#58

COMPLETE

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Page 1: Local Health Department/District Information

Q1 Department Name

Orange Health Department

Q2 Do you have a Board of Health?

Yes

Page 2: Board of Health

Q3 Please complete the Board of Health information below.

Chairperson Severio Fodero

Address 536 Ferry Road

City/Town Orange

State/Province Connecticut

ZIP/Postal Code 06477

Email Address sdfodero@yahoo.com

Q4 Board Function Advisory & Policy

Making

Q5 Number of Board Members

8

Page 3: Director of Health and Local Health Department Information

Q6 Director of Health

Name **Amir Mohammad** Degree(s) **MPH** Active CT License(s) MD Number of hours in Director of Health's average work week 2 Q7 Please list salary figures as whole dollars per year. 32601 Minimum Annual Salary Maximum Annual Salary 32601 **Actual Annual Salary** 33023 Q8 An Acting Director of Health is defined as an Yes, approved individual covering for a Director of Health If yes, please provide the name(s) of the Acting Director of when he or she is absent, for example, due to a Health.: vacation, medical leave, conference, or position Robert S. vacancy. See Connecticut General Statute Section 19a-Baltimore 200 or 19a-244.Do you have a staff person(s) who is the Acting Director of Health in your absence? Q9 If no, how do you assure coverage when the Director Respondent skipped this question of Health is absent? Q10 Does your department include a Housing No Department? Q11 Does your department include a Social Services No Department? Q12 Does your department include additional non-public health programs? If yes, what other types of programs?: Coordinate activities with Orange Visiting Nurse's Association OVNA with Social Services (Elderly Outreach worker and/or Community Services Director) and Emergency Management as well as other town departments as needed. Q13 Are there any collective bargaining units in your Yes, department? If yes, how many?: 2 Q14 Which of the following best describes your My department has not decided whether to apply for department with respect to participation in the Public accreditation Health Accreditation Board's national accreditation program?

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

Page 4: Local Health Personnel

Q16 Administrative

| | Full Time | Part Time | Contracted | Min. Salary-Hourly | Max. Salary-Hourly |
|--|-----------|-----------|------------|--------------------|--------------------|
| Assistant or Deputy Director of Health | | 1 | | \$0 | \$0 |
| Environmental Health Supervisor | 1 | | | \$40 | \$41 |
| Nursing Supervisor | | | | | |
| Office Manager | | | | | |
| Bookkeeper | | | | | |
| Secretary | | 1 | | \$20 | \$20 |
| | | | | | |

Q17 Medical

| | Full Time | Part Time | Contracted | Min. Salary-Hourly | Max. Salary- Hourly |
|---|-----------|-----------|------------|--------------------|------------------------|
| Dental Professional | | | | | |
| Dietitian / Nutritionist | | | | | |
| Lab Technician | | | | | |
| Nurse* (RN, APRN)*Does not include School Nurse | | | | | |
| Physician / Medical Advisor | | | | | |
| School Nurse | 4 | 4 | | \$36 | \$46 |
| Social Worker | | | | | |
| | | | | | |

Q18 Public Health

| | Full Time | Part Time | Contracted | Min. Salary- Hourly | Max. Salary- Hourly |
|--|-----------|-----------|------------|------------------------|------------------------|
| Emergency Preparedness Coordinator | | | | | |
| Environmental Health Inspector (e.g., food, lead, housing) | 1 | | 1 | \$31 | \$31 |
| Epidemiologist | | | | | |
| Health Educator | | | | | |
| Outreach Worker | | | | | |
| Other Paid Worker (Please describe below) | | 5 | | | |

Other Paid Worker, please describe:

OVNA RN and LPN staff provide coverage and assistance for public health, medical services and emergency preparedness for the Town Health Department. Director of Health also acts has the Physician/Medical Advisor. Emergency Preparedness Coordinator is a separate position in the town and not part of health department staff.

