

NJPCA & NJSORH

Quarterly Newsletter

Summer 2008

New Jersey Primary Care Association



New Jersey State Office of Rural Health

NJ STATE BUDGET FINALIZED

In a very tough budget year, NJ legislators have passed a State Fiscal Year 2009 budget that imposes reductions on a number of programs. The state is mandated to have a balanced budget by July 1st and Governor Corzine and the State Assembly and Senate were hard pressed to maintain funding levels seen in the past.

Health Centers received relatively flat funding, which was very good news. They were one of the few health care programs that received no cuts in the proposed budget. In the budget to begin July 1, 2008, FQHCs will receive the following:

\$ 40 million for uncompensated care for uninsured patients.

NJ Passes \$33 billion dollar budget –Health Centers Kept Whole

\$ 5 million for capacity expansions and quality initiatives
\$ 1.9 million for care to undocumented pregnant women
\$ 500,000 for FQHCs that provide care to homeless populations

Total funding to FQHCs for SFY 09 is **\$50.4 million.**

In addition, the legislators and the Governor have approved \$3 million of additional funding for any FQHC that is in financial distress as determined by the Commissioner of Health and Senior Services. This special pot

will be used for one-time grants to ensure that FQHCs stay financially stable for the purpose of "maintaining adequate access to health care within the State." Criteria for accessing this special funding are still to be developed by the Commissioner.

One of the key issues in this budget year was a revision of the Medicaid payment rate to FQHCs for Ob/Gyn procedures and for deliveries. In the past, FQHCs received only the PPS rate for deliveries and for certain gynecological procedures for Medicaid recipients. Such low payments became a reimbursement nightmare for the centers since the costs greatly exceeded the payment.

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NATIONAL HEALTH CENTER WEEK

2008

August 10-26

NJ Planning Team Featured on National Website

Recognizing the Service and Contributions of Community, Migrant, Homeless and Public Housing Health Centers



New Jersey Primary Care Association Holds Planning Meeting

New Jersey Primary Care Association "kicked-off" National Health Center Week (NHCW) with a planning meeting that was held in the community room of the Neighborhood Health Center Plainfield on Thursday, May 29, 2008. Over 40 people representing health centers, Medicaid managed care organizations, and pharmaceutical companies attended this meeting. All will contribute to the success of National Health Center Week in some way, shape or form.

The planning meeting focused on health center week activities and the importance of inviting elected officials

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Spotlight on National Women's Health Week

Sunday, May 11, 2008, Mother's Day, served as

an appropriate day to mark the start of National Women's Health Week (NWHW). The New Jersey Primary Care Association (NJPCA) acknowledged the importance of women's health with the 4th Annual Women's Health Advocates' Awards Brunch held at the Trenton Marriott.

Stephanie Clark, Founder and CEO of My Daughter's Keeper, Inc. served as the keynote speaker and honoree for National Women's Health Week Celebration brunch.

The following health advocates were honored as well: Laticia Bailey, Community Outreach, Horizon NJ Health; Assemblywoman Nilsa Cruz-Perez; Heather Howard, Commissioner of Health and Senior Services; Sandi



Honorees pose for photo with Katherine Grant -Davis (4th from left.) They are: (from l. to r.), Heather Howard, Nilsa Cruz-Perez, Stephanie Clark, Katherine Grant-Davis, Sandy Moore, Laticia Bailey, Penny Pinsker, Shirley Smith

ing these outstanding women advocates.

Moore, Community Outreach Specialist, University Health Plans; Penny Pinsker, Project Specialist, Office of Senator Frank R. Lautenberg; and Shirley A. Smith, Regional Nurse Consultant, Department of Health and Human Services, Health Resources Services Administration – Region 2.

State and local officials, community leaders and healthcare partners attended the brunch honoring



Katherine Grant-Davis presents keynote speaker and honoree, Stephanie Clark, with her award.

New Jersey's FQHCs Sponsored Many NWHW Activities

The FQHCs hosted a week of themed activities related to women's health including free screenings and healthy eating habits. Metropolitan Family Health Network and Horizon Health Center, both in Jersey City, and Ocean Health Initiatives in Toms River, officially "kicked off" National Women's Health Week on Monday, May 12th. Metropolitan Family Health Network held sun screening and Sun Safety Jeopardy game for patients, sponsored by Americhoice. At both Metropolitan and Horizon Health Center, Stephanie Clark, Founder and CEO of My Daughter's Keeper, a counseling and mentoring agency, spoke with single parents about what it takes to be a successful single parent followed by a book signing of her new book entitled, "Life As A Single Mom: It Isn't Easy or Is It?" Further south, at Ocean Health Initiatives, Health Educator Mariela Flores spoke on Lead Prevention and Shaken Baby

Syndrome. Ocean Health was busy throughout the week with health fairs and health education on topics such as breastfeeding, cervical cancer, skin cancer and prenatal care.

Throughout the week, Monmouth Family Health Center in Long Branch sponsored health education on post-partum depression and healthy nutrition during pregnancy. On May 14th the health center sponsored a health fair that provided free screening for blood pressure and other health problems. Doctors were also available to answer questions. Monmouth Family Health Center ended NWHW with a luncheon in recognition of women staff members.

