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4 **HEALTH COMMITTEE**
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6 **OF THE**
7
8 **SUFFOLK COUNTY LEGISLATURE**
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10 **MINUTES**
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13 A meeting of the Health Committee of the Suffolk County Legislature
14 was held in the Rose Y. Caracappa Legislative Auditorium of the
15 William H. Rogers Legislature Building, 725 Veterans Memorial
16 Highway, Smithtown, New York on January 27, 2022 via in-person and
17 Zoom conference.
18

19
20 **MEMBERS PRESENT:**

21 Legislator Leslie Kennedy, Chair
22 Legislator Stephanie Bontempi, Vice Chair
23 Legislator Dominick S. Thorne
24 Legislator Bridget Fleming
25 Legislator Tom Donnelly
26 Legislator Manuel Esteban
27

28
29 **ALSO IN ATTENDANCE:**

30 William Duffy, Counsel to the Legislature
31 Frank Tassone, Clerk/Suffolk County Legislature
32 Brett Robinson, Chief Deputy Clerk/Suffolk County Legislature
33 Craig Freas, Budget Review Office
34 Ali Nazir, Aide to Legislator Kennedy
35 Irene Donohue, Aide to Legislator Fleming
36 Dr. Gregson Pigott, Commissioner/Health Services
37 Patricia Bartik
38 And all other interested parties
39

40
41 **MINUTES TAKEN BY:**

42 Diana Flesher, Court Stenographer
43

44 **MINUTES TRANSCRIBED BY:**

45 Kim Castiglione, Legislative Secretary
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THE MEETING WAS CALLED TO ORDER AT 2:05 PM

CHAIRPERSON KENNEDY:

Good afternoon. We have all members of the committee before us now. I call the meeting of the Health Committee to order. Please stand for the Pledge led by Dominick Thorne.

Salutation

CHAIRPERSON KENNEDY:

I'm going to ask that we remain standing for one minute so that we can keep in our prayers P.O. Rivera and P.O. Mora, who passed away due to gun violence.

Moment of Silence

CHAIRPERSON KENNEDY:

Thank you. Mr. Clerk, do we have any correspondence?

MR. ROBINSON:

Yes, it's been distributed to all members.

CHAIRPERSON KENNEDY:

Okay. Please note that the Governor recently signed Senate 7623A and Assembly 8591, which extends modifications to the Open Meeting Law requirements through the end of the new COVID-19 state disaster emergency. Therefore, the Legislature will continue to operate under the rules that were adopted via procedural motion in March of 2020.

Consequently, we will be conducting our Legislative meetings in a hybrid fashion. We will allow in-person public attendance and in-person public portion comment at the William H. Rogers Legislative Building or remote testimony via Zoom. Either way, speakers will be limited to three minutes.

In accordance with County and state COVID-19 safety protocols, the current CDC recommendation, members of the public will be required to wear a mask at all times while inside the building.

Those interested in addressing Legislators over Zoom may sign up at www.scnylegislature.us/CommitteePublicPortion. Members of the public may also send written testimony by e-mail to clerk.legislature@suffolkcountyny.gov or by regular mail to the attention of the Clerk's Office at the Suffolk County Legislature, P.O. Box 6100, Hauppauge, New York 11788. Audio testimony will be accepted by voicemail at 631-853-3685. Callers may leave a three-minute message. Submitted comments will be distributed to the Legislature.

Mr. Clerk, can you do a roll call?

(Roll call by Chief Deputy Clerk Robinson)

CHAIRPERSON KENNEDY:

Present.

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LEG. BONTEMPI:
Present.

LEG. FLEMING:
Present.

LEG. THORNE:
Present.

LEG. ESTEBAN:
Present.

LEG. DONNELLY:
Present.

MR. ROBINSON:
Six.

CHAIRPERSON KENNEDY:
Thank you. Do we have any speakers for the public portion?

MR. ROBINSON:
No speakers.

CHAIRPERSON KENNEDY:
Okay.

LEG. THORNE:
Madam Chair, a point of personal privilege, if I may.

CHAIRPERSON KENNEDY:
Yes.

LEG. THORNE:
So I handed out to the other members of the committee, I want it on public record, I received a letter from just one of the several thousand people who live in Coniford Village in Patchogue/East Patchogue, as well as Pinehurst, the same complex also owned by Conifer. We have been with them since -- January 12th was my first meeting. I know the good Doctor and the Department of Health have been there several times. Fire Marshals are also going to be heading over there. So many safety and health violations, not only -- and fire violations that are present in the building. Dr. Piggot has received some other information I think and we'll have a chance in talking to him on screen, but we are in a little bit of a dire situation.

One lady from the letter that we passed out actually went to the hospital from carbon dioxide poisoning from an unrepaired heating unit within their house and then when the heating units don't work they're moving portable heaters in. No smoke detectors, no fire alarms, no CO alarms, lights not working within the structure. Today the second elevator went back allowing nobody with any disability to get up to the second or third floor of the Pinehurst building.

1
2 I just want it as a matter of record that we, this Legislative
3 office as well as the rest of the Health Committee, is aware of
4 them and working with Senator Weik's office to work with their
5 senior management team to make sure that some of these five and six
6 and seven-year old complaints are actually handled to keep the
7 safety of our residents at the utmost height.

8
9 So I want it as a record. We all received it but I want to make
10 sure that we put it on record that the Legislators are working on
11 it. We are aware of it and we will continue to work across all
12 lines and governmental offices to ensure the safety of our
13 residents, especially our vulnerable ones in subzero temperatures
14 with heats that don't work is simply unacceptable. So I thank you
15 for your time, Madam Chair.

16
17 **CHAIRPERSON KENNEDY:**

18 Thank you, Legislator Thorne. We have no appointment resolutions
19 but we are lucky enough to have a presentation from Dr. Gregson H.
20 Piggot, M.D., Master of Public Health, to supply a COVID-19 update.
21 Hello, Dr. Piggot. How are you today?

22
23 **COMMISSIONER PIGOTT:**

24 All righty. Good afternoon, Legislator Kennedy and Chair of the
25 Health Committee.

26
27 **CHAIRPERSON KENNEDY:**

28 Thank you.

29
30 **COMMISSIONER PIGOTT:**

31 Good to work with you in this capacity.

32
33 **CHAIRPERSON KENNEDY:**

34 Thank you, you too. I just want to make sure that you heard
35 Legislator Thorne speak about the Conifer Village I think it is,
36 lack of heat situation? It was on the news today and I know the
37 Health Department is dealing with it.

38
39 **COMMISSIONER PIGOTT:**

40 Yes, I believe we did find some violations of the Sanitary Code.
41 Our Sanitarians from the Bureau of Public Health Protection have
42 been out there several times.

43
44 **CHAIRPERSON KENNEDY:**

45 Okay, so you are working on it. That's great.

46
47 So, can you give us some news, and I think maybe we have a few
48 questions, on what's going on with COVID-19 now and the new variant
49 and any number of other issues going on at this point.

50
51 **COMMISSIONER PIGOTT:**

52 All right. So our COVID situation in Suffolk County is that we are
53 on the descent of our omicron wave, which is the fourth wave of
54 COVID that we've had to deal with in the last two years. We peaked
55 around the first week of January with about 28.1% of tests coming
56 back positive and around 7,000, slightly under 7,000 tests in a

1 24-hour period coming back positive. That was around January 5th.
2 Things have been on their way down, which is good, which is what we
3 want to see. The latest number I have for January 26th is 1,171
4 positive tests out of 14,181. So that's about 8.3% positivity. So
5 we're on the way down, but I like to caution everybody that we're
6 not out of the woods with this omicron surge.

7
8 So the winter surge was anticipated just because it's following a
9 pattern that we had in the previous year. From 2020 into 2021 we
10 had a winter surge as well. It was fueled primarily from indoor
11 gatherings, social events, Halloween, then Thanksgiving and then
12 Christmas and New Years. We had a similar pattern this winter as
13 well with the social gatherings, but in addition to that, a new
14 variant which came on the scene in late November right around
15 Thanksgiving, and pretty much in a short amount of time grew to be
16 the dominant variant that was circulating.

