

#58

**COMPLETE**

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Page 1: Local Health Department/District Information

**Q1** Department Name

Sherman

**Q2** Do you have a Board of Health? **No**

Page 2: Board of Health

**Q3** Please complete the Board of Health information below. **Respondent skipped this question**

**Q4** Board Function **Respondent skipped this question**

**Q5** Number of Board Members **Respondent skipped this question**

Page 3: Director of Health and Local Health Department Information

**Q6** Director of Health

Name	<b>TIMOTHY R. SIMPKINS</b>
Degree(s)	<b>MA</b>
Active CT License(s)	<b>RS</b>
Number of hours in Director of Health's average work week	<b>12</b>

**Q7** Please list salary figures as whole dollars per year.

Minimum Annual Salary	<b>35003</b>
Maximum Annual Salary	<b>35003</b>
Actual Annual Salary	<b>35003</b>

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**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?

**No**

**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** 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?

**Yes,**  
If yes, how many?:  
1

**Q14** 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**

**Q15** In what calendar year does your department anticipate registering in e-PHAB in order to pursue accreditation?

**Have not decided on a target year**

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### Q16 Administrative

	Full Time	Part Time	Contracted	Min. Salary-Hourly	Max. Salary-Hourly
Assistant or Deputy Director of Health	0	0	0	\$0	\$0
Environmental Health Supervisor	0	0	0	\$0	\$0
Nursing Supervisor	0	0	0	\$0	\$0
Office Manager	1		1	\$31	\$31
Bookkeeper	0	0	0	\$0	\$0
Secretary	0	0	0	\$0	\$0

### Q17 Medical

Respondent skipped this question

### Q18 Public Health

Respondent skipped this question

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**Q19** How many of your staff have the following licenses and/or certifications?

	#
Dental Hygienist (RHD)	
Dentist (DMD/DDS)	
Food Inspector	<b>1</b>
Health Educator (CHES)	
Lead Assessor	
Lead Inspector	
Nurse (RN/APRN)	
Pharmacist (RPh)	
Phase I SSDS	<b>3</b>
Phase II SSDS	<b>2</b>
Physician (MD/DO)	
Registered Dietitian (RD)	
Registered Sanitarian (RS)	
Social Worker (LSW)	
Veterinarian (DVM/VMD)	
Other (Please describe below)	

Page 5: Public Health Department Revenue

<b>Q20</b> DPH funds - all regardless of source	Amount \$	<b>40884</b>
<b>Q21</b> State funds - other than DPH	Amount \$	<b>0</b>
<b>Q22</b> Federal sources - direct	Amount \$	<b>0</b>
<b>Q23</b> Licensure/Permit fees	Amount \$	<b>10350</b>
<b>Q24</b> Local funds - city/town sources	Amount \$	<b>40884</b>

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<b>Q25</b> Medicaid	Amount \$	<b>0</b>
<b>Q26</b> Medicare	Amount \$	<b>0</b>
<b>Q27</b> Other revenue	Amount \$	<b>0</b>
<b>Q28</b> Patient personal fees	Amount \$	<b>0</b>
<b>Q29</b> Private foundations	Amount \$	<b>0</b>
<b>Q30</b> Private health insurance	Amount \$	<b>0</b>

**Q31** What is your total operating budget?

4088440

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

**Q32** Requirement 1: My department has participated in or conducted a local community health assessment (CHA) within the last five years. **Yes**

**Q33** If yes, does the CHA include? (Select all that apply) **Data and information from various sources and how the data were obtained**, **Demographics of the population**, **Description of health issues and specific descriptions of population groups with particular health inequities**, **Description of factors that contribute to specific populations' health challenges**

**Q34** If yes, please upload the CHA or provide web link. **Respondent skipped this question**

**Q35** Web link/URL

[CTDATHAVEN.ORG/REPORT/FAIRFIELD-COUNTY-COMMUNITY-WELLBEING-INDEX](http://CTDATHAVEN.ORG/REPORT/FAIRFIELD-COUNTY-COMMUNITY-WELLBEING-INDEX)

