

CITY OF STAMFORD DEPARTMENT OF HEALTH
Protecting the Public's Health

Annual Report

July 1, 2021 to June 30, 2022



The Department of Health works to improve the health and safety of those who live and work in City of Stamford by applying the basic principles of health promotion and disease prevention through the programmatic activities undertaken by the department.

The Department's Mission is to promote wellness and healthy lifestyles, prevent disease and injury, and proactively protect the health, safety, and well-being of the public and our city environment.

The Department's Vision is to have healthy people living, learning, working, and playing in a safe, healthy, and culturally diverse community.

The Department's Values are, (iCARE):

innovation: We search for create solutions and manage resources wisely.

Collaboration: We use teamwork to achieve common goals and solve problems.

Accountability: We perform with integrity and respect.

Responsiveness: We achieve our mission by serving our customers and engaging our partners.

Excellence: We promote quality outcomes through learning and continuous performance improvement.

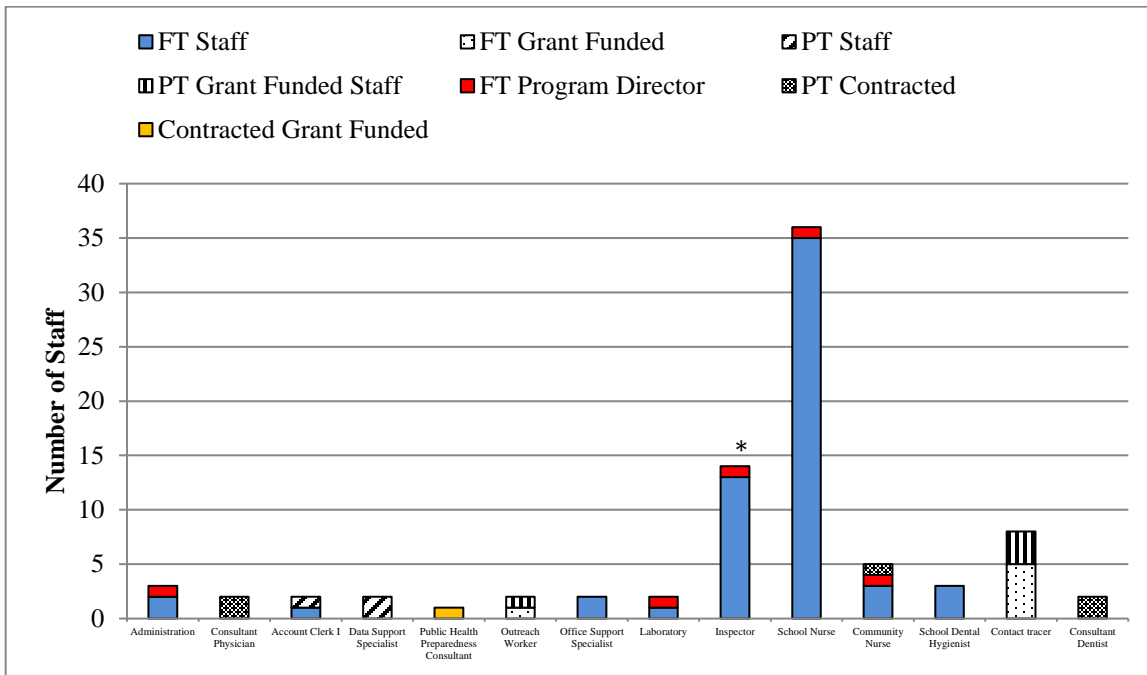
The State of Connecticut's General Statute 19a-207a requires that all Departments of Health engage in the *Ten Essential Services (ES) of Public Health*. These 10 ES are grouped into these major areas:

- I. **Assessment**
 1. Monitor Health
 2. Diagnose & Investigate
- II. **Policy Development**
 3. Inform Educate & Empower
 4. Mobilize Community & Partnerships
- III. **Assurance**
 5. Develop Policies
 6. Enforce Laws
 7. Link to/Provide care
 8. Assure Competent Workforce
 9. Evaluate
 10. Research

Through its, mission, vision, and values, the Stamford Department of Health aligns its activities with these ten essential services.

In fiscal year 2021-2022,84 positions were in place in the Stamford Department of Health. Figure 1 below demonstrates the staffing levels by program when fully staffed.

Figure 1. Stamford Department of Health Staffing by Program Fiscal Year 2021-2022



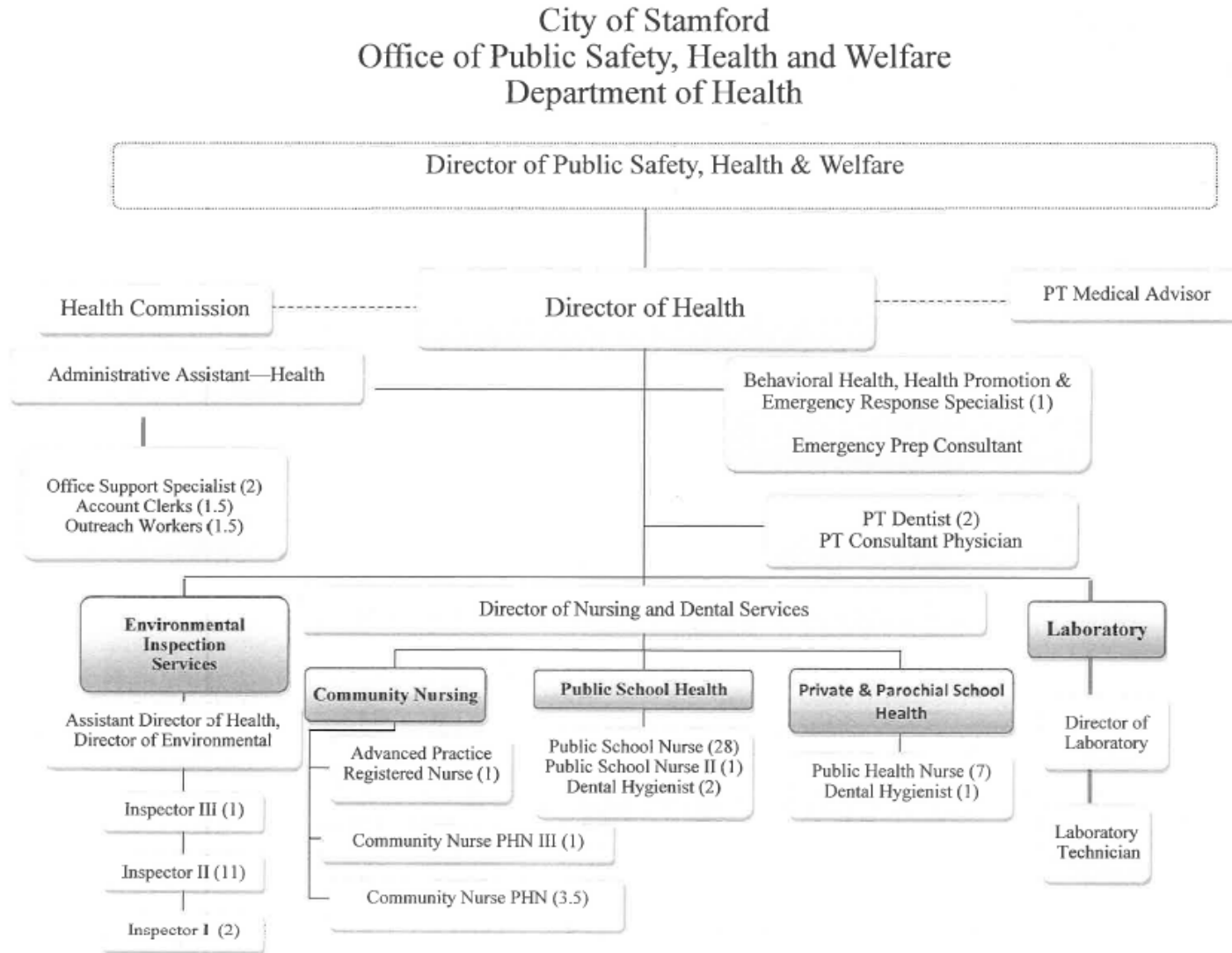
*Director of Nursing and Dental Hygiene oversees the school nurses, community nurses, and dental hygienists

The department is overseen by the Director of Health with support from a part-time Medical Advisor. The Director of Health reports to the Director of Public Safety, Health, and Welfare with support from the Health Commission. The department consists of the Environmental Health & Inspections, Nursing & Dental Services, and Laboratory Divisions, Outreach, and Emergency Preparedness and Response Programs. The Administrative Assistant and her team support the work of the entire Department.

The Department has had realized staffing challenges in nearly all areas. Losses due to resignations, retirements, medical leaves and professional shortages have impacted the leadership team who have had to maintain the same level of response with fewer staff.

Figure 2 shows the organizational chart for the department. Some grant funded temporary staff such as the contact tracing team are not included on the chart.

Figure 2. Stamford Department of Health Organizational Chart Fiscal Year 2021-2022



Department Initiatives

Mental Health and Wellness

Youth Mental Health Alliance YMHA)

Mental Health was identified by members of the community, community agencies, the Health Commission, and the Mayor's transition team as an unmet health need in Stamford. The Stamford Department of Health recognized the need to address this urgent public health issue. The alliance of the Mayor's Office, Dept of Health, Health Commission, Stamford Public Schools, Vita Health and Wellness Partnership (and over 20 community agencies) came together to spur a community-based awareness and response to the mental health crisis among youth with an emphasis on universal promotion of mental health wellness, prevention, early intervention, and targeted services/care coordination dovetailed into the existing or newly created mental health infrastructure. The Alliance has made great strides to develop plans and projects to address the mental health crisis among our youth. The Alliance's community based approach includes early assessment and improving protective factors, trainings for all who interact with youth and families, identifying therapeutic and non-therapeutic resources and reducing stigma. Many hours of staff time is dedicated to this project.

Part of this work has been to develop a Postvention Plan to support the community in the event of a death by suicide or untimely death. This will be described more fully under the Emergency Response section of the report.

Student Interns

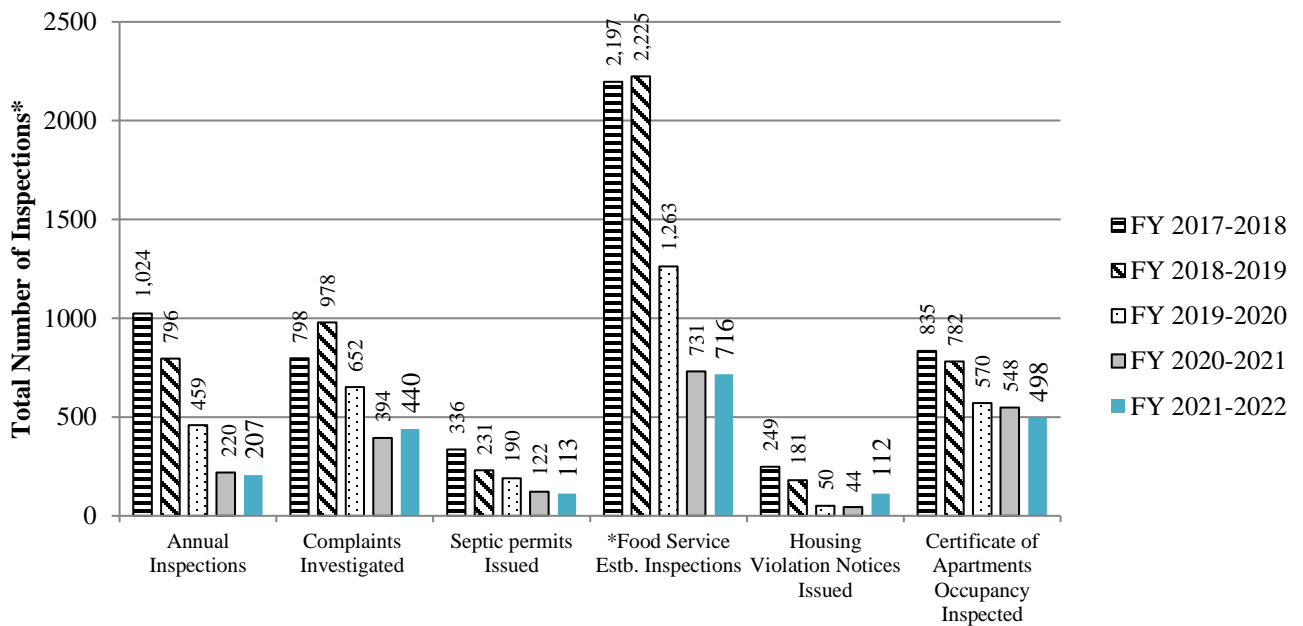
The pandemic highlighted the need for developing a stronger public health infrastructure including the workforce. The Department developed MOUs with several local Universities to host student interns to support the work of the Department as well as promote the profession as a career. Student interns performed various tasks and developed related projects for health education (chronic disease, asthma, lead exposure, vaping), health promotion on social media and mental wellness resources.

