



Onondaga County Legislature

CODY M. KELLY

County Legislator – 14th District
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HEALTH & HUMAN SERVICES COMMITTEE AGENDA

Livestream Available: <https://www.facebook.com/OnondagaCountyLegislature>

1:00 p.m.
November 13, 2024

401 Montgomery St., Room 407 Court House
Syracuse, New York 13202

- A. Approval of the minutes of the previous meeting.
- B. Presentation of Resolutions and Local Laws:

1. HEALTH:

- a. Authorizing the County Executive to Enter into Agreements Whereby the Onondaga County Health Department Will Participate in the CNY Epidemiological Alliance

- C. Adjournment

December 3, 2024

Motion Made By Dr. Kelly

RESOLUTION NO. _____

**AUTHORIZING THE COUNTY EXECUTIVE TO ENTER INTO AGREEMENTS WHEREBY THE
ONONDAGA COUNTY HEALTH DEPARTMENT WILL PARTICIPATE IN THE CNY
EPIDEMIOLOGICAL ALLIANCE**

WHEREAS, the “Central New York (CNY) Epidemiological Alliance” is intended to be comprised of the following counties: Cayuga, Cortland, Jefferson, Lewis, Madison, Oswego, Tompkins, and Onondaga, where the Health Departments of such counties each have responsibilities for public health emergency planning and response; and

WHEREAS, some public health problems may require public health services that exceed the capacities of the individual County Health Departments, by entering into an intermunicipal agreement, the participating counties may provide mutual aid to each other during a public health emergency; now, therefore be it

RESOLVED, that, to implement the intent of this resolution, the County Executive is authorized to enter into agreements and execute such other documents as may be reasonably necessary to facilitate continued participation in the CNY Epidemiological Alliance, including agreements with the following counties: Cayuga, Cortland, Jefferson, Lewis, Madison, Oswego, Tompkins, and the New York State Department of Health, where such agreements are to be for a period not to exceed five years and provide a mechanism whereby Onondaga County receives reimbursement for mutual aid services rendered to the other participating counties.



Mutual Aid Agreement – CNY Public Health Alliance

PURPOSE:

Approval for a renewed intermunicipal agreement to provide mutual aid during a public health emergency between the counties of Cayuga, Cortland, Jefferson, Lewis, Madison, Onondaga, Oswego, and Tompkins, known as the Central New York (CNY) Public Health Alliance.

BACKGROUND:

In the event of an unexpected public health event, a county may determine that its health department is unable to provide all of the necessary public health services to respond to the unexpected event. In such an event, a Commissioner/Public Health Director, with the approval of the chief elected official and/or county legislature and/or board of supervisors in that county, may make a request for public health mutual aid to the Commissioner/Public Health Director of one or more of the CNY Public Health Alliance counties. That request, detailing the type and time period for the aid, will be made in writing.

If a request is made to Onondaga County, and if Dr. Anderson believes that we can assist with providing support, she would then seek approval from the County Executive. The County Executive would decide if he authorizes OCHD providing public health mutual aid. Likewise, if Onondaga County seeks public health support from neighboring counties, those Commissioners/Public Health Directors would seek the approval of their respective governing authority to authorize any support.

The current intermunicipal agreement with these same counties runs through January 1, 2025.

BUDGET IMPACTS:

There are no budget impacts as a result of this agreement. In the event that the Onondaga County Health Department provides support or assistance to another CNY Public Health Alliance member, the recipient would reimburse Onondaga County for all salaries, travel, supplies, and any other costs incurred.



INTERMUNICIPAL AGREEMENT

BETWEEN

**COUNTIES OF CAYUGA, CORTLAND, JEFFERSON, LEWIS,
MADISON, ONONDAGA, OSWEGO, AND TOMPKINS**

FOR THE PERIOD OF

January 1, 2025 THROUGH December 31, 2029

AGREEMENT

THIS AGREEMENT, which shall be deemed to be dated as of the date the last party executed this Agreement, by and between the COUNTIES of CAYUGA, CORTLAND, JEFFERSON, LEWIS, MADISON, ONONDAGA, OSWEGO, AND TOMPKINS.