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

| | 2 |
|--|---------------------------|
| | |
| | 2 |
| | 2 |
| | |
| | |
| | 2 |
| | 2 |
| | |
| | |
| | 2 |
| | |
| | |
| | |
| ch services. OVNA provides F ician/Medical Advisor. | RN/LPN health screenings, |
| | |
| Amount \$ | 0 |
| Amount \$ | 0 |
| Amount \$ | 0 |
| Amount \$ | 59176 |
| i (| mount \$ mount \$ |

| Q24 Local funds - city/town sources | Amount \$ | 0 |
|---|---------------------------------------|------------|
| Q25 Medicaid | Amount \$ | 0 |
| Q26 Medicare | Amount \$ | 0 |
| Q27 Other revenue | Amount \$ | 39807 |
| Q28 Patient personal fees | Amount \$ | 0 |
| Q29 Private foundations | Amount \$ | 0 |
| Q30 Private health insurance | Amount \$ | 0 |
| Q31 What is your total operating budget? 521347 | | |
| Page 7: 10 ES - #1 Monitor health status to identify an Q32 Requirement 1: My department has participated in or conducted a local community health assessment (CHA) within the last five years. | nd solve community healt No | h problems |
| Q33 If yes, does the CHA include? (Select all that apply) | Respondent skipped this o | uestion |
| Q34 If yes, please upload the CHA or provide web link. | Respondent skipped this o | uestion |
| Q35 Web link/URL | Respondent skipped this o | uestion |
| Q36 Requirement 2: My department shared the findings from the community health assessment with the residents in my jurisdiction and asked for their input. | No | |
| Q37 If yes, what methods did you use to seek input from | | |

| 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. | No |
|---|---|
| Q39 If yes, how is the data provided? (Select all that apply) | Respondent skipped this question |
| Page 8: 10 ES - #1 Monitor health status to identify an Q40 Requirement 1: My department shared the results of the community health assessment with the partners/stakeholders and the public. | d solve community health problems |
| Q41 If yes, how did your department share the results of the CHA? (Select all that apply) | Respondent skipped this question |
| Page 9: 10 ES - #1 Monitor health status to identify an 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. | d solve community health problems Yes |
| Q43 If yes, how are the data collected? (Select all that apply) | Fax, Emails, Web , reports Electronic data, Phone calls |
| 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. | Yes |
| Q45 If yes, please upload the protocol. | Respondent skipped this question |
| Q46 If no, is the protocol in development? | Respondent skipped this question |

| 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 |
|--|---|
| Q48 If yes, how does your department collect the data 24/7? (Select all that apply) | A designated telephone line (voice or , fax) A call center |
| | A can center |
| Q49 Requirement 4: My department regularly uses the state DPH surveillance systems. | Yes |
| Q50 If yes, which surveillance systems do your department use? (Select all that apply) | CTSITE (childhood , lead) |
| | CTEDSS (reportable diseases) |
| Page 10: 10 ES - #1 Monitor health status to identify an Q52 Requirement 1: My department has been involved in the collection of primary quantitative data in addition to surveillance data. | nd solve community health problems Yes |
| Q53 If yes, how has your department collected primary quantitative data? (Select all that apply) | Vital records, Inspection data, Other (please describe): Surveillance of Lead, Tuberculosis, Hepatitis A, Measles, STD's etc. |
| Q54 Requirement 2: My department has been involved in the collection of primary qualitative data. | No |
| Q55 If yes, how your department has been involved in | Respondent skipped this question |

Q56 Requirement 3: My department uses standardized data collection instruments to collect quantitative or qualitative data.

No

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)

Defined timelines,

Description of the analytic process used to analyze the data

,

Comparison of the data to other local agencies, the state or nation

,

Primary and secondary data from multiple

sources

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)

Internal

staff

Department of Public Health or other state

entities

Board of

Health

Residents,

Media

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

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, Licensing/Permitting , Program Health Promotion Programs |
|---|--|
| Page 13: 10 ES - #1 Monitor health status to identify a Q63 Requirement 1: My department provides summaries or fact sheets of community health data. | nd solve community health problems Yes |
| Q64 If yes, who are the summaries/fact sheets shared with? (Select all that apply) | Residents, Community groups, Elected , officials Board of , Health Media |
| Page 14: 10 ES - #2 Diagnose and investigate health page 14: 10 ES - #2 Diagnose and investigate health page 265 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. | oroblems and health hazards in the community Yes |
| Q66 If yes, for which of the following entities does the protocol delineate the assignment of responsibilities? (Select all that apply) | Internal , staff DPH (Food, Asbestos, , SSDS) Other state agencies (DEEP, DCP) |
| Page 15: 10 ES - #2 Diagnose and investigate health page 15: 10 ES - #2 Diagnose and investigate health page 267 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. | problems and health hazards in the community No |

