

## 11.0 Healthy Communities

### Master Plan Recommendations Updates

**Recommendation 10.1: Work with local communities and stakeholders to promote agricultural sustainability through healthy food choice initiatives such as access to affordable, healthy foods and the creation of community gardens, urban agriculture programs, mobile food stands/food truck courts, and farmers markets. (Continuous)** Planning staff continues to work with the Office of Economic Development on the Grown in Monmouth initiative to promote agricultural sustainability. The GIS staff have assisted with development of a *Grown in Monmouth Story Map* that provides an online directory for Grown in Monmouth Partners including restaurants, farmers markets, wineries/breweries, pick-your-own, community gardens, distributors, community supported agriculture (CSA), and Christmas tree farms. The Monmouth County Environmental Council (MCEC) spring 2017 roundtable event promoted hydroponics as a sustainable agricultural practice.

**Recommendation 10.2: Continue to protect human health by assisting with the identification and removal of environmental hazards from the community and raising awareness about public health issues. (Continuous)** The Monmouth County Health Department (MCHD) continues to participate in the New Jersey Department of Environmental Protection (NJDEP) Cooperative Coastal Monitoring Program to ensure public health at bathing beaches. Through the MCHD's email newsletter and the Division of Planning's *Environmental Newsletter*, outreach opportunities exist to increase awareness on public and environmental health issues. Planning staff continue to monitor environmental issues and permit applications that could impact Monmouth County.

**Recommendation 10.3: Provide planning support and services to the Monmouth County Sheriff's Office and Monmouth County**

**Prosecutor's Office for public safety, law enforcement, crime prevention, and emergency response. (Continuous)** Staff continued to work with Monmouth County Office of Emergency Management (OEM) on coastal resiliency and will soon embark on providing technical assistance for the update to the *All Hazards Mitigation Plan*. Coastal resiliency and other coastal safety related issues continue to be addressed through the *Naval Weapons Station (NWS) Earle Joint Land Use Study (JLUS)* and New Jersey Fostering Regional Adaptation through Municipal Economic Scenarios (NJ FRAMES) programs.

**Recommendation 10.4: Incorporate the Monmouth County Solid Waste Management Plan (2009) as a component of the Monmouth County Master Plan's Healthy Communities Element. (No significant action to date)**

**Recommendation 10.5 Incorporate by reference the Monmouth County Community Health Improvement Plan (CHIP) (2012) as a component of the Healthy Communities Element and include studies, reports, and findings from the MCHD and other local health departments as consultative and supportive documents to the Master Plan. (No significant action to date)**

### 11.2 Existing Conditions

#### 11.2.1 Supportive Reports and Guiding Documents

**Community Health Needs Assessments (CHNA) |** The 2010 Patient Protection and Affordable Care Act requires that nonprofit hospitals must perform a community health needs assessment (CHNA) every three (3) years and adopt an implementation strategy to meet the significant community health needs identified in the assessment as a condition of maintaining their tax exempt status. There are currently five (5) hospitals that serve the greater Monmouth County region. These include CentraState Medical Center in Freehold Township, Monmouth Medical Center (RWJ Barnabas Health) in Long Branch, Jersey Shore University Medical Center (Hackensack Meridian Health) in Neptune Township, Riverview Medical Center (Hackensack Meridian

Health) in Red Bank, and Bayshore Community Hospital (Hackensack Meridian Health) in Holmdel.

