

#64

COMPLETE

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Page 1: Local Health Department/District Information

Q1

Department Name

CT River Area Health District

Q2**Yes**

Do you have a Board of Health?

Page 2: Board of Health

Q3

Complete the Board of Health information below. Please provide direct contact information for the Chairperson.

| | |
|-----------------|-----------------------------|
| Chairperson | Mike Dunne |
| Address | 455 Boston Post Road |
| Address 2 | Suite 7 |
| City/Town | Old Saybrook |
| State/Province | CT |
| ZIP/Postal Code | 06475 |
| Email Address | crahdboard@crahd.net |
| Phone Number | 860-661-3300 |

Q4**Advisory**

Board Function

Q5

Number of Board Members

7

Page 3: Director of Health and Local Health Department Information

Q6

Director of Health

| | |
|---|------------------------|
| Name | Scott Martinson |
| Degree(s) | BS MS MPH |
| Number of hours in Director of Health's average work week | 70 |

Q7

Please list salary figures as whole dollars per year.

| | |
|-----------------------|---------------|
| Minimum Annual Salary | 90000 |
| Maximum Annual Salary | 120000 |
| Actual Annual Salary | 104000 |

Q8

An Acting Director of Health is defined as an approved individual covering for a Director of Health when he or she is absent, for example, due to a vacation, medical leave, conference, or position vacancy. See Connecticut General Statute Section 19a-200 or 19a-244. Do you have a staff person(s) who is the Acting Director of Health in your absence?

Yes

Q9

If no, how do you assure coverage when the Director of Health is absent?

A Director of Health in a neighboring municipality/health district without a formal MOU/MOA

Q10

Does your department include a Housing Department?

No

Q11

Does your department include a Social Services Department?

No

Q12

Does your department include additional non-public health programs?

No

Q13

Are there any collective bargaining units in your department?

No

Q14 **My department has not decided whether to apply for accreditation**
 Which of the following best describes your department with respect to participation in the Public Health Accreditation Board's national accreditation program?

Q15 **Have not decided on a target year**
 In what calendar year does your department anticipate registering in e-PHAB in order to pursue accreditation?

Page 4: Local Health Personnel

Q16
 Administrative

| | Full Time | Part Time | Contracted | Min. Salary-Hourly | Max. Salary-Hourly |
|--|-----------|-----------|------------|--------------------|--------------------|
| Assistant or Deputy Director of Health | 0 | | | | |
| Environmental Health Supervisor | 1 | | | | |
| Nursing Supervisor | 1 | | | | |
| Office Manager | 1 | | | | |
| Bookkeeper | | | | | |
| Secretary | | | | | |

Q17 **Respondent skipped this question**
 Medical

Q18

Public Health

| | Full Time | Part Time | Contracted | Min. Salary-Hourly | Max. Salary-Hourly |
|--|-----------|-----------|------------|--------------------|--------------------|
| Emergency Preparedness Coordinator | | 1 | | | |
| Environmental Health Inspector (e.g., food, lead, housing) | 3 | | | | |
| Epidemiologist | | | | | |
| Health Educator | | 1 | | | |
| Outreach Worker | | | | | |
| Other Paid Worker (Please describe below) | | | | | |

Q19

How many of your staff have the following licenses and/or certifications?

| | # |
|-------------------------------|----------|
| Dental Hygienist (RHD) | |
| Dentist (DMD/DDS) | |
| Food Inspector | 3 |
| Health Educator (CHES) | |
| Lead Assessor | |
| Lead Inspector | 2 |
| Nurse (RN/APRN) | 2 |
| Pharmacist (RPh) | |
| Phase I SSDS | 4 |
| Phase II SSDS | 3 |
| Physician (MD/DO) | |
| Registered Dietitian (RD) | |
| Registered Sanitarian (RS) | 4 |
| Social Worker (LSW) | |
| Veterinarian (DVM/VMD) | |
| Other (Please describe below) | |

Page 5: Public Health Department Revenue

| | | |
|--------------------------------------|-----------|---------------|
| Q20 | Amount \$ | 188031 |
| DPH funds - all regardless of source | | |
| Q21 | Amount \$ | 0 |
| State funds - other than DPH | | |
| Q22 | Amount \$ | 26000 |
| Federal sources - direct | | |

| | | |
|-----------------------|-----------|---------------|
| Q23 | Amount \$ | 200000 |
| Licensure/Permit fees | | |

| | | |
|---------------------------------|-----------|---------------|
| Q24 | Amount \$ | 456000 |
| Local funds - city/town sources | | |

| | | |
|------------|---|--|
| Q25 | Respondent skipped this question | |
| Medicaid | | |

| | | |
|------------|---|--|
| Q26 | Respondent skipped this question | |
| Medicare | | |

| | | |
|---------------|---|--|
| Q27 | Respondent skipped this question | |
| Other revenue | | |

| | | |
|-----------------------|---|--|
| Q28 | Respondent skipped this question | |
| Patient personal fees | | |

| | | |
|---------------------|---|--|
| Q29 | Respondent skipped this question | |
| Private foundations | | |

| | | |
|--------------------------|---|--|
| Q30 | Respondent skipped this question | |
| Private health insurance | | |

Q31
 What is your total operating budget?
 870000

Page 7: 10 ES - #1 Monitor health status to identify and solve community health problems

| | |
|---|-----------|
| Q32 | No |
| Requirement 1: My department has participated in or conducted a local community health assessment (CHA) within the last five years. | |

Q33 Respondent skipped this question

If yes, does the CHA include? (Select all that apply)

Q34 Respondent skipped this question

If yes, please upload the CHA or provide web link.

