Looking at the Numbers

These numbers tell a powerful story about the impact SNJPC has in South Jersey. The agency’s programs and activities served tens of thousands in 2016 - from individual families to entire health care systems.

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>28,261</td>
<td>Received some type of direct service</td>
</tr>
<tr>
<td>6,015</td>
<td>Enrolled in a case management program</td>
</tr>
<tr>
<td>15,508</td>
<td>Attended an SNJPC educational offering</td>
</tr>
<tr>
<td>937</td>
<td>Events, trainings and workshops presented</td>
</tr>
<tr>
<td>44,936</td>
<td>Health screens managed and processed</td>
</tr>
<tr>
<td>10</td>
<td>New projects initiated by staff to address unmet needs</td>
</tr>
</tbody>
</table>
ARE WE MECHANICS OR GARDENERS?

The question is prompted by Peter Senge’s concept on ‘learning companies’ and his theory that real change requires one to ‘stop thinking like mechanics and to start acting like gardeners.’ Simply put, mechanics fix problems by replacing broken parts with new. Gardeners cultivate change. They plant seeds and nurture organic growth where self-limiting and reinforcing forces portend greater success.

In 2016, the trowels were active at SNJPC as staff employed collective impact and CoIIN (Collaborative Improvement and Innovation Networks) processes to address key issues, most notably perinatal substance use, infant mortality, and teen pregnancy. While many partners in these collaborative efforts were familiar, the approach was new and early results are promising.

Certainly, our garden shed will always include the mechanic’s tools to maintain the efficient systems and effective programs that SNJPC has built to serve the region. In 2016 these programs helped thousands in South Jersey whose needs ranged from that of an overwhelmed single mother with a special needs infant to a prenatal provider challenged in locating a treatment program for substance using patients. Ongoing efforts to improve the system of care produced important progress in perinatal screening for high-risk factors and a centralized referral system for family support services.

We made a difference for many families, providers and institutions – propelled by a devotion to mission and the courage to explore new models.

Gary Stahl, MD
President of the Board
NADIRAH

Nadirah Mitchell and her family have a lot to celebrate. In March, her son Millian, who was born 12 weeks early, turned 1 year old. At birth, Millian weighed just 2 pounds, 2 ounces and spent 55 days in the hospital. Nadirah remembers feeling helpless and afraid.

“It’s just constant worrying is your baby going to be okay. Is he going to be able to eat by himself, is he going to be able to breathe by himself, is he going to be a normal, functioning baby altogether,” said Nadirah.

Soon after Millian was born, Nadirah enrolled in Camden Healthy Start. Her Family Support Specialist helped her get the resources she needed. She also attended monthly parenting workshops which were helpful. As Millian was growing stronger, so too was Nadirah.

“I had to put everything on hold once I found out I was expecting a baby,” said Nadirah. “Having a child gave me more strength and more courage to go ahead and take the chance.”

Recently, Nadirah opened her own photography and entertainment business. She threw a birthday party for Millian at her new storefront. Nadirah says Camden Healthy Start gave her the courage and motivation to pursue her dreams.

“It gives you the confidence that you need to know that anything is possible, that you can make your dreams come true,” said Nadirah. “Just because you have children doesn’t mean you have to put anything on hold.”

Camden Healthy Start (CHS) worked hard to engage the community in 2016. The program gave a voice to community members through its Community Action Network and the ‘No More Babies Dying’ town hall series where Spanish-speaking residents learned about infant mortality. Neighborhood-based Traveling Health Fairs provided health education, screenings and resource information to 500 residents.

