STAMFORD DEPARTMENT OF HEALTH

City Annual Report July 1, 2016 to June 30, 2017



The Department of Health works to improve the health and safety of those who live and work in Stamford by applying the basic principles of health promotion and disease prevention through the programs that comprise the department: Environmental Health Inspections, HIV Prevention, Laboratory, Nursing and Dental Health, Public Health Education, Public Health Emergency Preparedness and Women, Infants, and Children (WIC) services.

Environmental Health Inspection

There were 5075 inspections related to housing, lead, mold, asthma, air pollution, food, day care, bedbugs, pools, weights and measures, rodent, septic, permits, stagnant water, water pollution, noise and general complaints.

Summary of Activities for FY 2016-2017

There were 1,179 annual inspections conducted on assisted living, barber/salon, daycares, garbage trucks, hotels massage, public beaches, rooming houses, schools, septic trucks, and weights and measures.

There were 880 complaints related to housing, lead, mold, asthma, air pollution, food, day care, bedbugs, pools, weights and measures, rodent, septic, permits, stagnant water, water pollution, noise and general complaints.

There were 70 permits issued on subsurface sewage regarding new systems, additions, repairs subdivision reserves and code complying areas.

One hundred thirty five orders were issued to abate violations of code ordinances and 53 orders were sent to vacate illegal residential units for a grand total of 188 order.

There were 792 certificate of apartment occupancy inspections conducted on structures that contain four (4) units or more and are at least 15 years or older.

Table 1 below details the restaurant inspections. There were 1,966 total food inspections conducted of these 1,643 were routine inspections representing a three percent increase towards meeting the number of state mandated inspections.

Table 1. Restaurant Inspections

			2015-2016			2016-2017		
$Class^1$	Total # of establishments in Stamford	Inspection ² Bench Mark	Total # routine inspections completed	% of routine inspections completed	Total # of ³ all inspections	Total # of routine inspections completed	Total % of all routine inspections completed	Total # of ³ all inspections
I	20	20	13	65%	14	13	65%	13
II	77	154	76	49%	80	79	51%	87
III	265	795	400	50%	464	456	57%	491
IV	251	1004	761	75%	948	876	87%	1137
Retail	142	284	243	85%	316	188	66%	204
Temporary Events	194	N/A	69	36%	80	31	39%	34
Total	949	2257	1562	69%	1902	1643	72%	1966

¹Class I establishment: commercially prepackaged foods and/or hot or cold beverages only; Class II establishment: using cold or ready to eat commercially processed food requiring no further heat treatment and/or hot or cold beverages; Class III establishment: having on the premises exposed potentially hazardous foods that are prepared by hot processes and consumed by the public within four (4) hours of preparation; Class IV establishment: having on the premises exposed potentially hazardous foods that are prepared by hot processes and held for more than four (4) hours prior to consumption by the public; Retail food store: store or section of store where food is sold and intended to be eaten off premises; Temporary events: food service establishment operating up to 14 days.

²State inspections bench mark

³Total of all inspections including re-inspections

Table 2 details the five year trend of environmental inspections. There was 1 16% increase annual inspections as a result of the internal reorganization of the mandated inspectional programs by providing team leadership oversight. There was a 2.2% increase in the number of complaints investigated. This is a result of increasing the Division's staff education related to the mandated inspectional programs over which the Division has a responsibility and enforcement powers. There was an 84.6% decrease in the number of septic permits issued in fiscal year 2016-2017 compared to fiscal year 2016-2017. The huge reduction in permits issued from the previous years was due to eliminating un-necessary permits and to standardize department usage following the State Department of Public Health template form. Food service inspections demonstrated an annual increase each of the five years as we have focused our efforts on meeting the mandated inspection bench mark established by the State Department of Public Health. Also, a core group of inspectors have been established to have oversight and perform the majority of the food inspections. There was a 28.9% decrease in housing violation notices compared to fiscal year 2016-2016. This decrease in orders is due to the Division's in community outreach efforts and collaborative efforts with other city departments to educate the community of proper housing codes to ensure a safe living environment. A certificate of apartment occupancy (CAO) inspection relies on an owner calling to indicate their dwelling has been vacated, has been repaired/renovated, and ready for an inspection before the new tenant takes occupancy. As such, this type of inspection is based on the owner's knowledge of the regulation and thus only a marginal increase of 3.4% compared to fiscal year 2015-2016 is seen.