WHEREAS, the COUNTIES of CAYUGA, CORTLAND, JEFFERSON, LEWIS, MADISON, ONONDAGA, OSWEGO, AND TOMPKINS are referred to as the “Central New York (CNY) Public Health Alliance;”

WHEREAS, the County Health Departments of the CNY Public Health Alliance all have responsibilities for public health emergency planning and response;

WHEREAS, some public health problems may require public health services that exceed the capacities of the individual County Health Departments;

WHEREAS, the County Health Departments of the CNY Public Health Alliance are desirous of establishing an intermunicipal agreement to provide mutual aid to each other during a public health emergency;

WHEREAS, the Cayuga County Legislature, by Resolution Number 153-24 adopted on April 23, 2024, authorized the execution of an Intermunicipal Agreement for such services;

WHEREAS, the Cortland County Legislature, by Resolution Number ___ adopted on ___, 2024, authorized the execution of an Intermunicipal Agreement for such services;

WHEREAS, the Jefferson County Board of Legislators, by Resolution Number ___ adopted on ___, 2024, authorized the execution of an Intermunicipal Agreement for such services;

WHEREAS, the Lewis County Board of Legislators, by Resolution Number ___ adopted on ___, 2024, authorized the execution of an Intermunicipal Agreement for such services;

WHEREAS, the Madison County Board of Supervisors, by Resolution Number 24-99 adopted on April 9, 2024, authorized the execution of an Intermunicipal Agreement for such services;

WHEREAS, the Onondaga County Legislature, by Resolution Number ____ adopted on ____, 2024, authorized the execution of an Intermunicipal Agreement for such services;

WHEREAS, the Oswego County Legislature, by Resolution Number 102 adopted on April 11, 2024, authorized the execution of an Intermunicipal Agreement for such services;

WHEREAS, the Tompkins County Legislature, by Resolution Number 2024-136 adopted on July 16, 2024, authorized the execution of an Intermunicipal Agreement for such services;

NOW, THEREFORE, it is mutually covenanted and agreed by and between the parties hereto as follows:

I. SCOPE OF SERVICES

A. In the event of a public health problem, a county may determine that its county health department is unable to provide all of the public health services needed in its county to respond to the problem. In such an event, the Commissioner/Public Health Director, with the approval of the chief elected official and/or county legislature and/or board of supervisors in that county, may make a request for public health mutual aid to the Commissioner/Public Health Director of one or more of the CNY Public Health Alliance counties. The request, detailing the type and time period for the aid, will be made in writing. If the Commissioner/Public Health Director who is being requested to provide assistance feels that the assistance can be provided, the Commissioner/Public Health Director will seek the approval of the chief elected official and/or county legislature and/or board of supervisors of their county. The chief elected official and/or county legislature and/or board of supervisors from the county receiving the request may decide to respond favorably to the request and may authorize the county health department from the sending county to provide public health mutual aid.

B. The county requesting the mutual aid will be referred to as the “receiving county”. The county considering the request or responding to the request will be referred to as the “sending county”.

C. It is expressly understood and agreed by the Parties that the rendering of assistance under the terms of this Agreement shall not be mandatory, but that the sending county may in its discretion refuse to furnish any equipment or personnel consistent with its primary responsibility of providing emergency services within its own jurisdiction. It is the understanding of the Parties that the sending county shall furnish the requested assistance unless the sending county is actively engaged in responding to a public health emergency in its own jurisdiction, and has no equipment or personnel available or the sending county determines that the needs of the receiving county are beyond the capacity of the sending county. When responding to a request the sending county shall do so in a timely and reasonable fashion. In situations where the sending county is unable to furnish the requested assistance, it will notify the receiving county as soon as practicable that assistance will not be rendered.

D. A person or entity that holds a license, certificate, or other permit issued by a sending county evidencing qualification in a professional, mechanical, or other skill shall be deemed to be licensed, certified, or permitted in the jurisdiction of the receiving county for the duration of the emergency public health mutual aid subject to any limitations and conditions the receiving county may prescribe.

