active and discharged case records. Staff looked at the policy and has embedded the actual regulations into the policy to ensure staff can easily refer to the specific requirements of the regulations. Specifically, staff will be reviewing a mix of both active and discharged records on a quarterly basis.

Dr. Morgan moved to approve the policy as written; seconded by Dr. Macmillan.

For purposes of clarity, Mr. Greenhouse recommended moving the *Regulation* section into the *Policy* section to show that it is part of the policy. After some discussion, Board members voted on the following edit: under the *Policy* heading, the fifth bullet will read, "*Comply with the current NYSDOH regulations referenced below*" and the regulations will be printed thereafter.

The vote on the policy, as edited, carried unanimously.

Presentation on the Tompkins County Mental Health Department: Mr. Kruppa described two key components of the Mental Health Department: the Local Government Unit (LGU) and clinical operations.

(1) The Mental Health Commissioner heads the LGU which is responsible for ensuring programs providing services for individuals with mental health, substance abuse, or developmental disabilities are being administered effectively within the community. State funding for that work comes through the LGU and is contracted out to community agencies with some funds directed to the Mental Health Department for services. Each year, agencies are required to report to the LGU about the services they have provided. The Community Services Board (CSB) reviews that data to assess how those organizations are achieving their goals. In addition to funding, the LGU through the Commissioner and CSB make sure the needs for the three targeted groups are identified and being met in the community. Each group has its own New York State agency: Office of Mental Health (OMH); Office of Alcoholism and Substance Abuse Services

(OASAS); and Office for People with Developmental Disabilities (OPWDD). These agencies are partners in providing services.

(2) Clinical operations have five main areas where 90% of the staff works.

- Outpatient Clinic on the third floor is staffed by nurses and doctors who provide counseling services and medications to clients. Staff works to make sure their clients are moving toward the goals that have been set for them.
- Therapy Clinic is staffed predominantly by social workers who work with the doctors to provide ongoing therapy. Clients meet with social workers in the office on a regular schedule. Both outpatient and therapy clinics work together to deliver the appropriate type of care but serve distinct populations.
- Forensics Unit has a program director who is a nurse/social worker and three clinicians who are social workers. They coordinate services for clients involved in the legal system. Those clients may be individuals mandated for treatment or inmates at the jail needing evaluations. Services can be provided in group settings.
- Continuing Day Treatment (CDT) program is in the process of converting to a Personalized Recovery Oriented Services (PROS) program. Over the years, the CDT program has been a place for clients to come together during the day to attend group sessions and receive services. That model is shifting away as the State is encouraging the personalized recovery model. It is about setting goals to help the individual achieve his/her maximum potential. The nurses and social workers currently working in that program connect with the doctors.
- Health Homes is a care coordination program. For years, the Mental Health Department had provided care coordination for individuals with mental health issues. In the transition to the Health Homes model, the role of staff has expanded beyond mental health to monitor all care for clients by connecting them to the different services in the community. The model is for users of Medicaid, typically high users of Medicaid with chronic conditions. Caseloads have gone up due to demand.

Mr. Kruppa answered questions from Board members:

- The Clinic provides services to people with health insurance but also serves a larger population of people who have Medicaid, Medicare, or are unable to pay. The Mental Health Department is the safety net.
- For funding, the State evaluates the numbers each year to create the State budget number. It is a quasi hard number. If there is a spike in demand in a particular area, then the LGU and CSB can inform the State of the need for additional resources to address that issue. Funding comes from the State, the County, and fees collected for services.
- There is a process for identifying an individual who needs to be moved to inpatient services. The process generally works but is often a legal process. The hospital is the first place for those individuals who need to be evaluated. If the individual is in the jail, then there is an evaluation by the doctors at the Mental Health Clinic.

In response to questions about potential areas of collaboration between Public Health and Mental Health Departments, Mr. Kruppa described the following:

- A specific example is the Health Homes program currently serving individuals 18 years and up. Children will be added later this year. There is discussion with Franziska Racker Centers and Children with Special Care Needs (CSCN) to see if there is a joint way to use staff members and their expertise in working with children in the program.
- The Delivery System Reform Incentive Program (DSRIP) is talking about integration of physical and behavioral health issues.
- CSB is interested in hearing how some of the prevention models and methods used in public health could be applied to mental health.
- As the electronic health record process continues to unfold, the billing component will be a large piece of working together. Staff involved with billing can provide backup to one another.
- There may be an opportunity to combine both departmental clinical groups as one entity to negotiate contracts with insurance companies for services provided by Tompkins County.
- Both departments have responsibilities for emergency response. The plan is to broaden emergency response capabilities to all County employees.

Joint Meeting Reminder: There was discussion about the joint meeting between BOH and CSB members occurring on Tuesday, March 29th at 5:30 p.m. Mr. Kruppa will put together one page descriptions of each department and its board. The meeting will be informal; a chance for members of the two boards to introduce themselves to one another.

Adjournment: At 1:26 p.m. Dr. Macmillan adjourned the meeting.

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Public Health Director Report April 2016

- On April 14th, we released two interim reports on water sampling at Caroline and Enfield Elementary schools.

  http://www.tompkinscountyny.gov/health/schooldrinkingwater

- A combined meeting of the BOH and Community Services Board was a success. Both groups shared the purpose of their boards and some initial discussions about future joint activities occurred. I look forward to building on this first meeting and finding ways the two Boards can work together.

- Participated in a presentation to the County Administrator by Nina Saeli, Preparedness Coordinator, and her team on the closed POD concept. Nina and her team are developing a plan to train county staff to run a closed POD for county employees. The County Administrator was supportive. This plan will help broaden the scope of people available to help in a Public Health emergency.

- Our request to increase the base and percentage of state aid and get language added to require any year end remaining appropriation be redistributed out to the Counties was not included in the State budget. We were asking for a requirement of one year notice before any administrative changes to the distribution of state aid can be enforced. Language was included requiring "reasonable" notice. A small victory I guess.

- I will be absent from the April BOH meeting. I will be in California with the Family Treatment Court Team including DSS Commissioner Patricia Carey and Judge Rowley. I will be discussing our role in the Safe Care program as well as the broader involvement of both Public and Mental Health.

  http://safecare.publichealth.gsu.edu/

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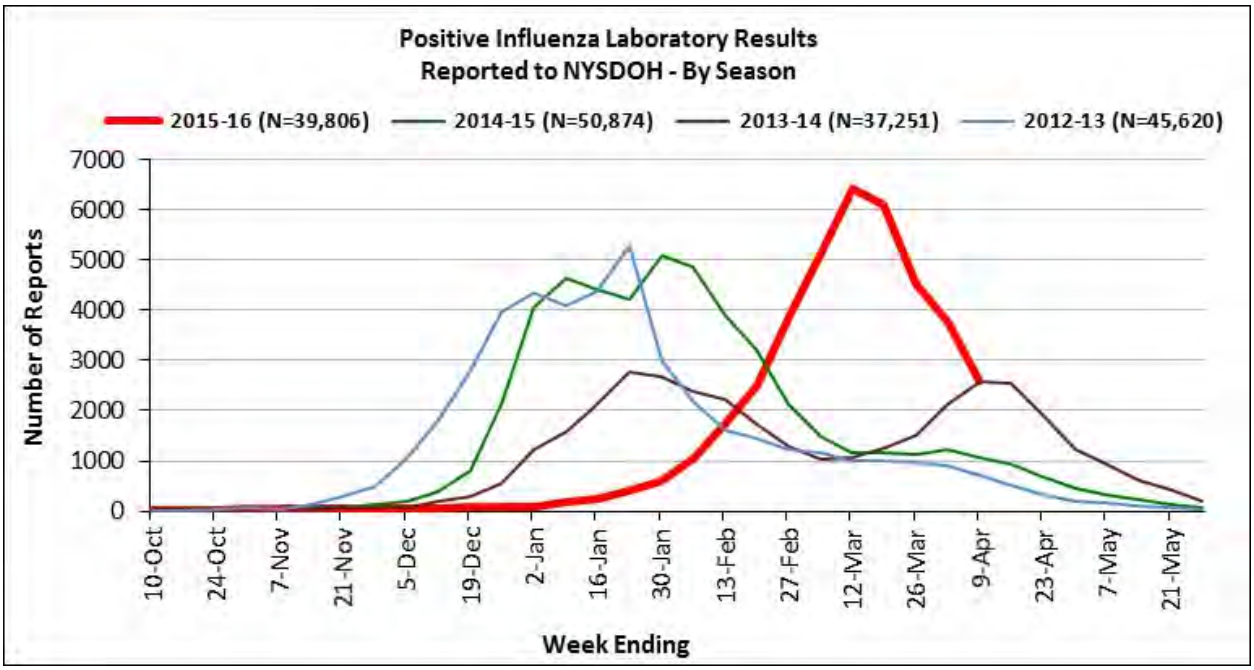
Medical Director's Report
Board of Health
April 2016

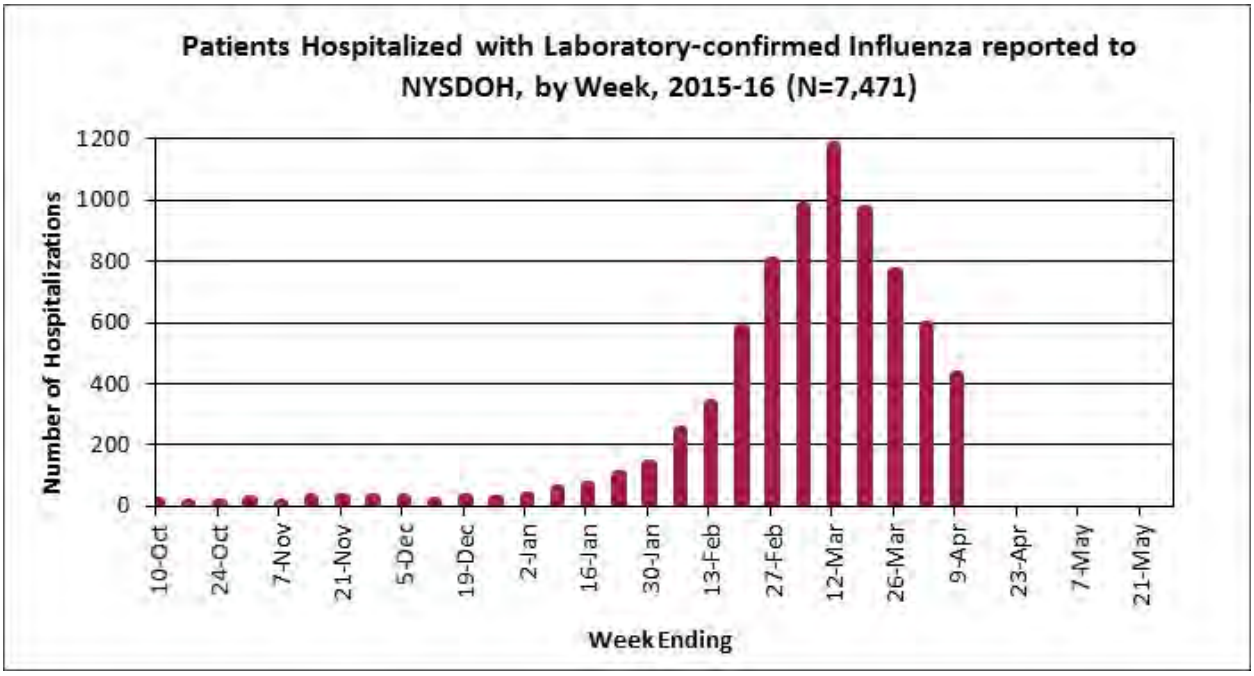
Influenza

The pattern for this year's influenza disease prevalence is one of a late peaking influenza. With the last report received as of April 9th, there was a downturn in the number of positive influenza lab reports which is peaking at a level higher than in the previous three years. The peak appears to be occurring in mid-March as opposed to the previous three years which peaked in late January/early February.

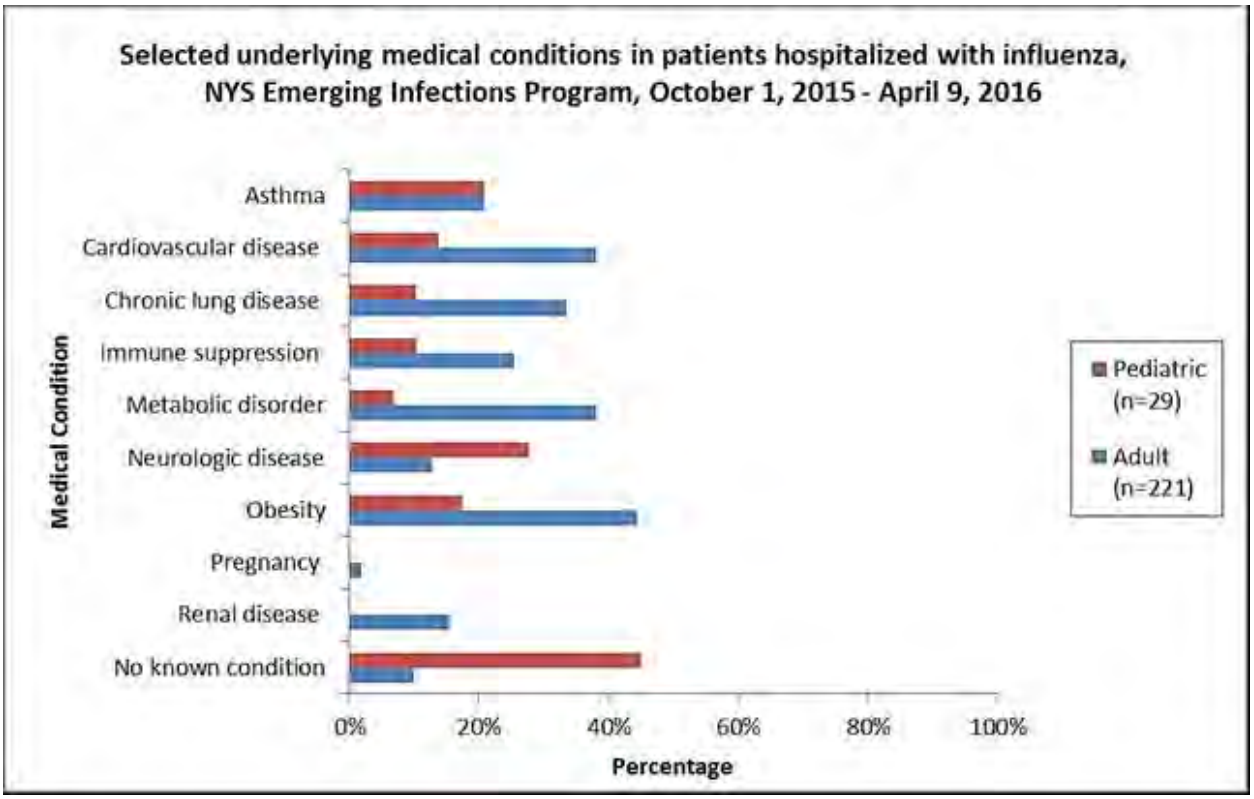


Whether or not there will be a secondary peak as was true about two years ago is yet to be seen.

Hospitalizations continue to be numerous as shown here:



Persons hospitalized may have certain underlying conditions but many do not:



As in past years, the virus is predominantly Influenza A; primarily H1N1 and secondarily H3. Influenza B is plays a minor role until this point in the season when it rises to rival Influenza A in prevalence.

Testing for drug resistant viruses has shown that no resistance has been detected to the two main medication choices.