At VNA-Central Jersey in Asbury Park, a plethora of activities were held. Dermascan sun screening and Sun Safety Jeopardy Game were offered to patients, sponsored by Amerigroup. Patients were offered assistance with NJ FamilyCare applications, and provided information on women's health, along with giveaways. In the southern part of the state, Southern Jersey Family Medical

Center honored NWHW by distributing carnations to all female patients the entire week. Health literature was also provided, and all female patients were encouraged to schedule appointments for preventive health screenings. At CAMcare, in collaboration with Horizon NJ Health, information on a variety of topics was made available to women.

In the northwest part of the state, Zufall Health Center in Dover, in partnership with Horizon NJ Health, sponsored a health education session on cervical cancer. The featured speaker was Horizon NJ Health Educator, Alminda D'Agostino. This event was followed by a workshop on New Jersey Family Care.

Pfizer Pharmaceutical, Inc. sponsored an event entitled, "A New Look at Why I Smoke and How To Quit," at Neighborhood Health Center Plainfield and Phillipsburg, and Metropolitan Family Health Network in Jersey City. The event targeted women but was open to all who were interested in the topic.

NJPCA Hosts PAC Event



Above, David Whaley, Dr. Sharon Buttress and Mark Bryant, CEO of CAMcare join in the festivities.

The New Jersey Primary Care Association hosted its Political Action Committee fundraiser on June 16th at the Trenton War Memorial. Over 125 people attended the event. Lady D and the Palmer Jenkins Trio treated guests to an evening of jazz. It was anticipated that many of the legislators would be in attendance but due to intense budget negotiations which occupied the lawmakers until after 11:00 PM that evening they were unable to join the guests. It was agreed that all had a very enjoyable evening.



NHCW Planning

Continued from page 1

and the media to NHCW activities. Health center representatives were given sample press releases and letters of invitation for elected officials. Because of the large number of attendees – apparently no other state has a planning meeting of this magnitude – our national organization, the National Association of Community Health Centers, posted the picture of the attendees on the national health center week website. To see the picture of the planning committee, visit www.healthcenterweek.com. While there, click on “join the celebration,” and then find an event (NJ). Listed are activities that are scheduled to take place at the health centers during NHCW. You may check this site daily as events are posted as they come in on a daily basis.

“America’s Health Centers: Home of America’s Health Care Heroes” is the theme for National Health Center Week 2008. It recognizes the vital role of health center providers in achieving the success of the health center mission. Accordingly, one of the events that will be sponsored by NJPCA this year is an award luncheon honoring health center staff members who go beyond the call of duty for patients

and their respective health centers. This event will take place immediately following a press conference on Saturday, August 9, 2008 at Neighborhood Health Center Plainfield.

This year’s Health Center Week also sets aside two days to focus on special populations who are often left outside of the mainstream health care system. Health Care for the Homeless Day will be observed on Wednesday, August 13, 2008 and the first ever Farmworker Health Day will be observed on Thursday, August 14, 2008. Community Health Care in Bridgeton and Southern Jersey Family Medical Centers in Hammonton will be sponsoring special events to highlight their services to the migrant population. Three of the five homeless sites will be holding cook-outs for the homeless this year: Henry J. Austin Health Center in Trenton, Metropolitan Family Health Network in Jersey City, and AtlantiCare in Atlantic City. Additionally, clothes donated by staff at NJPCA and other organizations will be distributed to the homeless during NHCW.

We invite you to join in the weeklong

celebration at our health centers around the state. For more information on NHCW, contact Leslie Morris at lmorris@njpca.org, or by phone at 609-689-9930, Extension 20.

NJPCA

Katherine Grant-Davis
President and CEO

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Spotlight on Stephanie Clark, Founder and CEO, My Daughter's Keeper

Stephanie Clark, Founder and CEO of My Daughter's Keeper, a counseling and mentoring agency, was the keynote speaker and honoree for New Jersey Primary Care Association's National Women's Health Week brunch held on May 14,

2008 at the Marriot Hotel in Trenton.

Stephanie spoke on the mission of her organization and her efforts to use her organization as a platform to mentor and counsel young girls and their mothers. Founded in 2002, My Daughter's Keeper, Inc. (MDK) is a non-profit educational and self development organization, based in Central New Jersey, developed to provide support and resources to mothers/caregivers and their daughters (ages 8-19) to help strengthen their relationships, as well as identify

solutions to problems such as: communications, peer pressure, personal health, teen pregnancy and substance abuse. In addition, MDK provides self-development opportunities for women and girls to help improve their quality of life. Stephanie shared with the audience her passion for community health centers, having worked in the arena for a brief period of time and having to rely on community health centers for her own health care needs. "I am not ashamed to

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NJPCA Receives Emergency Room (ER) Diversion Program Grant from the Centers for Medicare and Medicaid Services (CMS)

In May 2007, New Jersey Primary Care Association (NJPCA), in collaboration with the State Office of Medicaid and the New Jersey Hospital Association (NJHA) received a two- year \$4.8 million grant from the Centers for Medicare and Medicaid Services (CMS). This grant is targeted towards pilot testing a model for providing alternate non-emergency services to patients who present with primary care conditions in hospital ERs. The model, once instituted, will primarily target Medicaid patients, but the ultimate goal is to provide care to all New Jersey residents at the most appropriate, efficient, and cost effective site of care.

