

201 East Green Street Ithaca, NY 14850 (607) 274-6200

tompkinscountyny.gov/health

Phone: (607) 274-6600

TOMPKINS COUNTY BOARD OF HEALTH tompkinscountyny.gov/health/boh

AGENDA Tompkins County Board of Health Rice Conference Room Tuesday, August 22, 2023 12:00 Noon

Live Stream at Tompkins County YouTube Channel:

https://www.youtube.com/channel/UCkpJNVbpLLbEbhoDbTIEgSQ

- 12:00 I. Call to Order
- **12:01** II. Privilege of the Floor Anyone may address the Board of Health (max. 3 mins.)
- 12:04 III. Approval of July 25, 2023, Minutes (2 mins.)
- 12:06 IV. Financial Summary (9 mins.)
- 12:15 V. Reports (15 mins.)

Administration Health Promotion Program Medical Director's Report Division for Community Health

Children with Special Care Needs County Attorney's Report Environmental Health CSB Report

12:30 VI. New Business

12:30 Environmental Health (EH) (10 mins.) Enforcement Actions:

- Resolution #EH-ENF-23-0013 Finger Lakes GrassRoots Festival, Violations of Board of Health Orders and Subpart 7-4 of New York State Sanitary Code (Mass Gathering) (10 mins.)
- Resolution #EH-ENF-23-0014 Cayuga Nature Center, Violations of Subpart 7-2 of New York State Sanitary Code (Children's Camp) (5 mins.)

12:40 Adjournment

Tompkins County Board of Health July 25, 2023 12:00 Noon Rice Conference Room and via Zoom

Present:	Christina Moylan, Ph.D., President; Melissa Dhundale, MD, Vice-President; Susan Merkel; Samara Touchton; Edward Koppel, MD; Shawna Black and Andreia De Lima, MD
Staff:	Elizabeth Cameron, Director of Environmental Health; Brenda Grinnell Crosby, Deputy Public Health Director; Dr. William Klepack, Medical Director; Deb Thomas, Director of Children with Special Care Needs; William Troy, County Attorney; Frank Kruppa, Commissioner; Harmony Ayers-Friedlander, Deputy Commissioner of Services; Zoe Lincoln, Whole Health Planner; and Karan Palazzo, LGU Administrative Assistant.
Excused:	Ravinder Kingra
Guests:	None

Call to Order: Dr. Moylan called the regular meeting of the Board of Health (BOH) to order at noon.

Privilege of the Floor: None

Approval of May 23, 2023, Minutes: Ms. Black moved to approve May 23, 2023, minutes, second by Dr. Koppel; all were in favor as written; it was unanimous.

Financial Summary: Ms. Grinnell Crosby referred to the financial summary through June included in the packet. The first-quarter state aid was filed, and staff are in the process of reconciling the June report. Administrative staff are beginning work on second-quarter grant claims and Article 6 state aid.

Administration Report: Mr. Kruppa introduced the Public Health Fellows Dorota Kossowska, Sagarika Vemprala, and Ashley Lewis.

Mr. Kruppa reported that the 2024 budget will soon be submitted to the County Administrator. The proposed new positions across Whole Health are funded with existing funds with no reductions, elimination of services, or policy implications related to the budget.

COVID-funded grants have ended with some ending in the middle of next year and the ending of those funds has been anticipated.

The BOH packet is being updated with senior leadership and division staff to better meet BOH expectations of pertinent information that is easily identifiable. Updates of the departmental merger will also be included in the new packet model with an anticipated unveiling by the end of the summer for BOH's review and feedback.

Health Promotion Program Report: Ms. Hillson was not available.

Medical Director's Report and Discussion: Dr. Klepack referred to his report included in the packet with nothing to add. He sadly announced the recent passing of retiree, Melissa Gatch, a nurse who worked for

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Tompkins County Health Department in various capacities for 36 years, displaying distinction, integrity, and the best interest of those she served.

Division for Community Health (DCH) Report: Ms. Buckwalter was not available.

Children with Special Care Needs Report: Ms. Thomas announced that Diane Olden is retiring after 30 years in Public Health.

She reported that the therapist shortage is even more severe and attended a Health and Human Services Committee to bring attention to the crisis. The meeting is available on YouTube and will share the link. The shortage includes all disciplines with a waitlist for speech therapists currently at 40 and no social workers for any children. A survey concluded that the lack of pay raises, insufficient salaries, and inadequate travel/equipment costs for therapists has contributed to the shortage.

A task force at the State level was created to address tuition reimbursement/student loan forgiveness and increasing the salary rate; but unfortunately, the rate increase did not pass in Governor Hochul's State budget. Higher education is looking to promote more students for early childhood therapists, but this will take time. The county is mandated by the State to provide services and there can be legal recourse from parents of eligible students through mediation to provide services.

County Attorney's Report: Mr. Troy was happy to report that Grass Roots greatly improved this year.

Environmental Health Report: Ms. Cameron reported that Grass Roots submitted generally accurate site maps, laid out the campsites and roads with only minor issues, and the mass gathering permit was issued. She complimented the EH staff on the application review and all the required fieldwork for the inspections. Communication with GrassRoots will continue for a successful 2024 Grass Roots Festival. She noted that since GrassRoots failed to complete the application 45 days in advance as required under a previous order, GrassRoots has signed stipulation that will be brought to the BOH at next month's meeting. Overall, she said it was a very successful event.

Ms. Cameron reported that a number of facilities under enforcement for selling prohibited vapor products have been paying their penalties. The Office of Cannabis Management (OCM) recently posted cannabis on several facilities in Ithaca – ZaZa's, Black Leaf and Dream. ZaZa's and Dream are registered to sell vapor products. EH and the Deputy County Attorney have been communicating with the Assistant Attorney General in Binghamton regarding vapor product enforcement and the OCM has started conducting enforcement for cannabis. Facilities often sell both products.

Ms. Cameron reported that EH does not currently have an ATUPA contract or budget to fund the program which expired on March 31, 2023. The State said it would extend the contract, but this has not happened yet.

Ms. Cameron happily announced that Breanna Walsh is now a permanent Administrative Assistant III in EH. EH is currently recruiting for another Administrative Assistant, a Public Health Fellow, and an EH Specialist.

Community Mental Health Services Board (CSB) Report: Ms. Ayers-Friedlander reported that the CSB met on July 10, 2023, to review and approve the Local Services Plan. The four-year plan focuses on workforce, housing, crisis services, cross-systems services, non-clinical supports, adverse childhood experiences, and transition-aged services. The plan's focus was based on information obtained through

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Community Health Assessment (CHA) posted on the Tompkins County Website under Community Health Reports, <u>https://www.tompkinscountyny.gov/health/chachip2224</u>.

Resolution #EH-ENF-23-0002 – Triphammer Road Mobile, V-Lansing, Violations Article 13-F of NYS Public Health Law (ATUPA) – Ms. Black moved to accept the motion as written; seconded by Ms. Merkel.

Ms. Cameron explained that the first three resolutions on the agenda are similar in that all the facilities sold prohibited flavored vapor products during an initial EH visit but did not make a sale during two follow-up visits.

Resolution #EH-ENF-23-0002 – Triphammer Road Mobile's first follow-up visit was conducted as an adult check for buying cigarettes. The second follow-up visit was conducted with an underaged youth and there were no underage sales. EH proposes a fine of \$600 consistent with the penalty for the ATUPA penalty policy approved by the BOH.

The vote to approve the resolution as written was unanimous.

Resolution #EH-ENF-23-0009 – Smiley's Mini Mart, T-Ithaca, Violations Article 13-F of NYS Public Health Law (ATUPA) – Dr. Dhundale moved to accept the motion as written; seconded by Dr. Koppel.

No discussion.

The vote to approve the resolution as written was unanimous.

Resolution #EH-ENF-23-0010 – Ithaca Mini Mart, C-Ithaca, Violations Article 13-F of NYS Public Health Law (ATUPA) – Dr. Dhundale moved to accept the motion as written; seconded by Ms. Merkel.

No discussion.

The vote to approve the resolution as written was unanimous.

Resolution #EH-ENF-23-0008 – Red's Place, C-Ithaca, Repeat Critical Violations of Subpart 14-1 of New York State Sanitary Code (Food) – Ms. Touchton moved to accept the motion as written; seconded by Ms. Merkel.

Ms. Cameron reported that these are cold-holding violations from inspections on March 3rd and April 6th. EH proposes a fine of \$200 consistent with the penalty policy for food service establishments.

No discussion.

The vote to approve the resolution as written was unanimous.

Resolution #EH-ENF-23-0011 – Applegate Park, T-Enfield, Violations of Board of Health Orders and Part 17 of New York State Sanitary Code (MHP) – Dr. Koppel moved to accept the motion as written; seconded by Ms. Touchton.

