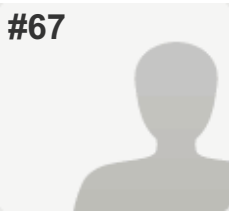


#67

**COMPLETE****Collector:** Web Link - Manual Entry 1 (Web Link)**Started:** Wednesday, November 02, 2016 10:12:37 AM**Last Modified:** Wednesday, November 02, 2016 11:32:30 AM**Time Spent:** 01:19:52**IP Address:** 67.218.90.210

PAGE 1

Q1: 1. Department Name	New Fairfield Health Department
Q2: 2. Do you have a Board of Health?	No
Q3: Please complete this section if you have a Board of Commission of Health	<i>Respondent skipped this question</i>
Q4: Board Function	<i>Respondent skipped this question</i>
Q5: Number of Board Members	<i>Respondent skipped this question</i>

PAGE 2: Local Health Personnel (ES 8)

Q6: 1. Director of Health (ES 8)	
Director of Health Name	Timothy R. Simpkins
Degree(s)	B.S. and M.A.
Active CT License(s)	R.S.
Number of hours in Director of Health's average work week	35
Q7: Please list salary figures as whole dollars per year (DO NOT USE COMMAS, DOLLAR SIGNS (\$) OR DECIMALS)	
Minimum Salary	900000
Maximum Salary	950000
Actual Annual Salary	95000
Q8: An Acting Director of Health is defined as an individual who "acts;" or stands in for the appointed Director of Health when he/she is absent (vacation, conference, medical leave, etc.). In order to be an Acting Director of Health, the individual must meet the qualifications for Director of Health as per CGS 19a-200 or 19a-244 and be approved by the Commissioner of Public Health. The Acting Director of Health may be a staff person or a current Director of Health of another municipality or health district.2. Do you have a staff person(s) that has been approved by the Commissioner of Public Health to be the Acting Director of Health in your absence?	No

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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 through a formal MOU/MOA.
Q10: 3. Does your department include a Housing Department?	No
Q11: 4. Does your department include a Social Services Department?	No
Q12: 5. Does your department include additional non-public health programs?	No
Q13: 6. Are there any collective bargaining units in your department?	Yes
Q14: 7. Has your department developed a community health assessment? (ES 1)	No, but plan to next year
Q15: 8. Has your department developed a community health improvement plan? (ES 5)	No, but plan to next year
Q16: 9. Has/Is your department collaborating with a hospital or hospital system to develop a community health assessment and/or community health improvement plan? (ES 4)	Yes
Q17: 10. Has your department developed a strategic plan? (ES 5)	No, but plan to next year
Q18: 11. Which of the following best describes your department with respect to participation in the Public Health Accreditation Board's national accreditation program?	My department has not decided whether to apply for accreditation (if selected skip question 11)
Q19: 12. In what calendar year does your department anticipate registering in e-PHAB in order to pursue accreditation?	<i>Respondent skipped this question</i>

PAGE 3: Local Health Personnel (ES 8)

Q20: 1. Assistant Deputy Director of Health	N/A
Q21: Assistant or Deputy Director of Health	<i>Respondent skipped this question</i>
Q22: 2. Behavioral Health Professional	N/A
Q23: Behavioral Health Professional	<i>Respondent skipped this question</i>
Q24: 3. Bookkeeper	N/A
Q25: Bookkeeper	<i>Respondent skipped this question</i>

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Q26: 4. Chief Sanitarian	N/A
Q27: Chief Sanitarian	<i>Respondent skipped this question</i>
Q28: 5. Community Health Outreach Worker	N/A
Q29: Community Health Outreach Worker	<i>Respondent skipped this question</i>
Q30: 6. Dental Hygienist	N/A
Q31: Dental Hygienist	<i>Respondent skipped this question</i>
Q32: 7. Dentist	N/A
Q33: Dentist	<i>Respondent skipped this question</i>
Q34: 8. Director of Nursing	N/A
Q35: Director of Nursing	<i>Respondent skipped this question</i>
Q36: 9. Emergency Preparedness Coordinator	N/A
Q37: Emergency Preparedness Coordinator	<i>Respondent skipped this question</i>
Q38: 10. Environmental Health Director	N/A
Q39: Environmental Health Director	<i>Respondent skipped this question</i>
Q40: 11. Epidemiologist	N/A
Q41: Epidemiologist	<i>Respondent skipped this question</i>
Q42: 12. Health Educator	N/A
Q43: Health Educator	<i>Respondent skipped this question</i>
Q44: 13. Housing Inspector	N/A
Q45: Housing Inspector	<i>Respondent skipped this question</i>
Q46: 14. Lab Technician	N/A
Q47: Lab Technician	<i>Respondent skipped this question</i>
Q48: 15. Medical Advisor	N/A

