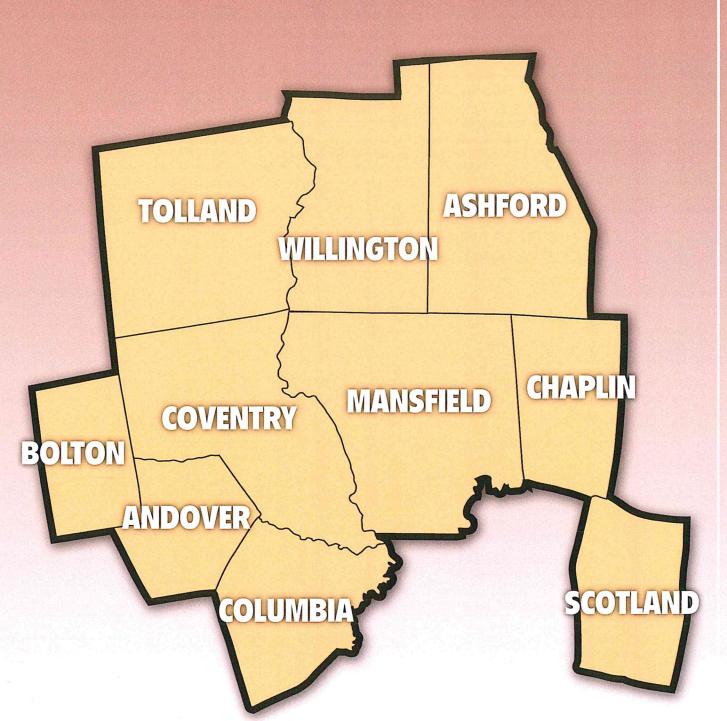


2019-2020 ANNUAL



Serving the towns of:

Andover, Ashford, Bolton, Chaplin, Columbia, Coventry, Mansfield, Scotland, Tolland and Willington

Population: 80,481 Service Area: Approximately 208 Square Miles

Health District Staff

Robert L. Miller, MPH, RS	Director of Health
Kenneth Dardick, MD	Medical Advisor
Glenn Bagdoian, RS	Sanitarian II
Millie Brosseau	Office Manager
Holly Hood, MPH, RS	Sanitarian II
Zachary Jezek	Environmental Health Specialist
Thad King, MPH, REHS, RS.	Sanitarian II
Derek May	Public Health Emergency Preparedness Coordinator
Lynette Swanson	Chief Sanitarian
Cecile Serazo, BSN, RN	Community Health and Wellness Coordinator



Top left to right: Millie Brosseau, Rob Miller, Ande Bloom, Zac Jezek Middle left to right: Lynette Swanson, Holly Hood, Thad King, Glenn Bagdoian Bottom left to right: Cecile Serazo, Derek May

EHHD Board of Directors

Elizabeth Paterson (Chair)
Ralph Fletcher Town of Ashford
Eric Anderson
Joshua Kelly Town of Bolton
John Carrington Town of Mansfield
Robert Morra (Alternate) Town of Bolton
Tammy Nuccio
William Kaufold Town of Mansfield
Barbara Syme Town of Scotland
M. Deborah Walsh Town of Coventry
Michael Rosen Town of Tolland
Erica Wiecenski Town of Willington
Vacant Town of Chaplin



Top left to right: John Elsesser, Erika Wiecenski

2nd row left to right: Eric Anderson, M. Deborah Walsh, Michael Rosen

3rd row left to right: Robert Miller, Kenneth Dardick, Mark Walter

4th Row left to right: Holly Schaeffer, John Carrington, Elizabeth Paterson

Bottom: Charmaine Bradshaw-Hill, Tammy Nuccio

Mission Statement -

Eastern Highlands Health District is committed to enhancing the quality of life in its communities through the prevention of illness, promotion of wellness, and protection of our human environment.

Vision - Healthy people, healthy communities ... healthier future.

Message from the Director

A Transitional Year

The 2019/2020 fiscal year for the Eastern Highlands Health District is noteworthy by what can be identified as two periods of time with distinctly different objectives. The first half of the fiscal year was comprised of our usual focus on identifying and implementing agency enhancements, while sustaining a full scope of quality local

public health services. The second half of the year quickly evolved into a full-blown response effort to address the COVID-19 pandemic. The highlights discussed below represent a transitional period for our agency that demonstrates the responsiveness and adaptability of our agency to address the shifting public health needs of our local communities. With that, below is a rundown of the highlighted activities and initiatives for the 2019-2020 Fiscal Year.

