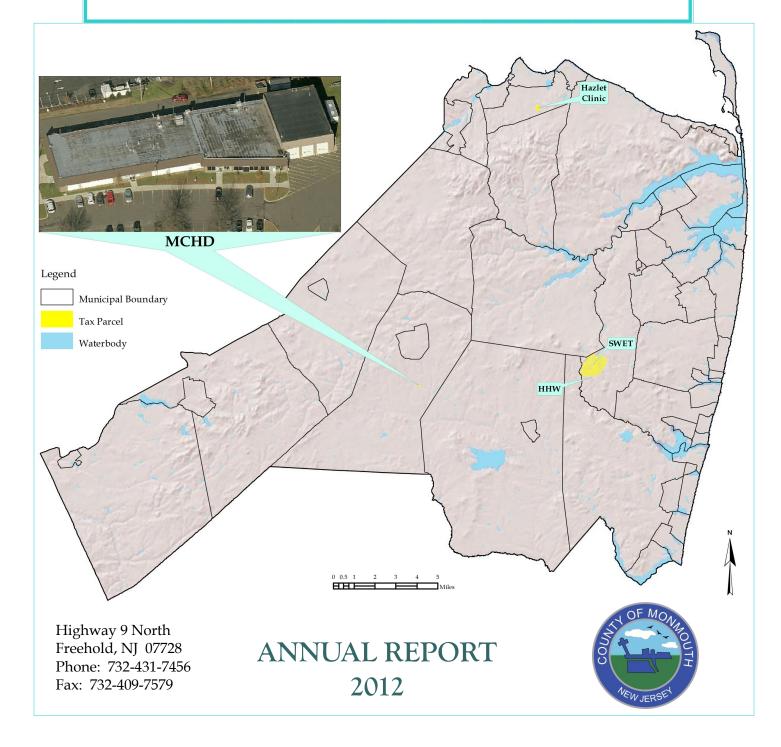
MONMOUTH COUNTY HEALTH DEPARTMENT



Michael A. Meddis, M.P.H. Public Health Coordinator & Health Officer

Mission Statement: empower residents of Monmouth County to achieve optimum health through the provision of the ten essential public health services.

- 1. Monitor health status to identify community health problems.
- 2. Diagnose and investigate health problems and hazards in the community.
- 3. Inform, educate and empower people about health issues.
- 4. Mobilize community partnerships to identify and solve health problems.
- 5. Develop policies and plans that support individual and community health efforts.
- 6. Enforce laws and regulations that protect health and ensure safety.
- 7. Link people to needed personal health services and assure the provision of healthcare when otherwise unavailable.
- 8. Assure a competent public health personal healthcare workforce.
- 9. Evaluate effectiveness, accessibility and quality of personal and population based health services.
- 10. Research for new insights and innovative solutions to health problems.

Monmouth County Board of Chosen Freeholders

Thomas A. Arnone, Director Serena DiMaso, Deputy Director Freeholder Lillian G. Burry Freeholder John P. Curley Freeholder Gary J. Rich, Sr.

Monmouth County Board of Health Members

Frank Pingitore, President Thomas Calabrese, Vice-President June Counterman, Secretary/Treasurer Judy Thorpe Dr. Jon Barone Brian Charnick Marianne Longobardi Ann Buontempo

Monmouth County Health Department 3435 Highway 9, Freehold, NJ 07728 telephone: 732-431-7456 fax: 732-409-7579

The Monmouth County Health Department is one of six health departments in Monmouth County. The following towns participated in the Monmouth County Board of Health System in 2012:

Aberdeen Allentown Asbury Park Atlantic Highlands Avon-By-The-Sea Belmar Bradley Beach Eatontown Englishtown Farmingdale Hazlet Holmdel Howell Keyport Lake Como Manasquan Marlboro Matawan Millstone Neptune City Neptune Township Oceanport Roosevelt Shrewsbury Township Union Beach

Monmouth County Board of Health 2012 Annual Report

Overview

The Monmouth County Board of Health, established in 1978, is composed of 9 members who are appointed by the Board of Chosen Freeholders. The Freeholder Board's function is to establish policy, and govern the services provided by the Monmouth County Health Department.

Principle Objectives

- As a field office of the New Jersey Department of Health and Senior Services (NJDHSS) and the New Jersey Department of Environmental Protection (NJDEP), enforce the provisions of the New Jersey State Sanitary Code and regulations set forth in N.J.S.A. 24:14a-1 et seq., 26:3-69:1, and 58:11-23, as well as, local codes and ordinances that protect public health.
- Deliver a modern and manageable array of public health services as required by N.J.A.C. 8:51, entitled "Public Health Practice Standards of Performing for Local Boards of Health in New Jersey".
- Provide leadership in building countywide core capacity to respond to bioterrorism and other public health threats.

Through the Department's programs and services, residents benefit directly through the Department's population-based clinical services which provide primary and secondary disease prevention. Residents benefit indirectly through protection of food and drinking water supplies, and ensuring compliance with environmental health regulations, related to air, water, noise and nuisance control.

Principle Activities

- Administrative and organizational management services, including but not limited to planning, organization, public health staffing, coordination and response, budgeting and evaluation
- Enforcement of public health and environmental laws and regulations
- 24/7 surveillance, detection and epidemiologic response to potential bioterrorism incidents or outbreaks of infectious disease
- Communicable disease control
- Management and operation of the New Jersey LINCS Health Alert Network
- Public Health Emergency Preparedness Planning
- Maternal child health services
- Clinical primary and secondary preventive services
- Rabies control
- Comprehensive diagnostic and treatment services for Tuberculosis and sexually transmitted diseases
- Health education/health promotion

Past and Present Collaborative Efforts

An important function of the Department is collaboration with community-based organizations and institutions to identify health problems and assure access to health services. For example, beginning in 2005, the Department worked in conjunction with the 6 other health departments in the County in bringing together a group of individuals representing over 40 public and private healthcare providers, businesses, schools, social service and voluntary health organizations to participate in an initiative to assess community health, utilizing a strategic planning tool called Mobilizing for Action Through Planning and Partnerships (MAPP). This tool helps prioritize public health needs; identify resources to address them, and ultimately to develop a Community Health Improvement Plan (CHIP). The New Jersey Department of Health and Senior Services requires local health departments to update the CHIP every 5 years. The Plan completed in 2007, identified 6 strategic issues:

- 1) Barriers to healthcare
- 2) Comprehensive healthcare despite the high cost of living in Monmouth County
- 3) Tobacco, drugs and alcohol use and abuse
- 4) Transportation barriers
- 5) Care for the older adult population
- 6) Cancer morbidity and mortality

Committees were subsequently formed to develop programs and services to address these issues. In 2011, the MAPP Committee changed its name to "Health Improvement Coalition of Monmouth County", and updated the CHIP. The top 3 issues to be addressed for the period 2012 - 2016 are, risk factors for heart disease, adult and childhood obesity, and barriers to healthcare.

Other examples include:

Formation of a partnership with Jersey Shore University Medical Center for the provision of comprehensive Sexually Transmitted Disease (STD) diagnostic and treatment services to residents.

Working with school systems to provide school-based Hepatits B immunization programs.

Collaboration with the Haitian Christian Social Cultural Association to establish a primary care clinic for the Asbury Park Haitian community.

Membership on the former Monmouth/Ocean AIDS Consortia, a diverse body of HIV/AIDS providers who collectively addressed the myriad of needs by HIV/AIDS patients.

Working in conjunction with the Monmouth County Correctional Institution to provide Tuberculosis diagnostic and treatment services for inmates and staff. Working with Checkmate, Inc., in the planning and implementation of mobile HIV testing in high risk communities.

Through a grant from the Department of Human Services Office for Prevention of Mental Retardation and Developmental Disabilities, the Department partnered with the Urban League to provide lead poisoning prevention education in high risk communities.

Through a grant from the New Jersey Department of Health and Senior Services, the Department partnered with the Regional Perinatal Consortium of Monmouth and Ocean Counties Inc., to conduct lead poisoning prevention outreach and education to child care centers, healthcare providers and parents.

