



SOUTHERN NEW JERSEY PERINATAL COOPERATIVE  
**A WAY FORWARD**

ANNUAL REPORT 2011



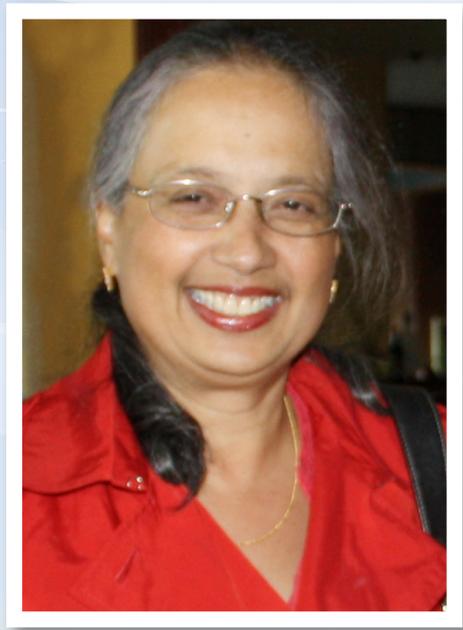
*The way forward is to keep going.*



### *A Message from the President*

Ever increasing need coupled with ever shrinking resources in a climate of uncertainty—2011 was an easy year to become discouraged. But that's not our nature.

Instead we pushed forward with the conviction of a child in a superhero cape and goggles. It can be done and we can do it. We are not stalled by unproductive distractions. Nor do we require extravagant tools. Our way forward is to operate as a team, with the utmost clarity of purpose and an unwavering commitment to excellence.



It is a mind set that works and produced impressive results in 2011.

- 2078 vulnerable families in South Jersey became healthier and more self-sufficient because of the education and support they received from a Cooperative case management program.
- 4255 health care providers improved their clinical knowledge from a Cooperative continuing education activity.
- 13,890 pregnant women were screened for high risk factors. Those at risk were connected with appropriate follow-up services.

The agency also supported important improvements to the system of care, including advancements with in-patient pediatric care, immunizations, and post-partum depression.

We sincerely thank all our supporters for making it possible to move forward and proudly present the Cooperative's 2011 accomplishments.

A handwritten signature in black ink that reads "M. Fernandes" followed by a stylized flourish.

Margaret Fernandes, MD

*Interim President*

*For a relatively modest enterprise, the Cooperative's impact in South Jersey is huge. In 2011, the agency's 20+ programs helped more than 55,000 individuals, providing the knowledge, access and empowerment for better health.*

**345** residents discovered their homes were lead-contaminated after using a free testing service provided by the Cooperative. Staff follow-up connected these families with resources to eliminate the danger and educated them on lead-safety in and out of the home.

**15,508** individual consultations on breastfeeding were provided to low-income women who relied on the support and expertise of lactation specialists to provide their newborn the 'best' milk.

**33,956** South Jerseyans attended a Cooperative educational event and found practical ways to improve their health and access local health resources.



Lead Bingo is a creative way to reach ESL populations with messages about preventing childhood lead poisoning.



Community surveys are a core component of program development, eliciting grassroots input for more effective strategies.



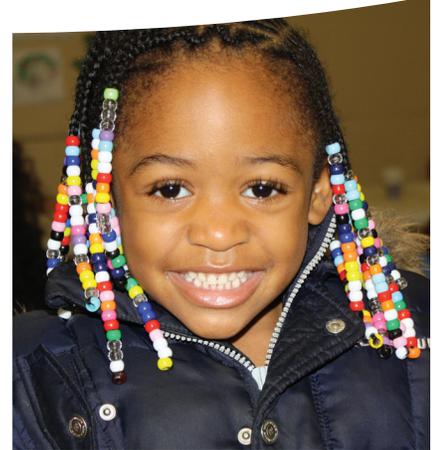
Young mothers approach parenting with greater skill and confidence because of child development classes provided by the Cooperative.

# Making a Difference

**13,893** pregnant women were screened to identify high-risk factors that if left untreated, have the potential for significant harm. Cooperative efforts identified 6364 at risk for substance use and 393 for postpartum depression.

**4,255** health care providers advanced their clinical knowledge and skills at a Cooperative sponsored training, including 1,328 who learned intervention strategies to better support their patients' efforts to stop smoking.

**2,078** families with unique challenges enrolled in a Cooperative case management program for expert guidance and support in obtaining needed health and social services. Over 1400 were families with special needs children, 103 were first-time moms in Camen City and 127 had disadvantages that placed them at risk for child neglect.



