

ENFORCEMENT REPORT: Mr. Porter presented one enforcement action from the November 12, 2025 administrative hearing held at 9:45AM, Docket # 25-019:

Respondent: Nicholas Bohdanowycz, President Four Mile Brewing, LLC, 202 East Green Street, Olean, New York 14760.

Violations: 10NYCRR Sec. 14.1.190(a) The food service establishment was observed to be operating without a valid permit during a routine inspection.

- An application for a permit to operate was provided at the time of the inspection.
- On 8-18-25 it was observed that the facility was open for operation without a valid permit to operate.
- On 9-20-25 the respondent was served with a notice of violation and was provided with an application for a permit to operate.
- At the time of the hearing no application for a permit to operate had been made to Cattaraugus County Health Department (CCHD).

UPDATE: 11-12-25 @ 3:30PM. Respondent appeared at CCHD and met with Ray Jordan.

- Respondent provided a complete application.
- Paid fees (Permit & Late fee).
- Provided proof of insurance.
- Provided proof of food service manager on staff.
- Respondent was issued a permit to operate 6-1-25 thru 5-31-26.

Recommendation: The \$75.00 civil compromise offered be changed to a \$75.00 fine and then doubled to \$150.00 for a no show. The \$150.00 fine to be paid on or before 12-31-25. Failure to be in compliance would result in a \$10.00 per day per diem until in compliance.

Mayor Smith stated that the Board is faced with determining whether it should function primarily as a compliance-focused board or a penalty-focused board. He noted that, while his preference is to achieve compliance, the individual in question operated without a permit for a substantial period of time and failed to appear on time for the scheduled administrative hearing. Legislator Schroder asked whether any justification had been provided for the individual's absence, to which Mr. Porter replied that none had been offered. Dr. Chohan inquired whether this was the individual's first infraction, and Mr. Porter confirmed that it was. Ms. Raftis stated that because the rules were not followed, a penalty was warranted. Legislator Schroder added that the individual had ignored multiple requests and emphasized that the Board's time is valuable, expressing frustration if penalties imposed do not meaningfully reinforce compliance expectations.

A motion to accept Mr. Porter's recommendations was made by Dr. Chohan, seconded by Ms. Raftis, and unanimously approved, no abstentions or further comments.

DIRECTOR'S REPORT: Dr. Watkins presented the 2025–2030 Community Health Assessment and Community Health Improvement Plan (CHA/CHIP), a required planning document for all local health departments and hospitals in New York State. The CHA/CHIP is directly tied to state appropriations for local health departments (LHD's) through Article 6 base grant funding. The department receives approximately \$750,000 annually from New York State Department of Health (NYSDOH) to support public health programs; failure to meet CHA/CHIP requirements could result in the withholding of these funds.

Previously, CHA/CHIP submissions were required every three years; however, NYSDOH has extended the cycle to six years, with a mandated mid-cycle progress review in year three. The current 2025–2030 CHA/CHIP must be submitted by the end of December. Dr. Watkins also reminded the Board that the Public Health Accreditation Board (PHAB) requires a new CHA/CHIP every five years. It is anticipated that the department's PHAB reaccreditation will occur within the six-year NYSDOH cycle.

Hospitals will continue to follow a three-year CHA/CHIP cycle due to Internal Revenue Service requirements. The 2025–2030 CHA/CHIP was developed collaboratively by the Cattaraugus County Health Department, Upper Allegheny Health System (Olean General Hospital and Bradford Regional Medical Center), and Bertrand Chaffee Hospital. A single, joint document was submitted, identifying shared priority areas, goals, strategies, and measurable outcomes.

In the development of the CHA/CHIP, NYSDOH requires the use of its 2025-2030 Prevention Agenda framework, which encompasses five Social Determinants of Health domains: economic stability; social and community context; neighborhood and built environment; health care access and quality; and education access and quality. Within these domains are several priority areas; in total, the framework includes twenty-four priority areas, from which LDH's/hospitals were required to select at least three for focused community improvement efforts. Community partners participated through a steering committee, and extensive community input was gathered through surveys, focus groups, and stakeholder interviews. The top five concerns identified by the community were limited access to mental health services, substance use prevention, access to health care, transportation, and poverty. Based on this input, the three priority areas selected from the NYSDOH 2025-2030 Prevention Agenda were anxiety and stress; primary prevention of substance use and overdose; and preventive services for chronic disease prevention and control.

