

**HEALTH AND HUMAN SERVICES COMMITTEE**  
**OF THE**  
**SUFFOLK COUNTY LEGISLATURE**

**Verbatim Transcript**

A regular meeting of the Health and Human Services Committee of the Suffolk County Legislature was held in the Rose Y. Caracappa Legislative Auditorium of the William H. Rogers Legislature Building, 725 Veterans Memorial Highway, Smithtown, New York on Thursday, July 28, 2011 at 2:00 p.m.

**MEMBERS PRESENT:**

Legislator Kate Browning, Chair  
Legislator Vivian Vilorio-Fisher, Vice Chair  
Legislator Jack Eddington  
Legislator John Kennedy

**ALSO IN ATTENDANCE:**

Presiding Officer William J. Lindsay  
Legislator Ed Romaine, First Legislative District  
Legislator Wayne Horsley, Fourteenth Legislative District  
George Nolan, Counsel to the Legislature  
Sarah Simpson, Assistant Counsel to the Legislature  
Renee Ortiz, Legislative Chief Deputy Clerk  
Gail Vizzini, Director of Legislative Budget Review Office  
Diane Dono, Legislative Budget Review Office  
Paul Perillie, Aide to Majority Caucus  
Marge Acevedo, Aide to Presiding Officer Lindsay  
Michael Pitcher, Aide to Presiding Officer Lindsay  
Nancy Armstrong, Aide to Legislator Cooper  
Dennis Brown, County Attorney's Office  
Ed Hernandez, Deputy Commissioner, Department of Social Services  
Linda O'Donohoe, Department of Social Services  
Dr. James Tomarken, Commissioner, Suffolk County Health Department  
Walter Dawydiak, Suffolk County Health Department  
Vito Minei, Cornell Cooperative Extension  
Nancy Olsen-Harbich, Cornell Cooperative Extension  
Alysa Ferguson, Cornell Cooperative Extension  
Anne Kellett, Public Health Nurses Professional Advisory Committee  
Mary Finnin  
Carol Bosch  
Philip Weiden, LIBOR Legislative Liaison.  
Richard Koubek, Welfare to Work Commission  
Barbara Magaliff  
Shelley Magaliff  
All Other Interested Parties

**MINUTES TAKEN AND TRANSCRIBED BY:**

Lucia Braaten, Court Stenographer

*(\*The meeting was called to order at 2:22 P.M. \*)*

**CHAIRPERSON BROWNING:**

Okay. We have three Legislators, we'll start. If everyone could please rise for the Pledge of Allegiance led by Legislator Eddington.

*(\*Salutation\*)*

Okay, thank you. Okay, now we've got everybody here. Okay. I see a Newsday reporter here and I think it would be wonderful if you could take this back. First of all, I'd like to say a special thank you to Newsday and to Channel 12, because we had a bone marrow drive in my district for a six-year-old little girl and a phenomenal response and the outreach through the media was amazing. We had -- a lady rode her bicycle from Woodbury to come to the drive. It was amazing. People from Bay Ridge, New Jersey. It was amazing.

However, in light of that, you know, I learned about a lady by the name of Donna Branigan, July 31st, at the Miller Place Fire Department. Mrs. Branigan is -- currently she has cancer and they're running a bone marrow drive, like a said, July 31st at the Miller Place Fire Department. I also received an e-mail from Mrs. Marcia {Jabbick}.

She is a breast cancer survivor and now dying of a rare form of chronic -- I can't even say -- CML. She -- there is also a bone marrow drive 7/30, which I believe is on Saturday, at the Deer Park Community Center. I know that they've reached out to all of the Legislators, but I think it's so important, when I see what happened with Nora and the outreach that we got, I would like to think and I hope that the media will continue to put these bone marrow drives in the media. Because a good friend of mine was just diagnosed with ALL, so there are so many people that we're hearing about in need of bone marrow transplants, and we need to try and get as many people as possible on that bone marrow registry, because it seems like it's happening way too often. So maybe our Newsday reporter would take that back and we can get you the information on the one in Deer Park. So it's, again, seven -- it's Saturday, this Saturday, at the Deer Park Community Center. So with that, I think I've done my advertisements, but I can't stress enough the importance of bone marrow donors.

We will start with our cards, the public portion. Everyone has three minutes to speak, and the first speaker is Carol Bosch.

**MS. BOSCH:**

Hi. My name is Carol Bosch. I'm here to talk to you about a situation I had with the Department of Social Services. I have a house in Selden that I rent and I rented it to a single mom with kids. After one year when I went to renew the lease, I realized she had destroyed my house inside and out. I had to have her evicted. It took over two months. It was a good two-and-a-half months before she finally left my house. When we got in there it was destroyed, all the moulding ruined, mildew, mold in the plants growing in the windows, you couldn't even get in the property.

So anyway, we repaired the house, it cost me over thirty-five hundred dollars in damages. I have an attorney. I had lost rent. Finally she left, I moved on, I rented the house out. Six months later I got a letter from the Department of Social Services requesting their security deposit back. I sent them a letter, explained the situation. I got another letter back saying that it didn't matter because I should have let them know within seventy-two hours that she had vacated the premises. I had no idea when she vacated the premises. I live in Blue Point, I'm a Registered Nurse, I work two jobs, I can't drive by Selden every day to check on the house. And here I stand, I had to call my County Legislator to help me deal with the Department of Social Services after I tried to just do a decent thing and rent it to a woman in need. And I'm just at a complete loss. Thank you.

**LEG. EDDINGTON:**

Madam Chair?

**CHAIRPERSON BROWNING:**

Legislator Eddington.

**LEG. EDDINGTON:**

Yeah. Carol, so when you came to me, what I -- what I felt when you were telling me is that you tried to do the right thing and go with DSS, which you hadn't done in the past.

**MS. BOSCH:**

No.

**LEG. EDDINGTON:**

And you had an ongoing problem, and obviously you're right, you don't live there so you can't watch -- you did tell me, though, am I correct, that weren't allowed in the premises, they wouldn't allow you to check on anything?

**MS. BOSCH:**

Right. At one point, when I contacted my attorney she told me to not go on the property, even though I pay the taxes, I pay the homeowner's insurance. Then I got a letter from the Nassau/Suffolk Lawyers group, they representing her, telling me do not go on your own property, do not attempt to evict her, you have to go through legal channels, which is what I was doing. But when I went by the property, there was a propane tank hooked up to my gas tank, I could see it from the street, trees going in the windows. It was really scary. She built an illegal room in the basement, her caseworker told me. I was afraid for my own property and it took over two-and-a-half months for me to get in there.

**LEG. EDDINGTON:**

I'm wondering if I -- can we have Mr. Hernandez come forward? I know he has the case with him and I'd like to hear what the -- how this is going to be taken care of.

**CHAIRPERSON BROWNING:**

Sure, I guess so.

**LEG. EDDINGTON:**

Carol, why don't you just sit there, stay there while he --

**MS. BOSCH:**

Certainly.

**MR. HERNANDEZ:**

Good afternoon. I'm going to unfortunately have to go through a little history, because this case is unfortunately caught up in this history. So just to give you --

**LEG. EDDINGTON:**

Could you say that again, a little louder?

**MR. HERNANDEZ:**

I'm going to have to give you a little history on where this is coming from before I can talk about the specifics of the case, so you just understand what the situation is, because I don't want it to be meant as a personal affront against Mrs. Bosch of what's going on here.

So in order to -- when a client comes to us for permanent housing, or actually even if they apply for

emergency assistance to adults, they can get assistance in moving into a place, which can either be cash security deposit or what we call a security agreement, a piece of paper saying that if anything happens, we'll give you a month's rent, two months rent, whatever we agree upon with the landlord upon the tenant leaving. We do this for all the families. I think right now we have about twenty-five hundred outstanding security deposits. We took a collection effort, internal review to do some collections on some of that money in the last couple of years, and a lot of people are getting letters now from credit -- collections agencies.

Basically, they sign an agreement, this is a copy of Mrs. Bosch's agreement. On the back, it says the landlord -- the conditions on the back say, "The landlord agrees to notify DSS within seventy-two hours after the tenant leaves," as Mrs. Bosch correctly said. And it says, "Any claims must be submitted within ten days." Now, we don't hold firm to that ten days, we wait a month or more sometimes to work with the landlords, because we know there are situations like this. However, since we had a number of outstanding security deposits that we were trying to recoup, a blanket effort was taken. And what we're doing, on a case-by-case basis, such as a case like this, reviewing the files, because a lot of times people rent to DSS landlords -- I mean DSS clients and may not have the best experience in terms of being the landlord. So if there are extenuating circumstances or whatever, you know, we have the option of perhaps not following through on the collection.

**LEG. EDDINGTON:**

Okay. So are you basically saying that's where you're at now or you're not?

**MR. HERNANDEZ:**

The file is sitting on the Housing Administrator's desk for review and, you know, a decision will be forthcoming, whether or not the deposit's going to be returned. Legally, again, on the back, the conditions are there, but as I said, sometimes there's unsuspecting landlords. Obviously, anybody's who's been in business with us for a while that needs to be collected on, we're not going to be in a forgiving mood. But in certain cases we can forgive it. And I can't speak whether that will actually be the end result, but I can say the file will be reviewed through the history and the conditions and the circumstances.

**CHAIRPERSON BROWNING:**

Okay. Go ahead, Bill.

**P.O. LINDSAY:**

Ed, who -- do we sign the lease with the landlord or does the client?

**MR. HERNANDEZ:**

We don't sign the actual lease, the lease is between the tenant and the landlord. However, we do assist people in moving. So a lot of times people on public assistance, and it's permitted within regulation, don't have security deposits or brokers fees. We're allowed under regulation to pay those and we do those to facilitate tenants moving in. So if we were to facilitate the move, not only would we possibly pay security deposit and a broker's fee, we would also inspect the premises for health and safety conditions.

**P.O. LINDSAY:**

When they move in.

**MR. HERNANDEZ:**

Prior to them moving in, yes.

**P.O. LINDSAY:**

Okay.

**MR. HERNANDEZ:**

Plus --

**P.O. LINDSAY:**

Do we do an inspection when the tenant moves out?

**MR. HERNANDEZ:**

If the landlord is requesting their security deposit back, we will within ten days send an inspector out to inspect the premises and verify any damages.

**P.O. LINDSAY:**

Okay.

**LEG. EDDINGTON:**

Because now we're familiar with now -- and Carole, I mean, you can verbalize this. But what I'm hearing is she was told to stay away from the premises, she didn't know when the woman vacated, so it becomes very clear that she can't tell you in ten days when she doesn't know exactly. Carol?

**MS. BOSCH:**

I would like to say two things. Yes, I signed a piece of paper that said I would notify DSS within seventy-two hours of her vacating. This is the folder that I have just trying to get my house in compliance with DSS so that I could rent it to this woman, and this is the thickness of my folder just dealing with this woman. When my house is destroyed, and I mean destroyed, I'm not remembering a year-and-a-half ago I signed a piece of paper letting someone know within seventy-two hours.

And also, when this first began, I called the Department of Social Services and I was told that they do not do inspections while the tenant still lives on the property.

**LEG. EDDINGTON:**

So just it sounds to me, Legislator Browning, like this is just a situation where a person that -- no good deed goes unpunished.

Here's what I'm going to ask. I'm going to ask that the Department of Social Services resolve this issue in a timely fashion. And I mean timely as two weeks from today when we have another meeting, I'd like you to come here, I'm going to ask her to try to come and I want to see a smile on her face because it's been resolved in an adequate way. And I don't think you have to have a Master's Degree or a Doctorate in Social Work to know what the right thing to do here is. So it's very easy for me to advocate for her because I've looked through the stuff. And when our department allows a woman like this, who's tried to do the right thing, to be abused, it hurts all of us, because we desperately want to help the people that you help. But how are we going to get good people to do it when she walks away with a terrible experience? She's not ever going to do this again and none of her friends are going to do this again. So you have to do the right thing.

And if you're telling me you don't have the staff to review these, well, then that's maybe an issue, you've got to ask the County Executive to hire more people. But this is not something that should be sitting there and sitting there and sitting there. And I have to tell you, it's not you, but it's kind of like the department has like an attitude like, "Well, we'll get to it when we get to it." She's living it. So I'm saying I want this to be resolved by the next meeting, one way or the other. And if it's not done one way, you'll be hearing from me again.

**MR. HERNANDEZ:**

Okay.

**CHAIRPERSON BROWNING:**

Okay. Ed, security deposit; so you paid the security deposit on this rental.

**MR. HERNANDEZ:**

On this rental we paid eleven hundred and sixty dollars cash security.

**CHAIRPERSON BROWNING:**

Okay. And when you -- I know that when you pay a security deposit, you're required to inspect the home prior to the rental; am I correct?

**MR. HERNANDEZ:**

That is correct.

**CHAIRPERSON BROWNING:**

And if there's damage to the home, who pays for the damage?

**MR. HERNANDEZ:**

Well, the prior inspection, the inspection prior to move-in is just health and safety, all the conditions have to be corrected that it meets the New York State Building Codes. Afterwards, it's the landlord that's responsible to fix up the property. We could only reimburse Ms. Bosch to the extent of the security deposit, eleven hundred and sixty dollars.

**CHAIRPERSON BROWNING:**

And at no time throughout the year you can't go in and inspect the home?

**MR. HERNANDEZ:**

Generally, it's not been the department's policy to do ongoing health and safety inspections. We have to inspect hundreds of homes every month between the move-ins for DSS, we do twice a year shelter inspections; now that we're going to do the sober home oversight bill, we're going to be tasked with inspecting sober homes twice a year that are under the program. So there's a lot of caseload.

There are several thousand people that receive public assistance shelter benefits. So, you know, we would need an army of inspectors to go out and inspect the premises on an annual basis. However, if there's a complaint from the tenant, we do go and inspect. If the tenant says -- or a Legislator as well, the cesspool's overflowing into the street, we'll send an inspector over there. The town contacts us about illegal conditions, we'll send an inspector out there. But on a regular ongoing basis, we don't do the health and safety inspections for permanent housing.

**CHAIRPERSON BROWNING:**

Okay. And my question is say you have a DSS client, they rented from this lady, they destroyed her home, now they're going to have to look for somewhere else to live, they're going to go to maybe that next home, destroy that home. At one point can you sanction that person because they're not living up to requirements, or is there something you can put on the form to the tenant and to the landlord, some kind of a beware. That sounds terrible to say beware, but --

**MR. HERNANDEZ:**

Unfortunately, the shelter benefit is an entitlement that they're entitled to. Look, I came from the not-for-profit world before I came to DSS, and a large number of tenants we rented to were Social Services clients, and I have enough stories to keep you entertained for a half hour in terms of --

**CHAIRPERSON BROWNING:**

Oh, I've got stories too and you know I do.

**MR. HERNANDEZ:**

-- damages that were left for us to take care of; you know, it is unfortunate. And that's some of the difficulty we have in finding rentals, because our clients, some of our clients are not the best tenants.

**CHAIRPERSON BROWNING:**

Legislator Romaine.

**LEG. ROMAINE:**

I'm not a member of this committee, but thank you. I have just one question for Mr. Hernandez. What happens to the tenant that moved without notifying Social Services? Are you obligated, if she reapplies for Social Service benefits including housing, to give her benefits in light of her conduct?

