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Co-location of Services in South Jersey

Meeting the Community Where They Are

About the Walter Rand Institute

The Senator Walter Rand Institute for Public Affairs (WRI) at Rutgers–Camden has been a long-standing and trusted regional community partner for over 25 years. WRI honors former Senator Rand’s dedication to Southern New Jersey and exists to produce and highlight community-focused research and evaluation leading to sound public policy and practice in the region. With that as a foundation, WRI convenes and engages stakeholders in making the connections across research, policy, and practice in support of Camden City and Southern New Jersey residents. Using social science research methods, WRI specializes in transforming data into actionable information across a variety of areas, including workforce development, education, transportation, and public/population health. WRI reinforces and amplifies Rutgers’ research, teaching, and service goals by connecting the multidisciplinary expertise of faculty to regional problems, developing research and professional skills in students, and linking the resources of higher education to communities in Southern New Jersey.

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Introduction and Overview of Co-locating Services

Across Southern New Jersey and beyond, the co-location of services has emerged as a model for delivering comprehensive support to individuals and communities. Institutions, social service agencies, and health care providers have embraced co-located service centers, recognizing their potential to streamline access, foster collaboration, and improve outcomes.

Co-located services – sometimes known as navigation centers, community hubs, or resource centers – are centralized locations where individuals can access a wide range of supports, from health care and housing assistance to case management and referrals. Co-located services often offer case management¹ and/or wraparound services² at their centers for their focus areas (e.g., social assistance sign-up, health care, housing vouchers). These centers operate in diverse settings, including schools, hospitals, faith-based institutions, transit hubs, and community organizations, and they serve both the general public and targeted populations such as older adults, youth, individuals returning home from incarceration, and individuals with substance use disorders.

Drawing on WRI's research and partnerships, this brief highlights the insights we've gained around co-location of services from different research projects and its potential to strengthen service delivery across South Jersey. Throughout our work, we hear from partners and community members about the value of existing co-located services and the growing desire for more. Our goal is to inform ongoing conversations and planning efforts around service integration and centralizing resources, and to support the development of accessible, coordinated, and responsive systems of care for communities in South Jersey.



Background and Prior Research on Co-located Service Models

A growing body of research underscores the value of co-located service models in improving outcomes for individuals and communities. Co-location refers to the strategic placement of multiple service providers, often across sectors such as health, social services, housing, and behavioral health, within a shared physical space. This model is increasingly recognized for its ability to deliver more integrated, person-centered care.

Studies have shown that co-located programs enhance service delivery by reducing fragmentation and enabling providers to offer holistic, responsive support tailored to individual needs (Baskin et al., 2023; Kilbourne et al., 2011). When services are physically close, providers can collaborate in real-time, share insights, and coordinate care more effectively. This leads to improved experiences and outcomes, particularly for individuals navigating complex systems or facing multiple challenges.

Importantly, co-location also helps to lower both logistical and psychological barriers to accessing care. By bringing services together in one place, people are spared the burden of traveling between multiple locations, managing separate appointments, and retelling their stories repeatedly (Bonciani et al., 2018; Gillespie, 2025). This streamlined approach fosters trust and dignity, as people feel seen, respected, and supported in environments designed to be welcoming and inclusive.

Embedding services in community-based settings – such as libraries, schools, or neighborhood hubs – further amplifies these benefits. Such environments help normalize help-seeking behaviors and reduce the stigma often associated with accessing mental health or social services (Baskin et al., 2023). When services are located in familiar spaces, individuals may be more likely to engage, especially for underserved populations.



From a systems perspective, co-location facilitates stronger inter-agency coordination. It enables data sharing, reduces duplication of efforts, and promotes more efficient use of resources (Bogle et al., 2019; Vest et al., 2018). These operational efficiencies not only improve service quality but also support sustainability and scalability of programs.

Taken together, the literature suggests that co-located service models are a promising strategy for improving access and delivering care that is both compassionate and effective. highlight the role of co-located services across our region. This brief highlights three projects that share what we have learned about the applications and benefits of co-location.

Insights from WRI Research Projects: Co-location in Practice

WRI engages in multiple research collaborations that highlight the role of co-located services across our region. This brief highlights three projects that share what we have learned about the applications and benefits of co-location.

