

2022 annual report



20 years of
making a
difference



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2022

MARKED 20 YEARS

since the launch of a series of break-fast meetings among providers and community organizers in Camden, NJ.

From those humble beginnings, the Camden Coalition has grown to become a nationally recognized organization. Our innovative care models and system transformation efforts have helped catalyze the growing field of complex care.

Letter from our CEO

Although our work spans across the state and country, we remain deeply rooted in and committed to the community of Camden, NJ. It is in this South Jersey city where we developed and continue to learn how our care management programs for individuals with the most complex health and social needs can help people reach their goals. And thanks to the insights of our program participants and our network of trusted community partners, it is also where we learn how our systems need to be transformed and improved to achieve better care for all.

The biggest lesson we have learned over these 20 years is that people with complex needs can thrive when there is a coordinated ecosystem of organizations and services in their community to support them. At the onset of the COVID-19 pandemic, the almost 20 years of work we have put into building the relationships, data infrastructure, and governance structures that form our ecosystem of care paid off with stunning dividends. Together with our Camden partners, we were able to respond decisively, flexibly, and with continuous and open communication between community members, organizational leaders and staff, and state and county government — ultimately achieving vaccination rates for people of color that outpace the national average (see p.12).

In 2022, we also launched a new four-year strategic plan, with a goal of strengthening ecosystems of care in 500 communities in Camden, across New Jersey, and around the country. In this report you'll read more about how we're defining and measuring our progress and about the communities where we're already making an impact.

One small but meaningful change you may notice is in our name. We felt that "Camden Coalition of Healthcare Providers" did not reflect our historical

position at the intersection of healthcare and social services, or the many people and organizations invested in housing, criminal justice, food access, education, and more that have long been part of our coalition. We are now simply the Camden Coalition. We also have updated our mission to reflect the centrality of ecosystems to our work. Our mission is now to improve the health and well-being of people with complex needs by demonstrating and advancing equitable ecosystems of care.

Our 2022–2025 strategic plan also identifies five strategic priorities that will serve as touchstones in our work: advancing equity, demonstrating what works, expanding the evidence, being the expert, and enhancing organizational alignment between our local and national work. We will be focused first and foremost on working with our community partners to figure out what works and what doesn't, and on sharing the lessons we learn with the field.

Thank you for your support over the past 20 years. We are a small organization that punches way above its weight class, and the reason we are able to do that is that we are not just one organization, but a coalition of people and organizations across Camden, New Jersey, and the US working together to improve care. Thank you for being part of our ecosystem of care. We look forward to working with you in the next 20 years and beyond.

Sincerely,

Kathleen Noonan
President and CEO, Camden Coalition

Strengthening ecosystems of care

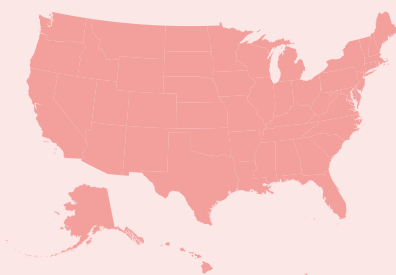
Our organization-wide goal is by 2025, to strengthen the ecosystems of care for 500 communities:



in Camden



across New Jersey



and around the country

Our updated mission:

Improve the well-being of individuals with complex needs by demonstrating and advancing equitable ecosystems of care.

We do this by:

Demonstrating what works (page 8)



Collecting evidence (page 22)



Teaching and training others (page 28)

What is an ecosystem of care?

We define “ecosystems of care” as interdependent networks of organizations and sectors within a community that work collectively to provide care.

How are we defining “community?”

For the purpose of measuring progress toward our organizational goal, we are defining “community” as the who and where of the work — the population impacted.

For example:

- Pregnant people or parents dealing with addiction in Camden
- Individuals in St. Louis who frequently use the ED and inpatient psychiatric services

A framework for measuring ecosystem strength:

How are we measuring whether we have strengthened a community’s ecosystem of care? **FIRST**, we mapped out the six components of a strong and equitable ecosystem of care:

1

Workforce

A well-prepared, diverse, interprofessional workforce that is supported to deliver high quality, person-centered care. Workforce members should be trained to think creatively and to collaborate effectively with program participants and organizational partners.

4

Services

Participants continuously evaluate the continuum of services that are needed by the participating population(s) to ensure that services are accessible and effective. Service gaps are filled, and care management supports individuals to achieve their identified goals in a timely manner.

2

Data & measurement

Organizations generate, share, and use quantitative and qualitative data to identify and understand their populations, assess needs, coordinate services, adapt best practices, and continuously evaluate and improve the delivery of care and support.

5

Leadership & governance

A well-functioning process and structure for identifying priorities, designing and improving services, and collaborating with all relevant stakeholders, including communities and PWLE. Leaders recognize the power differentials among participants and seek to share power.

3

Payment & funding

Resources and payment arrangements are directed to the organizations and services that are essential to improve the health and well-being of the participating population, particularly CBOs and those providing non-medical services for health-related social needs.

6

Consumer partnership

Community members and people with lived experience are key stakeholders who are meaningfully engaged in shaping all aspects of care delivery, program design, quality improvement, and governance.

THEN, we created a rubric to assess the strength of each domain before and after our engagement with a community:

LEVEL 1: Limited practices in place

LEVEL 2: Promising practices in place

LEVEL 3: Strong practices in place

LEVEL 4: Advanced practices in place

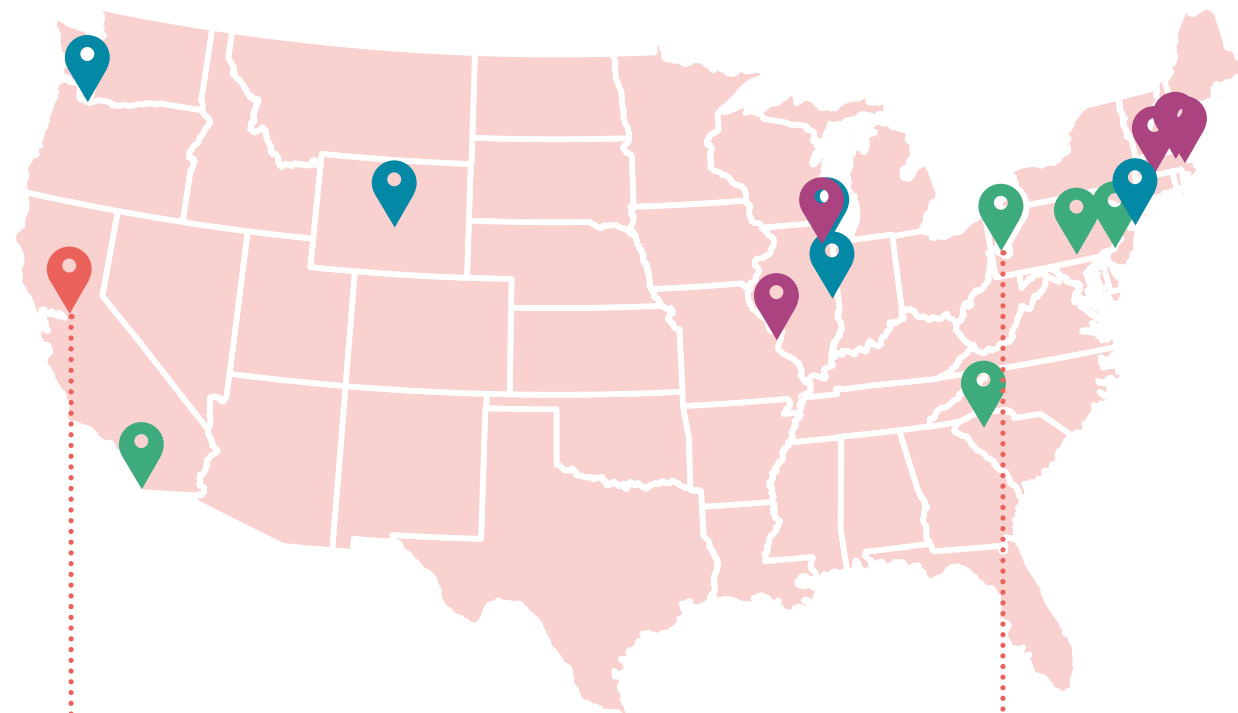
We are piloting the rubric this year, and plan to make it available to the complex care field.

