

AGENDA
Tompkins County Board of Health
Rice Conference Room
55 Brown Road, Ithaca NY 14850

Tuesday, October 25, 2022
12:00 Noon Via Zoom

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 September 27, 2022 Minutes (2 mins.)

12:06 IV. Financial Summary (9 mins.)

12:15 V. Reports (15 mins.)

Administration

Children with Special Care Needs

Health Promotion Program

County Attorney's Report

Medical Director's Report

Environmental Health

Division for Community Health

CSB Report

12:30 VI. New Business

12:30 Administration (10 mins.)
Administrative Actions:

1. Review of Proposed ATUPA Penalty Policy (10 mins.)

12:40 Environmental Health (25 mins)
Enforcement Action:

1. Resolution #EH-ENF-22-0022 – Serendipity Mobile Food Truck, T-Ithaca, Violation of Subpart 14-4 of New York State Sanitary Code (Food) (5 mins.)

2. Resolution #EH-ENF-22-0025 – Dream Vape, C-Ithaca, Violation of BOH Orders # EH-ENF-22-0008 and Article 13-F of New York State Public Health Law for Sale of Prohibited Flavored Vapor Product and Underage Sale of Tobacco Product (ATUPA) (5 mins.)

3. Resolution #EH-ENF-22-0029 – Ko Ko Restaurant, C-Ithaca, Violations of Subpart 14-1 (Food) (5 mins.)
4. Resolution #EH-ENF-22-0032 – Ithaca Ale House, C-Ithaca, Violations of Subpart 14-1 (Food) (5 mins.)
5. Resolution #EH-ENF-22-0034 – Old Mexico, C-Ithaca, Violations of Subpart 14-1, and Violation of BOH Orders # EH-ENF-21-0022 (Food) (5 mins.)

1:05 Adjournment

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MINUTES

Tompkins County Board of Health
September 27, 2022
12:00 Noon
Virtual Meeting via Zoom

Present: Christina Moylan, Ph.D., President; Susan Merkel; Edward Koppel, MD; Melissa Dhundale, MD; Shawna Black; and Samara Touchton

Staff: Claire Espey, Director of Community Health; Rachel Buckwalter, DCH; William Klepack, MD, Medical Director; William Troy, County Attorney; Frank Kruppa, Public Health Director; Harmony Ayers-Friedlander, Deputy Commissioner; Kristee Morgan, EH; Ted Schiele, HPP; and Karan Palazzo, LGU Administrative Assistant

Excused: David Evelyn, MD; and Ravinder Kingra

Guests: None

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

Privilege of the Floor: None.

Approval of the August 23, 2022 Minutes: Dr. Dhundale moved to approve the August 23, 2022 minutes, second by Ms. Black; all were in favor as written.

Financial Summary: Ms. Grinnell Crosby was not present. Mr. Kruppa referred to the written report included in the packet and was available to respond to any questions.

Administration Report: Mr. Kruppa welcomed the everyone back to the first in person meeting in quite some time and gave a reminder that Board meetings will resume meeting in-person. The county policy does allow for remote participation, but those members will not be eligible to maintain quorum.

COVID – COVID is stable but cases increased as students of both higher education and K-12 returned. Hospitalizations remain low. Public messaging continues to go about COVID including the available Bivalent booster for anyone 12 years and up and has at least two months out from their previous vaccine. Local pharmacies and healthcare systems are providing those vaccines.

Monkey Pox - There are no new cases and staff worked diligently on monkey pox vaccine pods. Two successful clinic events supplied over 70 and 60 doses. Second dose clinics are planned for next week and working to get higher education partners vaccines to administer on campus.

Homeless encampment – Mr. Kruppa, at the county administrator’s request, is working with the TIDES Group who is looking at a sanctioned encampment model in Ithaca. The process will make its way thru the Legislature and Common Council for review, input, and feedback. There are significant issues in the encampment, and action is needed, so guidance and direction from the Common Council and Legislature is welcomed.

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Health Promotion Program Report: Mr. Kruppa reported that work on the Community Health Assessment and Community Health Improvement Plans are in progress and a report will be available at the joint November/December meeting for the Board's review. The Board's October meeting will have some data included in the packet. Starting next year, the annual local services plan will move to a four-year plan which will allow it to align easily with the Community Health Improvement Plan. Mental health and substance use disorders are expected to be priority areas of the Community Health Improvement Plan.

Mr. Schiele added that a presentation will be given on the Community Health Assessment Plan and the survey at the November/December joint meeting. Ambra Munlyn was hired for the Health Educator position and her position will be split between the Healthy Neighborhoods and Tobacco programs.

Medical Director's Report and Discussion: Dr. Klepack had nothing to add to his written report included in the packet and was available to answer any questions.

Division for Community Health (DCH) Report: Ms. Espey reported two community health workers were onboarded and recruitment for a supervisor will begin in October. The program will allow the community health workers to support parents and expecting parents to connect to resources they need. There is a need for communicable disease nurse. Ms. Espey announced that she will be stepping down from her position as Community Health Director this November.

Ms. Black requested monthly or quarterly reporting on overdoses in Tompkins County at the BOH meetings. Mr. Kruppa affirmed her request and noted that data/information on overdoses is currently posted on the Health Department's website and will be included in the BOH packets moving forward.

Children with Special Care Needs Report: Ms. Thomas was not present.

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

Environmental Health Report: Ms. Cameron was not present, and Ms. Kristee Morgan reported on her behalf. An office conference was held with GrassRoots who hired a landscape planning design architect to provide permitting services for their mass gatherings. It is unsure at this time if they will be signing the stipulation agreement or requesting an administrative hearing. Ms. Morgan confirmed that it is to address the current enforcements in process.

Mr. Kruppa added that the conference was also to set up a plan for next year and encouraged the hiring of an architecture firm for clarity, accuracy, and effectiveness with the inclusion of a timeline with the licensed architect signing off on the plan. Once the plan has been implemented and signed by the licensed architect as designed, pre-operation inspections will be done to confirm. A reduction of the significant proposed fines was offered with the ability to earn credit if timeframes are met. He said, "The importance is compliance".

Community Mental Health Services Board (CSB) Report: Ms. Ayers-Friedlander reported that the CSB met on September 12th and guest speaker Denise Vreeland, Vice President of Supports and Services at Mozaic/Challenge spoke about their work in creating an article 16 clinic in our community. An article 16 clinic provides specialized mental health treatment services for people who are in the OPWDD system. The CSB also discussed the bylaws and charter.

Resolution #EH-ENF-22-0028 – Potala Café/Tibetan Momo Bar, C-Ithaca, Violation of Subpart 14-1 of New York State Sanitary Code (Food) Ms. Merkel moved to accept the resolution as written; seconded by Dr. Dhundale.

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No discussion.

The vote to approve the resolution as written was unanimous.

Resolution #EH-ENF-22-0031 – Canopy by Hilton – Strand Café, C-Ithaca, Violations of Subpart 6-1 and of BOH Orders #EH-ENF-21-0014 (Pool) Dr. Koppel moved to accept the resolution as written; seconded by Ms. Touchton.

Discussion: Ms. Merkel questioned the higher penalty. Ms. Morgan explained that the higher penalty was for equipment not being operated or maintained correctly over a longer period for multiple items resulting in a greater public health hazard thus the higher penalty.

The vote to approve the resolution as written was unanimous.

Administrative Action:

Bylaw and Charter Discussion – Mr. Kruppa reported that the bylaws and charter from both the BOH and CSB went to Health and Human Services (HHS) last month to give them an opportunity to provide feedback before the process. HHS approved them both but in the interim, the Legislature is looking at a new policy related to advisory boards to create term limits and or the length of time of the service. Once the new policy is received, the boards will have an opportunity to respond and make additional necessary adjustments to the bylaws. Nothing is finalized but if there are any concerns about terms limits and length of terms, the legislature should be notified for consideration.

Mr. Kruppa confirmed that the legislature is considering stronger language that would require term limits, consistent across all advisory boards. Ms. Black added that term limits would help the Boards open-up for new people, fresh ideas and a more welcoming community feel.

Mr. Kruppa confirmed the charter is moving forward but the bylaws are put on hold. The county attorney is drafting a local law and a resolution to move forward with the draft charter which will go to government operations on October 6th and to the HHS on October 17th and then to the full legislature where there will be a public hearing and a subsequent vote. The process will be completed at the legislatures' second meeting in November.

Community Health Quality Advisory Committee (CHQAC) – Dr. Moylan referred to the email with the list of names the BOH is to vote and approve for CHQAC. The names are below.

Christina Vann and Lindsay Ward of Cayuga Medical Center; Malinda Rees of Child Development Council; Karen Bishop as a community member (consumer); Serena Ward as a community member (consumer); and Sam Stevenson or Justine Waldman of REACH Medical.

Ms. Espey provided a summary of the CHQAC. She said that the committee meets quarterly and last met in June 2022. The committee establishes and assure standards of care and meet at least quarterly to:

- Review policies pertaining to the delivery of the health care services provided by the Agency and, when revisions are indicated, recommend such policies to the Board of Health for adoption
- Conduct a clinical record review of the safety, adequacy, type, and quality of services provided which includes: a random selection of patients currently receiving services and report the review findings, conclusions, recommendations, and actions to the Board of Health for necessary action, if applicable

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- Assist the agency in maintaining liaison with other health care providers in the community

No discussion of applicants.

Ms. Merkel moved to approve the list of applicants to the Community Health Quality Advisory Committee (CHQAC); seconded by Ms. Black.

The vote to approve the list of applicants was unanimous

The next meeting is Tuesday, October 25th, 2022 @ Noon.

Adjournment: Adjourned at 12:45 p.m.

HEALTH PROMOTION PROGRAM – September 2022

Samantha Hillson, Director, PIO
Ted Schiele, Planner/ Evaluator
Diana Crouch, Healthy Neighborhoods Education Coordinator
Shannon Alvord, Communications Coordinator
Pat Jebbett, Project Assistant
Mara Schwartz and Tenzin Aaya, Community Health Workers
Deidre Gallow, Administrative Assistant

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

- PICHC grant: CHWs and Supervisor interviews completed; staff hired. CHWs on-boarded; Supervisor to begin mid-October.
- Cornell MPH – Communications Project; focus on development of tool for promotion of CHWs
- Application approved for the NACCHO Health Equity and Overdose Prevention Program.

Monkeypox

- [Webpage](#) developed, ongoing updates
- Multiple first and second dose monkeypox vaccination clinics held at CHS; all appointments filled.
 - [Sept 7/8](#)
 - [Sept 22](#)

PICHC (Perinatal and Infant Community Health Collaborative)

- In collaboration with Community Health Services, planning for implementation of the PICHC grant.
- The PICHC funding will enable CHS to hire 2 additional Community Health Workers, a CHW Supervisor, and further promotion of Moms Plus+ services to the community. Interviews completed, anticipated to be fully staffed mid-October.

Community Health Workers (CHWs)

- Community Health Workers: continue to work with community partners who have similar roles, or plans for similar roles, including Cayuga Health, CCE, REACH Medical, and HSC; community outreach.

Outreach events in September 2022:

- September 10, Freeville Harvest Festival
- September 10, DOER/TCHD Emergency Preparedness Fair
- September 13, West Village (Ithaca), start of monthly “Community Health Connection”
- September 15, “Community Health Connection”, Tompkins County Public Library
- September 16, “Community Health Connection”, Southworth Library (Dryden)
- September 17, Dryden Farmer’s Market
- September 20, “Community Health Connection”, Groton Public Library
- September 21, “Community Health Connection”, Newfield Public Library/Food Pantry
- September 24, Enfield Harvest Festival
- September 24, Lansing Community Carnival
- September 26, Enfield Food Pantry
- September 27, Immaculate Conception Food Pantry (downtown Ithaca)
- September 29, No Mas Lagrimas Food Pantry (Henry St Johns, Ithaca’s Southside)
- September 30, Ithaca Apple Festival

COVID-19

- Outreach and promotion around COVID-19 Vaccine and Boosters; 30 second commercial produced, airing now – December 2022 on local tv stations: featuring [BIPOC](#); featuring [rural, white farmer](#).
- Advertisements for Boosters commercially promoted on Facebook with WSYR contract.
- Booster ads running regularly in the Freeville Shopper and in Tompkins Weekly.
- Updated COVID-19 Guidance [video](#) produced.
- Outreach, promotion, and distribution of KN95 masks and self-test kits continues.
- KN95 mask video filmed and narrated by local videographer Shira Evergreen, <https://vimeo.com/693836241>; video is being translated into multiple languages, including Spanish, Karen, Mandarin, Cantonese, and Russian.
- In collaboration with COVID Communications team, develop and disseminate public information on guidance updates. Update website and social media.
- Ongoing website updates related to COVID-19 developments (see Media, Website section below).
- Ongoing review, analysis, and updates of COVID-related data. Regularly updated data is available on the COVID [Data Page](#).

- Bi-weekly Communications Team meetings – planning a vaccination/booster and masking campaign with funding from NYS. Includes a KN95 video and print advertising in local weeklies and online. Filming concluded for the development of 30 second commercial to run on public television and YouTube for promotion of vaccines/boosters, featuring TCHD staff and community members; development concluded for creation of longer video outlining current COVID-19 guidance, featuring TCHD staff.

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

2022-2024 Progress

- The CHA/CHIP Steering Committee meets the first Thursday of every month.
 - At the most recent meeting (Oct. 6) a selection of data visualizations related to health equity were presented and discussed. These were part of the process for selecting which Prevention Agenda priorities, goals, and interventions will be the focus of the 2022-2024 Community Health Improvement Plan (CHIP). Data sources included results from the Community Health Survey conducted in July.
- Qualitative Data group: reviewing existing community reports and plans.
- Working groups ongoing for cancer screening and social determinants of health (SDoH) interventions.
- Maternal and Child Health/Prenatal working group – will become PICHC advisory board.

Healthy Neighborhoods Program

- HNP staff continues to receive calls requesting information regard indoor air quality, radon, mold and mildew, bed bug infestations, etc.
- HNP outreach:
 - Newfield Library
 - Emergency Preparedness Fair
 - Cornell’s BEAR Walk event
- Outreach at Various Food Pantries within Tompkins County
- Canvassed Several Areas in Tompkins County, and left fliers in Many Blue Pantry Boxes.
- HNP staff assisted with monkeypox vaccine clinics.

September 2022

HEALTHY NEIGHBORHOODS PROGRAM	MONTH	YTD 2022	Sept 2021	TOTAL 2021*
# of Initial Home Visits (including asthma visits)	30	193	6	100
# of Revisits	7	16	0	0
# of Asthma Homes (initial)	8	39	1	19
# of Homes Approached	48	391	0	448

*Covers the calendar year (January - December); the HNP grant year is April-March.

Tobacco Free Tompkins

- Interviews were held to hire a Health Educator to serve half-time in Tobacco and half-time in HNP. A candidate has accepted the position and will begin on October 17.

Media, Website, Social Media

- [Health](#) and [Mental Health](#) websites updated regularly.
- Ongoing work with Mental Health to update/ upgrade the [TCMH website](#).
- Continue building out the Tompkins County Suicide Prevention Coalition [website](#).
- Ongoing work with CHS and WIC re: social media pages; promotion plans for Moms PLUS+

Press Releases in September 2022:

- [September 1, 2022](#): Media Statement from TCHD: NYS Monkeypox Tracker Removing One Positive Case, Additional New Positive Case
- [September 2, 2022](#): Health Alert: Monkeypox Vaccine Now Available In Limited Supply For High-Risk Tompkins County Residents, TCHD Announces 9/7, 9/8 Clinics
- [September 2, 2022](#): Health Alert: Health Department Seeks Information About A Dog To Rule Out Rabies Infection
- [September 6, 2022](#): CDC Recommends Updated Vaccine Boosters; Contact Pharmacies for Availability
- [September 8, 2022](#): NYS Lifts Mask Mandate for Public Transportation
- [September 9, 2022](#): Health Alert: Tests Show Elevated Legionella in Cooling Tower at the Tompkins County Mental Health Building
- [September 13, 2022](#): Health Alert: NYSDOH Warns of Increase in Opioid Related Deaths in Central NY; Naloxone Available Without a Prescription; Help and Resources Available
- [September 19, 2022](#): Health Alert: Monkeypox Vaccine Clinic, Thurs Sept 22, 2022, 10am to 4pm
- [September 27, 2022](#): Community Announcement: Funding for Tompkins County Septic System Improvements for Eligible Homeowners

PH-MH Strategic Planning

- Cross-Functional Integration Team: Branding agency Iron Design of Ithaca in the final stages of developing a logo. HPP staff working through a Communications Plan and planning for integration of the website.

- Services Team will be meeting monthly.
- Updated Staff Directory (created at the end of 2019) is progressing.
- Results from an internal connectivity/social network survey are being analyzed.
- Review of County HR on-boarding training materials and development of our own “buddy system” for new employees.
- Integration of Services Team will have their first meeting in October.
- Planning for a new CFT to work on a DEI plan and evaluation for the Department.

Opioid-related Updates

911 calls/ month C.A.D. coded as “Overdose/Poisoning.” Source: DoER

Year	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Total
2022	16	19	17	34	38	24	29	30	57				264
2021	20	19	23	21	39	39	39	39	40	40	41	23	383

Also available at tompkinscountynyny.gov/health/opioids

Training/Professional Development

- JEDI: General Meeting and subcommittees.
- Cultural Humility Training, [Cornell Center for Cultural Humility](#); a two-part training to be completed by HPP, CHS and TCMH staff, with community partners working collaboratively on the PICHC project invited.
- ELPH Network: Peer Discussion series
- PICHC Monthly Call, state-wide partners
- Motivational Interviewing training with Rich Shaw, TCMH
- Tompkins Service Provider training
- Citizen Preparedness Training

Community Outreach

Group, Organization	Activity/Purpose
Childhood Nutrition Collaborative	Collective Impact, Healthiest Cities and Counties Challenge, Steering Committee and Monthly meeting
Long Term Care Committee	Planning and sharing resources for long-term care in the community.
Health Planning Council	Advisory Board and Executive Committee, Hillson reappointed as Secretary and Co-Chair of Community Health and Access Cte

Community Health and Access Committee	Sub-committee of the HPC. Focus on telehealth, maternal health, etc.
COFA Advisory Board	Updates and Age Friendly
Suicide Prevention Coalition	Revival of this coalition, new leadership, strategic planning process
Immunization Coalition	Quarterly meeting, updates about COVID-19 vaccine and discussion/feedback, youth vaccination promotion
Lead Poisoning Prevention Network	Quarterly meeting, review lead cases, prevention, new regulation
Cayuga Health Women's Service Line	Re-launch of this service line and discussion. Collaboration with community partners
TC Cancer Screening Working Group	Regular meeting
Aging Services Network	Regular meeting
Homeless & Housing Taskforce	Regular meeting
PICHC Partners Meeting	Weekly meeting to discuss community health worker roles, align program design, collaborate w/community partners

Medical Director's Report
Board of Health
October 2022

I will unfortunately miss your October BOH meeting. This report is written as of Oct 13th.

The news this report presents concern Ebola, Influenza, and vaccination in general. Covid certainly continues as a concern as we see fluctuations in the numbers. We continue to see persistent spread and individuals (even those fully vaccinated/boosted) contract "Long Covid" commonly. It is a nasty disease for anyone who contracts it. Avoiding infection is prudent for all individuals whether vaccinated or unvaccinated. Those who are unvaccinated are at greatest risk for hospitalization and death. Vaccines continue to be shown to be safe and effective in preventing serious disease.

I will also present numbers for reportable communicable diseases. Finally, I will circle back and report an update about Supervised Consumption Facilities (also called injection facilities). Rhode Island is launching a *state endorsed* facility.

Ebola

Case numbers continue to increase in Uganda = 35 confirmed with a number of other probables. CDC is doing travel restrictions yet and you should discuss this with your travelers. See last week's bulletin re Ebola Sudan and its much lower response to Ebola vaccine. CDC is redirecting travelers from Uganda to 5 designated airports for detailed screening before they can complete their travel to their final destination. So far, this early in the problem we have had one traveler intercepted. There are about 140 travelers a day from Uganda to the US. About 30-40 people from Uganda come into JFK per day.

Should you become aware of any travelers who have not been screened notify TCHD at 274 6604 and ask to speak to a communicable disease nurse. Say you are calling about an urgent Ebola patient concern. We will need the person's name, address, phone numbers, DOB, and email address. This is so the detailed interview can be done. If we cannot do it while they are in your office, we will need to reach them later. Be sure to give them the name of TCHD and the above phone number and instruct them to phone us if they have not heard from us within a day. In most cases monitoring for symptoms and signs in the individual will be done by the health department. In higher risk situation quarantine may be required.

Travelers to Uganda should be counseled about their risk. (See links at the CDC webpage below)
Note that this is a dynamic situation and the areas in which Ebola is being found is subject to change by the day/week.

Uganda Ebola Virus Disease Outbreak 2022 - Affected Areas (Data as of October 4, 2022)

<https://www.cdc.gov/vhf/ebola/outbreaks/uganda/2022-sep.html>



Influenza –

There was a **significant increase in cases in the past week (9/14 -21) - out of line with the past 14 years* (41 % increase in cases mostly in Long Island and rising to a regional outbreak level)**. Not a cause of panic but warrants close attention. In the past week data from 675 lab confirmed cases showed significant inc over the previous week. 47 counties are now reporting flu cases (at least >2 / county). Last year 150 lab confirmed cases and the year prior 87. Flu A is 73% and 15% B rest undetermined. This is more Flu B than usual for this time of year. **Cases in NYS average about 300 / week rather than the expected 20-30 for this time of year.** The question is: Is this due to increased testing such as with rapid tests for Covid? Or does it portend what we can expect this season?

Additionally, Influenza has been found already *in one college in Central NYS*, Monroe County has had 18 cases in a single day. Downstate is seeing cases. Formal surveillance reporting starts

this coming week. Influenza flu B has been seen in the state – *if you are seeing flu B NYSDOH wants a sample* sent to them for detection of whether Yamagata is still around.

Of concern, the S. hemisphere has had a particularly severe influenza A outbreak. Southern hemisphere cases have been unprecedented with early H1 and H3 and B Victoria circulating. China had a B Victoria start their season followed by A

https://www.health.ny.gov/diseases/communicable/influenza/docs/influenza_health_advisory.pdf

and here is a webinar on flu - "What's New with the Flu? 2022-2023" webinar is now posted under "Most Recent Webinar" on this webpage:

https://www.health.ny.gov/prevention/immunization/providers/webinar_series.htm

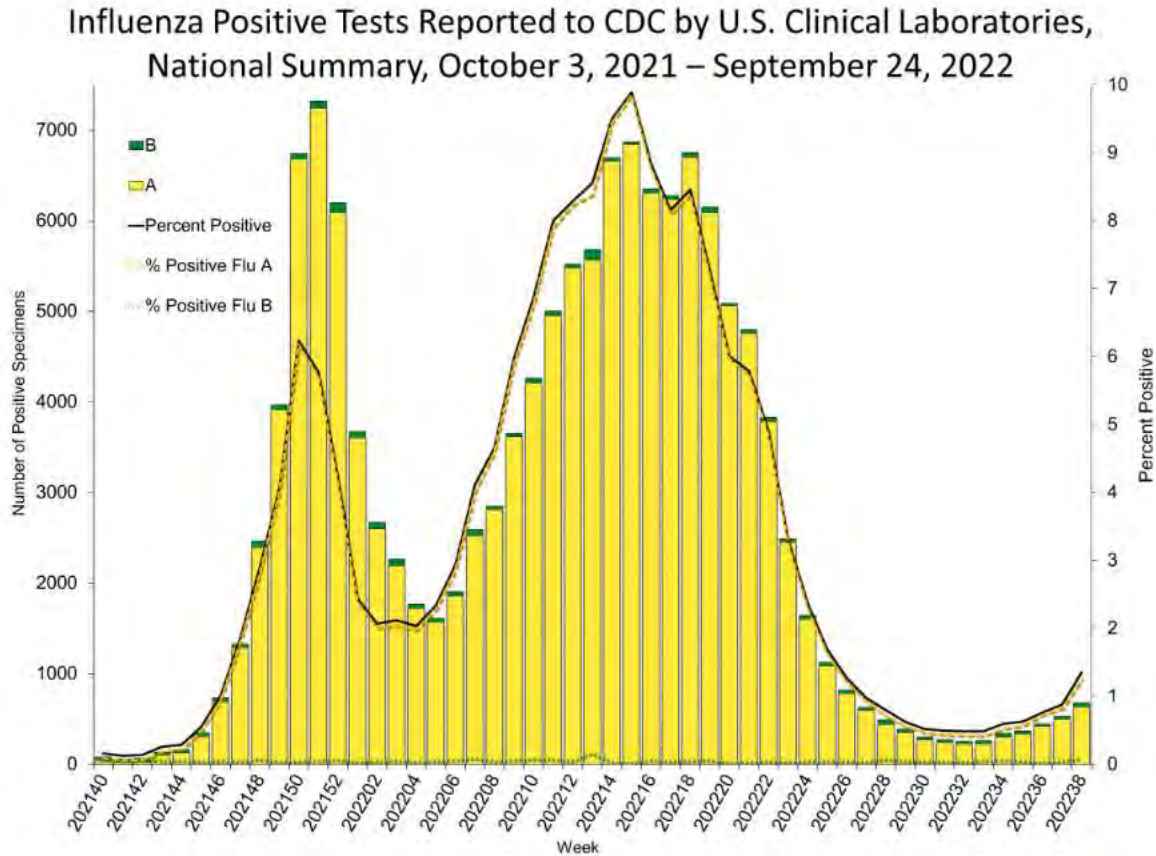
Timing of influenza vaccination: NYSDOH advice is generally don't wait to get vaccinated. CDC concurs that people should vaccinate at the first opportunity and no later than the end of October. (Australia was alarmed enough to offer free flu vaccine to all citizens who had not been vaccinated.)