A TV documentary about postpartum depression cited the Cooperative's Postpartum Wellness Initiative as one of the most innovative programs in the US.

The Annual Fatherhood Celebration promotes the important role Dads have in a child's healthy development.

Childhood immunization rates for client children are 95-100% for Cooperative programs tracking this health measure.

# Community Power

To marshal the wisdom, creativity and passion of a community is to create a potent force for lasting change.

## Healthy Start

Camden Healthy Start, under the direction of the Camden Healthy Mothers, Healthy Babies Coalition, exemplifies a community-driven intervention to reduce infant mortality. Residents are key stakeholders in this comprehensive initiative that in 2011 kept 169 women and their 329 children on the right track with specialized case management services. This effort produced high scores in key health metrics: 94% of client children had a medical home, 91% of client babies were born at a healthy birth weight and the client infant mortality rate was zero.

## Community Coalitions

More than 350 volunteers joined a Healthy Mothers, Healthy Babies Coalition in 2011. Supported by the Cooperative, these County Coalitions facilitate local solutions for local problems. Teen pregnancy, substance abuse and access to care remained top priorities in 2011. The Atlantic County HMHB Coalition formed an Access to Services sub-committee to better address problems identified in their 2010 community survey on prenatal care. The Salem HMHB Coalition collaborated with the Salem Community College on a teen-oriented website to increase awareness of medical and mental health services. The Cumberland HMHB Coalitions focused on preventing fetal alcohol syndrome with an innovative game, The Fabulous FAS Quiz Show.

## The South Jersey Regional Childhood Lead Poison Prevention Coalition

The South Jersey Regional Childhood Lead Poisoning Prevention Coalition is a vehicle for those who want to protect children from lead. To eliminate lead hazards before children are poisoned, the Coalition helped distribute 1,761 free home-testing kits. Of the 1,038 who returned samples for analysis: 697 had no lead detected and 341 had some lead detected, of which 145 had hazardous levels. Those with any lead exposure received information about reducing the lead hazards and families with hazardous levels were contacted personally about abatement. To increase testing for lead poisoning, the Coalition provided incentives to any parent who reported their child's blood lead level. Through this effort, nine children were identified with lead levels the CDC considered 'lead poisoned'. All families whose children had elevated levels received follow-up assistance to identify and reduce lead hazards.

### Childhood Lead Poison Prevention 2011 Incentive Program Results

*Blood Lead Level (BLL) is measured by mcg/dl2.  
A child with a BLL >10 mcg/dl2 is considered lead poisoned.*

**202** test results provided

**179** children had BLLs <5

**14** children had BLLs between 5 and 9.9

**5** children had BLL between 10 and 14.9

**4** had BLL of >15.

Lead  
Poisoned  
Levels

*Children ranged in age from 5 months to 13 years,  
with 144 (71.3%) 3 years or younger.*

## Success Story: *Strong Relationship = Bright Future*

### Maris Barreto and Emanuel

Camden Healthy Start (CHS) has shown single mom Maris Barreto the way forward to a better life for herself and her two young sons, Alvaro and Emanuel.

“They opened my eyes and helped me see a different path,” Maris says about the program that has had a profound impact on her parenting as well as her education.

With the assistance of CHS she returned to school, enrolling in Camden County College to earn her GED.

Maris’s parenting style underwent a radical change under CHS tutelage. Hesitant to engage with her first born Alvaro, Maris has taken an active role with Emanuel and eagerly uses child development materials provided by CHS to boost his abilities. “I just didn’t know I could make such a difference,” Maris explains.

She is surprised by the power of such simple activities as reading together, drawing, singing and ‘being silly’. With great pride she lists Emanuel’s accomplishments, as well the positive impact on older brother Alvaro who often joins in the fun.

Perhaps the most poignant benefit of CHS for Maris includes her relationship with 2 year old Emanuel, “I have bonded with him in a way that doesn’t exist for anyone else.”



# Improving Access

Eliminating barriers that interfere with families obtaining needed health care is core to many Cooperative initiatives.

## Special Needs

For a parent whose child has developmental delays, the Early Intervention Service Coordination Unit is like having a personal superhero to battle obstacles. EI Service Coordinators helped 1454 South Jersey families obtain treatment and navigate the complex maze of services, managing regulatory, logistical and service issues so parents can focus on their child. Staff work in partnership with parents to provide and monitor individualized care plans that foster maximum results.

## Prenatal Care

Pregnancy Navigators, part of the new ACCESS program, pave the way for pregnant women to receive early and adequate prenatal care by providing individualized assistance and support. In the first 3 months of operation, 103 women were matched with a personal Navigator. A core objective is improving the percentage of women starting prenatal care early from the current 58% to the state average of 72%.

