THE I.T. ADVANTAGE

Please, look ‘behind the scenes’ at the Cooperative’s information technology services. We encourage close examination of our data management and analysis capabilities.

Begun decades ago, the agency has built a powerful IT infrastructure through a conscious investment in the necessary expertise, equipment and fidelity to quality data. In today’s data-driven world, the agency is now well positioned.

In 2015, the IT team:

• Managed nine different databases and supported a tenth with statewide reach.

• Provided the infrastructure to support the flow of information from 58,800 perinatal health screens and 132,000 client contacts.

• Supplied manual verification of more than 10,000 health screens.

• Supported thousands of users of two statewide and two regional database systems* providing everything from resetting a password to custom report creation.

The IT team is an essential partner whose work provides critical insights that informs program design, guide resource allocation and enable meaningful evaluation measures.

*Vital Information Platform, Perinatal Risk Assessment/SPECT, Early Intervention Database and Perinatal Wellness Initiative
What’s true in architecture holds for our line of work. The higher the structure, the deeper must be its foundation. Soaring aspirations need stable foundations. Be it a skyscraper or a new perinatal system — bedrock matters.

The Cooperative understands this truth and long ago embarked on a process to build a solid infrastructure that would support growth and innovation. Strategic investments were made in technology, training and talent — essential building materials for the task. Additional fortification came from a conscientious effort to develop and sustain strong partnerships.

The wisdom of that decision is evident in the agency’s continued progress to move the region forward. 2015 was no exception as programs exceeded targets, health measures improved, services expanded and promising new strategies took root. We transformed lives, empowered families, engaged communities and strengthened the system of care.

I was reminded of the Cooperative’s leadership history recently in the NICU. Looking around I paused and just marveled at the astonishing level of technology used to support a premature baby. I then marveled upon realizing the many ways in which the Cooperative had been involved.

From system renovations to supporting an overwhelmed first-time mom, the Cooperative is dedicated to building a better tomorrow for the families of South Jersey. Its success can be traced back to a decision made decades ago to embrace the future.

Gary Stahl, MD
President of the Board
Tina

When Tina Moye joined Camden Healthy Start last summer, she was depressed and overwhelmed. The newly-single mother of three had just learned she was pregnant with her fourth child. She dropped out of college and her life started to spiral out of control. Tina says, “I thought this is just overwhelming. I can’t do this. I can’t have another baby. I just felt it was not possible and now that I look at her, it was well worth it.”

With the help of Camden Healthy Start, Tina has turned her life around. Family Support Specialist Crystal Bennett helped Tina manage her stress and improve her overall well-being. She also provided her with education, referrals and support to ensure a healthy pregnancy. Crystal accompanied Tina to prenatal appointments and referred her to WIC. She also helped her apply for food stamps, cash assistance and medical insurance. Tina says Crystal is much more than a case worker. “She’s not only a social worker, she’s like a friend.” Tina calls Crystal when she feels stressed or needs to talk to someone, and she’s always there.

Weeks after having the baby, Tina is back in school pursuing a degree in criminal justice. She wants to be a paralegal. Tina says she’s doing much better and the baby is thriving. “She’s doing well. She’s growing. Everybody loves her.”

‘No More Babies Dying in Camden’ is the powerful message of a public awareness campaign Camden Healthy Start (CHS) introduced in 2015. The message was featured on door hangers distributed throughout Camden’s neighborhoods. It appeared on flags at the transportation hub and on marketing materials promoting a series of Town Hall events. The statement’s unflinching stance resonated with the community and they responded.

Throughout the year, CHS witnessed a new willingness to get involved. More than 450 residents completed a community survey to assess knowledge and attitudes on infant mortality. Another 39 participated in one of six focus groups about health care access. Insights from these efforts strengthened program interventions and re-focused attention on system of care issues. Hundreds of Camden City women turned to CHS for the individualized assistance provided by its case management.
Camden Parents As Teachers (PAT) continues to help parents build strong relationships with their children and create solid foundations for learning. In 2015, PAT served more than 100 families including 39 new families. Staff is especially proud that 92% of eligible children had health insurance. Through PAT, parents partner with specially-trained educators to create a healthy environment for success. PAT educators work with families in their homes twice a month to monitor child development, build parenting skills and connect families with resources needed to thrive. During each visit, PAT educators promote parent-child interaction, development-centered parenting and family well-being. They also work with families to identify and achieve their goals. In 2015, PAT educators made 835 home visits with client families.