This year's vaccine – last year's vaccine was 37% effective (due to H3N2 being the primary virus). This year's vaccine has enhanced H3N2 virus protection – so the hope is that it will be more effective. The vaccine of choice for 65 and over is the enhanced dose (hi dose) vaccine. However, if you have a person is over 65 and hi dose is not available then a practitioner should give them what they do have. If they don't, they may never get vaccinated and hi dose becomes unavailable as the year goes on.

General information on global picture: <https://www.who.int/teams/global-influenza-programme/surveillance-and-monitoring/influenza-updates/current-influenza-update>

Coadministration of Flu vaccine and other vaccines: One should not hesitate to get flu with any other vaccine including Covid. It is important to vaccinate when the person is in front of a healthcare person. In addition, there is no recommended waiting interval between flu vaccine and other vaccines. Get it when you can.

*Note the national uptick in cases this fall – much higher than last year



<https://www.cdc.gov/flu/weekly/index.htm>

57% of cases are Upstate.

So, **encourage early vaccination and keep alert for B**. If you find flu B, then send some specimens to Wadsworth for surveillance – (an additional sample will be needed to submit to Wadsworth) - TCHD can help you – phone 274 6604 and ask for the flu nurse.

Encourage masking, hand washing and staying home if sick. Remember that widespread flu means healthcare workers must mask.

Instructions for sending specimens to Wadsworth:

<https://www.wadsworth.org/programs/id/virology/services/specimen-collection>

Reporting by Healthcare Providers in the Ambulatory or Outpatient Setting In addition to required reporting of all laboratory confirmed cases of influenza: • Healthcare providers must

report outbreaks of influenza or influenza-like illness (ILI) to the LHD of the county in which the outbreak is occurring. Contact information for LHDs can be found at <https://www.nyscho.org/directory/>. • Suspected or confirmed cases of novel influenza A virus (including viruses suspected to be of animal origin) and suspected lack of response to influenza antiviral therapy must be immediately reported by telephone to the LHD of the patient's county of residence. • Suspected or confirmed influenza-associated deaths in children aged

https://www.health.ny.gov/diseases/communicable/influenza/docs/influenza_health_advisory.pdf

A Historical reminder:

Flu nationally ~30,000 deaths per year (~166 deaths per day during flu season Dec through April) Covid causing 300+ per day presently

CDC estimates that flu has resulted in 9 million – 41 million illnesses, 140,000 – 710,000 hospitalizations and 12,000 – 52,000 deaths annually between 2010 and 2020.



<https://www.cdc.gov/flu/about/burden/index.html>

For those of you who need a redose of history in order to encourage vaccination here is one:

How we conquered **diphtheria**- *as long as we continue to vaccinate!*

<https://www.smithsonianmag.com/science-nature/science-diphtheria-plague-among-children-180978572/>

“Remembering these success stories can help us maintain a feeling of awe, gratitude and willingness to do our part.”



Nothing about this message has changed!

Covid

Prevalent and increasing in nursing homes and adult homes across the state, some outbreaks in particular adult living facilities in TC

An update: <https://yourlocalepidemiologist.substack.com/p/covid-state-of-affairs-oct-5>

Local Data

Levels are fluctuating with some recent increases

TOMPKINS COUNTY COVID-19 DATA

As of 10/12/2022 at 7:15 a.m.

Active COVID-19 Hospitalizations (a)	11
Total TC Resident Deaths (Source)	68

Total Tests (b)	1,944,835
Daily Tests	211
New Positive Cases (c)	22
Total Positive Cases	24,679

Daily Positive Self-Tests Reported (d)	5
Total Positive Self-Tests Reported	3,956

NYS Vaccine Tracker 1st Dose (e)	88,271
NYS Vaccine Tracker Completed	80,022

Daily Testing Activity (8-day view)

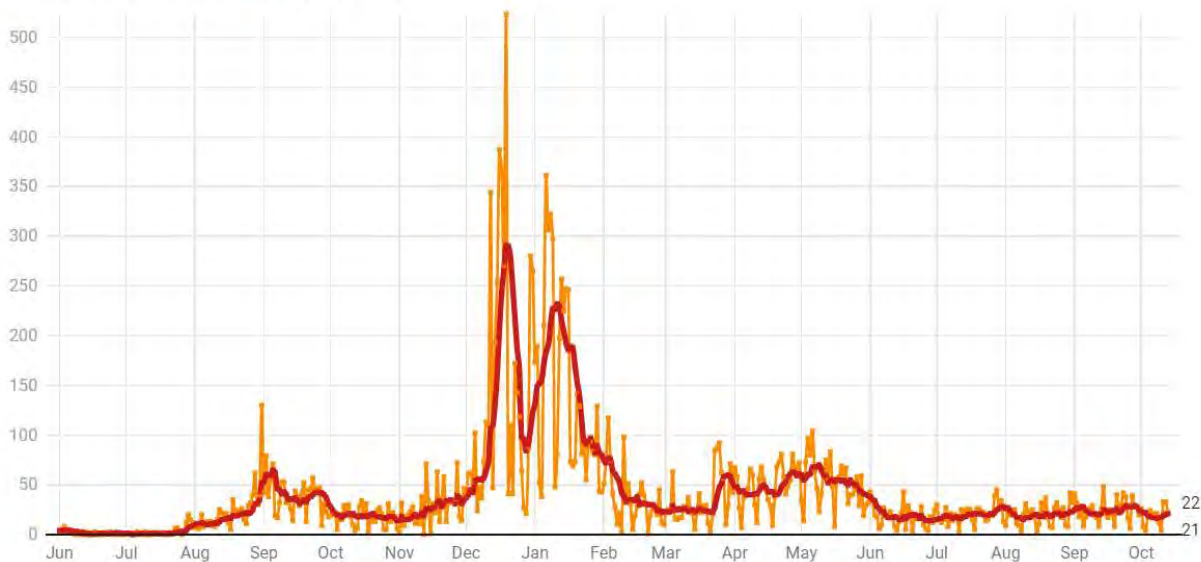
COVID-19, Tompkins County, New York

Date ▼	Total Tests	Daily Tests (ECLRS)	New Positive Cases (NYSDOH)	Total Positive Cases (TCHD)
10/13/22	1,944,835	211	22	24,679
10/12/22	1,944,624	264	33	24,657
10/11/22	1,944,360	155	33	24,624
10/10/22	1,944,205	164	4	24,591
10/9/22	1,943,963	78	12	24,587
10/8/22	#REF!	313	21	24,575
10/7/22	1,943,650	306	21	24,554
10/6/22	1,943,344	193	18	24,533

Daily New Cases + 7-Day Avg. New Cases

From June 1, 2021. COVID-19, Tompkins County, N.Y.

— Daily New Positive Cases — 7-day Avg. New Positive Cases



Transmission Level

COVID-19, Tompkins County, N.Y. 7-day total cases per 100,000 population. (6/1/21 to the present.)

— Level of Community Transmission



Remember that the extensive home testing being done make this data quite soft.

Local data on variants published

Due to the exemplary partnership between CU (in particular Dr Diehl's lab at CU), TCHD, CMC, and on samples collected locally we were able to track and characterize variants as they

Covid Boosters - uptake is still sluggish Push boosters please. Remember that a primary series must be completed first because the primary series vaccines have twice as much mRNA from the original (Wuhan) strain as the bivalent booster. The bivalent booster contains equal amounts of mRNA from the original strain as well as mRNA specific to Omicron.

Bivalent boosters approved for 5-11 (monovalent boosters are technically no longer approved – should you need bivalent vaccine contact TCHD at 2746604 and check on its current status and whether we can redistribute some)

The FDA acted and the CDC quickly followed with approval this week:

FDA press release is available here: <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-moderna-and-pfizer-biontech-bivalent-covid-19-vaccines>

- The NYSDOH Bureau of Immunization has shared the information on the bivalent COVID-19 vaccines being able to be administered to children ages 5 through 11 years of age. I have included the link to CDC's media statement:
[CDC Expands Updated COVID-19 Vaccines to Include Children Ages 5 Through 11 | CDC Online Newsroom | CDC](#)

Monkeypox

Still declining downstate. Testing at Wadsworth: fewer specimens arriving, testing being done 2x/wk unless special arrangement made. Vaccination still available. Regarding Severe Manifestations of Monkeypox among People who are Immunocompromised Due to HIV or Other Conditions <https://emergency.cdc.gov/han/2022/han00475.asp>

Monkeypox has now been listed as an STD which means minors under 18 can access treatment and testing and vaccination without parental consent. Here's the link to the full document (I have initiated correspondence with NYSDOH to confirm that this applies to all practitioners in practice whether public or private):

https://regs.health.ny.gov/sites/default/files/pdf/emergency_regulations/Monkeypox%20Virus%20to%20the%20List%20of%20Sexually%20Transmitted%20Diseases%20%28STDs%29_0.pdf

The ACIP had previously moved to include **monkeypox in the list of STIs** as an emergency regulation.

CDC has updated its recommendations re use of **Jynneos vaccine** e.g., includes deltoid area for vaccination, and has removed the recommendation to repeat the vaccination if a wheal is not raised. If fluid leaks from the wheal of a significant amount, then a repeat vaccination is recommended.

If a Tb skin test is being indicated and a substantial burden is not a factor, then delay Tb test by 4 weeks. They can be given together if Tb testing needed for disease diagnosis or being able to start a job etc.

Interim Clinical Considerations for Use of JYNNEOS and ACAM2000 Vaccines during the 2022 U.S. Monkeypox Outbreak <https://www.cdc.gov/poxvirus/monkeypox/health-departments/vaccine-considerations.html>

Monkeypox emergency regulations

- Here is a Link to all the **emergency regulations** passed regarding Monkeypox <https://regs.health.ny.gov/regulations/emergency>

Around the State

Salmonella

350 cases since Sept 1 – last year 69. 337 have been interviewed 21% have required hospitalization. Most in the counties of Onondaga, Wayne, Monroe, and western NY. There seem to be two separate clusters at least one associated with some animal species particularly cattle (Newport species). The other type is S. Typhimurium.

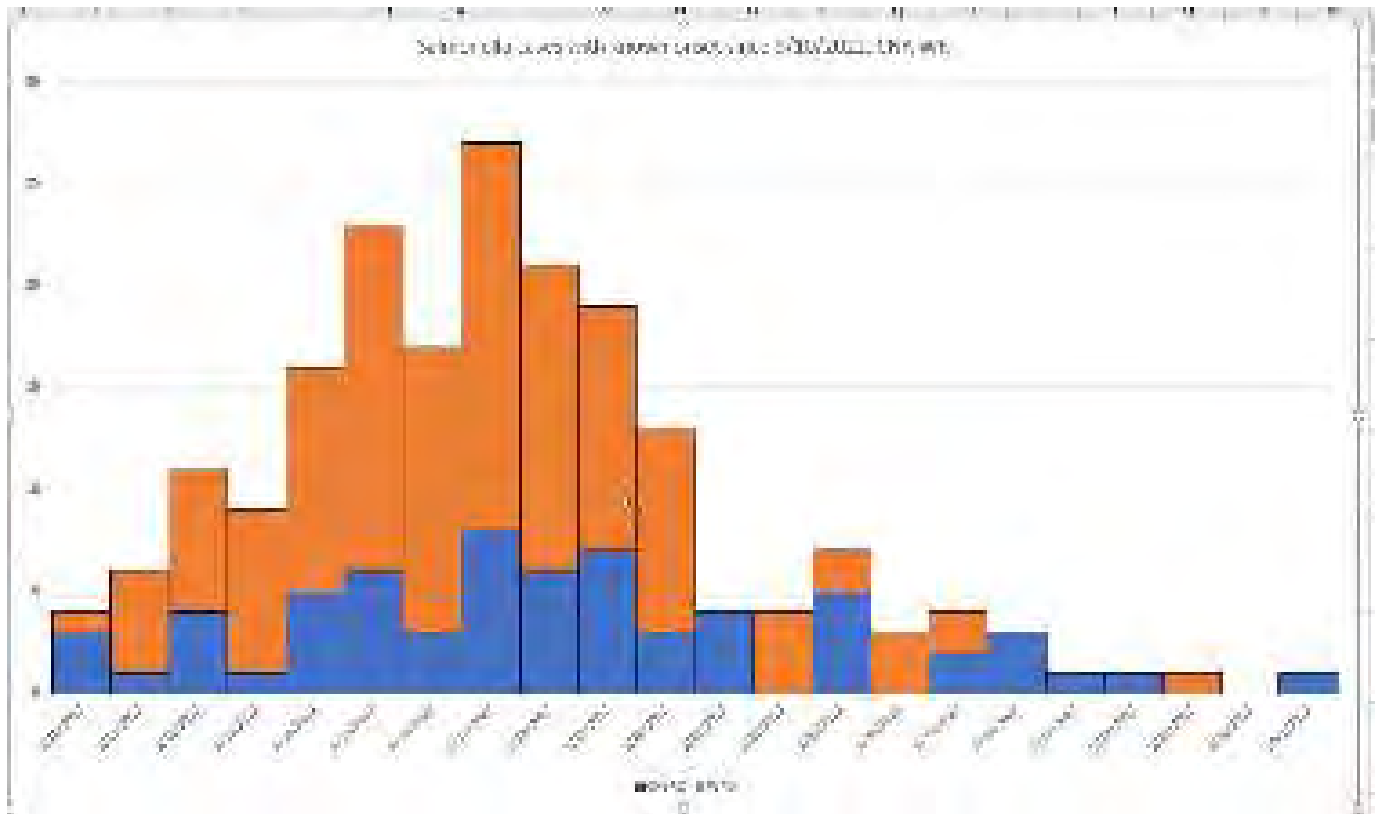
Should you have a case quickly involve the health department to begin the epidemiological investigation.

Western NY 213 cases since sept 1 (normal is 30) with 24% ER or hospitalization rate with age range 2 to 85 also in central NY present at a lower volume Think salmonella if GI sx present.

On Monday the FDA issued a Safety Alert to warn consumers about raw Canadian oysters potentially contaminated with salmonella. link:: https://www.fda.gov/food/alerts-advisories-safety-information/fda-advises-consumers-avoid-potentially-contaminated-raw-oysters-oyster-kings-new-brunswick-canada?utm_medium=email&utm_source=govdelivery

But the source of the bacterium is still eluding epidemiologists. Active investigation is ongoing including by environmental health and department of Agriculture and Markets.

Cases since Sept 1 for central Onondaga, Monroe, Wayne, Ontario, and some others peak of cases per day is at Sept 14.



Orange in wester and blue central NYS

Is this over? Or is there a delay in reporting?? – it is thought that it has quieted down a bit – there is hope that it is slowing down – but keep your antennae up. We are just started to hit the time frame of 2 incubation periods which is necessary to get by before one can be comfortable that we have seen the worst.

Legionella still being seen (expected to wind down as the fall progresses). Downstate NYC cases from Aug 20 through Sept 5 had 8 documented cases and 5 of these people died.

RSV being seen

West Nile cases 30 investigations in downstate – normally half this – expected to drop as fall progresses In NYC a case was traced to a kidney donation and found in the recipient. Subsequently, the second kidney’s recipient was also infected. The same donor had their lungs transplanted (no information on this recipient). WNV is not routinely screened for.

In NYS 20 cases have been reported to date (confirmed + probable). An additional 4 WNV asymptomatic donors have been reported as well. We have another 21 cases under investigation.

For how Cases are defined Gives you an idea how a case is labelled confirmed vs probable vs suspect. Probably are those with a single serum specimen. Confirmed are those with 2 samples with at least a 4-fold rise in titer. Many cases are defined based on PCR on samples.

Details at: <https://ndc.services.cdc.gov/>

Polio – pertussis and cryptosporidium hominus also being seen in the target population (a cluster of C hominus was seen in 2018) wastewater testing expansion is still being worked on but still limited to downstate.

Toxigenic cholera

Found in a person who had not traveled internationally. Person did travel to other states and ate seafood. No definite source yet identified.

Other

<https://www.statnews.com/2022/10/04/messaging-unrecognized-coefficient-pandemic-control/>

Other

Cu’s Covid dashboard is no longer “live”, so it is not being updated.

New information re Jynneos vaccine: <https://www.cdc.gov/poxvirus/monkeypox/health-departments/vaccine-considerations.html>

H Flu Meningitis has been diagnosed in a 3-mo. old child who was unvaccinated.

Communicable Disease – Local data – items of note

Year to date

Disease	2022		2021		2020		2019		Ave (2019-2021)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
ANAPLASMOSIS**	53	69.2	86	112.2	31	40.5	11	14.4	43	56.1
BABESIOSIS**	10	13.0	20	26.1	8	10.4	3	3.9	10	13.0

SYPHILIS TOTAL.....	30	39.1	24	31.3	20	26.1	22	28.7	22	28.7
- P&S SYPHILIS	13	17.0	7	9.1	8	10.4	8	10.4	8	10.4
- EARLY LATENT	13	17.0	11	14.4	8	10.4	9	11.7	9	11.7
- LATE LATENT	3	3.9	6	7.8	4	5.2	5	6.5	5	6.5
- CONGENITAL SYPHILIS	1	1.3	0	0.0	0	0.0	0	0.0	0	0.0

Syphilis remains a concern.

Tick borne disease seems to be up compared to 2020 and before but stable in the past couple of years. The salmonella outbreak mentioned above is showing an uptick in September here as well

SALMONELLOSIS**	4	47.0	0	0.0	0	0.0	1	11.7	0	0.0
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but is not known to be linked to the cases detailed above. Here are the numbers for annual cases:

SALMONELLOSIS**	16	20.9	13	17.0	8	10.4	7	9.1	9	11.7
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“As Overdoses Soar, Rhode Island Embraces a Daring Addiction Strategy

It is the first state to legalize supervised drug consumption sites, which some addiction experts believe will help lower record overdose rates.”

NYTimes October 13,2022

<https://www.nytimes.com/2022/10/12/us/politics/rhode-island-overdoses.html>

As many of you know I have reported and lectured on Supervised Injection (or consumption) Facilities for ten years or more. The Times’ use of “Daring” is misplaced. It would be daring if there were not extensive data available from other countries documenting the risks and benefits of such programs. These show that lives are saved, constructive relationships forged with users, and some of them are able to be engaged in treatment programs. In addition, hospitalizations, surgeries, and expensive chronic diseases are deflected as the facilities identify, and treat wounds, and complications at early stages. The presumed negative impacts brought up by politicians and communities are, in the main, not borne out by the data from multiple countries. Most commonly they are posited by persons unfamiliar with harm reduction and guided by ideologies.

You will remember that NYC approved two such facilities in the city just before the pandemic hit and they opened in November 2021.

<https://www.nytimes.com/2021/11/30/nyregion/supervised-injection-sites-nyc.html> Data since

then have not been published to my knowledge but a previous study of an unsanctioned site confirmed the experience of other countries.

<https://www.nejm.org/doi/full/10.1056/NEJMc2015435>

Other media reporting on the NYC site: <https://apnews.com/article/inside-nyc-supervised-drug-injection-sites-7ad93117d1566fda53909c0f70984d1b>

<https://www.politico.com/news/2022/05/14/new-york-experiment-drug-use-national-model-00031876>

And finally, from the Journal of the AMA

First 2 Months of Operation at First Publicly Recognized Overdose Prevention Centers in US July 15, 2022

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2794323>

“Between November 30, 2021, and January 31, 2022, 613 individuals used OPC services 5975 times across 2 sites. Most individuals identified as male (78.0%), and 55.3% identified as Hispanic, Latino, or Latina. The mean (range) age was 42.5 (18-71) years. A plurality of individuals (36.9%) reported being street homeless. Fewer than one-fifth of individuals (17.8%) were living in their own rooms or apartments ([Table](#)).

In self-reported data, the drug most commonly used across 2 sites was heroin or fentanyl (73.7%) and the most frequent route of drug administration at the OPC was injection (65.0%). Among all participants, 75.9% reported that they would have used their drugs in a public or semipublic location if OPC services had not been available ([Figure](#)).

During the first 2 months of OPC operation, trained staff responded 125 times to mitigate overdose risk. In response to opioid-involved symptoms of overdose, naloxone was administered 19 times and oxygen 35 times, while respiration or blood oxygen levels were monitored 26 times. In response to stimulant-involved symptoms of overdose (also known as overamping), staff intervened 45 times to provide hydration, cooling, and de-escalation as needed. Emergency medical services responded 5 times, and participants were transported to emergency departments 3 times. No fatal overdoses occurred in OPCs or among individuals transported to hospitals.

More than half of individuals using OPC services (52.5%) received additional support during their visit. This included, but was not limited to naloxone distribution, counseling, hepatitis C testing, medical care, and holistic services (e.g., auricular acupuncture).”

In my career I worked for the better part of a year at a harm reduction program for persons with alcohol and mental health problems. I have seen the value of long-term trusting relationships. They are key in helping persons who are motivated transcend the barrier to accessing treatment. In my opinion, this quality of harm reduction programs including Supervised Consumption

Facilities sets them apart. While saving lives they are able to help people find an alternative path – one that is better for their health (both mental and physical) and for the community.

It is time to move on. In communities where such programs exist, they are supported by law enforcement.

Division for Community Health

October 25th, 2022 Board of Health meeting

September 2022 monthly report

By Rachel Buckwalter and Celeste Rakovich, Senior Community Health Nurses and Michelle Hall, WIC director

Communicable Disease:

- **COVID-19:** Tompkins County remained at a low CDC community level for the month of September. Hospitalizations remained in the single digits. There was one Covid death reported in September. Several guidance updates were issued in September. Masking on public transit is no longer required as of September 7th. TCHD issued a press release on September 6th encouraging everyone to get the bivalent booster. Local availability of Moderna bivalent booster has been limited as Moderna was on back-order for a few weeks but the supply issues are resolving and appointments at local pharmacies are available. TCHD has been redistributing bivalent booster vaccine to local provider offices who would like a smaller amount.
- **Monkeypox:** No new cases of monkeypox in Tompkins County in September—our case total remains at 3. TCHD was given Jynneos vaccine from NYSDOH in September and was able to host first dose clinics which were well attended (see immunization clinic section of this report).
- **Polio:** NYSDOH issued a third Health Advisory on September 28th regarding polio (see attached). Wastewater testing has found poliovirus in four counties so far: Rockland, Orange, Sullivan and Nassau. NYSDOH was able to purchase more poliovirus vaccine and offered it to counties as “outbreak vaccine” to vaccinate adults who are in high risk categories. TCHD has ordered 50 doses of IPV to use for this purpose.
- **Salmonella:** Central NY and Western NY reported an outbreak of Salmonella in September (see attached Health Advisory). Tompkins County reported 4 cases of Salmonella in September which is an increase over our usual numbers. No source has

been identified yet. TCHD encourages providers to test for salmonella when patients present with GI illness.