Q35 Respondent skipped this question

Web link/URL

Q36 No

Requirement 2: My department shared the findings from the community health assessment with the residents in my jurisdiction and asked for their input.

Q37 Respondent skipped this question

If yes, what methods did you use to seek input from residents? (Select all that apply)

Q38 No

Requirement 3: My department routinely gathers information, collects data and/or conducts community dialogues specific to populations or geographic areas in the community where health inequities and poorer health indicators were identified in the community health assessment.

Q39 Respondent skipped this question

If yes, how is the data provided? (Select all that apply)

Page 8: 10 ES - #1 Monitor health status to identify and solve community health problems

Q40 No

Requirement 1: My department shared the results of the community health assessment with the partners/stakeholders and the public.

Q41 Respondent skipped this question

If yes, how did your department share the results of the CHA? (Select all that apply)

Page 9: 10 ES - #1 Monitor health status to identify and solve community health problems

| | |
|---|---|
| <p>Q42</p> <p>Requirement 1: My department has written processes and/or protocols used to collect surveillance data from multiple sources and to review and analyze the data.</p> | <p>Yes</p> |
| <p>Q43</p> <p>If yes, how are the data collected? (Select all that apply)</p> | <p>Fax, Emails, Electronic data</p> |
| <p>Q44</p> <p>Requirement 2: My department has written processes and/or protocols that (1) specify which surveillance data are confidential and (2) assure the confidential data are maintained and handled in a secure confidential manner.</p> | <p>Yes</p> |
| <p>Q45</p> <p>If yes, please upload the protocol.</p> <p>Conf. Policy.docx (57.2KB)</p> | |
| <p>Q46</p> <p>If no, is the protocol in development?</p> | <p>Respondent skipped this question</p> |
| <p>Q47</p> <p>Requirement 3: My department has a 24/7 contact system or protocol to collect data from those who report data to my department.</p> | <p>Yes</p> |
| <p>Q48</p> <p>If yes, how does your department collect the data 24/7? (Select all that apply)</p> | <p>Email address, Health department's website, Designated contact person or a list of contacts</p> |
| <p>Q49</p> <p>Requirement 4: My department regularly uses the state DPH surveillance systems.</p> | <p>Yes</p> |

Q50

If yes, which surveillance systems do your department use? (Select all that apply)

**CTSITE (childhood lead),
CTEDSS (reportable diseases),
CTWiz (immunizations)**

Q51

How many staff have been trained to use any of the state surveillance systems?

2

Page 10: 10 ES - #1 Monitor health status to identify and solve community health problems

Q52

Requirement 1: My department has been involved in the collection of primary quantitative data in addition to surveillance data.

Yes

Q53

If yes, how has your department collected primary quantitative data? (Select all that apply)

**Surveys of target groups,
Inspection data**

Q54

Requirement 2: My department has been involved in the collection of primary qualitative data.

Yes

Q55

If yes, how your department has been involved in the collection of primary qualitative data? (Select all that apply)

**Focus groups,
Key informant interviews**

Q56

Requirement 3: My department uses standardized data collection instruments to collect quantitative or qualitative data.

Yes

Page 11: 10 ES - #1 Monitor health status to identify and solve community health problems

Q57

Requirement 1: My department analyses various types of data and draws conclusions.

Yes

| | |
|---|--|
| Q58 | Defined timelines, |
| If yes, do the analyses of the data include the following? (Select all that apply) | Comparison of the data to other local agencies, the state or nation |

| | |
|---|------------|
| Q59 | Yes |
| Requirement 2: My department shares data and data analyses. | |

| | |
|---|---|
| Q60 | Internal staff, |
| If yes, with whom does you department share the data and data analyses? (Select all that apply) | Community groups, |
| | Public Health Partners, |
| | Elected officials, |
| | Department of Public Health or other state entities, |
| | Board of Health, |
| | Residents, |
| | Media |

Page 12: 10 ES - #1 Monitor health status to identify and solve community health problems

| | |
|--|------------|
| Q61 | Yes |
| Requirement 1: My department has used data to develop policies, processes, programs or interventions or to revise or expand existing policies, processes, programs or interventions. | |

| | |
|---|--------------------------------------|
| Q62 | Licensing/Permitting Program, |
| If yes, how has the department used data? (Select all that apply) | Health Promotion Programs |

Page 13: 10 ES - #1 Monitor health status to identify and solve community health problems

| | |
|--|------------|
| Q63 | Yes |
| Requirement 1: My department provides summaries or fact sheets of community health data. | |

Q64

If yes, who are the summaries/fact sheets shared with?
(Select all that apply)

- Residents,
- Public health partners,
- Community groups,
- Key stakeholders,
- Other local health departments,
- Elected officials,
- Board of Health,
- Media

Page 14: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community

Q65

Yes

Requirement 1: My department has a written protocol that includes a procedure for conducting investigations of suspected or identified health problems and environmental and occupational public health hazards.

Q66

If yes, for which of the following entities does the protocol delineate the assignment of responsibilities? (Select all that apply)

- Internal staff,
- Contractors/consultants

Page 15: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community

Q67

Yes

Requirement 1: My department conducts reviews or programmatic evaluations (e.g., After Action Report) of investigations to ensure capacity to respond to outbreaks of infectious disease.