Reading is the key to lifelong learning. Camden Healthy Start hosted several literacy events at local libraries to encourage parents to read to their children.

Camden Parents As Teachers

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Parents are a child’s first and best teacher. Camden PAT hosted a series of Family Fun Time events for parents to learn together and enjoy time with their families.
Nurse Family Partnership (NFP) had a great year with important gains in client numbers and performance measures. Since 2014, completed visits jumped 31%, client numbers rose 5% and key performance goals were surpassed by 8 to 12 points.

Success is traced to implementation of a quality improvement process (Plan Do Study Act) at the beginning of the year. Staff concentrated on home visits, seeking to reduce the number of cancellations and no shows. Strategies focused on reminder frequency and timeliness, cancellation follow-up and increased use of researched-informed curriculum (PIPE and DANCE). At monthly review meetings, data reports were (and continue to be) used to assess strategies.

A core program measure is initiation of breastfeeding. Here too staff exceeded expectations. The percentage of new mothers initiating breastfeeding shot from 76% in 2014 to 92% in 2015.

NFP is an evidenced-based, home-visitation model that pairs experienced nurses with vulnerable, first-time 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.

<table>
<thead>
<tr>
<th>MEASURE</th>
<th>2014 ACTUAL</th>
<th>2015 ACTUAL</th>
<th>2015 GOAL</th>
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<tbody>
<tr>
<td>New mothers initiated breastfeeding</td>
<td>76%</td>
<td>92%</td>
<td>80%</td>
</tr>
<tr>
<td>Children up to date for immunizations</td>
<td>89%</td>
<td>96%</td>
<td>85%</td>
</tr>
<tr>
<td>Children up to date for well-child visits</td>
<td>86%</td>
<td>93%</td>
<td>85%</td>
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It was an especially good year for Nurse Family Partnership with decisive gains in core objectives. Staff exceeded performance measure targets by wide margins and those rates were substantially higher than the previous year.

WE MOVED

The agency’s Camden office relocated to a new home in 2015. Three programs are based out of the Camden City office: Camden Healthy Start, Nurse Family Partnership and Parents As Teachers. Their new home at 808 Market Street provides expanded work areas and a roomy, high-tech conference space that is perfect for client events, community meetings and trainings. Mayor of Camden Dana Redd and SNJPC Executive Director Judy Donlen received expert assistance in ribbon cutting at the Open House for the new location.
The two projects that comprise the IPO Initiative made important strides in 2015 toward expanded access and knowledgeable consumers.

The Connection (aka Central Intake)

The Connection is the public facing name of Central Intake – a centralized referral system for family support services that has proven an efficient and reliable tool for assessing need and identifying appropriate service(s).

System usage soared in 2015 with a 32% increase in referral requests. The two central intake hubs operated by the Cooperative processed a combined total of 4,724 referrals, 1,135 more than in 2014. With most requests still coming from the provider community, staff focused on encouraging direct public use. A consumer-driven advisory board was established, alliances were strengthened with existing consumer-oriented boards and a new marketing strategy was launched to better connect with target audience (pregnant women, women of childbearing age and families with children).

A Better Me

A Better Me works to raise awareness among low-income women in Camden County who are contemplating pregnancy. Informal and group education is used to encourage preventive health practices that, in turn, will contribute to good birth outcomes. In 2015, the program’s health workers and educators successfully engaged 3,200 individuals and conducted 118 health workshops, almost double the 60 workshops provided in 2014. Client contacts rose 22% to 3,300.

Two major activities boosted program visibility. A television ad featuring program staff was produced and aired throughout October. The campaign reached 70% of households in Camden County with 448,000 impressions; the average viewer was exposed to the ad nearly 4 times. A companion online commercial resulted in 262 county residents clicking through to the program’s website.

One-on-one contact with hundreds of potential clients in a single afternoon came about when A Better Me partnered with a large Camden County church for its annual community event. At least 100 of those who stopped at the program’s table were specifically interested in enrolling. The 500 child backpacks donated by A Better Me helped to further build brand recognition among the 1,000 attendees.

