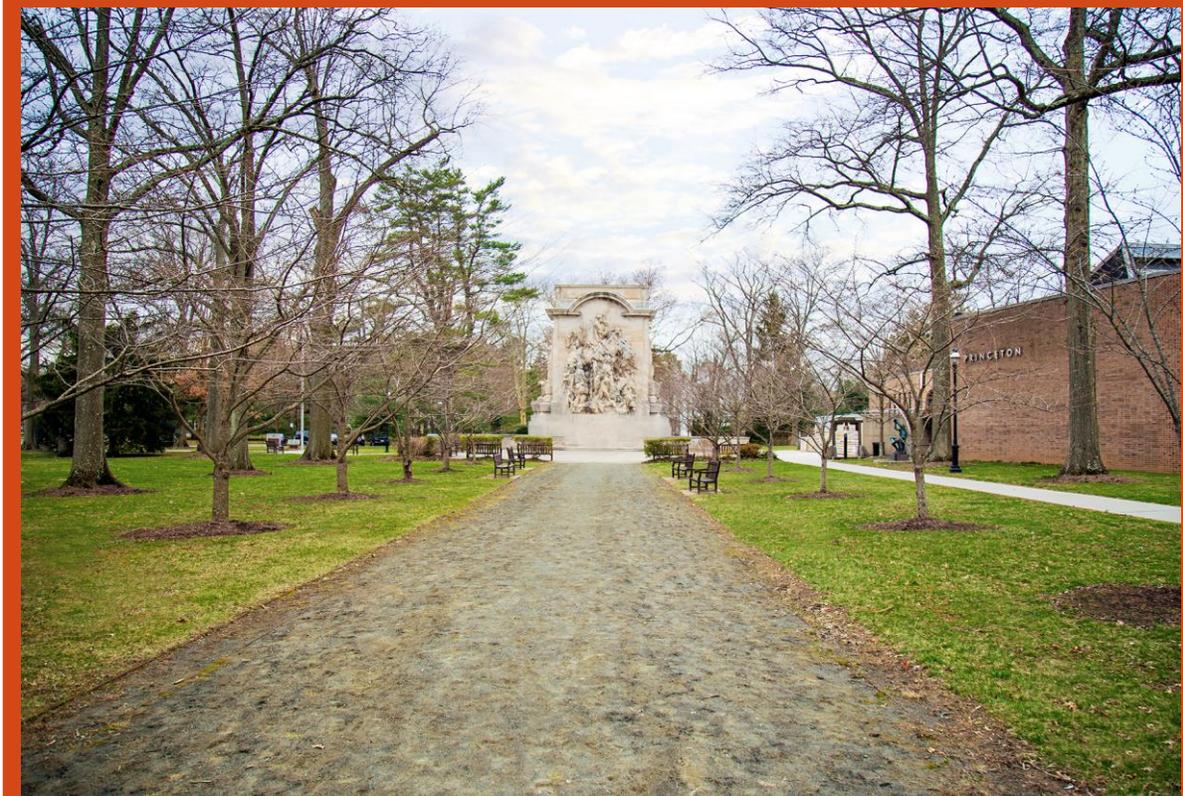




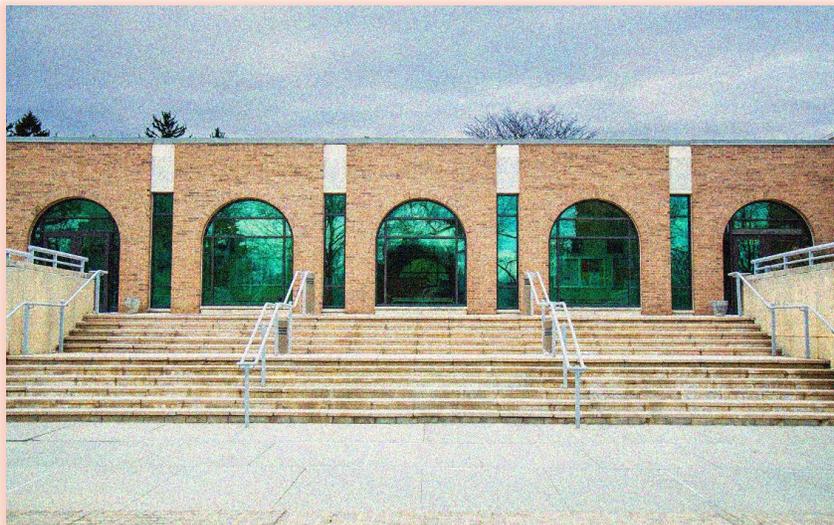
Princeton Health Department 2015-2020 Strategic Plan



