

Department of Public Health



City of
Waterbury
Connecticut



Neil M. O'Leary, Mayor
William Quinn, Director of Public Health

2016

Annual Report



Mission Statement

**“Promoting Healthier Families,
Healthier Neighborhoods,
and a Healthier Community”**



Table of Contents

Mission Statement..... i
 Table of Contents 1
 Letter from the Director of Public Health 2-3
 Board of Health Commission..... 4

Directory 5
 Operating Budget..... 6

Environmental Department 7-9
 Workers Compensation Activities and Initiatives 9
 Healthy Homes 10

Emergency Preparedness 11

Community Health Programs
Family Health Services
 Infant Immunization Action Plan Program (IAP) 12
 Women, Infants, and Children (WIC) 13
 Positive Parenting..... 14

HIV/AIDS Prevention and Health Services
 Waterbury..... 15
 Torrington Satellite..... 16
 Health Care & Support Services 17

Public Health Nursing
 School Health 18-19
 Adult Immunization..... 20
 STD Clinic 21
 Tuberculosis Control Program..... 22



Director of Public Health

The Department has achieved much this year in pursuit of our mission of **“Promoting Healthier Families, Healthier Neighborhoods, and a Healthier Community.”** These achievements would not have been possible without the commitment of our staff, our colleagues at City departments and partner agencies in the community, or without the support of the Board of Health and Mayor Neil O’Leary. I thank everyone who has shared in the Department’s work – and achievements.

The Department’s most visible strategy for **Promoting Healthier Families** is the School Nurse Program which serves more than 23,000 school children in 40 public and private schools in Waterbury. Our Community Health Division provides additional targeted services including Infant and Adult Immunizations, Positive Parenting, the Women, Infants and Children (WIC) Program, the HIV/AIDS Prevention Program, HIV/AIDS Health Care & Support Services, Public Health Nursing, the Sexually Transmitted Infection Clinic, and the Tuberculosis Control Program.

The Environmental Health Division provides mandated inspections and enforcement services that **Promote Healthier Neighborhoods**. The areas for inspection include Food Protection, Barber Shops/Cosmetology, Public Swimming Pools, Rooming Houses, Child Day Care Centers, Septic Systems, Housing Inspections, and the Childhood Lead Poisoning Prevention Program. Environmental health focuses on prevention strategies which are largely invisible to the public. The Division’s most visible strategies include the Mayor’s Blight Task Force, and the Waterbury Healthy Homes Program which was awarded new federal funding for lead-hazard repairs in local housing stock.

The Emergency Preparedness program is part of the Department’s strategy to **Promote a Healthier Community**. Preparedness necessitates planning, drilling and readiness for public health emergencies such as Ebola and Zika, weather-related events, man-made disasters, et al. Preparedness plans are based on mobilization of City personnel and community volunteers. Preparedness also requires the ability to communicate across agencies and into the community, for example through the newly-revised Health Department website which now features language buttons to translate online content into Spanish and Albanian.

Surveillance is the foundation of public health and underpins Department functions. Health department-



William Quinn
Director of Public Health

GREATER WATERBURY HEALTH IMPROVEMENT PARTNERSHIP



hospital collaboration is a new and necessary responsibility per the Affordable Care Act. To obtain community health needs data, the Department collaborates closely with healthcare, social services and community leaders active in **The Greater Waterbury Health Improvement Partnership (GWHIP)**. GWHIP is a community collaboration with the Health Department taking a central role as the GWHIP backbone organization. GWHIP was founded to produce the 2013 Community Health Needs Assessment and most recently GWHIP participated in the 2015 DataHaven Connecticut Wellbeing Survey. The GWHIP Partnership uses the data to plan needed health services by means of workgroups.

The Department and the GWHIP Partnership look forward to continued achievement, building upon the past year’s highlights:

- ❖ **CDC Learning Collaborative:** GWHIP was one of only 10 partnerships accepted into CDC-led group for best practices in community health improvement partnerships.
- ❖ **Asthma Workgroup:** The Department was designated by the CT Department of Public Health to serve as the regional leader for an asthma home-visiting program. Our Environmental Division will identify housing-related asthma triggers.



Director of Public Health

❖ **Healthy Lifestyles Workgroup:** Brass City Cooks! was launched at Health Department and has expanded to other community-based sites; the Healthy Corner Store project is underway with the expertise of the University of Connecticut-Urban Planning Department; and the Department is hosting the LiveWell with Diabetes program.



❖ **Access to Care Workgroup:** The GWHIP partners laid the foundation for the creation of a Community Care Team to address unmet needs that cause individuals to over-utilize hospital Emergency Departments.

❖ **Communications Workgroup:** The GWHIP partners will invest together on communications to promote the local community health initiatives.

It is an honor to work with people with the caliber of commitment shown at all levels in Waterbury, from Department staff to elected officials and City administration, health and social service providers, community leaders and residents. We have accomplished much together and will continue to do so.

Sincerely,

William Quinn, MPH
 Director of Public Health
 City of Waterbury

Student Fieldwork

The Department promotes future public health careers by hosting student fieldwork. During the past year the Department has hosted college-level interns, and has worked closely with two key community partners to welcome high-school students as interns as well:

Police Activity League (PAL)/Tomorrow's Leaders: **Danielle Moring** and **Ramona Ramsarran** began working with the Department in summer 2015 and have continued their work since, including after school during the academic year. As Career Academy students interested in health and social service careers, they have already achieved much: Last summer as rising juniors they surveyed clients of the WIC program to explore clients' health information needs. Their findings helped Brass City Harvest to obtain grant funding for the Brass City Cooks! nutrition program.

Now rising seniors, Danielle and Ramona have completed an analysis of BMI data collected from health assessment records by the School Nurses; their data analysis indicates that local Kindergarteners are significantly more overweight/obese than peers elsewhere. This summer, Danielle and Ramona are using their data analysis to create an infographic about childhood obesity in Waterbury. They are joined in their work by **Daiana Lilo**, a rising junior at Career Academy who is interested in a health-related career.



Danielle, Daiana and Ramona reviewing childhood obesity data and draft infographic.