Ms. Cameron explained that this is a violation of previous BOH orders related to issues with the water system at the mobile home park. Owner, Joseph Giordano has not been responsive, failed to submit monthly water system operating reports, failed to submit water sample results, failed to pay the application

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fee, and has not met the proposed penalty payment plan as agreed upon. All are requirements to renew his permit application.

Ms. Cameron said that the mobile home park continues to be on a boil water order and problems continue with the onsite wastewater treatment sewage system. Mr. Giordano submitted an application without the required fee or a request for a fee waiver. He was issued Public Health Director's Order in June to immediately install fencing around the sewage system and EH is scheduled to do a follow-up check.

EH proposes the payment of the outstanding penalty of \$750 plus \$1,100 for the current violations which are due by August 15, 2023.

Discussion: Ms. Black suggested reaching out to the owner to attend the next meeting for more solutions to ensure the safety of the residents. Ms. Cameron stated that Mr. Giordano has not been responsive when the EH staff reached out on several occasions and the previous order included two contingent penalties if the requirements were met. The additional penalties would not have occurred if money was put towards fixing the problem.

Dr. Moylan doesn't believe continuing to provide leniency is the solution in light of his nonresponsiveness and noncompliance with the responsibility to provide people with safe clean water. Dr. DeLima believes the BOH should adhere to the recommendations from EH as previous conversations have been unsuccessful and is concerned about people being exposed to unsanitary conditions. Dr. Moylan agreed and believes moving forward with EH recommendations is best. Mr. Kruppa added that the BOH's order can be adjusted appropriately in the future if necessary.

Ms. Black motioned to reduce the fine to \$500; seconded by Dr. Dhundale.

Discussion: Ms. Black believes that when the penalties are so high it is challenging to do the costly work that is needed. After the work is done the fine should be reconsidered. Dr. Koppel stated that this was the initial resolution, but the work was never done, and fines were never paid. Mr. Kruppa added that fines can be contingent on the completion of work. Ms. Merkel feels he has been given multiple options to comply and communicate with EH. After a lengthy discussion, the motion to reduce the fine did not pass.

The motion to approve the original motion as written; Ms. Black opposed; all else were in favor. Motion carried.

The next meeting is Tuesday, August 22nd, 2023 @ Noon.

Adjournment: Adjourned at 1: 05 p.m.

Tompkins County Financial Report for Public Health

Year: 23 Month: 7

Percentag	je of Year: 58.33%	Ex	penditures			Revenues		L	ocal Share	
		Budget	Paid YTD	%	Budget	YTD	%	Budget	YTD	%
4010	PH ADMINISTRATION	2,633,517	1,121,939	42.60%	841,489	121,401	14.43%	1,792,028	1,000,538	55.83%
4012	WOMEN, INFANTS & CHILDREN	552,469	301,229	54.52%	552,469	244,556	44.27%	0	56,673	
4015	VITAL RECORDS	84,888	46,916	55.27%	115,000	67,522	58.71%	-30,112	-20,606	68.43%
4016	COMMUNITY HEALTH	2,004,693	954,248	47.60%	651,382	175,001	26.87%	1,353,311	779,247	57.58%
4018	HEALTHY NEIGHBORHOOD PRO	G 199,000	100,585	50.55%	199,000	59,704	30.00%	0	40,881	
4047	PLNG. & COORD. OF C.S.N.	1,545,385	819,685	53.04%	524,224	152,276	29.05%	1,021,161	667,409	65.36%
4090	ENVIRONMENTAL HEALTH	2,152,414	1,164,412	54.10%	577,595	275,457	47.69%	1,574,819	888,955	56.45%
4092	PUB HLTH COVID SCHOOL GRN	1,000,000	634,290	63.43%	1,000,000	0		0	634,290	
4095	PUBLIC HEALTH STATE AID				1,948,168	890,137	45.69%	-1,948,168	-890,137	45.69%
Non-Mand	late	10,172,365	5,143,305	50.56%	6,409,327	1,986,055	30.99%	3,763,039	3,157,250	83.90%
2960	PRESCHOOL SPECIAL EDUCATI	5,942,000	2,138,092	35.98%	3,760,000	2,248,539	59.80%	2,182,000	-110,447	-5.06%
4017	MEDICAL EXAMINER PROGRAM	375,865	148,952	39.63%	0	0		375,865	148,952	39.63%
4054	EARLY INTERV (BIRTH-3)	641,000	208,744	32.57%	312,620	76,039	24.32%	328,380	132,705	40.41%
Mandate		6,958,865	2,495,788	35.86%	4,072,620	2,324,578	57.08%	2,886,245	171,210	5.93%
Total Publ	lic Health	17,131,230	7,639,093	44.59%	10,481,947	4,310,633	41.12%	6,649,284	3,328,460	50.06%

BALANCES (Including Encumbrances)

Non-Ma	ndate	Available Budget	Revenues Needed	Mandat	e		Available Budget	Revenues Needed
4010	PH ADMINISTRATION	1,506,405	720,088	2960	PRESCHOO	L SPECIAL EDUCATI	3,803,908	1,511,461
4012	WOMEN, INFANTS & CHILDREN	236,333	307,912	4017	MEDICAL EX	AMINER PROGRAM	126,913	0
4015	VITAL RECORDS	37,972	47,478	4054	EARLY INTE	RV (BIRTH-3)	432,256	236,581
4016	COMMUNITY HEALTH	1,050,032	476,381				4,363,077	1,748,042
4018	HEALTHY NEIGHBORHOOD PROG	98,415	139,296					
4047	PLNG. & COORD. OF C.S.N.	725,700	371,948		Total Public H	ealth Balances		
4090	ENVIRONMENTAL HEALTH	981,917	302,138	<u>A</u>	vailable Budget	Revenues Needed		
4092	PUB HLTH COVID SCHOOL GRN	365,710	1,000,000		9,365,562	6,171,313		
4095	PUBLIC HEALTH STATE AID	0	1,058,031					
		5,002,485	4,423,272					

Comments: This report includes payroll through July 22. Staff are in the process of reconciling the July report and submitting claims for the second quarter. The local share for non-mandate is high due to lower revenues and the need to file second quarter claims. We are expecting full reimbursement on the Public Health COVID School Grant, the year-end grant claim is under review by the state.

TOMPKINS COUNTY WHOLE HEALTH Frank Kruppa – Whole Health Commissioner

FOR IMMEDIATE RELEASE

August 9, 2023

For media inquiries: Shannon Alvord, Public Health Communications Coordinator, <u>salvord@tompkins-</u> <u>co.org</u>

Health Alert: Increase in Opioid Related Deaths in Tompkins County; Narcan Training and Distribution Available to the Community

(Ithaca, NY, Aug 9, 2023) – Tompkins County Whole Health is alerting the community to an increase in opioid related deaths in Tompkins County, as updated data has become available from the Tompkins County Medical Examiner's Office.

Within the first half of this year (January-June 2023), there have already been 17 reported <u>drug-related</u> <u>overdose deaths</u> in Tompkins County. Compared to annual totals from the past 5 years in Tompkins County, this represents a significant increase in drug-related overdose deaths.

- 2022: 28 total overdose deaths
- 2021: 25 total overdose deaths
- 2020: 19 total overdose deaths
- 2019: 17 total overdose deaths
- 2018: 18 total overdose deaths

Based on <u>911 call data</u> from the start of 2023 through July 31, 2023, 226 overdose/poisoning calls have already been placed this year. For annual comparison, in 2022, 385 overdose calls were made over the course of the year, 383 calls in 2021, and 282 calls in 2020. Overdoses/poisonings reported in these calls do not always result in death but do provide information about the volume of related calls.

Multiple factors affect the rate of overdose in our community, including the on-going impact of the COVID-19 pandemic and the increased presence of <u>fentanyl</u> and <u>xylazine</u> in illicit street drugs, based on Medical Examiner reports. Fentanyl is a highly addictive synthetic opioid added to illicit street drugs to increase consumption and is highly associated with risk of overdose death. Xylazine (also known as "tranq" or "tranq dope") is a non-opioid sedative or tranquilizer that is not approved for use in humans but is frequently found in illicit street drugs. Risk of overdose is increased when fentanyl and/or xylazine are mixed in with other substances, an issue that is increasingly found with the purchase of illicit street drugs, such as heroin, cocaine, crystal methamphetamine and illicitly manufactured pills, including benzodiazepines and other psychostimulants like Molly and MDMA.

Harmful side effects of fentanyl and xylazine include sedation, confusion, drowsiness, dizziness, nausea, vomiting, urinary retention, pupillary constriction, and respiratory depression. Signs of overdose include stupor, changes in pupillary size (pinpoint size pupils), cold and clammy skin, cyanosis (blue discoloration of the skin), coma and respiratory failure leading to death.

