

**HEALTH COMMITTEE
OF THE
SUFFOLK COUNTY LEGISLATURE**

Minutes

A regular meeting of the Health 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, May 5, 2016 at 2 p.m.

Members Present:

Legislator William Spencer - Chairman

Legislator Bridget Fleming - Vice-Chair

Legislator Robert Calarco

Legislator Monica Martinez

Legislator Tom Cilmi

Legislator Robert Trotta

Legislator Leslie Kennedy

Also In Attendance:

Legislator Al Krupski - Legislative District #1

George Nolan - Counsel/Suffolk County Legislature

Sarah Simpson - Counsel/Suffolk County Legislature

Jason Richberg - Clerk/Suffolk County Legislature

Amy Ellis - Chief Deputy Clerk/Suffolk County Legislature

Elizabeth Alexander - Aide to Legislator Spencer

Lora Gellerstein - Chief of Staff/Presiding Officer Gregory's Office

Liz Sutton - Aide to Legislator Fleming

Katie Horst - Director/Intergovernmental Relations-County Exec's Office

Dr. James Tomarken - Commissioner/Department of Health Services

Jen Culp - Assistant to the Commissioner/Department of Health Services

Dr. Scott Campbell - Chief of Arthropod-Born Disease Laboratory/DHS

Deborah Maile - Southampton Hospital/Tick-Borne Disease Resource Center

John Turner - Conservation Policy Advocate/Seatuck Environmental Association

Kevin McAllister - President/Defend H20

Cynthia Amato - Chairperson/SC Legislature Teen Pregnancy Advisory Board

Beverly Jefferson - Member/SC Legislature Teen Pregnancy Advisory Board

Robyn Berger-Gaston - Member/SC Legislature Teen Pregnancy Advisory Board

Maria McCue - Member/SC Legislature Teen Pregnancy Advisory Board

Jeff Sander - Mayor/Village of Northaven

Peter Sartorius - Mayor/Village of Quogue

Robert Hartmann, Jr. - Mainstream House

Dr. Nancy Pearson - North Fork Audubon Society

Angela Huneault - Riverside Rediscovered

Kelly Sharp - Resident of Amaganset

Matt Campbell - Resident of Southold

Diana Van Buren - Resident of Greenport.

Meesha Johnson - Nominee/SC Disabilities Advisory Board - Group D

Ann S. Fangmann - Nominee/Food Policy Council of Suffolk County

Diane Shulman-Rabin - Nominee/Food Policy Council of Suffolk County.

All Other Interested Parties

Minutes Taken By:

Alison Mahoney - Court Stenographer

(*The meeting was called to order at 1:58 P.M. *)

CHAIRMAN SPENCER:

Good afternoon. It's now two o'clock and we are going to begin the Health Committee. If we could all please rise for the Salute to the Flag to be led by Legislator Cilmi.

Salutation

Oh, I'm sorry. In the tradition of this committee, if you could please remain standing, or stand up again, for a moment of silence for our brave men and women who are serving this country, both at home and abroad.

Moment of Silence Observed

(Banged gavel)

Welcome to the Health Committee, and thank you all for your presence. It's great to have our first committee meeting on the East End, and so new faces.

LEG. KRUPSKI:

(Applause).

CHAIRMAN SPENCER:

And we have Legislator Krupski and Legislator Fleming; it's good to be in your home field, so thank you.

LEG. KRUPSKI:

You're welcome.

LEG. FLEMING:

Yeah, you're welcome.

CHAIRMAN SPENCER:

We do have a couple of presentations today, and I know that there's one in particular that there's a time constraint. I just have a couple of cards and as soon as we conclude those cards then we will go right into our presentation.

So the first speaker to begin the public portion is Robert Hartmann, Jr, with Mainstream House and addressing the Narcan issue. Welcome, Mr. Hartmann. Thank you. And please come to the podium. Our committee rules is that you have three minutes to address the committee on any subject that you'd like, so welcome. Thank you.

MR. HARTMANN:

Thank you for having me. And thank you for inviting me, Legislator Krupski. Three minutes, I can say hello in three minutes.

I would like to congratulate the County Health Department and the County for putting together Narcan training for our society. With my recovery homes, we've done training several years ago for the injectable and we brought them to a recent training in Riverhead for the nasal, and I can tell you

in the past year, just in my homes alone, we have saved two lives, and that's just people who are doing the right thing and may have made a bad decision. One point two one deaths per day, I believe it was last year of heroin in our County, is saddening and sickening and we're at a war. We need to continue the training with Narcan. There's a lot of people who say, *Well, you're going to have addicts who are going to be using with Narcan next to them*, which is insane. I can tell you honestly, with being an addict in recovery, that if an addict wants to use, he or she is going to use whether they have Narcan there or not. All right? And it's for the rest of society that can help save these lives.

The other thing is I'm not the President, so I can't call a clear and present danger and burn the poppy fields in Afghanistan. I'm not Trump and put up a wall on the southern border to keep drugs from coming in. I'm just a guy, and this war we're in, this crisis takes all of us. It takes society at large, it takes from education to the penalization of dealers to people helping in treatment and getting the message out from, you know, the family members who are in denial out of fear, or what have you.

But one other thing I would like to mention here. I believe that the Legislator and this committee ought to put more pressure, and I don't know if you are, on the Police Department to make more busts. Okay? It's not going to stop to be the end-all, you know. You're not going to win the war on drugs with a table there, drugs and guns and money and the brass and the DA standing there saying, *Look, we're winning the war on drugs*; that's an illusion. We can help win -- fight, win battles on the treatment of addiction.

I also would like to see more pressure put on the DA where if you're an addict and you're dealing, you're going to get some incarceration, but with a deal that you can go to one of these State-run 12-step camps; You know, Shock. All right? I've seen some great success there. I've been to a graduation there, all right? But then how do you discern between the addict and the dealer? Now, there's some dealers out there that try to take advantage of our empathy as a society and they laugh at us and they go back out to dealing. So there has to be something in place, how do you discern which is the dealer that's taking advantage of a sickness, and the person that's sick that just wants to keep using and part of their continued use is dealing. We can't stop. We cannot stop this fight, we cannot stop voicing it. We're losing the generation, and it takes all of us. Thank you for letting me have my time.

CHAIRMAN SPENCER:

Thank you, sir, for your remarks. And it's extremely important and your words are not lost on myself personally, as the Chair of this committee, that we have to do more, we have to do better. The crisis, although we are aware about it, it continues to kind of flare out of control and we need to -- we need to continue to be vigilant and do better. So thank you.

MR. HARTMANN:

Thank you.

CHAIRMAN SPENCER:

Our next speaker is Dr. Nancy Pearson with the North Fork Audubon Society.

MS. PEARSON:

Thank you for the opportunity to speak. I'm speaking in regard to the plastic bag ban, and I just wanted to reiterate some points made in a letter by our president to address this issue. I'm also speaking for the thousand people from the North Fork who lent their signature to a similar proposal that was given to the Southold Town Board. which their, I think, opinion was that this sort of a matter of a plastic ban prohibition should be dealt with on the County level, and so they basically did not make a decision about it. But that doesn't, you know, minimize the enthusiasm for this

measure on the North Fork.

I just wanted to reiterate, there's at least 267 different species of wildlife that are known to have suffered from entanglement or an ingestion of marine litter. Reducing the impacts of plastics in the marine environment is now a major impetus spurring bag regulations throughout the world. Now, it's estimated that over one million birds and 100,000 marine mammals die unnecessarily each year from plastic debris. Years go by fast, it's been almost four years since Sandy, so we're talking about one million birds a year and 100,000 marine mammals, but that's not fish, that's seals, that's dolphins, that's whales, that's porpoises. I don't even know about fish.

We know that these materials are not really broken down. They come into small, not fully disintegrated pieces, they end up in the marina environment. They can out-compete Plankton in certain areas as a food source, totally non-nutrient food source in the world's oceans. And this wouldn't be a ground-breaking first step ban in any sense of the word, or the world. South Africa instituted a ban ten years ago, Denmark has reduced the use of single bags to about four per consumer per year, cities all over the United States; Austin, Dallas, Washington D.C. -- my son lives in D.C., it's no big deal, they take the bag from the kitchen and they go to the grocery store -- and the whole state of Hawaii, which I would propose exists in a situation not dissimilar to our own. It's an Island, it sits in the middle of the marine environment, its people derive their employment, their health, their benefit from the marine environment. They realize that -- maybe they realize it sooner than we do because the largest plastic ocean dumps, it's not too far from the Island of Hawaii. So maybe they see it more immediately than we do, but they certainly see it and they've banned them in Hawaii.

But we sit in a unique position, too. I mean, this Long Island is on the border of northern and southern eco-region, we're in the middle of, you know, all sorts of wildlife from both regions and it's our duty to protect that wildlife. Suffolk County is the jurisdictional body for that eco-region. So, thank you.

CHAIRMAN SPENCER:

Thank you very much for speaking on that. You know, that's an issue that is very important to me and I really appreciate that information and just also the scientific knowledge. Thank you.

Our next speaker is Angela Huneault with -- speaking regarding the Riverside Rediscovered. So welcome, Angela. And just speak into the microphone and thank you for being here.

MS. HUNEAULT:

Hi. Thank you. On behalf of Riverside Rediscovered, we want to thank you for coming here to Riverside and housing these meetings. It's been very informative all week to come here and experience this. When we did -- when Riverside Rediscovered did a -- asked the community what they would like to see, one of their things was more public health information. With that, we were able to speak with a gentleman from the Hudson River -- I'm getting it wrong -- Hudson River Care, and he's been coming out to our meetings and he's been informing the area of different classes for diabetes and, you know, all different health classes, and we're pairing up with him. So with that, I'd like to say thank you that they're here and for your continued support for health. Yes, that's all. Thank you so much.

CHAIRMAN SPENCER:

Thank you. Our next speaker is Kevin McAllister and speaking regarding defending H2O/plastic bag ban. Welcome, Kevin. It's good to see you again.

MR. McCALLISTER:

Likewise, Dr. Spencer. Thank you. As you may know, I'm a trained scientist. Earlier in my career I lived in South Florida and I want to give you some visualization. I was involved in marine turtle work. Ultimately, in the course of my work with responding to strandings on two separate occasions, large plastic bags, you know, on their backs, 400-pound animals, consumption, making the mistake of a food source thinking this is jelly fish. On another occasion, as a field biologist doing endangered species surveys, I'm out there looking for gopher tortoises and as it turns out, there's a blue herring caught by monofilament upside down on a 40-foot snag, a dead tree. I couldn't look at this. I shimmied up this tree, took a great risk -- it was pretty stupid, actually -- with the tree vibrating, taking out a machete to cut it down, a plastic bag around its foot like an ankle bracelet.

More recently, you know, not responding to the strandings or otherwise, but I'm on the water all the time, I'm on the beaches all the time, I'm in your beautiful parks all the time and, you know, the amount of plastics and bags in particular that are out there, whether it be up in the trees or on the beach, you know, it's omnipresent. And I encourage you -- you know, one of your colleagues had said to me, "*Kevin, you have to count to ten.*" And I wasn't at the prior hearing, but I'm here to say don't let this legislation languish. I mean, this is the right thing. You know, I climbed that tree because it was so egregious that we as humans, you know, ended up causing the lethality of this animal.