The reports indicate that this year's virus and vaccine was a good match for each other. There have been 3 pediatric deaths this year reaffirming that young lives as well as adult lives can be lost.

As a final reminder: influenza-associated pneumonia and influenza complications rank ninth in the top ten causes of death in the United States!

City of Ithaca Drug Initiative Proposal

I am in the process of reviewing the proposal put forth by the City of Ithaca. In May, I have set up a meeting with several interested parties to further explore the provisions of the plan. I am bringing together details about the experience in Canada with the Vancouver supervised injection facility. So far, I can tell you the Vancouver facility has been operating since 2003. Its operation has been endorsed by the Canadian Public Health Association and by the Canadian Medical Association.

During a previous federal administration of Canada, applications for supervised injection facilities were not being acted upon in a timely manner. The Supreme Court of Canada was called upon to make a ruling regarding whether or not the government needed to process those applications expeditiously. The Supreme Court ruled that the interests of the government and the public health benefits of supervised injections facilities were such that the government did need to proceed in a timely manner in processing those applications.

The National Institutes of Health (NIH) of the United States was asked to look at a proposal for creating 4 supervised injection facilities in Montreal, Canada. The Institute reviewed the public health implications and the need/economic issues in regard to these facilities. NIH decided that based on the data there is indeed a public health benefit to be gained by their operation. They concluded that creating three supervised injection facilities would clearly meet the test of a cost-benefit analysis that took into account the issues of communicable disease, the burden of addiction and its ramifications.

I have drafted several questions that still remain to be answered and we will proceed in looking at them over the coming weeks.

Meetings Attended

Planned Parenthood – I met with Planned Parenthood on March 29th in order to complete our chart review in regards to their contract with TCHD to provide sexually transmitted disease services. I made some suggestions in terms of encouraging immunization at the point of care at Planned Parenthood. Hopefully, their collaboration with TCHD might have an impact on this issue.

Immunization Coalition – on April 5th, we had an Immunization Coalition meeting which is focused on the County's interest in and desire to improve immunization rates. This subject of immunizations at Planned Parenthood was brought up at that meeting at which the regional office of NYSDOH was represented and expressed their interest in the issue.

Quality Improvement – on March 15th, the Community Health Quality Improvement Committee met to review multiple services of the TCHD. The committee's purpose is to ensure that the quality of our delivered services is high and to address problematical areas. Among the services that are reviewed are: WIC, MOMS, lead outreach program, and LHCSA program. I am pleased to report that, in my view, the quality of services that we are delivering is high and our staff is dedicated and hard working.

Health Promotion Program

Theresa Lyczko, Director

Tobacco Control Program Ted Schiele – Evaluator/Planner

- Ellis Hollow Apartments: Tenant survey conducted March 7–18. Survey processing and results graphed for presentation to tenants and property manager. Results show clear majority support for smoke-free building and property. Meetings with property manager and regional management to follow.
- Cornell: Met with student who wants to bring a tobacco-free campus proposal to the student government. Support and correspondences ongoing.
- Ithaca College: Meetings, correspondence with, and support for student who is drafting a bill for the Student Government Association (SGA). Resolve in the bill states that I.C. will become tobacco-free and a committee should be established to facilitate that process. Bill was defeated; bill revision and follow up presentation planned.
- TC3: Correspondence with student health staff regarding reopening tobacco-free campus discussions. The *Truth Initiative* is offering a $7,500 grant for community colleges to become tobacco free; provided relevant information. Corresponded with a member of the unionized staff at TC3 to obtain her thoughts on a tobacco-free policy.
- Kick Butts Day (KBD) event at GIAC on KBD – March 16. Participated in KBD event held at SUNY Cortland as part of the tri-county tobacco control program, March 29.
- Statewide Media Workgroup: ongoing involvement in development of a media campaign regarding youth exposure to tobacco products at the point of sale. Campaign launch expected late May 2016.
- Statewide conference calls.

Community Outreach

- Facilitated the first post core session of the Diabetes Prevention Program (DPP) for the group completing the 16 –week sessions, March 2. Susan Dunlop, Community Health Nurse
- Presented Blood Borne Pathogen and TB training to 16 Mental Health Department staff, March 22. Susan Dunlop
- Met with medical provider office staff at 3 practices to promote and explain the DPP program to encourage patient referrals to the program, March 1, 9, and 16. Susan Dunlop
- Friends of Stewart Park Board and executive committee meetings, March 8, 23. Theresa Lyczko
- City Hall wellness committee, March 18. Ted Schiele
- Consortium Committees: Own Your Own Health, March 16, Joint Committee on Plan Design, March 3. Ted Schiele
- Worksite Wellness Coalition: Meeting, March 10. Additional planning and follow-up including agenda, publicity, minutes. Ted Schiele. Susan Dunlop and Theresa Lyczko attended.

TCHD Participation and Support

- Ithaca City School District – Lead and drinking water: approximately 15 hours spent reviewing lead information, updating content for the website and coordinating postings, consultation with program staff, assessing and coordinating media inquiries. Theresa Lyczko
- Media Inquiries – Lyme Disease, Mach 21 *Tompkins Weekly;* colon cancer morbidity and mortality data and prevention and screening information, March 10 *Ithaca Journal;* drug overdose fatalities in Tompkins County (phone conversations and emails explaining data, role of TCHD,) March 14 *New York Times.* Theresa Lyczko
- Staff Satisfaction Task Force meeting & newsletter template development. Ted Schiele
- HIV media campaign planning with CHS staff, March 30. Ted Schiele, Theresa Lyczko
- Invited to and attended a "Coffee with Joe," (Joe Mareane) session, March 2. Susan Dunlop

Web site postings

- WIC calendars for second quarter
- Spring rabies clinic and rabies page updates
- Update STI stats on Peace of Mind (POM) site
- School lead testing: New page and updates to existing pages related to issue
- Web management training planning and class at ITS
- BOH packet, minutes, reports

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

- "Prevention Agenda: Translating Data into Action," training and meeting in Albany, March 24. Ted Schiele attended. Theresa Lyczko presented at the breakout session: "Multi-Agency Collaboration: Providing the Diabetes Prevention Program.
- Health Planning Council board presentation: Health Homes, March 14. Ted Schiele, Theresa Lyczko
- Met with Health Planning Council staff, March 28. Theresa Lyczko
- Attended North Regional Performance Unit (RPU) of Care Compass Network (DSRIP) meeting, March 18. Theresa Lyczko

Emergency Preparedness

- Active Shooter/Threat training, March 3. Susan Dunlop, Theresa Lyczko

Meetings and Trainings

- Community Coalition for Healthy Youth: Board meeting & planning committees for 2 events: public forum on opioids, and town hall on underage drinking.
- All staff meeting, March 31. Theresa Lyczko, Ted Schiele, Susan Dunlop

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Division for Community Health
April 26, 2016 Board of Health Meeting

Karen Bishop, Director of Community Health
March 2016 Report

Administration –

- Met with college health staff from Cornell University, Ithaca College and TC3 on March 3 to discuss several infectious diseases that have potential public health concerns and their respective consequences to each campus. Our goal is to improve collaboration in response to a real infectious disease case.
- Met weekly with CHS managers to review program billing processes and concerns.
- Met weekly with Cathy Sinnott, WIC Director to review program and staff needs.
- Reviewed the department's Ebola Response Plan and provided input for minor edits.
- Reviewed workflows for the new electronic health record with Project Lead, Jeremy Porter on March 28.
- Participated in half-day on-site meeting with Core Solutions staff on March 30.
- Attended Active Shooter Response Training on March 3 at the health department.
- Attended an internal meeting on the Safe Care project, an evidence based intervention for multi-problem families with children birth to age 5 years involved in the child welfare and family court systems, on March 22. Its purpose is to reduce/prevent subsequent child welfare issues. The nurse home visits weekly for 18 weeks following a script and the parents demonstrates attainment of a set of skill-based criteria in order to graduate from the program. The two CHS nurses will attend a week long training offered in June then go through a certification process. Their efforts will compliment Diane Olden, CSCN nurse, who has been working on the project for the last year.
- Attended Mothers & Babies Perinatal Network Annual Forum on March 29 at the health department. Statistical data was shared related to prenatal care and delivery outcomes of women residing in Tompkins County.
- Attended the NYSDOH webinar on Zika Virus on March 31.
- Completed NYSDOH required Regulated Medical Waste Survey for our clinic setting.

Statistical Reports –

- Division statistical reports – see attached reports.
- Communicable Disease statistical reports include monthly and year to date (not annual).

WIC –

- Our local Women, Infants and Children (WIC) program recently started their Healthy Lifestyles project for 2016. Focusing on the MyPlate curriculum from the USDA, the agency is working to decrease maternal weight gain during pregnancy and reduce childhood obesity in children ages 2-5. The nutrition staff is incorporating the recently

released US Dietary Guidelines to reinforce appropriate portion sizes and healthy food choices. Children receive a MyPlate cup and plate to help them reach their goal. Our pregnant participants receive a MyPlate slide guide.

- Starting March 1st, our local WIC agency is introducing the WIC Strong campaign with the goal of increasing enrollment by reaching working families that may be unaware they still qualify for WIC services. WIC Strong is an advertising plan developed by the local agencies of the central region and was funded by the NYS WIC program. Our campaign in Tompkins County includes bus ads, TV and Radio spots and local newspaper ads. The public is directed to the central region website www.wicstrong.com.
- The WIC Program Director, Cathy Sinnott, was recently elected to a 1 year term in the NYS WIC Association Board of Directors. In this role, Cathy will be able to work directly with the state WIC office as well as local agencies across the state to develop policies and procedures. She will be traveling to Albany every other month for board meetings and to meet with state WIC officials.

April 2016 BOH Report

Community Health Services

By Melissa Gatch, Supervising Community Health Nurse

CHS staffing-

- Community Health Services (CHS) will be mentoring one second year TC3 nursing student during April.

Continuing Education-

- CHS staff attended several webinars sponsored by the NYSDOH and the CDC during March on the Zika Virus.
- CHS staff attended Civilian Response to Active Shooter Events Training sponsored by the Tompkins County Sherriff's Department.
- Community Health Nurse Karen LaCelle and Supervising Community Health Nurse Melissa Gatch attended the 2016 Statewide Immunization Meeting on March 22 & 23 in Troy, New York.

Lead Poisoning Prevention- (1 case) Lead nurse Gail Birnbaum is case managing 1 child with an elevated blood lead level (BLL). The case summary is as follows:

- Case #1: Two year old with initial BLL 35.1 mcg/dL on 11/23/15. Previous BLL at one year was 3.3 mcg/dL 9/3/14. Joint home visit made with Environmental Health on 11/23/15. No obvious lead hazards identified at child's home which was built after 1978- home is a rental home. Education provided to parents on sources of lead, housecleaning methods and nutrition. Interview of parents revealed that child spends several days each week visiting both sets of grandparents who live nearby but not in Tompkins County- both are in older homes. Child is no longer in daycare but spent 6 weeks in a daycare. Referred two homes in outside county for lead testing- done 11/27/15. No lead hazards identified in either home except for one door in one home which is unavailable to the child. Daycare was assessed 12/1/15 and found no lead hazards. Paint sampling results using XRF analyzer in parents rental home found a kitchen door that leads to the upstairs bedroom positive for lead paint and in deteriorated condition. Report includes that the child spends a significant amount of time at this doorway/landing and was in contact with the door daily. The parents removed the door upon discovering this and provided cleaning of the floor. A "Notice and Demand" was issued by Environmental Health on December 8th to the landlord outlining steps to minimize further exposure. Repeat BLL on 11/27/15 30.9mcg/dL, 12/7/15 29.5 mcg/dL, 12/23/15 28.1mcg/dL, 1/13/16 22.2mcg/dL and 3/24/16 17.6 mcg/dL. Plan: Keep case open to ensure repeat testing done and that BLL's continue to go down.

Communicable Disease-

- **Zika Virus:** To date, testing has been authorized for 12 Tompkins County residents who traveled, or their partner traveled, to a country with reported Zika Virus. There has been one positive case reported to date.
- **Cryptosporidiosis:** During the month of March there were 4 confirmed case of Cryptosporidiosis, 3 cases were veterinarian students. The common source of transmission was working with baby calves. Common symptoms included nausea, diarrhea, fever, fatigue, weight loss, abdominal cramps, loss of appetite and bloating or gas. All of the students were interviewed, counseled and given education over the phone, along with a fact sheet regarding the illness. Occupational Medicine at the school was notified for further follow up investigation.
- **Influenza:** NYSDOH continues to categorize flu as *widespread;* however, the state's numbers indicate that influenza cases peaked during March and numbers are trending down. NYS reported **two pediatric deaths** during March. The first was an unvaccinated 4-year old with co-morbidities; who lived downstate. A second death was announced two weeks later in a 9-month old who was vaccinated and reports co-morbidity of Trisomy 13 disease; the child was diagnosed with influenza B. Season to date (October through March),

Tompkins County has had a **total of 321 (301 Influenza A and 20 Influenza B**) confirmed cases. Tompkins County saw a significant increase in influenza cases during March with **188 Influenza A cases and 16 Influenza B cases** confirmed. We continue to offer and encourage influenza vaccine at the health department's weekly immunization clinics. The NYSDOH weekly flu report continues to be blast faxed and emailed to providers and community partners by CHS staff.

- **Syphilis:** During the month of March we had 3 new syphilis cases, all unrelated. All three cases were MSM, all used the electronic "Grindr" app to find sexual partners, one was infected out of the country, two were staged as Primary Syphilis and the third was staged as Late Latent Syphilis. All three received appropriate treatment and NYSDOH provided contact investigation and follow up. CHS Communicable Disease staff is working with Health Promotion staff to put out a media campaign emphasizing the Peace of Mind website for STI education and testing sites in Tompkins County.
- **Health Advisories and Informational Messages Blast Faxed to Providers:**
  - Weekly Influenza Surveillance
  - Expansion of Zika Virus Testing For Pregnant Women
  - CDC call for providers: Updated Interim Zika Clinical Guidance for Reproductive Age Women & Men, Sexual transmission of Zika and the U.S. Zika Pregnancy Registry.

Tuberculosis- (One Active Case discharged in March)

- **Active TB:** 22 year old foreign born college student entering US in August 2015. Case with complaint of 1-2 month history of fever and productive cough. Work-up from the college revealed a positive QFT, chest x-ray 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) negative for two specimens and positive for one. 4-drug treatment initiated at the end of August given clinical presentation and strong suspicion of active pulmonary disease. Culture and PCR negative for MTB but will continue to treat as culture negative TB as case has showed continued improvement on therapy. Transitioned to 2-drug therapy 2x/week at the end of October. Follow-up CXR in February revealed normal exam. Case was discharged on March 11 after successfully completing 6 months of treatment.
- **Latent TB (LTBI):** There were **28** Tuberculin Screening Tests (TST) placed during the month of March, with **2** positive results. The first positive was a 35 year old male with travel history. He presented with an 18 mm induration. Symptom check and CXR were negative. He was referred to Infectious Disease provider. Client was seen, evaluated and offered LTBI treatment which he declined. LTBI literature was sent to the client for review. The second positive was a 24 year old male with a past history of living in a correctional facility. He presented with a 12 mm induration. Symptom check and CXR were negative. Client was counseled regarding LTBI treatment and declined at this time. LTBI literature was sent for client for review.

