

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

**Annual Report**

**July 1, 2019 to June 30, 2020**



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.

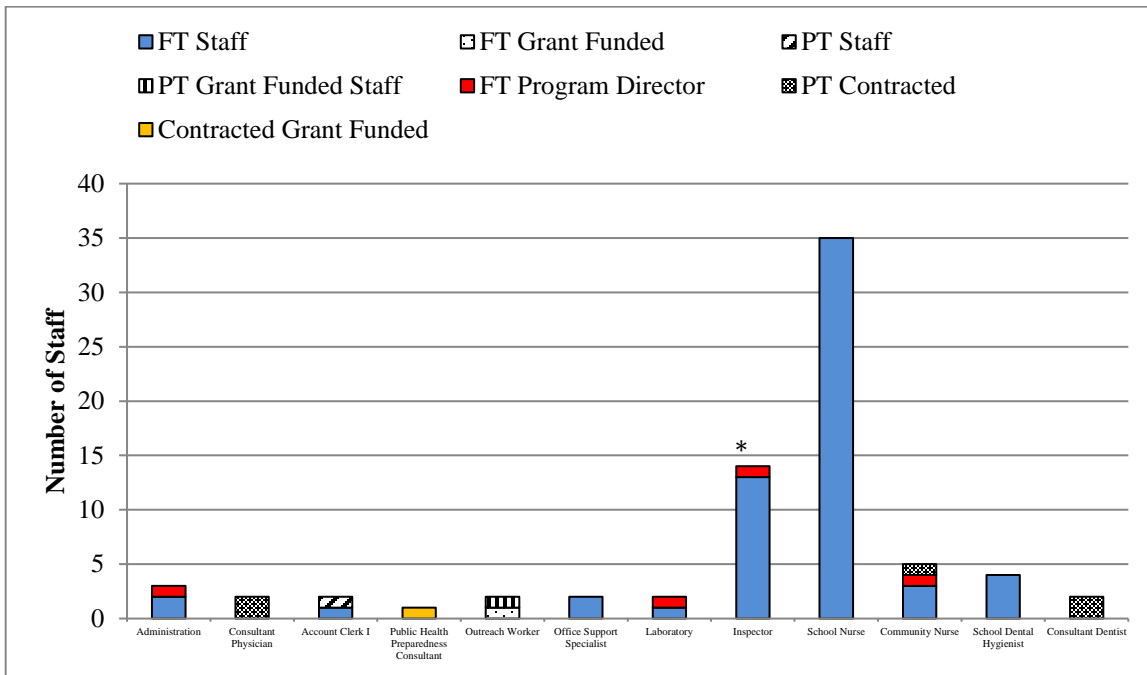
The State of Connecticut's General Statute 19a-207a requires that all Department of Healths engage in the *Ten Essential Services (ES) of Public Health*. These 10 ES are grouped into these major areas:

- 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 2019-2020, 74 persons worked in the Stamford Department of Health. Figure 1 below demonstrates the staffing levels by program.

**Figure 1. Stamford Department of Health Staffing by Program Fiscal Year 2019-2020**

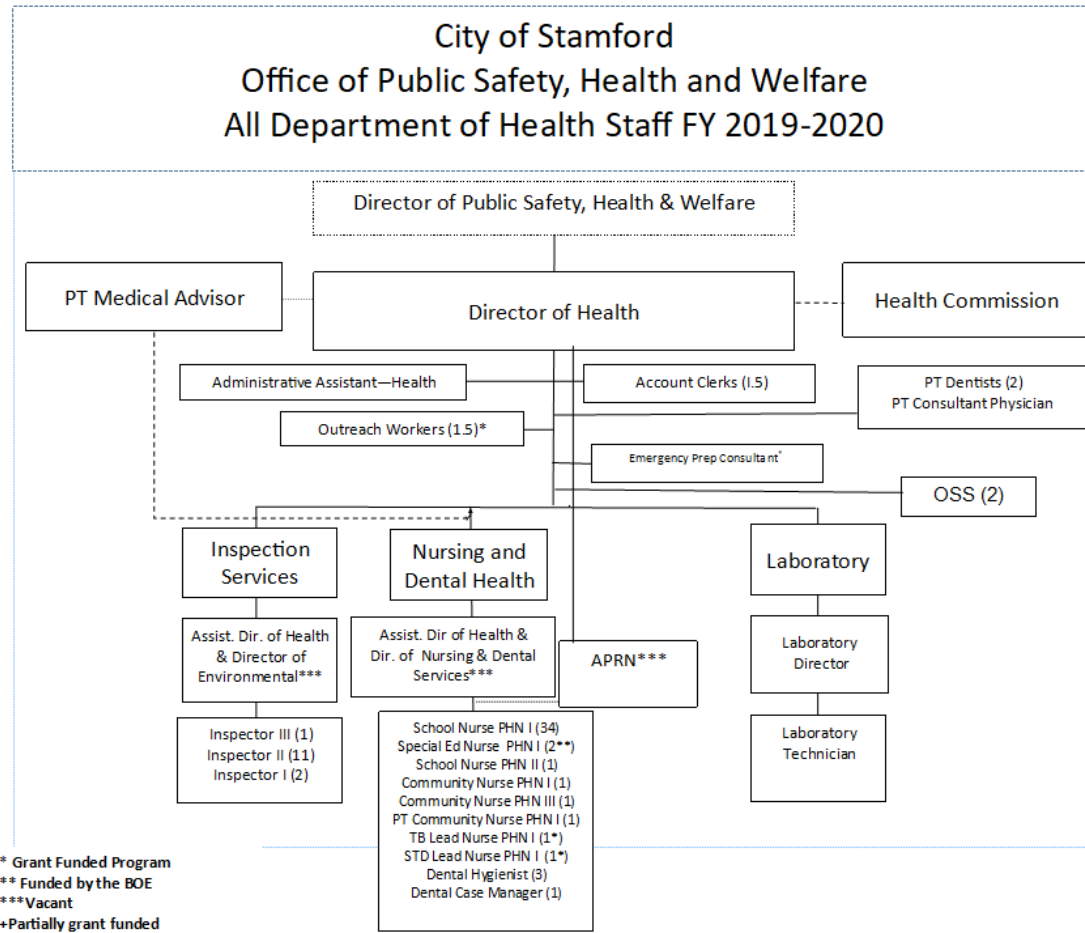


\*Director of Nursing and Dental Hygiene oversees the school nurses, community nurses, and dental hygienists

The department is overseen by the Director of Health with support from a part-time Medical Advisor. The Director reports to the Director of Public Safety Health and Welfare with support from the Health Commission. The department consists of three divisions, Environmental Inspections, Nursing and Dental, and Laboratory and the Outreach, and Emergency Preparedness and Response Programs. In October, 2018, the responsibility for the City requested that the State Department of Public Health (DPH) reassign Women’s Infants and Children’s program to Optimus Healthcare in an effort to maintain the services in the City. Similarly, the City requested that the DPH assume responsibility for the Immunization Action Plan (IAP) services.

Figure 2 shows the organizational chart for the department.

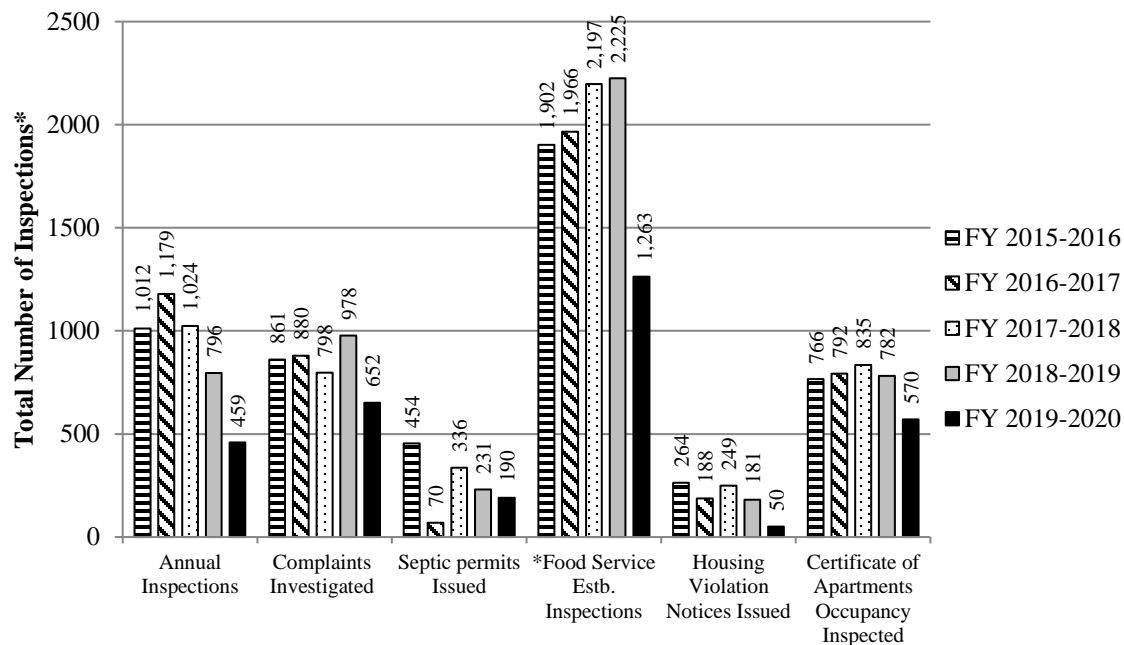
**Figure 2. Stamford Department of Health Organizational Chart Fiscal Year 2019-2020**