You know, this is just really basic common sense. And I'm sorry you have all the blow back from the industry and perhaps the marketplace folks but, you know, they're wrong on this one. You know, to ultimately reverse course in some instances, there has to be an application of dollars here, and that goes to me perhaps in dealing with my sanitary waste or it goes to, you know, a grocery store chain that has to deal with a different form of bags. And quite frankly, when you look at the reusables that we all towed in now, you don't see them out there and they do not have the impact of, again, a plastic carry-out that looks voluminous in the water looking like a jelly fish and seeing -- again, over the course of probably maybe 25 strandings that I had responded to -- marine turtles, you know, to see two dead animals because of this, you know, it's egregious and we have the capability of correcting it. Please, don't let this languish. You know, talk to your colleagues. I hope you get to ten. Thank you, Dr. Spencer.

CHAIRMAN SPENCER:

Thank you, Kevin. And once again, I really appreciate your support and your comments.

Our next speaker is Kelly Sharp with the topic of Lyme Disease. Kelly?

MS. SHARP:

Hello. I actually wanted to speak after the presentation, but while you're calling me, I would like to say that we need better education of our doctors for symptoms of Lyme.

CHAIRMAN SPENCER:

Can you speak a little closer to the microphone?

MS. SHARP:

Sure.

CHAIRMAN SPENCER:

Because it's being broadcast publicly, too.

MS. SHARP:

Oh, okay.

CHAIRMAN SPENCER:

So we want to hear you also.

MS. SHARP:

Two things. Our testing is notoriously bad. So when someone gets tested for Lyme Disease, the doctor needs to tell the patient, *If the test comes back negative, that doesn't mean you don't have Lyme Disease.* In other states, this is a law that the doctors must be aware of and say to their patients, *If a test comes back negative,* because they are so notoriously bad. So we need to put money towards new testing, more accurate testing, and we need to educate our doctors on the symptoms of Lyme Disease. It mimics other diseases and there are over 300 symptoms that the doctors do not put together the whole picture. So there's many, many, many sick people walking around not knowing what's wrong with them, and we need to get on board with this because it's an epidemic. Thank you very much.

CHAIRMAN SPENCER:

Thank you, Kelly. Our next speaker is Matt Campbell representing himself, speaking regarding the plastic bag ban. Welcome, Matt.

MR. CAMPBELL:

Yeah, thank you. I don't want to repeat what many of the other folks said. I do think it's horrible to the animals and it's a complete eyesore to the trees and the highways in our town. I guess my comment would be just in regard to the business argument against why we would want to -- why we would not ban plastic bags. You know, it's my understanding, you know, businesses have to purchase these plastic bags. They essentially give them out for free; again, maybe I don't understand the full picture, but that's my understanding. And if I go into places right now, like the IGA stores or supermarkets, IGA sells the bag for 99 cents. You can bring in your own bag, you buy a bag for 99 cents, it lasts, you know, 10, 20, 30 visits to the store. So to me, it's at least a break-even for the stores, if not a cost savings. So I guess that would be the main point that I'd want to make, other than, you know, catering to the plastic bag industry which really has no merit in my mind. But I don't really see the harm to businesses, and that's all I have to say. Thank you.

LEG. TROTТА:

Doc?

CHAIRMAN SPENCER:

Excuse me, sir. I have a question from Legislator Trotta.

LEG. TROTТА:

Would you be against -- you know, if you banned them everywhere but in the grocery stores, let's say if you were getting produce or meat or chicken, then we gave you the bag, you're allowed to have the bag, where otherwise only meat and chicken. So I estimate probably 98% of the bags would be banned; you wouldn't have them at Home Depot, you wouldn't have them at Wal-Mart, you wouldn't have them in all those other places. But in a grocery store -- because I'm getting a lot of, you know, senior citizens saying, you know, *I like them. I reuse them. Why shouldn't I benefit?* Would you be against, for those two unique circumstances, that they got the plastic bags?

MR. CAMPBELL:

For the produce?

LEG. TROTТА:

I mean, meat and chicken, anything that would leak into those other bags.

MR. CAMPBELL:

Right. Um --

LEG. TROTТА:

Because, you know, I see that as a compromise.

MR. CAMPBELL:

I think that might be a compromise.

LEG. TROTТА:

It would greatly eliminate -- you know, probably 98, 99% of the bags would be gone.

MR. CAMPBELL:

I wasn't expecting that question, but I think that's -- I think anything is better than nothing at this point. So 99% would be good. I have heard the argument, though, that, you know, people bring in bags, they may have some, you know, bacteria or germs on them, but you're putting stuff in the bags, you're not taking stuff out of bags in the supermarket. So I've heard that argument as well, but you're putting things in the bags. And on top of that, people go in with germs on their hands, they pick up fruit and vegetables, they put them back down. So I hear what you're saying, but I think there's other germs that are traveling around within a supermarket that are equal to or worse than somebody bringing in a bag.

LEG. TROTТА:

Well, I'm just thinking if it leaked one time and you didn't clean it out and then you put something else in it, you know. And plus, you're giving the homeowners who do reuse the -- I had a lot of senior citizens calling me saying, *Don't do that because I use these bags again. Why should I be jeopardized? There's already a recycle bin back at the store. I bring my bags back that I don't use and I recycle them.*

MR. CAMPBELL:

Yeah, I've heard that as well. My position on that would be that if you want to go and purchase some plastic bags for some purpose, there is a trash bag aisle. And yes, they cost a little bit, but you would have to purchase that -- you can still purchase a bag, number one. And number two, there's also the argument about, you know, picking up dog waste, they say that's a popular use of the bags. Now that -- I think most parks have those little containers that you buy a bag -- you know, you pull a bag down and you use it.

LEG. TROTТА:

Well, my question is would you be against if it was for poultry or something that would leak, that you would still be able to get the plastic bag?

LEG. FLEMING:

Mr. Chair, if I could, through the Chair, maybe respond to a misunderstanding that I hear?

CHAIRMAN SPENCER:

Absolutely; Legislator Fleming.

LEG. FLEMING:

I just wanted to note, Rob, that the proposed legislation includes an exception for produce bags.

LEG. TROTТА:

Handleless bags. I would want the bags to have the same handles that you have, so that when you did come up there and, you know, you had a chicken or something, that could go into the bag and

you could carry it out. And then that would --

LEG. FLEMING:

Through the Chair. I appreciate -- I appreciate that. I was just concerned that the discussion might have led to some misunderstandings, because those see-through plastic bags that you can use for meat or produce are actually permitted under this legislation. A separate issue from what you're saying.

LEG. TROTТА:

Yeah, I'm aware of that.

LEG. FLEMING:

I appreciate that.

LEG. TROTТА:

I'm aware of that. I just was thinking that, you know, as sort of a compromise, say, Listen, we'll get rid of 90% of the plastic -- 98% of the plastic or 99% of the plastic bags. But as sort of a compromise for both sides, you know, for the seniors who like to have those bags, this might be something that --

MR. CAMPBELL:

I'm probably okay with that compromise.

LEG. TROTТА:

All right, thanks.

MR. CAMPBELL:

Thank you.

CHAIRMAN SPENCER:

Thank you, sir. Our next speaker is John Turner with the Seatuck Environmental Association. Hello, John. Good to see you.

MR. TURNER:

Hello, Chairman Spencer and Members of the Health Committee. For the record, my name is John Turner, I serve as conservation policy advocate for the Seatuck Environmental Association which is located in the Town of Islip on South Bay Avenue at the wonderful Suffolk County Environmental Center which is owned by the County.

The organization has really three prongs to it. One is citizen science where we try to work with the public in better understanding and monitor species of wildlife on Long Island, we do horseshoe crab monitoring, we do river herring work monitoring. You know perhaps the work that we've done right across the road here with the Woodhull Dam, trying to promote the establishment of a fish passage there to allow for the fish to gain access all the way further up one of the major tributaries of the Peconic. And we also have a Conservation Policy Program, and I'm a staff person in that program.

And as you may remember, I spoke before the Environmental, Planning and I guess Agriculture Committee that sent a letter indicating the organization's very strong support for IR 1207 and we urge that the Legislature adopt it. If you want rational for why, I'm not going to go into a lot of the reasons that other people have already quite well articulated, but I want to say just take a look at your own Legislative findings. The preparation of this bill lays out in your Legislative findings; a lot of people gloss over Legislative findings a lot, but you nailed it in the Legislative findings.

CHAIRMAN SPENCER:

Thank you.

MR. TURNER:

You've identified what the impacts are and a very strong rationale for why the bill should go forward, and I think that that's really worth while and you should take a look at it.

CHAIRMAN SPENCER:

Thank you.

MR. TURNER:

From a much broader perspective, I want to say that Long Island's natural environment continues to decline in quality. It's irrefutable, there are signs everywhere we look. If you want to look at water quality issues, the excess nitrogen issues, pesticide contamination, what have you, you know there's a major issue there. To the extent that, again, the County is now considering -- it will come before you at some point in, I guess, reasonable future -- a major measure to try to begin to combat that nitrogen by dealing with on-site systems and funding retrofits and things like that, and we'll play a role in that, too.

So from the water quality perspective, the Island is in trouble. From a water quantity perspective, there's not enough water in the system, we think, to meet all of the environmental needs as well as the human supply needs. The terrestrial systems of the Island are declining due to invasive species and other elicited uses. The wonderful parks and preserves that exist in Suffolk County and throughout Long Island are slowly but methodically becoming kind of homogenized through invasive species and losing some of their quality.

And most notably, I just can say, having been a long -- a life-long Long Islander, seeing that the amount of litter and just the aesthetic impact to the Island has really become of great concern.

(Beeper Sounded)

Everywhere you look you see litter in a way that I didn't see growing up in Smithtown back in the 1960s. Very quickly, on the way out here I started counting at Exit 70 and I counted 29 bags in the trees and on the ground from Exit 70 until I pulled into the center here. I participated in a clean-up on Earth Day way back at Exit 30 which is the Southern State Parkway/Broadway intersection where I live in Massapequa. It is a cul-de-sac like most interchanges are like that. Well, I cleaned up one side of it and --

CHAIRMAN SPENCER:

John, I love what you're saying, but I have to stick to the rules. I'm sorry.

MR. TURNER:

Okay. Thank you.

CHAIRMAN SPENCER:

I'm sorry.

MR. TURNER:

Let me just say one more thing. So we picked up 14 bags. So again, for all those reasons, we think that this legislation in one fell swoop will really help begin to reverse that in a very meaningful way. And again, Seatuck strongly supports and congratulates your consideration of the bill.

CHAIRMAN SPENCER:

Thank you. Thank you very much. I really appreciate that. We are always pleased when we have other elected officials join us, and today we have not only one but two Mayors of our Villages who are with us. And first is Jeff Sander who is the Mayor of the Village of Northaven, and he's going to speak regarding tick-borne disease. Welcome, Mayor Sander. How are you?

