CITY COUNCIL CITY OF NEW YORK -----Х TRANSCRIPT OF THE MINUTES Of the COMMITTEE ON HEALTH ----- Х May 3, 2017 Start: 10:14 a.m. Recess: 1:13 p.m. HELD AT: Council Chambers - City Hall B E F O R E: COREY D. JOHNSON Chairperson COUNCIL MEMBERS: ROSIE MENDEZ DANIEL DROMM MATHIEU EUGENE PETER A. KOO JAMES VACCA JAMES G. VAN BRAMER INEZ D. BARRON ROBERT BOOKMAN E CORNEGY, JR. RAFAEL L. ESPINAL, JR. World Wide Dictation 545 Saw Mill River Road - Suite 2C, Ardsley, NY 10502 Phone: 914-964-8500 * 800-442-5993 * Fax: 914-964-8470

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A P P E A R A N C E S (CONTINUED)

Corinne Schiff Deputy Commissioner for Environmental Health at The New York City Department of Health and Mental Hygiene

Robert Bookman Council to the New York City Hospitality Alliance Council's Appointee to the Food Advisory Board

Andrew Rigie Executive Director of the New York City Hospitality Alliance

Kevin Dugan Regional Director for the New York State Restaurant Association

Mathew Shapiro Staff Attorney at the Street Vendor Project of The Urban Justice Center

Jennifer Pomeranz Assistant Professor at New York University's College of Global Public Health and Interim Chair Of the Department of Public Health, Policy, and Management

Tom Merrill General Counsel at New York City Department of Health

Matt Greller NATO, Theatre Association of New York State

Julia McCarthy Attorney and Policy Analyst at the Laurie M. Tisch Center from Food, Education, and Policy

Melissa Olson Director of Nutrition at Community Health Care Network

A P P E A R A N C E S (CONTINUED)

Terence Tubridy New York City resident, Business Owner

Kim Kessler Assistant Commissioner for Chronic Disease Prevention and Tobacco Control

1	COMMITTEE ON HEALTH 4
2	[gavel]
3	CHAIRPERSON JOHNSON: Good morning
4	everyone. I'm Council Member Corey Johnson, Chair of
5	the New York City Council's Committee on Health and I
6	welcome you to today's hearing on a package of bills
7	related to restaurants and food safety. All New
8	Yorkers should feel confident that their food is safe
9	when they're going out to eat whether it's at a food
10	truck or a brick and mortar restaurant. It is the
11	city's governments job to enforce proper rules to
12	ensure the safety. However, it is also essential that
13	our regulatory system allows law abiding restaurants
14	to operate without feeling like they're under siege
15	from inspectors. Hard working small business owners
16	should not feel like the city is working against
17	them. that is why the council passed a package of
18	reforms to the restaurant grading system in 2013 and
19	it is why I introduce Introduction 1571 which would
20	build on these reforms. One of the reforms from 2013
21	created the Food Service Establishment Advisory
22	Board. This board has a majority of its members
23	appointed by the Mayor and includes experts in food
24	safety as well as the restaurant industry
25	representatives. It came up with a series of
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2 recommendations last year to improve the fairness of 3 the restaurant inspection grading system but the 4 Department of Health and Mental Hygiene has now said 5 that it will not implement many of these reforms. My bill would require these reforms to be implemented to 6 7 make the system more fair. This bill would ensure that the city is respecting the outcomes of its own 8 9 tribunals. Currently if a restaurant challenges inspection results in a tribunal the tribunal throws 10 11 the alleged violations out as unfounded. DOHMH puts 12 that restaurant on an accelerated inspection schedule 13 anyway, they inspect that restaurant more frequently 14 than other restaurants even though the tribunal said the violations were invalid, this is unfair and it 15 16 undermines the due process rights of restaurant 17 owners to challenge alleged violations by making them 18 worse off than other restaurant owners regardless of 19 the hearing outcome. We are also hearing bills by Council Member's Koslowitz and Dromm to increase 20 21 transparency in the inspection system. Council Member Koslowitz's bill, Introduction 1456 would bring 2.2 23 letter grades to food carts and Council Member Dromm's bill, Introduction 1263 would require school 24 cafeteria health inspection results to be posted 25

1	COMMITTEE ON HEALTH 6
2	online. Food vendors in cafeterias are inspected by
3	the Department of Health and Mental Hygiene just like
4	restaurants are and these bills would allow the
5	public to more easily access these results. Finally,
6	we are hearing Introduction 1103 by Council Member
7	Inez Barron, this bill would require diabetes
8	information signs to be posted in restaurants. Over
9	29 million Americans suffer from diabetes and
10	millions more have pre-diabetes, watching your weight
11	and exercising, I need to do a better job at that,
12	are the most effective ways to prevent type two
13	diabetes and we must do everything we can to educate
14	New Yorkers about how lifestyle effects the risk of
15	diabetes. I want to thank Council Member's Dromm,
16	Koslowitz, and Barron on their leadership in
17	introducing these bills and I look forward to hearing
18	from the Department of Health and Mental Hygiene,
19	advocates, and others today. I want to first call on
20	Council Member Koslowitz to make an opening
21	statement.
22	COUNCIL MEMBER KOSLOWITZ: Thank you Mr.
23	Chair. I'm going to make a very short speech. The
24	bill to letter grade vendors is long overdue and I
25	think to the health of our city it is important that
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1	COMMITTEE ON HEALTH 7
2	we letter grade vendors just like we letter grade
3	restaurants. I think that this bill like I said is
4	long overdue and should help people decide whether
5	they want to go to a vendor and have food, we have
6	people in this city that depend on the vendors for
7	their lunches sometimes even dinners because they
8	can't afford to go into a restaurant and I think they
9	have a right to know the cleanliness of that vendor.
10	So, I fully support it, a lot of my colleagues
11	support it and I look forward to it passing. Thank
12	you.
13	CHAIRPERSON JOHNSON: Thank you Council
14	Member, I want to call on Council Member Dromm for an
15	opening statement as well.
16	COUNCIL MEMBER DROMM: Thank you very
17	much Chair Johnson for hearing my bill about health
18	inspections of food facilities in schools. What's on
19	the school menu for today, sloppy joes with a side of
20	salmonella, tator tots topped with Tomean, perhaps
21	baked beans breeding botulism, such nasty hidden
22	contamination is not so farfetched when considering
23	the problems patently visible to students at
24	cafeterias throughout the city including moldy pizza
25	and metal laden chicken tenders turning up at schools
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1	COMMITTEE ON HEALTH 8
2	here in Lower Manhattan. If that isn't enough to turn
3	your stomach health inspectors commonly see
4	conditions in kitchens that clearly attract vermin
5	and even the evidence of such vermin. One
6	particularly egregious example was an elementary
7	cited for 400 incidents of mice waste found during a
8	cafeteria inspection. Serving well over 100 million
9	meals a year, the New York City's school food program
10	is one of the largest school service food service
11	operation in the country and systemwide quality
12	control is crucial to ensuring that our schools are
13	serving fair to nourish young minds and encourage a
14	lifetime of healthy eating. Without a doubt parents
15	and students deserve to know whether the food from
16	their cafeteria could make them sick. Intro 1263
17	would require the Department of Health and Mental
18	Hygiene to post on its website the results of food
19	related inspections in both public and private
20	schools. While our city's commercial dining
21	establishments have been cleaning up their act after
22	restaurant after the restaurant grading system was
23	introduced school facilities lack such a public
24	reporting requirement and unsurprisingly have not
25	improved over the same period. The saying, "sunlight

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is the bestest infectant" describes the benefits of 2 3 transparency in this situation quite appropriately 4 since the negative attention an unhygienic cafeteria conditions may encourage the use of literal 5 disinfectant. Thank you to the administration and the 6 7 advocates here, I look forward to working with you to ensure our schools serve fulfilling meals without the 8 9 unexpected and unappetizing extras.

CHAIRPERSON JOHNSON: Thank you Council 10 11 Member, we have Council Member Espinal from Brooklyn who's a member of this committee and Council Member 12 13 Koo from Queens who are members of this committee as 14 well. Before I turn it over to the Department to 15 present some testimony I just want to mention and I 16 think this was mentioned in my opening remarks but it 17 would be helpful and we can have Q and A about this 18 as well after the testimony, I want to understand why 19 the Health Department believes a judge's ruling does 20 not determine a letter grade on the initial inspection but does determine a letter grade on re-21 2.2 inspection, that's really the crux of what I, I want 23 to understand today. So, if you could please address that in your remarks that would be great. So, I'm 24 going to turn it over to Kim Kessler who is the 25

1	COMMITTEE ON HEALTH 10
2	Assistant Commissioner for Chronic Disease,
3	Prevention, and Tobacco Control at the Department of
4	Health and Mental Hygiene and Deputy Commissioner
5	Corrine Schiff of Environmental Health at DOHMH,
6	before you testify I would like to swear you in. So,
7	if you could please raise your right hand. Do you
8	affirm to tell the truth, the whole truth and nothing
9	but the truth in your testimony before this committee
10	and to respond honestly to council member questions?
11	Thank you very much, just make sure your mics are on
12	and you may begin.
13	CORINNE SCHIFF: Good morning Chairman
14	Johnson and members of the Health Committee… [cross-
15	talk]
16	CHAIRPERSON JOHNSON: You could pull the
17	mic a little closer… [cross-talk]
18	CORINNE SCHIFF: Sure, yeah
19	CHAIRPERSON JOHNSON: Thank you.
20	CORINNE SCHIFF: Okay. Good morning
21	Chairman Johnson and members of the Health Committee.
22	I'm Corinne Schiff, Deputy Commissioner for
23	Environmental Health at the New York City Department
24	of Health and Mental Hygiene. I am joined by my
25	colleague Kim Kessler, Assistant Commissioner for

1	COMMITTEE ON HEALTH 11
2	Chronic Disease Prevention and Tobacco Control. On
3	behalf of Commissioner Bassett, thank you for the
4	opportunity to testify today on four bills related to
5	food safety inspection. Ten years ago, a video of
6	rats swarming a Manhattan fast food restaurant went
7	viral. The video undermined public confidence in
8	restaurant safety and prompted the Health Department
9	to undertake a comprehensive review of our
10	inspectional system. We concluded that too many
11	restaurants had poor food handling practices, that
12	restaurants had little incentive to improve and that
13	the public was unaware of how restaurants performed.
14	Restaurants that maintained high standards received
15	no public benefit and appeared to diners to be no
16	different from those demonstrating poor restaurant
17	hygiene on their inspections. After an 18-month
18	planning process, we created a letter grading system
19	that combines transparency with powerful incentives
20	for restaurants to improve their food safety
21	practices and risk based oversights that promotes
22	public health. The letter grade cards had become part
23	of our street culture. Restaurant grading is hugely
24	popular among New Yorkers and visitors alike, and the
25	grades allow consumers to make informed decisions

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2 based on easy to understand information. The 3 incentive based system that forms the foundation of 4 letter grading is less well known than the grades 5 themselves but is just as important. The system is designed to motivate restaurants to meet the highest 6 7 standards by rewarding those that earn an "A" grade on their initial unannounced inspection with no fines 8 9 and no new inspection for a year. Getting an "A" on an unannounced inspection is key because it is the 10 11 inspection most likely to reflect ongoing food hygiene practices. Our data shows that an initial "A" 12 is the single best predictor that a future inspection 13 14 will also yield an "A". Restaurants that do not earn 15 an "A" on that initial inspection receive a second 16 chance at a re-inspection conducted about a month 17 later. Many restaurants improve by the re-inspection 18 and if they do and earn an "A", again there are no 19 fines. These incentives incorporate a risk based 20 inspection schedule tailored to each restaurant based 21 on its immediate inspection history. Poorer performing restaurants are inspected more frequently 2.2 23 than better performing ones. As a restaurant improves it demonstrates less need for department oversight 24 and is inspected less often. A risk based inspection 25

1	COMMITTEE ON HEALTH 13
2	schedule is the regulatory standard and it is what
3	the U.S. Food and Drug Administration and New York
4	State Department of Health recommend. We have seen
5	dramatic improvement in sanitary conditions in
6	restaurants since launching letter grading and
7	incentive based inspections in 2010. Before 2010, a
8	majority of restaurants scored what is now in the $"B"$
9	or "C" range on their initial inspection. Today 62
10	percent of restaurants post an "A" on initial
11	inspection. The improvement was rapid; in just one
12	year after we launched the program, 81 percent of
13	restaurants were posting "A's"; at three years, 86
14	percent of restaurants had "A's" and after five
15	years, 93 percent of restaurants were posting "A's"
16	in their windows. What does this mean in terms of
17	food safety? Overall sanitary violations are down 41
18	percent since Fiscal Year 2012 and when we look at
19	key food safety violations; ten percent of
20	restaurants cited for cold for holding cold food at
21	the wrong temperature which can allow dangerous
22	pathogens to multiply quickly in food and make a lot
23	of people sick is down 38 percent from 29 percent of
24	restaurants cited in 2010 pre-grading to 18 percent
25	today. Violations for signs of mice and roaches each

1	COMMITTEE ON HEALTH 14
2	decreased 44 percent in that same period. Similarly,
3	we've seen a decrease in the percent of restaurant
4	cited for not having proper hand washing facilities,
5	overall this violation is down 67 percent from nine
6	percent in 2010 to only three percent today. And
7	finally, before 2010, 12 percent of restaurants
8	received violations for not having a supervisor on
9	site trained in food protection. Having a trained
10	supervisor is not just a health code requirement but
11	it is the single best predictor of good sanitary
12	practices. The percentage of restaurants failing to
13	meet this requirement is now down to only seven
14	percent, a 42 percent decrease. Coinciding with
15	letter grading and incentive based inspections we
16	have seen a 32 percent drop in the rate of salmonella
17	cases in New York City since 2010 after years when
18	there were… rate remained flat. During the same
19	period, combined salmonella rates in Connecticut, New
20	Jersey, and areas of New York State outside of the
21	New York City declined by only seven percent.
22	Restaurants have also seen tremendous benefits from
23	letter grading and incentive based inspections. Fewer
24	restaurants are being closed because they've improved
25	their practices. In Fiscal Year 2010, we temporarily
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2 closed 1,051 restaurants because of serious health 3 violations. In Fiscal Year 2016, that number dropped to 566 and fines are down. Fines paid by restaurants 4 5 have declined dramatically in the last few years, from 52 million in Fiscal Year 2012 to 22 million 6 7 dollars in Fiscal Year 2016, a 58 percent decrease. 8 Fines are now at a level below what they were before 9 grading began and at the lowest point in the past ten years. In fact, 85 percent of restaurants earn "A" 10 11 grades at the time of their inspections and with that 12 "A" grade they pay no fines at all. Restaurants not yet earning "A's" have benefited from fine reduction 13 14 too. Working with the council in 2014, the Department 15 capped fines for the majority of violations at 200 16 dollars, the lowest level allowed under the New York City Health Code. And, together with the Council, we 17 created a fine waiver program, eliminating fines for 18 19 restaurants that end up with an "A" range score after 20 contesting an initial inspection ticket at a hearing. These changes have brought fine relief to restaurants 21 without lowering standards and compromising safety. 2.2 23 Owning a restaurant in New York is incredibly challenging, which is why we're gratified that more 24 operators are performing well on inspections and 25

1	COMMITTEE ON HEALTH 16
2	avoiding fines. The food service industry is a vital
3	part of New York City's economy and it has thrived
4	since grading and incentive based inspections began.
5	In 2010, New York City restaurants saw taxable sales
6	of 11.4 billion dollars. In 2016, that number rose to
7	18.5 billion an increase of more than 60 percent and
8	not all of the increase was due to an improving
9	overall economy. In 2010, New York City restaurants
10	and bars made up 10.4 percent of taxable sales across
11	all industries. In 2016, this increased to 12.6
12	percent demonstrating strong growth in the restaurant
13	sector. With 93 percent of restaurants posting an
14	"A", the Department is focused on helping the
15	remaining small number of restaurants reach that top
16	mark. Thanks to 2013 city council legislation, we
17	created a consultative inspection program that offers
18	one on one, violation free, educational inspections
19	for restaurant owners. We established Ombuds office
20	that provides restaurant owners with a point of
21	contact in the department so they can easily ask
22	questions about inspection results, make complaints,
23	and sometimes even pass along a compliment. And we
24	established a formal mechanism by which the
25	restaurant industry along with food safety and

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nutrition experts could advise the Health Department 2 3 by constituting a Food Service Establishment Advisory 4 Board. To advance language access, we recently published the study quide for our Food Protection 5 Course online for free in thirty-six languages other 6 7 than English. We developed and are piloting an inspection history report, an individualized review 8 9 of a particular restaurant's pattern of violations. The report enables a restaurant to focus on areas for 10 11 improvement and it... and it provides detailed guidance on how to comply with the food safety rule in need of 12 13 attention. With input from the advisory board, we are testing different methods of delivering this report 14 15 to restaurant owners. This spring we are offering a 16 series of free "Practicing A-Grade Food Safety" 17 courses for restaurants owners and managers. The 18 course will be held in each borough, the first is 19 tomorrow in Queens and has been organized in 20 partnership with the borough presidents. More than 21 300 people representing 163 restaurants have so far enrolled in tomorrow's class. We believe that there's 2.2 23 always room to improve any program and restaurant inspections are no exception. But fundamental to the 24 improvement in food safety practices since 2010 is 25

1	COMMITTEE ON HEALTH 18
2	the incentive based inspection schedule for
3	restaurants and transparency for the public through
4	letter grading. I will turn now to the bill, bills
5	under consideration today. Intro 1571 would severely
6	undermine the incentive based system that has led to
7	these historic improvements in food safety practices.
8	Moreover, the legislation would restrict the Health
9	Department's discretion to use its scientific
10	judgement and analysis to determine when it's
11	appropriate to conduct food safety inspections. The
12	bill would also undermine the advisory board created
13	just four years ago by the council, by mandating in
14	the administrative code significant changes to the
15	department's food safety program. The department
16	recommends that the changes to the inspection
17	schedule proposed by the bill be reviewed by the
18	advisory board so the council and the department can
19	benefit from the board member's multiple
20	perspectives. The proposed changes to the inspection
21	schedule are not supported by the data showing that
22	the current emphasis on the initial inspection leads
23	to better sanitary practices by restaurants. Seventy-
24	seven percent of restaurants that earn an "A" grade
25	at their initial inspection go on to earn an "A" at

1	COMMITTEE ON HEALTH 19
2	their next initial inspection but only 53 percent of
3	restaurants that reduced their score to below 14
4	points at the Office of Administrative Trials and
5	Hearings get an "A" on their next inspection. The
6	Health Department determines the level of oversight
7	appropriate for each restaurant based on the outcome
8	of that restaurant's inspections rather than the
9	outcome of administrative hearing as the bill would
10	require because our data show that the inspection
11	result is a far better predictor of food safety
12	practices than the results of a hearing. Moreover,
13	tying an inspection schedule to the adjudication
14	schedule as the bill would require would create
15	safety risks for diners. OATH, not the Health
16	Department controls the timing of the hearings on
17	restaurant tickets, juggling hearing calendars for
18	multiple agencies. Hearings after an initial
19	inspection are scheduled weeks later and owners are
20	granted an automatic delay upon request. Under this
21	bill, the Health Department would have to postpone a
22	restaurant's re-inspection until a hearing is held,
23	even if the initial inspection revealed very serious
24	Health Code violations. The department respects the
25	role of OATH and the need for due process which is

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why adjudications were built into our system from the 2 3 beginning. The current system provides for due 4 process while allowing the department to follow up 5 quickly on violations that pose a potential health and safety risk to New Yorkers. Intro 1571 would also 6 7 require the Health Department to make changes to the inspectional scoring system that were recommended for 8 9 review by the Advisory Board and rejected by the department. The Advisory Board had asked the 10 11 department to consider whether eight current 12 violations should be removed from the scoring system 13 so they would not be part of the letter grade and 14 that the requirement for one violation be relaxed. 15 Based on an analysis of our data and our review of 16 the FTA Model Code, the New York State Sanitary Code, and the scientific literature, the department agreed 17 18 with some of those suggestions, modified others, and 19 rejected still others. We provided our response to 20 the Advisory Board at its quarterly meeting this past 21 March and the board will have an opportunity to respond to our analysis. This conversation between 2.2 23 the department and the Advisory Board is ongoing and as intended, provides an opportunity for the board to 24 help guide the department in refining the inspection 25

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2 system, bypassing this process in this bill would 3 undermine the 2013 law that created the Advisory 4 Board. Based on our review of the science, we believe 5 that requiring the department to make the changes we have rejected would create risks for the dining 6 7 public. For example, the bill would require the department to remove from grading the requirement to 8 9 provide handwashing signs in customer bathrooms. Since its good hygiene practice for everyone to wash 10 11 hands after using the bathroom and restaurant 12 employees may use customer bathrooms we rejected this 13 recommendation. Similarly, we rejected a 14 recommendation that the requirement to main ... maintain 15 proper lighting in a food prep area be removed from 16 the graded inspection because we think it's hard to prep food safely if you cannot see the food you are 17 18 prepping. In both of these cases the requirements in 19 question are part of the New York State sanitary code 20 and the FDA Model Food Code and the vast majority of 21 the city's restaurants fully comply. Let me turn briefly to the other bills under consideration today. 2.2 23 Intro 1263, introduced by Council Member Dromm would require the Health Department to post to its website 24 results of the department's inspections of public and 25

