

**Ocean County Community Health
Improvement Plan 2014-2018**

Annual Health Status Update-Year 1

2015

December 2015

Dear Ocean County Stakeholders and Residents:

We are pleased to present to you the "Ocean County Annual Health Status Update Report-Year 1". As part of the 2014-2018 Ocean County Community Health Improvement Plan's sustainability, we are providing you with an annual update highlighting strategies implemented in 2015 by various agencies in addressing each of the five prioritized health issues identified in Ocean County: Behavioral Health: Mental Health and Substance Abuse, Chronic Disease Prevention & Education, Childhood Obesity, Immunization Compliance, and Access to Care.

The Ocean County Annual Health Status Report provides current data on programs or activities performed by various agencies that affect the health of Ocean County residents. While some of the progress is long term, we hope to provide you a highlight of what is being done in each of the prioritized areas. Many thanks to all of our partners and stakeholders that have had an input in addressing the prioritized health issues in Ocean County.

A call to action invites you to be part of the programs or activities that are having a positive impact in the health of Ocean County residents and in your community. Please join us as together we can achieve "*A Countywide Approach to Improving Community Health*".

Wishing you all the best of health,

The Ocean County Health Advisory Group

Ocean County Community Health Improvement Plan- 2015 Annual Health Status Report

Health Issue: Behavioral Health: Mental Health & Substance Abuse

Key Strategies:

- Integrate Behavioral Health disorders into primary care settings
- Improve stigma reduction awareness
- Improve telemedicine
- Promote Prescription Drug Monitoring (PDM) system, and Drop off Boxes
- Partner with faith & community-based organizations to reach the vulnerable population

Key Highlights in 2015:

Strategy 3.1: Integrate Behavioral Health disorders into primary care settings

- **Barnabas Health Institute for Prevention and Meridian Health** introduced **the Opioid Overdose Recovery Program** in Ocean County. A two year program that provides recovery support services including assistance in entering a treatment program to individuals reversed from an opioid overdose, and treated at select hospital emergency departments in Ocean County. A patient navigator will link individuals to appropriate treatment and support services. In 2014, 394 residents received an overdose reversal in Ocean County, the second highest county in New Jersey compared to 214 overdose reversals in 2015. This program will serve Community Medical Center (**CMC**) in Toms River, and Ocean Medical Center (**OMC**) in Brick.
- **NJ Department of Children's & Families** has funded an initiative to make telephonic psychiatric consultation available to pediatricians for youth with co-occurring mental health issues.
- **Barnabas Health** Monmouth Medical Center-Southern Campus (**MMC-SC**) Lakewood, developed an integrated health home to improve access to medical care services for the seriously mentally ill. Barnabas Health Community Medical Center (**CMC**) has educated emergency room staff on the behavioral health programs and services for at-risk populations. Barnabas Health Behavioral Health Center (**BHBHC**)- held several free Mental Health Screening Days where mental health professionals offered confidential

mental health screenings and access to services needed to address stress, depression, anxiety, obsessive compulsive disorder and post-traumatic stress disorder. BHBHC also offered a free program on the "Emotional Impact of a Cancer Diagnosis" with a physician providing information on the symptoms of anxiety and depression, as well as successful treatment options.

- **Ocean Health Initiatives (OHI)** screens every patient at every visit using the PHQ2 and PHQ9 questionnaire. If a patient scores high on either questionnaire, a social worker visits the patient in the exam room and is given a behavioral health appointment immediately. A new facility is under construction in Little Egg Harbor in which hybrid exam rooms will be developed as an integrated behavioral health model. The exam room will feature both an exam table and therapy seating with lighting. A patient can be seen for a routine exam, and if needed the LCSW can come in afterwards and hold a counseling session in the same room.
- **Center for Health Education, Medicine and Dentistry (CHEMED)** expanded upon their integrated care by screening adults and adolescents for depression and anxiety during a patient's primary care visit. If CHEMED's patients show signs of behavioral health issues, a behavioral health consultant comes directly to the patient for counseling and schedules a follow-up visit if necessary. Smoking cessation and weight control counseling are available as well.

Strategy 3.2: Improve stigma reduction awareness

- **Ocean County's Mental Health Awareness Committee** partnered with the O.C Prosecutor's Office and produced a series of videos on addiction for students and parents available at their website: <http://oceancountyprosecutor.org/about/media-gallery>.

Strategy 3.3: Improve telemedicine

- **Ocean County Health Department (OCHD) Local Advisory Council on Alcohol and Drug Abuse (LACADA)** will advocate for better telepsychiatry rates to make this process more appealing for psychiatrist to use at the Community Mental Health Centers since it became reimbursable by Medicaid in 2014. Psychiatric Emergency Screening Services (PESS) uses telepsychiatry in the county hospitals.

Strategy 3.4: Promote Prescription Drug Monitoring (PDM) System, and Drop off Boxes

- **The DART Coalition of OC** held a training in the Spring of 2015 for Pharmacists to help promote the PDM system.

- **OCHD, DART Coalition, and the Long Beach Island Health Department (LBIHD)** collaborated to increase the number of drop off prescription boxes from 6 in 2013 to 15 in 2015.
- **OCHD** held eight flu sites in 2015 throughout Ocean County where RX Drop off Boxes were available for expired/unused medications. Toms River Township had 15 pounds of expired/unused drugs dropped off. **LBIHD** partnered with the mobile "Take Back Unit" in 2015 to be on hand at their flu clinics in Long Beach Island.
- **LBIHD** partnered with local police departments to educate residents on the two prescription drop off sites in Long Beach Island: Long Beach Island and Harvey Cedars. Joint programs with the police and LBI HD were held during the month of March 2015 as part of Poison Prevention Month.