17
18 When we talk about variants in -- of COVID-19 we have the original
19 one which came from China then migrated to Europe. They call that
20 the B1 strain. Then the next one we were subject to was the alpha
21 variant, the UK strain, B.1.1.7. And then delta and then omicron.
22 So that's where we are.

23
24 So, again, not out of the woods just because we have a thousand
25 people testing positive every day and are hospitals, which is the
26 most important metric to follow, is the impact on our health care
27 system. They peaked at 1,041 patients with COVID on January the
28 11th. And that number has come down now to 687 as of January 25th.
29 So our hospitals are still impacted with COVID patients. You
30 recall that we had our original COVID wave that peaked in April of
31 2020 with 1,658 COVID patients in the hospitals. And so we peaked
32 at 1,041 here which is better but it's still very high.

33
34 And the other thing we are reticent to talk about are the
35 fatalities that COVID has caused. Already in the month of January
36 we have 345 people that have passed due to COVID in facilities. So
37 that's hospitals, nursing homes and adult care facilities, and
38 that's just this month of January alone. So COVID is still taking
39 a significant toll in terms of sickness, illness, hospitalizations
40 and death in Suffolk County.

41
42 But hopefully as we get into the spring and as the weather breaks
43 we'll get into a situation where the hospitals are cleared out of
44 COVID patients, the testing numbers are low, and then we can talk
45 about getting back to quote unquote normal, whatever our new normal
46 is, and about COVID being what they call endemic. In other words,
47 just another circulating virus such as the flu or such as cold
48 viruses, and talk about what that looks like, but we're just not
49 quite there yet.

50
51 And I just want to encourage everybody that we still need to take
52 precautions. We still should be vaccinated for COVID. The
53 vaccines -- the vaccines have proven to be effective at keeping
54 people out of the intensive care unit, out of really, really bad
55 COVID induced sickness and death, and so it's important that we try
56 to stay up to date on vaccination as well. And that's where we

1 are. Legislator Kennedy?

2

3 **CHAIRPERSON KENNEDY:**

4 Thank you, Dr. Pigott. Does anyone have any questions? Legislator
5 Fleming.

6

7 **LEG. FLEMING:**

8 Thank you, Chairwoman Kennedy. Dr. Pigott, nice to see you. Thank
9 you for all your hard work in this incredible time. I remember you
10 were just sworn in as the Health Commissioner when we got hit by
11 COVID, so well done.

12

13 I wanted to ask you about the hospitalizations. Can you talk a
14 little bit about the impact on the pediatric population and also
15 ICU, what are we seeing with omicron.

16

17 **COMMISSIONER PIGOTT:**

18 There has been impact in terms of kids who test positive for
19 COVID-19 being hospitalized. Hospitalizations always go up in the
20 colder weather. Traditionally it's respiratory syncytial virus,
21 RSV, and also flu and other respiratory viruses. So that's a
22 pattern but they just have COVID in the mix as well. I believe the
23 peak in terms of pediatric hospitalizations with COVID is 19. We
24 are around 15 right now.

25

26 **LEG. FLEMING:**

27 Can I just ask you what the level of seriousness is with the
28 pediatric patients? Are we seeing real danger for these kids? How
29 badly is -- are the symptoms affecting the children and omicron.

30

31 **COMMISSIONER PIGOTT:**

32 I don't have a specific pediatric update. From what I understand
33 is that most of the kids need some supportive care, whether it's
34 oxygen, whether it's humidified air, but are able to be discharged
35 to home from the hospitals. I believe we only had one pediatric
36 death with COVID as a diagnosis this winter. That was, I believe,
37 at Huntington Hospital, but this was a child that had a lot of
38 other comorbidities as well.

39

40 **LEG. FLEMING:**

41 Okay, thank you. And in the adult population in terms of intubated
42 patients.

43

44 **COMMISSIONER PIGOTT:**

45 The incentive care unit peaked at 152. That was January 14th.
46 Right now we're down to around 96 in the ICU. And people who are
47 on ventilators, that peaked at 84 and that was January the 15th.
48 Now we're down to 63 Suffolk County residents on ventilators in our
49 hospitals.

50

51 **LEG. FLEMING:**

52 So in relative terms, based on what we went through last, you know,
53 like with the first variant, it's less -- there is less serious
54 symptoms. Is that accurate?

55

56

1 **COMMISSIONER PIGOTT:**

2 It's much less -- right. Because of the amount of vaccinations
3 that we've done in Suffolk County. And then also we have more
4 ideas of how to treat COVID patients in the hospitals as well in
5 terms of putting people on their stomachs, in terms of therapeutics
6 such as IV steroids. And then there are other things like
7 remdesivir that you can give intravenously. There are monoclonal
8 antibodies that you can -- although there's only one that is active
9 against omicron, sotrovimab, and a few hospitals do have access to
10 that. But it's just -- it's we're a little bit more advanced in
11 COVID care so it's not impacting the intensive care unit as much as
12 it did the first year.

13
14 **LEG. FLEMING:**

15 It's so good to know. It's so tiring. Everyone is so exhausted by
16 Coronavirus. It's good to know we're making some progress in terms
17 of, you know, figuring it out and, as you say, moving towards a
18 circumstance where it's more endemic and less of an emergency
19 situation.

20
21 **COMMISSIONER PIGOTT:**

22 I agree.

23
24 **LEG. FLEMING:**

25 And what about vaccinations. How does the population in the
26 hospital look relative to vaccination? I don't know if that's a
27 good question. The question is in terms of people that are getting
28 to the hospital, is there a difference or is there an impact on
29 vaccination relative to whether you end up in the hospital.

30
31 **COMMISSIONER PIGOTT:**

32 So as a region we are over 70% vaccinated. That's all Suffolk
33 County residents. And in terms of people who have received
34 boosters it's about 40% of the eligible population have received a
35 booster shot. In terms of who's hospitalized now, of the 687
36 people that have tested positive for COVID in the hospitals, 319 of
37 them are what are considered fully vaccinated. So about 46%. So
38 it does make a difference. It's that you have a higher proportion
39 of unvaccinated or not fully vaccinated folks who are admitted with
40 COVID. And as you get into the more acute settings in terms of
41 intensive care unit and people on ventilators, that percentage does
42 come down in terms of fully vaccinated people in the ICU. So it's
43 about 32% in the ICU who are fully vaccinated with COVID and about
44 37% on ventilators who are COVID positive and are fully vaccinated.

45
46 **LEG. FLEMING:**

47 That's helpful. Thank you very much. Thank you, Leslie.

48
49 **CHAIRPERSON KENNEDY:**

50 Does anyone else have any questions?

51
52 **LEG. THORNE:**

53 Chair, if I may.

54
55 **CHAIRPERSON KENNEDY:**

56 Certainly, Legislator Thorne.

1
2 **LEG. THORNE:**

3 Hi, Doctor. How are you? I don't quite know how you're awake with
4 your workload. Congratulations, you're doing a great job and we
5 appreciate it.

6
7 **COMMISSIONER PIGOTT:**

8 I appreciate that. Thank you.

9
10 **LEG. THORNE:**

11 Truly. The folks at DOH are doing a wonderful job, including with
12 my recent issue down there with Conifer.

13
14 Do we know or do you have figures, or facts and figures, on how
15 many EMS or first responders is being taken kind out of
16 circulation? I read an article not that long ago from a local EMS
17 Chief that said they're quite stressed with the level. Are you
18 aware of any immediate stress or concern with the ability of our
19 EMS units to -- or fire units or police to respond to emergencies
20 because of COVID I guess interactions?

21
22 **COMMISSIONER PIGOTT:**

23 Yeah, the worst was late December. That's when there was just a
24 lot of, lot of COVID. Just a lot of calls for COVID people looking
25 for tests. Occasional calls of people asking for a 911 transport
26 to the hospital so they could get tested or evaluated for COVID.
27 And then you had first responders also getting omicron variant
28 themselves and being out of commission for a while. That was the
29 worst, in late December. Things have cooled off since then and I
30 have not heard of any stress on the first responders system
31 currently, so that situation has improved.

32
33 **LEG. THORNE:**

34 And to your knowledge, Doctor, they have all the appropriate PPEs
35 delivered to them? Is that something the County is supplying or
36 each agency is required to get their own? I know there was an
37 initial supply. Are we still maintaining a supply of KN95
38 respirator masks and whatever else is required?