2 private school cafeterias. The Health Department 3 supports more transparency for parents and studer 4 about cafeteria inspections which generally resul 5 fewer violations than restaurants. We are working 6 with the Department of Education to make inspection 7 results available on the DOE's school food web par 8 where we think parents are most likely to look for	nts
4 about cafeteria inspections which generally resul 5 fewer violations than restaurants. We are working 6 with the Department of Education to make inspecti 7 results available on the DOE's school food web part	nts
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7 results available on the DOE's school food web pa	9
	on
8 where we think parents are most likely to look for	age
	or
9 them. Intro 1456, introduced by Council Member	
10 Koslowitz would require the Health Department to	
11 assign letter grades to mobile food carts and tru	ucks.
12 This is an idea the department has contemplated i	n
13 the past and we agree that there should be more	
14 transparency about our mobile food vending	
15 inspections. We recommend that any local law char	nges
16 to mobile vending be discussed as part of the lar	rger
17 conversation that the council and the administrat	cion
18 are having about overall reform of the mobile ver	nding
19 industry. Finally, Intro 1103 introduced by Counc	cil
20 Member Barron would require restaurants to hang a	an
21 informational poster about the risks of excessive	9
22 sugar and other carbohydrate intake for diabetic	and
23 pre-diabetic individuals. We appreciate the inter	nt of
24 this bill to address this disease on a population	1
25 level by providing information to consumers and w	10

1 COMMITTEE ON HEALTH 23 2 agree that restaurants are an important place for 3 approaches to address public health including through 4 health warnings. For people living with diabetes and 5 pre-diabetes, diet is a key component of the individualized care plan. However, because there is 6 7 no one size fits all dietary recommendation for all 8 people with diabetes and pre-diabetes, crafting a 9 poster that provides sufficiently tailored information on a complex topic could present 10 11 challenges. We also note that experts recommend that 12 nutrition labels be simple and easy to understand 13 requiring no specific or sophisticated nutritional 14 knowledge, however the proposed signage may not 15 provide actionable information to consumers as it 16 does not link health messaging to specific menu 17 items. We look forward to discussing this bill 18 further. Thank you for the opportunity to testify, I 19 would be happy to take questions. 20 CHAIRPERSON JOHNSON: Thank you Deputy 21 Commissioner, I appreciate your testimony. I want to 2.2 start by establishing hopefully a few facts. When a 23 restaurant is inspected not all violations have an effect on its ultimate letter grade, is that correct? 24

1	COMMITTEE ON HEALTH 24
2	CORINNE SCHIFF: That's right, there are
3	food safety violations that are part of the grade and
4	then there are other items that we inspect for that
5	are not part of the grade.
6	CHAIRPERSON JOHNSON: So, the difference
7	as I understand it is that when violations relate to
8	the potential contamination of food they have an
9	impact on the letter grade whereas violations that
10	relate to other unrelated parts of the restaurant's
11	operations don't affect the letter grade, is that
12	correct?
13	CORINNE SCHIFF: The violations that are
14	part of the grade are violations that relate to food
15	safety and the other violations are violations that
16	are other, other conditions that the restaurant needs
17	to maintain.
18	CHAIRPERSON JOHNSON: So, I don't think
19	anyone on this council in the city would disagree on
20	whether unsanitary food handling should be rigorously
21	enforced and made known to the public, I support
22	that, we support that but as I understand it some of
23	the violations that impact the letter grade don't
24	meet that standard. For instance, isn't it currently
25	true that if there's a dented can on premises a
I	

1 COMMITTEE ON HEALTH 25 2 restaurant can accrue points potentially pushing it 3 past the threshold from an "A" to a "B" grade. 4 CORINNE SCHIFF: Before we launched 5 grading in 2010, we took a really hard look at all of the violations that would make up the grade and ... it's 6 7 actually part of the regulations so it was open to 8 notice and comment. The, the dented can was actually 9 one of the violations that we did change and the, the change that we made in that the can, can be on 10 11 premises but we want it to be separated from the 12 active food supply and that's because a dented can 13 poses a risk of botulism but we know that a 14 restaurant could get a delivery of a dented can and 15 it's on site, we don't cite for that. What we require 16 is for the restaurant to put that can aside, they may 17 want to ... they might want to return it to their 18 distributer as defective, that's, that's up to them 19 but what we care about is making sure that the active 20 supply of food contains food that's safe for 21 consumption and we know that when it ... when 2.2 restaurants are busy preparing for the next meal its 23 very busy and it would be very easy to grab that can, open it and that poses a risk. So, there is a risk 24

1	COMMITTEE ON HEALTH 26
2	of, of to food safety and that's how we modified
3	that, that rule.
4	CHAIRPERSON JOHNSON: So, if there's a
5	dented can that is not separated from the other cans
6	you would accrue points for that and that could
7	potentially affect your grade from being an going
8	from an "A" to a "B"?
9	CORINNE SCHIFF: If there's a dented can
10	[cross-talk]
11	CHAIRPERSON JOHNSON:that's mixed in
12	with other… [cross-talk]
13	CORINNE SCHIFF:the [cross-talk]
14	CHAIRPERSON JOHNSON:cans [cross-talk]
15	CORINNE SCHIFF:the, the, the
16	requirement is to put that can aside and not leave it
17	with the food supply.
18	CHAIRPERSON JOHNSON: And you can be
19	fined and that could affect your grade?
20	CORINNE SCHIFF: And we would accrue
21	pointes for that violation [cross-talk]
22	CHAIRPERSON JOHNSON: You would accrue
23	points, got it. And isn't it also true that when a
24	customer only bathroom does not have a self-closing
25	door then a restaurant letter's grade can be affected

1	COMMITTEE ON HEALTH 27
2	potentially pushing it past the threshold from an "A" $$
3	to a "B"?
4	CORINNE SCHIFF: The there are there
5	are rules that apply to bathrooms, obviously, I think
6	we would all agree hygiene after using the bathroom
7	is, is critically important to food safety. We apply
8	those rules to all bathrooms because employees may
9	use any bathroom in the restaurant even if the
10	restaurant intends that a bathroom be for customers,
11	an employee may use that bathroom and so it's
12	critically important to all of our safety that the
13	food worker maintains good hygiene especially after
14	using the bathroom.
15	CHAIRPERSON JOHNSON: But a self-closing
16	door is something that you can get a fine for which
17	could potentially push you from an "A" to a "B", is
18	that correct?
19	CORINNE SCHIFF: It is standard and FDA
20	Food Code and in the State Sanitary Code to have that
21	self-closing door because we want restaurant workers
22	to wash their hands and not touch the door.
23	CHAIRPERSON JOHNSON: So, the answer is
24	yes, you could be fined for that and that could push
25	you from an "A"… [cross-talk]

1	COMMITTEE ON HEALTH 28
2	CORINNE SCHIFF: That would be [cross-
3	talk]
4	CHAIRPERSON JOHNSON:to a "B" [cross-
5	talk]
6	CORINNE SCHIFF:a, a violation for
7	which points could accrue because it is a critical
8	food [cross-talk]
9	CHAIRPERSON JOHNSON:which could push
10	you… [cross-talk]
11	CORINNE SCHIFF:safety violation
12	[cross-talk]
13	CHAIRPERSON JOHNSON:from which could
14	push you from an "A" to a "B", okay. And isn't it
15	true that when a food protection certificate is not
16	held by a supervisor on the premises at the time of
17	the inspection it results in a whopping ten points
18	that can be deducted which would almost exclusively
19	account for a restaurant not earning an "A" grade?
20	CORINNE SCHIFF: The literature is, is
21	very strong on the point that having a supervisor on
22	site trained in food protection is really perhaps the
23	very best thing a restaurant can do to maintain good
24	practices. We've seen increased enrollment at our
25	health academy in response to letter grading and

1	COMMITTEE ON HEALTH 29
2	there's, there's a the, the food worker industry
3	that the employees in the city are much better
4	trained than they were before grading and that's a
5	really great thing and it frankly may be driving the
6	overall increases in "A's". What we tell restaurants
7	right from the beginning including in the permit
8	information packet that we give to restaurants is
9	that part of opening a restaurant is making sure that
10	you have a worker trained in food protection, that
11	you need to have that person on site from the get go
12	and we made that violation very serious because it is
13	so serious.
14	CHAIRPERSON JOHNSON: So, you can get ten
15	points deducted if there isn't someone on premises?
16	CORINNE SCHIFF: That's correct.
17	CHAIRPERSON JOHNSON: Which could very
18	easily push you to a "B"?
19	CORINNE SCHIFF: And you know what we're
20	really happy to say is that this is one of the
21	violations that we've seen dramatic improvements, is
22	it on there? You can see from our, our chart over
23	there in the year before grading we cited 12 percent
24	of restaurants for not having a trained supervisor on
25	site and that's down to seven percent which is a, a

1 COMMITTEE ON HEALTH 30 2 really ... a, a wonderful achievement for the 3 restaurants. 4 CHAIRPERSON JOHNSON: So, it seems to me 5 that there are a number of ways in which an establishment can fail to achieve an "A" grade even 6 7 if the restaurant meets what we consider to be reasonable standards for safe sanitary food 8 9 preparation and I want to tie that and with what I think is a larger point here. Restaurants are an... are 10 11 a notoriously difficult enterprise, a frequently cited study by Ohio State University found that 60 12 percent of restaurants do not survive in their first 13 14 year and 80 percent of restaurants do not make it 15 past five years add in the fact that when a 16 restaurant puts up a huge sign that says "B" or grade pending it has a very real, a very damaging effect on 17 the amount of business that that restaurant is able 18 19 to attract. Would you agree that the stakes are 20 pretty high for a restaurant to achieve an "A" 21 rating? 2.2 CORINNE SCHIFF: No, the, the system was 23 designed to create incentive based inspection schedule and a risk based inspection schedule to 24

motivate restaurants to perform at the top levels and

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to maintain excellent food safety practices and 2 3 that's to the benefit of the restaurants and to New 4 Yorkers. I agree, running a restaurant is, is 5 difficult and we think that they've been meeting the, the food safety inspection challenge remarkably well, 6 7 we are posting... 93 percent of restaurants are posting "A's" in the window, 68... 62 percent are getting "A's" 8 9 on that initial inspection. Our goal is that every restaurant in New York City have an "A" and we are 10 11 doing all kinds of outreach and, and education 12 targeted to that remaining small number of restaurants that still don't have an "A" in the 13 14 window.

15 CHAIRPERSON JOHNSON: So, the answer is 16 yes, I mean it's a pretty high stake for restaurants 17 to achieve an "A" and it seems that the food service 18 establishment advisory board does think that the 19 stakes are pretty high and it recently released recommendations that certain violations is too 20 onerous like the ones I mentioned earlier and you 21 referenced that report in your testimony. Now it's 2.2 23 safe to say that the food safety ... Food Service Establishment Advisory Board includes restaurants 24 owners but it also includes food safety experts, 25

1	COMMITTEE ON HEALTH 32
2	nutritionists, and even representatives of the Health
3	Department, that's correct right, those are the folks
4	that are on it? Yeah. And this advisory board was
5	commissioned explicitly for the purpose of evaluation
6	the sanitary inspection program and its effect on the
7	restaurant industry food safety and public health,
8	that's what it says, do you agree with that, that's
9	why it was established?
10	CORINNE SCHIFF: Were you reading from
11	the local law, is that what you're saying, is that
12	[cross-talk]
13	CHAIRPERSON JOHNSON: Yeah, that [cross-
14	talk]
15	CORINNE SCHIFF:you think that [cross-
16	talk]
17	CHAIRPERSON JOHNSON:I was just quoting
18	the local law, okay. So, to review the
19	recommendations the Advisory Board takes issue with
20	the following violations; points will be accrued for
21	permanent lighting not provided in food preparation
22	areas where washing areas and storage rooms, points
23	will be accrued if a restroom does not have toilet
24	paper, a waste receptacle, a self-closing door, and a
25	wash hands sign even if it's a customer only
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1	COMMITTEE ON HEALTH 33
2	bathroom. Points will be accrued if someone is eating
3	from an open container in a food storage or
4	dishwashing area. Ten points are accrued for not
5	having a food protection certificate. If a customer
6	uses a restroom without a self-closing door does that
7	pose a significant risk of contaminating the
8	restaurant's food, if a if a customer uses that,
9	that bathroom without a self-closing door is that
10	posing a significant risk for contaminating food?
11	CORINNE SCHIFF: The regulations speak
12	to, to the requirements for the people working in the
13	restaurant, we, we would encourage customers to
14	follow good bathroom hygiene practices but the
15	regulations are addressed to restaurant workers.
16	CHAIRPERSON JOHNSON: But what if it's a
17	customer only bathroom?
18	CORINNE SCHIFF: So, when we took a look
19	at this question which was presented to us by the
20	Advisory Board and we reviewed the food the FDA
21	Model Food Code, the State Sanitary Code, and our
22	and our data we concluded that we couldn't make the
23	distinction, that the Advisory Board was recommending
24	and that's because an employee may use a customer
25	only bathroom even if the restaurant intends that

1	COMMITTEE ON HEALTH 34
2	that bathroom primarily be used for customers and so
3	to stay in line with federal guidelines and state
4	guidelines we, we rejected that recommendation. We
5	think it's not in the best interest of, of the
6	restaurant to maintain high food safety standards and
7	therefore it's not in the best interest of the dining
8	public.
9	CHAIRPERSON JOHNSON: And if the lights
10	in the kitchen are not a high enough wattage as you
11	referenced in your testimony or they aren't part of a
12	quote, unquote "permanent fixture" as it says in the
13	code is that going to potentially infect the food
14	with salmonella, I mean I don't think so, I mean you
15	think it's of course it's important to have adequate
16	lighting to look at the food but the point I'm trying
17	to get at if an employee is taking a quick snack
18	break in a secluded area like a pantry are we really
19	concerned about the risk that he or she is posing to
20	the general public, I'm not. So, I'm not saying that
21	these concerns are unimportant but I will say is that
22	we need to take a the responsibility of evaluating
23	these restaurants very seriously, I agree with that.
24	The restaurant business is tough, the deck is already
25	stacked against these business owners and we need to

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do a better job of drawing the line between 2 3 violations that do cause potential contamination versus those that don't. I'll conclude by pointing 4 5 out that the food service establishment Advisory Board clearly feels this way as you said, this is a 6 body that includes food safety experts and it's one 7 that exists almost exclusively for the purpose of 8 9 evaluation food safety standards in New York City restaurants even if they take issue with the damage 10 11 that some of these violations can cause. I think it's 12 critical that our city do a better job at 13 incorporating these recommendations. So, the point 14 here is I, I'm trying to figure out how we can be a 15 little more sensible about this system and ensuring 16 that we are not being unfair when it comes to these 17 restaurant inspections, the establishment aboard... the 18 establishment advisory board made these 19 recommendations, you all rejected it, you talked 20 about that, can, can you talk a little bit ... and then 21 I'm going to go to my colleagues who have questions 2.2 but could you talk a little bit about the, the 23 adjudication system, so can you explain why it makes sense to waive fines for restaurants that receive an 24

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1	COMMITTEE ON HEALTH 36
2	adjudicated "A" but not put these restaurants on a
3	regular "A" inspection cycle?
4	CORINNE SCHIFF: Sure, what I can tell
5	you is what our data show and, and that is that the
6	inspection outcome is far more predictive of ongoing
7	top food safety practices than the hearing outcome
8	and so we… when we're designing the program we look
9	to the evidence and we design evidence based policies
10	in setting our risk based schedule.
11	CHAIRPERSON JOHNSON: Can you explain
12	why the department chooses to ignore the dismissal of
13	violations by a tribunal when setting the inspection
14	schedule for a restaurant, so tribunal says we
15	dismiss what the Health Department found, we're the
16	ones that adjudicate this, we don't believe that,
17	that it's real or that it was done properly and the
18	Health Department dismisses that when they set the
19	re-inspection cycle? How, how is that fair, that's
20	due process, it's their own course of due process in
21	this process?
22	CORINNE SCHIFF: So, when we designed our
23	incentive based schedule, inspection schedule and our
24	risk based schedule we've, we've looked at the data
25	and what the data tell us is that to protect New
1	COMMITTEE ON HEALTH 37
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2	Yorkers what we need to do is rely on our inspections
3	which are which are predictive of ongoing food
4	safety practices and not the hearings which are not
5	predictive of ongoing food safety practices and
6	that's why we've designed a system that [cross-talk]
7	CHAIRPERSON JOHNSON: But other city
8	agencies don't behave this way. The Department of
9	Consumer Affairs and other regulatory agencies in New
10	York City do not set a re-inspection cycle based off
11	of what they think is proper even when it comes to
12	the health, safety, and wellbeing of New Yorkers they
13	go by what OATH determines. The Health Department is
14	the only department in New York City that does this
15	where you don't adequately observe due process.
16	CORINNE SCHIFF: The, the due process
17	measures that are established at OATH do address the,
18	the fines for the restaurants on the on the initial
19	inspection but you're right, they don't inspect the
20	address the inspection schedule and that's our
21	concern about this bill is that it would prohibit the
22	department from conducting risk based and inspection
23	and
24	CHAIRPERSON JOHNSON: I see your General
25	Council gave you something. Hi Tom. Okay, shouldn't

1	COMMITTEE ON HEALTH 38
2	restaurants have the opportunity to contest alleged
3	violations from an initial inspection before being
4	subjected to re-inspection?
5	CORINNE SCHIFF: So, we, we, we think as,
6	as, as I've testified to that the incentive based
7	schedule and the risk based schedule that we have set
8	up has been extremely effective in motivating
9	restaurants to, to practice [cross-talk]
10	CHAIRPERSON JOHNSON: No more
11	improvements can be made, it's, it's great the way it
12	is?
13	CORINNE SCHIFF: We think there's more
14	improvement to be made. Ninety-three percent of
15	restaurants are posting "A's" and we're looking for
16	that final seven percent and what we're doing is
17	increasing our educational opportunities, promoting
18	our consultative inspections, offering the, the
19	spring series on practicing "A" grade food safety but
20	what, what our data show is that to protect New
21	Yorkers it's this schedule that is motivating
22	restaurants to do… to do well. Sixty-two percent of
23	restaurants now getting "A's" on the initial
24	inspection that's where we want to focus our
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1 COMMITTEE ON HEALTH 39 2 attention, we want all restaurants to be achieving 3 those high standards. 4 CHAIRPERSON JOHNSON: How many points do 5 you need to get an "A"? CORINNE SCHIFF: Zero to 13 points is an 6 7 "Α". CHAIRPERSON JOHNSON: Say that again? 8 9 CORINNE SCHIFF: Up to 14, zero to 13 points is an "A". 10 CHAIRPERSON JOHNSON: Zero to 13 is an 11 12 "A", what's a "B"? CORINNE SCHIFF: 14 to 27. 13 CHAIRPERSON JOHNSON: 14 to 27 is a "B", 14 15 what's a "C"? 16 CORINNE SCHIFF: 28 and above. 17 CHAIRPERSON JOHNSON: What's a "D"? CORINNE SCHIFF: There's no "D". 18 19 CHAIRPERSON JOHNSON: There's no "D", 20 okay... CORINNE SCHIFF: "A", "B", "C". 21 2.2 CHAIRPERSON JOHNSON: So, what year was 23 this restaurant inspection system created? CORINNE SCHIFF: We launched restaurant 24 grading in July 2010. 25

1	COMMITTEE ON HEALTH 40
2	CHAIRPERSON JOHNSON: 2010?
3	CORINNE SCHIFF: Yes.
4	CHAIRPERSON JOHNSON: Was it modeled off
5	the city of Los Angeles, is that what the Mayor at
6	the time said?
7	CORINNE SCHIFF: We did look to Los
8	Angeles to learn about how their system worked.
9	CHAIRPERSON JOHNSON: Did they have a
10	schedule where an "A" grade is below 13 and a "B"
11	grade is 13 to 27 and a "C" grade is 28 and above?
12	CORINNE SCHIFF: Los Angeles uses a
13	different point system, when [cross-talk]
14	CHAIRPERSON JOHNSON: Zero to 100?
15	CORINNE SCHIFF: They use zero to 100.
16	CHAIRPERSON JOHNSON: Which is what we
17	teach, teach elementary school students is how you
18	get an "A", "B", or "C" is zero to 100.
19	CORINNE SCHIFF: A one test scale is
20	certainly zero to 100. I, I will say that when we
21	were designing the program before 2010, we spent a
22	it was about an 18-month planning process, we did go
23	out to Los Angeles, we had our inspector do an
24	inspection side by side with an inspector from the
25	Los Angeles Health Department and the results were
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1	COMMITTEE ON HEALTH 41
2	essentially the same. So, while, while the point
3	scale that the two cities developed are different
4	both cities are following the same standard food
5	safety guidance from the FDA and the standard food
6	safety rules.
7	CHAIRPERSON JOHNSON: Do you think it's
8	easier for New Yorkers to understand a point schedule
9	that goes zero to 100 or a point scale that goes from
10	zero to 13, 13 to 27, and 28 and above, the average
11	New Yorker?
12	CORINNE SCHIFF: So, the, the, the
13	restaurant grading program was really designed to
14	develop a communications tool for New Yorkers so that
15	they don't need to understand the point system, if
16	they want to they can [cross-talk]
17	CHAIRPERSON JOHNSON: They don't need to
18	understand isn't that the whole point?
19	CORINNE SCHIFF: The point is that we
20	have summarized the results of our inspection into
21	something very easy to understand.
22	CHAIRPERSON JOHNSON: Most New Yorkers
23	when you walk down the street they have no idea what
24	getting an "A" means, they don't know.
25	

1	COMMITTEE ON HEALTH 42
2	CORINNE SCHIFF: I think that what we've
3	seen… [cross-talk]
4	CHAIRPERSON JOHNSON: We could do like a
5	Jay Leno like thing and stand in front of 50
6	restaurants and ask people how do you get an "A",
7	people won't know how you get an "A", people won't
8	know how you get a "B", people won't know how you get
9	a "C", they won't understand the process. If this is
10	about informing the public and having accountability
11	we should have a grading system that the public can
12	easily understand so that when people are making
13	informed decisions about which restaurants to go to
14	they understand. I'm going to end with this anecdote
15	and go to my colleagues. This is from, I'm not going
16	to say his name because I don't want to get him in
17	trouble but it's a real person who owns a series of
18	bars and restaurants in New York City. He says quote,
19	"we received a violation for a little bit of dust on
20	a restaurant exhaust fan which had nothing to do with
21	food safety, it ended up being the difference between
22	earning a "B" instead of an "A" letter grade. Another
23	time we received a violation for a cracked light
24	fixture in a liquor room that resulted in me wasting
25	a half a day in court instead of being at my small
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1	COMMITTEE ON HEALTH 43
2	businesses". He owns several bars and restaurants in
3	New York City and he's asking for relief when it
4	comes to the restaurant grading system. I want to go
5	to my colleagues, we're going to start with Council
6	Member Dromm followed by Council Member Koslowitz and
7	thank you to my colleagues for indulging me and going
8	on for a long time, thank you.
9	COUNCIL MEMBER DROMM: Thank you Mr.
10	Chair and I just have a few questions. One, I just
11	should the city run or city contracted food service
12	program be held to the same standard as privately run
13	restaurants?
14	CORINNE SCHIFF: Do you mean in, in the
15	schools, you're… [cross-talk]
16	COUNCIL MEMBER DROMM: Yeah, I mean
17	[cross-talk]
18	CORINNE SCHIFF:your bill is about the
19	[cross-talk]
20	COUNCIL MEMBER DROMM:you know the
21	city… [cross-talk]
22	CORINNE SCHIFF:and, and [cross-talk]
23	COUNCIL MEMBER DROMM:either runs them
24	or they prepare the food or they contract the service
25	out to get the food to the [cross-talk]

1	COMMITTEE ON HEALTH 44
2	CORINNE SCHIFF:and, and they and they
3	are. Our inspection of a food service establishment
4	is the same, the rules are the same and the
5	inspection is the same whether it's a food service
6	establishment that's a restaurant or a school
7	cafeteria.
8	COUNCIL MEMBER DROMM: So, when we hear
9	reports like we've heard recently on the news about
10	schools that are serving chicken with metal pieces in
11	it or pizza with mold on it what is the… what does
12	the Health Department do there to intervene?
13	CORINNE SCHIFF: So, the restaurant the,
14	the Health Department conducts routine inspections of
15	school cafeterias just as we conduct routine
16	inspections of restaurants, we report all of the
17	outcomes of those inspections to the Department of
18	Education, we meet with them regularly to review
19	those to see how they have changed, you know fixed
20	anything that was wrong and I'm and I'll say that
21	the, the Department of Education is extremely
22	responsive, they take those that feedback from us
23	very seriously and, and for the reasons that you've
24	put forth in, in your bill we support that, we
25	support more transparency.