Community Health – In addition to our regular scope of community health services, the Substance Abuse in our Communities Workgroup has been active over this year. The group implemented a robust community awareness and education initiative, utilizing print, web, and in-person events. They developed, distributed and promoted a model policy for NARCAN staging in public buildings. They also partnered with Coventry PD on a drug take back campaign netting 115 lbs of drugs for disposal.

Environmental Health – We filled field staff vacancies this year welcoming two highly qualified professionals to the EHHD team, Thad King and Zac Jezek. Working with the DEEP, we continue to support a number of our member towns challenged by sodium chloride contamination in private residential wells. And finally, after a number of years of development and a significant investment in resources, the Viewpoint Cloud online permit application and payment system was fully launched in March providing a convenient and efficient method to process permits with our agency.

Vector Borne Disease Control – Working with DPH and area health districts, EHHD developed and implemented a response to an outbreak of Eastern Equine Encephalitis. The response included DPH weekly conference calls, distribution of educational messaging, risk reduction guidance for schools and towns, and weekly updates to community partners. Working with the DPH infectious disease control program, EHHD reviewed and provided feedback on the proposed state-wide Eastern Equine Encephalitis Response Plan for 2020.

Emergency Public Health Preparedness and Response – February marked the transition into COVID-19 response activities. They include, but are not limited to, significantly expanding contact tracing capacity, coordinating with UConn on contact tracing, coordinating with schools on scholastic sports, distributing PPE to area healthcare providers, facilitating business compliance with reopen sector rules and executive orders, supporting town governments with safe workplace guidance for essential workers, infection control guidance for first responders, town recreation department guidance support for youth sports programs and summer camps, recruitment and retention of Medical Reserve Corps members, and planning/preparedness for a mass vaccination campaign.

In closing, we anticipate that the COVID-19 response will continue to command significant resources, and present many challenges into the next fiscal year. I want to assure our communities that all of us at the Eastern Highlands Health District remain committed and dedicated to providing essential, quality local public health services, with a robust response to this pandemic at the forefront. With kindness, cooperation, and partnership there is no challenge that we as a community cannot overcome.

My door is always open.

Yours in Health,

Robert L. Miller, MPH, R.S. Director of Health





Public Health

Prevent. Promote. Protect.

Local health departments work across the nation to prevent disease, promote health and protect communities. The National Association of County and City Health Officials (NACCHO) developed this logo to promote universal recognition of this critical work and to provide a consistent image and message for local health departments. EHHD is proud to support this national effort.

What is a Health District?

Health districts are much like full-time municipal health departments in the services they provide. They are governmental entities that carry out critical local public health functions that include: infectious disease control, code enforcement and health education. Through a binding relationship with member towns (provided for in state statutes), services are offered to a group of towns that may not otherwise have a full-time health department without district membership. Joining a health district is an attractive option for towns because they are provided access to full-time public health services at minimal cost. District membership increases the ability of a town to benefit from grant-funded public health programs. Towns that are members of health districts provide annual per capita contributions to support health district operations.

Top 10 Benefits Your Community Receives as a Member of a Public Health District:

- 1. A professionally staffed department with fully trained and certified personnel.
- 2. Improved availability of services; seven days a week, 24 hours a day for emergencies.
- 3. Less fragmentation of services.
- 4. Uniform enforcement of state laws and regulations, codes and ordinances.
- 5. A regional approach to public health problems that cross town lines.
- 6. Pooling of manpower for backup services in times of need.
- 7. The capability to address a wider scope of public health problems and issues than your community could manage on its own.
- 8. Reduction of waste and maximized effectiveness through problem identification, priority setting, improved coordination and more efficient use of resources.
- 9. Eligibility for extensive state and federal funding, bringing services to the local level that might not otherwise be possible.
- 10. An opportunity for your town to network with other local health departments and state agencies.

10 Essential Services of Local Public Health:

- Monitor health status to identify community health problems.
- 2. **Diagnose** and **investigate** health problems and health hazards in the community.
- 3. **Inform, educate** and **empower** people about health issues.
- 4. **Mobilize** community partnerships to identify and solve health problems.
- 5. **Develop** policies and plans that support individual and community health efforts.
- 6. **Enforce** laws and regulations that protect health and ensure safety.
- 7. **Link** people to needed personal health services and assure the provision of health care when otherwise unavailable.
- 8. **Assure** a competent public and personal health care workforce.
- 9. **Evaluate** effectiveness, accessibility and quality of personal and population-based health services.
- 10. **Research** for new insights and innovative solutions to public health problems.