## Environmental Inspections

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 program addresses essential services 3 to 6 and 8 to 9. In fiscal year 2019-2020, there were 3,188 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, Barber Shops, 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.

Compared to Fiscal year 2018-2019, there was an overall 41.4% reduction in Environmental Health and Inspections. However, it is important to note the division reported represent activities completed for nine months of the fiscal year before the City and the State-wide lockdown as a result of the COVID-19 pandemic. The pandemic resulted in most businesses being closed as well as most City employees were ordered to work remotely. In addition, the reduction in

complaint-related inspections and food establishment violations issued may also be a result of aggressive outreach and education of landlords and restaurateurs resulting in less complaints and greater compliance.

The number of annual inspections completed decreased by 42.3%, the number of complaints investigated decreased by 33.3%, the number of septic permits issued, decreased by 17.7% most likely a result of the pandemic-related shutdown.

There was a 72.8% decrease in housing violation notices compared to fiscal year 2018-2019. This decrease may be a result of home owners being more aware of the proper housing codes that ensure a safe living environment. This may also have been impacted by the COVID-19 lockdown and the fact that the division has been without a director for several months to spearhead the operation safe house initiative that targeted illegal an unsafe housing matters.

A certificate of apartment occupancy (CAO) inspection relies on owners calling to indicate that their dwelling 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 30.9% compared to fiscal year 2018-2019 which may be a result of residents being less mobile due to the pandemic.

Under the State of Connecticut Public Act 17-93, which was 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”.

Figure 3 above shows that overall food service inspections which include re-inspections decreased. Table 1 below showed that only 51% of annual inspections that have been conducted. Many food establishments either temporarily or permanently closed during the peak of the pandemic, in addition inspectors were redirected to ensure compliance with gubernatorial and mayoral executive orders thus less routine inspections occurred.

**Table 1. Restaurant Inspections**

Fiscal Year 2018-2019						Fiscal Year 2019-2020				
Class <sup>1</sup>	Total # of establishments in Stamford	<i>Inspection<sup>2</sup> Bench Mark</i>	Total # routine inspections completed	% of routine inspections completed	Total # of <sup>3</sup> all inspections	Total # of * establishments in Stamford	<i>Inspection<sup>2</sup> Bench Mark</i>	Total # of routine inspections completed	Total % of all routine inspections completed	Total # of <sup>3</sup> all inspections
I	51	51	73	143	76	61	61	33	54	33
II	165	330	339	102	377	178	356	223	62	255
III	430	1,290	1,028	80	1,236	483	1,449	815	56	1,011
IV	18	72	62	86	75	31	124	60	48	74
Retail	125	250	155	62	190	149	298	26	8	29
Temporary Events	209	209	122	58	128	165	165	106	64	115
<b>Total</b>	<b>998</b>	<b>2,202</b>	<b>1,779</b>	<b>81</b>	<b>2,082</b>	<b>1,067</b>	<b>2,453</b>	<b>1,263</b>	<b>51</b>	<b>1,517</b>

<sup>1</sup>Note: The Classifications changed for Fiscal Year 2017-2018, see page six (6) for definitions.

<sup>2</sup>State inspections bench mark

<sup>3</sup>Total of all inspections including re-inspections

\*Public Act 17-93, Department of Public Health's adoption of the Food and Drug Administration Model Food Code. All Class I, II, III, and IV Food Establishments have been reclassified to reflect the FDA's classification as of October 1, 2017, see page six (6) for definitions



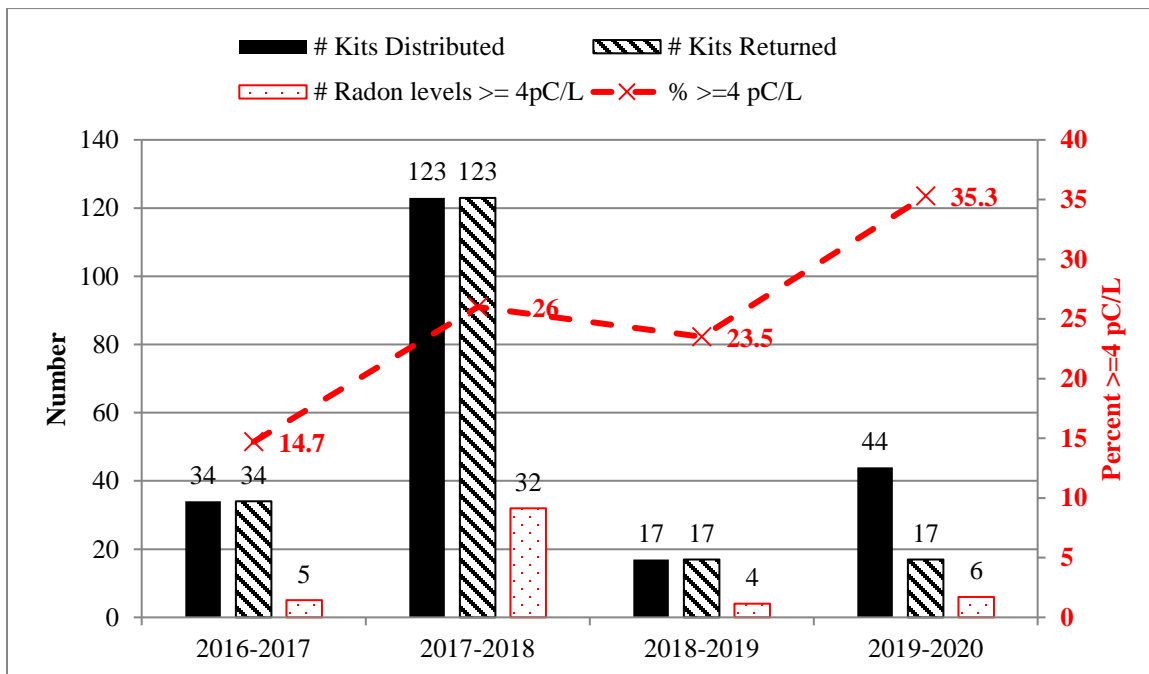
Radon Testing Program

In January 2016, 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 homeowners 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  $\geq 4$  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 awareness 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. We are not sure how to interpret the return rate because most activities closed down mid-March due to the COVID-19 pandemic

**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 2019-2020 fiscal year the program responded to 15 complaints involving mosquitoes and stagnant water.

### **Laboratory Division**

The Laboratory provides supportive services to the Department of Health's various divisions, 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 176 samples were collected and tested in 2020 with no recorded exceedances.