Environmental Inspections

In November 2021 a new Assistant Director of Health, Director of Environmental Health and Inspections was hired. This was a promotion of an existing Inspector II with many years of experience working in the Stamford community and the qualifications to be an Acting Director of Health in the absence of the Director. The Division continues to be short staffed, as there is a shortage of public health professionals especially in the area of Environmental Health. Two Inspector I positions were filled, but it takes time for them to be certified in all areas of Environmental Health and conduct inspections without supervision, They have been working to gain the requisite certifications and experience. Additionally the licensing and permitting program used by the Division is constantly being refined by the Administrative Assistant to better be able to meet the needs of both internal and external users, based on user feedback.

The Environmental Inspections program addresses environmental issues that affect the health and safety of the public. These include but are not limited to issues related to housing, lead, mold, asthma, air pollution, food, daycare, bedbugs, pools, weights and measures, rodent, septic, permits, stagnant water, water pollution, noise, and general complaints. Through these activities, these programs addresses essential services 3 to 6 and 8 to 9. In fiscal year 2021-2022, there were 2,086 environmental health related activities. Figure 3 below shows the five-year activity trends.

Figure 3. Environmental Health and Inspections Five-year Activity Trends



Includes repeat inspections.

Annual Inspections are conducted on Assisting living, Cosmetology/Personal Care, Daycares, Garbage Trucks, Hotels, Public Beaches, Rooming Houses, and Schools.

Complaint investigations are conducted throughout the year on a variety of issues including Air pollution, Bedbugs, Housing, Garbage, Lead and No Heat.

Septic permits are issued on subsurface sewage regarding new systems, additions, repairs, subdivision reserves, and code complying areas.

Food inspections are conducted throughout the year on all food establishments including retail establishments and temporary events.

Housing notices/orders are issued to owners or tenants who are in violation of the Connecticut Public Health Code, General Statutes of the State of Connecticut and Stamford City Code of Ordinances.

Certificate of Apartment Occupancy (CAO) inspections are inspections on structures that contain four (4) units or more and are at least 15 years of age or older.

From 2020-2021 to 2021-2022, the number of annual inspections completed decreased by 6%, the number of complaints investigated increased by 13%, the number of septic permits issued, decreased by 7% most likely a result of the pandemic-related shutdown. Many businesses in this category closed or were delayed in reopening and there was limited access to many facilities in order to limit exposure.

There was an increase of 155% in housing violation notices compared to fiscal year 2020-2021. This increase may be a result of home owners lacking the educational awareness of the proper housing codes that ensure a safe living environment. This may also have been impacted by the COVID-19 lockdown which prevented the division to conduct the operation safe house initiative that targeted illegal an unsafe housing matters and the lack of affordable housing for Stamford residents.

A certificate of apartment occupancy (CAO) inspection relies on owners calling to indicate that a dwelling-unit has been vacated, has been repaired or renovated, and is ready for inspection before a new tenant takes occupancy. As such, this type of inspection is based on the owner's knowledge of the regulation and willingness to comply. There was a decrease of 9% compared to fiscal year 2020-2021, which may be a result of residents not moving out from their units during the pandemic and/or property owners not notifying the department when a unit became vacant.

Under the State of Connecticut Public Act 17-93, enacted on October 1, 2017, food establishments have been reclassified as follows:

Class I Food Establishments only offer for retail sale (1) prepackaged food or food prepared in the establishment that are not required to be maintained at a specific temperature or (2) commercially processed food that is may be heated prior to serving but not permitted to be cooled; Class II Retail food establishments serve high risk populations and offer food items that are (1) prepared, cooked, and served immediately or (2) prepared, cooked, and held at the appropriate hot or cold temperatures; Class III Retail food establishments (1) do not serve high risk populations (2) have an extensive food menu, many of which require proper time- or temperature-control for safety and require complex preparation; and Class IV Retail food establishments (1) serve high risk populations or (2) conduct specialized food processes (e.g., smoking or curing).

In addition, the City of Stamford Ordinance Chapter 132 section 28 defines Retail Foods “as any establishment or section of an establishment where food and food products are offered to the consumer and intended for off-premise consumption. The term includes delicatessens that offer prepared food in bulk quantities only. The term does not include establishments which handle only prepackaged, non-potentially hazardous foods; roadside markets that offer only fresh fruits and fresh vegetables for sale; food service establishments; or food and beverage vending machines”. “Temporary Food Service Establishment means a food service establishment that operates at a fixed location for a temporary period of time, not to exceed two (2) weeks, in connection with a carnival, circus, or public exhibition, festival, celebration, or similar transitory gathering”.

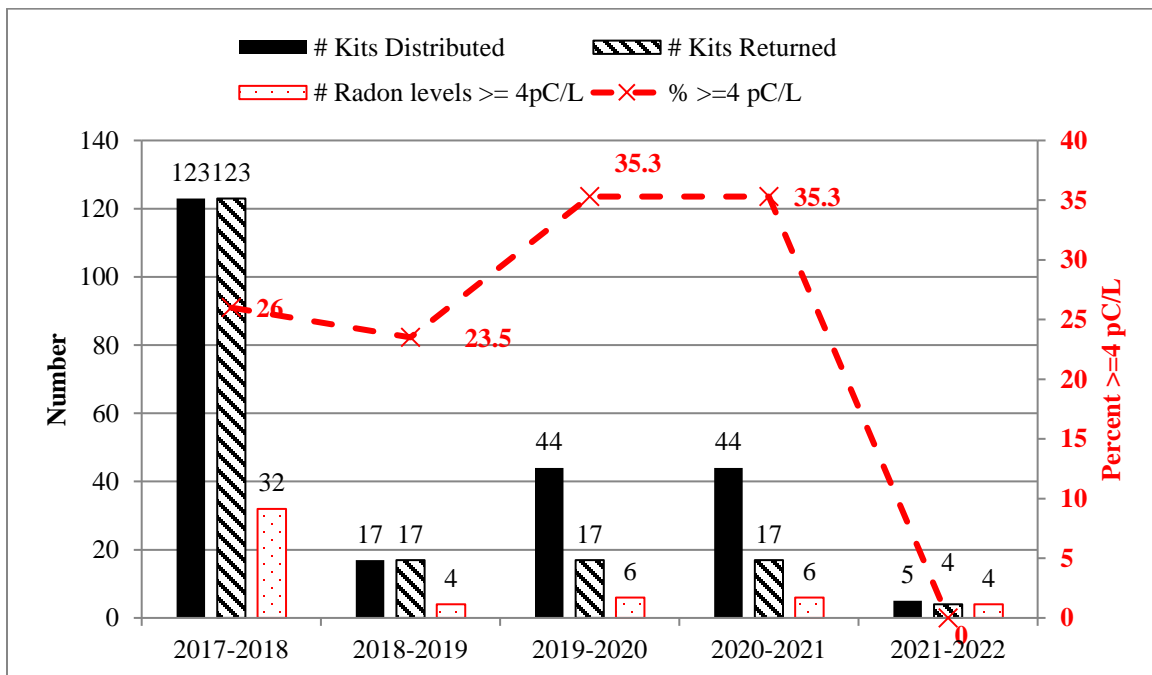
Radon Testing Program

In January 2022, the Department of Health in collaboration with the State Department of Public Health initiated the free voluntary Radon Testing program for home owners. Initially, radon surveillance was conducted during the months of January to March. In 2020, DPH changed this to an all year activity.

Stamford Department of Health offers Home Owners free radon kits that the owner deploys in his or her home to test the air for radon. The kits are returned to the Department of Health where they are sent to a laboratory for testing. When the radon test results are equal to or higher than ≥ 4 pC/L; which is considered to be harmful, homeowners are given advice on how to remediate their homes.

Figure 4 below shows the radon results since voluntary testing started. Given that this is a convenience sample, the positivity rate may not be reflective of the actual positivity rate of homes in the City. The lower number of kits distributed in fiscal year 2018-2019 is most likely due to the fact that the radon public awareness activities did not occur that year. In 2020 outreach resumed and the number of kits requested increased by 158%. However, only 38.6% of the kits were returned compared to the prior two years. Numbers remained the same for 2020-2021. In 2022, the Stamford Health Department worked with the state DPH in taping public service announcements to increase awareness and encourage participation in the free Radon testing program. The Health Department distributed 5 kits and 4 were returned. None of the results were ≥ 4 pCi/L. The low level of interest in the program, highlights the need to increase publicity of this important environmental health program.

Figure 4. Radon Testing of Air Samples in Homes



Mosquito Control Program

The Stamford Department of Health Environmental Health and Inspections Division inspects all reports of environmental areas and conditions that may potentially support the growth of mosquitoes. Whenever possible, inspectors take appropriate actions to eliminate mosquito-breeding sites and prevent the development of adult mosquitos.

The creation of a Mosquito Control Program within the Environmental Inspections Division has enabled the inspectors to more effectively eliminate mosquitoes and the diseases carried by them. The program engages in activities to increase community awareness through education on how to reduce mosquito exposures and mosquito breeding sites around commercial and home environments.

In an effort to suppress the development of adult mosquitoes through the elimination of mosquito larvae, the city's entire catch basin system is treated with a larvicidal product through the services of a contracted agent. Larviciding currently occurs four times per year to maximize the efficacy of the larvicide.

During the 2021-2022 fiscal year the program responded to 7 complaints involving mosquitoes and stagnant water.

Laboratory Division

The Laboratory provides supportive services to the Department of Health's various divisions. For example, the above programs, radon testing and larviciding, are managed as a collaboration between the laboratory and environmental health staff. Additionally the laboratory conducts water testing, tick identification, facilitates animal rabies testing and tick testing for Lyme disease, and provides public health information to the citizens of Stamford. Through these activities, the Laboratory program supports essential services 1 to 3 and 6 to 8. Every year the laboratory also tests the beach waters weekly in Stamford beginning in May and continuing through Labor Day. A total of 306 beach samples were collected and tested in FY 2021-22.

Figure 5 shows the five-year trend of *Ixodes scapularis* tick (a vector for Lyme disease) submissions and the percent that tested positive for Lyme disease. The rate of Lyme disease positivity in ticks collected in Stamford has traditionally been similar to the overall rate in the State of Connecticut.

