BRIEF

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Ecosystems of care 101

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Brook Henderson was facing a problem. As a social worker at AccessHealth Spartanburg in South Carolina, she helped people recently released from prison or jail to access healthcare. Many of her patients had behavioral health challenges, including mental health and substance use disorder diagnoses, which were being managed with medications they needed ongoing access to. But she kept encountering the same problem: many of these medications were classified as controlled substances so her patients were released with only five days' worth of medications, and the primary care providers she worked with were unwilling to prescribe controlled substances to this population.

After repeatedly seeing her patients denied access to the medications they needed, Brook took a new approach, beginning with looking around her community for existing resources that could help fill the gaps she was seeing.

She reached out to the South Carolina Department of Mental Health (SCDMH) after learning that they have providers who can prescribe controlled substances and began building a partnership. She developed an agreement with them to directly refer her patients to their psychiatrists. Now, it's easier for her patients to continue taking the medications they need after their release from prison. Inspired by the successful partnership she has with SCDMH, Brook continues to build partnerships in her community to meet the needs of the population that she works with.

In her assessment of existing systems of care and support in her community, Brook saw her organization as just one piece of a larger ecosystem. As in natural ecosystems where organisms' interconnected roles allow diverse species to thrive, ecosystems of care — where organizations' and community members' roles interconnect— allow everyone to thrive, most significantly those with complex health and social needs.

In this brief, we introduce the concept of ecosystems of care, provide an overview of what an ecosystem of care is, and discuss why they are important for addressing complex needs. We will also provide guidance on how to build an ecosystem of care and provide examples with the hope that this brief will inspire others to build and strengthen ecosystems of care within their own communities.

Defining ecosystems of care

An **ecosystem of care** requires alignment, coordination, and collaboration among local healthcare and social care systems, community organizations, government agencies, and people in the communities being served. Participants in an ecosystem of care co-design, implement, and lead new or improved programs, systems, and policies that bridge organizations and sectors to better serve the health and well-being of individuals and communities.

An **ecosystem approach** involves helping people and communities get the support they need by improving coordination between organizations and available services so that the support is easier to obtain by those who need it.

When ecosystems of care work collectively and intentionally to better address the root causes of poor and inequitable health and well-being among people with multiple and compounding health and social needs, they end up helping entire communities.

A **population of focus** is a group of people that share an identity and/or type of need whose experience, health, and/or well-being is the epicenter of an ecosystem of care.

Sectors refer to the areas of focus or types of services that can be used to classify organizations in a community. For example, the healthcare sector consists of medical services, health insurance, health departments, or organizations and groups that otherwise support the provision of healthcare to patients. The social sector includes organizations, religious groups, community groups, businesses, and other institutions that focus on supporting people's social needs, including food access, housing, government benefit access, legal support, and employment access.

In many communities, people in different organizations and organizations in different sectors don't communicate with each other or work together. These organizations or sectors are **siloed**. An ecosystem approach entails the breaking down of these silos: bringing organizations and sectors together, developing ongoing lines of communication and shared workflows, and ensuring that when individuals need services from multiple organizations or sectors, they can access those services in a coordinated way.

Cross-sector collaborations are how organizations work together to solve collective challenges that communities face across sectors (e.g., healthcare, social services, government, public health).

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Why are ecosystems of care important?

Ecosystems of care are vital to improving conditions for people with complex needs for several reasons:

1 *Ecosystems of care deliver whole-person care.*

No single sector has the responsibility, capacity, relationships, knowledge, or skills to support all of people's complex health and social needs. A cross-sector approach enables a community to address all the needs of the people being served.

EXAMPLE

AccessHealth Spartanburg partners with Jumpstart, a peer-founded and -based organization that supports people upon re-entry from incarceration. Jumpstart specializes in connecting people with employment and housing opportunities. Instead of trying to do it all, Jumpstart works with AccessHealth to connect their participants with care to meet their medical and insurance needs. As it was founded by individuals with lived experience of incarceration, Jumpstart's leaders also bring a peer perspective to the ecosystem of care, which provides AccessHealth with additional insight into how best to care for their patients.

2 *Ecosystems of care leverage the strength and specialties of each organization involved in order to provide the highest level of care.*

Each organization providing services to a community brings a different perspective and area of expertise to the table. Forging and strengthening relationships between community organizations and leveraging each of their strengths and specialties results in residents receiving the highest level of care. Knowing that the needs of an individual are being met by partner organizations allows for specialization, which leads to efficiency in delivery. Allowing organizations to lean into their realm of expertise and creating partnerships between specialized organizations in a community creates a more integrated ecosystem of care. These partnerships also often bring credibility, money, engagement opportunities, and power to organizations and individuals.