N.Y.S. Department of Health
Division of Epidemiology
Communicable Disease Monthly Report*, DATE: 01APR16
Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS Month=March

	2016		2015		2014		2013		Ave (2013-2015)	
Disease	**Freq**	**Rate**	**Freq**	**Rate**	**Freq**	**Rate**	**Freq**	**Rate**	**Freq**	**Rate**
CAMPYLOBACTERIOSIS**	0	0.0	3	34.4	1	11.5	1	11.5	2	22.9
CRYPTOSPORIDIOSIS**	4	45.8	0	0.0	1	11.5	0	0.0	0	0.0
GIARDIASIS	0	0.0	1	11.5	1	11.5	0	0.0	1	11.5
HEPATITIS A	0	0.0	0	0.0	1	11.5	0	0.0	0	0.0
HEPATITIS B,CHRONIC	1	11.5	0	0.0	0	0.0	0	0.0	0	0.0
HEPATITIS C,CHRONIC	5	57.3	3	34.4	11	126.1	3	34.4	6	68.8
INFLUENZA A, LAB CONFIRMED	188	2154.9	8	91.7	9	103.2	11	126.1	9	103.2
INFLUENZA B, LAB CONFIRMED	16	183.4	12	137.5	5	57.3	19	217.8	12	137.5
LYME DISEASE** ****	3	34.4	0	0.0	2	22.9	1	11.5	1	11.5
PERTUSSIS**	0	0.0	0	0.0	0	0.0	2	22.9	1	11.5
SALMONELLOSIS	1	11.5	0	0.0	0	0.0	0	0.0	0	0.0
STREP,GROUP B INVASIVE	0	0.0	0	0.0	1	11.5	0	0.0	0	0.0
STREP PNEUMONIAE,INVASIVE	0	0.0	1	11.5	0	0.0	1	11.5	1	11.5
SYPHILIS TOTAL.....	3	34.4	2	22.9	1	11.5	0	0.0	1	11.5
- LATE LATENT	1	11.5	0	0.0	0	0.0	0	0.0	0	0.0
- P&S SYPHILIS	2	22.9	2	22.9	1	11.5	0	0.0	1	11.5
GONORRHEA TOTAL.....	2	22.9	5	57.3	0	0.0	5	57.3	3	34.4
- GONORRHEA	2	22.9	5	57.3	0	0.0	5	57.3	3	34.4
CHLAMYDIA	27	309.5	28	320.9	30	343.9	25	286.6	28	320.9

*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 in 2013-2014

***Not official number

**** From 2013-2014,18 counties investigated a sample of positive laboratory results; 2015-2016, 25 counties sampled.

N.Y.S. Department of Health
Division of Epidemiology
Communicable Disease Monthly Report*, DATE: 01APR16
Through March
Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS

	2016		2015		2014		2013		Ave (2013-2015)	
Disease	**Freq**	**Rate**	**Freq**	**Rate**	**Freq**	**Rate**	**Freq**	**Rate**	**Freq**	**Rate**
AMEBIASIS	0	0.0	0	0.0	0	0.0	1	3.8	0	0.0
CAMPYLOBACTERIOSIS**	1	3.8	4	15.3	5	19.1	2	7.6	4	15.3
CRYPTOSPORIDIOSIS**	5	19.1	0	0.0	4	15.3	2	7.6	2	7.6
EHEC, SEROGROUP NON-O157	1	3.8	1	3.8	0	0.0	0	0.0	0	0.0
GIARDIASIS	0	0.0	3	11.5	2	7.6	1	3.8	2	7.6
HEPATITIS A	0	0.0	0	0.0	1	3.8	0	0.0	0	0.0
HEPATITIS B,CHRONIC	1	3.8	0	0.0	1	3.8	0	0.0	0	0.0
HEPATITIS C,ACUTE	0	0.0	0	0.0	2	7.6	0	0.0	1	3.8
HEPATITIS C,CHRONIC	19	72.6	18	68.8	29	110.8	13	49.7	20	76.4
INFLUENZA A, LAB CONFIRMED	301	1150.1	284	1085.1	160	611.3	81	309.5	175	668.6
INFLUENZA B, LAB CONFIRMED	20	76.4	48	183.4	8	30.6	41	156.7	32	122.3
LYME DISEASE** ****	5	19.1	1	3.8	4	15.3	5	19.1	3	11.5
PERTUSSIS**	0	0.0	0	0.0	0	0.0	3	11.5	1	3.8
SALMONELLOSIS	2	7.6	3	11.5	0	0.0	1	3.8	1	3.8
STREP,GROUP A INVASIVE	1	3.8	0	0.0	0	0.0	0	0.0	0	0.0
STREP,GROUP B INVASIVE	1	3.8	2	7.6	3	11.5	1	3.8	2	7.6
STREP,GROUP B INV,EARLY/LATE ONSET	0	0.0	0	0.0	1	3.8	1	3.8	1	3.8

	2016		2015		2014		2013		Ave (2013-2015)	
Disease	**Freq**	**Rate**	**Freq**	**Rate**	**Freq**	**Rate**	**Freq**	**Rate**	**Freq**	**Rate**
STREP PNEUMONIAE,INVASIVE	2	7.6	2	7.6	0	0.0	3	11.5	2	7.6
ZIKA VIRUS	1	3.8	0	0.0	0	0.0	0	0.0	0	0.0
SYPHILIS TOTAL.....	4	15.3	2	7.6	1	3.8	0	0.0	1	3.8
- LATE LATENT	1	3.8	0	0.0	0	0.0	0	0.0	0	0.0
- P&S SYPHILIS	2	7.6	2	7.6	1	3.8	0	0.0	1	3.8
- EARLY LATENT	1	3.8	0	0.0	0	0.0	0	0.0	0	0.0
GONORRHEA TOTAL.....	11	42.0	16	61.1	5	19.1	9	34.4	10	38.2
- GONORRHEA	11	42.0	16	61.1	5	19.1	9	34.4	10	38.2
CHLAMYDIA	87	332.4	83	317.1	67	256.0	58	221.6	69	263.6

*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 2013-2014,18 counties investigated a sample of positive laboratory results; 2015-2016, 25 counties sampled.

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 2016	Total 2015	Total 2014
Maternal Child / MOMS Services															
Client Caseload	118	111	115												
# of Client Admissions	22	20	25										67	295	321
# of Client Discharges	27	22	23										72	337	357
Maternal & Infant Clinic Visit	10	11	11										32	209	355
Maternal & Infant Home Visit	59	58	78										195	862	758
Total Home & Clinic Visits	69	69	89	0	0	0	0	0	0	0	0	0	227	1071	1113
On-Call (Weekend) Nursing Visits to Patients															
Maternal & Infant On Call Visits	0	0	0										0	0	0
Rabies On Call Vaccinations	0	0	0										0	28	37
TB DOT On Call Visits	0	0	0										0	9	11
Total # On-Call Visits	0	0	0	0	0	0	0	0	0	0	0	0	0	37	48
Total Home, Clinic, On-Call Visits	69	69	89	0	0	0	0	0	**0**	**0**	**0**	**0**	227	1161	1161
Childbirth Education															
# of Childbirth Education Classes	0	1	0										1	10	16
# of Childbirth Education Moms*	0	6	0										6	32	54

*** 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 2016	Total 2015	Total 2014
Immunizations (Reported to NYSIIS, Updates May Be Pending)															
# of Immunization Clients	34	18	23										75	429	319
# of Immunizations Administered	38	33	37										108	761	534
Children 0 thru 18 years, 364 days	19	11	13										43	319	423
Adults 19 years and older	15	7	10										32	205	111
# of Influenza Immunizations	10	2	2										14	579	917
Rabies Vaccination Program (Internal Data, Reporting to NYSIIS May Be Ongoing)															
Post-Exposure Clients	0	0	1										1	107	106
Post-Exposure Clinic Vaccinations	0	0	2										2	258	267
Tuberculosis Program															
Cumulative TB clients	1	1	0										0	2	4
Active TB Admissions	0	0	0										0	2	4
Active TB Discharges	0	0	1										1	4	2
TB Direct Observe Therapy Home Visits	7	7	3										17	274	269
# of Tuberculosis Screening Tests*	30	19	28										77	283	421
Anonymous HIV Counseling & Testing Clinics															
# of HIV Clinics - including Walk-Ins	10	9	12										31	109	99
# of Clients Counseled & Tested	4	11	11										26	94	96
HIV Positive Eliza & Western Bloc	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Women, Infants, Children Clinic															
Monthly New Enrollments	68	55	52										**175**	676	430
Total Participants Served	560	486	563										**1609**	6417	4889
Participants w/Active Checks	1322	1312	1325										**1320**	1338	1386
Total Enrolled (summary is an Average)	1559	1563	1520										**1547**	1564	1689
% No-Show	15.9%	16.1%	12.8%												18.3%
% Active Participation	87.4%	87.5%	88.3%												69.3%
% Caseload Target (FY15 Target = 1500)***	103.9%	104.2%	101.3%												84.4%

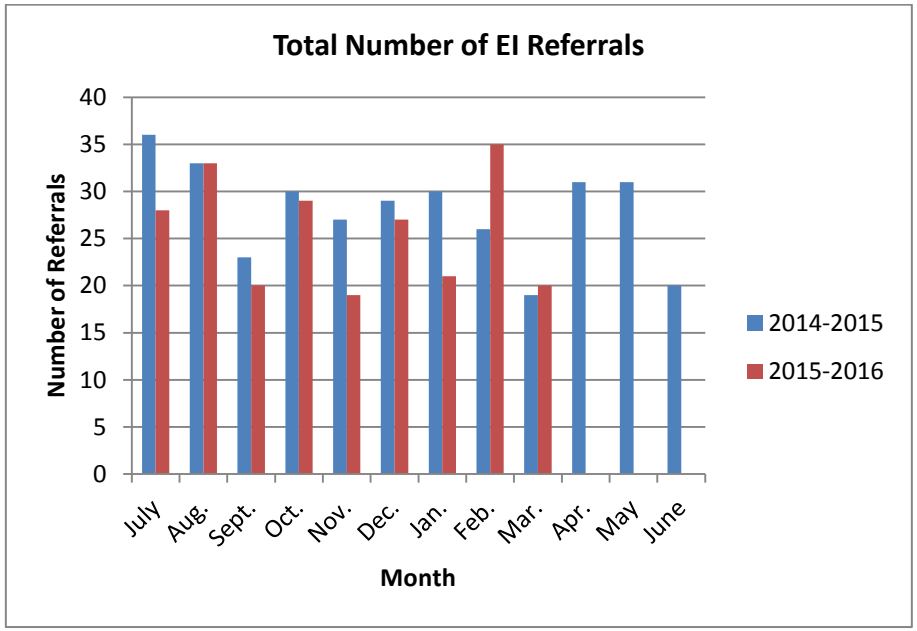
123 Red numbers indicate preliminary data; subject to revision

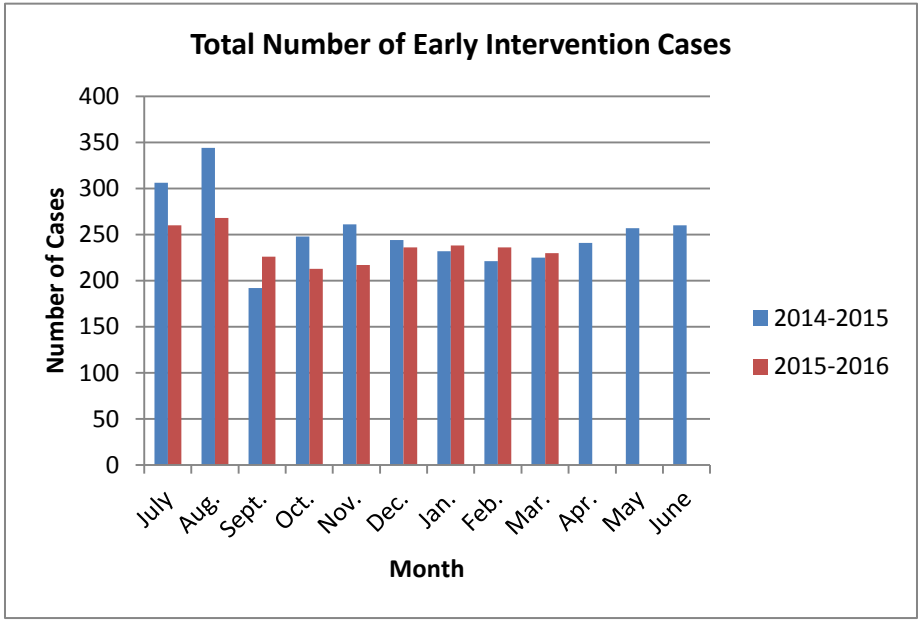
** # of Immunizations administered may understate actual activity if Rabies activity updates to NYSIIS are pending

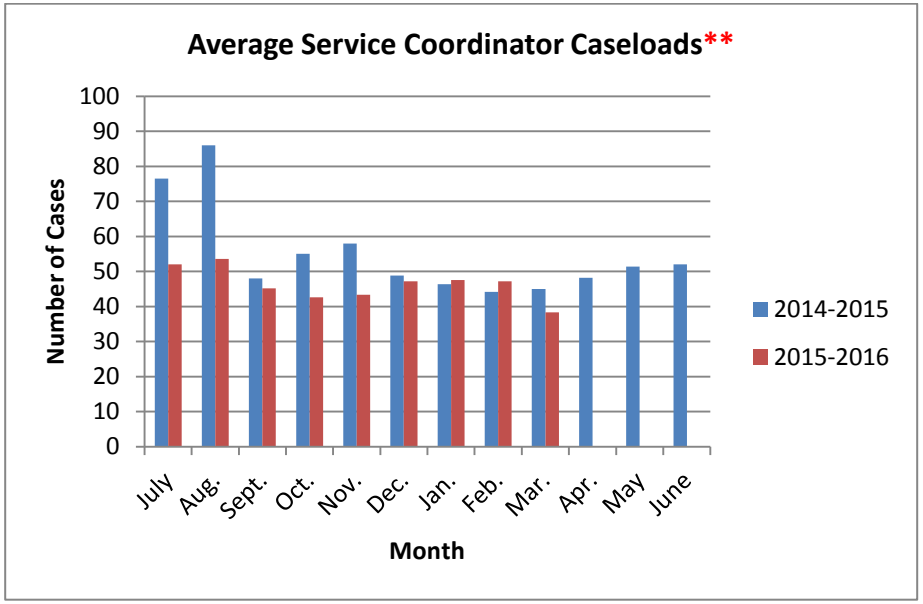
UA = Unavailable at this time

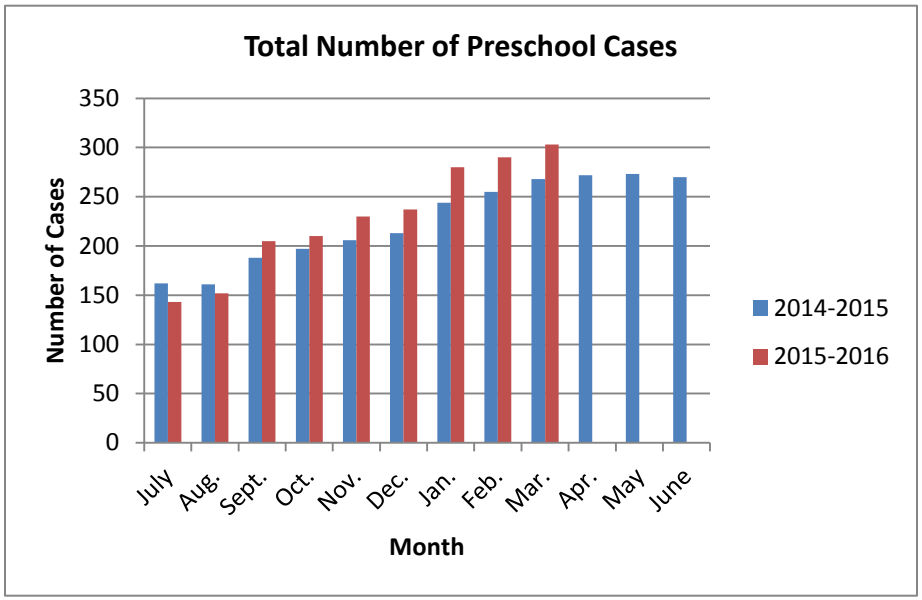
*** Caseload target changed from 2000 to 1500 effective 10/1/2015