Presented by: Public Health Accreditation and Strategic Team (PHAST)
Princeton Health Department
Monument Hall
One Monument Drive
Princeton, NJ 08540
May 2015

Contents

Contents	1
Letter from the Health Officer.....	2
Introduction.....	3
About Princeton, New Jersey	4
About Public Health in Princeton	4
Strategic Planning Process.....	5
Strategic Planning Timeline	6
Mission, Vision, and Values	7
Strategic Priorities, Goals and Objectives	8
External Trends-Internal Trends.....	11
Monitoring – Quality Improvement (QI) Plan	14
Plan Implementation.....	14
Conclusion	15
Acknowledgements	16
Appendix A - Work Plan	



Letter from the Health Officer

Dear Princeton Community,

It is with great excitement that I present the Princeton Health Department Public Health Strategic Plan for 2015-2020. Our department is responsible for protecting and improving the health of all of those who live, work, and play in Princeton. The Health Department is protecting our community every day from health threats such as foodborne illnesses, natural and man-made disasters, toxic exposures, and preventable illness and injury. Public Health does not only focus on immediate threats, but also against chronic diseases such as heart disease, cancer, diabetes, and stroke. Our efforts to address underlying causes to these chronic diseases have resulted in a multi-faceted approach and bridged new partnerships and initiatives for Princeton.

Strategic planning has embedded itself as the third area of the triangle of preparedness and future planning for public health agencies. Standing side-by-side with our community health improvement plan (CHIP) and the community health assessment (CHA), a strategic plan provides a guide for making decisions on allocating resources and on taking action to pursue strategies and priorities. Strategic planning is taking on increased importance in our current era of health reform as we anticipate expanded access to care and a growing availability of health information despite budgetary pressures on public health funding at federal, state, and local levels. This new environment necessitates new and flexible approaches, including policy-level interventions and social determinants of work.

This document is designed to serve a practical, everyday purpose for the Princeton Health Department. Each and every member of the Health Department team and Board of Health has been challenged to actively participate in not only the creation of this plan, but the implementation as well.

At no other point in history has public health leadership and direction been as important as we find it today. Working as a team with our partners, we will continue to develop and deliver positive public health outcomes for Princeton and our surrounding area.

In good health,



Jeffrey C. Grosser, MHS, HO, REHS
HEALTH OFFICER, PRINCETON HEALTH DEPARTMENT



Introduction

The Princeton Health Department (PHD) Strategic Plan for 2015-2020 will guide our department's strategic directions and priorities over the next five years. The plan highlights focal points where PHD is preparing to hone in on making significant improvements in the health and well-being of Princeton residents. The strategic plan not only broadcasts what we will strive to achieve, it provides a road map for how we plan to achieve it.

Public health professionals are finding themselves at an extremely transformative time. The Affordable Care Act (ACA) has enabled citizens to be proactive in their search for preventative care, which has enabled PHD to continue expanding chronic disease screening in the community. Concurrently, public health has been in the forefront of national headlines due to emerging infectious diseases, and unprecedented endemic disease trends over the course of the last decade.

Our department is fortunate to be able to protect and benefit the public health in Princeton by two general strategies. The first, through enacting public health policy by means of the Princeton Board of Health (BoH). The Princeton BoH is able to influence health through social and environmental conditions, such as policies for public safety, pollution control, workplace safety, and generalized population health. In line with the Institute of Medicine's definition of public health, these actions seek to ensure conditions in which people can be healthy. The other strategy is to directly provide programs and services designed to meet the health needs of the population. This "command-and-control" approach, attempts to increase access to and utilization of services.