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Q49: Medical Advisor	<i>Respondent skipped this question</i>
Q50: 16. Nurse Practitioner	N/A
Q51: Nurse Practitioner	<i>Respondent skipped this question</i>
Q52: 17. Nursing Supervisor	N/A
Q53: Nursing Supervisor	<i>Respondent skipped this question</i>
Q54: 18. Nutritionist	N/A
Q55: Nutritionist	<i>Respondent skipped this question</i>
Q56: 19. Office Manager	N/A
Q57: Office Manager	<i>Respondent skipped this question</i>
Q58: 20. Other RN	N/A
Q59: Other RN	<i>Respondent skipped this question</i>
Q60: 21. Outreach Worker	N/A
Q61: Outreach Worker	<i>Respondent skipped this question</i>
Q62: 22. Physician	N/A
Q63: Physician	<i>Respondent skipped this question</i>
Q64: 23. Public Health Nurse	N/A
Q65: Public Health Nurse	<i>Respondent skipped this question</i>
Q66: 24. Public Information Officer	N/A
Q67: Public Information Officer	<i>Respondent skipped this question</i>
Q68: 25. Registered Dietician	N/A
Q69: Registered Dietician	<i>Respondent skipped this question</i>
Q70: 26. Registered Sanitarian	<i>Respondent skipped this question</i>

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Q71: Registered Sanitarian

Number of Full Time Personnel	1
Number of Part Time Personnel	0
Number of Contracted Personnel	0
Total Full Time Equivalents	1
Minimum Salary Based on 1 FTE	75000
Maximum Salary Based on 1 FTE	78600

Q72: 27. Sanitary Inspector N/A

Q73: Sanitary Inspector *Respondent skipped this question*

Q74: 28. School Nurse N/A

Q75: School Nurse *Respondent skipped this question*

Q76: 29. Secretary *Respondent skipped this question*

Q77: Secretary

Number of Full Time Personnel	1
Number of Part Time Personnel	0
Number of Contracted Personnel	0
Total Full Time Equivalents	1
Minimum Salary Based on 1 FTE	48600
Maximum Salary Based on 1 FTE	51503

Q78: 30. Social Worker N/A

Q79: Social Worker *Respondent skipped this question*

Q80: 31. Other Paid Worker N/A

Q81: Other Paid Worker *Respondent skipped this question*

PAGE 4: Environmental Health Personnel

Q82: Provide the name of each environmental health staff in your department

Environmental Health Personnel 1	Timothy Simpkins
Environmental Health Personnel 2	Michael McCarthy

PAGE 5: Local Policies to Support Community Health

Q83: 1. Artificial Ice Plants (Select all that apply.) N/A

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Q84: Artificial Ice Plants	<i>Respondent skipped this question</i>
Q85: 2. Barber/Beauty Shops (Select all that apply.)	N/A
Q86: Barber/Beauty Shops	<i>Respondent skipped this question</i>
Q87: 3. Body Piercing (Select all that apply.)	N/A
Q88: Body Piercing	<i>Respondent skipped this question</i>
Q89: 4. Child Day Care Centers (Select all that apply.)	Licensing/Permitting/Registration Program
Q90: Child Day Care Centers	
Number of Sites	2
Number of Inspections	2
Minimum Inspection Fee	0
Maximum Inspection Fee	0
Minimum Permitting Fee	0
Maximum Permitting Fee	0
Q91: 5. Deteriorated Paint - Residential (Select all that apply.)	N/A
Q92: Deteriorated Paint - Residential	<i>Respondent skipped this question</i>
Q93: 6. Housing/Property Maintenance/Blight (Select all that apply.)	N/A
Q94: Housing/Property Maintenance/Blight	<i>Respondent skipped this question</i>
Q95: 7. Massage Establishments (Select all that apply.)	N/A
Q96: Massage Establishments	<i>Respondent skipped this question</i>
Q97: 8. Migrant Labor Camps (Select all that apply.)	N/A
Q98: Migrant Labor Camps	<i>Respondent skipped this question</i>
Q99: 9. Motel/Hotel (Select all that apply.)	N/A
Q100: Motel/Hotel	<i>Respondent skipped this question</i>
Q101: 10. Nail Salons (Select all that apply.)	N/A
Q102: Nail Salons	<i>Respondent skipped this question</i>
Q103: 11. Outing Facilities/Parks (Select all that apply.)	N/A