The Global Leadership Institute, a joint program of The Taft School and the Waterbury Public High Schools: Last summer five GLI Scholars worked with the Department and our partner, Brass City Harvest, to explore food as a community health concern. Their work in the summer of 2015 has subsequently inspired Wilby High School to lay the groundwork for a food-nutrition-STEM focused academy.

This summer, three more GLI Scholar, all rising juniors, are working with the Department's Environmental Health Division on a communications project about lead-poisoning prevention. The GLI Scholars are:

- Ben Laufer**, The Taft School
- Emily Persaud**, Crosby High School
- Fuka Reale**, Kennedy High School



Board of Health Commission

The Waterbury Board of Commissioners of Health meets at 4:30pm on the first Thursday of every month. This is a public meeting and citizens are able to address the Board during the public speaking portion of the agenda.

We are fortunate that each commissioner has a specific knowledge and interest in public health issues. This serves as an asset in policy setting as well as a strong commitment to provide the best health practices to the citizens of Waterbury. Commissioner Margaret O'Brien is currently serving as a community member on the Gilmartin School Governance Council. Her involvement on this Council helps to strengthen the bond already established with the Department of Education in keeping the health and safety of our school aged children in our focus.

Our Board is a member of the National Association of Boards of Health as well as the Connecticut Association of Boards of Health. Through these memberships we have strengthened our knowledge of public health issues on national, state and local levels. This in turn helps us in the formation of a strong and healthy board.

The Board of Health in conjunction with the Waterbury Department of Public health continues to strive towards the goal of nail salons and tattoo parlors becoming a part of routine health inspections.

The Board of Health is a strong supporter of the Greater Waterbury Health Improvement Partnership (GWHIP). The Waterbury Department of Public Health serves as the neutral convener that oversees the 4 workgroups that center on the Community Health Needs Assessment. In addition, these workgroups are focused on a continual effort to enhance the wellness and positive results within each group.

The 4 workgroups are:

1. Access to Health Care
2. Mental Health and Substance Abuse
3. Chronic Disease (obesity focus)
4. Tobacco Use (including asthma)

On behalf of the Waterbury Board of Commissioners of Public Health, I am confident that our responsive and aggressive commissioners will continue to assist the community through our services and resolution of public health issues.

Sabato D'Ambrosi
President, Board of Health

WATERBURY BOARD OF HEALTH COMMISSIONERS - 2016

Sam D'Ambrosi, R. PH. - **President**

Kathy Caiazzo, CMRS

Michelle Godin, R.N.

George Brinnig, MD. Ph.D. M.M.M

Patricia Russell, R.N.

Margaret O'Brien, M. Ed.

Anne Phelan, M.S. - **Alderman Liaison**

Tammie R. Jones - **Secretary**



Directory

Administration

William Quinn
Director of Public Health

Patricia Kiesel
Acting Assistant Director of Public Health
(T) 203-574-6780
(F) 203-597-3481

AIDS Prevention (Waterbury)

Samuel Bowens
(T) 203-574-6883
(F) 203-574-8202
Office Hours: Mon-Fri 8:30am-4:50pm

AIDS Prevention & CARE Program (Torrington)

Lynn Hillman
(T) 860-201-3954
(F) 860-482-5350
Office Hours: Mon-Fri 8:00am-4:00pm
Or by appointment as needed

AIDS Health Care & Support

Joyce Boone
(T) 203-574-6994
(F) 203-573-5071
Office Hours: 8:00am-4:30pm

Children's Immunizations

Randy York
(T) 203-346-3907
(F) 203-597-3481
Office Hours: Mon 8:00am-2:00pm
Tues, Wed 8:00am-5:00pm
Thurs 9:00am-5:00pm

Childhood Lead Poisoning Prevention

Richard Lee
(T) 203-573-5077
(F) 203-346-2644
Office Hours: Mon-Fri 8:00am-4:00pm

Emergency Preparedness

John Bayusik
(T) 203-346-3907
(F) 203-597-3481
Office Hours: Tues, Wed, Thurs 7:30-4:30

Environmental Health

Richard Lee
(T) 203-346-3903
(F) 203-346-2644
Office Hours: Mon-Fri 8:30am-4:30pm

Healthy Homes

Francis Ford
(T) 203-573-5072
(F) 203-573-6677
Office Hours: Mon-Fri 8:00am-4:00pm

Policy Development Specialist

Cynthia Vitone
(T) 203-574-6780

Positive Parenting

Janine Altamirano
(T) 203-597-3417
(F) 203-573-5073
Office Hours: Mon-Fri 8:00am-4:00pm

Public Health Nursing

Patricia Kiesel
Luci Moschella
Lois Mulhern
(T) 203-574-6880
(F) 203-597-3481
Office Hours: 8:00am-4:50pm

WIC

Michael Dessalines
(T) 203-574-6785
(F) 203-573-6065
Waterbury Office Hours:
Mon, Wed, Fri: 8:30am-4:00pm
Tue, Thurs: 8:30am-5:30pm

Wolcott: 1st Wed - 9:30am-12:00pm
Watertown: 1st Thurs - 9:30am-12:00pm
Seymour: Mon-Fri - 8:30am-4:00pm
Shelton: 3rd Fri - 9:30am-3:00pm
Naugatuck: 1st and 4th Thurs - 9:30am-3:00pm



Operating Budget

The WHD successfully administered 13 different budgets totaling more than \$7M in local, state and federal funding during FY '16. All grant employees are funded through state and federal dollars, as well as private funding sources. All General Fund employees are hired through the Civil Service process and are strictly funded through the City of Waterbury General Fund.