The plan emphasizes core priority improvement, including protecting the public from health threats, implementing strategies to support active living and healthy eating, and internally, enacting methods to evaluate and improve department's processes. Prevention, the bedrock of public health, will be at the forefront our strategic directions, and objectives. Not only will PHD strive to educate the public, but we will also empower residents to educate one another with knowledge on health with an emphasis on prevention. PHD has its sights set on creating an environment in Princeton where there are increasing numbers of healthy choices, through nutrition, healthcare, transportation, and other lifestyle factors.

PHD works daily to protect and improve the public's health in innumerable ways, ranging from the expected restaurant inspections, to disease tracking of communicable diseases. Our scope of work covers a myriad of responsibilities. Though this plan may not list all of those, it will highlight key areas we plan to effect significant change in the coming five years, and identifies three strategic priority areas that organize these directed efforts.



About Princeton, New Jersey

Princeton is a historic town situated in Mercer County, New Jersey. Settled in 1696, Princeton is known for its natural beauty and accessibility to metropolitan centers of New York and Philadelphia. Princeton is a college town and is the home of Princeton University, Rider University-Westminster Choir College Campus, and the Princeton Theological Seminary.

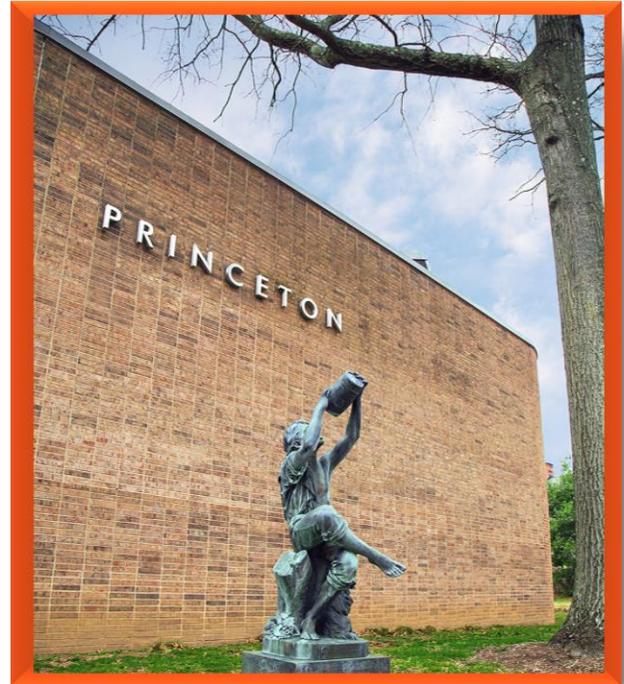
Princeton has a diverse residential population of approximately 30,000 residents housed within its 18.1 square miles. Due to its illustrious history, and University, the town also welcomes nearly 800,000 visitors annually.

About Public Health in Princeton

Princeton has a storied history of public health. Created in 1880, the Princeton Board of Health was one of the first Boards of Health in New Jersey. Currently, the Princeton Board of Health operates as an autonomous board, which provides the authority to create and set health policy. In fact, autonomous Boards can pass ordinances on issues of public health, and can adopt codes that have the force of law. The Princeton Board of Health is regularly served by prestigious public health experts, medical doctors, nurses, and former New Jersey Commissioners of Health. The Princeton Board of Health is no stranger to progressive action as Princeton was the first town in Mercer County to ban smoking on public property and parks in 2013, and to increase the age of sale of tobacco to those under 21 years of age.

The Princeton Health Department operates as a local health department in New Jersey. Adhering to the Public Health Practice Standards of Performance for Local Boards of Health in New Jersey, N.J.A.C. 8:52, the Princeton Health Department is tasked with providing services and capacities in line with the “10 essential public health services,” as well as providing adequate public health staffing, providing health education/health promotional services, public health nursing services, environmental health services, assure workforce competencies, build and expand community public health partnership, monitor health status of the community, diagnose and investigate health problems, and enforce public health laws.

The Princeton Health Department is an active member of the following professional organizations: Mercer County Health Officers Association (MCHOA), New Jersey Association of County and City Health Officers (NJACCHO), National Association of County and City Health Officers (NACCHO), and the New Jersey Environmental Health Association (NJEHA).