MAYOR SANDER:

Thank you. Very good. I'd like to thank the committee here for having these meetings. Northaven's about a small village about 20 miles east of here, and having the meetings here in Riverhead makes it a lot easier for us to attend and I want to really thank you for having them here.

*(*Presiding Officer Gregory entered the meeting at 2:24 P.M. *)*

In Northaven, tick-borne illnesses are clearly the most significant health issue that we have. As I said, Northaven's a small Island. We have had a reputation of being -- having a significant number of deer; at one time people would refer to Northaven as Deerhaven. That probably has certainly added to the problem of tick-borne illnesses where we are. About three or four years ago, at the coaxing of many of our neighbors, we decided to get very seriously trying to address the issue in Northaven, and we put together a small task force, came out with a set of recommendations and we began implementing those. We started with a more aggressive hunting program to try to reduce the density of deer on the Island. We also have implemented, we're in our second year of using Four Poster Programs that Shelter Island used with some success. The -- and we have been doing this very aggressively we've noticed at least visually that it seems to have diminished the density of ticks.

The thing we need help with and the thing we don't do very well is figuring out how we're doing; we need a measurement program that can do that. And we would like to ask the County's help for -- to help us come up with a program for collection, measurement and testing even of ticks for the degree of infection. You know, when you reduce the deer, you get rid of a lot of ticks but there's one school that says you may have just as many infected ticks because the disease is transmitted more extensively by white-footed mouse and other rodents.

I was happy to see the task force report that was published by the County, I've been going through that and there are probably some good ideas in there we'd want to implement. But one of the things that was noted was that the County had ten strategic areas that they've been doing measurement. You know, I'd like to certainly encourage the County to include Northaven as one of those. We are an Island that's contained and I think we can be a great basis for determining how things are working and what things aren't working that can be applied across the rest of the County. So I would like to work with you on that and see if we can gather some help in our measurement program and in our testing program.

CHAIRMAN SPENCER:

Thank you. Thank you very much. Any questions for the Mayor? Thank you very much. We also have with us the Mayor of Quogue Village, Peter Sarteris. Sartorius? I hope I pronounced your name correctly.

MAYOR SARTORIUS:

Sartorius.

CHAIRMAN SPENCER:

Sartorius, okay. Thank you for being with us. And you're also addressing the tick issue, so thank you.

MAYOR SARTORIUS:

Yeah. First of all, I want to echo Mayor Sander in thanking the whole Legislature, but also Legislators Fleming and Krupski for arranging to have these meetings here. I think it's fair to say that I wouldn't be here probably if they were not in Riverhead, so it's very convenient. And my real two reasons for coming; one is to see how you all operate, because I don't think I've ever been to a Legislative meeting before for Suffolk County. And also on the topic for today's meeting, or one of the topics, I'm really here to learn and find out a little bit more about what the County does in terms of controlling tick-borne illnesses. And I don't know if it'll be touched on today at this meeting, but certainly mosquitoes are on the mind of a lot of people in Quogue and elsewhere, particularly given the Zika Virus publicity that unfortunately we've had over the past year or so. And I did note that the task force report did touch on Zika as well. So I'm really here to listen and learn and also thank you all for being here.

CHAIRMAN SPENCER:

Thank you. Now that we're meeting out here, I hope that we'll be able to see you regularly. So thank you. Thanks for your kind words. I have one last card and that is from Diana Van Buren, also speaking regarding the plastic bag ban.

MS. VAN BUREN:

Hi. My name is Diana Van Buren, I'm a past President of the North Fork Audubon Society and I'm here to address the plastic bag ban, which we started working on collecting signatures to support a plastic bag ban several years ago; we've got at least a thousand and that's just in Southold Town. And Southold Town government said that they would not consider a plastic bag ban until the County did something.

I would say that, also like John Turner, I grew up in Smithtown and, you know, the trash today along roadsides is not biodegradable, that's the problem, and so we see every bit of it. And the main reason that most municipalities ban plastic bags is when they have oceans, rivers and lakes around them. And since we have more coastline and water than anywhere else in New York State, it seems like we should be leaders in this department because it afflicts ocean animals, fish, and also our water quality.

Eliminating plastic bags, single-use plastic bags would also reduce the pressure on landfills and waste management which is another issue out here. And when I heard that Southold Town was having problems with people mixing plastic bags into their recyclable trash, because it impacted the trash sorter, that it was getting -- clogging it up, I was like, *I can't understand why we are not banning single-use plastic bags.*

Another reason is when people talk about the economic impact, on the north fork it's really about tourism. That's one of the main drivers of our economy. Do people want to see plastic bags on the beaches and caught in trees and along roadways? Our strength is not necessarily maintenance either when it comes to plastic bags or picking up trash. You'll see somebody go through and mow, somebody will mow a roadside and they will not have gotten off of their tractor or whatever it is to pick up the plastic bags. So then you have shredded plastic bags mixed in with the grass clippings on the side of the road. So for those reasons, I think it's a good -- we should be doing it.

Last, whole countries across the world have banned plastic bags; China, Denmark, Ireland, Whales, Italy, Scotland, Germany, England, South Africa, Uganda, Botswana, Kenya, Ethiopia, India, France, Paris -- the City of Paris has banned plastic bags, so why can't we? Thank you.

CHAIRMAN SPENCER:

Thank you. I really appreciate all those who came out today for your comments. That's all the cards that I have. If there are no other speakers, we'll close the public portion at this time.

I did want to acknowledge the presence of our Presiding Officer, DuWayne Gregory, who is a member of all committees by virtue of his position, but he came out to be here and be a part of this particular committee and I appreciate his leadership, his presence and your support. Thank you, Mr. Presiding Officer, for your presence today.

P.O. GREGORY:

You're welcome.

CHAIRMAN SPENCER:

So we have a presentation, two presentations. One is from the Suffolk County Teen Pregnancy Advisory Board who completed their report and they did a lot of hard work on that. Prior to them coming and filling us the findings of their report, we have the Tick-borne illness presentation, and we have the camera that's here that's filming that that's on a tight schedule, so it's been requested that I have that presentation first. And I do appreciate the members of the Teenage Pregnancy Advisory Board, we will definitely get to your presentation. But at this time, I'd like to invite Deborah Maile to come forward with Southampton Hospital, Director of Infectious Prevention. Please have a seat at the table. And welcome, thank you for being here. Do you have someone joining you also who would like to come up? Please come up and join her at the table.

MS. MAILE:

Okay, thank you.

CHAIRMAN SPENCER:

And there are a lot of other members in the audience who are here regarding this issue and Legislator Fleming has letters of support and the organizations that you represent and she's going to paraphrase your letters at the end of the presentation. So welcome, and thank you.

MS. MAILE:

Thank you very much for inviting us. My name, like we told you, is Deborah Maile, I'm from the Tick-Borne Disease Resource Center from Southampton Hospital.

In 2013, our hospital noticed that there was deficit in the knowledge and education on tick-borne diseases in our area and for our community. As an Infection Control Director, one of my jobs is to report all of Lyme, Ehrlichiosis, Babesiosis to the State. And I was seeing an enormous amount of positives, so much more, probably 100% more than I saw at my other job which was more on the north shore. And so going to the CEO, I was like, *I'm not really understanding this. Why is the tick disease out here so amazingly high?* I have never -- I've lived here my whole life and never seen this. So we got together and in 2013 we started what we call the Tick-Borne Disease Resource Center; what it is is a telephone hotline and it's educational programs. The hotline answers any calls. We're open Monday through Friday, because that's when we work, Rebecca and I. If you have a tick, you have a question about a tick, if you want to be sent to a doctor that can help you with some ticks. We started out with very simple, easy questions, and this disease or diseases has expanded so much. And as you've seen people come up here and talk about it, it's not a simple disease anymore.

What we do is we'll find out where you live, kind of what your insurance is, where can we send you. So we have a list of names and places, and we work mostly on the South Shore. We have a whole list, a Medical Advisory Panel, we have a Scientific Advisory Panel, we're working with some gentlemen that have NIH grants out of Stony Brook on tick disease. We're serving not only the public, we're also serving the medical centers out there. We educate the physicians that we have within our hospital and we do outside education of physicians for the very reason that -- I think it was Kelly who brought it up today -- that a lot of people don't know how to treat this. We think it's

simple because I see it every day and I talk it every day, but for some doctors it's not so simple.

We wait -- we're raising public awareness by holding educational symposiums in the schools, and it took us a very hard and long time to get into the schools. We kind of got in there the back door with a substitute teacher who is now doing education -- well, it's a great puppet show on ticks and what to do if they see a tick and how to talk to their parents about ticks. We do education over at the horseshoe and that's out in the Hamptons. We set up a booth, we do a puppet show, we give out all kinds of free things.

We have done medical education, public education. We have -- coming up this year we have many, many public education events; Train Your Eyes to be Tick-Wise, the Riverhead Garden Club, Quogue Library. Anyone that calls will pick one of our medical people on the board and they'll go and do a presentation, a talk, education, answer questions.

I'm passing out tick kits which is another little thing that we give out. It's a little kit; if you find a tick on you, it has everything you need to take the tick off you, take a look at it in the magnifying glass, there's a card in there that can help you determine what to do with the tick. If you want to have someone tell you what the tick is about, what kind of tick it is, there's places that you can do that. So right now what we're thinking in the future is what we would like is a tick center where people would call and I can send them somewhere right now, go to the walk-in center and get it taken care of. Because as you know with the health field, sometimes it takes a little time to get to see a doctor. So we're trying to get you there quicker, sooner to be seen.

So that's pretty much what we're about. I've added into that kit for you some tips on prevention. The number one thing that we can do in any kind of medical problem is prevent it. And so I speak to my residents when they come to me, I speak to people on the field, I speak to people in stores when they start talking about ticks. So it's become kind of our thing, Rebecca and I. I tell you when you go out into the grass, you go outside running with the kids, you want to go down to the beach, you need to do a full body check. If you find a tick on you that's been on there and it's been feeding off of you, there's a time period before you can get tested. Like I think it was Kelly who brought it up; you can't get tested right away, we need to be able to count antibodies when we draw your blood. So that's what's so great about having the tick call center. You can call me and say, *I got bit on this day. What should I do*, and I'll walk you through the steps. I'll tell you what doctor to go to, I'll tell you what's a great doctor in your area so that you have a little sense of now control about this disease, because this disease can be debilitating if we leave it go.

We need help in the Tick-Borne Disease Center. We would like to expand. There's always a budget that we have to look at. So we're here to help our community. We're talking to people on the north and the south shore, the North Fork and the South Fork, it's not just in Southampton now. I've been talking to people in Canada, Florida, China, Japan. In Southampton, people go all over the world is what I'm finding, and so they'll still call. So we -- our phone number has been out there and we're trying to do the best that we can. So we're here to help. Any questions?

CHAIRMAN SPENCER:
Legislator Fleming.

LEG. FLEMING:

Thank you so much, Ms. Maile, for coming and sharing your information and for everything that Southampton Hospital has done for this really insidious and serious public health threat. You didn't mention the phone number; what is the hotline number?

MS. MAILE:
726-TICK; T-I-C-K.

LEG. FLEMING:

So 726-T-I-C-K.

MS. MAILE:

Yes.