SafeCare Program:

- Three families are currently receiving SafeCare services.
- TCHD's annual accreditation survey is due October 17th. We will be working with the National SafeCare Training and Research Center through the accreditation process.

Maternal Child Health:

- For September there were 8 new admissions to the Moms PLUS+ program. Census is 35-40. There are two full time CHNs dedicated to home visits with another two CHNs with a partial case load. Moms PLUS + shares two community health workers from the PICH program to assist with client referrals and other aspects of the program. 15 referrals received from Cayuga Birthplace with other referrals coming from Mental Health and pediatricians' offices. Moms PLUS + policies are being reviewed and updated per the new Medicaid standards.
- Mental Health has referred clients to the Survivor Moms Companion program, and we have had one client accept and complete the curriculum with a positive outcome. CHS continues to promote this psychoeducation at the birthplace, OBGYN associates, Mental Health and other community partners. Outreach is ongoing.

Immunization Clinics:

- Our on-site immunization clinic was very busy in September. Due to high demand, we added an extra clinic on Tuesday Sept 27th to facilitate getting more kids vaccinated who were in danger of being excluded from school due to not having school required vaccinations.
- First dose Jynneos clinics were held at TCHD on Sept 6th, 7th and 22nd. We vaccinated a total of 131 people at these clinics. Second dose clinics are planned for October.

- Our homebound program continues—six homebound Tompkins County residents were vaccinated in the month of September.
- We have ordered a new full-size vaccine freezer which will be installed in our vaccine room in October. This will increase our capacity to store vaccines and is an auto-defrost unit which is an upgrade from our current freezer. Immunization grant funding is being used to purchase the freezer.
- Flu clinics are being planned for several community sites in October. We plan to offer regular quadrivalent flu, high-dose flu and Covid bivalent booster vaccination at these clinics. We prioritize clinics that serve high risk populations such as senior living centers or those with barriers to vaccination (transportation issues, no provider, etc). So far clinics are planned at McGraw House, Lifelong, Ellis Hollow Apartments, and Tompkins County Mental Health.

Rabies:

- There were 5 authorizations for post exposure in September. EH and CHS are in process of finalizing an over arching program policy. CHS is also updating internal policy and procedure documents.

Lead:

- No new lead cases in September. CHS continues to provide quarterly reports to the state for the CLPPP program. CHS is also looking for community organizations that can install some educational lead testing banners that were redesigned in 2019.

HIV:

- No testing administered in September. CHS is meeting with STAP to review outreach and service needs for the community.

PICHC (jointly implemented with Health Promotion Division):

- During the month of September PICHC continued start up activities with the onboarding of one new Community Health Worker Lester Mcnair as well as our two existing

Community Health Workers Mara Schwartz and Tenzin Aaya who will devote some time to PICHC. We had further discussions with community partners about the Perinatal and Infant working group – updating the scope and membership list and reflecting on approaches to increase community member input. We also met with community partners to revitalize the Social Determinants of Health working group and will continue to participate in those meetings moving forward.

- Beginning in November, PICHC initiative will be documented under the Health Promotion division report.

Outreach:

- CHS attended the following community events to do program outreach and disseminate information on various CHS programs including moms PLUS+, WIC and COVID prevention: Freeville Harvest on 9.10, LATCH/Moms PLUS+ event on 9.14, Dryden Library on 9/16, Danby Market on 9/16, Dryden Farmers market on 9/17, Groton library on 9.20, Enfield Harvest Festival on 9.24, Lansing Carnival on 9.24, Enfield Food pantry on 9.26, Immaculate Church on 9.27, No Mas Lagrimas on 9.29, as well as Apple Fest on 9.30.
- Beginning in November, Community Health Worker outreach will be documented under the Health Promotion division report.

Staffing:

- Our new Community Health nurse Rachel Fried began in September. She will share her time between communicable disease, immunizations, and maternal child health programming.
- CHS is currently recruiting for a Community Health nurse specializing in Communicable Disease as Emme Edmunds resigned mid-September.
- Recruitment is ongoing for Community Health Director position.

WIC Program:

Caseload Data:

August final caseload data:

Enrollment: 1167
Participation: 1057
Participation/Enrollment %: 90.57
89.67
Participation/Caseload %: 70.47
69.47

Total participants seen in August: 454

September: 469

Appointment show rate: 87%

Preliminary September

Enrollment: 1162
Participation: 1042
Participation/Enrollment %:
Participation/Caseload %:

Total participants seen in

Appointment show rate: 88%

The program continues to serve 49% of the eligible population in Tompkins County.

Program Highlights

- **October 10th -14th is National WIC Enrollment Week!** It's WIC National Enrollment Week. This nationwide event is focused on WIC program recruitment. WIC staff are working to utilize ready-made outreach materials to implement to promote WIC in our community.
- All vacant positions have been filled WIC
- President Biden extended the Fruit and Vegetable Cash Value benefit for WIC enrolled women, infants, and children. The extension will expire on December 16th. The National WIC Association has release reports that shows this increase in benefit has resulted in increased fruit and vegetable consumption among children.

Here is the link to the reports mentioned above:

<https://www.nwica.org/press-releases/new-report-finds-wic-benefit-bump-resulted-in-increased-fruit-and-vegetable-consumption-among-wic-enrolled-children#.Y0gWJHbMJPZ>

<https://thewichub.org/multi-state-wic-participant-satisfaction-survey-cash-value-benefit-increasing-during-covid/>

N.Y.S. Department of Health
 Division of Epidemiology
 Communicable Disease Monthly Report*, DATE: 03OCT22
 Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS Month=September

Disease	2022		2021		2020		2019		Ave (2019-2021)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
ANAPLASMOSIS**	1	11.7	8	94.0	6	70.5	1	11.7	5	58.7
BABESIOSIS**	3	35.2	0	0.0	3	35.2	1	11.7	1	11.7
CAMPYLOBACTERIOSIS**	3	35.2	0	0.0	3	35.2	1	11.7	1	11.7
COVID-19	804	9442.2	1022	12002	256	3006.5	0	0.0	0	0.0
CRYPTOSPORIDIOSIS**	0	0.0	2	23.5	0	0.0	5	58.7	2	23.5
ECOLI SHIGA TOXIN**	1	11.7	2	23.5	0	0.0	0	0.0	1	11.7
EHRlichiosis (CHAFEENSIS)**	0	0.0	0	0.0	0	0.0	1	11.7	0	0.0
ENCEPHALITIS, ARBO**	1	11.7	0	0.0	0	0.0	0	0.0	0	0.0
ENCEPHALITIS, POST	0	0.0	0	0.0	1	11.7	0	0.0	0	0.0
GIARDIASIS	2	23.5	2	23.5	1	11.7	5	58.7	3	35.2
HEPATITIS A	1	11.7	0	0.0	2	23.5	0	0.0	1	11.7
HEPATITIS B,CHRONIC**	1	11.7	0	0.0	1	11.7	0	0.0	0	0.0
HEPATITIS C,CHRONIC**	1	11.7	0	0.0	4	47.0	1	11.7	2	23.5
INFLUENZA A, LAB CONFIRMED	1	11.7	0	0.0	1	11.7	1	11.7	1	11.7
INFLUENZA B, LAB CONFIRMED	0	0.0	0	0.0	2	23.5	0	0.0	1	11.7
LEGIONELLOSIS	0	0.0	1	11.7	0	0.0	0	0.0	0	0.0
LYME DISEASE** ****	46	540.2	14	164.4	12	140.9	7	82.2	11	129.2
MONKEYPOX	1	11.7	0	0.0	0	0.0	0	0.0	0	0.0
SALMONELLOSIS**	4	47.0	0	0.0	0	0.0	1	11.7	0	0.0
STREP,GROUP A INVASIVE	0	0.0	0	0.0	1	11.7	0	0.0	0	0.0

Disease	2022		2021		2020		2019		Ave (2019-2021)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
STREP,GROUP B INVASIVE	0	0.0	0	0.0	1	11.7	0	0.0	0	0.0
VIBRIO - NON 01 CHOLERA**	0	0.0	1	11.7	0	0.0	0	0.0	0	0.0
YERSINIOSIS**	1	11.7	0	0.0	0	0.0	0	0.0	0	0.0
SYPHILIS TOTAL.....	3	35.2	3	35.2	4	47.0	1	11.7	3	35.2
- P&S SYPHILIS	1	11.7	0	0.0	3	35.2	0	0.0	1	11.7
- EARLY LATENT	2	23.5	3	35.2	0	0.0	0	0.0	1	11.7
- LATE LATENT	0	0.0	0	0.0	1	11.7	1	11.7	1	11.7
GONORRHEA TOTAL.....	11	129.2	18	211.4	7	82.2	16	187.9	14	164.4
- GONORRHEA	11	129.2	18	211.4	7	82.2	16	187.9	14	164.4
CHLAMYDIA	33	387.6	37	434.5	40	469.8	56	657.7	44	516.7

*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: 03OCT22
 Through September
 Rates are defined as: Cases/100,000 population/Month

County=TOMPKINS

Disease	2022		2021		2020		2019		Ave (2019-2021)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
AMEBIASIS	1	1.3	0	0.0	0	0.0	0	0.0	0	0.0
ANAPLASMOSIS**	53	69.2	86	112.2	31	40.5	11	14.4	43	56.1
BABESIOSIS**	10	13.0	20	26.1	8	10.4	3	3.9	10	13.0
CAMPYLOBACTERIOSIS**	20	26.1	19	24.8	17	22.2	27	35.2	21	27.4
CHIKUNGUNYA**	0	0.0	0	0.0	0	0.0	1	1.3	0	0.0
COVID-19	14563	19003	9627	12562	2446	3191.8	0	0.0	0	0.0
CRYPTOSPORIDIOSIS**	8	10.4	14	18.3	14	18.3	11	14.4	13	17.0
DENGUE FEVER**	1	1.3	0	0.0	0	0.0	0	0.0	0	0.0
ECOLI SHIGA TOXIN**	3	3.9	6	7.8	5	6.5	4	5.2	5	6.5
EHRlichiosis (CHAFEENSIS)**	2	2.6	0	0.0	0	0.0	1	1.3	0	0.0
EHRlichiosis (UNDETERMINED)**	0	0.0	0	0.0	0	0.0	1	1.3	0	0.0
ENCEPHALITIS, ARBO**	1	1.3	0	0.0	0	0.0	0	0.0	0	0.0
ENCEPHALITIS, OTHER	0	0.0	1	1.3	2	2.6	1	1.3	1	1.3
ENCEPHALITIS, POST	0	0.0	0	0.0	1	1.3	0	0.0	0	0.0
GIARDIASIS	6	7.8	15	19.6	7	9.1	26	33.9	16	20.9
HAEMOPHILUS INFLUENZAE, NOT TYPE B	1	1.3	0	0.0	2	2.6	4	5.2	2	2.6
HEPATITIS A	1	1.3	7	9.1	12	15.7	0	0.0	6	7.8
HEPATITIS B,CHRONIC**	15	19.6	18	23.5	9	11.7	7	9.1	11	14.4
HEPATITIS C,ACUTE**	2	2.6	1	1.3	5	6.5	6	7.8	4	5.2
HEPATITIS C,CHRONIC**	11	14.4	32	41.8	36	47.0	37	48.3	35	45.7
HEPATITIS C,PERINATAL	0	0.0	1	1.3	0	0.0	0	0.0	0	0.0

Disease	2022		2021		2020		2019		Ave (2019-2021)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
INFLUENZA A, LAB CONFIRMED	292	381.0	265	345.8	526	686.4	772	1007.4	521	679.8
INFLUENZA B, LAB CONFIRMED	3	3.9	6	7.8	738	963.0	62	80.9	269	351.0
INFLUENZA UNSPECIFIED, LAB CONFIRMED	3	3.9	1	1.3	0	0.0	1	1.3	1	1.3
LEGIONELLOSIS	4	5.2	3	3.9	0	0.0	3	3.9	2	2.6
LISTERIOSIS	1	1.3	0	0.0	0	0.0	0	0.0	0	0.0
LYME DISEASE** *****	323	421.5	44	57.4	37	48.3	55	71.8	45	58.7
MALARIA	1	1.3	0	0.0	2	2.6	0	0.0	1	1.3
MENINGITIS, ASEPTIC	0	0.0	0	0.0	1	1.3	1	1.3	1	1.3
MONKEYPOX	2	2.6	0	0.0	0	0.0	0	0.0	0	0.0
MUMPS**	0	0.0	0	0.0	0	0.0	1	1.3	0	0.0
PERTUSSIS**	0	0.0	0	0.0	1	1.3	6	7.8	2	2.6
SALMONELLOSIS**	16	20.9	13	17.0	8	10.4	7	9.1	9	11.7
SHIGELLOSIS**	0	0.0	1	1.3	0	0.0	0	0.0	0	0.0
STREP, GROUP A INVASIVE	2	2.6	3	3.9	2	2.6	5	6.5	3	3.9
STREP, GROUP B INVASIVE	5	6.5	10	13.0	6	7.8	9	11.7	8	10.4
STREP, GROUP B INV, EARLY/LATE ONSET	0	0.0	0	0.0	1	1.3	0	0.0	0	0.0
STREP PNEUMONIAE, INVASIVE**	2	2.6	4	5.2	6	7.8	4	5.2	5	6.5
TUBERCULOSIS***	1	1.3	1	1.3	2	2.6	3	3.9	2	2.6
VIBRIO - NON 01 CHOLERA**	1	1.3	1	1.3	0	0.0	0	0.0	0	0.0
YERSINIOSIS**	6	7.8	1	1.3	0	0.0	2	2.6	1	1.3
SYPHILIS TOTAL.....	30	39.1	24	31.3	20	26.1	22	28.7	22	28.7
- P&S SYPHILIS	13	17.0	7	9.1	8	10.4	8	10.4	8	10.4
- EARLY LATENT	13	17.0	11	14.4	8	10.4	9	11.7	9	11.7
- LATE LATENT	3	3.9	6	7.8	4	5.2	5	6.5	5	6.5
- CONGENITAL SYPHILIS	1	1.3	0	0.0	0	0.0	0	0.0	0	0.0

Disease	2022		2021		2020		2019		Ave (2019-2021)	
	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate	Freq	Rate
GONORRHEA TOTAL.....	77	100.5	142	185.3	97	126.6	118	154.0	119	155.3
- GONORRHEA	77	100.5	142	185.3	96	125.3	117	152.7	118	154.0
- P.I.D.	0	0.0	0	0.0	0	0.0	1	1.3	0	0.0
- GONORRHEA,DISSEMINATED	0	0.0	0	0.0	1	1.3	0	0.0	0	0.0
CHLAMYDIA	296	386.2	337	439.7	396	516.7	513	669.4	415	541.5
CHLAMYDIA PID	0	0.0	0	0.0	0	0.0	2	2.6	1	1.3
OTHER VD	0	0.0	0	0.0	0	0.0	1	1.3	0	0.0

*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.



Department of Health

KATHY HOCHUL
Governor

MARY T. BASSETT, M.D., M.P.H.
Commissioner

KRISTIN M. PROUD
Acting Executive Deputy Commissioner

DATE: September 28, 2022

TO: Healthcare Providers, Hospitals, Clinical Laboratories, and Local Health Departments (LHDs)

FROM: New York State Department of Health (NYSDOH), Division of Epidemiology

HEALTH ADVISORY: Update #3 Regarding Poliovirus in New York State

For clinical staff in Epidemiology/Infection Control, Emergency Department, Infectious Disease, Neurology, Radiology, Nursing, Internal Medicine, Pediatrics, Family Medicine, Intensive Care, Pharmacy, Laboratory Services, and all patient care areas.

Updates Since Last Advisory

- Enhanced surveillance for non-paralytic polio (non-specific viral symptoms or meningitis) has been expanded to include non-New York City counties in which [poliovirus genetically related to the virus strain from the case-patient has been found](#). As of the date of release of this advisory those counties are: **Rockland, Orange, Sullivan, and Nassau**. This enhanced surveillance includes individuals who are unvaccinated or under-vaccinated for polio and who reside, work, attend school, or have frequent social interactions with communities in those counties. Please see details below.
- Consistent with the enhanced surveillance activity for non-specific viral symptoms, the surveillance activity for meningitis is limited to individuals who are unvaccinated or under vaccinated for polio. Please see details below.
- **Recommendations for adult polio vaccination, below, have been updated based on updated CDC recommendations as of September 22, 2022.**
- Adults who were born and raised in the United States can assume they were vaccinated for polio as children unless there are specific reasons to believe they were not vaccinated. If an adult at risk has reason to believe they were not vaccinated, and records cannot be easily and quickly obtained, then treat them as if they are not vaccinated. Polio immunization has been available since 1955 and has been part of the routine childhood immunization schedule for decades.
- Effective September 9th, 2022 through October 9th, 2022 and in accordance with New York State (NYS) Governor Kathy Hochul's [Executive Order No. 21.0](#), NYS Medicaid Fee-For-Service (FFS) and Medicaid Managed Care (MMC) Plans cover the inactivated poliovirus vaccine (IPV) for administration of IPV to Medicaid FFS and MMC members. NYS Medicaid providers should follow the coverage and billing guidance for the poliovirus vaccine and its administration provided in the August edition of the NYS Department of Health's (DOH) Medicaid Update article. Depending on when accessed, the article can be found either in the "Current Issue" section or the "Archived Issues" section of the DOH Medicaid Update webpage located at: https://www.health.ny.gov/health_care/medicaid/program/update/main.htm. This article provides billing instructions (including vaccine counseling) for Article 28 facilities, private practitioners, School-Based Health Centers, Federally Qualified Health Centers, and Medicaid Managed Care providers. Please refer to this article when ordering and billing for the polio vaccine.

- **In view of misinformation and rumors spreading in the involved areas, we strongly encourage healthcare providers, who tend to be highly trusted, to continue to advocate for patients and speak out about the reality of the threat, the presence of circulating poliovirus in New York State, and the critical importance of immunization.**
-

Polio Immunization Recommendations

- All providers in Rockland, Orange, and Sullivan Counties who are capable of delivering vaccines in their practice should stock inactivated polio vaccine (IPV) and offer IPV to patients according to the recommendations below. Combination vaccines including IPV can be given to children and are preferred as appropriate, according to ACIP guidelines. IPV alone can be given to children and adults and is available through your usual vaccine ordering channels or may be available from the local health department.
- **All children and adolescents** (up through 17 years of age) who are **unvaccinated or under-vaccinated** should be brought up to date with all routine CDC-recommended IPV doses. This is particularly urgent if they live, work, attend school, or have frequent social interactions with [communities where poliovirus has been repeatedly detected in wastewater](#) (currently Rockland, Orange, and Sullivan Counties).
 - Particular emphasis should be placed on catch-up immunization for young children who are unimmunized or under-immunized, such as those whose parents might have planned to delay immunization until shortly before school enrollment. The hygiene habits of young children and the fact that they are often cared for in congregate settings place them at greater risk for acquiring poliovirus.
- **Adults** (18 years of age and older) who are **unvaccinated or under-vaccinated** and at **increased risk of infection** should receive polio vaccination to **complete the primary series**. This includes:
 - Individuals living or working in an area with community transmission of poliovirus.
 - Individuals working in a laboratory or healthcare setting and handling specimens that might contain polioviruses.
 - In New York State this may include individuals who collect or work with wastewater specimens for poliovirus testing.
 - Healthcare providers or other caregivers who have close contact with a person who could be infected with poliovirus. In New York State, this would include:
 - Healthcare workers who work in areas with community transmission of poliovirus and who could care for patients with poliovirus (e.g., urgent care, emergency department, neurology, pediatrics).
 - Individuals who will or might have exposure to a person known or suspected to be infected with poliovirus, such as household members and other close contacts of a case or suspect case, who provide care.
 - Child care or pre-K providers who work in areas with community transmission of poliovirus and provide diapering or toileting care or assistance.
 - Individuals traveling to a country where there is a documented increased risk of exposure to poliovirus. See <https://www.cdc.gov/polio/what-is-polio/travelers.html>.
 - Individuals whose child(ren) will be receiving oral poliovirus vaccine (OPV), such as international adoptees or refugees.

Areas considered to have community transmission of poliovirus include those where poliovirus has been repeatedly detected in wastewater (currently Rockland, Orange, and Sullivan Counties). Other adults who are unvaccinated or under-vaccinated and who don't meet the above criteria for being at increased risk of infection should talk with a healthcare provider about the polio vaccine to determine their risk and to vaccinate accordingly (e.g., adults who will be

spending substantial amounts of time in counties with community transmission of poliovirus for reasons other than residence or work).

- **Adults** (18 years of age and older) who have previously completed a vaccine series against poliovirus and are at **highest risk of infection** may be given a **booster dose** of IPV:
 - Individuals working in a laboratory or healthcare setting and handling specimens that might contain polioviruses.
 - In New York State this may include individuals who collect or work with wastewater specimens for poliovirus testing.
 - Healthcare providers or other caregivers who have close contact with a person who could be infected with poliovirus. In New York State, this would include:
 - Healthcare workers who work in areas with community transmission of poliovirus and who could care for patients with poliovirus (e.g., urgent care, emergency department, neurology, pediatrics).
 - Individuals who will or might have exposure to a person known or suspected to be infected with poliovirus, such as household members and other close contacts of a case or suspect case, who provide care.
 - Child care or pre-K providers who work in areas with community transmission of poliovirus and provide diapering or toileting care or assistance.
 - Individuals traveling to a country where there is a documented increased risk of exposure to poliovirus. See <https://www.cdc.gov/polio/what-is-polio/travelers.html>.

Areas considered to have community transmission of poliovirus include those where poliovirus has been repeatedly detected in wastewater (currently Rockland, Orange, and Sullivan Counties). Adults who meet the criteria above should receive only one lifetime booster. At this time, booster doses are not recommended for individuals traveling to the New York City metropolitan area, including Rockland, Orange, or Sullivan Counties, merely because of their travel status.

- For individuals with a record of OPV (e.g., given abroad), only trivalent OPV (tOPV) counts toward fully vaccinated status. Doses of OPV given before April 1, 2016 should be counted unless specifically noted as monovalent, bivalent, or as given during a poliovirus immunization campaign. Doses of OPV given on or after April 1, 2016 should not be counted.
 - OPV given on or after April 1, 2016 as part of routine immunization regimens outside the U.S. does not protect against type 2 poliovirus, the type circulating in New York.
 - If there is uncertainty about whether a dose of OPV should be counted, give a dose of IPV.
- IPV protects against all three types of polioviruses, regardless of whether given in the U.S. or abroad.
- These vaccination recommendations are consistent with guidelines from the Advisory Committee on Immunization Practices (ACIP, <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr4905a1.htm>), which state that:
 - For children:
 - “All children should receive four doses of IPV at ages 2, 4, and 6-18 months and 4-6 years.”
 - “If accelerated protection is needed, the minimum interval between doses is 4 weeks, although the preferred interval between the second and third doses is 2 months.”
 - “Those who are inadequately protected should complete the recommended vaccination series. No additional doses are needed if more time than recommended elapses between doses.”
 - For adults:

- “Vaccination is recommended for certain adults who are at greater risk for exposure to polioviruses than the general population...”, e.g., certain travelers, members of communities or specific population groups with disease caused by polioviruses, certain laboratory workers, health-care workers who have close contact with patients who might be excreting polioviruses.
- “Unvaccinated adults who are at increased risk should receive a primary vaccination series with IPV.”
- “Available data do not indicate the need for more than a single lifetime booster dose with IPV for adults.”
- IPV or the first dose of combination products containing IPV can be given as early as 6 weeks of age and should be considered for administration when infants who are at least 6 weeks old and reside in affected counties present for care. Otherwise, it should be given at 2 months of age according to the usual recommended schedule.
- Polio vaccine can be given during pregnancy and is recommended if otherwise indicated.
- Polio vaccine may be given at the same time as other vaccines.
- IPV, the only polio vaccine available in the US, is highly effective, with 90% or more of vaccine recipients developing protective antibody levels to all three poliovirus types after 2 doses, and 99% developing protective antibody levels following 3 doses.
- To obtain IPV for your patients, please order through your usual vaccine ordering channels. Contact your local health department if you have concerns about obtaining vaccine.