Q68 Requirement 2: My department has a written report or other documentation of a completed investigation of a non-infectious health problem or hazard. 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. Q70 If yes, how does your department track Tracking log, investigations? (Select all that apply) State surveillance systems (CTEDSS, CTSITE, CTEPHTalso known as MAVEN) Other (please describe): Monthly logs and year end logs reported to Director of Health and Board of Health Page 17: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community **Q71** Requirement 1: My department has written No protocols for the containment/mitigation of health problems and hazards. Q72 If yes, does the protocol(s) include? (Select all that Respondent skipped this question apply) Page 18: 10 ES - #2 Diagnose and investigate health problems and health hazards in the community **Q73** Requirement 1: My department has infectious No disease outbreak protocols that describe the process for determining when the EOP will be implemented. **Q74** If yes, please upload the protocol. Respondent skipped this question **Q75** If no, is the protocol in development? No **Q76** Requirement 2: My department has protocols that No specifically address environmental public health hazards and that describe the process of determining when the

EOP will be implemented.

| Q77 If yes, please upload the protocol. | Respondent skipped this question |
|--|--|
| Q78 If no, is the protocol in development? | No |
| Q79 Requirement 3: My department has cluster evaluation protocols describing the process for determining when the EOP will be implemented. | No |
| Q80 If yes, please upload the protocol. | Respondent skipped this question |
| Q81 If no, is the protocol in development? | No |
| Page 19: 10 ES - #2 Diagnose and investigate health 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. | problems and health hazards in the community No |
| Q83 If no, is the documentation in development? | No |
| Q84 How many drills and exercises did your department of | onduct or participate in the last fiscal year? |
| Q85 How many real world public health events did your de | epartment respond to in the last fiscal year? |
| Q86 How many were significant that required the develope 0 | ment of an AAR? |
| 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. | No |
| Q88 If no, are the policies and procedures in development? | Yes |

| Q89 Requirement 2: My department has a call down list that is used to contact epidemiological and environmental local public health resources. | No |
|---|--|
| Q90 If yes, | Respondent skipped this question |
| 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 Text |

| 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. | No |
|--|---|
| Q102 If no, is the document in development? | No |
| 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). | No |
| Q104 If no, is the schedule in development? | No |
| Q105 Requirement 5: My department has a list and description of contracts, MOAs/MOUs, and/or mutual assistance agreements providing addition staff and services, including laboratory services, for surge capacity. | No |
| 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 |
| Q107 If yes, please upload the protocol. | Respondent skipped this question |
| Q108 If no, is the protocol in development? | Yes |
| 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 |
| Q110 If yes, how does your department inform partners and the public? (Select all that apply) | Web page, Social media, Fax broadcasts, Automated call systems, Email listservs |

Q111 Requirement 3: My department's partners and the Yes public can contact the health department 24/7. Q112 If yes, how does the public and partners contact Answering your department 24/7? (Select all that apply) service **Police** dispatch Email, Staff call down list Q113 Requirement 4: My department has established or Yes participates in a Health Alert Network (HAN) or similar system that receives and issues alerts 24/7. Q114 If yes, how often does your department test the Respondent skipped this question system? **Q115** Requirement 5: My department provides Yes information to the public and uses the media to communicate information to the public during a public health emergency. Q116 If yes, how does your department provide Web page, information and use the media to communicate Social media, information to the public? (Select all that apply) Fax broadcasts. Email listservs, **Press** release Media packets, **Public service** announcement Page 23: 10 ES - #3 Inform, educate, and empower people about health issues Q117 Requirement 1: My department has provided Yes information to the public on health risks, health

behaviors, disease prevention, or wellness.