Q68

Yes

Requirement 2: My department has a written report or other documentation of a completed investigation of a non-infectious health problem or hazard.

Page 16: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community

Q69

Yes

Requirement 1: My department has a tracking log or audit on investigations that includes reporting lab test results and investigation results.

Q70

If yes, how does your department track investigations?
(Select all that apply)

Tracking log,
Audit,
State surveillance systems (CTEDSS, CTSITE, CTEPHT-
also known as MAVEN)

Page 17: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community

Q71

Requirement 1: My department has written protocols for the containment/mitigation of health problems and hazards.

Yes

Q72

If yes, does the protocol(s) include? (Select all that apply)

Mitigation,
Contact management,
Clinical management,
Use of prophylaxis and emergency biologics,
Communication with the public health laboratory

Page 18: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community

Q73

Requirement 1: My department has an infectious disease outbreak protocols that describe the process for determining when the EOP will be implemented.

No

Q74

If yes, please upload the protocol.

Respondent skipped this question

Q75

If no, is the protocol in development?

Yes

Q76

Requirement 2: My department has protocols that specifically address environmental public health hazards and that describe the process of determining when the EOP will be implemented.

No

Q77

If yes, please upload one protocol.

Respondent skipped this question

Q78 **Yes**

If no, is the protocol in development?

Q79 **No**

Requirement 3: My department has cluster evaluation protocols describing the process for determining when the EOP will be implemented.

Q80 **Respondent skipped this question**

If yes, please upload the protocol.

Q81 **Yes**

If no, is the protocol in development?

Page 19: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community

Q82 **No**

Requirement 1: My department has a written description of how it determines if an event has risen to the level of significance requiring an AAR.

Q83 **No**

If no, is the documentation in development?

Q84 **Respondent skipped this question**

How many drills and exercises did your department conduct or participate in the last fiscal year?

Q85
How many real world public health events did your department respond to in the last fiscal year?

COVID

Q86 **Respondent skipped this question**

How many were significant that required the development of an AAR?

Page 20: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community

Q87

Yes

Requirement 1: My department has policies and procedures outlining how the department maintains 24/7 access to support services in emergencies.

Q88

Respondent skipped this question

If no, are the policies and procedures in development?

Q89

Yes

Requirement 2: My department has a call down list that is used to contact epidemiological and environmental local public health resources.

Q90

If yes,

When was the call down list last tested?

Monthly

What was the response time?

15 min

Q91

No

Requirement 3: My department has a written policy or procedure to assure 24/7 access to laboratory services.

Q92

Respondent skipped this question

If yes, please upload the protocol.

Q93

Yes

If no, is the policy/procedure in development?

Q94

No

Requirement 4: My department has protocols for handling and submitting of specimens.

Q95

Respondent skipped this question

If yes, please upload the protocol.

Q96

Yes

If no, is the policy/procedure in development?

Page 21: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community

Q97

Yes

Requirement 1: My department has a protocol, procedure or policy that identifies support personnel (within or outside the department) who will be called on to provide surge capacity.

Q98

Respondent skipped this question

If no, is the protocol/procedure/policy in development?

Q99

Yes

Requirement 2: My department has staffing lists for surge capacity which includes both the staffing needed for a surge response and how staff will fill those needs.

Q100

Email,

If yes, how are staff notified if they are needed for surge capacity? (Select all that apply)

Text

Q101

Yes

Requirement 3: My department has a document detailing the availability of equipment (transportation, field communications, personal protective equipment (PPE), etc.) to support a surge.

Q102

Yes

If no, is the document in development?

Q103

Yes

Requirement 4: My department has a schedule for training or exercises to prepare personnel who will serve in surge capacity (e.g., ICS or PPE).

Q104

Respondent skipped this question

If no, is the schedule in development?

| | |
|--|---|
| <p>Q105</p> <p>Requirement 5: My department has a list and description of contracts, MOAs/MOUs, and/or mutual assistance agreements providing addition staff and services, including laboratory services, for surge capacity.</p> | <p>Yes</p> |
| <p>Page 22: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community</p> | |
| <p>Q106</p> <p>Requirement 1: My department has a communication protocol to contact staff, health care providers, response partners, the media and others, 24/7.</p> | <p>No</p> |
| <p>Q107</p> <p>If yes, please upload the protocol.</p> | <p>Respondent skipped this question</p> |
| <p>Q108</p> <p>If no, is the protocol in development?</p> | <p>Yes</p> |
| <p>Q109</p> <p>Requirement 2: My department provides information to partners and the public about how to contact the health department to report a public health emergency, risk, problem, or environmental or occupational public health hazard.</p> | <p>Yes</p> |
| <p>Q110</p> <p>If yes, how does your department inform partners and the public? (Select all that apply)</p> | <p>Web page, Press release/media, Distribution of printed materials (brochures, flyers, factsheets)</p> |
| <p>Q111</p> <p>Requirement 3: My department's partners and the public can contact the health department 24/7.</p> | <p>Yes</p> |
| <p>Q112</p> <p>If yes, how does the public and partners contact your department 24/7? (Select all that apply)</p> | <p>Police dispatch, 24/7 phone number</p> |

Q113 **Yes**

Requirement 4: My department has established or participates in a Health Alert Network (HAN) or similar system that receives and issues alerts 24/7.

