



Resilient communities through  
teamwork and health justice

The Camden Coalition's 2020 annual report

# Table of contents

<b>A message from our CEO, Kathleen Noonan .....</b>	<b>1</b>
<b>Care interventions .....</b>	<b>2</b>
Camden Core Model.....	2
COVID-19 quarantine hotel.....	2
Camden Delivers.....	3
Medical-Legal Partnership.....	3
Care management partnerships: Shelter-based pilot and Neighbors in Health.....	4
A new home in a pandemic .....	4
<b>Clinical redesign .....</b>	<b>5</b>
Accountable Health Communities .....	5
Office-based addiction treatment in New Jersey .....	5
Community vaccine survey .....	6
Safer Childbirth Cities.....	6
<b>Connecting data .....</b>	<b>7</b>
Camden Coalition Health Information Exchange .....	7
Quality measures for complex care.....	8
<b>Building coalitions in Camden and across the country .....</b>	<b>9</b>
COVID-19 community forum and resource listing .....	9
COVID-19 testing sites .....	9
COVID-19 open forum series .....	10
Coordinating complex care leaders around COVID-19 .....	10
<b>Building the field of complex care.....</b>	<b>11</b>
Complex care core competencies .....	11
Amplify: A consumer voices bureau.....	11
Technical assistance.....	12
Putting Care at the Center 2020: Virtual .....	13
<b>Looking ahead .....</b>	<b>14</b>
<b>Camden Coalition Board of Trustees .....</b>	<b>15</b>
<b>Camden Coalition Member Organizations.....</b>	<b>16</b>

# A message from our CEO, Kathleen Noonan

Though it seems like ages ago now, it was only last January that we released the results of the randomized controlled trial that investigated the effect of the Camden Core Model on hospital readmissions (see facing page). Our main takeaway from that study was that no single program or organization can solve the complex care needs of its patients alone, that success in complex care relies on communities coming together to bridge systems and form coordinated ecosystems of services. We had no idea when we shared our analysis of the study results, or when we released our 2019 annual report, “Building strong ecosystems,” just how critical strong ecosystems of care would be in 2020.

The COVID-19 pandemic has put all of our systems and partnerships to the test. Our failure as a country to invest in strong ecosystems of care has meant that people with complex health and social needs have been disproportionately affected by not only the virus itself, but also by the havoc it has wreaked on the systems they rely on to access healthcare, food, transportation, and housing.

Though health equity has always been at the core of our work, the uprisings and activism led by Black people across the country in 2020 challenged us to be more explicit in centering racial justice. In Camden, as in communities nationwide, Black residents are targeted by punitive systems like our court, prison, and child welfare systems, while struggling to access the systems of care and support that they need to survive and thrive. These disparities, rooted in structural racism, were only exacerbated by the pandemic.

I am deeply inspired and humbled by the ways in which our staff, our community, and our partners in South Jersey and across the country came together to ensure that the most vulnerable members of our communities received the care and services they needed through a global crisis. This took candid conversations, the ability to change course after initial missteps, and open dialogue among a diverse group of stakeholders.

It was fortuitous timing that a bill designating the Camden Coalition as one of New Jersey’s four Regional Health Hubs was signed into law just before the pandemic began affecting our community, allowing us to strengthen our existing partnerships in critical ways. Our expanded Regional Health Hub partnerships created a flexible platform and routine convening mechanism that allowed us to pivot quickly to meet the challenge of COVID-19 head-on.

As you’ll read throughout this report, nearly every one of our programs had to shift in some way in response to the pandemic. Here are just a few highlights of our 2020 COVID response:

- We provided medical care and oversight for COVID-positive individuals experiencing homelessness at Camden County’s quarantine hotel (page 2)
- We surveyed Camden residents on vaccine hesitancy, in partnership with local organizations (page 6)
- We brought together over 1,000 complex care providers from across the country for a series of virtual forums early in the pandemic (page 10)

And despite the pandemic, much of our non-COVID work continued. We strengthened our maternal health work in Camden and trained navigators to support addiction treatment in primary care offices across New Jersey. We made major strides in advancing complex care as a unified field of practice: we released a standardized set of core competencies for frontline complex care providers, took first steps toward standardizing quality measures for research and evaluation, and launched a “consumer voices bureau” to link organizations across the country to leaders with lived experience of complex health and social needs.

In 2020 we learned that it truly does take an ecosystem. We could not have done any of this without the support of our funders and the dedication of our partners, both long-time and new, in Camden and the surrounding region, in New Jersey, and across the country. We look forward to calmer and more equitable days ahead, and know we will get there by continuing to work together through 2021 and beyond.



