President’s Message

Welcome back from summer holidays. September has been a beautiful beginning to our autumn.

NJLBHA’s Executive Board has been busy networking with colleagues in sister Public Health Organizations to brainstorm and share ideas regarding the numerous challenges facing Public Health in New Jersey. We have repaired and solved our online training problems which were a great frustration most of this year. It is our near term goal to push for training compliance from all Boards of Health across New Jersey; the result of which will be increased knowledge and understanding, greater efficiency, and will enhance the respect of our communities for the work which we undertake on their behalf. Already, members of our executive board have scheduled a training session in Camden County for the eighth of October. We will be working on one in Bergen County and another in Middlesex County for a bit later. If your board wishes to have us come to you to do group training and you or your health officer is able to gather twenty or more Board of Health members from your area, email NJLBHA at president@njlbha.org with your contact information and we will set it up. There is online training as well on our website: www.njlbha.org. We implore you, your health officers and your municipal officials to take the benefits of good training very seriously. There is nothing as important as our health, it is the foundation of all that follows.

Have a healthy, safe and colorful fall!

Dianna Lachman
President

Remembering Dan Coranoto
Loss of an Esteemed Board Member

It is with incredible sadness that we inform our members of the passing of Dan Coranoto. A native of New Jersey, born in Passaic, brought up in Lyndhurst and a resident of Hampton Township since 1974, this extraordinary man devoted his life to his family, his friends, fellow citizens and the public good. Among his many accomplishments are serving his country for over four years in the navy, being a life member of the Hampton Township Fire & Rescue, a member of the Board of Health and the Recreation Department, an Executive Board Member of the League of Municipalities, a Trustee for the Boy Scouts of America, a member of the American Legion and the Knights of Columbus, a parishioner of St. Joseph R.C. Church in Newton, and a most valued member of the Executive Board of the New Jersey Local Boards of Health Association.

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Editor, Laura O’Reilly, R.N., Vice President of Communications, If you have any news to share and would like to contribute to our next newsletter please contact news@njlbha.org
Painlessly Generating Revenue Through Animal Welfare Programs

Dianna Lachman, President New Jersey Local Board of Health Association

(This article appeared in the May 2015 Edition of the New Jersey League of Municipalities Magazine. ) To read the full article please go to NJLBHA PAGE

We are all looking for ways to painlessly generate additional revenues to provide essential services to our communities. The most overlooked sources of revenue exist in our animal control and welfare programs.

The NJ Local Boards of Health Association participates in Sustainable Jersey’s Animals in the Community Task Force. One issue addressed was the creation of a sustainable animal control and welfare program which allows you to meet your legal obligations through enhanced compliance with existing statutes and municipal ordinances without increasing the tax burden. Additional revenues can also be generated by insuring that Animal Control Officers servicing your community are certified and appointed as Animal Cruelty Investigators.

Based partially on the findings of that Task Force, this article will suggest ways your municipality can do just that. Millions of dollars in revenue are lost throughout the state through low compliance with animal registration.

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Department of Health Has Re-Adopted Public Health Practice Standards with Amendment

By Michael Richmond, Legal Counsel to the Local Boards of Health Association

Effective July 10, 2015 the Department of Health Re-adopted NJAC 8:52 the Public Health Practice Standards of Performance for Local Boards of Health in New Jersey. This re-adoptions will be effective until July 10, 2022. During the period of time from July 10, 2015 to July 10, 2022 the Department of Health can implement provisions of the working groups which have been reviewing the practice Standards for the last three years. This will be accomplished by amendments to the adopted Practice Standards.

There was one amendment to the Practice Standards which provides the Sections 2.1 (a) and (b) of the Public Health Nuisance Code (1953) are NOT to be enforced by local health agencies based upon the court decisions in State v. Golin, 363 NJ Super 474 (App Div. 2003) and Guidi v. Atlantic City, 286 NJ Super 143 (App Div. 1996). Local Boards of Health were once again advised that they should review their ordinances to insure that specific conditions be prohibited rather than general nuisances.

Local Boards of Health should monitor the changes in New Jersey Administrative Code since several of the suggested modifications made by the working study groups are very extensive and very different from the Re-Adopted Practice Standards.

If there are any questions concerning the effect of the re-adoptions or the amendment you may contact Michael Richmond, Legal Counsel to the Local Boards of Health Association at msrnjlawyer@yahoo.com.
From the Commissioner...