<table>
<thead>
<tr>
<th>MEASURE</th>
<th>2016 ACTUAL</th>
<th>2016 GOAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children who receive well child visits</td>
<td>97%</td>
<td>90%</td>
</tr>
<tr>
<td>Children who are read to 3 or more times a week</td>
<td>80%</td>
<td>50%</td>
</tr>
<tr>
<td>Children whose parents report they were ever breastfed or fed breast milk</td>
<td>86%</td>
<td>82%</td>
</tr>
<tr>
<td>Women with health insurance</td>
<td>98%</td>
<td>90%</td>
</tr>
<tr>
<td>Children with health insurance</td>
<td>99%</td>
<td>90%</td>
</tr>
</tbody>
</table>
CHS introduced a new client service, the Free Diaper Program, to help families supplement their monthly diaper expense and keep babies clean and healthy. Nearly 1 in 3 families struggle to afford diapers for their children. In some cases, parents are stretching time between diaper changes which can lead to serious health issues. If families don’t have enough diapers, they can’t send their child to daycare since diapers are required at most facilities, and without daycare, parents can’t work. In 2016, CHS distributed 6,000 diapers to client families. The program requires that clients attend monthly educational workshops or meet with their Family Support Specialist monthly to receive free diapers. CHS seeks to reduce infant mortality and ensure all babies have a healthy start. In 2016, the program served 1,071 women and children in Camden City. CHS made important strides toward improving birth outcomes for women at high risk for poor pregnancy outcomes. 85% of babies born to mothers enrolled in the program were full-term and 82% were born at a normal birth weight.

100 was a good number for the Camden Parents as Teachers (PAT) program. In 2016, PAT served 100 families, and of those, 100% of children had health insurance, 100% of women attended an annual health checkup and 100% of moms initiated breastfeeding. All three performance measures showed dramatic improvements from the previous year. One area the program specifically targeted was getting clients to see the doctor for regular checkups and efforts paid off.

New traditions were started in 2016. PAT held its first annual Family Fun Time event at the Camden Children’s Garden to coincide with National Child Abuse Prevention Month, which is April. The event included education on child abuse prevention and the planting of a pinwheel garden to raise awareness about child abuse. The program also hosted its first baby shower for new and expecting client families. Baby showers are now being held twice a year.

The PAT program supports parents in their role as their child’s first and most influential teacher. PAT educators work with families to monitor child development, build parenting skills and connect to community resources.

Camden Parents as Teachers

Reading is the key to success. Camden Healthy Start hosted a literacy event to coincide with World Storytelling Day which encouraged parents to read to their children.

Maria Perez, with daughter Hannah, is one of 100 families served by the Parents as Teachers program. Maria says the program helps to strengthen her bond with her child.
Personnel Responsibility and Education Program (PREP) transitioned into a new curriculum model in 2016. Wyman’s Teen Outreach Program (TOP®), an evidence-based curriculum that promotes positive youth development, replaced Be Proud! Be Responsible! (BPBR). TOP® empowers teens by providing the tools and opportunities needed to lead healthy and successful lives.

During this transition phase, PREP honored its commitment to existing host schools and programs that had already scheduled BPBR classes in 2016. Staff brought the BPBR program to 282 middle and high school students at 11 different school and community-based sites.

Among the year’s highlights is a Youth and Gang Awareness Conference that PREP organized for those working with youth to assist them in preventing gang involvement. The 156 in attendance gained insights from law enforcement about how gangs operate locally, how youth are recruited and how to recognize gang activity.

Nurse Family Partnership (NFP) said goodbye to 16 moms and families who graduated from the program while welcoming several new families. In 2016, program staff served 193 families in Camden and Burlington counties and completed 2,105 home visits.

Among the year’s highlights is the high breastfeeding rate among NFP clients. In 2016, 97% of new mothers initiated breastfeeding, up from 92% in 2015 and 76% in 2014. The 2016 rate is significantly higher than the national breastfeeding rate of 81%.

NFP is an evidence-based home visiting program that pairs experienced nurses with first-time, low income mothers to provide the support moms need to have a healthy pregnancy, improve their child’s health and development and become more economically self-sufficient.

Personal Responsibility Education Program (PREP)
Serving Camden and Atlantic Counties, this initiative has two distinct components to target the key factors of access and pre-conceptional health.

**THE CONNECTION...EXPANDING ACCESS**

Ringing phones are music for CONNECTION counselors, the human element in this computerized referral system that has established its reliability and efficiency in linking families with appropriate services.

In 2016, the CONNECTION team fielded a combined total of 4,237 requests from Atlantic and Camden County residents, surpassing the state’s required number of contacts.

To further expand access, the project established consumer-driven Advisory Boards in each county and aligned their efforts with the County Councils for Young Children, Family Success Centers and the Healthy Mothers, Healthy Babies Coalitions in order to enhance consumer participation.