Sincerely,

A handwritten signature in black ink that reads "Kathleen Noonan".

Kathleen Noonan  
CEO, Camden Coalition of Healthcare Providers

# Care interventions

Providing whole-person care for individuals with complex health and social needs, rooted in authentic healing relationships

## Camden Core Model

The Camden Core Model is our signature complex care management program and is the heart of our organization's frontline work. We identify patients with complex health and social needs through the Camden Coalition Health Information Exchange (see page 7), meet them in the hospital or the community, and then provide home- and community-based care management and coordination to help them meet their own goals for health and well-being.

In January 2020, the long-anticipated publication of the randomized controlled trial (RCT) evaluating the Camden Core Model, conducted by researchers affiliated with J-PAL North America, was published in the New England Journal of Medicine. The study showed similar readmission rates in the control and intervention groups at 180 days. It also found that the Camden Core Model was associated with increased SNAP participation.

One of our major takeaways from the study is that to make meaningful change for people with complex needs, we must strengthen our communities — including social services, behavioral health, public health, community-based organizations, and government agencies. Even as the RCT was ongoing, we began building and strengthening both the services available in our community and the connections between its institutions and systems.

Investment in economic and social opportunity is key. Short-term healthcare interventions alone cannot remedy the complex health and social needs caused by poverty, racism, and community- and individual-level trauma. However, interventions like the Camden Core Model in combination with other necessary community-based resources are essential ways that we can support people with complex needs in improving their well-being and meeting their own goals. Learn more at [www.camdenhealth.org/RCT](http://www.camdenhealth.org/RCT).

### Publications in 2020

Healthcare hotspotting: A randomized, controlled trial (New England Journal of Medicine). <https://doi.org/10.1056/NEJMsa1906848>

Brief: Results and lessons from the Camden Coalition's randomized controlled trial. [camdenhealth.org/RCT](http://camdenhealth.org/RCT)

## COVID-19 quarantine hotel

In the spring of 2020, we partnered with Camden County to provide medical oversight of individuals in quarantine at a designated hotel being managed and run on the ground by Volunteers of America-Delaware Valley (VOA-DV). Camden County's quarantine hotel, like others across the country, was designed to provide shelter and care management for COVID-positive individuals experiencing homelessness or otherwise unable to self-isolate.

In addition to their COVID-19 diagnosis and lack of housing, most quarantine hotel residents had complex needs including multiple chronic medical conditions, substance use disorders, and mental health conditions. In many instances, their quarantine stays gave us the opportunity to support case managers from VOA-DV in connecting hotel residents to services and supports that could improve their health and well-being post-discharge.

**800**

Patients enrolled in our RCT from 2014-2017

**41**

Patients served in Camden's quarantine hotel

**8**

Camden Delivers participants were able to reunify their family or prevent removal of their children during their time in the program in 2020

## Camden Delivers

In 2020, we brought our Camden Delivers program to a close. Camden Delivers provided care management to pregnant people with complex health and social needs, particularly substance use disorders. Over the six years that we ran this program, we supported women as they navigated healthcare, child welfare, and criminal justice systems, and learned that those systems are not always structured to best help this vulnerable population succeed and thrive.

The program's enrollment criteria were designed to identify pregnant individuals with a history of substance use disorder at risk of having their child removed by the New Jersey Department of Child Protection and Permanency (DCPP). Unsurprisingly, most participants' primary goal was to prevent their child from being removed from their care or to reunify their family. Our care teams and Medical-Legal Partnership attorneys provided advocacy and support with participants' DCPP cases alongside other healthcare and social services support and navigation.

In 2020, we transitioned from a referral-only enrollment model to one that incorporated the Camden Coalition Health Information Exchange. This change resulted in our program participants better reflecting Camden's racial and ethnic demographics.

Though the Camden Delivers program has come to a close, our work to improve maternal health in Camden continues through our Safer Childbirth Cities project (see page 6). In 2021, we are looking forward to using the lessons we learned from navigating the child welfare system to create new tools and resources to help providers better support people at risk of child welfare involvement.

## Medical-Legal Partnership

Medical-Legal Partnership is a national model that embeds attorneys within healthcare teams to help patients resolve legal matters like landlord-tenant disputes, government benefits, and child support issues, all of which can undermine people's health and well-being. Our Medical-Legal Partnership (MLP) with Rutgers Law School launched in 2017 and has to date helped over 125 patients in our Camden Core Model and other care management programs address their legal needs. Unlike most MLPs, our MLP also assists with fines and fees issues and even some criminal matters.