| Media , communications Brochure, Social media |
|--|
| Yes |
| Evidence-based, rooted in sound theory, practice-based evidence, and/or promising practice, Focused on social and environmental , factors Marketed using various platforms (social media, newspaper, etc.) |
| Farmers markets, Smoke free zones, Immunizations, Media campaigns |
| people about health issues |
| No |
| Respondent skipped this question |
| people about health issues |
| No |
| Respondent skipped this question |
| |

| Q126 If no, is the policy, plan or strategy in development? | Yes | |
|---|---|--|
| Page 26: 10 ES - #3 Inform, educate, and empower p | 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 | |
| Q128 If yes, does the external communication procedures or protocols include? (Select all that apply) | Respondent skipped this question | |
| Q129 If yes, please upload the procedure or protocol. | Respondent skipped this question | |
| Q130 If no, is the protocol in development? | No | |
| 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 | |
| Q132 If yes, does the risk communication plan, protocol or procedures? (Select all that apply) | Respondent skipped this question | |
| Q133 If yes, please upload the plan, protocol or procedure. | Respondent skipped this question | |
| Q134 If no, is the plan, protocol or procedure in development? | Yes | |
| 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. | Yes | |

Q136 If yes, my department's website or web page has Links to public health-related the following information: (Select all that apply) news Information and materials from program activities Links to CDC and other public health-related federal, state, or local agencies, as appropriate The names of the Director of Health and leadership Page 29: 10 ES - #3 Inform, educate, and empower people about health issues **Q137** Requirement 1: My department has demographic Yes data defining ethnic distribution and languages in the jurisdiction. Q138 Requirement 2: My department has access to staff Yes or contractors who provide interpretation, translation or specific communication services. Q139 If yes, how does your department provide Bi-lingual or multi-lingual interpretation, translation or specific communication staff services? (Select all that apply) **Translation** services/contractors 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. Q141 If yes, what sectors of the community do the School systems, members of the partnership(s) or coalitions(s) represent? Hospitals/Community Health Centers, (Select all that apply) Local government agencies Not-for-profit organizations, Community members

| Q142 If yes, which health issue(s) are being addressed in the community partnership(s) or coalition(s)? (Select all that apply) | Chronic disease , prevention |
|--|---|
| | Anti-tobacco, |
| | Housing, |
| | Parks and , recreation |
| | Substance abuse, |
| | Other, please describe: |
| | Along with housing, hoarding and blight conditions |
| 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). | Yes |
| Q144 If yes, what policy change or revision was | Other, please |
| implemented? (Select all that apply) | describe: |
| | Compose the "Uniform Relocation Assistance Act" for the Town. Currently being considered by Town Counsel. |
| 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. | Yes |
| community as a whole or with specific populations that will be affected by a policy or strategy. Q146 If yes, which sectors of the community has your | Yes Senior Citizens, |
| community as a whole or with specific populations that will be affected by a policy or strategy. | |
| community as a whole or with specific populations that will be affected by a policy or strategy. Q146 If yes, which sectors of the community has your | Senior Citizens, |
| community as a whole or with specific populations that will be affected by a policy or strategy. Q146 If yes, which sectors of the community has your | Senior Citizens, School-age groups, |
| community as a whole or with specific populations that will be affected by a policy or strategy. Q146 If yes, which sectors of the community has your | Senior Citizens, School-age groups, Parent/Teacher groups, Service providers, i.e., tattoo artists, salon owners, nail technicians, massage therapists, food establishment owners and workers |
| community as a whole or with specific populations that will be affected by a policy or strategy. Q146 If yes, which sectors of the community has your | Senior Citizens, School-age groups, Parent/Teacher groups, Service providers, i.e., tattoo artists, salon owners, nail technicians, massage therapists, food establishment owners and workers |
| community as a whole or with specific populations that will be affected by a policy or strategy. Q146 If yes, which sectors of the community has your | Senior Citizens, School-age groups, Parent/Teacher groups, Service providers, i.e., tattoo artists, salon owners, nail technicians, massage therapists, food establishment owners and workers |

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

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

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

Meeting agendas and

minutes

List-serves,

Legislative

Reports/Summaries

Professional organizations (CADH, CEHA),

Other, please describe:

Orange Drug & Alcohol Action Committee

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

Q152 If yes, how has your department contributed to the discussions? (Select all that apply)

