



# NJ Communi- CABLE

Fall 2019 Quarterly Newsletter

## Communicable Disease Service Mission Statement

Our mission is to prevent communicable disease among all citizens of New Jersey, and to promote the knowledge and use of healthy lifestyles to maximize the health and well-being of New Jerseyans.

We will accomplish our mission through our leadership, collaborative partnerships, and advocacy for communicable disease surveillance, research, education, treatment, prevention and control.

Phil Murphy, Governor  
Sheila Oliver, Lt. Governor  
Judith M. Persichilli, RN, BSN, MA  
Acting Commissioner

### COMMUNICABLE DISEASE SERVICE

Christina Tan, MD, MPH  
State Epidemiologist/  
Assistant Commissioner

Gary Ludwig, MS, Director

Suzanne Miro, MPH, MCHES  
Editor, Research Scientist

## Out of Sight, Out of Mind: Perceptions of Zika Virus in 2019

“It’s just not relevant anymore” is a direct quote from one participant in a recent focus group held to determine Zika virus-related knowledge, beliefs and behaviors among New Jersey residents with upcoming travel plans to visit Zika-affected areas.



Zika is a viral disease primarily spread through the bite of an infected mosquito and can also be transmitted through sex. Zika infection during pregnancy can cause a serious birth defect called microcephaly which is a sign of incomplete brain development. Current research suggests that Guillain-Barre syndrome, an uncommon sickness of the nervous system, is strongly associated with Zika infection. The World Health Organization (WHO) declared Zika a public health emergency from February through November 2016, though potential risk of Zika still exists in several regions.

related to Zika virus in New Jersey residents planning to visit Zika-affected countries in the next year, health educators from the New Jersey Department of Health Communicable Disease Service planned and moderated three focus groups. The focus groups were held in May-June 2019 at the Focus Pointe Global facility in Teaneck, NJ. Each focus group session consisted of 6-8 participants and lasted approximately 90 minutes. Focus Pointe Global recruited the participants which included men and women of childbearing age (18-49 years) living in New Jersey

In order to establish the knowledge, beliefs and behaviors

*Continued on page 6*




## Antibiotic Awareness Week 2019!

**J**oin the New Jersey Department of Health in promoting U.S. Antibiotic Awareness Week, November 18-24, 2019. As always, we ask that you forward our messages and materials to your partner organizations so that we can spread the word about antibiotic resistance to health care providers and public health professionals.

New this year, the Communicable Disease Service (CDS) has promotional size bottles of hand sanitizer, imprinted with the #NJAntibioticsAware logo. As in years past, we have viral prescription pads (small tear-off sheets resembling a prescription, but contains a checklist providers can use to recommend self-care comfort measures for viral illnesses), pharmacy instruction tear-off pads (for patients who are prescribed an antibiotic, these sheets contain instructions for taking the medication properly to avoid resistance), and brochures about appropriate use of antibiotics. Please contact Suzanne



Miro, health educator, at [Suzanne.miro@doh.nj.gov](mailto:Suzanne.miro@doh.nj.gov) to request materials. Be sure to specify which materials you would like to have, the quantity of each and mailing address. Hand sanitizers must be picked up at the CDS office in Trenton.

To plan activities for Antibiotic Awareness Week, visit <https://www.cdc.gov/antibiotic-use/week/get-involved.html> for a planning toolkit, materials, and messages. 

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**#NJ  
ANTIBIOTICS  
AWARE**

SMART USE, BEST CARE



Fall 2019

## Don't Let a Tick Make You Sick: Redesigning Tick-Borne Disease Education

With one of the highest rates in the country, tick-borne disease is one of the most pressing public health issues in New Jersey. As the first step in redesigning the tick education curriculum, required to be taught by law, a survey was sent out electronically via email and the Local Information Network Communication System to all public-school superintendents and local health officers in New Jersey. The survey included questions about the current education methods to be filled out by whoever is responsible for teaching the subject. There were 535 responses received, estimated to be just over a 20% response rate.



(28%). Other methods such as videos, PowerPoint slides, activity sheets, and information sent home to parents each were used by about 15% of schools. In terms of staff education, 34% of schools replied that there was none. Most frequently, schools claimed that printed materials were available at school (40%) and that information was shared electronically (26%). Only about 15% of schools actively taught their staff about ticks.

