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|  | |  | | | | | | | | | | **NEW JERSEY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | |  | | | |
|  | | **LOCAL HEALTH REPORT** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
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|  | | **Washington Township Health Department** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | |
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|  |  | | | | | | | | | | | | | | Bill Roehrich | | | | | | | | | | | | | | | | | | | | | | | / Mayor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Matt Murello, | | | | | | | | | | | | | | | | | | | | | | | Vice Mayor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Ken Short , | | | | | | | | | | | | | | | | | | | | | | | Committeeman | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Gregg Forsbrey , | | | | | | | | | | | | | | | | | | | | | | | Committeeman | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | James LiaBraaten , | | | | | | | | | | | | | | | | | | | | | | | Committeeman | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
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|  |  | | | | | | | | | | | | | |  | | |  | | **BOARD OF HEALTH LEADERSHIP** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | John Thomas , | | | | | | | | | | | | | | | | | | | | | | | Chairman | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Mariellen Hess Christian , | | | | | | | | | | | | | | | | | | | | | | | Vice Chairman | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Phil Carangelo , | | | | | | | | | | | | | | | | | | | | | | | Board Member | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Glenn Carrara , | | | | | | | | | | | | | | | | | | | | | | | Board Member | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Angela Adams , | | | | | | | | | | | | | | | | | | | | | | | Board Member | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
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|  |  | | | | | | | | | | | | | | Cristianna Cooke-Gibbs , | | | | | | | | | | | | | | | | | | | | | | | Health Officer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Gail Johnson , | | | | | | | | | | | | | | | | | | | | | | | Public Health Nurse | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Lin Gabel , | | | | | | | | | | | | | | | | | | | | | | | Registrar of Vital Statistics | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Kurt Bockbrader , | | | | | | | | | | | | | | | | | | | | | | | REHS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | | | | | | | | | | | | | | Sandra Muller , | | | | | | | | | | | | | | | | | | | | | | | REHS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
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|  |  | | | | | | | | | |  | | | | | | | **What Does Your Health Department Do?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | |  | |
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|  |  | | | | | | | | | | **Your local public health department protects and improves the health and well-being of your community, as well as the environmental resources upon which we all depend.**  Since 1900, the average lifespan of U.S. residents has increased by more than 30 years, with 25 years of this gain attributable to advances in public health, such as: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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|  |  | | | | | | | | | | • Vaccination  • Motor-vehicle safety  • Safer workplaces  • Control of infectious diseases  • Decline in deaths from coronary heart disease and stroke | | | | | | | | | | | | | | | | | | | | | | | | |  | | | • Safer and healthier foods  • Healthier mothers and babies  • Family planning  • Fluoridation of drinking water  • Recognition of tobacco use as a health hazard | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | |  | |
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|  |  | | | | | | | | | |  | | | | | | | Today, your local, county, regional, and state public health agencies continue to promote health and wellness across New Jersey.  **Your health department:**  • Protects you from health threats. Your health department works to prevent disease outbreaks and makes sure the water you drink, the food you eat, and the air you breathe are all safe. We are also ready to respond to any health emergency — be it bioterrorism, SARS, West Nile Virus, or a new environmental hazard.    • Educates you and your neighbors about health issues. Your health department provides you with information that helps you make healthy decisions, like exercising more, eating right, quitting smoking, and washing your hands to protect yourself from communicable diseases. During a public health emergency, we also provide important alerts and warnings to protect your health.   • Provides healthy solutions. Your health department offers the preventive care you need to avoid disease and maintain your health. We provide flu shots for the elderly and help mothers get prenatal care to give their babies a healthy start. We also help provide children with regular check-ups, immunizations, and good nutrition to help them grow and learn.   • Advances community health. Your health department takes part in developing new policies and standards that address existing and emerging challenges to your community’s health while enforcing a range of laws to help keep you safe. We work through research and staff training to maintain expertise and deliver up-to-date, cutting-edge health programs. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |
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|  |  | | | | | | **Washington Township Health Department & You – Improving Health Together!** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | • This section lets you highlight the most important good work, improvements, and key benefits that the LHD and its staff delivered to the community this year. Add your story here.   • Add your story here.   • Add your story here. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | |  | |  | | | | | | | **Public Health Quick Facts** | | | | | | | | | | | | | | | |  |  |  | | **Public Health, Personal Stories** | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | |  | | • Add data that you want to highlight here. Ideas include:  • Revenue generated  • Budget  • Number of FTEs  • Vaccinations provided  • Clinic visits provided  • Inspections conducted  • Facilities licensed  • Pets licensed  • Disease cases investigated  • Environmental health issues investigated | | | | | | | | | | | | | | | | | | | | | | | |  |  | |  | | | | | | | | | |  | | | | | | | This section lets you highlight a specific, personal story about the health department helping an individual or group of local residents in need.  Add your story (and a photo, if you have one) here. | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
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|  |  | | | |  | | | | | | | | | | **Washington Township Health Department Service Area** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | |
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|  |  | | | | | | **Administration** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | • This section lets you highlight the most important good work, improvements, and key benefits that the LHD and its staff delivered to the community this year. Add your story here.   • Add your story here.   • Add your story here. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | |  | |  | | | | | | | **Public Health Quick Facts** | | | | | | | | | | | | | | | |  |  |  | | **Public Health, Personal Stories** | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | |  | | • Add data about this program area that you want to highlight here.  • Item  • Item  • Item  • Item  • Item  • Item | | | | | | | | | | | | | | | | | | | | | | | |  |  | |  | | | | | | | | | |  | | | | | | | This section lets you highlight a specific, personal story about the health department helping an individual or group of local residents in need.  Add your story (and a photo, if you have one) here. | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | **Staffing & Human Resources Summary** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | **Fiscal Year Summary** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Total Number of Full-Time Equivalent Human Resources Available | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | 1Employees are individuals who are on the LHD’s payroll and paid a set salary or hourly rate. This includes full-time, part-time, and casual/at-will/W-9 staff of the LHD. 1 Contract staff are individual contractors or consultants who are not on the LHD’s payroll, but who invoice or bill the LHD for services rendered on behalf of the LHD and are paid directly by the LHD as individuals (rather than as companies/organizations). 1 Contract organizations are organizations that, under the terms of a contract, provide services on behalf of the LHD in exchange for payment, where the LHD pays the organization rather than directly compensating individual staff of the organization for their services. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | |  | | | | | | |  | | | | | | | **Annual Financial Summary** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | **Fiscal Year Summary** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | % of revenue from Fees and Fines | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Total expenditures for through | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Revenue minus Expenditures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Budget for next fiscal year | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Per capita expenditures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | **Inquiries, Issues, and Complaint Investigations:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | **Improving Community Quality of Life, Health, and Safety** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | Local health departments assist residents in the resolution of quality of life questions and concerns, as well as conducting investigations to prevent and correct (“abate”) conditions or uses of a properties that interfere with neighbors’ use or enjoyment of their own properties or endanger life, health or safety.  For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of contacts handled | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 315 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of cases investigated | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 37 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of cases that required enforcement action (including, but not limited to, fines, notices of violation, and court summonses) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 17 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Percent of cases that required enforcement actions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 45.95 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | The data on this page applies to: Chester Twp, Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | **Emergency Preparedness and Response** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | • Local health departments monitor the community for infectious or communicable diseases, public health nursing and case investigation & disease outbreak prevention and mitigation, health education/ risk communication, partnerships with traditional and non-traditional emergency responders and the community-at-large, and environmental contamination mitigation post-event (natural or manmade disasters).    For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL   **Template space where LHD can highlight 2-3 of their response or preparedness activities (including MRC / CERT volunteer signup and exercises), provide info on personal and family preparedness, and/or provide instructions on how to sign up for emergency alerts / notifications from the LHD** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | |  | | | | | | Washington Township Health Department has updated plans to respond to the following types of emergencies that involve: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | |  | | | | | | retail food safety | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | |  | | | | | | food-borne disease outbreaks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | |  | | | | | | infectious disease outbreaks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | |  | | | | | | isolation and quarantine to prevent the spread of dangerous illnesses | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | |  | | | | | | major natural disasters | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | |  | | | | | | potential bioterrorism exposures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | The data on this page applies to: Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | **Health Services and Outreach** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | • This section lets you highlight the most important good work, improvements, and key benefits that the LHD and its staff delivered to the community this year. Add your story here.   • Add your story here.   • Add your story here. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | |  | |  | | | | | | | **Public Health Quick Facts** | | | | | | | | | | | | | | | |  |  |  | | **Public Health, Personal Stories** | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | |  | | • Add data about this program area that you want to highlight here.  • Item  • Item  • Item  • Item  • Item  • Item | | | | | | | | | | | | | | | | | | | | | | | |  |  | |  | | | | | | | | | |  | | | | | | | This section lets you highlight a specific, personal story about the health department helping an individual or group of local residents in need.  Add your story (and a photo, if you have one) here. | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | **Health Education and Promotion** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | • Health Education occurs throughout all local health department programs, with a focus on providing education and health promotion services that help the public make informed decisions about their health. Health education programs and activities help the community achieve a healthier lifestyle and promote healthy behaviors.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL  **Template space where LHD can highlight 2-3 of their educational programs, provide a calendar of upcoming scheduled events, and/or provide instructions on how to sign up for updates from the LHD** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | number of single-session educational events | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 5 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | number of multi-session educational events | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Total number of educational events | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 7 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Distribute Health Education information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD conduct outreach to local schools | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD conduct outreach to local health providers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD conduct outreach to local businesses | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NO | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD conduct outreach to local faith-based organizations | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD conduct outreach to local childcare providers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD conduct outreach to other local organizations | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD post information to the LHD website | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD review and update information on the LHD website | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD share information via a municipal, county, or LHD email distribution list | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD share information on social media tools like Twitter, Facebook, etc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD broadcast information via radio spots | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD broadcast information via TV ads/spots | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NO | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD disseminate information in local print newspapers/newsletters | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Did the LHD disseminate information through local online newspapers/newsletters | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | The data on this page applies to: Chester Twp, Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | **Individual Clinical Services** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | • As part of our mission to assure that all people have access to essential health services, local health departments provide a variety of individual, clinical services such as screenings and checkups, referrals to appropriate medical care, and primary medical care and follow-up.