The project was tapped to lead the Camden County Early Childhood Comprehensive Systems CoIIN, (part of a state directed, five county collaborative project), whose first goal is a 25% increase over five years in the number of developmental screens conducted in Camden County.

**A BETTER ME...ELEVATING PRE-CONCEPTIONAL HEALTH**

A Better Me focuses on helping women reach their optimal health before pregnancy to improve birth outcomes. A driving factor in a baby’s health at birth is the mother’s health status pre-pregnancy.

2016 was a year of collaboration for the program. Its focus on building and maintaining community partnerships proved very successful as the program reached more than 3300 in Camden County through health fairs, community events, street outreach and contacts with other community-based agencies. More than 500 individuals received case management services.

Community partnerships proved vital as door-to-door outreach was curtailed by safety issues and new limits on the practice imposed by municipalities. New outreach prospects pursued by staff included local food pantries, pediatric offices and college campuses. Through collaborative efforts, the program also provided health education to nearly 700 participants at partner agencies.
The Early Intervention (EI) Service Coordination Unit continues to make a difference for developmentally delayed children and their families. In 2016, program staff served 3,852 families in South Jersey. EI Service Coordinators help parents navigate the early intervention system, working closely with families to establish and monitor care plans, identify and coordinate with multiple therapists and intervene with providers when needed. These efforts support the delivery of quality early intervention services and allow parents to focus on interacting with their child.

**MALLORY & SKYLAR**

What a difference three years make. Skylar Palumbo was six months old when she and mom, Mallory Ballman, joined the Early Intervention program. Skylar, who is hearing and visually impaired, was recently diagnosed with a rare genetic disorder called SPATA 5.

“They don’t know anything about it. They just found it in 2015. 25 people in the world have it,” said Mallory. “They can’t even give me a life expectancy. Nothing.”

During monthly sessions with their EI Service Team, Skylar practiced sitting, playing with toys and painting. Mallory learned how to use adaptive equipment and access resources for Skylar. She also learned how to care for her daughter’s special needs.

“It’s helped her physically,” said Mallory. “I wouldn’t have known she needed to move certain muscles or even the positions to put her in to make her comfortable.”

Thanks to her EI Service Coordinator, Mallory obtained an Upsee which allows mom and daughter to take walks together. At age 3, Skylar started preschool and aged out of the program. Regardless of enrollment status, her Service Coordinator intends to stay in contact.

“I really just felt an instant connection with both of them,” said the family’s EI Service Coordinator. “She’s a great advocate for Skylar. She really is. Mallory’s really great at finding what’s best for Skylar whatever that may be.”

It’s a family affair for Skylar Palumbo, as mom Mallory Ballman and grandmom Lorraine Macnaughton work as a team to help Skylar develop new skills. Skylar has made great strides in development with the assistance of Early Intervention and her EI Service Coordinator.
Increasing numbers of healthcare providers are relying upon the Regional Perinatal Wellness Initiative. In 2016, 10 new locations enrolled, bringing the total number of participating sites to 50.

Providers especially value PWI’s support in complying with NJ law that mandates all women be screened for postpartum depression. PWI services include free access to a web-based screening process, technical support, staff training, patient reports and triage for at risk patients. A record 6,298 depression scale screens were submitted in 2016 via the PWI system. The process identified 866 women at high risk for developing a perinatal mood disorder or in need of assessment, triage and follow-up care. While the total number of screens rose 10%, the number of women meeting criteria for triage and follow-up rose 20%. The overall incidence rate for positive screens in South Jersey through the web-based process was 13% in 2016. Activities to elevate the skills and knowledge of area professionals included three conferences, Lunch and Learns at 14 ambulatory sites and five trainings for home visitation programs on administering the PPD screening tool in the home setting.

At the community level, staff conducted 15 workshops on mindfulness and self-care. They worked closely with the organizing agencies of the PWI affiliated support groups, consulting on facilitator training, curriculum and participant materials. The six support groups in operation during 2016 engaged 764 women.

The Perinatal Addictions Prevention Project is ever on the move - educating, collaborating and promoting best practices to ensure optimal care for substance using pregnant women and their babies. Throughout the year, staff delivered 37 educational activities that reached 356 professionals and 2,983 consumers. Presentations were conducted wherever there was an opportunity, such as addiction treatment centers, mental health settings, social service agencies and colleges.