“I wish I knew” was theme of a 30 second commercial for A Better Me that aired in October 2015 and reached 70% of Camden County households.
It’s the little program that could. While modest in scale, the Birth to Breastfeeding Project had a big impact on improving breastfeeding among minority women in one South Jersey county. Just 24% of African American women in Atlantic County exclusively breastfeed after delivery. Among participants of the Birth to Breastfeeding program, the rate reached 96%.

The program’s goal is to increase breastfeeding exclusivity and duration among African American and underserved women in Atlantic County. It engages women with free childbirth classes, that include breastfeeding education, and then offers breastfeeding support after delivery.

Ashley & Nantysa

Ashley & Nantysa Johnson joined Birth to Breastfeeding, it was the only option for free childbirth classes in Atlantic County. Initially attracted by price, the two soon became program and breastfeeding enthusiasts.

Initially, Ashley had no plans to breastfeed. Now, her newborn is exclusively breastfed. The result of a quality program and responsive staff.

Ashley had a moment of crisis early on, “I called the program and said I can’t do this. Shortly after, a peer counselor came to my house and showed me how to latch. After that, I was fine.”

Unlike her sister, Nantysa always planned to breastfeed. “I breastfed my other kids. I just wanted to find a better way to do it longer,” says Nantysa who is expecting twins.

The Johnson sisters are grateful for the education and support provided by peer counselors and IBCLC trained staff.

“This group is a big support. I think if more people knew about it, it would help a lot more moms,” says Nantysa.
A new partnership for the Regional Perinatal Mood Disorders (RPMD) program expanded support options for South Jersey women via the internet. RPMD joined with Smart Patients and Postpartum Progress to launch a 24/7 online community forum that enables women to interact directly with each other and seek peer support. The site design also enables South Jersey users to be connected with RPMD’s postpartum wellness services.

The online option compliments the ongoing support groups that RPMD oversees. In 2015, seven support groups were operational in South Jersey offering professionally facilitated and free sessions for 160 participants.

For South Jersey providers, RPMD remains an invaluable partner for compliance with NJ law that requires screening for postpartum depression. Program services include a web-based PPD screening process, technical support, staff training, patient reports, triage and referral for at-risk patients – all at no charge.

The service uses the Edinburgh Depression Scale (EPDS) to identify PPD risk. In 2015, the 48 participating providers conducted 5,776 EPDS screens. Of that total, 738 met the criteria for assessment, triage and follow-up – marking a significant 20% increase from 2014. There was also a sharp increase in those responding positively to the question on self-harm, with 145 reported in 2014 and 201 in 2015.

The program continued to provide an array of professional and community educational offerings that included a skills building workshop for medical and behavioral professionals, EPDS trainings for home-visitation programs and mini-workshops for WIC offices.

Perinatal Addictions Prevention Program (PAPP) continues to see sustained growth in use of the Perinatal Risk Assessment (PRA) tool. An important instrument for the early identification of risk factors that contribute to poor birth outcomes. The total number of screens completed in South Jersey rose to 10,912, a 3.5% increase from 2014. Notable as it comes on top of the 4.8% jump seen between 2013 and 2014.

In addition to promoting universal adoption of the PRA tool, PAPP staff organized an ambitious educational calendar for 2015 that reached 376 professionals and 4,072 consumers – a 33% participant increase from 2014. Staff conduct programs where ever they’ll have an impact and this includes addiction treatment centers, drug courts, probation offices and juvenile detention centers.

As a recognized leader in the field of perinatal addictions, PAPP is an active partner in the major statewide and regional initiatives. For 2015, that included serving on the NJ FASD Task Force and being a core team member for the In-Depth Technical Assistance Process for Substance Exposed Infants and NAS. Among its objectives is to examine current trends and practices in order to improve the continuum of care for women with opioid and other substance use disorders.

Perinatal Mood Disorders Program, this educational brochure is being added to prenatal packets that are distributed to patients at health care locations across the region.