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**Q36** Requirement 2: My department shared the findings from the community health assessment with the residents in my jurisdiction and asked for their input. **Yes**

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**Q37** If yes, what methods did you use to seek input from residents? (Select all that apply) **Presentations and discussions at local meetings**

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**Q38** 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. **Yes**

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**Q39** If yes, how is the data provided? (Select all that apply) **Participating in other local organizations' community meetings (e.g., church community meetings, school public meetings, community association meetings or assemblies, etc.)**

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

**Q40** Requirement 1: My department shared the results of the community health assessment with the partners/stakeholders and the public. **Yes**

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**Q41** If yes, how did your department share the results of the CHA? (Select all that apply) **Emails to partners and stakeholders**, **Articles in newspapers**

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

**Q42** 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. **Yes**

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**Q43** If yes, how are the data collected? (Select all that apply) **Fax,** **Emails,** **Electronic data,** **Phone calls**

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**Q44** 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. **No**

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**Q45** If yes, please upload the protocol. **Respondent skipped this question**

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**Q46** If no, is the protocol in development? **No**

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**Q47** Requirement 3: My department has a 24/7 contact system or protocol to collect data from those who report data to my department. **Yes**

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**Q48** If yes, how does your department collect the data 24/7? (Select all that apply) **A designated telephone line (voice or fax),  
Email address,  
Designated contact person or a list of contacts**

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**Q49** Requirement 4: My department regularly uses the state DPH surveillance systems. **Yes**

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**Q50** If yes, which surveillance systems do your department use? (Select all that apply) **CTSITE (childhood lead),  
CTEDSS (reportable diseases),  
Syndromic Surveillance (opioids)**

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**Q51** How many staff have been trained to use any of the state surveillance systems? **Respondent skipped this question**

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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**

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**Q53** If yes, how has your department collected primary quantitative data? (Select all that apply)

**Vital records,**  
**Inspection data,**  
**Data collected for community health assessment**

**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)

**Forums**

**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** If yes, do the analyses of the data include the following? (Select all that apply)

**Description of the analytic process used to analyze the data**  
,  
**Comparison of the data to other local agencies, the state or nation**

**Q59** Requirement 2: My department shares data and data analyses.

**Yes**

**Q60** If yes, with whom does you department share the data and data analyses? (Select all that apply)

**Community groups,**  
**Public Health Partners,**  
**Elected officials** ,  
**Residents,**  
**Media**

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



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**Q61** 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. **Yes**

**Q62** If yes, how has the department used data? (Select all that apply) **Local ordinances, Health Promotion Programs**

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

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

**Q64** If yes, who are the summaries/fact sheets shared with? (Select all that apply) **Residents, Public health partners, Other local health departments, Elected officials**

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

**Q65** 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. **Yes**

**Q66** If yes, for which of the following entities does the protocol delineate the assignment of responsibilities? (Select all that apply) **Internal staff, Other local health departments (MOU), DPH (Food, Asbestos, SSDS), Other state agencies (DEEP, DCP)**

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

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**Q67** Requirement 1: My department conducts audits or programmatic evaluations (e.g., After Action Report) of investigations to ensure capacity to respond to outbreaks of infectious disease. **Yes**

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**Q68** Requirement 2: My department has a written report or other documentation of a completed investigation of a non-infectious health problem or hazard. **Yes**

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

**Q69** Requirement 1: My department has a tracking log or audit on investigations that includes reporting lab test results and investigation results. **Yes**

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**Q70** If yes, how does your department track investigations? (Select all that apply) **Tracking log**

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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. **No**

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**Q72** If yes, does the protocol(s) include? (Select all that apply) **Respondent skipped this question**

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

**Q73** Requirement 1: My department has infectious disease outbreak protocols that describe the process for determining when the EOP will be implemented. **No**