Strategy 3.5: Partner with faith & community-based organizations, and schools to educate on mental health and substance abuse disorders

- **Justice Involved Services Task Force** provided a four hour mental health awareness to law enforcement in three county police departments. Two countywide sessions on Crisis Intervention Team training were held on Mental Health First Aid, and Stigma Free Zone.
- **Ocean County** hosted a Disaster Response Crisis Counseling pilot program to engage and train 40 clergy leaders in disaster response crisis counseling techniques funded by FEMA/Sandy Funds.
- **OCHD School Programs held in 2015:**
 - Footprints for Life Substance Abuse Program for Children:** An evidence-based program for 2nd and 3rd grade students to develop assets to deter the first use of alcohol and drugs. A one eight session program was completed at the Pine Beach Elementary School.
 - Stress Happens Program:** Two programs held for 32 students on how the youth should handle stress appropriately. An interactive and engaging program.
 - What's Trending Program:** Thirteen programs provided to 412 students focusing on the consequences and dangers of texting and sexting. A very sought after program with a pre and post test curriculum.
 - Drugs are not Candy Program:** Nine programs provided in Toms River, Brick and Berkeley Township to a total of 159 students in 2nd and 3rd grades, in which students are provided with pictures and props of drugs similar to candy that can be deadly.

Drug Code Program: Fourteen high school and middle schools, and one behavioral health center were visited totaling 4,480 duplicated visits with some students seen up to 3 times. The Drug Code Program addresses alcohol, marijuana and prescription drug abuse education. Data is collected on Survey Monkey on their increased knowledge of drugs and its dangers.

I'm Special (Unique You) Program: Seventy-three programs held up to date, or 9 full 8 unit sessions provided to 170 four to six grade students. An interactive program where children learn how to make good decisions and choices.

OCHD Educational Programs in the community:

Medication Management/Communicating with your Healthcare Provider:

Seven programs offered throughout Ocean County to older adults on medication safety.

NJ Poison Information and Education System Program (NJPIES): Two programs offered to elementary schools and two programs to OCHD staff on how to identify poisons from edible items.

Training for Intervention Procedure (T.I.P.S.): Six responsible beverage trainings were held in the County to 88 local law enforcement officers, and Municipal Alliance Coordinators. Barnegat Township passed an ordinance requiring all establishments who sell alcohol to have the T.I.P.S. training.



Moving Ahead-A Call to Action

- * Increase the number of schools that would benefit from the educational programs on alcohol and drug use, and train school personnel on these programs.
- * Coordinate and increase the flu sites that will have the prescription medication drop off sites with local police.
- * Engage the community and faith-based organizations to take part in promoting the programs that help educate the youth on the dangers of alcohol and drug use.
- * Expand mental health services across Ocean County by opening more facilities specifically for behavioral health issues

Health Issue: Chronic Disease Prevention and Education

Key Strategies:

- Provide a patient-centered multidisciplinary approach across healthcare settings
- Empower residents on appropriate chronic disease management
- Coordinate programs across various settings
- Increase knowledge and participation in early detection of chronic diseases
- Reduce hospital admissions that are preventable due to chronic diseases

Key Highlights in 2015:

Strategy 4.1: Provide a patient-centered multidisciplinary approach that includes communication and coordination across various healthcare settings

- **Deborah Heart and Lung Center:** Pulmonary Lecture (150 residents-Renaissance Men's Club), Heart Disease Lecture (44 residents-Manchester). OC mall stand alone Blood Pressure (BP) machine- 3,300 tests a month, Women's Expo-191 screenings on BP, BMI and Balance (191), Wound Care lecture provided at Holiday City Berkeley (80 residents), Toms River Senior Center-BP, PFT and Balance (129 residents), St. Elizabeth Church-Whiting, BP (82 residents screened). Adolescent Cardiac Arrest screenings at Central Regional High School-Bayville where 88 students were screened, and 20% recommended for follow-up.
- **OHI:** "Take Control of Your Health" principals are incorporated into every patient visit, emphasizing chronic disease education and management. Chronic Disease Quality Metrics in line with the Patient Centered Medical Home (PCMH), and Meaningful Use criteria are incorporated in every patient visit. OHI is certified as level 3 PCMH. OHI partnered with the Accountable Care Organization, as well as the Health Information Exchange with the hospitals.

Strategy 4.2: Empower residents with tools and information that are accurate, linguistically and culturally appropriate on chronic disease management

Diabetes:

- **Barnabas Health:** MMC-SC offers Diabetes Self-Management Education Program, a 9 hour course every month. CMC's Center for Diabetes Education hosted a Diabetes Expo offering the latest in diabetes self-care products, up-to-date diabetes information and blood glucose screenings.

Heart Disease/Lung Cancer:

- **OCHD:** *"Live Healthy Ocean County Program"* provided preventative screenings at various senior health fairs, Faith and Community-Based organization and senior centers: Blood Pressure (BP) screenings held (268), MSRAP (188), and Osteoporosis screenings (136) in 2015.
- **Barnabas Health:** MMC-SC implemented a cancer assessment program including a lung nodule and lung cancer screening. CMC implemented a "Care Transitions Program" for chronic cardiac conditions, and now offers a low dose CT lung screening in collaboration with Diagnostic Radiology free to those residents that are eligible. MMC-SC offers a 6-week tobacco quit program. CMC held a breast health symposium on breast health information, including the importance of having a mammogram and available options if the diagnosis is cancer.
- **LBIHD:** "Health Yourself Series" presented at the LBI Library based on the Health Ease modules. Chronic Disease education is also provided to "captive audiences", such as congregate lunch program and Healthy Bones participants throughout Long Beach Island.

Strategy 4.3: Coordinate community programs across various settings that target primary prevention education on chronic diseases

- **OHI:** Community outreach events are held with the "Mobile Medical Unit" to provide chronic disease education and free blood pressure screenings.

