







It is my to honor to lead the Department as its Acting Commissioner as we begin to implement a law that balances the rights of adult adoptees to their original birth records with privacy protections for birth parents.

Healt

New Jersey Department of Health

A law signed by Governor Christie in May 2014 allows thousands of previously sealed records on file with the Department's Office of Vital Statistics and Registry to be made available to adult adoptees and their families. The law makes it clear that while family history and medical information is more important now for adoptees than ever, privacy considerations that were central in the decisions of many birth parents must also be preserved. We are implementing this law with these two critical considerations in mind.

For adoptions completed before August 1, 2015, birth parents can choose to maintain their privacy by having identifying information redacted from the original birth certificate of the child they placed for adoption. They can also notify the State of their preference for contact with the adopted individual by submitting a contact preference form to the Department. Contact preference forms offer options of direct contact, contact through an intermediary, or no contact at this time. In order for contact preference forms to be accepted by the State Registrar, all birth parents must submit completed Family History Information forms, including medical, cultural and social histories.

Birth parents who choose to maintain their privacy by having identifying information redacted from the original birth certificate must submit this request by December 31, 2016 to ensure their privacy is maintained. Contact preferences can be changed at any time.

Beginning in January 2017, adult adoptees and their families will have access to thousands of previously sealed birth records, removing the often burdensome process of obtaining a court order. Adoptees will receive all information recorded at the time of their birth on the original birth certificate unless a birth parent requests redaction. Adoptees may also receive the birth parents contact preference and family history.

Those who may request copies of birth certificates beginning January 1, 2017 are adult adoptees; direct descendants, siblings or spouses of adopted persons; adoptive parents, legal guardians or other legal representatives of adopted persons; or state or federal government agencies for official purposes. Applicants will receive uncertified copies of original birth certificates on file with the Department's Office of Vital Statistics and Registry. Copies are for informational purposes only and cannot be used for legal proof of identity or citizenship.

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Acting Health Commissioner Cathleen Bennett was sworn in on Tuesday, August 4.

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VACCINES are not just for kids.

We need vaccines throughout our lifetime.



Follow the New Jersey Department of Health on Twitter at https://twitter.com/ NJDeptofHealth and on Facebook at www.facebook.com/ NJDeptofHealth

August is National Immunization Awareness Month

Throughout the month of August, the New Jersey Department of Health celebrates National Immunization Awareness Month (NIAM). The purpose of this observance is to highlight the importance of immunizations across the lifespan. Children, adolescents, and adults should all be current with vaccines to protect themselves and their loved ones against serious, and sometimes deadly, diseases.

Vaccines are recommended throughout the lifespan based on age, lifestyle, occupation, locations of travel, medical conditions, and previous vaccines.

- The flu vaccine is recommended for everyone six months of age and older.
- Childhood vaccines protect against 14 serious diseases including diphtheria, tetanus, pertussis (whooping cough), polio, measles, mumps, rubella, Haemophilus influenzae type b (Hib), hepatitis B, pneumococcal disease, and rotavirus.
- Preteens and teens should receive vaccines to protect against tetanus, diphtheria, and pertussis (Tdap), human papillomavirus (HPV), meningococcal disease, and the seasonal flu. During this time, health care providers should make sure adolescents are up-to-date with all of the recommended vaccines they might have missed as a child such as varicella (chickenpox) and hepatitis A vaccines.
- Vaccines are recommended for adults to prevent diseases such as shingles, pneumococcal disease, hepatitis, and whooping cough. Occasionally recommendations for vaccines are readjusted to a new age or risk group and may include booster doses or even new vaccines.
- Every adult should get the Tdap vaccine once. Women should receive the vaccine each time they are pregnant to protect their babies against whooping cough. Adults should receive a Td booster shot every 10 years. Tdap may be given as one of these boosters if the individual has not already gotten a dose.
- Health care providers should ask patients if they are considering traveling abroad in the near future, especially if they are visiting areas where certain vaccine-preventable diseases are endemic. Ideally, necessary vaccinations should be given at least 4-6 weeks before travel in order to give the body time to build up immunity.