Like everything we do, our strategic plan and measurement framework were created based on extensive input from our staff across the organization, Board members, Community Advisory Committee members, and local and national partners.

Our ecosystems of care in 2022

UNITED STATES

- Annual conference**
Sacramento, CA
- Technical assistance recipients**
Boston, MA
Lexington, MA
Springfield, MA
St. Louis, MO
Allegheny County, PA
Chicago, IL
- Regional convening**
The State of Colorado
Clark County, WA
New York City, NY
Chicago, IL
Delta region, IL
- Ecosystems Community Learning Collaborative participants**
San Diego, CA
Spartanburg, SC
York, PA
Cherry Hill, NJ
Pittsburgh, PA



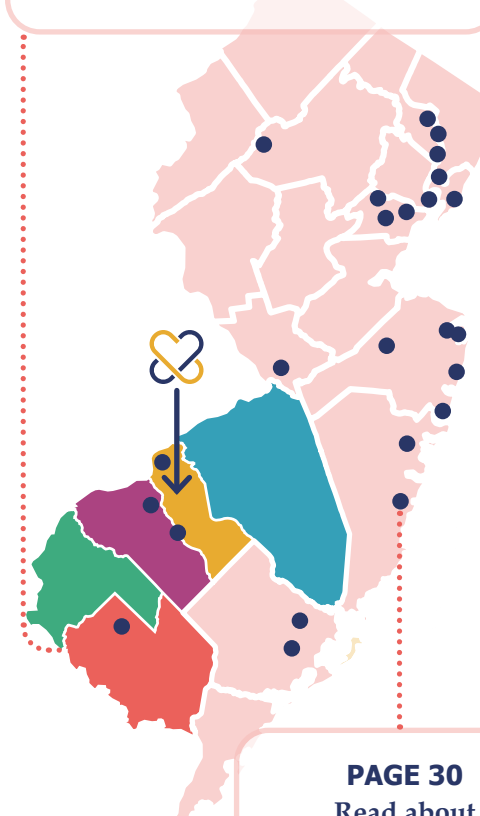
PAGE 32
Read about our annual conference, *Putting Care at the Center 2022*

PAGE 21
Read about our partnership with the Allegheny County Department of Health

NEW JERSEY

- Camden city
- Burlington County
- Camden County
- Gloucester County
- Salem County
- Cumberland County
- Organizations that received office-based addiction treatment navigation training

PAGE 24
Read about our community engagement work in Salem and Cumberland Counties



PAGE 30
Read about our addiction navigation training

Being named a **NEW JERSEY REGIONAL HEALTH HUB** has allowed us to expand our reach and strengthen our partnerships across the state.

IN 2022, WE SERVED:

5 NJ counties with a total of

1.5 million residents

We worked with partners across the state, including:

- Trenton, Newark, and Passaic Regional Health Hubs
- City, county, and state government agencies
- Tribal governments
- Hospitals and health systems
- Behavioral health providers
- Community-based organizations
- Schools
- Pharmacies
- Jails and reentry programs
- Homeless shelters
- Maternal health providers
- Skilled nursing facilities
- Health information exchanges



Demonstrating what works

The Camden Coalition’s work began with the premise that if we can improve care for individuals in Camden, NJ with the most complex health and social needs, we can improve care for everyone.

Our pilot programs — which span complex care management, care and system redesign, community engagement, and cross-sector convening — are designed to quickly identify which approaches work and which don’t in improving care.

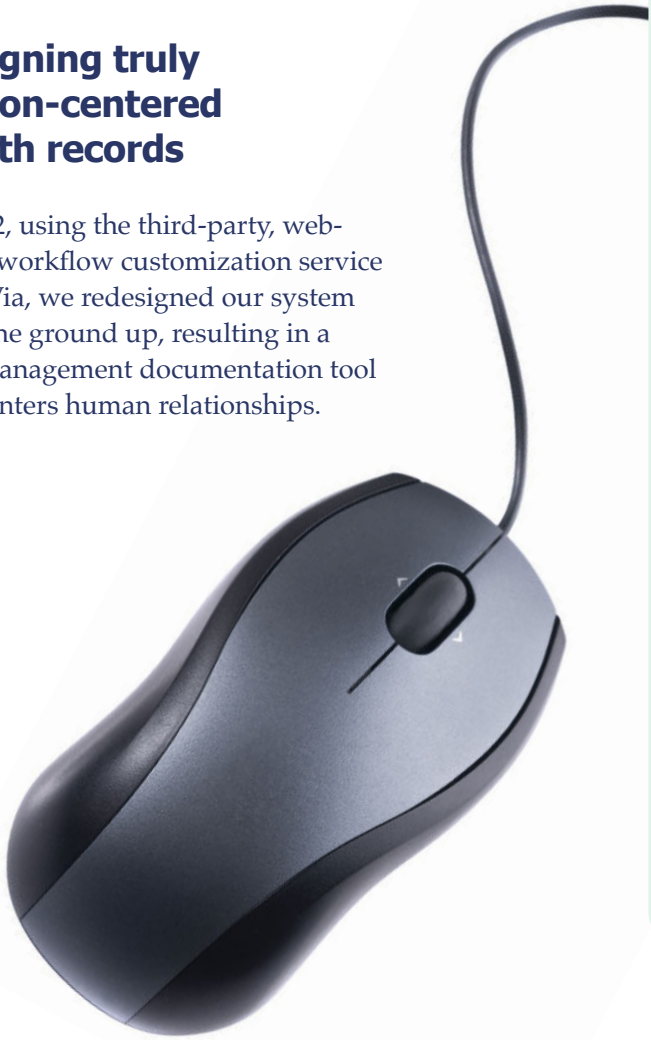
Here are just some of the ways our demonstration pilots made an impact in 2022

Person-centered care management

Our interprofessional care teams identify Camden residents with the most complex health and social needs and work alongside them to reach their goals.

Designing truly person-centered health records

In 2022, using the third-party, web-based workflow customization service TrackVia, we redesigned our system from the ground up, resulting in a care management documentation tool that centers human relationships.



This redesigned system:

Documents diverse participant-generated goals, and distinguishes between the goals of participants, Camden Coalition staff, external providers, and participants’ social support communities.

Links every interaction between a participant and their care team with either a participant’s or a care team member’s goal.

Accommodates processes, paperwork, and terminology from outside agencies.

Tracks participants across siloed services, creating an integrated picture of their supports and barriers to care.

Supports two-way integration with the Camden Coalition Health Information Exchange (see p. 18) and other data systems.

Keeping participants safely housed

“TARA,” A PATIENT in her late 40s being treated for complex mental health conditions, faced certain eviction. Her housing voucher, which covered 100% of her rent, and which she had been receiving for over a decade with no issues, had been improperly terminated. Her landlord, no longer receiving payment from the government, started eviction proceedings.



“Legal services must not be viewed as an extra – they are a necessary component of a functioning complex care ecosystem.”

Luckily, the Camden Coalition Medical-Legal Partnership (MLP) (a partnership with Rutgers Law School – Camden) means that we have attorneys available to address legal matters that are undermining the health and well-being of complex care patients. When they learned of Tara’s case, our MLP attorneys raced to get her housing voucher reinstated, get her approved for retroactive rental assistance, and get the eviction dismissed.

Our MLP team negotiated with the county housing authority, who finally agreed to the extraordinary step of reconsidering Tara’s voucher termination — but only if she could provide extensive documentation. After multiple document submissions and appeals, our MLP attorneys were successful in getting her voucher reinstated.

