

TOWNSHIP OF LAWRENCE



HEALTH DEPARTMENT
2207 LAWRENCE ROAD
LAWRENCE TOWNSHIP, NEW JERSEY 08648
(609) 844-7089

Lawrence Township Health Department 2023 Budget Presentation Data

Presented to Mayor and Council February 6, 2023

By Keith Levine Health Officer



ANNUAL STAFFING SUMMARY

The LHD will provide this data once (LHD-level data).

Question & Definition	
Number of unduplicated individuals employed by the LHD in 1 this reporting year:	
1a LHD employees	8
1b Contract staff	2
1c Volunteers and other unpaid service providers Number of unduplicated contract organizations employed by	0
2 the LHD in this reporting year. Number of hours in the LHD's standard, full-time workweek in this reporting year (e.g., 40 hour work-week, 35 hour work-	4
3 week, etc.).	35
3a Comments and other information. Estimated number of full-time equivalents (FTEs) providing one or more services on behalf of the LHD in this reporting 4 year:	
4a FTEs of LHD employees	8
4b FTEs of contract staff	0
4c FTEs of volunteers and other unpaid service providers FTEs of contract organization staff assigned to the LHD (if known)	0
	Unable to accurately account for FTEs from contract organizations.



ONSITE WASTEWATER DISPOSAL SYSTEM COMPLIANCE

The LHD will complete this form for each individual town to which the LHD provided this service (Municipal-level data). This form replaces the current Annual Onsite Wastewater Disposal System Report that LHDs submit to NJDEP.

									No series			100		M W. All
	Avertier & Policities	41.00												
,	Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
th	umber of system construction permits issued by the LHD in his municipality in this reporting year that provide final uthorization to proceed with:													
1a	New system installation	0	0	0	0	0	0	0	1	0	0	0	0	1
1b	Existing system repair	1	0	0	1	0	2	0	0	1	2	1	1	9
1c	Existing system alteration (without expansion)	0	0	2	0	0	1	1	1	0	0	0	1	6
1d	Existing system alteration (with expansion)	0	0	0	0	0	0	0	1	0	0	0	2	3
th	umber of system construction permits issued by the LHD in his municipality in this reporting year for installation, repair, r alteration of advanced wastewater pretreatment systems.	0	0	2	1	0	1	2	1	0	0	0	2	9
th	umber of system construction permits issued by the LHD in his municipality in this reporting year for installation, repair, r alteration of commercial facility systems.	0	0	0	0	0	0	0	0	0	0	0	0	0
100	umber of systems in this municipality as of Dec. 31 of this													
D p	eporting year. oes the LHD and/or other governmental representative erform required system construction inspections in this nunicipality?			equired repres			ruction	inspec	tions a	re perfo	rmed b	y the L	HD and/	0 or other
5a	If (1) or (2), list which types of system construction inspections the LHD and/or other governmental representatives perform in this municipality:	bed bo	ttom, t	op of sa	ınd, lat	erals, g	rading,	tank ir	ıstallati	on, pun	ıp test			
5b	If (2) or (3), list which types of system construction inspections may be performed by third-party certifiers in this municipality:	no thir	d-party	inspec	tions									
	umber of unduplicated noncompliant systems identified by ne LHD in this municipality in this reporting year.	0	0	0	0	0	0	0	0	0	0	0	0	o
	umber of realty transfer system inspection reports reviewed y the LHD in this municipality in this reporting year.	1	3	6	1	6	2	0	2	2	1	1	4	29
L	umber of systems identified as noncompliant as a result of HD review of realty transfer system inspection reports in this nunicipality in this reporting year.	1	2	2	0	4	1	0	2	1	1	0	3	17
9 th N	id the LHD have a septic management program in place in his municipality as of Dec. 31 of this reporting year? umber of septic management program inspection reports	No												
10 y	eviewed by the LHD in this municipality in this reporting	0	0	0	0	0	0	0	0	0	0	0	0	0
	umber of system investigations conducted by the LHD in this	U	U	U	U	U	U	U	U	U	U	U	U	
	nunicipality in this reporting year.	0	0	0	0	0	0	0	0	0	0	0	0	0
	re there any suspected/potential critical areas in this nunicipality that the LHD has not yet reported to NJDEP?	0 No	0	0	0	0	0	0	0	0	0	0	0	0
13a	If yes to question 13, please provide a brief description of the location of each suspected/potential critical area.	[Enter	Respor	ıse Here	e]									
14a	Septic System Installation Inspections	5	8	4	1	4	3	3	12	7	6	4	2	59
14b	Septic System Repair Inspections	0	3	0	1	4	1	0	0	0	2	2	1	14
14c	Soil Permeabilty Tests Witnessed	0	0	1	2	3	4	0	4	2	1	0	1	18
14d	Soil Profile Logs Witnessed	0	0	3	3	3	10	0	6	3	2	0	3	33
14e	Septic Plan Reviews	0	3	3	0	0	5	0	2	0	2	3	1	19
														MICHIGANIA CO