Q114
If yes, how often does your department test the system?

Monthly

Q115 **Yes**

Requirement 5: My department provides information to the public and uses the media to communicate information to the public during a public health emergency.

Q116 **Web page,**
Distribution of printed materials (brochures, flyers, factsheets)
,
Press release

If yes, how does your department provide information and use the media to communicate information to the public? (Select all that apply)

Page 23: 10 ES - #3 Inform, educate, and empower people about health issues

Q117 **Yes**

Requirement 1: My department has provided information to the public on health risks, health behaviors, disease prevention, or wellness.

Q118 **Press release,**
Media communications,
Brochure

If yes, how has your department provided information to the public? (Select all that apply)

Q119 **Yes**

Requirement 2: My department has developed and implemented or sustained population based health promotion strategies.

Q120 **Immunizations,**
Radon test kits

If yes, what types of health promotion strategies were developed and implemented or sustained? (Select all that apply)

Page 24: 10 ES - #3 Inform, educate, and empower people about health issues

Q121 **No**

Requirement 1: My department has assessed health inequity across the jurisdiction within the last five years.

Q122 **Respondent skipped this question**

If yes, does the assessment include? (Select all that apply)

Page 25: 10 ES - #3 Inform, educate, and empower people about health issues

Q123 **Yes**

Requirement 1: My department has a policy, plan or strategy for branding.

Q124 **Ensure that staff have a clear understanding and commitment to the brand of the department**

If yes, does the branding policy, plan or strategy? (Select all that apply)

,
Communicate the department's brand in a variety of ways to different stakeholders (public, Board of Health, elected officials, policy makers, the media)

Q125 **Respondent skipped this question**

If no, is the policy, plan or strategy in development?

Page 26: 10 ES - #3 Inform, educate, and empower people about health issues

Q126 **No**

Requirement 1: My department has external communication procedures or protocols.

Q127 **Respondent skipped this question**

If yes, does the external communication procedures or protocols include? (Select all that apply)

Q128 **Respondent skipped this question**

If yes, please upload the procedure or protocol.

Q129 **Yes**

If no, is the protocol in development?

Page 27: 10 ES - #3 Inform, educate, and empower people about health issues

Q130 **No**

Requirement 1: My department has a risk communication plan, protocol or procedure.

Q131 **Respondent skipped this question**

If yes, does the risk communication plan, protocol or procedures? (Select all that apply)

Q132 **Respondent skipped this question**

If yes, please upload the plan, protocol or procedure.

Q133 **Yes**

If no, is the plan, protocol or procedure in development?

Page 28: 10 ES - #3 Inform, educate, and empower people about health issues

Q134 **Yes**

Requirement 1: My department maintains a website or web page to inform the public about public health issues.

Q135 **Health data,
Links to public health-related news,
Information and materials from program activities,
Links to CDC and other public health-related federal, state, or local agencies, as appropriate
,
The names of the Director of Health and leadership team**

If yes, my department's website or web page has the following information: (Select all that apply)

Page 29: 10 ES - #3 Inform, educate, and empower people about health issues

Q136 **Yes**

Requirement 1: My department has demographic data defining ethnic distribution and languages in the jurisdiction.

Q137 **Yes**
 Requirement 2: My department has access to staff or contractors who provide interpretation, translation or specific communication services.

Q138 **Translation services/contractors**
 If yes, how does your department provide interpretation, translation or specific communication services? (Select all that apply)

Page 30: 10 ES - #4 Mobilize community partnerships and action to identify and solve health problems

Q139 **Yes**
 Requirement 1: My department has been an active member of a community partnership(s) or coalition(s) to improve the health of the community.

Q140 **School systems,
Hospitals/Community Health Centers,
Social service organizations,
Local government agencies,
Not-for-profit organizations,
Faith institutions,
Community members,
Youth organizations**
 If yes, what sectors of the community do the members of the partnership(s) or coalitions(s) represent? (Select all that apply)

Q141 **Chronic disease prevention,
Parks and recreation**
 If yes, which health issue(s) are being addressed in the community partnership(s) or coalition(s)? (Select all that apply)

Q142 **No**
 Requirement 2: My department has made a change in a policy or created or revised a program that was implemented through the work of the partnership(s) or coalitions(s).

Q143 **Respondent skipped this question**
 If yes, what policy change or revision was implemented? (Select all that apply)

Page 31: 10 ES - #4 Mobilize community partnerships and action to identify and solve health problems

| | |
|--|---|
| Q144 | Yes |
| Requirement 1: My department engages with the community as a whole or with specific populations that will be affected by a policy or strategy. | |
| Q145 | Senior Citizens, School-age groups, Parent/Teacher groups, Service providers, i.e., tattoo artists, salon owners, nail technicians, massage therapists, food establishment owners and workers , Advisory groups |
| If yes, which sectors of the community has your department engaged? (Select all that apply) | |

| | |
|---|---|
| Q146 | Yes |
| Requirement 2: My department communicates and collaborates with the governing entity, advisory board and/or elected officials concerning public health policy or strategy at least quarterly. | |
| Q147 | Meetings, Reports, Fact sheets, Emails |
| If yes, how does your department communicate and collaborate? (Select all that apply) | |

Page 32: 10 ES - #5 Develop policies and plans that support individual and community health efforts

| | |
|--|--|
| Q148 | Yes |
| Requirement 1: My department monitors and tracks the public issues being discussed by my department's governing entity, elected officials, individuals and/or other entities that set policies and practices that impact the health department or public health. | |
| Q149 | Meeting agendas and minutes, Newsletters, Professional organizations (CADH, CEHA) |
| If yes, how is your department monitoring and tracking issues? (Select all that apply) | |

Page 33: 10 ES - #5 Develop policies and plans that support individual and community health efforts

Q150 **Yes**

Requirement 1: My department has contributed to the formal discussions concerning public policy and practice and its impact on public health.