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PAPP partnered with another SNJPC program Perinatal Wellness Initiative on “Care Delivery: Impact on Perinatal Mood and Substance Use Disorders” the latest in the Hot Topics series for professionals in the region. Issues included stigma, trauma and effective engagement.
Early Intervention

Paula & Ryan

In one year, Paula Barakat had enrolled her son in eight different child care centers. Each had asked her to find another center citing behavior issues.

Her son’s aggressiveness was perplexing to Paula. Ryan had been developing normally, but around 14 months, he changed.

A teacher herself and familiar with child development, Paula sought help. “I was not in denial. I knew something was wrong. But all I heard was ‘it’s boys’ stuff. He’ll grow out of it.”

For a year, she struggled to find appropriate care and answers. “It was a nightmare,” she said. “I couldn’t find a school or keep a sitter. I thought I would have to quit work and home school.”

About that time, a friend recommended Early Intervention (EI). Initially unsure, Paula is now a vocal advocate. “At every transitional point, EI was there,” Paula says. “They guide you and make you feel that you are not alone in this struggle.”

Paula’s EI Service Coordinator helped find a suitable preschool and provided a practitioner with a strong behavior background for home activities. Surgery addressed long-term hearing problems affecting language and an autism diagnosis enabled more effective interventions. Also instrumental to Ryan’s progress was his mother’s conscientious employment of EI recommended strategies.

“My whole family is astounded at the transformation,” says Paula who reports Ryan is almost fully caught up after being assessed at 1 1/2yrs delayed last fall.

Ryan is once again a curious and engaging toddler. “We can communicate again,” says a proud and grateful mother.

The Barakat family profiled here is one of the 3,680 families in South Jersey who relied upon the Early Intervention (EI) Case Coordination Unit for help in 2015. EI Service Coordinators helped parents navigate the complex maze of EI services, working closely with families to establish and monitor care plans, identify and coordinate with multiple therapists, and intervene with providers on behalf of clients. Combined, these efforts support the delivery of more reliable, consistent and quality intervention.

NUMBER SPEAK

A quick read on the magnitude of the Cooperative’s impact in South Jersey and the effectiveness of its programs to empower families with the tools they need to build a healthier tomorrow. Tens of thousands received some type of direct service from the agency. The entire region benefited from system improvements engineered through Cooperative efforts.

39,992
Individuals received some type of direct service

4,691
Enrolled in a case management program
The Cooperative remains at the forefront of efforts to reduce the number of South Jersey children who are poisoned by lead. Prevention is the focus and education the tool. In 2015, project staff organized 38 different events that provided 1,022 attendees with the resources to protect against lead poisoning.

Activity picked up during Childhood Poisoning Prevention Week and staff got creative. Treat bags with lead safety messages were distributed at a Halloween Festival in Millville and the ‘Boo at the Zoo’ in Bridgeton. Special airings of a Sesame Street video were shown at immunization clinics and in kindergarten classes in Cumberland County.

Thirty-three free lead dust testing kits were distributed in 2015 to help identify risk. Of those 33 kits, 10 had positive results of which seven were at hazardous levels.

An exciting new opportunity has been participation in the national Eco-Healthy Child Care that supports child care providers in creating settings that are as environmentally healthy as possible.

Over the years the program’s focus has expanded to a more inclusive ‘healthy homes’ perspective that encompasses a wider array of issues. Funding from the Superstorm Sandy Recovery grant enabled staff to organize an ambitious educational calendar. They presented the consumer-oriented workshop “Creating a Healthy Home in the Aftermath of a Hurricane” 17 times and the full-day professional development training, “Healthy Homes for Community Health Workers”, was offered 12 times.

Membership in the Childhood Lead Poisoning Prevention Coalition held steady at approximately 25 professionals from southern regional health departments, insurance providers and community agencies who identify local needs and collaborate on solutions relative to increasing screening rates, primary prevention and professional education opportunities.

Sesame Street was an important partner in the Cooperative’s lead prevention efforts. This video was used to educate parents and children about the dangers of lead.
The 235 volunteer members of the region’s Healthy Mothers, Healthy Babies (HMHB) Coalitions made important contributions to building healthier communities in South Jersey. The Atlantic and Cape May Coalitions made sure prenatal providers in their respective counties received patient education materials on fetal movement. Lack of fetal movement had been identified as an area of concern by the Fetal and Infant Mortality Review (FIMR) team. In their capacity as FIMR Action Teams, the coalitions facilitate local implementation of FIMR recommendations designed to reduce risk and save lives.