EXAMPLE

Jeremy is a 55-year-old man experiencing homelessness. He has diabetes, which is exacerbated by his unstable housing and lack of cold storage space for his medication. For Jeremy, just having a prescription for medication isn't enough; he needs both medication and housing to manage his diabetes. This type of complexity requires an interdisciplinary cross-sector approach and requires coordination among organizations across sectors to address his complex needs. For Jeremy, this approach would involve support from a prescriber and a housing case manager, from organizations within both the healthcare and social service sectors.

3 *Ecosystems of care demonstrate the utility and effectiveness of new payment structures and value-based incentives.*

In recognition of the shared responsibility of an ecosystem approach, there are increasing financial incentives to collaborate across sectors and address root causes of need.

EXAMPLE

CalAIM, California's Medicaid reform initiative, is incentivizing the creation of ecosystems of care that focus on person-centered care management, integration of behavioral health and physical healthcare, delivery system transformations, and new payment for more than a dozen community supports that address social drivers of health. Other emerging structures designed to support the creation of ecosystems of care include Community Care Hubs, which are community-focused entities that organize and support a network of community-based organizations providing services to address health-related social needs.

4 *Ecosystems of care can promote equity.*

For too long, resources have been distributed inequitably. The process of creating an ecosystem of care provides an opportunity to redistribute power and resources across communities. When ecosystems of care are created with equity as a goal and involve partners that are representative of and trusted by the community, power can shift to people and organizations that have been historically and/or are currently marginalized. The needs and preferences of marginalized people and those with lived experience of complex health and social needs must be centered when building ecosystems of care and selecting outcome measures. When ecosystems of care work for the those in a community with the most complex needs, they are likely to work for everyone.

EXAMPLE

The partners in the Pledge to Connect initiative in Camden, New Jersey involve consumers in several ways to ensure that the program promotes equity. They consult with the Camden Coalition's Community Advisory Committee to generate and vet ideas and new directions and process improvements for the initiative. The initiative also includes roles for peers to support the population of focus.

5 *Ecosystems of care provide broad value to people, organizations, and communities.*

Our research shows that ecosystems of care bring value beyond financial considerations. We asked participants in cross-sector collaborations that were working to strengthen their ecosystems of care to identify what value they get out of those collaborations. They identified value in four areas: intrinsic benefits, community engagement, outcomes, and sustainable systems-level change. Taking an ecosystems approach provides efficiency and clarity of responsibility for organizations, it is rewarding for staff, and it improves individual and population health experiences and outcomes.

EXAMPLE

One hospital representative whose hospital is part of an ecosystem of care in an urban community said, "From the healthcare perspective, we've known for years that health disparities and social inequities exist, and have always approached every child with an equity lens. But sometimes it's really just been talk. I think now we're ready for action — and the only way a healthcare organization can do that is with community partnerships. They can't ever do it alone."

How to build an ecosystem of care

Building an ecosystem of care looks different in every community. However, there are a few common activities that can be applied to help build and strengthen any ecosystem:

- **Identify your partners and allies outside your organization.** Look around at your community and identify who else in the community is thinking about the same people and challenges. Thoughtfully bring people who are experiencing those challenges in from the beginning to lead or weigh in on strategy and implementation.
- **Identify community needs in a process led by or in partnership with the community.** Use a variety of data — including stories, numbers, prior successes and failures, and preferences of community members and groups — to identify community needs.
- **Define your population.** Consider a specific population to focus on by using various sources of data to identify disparities in access to or benefits from existing programs and services.
- **Define your aim.** Focus on a specific aim for the group to help define and clarify the work. Be careful not to over-promise results to community members — this risks destroying the trust you are trying to build.
- **Identify and reach out to more partners.** Consider new partners that historically have not been or are currently not included in community collaborations or decision-making processes. Hold an asset-mapping conversation within your organization or with current partners to identify additional partners that should be included. Reach out to new partners who can help fill the identified need.
- **Implement continual process and quality improvements.** Continue process and quality improvements using data, new partners, and community insights/partnership. To do this, examine your data, both quantitative and qualitative, for gaps. Qualitative data includes asking frontline practitioners and community members about their experiences and challenges. Where are people getting stuck? What isn't working for your population of focus? Identify the issue or gap and then brainstorm ways to fill that gap. Often, this is by partnering with an organization who already provides that service or by changing processes or workflows. Operate with the new structure for a few weeks or months and then check the data again. Did outcomes and experiences improve? Where are people getting stuck now? Use this information to continue the process improvement cycle.
- **Create an intentional structure with focus on sustainability.** Intentionally develop the ecosystem of care by creating formal structures for communication and shared decision-making. Recognize the interdependence and joy of collaborative work.

