



## The Star-Ledger

### Officials plan for healthier Morris

Coalition presents wish list to county

Thursday, October 25, 2007

**BY LAWRENCE RAGONESE**  
Star-Ledger Staff

Morris County needs a coordinated health care system, with better cooperation among health and social services providers, a nonprofit group of health officials has concluded.

A report issued yesterday by the Morris Regional Public Health Partnership said a more cohesive system could fill a host of gaps in health care, especially for lower-income residents and immigrants who may not understand the health care network or how to obtain treatment or benefits.

The massive report, the culmination of three years of work by the regional health group, was submitted to the county freeholders in Morristown yesterday.

"Most important is for government and community health care providers and hospitals to sit down together as a cohesive group, break down walls and develop coordinated programs and activities," said Pequannock Health Officer Peter Correale, a founder and member of the partnership.

An example of such an effort, said Correale, is expansion of mobile medical services for uninsured people, long offered by Saint Clare's Health System and now expanded to northern parts of the county via an agreement with Chilton Memorial Hospital.

Correale was joined yesterday by other health officers and providers in presenting the report.

The partnership -- which includes 13 health officers who serve most of Morris County's 39 towns, plus representatives of the county's three main hospitals -- has functioned in the absence of a county health department. Such a department might handle comprehensive health planning, but the cost of a county health bureaucracy has stopped the freeholders, who instead created a smaller health division inside county government.

The partnership's health improvement plan already has been submitted to the state Department of Health, said Robert Schermer, a consultant and the lone paid employee of the partnership, but the group also is seeking freeholder approval.

"We would like your recognition of the plan," said Jamie Bachman, of the oncology department at Saint Clare's, saying it would be good for the county.

Freeholder Director Margaret Nordstrom said the board would review the plan and respond to the group.

The partnership presented an initial report in 2006 showing Morris County had the state's highest per-capita rates of breast cancer and female melanoma and was near the top in men's skin cancer and prostate cancer. The affluent county ranked sixth statewide in all forms of cancer, with an especially high mortality rate for lung cancer.

Yesterday's follow-up report offered detailed suggestions to improve the health of the county's half-million

residents, with a goal of developing an "action plan" for those recommendations.

The following are key points among the dozens suggested:

- Aging: Improve availability and conditions of housing for seniors; improve health care delivery to seniors, including isolated elderly persons; address needs of senior caregivers; develop cost-effective counseling for elderly persons and those who care for them.
- Asthma: Initiate a study of county needs, especially for pediatric asthma; establish a training program for all health workers; offer patient education on use of medications and importance of diet.
- Cancer: Provide outreach and education on prevention and risk factors, such as obesity and tobacco use; improve cancer screening, especially for breast, prostate, cervical and colorectal cancers; enhance physician knowledge of cancer screening and treatment standards.
- Breast cancer: Get all women over age 40 to use breast cancer screening services; make a special effort to screen uninsured and low-income residents; ensure that schools instruct adolescents on self-examination and risk factors.
- Diabetes: Identify why residents cannot or do not monitor diabetic conditions; expand availability of diabetes testing kits; create culturally viable diabetes management programs, such as focusing on the Hispanic community.
- Heart disease and stroke: Reduce long waits for cardiac services; help persons with cardiac conditions who cannot afford required prescriptions; establish a county wide heart disease and stroke screening and education program.
- Mental illness: Reduce waits for mental health services; change public resistance to group homes for mentally ill persons; improve access to behavioral health programs.
- Obesity: Create programs to address obesity; work with food pantries to improve food quality and solicit better quality of donated foods; increase awareness of the need for good nutrition; focus on youth through early intervention on food and nutrition.

*Lawrence Ragonese may be reached at [lragonese@starledger.com](mailto:lragonese@starledger.com) or (973) 539-7910.*

© 2007 The Star Ledger

© 2007 NJ.com All Rights Reserved.