The early identification of high risk factors is important to healthy birth outcomes. To this end, PAPP promotes the Perinatal Risk Assessment (PRA) screening tool for prenatal providers. The comprehensive tool captures a wealth of data, but it is the section on substance use that is of particular interest to PAPP because of its capacity to elicit honest responses to sensitive questions about alcohol, tobacco and drug use. In 2016, 12,613 women were screened using the tool, a 13% increase over the previous year.

PAPP continued to exert its influence on policy and program development, serving on the NJ FASD Task Force and participating in New Jersey’s In-Depth Technical Assistance Process for Substance Exposed Infants and Neonatal Abstinence Syndrome. The in-depth Technical Assistance initiative ended in 2016, but the experience was so positive that stakeholders from the Camden County area formed the Camden County Perinatal Substance Use Partnership. Their goal is collaboration in a purposeful way to coordinate and improve care for substance using pregnant women and their babies.
In music, it’s all about the bass. For healthy homes, it’s the scent.

“We have die-hard Clorox and Fabuloso users,” said staff at the Spanish Community Center in explaining clients’ skepticism about using the less pungent vinegar and baking soda.

“Our families equate strong smells with cleanliness,” said Parent Educator Mara Leaty. “But when we show them how common ingredients can bring a brown pan back to silver, they are sold.”

This experience is exactly what Lead and Healthy Homes hoped for in their 2016 special outreach to home visitation programs.

In 2016 LHH presented Healthy Homes: A Training for Home Visitors. Mara and colleague Lylian Portalatin were among 73 home visitors from 15 South Jersey agencies in attendance. The training covers common housing issues including lead poisoning, indoor pollution and home safety.

To support home visitors in educating clients about healthy homes, LHH developed the Healthy Homes Bag. It is a large, re-useable bag filled with products, information and a step-by-step guide on using the bag’s contents.

At the Spanish Community Center in Landisville healthy homes is now a priority. Their Parenting Program devotes an entire home visit to the subject. Mara says there’s a visible change in clients’ homes and many report new buying habits.

There’s confidence that families will stick with the program even after the free supplies are gone. Lylian said, “I like that the healthy homes recommendations are inexpensive and do not create a financial burden on our families to continue.”

Outside the Spanish Community Center in Landisville, staff proudly display the best tool for encouraging families to adopt healthy home practices. Holding the Healthy Home Bags l-r are Kelly McLaughlin, LHH , Mara Leaty and Lylian Portalatin parent educators with the Spanish Community Center.
Improving breastfeeding rates among minority populations and assisting member hospitals to achieve Baby Friendly status – these were the 2016 priorities for the Breastfeeding program.

The Birth to Breastfeeding project made an important contribution to improving breastfeeding rates among African Americans, whose comparatively low rates are of concern. Based in Atlantic County, the project provided free childbirth classes that emphasized breastfeeding as the optimal infant feeding choice. At the time, Birth to Breastfeeding was participants only source of free childbirth classes. While modest in scale (57 enrollees), the project had a big impact. All participants exceeded their prenatal breastfeeding goals and many who hadn’t considered breastfeeding became staunch advocates. The average breastfeeding rate among African American women in Atlantic County is 24%, among program enrollees it was 96%.

A vetted Pinterest Page maintained by staff kept new moms engaged and served as a highly accessible educational resource.

Staff was also busy providing technical assistance to SNJPC member hospitals, including assisting AtlantiCare Health System in its efforts to achieve Baby Friendly designation at their Mainland Division. New presentations were developed for daycare providers and home visitors on care of the breastfed infant.
The region’s Healthy Mothers Healthy Babies (HMHB) Coalitions continued to make South Jersey a healthier place to live.

The Atlantic County Coalition helped to make Medicaid enrollment a more successful process for pregnant women, new moms and babies. Coalition members joined with the County Medicaid Manager and the local Federally Qualified Health Centers to clarify the process. The group also provided clarification on how best to assist women ineligible for Medicaid.

To ensure children get a healthy meal at the start of each school day, the Cape May Coalition partnered with SNAP-Ed on outreach to the County Superintendent of Schools about the benefits of the “Breakfast After the Bell” nutrition program and the summer food programs.