The COVID-19 pandemic caused new legal challenges and created the need for courts to conduct business virtually. Our MLP team supported 65 patients through 2020, many of whom had multiple legal matters to address. Working with the larger Camden Coalition care team, they helped patients navigate frequently changing court dates and ensured that they had the technology and private space they needed for virtual court appearances.

Our MLP team also works in concert with our policy and advocacy team to address and develop systemic policy solutions for the legal challenges our patients face. In 2020, our MLP team testified before the New Jersey State Legislature Housing Committee in support of expanding the eviction moratorium; participated in numerous panels, including one on racial health disparities during the pandemic; and is currently working with a statewide coalition to draft legislation to reform state policies on driver's license suspensions and court fines and fees. Our MLP work also informs our national policy agenda related to complex care and social determinants of health.

**65**

Patients served through our Medical-Legal Partnership in 2020

**76%**

Of shelter-based pilot participants who reported improved quality of life due to the services provided

**38**

Patients served through the shelter-based pilot

**15**

People housed in 2020

## Care management partnerships: Shelter-based pilot and Neighbors in Health

We continually take lessons from the Camden Core Model and our other projects to pilot new programs that allow us to expand our reach and our work with regional partners. Two care management partnerships in 2020 helped us explore new ways to identify and enroll patients with complex needs.

In 2019, we launched a shelter-based pilot program in partnership with Volunteers of America-Delaware Valley (VOA-DV), enrolling 38 individuals from VOA-DV's men's shelter in Camden into our Camden Core Model and working with VOA-DV staff to coordinate participants' care. Shelter staff were given access to the Camden Coalition Health Information Exchange (see page 7) to identify residents eligible for the pilot program and to better coordinate their care. When COVID-19 made it impossible for our staff to visit the shelter, the Camden Coalition provided the shelter with iPads to hold Zoom meetings weekly with enrolled residents, and held weekly case conference calls with the shelter staff. The pilot program ended in August 2020.

We also began a partnership with Horizon Blue Cross Blue Shield New Jersey on a new model called Neighbors in Health, which launched in November 2020. We're excited to help improve care for their members, and to reach new individuals and populations with complex needs in Camden.

# A new home in a pandemic

"Phil" was one of the Volunteers of America-Delaware Valley shelter residents enrolled into our shelter-based pilot (see next page) in early 2020. We helped reconnect Phil to the primary care and specialists he needed for his mental and physical health needs. Phil's medical conditions made life in the shelter challenging, particularly after new COVID-19 regulations were put in place, so our team screened him for our Housing First program to help him meet his care goal of finding stable housing.

Our Housing First program provides housing vouchers to patients with histories of chronic homelessness, high utilization of the local health system, and multiple chronic illnesses. Our care teams work with community partners to identify housing, furnish the new homes, and provide ongoing supportive services.

One contributing factor to Phil's chronic homelessness was his criminal justice history. When he qualified for our Housing First program, our housing coordinator connected him with a local landlord who was open to leasing to tenants with a history of criminal justice involvement. Fortunately, this landlord had an available unit and Phil was able to move in in May. Since being housed, Phil has found renewed motivation to manage his health conditions and keep moving forward. He participates consistently in his medical treatments and appointments and stays connected to our care team. Phil is grateful for the safety, dignity, and privacy his new home provides.

# Clinical redesign

## Transforming systems to better serve those with complex health and social needs

### Publications in 2020

Adapting medications for addiction treatment programs in response to COVID-19 (Better Care Playbook). [bit.ly/COVID19-MAT](https://www.camdenhealth.org/better-care-playbook/covid19-mat)

Pharmacists' insights into their role in preventing opioid overdose

[camdenhealth.org/lessons-from-pharmacists](https://www.camdenhealth.org/lessons-from-pharmacists)

Talking to patients about naloxone: Insights from pharmacists in Camden, NJ. [camdenhealth.org/lessons-from-pharmacists](https://www.camdenhealth.org/lessons-from-pharmacists)

### Accountable Health Communities

The Camden Coalition is one of 29 sites across the country selected by the Center for Medicare and Medicaid Innovation to implement the Accountable Health Communities (AHC) Model.

Through this award, we are working with practices in Camden, Burlington, and Gloucester counties, training their staff to screen patients for health-related social needs and to navigate patients to the appropriate services.

During the COVID-19 pandemic, rising unemployment made social needs more acute for many in South Jersey, and self-isolation to avoid infection or transmission made it harder to fulfil basic needs and to access services. Our AHC team shifted from in-person screening at many sites to a telephonic model, hired and cross-trained new screening and navigation staff, facilitated partnerships between the county health department, healthcare practices, and local social service organizations, and received grants to provide food and transportation assistance to individuals in need.