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Q104: Outing Facilities/Parks	<i>Respondent skipped this question</i>
Q105: 12. Public Bathing Areas (Select all that apply.)	Licensing/Permitting/Registration Program
Q106: Public Bathing Areas	
Number of Sites	7
Number of Inspections	112
Minimum Inspection Fee	0
Maximum Inspection Fee	0
Minimum Permitting Fee	0
Maximum Permitting Fee	0
Q107: 13. Public Pools (Select all that apply.)	Licensing/Permitting/Registration Program
Q108: Public Pools	
Number of Sites	1
Number of Inspections	1
Minimum Inspection Fee	0
Maximum Inspection Fee	0
Minimum Permitting Fee	0
Maximum Permitting Fee	0
Q109: 14. Public and Private Campgrounds (Select all that apply.)	N/A
Q110: Public and Private Campgrounds	<i>Respondent skipped this question</i>
Q111: 15. Refuse Haulers (Select all that apply.)	N/A
Q112: Refuse Haulers	<i>Respondent skipped this question</i>
Q113: 16. Schools, Other Than Food Service (Select all that apply.)	N/A
Q114: Schools, Other Than Food Service	<i>Respondent skipped this question</i>
Q115: 17. Sewage Haulers (Select all that apply.)	N/A
Q116: Sewage Haulers	<i>Respondent skipped this question</i>
Q117: 18. Smoke Free/Tobacco Free Policies (Select all that apply.)	N/A
Q118: Smoke Free/Tobacco Free Policies	<i>Respondent skipped this question</i>
Q119: 19. Tattoo (Select all that apply.)	N/A
Q120: Tattoo	<i>Respondent skipped this question</i>

Q121: 20. Trailer Parks (Select all that apply.)

N/A

Q122: Trailer Parks*Respondent skipped this question***PAGE 6: Environmental Health ServicesFood Service****Q123: Class I (ES 1)**

Number of Establishments	7
Number of Inspections	7
Number of Reinspections	0
Minimum Inspection/Permit Fee	100
Maximum Inspection/Permit Fee	100
Minimum Reinspection Fee	0
Maximum Reinspection Fee	0

Q124: Class II (ES 1)

Number of Establishments	0
Number of Inspections	0
Number of Reinspections	0
Minimum Inspection/Permit Fee	150
Maximum Inspection/Permit Fee	150
Minimum Reinspection Fee	0
Maximum Reinspection Fee	0

Q125: Class III (ES 1)

Number of Establishments	10
Number of Inspections	27
Number of Reinspections	1
Number of Qualified Food Operators	10
Minimum Inspection/Permit Fee	200
Maximum Inspection/Permit Fee	200
Minimum Reinspection Fee	0
Maximum Reinspection Fee	0

Q126: Class IV (ES 1)

Number of Establishments	9
Number of Inspections	33
Number of Reinspections	2
Number of Qualified Food Operators	12
Minimum Inspection/Permit Fee	250
Maximum Inspection/Permit Fee	250
Minimum Reinspection Fee	0
Maximum Reinspection Fee	0

Q127: 1. Provide, in full time equivalents, the total staff time designated for conducting inspections of food service establishments. (ES 6,8) .5

Q128: 2. Number of orders issued to food service establishments. **An order is a written order by the director of health issued to a food establishment. (ES 2,3,6)** 0

Q129: 3. Does your department conduct internal self-assessments/audits of routine inspection reports? (ES 8,9) No

Q130: 4. Has your department calculated any risk-factor frequency data from routine inspection reports? (ES 1,3) No

Q131: 5. Number of farmers licensed to operate at farmers' markets (Public Act No. 11-191). (ES 1) 0

PAGE 7: Environmental Health ServicesDrinking Water

Q132: 1. Private Wells

Number of new private well permits issued (ES 1) 20

Fee for a private well permit 150

Number of permits issued for private well repairs (ES 2) 4

Q133: 2. Does your department receive water quality test results within six (6) months of real estate transactions (CGS 19a-27(b)1)? (ES 2) Yes