The MLP team then helped Tara obtain rental assistance to make up for the year’s worth of missed rental payments during the time her voucher was erroneously terminated. Because Tara had previously been denied rental assistance — after submitting a deficient application without the benefit of legal representation — MLP lawyers had to pursue a procedurally challenging amended application. With persistence and creativity, the MLP team secured nearly \$15,000 in funds to offset the rent and utility payments Tara owed.

Throughout this process, the MLP team represented Tara at close to a half dozen eviction court proceedings, each time persuading the court not to move forward with the eviction while voucher reinstatement and rental assistance applications were being processed.

After over six months of advocacy and court hearings, and dozens of phone calls and emails, Tara had her housing voucher reinstated and her rent balance satisfied. Today, she remains comfortably housed without the threat of eviction interfering with her medical treatment.

“Tara’s case demonstrates the importance of medical-legal partnerships for complex care patients,” said MLP attorney Jeremy Spiegel. “Without this intervention, Tara – like too many others – would have been evicted and forced to pursue mental health treatment without a home. Legal services must not be viewed as an extra – they are a necessary component of a functioning complex care ecosystem.”



IN FEBRUARY 2022, Ms. Barbara celebrated six years in permanent supportive housing through our Housing First program.

Ms. Barbara was connected to the Camden Coalition in April 2015 while in the hospital for respiratory issues. Our enrollment team flagged her admission record in our Camden Coalition Health Information Exchange due to her multiple chronic illnesses, frequent inpatient admissions, and history of chronic homelessness. She agreed to enroll in our Camden Core Model and began working with a nurse care coordinator and community health worker on her goals, one of which was finding stable housing. Ms. Barbara had a significant trauma history, including a relationship with an abusive partner who left her without her own resources, leading her to cycle in and out of homelessness.



↓
MS. BARBARA'S ACUTE CARE UTILIZATION HAS REDUCED BY 84% SINCE BEING HOUSED.

Through our Housing First program, we were able to provide her with a housing voucher through the NJ Department of Community Affairs, and she moved into her own apartment in February 2016.

Since then, Ms. Barbara has developed a strong support network including her Camden Coalition Housing First community health worker Ms. Dottie; the local Program of All-Inclusive Care for the Elderly (PACE) through which she receives services and support; and her best friend and goddaughter. Her quality of life has improved significantly, and her utilization of acute healthcare services like emergency room visits and inpatient hospitalizations has reduced by 84% compared with the two years before she was housed by Housing First. Ms. Barbara enjoys crafting pillows and it brings her joy to gift them to others in the community.

Engaging the expertise of people with lived experience

We believe that people with complex health and social needs are best positioned to identify what’s broken in our current care systems and come up with innovative solutions. Our community engagement team ensures that our work is guided by both former Camden Coalition program participants as well as established consumer advocates and leaders from across the country.

Community Ambassadors lead Camden to COVID vaccination success

Since early 2021, Community Ambassadors recruited from both our Community Advisory Committee and the Camden region, and Youth Ambassadors recruited from local middle and high schools, have been trained and compensated to provide outreach and education in their communities about the COVID-19 vaccine.



“For me, it took a lot of patience to try to talk to people knowing some would just walk away. But the more I did it, the more I wanted to do it, because at some point, someone comes by and they’re interested. Being a Youth Ambassador really improves you because you have to open yourself up to the world.”

— Isaac Pacheco, Camden 8th grader and Youth Ambassador

Vaccination rate for Camden City adults 18+
(Source: NJ DOH)

DECEMBER 2021

77% at least one dose

66% fully vaxxed

DECEMBER 2022

93% at least one dose

80% fully vaxxed



IN 2022,
100 COVID vaccination events

across South Jersey were staffed by our community engagement team and Community and Youth Ambassadors.

National consumer leadership in 2022

Our National Consumer Scholar program engages leaders and advocates with lived experience of complex health and social needs from across the country. Consumer Scholars receive leadership development coaching and training from the Camden Coalition, and partner with our staff to strengthen and inform our work.

Amplify, our consumer voices bureau, connects organizations across the country with consumer leaders we call “Amplifiers,” many of whom are National Consumer Scholar alumni and/or members of our Community Advisory Committee.

“My experience as a Consumer Scholar has been a catalyst in growing confident, feeling capable, and feeling like an asset to the healthcare community and those it serves. Prior to my time as a Consumer Scholar, I often felt tokenized or as if I was a burden to the professionals I worked side-by-side with. I now more so feel as an equal, recognizing the importance of the consumer/stakeholder voice in a professional setting.”

— Alyce Luna,
National Consumer Scholar

By the numbers



12 National Consumer Scholars participated in the program’s 2021–2022 cohort.

22 Amplifiers participated in **15 projects and speaking engagements** through our *Amplify* consumer voices bureau.



At our *Putting Care at the Center* 2022 Conference:

10 National Consumer Scholars attended the conference: **8 in person** and **2 virtually**

4 Scholars were workshop presenters, **1 presented** in the conference’s Beehive, and **4 were featured speakers** in the conference’s mainstage story share session



In memoriam

In 2022, two of our National Consumer Scholars passed away. The lives and work of **Michael Jackson** of Camden, NJ and **Katie Broen** of Denver, CO will continue to be guiding lights for the Camden Coalition and the complex care field.



Redesigning systems and workflows to connect people to care

We bring organizations together across sectors to build the shared data systems and workflows that are necessary for person-centered care.

Connecting emergency department patients to outpatient behavioral healthcare

It’s hard for people with behavioral health needs to find and maintain mental healthcare, leading many to seek care at emergency departments (EDs). Unfortunately, ED workflows are traditionally not set up to connect patients with ongoing, outpatient behavioral healthcare.



In 2022, we continued building our Pledge to Connect program, a partnership with Oaks Integrated Care and Cooper University Health Care, that connects ED patients with both low- and high-acuity behavioral health needs with the ongoing care and supports they need.

As of December 2022, 100% of patients who were interested in receiving follow-up services were offered outpatient behavioral health appointments.

In 2023, we will be working to expand the Pledge to Connect workflows to additional regional hospital systems and community behavioral health providers in South Jersey.

Connecting pregnant people to care

We’ve used our participation in the Merck Safer Childbirth Cities program to ensure that pregnant and recently pregnant patients presenting at emergency departments are connected to the services they need —



whether prenatal care, options counseling, abortion care, or follow-up care after a miscarriage. Our staff identify patients through the Camden Coalition Health Information Exchange (see p. 18) and assign them to one of six pilot sites across South Jersey for outreach and follow-up.

To address these patients’ barriers to care as flexibly as possible, we gave each of the pilot sites a \$10,000 discretionary fund for patient costs. Access to these funds means that patients can pay for baby supplies, maternity clothes, childcare, transportation, and more — and that pilot site staff get a huge morale boost by being able to retain their patients in care and make a tangible difference in their lives.



“The flexibility [of the funds] is key because the patients are then driving the needs... the client is the boss and I think that’s great.”

