



Eastern Highlands Health District

2011-2012

ANNUAL REPORT



Serving the towns of:

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

Population: 81,050 Service Area: Approximately 208 Square Miles

Health District Staff

Robert L. Miller, MPH, R.S. Director of Health
Kenneth Dardick, MD Medical Advisor
Glenn Bagdoian, R.S. Sanitarian II
Ande Bloom, MS, RD Community Health
and Wellness Coordinator
Millie Brosseau Administrative Assistant
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Preparedness Coordinator
Geoffrey Havens, R.S. Sanitarian II
Holly Hood, MPH, R.S. Sanitarian II
Jeff Polhemus, R.S. Chief Sanitarian
Jody Schmidt, MS, R.S. Sanitarian II



Back: Robert Miller, Jeff Polhemus, Geoff Havens, Glenn Bagdoian
Front: Holly Hood, Millie Brosseau, Ande Bloom, Jody Schmidt

EHHD Board of Directors

Elizabeth Paterson (Chair).....Town of Mansfield
John Elsesser (Vice Chair).....Town of Coventry
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Maria Capriola (Alternate)Town of Mansfield
Rick FieldTown of Tolland
Ralph FletcherTown of Ashford
Matt HartTown of Mansfield
Michael Kurland.....Town of Mansfield
Jonathan LuizTown of Columbia
Christina Mailhos (Alternate).....Town of Willington
Paul SchurTown of Willington
Tierney Tully.....Town of Chaplin
M. Deborah WalshTown of Coventry
Steve Werbner.....Town of Tolland
Mike Zambo (Alternate).....Town of Ashford
VacantTown of Andover
VacantTown of Scotland



Back: Rick Field, Steve Werbner, Jonathan Luiz, John Elsesser, Ralph Fletcher,
Michael Kurland **Front:** Matt Hart, Joyce Stille, Elizabeth Paterson, Christine
Mailhos, Paul Schur

Mission Statement

The mission of the Eastern Highlands Health District (EHHD) is to preserve public health through the prevention of illness and promotion of wellness within its local communities.

This mission is achieved through enforcing state and local health regulations; monitoring the health status of the community; informing and educating citizens on health issues; operating programs that support community health efforts; and collaborating with other public health partners in pursuit of our common goal.



Message from the Director

It is my pleasure to present the community with the Eastern Highlands Health District Annual Report for the 2011 – 2012 fiscal year. The Health District, like many public agencies around the country, continues to be challenged by difficult economic times. Despite this challenge, we continue to move local public health forward with many new and exciting initiatives and activities. The following highlights are just a few of the initiatives, and activities performed by our agency over the past year.

Community Health - In July, the EHHD partnered with the Connecticut Department of Public Health (DPH) and two other local health districts on a proposal to the CDC to build community capacity to promote healthy behaviors. In September, the DPH announced an award of nearly 2.5 million dollars over five years. The EHHD received \$419,000 from this award. The fund will be used to conduct a community health needs assessment, expand our coalition membership, and engage the coalition to develop strategies targeting chronic disease in at risk populations that will help make the healthy choice the easy choice.

The Health District employee wellness program, “Be Well”, expanded to the town of Tolland, and is now serving Tolland employees. We are thrilled to have Tolland onboard as part of the “Be Well” family!

Environmental Health - Preventing illness through enforcement of the Connecticut Public Health Code continues to be the mainstay of environmental health services provided by Eastern Highlands Health District. These services go beyond the traditional health inspection, complaint investigation, and water sampling. Our sanitarians supported member towns on a number of special projects during this past year. Highlights include the Bolton sewer project, the North Coventry Fire Department building project, and the Tolland Waste Water Facilities Plan.

For additional details and information on all of the above program areas, including Public Health Emergency Preparedness, check out the Eastern Highlands Health District website: www.ehhd.org.

Lastly, I would like to take this opportunity to acknowledge the many volunteers and community partners that support the Eastern Highlands Health District in our efforts to prevent illness and promote wellness in the citizens we serve. Together we comprise a local public health system that continues to make great strides in protecting the vulnerable, preventing communicable disease, and promoting healthy behaviors to combat chronic disease. I thank you for your dedication and commitment to local public health. 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. The 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 with 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.

EHHD History

As one of 51 full time health departments in Connecticut, the Eastern Highlands Health District provides services to a little more than two percent of the state's population. The district was formed in June of 1997, when the town leaders and residents of Bolton, Coventry and Mansfield realized that pooling resources could increase the scope and quality of public health services by providing a full-time public health staff while reducing expenses. In 2000, the Town of Tolland joined the District, and subsequently, the Towns of Willington (in 2001) and Ashford (in 2004) also joined. In June of 2005, four other contiguous towns (Andover, Chaplin, Columbia and Scotland) became part of the Health District. Each of these ten towns now has the benefits of full-time public health services, ensuring that the core functions of public health are met for these communities.

