



Eastern Highlands Health District

2008-2009 ANNUAL REPORT



Serving the towns of Andover, Ashford, Bolton, Chaplin, Columbia,
Coventry, Mansfield, Scotland, Tolland and Willington

Population: 80,180 • Service Area: Approximately 208 Square Miles
860.429.3325 • ehhd@ehhd.org • www.ehhd.org

HEALTH DISTRICT STAFF

Robert L. Miller, MPH, RSDirector of Health
Kenneth Dardick, MD.....Medical Advisor
Glenn Bagdoian, RSSanitarian II
Ande Bloom, MS, RDHealth Education
Program Coordinator
Jeff CatlettSanitarian I
John Degnan, MAPublic Health
Emergency Preparedness Coordinator
Geoffrey Havens, RSSanitarian II
Holly Hood, MPH, RSSanitarian II
Jessica Ippedico, MSWHealth Education
Project Coordinator
Jeff Polhemus, RSChief Sanitarian
Cheryl ProctorEnvironmental Health Inspector
Maria RemySecretary
Jody Schmidt, MS, RS.....Sanitarian II



Back: Jody Schmidt,
Glenn Bagdoian,
Jeff Polhemus, Geoff
Havens, John Degnan,
Robert Miller
Front: Maria Remy,
Cheryl Proctor, Ande
Bloom, Holly Hood

EHHD BOARD OF DIRECTORS



Back: Doug Cameron,
Jonathan Luiz, John
Elsesser
Front: M. Deborah
Walsh, Elizabeth
Patterson, Joyce Stille,
Tierney Tully

Elizabeth Paterson (Chair)Town of Mansfield
John Elsesser (Vice Chair)Town of Coventry
Joyce Stille (Assistant Treasurer)Town of Bolton
Connie Anderson (Alternate)Town of Coventry
Doug Cameron.....Town of Scotland
Susan Chace (Alternate)Town of Scotland
Don Cianci (alternate)Town of Columbia
Frederick Daniels.....Town of Tolland
Louise Eldridge (Alternate)Town of Willington
Ralph Fletcher.....Town of Ashford
Matt HartTown of Mansfield
Michael KurlandTown of Mansfield
Paul SchurTown of Willington
Robert SkinnerTown of Columbia
Tierney Tully.....Town of Chaplin
M. Deborah WalshTown of Coventry
Steve WerbnerTown of Tolland
VacancyTown of Andover

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.



A Message From the Director of Health

Once again, it is that time of year when I have the pleasure of presenting the Eastern Highlands Health District Annual Report. The Health District's 2008/2009 fiscal year can best be characterized as both rewarding and challenging. In this regard, I'd like to take this opportunity to highlight a few of the events that underscored the past fiscal year.

April was marked by the discovery of a novel strain of influenza, 2009 H1N1 Influenza A. The emergence of this new strain and the subsequent outbreak experienced by the population we serve presented new challenges. Much of our agency's initial response centered on providing timely and accurate information to community stakeholders and the general public. We anticipate come this fall, our efforts will shift towards making vaccine available to the population. Working with the State Department of Health, staff diligently established plans and preparations for a program to vaccinate as many individuals as quickly as possible. We look forward to providing the tools the public needs to protect against H1N1 Influenza.

Our Health Education Program continues to shine with the procurement of an \$85,000 grant to implement the Action Communities for Health, Innovation, and EnVironmental change (ACHIEVE) program. This three-year program will build on, and empower our existing Matters of the Heart Partnership to identify and implement environmental changes that combat chronic disease by encouraging healthy behaviors in our communities.

The Eastern Highlands Health District, like all public agencies, is not immune to the significant challenges presented by the national recession. Confronted with significant declines in service fee revenues due to the bursting of the housing market bubble, the Eastern Highlands Health District, and its Board of Directors was compelled to critically evaluate agency revenues and expenditures. We continue to employ technology, and innovative, "out of the box" thinking to streamline operations to save on expenses. Combined with continued efforts to procure funding from public and private grant sources, this agency is working hard to maintain the scope of quality services for which we are best known. Despite these severe budgetary challenges, our diligence and commitment to promote wellness and prevent illness in the citizens we serve shall never wane.

