

New Jersey Public Health Association

Advocating for Public Health in the State of New Jersey

Summer 2017 Issue

Summer is Everything *But* a Vacation for Public Health

By Kevin McNally, MBA, NJPHA President

I'm writing this on the first day of summer. Two days ago was the last day of the school year for the elementary school down the street. Last night, neighbors had a party to celebrate their daughter's high school graduation. For most people, summer is a time to slow down, take a break, get away for a vacation, etc.

Not so for those of us in public health. In public health, summer is usually the busiest time of the year. As the temperature increases, so do many threats to the health of the public – and therefore the workload and level of attentiveness of public health agencies and their workers. The coming of summer means activating surveillance of mosquitoes and birds to detect the vector-borne diseases we know are endemic in New Jersey (like West Nile virus) – and those that we fear might be coming (like Zika virus). It means testing the water at beaches, lakes, and swimming pools for water-borne disease organisms.

Summer also brings seasonal and outdoor events like concerts and festivals that require the oversight of environmental health staff, particularly due to the increased popularity of food-oriented events and food trucks. In addition, it brings an increased risk of severe weather – thunderstorms and tropical storms – and their consequences for health. And the increased temperature itself can become a health hazard if it gets too hot for too long.

So **thank you** to all the public health workers who put in long hours and weeks over the summer months to assure that the rest of the public can enjoy their summer fun.

Finally, a shout out to anyone reading this who just graduated with a public health-related degree. Congratulations! We look forward to you joining us as members of the public health team.

Save the Date

New Jersey Public Health Association

in collaboration with the Brain Injury Alliance of New Jersey

presents its

2017 Annual Conference

Prevention of Brain Injuries

Monday, October 23, 2017

at the New Jersey Law Center

One Constitution Square

New Brunswick, NJ

Visit NJPHA's website – www.njpha.org – for updates on speakers, registration, etc. as these become available

Commitment to Quality Improvement Earns New Jersey Public Health Accreditation

By Cathleen D. Bennett, Commissioner, New Jersey Department of Health

Public health departments serve as the front lines for improving and protecting the health and well-being of people and communities. The New Jersey Department of Health is proud to have achieved national accreditation from the Public Health Accreditation Board (PHAB) in June for meeting high standards in public health services, leadership and accountability.

Upon submitting our application in 2014, Department of Health staff underwent a rigorous, multi-faceted, peer-reviewed assessment process to ensure we met a set of 105 public health quality standards and measures. Through this three-year process, we demonstrated a commitment to continuous quality improvement and evaluated and improved our services to ensure we are effectively meeting the public health needs of residents.

New Jersey is one of 26 states and 162 local health departments accredited by PHAB out of 3,000 government public health agencies. The Bloomfield Department of Health & Human Services received its PHAB accreditation in 2015 and is the only other accredited public health agency in New Jersey. Several other local health departments are in the process of applying for accreditation, including those in Camden and Princeton.

The Department's accreditation team, led by Director of Population Health Colette Lamothe-Galette, collected and reviewed more than 10,000 pages of documents, developed a strategic plan, implemented Healthy NJ 2020, and created a Quality Improvement plan.

Accreditation has become the national standard for public health, and we are proud of this national recognition that provides a framework for setting priorities and gives valuable, measurable feedback about how we are performing.

Helping to build healthier communities is a cornerstone of the Department's work. One of our recent successes included our second annual Population Health Summit on June 7th at Rider University that brought together nearly 400 leaders of business, academia, health care, state and local government, and faith and community groups who shared innovative ways they are making communities healthier. Eight Population Health Hero winners were announced; their projects included cancer screenings on the beach, a walking school bus, a community café where school nurses extend their practice, and a partnership offering patient discounts at businesses if they improve their health. These winners were selected from among 47 applicants, and their awards were presented by the Commissioners of the Departments of Agriculture, Community Affairs, Environmental Protection, Health, and Transportation.