New Jersey has a higher ER usage rate (18%) for non-urgent primary care conditions when compared with national rates (13%). Studies have shown that Medicaid beneficiaries tend to have a higher ER visit rate than patients with other types of insurance and payment options. In New Jersey, an estimated \$438 million is spent on avoidable hospital ER visits each year. These visits, provided in a more appropriate, primary care setting could cost significantly less.

Once established, the ER pilot program will involve active participation of select hospitals and Federally Qualified Health Centers (FQHCs) to first triage Medicaid beneficiaries as

they present to the hospital ERs for non-urgent primary care conditions. Once treated, these patients will then be set up for follow-up care at the collaborating FQHCs. Staff dedicated to this program at each site (hospitals, FQHCs) will be able to set-up and track appointments for the diverted patients, and also arrange transportation for patients as necessary. The ultimate goal of the program is to ensure timely access to care by connecting patients to an alternate non-emergency care provider; allow easier access to follow-up care; reduce repeat visits to the ER; and in the process, promote the concept of a health care home for primary and preventive care services.

All America Access Plan – New Jersey

Under the Access for All America Plan, laid out by the National Association of Community Health Centers (NACHC), the nationwide health center network will be expanded to serve 30 million patients by 2015. This represents an average annual growth of 13.5% for the next seven years, adding 13 million patients to the existing 17 million being served by the network of com-

munity health centers nationwide.

After giving careful consideration to the existing capacity of the New Jersey health centers, growth needs in the underserved areas of the state, and service expansion needs for the existing patient base, New Jersey's 19 FQHCs are poised to take part in the Access for All America Plan by adding 21,199 new patients by 2010 and another 38,255 patients by the year 2015. These 59,454 patients to be reached by 2015 represent an annual average growth rate of 2.0%

over the next seven years. While this targeted growth rate is lower than the average annual growth rate of 12.1%, experienced by the FQHCs in the past (2002-2007), this rate sets a reasonable goal for the health centers in the context of existing capacity of the health centers and the need to strengthen the existing health centers (structural and financial infrastructure) so that they can continue to deliver high quality, affordable, and accessible services to the existing and expanding patient populations.

Office of Disaster Planning

Deconstructing Silos and Maximizing Disaster Management throughout the Healthcare Continuum Conference

This June 9th conference was quite a success! The conference was jointly sponsored by: Healthcare Association of NJ, Home Care Association of NJ, NJ Association of Homes and Services for the Aging, NJ Department of Health and Senior Services, NJ Hospital Association, NJ Preparedness Training Consortium, NJ Primary Care Association, and UMDNJ Center for Continuing and Outreach Education.

The conference kicked off with opening remarks from Katherine Grant-Davis, CEO and President of NJPCA, and Dave Gruber, Senior Assistant Commissioner of NJDHSS. Both speakers stressed the need for collaboration and partnerships throughout the healthcare continuum—recognizing that New Jersey is a State with unique public-private healthcare partnerships.

The keynote address discussed the Cuban disaster system and what principles could be



Keynote Speakers with Amelia Muccio (2nd from R) are Dr. Marty Thone, Dr. Elin Gursky, and Jamie Chebra

applied to U.S. disaster practices. Dr. Marty Thone of Casper, Wyoming presented a brief history of Cuba and comparison of health statistics between Cuba and the United States. Next, Dr. Elin Gursky of ANSER presented the Cuban surge capacity system with emphasis on Cuba's multi-faceted community healthcare system. Lastly, Jamie Chebra of Capital Health System wrapped up with Cuban preparedness strategies

including a robust disaster curriculum in primary schools, Cuba's early warning system, consumer driven evacuation plan and Cuba's annual METEOR drill.

After a short coffee break, the conference restarted with an interactive panel discussing State preparedness efforts throughout the healthcare continuum. Moderated by communication specialist Bill Jamison, the panel included speakers on key emergency preparedness topics. NJDHSS was well represented by Sylvia Bookbinder (Bioterrorism Education Coordinator), Sally Flanagan (Community Response Coordinator), Karen Fox (Exercise Support Team Specialist), Jim Langenbach (Operations Program Manager), Rebecca McMillen (Long Term Care Health System Liaison), Thomas Starr (State EMS Task Force Coordinator) and Dr.

Joseph Tricarico (Asst. Commissioner). In addition, Mary Goepfert and Major Jerome Hatfield represented NJ OEM and Kevin Sumner represented public health assets.

The afternoon sessions consisted of best practices in planning, partnering, and exercising. All

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Panelists discussing state preparedness efforts throughout the healthcare continuum.