Figure 5. *Ixodes scapularis* Ticks Tested in Stamford vs. Statewide and Percent Positive for Lyme Disease

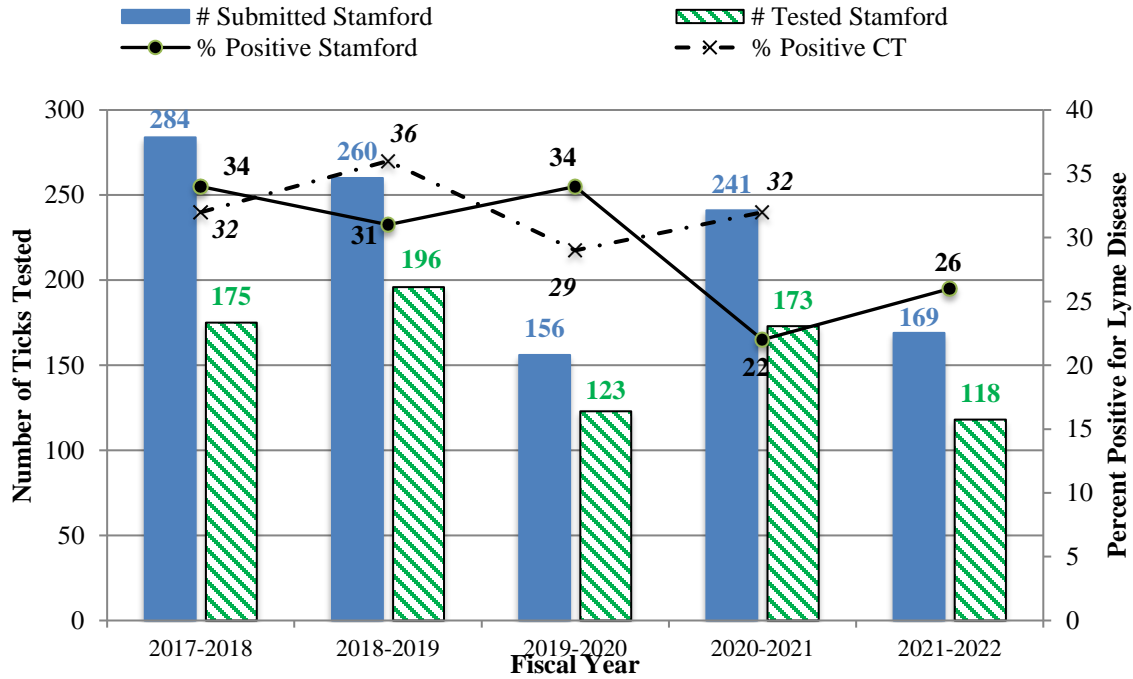
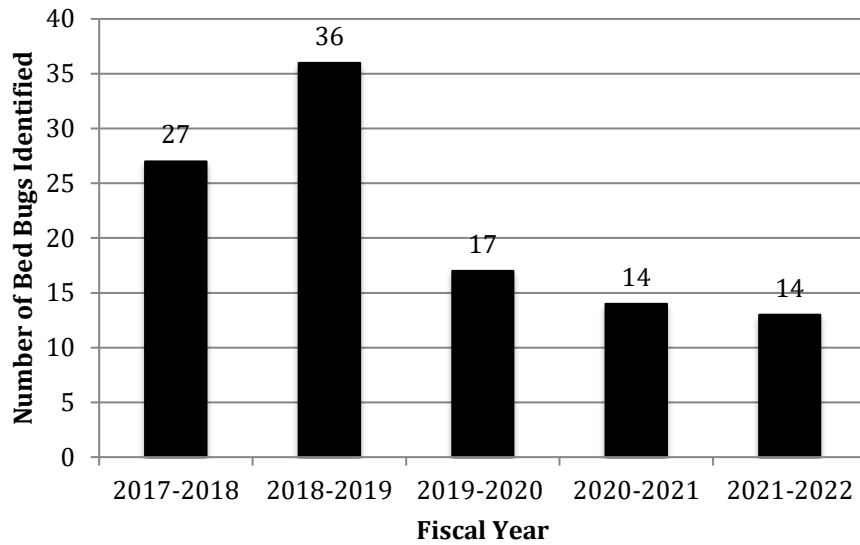


Figure 6 shows the number of bedbugs identified over the past five years. There was a decrease seen between 2019 to 2020. This was most likely due to changes in the State of Connecticut’s House Bill No. 5335 and the Public Act No. 16-51, which became effective on October 1, 2016. This Act requires landlords to remediate bedbug problems. Based upon complaints reported to the Department of Health, environmental inspectors will perform a home inspection on rental properties and if bedbugs are found, issue orders to the landlords for extermination. The 33.3% increase seen in fiscal year 2018-2019 remains unexplained and the 53% decrease in 19-20 may be affected by the COVID-19 pandemic-related lockdown for the last three months of the fiscal year. A small percentage decrease was shown in 20-21 and remained the same for 21-22..

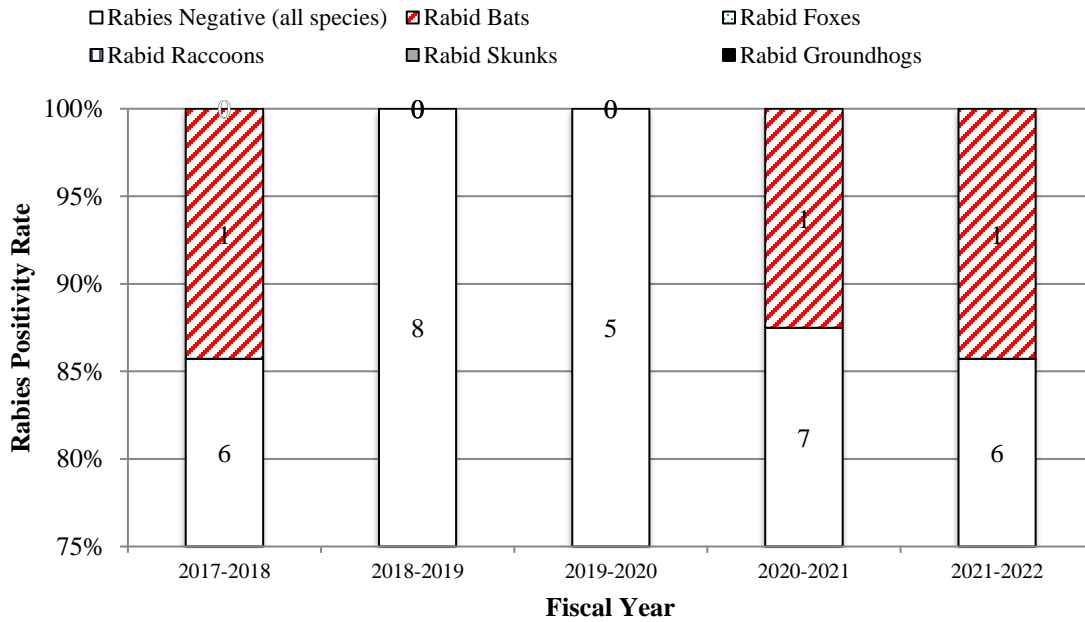
Figure 6. Number of Bed Bugs Identified



Rabies testing is conducted on suspected rabid animals that have had either human or domesticated animal contact. The Laboratory, along with the city’s Animal Control program, ensures that animal specimens that need to be submitted for rabies testing are transported to the State Public Health Laboratory for testing. The Laboratory or Animal Control follows up with residents who have been exposed to an animal that tests positive for rabies to advise them to seek medical attention.

Figure 7 shows the five-year trend in samples submitted for testing and the percent that tested positive for rabies by species.

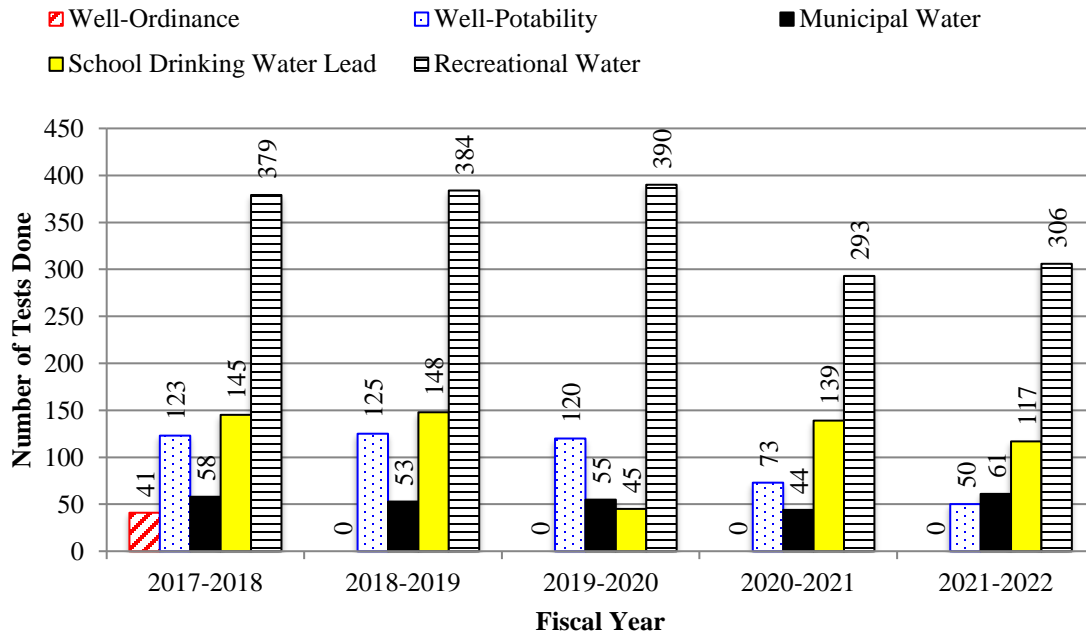
Figure 7. Animal Rabies Testing



The Laboratory’s core activities relate to water testing. For a fee, municipal water testing for lead and copper, well water testing for potability, recreational water testing is available to the public. The Laboratory conducts biennial testing of school drinking water for lead and does beach water testing as is required by Connecticut General Statutes Chapter 98, Section 7-148.

Figure 8 shows the five-year trends for water testing. Well potability testing requests decreased slightly during the COVID pandemic while recreational and municipal water testing requests have remained relatively constant.

Figure 8. Water Testing



Public Health Nursing and Dental Hygiene Services

The Public Health Nursing program consists of Community Nursing and School Nursing and in combination with the School Dental Hygiene program supports ES 1 to10. Due to the COVID-19 pandemic schools closed early high risk activities such as dental services were suspended early the community clinic services were by appointments only, some staff chose not to work during the pandemic, and others were reassigned to focus on the pandemic response thus the breadth of services requested and provided were reduced. As the City reopened, many activities resumed but at a lower volume to maintain COVID mitigation strategies and protect the health and safety of clients and staff.

Community Nursing

Community nurses provide oversight to multiple programs: the Breath of Fresh Air Program, the Cocoon Program, the Influenza Prevention Program, the Sexually Transmitted Diseases (STD) Program, the Tuberculosis (TB) Program, the Well Child Program, the Pediatric Lead Prevention Program, Reportable Diseases, and the Adult Wellness Program. Community Nurses also participate in outbreak investigations and Public Health Emergency Response.

In November 2020, Community nursing implemented an electronic health record system (Patagonia).

Breath of Fresh Air

The Breath of Fresh Air Program (Asthma Program) is a collaborative effort between the Environmental Health and Inspections and Nursing Divisions that is offered free to parents of asthmatic children. The goal of the program is to reduce asthmatic attacks through education and environmental dust reduction. Table 2 below shows a decrease in the program’s activity which is due to a dramatic decrease in funding. The Department of Health has been working with the Grants Department to seek funding to reinstate this valuable program. A student intern is also supporting this work.