Children with Special Care Needs
Statistics Based on Program School Year









****Beginning December 2014, the number of full-time Service Coordinators increased from 4 to 5, and beginning March 2016, the number of full-time Service Coordinators increased from 5 to 6.**

Children with Special Care Needs Division
Statistical Highlights 2016

EARLY INTERVENTION PROGRAM

Number of Program Referrals	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2016 Totals	2015 Totals
Initial Concern/reason for referral:														
-- DSS Founded Case	3	1	1										5	19
-- Gestational Age		1	1										2	3
-- Gestational Age & Hearing													0	0
-- Global Delays													0	6
-- Hearing													0	0
-- Physical													0	
-- Feeding	1	3	1										5	16
-- Feeding & Hearing													0	1
-- Feeding & Social Emotional		1												
-- Gross Motor	5	7	3										15	58
-- Gross Motor & Feeding													0	2
-- Gross Motor & Fine Motor													0	2
-- Gross Motor & Social Emotional		1											1	0
-- Fine Motor													0	0
-- Social Emotional		1											1	10
-- Social Emotional & Adaptive													0	1
-- Speech	8	16	12										36	153
-- Speech & Adaptive													0	0
-- Speech & Cognitive													0	2
-- Speech & Feeding													0	2
-- Speech & Fine Motor													0	3
-- Speech & Hearing													0	0
-- Speech & Gross Motor		3											3	10
-- Speech & Sensory													0	2
-- Speech & Social Emotional	2		2										4	10
-- Adaptive													0	0
-- Adaptive/Feeding													0	0
-- Adaptive/Sensory													0	2
-- Vision													0	0
-- Qualifying Congenital / Medical Diagnosis	2												2	3
-- Child Find (At Risk)		1											1	8
Total Number of Early Intervention Referrals	**21**	**35**	**20**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**75**	**313**

Caseloads														
Total # of clients qualified and receiving svcs	201	187	200											
Total # of clients pending intake/qualification	37	49	30											
Total # qualified and pending	238	236	230	0	0	0	0	0	0	0	0	0		
Average # of Cases per Service Coordinator	47.6	47.2	38.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0		

Children with Special Care Needs Division
Statistical Highlights 2016

EARLY INTERVENTION PROGRAM

Family/Client visits	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2016 Totals	2015 Totals
-- Intake visits	20	34	17										71	272
-- IFSP Meetings	42	27	49										118	523
-- Amendments	33	12	12										57	175
-- Core Evaluations	24	15	31										70	278
-- Supplemental Evaluations	4	3	10										17	66
-- DSS Visit	1	0	2										3	25
-- EIOD visits	9	1	9										19	79
-- Observation Visits	39	27	40										106	314
-- CPSE meetings	8	4	5										17	79
-- Program Visit	0	0	2										2	8
-- Family Training/Team Meetings	0	0	0										0	6
-- Transition meetings	18	4	8										30	92
-- Other Visits	6	7	1										14	24
IFSPs and Amendments														
# of Individualized Family Service Plans Completed	42	27	49										118	523
# of Amendments to IFSPs Completed	46	14	16										76	217

Services and Evaluations Pending & Completed														
Children with Services Pending														
-- Assistive Tech	0	0	4											
-- Audiological	0	0	0											
-- Feeding	0	1	1											
-- Group Developmental Intervention	0	0	0											
-- Nutrition	0	0	0											
-- Occupational Therapy	3	3	5											
-- Physical Therapy	0	0	0											
-- Social Work	1	0	1											
-- Special Education	0	2	1											
-- Speech Therapy	5	13	11											
# of Evaluations Pending	7	17	7											
Type:														
-- Diagnostic Psychological	1	1	1											
-- Developmental Pediatrician	0	1	0											
-- Other	0	0	0											
-- Supplemental Evaluations	6	15	6											
Type:														
-- Audiological	4	7	2											
-- Auditory Brain Response (ABR)	0	0	0											
-- Feeding	1	2	1											
-- Physical Management Clinic	0	0	0											
-- Physical Therapy	0	0	1											
-- Speech	1	2	1											
-- Occupational Therapy	0	4	1											
-- Psychological	0	0	0											
-- Vision	0	0	0											

Children with Special Care Needs Division
Statistical Highlights 2016

EARLY INTERVENTION PROGRAM

Services and Evaluations Pending & Completed (continued)	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2016 Totals	2015 Totals
# of Evaluations Completed	4	3											7	98
Type:														
-- Diagnostic Psychological	0	0	0										0	9
-- Developmental Pediatrician	0	0	0										0	2
-- Other	0	0	0										0	0
-- Supplemental Evaluations	4	3											7	87
Type:														
-- Audio	0	2	5										7	13
-- Feeding	0	0	2										2	9
-- Occupational Therapy	3	1	2										6	39
-- Physical Management Clinic	0	0	0										0	0
-- Physical Therapy	0	0	0										0	7
-- Psychological	0	0	0										0	0
-- Social Emotional	0	0	0										0	0
-- Speech Therapy	1	0	2										3	19
-- Vision	0	0	0										0	0
Diagnosed Conditions														
Autism Spectrum														
-- Children currently diagnosed:	3	3	3											
-- Children currently suspect:	16	15	18											
Children with 'Other' Diagnosis														
-- Arthrogryposis	1	1	1											
-- Brain Anomalies	2	2	2											
-- Bronchopulmonary Displasia (BPD)	2	3	2											
-- Cardiac Anonomly	1	2	1											
-- Cerebral Palsy (CP)	2	1	2											
-- Chromosome Abnormality	2	1	1											
-- Cleft Lip/Palate	2	3	3											
-- Congenital Scoliosis	1	1	0											
-- Cystic Hygroma	0	1	1											
-- Down Syndrome	2	2	2											
-- Erb's Palsy	1	0												
-- Failure to Thrive	1	0	1											
-- Feeding Difficulties	2	3	1											
-- Hydrocephalus	1	0	1											
-- Hydronephrosis	1	1	1											
-- Hypotonia	1	1	0											
-- Macrocephaly	1	1	0											
-- Microcephaly	0	0	0											
-- Pierre Robin Syndrome	1	1	1											
-- Plagiocephaly	1	1	0											
-- Prematurity	20	16	15											
-- Senorineural Hearing Loss	2	3	3											
-- Spina Bifida	1	1	1											
-- Torticollis	3	2	3											

Children with Special Care Needs Division
Statistical Highlights 2016

EARLY INTERVENTION PROGRAM

Early Intervention Discharges														
-- To CPSE	21	2	0										23	78
-- Aged out	2	1	1										4	12
-- Declined	1	1	3										5	22
-- Skilled out	0	3	1										4	44
-- Moved	1	0	2										3	31
-- Not Eligible	4	9	6										19	92
-- Other	0	4	1										5	9
Total Number of Discharges	29	20	14	0	0	0	0	0	0	0	0	0	63	288

Child Find														
Total # of Referrals	0	1	0										1	15
Total # of Children in Child Find	12	13	12											
Initial Consents Sent	0	1	0										1	11
Initial Consents Resent	0	0	0										0	0
Consents Returned	0	0	0										0	3
ASQs Sent	3	3	0										6	40
ASQs Returned	0	0	1										1	17
Total # Transferred to Early Intervention	1	0	1										2	3
Total # of Discharges	3	0	0										3	6

Children with Special Care Needs Division
Statistical Highlights 2016

PRESCHOOL SPECIAL EDUCATION PROGRAM

Clients Qualified and Receiving Services	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2016 Totals	2015 Totals
Children per School District														
-- Ithaca	154	162	165											
-- Dryden	38	40	41											
-- Lansing	30	30	31											
-- Newfield	22	23	29											
-- Groton	26	25	23											
-- Trumansburg	6	6	10											
-- Spencer VanEtten	1	1	1											
-- Newark Valley	0	0	0											
-- Odessa-Montour	1	1	1											
-- Candor	0	0	0											
-- Moravia	1	1	1											
-- Cortland	1	1	1											
Total # of Qualified and Receiving Services	**280**	**290**	**303**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**		

Services Provided	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Totals	Totals
Services Received by Discipline														
-- Speech Therapy (individual)	174	179	185											
-- Speech Therapy (group)	5	11	12											
-- Occupational Therapy (individual)	60	64	66											
-- Occupational Therapy (group)	1	1	3											
-- Physical Therapy (individual)	32	32	33											
-- Physical Therapy (group)	2	2	2											
-- Transportation														
-- Birnie Bus	25	24	25											
-- Ithaca City School District	43	43	43											
-- Parent	1	1	2											
-- Service Coordination	33	34	33											
-- Counseling	49	51	55											
-- 1:1 (Tuition Program) Aide	7	7	8											
-- Special Education Itinerate Teacher	20	19	28											
-- Parent Counseling	19	21	22											
-- Program Aide	3	3	3											
-- Teaching Assistant	5	5	5											
-- Psychological Services	0	0	0											
-- ASL Interpreter	0	0	0											
-- Audiological Services	2	2	2											
-- Teacher of the Deaf	1	1	1											
-- Auditory Verbal Therapy	0	0	0											
-- Teacher of the Visually Impaired	0	0	0											
-- Nutrition	1	1	1											
-- Assistive Technology Services	1	2	3											
-- Skilled Nursing	2	2	2											
-- Vision	1	1	1											
Total # of children rcvg. home based related svcs.	**211**	**221**	**233**											

Children with Special Care Needs Division
Statistical Highlights 2016

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	2016 Totals	2015 Totals
-- Ithaca	43	44	44											
-- Cortland	1	1	1											
-- Dryden	10	9	9											
-- Groton	4	4	4											
-- Lansing	6	6	6											
-- Newfield	4	4	4											
-- Trumansburg	0	0	1											
-- Odessa-Montour	0	0	0											
-- Spencer VanEtten	0	0	0											
-- Moravia	1	1	1											
-- # attending Franziska Racker Centers	39	37	38											
-- # attending Ithaca City School District	30	32	32											
Total # attending Special Ed Integrated Tuition Progr.	**69**	**69**	**70**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**		

Municipal Representation Committee on Preschool Special Education														
-- Ithaca	1												1	42
-- Dryden													0	18
-- Groton			1										1	0
-- Lansing													0	3
-- Newark Valley													0	0
-- Newfield	5												5	4
-- Odessa													0	0
--Trumansburg													0	3

TOMPKINS COUNTY HEALTH DEPARTMENT
Your Partner for a Healthy Community

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ENVIRONMENTAL HEALTH HIGHLIGHTS
March 2016

Outreach and Division News

ATUPA – The grant year for the Adolescent Tobacco Use Prevent Act ended March 31, 2016. There are currently 64 Active tobacco vendors in Tompkins County. During the grant year, there were 68 "Adult Compliance Checks" performed by a Sanitarian. These "Adult Compliance Checks" verify registration with Department of Taxation and Finance, posting of required signage, proper display and storage of tobacco products and that minimum package size requirements are met. In addition, there were 78 compliance checks performed with a minor. During "Minor Compliance Checks", a 16-year old minor employed by the Health Department and working under the supervision of a Sanitarian attempts to purchase tobacco products. There was one sale that occurred at Pete's Grocery & Deli during the grant year.

NYSACHO Environmental Health Summit: This year, the New York Association of County Health Officials (NYSACHO) received funding to support Environmental Health issues and concerns. On March 30, Anne Wildman attended the 2016 Environmental Health Summit hosted by the New York State Association of County Health Officials (NYSACHO). The Summit, attended by almost 100 PH sanitarians, was a one-day event that provided updates on program implementation for Recreational EH Programs, specifically the Children's Camp and the Swimming Pool and Bathing Beach programs.

The Camp updates focused primarily on: accommodation requirements for camps enrolling campers suffering disabling conditions, management of camp infirmaries and outbreak investigation; and the regulation of devices such as ropes courses, zip lines and motorized amusements like go-karts.

The Pool and Beach updates included a review of drownings (fatal and non-fatal) and the investigation of these incidents; enforcement related to Level IV (non-lifeguarded) supervision at TRs; and addressing harmful algal blooms at beaches.

Lead in Drinking Water at Schools: Developments with lead testing of drinking water in schools continued to dominate a number of EH activities in February. The EH Division has weekly meetings with the Ithaca City School District (ICSD) and has been working closely with the ICSD and NYSDOH throughout this situation. NYSDOH made Wadsworth lab available to us and, on March 3, we collected first-draw and flushed samples at selected locations at Enfield Elementary School, followed on by Caroline Elementary School on March 4.

At Caroline, results from consumptive sources were significantly better than the school-wide sampling on February 6, 2016, supporting our initial concerns with procedures followed for the February sampling. The February 6 results ranged from 2,200 to 7.4 ppb, with most results greater than 100 ppb. The first-draw results from March 4 ranged from 30.6 to 7.6 ppb. All flushed samples were below the action level of 15 ppb and many were below detection limits. The ICSD did repeat sampling the following week, with results being generally consistent with the EH results.

At Enfield, there is no discernible trend when comparing the school-wide results from February 6 and the results from either EH-March 3 or the ICSD-March 10 or 3/10/16 – some results are higher and some are lower. The same is true when comparing the EH and the ICSD March data.

General conclusions at both schools include:

- Cleaning and changing the aerator does not produce a significant improvement in water quality.

- Changing the fixtures was not effective in reducing lead concentrations below the action level. The new fixtures meet the 2014 "lead free" requirements, but more information is needed to assess conditions at this location.

Results indicate that flushing may be effective at Caroline Elementary School. At some locations at Enfield, the lead concentrations in the flushed samples exceeded the action level, which may be an indication of problems with the plumbing. For both schools, a plumbing profile needs to be developed before significant additional sampling is conducted or changes are implemented. The ICSD is in the process of hiring a consultant to assist with these efforts.

On March 22, EH collected source water samples at Caroline and Enfield. Results are pending.

In addition to NYSDOH, the Environmental Protection Agency (EPA) has also offered their assistance. TCHD, NYSDOH and the ICSD held a conference call on March 4.

The Environmental Health Division continues to receive inquiries from other concerned schools. Trumansburg contacted about their results and follow-up action. We met with Dryden on March 10 to discuss their proposed sampling. Adriel Shea provided oversight at sampling at Freeville and Cassavant Elementary Schools on March 24. Results are pending.

Hydrilla: Anne Wildman represented the Health Department at the March meeting of the Hydrilla Local Task Force. Hydrilla has now been observed in the Cayuga Inlet, Fall Creek and the southeast corner of Cayuga Lake. As previously, the herbicides endothall and fluridone will be applied, but the application protocol continues to evolve. Instead of treating the entire Inlet north of the Fish Ladder in one application, this year the area has been divided into 10 segments, each area having a separate pesticide permit from the NYSDEC, to enable treating only those areas where and when hydrilla growth is observed. While this adaptive management approach requires increased plant monitoring, it is intended to result in less, but better targeted, chemical use. Treatment will be initiated in July or August, depending on observed plant growth.