Q151 **Fact sheets,**
Participation in an advisory or work group

If yes, how has your department contributed to the discussions? (Select all that apply)

Page 34: 10 ES - #5 Develop policies and plans that support individual and community health efforts

Q152 **Yes**

Requirement 1: My department has informed policy makers and/or the public about potential health impacts of policies that are being considered or in place.

Q153 **Distribution of emails, briefing statements or reports on policy impacts**
,
Meetings/discussions of policy issues and impacts

If yes, how has your department informed policy makers and/or the public? (Select all that apply)

Page 35: 10 ES - #5 Develop policies and plans that support individual and community health efforts

Q154 **No**

Requirement 1: My department has a community health improvement plan (CHIP) dated within the last five years.

Q155 **Respondent skipped this question**

If yes, does the CHIP include the following? (Select all that apply)

Q156 **Respondent skipped this question**

If yes, please attach the CHIP or provide the web link.

Q157 **Respondent skipped this question**

Web link/URL

Q158 **My department is in process of developing a CHIP**

If no, where is your department in the process? (Select one)

Page 36: 10 ES - #5 Develop policies and plans that support individual and community health efforts

Q159 **Respondent skipped this question**

Requirement 1: My department has a tracking process to document actions taken toward the implementation of the CHIP.

Q160 **Respondent skipped this question**

Requirement 2: My department and/or my partners have implemented some areas of the CHIP.

Q161 **Respondent skipped this question**

If yes, what area has been implemented and by whom? (Provide one example)

Page 37: 10 ES - #5 Develop policies and plans that support individual and community health efforts

Q162 **No**

Requirement 1: My department has a strategic plan dated within the last five years.

Q163 **Respondent skipped this question**

If yes, does the plan include? (Select all that apply)

Q164 **My department is in process of developing a strategic plan**

If no, where is your department in the process? (Select one)

Page 38: 10 ES - #5 Develop policies and plans that support individual and community health efforts

Q165 **Respondent skipped this question**

Requirement 1: Since the strategic plan's adoption, my department has reviewed the plan and has monitored and assessed progress towards reaching the goals and objectives.

Page 39: 10 ES - #5 Develop policies and plans that support individual and community health efforts

Q166 **Yes**

Requirement 1: My department participates in preparedness meetings with other government agencies, local health departments and health care providers.

Q167 **Yes**

Requirement 2: My department has conducted drills or exercises or responded to real events that tested components of the All Hazards EOP within the last five years.

Q168 **No**

If yes, did your department develop an AAR after the emergency or drill/exercise?

Q169 **No**

Requirement 3: As a result of an exercise, drill or real event, my department has revised the All Hazards EOP.

Page 40: 10 ES - #5 Develop policies and plans that support individual and community health efforts

Q170 **Yes**

Requirement 1: My department has a public health emergency response plan that is dated within the last five years.

Q171

If yes, does your department's public health EOP include?
(Select all that apply)

- The health department staff responsible for coordinating a response**
- The roles and responsibilities of the health department and its partners**
- A health department communication network that addresses communication with other members of emergency networks or organizations that are also responders; or an emergency communication plan.**
- How the health department will manage continuity of operations during an emergency**

Q172 **Yes**

Requirement 2: Within the last five years, my department has tested the public health EOP through drills and exercises.

Q173 **No**

If yes, did your department complete an AAR the drills or exercises?

Q174 **No**

Requirement 3: My department has revised the public health EOP based on AARs.

Page 41: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

Q175 **Yes**

Requirement 1: My department reviews regulations, statutes, and ordinances for their public health implications.

Q176 **Consider evidence-based practices, promising practices**

If yes, when reviewing laws, does your department?
(Select all that apply)

- '
 - Consider the impact on health equity,**
 - Use model public health laws, checklists, templates or some other standard outline or guide**
 - '
 - Solicit input from key partners and stake holders,**
 - Collaborate with other municipal departments, Tribes, state health department**
-

Q177 **Yes**

Requirement 2: My department has access to legal counsel as needed.

Page 42: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

Q178 **Yes**

Requirement 1: My department provides advice and recommendations to the governing entity and/or elected officials on the public health impact of new laws and changes to current laws.

Q179

If yes, how does your department provide advice and recommendations? (Select all that apply)

**Fact sheets,
Presentations,
Meetings**

Page 43: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

Q180

Requirement 1: My department's staff have been trained in laws related to their job responsibilities within the past two years.

Yes

Q181

If yes, on which laws have staff received training? (Select all that apply)

**Food,
Lead,
Infectious disease (e.g., TB, STD, immunizations),
Subsurface sewage disposal systems,
Surveillance/outbreak investigations**

Q182

Requirement 2: My department ensures consistent application of public health laws.