In celebration of NIAM, consider conducting grand rounds, providing after-hour and weekend immunization services, or promoting educational resources on your web page or social media networks. For more information about NIAM, visit http://www.cdc.gov/vaccines/events/niam.html.

#NIAM15

Read the DOH press release on Immunization Awareness Month: http://www.nj.gov/health/news/2015/approved/20150804a.html



READY FOR SCHOOL? Check those vaccine records.



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Luis Torrens gets his temperature taken by a volunteer working at a seaport screening station. Torrens helped train community volunteers to work at the station.

DOH CDC Fellow Learns Lessons in Sierra Leone

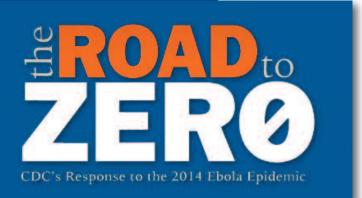
When Luis Torrens came to the New Jersey Department of Health two years ago as a fellow with the Centers for Disease Control and Prevention (CDC), he was hoping to begin an adventure of learning. He just didn't know how far these adventures would take him.

Torrens recently returned from Sierra Leone where he was deployed as part of the CDC Epidemiology team for Ebola response in the country's Kambia District. This followed a 60-day stint in the CDC Quarantine Station in Newark Liberty Airport last winter.

For 32 days in June and July, Torrens worked as an epidemiologist for the children of the Kambia district. He worked on three specific projects during his deployment: conducting surveillance on cases reported at local clinics, establishing a handwashing and screening station at a heavily traveled seaport and conducting case investigations of new Ebola positive cases.

He worked 10 hours a day, six days a week in Sierra Leone. Because of a 6 p.m. curfew, there was little down time, except for a July 4th celebration with the CDC members.

But the lessons learned were well worth the time spent.



"The experience showed me the importance of a strong and sustainable surveillance system," Torrens said. "It made me see how crucial it is to strengthen public health in our country and in New Jersey, because we never want to be in a position where we can't respond to preventable outbreaks. This experience reinforced my already strong passion for public health, but it also showed me the importance of developing sustainable infrastructures and the role of different fields such as economics, anthropology and finances in building a robust public health system. I would definitely deploy again for another outbreak if needed."

Torrens was also touched by the graciousness of the Sierra Leone community, who viewed the CDC workers as making a great sacrifice for their country. Often workers in the village or community leaders stopped and thanked Torrens and other team members.

"To them, individuals who left the comfort of America to help their country's people was something they respected thoroughly," he said. "I never saw it as a sacrifice. I saw it as a chance to help with the end of a disease outbreak. If anything, I thought they were brave for all they went through."







Ocean Health Initiatives (OHI) in Lakewood hosted a Health Center Week kickoff event on August 10. Pictured from left: NJ Primary Care Association CEO Jillian Hudspeth; OHI CEO Theresa Berger; Acting Commissioner Bennett and HHS Regional Director Jackie Cornell-Bechelli.



Acting Commissioner Bennett speaks about the outstanding work of New Jersey's health centers.

NJ Celebrates Health Center Week

For 50 years, community health centers have provided care to millions of residents, offering patient-focused, coordinated services to families and individuals in need of preventative and primary care.

As part of National Health Center Week, a total of 63 events were held across New Jersey from August 9 to 15 to honor the extraordinary work of these centers. The theme for this year's celebration was America's Health Centers: Celebrating Our Legacy, Shaping Our Future. Acting New Jersey Health Commissioner Cathleen Bennett attended the kickoff event on August 10 at Ocean Health Initiatives in Lakewood along with members of the New Jersey Primary Care Association and federal and local officials.

New Jersey has 20 community health centers with more than 100 sites across the state serving as critical health care safety nets for residents. Last year, New Jersey's health centers served more than 475,000 individuals with 1.5 million visits.