Providing whole-person care takes an ecosystem of care

Ecosystems of care are essential to providing holistic, coordinated care to community members with complex health and social needs. However, ecosystems of care can look different in every community. For example, they can vary by:

Population of focus: e.g., people involved in the criminal legal system, pediatric population, people experiencing homelessness, people with behavioral health needs in the emergency department

Geography: e.g., rural, urban, non-Medicaid expansion state, Medicaid innovation state

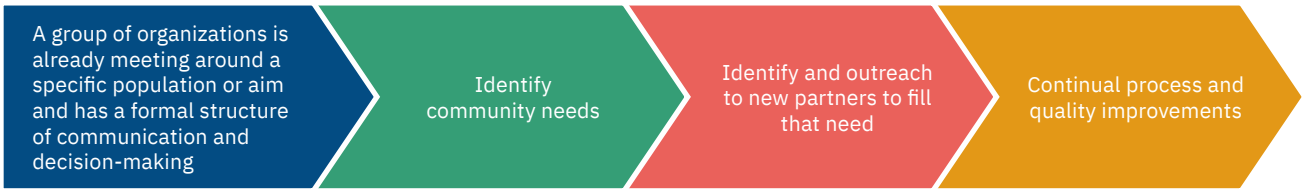
Scope and scale: e.g., municipal, county, regional, state-level; short-term solving a specific challenge, ongoing

Leadership: e.g., hospital-led, government-led, community-based, and/or peer-led

Funding source: e.g., county, federal, grant, payer, reimbursable service

Three examples of how ecosystems can be developed

Here are some examples of how these activities can be applied in developing a community's ecosystem of care from a number of different starting points:



Where are you starting?

What's your next best step?

Evaluating ecosystems of care

In 2022, the Camden Coalition's strategic plan introduced an overarching framework that identifies six key domains of a strong and equitable ecosystem of care. These domains are used to focus on specific areas of work and ultimately measure change in those areas. The six domains are:

1. Workforce
2. Services
3. Data and measurement
4. Leadership and governance
5. Payment and funding
6. Consumer partnership

1 *Workforce*

Definition: 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.

EXAMPLES

Jumpstart South Carolina is a peer-based re-entry program that works through community partnerships to address their participants' spiritual, educational, employment, healthcare, housing, and family relationship needs. It was founded by people inside prison and continues to be operated by people with lived experience of incarceration. When this organization participates in and leads the creation of an ecosystem of care in their community, they bring perspectives from people with both lived and professional experience in the systems they are trying to change.

Allegheny County, PA Department of Human Services partnered with the Area Health Education Center to train community health workers and embed them in homeless shelters so that they could provide care and connect shelter residents to behavioral healthcare.

2 *Services*

Definition: 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.

EXAMPLES

Pledge to Connect in Camden, New Jersey is an initiative that includes the Camden Coalition, Oaks Integrated Health, and Cooper University Health Care and takes an ecosystem approach. All patients visiting Cooper's emergency department are screened for depression and suicidal ideation. Based on that screening, patients are systematically referred to social and behavioral health support from the Camden Coalition or Oaks Integrated Health. Providers can also refer patients who have behavioral health or social stresses but do not screen positive.

The **Camden Coalition** implemented and tested the Accountable Health Communities Model, a five-year initiative of the Center for Medicare & Medicaid Innovation. In partnership with clinical and community service providers serving three counties in New Jersey, the Camden Coalition screened Medicare and/or Medicaid beneficiaries for social needs, referred patients to community services, provided community navigation services, and aligned regional partners.

3 *Data and measurement*

Definition: 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.

EXAMPLES

An initiative focused on increasing connection to behavioral health supports and reducing recidivism in **York County, PA** tracked recidivism and service utilization data across the county across time and displayed that information in a clear way that demonstrates the progress that they are making. The graphic below shows the timeline of programs on the bottom and the recidivism and service utilization data on the top.