— **Jeey Moncayo**, Service Coordinator,
Southern New Jersey Perinatal Cooperative

How discretionary patient funds impacted care at one pilot site:

PATIENT NO-SHOW RATE

27.8%

GENERAL POPULATION

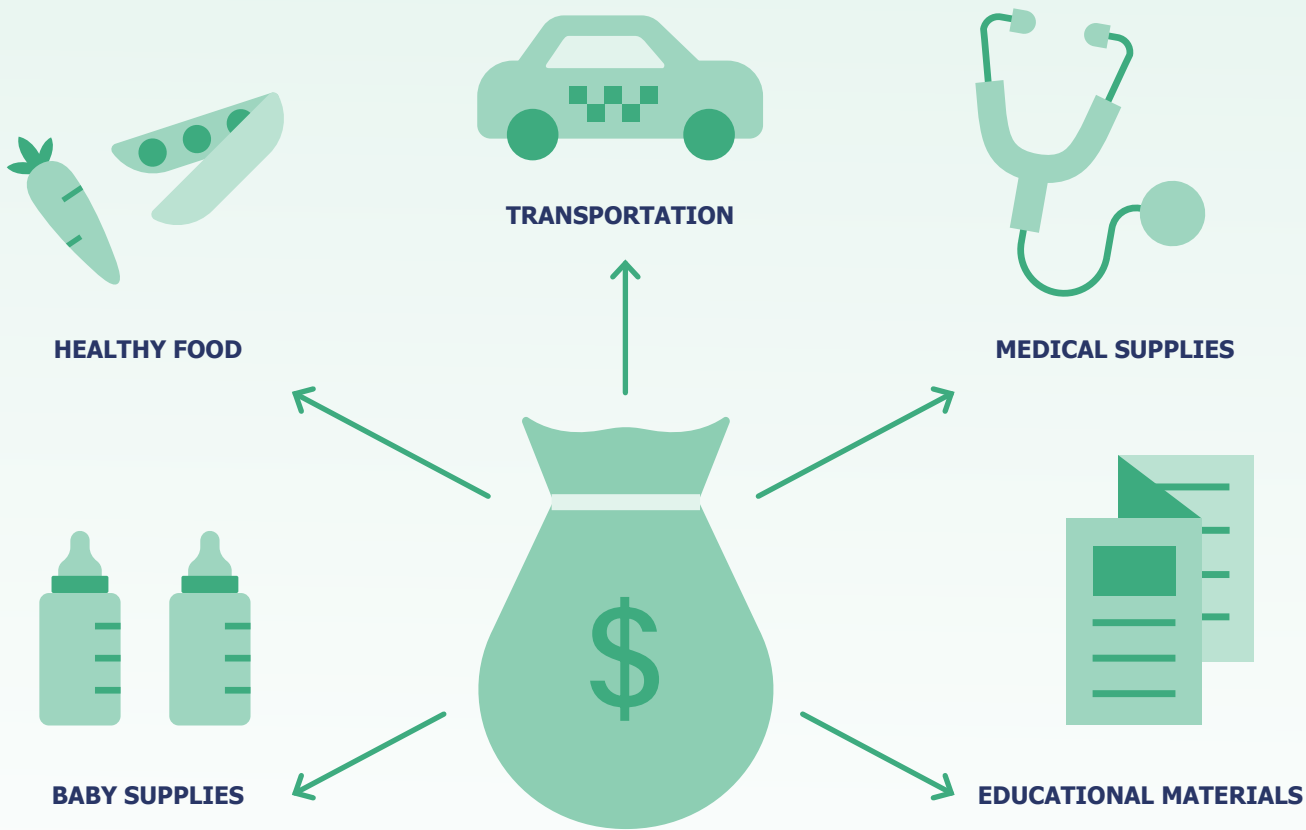
9%

PILOT PARTICIPANTS

Seven months into the pilot, the site had provided **218 rides** to more than **37 patients**, reducing these patients’ no-show rate by **68%** compared with the site’s general no-show rate.

According to the sites, none (**0%**) of the patients that benefited from the covered transportation had significant problems with their pregnancy and/or delivery.

How pilot sites used their discretionary patient funds:



Integrating social services referrals into our health information exchange

Since 2010, the Camden Coalition Health Information Exchange (HIE) has enabled providers to view and share real-time data that give them the full picture of their patients’ admissions, referrals, prescriptions, and more across institutions and systems.

Since 2016, our My Resource Pal social services search platform has allowed South Jersey providers and residents to find up-to-date information on local resources, and for providers to refer their patients or clients to appropriate social services.

In 2022, we launched a pilot that brings these two data-sharing systems together, creating a referral system between the Camden County Jail and community-based organization Center for Family Services to support smooth re-entry for individuals leaving the jail.

We will continue piloting tailored integrations between our HIE and My Resource Pal for local community-based organizations throughout 2023. Our end goal is a fully-integrated system that can support South Jersey providers from across sectors in coordinating their patients’ health and social care.

Bringing ecosystems together

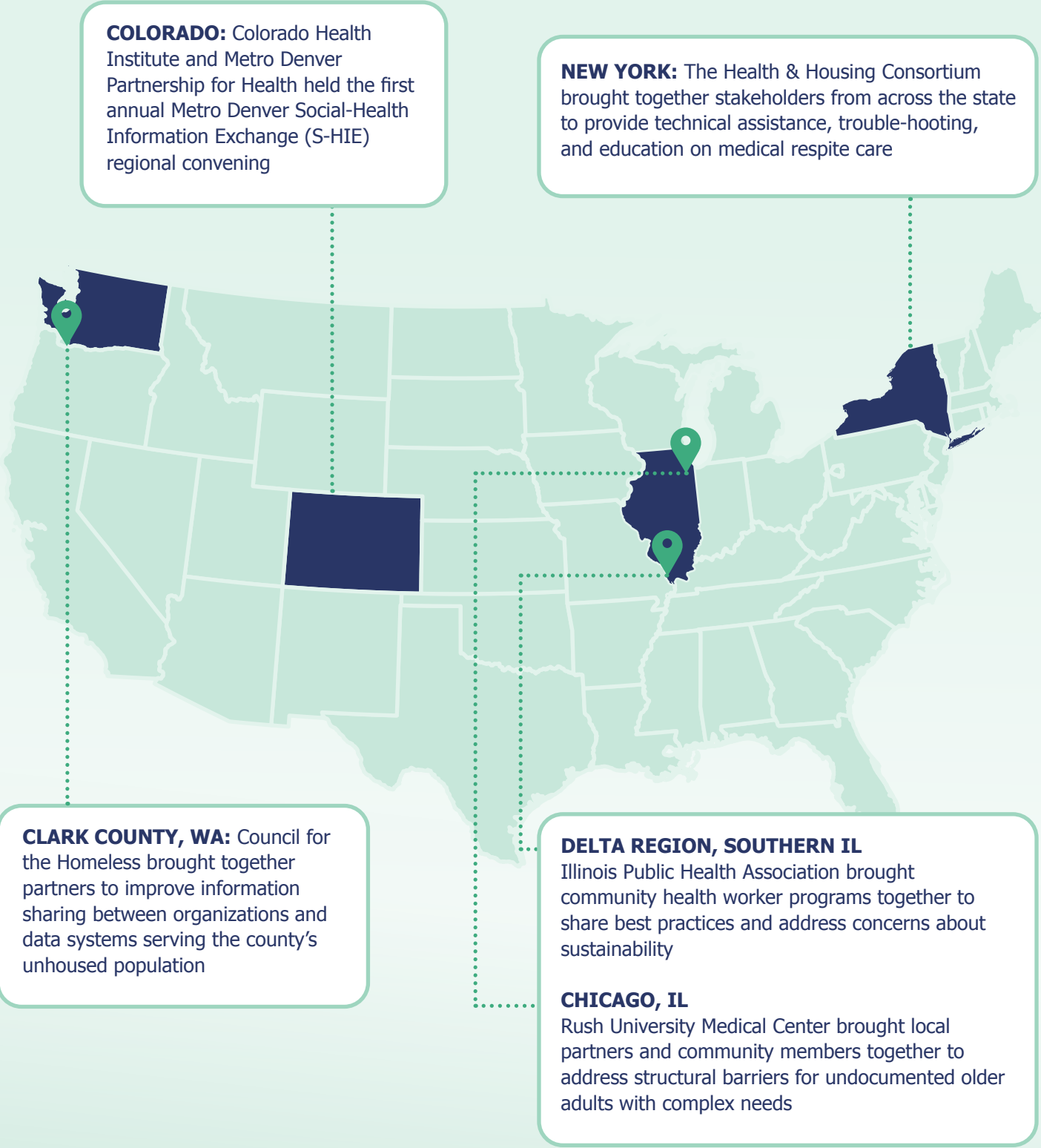
One of the core functions of the Camden Coalition has been that of a convener. We bring partners together in Camden, New Jersey, and in ecosystems of care across the country to meet, connect, and tackle shared challenges.