Operating Budget:.....\$7,178,738

Revenue

Grant Funds

State & Federal\$3,681,539

General Funds\$3,497,199

Expense Allocations

Personnel

General Funds:\$3,379,141

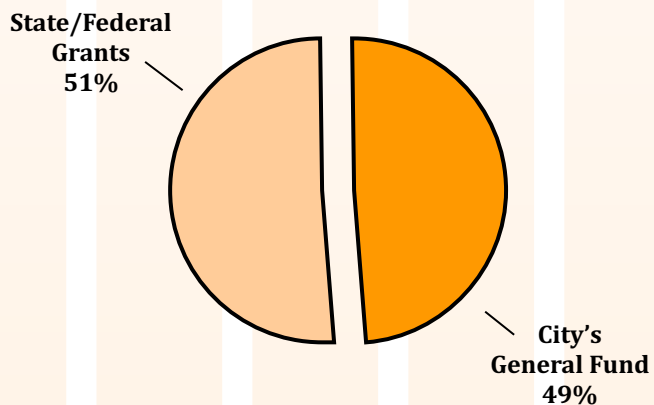
Grant Funds:.....\$2,316,319

Capital

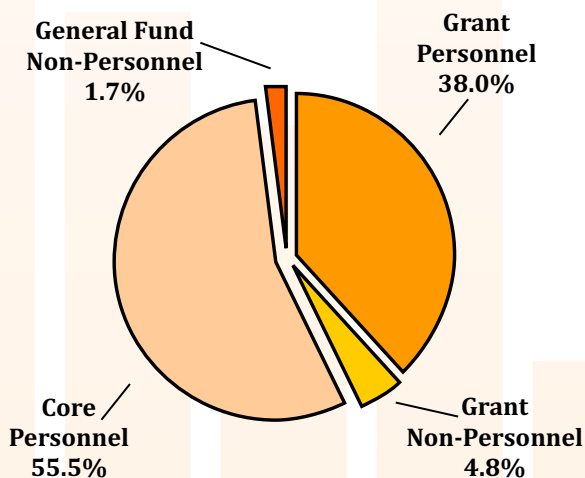
General Funds:\$102,964

Grant Funds:\$295,254

Operating Budget \$7,178,738



Expense Allocations





Environmental Department

Food Protection Program

Food Protection is one of the highest priorities of the Waterbury Department of Public Health.

The Food Inspectors assigned to the Food Protection Program are responsible for the inspection and monitoring of all food service establishments that are located within the City of Waterbury.

In addition, the Food Inspectors conduct food protection activities to ensure the public's safety at events such as festivals, farmers' markets, and community events.

The food protection program is responsible for the review of plans for new and remodeled establishments ensuring compliance with state and local food protection codes. The Food Inspectors are also responsible for identifying, containing, and resolving incidents involving food-borne illnesses and outbreaks.

Food recalls are ordered by Federal and State agencies on a regular basis. Recalls have included items ranging from ground beef to bean sprouts. There have been three recalls, each requiring the Sanitarians to inspect food service establishments throughout the City. Recalled foods have been embargoed by the Health Department and/or voluntarily destroyed by the proprietors.

Investigations relating to food borne illnesses and food borne outbreaks are conducted immediately upon receipt of the complaint or upon the referral to the Environmental Health Division. It is imperative that the Food Inspectors respond immediately in order to limit and contain exposure to affected parties and to be able to conduct the investigation to determine the cause of the food borne illness or food borne outbreak and to ascertain and implement the appropriate corrective measures.

Barber Shops/Cosmetology

The Environmental Health Division inspects and regulates over 133 barbershops and cosmetology establishments located within the City of Waterbury. The Division is continuing to monitoring all establishments in regards to unlicensed barbers working within the City of Waterbury.

Inspection Statistics	
Food Establishments Inspected	2,038
Temporary Events	110
Food Recall Investigation	0
Food-Borne Illnesses/Outbreak Investigation	1
Barbershop/Cosmetology Inspections	122
Pools	22
Pool Inspections	8
Housing Complaints Investigated	869
Blight Complaints Investigated	117
Total Notices of Violation Issued	263

Public Swimming

The Environmental Health Division is responsible for the inspection of all the city's public pools, spas, hot tubs, as well as the swimming area at Lakewood Park. While inspecting the pools the Inspectors use approved testing equipment and instructs pool staff of the proper procedures for maintenance. All water samples that are obtained that require testing beyond on-site capabilities are transported to the State of Connecticut Lab in Rocky Hill. In emergency situations a local lab is used to obtain results in less than four hours.

The Lakewood Park swimming area is used for public recreational swimming on a seasonal basis. The water is monitored twice weekly throughout the swimming season by the Environmental Health Division, to ensure that it meets acceptable sanitary standards. State guidelines form monitoring bathing waters are followed in this on-going program.



Environmental Department

Rooming Houses

The Environmental Health Division regulates and inspects all Rooming Houses within the City of Waterbury. The Health Inspectors insure that compliance standards are maintained at the Rooming Houses. It is imperative that proper sanitation is maintained throughout the facility especially common areas. If fire code violations are observed during the inspection they are referred to the Waterbury Fire Marshall's office.

Child Day Care Centers

There are 28 Child Day Care Centers that service more than six children located in the City of Waterbury that are licensed by the State of Connecticut. All of these facilities are inspected on a yearly basis by the Environmental Health Division to ensure that proper sanitation is maintained throughout the facility.

Septic Systems

The City of Waterbury has over 300 active septic systems. When a septic system fails the Environmental Health Division is responsible for authorizing repairs to an existing system or for requiring the owner to connect to an existing sanitary sewer line if it is available.

Housing

There are over 45,000 housing units within the City of Waterbury. The Health Inspectors receive over 100 complaints monthly and response to each complaint is handled as quickly as possible. The Environmental Health Division received various types of complaints

which include but are not limited to: no hot water, no heat, no water, no utility service, insect/rodent infestation, and broken water and sewage lines. Each complaint is investigated and evaluated to determine the proper disposition in each case. Enforcement of the housing code is enforced by the Health Inspectors, although many of the complaints can be resolved by initial contact with the property owner; there are complaints that require the Inspector to issue a Notice of Violation to the property owner. All complaints remain open until the violations are abated, corrected, or, if necessary, tenants are displaced or relocated due to uninhabitable residence or relocated.

Mayor's Blight Task Force

The Environmental Health Division works in conjunction with the numerous city departments to contain and abate blight within the City. Inspectors attend weekly meetings with all city departments to discuss new cases and progress of existing cases. The Health Department has inspected 144 properties with blight issues.