(photo: NJDOH Office of Communications)

Under my leadership, members of the Governor’s Cabinet formed the Population Health Action Team last summer to advance and improve health in all policies. The team identified lead exposure in children, and nutrition and fitness as two key improvement areas. Each Department leader spoke at the summit about how their agencies are working to improve the health of New Jersey’s communities — from local farmer’s markets and improved recreational spaces to enhanced transportation opportunities that promote walking and bicycling.

Inspiring initiatives to improve population health are ongoing in every region of our state. That’s why we felt it was important not only to highlight and honor the incredible work of our awardees, but also encourage others who are thinking about how they can improve wellness and health equity in environments across New Jersey.

Editor’s Note:

New Jersey Department of Health news release (June 13, 2017) on PHAB accreditation:
<http://bit.ly/2tNNTtn>

Opinion: Breaking Barriers To Achieve Accreditation in New Jersey

By John C. Saccenti, Founding President, NJLBHA

Reprinted with permission of the author from the NJLBHA newsletter (Fall 2016)



The decision as to whether or not to have your health departments attempt accreditation often lies with you as a member of a Local Board of Health. It is your responsibility to set policy as to utilization of resources, goals and directions that should be taken to meet your community needs. Your ongoing responsibility is to ensure that the health department that services your community is doing so in the most efficient and professional manner possible. You must ensure that all assets are utilized to the maximum potential and that your department's programs undergo continuous quality improvement.

There are several excellent articles in the Spring 2016 newsletter (available at www.njlbha.org) related to national accreditation. It is a topic that members of a Local Board of Health must be familiar with. You can decide whether national accreditation is presently feasible for your department. Absent those resources, you may wish to identify programs, procedures and processes you can institute now that will achieve the same goal of maximizing the effectiveness of the department and thereby the services offered your community. Should you then wish to pursue formal accreditation the process would be facilitated.

New Jersey is unique in the country. When I served as president of the National Association of Local Boards of Health and on the National Public Health Functions Steering Committee, I had the opportunity to see just how unique we were in relation to the rest of the country. Outside of New Jersey, many health departments are based on county or regional design. They employ significantly larger number of staff and often provide a much larger range of services. Unlike New Jersey, they often have support from state funding.

The National Public Health Accreditation Board (PHAB) standards and processes were designed for the vast majority of health departments throughout the country, often with larger departments and greater resources than most of the departments we have here in New Jersey. This often makes it difficult for many of our health departments to reach the PHAB standards given staffing and financial re-sources available on the local level. These standards are something we all should strive for. We need to make this workable. We need to consider altering the process for certification in New Jersey to meet our abilities to achieve these laudable goals. We need to encourage, not discourage our departments to strive for achieving the results that PHAB accreditation hopes to achieve.

In order to break down these barriers, I'm suggesting that a consortium of public health organizations be formed to look at new methodologies and funding sources to achieve the goals of accreditation and eventually achieve accreditation for our local health departments. These methodologies should come from our experience and our public health professionals in New Jersey and be shared with PHAB for consideration and implementation. We need methods that will work in New Jersey and facilitate improving our departments and achieving accreditation.

Here are three basic possibilities that I believe should be considered by such a consortium:

1. Establish a tiered system of accreditation steps that would recognize success as various actions are taken to achieve final accreditation. If there were standards that were attainable and recognized it would encourage Boards of Health to urge participation, see improvements and also make the process achievable by breaking it into a series of steps that can be reasonably budgeted.
2. Establish support for smaller departments through possible grants. Obviously small departments have smaller resources. PHAB's standards seem to infer that a small department consists of 30 employees, which in New Jersey, would be a large department even if we have any that size. Financial and staffing resources in small departments face more barriers to certification than larger departments. These barriers discourage the accreditation process.
3. Mandate that the members of Local Boards of Health are trained and certified through a set curriculum and standards as part of the process in New Jersey. The more we know as members of Local Boards of Health, the better able we will be to work with our health departments to achieve the goals that the PHAB envisioned. This is crucial. Certifying a health department cannot be complete without also certifying the members of the Board of Health that are the policy makers and evaluators.

I am sure that we all have the same goal: to provide the best public health services to our communities. I suggest we continue to look at the best methods, tools and processes to overcome barriers to both improvement and eventual accreditation.