4 *Leadership and governance*

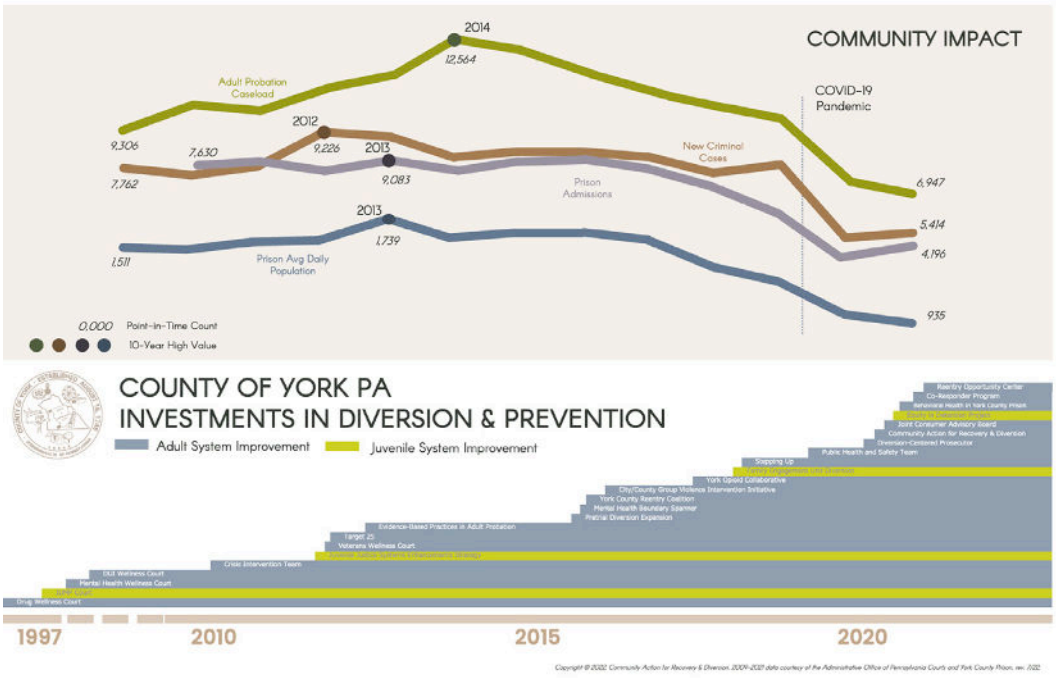
Definition: A well-functioning process and structure for identifying priorities, designing and improving services, and collaborating with all relevant stakeholders, including communities and people with lived experience.

Leaders recognize the power differentials among ecosystem participants and seek to share power.

EXAMPLES

In **York County, PA**, the leaders of the initiative realized early on that they needed to incorporate and build buy-in from community stakeholders. They did this by communicating a broader message of value beyond finances. Community stakeholders learned from the leaders that taking an ecosystem approach led to significant patient and system impacts, such as decreases in probation caseloads, prison admissions, and new criminal cases filed, and continued to provide support and encouragement for the partnership to continue collaborating to improve system gaps.

Explore the Camden Coalition's ***Building the Value Case for Complex Care Toolkit*** for additional resources on how to make the case for complex care programs.



Adult Probation Caseload

25% since 2009

44% from 10-yr high

New Criminal Cases Filed

30% since 2009

41% from 10-yr high

York County Prison Admissions

45% since 2010

54% from 10-yr high

Prison Avg Daily Population

38% since 2009

46% from 10-yr high

5 *Payment and funding*

Definition: 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 community-based organizations and those providing non-medical services for health-related social needs.

EXAMPLES

Rady Children's Hospital in San Diego, CA allocated significant staff time for population health management activities within the organization and with external partners to build, reinforce, and expand the local ecosystem of social and behavioral services for children with complex medical needs and their families.

The **Pledge to Connect** initiative recently received funding from the state of New Jersey to expand the pilot, with the goal of strengthening the healthcare and behavioral health ecosystem across the South Jersey region. This represents years of time and effort to build capacity, create partnerships, develop data systems, and create workflows.

6 *Consumer partnership*

Definition: 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.

EXAMPLES

The partner organizations in **York County, PA** convened and engaged a Community Advisory Board (CAB) to support ecosystem development and implementation. The CAB oversees several cross-sector initiatives, including Community Action for Recovery and Diversion (CARD), the Opioid Collaborative, the Crisis Intervention Team (CIT), the Stepping Up Initiative, and the Reentry Coalition.

When the Camden Coalition engaged in community participatory research to investigate the value of ecosystems of care, we conducted eight key informant focus groups with both organizations and affiliated community advisors involved in cross-sector collaborations. Community advisors included current or previous patients, clients, or community members who have experienced significant health and/or social needs. The research team compensated the community focus group participants in recognition of their time and valuable contributions.

Where do you start?

Building ecosystems of care requires dedicated time and effort to identify a population and need, build partnerships, and initiate process improvements. While this is not an easy endeavor, even small steps to better collaborate, communicate, and engage with partner organizations and community members can improve care for people with complex health and social needs.

For more information about how the Camden Coalition can support you in building an ecosystem of care in your community, visit **camdenhealth.org/get-support/technical-assistance/**

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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 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.

Through our National Center for Complex Health and Social Needs (National Center), the Camden Coalition works to build the field of complex care by inspiring people to join the complex care community, connecting complex care practitioners with each other, and supporting the field with tools and resources that move the field of complex care forward.

Camden Coalition

The National Center
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