E. The staff from the sending county may travel to the receiving county and perform public health services. The staff in the sending county may provide public health services in the receiving county as long as the public health mutual aid is authorized by the chief elected official and/or county legislature and/or board of supervisors of the sending county, and sought by the receiving county. The sending county shall at all times have the right to

withdraw any and all aid provided, however, the sending county shall notify the receiving county of the withdrawal of such aid and the extent of such withdrawal.

F. Public health mutual aid services may include but are not limited to the following: administering points of dispensing clinics, performing patient triage, dispensing or administering medications, performing health services in population shelters, receiving reports of communicable diseases, interviewing contacts of cases of communicable disease, performing health education, supervising patients in isolation or quarantine, assessing environmental problems, collecting environmental samples, or directing environmental remediation activities.

G. The receiving county will identify a staff person who will act as liaison to the sending county and will communicate the requests for specific tasks to be performed as part of the public health mutual aid. The sending county will identify a staff person that will act as liaison to the receiving county and will be responsible for coordination of the staff from the sending county.

H. The staff from the sending county will perform public health mutual aid duties in a professional manner and in accordance with the incident command structure established in the receiving county.

I. While engaged in duty and rendering service in any county, the sending county staff shall have the same powers, duties, rights, benefits, privileges and immunities as if they were performing their duties in the county by which they are normally employed, and, for the purpose of the Workers Compensation law, shall be deemed to be engaged in the course of their employment from the time they report for such duty until they return to the county by which they are normally employed.

J. Reporting and Performance Measurement: The sending county will keep a written record of all expenses associated with the performance of the mutual aid. The record will identify the time spent by the staff from the sending county and supplies, equipment, mileage, etc. utilized by the staff of the sending county in the performance of the mutual aid.

K. Treatment of Non-Resident Patients: Since it benefits the health of the entire population of the counties within the CNY Public Health Alliance, participating counties agree to provide and track medical countermeasures (supplies, medications, vaccines) to residents from outside of their county if obtaining the treatment for such residents within their own county presents a barrier to their obtaining treatment.

L. Sharing of public health related data: Public health related data, both individually identified and population-related, may be shared between Parties for the purpose, and no additional purpose, of preventing, detecting, or responding to a public health event, thus assuring prompt and effective identification of infectious disease and other agents that could affect public health, and to prevent further spread of disease. All parties shall abide by and comply with all rules, regulations, law, or other standards relative to HIPPA.

M. Nothing in this Agreement precludes any Party from entering into supplementary agreements with another Party or affects any other agreements already in force among Parties.

II. TERM OF INTERMUNICIPAL AGREEMENT

A. The term of this Agreement shall be for the period of January 1, 2025 through December 31, 2029.

B. This Agreement shall remain in effect for the period specified above, unless it is terminated by any party hereto, at any time upon sixty (60) days prior written notice sent by registered or certified mail to all of the other

participating County Public Health Directors/Commissioners and the State Commissioner of Health. This notice shall be sent to the respective parties at the addresses set forth below or at such other address as specified in writing by either party. Upon termination of this Agreement, a county shall have no further responsibility to another county or to any other person with respect to those services specified in this Agreement.

CAYUGA COUNTY:

Public Health Director, Cayuga County Health Department, 8 Dill Street, Auburn, NY 13021

CORTLAND COUNTY:

Public Health Director, Cortland County Health Department, 60 Central Avenue, Cortland, NY 13045

JEFFERSON COUNTY:

Public Health Director, Jefferson County Public Health Service, 531 Meade Street, Watertown, NY 13601

LEWIS COUNTY: Public Health Director, Lewis County Public Health, 7785 North State Street, Suite 2, Lowville, NY 13367

MADISON COUNTY:

Director of Public Health, Madison County Department of Health, 138 North Court Street, Building #5, P.O. Box 605, Wampsville, NY 13163

ONONDAGA COUNTY:

Commissioner of Health, Onondaga County Health Department, 421 Montgomery Street, Syracuse, NY 13202

OSWEGO COUNTY:

Public Health Director, Oswego County Health Department, 70 Bunner Street, Oswego, NY 13126

TOMPKINS COUNTY:

Commissioner, Tompkins County Whole Health, 55 Brown Road, Ithaca, NY 14850

III. PAYMENT FOR SERVICES

A. The sending county shall pay the salaries or other compensation to its own employees during the time they are assisting the receiving county. The sending county will also pay to its employees the actual traveling and maintenance expenses while they are rendering such aid and assistance. The receiving county shall reimburse the sending county for any moneys paid for such salaries or other compensation and traveling and maintenance expense. A sending county may assume any such loss, damage, expense or cost, or provide such services to the receiving county without charge or cost.