Strategic Planning Process

The strategic planning process was conducted within the framework of boarder community public health planning initiatives. Princeton Health Department (PHD) Health Officer expressed interest in creating a public health strategic plan to the Princeton Board of Health at the September 2014 monthly board meeting. Motivation to conduct a strategic plan was also a result of the Health Department seeking Public Health Accreditation through the Public Health Accreditation Board (PHAB). This interest was also communicated to the Princeton Health Department Staff. PHD Health Officer requested assistance with the process, specifically an accreditation coordinator to ensure the process would be steered in the right direction. The accreditation coordinator is a Registered Environmental Health Specialist (REHS) with six years of experience at PHD. The Health Officer and REHS determined meeting dates for the newly formed Public Health Accreditation Strategic Team (PHAST). The Accreditation Coordinator and Health Officer were in charge of reviewing the guidelines for strategic plan development as set by PHAB.

Participants of PHAST were to include the PHD Health Officer, Accreditation Coordinator (REHS), Registrar of Vital Statistics, Director of Health, Youth, and Community Services, Board of Health Members, and a member from Princeton Town Council. During the seven month process (September 2014 – April 2015), additional staff were added, including regional-epidemiologist, public health nurse and Executive Director of Princeton Human Services. The team met a minimum of once a month and occasionally meeting two times a month. The plan also included at least one additional meeting per month strictly with PHD staff to encourage participation.

This process was designed to create a plan that would guide PHD strategically for the next five years. The strategic plan also includes a process for updating the plan annually, in order to adapt to the current environment. Additionally, content of the plan is geared towards ensuring all aspects of the requirements of Public Health Accreditation are accomplished.



Strategic Planning Timeline

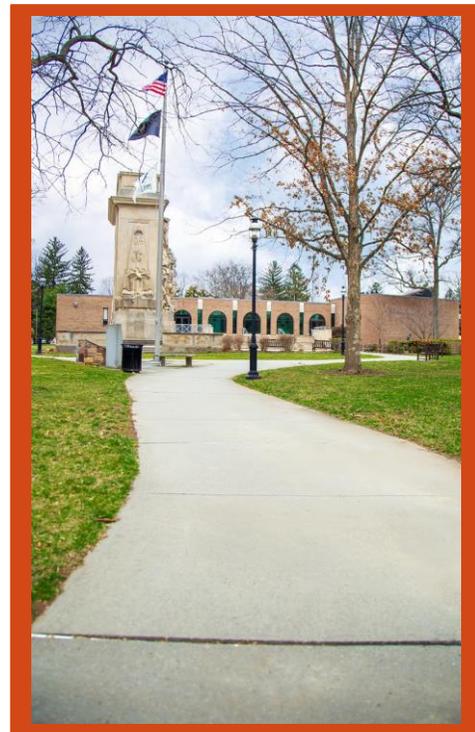
<i>Activity</i>	<i>Timeline</i>	<i>Participants</i>
Discussion of process with health department staff	September 2014	All Health Department staff Princeton Board of Health
Staff Vision, Mission, Values Brainstorm	September 2014	PHAST, Board of Health
Conduct external, internal Assessment (SWOC)	December 2014	PHAST, Board of Health
Identify Priorities, goals	January 2015	PHAST
Develop SMART objectives	March 2015	PHAST
Strategic Plan updates presented to Board of Health	November-April 2015	Board of Health
Revision and refinement of objectives and work plans	March 27-April 29, 2015	Health Department, PHAST
Strategic plan draft presented to the Board of Health	April/May 2015	Board of Health
Strategic Plan finalized, submitted to PHAB	May 2015	PHAST

Throughout the process, PHAST regularly referred back to the following data sources in order to assure strategic priorities were in agreement with other planning documents:

- 2012 Mercer County Community Health Improvement Plan
- 2012 Mercer County Community Health Assessment

**CHIP & CHA were created in concert with the Health Resources in Action and Greater Mercer Public Health Partnership (HRIA & GMPHP)*

Information from the aforementioned documents were compiled by PHAST in the form of Strengths, Weaknesses, Opportunities, and Challenges (SWOC). This form of analysis provides a framework to display internal and external forces that may impact the department's ability to move toward our mission and vision. The results were then used to identify goals and objectives.



Mission, Vision and Values

The vision, mission and values of the Princeton Health Department were updated as part of the 2015 Strategic Planning process in order to better reflect the identity of the Health Department, Board of Health and residents of Princeton.