Worked with local Office's of Emergency Management in designing models for the rapid distribution of prophylactic medications to first responders and their families after a confirmed release of a bioterrorism agent.

The Department has worked closely with Monmouth University's Office of Science and Technology to increase the Department's data management capabilities.

The Department is a member of the Monmouth County Cancer Coalition which is involved in the planning and coordination of cancer screening and education services countywide.

Through a contractual agreement with the Visiting Nurse Association of Central Jersey Inc. (VNA) the Department is a designated provider of cancer screening services through the New Jersey Cancer Early Detection and Education program (CEED), funded by the New Jersey Department of Health and Senior Services.

Collaboration with Prevention First, Inc. to provide the Childhood Nutrition and Activity program to participating daycare centers and preschool programs.

Collaboration with Prevention First, Inc. to provide primary care physicians with tobacco cessation materials and resources to encourage patients to quit smoking.

Participation in United Way focus groups and their health impact subcommittee.

Membership on the Monmouth County Suicide Prevention Task Force.

Membership on the Black Infant Mortality task force facilitated by the Regional Perinatal Consortium of Monmouth and Ocean County, Inc.

Collaboration with the Central New Jersey Maternal and Child Health Consortium and the Regional Perinatal Consortium of Monmouth and Ocean County, Inc. to provide childhood lead poisoning prevention outreach and education to parents, homeowners, tenants, landlords, and physicians.

Provision of nursing and public health internship opportunities to students of Monmouth University and The University of Medicine and Dentistry of New Jersey, respectively. Collaboration with school districts, municipal officials and county Offices of Emergency Management to provide approximately 17,000 H1N1 vaccinations to residents.

Collaboration with Jersey Shore University Medical Center, Division of Cultural Diversity to provide H1N1 vaccinations to vulnerable populations in Asbury Park.

Collaboration with the New Jersey Commission For The Blind and Visually Impaired to provide free eye help screening services.

Organization Capacity

The Department's programs and services are funded by local dollars as well as grants from the New Jersey Department of Health and Senior Services for emergency preparedness, H1N1, case management of children with evaluated lead levels, immunization outreach, sexually transmitted disease diagnostic and treatment services, childhood lead poisoning prevention outreach and education and Medical Reserve Corp recruitment and training.

Currently, the Department is composed of 54 employees. Professional staffing consists mainly of Registered Environmental Health Specialists and Registered Nurses who hold current licenses from the New Jersey Department of Health and Senior Services and the Board of Nursing, respectively.

Professional service contracts are in place for laboratory services, physicians, nurse practitioners, phlebotomy, mammography, x-rays and interpretation services for the Hispanic population.

The Department is equipped with state-of-the-art computer systems, connectivity, security and data storage capacity. Systems are managed by a full-time Network Administrator. Additionally, a full-time Geographic Information System (GIS) Technician is available for data mapping.

As a part of the County government system, the Health Department has access to wide array of county-based resources, such as the county print shop, the personnel department, information technology, the finance and purchasing departments, buildings and grounds and legal counsel.

Our Underground Storage Tank (UST) unit provides compliance assistance for regulated underground storage tank systems to several county agencies. In addition, the Hazmat/UST staff provides logistics support for the Health Department's Strategic National Stockpile Personal Protective Equipment distribution program.

Continuing education and training are essential parts of our mission to provide a comprehensive emergency preparedness system throughout Monmouth County. The Health Department's hazmat unit maintains some of the most highly trained Hazmat/Chemical, Biological, Radiological, Nuclear, and Explosive (CBRNE) response personnel in the State of New Jersey. In 2011, we continue to expand our emergency response capability and competence by taking advantage of numerous federal, state and local training opportunities.

Public Health Protection

Our staff of fifteen (15) Registered Environmental Health Specialists (REHS) enforce public health and environmental laws and regulations, which include, but are not limited to the protection of food, bathing place sanitation, public health nuisances and hazard, preventable injuries and exposure-related diseases in both the workplace and community settings.

Public Recreational Bathing and Youth Camps

Public recreational bathing sites are inspected at least 2 times during the operating season to ensure compliance with the New Jersey Sanitary Code. Public recreational bathing sites include indoor and outdoor public pools and spas as well as rivers, bays and ocean bathing beaches. Splash parks and playgrounds with water features are also monitored. Youth camp inspections ensure that camp structures and facilities meet local codes, appropriate staff credentialing, general camp management and safety, as well as other requirements, based on the camp activities. Public recreational bathing inspections also include assessment of the chemical and physical quality of the site, maintenance of pool and safety equipment, and appropriate certification of pool staff and operators.

In 2012, the Health Department staff inspected 130 swimming pools, spas, splash parks and bathing beaches, and our staff responded to 13 complaints regarding public recreational bathing sites. The staff also inspected 24 youth camps. The American Camping Association accredited camps are now allowed to perform their own preopening inspections. Bathing and food service facilities at those camps are still inspected by Registered Environmental Health Specialist staff preseason.

Rabies Control

The Health Department provides its member municipalities with several program geared toward the prevention and control of rabies. Rabies is an invariably fatal disease transmitted through virus laden saliva of a rabid animal introduced by a bite of a scratch. It is habitually present in New Jersey's wildlife population, particularly in raccoon.

The Health Department oversees free vaccination programs for cats and dogs. In 2012, the Department vaccinated 2,399 dogs and cats at 28 clinics held in the municipalities of the Department. The Department also approves the delivery of specimens for animals suspected of being infected with rabies virus, to the New Jersey Department of Health and Senior Services (NJDOH) for testing.

Another aspect of rabies control involves investigating animal bite exposures of our residents. Whenever a human bite exposure occurs, the animal is placed under a 10 day observation (quarantine) period. The animal is revisited at the end of the 10 day period to ensure it is not showing signs of illness. The Health Department conducted 347 animal bite investigations.

Licensed pet care facilities and pet shops are inspected for compliance with general sanitation and basic welfare standards in accordance with kennel and pet shop regulations set forth by the New Jersey State Sanitary Code. The Health Department also investigates complaints received from the general public. Our staff inspected 32 facilities and responded to 25 animal complaints in 2012.

Septic and Well Inspections

In 2012, (259) plans for new septic systems and wells were reviewed by our staff to ensure compliance with construction standards. Inspections are made throughout the installation process. A total of 1,434 well and septic inspections were conducted in 2012. The total reflects the installation of 189 new septic systems, 70 new wells and certification of existing systems required for reality transfer in some municipalities. The staff also witnessed 253 soil tests in member municipalities.

The Health Department reviews site plans and variance requests on behalf of local planning and zoning boards for comments regarding Health Department regulations and issues. The department conducted 139 plan reviews in 2012.

Smoke Free Air Act Initiative

Since January 2006, smoking has been prohibited in most New Jersey indoor public places. Restaurants, bars, retail stores, and most other businesses with public access must be maintained smoke free. Citizen complaints regarding smoking indoors are investigated with violations issued for non-compliance. A total of 5 complaints were investigated in 2012.

Body Art Procedures

at the event.

Businesses which perform tattooing, permanent cosmetic procedures and ear/body piercing are regulated by Chapter 8 of the Sanitary Code, to ensure that adequate sterilization, sanitation, and safety standards are maintained. Artists and operators performing these procedures must document adequate credentials and apprenticeship. Our yearly inspections are conducted in addition to investigation of any complaints received. In 2012, the Department inspected 14 body art facilities, and reviewed 5 plans. The Department also inspected a 3-day Body Art festival with more than 80 artists from across the country, and more than 10,000 visitors. This event requires review of each artist's credentials and training in addition to having multiple inspectors present each day

Food Surveillance and Sanitation

Retail food establishments must operate in accordance with Chapter 24 of the New Jersey Sanitary Code, and are inspected at least once during each year. In January 2007, The New Jersey Department of Health (NJDOH) adopted new, more stringent regulations based on the Food and Drug Administration (FDA) food code which places increased emphasis on critical areas of food-borne disease control such as hand-washing and maintaining foods at proper temperatures.