1	COMMITTEE ON HEALTH 45
2	COUNCIL MEMBER DROMM: How often, you
3	know and a on an average do you inspect school
4	cafeterias?
5	CORINNE SCHIFF: So, schools are
6	inspected twice a year as a general matter and then
7	if… but if on an inspection, we see violations we
8	will do a compliance inspection so it depends on the
9	schools and, and what we're seeing on those
10	inspections.
11	COUNCIL MEMBER DROMM: Does that include
12	privately run schools?
13	CORINNE SCHIFF: Yes, we inspect
14	cafeterias… [cross-talk]
15	COUNCIL MEMBER DROMM: And charter
16	schools?
17	CORINNE SCHIFF: We… yes, we inspect all
18	school cafeterias.
19	COUNCIL MEMBER DROMM: So, when schools
20	contract out the lunch services to places like
21	FreshDirect or something like that, do you inspect
22	that, how does that work?
23	CORINNE SCHIFF: We inspect the, the food
24	service, it doesn't matter who's providing it.
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1	COMMITTEE ON HEALTH 46
2	COUNCIL MEMBER DROMM: You inspect on, on
3	the site?
4	CORINNE SCHIFF: Correct.
5	COUNCIL MEMBER DROMM: Okay. So, is there
6	currently any way to access these inspection results?
7	CORINNE SCHIFF: We support your bill to
8	promote transparency for that reason.
9	COUNCIL MEMBER DROMM: So, right now
10	there's nothing?
11	CORINNE SCHIFF: No, no [cross-talk]
12	COUNCIL MEMBER DROMM: No way [cross-
13	talk]
14	CORINNE SCHIFF:regular no regular
15	easy way for, for a parent to do that so we think
16	you've got… you've got a good idea.
17	COUNCIL MEMBER DROMM: Okay and is there
18	any reason that the public should not be able to
19	access, access these results?
20	CORINNE SCHIFF: No and we're working as
21	I mentioned in my testimony we're working closely
22	with the Department of Education to make this happen.
23	We think that their school food website is probably
24	the more appropriate place, that's where parents are
25	
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1 COMMITTEE ON HEALTH 47 2 going for that information and so we're working on 3 that. COUNCIL MEMBER DROMM: So... and I'm 4 5 appreciative of that fact that you're working with the DOE now but what about private schools and what 6 7 about charter schools? CORINNE SCHIFF: So, we would like to 8 9 talk with you about the best way ... the best way to do that but we ... you know bottom line is we support more 10 11 transparency. 12 COUNCIL MEMBER DROMM: Okay, good because 13 I don't want to leave them out as well, thank you. 14 Thank you Mr. Chair. 15 CHAIRPERSON JOHNSON: Do, do the bathrooms in cafeterias have to have self-closing 16 17 doors? CORINNE SCHIFF: The list of health code 18 19 requirements applies to all food service 20 establishments. CHAIRPERSON JOHNSON: So, cafeterias and 21 schools as well have to have self-closing doors, do 2.2 23 we check that? CORINNE SCHIFF: I... why don't I... why 24 don't I check because I think your question is 25

1	COMMITTEE ON HEALTH 48
2	probably going to which bathrooms so, so let me… let
3	me check to make sure I give you a full… a full
4	answer.
5	CHAIRPERSON JOHNSON: Because we're
6	talking about our kid's food so if we're having the
7	standard for the public we should have that same
8	standard for children.
9	CORINNE SCHIFF: The, the set of, of, of
10	food safety requirements under the health code
11	applies to all food service establishments including
12	in cafeterias but I want to get you a full answer to
13	that question so let me get back to you.
14	CHAIRPERSON JOHNSON: And we check on
15	dented cans as well in cafeterias and being separated
16	and if they're not separated we go… we, you know come
17	down hard on that cafeteria and that school?
18	CORINNE SCHIFF: You know as I said
19	dented cans pose a risk of botulism we certainly
20	don't want to expose school children to that and so
21	the rules to separate cans apply to school cafeterias
22	as well and we observe that violation it would be
23	something we would report to the Department of
24	Education and help them to modify their practice so
25	that they are removing those dented cans from the

1 COMMITTEE ON HEALTH 49 area where the supply is, is active and we don't want 2 3 that cafeteria food worker to grab that can. CHAIRPERSON JOHNSON: Council Member 4 5 Koslowitz. COUNCIL MEMBER KOSLOWITZ: Thank you. I 6 7 see in your testimony that on 1456 you want to connect this bill with other bills that are before... 8 9 on... before the council that haven't been heard yet, why is that? 10 CORINNE SCHIFF: We're... as I... as I noted 11 in my testimony we, we agree with you that there 12 13 could be more transparency of our mobile food vending 14 inspections but we know that the council and the 15 administration are in discussion about larger reform 16 package for the industry and we just suggest that 17 this be rolled up into that. 18 COUNCIL MEMBER KOSLOWITZ: I think this 19 is a health problem that has to be addressed now. We didn't attach the letter grading for restaurants to 20 any other bills, we voted on that bill alone and I 21 2.2 don't understand why we can't do that. 23 CORINNE SCHIFF: The, the, the bill addressing mobile food vending grading is one that 24 touches upon a variety of issues in the mobile food 25

1	COMMITTEE ON HEALTH 50
2	vending industry and so that this is our
3	recommendation that we talk about that as part of the
4	larger conversation.
5	COUNCIL MEMBER KOSLOWITZ: I don't buy
6	that, I don't buy that at all. I think it's a bill
7	that's long overdue, I know we graded the restaurants
8	in 2010, we've worked on food vendors… I myself have
9	worked on food vendors because I was the Chair of
10	Consumer Affairs for 11 years and then four more
11	years when I returned to the council so that's 15
12	years. I think this is long overdue and I don't think
13	it should be attached to any other bill. I've spoken
14	to food vendors, they love this bill because it will
15	increase business just like the "A", "B", and "C's"
16	do or don't for the restaurants. So, I don't see
17	where this should be connected to how many carts
18	more carts should be put on the street. This is a
19	health issue that should be addressed right now for
20	the businesses how often do you inspect these carts?
21	CORINNE SCHIFF: Like, like restaurants
22	the inspection schedule for the mobile food vending
23	is, is risk based so every mobile food vending unit
24	would be inspected would on a, a schedule to be
25	inspected at least once a year and if it does not

COMMITTEE ON HEALTH

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2 perform well... if, if there are significant food 3 safety violations there would be follow up 4 inspections. So, I, I understand your, your interest 5 in urgency and we, we would be happy to talk with you 6 about that.

7 COUNCIL MEMBER KOSLOWITZ: Okay, because I really don't want this bill to wait for any other 8 9 bills, it's, it's the health of the public and of the food cart industry and right now we have many food 10 11 carts. I know in my community which is Forest Hills and Rego Park, I have seen an influx of food carts 12 13 and I have questions about some of the carts are 14 there late at night. On Continental Avenue, there is 15 a cart there 24 hours a day. Now during the day, I understand where they can go to a bathroom but what 16 happens at night when all the other stores are 17 18 closed, how do they function and what happens. So, I 19 think this is very important, it has to be done now 20 not waiting for any other. I myself will speak to the administration. Are you aware that the New York State 21 2.2 has a bill that they have introduced, the same bill 23 and what happens if their bill goes before our bill, wouldn't that be a shame that since it's a city issue 24 that the state takes over? 25

1	COMMITTEE ON HEALTH 52
2	CORINNE SCHIFF: We do know that your
3	colleagues and the state have similar interests in
4	expanding transparency in the mobile food industry.
5	COUNCIL MEMBER KOSLOWITZ: Okay, I really
6	appreciate anything that we could do to get this bill
7	passed and I will speak to the Mayor's Office myself,
8	thank you.
9	CHAIRPERSON JOHNSON: I don't want my
10	bill which is seemingly the most contentious bill
11	here to hold up my colleague's bills. So, Council
12	Member Koslowitz I think that's a very good bill as
13	do Council Member's Barron and Dromm and I don't want
14	my bill which I know is the most contentious bill
15	we're talking about today to get in the way of being
16	able to have a rational conversation about my
17	colleague's good bills they've worked hard on. So,
18	you can separate my bill from the package and we can
19	talk about that separately after this hearing today
20	but I do… I don't want my bill to be used in a way to
21	hold up my colleague's bills and I want to go on the
22	record as saying that. Okay, I want to go to… Council
23	Member Koo is not here, we're going to go to Council
24	Member Barron then Council Member Vacca.
25	

1	COMMITTEE ON HEALTH 53
2	COUNCIL MEMBER BARRON: Thank you Mr.
3	Chair and I think that's very gracious of you to
4	offer to separate your bill out from the package, we
5	thank you for that. To the panel thank you for
6	coming, we're glad that you're here. My bill is 1103,
7	which talks about a poster so that the public can be
8	informed and know that carbs are an important factor
9	along with the obvious sugars when we talk about
10	people who are pre-diabetic and diabetic. Would you
11	say that most people living in the city know that
12	carbs turn to sugar?
13	KIM KESSLER: I couldn't answer that
14	question specifically but I would say that there in
15	general it would be difficult for most New Yorkers to
16	understand the complexity of how carbs appear in our
17	food and in fact that would be one of our concerns
18	about drafting a creating an effective poster that
19	could give information to people that was actionable
20	for them in the restaurant setting. While we
21	generally agree with the overall intent of the bill
22	and the importance of addressing diabetes.
23	COUNCIL MEMBER BARRON: Where would
24	where would people learn about the fact that carbs
25	eventually turn to sugar, when would that happen?

COMMITTEE ON HEALTH

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KIM KESSLER: Our overall nutrition 2 3 messaging, we've very committed to providing New Yorkers of information about a healthy diet and what 4 we emphasize is eating a well-balanced diet that is 5 high in fruits and vegetables, high ... making choices 6 7 that are high in fiber and limiting sugars overall particularly sugary drinks as well as sodium. So, our 8 9 messaging in general is eat more of what's healthy 10 and eat less of what's unhealthy and we think that 11 those messages are consistent with the kind of diet 12 that would-be health promoting for diabetics but at 13 the same time there's, there's no one specific diet 14 that's recommendable for all people with diabetes or 15 pre-diabetes. 16 COUNCIL MEMBER BARRON: Do you have a... do 17 you have or is there an agency, federal agency that 18 has established a range of the amount of sugars that 19 is considered healthy? 20 KIM KESSLER: The ... there is ... I... one, one 21 minute. 2.2 COUNCIL MEMBER BARRON: Thank you. 23 KIM KESSLER: The U.S. Dietary Guidelines recommend... [cross-talk] 24

25

1	COMMITTEE ON HEALTH 55
2	COUNCIL MEMBER BARRON: I'm sorry, start
3	again
4	KIM KESSLER: The USDA dietary guidelines
5	recommend that we have less than 10 percent of our
6	calories from added sugars.
7	COUNCIL MEMBER BARRON: Less than 10
8	percent from sugars?
9	KIM KESSLER: Added sugars.
10	COUNCIL MEMBER BARRON: Added sugars.
11	What about the sugars that are in foods existing in
12	foods that are not a part of this added sugar, don't
13	they all come together?
14	KIM KESSLER: Do you… do they contribute
15	to… I mean they contribute to caloric intake and we
16	want people to, to have a balanced diet so they don't
17	overconsume calories, many sugars can be in foods
18	that are also healthy for you for, for example fruits
19	and vegetables.
20	COUNCIL MEMBER BARRON: For example, I
21	didn't hear the end?
22	KIM KESSLER: Fruits and vegetables.
23	COUNCIL MEMBER BARRON: Fruits and
24	vegetables. So, are you differentiating,
25	differentiating between the simple sugars and the
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1 COMMITTEE ON HEALTH 56 2 complex sugars and the ... we know that they add 3 different nutritional value? KIM KESSLER: So, the government's 4 5 recommendation focus is on added sugars which the leading contributor in our diets of added sugars is 6 7 sugary drinks which contribute almost 50 percent of 8 the added sugars that Americans consume. We as a 9 department focus on the overconsumption of sugary beverages because it's such a contributor of added 10 11 sugars in our diets and that's what we're most 12 concerned about because it has no nutritive content 13 and, and when in sugary drinks doesn't give people 14 the sense of fullness that will help them modulate 15 their consumption. COUNCIL MEMBER BARRON: Can you just give 16 17 us a ... elementary school version of how carbs work in 18 the body and they turn to glucose and we know that 19 they get stored or not stored and then they get used 20 by insulin, can you just give us an elementary school lesson on that? 21 2.2 KIM KESSLER: What I would say generally 23 is that when you are a diabetic if you ... when you are consuming certain types of carbohydrates they're 24 going to convert to the, the ... when insulin will help 25

1	COMMITTEE ON HEALTH 57
2	them convert to glucose which makes energy is used
3	by energy and when you don't have sufficient insulin
4	or your body isn't using insulin efficiently then
5	that is where you add added sugars in your blood or
6	create, create more added sugars in your blood so
7	that is what's of concern for diabetics. What you're
8	asking about carbohydrates are actually they appear
9	in all a wide variety of foods and many healthy
10	foods as well as in unhealthy foods and part of what
11	the concern would be around creating a one simple
12	poster is that it would be difficult to create one
13	given the, the wide range of, variety of menu items
14	that exist in a restaurant environment to have a
15	poster that would give people actionable information.
16	What we know from evidence about, about warning
17	labels or labeling paradigms around food is that
18	they're most effective for consumers when they're
19	linked to one particular item so that they can for
20	example with the sodium warning label see that
21	particular item and make a choice about it whereas
22	more generalized information that isn't linked to a
23	specific item on the menu is more difficult for
24	people to take action on or is more likely to be,
25	that's what the evidence would lead us to think.

1	COMMITTEE ON HEALTH 58
2	COUNCIL MEMBER BARRON: I, I don't agree,
3	I differ with you on that, I think a generic kind of
4	notice to consumers beware, be mindful that as you're
5	looking at these items that if they're carbs they're
6	going to turn to sugar and, and of course we know
7	the other point we need to make sure is that people
8	understand the body needs the carbs, they need it for
9	the energy, they need it for brain functioning, they
10	need it to help regulate the insulin so we want to
11	make sure that we're not telling people they
12	shouldn't have carbohydrates because it does play an
13	important part in, in the diet in the diet that
14	we're talking people have healthy diets but I
15	disagree I think that if we talk generally about the
16	impact of excessive sugars in the diet that we can
17	then have people have their interest peaked as to
18	whether or not they should make the selection and you
19	do talk about, in your testimony you say you want
20	people to be informed, they want you want people to
21	make informed decisions based on easy to understand
22	information and I think that a poster that is generic
23	and not particularly talking about a particular food
24	item but generally understanding how the body works
25	and the impact of excessive added sugars would have a
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COMMITTEE ON HEALTH

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2 negative impact especially for people who are prediabetic and, and diabetic. I think if we talk about 3 4 informing our public as to the benefits of making informed decisions as they make their selections it 5 would be helpful. We know that the runners before the 6 7 big marathons are told pile up on the carbs so we 8 certainly want to have that balance of having people 9 understand that a balanced diet as you have said is important but we need to I think help people 10 11 understand that carbs turn to sugar; starches, pasta, 12 breads turn to sugar but I thank you and I'm, I'm 13 glad that you're looking to be able to work together 14 to see how we can make that a reality. Thank you Mr. 15 Chair. 16 CHAIRPERSON JOHNSON: Thank you very much 17 Council Member Barron, we're going to go to Council Member Vacca. 18 19 COUNCIL MEMBER VACCA: Thank you Mr. 20 Chair. I first would like to sign onto the 21 legislation sponsored by Council Member's Barron, 2.2 Dromm, and Karen Koslowitz and Corey your bill I have 23 to read a little more but... [cross-talk] 24

25

1	COMMITTEE ON HEALTH 60
2	CHAIRPERSON JOHNSON: Okay, thanks
3	Council Member we're going to go back to who's… once
4	we
5	COUNCIL MEMBER VACCA: I got to be honest
6	I have to study it… [cross-talk]
7	CHAIRPERSON JOHNSON: Put this Council
8	Member on the clock, no I'm just joking… [cross-talk]
9	COUNCIL MEMBER VACCA: See, right, right
10	away he starts in with me now but let me just say
11	this, I, I'm not happy with what we're doing or what
12	we're not doing regarding sugar consumption, it
13	doesn't seem we're doing much at all. I, I raised
14	this several months ago when the Health Department
15	came to another hearing at the Health Committee, you
16	do know that the use of sugar beverages is going up
17	in this city statistics have shown that it is rising
18	and I want your reaction to that, why is that
19	happening, are, are you aware of that and what are we
20	doing about it? At the last committee meeting I had
21	urged that we establish a task force to assess what
22	we should do and that we include the council and the
23	administration and health experts but the reality is
24	that we have to do something because people are
25	drinking more sugar beverages, that health variable
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1	COMMITTEE ON HEALTH 61
2	is going in the wrong direction in this city. So, can
3	you respond to that?
4	KIM KESSLER: Thank you for your
5	question, we certainly are very closely monitoring
6	the sugary drink data that we collect every year and
7	while the city has made tremendous progress overall
8	in reducing sugary drink consumption we have seen
9	that that progress has stagnated and so we, we very
10	much share your concern. We do continue to implement
11	a host of policies and, and in particular have
12	removed sugary drinks from environments that children
13	are in from our schools, from our daycares, and from
14	our day camps and we are also continuing with public
15	health messaging and nutrition education around that
16	so we do have nutrition education that reaches more
17	than 30,000 kids and adults a year through our
18	farmers market programs and our programs in early
19	child care centers and that includes messaging on
20	sugary drinks and also public health campaigns and we
21	have an upcoming campaign planned.
22	COUNCIL MEMBER VACCA: But I have to tell
23	you whatever you're doing is not working because last
24	year the number of adults or, or the percentage of
25	adults who consume one or more sugar sweetened

1	COMMITTEE ON HEALTH 62
2	beverages increased last year from 23.7 up from 22.5
3	the year before. So, what we're doing is not working,
4	it's not adequate and it's not working and that's why
5	several months ago I had asked that a task force be
6	established. I realize that several things need
7	Albany approval and I realize that there is great
8	opposition to other things and so on and so on. I can
9	only tell you that there was great opposition when
10	former Mayor Bloomberg imposed a smoking ban in the
11	bars but now we've all come to the conclusion that
12	that was the right thing to do. I think that Council
13	Member Barron touched on the diabetes aspect most
14	effectively, I want to talk to you about obesity
15	which in the Bronx is leading the state. We have a
16	major obesity issue in the… in the borough more than
17	any other borough in the city and more than any other
18	county in the state unfortunately. The Bronx is 62
19	out of 62 counties in the state when it comes to
20	being the unhealthiest and I refuse to accept that
21	continued distinction for my borough and sugar is a
22	main culprit and I offer you my help and, and my
23	cooperation but I'm, I'm not happy at this point that
24	we're doing enough. If there's legislation let's
25	consider it but I do at least say that we, we got to

1 COMMITTEE ON HEALTH 2 get our heads together because this escalating number 3 is unacceptable.

4 KIM KESSLER: We absolutely share your concern and appreciate hearing your great interest in 5 tackling this contributor to diet related disease and 6 7 are currently continuing as I said to press on this 8 issue, continue with the policies that we do have in 9 place as well as public awareness and we're happy to further consult with you about what other options we 10 11 can look at.