Supporting regional complex care convenings

Since 2019, through our National Center for Complex Health and Social Needs initiative, we’ve worked with organizations across the country to help them bring local partners together to address a barrier to care for those with complex needs in their community.



IN 2022:



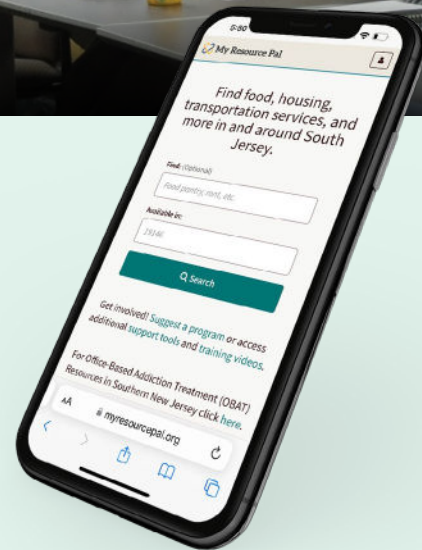
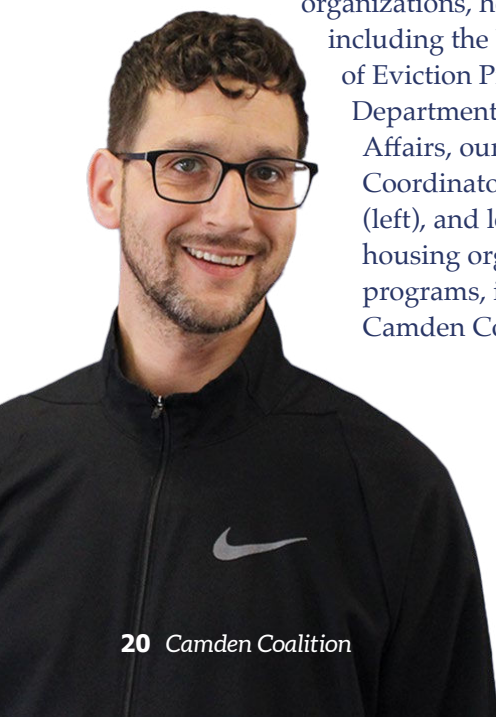


15 Years of Camden Care Management Meetings

Our monthly Camden Care Management Meetings give providers and residents from across the city and region an opportunity to share stories and resources, and work together to transform healthcare and improve the well-being of individuals with complex health and social needs in Camden and beyond.

The Camden Care Management Meetings began in 2007, and grew out of the provider breakfast meetings that launched the Camden Coalition in 2002. They are our longest-running program, and they are still going strong — in 2022, we had almost 200 unique attendees across all of our meetings.

Our April 2022 panel on housing was particularly popular — 75 people, representing 59 organizations, heard from panelists including the Director of the Office of Eviction Prevention at the NJ Department of Community Affairs, our own Housing Coordinator Brian Thompson (left), and leaders from local housing organizations and programs, including two former Camden Coalition staff.



Affordable housing database now on My Resource Pal

Finding affordable housing for clients in need is a common challenge for South Jersey providers. Now case managers can find a centralized listing of available affordable housing from landlords pre-screened by our partners at Senior Citizens United Community Services on our My Resource Pal social services search and referral platform at housing.myresourcepal.org. The listings are updated biweekly.

Marissa McBride, the Housing Counselor and Shared Housing Coordinator, Senior Citizens United Community Services, commented, “Now that other case managers can access the affordable housing database on My Resource Pal, we can all work together to help find housing [for our clients].”



Bringing the Camden Care Management Meeting model to Pittsburgh

Since 2019, the Camden Coalition has been working with the Department of Human Services (DHS) in Allegheny County, PA — which includes Pittsburgh, Pennsylvania’s second most populous city — to support a new county-wide initiative for parents of new babies.

When communication challenges between organizations and agencies in Allegheny County were exacerbated by the COVID-19 pandemic, our partners looked to our long-standing convening models like the Camden Care Management Meeting as a guide for how to strengthen connections between providers in their region.

In December 2021, Allegheny County DHS launched the Hello Baby Support Network, a monthly forum for community partners and providers involved in improving the well-being of families with newborns. In 2022, a new webpage for meeting members let them access information and resources shared through meetings in real time while working with families.

“I am a new Family Center Site Director, so I am still navigating how to be most successful in my role and compiling a list of resources. The [meeting] was extremely helpful and introduced me to programs I did not know existed in our region. I am so grateful and excited to be part of this group.”

— Hello Baby Support Network meeting attendee



“[Camden Coalition staff’s] expertise has encouraged all of us — including those of us working at the Department of Human Services, agency front line staff, their supervisors and community leaders — to think differently about how to engage, meaningfully connect with, and change outcomes for highest need families in the county.”

— Amy Malden, Assistant Deputy Director, Allegheny County Department of Human Services





Collecting evidence

As we demonstrate what works for individuals with complex care, we collect evidence of why and how so that other organizations and partnerships across the country can adapt our care models, approaches, workflows, and more to their own communities.

Here are some of the lessons learned in 2022.

Person-centered care management

Our care teams are constantly learning from and with our program participants. We collect and share their lessons on our blog, through formal evaluation and data analysis, in toolkits for other providers, and more.

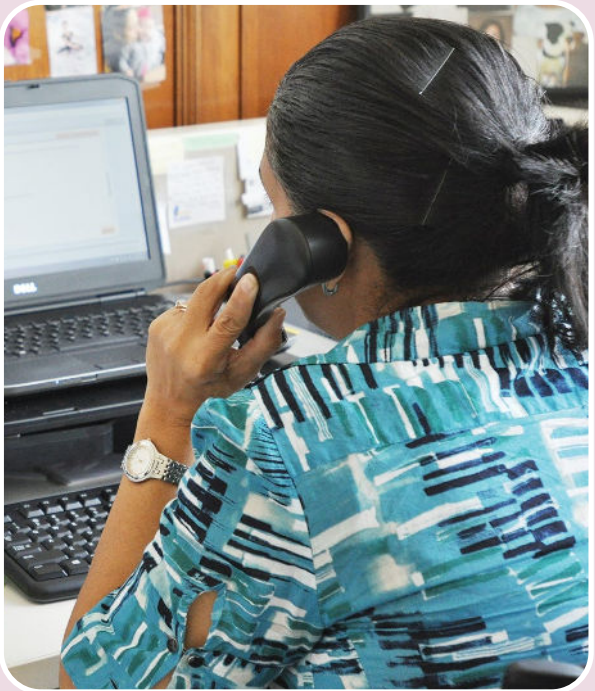
Embracing telephonic care management

Historically, our “high touch” care management philosophy has emphasized face-to-face relationship-building. Most models of telephonic care management that we knew about were associated with large panel sizes and limited interaction.

With our 2018 launch of the Center for Medicare and Medicaid Innovation (CMMI)’s Accountable Health Communities (AHC) Model in South Jersey, we built our capacity for telephonic case management in order to provide social service navigation to thousands of Medicare and/or Medicaid beneficiaries across three counties. In 2020, the onset of the COVID pandemic forced us to pivot to telephonic care management across all our programs.