2012 proved to be a challenging year for our Retail Food Program. A new inspection program and database was developed by our IT staff member *Umberto Bianco*. The program was designed to utilize electronic inspection reporting using tablet PCs in the field. This electronic report form was intended to automatically generate reports into a database format, this eliminating paper reports and saving the inspector's valuable time. As with any new technology or procedural change, the program is taking longer to implement than expected and is still a work in progress. Modifications have been made to streamline the process which will address the current issues and yield favorable results in 2013.

The Registered Environmental Health Specialist staff also encountered the Bamboozle Festival in May 2012. The Bamboozle was a 3-day music festival featuring 6 stages on the beachfront area of Asbury Park. Menus and plans from 33 temporary vendors were reviewed prior to the event. Many small, temporary vendors were inspected in areas adjacent to the festival grounds. Also, many of the local licensed facilities set up additional temporary outdoor cooking sites to accommodate the crowds of people. Five (5) inspectors were present throughout the event to check food handling, sanitization and temperature control. Inspectors monitored the sanitary facilities, waste disposal and event clean-up as well. The diligence of our Registered Environmental Health Specialist staff was rewarded by the success of this large gathering multi-day event which ended without any outbreak incident or significant food handling or sanitation issue. This is a tremendous accomplishment considering almost 100,000 people were in attendance.

Superstorm Sandy provided an even greater challenge to our food program than Hurricane Irene did in 2011. Numerous facilities were flooded or destroyed as a result of the storm. Belmar, Manasquan, Union Beach, Keyport and Asbury Park were particularly hard hit with numerous facilities suffering catastrophic damage. All of our municipalities suffered tremendous looses due to extended power outages. Five hundred eighty-seven (587) facilities were inspected in the immediate aftermath of the storm to ensure that proper sanitization and refrigeration was available before operating. Food supplies had to be checked, with spoiled items destroyed or removed from sale. All of these inspections were conducted while several of the Registered Environmental Health Specialist staff was still deployed to the County operated shelters. School, daycare centers and nursing homes were also contacted and inspected as dictated by their individual circumstances.

Throughout the remainder of the year, 2,202 routine retail food inspections were conducted resulting in 19 summonses being issued for the violations. Our inspectors also investigated 318 complaints involving sanitation, food-handling and/or food-borne illnesses.

Registered Environmental Health Specialist staff responded to several requests from the New Jersey Department of Health and Senior Services to investigate food recall compliance. Local retail compliance was verified through inspection of affected facilities with checks made for the presence of recalled products on shelves or in use. In 2012, facilities were inspected for a cheese product recall and peanut butter product recall. During both these events, implicated products were located in facilities and removed from sale by our inspectors.

Registered Environmental Health Specialist staff also assisted with the recall involving contaminated medical products associated with the multi-state fungal meningitis outbreak. Several local medical facilities were recipients of items on the recall list and had to be contacted to ensure products were removed from use.

In 2012, Registered Environmental Health Specialist staff conducted investigations into 2 Norovirus outbreaks associated directly with retail food establishments. Both ourbreaks occurred at celebratory event: a rehearsal dinner and a wedding. Working in conjunction with our County Epidemiologist, interviews of food handlers and review of food handling practices were conducted at the facilities. After the interviews, some staff members submitted specimens for testing by the New Jersey Public Health Laboratory to confirm the presence of Norovirus. Specimen results were found to be negative for Norovirus in food handlers. Operators and staff at each of the affected facilities were reminded of the importance of screening for signs of illness, encouraging workers to stay home when ill, and the absolute importance of not having direct bare-hand contact with ready-to-eat foods.

Our staff also interviewed the guests who became ill, and advised those involved in food handling and patient care on what precautions were necessary at their places of employment.

Public Health Nuisance Complaints

The Health Department staff responds to a wide variety of citizen complaints and public health emergencies 24 hours a day/seven days a week. Complaints range from poison ivy and mosquito breeding to sewage overflows and bedbugs. Other routine complaints include rodent infestations, mold, garbage overflow, housing deficiencies, animal waste and unsanitary public restrooms. In 2012 the Registered Environmental Health Specialist staff investigated 478 complaints resulting in 678 inspections and 11 municipal court summonses.

In response to the recurring issue and prominence of bedbug complaints, our Registered Environmental Health Specialist staff developed educational presentations which were provided to various community living groups and organizations. In 2012, 3 sessions were presented with approximately 100 people in attendance.

Tanning Facilities

In 2012, our Registered Environmental Health Specialist staff continued to inspect tanning facilities following the passage of statewide regulations. Fifteen (15) facilities were inspected, and 1 plan for a new facility was reviewed.

New Jersey American Water Emergency

On June 30, 2012, three (3) major water lines leading in and out of the Swimming River Water Treatment Facility ruptured, causing residents and businesses in 22 municipalities to lose their water service. For many others, boil water advisories were in effect.

Public health staff were called upon to contact the retail food establishments, long-term care facilities and medical treatment centers affected by this loss, to notify them of the emergency advisory and provide guidance on how to safely access the water needed to continue their operations. More that 500 facilities were contacted to ensure that adequate procedures were in place. Over 225,000 residents were affected by this emergency, which lasted through the Fourth of July holiday weekend.

Water distribution sites were set-up in several locations. Health Department employees helped coordinate water deliveries with Office of Emergency Management personnel, and assisted with free water distribution at distribution sites in Oceanport and Shrewsbury Township.

SuperStorm Sandy

Superstorm Sandy arrived at the very end of hurricane season. The timing was both good and bad for our staff, residents and communities. There were 2 significant issues created by Sandy's timing: schools were in session and the weather following the storm was cold and included a snow storm. Thus, evacuation shelters and replacement housing became a primary focus.

Lessons learned from Irene caused a new plan to be set in motion through the Office of Emergency Management. Locals would stage individual reception centers, with medical needs clients and their families sent to two large County/State facilities. Those facilities were located at Monmouth University and the former Arthur Brisbane Child Treatment Center. REHS staff and Public Health Nursing staff were assigned to work at both facilities. For the duration of the storm and most of the week following, our staff remained at these facilities 24 hours a day performing tasks which included patient hygiene, food service, full nursing services, obtaining medication, animal care and facility operations. Shelter managers also provided the link between operations and OEM. Because of the complete devastation in some of the shore communities, one shelter remained open for several weeks, partially staffed by Health Department personnel.

During the beginning of the recovery phase, staff was stretched thin by the volume of assistance and inspections required to restore retail food facilities and multi-family dwelling units. Much of our hardest work came once again after the storm.

Registered Environmental Health Specialist staff responded to mold and water damage complaints from residents who were victims of flooding. Information packets were created to assist homeowners in the clean-up and restoration process. This process is continuing into 2013.

Site visits were conducted in the hardest hit areas. Issues with the vast amount of storm damage debris and tree waste were common problems encountered. Registered Environmental Health Specialist staff also assisted the nurses when vaccination clinics were offered to residents involved with the flood water clean-up.

For the second year in a row, our Health Department staff faced a major disaster and responded with a superb, professional effort of which we are immensely proud.

Clinical and Preventive Health Services

Childhood Immunization Audits

Inspectors routinely verify compliance with childhood immunization requirements by auditing student records at daycare and school facilities. Individual records are reviewed for timely completion of required vaccines and identification of those who do not have vaccination protection due to exemption.

In the event of an outbreak of a vaccine-preventable disease, unvaccinated children must be identified and excluded, to stem the spread of the disease. In 2012, 150 immunization audits were conducted, resulting in 2 summonses being issued for non-compliance.

Child Lead Poisoning Prevention Program (Patient Focus)

The Monmouth County Health Department Childhood Lead Poisoning Prevention Program provides medical and case management to children with elevated lead levels, and free lead testing for children without health insurance. Children with lead levels above 10 ug/dl are placed into complete case management that oversees the medical components of the child's care as well as ensuring that sources of lead exposure are removed from the environment. Our Public Health Nurses and lead inspector/risk assessor licensed Registered Environmental Health Specialist work as a team to address the medical and environmental aspects of each case of elevated blood lead levels.