POTABLE WELLS AND DRINKING WATER COMPLIANCE

The LHD has the **option** of completing this form once (providing LHD-level data) or completing this form for each individual town to which the LHD provided this service (Municipal-level data).

Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
Did the LHD collect potable well water samples in this service 1 area in this reporting year?	No												
Did the LHD analyze potable well water samples in this service 2 area in this reporting year?	No												
Number of potable well inspections conducted by the LHD in 3 this service area in this reporting year.	0	0	0	0	0	0	0	0	0	0	1	0	1
Number of unduplicated potable wells inspected by the LHD in 4 this service area in this reporting year.	0	0	0	0	0	0	0	0	0	0	1	0	1
Number of potable well certificates of compliance issued by 5 the LHD in this service area in this reporting year.	0	0	0	0	0	0	0	0	0	0	0	0	0
Number of potable well investigations conducted by the LHD in 6 this service area in this reporting year. Number of potable well investigations where the LHD determined the well water to be hazardous to human	0	1	1	0	1	0	0	0	1	1	0	2	7
7 health. (primary or secondary contaminants) 7a Wells with primary contaminants (including coliform)	0	0	0	0	0	0 0	0	0	0	0	0	0	0
7b Wells with coliform contamination	0	0	0	0	0	0	0	0	0	0	0	0	o
Number of public water system complaints received by the 8 LHD in this service area in this reporting year.	0	0	0	0	0	0	0	0	0	0	0	0	0
9 Private Well Installations Witnessed	1	1	0	0	0	0	0	0	0	1	1	0	4
10 Private Well Abandonments Witnessed	2	2	0	0	0	0	0	0	0	0	0	0	4



RECREATIONAL BATHING FACILITIES

Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	ТОТА
Number of licensed public recreational bathing facilities													
1 operating in this service area in this reporting year:								935					Name and Address of the Owner, where
Year-round facilities													9
Seasonal facilities				8775 W.		B/A000000							21
Number of public recreational bathing features of each type 2 operating in this service area in this reporting year:													
Swimming/wading pool						0,000,000							37
Hot tub/spa													0
Spray park													0
Aquatic recreation facility													0
Bathing beach - Bay/ocean													0
Bathing beach - River													0
Bathing beach – Lake													0
Number of pre-operational inspections of public recreational													
bathing facilities conducted by the LHD in this service area in													
3 this reporting year:													
Year-round facilities	0	0	0	0	0	0	0	0	0	0	0		9
Seasonal facilities	0	0	0	0	0	0	0	0	0	0	0		21
Number of routine inspections of public recreational bathing													
facilities conducted by the LHD in this service area in this 4 reporting year:											0		
Year-round facilities	0	0	0	0	1	0	0	1	0	0	0		9
Seasonal facilities	0	0	0	0	0	0	0	0	0	0	0		2
Number of routine re-inspections of public recreational bathing			THE REAL PROPERTY.		and Real	HUNDE	and etc.		and a second	U	Ü		NECOT -
facilities conducted by the LHD in this service area in this													
5 reporting year:					A SECTION	BUAN	Coll Sun						
Year-round facilities	0	0	0	0	0	0	0	0	0	0	0		9
Seasonal facilities	0	0	0	0	0	0	0	0	0	0	0		21
Number of non-routine emergency & complaint-related inspections of public recreational bathing facilities conducted 6 by the LHD in this service area in this reporting year:													
Year-round facilities	0	0	0	0		0	0	0	0		0		0
Seasonal facilities	0	0	0	0	0	0	0	0	0	0	0		0
Number of public recreational bathing features closed by the	1000000	U	U	U	Ů.	U			U	U	U		
7 LHD in this service area in this reporting year:													
Swimming/wading pool	0	0	0	0	0	0	0	0	0	0	0		0
Hot tub/spa	0	0	0	0	0	0	0	0	0	0	0		0
Spray park	0	0	0	0	0	0	0	0	0	0	0		0
Aquatic recreation facility	0	0	0	0	0	0	0	0	0	0	0		0
Bathing beach-Bay/ocean	0	0	0	0	0	0	0	0	0	0	0		0
Bathing beach-River	0	0	0	0	0	0	0	0	0	0	0		0
Bathing beach-Lake	0	0	0	0	0	0	0	0	0	0	0		0
Number of public recreational bathing facilities closed by the 8 LHD in this service area in this reporting year:													
Year-round facilities	0	0	0	0	0	0		0	0	0	0		
Seasonal facilities	0	0	0	0	0	0	0	0	0	0	0		0
Number of CCMP sites in this service area in this reporting	U	U	U	U	U	U	U	U	U	U	0		0
9 year.	0	0	0	0	0	0	0	0	0	0	0		0
Number of sanitary surveys conducted by the LHD in this													
0 service area in this reporting year:	ELECTRICATED .		_	C							_		
a Bathing beach-Bay/ocean	0	0	0	0	0	0	0	0	0	0	0		0
b Bathing beach-River	0	0	0	0	0	0	0	0	0	0	0		0
c Bathing beach-Lake	0	0	0	0	0	0	0	0	0	0	0		0