Yes

Q183

If yes, how does your department ensure the consistent application of public health laws? (Select all that apply)

Enforcement documents or logs

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Q184

Requirement 1: My department has information concerning public health related laws available to the public.

Yes

Q185

If yes, how is your department providing information concerning public health related laws? (Select all that apply)

**Website,
Flyers/Brochures,
Email or fax,
Phone conversations**

Q186

Yes

Requirement 2: My department has information about permit/license applications available to the public.

Q187

Website,

If yes, how is your department providing information about permit/license applications? (Select all that apply)

Email or fax

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Q188

Yes

Requirement 1: My department provides information or education to regulated individuals or entities about their responsibilities related to public health laws.

Q189

Website,

If yes, how is your department providing information or education to regulated individuals or entities? (Select all that apply)

Flyers/Brochures,

Information/training session,

Email or fax,

Phone conversations

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Q190

Yes

Requirement 1: My department has local ordinances/regulations for conducting enforcement actions.

Q191

Hair Salon,

If yes, what types of ordinances/regulations? (Select all that apply)

Nail Salon,

Public Pool

Q192

Please provide a link to where these ordinances can be found:

www.crahd.info

Q193 **No**

Requirement 2: My department has a written procedure or protocol (e.g. decision tree) for enforcement program areas.

Q194 **Respondent skipped this question**

If yes, please upload the protocol.

Q195 **No**

If no, is the protocol in development?

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Q196 **Yes**

Requirement 1: My department maintains a database or log of inspection reports with action taken, current status, follow-up, return inspections, and final results/closure.

Q197 **Infectious disease (CTEDSS - MAVEN),
Spreadsheet,
Childhood Lead (CTSIT - MAVEN)**

If yes, what is/are the database(s) or log(s)? (Select all that apply)

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Q198 **Yes**

Requirement 1: My department has a database or log of actions related to investigations and complaints.

Q199 **Meetings,
Legal orders**

If yes, does the database or log document? (Select all that apply)

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Q200 **Yes**

Requirement 1: My department analyzes the information in the database or log of investigations and complaints.

| | |
|--|--|
| Q201 | Statutory requirements, |
| If yes, does your department analyze the data for? (Select all that apply) | Patterns and trends, |
| | Performance improvement for the enforcement program |
| | , |
| | Development of a summary annual report |

| | |
|-------------|------------|
| Q202 | Yes |
|-------------|------------|

Requirement 2: My department conducts debriefings or other methods to evaluate what worked well, to identify problems and recommends changes in the investigation/response procedure to the enforcement protocols or procedures.

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| | |
|-------------|------------|
| Q203 | Yes |
|-------------|------------|

Requirement 1: My department has a protocol for notifying other agencies and the public of enforcement activities.

| | |
|--|--------------------------------------|
| Q204 | Minutes from public meetings, |
| If yes, how does your department notify other agencies and the public of enforcement activities? (Select all that apply) | Emails, |
| | Reports |

| | |
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| Q205 | Respondent skipped this question |
|-------------|---|

If no, is the protocol in development?

Page 51: 10 ES - #7 Link people to needed personal health services and assure the provision of health care

| | |
|-------------|------------|
| Q206 | Yes |
|-------------|------------|

Requirement 1: My department participates in a collaborative process to assess the availability of health care services to the population.

Q207 If yes, with whom does your department collaborate to assess the availability of health care services? (Select all that apply)

Health care providers,
Social service organizations,
Private sector employers,
Community based organizations,
Local Coalitions,
Specific populations who may lack health care and/ or experience barriers to service (e.g., disabled, non-English speaking)

Q208 If yes, do you maintain documentation (agendas, minutes, rosters) of the collaborative process/meetings?

No

Q209 Requirement 2: My department shares public health data for assessment and planning purposes.

Yes

Q210 If yes, how does your department share the data? (Select all that apply)

Reports,
Emails

Q211 Requirement 3: My department assesses emerging issues that may impact access to care.

Yes

Q212 If yes, please provide an example of an emerging issue.

COVID

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Q213 Requirement 1: My department has a process for identifying populations who lack access to health care.

Yes

Q214 If yes, how are the populations identified? (Select all that apply)

Community groups,
Public Health Partners

Q215

Yes

Requirement 2: My department has a report or has developed a report that identifies populations who experience barriers to health care services.

Q216

Special health needs

If yes, in the report, are the populations who experience barriers identified by the following? (Select all that apply)

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Q217

Yes

Requirement 1: My department has a process used to identify gaps in health care services and barriers to health care services.

Q218

**Community Health Assessment,
Studies of groups or populations**

If yes, how are the gaps in health care services and barriers to care identified? (Select all that apply)

Q219

Yes

Requirement 2: My department has a report or developed a report of analysis of data from various sources that identify and describe gaps in access to health care services and barriers to health care services in my jurisdiction.

Q220

Assessment of capacity and distribution of health care providers

If yes, does the report include? (Select all that apply)

,
Assessment of the availability of health care services, for example, clinical preventive services, EMS, emergency departments, urgent care, occupational medicine, ambulatory care (primary and specialty), inpatient care, chronic disease care (e.g., diabetic care, HIV health services), dental, and other health care services.