Tompkins County Whole Health Commissioner Frank Kruppa stated, "We are advising the community about the risk of fentanyl and xylazine in street drugs to promote harm reduction. Fentanyl and xylazine are extremely dangerous. If you are buying street drugs, please test for fentanyl and xylazine, carry

Narcan and never use alone. If you want support to reduce your use of street drugs, please reach out to any of our local substance use disorder programs."

Overdose Prevention Resources

NYS DOH issued a <u>statewide pharmacy standing order</u> for Naloxone (Narcan), which is a medication that can be easily administered in the form of a nasal spray to block the effects of opioids. Providers, the general public, and anyone close to someone who is suffering with addiction are encouraged to obtain naloxone from a pharmacy or community agency. Individuals will need to have insurance to access this standing order at no cost in a pharmacy. Pharmacies will bill insurance through the <u>Naloxone Co-Payment</u> <u>Assistance Program (N-CAP)</u> to cover fees and co-payments.

If you do not have insurance, dial 2-1-1 (1-877-211-8667) to receive assistance. Narcan kits are available for free at <u>local community agencies</u> that provide free Narcan training to educate community members in its use to prevent an overdose from becoming a death. Schedule a Narcan training or request kits by contacting <u>Tompkins County Whole Health</u>, <u>Alcohol & Drug Council</u>, <u>Cayuga Addiction Recovery</u> <u>Services</u>, <u>REACH Medical</u> or the <u>Southern Tier AIDS Program</u>.

TCWH Deputy Commissioner of Mental Health Harmony Ayers-Friedlander stated, "We implore everyone in our community to pick up a Narcan kit and become trained in its use. In its nasal spray form, Narcan is simple to use and effective. Having a Narcan kit and being prepared to use it may save someone's life."

<u>Fentanyl testing strips</u> and xylazine testing strips can identify the presence of these drugs. Both fentanyl and xylazine testing strips are available, free of cost, at a variety of locations, including Tompkins County Whole Health's downtown office at 201 E. Green St. (Ithaca), at the Southern Tier AIDS Program, at REACH Medical, Alcohol and Drug Council, and at Cayuga Addiction Recovery Services.

Narcan and testing strips can also be ordered for free through NYS Office of Addiction Services and Supports (NYS OASAS), delivered to your residence. Order online at: <u>https://oasas.ny.gov/harm-reduction</u>. To learn more about other available prevention services, visit: <u>https://providerdirectory.aidsinstituteny.org/</u>

To protect yourself or those you care about, the following overdose prevention strategies are recommended:

- Never use alone
- Use fentanyl and xylazine testing strips as a precaution
- Carry Narcan and be trained in its use
- Seek treatment and support
- Create an overdose prevention safety plan
- Always dial 9-1-1 in the event of a medical emergency

Addiction and Mental Health Community Resources

Tompkins County Whole Health's Mental Health Services provide individual and group therapy and programs for mental health and substance use support. Come during <u>Open Access hours</u>. Mondays – Thursdays, 9am-2pm, to begin services as soon as you walk in our building at 201 East Green Street, Ithaca. Call 607-274-6200 to learn more.

Community partners also provide a wide variety of services for those in need of addiction support. Alcohol and Drug Council offers a variety of education programs, counseling services and treatment options, including <u>Medication Assisted Treatment (MAT</u>). Cayuga Addiction Recovery Services offers men's residential rehabilitation and out-patient treatment services, as well as a specific Opioid Treatment Program and MAT. REACH Medical also provides a wide range of medical and behavioral health services, including MAT, available to anyone in the community, regardless of ability to pay. To find other available treatment programs throughout the state, use the <u>NYS Office of Addiction Services & Supports online directory</u>.

Community-based <u>support groups</u> are available for individuals to help navigate your personal recovery, as well as for friends and families affected by their loved one's substance use. NYS Office of Addiction Services and Supports hosts <u>HOPEline</u>, a 24/7 helpline to call or text for support. Call 1-877-8-HOPENY (467369) or Text HOPENY (467369) for immediate assistance.

The <u>9-8-8 Lifeline</u> call service is also available, 24/7, to speak confidentially with mental health professionals about your concerns; dial 9-8-8 to connect with this support. Need help finding help? Dial 2-1-1 (1.877.211.8667) for supportive, local referrals and resource connections.

NYS OASAS also hosts the <u>"Project COPE" website</u>, which promotes overdose prevention and harm reduction education in New York State. The goal of this initiative is to empower people to learn how to prevent overdoses and save lives in their community.

Resources are readily available in Tompkins County. Learn more about local opioid statistics and additional resources online at: <u>https://tompkinscountyny.gov/health/opioids</u>.

Tompkins County Whole Health (formerly the Tompkins County Health Department): envisioning a future where every person in Tompkins County can achieve wellness. Find us online at <u>TompkinsCountyNY.gov/health</u>, and follow us on Facebook at <u>Facebook.com/TompkinsWholeHealth</u> and on Twitter at <u>@TCWholeHealth</u>. <u>Sign</u> <u>up</u> to receive Whole Health updates or other county announcements via email or text.

-end-



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HEALTH PROMOTION PROGRAM July 2023 Report | BOH Meeting August 2023

HPP staff strive to promote health equity and address underlying determinants of health, including but not limited to, health care access, health literacy, housing quality and environmental conditions, and food insecurity. We do this through education and outreach, community partnerships, home visits, public communication and marketing, and policy change.

Highlights

- Welcome to Ashley Lewis, Public Health Fellow, who started with Health Promotion on July 24, 2023. We are excited to have her on board, some of her focus will be on communications and data, including the Community Health Assessment and Improvement Plan.
- DEIB (Diversity, Equity, Inclusion, and Belonging) Cross-Functional Team will launch in August.

Opioids

All calls that come into Tompkins County's 9-1-1 center are coded based on the type of emergency. To help direct the call, the dispatcher assigns each a "Nature." The Department of Emergency Response (DoER) sends the monthly totals to Whole Health for calls coded as "Overdose/Poisoning," and these are posted in graphic form <u>on the WH website</u>. A 3-month summary is shown below.

Total 911 calls per month that are Nature coded as "Overdose/ Poisoning." *Source: DoER.*

Month	2018	2019	2020	2021	2022	2023
MAY	50	49	20	39	38	40
JUN	18	25	21	39	24	19
JUL	20	27	26	39	29	31

Community Health Worker Initiative (CHWs) and PICHC (Perinatal and Infant Community Health Collaborative)

PROGRAM HIGHLIGHTS:

- CHWs supported clients this month with transportation to prenatal appointments, doula support, peer support during labor, Reuse vouchers, connecting to other agencies.
- Interview process to hire a new PICHC CHW.
- Planning for PICHC Community Action Board: collaboration with Human Services Coalition, developed an interest form survey and flyer for potential community participants.
- PICHC: Enrolled (screening questions complete): 12 Clients; Pending (CHW is developing relationship and working on screening forms): 32 Clients.
- New PICHC website: <u>About the Perinatal and Infant Community Health Collaborative Initiative -</u> <u>Perinatal and Infant Community Health Collaborative Center for Community Action (PICHC CCA)</u> <u>(nyspichc.org)</u>
- Monitoring and Evaluation: Monthly review of data to assess population program is serving and continuing to refine completion of screening forms.
- Eligibility for PICHC includes:



CHW TRAINING IN JULY 2023:

- PICHC: The Institute
- Sexual Violence 101

CHW OUTREACH EVENTS IN JULY 2023:

- Dryden Library
- Groton Library
- Newfield Library
- Newfield Olde Homes Day
- Danby Market

COVID-19

- Continue to promote bivalent booster through social media, outreach, etc.
- Continue distribution of KN95 and N95 masks and test kits.

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

• A major renovation of the Prevention Agenda dashboard is underway NYSDOH Public Health Information Group (PHIG). We participated in a demonstration of the new design and subsequent user feedback evaluation.

HEALTHY NEIGHBORHOODS PROGRAM	July MONTH	YTD 2023	July 2022	TOTAL 2022*
# of Initial Home Visits (including asthma visits)	17	118	18	219
# of Revisits	0	0	1	16
# of Asthma Homes (initial)	4	13	3	42
# of Homes Approached	1	86	62	392

Healthy Neighborhoods Program

MONITORING AND EVALUATION:

• HNP staff are working with one of the Public Health Fellows to develop a monitoring and evaluation system for the program. The Fellow has started by pulling data from the past 5 years to observe trends.

OUTREACH/TRAINING:

- HNP Outreach Presentation to Nates Estates Mobile Home Park.
- Webinar Meeting: Radon Partners meeting with NYSDOH.

Tobacco Free Tompkins

- Working with the Community Coalition for Healthy Youth on the anti-vaping campaign. Twentyone youth have expressed interest in participating.
 - The campaign concept has been created with help from county communications director and county photographer. Main idea of campaign is to showcase hobbies and activities that youth love to do and show the ways in which vaping negatively impacts them/prevents them from doing those activities/hobbies.
 - We hope to incorporate messaging regarding the dangers of flavored tobacco products, despite the flavor ban not being passed at the state level.