Strategy 4.4: Increase knowledge and participation in early detection of chronic diseases

Preventive and Diagnostic Screening Services:

- **OCHD:** *The NJ Cancer Education and Early Detection (NJCEED) Program* provides routine cancer screening to low income residents without health insurance. Breast, cervical and colorectal screenings are provided. A total of 100 residents have been screened for breast and cervical cancers, a 26% increase from 2014. A total of 52 screened for colorectal cancer in 2015.
- **Barnabas Health's CMC:** *NJCEED Program* screened 1,538 residents overall in 2015 (breast, cervical, and colon), and is referring 24 residents for follow-up treatment based on screening results.
- **OCHD:** *Sexually Transmitted Diseases Clinics*: Screened for Gonorrhea (585 adolescents and adults through October 2015), Chlamydia(584 residents), and Syphilis (584), an increase of 8% from 2014. Through October 2015, HIV Counseling

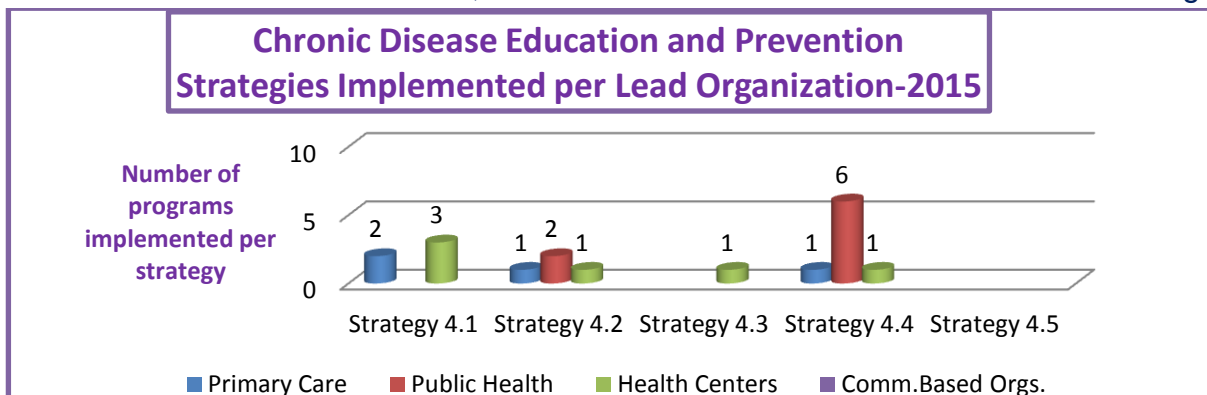
and Testing Clinics tested 471 residents. Direct treatment and case management has been provided for 71 cases of Chlamydia, 22 cases of Syphilis, and 7 cases of Gonorrhea. This clinic has helped decreased Chlamydia morbidity in Ocean County.

Blood Lead Poisoning Screening Prevention and Education: High risk residents for lead exposure were targeted including children under 6 years of age, pregnant women, and homeowners/construction workers affected by Superstorm Sandy. A total of 1,055 blood lead screenings have been performed through October 2015, with 7 new lead cases in 2015. A total of 103 cases are under the Lead Case Management Team.

Eye Screening: Preventive eye screenings are offered to low and uninsured residents in the county. A total of 174 residents have been screened for basic vision problems. No cost referrals are provided for vision interventions and case management with the Commission for the Blind and Visually Impaired. A 53% increase in screenings in 2015.

Case Management and Treatment:

- **OCHD: HIV/AIDS Care and Treatment:** provides treatment and support services for low-income residents living with HIV/AIDS free of charge. About 200 Ocean County residents are provided annually with clinical and case management services which has helped in the reduction in community-level viral load suppression, an important part in the prevention of HIV transmission. An increase of 92% in face-to-face case management services has helped residents with insurance enrollment, transportation and nutritional support services.
- **OCHD: Tuberculosis Services:** In 2015 year to date, a total of 116 chest X-rays have been performed, 1,368 residents have received direct therapy, 64 residents have received LTBI medication visits, and 747 have received the Tuberculin Skin testing.



Moving Ahead-A Call to Action

* Continued coordination with libraries, Faith and Community-Based Organizations in the promotion and education on chronic diseases prevention and management, and clinics available throughout the county.

* Take Control of Your Health Program principals should be incorporated into every patient visit.

Health Issue: Childhood Obesity

Key Strategies:

- Promote exclusive breastfeeding through proven policies and practices
- Implement nutrition standards to limit the availability of less nutritious foods in schools
- Increase of physical activity in child care centers and schools in Ocean County
- Increase the involvement of healthcare professionals in obesity prevention
- Educate the residents of all cultures on the options to make healthy choices

Key Highlights in 2015:

Strategy 1.1: Promote exclusive breastfeeding through proven policies and practices

- **OCHD WIC Program:** children enrolled in the OC WIC Program is 57% of its total caseload enrollment of 20,090 (Sept. 2015). The OC WIC Program conducted an extensive outreach in 2015 with the goal to promote healthy eating for toddlers, and to promote breastfeeding. A WIC Nutritionist and Breastfeeding Peer Counselor visited 27 daycares, 16 churches, 20 Pediatrician's offices, 5 OB/GYN offices, and 4 community-based organizations in the County to promote the WIC Program and its breastfeeding services.

Strategy 1.2: Implement nutrition standards in schools, and after school programs

- **Big Brothers Big Sisters of Ocean County, NJSNAPED and Ocean Monmouth Health Alliance** partnered to educate children at two schools focusing on low-income high risk youth in Seaside Heights and Berkeley Township using an evidence-based after school program on nutrition and physical activity. Healthy snacks are provided. Big Brothers Big Sisters of Ocean County added to its program description "We foster and promote healthy eating and physical activities in our school programs".
- **LBIHD:** A Back to School Night was attended by LBIHD Nurses where "My Plate" nutrition information was provided to parents.
- **OCHD Educational Programs:** Thirteen "Making Healthy Choices Program" was held at 3 different elementary schools to 156 students. The program teaches students on how to make healthy food choices and be physically active.

Strategy 1.3: Inclusion of nutrition and physical activity in preschool and childcare centers

- **LBIHD:** Collaborated with St. Francis Preschool, the Kiwanis on a healthy snacking lunch initiative.