Routine and Enhanced Polio Surveillance

- Surveillance for non-paralytic polio – non-specific viral symptoms
 - NYSDOH recommends that the following individuals undergo testing for enterovirus (poliovirus is a type of enterovirus):
 - Unimmunized or under-immunized for polio, or unknown immunization status and suspected to be unimmunized (patient report acceptable if records are not available), and
 - Reside, work, attend school, or have frequent social interactions with communities in Rockland, Orange, Sullivan or Nassau counties, and
 - Symptoms consistent with non-paralytic polio:
 - Sore throat and/or fever, AND
 - At least two of the following symptoms (sore throat and/or fever can count as one or both): sore throat, fever, tiredness, headache, nausea, stomach pain.
 - Individuals who meet the criteria above should have a diagnostic **stool specimen collected for enterovirus PCR and sent to the clinical laboratory** routinely used.
 - If a stool specimen cannot be obtained, then an oropharyngeal (OP) swab is also acceptable, although stool is preferred.
 - The relevant ICD-10 code should be included on the lab requisition (e.g., B34.9, J02.9).
 - **The Rockland, Orange, Sullivan or Nassau County connection and the polio immunization status should be included on the lab requisition.**
 - An enterovirus-specific PCR test should be ordered; that is, point-of-care or other tests that return a “rhino-enterovirus” result are not acceptable.
 - NYSDOH will contact clinical laboratories and request that they send specimens positive for enterovirus to the NYSDOH Wadsworth Center for poliovirus testing.

- Surveillance for non-paralytic polio – meningitis
 - NYSDOH recommends that the following individuals with meningitis undergo diagnostic testing for poliovirus:
 - Unimmunized or under-immunized for polio, or unknown immunization status and suspected to be unimmunized (patient report acceptable if records are not available), and
 - Reside, work, attend school, or have frequent social interactions with communities in Rockland, Orange, Sullivan or Nassau counties, and
 - If tested, positive results for enterovirus in cerebrospinal fluid (CSF). If not tested for enterovirus, then no other apparent cause for the meningitis.
 - Patients meeting the criteria above should have a diagnostic **stool specimen collected for enterovirus PCR** and **sent to the clinical laboratory** routinely used.
 - If a stool specimen cannot be obtained, then an OP swab is also acceptable, although stool is preferred.
 - **The Rockland, Orange, Sullivan or Nassau County connection should be included on the lab requisition.**
 - An enterovirus-specific PCR test should be ordered; that is, point-of-care or other tests that return a “rhino-enterovirus” result are not acceptable.
 - NYSDOH will contact clinical laboratories and request that they send specimens positive for enterovirus to the NYSDOH Wadsworth Center for poliovirus testing.

- Surveillance for suspected paralytic polio or strongly suspected non-paralytic polio or suspected acute flaccid myelitis (AFM)
 - **Immediately notify the local health department** where the patient resides and/or contact the New York State Department of Health.
 - See additional information in [August 4, 2022 Health Advisory: Update Regarding Poliomyelitis in Rockland County, New York State \(PDF\) under the section entitled “Guidelines for Healthcare Providers”](#)
 - **Paralytic polio and AFM can have similar clinical presentations.**
 - The recommendations in this section apply statewide.
 - The specimen collection and submission recommendations in this section apply for **cases of possible paralytic polio or when there is a high suspicion of non-paralytic polio** (e.g., compatible illness in a contact of a polio case) **or suspected AFM.**
 - Specimens should be collected as follows (in order of priority) and **sent directly to Wadsworth Center with a request for poliovirus testing:**
 - **Two stool specimens** collected 24 hours apart
 - **Oropharyngeal (OP) swab**
 - **Nasopharyngeal (NP) swab**
 - **Cerebral spinal fluid (CSF)**
 - **Serum** (acute and convalescent), collected **before** treatment with intravenous immunoglobulin (IVIG; 2-3 cc in red or tiger-top tube)
 - A shipping manifest from an electronically submitted Remote Order OR an [Infectious Disease Requisition](#) form should accompany all specimens sent to Wadsworth, noting symptoms and immunization history.

- Specimen collection, storage, and shipping
 - For stool specimens, a quarter-sized amount of stool should be collected in a sterile, wide-mouth container with no additives.
 - For OP swabs, flocked swabs are preferred. Sterile Dacron or rayon swabs with plastic or metal handles may also be used. Do NOT use cotton or calcium alginate swabs or

- swabs with wooden sticks. Place the swab in liquid viral transport media (VTM) or universal transport media (UTM). The swabs and media used for COVID-19 or influenza PCR testing can be used. Do not use saline or send dry swabs.
- CSF specimens of 2-3 cc should be collected into a sterile collection tube without additives, frozen promptly to -70/80°C and shipped on dry ice.
 - All other specimens should be stored refrigerated and shipped on frozen gel packs.

Previous Advisories and Resources

- Previous NYSDOH advisories on polio can be found at:
 - August 19, 2022 Health Advisory: Update #2 Regarding Poliomyelitis in New York State, https://health.ny.gov/diseases/communicable/polio/docs/health_advisory_8-19-22.pdf
 - August 4, 2022 Health Advisory: Update Regarding Poliomyelitis in Rockland County, New York State, https://www.health.ny.gov/diseases/communicable/polio/docs/health_advisory_8-4-22.pdf
 - July 22, 2022 Health Advisory: Poliomyelitis Case in Rockland County, New York State, https://www.health.ny.gov/diseases/communicable/polio/docs/2022-07-29_han.pdf
- New York State polio webpage with general information, vaccination information, wastewater surveillance results, and vaccination rates by county and zip code: <https://www.health.ny.gov/diseases/communicable/polio/>.
- New York City's advisory "2022 Health Alert #20: Update on Poliovirus in New York City" can be found at <https://www1.nyc.gov/assets/doh/downloads/pdf/han/alert/2022/polio-in-nyc.pdf>.
- CDC Suspect Polio Factsheet: <https://www.cdc.gov/polio/pdf/Polio-Fact-Sheet-Suspect-Polio-508.pdf>
- New infographic on Adult Polio Vaccination from the CDC: <https://www.cdc.gov/ncird/investigation/polio/downloads/adult-polio-vaccination.pdf>
- ACIP Recommendations for Polio Vaccination: <https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/polio.html>
- Updated CDC Polio Vaccination: What Everyone Should Know: <https://www.cdc.gov/vaccines/vpd/polio/public/index.html>
- Updated CDC Polio Vaccinations for Specific Populations: <https://www.cdc.gov/vaccines/vpd/polio/hcp/recommendations.html>
- Updated CDC Polio Vaccine for Adults: <https://www.cdc.gov/ncird/investigation/polio/adult-vaccination.html>
- CDC Polio Vaccine Information Statements: <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/ipv.html>
- Vaccine Derived Polio FAQ: <https://www.cdc.gov/vaccines/vpd/polio/hcp/vaccine-derived-poliovirus-faq.html>
- Updated Polio: For Healthcare Providers | CDC: <https://www.cdc.gov/vaccines/vpd/polio/hcp/index.html>
- Guidance for assessment of poliovirus vaccination status and vaccination of children who have received poliovirus vaccine outside the United States: https://www.cdc.gov/mmwr/volumes/66/wr/mm6606a7.htm?s_cid=mm6606a7_w.
- NYSDOH Polio Wastewater Detections: <https://health.ny.gov/diseases/communicable/polio/wastewater.htm>
- NYSDOH AFM Health Advisory: https://apps.health.ny.gov/pub/ctrldocs/alrtview/postings/NYSDOH_AFM_Health_Advisory_062_42022_FINAL_1656100564923_0.pdf
- Updated CDC polio in travelers: <https://www.cdc.gov/polio/what-is-polio/travelers.html>

Clinicians with questions can contact the NYSDOH at 1-866-881-2809 evenings, weekends, and holidays or AFM@health.ny.gov and BCDC@health.ny.gov. In New York City clinicians may contact the healthcare provider access line at 1-866-692-3641.



Department of Health

KATHY HOCHUL
Governor

MARY T. BASSETT, M.D., M.P.H.
Commissioner

KRISTIN M. PROUD
Acting Executive Deputy Commissioner

DATE: October 3, 2022

TO: Healthcare Providers, Hospitals, Clinical Laboratories, and Local Health Departments (LHDs)

FROM: New York State Department of Health (NYSDOH), Division of Epidemiology

HEALTH ADVISORY: Salmonella Increase in Western and Central New York State

For clinical staff in Epidemiology/Infection Control, Emergency Department, Infectious Disease, Medical Directors, Nursing, Internal Medicine, Pediatrics, Family Medicine, Intensive Care, Pharmacy, Laboratory Directors, Laboratory Services, and all patient care areas.

SUMMARY

- Local health departments in Western and Central NY, with the assistance of the New York State Department of Health (DOH), are investigating an increase in *Salmonella* cases reported since September 1, 2022. Since the beginning of the month, and in these regions, there have been more than 254 cases identified in comparison to 51 cases in the same timeframe in 2021.
- More than 25% of the cases reported since the beginning of September have been hospitalized.
- NYSDOH reminds providers to consider salmonellosis in the differential diagnosis of patients presenting with gastrointestinal symptoms, particularly diarrhea, abdominal pain and cramps, and fever.
- Laboratories should conduct culture on stools or reflex to culture if a culture-independent detection method is found to be positive for *Salmonella*. Isolates are requested to be forwarded to Wadsworth Center Laboratories as soon as possible for additional analyses.
- Suspect or confirmed cases of salmonellosis should be reported promptly to the local health department where the patient lives.

BACKGROUND

Local health departments in Western and Central New York (NY), with the assistance of the New York State Department of Health (DOH), are investigating an increase in *Salmonella* cases reported since September 1, 2022. Cases range in age from less than 1 year old to 91 years old, with a median age of 43 years old. Of note, more than 25% of the cases reported since the beginning of the month have been hospitalized. To date, no common events exposures have been identified. Additional investigation is underway to further characterize the current increase and to determine a potential source of transmission.

CLINICAL DESCRIPTION AND TREATMENT

Physicians evaluating patients presenting with gastrointestinal illness, particularly diarrhea, abdominal pain, cramps, and fever, should include salmonellosis in their differential diagnosis. Salmonellosis usually resolves within five to seven days and often does not require treatment. Those with severe diarrhea may require rehydration, often with intravenous fluids. Antibiotics are usually not necessary and not recommended except in certain circumstances such as HIV infection; immunocompromise; patients older than 50 with cardiac, valvular, endovascular abnormalities or substantial joint disease; age 65 or older; or severe illness (severe diarrhea, high/persistent fever, hospitalization).

TESTING

Stool specimens should be collected as soon as possible, ideally while the patient is acutely ill. All stools positive for *Salmonella* by a culture-independent diagnostic method, such as PCR, should be reflexed to culture. All *Salmonella* isolates obtained by culture are requested to be submitted to NYSDOH Wadsworth Center Laboratory for further analysis as outlined in the 2020 Wadsworth Laboratory Reporting of Communicable Diseases https://www.wadsworth.org/sites/default/files/WebDoc/CDRG%20NYState%202020_101920%202.pdf.

The NYSDOH Wadsworth Center Laboratory remote order forms and shipping information are available at: <https://www.wadsworth.org/electronic-test-request-reporting-new>.

REPORTING

All suspect cases and laboratory positive *Salmonella* cases should be reported immediately by telephone to the local health department where the patient resides.

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

Children with Special Care Needs Highlights
September 2022

Staff Activities

Staff Group Trainings-

- McGuinness Pre K Software trainings -8/11/2022

Committees/Meetings

- CSCN Staff meeting-9/20/22
- Early Childhood Collaborative meetings once a month with community partners.
- Collaborative Solutions Network meeting regarding the new Systems of Core initiative.
- 3 CSCN staff participating in Strategic Planning Cross Functional Team meetings.

Program Work:

Early Intervention

- Early Intervention experiencing wait lists for speech services, Special Instruction Teachers, PT and OT.
- NYSDOH BEI notified monthly of current needs.
- Advocacy for rate increases currently being supported by Early Intervention Coordinating Council
- NYSACHO currently gathering information from the counties on data for wait lists and rates.
- Hiring for a new Community Health Nurse for this program and Sr Community Health Nurse. Positions currently posted.
- Working on development of a family survey.00076
- Discussion with our EI software company to develop a digital Child Find program.
- Increased referrals of babies with complex needs and prematurity.
- Currently serving 165 active/qualified children in Early Intervention

Preschool

- New Digital session notes for providers through McGuinness software went live July 1, 2022. Still receiving trainings on billing procedures. Went live with a new electronic health record using Laserfiche software in September. Meeting weekly to map our new processes and trouble shoot any issues.
- Meetings with Birnie Bus for contract and rate negotiations.
- Currently serving 167 children in Preschool Special Education with 42 in special integrated classrooms

CYSHCN

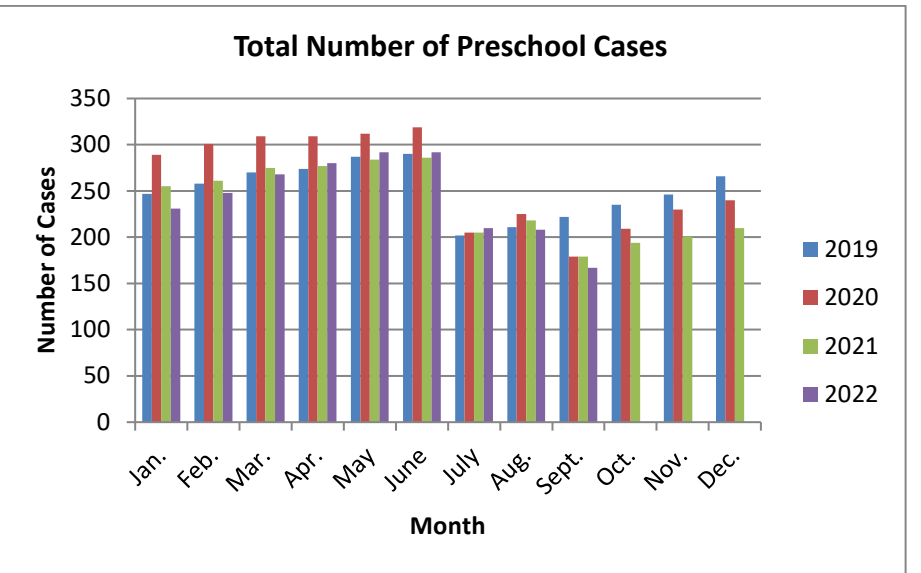
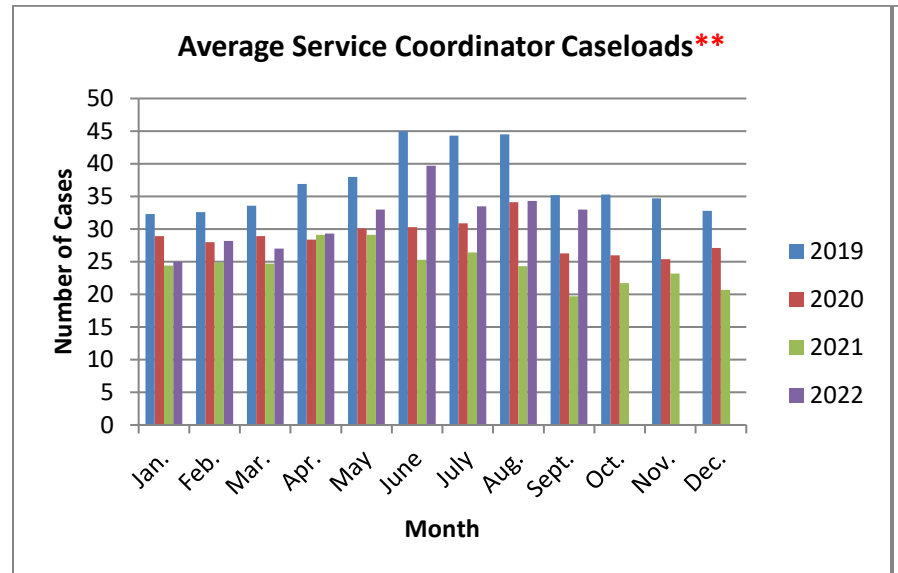
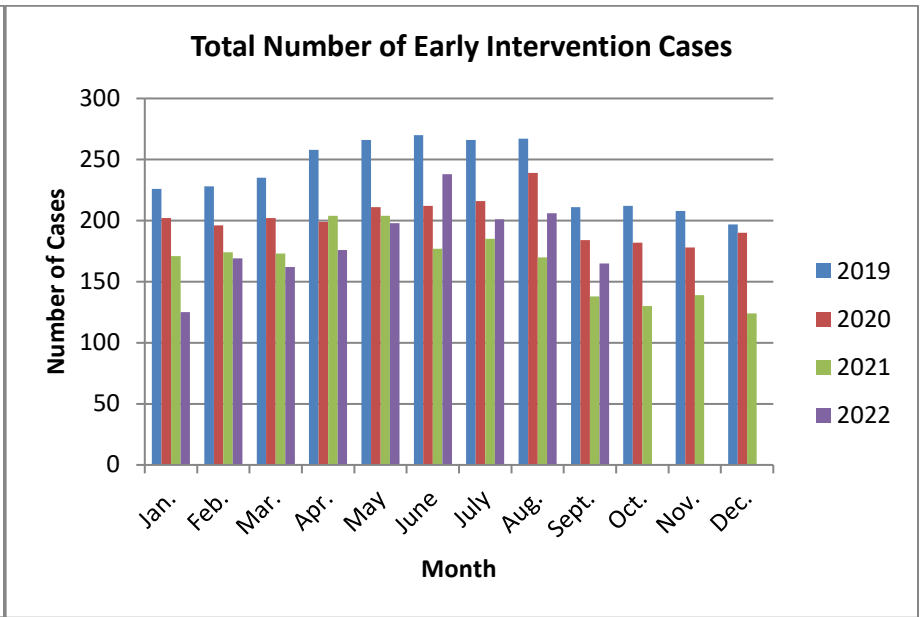
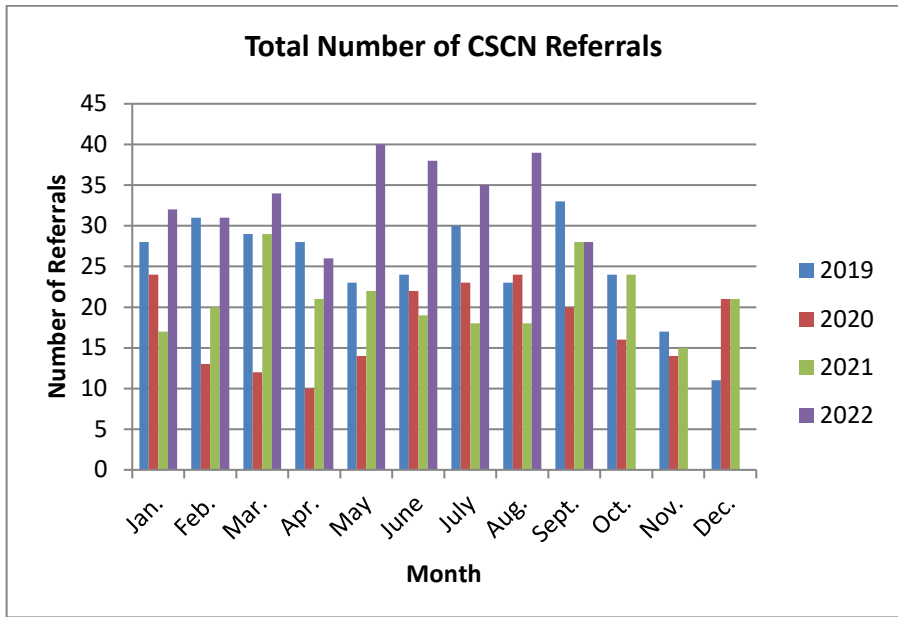
- Monthly meetings with Regional Support Centers for work on Social Media platforms, website development, developing a resource Guide, development of promotional materials, development of a resource library, and a new family survey for the program.

- Increased referrals to this program for high needs children with medical needs, referrals to OPWDD, Health homes and other needs.

CSCN Director Program work:

- Meetings include a statewide EI Fiscal work group mtgs, state wide Maternal Child Committee mtg, Strategic Planning meetings with SR Leadership on Integrating Children's services, Early Intervention Coordinating Council mtg, Sr Leadership mtgs every 2 weeks, Preschool software meetings, Preschool Chairperson meeting, EI software mtg, and CYSHCN regional meetings on social media use, advertising, outreach support, and collaboration meetings.

Statistics Based on Calendar Year



**** Average Service Coordinator Caseloads showing decrease due to increase in fully oriented Ongoing Service Coordinators, until June 2019 when we experienced staff retirement and leave.**

**Children with Special Care Needs Division
Statistical Highlights 2022
EARLY INTERVENTION PROGRAM**

Number of Program Referrals	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2022 Totals	2021 Totals
Initial Concern/reason for referral:														
-- DSS Founded Case														7
-- Gestational Age		1	1	1				1	1					6
-- Gestational Age/Gross Motor														0
-- Global Delays				1										0
-- Hearing						1								0
-- Physical														
-- Feeding	4	1	2		1	3			3					14
-- Feeding & Gross Motor	1				1	2	1	2	1					0
-- Feeding & Social Emotional							1	1						0
-- Gross Motor	3		3		7	6		8	6					37
-- Gross Motor & Fine Motor							7	1						2
-- Gross Motor, Speech & Social Emotional					1			2						2
-- Fine Motor									1					0
-- Social Emotional			1			1								8
-- Social Emotional & Adaptive					1									0
-- Speech	13	13	13	12	14	13	10	10	8					147
-- Speech & Cognitive														1
-- Speech & Feeding		1	1						1					1
-- Speech & Fine Motor			1						1					0
-- Speech & Gross Motor	1	4	1		1	1			1					15
-- Speech & Hearing	2		1		1									0
-- Speech & Sensory														0
-- Speech & Social Emotional	1		2	1		1	1	3	1					4
-- Speech, Feeding & Gross Motor														2
-- Adaptive														0
-- Adaptive/Sensory														1
-- Adaptive/Fine Motor														0
-- Qualifying Congenital / Medical Diagnosis				1										6
-- Other -- Birth Trauma														0
-- Maternal Drug Use														4
Total # of CYSHCN Referrals	0	1	1	5	5	0	4	0	0					
Total # of Information and Referalls (I&R)	3	2	0	0	5	10	2	6	1					
Total # of Child Find Referrals	4	8	7	5	3	0	9	5	3					15
Total Number of CSCN Program Referrals	32	31	34	26	40	38	35	39	28					252
Caseloads														
Total # of clients worked with during this month	125	169	162	176	198	238	201	206	165					
Average # of Cases per Full Time Service Coordinator	25.0	28.2	27.0	29.3	33.0	39.7	33.5	34.3	33.0					

EARLY INTERVENTION PROGRAM

Family/Client visits	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2022 Totals	2021 Totals
-- Intake visits	19	17	27	18	22	19	18	24	24					245
-- IFSP Meetings	18	19	35	31	28	26	25	15	21					301
-- Core Evaluations	13	19	19	17	17	19	22	20	22					207
-- Supplemental Evaluations	5	4	5	5	4	6	1	10	2					57
-- Observation Visits	12	39	44	19	39	28	26	17	29					392
-- CPSE meetings	5	2	7	2	5	10	6	5	3					53
-- Family Training/Team Meetings	0	0	0	0	0	0	1	0	0					17
-- Transition meetings	3	7	7	2	1	0	4	2	7					97

Services and Evaluations Pending & Completed	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2022 Totals	2021 Totals
Children with Services Pending(Needs List)														
-- Feeding	6	4	4	4	4	3	5	0	2					11
-- Nutrition	0	0	0	0	0	0	0	0	0					0
-- Occupational Therapy	0	1	3	3	2	2	2	0	2					13
-- Physical Therapy	4	2	6	6	5	2	5	7	10					11
-- Social Work	0	0	0	0	2	0	0	0	1					3
-- Special Education	7	6	11	11	15	13	10	4	6					13
-- Speech Therapy	37	39	33	36	47	52	54	38	31					144