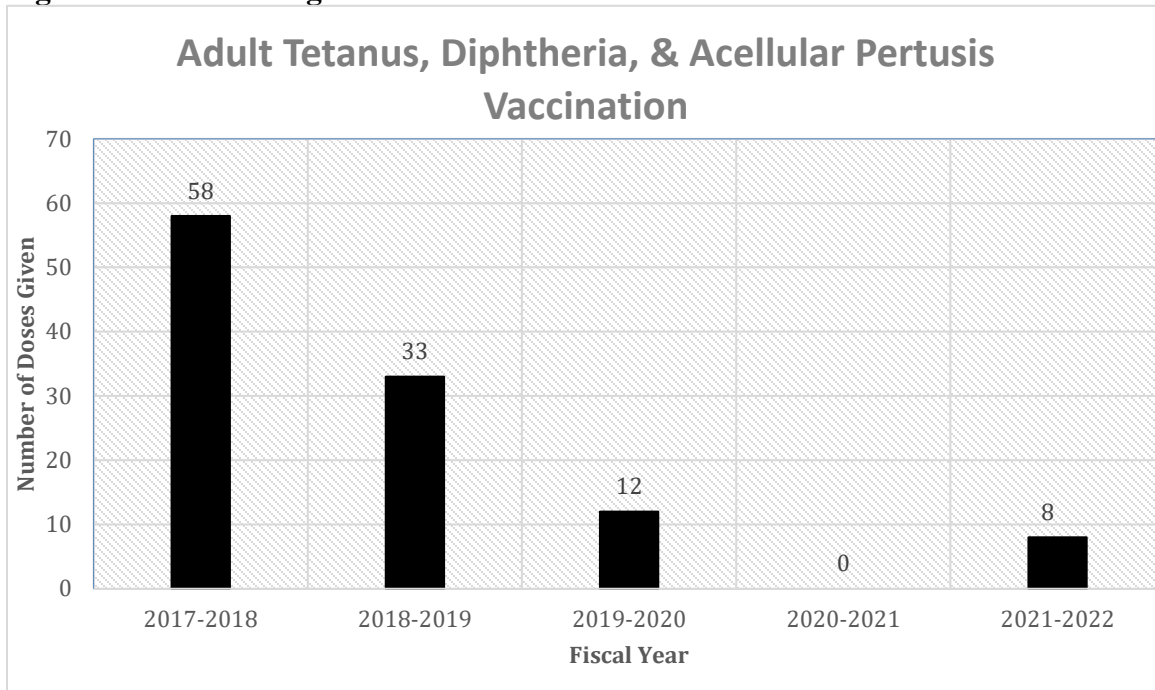
Table 1. Breathe of Fresh Air Program

	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022
New Clients	1	3	0	0	0
No. of Visits	2	4	0	0	0

Cocoon Program

The Cocoon Program is a state funded program that provides free tetanus diphtheria and acellular pertussis (TDaP) vaccine to any adult family member who has contact with an infant. The goal is to protect the child against pertussis infection that may be transmitted from the adult caregiver to the infant. The vaccine is provided for free by Sanofi Pasteur through a program sponsored by the State Department of Public Health and the Centers for Disease Control and Prevention. Figure 9 shows the number of doses of tetanus diphtheria and acellular pertussis (TDaP) vaccine given in this last fiscal year 2021-2022 was eight doses administered. While the public is slowly is becoming re-acquainted with this program, more promotion about the availability of the vaccine, especially for un-insured persons, is needed.

Figure 9. Cocoon Program Five-Year Trends



Influenza Prevention Program

The goal of the influenza prevention program is to increase the vaccination rates in the city, thereby increasing herd immunity. This will make the city better prepared to withstand the effects of an influenza pandemic. To help achieve this goal, the Department of Health provides influenza vaccine to all eligible persons ages three (3) years or older. The 2020-21 annual Influenza campaign was ‘kicked off’ at Henry Street Clinic on September 23rd, 2021. Over the years, the Department of Health has expanded its outreach activities in an effort to increase influenza vaccination coverage. These activities included targeting City and Board of Education employees, City of Stamford Boards of Finance and Representative Members, and members of the public. In addition to outreach events, Influenza vaccines are offered at the Henry Street Clinic throughout the entire influenza season from October through April. For the last 3 consecutive years, there has been an overall reduction in the number of vaccines administered due to the COVID-19 pandemic. The Department administered 411 flu vaccines which does not include children’s flu vaccines administered during the Well Child Clinics. Figures 10 and 11, respectively, show the five-year trends in influenza vaccine administration and the populations targeted

Figure 10. Influenza Vaccination Program

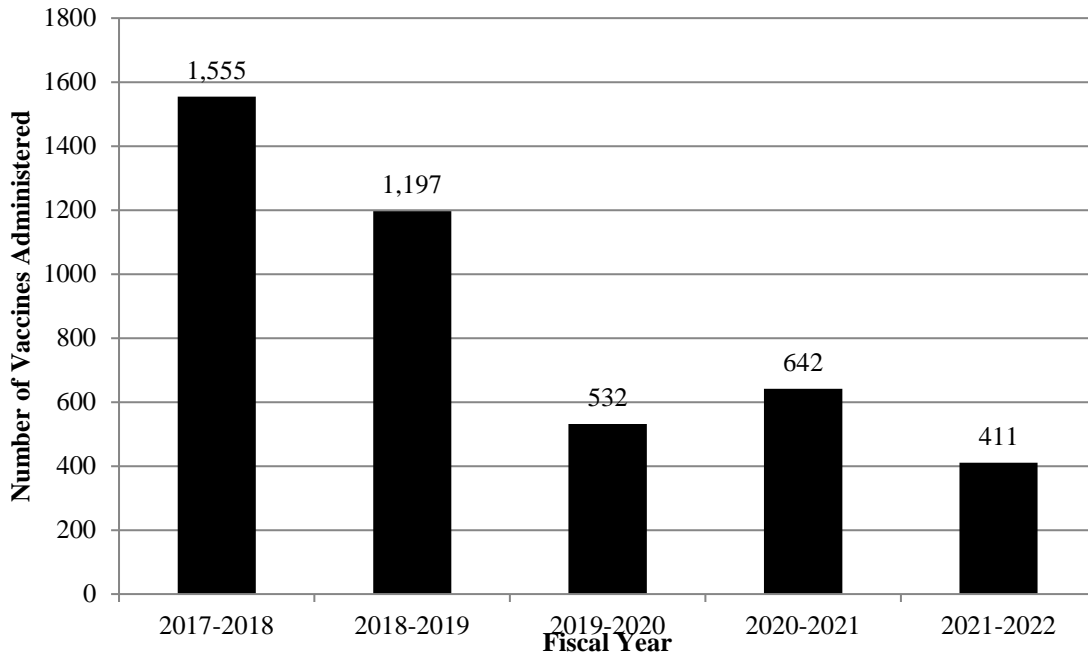
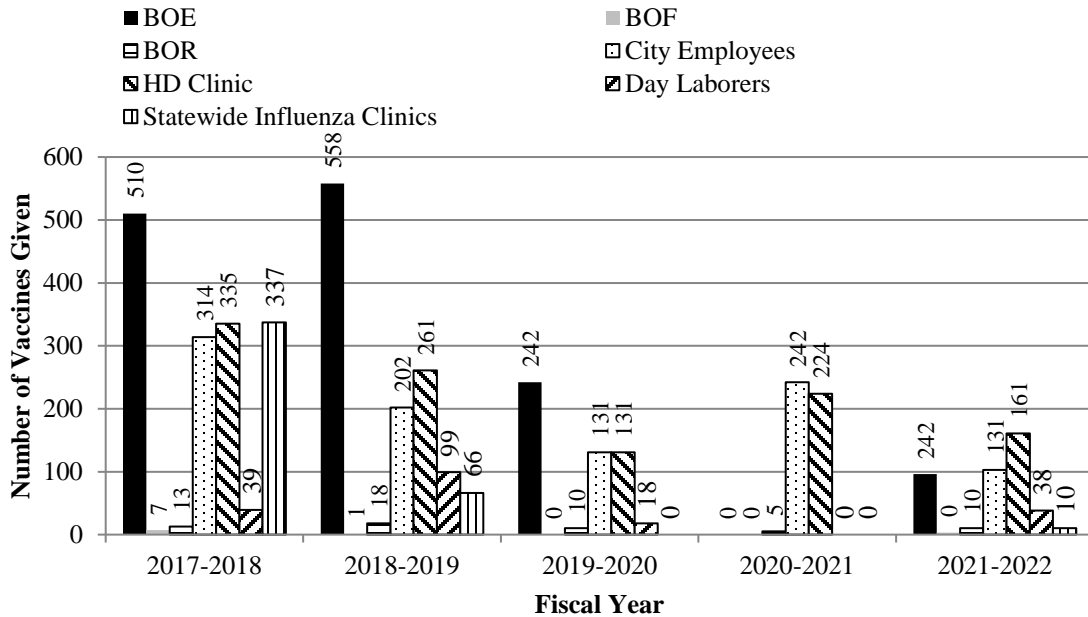


Figure 11. Influenza Vaccination By Population Served



Sexually Transmitted Disease (STD) Program

The Stamford Department of Health’s Sexually Transmitted Disease (STD) Clinic is partially supported by a grant from DPH that is funded through the Centers for Disease Control and

Prevention. The program provides comprehensive diagnostics, treatment, and counseling for the most common STDs including syphilis, gonorrhea, *Chlamydia* spp., *Trichomonas* spp., and Herpes viruses. The program assists with the identification of the sexual partners of persons diagnosed with a STD and offers prophylactic treatment when appropriate. Service is free of charge to anyone 13 years or older. Free HIV testing is also offered through the program and positive individuals are linked to care through partnership with Stamford CARES (Coalition for AIDS Resources, Education and Services), a Family Centers program. Hepatitis A and B vaccines are provided by DPH and are offered free of charge to STD clinic patients. *Table 2, details City of Stamford trend in STD positivity rates, which are reflective of the national trend. Overall, this emphasizes the need to maintain a local ability to provide needed STD services.*

Table 2. Sexually transmitted Disease Clinic Five-Year Trends

	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022
No. of initial visits	439	355	245	248	273
No. of follow up visits ¹	108	96	47	96	248
No. of STD tests ²	486	380	256	659	521
No. (%) of syphilis positive	31 (7.0)	26 (7.3)	7 (2.7)	21(9.9)	30 (12.0)
No. (%) of <i>Chlamydia</i> spp. positive	35 (7.9)	25 (7.0)	13 (5.1)	17(8.0)	25 (9.0)
No. (%) of gonorrhea positive	6 (1.3)	10 (2.8)	5 (2.0)	7 (3.3)	11 (4.0)
No. of HIV tests done (% positive)	379 (.26)	319 (0)	129 (0)	206 (.5)	248 (.008)
No. of pregnancy tests done (% pregnant)	4 (25.0)	1 (0)	0	0	0

¹ Follow up visits are for counseling, medications, second dose of vaccines, rechecks for positive tests, and recheck if the patient remains symptomatic.

² When STD testing is conducted, each patient is routinely tested for syphilis, gonorrhea, and *Chlamydia* spp. at the initial visit if there was no prior testing done or if testing was done and the patient is still symptomatic at initial visit. If needed, at the follow-up visit some patients are retested if they remain symptomatic

All persons who were diagnosed with a STD were treated in the clinic. The STD grant requires that clients are treated within seven (7) days of their initial visit. To ensure compliance, treatment is usually started empirically and is changed if needed based on the confirmatory diagnosis. Not all patients treated are tested at the clinic; some are referred for treatment based on positive test results elsewhere.