12 COUNCIL MEMBER VACCA: I, I think we need 13 a timetable, I think we need to know what and when, 14 I'll be a part of that discussion if that's helpful 15 but I think we need to know what and when, it just 16 can't be a general statement that we will continue to 17 have conversations and look into this and look into 18 that. We need a timetable, the number I, I just gave 19 is alarming in one year that so much consumption of 20 sugar laden beverages has gone up to that degree. Some of these cans of soda and ... what do they call 21 2.2 these things, energy drinks and all, you have to see 23 how much sugar is in one can, we're talking 27 to 53 grams of sugar in one can or one bottle, it is 24 alarming and, and some of the drinks go even beyond, 25

1	COMMITTEE ON HEALTH 64
2	beyond that into the 70… into the 70's when it comes
3	to grams of sugar. So, we're talking about people who
4	need us to come to a policy action plan. Thank you.
5	KIM KESSLER: Thank you.
6	CHAIRPERSON JOHNSON: Council Member
7	Vacca how often do you go to the gym?
8	COUNCIL MEMBER VACCA: No comment, I'm
9	not answering that. I exercise very a, a lot and I,
10	I, I have not had a can of regular soda… I cannot
11	remember having it and I do not urge anyone to have
12	it.
13	CHAIRPERSON JOHNSON: How old are you
14	Council Member Vacca?
15	COUNCIL MEMBER VACCA: What's that.
16	CHAIRPERSON JOHNSON: How old how old
17	are you?
18	COUNCIL MEMBER VACCA: How old am I, I'm
19	not answering that question.
20	CHAIRPERSON JOHNSON: You know when the
21	weather gets warmer and the sun's out Jimmy's guns
22	are out because he is… he, he goes to the gym a lot.
23	Okay, we're going to get back to some questions
24	quickly. Are either one of you attorneys?
25	CORINNE SCHIFF: Yes.

1	COMMITTEE ON HEALTH 65
2	CHAIRPERSON JOHNSON: Yes?
3	CORINNE SCHIFF: Yes.
4	CHAIRPERSON JOHNSON: Yes, okay great.
5	So, I want to get skip back to the due process issue
6	just quickly. So, you said that you're basing it off
7	data that you have, the reason why you don't want to
8	go by what the tribunal has said, what OATH has said
9	on the re-inspection cycle is because of your own
10	data, is that correct, the New York State Sanitary
11	Code and the FDA Model, is that correct?
12	CORINNE SCHIFF: That's right the data
13	supports our returning to the restaurants based on
14	our observations and not based on the outcome of the
15	hearing.
16	CHAIRPERSON JOHNSON: Okay. So, if the
17	FDNY was here today sorry, if the NYPD was here
18	today and the NYPD said to us, you know we have data
19	that when people do certain things instead of going
20	to a judge we're just going to make our own decision
21	based on the data, all of us would be outraged, we
22	would say due process matters, having your day in
23	court matters, being able to rebut the claims against
24	you matter, and you should have due process, you all
25	are saying we're going to take due process away

1	COMMITTEE ON HEALTH 66
2	because we have data, how is that fair, I just don't
3	understand how that how that's fair? This is like
4	fun… put Health Department inspections aside, the
5	larger issue of due process and fairness in America
6	is a bigger issue here and this is the one part of
7	one city agency that does not allow due process, I
8	don't understand how that's fair and Tom if you want
9	to come up and talk about this you can but I don't
10	understand how this is defensible, we don't allow
11	other city agencies to do this, we don't allow the
12	NYPD to do it This is Tom Merrill [cross-talk]
13	CORINNE SCHIFF: Hi [cross-talk]
14	CHAIRPERSON JOHNSON: Tom you're going to
15	tell us the truth today?
16	TOM MERRILL: Promise to tell you the
17	truth.
18	CHAIRPERSON JOHNSON: Okay, got it so go
19	ahead.
20	TOM MERRILL: Okay. So, I want to correct
21	something you said earlier in terms of re-inspections
22	and we're talking about re-inspections, DOB and other
23	agencies when it's a health and safety violation
24	we'll re-inspect even if, if the violations thrown
25	out the, the tribunal. I agree with you in terms of a
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COMMITTEE ON HEALTH grade that if, if ... you know if, if we're going to make a restaurant post a, a ... you know we can only make them post a grade that corresponds to violations that have been sustained at the tribunal. The systems designed for that, the systems actually designed to even give restaurants a second bite at the apple to earn a higher grade. I don't agree with you that due process demands that we in terms of balancing the rights of the public, the safety to the rights of, of health ... you know and then ... and scheduling the ... a

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11 12 subsequent inspection that due process demands that 13 we ... that we change our inspection schedules because 14 of a, a violation which may have been thrown out for 15 a non-substantive grounds at the tribunal that that 16 dictates that we cannot go back and make a risk based 17 determination on, on scheduling based on, on, on that 18 first inspection.

19 CHAIRPERSON JOHNSON: But a self-closing 20 door is not putting someone at risk, if you guys had 21 a more sane point system that the public understood then I would agree in some ways on, on this but, but 2.2 23 right now the system is all over the place.

TOM MERRILL: I think we're going to have 24 25 to disagree on that as well. I think ... [cross-talk]

1	COMMITTEE ON HEALTH 68
2	CHAIRPERSON JOHNSON: A self-closing
3	door… [cross-talk]
4	TOM MERRILL: The, the problem [cross-
5	talk]
6	CHAIRPERSON JOHNSON:door is, is, is
7	posing a risk to the public?
8	TOM MERRILL: The public understands that
9	"A", "B", and "C" measures to the, the, the overall
10	performance that that restaurants inspection [cross-
11	talk]
12	CHAIRPERSON JOHNSON: But let's not
13	[cross-talk]
14	TOM MERRILL:and [cross-talk]
15	CHAIRPERSON JOHNSON:talk about "A",
16	"B", and "C" conceptually what goes into an "A", "B",
17	and "C" [cross-talk]
18	TOM MERRILL:I think [cross-talk]
19	CHAIRPERSON JOHNSON:a self-closing
20	door… [cross-talk]
21	TOM MERRILL:I think that most members
22	of the public would also want their the people who
23	work at their restaurants to, to not to, to, to be
24	using a bathroom that has a self-closing door, okay,
25	I think they'd be worried about that violation.
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1	COMMITTEE ON HEALTH 69
2	CORINNE SCHIFF: I mean I, I do want to
3	highlight that the, the task before the advisory
4	board was to take a look at all of the violations and
5	determine which ones they thought were not connected
6	to food safety and, and this violation isn't one that
7	they suggested that we take a look at and that was
8	right because the, the food and drug administration
9	model food code includes this and this and, and does
10	the state sanitary code. So, when we look across the
11	violations that we use as part of the grade they are
12	connected to food safety.
13	CHAIRPERSON JOHNSON: I don't think it's
14	fair, I think it needs to be reformed and I think
15	that we should have would, would you guys be open to
16	changing the, the, the grading point system so that
17	it goes zero to 100 instead of zero to 13, 14 to 27,
18	28 and above, would you be open to that?
19	CORINNE SCHIFF: We, we think that the
20	system we have with this… with this point scale
21	allows us to do a very accurate inspection and
22	provide really good detailed information to the
23	restaurant and that's why it's designed this way. No,
24	our, our goals in the program are to main to promote
25	high food safety standards to protect New Yorkers, to

2 promote transparency and to promote fairness for 3 restaurants. So, we're happy to talk with you about, 4 about... [cross-talk]

5 CHAIRPERSON JOHNSON: The restaurants are going to come today and say that they don't think 6 you're doing that, you're going to hear from many 7 8 restaurants. So, your goals are not in line what the ... 9 what the industry's going to say and let's walk out on the street one afternoon and ask a New Yorker that 10 11 has lived here since 2010 if they understand the 12 point system. If it's about transparency the public 13 should understand it, the public doesn't understand 14 the system because the system... the grading system 15 doesn't make sense. If you go to LA and you say to 16 someone how do you get an "A" they would probably say 17 oh you have to get between 90 and 100, you come to 18 New York and you say to someone on the street how do 19 you get an "A" how many people are going to say you 20 have to have zero to 13 points, how many people do 21 you think will know that, many? 2.2 CORINNE SCHIFF: The reason that we

created the, the grade card was to create an intuitive symbol to communicate the outcomes of the inspections and, and what we saw very soon after we

1	COMMITTEE ON HEALTH 71
2	launched is that New Yorkers got it, they understand
3	"A", "B", "C" and they, they decide where to eat
4	based on that grade, they take that [cross-talk]
5	CHAIRPERSON JOHNSON: What do we base
6	how do we know New Yorkers get it, how do we know New
7	Yorkers understand the, the grading system?
8	CORINNE SCHIFF: What we know is that New
9	Yorkers understand "A", "B", "C" and that… [cross-
10	talk]
11	CHAIRPERSON JOHNSON:but we don't
12	under… we, we, we don't know if they understand what
13	that how you get an "A", "B", or "C"; what's being
14	what's being looked at to get an "A", "B", or "C".
15	CORINNE SCHIFF: New Yorkers that are
16	interested in knowing that can go on our website,
17	they can see exactly what we found at that
18	inspection, they can read our fact sheet on how we
19	grade and score. We don't restaurants New Yorkers to
20	know that what we want them to know is "A", "B", "C"
21	and they can use that information if they want to
22	make decisions about where to eat and we know that
23	that's been extremely effective in motivating
24	restaurants to adopt high food safety standards and
25	

1	COMMITTEE ON HEALTH 72
2	that's why 93 percent of restaurants today are
3	posting "A's" in their windows.
4	CHAIRPERSON JOHNSON: Council Member
5	Barron has some more questions.
6	COUNCIL MEMBER BARRON: Thank you just a
7	few more questions. I do want to acknowledge that the
8	idea from this bill came from my staffer, my
9	legislative director Indigo Washington and she was
10	very much concerned about it because of her family's
11	connections with diabetes and pre-diabetes and, and
12	in your in your testimony well how does how does
13	your department inform the public about what kind of
14	education programs do you have, I heard you mention
15	day cares but what other education formats do you
16	have for the public to become aware and informed?
17	KIM KESSLER: We use both our media
18	campaigns to promote healthy diets. We've had media
19	campaigns around eating fruits and vegetables and
20	eating them as a snack on the go as well as campaigns
21	around over consumption of sodium and salt as well as
22	campaigns on sugary drinks and again are have
23	would will continue to do that so that's one form
24	of, of mass education, mass public education around
25	these issues and then in terms of nutrition education
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1	COMMITTEE ON HEALTH 73
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2	we do provide that both at farmers markets, many
3	farmers markets throughout the city, through our
4	stellar farmers markets programs and then we have a
5	program that works in early child care centers
6	throughout the city and we reach about 30,000 New
7	Yorkers a year through those two nutrition education
8	programs.
9	COUNCIL MEMBER BARRON: What how much of
10	the budget is allocated to the campaigns to educate
11	the public, what percentage?
12	KIM KESSLER: I don't actually have that
13	information with me today but I can tell you that we
14	continue to be very committed to that in all of our,
15	our broader efforts around primary prevention of
16	reducing diet related disease is something that's
17	represented in a whole host of programs and
18	approaches that the department foresees.
19	COUNCIL MEMBER BARRON: So, the media
20	campaign that you run is though where, where's your
21	message broadcast or published?
22	KIM KESSLER: Television, digital,
23	subways, bus shelters, a, a whole variety of ways of
24	reaching New Yorkers.
25	

1	COMMITTEE ON HEALTH 74
2	COUNCIL MEMBER BARRON: Are there
3	pamphlets that you also prepare for distribution and
4	where are they sent or how [cross-talk]
5	KIM KESSLER: We do, we also… we have a
6	whole variety of public health materials and
7	education materials including a healthy eating and
8	active living guide that provides information on a
9	healthy diet and how you can get exercise. We put out
10	health bulletins on topics related to this including
11	on diabetes and those are available if people can
12	call 311 and order them and we, we work with partners
13	to disseminate them as well.
14	COUNCIL MEMBER BARRON: Thank you and
15	finally I heard you say one of my colleagues asked a
16	question and in your response, you cited, I think it
17	was Council Member Vacca, you said well we monitor
18	how the increase is being reflected and there's a
19	commercial, I don't know I don't want to give cite
20	give reference to the producer of the commercial but
21	it says there's an activity going on and the woman
22	says do something, he says oh we're a monitoring
23	agency, we don't take action, we don't do anything so
24	we certainly don't want to limit the Department of
25	Health to just saying that they monitor, we do want
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1	COMMITTEE ON HEALTH 75
2	to support you as you find those measures to take
3	action and we look forward to doing that because we
4	need to make sure the people understand that the high
5	fructose corn syrup is added sugar, you know and
6	there are other added sugars that are being combined
7	with the sugars that are inherent in, in the foods
8	that we're already eating. So, we look forward to
9	working with you in that regard.
10	KIM KESSLER: Thank you Council Member
11	[cross-talk]
12	COUNCIL MEMBER BARRON: Thank you
13	[cross-talk]
14	KIM KESSLER: I think I was responding
15	to his question about our awareness of the changes in
16	data and I wanted to make sure that he understood of
17	course we do carefully track this information and we
18	want to monitor and track that data so that we can
19	use it to inform our… [cross-talk]
20	COUNCIL MEMBER BARRON: Certainly, right
21	[cross-talk]
22	KIM KESSLER:actions but we [cross-
23	talk]
24	COUNCIL MEMBER BARRON:and, and we
25	[cross-talk]
I	I

1 COMMITTEE ON HEALTH 76 2 KIM KESSLER: ...agree very... [cross-talk] 3 COUNCIL MEMBER BARRON: ...we do need the data... [cross-talk] 4 5 KIM KESSLER: ...committed to action ... [cross-talk] 6 7 COUNCIL MEMBER BARRON: ...to be able to take the action that needs to be taken because 8 9 Brooklyn is the ... is the epicenter, it's the highest ... the highest location of people with diabetes in the 10 11 nation. So, it's really an, an, an issue that we really need to take action on. Thank you so much. 12 13 CHAIRPERSON JOHNSON: Thank you Council 14 Member Barron, Council Member Koslowitz wants to say 15 something. COUNCIL MEMBER KOSLOWITZ: I would like 16 17 to go on the bills that we're discussing today; 1103, 1203, 1263, 1456, and 1571. 18 19 CHAIRPERSON JOHNSON: Council Member 20 Koslowitz I like you more than Council Member Vacca 21 so thank you for, for being here today. We're going to keep pushing these bills, we can have 2.2 23 conversations about it but I'm not giving up, I don't think it's fair, I don't think that it makes sense 24 fully, we disagree and we're going to continue to 25

1	COMMITTEE ON HEALTH 77
2	probably disagree but maybe we can come to some type
3	of agreement on how to move forward because I'm going
4	to keep pushing this, it's important to me, I would
5	ask for one thing Deputy Commissioner, Assistant
6	Commissioner I see other leadership from the Health
7	Department here we're going to call up a member of
8	the food, food service establishment board, Advisory
9	Council to testify, the Council's Appointee, I would
10	be grateful if you would stay for his testimony and
11	listen to his testimony before you leave today that
12	would be really I would really appreciate that. So,
13	will you all agree to stay for his testimony? Yes,
14	great, thank you very much for testifying. Okay
15	[cross-talk]
16	CORINNE SCHIFF: Thank you [cross-talk]
17	CHAIRPERSON JOHNSON:we're going to
18	call up Robert Bookman from Pesetsky and Bookman who
19	is the Council's Appointee to the Food Service
20	Establishment Advisory Board, we're going to call him
21	up by himself and then we're going to get to the
22	other panels after this. So, Mr. Bookman I don't… I
23	don't typically swear the public in but since I
24	called you up in your capacity in some ways as a
25	

1	COMMITTEE ON HEALTH 78
2	member of the Food Safety Establishment Advisory
3	Council I would like to swear you in… [cross-talk]
4	ROBERT BOOKMAN: Absolutely [cross-talk]
5	CHAIRPERSON JOHNSON:since you're the
6	Council's Appointee are you okay with that?
7	ROBERT BOOKMAN: Absolutely.
8	CHAIRPERSON JOHNSON: Okay. So, do you
9	affirm to tell the truth, the whole truth and nothing
10	but the truth and answer honestly to council member
11	questions?
12	ROBERT BOOKMAN: I do.
13	CHAIRPERSON JOHNSON: Okay, you may begin
14	your testimony.
15	ROBERT BOOKMAN: So, thank you very much.
16	Yeah, my name is Robert Bookman, I am a practicing
17	attorney for 30 some odd years ever since I left city
18	government, I am also Council to the New York City
19	Hospitality Alliance and I am privileged and honored
20	to be one of the council's Appointees to the Food
21	Advisory Board which came as a result of a series of
22	reforms pushed by the council with quite frankly the
23	Bloomberg Administration kicking and screaming for
24	some of them after a major oversight hearing that
25	this committee had back in 2012 resulting in

1	COMMITTEE ON HEALTH 79
2	legislation in 2013 concerning the letter grade
3	system which was newer then and I before I get into
4	my comments, there's a lot to discuss, you a lot of
5	good points were raised today, I, I want to
6	compliment Deputy Commissioner Schiff and her staff,
7	worked very closely with them on the Food Service
8	Advisory Board, they are the consummate
9	professionals, I think the city is… and I've known
10	Tom for many years, their council, I think the city
11	is lucky to have such people who could probably
12	frankly make a lot more money working in the private
13	sector than they do. I have no question about their
14	motive which is a safe and healthy New York and our
15	industry and I certainly share that but we do have
16	some fundamental differences about approach, about
17	what due process means, and about what's fair and
18	what the proper balance should be with the business
19	community.
20	CHAIRPERSON JOHNSON: Can you say all
21	that can you say that again?
22	ROBERT BOOKMAN: No, once is enough
23	[cross-talk]
24	CHAIRPERSON JOHNSON: Okay, got it once
25	is enough. I'm going to hold you to that, I'm going

1	COMMITTEE ON HEALTH 80
2	to remind you when you call me screaming about them
3	remember what you said about Deputy Commissioner
4	Schiff and the… [cross-talk]
5	ROBERT BOOKMAN: Uh-huh [cross-talk]
6	CHAIRPERSON JOHNSON:General Council,
7	okay keep going Mr. Bookman.
8	ROBERT BOOKMAN: Okay, so a little
9	background first, you know these reforms like I said
10	you know we started in 2013 a variety of inform
11	reforms, some of those reforms had to do with
12	lowering fines and the fines as you heard today have
13	gone down dramatically but what, what I want you to
14	think about as I make my comments and respond to your
15	questions is what I think are three overriding simple
16	questions that should be in all of your minds. One,
17	why should an ALJ decide the grade on a re-inspection
18	but an ALJ should not decide a grade on an initial
19	inspection… [cross-talk]
20	CHAIRPERSON JOHNSON: An Administrative
21	Law Judge.
22	ROBERT BOOKMAN: Correct, that's question
23	number one. Question number two is why are fines
24	still double what they were before letter grades even
25	with these reductions when we have 93 percent of

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restaurants having an "A", something's not correct 2 3 there. How is it that fines are still twice the ... 4 twice what they were when the Health Department says before letter grades restaurants weren't taking all 5 this stuff seriously now more than nine out of ten 6 7 are taking it seriously but we're fining them double what they were before ... in, in those bad old days, 8 9 that's question number two. And question number three is, is there anything being proposed specifically in 10 11 your bill today Mr. Chairman which would jeopardize 12 food safety. So, those are the three overriding 13 issues here it seems to me. In my mind, there have 14 been certain ... certainly there's been improvements by 15 the Health Department in outreach and education since 16 these reforms, we've discussed those extensively and I compliment them for them and there are more things 17 18 on the way. They're using technology better, they're 19 trying to reach out to restaurants better and give 20 them more data but they're still problems. If, if the 21 Sergeant of Arms could take the ... what I'm handing up to you now is some excellent data given to, to us by 2.2 23 the Health Department which is a history of the top violations cited by the Health Departments and what 24 you'll see unfortunately is that there are ten 25

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violations out of the dozens and dozens and dozens 2 3 that they inspect for that account for almost two 4 thirds of all violations issued by the Health Department and, and about 25 percent of those are 5 minor violations, things like plumbing not properly 6 7 installed that do go toward your letter grade. So, this is some institutional problems here that either 8 9 education is not reaching sufficiently the industry when the same violations year after year after year 10 11 are the top ten and they account for two thirds of 12 all violations and they ... many of them ... the top two 13 are in the old system before there was points when 14 there was just critical and non-critical, the top two 15 violations issued year after year are what I consider minor violations yet they still impact your letter 16 17 grade. So, what you said earlier Mr. Chairman do New 18 Yorkers and more importantly do the 60 million 19 tourists that come to New York who see grades on 20 windows who are a significant portion of our city's economy do they understand, I don't think so. I think 21 what most people believe is that an "A" is a safe 2.2 23 place to eat, a "B" is a somewhat place to eat but not... and a "C" is not a safe place to eat. Well 24 that's not the reality, that's not the system that 25

1	COMMITTEE ON HEALTH 83
2	they design but even today they fell into their own
3	trap by basically implying that "B" and "C"
4	restaurants are not safe and that your bill would
5	prevent them from going back to restaurants that are
6	not safe and re-inspecting and that's not true.
7	Unsafe restaurants there's another term for them,
8	closed restaurants [cross-talk]
9	CHAIRPERSON JOHNSON: They, they get
10	[cross-talk]
11	ROBERT BOOKMAN:the Health Department
12	[cross-talk]
13	CHAIRPERSON JOHNSON:shut down.
14	ROBERT BOOKMAN: They get shut down, the
15	Health Department has that authority, no one is
16	saying they shouldn't, our industry is the first one
17	to, to be at the at the at the forefront that
18	unsafe places should be shut down and they do shut
19	them down, "B's" and "C's" are safe places to eat
20	otherwise they wouldn't be open. So, consumers are
21	confused, tourists are certainly confused and what
22	they do think those letters mean to a certain extent
23	or a large extent is that those grades only reflect
24	cleanliness and food safety and we know that that's
25	not the case that there are many, many violations
I	I