A Balancing Act: Opening Birth Records For Adult Adoptees While Preserving Birth Parents’ Right to Remain Anonymous

By Cathleen D. Bennett, Acting Commissioner

It is my to honor to lead the Department as its Acting Commissioner as we begin to implement a law that balances the rights of adult adoptees to their original birth records with privacy protections for birth parents.

A law signed by Governor Christie in May 2014 allows thousands of previously sealed records on file with the Department’s Office of Vital Statistics and Registry to be made available to adult adoptees and their families. The law makes it clear that while family history and medical information is more important now for adoptees than ever, privacy considerations that are central in the decisions of many birth parents must also be preserved. We are implementing this law with these two critical considerations in mind.

For adoptions completed before August 1, 2015, birth parents can choose to maintain their privacy by having identifying information redacted from the original birth certificate of the child they placed for adoption. They can also notify the state of their preference for contact with the adopted individual by submitting a contact preference form to the Department. Contact preference forms offer options of direct contact, contact through an intermediary, or no contact at this time. In order for contact preference forms to be accepted by the State Registrar, all birth parents must submit completed Family History Information forms, including medical, cultural and social histories.

Birth parents who choose to maintain their privacy by having identifying information redacted from the original birth certificate must submit this request by December 31, 2016 to ensure their privacy is maintained. Contact preferences can be changed at any time.

Beginning in January 2017, adult adoptees and their families will have access to thousands of previously sealed birth records, removing the often burdensome process of obtaining a court order. Adoptees will receive all information recorded at the time of their birth on the original birth certificate unless a birth parent requests redaction. Adoptees may also receive the birth parents contact preferences and family history.

Those who may request copies of birth certificates beginning January 1, 2017 are adult adoptees; direct descendants, siblings or spouses of adopted persons; adoptive parents, legal guardians or other legal representatives of adopted persons; or state or federal government agencies for official purposes. Applicants will receive uncertified copies of original birth certificates on file with the Department’s Office of Vital Statistics and Registry. Copies are for informational purposes only and cannot be used for legal proof of identity or citizenship.

For adoptions completed after August 1, 2015, birth parents may submit forms indicating preferred contact methods. These documents offer options of direct contact, contact through an intermediary, or no contact at this time.

The new birth records changes mark a milestone in New Jersey’s efforts to provide adoptees with information about their lineage and family medical histories while respecting birth parents' expectations of privacy.

For more information on the new adoption provisions, visit the Department’s website at: http://www.state.nj.us/health/vital/record.shtml.
The Arc Gloucester Takes Flight With The Stork To Deliver Healthier Babies!

By Robyn J. Blanchard, RN of The Arc Gloucester

It’s A Boy! It’s a Girl! Most parents just hope and pray for the birth of a healthy baby, free from illness, disease and syndromes, regardless of the sex. Babies born with FAS (Fetal Alcohol Syndrome) are not able to be cured. They are destined to have a life plagued with FASD’s (Fetal Alcohol Spectrum Disorders), which are a group conditions that occur in a person whose mother drank alcohol during her pregnancy. These devastating effects include intellectual and developmental disabilities, physical, behavior, mental health and/or learning disabilities, with a potential for lifelong implications.

The Bad News: It is extremely unfortunate that there is absolutely no cure for these innocent babies born into a life with FASD’s. These precious newborns are destined to grow into their elementary lives as troubled children. If they make it into their young adulthood without committing suicide, they will most likely live a tortured adult life with suicidal tendencies, never feeling as though they “fit in”.

The Good News: FASD’s are 100 % preventable! FASD’s only occur when a pregnant woman drinks alcohol during her pregnancy. Women that are planning to be get pregnant, or having sex without use birth control methods should not drink alcohol at all. No amount of alcohol is safe during pregnancy.

FAS Diagnostic Criteria: The brief outline of diagnostic criteria for Fetal Alcohol Syndrome includes the following:
1. Facial Dysmorphia (based on racial norms and 3 characteristic facial features)
2. Growth Problems (at or below the 10th percentile)
3. (CNS) Central Nervous System abnormalities (Structural, Neurological, and Functional)
4. Maternal Alcohol Exposure

Criteria for FAS Diagnosis (Requires all 3 of the following findings)
- Documentation of all 3 facial abnormalities (smooth philtrum, thin vermillion border, and small palpebral fissures)
- Documentation of growth deficits
- Documentation of Central Nervous System abnormalities

Learn More & Help Us To Promote The Birth of Healthy Babies!
- Visit us- “The Arc Gloucester & (SNJPC) Southern New Jersey Perinatal Cooperative” FASD Prevention & Pregnant Pause exhibit, at The 15th Annual Gloucester County Women’s Health Summit on 9/19/15 at the Gloucester County Institute of Technology in Sewell, NJ (8:00 am - 12:00 noon)
- Join us for a free FASD Prevention educational session on 9/19/15 at The Women’s Summit with presenters (Robyn J. Blanchard, RN & Jaclyn Papa, FASD Educator of SNJPC)
- Become a Member of The Arc Gloucester! Visit our website: www.thearcgloucester.org
- Visit The Arc’s FASD Prevention website: www.thearc.org/FASD-Prevention-Project
Be Informed! Get Involved! REGISTER NOW for Important Events!!