YOUTH CAMPS

The LHD has the **option** of completing this form once (providing LHD-level data) or completing this form for each individual town to which the LHD provided this service (Municipal-level data).

Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
Number of youth camps operating in this service area in this 1 reporting year. Number of pre-operational inspections of youth camp facilities conducted by the LHD in this service area in this reporting													0
2 year. Number of routine inspections of summer youth camp facilities conducted by the LHD in this service area in this reporting	0	0	0	0	0	5	4	0	1	0	0		10
3 year. Number of routine re-inspections of youth camp facilities conducted by the LHD in this service area in this reporting	0	0	0	0	0	0	0	0	0	0	0		0
4 year. Number of non-routine emergency & complaint-related inspections of youth camp facilities conducted by the LHD in	0	0	0	0	0	0	0	0	0	0	0		0
5 this service area in this reporting year. Number of youth camp serious injuries reported to the NJDOH	0	0	0	0	0	0	0	0	0	0	0		0
6 in this service area in this reporting year. Number of youth camp facilities in this service area in this reporting year on which the LHD had to take one or more	0	0	0	0	0	0	0	0	0	0	0		0
7 enforcement actions.	0	0	0	0	0	0	0	0	0	0	0		0



PERMITS/LICENSES ISSUED													
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
Retail Food Establishment Licenses	0	0	0	,	2	0	0	1	3	174	34	75	290
Netall Food Establishment Licenses Vending Machine Licenses	0	0	0	1 0	2	0	0	0	0	1/4	7	1	25
Carlot and the second s	2	2	2	4	8	2	0	2	1	12	4	3	42
Mobile Units/Temporary/Agricultural Licenses Food Establishments - Plan Reviews	2	2	2	4	8	2	U	2	1	12	4	3	0
a. Less than 1,000 square feet	0	1	1	0	0	0	0	0	0	1		0	4
b. 1,000-5,000 square feet	0	0	2	0	0	0			0	0	1	1	6
	0	300					2	1				177	
c. More than 5,000 square feet 5. Body Art Establishment Licenses	0	0	0	0	0	0	0	0	0	0	0	0	0
1971 1971 1971 1971 1971 1971 1971 1971	0	2	1	0	0	0	0	1	0	0	0	0	4
6. Public Swimming Pool Licenses	0	0	6	10	9	3	0	0	1	0	0	0	30
7. Septic System Discharge Permits	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Septic Tank Abandonment Permits	0	0	0	1	1	0	0	1	0	0	0	0	3
Construction/Alteration/Minor Repair of Septic Systems		200				_		2000				25	0
a. Applications	5	1	1	2	5	5	1	1	1	2	1	1	26
b. Permits	5	1	2	2	5	4	1	2	1	2	1	1	27
10. Noise Variance Permits	0	0	0	0	0	0	0	0	0	0	0	0	0
11. Well Installation Permits	0	0	1	0	0	0	0	0	0	0	0	0	1
12. Well Abandonment Permits	1	0	1	1	2	0	0	0	0	0	0	0	5
13. Radon Kits	0	2	3	2	2	0	0	1	0	1	1	0	12
14. Vital Statistics													0
 a. Marriage/Re-Marriage Licenses 	9	11	6	13	12	18	14	13	13	12	7	10	138
 b. Civil Union/Re-Affirmation Licenses 	0	0	0	0	0	0	0	0	0	0	0	0	0
 c. Domestic Partnership Registration 	0	0	0	0	0	0	0	0	0	0	0	0	0
d. Burial/Transit Permits	0	0	0	0	0	0	0	0	0	0	0	0	0
 e. Correction to a Vital Record 	0	1	0	0	0	1	0	0	0	0	0	0	2
 f. Certified Copies of Death Certificates 	0	5	6	2	1	1	0	О	1	3	0	0	19
g. Certified Copies of Birth Certificates	0	2	0	7	0	0	0	0	0	0	0	0	9
 h. Certified Copies of Marriage Certificates 	12	7	21	13	20	8	21	29	10	31	14	8	194
 Certified Copies of Civil Union Certificates 	0	0	0	0	0	0	0	0	0	0	0	0	0
j. Certified Copies of Domestic Partnership Certificates	0	0	4	0	0	0	0	0	0	0	0	0	4