Water Resources Council Committees: Liz Cameron is the Environmental Health Division representative to the Tompkins County Water Resources Council (WRC). Liz is a member of two new committees created by the WRC this year – the Watershed Rules and Regulations Committee and the Emerging Contaminants Committee. The Watershed Rules Committee will be reviewing existing watershed rules for watersheds in Tompkins County and elsewhere, working toward proposing revisions. The Emerging Contaminants Committee will be examining existing data and trying to identify data gaps and appropriate actions in this area.

Coalition for Safe Medication Disposal: A medicine disposal collection event was held at Kendal on March 15, 2016, from 10 am to 2 pm. TCHD staff from nursing and EH assisted during the collection event. 70 participants, including 61 Kendal residents participated in the event. A total of 55.85 pounds of unwanted medication was collected during the event.

Training:
On March 18, Rene Borgella, was one of guest speakers at the Tompkins Festivals workshop "Event Planning Boot Camp" hosted at Cinemapolis Movie Theater. Rene provided information on Temporary Food Service requirements.

On Friday, March 18, NYSACHO hosted a statewide webinar on "*What Local Health Departments Need to Know About the Hazards of Clandestine/Methamphetamine Laboratories.*" Janice Koski, René Borgella, Skip Parr, Chris Laverack, Joel Scogin, Steve Maybee, Cindy Schulte, Cynthia Mosher, Anne Wildman and Adriel Shea participated.

EH staff participated Phase 2 of Active Shooter Training that was held at the Health Department. The Phase 2 training was a classroom presentation called CRASE (Civilian Response to Active Shooter Events). Sgt. Jeremy Zigenfus and Deputy Karl Bower of the Tompkins County Sheriff's Office conducted the training. It covered disaster response psychology, talking about events that have occurred, and included discussion of ways to respond to them.

Rabies Control Program

There was one confirmed case of rabies in Tompkins County during March 2016. A confirmed rabid raccoon was submitted through Cornell Diagnostic Center. Fortunately there were no known exposures to the rabid raccoon but it does highlight the need to avoid contact with wild animals and to keep pets vaccinated against rabies.

Spring Rabies Clinics are scheduled to be held in May in the Towns of Lansing, Danby, Dryden, Enfield and Ithaca.

Key Data Overview				
	This Month	**YTD 2016**	**YTD 2015**	**TOTAL 2015**
Bites[1]	13	38	35	230
Non Bites[2]	1	1	1	72
Referrals to Other Counties	3	5	8	26
Submissions to the Rabies Lab	14	31	27	207
Human Post-Ex Treatments	1	1	6	93
Unvaccinated Pets 6-Month Quarantined[3]	0	1	0	2
Unvaccinated Pets Destroyed[4]	0	1	0	1
Rabid Animals (Laboratory Confirmed)	1	2	0	13

[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.
[3]When 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 2016**	**YTD 2015**	**Total 2015**	**By TCHD**	**By Cornell**	**Totals Mo**	**Totals YTD**	**Mo**	**YTD 2016**	**YTD 2015**	**Total 2015**
Cat	5	13	13	96	0	0	0	1	0	0	0	1
Dog	6	31	28	125	0	0	0	2	0	0	0	0
Cattle	0	0	0	0	0	0	0	0	0	0	0	0
Horse/Mule	0	0	0	0	0	0	0	0	0	0	0	0
Sheep/Goat	0	0	0	0	0	1	1	1	0	0	0	0
Domestic	0	1	0	2	0	1	1	2	0	0	0	0
Raccoon	0	0	0	2	1	1	2	2	1	1	0	3
Bats	0	0	0	3	7	1	8	15	0	0	0	7
Skunks	0	0	0	0	0	0	0	1	0	1	0	0
Foxes	0	0	0	0	0	0	0	1	0	0	0	1
Other Wild	2	3	0	2	0	2	2	6	0	0	0	1
Totals	**13**	**48**	**41**	**230**	**8**	**6**	**14**	**31**	**0**	**2**	**0**	**13**

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:

Antlers, T-Dryden
Borg Warner – Bldg #2, V-Lansing
Cornell Vet School Kiosk, T-Ithaca
Cornell Vet School Main Café, T- Ithaca
Creekside Café, V-Trumansburg
CU-Flora Rose Dining, C-Ithaca
CU-Jansen's at Bathe House, C-Ithaca
CU-Keeton House Dining, C-Ithaca
CU-Risley Dining, C-Ithaca
CU-Willard Straight Dining, C-Ithaca
Domino's Pizza, C-Ithaca
Dragon Village, V-Trumansburg
Dryden Community Center Café, V-Dryden
Dryden Middle School, T-Dryden
Fabrizio New York Pizzeria, V-Trumansburg
Firehouse Subs, C-Ithaca
Foodnet Central Kitchen, V-Lansing
Gimme! Coffee, V-Trumansburg
Glenwood Pines, T-Ulysses
Gorgers, C-Ithaca
Hawi Ethiopian Cuisine, C-Ithaca
IC-Egbert Dining Hall, T-Ithaca
IC-Terrace Dining, T-Ithaca
ICSD-Arts Café, C-Ithaca
ICSD-Beverly J. Martin Elementary, C-Ithaca
ICSD – Caroline Elementary, T-Caroline
ICSD-South Hill Elementary, C-Ithaca
Jade Garden, C-Ithaca
Madeline's Restaurant, C-Ithaca
Mahogany Grill, C-Ithaca
McGraw House, C-Ithaca
Northstar House, C-Ithaca
Papa John's, C-Ithaca
Pudgies Pizza & Subs, C-Ithaca
Red's Place, C-Ithaca
Redder's Bar & Grill, T-Ulysses
Rose's Home Dish, Throughout Tompkins
Smart Start Preschool, T-Ulysses
Subway Buttermilk Falls, C-Ithaca
SUMO Japanese Steakhouse, V-Lansing
Sunset Grill, T-Ithaca
Taco Bell #9587, C-Ithaca
Trumansburg Elementary School, V-Trumansburg
Trumansburg High School, V-Trumansburg
Trumansburg Middle School, V-Trumansburg
Unwind, V-Lansing
Yogurtland, 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:

AGAVA, T-Ithaca
Bun Appetit Bakery, V-Groton
Finger Lakes Residential Center, T-Lansing
Friends & Pho Vietnamese Restaurant, V-Lansing
Ithaca Ale House, C-Ithaca
Linda's Corner Diner, T-Lansing
Mark's Pizzeria, V-Groton
Pizza Hut, V-Lansing

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:

IC-Towers Dining Hall, T-Ithaca
Potentially hazardous foods were not kept at or above 140°F during hot holding. Product in a hot holding unit was observed to be at 130-138°F. The product was removed from service and rapidly reheated to 165°F or above before use.

New Delhi Diamonds, C-Ithaca
Potentially hazardous foods were not kept at or above 140°F during hot holding. Product in hot holding was observed to be at 116°F. The product was removed from service and rapidly reheated to 165°F or above before use.

Hal's Delicatessen, C-Ithaca
Food workers did not use proper utensils to eliminate bare hand contact with cooked or prepared foods. The products were discarded during the inspection.

Best Western University Inn, T-Ithaca
Potentially hazardous foods were not stored under refrigeration except during necessary preparation or approved precooling procedures (room temperature storage). Products on a counter for customer service were observed to be at 54-57°F and 57°F. The products were either discarded during the inspection or removed from service and rapidly chilled to 45°F or less.

Italian Carryout, T-Ithaca
Enough refrigerated storage equipment is not operated so that all potentially hazardous foods are cooled properly and stored below 45°F. Products in a refrigerated storage unit were observed to be at 51-54°F. The products were moved to working refrigerated storage and rapidly chilled to 45°F or less before use.

Fork and Gavel Café, C-Ithaca
Potentially hazardous foods were not kept at or below 45°F during cold holding. Products in a prep area cold holding unit were observed to be at 55-61°F. The products were move to the walk-in to be rapidly chilled to 45°F or less before use.

Collegetown Bagels – East Hill Plaza, T-Ithaca
Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F during cold holding. Products on the salad bar were observed to be at 48°F and 50°F. The products were removed from service and rapidly chilled to 45°F or less before use.

ICSD – Enfield Elementary School, T-Enfield
Toxic chemicals were improperly stored so that contamination of food could occur. Storage was rearranged during the inspection.

Taste of Thai, C-Ithaca
Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F during cold holding. Products in a cold holding unit were observed to be at 51-54°F. The products were discarded during the inspection.

Kelly's Dockside Kafe, C-Ithaca
Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or below 45°F during cold holding. Products in a cold holding unit were observed to be at 49-52°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 47 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:

Alpha Phi Omega Gamma Chapter – Root for Your Cause, City of Ithaca
Cornell Asian Pacific Islander Student Union – Asia Night, C-Ithaca
Cornell Indonesian Association 2016, C-Ithaca
Cornell University Chinese Student Association – Lunar New Year, City of Ithaca
Iranian Students Association, C-Ithaca

Critical Violations were found at the following establishments:

There were none observed this month.

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:

George Jr. Republic Ewald Dining, T-Dryden
Hive 45, V-Trumansburg
Jump Around Inflatables, T-Lansing

Plans Approved:

LonaCakes, V-Cayuga Heights

New Permits Issued:

Ba-Li Cravings, Throughout Tompkins
Oasis Halal Grill, C-Ithaca
Jump Around Inflatables, T-Lansing
Wild for Yogurt, V-Lansing

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

Engineering Plans Approved

- Holiday Inn Express Swimming Pool, Elmira Road, Ithaca-C
- Cass Park Pool – New Filtration System, Ithaca-C
- Trumansburg Road 500,000 gallon replacement water storage tank, Ithaca-T
- Rawlings 330 gpd sewage system, Lansing-T
- Christopher Circle water main replacement and Sapsucker Woods connection, Ithaca-T
- Camp Comstock Ranger Station 330 gpd sewage system, Ulysses-T
- Bartholomew 440 gpd sewage system, Bone Plain Road, Dryden-T

Three plans for cross-connection control to protect municipal water systems from hazardous connections were approved this month.

Problem Alerts/Emergency Responses

- A Boil Water Order for the John Joseph Inn was issued on March 4, 2016, due to a positive E. Coli sample result collected during quarterly sampling. The Inn is not scheduled to host any events until April. In the meantime, the issue is being investigated and further sampling is underway.

Healthy Neighborhoods Program

HEALTHY NEIGHBORHOODS PROGRAM	MONTH	YTD 2016	YTD 2015	Total 2015*
# of Initial Home Visits	20	68	81	406
# of Revisits	17	34	39	141
# of Asthma Homes (initial)	2	10	14	71
# of Homes Approached	27	147	101	888

***Covers the calendar year (January through December)**

Outreach

- On March 8, Pat Jebbett gave a presentation to the Northeast Pediatrics physicians and support personnel on the Healthy Neighborhoods Program
- On March 15, Pat met with Cynthia Kloppel and Marion Deats at Ithaca Housing Authority to share information about our programs.
- On March 22, Pat met with staff and tenants at Supportive Housing Unit of TC Action to promote HNP and discuss bedbug prevention and treatment.

Childhood Lead Program

CHILDHOOD LEAD PROGRAM	MONTH	YTD 2016	YTD 2015	TOTAL 2015
A: Active Cases (total referrals):				
A1: # of Children w/ BLL>19.9ug/dl	0	0	0	1
A2: # of Children w/ BLL 10-19.9ug/dl	0	0	0	3
B: Total Environmental Inspections:				
B1: Due to A1	0	0	0	1
B2: Due to A2	0	0	0	4
C: Hazards Found:				
C1: Due to B1	0	0	0	1
C2: Due to B2	0	0	0	4
D: Abatements Completed:	0	0	1	2
E: Environmental Lead Assessment Sent:	0	0	0	4
F: Interim Controls Completed:	0	0	0	0
G: Complaints/Service Requests (w/o medical referral):	21	52	12	61
H: Samples Collected for Lab Analysis:				
- Paint	0	0	0	1
- Drinking Water	0	0	0	1
- Soil	0	0	0	2
- XRF	0	0	0	3
- Dust Wipes	0	0	1	4
- Other	0	0	0	0

Summary of Open BOH Enforcement Actions:

Date of BOH Action	Facility	Owner/ Operator	Basis for Action	Penalty Assessed	Next BOH Order Deadline	Status
1/26/16	2374 Mecklenburg Road	Michael Morris	Discharge of Sewage to the Ground Surface	N/A	Complete replacement of sewage system by 4/15/16.	Monitoring Compliance
9/22/15	GrassRoots World Café	Lissa Farrell	Repeat Critical Violations	$400	Penalty Payment received.	Monitoring Compliance
12/10/13	Ulysses WD #3	Town of Ulysses	Public Water System Violations – Disinfection Byproducts	N/A	Detailed Construction plan and schedule due 4/15/16.	Monitoring Compliance
12/11/12	Village of Dryden PWS	Village of Dryden	Public Water System Violations – Arsenic and Storage Tank Replacement	N/A	Complete Test Wells and Monitoring Wells by 4/15/16.	Monitoring Compliance

TOMPKINS COUNTY HEALTH DEPARTMENT

Your Partner for a Healthy Community

ENVIRONMENTAL HEALTH 2015 ANNUAL REPORT

To strive to achieve a healthy community by protecting and promoting public health through education, training, advocacy, and the provisions of services.

"Your partner for a healthy community"

Frank Kruppa, Public Health Director

William Klepack, M.D., Medical Director

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

Inclusion through Diversity

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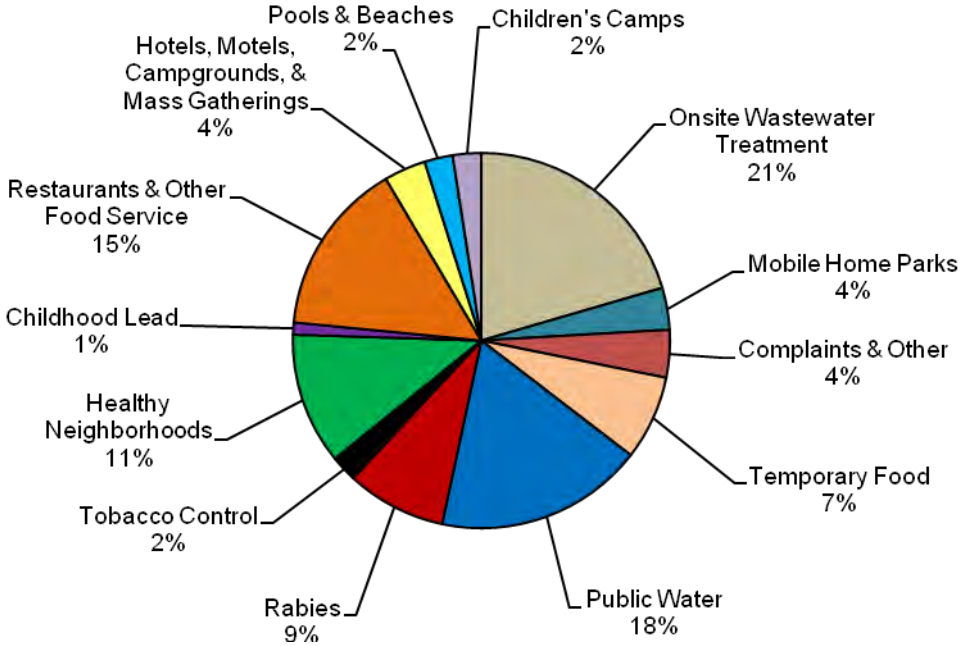
Staff Time in Environmental Health Programs - 2015



DIVISION OVERVIEW

The Tompkins County Environmental Health Division (EH) promotes public health by conducting environmental health inspections and related activities for settings such as restaurants and other food service establishments, children's camps, hotels, campgrounds, swimming pools, bathing beaches, drinking water, and on-site sewage treatment systems. The Division enforces the New York State (NYS) Public Health Law, NYS Sanitary Codes (NYSSC), and the TC Sanitary Code (TCSC). Staff conducts inspections, documents deficiencies and violations, recommends improvements or mandates corrections, and reviews engineering and other plans related to facility operation and design. Staff also conducts investigations of illness outbreaks and complaints, children's camp and swimming injuries, childhood lead poisoning, and we respond to public health nuisances, hazards, and emergencies.