Childhood Lead Poisoning Prevention Program (CLPPP)

The CLPPP provides lead poisoning prevention services to reduce the risk and prevent lead poisoning for children aged from 6 months through 6 years of age who reside in the City of Waterbury. Overall program services include: community outreach and lead hazard education, blood lead level data tracking, case management for children with elevated blood lead level (EBLL), and relocation to a lead safe home if deemed medically necessary.

Annual Summary of Food Establishment Inspection Report					
Classification	Class I	Class II	Class III	Class IV	Temp Event
# of Establishment	117	200	130	322	N/A
# of Inspection Shall be Conducted	117	400	390	1,288	110
# of Inspection Conducted	128	391	348	1,171	110
Percentage (%)	100%	97%	89%	90%	100%



Environmental Department

CLPPP Outreach Events

Types of Audiences	Number of Events	Number of Individuals Reached
Home Educational Visits	67	300

CLPPP Statistics

Blood Lead Value	Cases
= < 4µg/dll	1,441
>= 5 - 10 µg/dll	155
10 - 19 µg/dll	33
>= 20 µg/dll	9
Cases Closed Due to Decreased BLLs	12

Workers Compensation Activities & Initiatives

Employees placed out of work due to work related injuries and total amount of time loss incurred	2
Work related incidents by type	1 (slip and fall) 1 (needle stick) 1 (motor vehicle) Total - 3
Employees authorized for light duty and placed back to work in a light-duty capacity	1
Safety Committee Meetings held during the 2015/2016 fiscal year	4

Implemented Initiatives to Reduce Exposure & Incidents

- Safety guide
- Badging policy
- Safety kits
- Restricted access policy during non business hours
- Distribute department wide safety messages via mass email -ongoing
- Departmental safety policy

Safety Trainings Held

- Blood Borne Pathogens held yearly
- HAZCOM Training Refresher
- New Accident Reporting
- Carpel Tunnel
- Active Shooter Training

Initiatives for 2015/2016

- Accident Reporting Investigation for Supervisors
- Conduct Building Safety Audit - ongoing
- Completed medical qualification and fit testing to qualify for N-95 respirator
- Expand Safety Committee Membership
- Attend City Executive Safety Committee Meetings
- Expanded safety meetings to individual departmental work groups. Monthly safety meetings are now a requirement of these workgroups
- Participating in Safe Personnel Training Program
- Subscribed to Safety Compliance Alert publication for departmental safety education



Waterbury Healthy Homes Program

The Waterbury Lead and Healthy Homes Program is a federally funded program provided by the Office of Healthy Homes and Lead Hazard Control Program (OHHLHC) through the Department of Housing and Urban Development (HUD) to assist privately owned rental or owner-occupied housing in identifying and controlling lead-based paint hazards. During Fiscal year 2015, Waterbury Healthy Homes received a new grant award \$3,200,000. With this new funding, Waterbury Lead & Healthy Homes proposed to conduct 230 units of lead hazard risk assessment, complete 210 units of lead hazard control, and conduct outreach and education such as skills training workshops for local contractors.



77-79 Plaza Ave



Before Renovation



After Renovation





Emergency Preparedness

As a community the City of Waterbury may experience a variety of public health emergencies. These emergencies can be the result of natural causes such as hurricanes, tornados, and winter snow storms. Public health emergencies can be the result of manmade events such as a terrorist attack, or the result of a Pandemic such as the H1N1 (swine) flu of 2009/10. Worldwide there have been a number of recent natural and made events. All of which resulted in public health emergencies. These events underscore the importance of being prepared.

To help the City of Waterbury prepare for these public health emergencies, the Health Department has developed a number of plans that outline in detail the steps to be taken in responding to these emergencies. Plans focus on specific types of events such as a Pandemic, Anthrax release, or Smallpox to name a few.

Periodically, portions or all of these plans are tested or practiced in as close to real life situations as possible. This provides an opportunity to identify any weakness in the plans and to make needed changes. All of the plans are reviewed yearly to insure they reflect current response objectives and are still relevant.

In April the department participated in a Mass Dispensing exercise with the Torrington Health District. This exercise was a part of the statewide dispensing drill intended to test health department and state Department of Health ability to meet dispensing objectives. The Torrington objective was to measure through put and the ability to meet patient demand with the staff and facilities available. Torrington did meet their objectives. The Waterbury Health Department acted as Safety Officer for this exercise.

The department continues to publish an Emergency preparedness Newsletter twice a year. The Newsletter is intended to keep volunteers informed on Emergency Preparedness activities as well as current preparedness topics. In addition the department continues to meet with community groups to talk about the cities preparedness activities, develop relationships with these groups and talk about volunteering.

Effective July 2016 there will be a new more user friendly Health Department web site as a part of the city web site. The new site presents departmental responsibilities in a less confusing more practical way that will make it easier for users to find what they are looking for. The new site provides links to various CDC sites that can provide detail on a number of health related topics. The new site provides the user with the ability to convert the language from English to either Spanish or Albanian. It should be noted that based on recent usage studies the Health Department site is visited by citizens on a regular basis, more often than originally thought.

In February of this year staff members from the Connecticut Department of Public Health (DPH) and the Center for Disease control (CDC) were at the Waterbury Health Department to conduct a Medical Countermeasures Operational Review. This was a review of the Health Departments Mass Dispensing Plan. As was expected there were some areas where minor additions or improvements could be made. The review was a good opportunity to have the Mass Dispensing Plan looked at with a fresh eye.





Infant Immunization Action Plan Program

It is the goal of the Immunization Action Plan (IAP) Program to establish a strong coordinating presence in the local health department to facilitate access to recommended vaccines and improve immunization coverage rates for Waterbury children.

The IAP Program has improved community-wide immunization coverage rates for Waterbury children, twenty-four months of age by participating in the statewide implementation of the Connecticut Immunization Registry and Tracking System (CIRTS.) Various reports, generated by CIRTS, are used to locate Waterbury children who appear behind on their immunizations. The IAP program is often successful in linking children back to a medical home where immunizations can be updated and continuity of care can be achieved. IAP staff works closely with Waterbury pediatric offices to ensure the timely and accurate reporting of all infant shots to CIRTS. This includes training, troubleshooting, data entry, and utilization of several methods for reminder/recall systems to improve rates.