Q134: Does your department provide follow-up technical assistance or education materials on water quality test results that do not meet standards? (ES 3) Yes

PAGE 8: Environmental Health SectionSubsurface Sewage Disposal

Q135: 1. Subsurface Sewage Disposal

Number of lots tested (ES 1) 39

Number of new permits issued (ES 6) 3

Number of repair permits issued (ES 6) 40

Number of complaints of failed systems (ES 6) 13

Q136: 2. Does your department have written procedures/protocols/policies in place for investigation of subsurface sewage disposal system complaints? (ES 6) No

Q137: 3. Subsurface Sewage Disposal

Number of orders issued (ES 6)	26
Number of 19-13-B100a application reviews (ES 6)	48
Fee for a new permit (residential)	500
Fee for a repair permit (residential)	200
Fee for a new permit (commercial)	650
Fee for a repair permit (commercial)	300
Fee for a site plan review per lot (residential) - Professional Engineered Plan	100
Fee for a site plan review per lot (residential) - Non-engineered Plan	100
Fee for a site plan review per lot (subdivision) - Professional Engineered Plan	100
Fee for a site plan review per lot (subdivision) - Non-engineered Plan	100
Fee for a site plan review per lot (commercial) - Professional Engineered Plan	100
Fee for a site plan review per lot (commercial) - Non-engineered Plan	100
Fee for a site plan review 19-13-B100a	50
Fee for soil test new	100
Fee for soil test repair	100
Fee for soil test 19-13-B100a	100
Fee for ground water monitoring	0

Q138: 4. Does your department or member town(s) receive money for or participate in a subsurface sewage disposal repair funding program? (ES 2)

No

Q139: 5. Does your department or member town(s) participate in a subsurface sewage disposal system management or pump out program? (ES 2)

Yes

Q140: If yes, how is participation mandated? (Select all that apply.)

Ordinance

Q141: 6. Does your department conduct any public education/outreach activities for subsurface sewage disposal systems to the general public? (ES 3)

Yes

Q142: If yes, what type of outreach? (Select all the apply.)

Brochures/Pamphlets, One on one

Q143: 7. Does your department maintain an electronic reporting or data management system for subsurface sewage disposal system information? (ES 1)

Yes

Q144: If yes, what data are collected? (Select all the apply.)

Location, Size, Type,
 System maintenance (pumping), Inspections,
 Permits,
 Other (please specify) walkovers

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Q145: 8. Does your department work with municipal entities (Water Pollution Control Authority, Wetlands Commissions, etc.) to identify community needs/issues? (ES 1,2)	Yes, If yes, what entities? WPCA and Wetlands Commission.
Q146: 9. Does your department self assess to ensure proper utilization and completion of required forms? (ES 8,9)	Yes
Q147: 10. Are registered sanitarians and/or local health officials participating in subsurface sewage disposal system continuing education? (ES 8)	Yes, If yes, what training(s)? DPH - Subsurface Programs.

PAGE 9: Environmental Health ServicesRecreation/Public Pools

Q148: Recreation/Public Pools

Number of public pools in the local health jurisdiction (ES 1)	1
Number of public pool inspections conducted (include re-inspections) (ES 2,6)	1
Number of family campgrounds in the local health jurisdiction (ES 1)	0
Number of family campground inspections conducted (ES 2,6)	0
Number of public swimming areas/beaches in the local health jurisdiction (ES 1)	7
Number of public swimming areas/beaches monitored/tested (ES 2,6)	7
Number of public swimming area/beach inspections conducted (ES 2,6)	112

PAGE 10: Environmental Health ServicesLead Poisoning Prevention and Control Program

Q149: 1. Does your department monitor vacancy agreements? (ES 1)	No
Q150: 2. With regards to licensed child daycare providers and facilities, which type of follow up do you or your staff perform? (Select all that apply.) (ES 2,3,6)	Provide technical assistance, Review model lead hazard remediation plans , Issue letters of compliance
Q151: 3. Does your department have a written and established uniform policy for the fair and equitable treatment of persons who must be relocated because of housing-related hazards (e.g., lead paint hazards and abatement) cited by your staff? (ES 5,6)	No
Q152: 4. Does your department have a data sharing agreement with the public housing authority in your municipality or municipalities in your health district? (ES 2)	No