Lead poisoning is entirely preventable. The key to keeping our children healthy is to stop them from coming into contact with lead, treat children who have been poisoned, and educate parents and child caregivers about the dangers of lead.

In 2012, the Monmouth County Health Department was asked by the New Jersey Department of Health to provide consultant services and train and cover lead cases in other jurisdictions. We have been taking phone calls from other health departments to consult on lead cases and possible sources of lead, actually assisting one in their jurisdiction, and testing consumer goods for three other health departments. In 2012, we covered the Jersey City Lead Program for 6 months.

A staff member went to Jersey City at least 2 days per week performing their case management. The State has also asked up to provide Leadtrax training for New Jersey. The program is a web-based program to track all lead cases in New Jersey. Ten (10) classes were held in 2012.

In 2012, the Monmouth County Health Department assisted with 10 inspections in other jurisdictions throughout New Jersey, and tested consumer products for 12 lead cases in other jurisdictions.

The Monmouth County Health Department offers free lead screening to children from 6 months to 6 years old who do not have medical insurance.

In 2012, 300 children without insurance were screened for lead poisoning.

| Lead Levels | Total Screened |
|-------------|-----------------------|
| < 5 | 260 |
| 6 - 9 | 13 |
| 10 - 14 | 0 |
| = > 15 | 1 |

In 2012, fifteen (15) children were referred to the Monmouth County Health Department for elevated blood lead levels.

| Lead Levels | Total Referred |
|-------------|-----------------------|
| 10 - 14 | 9 |
| 15 - 19 | 2 |
| 20 - 30 | 3 |
| 30 - 40 | 0 |
| 40 - 50 | 0 |
| 50 - 60 | 0 |
| 60+ | 0 |
| Totals | 15 |

For children with blood lead levels of 10 or above, our licensed lead inspector/risk assessors checked the home where the child lives as well as previous addresses within 6 months of the elevated blood lead level, and secondary addresses in which the child spent time during the week. This may include a babysitters, daycare or relative's home. A total of 20 inspections were conducted in 2012 related to children with elevated blood lead levels. Of the 20 inspections, lead was found in 20 of the dwellings.

The lead inspector/risk assessors also conduct cursory inspections for the Monmouth County Housing Project. The housing project headed by the Monmouth County Community Development provides grant money to homeowners for repair on their home. As part of the program, homes built before 1978 undergo a lead screening inspection. If any lead is found, the housing project hires a contractor to conduct a complete lead inspection including abatement of lead surfaces. In 2012 eleven (11) houses were inspected for the Community Development program.

The lead inspector/risk assessors also respond to complaints of power washing, sanding, scraping, and other such complaints that causes paint chips and/or dust to be released into the environment. The paint is checked for lead and proper cleanup is ensured. In 2012, two (2) complaints were investigated.

Consumer Product Testing

In 2012, the Monmouth County Health Department licensed an XLT unit designed to test consumer products for lead, cadmium and mercury content. Testing was done at health fairs, in homes of children with elevated blood lead levels, and for other health departments. One hundred and two (102) consumers had 277 items tested; of these items

21 were found to have elevated lead levels over 12%. These items were referred to the appropriate federal agencies for further testing and the recall process.

Healthy Traveler Program

The Centers for Disease Control and Prevention (CDC) makes recommendations for vaccination for individuals traveling internationally, based on the destination of travel and diseases endemic to that area.

Since 1998, the Monmouth County Health Department has provided an International Traveler Program in accordance with CDC guidelines, with tailored education as well as vaccinations for the traveler.

Since the program's inception, over 1,000 travelers have been provided with preventive education and vaccination prior to travel. In 2012, over 300 individuals contacted the Monmouth County Health Department for travel-related purposes. In the same year, the travel clinic served 131 patients at 15 scheduled clinics, and provided 167 doses of vaccine.

Hypertension Screening Program

The Monmouth County Health Department provides hypertension screening at health fairs and various community events. The program includes blood pressure screening with risk factor counseling, diet education, smoking cessation, exercise, diabetes, and overall physical health. Referrals are made as needed. In 2012, a total of 205 residents were screened and 10 referred to their primary care provider for follow-up. A total of 10 participants were diagnosed as hypertensive and program participants were counseled on diabetes as follows:

| Number of risk assessments completed | 205 |
|--|-----|
| Number of participants referred for medical evaluation | 10 |
| Number of participants with known diabetes who receive education | 35 |
| Number of participants referred for education | 25 |
| Number of participants referred who sought further evaluation | 10 |
| Number of participants newly diagnosed | 10 |

Immunization Services

Vaccines are among the most successful and cost effective public health tools available for preventing disease and death. They help protect individuals and entire communities by preventing and reducing the spread of infectious diseases. Infants are particularly vulnerable to infectious diseases, which is why it is critical to protect them through immunization. Each day nearly 12,000 babies are born in the United States who will need to be immunized against 14 vaccine-preventable diseases before age 2. Childhood immunizations are provided free of charge to children from birth to 18 years of age who are uninsured. Clinics are offered at the Monmouth County Board of Social Services (MCBSS) building on Kozloski Road in Freehold, and in collaboration with the Neptune school system. The sites are "walk-in" clinics, making immunizations more accessible for working parents and school-age children. With parental permission, the child/children are entered into a statewide immunization registry, which encourages timely and age appropriate immunizations. In addition, parents have the opportunity to apply for assistance, including Medicaid and New Jersey *Kidcare*. In 2012, the clinic immunized 349 children, administering 827 total immunizations.

Infant and Preschool Immunizations

| Immunized | 104 |
|-----------------------|-----|
| Unduplicated children | 104 |
| Total immunizations | 104 |

School Age Children

| Total immunizations | 245 |
|-----------------------|-----|
| Unduplicated children | 230 |
| Immunized | 245 |
| | |

Adolescent and Adult Immunizations

Adolescent and adult immunizations are offered at 3 clinic sites. The immunizations include influenza, pneumonia, tetanus, measles, mumps rubella, meningitis, Hepatitis A, Guardasil, Zoster and tetanus, diphtheria and pertussis, (Tdap). The Hepatits B program is also offered to our towns for employees required to have the vaccine as part of their bloodborne pathogen program.

In 2012, we provided Hepatits B vaccines to Marlboro Police, Neptune Fire and First Aid, Asbury Park First Aid, Matawan Police, Fire and First Aid, Asbury Park and Neptune Schools, and Marlboro First Aid.

Post-Hurricane Sandy, tetanus, Hepatitis B, and influenza vaccines were offered at the Neptune Senior Center, Union Beach School, and Middletown Croden Hall for first responders and residents involved and/or affected by the storm.

| Hepatitis B | 225 |
|-----------------------|-----|
| Hepatitis A | 57 |
| Tdap | 278 |
| Meningitis | 22 |
| Zoster | 1 |
| Guardisil | 73 |
| Pneumonia | 12 |
| IG for exposure Hep A | 0 |
| Total immunizations | 668 |

Seasonal Influenza Clinics

In 2012, the Department's team of Public Health Nurses provided 2,000 seasonal influenza vaccinations at senior centers in various municipalities.

Sexually Transmitted Diseases

In 1998, the Monmouth County Health Department was approached by the Chief of Infectious Disease at Jersey Shore University Medical Center (JSUMC) regarding the high volume of sexually transmitted diseases (STD) being treated in the hospital's emergency department. A collaboration was formed between JSUMC and the Monmouth County Health Department to establish an STD clinic on the campus of JSUMC to provide appropriate treatment, follow-up, and risk reduction education for Monmouth County residents.

Clinic is held at Jersey Shore University Medical Center in Neptune on Tuesdays and Thursdays from 4 to 7 p.m.

Clinic services include physical examination, diagnostic services by a physician or physician's assistant, and treatment as needed. Our Field Representative /Disease Control provides comprehensive follow-up, including STD education, risk factor counseling and partner notification.

| Patient Age | Patient Visits |
|------------------|--------------------|
| 11-18 | 32 |
| 19-29 | 1,027 |
| 30-39 | 299 |
| 40-59 | 268 |
| 60 + | 27 |
| Total | 1,800 |
| | |
| Diagnosis | Number of Patients |
| Chlamydia | 133 |
| Gonorrhea | 17 |
| Herpes | 0 |
| Syphilis | |
| Syphins | 11 |

Tuberculosis Program

Tuberculosis is spread through the air from one person to another when someone who is ill with TB disease of the lungs or throat, coughs, speaks, laughs, sings, or sneezes. The people near the ill person breather the TB germs into their lungs.