**MR. HERNANDEZ:**

There is a provision in the regulations that says we can recoup any damages that -- they can be taken out of the client's benefits. I would really have to look into if that's actually done or not on a regular basis.

**LEG. ROMAINE:**

Are you going to be looking into doing it in this particular case?

**MR. HERNANDEZ:**

Now that you've brought it to our attention, yes.

**LEG. ROMAINE:**

That should have been automatic. I'm surprised by the answer, but I'm happy to see that at least you're going to look into it. Thank you.

**CHAIRPERSON BROWNING:**

Yes, Mrs. -- I forgot your name.

**MS. BOSCH:**

Bosch.

**CHAIRPERSON BROWNING:**

Bosch.

**MS. BOSCH:**

I would just like to say one more thing. I would like to sum up what this gentleman just said. The recipient of the DSS services has all the rights in the world, and the minute she moved into my house, I pay the taxes, insurance, I had no rights whatsoever. If there was a fire in my house with an illegal room built in that basement, I would be out of -- my kids would drop out of college, I'd have nothing if something happened in that house. So she gets all the rights and we get none.

And also, just when he says about the, you know, eleven hundred and sixty dollars? I'm out \$6,850, and now I should be out another eleven hundred and sixty.

**CHAIRPERSON BROWNING:**

Well, I can tell you, I deal with this on a regular basis in my district, so I know exactly what you're saying. And basically what's going to happen is you're never going to do it again, you're never going to rent to a DSS client and, you know, shame on the tenant for doing what they're doing.

**D.P.O. VILORIA-FISHER:**

Right.

**CHAIRPERSON BROWNING:**

Vivian?

**MS. BOSCH:**

Thank you.

**D.P.O. VILORIA-FISHER:**

I just have a question about this for either Ms. Bosch or Mr. Hernandez. I understand there are some landlords who don't deal directly, will have a management company and their management company checks out the premises; is there such a thing? Or maybe --

**MR. HERNANDEZ:**

Any time we give a cash security deposit or a broker's fee, it is a DSS Inspector that goes out and inspects the house for health and safety. The only other people that have inspections on a regular basis, if there's Section 8 involved they do their own inspection because it's a bit different than the DSS inspection.

**D.P.O. VILORIA-FISHER:**

Okay. So it would be the Section 8 situations where the owner, the landlord could have a management person who does an intermediary?

**MR. HERNANDEZ:**

It would have to be an inspector from the Housing Authority that has the Section 8 voucher. There should be no independent inspections, at least we don't take any, we do it ourselves. We're not going to take a third party's inspection report.

**D.P.O. VILORIA-FISHER:**

But then there's no inspection or checking of the premises periodically during the tenancy; no one can, in other words?

**MR. HERNANDEZ:**

Section 8 annually will inspect their units.

**D.P.O. VILORIA-FISHER:**

Oh, Section 8 does annual checks.

**MR. HERNANDEZ:**

Yes.

**D.P.O. VILORIA-FISHER:**

Okay.

**MR. HERNANDEZ:**

DSS does not.

**D.P.O. VILORIA-FISHER:**

So is there any way that Mrs. Bosch could continue to rent her property and feel some sense of security? I mean, is there another way that you would advise her to go so that she can protect her investment?

**MR. HERNANDEZ:**

First, the rights that she ascribed to the DSS tenants are the rights that any tenant has. Any landlord would have the same difficulty and be advised the same way for anybody renting from them, whether they were cash customers or not. So unfortunately, or fortunately depending on your point of view, landlord/tenant law favors the tenants in these cases.

**D.P.O. VILORIA-FISHER:**

As far as privacy so the landlord can't go there and --

**MR. HERNANDEZ:**

Privacy, you can't -- right, unreasonable inspection, unreasonable eviction and things like that. So tenants do have the law on their side more often than the landlord.

**D.P.O. VILORIA-FISHER:**

Okay. Thank you.

**CHAIRPERSON BROWNING:**

I'd like to finish, because I was going to mention as far as your contract with your tenant, I didn't know if you could put something in your contract where you have the ability to come to the home at any time throughout the duration of that contract. Phil Weiden is here from LIBOR, and I actually have a meeting -- the Long Island Board of Realtors. I actually have a meeting coming up with him and I think we should discuss what the laws are pertaining to -- because I know there's other states where the -- it's always more in favor of the landlord than the tenant. And you know, Colorado being one because my daughter lived in Colorado and was a renter, and she said it's definitely very pro landlord. So I'd like to -- I will have a conversation with Mr. Weiden about what do we do to get that reversed. Because I see it a lot in my district, tenants taking advantage of landlords, and I think it's time to make some changes.

**MS. BOSCH:**

Well, I thank you very much. And I smartened up, my daughter lives in my house now.

**CHAIRPERSON BROWNING:**

Ah, there you go. But that's no guarantee.

**MS. BOSCH:**

I know, I know.

*(\*Laughter\*)*

**LEG. EDDINGTON:**

Please keep my office in the loop based on the communication you get from Department of Social Services.

**MS. BOSCH:**

I certainly will, Legislator Eddington.

**LEG. EDDINGTON:**

Thank you.

**MS. BOSCH:**

Thank you very much.

**CHAIRPERSON BROWNING:**

Thank you. Next is Mary Finnin.

**MS. FINNIN:**

Good afternoon. My name is Mary Finnin. I'm a retired public health nurse. I'm here today to speak in support of Resolution 1600 and also 1565. The health care of all of Suffolk County residents is put at risk when services are cut. The private sector cannot absorb the care for the poor and the uninsured. We pay taxes to assure that health care is available and accessible to all who need those services. These resolutions provide a process of review to be completed before any health services are cut, sold or abolished.

I wish to -- I have a quote here from Dr. Mary Hibberd, former Commissioner of Health. It seems to be the -- "This seems to be the due process and responsible government that we should have from our elected and taxpayer-paid representatives. Issues that are important for the public good should have fair hearings so that citizens can be informed and have a voice. And those with decision-making authority should have time to study the issues so that they hear from the public and truly understand as much as possible the consequences of those decisions. They need also to understand that they are entrusted with the great responsibility to care for and protect those in our society who cannot care for or protect themselves.

I want to say that currently there are RFP's out to either cut, sell, privatize John J. Foley, public health community services, jail medical services, health centers. What assurances do we have as the public that services will be available for those in need?

I am recommending to this Legislature that the tobacco money be used to fund the health centers from now through December of this year, and that a \$5 tax be a proposed, earmarked for health services in Suffolk County for the year going forward in 2012. Ninety-two percent of our County tax dollars go to the Police budget. Seven to 8% fund everything else, social services, health care, roads, bridges, you name it. So I'm proposing that we earmark -- that you propose and earmark a \$5 tax, which would fund only health services. And I believe that we have a duty to provide these services to the public.

We know, from what's going on at the Federal level and at the State level, that we're not going to see a continuation of the funding that we've had in the past. They're cutting in Washington, they're cutting at the State level. Everyone has air in their budgets and the services that are being cut are for the people that are needy, not the millionaires, but the people that need it. So I strongly support these two resolutions and hope you will give strong consideration to funding these services and providing the tax support we need to go forward. Thank you.

**CHAIRPERSON BROWNING:**

Mary, don't go anywhere, but I do want to let you know, New York State passed a 2% tax cap and that \$5 exceeds it.

**MS. FINNIN:**

Well, then we'll go to \$4. What is 2% --

**CHAIRPERSON BROWNING:**

I think four is too much. I'm not sure what the 2% is. Maybe we can get that answer, but Vivian --

**MS. FINNIN:**

Right. Well, whatever the 2%, because right now 92% of our tax dollars of Suffolk County are funding one service, and I think we have to look at what is equitable in terms of all the services that the residents of Suffolk County need.

**CHAIRPERSON BROWNING:**

And not to forget a lot of the services, also, some of it is State and Federal-funded, so it's not necessarily that that's the only money going to it, there are State and Federal funds. But, Vivian, you have a comment?

**D.P.O. VILORIA-FISHER:**

Mary, as you know, we have had a consultant do a study on our Public Health Service Program, and we -- I just received today their -- I think it's going to be their final draft. The Steering Committee is going to be reviewing it and making a recommendation, vis-a-vis this -- the RFP that's out there. So we'll get back to you on our determination, and we'll be doing -- making a report on that.

**MS. FINNIN:**

Thank you very much. I did not have that information. But, you know, that's what I say, how can you put out RFP's when you got studies going on that aren't complete? It's like what went on all year with John J. Foley, lawsuits, RFP's, whatever you have. In the meantime, you know, we're cutting the legs right out from under these services.

**D.P.O. VILORIA-FISHER:**

When you're right you're right, Mary, and I totally agree with you. This study was underway and there was a rush to put this RFP out before we had completed the work, so you're absolutely right.

**CHAIRPERSON BROWNING:**

Thank you, Mary. Next is Philip Weiden.

**MR. WEIDEN:**

Thank you, Madam Chair. I'll be very brief, about 30 seconds to a minute, because we're speaking in support of I.R. 1566, Legislator Cilmi's bill. I thank him for that. I know it has bipartisan support. I know it has to come back in a different form, so it's going to be tabled. I just wanted to say, we support it for several reasons. It will allow the people of Suffolk County to be represented. It will be -- you know, strike a difference, a reasonable balance between development and between open space preservation, and also -- it will also allow the economic development to go forward. Various towns right now have control of it. We feel that it should be a vote of the Legislature, that it shouldn't be just, you know, a simple yes or no all across the board on development that a regulatory agency or the water authority, or whoever, can implement.

So I thank you. If you have any questions, please let me know. And we'll be back at future hearings as this comes up again and again. Thank you.

**CHAIRPERSON BROWNING:**

Thank you. No questions? Okay. Anne Kellett.

**MS. KELLETT:**

My name is Anne Kellett. I'm a member of the Bureau of Public Health Nurses Professional Advisory Committee, and I'm a resident and taxpayer, and of the expectation that most constituents

are -- that you elected officials participate fully in any decision-making that reflects or impacts on any part of the assigned public jurisdiction and responsibilities statement for your committee, and not just for this committee, but for all committees, and it appears that's what Resolution 1600-11 is all about.

Although it was catalyzed by the RFP to sell the Certified Home Health Agency, which, of course, is of utmost importance, and I'm sure you all feel responsible to your governmental obligation and to represent the interest of those who may be most adversely affected. However, there's another aspect to this situation and that is since 2006, at least six studies to review the Bureau and the Department of Health, all with recommendations, all which produced recommendations, and at a cost, yet these recommendations seem not to have been implemented, although several, including the current one, that is the cost benefit analysis of the Certified Home Health Agency, had administrative input and approval. This current study, which will be presented to you, as Mary said, on 8/12, and Vivian endorsed that also. And yet, just a few weeks before that date, it, too, seems to be superfluous, even though it is not fully paid for.

Because of the timing of the RFP to sell the Certified Home Health Agency, it makes the action seem artificial. It seems like an artificial step. Again, these actions seem to override the jurisdictional responsibility and governmental obligation of the committee, and in other instances may do so to other committees. I, therefore, urge you to pass the resolution and send it forward to the full legislation -- Legislature. Thank you.

**CHAIRPERSON BROWNING:**

Thank you, Anne.

**MS. KELLETT:**

You're welcome.

**CHAIRPERSON BROWNING:**

Thank you, Anne. Okay. I have no more cards. Is there anyone else who would like to speak? No? Okay. I will ask that we -- Mr. Hernandez has a pressing issue, that he needs to leave, and so I'd like to take 1543 out of order. I'd like to make a motion to take that out of order. Do I have a second?

**D.P.O. VILORIA-FISHER:**

Second.

**CHAIRPERSON BROWNING:**

Second, Legislator Viloría-Fisher. All in favor? Opposed? Abstentions? It's out of order. So ***1543 is establishing a Sober Home Oversight Board (Browning)***. I would like to make a motion to approve.

**D.P.O. VILORIA-FISHER:**

Second.

**CHAIRPERSON BROWNING:**

Second, Legislator Viloría-Fisher. Do we have any questions? No? Okay, good. So All in favor? Opposed? Abstentions? It is approved. ***(Vote: Approved 5-0-0-0)***.

Thank you, Mr. Hernandez. You can now do what you got to do. Thank you. With that, we have a couple of presentations today. We have Alysa Ferguson of Cornell Cooperative Extension to discuss the "Healthy Eating at Home and on the Go" Program. So, if you would like to come on up. Do you have the right one on there? Do you want to have a seat up here? Alysa, if you want to have -- if

you want to sit over here. And, Vito, if you would like to start with the intros.

**MR. MINEI:**

Sure. Thank you. Good afternoon, Legislator Browning, members of the committee, essential staff. My name is Vito Minei. I'm Executive Director of Cornell Cooperative Extension of Suffolk County. Today I'm joined by two of my colleagues. To my immediate left is Nancy Olsen-Harbich. She is program leader for Family Health and Wellness. And to Nancy's left is Alysa Ferguson, a family health educator, who will be making a brief, but engaging, presentation today.

I was hoping to indulge you for a few minutes. I know you have a busy schedule. I'd like to give you a little overview of CCE Suffolk, and then Nancy will describe some of her programs before Alysa goes into her presentation.

Cornell Cooperative Extension of Suffolk County is a non-for-profit organization, and through our affiliation, both administratively and technically with Cornell University, we try to attain our three-part goal here in Suffolk. Number one, to strengthen families and communities, and we'll be speaking to that issue today. And also, we're here to try to preserve and enhance the environment, and also promote economic development. And how we do that is we bring researched-based scientific information to the people of Suffolk County and create public and private partnerships under our major programs.

The agricultural program, as many of you know, really underscores the value of agriculture in Suffolk County. People are surprised in New York State that Suffolk County remains the number one county in terms of value of agricultural products in New York State, something on the order of 300 million dollars. We have ten sub-programs dealing with such issues as general agriculture, nurseries, landscaping, the wine industry, that all come to us, not only in our offices in Riverhead, but also at the research farm owned by Cornell University up on Sound Avenue.

I just want to bring to your attention that next Friday will be the first Long Island Suffolk County wide farmers market held at the County Farm in Yaphank. I have some fliers here. It's to celebrate "Grown on Long Island", and to promote "Buy Locally". The farmers here in Suffolk are hurting, so we ask you all to come out, buy some fresh produce. Our staff will be there to give some nutrition information as well.

We also have a marine program, and you know that that works with the multi-billion dollar commercial and recreational marine industries. Both our shellfishery program and fin fishery program are internationally renowned. We have a number of marine resources camps. We have work that we do on natural resources and habitat protection, and also on water quality.

Another program we're very proud of here in Suffolk County is our 4-H program, which reaches nearly 40,000 youth in Suffolk County, and teaches them to learn by doing. And the goals for 4-H are to provide healthy children, also to provide good citizens. And something near to my heart is -- a national goal of 4-H is to promote science, engineering and technology. As you know, America keeps dropping further and further behind other industrialized nations in the technical field, so we're very proud of that.