Issue briefs,

Official public

testimony

Participation in an advisory or work

group

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

| Q154 If yes, how has your department informed policy makers and/or the public? (Select all that apply) | Impact statements (science based) or fact sheets that address current or proposed policies , Meetings/discussions of policy issues and , impacts Verbal or written testimony |
|--|--|
| Page 35: 10 ES - #5 Develop policies and plans that s | 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 |
| Q156 If yes, does the CHIP include the following? (Select all that apply) | Respondent skipped this question |
| Q157 If yes, please attach the CHIP or provide the web link. | Respondent skipped this question |
| Q158 Web link/URL | Respondent skipped this question |
| Q159 If no, where is your department in the process? (Select one) | My department has not begun a CHIP |
| Page 36: 10 ES - #5 Develop policies and plans that s | 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 |
| Q161 Requirement 2: My department and/or my partners have implemented some areas of the CHIP. | Respondent skipped this question |
| Q162 If yes, what area has been implemented and by whom? (Provide one example) | Respondent skipped this question |
| Page 37: 10 ES - #5 Develop policies and plans that s Q163 Requirement 1: My department has a strategic plan dated within the last five years. | support individual and community health efforts No |

| Q164 If yes, does the plan include? (Select all that apply) | Respondent skipped this question |
|--|---|
| Q165 If no, where is your department in the process? (Select one) | My department has not begun a strategic plan |
| Page 38: 10 ES - #5 Develop policies and plans that s | 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 |
| Page 39: 10 ES - #5 Develop policies and plans that s | support individual and community health efforts |
| Q167 Requirement 1: My department participates in preparedness meetings with other government agencies, local health departments and health care providers. | Yes |
| 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 |
| Q169 If yes, did your department develop an AAR after the emergency or drill/exercise? | Yes |
| Q170 Requirement 3: As a result of an exercise, drill or real event, my department has revised the All Hazards EOP. | Yes |
| Page 40: 10 ES - #5 Develop policies and plans that s | 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 |

| 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 |
|---|---|
| Q173 Requirement 2: Within the last five years, my department has tested the public health EOP through drills and exercises. | Yes |
| Q174 If yes, did your department complete an AAR the drills or exercises? | Yes |
| Q175 Requirement 3: My department has revised the public health EOP based on AARs. | Yes |
| 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 |
| Q177 If yes, when reviewing laws, does your department? (Select all that apply) | Consider evidence-based practices, promising practices , Use model public health laws, checklists, templates or some other standard outline or guide , Collaborate with other municipal departments, Tribes, state health department |
| Q178 Requirement 2: My department has access to legal counsel as needed. | Yes |

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

Q179 Requirement 1: My department provides advice Yes and recommendations to the governing entity and/or elected officials on the public health impact of new laws and changes to current laws. Q180 If yes, how does your department provide advice Issue briefs, and recommendations? (Select all that apply) Talking points, Fact sheets, Presentations, Meetings Page 43: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety Q181 Requirement 1: My department's staff have been Yes trained in laws related to their job responsibilities within the past two years. Q182 If yes, on which laws have staff received training? Food, (Select all that apply) Lead, Infectious disease (e.g., TB, STD, immunizations) Subsurface sewage disposal systems Housing, hoarding, blight, **Uniform relocation** Act Legal orders Disaster response/emergency preparedness, **Vector control Q183** Requirement 2: My department ensures consistent application of public health laws. Q184 If yes, how does your department ensure the Enforcement documents or logs, consistent application of public health laws? (Select all Written review of case that apply) reports

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

Q185 Requirement 1: My department has information Yes concerning public health related laws available to the public. Q186 If yes, how is your department providing Website, information concerning public health related laws? Information/training session, (Select all that apply) **Email or** fax Regular mail, **Phone** conversations **Q187** Requirement 2: My department has information Yes about permit/license applications available to the public. Q188 If yes, how is your department providing Website, information about permit/license applications? (Select all **Email or** that apply) fax Regular mail, **Phone** conversations Page 45: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety Q189 Requirement 1: My department provides Yes information or education to regulated individuals or entities about their responsibilities related to public health laws. Q190 If yes, how is your department providing Flyers/Brochures, information or education to regulated individuals or Information/training session, entities? (Select all that apply) **Email or** fax Regular mail, Phone conversations

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

Q191 Requirement 1: My department has local Yes ordinances/regulations for conducting enforcement actions. Q192 If yes, what types of ordinances/regulations? Blight, (Select all that apply) Food, Massage Parlor, Animals (e.g. chickens) **Private** wells Septic systems, Outdoor furnaces/burning **Q193** Please provide a link to where these ordinances can be found: orange-ct.gov Q194 Requirement 2: My department has a written No procedure or protocol (e.g. decision tree) for enforcement program areas. Q195 If yes, please upload the protocol. Respondent skipped this question Q196 If no, is the protocol in development? Yes Page 47: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety Q197 Requirement 1: My department maintains a Yes database or log of inspection reports with action taken, current status, follow-up, return inspections, and final results/closure. Q198 If yes, what is/are the database(s) or log(s)? Infectious disease (CTEDSS -(Select all that apply) MAVEN) Spreadsheet, Childhood Lead (CTSITE -MAVEN)