ACCESS also leverages the opportunity of pregnancy testing to educate women about reproductive health and prenatal care. More than 1200 women who had a pregnancy test done by a partner agency received information about local prenatal resources, preventive health strategies and were offered assistance in obtaining services.

## Postpartum Wellness

The unique access challenges posed by perinatal mood disorders are adeptly handled by the Postpartum Wellness Initiative. In 2011, the program ensured that nearly 400 South Jersey women at-risk-for or experiencing postpartum depression received timely and appropriate intervention - thereby improving the prognosis for a healthy baby, healthy mom and healthy mother-child relationship.

PWI offers an effective screening and referral system that includes screening devices, triage by a behavioral health clinician, treatment referrals and follow-up. The number of health care providers utilizing PWI's services grew to 41 in 2011 with the addition of four new partners. Combined, these providers conducted 3293 screens in 2011: 393 of those screened scored positive for postpartum depression, including 112 who answered 'yes' on question concerning self harm.



The Cooperative develops games to engage hard-to-reach populations in health education. The Wheel of Life was developed by the agency in 2011 as part of the ACCESS program to improve reproductive health knowledge and decision making.

## Success Story: *Improving Access*

### Melissa & Lisa Higginbotham

Two year old Melissa Higginbotham quickly deduced that when the camera was pointed at her, she was supposed to smile, or do something equally cute to entertain the strangers who came to interview her mom. Perhaps standard behavior for most toddlers, but for one with Down Syndrome, it was impressive.

Melissa's physical therapist calls her 'our star'. Her EI Service Coordinator calls her 'awesome'. Mom Lisa agrees with them all, adding that her daughter simply proves the value of early intervention.

"You can't do enough for children with special needs. You must give them every opportunity to reach their potential. And when you do, well, look at these results," says Lisa Higginbotham gesturing toward her daughter.

Melissa's success also reflects a family fully engaged in her care. The dedication of Melissa's parents and older sister Danielle have an exponential impact. "Their involvement transforms one hour of physical therapy into 80," says the family's EI Service Coordinator Lisa Hartman.

Hartman has been with the family since Melissa's first EI visit at 2 weeks. She negotiates the maze of providers and regulations to get Melissa the care she needs to thrive. Lisa Higginbotham treasures this assistance, "Just the fact of Down Syndrome is overwhelming. Having someone like Lisa is priceless," says a grateful mom.



# Stronger, Healthy Families

Education, advocacy, and compassion are essential tools to conquer the harsh challenges faced by disadvantaged families.

Some families face disadvantages that challenge their ability to provide a safe and nurturing home. Several Cooperative programs provide specially trained nurses and case managers to work one-on-one with at-risk families to build positive parent-child relationships, improve health status, and hone skills for accessing needed care. In 2011, 2078 families enrolled in one of these programs and laid the foundation for a better future.

## Infant and Family Development

The 55 families enrolled in the Infant and Family Development program during 2011 met important health goals recording no instances of neglect or abuse, 100% immunization rate for all children and only 1 unplanned pregnancy. The Nurse Family Partnership, which serves first time, low-income mothers in Camden City, provided 103 young women with the tools and support to raise a healthy child. Healthy Families/TIP exceeded performance measures for the 72 families enrolled in 2011, posting impressive results for improving access, inter-pregnancy intervals, medical homes and developmental screening.

The Cooperative sponsors dozens of free community events each year to educate parents about child health dangers and connect them with local resources. In 2011, nearly 34,000 South Jersey residents took advantage of these activities to learn best practices for protecting loved ones.

## Breastfeeding

The WIC-Breastfeeding Program made breastfeeding a reality for hundreds of low-income women in South Jersey. In 2011, staff conducted a total of 15,508 educational sessions and individual consultations for WIC clients throughout the region, providing the knowledge and support the women needed to reach their breastfeeding goals.

The agency also contributed to increasing breastfeeding rates with its involvement in a statewide training to improve breastfeeding knowledge and perceptions among all WIC personnel - from receptionist to supervisor. Cooperative staff designed the pre and post tests and analyzed the results which showed significant change, demonstrating the training's effectiveness in creating breastfeeding friendly facilities.



## Success Story: *Empowerment Through Education*

### Claudia

Claudia sits cross legged on the couch. With 8-week old Zophia nestled in one arm nursing, she tilts her head to catch the whispers of 5-year old Janna. Janna has some ideas about what to share with their visitors who are asking about the WIC Breastfeeding program.