LEG. FLEMING:

It really is a great resource. I've actually used the kit a number of times, both for my dog and for my son, because it does have the magnifying glass in it. So if you have it on you all the time, if you're in one of the areas like ours where it's such a threat, it's very, very handy to have.

MS. MAILE:

It is a handy tool.

LEG. FLEMING:

Thank you.

MS. MAILE:

Question?

LEG. KRUPSKI:

Thank you. That was very good.

MS. MAILE:

Thank you.

LEG. KRUPSKI:

I'm probably not the only one here who's ever had Lyme's Disease a couple of times, so I know how serious it is and how the diagnosis, early diagnosis, how important that is.

We had a very good presentation on Monday at the Environment, Planning & Agriculture Committee about the deer population and how the deer is such an important host for ticks. And there's -- and obviously there's two places in Suffolk County where there are no deer and no ticks. So, you know, do you have any thoughts on that? Do you work with any kind of wildlife management control groups? Because you try to reduce the population of ticks, so -- and obviously you think that you're not going to blanket or carpet spray the whole East End of Long Island to try to just -- in hope to kill some ticks. So do you have any ideas on how to control, you know, to reduce the population of the ticks?

MS. MAILE:

Well, my husband's a hunter, so the first thing you need to do is get rid of deer, unfortunately, because they are beautiful. But we should have one to two deer per one to two square miles, we have over ten. So our population in deer out here is ten times what it should be, which is why we're seeing a lot of deer-borne, tick-borne diseases. So we're not just talking Lyme, we're talking Ehrlichiosis, Babesiosis, Anaplasmosis, okay? We won't go into some of the crazier ones because we haven't seen them.

The ticks are brought in and they feed first on the mice, and then the mice help spread those ticks. The deer are the ones that are carrying it afar. So in the tip sheet, what we talk about is really cleaning up your yard. Don't have the wood pile, don't have the large grasses, keep things short and cut down, okay, so there's no place for these little animals to live and there's nothing that the deer want to eat. I mean, most of us can't have gardens anymore because the deer will eat everything. They eat all of your plants, so a plant -- maybe do plantings where the deer won't be

eating them, okay? More Long Island plants. We don't go into more deer management because that's really not our focus; our focus is medical, that kind of thing. We do work with quite a few doctors and one of the other gentlemen in our group, they go and they do deer tick counting; they'll take a white sheet and they'll count to see what's out there at that moment, because different times of the season, different ticks are out. All right?

So at this time, no, we're not really doing deer management. We're just trying to stop the disease on this end rather than -- that is just way outside of our realm right now.

LEG. KRUPSKI:

Thank you.

CHAIRMAN SPENCER:

Legislator Fleming.

LEG. FLEMING:

Thank you, Mr. Spencer. Through the Chair, just in response to Legislator Krupski's question, we do have members of the Department of Health here who are going to be speaking on -- we actually have -- well, I should say the proposed budget includes a new Capital Program 2017 which is -- allocates funding for equipment for tick-borne illnesses. And I think Dr. Campbell from the Health Department can talk a little bit more about what the vision is in terms of determining some of the questions with regard to the hosts, the type of ticks, the diseases that they carry and where they're located.

CHAIRMAN SPENCER:

Dr. Campbell, could I invite you to come up and be part of the discussion? Good afternoon. Thank you, Dr. Campbell, for being here. I also want to acknowledge Commissioner Tomarken, Commissioner of the Department of Health who's also here with us. Is there any -- do you have a formal presentation or just remarks you'd like to add as far as this issue from the Department of Health's perspective?

DR. CAMPBELL:

Actually, we have not prepared a formal statement. We just wanted to be here to support the committee and the presentation on tick-borne illnesses and to answer any questions that might arise.

CHAIRMAN SPENCER:

Thank you. Legislator Fleming has a question.

LEG. FLEMING:

Thank you for being here, Dr. Campbell. If you could just explain the thinking behind the funding for CP 2019, what exactly we're thinking of doing in terms of the beginning of tackling a real data-driven, scientific approach to how to attack this public health threat.

DR. CAMPBELL:

Well, as some of you know, there have been two tick task forces to date -- the first one concluded the final report in 2008, we just concluded ours at the end of last year -- and both of them recommend a tick surveillance program, both for tick populations as well as looking at tick-borne pathogens to better assess the risk to Suffolk County residents in various areas of the County. And the idea behind the Capital Project was to complement the equipment that is already in the lab and with the anticipation of increasing our ability to do some in-house testing for tick-borne pathogens.

LEG. FLEMING:

And can I just note that this final report of the Suffolk County Tick and Vector-Borne Diseases Task Force is on-line and you can find it at [Suffolk County.gov/departments/healthservices](http://SuffolkCounty.gov/departments/healthservices), and if you look for documents and forms there, you can see that. But one of the recommendations is that we have adequate funding to do the testing.

I think one of the problems, of course, is that you have a number of different diseases, a number of different hosts, a number of different habitats and a number of different ways that each of those -- oh, and also different stages of life which pose separate threats, and all of those have a different path into the human health landscape to impact human health in those -- right now in our area, those three very serious diseases.

So I think the smart people at the Health Department and also Public Works that's been working on this for some time in the Vector Control Program recognize that we need a data-driven, really scientifically based understanding of what's out there before we can design a really sensible and effective approach to attack this human health threat.

So I think that's probably the thinking behind it. If you wanted to add anything to that, Scott, I don't know.

DR. CAMPBELL:

Well, we have begun a surveillance program this year, as was mentioned, with ten sites throughout the County. It's a baseline program with getting the whole lab up and running with regards to looking at the County-wide surveillance and the tick-borne pathogens. To date, most of our analyses have been done cooperatively with CDC, State Health. So, you know, when you have another component involved like those agencies it's wonderful, but their resources are limited, their view of the problem is much wider. So by having it in our laboratory, we'll be able to look at Suffolk County and only Suffolk County, and from western Suffolk County to eastern Suffolk County as well. So that's the advantage.

LEG. FLEMING:

I hope you also heard, by the way, Scott, Mayor Sander suggesting Northaven as a very good place. I mean, I think many people in my district will raise their hand and say, *My backyard's the best place*, but the point that Mayor Sander made about the unique characteristics of Northaven are really good ones.

DR. CAMPBELL:

I heard (*laughter*). Thank you.

CHAIRMAN SPENCER:

Legislator Trotta.

LEG. TROTТА:

How much money are you asking for?

DR. CAMPBELL:

The proposed budget, I believe, is \$100,000.

LEG. TROTТА:

And we've had two studies; you know, one in 2008 and this one. I don't -- what are you going to do? I mean, it's insects. I don't see -- you know, short of us killing them with pesticides, I don't know.

DR. CAMPBELL:

Well, we're structuring --

LEG. TROTTA:

Am I missing something?

DR. CAMPBELL:

-- that surveillance program, like our mosquito surveillance program. You can't be everywhere to kill them or to reduce the risk, so you have to know where the risk is highest and target those areas. If you just start picking locations, the resources are better spent looking for the highest risk individuals, populations, locations. So that's the idea of looking at the tick population and their corresponding tick-borne pathogen levels to see where the true risks are.

LEG. TROTTA:

So you're saying -- like where I live, there's deer everywhere in Kings Park. You know, my neighbor's got Lyme Disease, my wife had it. You know, it's from Huntington to, you know, the both forks. I don't -- and so you're saying maybe there could be more Lyme Disease in the East End than the West End even though there's more ticks? I'm not following it.

DR. CAMPBELL:

Well, as Legislator Fleming said, it's very complex. So there's hosts, there's ticks, tick stages, so it's very complex ecology. But what you want to do is look at where the highest risk is in whatever stage or whatever species of tick. So by looking at those locations, you can make educated decisions on how to approach the issue.

LEG. TROTTA:

What was this report we just did? I thought that was supposed to do that.

DR. CAMPBELL:

It was recommendations for action.

LEG. TROTTA:

How much did we spend on that report?

DR. CAMPBELL:

Nothing, other than time for County employees, but most of it were non-County employees.

LEG. TROTTA:

And what is your ultimate -- I'm missing the end point here. So there's more ticks with Lyme Disease in Huntington than there are in Montauk, and then you spray Huntington?

DR. CAMPBELL:

Again, it's not looking at individual yards, it's looking at places that are populated with regard to general public parks, those types of locations. Everybody is responsible for their own yard, we wouldn't be doing on the yard level. But we'll be looking at parks, refuges, things like that that would have a tick population so we would know that in the general area of Kings Park, in this park, the infection rate and the risk is X; compare that to the risk in Riverhead at this park. So if the County were to do something or we could advise Suffolk County parks, State parks, Quogue Wildlife Refuge, if we have data from those types of areas, how to proceed and how they might want to proceed.

LEG. TROTTA:

Well, let's take Sunken Meadow. On any given weekend there's 25,000 people there, probably 24,000 of them don't live in Suffolk County. So how are you going to monitor if people up in the Bronx or Queens or Brooklyn who come out to this park get Lyme Disease?

DR. CAMPBELL:

A lot of those types of areas have education. They try to educate visitors so they are aware when they enter those locations what the risks may be so when they go back, they do the proper tick checks and they try to prevent. It's a personal protection level strategy at that point. We actually just printed the tick brochure, I know you all received it, but we have it in Spanish as well and all Legislators will be receiving a bundle of each to distribute to their constituents and we're going to be distributing it other ways.

LEG. TROTTA:

Were they working on a vaccine for Lyme Disease? Weren't they working on that years ago?

DR. CAMPBELL:

There is, there is a vaccine in the works, it's in European trials through Stony Brook University. That's all well and good, but the issue is there are other diseases. So you still have to be concerned about tick bites, and just because you have a vaccine for one tick-borne illness doesn't mean that you're protected from them all.

LEG. TROTTA:

I just don't see -- you know, we're spending all this money on this stuff, I don't know what the outcome would be. I mean, they're ticks and they're everywhere. I don't know what you could do.

DR. CAMPBELL:

Well, again, it's looking at tick populations, comparing it to human population in Suffolk County and seeing what that risk might be and trying to reduce it.

CHAIRMAN SPENCER:

And the other thing that's important, Legislator Trotta, that I can tell from you a medical perspective, one person with Lyme Disease, when you look at just the medical cost of that alone can cost \$100,000. So even if this research leads to some prevention, which it could on a massive level, you've already recovered your savings. Again, in terms of the cost is relatively small, Lyme Disease, hospitalization and treatment one time can easily be \$100,000.

LEG. TROTTA:

I realize that. I just don't see, you know --

CHAIRMAN SPENCER:

Legislator Fleming also has asked if she could.

LEG. FLEMING:

Yeah, I would just -- Legislator Trotta, I would just note that, you know, you say there have been these other reports, but this proposed Capital Project is the very first time that there have been -- that we would have a dedicated funding stream for research in terms of where these diseases are coming from specifically.

And if I could just finish, Rob. The reports that we've had, while they've said, *Yes, we have a problem. Yes, we have a problem*, they've never been backed up by the resources to allow us to have a real dataset with regard to what is happening; which ticks are carrying which diseases where and at what stage of life. Because there are different solutions. You have the Four-Poster, you

have, as you said, the spraying, you have, as you said, the culling of the deer. There are different hosts that carry these ticks in different places. So unless -- I mean, we can talk about it till the cows come home or the deer come home, but we're not going to have a real --

CHAIRMAN SPENCER:

(Laughter).