BODY ART FACILITIES

The LHD has the **option** of completing this form once (providing LHD-level data) or completing this form for each individual town to which the LHD provided this service (Municipal-level data).

Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
Number of licensed body art establishments operating in this 1 service area in this reporting year. Number of pre-operational inspections of body art facilities conducted by the LHD in this service area in this reporting													3
year. Number of routine inspections of licensed body art facilities that were conducted by the LHD in this service area in this													O
3 reporting year. Number of routine re-inspections of licensed body art facilities that were conducted by the LHD in this service area in this 4 reporting year.													3
Number of non-routine emergency & complaint-related inspections of body art facilities that were conducted by the 5 LHD in this service area in this reporting year.													0
Number of unlicensed body art operations that were identified 6 by the LHD in this service area in this reporting year.													o
Number of body art related infections/injuries reported to the 7 LHD in this service area in this reporting.													o



INDIVIDUAL CLINICAL SERVICES

15b Hepatitis B															
1 this service area in this reporting year. When the form the LVD in this service area in this Particular of the LVD in this service area in this Particular of the LVD in this service area in this Particular of the LVD in this service area in this Particular of the LVD in this service area in this Particular of the LVD in this service area in this Particular of the LVD in this Service area in this Particular of the LVD in this Service area in the Particular of the LVD in this Service area in this Particular of		Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
Mumber of unduplicated individuals whe received func-based modical services from the LID in this service area in this service area in this service area in the reporting year. It marber of none-based nursing visits provided by the LID in 3 this service area in the reporting year. It marber of or none-based nursing visits provided by the LID in 3 this service area in the reporting year. It marber of or none-based medical visits who received frame-based nursing visits provided by the LID in this service area in this reporting year. It may be a compared to the control of the results of intereral in this service area in this reporting year. Number of office area in this reporting year. It was not a control of the results of intereral in this service area in this reporting year. It was not a control of the results of intereral in this service area in this reporting year. It was not a control of the results of intereral in this service area in this reporting year. It was not a control of the results of intereral in this service area in this reporting year. It was not a control of the results of intereral in this service area in this reporting year. It was not a control of the results of intereral in this service area in this reporting year. It was not a control of the results of intereral in this service area in this reporting year. It was not a control of the results of the reporting year. It was not a control of the results of the LID in this service area in this reporting year. It was not a control of the reporting year. It was not a control of the results of the LID in this service area in this reporting year. It was not a control of the reporting year. It was not a control of the reporting year. It was not a control of the reporting year. It was not a control of the reporting year. It was not a control of the LID in this service area in this reporting year. It was not a control of the LID in this service area in the reporting year. It was not a control of the LID in this service area in thi															
Member of nome-based nursing visits provided by the LHD in 18 19 19 19 10 10 10 10 10	1	The state of the s	4	4	5	4	4	7	3	3	1	4	1		40
Number of nome-based nursing visits provided by the LHD in 3 this service area in this reporting vera. A reporting vera. B reporting vera. S re	2	medical services from the LHD in this service area in this	58	19	47	28	17	19	12	9	5	118	3		335
Number of unduplicated individuals who received home-based nursing services from the LLD in this service area in t	,		6			0		0		0	0	24			