Connecticut Immunization Registry and Tracking System (CIRTS) – is a statewide computerized registry that maintains immunization records on pre-school age children. CIRTS is an opt-out registry. All children born in Connecticut are automatically enrolled, unless an opt-out form is signed. CIRTS became a statewide registry in 1998. Annual reporting of town-specific “high risk” area immunization coverage rates began in 2002.

Waterbury Immunization Coverage Rates are based on children, enrolled in CIRTS, who reside in the town of Waterbury. The IAP Programs, contracted by the State Department of Public Health Immunization Program, are located in areas at highest risk of low immunization rates. These local areas are made up of mostly local health departments that have a local presence in the community. Each site has an IAP Coordinator whose objective is to increase immunization coverage rates among pre-school age children. In 2015, CIRTS released the coverage rate of CIRTS-enrolled, Waterbury children, born in 2011 who turned 2 years of age in 2013.

84% of those children were fully immunized with age-appropriate vaccines by 24 months of age. Waterbury surpassed the state-wide rate of 79%.

Pediatric health care providers and other health facilities are supplied with free vaccines from the Connecticut Department of Public Health Vaccines for Children (VFC) program. The IAP program is responsible for ensuring that all facilities are given the tools and information needed to properly store, manage and administer the VFC vaccine according to established protocols and standards. The IAP program accomplishes this by conducting site visits/assessments at all area facilities that utilize this free vaccine. Twelve site visits will be completed in 2016, assuring that vaccines are stored in refrigerator and freezer units that are monitored 24-7 with certified calibrated thermometers, as required by the Centers for Disease Control.

The IAP program helps providers stay current with the ever-changing information needed to address the complex issues commonly encountered in vaccination practice. This is accomplished by developing working partnerships and providing frequent educational opportunities for practitioners on all levels. Educational events are conducted throughout the year in community settings, medical settings and social service settings.

Respectfully submitted by

Randy York
Immunization Action Plan Coordinator





Women, Infants and Children (WIC)

The Waterbury WIC Program thrives to be consistent with the mission statement of the Waterbury Health Department that is: "Promoting Healthier Families, Healthier Neighborhood and Healthier Communities".

The program provides participant Centered nutrition education, breastfeeding counseling and promotion in addition to nutritious food benefits to low income households for pregnant, postpartum (breastfeeding and non-breastfeeding), infant and children up to the age of five (5) years old in our communities. The Program's eligibility criteria are: Connecticut residency, income eligibility and being at nutritional risk.

The Program has two permanent offices respectively located at the Waterbury Health and at the Naugatuck Valley Health District. On a monthly basis, the program provides satellite services to participants in Wolcott, Watertown, Shelton and Naugatuck. Participants in those areas would not benefit from the programs' services otherwise due to transportation, child care, work schedule and forth.

The program's major accomplishment during the fiscal year 2015-2016 was the successful implementation of a new EBT/MIS benefit issuance system called eWIC that replaces the voucher benefit issuance system. That transition enables the shopping experiences and the check out at the grocery stores to be more rewarding for both participants and the grocery stores.

On Average, the program has a case load of about 5,880 participants every month. Throughout this fiscal year, the program participants keep on expressing their satisfaction of the program and below are the statements of just a few of them.

Michael Dessalines
WIC Program Coordinator



"WIC has helped my family out big time. I love how they (WIC staff) talked and helped me with nutrition and anything else I have questions about." By Danielle Ryan



"The WIC benefits help my Family purchase nutritious foods that we need daily."
By Aleena Thomas



Positive Parenting

The Positive Parenting Program is designed to meet the health and social needs of pregnant and parenting women in the Greater Waterbury area. This Program strives to improve birth outcomes among its participants by providing comprehensive community based, family oriented and culturally appropriate case management services. A core component of this Program is to raise community awareness regarding the health risks associated with poor birth outcomes through prevention, intervention and health education. Our staff is committed to supporting and empowering women and their families throughout their pregnancy, up to the child's third birthday. Prepared childbirth classes, lactation counseling, home visits and parenting support groups are offered to clients free of charge. Our mission is to assist clients in meeting their goals by focusing on their individual strengths and providing support, education and encouragement.



Melanie and Shaun

I first came to the Positive Parenting Program because a friend was already involved and referred me to her case manager. My first impression of the staff was very warm and supportive. They provided me with good advice about having a healthy pregnancy and helped me get back on track with my life. I always remember my case manager Johnna asking if I was taking my prenatal vitamins. She made me laugh because she asked me at every visit and would make me take them if I forgot. Johnna helped in so many ways, from searching for apartments, jobs, school and was always there to keep me going.

My partner Shaun and I were not together when I first started this Program. When we eventually got back together, he was offered services as well. Shaun now works with Johnnie, the Fatherhood Counselor and we are a stronger couple because he is learning a lot about himself. Shaun and I are in counseling together, working on being good role models for our son. Shaun is happier and more confident since starting this Program.

I've really grown and learned to speak up for myself. Positive Parenting assisted me with enrolling in a CNA training course just after my son was born. I completed this in June and am ready to work in the healthcare field.

Shaun and I also completed a CPR and First Aid class at the Positive Parenting office. We were able to bring the baby with us while we had training.

Shaun and I are working hard every day and see good things happening in our future. This Program is helping us be a healthier and happier family. I want my son to have a better life than what I had growing up. I want my son to be proud of his mommy and daddy.

Thank you Positive Parenting; words cannot describe how thankful we are for all you have done for us.

Home Visits Conducted	887
Average Monthly Caseload	22
Support Groups Held	8



HIV/AIDS Prevention Program

In 1986, the Waterbury Department of Public Health began HIV Preventions Education services throughout the Waterbury area. There are several components with in the AIDS Program.

The Waterbury Department of Public Health HIV Prevention Program offers free anonymous and confidential HIV Outreach, testing and linkage services (OTL). OTL is a collection of activities designed to increase a client’s knowledge of his/hers HIV serostatus, encourage and support risk education, secure referrals for appropriate medical care, preventative measures, as well as partner counseling and referrals services (PCRS).

The Alere Determine HIV Ag/Ab Combo Test (forth generation) is used. All Prevention Program Staff are certified on Alere (Testing/detection of antibodies to HIV ½ in serum, plasma, or whole blood).