People with TB disease, must take several different drugs for a lease 6 months, even if they begin to feel well after only a few weeks of treatment. This is because there are many bacteria to be killed. Taking several drugs as prescribed, will do a better job of killing all of the bacteria and preventing them from becoming resistant to the drugs. Tuberculosis can almost always be cured with medicine.

The Monmouth County Health Department TB Program provides complete case management which includes Mantoux testing, x-rays, physicals, medication management and monitoring of Tuberculosis cases and contacts. Tuberculosis testing services for employees of schools as well as Tuberculosis education and training in proper testing procedures is also provided.

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In 2012, the Monmouth County Health Department Tuberculosis Program provided care in 4,511 clinic visits. One hundred sixteen (116) close contacts of TB cases were identified and examined. Additionally, the TB clinic staff provided Mantoux testing for 948 individuals, conducted 244 chest x-rays, and managed prescription therapies for 403 patients.

Women's Health Program

Cervical cancer once was the leading cause of cancer death for women in the United States. However, during the past 4 decades, incidence and mortality (the number of deaths each year) from cervical cancer have declined significantly. Primarily because of the widespread use of the Papanicolaou (PAP) test to detect cervical abnormalities. In 2009, 12,357 women in the U.S. were diagnosed with cervical cancer, and 3,909 women died. In addition to preventing cervical cancer, cervical cancer screening can detect cancer early, when treatment is most successful.

Monmouth County Health Department cancer detection services include free pap screening, breast exams, and education about colorectal cancer screening. Mammography clinics are held 8 times a year, and free mammography is available to uninsured women. Referrals are made for women in need of diagnostic evaluation.

In 2012, the following cancer services were provided:

| Number of women age 15-34 screened for cervical cancer | 40 |
|--|-----|
| Number of women age 35-64 screened for cervical cancer | 50 |
| Number of women age 15-64 receiving breast cancer information | 205 |
| Number of women receiving mammograms | 115 |
| Number of individuals over the age of 40 receiving education for | 40 |
| colorectal cancer | |

Eye Health Services

Beginning in October of 2011, the Department began partnering with the New Jersey Commission For The Blind & Visually Impaired, to provide eye screening for residents. Services include testing for visual acuity, glaucoma, cataracts and other eye diseases and conditions at our main office in Freehold and various other sites in the County.

Vouchers are given for purchasing eye glasses, and referrals are made for free surgery for those who qualify. Clinics began in October and are held the second Monday of each month. The response has been overwhelming, and plans are being made to increase the frequency of clinics in 2012.

The Commission provides an Opthamologist for the screenings, and the Department provides the clinic facility, advertises the service, take appointments, issue the vouchers for glasses, and obtains client information needed for treatment referrals.

Clinic statistics - October through December 2012

| Total S | Screened: | 801 |
|---------|------------------------|-----|
| Findin | gs: | |
| ▲ | Normal Limits | 200 |
| ▲ | Abnormal Visual Acuity | 601 |
| ▲ | Glaucoma Suspects | 37 |
| ▲ | Cataracts | 28 |
| ▲ | Number with Diabetes | 370 |
| ▲ | Prescriptions for Eye | 601 |
| | Glasses | |

Health Fairs

The Monmouth County Health Department participated in more than 25 health fair/town days. The Monmouth County Health Department brought informational materials and provided screening for oral cancer, hypertension and lead, consumer product testing for lead, cadminum, mercury and immunizations at the various festivals.

Childhood Obesity Prevention

Our program to reduce and prevent childhood obesity is called Action For Fitness In Monmouth County. Our goal is to develop School Health Councils (SHC) to promote increased physical activity, encourage healthy eating habits and portion sizes, and improve nutrition education and access to healthier food choices in school. For the second year, we received a Shaping New Jersey grant from the New Jersey Department of Health, and we started a second SHC at the Belmar Elementary School and continued the SHC efforts at Farmingdale Public School.

Farmingdale Year 2:

- We purchased pedometers and developed a creative walking program called "Walk Around New Jersey" in which classrooms compete to see which could most quickly "walk" the amount of steps to get to New Jersey sites such as the Popcorn Park Zoo and Great Adventure.
- We began a daily Walking School Bus (WSB) with adult and teacher volunteers for one route in the town. This involved planning background checks, training,

uniforms, IDs for adult volunteers, and registration by families. Efforts are underway to start a second route. This is the first and only WSB program we know of in Monmouth County.

- We continue to hold Walk 2 School Wednesdays each week during fall and spring to encourage the entire student body to walk to school with their families.
- We rebuilt the walls of the garden beds to be taller so vegetables and herbs can grow deeper and bigger, and added more types of vegetables for kids to learn about and taste.
- Farmingdale has increased student participation in the second year of the Healthy Cooking Club, in which kids learn to cook and taste healthy foods. While our grant funded this program in year 1, the Board of Education now funds it with students who pay a fee.
- We funded a four-week roller skating program for the physical education department that taught many kids to roller skate, and saw an increase in kids roller skating around the neighborhood after school and on the weekends.
- We are partnering with the local YMCA to have a free swimming night for families and students.

Belmar Year 1: In September 2012, we began a second School Health Council in Belmar.

- We are building an edible community garden at the school for students to grow and taste more vegetables.
- We have begun a Walk-To-School day program to increase fitness and increase the number of kids coming to eat a healthy breakfast once a month.
- We are partnering with the YMCA to hold a family fit night with Zumba, yoga and calisthenics.
- The cafeteria manager is adding more healthy items to the school menus following USDA guidelines. We will also work on reducing portion sizes to those appropriate for kids.
- We will develop a School Party Policy to launch in Fall 2013 to limit portion sizes of sweets, eliminate sugary drinks, and increase the amounts of fruit, vegetables and water that is served at children's parties and school events.
- We have developed a regular newsletter for families to promote fitness and nutrition that is in English and Spanish. We have also started promoting SHC events on the school website and have a webpage for our activities.
- We are partnering with local Mayor's Wellness Council to have a walk-a-thon in town after school and promoting it to students and school families.

Emergency Preparedness

In August 2002, the Monmouth County Health Department was designated by the New Jersey Department of Health (NJDOH) as the Lead Agency for Public Health Preparedness in Monmouth County. As lead agency, the Department receives Emergency Preparedness grant funding from the NJDOH to evaluate and build its capacity to respond to acts of terrorism, outbreaks of a Novel influenza virus, and other public health emergencies. In 2012, Monmouth County Health Department continued to utilize an all-hazards approach to preparedness planning by following the Federal Public Health Preparedness, Emergency Public Information and Warning, Public Health Surveillance and Epidemiological Investigation, Responder Safety and Health, and Volunteer Management.

New Jersey Local Information Network Communications (LINCS)

LINCS is a statewide interactive electronic public health information system linking local, state and federal health agencies. Monmouth County Health Department is part of the 22 LINCS agencies in New Jersey, responsible for coordinating countywide access to public health information. Information exchanged through LINCS include health alerts, disease surveillance, investigation information, topics related to infectious disease and emerging pathogens, medical and food recalls. Recipients of LINCS messages include hospitals, business organizations, long-term care/assisted living facilities, pharmacists, physicians, school, local health departments and first responders. Presently, the LINCS Communication System reaches over 3,480 community partners.

Medical Reserve Corp (MRC):

The Monmouth County Health Department Medical Reserve Corp (MRC) is a 361 person team consisting of 236 medical professionals and 125 community volunteers. MRC volunteers have diverse skills and are trained and prepared to assist our County Health Department with public health priorities and emergency response. The MRC's overall goal is to improve community resiliency and public health in Monmouth County. All members are asked to complete 6 core training courses, including an Orientation To Public Health, Incident Command Training, Psychological First Aid, Personal Emergency Preparedness, an MRC Orientation, and Shelter Operations. Other trainings include Teambuilding, Outbreak Investigation, and Radiological Preparedness Training. Regular activities include providing volunteers to assist with annual flu clinics, health screenings, emergency preparedness training, health fairs, recruiting at local healthcare practitioner schools, and distributing public health information on lead poisoning, immunizations, and high blood pressure, and childhood obesity.