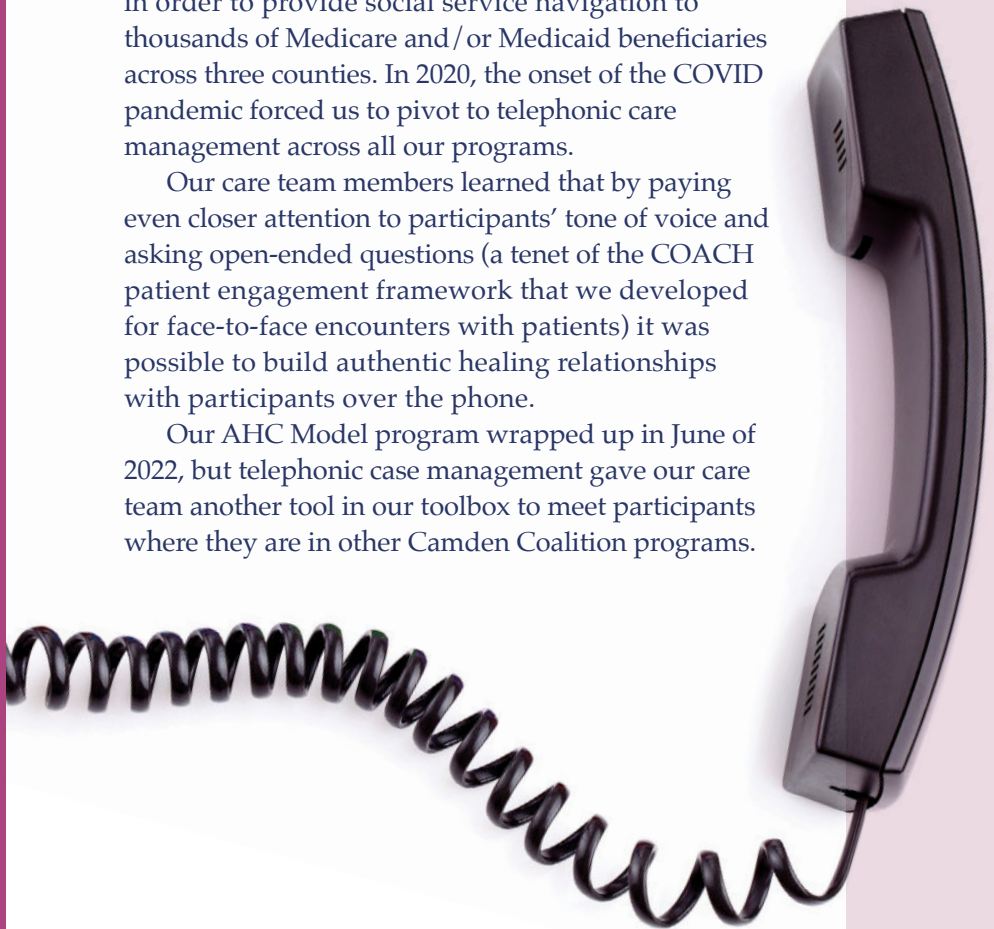
Our care team members learned that by paying even closer attention to participants’ tone of voice and asking open-ended questions (a tenet of the COACH patient engagement framework that we developed for face-to-face encounters with patients) it was possible to build authentic healing relationships with participants over the phone.

Our AHC Model program wrapped up in June of 2022, but telephonic case management gave our care team another tool in our toolbox to meet participants where they are in other Camden Coalition programs.



“To be honest, at first, I was skeptical. However, I now feel that building genuine therapeutic relationships with participants over the phone is not only possible but often necessary, given the high rates of need we have in our community.”

— **Marisol Caban**,
Associate Director of Care
Management Initiatives



A toolkit to help providers create safe care for pregnant and parenting patients who use drugs



In 2022, we partnered with Vital Strategies to release a toolkit that equips healthcare providers with the knowledge and tools they need to support pregnant and parenting people who use drugs — with the aim of making reports to child welfare services a last resort. From the toolkit:

“Identifying perinatal substance use early in the pregnancy and building a trusting relationship enables providers to serve as ongoing support for the parent. Patients who are supported by providers as they work to meet child protective services requirements during the pregnancy are likely to have fewer traumatizing interactions with the child welfare system.”

Find the toolkit at:
camdenhealth.org/safe-care-toolkit

Expanding and codifying our community engagement work

New challenges in rural South Jersey

After we helped Camden city achieve a COVID-19 vaccination rate of 74% by May 2022 (see p. 12), the NJ Department of Health asked our community engagement team to expand our outreach to rural Salem and Cumberland Counties, which had vaccination rates of 56% and 53% respectively in April 2022.

We started by forging strong working relationships with organizations that already had roots in the area. At the vaccination events, health fairs, and presentations that we held in partnership with these organizations, we talked to community members about the COVID vaccine and about their experiences with care more broadly.



“We knew that our experience working with an urban population in Camden would not necessarily translate 100 percent to the needs and experiences of those in a more rural area. We didn’t want to ‘play the hero,’ and instead intentionally built relationships and started conversations from a place of humility.”

— Maritza Gomez, Program Manager, Community Engagement & Capacity-Building

Lessons on community and consumer engagement

Here are just a few of the lessons and recommendations we published in 2022.

BREAK OUT OF THE STORY-SHARING BOX

Story-sharing can be an essential aspect of change-making, but the National Consumer Scholars who worked with us to design *Amplify*, our consumer voices bureau, felt that too often organizations overlook that they have other skills and interests. Consumers can also add immense value to complex care programs and events by:

- Participating in working groups and planning committees
- Serving on advisory boards
- Speaking at conferences, panel presentations, and webinars
- Consulting on programs and initiatives
- Training and educating staff
- And much more

Read more lessons on consumer engagement from *Amplify* here: camdenhealth.org/amplify-lessons



COMPENSATE COMMUNITY MEMBERS FOR THEIR TIME

“The feedback and partnership you’re getting from community members is valuable for your organization, so compensate them. Pay them. Show them that you value their time. Keep in mind though, that for community members on public benefits, too much income can affect their eligibility for benefits, so you may need to be creative.”

— Victor Murray, Senior Director for Community Engagement & Capacity Building

Read more from Victor on our blog: camdenhealth.org/community-engagement-misconceptions

ASK PEOPLE WHAT THEY WANT TO BE CALLED

Consumer?
Patient advocate?
Person with lived experience?

We surveyed fifteen people with lived experience who have participated in our community and consumer engagement programs about which terms they prefer and which they would never want to use. 100% of respondents said they prefer the term “person with lived experience,” but otherwise results varied.

“There are times when one is a patient but later learns to be an advocate,” wrote National Consumer Scholar Connie Montgomery. “Participants are people with lived experiences who have agreed to participate in research, trials or surveys but may not be a patient — instead a caregiver for a loved one. It is all about asking the person how they want to be referred to.”