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**

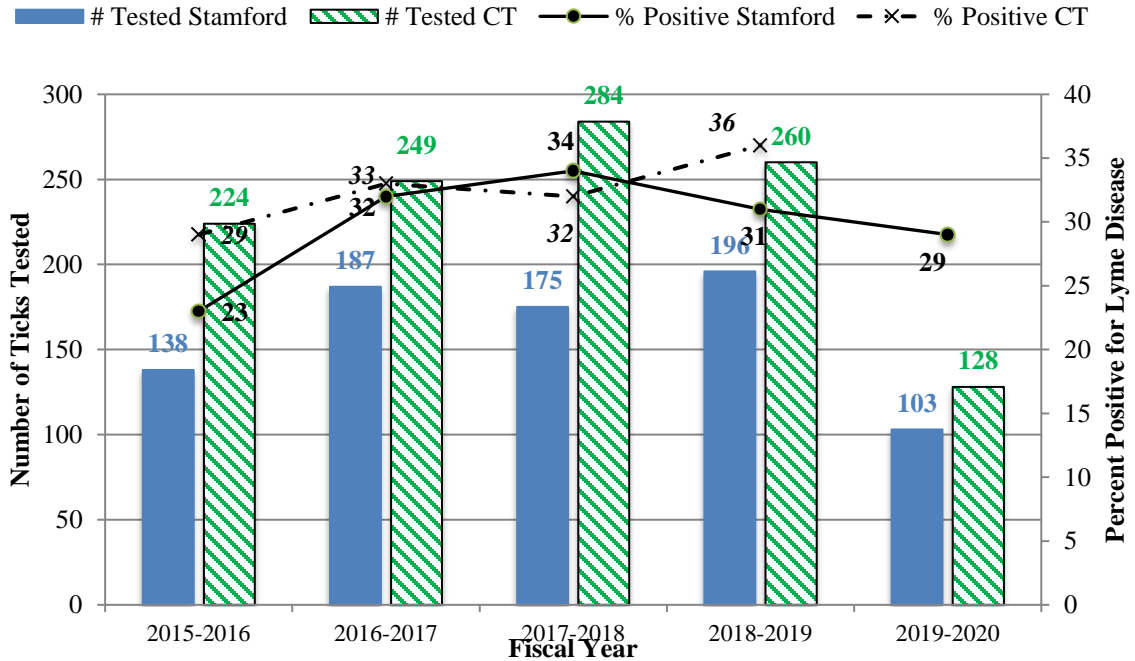
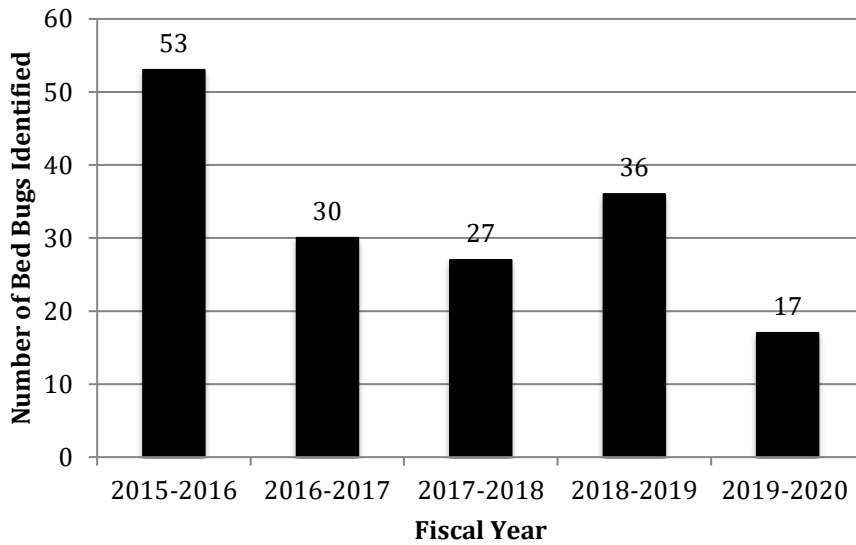


Figure 6 shows the number of bedbugs identified over the past five years. There was a decrease seen between 2014 to 2016. This was most likely due to changes in the State of Connecticut’s House Bill No. 5335 and the Public Act No. 16-51, which became effective on October 1, 2016. This Act requires landlords 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 may be affected by the COVID-19 pandemic-related lockdown for the last three months of the fiscal year.

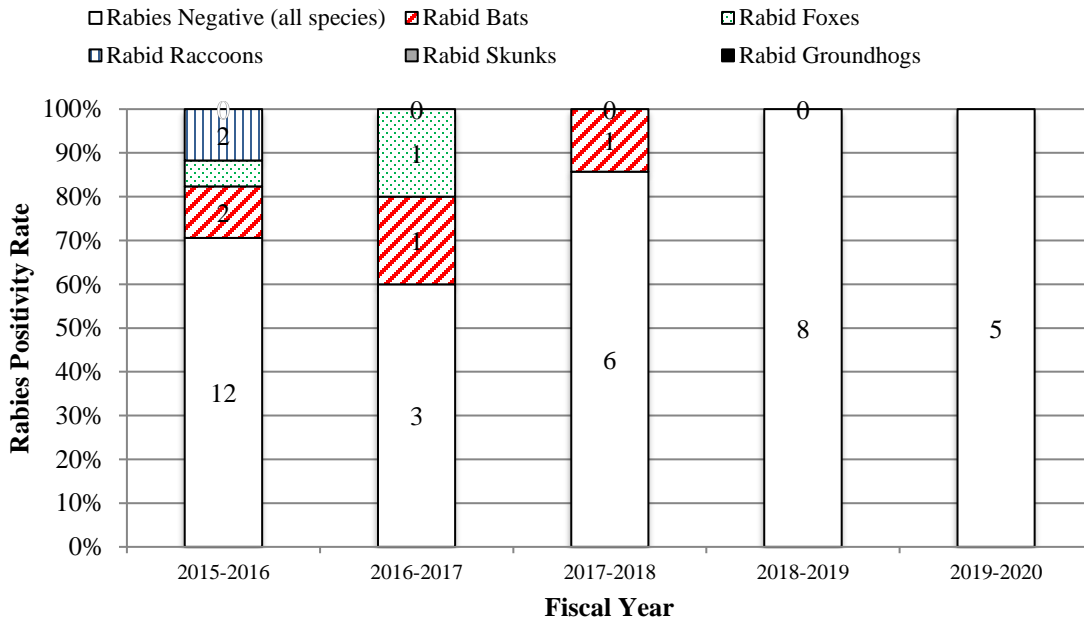
**Figure 6. Number of Bed Bugs Identified**



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. The data show that the majority of rabid animals in Stamford have been bats, this is consistent with state trends.

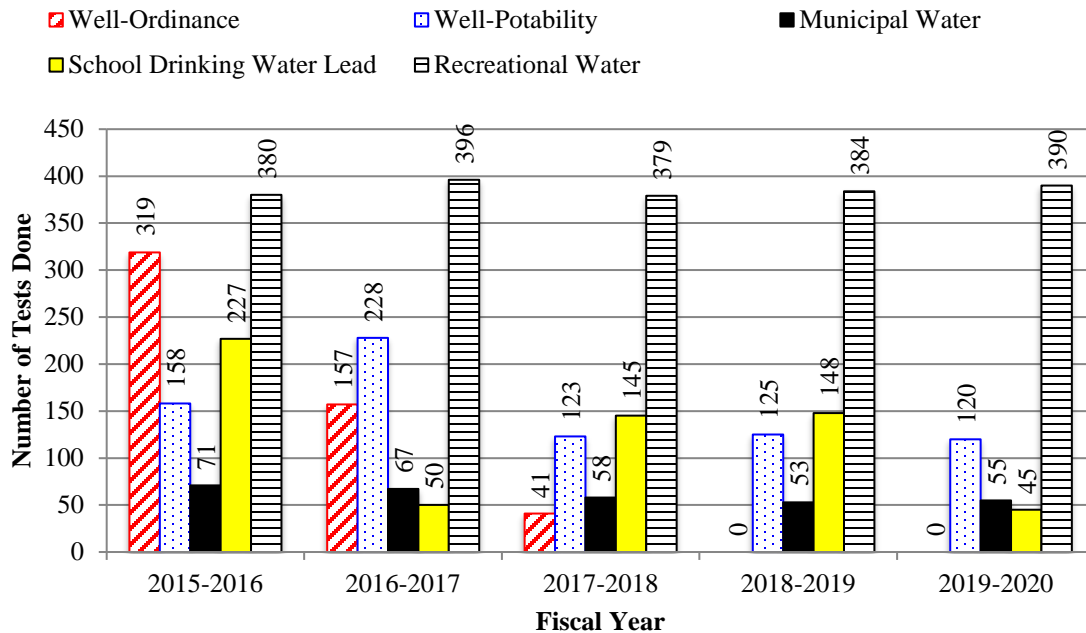
**Figure 7. Animal Rabies Testing**



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. Requests for well water testing related to the City Ordinance dropped by approximately 50% after the first two years and continued to steadily decline. This may have been a result of many homeowners having tested their wells privately. Well potability testing requests steadily climbed until fiscal year 2017-2018 when the number of requests decreased and it has remained at that level since. Recreational and municipal water testing requests have remained relatively constant. The inability to increase testing through the City Laboratory may be multifactorial and related to concerns about confidentiality of test results, slower turnaround time compared to commercial laboratories due to having a non-automated and single test processing system, as well as many homeowners having tested their wells at least once, and lack of knowledge about the need for periodic (approximately every two years) well water potability testing regardless of prior negative results.