Our volunteers actively participate in the Farmingdale School Health Council by aiding in their Walking School Bus program, and attend their monthly planning meetings. A team of 17 MRC served the broader community by staffing a fluid station at the New Jersey Marathon in May 2012.

During the water main break incident in June - July, (22) MRC members volunteered 80 hours either at water stations in Middletown and Oceanport or at the Emergency

Operations Call Center in Freehold. During Super-storm Sandy, 60 MRC members provided 999 hours of valuable assistance in the 2 state-run shelters that were located in Monmouth County.

Medication Distribution

In 2005, the Department developed plans to distribute public health medication/vaccine to the 650,000 residents of Monmouth County during an emergency. Every municipality within the County has signed agreements with the Department to provide medication/vaccine to their residents at a local site within their respective jurisdictions. Planning efforts have been accomplished through the cooperation of the local Office's of Emergency Management (OEM) and the 5 other health departments in the County.

Through a contractual agreement with Monmouth University, a web-based computer program for pre-registration of all first responders and their household members. The program will provide accurate quantities of medication/vaccine needed to ensure that all Monmouth County's first responders and family members are protected. Presently, 53 municipalities participate in the pre-registration database. As of 2012 311,596 first responders and their family members have pre-registered in the database. As part of the planning process, the Department worked with local Emergency Management Coordinators in identifying 4 regional warehouse sites where medical equipment and medications will be distributed to first responders and residents during a public health emergency.

Infectious Disease Control and Surveillance

Surveillance is the ongoing assessment of the health of a community through the timely collection, interpretation and use of health related data. Surveillance tools like Hippocrates, Epicenter and Biosense assist the Epidemiologist in data collection and detection of anomalies suggestive of public health threats such as disease outbreaks and bioterrorism.

Surveillance of influenza-like illness (ILI) is conducted on a weekly basis. Schools, hospitals, physicians and nursing homes participate in the influenza surveillance. Additionally, the Epidemiologist investigates reportable diseases in accordance with New Jersey Administrative Code Title 8, Chapters 57, 58, and institutes control measures during outbreaks.

At least 4 Norovirus outbreaks were investigated, and timely public health measures were instituted in 2011. The following is a list of reportable diseases investigated by the Department. (<u>Note:</u> only those diseases with 5 or more total cases are included. Hepatitis B and C include acute, chronic and perinatal).

Diseases Reported in 2012:

_

| Disease | Count |
|-------------------------------------|-------|
| Amoebiasis | 05 |
| Babesiosis | 34 |
| Campylobacteriosis | 33 |
| Chlamydia | 412 |
| Ehrlichiosis | 20 |
| Giardiasis | 09 |
| Gonorrhea | 101 |
| Haemophilus Influenzae | 9 |
| Hepatitis A | 03 |
| Hepatitis B | 119 |
| Hepatitis C | 272 |
| Influenza | 15 |
| Lyme Disease | 682 |
| Pertussis | 29 |
| Rocky Mountain Spotted Fever | 05 |
| Salmonellosis - Non-Typhoid | 45 |
| Shiga Toxin-Producing E.coli (STEC) | 17 |
| Shigellosis | 07 |
| Streptococcus Agalactiae (GBS) | 02 |
| Streptococcus Pneumoniae | 23 |
| Streptococcus Pyogenes (GAS) | 18 |
| Syphilis | 232 |
| Varicella | 22 |

In the year 2012, (16) outbreaks were investigated and timely public health measures were instituted.

| | Respiratory | Gastrointestinal | Other |
|----------------------------|-------------|------------------|-------|
| Long term care facilities | 2 | 5 | |
| Daycare, preschool, school | | 2 | 3 |
| Weddings and parties | | 2 | |
| Other | | | 2 |

Most of the gastrointestinal outbreaks were due to Norovirus. The other outbreak investigations that prompted extensive investigation include an environmental issue at the Monmouth County courthouse and multi-state outbreak of fungal meningitis and other infections among patients exposed to contaminated medication distributed by the New England Compounding Center (NECC).

2012 Environmental Health Program

In 1978, the New Jersey Legislature passed the County Environmental Health Act (CEHA), which directed the New Jersey Department of Environmental Protection (NJDEP) to begin partially funding Environmental Health Programs in county and regional health departments. The Monmouth County Health Department (MCHD) is the only local health authority of the six remaining health departments in Monmouth County whose programs are certified by NJDEP to perform investigation, enforcement, and regulation of air pollution, solid waste disposal, recycling enforcement, emergency and terrorism response, hazardous waste storage and disposal, underground storage tanks, surface and ground water pollution, and noise. In addition to directly providing these services, the MCHD coordinates these services through inter-local agreements with one regional health department and 3 local fire/hazmat units and 1 military hazmat team.

On pages 85 - 87 of the "Strategic Plan, Monmouth County, May 2009", Monmouth County residents give top ratings for the success of various services provided by MC government, including the Health Dept., regarding environmental cleanliness (75%) and the condition of beaches and coastal areas (73%) in MC. The Health Dept. tops the list of services that residents think are the highest priority for continued county support: protecting the environment and water quality (84%), and preparing emergency personnel for a disaster or other crisis (74%); and more than 2-in-3 residents think it is very important for the County to provide a facility for hazardous waste disposal (70%), and to provide health services, such as immunizations, screenings and restaurant inspections (69%). Four out of the top five categories of what residents think are the most important services to continue paying for are also provided by the Health Dept.: protecting the environment and water quality (96%), preparing emergency personnel for a disaster or other crisis (95%), providing a facility for the disposal of hazardous household waste (93%), and health services, such as immunizations, screenings, and restaurant inspections (92%).

http://co.monmouth.nj.us/documents/145/Monmouth%20County_Strategic%20Plan%202 009.pdf

The MCHD Environmental Health Program commits our efforts where the most good can be achieved within the constraints of the budget and the scale of our post-9/11 duties. Super Storm Sandy quickly increased responsibilities for the department to provide the management of congregate shelters. Trained staff is needed from other County departments in order for the MCHD to adequately provide public health services as they emerge during future disasters.

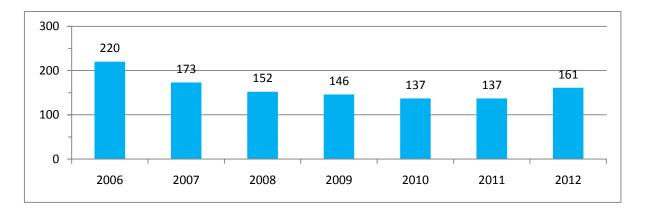
Various environmental health reports, including an expanded version of the annual reports that are summarized below can be accessed at <u>http://co.monmouth.nj.us/page.aspx?ID=3390</u>.

Hazardous Materials Response/UST Units

The Monmouth County Health Department's Hazardous Materials Response Unit continues to provide outstanding hazardous materials and environmental response services to the citizens of Monmouth County. It is the responsibility of the hazardous materials unit to develop and maintain standardized hazardous materials (Hazmat) and CBRNE (Chemical, Biological, Radiological, Nuclear, and Explosive) emergency response capability, capacity, and competence. We maintain a core of highly trained and equipped personnel that will respond to hazmat and CBRNE emergencies and conduct investigations in coordination with the New Jersey Department of Environmental Protection (DEP), the Department of Health and Senior Services (DHSS), and the New Jersey State Police (NJSP) Special Operations Section.

The MCHD hazmat team is available to respond to any hazmat/CBRNE incident in Monmouth County on a 24 hour per day/7 day per week/365 day per year basis. Each hazmat team member is equipped with a specialized emergency response vehicle containing all the detection, personal protection, and response equipment needed to handle most routine incidents in the field. The hazmat unit also maintains two heavy duty emergency response trucks capable of supporting extended operations for larger incidents. In addition, we maintain equipment capable of supporting command, logistics, decontamination, and mobile power needs at any incident.