EHHD'S PROGRAMS AND SERVICES

We provide the community with a range of programs and services to promote and protect environmental, personal, and community health.

Emergency Preparedness

For years, Eastern Highlands Health District (EHHD) has built partnerships to prepare for a successful community response to any emergency or disaster. Taking an all-hazard approach to disaster planning, we can be better prepared to respond.



During 2019, EHHD continued to work on many emergency preparedness initiatives. We worked closely with our local, regional, and state partners in regions 3 and 4. We improved our capacity to address emerging infectious disease by enrolling in the Connecticut Vaccine Program and supporting the annual Region 4 Drive-Thru Flu Clinic. Our EHHD Medical Reserve Corps provided first aid support at the RiMaConn relay race and Hartford Marathon and supported a mini-conference to train Region 4 disaster volunteers.

Early in 2020 a novel coronavirus arrived on the shores of America. Much of our Medical Counter Measures planning began to shift away from anthrax and pandemic flu scenarios to the reality of the COVID-19 pandemic. EHHD implemented an Incident Command System structure to help manage the response. Staff began working remotely or in an alternate manner to ensure a safe work environment. EHHD staff worked with community partners to interpret COVID guidance, and became a conduit to get appropriate PPE into the hands of key agencies. The MRC was activated to assist with contact tracing, and dozens of volunteers were added to its ranks. (Interested volunteers can sign up at www.CTresponds.ct.gov) As the situation continues to develop, EHHD will communicate and coordinate actions with its partners in the community, across the state and across the nation.

Even as we seek to mitigate the effects of COVID-19 in the months and years ahead, other threats to public health will certainly occur and all-hazards planning remains as important as ever. Public Health will continue to be flexible and adaptable and will be part of a whole-community disaster response.

Environmental Programs

Water Quality - EHHD reviews and approves private well sites and drinking water analysis reports to assure that the drinking water supplies are free of harmful bacteria, chemicals and pollutants. Our sanitarians provide guidance and information to residents with water quality issues and concerns. The health district also inspects and monitors the water quality at public bathing areas and public swimming pools to ensure compliance with water quality and health safety standards.

Subsurface Sewage Disposal - EHHD sanitarians conduct site evaluations and soil testing, review septic system design plans, issue permits to construct, and perform site inspections during construction to verify compliance with codes and technical standards. The health district is also required to evaluate the septic system impacts from proposed building additions, accessory structures and use changes on all properties served by on-site subsurface sewage disposal systems.

Food Protection - All food service establishments are inspected

frequently and operating licenses are renewed annually. Temporary and special events, including Farmers' Markets, where food is served to the public, are also permitted and inspected for food safety compliance.



Campground/Daycare/Youth Camp Inspections -EHHD conducts annual family campground inspections, biennial daycare inspections, and assists the State of Connecticut with youth camp kitchen inspections.

Complaint Investigation/Code Enforcement - EHHD staff investigate all complaints received by the department, ranging from food protection and water quality concerns to housing, sewage, vermin problems, and COVID-19. Where conditions are found that violate the Public Health Code or Connecticut General Statutes, and such conditions are not corrected voluntarily, property owners or violators are then subject to enforcement procedures.

Childhood Lead Poisoning Prevention - EHHD receives laboratory reports of blood lead tests for children under age 6 when blood lead levels are 5 µg/dL or above, and tracks these cases until the child's blood lead level is confirmed below this reference level. The health district provides re-test reminder letters and educational packets to these families to help them understand the health risks associated with lead exposure and assist them in identifying and reducing lead hazards in their child's environment. Elevated blood lead levels can require additional intervention by the health district, including property inspections and lead abatement enforcement.

Communicable Disease Surveillance & Control

Disease Surveillance - EHHD conducts communicable disease surveillance to detect outbreaks. Examples of communicable diseases include but are not limited to: COVID-19, hepatitis, rabies, and foodborne illness. Statistics detailed at the end of this report represent the total number of reported disease cases that have public health significance in member towns (it is generally acknowledged that these diseases are underreported within the population).