Claudia is among hundreds of WIC clients who rely upon the program's lactation specialists to help them reach their breastfeeding goals. Claudia stands out for her fierce determination to overcome certain physical and medical complications that made breastfeeding almost impossible. In fact, with her first daughter, it was.

"I was so sad that breastfeeding didn't come to me naturally and felt so guilty that I had to give it up with Janna."

The WIC Breastfeeding program gives Claudia access to knowledgeable, available and resourceful staff. "When I hit a wall, they were there right away to help me through." The program was also able to secure a free hospital-grade breast pump that Claudia requires, but at hundreds of dollars was beyond her reach.

"The second time around is not any easier, my health problems are the same. But it is better because of the support I'm getting from the WIC Breastfeeding Program," Claudia says.

Claudia depends upon the program to help her keep a treasured promise. "Because I have a lot of medical problems, I want to give my daughter whatever I can so she will be healthy."



# *A Better System of Care*

Continuing education, technical support centers, clinical consultations—these are among the activities The Cooperative undertakes to secure system excellence and improve outcomes.

## **Immunization**

The NJ Immunization Information System may be the single best tool to ensure all NJ children are appropriately immunized. System features eliminate duplicate or late vaccinations, streamline record retrieval and provide more accurate histories. These benefits became available to hundreds more South Jersey families because of the recruitment and training efforts undertaken by the Cooperative's Registry Support Center. In 2011, the Center enrolled 58 new pediatric sites as Registry Users and trained 422 providers, a 71% and 65% increase, respectively, over the previous year. Also worth noting the high percentage (91%) in South Jersey of offices once trained that remain active Registry users.

## **Pediatric Emergencies**

South Jersey is witness to major changes in how pediatric care is delivered in hospitals. New models for in-patient and emergency room care are being implemented, propelled by economic realities and an ongoing effort to improve outcomes and reduce child anxiety. The Cooperative's Pediatric Initiative supports the efficient implementation of these new models with customized training, clinical consultation and education for its member hospitals. Shore Medical Center opened its hybrid pediatric unit in the summer of 2011 with Cooperative assistance that included on-site training for all shifts and clinical consultation ranging from layout to equipment to pacing. The Cooperative was also the catalyst for a robust sharing among hospitals of best practices and policies.

## **Professional Education**

The Cooperative made a significant contribution to raising the standard of care in South Jersey with the sponsorship of 148 Professional Education conferences and trainings that reached a combined total of 3268 perinatal and pediatric health care professionals. The agency's commitment to free and low-cost pricing was instrumental in increasing learning opportunities.

## **Smoking Cessation**

Health care providers have enormous influence in decisions about smoking. Trainings conducted by Moms Quit Connection in 2011 gave 1,268 perinatal professionals the tools to leverage this influence and improve their patient's prospect of quitting. A streamlined referral process makes it easy for providers to recommend MQC's case management services. Ongoing communication keeps providers current about a patient's progress, providing an opportunity to reinforce quit strategies. Of the 122 pregnant smokers who enrolled in MQC's case management in 2011, 70% quit or reduced the number of cigarettes smoked. To further engage providers in cessation efforts, MQC developed and distributed a Diagnostic Billing Code chart to facilitate provider reimbursement for cessation activities.

MQC's public education activities reached nearly 14,000 South Jersey residents in 2011 providing the information, motivation and tools to live tobacco-free.

## Success Story: *Provider Partnership*

### Johnnita Prince

Nurse Manager Johnnita Prince recommends Moms Quit Connection over the DIY approach for her prenatal patients trying to quit smoking. "Moms Quit has a much better track record because it teaches women about their smoking triggers and how to control them," says Prince, with the Virtua Center for Women-Lumberton. "If women don't understand those triggers, it's too easy for them to slip back to what provided comfort when stress hits."

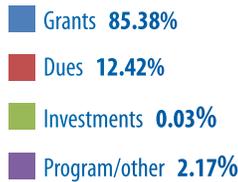
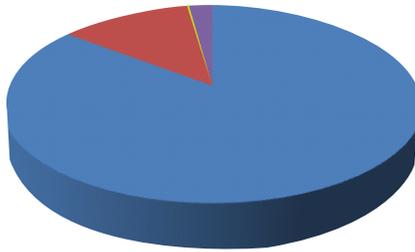
A valuable partnership has developed between the Center and MQC, with patients being the prime beneficiary. Prince is particularly impressed with how MQC staff serves at-risk populations. "The MQC team is very good communicating at a level that does not condemn certain life choices our patients have made - which is paramount when attempting to make a change."