The capacity to confront many of these challenges, and achieve these successes is due in large part to the community partners and stakeholders who collaborate with the Health District on many of these issues. On behalf of the Board of Directors, and this office, I extend the greatest appreciation and thanks to those who provide this invaluable assistance as we endeavor to positively impact the health of each citizen in our community.

My door is always open.

Sincerely,



Robert L. Miller, MPH, RS
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 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 a towns' ability 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 52 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 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.

Public Health's 10 Core Functions:

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 approves private well sites and monitors public bathing water to assure that the drinking and bathing water is free of harmful bacteria, chemicals and pollutants.



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

Food Protection – All food service establishments are inspected frequently and operating licenses are renewed annually.



Campground/Daycare/Youth Camp Food Service Inspection

– EHHD conducts annual 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 to housing concerns. Complaints violating the Public Health Code and Connecticut General Statutes 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

– Since 2004, the EHHD has maintained a state-mandated Emergency Response Plan for its jurisdiction. Through the development of this plan, the EHHD has engaged district-wide partners to ensure that in the event of a large-scale emergency, resources would be coordinated effectively. During the 2008-2009 fiscal year all plans and annexes were updated and additional plans were created. The district now has a comprehensive Emergency Response Plan that is fully integrated into the Emergency Operations Plans of all EHHD member towns.



The EHHD participates fully in the Connecticut Department of Emergency Management and Homeland Security (DEMHS) planning in Regions 3

and 4, to develop a regional all-hazards response to emergencies. The towns covered by the Northeast, Windham and Southeast Councils of Government constitute DEMHS planning Region 4 which includes the majority of the EHHD member towns, while the Capital Region Emergency Planning Committee (Region 3) captures three EHHD member towns. This framework facilitates the coordination of regional public health and medical preparedness response, and supports an all-hazards approach when responding to emergencies.

Pandemic Influenza – Preparedness planning for pandemic influenza has included the development of a district-wide Pandemic Influenza Response Plan, including an annex on Isolation and Quarantine. A number of events were held to advance community understanding of the need to anticipate the widespread effects of a pandemic. The Connecticut Association of Directors of Health facilitated a tabletop exercise focusing on Community Mitigation during Pandemic Influenza. Participants included municipal and school officials.



With the outbreak of the novel Influenza A (H1N1) virus in the spring, EHHD implemented its Pandemic Influenza Plan. Coordination was established with the CDC and DPH, through conference calls and HAN updates which provided regularly updated information, while surveillance was increased in the local communities. Consultation was offered to school systems and health providers and a Director's letter was issued regularly to community stakeholders. The staff continued to increase readiness levels in anticipation of an increase in cases throughout the fall of 2009. Conference calls with school officials were held, an up-dated pandemic plan was developed, and ancillary supplies were inventoried in preparation for upcoming vaccination clinics.

Training – The EHHD staff takes every opportunity to obtain individual Emergency Preparedness training and drill potential hazard or emergency responses. This year, the staff made progress toward the certification standards for the Incident Command System and the National Incident Management System mandated by CDC and other federal agencies. This training is a requirement for receiving continued federal funding. Individual members of the staff completed advanced Incident Command System courses at the Command and General Staff levels.

HEALTH PROMOTION

Matters of the Heart Partnership – In January 2008, the EHHD was awarded two grants from the Department of Public Health; one addressing healthy eating and active living (HEAL) to reduce obesity, and the other that focused on women's cardiovascular health. These grants continued through June 2009, and laid a solid foundation for continuing work through the Partnership.



HEAL accomplishments included providing resources to member towns for Active Living projects to create more local opportunities for physical activity, and

promoting fruits and vegetables through the Produce of the Week program in schools and towns. Produce of the Week fliers are available on the EHHD website.

Women's Healthy Heart accomplishments included supplying resources to member town senior centers to increase local opportunities for physical activity, conducting workshops to educate community members on addressing modifiable risk factors for cardiovascular disease, promoting awareness of blood pressure and cholesterol status through health screenings, and increasing community members' knowledge of the signs and symptoms of heart attack and stroke and the importance of calling 9-1-1 through many venues (health screenings, health fairs, and workshops).