 Next steps are to reach out to school districts to spread awareness about the upcoming campaign.

Media, Website, Social Media

- Social media focus on "awareness days/months/etc./" with Whole Health lens, CHA/CHIP focus, and promotion of services. Examples: July Minority Mental Health Month
- Press Releases in July 2023:
 - Friday, July 21: <u>Tompkins County Whole Health Offices Temporary Phone Outage</u> <u>Planned for Saturday, July 22, 2023</u>
 - Monday, July 24: <u>Health Alert: Potentially Rabid Beaver at Mulholland Wildflower</u> <u>Preserve</u>
 - Tuesday, July 25: <u>Health Alert: Beaver at First Dam and Mulholland Wildflower Preserve</u> <u>Confirmed to Have Rabies</u>
- Review and update of "Job Opportunity" page on website; increased promotional efforts to share variety of job opportunities: <u>https://tompkinscountyny.gov/health/jobs</u>

Strategic Planning

- Comprehensive planning and work on updating program brochures across Whole Health to maintain WH branding and mission.
- Communications Project Request Form development: New Submission (tompkins-co.org)
- Internal Referral Form launched: <u>TCWHReferral (tompkins-co.org)</u>
- Cross Functional Teams:
 - DEIB (Diversity, Equity, Inclusion, and Belonging) Team will launch in August. This is a staff team, focused on advancing DEIB efforts throughout the department and tied to the Strategic Plan. The work will cut across Strategic Plan goals in Community, Data, and Culture. Key areas of focus include Data goals: (1) Regularly assess our organization, programs and services for inclusivity and equity [diversity and belonging]. Use the data collected to routinely develop or revise goals and measures of accountability. (2) Collect data to measure health equity across the county. Collect community feedback to assess our efforts to improve health equity. Use data and feedback to make informed programmatic and policy decisions, evaluate and improve access to and delivery of our programs and services.

Training/Professional Development

• Trauma Informed Care, Practical Applications (with DSS Deputy Commissioner, Deana Bodner)

- Public Health Institute's Dialogue for Health: Cutting through the Chaos: Reframing Public Health
- NYSACHO: Vaccine Communication Strategies in a Time of Misinformation and Mistrust

Appendix

COMMITTEE AND PARTNERSHIP MEETINGS

Group, Organization	Activity/Purpose	Date
CATCHI Working Group	Combines Social Determinants of Health, CHW initiative	Monthly
(Coordinated Approach to Community Health Integration)	and Childhood Nutrition Collaborative into one working group.	
Long Term Care Committee	Planning and sharing resources for long-term care in the community.	Quarterly
Health Planning Council	Advisory Board and Executive Committee, Hillson reappointed as Secretary and Co-Chair of Community Health and Access Cte.	Bi-monthly
Community Health and Access Committee	Sub-committee of the HPC. Focus on telehealth, maternal health, etc.	Quarterly
COFA Advisory Board	Updates and Age Friendly	Quarterly
Suicide Prevention Coalition	In partnership with the Sophie Fund	Monthly
Immunization Coalition	Quarterly meeting, updates about COVID-19 vaccine and discussion/feedback, youth vaccination promo	Quarterly
Lead Poisoning Prevention Network	Quarterly meeting, review lead cases, prevention, new regulation	Quarterly
Cayuga Health Data Governance Committee	Oversight/advisory committee for the health equity team at Cayuga Health, focus on data collection for health equity, We Ask Because We Care campaign.	Quarterly
TC Cancer Screening Working Group	Regular meeting	Monthly
Aging Services Network	Regular meeting	Monthly
Homeless & Housing Taskforce	Regular meeting	Bi-monthly
PICHC Partners Meeting	Weekly meeting to discuss community health worker roles, align program design, collaborate w/community partners	Weekly
PICHC State Call	Monthly meeting for PICHC programs in NYS	Monthly
LATCH: Lactation Alliance for Tompkins County Health	Monthly meeting of community partners/stakeholders.	Monthly

Mission: To protect, promote, & support breastfeeding/ chestfeeding in Tompkins County, and to protect, promote, & support the rights of families to achieve their infant feeding goals.

NEW RABIES BROCHURE



Potential Exposure May

If you have been bitten by a wild, stray, or owned mammal.

 If saliva or nervous tissue of an infected animal has made contact with an open wound, eyes, nose, or mouth. Whenever there is a chance that a person or pet has come in contact with a bat. Hunters and trappers should take care when processing wildlife.

Environmental Health staff are available by phone 24 hours a day, 7 days a week at 607-274-6688.

Have Occurred

What is Rabies?



Protect yourself & your pets In NYS, mandatory vaccination is required for all dogs, cats, and fer Contact Environmental Health (EH) for information on free rabies vaccination clinics. If your pet comes in contact with a wild animal, call EH to find out if they need a booster vaccination.

After a Potential Exposure

- If you have been bitten or scratched, wash the wound with soap and water. wash the wound with scap and was 6 Seek medical attention if needed. Your medical provider will assist you with reporting the incident to Environmental Health (EH). < I fyou did not see a provider, follow the guidance below and call EH to report the incident.
- Domestic (Owned) Animals
- If it is safe to do so, ask for the owner's contact information.

owner's contact information. If that is not possible being able to describe the location, animal, and any person with the animal can help staff locate and verify the animal's health. 6 An owned cat or dog can be observed for 10 days. If the pet is healthy after 10 days there is no risk to the person who was bitten. 9 Stary cats or dogs who have bitten someone can be captured and debarred at the form/kins county they can be reunited with the owner.

Wildlife

Wildlife 9 If the animal is available for testing, you will be given instructions for where to bring it. 9 If the animal is alive and needs to be captured, staff may connect you with Tompkins County Animal Control. E Environmental Health cannot assist in catching bats, but can provide a list of Nuisance Wildlife Control Officers. Three is a charge for their services. If the animal is unvavailable for testing. If the animal is unavailable for testi staff will discuss whether post exposure treatment is needed.



201 East Green Street Ithaca, NY 14850

tompkinscountyny.gov/health

(607) 274-6200

Medical Director's Report Board of Health August 2023

WHCU interviews – Weekly interviews with Joe Salzone on WHCU on Wednesdays at 7:40 am continue. We are grateful that he provides us the opportunity to speak out on public health issues.

In the past month, I have spoken about mandates and their role in combating a public health emergency, and how they are similar, yet different, from laws (for example traffic laws). We also talked about the legalization of cannabis (recreational marijuana aka adult use marijuana aka THC). The focus was on NYS shutting down 7 illegal retail outlets which allegedly were using a variety of dodges to sell their product not only to adults but also to minors. Part of the discussion was about how the regulation of the product provides consumers with THC free of poisons, standardized in its potency, and with measures to protect our children.

We spoke about mosquito-borne illnesses (which have been fortunately rather low this summer – think West Nile Virus, Zika, Dengue, etc.). We will be circling back to speak about tick-borne illnesses after having spoken on this earlier in the year.

I have been gratified at the number of people who say they have heard one or more broadcasts. The interviews are archived on the WHCU website under "Newsmaker" interviews.

Practitioner Bulletins – Releasing between 2 and 3 bulletins a month now on average (at the height of the pandemic it was 1-2 per week). The topics have broadened to include many of our activities in public health that a practitioner would find relevant to them. Several practitioners have spoken to me about how valuable these bulletins have been in their practice and how widely they have further disseminated them to colleagues, family, and friends. This route of communication should be one the Department maintains for the foreseeable future. As long as the focus is on providing succinct information of relevancy to a practicing practitioner it will be of value.

Covid - Members of the BOH receive my bulletin and, thus, have reviewed my updates. For the general public, I would say that at this time the following points are of importance:

- There are more than 29 variants of Covid in circulation which are similar to the past ones in the ability to cause 1. severe disease and continue to be susceptible to the available vaccines.
- 2. Too few people have received the bivalent booster. We know scientifically that they are putting themselves at risk of getting severe Covid. Boosters are necessary to maintain immunity (and past Covid infections do not confer long-term protection). Whenever a booster becomes available the public should get it whether at a pharmacy, practitioner's office, or other venue. It is expected that a new booster will be available at the end of September. When it is available people should get it. Discussion within the Department is going on as to whether it is practical to launch a POD for the purposes of Covid boosting and influenza vaccination this fall. No decision at this time.

- 3. Persons never been vaccinated should reconsider. They are putting their lives at risk and the vaccines have been proven to save lives.
- 4. Planning for the next pandemic has two components:
 - a) sufficient staff to meet the challenges

b) data systems and technology to cope

At the local health department level, the first is the most problematical, since in non-pandemic times staff cannot be sitting idly waiting for a pandemic. Yet, when a pandemic demands extensive contact tracing we run short of staff to run PODs and carry on other essential public health functions (such as inspections of restaurants and water supplies, lead poisoning interventions, etc.). At the same time, Whole Health needs to ramp up staffing as the rest of the healthcare community is also.