39
40 **COMMISSIONER PIGOTT:**

41 Right. The main PPE you'd need in this situation is a good, well
42 fitting mask that keeps the COVID out, so it's really the N95 mask
43 for our first responders and they have plenty of them now.

44
45 **LEG. THORNE:**

46 Thank you so much, Doctor. I appreciate it.

47
48 **CHAIRPERSON KENNEDY:**

49 Stephanie, did you have a question?

50
51 **LEG. BONTEMPI:**

52 Yes, Madam Chair. Thank you. Hello, Dr. Piggot.

53
54 **COMMISSIONER PIGOTT:**

55 Greetings.

1 **LEG. BONTEMPI:**

2 It's nice to see you again. So I had a question. We have been so
3 bombarded, I guess we are every day with numbers and numbers and
4 statistics. So I had a question when it comes to fatalities. So
5 if a patient is brought to the hospital for another reason than
6 COVID, for something else, and then I would assume there is a COVID
7 test performed, and then they pass, whether they passed because of
8 COVID or because of this other illness or whatever it might have
9 been they came into the hospital for, how is that captured
10 statistically? Will they be, you know, I hate to say checked off
11 because it's horrible to talk about people who are no longer here
12 that way, but so -- if you could maybe explain how we do this, how
13 this is done.

14
15 **COMMISSIONER PIGOTT:**

16 Yeah, you have on a death certificate, it's a primary cause of
17 death. So it would be pneumonia due to COVID-19 would be a primary
18 cause of death. If it's something like a myocardial infarction
19 that's primary cause of death and, by the way, the patient had
20 COVID, that would be a secondary cause of death. So I think that
21 would be coded as a primary heart disease death. So it really
22 depends on what the primary cause of death is, but generally I'm
23 not sure if they aggregated that data in a way that they have
24 disseminated to the public. So I haven't seen a really breakdown
25 -- a good breakdown of what's a primary COVID death versus what is
26 somebody that died of something else and had COVID. So I don't
27 quite have the answer. And when we have the fatality count it's
28 just generally people who tested positive for COVID-19 and passed
29 away.

30
31 **LEG. BONTEMPI:**

32 Thank you.

33
34 **CHAIRPERSON KENNEDY:**

35 Does anyone else have any questions? Legislator Donnelly.

36
37 **LEG. DONNELLY:**

38 Hey, Doc. How are you this afternoon?

39
40 **COMMISSIONER PIGOTT:**

41 Hey, Legislator Donnelly. Good to see you.

42
43 **LEG. DONNELLY:**

44 Same here. So it's COVID related, non-COVID related. Can you give
45 us an update on the public health nurses, you know, because I know
46 that there was some staffing issues out at the jail as well and
47 within your office. Where do we stand in terms of -- in terms of
48 public health nurses?

49
50 **COMMISSIONER PIGOTT:**

51 We have adequate staffing for now for our Public Health Nursing
52 Bureau. They're the ones that are doing primarily maternal and
53 child health and also doing booster shots for our Pfizer vaccine.
54 And they have a couple of positions available and so we're
55 interviewing and looking for new talent.

1 **LEG. DONNELLY:**

2 Okay, because I know that we had put several positions in the
3 budget during last year's budget cycle so I just wanted to
4 follow-up on that. So thank you for all your work, Doc. Much
5 appreciated.

6
7 **CHAIRPERSON KENNEDY:**

8 Thank you, Legislator Donnelly. Anyone else? No? All right. I
9 have a question. It's the nurse in me that asks this question.
10 Oh, first I want to thank the Health Department for the take home
11 tests. We got close to 700 of them each and will be giving --
12 making those available at certain spots in each of our districts.
13 They're getting easier to get. The pharmacies, 7-Eleven is
14 carrying them.

15
16 **COMMISSIONER PIGOTT:**

17 7-Eleven?

18
19 **CHAIRPERSON KENNEDY:**

20 7-Eleven, yes. I think it's a little cheaper near me. Come to my
21 neighborhood. When you test positive on a take home test, you're
22 not mandated to report it to the Health Department, correct?

23
24 **COMMISSIONER PIGOTT:**

25 No, you can keep that to yourself.

26
27 **CHAIRPERSON KENNEDY:**

28 You can keep that to yourself. So you know where I'm going. I
29 know that the infection rate is dropping, but are we really getting
30 adequate statistics with people not reporting to the Health
31 Department?

32
33 **COMMISSIONER PIGOTT:**

34 Yeah, now you're not going to capture the full and complete
35 picture, but you're going to have a snapshot. So -- because there
36 are a lot of people who are still getting tests in facilities, so
37 whether that's GoHealth or CityMD or other primary care offices.
38 So those tests are recorded and reported to the state and that
39 gives us a good snapshot of roughly what is circulating, how much
40 COVID is out there.

41
42 So when I say that 8.3% of the tests done yesterday were positive,
43 so that gives me a snapshot that things are on the way down. And I
44 think that percent positivity becomes more useful as a stat to
45 follow.

46
47 The other one -- we also have a pilot program with Stony Brook
48 where they're monitoring wastewater in several sites in Suffolk
49 County and seeing how much COVID virus there is in the wastewater,
50 and that's also been on the way down, too. So we have to kind of
51 look at things as a snapshot or as a representation of what is
52 circulating in the community. So with that you can see that the
53 trends are improving.

54
55 **CHAIRPERSON KENNEDY:**

56 Okay. Thank you very much. This is very valuable for not only

1 ourselves but for anyone who listens into this. It is exhausting
2 going through this process with COVID. We're into the third year
3 now and things change daily, which causes frustration which
4 increases anxiety in people and their children and schools and all
5 over. So we might be calling on you frequently to give us little
6 updates. Thank you.

7
8 **COMMISSIONER PIGOTT:**

9 All right. I'll be here.

10
11 **CHAIRPERSON KENNEDY:**

12 I know you will. Thank you for what you do.

13
14 We had a person come in. We passed public portion for our
15 presentation but I'm going to call Patricia Bartik up and give you
16 an opportunity to speak. You have three minutes.

17
18 **MS. BARTIK:**

19 Hi, how are you? I have pictures also from my experience of being
20 scammed by these landlords. I just wanted to put on the record the
21 day that I testified, when I found out that I was a victim when the
22 County came and said they weren't my landlords, was May 14, 2019,
23 and one of the most important things that not one Legislator
24 contacted me back. I gave them recommendations to try to stop
25 this.

26
27 So the first thing was that the County should create an oil spill
28 pamphlet for all Suffolk residents and/or when a landlord files for
29 a renter's permit within all townships. The town's Clerk's Office
30 should provide them with that pamphlet as well as information on
31 carbon monoxide detectors for every floor of every household. Any
32 oil spill is an oil spill. Residents need to be aware to report it
33 to 911, the Fire Marshal and the DEC. The Suffolk County
34 Department of Health should promote more public education and
35 acceptance of the importance of groundwater protection.

36
37 The Suffolk County Police Department and the District Attorney's
38 Office should have a hotline for people to report slumlords or if
39 they believe that their family is being scammed in a housing
40 situation. They should work for tenants to be able to check
41 prospective landlords before renting to crackdown on this epidemic.

42
43 And then one other thing, I don't know if people are aware, like
44 the fastest growing criminal activity right now in our nation is
45 that people are getting scammed by the home title locks where if
46 you don't have that -- so like it's public record. So these people
47 go into your records and they get a home equity out on your house
48 and then by the time that they find out what happened, like there's
49 no place for these people to go. So this affecting everybody if
50 you're a homeowner and you don't have, you know, a title lock.

51
52 The Suffolk County Attorney's Office should disbar attorneys that
53 represent these fake property management companies and be fined and
54 put in jail. Legislators should inform renters of housing scams
55 and provide tips in their monthly or community newsletters they
56 mail out within the communities that they serve.

1
2 The policy changes is that Suffolk County should request from
3 not-for-profit community based organizations that receive funding
4 from the County to track families who report housing scams or
5 slumlords when they call their agency for assistance. I called
6 every single housing agency in Suffolk County and not one agency
7 keeps records of how many people are being scammed.