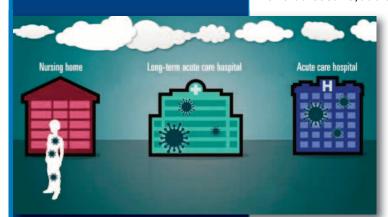
Community health centers provide prenatal and well baby care and immunizations to prevent childhood diseases like whooping cough and measles. They provide screenings for cancer, blood pressure and HIV. Many community health centers provide dental care and behavioral health care and bring mobile vans to underserved populations.

Governor Chris Christie proclaimed August 9 through August 15 Health Center Week in New Jersey to recognize the achievements of health centers in delivering accessible, cost-effective and quality services to all people, regardless of their ability to pay.

Visit the Department's <u>website</u> to find a community health center location and services.

CDC Video Shows How Antibiotic-Resistant Bacteria Spread Between Healthcare Facilities

Today, a growing number of infections are caused by antibiotic-resistant germs. In fact, these resistant germs cause more than 2 million illnesses and at least 23,000 deaths each year in the United States. In a <u>new video</u>



titled, "CDC Vital Signs—Making Health Care Safer: Stop the Spread of Antibiotic Resistance," CDC spotlights how antibiotic-resistant germs are spreading between healthcare facilities, even those that are practicing infection control and antibiotic stewardship. By adopting a *coordinated approach*, where multiple facilities in an area work together to improve infection control, enhance stewardship activities, and share information, we can reduce the spread of antibioticresistant germs and protect patients from infections that are difficult—or even impossible—to treat with antibiotics.

CDC's August 2015 Vital Signs report shows that by

working together in a coordinated effort health care facilities and health departments in a targeted area could prevent up to 70 percent of life-threatening **carbapenem-resistant Enterobacteriaceae (CRE)** infections over five years.



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On August 5, NJ Agriculture Secretary Douglas Fisher, USDA Food and Nutrition Regional Administrator Pat Dombroski, and Acting Commissioner Bennett visited the South Orange Farmers Market to mark Farmers Market Week.

Community Outreach Events

July-August 2015

- July 28 Dr. Brito attended the Collaborative Improvement and Innovation Network to Reduce Infant Mortality Conference.
- August 5 Acting Commissioner Cathleen Bennett joined Secretary of Agriculture Doug Fisher at the South Orange Farmers Market to celebrate National Farmers Market Week.
- August 10 Acting Commissioner Bennett visited Ocean Health Initiatives, a community health center in Lakewood to kick off National Health Center Week.
- August 13 Assistant Commissioner Gloria Rodriguez visited Newark Community Health Center to celebrate National Health Center Week.





Assistant Commissioner Meyers, Dr. Slim and Dr. Brito at the 2015 HIV Clinical Conference, held June 4.

Take Advantage of New Jersey's Farmers Markets

Community Farmers' Markets are more popular today than ever because exceeding numbers of consumers are becoming interested in buying their fresh produce directly from local farmers. People enjoy the experiences of talking to farmers about produce and seeing their neighbors or friends out in the open air while enjoying the sights and smells of market day.

Many farmers who attend these Community Farmers' Markets are Certified Farmer Vendors in the WIC & Seniors Farmers' Market Nutrition Programs (FMNP). These programs provide an opportunity for the State's farmers to directly market their locally grown fresh fruits, vegetables and herbs to nutritionally at risk pregnant, breastfeeding, post-partum women, children 2-5 years old as well as eligible seniors 60 years of age and older. For more information visit: <u>http://www.nj.gov/health/fhs/wic/farmermktpart.shtml</u>

2015 HIV Clinical Conference

The Department's Division of HIV, STD, and TB Services (DHSTS) held the 2015 HIV Clinical Conference on June 4 at the Hotel Woodbridge at Metro Park, Iselin. The conference focused on Pre-exposure prophylaxis, or PrEP, a prevention option for individuals at high risk of getting HIV, sexually transmitted infections among gay and bisexual men, and the impact of drug use on risk behaviors. The conference also featured discussions on treating individuals with both TB and HIV and individuals with Hepatitis C and HIV. Assistant Commissioner Connie Meyers moderated the conference and provided program objectives. Conference speakers included Deputy Commissioner Dr. Arturo Brito and Dr. Jihad Slim, DHSTS Medical Director Consultant. Approximately 200 healthcare professionals who treat individuals with HIV, STD and TB were in attendance.