**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 of the pandemic response thus the breath of services requested and provided were reduced.

***Community Nursing***

Community nurses provide oversight to 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 adult health program. Community Nurses participate in outbreak investigations and Public Health Emergency Response.

**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 gearing up to refocus its efforts and forge new partnerships in an effort to revitalize this essential program. Due to the pandemic, the department has not publicized the program.

**Table 2. Breathe of Fresh Air Program**

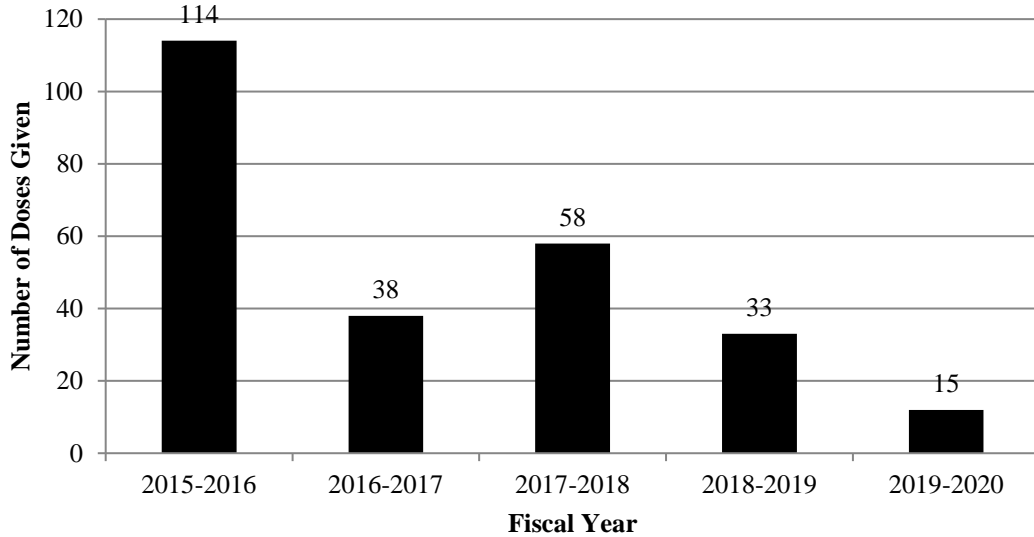
	<b>2014-2015</b>	<b>2015-2016</b>	<b>2016-2017</b>	<b>2017-2018</b>	<b>2018-2019</b>	<b>2019-2020</b>
New Clients	14	4	2	1	3	0
No. of Visits	11	4	4	2	4	0

*Cocoon Program*

The Cocoon Program is a state funded program that provides free tetanus diphtheria and acellular pertussis (Tdap) vaccine to any adult 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 10 shows a dramatic decrease in number of doses given since fiscal year 2015-2016. This decrease may be attributed to several reasons such as; many sites that have pharmacy services now offer this vaccine, persons with insurance are getting the vaccine from their providers, and ineffective marketing of the City’s program.

**Figure 10. Cocoon Program Five-Year Trends Figure 7. Cocoon Program Five-Year Trends**

### Adult Tetanus, Diphtheria, & Acellular Pertusis Vaccination

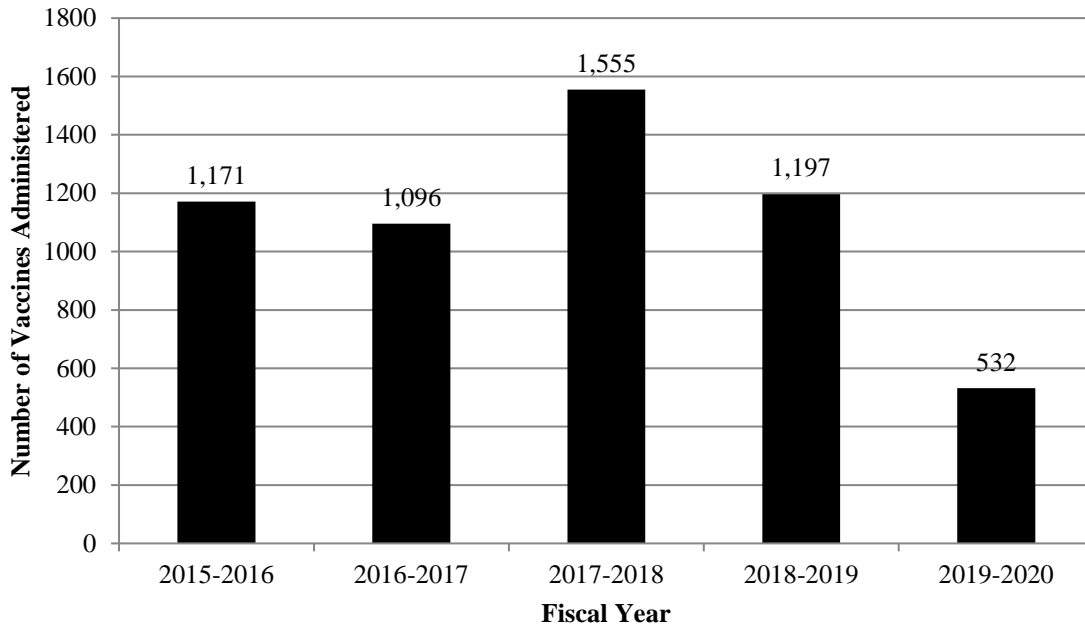


### Influenza Prevention Program

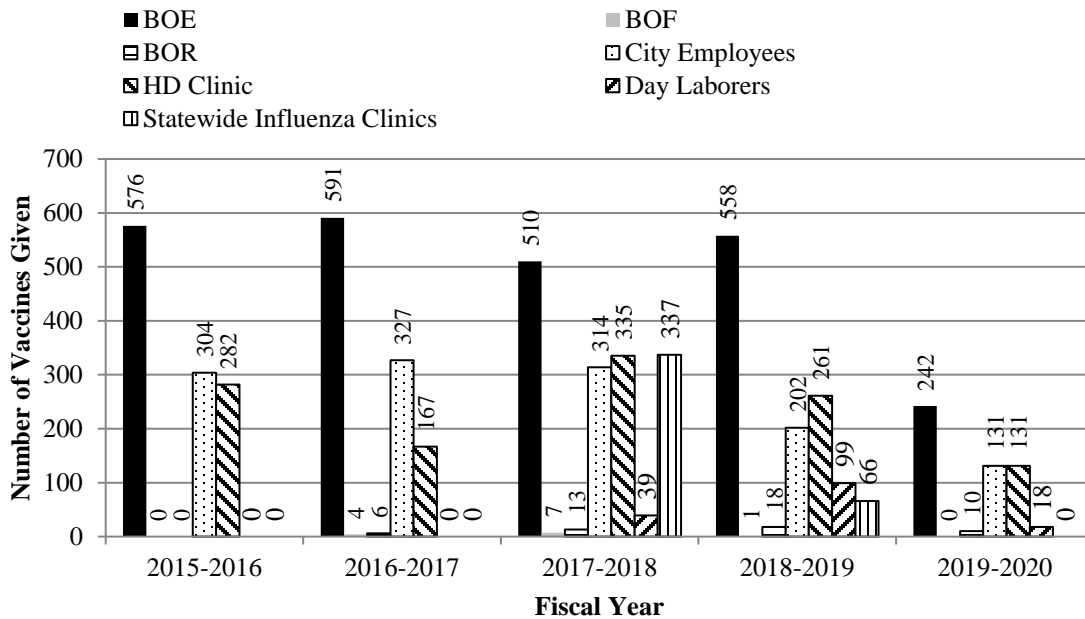
The goal of the influenza prevention program is to increase the vaccination rates in the city, thereby increasing herd immunity. This will make the city better prepared to withstand the effects of an influenza pandemic. To help in achieving this goal, the Department of Health provides influenza vaccine to all eligible persons ages three (3) years or older. The 2019-20 annual Influenza “Kick-Off” campaign was held at the 137 Henry Street Clinic on October 11, 2019. 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. DPH did not support the Annual Statewide Influenza Vaccination Clinics in fiscal year 2019-2020. Figures 11 and 12 respectively show the five-year trends in influenza vaccine administration and the populations targeted. Influenza vaccines are offered at the Henry Street Clinic throughout the entire influenza season from October until May. Despite showing increasing trends in prior years, since 2017-2018 there has been an overall reduction in the number of vaccines administered.