The technology piece is more approachable through sufficient funding to provide public health with first-rate capability.

At the NYS and federal levels, monies should be more available than at the county level to provide for appropriate depth in science and technology staff to monitor, predict, detect, and respond to an impending pandemic. One hopes that policymakers see their way clear to providing the resources.

The open wounds of this pandemic should not be allowed to close lest we fail to prepare.

Opioid and other substance use-related deaths — The difficulty in obtaining nurses and other staff (which healthcare is generally experiencing) is also afflicting the new Detox outpatient facility on Triphammer Road. Its opening has been intolerably delayed. In addition, the two NYC substance consumption facilities (now in either their second or third year of operation) are at risk of being shut down by the federal government because NYC and NYS officials have allegedly not taken the steps to sanction them in a manner such as to persuade the regional federal prosecutor that he need not enforce federal law. (see NY Times article of the week of Aug 7) Actions that have been taken in the past by NYC and NYS policymakers have not gone far enough.

These two developments do not help to curb the rising absolute number of substance-related deaths we are seeing in Tompkins County (see the Whole Health press release of the week of August 7th regarding our numbers). Whatever can be done by community partners in regard to these two issues should be done.

While safe consumption facilities can only prevent death in those who choose to use them, we cannot afford not to use every means at our disposal to save lives and provide harm reduction in the process. The two interventions of detox and safe consumption help build trusting relationships with staff who stand ready to meet the addicted individual where they are and to advise and assist them in change (as appropriate for that person). The possibility of a safe consumption facility in our region can only move forward through the resolution of the issues raised in NYC.

I would suggest that the Board express its dismay that the NYC facilities are at risk of closure.

The rise in COVID cases of this past month reinforces the points made above. In addition, the wiser person, when prudent, will use masks, distance, and choose which gatherings to attend.

Resumption of TC Jail QA inspections

Ray Bunce

Captain - Corrections Division Tompkins County Sheriff's Office

Captain Bunce has asked to resume quality assurance audits which were suspended during the pandemic. This is a random review of 10% of the medical records of current inmates which is done quarterly. Historically, while they have been useful for the jail, no major issues have been found.

	2023		2022		2021		2020		Ave (2020-2022)	
Disease	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
ANAPLASMOSIS**	79	132.5	66	110.7	86	144.3	31	52.0	61	102.3
BABESIOSIS**	18	30.2	11	18.5	20	33.6	8	13.4	13	21.8
LYME DISEASE** ****	425	713.0	265	444.6	44	73.8	37	62.1	115	192.9
ROCKY MTN SPOT FEVER**	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0

From the Communicable Disease report YTD for July the following stand out:

These all are tick vector diseases and the trend with Anaplasmosis and Babesiosis is clear. Unfortunately, Lyme disease seems to be following the same trend. Remember that the case definition for Lyme changed in the beginning of 2022 and that accounts for the jump from 2021. But this year's YTD numbers are clearly higher. We message about tick bite prevention several times a year and it has been a topic in my interviews on WHCU.

MONKEYPOX	0	0.0	3	5.0	0	0.0	0	0.0	1	1.7
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This is included as a more positive note.

- P&S SYPHILIS	0	0.0	16	26.8	7	11.7	8	13.4	10	16.8
- EARLY LATENT	0	0.0	15	25.2	11	18.5	8	13.4	11	18.5
- LATE LATENT	0	0.0	2	3.4	6	10.1	4	6.7	4	6.7
- CONGENITAL SYPHILIS	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0

Included as an update. P & S stands for primary and secondary. The trend is encouraging though we can't presume we can let up on messaging about this disease and its transmission.



201 East Green Street Ithaca, NY 14850 (607) 274-6200

tompkinscountyny.gov/health

Phone: (607) 274-6604 Fax: (607) 274-6620

COMMUNITY HEALTH SERVICES tompkinscountyny.gov/health/chs

Division for Community Health

August 22nd, 2023 Board of Health meeting

July 2023 monthly report

By Jess Clark Manderville, Senior Community Health Nurse, Rachel Buckwalter, Director of Community Health, and Michelle Hall, WIC director

Communicable Disease:

- **COVID:** On July 6, 2023 HHS provided guidance regarding direction to those participating in the COVID-19 Vaccination Program as the United States Government stops distributing COVID-19 vaccines through its current ordering system and the vaccines transition to traditional pathway for procurement, distribution and payment of COVID-19 vaccine. As future guidance evolves, we will have internal meetings to plan for vaccinating individuals in the fall.
- **Flu:** We are preparing for our fall off site flu vaccine clinics and have been in contact with a couple organizations who would like to schedule clinics in October. We received our new VeriCor vaccine transport cooler and will be utilizing it for our off-site clinics.
- Other Communicable Diseases:
 - **Campylobacter case**: The pt. was not hospitalized but was treated with antibiotics, symptoms resolved.
 - **Chikungunya case**: The pt. traveled to the Amazon, not hospitalized and by the time he was evaluated, his symptoms had resolved.
 - Giardiasis: There were 2 cases, one pt. was not hospitalized and was still symptomatic at time of interview and her spouse also had symptoms but hadn't tested for this. The other pt. was hospitalized for three days and also had e-coli, his symptoms resolved at time of interview.
 - **Legionellosis cases**: There were 4 pts all with pneumonia and hospitalized, one pt. was homeless. All of these pts. lived within a few miles of each other. CHS is collaborating with Environmental Health and the NYSDOH regional office to investigate a possible common source. No source has been identified so far.
 - **Salmonella**: One pt. was not hospitalized, took medication and symptoms had not yet resolved and required notification to neighboring county as pt. worked in different county. The other pt. is a child and was hospitalized for this illness and required antibiotics, symptoms had resolved at time of interview.

• **Strep Pneumoniae, invasive cases**: Both pts have multiple co-morbidities contributing to this illness and both required lengthy hospitalizations and medications.

SafeCare Program:

• We received one new referral to this program in July. Two current families are enrolled but SafeCare visits are on hold as the families both recently moved and the parents are graduating from Family Treatment Court.

Moms PLUS+:

- We received 52 referrals to Moms PLUS+ in the month of July. Our nurses completed 66 home visits in July.
- We continue to work closely with the PICHC program and share many clients with the community health workers. These programs work well together and we are proud to offer this holistic model to address our clients' many needs.
- Jess Clark Manderville, senior community health nurse, and Shae Jewell, community health worker, presented the Moms PLUS+ program and the PICHC program to CMC Birthplace staff on July 27th. They presented on how to make referrals to our programs and what our services look like. We are grateful for a close working relationship with CMC Birthplace.

Immunization:

- There were 8 clients vaccinated during the month of July. These appointments are scheduled during our weekly Friday on-site clinic. There were no children vaccinated in the month of July. Most visits were students returning to college and individuals needing vaccines for employment.
- We have seen an increase in demand for children needing immunizations for school. These visits have been scheduled in August per their convenience.
- Rachel Fried (Community Health Nurse) has scheduled a Jynneos vaccine clinic at STAP in the month of August.

Rabies:

• There were 31 appointments for clients needing Rabies Post Exposure Prophylaxis during the month of July. These exposures were a mix of other wildlife (unknown dog, unknown cat), beaver and bat exposures.

Lead:

• There are 15 children enrolled in the lead program who are being followed to ensure their lead levels decrease. There were no new admissions in July.

HIV:

• There were two nurses who went to STAP to provide anonymous HIV testing in the month of July: Rachel Fried (7/6 and 7/13) and Karen Whetzel (7/20) for a total of 3 Thursday afternoons 1-4pm. Of the patrons who were offered testing, two accepted and had nonreactive results. Education and resources were provided.

Staffing:

- We welcomed one new graduate public health fellow, Sagarika Vemprala, and one information aide, Alissa Newton, to CHS in July.
- We have an opening for a community health nurse and have extended the vacancy to elicit more applicants. More information can be found here: <u>https://www.tompkinscivilservice.org/civilservice/post/7961</u>
- We are planning to hire another fellow to focus on maternal child health, specifically overall program support for PICHC and Moms PLUS+. Interviews are in progress and we hope to have the fellow start in late August or early September.

BOH Report- Tompkins County WIC Program August 2023

Caseload Data:

	Oct	Nov	Dec	Jan	Feb	March	April	May	June	July
Participation	1073	1092	1121	1123	1127	1158	1144	1139	1171	1148
Enrollment	1173	1156	1182	1198	1202	1229	1205	1225	1240	1245
Part/Target Caseload	71.53%	72.80%	74.73%	74.87%	75.13%	77.20%	76.27%	75.93%	77.60%	76.53%

Program Highlights

Waivers related to Physical Presence and Remote Benefit Issuance go into effect August 9, 2023, and will remain in effect until September 30, 2026, or until otherwise determined by the United States Department of Agriculture (USDA) Food and Nutrition Services (FNS). The provision of offering remote services over the past several years has proven to be an effective and efficient way to provide WIC services to eligible WIC families. The TC WIC program will now offer both in person and remote appointments in an effort to do what's best for the family.