■ **CentraState Medical Center** | The CentraState Medical Center FY2013 CHNA was updated in 2016. CentraState defines its community or service area as Monmouth County, in general, and western Monmouth County in particular. The CHNA identifies Freehold Borough as having a significant population that is medically underserved, low-income, or a minority population that is at risk of not receiving adequate medical care as a result of being uninsured, underinsured, or other barriers to health care access. Significant health care needs for Monmouth County, specifically western Monmouth County, identified in the CHNA include:

- 1) Mental Health (Substance Abuse, Suicide),
- 2) Health Equity (Access to Care, Cultural Diversity, Demographic Disparities, Health Education/Promotion, Health Literacy)
- 3) Healthy Lifestyles (Obesity, Diabetes, Cancer, Cardiovascular)

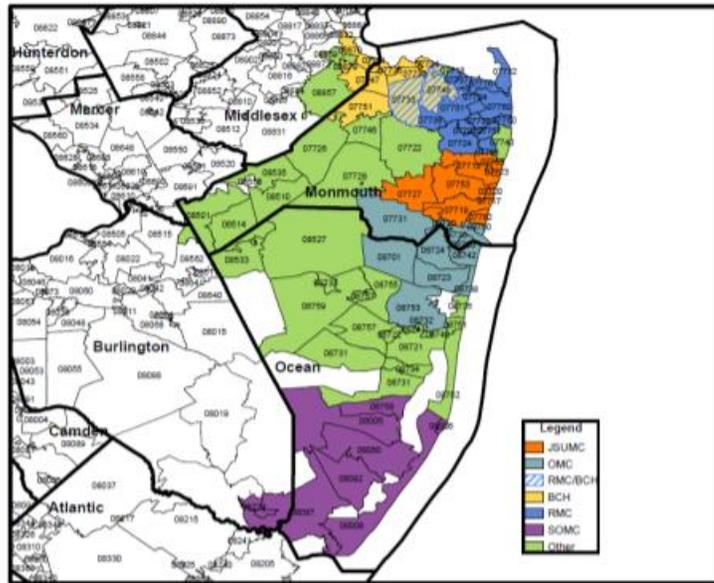
■ **Monmouth Medical Center (MMC)** | The Monmouth Medical Center FY2013 CHNA was updated in 2016. Monmouth Medical Center defines its primary service area from approximately Keansburg to Wall Township, mostly east of the Garden State Parkway and its secondary service area from the Raritan Bayshore area in Middlesex County, south through eastern Monmouth, including Lakewood Township in Ocean County. MMC considered secondary and qualitative data to determine four top health issues on capacity, resources, competencies and needs specific to the population it serves.

The top four (4) health issues identified are as follows:

- 1) Prevention and Treatment of Cardiovascular Disease, Obesity, and Diabetes
- 2) Prevention and Treatment of Cancer
- 3) Address the Medical Needs of Behavioral Health Patients
- 4) Reduce Disparities Regarding Access to Care



■ **Hackensack Meridian Health** | The 2015 CHNA is still in effect for Jersey Shore University Medical Center, Riverview Medical Center, and Bayshore Community Hospital. Hackensack Meridian Health's CHNA covers Ocean and Monmouth Counties with the service area for their hospitals in the region spanning from southeastern Middlesex County to southern Burlington County.



Systemwide, which includes the three (3) Monmouth County medical centers plus two (2) out of county hospitals, the ranking of health issues are as follows:

- 1) Nutrition, Physical Activity, & Weight
- 2) Diabetes
- 3) Heart Disease & Stroke
- 4) Substance Abuse
- 5) Mental Health
- 6) Access to Healthcare Services
- 7) Cancer
- 8) Respiratory Diseases
- 9) Injury & Violence

**11.2 Existing Conditions**

**NEW! Opioids Crisis** | The 2016 *Master Plan* recognized heroin and opioids as emerging public health issues. With the exception of Monmouth and Ocean County, in 2017 New Jersey suffered an increase