We handle a wide range of incident responses each year from private citizens, business interests, industrial facilities, and government agencies. Incidents vary in nature from small residential spills of household chemicals and heating oil to large-scale industrial spills, chemical reactions, fires, illegal dumping and over the road accidents involving cargo spills or releases of motor vehicle fluids. A total of 161 complaints were investigated during the 2012 calendar year. The increase in responses noted for 2012 in the following chart is a direct result of the hazmat team's efforts in the aftermath of Superstorm Sandy.



MCHD Hazmat Unit Responses 2006-2012

The hazmat unit performed a critical role in Monmouth County's response to the devastation wrought by Superstorm Sandy. We coordinated with local, state, and federal agencies to assess and remediate numerous hazardous items and their associated impacts throughout the affected areas of Monmouth County. In total, 244 items were identified and assessed over a 27 day period. 141 items were recovered for proper disposal and 103 claimed by owners or referred to other agencies. In addition, the hazmat unit identified 39 residential properties that were impacted by home heating oil spills caused by the storm. These properties were remediated and restored through the NJDEP Publicly Funded Response Program at no cost to the property owners. As of March 2013, all 39

properties were remediated and restored. Over \$298,000 was expended to complete this effort.

The hazmat unit continues to be involved in domestic preparedness planning for the county. The hazmat unit's Program Coordinator maintains a seat on the county's Grant Working Group and LEPC, and regularly participates in other planning meetings with county OEM and the county Fire Marshall. Coordination with the county OEM and Fire Marshall has resulted in an integrated network of primary and secondary departments for mutual aid including hazmat/CBRN response and mass decontamination.

The regulated underground storage tank (UST) enforcement unit performed 68 facility inspections during 2012. The UST unit initiated 19 penalty actions in coordination with the DEP's Central Region Field Office. The UST enforcement unit also continues to enforce Clean Air Act regulations for stage 2 vapor recovery equipment as a part of our regular UST program responsibilities.

Our hazmat unit participated in a DEP pilot Pesticide Control Program (PCP) again in 2012. The Pesticide Control Program is primarily responsible for ensuring compliance with federal and state laws and regulations regarding the use, sale, transport, disposal, manufacture, and storage of pesticides in the state of New Jersey. It also promotes pollution prevention and pesticide use reduction through training and outreach activities involving Integrated Pest Management (IPM). Under the program, our staff performed 55 compliance inspections of area landscapers, multiple family residences, unregistered products, bed bug treatments and 5 compliance assistance inspections of area schools.

The hazmat unit is also responsible for handling all requests for review of Health Department environmental records. Access to government records by private citizens is governed under the Open Public Records Act (OPRA). A total of 299 OPRA requests were processed through the hazmat unit in 2012.

The hazmat/UST staff regularly provides support to other Health Department units and county agencies. Hazmat staff provided logistics support to our public health personnel during shelter operations in the aftermath of Sandy. We also provide personnel to assist the Monmouth County Household Hazardous Waste Facility and we participate in the Health Department's Cooperative Coastal Monitoring Program during the summer months. All members of the hazmat/UST staff also maintain certification in NJDEP odor field enforcement procedures to assist our Air Pollution Control Unit with after hours complaints. Our UST unit provides compliance assistance for regulated underground storage tank systems to several county agencies and facility owners. In addition, the hazmat/UST staff provides logistics support for the Health Department's Strategic National Stockpile Personal Protective Equipment distribution program.

Continuing education and training are essential parts of our mission to provide a comprehensive emergency preparedness system throughout Monmouth County. The Health Department's hazmat unit maintains some of the most highly trained hazmat/CBRNE response personnel in the State of New Jersey. In 2012, we continued to expand our emergency response capability and competence by taking advantage of numerous federal, state, and local training opportunities.

AIR, NOISE AND WATER POLLUTION CONTROL PROGRAMS

Water Pollution

Major public health activities delegated by the County Environmental Health Act include those mandated by the Safe Drinking Water Act, the Private Well Testing Act and the Cooperative Coastal Monitoring Program. Our revamped Ambient Surface Water Quality Monitoring Program and targeted water quality studies, and operation of the sewage pumpout boat are environmental health responsibilities. Response to citizen and NJDEP complaints regarding fish kills, algae blooms, or discharges into water bodies is another core priority. Global Positioning Systems (GPS) coupled with Geographic Information Systems (GIS) greatly improve data collection and analysis, which is used to conduct environmental investigations as well as Public Health planning activities.

<u>Public Non-Community Wells:</u> Sixty-five transient systems and 43 non-transient inspections were conducted; 3 Notices of Deficiency were issued. New Sanitary Survey inspections, at the direction of USEPA and NJDEP were in use.

<u>Private Well Testing Act (PWTA):</u> Wells that involve realty transfers are required to be analyzed. Letters were sent to 97 residents within 200' of wells exceeding gross alpha activity to advise those on shallow wells of possible risks to their drinking water. A total of 422 PWTA results were received.

<u>Cooperative Coastal Monitoring (CCMP)</u>: Fifty-three sites were monitored weekly during the recreational bathing season, with 6 sites monitored monthly during the winter months. Water quality was excellent. There were a total of 63 rainfall provisional closures at 1 bay and 4 ocean beaches. One bay beach was closed for 1 day after bacteria levels exceeded standards. Another bay beach was closed for the season due to bulkhead and boat ramp construction. Thirteen proactive advisories were posted at bathing beaches after initial sampling results exceeded bacteria standards. Feedback on the advisories remains positive. Results and seasonal updates may also be found on the web at www.njbeaches.org.

<u>Phytoplankton:</u> A moderate to heavy bloom of the flagellates *Prorocentrum sp.* and *Heterosigma akashiwo* was identified on August 21. Samples were taken at Asbury Park, Bradley Beach and Long Branch over the course of the bloom.

<u>Sewage Pumpout Boat:</u> Royal Flush pumped out 542 boats pumped out, as opposed to 1,259 last season. Several factors accounted for the decrease in pump outs: an abbreviated season, lack of large festivities on the rivers, and boaters were charged \$5.00 per pumpout for the first time. Due to the fee charged, boaters waited until their holding tanks were full before calling for service. A \$2,955 grant for operations and maintenance was submitted to the Marine Trades Association for reimbursement under the federally funded Clean Vessel Act.

<u>Ambient Surface Water Quality:</u> The ambient surface water quality monitoring program was streamlined in 2010 to reflect budgetary constraints, add sites in hydraulic unit codes which had not been assessed, and to avoid overlapping NJDEP sampling efforts. Thirty four sites were sampled quarterly for a variety of parameters, depending on their salinity

and classification. Results are sent to NJDEP for inclusion on the USEPA Integrated List of Water Quality Limited Segments and may be found at <u>http://co.monmouth.nj.us/ambients.asp</u>.

<u>Watershed Management Initiatives:</u> Staff participated in the Wreck Pond Brook Regional Stormwater Management Plan Committee and Technical Advisory Committee, and the Sediment Control Committee.

<u>Superstorm Sandy:</u> Staff assisted in shelters and the call center; the pumpout boat and captain were utilized for hazardous materials recovery on the Navesink and Shrewsbury rivers. An account of the storm from the Office of the NJ State Climatologist may be found at http://climate.rutgers.edu/stateclim/?section=menu& target=oct12.

<u>Complaints:</u> A total of 15 environmental and drinking water complaints were received. The majority of complaints involved sewage spills into water bodies or storm drains.

<u>Environmental Laboratory</u>: The laboratory, outsourced in 2009, maintains certification of field sampling equipment and instrument calibration, as well as database management and outsourced sample tracking. This is critical to continuing our surface and groundwater programs. Water and air inspections are also performed by the laboratory staff member.

<u>Website:</u> The majority of the MCHD website was updated and/or expanded during 2012. New <u>Hazmat</u>, <u>Influenza Information</u>, and <u>Beach Sampling Results</u> pages were created. The <u>Environmental Documents</u>, <u>Calendar of Events</u>, and <u>Restaurant Inspection</u> pages were updated continuously throughout the year.