Stephanie Clark

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stand here to tell you that I am among the many people who are uninsured in New Jersey," she told the audience of women. "But thankfully there are resources out there to assist employed women like myself," she added, referring to community health centers and other resources.

In October 2007, Stephanie released her first book entitled, "Life As A Single Mom: It Isn't Easy, Or Is It?" It is an inspirational book that fuels single women with advice for reclaiming their parental power in raising healthy and productive children. In addition to serving as

the keynote speaker at the brunch, Stephanie spoke with single parents and held book signings at Metropolitan Family Health Network and Horizon Health Center in Jersey City, Neighborhood Health Center Plainfield, and CAMcare in Camden. A special program targeting pregnant teenagers was held at Community Health Care's school-based program at Bridgeton High School in Bridgeton, NJ. Approximately 8 girls attended the session and were instructed on topics ranging from making positive choices to raising healthy children. NJPCA salutes Stephanie Clark!

Community Relations Corner

Updates and Tidbits



Leslie Morris, Director of Community Relations, continues to meet quarterly with the health center nutritionists and health educators. This group discusses best practices and resources available in the state to enhance their work with patients. At the last meeting on April 14th, NJPCA's Obesity Education Program Coordinator, Megan Sullivan, spoke with the group about upcoming opportunities for participation in the obesity initiative. Also on hand was LeeAnn Weniger of the NJ Food Stamp Nutrition Education Program at Rutgers University to discuss the group's participation in the calcium program for children via the NJ Food Stamp Nutrition Education Program.



Health Center Nutritionists and Health Educators

Leslie provided an overview of New Jersey's Federally Qualified Health Centers at the staff meetings at Community Health Care (June 6th) and Newark Community Health Center (June 17th). She provided both a state and national perspective on federally qualified health centers. The purpose of speaking at staff meetings is to make certain that all health center staff members are aware of NJPCA and its mission and role, as well as specific information on New Jersey's federally qualified health centers. If you are interested in having Leslie present,

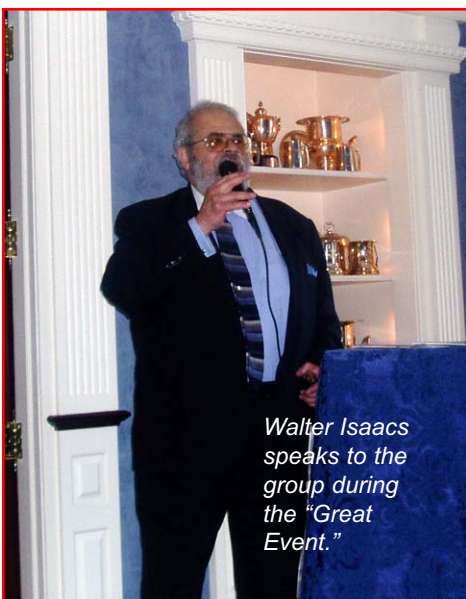
contact her at LMorris@njpca.org. On May 17, 2008, Leslie participated in the Princeton Project 55 where she assisted in the training of graduating seniors at Princeton University who plan to pursue a career in Public Health.

Presumptive Eligibility Meeting: Leslie continues to meet with presumptive eligibility workers from the health centers on a quarterly basis.

Attending these meetings are staff of New Jersey Family Care and the Office of Primary Care to lend technical assistance and answer questions. At the last meeting on June 4th, Leslie announced to the group that these meetings are yielding good outcomes. The most recent report from the state showed an increase in the number of patients enrolled through P.E., and in addition, all of our health centers are now enrolling patients through the online system.

Leslie continues to meet with the Human Resource managers at our health centers. The H.R. managers were instrumental in launching the workforce initiative at NJPCA, a federally funded project that is focusing on workforce recruitment, training and retention for our 19 federally qualified health centers.

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Walter Isaacs speaks to the group during the "Great Event."

HJA hosts "Great Event"

On Saturday, May 17, 2008, Henry J. Austin Health Center sponsored the "Great Event" on the beautiful grounds of the Stony Brook Farm at the home of Drs. Bruce and Denise DiDonato, in Princeton, New Jersey.

The event was held to provide funding for the S.W.E.E.T. program that provides nutritional assessment, exercise and case management to children in the Trenton schools. Some of the funds will be set aside for the pediatric asthma program to purchase supplies for families who are ineligible for Medicaid.

Event sponsors were Capital Health Systems, Educational Testing Service and Commerce Bank.



News from the New Jersey State Office of Rural Health

Rural Homelessness



Rural homelessness is a topic that is getting a great deal of attention from the NJ State Office of Rural Health (NJSORH) these days. It had been agreed, several months back when the program for the regional homelessness conference was being developed, that the SORH would sponsor a session on the unique aspects of homelessness in rural communities. This sparked quite an interest and based upon her research, Justine Ceserano, Director of the NJSORH gave a presentation on the topic at the regional meeting of state offices of rural health held in late June in Massachusetts.