Mission:

To preserve, promote and improve the health and well-being of the people, animals and environment of Princeton.

Vision:

Leading the way to a healthy Princeton.

Values:

Compassion: Treat one another and those we serve with empathy and kindness.

Integrity: Hold our responsibilities to the community of Princeton in the highest regard.

Dedication: Stay focused on the cause and purpose of our work.

Collaboration/Partnership: Work collaboratively with our community partners, sharing knowledge and resources to enhance access to services and improve the health and well-being of all residents in Princeton.

Knowledge: Strive to be the best in our field by keeping up to date with the various interdisciplinary areas we cover.

Healthy People 2020...

A NATIONAL INITIATIVE TO PROMOTE SCIENCE BASED 10-YEAR NATIONAL OBJECTIVES TO PROMOTE HEALTH AND PREVENT DISEASE. THE PRINCETON HEALTH DEPARTMENT SEEKS TO ENCOMPASS FOUR OVERARCHING GOALS FROM THE INITIATIVE INTO OUR STRATEGIC PLAN:

- 1. ATTAIN HIGH QUALITY, LONGER LIVES FREE OF PREVENTABLE DISEASE, DISABILITY, INJURY, AND PREMATURE DEATH.**
- 2. ACHIEVE HEALTH EQUITY, ELIMINATE DISPARITIES, AND IMPROVE THE HEALTH OF ALL GROUPS**
- 3. CREATE SOCIAL AND PHYSICAL ENVIRONMENTS THAT PROMOTE GOOD HEALTH FOR ALL**
- 4. PROMOTE QUALITY OF LIFE, HEALTHY DEVELOPMENT AND HEALTH BEHAVIORS ACROSS ALL LIFE STAGES**

Strategic Priorities, Goals and Objectives

The strategic plan consists of 3 strategic priorities with 8 accompanying goals, and 29 objectives.

Strategic Priority 1: Healthy and Safe Community Environments

Goal 1.1: Increase capacity of community environments to support active living and healthy eating

Objective 1.1.1: Nutritional Uptake: Increase contribution of fruit and vegetables to the diets of Princeton residents through easier access and health education

Objective 1.1.2: Tobacco education and reform: Reduce the initiation of tobacco use among children, adolescents, and young adults through policy, education, and outreach

Objective 1.1.3: Immunization Protection: Document and improve vaccination coverage for Advisory Committee on Immunization Practices (ACIP) required vaccines in Princeton Public and Private Schools

Objective 1.1.4: Worksite Wellness: Create and provide evidence-based worksite wellness program material to at least twenty employers in Princeton

Objective 1.1.5: Senior Health: Provide monthly nutritional and well-being education seminars to seniors in the community

Objective 1.1.6: Youth Health: Promote healthy lifestyle habits of the youth of Princeton through a coordinated approach with Princeton public and private schools and community organizations

Goal 1.2: Engage the community to prevent and reduce chronic disease incidence, morbidity and mortality (e.g., cancer, diabetes, heart disease, asthma)

Objective 1.2.1: Chronic disease screening: Increase the number of screenings by 25% focused on identifying chronic disease

Objective 1.2.2: Chronic disease education: Increase the number of health education sessions addressing chronic disease by 25%

Objective 1.2.3: Princeton YPLL: Calculate years of potential life lost (YPLL) and overarching causes of death of the residents of Princeton to determine specific chronic diseases afflicting Princeton

Strategic Priority 2: Public Health Continuous Improvements

Goal 2.1: Evaluate and continuously improve the department's processes, programs, and interventions in order to protect and promote health among Princetonians

Objective 2.1.1: PHAB Application: Princeton Health Department will submit all required documentation for national voluntary accreditation through PHAB by 1st quarter 2016

Objective 2.1.2: PHD QI Plan: Write and implement a Health Department Quality Improvement Plan by 1st quarter 2016

Objective 2.1.3: Workforce Development: Create and implement a Health Department Workforce Development Plan by 4th quarter 2015. This plan will address the training needs of the staff and the development of core competencies in order to perform their duties and carry out the Health Department's mission.

Objective 2.1.4: CHA & CHIP: Meet community stakeholders to update of the Mercer County community health assessment and community health improvement plan, to be completed by 2017.