Table 2. Environmental Inspections Five-Year Trends

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Туре	FY	FY	FY	FY	FY			
	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017			
¹ Annual Inspections	1053	1102	1205	1012	1179			
² Complaint	842	1131	903	861	880			
Investigations								
³ Septic Permits Issued	428	461	451	454	70			
⁴ Food Service	1468	1156	1694	1902	1966			
Establishment Inspected								
⁵ Housing Violation	491	309	287	264	188			
Orders Issued								
⁶ Certificate of	704	651	900	766	792			
Apartment Occupancy								
Inspected								
Total	4986	5210	5440	5259	5075			

¹ Annual Inspections are conducted on Assisting living, Barber Shops, Day Care, Garbage Trucks, Hotels, Public Beaches, Rooming Houses and Schools.

² Complaint investigations are conducted throughout the year on 30 different categories that include Air pollution, Bed Bugs, Housing, Garbage, Lead and No Heat.

³Septic permits are issued on subsurface sewage regarding new systems, additions, repairs, subdivision reserves and code complying areas.

⁴Food inspections are conducted throughout the year on class I, II, III, IV this also includes retail establishments and temporary events.

⁵Housing notices/orders are issued to owners/tenants that are in violation of the Connecticut Public Health Code, General Statutes of the State of Connecticut and Stamford City Code of Ordinances.

⁶ Certificate of Apartment Occupancy (CAO) are inspections on structures that contain 4 units or more and are at least 15 years or older.

HIV Prevention

In fiscal year 2016-2017, the HIV Program provided 483 free HIV tests and conducted 5,173 HIV outreach contacts. The program also launched the new Department of Public Health's expanded program; Drug User Health Services which combines HIV Testing, testing for sexually transmitted disease (STDs), Hepatitis C Testing, syringe exchange, overdose prevention by distribution Narcan, and distribution of educational material and condoms. The program conducted its activities via its mobile van activities throughout the city and through partnerships with community members such as; Liberation Programs, Inspirica Programs, Shelter for the Homeless, New Covenant House Soup Kitchen, TB Clinic, Cornerstone Pharmacy, Domestic Violence Shelter, Neighbor's Link Stamford, AmeriCares, Durango Insurance, Community Barbershops, CT Transit, Under the Bridge, Faith Tabernacle Church Food Pantry, UCONN, FIRP, and CT Renaissance. The program was closed on June 30, 2017 with services being transferred to Stamford CARES.

Laboratory Division

The Stamford Health Department Laboratory provides supportive lab services to the function of the health department along with direct public accessibility to its analytical services and public health information to the citizens of Stamford.

Summary of Activities Fiscal Year 2016-2017

Figure 1 shows the 5 year trend of tick submissions and the percent that tested positive for Lyme Disease. This past year, 249 ticks were submitted for Lyme disease testing with 33% of those submitted testing positive. The rate of Lyme disease positivity in Stamford was similar to the overall rate in the state of Connecticut and this has been the trend over the past 5 years.

Figure 1. Tick Testing Results

I. scapularis Testing Results 2013-2017 for Stamford, Connecticut Percent Positive for Lyme Disease

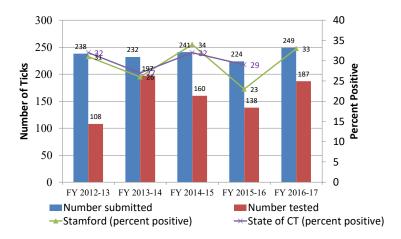
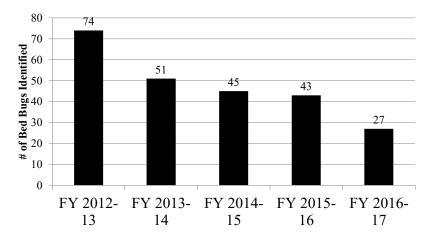


Figure 2 below shows the number of bedbugs submitted over the past 5 years. The 5 year trend has shown a decrease and last year there were 27 submissions for bedbug identification. Once identified as bedbugs, Environmental Health Inspectors will perform a home inspection on rental properties and issue orders to the landlords for extermination.