Camden Food Security Collective (CFSC)'s Community Hubs Pilot Program

Food insecurity and related social needs (e.g., housing and transportation) are complex challenges that require thoughtful solutions. The [Camden Food Security Collective \(CFSC\)](#), supported by Food Bank of South Jersey, is a coordinated community that fosters food security through structural equity and seeks to engage a broad set of stakeholders to address the upstream causes of food security in Camden City and Camden County.

Community Hubs Pilot Program

In 2023, the Community Hubs Working Group developed the Community Hubs Pilot Program to bring services directly to community locations in Camden City. The Hubs Pilot co-located services from the Food Trust and the Camden Coalition of Healthcare Providers at three Healthy Corner Stores (Litwin Market, Riverfront Supermarket, Alex's Grocery Store) and Cathedral Kitchen to improve access to food and social service assistance. The Camden Coalition had two Community Health Workers (CHWs) at pilot sites to identify and enroll eligible community members into Horizon's Neighbors in Health Program and link community members to a range of social services.

As part of our evaluation, we facilitated focus groups with 60 community members and 9 Community Hubs staff. We also collected pilot program de-identified participant data from a goal planning database, My Resource Pal.

Takeaways from the Community Hubs Pilot highlighted how the co-location of services helped bring resources directly to community members, including improving access to housing, food, transportation, and documentation. Community members were able to access fresh, healthy foods and be linked to a range of services related to complex social needs, all at one location (e.g., ID documents, housing vouchers, government assistance applications).

Camden Food Security Collective (CFSC)'s Community Hubs Pilot Program



WRI is CFSC's research partner, meeting with partners from over a dozen social service agencies across Camden to develop strategies for increasing access to healthy food options across 11 CFSC hubs. WRI supports the development of research goals, evaluation of initiatives, and tracking shared metrics.



“I met this young lady at Cathedral Kitchen. She had recently had a house fire and she has three kids... I was able to connect her to a landlord given to us by another member of our team from another department. We met the landlord and as of two weeks ago she moved into her new home. So, little by little, she’s getting there... She had just moved into her new home and she didn’t have any furniture so we were able to provide her a bed and a mattress and a couple of other bedding items. She was completely happy about it and when she came she saw us and gave us a hug.” - Hubs Staff Member

Additionally, the four locations that these hubs utilized were trusted by community members, which was key to engagement during this pilot. The Community Hubs Pilot represented a successful endeavor of repurposing existing community tools and resources to better serve community members. Community Hubs pilot staff noted several strengths in the implementation of the pilot. Communication and compassion were noted as key across all of the partners (e.g., Camden Coalition, Food Trust, and Cathedral Kitchen).

Our findings showed there was good collaboration and communication among Hubs staff, especially after overcoming some early hurdles and challenges implementing the new initiative. As the Community Hubs pilot continued, effective workflow strategies and communications developed over time that enabled participants to receive services. Furthermore, people we spoke with highlighted how local corner store owners were supportive of the Community Hubs pilot and the services provided to their customers, leading to additional positive outcomes for program participants.

The Community Hubs pilot serves as a model for future efforts to make services more easily accessible and equitable – especially as co-located services continue to expand within the CFSC initiative. For example, Wholesome Riches (Camden City nonprofit) will be creating two Food Access Hubs at a local school and nonprofit in Camden City, offering weekly food distribution, Medicare navigation, and wraparound services. Additionally, the Rutgers University Cooperative Extension will deliver monthly nutrition education and culturally relevant food distributions at 11 CFSC hubs, aiming to improve long-term dietary habits. Additionally, [Cooper University Health Care will also place a Community Health Worker \(CHW\) at eight corner stores](#) to provide real-time support for food, housing, and health needs.



New Jersey State Library's Social Work Informed Library Services in New Jersey Pilot Program



WRI partnered with the NJ State Library to evaluate the impact of this initiative and identifying recommendations. The integration of social workers within libraries is an approach aimed at improving community services and supporting vulnerable populations more effectively.

Learn more about WRI's work on this collaboration:

[Click here](#)

New Jersey State Library's Social Work Informed Library Services in New Jersey (SWILIBS-NJ) Pilot Program

Libraries often encounter patrons with complex social needs, making them ideal locations for social service connections. Social workers can provide counseling and serve as bridges to health care, social services, and government programs. Integrating social workers into libraries is a way to reach community members where they are.