The Salem-Cumberland HMHB built membership and participation through their collaboration. Together, coalition members have planned three community events.

The Gloucester County Coalition hosted another successful health fair while the Burlington County Coalition was a familiar presence at a community health event where members raised awareness about maternal and child health issues.

**Fetal & Infant Mortality Review Team**

FIMR Teams serve an important role in preventing poor birth outcomes. Multi-disciplinary panels review individual cases of infant/fetal death, examining an array of medical, social, environmental, safety and economic issues related to the loss. They then use that information to improve community resources and the system of care in an effort to prevent future loss.

The Atlantic-Cape May FIMR Team reviewed 31 cases in 2016, where the issues of maternal weight gain, obesity and inadequate weight gain were most often associated with the loss. To transform these case review team findings into action, the FIMR Team works closely with HMHB Coalitions in Atlantic and Cape May County. As a result, HMHB member SNAP-Ed joined the case review team and HMHB Coalitions supported efforts to offer nutritional education to women in prenatal care sites.

Plans are underway to expand FIMR to Cumberland, Gloucester and Camden counties in 2017, relying on HMHB to develop relevant community action plans that address barriers to health care, education and social services.

**Provider Toolkit for stillbirth & perinatal loss**

Eye catching magnets were part of a New Jersey Stillbirth Provider Toolkit the Cooperative helped produce. The free kit, available on SNJPC’s website, includes downloadable files for patient communication, education and NJ specific resources.
MARGARITA

When Margarita Cordero joined the Atlantic County Healthy Families program, she described her life as crazy and hectic. She was 17 years old, pregnant and living in a shelter. Then, shortly before she was due, her mom was deported from the U.S. and Margarita was left to raise her first child alone.

“My mom hasn’t met my kids. That definitely hurts. It was a dramatic change in my life and not having my mom (was very hard),” said Margarita. “To have that support from the program feels so beautiful. I want to cry now… they’ve done so much for me.”

Healthy Families helped Margarita to put her life back together. She now has two beautiful daughters, a steady job and a home of her own. Margarita recently received a promotion at work and just got her driver’s license “I wouldn’t be where I am today,” said Margarita. “With the help of everyone in this program, I’ve accomplished a lot. A lot more than I thought I would accomplish.”

Margarita has big plans for the future. She wants to go back to school and get her real estate license. Later this year, her mom is moving back to the U.S. and will meet her granddaughters for the very first time. Margarita says she can’t wait.

More families are participating longer in the Atlantic County Healthy Families (HF) program. In 2016, the program’s one-year retention rate increased to 77%, a 35% increase from the previous year. The number of home visits also reached a new all-time high at 2,198.

Healthy Families worked to engage ‘hard to reach’ potential clients with the Supermom Power Baby Shower for new and expecting moms. Almost everyone invited came out and many enrolled in the program.

Healthy Families met or exceeded target goals for nearly all performance measures in 2016. They did exceptionally well with mothers who attended a postpartum checkup and children who have regular doctor visits. 98% of mothers kept their 6-week postpartum visit and 100% of children were up-to-date on their well-baby visits. Postpartum visits are especially challenging because many women lose health insurance after delivery.

### Notable HF Performance Measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>2016 Actual</th>
<th>2016 Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children with health insurance</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Children are up-to-date on Well Baby visits</td>
<td>100%</td>
<td>90%</td>
</tr>
<tr>
<td>Enrolled mothers attended postpartum checkup</td>
<td>98%</td>
<td>90%</td>
</tr>
<tr>
<td>Pregnant participants enrolled in WIC</td>
<td>96%</td>
<td>90%</td>
</tr>
<tr>
<td>Children are up-to-date with Development Screen</td>
<td>96%</td>
<td>95%</td>
</tr>
</tbody>
</table>
SNJPC provided essential support to the state’s immunization information system in 2016, serving as principal trainer and technical support center for users in southern New Jersey. Our staff conducted trainings for 13 provider sites, reaching a total of 209 users.

Another important responsibility is ensuring that those trained actually use the system and submit records. The active submission rate could not be better among the region’s VFC providers (sites that receive free vaccines from the federal government). The 2016 submission rate was 100% for five of seven counties and well above the 85% state target in the other two.