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. Q200 If yes, does the database or log document? An analysis of the (Select all that apply) situation **Actions** taken Meetings, Official communications Notice of violations Legal orders 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 Yes information in the database or log of investigations and complaints. Q202 If yes, does your department analyze the data for? Statutory requirements, (Select all that apply) Patterns and trends Performance improvement for the enforcement program Development of a summary annual report Q203 Requirement 2: My department conducts Yes 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. Page 50: 10 ES - #6 Enforce laws and regulations that protect health and ensure safety Q204 Requirement 1: My department has a protocol for Yes notifying other agencies and the public of enforcement activities.

| Q205 If yes, how does your department notify other agencies and the public of enforcement activities? (Select all that apply) | Minutes from public , meetings Conference calls, Emails, Correspondence, Reports |
|--|---|
| Q206 If no, is the protocol in development? | Respondent skipped this question |
| Page 51: 10 ES - #7 Link people to needed personal had Q207 Requirement 1: My department participates in a collaborative process to assess the availability of health care services to the population. | nealth services and assure the provision of health care Yes |
| Q208 If yes, with whom does your department collaborate to assess the availability of health care services? (Select all that apply) | Health care providers, Social service , organizations Health insurance companies, Community based organizations, Mental/behavior health organizations |
| Q209 If yes, do you maintain documentation (agendas, minutes, rosters) of the collaborative process/meetings? | No |
| Q210 Requirement 2: My department shares public health data for assessment and planning purposes. | Yes |
| Q211 If yes, how does your department share the data? (Select all that apply) | Reports, Emails |
| Q212 Requirement 3: My department assesses emerging issues that may impact access to care. | No |
| Q213 If yes, please provide an example of an emerging issue. | Respondent skipped this question |

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 |
|---|----------------------------------|
| Q215 If yes, how are the populations identified? (Select all that apply) | Respondent skipped this question |
| Q216 Requirement 2: My department has a report or has developed a report that identifies populations who experience barriers to health care services. | No |
| Q217 If yes, in the report, are the populations who experience barriers identified by the following? (Select all that apply) | Respondent skipped this question |
| 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 |
| Q219 If yes, how are the gaps in health care services and barriers to care identified? (Select all that apply) | Respondent skipped this question |
| 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 |
| Q221 If yes, does the report include? (Select all that apply) | Respondent skipped this question |
| 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 |
| 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 Yes

| implemented strategies to improve access to health care services for those who experience barriers. | |
|---|---|
| Q225 If yes, what strategies have been implemented to improve access to health care services? (Select all that apply) | Contractual arrangements with local VNA , services Case management, Transportation programs |
| Page 56: 10 ES - #7 Link people to needed personal by 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. | nealth services and assure the provision of health care Yes |
| Q227 If yes, what are some of the initiatives? (Select all that apply) | Language/interpretive services, Collaboration with other municipal departments (e.g., schools, social services) , MOA with community based organizations, community health centers, VNAs |
| Page 57: 10 ES - #8 Assure competent public and per Q228 Requirement 1: My department actively promotes public health as a career choice. | rsonal health care workforce Yes |
| Q229 If yes, how? (Select all that apply) | Collaboration with a school or college of public health to host interns/volunteers , Participating in student career fairs |
| Page 58: 10 ES - #8 Assure competent public and per Q230 Requirement 1: My department has a workforce development plan. | rsonal health care workforce |