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### Office-based addiction treatment in New Jersey

In 2019, the state of New Jersey launched the office-based addiction treatment (OBAT) program to increase access to addiction treatment. Through OBAT, primary care and other providers face fewer administrative barriers to prescribing medications for addiction treatment (MAT), and receive more support in providing addiction care.

The Camden Coalition has supported the state's work by training navigators, integral team members in OBAT practices who support patients through all phases of their treatment, using our patient engagement model COACH. We also host case conferencing, resource sharing, and biweekly lunch "office hours" for all staff involved in MAT to get introduced to new topics and ask general questions about the program. When operational issues arise, we facilitate communication and problem solving between providers, managed care organizations, and the state Medicaid office.

In 2020, the Camden Coalition's Clinical Redesign team worked closely with our National Center to adapt its newly released core competencies for frontline complex care providers (see page 11) to several other substance use disorder navigator roles. We look forward to developing and implementing training informed by the core competencies in more of our regional projects in 2021.

**9,098**

Screenings for health-related social needs completed in 2020

**58%**

Of individuals screened positive for at least one social need

**33%**

Of individuals screened positive for food insecurity

## Community vaccine survey

As the first two COVID-19 vaccines neared approval in the US and concerns grew about widespread vaccine misinformation, we wanted to learn more about the level of vaccine hesitancy in our Camden community. We worked closely with our Community Advisory Committee to design an interview-style survey that asked about routine vaccinations such as the flu shot as well as the new COVID vaccines. We then worked with six of our partner organizations to train interviewers to administer the survey to their patients, clients, or community members.

Analysis of the 265 completed surveys showed that confidence in the COVID vaccine in Camden was lower than national averages, and also generally lower than confidence in the flu vaccine. Respondents flagged a need for better education on how the COVID vaccines work and were developed, and also overwhelmingly cited medical providers as their most trusted source of information on vaccines.

In 2021, we will share the survey results with local providers and partner organizations, and will also use the findings to inform the work of our vaccine ambassadors, trusted community leaders who have been working since the fall of 2020 to educate and inform their neighbors about the benefits of getting a COVID vaccine. We will also be surveying Camden providers on whether and how they are discussing the COVID vaccine with their patients.

## Safer Childbirth Cities

As our care teams worked to improve health and well-being for pregnant individuals in Camden through our Camden Delivers program (see page 3), our Clinical Redesign Initiatives team addressed maternal health at the Camden city level through participation in the Merck Safer Childbirth Cities program. Camden was one of ten initial cities selected by Merck for Mothers and a group of New Jersey funders: The Nicholson Foundation, the Burke Foundation, and the Community Health Acceleration Partnership. The program aims to lower maternal mortality and morbidity and to reduce racial disparities in maternal health outcomes.

In Camden, we leveraged the Camden Coalition Health Information Exchange (see page 7) to develop real-time reports that identify pregnant people in need of services. Now, when these individuals present at emergency departments or outpatient clinics they receive follow up calls to get connected to social services, as well as to WIC for food assistance. In 2021, we hope to add connections and build a clinical workflow to incorporate more social services and to partner with health systems to connect this population to appropriate follow-up care for their pregnancy, including prenatal care, options counseling, or abortion services.

Our Safer Childbirth Cities program also makes change at the policy level. Through our seat on policy groups and state Medicaid committees, we are working to better support the doula workforce and to incentivize better care coordination between community- and hospital-based providers during the pre- and postpartum period through Medicaid.

**>100**

Organizations from across NJ participated in MAT office hours in 2020

**265**

Vaccine confidence surveys administered in Camden

**850**

Individuals received services through Safer Childbirth Cities in 2020



# Connecting data

Using data to identify and engage patients with complex health and social needs is the foundation of our work.

## Camden Coalition Health Information Exchange

The Camden Coalition Health Information Exchange (HIE) provides real-time data that providers need to serve their patients across South Jersey. Our HIE, which is web-based and can be accessed on any device, is a primary way that records are shared across diverse health and non-health providers and institutions in the region, giving providers more complete medical histories for their patients. We use the HIE to identify individuals eligible for enrollment in our programs, guide us in the design of new initiatives, and provide us the information we need to evaluate our existing programs. Our partners use the HIE to provide better care management to their patients or participants, to help design new population health workflows, and to support better programming.