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:

1. **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

Eastern Highlands Health District works diligently to comply with all State of Connecticut mandates for district health departments. We provide the community with a range of programs and services to promote and protect environmental, personal, and community health.

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. The health district also inspects and monitors the water quality at public bathing areas and public swimming pools to assure compliance with water quality and health safety standards.

Subsurface Sewage Disposal - EHHD's sanitarians conduct soil testing, review septic system design plans, issue permits to construct, and conduct site inspections during construction to verify compliance with codes and technical standards.



Food Protection - All food service establishments are inspected frequently and operating licenses are renewed annually. Temporary and special events where food is served to the public are also licensed 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 and vermin problems. Where conditions are found that violate the Public Health Code or Connecticut General Statutes, and the conditions are not immediately corrected, property owners or violators are subject to enforcement procedures.

Communicable Disease Control & Surveillance

Disease Surveillance - EHHD conducts communicable disease surveillance to detect outbreaks. Examples of communicable diseases include but are not limited to: hepatitis, rabies, and food borne 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.

Emergency Preparedness

Public Health Emergency Preparedness Planning

EHHD has updated both its Local Public Health Emergency Response Plan and the Mass Dispensing of Prophylactic Medications Annex to that plan. These plans provide processes that can be used in the event of a large-scale natural or manmade emergency, to insure that appropriate public health and medical resources

will be available and coordinated effectively. The EHHD Mass Dispensing Annex received a score of 93.5 in its Technical Assistance Review conducted by the Connecticut Department of Public Health (CT DPH) and the Centers for Disease Control and Prevention (CDC).

Mass Dispensing plans have been expanded to include a primary dispensing site at E.O. Smith High School and a Drive-through dispensing site at the Mansfield Middle School.

EHHD participates fully in the Connecticut Division of Emergency Management and Homeland Security (DEMHS) regional planning process in Region 3 and Region 4, to develop all-hazards plans for a robust public health response in all emergencies. The towns covered by the Northeast, Windham and Southeast Councils of Government constitute the DEMHS planning Region 4 and include seven of the ten EHHD member towns. The Capital Region Emergency Planning Committee (CREPC) encompasses DEMHS Region 3 and includes the remaining three of the EHHD member towns. Taken together, the total population of the EHHD - Mass Dispensing Area (MDA) is 82,398. This planning and response framework facilitates the coordination of regional approaches to public health and medical preparedness response, and supports an all-hazards approach when responding to various emergencies. The Region 3 planning process was once again recognized for excellence by the National Association of County and City Health Officials (NACCHO) - Project Public Health Ready.

Community Volunteers also play a critical role in emergency response planning. An effective response to a public health or other emergency would be impossible without a dedicated corps of volunteers. EHHD continues to recruit volunteers from the community to fill medical and non-medical roles in an emergency. While medical volunteers fill key roles in the emergency response team, additional non-medical volunteers are needed to work in areas such as patient registration, clinical flow controllers, medical assistants, security personnel, and medical materials management workers. Training and practice are ongoing to improve the skill levels of volunteers and District staff.

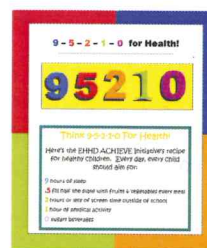
The District has been involved in a number of regional drills and exercises throughout this year. These included: regional communication and staff call down drills; regional clinic operations drills, The Millstone - UCONN Evacuation - Host Community Exercise and the Statewide Hurricane Exercise.

Eastern Highlands Health District works closely with local Emergency Managers, social service departments, and other community partners to meet the needs of individuals requiring additional assistance during emergencies. These vulnerable members of our communities often have medical conditions and other restrictions that limit their mobility or create transportation issues that may hamper their participation in the dispensing process. Plans are developed that include an out-reach component to distribute medications door-to-door in the community and/or provide special transportation directly to the Point of Distribution.

Health Promotion

Health Promotion initiatives in the Health District focus on 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.

ACHIEVE Initiative - In January 2009 the EHHD was awarded a three-year grant by the National Association of Chronic Disease Directors to address modifiable risk



factors for chronic disease and obesity in the community. Championed by a diverse community coalition, the Community Health Action Response Team (CHART) focused primarily on local access to opportunities for physical activity, and access to nutritious foods through policy and environmental

change. Accomplishments this year included: Hosting a state-wide Action Institute in September at UConn; hosting a leadership breakfast in January 2012 with Mark Fenton as a keynote speaker; assisting several towns with development of Safe Routes to School master plans; and contributed technical assistance and support to member towns' efforts to improve policies and change the environment to make the healthy choice the easy choice (i.e. snack policies at pre-k & recreation programs, nursing mother protocol for worksites, and conducting policy scans).

