



PRIORITY AREA: BEHAVIORAL HEALTH – MENTAL HEALTH AND SUBSTANCE ABUSE

Brief Description of Need

Behavioral health describes the connection between a person’s behaviors and the health and well-being of the body and mind. It includes strategies aimed at promoting and improving mental health, as well as strategies aimed at preventing or intervening in addictions. Broadly, community members described the prevalence of needs related to behavioral health, the links between mental health and substance abuse, the inadequacy of resources, and specific populations that are particularly at risk for behavioral health challenges.

Goal	<ul style="list-style-type: none"> • Offer a range of accessible behavioral health prevention and treatment options that fit the needs of individuals.
Objectives	<ul style="list-style-type: none"> • Increase screenings, strategies, resources, and partnerships for behavioral health needs in a variety of health care settings. • Increase the number of individuals who receive treatment for mental health and/or substance use disorder.
Strategies & Tactics	<ul style="list-style-type: none"> • Implement the Cherokee Model in additional locations to continue integrating Behavioral Health and Substance use disorder services into our Primary Care Practices. • Certify additional Primary Care Providers in Medication Assisted Therapy to treat patients struggling with opioid misuse. • Reduce opioid use across the continuum of care through our interdisciplinary Opioid task force.
Programs & Resources	<ul style="list-style-type: none"> • Expand presence of Behavioral Health Consultants (BHCs) across Primary Care Setting. • Continue to utilize Neuroflow amongst the behavioral health, OBGYN, and primary care settings. • Expand MAT services, to address Opioid Addiction, across our Primary Care locations. • Continue expansion of telemedicine and telephone crisis screening services as a delivery model. • Continue offering specialized behavioral health care to patients at our Jefferson Health LGBTQ+ Practice in Haddonfield, NJ. • Continue with the Collingswood/Oaklyn Behavioral health Grant, which brings our behavioral health clinicians into the school districts. • Continue with the inclusion of NJ QIP Program
Partners	<ul style="list-style-type: none"> • Rowan University • Camden Coalition • Neuroflow • Acenda Integrative Care • Oaks Integrative Care • Quartet



PRIORITY AREA: OBESITY

Brief Description of Need

Community members ranked obesity as a top health issue in their communities. When asked to identify health issues facing their communities, over 1/3 of all responses were directly related to obesity, the causes of obesity, and the chronic diseases that are associated with obesity. Across the Burlington, Camden, and Gloucester counties, just over half of community members identified adult obesity as an issue facing their community. Community members selected as important health issues both the causes of obesity and its consequences.

Goal	<ul style="list-style-type: none"> • Increase access to education, healthy food options, and participation in physical activity.
Objectives	<ul style="list-style-type: none"> • Provide assistance so individuals can reduce unhealthy food choices. • Increase engagement in programming that promotes a healthy lifestyle.
Strategies & Tactics	<ul style="list-style-type: none"> • Participate in the DOH evidence based Eat Healthy, Be Active program offering free education classes to the community focused on physical activity, weight management and controlling diabetes, pending renewal of the grant program. • Integrate Registered Dietitians into our Primary Care Practices to offer Medical Nutrition Therapy, Weight Management education, Comprehensive Diabetes Education, Bariatric surgery program, Insulin pump training and Medical weight loss services in conjunction with a physician. • Partner with the Food Bank of South Jersey and their Mobile Therapeutic Food Pantry program to deliver healthy food and meals to underserved patients. • Partner with Kennedy Fitness, a Jefferson Health affiliate, to offer free 30 day memberships to one of the 3 locations in South Jersey. Offer discount memberships following free trial.
Programs & Resources	<ul style="list-style-type: none"> • Registered dietitians will manage scheduled to offer additional time and services at our Primary Care locations. • RDs and ICM team will dedicate time to work with FBSJ's Mobile Therapeutic Food Pantry program. • Community and Corporate Wellness will focus on Nutrition and Healthy Lifestyle education for community events.
Partners	<ul style="list-style-type: none"> • Food Bank of South Jersey • Greater Philadelphia YMCA • Kennedy Fitness



PRIORITY AREA: ACCESSING CARE

Brief Description of Need

Community members' concerns about accessing care took several forms, including the costs of care and insurance, the time involved in getting care, difficulty navigating the health care system and treatment plans, and transportation. Lack of providers generally was not seen as a major barrier to health care. Despite this, a lack of specialists and population-specific needs made providers an important need.