Disease Control - Clinical laboratory and physician case reports are reviewed for possible follow-up and investigation. Outbreaks of disease are investigated, and measures to prevent and control further spread of disease are implemented when necessary. During the second part of the fiscal year, EHHD has done extensive work to reduce the spread of COVID-19.

Community Health

EHHD Health Promotion initiatives focus on developing sustainable interventions and nurturing partnerships to



build a healthier community. While targeted programming is utilized when appropriate, our current focus is on policy, systems, and environmental changes to promote and encourage healthy lifestyles for all member town residents, employees, and visitors. In the summer months, EHHD worked diligently to mitigate the

spread of disease from mosquitos and ticks. Informational signs were provided to member towns. The plaques provide information on the prevention of acquiring Lyme disease, and were placed in parks and near trails. During the winter, EHHD distributed radon test kits to residents. These kits allow residents to be aware of the current radon levels in their home, and to take action if necessary.

In January, COVID-19 became an international health emergency, and the Community Health team responded with education and support to the community to mitigate the risk of transmission and to help residents stay healthy while maintaining social distancing recommendations. Efforts included the production of guidance documents that were distributed to member town libraries, community centers, health centers, senior centers, and schools. EHHD also conducted contact tracing on COVID-19 cases in our district, thereby supporting infected residents and reducing transmission in the community.

Tobacco Free Living - Focusing on policy, systems, and environmental changes, EHHD developed toolkits to encourage towns in Tolland County to adopt smoke free policies or ordinances to make their workplaces smoke free. The toolkits can be found on the EHHD website. EHHD continues to assist the Town of Mansfield with implementation of its smoke free workplaces policy. A toolkit was developed to assist other organizations/communities to implement similar policies. In addition, EHHD continues to update a summary of smoking cessation resources. The resources include: web, phone, text, and nicotine replacement

Substance Abuse In Our Community Workgroup - In response to the opioid and substance use epidemic affecting our



towns, EHHD created a workgroup comprised of representatives from municipal leadership, human services, social workers, first responders, school leadership, and child advocacy. The group also continued with prior initiatives. including partnering with the Coventry Police Department on a successful drug

take back campaign, and partnering with the Town of Mansfield in the development of town policies to stage NARCAN in public buildings. Resources are posted on the EHHD website and brochures were distributed to town leadership, libraries, and social service departments.

Be Well - Developed by EHHD in 2006, this program provides comprehensive programming and promotion on a contractual basis to local employers. The goal of this employee wellness program is to improve the overall health and wellness of employees through initiatives that target risk factors for health. This program is provided as a full contracted service to the Town of Tolland. Basic Be Well initiatives are also provided

to member town, school employees, and private sector businesses through the State Preventive Health Block Grant (to focus on policy and environmental



changes to reduce the incidence of obesity in worksites). Each year Be Well contributes to strong health outcomes and a significant return-on-investment for participating employers. Examples of programs and policies implemented include, but aren't limited to, monthly wellness newsletters, online wellness resources, on-site biometric health screenings, and wellness seminars. You may learn more about the program at www. ehhd.org/be_well. If you are interested in having Be Well as part of your business or organization, please send an email to: Be_well@ehhd.org.

Health Education: EHHD provides its member towns and residents with newsletters, social media sites and web pages for health information, and regular updates with health and wellness "hot topics". EHHD continually updates the social media pages (Facebook and Twitter). We focus "hot topic" updates on providing clear and concise information on health topics pertaining to a particular month or season. EHHD participated in several educational workshops and health fairs throughout the year focusing on topics such as hurricane/ emergency preparedness, childhood vaccines, healthy snacks for kids, planning for care as you age, and flu prevention and







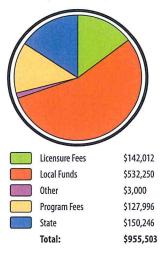
Plan4Health Initiative: Anchored by the American Planning Association (APA) and the American Public Health Association (APHA), the Plan4Health grant funded EHHD and the Community Health Action Response Team (CHART) to

implement strategies to PLAN4Health increase physical activity and access to healthy food

for our region. During the year EHHD continually marketed the Toolkit to the planning and zoning boards and commissions of small and rural towns in Connecticut. The Toolkit is continually maintained and updated to provide the most current and accurate information. A survey was introduced last year to gain feedback on the Toolkit and its ability to meet the needs of users. This survey will be reviewed and analyzed to make changes for the future. The toolkit and survey is available online at www.healthyeasternct.com