From September 2023 to May 2024, the [New Jersey State Library](#) piloted the Social Work Informed Library Services in New Jersey (SWILIBS-NJ), [a program incorporating social work-informed library services in 11 libraries in Middlesex, Monmouth, and Somerset Counties](#). WRI partnered with the New Jersey State Library to understand the benefits of the program, identify barriers to program development, and assess its applicability in Southern New Jersey. We gathered information from librarians, social work supervisors, social work interns, and community members. We also spoke with eight Southern New Jersey librarians to gauge interest in implementing the SWILIBS-NJ program in Southern New Jersey libraries.

Our findings showed how the co-location of social work support within local libraries improved access to social services and supported the libraries' role as welcoming community spaces. The interactions between patrons and social workers were mostly positive, with social workers playing a key role in helping patrons navigate complex support systems. Social workers provided vital resources and support to community members in need, sharing lists of local shelters for showers and clothes, providing assistance for patrons seeking housing, offering guidance on applying for government benefits, and aiding in obtaining ID cards.

During the pilot, social workers collaborated with local organizations such as Catholic Charities and Jewish Family Services to connect individuals to direct services. They collaborated with the One-Stop Career Center to provide unemployment services and resume-building workshops. Social workers created resource guides and led library programming, such as stress relief events and caregiver activities. As one social worker commented, "the whole goal is to connect people with the right things or provide access to things. And in that way, I think we're already doing it." The program's overall positive reception highlights the value of co-locating social workers in libraries, where they can offer critical support in a familiar and accessible setting.

Our findings suggest that expanding this program to co-locate social work assistance within libraries could be highly valuable for libraries in Southern New Jersey. The Southern New Jersey librarians we spoke with expressed a strong interest in integrating social workers to better support patrons with complex social needs.

“We had initially looked into having the interns, but Rutgers didn’t go South far enough. I know our staff are interested in it because we are all very caring, we do know that we have people who are unhoused and/or with other issues that come into our libraries.” - SNJ Library Staff

“I just feel like because we’re an open public building, and you know, we get a lot of people from all walks of life... it would be nice to have someone that you could direct them to that might be better suited to give them advice or help them find resources...they [social workers] might be better equipped to connect them to the appropriate resources...we have patrons that are older and they might need help connecting to things like grief or help connecting to find resources for their circumstances, or maybe someone is potentially having a mental health crisis, or maybe someone is experiencing homelessness and could use some direction or systems.” - SNJ Library Staff

Social workers could rotate library locations, increasing program coverage across multiple spaces. Embedding social services where people already go to use the internet, charge a phone, or attend an event offers an opportunity to reach community members in an accessible, public, and familiar place.

The SWILIBS-NJ Pilot Program showed that social workers can enhance library services by providing targeted support, crisis intervention, and connections to vital resources. The need for these services is clear as multiple counties have instituted similar programs – with [social workers in Camden County libraries](#), [community resource navigators stationed in Burlington County libraries](#), and social workers in Cumberland County and Atlantic City libraries supporting the [Fresh Start program](#) for people returning home from incarceration. These programs further the scope and impact of co-located service delivery in our region.



Camden Coalition of Healthcare Providers Medical-Legal Partnership at the Cooper Center for Healing

Legal issues can present significant barriers to health and recovery, particularly for people with complex health and social needs. To address this challenge, the [Camden Coalition of Healthcare Providers \(Camden Coalition\)](#) and Rutgers Law School launched a Medical-Legal Partnership (MLP) at Cooper University Health Care's Cooper Center for Healing, integrating legal services into healthcare settings to better serve community members involved in the Camden Coalition's complex care interventions. [Medical-legal partnerships \(MLPs\)](#) represent a transformative approach to addressing the complex challenges faced by individuals with substance use disorders.

The Camden Coalition's Medical-Legal Partnership shares building space with the Cooper Center for Healing. This collaboration facilitates seamless data sharing and referrals between the organizations. When healthcare providers at the Cooper Center for Healing, an addictions medicine clinic, identify potential legal issues during patient appointments, they can directly refer patients to the Camden Coalition MLP legal staff. All patients receiving treatment at Cooper Center for Healing, typically for substance use disorder or other mental/ behavioral health conditions, are eligible for MLP services. Following referral, attorneys meet with patients, who become MLP participants, to assess their legal needs and develop collaborative action plans. MLP attorneys also partner with Cooper Center for Healing patient navigators to assist MLP participants with court-related paperwork and administrative processes (e.g. filing for social assistance, receiving a temporary restraining order, attending court with individuals).