Rural homelessness is often referred to as "invisible". Unlike the homeless

populations in urban areas, rural homeless are less concentrated, less numerous and less visible. The image of an urban homeless person is more likely to conjure up the thought of a mentally ill man, sleeping on the street with all his belongs in a shopping cart. The same is not true of a rural homeless individual. Studies present contradictory evidence as to whether one will find more homeless women or men in rural communities, but all certainly point to the fact that there are many homeless women accompanied by children in rural communities. These women are likely to be married, have worked in the last six months and are unlikely to have received assistance from any governmental or not-for-profit program tar-

geted at caring for the homeless. One is more likely to find these individuals sleeping in cars or campers or possibly on the couch of a relative rather than in a shelter. There tends to be less tolerance for their plight in rural communities. As is often found, the fierce independence that characterizes rural America can turn a cold shoulder to the rural homeless person. It is generally felt that "this is what you have chosen, and now you must deal with it".

Regardless of how it is looked upon and how rural homelessness differs from urban homelessness, the fact remains that it is present and growing and must be dealt with.

SUMMER SEARCH PROGRAM BEGINS

The 2008 summer Community Oriented Primary Care/ Student Experiences and Rotations in Community Health began on June 2nd with the first classroom training. Dr. Denise Rodgers, Vice President and Chief of Staff at UMDNJ treated the 19 first year primary care discipline

students to an introduction to community-based primary care. The students then began eight-week rotations at their individual sites. The summer program will include several classroom sessions as well as field trips to underserved settings and a visit to the state legislature. All students have been assigned projects by their sites, which must be completed, by the end of the program in late July.

BUDGET *continued from page 1*

In language submitted by the Medicaid office and approved by the Governor, payment for these procedures will now be the higher of PPS or fee for service for non managed care patients. For those patients in Medicaid managed care, the FQHCs are free to negotiate their best rate with the HMOs, and not have that rate subject to any caps, screens or other requirements. By carving these procedures out of the current PPS rate, it is thought that it will greatly increase the cash position of health centers in the State of New Jersey.

FQHCs will also see a small increase in the payment per visit for care to the uninsured. This bump in the rate is thought to be a one-time provision to help increase dollars that flow to the centers for SFY09.

In other key provisions, the budget calls for an increase of \$8 million to the FamilyCare program thus boosting the number of low-income patients who need health insur-

ance. This provision is primarily targeted towards parents whose income does not exceed 200% of the federal poverty level.

Lastly, the budget directs the administration to prepare a report to the Assembly and the Senate Budget Committee by December 31, 2008 to look at the feasibility of consolidating the State's Medicaid Program into one State Department. The reasoning behind this is that the State's Medicaid delivery system is fragmented which at a minimum results in duplicative administrative costs. Additionally, the fragmentation makes coordination on policies difficult to achieve.

FQHCs in New Jersey are extremely gratified to see this level of support from the Governor, the Cabinet, and both the Assembly and the Senate. We thank them for their ongoing support!

North Hudson Community Action Corporation Takes On New Site

North Hudson Community Action Corporation held a ribbon cutting ceremony on May 28, 2008 signaling the transfer of Saint Mary's Hospital's Eighth Street Health Clinic in Passaic, NJ to North Hudson. The clinic at 148 Eighth Street, serves primarily Medicaid and uninsured women and children, with a focus on pediatrics and gynecological care. St. Mary's estimates the clinic handles 24,000 patient visits annually, including 10,000 prenatal visits, 750 baby deliveries and some 7,000 pediatric visits.

Eighth Street Health Clinic is North Hudson's eighth site, and second in Passaic. "We remind you no matter where you are from or your status in this country, North Hudson

is here to serve you," the health center's CEO, Christopher Irizarry said during a press conference at the event.

With Saint Mary providing acute and specialty care to inpatients and North Hudson providing outpatient care as an FQHC, patients can receive the full spectrum of quality and cost-effective care. "North Hudson and St. Mary's are both experts in these inter-related yet uniquely different areas of health care. By focusing on what we do best and most efficiently, we can give patients the full spectrum of care while ensuring quality and maintaining costs," said Bob Ilannaccone, St. Mary's chief operating officer.

PATERSON RIBBON CUTTING



On May 23, 2008 State and local officials attended the opening ceremony celebration for the Paterson Community Health Center (PCHC). The new facility stands three stories high and was constructed next to the old site (32 Clinton Street Paterson, NJ).

The beautiful structure houses adult and pediatric examine rooms, administrative offices, community rooms and Pharmacy services. For almost 20 years, PCHC has been providing quality health care to families in the City of Paterson and surrounding communities in Passaic County. Dr. Mary Garner is the Chief Executive Officer.

Dr. Mary Garner, PhD., Chief Executive Officer, Paterson Community Health Center; Bill Best, Senior Vice President, PNC Bank, Community Development Banking, Heather Howard, Commissioner, NJ Department of Health & Senior Services, Archie Colander, Vice President, PNC Bank, Community Development Banking, Joe "Joey" Torres, Mayor, City of Paterson, Cynthia Davenport-Freeman, President, Paterson Community Health Center Governing Board, Jennifer Velez, Commissioner, NJ Department of Human Services

PCHC provides a wide range of services: adult medicine; pediatrics; OB/GYN-family planning; podiatry; dental; health education; nutritional counseling (registered dietitian); and social services (M.S.W.)