LEG. FLEMING:

Thank you, Doc. We're not going to have a real strategy that's going to have teeth and that's going to get us some solution and we're going to see this public health crisis continue to grow until we've dedicated the resources to let scientists like Dr. Campbell make their findings based on what's actually out there. And with an evidence-based strategy, we have a better chance than we've ever had to really tackle this problem.

LEG. TROTТА:

Didn't the DEC do a big study on this?

LEG. FLEMING:

There has never been a study that's focused on the problems of Suffolk County, and Suffolk County is suffering under these problems more than many, many, many other counties throughout New York. So we need a dedicated approach right here in Suffolk County.

CHAIRMAN SPENCER:

You're good? I have a list; Legislator Krupski, then Legislator Kennedy. Tom, did you want to be on the list?

LEG. CILMI:

I do not.

CHAIRMAN SPENCER:

Okay.

LEG. KRUPSKI:

Thank you, Doc. So the question is, you know -- and you're going to do the surveys and I know you did the surveys last year of the tick populations, ten different areas. Would you then make -- is there -- in my mind, as someone who is obviously in an area that's susceptible to getting a tick bite -- and I understand not all ticks carry infectious disease, and I've been bit by many ticks that obviously haven't carried infectious diseases because I haven't been infected every time I've been bitten by a tick. Are you going to make recommendations for -- well, there's -- you know, we -- there's 400 ticks in that area that we measured. If we reduce the number to 100 then it's safe. I mean, is there anything -- is there any safe beyond zero ticks, that's my question. Because the one tick that bites you is the most important one if it's carrying some infectious disease, so anything above zero is dangerous.

DR. CAMPBELL:

Again, if you start with the infection rate and the risk, then you know how to approach the problem. Is it a deer issue? Is it a rodent issue? Is it a path issue? Is it a physical barrier? Are people -- are there no really manicured paths that the people are going onto and that's why they're being exposed? By just doing those simple changes in a park, you can reduce the risk and exposure to somebody that is just taking a walk through a park.

So again, I think, as with mosquitoes, it's best to know what the level of risk is, see what the issues are that are contributing to that risk and then address it that way. I think every location is going to be slightly different.

LEG. KRUPSKI:

Thank you.

CHAIRMAN SPENCER:

Legislator Kennedy.

LEG. KENNEDY:

Thank you, Dr. Spencer. Dr. Campbell, you do excellent work. I've had to, as a Legislative Aide, call your office for a few mosquito-borne illness questions, so I have no doubt that with ticks, you will do equally as well.

Two quick questions, as I have not read the second report. This study will only be done on the East End folks. Not that I have anything against the East End, I love it, my mother-in-law lives in Orient, we go out all the time. While the East End has a tremendous amount of deer population, I live in Nesconset, I get deer in my sump and deer in my backyard quite frequently, and I have a son who years ago had two episodes of Lyme which is what caused him to go to school to become a physician, it was so miserable and so costly. I think the study needs to be done on both ends of the Island. I agreed with whoever it was who talked about culling the heard, it needs to be culled a bit.

DR. CAMPBELL:

Right.

LEG. KENNEDY:

So that's my first question; is it just out east?

DR. CAMPBELL:

No, the ten locations are scattered throughout Suffolk County. There have been sites selected in each township.

LEG. KENNEDY:

Okay.

DR. CAMPBELL:

So we are covering the County.

LEG. KENNEDY:

Okay, that's very good. And my second question is you will be doing the dissections and the microscopic studies yourself or you will be sending them out?

DR. CAMPBELL:

At this point, we are collaborating with the State Health Department, but they're only willing to do a certain amount.

LEG. KENNEDY:

Number.

DR. CAMPBELL:

And so we are sending up what we can and we are going to attempt to do the rest.

LEG. KENNEDY:

I have great faith you can do it.

DR. CAMPBELL:

Thank you.

LEG. KENNEDY:

Thank you.

CHAIRMAN SPENCER:

Thank you very much for that presentation, for the information. I can see that this is extremely important and there's health, public health implications. But it also really goes to quality of life as well as productivity, economic impact, and this is a big reason that we should be taking this issue very seriously. Legislator Trotta.

LEG. TROTТА:

Yeah. What are you going to do in this study?

DR. CAMPBELL:

Again, we're going to assess the level of risk at the locations that we test. So we'll have basically an index at the locations that we're able to analyze.

LEG. TROTТА:

What does that mean?

DR. CAMPBELL:

It will give us an idea of what pathogens are present. There are others --

LEG. TROTТА:

I want to know specifically what you're going to do. Pick a thing in Smithtown or Quogue, you're going to set up a trap; what are you going to do?

DR. CAMPBELL:

No. Well, the ticks are collected by flagging. The ticks are brought back to the laboratory, they're ground up and analyzed genetically for the presence of the pathogens that they would be capable of transmitting. So for example, like the deer tick would be analyzed for *Borrelia burgdorferi*, the pathogen for Lyme Disease.

So let's say with the ten sites we would be able to have an idea, are the infection rates in Huntington similar to the infection rates in East Hampton, and then that would give us a baseline. And this information will be used not only by the Health Department, but also as part of the Vector Control plan to give an idea of how to approach the development of that plan and how to address those types of questions.

LEG. TROTТА:

Okay. So you're going to -- how do you physically collect them, you take a sheet or something?

DR. CAMPBELL:

You take a piece of cloth, a one-meter square cloth and you drag it through the underbrush. The ticks are questing and will attach to the cloth, you take them off with forceps and put them in vials and take them back to the lab for analysis.

LEG. TROTTA:

Okay. And who picks these locations?

DR. CAMPBELL:

Who picks the locations?

LEG. TROTTA:

Yeah.

DR. CAMPBELL:

Well, the locations are picked, currently the ten are locations that won't change much over time, so they're generally public areas; parks, State, County, Town. And then -- that's the initial approach, because you don't want to pick a location that's going to be developed, let's say.

LEG. TROTTA:

So let's say you're in Quogue and you go through a grass field and you pick up ten ticks and you go to Islip and you go through a grass field and you pick up two ticks.

DR. CAMPBELL:

Right.

LEG. TROTTA:

How long are you spending at each spot?

DR. CAMPBELL:

You spend the same amount of time. The common denominator is the amount of time that you use to collect. So let's say you collect ticks for five minutes and in Quogue you catch 200 and in Huntington you catch two, then you know what the exposure rate is. Then you look at the infection rate.

LEG. TROTTA:

You're kidding me, right?

DR. CAMPBELL:

Then you look at the infection rate and now you --

LEG. TROTTA:

What if you happen to spend the five minutes in a spot where there's a lot of ticks and five minutes in the other place where there's not and a hundred yards away there is?

DR. CAMPBELL:

Well, you do like transects, so you know -- you assume that the whole area is similar in its ecology.

LEG. FLEMING:

It's called science, Rob.

LEG. TROTTA:

I don't think that's an accurate way of doing it, I just don't think that. Because in the western part of the town it could be more developed or less developed as in the eastern part of the town.

DR. CAMPBELL:

Well, if it's developed you're not going to find ticks. I mean, you have to look for, you know, an edge of, you know, some sort of property where it's not developed, like where you have woods or

leaf litter or something like that. And most parks in the west have that that type of ecosystem.

LEG. TROTTA:

I mean, I can go in my backyard and get ticks any -- you know, every day, but I don't know that you picking a spot for five minutes indiscriminately is a good indication if there's ticks there.

DR. CAMPBELL:

I mean, over the years we have been able to find locations almost everywhere. Where there are ticks we will find them, if they're present in that location. It's something that -- it's like fishing; you kind of get a sense, a search image for where those ticks are found.

LEG. TROTTA:

And some fisherman are better than others.

DR. CAMPBELL:

I've been doing it for over 20 years, I think I'm not too bad at it.

CHAIRMAN SPENCER:

Legislator Martinez.

LEG. MARTINEZ:

Good afternoon and thank you for being here. I just have a couple of questions, and I'm not sure if you answered Legislator Trotta's questions in terms of the township and the location of the township, and how did you determine the spot that you will be collecting this data from. So let's say, for example, in the Town of Islip, what location have you determined that you will be testing there?

DR. CAMPBELL:

We have more than ten, so we haven't decided exactly which ones we're going to whittle down. But again, they're public locations that are generally parks, and so we have a few in several townships, in each township, as backups. So I don't want to actually go through a list, but there are locations in each township that will be tested.

LEG. MARTINEZ:

Will you be able to send us that information?

DR. CAMPBELL:

Sure.

LEG. MARTINEZ:

Okay. And the other thing, I'm not sure if it was asked or if you even said it, but how many cases of Lyme Disease have we seen here in the County?

DR. CAMPBELL:

Well, if you look at the report, in 2014 I believe it's 200 -- I don't have the report in front of me, Legislator Fleming does I think, right?

LEG. FLEMING:

I certainly do.

DR. CAMPBELL:

It's actually decreasing for Lyme Disease, but everything else is increasing. And it's believed that -- and there are publications out there that look at the number of Lyme cases and it's not

accurate. There's not accurate reporting to -- by health individuals, health providers, health care providers, so those values generally are not thought to be accurate. Publications indicate that Lyme Disease is about ten times more than what is actually reported nationally. So it's probably what is going on in here, if not a greater amount, but it is underreported, it appears to be underreported. Because the other diseases that are carried by the deer tick that are associated with Lyme Disease are not decreasing, those are increasing. So it's circumstantial, but it appears that there is an issue with reporting.

LEG. MARTINEZ:

Okay. Thank you.

DR. CAMPBELL:

You're welcome.

CHAIRMAN SPENCER:

So Legislator Fleming was just going to wrap up. I really appreciate your time and --

DR. CAMPBELL:

You're welcome.

CHAIRMAN SPENCER:

-- you know, it's just a very important endeavor, and thank you. And Legislator Fleming has letters and different groups and she was just going to give us a brief summary.

LEG. FLEMING:

I appreciate the patience of the committee for this important issue, but I did -- we did receive a number of letters that I'd like to enter into the record. And rather than reading all of them, I'd love to just summarize, if I could, Mr. Chair. We got -- is that okay?

CHAIRMAN SPENCER:

Absolutely.

LEG. FLEMING:

Okay. So we did receive a letter from Southampton Hospital, the Director, the Clinical Director of Southampton Animal Shelter Foundation, Terri Meekins who explains that the most prevalent documented tick-transmitted diseases for domestic animals is the same as for humans; Lyme Disease and Anaplasmosis, Babesiosis and Ehrlichiosis and recommends some prevention products. But she also emphasizes the importance of preventing the transmission of tick-borne illnesses from pets to humans which is another concern.

We received note from the East Hampton Trails Preservation Society, the president of that society. Her notes said hike attendance during the peak season is down, that people are choosing instead to engage in less risky outdoor activities like cycling, and that we are at risk of losing trails through thousands of acres of preserved lands in East Hampton because of fear or lack of interest and declining interest.