With the onset of the COVID-19 pandemic, access to accurate, real-time data became more critical than ever. We worked with our vendor CareEvolution to make sure the Camden Coalition HIE was providing the information the region needed: we built a shared workflow in the HIE that we and our partners could use to support the region's quarantine hotel, made COVID-19 results from local testing sites available in real time to all providers, and created dashboards that integrate clinical and demographic data to give broader insight into how COVID-19 is affecting New Jersey. We worked with the Camden County Department of Health to use our HIE to support their workflows with not only COVID-19 patients but to also support their efforts to better share data among their other programs.

We also added two major data sources to the Camden Coalition HIE. Skilled nursing provider Genesis HealthCare, a national organization with 12 sites in South Jersey, was the first long-term care organization to contribute data to the HIE, followed by Premier Cadbury at Cherry Hill in late 2020. Lack of data from long-term care organizations had been a significant gap in our HIE: many long-term care organizations don't have the funding for electronic health record systems that can integrate into HIEs. Bringing data from Genesis and Premier Cadbury was a major win for providers' ability to coordinate care for patients transitioning between hospitals, skilled nursing sites, and the community. We also began receiving state-wide hospital admission, discharge, and transfer data from the New Jersey Health Information Network (NJHIN), giving South Jersey providers a fuller picture of their patients' healthcare utilization throughout the state.

**36**

Sites contributed data to the HIE in 2020

**13**

New long-term care sites added to the HIE in 2020

**1.9M**

Unique patient records in the HIE

## Quality measures for complex care

Though complex care has roots in the effort to curb healthcare costs and utilization, complex care programs affect much more than individuals' healthcare use patterns. In practice, complex care teams build participants' self-efficacy and help them progress toward their goals — outcomes that are difficult to measure using traditional return on investment calculations. However, as our 2018 *Blueprint for Complex Care* identified, relying solely on cost and utilization outcomes as metrics has limited the complex care field's ability to evaluate success. The Blueprint recommended that complex care develop more holistic metrics to examine programs' impact.

In 2020, we took an important first step toward this goal by commissioning the Institute for Healthcare Improvement, our partner and Blueprint co-author, to develop and publish in May 2020 *Measuring complexity: Moving toward standardized quality measures for the field of complex care*. In addition to a landscape analysis, the report contains eight recommendations for next steps the field can take to develop a standard set of quality measures, including a proposed set of measurement domains and subdomains.

An important subset of quality measures is patient-reported outcome measures (PROMs) which capture patients' perspectives on their health and well-being. In 2020, we began working with Kaiser Permanente's Institute for Health Policy to learn more about how complex care programs across the country use PROMs. We will publish a brief report in 2021 that will provide guidelines and tools for complex care providers and researchers to use PROMs in their work.

Learn more about our work on quality measures and find the *Measuring complexity* report at [nationalcomplex.care/quality-measures](https://nationalcomplex.care/quality-measures).

### Publications in 2020

Report: *Measuring complexity: Moving toward standardized quality measures for the field of complex care*

Brief: *Standardizing quality measurement in complex care*

Find both at [nationalcomplex.care/quality-measures](https://nationalcomplex.care/quality-measures)

“For the field of complex care to show its value in improving outcomes and to evaluate programs' delivery and impact, evaluation and quality improvement measures must be identified and standardized.”

— From the brief *Standardizing quality measurement in complex care*

# Building coalitions in Camden and across the country

Bringing our communities together around complex care needs and social determinants of health

## In Camden

### COVID-19 community forum and resource listing

Throughout the year, we have worked closely with our partners to facilitate the flow of timely COVID-19-related information to Camden residents — those with complex care needs as well as those more broadly impacted by adverse social and economic conditions (i.e., social determinants of health). Through a collaboration between Cooper University Health Care, Virtua Health, Project HOPE, CAMcare, the government of Camden County, and the Camden Coalition, we hosted a series of Facebook Live events to give regular updates in both English and Spanish. These weekly briefings provided updates on testing sites and procedures, information about state-wide mandates and stay-at-home orders, ways to reduce the spread of the virus, and community safety tips.

We encouraged community organizations to update their profiles on My Resource Pal, our community referral platform powered by Aunt Bertha, to reflect any operational changes they put into place due to COVID-19. We also created a page on our website providing daily, and eventually weekly, updates to the operations for key services in the Camden area. This page included information about changes being made by health systems and hospitals, primary and obstetric care practices, behavioral health providers, housing services, adult day programs, courts and legal services, food resources, government agencies and benefits, non-emergency medical transportation, and other forms of support. This page was frequently accessed, serving as a central information clearinghouse for Camden.

### COVID-19 testing sites

In the spring of 2020, we joined a number of local healthcare organizations to support the Camden County Department of Health in opening COVID-19 testing sites in Camden. Our role in the partnership was ensuring that anyone receiving a COVID-19 test was screened for any social support they might need, particularly if they were required to self-isolate. We found widespread food insecurity among those being tested, and helped connect individuals to food assistance and other resources.