8
9 And another thing that I think is totally ridiculous for prevention
10 of becoming homeless, you can't get any assistance in Suffolk
11 County until you become homeless. So I think that that's such an
12 injustice for families. Homeless shelters should also be able to
13 track these statistics and cross reference with names with
14 landlord/tenant courts throughout the County. The County should
15 work with the court systems and allow the judges to ask the party
16 why did you not pay your rent. That's another thing that should
17 be, you know, recommended, because they don't. They don't give you
18 a chance to tell the judge why you didn't me pay. I know my time
19 is up.

20
21 **CHAIRPERSON KENNEDY:**

22 Your time is up, but do you have a copy of what you're reading
23 from?

24
25 **MS. BARTIK:**

26 I actually -- yeah. This was what I gave when I testified when I
27 found out as an additional letter. I have that. I'm going to see
28 if I could make copies in the office and e-mail this to the Clerk's
29 Office and then you could get that information.

30
31 **CHAIRPERSON KENNEDY:**

32 Or you can just give it to one of the Clerks right now and they'll
33 make the -- oh, it's on there.

34
35 **MS. BARTIK:**

36 This one's on here. The last page, I didn't have it, but not one
37 Legislator, including my own at the time, didn't even respond to
38 any of these suggestions. You know, it's just -- which is sad.
39 But -- because I think they're just simple, basic things that we
40 could change that doesn't even cost money, right? So.

41
42 **CHAIRPERSON KENNEDY:**

43 So please get the copies to us. That would be wonderful and thank
44 you --

45
46 **MS. BARTIK:**

47 Okay, thank you.

48
49 **CHAIRPERSON KENNEDY:**

50 -- for letting us know.

51
52 **MS. BARTIK:**

53 Do you guys want to see what 275 gallons of oil looks like in the
54 basement floor and how sick my grandkids were and myself? I had
55 to go to the emergency room.

1 **CHAIRPERSON KENNEDY:**
2 Well, you can give to the Clerk. He can --

3
4 **MS. BARTIK:**
5 Okay, and then they'll give it to you.

6
7 **CHAIRPERSON KENNEDY:**
8 Yeah.

9
10 **MS. BARTIK:**
11 There's two different books.

12
13 **CHAIRPERSON KENNEDY:**
14 We are going to move on right now.

15
16 **MS. BARTIK:**
17 Okay. Thank you.

18
19 **CHAIRPERSON KENNEDY:**
20 Thank you. We have no Tabled Resolutions, we have no Introductory
21 Resolutions. There is no executive session. So motion to adjourn.
22 I don't need one. We are adjourned. Have a good day.

23
24 **THE MEETING CONCLUDED AT 2:33 PM**

DATE

1	10:17, 10:20 70% [1] - 7:29 700 [1] - 10:11 725 [1] - 1:15 7623A [1] - 2:23	allowing [1] - 3:53 alone [1] - 5:36 alpha [1] - 5:18 ALSO [1] - 1:29 amount [2] - 5:13, 6:55 answer [1] - 9:26 antibodies [1] - 7:5 anticipated [1] - 5:6 anxiety [1] - 11:5 appointment [1] - 4:16 appreciate [3] - 8:3, 8:6, 8:44 appreciated [1] - 10:5 appropriate [1] - 8:32 April [1] - 5:28 article [1] - 8:14 Assembly [1] - 2:24 assistance [2] - 12:6, 12:11 assume [1] - 9:5 AT [2] - 1:56, 13:25 ATTENDANCE [1] - 1:29 attendance [1] - 2:31 attention [1] - 2:44 Attorney's [2] - 11:38, 11:53 attorneys [1] - 11:53 Audio [1] - 2:45 Auditorium [1] - 1:14 available [2] - 9:53, 10:12 awake [1] - 8:1 aware [5] - 4:1, 4:9, 8:16, 11:33, 11:44	bit [3] - 3:45, 6:12, 7:7 bombarded [1] - 9:2 Bontempi [1] - 1:22 BONTEMPI [4] - 3:1, 8:49, 8:56, 9:30 books [1] - 13:12 booster [2] - 7:32, 9:52 boosters [1] - 7:31 Box [1] - 2:45 breakdown [2] - 9:23, 9:24 breaks [1] - 5:40 brett [1] - 1:32 Bridget [1] - 1:24 Brook [1] - 10:47 brought [1] - 9:4 budget [2] - 10:3 Budget [1] - 1:33 Building [2] - 1:15, 2:33 building [3] - 2:38, 3:43, 3:55 Bureau [2] - 4:39, 9:51 BY [2] - 1:41, 1:44	10:27, 10:56, 11:12, 12:22, 12:32, 12:43, 12:50, 13:2, 13:8, 13:14, 13:20 Chairwoman [1] - 6:6 chance [2] - 3:45, 12:19 change [2] - 11:4, 12:41 changes [1] - 12:3 cheaper [1] - 10:20 check [1] - 11:41 checked [1] - 9:9 Chief [3] - 1:32, 2:52, 8:15 child [2] - 6:35, 9:52 children [2] - 6:27, 11:5 China [1] - 5:17 Christmas [1] - 5:10 circulating [4] - 5:14, 5:45, 10:39, 10:52 circulation [1] - 8:14 circumstance [1] - 7:15 CityMD [1] - 10:37 cleared [1] - 5:41 Clerk [3] - 2:17, 2:52, 13:3 clerk [1] - 2:50 Clerk's [3] - 2:44, 11:30, 12:29 clerk.legislature@suffolkcountyny.gov [1] - 2:43 Clerk/Suffolk [2] - 1:31, 1:32 Clerks [1] - 12:33 close [1] - 10:11 CO [1] - 3:52 Code [1] - 4:38 coded [1] - 9:20 cold [1] - 5:45 colder [1] - 6:18 coming [2] - 4:53, 4:55 comment [1] - 2:32 comments [1] - 2:47 commission [1] - 8:26 Commissioner [1] - 6:8 COMMISSIONER [2] - 4:21, 4:28, 4:37, 4:49, 6:15, 6:29, 6:42, 6:54, 7:18, 7:28, 8:5, 8:20, 8:38, 8:52, 9:14, 9:39, 9:49, 10:16, 10:24, 10:33, 11:9
2	2019 [1] - 11:23 2020 [3] - 2:28, 5:7, 5:29 2021 [1] - 5:7 2022 [1] - 1:16 24 [1] - 4:54 25th [1] - 5:26 26th [1] - 5:1 27 [1] - 1:16 275 [1] - 12:54 28.1% [1] - 4:53 2:05 [1] - 1:56 2:33 [1] - 13:25	8	9	A
	8.3% [2] - 5:2, 10:42 84 [1] - 6:45 8591 [1] - 2:24	911 [2] - 8:23, 11:34 96 [1] - 6:44	ability [1] - 8:16 able [3] - 6:32, 11:41, 12:13 acceptance [1] - 11:36 accepted [1] - 2:46 access [1] - 7:6 accordance [1] - 2:36 accurate [1] - 6:52 active [1] - 7:5 activity [1] - 11:45 acute [1] - 7:37 addition [1] - 5:11 additional [1] - 12:28 addressing [1] - 2:40 adequate [2] - 9:50, 10:30 adjourn [1] - 13:22 adjourned [1] - 13:23 admitted [1] - 7:36 adopted [1] - 2:27 adult [2] - 5:35, 6:39 advanced [1] - 7:7 affecting [2] - 6:27, 11:50 afternoon [3] - 2:3, 4:22, 9:37 agency [4] - 8:34, 12:6, 12:7 aggregated [1] - 9:22 ago [1] - 8:14 agree [1] - 7:19 Aide [2] - 1:34, 1:35 air [1] - 6:32 alarms [2] - 3:52 ali [1] - 1:34 allow [2] - 2:31, 12:16	
3	319 [1] - 7:33 32% [1] - 7:40 345 [1] - 5:34 37% [1] - 7:41	B	C	
	B.1.1.7 [1] - 5:19 B1 [1] - 5:18 bad [1] - 5:52 badly [1] - 6:27 Bartik [2] - 1:37, 11:16 BARTIK [8] - 11:19, 12:26, 12:36, 12:47, 12:53, 13:5, 13:11, 13:17 based [2] - 6:50, 12:4 basement [1] - 12:55 basic [1] - 12:40 become [1] - 12:12 becomes [1] - 10:44 becoming [1] - 12:11 better [1] - 5:30	CALLED [1] - 1:56 callers [1] - 2:46 capacity [1] - 4:29 capture [1] - 10:34 captured [1] - 9:8 Caracappa [1] - 1:14 carbon [2] - 3:49, 11:32 care [9] - 5:24, 5:35, 5:52, 6:31, 6:43, 7:8, 7:38, 10:37 carrying [1] - 10:14 Castiglione [1] - 1:45 caused [1] - 5:33 causes [1] - 11:4 caution [1] - 5:3 CDC [1] - 2:37 certain [1] - 10:12 certainly [1] - 7:53 certificate [1] - 9:15 Chair [7] - 1:21, 1:22, 3:29, 4:13, 4:22, 7:50, 8:50 CHAIRPERSON [30] - 2:2, 2:9, 2:16, 2:22, 2:54, 3:19, 3:25, 3:31, 4:15, 4:25, 4:31, 4:42, 6:1, 7:46, 7:52, 8:46, 9:33, 10:7, 10:19,		
4	40% [1] - 7:31 46% [1] - 7:34			
5	5th [1] - 4:55			
6	6100 [1] - 2:45 63 [1] - 6:46 631-853-3685 [1] - 2:46 687 [2] - 5:26, 7:32			
7	7,000 [2] - 4:54 7-Eleven [3] - 10:13,			