Read more about the survey results on our blog: camdenhealth.org/PWLE-survey

National lessons and models for stronger ecosystems of care

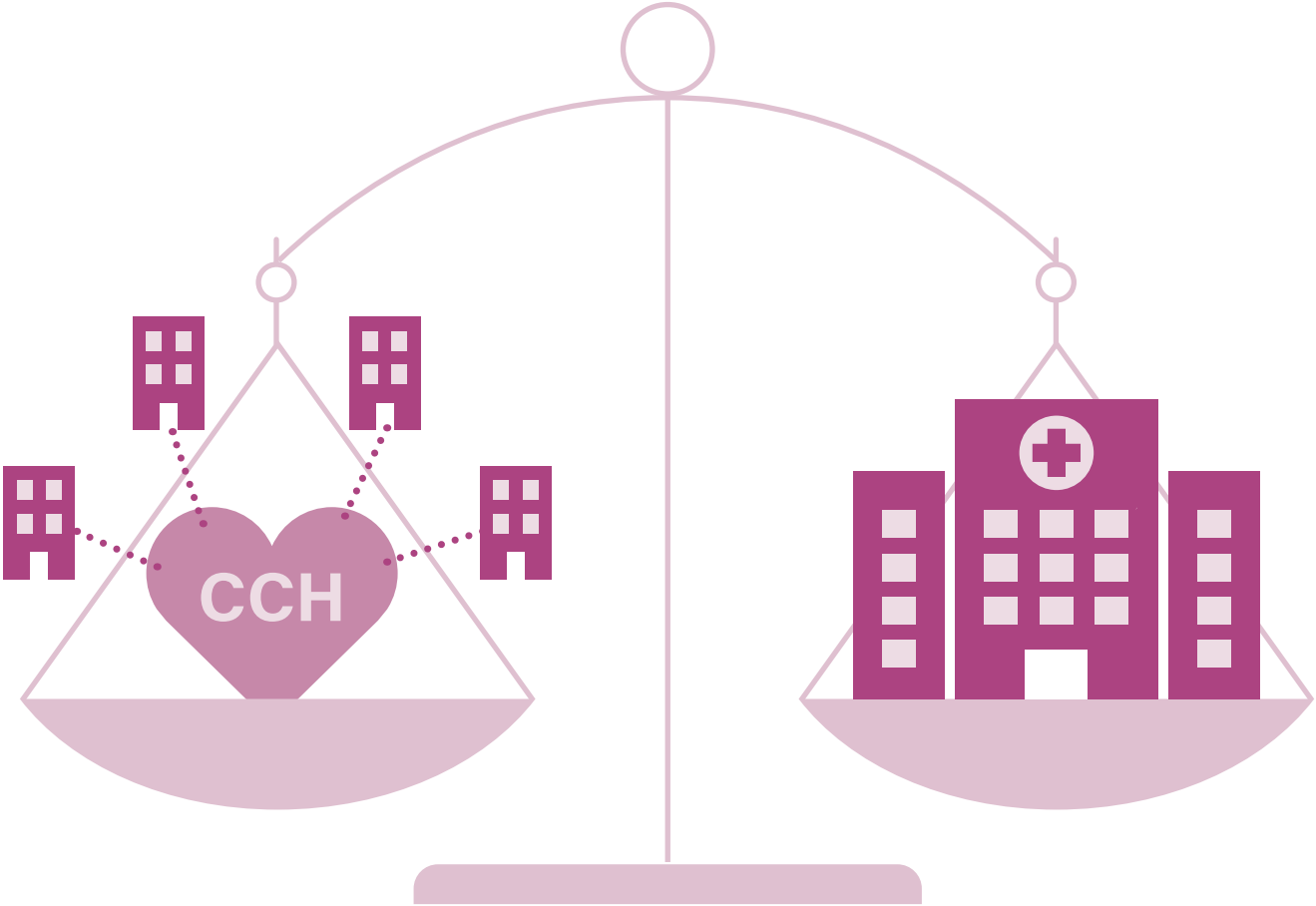
Balancing the scales between the health and social sectors

One challenge to building equitable ecosystems has been that in most communities, the healthcare sector is much better funded and more powerful than the community-based organizations (CBOs) that make up the social services sector.

In November 2021, we began working with the Partnership to Align Social Care alongside leaders from the United States Department of Health and Human Services (HHS) to support a new governance and funding model called the Community Care Hub which seeks to direct resources from healthcare to CBOs to address health-related social needs.

A Community Care Hub organizes the disparate community-based organizations in a community or region into a network, supporting them by centralizing administrative functions and infrastructure like contracting with health care organizations, payment operations, management of referrals, service delivery fidelity and compliance, technology, information security, data collection, and reporting.

The Partnership to Align Social Care has already published a [playbook for state Medicaid agencies](#) in partnership with Manatt Health, and is working closely with the federal government to support Community Care Hubs and CBO networks nationwide. A cross-agency team from HHS also published a piece on [Community Care Hubs in Health Affairs](#). As a member of the planning committee and several working groups, we are helping the Partnership develop a set of principles for equitable health and social ecosystems, standards for CCHs, and guides for health systems looking to contract with CBOs.



Lessons from our Ecosystems Community Learning Collaborative

In the spring of 2021, our National Center for Complex Health and Social Needs launched a learning collaborative for cross-sector teams around the country that were looking to work together to improve care in their communities. The Ecosystems Community Learning Collaborative wrapped up in September 2022.

In February 2022, we published *Rethinking value: Perspectives on the benefits of cross-sector collaboratives serving populations with complex health and social needs*, a brief based on insights from learning collaborative members.



“I think the exciting thing about the collaborative is getting those closer connections and more warm handoffs. So, it’s not just a referral to your own FQHC, but it’s actually working with partners to do a warm handoff.”

— Community-based organization learning collaborative participant

- Through a series of focus groups, we identified four underlying dimensions that contribute to participants’ understanding of the “value” of cross-sector collaboration:
- Intrinsic benefits
 - Community engagement
 - Outcomes
 - Sustainable, system-level change

Read the “[Rethinking value](#)” brief at: nationalcomplex.care/rethinking-value



Being the expert: teaching and training

Strengthening ecosystems of
care across the country means
sharing out what works.

We train teams in our person-centered models and frameworks through online learning and organization-wide technical assistance — and we provide a platform for other complex care leaders to share their own models, tools, and findings with the field through webinars and at our national conference.

Here are some of the ways we built the capacity of the complex care field in 2022.

Training providers to build authentic healing relationships

Person-centered online learning

2022 saw the launch of the first courses available on the Camden Coalition Learning Center, the hub for our online courses and trainings.

WE TRAINED:

775 learners in at least one of our three online offerings.

3 cohorts of learners in COACH, our participant engagement framework.

2 cohorts of learners in RELATE, our reflective supervision framework.

12 cohorts of learners in tools and techniques to engage individuals in conversations on vaccine hesitancy and build vaccine confidence.

Explore the Camden Coalition Learning Center at:
www.courses.camdenhealth.org

WHAT ARE OUR ONLINE LEARNERS SAYING?

"**Amazing training.** The COACH training changed the way I work with participants to better achieve goals."

"As an LPT, [the COACH framework] is completely different than what I am used to, but **I love it** and it feels more human as an approach to helping others with mental illness and traumas."

"**I'd recommend the RELATE training** to all new supervisors, as I was never given this kind of training when I started."

"I feel that **I can now approach patients in a more proactive way** about receiving the vaccine."

What is COACH?

COACHSM is the framework for how we build authentic healing relationships with individuals that empower them to take control of their health. The acronym describes the tools and techniques that our care team members use to work with program participants towards sustained behavior change, and to track progress in supporting them to reach their goals.

COACH stands for:

- C: Create** a care plan
- O: Observe** the normal routine
- A: Assume** a coaching style
- C: Connect** tasks with vision and priorities
- H: Highlight** effort with data

Learn more: camdenhealth.org/COACH

What is RELATE?

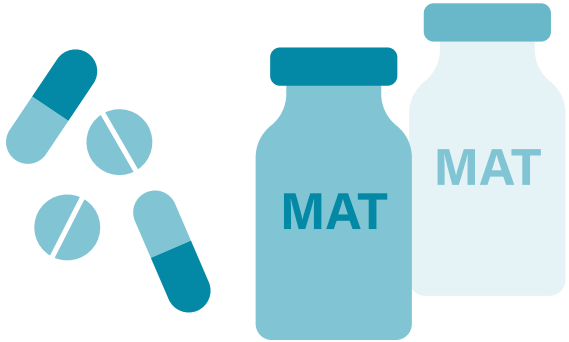
Supervisors’ first instinct is often to either fix things for their staff or tell their staff what to do. Being trained in **RELATE**SM, our framework for reflective supervision, helps supervisors of frontline staff create space for their staff to become self-aware, resilient problem-solvers.

RELATE stands for:

the six core elements of complex care delivery and participant engagement that supervisors should reflect on with their staff:

- R: Relationship**
- E: Emotion**
- L: Limits and boundaries**
- A: Agency**
- T: Teamwork**
- E: Ecosystem**

Learn more: camdenhealth.org/RELATE



Training addiction care navigators in New Jersey

As the state of New Jersey works to expand access to evidence-based addiction treatment, we have been training new cadres of substance use navigators throughout the state in harm reduction, trauma-informed care, and our COACH patient engagement framework so that they’re equipped to provide person-centered, holistic care as they connect patients to treatment and resources.

IN 2022, WE TRAINED:

74 navigators from

46 organizations.