Now, Suffolk -- in Suffolk County, Cooperative Extension is proud of our stellar reputation, our longevity, we're here almost 100 years, and the fact that we provide cost effective programs to the people of Suffolk County, true value to the people of Suffolk County.

Today we're going to hear from one of our major programs, Family Health and Wellness, and then we'll have a brief presentation. So, at this time, I'd like to turn it over to Nancy Olsen-Harbich. Nancy?

**MS. OLSEN-HARBICH:**

Hello? Oh, now it's working. It's a real pleasure to be here this afternoon to talk to you about our Family Health and Wellness Program. It's nice to be here in the summer, because it's not so nice when I'm here in the Fall and we're talking money. So today we want to show you a little bit about what you get for your County support, even though that support has been decreasing, and we want it to at least stay stable for this, we're hoping.

I've had the pleasure of being on the Family Health and Wellness staff here at Cornell Cooperative Extension in Suffolk County for over 25 years. And one thing I can tell you for sure is that we are constantly changing in response to the needs of the community and the expressed needs of families in Suffolk County. Our program area became the Family Health and Wellness program area about three years ago, because as we did our analysis of the kinds of programming we're doing, we're seeing more and more that these fall under the umbrella of health. And while we have always had a very strong nutrition education program, we also have a contract with the Health Department to provide diabetes prevention and management at all of our Suffolk County health centers, and, as you know, that's been a little trying. I'm wondering what's going to be happening with those. And then we also have a small staff of educators who work in supporting parents in learning parenting skills, and trying to help people make good decisions for their families so that their children eat well, but also so that their children occasionally walk away from that television and read a book, learn how to have social skills and emotional health.

We have a wide variety of educational programs that we make available throughout Suffolk County. We have educators every day from Montauk to Huntington. I can tell you that we've recently done some statistics and our nutrition education programs reached about 10,241 adults, and 3,890 youth last year. We have reached over almost 6,000 people in our Diabetes Prevention Program, and that we've had 253 parent education programs this year, reaching 9,758 people. So I would like to say pretty strongly that there's a huge educational effort that goes on in this County with the increasingly small amount of money that we received in our Family Health and Wellness Program, and I'm very proud to be a part of it. I'm very proud to introduce you to Alysa Ferguson, who not only has a Masters in Nutrition Education, she is a registered dietician. She is a new mom to baby Jack, and is working as a nutrition educator in our Family Health and Wellness Program, providing community education programs at public schools, at public libraries, at centers throughout Suffolk County. So what Alysa has designed for you is just a little -- a little taste of a couple of different programs so that you can get a sense of the quality of the education that we are providing and the kind of topics that we are pursuing in order to help the residents of Suffolk County reach their health goals. So Alysa?

**MS. FERGUSON:**

Hello. First, let me just say thank you so much if allowing me the time to present today. Thank you. Again, my name is Alysa Ferguson, and in my role as a family health educator with the Family Health and Wellness Program I get to teach on a variety of topics throughout Suffolk County.

In the folders that went around, there's a green sheet on the left that just kind of gives an idea of a couple of the different topics that I'm commonly asked to present throughout Suffolk, but I'm just going to give a couple of highlights today in this PowerPoint, "Healthy Eating at Home and on the Go." But usually before I can talk to people about healthy eating, I like to kind of just start by talking about why it's valuable to all of us to eat healthy. So, first of all -- okay.

Making healthy food choices on a daily basis can potentially reduce the risk for chronic disease. So research has shown that diet is very closely related with risk for heart disease, Type II diabetes, certain types of cancer. Choosing healthy foods, if done carefully, is important for helping to manage weight, which is a very important issue for many people. And, of course, choosing healthy

foods and appropriate portions can help people feel their very best.

So the goals of healthy eating, first of all, would be to provide adequate nutrients for the body, to provide an appropriate calorie range, since calories are what affect weight over our lifetimes; to provide protection against disease, and, of course, to provide some satisfaction and enjoyment as well.

So one of the things that I often end up talking a lot about is what are healthy foods? What does a healthy diet look like? And one of the things that we use when we teach about this topic is -- actually, also in your folder, if you wouldn't mind taking a look at it together, it's the "Grocery List for Health Families" brochure. It's something we use a lot in this program area because it really starts by focusing on the positive. In nutrition you hear a lot about what people need to work on eating less of, things -- less soda, less fast food, less fried food, less junk food.

So I like to start by focusing on what are the healthy foods and what does a healthy diet look like? And by using this brochure as a tool, I can spend quite a bit of time talking about these different food groups. But essentially, the advice is to have a diet based in lots of fruits and vegetables. The research has shown again and again that the more fruits and vegetables people eat, the healthier their weight tends to be, the lower their risk of certain types of chronic disease like certain cancers. So this is certainly a food group that I would spend some time. Whole grains, an important part of a healthy diet, low fat dairy, lean protein and healthy fats as being kind of the essential pieces of starting to build a healthy diet. And there's some lists of some good choices in this brochure, also some tips on reading food labels and portion sizes. So it becomes a wonderful starting point for families to start to make better healthy meal and snack choices based on what they and their family enjoy.

Another very popular topic is the issue of eating out. Today 40% of our meals are prepared out the home, and the typical person spends 49% of their food budget on foods prepared outside the home. So while -- when I talk about healthy eating, I'm always focusing on helping families make and prepare their own meals. Eating out has become a very big part of normal society and it's certainly something that needs to be addressed. So one of the problems is restaurant meals often invert healthy eating guidelines. They tend to kind of lack a lot of these food groups we just talked about in terms of fruits and vegetables, whole grains and lowfat dairy. And one of the biggest issues, they can be very heavy in meat and fat, refined carbohydrate, very heavy in sugar and sodium, which I think you'll see in a moment. And the issue is that people tend to consume more than double the amount of calories that they normally would. When you look at the obesity epidemic that we're facing, over the past 30 years, one of the things that's changed very drastically is the proportion of meals that we're eating outside of the home, and this excessive eating is part of problem.

So one of the classes I teach is called "Extreme Dining", the best and the worst of eating out. And I'm just going to run through a couple of quick slides to give you an idea of what are some of the things that are issues for people. So, starting with breakfast, some of the worst choices, I kind of had to pick on IHOP a bit. Because it's a chain restaurant, the nutrition information is available, as opposed to at a diner or a local restaurant, but it would be similar. So IHOP Big Steak Omelet, just the omelet is 915 calories, 72 grams of fat, 27 grams of saturated fat, 862 milligrams of cholesterol and 690 milligrams of sodium. So a couple of things.

**LEG. ROMAINE:**

No wonder it tastes so good.

**MS. FERGUSON:**

Right.

**CHAIRPERSON BROWNING:**

No more of those.

**LEG. ROMAINE:**

If it tastes good, it's bad.

*(\*Laughter\*)*

**MS. FERGUSON:**

So, first of all, I'd like people to have some sort of reference point for comparison. So if you know the average person needs about 2,000 calories a day to maintain their weight, you can see this is almost half from their omelette. You know, on a heart healthy diet, it's recommended to eat no more than 300 milligrams of cholesterol a day. If a person has high cholesterol, it would be even less than that, so it becomes excessive. Now, who knows what the omelettes at IHOP come with? Because this is just for the omelette.

**D.P.O. VILORIA-FISHER:**

I guess toast.

**MS. FERGUSON:**

Most places it's fried hash browns and buttered toast, but at IHOP, it's three buttermilk pancakes with syrup and butter. So that's not included here, but you can see where the issue come in. And, of course, that's not including beverages either. And then the stuffed French toast is almost fifteen hundred calories and thirteen-hundred-and-twenty-seven milligrams of sodium. And I'm pointing that out because this is a sweet dish. I mean, I've never had it, but I assume it's a sweet dish and it doesn't taste salty. So people, while they're becoming more aware of calories, which is a very positive thing, they're not necessarily aware of how much sodium they may be consuming.

So the good news is that there are good breakfast choices out there. Most places have hot cereal, like oatmeal is one of the better choices with fresh fruit. Most places you can get an egg white omelette with vegetables and whole grain bread, like whole wheat or rye toast. IHOP has -- it does have a special menu. They just changed the name to "Simple and Fit", but it's meals under 600 calories. So, for somebody trying to make good choices, they are available. And then Dunkin' Donuts egg white flat bread sandwiches are a decent choice for around 300 calories for people on the go, but there's still the issue of it being very high in sodium as well.

So we'll do one lunch example. This is -- it's Panera Bread again because the nutrition information is available, but it would be similar anywhere else. A simple chicken Caesar salad with bread will run about 700 calories or more and over 1,000 milligrams of sodium. And a chicken sandwich is about 1,000 calories, and 55 grams of fat and twenty-five-hundred-and-forty milligrams of sodium. So they've just lowered recommendation for sodium nationally for people that are over the age of 51 or people that have high blood pressure and other risk factors to fifteen hundred milligrams a day, which is already very, very difficult to do. So one sandwich from a restaurant can really make it very difficult to meet those goals. The one positive here is that Panera, along with other restaurants, usually do have some healthier options. They offer a couple of low fat soups that are pretty tasty and they run no more than 170 calories. Of course, a classic salad with reduced fat dressing and a fresh fruit cup would make a very nice balanced --

**D.P.O. VILORIA-FISHER:**

Their broccoli soup is very high in calories.

**MS. FERGUSON:**

And delicious, yes. The broccoli cheese, yes.

**D.P.O. VILORIA-FISHER:**

I don't get that.

**MS. FERGUSON:**

I think the lowfat soups are actually labeled "lowfat", so it makes it easier for people to kind of zero in on, okay, if I do want to make a good choice, how do I do that?

Italian: Olive Garden, my favorite -- may favorite meal right here, Tour of Italy, a little bit of everything, almost fifteen hundred calories. And, you know, the reality is I'm sure you get the point. But the other thing is we go to -- out to dinner and it's not just the entree, it's also the bread, and the appetizer, and the wine, and the desert, so it becomes a problem.

So there's lots of tips that we can give people about making -- most importantly, being aware and making better choices. The chain restaurants all have menus now that offer calorie controlled portions for the motivated person. And we'll skip to the end.

Chinese food is difficult because the calorie information is not available. And while you can see that the calories and sodium do tend to be pretty excessive, there are some better choices that can be made. There's a section of the menu that has steamed chicken and broccoli and steamed shrimp with mixed vegetables where the sauce can be ordered on the side where people can control the portion, and that's kind of the key here. And, of course, brown rice is available.

And I'll end with the coffee place here. So coffee has traditionally been one of the beverages that we can recommend. I mean, beyond water, in moderation, it's a low calorie beverage until we start adding it and making it fancy. So Starbucks Venti 20 ounce white chocolate mocha made with 2% milk will run somebody about 850 calories, and it's got more than a McDonalds Quarter Pounder with cheese. So some better choices at a coffee place, of course plain black coffee would have virtually no calories, but a Starbucks tall cafe latte with nonfat milk will run about 100 calories, and a Dunkin' Donuts small latte lite is about 80 calories.

So from this extreme dining workshop, the take-home messages for people is, first of all, to work on personally decreasing the frequency of eating out and preparing more meals at home as a family, that's the number one thing I'd recommend. When you do eat out, choose restaurants with healthier options. Have some sort of plan going into it, you know, in terms of based on your personal health goals are. And don't go starving. Even people in the name of weight loss might skip meals in preparation for overdoing it and that can kind of set somebody up to overeat and make poor choices. Share, which my husband always laughs at me when I recommend that; he doesn't share. But if you go with somebody and you can split an entree, that's a great way to cut your calories right in half.

Be assertive, ask for what it is that you want. You know, if you'd like steak or fish and you'd like it prepared without butter or oil, that would save you hundreds of calories, and most places are very accommodating. Pack up leftovers in the beginning in the hopes that you can prevent some of this overeating.

Very important to think about your beverage with your meal, which can add hundreds of calories, and, of course, trying to stick with low calorie choices, water, seltzer, unsweetened tea. And most importantly, be informed and aware. There's lots more information than ever before, and certainly by being motivated you can make better choices when eating out.

Thank you. And does anybody have any questions about anything we went over? Yes.

**CHAIRPERSON BROWNING:**

Legislator Romaine.

**LEG. ROMAINE:**

Just one quick question. Honey? Where does honey fit into this?

*(\*Laughter\*)*

I use it in my tea.

**MS. FERGUSON:**

Where -- are you asking where --

**MR. MINEI:**

We call her Alysa, Ed. We call her by name.

**MS. FERGUSON:**

Are you asking where honey fits in in a healthy diet?

**LEG. ROMAINE:**

Yes.

**MS. FERGUSON:**

Honey is still a form of extra sugar, so it should certainly be limited. But if you were comparing it to like a processed white sugar, it might have more health properties and be more -- in a more a natural choice. So to use a sweetener, honey is probably a better one, but small portions, yes. Thank you. Any other questions?

**CHAIRPERSON BROWNING:**

I know Ed loves honey.

**LEG. ROMAINE:**

I need it to make me sweet.

*(\*Laughter\*)*

I can tell you how sour I can be.

**CHAIRPERSON BROWNING:**

Go ahead, Vivian.

**D.P.O. VILORIA-FISHER:**

Hi. Thank you very much. You know, I once went out with a Cornell educator to supermarkets. She was -- because she goes and teaches people how to shop. Is that program still a part of what you're doing with this or --

**MS. OLSEN-HARBICH:**

Our programs for families in food and nutrition are quite varied at this point and have a great deal to do with who's funding that program. So, for instance, our programs -- our largest nutrition education program that you're referring to is our EFNEP and Eat Smart, Eat Smart New York Program, in which we work with low income families and all of the vulnerable communities throughout Suffolk County and help those families make the best food choices for their limited food dollars, and very often do things like bring a group of families to the supermarket and we'll walk the

aisles and talk about if you -- for instance, people make the assumption the larger size of something is cheaper. That's not always true. How to read a unit price, how to look for nutrition content on packaging, how to take short cuts when it will sort of save some time value, but how to do things that really are very quick that save you money, like soaking beans instead of buying canned beans. Nutrition education is also done through Alysa and one other half-time bilingual educator, and that's available to anyone in Suffolk County, regardless of family income. So, depending on the funding source, the programs are all over.

**D.P.O. VILORIA-FISHER:**

I have a short question. Was this the same program? And I guess not --

**MS. OLSEN-HARBICH:**

I'm sorry. It's part of the same program area, it's just not the same funding stream.

**D.P.O. VILORIA-FISHER:**

Okay. And I just have to congratulate you, because you have so many programs that we don't hear about them all at once. But, you know, everybody here knows that I was working on the community gardens with the Community Gardens Task Force, and Susan Wilk was -- from Cornell was not a member of the Task Force, but she was a great resource person, and she did bring home a New York State grant on healthy eating, and she has had these community gardens that she's helped put together in Riverhead. Ed, you might know where it is, it was right in town, right in downtown Riverhead.

**LEG. ROMAINE:**

Well, these ladies all know that you leave our office on Griffing Avenue, head south, and it dead-ends at Main Street, and if you kept on going, you'd run right into the community gardens.

**D.P.O. VILORIA-FISHER:**

Exactly, and it's wonderful. It's placed in just the right place.

**LEG. ROMAINE:**

It is. I've met many of the people that are involved in that, and the Supervisor and myself went down there, take a -- took a look at that. And actually, we're revitalizing the public bathrooms, which are right next door.