A reporting year. Number of clinic-based medical visits and home-based nursing visits that resulted in referral in this service area in this reporting year. Number of clinichange Q-1 summunations administered to children age Q-1 summunations administered to children age Q-1 summunate by the LHD in this service area in this reporting year. Number of children age Q-1 summunate by the LHD in this service area in this reporting year. Number of school-age immunations administered by the RHD in this service area in this reporting year. Number of school-age immunations administered by the RHD in this service area in this reporting year. Number of school-age immunations administered by the RHD in this service area in this reporting year. Number of school-age immunations administered by the RHD in this service area in this reporting year. Number of school-age immunations administered by the RHD in this service area in this reporting year. Number of school-age immunations administered by the LHD in this service area in this reporting year. Number of school-age this reporting year. Number of sch	,	Number of unduplicated individuals who received home-based	0	1	1	U	1	U	1	U	U	24			34
Security or part Security or Security	4	reporting year. Number of clinic-based medical visits and home-based nursing	6	1	1	0	1	0	1	0	0	24			34
Service area in this reporting year.	5	reporting year.	3	9	4	0	3	1	1	0	2	3	2		28
7. The LIPO in this service area in this reporting year. Aumber of colinerina ge 0-4 immunized by the LIPO in this service area in this reporting year. Aumber of school-age children immunized by the LIPO in the service area in this reporting year. Aumber of school-age children immunized by the LIPO in the service area in this reporting year. Number of school-age children immunized by the LIPO in the service area in this reporting year. Number of dead thi immunizations administered by the LIPO in this service area in this reporting year. Number of dead adult immunizations administered by the LIPO in this service area in this reporting year. 12 In this service area in this reporting year. Number of dead adult immunizations administered by the LIPO in this service area in this reporting year. Number of dear adult immunizations administered by the LIPO in this service area in this reporting year. Number of dear adult immunizations administered by the LIPO in this service area in this reporting year. Number of dear adult immunizations administered by the LIPO in this service area in this reporting year. Number of dear adult immunizations administered by the LIPO in this service area in this reporting year. Number of dear adult immunizations administered by the LIPO in this service area in this reporting year. Number of dear adult immunizations administered by the LIPO in this service area in this reporting year. 13 IN This service area in this reporting year. 14 In this service area in this reporting year. 15 3 5 11 2 9 9 4 3 0 77 1 131 15 10 10 10 10 10 10 10 10 10 10 10 10 10	6		0	0	0	0	0	0	1	0	0	2			3
8 Service area in this reporting year. 9 LHD in this service area in this reporting year. 10 LHD in this service area in this reporting year. 11 LHD in this service area in this reporting year. 12 LHD in this service area in this reporting year. 13 LHD in this service area in this reporting year. 14 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year. 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area in this reporting year for: 15 LHD in this service area	7	the LHD in this service area in this reporting year.	0	0	21	15	12	14	0	0	0	5			67
9 HID in this service area in this reporting year. Rumber of school-age children immunized by the LHD in this 10 service area in this reporting year. Rumber of adults immunized by the LHD in this service area 11 Hill things of adults immunized by the LHD in this service area 12 In this reporting year. Rumber of adults immunized by the LHD in this service area 13 6 25 4 2 5 0 1 1 0 43 119 110 Hill things of adults immunized by the LHD in this service area 13 6 25 4 2 5 0 1 1 0 43 119 110 Hill things of adults immunized by the LHD in this service area 13 1 HD in this service area in this reporting year. Rumber of older adults immunized by the LHD in this service 15 3 5 11 3 10 4 3 0 77 131 131 Hill things of adults immunized by the LHD in this service 15 3 5 11 2 9 4 3 0 77 129 15 15 Service area in this reporting year. Rumber of older adults immunized by the LHD in this service 15 3 5 11 2 9 4 3 0 77 129 15 In this service area in this reporting year. Rumber of older adults immunized by the LHD in this service 15 3 5 11 2 9 4 3 0 77 129 15 In this service area in this reporting year. Rumber of older adults immunized by the LHD in this service 15 3 5 11 2 9 4 3 0 77 129 15 In this service area in this reporting year. Rumber of older adults immunized by the LHD in this service 15 3 5 11 2 9 4 3 0 77 129 15 In this service area in this reporting year. Rumber of older adults immunized by the LHD in this service 15 3 5 11 2 9 4 3 0 77 129 15 In this service area in this reporting year for: 15 3 5 11 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	8	service area in this reporting year.	0	0	18	15	2	14	0	0	0	1			50