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of clinic-based medical visits provided | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 5 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals (unduplicated) who received care at health department clinics | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 100 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of home-based nursing visits provided | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals (unduplicated) who received home nursing care from the health department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of referrals to medical follow-up, support programs, and/or accessible medical services | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of children immunized to protect them from dangerous and deadly preventable diseases | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of adults (age 18 and up) immunized to protect them from dangerous and deadly preventable diseases | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 296 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Total number of immunizations provided by the LHD | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 296 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Total number of health screenings provided by the LHD | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 12 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of children screened for dangerous levels of lead in their blood | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for cancer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 65 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for Hepatitis B | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for Sexually Transmitted Infections (other than HIV/AIDS) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for HIV/AIDS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for Cardiovascular Disease | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 35 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for Hypertension | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 55 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for Diabetes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 35 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for Tuberculosis | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for Vision | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for Hearing | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | Number of individuals screened for All Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | The data on this page applies to: Chester Twp, Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | |  | | **Communicable Disease Control** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | |  | | • Brief description of what this service is all about. 1 -2 sentence maximum, this will be a part of the template that the LHD can delete if they want to.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | |  | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | |  | | Was service provided for the entire year? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | The data on this page applies to: Chester Twp, Washington Twp-Morris. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | |  | **School Immunization Record Audits** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | |
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|  |  | | | | | | |  | • To ensure that our community schools and children are keeping kids healthy and safe from preventable disease, local health departments review immunization records of children within schools and childcare facilities.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | | | | | | |  | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | | | | | | |  | Number of Childcare / Pre-K facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 12 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
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|  |  | | | | | | |  | Number of Kindergarten facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 5 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
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|  |  | | | | | | |  | Number of Grade 1 facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 5 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
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|  |  | | | | | | |  | Number of Grade 6 facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 5 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
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|  |  | | | | | | |  | Number of High School facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  | | | | | | |  | Number of High School facilities whose transfer school records were audited by the health department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
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|  |  | | | | | | | **Animal Care and Management** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | | • This section lets you highlight the most important good work, improvements, and key benefits that the LHD and its staff delivered to the community this year. Add your story here.   • Add your story here.   • Add your story here. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | |  | |  | | | | | | | **Public Health Quick Facts** | | | | | | | | | | | | | | |  |  |  | | **Public Health, Personal Stories** | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | |  | | • Add data about this program area that you want to highlight here.  • Item  • Item  • Item  • Item  • Item  • Item | | | | | | | | | | | | | | | | | | | | | | |  |  | |  | | | | | | | | |  | | | | | | | This section lets you highlight a specific, personal story about the health department helping an individual or group of local residents in need.  Add your story (and a photo, if you have one) here. | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
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|  |  | | **Kennels, Pet Shops, and Shelter / Pound Facilities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |
|  |  | |  | | | | | • Local health departments inspect kennels, pet shops, shelters, and pounds to ensure that these facilities are operating in compliance with sanitation, safety, and animal welfare rules.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |
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|  |  | |  | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |
|  |  | |  | | | | | Number of licensed pet shop facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |
|  |  | |  | | | | | Number of licensed kennel facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |
|  |  | |  | | | | | Number of licensed shelter/pound facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |
|  |  | |  | | | | | Number of pre-operational inspections conducted at Pet Shops | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |
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|  |  | |  | | | | | Number of non-routine emergency & complaint-related inspections conducted at Shelter/Pound facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |
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|  |  | | | | | | | **Animal Bites and Rabies Control** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | • Brief description of what this service is all about. 1 -2 sentence maximum, this will be a part of the template that the LHD can delete if they want to.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of incidents where an animal bit a human | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 34 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of incidents where a rabid or suspected-rabid animal bit a domestic animal (pet / livestock) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 15 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of unimmunized domestic animals that were confined for rabies observation after biting a person or another animal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | **Animal Control Services** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | **Municipal Animal Shelter Operations** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | **Pet Licensing** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | **Rabies Vaccination Clinics** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | **Outdoor Facility Supervision and Inspection** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | | • This section lets you highlight the most important good work, improvements, and key benefits that the LHD and its staff delivered to the community this year. Add your story here.   • Add your story here.   • Add your story here. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | |  | |  | | | | | | | **Public Health Quick Facts** | | | | | | | | | | | | | | |  |  |  | | **Public Health, Personal Stories** | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | |  | | • Add data about this program area that you want to highlight here.  • Item  • Item  • Item  • Item  • Item  • Item | | | | | | | | | | | | | | | | | | | | | | |  |  | |  | | | | | | | | |  | | | | | | | This section lets you highlight a specific, personal story about the health department helping an individual or group of local residents in need.  Add your story (and a photo, if you have one) here. | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | | **Proprietary Campgrounds** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | • In select municipalities, local health departments enforce safety and sanitation standards for the operation of proprietary campgrounds in order to protect the health and safety of visitors and users.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of licensed / approved proprietary campground facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of unlicensed proprietary campground facilities identified by the health department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | Number of facilities on which the health department had to take one or more enforcement actions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | **Public Campgrounds** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | Either this service is not being provided by this LHD or No Data Available for the service related to this LHD. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | **Youth Camps** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | |  | | • Local health departments enforce safety and sanitation standards for the operation of youth camps in order to protect the health and safety of children who attend these programs.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | |  | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | Number of pre-operational inspections conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | Number of routine, operational inspections conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | Number of routine, operational re-inspections conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | Number of emergency & complaint-related inspections and investigations conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | Number of facilities on which the health department had to take one or more enforcement actions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | Re-inspection rate (percent of routine inspections that require re-inspection / follow-up) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | |  | | Average number of routine inspections per establishment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | The data on this page applies to: Chester Twp, Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | **Recreational Bathing Facilities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | • Local health departments conduct safety and sanitation inspections of public recreational bathing facilities (including swimming pools, lakes, rivers, streams, tidal bays, and ocean swimming facilities) to reduce the spread of communicable diseases and protect consumers who use these facilities from avoidable harm and danger.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of licensed public recreational bathing facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of licensed year-round facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of licensed seasonal facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 9 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of public recreational bathing features of each type: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Swimming / wading pools | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 9 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Hot tubs / spas | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Spray parks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Aquatic recreation facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Bathing beaches - Bays / oceans | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Bathing beaches - Rivers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Bathing beach - Lake | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of pre-operational inspections of bathing facilities of: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Year-round facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Seasonal facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 9 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of routine inspections of bathing facilities of: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Year-round facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Seasonal facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of routine re-inspections of bathing facilities of: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Year-round facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Seasonal facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of non-routine emergency & complaint-related inspections of: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Year-round facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Seasonal facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of individual features closed for health and safety violations, by type: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Swimming / wading pools | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Hot tubs / spas | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Spray parks | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Aquatic recreation facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Bathing beaches - Bays / oceans | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Bathing beaches - Rivers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | Bathing beaches - Lakes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of public recreational bathing facilities closed for health and safety violations: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | Year-round facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | Seasonal facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of Cooperative Coastal Monitoring Program (CCMP) sites | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | Number of sanitary surveys conducted by the LHD at: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | Bathing beaches - Bays / oceans | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | Bathing beaches - Rivers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | Bathing beaches - Lakes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  |  | | | | | The data on this page applies to: Chester Twp, Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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|  |  | | | | | | |  | | | | | | | | | | | | | | | | | | **2016** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | | **Local Business Supervision and Inspection** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | | • This section lets you highlight the most important good work, improvements, and key benefits that the LHD and its staff delivered to the community this year. Add your story here.   • Add your story here.   • Add your story here. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | |  | |  | | | | | | | **Public Health Quick Facts** | | | | | | | | | | | | | | |  |  |  | | **Public Health, Personal Stories** | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | |  | | • Add data about this program area that you want to highlight here.  • Item  • Item  • Item  • Item  • Item  • Item | | | | | | | | | | | | | | | | | | | | | | |  |  | |  | | | | | | | | |  | | | | | | | This section lets you highlight a specific, personal story about the health department helping an individual or group of local residents in need.  Add your story (and a photo, if you have one) here. | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
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|  |  | **Body Art, Tattoo, and Permanent Cosmetics Safety** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
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|  |  |  | | | | | | • Brief description of what this service is all about. 1 -2 sentence maximum, this will be a part of the template that the LHD can delete if they want to.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
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|  |  |  | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
|  |  |  | | | | | | Number of licensed establishments | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
|  |  |  | | | | | | Number of pre-operational inspections | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
|  |  |  | | | | | | Number of routine, operational inspections | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
|  |  |  | | | | | | Number of routine, operational re-inspections | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
|  |  |  | | | | | | Number of emergency & complaint-related inspections and investigations | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
|  |  |  | | | | | | Number of unlicensed establishments identified | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
|  |  |  | | | | | | Number of body art, tattoo, and permanent cosmetics injuries and illnesses reported | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
|  |  |  | | | | | | Average number of routine inspections per establishment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
|  |  |  | | | | | | The data on this page applies to: Chester Twp, Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |
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|  |  | | | | | | |  | | | | | | | | | | | | | | | | | | **2016** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | **Retail Food Establishment Safety** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | • Local health departments inspect and regulate restaurants, grocery stores, and other retail food facilities to ensure compliance with safety and sanitation rules. Local health departments also investigate and control disease outbreaks linked to retail food facilities.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of licensed food establishments: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Risk Level 1 - Establishments that conduct minimal food preparation and minimal handling of potentially hazardous foods | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 33 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Risk Level 2 - Establishments that conduct limited food preparation and heat/cool potentially hazardous foods | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 42 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Risk Level 3 - Establishments that conduct complex food preparation and heat/cool potentially hazardous foods | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 28 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Mobile food establishments | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 4 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Temporary - Establishments operating for no more than 14 consecutive days in conjunction with a single event or celebration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 27 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Other - Establishments that conduct ONLY specialized | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of specialized processes overseen by the health department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of retail food establishment plan reviews conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of pre-operational retail food establishment inspections conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of routine inspections for the following types of retail food establishments: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Risk Level 1 - Establishments that conduct minimal food preparation and minimal handling of potentially hazardous foods | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 33 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Risk Level 2 - Establishments that conduct limited food preparation and heat/cool potentially hazardous foods | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 42 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Risk Level 3 - Establishments that conduct complex food preparation and heat/cool potentially hazardous foods | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 28 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | mobile food establishments | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 3 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Temporary - Establishments operating for no more than 14 consecutive days in conjunction with a single event or celebration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 27 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Other - Establishments that conduct ONLY specialized processes such as canning | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of routine re-inspections for the following types of establishments: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Risk Level 1 - Establishments that conduct minimal food preparation and minimal handling of potentially hazardous foods | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Risk Level 2 - Establishments that conduct limited food preparation and heat/cool potentially hazardous foods | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 18 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Risk Level 3 - Establishments that conduct complex food preparation and heat/cool potentially hazardous foods | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 8 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Mobile food establishments | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Temporary - Establishments operating for no more than 14 consecutive days in conjunction with a single event or celebration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Other - Establishments that conduct ONLY specialized processes such as canning | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of non-routine emergency & complaint-related investigations/inspections: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Investigations | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 6 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Inspections (other than routine inspections) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 6 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of establishments on which the health department had to take one or more enforcement actions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | The data on this page applies to: Chester Twp, Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | **Tanning Facility Safety** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | • Local health departments enforce safety and sanitation standards for the operation of tanning facilities in order to protect the health and safety of consumers who patronize tanning facilities.