- Beginning August 1st, WIC will offer appointments at our temporary site locations; Groton, Newfield and Jacksonville.
- August 1-7th was World Breastfeeding week. WIC staff collaborated with LATCH- Lactation Alliance for Tompkins County Health and participated in the community event honoring breastfeeding, chestfeeding & pumping families.
- The Tompkins County WIC program was awarded the USDA 2023 WIC Breastfeeding Award of Excellence. Each year the Food and Nutrition Service (FNS), Special Supplemental Nutrition Program for Women, Infants and Children announces the WIC Breastfeeding Award of Excellence application, formerly known as the Loving Support Award of Excellence. The award program was established to recognize local WIC agencies that have provided exemplary breastfeeding promotion and support activities.

N.Y.S. Department of Health Division of Epidemiology Communicable Disease Monthly Report*, DATE: 01AUG23 Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS Month=July

	20	023	2	022	20	021	20	020		Ave)-2022)
Disease	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
ANAPLASMOSIS**	37	434.5	16	187.9	24	281.9	3	35.2	14	164.4
BABESIOSIS**	13	152.7	1	11.7	7	82.2	2	23.5	3	35.2
CAMPYLOBACTERIOSIS**	1	11.7	2	23.5	3	35.2	2	23.5	2	23.5
CHIKUNGUNYA**	1	11.7	0	0.0	0	0.0	0	0.0	0	0.0
COVID-19	58	681.2	806	9465.6	74	869.1	117	1374.0	332	3899.0
CRYPTOSPORIDIOSIS**	0	0.0	1	11.7	2	23.5	4	47.0	2	23.5
ECOLI SHIGA TOXIN**	0	0.0	0	0.0	1	11.7	2	23.5	1	11.7
EHRLICHIOSIS (CHAFEENSIS)**	0	0.0	1	11.7	0	0.0	0	0.0	0	0.0
GIARDIASIS	2	23.5	2	23.5	1	11.7	0	0.0	1	11.7
HEPATITIS B,CHRONIC**	2	23.5	0	0.0	0	0.0	0	0.0	0	0.0
HEPATITIS C,ACUTE**	0	0.0	1	11.7	0	0.0	1	11.7	1	11.7
HEPATITIS C,CHRONIC**	3	35.2	1	11.7	6	70.5	1	11.7	3	35.2
INFLUENZA B, LAB CONFIRMED	0	0.0	0	0.0	1	11.7	1	11.7	1	11.7
LEGIONELLOSIS	4	47.0	1	11.7	0	0.0	0	0.0	0	0.0
LYME DISEASE** ****	158	1855.5	65	763.4	7	82.2	8	94.0	27	317.1
MONKEYPOX	0	0.0	1	11.7	0	0.0	0	0.0	0	0.0
SALMONELLOSIS**	2	23.5	2	23.5	2	23.5	1	11.7	2	23.5
STREP, GROUP A INVASIVE	2	23.5	0	0.0	0	0.0	0	0.0	0	0.0
STREP PNEUMONIAE,INVASIVE**	0	0.0	1	11.7	0	0.0	0	0.0	0	0.0
YERSINIOSIS**	0	0.0	1	11.7	1	11.7	0	0.0	1	11.7

	20	023	20	022	20)21	20	020		we)-2022)
Disease	Freq	Rate								
SYPHILIS TOTAL	0	0.0	2	23.5	2	23.5	1	11.7	2	23.5
- P&S SYPHILIS	0	0.0	0	0.0	0	0.0	1	11.7	0	0.0
- EARLY LATENT	0	0.0	2	23.5	1	11.7	0	0.0	1	11.7
- LATE LATENT	0	0.0	0	0.0	1	11.7	0	0.0	0	0.0
GONORRHEA TOTAL	5	58.7	9	105.7	11	129.2	8	94.0	9	105.7
- GONORRHEA	4	47.0	9	105.7	11	129.2	8	94.0	9	105.7
- P.I.D.	1	11.7	0	0.0	0	0.0	0	0.0	0	0.0
CHLAMYDIA	18	211.4	21	246.6	14	164.4	28	328.8	21	246.6

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

**Confirmed and Probable cases counted

***Not official number

**** In 2017, 27 counties investigated a sample of positive laboratory results; in 2018, 30 counties sampled; in 2019, 33 counties sampled; in 2020, 36 counties sampled.

N.Y.S. Department of Health Division of Epidemiology Communicable Disease Monthly Report*, DATE: 01AUG23 Through July Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS

	2023		2022		2021		2020		Ave (2020-2022)	
Disease	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
AMEBIASIS	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
ANAPLASMOSIS**	79	132.5	66	110.7	86	144.3	31	52.0	61	102.3
BABESIOSIS**	18	30.2	11	18.5	20	33.6	8	13.4	13	21.8
CAMPYLOBACTERIOSIS**	9	15.1	28	47.0	19	31.9	17	28.5	21	35.2
CHIKUNGUNYA**	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0
COVID-19	1678	2815.2	16047	26922	9627	16151	2446	4103.7	9373	15725
CRYPTOSPORIDIOSIS**	4	6.7	11	18.5	14	23.5	14	23.5	13	21.8
DENGUE FEVER**	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
ECOLI SHIGA TOXIN**	4	6.7	3	5.0	6	10.1	5	8.4	5	8.4
EHRLICHIOSIS (CHAFEENSIS)**	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
EHRLICHIOSIS (EWINGII)**	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
ENCEPHALITIS, ARBO**	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
ENCEPHALITIS, OTHER	0	0.0	0	0.0	1	1.7	2	3.4	1	1.7
ENCEPHALITIS, POST	0	0.0	0	0.0	0	0.0	1	1.7	0	0.0
GIARDIASIS	6	10.1	13	21.8	15	25.2	7	11.7	12	20.1
HAEMOPHILUS INFLUENZAE, NOT TYPE B	0	0.0	4	6.7	0	0.0	2	3.4	2	3.4
HEPATITIS A	0	0.0	1	1.7	7	11.7	12	20.1	7	11.7
HEPATITIS B,ACUTE	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0
HEPATITIS B,CHRONIC**	8	13.4	15	25.2	18	30.2	9	15.1	14	23.5
HEPATITIS C,ACUTE**	3	5.0	4	6.7	3	5.0	9	15.1	5	8.4
HEPATITIS C,CHRONIC**	13	21.8	20	33.6	30	50.3	32	53.7	27	45.3

2023		2022		2021		2020		Ave (2020-2022)		
Disease	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
HEPATITIS C,PERINATAL	0	0.0	0	0.0	1	1.7	0	0.0	0	0.0
INFLUENZA A, LAB CONFIRMED	95	159.4	1341	2249.8	265	444.6	526	882.5	711	1192.9
INFLUENZA B, LAB CONFIRMED	12	20.1	11	18.5	6	10.1	738	1238.2	252	422.8
INFLUENZA UNSPECIFIED, LAB CONFIRMED	0	0.0	3	5.0	1	1.7	0	0.0	1	1.7
LEGIONELLOSIS	4	6.7	6	10.1	3	5.0	0	0.0	3	5.0
LISTERIOSIS	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
LYME DISEASE** ****	425	713.0	265	444.6	44	73.8	37	62.1	115	192.9
MALARIA	2	3.4	3	5.0	0	0.0	2	3.4	2	3.4
MENINGITIS, ASEPTIC	0	0.0	0	0.0	0	0.0	1	1.7	0	0.0
MONKEYPOX	0	0.0	3	5.0	0	0.0	0	0.0	1	1.7
PERTUSSIS**	0	0.0	0	0.0	0	0.0	1	1.7	0	0.0
ROCKY MTN SPOT FEVER**	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
SALMONELLOSIS**	8	13.4	20	33.6	13	21.8	8	13.4	14	23.5
SHIGELLOSIS**	0	0.0	2	3.4	1	1.7	0	0.0	1	1.7
STREP, GROUP A INVASIVE	8	13.4	5	8.4	3	5.0	2	3.4	3	5.0
STREP, GROUP B INVASIVE	0	0.0	6	10.1	10	16.8	6	10.1	7	11.7
STREP,GROUP B INV,EARLY/LATE ONSET	0	0.0	0	0.0	0	0.0	1	1.7	0	0.0
STREP PNEUMONIAE,INVASIVE**	2	3.4	8	13.4	4	6.7	6	10.1	6	10.1
TOXIC SHOCK SYNDROME,STREPTOCOCCAL**	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0
TUBERCULOSIS***	0	0.0	1	1.7	1	1.7	2	3.4	1	1.7
TYPHOID FEVER	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0
VIBRIO - NON 01 CHOLERA**	1	1.7	2	3.4	1	1.7	0	0.0	1	1.7
YERSINIOSIS**	1	1.7	6	10.1	1	1.7	0	0.0	2	3.4
SYPHILIS TOTAL	0	0.0	34	57.0	24	40.3	20	33.6	26	43.6