DATE

Commissioner/Health [1] - 1:36
COMMITTEE [1] - 1:4
committee [2] - 2:3, 3:35
Committee [4] - 1:13, 2:4, 4:1, 4:23
communities [1] - 12:1
community [3] - 10:52, 11:56, 12:4
comorbidities [1] - 6:36
companies [1] - 11:54
complaints [1] - 4:4
complete [1] - 10:34
complex [1] - 3:38
concern [1] - 8:16
CONCLUDED [1] - 13:25
conducting [1] - 2:30
conference [1] - 1:17
Congratulations [1] - 8:2
Conifer [3] - 3:39, 4:33, 8:10
Coniford [1] - 3:37
Consequently [1] - 2:30
considered [1] - 7:34
contacted [1] - 11:25
continue [2] - 2:26, 4:9
cooled [1] - 8:27
copies [2] - 12:29, 12:44
copy [1] - 12:23
Coronavirus [1] - 7:13
correct [1] - 10:22
correspondence [1] - 2:17
cost [1] - 12:41
Counsel [1] - 1:30
count [1] - 9:26
COUNTY [1] - 1:8
County [23] - 1:13, 1:31, 1:32, 2:36, 2:44, 4:50, 5:38, 6:46, 6:56, 7:30, 8:33, 10:49, 11:23, 11:28, 11:34, 11:38, 11:53, 12:3, 12:5, 12:7, 12:12, 12:15
couple [1] - 9:53
court [1] - 12:16
Court [1] - 1:42

courts [1] - 12:15
COVID [39] - 4:50, 4:52, 5:25, 5:27, 5:28, 5:29, 5:33, 5:34, 5:36, 5:42, 5:44, 5:50, 5:53, 6:9, 6:20, 6:21, 6:34, 7:1, 7:8, 7:33, 7:37, 7:40, 7:41, 8:18, 8:22, 8:24, 8:40, 9:5, 9:7, 9:19, 9:24, 9:25, 9:43, 10:40, 10:49, 11:3
COVID-19 [8] - 2:25, 2:36, 4:18, 4:46, 5:16, 6:17, 9:16, 9:27
crackdown [1] - 11:42
Craig [1] - 1:33
create [1] - 11:28
criminal [1] - 11:45
cross [1] - 12:14
current [1] - 2:37
cycle [1] - 10:3

D

daily [1] - 11:4
danger [1] - 6:26
data [1] - 9:22
date [1] - 5:54
deal [1] - 4:52
dealing [1] - 4:35
death [11] - 5:38, 5:53, 6:34, 9:15, 9:16, 9:17, 9:18, 9:19, 9:20, 9:21, 9:24
DEC [1] - 11:34
December [2] - 8:21, 8:27
delivered [1] - 8:33
delta [1] - 5:19
Department [7] - 3:40, 4:35, 10:10, 10:22, 10:31, 11:35, 11:38
Deputy [2] - 1:32, 2:52
descent [1] - 4:51
detectors [2] - 3:51, 11:32
diagnosis [1] - 6:34
Diana [1] - 1:42
died [1] - 9:25
difference [2] - 7:25, 7:35
different [1] - 13:12
dioxide [1] - 3:49
dire [1] - 3:46
disability [1] - 3:54
disaster [1] - 2:25
disbar [1] - 11:53

discharged [1] - 6:32
disease [1] - 9:20
disseminated [1] - 9:23
distributed [2] - 2:20, 2:47
District [1] - 11:38
districts [1] - 10:12
Doc [2] - 9:37, 10:4
Doctor [4] - 3:40, 8:1, 8:32, 8:44
DOH [1] - 8:9
dominant [1] - 5:14
Dominick [2] - 1:23, 2:5
done [4] - 6:9, 6:56, 9:12, 10:42
Donnelly [4] - 1:25, 9:34, 9:40, 10:8
DONNELLY [4] - 3:13, 9:36, 9:42, 10:1
Donohue [1] - 1:35
down [9] - 4:56, 5:3, 5:26, 6:44, 6:46, 7:39, 8:10, 10:43, 10:50
Dr [7] - 1:36, 3:43, 4:17, 4:19, 6:2, 6:6, 8:50
dropping [1] - 10:29
due [3] - 2:12, 5:34, 9:16
Duffy [1] - 1:30
during [1] - 10:3

E

e-mail [2] - 2:42, 12:29
easier [1] - 10:13
education [1] - 11:35
effective [1] - 5:51
Either [1] - 2:33
elevator [1] - 3:53
eligible [1] - 7:31
emergencies [1] - 8:17
emergency [3] - 2:26, 7:15, 12:56
EMS [3] - 8:13, 8:14, 8:17
encourage [1] - 5:49
end [2] - 2:25, 7:26
endemic [2] - 5:44, 7:15
ensure [1] - 4:10
epidemic [1] - 11:42
equity [1] - 11:48
especially [1] - 4:11
Esteban [1] - 1:26
ESTEBAN [1] - 3:10

Europe [1] - 5:17
evaluated [1] - 8:24
events [1] - 5:9
executive [1] - 13:22
exhausted [1] - 7:12
exhausting [1] - 11:2
experience [1] - 11:20
explain [1] - 9:11
extends [1] - 2:24

F

facilities [3] - 5:34, 5:35, 10:36
facts [1] - 8:12
fake [1] - 11:54
families [2] - 12:5, 12:13
family [1] - 11:40
fashion [1] - 2:31
fastest [1] - 11:45
fatalities [2] - 5:33, 9:3
fatality [1] - 9:26
few [2] - 4:45, 7:6
figures [2] - 8:12
figuring [1] - 7:14
files [1] - 11:29
fined [1] - 11:54
Fire [2] - 3:41, 11:34
fire [3] - 3:43, 3:51, 8:17
first [10] - 3:39, 4:53, 6:51, 7:9, 8:13, 8:25, 8:28, 8:41, 10:10, 11:28
fitting [1] - 8:40
five [1] - 4:3
Fleming [3] - 1:24, 1:35, 6:3
FLEMING [8] - 3:4, 6:5, 6:24, 6:38, 6:49, 7:11, 7:21, 7:43
Flesher [1] - 1:42
floor [3] - 3:54, 11:32, 12:55
flu [2] - 5:45, 6:19
folks [2] - 7:36, 8:9
follow [3] - 5:24, 10:4, 10:45
follow-up [1] - 10:4
following [1] - 5:6
fourth [1] - 4:51
Frank [1] - 1:31
Freas [1] - 1:33
frequently [1] - 11:6
frustration [1] - 11:4
fueled [1] - 5:8

full [1] - 10:34
fully [5] - 7:34, 7:36, 7:39, 7:40, 7:41
funding [1] - 12:4

G

gallons [1] - 12:54
gatherings [2] - 5:9, 5:11
generally [2] - 9:21, 9:27
GoHealth [1] - 10:37
governmental [1] - 4:10
Governor [1] - 2:23
grandkids [1] - 12:55
great [2] - 4:43, 8:2
greetings [1] - 8:53
Gregson [2] - 1:36, 4:17
grew [1] - 5:13
groundwater [1] - 11:36
growing [1] - 11:45
guess [2] - 8:18, 9:2
gun [1] - 2:12
guys [1] - 12:54