The distribution of the grade levels in the responses was proportional to the distribution of schools, meaning that the largest group represented was K-5. This age group (5-10) is one of those with the highest prevalence of Lyme disease cases, likely due to where and how frequently they play outside. *Note: Percentages do not add up to 100% as each question asked the respondent to select all that apply.* The first question asked about methods of student education and 28% of people responded that there were none. The two most common methods were class discussion (37%) and lesson plans

In response to a question about the key messages taught, it was found that 40-50% of schools taught about which diseases are spread, symptoms, where ticks live, and prevention of tick-borne disease. Another 30% taught how to remove a tick and gave resources for more information. Schools largely

*Continued on page 5*



Get more information at  
<http://nj.gov/health/cd/handwashing.shtml>.

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## Healthcare Providers Encouraged to “SHARE”

The first and most important step in preventing influenza is to get a flu vaccine each year. When preparing for the influenza season, it is important to promote flu vaccination to everyone six months of age and older, but especially those who fall into high-risk categories. Vaccination should be a priority for those with chronic lung disease, heart disease, and kidney disorders; however, immunization coverage rates are subpar for these groups. According to the National Influenza Survey-Flu (NIS-Flu), only 52.4 percent of adults aged 18-64 years at high-risk received the flu vaccine in 2017-2018. This is well below the Healthy People 2020 target of 70 percent. People in these high-risk groups can be more likely to have complications resulting from the flu that can lead to hospitalization and sometimes even death. Flu infections can also worsen chronic health problems.

A strong recommendation from a healthcare professional is a critical factor that affects whether patients get vaccinated. Most adults believe vaccines are important, but they still want confirmation from a trusted source of health information. Some patients are hesitant to receive the vaccine. To address these concerns, the Centers for Disease Control and Prevention (CDC) suggests using the SHARE method:

1. **SHARE** the reasons why the influenza vaccine is right for the patient given his or her age, health status, lifestyle, occupation or other risk factors.
2. **HIGHLIGHT** positive experiences with influenza vaccines (personal or in your practice), as appropriate, to reinforce the benefits and strengthen confidence in flu vaccination.
3. **ADDRESS** patients' questions and any concerns about influenza vaccines, including side effects, safety, and vaccine effectiveness in plain and understandable language.
4. **REMIND** patients that influenza vaccines protect them and their loved ones from serious flu illness and flu-related complications.
5. **EXPLAIN** the potential costs of getting the flu, including serious health effects, time lost (such as missing work or family obligations), and financial costs.

For more information on the SHARE method, please visit:

[www.cdc.gov/flu/professionals/vaccination/flu-vaccine-recommendation.htm](http://www.cdc.gov/flu/professionals/vaccination/flu-vaccine-recommendation.htm).

For additional tools and resources from the CDC to help make strong flu vaccine recommendations, facilitate conversations with patients, and to help improve flu vaccination rates, please visit:

[www.cdc.gov/flu/professionals/vaccination/prepare-practice-tools.htm](http://www.cdc.gov/flu/professionals/vaccination/prepare-practice-tools.htm). 

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*Ticks, continued from page 3*

taught only about Lyme disease with only 20% of schools even mentioning any other diseases. Most schools (55%) used the Centers for Disease Control and Prevention for resources, 36% used New Jersey Department of Health, 20% used the local health department, and less than 10% used other sources. Schools were mostly unaware of when their curriculum was last updated (60%) and 20% updated either in the last year or the last 2-3 years.

With this information, the New Jersey

Department of Health, in collaboration with the New Jersey Department of Education, is providing public schools with materials such as lesson guidelines, PowerPoint slides, activity worksheets, and information pamphlets for teachers, students, and parents. The curriculum will focus on prevention and aim to teach students from a young age how to stay safe.

To learn more about Lyme disease and other tick-borne illnesses visit:

<https://nj.gov/health/cd/topics/lyme.shtml>. 



**The Communicable Disease Service conducted a bra drive and donated over 200 bras to “I Support the Girls.” These undergarments were provided to women’s shelters and organizations that serve girls and women in need.**

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*Perceptions of Zika, continued from page 1*

with plans to visit a Zika-affected country in the next year. Zika-affected countries included areas with current or past transmission of Zika, but no current Zika outbreak according to CDC. The focus groups utilized a standardized discussion guide developed based on the ‘Knowledge, Attitudes and Practice surveys, Zika virus disease and potential complications’ resource pack established by the World Health Organization and the constructs of the Health Belief Model (perceived susceptibility, perceived severity, perceived benefits and perceived barriers). Focus Pointe Global provided audio transcription reports for each focus group session.