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of unregistered tanning facilities identified by the health department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of pre-operational inspections of tanning facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of routine inspections of tanning facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of routine re-inspections of tanning facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of non-routine emergency & complaint-related inspections of tanning facilities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of tanning facilities on which the health department had to take one or more enforcement actions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 0 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | The data on this page applies to: Chester Twp, Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | |  | | | | | | | | | | | | | | | | | | **2016** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | | **Environmental Stewardship** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | | • This section lets you highlight the most important good work, improvements, and key benefits that the LHD and its staff delivered to the community this year. Add your story here.   • Add your story here.   • Add your story here. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | |  | |  | | | | | | | **Public Health Quick Facts** | | | | | | | | | | | | | | |  |  |  | | **Public Health, Personal Stories** | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | |  | | • Add data about this program area that you want to highlight here.  • Item  • Item  • Item  • Item  • Item  • Item | | | | | | | | | | | | | | | | | | | | | | |  |  | |  | | | | | | | | |  | | | | | | | This section lets you highlight a specific, personal story about the health department helping an individual or group of local residents in need.  Add your story (and a photo, if you have one) here. | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
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|  |  | | | | | | | **Onsite Wastewater Disposal Systems Safety** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | • Local health departments conduct education, permitting, and inspections of low-volume residential and commercial onsite wastewater treatment systems (e.g., septic systems) to ensure that systems are designed, constructed, and maintained properly, thus improving New Jersey’s water quality and protecting human health and the environment.   For more information, contact NAME/PROGRAM at PHONE NUMBER or EMAIL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | Number of system construction permits issued for final authorization to proceed with installations of new systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 10 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of system construction permits issued for final authorization to proceed with repairs to existing system | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 84 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of system construction permits issued for final authorization to proceed with alterations to existing systems that don't expand the capacity of the system | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 58 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of system construction permits issued for final authorization to proceed with alterations to existing systems to expand the capacity of the system | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 12 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of system construction permits issued for installation, repair, or alteration of advanced wastewater pretreatment systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 5 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of system construction permits issued for installation, repair, or alteration of commercial facility systems | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 2 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | number of systems in this municipality | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Are required system construction inspections performed by the health department (or other government partner)? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Yes, the health department (or other government partner) performs some of these inspections. Third-party certifiers also perform some of these inspections. | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of unduplicated noncompliant systems identified | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 157 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of reality transfer system inspection reports reviewed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 172 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of systems identified as noncompliant as a result of review of reality transfer system inspection reports | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 143 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Does the health department have a septic management program in place? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | No towns are covered by septic management program | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of septic management program inspection reports reviewed by the health department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of system investigations conducted by the health department | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 47 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | **Potable Wells and Drinking Water Safety** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Does the health department collect potable well water samples? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Does the health department analyze potable well water samples? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of potable well investigations conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 15 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of potable well certificates of compliance issued | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 20 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of potable well investigations where the health department determined well water to be hazardous to humans | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 8 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of public water system complaints received | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of potable well inspections conducted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 82 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | Number of unduplicated potable wells inspected | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 67 | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | | | | | | | The data on this page applies to: Chester Twp, Washington Twp. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
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|  |  | | | **Childhood Lead Poisoning Prevention and Control** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
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|  |  | | |  | | | | **Key Facts & Activities** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2016 data** | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | |
|  |  | | |  | | | | Was service provided for the entire year? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | |
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