In late 2020, we teamed up again with Camden County and Cooper University Healthcare to roll out a mobile testing plan. We provided the data infrastructure to identify site locations, prioritizing local hotspots with high rates of COVID-19 cases. The new mobile sites are located in public schools and immediately increased access to testing for city residents.

**1,095**

Individuals screened for social needs after COVID-19 testing

**72**

Resources listed on the COVID-19 resource page

**3**

Hotspots identified for mobile COVID-19 testing sites

## Nationally

### COVID-19 open forum series

As COVID-19 spread across the country in the spring of 2020, complex care programs and the populations they serve were particularly impacted. Throughout April our National Center for Complex Health and Social Needs (National Center) held a series of open forums aimed at allowing providers and program staff to share experiences and resources.

The COVID-19 open forum series brought together over 1,000 attendees from the US and Canada. Attendees represented health systems, community-based organizations, government agencies, behavioral health agencies, and more. Some of the priority areas surfaced included safely serving and quarantining individuals experiencing homelessness, addressing increased levels of domestic violence and child abuse, scaling food services while reducing transmission risk, and overcoming social isolation. A final compilation of over 40 resources shared by participants was published on our website.

### Coordinating complex care leaders around COVID-19

Our National Center also used its established role as convener for the complex care field to bring together leaders from national-level organizations. We launched an ongoing meeting, called the Coordinating Complex Care Community COVID-19 Response (5CR) meeting, to share information, strategy, and best practices, and to connect individuals and organizations doing similar work.

The 5CR meeting brought together national organizations working in healthcare, social services, health equity, and consumer leadership, many of which support local and regional care delivery organizations. The meeting launched in the spring and continued regularly throughout the year. An advocacy committee created policy principles for the group and shared opportunities for collective action. The 5CR meeting will continue into 2021 and will continue to discuss equity and access issues around COVID-19 and beyond.

### 5CR participating organizations

- AARP
- Alliance for Strong Families and Communities
- American Hospital Association
- Association of Community Affiliated Plans
- Brown University
- Catholic Hospital Association
- Center for Care Innovations
- Center for Health Care Strategies
- Community Catalyst
- Corporation for Supportive Housing
- Disability Policy Consortium
- Families USA
- Health Leads
- HealthBegins
- Hive Networks
- Institute for Healthcare Improvement
- The John A. Hartford Foundation
- Kaiser Permanente
- National Association of Community Health Centers
- National Association of County and City Health Officials
- National Center for Medical-Legal Partnership
- The National Council for Behavioral Health
- Network for Regional Healthcare Improvement
- Peterson Center on Healthcare
- Robert Wood Johnson Foundation
- Root Cause Coalition
- Rush University Medical Center
- Sesame Community Center

**>1,000**

Providers participated in COVID-19 open forums

**43**

Complex care leaders participated in 5CR calls in 2020

**28**

National organizations represented on 5CR calls in 2020

# Building the field of complex care

Inspiring, connecting, and supporting the evolving community of complex care practitioners and leaders across the country.

## Complex care core competencies

In October 2020 we released the first-ever set of core competencies designed for all frontline complex care providers — regardless of discipline, profession, or sector. These complex care core competencies capture the necessary knowledge, skills, and attitudes for anyone providing care to individuals with complex health and social needs. Categorized into six domains, the core competencies provide standards for person-centered care, using and managing data, working toward systems change, and more.

### Publications in 2020

Report: Core competencies for frontline complex care providers

Brief: Complex care core competencies: Developing the frontline workforce

5 ways to use the core competencies in your practice

5 ways for educators and practitioners to use the core competencies in education

Find all publications at [nationalcomplex.care/core-competencies](https://nationalcomplex.care/core-competencies)

Developing core competencies for frontline complex care providers was the first recommendation laid out in the *Blueprint for Complex Care*, which we released in 2018. In 2019 and 2020, the core competencies were created by the complex care core competencies working group, made up of experts, including practitioners and consumers with lived experience, from diverse backgrounds and complex care settings. The competencies provide a framework for educational and training materials that the National Center will develop and publish starting in 2021.

Find the complex care core competencies, as well as tools to help providers and educators begin implementing them in practice and curricula, at [nationalcomplex.care/core-competencies](https://nationalcomplex.care/core-competencies).

## Amplify: A consumer voices bureau

People with complex health and social needs must play an active role in shaping complex care programs and initiatives. To facilitate connections between complex care consumers and the programs seeking their input, we launched *Amplify: A consumer voices bureau* in October 2020. Organizations and individuals can use *Amplify* to find expert speakers, as with a traditional speakers bureau, but can also find consumers to partner with to help plan and think through programs, convenings, research and evaluation, policy initiatives, and more.