WRI partnered with the Camden Coalition and Cooper Center for Healing to understand how MLP patients were being served and how their legal needs were being met.

Our findings showed that 60.9% of participants successfully resolved at least one critical legal issue, demonstrating the program's tangible impact on participants' lives. Additionally, 70.6% of participants reported feeling genuinely heard and supported, 67.6% felt actively involved in decision-making processes, and 70.6% acknowledged effective advocacy on their behalf.

Our findings showed that this co-location, with daily attorney presence on clinical floors, increased trust between patients and providers and enhanced patient access to care.

Camden Coalition's Medical-Legal Partnership at the Cooper Center for Healing



The Camden Coalition's Medical-Legal Partnership (MLP) integrates attorneys into healthcare settings to resolve needs that can undermine a patient's health and wellbeing and can be better met through the legal system. WRI's evaluation aimed to understand how the MLP is operating and serving the needs of its population.

Learn more about WRI's work on this collaboration:

[Click here](#)

“I think what we have downstairs with in-person is special is because we’re there every day. We actually get to physically go down there and meet in the clinic. And when they realize what we’re doing and that we’re actually helping their patients, we become embedded in their team.” - MLP Staff Member

“We feel like there has to be that presence in order to generate familiarity. Familiarity between the staff and the attorneys and with the [MLP participants] and the attorney. So I think that’s a key component, is being integrated not just theoretically, but actually the physical co-connection.” - MLP Staff Member

“The co-location is beautiful here. And I know all programs won’t be able to do that. But the fact that, you know, our lawyer can come downstairs, round, they see [their] face, they know who [they] are.” - MLP Staff Member

The physical co-location of the two organizations bolsters trust between the health care provider/attorney and the patient, reduces transportation barriers, and streamlines the process of working with multiple organizations across related social needs. Patients can meet with multiple health care providers on one floor of the building and then can see their attorney to discuss their legal situations within the same visit.

Findings from our work revealed how the MLP offers comprehensive legal support, provides innovative co-location with Cooper Center for Healing, uses a person-centered approach, and emphasizes participant dignity. The MLP and Center for Healing are truly a one-stop shop for people, leading to positive progress and patient empowerment.



Additional Co-Location Examples across New Jersey



Our work across Southern New Jersey connects us to dozens of programs and collaborations – below are a few other examples of what we’ve learned about co-located services:

Family Success Centers. Another example of integrated service delivery is the network of [Family Success Centers \(FSCs\)](#), supported by the New Jersey Department of Children and Families. These centers serve as community-based hubs that promote family well-being and strengthen protective factors that contribute to healthier communities. By offering services such as parenting support, employment assistance, housing referrals, and access to health and behavioral health resources, FSCs address many of the social determinants of health that influence overall community health outcomes. Their co-located, no-cost services reduce barriers to care and help families access the support they need in a welcoming environment – especially in areas where access to traditional health infrastructure may be limited.

Streamlining health care service delivery. Data from our [Community Health Needs Assessment work with Inspira Health](#) and [AtlantiCare](#) suggested ways to create partnerships and meet people where they are for health and social needs programming. Community members highlighted collaborations between different healthcare providers such as Inspira Health, Acenda Integrated Health, Gateway Community Action partnership, multiple nonprofits, and local and county departments of health, among others, as essential to increasing community health – especially because these local organizations understand the challenges that come along with being in Southern New Jersey. Others shared how Inspira Health partners with local churches to screen for and connect with oncology patients directly on parish grounds.

In addition to bringing resources to existing centers to expand service offerings within a single location, some health care organizations are already working on one-stop centers to streamline service delivery.