EARLY INTERVENTION PROGRAM

Early Intervention Discharges	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2022 Totals	2021 Totals
-- To CPSE	14	1	2	1	0	0	3	29	3					42
-- Aged out	1	1	1	2	2	0	0	2	2					14
-- Skilled out	4	2	3		4	3	1	1	2					36
-- Moved	2	0	0	0	3	10	4	3	1					16
-- Not Eligible/DNQ	5	3	9	6	5	7	16	10	5					78
-- Family Refused/Unable to Locate	3	4	5	4	3	6	8	2	2					21
Total Number of Discharges	29	11	20	13	17	26	32	47	15					238
Child Find														
Total # of Referrals	4	8	6	5	3	0	9	5	3					15
Total # of Children in Child Find	13	20	20	21	25	22	20	21	14					
Total # Transferred to Early Intervention	0	0	1	3	2	1	2	1	2					0
Total # of Discharges	0	3	6	1	1	4	0	4	7					4

PRESCHOOL SPECIAL EDUCATION PROGRAM

Clients Qualified and Receiving Services	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	2022 Totals	2021 Totals
Children per School District														
-- Ithaca	112	120	131	136	144	145	108	106	85					
-- Dryden	44	47	49	51	54	54	38	40	28					
-- Groton	34	35	38	40	40	40	26	23	26					
-- Homer	0	0	0	0	0	0	0	1	0					
-- Lansing	26	27	27	29	28	27	17	17	11					
-- Newfield	6	8	13	14	15	15	12	12	8					
-- Trumansburg	9	11	10	10	11	11	9	9	8					
-- Spencer VanEtten	0	0	0	0	0	0	0	0	0					
-- Newark Valley	0	0	0	0	0	0	0	0	0					
-- Odessa-Montour	0	0	0	0	0	0	0	0	0					
-- Candor	0	0	0	0	0	0	0	0	0					
-- Moravia	0	0	0	0	0	0	0	0	1					
-- Cortland	0	0	0	0	0	0	0	0	0					
Total # of Qualified and Receiving Services	231	248	268	280	292	292	210	208	167					

Services Provided	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec		
Services /Authorized by Discipline														
-- Speech Therapy (individual)	148	160	172	177	182	182	114	111	102					
-- Speech Therapy (group)	7	11	16	15	19	19	5	5	0					
-- Occupational Therapy (individual)	58	61	62	65	71	71	50	45	29					
-- Occupational Therapy (group)	1	2	3	3	9	6	1	1	0					
-- Physical Therapy (individual)	35	36	38	42	42	43	21	20	19					
-- Physical Therapy (group)	0	0	0	0	0	0	0	0	0					
-- Transportation														
-- Birnie Bus	26	18	16	16	18	17	21	19	9					
-- Dryden Central School District	6	7	7	6	6	6	0	0	7					
-- Ithaca City School District	31	31	35	32	31	31	32	34	19					
-- Parent	6	8	7	7	5	5	3	3	2					
-- Service Coordination	34	36	3	38	44	41	21	20	23					
-- Counseling (individual)	43	51	55	62	70	66	55	52	44					
-- 1:1 (Tuition Program) Aide	4	4	5	5	5	5	5	5	0					
-- Special Education Itinerate Teacher	31	39	41	42	45	43	29	26	17					
-- Parent Counseling	44	51	58	63	66	63	35	37	39					
-- Program Aide	1	1	1	1	1	1	1	1	1					
-- Teaching Assistant	0	0	0	0	0	0	0	0	0					
-- Audiological Services	2	2	2	2	2	2	0	0	1					
-- Teacher of the Deaf	2	2	2	2	3	1	1	1	1					
-- Music Therapy	0	0	0	0	0	0	0	0	0					
-- Nutrition	15	15	16	17	17	16	8	8	10					
-- Skilled Nursing	0	0	0	0	0	0	0	0	0					
-- Interpreter	1	1	1	1	2	2	1	1	0					
Total # of children rcvg. home based related svcs.	162	182	199	215	229	230	153	152	125					

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	2022 Totals	2021 Totals
-- Ithaca	35	31	35	32	31	31	34	34	19					
-- Dryden	14	16	16	15	15	15	8	8	10					
-- Groton	7	7	7	7	7	7	6	5	4					
-- Lansing	9	8	7	7	6	5	6	6	4					
-- Newfield	2	2	2	2	2	2	1	1	0					
-- Trumansburg	2	2	2	2	2	2	2	2	5					
-- Odessa-Montour	0	0	0	0	0	0	0	0	0					
-- Spencer VanEtten	0	0	0	0	0	0	0	0	0					
-- Moravia	0	0	0	0	0	0	0	0	0					
-- # attending Dryden Central School	8	8	8	7	7	7	0	0	7					
-- # attending Franziska Racker Centers	35	35	34	34	33	32	33	32	24					
-- # attending Ithaca City School District	26	23	27	24	23	23	24	24	11					
Total # attending Special Ed Integrated Tuition Progr.	69	66	69	65	63	62	57	56	42					

Municipal Representation Committee on Preschool Special Education													2022 Totals	2021 Totals
-- Ithaca	11	23	35	31	28	12	12	2	15					206
-- Candor	0	0	0	0	0	0	0	0	0					0
-- Dryden	8	6	13	7	4	7	1	2	4					51
-- Groton	3	2	10	14	8	0	3	1	2					41
-- Homer	0	0	0	0	1	1	0	0	0					0
-- Lansing	1	2	2	4	3	1	0	4	4					19
-- Newfield	3	0	1	1	2	6	0	0	0					16
-- Trumansburg	3	2	0	3	4	6	0	1	5					20
-- Spencer VanEtten	1	0	0	0	0	0	0	0	0					1
-- Moravia	0	0	0	0	0	1	0	0	0					0
Total CPSE Meetings Attended	30	35	61	60	50	34	16	10	30					

ENVIRONMENTAL HEALTH DIVISION
<http://www.tompkinscountyny.gov>

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ENVIRONMENTAL HEALTH HIGHLIGHTS September 2022

Outreach and Division News:

Rabies Clinic – Groton: A rabies vaccination clinic for cats, dogs, and ferrets was held at the Groton Fire Station on September 29th. The clinic was well attended, with 144 pets vaccinated in two hours. Thanks to Skip Parr, Dillon Shults, Cynthia Mosher, and Kate Walker from EH; Dorota Kossowska from CHS, and Julie Weaver from DSS for assisting with the clinic. A special thanks to Dr. Jeanne Ramsey, retired from Meadowridge Veterinary Hospital, and Cindy Cornia from Meadowridge for their services. This is the first rabies clinic held in Groton since 2019 due to the pandemic.

Temporary Food Policy Update: Kristee Morgan, Liz Cameron, and Mik Kern worked closely with Cornell University to update policies regarding temporary food events associated with Cornell University. Most Cornell food events fall under the “fraternal, religious, or charitable organizations” exemption and will no longer require a temporary food service permit. Instead, Cornell will provide oversight and guidance for the event, and will send Environmental Health a monthly list of food events that occurred on campus. Cornell events that involve complex menus will still require Health Department oversight and permitting. This new approach has been working well since students returned to classes this fall and should allow EH staff to spend more resources on other Environmental Health programs while assuring continued public health protection at Cornell events with food service.

Finger Lakes GrassRoots Festival of Music and Dance: Frank Kruppa, Bill Troy, and Environmental Health staff held an office conference with representatives from the Finger Lakes Festival of Music and Dance on September 22, 2022, to discuss the proposed enforcement regarding this year’s festival. GrassRoots has engaged Whitham Planning Design Landscape Architecture (WPD) to prepare the 2023 mass gathering permit application. GrassRoots has also hired Steve Maybee, P.E. as their engineer. A subsequent meeting was held on September 30, 2022, between EH technical staff, WPD and Steve Maybee to discuss more of the details relating to permitting for the 2023 event. GrassRoots has indicated that they are interested in signing a Stipulation Agreement, which is currently under review.

Elevated Legionella in Mental Health Cooling Tower: As reported last month, on September 8, 2022, Integrated Water Management (IWM) notified Tompkins County Environmental Health that a water sample from the cooling tower located on the roof of Tompkins County Mental Health tested positive for elevated levels of Legionella bacteria. As required by NYS regulations, disinfection procedures were performed, and a follow-up water sample was taken on September 12, 2022. Test results from this sample were less than 20 colony forming units per milliliter (CFU/mL) and no additional disinfection is needed beyond normal maintenance. Legionella testing is required every 90 days, however the cooling tower at the Mental Health building is typically shut down for the season in October and will not be tested again until part of startup procedures in the spring. The incubation period for Legionellosis is 2-10 days and the clearance sample was collected 9/12. We are now past the exposure/incubation period.

NYSDOH Green Lakes Meeting: NYSDOH reinstated their Regional Environmental Health Meetings for the first time since the start of the COVID pandemic with a water-oriented meeting at Green Lakes State Park on September 27. Doug Barnes, Mike Robson, Dillon Shults, Scott Freyburger, Chris Laverack, Becky Sims, Liz Cameron, Adriel Shea, Tom Palmer, and Sarah Heath attended from EH. The full-day meeting included presentations from the NYSDOH Bureau of Water Supply Protection focusing on regulatory updates and emerging contaminants, Granular Activated Carbon (GAC) treatment, the Lead and Copper Rule, and funding opportunities for public water supplies.

Division of Environmental Health
Summary of Activity (2022)

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	YTD	2021 Totals
FOOD PROTECTION PROGRAM - Restaurants & Other Food Service														
<i>Permitted Operations (518 Permitted Operations*)</i>														
Inspections**	34	52	71	67	97	54	67	108	112				662	830
Critical Violations	7	10	11	31	17	13	24	35	34				182	166
Other Violations	6	31	22	44	28	31	31	53	40				286	250
Plans Approved	1	0	4	0	0	1	0	0	0				6	15
Complaints Received	1	1	6	3	1	2	1	5	3				23	22
<i>Temporary FSE (375 Estimated Operations)</i>														
Permits Issued	1	4	9	9	8	30	19	36	24				140	92
Inspections**	0	0	4	0	5	12	16	32	15				84	0
Critical Violations	0	4	0	0	2	2	5	13	8				34	0
Other Violations	0	0	1	0	2	1	1	3	4				12	0
MOBILE HOME PARKS (39 Permitted Operations, 2012 Lots*)														
Inspections**	3	0	1	1	1	0	1	7	8				22	21
Critical Violations	0	0	0	0	0	0	0	11	3				14	0
Other Violations	12	0	4	0	0	6	0	38	7				67	1
Complaints Received	0	0	0	0	1	2	1	1	2				7	8
TEMPORARY RESIDENCES - Hotels & Motels (34 Permitted Operations, 2225 Rooms*)														
Inspections**	0	4	0	0	2	10	0	7	1				24	47
Critical Violations	0	8	0	2	3	7	0	10	4				34	62
Other Violations	0	28	0	3	6	7	0	13	8				65	97
Complaints Received	0	1	0	1	2	1	3	4	2				14	10
MASS GATHERING (Fingerlaks GrassRoots Festival)														
Inspections**	0	0	0	0	0	0	9	0	0				9	0
Critical Violations	0	0	0	0	0	0	13	0	0				13	0
Other Violations	0	0	0	0	0	0	22	0	0				22	0
Complaints Received	0	0	0	0	0	0	0	0	0				0	0
MIGRANT FARM WORKER HOUSING (1 Operation)														
Inspections**	0	1	0	0	0	1	0	0	0				2	0
Critical Violations	0	0	0	0	0	0	0	0	0				0	0
Other Violations	0	0	0	0	0	0	0	0	0				0	0
Complaint Investigations	0	0	0	0	0	0	0	0	0				0	0
CAMPGROUNDS & AGRICULTURAL FAIRGROUNDS (13 Operations, 973 Sites*)														
Inspections**	0	0	0	4	6	2	15	10	0				37	34
Critical Violations	0	0	0	0	0	0	21	2	0				23	4
Other Violations	0	0	0	0	0	1	11	5	0				17	20
Complaints Received	0	0	0	0	0	0	0	0	0				0	0
CHILDREN'S CAMPS (35 Operations)														
Inspections**	0	0	0	0	0	15	26	14	0				55	32
Critical Violations	0	0	0	0	0	0	3	0	0				3	2
Other Violations	0	0	0	0	0	0	0	0	0				0	0
Injury/Illness Investigations	0	0	0	0	0	0	0	0	0				0	7
Complaints Received	0	0	0	0	0	0	0	0	0				0	1
SWIMMING POOLS & BATHING BEACHES - (58 Operations*)														
Inspections**	0	4	8	6	9	12	9	19	4				71	107
Critical Violations	0	2	0	0	0	1	1	4	0				8	18
Other Violations	0	11	2	4	0	2	5	7	0				31	64
Injury/Illness Investigations	0	0	0	0	0	0	1	0	0				1	0
Complaints Received	0	0	0	1	0	0	1	0	0				2	0
PUBLIC WATER SYSTEMS (PWS) 89 Community PWS, 63 Other PWS*														
Inspections**	2	2	6	9	13	1	4	5	13				55	94
Boil Water Orders Issued	0	1	0	1	1	1	0	2	1				7	4
Disinfection Waivers (Total)	19	19	19	19	19	19	19	19	19				n/a	20
Complaints Received	0	0	0	0	0	0	0	0	1				1	0

Division of Environmental Health
Summary of Activity (2022)

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	YTD	2021 Totals
ON-SITE WASTEWATER TREATMENT SYSTEMS (OWTS)														
Permits Issued	6	3	9	18	27	20	20	25	21	0	0	0	149	220
New Construction/Conversions	4	2	6	11	19	10	10	10	7				79	105
Replacements	2	1	3	7	8	10	10	15	14				70	115
Completion Certificates Issued	7	1	3	4	15	17	23	9	14	0	0	0	93	185
New Construction/Conversions	6	1	2	3	8	10	8	5	6				49	90
Replacements	1	0	1	1	7	7	15	4	8				44	95
ENGINEERING PLAN REVIEWS														
Realty Subdivisions	0	0	1	0	0	0	1	1	0				3	0
OWTS	2	2	3	2	2	2	3	1	1				18	29
Collector Sewer	0	0	1	2	1	0	1	0	0				5	0
Public Water Systems	0	0	0	0	1	1	0	1	0				3	7
Water Main Extension	0	0	1	3	2	1	1	0	0				8	5
Cross-Connection Control Devices	3	1	1	0	0	1	1	0	2				9	7
Other Water System Modification	0	0	1	2	0	0	0	1	0				4	3
Other Engineering Reviews	0	0	0	3	2	0	0	2	0				7	0
RABIES CONTROL PROGRAM														
Potential Human Exposure Investigations	22	19	29	30	37	53	76	134	32				432	472
Human Post-X Treatments	3	2	3	3	3	21	31	71	9				146	115
Animal Specimens Tested	8	9	11	9	9	17	15	62	8				148	172
Animals Testing Positive	1	1	0	1	0	2	2	1	1				9	4
Rabies Clinics Offered	0	0	1	0	1	1	0	0	1				4	4
Dogs Vaccinated	0	0	42	0	109	60	0	0	85				296	398
Cats Vaccinated	0	0	23	0	47	41	0	0	57				168	258
Ferrets Vaccinated	0	0	0	0	0	0	0	0	2				2	2
Pet Quarantine	0	0	0	0	0	0	2	2	0				4	0
CHILDHOOD LEAD PROGRAM														
Children with Elevated Blood Lead Levels	1	1	0	2	3	2	1	1	0				11	10
Sites Inspected	0	3	0	0	0	0	2	2	1				8	6
Abatements Completed	0	0	1	0	0	0	0	0	0				1	1
Lead Assessments Sent	0	0	0	0	0	0	0	0	0				0	2
FOIL REQUESTS														
Total Received	2	6	2	2	2	5	7	4	4				34	45
ADOLESCENT TOBACCO USE PREVENTION ACT (ATUPA) (65 Operations *) & CLEAN INDOOR AIR ACT (CIAA)														
ATUPA (Adult & Minor) Compliance Checks	13	47	30	0	0	0	4	0	1				95	28
Violations	0	0	0	0	0	0	0	0	0				0	2
CIAA Complaints	0	0	0	0	0	0	0	0	0				0	5
COMPLAINTS - General/Nuisance														
Complaint Investigations Opened	2	1	3	3	5	4	9	17	3				47	44
ENFORCEMENT ACTIONS														
Total Cases	5	0	5	0	0	9	6	2	2				29	17
Cases Related to FSE	4	0	1	0	0	0	3	0	2				10	6
BOH Penalties Assessed	\$4,900	\$0	\$2,500	\$0	\$0	\$7,700	\$2,000	\$1,900	\$600				\$19,600	\$8,450
BOH Penalties Collected	\$200	\$200	\$1,900	\$5,300	\$0	\$200	\$1,400	\$1,400	\$3,100				\$13,700	\$8,000
CUSTOMER SERVICE/SUPPORT														
Calls Received	579	462	642	676	828	830	835	1074	759				6685	11156
Walk-In Customers	15	35	26	30	60	65	45	75	52				403	440
TCEH Emails Received	424	374	373	398	436	462	402	533	480				3882	6415
Applications Processed	41	167	140	170	176	131	117	165	170				1277	1500
Payment Receipts Processed	18	150	137	112	128	108	92	146	100				991	1269
Renewals/Billings Sent	107	152	60	143	13	32	99	39	60				705	872

* As of 1/1/2022

** Includes Pre-op, Inspection, Re-inspection, HAACP, Sanitary Surveys (Doesn't include Co-Inspector/Field Visits)

Food Program Detailed Report:

The results of food service establishment inspections conducted in Tompkins County can be viewed directly on the Environmental Health website (<https://www2.tompkinscountyny.gov/health/eh/food/#fsetable>). Inspections can be sorted to meet the needs of the viewer (by facility, date, etc.) by clicking on the column heading of interest.

The following plans were approved this period:

- There were no plans approved in September.

New permits were issued for the following facilities:

- Deep Dive, C-Ithaca
- Ned's Pizza - Collegetown, C-Ithaca
- Paris Baguette, C-Ithaca
- Shi Miao Dao Yunnan Rice Noodle, C-Ithaca
- Gallery, C-Ithaca

Boil Water Orders (BWOs):

Ongoing:

- In February 2022, a BWO was issued to Dollar General in North Lansing for operating a water system with TCHD approval. Enforcement action is pending.
- On April 14, 2022, a BWO was issued to TOSA Apartments located in the Town of Dryden. The water system did not have adequate chlorine residual when inspected by the Tompkins County Health Department.
- On June 24, 2022, a BWO was issued to Cayuga Nature Center located in the Town of Ulysses. The water system did not have adequate chlorine residual when inspected by the Tompkins County Health Department. TCHD is evaluating the water system and the BWO will be released when modifications to the system or operation are made, and re-sampling occurs.
- On August 15, 2022, a BWO was issued to Hillside Apartment located in the Town of Dryden. The water system did not have adequate chlorine residual when inspected by the Tompkins County Health Department. TCHD is awaiting results of re-sampling prior to releasing the BWO.

New:

- On September 13, 2022, a BWO was issued to Sunset Apartment located in the Town of Enfield. The water system did not have adequate chlorine residual when inspected by the Tompkins County Health Department. The BWO was released on September 23, 2022, the chlorine residual was re-established, and satisfactory samples were received.

Summary of Open BOH Enforcement Actions

Date of BOH Action	Facility	Owner/ Operator	Basis for Action	Penalty Assessed	Next BOH Order Deadline	Status
6/28/22	Dream Vape & Smoke	Dream Vape & Smoke LLC.	ATUPA Retailer- Sale of Prohibited Flavored Nicotine Product and Sale of Nicotine to Person Under 21	\$2500	Payment due 8/15/22	Additional Action Pending
6/28/22	Jason's Grocery & Deli	Jason Burnham	ATUPA Retailer - Sale of Prohibited Flavored Nicotine Product	\$600	Payment due 8/15/22	Late penalty letter sent.
6/28/22	Finger Lakes GrassRoots	Finger Lakes GrassRoots Festival Org., Inc.	Mass Gathering – Violation of Board of Health Orders for Failure to Submit Approvable Water Plans	\$500	Payment due 8/15/22	Late penalty notice sent.
6/28/22	TOSA Apartments	Tony Busse	Public Water Supply - Violation of Board of Health Orders for Failure to Maintain Disinfection and to Adhere to Monitoring Requirements	\$1500	Payment due 8/15/22	Late penalty notice sent. Additional enforcement action may be required.
7/26/22	ZaZa Exotics	ZaZa Exotics Inc.	ATUPA - Sale of Prohibited Flavored Nicotine Product	\$600	Payment due 9/15/22	Late penalty letter sent.
7/26/22	Homewood Suites	Waterford Hotel Group, LLC.	Food Service Establishment – Repeat Critical Violations	\$400	Payment due 9/15/22	Monitoring Compliance
9/27/22	Canopy by Hilton-Strand Cafe	Ithaca Downtown Associates LLC	Food Service Establishment – Repeat Critical Violations	\$400	Payment due 11/15/22	Monitoring Compliance

ATUPA VIOLATION PENALTY POLICY - *Drafted: 10/11/22*

1. Background Information

The Environmental Health Division is responsible for enforcing the New York State Public Health Law Article 13-F also known as the Adolescent Tobacco Use Prevention Act (ATUPA). Certain violations of the law require the assessment of a penalty depending on the type of violation observed. Penalty ranges are established in the law for the following: sale to individuals under the age of 21, sale of restricted flavored vapor products, and sale of bidis and gutka for a non-tobacco business.

In addition to penalties, ATUPA establishes thresholds to refer tobacco and vapor product retailers to the New York State Department of Taxation and Finance (NYSDTF) for suspension or revocation of a license. For the sale of tobacco or vapor products to an individual under the age of 21, the accumulation of three (3) or more points in a 3-year period results in the Environmental Health Division making a referral to NYSDTF for suspension. In the case where there are any four violations of the ATUPA law in a 3-year period, the Environmental Health Division results in a referral to NYSDTF.

2. Policy

It is the policy of the Environmental Health Division to recommend the assessment of penalties to the Tompkins County Board of Health in a consistent and equitable manner in accordance with Article 13-F of New York State Public Health Law and Tables 1 and 2 below. In cases where the Division observes perceived egregious violations, the Division reserves the right to use discretion in recommending higher penalties than those set in this policy. In cases where a retailer's license will be referred to NYSDTF for suspension or revocation, no stipulation agreement will be offered, and a hearing will be scheduled.

Recommended penalties increase on an escalating basis to deter future violations. In the case of recommending penalties for the sale (or offering the sale) of restricted flavored vapor products, the penalty range can vary depending on the number of products observed in the facility after a sale. Retailers sometimes discretely locate products that can be difficult for inspectors to observe. An additional penalty for violation of Board of

Health Orders may be assessed to ensure that the penalty escalates with each subsequent violation in the case where only a few individual products are observed. The penalty per individual product goes into effect after a second violation has been observed and after a retailer has been formally informed through a BOH Order that they can incur penalties of up to \$100/ individual product. The starting penalty of \$20/individual product following a second violation is based on a hearing officer’s recommendation of seeking the amount of financial gain the retailer might profit from because of engaging in the prohibited sales (2022 pricing of a flavored vapor product is approximately \$20). From there the penalty doubles, potentially leading to a referral to NYSDTF for suspension of their license after a fourth violation is confirmed.