Community Relations Corner

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[Mark Your Calendar](#)

National Health Center Week

August 10-16, 2008

For a list of events at our health centers, visit www.healthcenterweek.com, or contact Leslie Morris at lmorris@njpca.org

**Conference: Health Care for the Homeless
Sponsored by the New Jersey, Pennsylvania, New York, Maryland/Delaware PCAs.**

Friday, November 14, 2008

**Marriott Hotel – Lafayette Yard
Trenton, New Jersey**

**For more information, contact Leslie Morris
@ lmorris@njpca.org**

CAMcare Immunizations

“Walk a mile to save a child!”

The New Jersey Immunization Information System (NJiIS) is the established statewide immunization information system serving as the official repository of immunizations administered to children in New Jersey.

“Immunization registries are confidential, population-based, computerized information systems that collect and consolidate vaccination data about children within a geographic area. Registries are an important tool to



CAMcare “walks a mile to save a child!”
CAMcare Health Corporation hosted an immunization awareness walk in April 2008.

increase and sustain high vaccination coverage by consolidating vaccination records of children from multiple providers, generating reminder and recall vaccination notices for each child, and providing vaccination history documents, and vaccination coverage assessments. One of the national and New Jersey health objectives for 2010 is to increase to 95% the proportion of children aged < 6 years who participate in fully operational population-based immunization registries.”

CAMcare Health Corporation located in Camden, NJ received an Immunization Champion Award from NJiIS for 2 yr old immunization rates of 96%.

Source:
<http://www.cdc.gov/vaccines/events>
<http://njiis.nj.gov/njiis>



Office of Disaster Planning

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partners in the healthcare continuum were represented. From long-term care, Janice Cambron and Shelley Wyatt presented integral planning aspects in disaster management. Doreen Germain represented the home health role in emergencies. Gary Del Moro, Pat Gildner, and Phyllis Worrell spoke for acute care constituencies and Cathy Vacirca and Kevin Tuno detailed public health planning across Bergen and Burlington counties. To further discuss METEOR and how to implement Cuba’s strategies in the United States, Jamie Chebra and Marty Thone reprised their role as Cuba subject matter experts.

The Federally Qualified Health Centers of NJ were well represented by Vin Urgola of North Hudson Community Action Corporation and Dr. Sharon Buttress of CAMcare Health Corporation. In the first afternoon session, Vin discussed North Hudson’s partnering approaches in Hudson County. North Hudson has had great success in partnering with local hospitals, OEM and the health department. In 2007, North Hudson participated in both the Northwest and Northeast Medical Coordination Centers’ exercises.

Dr. Buttress reprised her “Operation Derailed” presentation. She last presented O.D. in August 2007 for the Iowa PCA and FQHCs in Des Moines. In O.D., CAMcare tested their surge capacity, triage ability and Incident Command Systems when inundated with victims of a school bus crash and light rail accident. Unknown to most CAMcare staff, these victims were drama students from a local high school. Dr. Buttress is an expert in exercising FQHCs and better yet, she can run a live drill for under \$100

The conference ended with a “resource swap” that included several useful MOUs that were assimilated by Diane Anderson of NJHA. Also, contact information for OEMs, health departments, MCCs, and emergency preparedness partners throughout the continuum were included. All in all, the conference was a success and we would like to thank all our speakers, sponsors, and Suzanne Geiger of NJPCA for their tireless efforts.

**Our thoughts are with our fellow Community Health Center colleagues affected by the June Midwest flooding.

Quality Improvement Community Partnerships

“The Pediatric/Adult Asthma Coalition of New Jersey”

(PACNJ) was created by the American Lung Association of New Jersey and the New Jersey Thoracic Society in 2000, in an effort to build a statewide clearinghouse for asthma information and services. With over 130 members on their task forces, the PACNJ is working with schools, child care providers, physicians, health insurers, community groups, and environmental agencies to reach all of New Jersey’s children and adults with the most effective methods for managing their asthma.

New Jersey Primary Care Association (NJPCA) and PACNJ began their partnership in 2005 when the NJ Community Health Centers participated in the NJ Statewide Asthma Collaborative. Linda Whitfield

Spinner, NJPCA Clinical Quality Program Director serves on the PAC Coordinating Committee and the Quality Care Task Force. The Quality Care Task Force works to ensure New Jersey primary care physicians and members in the health care professions diagnose and treat asthma based on best practices according to the National Heart, Lung and Blood Institute (NHLBI) Guidelines for managing asthma, and NJ health insurance plans offer coverage to support best practices and referral to specialty care.

Community Outreach

PACNJ Asthma Friendly School Awards

Since March 2006, PACNJ has been presenting Asthma Friendly School Awards to schools in New Jersey who made an effort to reduce absenteeism due to asthma through staff education and the implementation of steps that could reduce asthma triggers and improve in-school air quality. During this quarter 56 schools from 13 counties in NJ qualified for the PACNJ Asthma Friendly School Award, bringing the total to 402.