Tuberculosis (TB) Program

The Stamford Department of Health has a primary responsibility for preventing and controlling the spread of TB. To meet this challenge successfully, the TB control program engages in a number of activities that include the following key components:

- Conducting overall planning and development of policy
- Identifying persons who have clinically active TB
- Managing persons who have or are suspected of having TB disease

- Providing directly observed therapy (DOT) to persons with active TB. DOT is a process during which the nurse observes the patient take his or her TB medications
- Identifying and assessing the contacts of persons who are identified with active communicable TB
- Identifying and managing persons infected with TB
- Providing laboratory and diagnostic services
- Providing education to staff, clients, and providers about the prevention, diagnosis, and control of TB.

The Stamford Department of Health Adult TB Clinic services are conducted via a collaborative agreement between OPTIMUS Health Care, the Department of Health, and Stamford Hospital’s Pulmonary Division.

Table 3 describes the five-year TB trends. The appearance of MDR TB cases in Stamford is not surprising given the large immigrant population, many of whom emigrated from parts of the world with high rates of MDR TB. It should be noted that none of these TB cases resulted in exposures that caused new infections. This is most likely a result of the Department of Health’s efforts to encourage providers to increase TB screening to facilitate early detection and treatment of TB cases and to communicate with the department so that we are quickly involved. DOT remains the cornerstone of effective TB treatment but is a labor intensive process that requires many nursing interactions for each patient.

Table 3. Tuberculosis Five-Year Trends

	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022
No. of new TB cases	2	4	6	6	7
No. (%) of new cases that are adults	2 (100)	4 (100)	6 (100)	6 (100)	7 (100)
No. (%) of multi-drug resistant TB cases ¹	0	1 (25)	1 (16.7)	1 (16.7)	1 (14.3)
No. of extremely drug resistant TB cases ²	0	0	0	0	0
No. of visits to client on DOT ³	148	460	1,300	1280	1820
No. of tuberculosis skin tests and or blood tests for TB administered	35	256	51	18	106
No. (%) of positive TB tests	1 (2%)	13 (5.0%)	6 (7.2%)	4 (22.2%)	5 (4.72%)

¹Multi drug resistant (MDR) are cases in which the *Mycobacterium tuberculosis* strain is resistant to isoniazid and rifampin

²Extensively drug resistant (XDR) are cases in which the *Mycobacterium tuberculosis* strain is resistant to isoniazid and rifampin and any fluoroquinolone and at least one of three injectable drugs namely Amikacin, Kanamycin, or Capreomycin

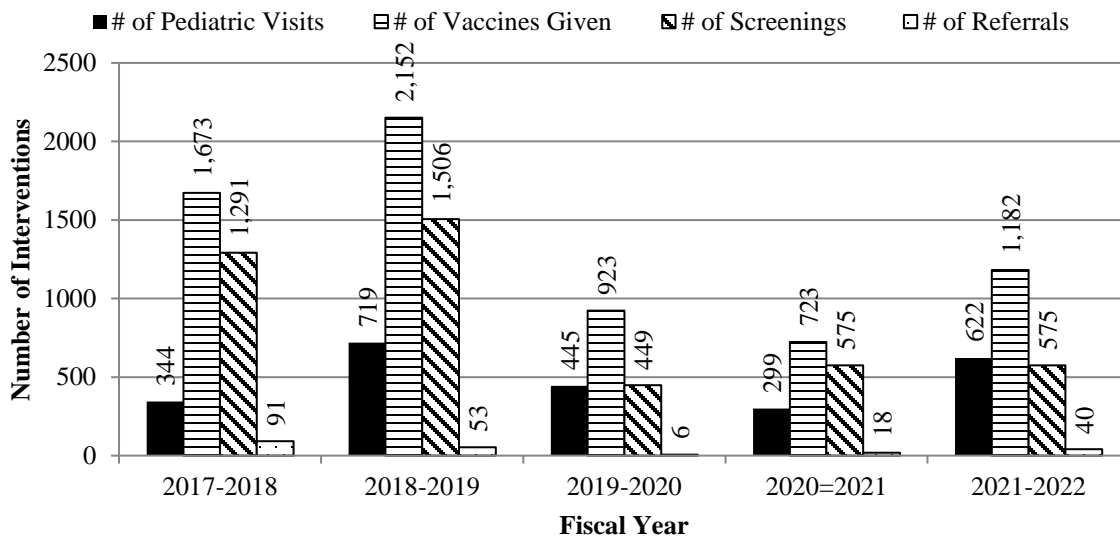
³DOT – directly observed therapy. This is used to ensure that persons who have active communicable TB disease are compliant with taking their medications.

The clinic continued it increased efforts to identify persons who are latently infected with the TB bacillus and recommend treatment to prevent subsequent TB disease and transmission.

Well Child Clinic

The Stamford Well Child Clinic provides primarily underinsured or uninsured children with physicals, vaccinations, medical screenings, social and psychological needs assessments, and if necessary, referrals to specialists. Medical providers, school nurses, the Stamford Hospital, and other sources refer children to the clinic. Well Child Clinic visits are also used to educate families about child development, nutrition, sleep, safety, diseases, other health topics, and available community resources. The ultimate goal is to link children to a medical home to ensure continuity of care for the child. The clinic is an available resource for families who need physicals and vaccinations for the children to enter school. Vaccines are given for free to the Department of Health from CTDPH via the Federal Vaccine for Children program to ensure that children are up-to-date on their vaccines. FY 21-22 began to see an increase in visits toward pre-pandemic levels as parents attempt to get their children up-to-date with physicals and vaccines.. Figure 12 details the five-year trends.

Figure 12. Stamford Well Child Clinic Five-Year Trends

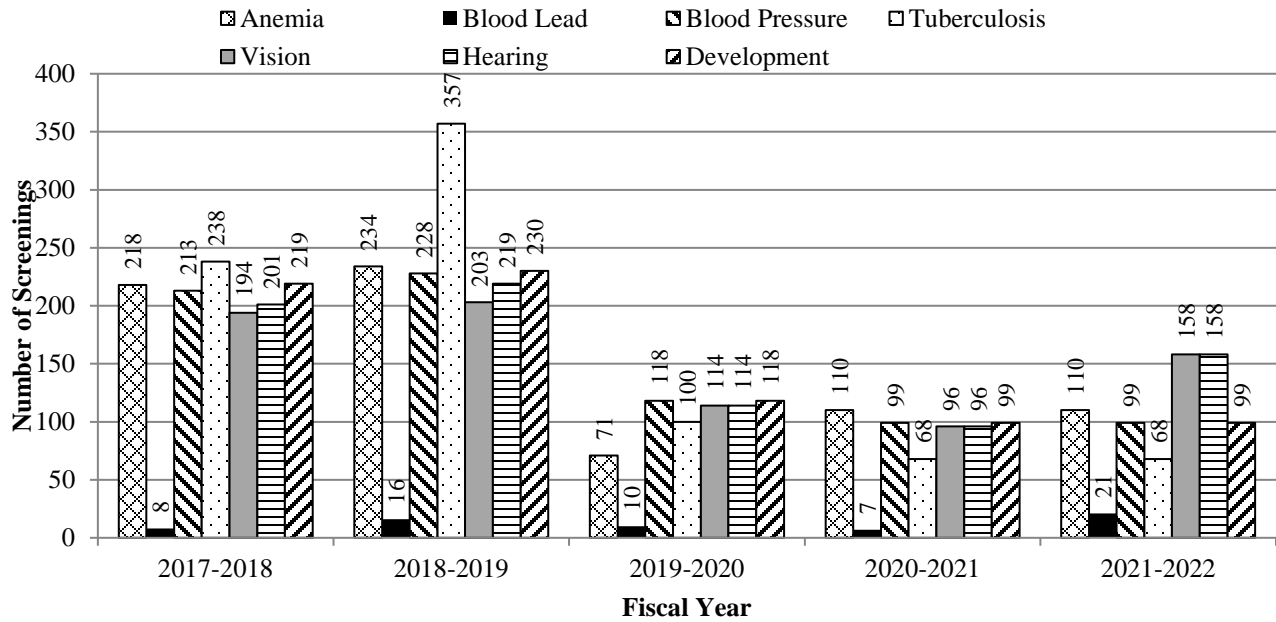


¹Screenings refer to vision, hearing, scoliosis, dental, developmental screenings, hemoglobin blood tests and lead blood tests

²Referrals are to other providers include but are not limited to the following, outside medical providers for evaluations and medical homes, dental clinics, School Based Health Centers, Community Based Health Centers ,

Figure 13 shows the number and types of screening that are conducted in the clinic. .

Figure 13. Well Child Clinic Screenings



Pediatric Lead Poisoning Prevention Program

Pediatric lead surveillance is required by Connecticut General Statute §19a-110(d). In addition to the lead screenings that are conducted through the Well Child Clinic, Community nurses follow up on all reports of elevated pediatric blood lead levels (BLL). An elevated BLL is defined as a BLL >5 ug/dl. Nurses ensure that the child is appropriately monitored by his or her healthcare provider, that parents take their child for follow-up testing, and that testing continues until the VBLL normalizes, meaning, falls below <5 ug/dl. When necessary, community nurses collaborate with Environmental Inspections Division, to conduct inspection of homes to identify and provide guidance in eliminating any potential source of environmental lead.

Given that pediatric lead screenings are only required for children ages 0 to 4yr 11 mo of age 21 children seen at the city’s Henry Street Clinic were screened for lead with 14 children found to have a level below <5mg/dl. Children seen in the community as a referral with notification from MAVEN we saw seven children with elevated blood levels in the community. Nursing collaborated with Environmental Inspections Division, to conduct inspection of homes to identify and provide guidance in eliminating any potential source of environmental lead. In fiscal year 2021-22, the community nurses investigated 7 elevated BLLs that were reported to the Department of Health. Of these, four (66.7%) homes required environmental inspection, but none was found to have lead on the property. However, it was established that these families were very transient, regularly travelling back to their home countries, where it is suspected they were being exposed.

(Non- TB, STD, & HIV) Reportable Diseases Program

Under Connecticut General Statute Section 19a-2a and Section 19a-36-A2 the Commissioner of Health establishes a list of diseases and conditions that must be reported to DPH and to Local Departments of Health. Local Departments of Health either investigate these cases independently or provide support to the DPH-lead investigations. In fiscal year 2021-2022, there were 6 food outbreak related investigations, which included multiple cases per investigation.

Community Nursing Outreach Activities

In 2020, funding from a Preventive Health and Health Services Block Grant provided an Adult Wellness Program which will continue until 2022. The Department contracted a nurse to provide blood pressure screenings and coordinate nutrition and exercise education to adults in the community. The program offered exercise classes and cooking demonstrations to promote low sodium meal preparations and overall better management of hypertension. Participants were offered blood pressure devices, free of cost, for self-monitoring and to report to their PCPs as needed. Due to the COVID pandemic, HIPAA compliant Zoom sessions were held. Outreach was conducted to set up programs at sites where residents visit and congregate, including *barbershops*, to attract a wide range of residents. For the second year of the program two hundred nine participants received blood pressure screenings. (209). Data from the first and second year of the program are shown in **Table 4**.