30

Core competencies for frontline care providers

16

Core competency working group members

17

Lived experience experts participating in *Amplify*

In addition to lived expertise, *Amplify* participants have leadership experience at healthcare, social service, and advocacy organizations across the country, including the Camden Coalition through our Community Advisory Committee. Most have taken part in our National Consumer Scholars program, which brings cohorts of consumer leaders together for leadership development and peer-to-peer learning. Along with the work they've done to improve care and advocate for others in their own communities, they have played an active role at our annual *Putting Care at the Center* conference; written blog posts; led webinars for the National Center; and helped develop the field of complex care through multiple working groups including our National Advisory Committee, the *Amplify* design team, the core competencies working group, and more.

Explore *Amplify* participant profiles, including their areas of expertise and previous work, and learn more about the consumer voices bureau at [nationalcomplex.care/amplify](https://nationalcomplex.care/amplify).

## Technical assistance

The Camden Coalition provides technical assistance (TA) in New Jersey and across the country to organizations looking to start or strengthen complex care programs, or to support broader populations whose health is affected by racism and poverty. We help programs to address the root causes of poor health in patients and/or participants and to design cross-sector, community-based solutions that place participants at the center.

Outside of training and technical assistance work in New Jersey, in 2020, we worked with 23 organizations and institutions, including health systems, local and state governments, nonprofit organizations, and more.

As part of a multi-year partnership with Adventist Health Systems, we helped their organization scale a cross-sector, community based approach they piloted in Clear Lake, CA in 2017-18 across five additional sites, and to develop an integrated street medicine collaborative connecting five Northern California sites. The work will continue to scale across Adventist's 26 communities in four states.

We also transitioned our COACH and RELATE trainings to a fully virtual format. Throughout 2020 we trained front-line staff and managers from Allegheny County Department of Human Services in Pennsylvania, Providence (formerly Providence St. Joseph Health) in Oregon, and Buena Vida y Salud in Texas. Learn more about our COACH patient empowerment model at [camdenhealth.org/the-coach-model](https://camdenhealth.org/the-coach-model).

As the COVID-19 pandemic spread across the country in the spring, we were well positioned to bring together four health systems on the West Coast — former and current TA recipients as well as other partners — to share information and coordinate a response. The collaborative codified best practices, participated together in a pilot program to reduce homelessness, and collaborated on a COVID-19 testing site in an under-resourced Los Angeles neighborhood.

In late 2020, we won a contract to be part of the TA marketplace for MassHealth, Massachusetts' Medicaid program. Beginning in 2021, our TA services will be available to accountable care organizations and other agencies across Massachusetts.

20

National Consumer Scholars  
in the 2019-2020 cohort

23

Organizations and  
institutions received technical  
assistance from the Camden  
Coalition in 2020

>200

Individuals trained  
in our COACH and  
RELATE frameworks

## Putting Care at the Center 2020: Virtual

Our fifth annual conference looked a little different this year. Rather than meeting together in Philadelphia, we reimagined *Putting Care at the Center 2020* as a virtual event in response to the COVID-19 pandemic. Even with this change, *Putting Care at the Center 2020* was still our biggest conference yet. COVID-19, the uprisings for racial justice, and the 2020 election were on presenters' and attendees' minds as they discussed the conference's theme of *Teamwork, resilience, and health justice in complex care*.

Health justice — racial equity in particular — was the focus of the keynote address, delivered by Dr. Uché Blackstock, Founder and CEO of Advancing Health Equity. "Often we hear about race being a risk factor for a disease, but the risk factor is racism," she noted. "It's how racism shapes the opportunities and lives of people in this country."

The conference's eight plenary sessions touched on complex care financing, workforce development, community empowerment, and more. More than 40 groups of presenters shared their work in our interactive virtual Beehive. The virtual event emphasized connection within the community through networking and discussion groups, and attendees got to enjoy a special treat to close the event: an exclusive, pre-filmed performance from 2020 Latin Grammy nominee Gina Chavez.

Our 2021 conference will also be held virtually and will take place October 20-22. Learn more at [www.centering.care](http://www.centering.care).

"We didn't get here by accident. The systems are structured in a way that maintains disparities. If we're going to overcome those disparities, we have to think about changing those systems."