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**Q74** If yes, please upload the protocol. **Respondent skipped this question**

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**Q75** If no, is the protocol in development? **Yes**

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**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**

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**Q77** If yes, please upload the protocol. **Respondent skipped this question**

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**Q78** If no, is the protocol in development? **Yes**

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**Q79** Requirement 3: My department has cluster evaluation protocols describing the process for determining when the EOP will be implemented. **No**

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**Q80** If yes, please upload the protocol. **Respondent skipped this question**

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**Q81** If no, is the protocol in development? **No**

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

**Q82** 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. **No**

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**Q83** If no, is the documentation in development? **Yes**

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**Q84** How many drills and exercises did your department conduct or participate in the last fiscal year?

1-SHELTONPOD EXERCISE AND 4 COMMUNICATION DRILLS FOR REGION 5 ESF-8

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

NONE

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**Q86** How many were significant that required the development of an AAR?

NONE

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

**Q87** Requirement 1: My department has policies and procedures outlining how the department maintains 24/7 access to support services in emergencies. **Yes**

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**Q88** If no, are the policies and procedures in development? **Respondent skipped this question**

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**Q89** Requirement 2: My department has a call down list that is used to contact epidemiological and environmental local public health resources. **Yes**

**Q90** If yes,

When was the call down list last tested? **NOVEMBER 2015**

What was the response time? **15 MINUTES**

**Q91** Requirement 3: My department has a written policy or procedure to assure 24/7 access to laboratory services. **No**

**Q92** If yes, please upload the protocol. **Respondent skipped this question**

**Q93** If no, is the policy/procedure in development? **Yes**

**Q94** Requirement 4: My department has protocols for handling and submitting of specimens. **No**

**Q95** If yes, please upload the protocol. **Respondent skipped this question**

**Q96** If no, is the policy/procedure in development? **Yes**

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

**Q97** 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. **Yes**

**Q98** If no, is the protocol/procedure/policy in development? **Respondent skipped this question**

**Q99** 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. **Yes**

**Q100** If yes, how are staff notified if they are needed for surge capacity? (Select all that apply) **Email, Call down**

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**Q101** Requirement 3: My department has a document detailing the availability of equipment (transportation, field communications, personal protective equipment (PPE), etc.) to support a surge. **Yes**

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**Q102** If no, is the document in development? **Respondent skipped this question**

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**Q103** 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). **Yes**

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**Q104** If no, is the schedule in development? **Respondent skipped this question**

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**Q105** Requirement 5: My department has a list and description of contracts, MOAs/MOUs, and/or mutual assistance agreements providing additional staff and services, including laboratory services, for surge capacity. **Yes**

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Page 22: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community

**Q106** Requirement 1: My department has a communication protocol to contact staff, health care providers, response partners, the media and others, 24/7. **No**

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**Q107** If yes, please upload the protocol. **Respondent skipped this question**

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**Q108** If no, is the protocol in development? **Yes**

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**Q109** 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. **Yes**

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**Q110** If yes, how does your department inform partners and the public? (Select all that apply) **Web page**

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**Q111** Requirement 3: My department's partners and the public can contact the health department 24/7. **Yes**

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**Q112** If yes, how does the public and partners contact your department 24/7? (Select all that apply)

**Police dispatch**,  
**Web site**,  
**24/7 phone number**

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**Q113** Requirement 4: My department has established or participates in a Health Alert Network (HAN) or similar system that receives and issues alerts 24/7.

**Yes**

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

WITH PERIODIC CALL DOWNS WITH PARTNERS

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**Q115** Requirement 5: My department provides information to the public and uses the media to communicate information to the public during a public health emergency.

**Yes**

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**Q116** If yes, how does your department provide information and use the media to communicate information to the public? (Select all that apply)

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

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

**Q117** Requirement 1: My department has provided information to the public on health risks, health behaviors, disease prevention, or wellness.