| Q231 If yes, does the workforce development plan? (Select all that apply) | Respondent skipped this question |
|---|---|
| Q232 If no, is the plan in development? | Yes |
| Q233 Requirement 2: My department has implemented its workforce development strategies. | No |
| 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 per | sonal health care workforce |
| Q235 Requirement 1: My department ensures a competent workforce. | Yes |
| Q236 If yes, how does your department ensure a competent workforce? (Select all that apply) | Documented process for recruitment of qualified , staff |
| | Job descriptions and requirements for specific certifications, skills, training, experience and education |
| | Protocol/process to verify staff , qualifications |
| | Documents that the qualifications have been verified for all staff hired in the past 2 years |
| | , Annual performance reviews |
| Page 60: 10 ES - #8 Assure competent public and per | sonal health care workforce |
| Q237 Requirement 1: My department documents staff's completion of their professional development activities. | Yes |
| Q238 If yes, what types of professional development activities? (Select all that apply) | Continuing education for , certifications/licenses |
| | Training opportunities (e.g., HIPAA, emergency response, methods for the presentation of data, health equity, and communications) |
| | Mentoring |

| Q239 Requirement 2: My department provides leadership and/or management development training programs. | Yes |
|--|--|
| Q240 If yes, what type of leadership and/or management development training programs? (Select all that apply) | Meetings and conferences |
| Q241 Requirement 3: My department provides an environment in which employees are supported in their jobs. | Yes |
| 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 |
| | Seeking staff input on professional development , goals |
| | Providing professional development , opportunities |
| | Providing collaborative learning opportunities (e.g., participation on boards, committees, and task forces in community, collaborative planning sessions, shared reviews of program evaluations, etc.) |
| Page 61: Copy of page: 10 ES -#9 Evaluate effectiven | ess, accessibility, and quality of personal and |
| Q243 Requirement 1: My department has adopted a performance management system with input from staff and leadership. | No |
| Q244 If yes, does the performance management system include? (Select all that apply) | Respondent skipped this question |
| Q245 If no, is the department in the process of adopting a system? | No |
| Page 62: 10 ES -#9 Evaluate effectiveness, accessibil health | ity, and quality of personal and population-based |
| Q246 Requirement 1: My department has a committee or team that is responsible for implementing the performance management system. | Respondent skipped this question |

Q247 If yes, does the committee or team? (Select all Respondent skipped this question that apply) Q248 If yes, for which area(s) has the performance Respondent skipped this question management system been implemented? (Select all that apply) Page 63: 10 ES -#9 Evaluate effectiveness, accessibility, and quality of personal and population-based health Q249 Requirement 1: My department collects, analyzes, No and draws conclusions from feedback from different customer groups. Q250 If yes, what groups have you surveyed? (Select all Respondent skipped this question that apply) **Q251** Requirement 2: My department has implemented No changes/improvements based on the customer feedback. Q252 If yes, what is one (1) change that your department Respondent skipped this question has implemented? Page 64: 10 ES -#9 Evaluate effectiveness, accessibility, and quality of personal and population-based health Q253 Requirement 1: My department provides staff Yes development in performance management. Q254 If yes, how does your department provide staff Webinars, development in performance management? (Select all Trainings/presentations, that apply) **Training materials** Page 65: 10 ES - #9 Evaluate effectiveness, accessibility, and quality of personal and population-based health **Q255** Requirement 1: My department has a written No quality improvement (QI) plan that is dated within five vears.

| Q256 If yes, does the QI plan address the following? (Select all that apply) | Respondent skipped this question |
|---|--|
| Q257 If no, where is your department in the process? (Select one) | My department has not begun a QI plan |
| Page 66: 10 ES -#9 Evaluate effectiveness, accessibil health | lity, and quality of personal and population-based |
| Q258 Requirement 1: My department has documentation of implemented quality improvement activities based on the QI plan. | Respondent skipped this question |
| Q259 If yes, did the documented QI activities include the following? (Select all that apply) | Respondent skipped this question |
| Page 67: 10 ES - #10 Research for new insights and i | nnovative solutions to health problems |
| Q260 Requirement 1: My department has incorporated an evidence based or promising practice in a process, program or intervention. | No |
| Q261 If yes, what is/are the source(s) of the evidence-based or promising practice? (Select all that apply) | Respondent skipped this question |
| Q262 If yes, please upload or describe one promising practice implemented. | Respondent skipped this question |
| Q263 Promising practice description | Respondent skipped this question |
| Page 68: 10 ES - #10 Research for new insights and i | nnovative 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. | No |
| Q265 If yes, describe the research. | Respondent skipped this question |
| Q266 If yes, with whom did your department communicate the research findings? (Select all that apply) | Respondent skipped this question |

Yes

Page 69: 10 Essential ServicesCertification

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.