Table 1 - Recommended Penalty for the Sale of Tobacco/Vapor Products to Individual Under 21

Violation Frequency (Within a 36-month period)	Penalty Required by Law	TCHD Recommended Penalty	Points Assessed (Proof of clerk training needed to be assessed 1 point)
First Violation	\$300 to \$1,500 + \$250 surcharge	\$750 + \$250 surcharge	1 or 2 points
2 nd Violation	\$1,000 to \$2,500 + \$250 surcharge	\$1,750 + \$250 surcharge	1 or 2 points - <i>Possible Referral for Suspension</i>
3 rd Violation	\$1,000 to \$2,500 + \$250 surcharge	\$2,500 + \$250 surcharge	1 or 2 points - <i>Referral for Suspension</i>
During Suspension or Revocation	\$2,500	\$2,500	<i>Referral for permanent revocation</i>

**Table 2 - Recommended Penalty for the Sale (or Offering the Sale)
 of Restricted Flavored Vapor Products**

Violation Frequency (Within a 36-month period)	Penalty Required by Law	TCHD Recommended Penalty
1 st Violation of Flavored Vapor Product	Up to \$100 per individual package of flavored product sold or offered for sale	\$350 + \$250 surcharge – (must be at least 4 or more individual products observed for sale or penalty will need to be decreased)
2 nd Violation of Flavored Vapor Product	Up to \$100 per individual package of flavored product sold or offered for sale	\$20/ individual package + \$250 surcharge + \$500 when BOH Order is violated
3 rd Violation of Flavored Vapor Product	Up to \$100 per individual package of flavored product sold or offered for sale	\$40/ individual package + \$250 surcharge + \$1000 when BOH Order is violated unless referred to NYSDTF for suspension
4 th Violation of Flavored Vapor Product	Up to \$100 per individual package of flavored product sold or offered for sale	\$80/ individual package + \$250 surcharge – Referral to NYSDTF for suspension

3. New York State or Other Guidance

- ATUPA Overview Tobacco Enforcement Program Presentation (5/23/22)

4. References

- New York State Public Health Law 13-F
- NYS DOH website:
https://www.health.ny.gov/prevention/tobacco_control/retail_tobacco_dealers_guide.htm

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

Ph: (607) 274-6688
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CERTIFIED, REGULAR, & ELECTRONIC MAIL

October 12, 2022

Stephanie Holzbaur
Serendipity Catering
950 Danby Road, Suite #20
Ithaca, NY 14850

**Re: Tompkins County Board of Health Draft Resolution # EH-ENF-22-0022
Serendipity Catering Mobile Food Truck, Mobile Food Service, T-Ithaca**

Dear Stephanie Holzbaur:

Enclosed is the Hearing Officer's Findings of Fact and Recommendations from the September 23, 2022, hearing, and a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, October 25, 2022.**

You or a representative has the right to speak to the Board for a few minutes prior to them taking action. If you wish to speak to the Board, please contact Skip Parr or me at (607) 274-6688 at least one day before the meeting. If you plan to attend, please arrive by 12:00 p.m. (noon).

Sincerely,



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

Enclosure (s) – Draft Resolution and Hearing Officer's Report

pc: F:\EH\FOOD (SF)\FSE (SF)\Facilities (SF-4)\Serendipity\Enforcement\2022 Mobile\Draft Resolution 22-0022.docx
ec: Tompkins County Board of Health (via; Karan Palazzo, TCHD)
Town of Ithaca CEO; Amanda Champion, TC Legislature; TCHD: Elizabeth Cameron, P.E., Director of Environmental Health; Frank Kruppa, Public Health Director; Kristee Morgan; Skip Parr; Brenda Coyle
scan: Signed copy to Accela

ENVIRONMENTAL HEALTH DIVISION
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DRAFT RESOLUTION # EH-ENF-22-0022

**Serendipity Mobile Food Truck
Serendipity Catering, LLC, Owner; Stephanie Holzbour, Operator
950 Danby Road, Suite #20
Ithaca, NY 14850**

Whereas, the owner/operator of a Mobile Food Service Establishment must comply with the regulations established under Part 14-4 of the New York State Sanitary Code; **and**

Whereas, it is a critical violation of Part 14-4 of NYSSC to maintain potentially hazardous foods at unacceptable temperatures (greater than 45°F or less than 140°F) for a period of time longer than that necessary for preparation or service; **and**

Whereas, on May 4, 2022, while operating at the Ithaca Farmer's Market, the Tompkins County Health Department (TCHD) observed two pans of cheese sauce in hot holding at temperatures between 110 and 125°F; **and**

Whereas, on June 14, 2022, the TCHD observed a repeat critical where two half pans of chicken meatballs were observed in hot holding at a temperature of 120°F; **and**

Whereas, based upon review of the Findings of Fact and Recommendations of the hearing held on September 23, 2022, presented to the Tompkins County Health Department by the Hearing Officer, the Board of Health finds that Serendipity Catering, LLC, was in violation of Part 14-4 of the New York State Sanitary Code; **now therefore be it**

**Resolved, on recommendation of the Tompkins County Board of Health,
That Serendipity Catering, LLC, Owner, is ordered to:**

1. Pay a penalty of \$200 for these violations, due **by December 15, 2022**. (**Do Not** submit penalty payment until notified by the Tompkins County Health Department.); **and**
2. Maintain potentially hazardous foods at or above 140°F in hot holding; **and**
3. Provide and use enough conveniently located hot food storage facilities to maintain potentially hazardous foods at or above 140°F; **and**
4. Comply with all the requirements of Subpart 14-4 of the New York State Code for Mobile Food Service Establishments.

Matter of Serendipity Catering Mobile Food Truck

Recommendation

BACKGROUND

Serendipity Catering Mobile Food Truck (respondent) is a mobile food service establishment that provides food to the public at various events in Tompkins County, New York. The Tompkins County Health Department alleges that on May 4, 2022 and June 14, 2022 respondent violated Part 14-4 of the New York State Sanitary Code by failing to keep potentially hazardous foods at the proper temperature.

RELEVANT LAW

Part 14-4 of the New York State Sanitary Code reads in relevant part as follows:

Food Protection

14-4.50 Food Protection; Potentially Hazardous Food, Temperature and Refrigeration Requirements.

(a) Food is to be protected from contamination during storage, preparation, display, service and transportation. The temperature of potentially hazardous food is to be 45 degrees Fahrenheit (7.2 degrees Celsius) or below, or 140 degrees Fahrenheit (60 degrees Celsius) or above, at all times, except during necessary times of preparation.

“Potentially Hazardous food” is defined in Part 14-4.40 (c) as follows:

Potentially hazardous food is any food that consists in whole or in part of milk or milk products, eggs, meat, poultry, fish, shellfish, edible crustacea, cooked potato, cooked rice or other ingredients, including synthetic ingredients, in a form capable of supporting: (1) rapid and progressive growth of infectious or toxigenic microorganisms; or (2) the slower growth of C. botulinum. The term does not include foods with a water activity (Aw) value of 0.85 or less, or a hydrogen ion concentration (pH) level of 4.6 or below.

The penalties for a violation of the State Sanitary Code are set forth in Section 229 of New York State Public Health Law. That Section reads in relevant part as follows:

229. Sanitary code; violation; penalties. The provisions of the sanitary code shall have the force and effect of law and the non-compliance or non-conformance with any provision thereof shall constitute a violation punishable on conviction for a first offense by a fine not exceeding two hundred fifty dollars or by imprisonment for not exceeding fifteen days, or both; and for a second or subsequent offense by a fine not exceeding five hundred dollars or by imprisonment for not exceeding fifteen days, or both.

HEARING

A hearing was scheduled for September 23, 2022. Shortly before the beginning of the hearing the respondent telephoned the Health Department to inform it that no representative of the respondent would be able to attend the hearing. Accordingly, the hearing was held in the absence of the respondent.

At the hearing, Deputy County Attorney Holly Mosher represented the Health Department. Three members of the Health Department staff, Mikhail Kern, Skip Parr and Kristee Morgan appeared at the hearing and gave sworn testimony on behalf of the Health Department.

As hearing officer, I am responsible for conducting the hearing and making a recommendation to the Tompkins County Board of Health. As a result of the testimony and evidence presented at the hearing, I make the following findings of facts, conclusion of law and recommendation to the Tompkins County Board of Health:

FACTS:

On May 4, 2022 Environmental Health Specialists Mikhail Kern inspected the respondent's food truck at the Ithaca Farmers Market facility. He observed 2 pans of cheese sauce (a potentially hazardous food) in a hot box which he determined were at 110 to 121 degrees, below the 140 degrees required for hot potentially hazardous

food. On June 14, 2022 Mr. Kern conducted a reinspection of the food truck at the same location. At that time, he observed chicken meatballs (a potentially hazardous food) in a hotbox at 120 degrees, again below the 140 degrees required for hot potentially hazardous foods.

The Health Department proposed a stipulation agreement assessing a \$200 fine as well as requiring continuing compliance with the State Sanitary Code. Respondent declined to sign the agreement. A representative of the respondent told the Health Department Program Supervisor, Skip Parr, that respondent disputed the first finding with regard to the cheese sauce because, he asserted, the sauce was not intended to be sold to the public at that time. This claim is somewhat dubious in light of the fact that the sauce was in the same hot box with other food products available for sale to the public and was in no way separated from other foods or marked as 'not for sale'. Perhaps more importantly, the assertion provides no excuse for the subsequent violation in which chicken meatballs were similarly out of temperature.

CONCLUSION OF LAW

The respondent violated Part 14-4 of the New York State Sanitary Code by failing to keep potentially hazardous foods at the proper temperature.

RECOMMENDATION:

As hearing officer, I recommend that the Board of Health accept the Department's recommendation of a \$200.00 fine. This proposed fine is lower than the potential fine for a single violation and, in this case, there were two violations.

Jonathan Wood
Hearing Officer



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

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

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CERTIFIED, REGULAR, & ELECTRONIC MAIL

October 17, 2022

Dream Vape & Smoke
222 Elmira Road
Ithaca, NY 14867

**Re: Tompkins County Board of Health Draft Resolution # EH-ENF-22-0025
Dream Vape & Smoke, C-Ithaca**

Dear Dream Vape & Smoke, LLC:

Enclosed is the Hearing Officer's Findings of Fact and Recommendations from the September 23, 2022, hearing and a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, October 25, 2022**.

You or a representative has the right to speak to the Board for a few minutes prior to them taking action. If you wish to speak to the Board, please contact Skip Parr or me at (607) 274-6688 at least one day before the meeting. If you plan to attend, please arrive by 12:00 p.m. (noon).

Sincerely,

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

Enclosures – Draft Resolution 22-0025, Draft Resolution 22-0008, Hearing Officer's Recommendation, and Memo to BOH Regarding ATUPA Penalties

pc: F:\EH\TOBACCO\ATUPA\Facilities\Dream Smoke Shop\Enforcement\22-0025\Draft Resolution 22-0025.docx
ec: Tompkins County Board of Health (via; Karan Palazzo, TCHD)
Iman Abraham, Rep for Dream Vape & Smoke; Tim Wiant, NYSDOH; Mayor Laura Lewis; Travis Brooks, TC Legislature;
Shawna Black, TC Legislature; Holly Mosher, Deputy County Attorney; TCHD: Elizabeth Cameron, P.E., Director of
Environmental Health; Frank Kruppa, Public Health Director; Becky Sims; Skip Parr; Adriel Shea; Brenda Coyle
scan: Signed copy to Accela

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

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DRAFT RESOLUTION # EH-ENF-22-0025

**Dream Vape and Smoke
Dream Vape & Smoke, LLC, Operator/Owner
222 Elmira Road
Ithaca, NY 14850**

Whereas, businesses that hold a Certificate of Registration from New York State Department of Taxation and Finance (NYSDTF) for tobacco and/or vapor retail sales must comply with the regulations of Article 13-F of New York State Public Health Law (NYSPHL); **and**

Whereas, Article 13-F, Section 1399-MM-1 of NYSPHL prohibits the offer for sale and sale of flavored vapor products, other than tobacco flavored vapor products, that contain nicotine; **and**

Whereas, Article 13-F, Section 1399-cc of NYSPHL and Tompkins County Local Law No.b of 2019 prohibit the sale of tobacco or vapor products to individuals under 21 years of age; **and**

Whereas, on June 28, 2022, the Tompkins County Board of Health Resolution EH-ENF-22-0008 ordered Dream Vape & Smoke, LLC, to prohibit the sale of tobacco and vapor products to people under the age of 21, and to prohibit the sale or other provision of flavored vapor products containing nicotine, with the exception of tobacco flavor, to anyone; **and**

Whereas, Resolution EH-ENF-22-0008 notified Dream & Vape, LLC, that future sales of flavored vapor products, other than tobacco flavored, containing nicotine that are sold or offered for sale will result in the Tompkins County Health Department seeking a fine amount of up to \$100 for each individual package sold or offered for sale; **and**

Whereas, on July 7, 2022, the Tompkins County Health Department observed the sale of a blue raspberry flavored vapor tobacco product containing nicotine to an individual under the age of 21 years old at Dream Vape & Smoke; **and**

Whereas, on July 13, 2022, TCHD staff over the age of 21 purchased a raspberry watermelon flavored nicotine vapor product and observed more than 670 individual flavored vapor products containing nicotine available for sale at Dream Vape & Smoke; **and**

Whereas, Article 13-F, Section 1399-ee of NYSPHL requires that the sale of a vapor product to an individual under 21 results in the assignment of two points to the NYSDTF registration to sell tobacco and/or vapor products, unless it is demonstrated that at the time of the sale the seller possessed a valid certificate from a State tobacco sales training program, in which case one point will be assigned; **and**

Whereas, Dream Vape & Smoke was assigned two points effective June 28, 2022; **and**

Whereas, a hearing was held on September 23, 2022, and the hearing office concluded that Dream Vape & Smoke was in violation of Sections 1399-mm-1 and 1399-cc of New York State Public Health Law (NYSPL) on July 7, 2022, and July 13, 2022; **and**

Whereas, the hearing officer supported the Health Department's recommended penalty of \$2750 for the violation of Section 1399-cc (sale to an underage person); **and**

Whereas, the hearing officer recommended a penalty of \$12,250, reduced from the Health Department's recommended penalty of \$67,250 for violations of Section 1399-mm-1 (sale of flavored vapor products); **and**

Whereas, the Environmental Health Division has requested that the Board of Health assess a penalty of \$27,050 which is higher than what was recommended by the Hearing officer, due to the multiple times that these violations have occurred; **and**

Whereas, as of October 11, 2022, Dream Vape & Smoke has not paid the penalty of \$2,500 that was due on August 15, 2022, as required by Resolution EH-ENF-22-0008; **and**

Whereas, upon adoption of this resolution, Dream Vape & Smoke will be assigned three or more points which will result in a notification to the appropriate agencies for suspension of its registration to sell tobacco and vapor products for one year; **and**

Whereas, Dream Vape & Smoke has been notified that, if there is a violation of ATUPA law during the period that Dream Vape & Smoke's tobacco and vapor registrations are suspended, its tobacco and/or vapor license will be referred to the appropriate New York State agency for permanent revocation and a new license to sell tobacco and vapor products will not be issued. In addition, a fine of \$2,500 will be assessed. **and**

Whereas, based upon review of the Findings of Fact and Recommendations of the hearing held on September 23, 2022, presented to the Tompkins County Health Department by the Hearing Officer, the Board of Health finds that Dream Vape and Smoke is in violation of Article 13-F, Section 1399-MM-1 of the New York State Public Health Law (NYSPL); **now therefore be it**

**Resolved, on recommendation of the Tompkins County Board of Health,
That Dream Vape & Smoke LLC, Owner, is ordered to:**

1. Pay the outstanding penalty of \$2500 required by Resolution EH-ENF-22-0008 **by November 11, 2022**. Failure to make the penalty payment will result to a referral to the County Attorney for collections; **and**
2. Pay a penalty of \$2,750 (\$2,500 + \$250 surcharge) for the sale of vapor product to a person under the age of 21, due **by December 15, 2022**. (**Do Not** submit penalty payment until notified by the Tompkins County Health Department.); **and**
3. Pay a penalty of \$27,050 (\$26,800 + \$250 surcharge) for selling prohibited product and having available more than 670 flavored vapor products containing nicotine, due **by December 15, 2022**. (**Do Not** submit penalty payment until notified by the Tompkins County Health Department.); **and**
4. Prohibit the sale of tobacco and vapor products to people under the age of 21; **and**
5. Prohibit the sale or other provision of flavored vapor products containing nicotine, with the exception of tobacco flavor, to anyone; **and**

6. Prohibit the use of price reduction instruments or other means of charging less than a vapor product's listed price; **and**
7. Post and maintain a sign that customers can easily see that reads: **"SALE OF CIGARETTES, CIGARS, CHEWING TOBACCO, POWDERED TOBACCO, SHISHA OR OTHER TOBACCO PRODUCTS, HERBAL CIGARETTES, LIQUID NICOTINE, ELECTRONIC CIGARETTES, ROLLING PAPERS OR SMOKING PARAPHERNALIA TO PERSONS UNDER 21 YEARS OF AGE IS PROHIBITED BY LAW."; and**
8. Comply with all the requirements of New York State Public Health Law, Article 13F.

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

Ph: (607) 274-6688
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RESOLUTION # EH-ENF-22-0008 FOR

**Dream Vape and Smoke
Dream Vape & Smoke, LLC, Operator/Owner
222 Elmira Road
Ithaca, NY 14850**

Whereas, the representative of a business that sells retail tobacco products must comply with the regulations of Article 13-F, Section 1399-MM-1 of the New York State Public Health Law (NYSPHL) that prohibits the offer for sale and sale of flavored vapor products, other than tobacco flavored vapor products, that contain nicotine; **and**

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 Tompkins County Local Law No.b of 2019 that prohibit the sale of tobacco or vapor products to individuals under 21 years of age; **and**

Whereas, on March 4, 2022, Tompkins County Health Department (TCHD) staff person over the age of 21 purchased a sour apple flavored nicotine vapor product and observed more than 600 individual flavored vapor products containing nicotine offered for sale at Dream Vape and Smoke; **and**

Whereas, on March 16, 2022, the Tompkins County Health Department observed the sale of a prohibited tobacco product to an individual under the age of 21 years old at Dream Vape & Smoke; **and**

Whereas, Dream Vape & Smoke will be assigned two points for this violation of the ATUPA law because it was not demonstrated that the seller possessed a certificate from a state certified tobacco sales training program at the time of the sale; **and**

Whereas the Health Department will conduct at least three inspections with an underage individual each year for the next three years at Dream Vape & Smoke and, if Dream Vape & Smoke is assigned a total of three or more points due to future sales to a person under the age of 21 years, its registration to sell tobacco and, if a lottery agent, its lottery license will be suspended for 6 months; **and**

Whereas, Dream Vape & Smoke, has been notified that future violations where flavored vapor products, other than tobacco flavored, containing nicotine, are sold or offered for sale will result in the Tompkins County Health Department seeking a fine amount of up to \$100 for each individual package sold or offered for sale; **and**

Whereas, a representative for Dream Vape & Smoke, signed a Stipulation Agreement with Public Health Director's Orders on April 21, 2022, agreeing that Dream Vape & Smoke violated Article 13-F, Section 1399-MM-1 and Section 1399-cc of the NYSPHL; **now therefore be it**

**Resolved, on recommendation of the Tompkins County Board of Health,
That Dream Vape & Smoke LLC, Owner, is ordered to:**

1. Pay a penalty of \$2,500 for these violations, due by **August 15, 2022; and**
2. To prohibit the sale of tobacco products to people under the age of 21; **and**
3. To prohibit the sale or other provision of flavored vapor products containing nicotine, with the exception of tobacco flavor, to anyone; **and**
4. To prohibit the use of price reduction instruments or other means of charging less than a vapor product's listed price; **and**
5. To post and maintain a sign that customers can easily see that reads: **"SALE OF CIGARETTES, CIGARS, CHEWING TOBACCO, POWDERED TOBACCO, SHISHA OR OTHER TOBACCO PRODUCTS, HERBAL CIGARETTES, LIQUID NICOTINE, ELECTRONIC CIGARETTES, ROLLING PAPERS OR SMOKING PARAPHERNALIA TO PERSONS UNDER 21 YEARS OF AGE IS PROHIBITED BY LAW."; and**
6. To comply with all the requirements of New York State Public Health Law, Article 13F.

This action was adopted by the Tompkins County Board of Health at its regular meeting on June 28, 2022.



Frank Kruppa
Public Health Director



Date

Matter of Dream Vape & Smoke, LLC

Recommendation

BACKGROUND

Dream Vape & Smoke, LLC (respondent) is a vender of vapor products on Elmira Road in Ithaca, New York. The Tompkins County Health Department alleges that on July 7, 2022 respondent violated New York State Public Health Law, Article 13-F Section 1399-cc by selling a flavored vapor product to a person under 21years of age, and that on July 13, 2022 respondent violated Article 13-F Section 1399-mm-1 of New York State Public Health Law by offering for sale and selling flavored vapor products (other than tobacco flavor) with nicotine.

RELEVANT LAW

Relevant sections of law read as follows:

SELLING TO PERSONS UNDER 21 YEARS OF AGE

§ 1399-cc

2. Any person operating a place of business wherein tobacco products, herbal cigarettes, liquid nicotine, shisha or electronic cigarettes, are sold or offered for sale is prohibited from selling such products, herbal cigarettes, liquid nicotine, shisha, electronic cigarettes or smoking paraphernalia to individuals under twenty-one years of age...

The penalties for a violation of the law are set forth in Section 1399-ee of the Public Health Law. That Section reads in relevant part as follows:

2. If the enforcement officer determines after a hearing that a violation of this article has occurred, he or she shall impose a civil penalty of a minimum of three hundred dollars, but not to exceed one thousand five hundred dollars for a first violation, and

a minimum of one thousand dollars, but not to exceed two thousand five hundred dollars for each subsequent violation, unless a different penalty is otherwise provided in this article. The enforcement officer shall advise the retail dealer that upon the accumulation of three or more points pursuant to this section the department of taxation and finance shall suspend the dealer's registration.

3. (a) Imposition of points. If the enforcement officer determines, after a hearing, that the retail dealer violated subdivision one of section thirteen hundred ninety-nine-cc of this article with respect to a prohibited sale to a minor, he or she shall, in addition to imposing any other penalty required or permitted pursuant to this section, assign two points to the retail dealer's record where the individual who committed the violation did not hold a certificate of completion from a state certified tobacco sales training program and one point where the retail dealer demonstrates that the person who committed the violation held a certificate of completion from a state certified tobacco sales training program.

(e) Suspension. If the department determines that a retail dealer has accumulated three points or more, the department shall direct the commissioner of taxation and finance to suspend such dealer's registration for one year...

(f) Surcharge. A two hundred fifty dollar surcharge to be assessed for every violation will be made available to enforcement officers and shall be used solely for compliance checks to be conducted to determine compliance with this section.

SALE OF FLAVORED PRODUCTS

§ 1399-mm-1.

1. Sale of flavored products prohibited. For the purposes of this section "flavored" shall mean any vapor product intended or reasonably expected to be used with or for the consumption of nicotine, with a distinguishable taste or aroma, other than the taste or aroma of tobacco, imparted either prior to or during consumption of such product or a component part thereof, including but not limited to tastes or aromas relating to any fruit, chocolate, vanilla, honey, candy, cocoa, dessert, alcoholic beverage, mint, wintergreen, menthol, herb or spice,...

2. No vapor products dealer, or any agent or employee of a vapor products dealer, shall sell or offer for sale at retail in the state any flavored vapor product intended or reasonably expected to be used with or for the consumption of nicotine.

3. Any vapor products dealer, or any agent or employee of a vapor products dealer, who violates the provisions of this section shall be subject to a civil penalty of not more than one hundred dollars for each individual package of flavored vapor product intended or reasonably expected to be used with or for the consumption of nicotine sold or offered for sale...

Sections 1399-aa and 1399-t of the Public Health Law establishes that the Tompkins County Board of Health is the enforcement officer for violations of this law within Tompkins County.

HEARING

A hearing was initially scheduled for August 3, 2022. An attorney for the respondent requested an adjournment and the hearing was rescheduled for September 23, 2022. A new notice of hearing was sent to the respondent and the attorney was notified by email. Thereafter, the attorney requested and was provided with the relevant documentation. No representative of the respondent appeared at the hearing. Accordingly, the hearing was held in the absence of respondent.

At the hearing, Deputy County Attorney Holly Mosher represented the Health Department. Two members of the Health Department staff, Skip Parr and Becky Sims appeared at the hearing and gave sworn testimony on behalf of the Health Department.

As hearing officer, I am responsible for conducting the hearing and making a recommendation to the Tompkins County Board of Health. As a result of the testimony and evidence presented at the hearing, I make the following findings of facts, conclusions of law and recommendation to the Tompkins County Board of Health:

FACTS

On March 4, 2022 Respondent sold a flavored vapor product to a Health Department representative during a compliance check. On March 16, 2022 respondent sold a flavored vapor product to a minor during another Health Department compliance check.