Mayor Smith thanked staff and partners for their work on the 2025–2030 CHA/CHIP and requested a motion to approve the plan as presented. Legislator Andreano asked whether the plan's inclusion of expanded access to buprenorphine and Suboxone for individuals with opioid use disorder was comparable to expanding access to methadone for individuals who use opioids. Dr. Watkins clarified that methadone and Suboxone are not the same. Mrs. Cooney-Thrush explained that Suboxone, which contains buprenorphine and naloxone (Narcan), is often misunderstood as substituting one drug for another. Buprenorphine is a partial opioid agonist and naloxone is an opioid antagonist; together, they reduce cravings and block misuse. Mrs. Cooney-Thrush shared a patient success story, noting that Suboxone treatment allowed the individual to reduce urges, reunite with family, and maintain employment. Legislator Schroder shared her perspective from emergency medical services, noting the frequency of repeat overdose responses for the same offenders. A lengthy discussion followed. A motion to approve the 2025-2030 CHA/CHIP was made by Mrs. Cooney-Thrush, seconded by Dr. Chohan, and unanimously approved with no abstentions.

Dr. Watkins shared that influenza cases are on the rise throughout the country. The Centers of Disease Control and Prevention (CDC) reported a high transmission of the flu virus in several states including New York State (NYS). A health advisory was issued on December 2nd declaring influenza prevalent in NYS. Any personnel who are not vaccinated against influenza for the current season should wear a surgical or procedure mask when in patient or resident care areas. In Cattaraugus County from October 1st through December 16, 2025, eighty-nine (89) confirmed influenza cases had been reported, the majority being Influenza A (84 cases). Influenza A, specifically the H3N2 subtype, is the predominant strain circulating both globally and locally.

Dr. Watkins explained that an antigenic drift has occurred within the Influenza A (H3N2) virus this season, resulting in the emergence of a new subclade (K) that is not an exact match to the current seasonal vaccine, which was based on a different subclade (J2) during vaccine development. Despite this mismatch, the CDC reports that the current influenza vaccine continues to provide protection against severe illness, hospitalization, and death, and helps reduce community spread.

As the holiday season approaches, emphasis was placed on heightened vigilance, particularly for populations at higher risk of severe illness, including older adults, pregnant individuals, immunocompromised persons, and young children. Common influenza symptoms and key prevention strategies were reviewed, including hand hygiene, respiratory etiquette, surface cleaning, avoiding crowded settings, and receiving the influenza vaccine.

Mayor Smith introduced guest speaker Swagata Banik, PhD, Dean of the Dennis R. DePerro School of Health Professions at St. Bonaventure University. Dr. Banik's work focuses on strengthening health care access, particularly in underserved and rural communities.

Dr. Banik shared that the DePerro School, established in 2016, continues to grow. Undergraduate programs include nursing, public health, and health sciences, while graduate offerings include a Master's Entry to Practice in Nursing, occupational therapy, physician assistant studies, and speech-language pathology. He stated that there were significant unmet health needs in the region and regional challenges include an aging population, high prevalence of chronic disease, and limited access to care.

Dr. Banik emphasized the importance of collaboration between academic institutions, the Health Department, and community partners. One major goal is the establishment of a Center for Rural Health to support workforce development, research, and community service. A \$3 million grant was awarded to build a rural health workforce, requiring participating students to commit three years of service in the local community. He also highlighted the launch of a virtual speech pathology clinic for Parkinson's patients, being run by faculty in Kansas City, which began with (20) students and has since expanded to (42) students.

Additional initiatives include partnerships with local BOCES and high schools to develop an affordable high school graduate pathway to St. Bonaventure University. A mobile health clinic is also being developed as part of a three-year plan, including the formation of a community advisory board. The mobile clinic will deliver care to underserved residents and utilize telehealth to connect patients with Olean General Hospital or Universal Primary Care for follow-up services.

Dr. Banik expressed appreciation for the Health Department's support of student internships and emphasized the value of continued collaboration. He also shared that he has enrolled in a health-focused artificial intelligence course with the goal of eventually offering similar coursework to students and noted that the University is exploring the development of a registered dietitian program.

NURSING DIVISION REPORT: Mrs. Moore reported that the current homecare census stands at (193).