Not surprisingly, most participants

booked their travel online and did not feel at risk for Zika virus despite planning to travel to a Zika-affected country. Most knew the virus was transmitted by mosquitoes, but few knew about sexual transmission. Most participants believed Zika only affected pregnant women and their fetuses. Overall, the travelers’ lack of Zika knowledge demonstrates the need for more effective health education targeted to this population. Since the WHO declared the Zika public health emergency to be over in November 2016, media coverage has decreased. Thus, New Jersey residents must become more aware and better understand relevant travel-related health promotion and disease prevention information through other methods. 

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**Erika Lobe**

Erika Lobe, Adolescent/Adult Coordinator with the Vaccine Preventable Disease Program, giving a presentation at the US Department of Health and Human Services Region 2 Stakeholder Engagement meeting titled: “Ending HPV Cancers: A Forum on Health Care System Strategies for Increasing HPV Vaccination Rates in New Jersey and New York” on June 11, 2019. This meeting focused on developing strategies to improve HPV immunization uptake through a discussion on best and emerging practices. 





Fall 2019

## Communicable Disease Investigator Videos and Resource Guide

Come join new disease investigator, Sally Monella, among other public health super-heroes, as she learns the ropes at the fictitious Yersinia Health Department.

Through a collaborative effort, the Communicable Disease Service (CDS) and the Rutgers-School of Public Health (Rutgers-SPH) developed a series of five cartoon-like videos, and an accompanying resource guide, to support disease investigators across New Jersey. The purpose of the videos is to provide an overview of communicable disease investigation basics for local disease investigators to ensure consistent disease investigation across jurisdictions.

The videos are aimed at new communicable disease investigators, current disease investigators who want/need a refresher, and staff who have been assigned communicable disease investigation duties. The videos are also great for public health students, interns, and anyone interested in learning more about communicable disease investigation in New Jersey.

The videos are animated in five short, fun-to-watch modules




including the following topics:

- Introduction to Communicable Disease Investigation in New Jersey
- Epidemiology 101
- Disease Surveillance in New Jersey: Communicable Disease Reporting and Surveillance System (CDRSS)
- Reportable Communicable Diseases in New Jersey
- Intro to Outbreak Investigation

The resource guide provides more information, links to resources, and quiz questions to test your knowledge after reading the guide and/or watching the videos.

All video content and voice-over work was provided by CDS subject matter experts. Rutgers-SPH coordinated and edited the videos.

The videos can be accessed at [https://www.nj.gov/health/cd/edu\\_training/](https://www.nj.gov/health/cd/edu_training/). 

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## Opioid Conference

The New Jersey Department of Health, in collaboration with the New Jersey Association of County and City Officials (NJACCHO), sponsored a day-long event about the intersection of bloodborne pathogens and the opioid epidemic. The program, “New Jersey’s Approach to the Opioid Epidemic: Multi-Sector Connections for Improved Outcomes” was held at the Grounds for Sculpture in Hamilton, NJ on August 7, 2019. The program featured various presenters from state, county, local and private providers that shared initiatives, outcomes and best practices for fighting the opioid epidemic and reducing the spread of bloodborne pathogens, such as viral hepatitis and HIV.

The conference is a showcase of a year-long project between NJDOH and NJACCHO to collect data for each New Jersey municipality. The data looks at rates of hepatitis C and HIV, opioid overdose deaths, drug arrests, naloxone administration, and various harm reduction services, such as syringe access programs, bloodborne pathogen testing sites, treatment indicators (such as detox and opioid treatment programs), and locations for individuals to access medically-assisted treatment. This project is Phase I of a vulnerability assessment to determine municipalities/counties that are at risk for bloodborne pathogen transmission (viral hepatitis and



HIV) due to opioid drug use. Phase I included collecting data that were posted in multiple locations by various agencies and organizations using publicly available data when available. The project also included in-person meetings with stakeholders from 16 counties. Action plans for each of the stakeholder meetings addressing gaps and next steps were provided at the conference. Phase II of the project will include conducting a statistical analysis to determine if the various indicators are risk factors contributing to the transmission of bloodborne pathogens or opioid drug use.