All 83 Newark public schools completed the six steps for the award and received recognition at a celebration on May 21, 2008.



PACNJ Asthma Treatment Plan

NJ CHCs worked with other community organizations and PACNJ members to revise the Asthma Treatment Plan. The new version of the PACNJ Asthma Treatment Plan, in English and Spanish, is now available at the PACNJ website, www.pacnj.org, in black and white for easy download and reproduction. The medications listed on the New PACNJ Asthma Treatment Plan include the new ozone friendly HFA inhalers.



Source: PAC Website www.pacnj.org

Medical Director Spotlight

Dr. Nancy Merle is Medical Director for Southern Jersey Family Medical Center’s seven medical facilities. Born of modest parents in Puerto Rico, Dr. Merle knew early in life that she wanted to become a doctor. A graduate of the University of Puerto Rico School of Medicine, she completed her residency at Caguas Regional Hospital, University of Puerto Rico. Upon completion of her residency, and following several years in private practice, Dr. Merle, in 1987 joined the clinical staff as Family Practitioner at what was formerly Sa-lantic (now known as Southern Jersey Family Medical Centers). After 2 years in that position, she returned to Puerto Rico where she worked as the Director of Family Practice Medicine for the University of Puerto Rico’s Medical School.

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Nancy Merle, MD
Southern Jersey
Family Medical Center

NJPCA Quality Improvement Reunion Meeting

May 8 & 9 2008

In 2007 fifteen New Jersey Community Health Centers (CHCs) participated in the **New Jersey Statewide Quality Improvement Initiative: Integrating the Care Model to Improve Diabetes Clinical Management Collaborative**. This quality improvement initiative was a dissemination strategy using the Care Model and Model for Improvement as the framework to help improve the delivery systems in the health centers. The goal was to improve the delivery of healthcare services for people living with diabetes (and other chronic illnesses) as part of a proactive approach towards planned care. This design of dissemination sought to integrate the lessons learned from the National Health Disparities Collaborative and the NJ Statewide Asthma Collaborative (2005 – 2006). The learning year ran from January to December 2007.

In 2008, NJ Community Health Centers continue their quality improvement work using a population-based design to expand their patient registries and *systems type thinking* to help transform their organizations. Currently, sixteen NJ CHCs are working together to bring statewide awareness to the problems associated with obesity through a statewide Obesity Education Program Initiative. This initiative is working to reduce both the prevalence and incidence of overweight and obesity statewide, thereby reducing the risk of other chronic conditions and making New Jersey residents healthier.

On May 8 & 9, 2008 the CHCs came together for their first annual Quality Improvement Reunion meeting. The focus for this year's meeting was on improving delivery care systems for patients diagnosed with diabetes and obesity. Presentation topics included **Diabetes Prevention & Access: Where to Begin, New QI Member Orientation, Smoking Cessation –**

“To Prescribe or not Prescribe”, Get Moving – Get Healthy, PECS Training and Confessions of: “The Biggest Loser”. In addition, best practice teams showcased their Obesity Education programs.



The speaker for the Confessions of: “The Biggest Loser” presentation was Dr. Jeffrey Levine. Dr. Levine is an Associate Professor and Director of

Women’s Health Programs at the UMDNJ-Robert Wood Johnson Medical School, in New Brunswick, New Jersey. He is actively involved in primary care research, teaching, and outreach. Dr. Levine has written numerous articles and presented nationally on various women’s health and primary care related issues. Dr. Levine’s presentation received the highest positive feedback from the reunion participants.

In the spring of 2005, Dr. Levine took a bold step to improve his health by

becoming a participant in the second season television production of “The Biggest Loser,” a Survivor-like weight loss reality series on NBC. By losing a total of 183 pounds through diet and exercise, Dr Levine has inspired his family members, patients, peers, and thousands of fans to make healthier lifestyle changes. He now works with local schools, community groups, and national organizations to help address the epidemic of obesity in this country.

According to Dr. Levine, “We all have tremendous potential to impact our own health and the health of others. However, we often rely on a “Do as I Say” rather than “Do as I Do” mentality, underestimating the hidden messages our own health behaviors reveal, which can support or impair our advice. We can more effectively enable ourselves and our children to make healthier lifestyle decisions leading by example and practicing what we teach.”

For more specific advice from Dr. Levine visit www.drjeff.tv.



Preventing Childhood Obesity



We are facing an obesity epidemic that crosses the life span. Nationwide, not only are we seeing alarming rates of obesity in the adult population (~30%) but our children are getting larger and larger. Obesity rates have doubled for children aged 2-5 years and adolescents aged 12-19 years and it has more than tripled for children aged 6-11 years over the past three decades. Furthermore, New Jersey has the highest overweight level for low-income children ages 2-5 at 17.5%. Nationwide, an approximate 9 million children over the age of 6 are considered obese. (Body Mass Index (BMI) that plots at or above the 95th percentile on the CDC growth charts).