**Yes**

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**Q118** If yes, how has your department provided information to the public? (Select all that apply)

**Public presentation**,  
**Brochure**

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**Q119** Requirement 2

**No**

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**Q120** If yes, were the health promotion strategies? (Select all that apply)

**Marketed using various platforms (social media, newspaper, etc.)**,  
**Implemented in collaboration with stakeholders, partners, and the community**

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**Q121** If yes, what types of health promotion strategies were developed and implemented or sustained? (Select all that apply) **Farmers markets, Immunizations**

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

**Q122** Requirement 1: My department has assessed health inequity across the jurisdiction within the last five years. **No**

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**Q123** If yes, does the assessment include? (Select all that apply) **Respondent skipped this question**

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

**Q124** Requirement 1: My department has a policy, plan or strategy for branding. **No**

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**Q125** If yes, does the branding policy, plan or strategy? (Select all that apply) **Respondent skipped this question**

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**Q126** If no, is the policy, plan or strategy in development? **Yes**

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

**Q127** Requirement 1: My department has external communication procedures or protocols. **No**

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**Q128** If yes, does the external communication procedures or protocols include? (Select all that apply) **Respondent skipped this question**

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**Q129** If yes, please upload the procedure or protocol. **Respondent skipped this question**

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**Q130** If no, is the protocol in development? **Yes**

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

**Q131** Requirement 1: My department has a risk communication plan, protocol or procedure. **No**

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**Q132** If yes, does the risk communication plan, protocol or procedures? (Select all that apply) **Respondent skipped this question**

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**Q133** If yes, please upload the plan, protocol or procedure. **Respondent skipped this question**

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**Q134** If no, is the plan, protocol or procedure in development? **Yes**

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

**Q135** Requirement 1: My department maintains a website or web page to inform the public about public health issues. **No**

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**Q136** If yes, my department's website or web page has the following information: (Select all that apply) **Respondent skipped this question**

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

**Q137** Requirement 1: My department has demographic data defining ethnic distribution and languages in the jurisdiction. **Yes**

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**Q138** Requirement 2: My department has access to staff or contractors who provide interpretation, translation or specific communication services. **Yes**

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**Q139** If yes, how does your department provide interpretation, translation or specific communication services? (Select all that apply) **Language telephone services**

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

**Q140** Requirement 1: My department has been an active member of a community partnership(s) or coalition(s) to improve the health of the community. **Yes**

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**Q141** If yes, what sectors of the community do the members of the partnership(s) or coalitions(s) represent? (Select all that apply)

School systems,  
Social service organizations,  
Local government agencies

**Q142** If yes, which health issue(s) are being addressed in the community partnership(s) or coalition(s)? (Select all that apply)

Childhood injury prevention,  
Housing

**Q143** 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).

No

**Q144** If yes, what policy change or revision was implemented? (Select all that apply)

Respondent skipped this question

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

**Q145** Requirement 1: My department engages with the community as a whole or with specific populations that will be affected by a policy or strategy.

No

**Q146** If yes, which sectors of the community has your department engaged? (Select all that apply)

Respondent skipped this question

**Q147** 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.

Yes

**Q148** If yes, how does your department communicate and collaborate? (Select all that apply)

Meetings,  
Reports,  
Emails

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

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**Q149** 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. **Yes**

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**Q150** If yes, how is your department monitoring and tracking issues? (Select all that apply) **Meeting agendas and minutes**

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

**Q151** Requirement 1: My department has contributed to the formal discussions concerning public policy and practice and its impact on public health. **Yes**

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**Q152** If yes, how has your department contributed to the discussions? (Select all that apply) **Official public testimony**, **Participation in an advisory or work group**

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

**Q153** 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. **Yes**

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**Q154** If yes, how has your department informed policy makers and/or the public? (Select all that apply) **Meetings/discussions of policy issues and impacts**, **Presentation of evaluation or assessments of current and/or proposed policies**

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

**Q155** Requirement 1: My department has a community health improvement plan (CHIP) dated within the last five years. **No**