As a result of these violations, in April 2022 respondent signed a stipulation agreement and orders acknowledging the violations, accepting the assignment of two points and agreeing to pay a fine not to exceed \$2000 plus a \$500 surcharge. The agreement also states that the respondent understood that in the event there were “future violations where Dream Vape and Smoke sells or offers for sale flavored vapor product, other than tobacco flavored vapor product, that contain nicotine, that Tompkins County Health Department will seek a fine in the amount of up to \$100 for each individual package sold or offered for sale” (emphasis added by hearing officer). The agreement resulted in a resolution by the Board of Health on June 28, 2022 incorporating the terms of the agreement and assessing a fine of \$2000 along with a \$500 surcharge.

On July 7, 2022 Environmental Health Specialists Becky Sims performed a compliance inspection of the respondent’s facility with a 19 years old (underage) inspector. The underage inspector purchased a blue raspberry flavored vape for \$20 from the cashier and then left the store. No identification documentation or proof of age was requested.

On July 13, 2022 Skip Parr (the Director of the County compliance program) and Environmental Health Specialist Becky Sims performed an adult compliance check of respondent’s facility. Mr. Parr purchased a flavored nicotine product for \$20, specifically, a raspberry watermelon flavored vape. Thereafter Mr. Parr and Ms. Sims examined the facility’s inventory of prohibited products and identified more than 670 flavored vapor products containing nicotine.

CONCLUSIONS OF LAW

The respondent was in violation of § 1399-mm-1 of NY Public Health Law by offering for sale and selling fruit flavored nicotine products. The respondent was also in violation of Section 1399-cc by selling a flavored vapor product to an underage person.

RECOMMENDATION:

Sale to underage person --- The Health Department recommends a penalty of \$2750 (\$2500 plus \$500 surcharge) for the violation of Section 1399-cc (sale to underage person). This is the maximum penalty permissible under section 1399-ee cited above. The penalty also carries the assignment of at least one point and, given the fact that the respondent had previously been assigned two points effective June 28, 2022, this will result in a suspension of the respondent's registration for a one-year period by the State Commissioner of Taxation and Finance.

I support this recommendation of the Health Department.

Sale of flavored products--- The Health Department recommends a penalty of \$67,250 for this offense. The proposed penalty was determined by multiplying 670 individual flavored products by the \$100 per product maximum potential fine and adding the \$250 surcharge.

While I understand the frustration of the Department with the respondent's continuing failure to abide by the law, this is a very high proposed fine. In New York State there are significantly lower financial penalties for seemingly more egregious conduct. For example, under State law the maximum financial penalty for most felonies is \$5,000 for an individual (Penal Law Section 80) and \$10,000 for a corporation (Penal Law Section 80.10). In this very case the maximum financial penalty for a repeat sale of tobacco products to a minor is \$2,500, far less than the potential penalty for making flavored products available to an adult.

With that said, the \$100 per product penalty is a maximum, allowing the Board of Health a great deal of discretion in determining an appropriate financial penalty. This leads to the question of how the penalty should be determined.

As guided by other sections of State Law (See Penal Law Section 80 and 80.10) perhaps the most important consideration in setting a penalty involving financial gain by the wrongdoer is the amount of financial gain or profit that the wrongdoer might obtain through the prohibited activity. In this case the evidence shows the going price for an individual item was \$20. Twenty dollars multiplied by 670 individual items is \$13,400. Of course, that would be the gross revenue and not the profit. There are costs of the products and other expenses involved in the sale. The profit on each individual item may be relatively small. Unfortunately, the respondent did not appear at the hearing and there was no evidence presented as to the costs associated with the acquisition and sale of the offending products. Accordingly, I am not inclined to give the respondent the benefit of the doubt.

I recommend a penalty of \$12,000 for the sale of flavored products in addition to a \$250 surcharge. This amount likely covers any expected profit from the sale of the offending items and is more in keeping with other financial penalties imposed by New York Law. This recommended penalty is in addition to the penalties for sale to an underage person.

Jonathan Wood
Hearing Officer

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

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

Date: October 17, 2022
Memo to: Members of the Tompkins County Board of Health
From: C. Elizabeth Cameron, P.E., Director of Environmental Health

**Subject: Recommended Penalty for Dream Vape & Smoke –
Draft Resolution # EH-ENF-22-0025**

Discussion: An Administrative hearing was held on September 23, 2022, in which the hearing officer determined that Dream Vape & Smoke was in violation of two sections of ATUPA law:

- a) The sale to an underage individual, and
- b) The sale of or offering for sale prohibited flavored vapor products.

The hearing officer concurred with the Health Department's recommend penalty of \$2,750 for the sale to an underage person on July 7, 2022. However, the hearing officer did not support the Environmental Health Division's recommended penalty of \$67,000 for offering prohibited products for sale and has recommended a lower penalty of \$12,250 for this violation. Note that the Environmental Health Division's recommendation was based on the maximum allowed penalty of \$100 per product offered for sale (670 products *\$100/product) on July 13, 2022. The hearing officer's recommendation was based on:

- a) The maximum penalty for the repeat sale to a minor is much less (\$2500), and
- b) The hearing officer's assessment of the financial gain that the facility might obtain through the sale of the prohibited product (estimated by the hearing officer at \$20 per product for a total of \$13,400, which the hearing officer subsequently decreased to \$12000 plus the \$250 surcharge.)

In the case of Dream Vape & Smoke, the Division believes that the hearing officer's recommended penalty fails to consider that the facility sold prohibited product on two occasions, 7/13/22 and 7/7/22. (Dream Vape also sold prohibited product on 3/16/22 and 3/4/22, addressed in Resolution #EH-ENF-22-0008, for a total of 4 sales of prohibited product.) The Division further recommends that the penalty for repeat sales of prohibited products is greater than the potential financial gain from the sale of these products. The Division proposes that a \$40/individual product penalty would better reflect any potential financial gains that were not attributed to the July 7, 2022, violation and set a precedent for an escalating penalties system for deterring future violations at this and other retailers. The EH Division's revised recommended penalty would increase the hearing officer's recommended penalty of \$12,000 to \$26,800 plus the \$250 surcharge.

The Environmental Health Division requests that the Board of Health consider a penalty of \$27,050 to address the violations for the sale of flavored nicotine products cited in Draft Resolution #EH-ENF-22-0025, bringing the total penalty for both the sale to a minor and for the sale of prohibited products to \$29,800.

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

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

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

CERTIFIED, REGULAR, & ELECTRONIC MAIL

October 12, 2022

Sungyoon Hwang
Big Ko Ko Inc.
321 College Avenue
Ithaca, NY 14850

**Re: Tompkins County Board of Health Draft Resolution # EH-ENF-22-0029
Ko Ko Restaurant, Food Service Establishment, C-Ithaca**

Dear Sungyoon Hwang:

Thank you for signing the Stipulation Agreement on October 3, 2022, for Ko Ko Restaurant. Enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, October 25, 2022.**

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 Par 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, and Case Summary

pc: F:\EH\FOOD (SF)\FSE (SF)\Facilities (SF-4)\Ko Ko Restaurant\Enforcement\2022\Draft Res 22-0029.docx
ec: Tompkins County Board of Health (via; Karan Palazzo, TCHD)
City of Ithaca Building Department; Mayor Laura Lewis, Travis Brooks, TC Legislature; TCHD: Elizabeth Cameron, P.E.,
Director of Environmental Health; Frank Kruppa, Public Health Director; Kristee Morgan; Skip Parr; Brenda Coyle
scan: Signed copy to Accela

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

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

DRAFT RESOLUTION # EH-ENF-22-0029

Ko Ko Restaurant
Big Ko Ko Inc., Owner; Sungyoon Hwang, Operator
321 College Ave.
Ithaca, NY 14850

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

Whereas, it is a critical violation of Part 14-1 of the NYSSC to fail to maintain potentially hazardous foods at or below 45°F in cold holding; **and**

Whereas, on May 19, 2022, and July 27, 2022, the Tompkins County Health Department (TCHD) observed critical violations of Subpart 14-1 of the NYSSC where potentially hazardous foods were observed at temperatures between 52°F and 55°F during cold storage; **and**

Whereas, Sungyoon Hwang, Operator, signed a Stipulation Agreement with Public Health Director's Orders on October 3, 2022, agreeing that Ko Ko Restaurant 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 Big Ko Ko, Inc., Owner, is ordered to:

1. Pay a penalty of \$200 for these violations, due by **December 15, 2022**. (**Do Not** submit penalty payment until notified by the Tompkins County Health Department.); **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**
3. Monitor for food that is spoiled and/or adulterated and remove from the premise immediately; **and**
4. Cool potentially hazardous foods by approved method where the food temperature can be reduced from 120°F to 70°F or less in two hours and to 45°F within four hours; **and**
5. Store cooked or prepared foods so that it is not subject to cross-contamination from raw foods; **and**
6. Ensure that at least two food service workers attend and successfully complete a food safety training course approved by the TCHD. The current certificates documenting successful completion of the course must be submitted to the TCHD by **October 24, 2022**; **and**
7. Provide at least one employee who has successfully completed the food safety training on-site during hours of operation. If a trained employee separates from employment, another employee must successfully complete an approved food safety course within 90 days. Training certificates must be retained and made available during an inspection; **and**
8. Comply with all the requirements of Subpart 14-1 of the New York State Code for Food Service Establishments.



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
Fx: (607) 274-6695

STIPULATION AGREEMENT AND ORDERS # EH-ENF-22-0029

**Ko Ko Restaurant
Big Ko Ko Inc., Owner; Sungyoon Hwang, Operator
321 College Ave.
Ithaca, NY 14850**

I, Sungyoon Hwang, as a representative for Ko Ko Restaurant, agree that on May 19, 2022, and July 27, 2022, Ko Ko Restaurant was in violation of Subpart 14-1 of New York State Sanitary Code for failure to maintain potentially hazardous foods under refrigeration.

I agree to pay a penalty not to exceed \$200 for these violations following adoption of a resolution by the Board of Health. (**Do not** submit penalty payment until notified by the Tompkins County Health Department.)

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

1. 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**
2. Monitor for food that is spoiled and/or adulterated and remove from the premise immediately; **and**
3. Cool potentially hazardous foods by approved method where the food temperature can be reduced from 120°F to 70°F or less in two hours and to 45°F within four hours; **and**
4. Store cooked or prepared foods so that it is not subject to cross-contamination from raw foods; **and**
5. Ensure that at least two food service workers attend and successfully complete a food safety training course approved by the TCHD. The current certificates documenting successful completion of the course must be submitted to the TCHD by **October 24, 2022; and**
6. Provide at least one employee who has successfully completed the food safety training on-site during hours of operation. If a trained employee separates from employment, another employee must successfully complete an approved food safety course within 90 days. Training certificates must be retained and made available during an inspection; **and**
7. Comply with all the requirements of Subpart 14-1 of the New York State Code for Food Service Establishments.

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

Signed: _____ Date: 10.3.2022

Big Ko Ko Inc. is hereby ordered to comply with these Orders of the Public Health Director.

Signed: Frank Kruppa Date: 10/6/22
Frank Kruppa
Public Health Director

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

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

CASE SUMMARY – FOR RESOLUTION # EH-ENF-22-0029

Ko Ko Restaurant
Sungyoon Hwang, Big Ko-Ko Inc., Operator
321 College Avenue
Ithaca, NY 14850

October 2022

Date	Action
10/04/2022	Signed stipulation agreement received by TCHD.
08/31/2022	Stipulation agreement sent by TCHD to Ko Ko Restaurant.
07/26/2022	Re-inspection by TCHD. Violations: See attached report.
05/19/2022	Inspection by TCHD. Violations: See attached report.
12/02/2021	Re-inspection by TCHD. Violations cited on 11/09/2021 were corrected. No violations observed.
11/09/2021	Inspection by TCHD. Violations: Potentially hazardous foods were not kept at or below 45°F during cold holding in two locations.
11/22/2019	Field Visit by TCHD. Educational handouts in Korean and Spanish languages provided to operator. Proper cooling techniques were discussed.
11/20/2019	Inspection by TCHD. No violations observed.
06/25/2019	BOH adopts Resolution EH-ENF-19-0021.
04/19/2019	Inspection by TCHD. Violations: Cooked or prepared foods were subject to cross-contamination from raw foods. Potentially hazardous foods were not kept at or below 45°F during cold holding. Potentially hazardous foods were not cooled by an approved method. Potentially hazardous foods were not stored under refrigeration
11/28/2018	Re-inspection by TCHD. Violations cited previously were corrected.
10/29/2018	HACCP inspection by TCHD attended by operator and staff member.
10/19/2018	Inspection by TCHD. Violations: Potentially hazardous foods were not cooled by an approved method. Product used for customer service was observed to be at 60°F. Potentially hazardous foods were not stored under refrigeration. Product stored by a sink in the kitchen was observed to be at 60-62°F. Due to confusion among the kitchen staff regarding approved cooling procedures, TCHD staff conducted further education and demonstration of correct cooling procedures for the staff and operator during the inspection. TCHD agreed to schedule HACCP inspection and then follow up with a re-inspection.
08/28/2018	BOH adopts Resolution EH-ENF-18-0022.
06/20/2018	Inspection by TCHD. Violations: Food on premises was adulterated. Potentially hazardous foods were not cooled by an approved method. Product in the top section of the waitress station cooler was observed to be at 68°F and 128°F. The products

	had been cooked that morning and placed in the unit for service. Enough refrigerated storage was not maintained so that potentially hazardous foods are stored below 45°F. Products in a refrigerated storage unit were observed to be between 51-58°F.
05/22/2018	BOH adopts Resolution EH-ENF-18-0012 requiring Ko Ko Restaurant to pay a penalty of \$400 and 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.
03/21/2018	Re-inspection by TCHD. Violations: Potentially hazardous foods were not kept at or below 45°F during cold holding. Products in cold holding were observed to be at 59°F. Potentially hazardous foods were not kept at or above 140°F during hot holding. Products in hot holding were observed to be at 83°F and 88°F.
03/01/2018	Inspection by TCHD. Violations: Potentially hazardous foods were not kept at or below 45°F during cold holding. Products in cold holding were observed to be at 59-60°F. Enough refrigerated storage was not maintained so that potentially hazardous foods were kept below 45°F in storage. Products in a cold holding unit were observed to be at 59°F.
01/26/2018	Permit to Operate Ko Ko Restaurant issued.

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

Food Service Establishment Inspection Summary Report

Operation: KO KO RESTAURANT (ID: 983068)
Facility Name: KO KO RESTAURANT
Facility Code: 54-AG88-4 Facility Email: kangkt1206@gmail.com
Facility Address: 321 College Avenue, Ithaca, NY 14850

To the Attention of:

Sungyoon Hwang
BIG KO KO INC
321 College Ave
Ithaca, NY 14850
Email: kangkt1206@gmail.com

Re-Inspection

Date: July 27, 2022 03:02 PM
Inspector: Thomas Palmer (tpalmer@tom-pkins-co.org)
Responsible Person: Sungyoon Hwang
Additional Email(s): kmorgan@tom-pkins-co.org

Summary

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

Reinspection is Required

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

IMPROPER COOLING AND REFRIGERATED STORAGE OF POTENTIALLY HAZARDOUS FOODS.

ITEM # 5A WAS FOUND IN VIOLATION 1 TIME(S). CRITICAL VIOLATION

Part or parts of the item were observed to be in violation which were corrected at the time of inspection.

Code Requirements: Potentially hazardous foods are not kept at or below 45°F during cold holding, except smoked fish not kept at or below 38°F during cold holding.

Inspector Findings: At 3:05pm observed a pan of cooked mushrooms and a pan of cooked broccoli in the flip top cold-holding unit by the ice machine at temperatures of 55F and 51F, respectively.

Action: Per interview with staff, all the food out of temperature had been in the unit since 2pm. Being less than 2 hours out of temperature, the food items were moved to the walk-in cooler for rapid cooling.

NO ADDITIONAL VIOLATIONS REPORTED

Additional Information Collected During Inspection

Comments: One part 1 critical violation observed (Item #5A).
No part 2 blue item violations observed.

Item 5B, that was cited from the previous inspection, was not observed during the reinspection.

Reinspection required.

TP/JP



Inspector: Thomas Palmer (tpalmer@tompkins-co.org)

Received by: Sungyoon Hwang

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

Food Service Establishment Inspection Summary Report

Operation: KO KO RESTAURANT (ID: 983068)
Facility Name: KO KO RESTAURANT
Facility Code: 54-AG88-4 Facility Email: kangkt1206@gmail.com
Facility Address: 321 College Avenue, Ithaca, NY 14850

To the Attention of:

Sungyoon Hwang
BIG KO KO INC
321 College Ave
Ithaca, NY 14850
Email: kangkt1206@gmail.com

Inspection

Date: May 19, 2022 11:10 AM
Inspector: Clayton Maybee (cmaybee@tom-pkins-co.org)
Responsible Person: Sungyoonhwang
Additional Email(s): kmorgan@tom-pkins-co.org

Summary

Number of Public Health Hazards Found:	2
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.

IMPROPER COOLING AND REFRIGERATED STORAGE OF POTENTIALLY HAZARDOUS FOODS.

ITEM # 5A WAS FOUND IN VIOLATION 1 TIME(S). CRITICAL VIOLATION

Part or parts of the item were observed to be in violation which were corrected at the time of inspection.

Code Requirements: Potentially hazardous foods are not kept at or below 45°F during cold holding, except smoked fish not kept at or below 38°F during cold holding.

Inspector Findings: Observed a pan containing cooked sprouts and a pan containing cooked broccoli at 52 to 54 degrees F in the top of the flip top in the front (next to the ice machine). The foods had been out less than two hours and were moved to the walk-in cooler for rapid chilling.

Action: Foods in the top of flip top coolers need to be held at 45 degrees F and colder.

IMPROPER COOLING AND REFRIGERATED STORAGE OF POTENTIALLY HAZARDOUS FOODS.

ITEM # 5B WAS FOUND IN VIOLATION 1 TIME(S). CRITICAL VIOLATION

Part or parts of the item were observed to be in violation which were corrected at the time of inspection.

Code Requirements: Potentially hazardous foods are not cooled by an approved method where the food temperature can be reduced from 120°F to 70°F or less within two hours and 70°F to 45°F within four hours.

Inspector Findings: Observed a pan of cooked noodles and a pan of cooked potatoes out when we arrived at 78 to 105 degrees F. The items were cooling, according to interview with the owner, and were moved to a freezer for rapid chilling during the inspection.

Action: Use an approved process that will rapidly reduce temperatures of cooked foods from 120 degrees F to 70 degrees F or less in under two hours and to 45 degrees F or less in an additional four hours or less.

IMPROPER CLEANING, WASHING AND SANITIZING OF EQUIPMENT AND UTENSILS.

ITEM #11B WAS FOUND IN VIOLATION 1 TIME(S).

All or parts of the item are violations.

Code Requirements: Wiping cloths dirty, not stored properly in sanitizing solutions

Inspector Findings: Observed dirty wiping clothes not stored in sanitizer.

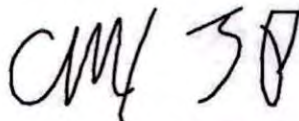
Action: Store cleaning rags in sanitizer solution.

Additional Information Collected During Inspection

Comments: Two Part I Critical Item Violations 5A and 5B
Part II Blue Item Violation 11B

Re-inspection required.

Note: I discussed not placing anything in the drink ice.



Inspector: Clayton Maybee (cmaybee@tompkins-co.org)



Received by: Sungyoonhwang



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

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

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

CERTIFIED, REGULAR, & ELECTRONIC MAIL

October 12, 2022

John O'Leary
Ithaca Ale House
23 Janivar Drive
Ithaca, NY 14850

**Re: Tompkins County Board of Health Draft Resolution # EH-ENF-22-0032
Ithaca Ale House, Food Service Establishment, C-Ithaca**

Dear John O'Leary:

Thank you for signing the Stipulation Agreement on September 26, 2022, for the Ithaca Ale House. Enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, October 25, 2022.**

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 Par 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, and Case Summary

pc: F:\EH\FOOD (SF)\FSE (SF)\Facilities (SF-4)\Ithaca Ale House (New Location)\Enforcement\Draft Res 22-0032.docx
ec: Tompkins County Board of Health (via; Karan Palazzo, TCHD)
City of Ithaca Building Department; Mayor Laura Lewis, Travis Brooks, TC Legislature; TCHD: Elizabeth Cameron, P.E.,
Director of Environmental Health; Frank Kruppa, Public Health Director; Kristee Morgan; Skip Parr; Brenda Coyle
scan: Signed copy to Accela

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

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

DRAFT RESOLUTION # EH-ENF-22-0032

**Ithaca Ale House
Shamrock of Ithaca, Inc., Owner; John O'Leary, Operator
301 E. State Street, Suite 1
Ithaca, NY 14850**

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

Whereas, it is a critical violation of Part 14-1 of the NYSSC to fail to maintain potentially hazardous foods at or below 45°F in cold holding; **and**

Whereas, on August 3, 2022, and August 22, 2022, the Tompkins County Health Department (TCHD) observed critical violations of Subpart 14-1 of the NYSSC where potentially hazardous foods were observed at temperatures between 48°F and 63°F during cold storage; **and**

Whereas, John O'Leary, Owner, signed a Stipulation Agreement with Public Health Director's Orders on September 26, 2022, agreeing that Ithaca Ale House 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 Shamrock of Ithaca, Owner, is ordered to:**

1. Pay a penalty of \$200 for these violations, due by **December 15, 2022**. (**Do Not** submit penalty payment until notified by the Tompkins County Health Department.); **and**
2. Maintain potentially hazardous foods below 45°F in cold holding; **and**
3. Protect food during storage, preparation, display, transportation, and service from potential sources of contamination; **and**
4. Prohibit employee eating and drinking in food preparation areas; **and**
5. Properly store in use wiping cloths in sanitizing solution; **and**
6. Comply with all the requirements of Subpart 14-1 of the New York State Code for Food Service Establishments.



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
Fx: (607) 274-6695

STIPULATION AGREEMENT AND ORDERS # EH-ENF-22-0032

**Ithaca Ale House
Shamrock of Ithaca, Inc., Owner; John O'Leary, Operator
301 E. State Street, Suite 1
Ithaca, NY 14850**

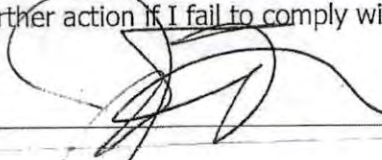
I, John O'Leary, as a representative for Shamrock of Ithaca, Inc., agree that on August 3, 2022, and August 22, 2022, the Ithaca Ale House was in violation of Subpart 14-1 of New York State Sanitary Code for failure to maintain potentially hazardous foods at or below 45°F in cold holding.

I agree to pay a penalty not to exceed \$200 for these violations following adoption of a resolution by the Board of Health. **(Do not submit penalty payment until notified by the Tompkins County Health Department.)**

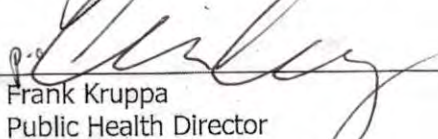
I also agree to comply with the following Orders when signed by the Tompkins County Public Health Director:

1. Maintain potentially hazardous foods below 45°F in cold holding; **and**
2. Protect food during storage, preparation, display, transportation and service from potential sources of contamination; **and**
3. Prohibit employee eating and drinking in food preparation areas; **and**
4. Properly store in use wiping cloths in sanitizing solution; **and**
5. Comply with all the requirements of Subpart 14-1 of the New York State Code for Food Service Establishments.

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

Signed:  Date: 9/26/2022

Shamrock of Ithaca, Inc. is hereby ordered to comply with these Orders of the Public Health Director.

Signed:  Date: 10/6/22
Frank Kruppa
Public Health Director



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

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

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

CASE SUMMARY – FOR RESOLUTION # EH-ENF-22-0032
Ithaca Ale House
Shamrock of Ithaca, Inc., Owner; John O’Leary, Operator
118 N. Aurora Street
Ithaca, NY 14850

October 2022

Date	Action
09/26/2022	Signed stipulation agreement received by TCHD.
09/15/2022	Stipulation agreement sent by TCHD to Ithaca Ale House.
08/27/2022	Re-inspection by TCHD. Violation: See attached inspection report.
08/03/2022	Inspection by TCHD. Violation: See attached inspection report.
3/30/2022	Re-inspection by TCHD. Violation cited on 12/20/21 was corrected. No critical violations were observed.
12/20/2021	Inspection by TCHD. Violation: Potentially hazardous foods were not stored at or above 140°F in hot holding. Violation from 12/03/21 was corrected.
12/03/2021	Field Visit by TCHD. Violation: Potentially hazardous foods were not stored at or below 45°F in cold holding.
10/12/2021	Pre-operational inspection conducted and permit to operate Ithaca Ale House issued.