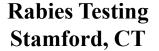
Figure 2. Bed Bug Identification

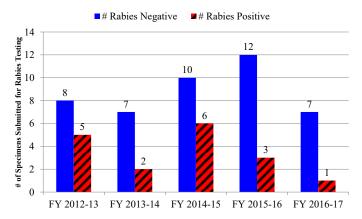
Bed Bug Identification Stamford, CT



The laboratory, along with Animal Control, insures that animals that need rabies testing are transported to the state for testing. Figure 3 below shows the 5 year trend in samples submitted for testing and the percent that tested positive for rabies. This past year 8 submissions were made to the State Public Health Laboratory with 1 (bat) testing positive for rabies. The Laboratory follows up with residents who have been exposed to an animal that tests positive for rabies to advise them to seek medical attention.

Figure 3. Rabies Testing

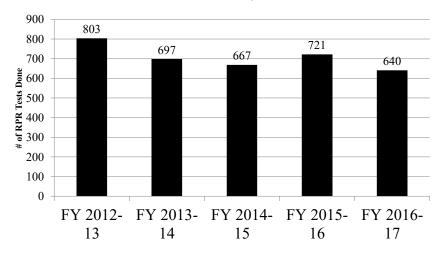




A laboratory technician is present at the sexually transmitted disease (STD) clinic to set up wet preps, gram stains and to do RPR (rapid plasma regain) testing (for syphilis). Figure 4 shows the number of RPR tests performed over a 5 year period. Last year 640 RPR tests were performed.

Figure 4. STD Clinic

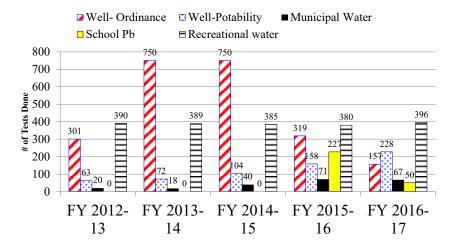
STD Clinic Testing Stamford, CT



The laboratory tests municipal water (for lead, copper), well water and recreational water. Figure 5 shows the 5 year trend for this testing. Last year 157 ordinance well water samples were collected between July 2015 and June 2016. The number of potability samples tested since 2012 has increased every year with FY 2016-17 being the highest number of samples tested for the 5 year period. In 2015, the laboratory tested all Stamford schools for lead levels in drinking water.

Figure 5. Water Testing

Water Testing Stamford, CT



Public Health Nursing and Dental Hygiene Services

Public Health continues to lead the way in building healthy communities, achieving health equity and improving the quality of life for all in the community. This is accomplished through our programs in public health nursing, school health nursing, and school dental health.

Breath of Fresh Air

The Breath of Fresh Air Program (Asthma Program) is a free program to parents of asthmatic children that through education and the provision of home cleaning products and dust prevention tools aims to reduce asthmatic attacks. In fiscal year 2016-2017 the program saw two (2) new clients and made 4 home visits. Table 3 below shows a decrease in activity which is due to a dramatic decrease in funding resulting in of this program has an effect on the number of visits in recent years.

Table 3. Breathe of Fresh Air Program

	2013-2014	2014-2015	2015-2016	2016-2017
New Clients	17	14	4	2
No. of Visits	59	11	4	4

Immunization Action Program

The Immunization Action Program (IAP). The fiscal year for this program is from January to December. The goals of IAP are to educate and inform the community about immunizing their children, the importance of timely vaccines, and to ensure that all pediatric vaccines are reported to the Connecticut Immunization Registry and Tracking System (CIRTS). To accomplish these goals, the IAP Coordinator works closely with physicians' offices as well as with the local birthing centers to ensure that children are enrolled in CIRTS, their vaccines are given on schedule and reported to CIRTS.

The IAP program has had several significant changes this past year. One was the change in their data year from January to December to January to March, with the plan to change to June 30, 2107. In addition there was a change in personnel both at the State and local. The program also received additional help in their outreach efforts during the month of June, July and August from the State's IAP program, an intern from the Mayor's Youth Program, and outreach worker in the City's Health Department. These additional support efforts are expected to help the program to improve.

Cocoon Program

The Cocoon Program provides free tetanus diphtheria and acellular pertussis (TDAP) vaccine to parents, grandparents, and caregivers of unvaccinated infants with the goal of providing protection against pertussis infection that is 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. Table 4 shows that there has been as decrease in Cocoon program related vaccinations. This decrease can be attributed to several reasons such as; many sites that have pharmacy services give this vaccine, those with insurance are getting it from providers and the hours of operation of the Henry Street Clinic. The hours at the Henry Street Clinic will be increased as of October 2017. The expectation is that with these increase in hours of service that there may be an increase the number of vaccines given.