The New Jersey Immunization Information System (NJIIS) functions as the official repository of immunizations administered to children in New Jersey. In operation since 1997, NJIIS now contains more than 48 million records for 3.5 million New Jersey residents. System benefits include automated reminders for due and late immunizations, a seamless process for obtaining accurate immunization history, less paperwork and better inventory management.

This January, New Jersey became the first state to launch a universal Baby Box program to provide a safe sleep environment for every child. Late in 2016, SNJPC staff collaborated with state officials and engaged member hospitals to make this initiative a reality. Recognizing the potential benefits of the Baby Box University with its social media-driven education program, staff also developed plans to become a distributor of the free Baby Boxes in South Jersey. The Cooperative also garnered attention for Baby Boxes in the press and on social media, reaching nearly 55,000 in a single post on its Facebook page.

The Cooperative has distributed 116 Baby Boxes (at time of printing) to new and expectant parents who elect to pick-up their box at one of the agency’s three offices in Pennsauken, Camden and Atlantic City. CONNECTION staff use the opportunity of these visits to introduce parents to SNJPC services and local resources. The program expects to distribute 105,000 Baby Boxes statewide.
Our “Heart and Sole” team braved a downpour and raised $1200 for March of Dimes annual March for Babies walk.

Camden Healthy Start distributed 6,000 diapers to client families as part of a new free diaper program.

Parents As Teachers families planted pinwheels for Child Abuse Prevention Month at the Camden Children’s Garden.

SNJPC programs were the happy recipients of a generous book donation from Rotary Club of Moorestown.

Mom’s Quit Connection has a new logo, developed to better represent their expanded mission to assist all family members in their efforts to quit tobacco.

The Infant and Family Development program provided education and support to 54 families to promote positive parent-child relationships.

The Cooperative’s school nurse program provided nursing services to 4927 school children at the 30 non-public schools in Camden County.
Family Health Initiatives

The steady growth of Family Health Initiatives (FHI) is validation of founders’ expectations. The Cooperative initially launched FHI to broaden access to SNJPC expertise. FHI has not only surpassed that goal, it now is the engine driving a wide range of new products and services. Key projects from 2016 are highlighted below.

IMPROVING PREGNANCY OUTCOMES

FHI had a critical role in the support and improvement of the DOH’s statewide, Improving Pregnancy Outcomes (IPO) initiatives, and was responsible for key technical and operational functions. Staff coordinate training and management of the automated central intake workflow in all 21 counties through the PRA/SPECT website. Additionally, the system and FHI team support the IPO Community Health Worker programs in 13 counties across the state. Health Education monitoring was added to the PRA/SPECT system in 2016 to improve documentation of the impactful messages being provided to families by Central Intake and CHW teams each day. FHI provided more than 400 trainings that included regularly scheduled sessions, on-demand practice site trainings and pre-recorded and live webinars.

Supervisor Reporting was added to the PRA/SPECT system in 2016 to provide both Program-wide and Case-worker level metrics, empowering Supervisors to engage their staff with data-driven objectives as well as a way to measure improvement. As new metrics are identified, additional Supervisor Reports are being added to the system.

PERINATAL RISK ASSESSMENT

The PRA continues to provide a single screening tool for pregnant women linking clinical sites with Medicaid Managed Care Organizations and county-based central intake systems. Using information collected on this tool, teams provide wrap around care for pregnant women across NJ. In 2016, PRA data were included in efforts at the state and national level to identify patterns in substance use, in CoIIN projects looking at smoking, postpartum appointment attendance, and infant mortality and to evaluate foundation and state supported maternal and child health initiatives.

ZIKA PREGNANCY REGISTRY MODULE

In 2016, FHI began working with the DOH in creating an online data collection system for pregnant women ‘at risk’ for Zika. This system will automate the necessary workflow including intake, Zika Public Health Nurse (ZPN) assignment, the recording of data points from ZPN monthly and postpartum followup meetings, as well as providing on-demand data uploads to the CDC.

SALEM YOUTH WELLNESS INITIATIVE

There is a newfound energy in Salem County about youth wellness and a growing confidence that longstanding problems can be resolved. Conviction stems from the progress being made by the Salem Youth Wellness Collaborative, a joint venture of FHI and the Salem Wellness Foundation.