Table 4: Community Nursing Outreach

Stamford Department of Health Community Nursing Outreach	Number 2020-2021	Percent 2020-2021	Number 2021-2022	Percent 2021-2022
No. (%) screened with normal blood pressure readings (< 120/80).	10	22%	55	26%
No. (%) screened with elevated readings (120-129/<80).	11	24%	59	28%
No. (%) screened with stage 1 hypertension (systolic 130-139 or diastolic 80-89	9	20%	52	25%
No. (%) screened with hypertension stage 2 readings (>140 systolic or >90 diastolic)	16	35%	41	20%
No. (%) screened with hypertensive crisis: >180 systolic and/or >120 diastolic	0	0%	2	1%
No. (%) screened with elevated blood pressure readings that were aware of elevation.	16	44%	81	39%

School Nursing Program

The School Nursing Program provides the Stamford Public Schools and eleven not for profit private and parochial schools nursing services throughout the school year. The primary goal is to ensure a safe learning environment for all students. Our School Nurses must analyze the immunization records and mandated physical exam forms for all new enterers as well as kindergarten, seventh and tenth graders. Monitoring and maintaining immunization compliance is another major duty throughout the school year and is vital to maintaining a safe environment. The reviewing of each and every medical record is pertinent to developing a medical problem list every school year to ensure that all students with chronic medical conditions are receiving the appropriate accommodations, nursing care and support throughout the school day. Nurses review with teachers the medical needs of students that require monitoring throughout the school day. Nurses also conduct hearing, vision and scoliosis screenings referring students for evaluation by a physician for early detection and treatment of developmental issues. The high school nurses are also responsible to make sure every student athlete has a physical exam on file with clearance to play sports.

Thirty-five School nurses managed 18,676 students in public, private and parochial schools last school year. They also provided physician-ordered medical interventions for children with medical needs. Administering specialized medical treatments has become more prevalent in all of the schools throughout the city. School nurses are providing diabetic care, administering tube feedings, ostomy care and urinary catheterization in multiple school buildings throughout the city. This specialized care is a critical component of the program providing direct nursing care to students. Nurses educate families regarding various health-related topics to ensure healthy outcomes. They also respond to medical emergencies, provide first aid and administer medications.

School Nurses assemble the appropriate state required health metrics, which are reported to the State Department of Education. The School Nursing Program benefits from the oversight of the city's Medical Advisor and the city's Medical Consultant who work closely with the School Nurse Supervisor to provide and update protocols, provide medication orders for emergency epinephrine and albuterol, contact private clinicians to address medical questions and review special medically related requests.

After a hybrid 2020-2021 school year, Stamford Public School students returned to full time in-person education in September 2021 with many mitigation strategies in place to provide a safe environment for students. In addition to typical school nurse duties, School Nurses were assessing students presenting with symptoms of COVID-19, tracking cases of COVID-19 as well as providing guidance to students and families. The School Nurses worked closely with Principals, the School Nurse Supervisor and Contact Tracers to determine and establish contacts within the school. Thirteen of the School Nurses also provided nursing care throughout the summer at a six week extended school year.

Table 5. School Nursing Activities

	FY 2017-2018	FY 2018-2019	FY 2019-2020	FY 2020 - 2021	FY 2021 - 2022
No. of public school buildings	22	22	23	24	24
No. of private/parochial school buildings	17	15*	15	11	12
NURSING ACTIVITIES¹ (not including 911 calls or referrals)²					
TOTAL	308,901	350,882	100,031	176,147	305,598
No. (%) ³ of sick visits	67,840 (22.0)	61,063 (17.4)	50,349 (50.0)	33,009 (18.73)	64,073 (20.97)
No. (%) ³ of injury-related visits	31,333 (10.0)	28,899 (8.2)	14,706 (15.0)	11,469 (6.51)	32,649 (10.68)
No. (%) ³ of medication orders received and reviewed	3,016 (.9)	3,724 (1.0)	4,552 (4.5)	4,222 (2.39)	2,586 (0.84)
No. (%) ³ of medications given	23,696 (7.6)	27,628 (8.0)	11,705 (11.7)	44,641 (25.34)	90,704 (29.69)
No. (%) ¹ of management of cases				67,632 (38.39)	85,192 (27.88)
No. (%) ³ other nursing activities	152,045 (50.0)	193,140 (55.1)	22,275 (22.0)	15,174 (8.61)	30,394 (9.94)
Clinical Care That Are Mandated To an RN's Intervention⁴					
No. (%) of blood glucose testing	3,451 (1.0)	9,650 (2.8)	5,164 (5.0)	15,446 (57.13)	20,652 (53.52)
No. (%) insulin management	1,818 (.5)	2,830 (.8)	1,321 (1.3)	4,984 (18.43)	8,028 (20.81)
No. (%) of oral suctioning	1,542 (.5)	687 (.2)	997 (1.0)	687 (2.54)	773 (2.0)
No. (%) of catheterizations	322 (.1)	738 (.2)	573 (.60)	1,115 (4.12)	1,905 (4.94)
No. (%) of gastric-tube feedings	1683 (.5)	2,574 (.7)	573 (1.20)	4,202 (15.54)	5,963 (15.45)
No. (%) nasogastric tube feedings	1 (0)	0	0 (0)	0	0
No. (%) intravenous (IV) therapy	4 (0)	0	1 (0)	0	0
No. (%) nebulizer treatments	370 (.1)	347 (.1)	200 (.20)	18 (0.06)	264 (0.68)
No. (%) ostomy care	280 (.1)	581 (.2)	601 (.60)	581 (2.14)	636 (1.65)
No. (%) oxygen administered	359 (.1)	261 (.1)	89 (.10)	1 (0.003)	263 (0.68)
No. (%) tracheostomy suctioning	0	558 (.2)	494 (.50)	0	0
No. (%) ventilator care	0	0	0 (0)	0	0
Other Mandated Activities					
<i>Screenings</i>					
No. (%) ³ vision screenings	9,050 (3.0)	7,583 (2.1)	3,762 (3.80)	7,883	7,811
No. (%) ⁵ of vision referrals from screenings	549 (6.1)	430 (5.6)	248 (.20)	451 (5.7)	610 (7.8)
No. (%) ³ of hearing screenings	8,783 (2.8)	7,338 (2.0)	3,734 (3.70)	5,200	7,738
No. (%) ⁵ of hearing referrals	77 (.9)	49 (.6)	28 (0)	312 (6)	51 (0.65)
No. (3) ³ of scoliosis screenings	3,308 (1.0)	3,284 (.9)	769 (.80)	2,613	4,162
No. () ⁵ scoliosis referrals	53 (1.6)	52 (1.5)	35 (0)	22 (0.84)	24 (0.57)
No. of 911 calls ²	72	67	36 (0)	11	47
COVID-19 positive cases				1,278	4,020
COVID-19 quarantines due to school contacts				3,590	1,010

¹ All major nursing activities that the school nurse engages in excluding 911 calls, treatments, screening/referrals for vision, hearing & scoliosis.

² Nursing Treatments

³ Percentage of referrals resulting from screenings, referrals are made for students only to parents for healthcare providers

It should be noted that all of these services continued despite staffing challenges due to absences, retirements, and an overall nursing shortage.

School Dental Program

The Stamford Dental Program provides a range of clinical and educational services. The proper metabolism of food begins with proper mastication, therefore, good oral health is a key component of good nutrition. Children with oral health problems learn less either because they are unable to focus in class or they simply miss more school. Thus, proper oral health is important for proper childhood development.

The dental hygienists provide oral health education in classrooms and conduct dental screenings for preschoolers, elementary, and middle school students. When an oral health issue is identified, the parents of students in whom oral health issues is identified are given referrals to community clinics, private dental providers, or the Stamford Department of Health Dental Clinics. Students sometimes require more than one visit to complete preventive and treatment services.

In 2002, the program initiated the dental sealant program that targets second graders. In 2016 the sealant program obtained a two-year grant from the Health Resources and Services Administration (HRSA) and the Connecticut Department of Public Health that allowed the expansion of the program to first, sixth, and seventh grades in qualified schools. These are schools in which 50% or more of the students are eligible for the free or reduced lunch program. The grant program was a part of the CDC Sealant Efficiency Assessment for Locals and States (SEALS) which is designed to capture, store, and analyze school sealant program data nationwide. Table 6 below details the five-year trends for the school dental program.

Table 6: Dental Services Five-Year Trends

	2017-2018	2018-2019	2019-20	2020-21	2021-22
Dental Hygienists ¹	4.4	4	4	3	3
Classroom Instruction	191	236	214	0	
No. of Elementary & Middle School Children Screened	8,701	8028	5557	0	3208
No. (%) of Elementary & Middle School Children Screened Requiring Dental Care	555 (6.4)	558 (6.9)	529 (9.5)	0	310 (9.6)
No. of Children Requiring Dental care who receive their Preventive care at the Department of Health’s Dental Clinics (#Patients/#Visits)	281/361	301/376	244/278	0	0
No. of Children Requiring Dental care who receive their treatments at the Department of Health’s Dental Clinics Treatment Services (#Patients/#Visits)	159/274	144/263	128/205	0	0
Sealants Grade 2	390	369	175	0	0
Sealants Grant Funded (Grades 1,6,7) ²	184	N/A	N/A	0	0

¹Three full time hygienists, one grant funded part-time hygienist and one case manager

²The grant has ended and there are no additional funds available to support this program

The dental program was suspended before the close of school on March 6, 2020 due to the COVID-19 pandemic and did not reopen for the 20-21 school year. Instead, the dental hygiene staff was redeployed for pandemic response. The School Dental Program reopened slowly in September 2021 minus the position of Dental Case Manager. The remaining dental hygienists conducted screenings until a sharp increase in Covid cases in the schools caused another temporary program suspension and redeployment of the dental team. Replacement of that position is key to successful implementation of the full dental program

Health Promotion

Health promotion efforts have been critical for responding to community needs during the past fiscal year, with existing and emerging health threats. Focuses for the past year have included coalition and partnership building and establishment of the Department as a trusted source for culturally competent and health literacy informed communication.

During the COVID pandemic, the Department maintained consistent communication with faith based organizations, community based organizations, congregate living shelters, and other key stakeholder groups. We provided flyers and other informational materials to these stakeholders to ensure dissemination of accurate health information. Department staff joined a variety of coalitions focused on different health topics. These relationships will prove valuable in addressing community health needs.

Health Education Workshops

A health education series began in Fall 2021 with the Ferguson Library Harry Bennett Branch. Presentation topics included healthy aging, diabetes, and breast cancer prevention; the series had limited attendance due to logistical challenges at the library and was cancelled.

Workshops on heart health and healthy aging were hosted at the Stamford Senior Center. Additional presentations on second COVID boosters and making resolutions were planned but cancelled due to weather constraints or limited attendance.

A Hurricane Preparedness 101 Webinar was hosted in June over Zoom. Remarks were given by Mayor Simmons, Director Jankowski, and Chief Roach; the presentation was given by CERT leader Jon Perelstein and moderated by Brittany Dube. 39 people attended the webinar.

In addition, staff were trained as trainers for QPR (suicide prevention gatekeeper training) and Mothers and Babies (postpartum depression prevention group). Plans are underway to establish these as departmental offerings to the community on a regular basis.

Social Media

Social media continued to be a key tool for health education of the community. Monthly social media calendars were developed to highlight monthly awareness events, as well as pertinent public health issues such as COVID, emergency preparedness, and mental health. Acquiring Hootsuite towards the end of the FY proved to be incredibly valuable and will provide the Department with the opportunity to engage much further with social media and track data monthly. Statistics for this fiscal year across all platforms are as follows:

Number of posts: 1,432
Total engagements: 77,543
Total impressions: 4,010,827
Total clicks: 16,042
Total Followers: 1,393

Community Health Needs Assessment

The Department worked in collaboration with Stamford Health on a Community Health Needs Assessment (CHNA). The CHNA is conducted every three years and serves as a systematic assessment of the health needs of the community. The top three needs identified this year were mental/behavioral health, access to primary care, and housing. Findings from the CHNA will be used to develop the Community Health Improvement Plan (CHIP). Both of these are critical for community health planning and accreditation purposes.

Health Education Resources

Throughout the year, health education materials were created and disseminated to ensure residents had culturally competent, plain language information. As often as was possible, information was translated into Spanish and Haitian Creole. Materials ranged from updating the website language for tick testing to informational flyers about the resources at the 137 Henry St. clinic to a brochure highlighting mental health resources in the city. Of particular note was the [mental health resources page](#) on the city website, to fill a gap identified by residents.