H

Halloween [1] - 5:9
handed [1] - 3:35
handled [1] - 4:4
hard [1] - 6:7
hate [1] - 9:9
Hauppauge [1] - 2:45
heading [1] - 3:42
HEALTH [1] - 1:4
health [5] - 3:42, 5:24, 9:44, 9:47, 9:52
Health [14] - 1:13, 2:4, 3:40, 4:1, 4:18, 4:23, 4:35, 4:39, 6:8, 9:50, 10:10, 10:22, 10:30, 11:35
heard [2] - 4:32, 8:28
heart [1] - 9:20
heat [1] - 4:34
heaters [1] - 3:51
heating [2] - 3:49, 3:50
heats [1] - 4:12
height [1] - 4:5
held [1] - 1:14
hello [2] - 4:19, 8:50
helpful [1] - 7:44
hi [1] - 11:20
Hi [1] - 8:1

DATE

high [1] - 5:30	2:31, 2:32	10:56, 11:12, 12:22,	lights [1] - 3:52	modifications [1] -
higher [1] - 7:35	incentive [1] - 6:43	12:32, 12:43, 12:50,	limited [1] - 2:34	2:24
Highway [1] - 1:16	including [2] - 8:9,	13:2, 13:8, 13:14,	lines [1] - 4:10	Moment [1] - 2:14
hit [1] - 6:8	12:38	13:20	listens [1] - 11:2	money [1] - 12:41
home [5] - 6:33,	increases [1] - 11:5	kids [3] - 6:16, 6:26,	live [1] - 3:37	monitoring [1] -
10:10, 10:21, 11:46,	incredible [1] - 6:7	6:31	local [1] - 8:14	10:48
11:48	indoor [1] - 5:8	Kim [1] - 1:45	lock [1] - 11:51	monoclonial [1] - 7:4
homeless [3] -	induced [1] - 5:53	kind [2] - 8:13, 10:50	locks [1] - 11:46	monoxide [1] - 11:32
12:11, 12:12, 12:13	infarction [1] - 9:17	KN95 [1] - 8:35	look [2] - 7:23, 10:51	month [2] - 5:33,
homeowner [1] -	infection [1] - 10:29	knowledge [1] - 8:32	looking [2] - 8:22,	5:36
11:51	inform [1] - 11:55		9:54	monthly [1] - 11:56
homes [1] - 5:35	information [3] -	L	looks [2] - 5:46,	Mora [1] - 2:11
hopefully [1] - 5:40	3:44, 11:31, 12:30	lack [1] - 4:34	12:54	most [3] - 5:24, 6:31,
horrible [1] - 9:10	initial [1] - 8:35	lady [1] - 3:48	low [1] - 5:42	11:24
Hospital [1] - 6:35	injustice [1] - 12:13	landlord [1] - 11:29	lucky [1] - 4:17	motion [2] - 2:27,
hospital [7] - 3:49,	inside [1] - 2:38	landlord/tenant [1] -		13:22
7:23, 7:25, 7:26, 8:24,	intensive [3] - 5:52,	12:15	M	move [1] - 13:15
9:4, 9:8	7:8, 7:38	landlords [3] - 11:21,	M.D [1] - 4:18	moving [2] - 3:51,
hospitalizations [3] -	interactions [1] -	11:23, 11:42	Madam [3] - 3:29,	7:14
5:37, 6:11, 6:21	8:18	last [4] - 4:52, 6:50,	4:13, 8:50	MR [3] - 2:19, 3:16,
Hospitalizations [1]	interested [2] - 1:38,	10:3, 12:37	mail [4] - 2:42, 2:43,	3:22
- 6:17	2:40	late [3] - 5:12, 8:21,	12:1, 12:29	MS [8] - 11:19,
hospitalized [2] -	intervenously [1] -	8:27	main [1] - 8:39	12:26, 12:36, 12:47,
6:17, 7:32	7:4	latest [1] - 5:1	maintaining [1] -	12:53, 13:5, 13:11,
hospitals [10] - 5:23,	interviewing [1] -	Law [1] - 2:25	8:35	13:17
5:27, 5:29, 5:35, 5:41,	9:54	leave [1] - 2:46	management [2] -	myocardial [1] - 9:17
6:33, 6:47, 7:1, 7:6,	Introductory [1] -	led [1] - 2:5	4:3, 11:54	
7:33	13:21	LEG [25] - 3:1, 3:4,	mandated [1] - 10:22	N
hotline [1] - 11:39	intubated [1] - 6:39	3:7, 3:10, 3:13, 3:28,	Manuel [1] - 1:26	N95 [1] - 8:40
hour [1] - 4:55	irene [1] - 1:35	3:34, 6:5, 6:24, 6:38,	March [1] - 2:27	names [1] - 12:14
house [2] - 3:50,	issue [1] - 8:10	6:49, 7:11, 7:21, 7:43,	Marshal [1] - 11:34	nation [1] - 11:45
11:48	issues [2] - 4:47,	7:49, 7:56, 8:8, 8:31,	Marshals [1] - 3:41	Nazir [1] - 1:34
household [1] -	9:45	8:43, 8:49, 8:56, 9:30,	mask [3] - 2:38, 8:40	near [1] - 10:20
11:32	IV [1] - 7:3	9:36, 9:42, 10:1	masks [1] - 8:36	need [5] - 5:49, 6:31,
housing [4] - 11:40,		Legislative [5] -	Master [1] - 4:18	8:39, 11:33, 13:23
11:55, 12:5, 12:7		1:14, 1:45, 2:30, 2:33,	maternal [1] - 9:51	neighborhood [1] -
humidified [1] - 6:32	J	3:56	matter [1] - 3:56	10:21
Huntington [1] - 6:35	jail [2] - 9:45, 11:55	Legislator [16] -	Meeting [1] - 2:24	New [3] - 1:16, 2:45,
hybrid [1] - 2:31	January [11] - 1:16,	1:21, 1:25, 1:26, 1:34,	meeting [3] - 1:13,	5:10
	3:39, 4:53, 4:55, 5:1,	1:35, 4:16, 4:22, 4:33,	2:4, 3:40	new [5] - 2:25, 4:46,
I	5:25, 5:26, 5:33, 5:36,	5:55, 6:2, 7:53, 9:34,	MEETING [2] - 1:56,	5:11, 5:43, 9:54
ICU [4] - 6:13, 6:44,	6:43, 6:45	9:40, 10:8, 11:24,	13:25	news [2] - 4:34, 4:45
7:39, 7:40	job [2] - 8:2, 8:9	12:38	meetings [1] - 2:30	newsletters [1] -
ideas [1] - 7:1	judge [1] - 12:19	legislator [3] - 1:22,	MEMBERS [1] - 1:20	11:56
illness [2] - 5:37, 9:7	judges [1] - 12:16	1:23, 1:24	members [5] - 2:3,	next [1] - 5:18
immediate [1] - 8:16		Legislators [3] -	2:20, 2:37, 2:41, 3:35	nice [2] - 6:6, 9:1
impact [4] - 5:24,	K	2:40, 4:8, 11:55	Memorial [1] - 1:15	nobody [1] - 3:53
6:12, 6:16, 7:25	keep [4] - 2:11, 4:4,	LEGISLATURE [1] -	message [1] - 2:47	non [1] - 9:43
impacted [1] - 5:27	10:25, 10:28	1:8	metric [1] - 5:24	non-COVID [1] - 9:43
impacting [1] - 7:8	keeping [1] - 5:51	Legislature [8] -	might [2] - 9:7, 11:6	normal [2] - 5:43
importance [1] -	keeps [2] - 8:40, 12:8	1:13, 1:15, 1:30, 1:31,	migrated [1] - 5:17	not-for-profit [1] -
11:36	Kennedy [5] - 1:21,	1:32, 2:26, 2:44, 2:48	minute [2] - 2:10,	12:4
important [3] - 5:24,	1:34, 4:22, 5:55, 6:6	Leslie [2] - 1:21, 7:44	2:47	note [1] - 2:23
5:53, 11:24	KENNEDY [30] - 2:2,	less [4] - 6:51, 6:55,	MINUTES [3] - 1:10,	November [1] - 5:12
improved [1] - 8:29	2:9, 2:16, 2:22, 2:54,	7:15	1:41, 1:44	number [3] - 4:47,
improving [1] -	3:19, 3:25, 3:31, 4:15,	letter [3] - 3:36, 3:48,	minutes [2] - 2:34,	5:1, 5:26
10:53	4:25, 4:31, 4:42, 6:1,	12:28	11:17	numbers [3] - 5:42,
IN [1] - 1:29	7:46, 7:52, 8:46, 9:33,	letting [1] - 12:51	mix [1] - 6:20	9:2
in-person [3] - 1:16,	10:7, 10:19, 10:27,	level [2] - 6:25, 8:15		nurse [1] - 10:9

