



Bridge Plan
2017-2019

Background

The Lowell Community Health Center (Lowell CHC) has been providing high quality, affordable health care services since 1970. With a focus on culturally appropriate care, Lowell CHC has continued to position itself to meet the evolving health care needs of the local community, always looking to provide services which empower patients to maximize their overall well-being.

Following the opening of the new facility in December 2012, Lowell CHC embarked on a six-month strategic planning process which engaged patients, staff and the broader community, culminating in the 2014-2017 Strategic Plan: Making Our House a Home. This plan supported the health center as it navigated numerous internal and external challenges, allowing for the following key achievements, among others:

- Achieved Level III Patient Centered Medical Home recognition
- Expanded access for primary care, accommodating 20,000 new patients and increasing visits by 21%
- Launched a 340B pharmacy, providing accessible and financially solvent services
- Secured funding for and integrated behavioral health (BH) services into both pediatric and adult medicine, increasing BH visits by 29%
- Established the Interpreter Services Department providing support to our patients whose preferred language is other than English and those who communicate using American Sign Language
- Obtained funding and expanded services for HIV care, office based opioid addiction treatment, asthma and civic engagement
- Launched onsite mammography, radiology, expanded lab and ultrasound services in partnership with Lowell General Hospital
- Restructured leadership, focusing on organizational roles and responsibilities
- Designed careers ladders for key roles (nurses, medical assistants and community health workers) and developed and implemented a two-part leadership development program
- Began expansion of specialty services, culminating in business plans for service expansion in 101 Jackson St.

Additionally, the plan provided critical focus during the transition of the previous Chief Executive Officer, Dorcas Grigg-Saito, who served the community of Lowell for over 20 years. Susan West Levine joined the organization as the new Chief Executive Officer in July of 2016.

In addition to the leadership transition, attention has been needed for service expansion and government payment restructuring. Lowell CHC committed to an expanded facility at 101 Jackson Street, allowing for additional primary care, specialty, dental and vision services. Concurrently, MassHealth negotiated a payment reform process with Centers for Medicare and Medicaid Services, and will be launching an accountable care payment methodology, requiring the organization to accept risk-based reimbursement with quality incentives. A re-engineering of clinical and administrative systems is necessary for successful patient management when they become effective in early 2018.

These are major organizational challenges, requiring focus, resources and leadership direction. And these will be managed in a period of great uncertainty. The new federal administration has raised the prospect of “repeal and replace” of the Affordable Care Act, along with other potential health care policy and financing changes. The specifics and implications of these changes are still forthcoming.

The leadership transition, operational expansion and re-engineering, and the uncertain policy climate necessitated the development of the Bridge Plan, a two year strategic plan focused on key priorities through FY 19. Once the plan is complete, a new Strategic Planning process would run concurrent with the implementation of the work defined in the Bridge. This sequence is illustrated on the next page.

Timeline

Jan 2014-Dec 2016	Jan-June 2017	July 2017	June 2018	Sept 2019	Oct 2019-Sept 2022
Calander Year (CY) 2014-2017 Strategic Plan (SP)					
	Bridge Plan (BP) Developed	BP Implemented			
			Fiscal Year (FY) 2020- 2022 SP Developed	BP & SP Alignment	FY 2020-2022 SP Implemented

Process & Priorities

The planning process began with the formation of a Strategic Planning committee and the engagement of the Jericho Road Project to facilitate the process. Committee members were chosen from the Board and Staff and included the following:

Board Members

Susan Beaton
Sheryl Bourbeau
Bruce Robinson, Board Chair

Staff

Susan West Levine
Jeremy Diaz, RN
Robert Ebersole
Clare Gunther
Elizabeth Hale, RN

Donald Miller, MD
Henry Och
Sheila Och
Linda Sopheap Sou
Olga Vilanova

The committee met regularly from March-June 2017 and worked under this defined Strategic Aim: The Committee will develop a planning tool to prioritize and address Lowell CHC transformation efforts through FY 19 as we undertake a robust, stakeholder-engaged strategic planning process. This Bridge Plan will align the annual operating plan with transformational priorities while maintaining efforts on key elements of success: excellent quality of care and patient experience, staff engagement and ongoing communication.