1	COMMITTEE ON HEALTH 84
2	that are included in your letter grade that do not
3	have any direct relationship to cleanliness or food
4	safety. So, you created an advisory board, it wasn't…
5	the administration, the prior administration didn't
6	create an advisory board, the Health Department
7	didn't request an advisory board with due respect to
8	the excellent Health Department people here, you
9	folks insisted on it and we've met and we came up
10	with recommendations and there were a lot fewer by
11	the way since a majority of the members, let's be
12	honest, a majority of the members were appointed by
13	the administration, a lot fewer recommendations than
14	the industry representatives or the council
15	representatives recommended. I have a list here
16	highlighted in yellow of many more that we discussed
17	that we couldn't get a unanimous vote on and we
18	wanted to work unanimously. So, what we recommended
19	to the Health Department was a very, very slim group
20	of what we thought very clear cut types of
21	recommendations for violations that would stay
22	violations by the way, nobody was saying take it out
23	of the health code, if you, you found guilty of it
24	you would be fined for it, nobody was saying, you
25	know you shouldn't be fined for it although that's

1	COMMITTEE ON HEALTH 85
2	another issue to discuss simply that they should have
3	no points or fewer points, you brought up one about
4	the, the supervisor not being present during an
5	unannounced inspection
6	CHAIRPERSON JOHNSON: The food protection
7	certificate… [cross-talk]
8	ROBERT BOOKMAN:the food protection
9	[cross-talk]
10	CHAIRPERSON JOHNSON:holder [cross-
11	talk]
12	ROBERT BOOKMAN:holder, right during
13	unannounced inspection. So and after six months of
14	de-consideration they came back and didn't even agree
15	with majority of the small group of recommendations
16	that we made and that was extremely disappointing to
17	me and other members of the food protection advisory
18	board that you created.
19	CHAIRPERSON JOHNSON: Was that were
20	those recommendations unanimously adopted?
21	ROBERT BOOKMAN: Unanimously.
22	CHAIRPERSON JOHNSON: Unanimously, every
23	member?
24	ROBERT BOOKMAN: Even their appointees.
25	

1	COMMITTEE ON HEALTH 86
2	CHAIRPERSON JOHNSON: Even their
3	appointees agreed?
4	ROBERT BOOKMAN: That's correct and it
5	[cross-talk]
6	CHAIRPERSON JOHNSON: Keep going keep
7	going, thank you… [cross-talk]
8	ROBERT BOOKMAN: And it was low hanging
9	fruit quite frankly, it was easy stuff. So, yours for
10	example, the one that you suggested you the one
11	that you raised. The truth to the matter is a lot of
12	restaurants are mom and pops, they don't have tons of
13	staff and its often mom or pop who holds the food
14	handler certificate and may not be in the restaurant
15	when the inspector shows up, it is after all an
16	unannounced inspection, they may not even show up
17	when there's any food prep going on or food service
18	going on. They may be at… in the Bronx buying fruits
19	and vegetables, they may be running to the bank, you
20	know they may be sitting at a hearing from some
21	agencies because they didn't have a sign posted, you
22	know more often than not. So, there's lots of
23	reasons, it doesn't mean that and this is where form
24	comes over substance with a lot of these things here,
25	it doesn't mean that they're observing anything
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that's not proper because if they were they'd give 2 3 violations for that. So, for them to say the data 4 shows, they're very data driven when it supports 5 their position, data shows that having those trained people there reduce violations and that may be true 6 7 in the... in the macro but in the micro they're there, are you seeing any food handling, food prep 8 9 violations if you are giving them a violation for it and they get points for it, there's ... the list is 10 11 endless, there's a hundred and some odd items here and if they're not then why bang somebody ten points 12 which is almost a "B" already because the person is 13 14 simply not there. Same thing with the ... and that's 15 what we felt in the advisory board, real stuff. 16 CHAIRPERSON JOHNSON: Unanimously supported... [cross-talk] 17 18 ROBERT BOOKMAN: Real stuff, a sign which 19 by the way you notice when they don't produce data, 20 where's the data that a sign reminding employees to wash their hands actually increases employees washing 21 their hands. Now maybe, maybe ... you know certainly 2.2 23 where is the data that says that a sign in an... in a customer only bathroom saying employees must wash 24 their hands increased the number of employees who 25

1	COMMITTEE ON HEALTH 88
2	wash their hands when they go to the employee
3	bathroom that has the sign. We try to take some
4	common-sense things like that and make reforms and we
5	were very disappointed with the response and this is
6	your advisory board and these were reports to you,
7	annual reports to you. So, we think it's very
8	appropriate that the council take the recommendations
9	and I don't even think you went as far as the
10	advisory board did and adopt it legislatively. Now
11	let's move onto a few other issues.
12	CHAIRPERSON JOHNSON: So, just to be
13	clear the… [cross-talk]
14	ROBERT BOOKMAN: Sure… [cross-talk]
15	CHAIRPERSON JOHNSON:things that we're
16	proposing in my bill this legislation are things that
17	this advisory board unanimously asked that the Health
18	Department do on their own?
19	ROBERT BOOKMAN: That's true on all on,
20	on all the point section of your bill, right.
21	CHAIRPERSON JOHNSON: Thank you.
22	ROBERT BOOKMAN: The due process was
23	another issue… the due process issue… the other part
24	of your bill I'll get to it now. We, we had a
25	committee meeting on that issue, it, it didn't get to

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2 the full advisory board yet on the issue of due 3 process, it was an issue that was raised at the first 4 meeting, it was put off for well over a year until we got to some of these other things that we thought we 5 could both agree on, didn't ... we didn't know it would 6 7 take six months for them to get back to us and I know 8 there was some personnel change, I don't blame any of 9 the people sitting here, I think Deputy Commissioner Schiff is... was honest in trying to get us answers to 10 11 that but ... and then we did have one committee meeting 12 on this due process issue that I was the only member 13 of the committee that actually showed up for the 14 hear ... you know for that committee meeting, a couple 15 other people were on the phone and it was clear as a result of that committee meeting just as they 16 testified to you today that they're satisfied with 17 18 their due process system and had no intention of 19 changing it so we didn't need to waste another year 20 to make a recommendation that they were not going to 21 go along with and I appreciate their honesty in saying today no we don't agree with it. So, you... it's 2.2 23 not dishonoring the advisory board, it's honoring the advisory board not to have us waste a year to come up 24 with a recommendation that after six months' 25

1	COMMITTEE ON HEALTH 90
2	consideration is not going to be approved anyway. We
3	do not believe that that proposal in your bill
4	undermines the incentive system that they created at
5	all, you're not suggesting a change in the process
6	that they have where people who are adjudicated
7	having a "B" or a "C" get a re-inspection, they still
8	have that incentive to get that "A", that's not going
9	to change. The only thing that's going to change is
10	there will be thousands fewer restaurants
11	unnecessarily getting a re-inspection than the
12	current system which endures to everyone's benefit
13	including their limited resources, they don't even
14	have all their inspector lines filled it's so hard to
15	get qualified people at what the city government pays
16	for a very important job but the… all your bill would
17	do if adopted by law would reduce by thousands the
18	number of places that need to get a re-inspection
19	because in reality they are "A" restaurants and they
20	and I say in reality they are "A" restaurants because
21	that's what a judge as you point out determines after
22	a due process hearing just like that same judge
23	determines after a hearing on the re-inspection. So,
24	we're not saying nor are they saying that the judges

25 are not qualified to make that determination or an

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2 inspector's accusation trumps a judge, they concede 3 that it's a judge who has the final determination 4 except under an initial inspection but the data that 5 they gave us at the advisory board what that ... that was and this is really informing, I think it was 2015 6 7 data, that 2,000 establishments, 2,000 establishments who were accused of 14 or more points on initial 8 9 inspection decided to go to the hearing and won, a lot more I'm sure went to the hearing and lost but 10 11 2,000 won meaning they had enough points dismissed by 12 a judge that they wound up with 13 or fewer points but they did not get their "A" because of this 13 14 current system. There is nobody; Councilman Barron, 15 Councilman Koslowitz, Council, Council person ... 16 Council people, Mr. Chairman there's nobody in our personal lives would accept such a system where 17 18 you're accused by some government official, a police 19 officer or somebody else of violating the law and 20 it's the accuser that determines your guilt or 21 innocence, nobody would accept that in our personal 2.2 lives, how can we accept that here? And what's worse 23 is that there are an unknown thousands of others who didn't even bother to go to that hearing because the 24 only thing that hearing could determine is a fine, 25

1	COMMITTEE ON HEALTH 92
2	they can't determine your grade. So, thousands of
3	others accepted the fine offer that the Health
4	Department gave them and didn't even bother to go to
5	a hearing, who knows first of all how many millions
6	of dollars they collect therefore from those people
7	and maybe that's an answer to one of those questions
8	about why fines are still higher even though people
9	93 percent of the restaurants get "A's" is because
10	they're collecting unknown millions of dollars from
11	people who on the initial inspections who are accused
12	of 14 or more points who didn't even bother to go to
13	the hearing they'd rather just pay a fine and wait
14	for the re-inspection than to spend a half a day down
15	there just to maybe reduce marginally, you know a
16	fine or whatever but as professor I, I think it was
17	Professor Ho was his name who was here at your
18	oversight hearing and it was in our, our outfit in
19	Cranes today, Daniel Ho who did a study in 2012 with
20	NYU Stanford and Yale, minor organizations and he
21	determined that there lack of due process, the way
22	they handle it is a major waste of their limited
23	resources and it is misplacing resources from
24	restaurants that are in fact safe to… rather than
25	focusing on restaurants which are not safe.

2 CHAIRPERSON JOHNSON: Mr. Brookman can 3 you respond to the General Council's comment about 4 the Department of Buildings will not change their re-5 inspection schedule if they determine something... they 6 determine something to be dangerous?

7 ROBERT BOOKMAN: I'm not a building department expert but my understanding is it's no 8 9 different than what they will still have the right to do here should your bill be passed and that is if 10 11 there's a clear safety problem, an imminent safety 12 problem that they believe exists at a location then 13 no hearing schedule or re-inspection schedule is 14 going to stop a government agency; Fire Department, 15 Building Department, Health Department from coming 16 back to a place shorter than some regularly scheduled 17 re-inspection to deal with that and of course they 18 should and we're hard ... we're not suggesting 19 otherwise, what we're suggesting here though is in 20 the regular letter grade which is different from an... 21 you know a... you know they have the right to go into a restaurant anytime they believe that there's a safety 2.2 23 problem whether it be from a 311 call or any other reason and this does not stop that. What we're saying 24 here though is you accuse me of 15 points I want my 25

1	COMMITTEE ON HEALTH 94
2	day in court and on a letter grade I'm choosing not
3	to have a re-inspection until such time as it's
4	determined by a court of law whether in fact I have
5	an "A" or not, it's pretty simple, pretty basic it
6	seems to me. So, to get to those three questions that
7	I posed at the beginning clearly there should be no
8	I think we've addressed the issue that an ALJ should
9	decide what your whether the accusation is accurate
10	or not even for an initial one and that endures to
11	the benefits of thousands of small business owners
12	and, and despite their disagreeing I think it endures
13	to the benefit of the Health Department's limited
14	resources as well. I think we started to suggest why
15	fines have gone up and let me raise one other reason
16	that you sort of touched on is the point system was
17	not the system that always existed, prior to the
18	point system the Health Department first of all, New
19	York City never had a reputation for being Tomean
20	capital of the world quite the opposite, people…
21	we've had the reputation since I've been born for
22	sure of being the food capital of the world, nobody
23	was dropping dead in New York City streets prior to
24	the letter grades, you know from getting sick in
25	restaurants maybe in some street food vendors which

1	COMMITTEE ON HEALTH 95
2	is… the last time I got sick from food by the way
3	and but not from not from restaurants. We've always
4	had an excellent reputation for safety and quality of
5	food in our city's restaurants. So, it's a little
6	offensive when the Health Department takes… says the
7	letter takes credit through the letter grade system
8	for saying, you know how we're all so safe now and we
9	weren't before. I think Mayor Giuliani was certainly
10	not known as a guy who's easy on, on the business
11	community and yet, yet fines were much lower when
12	they had more inspectors under his administration
13	than they became later on with Mayor Bloomberg and
14	why because they created this very confusing point
15	system rather than the prior system of critical and
16	non-critical, safe, serious minor depending… you can
17	call it much a bunch of different things and if you
18	had a bunch of minor stuff you corrected it, if you
19	had a bunch of serious stuff they would come back
20	real fast or they'd shut you down. They created this
21	convoluted point system where there's approximately
22	1200 possible points that's when fines started to go
23	up by the way and they started to go up dramatically.
24	When they decided to do letter grades rather than
25	adopt the LA common sense system of one to 100; 90 is
I	

1	COMMITTEE ON HEALTH 96
2	an "A", 80 is a "B", 70 is a "C", something that
3	makes sense for everybody and the way that LA who
4	does inspect for the same things that they inspect
5	like, like Deputy Commissioner said the way they fit
6	that into 100-point system is the overwhelmingly
7	majority of the minor things carry no points or they
8	carry minor points or they group it into categories.
9	So, if you have one dented can or five dented cans
10	it's still one violation as opposed to here five
11	dented cans could give you a, a "C" [cross-talk]
12	CHAIRPERSON JOHNSON: That doesn't make
13	any sense.
14	ROBERT BOOKMAN: Of course it doesn't
15	make any sense, it's another form of over substance,
16	it's not that they observe the dented can being used
17	it's that they found the dented can that's not
18	segregated, well the reality is [cross-talk]
19	CHAIRPERSON JOHNSON: Great, I, I
20	[cross-talk]
21	ROBERT BOOKMAN:a lot of mom and pop
22	restaurants… [cross-talk]
23	CHAIRPERSON JOHNSON:I, I [cross-talk]
24	ROBERT BOOKMAN:get a big delivery,
25	everything goes up on the shelf and when the worker
	l

1	COMMITTEE ON HEALTH 97
2	goes to grab that can if it's dented he then
3	segregates it but if they're looking in 42 cans and
4	they find two that are dented it's because we didn't
5	get to those cans yet.
6	CHAIRPERSON JOHNSON: But I didn't
7	realize that if one dented can is one violation, six
8	dented cans [cross-talk]
9	ROBERT BOOKMAN: You can go… [cross-talk]
10	CHAIRPERSON JOHNSON:is six violations
11	[cross-talk]
12	ROBERT BOOKMAN:I think it's up to five
13	points on dented cans depending on how many dented
14	cans, I think the maximum is five points, I don't I,
15	I could look, what is [cross-talk]
16	CHAIRPERSON JOHNSON: No, it's okay but,
17	but… [cross-talk]
18	ROBERT BOOKMAN:I had it in front of
19	me… [cross-talk]
20	CHAIRPERSON JOHNSON:it's on [cross-
21	talk]
22	ROBERT BOOKMAN:if you want [cross-
23	talk]
24	
25	
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1	COMMITTEE ON HEALTH 98
2	CHAIRPERSON JOHNSON:but you but you
3	can get a… you can get points for each dented can up
4	to certain… [cross-talk]
5	ROBERT BOOKMAN:well [cross-talk]
6	CHAIRPERSON JOHNSON:amount [cross-
7	talk]
8	ROBERT BOOKMAN: To a certain amount,
9	yes, what is that… [cross-talk]
10	CHAIRPERSON JOHNSON: That doesn't make
11	any sense
12	ROBERT BOOKMAN: 13 I forget which one
13	it is, it's one of the highlighted… [cross-talk]
14	CHAIRPERSON JOHNSON: That doesn't make
15	any sense, okay keep going… [cross-talk]
16	ROBERT BOOKMAN:I think it's up it, it
17	could be one, two, or I think up to five points on
18	dented cans. So… but… when they came up with the
19	letter grade rather than doing the LA scoring system
20	they kind of Jerry rigged their new point system onto
21	the letter… the letter grade system or Jerry rigged
22	the letter grade system onto the point system and
23	that's why we have this very convoluted type of, you
24	know number of points that equals an "A" or "B" or a
25	"C" because they already had started this point

1	COMMITTEE ON HEALTH 99
2	system and it… the truth of the matter is a "C" you…
3	I believe we did the math, you've passed 92 percent
4	you really have a 92 if you… you know if you get 28,
5	30 points out of the 1,200 possible points that's a
6	92 percent that you actually got so it clearly
7	doesn't make any it, it doesn't make any sense. And
8	the third overarching question is anything being
9	proposed which would jeopardize food safety, we don't
10	think so. The Advisory Board didn't think so and your
11	legislation we don't think so because again it's not
12	changing the incentive, people still want to get an
13	"A" so if on that initial inspection they are
14	adjudicated a "B" or they're adjudicated excuse me,
15	14 or 15 points their rules still allow that person
16	for a re-inspection or as Tom said the second bite
17	out of the apple we, we certainly always we think
18	that's a good idea incentivizes people who do need to
19	do better to do better, you're not changing that,
20	they'll still be incentivized for that to do better
21	when they do get their re-inspection and we don't see
22	therefore why it would hurt the system at all, it
23	simply would reduce the number of places that need to
24	get re-inspection not the incentive for people that
25	do need to be re-inspected to do better. So, I think

1	COMMITTEE ON HEALTH 100
2	that's… you know unless you have other questions
3	that's… [cross-talk]
4	CHAIRPERSON JOHNSON: Yeah, I, I have a
5	couple questions and then and then I want to move on
6	to the other folks that are here to… [cross-talk]
7	ROBERT BOOKMAN: Sure… [cross-talk]
8	CHAIRPERSON JOHNSON:testify today
9	because they are small business owners and I want
10	them to be able to get back to their… [cross-talk]
11	ROBERT BOOKMAN: Right… [cross-talk]
12	CHAIRPERSON JOHNSON:business because
13	they might be holding the food protection certificate
14	and I don't want them to get ten points if they're
15	not there at their restaurant. Okay, so we're going
16	to I want to ask you; do you believe that the Health
17	Department is giving the food service establishment
18	advisory board all the information that it needs to
19	conduct its work?
20	ROBERT BOOKMAN: Yes, they're very good
21	in giving information.
22	CHAIRPERSON JOHNSON: Do you believe that
23	the Advisory Board is operating well?
24	ROBERT BOOKMAN: No.
25	
I	

1	COMMITTEE ON HEALTH 101
2	CHAIRPERSON JOHNSON: What, what could be
3	done better?
4	ROBERT BOOKMAN: Well this is look there
5	are 20 some… 20 members appointed to the Advisory
6	Board, the truth of the matter is the last few
7	meetings I don't think we've had more than seven or
8	eight people show up. So, it's clearly not deemed a
9	valuable use of time by the overwhelming majority of
10	the members of the committee. I think that the
11	[cross-talk]
12	CHAIRPERSON JOHNSON: If some of those
13	members are council appointees we will replace them.
14	ROBERT BOOKMAN: Some are.
15	CHAIRPERSON JOHNSON: So, we should
16	replace them if they're not showing up.
17	ROBERT BOOKMAN: People aren't showing
18	up, I have my own reasons, you know I'd be happy to
19	discuss them with you but I, I think it could be more
20	effective than, than it has been.
21	CHAIRPERSON JOHNSON: And how do the
22	meetings tend to function regardless of who's there?
23	ROBERT BOOKMAN: Well it started off this
24	way and it and it never changed, it wasn't what I
25	envisioned let's put it that way. I, I, I may be a

1	COMMITTEE ON HEALTH 102
2	minority here, you know and I often am and it's okay,
3	I've, I've, I've… I envision the Advisory Board when
4	we discussed the legislation that it would be these
5	people, we would decide we would decide when we
6	meet, we would set our agenda and when we needed help
7	from the Health Department we'd ask for it and then
8	we would come up with recommendations to the council,
9	it's kind of not the way it works.
10	CHAIRPERSON JOHNSON: How does it work?
11	ROBERT BOOKMAN: The Health Department
12	decides when we meet, they set the agenda, there are
13	more people from the Health Department there every
14	meeting than there are members of the committee. I
15	think some members of the committee who stopped
16	coming found it difficult to speak honestly about
17	some issues with the entire Health Department there
18	however, you know the time that… you know the time
19	that they do… they haven't prohibited us from putting
20	items on the agenda, I don't want to say that, but
21	when we come there's an agenda and the agenda is, is
22	generally driven the majority of the time is driven
23	not on the statutory requirements that you asked us
24	to but on valuable information that they want to
25	impart to us and you know and I think that's helpful

1	COMMITTEE ON HEALTH 103
2	and it's valuable and, and I've learned from it and
3	we posted stuff on our website on things that they've
4	asked and they asked for good feedback but it's more
5	like it's their Advisory Board to get feedback on
6	ideas that they have [cross-talk]
7	CHAIRPERSON JOHNSON: Well that wasn't
8	the point of creating [cross-talk]
9	ROBERT BOOKMAN:which is which is a
10	good thing to have… [cross-talk]
11	CHAIRPERSON JOHNSON:but that wasn't
12	[cross-talk]
13	ROBERT BOOKMAN:rather than [cross-
14	talk]
15	CHAIRPERSON JOHNSON:that wasn't why
16	the legislation was created [cross-talk]
17	ROBERT BOOKMAN:rather than our
18	advisory to the council on making changes to the law
19	so… that's just my personal opinion.
20	CHAIRPERSON JOHNSON: Okay [cross-talk]
21	ROBERT BOOKMAN:I don't know if a
22	majority of the members agree with me but it's hard
23	to say because a majority of the members don't show
24	up anymore.
25	