Goal 2.2: Display the range of services and resources available from the Princeton Health Department to the public via health department webpage, media, and printed material

Objective 2.2.1: Website improvement: Develop a website improvement plan for the Princeton Health Department

Objective 2.2.2: Social Media: Improve community participation in social media to display current events and issues occurring in public health both locally and nationally

Objective 2.2.3: Update printed material: Update existing PHD brochure and make available online encompassing all PHD services

Goal 2.3: Improve transparency of health department by displaying environmental inspections and investigations electronically

Objective 2.3.1: Digital food inspections: Perform retail food inspections and all other health department related investigations via electronic inspection form

Objective 2.3.2: Food inspection transparency: Display all retail food inspections on municipal website.

Objective 2.3.3: Public health outreach effectiveness: Improve public health effectiveness through data tracking and utilize Access Princeton's "See-Click-Fix" program for 100% of complaint investigations.

Objective 2.3.4: Complaint response rate: Increase response time to health department complaint investigations by 50%

Strategic Priority 3: Prepare for Public Health Emerging Threats

Goal 3.1: Improve existing emergency preparedness procedures and infrastructure

Objective 3.1.1: *Mass disease SOP:* Create mass disease outbreak standard operating procedure

Objective 3.1.2: *Update POD plan:* Renew and improve existing point of distribution (POD) plan currently held between PHD and Princeton University (Environmental Health Services) to ensure the ability to provide medical countermeasures in support of treatment or prophylaxis by 4th quarter 2015

Objective 3.1.3: *Emergency annexes:* Update all public health emergency preparedness annexes in collaboration with Princeton Office of Emergency Management by 4th quarter 2015

Objective 3.1.4: *PH emergency preparedness info for residents:* Recreate public health emergency preparedness page on Princeton Health Department website; with instructions on health preparedness in the event of an emergency

Objective 3.1.5: *Incident response plans:* Develop mitigation and incident response plans for prioritized public health hazards in collaboration with Princeton OEM and in conjunction with NJDOH event response plans

Goal 3.2: Improve the ability of Princeton to withstand and recover from emergencies

Objective 3.2.1: *Emergency forecast and pre-planning:* Identify and prioritize potential public health emergencies (natural and human-generated) that Princeton and surrounding municipalities are likely to experience

Objective 3.2.2: *Preparedness status of community:* Assess community preparedness through a community survey

Goal 3.3: Maintain and improve surveillance of acute diseases and public health threats

Objective 3.3.1: *Endemic disease awareness:* Increase awareness of seasonal diseases through health lessons, social media, and creation of seasonal disease “watch” calendar, available on the Princeton Health Department webpage

Objective 3.3.2: *Supplemental Princeton medical communications network:* Create local physician and clinic network communications to supplement current NJLINCS (NJ Local Information Network Communication System) and communicate surges in diseases and conditions in Princeton

External Trends-Internal Trends

SWOC Analysis:

A SWOC analysis is a requirement of our strategic plan and is used to identify areas in which public health programs within our department demonstrate strengths, weaknesses, external opportunities and challenges. This analysis is intended to help guide development of the public health strategic plan.

The SWOC chart exemplifies internal and external forces that may impact the department's ability to move toward our mission, vision, and strategic priorities.

	<i>Helpful (Positive Impact)</i>	<i>Harmful (Negative Impact)</i>
Internal	STRENGTHS -Committed Staff -Experienced Board of Health -Strong partnerships	WEAKNESSES -Resources -Data collection system -Number of FTEs, i.e. nurse, health educator -Outdated policies and procedures
External	OPPORTUNITIES -Progressive community -Our new mission and vision -Youth engagement -Population health, prevention -Affordable Care Act	CHALLENGES -Regionalized health services -Social Media/Department Website -Resident access to health services -Endemic diseases -State/Federal Public health funding

SWOC – In Detail

Strengths – Our organizational strengths

Our committed staff is well experienced in their respective positions, and is on the front lines of protecting the public health of the residents of Princeton.

Our Board of Health is extremely well educated and experienced in the field of public health, medicine, nursing, and health care. As an autonomous board of health, our board can shape public health policy in Princeton. The Board consistently shapes policy to improve the health of the Princeton community.