Table 4. Cocoon Program Four-Year Trends

TDAP ¹	2013-2014	2014-2015	2015-2016	2016-2017
No of vaccines given	161	121	114	38
% Change	-3.0	-24.8	-57.8	-66.7

¹tetanus, diphtheria and acellular pertussis

Influenza Prevention Program

The City of Stamford's Health Department influenza vaccine is available to all eligible people's ages three (3) years or older. The 2016-2017 Influenza "kick-off" campaign was held at the Stamford Government Center on September 28, 2016. A multipronged approach was used to increase vaccine uptake among employees, the eligible public and the various City of Stamford board members. These interventions occurred during the months of October and November and included; a weekly push cart at the Stamford Government Center for City and Board of Education (BOE) employees, two vaccine clinics at 137 Henry Street, vaccination of BOE staff at every public school, the Cigna sponsored employee health fair on October 28th and before a meeting of each of the boards of Finance, Representatives, and Education.

Sexually Transmitted Disease Program

The Stamford Health Department's STD Clinic is held every Monday, Wednesday, and Friday, providing eight (8) clinic hours, free of charge, to anyone over the age of 13. It provides comprehensive diagnostics, treatment, and counseling for the most common STDs including syphilis, *Chlamydia* spp., *Trichomonas* spp. Herpes viruses, and HIV. Table 5 below details the activities

Table 5. Sexually transmitted Disease Clinic Four-Year Trends

	2013-2014	2014-2015	2015-2016	2016-2017
No. of initial Visits	634	635	324	450
No. of follow up visits	138	131	126	124
No. of syphilis tests done	560	627	534	467
No. of positive syphilis tests	6	9	13	36
No of positive syphilis treated in				
the clinic	2	7	13	36
No. of HIV tests done	576	550	500	373
No of pregnancy tests done	36	26	6	8
No. of positive pregnancy tests				
referred	9	8	0	4
No. o vaccines given	247	247	199	114
No. of Hepatitis A/Hepatitis B				
Given	136	128	28	28

Travel Clinic

The Travel Clinic provides vaccines to international travelers and educates travelers about safe travel habits, related food and water, and mosquitoes. The Stamford Travel Clinic is weekly on Wednesday and Friday from 9am to 10am by appointment. Currently, the Stamford Health Department travel clinic is the least costly in the Stamford area. Table 6 indicates the four-trends in the clinic

Table 6. Travel Clinic Four-Year Trends

	2013-2014	2014 - 2015	2015-2016	2016-2017
Clients Served	410	317	246	294
Vaccines Given	591	422	348	460
Prescriptions Written	74	63	25	34
Revenue	\$38,135.00	\$31,993.00	\$25,535.00	\$31,535.00

Tuberculosis (TB) Program

The Stamford Health Department has a primary responsibility for preventing and controlling TB. To meet this challenge successfully, the TB control program administers 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 the disease
- Identifying and managing persons infected with TB
- Providing laboratory and diagnostic services
- Collect and analyzing data
- Providing training and education to staff, clients and providers

The Stamford Health Department TB Clinic is held for children the first and third Wednesday of every month and adult clinic is located at OPTIMUS clinic, the second and fourth Friday of every month.

The Henry Street Clinic will be increasing the clinic hours to better accommodate the families in need of tuberculosis services. These hours are scheduled to change on October 1, 2017. In addition more home visits will be scheduled to serve these families when possible.

Table 7. Tuberculosis Four-Year Trends

	2013-2014	2014-2015	2015-2016	2016-2017
No. New tuberculosis cases	4	10	7	5
No. adult cases	4	7	6	4
Direct observation therapy	361	509	1040	947
12 dose treatment for latent				
tuberculosis infection	1	2	3	0
No. tuberculosis skin tests				
and blood tests completed	64	32	140	208
No. of positive tests	9(14%)	13 (40%)	5 (3.5%)	13 (6%)

Stamford Well Child Clinic

The Stamford Well Child Clinic provides the under- or un- insured children with physicals, vaccinations, screenings, and, if necessary, referrals. Children are referred to the clinic by medical providers, school nurses, the Stamford Hospital, and other sources.