1	COMMITTEE ON HEALTH 104
2	CHAIRPERSON JOHNSON: Before Council
3	Member Koslowitz leaves do you support the… does the
4	industry support the, the letter grading for food
5	carts?
6	ROBERT BOOKMAN: I'm going to let Mr.
7	Rigie testify to that I believe the answer is yes.
8	CHAIRPERSON JOHNSON: Okay and then are
9	there any changes to the inspection program that you
10	think should be made beyond those in my bill,
11	Introduction 1571?
12	ROBERT BOOKMAN: We believe that the
13	council passed legislation at in the last few
14	months last year of the last administration
15	requiring six agencies that deal with small
16	businesses; Consumer Affairs, buildings, I think
17	fire, sanitation, health and I forget the other one
18	to come up with a list of rules and regulations that
19	they enforce where there could be a on a first-time
20	violation of a non-serious matter no fine but an
21	opportunity to cure. About the Bloomberg
22	Administration was not happy with that legislation as
23	you might recall and the report that was given to the
24	council one month before you know before the that
25	administration, that council ended only had a very

1	COMMITTEE ON HEALTH 105
2	low hanging fruit sign violations. Now there were
3	sign violations that amounted to millions literally,
4	millions of dollars a year that businesses were
5	getting but one of those six agencies and only one
6	even removed themselves from that process and came
7	back with zero, I'll give you one guess who that
8	agency was
9	CHAIRPERSON JOHNSON: The Health
10	Department.
11	ROBERT BOOKMAN: Correct. So, the answer
12	to your question is we believe, hand is up, we
13	believe that there are many, many violations that are
14	in the health code and I've highlighted them in
15	yellow here for you for your future consideration
16	where the inspection process would work better from
17	our perspective if these were changed to an
18	opportunity to cure for at least a first-time
19	offender. The Fire Department does that and they're
20	the Fire Department with non-serious violations, they
21	give you 30 days and you submit an affidavit showing
22	proof of compliance and you don't get a fine, it
23	seems to me that the Health Department with some of
24	these types of things that we've highlighted could
25	surely give you an opportunity for a no fine and an
I	

1	COMMITTEE ON HEALTH 106
2	opportunity to cure and I think that would help the
3	inspection process and I think that would help reduce
4	fines even further back to where they were one year
5	into the Bloomberg Administration where it was 12
6	million dollars a year in fines. I think if 93
7	percent of the restaurants are doing great now, I
8	think fines should certainly be at or lower where
9	they were which was 12 million dollars a year not 22,
10	23 million dollars a year.
11	CHAIRPERSON JOHNSON: Thank you Mr.
12	Bookman for your testimony.
13	ROBERT BOOKMAN: Thank you… [cross-talk]
14	CHAIRPERSON JOHNSON: I mean I I'm I
15	don't want this to be a back and forth but I also… if
16	the Health Department wants to respond you're allowed
17	to because I don't want you to… you can if you'd
18	like…
19	CORINNE SCHIFF: [off-mic] No.
20	CHAIRPERSON JOHNSON: No, okay. Thank you
21	Mr. Bookman.
22	ROBERT BOOKMAN: Thank you.
23	CHAIRPERSON JOHNSON: Okay, we're going
24	to call up the next panel. Andrew Rigie from the New
25	York City Hospitality Alliance, Ken Dugan from the

1	COMMITTEE ON HEALTH 107
2	Restaurant Association and Mathew Shapiro from the
3	Street Vendor Project. We don't have many panels so
4	if the Health Department would stay to hear that
5	would be really, really helpful. Mr. Rigie if you
6	want to begin and then we'll go down the line, just
7	make sure your mic is on. We're not going to put
8	people on the clock just because we don't have a lot
9	of people to testify today. Go ahead.
10	ANDREW RIGIE: Thank you. Mr. Chair,
11	Council Members thank you. My name is Andrew Rigie, I
12	am the Executive Director of the New York City
13	Hospitality Alliance, we are a trade association that
14	represents thousands of restaurants throughout the
15	five boroughs that are regulated by the New York City
16	Department of Health. First I want to say, you know
17	it's important that this is a cooperative
18	relationship between the restaurant industry and the
19	Health Department. It is in the best interest of
20	every single restaurateur to serve safe and sanitary
21	food. The last thing anybody wants to do is get one
22	of their customers sick, it's not good for business,
23	it's not good for their employees, it's not good for
24	anyone. So, we are on the same team but there are
25	certainly ways as we've seen over the years to be
I	

1	COMMITTEE ON HEALTH 108
2	able to reform the letter grade system to reduce
3	fines, to work together collectively on education
4	training that ensures greater compliance and today
5	this package of bills is exactly that, sensible
6	reforms that can be implemented to reduce regulatory
7	burdens, reduce fines while ensuring high food safety
8	standards. I will certainly echo some of my
9	colleague, Mr. Bookman's comments and touch on a few
10	of the additional bills being heard today. First, the
11	Alliance supports Introduction 1571 that will reform
12	the letter grade inspection system. This legislation
13	will provide due process to restaurants by ensuring
14	that it's a judge's ruling that takes precedent over
15	inspector's accusations from the initial inspection.
16	This will also provide consistency to the system
17	because it'll apply the same due process standard to
18	the initial inspection that the Department of Health
19	already uses on their re-inspection. If this
20	consistent standard had been applied back in 2014,
21	2,000 restaurants would have been awarded an "A"
22	grade on their initial inspection. This would have
23	spared them and the city the time, the expense of
24	going and challenging the re-inspection thus as we
25	discussed earlier allowing the Department of Health
1	COMMITTEE ON HEALTH 109
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2	to focus greater resources on going back and re-
3	inspecting those restaurants that may have sanitary
4	issues or pose a greater risk to public health. It is
5	important to go back to those risks that are
6	highlighted back in a New York Times article titled
7	"The Restaurant Grade System is Broken." As was
8	spoken before the author, Daniel Ho collaborated with
9	researchers at New York Law, or NYU, Stanford, and
10	Yale school. They analyzed hundreds of thousands of
11	inspections of restaurants throughout the whole
12	entire country and Mr. Ho when he testified in this
13	chamber said but a second and perhaps more
14	disconcerting flaw of the inspection system goes
15	beyond whether the grades themselves offer useful
16	information. Grading appears to shift inspection
17	resources away from the worst offenders, unquote.
18	Again, that's troubling, what's also troubling is
19	that those 2,000 restaurants that should have been
20	awarded an "A" grade on their initial inspection as a
21	result of a judication is artificially low because so
22	many of those restaurants don't go waste the whole
23	day at a tribunal to go and have their inspection
24	adjudicated because the letter grade doesn't depend
25	on it so they pay the fines which goes and feeds the

1	COMMITTEE ON HEALTH 110
2	30 some odd million dollars a year the Health
3	Department is levying in fines and they wait for the
4	re-inspection to determine what their letter grade is
5	going to be. So, we support the reforms to the
6	process, we also support the reforms to the point
7	violations whether it's modifying the points or
8	eliminating the points so that they better reflect
9	risk and food safety matters. We also do believe
10	there are many more violations that accrue points and
11	fines in the code that should be added to that list
12	but there's no doubt that those included in this bill
13	are a very, very good start. So, that's a major
14	priority for so many people in the industry, we will
15	go on and we will also support Introduction 1456
16	which would require mobile vendors post, post letter
17	grades. While we certainly have many concerns with
18	the letter grade system we do at the same time
19	believe while there is a letter grade system that all
20	food service businesses are regulated under the same
21	standards and held to the same requirements. So, we
22	do support that. Finally, bill 1103 seeks to
23	certainly address a very, very important health
24	issue, diabetes and pre-diabetes and so many of our
25	members now have a focus on health, wellness, and

1	COMMITTEE ON HEALTH 111
2	want to offer their guests and their customers
3	information so they can make educated decisions but
4	we also believe as to some of the points the
5	department made, it's a very complex issue and it's a
6	challenge to be able to provide that complexity to a
7	customer just on a sign and this is a subset, an
8	important subset but it is a subset of the
9	population. So, while we do not support this
10	legislation we do support working with the council,
11	the council member and the Department on other ways
12	to address this and focusing what we would believe is
13	resources on other approaches. So, all in all we want
14	to thank the council and the Chairman for this
15	hearing, we hope to work collaboratively with the
16	department on this issue. Again, no restaurant wants
17	to get their customers sick, restaurants are doing an
18	incredibly, incredibly amazing job ensuring high food
19	safety standards and it should be a torch and it… we
20	should really show everyone how safe our restaurants
21	are and we shouldn't have a system that unnecessarily
22	can embarrass and burden them with letter grades and
23	issues them fined. We need money in the pocket of
24	business owners and in the pockets of those workers
25	so thank you.

2

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4 KEVIN DUGAN: Good afternoon everybody. 5 My name is Kevin Dugan and I'm the Regional Director for the New York State Restaurant Association, we're 6 7 a trade group here in the state of New York representing food and restaurant locations throughout 8 9 the... throughout the state. The Association is the largest hospitality trade association in the state 10 11 and has advocated on behalf of its members for more 12 than 80 years. Our members represent one of the 13 largest constituencies regulated by the city as 14 nearly every agency regulates restaurants in one way 15 or another. Restaurants employ hundreds of thousands of New Yorkers and are a backbone of the tourism 16 17 trade here in New York City. To ensure the continued 18 viability of the restaurant and hospitality industry, 19 New York City must have sensible and reasonable 20 regulations that protect consumers and the 21 restaurants that serve them. I'm here today to voice the industry's support for Intro's 1571 and 1456. I'd 2.2 23 like to applaud Chairman Johnson who ... seems he has left for the moment and Councilwoman Koslowitz for 24 their ... for bringing forth these important pieces of 25

1	COMMITTEE ON HEALTH 113
2	legislation. First, we'll touch on 15 I'll briefly
3	touch on 1571 as much of what I'm going to say is
4	I've… has been touched on already. Letter grading in
5	many ways represents the largest concerns for owners
6	and operators here in the city. Restaurants face
7	enormous penalties for seemingly, seemingly noxious
8	violations that seem to be completely subjective and
9	changes depending on and changes depending on which
10	inspector they receive on a given day. This continues
11	to be a major problem. Restaurateurs are spending
12	hours away from operating their business to pour over
13	these regulations to ensure that their establishments
14	will make the grade. However often times this
15	preparation is not enough and eateries are dinged
16	with minor infractions most of the time these
17	violations having nothing to do with food safety as
18	we've discussed at length earlier today and owners
19	are faced with a very real possibility of receiving a
20	"B" grade which can cause… have a dramatic effect on
21	business and a traumatic effect on a business's
22	ability to operate and cost them thousands and may
23	even in some extreme cases force them to, to close.
24	It is simply not fair for a restaurant that receives
25	a "B" grade for issues non-related to food safety and

1	COMMITTEE ON HEALTH 114
2	this piece of legislation helps that issue immensely.
3	Intro 1571 also codifies a small number of
4	infractions that will go on the record as a violation
5	but again will not count against your letter grade
6	that effects food safety, again an issue that we
7	touched on before. The other thing that this
8	legislation does is allow restaurants who receive an
9	"A" grade after adjudication to be re-inspected on
10	the A re-inspection cycle rather than the more
11	frequent B cycle. As you might imagine restaurant
12	inspections can be sometimes quite invasive and it
13	costs restaurants the ability to operate and operate
14	at full strength. We believe that restaurants that
15	receive the "A" grade whether on their first
16	inspection or rather through adjudication should be
17	evaluated on the yearly cycle rather than the more
18	frequently B cycle. And again, we applaud the
19	Council's notice that this, this, this does need to
20	change. Like I mentioned before there's a significant
21	difference between these two different timelines
22	mainly on when you undergo your inspections.
23	Inspection days are often the most stressful and
24	volatile days the restaurateur will experience. Not
25	only do you do they have somebody coming into their

1	COMMITTEE ON HEALTH 115
2	space and looking over their entire operation but
3	often times these establishments will have to shut
4	down their entire restaurant losing valuable dollars
5	in the process. Restaurants who receive an "A" grade
6	on their first inspection will not face re-inspection
7	for at least one year and we encourage that
8	restaurants who again will be adjudicated to receive
9	such an "A" grade would, would go on this, this
10	cycle. The restaurant industry in New York is one of
11	the most highly regulated industries in the entire
12	city and letter grading has taken these regulations
13	to unprecedented levels. To their credit the industry
14	in New York has adapted and as this past year saw
15	more "A" grades than ever before but this is not to
16	say that the process is any less invasive or punitive
17	than it was before. We are seeing for the first time
18	in years' restaurant closings are beginning to
19	outpace restaurant openings here in the five boroughs
20	and that's a concern an obvious concern for the
21	restaurant industry as a the health of the
22	restaurant industry as a whole here in New York. we
23	as a whole as an entire city need to do more to help
24	restaurants find success and this legislation takes a
25	common sense and fair handed approach to doing just

1	COMMITTEE ON HEALTH 116
2	that. So, we fully support all aspects of, of Bill
3	1571. I will also briefly just touch on, on 1456,
4	letter grading for food carts. The restaurant
5	association supports this legislation as again as,
6	as much like my, my compatriot Andrew mentioned
7	before not necessarily because we are, are fans of
8	letter grading but it would bring a fairness to the
9	entire landscape and we think that all, all
10	restaurants that are, are all whether they be mobile
11	or brick and mortar restaurants that are looking to
12	serve the public kind of abide by the same rules when
13	it comes to health inspections and the like. So, I
14	thank the council for its time and thank you very
15	much.
16	MATHEW SHAPIRO: Good afternoon council
17	members and staff. My name is Mathew Shapiro and I'm
18	a Staff Attorney at the Street Vendor Project of the
19	Urban Justice Center. The Street Vendor Project is a
20	membership based organization with more than 2,000
21	members who sell food and merchandise from trucks,
22	carts, and tables across the city. We organize
23	vendors to make their voices heard and provide legal

25 regard to Intro 1456 which would require mobile food

24

representation and small business advice. I'm here in

COMMITTEE ON HEALTH

1

2 vendors to post letter grades received from food 3 safety inspections. We support this bill and we 4 support the idea of giving letter grades to mobile 5 food vendors. Vendors serve delicious and safe food that needs to be recognized as such by the city. 6 7 However, there needs to be more detail provided in 8 the legislation to ensure the parity between mobile 9 food vendors and other food service establishments. The current wording in the bill does little more than 10 11 define an inspection results placard and require it 12 to be posted on the vendor's vehicle or cart. This 13 will allow the Health Department to create its own 14 rules for vendor letter grades and we already know 15 examples of food vendors being treated differently than restaurants by the Department of Health. For 16 17 example, vendors can technically have their food 18 service establishment permit revoked after one 19 violation of the Health Code within a two-year 20 period. Restaurants, on the other hand, can have their permit revoked for serious and repeated 21 2.2 violations. We acknowledge that some Health Code 23 provisions apply exclusively to vendors and not restaurants and we'll be happy to work with the 24 25 Health Department to make sure that the grading

1	COMMITTEE ON HEALTH 118
2	system fairly accounts for these differences. Some
3	other differences between restaurants and food
4	vendors are that restaurants can use time as a public
5	health control so they can keep food out of
6	temperature for a certain amount of time where
7	vendors cannot. Another big difference is that if you
8	have an unlicensed vendor on a cart that has a permit
9	on it with another licensed vendor there is still
10	1,000 dollar fine for that unlicensed vendor even if
11	a licensed vendor is there, a licensed vendor means
12	they've gone through the application process, they've
13	completed the food safety certification requirement
14	just like you have to have one person on the cart
15	one person in a restaurant that has that food
16	certification there should be one person on the cart
17	that should have that. So, you receive a 1,000-dollar
18	fine if you have an unlicensed vendor on an otherwise
19	permanented cart with a licensed vendor, two people
20	working, it actually results in two 1,000 dollar
21	fines, one for the permit owner and one for the
22	vendor themselves. These types of unequal enforcement
23	mechanisms we want to make sure that it doesn't exist
24	in any grading system applied for food vendors. We
25	don't want food vendors being graded more severely

1	COMMITTEE ON HEALTH 119
2	than restaurants for the same violations. This would
3	harm the vendors and mislead the public, who expect
4	an "A" to mean the same, whether on a cart or in a
5	restaurant window. Since food vendors and restaurants
6	are already following nearly all the same Health Code
7	regulations, there should be no reason to treat them
8	differently in the grading process and this
9	legislation should ensure that. Additionally, any
10	grading system for food vendors should only be
11	premised only on violations that directly impact food
12	safety. A vendor should not get a lower grade because
13	they are nine feet from the crosswalk instead of ten
14	feet from the crosswalk. A potential 500-dollar
15	penalty is enough. Mobile food vendors are proud of
16	the food that they serve and they should be graded
17	accordingly. Although food vending is already
18	transparent, I mean they're cooking the food right in
19	front of you, this legislation will help to
20	legitimize food vendors as small business owners who
21	deserve the same praise as other food service
22	establishments. Thank you for the opportunity to
23	testify.
24	COUNCIL MEMBER BARRON: I want to thank
25	the panel and I just have a few questions. So, Mr.

1	COMMITTEE ON HEALTH 120
2	Shapiro you talk about the inequities between the
3	fines that are levied for the vendors as opposed to
4	restaurants, if those inequities were addressed and
5	if the same standard were applied to the vendors as
6	to the restaurants what would be your concerns then?
7	MATHEW SHAPIRO: I'm not sure I
8	understand. Vendors are already, you know… [cross-
9	talk]
10	COUNCIL MEMBER BARRON: You said that a
11	vendor might be subjected to two 1,000 dollar fines
12	simply applied to the fact that they didn't have
13	each the vendor and the license holder would both be
14	subjected to the 1,000-dollar fine whereas a
15	restaurant would just have it as a 1,000 dollar one
16	time 1,000… [cross-talk]
17	MATHEW SHAPIRO: Right [cross-talk]
18	COUNCIL MEMBER BARRON:dollar fine
19	[cross-talk]
20	MATHEW SHAPIRO: The difference is in a
21	restaurant you just need to have one person that,
22	that holds the food safety certification license.
23	COUNCIL MEMBER BARRON: Right [cross-
24	talk]
25	

1	COMMITTEE ON HEALTH 121
2	MATHEW SHAPIRO:on a vending cart
3	[cross-talk]
4	COUNCIL MEMBER BARRON: So, my question
5	to you is then if that were limited or capped at
6	1,000 dollars as it applies to a restaurant then what
7	would be your concerns?
8	MATHEW SHAPIRO: I if I wouldn't have a
9	concern, I'm saying that as long as there's one
10	person on the cart that holds the food safety
11	certification and the license that should be okay, if
12	there's someone on the cart that doesn't have a
13	license or hasn't gotten their license yet in the
14	mail even though they've already completed all the
15	training they still get a 1,000-dollar fine. So, I'd
16	like… you know these types of inequities I don't want
17	to see that reflected in the grading system. We can
18	talk about those inequities in perhaps different
19	potential legislation because that's not before the
20	council right now. I was just providing examples of,
21	of times where vendors are treated differently than
22	restaurants. Restaurants suffer from, you know
23	tremendous high fines and, and tremendous enforcement
24	just like vendors do, we want to make sure there's,
25	there's parity there.
l	

1	COMMITTEE ON HEALTH 122
2	COUNCIL MEMBER BARRON: Okay and Mr.
3	Dugan I'm the sponsor of the 1103 so I just have some
4	questions for you.
5	KEVIN DUGAN: Sure.
6	COUNCIL MEMBER BARRON: You say that
7	posting the signs warning against excessive
8	consumption actually is perhaps not needed because
9	they already know that what their diet restrictions
10	should be?
11	KEVIN DUGAN: Is that in the testimony
12	that I, I don't remember writing that but yeah, we do
13	have some concerns [cross-talk]
14	COUNCIL MEMBER BARRON: The requirement
15	of restaurants to post signage warning against the
16	dangers of excessive consumption of sugar and
17	carbohydrates for diabetic and pre-diabetic, diabetic
18	individuals. So, I believe in your testimony you said
19	that they already know what the requirements are so
20	it'd be unnecessary.
21	KEVIN DUGAN: I didn't say… I didn't
22	speak on that bill today but I would but I will say
23	is, is that kind of what my compatriot Andrew
24	mentioned to it is like where you know anytime we
25	get into… I agree… [cross-talk]
I	

1	COMMITTEE ON HEALTH 123
2	COUNCIL MEMBER BARRON: Okay [cross-
3	talk]
4	KEVIN DUGAN:with what was said before
5	that Andrew mentioned that Mr. Rigie mentioned before
6	about how it we do have some concerns over, you know
7	not providing the, the full context of the
8	information that, that may be required for, for
9	people with diabetics or pre-diabetics that is our
10	main concern with the bill that this, this signage
11	would just kind of not provide enough context to
12	those to those folks who have been diagnosed as such
13	and that they should if they have questions they
14	should be kind of guided towards a, a medical
15	professional… I don't… [cross-talk]
16	COUNCIL MEMBER BARRON: Right, okay so
17	your testimony says attracting customers is paramount
18	and the association fears that by having signage up
19	that warns customers about the dangers of consuming
20	items that are sold in these particular restaurants
21	that folks would be turned off and look elsewhere.
22	KEVIN DUGAN: Yes, I guess our concern is
23	that without the proper context behind the, the
24	signage folks might just make assumptions that, that
25	all carbohydrates and all sugars are, are harmful to
I	I

1	COMMITTEE ON HEALTH 124
2	them without, you know depending on what the sign
3	would look like, I guess that our main concern is
4	what what would be going on this posting and what
5	these signs would look like and the information
6	provided there if it's enough information not just
7	warning folks against sugars and carbohydrates more
8	straight out but making sure that they are aware of,
9	you know the certain that they can have dramatic
10	effects on folks with certain types of diagnosis.
11	COUNCIL MEMBER BARRON: Well the, the
12	purpose of the bill actually is to warn against
13	excessive sugars and carbohydrates and the impact
14	that they would have so it's not as and as I said
15	earlier we certainly know that a balanced diet
16	requires carbohydrates be a part of a balanced diet,
17	diet so it's not that we're just saying outright all
18	carbs are bad and that you shouldn't eat anything
19	that has carbohydrates and sugars but we want to
20	heighten the awareness at the excessive levels and
21	the added sugars are the types of dangers that pre-
22	diabetics and diabetics in particular should be aware
23	of but certainly all people because we don't want
24	people to even have blood levels that get to that
25	stage where they are then diagnosed as being pre-
I	I

2 diabetic and also to the first presenter you also 3 referenced something similar so would you like to 4 comment?