**D.P.O. VILORIA-FISHER:**

Oh, Susan told me about that, but that -- you know, having kids where some -- how something grows is a great way to have them eat healthier food, you know, getting them in touch with what it looks -- what raw food looks like. So I just want to congratulate you on all of the programs that you have that really are helping people be healthier.

And I want to extend an invitation to you. I know that I've -- some individuals from Cornell have gone on our Facebook, you know, Growing Up Healthy in Suffolk County, which came out of the Community Task Force. But I think Marge passed you my card. Stephanie has put the address of our Twitter and our Facebook on that and we'd like you to friend us or follow us on Twitter, because we're trying to -- every day we go through the newspaper and invariably there's a story about a community garden. Today there was a story, the woman in Slow Food, Huntington, I always forget her name, it's an exotic name, but we met her at the Small Farms Conference and, you know, she talks about organic gardening. And I'm sure you can give us more information about organic and, you know, pesticide, etcetera. But, you know, friend us and -- so that you can be another resource on our Facebook page. When people are looking for information, they can go right from our Facebook or our Twitter to Cornell to get that information. And we can all make it a stronger network, because we're getting Slow Food there, school districts that have school gardens, our Food

Policy Council is on that. And so if we're going to eat healthy, we need to grow healthy, get kids outside, etcetera, and maybe they won't have time to spend so much time in restaurants. Thanks.

**CHAIRPERSON BROWNING:**

Okay. Sarah.

**LEG. ANKER:**

I just wanted to thank you again for the work that you've done with these programs. I know you've -- I think a couple of people have met with me. I know Vito and I think Alysa, they've met with me in my office to discuss your programs. Now, do you have programs that actually go into schools where you can provide this information and, you know -- and how many schools are you into at this point?

**MS. OLSEN-HARBICH**

I can tell you that almost 4,000 children in Suffolk County experienced our nutrition programs last year. Honestly, we work with a lot of collaborators in Suffolk. There are many programs out of the Health Department that also work in the schools. We really try to be at the table whenever anyone is talking about food in schools. It's not just teaching the kids, it's also making sure that the cafeterias are providing good choices for the children, that the children are having adequate recess time so that they can move, that we do training for health educators and for people who are going and trying to promote physical activity for children. It's all something that all of us are concerned about, and Cornell Cooperative Extension, we believe, brings very unique research-based information to the table, which, frankly, is sometimes very confusing out there in the world of nutrition and food. Sometimes people with the best of intentions believe things like grilled chicken salads are always good for you. We saw in, you know, Alysa's presentation that they can be thousands of calories. So we really pride ourselves in trying to be very well connected with the networks in Suffolk that are working on trying to make access to healthier choices for both adults and children. Because children spend so much time at school, we want those choices to be good choices.

**LEG. ANKER:**

Now, do you go to each school separately to get your program involved in that school district, or do you have another source where you can introduce yourself to that source? I'm thinking like the Superintendent's Conference, or Eastern Suffolk BOCES. How do you get into the school districts?

**MS. OLSEN-HARBICH**

That's a good question. We work every year to try to do outreach to the PTAs. We work collaboratively with BOCES. We sit on a lot of the advisory councils for the BOCES, and then we do some direct mailings. But as our budget decreases, we have less resources to do the promotions. Some of the materials that you have in your packet we try to get out through health fairs and other -- really any opportunities that we have to make connections with people. All of our programs are put together in the one brochure that's in there that has an overview of each of the programs, and we make an effort to send those by mail to schools every year, twice a year, in fact, once in September and once in January.

**LEG. ANKER:**

And again, as far as if I wanted as a Legislator to put your information on my website as a link, I would put the ccec.cornell, or would I put the diabetes? Which -- do you have a specific website that will bring us or bring the constituent to the information regarding your dining information?

**MS. OLSEN-HARBICH:**

I'm not the website person, but we have an excellent one, and we will look at how we can link that up, absolutely.

**MR. MINEI:**

CCE Suffolk will get you to it, and then you can get to the nutrition programs through the main page, through the home page.

**LEG. ANKER:**

Okay. So there's like a -- there's like a box that they can click into to find out?

**MS. OLSEN-HARBICH:**

Yes.

**LEG. ANKER:**

Okay. Very good.

**MR. MINEI:**

There's a drop-down, there's a drop-down, menu.

**LEG. ANKER:**

Oh, wonderful. Thank you so much.

**CHAIRPERSON BROWNING:**

Vivian, one more time?

**D.P.O. VILORIA-FISHER:**

I'm sorry. I know we have a very full agenda, but I have to thank you for one more thing. And I want to encourage my colleagues to support you on this. Your Agricultural Literacy Program, where Legislators go in and read books about farming in elementary schools, and it's such a way to get the message out. And I had a great time at three different schools this year, so thank you. Great program.

**CHAIRPERSON BROWNING:**

The chickens?

**D.P.O. VILORIA-FISHER:**

I did the chickens.

**CHAIRPERSON BROWNING:**

I did, too.

**D.P.O. VILORIA-FISHER:**

Isn't that fun?

*(\*Laughter\*)*

But I bet you didn't bring your own chicken with you.

**CHAIRPERSON BROWNING:**

No.

**D.P.O. VILORIA-FISHER:**

But I did.

**CHAIRPERSON BROWNING:**

I held the chickens.

*(\*Laughter\*)*

**MR. MINEI:**

If we're closing, I'd just like to say one more thing, Kate. Thank you. I wanted to thank you all again. And just to remind you that this time last year, Family Health and Wellness was facing a major cut, total defunding in the County Exec's budget, and we were very concerned. And thanks to a lot of you, that was restored. We're pretty much back in the same situation again. And I know several of you, just meeting you, Legislator Anker, I know you're very concerned about nutrition issues. Vivian, you and I have talked about this for a while. And, Kate, certainly it's on your -- high on your agenda. And you'll be seeing us in about another month or so talking about the budget, we hope you keep us in mind with regard to how valuable this information is to all the residents of Suffolk County.

And lastly, remember to come on August 5th to the County Farm and we'll see you. And Nancy's staff will be providing nutrition information, and a lot of the farmers will be there selling fresh produce. So we hope to see you all there. Thanks again.

**CHAIRPERSON BROWNING:**

Thank you, Vito. I do have it on my calendar to come and visit. And your Family Health and Wellness, also not -- for everyone to remember, you also reach out to the prisoners, female prisoners right?

**MS. OLSEN-HARBICH**

(Nodded yes).

**CHAIRPERSON BROWNING:**

And I think it's important, especially the single moms who are stretching the dollars. So thank you for everything you do.

**MS. OLSEN-HARBICH**

Thank you.

**MR. MINEI:**

Thank you.

**MS. FERGUSON:**

Thank you.

**CHAIRPERSON BROWNING:**

And we have one more presentation. I know it is a long day today. Walter Dawydiak from the Suffolk County Health Department will be doing the presentation on the Comprehensive Water Resources Management Plan. When you're ready.

**MR. DAWYDIAK:**

Legislator Browning, members of the Committee, thank you for having me here for this presentation. My name is Walter Dawydiak. I'm the Acting Director of the Health Department's Division of Environmental Quality. Sitting to my right is Legislator -- I'm sorry, Commissioner, Dr. Tomarken, and Len Marchese is also in the audience here as well. I'm here to give you a brief overview of the Comprehensive Water Resources Management Plan. I know you've got a busy agenda and it's getting late, so I'm going to try and get through this in as quick a fashion as I can.

I won't go through all the material. Feel free to interrupt me, ask questions at any time.

What I'm going to do is give you a brief overview of what we found while we undertook this study, what we found, what the recommendations are, and where we're headed with this. Just to kind of give you the nutshell overview before we jump into some of the details, first and foremost, this was a housekeeping study to improve our technology and our management of drinking water. Back in 2000, the State Department of Health refined the modeling and the assessments for public water supply in what was called the Federal Source Water Assessment Program, but they didn't want any of that information used for management as part of their program, and we in the County thought that it needed to be used for management. We also thought that we needed to refine the modeling and update the information. So what we did is sharpened our tools and developed a tool box, you know, let's us know where our drinking water is coming from, what the threats are and what the impacts may be. If there's a problem, we can track a source. If there is risks, we can manage them better.

The take-home message of this study is really twofold in its broader sense. The first is a public water supply is fundamentally safe. Now, private wells are inherently risky, they should be avoided. People should connect to public water when they can. And keep in mind that the words "safe is achieved" in the Safe Drinking Water Act means does not impose any unreasonable risk. Nothing in this world is perfectly lease and we continue to strive to make our water as clean as possible, not just to meet standards, but to exceed standards to the extent that it's cost effective and to the extent that it's practicable.

The other part of the message, though, is that our surface waters really are at risk from a number of stressors, from harmful algal blooms and nutrients and utrification. The programs that we have in place that go back to the 1970's in modern environmental management, they're just not sufficient to protect surface waters, as surface waters are declining, they continue to decline. It's a problem that needs to be dealt with at the federal, state and local level, and we in the County Health Department are trying to do our part and this study is part of what we're doing to move this process forward. So more is definitely needed to protect our bays and our surface waters.

One of the things, it's a major step forward in this study, is for the first time we've identified from our environmental health perspective what the sensitive areas are in terms of how we deal with issues like open space and pollution control. And I'll show this slide in a moment, but we've determined what areas are contributing to the drinking water supply wells, and what areas are contributing to surface waters throughout the County. Now that may sound like a simple thing, but it took a mammoth effort to collect all of the data, and run the models and validate them and come up with this tool, and it's a really valuable tool. And right now, we're at the juncture in time where we collectively have to come to a decision about how we're going use these tools to move forward.

The other side of the coin is the need to accommodate human uses, development, houses and people, and we tried our best to promote planning tools and case studies to foster this kind of development. The Mastic sewerage study is one. There's a number other sewerage issues, which I'll go into greater detail on as we go down through the presentation. So we have lots of recommendations. The waste water ones I'll save until the end of the presentation.

In terms of our County Sanitary Code and how we do business, most of the development potential in Suffolk County is in the five east end towns. These were order of magnitude numbers, but when you're dealing with the five west end towns, they're about 95% built out. There's only a 5% potential increase in population in those towns. The east end towns, that number becomes closer to 50%. So there's an awful lot of development potential in the five east end towns. Those are where a lot of the sensitive surface waters are, particularly the Peconics. Those are where a lot of the drinking water issues are, particularly the North Fork with a lot of nitrogen and pesticide

contamination from agricultural and other pressures. So this is a recommendation that has been put on the table to change the Sanitary Code on sewer development density to one unit per acre, which is currently a half unit per acre in the five east end towns. This is something that's going to have to go through the Board of Health. This is something that's going to have to go through State Environmental Quality Review Act. And I say it's at least a year away and we're going to have to do a lot more work on the costs and benefits before we can formulate a final proposal. But this is one are with declining water quality, with continuing stresses, where for both drinking water and for surface waters there's really a need to do better.

The other issue is that sewage treatment technology has gotten a lot better. You hear a lot of people demonize waste water treatment plants, but unbalanced. If you have to sewer a development, you're probably reducing nitrogen by about half compared to what unsewered development is. So you may build two or three times what's allowable if you didn't have sewers, but you're removing 80% or more of the nitrogen. So on balance, it's a big benefit for the environment for nitrogen. And there's other issues potentially with bacteria, and pharmaceuticals, and personal care products, and those are things we'll talk about a little bit later. But waste water treatment has gotten a lot better than it was 25 years ago when I started in this business, and it continues to get a whole lot better. And I think this is a tool that we're going to have to use to address development issues, as well as to improve in those sensitive areas that I was discussing.

There's an awful lot of mechanics in this plan that I don't think we need to go into. The most important one probably is a water supply issue. We'll talk about this in a moment, but we're reaching a point where irrigation demand is taxing infrastructure to the point where we may not have adequate water supply to meet fire demand, and that would be a catastrophic situation. So we haven't really come to that point yet, but unless something changes, we'll be there in a fairly short time. So odd/even watering days, which is what they do in Nassau County, is one of the recommendations that we posed for consideration. The Water Authority has its own ideas about conservation initiatives and that's something that we're going to be discussing as we get into plan implementation.

And continuing our Health Department programs, most of you know that the Health Department has been at the forefront of discovering many of the contaminants that we now manage and regulate today. We're a sensitive aquifer. We're different than almost any other place in the world, with the number of people that we have sitting on a very sand soil mantle, readily leachable. We don't have sewers in most of our county, and we have a very diffuse network of over 700 public supply wells, which are very difficult to manage. That, coupled with the sensitivity of our surface waters, makes us one of the most challenging places to manage on the planet.

**D.P.O. VILORIA-FISHER:**

On the planet?

**MR. DAWYDIK:**

By way of background -- yeah, we're thinking globally today. By way of background, the first Comprehensive Water Resources Management Plan was issued in 1987. It was conducted as part of a growing concern with volatile organic chemicals. It was a water supply study more than it was a pollution control or management study, and we wanted to broaden it with this phase. We figured 20 years had passed, it was time to revisit what we were doing. We began this in 2005. The cost was \$800,000. Half of this was funded by the Water Authority. We first presented the plan in December of 2010. We made some minor corrections, that it's been published in January formally. It's been posted on the web since January. The comment period ended on June 1st, 2011, and I'll talk about the comments shortly.

I don't want to bore you with the model, but suffice it to say that this is an exquisite model, which is

a quantum leap forward over the prior versions that dealt with separate areas of the Island. A tremendous amount of data was used in this to produce a very functional and useful model. And what this model lets us do is determine a number of things. You can determine the area on land that contributes to a well and what the sources are. This is a simple example dealing with agricultural, salt storage, residential potential stressors to the Ackerly Pond well field. It will also tell you travel time interjectory through a well field so you can determine which contaminants may be a high risk. So, if your travel time is two years, you're very worried about bacteria and pathogens. If it's 50 years, you get less worried about volatile organics. As you approach 100 years, nitrogen is always a concern, because it's conservative and doesn't breakdown.

This graphic shows water supply. We use 300 gallons per day as our design number. You see your average household uses 9,000 gallons a month in the wintertime. In the summertime that more than triples. And this is a trend that started in the 1980's and it gets worse and worse. So people are using more than three times more water in the summer months. And with seasonal usage, this problem is exacerbated to a point where it's a major concern.

Here's a real brief overview of the findings. In terms of nutrients, this is really a glass-half-full-glass-half-empty story. We're happy that we've controlled and managed a lot of the pollution, but we still have major concerns, particularly with respect to surface waters. Ten milligrams per liter is the State drinking water standard for public health purposes. Our average nitrogen has gone up about a milligram per liter from about three to about four parts per million. That's really good news because we're mostly built out, and that number is never going to go a whole lot higher. One of the things we need to do is model exactly how high is it going to go. Is it going to be four-and-a-half, is it going to be six? It's going to be some number which is bigger, it's not going to be ten or more.