The clinic visits are opportunities for the nurses and the medical provider to evaluate the medical, social, or psychological problems and refer to outside agencies as needed. They provide a time to educate

families about child development, nutrition, sleep, safety, diseases, other health topics, and available community resources. Table 8 details the four year trends

Table 8. Stamford Well Child Clinic Four-Year Trends

	2013-2014	2014-2015	2015-2016	2016-2017
No. of children seen	415	479	332	358
No of vaccines given	1519	1734	788	959
No of screenings ¹	815	1217	705	739
No of referrals ²	185	103	98	99

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

School Statistics School

The School Nurse Assessment Program (SNAP) continues to improve the accuracy of data collections for the public schools. The private school nurses will be getting computers for use at their multiple work locations. One goal is to improve data collection, communications and information dissemination. Table 9 below details the four year school nursing statistics.

²Referrals are to other providers they 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, the City of Stamford Health Department Breath of Fresh Air program.

Table 9. School Statistics Four-Year Trends

	2013-2014	2014-2015	2015-2016	2016-2017
No. of public schools buildings	21	21	22	22
No. of private/parochial School				
buildings	19	19	19	19
Sick visits	70283	60672	64054	62634
Injury visits	49395	32899	30711	32226
911 calls	286	65	54	64
No of medication orders	2090	4168	4557	4309
No of medications Given	20591	16064	16661	15728
Skilled nursing interventions	11251	10857	14040	9524
No of vision screenings	6529	9278	8220	7780
No. of vision Referrals	303	424	495	465
No of hearing screenings	6355	11191	8371	7137
No. of hearing referrals	44	84	68	55
No. of scoliosis screenings	1765	4853	3828	3168
No. of scoliosis referrals	122	37	20	24

School Dental Program

The Stamford Dental Program provides a range of clinical dental and educational services. Oral education was provided in 210 classrooms, 269 preschool children were screened, and 8,617 dental screenings were provided for elementary and middle school students. Among elementary and middle school students, seven percent (7%) required referral for dental care. Students are referred to community clinics, private dental providers, Westhill Dental Clinic or the Stamford Department of Health Dental Clinics. Students may require more than one visit to complete preventive and treatment services. In fiscal year 2016-2017, 305 students received preventive dental hygiene services in 401 visits and nine (9) were referred for oral surgery and other more complicated dental services. While the services provided have remained relatively constant, the number of students and visits for treatments has been increasing due the high dental need among the uninsured and underinsured population, focused case management that the program provides resulting in a low appointment no show rate.

The dental sealant program targeted at second graders provided sealants to 424 children was supplemented with grant funding from the Health Resources and Services Administration (HRSA) and the Connecticut Department of Public Health (CTDPH) that allowed 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. This grant-funded program provided for an additional 173 students receiving sealant for a total of 597. Table 10 below, details the five-year trends for the program

Table 10: Dental Services Five-Year Trends

	2016-2017	2015-2016	2014-2015	2013-2014	2012- 2013
Dental Hygienists ¹	4	4	4	4	4
Classroom Instruction	210	241	305	224	165
No. of Elementary/Middle	8617	8235	8427	8373	8251
School Children Screened					
No. (%) of	602 (7)	657 (8)	700 (8)	609 (7)	705 (9)
Elementary/Middle School					
Children Screened Requiring					
Dental Care					
No. of Children Requiring	305/401	377/426	394/473	340/446	356/420
Dental care who receive their					
Preventive care at the					
Department of Health's					
Dental Clinics					
(#Patients/#Visits)	101/205	107/224	120/222	1.41/000	100/105
No. of Children Requiring	191/305	187/324	138/222	141/239	123/187
Dental care who receive their					
treatments at the Department					
of Health's Dental Clinics					
Treatment Services					
(#Patients/#Visits)	424	462	200	422	400
Sealants Grade 2	424	462	390	422	408
Sealants Grant Funded	173	0	0	0	0
(Grades 1,6,7)					

¹ Three hygienists and one case manager

Public Health Education

Health education activities centered around a series of health awareness days to promote wellness, disease prevention, and screenings while highlighting the programs and services available through the Department. These included Healthy Heart Day, the Strollin Colon, Melanoma Monday, and Senior Wellness Day. To reach a broader audience the Department collaborated with local health providers and not-for-profits. The Department also continues to partner with Stamford Hospital and the American Cancer Society as part of the Stamford Cancer Awareness Campaign. Areas of focus include lung, colon, breast, and skin cancer prevention. Collaborative relationships with groups including Stamford Children's Health Collaborative, Vita Health & Wellness district, Stamford Senior Center, School Based Health Centers, and Communities for Action benefit residents by ensuring consistent health promotion messaging, reducing duplication of efforts, and allowing the Department to tap into available community resources.