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Q153: 5. Does your department conduct targeted lead inspections in areas of known high-risk? (ES 5,6)	No
Q154: 6. Who conducts (or would conduct) the lead inspections for childhood lead poisoning cases in your jurisdiction?	Department of Public Health licensed lead consultant
Q155: 7. Does your department have a written plan for the relocation of families with lead poisoned children? (ES 5,6)	No
Q156: 8. Have you met with any of the following to determine if funds can be allocated to your department for assisting property owners with lead abatement? (ES 4)	N/A
Q157: 9. What local funds and resources have been allocated to your department or utilized by local homeowners (through a referral made by you) to assist in lead abatement expenses? (Select all that apply.) (ES 4)	Local Entitlement/Development Funds
Q158: 10. Do you or your staff conduct site visits of active lead abatement or lead hazard remediation projects? (ES 6)	Yes

PAGE 11: Environmental Health ServicesRadon Program

Q159: 1. Does your department conduct any public education/outreach activities on radon to the general public?	Yes
Q160: 2. Does your department provide technical assistance to the public on radon?	Yes
Q161: 3. Would your department utilize radon tests and analysis services if they were provided through the DPH State Laboratory? (ES 3)	Yes
Q162: 4. Does your department test for radon in private homes?	No
Q163: If yes, what is the:	<i>Respondent skipped this question</i>

PAGE 12: Vector ControlZoonotic and Arthropod-borne Diseases

Q164: 1. Does your department arrange transportation of animal specimens for rabies testing?	Yes
Q165: 2. Does your department perform seasonal application of larvicide community-wide and/or complaint generated to control mosquitos?	No

Q166: 3. Does your department perform seasonal application of adulticide to control mosquitos in parks or recreation areas? No

PAGE 13: Communicable Disease ControlSexually Transmitted Diseases

Q167: 1. Does your department provide clinical treatment services? (ES 7) No

Q168: 2. Does your department follow up on case reports for gonorrhea, syphilis and chlamydia to ensure therapy of case-patient? (ES 3,7) Yes

Q169: If yes, how are case-patients contacted? (Select all that apply.) Contact provider, Contact state STD program

Q170: 3. Does your department follow up on case reports to ensure treatment of partners? (ES 3,7) Yes

Q171: If yes, how are people contacted? (Select all that apply.) Local health department interview

Q172: 4. Does your department provide HIV testing? (ES 7) No

PAGE 14: Communicable Disease ControlTuberculosis

Q173: 1. What clinical/treatment referral services does your department provide? (Select all that apply.) (ES 7) Referral to local health clinic,
Referral to local pulmonologist,
Referral to local ID specialist,
Referral to hospital clinic

Q174: What type of DOT services does your department arrange? (Select all that apply.) (ES 3) VNA, Local health department employee

Q175: 3. What type of case management of TB patients does your department provide? (Select all that apply.) (ES 3) Monthly call to treating provider,
Form faxed/mailed to provider

Q176: 4. Who conducts contact investigations of suspect and infectious TB patients? (Select all that apply.) (ES 2) Other local health department employee, VNA

Q177: 5. Who is responsible for TB testing and follow up of high risk residents (such as refugees and immigrants classified as TB-B1 or B2)? (Select all that apply.) (ES 2) Private provider, Community clinic

Q178: 6. Who is responsible for signing/consultation for discharge planning from the hospital? (Select all that apply.) (ES 2) Local health director

PAGE 15: Communicable Disease ControlViral Hepatitis - Hepatitis A

Q179: 1. Does your department follow up with case (education and prevention) on all IgM anti-HAV reports? (ES 2)	Yes
Q180: 2. Does your department provide appropriate referral of contacts for immunization (Immunoglobulin or vaccine)? (ES 7)	Yes
Q181: 3. Does your department ask about recent food handling and day care employment history? (ES 3,7)	Yes
Q182: 4. Does your department conduct risk factor interviews? (ES 3,7)	No
Q183: 5. Does your department provide education about prevention? (ES 3)	Yes
Q184: 6. Does your department follow up with physician (prevention recommendations) on all IgM anti-HAV reports? (ES 2)	Yes
Q185: 7. Does your department complete Hepatitis A care reports and submit to DPH? (ES 1)	No
Q186: 8. Does your department have educational materials available to the public? (ES 3)	No