“We tried to rebrand and come out as [name] health network, meaning that we have everything under one roof, which we do... We have all of our services. We have our own pharmacies in our buildings. We have LabCorp where you can get your labs drawn. We have dental, everything under one roof, so you don’t have to go anywhere. We’re a doctor’s office that’s supersized...” – Health Network Stakeholder

Other examples of co-located medical services in our region include the AtlantiCare Other examples of co-located medical services in our region include the AtlantiCare HealthPlex and CompleteCare Health Network (CCHN). The main AtlantiCare HealthPlex in Atlantic City offers comprehensive health services in one building. Health services include primary care services, maternal and fetal medicine, pediatrics, a pharmacy, physical therapy, and rehabilitation services. Multiple other community-focused programs (e.g., the AtlantiCare Mobile Market) occur onsite at the HealthPlex, offering a one-stop shop for residents to obtain health care and meet other social needs.



CCHN offers medical services that prioritize individualized care and support across multiple locations in Cape May, Cumberland, and Gloucester counties. CCHN provides primary care, specialists in women’s and men’s health, and dental care. CCHN also offers care management services for patients who have or are at high risk for chronic illness or disease, a low-cost pharmacy program, health education classes, vaccinations, and on-site lab services.

Co-location at transit centers. Multiple examples from our transportation-related research projects (e.g., [Outlining the Transportation Priorities & Recommendations of Communities in Camden County](#) and [Transportation Accessibility in Southern New Jersey: Barriers, Effects, and Considerations](#)) spoke to the benefits of community hubs or resource centers being on or near public transportation routes. Community members could receive services (e.g., apply for government assistance, receive a haircut or dental checkup, etc.) before making their way to another transit destination, or stopping to meet a need on their commute to and from work. For example, the [Hackensack Meridian Health Health & Wellness Center](#) at the Metropark transit hub in Woodbridge, NJ, is designed to bring essential health services and specialists directly into the community. Strategically located at a major public transportation hub, the center ensures convenient access for residents who rely on transit, making it easier to receive care. This model demonstrates how co-locating services near transit centers can meet community needs by reducing barriers to access.

NJ Transit’s recently unveiled [LAND Plan \(Leveraging Assets for Non-farebox Dollars\)](#) further reinforces the value of co-location. The plan outlines a strategy to generate up to \$1.9 billion in non-fare revenue over 30 years by developing NJ Transit’s 8,000-acre real estate portfolio into mixed-use, transit-oriented hubs. These developments, like the Metropark project featuring residential units, retail, and the Hackensack Meridian Health headquarters, are designed to create walkable communities centered around transit access.



Using multi-service mobile units and outreach days to meet people where they are. Data from our work with the Burlington and Cumberland Overdose Fatality Review Teams (OFRTs) and the Burlington County Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP), which address substance use, have highlighted how programs operate one-stop mobile units to bring resources to people within communities.

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The COSSUP Operation Helping Hand program and the program's Hope One Mobile Unit, for example, coordinates outreach days when peer recovery specialists and law enforcement co-locate a range of services (e.g., food distribution, toiletry bags, STD and HIV testing, etc.) at an accessible public location (e.g., Walmart parking lot). A dozen or so social service and government entities bring resources and information to these events, directly infusing local communities with connections to service and basic needs.

Other programs we've connected with during our work engage in similar practices. The Inspira [Food Farmacy](#) and [AtlantiCare Mobile Market](#) drop off fresh groceries and meal kits to increase access to food. The [Cooper Center for Healing Mobile Unit](#) and the [Camden County Department of Health](#) mobile vans travel to multiple locations, including community hub sites for the Camden Food Security Collective, to provide screening, vaccinations, and other health services. The Burlington County Hope One Mobile Unit and the [Cumberland County Recovery on Wheels](#) initiatives connect community members to Peer Recovery Specialists to navigate substance use treatment options, provide access to clinician provide toiletry kits, vaccinations and STI and HIV testing, and other health screenings, and offer safe needle disposal.

In addition to creating and supporting one-stop centers, using mobile units or rotating clinics to bring additional services to existing social service locations or resource fairs – such as bringing food distributions to a housing shelter, substance use resources to a hotel, or a dental clinic to a nearby school – can enhance available services and reach more community members at a single location. These initiatives are ways that co-locating service delivery can occur between multiple organizations at a central, even if temporary, location.



Co-location Needs in Southern New Jersey

Research conducted by WRI – including Community Health Needs Assessments (CHNAs) for [Inspira Health](#) and [AtlantiCare](#), our evaluation of the [Strengthening Families Initiative](#), and our work around [workforce](#) and [transportation](#) barriers and opportunities – has highlighted challenges around accessing essential services such as childcare, health care, employment, and social supports. These barriers are often exacerbated in rural areas, where residents may need to travel long distances to reach providers, and where public transit options are scarce or nonexistent.