The Atlantic Coalition (members shown above) continues to monitor the impact of the county’s economic downturn on pregnant women and young families. Members also found time to advise Central Intake on increasing the number of consumers who contact the service directly for information about family support services.

Salem and Cumberland HMHB kept their separate identities, but merged operationally for efficiency and the benefits of collaboration. Gloucester hosted a successful Healthy Fair and along with the Burlington Coalition report positive results to membership rebuilding efforts.

In 2015, the Personal Responsibility Education Program (PREP) influenced the lives of more than 280 young people with its program to encourage healthy sexual decision making. Staff brought its signature Be Proud! Be Responsible! (BPBR) curriculum to 18 groups of middle and high school students at 11 different school and community-based sites throughout South Jersey. In recognition of National Condom Day, PREP challenged students to create an educational poster promoting condom use. The artwork had to feature at least one actual condom. Students submitted 45 entries, along with 8 entries from teachers and administrative staff. The winning entry is shown on the right.

In addition to BPBR school-based activities, PREP conducted six community awareness events that focused on HIV/AIDS, condom use and healthy relationships.

A new data system launched mid-year will help streamline and bolster performance tracking. Pre, post and 3-month follow-up evaluations are now administered electronically, using tablets. The new paperless system eliminates timely data entry and gives tech savvy youth their preferred and faster means of responding.

The winning entry for a poster competition organized by PREP for National Condom Day. PREP supports various activities to improve adolescent sexual decision making including Be Proud! Be Responsible! an evidence-based curriculum endorsed by CDC as a best practice model.
Tamika

The summer of 2015 was a low point for Tamika Cortez. As a single mother with a new baby on the way and recently unemployed, she felt very alone. According to Tamika, what she really needed was a friend. That was when Dawn Ragland stepped into her life.

Tamika and Dawn’s relationship started like any other in Healthy Families (HF). Dawn would visit Tamika weekly to teach her about parenting and child development. All in an effort to prepare Tamika for when her new baby would arrive.

As time passed, Tamika found herself looking forward to her weekly visits with Dawn. For Tamika, Dawn quickly became more than just a case manager - she became part of Tamika’s social support system.

“When I was down, Dawn was there to talk to me. She was my friend.”

Tamika credits Dawn as being the driving force behind her starting her own business.

Five months later, Tamika’s business is going strong. Her baby – also 5 months old – is doing well. Tamika’s life is at a high point. HF was there to help her along the way.

Atlantic County Healthy Families (HF) exceeded target goals in several core performance measures in 2015. Two areas where the program did exceptionally well included mothers who initiated breastfeeding and the number of eligible children with health insurance. Both categories reached 100%. HF also saw improvements in its acceptance rates and visitation numbers over the previous year. The client acceptance rate increased from 79% to 82% while the number of home visits rose 2.6% to a record high of 1,906 visits.

Another notable achievement was the culmination of an arduous 18 month re-accreditation process. The program was granted re-accreditation in March 2016.

In order to better serve families, staff implemented a Continuous Quality Improvement (CQI) effort. This project led to a more streamlined approach for processing referrals, resulting in increased family enrollment. Staff is looking to apply a similar CQI effort to improve client retention numbers in 2016.

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<tr>
<th>Performance Measures</th>
<th>Goal</th>
<th>Actual</th>
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<tbody>
<tr>
<td>Up-to-date Well Baby visit</td>
<td>85</td>
<td>99</td>
</tr>
<tr>
<td>Attend post partum check-up</td>
<td>80</td>
<td>98</td>
</tr>
<tr>
<td>Children with health insurance</td>
<td>80</td>
<td>100</td>
</tr>
<tr>
<td>Pregnant participant enrolled in WIC</td>
<td>80</td>
<td>100</td>
</tr>
<tr>
<td>Eligible families enrolled in WIC</td>
<td>80</td>
<td>96</td>
</tr>
<tr>
<td>Enrolled families initiated breast feeding</td>
<td>80</td>
<td>100</td>
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Ensuring that children receive the required vaccinations is a high priority for the agency and the state. The NJ Immunization Information System (NJIIS) is central to that goal and the Cooperative’s NJIIS support team is key to systems successful and widespread adoption in South Jersey by recruiting, training and supporting users.