,
Assessment of cause(s) for lack of access to services and barriers to access to care

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| | |
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| <p>Q221</p> <p>Requirement 1: My department participates in a collaborative process for developing strategies to improve access to health care.</p> | <p>Yes</p> |
| <hr/> | |
| <p>Q222</p> <p>If yes, what strategies has the coalition developed to improve access to health care services and reduce barriers to care? (Select all that apply)</p> | <p>Linking individuals with needed and convenient services</p> <p>,</p> <p>Establishing systems of care in partnership with other members of the community</p> <p>,</p> <p>Addressing transportation barriers,</p> <p>Addressing clinic hours</p> |

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| | |
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| <p>Q223</p> <p>Requirement 1: My department has collaboratively implemented strategies to improve access to health care services for those who experience barriers.</p> | <p>Yes</p> |
| <hr/> | |
| <p>Q224</p> <p>If yes, what strategies have been implemented to improve access to health care services? (Select all that apply)</p> | <p>Coordination of service programs to optimize access (e.g., WIC, immunizations, and lead testing)</p> <p>,</p> <p>Cooperative system of referrals between partners that shows the methods used to link individuals with needed health care services</p> <p>,</p> <p>Case management</p> |

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| | |
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| <p>Q225</p> <p>Requirement 1: My department has initiatives to ensure that access and barriers are addressed in a culturally competent manner and take into account cultural, language and low literacy barriers.</p> | <p>Yes</p> |
| <hr/> | |
| <p>Q226</p> <p>If yes, what are some of the initiatives? (Select all that apply)</p> | <p>Collaboration with other municipal departments (e.g., schools, social services)</p> |

Page 57: 10 ES - #8 Assure competent public and personal health care workforce

| | |
|--|---|
| Q227 | Yes |
| Requirement 1: My department actively promotes public health as a career choice. | |
| Q228 | Collaboration with a school or college of public health to host interns/volunteers |
| If yes, how? (Select all that apply) | |

Page 58: 10 ES - #8 Assure competent public and personal health care workforce

| | |
|--|--|
| Q229 | Yes |
| Requirement 1: My department has a workforce development plan. | |
| Q230 | Address the collective capacity and capability of the department workforce |
| If yes, does the workforce development plan? (Select all that apply) | , Address gaps in capacity and capabilities and include strategies to address them , Acknowledge the changing environment and include consideration of areas where the technology advances quickly, such as information management and (digital) communication science , Acknowledge the changing environment and include considerations of areas where the field is advancing; for example, emergency preparedness training, health equity, and cultural competence , Include an assessment of current staff competencies against the adopted core competencies , Include training schedules and a description of the material or topics to be addressed in the training curricula to address gaps in staff competencies , Include a description of barriers/inhibitors to the achievement of closing gaps or addressing future needs in capacity and capabilities and strategies to address those barriers/inhibitors |

Q231

Respondent skipped this question

If no, is the plan in development?

Q232

Yes

Requirement 2: My department has implemented its workforce development strategies.

Q233

Completed assessment of current staff competencies

If yes, what workforce development strategies have been implemented? (Select all that apply)

Page 59: 10 ES - #8 Assure competent public and personal health care workforce

Q234

Yes

Requirement 1: My department ensures a competent workforce.

Q235

Documented process for recruitment of qualified staff,

If yes, how does your department ensure a competent workforce? (Select all that apply)

Policies for recruitment of individuals who reflect the demographics of the population served

,

Staff retention activities (e.g., employee satisfaction survey results, needs assessments of work environment, reward and recognition programs, career ladders, promotion opportunities, and supervisor mentoring programs)

,

Protocol/process to verify staff qualifications,

Documents that the qualifications have been verified for all staff hired in the past 2 years

Page 60: 10 ES - #8 Assure competent public and personal health care workforce

Q236

Yes

Requirement 1: My department documents staff's completion of their professional development activities.

Q237
 If yes, what types of professional development activities? (Select all that apply)

Continuing education for certifications/licenses,
 Training opportunities (e.g., HIPAA, emergency response, methods for the presentation of data, health equity, and communications)
 ,
 Mentoring,
 Job shadowing,
 Learning by teaching,
 Tuition reimbursement/time-off for classes

Q238
 Requirement 2: My department provides leadership and/or management development training programs.

Yes

Q239
 If yes, what type of leadership and/or management development training programs? (Select all that apply)

Meetings and conferences

Q240
 Requirement 3: My department provides an environment in which employees are supported in their jobs.

Yes

Q241
 If yes, how does your department provide a supportive environment? (Select all that apply)

Supporting staff's regulatory work, which can be met with resistance
 ,
 Seeking staff input on professional development goals,
 Providing professional development opportunities,
 Providing tuition reimbursement,
 Maintaining institutional memory, the transfer of knowledge, succession planning
 ,
 Encouraging systems thinking, change management, data use for decisions, and a culture of quality improvement
 ,
 Providing collaborative learning opportunities (e.g., participation on boards, committees, and task forces in community, collaborative planning sessions, shared reviews of program evaluations, etc.)

| | |
|--|--|
| <p>Q242</p> <p>Requirement 1: My department has adopted a performance management system with input from staff and leadership.</p> | <p>Yes</p> |
| <p>Q243</p> <p>If yes, does the performance management system include? (Select all that apply)</p> | <p>Performance standards, including goals, targets and indicators, and the communication of expectations</p> <p>,</p> <p>Performance measurement including data systems and collection</p> <p>,</p> <p>Progress reporting including analysis of data, communication of analysis results, and a regular reporting cycle</p> <p>,</p> <p>A process to use data analysis and manage change for quality improvement and towards creating a learning organization</p> |

| | |
|---|---|
| <p>Q244</p> <p>If no, is the department in the process of adopting a system?</p> | <p>Respondent skipped this question</p> |
|---|---|