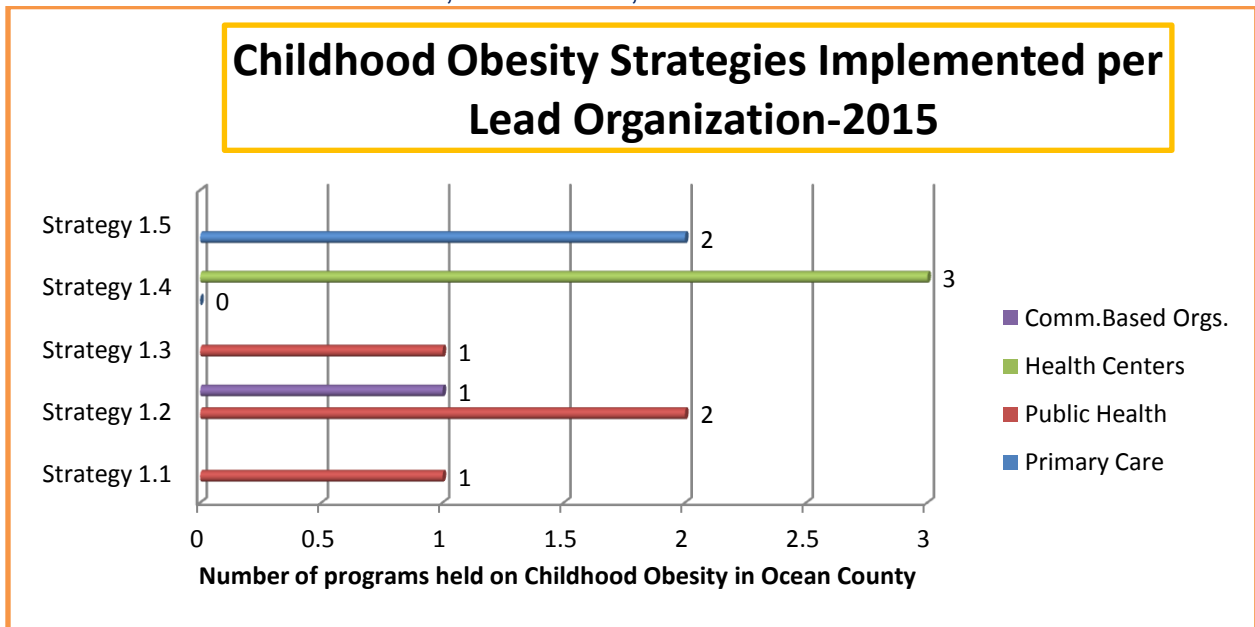
- **OHI:** School-Based Health Center educates children to enroll in physical activities and sports.

Strategy 1.4: Increase the involvement of healthcare professionals in obesity prevention activities across all ages

- **OHI:** BMI conducted on all patients at each visit, and educational handouts are available to patients in all OHI facilities. A full time Registered Dietician is on staff to educate and counsel patients on nutrition and healthier lifestyles.
- **CHEMED:** Redesigned workflow to ensure all pediatric patients are screened for obesity, and are educated on nutrition and physical activity.

Strategy 1.5: Provide safe and convenient opportunities for daily physical activities

- **Barnabas Health:** CMC partnered with the County's Recreation Department, CBS Eco Media to construct a new fitness-themed play pocket trail at Jakes Branch Park-Beachwood where a variety of health and wellness classes utilizing the play trail will be available. CMC hosted their 8th annual summer food drive to make healthy food available to children in need, a total of 12,319 lbs of food were donated.



Moving Ahead-A Call to Action

- * Faith and Community-Based Organizations are encouraged to promote healthy eating and exercise in their children's programs. Referrals to the Ocean County WIC Program from various sources can assist in helping children eat healthy.
- * Schools can promote and increase participation in the school breakfast programs since only 33% of eligible students in Ocean County participate in the program. After school programs can adopt a healthy living program.

Health Issue: Immunization Compliance

Key Strategies:

- Enhance access to vaccination services in the county
- Implement a countywide education campaign to educate preschools and childcare providers on the importance of immunization compliance
- Enforce the immunization requirements at childcare centers, preschools and public schools
- Ensure healthcare providers provide timely vaccination to children
- Encourage the use of the NJ Immunization Registry

Key Highlights in 2015:

Strategy 2.1: Enhance access to vaccination services in the county

- **OHI & CHEMED:** Participate in the Vaccine for Children (VFC) Program, a federally funded state operated vaccine supply program that provides vaccines at no cost to the doctors who serve uninsured or underinsured patients. The VFC Program keeps patients in a medical home for comprehensive healthcare. Some vaccines are often discounted or free.
OHI: Medical Mobile Unit was used to provide childhood immunizations, and flu shots throughout Ocean County.
OHI's School-Based Health Center located in the Lakewood High School helps children receive vaccines while in school.

Strategy 2.2: Implement a countywide education campaign for preschools, child care centers, and faith-based organizations

- **OCHD:** A Faith-Based/Childcare Providers Workshop was provided to congregants and childcare directors on "The Truth About Vaccines" on June 2015. The goal was to debunk myths, and to stress the importance to congregation and childcare leaders on childhood vaccinations.
OCHD: Various press releases including social media using Facebook and Twitter were used to promote immunization from April-August 2015. A billboard at the Blue Claws Stadium titled "Strike out Vaccine Preventable Diseases" is running from April 2015-April 2016. Letters to preschools, childcare providers and elementary schools were mailed stressing the importance of the immunization requirements.

- **LBIHD:** Written information on immunization regulations and schedules were provided to childcare staff at the "Annual Standards Precautions and Medication Administration In-Service", and immunization information provided to the women at the Women's Health Night.
- **CHEMED:** Event held with respected lecturer in the Jewish Community, Rabbi Dr. Akiva Tatz, who spoke about the necessity of immunization compliance from a medical and religious perspective, as well as misconceptions that exist in the community on childhood vaccinations.
- **Ocean Monmouth Health Alliance:** Symposium held for healthcare professionals titled; " You are the key to cancer prevention" on March 14, 2015, presented by Thomas Hackett, DO and Meg Fisher, MD. The symposium focused on the new cervical cancer screening guidelines, and the connection between cervical cancer and HPV.

Strategy 2.3: Enforce immunization compliance at every preschool and childcare centers and public schools in Ocean County

- **OCHD:** School audits- A total of 142 Childcare/Preschools were audited from January-December 2015 with a 24% non compliant rate, and 132 audits were completed to Kindergarten/Grade 1 with a 22% non-compliant rate. A total of 80 Grade 6 schools were audited with a 14% or 11 schools in non-compliant, and 18 Special Education schools were audited with 15 of them in non-compliance. After the second re-audit only 5 schools were non-compliant in total.
- **LBIHD:** "The Truth about Vaccines" and "Protect your Child against Serious Disease" brochures were distributed at St. Francis Center Preschool. LBIHD will immunize any under immunized child and uninsured students in a timely manner. LBIHD provides education to local physician offices regarding school regulations.