SPECIAL PROJECTS AND EVENTS

Healthy Neighborhoods Program - The Tompkins County Health Department Environmental Health Division continues its grant-funded Healthy Neighborhoods Program (HNP). The Tompkins County HNP provides education and distributes safety products to homes in an effort to prevent indoor air pollution, to prevent asthma-related hospitalizations and deaths, to prevent residential injury and fire deaths, to prevent childhood lead poisoning and to reduce tobacco use.

The Tompkins County HNP was praised during its first program review by the New York State Department of Health (NYSDOH). In addition to providing education and distributing safety products at over 400 homes in 2015, Tompkins County HNP staff organized and sponsored an all-day meeting that was attended by 11 counties across New York State and representatives from the NYSDOH Central Regional Office. The HNP was also the subject of an article in the winter issue of the *In The Field of Environmental Health,* a publication of the NYSDOH Center for Environmental Health.

Accela Permit Management Software - The Environmental Health Division significantly expanded their use of the Accela Permit Management System. Originally configured to manage our On-Site Wastewater Treatment System Permits, all EH fees and other revenue are now handled through Accela. EH permits are now issued electronically through Accela for a number of our permitting programs, including Temporary Food Service, Mobile Home Parks and Temporary Residence.

Additionally, Accela was configured to allow on-line submission of EH permit applications and payments. The public may electronically submit public water supply fees and submit and pay for applications for a temporary food service event, children's camp, public swimming pool or beach, hotel or an on-site wastewater treatment system. In 2015, the public submitted over 500 applications and made 239 payments electronically. Approximately 80% of Temporary Food Service applications were submitted on-line.

Here's the link to the site if you want to check it out:

https://permits.tompkins-co.org/CitizenAccess/default.aspx

EH also finished digitizing all hard copy On-Site Wastewater Treatment System (OWTS) permits. All OWTS permits are now accessible electronically to EH staff and also to the public through the Accela public portal.

Temporary Food Service Program - Other significant administrative changes were introduced in the Temporary Food Service Program. With Accela, the program is essentially "paperless." Additionally, with the assistance of Tompkins County Information Technology Services (ITS), EH has a new training and education tool. Permit applicants now need to complete an interactive online training and quiz prior to receiving their temporary food permit. To

check it out, click on or enter the link to the training and quiz:

http://www.tompkinscountyny.gov/health/eh/food/tempfoodtraining

Hydrilla invades Cayuga Inlet – year 5 The Environmental Health Division continued its involvement in the Hydrilla eradication effort, participating in the Local Task Force and developing and overseeing the water quality monitoring program when aquatic herbicides are applied. The season's herbicide treatment (a combination of endothall and fluridone treatment) was terminated in mid-October; water-quality monitoring continued until concentrations reached the non-detect level in all samples. The 2015 treatment appears to have been very effective and herbicide use in some locations may be able to be reduced next year.

Water quality monitoring was conducted to assure the safety of the Bolton Point public water supply intake which is 2-1/2 miles from the inlet. Eradication efforts to date have been successful but will need to continue for multiple years to come. More information is available at **StopHydrilla.org.**

Personnel – Senior Public Health Sanitarian Steven Kern retired on March 12 with over 30 years of service. Steven is highly regarded for his expertise in public water systems, enforcement, and tobacco control, as well as many other programs. The Environmental Health staff has repeatedly praised Steven for his professional support and guidance. The office has also benefited from his sense of humor. Steven will be greatly missed on a professional and personal level.

Public Health Sanitarian Kristee Morgan was promoted to Senior Public Health Sanitarian. Kristee brings close to 10 years of experience to her new position and is a standardized Food Safety Inspection Officer II. She is well respected in the Division for her knowledge and her effective, respectful approach to people and problems

Public Health Sanitarian Sarah Caputi resigned effective May 15.

Despite being short-staffed during our busy summer months, the Environmental Health Division met all NYSDOH permitting and inspection requirements. Additionally, the Division had another technical staff person out on extended leave for the last quarter of 2015. Retired Senior Public Health Sanitarians Audrey Balander and Steven Kern returned in temporary positions to assist us.

Multiple interviews for two Public Health Sanitarian vacancies were conducted during August. René Borgella and Joel Scogin came on board in August and September as our new Public Health Sanitarians. René will be focusing on the Adolescent Tobacco Use Prevention Act (ATUPA), Temporary Food and Food Service programs. Joel is focusing on the On-Site Wastewater Sewage Treatment Program and Mobile Home Parks.

Project Assistant Caitlin Feller joined EH in a permanent capacity as an Information Aide. Caitlin has been extremely helpful with the Accela project and is now also assisting with core EH programs.

TCHD Information Aide Beau West completed coursework meeting the qualifications to be a Public Health Technician in EH. He worked half time in EH during our busy months, with EH Information Aide Caitlin Feller then working half-time for TCHD. Beau continues to help out EH for 5 hours a week.

Stephanie Egan-Engels joined the Healthy Neighborhoods Program as a Project Assistant beginning September 30th. Stephanie assists with outreach and education in HNP on a full-time basis through December.

René Borgella, Joel Scogin, and Beau West all completed the Basic Environmental Health Program (BEHP) in December.

DIVISION PROGRAMS

FOOD PROTECTION PROGRAM

The Food Protection Program provides education and regulates permitted food service establishments (FSE's) through training, inspection, and enforcement. These tasks enable the Division to protect, promote, and preserve public health with the goal of preventing food borne illnesses. Staff conducts pre-operational inspections following a facility plan review at new facilities and at existing facilities with major renovations. All FSE's are inspected at least once a year; high-risk establishments are inspected twice a year. Re-inspections are performed to ensure that critical violations have been corrected.

Temporary food service permits are issued for festivals and other events. Permit applicants receive appropriate food safety education and are inspected based on risk.

MOBILE HOME PARKS

Staff permits, monitors, and inspects mobile home parks to maintain a healthy environment for its residents as defined by state and local sanitary codes. In addition, the Division responds to complaints associated with mobile home parks.

TEMPORARY RESIDENCES

Staff permits and inspects hotels, motels, and similar temporary residence operations to ensure proper sanitation and safety for the protection of the public. The inspections include review of public water supplies, restaurants, swimming pools, and bathing beaches.

CAMPGROUNDS AND AGRICULTURAL FAIRGROUNDS

Staff permits and inspects campgrounds and fairgrounds to ensure proper sanitation and safety for the protection of the public. Inspections include a review of proper spacing of the campsites for fire safety and shower and sanitary facilities. The inspections include review of public water supplies, swimming pools, and bathing beaches.

CHILDREN'S CAMPS

Staff permits and inspects summer camp facilities annually to ensure that adequate supervision and safeguards exist to provide a healthy and safe environment for children as required by the NYSSC. In addition, staff reviews and approves safety plans and camp staff certifications. Staff also investigates all injuries and illnesses that occur at children's camps.

Injuries and Illnesses at Children's Camps – Eleven injuries and illnesses were reported from permitted children's camps during the 2015 camp season.

SWIMMING POOLS AND BATHING BEACHES

Public swimming pools and bathing beaches are regulated to ensure that the facilities are constructed, maintained, and operated in a manner to prevent illnesses, injuries, and deaths. A major focus of the program is on bather supervision, lifeguard requirements, and life-saving equipment and its use. General safety provisions, chemical treatment, and the proper operation of equipment and maintenance of such facilities are also examined.

DRINKING WATER PROGRAM

The Drinking Water Program is designed to assure that the public has access to adequate quantities of safe drinking water. Staff inspects all public water systems annually and collects surveillance samples to assure that the systems provide safe, potable water. Technical assistance is provided to system operators in preparing Annual Water Quality Reports and in complying with new or complex regulations including sampling requirements. When a public health hazard is identified at a public water supply, the Division issues a Boil Water Order (BWO), which requires the water supplier to notify its users that the water is unsafe and must be boiled before use. Staff also responds to individuals inquiring about water quality problems by offering sampling recommendations, interpretations of water laboratory analyses, and providing procedures for disinfecting their well.

Taste Test Held – The Division held the County's 21st Annual Drinking Water Taste Test at the Streets Alive Event in Ithaca. Approximately 175 participants sampled water from seven municipal water systems in Tompkins County. The City of Ithaca Water System was voted the best tasting water and represented Tompkins County competing in a Regional State Water Taste Test.

ON-SITE WASTEWATER TREATMENT SYSTEM (OWTS) PROGRAM

All county residents are required to obtain a permit from the Division before installing a new on-site sewage system or repairing or replacing an existing one. Staff reviews, designs, inspects, and permits new and replacement on-site sewage treatment systems. In addition, staff investigates and enforces code requirements when nuisance complaints are reported in regard to failing or improperly maintained sewage systems. Engineering plans of sewer extensions, pumping stations, and sewage treatment systems are reviewed to ensure compliance with standards and codes for larger public wastewater treatment systems. The goal of the program is to prevent disease caused by raw sewage contaminating the environment we live in and the water we drink.

REALTY SUBDIVISIONS AND DEVELOPMENTS

The Division regulates permanent and temporary residential development to ensure that safe, healthful facilities are built. Critical areas the Division reviews include water systems and wastewater treatment and disposal systems. In addition, plans for construction, addition, or modification of any public water supply must be reviewed to ensure compliance.

RABIES CONTROL PROGRAM

Rabies is a preventable viral disease that attacks the central nervous system and typically leads to death. The disease can be transmitted from infected mammals to humans and other mammals. Staff investigates all reported mammal bites and saliva exposures to prevent the spread of the disease to humans. In addition, staff prepares and ships suspected rabid specimens to the state laboratory for testing, provides outreach and education, authorizes rabies prophylaxis to local medical providers, and coordinates free rabies vaccination clinics for dogs, cats, and ferrets.

CHILDHOOD LEAD POISONING PREVENTION

The Division works with the Lead Poisoning Prevention Network to educate the public about lead poisoning, to reduce lead exposures by informing the public about the potential dangers of lead paint, and to increase the number of children tested for lead in their blood. Lead poisoning is a major health concern, especially among children, because it can affect their growth, behavior, and ability to learn. Staff investigates all referrals of children with blood lead levels of 10 milligrams per deciliter or greater.

ADOLESCENT TOBACCO USE PREVENTION ACT (ATUPA)

Tobacco vendors are prohibited by law from selling cigarettes and other tobacco products to minors under the age of 18. The goal of the ATUPA Program is to reduce access to tobacco and tobacco products by persons under the age of 18 by monitoring and conducting on-site compliance checks at all tobacco retailers.

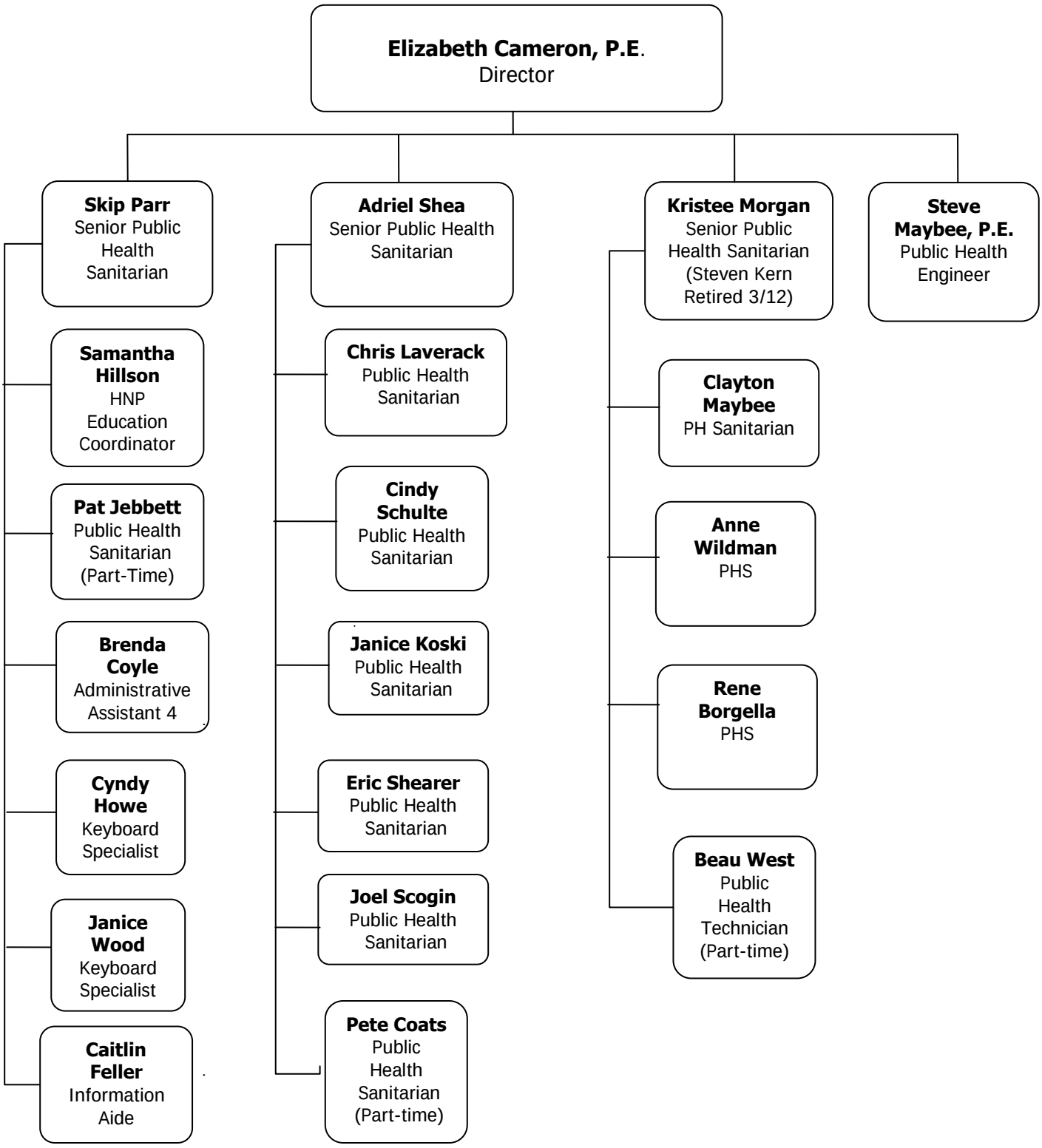
CLEAN INDOOR AIR ACT (CIAA) AND TOMPKINS COUNTY LOCAL LAW #3

State and local laws make smoking tobacco illegal in all public indoor areas including bars and food service establishments. Staff investigates complaints and conducts field visits when necessary to enforce these laws. The Fraternal Order of Eagles is the only operation in Tompkins County that has been granted a waiver from these requirements by providing a controlled, alternative smoking area that meets specific requirements.

HEALTHY NEIGHBORHOODS PROGRAM (HNP)

The HNP promotes healthy homes in specific target areas of Tompkins County by pursuing the following goals: prevention of indoor air pollution, prevention of asthma hospitalizations, prevention of residential fire deaths, prevention of lead poisoning, and reduction of indoor tobacco use. Staff assesses homes through on-site visits and provides products to help make the home safer and healthier.