2015 proved to be significant with a substantial rise in participation by non-VFC providers*. An especially challenging group, staff has long fallen short of the 85% submission target. In 2014, the regional submission average for non-VFC providers was 74%. A year later, at 84%, they were just shy of the goal, but every county improved and three posted increases of 15 points and higher. Staff maintained its exceptional performance with the VFC provider group and again easily beat the 85% active submission target with four counties at 100% (Atlantic, Cape May, Gloucester and Salem). Camden County was 99% and Cumberland 93%.

In 2015, the team trained 329 users and conducted bi-monthly webinars on the new Interface Management System, implemented to facilitate the electronic movement of health-related information according to nationally recognized standards. Staff respond to a continuous stream of requests, most of which are now received via an online tracking system that routes questions to the most relevant group or individual.

Pediatric Initiatives

Pediatric Initiatives (PI) was instrumental in the success of SNJPC member hospitals to meet a state requirement that at least 90% of all newborns receive the HepB vaccine within 12 hours of birth. Throughout 2015, all but one member hospital consistently posted rates of 90% and above. A key factor in attaining high rates is the ability of hospital staff to communicate to parents the protective health benefits of the 12 hour time frame. PI staff provide one-on-one training for nurses and other hospital personnel about effective ways to approach and educate reluctant parents.

Program activities are largely determined by interests and needs of member hospitals. In 2015, Kennedy Health System requested assistance in preparing nurses for the certified pediatric nurse exam. Program staff prepared a comprehensive curriculum that was presented in 12, four-hour lectures that were conducted over a six month period for 16 participating nurses. To expand and enhance in-class training, PI staff also worked alongside participants on the floor.

When not occupied with HepB rates or certification exams, the PI staff responded to a variety of consult requests regarding pediatric floor and pediatric ER issues.

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*NFC – Vaccines for Children, a federal program that provides free vaccines for children. Non-VFC sites are private practices that do not receive free vaccines from the government.
FAMILY RESILIENCE
55 Atlantic City families enrolled in the Infant and Family Development program for education and support on positive parent-child relationships.

MORTALITY REVIEW
In the 25 cases reviewed by the Fetal and Infant Mortality Review Team, maternal weight issues remain the one factor most frequently associated with perinatal loss.

BREASTFEEDING
The Cooperative joined the Pinterest world with Breastfeeding 360, a lactation support site that posts only evidenced-based information.

DISEASE PREVENTION
Preschool staff in Vineland were trained to serve as local referral sources for chronic disease prevention programs as part of the new Strong Moms for Strong Families program.

OUTREACH
A Better Me boosted its popularity and visibility with the donation of 500 backpacks for Camden County school children.

FATHER ENGAGEMENT
Camden Healthy Start hosted its 11th Fatherhood Celebration, a community event to honor dads and the important role they play.
Vital Information Platform

New Jersey’s adoption of a new electronic birth record system was aided by FHI expertise. Throughout 2015, hospitals across the state transitioned to the Vital Information Platform (VIP). FHI staff led the training initiative for implementation, a job that included 44 webinars, management of an online training portal and regular material/training updates to reflect ongoing system improvements. For SNJPC member hospitals, enhanced VIP support services included creation of a regional users group and quick access via phone and email to tech support.

Improving Pregnancy Outcomes

FHI had a critical role in the major expansion of another statewide initiative, Improving Pregnancy Outcomes (IPO), and was responsible for key technical and operational functions. Staff launched 11 new IPO Community Health Worker programs as well as nine new Central Intake Hubs across the state. FHI provided more than 400 trainings that included regularly scheduled sessions, on-demand practice site trainings and pre-recorded and live webinars.

Perinatal Risk Assessment

Progress in data sharing between FHI and the Camden Coalition of Health Care Providers (CCHCP) improved the safety net for at-risk women. An agreement between FHI and CCHCP enables data from the Perinatal Risk Assessment (PRA) tool to be incorporated into the Camden Health Information Exchange. As a result, pregnant women hospitalized in Camden who are not receiving support, will be provided that opportunity. The system identifies eligible women and generates a direct referral for follow-up by an appropriate available program, including Camden Healthy Start Family Support Specialists. Only those in need are approached.