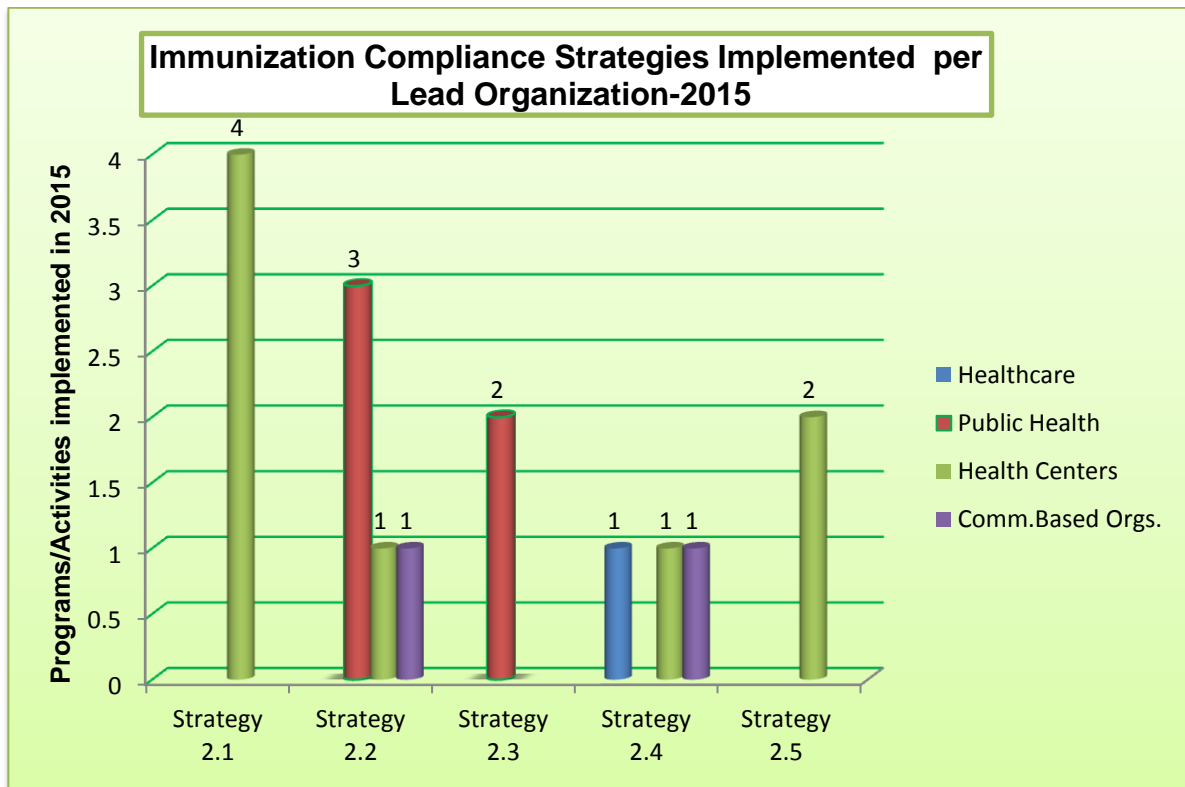
Strategy 2.4: Ensure healthcare providers provide timely vaccination of children

- **OHI:** Electronic Medical Records automatically sends notification to Healthcare Provider when a patient is due for a recommended vaccine.
- **Ocean Monmouth Health Alliance and the Central Jersey Family Health Consortium:** Educated Healthcare Professional on November 25, 2015 on the HPV vaccine recommendations and communication methods.

- **Barnabas Health:** Influenza vaccine is offered to all patients ages 6 months and older. Mandatory flu shots are now a condition of employment for all employees and Medical/Nursing students and volunteers unless they have a medical or religious exemption.

Strategy 2.5: Encourage the use of the NJ Immunization Registry

- **OHI & CHEMED:** All VFC vaccines and immunizations are tracked and monitored in NJIIS which consolidates all immunizations provided in one patient record while providing recommended immunization schedules for each patient.



Moving Ahead-A Call to Action

- * Pediatricians are encouraged to promote and offer childhood immunizations in a timely manner following the child vaccination schedules, thus making vaccination procedures a routine focus.
- * Faith and Community-Based Organizations can post flyers on the importance of childhood immunizations in their waiting rooms or community bulletin boards.
- * Health Care Professionals who have contact with adolescents and their parents should recommend the HPV vaccine.

Health Issue: Access to Care

Key Strategies:

- Reduce the barriers to care by increasing the safety net
- Increase the proportion of residents with a primary care provider
- Decrease the use of the emergency room for ambulatory care conditions
- Implement community-based preventive services that enhance linkages with clinical care

Key Highlights in 2015:

Strategy 5.1: Reduce barriers to care by increasing capacity of safety net

- **OHI:** Late night and weekend hours are offered to accommodate patient schedules.

Strategy 5.2: Increase the proportion of residents with a primary care provider or patient-centered medical home

- **OHI:** Mobile Medical Unit conducts outreach events to enroll new patients and provides screenings at all outreach events.

OHI: The majority of OHI staff are bilingual and the use of a language line is used for all other languages.

- **CHEMED:** The Radiology Department opened in 2015. Multiple providers were hired across all departments including Pediatrics, Internal Medicine, Dental, Behavioral Health, Women's Health and Podiatry greatly improving the ability to meet the high demand of appointments in all departments.

Strategy 5.3: Decrease the use of the emergency room for ambulatory care sensitive conditions

- **Barnabas Health:** MMC-SC enhances access to healthcare and prevention services through the use of health coaches, and the tracking of seniors enrolled and screenings performed.

MMC-SC has a patient navigator who assist in facilitating referrals of Ocean Health Initiatives (OHI) patients to specialists and back to OHI.