So we've won the battle regionally on public water supply and nitrogen. The problem is the surface waters need 0.5 milligrams per liter. That's more than an order of magnitude lower than the public health drinking water standard. And there's no disagreement that there's way too much nitrogen in the groundwater flowing to the surface waters. We have total maximum daily loads adopted for the Peconics and underdevelopment for the South Shore and adopted for the Long Island Sound study. So all of our major water bodies are severely stressed in terms of dissolved oxygen, healthy aquatic conditions and possibly harmful algal blooms. So we got to figure out a way as a society to better manage sanitary waste, waste water, as well as fertilizers. Those are really the two major sources of nitrogen.

Volatile organics, what we sometimes refer to as toxics, that's kind of a mixed bag. Some of the levels went up a little bit, but that may be due to individual hits in the number. Individual elevations can skew that number greatly, because we're talking about one to two parts per billion, on that order of magnitude. These levels are really low, and up until relatively recently we haven't even been able to measure it down this low.

The total number of wells has gone down in the Upper Glacial Aquifer from 149 to 134; that's good news. Trichloroethane occurrence has gone down; that's good news. Perchloroethylene, which is an industrial solvent and a dry cleaning agent, those levels have gone up and that's very bad news. And in general, the average of some contaminants, the average total burden has gone up slightly, and that's bad news. So this is definitely a mixed bag. We've kind of held the line with our Sanitary Code. We've got a lot more work that we need to do to make this trend better.

Pesticides are a really complicated story. They're really bad actors, like Aldicarb, Dacthal and Metolachlor. Those were the ones with very high levels and they were very ubiquitous in our aquifer. Those levels have gone down very significantly, so probably the total burden of pesticides on the groundwater has gone down. Over the past decade we've been measuring at low levels for

new pesticides, and as we look, we're finding more and more generally at very, very trace levels, but they're there, and nobody can say with certainty what they do cumulatively or synergistically. We operate on the best information we have from the Federal and State governments. We continue to collect data. That data is used by them in their risk assessments and management and in setting maximum contaminant levels. So over 80 compounds have been detected in terms of pesticides and that is a continuing concern as well. Not really a concern with respect to public water supply where the wells are deeper, not as affected, sited in better areas and monitored. A very, very major concern for private wells, and are definitely a concern for the ecosystem, because many of these pesticides, that they're meant to kill things, they have aquatic toxicities.

This is the nitrogen study. I'm not going to spend a whole lot of time on this, but nitrogen has gone up by about 38% in the upper most aquifer, which is the Upper Glacial.

**CHAIRPERSON BROWNING:**

Walter?

**MR. DAWYDIAK:**

Yes.

**CHAIRWOMAN BROWNING:**

Can you just stop? I think -- did you want to ask him a question?

**LEG. ROMAINE:**

No, no, at the end.

**CHAIRPERSON BROWNING:**

Oh, at the end. Okay. I'm sorry, go ahead.

**MR. DAWYDIAK:**

Nitrogen has gone up by about 38%. In the same time period, housing has gone up, the number of households in the County have gone up about 20 or 25%. So the increase of nitrogen in this time period is a little bit ahead of the population growth. It's mostly related to the population. It may be due to lawn care companies, increased use of fertilizers. This is something we need to tease out, and one of our projects is going to be to, you know, rigorously model overall nitrogen from all sources over time so we can answer some of those questions.

Down in the Magothy, that number is now at 3.4. The relative increase is higher, but that's really just a function of the contamination in the Upper Glacial bleeding down into the Magothy. That's just old contamination from the '40's, '50's, '60's, eventually getting down. It's preexisting nonconforming development with respect to the Sanitary Code, a lot of areas with dense housing. Eventually the Magothy is going to reach steady state, then the Magothy levels are going to be the same as Upper Glacial, which is somewhere in the 4 to 4.5 range right now.

This shows different land uses. Basically, virgin groundwater had about .3 to .5 parts per million. That's where we have an open space. Agriculture is above ten. Four to six is what we see with development, which is right in the middle. Again, okay for public health, not good for the environment. This is a simplification of where we're -- where we've been and where we're heading county-wide.

**D.P.O. VILORIA-FISHER:**

Can you just go back?

**MR. DAWYDIAK:**

Sure.

**D.P.O. VILORIA-FISHER:**

I'm sorry. I'm trying to read. Can you just go across the bottom?

**MR. DAWYDIAK:**

Yes. Agricultural is thirteen. Four units per acre is right at about ten, so we don't think that we can exceed four units per acre in an unsewered scenario, because that's already reaching ten parts per million.

Vineyards actually don't have a lot of nitrogen because too much nitrogen hurts the grape, you get too much vine growth, not enough grape growth. One to two units per acre is four to six parts per million. Golf courses, oddly enough, are at or better than a residential development. People see a golf course and they think it's a major polluter, but golf courses actually are managed very well. You don't want to put too much nitrogen on them, it's not good for the vegetation, it's not good for the environment, and the golf course managers generally know what they're doing. One unit per two acres is a performance standard that we've heard people call for. That's about two-and-a-half to three parts per million, and this is one of the things that goes back to the 1970's. The first major study was the area-wide Comprehensive Waste Treatment Management Plan, it's also known as the 208 study that was put out around 1976, and that was really the birth of all of this type of analysis that we're carrying out today.

**D.P.O. VILORIA-FISHER:**

Thank you.

**MR. DAWYDIAK:**

No problem, you're welcome. Northwest Suffolk is probably the most stressed area, because that's where we have the most development in unsewered zones. In general, the nitrogen is getting much worse. It's feeding into the North Shore harbors and Long Island Sound. These are a quarter to half-acre lots or smaller. They predated our density requirements, so that's probably an area of significant concern for sure.

Southwestern Suffolk in the Southwest Sewer District is a good news story. Nitrogen levels in the groundwater and in the streams has gotten much better as a result of sewerage. In the middle of the Island in Zone 3, and on the South Fork in Zone 5, that's where the Sanitary Code is at its greatest impact in that those areas were caught in 1970's before they were developed, so either sewers went in or density restrictions went in to prevent excess pollution.

The North Fork is another major area of concern for nitrogen and for pesticides, mainly due to agricultural influences, as well as some residential influences.

This map shows the half acre or less parcels, and you can see most of them are in Huntington, Smithtown, western Brookhaven, northern Islip and Babylon areas that are not sewered. This is going to become kind of an overlay district in terms of prioritizing areas where sewers may be a priority for environmental health reasons, particularly if you overlay a public supply well and a surface water contributing area. Those factors would warrant very, very, very strongly for sewerage, so they're kind of starting to do the planning legwork to support a long-term waste water management policy analysis in terms of where sewers are needed, what they're going to cost, and ultimately how to fund them.

We discussed Zone 4, which is East End. This shows private well samples, and you can see that the green is okay, the blue is not so good, the red violates standards. On the East End the nitrogen

levels are really pretty bad due largely to agriculture, which we'll talk more about in just a moment.

This is one of the pilots that we did. We did a very detailed model of the groundwater and the surface water around the Forge River, and we chose a Mastic/Shirley pilot area. Now that area has got groundwater which is at ten parts per million. If we do nothing, it's going to go to 14 parts per million, and if we sewered it, it would go down to less than four, which would be hugely beneficial to the health of the Forge River into implementing the total maximum daily load in that area. The question is how to pay for it, and this is one of many studies which Public Works is now looking at. This is the type of analysis that we'd like to do County-wide, look at watersheds for all of our streams, see what's going to happen if we do nothing, see what's going to happen if we sewer or use some other innovative alternative waste water treatment system. And with the cost and benefits, it becomes a policy issue as to what to implement.

Waste water treatment plants used to be at 10 parts per million, now the average discharge is down to seven, which is significantly below the drinking water standard, which is good news. It continues to improve MBRs or membrane batch reactors used in ultra micro-filtration. At the end of the process, these numbers can go down even lower in sensitive areas without any kind of prohibitive cost expense.

This shows 190 or so sewer districts throughout the County. We have a diffuse network. We prefer to see fewer than more for management purposes, but the good news is that the performance continues to improve, and sewerage is one of the key ways to accommodate development while protecting the environment.

We talked about volatile organics. I wanted to mention this reducing toxics projects that we have over the past 25 years. We've got a big database. We do about 200 cleanups in our Pollution Control Unit. These are areas where contamination is found, where they were not promptly addressed. It might get caught up into a situation where it would eventually become a superfund, which would be a lot more costly and time consuming. So under our Sanitary Code we help the property owners clean up in the most cost effective manner possible. The property stays on the tax rolls, people stay in business, it doesn't become a brownfield or a superfund. So we have a database of thousands and thousands of these facilities and we need to go back and take a look at what contaminants were found in what types of facilities and why they're there, what went wrong. Is there certain types of cleaning products? Is it industrial solvents that they use for rinsing that aren't being done well? Do we need to change something in the Sanitary Code? So this project we call "Reducing Toxics". It's going to be underway this year, in Article 7 and 12, and it's on Sanitary Code, addresses toxics. This is going to help shape the direction of those.

This graphic shows a declining trend in maximum pesticide concentrations. Now these are up at about 1,000 parts per billion or one part per million, which is still relatively low, but way, way higher than other pesticides. We're picking up pesticides down in the low one, two part per billion range. So these were the really bad actors before pesticide registration processes adequately consider leachability of pesticides in our aquifer. So the hope is that we continue to work with the State to make sure that dangerous pesticides are not marketed and allowed to be used in our area if they can reach groundwater, drinking water and the estuaries.

There's something called the Long Island Pesticide Use Management Plan that the State has currently drafted. We in the Health Department are a participant in that. We're making a number of recommendations, including test plots in Suffolk County. So if new pesticides that are potentially risky are approved or being considered, we'd like to see them used on our soils and test them in our wells and our groundwater to make sure that they're not going to become the next Aldicarb or Dacthal.

Agricultural environmental management is a major benefit to the County. Cornell is heavily involved in this, as is Suffolk County Soil and Water. It has major nitrogen and pesticide benefits, and one of our recommendations is to require this for any parcel where the County has a property interest, including purchase of development rights. And Legislator Viloría-Fisher has been working on this with us over the years and we hope that that comes to fruition very shortly.

Pharmaceuticals and personal care products are really complicated. Most of these things don't have standards. They're not in the public supply wells, which is good news. They're in about 4% of the private wells, which is bad news. Most of these are down in the one or two part per billion range. The only exception is laundromats where the rinse water concentrates, like DEET or insect repellent, so much that the levels are elevated enough to be a concern, and we're working on the State on those. But by and large, these are pervasive. They're definitely an ecological concern. The public health concern the jury is still out on. We continue to collect data, provide it to the State and Federal government, and these continue to be used in risk assessment and management.

This is a graphic of the surface water contributing area. What we found in short is that with a 25-year travel time, you get about 90% of the water contributing to surface water. You're looking at the Carmans right here and these are the contributing areas to surface waters County-wide. So this, again, is a great tool. And what you're looking at here is a public supply well contributing areas in the Suffolk County Sanitary Code Management Zones.

So the message is that Open Space Programs are critical and we've done a lot of good with the Sanitary Code. A lot more needs to be done and we've discussed some of these issues. The problem with respect to houses is really the lots that predated Article 6 of the Sanitary Code. We need to find ways to accommodate growth and development for surface water protection purposes as well, and the waste water studies I'll talk about in just a moment.

This is a map which shows the sensitive areas in their entirety. These are 25-year contributing areas to surface waters and 100 year -- 50-year contributing areas to public supply wells. This covers about half of Suffolk County. It's a pretty big area, so how to use this, again, is going to be a challenge. What we're proposing in our plan is that these areas get a priority criteria for open space, if they're not already being considered as such. What we're saying is not that people should be prohibited from waste water treatment plants, but if you're going to put something in one of the shorter travel times, it should be advanced waste water treatment. If the additional cost is on the order of 10 or 20%, but you can reduce nitrogen by another 50%, that's a big difference, and that's way better than the unsewered scenario. So that's one of the recommendations, is pushing nitrogen reduction beyond the limit of 10 parts per million. And transfer of development rights programs are going to have to be re-evaluated, because we don't want to be packing density into the most sensitive areas unless there are sewers, so that's another implication there.

The County Exec has proposed enhancing the Assessment Reserve Fund to allow for sewer expansion, as well as nitrogen reduction from on-site waste water systems. So this is a good thing, it's going to be a source of funding. It's not going to address all the problems, but it's a good start.

We in the Health Department have proposed a new study in response to comments from both the environmental community, as well as the development community. We call it "The Fifty Percent Removal Study", and I'll take a moment to explain this.

We're doing a study right now for innovative and alternative onsite systems for individual homes and small developments, under 30,000 gallons per day or under 100 households for the communities. Right now sewage treatment plants can't be built cost effectively unless you have 30,000 gallons per day or 100 households. We need to find ways to treat waste at a smaller scale, because we're just not going to sewer the whole county. It's not feasible and it's not cost effective. So we started a

study to look at systems which can meet 10 parts per million, other than the Cromaglass, because the Cromaglass is not suitable for very small sites, and the Cromaglass needs competition. We all want to see more and better systems out there.

So this is a great study and it's, hopefully, going to result in more systems which meet 10 parts per million where density restrictions are not going to be a factor, but what we heard is that's not good enough. A lot of these systems meet 15 and 20 parts per million, and they're, hopefully, less expensive. You need to look at these. So these can't be used in lieu of density. This would be a density restriction coupled with a system that gets 80% removal -- I'm sorry, 50% removal. So a 20 to 25% -- 20 to 25 parts per million is roughly 50% removal. So we're calling this a 50% removal study. We proposed Quarter Percent funding for it. The Quarter Percent Committee just approved that funding. We hope to begin this study next year and to finish out within a two-year window. So again, this could be used potentially for new construction or as retrofits, small communities, in addition to density, not as a surrogate for density. So that's going to be an important study.

This slide shows all of the waste water stuff that's going on and it's a myriad and it's a labyrinth, and there's a whole lot of tentacles out there that we need to somehow tie together, and that's one of our recommendations as well. We got this 10-milligram-per-liter study going on. We're doing this additional study with a lesser level of treatment. Now the systems that meet ten milligrams per liter for the individual home are now estimated to cost \$30,000 per year and \$1,000 a year for operation and maintenance. So, if you extrapolated that over the entire County, you'd be talking about a number on the order of billions of dollars. It's just not going to happen for the whole County. So whether it should be used in targeted areas, sensitively is an issue that we'll have to deal with, and we're hoping that the 50% removal of the cost can come down significantly.

The County Exec is doing a "Protect and Grow" study, areas that are the highest priority to jump-start sewerage, areas that are highest priority to protect. Results of that are going to be available this year. The Planning Department is doing a comprehensive plan. The inventory is just about done. The recommendations are going to be coming out over the next year. Public Works is doing 22 sewerage studies, and at the end of the day, we're going to have five or six pieces. But unless something changes, no County-wide comprehensive waste water policy, that, in our opinion, should be done to deal with sewerage, as well as decentralized innovative alternative waste water.

So all of these tools that we have we're going to use in terms of what the sensitive areas are, what the implications are going to be under different alternatives, and what the cost and benefits are. And in a one-to-two-year time frame, we hope to pull together a more comprehensive wastewater treatment plant for the -- plan for the entire County.