EHHD Budget Fiscal Year 2019/2020*

FY2020 TOTAL REVENUES (see table below)



FY2020 TOTAL EXPENDITURES (see table below)



Vehicle&Travel Miscellaneous	\$10,298 \$4,994
Vehicle&Travel	\$10,298
Supplies & Materials/Software	\$18,643
Purchased Services	\$44,760
Other	\$3,000
Legal	\$4,192
Insurance	\$13,870
Equipment	\$945
Educational/Training	\$313
Communications	\$4,870
Administrative Overhead	\$30,040
Personnel: Community Health	\$64,486
Personnel: Environmental Health	\$448,350
Personnel: Administrative/Management	\$212,848
	Personnel: Environmental Health Personnel: Community Health Administrative Overhead Communications Educational/Training Equipment Insurance Legal Other Purchased Services

^{*} Figures not audited at the time of this publication.

EHHD Service and Activities Data by Town

	Andover	Ashford	Bolton	Chaplin	Columbia	Coventry	Mansfield	Scotland	Tolland	Willington	District Totals
COMPLAINTS											
AIR QUALITY	0	1	0	0	0	1	0	0	0	1	3
ANIMALS/ANIMAL WASTE	0	0	0	1	0	0	0	1	2	0	4
ACTIVITY WITHOUT PROPER PERMIT	rs o	0	0	0	0	0	0	0	0	0	0
FOOD PROTECTION	0	1	0	0	1	2	8	0	5	1	18
HOUSING ISSSUES	1	0	2	2	3	2	8	0	2	8	28
EMERGENCY RESPONSE	1	1	2	0	0	1	1	0	2	2	10
REFUSE/GARBAGE	0	0	1	0	0	1	2	0	2	4	10
RODENTS/INSECTS	0	0	0	0	0	0	1	0	0	1	2
SEPTIC/SEWAGE	3	7	3	0	0	1	2	0	16	1	33
OTHER	0	0	0	0	1	0	4	1	2	0	8
WATER QUALITY	0	0	1	0	0	0	3	0	5	11	20
COVID-19	1	2	4	1	0	3	15	0	7	10	43
TOTAL	6	12	13	4	5	11	44	2	43	39	179
HEALTH INSPECTION											
GROUP HOMES	0	0	0	0	0	1	0	0	1	0	2
DAY CARE	1	0	2	1	2	0	3	0	4	1	14
CAMPS	0	1	0	0	0	0	1	1	0	1	4
PUBLIC POOL	0	2	0	0	0	1	7	1	1	2	14
OTHER	0	0	0	0	0	0	4	0	1	0	5
SCHOOLS	0	0	0	0	0	0	2	0	0	0	2
MORTGAGE, FHA, VA	0	0	0	0	0	0	0	0	0	0	0
BATHING AREAS	0	0	0	0	0	0	0	0	0	0	0
TOTAL	1	3	2	1	2	2	17	2	7	4	41
ON-SITE SEWAGE DISPOSAL											
SITE INSPECTION ALL SITE VISITS	42	84	81	28	128	197	168	23	111	38	900
DEEP HOLE TESTS - NUMBER OF HOL		74	54	41	71	211	107	24	186	46	853
PERCOLATION TESTS - NUMBER OF HOLE		21	17	14	15	38	40	9	42	12	223
PERMITS ISSUED, NEW	6	3	1	0	1	18	2	0	9	6	46
PERMITS ISSUED, REPAIR	13	19	19	11	24	47	36	7	52	19	247
SITE PLANS REVIEWED	14	24	22	12	30	66	34	7	48	27	284
PUBLIC HEALTH REVIEWS	39	28	33	19	53	139	86	2	175	33	607
WELLS	AL PROPERTY OF						18 N. 18				
WELL SITES INSPECTED	1	2	2	2	7	12	3	0	4	1	34
WELL PERMITS ISSUED	7	4	7	2	11	28	10	0	14	6	89
			NAMES OF THE PARTY								
LABORATORY ACTIVITIES (SAMI	AND THE PERSON NAMED IN	A STATE OF THE PARTY NAMED IN	0	Kanada a	0	2	13	0	10	3	28
POTABLE WATER	0	0	0	0	25	112	13	0	27	24	253
SURFACE WATER	14	12	26 0	0	0	0	0	0	0	0	0
GROUND WATER	0	0	0	0	1	0	0	0	0	0	1
RABIES LEAD	0	0	0	0	0	0	1	0	0	0	1
OTHER	4	2	4	2	6	6	5	0	7	4	40
				2	0	U .		TAY SECTION			
FOOD PROTECTION									(A) (A)		
INSPECTIONS	19	36	28	17	37	49	249	3	64	40	542
REINSPECTIONS	3	7	5	5	0	11	46	0	8	12	97
TEMPORARY PERMITS	1	15	18	5	2	23	15	12	15	13	119
TEMPORARY INSPECTIONS	0	0	3	5	0	40	6	6	1	0	61
PLAN REVIEWS	0	1	3	0	1	3	8	1	0	1	18
PRE-OPERATIONAL INSPECTIONS	1	4	2	1	1	3	10	0	2	9	33
LEAD ACTIVITIES											San A
HOUSING INSPECTION	0	0	0	0	0	1	3	0	0	0	4
ABATE PLAN REVIEWED	0	0	0	0	0	0	0	0	0	0	0
MISCELLANEOUS ACTIVITIES											
PLANNING AND ZONING REFERRALS	S 0	0	0	0	0	1	1	0	0	0	2
SUBDIVISION REVIEWED (PER LOT)	0	3	0	0	3	2	0	0	1	2	11