— Dr. Noha Aboelata, Founder and CEO, Roots Community Health Center

**765**

Conference attendees

**41**

States represented by  
conference attendees

# Looking ahead

## Applying the lessons of 2020 in 2021 and beyond

At the Camden Coalition, the dedication of our staff and our commitment to continuous improvement set us up for success despite the many challenges that 2020 brought. Our partnerships allowed us to act together to continue supporting the populations most affected by the pandemic, often finding new ways to meet emerging needs. We will continue this work in 2021, strengthening our local ecosystem in Camden and the South Jersey region, and learning from and bringing together others doing similar work across the country.

As the pandemic continues, we will continue to support and advocate for equitable access to care and vaccination. The community vaccine survey we conducted in Camden in the fall of 2020 gives us a strong foundation on which to work with providers and community ambassadors to increase vaccine confidence in the populations most affected by COVID-19.

We will keep refining our Camden Core Model using a variety of datasets, including continued analysis of our randomized controlled trial data and new patient-reported outcome measures we will pilot in 2021.

We have a number of new projects planned in Camden and South Jersey to address needs we heard directly from our patients and community in 2020. As rates of mental illness and substance use disorders have risen with the pandemic, we are excited to apply our successful 7-Day Pledge model to connect Camden residents in need to outpatient behavioral health services. The pandemic has also shown how critical internet access is for connecting to healthcare and social services as well as in combating isolation. Our policy team will be advocating for access to broadband internet to be considered a social determinant of health. Finally, through a new partnership with Vital Strategies, we will develop a set of tools for healthcare practitioners to use in their work with pregnant and parenting people with substance use disorders to reduce, where possible, the use of family separation through the child welfare system.

On the national level, 2021 will bring a focus on building capacity for complex care within organizations across the country. We will create and share tools that will allow organizations to train their teams in the new complex care core competencies, and will create a multi-part virtual course that will train providers in our COACH model. We will also launch a Community Ecosystem Learning Collaborative aimed at strengthening complex care ecosystems in communities across the country. We hope you will join us for our sixth annual conference (and second virtual conference), *Putting Care at the Center 2021*, online October 20-22.

We remain inspired by the resilience and perseverance of our patients, our staff, our city, and the complex care community. Thank you for your continued support of this work in 2021 and beyond.



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# Camden Coalition Member Organizations

## Hospitals

Cooper Health System  
Jefferson Health New Jersey  
Inspira Health  
Virtua Health  
Primary care offices  
Broadway Community Health Care  
CAMcare Health Corporation  
Fairview Village Family Practice  
Project H.O.P.E.  
Reliance Medical Group

## Resident organizations

AARP New Jersey  
Faith in New Jersey  
Hispanic Family Center for Southern New Jersey  
Higher education institutions  
Camden County College  
Rowan University/Rutgers-Camden  
Board of Governors  
Cooper Medical School Rowan University

## Partnering organizations

Abigail House  
AmSTAR Medical Transport  
Bayada Nurses  
Bell Pharmacy  
Camden Area Health Education Center (AHEC)  
Center for Family Services  
Collaborative Support Programs of New Jersey  
Fair Sharing Housing, Northgate II  
Family Health Initiatives  
Oaks Integrated Care  
Paschal Nwako  
Robins' Nest  
Pennsauken Diagnostic Center  
South Jersey Behavioral Health Resources, Inc.  
Southern New Jersey Perinatal Cooperative  
STARS Adult Medical Day Care Center, LLC  
VITAS Healthcare  
Volunteers of America Delaware Valley  
Walgreens

## Individual member

Steve Fox

For the most up to date financial information for the Camden Coalition,  
please visit our website:  
[www.camdenhealth.org/about/annual-reports-and-financial-information](http://www.camdenhealth.org/about/annual-reports-and-financial-information)



**Camden Coalition**  
of Healthcare Providers

camdenhealth.org  
P 856-365-9510  
F 856-365-9520



**The National Center**  
for Complex Health & Social Needs  
*An initiative of the Camden Coalition*

nationalcomplex.care  
P 856-365-9510 ext #2013

## About the Camden Coalition

We are a multidisciplinary nonprofit working to improve care for people with complex health and social needs in Camden, NJ, and across the country. The Camden Coalition works to advance the field of **complex care** by implementing person-centered programs and piloting new models that address chronic illness and social barriers to health and wellbeing. Supported by a robust data infrastructure, cross-sector convening, and shared learning, our community-based programs deliver better care to the most vulnerable individuals **in Camden** and **regionally**.

**The National Center for Complex Health and Social Needs**, an initiative of the Camden Coalition, connects complex care practitioners with each other and supports the field with tools and resources that move complex care forward. The National Center's founding sponsors are the Atlantic Philanthropies, the Robert Wood Johnson Foundation, and AARP.