**Figure 11. Influenza Vaccination Program**



**Figure 12. Influenza Vaccination By Population Served**



Sexually Transmitted Disease (STD) Program

The Stamford Department of Health’s 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. Free pregnancy testing is also offered, and women who are pregnant are referred to Optimus Health Care for prenatal care. Hepatitis A and B vaccines are provided by DPH and are offered free of charge to STD clinic patients. Table 3 below details the trend in positivity rates which are reflective of the national trends in which STD rates are increasing and emphasizes the need to maintain a local ability to provide these needed services. The number of cases seen at the clinic decreased because during the pandemic service was restricted to follow-up treatments only.

**Table 3. Sexually transmitted Disease Clinic Five-Year Trends**

	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020
No. of initial visits	549	450	439	355	245
No. of follow up visits <sup>1</sup>	126	124	108	96	47
No. of STD tests <sup>2</sup>	534	458	486	380	256
No. (%) of syphilis positive	26 (4.7)	26 (5.7)	31 (7.0)	26 (7.3)	7 (2.7)
No. (%) of <i>Chlamydia</i> spp. positive	40 (7.2)	27 (6.0)	35 (7.9)	25 (7.0)	13 (5.1)
No. (%) of gonorrhea positive	7 (1.2)	8 (1.7)	6 (1.3)	10 (2.8)	5 (2.0)
No. of HIV tests done (% positive)	500 (.20)	373 (.30)	379 (.26)	319 (0)	129 (0)
No. of pregnancy tests done (% pregnant)	6 (0)	8 (50.0)	4 (25.0)	1 (0)	0

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

<sup>2</sup> 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. Some patients are not tested because they are referred to the clinic for treatment based on a prior positive test results.

### 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 4 describes the five-year TB trends. In fiscal year 2018-2019, the first cases of multidrug resistant (MDR) TB was diagnosed in a Stamford resident. However, to date, no extensively drug resistant (XDR) has been identified in a city resident. 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 4. Tuberculosis Five-Year Trends**

	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020
No. of new TB cases	7	6	2	4	6
No. (%) of new cases that are adults	6 (86.7)	5 (83.3)	2 (100)	4 (100)	6 (100)
No. (%) of multi-drug resistant TB cases <sup>1</sup>	0	0	0	1 (25)	1 (16.7)
No. of extremely drug resistant TB cases <sup>2</sup>	0	0	0	0	0
No. of visits to client on DOT <sup>3</sup>	1,040	947	148	460	1,300
No. of tuberculosis skin tests and or blood tests for TB administered	140	208	35	256	51
No. (%) of positive TB tests	5 (3.5%)	13 (6%)	1 (2%)	13 (5.0%)	6 (7.2%)

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

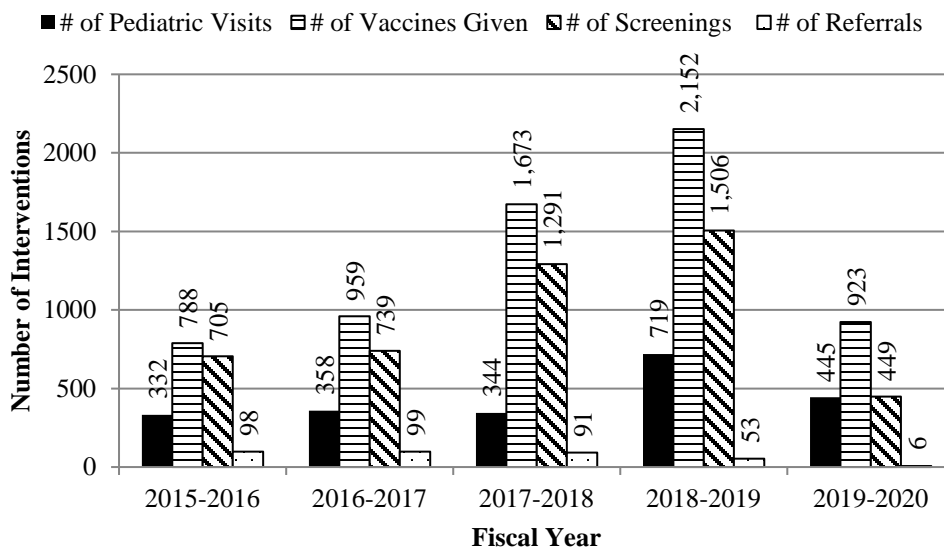
<sup>2</sup>Extensively drug resistant (XDR) are cases in which the *Mycobacterium tuberculosis* strain is resistant to isoniazid and rifampin and any fluoroquinolone and at least one of three injectable drugs namely Amikacin, Kanamycin, or Capreomycin

<sup>3</sup>DOT – 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.

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. Children are referred to the clinic by medical providers, school nurses, the Stamford Hospital, and other sources. 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 DPH via the Federal Vaccine for Children program to ensure that children are up-to-date on their vaccines. Fiscal year 2019-20 saw a reduction in well child visits primarily due to the pandemic related reduction in services. Figure 13 details the five-year trends.

**Figure 13. Stamford Well Child Clinic Five-Year Trends**

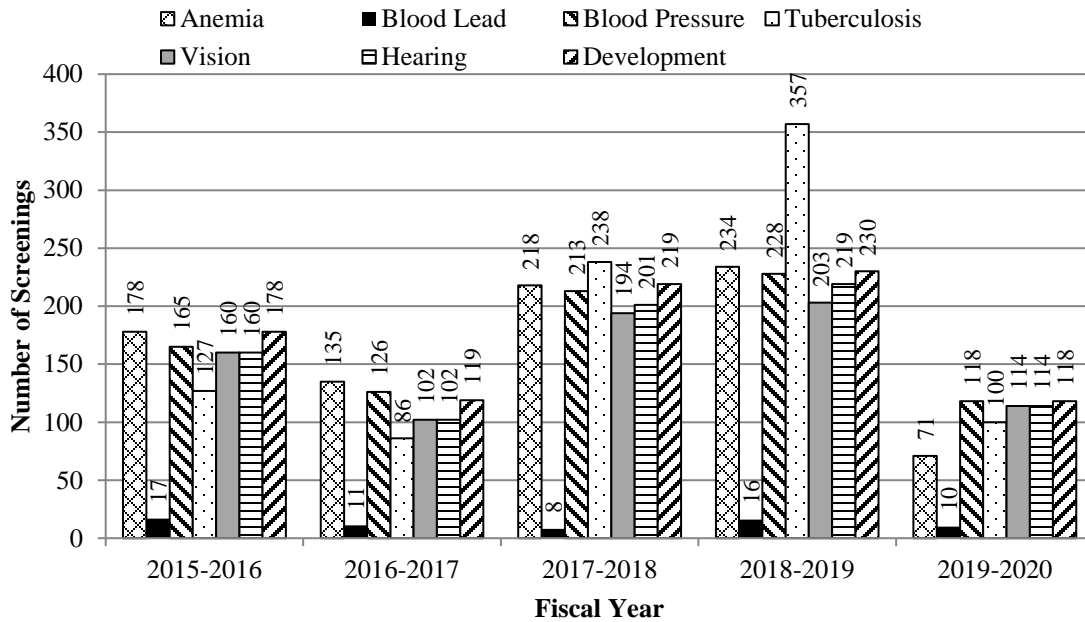


<sup>1</sup>Screenings refer to vision, hearing, scoliosis, dental, developmental screenings, hemoglobin blood tests and lead blood tests

<sup>2</sup>Referrals 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, the City of Stamford Department of Health Breath of Fresh Air program.

Figure 14 shows the number and types of screening that are conducted in the clinic. Fiscal year 2019-2020 saw a decrease in all types of screening conducted compared to 2018-2019. This is due to clinic closure because of COVID-19 response.