DATE

nurses [2] - 9:44,
9:47
nursing [1] - 5:35
Nursing [1] - 9:50

O

occasional [1] - 8:23
OF [1] - 1:6
Office [6] - 1:33,
2:44, 11:30, 11:39,
11:53, 12:30
office [4] - 4:1, 4:2,
9:46, 12:29
offices [2] - 4:10,
10:37
oil [4] - 11:28, 11:33,
12:54
old [1] - 4:4
omicron [7] - 4:51,
5:4, 5:19, 6:13, 6:27,
7:6, 8:25
one [15] - 2:10, 3:36,
3:48, 5:17, 5:18, 6:33,
7:5, 10:47, 11:24,
11:44, 12:7, 12:33,
12:37, 13:23
one's [1] - 12:37
ones [2] - 4:11, 9:51
Open [1] - 2:24
operate [1] - 2:26
opportunity [1] -
11:17
ORDER [1] - 1:56
order [1] - 2:4
organizations [1] -
12:4
original [2] - 5:16,
5:28
ourselves [1] - 11:2
own [2] - 8:34, 12:38
owned [1] - 3:38
oxygen [1] - 6:32

P

P.O [3] - 2:11, 2:45
page [1] - 12:37
pamphlet [2] - 11:29,
11:31
parties [1] - 1:38
party [1] - 12:16
pass [1] - 9:6
passed [6] - 2:11,
3:48, 5:34, 9:6, 9:27,
11:15
Patchogue [1] - 3:38
Patchogue/East [1] -
3:37
patient [2] - 9:4, 9:18

patients [7] - 5:25,
5:27, 5:29, 5:42, 6:26,
6:40, 7:1
Patricia [2] - 1:37,
11:16
pattern [3] - 5:7,
5:10, 6:20
pay [2] - 12:17, 12:19
peak [1] - 6:21
peaked [6] - 4:52,
5:25, 5:28, 5:29, 6:43,
6:45
pediatric [5] - 6:12,
6:21, 6:26, 6:30, 6:33
people [24] - 3:37,
5:23, 5:34, 5:52, 6:44,
7:2, 7:24, 7:30, 7:33,
7:38, 7:39, 8:22, 8:23,
9:10, 9:27, 10:30,
10:36, 11:5, 11:39,
11:44, 11:46, 11:47,
11:50, 12:8
percent [1] - 10:44
percentage [1] - 7:38
performed [1] - 9:6
period [1] - 4:55
permit [1] - 11:30
person [4] - 1:16,
2:31, 2:32, 11:15
personal [1] - 3:29
Pfizer [1] - 9:52
pharmacies [1] -
10:13
picture [1] - 10:35
pictures [1] - 11:20
Piggot [4] - 3:44,
4:18, 4:19, 8:50
Piggot [3] - 1:36, 6:2,
6:6
PIGOTT [21] - 4:21,
4:28, 4:37, 4:49, 6:15,
6:29, 6:42, 6:54, 7:18,
7:28, 8:5, 8:20, 8:38,
8:52, 9:14, 9:39, 9:49,
10:16, 10:24, 10:33,
11:9
pilot [1] - 10:47
Pinehurst [2] - 3:38,
3:54
place [1] - 11:50
Pledge [1] - 2:5
plenty [1] - 8:41
PM [2] - 1:56, 13:25
pneumonia [1] - 9:16
point [2] - 3:29, 4:47
poisoning [1] - 3:49
Police [1] - 11:38
police [1] - 8:17
policy [1] - 12:3
population [4] -

6:12, 6:39, 7:22, 7:31
portable [1] - 3:51
portion [3] - 2:32,
3:20, 11:15
positions [2] - 9:53,
10:2
positive [10] - 4:54,
4:55, 5:2, 5:23, 6:16,
7:33, 7:41, 9:27,
10:21, 10:42
positivity [2] - 5:2,
10:44
PPE [1] - 8:39
PPEs [1] - 8:32
prayers [1] - 2:11
precautions [1] -
5:50
present [7] - 2:55,
3:2, 3:5, 3:8, 3:11,
3:14, 3:43
PRESENT [1] - 1:20
presentation [2] -
4:17, 11:16
pretty [1] - 5:13
prevention [1] -
12:10
previous [1] - 5:7
primarily [2] - 5:8,
9:51
primary [7] - 9:15,
9:16, 9:18, 9:20, 9:21,
9:24, 10:37
privilege [1] - 3:29
procedural [1] - 2:27
process [1] - 11:3
profit [1] - 12:4
program [1] - 10:47
progress [1] - 7:13
promote [1] - 11:35
property [1] - 11:54
proportion [1] - 7:35
prospective [1] -
11:42
Protection [1] - 4:39
protection [1] -
11:36
protocols [1] - 2:36
proven [1] - 5:51
provide [2] - 11:31,
11:56
Public [3] - 4:18,
4:39, 9:50
public [12] - 2:31,
2:32, 2:37, 2:42, 3:20,
3:36, 9:23, 9:44, 9:47,
11:15, 11:35, 11:47
put [4] - 4:8, 10:2,
11:21, 11:55
putting [1] - 7:2

Q

questions [4] - 4:46,
6:2, 7:47, 9:34
quite [4] - 5:47, 8:1,
8:15, 9:26
quote [1] - 5:43

R

rate [1] - 10:29
read [1] - 8:14
reading [1] - 12:23
real [1] - 6:26
really [6] - 5:52,
8:40, 9:20, 9:23,
10:29
reason [1] - 9:4
receive [1] - 12:4
received [5] - 3:36,
3:44, 4:7, 7:30, 7:31
recent [1] - 8:10
recently [1] - 2:23
recommendation [1]
- 2:37
recommendations
[1] - 11:25
recommended [1] -
12:18
record [6] - 3:36,
3:56, 4:7, 4:8, 11:21,
11:47
recorded [1] - 10:38
records [2] - 11:48,
12:8
reference [1] - 12:14
region [1] - 7:29
regular [1] - 2:43
related [2] - 9:43
relative [3] - 6:50,
7:23, 7:26
remain [1] - 2:10
remdesivir [1] - 7:4
remember [1] - 6:7
remote [1] - 2:33
rent [1] - 12:17
renter's [1] - 11:30
renters [1] - 11:55
renting [1] - 11:42
report [4] - 10:22,
11:33, 11:39, 12:5
reported [1] - 10:38
reporting [1] - 10:30
represent [1] - 11:54
representation [1] -
10:51
request [1] - 12:3
required [3] - 2:37,
8:34, 8:36
requirements [1] -

2:25
residents [6] - 4:5,
4:11, 6:46, 7:30,
11:29, 11:33
resolutions [1] -
4:16
Resolutions [2] -
13:21, 13:22
respirator [1] - 8:36
respiratory [2] -
6:18, 6:19
respond [2] - 8:17,
12:38
responders [4] -
8:13, 8:25, 8:28, 8:41
rest [1] - 4:1
reticent [1] - 5:32
Review [1] - 1:33
ridiculous [1] - 12:10
rightly [1] - 4:22
Rivera [1] - 2:11
ROBINSON [3] -
2:19, 3:16, 3:22
Robinson [2] - 1:32,
2:52
Rogers [2] - 1:15,
2:32
roll [1] - 2:50
Roll [1] - 2:52
room [1] - 12:56
Rose [1] - 1:14
roughly [1] - 10:39
RSV [1] - 6:19
rules [1] - 2:27