Flyers were printed and distributed by hand, as well as via email and on the Stamford Public Schools flyer distribution site, Peachjar. This allowed for thousands of people to view information about upcoming events, especially COVID vaccination sites. Data from Peachjar are shown below.

	# Flyers	Deliveries	Impressions	Views	Actions
English	28	194641	109995	5056	29
Spanish	22	146063	78543	939	8
English and Spanish	22	83180	54138	2768	4
Haitian Creole	4	144310	77295	1120	6
Total	76	568194	319971	9883	47

Flyers distributed on Peachjar, by language.

	# Flyers	Deliveries	Impressions	Views	Actions
COVID	72	485113	266052	6933	24
Flu	2	50976	32203	1151	4
Preparedness	2	32105	21716	1799	19
Total	76	568194	319971	9883	47

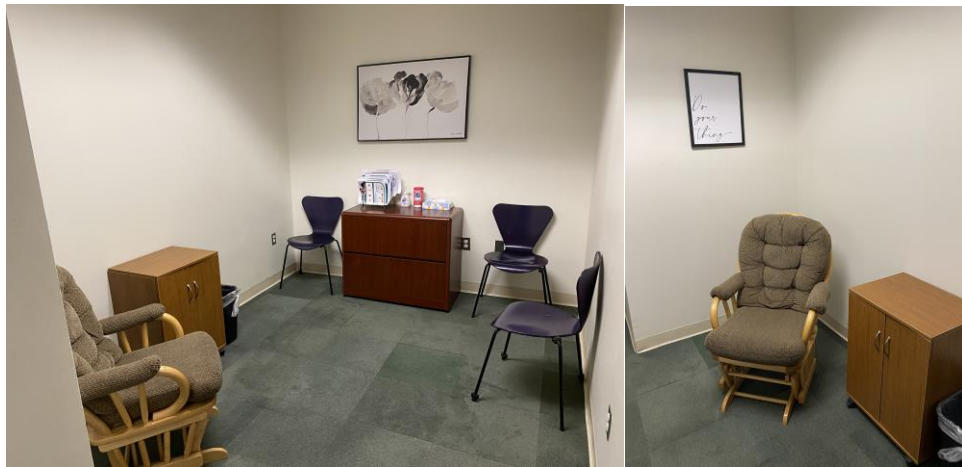
Flyers distributed on Peachjar, by topic.

Intern Curriculum

The Department hosted two health promotion interns during this FY, one finishing up her Bachelor’s degree and one completing her MPH. An intern curriculum was developed to ensure that interns were provided opportunities for personal and professional development, as well as working on meaningful projects for the Department. Continued engagement with local schools of public health will ensure that we are contributing to professional development within the public health workforce.

Establishment of lactation room

The Department worked in collaboration with Operations to update the building’s lactation room, located on the eighth floor. Department staff stocked the room with supplies and health literature, advocated for proper furniture for breastfeeding and pumping, and decorated the room to create a warm and welcoming environment.



Public Health Emergency Preparedness

Emergency Planning

Using funds from a grant obtained from the State of Connecticut Department of Public Health, the City has contracted with All Clear Emergency Management, Inc. to assist with review of its written Public Health Emergency Preparedness and Response (PHEPR) plans and its PHEPR activities. This fiscal year, they focused on updating the following plans: infectious disease,

continuity of operations, medical countermeasures, shelter, and surge management). The Department and All Clear attended regular virtual meetings for ESF8, Critical Workforce Planning Group, and Cities Readiness Initiative.

This fiscal year, the Department's "3-DEEP List" was expanded to include two Acting Directors of Health, Ebrima Jobe and Brittany Dube. This list enables the city to respond in an emergency; if the Director of Health is not able to be contacted, the second Acting Director is notified, and then further down the list if needed. Maintaining this 3-DEEP list of multiple individuals who can serve as Acting Director is critical for the Department's emergency preparedness. The Emergency Response Specialist also attended the FEMA Emergency Management Basic Academy to learn about ICS structure, emergency planning, emergency management, and community resiliency.

At the beginning of the fiscal year, CERT volunteers were recruited to assist with organizing the two emergency trailers, mass feeding and sheltering. These trailers, held at Magee Ave by the fire station, can be used in the event of an emergency event, and their inventory hadn't been checked in years. In addition, inspectors' emergency supplies were documented, and gaps filled where they could be. Our inspectors are often those staffing shelters, so it's critical to ensure they have the forms, gear, etc. that they need.

In response to multiple suicides in a nearby town, a critical need for a suicide postvention plan was identified. Postvention refers to an organized way of responding after an incident, and can reduce the chance of suicide contagion in the community, thus also serving a prevention function. Department leadership worked in conjunction with the Director of Social Services to convene a group of community organizations and city departments. This group worked to develop a postvention plan and resources for responding in the case of suicide or untimely death in the community.

Emergency Response

On July 13, 2021, department leadership attended a hurricane preparedness tabletop exercise to communicate about plans in preparation for hurricane season. The exercise pulled together leadership from across the city's departments.

In Fall 2021, Department staff activated shelters for two hurricanes, Henri and Ida. The shelter for Henri was open from 6 am to 6 pm on August 22. Three clients were served, including two homeless residents and one elderly homeowner. The shelter for Ida was opened spontaneously at 2 am on September 2 as urban flooding affected the city. Through the eight hours it was open, the shelter served four clients and one cat.

On April 29, 2022, Department leadership attended a regional Anthrax Tabletop exercise at Sacred Heart University, along with members of Stamford Police Department Bomb Squad and a representative from Stamford Health. We were joined by staff from health departments across the region; the purpose of the exercise was to test and strengthen our regional preparedness to respond to a potential anthrax threat in the community. A regional improvement plan was developed, including relationship building between stakeholders, developing plans with CTDPH

for procedures and communications, and update inventory/capacity lists to better document regional capacity.

On May 24, 2022, Department and City leadership participated in the Annual Statewide Emergency Preparedness Planning Initiative (EPPI) exercise. The focus this year was hurricane preparedness.

Medical Reserve Corps (MRC)

Volunteers continued to be recruited to support the pandemic response efforts and other Departmental priorities, and 11 new members were sworn in during this fiscal year.

A survey of twenty active members in April 2022 showed that volunteers represented all neighborhoods in Stamford, as well as some who lived out of town. 75% of respondents identified as white, with two identifying as Black or African American and three identifying as Asian. A continued focus of recruitment is to diversify the volunteer pool to better represent the communities we serve.

MRC volunteers were activated to attend trainings, support mask distribution, support shelter operations, vaccinate residents for COVID-19, assist with contact tracing, translate preparedness messages, and more. Thirty-eight volunteers worked a total of 491 hours throughout the fiscal year.

A monthly training program was developed and began in January 2022. Topics for this fiscal year included personal preparedness, public health preparedness, ICS structure, and emergency communication.

At the end of the fiscal year, the Department was awarded \$50,000 from the National Association of City and County Health Officials (NACCHO) for the MRC program. Work under this grant will commence under FY 2022-2023.

Other Activities

The Director of Health reviewed and approved 11 noise waiver applications and also reviewed death certificates to provide funeral directors with 10 non-contagion letters that allowed the removal of bodies for burial outside of the country.

Department of Health COVID-19 Pandemic Response

PPE

The Department distributed PPE to community organizations, city departments, and residents in vulnerable groups throughout the course of the FY. A total of 3,256 home testing kits, 5,578 N95s, and 4,735 surgical masks were distributed through various channels.

Public Health Education and Outreach

The Department contracted with Conceptual Communications, a marketing and public relations firm, to develop a consistent, friendly health promotion campaign focused on vaccine, testing, and mitigation strategies. The group developed a variety of campaign assets in English, Spanish and Haitian Creole for the Department, including monthly social media posts, advertising campaigns, videos, print and television ads, podcasts, webinars, op eds, and a multitude of flyers. The campaign, focused on the statement, “It’s ok to ask questions,” featured Stamford residents and community leaders. A non-judgmental, informed tone was used throughout to ensure that residents felt that they could trust our information without feeling alienated.

We also developed a successful barbershop campaign called *Cut Out Covid*. Barbershops and salons promoted vaccines and offered vaccinations on site. Participating shops were honored by the Mayor.

Both paid and organic social media efforts were utilized to promote the campaign and reach target audiences and neighborhoods. Across Facebook, Twitter, and Instagram combined, analytics were as follows:

Impressions: 4,011,556

Engagements: 77,589

Posts: 1,352

Click to Web for more info: 16,053

641% Increase in Followers in FY 2022 (started at 188 ended at 1,393)

Two series of PSA-style videos were created in English and Spanish and premiered on Comcast for local customers. The PSAs garnered a total of 433,245 completed views from August through December 2021. The videos featuring local residents and healthcare providers, focused on answering common questions around the COVID-19 vaccine.

Conceptual Communications also developed two podcast series, one focused on lessons learned during the pandemic, and another featuring local pediatricians promoting the COVID-19 vaccine for kids 0-4. The first series garnered 77,051 listens and reached 76,388 residents. It also drove 1,276 clicks to our website. The second series reached 19,503 residents, 12,154 of whom watched the videos in Spanish. There was a total of 105,324 listens, of which 91,670 listens were to the Spanish podcasts. This set drove 6,001 clicks to web, of which 4,163 were unique.

A large number of flyers were created and distributed throughout the FY. Teams from Family Centers, Southwest Area Health Education Center, and outreach workers from the Department helped to distribute over 15,000 English, Spanish, Haitian Creole, and Polish flyers across the city. They were also sent via email to community partners, including faith organizations, community organizations, daycare and childcare centers, and more. Flyers were also distributed through the Peachjar system – data are shown below. QR codes were included on the flyers, so that residents could easily connect to the city vaccine website.

	# Flyers	Deliveries	Impressions	Views	Actions
English	27	194641	109995	5056	29
Spanish	22	146063	107277	1767	7
Haitian Creole	22	144310	96919	3991	6
English and Spanish	1	83180	54138	2768	4
Total	72	568194	368329	13582	46

COVID flyers distributed on Peach

Environmental Health and Inspections Division

As Inspectors resumed regular inspections and response to complaints, they also responded to pandemic needs by providing onsite management of vaccination clinics in the evenings and weekends.

Laboratory Division

The Laboratory Director support pandemic response by receiving and maintaining PPE and Test Kit supplies and assisting in distribution.

Beginning in December 2020 the Laboratory assisted in conducting COVID vaccination clinics for first responders, city employees and the general public. The Laboratory was responsible for maintaining the cold chain of the COVID vaccine which included accepting delivery to storage and ultimately administration. A total of 5,811 COVID vaccine doses were administered between July 2021 to June 2022.