Click Here For DOH Press Release on Birth Record Changes



Robert Wood Johnson Blood Services staff Sally Wells, Business Development Liaison, and Charles Taber, Operations Manager, coordinated blood collection operations during the drive.



More than 100 donors gave blood. Some gave *double red cell donations* through a special process that allows donors to give two units of red blood cells.

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Commissioner's Message, continued from page 1

For adoptions completed after August 1, 2015, birth parents may submit forms indicating preferred contact methods. These documents offer options of direct contact, contact through an intermediary, or no contact at this time.

In preparing for the implementation of the new law, the Department continually met and communicated with advocates and stakeholders on both sides of the issue, including: NJ Catholic Conference, New Jersey Right to Life, The Children's Home Society of New Jersey, Children's Aid and Family Services, Inc., New Jersey Coalition for Adoption Reform & Education, Family Options and NY Adoption Equality.

The new birth records changes mark a milestone in New Jersey's efforts to provide adoptees with information about their lineage and family medical histories while respecting birth parents' expectations of privacy.

For more information on the new adoption provisions, including Frequently Asked Questions, visit the Department's website at <u>http://www.state.nj.us/health/vital/record.shtml</u>

Collaborative Blood Drive Event at Rutgers Increases Summer Blood Supply

On August 6th, the Department of Health (DOH) joined with partners and blood centers from throughout the State to sponsor a blood drive at Rutgers University in New Brunswick hosted by Rutgers Athletics and Robert Wood Johnson University Hospital. The blood drive motto, *Don't Sit on the Sidelines This Summer! Save a Life – Donate Blood*, highlights the special challenge that blood centers face in collecting an adequate blood supply during this time of the year.

Hospitals need blood every day to treat patients with illnesses and injuries, or those requiring surgeries. Yet, it is not unusual for hospitals to experience prolonged periods of blood shortages in the summer. July and August are particularly slow months for blood donation. People take vacations. High school and college blood drives have been suspended until classes resume in the fall. So it takes teamwork and a special event to make a successful summer blood drive.

Six New Jersey blood centers joined together to conduct the August blood drive. Scarletnation.com put the word out to Rutgers alumni and football fans. *Tackle Sickle Cell*, a campaign spearheaded by former Rutgers football standouts Jason and Devin McCourty, who now play for the NFL, joined with the Embrace Kids Foundation in promoting the event and raising awareness of the need for blood for children with cancer, sickle cell and other serious disorders.

The New Jersey Hospital Association (NJHA) and DOH promoted the drive through social media and on their websites calling on donors to register to donate. While registration is encouraged, blood centers welcome "walk-ins" during blood drives.

Donors representing the general public and Rutgers football fans contributed 116 units of blood during the drive. This is considered a significant volume for a summer event.

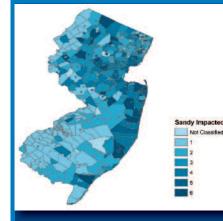
For more information about blood drives in New Jersey and to find the blood center nearest you, go to <u>http://www.state.nj.us/health/njsave3lives/.</u>



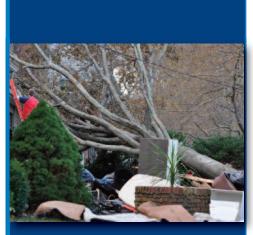
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Map of NJ showing the impact of Superstorm Sandy by municipality, created by DOH with data provided by Stephanie Hoopes Halpin of Rutgers University, School of Public Affairs & Administration.