We've gotten 15 comment letters from 20 commentators or groups. Generally, they were supportive of the tools that we developed and the work that we've done. One persistent comment is this is really a Health Department plan, not a comprehensive plan for everybody, and that comment is honestly true. We had a steering committee of stakeholders. Many participated at the federal, state, and local level. Not a lot has changed in this plan and I think that that should change. So, in the next phase of this, working with the Planning Department, with other stakeholders, we need to get a more integrated level of buy-in to get everybody involved.

The environmentalists and the developers were both pretty passionately angry about parts of this study. Some people thought that it restricted development unnecessarily. Some people thought that it didn't do a good enough job in moving environmental protection far enough with specific standards and policies. I think everybody agreed that the waste water piece really needs to be accelerated, so that's what we're emphasizing and that's what we're moving on.

There's a question as to whether this plan needs to go through a State Environmental Quality Review Act. Our opinion in the Health Department is no, because it's a planning study. Others have said it may have implications, and it's a sufficiently comprehensive plan, that it should undergo SEORA. We acknowledge that we need to do more cost benefit work before any of this is implicated -- implemented.

So where we are right now is we've got a work group together within the Health Department where, as with any response package, we're systematically organizing the comments, explaining them and coming up with responses, and that process is going to be done by the end of August. We're going to convene the steering committee, which is a group of stakeholders, federal, state, local government, as well as environmental and development interests. We're going to convene a meeting in September to discuss the comment responses and how to complete the plan. We're going to have another meeting later in the year. If everything goes well, this plan is going to be done by the end of this year. If everybody agrees that we need to do an amendment, it may take a little longer. Right now we're shooting for the end of this year. We'd like to move on to implementation. We're hoping to change the plan like we need to, address the comments by jumping into the implementation phase. We have \$200,000 budgeted so we could begin work right away as of next year, if we jump into implementation.

**D.P.O. VILORIA-FISHER:**  
Two hundred and eighteen?

**MR. DAWYDIAK:**  
I'm sorry?

**D.P.O. VILORIA-FISHER:**  
Two hundred and eighteen.

**MR. DAWYDIAK:**  
Yes. Any Sanitary Code changes are not going to happen until next year. They'll require a Board of Health action. I talked about the reducing toxics issue, as well as a waste water study in the sewer needs assessment. So we've done a lot of work; we have a lot of work ahead of us. We don't have all the answers, but we have some of them, and we have a lot of other good questions. And if you have any questions, I'd be happy to entertain them. I hope that this was helpful.

**CHAIRMAN BROWNING:**  
Yeah, I think we have a few. And, Legislator Romaine, I believe you have some.

**MR. ROMAINE:**  
Yes. First of all, I want to say thank you. The study was long overdue. It's probably too late, but better late than never. Certainly a wake-up call for Suffolk County in terms of what our future may hold, unless we take it in our hands and take a careful look at what's happening. The Magothy level of the aquifer, it's the deep -- one of the deeper levels of the aquifer.

**MR. DAWYDIAK:**  
Yes, below the Upper Glacial, above the Lloyd, which is the deepest.

**MR. ROMAINE:**  
Has nitrogen -- has the nitrogen load in that level increased in the last few years by over 200%?

**MR. DAWYDIAK:**  
I can run to that slide for you.

**MR. ROMAINE:**

You put down 67%, which surprised me, because there's data out there that says it's 200%. But, in any event, the reason I'm raising this question is, obviously, unless something is denitrifying, less development has successfully denitrified. The term "smart growth" is oxymoronic, because without proper denitrification, we're looking already at the Great South Bay, Moriches Bay, Shinnecock Bay, that have all been declared impacted waters, along with Forge River and several other tributaries by the State of New York, because as our surface waters go.

You also made a comment that you thought that you had nitrogen under control because most of the development was finished, and later in the presentation you talked about travel times of 25 years. So we have yet to see the worst of what's to come from any of the developments in the middle of the Island where that travel time may be 25 years to the bay. I mean, you talked about a standard of 10 milligrams per liter for a sewage treatment plant, but most of the cesspools and septs don't meet that standard. What is the standard that they're currently required to meet?

**MR. DAWYDIAK:**

On-site disposal systems are managed as a non-point source. There isn't a specific standard that's applicable to them as a result. Back when the Sanitary Code was enacted, we worked with the State and they approved our approach. In the sensitive areas, one-acre lot size, coupled with an on-site disposal system, being a septic tank and leaching pool, were a result of the four parts per million for the property as a whole. The septic tank leaching pool itself is putting out about 40 to 50 parts per million, but it gets averaged out due to dilution on the site, and the net recharge is four parts per million for the site as a whole.

**LEG. ROMAINE:**

Providing that it's properly installed. Let me ask you something. Obviously -- you know, I bought a home eleven years ago, and before that I bought a home 22 years before that. Neither case did the developer who built those homes hand me a brochure and say, "This is what you've got to do to maintain your septic sewer system" -- "septic cesspool system," nowhere did they do that. And I understand that the minimum requirement is what, three feet to groundwater?

**MR. DAWYDIAK:**

Generally, yes.

**LEG. ROMAINE:**

The first home definitely did not meet that, because it was one house off the water. It was definitely not three feet to groundwater. How often do we do inspections of this? I mean, is this something that requires periodic inspections?

**MR. DAWYDIAK:**

Of malfunctioning sanitary systems? Right now, the most relevant program is the Phase II stormwater Elicit Detection and Discharge Elimination System Program. And the County has currently proposed a quarter percent project whereby for sensitive receiving surface waters, a system of inspections is in place so that stormwater conveyance doesn't happen to impact surface waters. Other than that program, inspections are generally done on complaint or when there is an obvious visible issue. There isn't a routine program whereby we knock on everybody's door and check their sanitary system.

**MR. ROMAINE:**

Like the cesspool where that was so evident in the beach in Flanders. That was in the Southampton Press. That was above ground on the beach that you -- that did not deal with.

I thought it was interesting that, by the way, one of your charts about Suffolk County water well was

the Ackerly Pond well, which the County polluted with salt intrusion.

**MR. DAWYDIAK:**

That's why we put the well on there, the salt water concern.

**LEG. ROMAINE:**

Yeah, I'm sure. But it just seems that one -- part of the County doesn't know what the other part of the County is doing, because that salt intrusion was all a result of the County. Has the Health Department given any consideration to creating nitrogen sensitive zones, those zones closest to tributaries, water -- bodies of water, you know, watersheds, that you know within three to five years, whatever is being flushed is hitting those bodies of water?

**MR. DAWYDIAK:**

That's precisely what we're proposing as part of this study is near shore, short travel time areas be afforded an additional level of management.

**MR. ROMAINE:**

Are you drafting -- are you working with this committee to draft legislation to that effect --

**MR. DAWYDIAK:**

No, not yet, no.

**LEG. ROMAINE:**

-- for nitrogen sensitive zones?

**MR. DAWYDIAK:**

Right now, what we're doing is compiling comments and responding to them. Then we're going to have the Steering Committee get together in the Fall to discuss how to move forward on that.

**LEG. ROMAINE:**

I know you mentioned Cromaglass system, and recently I asked Dr. Tomarken for data, and I believe the Chair Lady of this committee has indicated that there will be a public discussion at some point in the future for this committee for Cromaglass. This is a system that is currently suggested -- maybe recommended is too strong of a word -- by the Health Department for people who were building smaller unit developments; is that correct?

**MR. DAWYDIAK:**

I apologize. Could you restate the question? I wasn't exactly sure what you were getting at.

**MR. ROMAINE:**

Okay. The Cromaglass system, this is a system that is currently being suggested or recommended by the Health Department, or has been in the past, to people who were building smaller development that don't warrant sewage treatment plants; is that correct?

**MR. DAWYDIAK:**

Yes. Essentially, the Cromaglass range of operation is roughly 5,000 gallons per day to 15,000 gallons per day, so there's a big gap. And that between 50 to 100 hundred units, there's no technology that can work, and from zero to 5,000 gallons per day, which is zero to -- one to 17 units, there's no system which is currently approved that works.

**LEG. ROMAINE:**

So, essentially, what you're saying is for a lot of the development that's occurring in Suffolk County, the Health Department has no system that is currently approved for nitrogen removal?

**MR. DAWYDIAK:**

For a point source in lieu of density restrictions, that's correct.

**MR. ROMAINE:**

Okay. And you're saying that you are satisfied with the performance of the Cromaglass system?

**MR. DAWYDIAK:**

Cromaglass has been working well.

**LEG. ROMAINE:**

I'm glad -- I won't go into that today. I obviously disagree with that from data that I've been receiving, and we'll have that discussion at another Health Department -- Health -- with the Chair Lady's consent, we'll go into that at that time.

Let me ask you about the wells in Suffolk County, particularly public wells. Is there blending of these wells, and how many of these wells are blended?

**MR. DAWYDIAK:**

This is in general. In general, blending can be allowed for inorganic contaminants, like nitrate. It's generally not allowed for other types of contaminants, so we do have an example. It's a limited number, but there are some that are blended. I know in northwestern Suffolk, in the Huntington area, it does occur, because some of the nitrogen levels are creeping up to an unacceptably high rate, so they're essentially diluted.

**MR. ROMAINE:**

What is the percentage of public wells in Suffolk County, roughly speaking, that must be blended?

**MR. DAWYDIAK:**

I don't have an answer for you on the spot. It's not a very high number, but I can get it for you and follow up.

**LEG. ROMAINE:**

What is the standard that you're looking to establish in terms of nitrogen control per unit in Suffolk County? What is the ideal standard that you're looking to establish, if you could?

**MR. DAWYDIAK:**

Could you be a little more specific with your question?

**MR. ROMAINE:**

I have a unit. I have to build a waste water treatment facility. What is the standard that the ideal -- ideal standard that the Health Department would be looking to establish in terms of nitrogen?

**MR. DAWYDIAK:**

The limit of technology for waste water treatment is generally considered to be about three to four parts per million for a point source, and with dilution over a site, that number would be less than half, so you'd be down around two. That's about as good as it's going to get.

**MR. ROMAINE:**

Thank you.

**MR. DAWYDIAK:**

That would be --

**LEG. ROMAINE:**

Let me ask you, since you've stated the ideal, what are you currently recommending to someone that wants to build anywhere from one to 1,000 units that comes anywhere close to meeting that standard, without dilution? Is there any technology that you're currently recommending that even comes close to meeting that standard?

**MR. DAWYDIAK:**

Currently, the applicable State law, which is the prevailing law, is 10 parts per million for the waste water treatment plant, which again would undergo dilution. So over the entire site, you probably have something on the order of four parts per million, in that range.

**MR. ROMAINE:**

But without dilution, you said the ideal standard would be, you know, three or four milligrams per liter, something of that nature. What does -- does anything that you're recommending now without dilution for any size development come close to meeting your ideal standard?

**MR. DAWYDIAK:**

Our problem has never been couched and presented in that manner. I would have to look through our information to get you an answer on that question. I could say possibly yes, because what we're going to be recommending for sensitive zones is limited technology waste water treatment, which could result in a number of that later, but I would have to run through the numbers before I gave you a definitive answer.

**LEG. ROMAINE:**

As you know, earlier this year in this building I had a seminar, along with the Baykeeper and Councilwoman Trish Bergin from Islip Town, about alternative systems that could be used. I had invited the Health Department to attend. They said they were going to attend, and for some mysterious reason, I can only look across the street, they did not attend. Are you using data from other states about alternative systems to make recommendations about alternative systems, rather than the more lengthy testing procedures that you now wish to do? Have you taken into consideration data from states like Massachusetts, for example, Maryland, and other states where alternative systems that denitrify at a much higher level than we currently have here in Suffolk, have you taken a look at any of that data and made any site visits or recommendations regarding that?

**MR. DAWYDIAK:**

Yes. I personally toured the Rhode Island systems about a year or two ago, and we've looked at data from New Jersey, Rhode Island, Connecticut and Massachusetts as part of our ongoing study.

**MR. ROMAINE:**

And what does that data -- what did that data instruct you about the effectiveness of the alternative systems used in those states?

**MR. DAWYDIAK:**

Most of the small innovative alternative systems are not consistently, meeting ten, that's the generalization. The Nitrex, mainly ten of its designed and operated properly, and there may be other systems that may. But what I can tell you is that most of those states do not require 10 milligrams per liter as a groundwater or a drinking water discharge standard. New York State's more stringent. For example, in Rhode Island their entire scheme was based on mass loading where they required 18 parts per million total nitrogen. So their systems meet 18, they don't meet

10, so that's our issue. So what we're doing right now is that our consultant, as part of the 10-milligram-per-liter study, has compiled all of the data. We're reviewing it to see whether it can meet 10.

We're looking at whether any of these systems need to be fine-tuned and we're going to validate it with our own monitoring to make sure that what manufacturers say is true, because, honestly, the manufacturers have a self-interest, that we in Suffolk County are sometimes a little cynical. We want to look at the data ourselves to make sure what we install is actually going to work. This project has been fast-tracked. It should be done by the end of this year. And the other study dealing with a lesser level of nitrogen removal, which may be cost effective, that's about a year away.

**LEG. ROMAINE:**

Thank you. And I want to thank the committee and the Chair Lady for there indulgence. Thank you.

**MR. DAWYDIAK:**

Thank you.

**CHAIRPERSON BROWNING:**

You're welcome.

**MR. DAWYDIAK:**

And if I could just answer two of your first questions, with your permission.

**CHAIRPERSON BROWNING:**

Sure, go ahead.

**MR. DAWYDIAK:**

Just for the record. In terms of the nitrogen levels being acceptable, if I misspoke, I apologize. The war on nitrogen is kind of finished in western Suffolk with respect to drinking water supply, and in that regard, I think in general, we did a pretty good job in that in Aquifer 4, where the standard is 10, is not a bad result. All of us agree that that's not sufficient or adequate for surface waters. And in certain areas like northwest Suffolk in Huntington, localized areas may need additional concerns where an individual law may be affected.

In terms of the numbers, this is a good place to dispel some confusion. The data sets for '87 and 2005 are very, very different, and they're different for a number of reasons. Some laws have gone online, some laws have gone off-line. The data bases in 1985 were not great, so not all the data was available. Not all the laws were necessarily sampled in each of those years, so you're dealing with apples and oranges in some cases. So the statistical approach adopted by our consultant is for comparative purposes using only the same wells, because otherwise you're dealing with apples and oranges, so --

**MR. ROMAINE:**

Your consultant is H2M?

**MR. DAWYDIAK:**

Camp, Dresser and McKee for this study, CDM. So when you look at the same wells, you are dealing with a 67% increase. When you're looking at total current wells, because some of the newer data shows wells that are sited in areas with higher nitrogen, you're dealing with a higher number.

**MR. ROMAINE:**

Two hundred percent?

**MR. DAWYDIAK:**

Well, it's not 200%, it's a number of 3.4. So what you should be comparing is one to 1.6, which is the same wells. You can't compare one to 3.4, because those are just two different data sets, so that's just a misinterpretation of the data. We don't deny that the increase is significant, we're concerned about it, but it's just not quite that high. So thank you, Madam Chair.

**LEG. ROMAINE:**

Thank you.

**CHAIRPERSON BROWNING:**

You're welcome. And Legislator Vilorina-Fisher.