COMMITTEE ON HEALTH

1

ANDREW RIGIE: Yes, just to add onto that 5 my understanding is many times if a person is 6 7 diabetic or pre-diabetic they may be under some sort of medical supervision and we believe that it is 8 9 beneficial that the medical professional is advising that person on the diet and the type of consumption 10 11 that they should have and that's, you know pretty 12 much it, I think going back again to some experts and when the department testified the different types of 13 14 sugars, the types of consumptions that it cannot 15 always just be conveyed in a simple sign and you know 16 restaurants want to do what they can to accommodate 17 all of their guests but as you know there are many, 18 many different types of disorder, disorders or 19 allergies and other so we try to give the information 20 when possible but also my understanding from this issue speaking with some professionals that just a 21 2.2 sign cannot convey the complexity of the matter 23 efficiently.

24 COUNCIL MEMBER BARRON: Do you... do you 25 agree then that the, the salt shaker symbol has been

1	COMMITTEE ON HEALTH 126
2	a benefit to heighten people's awareness as to the
3	salt content of particular menu items?
4	ANDREW RIGIE: There are a lot of
5	questions I have concerning the salt shaker and other
6	types of postings as to their actual influence on
7	consumer behavior. I'm sure we could go back and
8	forth and cite many different studies that would
9	contradict one another what I do know is our members
10	that operate restaurants want to serve food in many
11	cases helpful that it's also demanded enjoyable by
12	their guests and I guess instead of just moving
13	directly to a posting requirement would be to sit
14	down with you and others and have a discussion and be
15	better informed in the case of your bill what kind of
16	impact on consumer behavior would this posting sign
17	have. I think that we should be data driven and we
18	also need to look in the context of what it means to
19	operate a business not to put this in a different
20	light but you know there are many, many different
21	signs and posters that restaurants are post… you know
22	required to post, it goes back to the idea of this
23	hearing many of them assign violations if a sign is
24	posted here and not there it's fines, it impacts your
25	letter grade so I'm really looking at the context of

1	COMMITTEE ON HEALTH 127
2	this bill within the regulatory experiment for our
3	business owners but I would be more than happy to
4	engage in a conversation about how we can [cross-
5	talk]
6	COUNCIL MEMBER BARRON: Great [cross-
7	talk]
8	ANDREW RIGIE:address this issue.
9	COUNCIL MEMBER BARRON: Great. Okay,
10	we're going to call the next panel, thank you so much
11	and we look… [cross-talk]
12	ANDREW RIGIE: Thank you.
13	COUNCIL MEMBER BARRON:forward to
14	working with you on all of the bills as been cited.
15	CHAIRPERSON JOHNSON: [off-mic] Council
16	Member Barron (??) go ahead you can call the next
17	panel.
18	COUNCIL MEMBER BARRON: Okay, thank you.
19	The next panel that's coming up is Jennifer Pomeranz
20	from NYU, Julia McCarthy from Laurie M. Tisch Center
21	for Food, Education, and Policy, Robert Sunshine from
22	NATO the Theatre Association of New York State, and
23	Matt Greller of, of NATO, the Theatre Association of
24	New York State. If those panel members would come
25	forward and take a seat, thank you.

1	COMMITTEE ON HEALTH 128
2	CHAIRPERSON JOHNSON: You may begin just
3	make sure the mic is on.
4	JENNIFER POMERANZ: Hi, thank you for
5	having me. My name is Jennifer Pomeranz, I'm an
6	Assistant Professor at NYU's College of Global Public
7	Health and I'm the Interim Chair of the Department of
8	Public Health Policy and Management. I'm also a
9	member of the Food Service Establishment Advisory
10	Board. I'd like to just briefly respond to some
11	things that Mr. Bookman said and then I'll read my
12	testimony. He… his viewpoint is… I would consider it
13	a minority viewpoint on the board and I would like to
14	speak to… I, I have joined quite recently so I can't…
15	I was not there when they put forth those
16	recommendations that you've adopted in your bill but
17	I do want to point out that the concept of the
18	recommendations is for the Department of Health to
19	consider with their expertise and it certainly
20	wasn't is not the board the Advisory Boards
21	understanding that they would become law if the
22	department had rejected them. So, I'd like you to
23	please keep that in mind. I also represent with my
24	written comments the Allen Rosen from Juniors
25	Restaurant and Bakery and also Elizabeth Meltz who's

1	COMMITTEE ON HEALTH 129
2	at the Bastianich… Batali Bastianich Hospitality
3	Group. So, also, they are on the Food Service
4	Establishment Advisory Board and they are food
5	industry members who, who like me oppose 1571 and
6	have signed onto my letter to you in opposition which
7	I will read. We are members of the Food Service
8	Establishment Advisory Board and citizens of New York
9	City, we oppose 1571 and urge the city council to
10	reject this amendment to the administrative code for
11	five reasons which I'll briefly explain but first it
12	directly contravenes the city council's purpose for
13	establishing the Food Service Establishment Advisory
14	Board, it undermines the very purpose of the
15	Department of Health, it is of deep concern from a
16	public health and food safety perspective, it adds
17	administrative and financial burdens to the food
18	service inspection process for restaurants and it's
19	also the notice is procedurally defective. First, the
20	city council established the Food Service Advisory
21	Board to review, evaluate, and understand the food
22	service inspection program. By law, you established
23	this board to be comprised of an appropriate mix of
24	public health, food safety, restaurant, and food
25	industry representatives and they are represented on

1	COMMITTEE ON HEALTH 130
2	the board. We're charged with advising you and the
3	Department of Health for and making recommendations
4	with a balanced viewpoint to ensure efficacy from a
5	food safety inspection from a food safety
6	perspective, health and restaurant perspective. The
7	board has never seen anything like section two of the
8	bill so unlike Mr. Bookman's representation that we
9	all voted on it that is not true, section two has
10	never was not considered, your other section three
11	was but not section two but the very importantly
12	this 1571 is bypassing the, the Advisory Board and
13	undermining our legally established role while
14	section two was not seen Chairman [cross-talk]
15	CHAIRPERSON JOHNSON: Well this is a
16	this is a legislative body.
17	JENNIFER POMERANZ: I understand [cross-
18	talk]
19	CHAIRPERSON JOHNSON: We have oversight
20	over… [cross-talk]
21	JENNIFER POMERANZ: Of course you do
22	[cross-talk]
23	CHAIRPERSON JOHNSON:the Department of
24	Health and Mental Hygiene… [cross-talk]
25	
I	I

1	COMMITTEE ON HEALTH 131
2	JENNIFER POMERANZ: Of course you
3	[cross-talk]
4	CHAIRPERSON JOHNSON: We adopt [cross-
5	talk]
6	JENNIFER POMERANZ:do [cross-talk]
7	CHAIRPERSON JOHNSON:legislation in New
8	York City, that is what this body does [cross-talk]
9	JENNIFER POMERANZ:of course [cross-
10	talk]
11	CHAIRPERSON JOHNSON:that is how we're
12	mandated be a charter so, to say we are overstepping
13	our responsibility you are there to make
14	recommendations, you are not there to make law that's
15	what this body does, you may continue.
16	JENNIFER POMERANZ: Of course I agree,
17	I'm saying it's undermining our role. The… [cross-
18	talk]
19	CHAIRPERSON JOHNSON: Your role was
20	created by us by law, keep going.
21	JENNIFER POMERANZ: The announcement was
22	only made with… one week ago so we have not had an
23	opportunity to meet but I can report to you that the
24	that we are not in consensus on, on this bill. The
25	second opposition we have to 1571 is that it
I	

1	COMMITTEE ON HEALTH 132
2	undermines the most knowledgeable food safety experts
3	in the city which are at the Department of Health.
4	They are charged with monitoring, preventing, and
5	responding to food safety concerns and this is a
6	poor core public health function of our department
7	and those nationwide. Pursuant to New York law our
8	Department of Health has the clear authority to
9	engage in these activities and make evidence based
10	decisions related to food safety issues. The, the
11	Department has the expertise to reform this role and
12	is in the frontline of food safety work. Respectfully
13	it is not the city council's role to make these
14	determinations but it is the role of the Department
15	of Health. I believe it's bad policy for the city
16	council to bypass the Department of Health to enact
17	laws that seek to remove food safety and public
18	health protection for New Yorkers while undermining
19	the Food Safety Authority in the city. At most the
20	council should suggest that the department use its
21	rule making powers to enact evidence based
22	regulations to amend the program. As many people
23	testified today there are amendments you'd like to
24	see this is for the Department of Health to consider.
25	However, okay, so I… and I don't believe it's

1	COMMITTEE ON HEALTH 133
2	warranted in this instance especially for section two
3	of the bill. Third, 1571 raises true food safety
4	concerns. The CDC has identified the most frequently
5	reported factors contributing to food born illness
6	and these are directly related to food safety
7	concerns with retail and food services
8	establishments. In response, the Food and Drug
9	Administration, the federal one, created a manual on
10	conducting risk based inspections. 1571 directly
11	contravenes the FDA guidelines and exposes New
12	Yorkers to unnecessary food safety concerns. By
13	requiring the department to wait an entire year for
14	re-inspection and tying re-inspection to the hearing
15	schedule the administrative tribunal 1571 is not
16	evidence based and is a concern for health and
17	safety. The FDA guidelines support a public health
18	department's ability to conduct re-inspections based
19	on its observations over food safety issues thus
20	based on risk and not in arbitrary time periods set
21	of set forth by officials without food safety
22	expertise. Moreover, our understanding and the press
23	releases and evidence presented by the Department of
24	Health today do show that the food safety inspection
25	program is working as intended and working well

1	COMMITTEE ON HEALTH 134
2	regardless of whether people agree with it. New
3	Yorkers all do want to eat in safe and clean
4	restaurants which, which this bill would compromise.
5	From a restaurant owner's perspective, there is also
6	an argument that instead of inspecting based on risk
7	based schedule the bill slows down the inspection and
8	improvement process by delaying the second
9	inspection. This is of concern to some restaurants.
10	Additionally, more restaurants will likely go to the
11	tribunal for a hearing and this could create a
12	backlog of cases and increase the time and resources
13	necessary for restaurants to comply which is
14	unnecessary and burdensome and we were talking about
15	mom and pop shops earlier and this is especially
16	burdensome for them. and then fifth I would like to
17	note that there is a procedural defect with the
18	announcement, the summary of the bill does not
19	capture the actual intent of the bill, the
20	requirement to wait one year, it seems to be
21	misleading and I, I believe this should give
22	interested parties more time to be informed and, and
23	a realistic opportunity to provide feedback. So, in
24	summary 1571 is not an evidence based policy it
25	contravenes FDA guidance and exposes New Yorkers to

1	COMMITTEE ON HEALTH 135
2	food born illness. It undermines our very own
3	Department of Health whose role and authority is to
4	address food safety issues and is bad policy. Thank
5	you for your consideration.
6	CHAIRPERSON JOHNSON: So, Professor I
7	want to just tell you that there is no procedural
8	defect, that's not what the lawyers at the council
9	believe, that's now what our committee council
10	believes, that's not what the legislative director of
11	the council believes, that's not what anyone believes
12	so for you to come here and tell us that it is a
13	procedural defect and what we're doing today is
14	offensive and incorrect, that's number one. Number
15	two is how long have you been on the Food Service
16	Establishment Advisory Board?
17	JENNIFER POMERANZ: A little less than a
18	year.
19	CHAIRPERSON JOHNSON: Who were you
20	appointed by?
21	JENNIFER POMERANZ: De Blasio, I don't…
22	my letter was signed by Mayor De Blasio.
23	CHAIRPERSON JOHNSON: You were appointed
24	by the… you're a Mayor appointments. The
25	

1	COMMITTEE ON HEALTH 136
2	recommendations that were made that Mr. Bookman
3	talked about those were not unanimously adopted?
4	JENNIFER POMERANZ: My I was not on the
5	board at the time but my understanding is that the
6	subcommittee was not unanimous and I don't know the
7	answer to… but I, I would like to still urge that…
8	[cross-talk]
9	CHAIRPERSON JOHNSON: But I don't I, I
10	want to… I just want to… you, you said in here… I
11	want to look at your testimony, you just testified.
12	JENNIFER POMERANZ: Yes, I did not say
13	anything about unanimously adopted.
14	CHAIRPERSON JOHNSON: You said that
15	Introduction 1571 undermines the most knowledgeable
16	experts on food safety issues in the city at DOHMH
17	everything all the recommendations we made are
18	recommendations that were adopted unanimously by the
19	food service establishment [cross-talk]
20	JENNIFER POMERANZ: Oh I know what you're
21	referring to, no I sir I was I believe that section
22	three is exactly what you just said but section two I
23	have not seen at the food service establishment
24	Advisory Board and it's not in the, the amendment to
25	your bill, section two is new information for me but
I	

1	COMMITTEE ON HEALTH 137
2	I agree with you on section three of your bill, yes,
3	was, was recommended by the Food Service
4	Establishment Advisory Board before I was a member.
5	CHAIRPERSON JOHNSON: Have you ever
6	worked at a restaurant?
7	JENNIFER POMERANZ: Actually I did and I
8	and I think that the kitchens are quite small so I
9	wouldn't be comfortable with people smoking over my
10	stored food or [cross-talk]
11	CHAIRPERSON JOHNSON: Well that's not
12	[cross-talk]
13	JENNIFER POMERANZ:near the
14	dishwashing… [cross-talk]
15	CHAIRPERSON JOHNSON:what this is about
16	today… [cross-talk]
17	JENNIFER POMERANZ: Well actually
18	[cross-talk]
19	CHAIRPERSON JOHNSON:where, where is
20	that in the bill?
21	JENNIFER POMERANZ: It, it is.
22	CHAIRPERSON JOHNSON: Well tell me… okay,
23	please I mean I want to go through the bill text
24	[cross-talk]
25	JENNIFER POMERANZ: It says [cross-talk]
l	

1	COMMITTEE ON HEALTH 138
2	CHAIRPERSON JOHNSON:let's go through
3	that together so you can point out to me where we're
4	trying to legalize people smoking above stoves in
5	kitchens and all that.
6	JENNIFER POMERANZ: Violations 6B.
7	CHAIRPERSON JOHNSON: Yeah, what does it
8	say?
9	JENNIFER POMERANZ: Tobacco use eating
10	or drinking from open container in food preparation,
11	food storage, or dishwashing areas, the board
12	recommends removing the language related to food
13	storage or dishwashing area from subsection and the
14	department declines and I believe your bill says
15	[cross-talk]
16	CHAIRPERSON JOHNSON: It doesn't allow
17	[cross-talk]
18	JENNIFER POMERANZ: 16 [cross-talk]
19	CHAIRPERSON JOHNSON:it doesn't allow
20	that to happen, people will still be fined, there
21	will still be violations, a restaurant can still be
22	shut down, what we're saying is that the things we're
23	recommending is that it wouldn't count on points
24	
25	

1	COMMITTEE ON HEALTH 139
2	JENNIFER POMERANZ: I, I understand but I
3	do believe the point system is a deterrent for
4	behavior.
5	CHAIRPERSON JOHNSON: Got it. We're you
6	asked to testify here today by the administration?
7	JENNIFER POMERANZ: No.
8	CHAIRPERSON JOHNSON: They didn't ask
9	you?
10	JENNIFER POMERANZ: No, I, I offered.
11	CHAIRPERSON JOHNSON: Were you contacted
12	by them with, with about this hearing?
13	JENNIFER POMERANZ: I was learned about
14	the law as part of the Food Service Establishment
15	Advisory Committee and was in in the got an email
16	about the… [cross-talk]
17	CHAIRPERSON JOHNSON: Were you alerted by
18	the Health Department about this committee hearing
19	today?
20	JENNIFER POMERANZ: Magda who is our
21	liaison, I don't know her last… [cross-talk]
22	CHAIRPERSON JOHNSON: Alerted you to the
23	hearing today and then you offered to testify?
24	JENNIFER POMERANZ: Yes.
25	

1	COMMITTEE ON HEALTH 140
2	CHAIRPERSON JOHNSON: Got it. They didn't
3	ask you to testify?
4	JENNIFER POMERANZ: No.
5	CHAIRPERSON JOHNSON: Matt, Matt didn't
6	say will you come testify at this hearing?
7	JENNIFER POMERANZ: No, I offered to
8	testify because I'm a public health expert and
9	believe in food safety and public health.
10	CHAIRPERSON JOHNSON: Well so the Health
11	Department, my understanding talking to Commissioner
12	Bassett she wants the council to take measures on
13	portion size control on soda, your testimony today
14	says that the Health Department should do all these
15	things on their own and elected officials stay
16	should stay out of public policy or public health
17	policy related matters, it should be up to the Health
18	Department that's what you say in your testimony
19	today. So, should elected officials not pass measures
20	that effect good public health, should the council
21	not adopt the Commissioners proposal on portion on
22	portion size, should it just be up to the Health
23	Department even though the court of appeals said they
24	can't do it that has to go through a legislative
25	

1	COMMITTEE ON HEALTH 141
2	body, should we not do it because we don't have that
3	public health expertise?
4	JENNIFER POMERANZ: No, I, I, I believe
5	that the health… if the Health Department disagrees
6	with a measure the Health Department makes its
7	decisions based on evidence and science so if they
8	disagree with a measure by the city council I think
9	that's' a warning to you that it's not evidence based
10	so the, the Department of Health strongly supports
11	portion caps because it's based on science, it will
12	be fantastic for the city council to pick up an
13	evidence based policy like but if the Department of
14	Health thinks that a measure is not evidence based,
15	based on science and could cause food born illness
16	outbreaks I would be think that that's not the right
17	role for the city council… [cross-talk]
18	CHAIRPERSON JOHNSON: Well, well I think
19	that… I think that the General Counsel and the
20	Assistant Commissioner and the Deputy Commissioner
21	and Commissioner Bassett who I like very much and I
22	think is an excellent, excellent Commissioner and I
23	love working with her staff who are consummate
24	professionals even when we disagree which we disagree
25	on this, they are great fantastic people to work with

1	COMMITTEE ON HEALTH 142
2	and they do a great job on behalf of the city of New
3	York. As I have said probably at every hearing that
4	they have testified on even when I disagree with them
5	and at every budget hearing we have the best Health
6	Department in the Nation and one of the best Health
7	Departments in the world. I have been one of their
8	biggest champions in asking for more money for them
9	for pleading for the Mayor to give them more money,
10	for being a champion of them. So, I they're great,
11	they're not infallible, infallible just because they
12	say it's true doesn't mean it's true, this is a
13	democracy, there is a give and take, the city council
14	has oversight responsibility, the city council has
15	legislative authority, we do those things. Under
16	Mayor Bloomberg the Police Commissioner Ray Kelly,
17	stop and frisk is fine, it's great, there's no
18	problem with it, it's making our city safer, we don't
19	just listen to a city agency because they say it's so
20	and they have the expertise, we question them, we
21	pass legislation, we listen to the public, we listen
22	to the people it's effecting that's what we do. So,
23	to sit here today and say that just because the
24	Department of Health says something we go along with
25	it that is not a democracy, that is not what the city

1	COMMITTEE ON HEALTH 143
2	council does, that is not what the charter mandates,
3	that is not how we operate. I think the Department is
4	great, I love Commissioner Bassett, Tom Merrill is an
5	amazing lawyer and I'm really glad that Deputy
6	Commissioner Schiff took this difficult job after
7	Deputy Commissioner Kass left, they're all great
8	people but I can disagree with them and I'm not
9	compromising public health and safety in New York
10	City. It's offensive to say that today, I am one of
11	the biggest champions in New York City for public
12	health, every year I ask for more money, every year I
13	go to bat. So, to sit here today and attack this
14	legislation and this council saying I am compromising
15	public health and safety is offensive and I take
16	great umbrage at it.
17	JENNIFER POMERANZ: I'm sorry that you're
18	offended… [cross-talk]
19	CHAIRPERSON JOHNSON: That's what your
20	testimony says… [cross-talk]
21	JENNIFER POMERANZ: I, I just think I
22	believe in evidence based policy making red
23	regardless of whether the public likes it or not.
24	CHAIRPERSON JOHNSON: Thank you, you may
25	begin Mr. Greller.
I	