October- Registration is still open!

New Jersey Public Health Association
2015 Annual Conference
Healthy People in Healthy Communities: Building a Culture of Health in New Jersey.

October 9, 2015 12:00-4:30pm
At the Rutgers University Edward J. Bloustein School of Planning and Public Policy
33 Livingston Avenue, New Brunswick, NJ

To Register: https://www.eventbrite.com/e/new-jersey-public-health-association-annual-conference-tickets-18123263168
Questions? E-mail newjerseypha@gmail.com

October- Registration is still open!

Rutgers University Office of Continuing Professional Education

Health Impact Assessment:
Incorporating Health into Planning and Decision-Making

Health Impact Assessment (HIA) can be used to evaluate a proposed plan or project’s potential effects on the health of a population. HIA provides evidence-based recommendations aimed at enhancing positive health impacts and minimizing negative ones, providing an approach to the decision-making process by:

- Considering health outcomes such as social, economic and environmental influences;
- Convening diverse members of the public to elicit multiple perspectives and input;
- Identifying groups of people who might be particularly vulnerable to health impacts; and
- Reviewing potential strategies that may reduce negative health impacts and increase positive impacts.

Click here to register or to get more information www.cpe.rutgers.edu/HIA
The New Jersey Adult Immunization Summit
By Maria Lanzi, MS, MPH, ANP-BC
Adult Immunization, New Jersey Immunization Network

On November 4, 2015 at the Woodrow Wilson School of Policy and International Affairs, the New Jersey Immunization Network in conjunction with the American College of Physicians will present an all day, New Jersey focused, Adult Immunization Summit. This Summit, for invited state-wide health care leaders, will describe the current NJ Adult Immunization landscape and present solutions to increase adult immunization rates.

Vaccines have changed the course of disease throughout the world. The number of cases of previously "common and routine" infectious diseases has so dramatically dropped, that when an outbreak of these infectious disease occurs, most of us are taken by surprise. Public Health history viewed through the use of vaccines is filled with success stories.

Unfortunately, in the adult population, the rates of immunization, not as robust as those among children, means the burden of vaccine preventable disease is enormous. Almost 99% of all vaccine preventable diseases occur among adults, particularly in those 65 and older. The associated morbidity and economic burden is devastating.

Protecting the individual and simultaneously the broader community is the unique role that vaccines play in Public Health. For New Jersey’s Public Health, the Summit will present a state wide infrastructure to facilitate sharing of best practices among individuals and organizations, promote an adult vaccine culture utilizing recommended standards of care; and, spearhead efforts to increase adult vaccine immunization rate. These efforts will ultimately impact the responsiveness to any vaccine preventable disease threat.

For information about the New Jersey Immunization Network, please visit: immunizenj.org.

(Continued from page 1)

Our condolences go to Maria, his wife, his children and grandchildren, and anyone whose life he touched. Words used to describe Dan are warm, compassionate, down to earth, good sense of humor, affectionate, committed to his values and ideals and a common sense guy who is well respected.

Dan will be supremely missed and always remembered.
Yes, count me (us) in as a part of the Association!

Yes, count me (us) in as a part of the Association that gives New Jersey’s Boards of Health and their members a voice in Trenton, a way to communicate among ourselves, a force for progress in public health and more knowledge for board members.

☐ Full Board, Regular Membership $95

Board membership is open to municipal, county and regional Boards of Health. All board members are included for the calendar year.

☐ Individual, Regular Membership $20

Individual membership is open to current members of municipal, county or regional boards of health whose full board is not a member.

☐ Individual, Associate Membership $20

Associate membership is open to past Board of Health members, students, or other individuals interested in public health. This is a non-voting membership.

☐ Institutional Membership $95

Institutional membership is open to organizations, including environmental groups, planning boards, or other municipal or county agencies, committees, commissions, or councils. This is a non-voting membership.

Board Name: __________________________________________

Email Address: ________________________________________ Phone: __________________________

Mailing Address:   ______________________________________________________________________

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