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**Q156** If yes, does the CHIP include the following? (Select all that apply) **Respondent skipped this question**

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**Q157** If yes, please attach the CHIP or provide the web link. Respondent skipped this question

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**Q158** Web link/URL Respondent skipped this question

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**Q159** If no, where is your department in the process? (Select one) My department has not begun a CHIP

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

**Q160** Requirement 1: My department has a tracking process to document actions taken toward the implementation of the CHIP. Respondent skipped this question

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**Q161** Requirement 2: My department and/or my partners have implemented some areas of the CHIP. Respondent skipped this question

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**Q162** If yes, what area has been implemented and by whom? (Provide one example) Respondent skipped this question

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

**Q163** Requirement 1: My department has a strategic plan dated within the last five years. No

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**Q164** If yes, does the plan include? (Select all that apply) Respondent skipped this question

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**Q165** If no, where is your department in the process? (Select one) My department has not begun a strategic plan

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

**Q166** 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. Respondent skipped this question

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

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**Q167** Requirement 1: My department participates in preparedness meetings with other government agencies, local health departments and health care providers. **Yes**

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**Q168** 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. **Yes**

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**Q169** If yes, did your department develop an AAR after the emergency or drill/exercise? **No**

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**Q170** Requirement 3: As a result of an exercise, drill or real event, my department has revised the All Hazards EOP. **No**

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

**Q171** Requirement 1: My department has a public health emergency response plan that is dated within the last five years. **Yes**

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**Q172** 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**

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**Q173** Requirement 2: Within the last five years, my department has tested the public health EOP through drills and exercises. **Yes**

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**Q174** If yes, did your department complete an AAR the drills or exercises? **No**

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**Q175** Requirement 3: My department has revised the public health EOP based on AARs. **No**

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

**Q176** Requirement 1: My department reviews regulations, statutes, and ordinances for their public health implications. **Yes**

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**Q177** If yes, when reviewing laws, does your department? (Select all that apply) **Collaborate with other municipal departments, Tribes, state health department**

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**Q178** Requirement 2: My department has access to legal counsel as needed. **Yes**

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

**Q179** 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. **Yes**

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**Q180** If yes, how does your department provide advice and recommendations? (Select all that apply) **Official public testimony , Meetings**

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

**Q181** Requirement 1: My department's staff have been trained in laws related to their job responsibilities within the past two years. **Yes**

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**Q182** 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,  
Housing, hoarding, blight,  
Uniform relocation Act,  
Opioid/naloxone,  
Legal orders,  
Disaster response/emergency preparedness,  
Vector control,  
Surveillance/outbreak investigations

**Q183** Requirement 2: My department ensures consistent application of public health laws.

Yes

**Q184** If yes, how does your department ensure the consistent application of public health laws? (Select all that apply)

Enforcement documents or logs

Page 44: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

**Q185** Requirement 1: My department has information concerning public health related laws available to the public.

Yes

**Q186** If yes, how is your department providing information concerning public health related laws? (Select all that apply)

Flyers/Brochures,  
Phone conversations

**Q187** Requirement 2: My department has information about permit/license applications available to the public.

Yes

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**Q188** If yes, how is your department providing information about permit/license applications? (Select all that apply)

Email or fax, Regular mail, Phone conversations

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Page 45: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

**Q189** Requirement 1: My department provides information or education to regulated individuals or entities about their responsibilities related to public health laws.

Yes

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**Q190** If yes, how is your department providing information or education to regulated individuals or entities? (Select all that apply)

Phone conversations

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Page 46: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

**Q191** Requirement 1: My department has local ordinances/regulations for conducting enforcement actions.

Yes

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**Q192** If yes, what types of ordinances/regulations? (Select all that apply)

Septic systems

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**Q193** Please provide a link to where these ordinances can be found:

THE ORDINANCE IS NOT ON LINE WE CAN MAIL YOU A COPY IF YOU DESIRE

---

**Q194** Requirement 2: My department has a written procedure or protocol (e.g. decision tree) for enforcement program areas.