Number of school-age children immuniced by the LHD in this service area in this reporting year. 12 In this reporting year in this reporting year. 13 In this reporting year in this reporting year. 15 3 5 11 3 10 4 3 1 120 16 In this service area in this reporting year. 17 Number of older adult immunications administered by the LHD in this service area in this reporting year. 18 In this reporting year. 19 In this service area in this reporting year. 19 In this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 19 In this service area in this reporting year. 10 In this service area in this reporting year. 10 In this service area in this reporting year. 10 In this service area in this reporting year. 10 In this service area in this reporting year. 10 In this service area in this reporting year. 11 In this service area in this reporting year. 12 In this service area in this reporting year for: 13 In this service area in this reporting year. 14 In this service area in this reporting year for: 15 In this service area in this reporting year. 15 In this service area in this reporting year. 15 In this service area in this reporting year. 15 In this service area in this reporting year. 15 In this service area in this reporting year. 15 In this service area in this reporting year. 15 In this service area in this reporting year. 16 In this service area in this reporting year. 17 In this service area in this reporting year. 18 In this service area in this reporting year. 19 In this service area in this reporting year. 10 In this service area in this	9		28	43	17	5	18	11	31	17	18	13	3		204
Number of adult immunizations administered by the LHD in 11 this service are air in this reporting year. Number of adults immunized by the LHD in this service area at 120 and 120 an	10		9	10	7	4	8	7							
Number of adults immunized by the LHD in this service area 21 in this reporting year. Number of older adult immunizations administered by the LHD in this service. If \$ 3	11														
Number of older adult immunizations administered by the 131 J. HD1 in this reporting year. Number of older adults immunized by the LHD in this service are an inthis reporting year for: 15		Number of adults immunized by the LHD in this service area													
Number of older adults immunized by the LHD in this service A areal in this reporting year. It is reporting year for: 15		Number of older adult immunizations administered by the	33		25	4		5	0	1	0	43			120
Number of unduplicated individuals screened by the LHD in 1st bits service area in this reporting year for: 15a	13		15	3	5	11	3	10	4	3	0	77			131
15 this service area in this reporting year for: 15a	14		15	3	5	11	2	9	4	3	0	77			129
	15														
STD / STI (other than HIV/AIDS)	15a														THE RESERVE OF THE PERSON OF T
HIV/AIDS	600000														O. C. COLOR OF SALE
15e Breast cancer	15d														
Colorectal cancer	15e			- 5		- 5									
All other cancers	15f	Cervical cancer	0	0	0	0	0	0	0	0	0	0	0		0
15i Cardiovascular disease	15g	Colorectal cancer	0	0	0	0	0	0	0	0	0	0	0		0
Hypertension	15h			0		0	0	0	0	0	0	0	0		0
Diabetes	15i								75.4						
Tuberculosis 1 0 1 0 1 0 0 1 0 0 0 0 0 0 0 0 0 0 0															
Vision											3	- 8			
Hearing	- 333			25.0											
All other screenings Number of screening tests conducted by the LHD in this service area in this reporting year for: 16a Childhood blood lead 0 9 6 2 4 4 0 5 1 3 2 36 16b Hepatitis B 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	15n														
Number of screening tests conducted by the LHD in this service area in this reporting year for: 16a Childhood blood lead 0 9 6 2 4 4 0 5 1 3 2 36 16b Hepatitis B 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	150	All other screenings		7									11 1521-		
16b Hepatitis B 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	16														
16b Hepatitis B 0 <	16a	Childhood blood lead	0	9	6	2	4	4	0	5	1	3	2		36
16c STD / STI (other than HIV/AIDS) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	16b	Hepatitis B													
16e Breast cancer 0	16c	STD / STI (other than HIV/AIDS)	0	0	0	0	0	0	0	0	0	0	0		0
16f Cervical cancer 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	16d	HIV/AIDS	0	0	0	0	0	0	0	0	0	0	0		0
16g Colorectal cancer 0	16e		0	0	0	0	0	0	0	0	0	0	0		0
16h All other cancers 0	16f										0		0		0
16i Cardiovascular disease 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	16g														
16j Hypertension 0															
16k Diabetes 0															
16I Tuberculosis 1 0 1 0 0 0 0 0 0 3 16m Vision 4 7 3 2 1 4 5 3 1 6 3 39 16n Hearing 0 0 0 0 0 0 0 0 0 0 0	16k														
16m Vision 4 7 3 2 1 4 5 3 1 6 3 39 16n Hearing 0 0 0 0 0 0 0 0 0 0 0	161														
	16m														August 1990 Street Land
160 All other screenings 4 7 0 0 0 0 0 0 0 0 11	16n	Hearing	0	0	0		0	0		0					
	160	All other screenings	4	7	0	0	0	0	0	0	0	0	0		11