Maps from the NJDOH presentation will be available at the NJACCHO website:

[www.njaccho.org](http://www.njaccho.org) 

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## New Jersey Hospital Association and the Department's Infection Control and Assessment Response Team "TAP" Together!

The Targeted Assessment for Prevention (TAP) strategy is a quality improvement framework developed by the Centers for Disease Control and Prevention (CDC) which uses data to drive action to prevent healthcare-associated infections (HAIs). The TAP strategy allows healthcare facilities to focus on a targeted unit and/or HAIs, based on facility assessment data with focused infection prevention measures. The New Jersey Hospital Innovation and Improvement Network in collaboration with the New Jersey Department of Health ICAR team, are leading a series of workshops to facilitate implementation of the TAP strategy, the most recent being March 2019.



the [ICAR Tool](#). Along the way, and with the help of the ICAR participants, the team has developed tools, resources, evidence-based interventions, and education programs to reduce HAIs, which were highlighted and disseminated at the TAP workshop and are available [here](#).

These TAP workshops are an opportunity for participants to collaborate with other healthcare facilities, offer peer networking, training and education, as well as tools to help achieve HAI reduction and improve healthcare quality in New Jersey. The next TAP workshop is to be determined. In the meantime, please check the [NJHA education page](#) for regular updates of upcoming programming. The most recent TAP workshop is available for review [here](#). Additional information on the TAP strategy is available [here](#). 

Since its inception, the ICAR team has conducted over 175 voluntary consultative infection prevention assessments at hospitals, long-term care facilities, dialysis centers, and outpatient settings to evaluate the effectiveness of their infection prevention programs through review of

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## CDS Welcomes New Staff!

**Nicolette Wilson** – Nicolette joins the CDS as the new CSTE Fellow. Nicolette is a New Jersey native who received a Bachelor of Science degree in biological sciences from Rutgers University and a Master of Biomedical Science degree from the Rutgers School of Graduate Studies.

She also holds a Master of Public Health degree from Rutgers School of Public Health with a concentration in epidemiology. Her research focused on county-level sepsis mortality rates in New Jersey. 





Summer 2019

## New Jersey Influenza Honor Roll

**D**on't forget to receive recognition for your hard work in promoting influenza awareness by participating in the New Jersey Influenza Honor Roll! The New Jersey Department of Health Vaccine Preventable Disease Program created the Influenza Honor Roll to recognize institutions that are striving to promote influenza prevention at their facilities. The Honor Roll is open to four categories of honorees: healthcare facilities, businesses, community-based partners, and educational facilities. Institutions from all categories are encouraged to submit applications detailing all implemented influenza-related activities. Activities for consideration may include (but are not limited to):

- Flu prevention campaigns
- Flu vaccination clinics



- Partnerships with local stakeholders to promote flu awareness and prevention

For more information and to apply to the honor roll, please visit [www.nj.gov/health/cd/edu\\_training/vdp/flu\\_honor\\_roll.shtml](http://www.nj.gov/health/cd/edu_training/vdp/flu_honor_roll.shtml).

## NJDOH Flu Resources

**T**he New Jersey Department of Health offers several educational materials that are focused on preventing influenza. If you are interested in copies of any of the following materials, please contact the Vaccine Preventable Disease Program at 609-826-4861.



- Flu Basics Brochure (available in English, Spanish....) [https://nj.gov/health/cd/documents/flu/flu\\_basics\\_eng.pdf](https://nj.gov/health/cd/documents/flu/flu_basics_eng.pdf)
- Flu for Older Adults Flyer [https://nj.gov/health/cd/documents/flu/flu\\_older\\_adults\\_color\\_version.pdf](https://nj.gov/health/cd/documents/flu/flu_older_adults_color_version.pdf)
- Flu and Your Teen [https://nj.gov/health/cd/documents/flu/flu\\_and\\_your\\_teen.pdf](https://nj.gov/health/cd/documents/flu/flu_and_your_teen.pdf)



Get more information at <http://nj.gov/health/cd/handwashing.shtml>.

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# Protect Me With 3+

YOUR HEALTH IS WORTH A SHOT!

The 8th annual Protect Me With 3+ adolescent immunization campaign will run from September 2019 through January 2020. The campaign is open to students in grades five through 12. Students are asked to submit either a poster or video highlighting one of the routine adolescent immunizations. To view more information on the campaign and to view prior winners, please visit

[www.protectmewith3.com](http://www.protectmewith3.com). 

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