Manasquan, N.J., Nov. 3, 2012 -- Survivors work to remove a large tree from the roof of a home in Manasquan. The area was pounded by Sandy. FEMA is working with many partners and organization to assist residents affected by Hurricane Sandy. FEMA News Photo



DOH Committed to Enhancing Sandy Recovery Through Research

Recognizing the need to continually refine recovery initiatives and better understand the longterm health impacts of Superstorm Sandy, the Department of Health (DOH) has invested federal funding into several research studies.

One ongoing project, led by Amy Davidow, PhD, Rutgers School of Public Health, Christina Tan, MD, MPH, DOH State Epidemiologist and Stella Tsai, PhD, DOH Research Scientist, was designed to assess Sandy's impacts on health and mental health. To assess health effects, routinely collected data from hospital admissions, emergency room visits, real time syndromic surveillance, mortality records and calls to the NJ Poison Information and Education System (NJPIES) were analyzed. In addition, Sandy-related questions were posed to New Jersey residents as part of the annual Behavior Risk Factor Survey (BRFS) as well as clients of Federally Qualified Health Centers (FQHC).

Each data source provides a different angle on health outcomes but taken together they tell a story. For example, from hospital discharge data, there is evidence of elevated emergency room use by asthmatic patients in the areas most affected by Sandy; this finding is consistent with experiences related by FQHC clients that reported interruptions in asthma treatment immediately after the storm. Statewide trends included increases in carbon monoxide poisonings identified by both NJPIES data and emergency room data.

Another ongoing research study, led by Margaret Lumia Ph.D., MPH, DOH Research Scientist, is examining the impact of Sandy on occupational injuries. The researchers looked at all hospital data and conducted surveys and focus groups with representatives of Emergency Medical Services, Tree Care Industry and Red Cross Volunteers. Researchers found that the rate of work-related injuries, among 18-65 year olds, in Sandy's high impact areas increased after the storm. Based on timing and type of injury, the most consistent increases were associated with rebuilding and recovery rather than the initial response. Focus group results indicated that during the storm workers faced additional hazards, such as contaminated floodwaters, downed power lines, storm damaged trees and extended shifts. The study will provide recommendations for education and outreach materials aimed at reducing or eliminating adverse health impacts of future storms.

DOH has also allocated federal recovery funds to commission the Sandy Child and Family Health Study focused on identifying ongoing Sandy-related health needs. The study, released in July and modeled after a similar five-year study following Hurricane Katrina, will inform the Department's ongoing provision of health services to Sandy-affected New Jerseyans. Many of the health needs identified in the study already are being targeted through existing Sandy recovery initiatives.

DOH recently received federal approval to continue two important recovery programs. The first, allocated \$4 million of federal recovery funds, so already has provided behavioral health issue screenings for more than 50,000 people. The second, allocated \$4.8 million of federal recovery funds, has allowed for the screening of more than 11,000 people for lead poisoning, including those at highest risk: children under 6 years old, pregnant women, and professionals working to rebuild Sandy-impacted communities.

New Jersey Autism Center of Excellence Summit 2015 THE UNFOLDING STORY OF AUTISM RESEARCH IN NJ *FROM CELLS TO SOCIETY* September 18, 2015

The summit will bring together families, providers, educators, researchers and policymakers, representing an extensive pool of knowledge and practice in the field of Autism Spectrum Disorder (ASD). The purpose of the meeting is to share information about current research and hopes for future advancements. The state of NJ is taking a comprehensive approach to ASD research.

Come and discover the latest developments.

MODERATOR, DR. MICHAEL LEWIS

University Distinguished Professor, Institute for the Study of Child Development, Rutgers Robert Wood Johnson Medical School

KEYNOTE SPEAKER, DR. WILLIS OVERTON

Thaddeus L. Bolton Professor of Psychology, Emeritus, Temple University Keynote Title: "Research Begins with Questions and Implicit Assumptions: How May this Impact Autism Research?"