Nursing and Dental Services

From July 2021 to June 2022 the school nurses and dental hygienists continued to provide pandemic response in addition to regular school nursing and dental duties. Many hours were spent in consultation with the Stamford Board of Education regarding the safe return to school, contact tracing and vaccine clinic support. School nurses provided vaccines to the homebound through the homebound program

Case Investigation and Contact Tracing

Case investigation and contact tracing are key strategies to stop the spread of infectious diseases

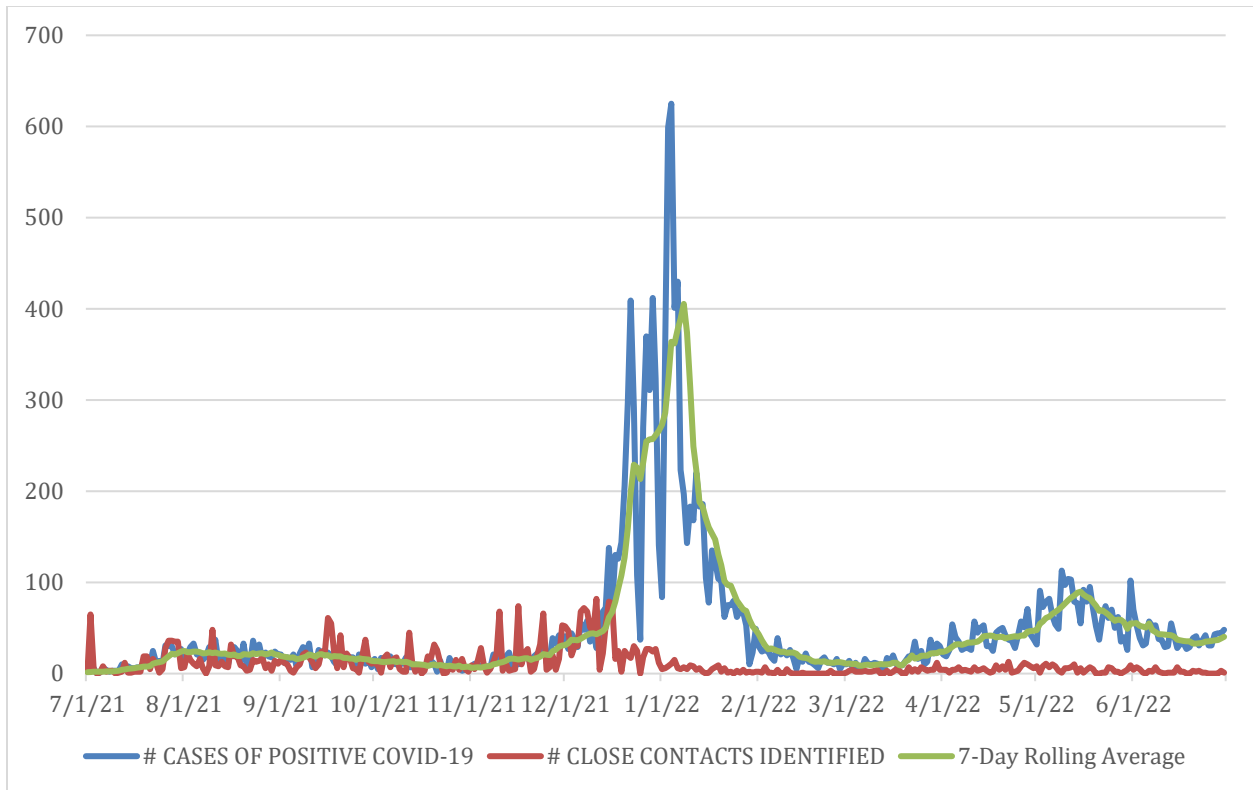
In June 2020, CTDPH implemented a contact tracing program (ContaCT), which was administered by Community Nursing until October 2020. Seasonal contact tracers were hired in November 2020 to take on most of the general contact tracing and assist with contact tracing in the schools. At the start of the fiscal year, Stamford's contact tracing team consisted entirely of seasonal employees, under the Nursing and Dental Services Division. COVID cases were called to provide guidance on isolation and identify contacts for quarantine. Contacts were also notified and provided quarantine guidance. Contacts were provided information regarding testing and encouraged contacts to follow CDC guidance for testing following an exposure by referring them to State supported test sites. Information was also provided on vaccination access in the City. This included general Stamford residents, City employees, school and daycare, and sports related cases and contacts, as well as providing guidance and support to nursing homes and assisted living facilities. When school resumed without the full reopening of the dental program, the dental hygiene staff effectively contributed to the contact tracing program until the resumption of their program in the spring of 2022.

As the pandemic developed, the team's mission evolved toward primarily providing information regarding current local, state, and Federal guidance, along with information about available resources to assist cases and contacts. School-related contact tracing was discontinued in March 2022, though the team continued to work with schools for case notifications and responses.

The start of the fiscal year coincided with the rise of the Delta variant. Case numbers, as reported to the electronic contact tracing system (ContaCT), rose from a 7-day rolling average of around 1 case/day in July 2021 up to a peak 7-day rolling average of 25 cases per day by early August 2020, before gradually declining until the Omicron variant took over later that year. After falling to a low of 6 in early November, the 7-day rolling average peaked in the early days of 2022 at 405 cases/day, before falling quickly until March 2022, and then building to a smaller peak in May 2022.

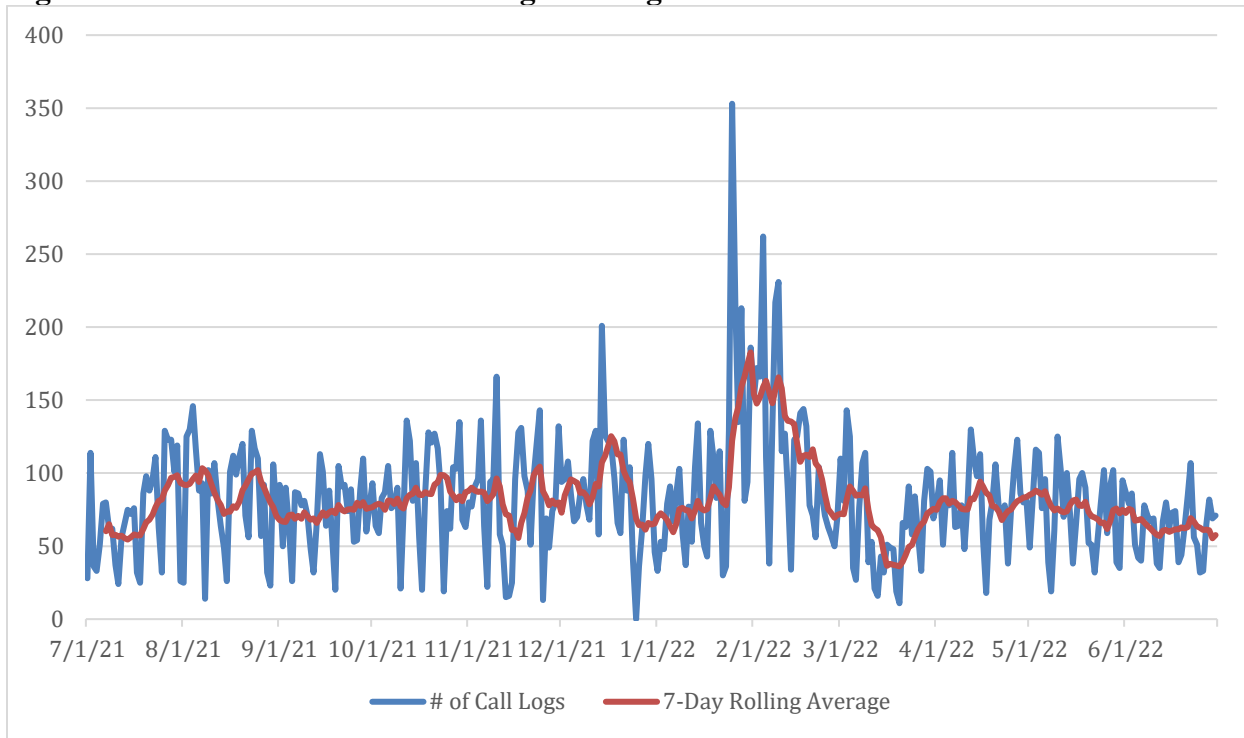
While changes in the availability of home COVID-19 testing made case numbers less reliable, from 7/1/2021 to 6/30/2022, there were 17,585 identified cases in Stamford. Even with MRC support, there were too many cases during the December/January and May peaks for the team to call every case. Call priority was given to cases 50 years of age and older, followed by cases under age 19. From the cases reached, 3,886 close contacts were identified during the fiscal year and were given the option to be monitored by text message, email, or phone call.

Figure 15. COVID-19 Cases and Contacts.



The CTDPH used the standard that 90%+ of cases and close contacts should receive a call within 48 hours of the local health department receiving notice and expected 50%+ to be reached (call answered by case/contact) within those same 48 hours. From 7/1/2021 through 6/30/2022, there were 29,889 official call logs by the Stamford case investigation and contact tracing team. Of those calls, 16,070 resulted in speaking with the case, contact, or a relative. The 7-day rolling average of call logs per day peaked in late-January 2022 at 183 calls averaged during the 7 days from 1/25/2022-1/31/2022.

Figure 16. COVID-19 Contact Tracing Call Logs



Community Health Workers/Community Resource Coordinators

CTDPH implemented a Community Resource Coordinator (CRC) program to assist in resource delivery to cases and contacts who were isolating or quarantining due to COVID-19. The CHWs/CRCs assisted with a variety of needs including; personal protective equipment, cleaning supplies, thermometers, housing assistance, food support, and non-COVID health care concerns. CHW/CRC referrals totaled 359 from 7/1/2021 through the end of the program in March of 2022.

Vaccine Distribution

The Stamford Department of Health has continued to collaborate with area agencies to provide access to the COVID vaccinations. Due to significant grant funding, the Department was able to collaborate with community agencies to provide a targeted approach to ensuring vaccine equity among our residents. Pop up clinics in sites throughout the City ensured access to vaccines for all. Outreach worker from Family Centers canvassed door to door to link residents to vaccine sites in their neighborhoods. The Department was able to achieve an 83% or higher Covid vaccination rate in all census tracts within the City.

One thousand eight hundred fifty two (1,852) vaccination clinics were held throughout Stamford by Griffin Hospital/State Department of Public Health, Community Health Center, and the Stamford Department of Health/ Nursing Division, for a total of 41,472 vaccinations.

Table 9. COVID-19 Vaccination Clinic Locations

Bethel AME	Rippowam High School
Chelsea Piers	Robinson Park
Cove Park	Scalzi Park
Cummings Park	St. Benedict Church
Building One Community	St. Mary's Church
Day Laborers location under the bridge	Stamford Barbershop
Domus	Stamford Government Center
Hunt Park	Stamford Green Apartments
Inspirica	Stamford Henry Street Clinic
King School	Stamford High School
Lathon Wider Center	Stamford Senior Center
Leoni Park	Stamford Train Station
Master Barbershop	West Beach
Men's Shelter / Pacific House	Westover School
Mill River Park	Women's Shelter
Murphy School	Yerwood Center
	YMCA

Homebound COVID Vaccination Program

Stamford Department of Health, Nursing Division has provided COVID vaccinations to Stamford Residents that were unable to leave their homes. Stamford Department of Health Nursing staff gave 462 vaccinations to people living in Stamford in FY21-22.

The homebound program funding provided by ELC 1 grant and will continue under the ELC 2 grant. School nursing staff is utilized to support the program after the completion of their regular workday.

Conclusion

Despite the need to develop and maintain Covid-19 pandemic response, receiving and providing mitigation strategy guidance, and testing and vaccine support, attention was given to the regular functions of the Department as well as creating and implementing new programs to promote health and wellness within our community. Much time has been spent developing community relationships, improving health literacy and reducing health inequities.

Prepared October 2022 by:

Jody Bishop-Pullan, RDH, BS, MPH, Director of Health

Raquelle Early, Administrative Supervisor-Health

James Federici, MS, Director of Laboratory

Ebrima Jobe, MPH Director of Environmental Health and Inspections

Moira Bryson, RN, School Nurse Supervisor

Monselue Perez, DHA, MSN, BSN, RN Public Health Nursing Supervisor

Brittany Dube, MPH, CHES Behavioral Health, Health Promotion, & Emergency Response Specialist

Deidre Anspach, RN, BSN, MPA, COVID-19 Project Manager

Christopher Fountain, COVID-19 Contact Tracing Supervisor