We heard from the Friends of the Land Pond Greenbelt who report that participation in hikes, clean-ups and restoration work has declined over the past five years due to the tick-borne disease epidemic. She notes that it impacts the ability to enjoy over 300 miles of trails in Southampton. And we heard from the President of the South Fork Natural History Museum who notes that attendance data shows that in the past five years, average participation has dropped significantly because of tick-borne illnesses.

I just would like to note for the record that, you know, imbalance in ecosystems is happening all over the world, whether it's from climate change or habitat destruction or natural cycles. But we have a severe imbalance in the tick population, it's causing a serious public health crisis. I'm very delighted that we're finally looking to allocate real resources to addressing it. We have a few things in our favor. First of all, we have an incentive to get it right. We in Suffolk County have spent millions and millions of dollars to preserve open space and on our natural resources, and access to that engine that drives our economy needs to be supported. We also have a lot of talent, as we know from our scientists in the Health Department, from the folks in the medical community, from people in the community at large. And this proposal I think indicates that there's also a political will to allocate resources and to get it right.

It's my hope that at some point, you know, folks in Connecticut or California are going to look to Suffolk County and say Suffolk County has gotten its tick population under control and look to us as models. You know, we just need to keep our shoulder to the wheel. There's obviously a lot of commitment and a lot of support for this. I'm personally committed to it and I do think that we can get it right.

So, Mr. Chairman, I really appreciate the opportunity to look at this today. We'll continue to do it, and thank you for everyone who's participated. Thank you.

CHAIRMAN SPENCER:

Thank you. Dr. Campbell, if you have a moment, Legislator Cilmi wants to speak to you privately, just a couple of questions.

LEG. CILMI:

No, not privately.

LEG. FLEMING:

He has a question.

CHAIRMAN SPENCER:

Okay.

LEG. CILMI:

Not privately, it was just a question. Legislator Kennedy mentioned, something about the Doctor's work or help in terms of the mosquito issues, and I wondered if you could talk to us at all about the Zika Virus and what the Health Department is doing cooperatively with the Department of Public Works, through Vector Control, to address that for the upcoming season.

CHAIRMAN SPENCER:

If I could. I'm so sorry, and I'm happy to have that information. I -- because of the request, I do have a group of folks that came out and I'm an hour beyond their time. So I don't know if you can give a brief answer now, but I did promise the other presentation, I have to move on. And we can come back to it, I don't want to ignore the Legislator's request. So Dr. Tomarken, please.

COMMISSIONER TOMARKEN:

We submitted our Zika action plan required by the State. Actually, ours was considered the best in the State and it's going to be used as a model. We're still in an area in New York where the Eighties Aegypti, which is the mosquito that is in Brazil spreading the disease, is not in New York. But we do have the Eighties Albopictus, that is being tested to see if it does -- if it can become a competent vector; in other words, it can transmit the disease. Because it's one thing to have the disease in the mosquito, it's another for it to be able to transmit it to another human being.

All the cases in New York State are from travelers, there are no endemic cases. So right now -- and the season has not quite started, as you can see by the weather. So we're ready to go. We have traps specifically for the Eighties Albopictus and we'll be evaluating them and the State is working closely with us on all these different endeavors.

LEG. CILMI:

And I suppose you'll continue to update the Legislature and the committee as time progresses.

COMMISSIONER TOMARKEN:

Absolutely.

LEG. CILMI:

Okay. Thank you. So there should be no cause for alarm at this point among our residents.

COMMISSIONER TOMARKEN:

No, you should view this as you would any mosquito-borne disease and mosquito issue; you take as many personal precautions and around your house and you personally as an individual. But one of the things about this mosquito that we're looking at, the Albopictus, it doesn't fly very far, it's a couple of hundred yards. So it's a different channel of fish than the West Nile mosquito-carrying viruses. So, but there's no need to panic. There is no cases that have not been in New York and they're only from travelers. So at this point, there's no need to be more concerned than we already are.

LEG. CILMI:

Okay. If you would very simply summarize for me, maybe for the rest of the Legislature in an e-mail, you know, the current state of affairs with respect to that, maybe some of the things that we have to look out for or whatever so that we can share that information with our constituents, that would be appreciated.

COMMISSIONER TOMARKEN:

Certainly. And there's a great deal of information on our website.

LEG. CILMI:

Thank you.

CHAIRMAN SPENCER:

Thank you, Commissioner. Thank you, Legislator Cilmi.

I'm very proud today to have the results of some of the action that we've taken in the past. We established a Teen-Age Pregnancy Advisory Board through legislation and I've been fortunate to work with a great group of women representing different expertise and different areas throughout the County that have come together and have worked very hard. They've been chaired by Cynthia Amato and they're with us here today. They met, they determined what the problems were, they worked to look at solutions, they defined it and they generated recommendations, and they've formally submitted their report to this Legislature and they are here to present their findings. So Cynthia, would you please come forward? On the committee, Beverly Johnson, I think is present with us today. Beverly, would you come up?

MS. AMATO:

Jefferson; Beverly Jefferson.

CHAIRMAN SPENCER:

Jefferson. I apologize, I should know better. I actually -- Reverend Pearson was also part of this board, Officer Claudia Delgado, Robyn Berger-Gaston, Larry Philips, Stacey Lesko, Christopher Wyner, Annette Bernard, Cynthia, which I already said, Carol Want and Maria McCue. So thank you very much.

As Chair of the Health Committee representing the members of this committee and the Legislature, we really appreciate your volunteerism; they're all volunteers. They really did the job well. They had a summit, the summit was well attended, it was geared towards professionals who are addressing young people who are young women, who this is a concerning issue. And I think this was initially put into place by Legislator Fisher, was it who started this?

MR. NOLAN:

I think so.

LEG. ANKER:

Yes.

CHAIRMAN SPENCER:

And we were able to kind of continue the work. So with that, Cynthia, welcome. And if you could summarize your findings and introduce -- or just if any comments from any of your fellow board members, if they have anything they would like to say, they can do that at this time.

MS. AMATO:

Great. Thank you, Legislator Spencer. I don't have to do much in my presentation, you kind of did a summary of what I was going to talk about. But the purpose of the Suffolk County Teen Pregnancy Advisory Board, as Legislator Spencer mentioned, is to continue the research of the task force. And the purpose behind the group and my fellow board members -- who I thank profusely, they do a lot of great work with me to bring about the summit that we did last year -- but our purpose is to promote education and outreach on teen pregnancy and related issues, to advocate for increased access to family planning services for sexually active youth and to recommend best practices to help young people, particularly those in marginalized groups, to avoid risky behaviors including those that put them at risk of pregnancy. So again, it's about risk and prevention, and that's kind of our mission.

So what we have accomplished in 2015, we did our first summit where we had over a hundred participants -- around a hundred participants of professionals that we were able to educate on the issue; what's happening County-wide, what's happening Statewide, what are some resources available. And the group was able to put together a resource guide to provide to those professionals working with young people, adolescents, that are at risk of pregnancy and STDs and HIV infection. So that resource guide was also developed and approved by Legislator Spencer, and I assume the committee as well.

Moving forward for action, we also started in 2015 a process of developing surveys. We want to continue to research on this issue, so we developed a survey to survey the school districts, given to the school Superintendents and other key personnel within the school districts, to see what they're doing in terms of the education; whether it's -- how comprehensive of an education are they giving in health to target this issue. And we had a number of presentations come into our board meetings throughout the year, one in particular to review the Health Smart curriculum which most districts in Suffolk County had been given years ago and may still be using. So that's the purpose of that survey, is to see what they're currently doing, if they're still utilizing the Health Smart curriculum which has been determined to be a very comprehensive curriculum, and what supports do they need in addition to what they're currently doing and what other programs that could potentially help them

do more prevention. And there are a number of community-based organizations that provide those services and some of them are on the board with me.

We also are still in the process of and the goal is to get these surveys out within 2016, and one of the other surveys is to survey faith-based organizations on those same issues. It's more of a touchy subject, but we still know that they have people in their congregations that are pregnant and do need the assistance as well and we want to be able to support them and provide these resources as well.

For 2016, we do want to plan a second annual summit. How that's going to look we're not quite sure yet, we're still working out the details, but one of -- a couple of the ideas was potentially doing a summit for the youth themselves and continue that education, educational process; we want to complete the survey project; we want to increase school and community collaboration on prevention efforts; we want to provide recommendations and best practices to increase graduation rates of pregnant and/or parenting adolescents; and also increase support for those parenting adolescents. There's not much support and funds for the community-based organizations that work with pregnant teens to support those parenting adolescents as well, so we want to continue those efforts.

We want to provide an update on the worsening STD epidemic and the importance of routine screenings. We want to increase the access to family planning; if the adolescents are going for family planning and they're being educated by the medical field, they're more likely to know about their health and avoid those risky behaviors and keep them from getting into those situations where they may become pregnant.

We also want to review the Health and Human Services Office of Adolescent Health National Call to Action, Adolescent Health; Think, Act, Grow. They have identified five essential items for supporting adolescent health, so we want to be reviewing those things and how to potentially implement that throughout the CBOs in Suffolk County and through the Legislature as well. And then we also want to potentially promote the development of a County-wide app on the smart phones for health and wellness, specifically targeting adolescent health.

And as you may have seen in our annual report, the recommendations; develop a social media campaign, including that County-wide app, to have more presence in the County on the issue of teenage pregnancy, have greater coordination of community-based organizations, providing prevention education and those working with pregnant and/or parenting teens, of course increase funding for support services for pregnant and/or parenting adolescents and expand focus of the board to adolescent males who are also affected by teenage pregnancy. It's not just the females, and I feel like the fathers and the males in the County have been neglected in terms of their supports on this issue.

CHAIRMAN SPENCER:

Well, once again, just let me say thank you for your hard work and, you know, I would like to just give you a round of applause.

Applause

MS. AMATO:

I give the board a round of applause as well.

CHAIRMAN SPENCER:

Just a couple of comments and questions. The first comment is that they came up with practical recommendations. You dealt with a very sensitive topic, that there are obviously cultural and religious sort of issues that you have to handle very delicately. And what I like is that some of your

recommendations -- because they were able to do this with a budget of \$5,000, they really did it through just really hard work; and I have to mention Jennifer Mish from my office that provided some support. But with your recommendations, utilizing Health Smart is brilliant because it's already an existing program that's in place, it saves money, it doesn't create more infrastructure, but also taking advantage of technology to be able to get the information out and in a form that is identifiable to the young population that we're working with. I also think it's very practical and thinking out of the box. So you really should be commended for your work, and I plan to continue to support you.

I also have to -- in addition to my office, I need to mention Legislator Monica Martinez who also came aboard as someone that's a leader in bringing the resources of her office and her presence and her attendance, so thank you. She's going to continue to work with you moving forward. So it is a very important issue. It can change a young person's life, a family's life, the direction of their life forever. But also we recognize the importance of all life and just how to make that life, to give them as much opportunity as possible, and that's really what our goals are here, at least my personal goals.

So with that, are there any other questions from my fellow board members? Are there any other comments from any other members of the board? Again, I will say Beverly Jefferson. And I should know better, I actually had the privilege of going to college with her niece who is a dear friend of mine who's actually a U.S. District Court Judge.