in the administration of Narcan, with approximately 28 percent more incidents overall. Monmouth and Ocean Counties were part of what has been called the "epicenter" of the state's opioid epidemic. But there is hope for cautious optimism that opioid abuse in the area could be waning. While the opioid crisis has deepened in many communities around the State and Nation, there has been progress in reducing the number of overdose fatalities here at home. In 2017, Monmouth County experienced 472 opioid overdoses treated with Narcan, 36 which were fatal as compared to 401 overdoses resulting in 42 fatalities in 2016. 2018 is already looking more promising. Most, if not all of this reduction in overdose fatalities is attributable to police, EMT, and first responder training in Narcan deployment in recent years. However, stopping overdoses is not the same as reducing the number of addictions. Preventing abuse remains a key factor in stopping addiction. Awareness about the crises has led to a reduction in prescriptions for this type of painkilling medication. Monmouth County's opioid prescriptions, measured in morphine milligram equivalents (MME) per person, fell by about 21 percent from 2010 to 2015. The annual average prescription amount dropped from 890.34 to 703.85 MME, or about 20 to 15.5 30-mg. per person, according to the Centers for Disease Control and Prevention. As legally prescribed opioids become more difficult to acquire, synthesized street versions such as fentanyl remain a growing threat to community health and safety.

**11.4 Stakeholder Actions and Efforts**

**11.4.1 Monmouth County Efforts**

■ **NEW! Aging Population Study** | Monmouth County's population is aging. In 2015, around 100,600 of Monmouth County's 629,185 residents were estimated to be at least 65 year old. By 2034 this group is projected to grow to nearly 146,000. While this group made up 16% of the total population in 2015, they are projected to make up 22% by 2034. This increase in the size of the 65 and older population as well as the "graying" of the population overall will have a large effect on the services that municipalities need to

provide and the types of homes and communities that will be needed for successful aging. In 2017, the Division of Planning's Strategic/Long Range Planning section undertook the *Aging Population Study* to help decision makers understand these demographic changes, frame the issues that arise due to an increasing aging population, and identify opportunities to improve the livability of Monmouth County. The 65 and older population of 2034 will certainly be different than the 65 and older population of today, so it is important that future decisions are made with this in mind. The study contains two (2) focus areas: housing and transportation.

*Aging Population Study* Key Findings:

- The 70 to 85 and older cohort will see growth through 2034. In contrast, the 55 to 64 and 65 to 69 cohort will decline after 2029.
- Due to the increasing life expectancy of men, they are projected to make up 38% of the 85 and older cohort in 2034, this is up from 32% in 2014.
- The 65 and older population will become more diverse by 2034 compared to 2014. The increase in diversity is driven primarily by the Hispanic and Asian populations.
- The southern coastal municipalities have the oldest populations (defined as percent of total population over the age of 65). Sea Girt was found to have the oldest population with 36% of its population aged 65 or older.
- Age-restricted communities are an increasingly popular housing choice. In 2017 there were a total of 12,464 units located in active adult age-restricted communities, and another 6,559 housing units located in age-restricted affordable housing. The vast majority (84%) of active adult age-restricted communities are located in car dependent areas. Affordable housing units fared better, with only 40% located in car dependent areas.

Additionally, many active adult age-restricted houses lack age in place amenities.

- A majority, 66% of Monmouth County's 65 and older populations live in areas that are considered as having a moderate to high risk of isolation. Only 10% of the 65 and older population live in the "least risk" category.
- Coastal communities on average scored better on the isolation metric.
  - A little more than half of the 65 and older population live within the Access Link coverage area, while only 14% have access to local bus service.
  - Only 10 of Monmouth County's municipalities are considered very or somewhat walkable, with Asbury Park being the most walkable municipality in the County.
  - A majority, 60%, of the 65 and older population live in a municipality that provides a municipal shuttle service. These shuttle services provide trips to and from senior centers as well as pre-planned shopping and recreation trips.

**NEW!** Figure 11.4 | Isolation Metric Score for Senior Population by Block Group

- The **higher the score on the metric, the less risk of isolation** the census tract is considered to have based on available transit, walk score (Source: WalkScore.com), vehicle ownership, and municipal transit services. The isolation metric does not include an input for public safety.
- Scores were broken down into four ( 4) categories: 1. Least Risk of Isolation; 2. Less Risk of Isolation; 3. Moderate Risk of Isolation; 4. Highest Risk of Isolation,

*Map 11: Final Isolation Metric Score*