ACHIEVE Initiative – In January 2009, the EHHD was awarded a three-year grant through the National Association of Chronic Disease Directors to address modifiable risk factors for chronic disease and obesity in the community, focusing primarily on local access to opportunities for physical activity, promoting good nutrition, and reducing tobacco use. To impact these risk factors in a sustainable way, the grant was designed to provide the resources needed to influence policy and environmental changes in the community that will address the targeted behaviors (physical activity, nutrition, and tobacco use). To meet this challenge, the EHHD convened a Community Health Action Response Team (CHART) comprised of key individuals in the community, providing an interdisciplinary approach. The ACHIEVE Initiative works under the umbrella of the Matters of the Heart Partnership.



Asthma – The EHHD is represented on two Regional Asthma Coalitions (RAC) which provide resources and services to all member towns. RACs bring together local health departments & districts to address community issues regarding asthma education for various groups. This year with RAC 3 funding, the health educator and a sanitarian provided families with in-home assessments for environmental asthma triggers.

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. Four local hardware stores (two in Mansfield, one in Tolland and one in Bolton) participated in the program and received materials for both consumers & employee training.



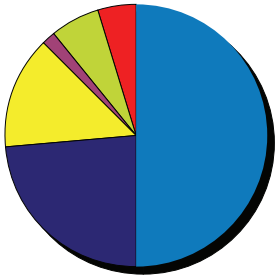
Be Well – Developed by the EHHD, this program provides comprehensive programming and promotion on a contractual basis to local employers. The goal of this employee wellness program is to improve the overall health and wellness of employees through initiatives that target risk factors and issues that influence health. In 2008 – 2009, the EHHD utilized the State Block Grant funding to expand basic employee wellness initiatives to member town school and town hall employees.



EHHD Budget Fiscal Year 2008/2009

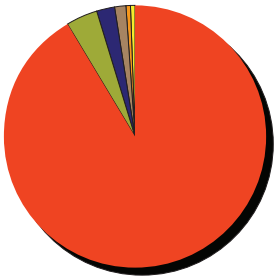
EHHD receives funds from a variety of sources including member town contributions, State and Federal grants, and permit fees. Towns are charged on a per-capita basis, which supports local public health services.

EHHD Operating Revenues



Member Town Contributions	\$362,703
State Grants	\$171,858
Sewage Disposal Program	\$99,939
Well Permits	\$11,280
Food Protection Service	\$44,054
Other Health Services	\$33,937

EHHD Operating Expenditures



Salary & Benefits	\$643,949
Professional & Technical Service	\$27,957
Liability Insurance	\$14,025
Supplies and Services	\$9,867
Repairs and Maintenance	\$3,793
Other	\$3,862

EHHD 2008-2009 ACTIVITY TOTALS

	Andover	Ashford	Bolton	Chaplin	Columbia	Coventry	Mansfield	Scotland	Tolland	Willington	District Totals
Environmental Health Activities											
Complaints											
Activity Without Proper Permits	0	0	1	0	0	1	0	0	0	0	2
Animals/Animal Waste	0	2	0	0	0	3	2	1	0	0	8
Air Quality	0	0	0	0	0	0	0	0	2	0	2
Emergency Response	1	0	0	0	0	0	5	0	1	0	7
Food Protection	1	1	1	0	0	2	8	0	0	0	13
Housing Issues	1	0	2	5	1	0	9	0	1	2	21
Refuse/Garbage	1	1	1	0	0	0	4	0	3	1	11
Rodents/Insects	0	0	4	1	0	0	1	0	0	1	7
Septic/Sewage	1	1	5	2	1	1	4	5	4	3	27
Water Quality	0	2	0	0	2	0	3	0	2	4	13
Other	0	2	2	0	0	0	2	1	2	1	10
Inspection											
Group Homes	0	0	0	2	0	1	0	0	1	2	6
Day Care	0	0	3	1	0	0	0	0	3	3	10
Camps	0	0	0	0	0	0	2	0	0	0	2
Public Pools/Bathing Areas	0	0	0	0	0	2	7	0	0	0	9
Other	0	0	0	0	0	0	3	0	2	0	5
Food Protection											
Inspection	29	43	28	23	42	78	180	6	71	40	540
Reinspection	7	10	6	2	7	17	46	1	14	13	123
Temporary License Issued	0	18	7	2	9	58	24	3	9	9	139
Plan Reviews	0	0	0	3	1	2	1	0	0	0	7
Site Construction Inspections	0	2	0	3	4	2	2	2	8	1	24
Wells											
Well Sites Inspected	3	4	15	8	5	39	0	0	12	4	90
Well Permits Issued	8	22	8	7	20	30	26	3	10	13	147
On-Site Sewage Disposal											
Site Inspection - All Site Visits	37	82	36	45	90	157	137	36	210	43	873
Deep Hole Tests - # Of Holes	49	29	45	35	41	196	108	33	144	38	718
Percolation Tests - # Of Holes	11	6	19	6	14	17	25	11	62	7	178
Permits Issued, New	3	3	6	2	12	19	14	2	22	10	93
Permits Issued, Repair	10	6	10	9	11	19	19	2	14	8	108
Site Plans Reviewed	10	23	16	13	19	51	34	5	34	18	223
B100a Reviews	45	25	40	6	62	146	80	7	134	42	587
Laboratory Activities (Samples Taken)											
Potable Water	0	8	0	0	0	5	11	0	8	0	32
Surface Water	19	15	59	0	18	164	62	0	77	52	466
Ground Water	0	0	0	0	0	0	0	0	0	0	0
Rabies	0	0	0	0	0	0	2	0	0	0	2
Lead	0	0	0	0	0	16	0	0	0	32	48
Other (Birds, Etc)	0	0	0	0	0	20	8	0	0	0	28
Lead Activities											
Housing Inspection	0	1	0	0	0	0	0	0	0	1	2
Abate Plan Reviewed	0	0	0	0	0	0	0	0	0	1	1
Miscellaneous Activities											
Planning And Zoning Referrals	1	0	0	2	4	8	5	0	0	5	25
Subdivision Reviewed (Per Lot)	11	2	3	0	1	16	14	5	1	2	55