**LEG. VILORIA-FISHER:**

Thank you for coming here to walk us through this. It's complex and I'm sure I'm going to have more questions at another time. But for the moment -- you know, I was just at the Water Quality Review Committee and I had some questions regarding the TMDL requirements for the SPDES permit on the -- Emerson Hasbrouck will be performing, as you said, going through the sensitive areas and determining where there are septic systems that are not performing or are problematic. And I know that they're not looking at nitrogen, it's looking at {cloriforms}, right?

**MR. DAWYDIAK:**

Coliform bacteria or pathogen indicators, yes.

**D.P.O. VILORIA-FISHER:**

Coliform. I'm saying it wrong. But my question about that is we're going to have before us monies that you spoke of -- the quarter percent monies that will be used, diverted from the sewer assessment to be used for improving our sewage systems. And I was wondering, once the stormwater assessment is completed and the detection of those malfunctioning septic systems are identified, can any of that money be used to mitigate the problems being caused by those malfunctioning septic systems, or can that money only be used for sewer areas?

**MR. DAWYDIAK:**

You're talking about the Stabilization Fund, the Sewer Stabilization Funding?

**LEG. VILORIA-FISHER:**

The Sewer Stabilization Fund, you know, that --

**MR. DAWYDIAK:**

My understanding is that the latest proposal is to allow it to be used for individual on-site disposal system improvements. Now what the criteria are as to whether a failing pathogen system would qualify, that's an issue for the Executive and Legislature to spell out in terms of how this money is actually utilized. But, theoretically, it could be used for individual system improvement, yes.

**LEG. VILORIA-FISHER:**

Okay. Because if we're going to expend all of these resources in identifying them, then maybe we could provide some instance in rectifying the issues there. And the sensitive areas that -- from which he'll begin his study, that Emerson and his group will begin their study, will be those that are identified in this program, in the water management models?

**MR. DAWYDIAK:**

They're related, but they're different. His is based on a surface water runoff, stormwater model based on the Department of Public Works' roadway network, work that Cornell has done. We're mainly considering groundwater transport of nutrients and VOCs. So there's a lot of overlap, but they'll be a little different.

**LEG. VILORIA-FISHER:**

Okay. Now I'm going to, I guess, be a little bit more negative, like my colleague down at the end of the horseshoe here. But, you know, it's very frustrating to me when I look at these charts and the data, and it shows that in the agricultural areas, we have these -- the introduction of so much nitrogen fertilizers, pesticides, etcetera. And, as you know, I sit as a Soil and Water Commissioner, as does Legislator Romaine who recently joined us, and there aren't enough technicians there. There aren't enough people to go out there and work with the farmers in order to get -- to provide the kind of mitigation that we need, and much of that -- you know, we can access state and federal grants to help the farmers achieve the goals of lowering the pesticide and fertilizer use. That's critically important when you look at these charts and you look at the impact of agricultural activity out there. How can we make it clear that some of the money has to be used in that way with the technicians and the -- on our soil and water districts and through the ag stewardship program that Cornell Cooperative leads?

How can -- you know, you heard Becky Weissman saying she's out there pulling the potatoes to -- and putting the bores in to test the soils. She's the administrator of the program and she's out there with the technician in her boots doing the work because we're so understaffed. Can any of the monies be diverted to that kind of work or is it -- I'm very frustrated when I look at these statistics.

**MR. DAWYDIAK:**

I share your concerns and your frustrations. Back in 2000, when we adopted a Peconic Estuary Program, it was a very ambitious program laid out to hire a number of people and do a certain number of farm management plans. And I don't know exactly how we've done. And we've done a good job at a number of them, but I know that we've fallen short of what the objective back then was, so there's a push in the Peconic Estuary Program to re-evaluate that as well. It's an excellent and very valid comment. I think it's something that we're going to have to work on as we finalize a plan, because we probably didn't do a good enough job quantifying what the metric objective was, what was done and what we need to put in.

**LEG. VILORIA-FISHER:**

I'm sorry.

**MR. DAWYDIAK:**

We're going to have to quantify what we think needs to be done to address all of these farms in an adequate way, and the next step is to find a way to support it.

**LEG. VILORIA-FISHER:**

It seems to me the data is clear here in support of the being more aggressive in how we address these issues with agricultural impacts.

**MR. DAWYDIAK:**

I agree with you 100%.

**LEG. VILORIA-FISHER:**

And there are farmers who are waiting in line to be a part of this and we just don't have the technical help.

**MR. DAWYDIAK:**

It was not a major task in our work plan and I think it was a little bit underserved. And I think we need to do a better job in our next iteration on that. Thank you.

**LEG. VILORIA-FISHER:**

And my third question, and, Madam Chair, I promise that this is the last question, and -- but, you know what, looking at, again, Legislator Horsley's legislation and the compromise with the County Executive and whatever CN is coming, and the data that you have shown us, it seems to me unconscionable that we're all using 62% of that money to mitigate these insults, these environmental insults; that we're using 38% of that money for tax stabilization. And I actually believe it runs against the referendum. People voted on this for water quality and environmental protection and we continued to raid it for tax stabilization. And I'm -- I want to vote for this because I believe that it's critically important, but -- and you don't have to answer, it's a policy issue. And I just want to put it on the record that we have been presented with a scenario that shows that we keep going in the same direction. We're going to hit crisis numbers, and maybe uncontrollable increase in threats to our -- the quality of our water. And we are only willing to use 62% of that fund. It's a real problem, and I guess that's because there's no political courage to say, "Let's at least look at our General Fund and an increase, a modest increase yearly so that we can address these issues that are so critical to us." But I did -- I had forgotten my other, but when I heard Legislator Horsley talking, it reminded me of this.

**LEG. HORSLEY:**

I'm so glad.

**D.P.O. VILORIA-FISHER:**

See what --

**LEG. HORSLEY:**

I'm working for sewers, guys.

**LEG. VILORIA-FISHER:**

I know you are, and I'm with you, but we've got to be robust, and we've got to be direct, and we've got to be strong, and we've got to say this is where the money should be going.

But, Walter, you know that I worked very hard on my Homestead Assist Program, and we had very clear guidelines for homeowners on how to water effectively, how to fertilize effectively, and although we're looking at agricultural impacts, residential impacts are tremendous. And there were guidelines, there are laws out there that you can't fertilize after Halloween or before Memorial Day, but I think we have to ramp up our educational efforts with the results that came out of Homestead Assist Program. Is the Health Department looking at that educational piece on -- with this? Is that a part of the plan on how to address this?

**MR. DAWYDIAK:**

It is. I kind of glossed over the County fertilizer law, as well as education and outreach just due to time constraints. The Department of Environment has been in charge of the fertilizer program. We in the Health Department helped them like with enforcement and technical issues. We continue to try and improve that program, and that's something that we're going to need to take a harder look at in the coming months to make better. I appreciate that input, too.

**LEG. VILORIA-FISHER:**

Okay. And we voted 477 to -- the Water Quality Review Committee, the training of landscapers and nursery people.

**MR. DAWYDIAK:**

Yes.

**LEG. VILORIA-FISHER:**

And I think this has to be a major component of that, is reducing the amount of fertilizer that they're using. Thank you. Thank you, Madam Chair.

**CHAIRPERSON BROWNING:**

Legislator Eddington.

**LEG. EDDINGTON:**

Yeah. Well, for the last 20 minutes I thought I was in an episode of Law and Order. Walter, I'm over here. I thought you did an excellent presentation, it was very clear. I understood very little of it. I don't know what four milligrams per whatever million, I don't really know what that means. It reminds me of the budget, the Federal budget when they say "trillions". I don't know what -- I can't relate to that. You know, I try to look at it from here as what my constituents -- if they ask me about your presentation, I'd be like, "Well, here's what I got from it. The water isn't really great, it's not real bad. It could be worse in 25 years if we don't really get our act together." The wine on the North Fork is getting better, so I think I'm going to be drinking wine and importing foreign beer. You know, I just don't really have a good handle on how bad of a problem it is, because when you give me numbers like that, I really -- you know, I guess what I'm saying is I'm trusting in you to make sure that things are going to get better, because I'm not convinced -- I'm not getting a good feeling that it's better.

Legislator Romaine, he was scaring me. I was afraid where he was going, you know what I mean? So I don't know what the answer is, but I'm hoping that the Health Department and you guys are going to take care of us, because right now I'm not convinced we're being taken care of. So I'm going to stop and get a six pack of Heineken on my way home, so.

*(\*Laughter\*)*

**LEG. VILORIA-FISHER:**

He's speechless.

**MR. DAWYDIAK:**

Oh, I didn't hear a question. I'm sorry.

*(\*Laughter\*)*

I appreciate your trust. And I will say that we've been bouncing around internally ways to better present some of the arcane science in terms of graphs and trends, as well as what this means, you know, what's going to wind up killing fish. You know, really, what it means is that if you approach that ten, you're going to wind up with no oxygen and a dead ecosystem. So kind of chilling. That kind of stuff is going to help a lot. And I admit that we're technical people, we did a technical study, we could have done a better job on the outreach piece, and I think that's something we're going to have to work on for the next go-round.

**CHAIRPERSON BROWNING:**

You did good. I'm somewhere between Vivian and Jack.

*(\*Laughter\*)*

Legislator Anker.

**LEG. ANKER:**

Thank you for coming here and presenting, you know, your affirmation. And it is -- it is scientific, and I'm glad that Suffolk County is doing research. You know, I see some strong environmentalists and advocates in the audience, and I'm so glad they're here, because, you know, when I -- before being in this position as a Legislator, I also was working with the environment and the water was my highest priority, and then working with the breast cancer cluster. And I notice, when you showed the map in your presentation, and the pink area that some of the highest nitrates is also the highest -- some of the highest areas of breast cancer. And again, is there an association? I personally think so, but it's something that, you know, we do need to take seriously. And I think, you know, as a county and having that information available to us, we do need to be extremely proactive very quickly. We don't need to wait around until, you know, we have every ounce of data that there is, because there's always going to be more. Someone's always going to have a different opinion about something.

But we know, like you had said in your presentation, that there is an issue with nitrates.

So, again, I hope that -- you know, my office would love to work with your office in some way to help facilitate whatever you're doing to remove those nitrates. And also, what is also bothering me in the water, amongst maybe toxic chemicals that were dumped decades ago by people that we just don't know about, but also the dry cleaning chemicals. I would like to get a better understanding as far as where you feel there -- you know, is it all of Long Island that has -- you mentioned specifically the dry cleaning chemical in the water, in the groundwater?

**MR. DAWYDIAK:**

Yeah perchloroethylene. Yeah, it's a pretty pervasive problem, it's increased. It's a chlorinated hydrocarbon. It's a suspected carcinogen. It's very persistent. Once it's in the groundwater, it lasts a very long time.

**LEG. ANKER:**

Why is that product still available?

**MR. DAWYDIAK:**

Oh, boy.

**LEG. ANKER:**

I mean, is there an alternative product that's available?

**MR. DAWYDIAK:**

There have been alternative dry cleaning approaches proposed. I don't think any of them have panned out as being either cost effective or successful. In terms of industrial solvents, it's cheap, it works well, and it's not banned by the Federal or State government. That's kind of the answer of why it's still available.

The issue of alternative products is a good point, and I think that's something that we need to emphasize with respect to contaminants like perc as we move forward with our plan.

**LEG. ANKER:**

I know this is a sensitive issue, I mean, people have to drink the water, but what happens is, if we don't take every chemical in our water seriously, we are going to get sick, our families are going to get sick, and our -- the constituents of our County are going to get sick. And again, cancer and some of these illnesses, they take a while to show. You know, if you drink something contaminated, it's not going to show until years, if not decades, later. And we do have proof now

that some of these chemicals in our water are carcinogenic.

Let me ask you, how many wells are there in Suffolk County, and how many wells have been closed that we're aware of?

**MR. DAWYDIAK:**

Our study looked at over -- I think the number is 704 public supply wells. I can tell you that over 100 of those have some form of carbon treatment to strip out low level organics. So, when the water is delivered to the customer, it should have no or very trace levels of organics, but there are low levels of VOCs getting into the wells. In terms of the number that have been closed over the years, that's a low number. I don't have that number available right now, but I can get it to you.

**LEG. ANKER:**

Again, just like disease, what I'm thinking as far as how the chemicals affect the body, how the water that -- the chemicals in the -- that had been saturated on the ground take time to get into our groundwater. How -- what is the -- what is the time involved in say a farmer using a pesticide 10, 20, 30, 40, 50 years ago and that chemical getting into the groundwater and then a human drinking that water?

**MR. DAWYDIAK:**

Yeah. Again, it depends on where the source of pollution is and how deep the well is and how far it is. So with a private well, it could be a very short time, you know, well under a year. With a public supply well, we divided our travel times up from zero to two years, all the way to up to 100 years, so it could vary very greatly. I could tell you that pesticides from a susceptibility perspective, we presume that they could hang around for 25 to 50 years or longer. Between the pesticide and their breakdown product, some of which are at least as toxic as a parent compound, so it's a concern.

**LEG. ANKER:**

Are those -- and again, are those pesticides now illegal to use, or is there still pesticides out there that some farmers are using in our area.

**MR. DAWYDIAK:**

There are some currently registered pesticides whereby we have picked up trace levels of detection. This is something that I think we should drill down into further in terms of the data set to better present for the next iteration of the plan. The really bad ones, the Aldicarb, the Dacthal, the ones with the high levels, those have been banned. I want to say that we've banned on the order of 50 to 100 pesticides. I don't have the exact number handy, but a very great number of pesticides have been banned or been deregistered for use in Suffolk County based on leaching potential and/or actual presence in our soils.

There are still 80 that we're picking up, and probably the majority of those are still allowed to be used. There are very trace levels. There's no standards for most of these, so, presumptively, what they use is the unspecified organic contaminant standard, which is typically like 50 parts per billion. So, if you're picking up one or two parts per billion in drinking water, it may not ever be banned. If it's not known to be a health risk and if it's not pervasive in water supplies, the Federal and State government typically don't step in to ban it. That's just the way the drinking water works.

**LEG. ANKER:**

Okay. The type of water filtration system, is it a carbon filter that the County uses?

**MR. DAWYDIAK:**

That's the most common.

**LEG. ANKER:**

And again, hopefully one last question. What also I'm concerned about is stormwater runoff and then all the chemicals getting into the bays and the harbors and the Sound, and then we're now eating the fish, we're now eating, you know, the marine life. Where are we as far as your knowledge with stormwater runoff, and what can we do to improve that?

**MR. DAWYDIAK:**

That is a giant question. Let me just take one step back and kind of tell you where I and we as a Health Department fit into the grand scheme of things.

Dr. Tomarken, who is the head of our health district, is the Commissioner for the Health Department. We're set up by the Public Health Law. We have various powers and duties whereby we're the agent and pretty much strictly responsible for drinking water. So we have a lot of power and authority to unilaterally conduct programs to make sure that the water is as safe as possible. And when it comes to issues like risk assessment, we rely on State health expertise, but ultimately we implement the program.

When it comes to surface waters, it's truly strictly a State issue. The State Department of Environmental Conservation generally is the entity with responsibility and authority to make changes. So, if there's too much nitrogen, for example, the process is that you have to go through the State government and petition them to declare an impairment and come up with a plan. Now we can jump up and down all we want and say that we want to make things different, that we could change little things, but we can't change all things at the County level, and stormwater is another one of those things.