Community Transformation Initiative -

The health district was awarded CDC funding through the State Department of Public Health in November 2011 to use the ACHIEVE model of engaging a community coalition to improve policies and the environment across EHHD towns and all of Tolland County in three priority areas: tobacco-free living, healthy eating and active living, and quality clinical preventive services with a focus on at-risk populations and groups experiencing health disparities. The first two years of the grant focus on capacity building and identifying existing resources and areas of need.

Asthma - The EHHD is represented on the Region 3 Asthma Coalition. Through funding from the State Department of Public Health, six in-home assessments for environmental asthma triggers were provided to families in the health district.



Keep It Clean - A New England regional campaign to educate homeowners on lead safety issues during home painting and renovation projects is supported by the EHHD Health Education Program. Local hardware stores participated in the program and received materials to distribute to consumers as well as resources for employee training.

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 and issues that influence health. This past year Be Well was a contracted service to four employers in health district towns, and basic wellness initiatives were provided to member town and school employees through the State Preventive Health Block Grant which focus on policy and environmental changes to reduce the incidence of obesity in worksites. (www.ehhd.org/be_well) Each year Be Well contributes to strong health outcomes and a significant return-on-investment for participating employers is supported by the EHHD Health Education Program.

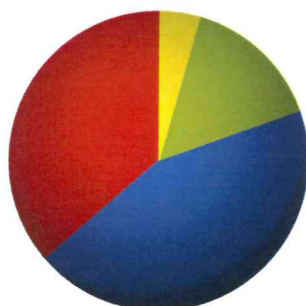


EHHD

Budget Fiscal Year 2011/2012

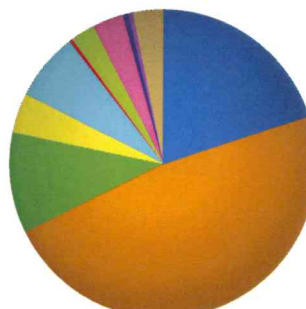
EHHD receives funds from a variety of sources including member town contributions, State and Federal grants, and permit fees. Towns are charged on a per-capita basis, which supports local public health services.

Revenues 2011-2012



Licensure Fees	\$41,430
Program Fees	\$143,871
Local Funds	\$418,919
State Funds	\$346,338
Total Operating Revenues	\$950,558

Expenditures 2011-2012



Personnel: Administration / Management	\$176,616
Personnel: Environmental Health	\$424,508
Personnel: Community Health	\$94,611
Personnel: Emergency Preparedness	\$36,571
Contractual	\$66,610
Legal	\$315
Vehicles/Travel	\$22,607
Insurance	\$29,086
Communications	\$5,019
Education / Training	\$4,798
Other	\$28,825
Total Operating Expenditures	\$889,566

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	1	0	1	1	0	0	4
Animals/Animal Waste	0	0	0	0	3	0	0	0	0	0	3
Activity without a Permit	0	0	1	1	2	0	0	0	0	0	4
Food Protection	2	1	0	1	1	3	7	0	1	0	16
Housing Issues	0	6	2	3	4	3	8	0	1	3	30
Emergency Response	0	1	0	0	1	0	2	0	0	1	5
Refuse/Garbage	1	5	2	1	3	2	2	0	2	2	20
Rodents/Insects	3	1	1	0	0	1	3	1	1	0	11
Septic/Sewage	2	2	7	1	3	1	4	1	3	3	27
Other	0	1	0	1	0	2	3	0	2	5	14
Water Quality	1	1	1	2	5	1	1	0	0	1	13
Total	9	19	14	10	23	13	31	3	10	15	147
HEALTH INSPECTION											
Group Homes	0	0	0	1	0	2	1	0	0	0	4
Day Care	2	0	1	0	0	0	1	0	6	1	11
Camps	0	1	0	1	0	0	0	0	0	0	2
Public Pools	0	5	0	0	1	0	9	1	0	0	16
Other	0	1	1	0	0	0	1	0	0	0	3
Schools	0	0	0	0	0	0	4	0	0	0	4
Mortgage, FHA, VA	0	0	1	0	0	0	0	0	0	0	1
Bathing Areas	0	1	0	0	0	3	0	0	1	0	5
Total	2	8	3	2	1	5	16	1	7	1	46
ON-SITE SEWAGE DISPOSAL											
Site Inspection - All Site Visits	17	87	56	69	50	161	161	31	203	98	933
Deep Hole Tests - # of Holes	21	53	42	20	35	142	145	46	85	74	663
Perc Tests - # of Holes	5	22	13	9	11	21	38	4	12	13	148
Permits Issued - New	2	7	11	2	15	20	10	0	14	6	87
Permits Issued - Repair	3	15	14	7	11	19	33	5	16	15	138
Site Plans Reviewed	7	22	18	6	20	39	45	5	24	20	206
B100a Reviews	23	26	36	12	63	92	67	4	99	54	476
WELLS											
Well Sites Inspected	0	2	6	8	4	32	1	3	15	10	81
Well Permits Issued	2	11	8	7	12	31	14	1	21	18	125
LABORATORY ACTIVITIES (Samples Taken)											
Potable Water	0	4	0	2	2	3	2	2	10	0	25
Surface Water	30	18	48	0	49	196	38	0	62	41	482
Ground Water	0	0	0	0	0	0	0	0	0	0	0
Rabies	0	0	0	0	0	0	1	0	0	1	2
Lead	0	6	0	0	0	0	0	0	0	0	6
Other	0	0	0	0	0	0	1	0	0	0	1
FOOD PROTECTION											
Inspection	23	38	25	13	33	60	118	3	55	29	397
Reinspection	3	4	5	1	2	5	16	0	4	5	45
Temporary Permits	8	25	23	3	12	69	33	7	19	22	221
Temporary Inspections	4	0	11	0	3	59	7	5	0	1	90
Plan Reviews	0	0	0	0	1	0	3	1	0	0	5
Pre-Operational Inspections	1	1	1	3	2	2	9	0	5	0	24
LEAD ACTIVITIES											
Housing Inspections	0	1	0	0	0	1	0	0	0	0	2
Abate Plan Reviewed	0	0	0	0	0	0	0	0	0	0	0
MISCELLANEOUS ACTIVITIES											
Planning and Zoning Referrals	0	0	0	0	0	11	45	2	3	9	70
Subdivision Reviewed (Per Lot)	0	0	2	0	15	6	2	6	5	7	43