ENVIRONMENTAL HEALTH DIVISION 2015 ORGANIZATIONAL CHART



2015 ENVIRONMENTAL HEALTH DIVISION DATA

FOOD PROTECTION PROGRAM

Restaurants & Other Food Service	*Permitted Operations*	*Site Visits*	*Critical Violations*	*Other Violations*	*Plan Reviews*	*Complaint Investigations*	*Enforcement Actions*
High Risk	133	449			3		
Medium Risk	207	326	150	256	8	64	7
Low Risk	67	116			9		
Total	**403**	**891**	**150**	**256**	**20**	**64**	**7**
Temporary FSE	456	163	19	14	0	0	1

MOBILE HOME PARKS

Permitted Operations	*Lots*	*Site Visits*	*Critical Violations*	*Other Violations*	*Complaint Investigations*	*Enforcement Actions*
39	2,014	30	19	241	8	0

TEMPORARY RESIDENCES

	Permitted Operations	*Rooms*	*Site Visits*	*Critical Violations*	*Other Violations*	*Complaint Investigations*	*Enforcement Actions*
Hotels & Motels	31	1,842	51	7	68	5	2

MASS GATHERING, CAMPGROUNDS & AGRICULTURAL FAIRGROUNDS

	Permitted Operations	*Sites*	*Site Visits*	*Critical Violations*	*Other Violations*	*Complaint Investigations*	*Enforcement Actions*
Campgrounds	6	488	13	0	3	0	0
Agricultural Fairgrounds	1	1	2	0	1	0	0
Mass Gathering	1	1	8	0	0	0	0

CHILDREN'S CAMPS

Permitted Operations	*Campers*	*Site Visits*	*Critical Violations*	*Other Violations*	*Injury/Illness Investigations*	*Complaint Investigations*	*Enforcement Actions*
33	n/a	81	0	6	11	0	0

SWIMMING POOLS & BATHING BEACHES

	Permitted Operations	*Site Visits*	*Critical Violations*	*Other Violations*	*Injury/Illness Investigations*	*Complaint Investigations*	*Enforcement Actions*
Pools	51	87	7	52	0	0	0
Beaches	6	12	1	2	0	0	0

PUBLIC WATER SYSTEMS (PWS)

Community PWS	89	Boil Water Orders Issued	13
Other PWS	53	Disinfection Waivers	23
Complaint Investigations	8 (MHP)	Enforcement Actions	1

ON-SITE WASTEWATER TREATMENT SYSTEMS (OWTS)

Permits Issued		*Completion Certificates Issued*		*Enforcement Actions*
New Construction/Conversions	138	New Construction/Conversions	105	3
Replacements	112	Replacements	105	
Total # of Permits Issued	**250**	**Total # of Permits Issued**	**210**	

2015 ENVIRONMENTAL HEALTH DIVISION DATA

ENGINEERING PLAN REVIEWS

ON-SITE WASTEWATER TREATMENT SYSTEMS		PUBLIC WATER SYSTEMS (PWS)	
0 - 499 gpd	18	Public Water Systems	1
500 - 999 gpd	9	Distribution Water Main Extensions	2
1,000 - 1,999 gpd	1	Cross-Connection Control Devices	6
> 2,000 gpd	0	Other Water System Modification	5

REALTY SUBDIVISIONS		COLLECTOR SEWER		OTHER ENGINEERING REVIEWS
Projects	1	< 5,000'	0	
Lots	28	>5,000'	0	2

RABIES CONTROL PROGRAM

Potential Human Exposures to Rabies / Lab Submissions / Rabies Clinics

Potential Human Exposure Investigations	302	Rabies Clinics Offered	11
Human Post-Exposure Treatments	93	Dogs Vaccinated	578
Animal Specimens Tested	207	Cats Vaccinated	269
Animals Testing Positive	13	Ferrets Vaccinated	4
Enforcement Actions	0	Pet Quarantined for 6-Months	2

CHILDHOOD LEAD PROGRAM

Children with Elevated Blood Lead Levels	4		
Sites Inspected	5	Enforcement Actions	0
Abatements Completed	2		
Lead Assessments Sent	4		

HEALTHY NEIGHBORHOODS PROGRAM

Home Visits	406	Asthma Homes	71
Re-Visits	141	Homes Approached	888

ADOLESCENT TOBACCO USE PREVENTION ACT (ATUPA)

Active Operations	68	Violations	0
ATUPA Compliance Checks	93	Enforcement Actions	0

COMPLAINTS

General/Nuisance Complaints	31	Enforcement Actions	0

STAFF DAYS (Excluding Leave Time)

Public Water Supply	605.0
Environmental Radiation	2.2
Community Sanitation and Food Protection	1934.9
Environmental/Occupational Health	21.7
Miscellaneous	291.9
Other Environmental Services	519.4
Total Staff Days / Full Time Employees	**3375.2**

REVENUE

Facility Permit Fees	$224,133.39
On-Site Wastewater System Fees	$98,360.00
Water System Operating Fees	$26,505.00
Plan Review Fees	$19,125.00
Board of Health Penalties	$7,100.00
Other Fees	$6,301.12
Sub-Total Revenue	**$381,524.51**
Official Payments Client Fees	**$931.49**
Total Revenue	**$380,593.02**

NYSDOH GRANTS

Healthy Neighborhoods Program	$189,000
Drinking Water Enhancement Program	$135,820
Tobacco Enforcement Program	$33,710

ENVIRONMENTAL HEALTH DIVISION'S HISTORY OF PROGRAM ACTIVITIES BY YEAR

FOOD PROTECTION PROGRAM - *Restaurants & Other Food Service*					
	2015	**2014**	**2013**	**2012**	**2011**
Permitted Operations	547	550	530	519	496
Site Visits (Includes Inspections)	891	888	883	774	750
Critical Violations	150	171	172	131	187
Other Violations	256	235	261	209	302
Plan Reviews	20	17	16	11	13
Temporary FSE					
Permitted Operations	456	386	353	303	297
Site Visits (Includes Inspections)	163	133	136	110	134
Critical Violations	19	14	27	11	16
Other Violations	14	12	7	0	5
MOBILE HOME PARKS	**2015**	**2014**	**2013**	**2012**	**2011**
Permitted Operations	39	39	39	40	42
Lots	2014	2005	2004	2,011	2022
Site Visits (Includes Inspections)	30	47	42	110	76
Critical Violations	19	1	4	5	7
Other Violations	241	10	64	60	74
TEMPORARY RESIDENCES - *Hotels & Motels*	**2015**	**2014**	**2013**	**2012**	**2011**
Permitted Operations	31	31	31	29	29
Rooms	1842	1878	1879	1,761	1,756
Site Visits (Includes Inspections)	51	35	52	52	42
Critical Violations	7	0	2	1	1
Other Violations	68	8	24	15	5
MASS GATHERING[1], CAMPGROUNDS & AGRICULTURAL FAIRGROUNDS					
	2015	**2014**	**2013**	**2012**	**2011**
Permitted Operations	8	6	8	9	10
Sites	490	426	2016	2,065	2,103
Site Visits (Includes Inspections)	23	22	31	38	29
Critical Violations	0	0	1	2	3
Other Violations	4	1	5	6	4
CHILDREN'S CAMPS	**2015**	**2014**	**2013**	**2012**	**2011**
Permitted Operations	33	35	30	28	24
Site Visits (Includes Inspections)	81	85	78	73	59
Critical Violations	0	0	0	0	0
Other Violations	6	4	6	7	11
Injury/Illness Investigations	11	46	31	45	28
SWIMMING POOLS & BATHING BEACHES - *Indoor/Spa, Outdoor & Bathing Beaches*					
	2015	**2014**	**2013**	**2012**	**2011**
Permitted Operations	57	58	58	59	61
Site Visits (Includes Inspections)	99	114	119	118	171
Critical Violations	8	5	6	10	13
Other Violations	54	43	133	91	43
Injury/Illness Investigations	0	2	1	2	0
PUBLIC WATER SYSTEMS (PWS)	**2015**	**2014**	**2013**	**2012**	**2011**
Community PWS	89	90	94	93	93
Other PWS	53	57	52	57	56
Boil Water Orders Issued	13	17	15	14	19
Disinfection Waivers	23	25	25	28	35

ENVIRONMENTAL HEALTH DIVISION'S HISTORY OF PROGRAM ACTIVITIES BY YEAR

ON-SITE WASTEWATER TREATMENT SYSTEMS	2015	2014	2013	2012	2011
Permits Issued					
New Construction/Conversions	138	125	121	134	134
Replacements	112	122	121	101	115
Completion Certificates Issues					
New Construction/Conversions	105	105	84	95	94
Replacements	105	122	104	102	96
ENGINEERING PLAN REVIEWS	**2015**	**2014**	**2013**	**2012**	**2011**
Realty Subdivisions	1	1	0	0	4
On-Site Wastewater Treatment Systems	28	14	31	21	23
Collector Sewer	0	0	1	0	1
Public Water Systems	1	0	6	1	2
Distribution Water Main Extension	2	2	4	8	4
Cross-Connection Control Devices	6	6	21	9	9
Other Water System Modification	5	4	5	11	7
Other Engineering Reviews[2]	2	1	1	2	0
RABIES CONTROL PROGRAM	**2015**	**2014**	**2013**	**2012**	**2011**
Potential Human Exposure Investigations	302	253	300	373	353
Human Post-Exposure Treatments	93	103	88	118	98
Animal Specimens Tested	207	190	203	187	148
Animals Testing Positive	13	12	8	13	8
Rabies Clinics Pet Vaccinations	851	1,096	1,243	1,375	1,316
CHILDHOOD LEAD PROGRAM	**2015**	**2014**	**2013**	**2012**	**2011**
Children with Elevated Blood Lead Levels	4	5	7	0	0
Sites Inspected	5	11	10	6	6
Abatements Completed	2	0	1	0	0
Lead Assessments Sent	4	5	6	6	4
HEALTHY NEIGHBORHOODS PROGRAM	**2015**	**2014**	**2013**	**2012**	**2011**
Home Visits	406	426	398	458	426
Re-visits	141	98	80	195	181
Asthma Homes	71	67	52	44	31
Homes Approached	888	2,034	641	1,307	763
ADOLESCENT TOBACCO USE PREVENTION ACT	**2015**	**2014**	**2013**	**2012**	**2011**
Active Operations	68	68	66	66	66
ATUPA Compliance Checks	93	135	153	129	133
Violations	0	1	6	3	1
COMPLAINTS - *Facility & General/Nuisance*	**2015**	**2014**	**2013**	**2012**	**2011**
Complaint Investigations	108	97	119	149	172
ENFORCEMENT ACTIONS	**2015**	**2014**	**2013**	**2012**	**2011**
Total Cases	14	29	32	31	29
BOH Penalties Assessed	$5,400	$24,300	$10,200	$11,200	$10,200
BOH Penalties Collected [3]	$7,100	$13,800	$8,320	$7,680	$6,200
TIME BREAKDOWN	**2015**	**2014**	**2013**	**2012**	**2011**
Staff Days Excluding Leave	3375.2	3353.1	3400.3	3416.0	3344.0
REVENUE	**2015**	**2014**	**2013**	**2012**	**2011**
Total Collected	$380,593	$364,311	$359,193	$324,796	$280,858
NYSDOH GRANTS	**2015**	**2014**	**2013**	**2012**	**2011**
Healthy Neighborhoods Program (Oct 1 - Sept 30)	$189,000	$189,000	$83,482 [4]	$185,000	$185,000
Drinking Water Enhancement Program (Apr 1 - Mar 31)	$135,820	$135,820	$135,820	$143,855	$143,855
Tobacco Enforcement Program (Apr 1 - Mar 31)	$33,710	$32,395	$34,059	$35,004	$16,421 [5]

[1]GrassRoots established as a Mass Gathering in 2014
[2]Includes MHP's, Campgrounds, and Swimming Pools
[3]Penalties collected may include penalties assessed in previous years
[4]HNP Grant 6 Month Extension 10/1/13-3/31/14
[5]ATUPA Grant 6 Month Extension 10/1/11-3/31/12

TOMPKINS COUNTY HEALTH DEPARTMENT
Your Partner for a Healthy Community

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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CERTIFIED, REGULAR, & ELECTRONIC MAIL

March 17, 2016

Adam Chung
Japan-U.S. Association
Cornell University, William Keeton House, 301E
Ithaca, NY 14853

Re: Tompkins County Board of Health Draft Resolution # EH-ENF-16-0004 Japan-U.S. Association, Temporary Food Service, Sushi Night 2016 - Cornell University, C-Ithaca

Dear Mr. Chung:

Thank you for signing the Stipulation Agreement on March 15, 2016, for the Japan-U.S. Association.

Enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, April 26, 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

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\Japan-U.S. Association\Draft Resolution.docx
ec: Tompkins County Board of Health (via; Shelley Comisi, TCHD)
Matthew Stockton, Cornell University; Mayor Myrick; Carol Chock, TC Legislature; TCHD: Elizabeth Cameron, P.E., Director of Environmental Health; Frank Kruppa, Public Health Director; Kristee Morgan; Rene Borgella; Skip Parr; Brenda Coyle
scan: Signed copy to Accela

TOMPKINS COUNTY HEALTH DEPARTMENT
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DRAFT RESOLUTION # EH-ENF-16-0004 FOR

Japan-U.S. Association
Adam Chung, Operator
Cornell University, C-Ithaca
Ithaca, NY 14853

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 February 6, 2016, while operating at a preparation site at Cornell University, 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. Trays of sushi were observed sitting on counters at temperatures of 56°F, 62°F and 68°F; **and**

Whereas, on February 6, 2016, while operating at Sushi Night 2016 at Cornell University, the Tompkins County Health Department (TCHD) observed a repeat critical violation which included potentially hazardous foods stored at improper temperatures between 45°F and 140°F. Two trays of sushi were observed on counters for service at temperatures of 66°F and 68°F; **and**

Whereas, Adam Chung, Operator, signed a Stipulation Agreement with Public Health Director's Orders on March 15, 2016, agreeing that Japan-U.S. Association 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 the Japan-U.S. Association, is ordered to:

1. Use a Tompkins County Health Department approved caterer for any future hosted events that involve complex food preparation; **and**
2. 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 to comply with all the requirements of Subpart 14-2 of the NYSSC for any future temporary food event.

TOMPKINS COUNTY HEALTH DEPARTMENT
Your Partner for a Healthy Community

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

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STIPULATION AGREEMENT AND ORDERS # EH-ENF-16-0004

Japan-U.S. Association
Adam Chung, Operator
Cornell University, C-Ithaca
Ithaca, NY 14853

I, Adam Chung, as a representative for the Japan-U.S. Association, agree that on February 6, 2016, the Japan-U.S. Association was in violation of Part 14-2 of New York State Sanitary Code (NYSSC) for storing potentially hazardous foods at improper temperatures.

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

1. To use a Tompkins County Health Department approved caterer for any future hosted events that involve complex food preparation; **and**
2. To 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 to comply with all the requirements of Subpart 14-2 of the NYSSC for any future temporary food event.

I understand that, if any of the above Orders are not met, the Tompkins County Health Department (TCHD) may not issue a subsequent permit to Japan-U.S. Association to operate a temporary food service establishment in Tompkins County for a period of three (3) years.

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: Adam Chung Date: 03/15/16

The Japan-U.S. Association is hereby ordered to comply with these Orders of the Public Health Director.