CMC initiated patient navigators in several areas: breast and lung cancers to assess appropriate healthcare needs. Walgreens opened a pharmacy at CMC's outpatient lobby to provide bedside delivery of medications for inpatients, and for emergency department patients when they are discharged. This enhances access to necessary medications and compliance with discharge orders.

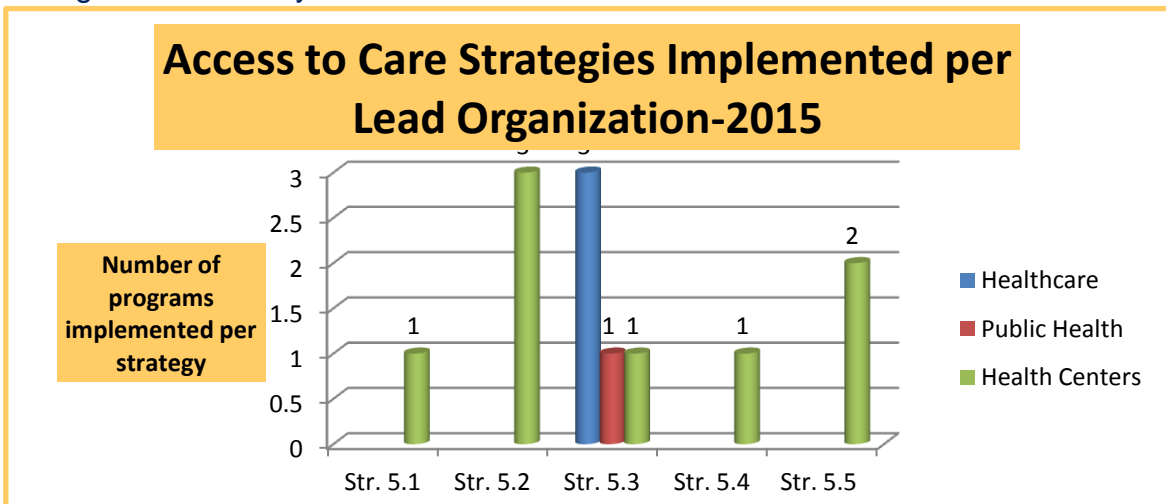
- **Ocean County Health Department (OCHD) Alcohol & Drug Unit (AD):** discusses Medicaid enrollment with residents that call for treatment. All treatment providers contracted with the OCHD must be a Medicaid provider as of 2016. The OCHD AD Unit is working on recovery services for 2016 funding to utilize peers to help consumers navigate the system.
- **OHI:** A doctor is on call 24/7 through an off hours answering service.

Strategy 5.4: Implement programs that address health disparities

- **OHI:** The majority of OHI staff is bilingual and the use of a language line is used for all other languages.

Strategy 5.5: Implementation of community-based preventative services that enhance linkages with clinical care

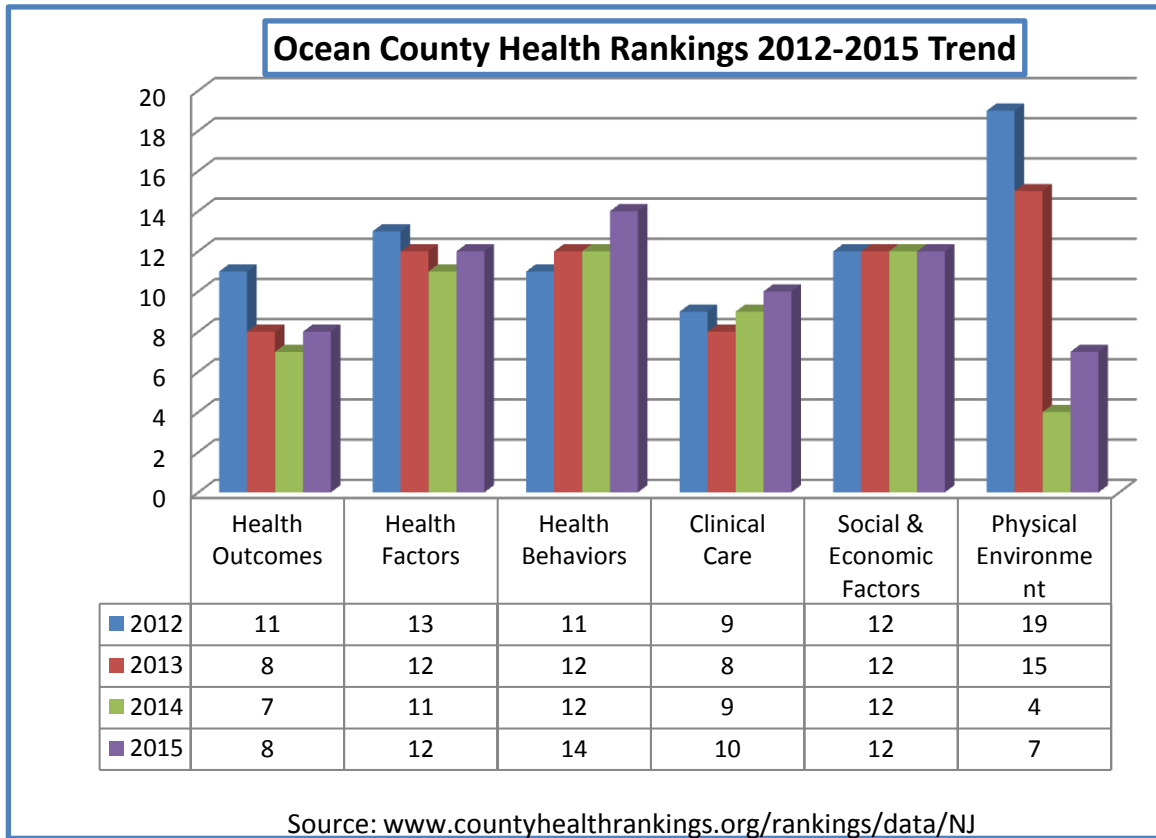
- **OHI and CHEMED:** A full-time Certified Application Counselor enrolls residents in the Affordable Care Act at all their clinic sites and in multiple venues and events throughout the county.