Public Health Emergency Preparedness

The Department participates in activities that establish a state of readiness to respond to events before, during, and after an emergency or disaster that could affect the community at large. Emergency preparedness involves mitigating, preparing, responding, and recovering from emergencies and disasters to lessen the impact. The City establishes an all-hazards approach to build community resiliency. The Public Health Emergency Preparedness program participates in the Regional Emergency Support Function (ESF) #8 – Public Health and Medical Services group to ensure that there is a coordinated response to a public health and medical disaster within the City and region.

Women Infants and Children (WIC) Program

The federally funded WIC program serves low-income pregnant, postpartum and breastfeeding women, and infants and children up to age five (5) years of age who are at nutritional risk. WIC provides nutritious food supplementation containing those essential nutrients often lacking in the diets of populations at nutritional risk, breastfeeding promotion, infant formula and nutrition education. Through close ties with other community and departmental services, the WIC Program is able to assist participants in attaining other health and social services. **Table 11** below consists of a summary of participation across the regional agency (Stamford and Norwalk WIC services) and statewide composite participation. For the Farmer's Market season 2017, 2565 eligible Farmer's Market Nutrition Program coupon booklets will be issued to eligible WIC participants receiving services at the City of Stamford. As can be seen in table 11, there is a decline in participation within the Stamford regional area and statewide. This decrease in WIC participation appears to be multi-factorial. This trend may be related to improved economic conditions, decreased birth rate, and the administrative climate resulting in immigrants choosing not to pursue assistance.

According to Oliveira, after fiscal year 2010, the number of WIC participants across the nation has decreased by 16 percent. Improved economic conditions in recent years may have a contributing role in the decline in WIC participation including a decline in the number of people in poverty and in the unemployment rate. Falling WIC caseloads may also reflect the decrease in the number of U.S. births. During 2008-15, the number of births fell in each year except in 2014. (Oliveira, Victor. The Food Assistance Landscape: FY 2016 Annual Report, EIB-169. U.S. Department of Agriculture, Economic Research Service, March 2017.).

Focusing statewide and locally, census data available for 2011- 2015 from the American Community Survey indicates individual poverty rates for the United States, Connecticut and Fairfield County as 13.5%, 10.5% and 9.0% respectively.

(https://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml)

With regard to the current national government administration climate on immigration, an article published in the Guardian, draws attention to a drop off in use of WIC services by undocumented immigrants.

Table 11. WIC Closeout Participation (CP)*

	Fiscal Year 10/1/14-9/30/15 Average		Fiscal Year 10/1/15-9/30/16 Average		Fiscal Year 10/1/16-5/7/17 Average	
	CD	Assigned	CD	Assigned	CD	Assigned
	CP	Caseload **	CP	Caseload**	CP	Caseload**
Stamford Regional WIC Program including Norwalk WIC Subcontractor	4,811	4,636	4,663	4,788	4,148	4,810
Statewide Connecticut WIC Program	51,295	54,486	49,155	51,812	47,888	51,415

^{*}Closeout Participation refers to <u>final</u> participation numbers of all certified clients issued benefits with a start date during the designated reporting period, regardless of whether the benefits were redeemed or not.

Reference: State of CT WIC Management Information System Summary Participation Report Assigned Caseload Levels of Local CT WIC Agencies, State of Connecticut WIC Program FFY 2016- FFY 2017

Prepared September 1, 2017 by:
Diedre Anspach, RN, BSN, MPA, Director, Nursing and Dental Hygiene
Jody Bishop-Pullan, RDH, MPH, Case Manager, Dental Health
Jennifer Calder, DVM, MPH, PhD, CHSV, Director of Health
James Federici, MS, Director, Laboratory
Kerri Hagan, MPA, Public Health Educator
Ronald Miller, Director, Environmental Services
Rona Marotta, RD, MS, Supervisor, WIC
Elizabeth Rodriguez, RN, BSN, MSN, MPH, Coordinator, Public Health Preparedness
Pamela Scott, Administrative Assistant-Health
Vena Wilson, Office Support Specialist

^{**}Assigned Caseload - Caseload estimates are based on "the highest of: (A) average monthly participation for the previous fiscal year; or, (B) average monthly participation for the last quarter of the previous fiscal year" in accordance with federal regulations (§ 247.21: Caseload assignment).