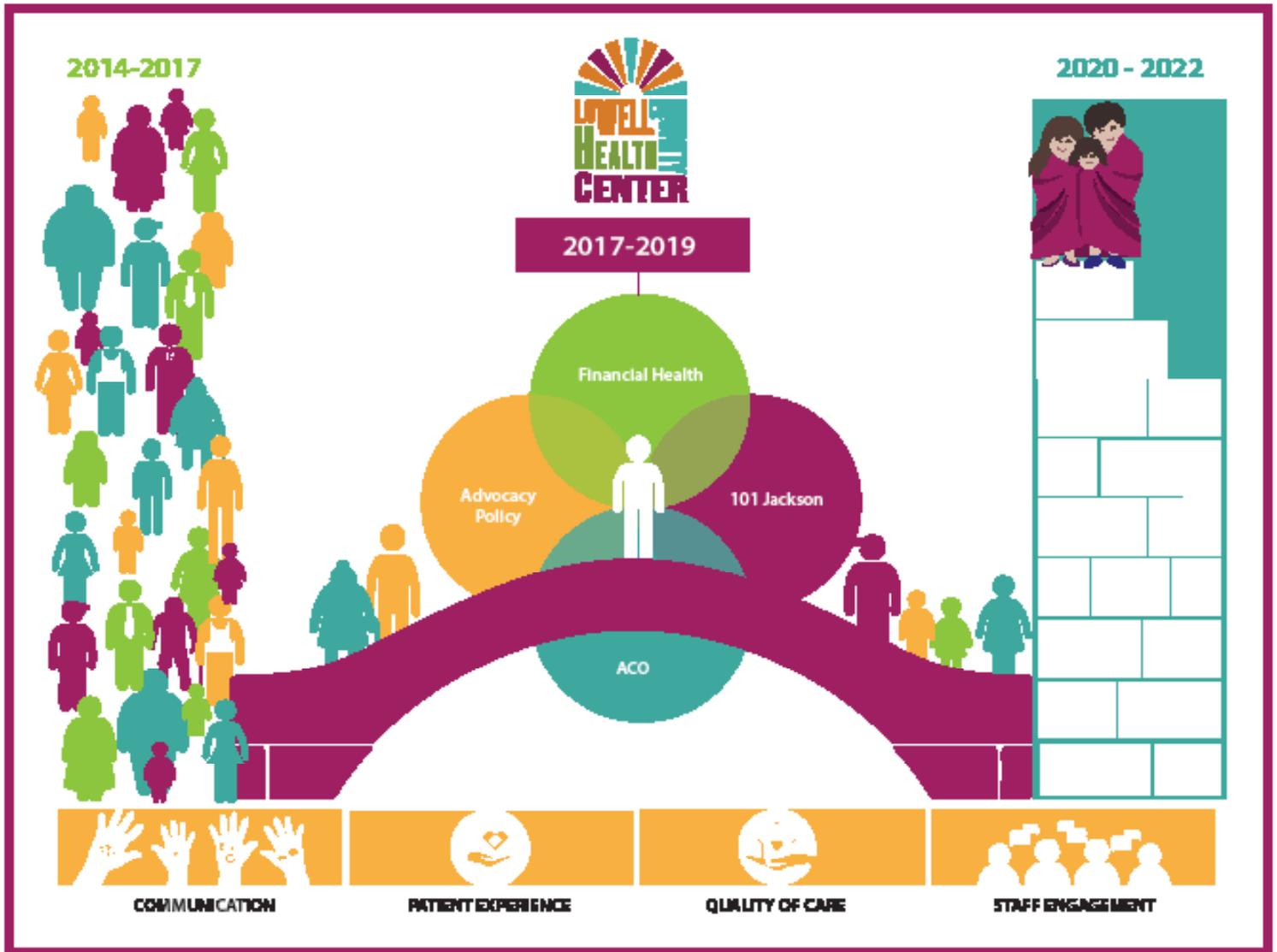
Four key priorities were established for the Bridge Plan, three of which acknowledged the major initiatives sited earlier: expansion into 101 Jackson Street (**101 Jackson**); development and implementation of the accountable care organization (**ACO**); and the need for advocacy as we navigate the expected changes in health policy (**Advocacy & Policy**). The fourth priority emerged in recognition of the complexity of these issues and as a key requirement for continued efforts, especially given the three years the organization has operated without a rate increase from MassHealth: **Financial Health**. Indeed, this priority was recognized as instrumental to the other priorities and to all the ongoing efforts of the organization. With the achievement of this goal, we will secure the financial resources necessary for service delivery and reinvestment. The following goals were established for each priority area:

101 Jackson	ACO	Financial Health	Advocacy & Policy
Increase access to needed health care services by creating sustainable systems to support growth and innovation while offering quality, culturally competent care through an integrated service delivery model.	Design and develop ACO that is responsive to the needs of Lowell CHC patients and families that assures positive clinical and financial outcomes, and addresses the social determinants of health. Success will be determined by patient experience.	Create a framework for a sustained business model to accomplish our mission.	Enhance our position as a trusted source of health information and leader in health policy and advocacy in the Greater Lowell community and beyond

Clear objectives were established for each of these goals; the committee also reviewed and adjusted the Annual Operating Plan to ensure alignment and focus on these efforts. This stands as a separate document.

Plan Details

Following is a graphical representation of our Bridge Plan, acknowledging our journey from one strategic plan to the next with our focus on the four priority areas. Importantly, this graphic also highlights those elements which are foundational to our overall success: communication, quality of care, patient experience, and staff development and engagement. Every bridge must be built on a strong foundation, and that is no less true on our journey. Our services must remain of the highest quality and with the best patient experience possible as we move these priorities forward. Likewise, we must continue our investments in our staff, developing and engaging them in this work to ensure our ongoing achievements. Finally, our work requires clear and consistent communication with all stakeholders: our patients, our staff and our entire community.



This journey will allow us the space and time to both achieve critical transformation priorities and implement a strategic planning process which fully engages our patients, staff, community members and other key stakeholders.

Objectives by Priority Area

101 Jackson Street Readiness

Goal: Increase access to needed health care services by creating sustainable systems to support growth and innovation while offering quality, culturally competent care through an integrated service delivery model.

Objectives:

- 1) Complete the financing goals established in the current capital campaign and enhance the ongoing campaign for operational support.
- 2) Review and revise the existing business plans for all service lines and establish a system for ongoing monitoring.
- 3) Determine appropriate staffing model and recruit, train and engage staff in service delivery
- 4) Ensure successful occupancy of the building, on time and on budget
- 5) Establish a marketing and communications campaign to drive service growth.

Implementation of Accountable Care Organization (ACO)

Goal: Design and develop ACO that is responsive to the needs of Lowell CHC patients and families that assures positive clinical and financial outcomes, and addresses the social determinants of health. Success will be determined by patient experience.

Objectives:

- 1) Complete a practice evaluation and redesign system to focus on quality and mitigate risk
- 2) Establish tools to collect and monitor data to track clinical program quality and financial efficacy
- 3) Confirm leadership role through continued participation in Wellforce ACO
- 4) Ensure provision of high quality behavioral health services for our patients through successful alignment with behavioral health community partners.
- 5) Develop staff for this transformation work and continue to engage them, and our patients, through ongoing communication and education.

Objectives by Priority Area

Financial Health

Goal: Create a framework for a sustained business model to accomplish our mission.

Objectives:

- 1) Establish a culture of financial literacy and transparency, ensuring staff have a common understanding of the importance of their role in sustaining the financial health of the organization.
- 2) Implement enhanced, inclusive budget development process with improved systems and reporting to achieve desired results.
- 3) Conduct an independent financial assessment of the health center and implement recommendations as appropriate to improve financial strength.
- 4) Expand non-service related revenue through expansion of fund-raising, securing of grants and prudent management of investments.
- 5) Establish management dashboard and reporting system which focuses on financial, quality and operational key performance indicators (KPI).

Advocacy and Addressing Health Policy Changes

Goal: Enhance our position as a trusted source of health information and leader in health policy and advocacy in the Greater Lowell community and beyond

Objectives:

- 1) Determine policy and advocacy priorities for policy advancement.
- 2) Establish a process to drive advocacy initiatives that is responsive to changing needs.
- 3) Develop workforce policies which support our advocacy efforts.
- 4) Engage staff and patients in our advocacy agenda.
- 5) Elevate our advocacy efforts through partnership on targeted events.