Selected Reportable Diseases by Town*											
	Andover	Ashford	Bolton	Chaplin	Columbia	Coventry	Mansfield	Scotland	Tolland	Willington	District Totals
Babesiosis	0	0	1	0	2	2	2	0	2	1	10
Campylobacter	0	0	3	1	1	1	4	0	0	0	10
Chlamydia	2	5	9	4	1	27	12	0	23	13	96
COVID-19	9	18	22	3	24	45	35	0	48	15	219
Cryptosporidium	0	0	0	0	0	2	1	0	0	0	3
Cyclospora	0	0	0	1	0	0	2	0	0	1	4
E. Coli 0157/STEC	0	0	0	0	0	0	0	0	0	0	0
Ehrlichiosis/Anaplasmosis	0	0	0	0	0	0	0	0	0	0	0
Giardia	0	0	1	0	0	0	0	0	0	0	1
Gonorrhea	1	2	2	1	0	5	10	0	6	3	30
Group A Streptococcus	0	0	0	0	0	0	0	0	2	1	3
Group B Streptococcus	1	0	0	0	0	0	2	0	1	1	5
Haemophilus Influenzae	0	0	0	0	0	0	0	0	0	0	0
Hepatitis A	0	0	0	0	0	0	0	0	0	0	0
Hepatitis B	0	0	0	0	0	0	0	0	0	0	0
Hepatitis C	0	1	2	0	1	2	0	0	4	1	11
Lead-Elevated Blood Lead Levels in children	n										
up to age 6 (5-9.9 ug/dl)	0	0	0	0	0	0	2	0	0	5	7
Lead-Elevated Blood Lead Levels in children	n										
up to age 6 (10-19 ug/dl)	0	0	0	0	0	0	0	0	0	0	0
Lead-Elevated Blood Lead Levels in childrer	1										
up to age 6>20 ug/dl	0	0	0	0	0	0	0	0	0	0	0
Listeria	0	0	0	0	0	0	0	0	0	0	0
Lyme Disease	2	1	1	2	2	8	5	2	7	5	35
Measles	0	0	0	0	0	0	0	0	0	0	0
Methicillin Resistant Staphylococcus Aureus	0	0	0	0	0	0	0	0	0	0	0
Mumps	0	0	0	0	0	0	2	0	0	0	2
Neisseria Meningitis	0	0	0	0	0	0	1	0	0	0	1 .
Pertussis	0	0	0	0	0	0	0	0	0	0	0
Rubella	0	0	0	0	0	0	0	0	0	0	0
Salmonella	0	1	2	0	1	0	2	0	0	2	8
Shigella	0	0	0	0	0	0	0	0	0	0	0
Streptococcus Pneumoniae	0	0	0	0	1	2	0	0	0	0	3
Syphilis	0	1	0	0	0	0	0	0	0	1	2
Tuberculosis Cases (Active)	0	0	0	0	0	0	1	0	0	0	1
Varicella	0	0	0	0	0	0	0	0	0	0	0

 $[\]boldsymbol{\ast}$ The case numbers above are considered to be below actual figures due to under reporting.



4 South Eagleville Road Mansfield, CT 06268