SCHOOL IMMUNIZATION RECORD AUDITS

Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
Number of Childcare/Pre-K facilities operating in this service 1 area during the most recently completed school year.	19	19											
Number of Childcare/Pre-K facilities that were audited by the	13	19											
LHD in this service area in the most recently completed school 2 year.	5	8											
Number of Kindergarten facilities operating in this service area													
3 during the most recently completed school year.	9	9											
Number of Kindergarten facilities that were audited by the LHD in this service area in the most recently completed school													
4 year.	0	2											
# of Grade 1 facilities operating in this service area during the5 most recently completed school year.	9	9											
Number of Grade 1 facilities that were audited by the LHD in													
6 this service area in the most recently completed school year.	0	2											
Number of Grade 6 facilities operating in this service area 7 during the most recently completed school year.	5	5											
Number of Grade 6 facilities that were audited by the LHD in													
8 this service area in the most recently completed school year.	0	3											
Number of High School facilities operating in this service area guiring the most recently completed school year.	2	2											
	3	3											
Number of High School facilities whose transfer student records were audited by the LHD in this service area in the													
10 most recently completed school year.	1	1											



KENNELS, PET SHOPS, AND SHELTER/POUND FACILITIES

Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
Number of licensed pet shop facilities operating in this service													
1 area during the most recently completed licensing year.	1												1
Number of licensed kennel facilities operating in this service 2 area during the most recently completed licensing year.	2												2
Number of licensed shelters/pound facilities operating in this	2												
service area during the most recently completed licensing 3 year.	1												1
Number of pre-operational inspections conducted by the LHD													
in this service area during the most recently completed 4 licensing year at:													
4a Pet shop				Marian Sections									0
4b Kennel													0
4c Shelter/pound Number of routine inspections conducted by the LHD in this													0
service area during the most recently completed licensing year													
5 at: 5a Pet shop						1				3,340			
5b Kennel						2							2
5c Shelter/pound													0
Number of routine re-inspections conducted by the LHD in this service area during the most recently completed licensing year													
6 at:													
6a Pet shop 6b Kennel						1							1
6b Kennel 6c Shelter/pound													0
Number of non-routine emergency & complaint-related													
inspections conducted by the LHD in this service area during													
7 the most recently completed licensing year at: 7a Pet shop	200211												
7a Pet shop 7b Kennel													0
7c Shelter/pound													0
							-						