The Mobile Health Van conducts offsite HCPI and CTR presentations throughout the greater Waterbury area on a weekly basis.

Prevention OTL Counselor/educators:

- Conduct educational HCPI and CTR throughout the greater Waterbury area on a daily basis.
- Conduct Urine Based Screenings for chlamydia and gonorrhea.
- Conduct Blood draw screenings for syphilis.
- Conduct Hep C screenings.
- Conduct bi-weekly HIV Support Groups for (PLWA) people living with HIV/AIDS.
- Conduct bi-weekly Mpowerment Social Groups for young (MSM) men who have sex with men ages 18-29.

Annual Event Highlights

- HCPI and CTR presentation at Annual City Fest, Library Park, August 15, 2015
- HCPI and CTR presentation at Annual Gay Men's AIDS Awareness Day, September 28, 2015
- HCPI and CTR presentation at Annual Latino World AIDS Day, October 15, 2015
- HCPI and CTR presentation at Annual Behavioral Social Sciences Focus Group, November 20, 2015
- HCPI and CTR Presentation, Black HIV/AIDS Awareness Day- February 5, 2016
- Participated in the AIDS Awareness Day at the Capitol, Hartford, CT. April 19, 2016
- Participated/organized Black MSM Awareness forum, Grace Baptist Church, May 13, 2016
- Participated/organized Waterbury Annual HIV/AIDS Community Walk June 19, 2016, over 150 people attended from the Greater Waterbury community.



Services and Encounters	Clients
Outreach, Testing & Linkage Referral Services	445 HIV tests performed
Outreach and Recruitment Services	16,225 consumers reached
Health Communications & Public Informational Groups	1,130 consumers reached
STD Urine Based Screenings (UBS)	90 tests performed
HIV Support Group for (PLWA) people living with HIV/AIDS	24 groups facilitated
Mpowerment Social Group for (MSM) men who have sex with men	24 groups facilitated
Mobile Health Van Services Community Events	35 conducted
Waterbury Youth Homeless Committee Meetings	8 attended
Waterbury HIV Continuum/Consortium Meetings	12 attended
Connecticut HIV Planning Consortium Meetings	9 attended



HIV/AIDS Prevention Program

Health Care and Support Services Program (HCSS)

The primary goal of the HCSS program is to ensure access to and retention in quality medical care and support services. When people living with HIV remain connected to care, they improve immune function, achieve undetectable viral loads, and significantly reduce the risk of HIV transmission.

To help clients meet their individual goals, our Medical Case Manager (MCM) develops a personalized care plan designed to identify unmet needs that may become barriers to access and retention. The most common obstacles are lack of stable housing, transportation, and food. Our MCM helps clients in a number of ways including the initiation of appropriate referrals for services not provided by this program, coordination of medical appointments, assistance completing applications for medical insurance, health insurance, and social services programs, and in providing advocacy and encouragement in difficult situations.

HIV Prevention

In order to be most effective at decreasing transmission, communities must be educated about HIV/AIDS; how it is transmitted, how it can be prevented and where to turn for current information and education, as well as confidential HIV counseling and testing.

Through its effective outreach program, the Torrington Satellite office HIV Prevention Program has established itself as this resource for the community. Numerous and varied types of outreach sites are chosen by the outreach team in an effort to reach vulnerable, at-risk target populations. Free testing is offered weekly at the Community Soup Kitchen of Torrington and monthly at The Gathering Place. Initiation and maintenance of relationships with other key providers of medical and social services is another important function of the outreach team, as these relationships form the basis of successful referral networks. All of these activities are important to the goal of reducing new HIV transmissions in the community.

Statistics and Notable Activities (July 1, 2015 – June 30, 2016)

- Clients who received MCM services: 36
- Number of new clients (HCSS): 6
- Number of HCSS client services provided: 462
- Number of HIV tests administered: 96
- Number of positive/reactive tests: 1
- New OTL testing site: The Gathering Place, Torrington
- Project: Quality Management Plan Updated for 2016/2017: June 2016
- World AIDS Day Event collaboration with Community Soup Kitchen, December 2015



**Medical Case Manager, Sandra Ryan
Torrington Satellite Office**



**Outreach Educator/Tester, Barbara Ligon
Outreach, Community Soup Kitchen of Torrington**



Health Care And Support Services

The Waterbury Health Care and Support Services Program within the Health Department offer Medical Case Management to individuals living with HIV/AIDS and their families. Our Medical Case Management staff works with consumers and their families to assess their individual needs to reach successful outcomes.

The goal of the Medical Case Manager is to empower individuals to help them discover their inner strength and self-determination. The program revolves around the consumer's needs and strengths.

Individuals living with HIV/AIDS infection are often faced with a multitude of issues that, if not addressed in a timely manner, can result in negative health consequences. Obtaining these services is often difficult for these individuals. A person may receive assistance in securing these critical services through what is commonly referred to as "case management."

Waterbury Health Care and Support Services

Our services include but are not limited to:

Provider Ryan White Part B

- Client Advocacy
- Assistance with receiving health care
- Assistance with basic needs such as food, shelter and transportation
- Support group referrals
- Assistance with financial entitlements and emergency financial assistance
- Assistance with health insurance premiums and co-pays (must qualify)
- Assistance clients with connecting to legal services
- Consumers are invited to support groups on a bi-weekly basis
- Connecting the consumers to Primary and Specialty Care
- Medical Transportation Services
- Referrals to mental health and substance abuse
- Referrals to dental services and nutritional services

Client Encounters	673
Emergency Financial Assistance	96
Medical Transportation Services	49



**Medical Case Manager
Abigail Torres**





School Health

The Waterbury Public Health Department in conjunction with the Board of Education provides nursing services to the parochial, private and public schools within the City of Waterbury. The Nursing division in the WPHD consists of three nursing supervisors, a school medical advisor, school nurses, public health aides, an audiometrist and clerical personnel.

The School Health Program provides daily health services to approximately 23,000 students within the education laws/regulations of the state of Connecticut and the policy/procedures of the City of Waterbury. School Nursing services are provided to improve student health and safety and to help reduce absenteeism.