PAGE 16: Communicable Disease ControlViral Hepatitis - Hepatitis B

Q187: 1. Does your department report pregnant HBsAg-positives to DPH? (ES 1)	Yes
Q188: 2. Does your department follow up with physician (prevention recommendations) on all HBsAg reports? (ES 2)	Yes
Q189: 3. Does your department follow up with case (education and prevention) on all HBsAg reports? (ES 2)	Yes
Q190: 4. Does your department provide referral of contacts for appropriate testing and vaccination? (ES 7)	Yes
Q191: 5. Does your department provide referral of case for testing/evaluation for treatment (chronic cases)? (ES 7)	Yes
Q192: 6. Does your department provide education about prevention, living with chronic infection?(ES 3)	Yes
Q193: 7. Does your department provide testing for high-risk adults and adolescents? (ES 3)	No

Q194: 7. Does your department provide vaccination of high-risk adults? (ES 3,7) No

Q195: 8. Does your department have educational materials available to the public? (ES 3) No

PAGE 17: Communicable Disease ControlViral Hepatitis - Hepatitis C

Q196: 1. Does your department follow up with physician (prevention recommendations) on all anti-HCV reports? (ES 2) Yes

Q197: 2. Does your department follow up with case (education and prevention) on all anti-HCV reports? (ES 2) Yes

Q198: 3. Does your department provide referral of contacts for appropriate testing? (ES 7) Yes

Q199: 4. Does your department provide referral of case for care - testing/vaccination A and B/evaluation for treatment? (ES 7) Yes

Q200: 5. Does your department provide education about prevention, living with chronic condition?(ES 3) Yes

Q201: 6. Does your department integrate Hepatitis C education into HIV counseling and testing? (ES 3, 7) No

Q202: 7. Does your department provide testing for high-risk adults and adolescents? (ES 3,7) No

Q203: 8. Does your department have educational materials available to the public? (ES 3) No

PAGE 18: Access to Clinical Preventative ServicesVaccination Services (ES 7)

Q204: 1. Does your department provide vaccination services for children (0-5 years of age)? No, neither performed by LHD directly NOR contracted out by LHD

Q205: If yes, select all vaccine(s) provided *Respondent skipped this question*

Q206: 2. Does your department conduct or sponsor a well-child clinic in your jurisdiction? No, neither performed by LHD directly NOR contracted out by LHD

Q207: 3. Does your department provide vaccination services for adolescents (12-18 years of age)? No, neither performed by LHD directly NOR contracted out by LHD

Q208: If yes, select all vaccine(s) provided *Respondent skipped this question*

Q209: 4. Does your department provide vaccination services for adults (>18 years of age)? Yes, contract out by LHD

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Q210: If yes, select all vaccine(s) provided	Influenza
Q211: 5. Does your department conduct an annual influenza clinic? (ES 7)	Yes, contract out by LHD
Q212: If yes, number of doses of flu vaccine purchased for the most recent season?	250
Q213: If yes, is Pneumococcal included in your flu clinic?	No
Q214: 6. Does any other agency in your jurisdiction provide these services for adults? (ES 7)	Yes
Q215: If yes, select all that apply	VNA, Private provider site

PAGE 19: Oral Health Services

Q216: 1. Does your department have an oral health program? If YES, please continue to answer the questions below. If NO, skip to the Diabetes/Chronic Diseases/Hypertension section.	No - If NO, skip to the Diabetes/Chronic Diseases/Hypertension section.
Q217: 2. Does this program only provide oral health education/awareness? If YES, skip to the Diabetes/Chronic Diseases/Hypertension section. If NO, please continue to answer the questions below.	<i>Respondent skipped this question</i>
Q218: 3. Are dental services provided for children? (ES 7)	<i>Respondent skipped this question</i>
Q219: If yes, which age group(s)? (Select all that apply)	<i>Respondent skipped this question</i>
Q220: 4. Are dental services provided for seniors/older adults?	<i>Respondent skipped this question</i>
Q221: 5. Are any preventative oral health services provided? (Select all that apply.)	<i>Respondent skipped this question</i>
Q222: 6. Are restorative dental services provided? (ES 7)	<i>Respondent skipped this question</i>
Q223: If yes, where are the services provided? (Select all that apply.)	<i>Respondent skipped this question</i>
Q224: 7. Does your department bill for any of these services?	<i>Respondent skipped this question</i>
Q225: 8. Does your department retain staff to provide any of these dental services? (ES 8)	<i>Respondent skipped this question</i>
Q226: 9. Does your department contract for any of these dental services? (ES 7)	<i>Respondent skipped this question</i>
Q227: 10. Does the program provide oral health education/awareness? (Select all that apply.) (ES 3)	<i>Respondent skipped this question</i>