Signed: Frank Kruppa Date: 3/15/16
Frank Kruppa
Public Health Director

TOMPKINS COUNTY HEALTH DEPARTMENT
Your Partner for a Healthy Community

Frank Kruppa
Public Health Director
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Ithaca, NY 14850-1247

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CASE SUMMARY – FOR RESOLUTION # ENF-16-0004

Japan-U.S. Association
Adam Chung, Operator
Cornell University, C-Ithaca
Ithaca, NY 14850

Updated March 2016

Date	Action
3/15/2016	The stipulation agreement was signed by the operator during the office conference.
3/1/2016	Stipulation agreement sent by TCHD. A fine against the organization was not included in the stipulation agreement because the Division was seeking to eliminate future preparation of complex foods by the organization.
02/06/2016	**Re-Inspection at Service Site (Clark Atrium) for Sushi Night 2016:** Potentially hazardous food observed stored at improper temperatures between 45°F and 140°F. Two trays of sushi rolls (approx 2-3 pounds each) were observed on the counter for service at 66 and 68°F. Temperature logs and product labeling were not implemented as required by the waiver. Accurate thermometers were not available at the site for monitoring temperatures.
02/06/2016	**Inspection at Preparation Site (Stocking Hall) for Sushi Night 2016:** Potentially hazardous food observed stored at improper temperatures between 45°F and 140°F. Trays of sushi were observed sitting on counters in kitchen at 56,62 and 68°F. Inadequate facilities were available to maintain temperatures. Large amounts of sushi ingredients were left out at room temperature for sushi preparation, adequate refrigeration had not been identified to store these products during preparation to allow for preparation using limited ingredients. Operators had agreed to rent additional refrigerators for the event but decided on 02/06/2016 not to rent refrigerators.
02/04/2016	Pre-operational meeting held with TCHD staff and various members of Japan-U.S. Association. Waiver criteria and various food safety topics were discussed.
09/26/2015	**Inspection at Ennichi: Summer Festival:** Potentially hazardous foods stored at improper temperatures between 45°F and 140°F. A large chafing dish of rice was observed at 128°F. Curry sauce was observed at 137°F.
09/26/2015	Permit to operate issued to Japan-U.S. Association for Ennichi: Summer Festival 2015.

TOMPKINS COUNTY HEALTH DEPARTMENT
Your Partner for a Healthy Community

Frank Kruppa
Public Health Director
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Ithaca, NY 14850-1247

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CERTIFIED, REGULAR, & ELECTRONIC MAIL

March 23, 2016

Tim Ciaschi
ROCAT Grove, LLC.
805 West Buffalo Street
Ithaca, NY 14850

Re: Tompkins County Board of Health Draft Resolution # EH-ENF-16-0005
Alleged Violation of Adolescent Tobacco Use Prevention Act (ATUPA)
Pete's Grocery & Deli, C-Ithaca

Dear Mr. Ciaschi:

Thank you for signing the Stipulation Agreement on March 18, 2016, for Pete's Grocery & Deli.

Enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, April 26, 2016**. 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

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

Enclosures – Draft Resolution, Stipulation Agreement and Orders

pc: F:\EH\TOBACCO\ATUPA\Facilities - Violations\Pete's Grocery & Deli\2016\Draft Res EH-ENF-16-0005.docx
ec: Tompkins County Board of Health (via; Shelley Comisi, TCHD)
Ithaca Building Department; Mayor Myrick; Leslyn McBean-Clairborne, TC Legislature; Margaret Dietrich, NYSDOH; TCHD: Elizabeth Cameron, P.E., Director of Environmental Health; Frank Kruppa, Public Health Director; Rene Borgella; Skip Parr; Brenda Coyle
scan: Signed copy to Accela

TOMPKINS COUNTY HEALTH DEPARTMENT
Your Partner for a Healthy Community

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

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

Ph: (607) 274-6688
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DRAFT RESOLUTION # EH-ENF-16-0005 FOR

Pete's Grocery & Deli
Tim Ciaschi, ROCAT Grove LLC., Owner/Operator
805 West Buffalo Street
Ithaca, New York 14850

Whereas, the representative of a business that sells retail tobacco products must comply with the regulations of Article 13-F, Section 1399-cc of the New York State Public Health Law (NYSPHL); **and**

Whereas, on February 27, 2016, the Tompkins County Health Department observed the sale of a tobacco product to a minor at Pete's Grocery & Deli; **and**

Whereas, the Stipulation Agreement informed Tim Ciaschi that, Pete's Deli & Grocery will be assigned two points for this violation of the ATUPA law unless it can be demonstrated that the seller possessed a certificate from a state certified tobacco sales training program; **and**

Whereas, the Stipulation Agreement informed Tim Ciaschi that, the Health Department will conduct at least three inspections each year for the next three years at Pete's Grocery & Deli. If Pete's Grocery & Deli is assigned a total of three or more points due to future sales to a minor, its registration to sell tobacco and, if a lottery agent, its lottery license will be suspended for 6 months; **and**

Whereas, Tim Ciaschi, Owner, signed a Stipulation Agreement with Public Health Director's Orders on March 18, 2016, agreeing that Pete's Grocery & Deli violated Article 13-F, Section 1399-cc of the NYSPHL; **now therefore be it**

Resolved, on recommendation of the Tompkins County Board of Health,
That Tim Ciaschi, Owner, is ordered to:

1. Pay a penalty, not to exceed $450 plus a $50 state mandatory surcharge for this violation, due by **June 15, 2016**. (**Do Not** submit penalty payment until notified by the Tompkins County Health Department); **and**

2. Prohibit the sale of tobacco products to minors.

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STIPULATION AGREEMENT AND ORDERS # EH-ENF-16-0005

Pete's Grocery & Deli
Tim Ciaschi, ROCAT Grove LLC., Owner/Operator
805 West Buffalo Street
Ithaca, New York 14850

I, Tim Ciaschi, as a representative for Pete's Grocery & Deli, agree that on February 27, 2016, Pete's Grocery & Deli was in violation of New York State Public Health Law, Article 13F, Section 1399-cc for selling tobacco to a minor.

I understand that Pete's Deli & Grocery will be assigned two points for this violation of the ATUPA law unless it can be demonstrated that seller possessed a certificate from a state certified tobacco sales training program. In that case, Pete's Deli & Grocery will be assigned one point. These points will be removed in three years.

I understand that at least three inspections will be conducted each year for the next three years. If Pete's Grocery & Deli is assigned a total of three or more points due to future sales to a minor, its registration to sell tobacco and, if a lottery agent, its lottery license will be suspended for 6 months.

I agree to pay a penalty, not to exceed $450 plus a $50 surcharge for this violation, 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 prohibit the sale of tobacco products to minors.

I understand this agreement is offered as an alternative to a formal administrative hearing and that Pete's Grocery & Deli is subject to further action if I fail to comply with the orders.

Signed: _____ Date: 3/15/2016

Tim Ciaschi is hereby ordered to comply with these Orders of the Public Health Director.

Signed: Brenda L. Gunnell Crosby Date: 3/21/18
for Frank Kruppa
Public Health Director

RECEIVED
MAR 21 2016
TCHD

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CERTIFIED, REGULAR, & ELECTRONIC MAIL

March 24, 2016

Jay Bramhandkar
Garuda Hotels Inc.
2303 N Triphammer Rd
Ithaca, NY 14850

Re: Tompkins County Board of Health Draft Resolution # EH-ENF-16-0006
County Inn and Suites, Temporary Residence Food Service Establishment, T-Ithaca

Dear Mr. Bramhandkar:

On February 2, 2016, Health Department staff inspected Country Inn & Suites Food Service Establishment and observed violations of Part 14-1 of the New York State Sanitary Code. The critical violation included failure to maintain potentially hazardous foods at or above 140°F during hot holding. Approximately 18 omelets were observed between 122°F and 125°F in a chafing pan on the counter in the service area.

At a re-inspection on March 1, 2016, Health Department staff observed an additional critical violation where scrambled eggs in a chafing dish were observed at a temperature of 119°F and link sausage was observed in a chafing dish at temperatures between 135°F and 138°F in the service area. These are violations of Board of Health Orders #14.14.25 requiring compliance with all the requirements of Subpart 14-1 of the New York State Sanitary Code for Food Service Establishments.

Therefore, enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, April 26, 2016**. 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

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

Enclosures – Draft Resolution, BOH Orders #14.14.25 and Case Summary

pc: F:\EH\TEMPORARY RESIDENCE (TR)\Facilities (TR-4)\Country Inn & Suites\Enforcement-Legal\ENF-16-0006\Draft Res ENF-16-0006.docx
ec: Tompkins County Board of Health (via; Shelley Comisi, TCHD)
CEO T-Ithaca; Supervisor T-Ithaca; Will Burbank, TC Legislature; TCHD: Elizabeth Cameron, P.E., Director of Environmental Health; Frank Kruppa, Public Health Director; Adriel Shea; Kristee Morgan; Skip Parr; Brenda Coyle
scan: Signed copy to Accela

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DRAFT RESOLUTION # EH-ENF-16-0006 FOR

Country Inn and Suites
Jay Bramhandkar, Garuda Hotels Inc., Owner/Operator
1100 Danby Road
Ithaca, NY 14850

Whereas, the owner operator of a Temporary Residence Food Service Establishment must comply with the regulations established under Subparts 7-1 and 14-1 of the New York State Sanitary Code; **and**

Whereas, on October 28, 2014, the Tompkins County Board of Health adopted Resolution 14.14.25 which requires compliance with all the requirements of Subpart 14-1 of the New York State Sanitary Code for Food Service Establishments; **and**

Whereas, on February 2, 2016, the Tompkins County Health Department observed critical violations which included failure to maintain potentially hazardous foods at or above 140°F during hot holding. Approximately 18 omelets were observed between 122°F and 125°F in a chafing pan on the counter in the service area; **and**

Whereas, on March 1, 2016, the Tompkins County Health Department observed critical violations which included failure to maintain potentially hazardous foods at or above 140°F during hot holding. Approximately two quarts of scrambled eggs in a chafing dish were observed at a temperature of 119°F and link sausage was observed in a chafing dish at temperatures between 135°F and 138°F in the service area; **and**

Whereas, Jay Bramhandkar, Owner/Operator, violated these provisions of the New York State Sanitary Code and of the Tompkins County Board of Health Orders adopted on October 28, 2014; **now therefore be it**

Resolved, on recommendation of the Tompkins County Board of Health,
That Jay Bramhandkar, Owner/Operator, is ordered to:

1. Pay a penalty of $800 for these violations, due within 30 days notice. (**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; **and**
3. Maintain all potentially hazardous food temperatures at or above 140°F at all times during hot holding; **and**
4. Establish and maintain a temperature monitoring log to record potentially hazardous food temperatures twice a day during cold and hot holding. The temperature monitoring log shall contain the name of the food checked, the temperature of the food, the person's initials taking the food temperatures, and the time the food temperature is taken. The log shall be available during business hours; **and**

5. Ensure that at least one food service worker attend and successfully complete a food safety training course approved by the Tompkins County Health Department (TCHD). The certificate documenting successful completion of the course must be submitted to the TCHD by **July 29, 2016.**
6. Maintain one food service worker who has successfully completed the food safety training course on-site during hours of operation following the completion of the initial training.
7. Comply with all the requirements of Subpart 14-1 of the New York State Code for Food Service Establishments.

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RESOLUTION # 14.14.25 FOR

Country Inn and Suites
Jay Bramhandkar, Garuda Hotels Inc., Owner/Operator
1100 Danby Road
Ithaca, NY 14850

Whereas, the owner operator of a Temporary Residence Food Service Establishment must comply with the regulations established under Subparts 7-1 and 14-1 of the New York State Sanitary Code; **and**

Whereas, on July 22, 2014, 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 35 containers of yogurt were observed at temperatures 51°F in the small on-counter refrigerator; **and**

Whereas, on September 9, 2014, 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 30 containers of yogurt were observed at temperatures between 47°F and 51°F in the small on-counter refrigerator; **and**

Whereas, Jay Bramhandkar, Owner/Operator, signed a Stipulation Agreement with Public Health Director's Orders on October 6, 2014, agreeing that Country Inn and Suites 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 Jay Bramhandkar, Owner/Operator, is ordered to:

1. Pay a penalty of $400 for these violations, due by **December 15, 2014**; **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; **and**
3. Provide proof of repair of existing cooler next to the grill in the front of the restaurant 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 **October 22, 2014**; **and**
4. Establish and maintain a temperature monitoring log to record potentially hazardous food temperatures twice a day during cold and hot holding. The temperature monitoring log shall contain the name of the food checked, the temperature of the food, the person's initials taking the food temperatures, and the time the food temperature is taken. The log shall be available during business hours; **and**
5. Comply with all the requirements of Subpart 14-1 of the New York State Code for Food Service Establishments.

This action was adopted by the Tompkins County Board of Health at its regular meeting on October 28, 2014.

Frank Kruppa
Public Health Director

11/3/14
Date

Inclusion Through Diversity

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CASE SUMMARY – FOR RESOLUTION #EH-ENF-16-0006
Country Inn and Suites
Garuda Hotels Inc., Jay Bramhandkar, Owner/Operator
1100 Danby Road, T-Ithaca
Ithaca, NY 14850

March 2016

Date	Action
03/01/2016	Re-inspection by TCHD. **Violation:** Potentially hazardous foods were not kept at or above 140°F during hot holding. Product out for customer service was observed to be at 119°F and 135-138°F. These products were removed from service and rapidly reheated to 165°F or above.
02/02/2016	Inspection by TCHD. **Violation:** Potentially hazardous foods were not kept at or above 140°F during hot holding. Product out for customer service was observed to be at 122-125°F. The product was discarded during the inspection.
11/24/2015	Inspection by TCHD: No critical violations observed.
12/19/2014	Re-inspection by TCHD following BOH action: No critical violation observed.
10/28/2014	Board of Health adopted Resolution #14.14.25.
09/09/2014	Re-inspection by TCHD. **Violation:** Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or above 45°F during cold holding. Products in a cooler were observed at 47-50°F.
07/22/2014	Inspection by TCHD. **Violation:** Enough refrigerated storage equipment was not maintained so that potentially hazardous foods were kept at or above 45°F during cold holding. Products in a cooler were observed at 51°F.
12/11/2013	Re-inspection by TCHD. Violations observed during inspection of 11/19/2013 were corrected.
11/19/2013	Inspection by TCHD. **Violation:** Potentially hazardous foods were not kept at or below 45°F during cold holding. Products out for customer service were inadequately iced and observed at 56-57°F.
03/02/2012	Inspection by TCHD: No critical violations observed.
10/21/2011	Re-inspection by TCHD. Violations observed during inspection of 09/26/2011 were corrected.
09/26/2011	Inspection by TCHD. **Violation:** Toxic chemicals were stored so that contamination of food could occur. Potentially hazardous foods were not stored under refrigeration. Products on a counter for customer use were observed to be at 75°F.
12/09/2010	Re-inspection by TCHD: Violations observed during inspections of 09/02/2010 and 09/17/2010 were corrected.
11/18/2010	Resolution #10.13.44 adopted by BOH requiring a penalty of $400 by December 20, 2010, and to monitor food temperatures on a log sheet twice a day during business hours.
09/17/2010	Re-inspection by TCHD. **Violation:** Potentially hazardous foods were not stored under refrigeration. Products for customer use were observed at 54°F.
09/02/2010	Inspection by TCHD. **Violation:** Accurate thermometers were not available to measure food temperatures. Potentially hazardous foods were not stored under refrigeration. Products for customer use were observed at 70°F.
07/07/2009	Inspection by TCHD: No critical violations observed
12/05/2008	Inspection by TCHD: No critical violations observed.
05/19/2008	Permit to operate issued to Country Inn & Suites.