MS. JEFFERSON:

She's the first African-American woman Federal District Judge in the State of Massachusetts.

CHAIRMAN SPENCER:

In the State of Massachusetts, so pretty -- and she presided over the Whitey Bulger case. So, you know, quite a celebrity, so I should have gotten her name correct; and I'm sure she's going to tell my friend Denise that I called her Johnson. So, I apologize for that. But again, thank you, and we'll continue to work and support what you're doing. Any other comments? No? Thank you again.

MS. AMATO:

Thank you for your support.

CHAIRMAN SPENCER:

All right. We're going to move on to our agenda, and we're going to **Tabled Resolutions:**

IR 1000-16 - Adopting Local Law No. -2016, A Local Law to increase awareness of dry cleaning chemical use (Hahn). The public hearing is still open. Motion to table. Seconded by Legislator Trotta. All those in favor? Opposed? Abstentions? ***Motion is tabled.***
(VOTE: 7-0-0-0).

IR 1151-15 - Adopting Local Law No. -2016, A Charter Law to elicit public input and require Legislative approval of fee changes (Cilmi). The public hearing is still open. Motion to table by Legislator -- I'm sorry?

MR. NOLAN:

It's closed.

CHAIRMAN SPENCER:

The public hearing is closed. I'm sorry, the Chairman's agenda is incorrect.

D.P.O. CALARCO:

Motion to table.

CHAIRMAN SPENCER:

Motion to table by --

LEG. FLEMING:

I'll second the motion to table.

CHAIRMAN SPENCER:

Second the motion to table.

LEG. CILMI:

I'll make a motion to approve.

CHAIRMAN SPENCER:

Motion to approve by Legislator Cilmi.

LEG. TROTTA:

(Raised hand).

LEG. KENNEDY:

Second.

CHAIRMAN SPENCER:

Second. Okay, the motion to table takes precedence. All those in favor? Opposed?

LEG. CILMI:

Opposed.

*(*Legislators Trotta & Kennedy raised hands in opposition*)*

CHAIRMAN SPENCER:

Abstentions? The tabling motion prevails; one, two, three, four and three against, okay.

Tabled (VOTE: 4-3-0-0 - Opposed: Legislators Cilmi, Trotta & Kennedy).

IR 1207-16 - Adopting Local Law No. -2016, A Local Law prohibiting the distribution of plastic carryout bags used in retail sales (Spencer). We have heard from industry, we've heard from local businesses, a very hot topic issue. We have some amendments that we are putting in place which will require us to have advertise a public hearing on this, so we are going to table. Second to tabling?

LEG. CILMI:

Second.

CHAIRMAN SPENCER:

Legislator Cilmi. All those in favor? Opposed? Abstentions? ***Motion is tabled.***

(VOTE: 7-0-0-0).

IR 1266-16 - Approving the appointment of Meesha Johnson to the Suffolk County Disabilities Advisory Board – Group D (County Executive). Is Meesha here? Meesha, I am so sorry to keep you waiting so long. Please come up. Thank you for being here with us.

Welcome, Meesha. Thank you. Thank you for being here.

MS. JOHNSON:

Thank you for having me.

CHAIRMAN SPENCER:

We really appreciate your time, especially I understand that being a person with a disability and just the extra attention and time that it requires, your willingness to serve a public is very admirable. Thank you for being here. And I'll make a motion to approve. Is there a second?

LEG. FLEMING:

Second.

CHAIRMAN SPENCER:

Second. So Meesha, if you would not mind, just take a moment to introduce yourself, tell us what part of Suffolk County that you are from, and if there's any other information you just would like to tell us about yourself. We do have your resume.

MS. JOHNSON:

Okay.

CHAIRMAN SPENCER:

So you can -- it's just a chance to introduce yourself to the committee.

MS. JOHNSON:

Okay. Well, my name is Meesha Johnson, I am a member of the Town of Southampton, I am currently residing on the Shinnecock Indian Reservation, I am a travel member. I am an alumni of Suffolk County Community College and I am currently a student at St. Joseph's College pursuing my Bachelor's Degree in Psychology. I'm also endeavoring to get my accredited substance and alcohol abuse certification, my CSAAC.

I'm actually looking forward to participating in internship hours at a local rehab center, hopefully -- I'm looking at alternatives right now. I'm also a single mother of a daughter who's 15 at Southampton High School. And I'm a member of the National Federation of the Blind. I was just recently a student intern at Suffolk Independent Living Organization, and I actually just had a meeting with representative Krupski about transportation. So, you know, I do a lot, you know, but I'm very passionate about, you know, all the things that I do, so to me it's not work at all. So thank you for having me.

CHAIRMAN SPENCER:

Meesha, I have a 15-year old daughter and she's a great kid, she doesn't rebel, she's an honor student, she's almost a national swimmer, and it's very difficult. So the fact that you have a 15-year old daughter and we share that in common.

*(*Laughter*)*

CHAIRMAN SPENCER:

So, I'm sure your daughter is great also.

MS. JOHNSON:

She is.

CHAIRMAN SPENCER:

So I have admiration, just knowing what I go through (*laughter*). So, thank you.

MS. JOHNSON:

Thank you.

CHAIRMAN SPENCER:

In any case, definitely, again, thank you for being willing to serve. We are -- you know, this is more of a formality than anything else. We are really more appreciative of your time as opposed to really approving -- you already have our approval. Legislator Fleming.

LEG. FLEMING:

I just want to make a note, it's great to have a member of the Shinnecock Nation participating in the committee, so.

MS. JOHNSON:

Thank you.

LEG. FLEMING:

I'm Legislator Fleming, I represent the 2nd Legislative district.

MS. JOHNSON:

Yep, I know (*laughter*).

LEG. FLEMING:

So, glad to have you aboard, Meesha. Thank you.

MS. JOHNSON:

Thank you. Thank you so much.

CHAIRMAN SPENCER:

All right. We have a motion and a second. All those in favor? Opposed? Abstentions? **Approved (VOTE: 7-0-0-0)**. Congratulations, you've been passed by the committee unanimously. Your name will go in front of the full Legislature on Tuesday, but you don't have to appear, I don't anticipate there being any issues. Thank you again.

MS. JOHNSON:

Okay, great. Thank you so much again.

CHAIRMAN SPENCER:

You're welcome.

Moving on with our agenda, IR -- **Introductory Resolutions:**

IR 1326-16 - Declaring the month of May as "Neurofibromatosis Awareness Month" in Suffolk County (Stern). I'll make a motion to approve.

LEG. CILMI:

Second.

CHAIRMAN SPENCER:

Seconded by Legislator Cilmi. All those in favor? Opposed? Abstentions? ***Motion is approved (VOTE: 7-0-0-0).***

CHAIRMAN SPENCER:

IR 1328-16 - To appoint member to the Food Policy Council of Suffolk County (Ann S. Fangmann) (Hahn). Is Ms. Fangmann here?

MS. FANGMANN:

Yes, here.

CHAIRMAN SPENCER:

Hello. How are you?

MS. FANGMANN:

Good, good.

CHAIRMAN SPENCER:

Good. Please come up. And I'll extend the same apologies to you also for keeping you waiting, but thank you. And again, we have the benefit of having your credentials, but we appreciate your ability and your consideration for serving. And I'll make a motion to approve.

LEG. FLEMING:

Second.

CHAIRMAN SPENCER:

Second by Legislator Fleming. Ms. Fangmann, would you please introduce yourself for the committee?

MS. FANGMANN:

Sure. Thank you so much for having me here today. Good afternoon. I'm the Executive Director of Sustainable Long Island which is a non-profit organization here on Long Island that promotes economic development, environmental health and social equity for all Long Islanders. We have facilitated downtown revitalization efforts in numerous communities, advised elected officials at all levels, linked millions of dollars in investment with communities in need, and emerged as a regional leader in the efforts to identify solutions to Long Island's food access crisis.

Promoting health and nutrition is vital for all Long Islanders who seek information to help them make better food choices. Efforts to provide more health choices at schools, work sites and in general must be given real consideration. Consumption of fresh, healthy foods is necessary for nutritional and healthy well-being. Members of Sustainable Long Island staff have consistently taken leadership roles with the Suffolk County Food Policy Council, and I am proud to be formerly appointed today, and together we will be able to continue to draw attention to these important issues and take steps to improve and strengthen the regional food system. And I thank you for having me here, and if you have any questions, I'm here to answer.

CHAIRMAN SPENCER:

Thank you. Are there any questions from any members of the committee? No. And, you know, I know that it takes a lot out of your personal time. And my big issue with the Food Policy Council that I always ask anyone that we are appointing is that at the same time that we have an issue of families that are food poor on Long Island that rely on our shelters and every week don't know how they're going to have enough to feed their families, we waste up to 50% of food in our country based on food that is discarded because it is not the size and shape that is appropriate for retail sale, food that's left in the ground to rot because of inefficient harvesting techniques, food that is disposed of because of early expiration dates, restaurants that throw away very good food that they could possibly use but because of concerns of, I guess, litigation or liability. So do you have any thoughts about this issue? In a country that wastes 50% of our food, have you heard this issue; is

it a concern of yours?

MS. FANGMANN:

I have. And it's interesting, I just saw a film this morning, *Just Eat It*; I don't know if you've seen it, but it's a documentary out there addressing this very issue of -- really, most of the food out there, the expiration dates that you see isn't the true expiration date of the food itself. And beyond baby formula, there really is no reason why the true expiration date, you know, would not be on that food. But, you know, *Just Eat It*, the documentary, does go through a lot of those issues.

What I will say is that, I mean, it's absolutely a concern here on Long Island and both nationwide, the amount of waste that goes into the system. Sustainable Long Island, over the years we've had many food equity programs in place. One of the most -- one of them that, you know, I'm not sure if anyone's familiar with here, is a youth-staffed farmer's Market Program out in Flanders; probably Legislator Fleming is very familiar with that. But it's really having access to food and healthy produce in what we call food deserts which are these areas that within a mile, there's really no access to fresh produce. There may not even be a supermarket. There may not even be a bodega where you can take a look at something like putting in healthier choices.

And another program that Sustainable Long Island has been working with for years now is our Health Corner Stores Program, in partnership with Cornell Cooperation Extension and Island Harvest and others, where we take a look at those small corner stores and being able to provide those resources to have healthier options there in those stores. And there's just so many issues that we continue to look at on Long Island and I'm very proud of the work that my staff does at Sustainable Long Island covering these issues.

CHAIRMAN SPENCER:

Wow. Wonderful. So you will be a very welcome addition to our Food Policy Council.

MS. FANGMANN:

Thank you so much.

CHAIRMAN SPENCER:

Thank you. We have a motion and a second. All those in favor? Any in opposition? Any Abstentions? Congratulations.

MS. FANGMANN:

Thank you.

CHAIRMAN SPENCER:

Your appointment is confirmed unanimously and you'll have to go before the full Legislature on Tuesday, but you don't have to appear.
Thank you.

MS. FANGMANN:

Thank you so much for having me.

CHAIRMAN SPENCER:

You're welcome.