So EPA is attacking this in a phased approach. Phase 1 first dealt with major cities, Phase 2 was most of Suffolk County, which is more diffuse, municipalities, other populations. And there's a series of permitting requirements, which include education, outreach, monitoring. All of these things have to be implemented, and if there's still an impairment at the end of the day, the State's got to do something else. And that's a million dollar question, is what can they possibly do. That's years down the road.

A lot's being done with stormwater. It's a diffuse problem with multiple jurisdictions involved from towns, to villages, to the County, to the State. I think it's fair to say that we in the County, and particularly Public Works, are doing more than our share to address this. I think a whole lot more can be done.

The Peconic Estuary Program's got one really good -- great project called the Intermunicipal Stormwater Project, whereby every municipality has to do an inventory of their data sets and their management measures to make sure that everybody's on the same page, because all these sources from different towns connect to the same water body and have impacts. And after that, the next step is to try and figure out what we're doing to the water bodies and what we're doing to make them better. I mean, there's still a state-wide fish advisory. You can't eat freshwater fish more than once a week anywhere in New York State because of pesticides and metals and other contaminants, and that's just a horrible situation. It is what it is, and that's one that the State controls.

On our level, we're trying to help with regional planning with the Peconic Estuary Program and with our roadway networks. If we have any other suggestions about how to do things better, we welcome those.

**LEG. ANKER:**

I just -- again, I don't want to discourage you, and I hope you're not discouraged, you know, being

in front of us. And we do appreciate that information that you're giving us. And we do all realize that there's a lot more that needs to be done.

And I do appreciate your time. I worked, prior to being here as a Legislator, I worked with Amy Juchatz, and she was absolutely wonderful and she was very knowledgeable about the water system. I know I used to be on Brookhaven National Lab's Community Advisory Board and that also was a very informative group. And I appreciate your time and encourage you to, you know, continue to do your work. But we're here as your Legislators and we're here to hopefully help you do your work, and to raise the bar as far as whether that's a level of -- you know, a safer water for us, or, you know, funding. Whatever we can do to help you, that's what we're here for, and I appreciate you coming. Thanks.

**MR. DAWYDIAK:**

Thank you.

**CHAIRPERSON BROWNING:**

Okay. Dr. Tomarken, you have a comment?

**DR. TOMARKEN:**

Yeah, I just want to make a quick comment. It is a very complex issue and has a variety of factors. And what I'm hoping we'll do is in our summary be able to divide it up into different sections, because at times it's -- the water issue is related to geography. At times, the issue has to do with the toxins that are in the ground. And so there's a variety of ways of looking at maintaining and improving the quality of water in the county. So what I -- and depending on where your district is and what your issues are, you will have an interest in a different parameter.

So, what we hope to do in the final report is to be able to address different -- have it broken up into different sections so that you can look to see what issues are important to you and your area, and that way it will be more comprehensible to the individual Legislator and the public as well.

**CHAIRPERSON BROWNING:**

I think we could spend a whole day just in my district. What I think I would like is I know we talked about trying to get a presentation on the Cromaglass systems, but I think -- I mean, I have a lot of questions and they're more district specific, so I'm not going to do it today. But I think what I would like is in the next month or so, if we could have a presentation on the different types of systems. I mean, you look at the Mastic/Shirley area, where would you put a sewage treatment plant, and how would you sewer that? And maybe looking at other areas, what they're doing. I mean, the Mastic/Shirley area was poorly planned. It's overdeveloped and there is no land to put in systems. And we're talking about the Forge River, so how do you resolve an issue like the Forge River? The only way to prevent the problem to happen again, clearly, we have to clean up the problem that we have today, but how do we change it, and where would we put a sewage treatment plant? Could we even sewer the Mastic community? So I think it would be nice to try and get some kind of presentation on what sources there are, what types of systems there are available for something like this and, you know, County-wide. So with that --

**LEG. ANKER:**

One more question.

**CHAIRPERSON BROWNING:**

Yeah.

**LEG. ANKER:**

Kate mentioned that, you know, again, there's no land in Mastic. In certain areas it's very difficult

to put a sewage -- is there an alternative in water? Is there something that you could put maybe in a water area where there's a bay or something that's not infringing on the aqualife? You know, we don't have the land. I mean, maybe we just have to find the land, that's another alternative. But is there -- you know, we desperately need to clean up the water, whether it's drinking water or stormwater runoff. But again, do you know of anything that could be placed in a -- you know, in the area of water?

**MR. DAWYDIAK:**

Not for nitrogen issues and utrification to date. That doesn't mean that something won't be developed, but right now there's not. For stormwater there's been a lot of work done with storm filter inserts to try and filter out some of those pollutants, and that's mainly going to be bacteria.

In terms of groundwater contamination issues, right now the only way is to get it at the source, which is treating the wastewater itself, rather than somehow dealing with the water infiltration.

**LEG. ANKER:**

Thank you.

**CHAIRPERSON BROWNING:**

And I guess MTBE money, are we using any of that money for cleanup?

**D.P.O. VILORIA-FISHER:**

You know, the lawsuit?

**CHAIRPERSON BROWNING:**

Yeah.

**MR. DAWYDIAK:**

Yes. I'll answer that question in just one second. I just wanted to answer Legislator Anker in another way.

**CHAIRPERSON BROWNING:**

Oh, I'm sorry. I thought you were done.

**MR. DAWYDIAK:**

You could theoretically pump to treat the water, but that would be more expensive than sewerage over time. So if you -- you could remove nitrogen with like an ion exchange resin, if you set up a series of well heads, pumped it, treated it and recharge it, but that would be kind of an absurd thing and it would be fabulously expensive.

In terms of the MTBE money, I did want to clarify. We actually have two pots of money to implement this right now. We have the quarter percent, \$200,000, to do our 50% removal study, and the MTBE settlement money, most of which went to the Water Authority. The Water Authority was kind enough to give us \$200,000 as a sort of gratuity for our data support, and that's going to be used to fund potentially a modification of the report, as well as any other issues that we need to do to begin implementing this plan.

**D.P.O. VILORIA-FISHER:**

Good.

**MR. DAWYDIAK:**

So that money has been accepted by Suffolk County and is available to us. Thank you.

**CHAIRPERSON BROWNING:**

Thank you. And just let me know when you're ready to give us a presentation, if you need a month, two months, whatever.

**MR. DAWYDIAK:**

Thanks, yeah. The Department of Public Works would really need to be brought in here, because they're the folks that are actually doing those big sewerage studies. But we have a waste water expert, we have a couple of them that deal with the smaller systems. So, if you'd like, we can arrange something with both of those.

**CHAIRPERSON BROWNING:**

Sure, that would be great.

**MR. DAWYDIAK:**

Thank you very much.

**CHAIRPERSON BROWNING:**

Thank you. And before we go to the agenda, Dr. Tomarken, I don't know how much you can tell us right now about the health center issue. Are we still in negotiations?

**DR. TOMARKEN:**

As far as I know, we are. And we're all sitting here waiting and I haven't heard anything to date, so --

**CHAIRPERSON BROWNING:**

Okay. Vivian?

**DR. TOMARKEN:**

I have no more information to offer.

**D.P.O. VILORIA-FISHER:**

Is Rick Brand in the room? I heard he heard a rumor.

**CHAIRPERSON BROWNING:**

Okay.

**D.P.O. VILORIA-FISHER:**

Thank you.

**CHAIRPERSON BROWNING:**

Well, I guess we'll ask no more. I appreciate it. Thank you. And now to the agenda.

**TABLED RESOLUTIONS**

Tabled Resolutions: ***1474 - Terminating a consultant contract, Degere Physical Therapy Services (Kennedy)***. Legislator Kennedy?

**LEG. KENNEDY:**

At the request of Dr. Tomarken, Madam Chair -- I'm sorry. At the request of Dr. Tomarken, Madam Chair, I am going to consider tabling this resolution for one more cycle. I received a fairly detailed analysis of the PT function there at the Foley Nursing Home right now. It's got a blend of contract folks and our County employees. I remain concerned about the presence of this contractor at a fairly significant price, but it warrants tabling for one more cycle. So I'll make a motion to table.

**D.P.O. VILORIA-FISHER:**

I'll second.

**CHAIRPERSON BROWNING:**

Okay. That was a second by Legislator Viloría-Fisher. All in favor? Opposed? Abstentions? It is tabled. *(Vote: Tabled 5-0-0-0)*

***1475 - Directing the Department of Social Services to close the sex offender trailer in Westhampton, Town of Southampton (Schneiderman).***

**D.P.O. VILORIA-FISHER:**

Motion to table.

**CHAIRPERSON BROWNING:**

Motion to table, I'll second. Legislator Viloría-Fisher tabled. All in favor? Opposed? Abstentions? It's tabled. *(Vote: Tabled 5-0-0-0)*

***1476 - Directing the Department of Social Services to close the sex offender trailer in Riverside, Town of Southampton (Schneiderman).*** I guess same motion, same second, same vote. *(Vote: Tabled 5-0-0-0)*

1543 we did already.

***1565 - Establishing a County policy to ensure the full operation of all County Health Centers (in 2011) (Montano).*** I'll make a motion to table.

**LEG. ANKER:**

Second.

**CHAIRPERSON BROWNING:**

Second, Legislator Anker. All in favor? Opposed? Abstentions? It's tabled. *(Vote: Tabled 5-0-0-0)*

***1566 - A Local Law to require Legislative approval of major water management policy initiatives (Cilmi).*** The sponsor has requested a motion to table, he wants to make a change to that. So do we need the second?

**LEG. KENNEDY:**

Second.

**CHAIRPERSON BROWNING:**

Second, Legislator Kennedy. All in favor? Opposed? Abstentions? It is tabled. *(Vote: Tabled 5-0-0-0)*

***1587 - Accepting and appropriating 100% Federal grant funds from the New York State Department of Health to the Department of Health Services, Division of Patient Care Services for the Family Planning Program (County Executive).*** I'll make a motion to approve, place on the Consent Calendar; second, Legislator Viloría-Fisher. All in favor? Opposed? Abstentions? It's approved. *(Vote: Approved 5-0-0-0)*

***I.R. 1600 - Requiring Legislative approval to issue any request for proposals for the sale of the County's Certified Home Health Agency License (Romaine).*** And I believe we have a

motion to approve. I'll make a motion to approve.

**LEG. KENNEDY:**

Second.

**CHAIRPERSON BROWNING:**

And I'd also like to be a cosponsor. Second, Legislator Kennedy. And Mr. Kopp.

**MR. KOPP:**

Good evening. Just there was some talk around, just to clear it up. On July 14th, the County did issue an RFP seeking proposals for the sale of the CHHA operating certificate. Those proposals are due back on the 7th of September. Several other counties in New York State have followed this route and the results have been positive for the residents of their communities.

We feel that we had a fiduciary responsibility to the taxpayers of Suffolk County to determine what options exist as we wrestle with some very significant budget issues in the months ahead. Those of us who sit here week after week are painfully aware of all of the pressing needs that are confronting Suffolk County, and it seems that we should not attempt to prematurely foreclose any options that might better provide resources for vital services while providing protection for our taxpayers.

**CHAIRPERSON BROWNING:**

Okay. Vivian, did you --

**D.P.O. VILORIA-FISHER:**

No, go ahead.

**CHAIRPERSON BROWNING:**

Oh, no. I just, you know, wanted to mention you talked earlier about a report that has not been finalized yet and maybe we're jumping the gun a little bit.

**D.P.O. VILORIA-FISHER:**

However, this RFP has already been issued, hasn't it.

**MR. KOPP:**

Yes, it has. It was issued, like I said, the beginning -- in July, July 14th.

**D.P.O. VILORIA-FISHER:**

Okay. And, Madam Chair, I am very concerned about this, and I want to look very carefully as the responses come in, and look and see regarding the contract. We should be very alert as to what's in it, because once we sell that CHHA, we will not have the ability to have some of the programs that are so important, especially to women and children to -- for, you know, visits for prenatal care, perinatal care, infant care. We won't be able to do the kind of thing that we do now.

And, as you know, in my twelve-and-a-half years here, advocacy for those most vulnerable populations has been at the core of my work here, and it's heartbreaking to me that the County Executive and the Department have issued this RFP. We can't react in the moment and not realize the long-range affects that it will have on how we run government in this County and that's what's been going on for the past few years. Everything is a reaction to the momentary setbacks, to the horrible economic situation we're in, and we can't sell off our whole county. We just can't do it, because then what are we? So I'll be looking at this very carefully.

And I'm supporting this resolution because even though in this particular case the RFP is out, it's happening too many times and we have to keep our eyes wide open, and we can't give up our

responsibility as a Legislature. So I thank Legislator Romaine for introducing it.

**CHAIRPERSON BROWNING:**

Okay. So with that, I believe we had a motion to approve and -- oh, real quick, Mary Hibberd Law. I'd like to get an opinion from Counsel. I mean, I'm guessing the RFP doesn't necessarily require --

**D.P.O. VILORIA-FISHER:**

It doesn't trigger it.

**CHAIRPERSON BROWNING:**

Yeah, it doesn't trigger the Mary Hibberd Law, but, if we do do the sale --

**MR. NOLAN:**

Well, the resolution was actually amended on Monday to state that the Legislature would have to approve any sale, and further, that all the -- the Department of Health and any other involved agencies would have to comply with Mary Hibberd before such a sale would happen.

**CHAIRPERSON BROWNING:**

Thank you.

**D.P.O. VILORIA-FISHER:**

Cosponsor, Madam Clerk.

**CHAIRPERSON BROWNING:**

Okay. So we had a motion to approve and I believe we had a second. Did we get -- yeah.

**D.P.O. VILORIA-FISHER:**

I'd be happy to second it.

**CHAIRPERSON BROWNING:**

Okay. So we did have a second. All in favor? Opposed? Abstentions? It's approved. **(Vote: Approved 5-0-0-0)**

***1613 - Adopting a Local Law to ensure full representation of disabled persons on the Disabilities Advisory Board (Schneiderman).***

**MR. NOLAN:**

You have to table that.

**D.P.O. VILORIA-FISHER:**

Table.

**CHAIRPERSON BROWNING:**

Oh, table for Public Hearing, sorry. I'll make the motion to table for Public Hearing; second, Legislator Eddington. All in favor? Opposed? Abstentions? It's tabled. **(Vote: Tabled 5-0-0-0)**

And I guess with that, there are no more issues on the agenda, but I'm going to say a last thing. Donna Brannigan, the bone marrow drive, July 31st, at the Miller Place Fire Department. And for Marcia Jabick, there is a bone marrow drive on July 30th, on Saturday. And I forget where I said that was.

**LEG. KENNEDY:**

Deer Park.

**CHAIRPERSON BROWNING:**

In Deer Park. Thank you. At Deer Park Community Center. So, please, if you can attend, let's get as many people on the bone marrow list. Thank you. And I'll make a motion to adjourn.

**D.P.O. VILORIA-FISHER:**

Second.

*(The Meeting Was Adjourned at 4:54 P.M.)*

*{ } Indicates Spelled Phonetically*