In 2011, the Center for Women made referrals to MQC a golden objective, selected for its potential to reduce health risks for mother and baby. "We were looking for quality changes that could make a difference in patients' lives," said Prince. The year ended with an 83% referral rate and MQC fully integrated as standard practice.

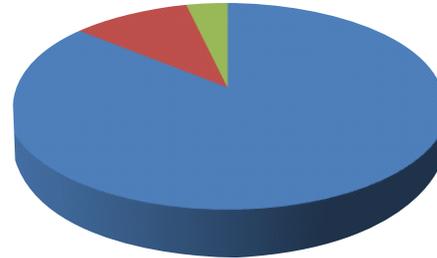


# The Bottom Line 2011

Revenue: **\$8,921,587**



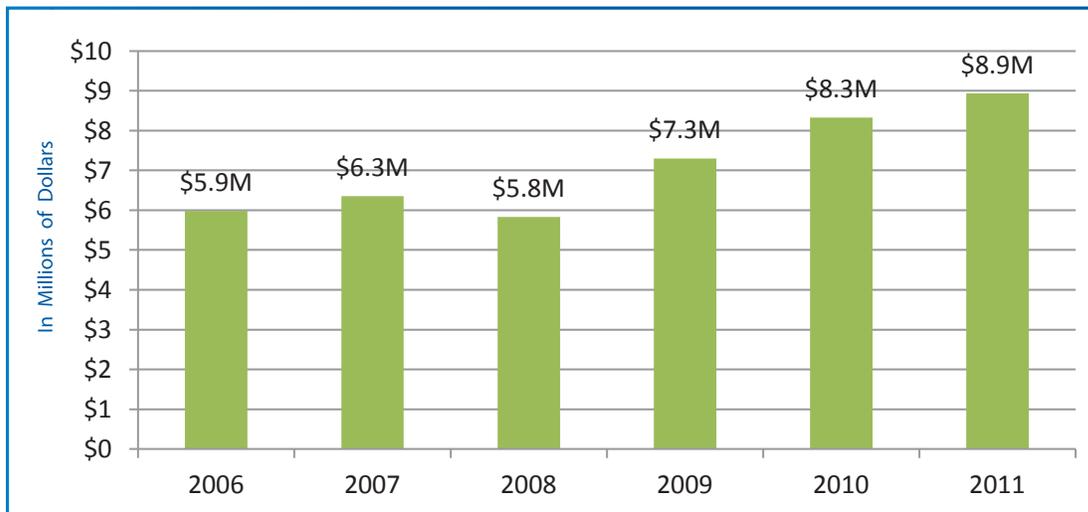
Expenses: **\$8,851,520**



## Moving in the Right Direction

The trend charts below document an agency on the move. Over the past six years, the Cooperative budget has grown 49%, reaching nearly \$9 million in 2011. The exploration of new revenue streams was productive with \$193,845 earned from consulting and data licensing fees in 2011. Ongoing efforts to reduce the portion of the budget derived from member hospitals dues have been successful, and in 2011 this portion of the budget was at an all time low of 12%.

## Cooperative Revenue 2006-2011



# Thank You

For the many and generous good deeds of our supporters—we say thanks, and thanks again.

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South Jersey Healthcare-  
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The Memorial Hospital of Salem County

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### Grants and Foundations

US Department of Health and Human  
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NJ Department of Health  
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Educational Trust of New Jersey

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### Event Support & Special Contributions

AtlantiCare Women's Health Services

Atlantic County Government

Sharon Buttress

Cuddle Me Program

Daughters of Penelope, St. Thomas Greek  
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Success By Six-  
Atlantic County United Way

Virtua Center for Women-Lumberton

Wegmans -Cherry Hill

Zelenkofske Axelrod, LLC

*How far that little candle throws his beams!*

*So shines a good deed in a weary world.*

—Wm Shakespeare

### *Programs and Services*

Atlantic County Infant and Family Development  
Camden City Healthy Mothers, Healthy Babies-Healthy Start  
Early Intervention Service Coordination  
Fetal and Infant Mortality Review Teams  
Healthy Families-TIP Atlantic County  
Healthy Mothers, Healthy Babies Coalitions of South Jersey  
Lead Education and Outreach  
Mom's Quit Connection  
Nurse Family Partnership - Camden City  
Pediatric Emergency Project  
Perinatal Addictions Prevention Project (PAPP)  
Personal Responsibility and Education Program (PREP)  
Postpartum Wellness Initiative of South Jersey  
Professional Education  
Southern New Jersey Collaborative Health Access Project  
Southern Regional Childhood  
Lead Poisoning Prevention Coalition  
Support Center-NJ Immunization Information System  
WIC Breastfeeding



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