I'm going ask for a motion the take IR 1394 out of order. Second by Legislator Fleming. All those in favor? Opposed? Abstentions? We now have **IR 1394** in front of us, **(To appoint member to the Food Policy Council of Suffolk County (Diane Shulman Rabin)(Hahn))**, and that's because it's another appointment. Is Diane Shulman Rabin here? Hi, Diane. Please come up, and thank

you again for your patience and your time, and I'm sorry to keep you so long. So I'm going to make a motion to approve. Is there a second?

LEG. KENNEDY:

(Raised hand).

CHAIRMAN SPENCER:

Legislator Kennedy. All right. Welcome, Diane, and please introduce yourself.

MS. SHULMAN-RABIN:

Thank you. I am the owner of Jerry Shulman Produce Shipper, we are the last independent potato packer based on Long Island. This is a business my father started, he was Jerry Shulman back in the 50s, I took over for him when he wanted to retire. So we're very involved in supporting local produce, supporting the local farmers, working with them to possibly get ap certification to up the standards to meet some of the standards that grocery stores and schools are asking for.

What brought me to the Food Policy Council? Five years ago I was asked by Janet Sklar, who was then the Food Service Director in the Bay Shore School District, to start a program selling local produce to the school districts on the Island, which she claimed she had been -- I shouldn't say claimed, she had been trying for ten years to put together, to no avail. I told her it wasn't a problem, we could set it up. We're working with the downstate facility in Brentwood; without that facility we could not implement this program. It started out with selling produce to -- or making local produce available to 40 school districts who were part of the Lacinda Co-op. It's now this past year been opened up to all of the school districts on Long Island, including private schools.

Our focus with this program is to get the word out to the school districts, to the PTAs, to the food service directors that there is local produce available, they can buy it through us coming through the downstate facility where they're picking up their USDA orders anyway, so they don't have to have a separate pick-up location. And we're very interested in supporting this and seeing it grow for the local schools as an educational opportunity for the kids and their families. Again, in places where there is no fresh produce offered or kids have never had broccoli, you know, things that are grown on Long Island that are a staple in many of our houses.

CHAIRMAN SPENCER:

Wow. What a wonderful program and a practical solution to a problem that we all face. I'm curious to get your point; and again, this is 100% support of what you're doing, the need is there. And my wife, she's head of the health and welfare portion of the parent teacher association for our school district, and they went through kind of a similar sort of push to get fresh produce in the school and they lobbied the board. And one of the issues with their fresh produce was once they got it in place -- and it was somewhat more expensive but they did it in a very smart way. The issue was that when dealing with school-age children without their parents there and when there was a selection, a lot of times they found when they served the healthy foods it was left on the trays, because there was not a Mom or Dad there to say, *Eat your vegetable. Eat your fruit.*

MS. SHULMAN-RABIN:

Right.

CHAIRMAN SPENCER:

I don't expect you to have the answer to that, but I didn't know if you had any sort of off-the-top-of-your head response. You know, we can get the produce there at really -- *(laughter)*.

MS. SHULMAN-RABIN:

How do you get them to eat it?

CHAIRMAN SPENCER:

How do you get the kids to eat it? Maybe we'll have to get a note from home (*laughter*).

MS. SHULMAN-RABIN:

Surprisingly, when the kids don't have parents there, they're willing to try something new. For instance, Janet had a program, they created a fresh broccoli salad with local broccoli and they brought kids in, they had a special program, I don't remember what age the kids were from this Bay Shore elementary school; the kids loved it. If you put it there, they'll try it. But what one of the districts did, Three Village in particular has a very creative food service director; she put a turnip on the table, like in the hallway near the 3rd grade classes and said, *We're going to have an essay contest. What is this?* I mean, ask an adult what a turnip is or show them a turnip, they don't know. And they had some very, very creative responses from the kids; one kid said it was an alien, you know, there were a lot of cute responses. But once they had put some effort into thinking about what it was, the kids were willing to try the food that this food service director was buying.

So it's really educational. If the parents get involved, if the PTA, the school districts get involved. I mean, it's a lot of extra work for the food service directors because they're buying from another entity, but there is support amongst parents and even the kids to try these new foods.

CHAIRMAN SPENCER:

Great. Thank you. Any comments or questions from any of my colleagues? Seeing none, again, thank you for being here. We have a motion and a second. All those in favor? Opposed? Any abstentions? **Approved (VOTE: 7-0-0-0)**. Congratulations, Diane. We definitely appreciate your time, once again.

MS. SHULMAN-RABIN:

Thank you very much.

CHAIRMAN SPENCER:

And thank you for your willingness to serve.

MS. SHULMAN-RABIN:

My pleasure. Thank you.

CHAIRMAN SPENCER:

Thank you.

All right, returning back to ***IR 1335-16 - Amending the 2016 Adopted Operating Budget to accept and appropriate 100% additional state aid from the New York State Office of Mental Health to Family Service League and Federation of Organizations for the purpose of emergency non-recurring funding (County Executive)***.

LEG. KENNEDY:

Take the money.

CHAIRMAN SPENCER:

Take the money; Legislator Kennedy likes to take the money, and place on the Consent Calendar. Seconded by Legislator Martinez. All those in favor? Opposed? Abstentions? **(Approved and placed on concept calendar (VOTE: 7-0-0-0))**.

IR 1336-16 - Amending the 2016 Adopted Operating Budget to reallocate 100% state aid from the New York State Office of Mental Health for Personalized Recovery Oriented Services (PROS) providers (County Executive). Same motion, same second, same vote.

(Approved and placed on the Consent Calendar - VOTE: 7-0-0-0).

IR 1364-16 - Requesting legislative approval of a contract award for Administration and Management Services for Point of Distribution Clinics for the Department of Health Services, Division of Public Health (County Executive). Motion by Legislator Fleming?

LEG. FLEMING:

Sure.

CHAIRMAN SPENCER:

I'll second the motion. On the motion.

LEG. FLEMING:

Thank you. I just wanted to note, I noted that the award for this point of distribution clinics went to Brookhaven Hospital, and obviously there's a concern with regard to services on the East End. I'm assured by the Department of Health that Brookhaven would send point of distribution to the East End in the event of an emergency, but has suggested that they may reissue the RFP since only one responder was heard from and that was Brookhaven Hospital. So I support that Department of Health effort to try to get more support on the East End, it's a problem generally, but for this in particular I hope that they do continue that. But I certainly support this motion.

CHAIRMAN SPENCER:

Commissioner Tomarken and Jen Culp, welcome. It's good to see you both. Commissioner, any further information with that point that Legislator Fleming made?

COMMISSIONER TOMARKEN:

I would just like to clarify, it's not an award, it's not a competitive bid; anybody who responded and met our criteria would have been awarded it as well. So it's not a competitive bidding. Nobody else responded but Brookhaven. They will supply us with staff and facility. They will not go out to other areas, but they will take on other patients that would come to them in their pods if needed.

MS. CULP:

And we should also point out that this is simply augmenting or complementing the work we already do in the division. So this is in the case of an outbreak where we need the additional resources, that we can have a hospital who is trained and ready to get a pod going and vaccinate as needed. So this is only on an as-needed basis.

We have several MOUs through school districts, so if there was an outbreak in Southampton, for example, the Health Department would respond, mobilize and set up the pod. It's not as if we wouldn't respond. But we will be putting out -- our goal is to, you know, contract with all hospitals, so we will be reissuing this RFP.

CHAIRMAN SPENCER:

Legislator Fleming.

LEG. FLEMING:

If I may just -- I'm pleased to hear that. I do hope that you can fashion it in such a way that will encourage participation from at least Southampton Hospital. As you know, we have a real dearth of health care providers, especially as you get further east to Montauk, with the closing of a clinic, you know, and the Planned Parenthood clinic closed as well, it seems like it gets worse and worse every day. So I just hope that you're sensitive to that. I think that you are. I'm happy to support this, but I need to put that on the record.

COMMISSIONER TOMARKEN:

And we have nine school districts on the East End that we already have arrangements and MOUs with.

CHAIRMAN SPENCER:

Just one quick thought or comment. So it seems that this would have been available to anyone.

COMMISSIONER TOMARKEN:

It was sent to all hospitals. It is and was available, only one responded. We will we reissue it once this one is finalized and we will make a concerted effort to get them to respond.

CHAIRMAN SPENCER:

That's my concern, because it would seem that for something of this magnitude, that why wouldn't a hospital take advantage of it? And if it kind of came in a clump of mail, I don't know if -- again, I'm speaking possibly without full knowledge, but it might not be an unreasonable thing to even make a phone call or a reach-out in multiple fashions. Because, I mean, if there were some respondents, it seems like this is a great service that's there and I know hospitals are definitely looking for resources. So the fact that one hospital responded makes me concerned that the message may not have been received.

COMMISSIONER TOMARKEN:

Don't misconstrue, this is -- we are not giving them resources, they are providing us resources. We will be paying for them if and when we need them.

CHAIRMAN SPENCER:

Sure.

COMMISSIONER TOMARKEN:

We're not getting resources from us. This is using their facilities and their staff in the event of an emergency to deliver services to the communities they serve.

CHAIRMAN SPENCER:

Sure. But -- well, it's -- you're paying for their services and it seems that that's something that the hospitals are equipped to be in the business of offering that. So I understand your clarification, but I think my greater point was it seems that there should still be more than one responder.

COMMISSIONER TOMARKEN:

Okay.

CHAIRMAN SPENCER:

Thank you, Commissioner. I always appreciate your time.

Moving on to -- oh, we have a vote. We have a motion and a second. All those in favor? Any in opposition? Any abstentions? Motion carries. **(Approved - VOTE: 7-0-0-0).**

IR 1382-16 - Accepting and appropriating 100% federal pass-through grant funds from the New York State Department of Health in the amount of \$300,000 for the Immunization Action Plan ("IAP") administered by the Suffolk County Department of Health Services, Division of Patient Care Services and to execute grant related agreements (County Executive). Motion by Legislator Calarco. Seconded by Legislator Trotta.

MR. NOLAN:

It can go on the Consent Calendar.

CHAIRMAN SPENCER:

To be placed on the Consent Calendar. All those in favor? Any in opposition? Motion carries. Thank you. ***(Approved & placed on the Consent Calendar - VOTE: 7-0-0-0)***.

IR 1383-16 - Amending the 2016 Adopted Operating Budget to accept and appropriate 100% federal pass-through grant funds from the Research Foundation for Mental Hygiene, Inc. In the amount of \$196,123 for First Episode Psychosis administered by the Suffolk County Department of Health Services, Division of Community Mental Hygiene and to execute grant related agreements (County Executive). Same --

LEG. KENNEDY:

Motion.

CHAIRMAN SPENCER:

Oh, motion by Legislator Kennedy. Seconded by Legislator Cilmi. To be placed also on the Consent Calendar. All those in favor? Any opposed? Any in opposition? ***(Approved & placed on the Consent Calendar - VOTE: 7-0-0-0)***.

We've already covered 1394. And that is the end of the business that I have, and it's four o'clock. Thank you very much, and have a good afternoon. Good evening.

(*The meeting was adjourned at 3:56 P.M. *)