**Figure 14. 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, and when needed, by collaborating with Environmental Inspections Division, an environmental inspection is conducted of the child’s home to identify and eliminate any potential environmental sources of lead.

Given that pediatric lead screenings are only required for children ages 0 to 3 years of age and the majority of children seen at the city’s Henry Street Clinic are older than three (3) years of age, the Well Child Clinic does not offer many lead screening tests.

In fiscal year 2019-20, the community nurses investigated 57 elevated BLLs that were reported to the Department of Health. Of these, six (9.8%) required an environmental inspection, two (33.3%) were linked to properties that had lead paint in the structures, and two (33.3%) were linked to sources other than paint such as toys, jewelry, or eating utensils, the remaining two (33.3%) were linked to hand to mouth behaviors.

*(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 2019-2020 the community nurses were involved in the investigation of 44 individual cases that included the following pathogens: *Campylobacter jejuni*, *Cryptosporidiosis*, *Giardia* spp., Hepatitis B and Hepatitis C viruses, *Bordetella pertussis*, *Malaria*, *Meningitis*, *Mumps*, *Salmonella* spp., *Sarcoptes scabiei*, *Streptococcus* spp., and *Yersinia* spp.

Staff were also involved in several outbreak investigations that often required support from the Nursing, Environmental Inspections, and Laboratory Divisions. These outbreak investigations ranged in size from two (2) to 15 persons and were related to, *Campylobacter* spp. at a catered event; influenza infection at an Assisted Living facility; influenza infections at two (2) nursing homes.

### Community Nursing Outreach Activities

The community nursing program participated in the Commissioner of Health's Statewide Hepatitis A Vaccination program and provided a total of 18 doses of vaccines to at risk persons. Vaccination clinics were held at Building One Community on November 27, 2019. These outreach activities were used as an opportunity to also provide free influenza vaccine; 26 persons accepted influenza vaccines. By collaborating with Stamford CARES, free HIV testing was offered during the Hepatitis A vaccination campaign at Building One Community where six participants agreed to be tested for HIV.

The Community Nursing program obtained an internet enabled television set that is being used not only to enhance workforce development for staff but to also educate clinic patients using education videos from the Centers for Disease Prevention and Control and DPH to reinforce the clinic's health promotion activities and to improve patient compliance.

### **School Nursing Program**

The School Nursing Program's goal is to ensure a safe learning environment for school children. This is accomplished by ensuring that only children who meet the health requirements for school entry are admitted into the school environment, and that children while attending school undergo mandated screenings and referrals that are designed for early detection and treatment of developmental problems.

School nurses also provide physician-ordered medical interventions for children with medical needs. This is a critical component of the program given that there is an increasing trend to mainstream children with high medical acuity so that they enjoy a richer educational environment. Further, nurses provide first aid, respond to emergencies, and review all required

medical records for each child who is scheduled for a field trip to ensure that the child's health is not be compromised during the trip.

Nurses educate families about various health-related topics to ensure healthy outcomes and prepare the appropriate state required health metrics that are collected and reported to the State Department of Education to facilitate program planning. The School Nursing Program benefits from the oversight of the city's Medical Advisor and the city's Medical Consultant who work with the private clinicians to address medical questions, write select nursing orders, and review special medically-related requests.

Table 5 shows the five-year trends in the school nursing program. There was a 28% decrease in students requiring nursing interventions given in schools due to students being released to home bound instructions on March 12, 2020 as a result of the COVID19 Pandemic. Similarly, hearing, vision and scoliosis screenings were not completed by all school.

It is evident from the data that the percentage of clinical care activities is increasing. This is most likely a result of the mainstreaming of children with more medical acuity. Thus the need for sufficient school nurses is critical.

**Table 5. School Nursing Activities**

	<b>FY 2015-2016</b>	<b>FY 2016-2017</b>	<b>FY 2017-2018</b>	<b>FY 2018-2019</b>	<b>FY 2019-2020</b>
No. of public schools buildings	22	22	22	22	23
No. of private/parochial school buildings	19	19	17	15*	15
<b>NURSING ACTIVITIES<sup>1</sup> (not including 911 calls or referrals)<sup>2</sup></b>					
<b>TOTAL</b>	283,376	274,930	308,901	350,882	100,031
No. (%) <sup>3</sup> of sick visits	64,054 (22.0)	62,634 (23.0)	67,840 (22.0)	61,063 (17.4)	50,349 (50.0)
No. (%) <sup>3</sup> of injury-related visits	30,711 (11.0)	32,226 (12.0)	31,333 (10.0)	28,899 (8.2)	14,706 (15.0)
No. (%) <sup>3</sup> of medication orders received and reviewed	4,557 (1.6)	4,309 (1.5)	3,016 (.9)	3,724 (1.0)	4,552 (4.5)
No. (%) <sup>3</sup> of medications given	16,661 (6.0)	15,728 (5.7)	23,696 (7.6)	27,628 (8.0)	11,705 (11.7)
No. (%) <sup>3</sup> other nursing activities	135,092 (48.0)	133,247 (48.0)	152,045 (50.0)	193,140 (55.1)	22,275 (22.0)
<b>Clinical Care That Are Mandated To an RN's Intervention<sup>4</sup></b>					
No. (%) of blood glucose testing	3,968 (1.4)	3,212 (1.1)	3,451 (1.0)	9,650 (2.8)	5,164 (5.0)
No. (%) insulin management	1,835 (.6)	1,187 (.5)	1,818 (.5)	2,830 (.8)	1,321 (1.3)
No. (%) of oral suctioning	1,622 (.6)	1,363 (.5)	1,542 (.5)	687 (.2)	997 (1.0)
No. (%) of catheterizations	1,131 (.4)	555 (.2)	322 (.1)	738 (.2)	573 (.60)
No. (%) of gastric-tube feedings	1,412 (.5)	1,723 (.6)	1683 (.5)	2,574 (.7)	573 (1.20)
No. (%) nasogastric tube feedings	0	0	1 (0)	0	0 (0)
No. (%) intravenous (IV) therapy	11 (0)	5 (0)	4 (0)	0	1 (0)
No. (%) nebulizer treatments	327 (.1)	451 (.1)	370 (.1)	347 (.1)	200 (.20)
No. (%) ostomy care	1018 (.4)	192 (0)	280 (.1)	581 (.2)	601 (.60)
No. (%) oxygen administered	0	13 (0)	359 (.1)	261 (.1)	89 (.10)
No. (%) tracheostomy suctioning	0	0	0	558 (.2)	494 (.50)
No. (%) ventilator care	0	0	0	0	0 (0)
<b>Other Mandated Activities</b>					
<i>Screenings</i>					
No. (%) <sup>3</sup> vision screenings	8,220 (3.0)	7,780(2.8)	9,050 (3.0)	7,583 (2.1)	3,762 (3.80)
No. (%) <sup>5</sup> of vision referrals from screenings	495 (6.0)	465 (6.0)	549 (6.1)	430 (5.6)	248 (.20)
No. (%) <sup>3</sup> of hearing screenings	8,371(2.9)	7,137 (2.6)	8,783 (2.8)	7,338 (2.0)	3,734 (3.70)
No. (%) <sup>5</sup> of hearing referrals	68 (.8)	55 (.7)	77 (.9)	49 (.6)	28 (0)
No. (3) <sup>3</sup> of scoliosis screenings	3,828 (1.4)	3,168 (1.2)	3,308 (1.0)	3,284 (.9)	769 (.80)
No. ( ) <sup>5</sup> scoliosis referrals	20 (.5)	25 (.8)	53 (1.6)	52 (1.5)	35 (0)
No. of 911 calls <sup>2</sup>	54	64	72	67	36 (0)

\*Spire & Pinnacle are for profit schools and are no longer served by the Department of Health

<sup>1</sup> All nursing activities that the school nurse engages in excluding 911 calls, referrals for vision, hearing, and scoliosis, and mandatory paperwork

<sup>2</sup> 911 calls include calls for students and adults. Referrals are made for students only to other healthcare providers

<sup>3</sup> Percentage of all nursing activities



## ***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 required more than one visit to complete preventive and treatment services.