Our goal is to be able to provide:

- an RN at every school when possible
- to administer immediate and emergent first aid
- to educate students about wellness
- To be able to support those students who require daily medications by administering it to them.

To perform daily medical procedures such as catherizations, tracheotomy care, nebulizer treatments, blood glucose checks and gastrointestinal tube feedings by providing professional nursing care.

School Health Statistics

911 calls initiated	122
Medications Given	51,234
Illness First Aid Visits	197,054
Returned to Class	185,767
Special Procedures	25,623
Lice Checks	5,953

The Waterbury Department of Public Health and the Intake Center have had another successful year working together to keep our city school children immunized. The Waterbury Department of Public Health held 5 additional clinics in August and September to accommodate more students, to meet immunization requirements, so that they could enter school on time in September 2015. The clinics are held every Monday from 8-4 by appointment. To make an appointment call 203-574-6780 and ask for the school children's immunization clinic.

School Children Immunization Statistics

Lois Mulhern RN BSN NCSN

Students immunized	557
Immunizations Given	1,310

FROM THE DESK OF THE SCHOOL MEDICAL ADVISOR

I have been a member of the school health committee since its inception. As school medical advisor I look forward to committee meetings on a bi-monthly schedule where important topics related to school and health can be discussed. The committee was conceptualized as having the key members of both departments come together to bring concerns to the table, solutions brainstormed and plans drawn up to resolve the problems. This year our discussions included topics such as glucagon being administered by school personnel volunteers in the absence of the school nurse, field trips timing and medical coverage, and naloxone available in the high schools in case of an opioid overdose.

A medical advisor's main job is to be available to the school nurses and their supervisors when they have medical concerns for a student. I have tried to be available to team with the nurses to help students in medication administration, medical needs, mental and physical issues that may impact education and to develop care plans that are least restrictive so our students can be challenged, persist, and accomplish their educational goals.

Vision screening conducted by the volunteers from the Lions Club Kidsight Program on our younger students has been very successful. There are now plans to expand the vision screening to include the upper grades.

Waterbury Public Schools in partnership with Select Physical Therapy, hired our first athletic trainer about a year ago to take care of our student athletes in the four high schools. The trainer and I discussed, planned, and developed standing orders that the athletic trainers will use in their care of our students. A second athletic trainer has hired in the spring and a third by this fall.

This year was a good year with the start of a couple of new programs that are improving the health and safety our children. My one wish for next year would be for greater attendance at the school health meeting. Near the end of this school year there were questions about whether or not our meeting was worth continuing. Over the years I have seen the school health committee struggle through many issues that concerned both the Departments of Education and Health; some concerns being:

- Conformity between schools
- The responsible party for giving medications in school and at school sponsored events
- Coverage for every school with a nurse
- Training of school personnel in administration of medication and in screening for medical conditions
- Absenteeism
- Special Education students' care, least restricted environments and bussing
- Nutrition and allergies in the lunchroom
- The mental and physical health of students and personnel in a disaster
- Abuse both physical and sexual in and outside of the school grounds

Thinking back, I hope the committee will continue to address important issues when they arise and remain an important part of the way the Education and Health Departments solve problems together.

Dr. Michael Rokosky
School Medical Advisor



School Health

Conservation of Hearing Program - 2015-2016 School Year

Linda Egan, Audiometrist

SCHOOL	# Students Tested	# Absent/ # Refused	# Under Care	# Brought U/C Post 1st Screening	#Retested	# Referred	# Brought U/C Post Referral
Bucks Hill	297	0A/1PR	7	0	12	7	2
Bunker Hill	328	0	3	0	13	5	0
Brass City	77	0	3	0	3	1	0
Carrington	173	0A/1PR	1	0	4	0	0
Chase	469	0A/1PR	9	4	25	12	6
Driggs	289	4A	3	4	5	2	1
Duggan	180	0A/2PR	4	1	12	5	0
Generali	337	0	9	0	9	4	2
Gilmartin	159	1A/1PR	2	0	6	1	0
Hopeville	304	0	4	2	22	8	3
Kingsbury	305	0	6	1	9	3	1
Reed	168	0	2	0	9	4	1
Regan	156	0A/1PR	2	0	6	3	2
Rotella	364	0	0	1	11	5	2
Sprague	0	N/A	N/A	N/A	N/A	N/A	N/A
Tinker	0	N/A	N/A	N/A	2	1	0
Walsh	0	N/A	N/A	N/A	N/A	N/A	N/A
Washington	0	N/A	N/A	N/A	N/A	N/A	N/A
W. Cross	0	N/A	N/A	N/A	N/A	N/A	N/A
Wilson	0	N/A	N/A	N/A	N/A	N/A	N/A
Alpha Omega	12	0	0	0	0	0	0
B. Sacrament	62	0A/1PR	3	1	2	0	0
Mt. Carmel	82	1	0	0	0	0	0
St. Mary	80	0	0	0	2	1	0
SSPP	62	0	2	0	0	0	0
CCS	81	0	2	0	3	0	0
Yeshiva	168	0	3	0	2	2	1
Wallace	0	N/A	N/A	0	1	1	1
West Side	0	N/A	N/A	0	2	2	1
TOTALS:	4,153	6A/8R	65	14	160	67	23
		#Absent: 6 #Refused: 8 8:Parental 0:Student	1.6% Under Care Prior to Testing	9% of Retested Received Medical Care Post 1st Test	3.9% Retested	42% Students Failed the Retest	34% of Referrals Brought Under Care

* Schools serviced in May or June



Adult Immunization Clinic

The Adult Immunization Clinic continues to provide services to Waterbury residents and residents from the surrounding towns who are 18 years or older. The number of Tdap (Tetanus, Diphtheria and acellular Pertussis) vaccinations administered has slightly increased. The State provides this vaccine through the “Cocoon Program” which encourages all persons who have close contact with infants to be vaccinated for pertussis. This is the only vaccine provided by the State at a reduced cost.

All other vaccines are now purchased privately which has increased the cost of vaccine administration substantially. There is a slight increase in the number of vaccines administered through this clinic.

We will continue to offer and improve the immunization status of adults through our adult immunization clinic services.