ANIMAL BITES AND RABIES CONTROL

Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
Number of animal-bites-human incidents reported to				Api			Jui		Jept	000	1101	Dec	TOTAL
in this service area in this reporting year. 2 Number of rabid/suspected-rabid animal-bites-domes	2 stic-animal	0	5	3	2	3	3	5	0	4	5	0	32
incidents reported to the LHD in this service area in the	nis												
reporting year. 3 Number of currently unimmunized domestic animals		0	1	1	0	0	0	0	0	0	0	0	2
under confinement by order of the LHD in this service this reporting year.	area in	0	0	0	0	1	0	0	0	0	1	0	3
4 Number of Lab analysis of Animals (Rabies Exam or V	Vest Nile												
Virus testing) 5	0	0	0	0	0	0	3	1	1	0	0	0	5
Number of animals testing positive for rabies or unsa 6 Number of domestic animal quarantines for known/su		0	0	0	0	0	0	0	0	0	0	0	0
rabies exposures.	0	0	1	1	0	0	0	0	0	0	0	0	2
7 Number of Stray Animals Picked Up:	PRODUCTION OF THE PERSON OF TH				Designer	SEULE	MERIN						
Canine	2	4	4	3	2	6	6	4	2	2	3	7	45
Feline	1	1	3	2	6	8	6	11	9	3	2	2	54
a. Redeemed: Canine	2	3	2	3	1	6	3	2	1	0	2	5	30
Feline	0	0	0	0	1	1	0	0	0	0	0	0	2
b. Adopted Canine	0	1	2	0	1	0	0	1	1	0	0	2	8
Feline	0	1	3	1	4	4	5	7	7	3	2	1	38
c. Euthanized Canine	0	0	0	0	0	0	0	0	0	0	0	0	0
Feline	0	0	0	1	0	0	0	2	1	0	0	0	4
d. DOA Canine	0	0	0	0	0	0	3	1	0	2	1	0	7
Feline	1	0	0	0	1	3	1	2	0	0	0	1	9
e. Died at shelter Canine	0	0	0	0	0	0	0	0	0	0	0	0	0
Feline 8 Number of Wildlife Picked Up:	0	0	0	0	0	0	0	0	1	0	0	0	
CONTRACTOR	3	O THE OWNER		ACREMICANE.	,	2	0	ESNAMES		0			
a. Injured / DOA Raccoon	3	2	1	1	4	2	0	1	1	0	0	1	16
Opossum	0	0	0	0	13	1	1	0	1	1	0	0	17
Ground Hog	0	0	0	2	0	0	1	0	0	0	0	0	3
Birds	3	1	0	0	2	0	2	1	3	1	0	1	14
Other	0	1	0	2	0	1	3	1	1	2	0	0	11
b. Healthy Raccoon	0	0	1	0	0	0	0	0	0	0	0	1	2
Opossum	0	0	0	0	7	0	0	0	0	0	0	0	7
Ground Hog	0	0	0	0	0	0	0	0	0	0	0	0	0
Birds	0	0	0	0	3	0	0	1	0	2	0	1	7
Other	0	0	0	0	0	1	0	1	0	0	0	0	2
c. Released Raccoon	0	0	1	0	7	0	0	0	0	0	0	1	2
Opossum Ground Hog	0	0	0	0	0	0	0	0	0	0	0	0	8
Birds	3	0	0	0	1	0	0	1	0	0	0	2	7
Other	0	0	0	0	0		0	1	0	2	0	0	4
d. Euthanized Raccoon	0	0	0	1	1	1	0	0	1	0	0	0	4
Opossum	0	0	0	0	4	0	0	0	0	0	0	0	4
Ground Hog	0	0	0	0	0	0	0	0	0	0	0	0	0
Birds	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0	0
e. Taken to Wildlife Center Raccoon	0	0	1	0	2	0	0	0	0	0	0	0	3
Opossum	0	0	0	0	0	1	0	0	1	1	0	0	3
Ground Hog	0	0	0	0	0	0	0	0	0	0	0	0	0
Birds	0	1	0	0	4	0	2	1	3	3	0	0	14
Other	0	1	0	1	0	0	0	0	0	0	0	0	2
9 Summons Issued	1	0	0	0	0	0	49	0	6	0	0	0	56
10 Dead Deer Removed	13	10	1	0	2	3	5	4	2	13	12	9	74
11 Traps rented per month	1	0	1	0	0	1	1	0	2	1	1	0	8
12 Animals Released from Traps per Month	0	0	1	0	0	0	0	0	0	0	0	0	1
Number of complaint investigations	139	81	98	139	175	140	133	136	112	113	63	72	1401



RABIES VACCINATION CLINICS

The LHD will complete question 1 on this form for each individual town to which the LHD provided this service (Municipal-level data). The remaining questions are optional.

Question & Definition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	TOTAL
Did the LHD conduct at least one animal rabies vaccination $_{ m 1}$ clinic in this municipality in this reporting year?	Yes												
Number of rabies vaccination clinics conducted by the LHD in 2 this municipality in this reporting year.	1	0	0	0	0	0	0	0	1	0	0	0	2
Number of dogs vaccinated against rabies at vaccination clinics conducted by the LHD in this municipality in this reporting year.	219	0	0		0	0	0	0	6	0	0	0	225
Number of cats vaccinated against rables at vaccination clinics conducted by the LHD in this municipality in this reporting	16	0	0	0	0	0	0	0	21	0	0	0	47
4 year. 5 Total Attendance for rabies clinics	16 235	0	0	0	0	0	0	0	31 37	0	0	0	272