Editor's Note:

The Public Health Accreditation Board (PHAB) website is at <http://www.phaboard.org/>

In the Special Supplement to the June 2017 issue of *Pedagogy in Health Promotion*:

“The Role of the Public Health Training Centers in Advancing Public Health Department Accreditation” <http://bit.ly/2sneL6j>

“State Health Department Accreditation Technical Assistance: A Focused Strategic Thinking Approach” <http://bit.ly/2scpqks>

Medicaid and the American Health Care Act (AHCA)

By Gwyneth M. Eliasson, JD, MPH

On June 15, 2017, the Network for Public Health Law (NPHL) and the American Society of Law, Medicine & Ethics (ASLME) co-sponsored the webinar “Congressional Action on Health Care and the Restructuring of Medicaid.” Mara Youdelman, a Managing Attorney at the National Health Law Program (NHeLP), first spoke about the demographics of Medicaid enrollees (e.g., people with disabilities) and Medicaid’s status as an entitlement (not discretionary) program. Ms. Youdelman then discussed the current federal-state partnership in Medicaid financing as well as the cost-shifting challenges faced by states if Medicaid were funded by a block grant (fixed amount for a state) or by a per-capita cap (fixed amount for each enrollee).

Under the House of Representatives-passed American Health Care Act (AHCA), over 10 years, Medicaid funding would be cut by more than \$800 billion, and millions of people would lose their Medicaid coverage. The Medicaid program would be funded by a per-capita cap, but states could use a block grant for non-elderly, non-disabled enrollees. Funding for the Medicaid expansion would end in 2020 (with some exceptions). As of October 2017, states could impose work requirements (again, with some exceptions). NHeLP’s “Top 10 Changes to Medicaid Under House Republicans’ ACA Repeal Bill” (updated June 20, 2017) is available at <http://bit.ly/2sREgg0>.

On June 22nd, the Senate released its version of the AHCA, which *The New York Times* described as “in some respects, more moderate than the House bill” (<http://nyti.ms/2sYMXG8>). A vote might occur next week before the Congressional recess.

To view/download the slides or listen to and watch the playback: <http://bit.ly/2tr8of5>

Kaiser Family Foundation Fact Sheet (June 2017) on “Medicaid in New Jersey” <http://kaiserf.am/2sQRTMg>

Watch Justice in Aging’s June 14th webinar on “Medicaid, the AHCA, and Older Adults” or download the PowerPoint: <http://bit.ly/2rDsxOy>

Career Corner: Resources for Job Seekers

Compiled by Gwyneth M. Eliasson, JD, MPH

- Idealist Careers on “4 Common Resume Mistakes: Find Them, Fix Them” <http://bit.ly/2oFxEQf>
- *The Washington Post*: “Creating A Resume To Stand Out From The Crowd” <http://bit.ly/2nhFtvY>
- Idealist Careers on “4 Common Interview Mistakes and Their Fixes” <http://bit.ly/2lh2biF>



New Jersey Public Health Association

NJPHA's quarterly Newsletter offers you an opportunity to write about public health topics.

Deadline for Fall 2017 Issue: Friday, September 22nd

Articles on ANY public health-related topic are welcome, such as:

- Internship or fieldwork (capstone/practicum) experience
- Work with a public health program or research project
- Public health events or news at your school
- Thoughts on a policy with public health implications
- Commentary on a public health issue
- Public health career advice
- Local, state, or national public health events, projects, or advocacy efforts
- Other news of public health importance

Please include this information:

- Title of article
- Byline with:
 - Your name and degree(s)
 - Your academic institution or employment affiliation
- A head shot or picture of yourself (if available)

Please follow these article submission guidelines:

- In Microsoft Word with 12-point, Times New Roman font
- Single-spaced
- 300-word maximum
- References (if applicable)

For examples of published articles, see past newsletters, posted on NJPHA's website:

<http://njpha.org/>

Email your article (or any questions) to the Editor - Gwyneth M. Eliasson, JD, MPH:

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