No

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**Q195** If yes, please upload the protocol.

Respondent skipped this question

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**Q196** If no, is the protocol in development?

No

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Page 47: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

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**Q197** 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. **Yes**

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**Q198** If yes, what is/are the database(s) or log(s)? (Select all that apply) Other (please describe):  
PAPER FILES

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Page 48: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

**Q199** Requirement 1: My department has a database or log of actions related to investigations and complaints. **No**

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**Q200** If yes, does the database or log document? (Select all that apply) **Respondent skipped this question**

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Page 49: Copy of page: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

**Q201** Requirement 1: My department analyzes the information in the database or log of investigations and complaints. **Yes**

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**Q202** If yes, does your department analyze the data for? (Select all that apply) **Statutory requirements**

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**Q203** 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. **No**

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Page 50: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety

**Q204** Requirement 1: My department has a protocol for notifying other agencies and the public of enforcement activities. **Yes**

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**Q205** If yes, how does your department notify other agencies and the public of enforcement activities? (Select all that apply) **Correspondence, Press release, Public presentation**

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**Q206** If no, is the protocol in development? Respondent skipped this question

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

**Q207** Requirement 1: My department participates in a collaborative process to assess the availability of health care services to the population. No

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**Q208** If yes, with whom does your department collaborate to assess the availability of health care services? (Select all that apply) Respondent skipped this question

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**Q209** If yes, do you maintain documentation (agendas, minutes, rosters) of the collaborative process/meetings? No

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**Q210** Requirement 2: My department shares public health data for assessment and planning purposes. No

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**Q211** If yes, how does your department share the data? (Select all that apply) Respondent skipped this question

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**Q212** Requirement 3: My department assesses emerging issues that may impact access to care. No

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**Q213** If yes, please provide an example of an emerging issue. Respondent skipped this question

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Page 52: 10 ES - #7 Link people to needed personal health services and assure the provision of health care

**Q214** Requirement 1: My department has a process for identifying populations who lack access to health care. No

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**Q215** If yes, how are the populations identified? (Select all that apply) Respondent skipped this question

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**Q216** Requirement 2: My department has a report or has developed a report that identifies populations who experience barriers to health care services. No

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**Q217** If yes, in the report, are the populations who experience barriers identified by the following? (Select all that apply) Respondent skipped this question

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Page 53: 10 ES - #7 Link people to needed personal health services and assure the provision of health care

**Q218** Requirement 1: My department has a process used to identify gaps in health care services and barriers to health care services. **No**

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**Q219** If yes, how are the gaps in health care services and barriers to care identified? (Select all that apply) **Respondent skipped this question**

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**Q220** 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. **No**

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**Q221** If yes, does the report include? (Select all that apply) **Respondent skipped this question**

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Page 54: 10 ES - #7 Link people to needed personal health services and assure the provision of health care

**Q222** Requirement 1: My department participates in a collaborative process for developing strategies to improve access to health care. **No**

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**Q223** If yes, what strategies has the coalition developed to improve access to health care services and reduce barriers to care? (Select all that apply) **Respondent skipped this question**

---

Page 55: 10 ES - #7 Link people to needed personal health services and assure the provision of health care

**Q224** Requirement 1: My department has collaboratively implemented strategies to improve access to health care services for those who experience barriers. **No**

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**Q225** If yes, what strategies have been implemented to improve access to health care services? (Select all that apply) **Respondent skipped this question**

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Page 56: 10 ES - #7 Link people to needed personal health services and assure the provision of health care

**Q226** 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. **No**

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**Q227** If yes, what are some of the initiatives? (Select all that apply) **Respondent skipped this question**

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

**Q228** Requirement 1: My department actively promotes public health as a career choice. **No**

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**Q229** If yes, how? (Select all that apply) **Respondent skipped this question**

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

**Q230** Requirement 1: My department has a workforce development plan. **No**

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**Q231** If yes, does the workforce development plan? (Select all that apply) **Respondent skipped this question**