B. The sending county will submit properly completed and executed claim vouchers setting forth in detail the services provided by the staff of the sending county at the end of the period of the mutual aid. The voucher will be accompanied by a report that will contain the items outlined in Section I.J. Failure to abide by these requirements could result in delay of payment to the sending county or could result in non-payment.

C. Each submitted voucher will be approved by the Public Health Director/Commissioner of the receiving county or his duly designated representative and audited by the Controller, Treasurer, or Auditor of the receiving county. Costs to be reimbursed do not include Workers' Compensation, which shall remain the responsibility of the

sending county.

D. The receiving county may audit records relating to expenses for services provided by the sending county pursuant to this Agreement at any time during this Agreement and through and including twelve (12) months following this Agreement.

E. The sending county shall prepare and make available such statistical and financial service and other records pursuant to regulations promulgated by New York State Department of Health, New York State Education Department, the New York State Office of Emergency Management, or the Federal Emergency Management Office or requested by the receiving county. These records shall be subject at all reasonable times to inspection, review, or audit by the receiving county, the State of New York, and other personnel duly authorized by the receiving county. These records shall be maintained for the period set forth in the State regulations.

IV. AMENDMENTS

This Agreement may be modified or amended only in writing duly executed by all parties. Any modification or amendment shall be attached to and become part of this Agreement. All notices concerning this Agreement shall be delivered in writing to the parties at the principal addresses as set forth above unless either party notifies the other of a change in address.

V. INSURANCE AND INDEMNIFICATION

A. Each county will at its own expense, procure and maintain a policy or policies of insurance during the term of this Agreement. The policy or policies of insurance required are standard Worker's Compensation insurance, and disability insurance, if required by law; professional and general liability insurance (including contractual liability) with single limits of liability in the amount of \$1,000,000 per occurrence, and \$2,000,000 aggregate coverage; automobile liability insurance in the amount of \$1,000,000 with a minimum of \$1,000,000 each occurrence, bodily injury, and property damage. All policies of insurance shall be issued by companies in good financial standing duly and fully qualified and licensed to do business in New York State. Each county shall name the others as additional insureds with respect to this Agreement.

B. In lieu of the insurance, a county described in paragraph A herein may provide proof of equivalent self-insurance adequate to cover the limits described above.

C. Notwithstanding any inconsistent provision of law, general, special, or local, any county receiving public health mutual aid shall be liable and responsible to the sending county for any loss or damage to apparatus, equipment, or supplies and shall bear and pay the expense incurred in the operation and maintenance of any apparatus or equipment and the cost of materials and supplies used or consumed in rendering such aid. With the exception of self-insured counties, each county shall name the others as additional insureds for such property insurance coverage.

D. The sending county whose officers or employees are engaged in rendering such outside aid and assistance pursuant to the receiving county's request shall not be liable or accountable in any way or on account of any act or omission on the part of any officer or employee while so engaged or for or on account of the operation, maintenance or use of any apparatus, equipment, materials, or supplies in connection therewith where such officers or employees are under the direction of the receiving county. The sending county's officers and employees rendering aid in the receiving county pursuant to this intermunicipal agreement shall be considered agents of the receiving county for tort liability and immunity purposes.

E. Except as described in Section D, above, the sending county agrees to defend, indemnify, and save harmless the receiving county, its officers, agents, servants, and employees from and against any and all liability, damages, costs or expenses, causes of action, suits, judgments, losses, and claims of every name not described, including attorneys' fees and disbursements, brought against the receiving county which may arise, be sustained, or occasioned directly or indirectly by any person, firm, or corporation arising out of or resulting from the performance of the services by the sending county, arising from any negligent act or omission of the sending county, its agents and employees, or arising from any breach or default by the sending county under this Agreement.