Selected Reportable Diseases for Calendar Year 2008 by Town

	Andover	Ashford	Bolton	Chaplin	Columbia	Coventry	Mansfield	Scotland	Tolland	Willington	District Totals
Babesiosis	0	0	0	0	0	1	1	1	0	0	3
Campylobacter	1	1	0	0	0	2	2	0	1	0	7
Chlamydia	8	8	3	4	7	11	44	0	4	7	96
Cryptosporidium	0	0	0	0	0	0	0	0	1	0	1
Cyclospora	0	0	0	0	0	0	0	0	0	0	0
E. Coli 0157	0	0	0	0	0	0	0	0	0	0	0
Ehrlichiosis	0	0	1	1	0	0	1	0	0	0	3
Giardia	0	0	0	0	0	0	1	0	0	1	2
Gonorrhea	1	0	0	0	0	1	7	0	1	1	11
Group A Streptococcus	0	0	0	0	0	1	1	0	0	0	2
Group B Streptococcus	1	0	1	1	1	1	2	1	0	0	8
Haemophilus Influenzae	1	0	0	0	0	0	1	0	0	0	2
Hepatitis A	0	0	0	0	0	0	1	0	0	0	1
Hepatitis B	0	0	0	0	0	0	4	0	0	0	4
Hepatitis C	0	1	3	0	1	5	4	0	4	1	19
Lead-Elevated Blood Lead Levels in children up to age 6 (10-19 ug/dl)	0	1	0	0	0	0	2	0	0	0	3
Lead-Elevated Blood Lead Levels in children up to age 6 >20 ug/dl	0	0	0	0	0	0	0	0	1	1	2
Listeria	0	0	0	0	0	0	0	0	0	0	0
Lyme Disease	10	32	6	14	14	50	68	7	42	18	261
Measles	0	0	0	0	0	0	0	0	0	0	0
Methicillin Resistant Staphylococcus Aureus	0	0	1	0	1	1	2	0	1	0	6
Mumps	0	0	0	0	0	0	0	0	0	0	0
Neisseria Meningitidis	0	0	0	0	0	0	0	0	0	0	0
Pertussis	0	0	0	0	0	1	1	0	0	0	2
Rubella	0	0	0	0	0	0	0	0	0	0	0
Salmonella	0	1	0	0	0	3	2	0	2	0	8
Shigella	0	0	0	0	0	0	0	0	1	0	1
Streptococcus Pneumoniae	0	0	0	1	4	2	0	0	1	0	8
Syphilis	1	0	0	0	0	0	1	0	0	0	2
Tuberculosis Cases (Active)	0	0	0	0	0	0	0	0	0	0	0
Varicella	1	0	0	1	4	16	9	0	5	1	37
Vibrio	0	0	0	0	0	0	0	0	0	0	0
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