Our partnerships with other Princeton departments and outside agencies are strong. Routinely, the health department collaborates with human services, engineering, public works, sewer operating commission, fire safety, emergency management, county and state departments, courts, Princeton Town Council, Administration, and the Mayor. Other outside agencies that are worked with on a regular basis includes: University Medical Center of Princeton at Plainsboro, Princeton University, Princeton Public and Private Schools, retail food establishments, faith based organizations, Princeton Public Library, Princeton University eating clubs, and summer recreation programs.

Weaknesses – Our organizational weaknesses

Our resources are limited primarily due to funding solely provided by the municipality. Funding and supplies have decreased from Federal and State programs significantly over the past decade.

Our data technology is antiquated along with our current filing system. The department has begun electronically recording environmental complaints and retail licensing however, there are still a number of programs that are able to be converted. Investing in mobile/tablet computers will be necessary to adapt to the changing landscape of environmental and consumer health enforcement.

Positions that lack FTE's, include our public health nurse and health educator. As witnessed in recent meningitis, measles, and Ebola situations in NJ, the need for disease surveillance and monitoring by a nurse, as well as outreach by a Certified Health Educator Specialist (CHES) is imperative for preventing infectious disease.

Outdated policies and procedures encompassing the department's operational structure create a deficiency of standardized services and protocols. A congruent set of policies and procedures are necessary in order to provide satisfactory public health services.

Opportunities – Our organizational opportunities

Our progressive community is continually pushing the envelope, and testing the status quo. This enables our health department to try new things, investigate new policies, and harness buy-in for the good of the public health in Princeton.

Volunteerism through PHAST and Board of Health present vast resources to assist in the progress of public health in Princeton. Volunteers also provide a fresh perspective from the community we would otherwise lack. This viewpoint allows the health department to stay unbiased in our public health approaches within the municipality.

Our approach to our new mission and vision will invigorate our staff with a purpose and sense of direction. There is no greater team building component than sharing a vision or a mission. Similar to sports teams where the common desire is winning, an organization must similarly long for common short-term and long-term goals. Our new mission and vision will be a jumping off point to increase focus on improving our surrounding environment, and cultivating new relationships with stakeholders.

Youth engagement through various Princeton led coalitions and departments, including Corner House will allow the Princeton Health Department to reach Princeton residents in their formative years. This has the opportunity to result in greater health education benefits as well as setting healthier habits when it matters most.

Population Health and prevention are the bedrock of public health. Health and well-being has long focused on acute care and doctors' visits. The new vision of PHD, leading the way to a healthy Princeton, incorporates making healthy choices and encourages individuals to start taking steps towards a healthier life, one healthy decision at a time. Activities and events sponsored by PHD will have prevention at the forefront of each activity.

Affordable Care Act has created a National Prevention Strategy which serves as a blueprint for improving health and well-being across the country. One of the key strategic directions of this strategy, "healthy and safe community environments" is the first strategic direction for the PHD 2015 strategic plan. The Affordable Care Act breaks new ground for local health departments as it reaffirms that the health of each community and territory determines the health status of the Nation. Moving prevention toward the mainstream of health may well be one of the most lasting legacies of this legislation.

Challenges – Our organizational challenges

Regionalized health services have created new barriers to overcome including utilizing a Regional Epidemiologist as well as Regionalized Public Health Emergency Services. Shared services amongst local health departments are becoming more common than ever, and continuing to provide the required public health services to the community will likely prove to be a balancing act.

Website updates are currently being performed internally through a webmaster which limits real time public health updates. Additionally, this requires constant oversight from all health department staff. Forms of social media have yet to be conquered by PHD, however Access Princeton has dispersed public health information out to social media.

Resident access to health services is an issue in Princeton just as it would be in inner cities throughout the country, or even residents in rural areas. This includes financial means to pay for services, ability to reach and use services, and confidence to communicate with healthcare providers, particularly if the patient is not fluent in English or has poor health literacy.

High incidence of endemic diseases (Lyme, rabies, norovirus) create challenges in accomplishing long term planning in a small department. Particular outbreaks will often times engulf the entire staff of PHD, making it difficult to devote time to other projects.