Moving Ahead-A Call to Action

- * Faith and Community-Based Organizations are encouraged to refer their congregants and clients to the two Federally Qualified Health Centers in Ocean County: Ocean Health Initiatives or CHEMED, both in Lakewood. Routine care needs to be provided on an ongoing basis, thus reducing the use of the hospital emergency rooms for preventable diseases.

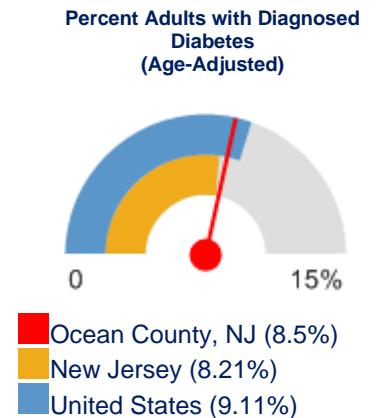
Ocean County Data:



Diabetes (Adult)

This indicator reports the percentage of adults aged 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Report Area	Total Population Age 20+	Population with Diagnosed Diabetes	Population with Diagnosed Diabetes, Crude Rate	Population with Diagnosed Diabetes, Age-Adjusted Rate
Ocean County, NJ	433,477	47,249	10.9	8.50%
New Jersey	6,606,487	599,807	9.08	8.21%
United States	234,058,710	23,059,940	9.85	9.11%

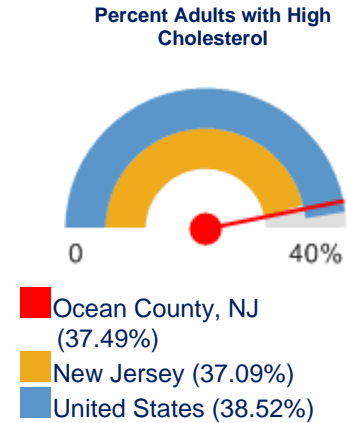


Data Source: Centers for Disease Control and Prevention, 2012

High Cholesterol (Adult)

This indicator reports the percentage of adults aged 18 and older who self-report that they have ever been told by a doctor, nurse, or other health professional that they had high blood cholesterol.

Report Area	Survey Population (Adults Age 18+)	Total Adults with High Cholesterol	Percent Adults with High Cholesterol
Ocean County, NJ	374,764	140,504	37.49%
New Jersey	5,377,537	1,994,686	37.09%
United States	180,861,326	69,662,357	38.52%



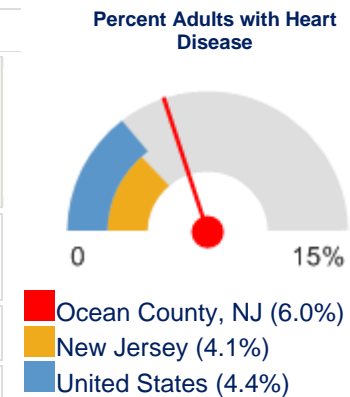
Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, *Behavioral Risk Factor Surveillance System*. Additional data analysis by CARES. 2011-12.

Heart Disease (Adult)

26,175, or 6% of adults aged 18 and older have ever been told by a doctor that they have coronary heart disease or angina. This indicator is relevant because coronary heart disease is a leading cause of death in the U.S. and is also related to high blood pressure, high cholesterol, and heart attacks.

Report Area	Survey Population (Adults Age 18+)	Total Adults with Heart Disease	Percent Adults with Heart Disease
Ocean County, NJ	435,894	26,175	6.0%
New Jersey	6,646,861	270,496	4.1%
United States	236,406,904	10,407,185	4.4%



Note: This indicator is compared with the state average.

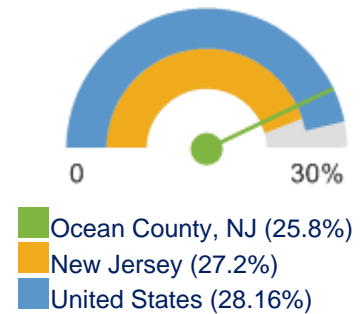
Data Source: Centers for Disease Control and Prevention, *Behavioral Risk Factor Surveillance System*. Additional data analysis by CARES. 2011-12.

High Blood Pressure (Adult)

113,295, or 25.8% of adults aged 18 and older have ever been told by a doctor that they have high blood pressure or hypertension.

Report Area	Total Population (Age 18+)	Total Adults with High Blood Pressure	Percent Adults with High Blood Pressure
Ocean County, NJ	439,127	113,295	25.8%
New Jersey	6,684,371	1,818,149	27.2%
United States	232,556,016	65,476,522	28.16%

Percent Adults with High Blood Pressure



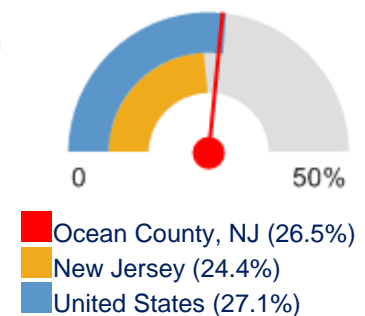
Note: This indicator is compared with the state average.
 Data Source: Centers for Disease Control and Prevention, *Behavioral Risk Factor Surveillance System*. Additional data analysis by CARES. 2006-12.

Obesity

26.5% of adults aged 20 and older self-report that they have had a Body Mass Index (BMI) greater than 30.0 (obese) in Ocean County. Excess weight may indicate an unhealthy lifestyle, and puts individuals at risk for future health issues.

Report Area	Total Population Age 20+	Adults with BMI > 30.0 (Obese)	Percent Adults with BMI > 30.0 (Obese)
Ocean County, NJ	432,179	115,824	26.5%
New Jersey	6,605,806	1,633,276	24.4%
United States	231,417,834	63,336,403	27.1%

Percent Adults with BMI > 30.0 (Obese)

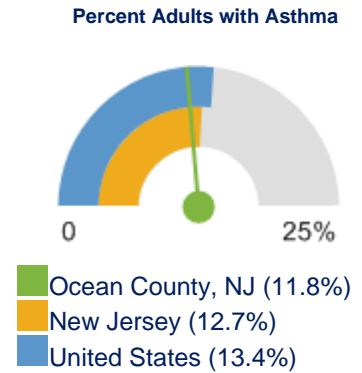


Note: This indicator is compared with the state average.
 Data Source: Centers for Disease Control and Prevention, *National Center for Chronic Disease Prevention and Health Promotion*. 2012.