PAGE 20: Population-Based Prevention & Health PromotionDiabetes/Chronic Diseases/Hypertension

Q228: 1. What education is offered by your department in the community for chronic disease management, diabetes management and/or diabetes prevention? (Select all that apply.) (ES 4)	Health fairs/Health screenings
Q229: If education is offered, what curriculum or resources are used to support current best practice recommendations? (ES 10)	<i>Respondent skipped this question</i>
Q230: 2. Do you have staff trained to lead chronic diseases or diabetes self-management programs (CDSMP or DSMP) that is delivered in a culturally competent manner for the populations served in your jurisdiction? (ES 7)	No
Q231: 3. Does your department offer blood pressure screenings?	No
Q232: If yes, who conducts the blood pressure screening? (Select all that apply.)	<i>Respondent skipped this question</i>
Q233: If yes, are those identified with high blood pressure readings referred to a physician or health care provider? (ES 7)	<i>Respondent skipped this question</i>

PAGE 21: Population-Based Prevention & Health PromotionSchool Health

Q234: 1. How is your department engaged with the Board of Education, school administration and/or school wellness committees to provide guidance and support? (Select all that apply.) (ES 4)	Advisor, Technical assistance (e.g., Tools for Schools)
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PAGE 22: Population-Based Prevention & Health PromotionHealthy Food

Q235: 1. How is your department engaged with promoting access to healthy food in low income or food desert areas? (Select all that apply.) (ES 4)	Not applicable
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PAGE 23: Population-Based Prevention & Health PromotionBreastfeeding

Q236: 1. How is your department engaged with promoting breastfeeding initiatives (i.e. improving maternity care practices, breastfeeding training and/or ensuring compliance with federal and state lactation accommodation laws)? (Select all that apply.) (ES 4)	Not applicable
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Q237: 2. Does your department have a lactation accommodation policy and space for employees? (ES 6,8) No

Q238: 3. Is your health staff involved with a hospital lactation committee? (ES 4) No

PAGE 24: Public Health RevenuePublic Health Department Revenue

Q239: 1. DPH funds - all regardless of source

Amount 10287

Q240: Routing of funds

Part of operating budget

Q241: 2. State funds (other than DPH)

Amount 0

Q242: Routing of funds

N/A

Q243: 3. Federal sources (direct)

Amount 0

Q244: Routing of funds

N/A

Q245: 4. Licensure/Permit fees

Amount 30650

Q246: Routing of funds

Goes to general fund

Q247: 5. Local funds - city/town sources

Amount 252864

Q248: Routing of funds

Part of operating budget

Q249: 6. Medicaid

Amount 0

Q250: Routing of funds

N/A

Q251: 7. Medicare

Amount 0

Q252: Routing of funds

N/A

Q253: 8. Other revenue

Amount 0

Q254: Routing of funds

N/A

Q255: 9. Patient personal fees

Amount 0

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Q256: Routing of funds	N/A
Q257: 10. Private foundations	
Amount	0
Q258: Routing of funds	N/A
Q259: 11. Private health insurance	
Amount	0
Q260: Routing of funds	N/A
Q261: What is your total operating budget?	263151

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Q262: 1. Has your department been involved with the collection of primary quantitative data within the past three (3) years?	No
Q263: If yes, select all that apply	<i>Respondent skipped this question</i>
Q264: 2. Has your department provided data on the health of your local population to DPH within the past year?	No
Q265: If yes, select all that apply	<i>Respondent skipped this question</i>

PAGE 26: 10 Essential Services - #2

Q266: 1. Has your department completed an investigation of a non-infectious health problem, environmental, and/or occupational public health hazard within the past five (5) years?	Yes
Q267: If yes, select all that apply	Lead, Water
Q268: 2. Has your department worked with other governmental agencies/departments and key community stakeholders to conduct investigations of reportable diseases, disease outbreaks, chronic disease, environmental public health issues, and/or injuries within the past five (5) years?	Yes
Q269: If yes, select all that apply	Environmental public health issues
Q270: If yes, select all the partners that you worked with	DPH, DEEP

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Q271: 3. Does your department have a current tracking log or audit of reports of disease reporting, laboratory test reports, and/or investigations with timelines? Yes

Q272: If yes, select all that apply Tracking log

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Q273: 1. Has your department provided information to the public on health risks, health behaviors, disease prevention, or wellness within the past five (5) years? Yes