Lead Program Update: In November, (86) lead tests were conducted. One child previously identified in October with a blood lead level (BLL) of (19) $\mu\text{g}/\text{dL}$ (normal $<5 \mu\text{g}/\text{dL}$) showed improvement, with a follow-up BLL of 17 $\mu\text{g}/\text{dL}$ in November. Two children from the same family had the next highest initial BLLs of (12.2) $\mu\text{g}/\text{dL}$ and (12.8) $\mu\text{g}/\text{dL}$. These were capillary tests and will be retested within six to eight weeks. Five additional children tested between (5–9) $\mu\text{g}/\text{dL}$. One child who tested at (9) $\mu\text{g}/\text{dL}$ had previously tested at (19.7) $\mu\text{g}/\text{dL}$ in July. Another child who tested at (8) $\mu\text{g}/\text{dL}$ had an initial venous test and will continue to be monitored. A child with a BLL of (6.3) $\mu\text{g}/\text{dL}$ had previously tested at (11.4) $\mu\text{g}/\text{dL}$ in August. Two children tested at (5) $\mu\text{g}/\text{dL}$; one had previously tested at (6) $\mu\text{g}/\text{dL}$ in June, and the other remained consistent at (5) $\mu\text{g}/\text{dL}$ earlier in 2025. The remaining (74) children tested at or below (5) $\mu\text{g}/\text{dL}$. The total active lead caseload currently stands at (49) children.

Mrs. Moore reported that Laurie Rzucek, Community Health Nurse from Salamanca, retired last week after more than 30 years of service with the county. Communicable Disease Testing: HIV testing was not conducted in November due to the absence of a Nurse Practitioner.

Rabies prophylaxis in November:

- Pre-exposure: (1) received the series.
- Post-exposure: Three (3) individuals received the vaccine series, prompted by exposures that included: (2) bat exposures in sleeping quarters, and (1) feral kitten bite.

Reportable Diseases (November):

Chlamydia: (3) cases; Anaplasmosis: (2) cases; Strep Group B: (2) cases; Influenza A: (20) cases; COVID-19: (7) cases; respiratory syncytial virus (RSV): (8) cases; and Lyme disease: (8) probable cases.

ENVIRONMENTAL HEALTH REPORT: Mr. Ring reported there is an upcoming free rabies clinic for pets on January 10th, and will be located at the Department of Public Works in Little Valley between the hours of 9:00AM-11:00AM.

The Community Development Block Grant (CDBG), Lateral, Well & Septic Repair or Replacement Assistance Program, currently has (10) projects under construction and an additional (10) projects in various stages of design and approval. It is anticipated that approximately (\$150,000) will be expended on the projects currently under construction, with an additional (\$125,000) projected for the next group of projects. This will leave a remaining balance of approximately (\$110,000), which is expected to allow an additional (5–10) households to qualify before the grant concludes in approximately one year.

Through the Lead Capacity Building Grant, (3–4) residential homes have been qualified to date, with a goal of qualifying (12) homes by the end of next year. A new grant, totaling approximately \$4 million, has also been awarded, with a goal of completing rehabilitation on (60) additional homes. Participating homes must meet income eligibility requirements, undergo an environmental review, and receive a comprehensive inspection by staff. This inspection includes testing all painted surfaces using specialized equipment to determine lead content. Once inspections are completed, projects are put out to bid, with two contractors selected per bid.

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The department conducts annual inspections of (65) pools and (6) spas, (18) of which are outdoor facilities that operate seasonally. Each facility is required to submit an annual work plan outlining safety protocol, including lifeguard supervision and certification. Pool chemistry is monitored daily by operators, with logs maintained to prevent skin irritation and other health concerns. Department inspections include on-site testing and education as needed. Pool operations are complex due to plumbing and equipment requirements, and new pool installations must be designed by an engineer, making compliance both extensive and costly. Mrs. Raftis asked whether the Olean YMCA pool and hot tub are inspected only once per year. Mr. Ring confirmed that while the inspection occurs annually, facilities must submit monthly operational reports, including daily logs, which are reviewed by the department. Ms. Raftis noted concerns regarding high chlorine levels. Mr. Ring explained that sensors can become corroded over time and may provide inaccurate readings. The department is currently discussing a new policy that would require recalibration of these sensors every six months to ensure more reliable measurements.

Old/New Business: Mayor Smith inquired whether Ms. Raftis would serve as the speaker for the Nominating Committee at the February meeting and reach out to members to solicit nominations. Nominations will be presented at the next Board of Health meeting, scheduled for Wednesday, February 4, 2026. The nominations will be for the positions of President and Vice President for the 2026 calendar year.

A motion to adjourn the meeting was made by Dr. Spigel, the motion was seconded by Dr. Chohan, and unanimously approved.

Respectfully submitted,



Kevin D. Watkins, M.D., M.P.H.
Secretary to the Board of Health