State and Federal funding will be threatened and public health will likely be less prepared and capable of planning for and responding to emerging diseases and epidemics.

Work Plan

In order to achieve these strategic objectives, a work plan was developed and can be seen in detail in Appendix A. Each work plan has an owner, objective, indicators, strategies, with each following SMART objectives (Specific, Measurable, Achievable, Realistic, Timely). The work plan is in place to accurately monitor the progress of each objective.

Implementation and integration of the work plan into the functions of PHD will include time-appropriate objectives and staff oversight.

Plan Implementation

The PHAST team has identified a number of key implementation steps to be inaugurated in June 2015. These include the following:

- Orientation of health department staff to the strategic plan in early June
- Briefing of the Princeton Board of Health on June 16 (Monthly Meeting)
- Placing work activities with deliverables on the health department team calendar for reviews and updates
- Expansion of specific responsibilities of goals and objectives by staff
- Continuing education in core areas directly relating to the success of the strategic plan

Annual reviews of each objective will report progress and provide a method to evaluate the current strategic plan. A performance plan will complement the annual review to include time-appropriate parts of the objectives, including all applicable strategic plan objectives. The review process will include:

- Identifying work activities, objectives and other elements of the plan that have been completed and no longer need to be included in the plan

- Acknowledging and celebrating accomplishments/successes of each year
- Increasing clarity of next year’s work activities that may include updated objectives
- Adding a subsequent outline for year three

Conclusion

Due to the fluidity of public health practice, no single plan is able to anticipate future impacts of the economy, political environments or newly emerging infectious diseases. Yet, the Princeton Health Department is well positioned to implement the strategic plan and the successful completion of objectives. Internally, our outlook of our strategic plan must be viewed as a work in progress, rather than a binder on a shelf or a file saved on the computer. When approached in a disciplined process, with top-down support and bottom-up participation, the Princeton Health Department strategic plan will pay dividends for internal performance, and ultimately seek to complete our mission of improving the health and well-being of Princeton.



Acknowledgements

The Princeton Health Department, Public Health Accreditation, Strategic Plan (PHAST) would like to thank the following individuals for their time and valuable contributions.

PHAST Group

Randy Carter
Senior Registered Environmental Health Specialist
Princeton Health Department

Gary DeBlasio, MS, CEAP
Director, Dept. Health, Youth, Community Services
Executive Director, Corner House
Municipality of Princeton

Jeffrey C. Grosser, MHS, HO
Health Officer
Princeton Health Department

Heather Howard, JD
Councilwoman, Princeton Town Council
Princeton Board of Health Liaison
Lecturer in Public Affairs and Director, State Health
Reform Assistance Network
Princeton University

Laura Kahn, MD, MPH
Research Scholar
Program on Science and Global Security
Princeton University
Vice-Chair, Princeton Board of Health

Keith Levine, MA
Registered Environmental Health Specialist
Accreditation Coordinator
Princeton Health Department

Charles Rojer, MD
Chair, Princeton Board of Health

Linda Steiner-Sichel, BSN, MPH
Member, Princeton Board of Health

Other Key Contributors:

Lauralyn Bowen
Registrar of Vital Statistics, Princeton Health
Department

Robert Gregory
Director, Office of Emergency Management

Monica Levine
Photographer

Elisa Neira,
Executive Director, Human Services





Municipality of Princeton
Princeton Health Department
Monument Hall
One Monument Drive
Princeton, NJ 08540

Princeton Health Department

Jeffrey Grosser, MHS, HO
Health Officer

Randy Carter
Sr. Registered Environmental Health Specialist

Keith Levine, MA
Registered Environmental Health Specialist

Lauralyn Bowen
Registrar of Vital Statistics

Tamara Kretschmann
Deputy Registrar of Vital Statistics

Anne Borek
Deputy Registrar of Vital Statistics

Princeton Board of Health

Charles Rojer, MD - Chair

Laura Kahn, MD, MPH - Vice-Chair

Lauren Babcock-Dunning, MPH

George DiFerdinando, MD, MPH

JoAnn Hill, RN

Heather Howard, JD – Council Liaison

Steven Miller, PhD

Linda Schwimmer, JD

Linda Steiner-Sichel, BSN, MPH

Risk Weiss, MS