Q274: If yes, select all that apply Public presentation, Brochure/Pamphlet

Q275: 2. Has your department developed and implemented or sustained health promotion strategies within the past five (5) years? No

Q276: If yes, select all that apply Respondent skipped this question

Q277: If yes, was implementation done in collaboration with partners and/or community? Respondent skipped this question

Q278: If yes, select all that apply Respondent skipped this question

Q279: If yes, were any of them evidence-based or a promising practice? Respondent skipped this question

Q280: 3. Has your department distributed information to the public about public health and/or about your department's mission, programs, and services with the past five (5) years? Yes

Q281: If yes, select all that apply Brochure

Q282: 4. Have you communicated with the media to ensure their understanding of public health and that they cover important public health issues within the past two (2) years? Yes

Q283: If yes, select all that apply Print media

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Q284: 1. Has your department been an active member of a community partnership(s) or coalition(s) to address public health issues within the past two (2) years? No

Q285: If yes, select the health issues(s) addressed within the community partnerships(s) or coalition(s) Respondent skipped this question

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Q286: If yes, what sectors of the community do the members of the partnership(s) or coalitions(s) represent?

Respondent skipped this question

Q287: 2. Has your department communicated and collaborated with your governing entity, advisory board, and/or elected officials concerning public health policy or strategy within the past five (5) years?

Yes,
If yes, describe
Personal communication with the First Selectman.

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Q288: 1. Has your department monitored and tracked public health issues being discussed by individuals and entities that set policies and practices that impact public health within the past two (2) years?

No

Q289: 2. Has your department contributed to deliberations concerning public policy and practice and its impact on public health within the past two (2) years?

No

Q290: If yes, select all the methods that you utilized

Respondent skipped this question

Q291: 3. Has your department participated in preparedness meetings with other government agencies and other health departments within the past five (5) years?

Yes

Q292: 4. Has your department participated in drills, exercises or a real emergency to test components of an All Hazards Emergency Operation Plan (EOP) within the past five (5) years?

Yes

Q293: If yes, did you conduct a debriefing or After Action Report from the emergency or drill/exercise?

Yes

Q294: 5. Has your department collaboratively revised an All Hazards EOP within the past five (5) years?

Yes

Q295: 6. Does your department have a public health emergency response plan that is dated within the past five (5) years?

Yes

Q296: 7. Has your department tested the plan within the past five (5) years through the use of drills and exercises?

Yes

Q297: If yes, did your department complete an After Action Report after the emergency or exercise/drill?

Yes

Q298: 8. Has your department revised the public health emergency response plan within the past two (2) years?

Yes

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Q299: 1. Has your department staff participated in training on public health law related to job responsibilities within the past two (2) years?

Yes

Q300: If yes, select all that apply

Food certification

Q301: 2. How does your department ensure the consistent application of public health laws?

Communications with other agencies

Q302: 3. Does your department make information concerning public health laws and permit/license applications available to members of the public?

Yes

Q303: If yes, select all that apply

Website, Flyers, Brochures/Pamphlets

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Q304: 1. Has your department collaboratively implemented strategies to improve access to health care services for those who experience barriers within the past five (5) years?

No

Q305: If yes, select all that apply

Respondent skipped this question

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Q306: 1. Has your department had a partnership or ongoing collaboration that promotes public health as a career choice within the past five (5) years?

No

Q307: If yes, select all that apply

Respondent skipped this question

Q308: 2. Has agency staff participated in professional development activities within the past two (2) years?

Yes

Q309: If yes, select all that apply

Continuing education for certifications/licenses,
Training opportunities

Q310: 3. Has agency staff participated in leadership and/or management development training within the past two (2) years?

Yes

Q311: If yes, select all that apply

Attending relevant meetings and conferences

PAGE 33: 10 Essential Services - #9

Q312: 1. Has your department evaluated the effectiveness, efficiency or quality of programs and services within the past five (5) years?

No

Q313: If yes, select all that apply

Respondent skipped this question

Q314: If yes, have you used the information to improve department performance or community health outcomes?

Respondent skipped this question

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Q315: 1. Has your department communicated research findings and their public health implications to stakeholders, other health departments, other organizations, and/or the public within the past five (5) years?

Yes

Q316: If yes, select who you communicated the research findings with

Governing entity, Local agencies/departments,
State agencies/departments

PAGE 35: 10 Essential Services Certification

Q317: 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.

Yes