Page 62: 10 ES -#9 Evaluate effectiveness, accessibility, and quality of personal and population-based health

| | |
|--|---|
| <p>Q245</p> <p>Requirement 1: My department has a committee or team that is responsible for implementing the performance management system.</p> | <p>Yes</p> |
| <p>Q246</p> <p>If yes, does the committee or team? (Select all that apply)</p> | <p>Set goals and objectives with identified timeframes,</p> <p>Monitor performance to meet the goals and objectives and timeframes</p> <p>,</p> <p>Document performance to meet the goals and objectives and timeframes</p> <p>,</p> <p>Document performance results, opportunities for improvement and next steps</p> <p>,</p> <p>Develop and complete a performance management self-assessment</p> |

Q247

If yes, for which area(s) has the performance management system been implemented? (Select all that apply)

Licensing/permitting program,
 Human resources functions,
 Staff professional development (i.e., career related skills)
 ,
 Workforce development (i.e., job related skills)

Page 63: 10 ES -#9 Evaluate effectiveness, accessibility, and quality of personal and population-based health

Q248

Requirement 1: My department collects, analyzes, and draws conclusions from feedback from different customer groups.

Yes

Q249

If yes, what groups have you surveyed? (Select all that apply)

Governing entities,
 Food establishment owners,
 Clients of programs,
 Patients services

Q250

Requirement 2: My department has implemented changes/improvements based on the customer feedback.

No

Q251

If yes, what is one (1) change that your department has implemented?

Respondent skipped this question

Page 64: 10 ES -#9 Evaluate effectiveness, accessibility, and quality of personal and population-based health

Q252

Requirement 1: My department provides staff development in performance management.

Yes

Q253

If yes, how does your department provide staff development in performance management? (Select all that apply)

Trainings/presentations,
 Training materials

Page 65: 10 ES - #9 Evaluate effectiveness, accessibility, and quality of personal and population-based health

Q254

Yes

Requirement 1: My department has a written quality improvement (QI) plan that is dated within five years.

Q255

If yes, does the QI plan address the following? (Select all that apply)

- Quality improvement terms to create a common vocabulary and a clear, consistent message
- ,
- Culture of quality and the desired future state of quality in the organization
- ,
- Key elements of the quality improvement effort's structure (e.g., organization structure, roles and responsibilities, staffing, budget and resource allocation)
- ,
- Types of quality improvement training available and conducted within the organization
- ,
- Project identification, alignment with strategic plan and initiation process
- ,
- Quality improvement goals, objectives, and measures with time-framed targets
- ,
- The department's approach to how the quality improvement plan is monitored: data are collected and analyzed, progress reported toward achieving stated goals and objectives, and actions taken to make improvements based on progress reports and ongoing data monitoring and analysis
- ,
- Regular communication of quality improvement activities conducted in the organization
- ,
- Process to assess the effectiveness of the quality improvement plan and activities

Q256

Respondent skipped this question

If no, where is your department in the process? (Select one)

| | |
|--|---|
| Q257 | Yes |
| Requirement 1: My department has documentation of implemented quality improvement activities based on the QI plan. | |
| <hr/> | |
| Q258 | How staff problem-solved and planned the improvement |
| If yes, did the documented QI activities include the following? (Select all that apply) | , |
| | How staff selected the problem/process to address and described the improvement opportunity |
| | , |
| | How staff described the current process surrounding the identified improvement opportunity |
| | , |
| | How staff determined all possible causes of the problem and agreed on contributing factors and root cause(s) |
| | , |
| | How staff developed a solution and action plan, including time-framed targets for improvement |
| | , |
| | What the staff did to implement the solution or process change |
| | , |
| | How staff reviewed and evaluated the result of the change, and how they reflected and acted on what they learned |

Page 67: 10 ES - #10 Research for new insights and innovative solutions to health problems

| | |
|--|---|
| Q259 | No |
| Requirement 1: My department has incorporated an evidence based or promising practice in a process, program or intervention. | |
| <hr/> | |
| Q260 | Respondent skipped this question |
| If yes, what is/are the source(s) of the evidence-based or promising practice? (Select all that apply) | |
| <hr/> | |
| Q261 | Respondent skipped this question |
| If yes, please upload or describe one promising practice implemented. | |

Q262

Respondent skipped this question

Promising practice description

Page 68: 10 ES - #10 Research for new insights and innovative solutions to health problems

Q263

Yes

Requirement 1: My department has communicated research findings and their public health implications to stakeholders, other health departments, other organizations, and/or the public.

Q264

Respondent skipped this question

If yes, describe the research.

Q265

If yes, with whom did your department communicate the research findings? (Select all that apply)

- Governing entity,
 - Elected/appointed officials,
 - Local agencies/departments,
 - State agencies/departments,
 - Community organizations,
 - Regulated/licensed entities (food service establishments, salons, etc.)
 - ,
 - General public
-

Page 69: 10 Essential Services Certification

Q266

Yes

The Director of Health ensures that the provisions of a basic health program, as per CGS Section 19a-207a, are being provided to the community and that the information included in this report is accurate and true to the best of his/her knowledge.