TT	T	TT	FT	TT	TT

FEATURED NEW JERSEY AUTISM CENTER OF EXCELLENCE (NJ ACE) RESEARCHERS

Linda Brzustowicz, MD, Rutgers University Davide Comoletti, DVM, PhD, Rutgers University Emmanuel DiCicco-Bloom, MD, Rutgers University Cecilia Feeley, PhD, Rutgers University Yvette Janvier, MD, Children's Specialized Hospital Harumi Jyonouchi, MD, St. Peter's University Hospital Mary Louise Kerwin, PhD, Rowan University Amy E. Learmonth, PhD, William Paterson University James Millonig, PhD, Rutgers University Mark Mintz, MD, The Center for Neurological & Neurodevelopmental Health II T. Peter Stein, PhD, Rowan University Elizabeth B Torres, PhD, Rutgers University Walter Zahorodny, PhD, Rutgers University Barbie Zimmerman-Bier, MD, Rutgers University

Register

Now!



September 18, 2015 8:30 am to 4:15 pm Continental Breakfast and Lunch provide

MONTCLAIR STATE UNIVERSITY

Conference Center, 7th Floor University Hall 1 Normal Avenue, Montclair, NJ 07043





FOR MORE INFORMATION PLEASE VISIT: njace-cc.montclair.edu INTERESTED IN ATTENDING THE SUMMIT: CALL 973 655-7573 or 973-655-7950. REGISTRATION IS FREE. SPACE IS LIMITED!

This NJ ACE Coordinating Center is funded by the New Jersey Governor's Council for Medical Research and Treatment of Autism, New Jersey Department of Health.

UTGERS

'Cancer Matters' Brought To You By:

Cancer Institute

of New Jersey



Sun Protection: 101

By Ann W. Silk, MD

Even though the 'dog days' of summer are winding down, you still need to protect yourself from the sun's harmful rays – all year long. According to the American Cancer Society, skin cancer is the most commonly diagnosed cancer. Basal cell carcinoma and squamous cell carcinoma are the most common kinds of skin cancer, and most are easily cured. The risk of developing these cancers is directly related to your cumulative amount of sun exposure over your lifetime.

Melanoma is a less common form of skin cancer, but it is much more lethal. Your risk of melanoma is also related to sun exposure, especially sunburns. About two-thirds of melanoma is thought to be caused by skin cell damage from ultraviolet (UV) rays. Some melanomas may be preventable by limiting sun exposure. A person's risk for melanoma more than doubles if he or she had five or more severe sunburns in adolescence. The simple act of applying sunscreen can help reduce your risk of burning and developing skin cancer. For instance, a clinical study of sunscreen use in Australia found that people who used sunscreen on a daily basis for four years had 50 percent fewer melanomas develop over the following 10 years (*Journal of Clinical Oncology, Green, et al, 2011*).

Other ways to reduce your risk of sun exposure include:

- Use a moisturizer that contains sunscreen with SPF 15 or more every day on your face, neck, and ears. (The formulations of sunscreens and moisturizers with SPF have improved, and there are now many products available that do not feel tacky or greasy. Find one that you like. If you don't like it, you won't use it!)
- Apply one ounce (two tablespoons) of sunscreen with SPF 30 or more to your entire body 30 minutes before heading outside. Reapply every three to four hours. Do not burn!
- Avoid exposure at peak hours, between 11 A.M. and 3 P.M.
- Choose clothing that provides sun protection, including a broadbrimmed hat and UV-blocking sunglasses.
- Examine your skin head-to-toe every month. See your physician every year for a professional skin exam. People who have at least 50 moles are nearly four times more likely to develop melanoma. If you fall into this category or have a history of skin cancer in your family, you should consider seeing a dermatologist.

So remember, whether gardening, spending time at the pool, raking leaves or hitting the ski slopes, be sure to protect yourself from the sun!



Ann W. Silk, MD, is a medical oncologist who evaluates patients in the Melanoma and Soft Tissue Oncology Program at Rutgers Cancer Institute of New Jersey and an assistant professor of medicine at Rutgers Robert Wood Johnson Medical School