Our research has also highlighted the benefits of co-locating services. Centralizing access to services through co-located models could improve outcomes for individuals and families across the region. By bringing multiple services together in one physical location – whether in schools, medical centers, faith-based institutions, or community hubs – co-location can reduce travel time and costs, streamline referrals, and enhance the delivery of wraparound services. These centers can offer holistic care that spans physical health, mental health, dental care, food access, housing support, and educational resources. Co-located service models offer integrated, accessible, and person-centered care that can support diverse populations – including older adults, youth, and individuals with complex health or social needs.



Recent and Upcoming Co-location Initiatives Across the Region

There are multiple opportunities across Southern New Jersey to increase collaborations and support access to transportation, housing, employment, food, and other basic needs. Many initiatives across the region have capitalized on these opportunities and are currently operating, or planning to unveil, co-located services that will build on progress.

[Camden County Multi-Agency Center \(MAC\)](#) – The MAC is set to open in Camden City in 2026, providing an all-encompassing center and housing complex for people with substance use challenges or those experiencing homelessness. The Center will have five offices that government agencies and nonprofit service providers will share to meet with those in need of assistance. The project also plans to include multiple showers, a laundry room, a nurse’s office, and a warming kitchen that will offer meals.

[Food Bank of South Jersey’s \(FBSJ\) Center for Health, Wellness, and Nutrition](#) - In June 2025, the FBSJ received a gift from Campbell’s to support the Center for Health, Wellness, and Nutrition – a dynamic space designed to expand access to nutritious food, advance health equity, and provide hands-on education and wellness programs across South Jersey. The Center will provide a nutrition education teaching kitchen, SNAP outreach, and community learning space. This center will serve community members across Burlington, Camden, Gloucester, and Salem counties.

[Oliver Station Health and Housing Complex](#) – In Summer 2025, Virtua and The Michaels unveiled a dual apartment and healthcare facility in Camden City, Oliver Station. The facility has apartments that sit atop a 5,200-square-foot Virtua primary care office with 10 examination rooms that will be staffed by Virtua physicians and other medical personnel. Apartments above the Virtua facilities are restricted to residents aged 55 and older and will provide easy access to health care appointments and continual care.



Takeaways and Future Directions

Co-located social service and health care delivery has operated at institutions in our region for years. Through our research, we heard a lot about combining, co-locating, cross-utilizing, and sharing services. The goal of this research brief was to share what we have learned about co-location and what the benefits of co-location may be from the research partnerships we've engaged in. The lessons we've gleaned from the CFSC and Community Hubs Pilot Program, the SWILIBS-NJ Pilot Program, the MLP at Cooper Center for Healing, and various other collaborations speak to the flexible operations and impactful service delivery that co-located programs can offer. This brief adds to existing information on available co-located services in Southern New Jersey and can support future conversations about co-located services that meet residents where they are and deliver services in effective and respectful ways. Takeaways from our work highlight how co-location overall is rooted in how we can best deliver health and social services to address complex health and social needs, ultimately improving social determinants of health in our local communities.

WRI aims to pursue more research into this topic, partnering with other organizations across our region to assess potential co-location programs and/or evaluate existing initiatives. Engaging in additional research can foster collaborations between organizations that are interested in the co-location of services and understand how service delivery can meet community needs and/or be improved or better tailor to those needs.

To learn more about WRI Research, see the Appendix and visit our website at rand.camden.rutgers.edu.

Appendix

[Offering Holistic Support: Findings from the Camden Coalition’s Medical-Legal Partnership](#)
(April 2025)

[Inspira Health Community Health Needs Assessment 2025-2027](#) (April 2025)

[Outlining the Transportation Priorities & Recommendations of Communities in Camden County](#)
(December 2024)

[The Intersection of Social Work and Libraries: A Southern New Jersey Perspective for Expansion](#)
(2024)

[Transportation Accessibility in Southern New Jersey: Barriers, Effects, and Considerations](#)
(2023)

[AtlantiCare Community Health Needs Assessment 2022-2024](#) (2022)

[Evaluation of Pascale Sykes’ South Jersey Strengthening Families Initiative](#) (2022)

And more!

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