Vaccines Provided	Total # Given 2015-2016
Hepatitis B	16
MMR	6
Varicella	11
Menactra	1
Tdap State Provided	10
Tdap	4
PPD	5
Total Patients Seen	47
Total Vaccines Administered	54

Adult Immunization Clinic - Fee Schedule

Vaccine	Disease	Cost
MMR	Measles, Mumps & Rubella (Combination Shot)	\$80.00
VAR	Varicella (Chickenpox)	\$125.00
Tdap	Tetanus/Diphtheria/Acellular Pertussis (Combination Shot)	\$70.00
Tdap - COCOON (for Special Group)	Tetanus/Diphtheria/Acellular Pertussis (Combination Shot) (for Household Contacts And Caregivers Of Infants Aged Less Than 12 Months)	\$20.00
PPD	Tuberculosis Skin Test	\$20.00
HEP-B	Hepatitis - B (Series Of 3- Shots, Spaced Over a Specific Period Of Time)	\$50.00/each shot (\$150 series)
Menningococcal	Meningitis	\$125.00



STD Clinic

The Waterbury Health Department - STD Clinic (Sexually Transmitted Disease) continues to provide STD testing and treatment to Waterbury residents and residents from surrounding towns.

In reviewing the clinic activities, we experienced a decrease in clinic attendance which may be attributed to an increase in access to health care insurance. Full examinations are being performed on all clinic patients; temporarily suspending express examinations.

Vaccine administration has decreased by 56.7% for the hepatitis AB vaccine and 60% for the human papilloma vaccine due to the limits now placed on us to offer the vaccine to only uninsured patients. Our clinic positivity rates have increased for both gonorrhea by 62.5% and chlamydia by 41%. Our surveillance reports for the City of Waterbury have also increased by 55% for gonorrhea and 36% for chlamydia cases. Syphilis has also increased in all stages of the infection within the City of Waterbury.

We have increased our efforts for partner treatment by providing education and stressing the need for partner examination and treatment offered through our Extended Partner Therapy provision.

We continue to provide St. Mary's medical residents and physician assistant students with a clinical experience within the STD Clinic.

Our goal to decrease the incidence of Sexually Transmitted Disease will continue to be our major focus for clinic services and to provide STD information and education to promote prevention of STD's.

STI Clinic Activity Report

STI clinics held	90
Patients seen within the STI clinic	328
Patients deferred	17
Hepatitis vaccines administered	29
HPV (Gardasil) vaccines administered	20
Cases of gonorrhea diagnosed	26
Cases of chlamydia diagnosed	41
Late latent syphilis cases treated	7
HIV tests performed	228
HIV cases diagnosed	1
Genital herpes cases	2
New cases of HPV	6
Follow-up cases of HPV seen	5
Cases of Vaginitis diagnosed	25
Full male examinations	138
Express male examinations	80
Full female examinations	55
Express female examinations	22

STI Surveillance for the City of Waterbury

Sexually Transmitted Infections	
Gonorrhea Cases	234
Chlamydia Cases	857
Syphilis	
Primary cases of syphilis seen	3
Secondary cases of syphilis seen	4
Early latent cases of syphilis seen	5
Late latent syphilis cases treated	8



Tuberculosis Control Program

Patricia Kiesel, BSN, RN
Program Coordinator

The Tuberculosis Program in association with the St. Mary's Hospital Pulmonary Department, Dr. Beri and Dr. Zhang, continues to provide medical services for the care and follow up of persons with active T.B. Disease and Latent T.B. Infection within the Greater Waterbury area. Clinic services are provided twice monthly by appointment only. Patients are monitored on a monthly basis until the completion of their therapy.

The State of Connecticut had seventy cases of Tuberculosis (TB) reported in 2015, a 17% increase from 2014 (60 cases). Forty-seven cases (67%) were pulmonary, while twenty-three cases (33%) were extra-pulmonary. Two (3%) cases met the criteria for multi-drug resistance (MDR-TB).

Fifty-seven (81 %) of the Connecticut TB cases reported in 2015 were among persons born outside the United States or Puerto Rico. Foreign-born persons came from 23 different nations. Countries with 5 or more cases included India, Philippines and Ecuador.

Connecticut cases were reported from 29 different towns. There were 4 towns reporting 5 or more cases. The City of Waterbury remains within the 1-4 cases per 100,000 population category.

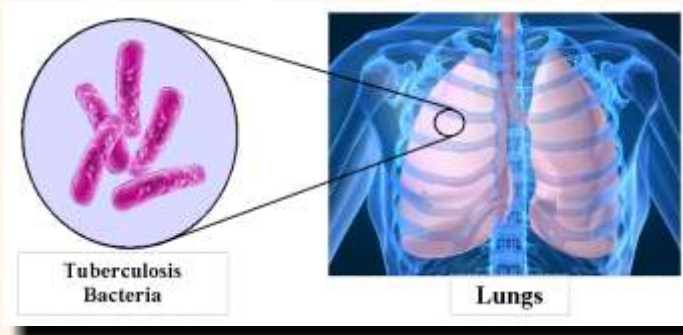
Program Highlights

- Administration of P.P.D. skin tests to 339 clients.
- Latent Tuberculosis Infection evaluation and follow up provided to 172 client encounters.
- Tuberculosis Disease evaluation and follow up provided to 17 client encounters.
- Chest Clinic services provided twice per month, including medical, laboratory, radiology, nursing and pharmacological services.
- Community partnership with the Wellmore Inc. and other area providers to assist with staff and client screening, provide education and to assist with risk assessment reports.

5 Facts about T.B.

- TB is contagious and spreads through the air; if not treated, each person with active TB infects on average 10 to 15 people each year.
- 2 billion people — one third of the world's population — are infected with TB bacilli, the microbes that cause TB.
- TB is a worldwide pandemic; though the highest rates per capita are in Africa (29% of all TB cases), half of all new cases are in 6 Asian countries — Bangladesh, China, India, Indonesia, Pakistan and the Philippines.
- 1 in 10 people infected with TB bacilli will become sick with active TB in their lifetime.
- People with HIV are at a much greater risk of TB infection.

World Health Organization





Notes