WE ALSO WELCOMED:

>650 navigators and other providers from across the state to our MAT (medications for addiction treatment) lunch hours and SUD (substance use disorder) navigation support calls.

These calls are both monthly virtual spaces for substance use navigators to build community, ask questions, get advice, and build skills.

Building capacity for complex care

Our staff provide technical assistance to health systems, community-based organizations, government agencies, and more, helping them build their capacity to provide quality care to individuals with complex health and social needs.

Through our technical assistance contracts in 2022, we trained **290** frontline staff members across **5** organizations in our COACH patient engagement framework, and trained **61** supervisors in our RELATE reflective supervision framework.

We also worked with organizational leaders and staff to build capacity in:

- Ecosystems development
- Complex care management
- Quality and performance improvement
- Program monitoring and evaluation
- Consumer engagement and community outreach
- Data integration and analysis



“People really love the interactions with the Camden team. I think it gives them hope. I think it makes them feel that they are not alone.”

— Technical assistance client



Creating platforms for peer-to-peer learning in complex care



Putting Care at the Center 2022

Our annual *Putting Care at the Center* conference was back in person in Sacramento, CA, after two years of virtual conferences. It is the complex care field’s annual opportunity to share new ideas and lessons learned.

IN 2022,

129 conference presenters shared their work across **35** total workshop, Beehive, town hall, and main stage sessions

18 conference presenters identified as people with lived experience of complex needs or complex care consumers

649 conference attendees from **187** organizations and **33** states



“It’s the family feel and the collaboration of all the stakeholders at the table. Having community-based organizations, medical centers and healthcare partners, as well as patients/caregivers/consumers, all talking about strategies and solutions to make healthcare the best it can be — that’s what makes this conference different.”

— **Connie Montgomery**, National Consumer Scholar and *Putting Care at the Center 2022* presenter



CalAIM: a tremendous opportunity for complex care

Sacramento, California’s capital city, was our 2022 conference location for a reason. At conference time, the state was nine months into the implementation of CalAIM, a five-year plan to transform Medi-Cal, California’s Medicaid system, and the largest at-scale complex care experiment in the country.

In four CalAIM town halls, conference attendees shared lessons and challenges from communities across the state and got to ask questions of state- and county-level leaders.

CA State Medicaid Director and CalAIM architect Jacey Cooper joined us on the main stage on the conference’s final day. In California, she said, “we’ve been paying for care coordination in healthcare for a long time. But CalAIM is taking it to another level, where we can really change the trajectory of someone’s life.”



“Our society is an ecosystem, and the sooner we recognize that instead of protecting our turf, the sooner we can mobilize for a more equal society, a society that has decency and a future.”

— **Jennie Chin Hansen**,
Putting Care at the Center 2022
keynote speaker

Sharing lessons from across the country virtually

Each year, our National Center for Complex Health and Social Needs puts out an open call for webinar proposals to the complex care field. From dozens of submissions, our staff selects the best examples of emerging complex care knowledge and works with presenters to prepare their webinars.

IN 2022, WE HOSTED:

17 webinars featuring **47** presenters from **32** organizations, with a total of **2,908** attendees

7 presenters identified as people with lived experience of complex needs or complex care consumers

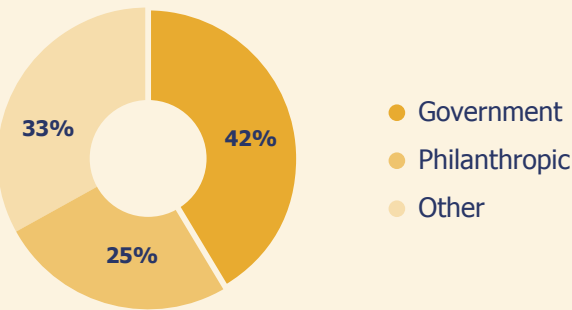
View recordings and resources from our 2022 webinars at: nationalcomplex.care/past-webinars



2022 Financials

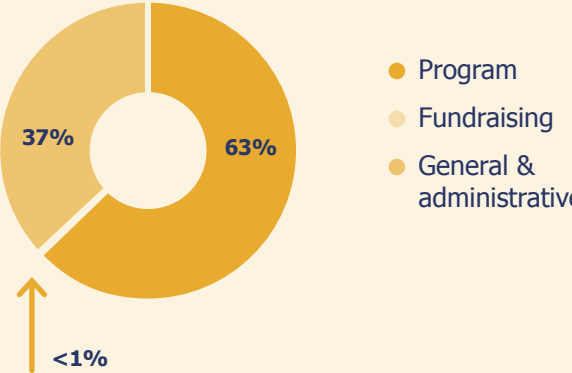
Revenue

Government.....	\$ 5,291,630
Philanthropic.....	\$ 3,230,040
Other	\$ 4,194,921
Total Revenue	\$ 12,716,591



Expenses

Program	\$ 7,576,945
Fundraising	\$ 38,500
General & administrative.....	\$ 4,412,640
Total Expenditures	\$ 12,028,085



Looking ahead to 2023

In 2022 we reflected on the impact of our work over the past 20 years, and charted a course for the future with the launch of our 2022–2025 strategic plan. Meeting our organization-wide goal of strengthening ecosystems in 500 communities across the country by 2025 will be the focus of our work over the coming years, and we look forward to sharing what we learn.

Over the past few years, our data and care teams have been working together to evaluate and refine the Camden Core Model and our other care management programs. One of our challenges has been identifying measures that capture the diverse and holistic outcomes that our care team members work with our participants to achieve. In 2022, we joined a National Committee for Quality Assurance (NCQA) learning collaborative to pilot and test their person-centered outcome measures, which use a methodology called goal-attainment scaling to translate participant-generated goals into standardized, quantitative outcomes. The learning collaborative continues through December 2023, and we will be sharing what we learn with the complex care field throughout 2023 and beyond.

The COVID-19 pandemic will also continue to shape our work as a New Jersey Regional Health Hub. We will continue to expand our community engagement and

outreach to South Jersey counties like Salem and Cumberland. As Medicaid’s COVID continuous coverage requirement expires, millions of people face losing coverage. We are working together with our local partners, state agencies, and New Jersey’s other Regional Health Hubs to ensure that residents maintain access to the services and supports they need.

We will also continue to expand opportunities for providers around the country to receive high quality training in complex care. Throughout 2022, we have been piloting an in-depth, online curriculum designed to train frontline providers in the complex care core competencies. We plan to launch the core competencies course on the Camden Coalition Learning Center in 2023.

As we note on p. 33, California’s CalAIM initiative presents an exciting opportunity to implement complex care principles on a massive scale.

We will be supporting our CA partners in two ways in 2023:

- Convening and strengthening ecosystems of care in five CA counties as lead facilitator for three CalAIM Collaborative Planning and Implementation (CPI) collaboratives.

- Supporting implementation of CalAIM and training payers and providers in person-centered care as a technical assistance (TA) provider in the state’s CalAIM TA marketplace.

In order to enhance organizational alignment of our local and national work — one of our 2022–2025 strategic priorities — we are excited to be launching a new, fully redesigned website in 2023. The new website will integrate the work of our National Center, now found on www.nationalcomplex.care, with our local and state-level work, and will include a re-designed resource library that will help visitors more easily find the toolkits, reports, case studies, that they need to improve care in their own communities.

We are setting the stage for a transformation in how our communities deliver care and promote health and well-being. Thank you for continuing on this journey with us, and for all you do to improve care in your community. [Sign up for our newsletter](#) to stay connected to our work in 2023, and join us at our annual conference, *Putting Care at the Center 2023*, in Boston, MA November 1–3.

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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 complexcare by implementing person-centered programs and piloting new models that address chronic illness and social barriers to health and well-being. 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.

Through our National Center for Complex Health and Social Needs (National Center), an initiative of the Camden Coalition, we connect complex care practitioners with each other and support the field with tools and resources that move complex care forward.