S

sad [1] - 12:39
safety [4] - 2:36,
3:42, 4:5, 4:10
Salutation [1] - 2:7
Sanitarians [1] -
4:39
Sanitary [1] - 4:38
scammed [4] -
11:21, 11:40, 11:46,
12:8
scams [2] - 11:55,
12:5
scene [1] - 5:12
schools [1] - 11:5
screen [1] - 3:45
second [2] - 3:53,
3:54
secondary [1] - 9:19
Secretary [1] - 1:45
see [7] - 5:1, 6:6, 9:1,
9:40, 10:52, 12:28,
12:54
seeing [3] - 6:13,

DATE

6:26, 10:49
Senate [1] - 2:23
Senator [1] - 4:2
send [1] - 2:42
senior [1] - 4:3
serious [1] - 6:51
seriousness [1] - 6:25
serve [1] - 12:1
Services [1] - 1:36
session [1] - 13:22
settings [1] - 7:37
seven [1] - 4:4
several [5] - 3:36, 3:41, 4:40, 10:2, 10:48
shelters [1] - 12:13
short [1] - 5:13
shot [1] - 7:32
shots [1] - 9:52
sick [1] - 12:55
sickness [2] - 5:37, 5:53
sign [1] - 2:40
signed [1] - 2:23
significant [1] - 5:37
Silence [1] - 2:14
similar [1] - 5:10
simple [1] - 12:40
simply [1] - 4:12
single [1] - 12:7
sites [1] - 10:48
situation [8] - 3:46, 4:34, 4:50, 5:41, 7:16, 8:29, 8:39, 11:41
six [2] - 3:17, 4:3
slightly [1] - 4:54
slumlords [2] - 11:39, 12:6
Smithtown [1] - 1:16
smoke [1] - 3:51
snapshot [4] - 10:35, 10:39, 10:43, 10:51
social [2] - 5:9, 5:11
sotrovimab [1] - 7:6
speakers [3] - 2:34, 3:20, 3:23
specific [1] - 6:30
spill [3] - 11:28, 11:33
spots [1] - 10:12
spring [1] - 5:40
staffing [2] - 9:45, 9:50
stand [2] - 2:5, 9:46
standing [1] - 2:10
stat [1] - 10:44
state [3] - 2:25, 2:36, 10:38

statistically [1] - 9:9
statistics [3] - 9:3, 10:30, 12:14
stay [1] - 5:54
Stenographer [1] - 1:42
stephanie [1] - 8:47
Stephanie [1] - 1:22
steroids [1] - 7:3
still [7] - 5:27, 5:30, 5:36, 5:49, 5:50, 8:35, 10:36
stomachs [1] - 7:2
Stony [1] - 10:47
stop [1] - 11:25
strain [2] - 5:18, 5:19
stress [2] - 8:16, 8:28
stressed [1] - 8:15
structure [1] - 3:52
subject [1] - 5:18
Submitted [1] - 2:47
subzero [1] - 4:11
SUFFOLK [1] - 1:8
Suffolk [15] - 1:13, 2:44, 4:50, 5:38, 6:46, 6:56, 7:29, 10:48, 11:29, 11:34, 11:38, 11:53, 12:3, 12:7, 12:11
suggestions [1] - 12:39
supply [3] - 4:18, 8:35
supplying [1] - 8:33
supportive [1] - 6:31
surge [3] - 5:4, 5:6, 5:8
sworn [1] - 6:8
symptoms [2] - 6:27, 6:52
syncytial [1] - 6:18
system [2] - 5:25, 8:28
systems [1] - 12:16

T

Tabled [1] - 13:21
TAKEN [1] - 1:41
talent [1] - 9:54
Tassone [1] - 1:31
team [1] - 4:3
temperatures [1] - 4:11
tenants [1] - 11:41
terms [15] - 5:37, 6:16, 6:21, 6:39, 6:50, 7:2, 7:13, 7:24, 7:30, 7:32, 7:37, 7:39, 9:46

test [4] - 6:16, 9:6, 10:21
tested [3] - 7:33, 8:24, 9:27
testified [2] - 11:22, 12:27
testimony [3] - 2:33, 2:42, 2:45
testing [2] - 5:23, 5:42
tests [8] - 4:53, 4:54, 5:2, 8:23, 10:11, 10:36, 10:38, 10:42
Thanksgiving [2] - 5:9, 5:13
THE [3] - 1:6, 1:56, 13:25
themselves [1] - 8:26
therapeutics [1] - 7:2
therefore [1] - 2:26
third [2] - 3:54, 11:3
THORNE [8] - 3:7, 3:28, 3:34, 7:49, 7:56, 8:8, 8:31, 8:43
Thorne [5] - 1:23, 2:5, 4:16, 4:33, 7:53
thousand [2] - 3:37, 5:22
three [3] - 2:34, 2:46, 11:17
throughout [1] - 12:15
tips [1] - 11:56
tiring [1] - 7:12
title [2] - 11:46, 11:51
TO [1] - 1:56
today [3] - 3:53, 4:19, 4:34
toll [1] - 5:37
Tom [1] - 1:25
totally [1] - 12:10
towards [1] - 7:14
town's [1] - 11:30
townships [1] - 11:30
track [2] - 12:5, 12:14
Traditionally [1] - 6:18
TRANSCRIBED [1] - 1:44
transport [1] - 8:23
treat [1] - 7:1
trends [1] - 10:53
truly [1] - 8:9
try [2] - 5:53, 11:25
two [2] - 4:52, 13:12

U

UK [1] - 5:19
unacceptable [1] - 4:12
under [2] - 2:27, 4:54
unit [5] - 3:50, 5:52, 6:43, 7:8, 7:38
units [3] - 3:50, 8:17
unquote [1] - 5:43
unrepaired [1] - 3:49
unvaccinated [1] - 7:36
up [9] - 2:40, 3:54, 5:54, 6:17, 7:26, 10:4, 11:16, 12:20, 12:23
update [3] - 4:18, 6:30, 9:44
updates [1] - 11:7
useful [1] - 10:44
utmost [1] - 4:5

V

vaccinated [7] - 5:50, 7:29, 7:34, 7:36, 7:39, 7:40, 7:41
vaccination [3] - 5:54, 7:23, 7:26
vaccinations [2] - 6:55, 7:22
vaccine [1] - 9:52
vaccines [2] - 5:51
valuable [1] - 11:1
variant [6] - 4:46, 5:12, 5:14, 5:19, 6:51, 8:25
variants [1] - 5:16
ventilators [4] - 6:45, 6:46, 7:38, 7:41
versus [1] - 9:24
Veterans [1] - 1:15
via [3] - 1:16, 2:27, 2:33
Vice [1] - 1:22
victim [1] - 11:22
Village [2] - 3:37, 4:33
violations [3] - 3:42, 3:43, 4:38
violence [1] - 2:12
virus [3] - 5:45, 6:18, 10:49
viruses [2] - 5:46, 6:19
voicemail [1] - 2:46
vulnerable [1] - 4:11

W

WAS [1] - 1:56
wastewater [2] - 10:48, 10:49
wave [3] - 4:51, 5:28
wear [1] - 2:38
weather [2] - 5:40, 6:18
week [1] - 4:53
Weik's [1] - 4:2
William [3] - 1:15, 1:30, 2:32
winter [4] - 5:6, 5:8, 5:10, 6:34
wonderful [2] - 8:9, 12:44
woods [2] - 5:4, 5:22
words [1] - 5:44
workload [1] - 8:2
worst [2] - 8:21, 8:27
written [1] - 2:42
www.
scnylegislatre.us/CommitteePublicPortion [1] - 2:41

Y

year [4] - 4:4, 5:7, 7:9, 11:3
year's [1] - 10:3
years [1] - 4:52
Years [1] - 5:10
yesterday [1] - 10:42
York [2] - 1:16, 2:45
yourself [2] - 10:25, 10:28

Z

Zoom [3] - 1:17, 2:33, 2:40