Given that, our children are being diagnosed with physical health conditions once seen only in adults; type 2 diabetes, hypertension, dyslipidemia, and sleep apnea to name a few. These conditions are likely to follow them into adulthood. Furthermore, overweight children and adolescents are more likely to become obese adults.

It is estimated that the average child watches three to four hours of television a day. This means that by the time of high school graduation, our children will have spent more time

- Eat 5 fruits and vegetables each day
- Reduce screen time to 2 hours or less
- Get 1 hour of daily physical activity
- Limit/cut out sweetened beverages

watching television than in the classroom!

In addition, fast food and sweetened beverage consumption have increased dramatically in the past 20 years. Milk is being replaced by soda and nutritious meals seem to be a thing of the past. Gone are the days when milk accompanied dinner and fruit was an after dinner snack.

We don't want to put a Band-Aid on this issue, we want to resolve it. Prevention is what works! With that being said, I introduce to you the **5-2-1-0 Childhood Obesity Prevention Campaign**. There are four messages targeted to parents and caregivers in an effort to prevent childhood obesity;

- ☐ Eat 5 or more fruits and vegetables/day
- ☐ Limit screen time (television, com-

puters, video games) to 2 hours or less each day

- ☐ Participate in at least 1 hour of physical activity every day
- ☐ Consume Zero (0) or almost no soda, sugar sweetened sports and fruit drinks

This message is supported by the American Academy of Pediatrics and all health centers should be including this message in their patient education. A brochure with the 5-2-1-0 message is available to you on the Health Disparities website (www.healthdisparities.net) under New Jersey, Toolbox for download and use at your health center. The goal is that all parents and caregivers in the communities you serve be made aware of the 5-2-1-0 Childhood Obesity Prevention Campaign and its message so we arm our children with what matters most, good health.

NJPCA Welcomes Intern



The New Jersey Primary Care Association recently secured a grant in the amount of \$50,000 for use in developing its Work Force Initiative. While most of the grant will go towards training on recruitment and retention for the federally qualified health centers, part of the grant has been disbursed in hiring a summer intern to work on this initiative. This intern, Melissa Deutsch, is a recent Princeton graduate who will be attending law school in the fall. Her role on the project includes identifying avenues of recruitment for all medical personnel and health center staff. This research will then be compiled for use in creating a best practices manual that will be disseminated to each of the health centers, helping to improve future recruitment and retention efforts.

Welcome Melissa!

Medical Director Spotlight

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Her love, commitment and interest for people and her belief in community health brought her back to Southern Jersey Family Medical Centers where she has served as Medical Director since 1991. Through the years, she has seen the organization grow from a single migrant and community health center in Salem County to a multi-faceted service organization offering medical and dental services to the migrant and resident populations of Atlantic, Burlington, and Salem Counties. As one of New Jersey's largest federally qualified health centers, Dr. Merle is responsible for strategically implementing measures that will continuously improve the quality and delivery of health care across all health and life stages. According to Merle "we must always keep our eye on the prize and that involves our focus on the elimination of health care barriers as well an emphasis on offering each of our patients access to the highest standard of care."

The recipient of numerous awards, Dr. Merle most enjoys her work with families. She is always excited and takes great pride when she has the opportunity to care for and counsel several generations of patients from within a family.

Nancy is happily married to Angelo Droz. While they have no children through their union, she boasts of the six great "kids" she considers as hers. She enjoys relaxing at home, cleaning, cooking, shopping and travel. She also admits to being a fan of old romantic songs. Humbled by all of her many blessings, Dr. Merle believes that to much is given, much is expected. And each day she heads to Southern Jersey where she and her staff are committed to making a difference in the lives of those they are charged to serve.

MEETINGS

AUGUST

August 5, 2008
10:00 am - 1:00 pm

NJPCA
Executive Committee Meeting
NJPCA Offices

August 6, 2008
NJ Quality Improvement
Committee Meeting

National Health Center Week August 10-16, 2008

August 12, 2008
10:00 am - 1:00 pm
NJPCA Board Meeting
NJPCA Offices

SEPTEMBER

September 3, 2008
NJ Quality Improvement
Committee
Monthly Meeting

September 9, 2008
10:00 am - 1:00 pm
NJPCA
Executive Committee Meeting

September 18, 2008
10:00 am
Presumptive Eligibility Meeting
NJPCA Offices

September 23, 2008
10:00 am - 1:00 pm
NJPCA Board Meeting
NJPCA Offices

September 26, 2008
9:30 am to 4:00 pm
Board Member Retreat
Forsgate Country Club
Monroe Township, NJ

OCTOBER

October 17, 2008
NJPCA Annual Luncheon
Morning Session
Quality Improvement

October 17, 2008 from
8:30 am – 12:00 pm
Obesity Education Program
Initiative
Where are We Now?
Hyatt Regency, Princeton

NOVEMBER

November 12, 2008
10:00 am - 1:00 pm
NJPCA Executive Board
NJPCA Offices

November 18, 2008
10:00 am - 1:00 pm
NJPCA Board Meeting
NJPCA Offices