Asthma Prevalence

This indicator reports the percentage of adults aged 18 and older who self-report that they have ever been told by a doctor, nurse, or other health professional that they had asthma. This indicator is relevant because asthma is a prevalent problem in the U.S. that is often exacerbated by poor environmental conditions.

Report Area	Survey Population (Adults Age 18+)	Total Adults with Asthma	Percent Adults with Asthma
Ocean County, NJ	435,988	51,514	11.8%
New Jersey	6,668,852	847,632	12.7%
United States	237,197,465	31,697,608	13.4%



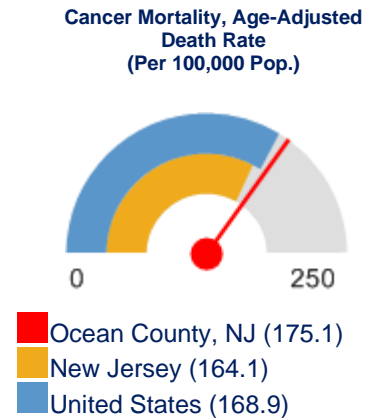
Note: This indicator is compared with the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES, 2011-12.

Mortality - Cancer

This indicator reports the rate of death due to malignant neoplasm (cancer) per 100,000 population. This indicator is relevant because cancer is a leading cause of death in the United States.

Report Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Ocean County, NJ	578,589	1,607	277.7	175.1
New Jersey	8,826,516	16,573	187.8	164.1
United States	311,430,373	577,313	185.4	168.9
<u>HP 2020 Target</u>				<= 160.6



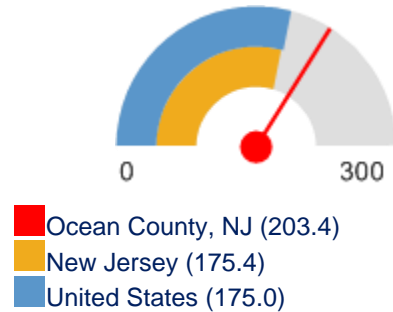
Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER, 2009-13.

Mortality - Heart Disease

For Ocean County, the rate of death due to coronary heart disease per 100,000 population is **203.4**. This indicator is relevant because heart disease is a leading cause of death in the United States.

Report Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Ocean County, NJ	578,589	2,113	365.16	203.4
New Jersey	8,826,516	18,389	208.34	175.4
United States	311,430,373	600,899	192.95	175.0

Heart Disease Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)

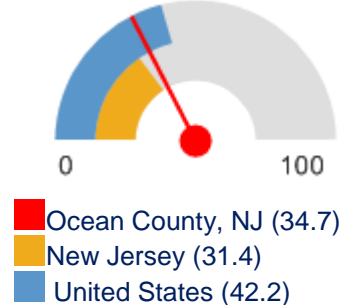


Data Source: CDC National Vital Statistics System. CDC WONDER. 2009-13.

Mortality - Lung Disease This indicator reports the rate of death due to chronic lower respiratory disease per 100,000 population.

nReport Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Ocean County, NJ	578,589	349	60.35	34.7
New Jersey	8,826,516	3,181	36.04	31.4
United States	311,430,373	142,214	45.66	42.2

Lung Disease Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)

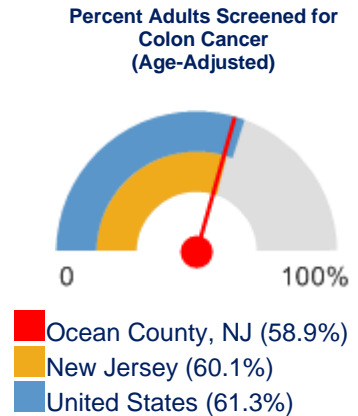


Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDCWONDER. 2009-13.

Cancer Screening - Sigmoidoscopy or Colonoscopy

This indicator reports the percentage of adults 50 and older who self-report that they have ever had a sigmoidoscopy or colonoscopy. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Report Area	Total Population Age 50+	Estimated Population Ever Screened for Colon Cancer	Crude Percentage	Age-Adjusted Percentage
Ocean County, NJ	190,662	122,596	64.3%	58.9%
New Jersey	2,194,251	1,377,990	62.8%	60.1%
United States	75,116,406	48,549,269	64.6%	61.3%

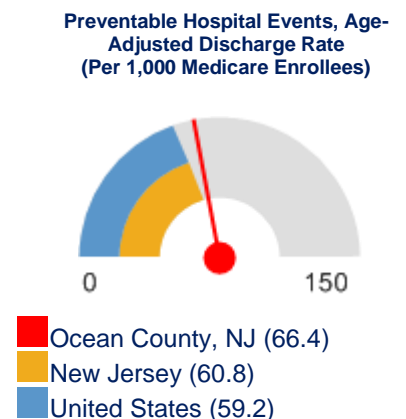


Data Source: CDC, *Behavioral Risk Factor Surveillance System*. Accessed via the *Health Indicators Warehouse*. US Department of Health & Human Services, *Health Indicators Warehouse*. 2006-12.

Preventable Hospital Events

This indicator reports the discharge rate (per 1,000 Medicare enrollees) for conditions that are ambulatory care sensitive (ACS). ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients. This indicator is relevant because analysis of ACS discharges demonstrates a possible “return on investment” from interventions that reduce admissions (for example, for uninsured or Medicaid patients) through better access to primary care resources.

Report Area	Total Medicare Part A Enrollees	Ambulatory Care Sensitive Condition Hospital Discharges	Ambulatory Care Sensitive Condition Discharge Rate
Ocean County, NJ	100,890	6,703	66.4
New Jersey	985,489	59,908	60.8
United States	58,209,898	3,448,111	59.2



Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, *Dartmouth Atlas of Health Care*. 2012.

Many **Thanks** to all of our partners and stakeholders that contribute towards improving the health of Ocean County residents!



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