In 200, 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**

	<b>2015-2016</b>	<b>2016-2017</b>	<b>2017-2018</b>	<b>2018-2019</b>	<b>2019-20</b>
Dental Hygienists <sup>1</sup>	4	4.4	4.4	4	4
Classroom Instruction	241	210	191	236	214
No. of Elementary & Middle School Children Screened	8,235	8,617	8,701	8028	5557
No. (%) of Elementary & Middle School Children Screened Requiring Dental Care	657 (8.0)	602 (7.0)	555 (6.4)	558 (6.9)	529 (9.5)
No. of Children Requiring Dental care who receive their Preventive care at the Department of Health's Dental Clinics (#Patients/#Visits)	377/426	305/401	281/361	301/376	244/278
No. of Children Requiring Dental care who receive their treatments at the Department of Health's Dental Clinics Treatment Services (#Patients/#Visits)	187/324	191/305	159/274	144/263	128/205
Sealants Grade 2	462	424	390	369	175
Sealants Grant Funded (Grades 1,6,7) <sup>2</sup>	0	173	184	N/A	N/A

<sup>1</sup> Three full time hygienists, one grant funded part-time hygienist and one case manager

<sup>2</sup> The 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<sup>th</sup> due to the COVID-19 pandemic. Data reflects services performed from July 1, 2019-March 6, 2020. At the time of suspension, 5,557 elementary and middle school public school children had been screened. Of those screened, 9.5% were referred for dental care representing an increase compared to previous years.

This increase need for dental care was reflective of the increase in the prevalence and severity of dental disease during fiscal year 2019-2020 in which 54% of children had decay in two or more quadrants of the mouth and 11 children needed referral to a specialist .

The children who are served by the Department of Health's Dental Program oftentimes are not eligible to participate in any other dental program and therefore, their only access to dental care is through the school dental hygiene program. Also, some family members report enjoying the convenience of having access to a school-based the program as it decreases barriers to access to care, viz., transportation and time away from school and work.

### **Public Health Education and Outreach**

The Department of Health continues to center its health education and outreach activities around a series of health awareness days to promote wellness and disease prevention while highlighting the programs and services available through the department. Due to the retirement of essential leadership staff as well as the COVID-19 pandemic, many activities were postponed.

Additional funding is needed to support the program's activities and the program also needs a dedicated staff member who has expertise in health promotion who will not only be able to develop effective education activities that will promote behavior change, but will also be able to assess the extent of knowledge assimilated by participants in these activities.

Department's staff continue to serve on a number of community-based, state, and city-wide committees.

### **Public Health Emergency Preparedness**

Within the Department of Health, Emergency Preparedness continues to be a shared responsibility for all staff. While emergency sheltering continues to be a responsibility for the department, fortunately in fiscal year 2019-2020 there was no need for emergency sheltering.

Using funds from a grant obtained from the State of Connecticut Department of Public Health, with 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. The company also participates in the ESF8 regional planning group however due the

COVID-19 –related travel restrictions it has been working with the City remotely. The pandemic has also resulted in a delay of planned onsite table top exercises.

The City’s two Points of Distribution (PODs) Stamford High School and Rippowam Middle School underwent the DPH mandated Drills on October 17 and 21, 2019 respectively.

In fiscal year 2019-2020 a Medical Reserve Corps. (MRC) liaison was appointed to assist with coordination of MRC activities. This individual was instrumental in engaging MRC volunteers, and streamlining the application and activation processes.

The MRC volunteers were activated and participated in several influenza vaccination clinics:

- September 26, 2019
- October 17, 2019
- October 21, 2019
- November 15, 2019
- February 1, 2020
- March 7, 2020

MRC volunteers supported the COVID-19 pandemic response in various capacities (see later).

During fiscal year 2019-2020, CERT and MRC continued their joint training activities.

Volunteers participated in a variety of trainings

- October 26, 2020 –Basic and Advanced level Training – Annual CERT/MRC Training Day
- Monthly training sessions: started training together. The following topics were offered during the year:
  - January 2020-Bloodborne Pathogens
  - February 2020- HIPAA
  - All other sessions were cancelled due to the COVID-19 pandemic

### **Other Activities**

The Director of Health reviewed and approved 11 noise waiver applications prior to the statewide shutdown secondary to the COVID-19 pandemic and also reviewed death certificates to provide funeral directors with 13 non-contagion letters that allowed the removal of bodies for burial outside of the country.

## **Department of Health COVID Response**

Due the pandemic, many routine activities were suspended and the department adjusted its activities and reassigned staff to roles and duties to support the department's COVID-19 response.

### **Environmental Health and Inspections Division**

Department Environmental Health and Inspections staff were staggered to observe social distancing. Inspectors initially conducted site visits to ensure compliance with gubernatorial and mayoral executive orders related to closures. Inspectors played an integral role in preparing ReOpen Stamford guidance documents for businesses, participated in educational sessions, participated in the pre-reopening review and approval process, and conducted pre-reopening inspections.

### **Laboratory Division**

Throughout the pandemic, the Laboratory remained open to provide routine services to residents upon request. In addition to these services, laboratory personnel assisted with the pandemic response by working with Region 1 Medication Distribution Area (MDA) agent to facilitate CT DPH's distribution of personal protective equipment (PPE) to primary care physicians, dentists, home health care facilities, dialysis centers and small businesses located in Stamford.

Weekly, staff travelled to the Region 1 distribution site at Sherwood Island to pick up PPE, and coordinate distribution to the professional and facilities listed above. Between April and July a total of 55,962 pieces of PPE were distributed to Stamford primary care providers.

Starting in May, small businesses, defined as an establishment with 50 or less employees; were supplied with masks and an infrared thermometers which were provided by the Connecticut Department of Public Health. Between May and July a combined total of 449 infrared touchless thermometers and 9,307 masks were distributed to local businesses.

### **Medical Reserve Corp (MRC)**

During the peak of the pandemic many new volunteers joined the Stamford MRC. Thirty-seven (37) MRC volunteers were activated to assist with the COVID-19 response during this timeframe resulting in a total of 206 person-days of activations,

Volunteers assisted with:

- COVID-19 testing at Murphy's Medical and the Department of Health's Westhill testing sites
- Packaging and distributing PPE
- Contact tracing

## **Nursing and Dental Services**

On March 6, 2020 the Department suspended the public health dental program's activities due concerns related to transmission of COVID-19 to dental personnel and students.

On March 13th the Board Education closed all public schools. Available school nurses and dental hygienists were assigned to assist the Department with its pandemic response. School nurses engaged in COVID-19 duties including, staffing the WestHill COVID-19 testing site, conducting health and wellness calls to almost all COVID-19 positive Stamford cases (3,000 persons), made home visits to COVID-19 positive persons when needed, monitored the temperature of all visitors and staff to the Government Center, coordinated a testing site call line for COVID-19 testing appointments (~1,790 calls), referred residents to testing sites, answered general questions from public regarding COVID-19, linked residents to social services, performed wellness check calls to people housed in city isolation/quarantine housing, attended weekly conference calls with CDC and DPH, assisted City Managers with risk assessment for employees, supported First Responders who were on quarantine; distributed thermometers and ensured that meals were served.

The Department of Health since January of 2020 start preparing for the appearance of COVID-19 cases in Stamford. Table 7 below outlines the Department's activities from January until June30, 2020.

### **Table 7. Department of Health COVID-19 Event Timeline**

01/27/20	All Public Safety agency leaders met in City' Emergency Operations Center (EOC) with Stamford Hospital representatives, City Medical Director and the City Emergency Management Director to discuss COVID-19 outbreak and preparedness activities. Staff include Fire Chief, Assistant Fire Chief, Acting Police Chief, Director of Health, 911 Director, EMS Director, EMS Chief, and Assistant Directors of Health.
02/15/20	Department of Health began receiving and responding to ongoing COVID-19 related inquiries.
02/21/20	Community Nursing began conducting travel associated case investigation home visits and follow up.
02/27/20	All Public Safety agency leaders and City of Stamford department leaders met in EOC with Stamford Hospital representatives to discuss COVID-19 outbreak and preparedness activities. Staff include representatives from Nursing, Legal, Human Resources, Mayor's Office, Economic Development, and Board of Education.
02/28/20	Department of Health staff attended first of several meetings with private and parochial schools and religious leaders to discuss anticipated steps and planning.