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**Q232** If no, is the plan in development? **No**

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**Q233** Requirement 2: My department has implemented its workforce development strategies. **No**

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**Q234** If yes, what workforce development strategies have been implemented? (Select all that apply) **Respondent skipped this question**

---

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

**Q235** Requirement 1: My department ensures a competent workforce. **Yes**

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**Q236** If yes, how does your department ensure a competent workforce? (Select all that apply) **Job descriptions and requirements for specific certifications, skills, training, experience and education**

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

**Q237** Requirement 1: My department documents staff's completion of their professional development activities. **No**

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**Q238** If yes, what types of professional development activities? (Select all that apply) **Respondent skipped this question**

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**Q239** Requirement 2: My department provides leadership and/or management development training programs. **No**

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**Q240** If yes, what type of leadership and/or management development training programs? (Select all that apply) **Respondent skipped this question**

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**Q241** Requirement 3: My department provides an environment in which employees are supported in their jobs. **Yes**

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**Q242** 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**

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Page 61: Copy of page: 10 ES -#9 Evaluate effectiveness, accessibility, and quality of personal and

**Q243** Requirement 1: My department has adopted a performance management system with input from staff and leadership. **No**

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**Q244** If yes, does the performance management system include? (Select all that apply) **Respondent skipped this question**

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**Q245** If no, is the department in the process of adopting a system? **No**

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

**Q246** Requirement 1: My department has a committee or team that is responsible for implementing the performance management system. **Respondent skipped this question**

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**Q247** If yes, does the committee or team? (Select all that apply) **Respondent skipped this question**

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**Q248** If yes, for which area(s) has the performance management system been implemented? (Select all that apply) **Respondent skipped this question**

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

**Q249** Requirement 1: My department collects, analyzes, and draws conclusions from feedback from different customer groups. **No**

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**Q250** If yes, what groups have you surveyed? (Select all that apply) **Respondent skipped this question**

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**Q251** Requirement 2: My department has implemented changes/improvements based on the customer feedback. **No**

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**Q252** If yes, what is one (1) change that your department has implemented? **Respondent skipped this question**

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

**Q253** Requirement 1: My department provides staff development in performance management. **No**

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**Q254** If yes, how does your department provide staff development in performance management? (Select all that apply) **Respondent skipped this question**

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

**Q255** Requirement 1: My department has a written quality improvement (QI) plan that is dated within five years. **No**

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**Q256** If yes, does the QI plan address the following? (Select all that apply) **Respondent skipped this question**

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**Q257** If no, where is your department in the process? (Select one) **Respondent skipped this question**

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Page 66: 10 ES -#9 Evaluate effectiveness, accessibility, and quality of personal and population-based health

Connecticut Local Health Annual Report SFY 2019

**Q258** Requirement 1: My department has documentation of implemented quality improvement activities based on the QI plan. **No**

---

**Q259** If yes, did the documented QI activities include the following? (Select all that apply) **Respondent skipped this question**

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

**Q260** Requirement 1: My department has incorporated an evidence based or promising practice in a process, program or intervention. **No**

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**Q261** If yes, what is/are the source(s) of the evidence-based or promising practice? (Select all that apply) **Respondent skipped this question**

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**Q262** If yes, please upload or describe one promising practice implemented. **Respondent skipped this question**

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**Q263** Promising practice description **Respondent skipped this question**

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

**Q264** Requirement 1: My department has communicated research findings and their public health implications to stakeholders, other health departments, other organizations, and/or the public. **Yes**

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**Q265** If yes, describe the research.

THE HEALTH DEPT IS INVOLVED WITH DR. GARY ROBINS FROM UCONN AND WE ARE COLLABORATIVILLY WORKING ON SODIUM CONTAMINATION OF THE GROUND WATER

---

**Q266** 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,**  
**General public**

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Page 69: 10 Essential Services Certification

**Q267** 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**

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