<u>Geographic Information Systems (GIS)</u>: Over 60 GIS mapping projects were generated for MCHD programs during 2012. Most environmental and public health datasets were updated during of the year. The major focus this year was on data analysis and planning initiatives for public health and environmental response scenarios. Some of the notable studies conducted included: The drainage area delineation of Wampum Lake; plume modeling and analysis of a theoretical radiological incident, and using NOAA-funded Post-Sandy aerial imagery to assist with a joint MCHD/EPA response for the collection of potential hazardous materials throughout the County.

Air and Noise

During 2012, the Monmouth County Health Department Air and Noise Control Program performed 197 site visits and 153 minor source inspections.

Air and Noise Site Visits

In total, 197 site visits were made during 2012 compared to 258 in 2011.

| Site Visits | <u>2012</u> | <u>2011</u> |
|---------------------------|-------------|-------------|
| Citizen Complaints | 20 | 43 |
| DEP Referrals | 20 | 49 |
| Minor Source | 153 | 159 |
| Complaint Reinvestigation | ons 4 | 7 |
| Total | 197 | 258 |

Minor Source Inspections

This year, 153 minor source inspections were conducted compared to 159 in 2011.

| Minor Source | <u>2012</u> | <u>2011</u> |
|--------------|-------------|-------------|
| B sources | 122 | 125 |
| Dry Cleaners | 31 | 34 |
| Total | 153 | 159 |

Noise Control Program

Eleven noise complaints were investigated in 2012. These complaints were not specific to one municipality as they had been in the past.

GIS/GPS Completed Projects

All maps for GIS are updated on an as needed basis. The dry cleaners map and all staff maps were made current this year.

Looking Ahead

In 2013, the Air Program will, again, take on the rigorous task of inspecting another 120 B sources at the request of the DEP. We will also inspect 30 dry cleaners. In 2013 we will continue to fulfill routine DEP requirements in addition to serving the residents of Monmouth County, particularly as they are affected by issues under the jurisdiction of the Air and Noise Program.

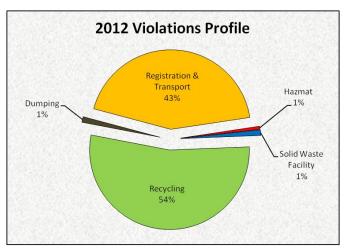
SOLID AND HAZARDOUS WASTE MANAGEMENT REPORT

The Monmouth County Health Department Solid Waste Enforcement Team (SWET) completed its twenty-fifth year of operation in 2012, operating in accordance with the County Environmental Health Act agreement executed by the NJDEP. The SWET is charged with the responsibility of enforcing all New Jersey Administrative Codes and other regulations related to solid waste and recycling. The SWET monitored 203 facilities for compliance with solid waste regulations. The facilities consisted of all Major Operating Sanitary Landfills, Closed Landfills, Transfer Stations, Class A Recycling Facilities, Class B Recycling Facilities, Compost Facilities, and Farmland Leaf Mulch Sites. Facilities out of compliance are issued Notices of Violation, Penalty Assessments, or summonses to appear in court. Pursuant to established protocols, the SWET notifies the NJDEP of any violations and may conduct joint site investigations to correct the violations. This ensures excellent communications between agencies and the environment.

1,092 recycling compliance inspections were conducted at businesses and institutions throughout the County, resulting in 425 violations of the New Jersey Administrative Code's recycling regulations. Typically, violators are referred to the Municipal Recycling Coordinator who affords the violators a 30 day grace period to come into compliance. However, several towns still do not follow-up on referrals. The SWET will re-inspect these sites after the 30 day grace period to ensure they have complied with recycling regulations. The system is working so well that the SWET issued only 3 summonses out of the 425 noted violations. In all three cases the SWET was requested by local officials to assist in bringing these violators into compliance. 2 of the three cases involved large corporate chains with a history of non-compliance.

required to have the corporations re-tool recycling management at all their locations.

The SWET inspected 1,463 solid waste vehicles in 2012. 383 haulers were cited for the following violations: Registration and Transporter Requirements – 344 violations, Banned or Hazardous Materials – 5 violations, and Recycling - 34 violations. Common violations include lack of registration, improper markings, missing registration cards, operating poorly maintained or unsafe equipment,



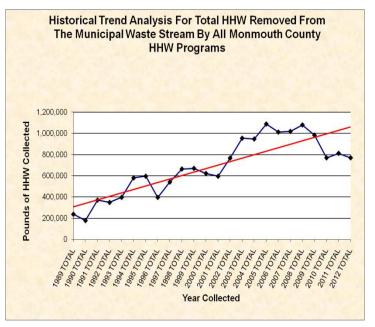
exceeding registration limitations, and mixing recycling and solid waste in the same vehicle. By performing these inspections, both public and facilities are protected against mishaps caused by potentially injurious substance releases and/or facility operational delays.

The SWET responded to 119 complaints from local citizens and 20 complaint referrals from the NJDEP. Of these, the SWET enforced regulations and corrected violations by using 104 NOV's, 33 municipal court proceedings, and 2 Settlement Agreements from

Notices of Penalty Assessments. Violations historically include: operating an illegal solid waste or recycling facility, improper asbestos packaging and removal notifications to the NJDOH, and waste brokering without appropriate NJ State licenses/approvals. All minor violations are served Notices of Violation and reinvestigated for compliance after appropriate grace periods ranging from one to thirty days. Those violations which are non-minor (repeat offenses or knowingly/purposely committing a violation), result in the issuance of a municipal court summons or a Notice of Penalty Assessment.

The super-storm Sandy aftermath kept SWET personnel busy assisting relief operations and conducting daily responsibilities. Personnel assisted at shelters doing tasks from assembling cots, helping with meals, and delivering needed supplies. SWET members of the Haz-Mat Team responded day and night to hazardous materials incidents throughout the storm ravaged area. SWET office personnel assisted haulers and municipalities in

registering new equipment to be used in the cleanup efforts. Personnel helped direct truck traffic at the County transfer station when debris volumes reached nearly unmanageable SWET field inspectors levels. monitored 65 Temporary Debris Management Areas located in the county to ensure they operated within authorized parameters. Field inspectors offered guidance and assistance to operators of the sites when requested. The SWET is involved in staffing key roles for the National Strategic Stockpile Warehouse Distribution Program, and effectively oversees the management of household hazardous wastes as seen in the adjacent chart.



Instituted in 1996, the Monmouth County Household Hazardous Waste Facility (HHWF) continues to provide free service to residents, not for profit organizations, and government agencies. This service is provided by the Board of Chosen Freeholders. The Monmouth County Health Department operates the HHWF with 5 specialized SWET employees who also serve as hazardous materials responders. The MCRC and the Planning Board are collaborative partners as well. The concept originated as a means to provide for the removal of harmful materials from the environment, in a safe and economical way. 7,674 customers were served this year. 622 customers participated in two single day remote collections held in Hazlet and in Upper Freehold. Super-storm Sandy caused an inflow of more materials into the facility this year. Since the inception of the program, over 16,515,773 pounds of hazardous material has been kept from being disposed of in the MCRC. HHW management efforts curb the release of greenhouse gases, and other air and water pollutants.

As one of the 3 HHW facilities in New Jersey, management used innovative techniques to reduce or avoid costs, while maintaining high quality hazardous materials management. Our exclusive method of managing unwanted propane cylinders saved taxpayers at least \$26,000 by using the gas as fuel for office heat, and selling the scrap metals. Latex paint brought to single day HHW collections saved at least 80% (approximately \$30,000) over 2011. Some of the latex paint was received at the HHWF, which can manage disposal at \$0.12/lb, while the cost at single day events was \$0.59/lb. In 2012, the facility received the Purchasing Department's approval to "spot market" lead acid batteries, used oil, and brass valves to achieve competitive pricing. This resulted in a 75% increase in revenue totaling \$15,300 for these items. The following charts show statistics on HHW waste management efforts.