- 02/28/20 Department of Health began COVID-19 case contact efforts related to neighboring communities.
- 03/03/20 Department of Health staff attended first of several meetings with Board of Education staff leaders and Public Safety leaders to plan for public school communications.
- 03/03/20 Department of Health staff met with daycare providers.
- 03/04/20 Department of Health rolled out of frequently asked question (FAQ) on COVID-19 document
- 03/05/20 Department of Health staff attended first of several meetings with stakeholders including Stamford Hospital staff related to COVID-19. These meetings started weekly, then move to daily.
- 03/05/20 Department of Health staff participate in COVID-19 planning for City employees and the Government Center building.
- 03/06/20 Department of Health released its Continuity Of Operations Plan (COOP) for the City's Human Resources Department.
- 03/06/20 Stakeholder meeting with Department of Health staff – school nurses and dental hygienists
- 03/11/20 Director of Public Safety and Health Director met with President of Board of Representatives to brief on COVID-19 activities.
- 03/12/20 Department of Health staff and Public Safety Officials meet with community health providers to discuss anticipated steps and planning.
- 03/12/20 Department of Health staff and Public Safety Officials meet with community non-profits including homeless shelters to discuss anticipated steps and planning in regards to vulnerable populations.
- 03/12/20 Press Release: First case of Coronavirus identified in Stamford.
- 03/12/20 Department of Health Nurses initiated case contacts, following up on all positive cases with phone calls.
- 03/12/20 Department of Health staff and Public Safety Officials meet with public housing leaders to discuss anticipated steps and planning.
- 03/12/20 Department of Health staff and Public Safety Officials meet with UCONN leaders regarding pandemic planning.
- 03/13/20 Some School Nurses and Dental Hygienists begin reporting to Department of Health for COVID-19 related duties such as fielding general calls.
- 03/17/20 Stamford's MRC teams activated and trained on State of CT COVID-19 guidelines. They assist in EOC, at testing sites, and run large mask give-away events.
- 03/17/20 Health Inspectors assigned to verify food safety status, closure of congregate dining areas and hygiene practices in all City nursing homes, assisted living and day care food service operations / facilities.
- 03/18/20 Department of Health inspectors assigned to monitor food establishments for compliance with Governor's Orders.

- 03/18/20 Department of Health composed guidance document for homeless shelter operations.
- 03/18/20 Department staff set up cots and amenities needed to open isolation/quarantine site at Stamford High School.
- 03/18/20 Department of Health released guidance document for Curbside Pick-up & Meal Delivery.
- 03/23/20 Eight School Nurses attended training at Stamford Hospital in nasopharyngeal COVID-19 specimen collection
- 03/23/20 Office of Public Safety including Department of Health addressed leaders of non-profits regarding at-risk populations; golf course status; volunteers; fiscal committee;
- 03/24/20 Department of Health operated testing site created at WestHill High School inspected and approved by CT Department of Public Health (DPH).
- 03/24/20 Public Safety and Department of Health approached UConn to use dorms for isolating COVID-19 positive patients needing isolation.
- 03/26/20 First Nursing Home positive resident identified. Department of Health Nursing Division started daily contact with the Nursing Home.
- 03/27/20 Stamford High School isolation/quarantine site ready to house citizens.
- 03/27/20 City of Stamford obtained 30 COVID-19 testing kits, additional 50 kits expected later in the week. PPE and testing supplies were in very short supply.
- 03/30/20 Press Release: announced Westhill High School as city-run testing site, COVID-19 testing hotline initiated.
- 03/30/20 Department of Health along with Office of Public Safety addressed homeless sheltering options, website and communications to residents, CERT and MRC team participation.
- 03/31/20 Department of Health Call Center Testing Hotline implemented.
- 03/31/20 Department of Health COVID-19 Test Center opened at Westhill High School for daily COVID-19 testing.
- 04/02/20 Department of Health obtained 253 total testing kits and conducted 28 tests today at Westhill High School.
- 04/02/20 Eight additional School Nurses trained at Stamford Hospital in nasopharyngeal COVID-19 testing.
- 04/03/20 Office of Public Safety and Department of Health assists in establishing policy for City employees and buildings including wearing masks and taking temperatures in lobby.
- 04/04/20 Department of Health Medical Reserve Core (MRC) Volunteers deployed to Murphy's Medical Cummings Park COVID-19 Testing site to facilitate seven day testing.
- 04/06/20 Office of Public Safety and Department of Health assists in resolving first responder policies regarding isolating in hotels, providing food to them.

- 04/06/20 School Nurses began monitoring temperatures in the Stamford Government Center lobby.
- 04/06/20 Department of Health Nursing Division began daily communication with both nursing homes and assisted living facilities to monitor and track cases. Efforts initiated to provide guidance and support to congregate housing facilities and senior living housing.
- 04/13/20 School Nurses provided temperature screenings at Children’s Learning Center for Hospital employee and First Responder’s children
- 04/16/20 Department of Health MRC Volunteers deployed to SGC to assist with packing PPE for Stamford families.
- 04/17/20 Department of Health MRC Volunteers deployed to SGC to assist with packing PPE for Stamford families.
- 04/18/20 Department of Health MRC Volunteers deployed to SGC to assist with packing PPE for Stamford families.
- 04/18/20 Isolation Housing Dorms prepared by Stamford Together Volunteers, Mayor’s Office, and Department of Health.
- 04/20/20 Department of Health MRC Volunteer deployed to the department’s WestHill COVID- testing site.
- 04/20/20 Department of Health opened UCONN Dorms Isolation/Quarantine Site for COVID-19 confirmed or suspected Stamford residents.
- 04/21/20 Department of Health MRC Volunteers deployed to SGC to assist with packing PPE for Stamford families.
- 04/22/20 Department of Health MRC Volunteers deployed to SGC to assist with packing PPE for Stamford families.
- 04/23/20 Department of Health MRC Volunteers deployed to SGC to assist with packing PPE for Stamford families.
- 04/24/20 Department of Health MRC Volunteers deployed to SGC to assist with packing PPE for Stamford families.
- 04/28/20 Department of Health MRC Volunteers deployed to SGC to assist with packing PPE for Stamford families.
- 04/29/20 Department of Health MRC Volunteer deployed to SGC to assist with weekly Health Care Provider PPE assembly and distribution.
- 04/30/20 Department of Health MRC Volunteers deployed to SGC to assist with packing PPE for Stamford families.
- 05/01/20 Department of Health composes document for Retail Best Practice Guidance for outdoor dining.
- 05/04/20 School Nurses and Dental Hygienists began assisting with registration and staffing at pop up test sites with Murphy and Associates and DOCS Urgent Care.
- 05/06/20 Department of Health MRC Volunteers deployed to SGC to assist with weekly Small Business PPE distribution.



05/08/20 Department of Health composes documents for Best Practice Guidance for reopening of farmers markets & food trucks.

05/08/20 Department of Health composes documents for Best Practice Guidance for reopening of hair salons and barber shops.

05/11/20 Director of Health joined newly created “Reopen Stamford” committee and participated in planning.

05/12/20 Department of Health MRC Volunteers deployed to assist with PPE distribution at public drive by.

05/16/20 Department of Health MRC Volunteers deployed to assist with PPE distribution at public drive by.

05/19/20 Department of Health MRC Volunteers deployed to assist with PPE distribution at public drive by.

05/20/20 Department of Health released documents for Best Practice Guidance for reopening of Phase 2 nail salons, hotels, pools and indoor dining.

05/22/20 Three School Nurses attended training in Harford in conjunction with CT DPH and Hartford Healthcare for a “Train the Trainer” program for nasal swab testing.

05/23/20 Department of Health MRC Volunteers deployed to assist with PPE distribution at public drive by.

05/27/20 City of Stamford officials including the Director of Health met with team from McKinsey & Co to assist with reopening strategies.

05/28/20 Department of Health School Nurses began to administer weekly COVID -19 testing to employees.

05/28/20 Department of Health MRC Volunteers deployed to assist with PPE distribution at public drive by.

06/01/20 School Nurses prepared 8,100 KINSA Thermometers with multilingual cleaning instructions for distribution to Stamford Public School Students.

06/04/20 Department of Health MRC Volunteers deployed to assist with PPE distribution at public drive by.

06/05/20 Public Safety officials met with UConn officials to discuss partnership to address contact tracing.

06/13/20 Department of Health MRC Volunteers deployed to assist with PPE distribution at public drive by.

06/15/20 Department of Health closed UCONN Dorms Isolation/Quarantine Site for COVID-19 confirmed or suspected Stamford residents.

06/19/20 Department of Health MRC Volunteers deployed to assist with PPE distribution at public drive by.

06/19/20 Department of Health MRC Volunteer deployed to assist with Contact Tracing.

**Prepared October 19, 2020 by:**

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