In 2016, the Collaborative implemented the countywide expansion of their successful Salem City project. The process began with a comprehensive assessment of youth services and key informant interviews. Other steps included formation of a Youth Leadership Team, establishing a social media presence and capacity building activities for Salem County professionals who engage with youth. Work also began on a Youth Summit that will invite stakeholder, policy and community change makers to engage in a working discussion with Salem teens about making County-wide services more youth friendly and accessible.

MOM’S QUIET CONNECTION

In its 15th year, Moms Quit Connection still performs with the energy of a start-up. In 2016, it set records for professional and consumer education, tackled the escalating e-cigarette issue and confirmed its leadership in helping New Jersey families to live tobacco free.

Staff tripled the number of consumers attending an MCQ educational event with 4,252 total participants at 82 separate offerings. Support for the provider community was equally robust, including 80 educational sessions, 42 trainings on the Ask, Advise and Refer Intervention model (including
one at the NJ Society for Respiratory Care Conference) and 434 filled resource requests. In all, MQC directly served nearly 4,000 professionals.

E-cigarettes have become a major public health concern, especially among youth where use among high school students climbed 900% from 2011-2015. MQC responded with new educational resources, a specialized training for 348 professionals, presentations at five conferences and a customized ‘train the trainer’ program on ENDS for each of the state’s 21 County Prevention Coalitions. School and community presentations reached 1,710 youth and 277 adults.

MQC’s cessation service for pregnant women and new moms consistently demonstrated exceptionally effective outcomes with quit rates of 38.4% compared to the national average of 24%. MQC’s credibility as an effective intervention was further validated when the New Jersey Department of Health included MQC data in its Public Health Accreditation Board process and the Department of Children and Families requested MQC’s assistance to meet a new federal benchmark on tobacco cessation training for home visitation programs. In addition, MQC’s intervention training became a staff requirement for the Cancer Education and Early Detection programs that operate in every NJ county.

ELLN ZANGARO, RN

When caring for pregnant smokers, Ellen Zangaro, RN says a gentle touch is her most powerful tool. “If you are judgmental, they will never be honest with you.”

The next best instrument for the Nurse Care Coordinator at Virtua-Lumberton’s OB Clinic is the Mom’s Quit Connection program.

“I am very happy the service exists,” Ellen says. “We just don’t have the time to provide the extensive education, intervention and consultation that MQC offers.”

“"We feel confident that we are referring to a good program and are doing right by the patient,"”

—Ellen Zangaro, RN
on the maternal cessation program Moms Quit Connection

Ongoing and routine messages from clinic staff are vital. “Hearing it once is not enough if you want to change a life pattern,” Ellen said. It’s a symbiotic partnership between MQC and Virtua Lumberton’s OB Clinic with all benefits going to the patients.

“The Virtua-Lumberton OB Clinic is a real champion for smoking cessation,” said Barbara Heinz, MQC. They allow MQC staff to see patients on-site, addressing smoking in their centering program and integrating cessation into care plans, at each visit.

Ellen Zangaro, RN (R) with Lead MQC Tobacco Treatment Specialist Barbara Heinz at the Virtua-Lumberton OB Clinic.
The Bottom Line

2016

Revenue:
$11,946,416

FUNDERS

Advocates for Youth
Camden County Non-Public Schools/School Nurse Program
(full list available on request)
Centers for Disease Control and Prevention
US Department of Health and Human Services/MCH Bureau
County of Gloucester
Central NJ Visiting Nurse Association
Live Healthy Vineland
March of Dimes - NJ Chapter
Mom’s First City Cleveland
NJ Department of Children and Families
NJ Department of Health
New Jersey Success by 6
Salem Health and Wellness Foundation*
United Way of Greater Philadelphia
*awarded to SNIPC subsidiary agency Family Health Initiatives

Expenses:
$12,049,457

Camden Healthy Start purchased two high-end strollers thanks to a generous donation from local business owner, Rickey Parker, pictured with CHS Program Services Manager, Sherolde Smith. Strollers were used in a special client engagement effort.
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Atlantic County Council for Young Children
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