The other major PRA development was a decision by Horizon Health to accept only the PRA as authorization of payment for its Medicaid clients. With that, daily use of the PRA among Horizon providers jumped to 96%. Highly technical but important to quality care is the integration of PRA data as a direct link with Horizon’s utilization system, along with the twice daily update of data fields. Practitioners receive real-time patient information and analysis is greatly enhanced.

The year ended well. FHI received IRB approval to link data from NJ’s electronic birth certificate and uniform billing data with the PRA. This paves the way for predictive analysis and the ability to follow a woman all the way from prenatal care through birth.

ONLINE SUPPORT

Webinars were a primary tool the FHI staff used to train users of various statewide systems, including Vital Information Platform, Perinatal Risk Assessment /SPECT tool and Central Intake. Altogether, FHI staff provided close to 450 online and in-person educational sessions.
**Mom’s Quit Connection**

The epicenter of maternal smoking cessation in New Jersey is Mom’s Quit Connection (MQC). It is a major service provider whose expertise is in constant demand.

Health care providers have a profound influence on a patient’s decision regarding tobacco use. Accordingly, professional training is an MQC priority. In 2015, the program provided education and orientation to over 3,000 practitioners and trained 497 providers on CDC’s brief intervention model, Ask-Advise-Refer. MQC’s Provider Toolkit remained a sought after resource with 289 downloads.

Public outreach and education was equally impressive as MQC efforts engaged more than 3,200 women in smoking cessation sessions, health fairs and other community outreach events.

Each of the 915 women referred to MQC received program and self-help materials. For many this was sufficient, but about a hundred sought the more intensive support provided by case management.

An increase in self-referrals followed the addition of an online registration option on the MQC website and Facebook page. The new ‘Contact a Quit Coach’ feature proved especially successful with young mothers and pregnant women unwilling to admit their smoking to their doctor. Other recruitment efforts included two media campaigns, one regarding the dangers of secondhand smoke and the second targeting women who quit during pregnancy but resume once baby arrives. MQC delivered on a special project to increase calls from South Jersey to the NJ Quitline. The regional average of the seven southern counties rose 15.6% during the grant period.

Another notable achievement was MQC’s participation in the NJ Collaborative Improvement & Innovation Network (CoIIN) to Reduce Infant Mortality. MQC served as the lead agency for maternal smoking cessation.

**Victoria**

“My name is Victoria and I’m a non-smoker thanks to Mom’s Quit Connection.”

Soon after learning she was pregnant, Victoria made the decision to quit smoking. She knew it was the right thing to do for herself and her baby.

It was also very important to Victoria that she try to quit on her own. While aware of programs like MQC, she wanted to go it alone.

She did quit. But within a few weeks, Victoria started to worry. In order to stay quit, she might need the coaching support and other services that MQC provides.

Timing is everything, because around that time - Mom’s Quit Connection called. The program learned of Victoria’s case via a new referral system to better connect families with needed services.

An MQC Quit Coach helped Victoria identify her smoking triggers and develop strategies to overcome them. Her Quit Coach was available whenever Victoria needed extra support, usually once a week.

“We set up tips and tools for me to use when I was out with friends or family, while at work, at home, or in situations where I would normally smoke.”

With the expert assistance and support of MQC, Victoria was able to continue down the path of a smoke-free life.
The bottom line is helped by in-house production of marketing materials and social media management. In 2015, SNJPC’s communications team produced more than 120 unique marketing materials (program brochures, event flyers, resource guides and conference posters). The team also looks after 4 websites, 3 Facebook pages and a Pinterest page.
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- Karen Sharkey, RN
- Robin Taylor, RNC, BSN
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- Margaret Fernandes, MD
- Ruth Gubernick, MPH
- Jacqueline Kaari, DO
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- Gary Stahl, MD
- Patricia Suplee, PhD, RN
- John Tedeschi, MD
- Michelle Torchia, MD

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- Camden County Women’s Center
- Camden High School
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