	20	023	20	022	2(2021 2020		Ave (2020-2022)		
Disease	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
- P&S SYPHILIS	0	0.0	16	26.8	7	11.7	8	13.4	10	16.8
- EARLY LATENT	0	0.0	15	25.2	11	18.5	8	13.4	11	18.5
- LATE LATENT	0	0.0	2	3.4	6	10.1	4	6.7	4	6.7
- CONGENITAL SYPHILIS	0	0.0	1	1.7	0	0.0	0	0.0	0	0.0
GONORRHEA TOTAL	64	107.4	109	182.9	142	238.2	97	162.7	116	194.6
- GONORRHEA	63	105.7	109	182.9	142	238.2	96	161.1	116	194.6
- P.I.D.	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0
- GONORRHEA,DISSEMINATED	0	0.0	0	0.0	0	0.0	1	1.7	0	0.0
CHLAMYDIA	181	303.7	377	632.5	337	565.4	396	664.4	370	620.8

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

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

***Not official number

**** In 2017, 27 counties investigated a sample of positive laboratory results; in 2018, 30 counties sampled; in 2019, 33 counties sampled; in 2020, 36 counties sampled.



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Children with Special Care Needs Division — (607) 274-6644

Children with Special Care Needs Highlights July 2023

Staff Activities

Staff Group Trainings-

• Part 3 of Trauma Informed Care- Practical application-all staff

Committees/Meetings

- CSCN Staff meeting-7/18/23
- Early Childhood Collaborative meetings once a month with community partners.
- Collaborative Solutions Network meeting regarding the new Systems of Core initiative.
- 2 CSCN staff participating in Strategic Planning Cross Functional Team meetings.
- Collaborative meetings with DSS, CHS, MH and CSCN- training focused once a month.

Program Work:

Early Intervention

- 3 more providers leaving this program by August 18th. Will add 14 more children to the speech list and 10 more to the teacher list.
- Currently have no Social Workers for the EI program and will be down to 1 part time Special Instruction Teacher
- Early Intervention experiencing **Wait lists** for speech services, Special Instruction (11) Teachers and Social Work services (5). Long wait list for Speech (37), OT (11), PT (9)
- 2 Service Coordinators positions open and 1 new nurse in training
- 17 referrals received this month.
- Currently serving 235 active/qualified children in Early Intervention
- Diane Olden, SC retired 7/28/23 after 30 years in public health

Preschool

 Currently serving 187 children in Preschool Special Education with 57 in special integrated classrooms

CYSHCN

- Monthly meetings with Regional Support Centers for work on Social Media platforms, website development, developing a resource Guide, development of promotional materials, development of a resource library, and a new family survey for the program.
- Increased referrals to this program for high needs children with medical needs, referrals to OPWDD, Health homes and other needs.

CSCN Director Program work:

- Early Intervention Coordinating Council mtg, Sr Leadership mtgs 1 x month, Preschool Chairperson meeting, EI software mtg, and CYSHCN regional meetings on social media use, advertising, outreach support, and collaboration meetings.
- Chair of monthly Early Childhood Development Collaborative-mtg every month

- Director currently covering a case load of 13+ EI children to cover the vacancies due to 2 Serive Coordinators positions open. Director actively involved with training the new Service Coordinator(nurse) for her role in ongoing Service Coordination.
- Budget work for CSCN general budget completed.
- July 17th asked to speak with the Health and Human Services committee about the provider capacity.



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Fax: (607) 274-6695

CERTIFIED, REGULAR, & ELECTRONIC MAIL

August 7, 2023

Jordan Puryear, Director Finger Lakes GrassRoots Festival Org., Inc PO Box 941 Trumansburg, NY 14886

ENVIRONMENTAL HEALTH DIVISION

tompkinscountyny.gov/health/eh

Re: Tompkins County Board of Health Draft Resolution # EH-ENF-23-0013 -Incomplete Mass Gathering Application Violation of New York State Sanitary Code and Tompkins County Board of Health Orders Finger Lakes GrassRoots Festival of Music and Dance, T-Ulysses

Dear Mr. Puryear:

Thank you for signing the Stipulation Agreement on July 5, 2023, for Finger Lakes GrassRoots Festival Org., Inc., for the incomplete application. Enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, August 22, 2023**.

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 Adriel Shea 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).

We appreciate the effort that GrassRoots put into improving the application and festival operations. We look forward to working with you on future festivals.

Sincerely,

Elizabith Cameran

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

Enclosures - Draft Resolution, Stipulation Agreement and Orders

- pc: F:\EH\MASS GATHERING\Facilities\GrassRoots\2023\Enforcement\23-0013 Incomplete application\Draft Res 23-0013 ver 2.docx
- ec: Tompkins County Board of Health (via; Karan Palazzo, TCHD); GrassRoots: Jordan Puryear; Health & Safety Team; Whitham: Scott Whitham, Michele Palmer; Supervisor T-Ulysses; CEO-T-Ulysses; Anne Koreman, TC Legislature; NYSDOH: John Strepelis, P. E.; Tim Wiant; TC: William Troy, County Attorney; TCWH: Frank Kruppa, Whole Health Commissioner, Brenda Crosby, Deputy PH Director; Elizabeth Cameron, P.E., Director of Environmental Health; Scott Freyburger; Adriel Shea, Kate Walker, Skip Parr, Brenda Coyle
- scan: Signed copy to Accela

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DRAFT RESOLUTION # ENF-23-0013

Finger Lakes GrassRoots Festival Finger Lakes GrassRoots Festival Org., Inc., Jordan Puryear, Owner/Operator PO Box 941, Trumansburg, NY 14886

Whereas, the Finger Lakes GrassRoots Festival Org., Inc. (GrassRoots) operates the Finger Lakes GrassRoots Festival of Music and Dance, which has been permitted as a Mass Gathering subject to Subpart 7-4 of the New York State Sanitary Code (NYSSC) since 2014; **and**

Whereas, the Board of Health adopted Resolution #EH-ENF-22-0027 on January 24, 2023; and

Water Systems

Whereas, in accordance with Resolution #EH-ENF-22-0027, GrassRoots submitted, and Tompkins County Environmental Health (TCEH) approved, a water system construction schedule for the Fairgrounds and Across the Way (ATW) that required completion of the projects no later than May 1, 2023; **and**

Whereas, on May 10, 2023, TCEH staff performed a field visit to review the water systems at the Fairgrounds and ATW and identified significant deficiencies from the approved plans at both locations and observed that construction was partially completed at ATW; **and**

Whereas, deficiencies at the Fairgrounds included no soakage pits for the spigots, no 4"x4" support posts, and fewer water spigots than shown on the plans (the water trees were also different than on the approved plans); **and**

Whereas, deficiencies at ATW included inadequate or missing soakage pits, missing control valves, and that piping for the two new water trees was not connected to the existing water system and the two new water trees were not installed; **and**

Whereas, as of May 29, 2023, GrassRoots had not completed the corrections to the water systems at the Fairgrounds and ATW; **and**

Whereas, as of June 16, 2023, GrassRoots had not submitted an approvable site-specific water disinfection plan and schedule for the Fairgrounds and Across the Way; **and**

Campsite Layout Plans

Whereas, by February 17, 2023, GrassRoots submitted a finalized plan for laying out all roadways and camping areas (the submittal was revised on March 10, 2023); **and**

Whereas, GrassRoots did not pay the \$20,000 penalty assessed in Order #2 of Resolution #EH-ENF-22-0027 because TCEH approved these submittals; **and**

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Whereas, on May 23, 2023, TCEH observed that the control points had not been installed in accordance with the approved plans; **and**

Whereas, on May 24, 2023, GrassRoots submitted a revised control point location map that changed the number and location from what had been approve; **and**

Whereas, Jordan Puryear, Operator, signed a Stipulation Agreement with Whole Health Commissioners Orders on July 5, 2023, agreeing that Finger Lakes GrassRoots Festival violated these provisions of the New York State Sanitary Code and Resolution # EH-ENF-22-0027; **now therefore be it**

Resolved, on recommendation of the Tompkins County Board of Health, That the Finger Lakes GrassRoots Festival Org., Inc., Owner/Operator, is ordered to:

- 1. Pay a penalty of \$10,000 for these violations, due by **October 16, 2023**. (**Do Not** submit penalty payment until notified by Tompkins County Whole Health.) (Note that this penalty supersedes the \$20,000 penalty in Order # 3 of Resolution # EH-ENF-22-0027 and that the other requirements of Resolution # EH-ENF-22-0027 remain in effect); **and**
- 2. Submit accurate and approvable engineering certifications and as-built record drawings for the water systems at the Fairgrounds and at Across The Way noting any deviations from the approved plans by June 23, 2023 (*completed*); **and**
- 3. Submit approvable disinfection and start up plans and schedules signed by a licensed design professional for the water system at the Fairgrounds and the water system at Across The Way (*completed*); **and**
- 4. Follow the plans and procedures submitted in the mass gathering application for all activities including:
 - a. construction and maintenance of the campsite and roadway layout, and
 - b. oversight, set up, and maintenance of camp sites, and
 - c. security at the festival; and
- 5. Communicate with Tompkins County Environmental Health (TCEH) in advance of making changes to approved plans and reports and from the field prior to making if field-changes are needed; **and**
- 6. Comply with all requirements in Resolution #EH-ENF-22-0027; and
- 7. Comply with all requirements of Subpart 7-4 and applicable requirements of Subpart 5-1 of the NYSSC.