F. The receiving county agrees to defend, indemnify, and save harmless the sending county, its officers, agents, servants, and employees from and against any and all liability, damages, costs or expenses, causes of action, suits, judgments, losses, and claims of every name not described, including attorneys' fees and disbursements, brought against the sending county which may arise, be sustained, or occasioned directly or indirectly by any person, firm or corporation arising out of or resulting from the performance of the services by the receiving county, arising from any negligent act or omission of the receiving county, its agents and employees, or arising from any breach or default by the receiving county under this Agreement.

VI. INDEPENDENT CONTRACTOR

A. For the purpose of this Agreement, the sending county is and shall in all respects be considered an independent contractor. The sending county its individual members, directors, officers, employees, and agents are not and shall not hold themselves out nor claim to be an officer or employee of the receiving county nor make claim to any rights accruing thereto, including, but not limited to, Worker's Compensation, unemployment benefits, Social Security, or retirement plan membership or credit.

B. The sending county shall have the direct and sole responsibility for the following: payment of wages and other compensation; reimbursement of the sending county's employees' expenses; compliance with Federal, state and local tax withholding requirements pertaining to income taxes, Worker's Compensation, Social Security, unemployment, and other insurance or other statutory withholding requirements, and all obligations imposed on the employer of personnel. The receiving county shall have no responsibility for any of the incidences of employment. The provisions of this section do not supersede the receiving county's obligations under section V.

VII. RIGHT TO INSPECT

Designated representatives of the receiving county and the State Department of Health shall have the right to monitor the provision of services under this Agreement which includes having access at reasonable times and places to the sending county's employees, reports, books, records, audits, and any other material relating to the delivery of such services. The sending county agrees to maintain and retain all pertinent records related to this Agreement for a period of ten (10) years after final payment.

VIII. NON-DISCRIMINATION

All CNY Public Health Alliance counties agree that in carrying out its activities under the terms of the Agreement that they shall not discriminate against any person due to such person's age, marital status, disability, genetic disposition or carrier status, race, color, creed, sexual orientation, sex or national origin, and that at all times it will abide by the applicable provisions of the Human Rights Law of the State of New York as set forth in Sections 290-301 of the Executive Law of the State of New York.

IX. FEDERAL, STATE AND LOCAL LAW AND REGULATIONS COMPLIANCE

A. Notwithstanding any other provision in this Agreement, the sending county remains responsible for ensuring that any service(s) provided pursuant to this Agreement complies with all pertinent provisions of Federal, State and local statutes, rules and regulations.

B. All CNY Public Health Alliance counties agree to abide by and comply with all applicable federal, state, and local laws, rules, regulations, and orders, including but not limited to those provisions relating to confidentiality, fraud, abuse, and anti-kickback laws, and to fully cooperate with the receiving county in this regard, and to execute any amendments necessary for the receiving county and/or sending county to comply with such laws, rules, regulations, orders, and programs.

X. USE OF COMPUTER AND ELECTRONIC EQUIPMENT

All CNY Public Health Alliance counties acknowledge and agree that use of any computer hardware, computer software and/or electronic equipment used in the course of carrying out duties under this Agreement will be governed by all applicable laws, rules, and regulations.

XI. MISCELLANEOUS

All CNY Public Health Alliance counties agree to comply with all confidentiality and access to information requirements in federal, State, and local laws and regulations.

PUBLIC HEALTH MUTUAL AID INTERMUNICIPAL AGREEMENT SIGNATURE PAGE

IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Agreement in duplicate (2 copies) each of which shall be deemed an original on the date written.

COUNTY OF CAYUGA

DATE: _____

BY: _____
Kathleen Cuddy, Public Health Director
Cayuga County Health Department

DATE: _____

BY: _____
_____, Chair
Cayuga County Legislature

Acknowledgement

STATE OF NEW YORK)
COUNTY OF CAYUGA) ss.:

On this _____ day of _____, 2024, before me, the undersigned, a Notary Public in and for said State, personally appeared [insert Chair’s Name], personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

PUBLIC HEALTH MUTUAL AID INTERMUNICIPAL AGREEMENT SIGNATURE PAGE

IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Agreement (8 copies, one for each county) each of which shall be deemed an original on the date written.

