President’s Message

I would like to wish you all a safe and wonderful summer. Along with our expectations of vacations and visits to the shore, summer brings its own set of public health issues ranging from increased cases of Lyme disease to concern over zoonotic diseases such as rabies.

There are some issues that are not impacted by seasonal changes, in which we continue to engage. Your executive board has been working with other public health organizations to increase awareness of the need for simple vaccinations against childhood diseases, such as measles, mumps and pertussis (whooping cough). I am sure all are aware of the advancing number of cases of these childhood diseases, both in children and adults. There are several reasons for this increase. One reason of great concern is the fact that many parents have chosen not to vaccinate their children. Unfounded fear based on ignorance, often stemming from debunked studies linking child vaccination with other conditions such as autism, has fueled this high risk behavior. The influx of immigrants into this country who have had no vaccinations or benefit of modern preventive medical care, has also been identified as a potential risk to public health in many communities. What we need to be doing in public health is to educate parents about the truth regarding childhood vaccinations. Furthermore, we must ensure that admission regulations regarding vaccines that are needed to enter into our school system, including preschools, are strictly adhered to for the benefit of the public's health and maintaining the best possible learning environment for our children.

Another issue we are addressing is the increased use of heroin. More and more young people and adults are using heroin as a recreational drug. Increased deaths from overdoses, particularly among young people, are dramatically on the rise. I urge you to work with your health educator, schools and community groups to educate our communities about this growing problem.

In other areas we are continuing to work with our health officers on a number of projects including a potential model shared services agreement that can be used should you need one. We are also consulting in the development of new Public Health Practice Standards.

Thank you for joining with us and for all you do for your community. Please do not forget to take your on-line training at www.njlbha.org.

Dianna Lachman
President
Promoting Awareness of Post Sandy Stress in Children and Families

By New Jersey Health Commissioner Mary E. O’Dowd

To raise awareness of the need for health professionals to look for signs and symptoms of post-Sandy stress in children and families, the Department of Health recently announced $4 million in grants to community health centers and hospitals to screen people for depression, post-traumatic stress, substance abuse, domestic violence, and child abuse.

Some families impacted by Sandy continue to face challenges. Studies have documented that after events like Sandy, increases are seen in problems coping with stress and trauma-such as behavioral health issues, household discord, substance abuse and domestic violence.

And now that hurricane season has arrived, that could trigger post-traumatic stress in some individuals who are still displaced or facing rebuilding challenges.

There is also evidence that child abuse may increase following a natural disaster. In the six months after Hurricane Floyd hit North Carolina, there was a five-fold increase in traumatic brain injuries to children under two years old in counties severely affected by the Hurricane.

The first phase of the $4 million grant program was the awarding of $2.2 million to 10 community health centers and hospitals to provide behavioral health screenings to 48,000 people over the next year. The largest grant—$600,000—went to Meridian Health to screen 15,000 individuals.

The other grantees are: Visiting Nurses Association of Central New Jersey; AtlantiCare Regional Medical Center; Ocean Health Initiative Inc.; Jewish Renaissance Medical Center in Middlesex and Essex counties; Southern Jersey Family Medical Center; Newark Community Health Center; CarePoint Health Foundation; North Hudson Community Action Center; and CompleteCare Health Center in Cape May County.

The funding is provided through a federal Social Services Block Grant.

Coping after Superstorm Sandy

According to data profiles developed by HQSI, NJ’s quality improvement organization, after Superstorm Sandy:

- Anxiety disorders, substance and alcohol abuse, and PTSD increased among Medicare Fee-for-Service beneficiaries in NJ’s 10 FEMA-declared disaster counties.

- However, only 1.2% of these beneficiaries received a Medicare-covered depression screening; in fact, utilization of important behavioral health services decreased across the board.

What can you do to help? Bring your community’s behavioral health providers to the table when planning for future disasters. Go to www.hqsi.org for more information and resources such as the At-a-Glance documents, as well as to download the profiles.

NJLBHA Attorney Appointed

Submitted by Past President, John Saccenti

At the December 21, 2013 Executive Board meeting Michael Richmond was appointed attorney for the NJLBHA. Mike served as attorney for the organization several years ago.

An attorney for over 40 years, Mike served as a Municipal Prosecutor in more than six New Jersey communities. In each of the communities he represented he prosecuted cases for the local health department. In several of the communities he worked with the health department, and developed enforcement programs in multiple dwelling enforcement, retail, commercial properties, and animal control enforcement.

He has also served as an Assistant Township Attorney. Recently Mike has served on the Public Health Practice Standards Committee revising the regulation governing local boards of health. Mike also serves on the Animals in the Community Task Force of Sustainable Jersey.

Mike is up to date on the issues facing the Local Boards of Health and is in the forefront dealing with the most pressing issues.

Mike can be reached at msnjlawer@yahoo.com or 908-421-3905.
The Institute of Medicine in the landmark report “The Future of Public Health” advised that restoring an effective public health system cannot be achieved by public health professionals alone. The strengths of local public health professionals in N.J. include enforcement of regulations such as food safety, investigation of communicable diseases, rabies control activities, and responding to emerging public health issues associated with pandemics and natural disasters.

The concept of healthy communities, however, involves leveraging other professionals including municipal planners, educators, police, hospitals, mental health and healthcare practitioners to address issues such as substance abuse (including tobacco), obesity, diabetes, access to health care, and chronic disease management.

The blueprint for this task is provided by the CHIP (Community Health Improvement Plan) process which is included in the New Jersey Public Health Practice Standards (NJAC 8:52 subchapters 9, 10, and 11). County-wide CHIPS are being planned and implemented in all 21 counties. Local Board of Health members can and should be part of the process to assist in identifying needs and potential resources to meet those needs. Local public health professionals have shared in the development of goals, objectives, strategies, and activities to improve health outcomes in their communities.

Every Board of Health member should be reviewing their county CHIP and providing input in its implementation at the local level. If you as a local board of health member do not have a copy of your county CHIP contact your Health Officer or NJLBHA. As local board of health members, you are no longer expected to do it alone!
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: _________________________________________________________________________

________________________________________________________________________________________

Yes, count me (us) in as a part of the Association!

---

**This Issue Features:**

⇒ Coping after Superstorm Sandy
⇒ CHIPS - a Blueprint for Healthy Communities
⇒ NCHPAD Inclusive Health Coalition

......... and more