Selected Reportable Diseases for Calendar Year 2011 by Town *

	Andover	Ashford	Bolton	Chaplin	Columbia	Coventry	Mansfield	Scotland	Tolland	Willington	District Totals
Babesiosis	1	0	0	2	0	0	0	0	0	1	4
Campylobacter	0	2	1	0	1	6	4	0	3	1	18
Chlamydia	15	6	9	6	8	11	40	0	20	4	119
Cryptosporidium	0	1	0	0	0	1	0	0	1	0	3
Cyclospora	0	0	0	0	0	0	0	0	1	0	1
E. Coli 0157/STEC	0	0	0	0	0	0	1	0	1	0	2
Ehrlichiosis/Anaplasmosis	0	0	1	0	0	0	0	0	0	1	2
Giardia	0	0	1	0	0	0	1	0	1	0	3
Gonorrhea	1	0	0	0	0	1	2	0	1	2	7
Group A Streptococcus	0	0	0	0	0	0	0	0	1	0	1
Group B Streptococcus	0	0	1	0	1	1	0	0	1	0	4
Haemophilus Influenzae	0	0	0	0	0	0	0	0	1	0	1
Hepatitis A	0	1	0	0	0	0	0	0	0	0	1
Hepatitis B	0	0	0	1	0	0	0	0	0	0	1
Hepatitis C	0	0	0	0	0	1	0	0	0	0	1
Lead-Elevated Blood Lead Levels in children up to age 6 (10-19 ug/dl)	0	0	0	0	0	1	0	0	0	0	1
Lead-Elevated Blood Lead Levels in children up to age 6 >20 ug/dl	0	0	0	0	0	0	0	0	0	0	0
Listeria	0	0	1	0	0	0	0	0	0	0	1
Lyme Disease - Confirmed	6	12	5	6	13	18	33	3	31	16	143
Lyme Disease - Probable	1	0	0	2	4	9	5	1	1	3	26
Measles	0	0	0	0	0	0	0	0	0	0	0
Methicillin Resistant Staphylococcus Aureus	1	0	0	1	1	2	3	0	1	1	10
Mumps	0	0	0	0	0	0	0	0	0	0	0
Neisseria Meningitis	0	0	0	0	0	0	0	0	0	0	0
Pertussis	0	0	0	0	1	0	0	0	0	0	1
Rubella	0	0	0	0	0	0	0	0	0	0	0
Salmonella	1	0	0	0	0	2	1	0	3	1	8
Shigella	0	0	0	0	0	0	0	0	0	0	0
Streptococcus Pneumoniae	1	0	0	0	0	1	3	0	3	0	8
Syphilis	1	0	0	0	0	0	0	0	0	0	1
Tuberculosis Cases (Active)	0	0	0	0	0	0	0	0	0	0	0
Varicella	0	0	0	0	0	2	1	0	2	0	5
Vibrio	0	0	0	0	0	0	0	0	1	0	1
West Nile Virus	0	0	0	0	0	0	0	0	0	0	0
Yersinia	0	0	0	0	0	0	0	0	0	0	0

*The numbers above represent a fraction of the number of occurrences.