Goal	<ul style="list-style-type: none"> • Offer supportive services that assist the community with achieving accessible health care.
Objectives	<ul style="list-style-type: none"> • Reduce transportation barriers for residents to receive care. • Improve navigation of health care services to link individuals to appropriate, transparent, and cost-effective care.
Strategies & Tactics	<ul style="list-style-type: none"> • Interface with community agencies to raise awareness of our primary care services. • Continue partnership with Uber Health to assist patients with transportation and accessing care. • Continue participate in the Camden Coalition's Accountable Health Communities Social Determinant of Health Screenings and add additional screening sites. • Conduct health care education seminars to improve resident understanding of navigating the health system, available sources of care, and appropriate care usage. • Conduct insurance education seminars to increase the proportion of residents who understand their health care options and are insured. • Explore the potential to expand transportation options for individuals in need of medical services through collaboration with community partners and current transportation providers • Provide New Jersey Family Care insurance enrollment and information assistance at hospital locations and in the community. • Leverage technology (texting, MyChart, Care Companion, etc.) as another mechanism to engage patients and promote participation and access to their healthcare. • Expand the scope of our Transitions of Care service to outreach high-risk community patients, including those without an identified PCP, and assisting them with engaging follow-up care post hospital discharge.
Programs & Resources	<ul style="list-style-type: none"> • Maintain our Patient Engagement Center. • Maintain our Integrated Care Management services. • Maintain our Corporate Wellness program and Service Line Presentations. • Continue of our community electronic newsletter: HealthView. • Continue efforts with our Patient Access services. • Continue Jefferson Medical Group's (JMG) effort of interdepartmental scheduling, which has been launched across all practices. • Continue our seven-day pledge commitment to ensure all patients discharged from the hospital gets a follow-up from hospital discharge with seven days. • Continue sending kits to patients through our Integrative Care Management team to help facilitate colorectal screenings via home testing. • Continue our COVID testing sites and COVID vaccination site.
Partners	<ul style="list-style-type: none"> • NJHA • Camden Coalition • Uber Health • Food Bank of South Jersey • Acenda Integrative Health



PRIORITY AREA: COMMUNICATION AND RELATIONSHIPS

Brief Description of Need

Community members reported that communication around health care was a barrier to care. Rushed or unclear communication between patients and providers left community members feeling uncertain about their diagnoses and treatment plans. Community members and stakeholders alike worried that stigma associated with identity or diagnoses impacted effective communication between patients and providers. Stakeholders worried that poor communication between agencies resulted in duplicate services and kept patients from receiving available services. Community members and stakeholders mentioned a need for better communication between health systems and the public. In many cases, despite active promotion by health systems, community members were not aware of programs and services provided by the health systems. Finally, community members and stakeholders mentioned the need to have population-specific communications strategies.

Goal	<ul style="list-style-type: none"> • Increase access to education, healthy food options, and participation in physical activity.
Objectives	<ul style="list-style-type: none"> • Improve communication between providers and patients to establish clearer patient understanding of the care plan. • Assist patients in obtaining and understanding information regarding their health care. • Improve communication between health care agencies.
Strategies & Tactics	<ul style="list-style-type: none"> • Continue with our Direct Primary Care model to offer comprehensive, concierge-type medical services to patients. • Continue our Integrated Care Management model to offer additional patient support and communication, and help with care plans, medication, objectives and treatment instructions. Continue work with our Patient Education and Engagement Committee focused on developing materials that keep appropriate health literacy in mind. • Continue to onboard bi-lingual providers and support staff who can directly communicate to patients they serve. • Implement Epic as our new medical record that will facilitate instant communication between the inpatient and outpatient settings and offer an enhanced patient portal delivering information to patients. • Continue encouraging patients to sign up for MyChart, which is our online healthcare portal for easy access to scheduling appointments, receiving test results, and communication with providers. • Continue to adhere to the Transparency Act
Programs & Resources	<ul style="list-style-type: none"> • Epic/IS&T Department. • Regional Administration oversight of Direct Primary Care Implementation. • Maintain contracts and agreements with multiple translation services companies. • Maintain PEEC practices.
Partners	<ul style="list-style-type: none"> • Phoenix Translation Services • Language Line Services