2 MATT GRELLER: Thank you Mr. Chairman 3 and, and may I just say that I, I echo your 4 sentiments about the Department of Health and, and think that the city council has much nicer chambers 5 to provide testimony in so I appreciate the 6 7 opportunity this afternoon. I'm here only to talk about Intro 1103 and I'm here on behalf of my client, 8 9 the Movie Theatre Trade Association, the National Association of theatre owners in New York State. 10 11 Unfortunately, my colleague Bob Sunshine who does 12 have diabetes is not available to be with us right 13 now but NATO is a not for profit that represents 37 14 movie theatres in the city across the five boroughs, 15 has 1,800 employees, we also represent the Chelsea 16 and many members of the committee are familiar with 17 the movie theatres in their districts. We're here 18 because movie theatres are classified as food service 19 establishments and we're opposed to Introduction 20 1103. Several of our theatres have seating areas but several do not so some would be affected and some 21 would not and this would create different posting 2.2 23 requirements between theatres operated by the same business entities in the same city. To be clear 24 25 though we are not against public health awareness nor
1	COMMITTEE ON HEALTH 145
2	are we against public health education both we think
3	are vitally important and we share the sponsor's
4	concerns about very important public health issues
5	like diabetes. However, we firmly believe that these
6	concerns can be addressed in a much better fashion.
7	When it comes to posting yet another sign or warning
8	label it reminds me about the first rule of real
9	estate and that is location, location, location. Yet
10	another posting requirement may cause confusion for
11	our consumers. Additionally, the clutter of another
12	special label for sugars and carbohydrates will be
13	difficult in the very small menu area for our
14	theatres. This is precisely the reason why the United
15	States Congress enacted the menu labeling provision
16	to the Affordable Care Act. These provisions will be
17	delayed but will become effective on May 7 th , of 2018
18	and they require food service establishments to post
19	the following nationwide standard on menus and I
20	quote, ``2,000 calories a day is used for general
21	nutrition advice but calorie needs vary, additional
22	nutrition information available upon request". In
23	addition to this sign food service establishments
24	will be required to have the following information
25	available for every single menu item, it includes

1	COMMITTEE ON HEALTH 146
2	total calories, calories from fat, total fat,
3	saturated fat, trans fat, cholesterol, sodium, fiber,
4	protein, and yes, total carbohydrates and sugars.
5	Presumably this information can easily be printed
6	out, laminated, and offered to patrons when asked as
7	well as made available on the internet. So, instead
8	of one separate sign for sugars and carbohydrates now
9	and then possibly another ingredient later ought we
10	not to consider a more comprehensive approach.
11	Instead of potentially creating confusion now and
12	crowding counterspace shouldn't we look to try to get
13	the most impact on public health with the least
14	impact on businesses. Additionally, why not take one
15	step further and show again that New York City can
16	lead the way on public health initiatives. The simple
17	insertion of the words and allergens to additional
18	nutrition information available upon request will
19	effectively cover the entire field of potential
20	public health menu labeling. This will provide
21	clarity for the food service industry and it makes it
22	easier for businesses both large and small to comply.
23	This is especially true again with the limited and
24	very small counterspace available to New York City's
25	movie theatres. There are only eight major allergens,

1	COMMITTEE ON HEALTH 147
2	which include nuts, tree nuts, fish, shell fish, soy,
3	wheat, eggs, and dairy. While some council
4	legislation already seeks to label these individual
5	allergens or specific ingredients doing so in one
6	fail swoop will again demonstrate that New York is at
7	the forefront of public health initiatives while at
8	the same time being fair to businesses. Moreover,
9	since New York already requires an allergen poster in
10	the kitchen for employees bringing a similar sign to
11	the point of purchase will help improve public health
12	through awareness. In short, we are respectfully
13	asking that the sponsors and members of the Health
14	Committee to both think bigger to promote public
15	health and at the same time to simplify things with
16	just one effective sign. Doing so will help customers
17	and the food service industry covering the entire
18	field through posting the FDA requirements and
19	allergen information again on just one sign will meet
20	the very laudable goals of the sponsors and prevent
21	confusion caused by the clutter of many signs for
22	every ingredient or every allergen. We hope to
23	collaborate with the sponsors and committee members
24	on improving public health, helping businesses and
25	putting New, New York City at the forefront of menu

1	COMMITTEE ON HEALTH 148
2	labeling efforts and I'm happy to answer any
3	questions. Thank you.
4	CHAIRPERSON JOHNSON: Thank you Mr.
5	Greller.
6	JULIA MCCARTHY: Good afternoon,
7	afternoon Chairman Johnson. I'm Julia McCarthy, an
8	Attorney and Policy Analyst at the Laurie M. Tisch
9	Center from Food, Education, and Policy housed in the
10	program and nutrition at Teachers College Columbia
11	University. The Tisch Food Center researches the
12	connections between a just, sustainable food system
13	and healthy eating. We translate that research into
14	recommendations and resources for educators, policy
15	makers, and community advocates. We are very happy
16	that Council Woman asked earlier today where New
17	Yorkers can get information about food choices
18	because we're working on a report on that very issue.
19	We're looking across the city at agencies to see
20	where, where New York funds, nutrition education
21	programs and policies such as the one before the
22	council today. We thank you for the opportunity to
23	testify on the diabetes and pre-diabetes warning
24	bill. I think both the council and audience are very
25	familiar with facts about diabetes so I'm going to

1	COMMITTEE ON HEALTH 149
2	get to the point. To identify, prevent, and treat
3	diabetes New Yorkers need access to information,
4	health services, and spaces that support healthy
5	lifestyles. While we agree with the intent of the
6	signage bill before the council, research shows that
7	posters alone have limited effectiveness in changing
8	behaviors. Approaches that combine environmental
9	interventions, nutrition education, and social
10	marketing are the most effective. That means for New
11	Yorkers to make healthy choices food needs to be
12	accessible, affordable, and familiar. With this in
13	mind the Tisch Food Center advocates for a
14	comprehensive policy, policies that make it easier
15	for New Yorkers to purchase healthful foods and that
16	support community based nutrition education. New York
17	City's Department of Health and Mental Hygiene is
18	currently doing great work to help individuals
19	prevent and manage diabetes both in the bureau of
20	chronic disease prevention and the center for health
21	equity. The report that we're working on which I
22	mentioned earlier highlights several of these
23	examples. One notable initiative is the Harlem Health
24	Advocacy Partnership. This initiative trains Harlem
25	residents as community health workers to help public

1	COMMITTEE ON HEALTH 150
2	housing residents manage chronic disease, access
3	health care, and advocate within their communities
4	and outside of their communities. Another example is
5	the National Diabetes Prevention Program or NDPP.
6	NDPP also relies on community health workers, in this
7	case to help pre-diabetic individuals maintain weight
8	and prevent diabetes. NDPP is an evidence based
9	program, it's one of CDC's hallmark programs and it
10	runs out of community organizations across the city.
11	It's funded through the Prevention and Public Health
12	Fund which congress is currently threatening to cut.
13	I mention the Prevention and Public Health Fund
14	because in such vulnerable times, the council needs
15	to be thinking about how the city will continue to
16	support chronic disease prevention. The vast majority
17	of the city's prevention dollars come from federal
18	sources, without which the Department of Health could
19	not currently afford to provide the program such as
20	the National Diabetes Prevention Program. Our report
21	discusses a scope of the city's diet related disease
22	prevention work and explains how reliant the city is
23	on the federal government for prevention funding.
24	[sneezes] excuse me and I would be happy to brief
25	the council on our findings when we publish that

1	COMMITTEE ON HEALTH 151
2	report this summer. In closing we're excited that the
3	council continues to propose legislation to prevent
4	diet related diseases. We urge the committee to
5	consider comprehensive new policies that provide
6	education, access, and resources needed to make
7	healthy food choices and we urge you to think
8	seriously continue thinking seriously about how to
9	protect the important prevention work that's already
10	happening in New York City.
11	CHAIRPERSON JOHNSON: Thank you very
12	much. I, I want to mention we have a, a budget
13	hearing, the executive budget hearing for the Health
14	Department next week, the administration is going to
15	come back in a few days and show us their executive
16	plan, it's my hope that in this upcoming budget we'll
17	see some money dedicated to diabetes related issues
18	in New York City from the Health Department, looking
19	at issues that are as you've testified today
20	chronically effecting communities of color, poor
21	communities and to get them the resources they need.
22	The Health Department has that expertise and skill
23	set and I hope that the administration steps up with
24	greater dollars for them to do that type of work. We
25	totally support it, it's become an epidemic in New

1	COMMITTEE ON HEALTH 152
2	York City. As Council Member Vacca said earlier today
3	the Bronx is one of the major epicenters of it and
4	it's having pretty serious health effects that are
5	costly for the city of New York, costly for the
6	health care system and disproportionately affecting
7	poor New Yorkers and communities of color so I'm glad
8	you're here today and I'm glad we're hearing this
9	bill. Thank you to the panel for testifying today,
10	our last panel is Terence Tubridy, Melissa Olson, and
11	Dan Pisark, is Dan Pisark still here, okay so just
12	Terence Tubridy and Melissa and that's our final
13	panel. You may begin just make sure the mic is on Mr.
14	Tubridy if you want to start first.
15	TERENCE TUBRIDY: Sure. My name is
16	Terence Tubridy and I'm a New York City resident,
17	resident and third generation New York City business
18	owner and I guess I'm the only one present today,
19	under three hours Mr. Council Member just, just short
20	of what I usually deal with at the tribunal. I have
21	the privilege of owning restaurants in three boroughs
22	and I want to thank the council members here looking
23	to make the grading system more fair and equitable.
24	The public has the right to know that they are being
25	protected. The graded system has certainly made us

1	COMMITTEE ON HEALTH 153
2	better and our industry more focused on food safety.
3	I'm not here to argue this, I'm here to argue the
4	system is rigged against us. The commissioner speaks
5	of motivation and incentive with all due respect I
6	don't need any more motivation, my motivation is my
7	livelihood; my family, yelp, employees, trip advisor,
8	rent, word of mouth and the ten other city agencies I
9	have to deal with on a daily basis. The grading
10	system in my perspective is a fining system in place
11	to keep us there. Inspectors walk into my restaurant
12	and its sheer terror that runs through my staff
13	because we know it's not really how clean or dirty
14	our, our space is, it's really the luck of the draw;
15	one inspector looks at this the other inspector looks
16	at that, it doesn't really matter, it's really I've,
17	I've given up. Our last inspection one of our
18	restaurants we passed with flying colors, zero
19	points, the next day another inspector walked in to
20	check his inspection. Now we weren't going to get
21	fined for that inspection but again the stress level
22	on my staff, on our management, the disruption of
23	business, it just goes to show you that it is hard to
24	do business in the city. My incentive, again we're
25	talking about incentives is surely to keep an "A" $$

1 COMMITTEE ON HEALTH 154 grade because a "C" grade... a "C" grade is a business 2 killer that's why 92 percent of restaurants pay for 3 the "A" grade and they'll go through this system. And 4 I want to thank you for your work on this. 5 CHAIRPERSON JOHNSON: Thank you, I have a 6 7 few questions for you before we go to Mrs. Olsen. Can 8 you give me some examples of you get your annual 9 inspection, an inspector comes in, you either get no points or very little points and then another 10 11 inspector comes in like you said or the inspector 12 comes in the following year and they, they fine you 13 for something that a previous inspector said was fine 14 that, that there was no problem with it, can you give 15 some examples of when that happens and what those 16 issues have been? 17 TERENCE TUBRIDY: I have seven ... eight 18 establishments; Queens, Brooklyn, and Manhattan so 19 the examples are kind of countless. We're not ... the 20 industry... we're, we're all for the public safety,

21 nobody is saying that we shouldn't be inspected that,
22 that we shouldn't be held to a higher standard, we
23 certainly agree and since Mayor Bloomberg and, and
24 the Department of Health put in the grading system we
25 certainly have stepped up our game. The, the issue I

1	COMMITTEE ON HEALTH 155
2	think that we deal with is when an inspector walks in
3	its, it's… we stop because we can't do anything if we
4	do something they'll look at that as they're… you
5	know it's, it's, it's… we'll be in service and
6	there'll be food on the on the kitchen floor, on the
7	back of house kitchen floor because we're in service
8	and one inspector will say that's a that's a dirty
9	floor and he'll say that's points, how, how are we
10	supposed to continue to keep that kitchen you know
11	with crumbs and you know just… you know you're in the
12	middle of service it's the back of the line, how I
13	mean have they have, have has have these
14	inspectors ever worked in a restaurant. We're talking
15	about I think the, the Professor was mentioning about
16	smoking over the… you know that example I think that
17	was pertaining to you know whether it was a, a water
18	bottle or, or a glass of water that a bartender may
19	have behind the bar and it if they want to drink a
20	glass of water or a glass of soda behind the bar that
21	technically is a food prep area that's, that's a
22	fine, that's, that's points, they can't keep… if they
23	want a glass of water behind the bar they have to
24	step outside behind the bar drink the glass of water
25	and then come back behind the bar [cross-talk]

1	COMMITTEE ON HEALTH 156
2	CHAIRPERSON JOHNSON: This is so crazy
3	its crazy.
4	TERENCE TUBRIDY: I've had inspectors
5	tell me, we have an outside bar out in Rockaway
6	Beach, I've had inspectors tell me no we need four
7	walls around our outside bar because that's a food
8	prep area then he waited an hour and a half as he's
9	doing to get an answer from his inspector, from his
10	supervisor to find out oh no it's an outside bar it's
11	okay but I'm sitting there again and, and my anxiety
12	through the roof that I'm going to get a "B" or a "C"
13	and I have to explain this to my customers that no
14	it's, it's because of it's because of an outside bar
15	or whether it's because… [cross-talk]
16	CHAIRPERSON JOHNSON: Was that the first
17	time that outside bar was inspected?
18	TERENCE TUBRIDY: No… well no it gets
19	inspected all the time.
20	CHAIRPERSON JOHNSON: That's what I'm
21	saying so one time one inspector showed up and said
22	this when previous inspectors [cross-talk]
23	TERENCE TUBRIDY: Yeah and look [cross-
24	talk]
25	

1	COMMITTEE ON HEALTH 157
2	CHAIRPERSON JOHNSON:never said that
3	[cross-talk]
4	TERENCE TUBRIDY:I know I know it's,
5	it's entry level training and I get it and we try to
6	be, you know we, we, we… you know we're working with
7	them and it's just very difficult to, to when, when
8	I mentioned it was the inspector we, we have it we
9	had an initial "A" and I'm talking about the next
10	day; it was June 29 th we had an "A", June 30 th another
11	inspector walked in just to check that inspector's
12	work but to us we don't we don't know that and yeah
13	he made that clear walking in but again like that's a
14	disruption of our business, it's a disruption, it's a
15	harassment, is that, that… as, as I… as I look at it…
16	CHAIRPERSON JOHNSON: So, you have eight
17	establishments in the five boroughs?
18	TERENCE TUBRIDY: Yes and they all have
19	"A" grades.
20	CHAIRPERSON JOHNSON: They all have "A"
21	grades and… [cross-talk]
22	TERENCE TUBRIDY: I can't put a "B" or
23	"C" [cross-talk]
24	CHAIRPERSON JOHNSON:and, and when did
25	you open your first establishment, what year?

1	COMMITTEE ON HEALTH 158
2	TERENCE TUBRIDY: 2002.
3	CHAIRPERSON JOHNSON: So, it's been you
4	know almost 15 years…
5	TERENCE TUBRIDY: I've been in the
6	business since I my, my father owned the business in
7	1978 I've been working in the business since 1991.
8	CHAIRPERSON JOHNSON: The cost of rent
9	has gone up for you I assume over the last 15 years?
10	TERENCE TUBRIDY: Yes.
11	CHAIRPERSON JOHNSON: The counsel which I
12	supported adopted a paid sick leave policy which
13	affected the industry, minimum wage laws going up
14	affect the industry all of these things affect the
15	industry and your bottom line and then you have
16	inspectors that come in and one day, I'm giving an
17	example that I hear all the time from restaurants,
18	that an inspector comes in and says oh there's a pipe
19	on that wall up there and that pipe, you know needs
20	to be covered a certain way or needs to be connected
21	to something or shouldn't be exposed that way and the
22	business owner says that pipe's been like that for
23	nine years and no one's ever said anything, okay well
24	now you're getting a, a fine for it or a violation
25	and they have to spend their day down at the tribunal

COMMITTEE ON HEALTH

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fighting it showing evidence that it's always been there, taking time away from their businesses and when the price of everything else is going up that affects a small business owner's bottom line, is that right?

7 TERENCE TUBRIDY: Yeah, it, it happens 8 look I'm, I'm, I'm a mom and pop, I'm a New York City 9 resident, I'm not going anywhere, do I think twice, do I think three times, do I think a million times 10 11 about opening up another business in New York City, 12 absolutely. Yet the increased business that they're 13 talking about in restaurants opening up, yeah, the 14 shakes acts of the world are, you know with billions 15 of dollars behind them in venture capital's money 16 they're going to continue to open up but the American 17 dream of, of opening up your corner bar, café, mom 18 and pop that's... it's, it's just way too costly and, 19 and, and so yeah, I mean that's... it's... that's a whole 20 another conversation.

21 CHAIRPERSON JOHNSON: Well you're clearly 22 doing something right most restaurants don't stay 23 open past a year or past five years so for you to 24 have five restaurants, you're a good businessman 25 clearly and I appreciate you taking time out of your

1	COMMITTEE ON HEALTH 160
2	very busy schedule with eight establishments earning
3	a lot of tax dollars for the city of New York in
4	sales tax, providing a lot of good paying jobs for
5	New Yorkers that live in the five boroughs and
6	providing a good service to New Yorkers and tourists
7	for you to spend time out of your busy schedule to
8	get here at ten o'clock in the morning, to be here
9	until one o'clock to not get back to your
10	establishment probably after two o'clock and take
11	half a day away from running your business I really
12	appreciate you being here to give us your firsthand
13	perspective.
14	TERENCE TUBRIDY: Thank you.
15	CHAIRPERSON JOHNSON: Thank you, Mrs.
16	Olsen.
17	MELISSA OLSON: Thank you Chairperson
18	Johnson and members of the committee for the
19	opportunity to speak this morning. A particular
20	thanks to Council Member Barron for introducing this
21	important legislation. My name is Melissa Olson and I
22	am the Director of Nutrition at Community Health Care
23	Network. CHN is a network of 11 federally qualified
24	health centers plus two mobile medical vans and two
25	school based health centers. We provide affordable

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primary care, dental, behavioral health and social 2 3 services for 85,000 New Yorkers annually in four 4 boroughs. On behalf of CHN, we fully support the New 5 York City Council in passing Intro 1103, a bill which will educate individuals about diabetes, specifically 6 7 that sugary sodas and candy are not the only types of 8 food that contribute to negative diabetic outcomes. 9 Diabetes in New York City has become a crisis, and while we are encouraged by the strides the city is 10 11 making to address this, we feel there is much more to be done. Over 700,000 New Yorkers have diabetes and 12 13 almost one third of them are unaware. Last year, out 14 of the 20,000 patients with chronic conditions that 15 CHN providers saw, nearly 5,000 had diabetes. At CHN 16 we have 12 registered dietician nutritionists who are 17 all trained in diabetes education using health 18 literate methods. It is far too common for patients 19 who have diabetes or pre-diabetes to come to us with 20 misinformation. The idea that patients need to cut 21 sugar has been effectively communicated, however, 2.2 most patients do not consider that our body makes 23 sugar from carbohydrates too. It is vital that people who have diabetes and pre-diabetes know to limit the 24

portion of carbs that they eat. To give you a few

1	COMMITTEE ON HEALTH 162
2	examples; a patient recently came to us and couldn't
3	understand why his sugar levels weren't dropping
4	since he had cut his soda habit and we found out that
5	he was eating large amounts of pasta and rice for
6	most of his meals. Another patient switched to brown
7	rice at the Chinese restaurant thinking she could
8	still eat a large portion of it but even brown rice
9	and whole wheat pasta need to be consumed in small
10	amounts for diabetes control or prevention. And last
11	a female patient I saw thought that if she switched
12	to the bran muffin at Dunkin Donuts instead of the
13	white bagels, she was eating healthier for her
14	diabetes. The truth is though that it… even a large
15	bran muffin breaks down into a lot of sugar so that
16	doesn't help with diabetes control either. When it
17	comes to nutrition, there are three primary barriers
18	that result in negative health outcomes, the first
19	being healthy diet knowledge and then also having
20	access to healthy food and the cost of healthy food.
21	With our patients, we have found that they respond
22	best when it is easy for them to make healthy
23	choices. We highly recommend that any posters include
24	images of healthy choices and appropriate portions of
25	various types of foods. It is critical that patients

1	COMMITTEE ON HEALTH 163
2	know they don't have to eliminate items from their
3	diet rather they need to manage the portion sizes.
4	I'm also aware that restaurants don't always offer
5	healthy options or substitutions for customers who
6	are trying to control their carb intake but perhaps
7	the pressure of a sign like this bill proposes would
8	motivate restaurants to have more options for those
9	with diabetes or pre-diabetes. This is as simple as
10	offering modifications on the menu like ask for less
11	rice or noodles and more salad. Additionally, the
12	more places a campaign poster like this is seen, the
13	better. The same poster should be available in
14	doctor's offices and health clinics to demonstrate
15	that the medical society is in agreement with the
16	city and we have joined together to combat diabetes.
17	New York City has been a pioneer in so many public
18	health efforts and it's time for us to take the lead
19	in addressing an illness that is running rampant
20	throughout this country. A healthy diet is the least
21	expensive treatment for chronic conditions out there
22	but patients are simply unaware of how to manage
23	their diet to treat their diabetes. We urge the
24	council to recognize how critical it is to work in
25	partnership with existing community organizations

1	COMMITTEE ON HEALTH 164
2	when developing health and nutrition plans such as
3	this. In closing, I strongly encourage the New York
4	City Council to support Intro 1103. Thank you.
5	CHAIRPERSON JOHNSON: Thank you Mrs.
6	Olson, I'm really glad that you're here today on
7	behalf of Community Health Care Network, Catherine
8	Abate was a dear friend of mine, I miss her, she was
9	amazing and Freddy Molano is amazing and Bob Hayes is
10	a great guy so I love the work that CHN does. The
11	real quality health care that you provide New Yorkers
12	all over the city regardless of their ability to pay
13	so I'm really grateful that you came today to give us
14	this expertise on diabetes and I look forward to
15	working together moving forward.
16	MELISSA OLSON: Thank you.
17	CHAIRPERSON JOHNSON: Okay, with that
18	this very fun hearing is now adjourned.
19	[gavel]
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CERTIFICATE

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date

May 29, 2017