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

Food Service Establishment Inspection Summary Report

Operation: ITHACA ALE HOUSE (ID: 1075263)
Facility Name: ITHACA ALE HOUSE
Facility Code: 54-AN19 Facility Email: ithacaalehouse@gmail.com
Facility Address: 301 East State Street, Ithaca, NY 14850

To the Attention of:

John O'leary
SHAMROCK OF ITHACA, INC
23 Janivar Drive
Ithaca, NY 14850
Email: ithacaalehouse@gmail.com

Re-Inspection

Date: August 22, 2022 02:26 PM
Inspector: Katherine Walker (kwalker@tom-pkins-co.org)
Responsible Person: John O'leary

Summary

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

Reinspection is Required

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

IMPROPER COOLING AND REFRIGERATED STORAGE OF POTENTIALLY HAZARDOUS FOODS.

ITEM # 5A WAS FOUND IN VIOLATION 1 TIME(S). CRITICAL VIOLATION

Part or parts of the item were observed to be in violation which were corrected at the time of inspection.

Code Requirements: Potentially hazardous foods are not kept at or below 45°F during cold holding, except smoked fish not kept at or below 38°F during cold holding.

Inspector Findings: Observed top layer of approximately 1-1.5 lbs of sliced tomatoes at 60 degrees F and approximately .5 lbs of sliced fresh mozzarella in to be at 63 degrees F. Both items were located in the flip-top cooler across from the pizza oven. Correction: Potentially hazardous cold foods must be kept at or below 45 degrees F at all points of service. Operator voluntarily discarded of items at time of inspection.

NO ADDITIONAL VIOLATIONS REPORTED

Additional Information Collected During Inspection

Comments: Part 1: One critical violation of Item #5A observed.
Part 2: No violations observed.

Item #5A observed during inspection on 8/3/2022 was not corrected.

Board of Health action to follow.



Inspector: Katherine Walker (kwalker@tompkins-co.org)



Received by: John O'Leary

Kristie Morgan 8/22/22

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

Food Service Establishment Inspection Summary Report

Operation: ITHACA ALE HOUSE (ID: 1075263)
Facility Name: ITHACA ALE HOUSE
Facility Code: 54-AN19 Facility Email: ithacaalehouse@gmail.com
Facility Address: 301 East State Street, Ithaca, NY 14850

To the Attention of:

John O'leary
SHAMROCK OF ITHACA, INC
23 Janivar Drive
Ithaca, NY 14850
Email: ithacaalehouse@gmail.com

Inspection

Date: August 3, 2022 11:58 AM
Inspector: Kristee Morgan (kmorgan@tom-pkins-co.org)
Responsible Person: Chef

Summary

Number of Public Health Hazards Found:	1	Certified Food Manager:	No
Number of Public Health Hazards NOT Corrected:	0	<i>A certified food manager is not applicable in all jurisdictions.</i>	
Number of Other Violations Found:	3		

Reinspection is Required

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

IMPROPER COOLING AND REFRIGERATED STORAGE OF POTENTIALLY HAZARDOUS FOODS.

ITEM # 5E WAS FOUND IN VIOLATION 1 TIME(S). CRITICAL VIOLATION

Part or parts of the item were observed to be in violation which were corrected at the time of inspection.

Code Requirements: Enough refrigerated storage equipment is not present, properly designed, maintained or operated so that all potentially hazardous foods are cooled properly and stored below 45°F as required.

Inspector Findings: Observed top layer of approximately one pound of sliced tomatoes in top of flip top cooler across from pizza oven to be at 48-52°F. Top of unit had been open for about the last hour for prep. Product was moved to the lower portion of the cooler to be rapidly chilled to 45°F or less before use. Action: Maintain equipment so that potentially hazardous foods stay below 45°F during cold storage.

FOOD NOT PROTECTED IN GENERAL

ITEM # 8A WAS FOUND IN VIOLATION 1 TIME(S).

All or parts of the item are violations.

Code Requirements: Food not protected during storage, preparation, display, transportation and service, from potential sources of contamination (e.g., food uncovered, mislabeled, stored on floor, missing or inadequate sneeze guards, food containers double stacked)

Inspector Findings: Observed plastic container holding sliced tomatoes stored in ice bin along service line. Lemons were moved to refrigerator. Action: Discontinue storage of products in ice meant for customer drinks.

POOR HYGIENE AND ACTIVITIES OF FOOD WORKERS.

ITEM # 9B WAS FOUND IN VIOLATION 1 TIME(S).

All or parts of the item are violations.

Code Requirements: Tobacco is used; eating, drinking in food preparation, dishwashing food storage areas

Inspector Findings: Observed open employee beverage stored between coolers on line. Action: Provide lids and straws for beverages and store in designated area away from food prep and storage. Employees must wash hands after eating or drinking and prior to working with food.

IMPROPER CLEANING, WASHING AND SANITIZING OF EQUIPMENT AND UTENSILS.

ITEM #11B WAS FOUND IN VIOLATION 1 TIME(S).

All or parts of the item are violations.

Code Requirements: Wiping cloths dirty, not stored properly in sanitizing solutions


Inspector Findings: Observed in use wiping cloth stored on counter in bar. Action: Provide bucket with sanitizer for storage of in use wash cloths.

Additional Information Collected During Inspection

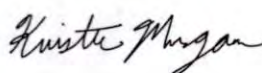
Comments: Part I - Item 5E sited. Reinspection required.
Part II - Three items cited.



Inspector: Kristee Morgan (kmorgan@tompkins-co.org)



Received by: Chef

 8/3/22



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

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

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

CERTIFIED, REGULAR, & ELECTRONIC MAIL

October 12, 2022

Fernando Aguirre
Old Mexico
357 Elmira Road
Ithaca, NY 14850

**Re: Tompkins County Board of Health Draft Resolution # EH-ENF-22-0034
Old Mexico, C-Ithaca – Violation of Board of Health Orders**

Dear Fernando Aguirre:

On September 28, 2021, and January 25, 2022, the Tompkins County Board of Health adopted Resolutions #EH-ENF-21-0006 and EH-ENF-21-0022 respectively requiring you to; provide an adequate amount of refrigerated storage to maintain potentially hazardous foods below 45°F and maintain temperature logs for refrigerated storage equipment as prescribed by the Tompkins County Health Department.

On September 7, 2022, Tompkins County Health Department (TCHD) staff observed critical violations of Subpart 14-1 of the NYSSC. These are violations of Board of Health Orders.

Enclosed is a copy of the Draft Resolution that the Tompkins County Board of Health will consider at its meeting on **Tuesday, October 25, 2022**. You or a representative has the right to speak to the Board for a few minutes prior to them taking action. If you wish to speak to the Board, please contact Skip Parr or me at (607) 274-6688 at least one day before the meeting. If you plan to attend, please arrive by 12:00 p.m. (noon).

Sincerely,

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

Enclosures – Draft Resolution, BOH Orders # EH-ENF-21-0022, and Case Summary

pc: F:\EH\FOOD (SF)\FSE (SF)\Facilities (SF-4)\Old Mexico\Enforcement\September 2022\Draft Res 22-0034.docx
ec: Tompkins County Board of Health (via; Karan Palazzo, TCHD)
Ithaca Building Department; Travis Brooks, TC Legislature; TCHD: Elizabeth Cameron, P.E., Director of Environmental Health; Frank Kruppa, Public Health Director; Kristee Morgan; Skip Parr; Brenda Coyle
scan: Signed copy to Accela

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

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

DRAFT RESOLUTION # EH-ENF-22-0034 FOR

Old Mexico
357 Elmira Road LLC., Owner; Fernando Aguirre, Operator
357 Elmira Road
Ithaca, NY 14850

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

Whereas, it is a critical violation of Part 14-1 of the NYSSC to:

- Fail to maintain or provide enough cold holding equipment to hold potentially hazardous foods at or below 45°F during cold holding; **and**
- Fail to provide and use an accurate food probe thermometer to evaluate temperatures of potentially hazardous foods; **and**
- Fail to store potentially hazardous food under refrigerated storage; and
- Fail to maintain potentially hazardous foods above 140°F in hot holding; **and**

Whereas, on September 28, 2021, Tompkins County Board of Health (TCHD) Resolution #ENF-21-0006 ordered Fernando Aguirre to provide an adequate amount of refrigeration storage to maintain potentially hazardous food at or below 45°F at all times during cold holding; **and**

Whereas, on January 25, 2022, the Tompkins County Board of Health Resolution #ENF-21-0022 ordered Fernando Aguirre to:

- Comply with requirements of ENF-21-0006; **and**
- Provide and maintain enough refrigerated storage equipment so that potentially hazardous foods can be held at or below 45°F in cold holding; **and**
- Maintain temperature logs for refrigerated storage equipment; **and**

Whereas, on September 7, 2022, the Tompkins County Health Department (TCHD) observed the following critical violations:

- No food probe thermometer was available or being used to evaluate temperatures of potentially hazardous foods; **and**
- Potentially hazardous foods were not stored under refrigeration, about three pounds of chorizo were observed to be held at 68°F; **and**
- Two refrigerated storage units were observed to be holding foods at temperatures greater than 45°F; **and**
- A hot holding unit was observed to be holding foods at 132-136°F, **and**

Whereas, on September 7, 2022, Old Mexico Restaurant violated these provisions of the New York State Sanitary Code and the provisions of Board of Health Resolutions #ENF-21-0006 and ENF-21-0022 were not met; **now therefore be it**

**Resolved, on recommendation of the Tompkins County Board of Health,
That Fernando Aguirre, Operator, is ordered to:**

1. Pay a penalty of \$2,800 for these violations, **due by December 15, 2022.** (**Do Not** submit penalty payment until notified by the Tompkins County Health Department.); **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**
3. Provide and maintain enough refrigerated food storage equipment to maintain potentially hazardous foods below 45°F in cold holding; **and**
4. Provide and use accurate food probe thermometers for measuring temperatures of potentially hazardous foods during cooking, cooling, preparation, and service; **and**
5. Ensure that at least two food service workers attend and successfully complete a food safety training course approved by the TCHD. The current certificates documenting successful completion of the course must be submitted to the TCHD by **December 15, 2022; and**
6. Provide at least one employee who has successfully completed the food safety training must be on-site during hours of operation. In the event that a trained employee separates from employment, another employee must successfully complete an approved food safety course within 90 days. Training certificates must be retained and made available during an inspection; **and**
7. Comply with all the requirements of Subpart 14-1 of the New York State Code for Food Service Establishments.



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

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

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RESOLUTION # EH-ENF-21-0022 FOR

**Old Mexico
357 Elmira Road LLC., Owner; Fernando Aguirre, Operator
357 Elmira Road
Ithaca, NY 14850**

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

Whereas, it is a critical violation of Part 14-1 of the NYSSC to fail to maintain or operate enough refrigerated storage equipment so that all potentially hazardous foods are cooled properly and store at a temperature below 45°F; **and**

Whereas, on September 28, 2021, Tompkins County Board of Health (TCHD) Resolution #ENF-21-0006 ordered Fernando Aguirre to provide an adequate amount of refrigeration storage to maintain Potentially Hazardous Food at or below 45°F at all times during cold holding; **and**

Whereas, on December 2, 2021, the TCHD observed potentially hazardous foods stored at temperatures between 65°F and 69°F during cold storage; **and**

Whereas, on December 2, 2021, Old Mexico violated these provisions of the NYSSC and the provisions of Board of Health Resolution #ENF-21-0006 were not met; **now therefore be it**

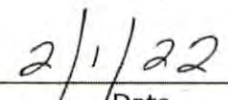
**Resolved, on recommendation of the Tompkins County Board of Health,
That Fernando Aguirre, Operator, is ordered to:**

1. Pay a penalty of \$800 for these violations, **due by March 15, 2022; and**
2. Provide proof of repair of existing food preparation cooler 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 January 15, 2022; **and**
3. Provide an adequate amount of refrigeration storage to maintain Potentially Hazardous Food at or below 45°F at all times; **and**
4. Maintain temperature logs for refrigerated storage equipment as prescribed by the Tompkins County Health Department; **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 January 25, 2022.



Frank Kruppa
Public Health Director



Date

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

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

CASE SUMMARY – FOR RESOLUTION # EH-ENF-22-0034
Old Mexico
357 Elmira Road LLC., Owner; Fernando Aguirre, Operator
355 Elmira Road
Ithaca, NY 14850

October 2022

Date	Action
9/07/2022	Inspection by TCHD. See attached inspection report.
3/08/2022	Inspection by TCHD. No violations observed.
01/25/2022	Tompkins County Board of Health adopts resolution EH-ENF-21-0022
12/02/2021	Inspection by TCHD. Enough refrigerated storage equipment was not maintained to keep potentially hazardous foods below 45°F during cold holding. Products in cold holding were observed to be at 65-69°F.
09/28/2021	Tompkins County Board of Health adopts resolution EH-ENF-21-0006
07/26/2021	Re-inspection by TCHD. Violation: Enough refrigerated storage not maintained to keep potentially hazardous foods below 45°F during cold holding. Products in cold holding were observed to be at 47-62°F.
06/28/2021	Inspection by TCHD. Violation: Enough refrigerated storage not maintained to keep potentially hazardous foods below 45°F during cold holding. Products in cold holding were observed to be at 47-62°F.
11/05/2019	Inspection by TCHD. No critical violations were observed.
04/10/2019	Re-inspection by TCHD. Violations cited on 3/06/2019 were corrected. No violations were observed.
03/06/2019	Inspection by TCHD. Violation: Potentially hazardous foods were not cooled by an approved method.
12/03/2018	Inspection by TCHD. No critical violations were observed.
08/14/2018	Re-inspection by TCHD. Violation cited on 06/13/2018 was corrected. No violations observed.
06/13/2018	Inspection by TCHD. Violations: Enough refrigerated storage not maintained to keep potentially hazardous foods below 45°F during cold holding. Products in cold holding were observed to be at 65-67°F. Potentially hazardous foods were not kept above 140°F during hot holding. Products in hot holding were observed to be at 105-107°F.
10/03/2017	Re-inspection by TCHD. Violation cited on 08/30/2017 was corrected. No violations observed.
08/30/2017	Inspection by TCHD. Violations: Potentially hazardous foods were not kept above 140°F during hot holding. Products in hot holding were observed to be at 82-86°F.
03/07/2017	Inspection by TCHD. No critical violations were observed.
10/03/2016	Re-inspection by TCHD. Violation cited on 10/03/2016 was corrected. No violations observed.

09/01/2016	Inspection by TCHD. Violation: Potentially hazardous foods were not kept at or below 45°F during cold holding. Products in refrigerated storage were observed to be at 50-54°F.
01/29/2016	Inspection by TCHD. No critical violations were observed.
06/25/2015	Permit to operate Old Mexico issued.

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

Food Service Establishment Inspection Summary Report

Operation: OLD MEXICO (ID: 898305)
Facility Name: OLD MEXICO
Facility Code: 54-AB92 Facility Email: oldmexicoithaca@gmail.com
Facility Address: 357 Elmira Road, Ithaca, NY 14850

To the Attention of:

Fernando Aguirre
355 ELMIRA ROAD, LLC
357 Elmira Rd
Ithaca, NY 14850
Email: oldmexicoithaca@gmail.com

Inspection

Date: September 7, 2022 12:05 PM
Inspector: Rene Borgella (rborgella@tom-pkins-co.org)
Responsible Person: Martha Torres

Summary

Number of Public Health Hazards Found: 5
Number of Public Health Hazards NOT Corrected: 0
Number of Other Violations Found: 4

Reinspection is Required

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

FOODS NOT PROTECTED FROM CONTAMINATION, TEMPERATURES NOT MEASURED.

ITEM # 2E WAS FOUND IN VIOLATION 1 TIME(S). CRITICAL VIOLATION

Part or parts of the item were observed to be in violation which were corrected at the time of inspection.

Code Requirements: Accurate thermometers not available or used to evaluate potentially hazardous food temperatures during cooking, cooling, reheating and holding.

Inspector Findings: Observed: No probe thermometers were available for use in kitchen.

Correction: Inspector provided facility with a probe thermometer and demonstrated to manager and kitchen staff how to test and calibrate it.

Action: Food operations are required to have accurate, working probe thermometers to regularly monitor food temperatures and ensure adequate cooking, safe storage, and properly operating equipment.

IMPROPER COOLING AND REFRIGERATED STORAGE OF POTENTIALLY HAZARDOUS FOODS.

ITEM # 5C WAS FOUND IN VIOLATION 1 TIME(S). CRITICAL VIOLATION

Part or parts of the item were observed to be in violation which were corrected at the time of inspection.

Code Requirements: Potentially hazardous foods are not stored under refrigeration except during necessary preparation or approved precooling procedures (room temperature storage).

Inspector Findings: Observed: On the end of cooking line where grill station is, over the unheated portion (right side as one looks at it) of grill, approx 3 lbs of chorizo meat was at 68°F. Interview with staff person indicated that their practice is that the chorizo is kept at that location, and when an order arrives a portion is heated on grill for service.

Correction: Operator voluntarily discarded the chorizo.

Action: Temperature controlled food items must be held at or below 45°F or at 140°F or above.

IMPROPER COOLING AND REFRIGERATED STORAGE OF POTENTIALLY HAZARDOUS FOODS.

ITEM # 5E WAS FOUND IN VIOLATION 2 TIME(S). CRITICAL VIOLATION

Part or parts of the item were observed to be in violation which were corrected at the time of inspection.

Code Requirements: Enough refrigerated storage equipment is not present, properly designed, maintained or operated so that all potentially hazardous foods are cooled properly and stored below 45°F as required.

Inspector Findings: Two Instances of this Violation

1) Observed: Flip-top cooler directly opposite grill had cooked rice in cold holding in the flip top area at 56°F. Interview with staff member indicated that the rice had been taken out of walk-in cooler and placed in low boy unit approx 3 hours before inspection. Other items in Flip-top were all at or close to 46°F. Staff also indicated that unit had been working poorly recently. Inspector also observed water collecting on the bottom shelf of unit. Food containers were all on baking sheets which were placed on bottom of cooler.

Correction: Rice was discarded, all the temperature controlled items were moved to adjacent cooler which was operating at appropriate temperatures.

2) Observed: In walk in cooler at rear of restaurant, milk, cheese and sour cream were at 53°F. Other temperature controlled items were also at similar temperatures. Staff informed inspector that this refrigeration unit had just been recently repaired. Staff indicated milk and other dairy products that were in this cooler had just been delivered about 45 mins before inspection; inspector did observe a refrigerated food delivery was just completed as he arrived.

Correction: All temperature controlled items were all moved to adjacent freezer for rapid cooling while awaiting the return of refrigeration maintenance personnel.

Action: Refrigeration Equipment must be capable of maintaining temperatures of 45°F or less.

IMPROPER HOT HOLDING OF POTENTIALLY HAZARDOUS FOODS.

ITEM # 6B WAS FOUND IN VIOLATION 1 TIME(S). CRITICAL VIOLATION

Part or parts of the item were observed to be in violation which were corrected at the time of inspection.

Code Requirements: Enough hot holding equipment is not present, properly designed, maintained and operated to keep hot foods above 140°F.

Inspector Findings: Observed: In hot holding box by the cooking range, full hotel pans of beans (2-3), rice (2), and other temperature controlled foods being held were at 132-136°F. Interview with operator indicated all of these items were heated on the stove and then moved to hot box approximately 30 - 45 mins before inspection. Inspector observed that both doors of hot box unit did not close well enough to seal the unit when doors are closed.

Correction: Items were removed from hot box and re-heated on the stove to 165°F or above before being placed in hot box. Inspector explained that staff must monitor temperatures of foods in hot box to determine if thermostat temperature needs to be adjusted.

Action: Temperature controlled items in hot holding must be kept at 140°F or above after being reheated to 165°F or more.

IMPROPER CLEANING, WASHING AND SANITIZING OF EQUIPMENT AND UTENSILS.

ITEM #11B WAS FOUND IN VIOLATION 1 TIME(S).

All or parts of the item are violations.

Code Requirements: Wiping cloths dirty, not stored properly in sanitizing solutions

Inspector Findings: Observed: No sanitizing solution was prepped and available for use in kitchen. Only one wiping cloth available and it was extremely dirty

Correction: Sanitizing solution was prepared.

Action: Sanitizing solution prepared with approved chemicals are required for food service.

IMPROPER CLEANING, WASHING AND SANITIZING OF EQUIPMENT AND UTENSILS.

ITEM #11D WAS FOUND IN VIOLATION 1 TIME(S).

All or parts of the item are violations.

Code Requirements: Non food contact surfaces of equipment not clean

Inspector Findings: Observed: At main cook station, there's a shelf where orders are placed to be picked up by wait staff to serve the customers. Above the shelf are two long lengths of heating lamps. The upper surface of the heating lamp fixture are dirty with grease and dust accumulation (see attached pictures).

IMPROPER SANITARY FACILITIES AND CONTROLS.

ITEM #12E WAS FOUND IN VIOLATION 1 TIME(S).

All or parts of the item are violations.

Code Requirements: Handwashing facilities inaccessible, improperly located, dirty, in disrepair, improper fixtures, soap, and single service towels or hand drying devices missing

Inspector Findings: Observed: Hand wash sink had no soap available and there was a bucket in the sink itself.
Action: Food service facilities are required to have operating hand wash sinks with soap and paper towels or electric dryers for food service personnel.

IMPROPER CONSTRUCTION AND MAINTENANCE OF PHYSICAL FACILITIES.

ITEM #15A WAS FOUND IN VIOLATION 1 TIME(S).

All or parts of the item are violations.

Code Requirements: Floors, walls, ceilings, not smooth, properly constructed, in disrepair, dirty surfaces

Inspector Findings: Observed: Roof is leaking above the doorway leading from back of prep kitchen to coolers/pantry.

Additional Information Collected During Inspection

Comments: Part 1: Five critical violations
Part 2: Four violations

Comments.

Each time the inspector visits this facility, there is a concern at the one and only hand wash sink available in kitchen. During this inspection, there was no soap available at the hand wash sink and there was a bucket in the sink as well. Once again, inspector explained the importance of maintaining the hand wash sink for maintaining sanitation at a facility where food, including chicken, is prepared. The next time this violation is cited it will go to enforcement for repeated violations of the sanitary code.

Regarding the chorizo being held at room temperature. Inspector explained to staff that as a temperature controlled food item, the chorizo must either be held at 45°F in cold holding, or kept at 140° or above in hot holding.

Because several of the temperature holding units (coolers and hot box) in the facility are not operating correctly, staff should monitor refrigeration and hot box temperatures regularly to ensure proper operation and that foods are being held at required temperatures.

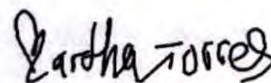
Once again, inspector gave the manager and staff NYSDOH and TCEH food safety materials in Spanish. Inspector discussed, in Spanish, the rules for heating, hot holding, cooling and cold holding to the kitchen staff present and manager. Facility was also given information on requirements for sanitizing solution and the use of wiping cloths in food service. Inspector answered questions and explained details regarding these aspects of food safety. Inspector observed some of the previously dispensed Spanish language guidance hanging on the kitchen walls. He reminded the staff that these documents can serve as a helpful reminder for the correct temperatures and procedures and encouraged staff and management to ask questions for help and clarification as needed.

Roof leaking must be addressed to prevent water contaminating food or food preparation areas.

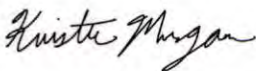
Reinspection Required. Board of Health Actions to Follow.






Inspector: Rene Borgella (rborgella@tompkins-co.org)



Received by: Martha Torres



9/7/2022

Photo	Caption
	<p data-bbox="857 455 1138 485">Cheese in walk in cooler</p>
	<p data-bbox="857 1034 1458 1064">dust and grime on heat lamp hood over serving shelf</p>
	<p data-bbox="857 1630 1458 1659">dust and grime on heat lamp hood over serving shelf</p>