 $\label{eq:F:EHMASS_GATHERING\Facilities\GrassRoots\2023\Enforcement\23-0013-Incomplete application\Draft Res 23-0013-ver 2.docx$



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CERTIFIED, REGULAR, & ELECTRONIC MAIL

August 11, 2023

Katelin Nelson Cayuga Nature Center 1420 Taughannock Blvd Ithaca, NY 14850

Re: Tompkins County Board of Health Draft Resolution # EH-ENF-23-0014 Cayuga Nature Center, Children's Camp, T-Ulysses

Dear Katelin Nelson:

Thank you for signing the Stipulation Agreement on August 3, 2023, for Cayuga Nature Center. Enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, August 22, 2023**.

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 Kristee Morgan or me at (607) 274-6688 at least one day before the meeting. If you plan to attend, please arrive by 12:00 p.m. (noon).

Sincerely,

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

Enclosure (s) - Draft Resolution, Stipulation Agreement and Orders, Inspection Report

pc: F:\EH\CHILDRENS CAMPS (CC)\Facilities (CC-4)\Cayuga Nature Center\Enforcement\CNC Draft Resolution.docx Tompkins County Board of Health (via; Karan Palazzo, TCWH)

ec: CEO T-Ulysses; Anne Koreman, TC Legislature; TCWH: Elizabeth Cameron, P.E., Director of Environmental Health; Frank Kruppa, Commissioner of Whole Health; Scott Freyburger, P.E.; Adriel Shea; Kristee Morgan; Skip Parr; Rene Borgella; Brenda Coyle

scan: Signed copy to Accela



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Phone: (607) 274-6688

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Fax: (607) 274-6695

DRAFT RESOLUTION # ENF-23-0014

Cayuga Nature Center Katelin Nelson, Operator 1420 Taughannock Blvd. Ithaca, NY 14850

Whereas, the owner/operator of a Children's Camp must comply with the regulations established under Part 7-2 of the New York State Sanitary Code (NYSSC); and

Whereas, it is a critical violation of Part 7-2 of the NYSSC to operate a children's camp, or cause or allow the same to be operated, without a permit from the permit-issuing official; and

Whereas, on June 26, 2023, the Environmental Health Division (EHD) observed the Cayuga Nature Center to be operating a children's camp without a valid permit from Environmental Health as required by Subpart 7-2; **and**

Whereas, children's camps with on-site water systems meeting the definition of a public water system must comply with the requirements of Subpart 5-1 and provide potable drinking water; and

Whereas, Cayuga Nature Center has been under a Boil Water Order since June 24, 2022, due to inadequate disinfection residual in the water supply; and

Whereas, Cayuga Nature Center submitted a proposal for a UV disinfection system on June 26, 2023, that was accepted by the EHD and subsequently installed; **and**

Whereas, EHD staff collected a surveillance sample on July 12, 2023, that contained a large number of total coliform bacteria; and

Whereas, Jaimi Shoemaker, representative for Cayuga Nature Center, signed a Stipulation Agreement with Whole Health Commissioners Orders on August 3, 2023, agreeing that Cayuga Nature Center violated Subpart 7-2 of the New York State Sanitary Code; **now therefore be it**

Resolved, on recommendation of the Tompkins County Board of Health, That Katelin Nelson, Operator, is ordered to:

- 1. Pay a penalty of \$500 for these violations, due by **October 15, 2023** (**Do Not** submit penalty payment until notified by the Tompkins County Whole Health Department.); and
- 2. Submit a complete application for future Children's Camp permit renewals to operate at least 60 days prior to the expected first date of camp operation; and
- 3. Submit items not available for submission 60 days ahead at least 2 weeks prior to the preoperational inspection; and
- 4. By September 1, 2023, submit an evaluation from an engineer or water professional that includes an analysis of the following issues and recommendations for compliance with Subpart 5-1 and 7-2 of the NYS Sanitary Code:

- a. Bacteriological sample results from the two water wells (raw water samples) and from the water coming from the water storage tank to determine if the water storage tank is contaminated with bacteria; **and**
- b. An analysis of the need for the existing water storage tank; and
- c. A plan for the disinfection of the water coming from the two water wells that may include the use of both the existing chlorination and UV disinfection systems; **and**
- 5. Comply with all the requirements of Subpart 7-2 of the New Work State Code for Children's Camps and applicable requirements of Subpart 5-1 for the water supply.



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STIPULATION AGREEMENT AND ORDERS # EH-ENF-23-0014

Cayuga Nature Center Katelin Nelson; Operator 1420 Taughannock Blvd. Ithaca, NY 14850

I, Katelin Nelson, as a representative for Cayuga Nature Center, agree that, on June 26, 2023, Cayuga Nature Center was in violation of Subpart 7-2 of New York State Sanitary Code for operating without a valid permit to operate from the Health Department and, on June 24, 2022, Subpart 5-1 of the New York State Sanitary Code for failing to have an adequate drinking water disinfectant residual.

I agree to pay a penalty not to exceed \$500 for these violations following adoption of a resolution by the Board of Health. (**Do not** submit penalty payment until notified by the Tompkins County Whole Health Department.)

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

- 1. Submit a complete application for future Children's Camp permit renewals to operate at least 60 days prior to the expected first date of camp operation; and
- 2. Submit items not available for submission 60 days ahead at least 2 weeks prior to the preoperational inspection; and
- By September 1, 2023, submit an evaluation from an engineer or water professional that includes an analysis of the following issues and recommendations for compliance with Subpart 5-1 of the NYS Sanitary Code:
 - Bacteriological sample results from the two water wells (raw water samples) and from the water coming from the water storage tank to determine if the water storage tank is contaminated with bacteria; and
 - b. An analysis of the need for the existing water storage tank; and
 - c. A plan for the disinfection of the water coming from the two water wells that may include the use of both the existing chlorination and UV disinfection systems; and
- 4. Comply with all the requirements of Subpart 7-2 of the New York State Code for Children's Camps and applicable requirements of Subpart 5-1 for the water supply.

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:	Jun JAS	Date: 8/3/2023	
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Diversity Through Inclusion

Stipulation Agreement # ENF-23-0014 July 28, 2023

Katelin Nelson is hereby ordered to comply with these Orders of the Whole Health Commissioner.

nel Cush Date: 3/8/23 Signed: r Frank Kruppa

Whole Health Commissioner

Page 2 of 2

TOMPKINS COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION 55 BROWN ROAD Ithaca, NY 14850-0000 (607) 274-6688 TCEH@tompkins-co.org

Children's Camp Inspection Summary Report

Operation:CAYUGA NATURE CENTER SUMMER CAMP (ID: 424717)Facility Name:CAYUGA NATURE CENTERFacility Code:54-1247Facility Address:1420 Taughannock Boulevard, Ithaca, NY 14850

To the Attention of:

Cayuga Nature Center CAYUGA NATURE CENTER 1420 Taughannock Blvd Ithaca, NY 14850 Email: kjn43@cornell.edu

Field Visit

Date:	June 26, 2023 02:32 PM
Inspector:	Rene Borgella (rborgella@tompkins-co.org)
Responsible Person:	Staff

Summary

Number of Public Health Hazards Found:	0
Number of Public Health Hazards NOT Corrected:	0
Number of Other Violations Found:	1
Reinspection is Required	

Each item found in violation is reported below along with the code requirement.

NO PUBLIC HEALTH HAZARDS REPORTED

ADMINISTRATION/SUPERVISION

ITEM #18 WAS FOUND IN VIOLATION 1 TIME(S).

All or parts of the item are violations.

Code Requirements:	Valid Permit; Application; Enrollment Statement/Brochure; Justice Center Compliance {7-2.4, 7-2.5 (p), 7-2.25(b)(9)}
Inspector Findings:	Facility was observed operating without a permit. Camp opened 6/26/23; permit was acquired 6/28/23.

Additional Information Collected During Inspection

Comments: Visited facility to determine if they were in operation without a permit. Camp was in session.