COUNTY OF CORTLAND

DATE: _____

BY: _____
Robert Corpora, County Administrator
Cortland County

STATE OF NEW YORK)

COUNTY OF CORTLAND) ss.:

On this _____ day of _____, 2024, before me, the undersigned, a Notary Public in and for said State, personally appeared **Robert Corpora**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

PUBLIC HEALTH MUTUAL AID INTERMUNICIPAL AGREEMENT SIGNATURE PAGE

IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Agreement (8 copies, one for each county) each of which shall be deemed an original on the date written.

COUNTY OF JEFFERSON

DATE: _____

BY: _____

William W. Johnson, Chair
Jefferson County Board of Legislators

STATE OF NEW YORK)

COUNTY OF JEFFERSON) ss.:

On this _____ day of _____, 2024, before me, the undersigned, a Notary Public in and for said State, personally appeared **William W. Johnson**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

PUBLIC HEALTH MUTUAL AID INTERMUNICIPAL AGREEMENT SIGNATURE PAGE

IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Agreement (8 copies, one for each county) each of which shall be deemed an original on the date written.

COUNTY OF LEWIS

DATE: _____

BY: _____
_____, Chair
Lewis County Board of Legislators

STATE OF NEW YORK)

COUNTY OF LEWIS) ss.:

On this _____ day of _____, 2024, before me, the undersigned, a Notary Public in and for said State, personally appeared **[insert Chair’s Name]**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

PUBLIC HEALTH MUTUAL AID INTERMUNICIPAL AGREEMENT SIGNATURE PAGE

IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Agreement (8 copies, one for each county) each of which shall be deemed an original on the date written.

COUNTY OF MADISON

DATE: _____

BY: _____
Joseph J. Pinard, Chair
Madison County Board of Supervisors

STATE OF NEW YORK)

COUNTY OF MADISON) ss.:

On this _____ day of _____, 2024, before me, the undersigned, a Notary Public in and for said State, personally appeared **Joseph J. Pinard**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

PUBLIC HEALTH MUTUAL AID INTERMUNICIPAL AGREEMENT SIGNATURE PAGE

IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Agreement (8 copies, one for each county) each of which shall be deemed an original on the date written.

COUNTY OF ONONDAGA

DATE: _____

BY: _____

Timothy T. Burtis, Chair
Onondaga County Legislature

STATE OF NEW YORK)

COUNTY OF ONONDAGA) ss.:

On this _____ day of _____, 2024, before me, the undersigned, a Notary Public in and for said State, personally appeared **Timothy T. Burtis**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

PUBLIC HEALTH MUTUAL AID INTERMUNICIPAL AGREEMENT SIGNATURE PAGE

IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Agreement (8 copies, one for each county) each of which shall be deemed an original on the date written.

COUNTY OF OSWEGO

DATE: _____

BY: _____
Vera Dunsmoor, Public Health Director
Oswego County Health Department

DATE: _____

BY: _____
James Weatherup, Chair
Oswego County Legislature

STATE OF NEW YORK)

COUNTY OF OSWEGO) ss.:

On this _____ day of _____, 2024, before me, the undersigned, a Notary Public in and for said State, personally appeared **James Weatherup**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

PUBLIC HEALTH MUTUAL AID INTERMUNICIPAL AGREEMENT SIGNATURE PAGE

IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Agreement (8 copies, one for each county) each of which shall be deemed an original on the date written.

COUNTY OF TOMPKINS

DATE: _____

BY: _____
Jessi Schmeiske, Risk & Compliance Administrator
Tompkins County Whole Health

STATE OF NEW YORK)

COUNTY OF TOMPKINS) ss.:

On this _____ day of _____, 2024, before me, the undersigned, a Notary Public in and for said State, personally appeared **Jessi Schmeiske**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public