

## **SUMMARY**

DSRIP funded activities during Budget Period 1 (BP1) aided the Greater Lowell BH CP in working towards the goals of the program outlined below:

**Support individuals with high BH (and LTSS) needs** to help them navigate the complex BH system providing coordinated support services;

**Improving the Enrollee experience** by holistically engaging individuals with high BH needs with services that strengthen, enhance and diversify access for individuals and families we serve;

**Assist individuals in integrating into the community** through attaining valued community roles, active membership in local organizations and meaningful relationships;

**Incorporate an enhanced data-driven decision-making process** to guide clinical and administrative decisions to improve capabilities that enhance care delivery

**Support community first values, SAMHSA recovery principles, and culturally competent care delivery** by adopting evidenced- based, best practices

**Collaborate with ACOs, MCOs, CPs, and community organizations** to integrate care and address the social determinants of health.

The Greater Lowell BH CP specifically utilized Technology and Operational Infrastructure funds to purchase Information System and Technology resources necessary to meet the data collection and reporting requirements set forth by the MassHealth contract. Resources purchased included, hiring of individuals establish and implement the software and hardware into our programming for use by staff and to develop and implement both process and outcome reporting needed to drive decision making in program development and delivery.

Recruitment and training funds were critical in the initial implementation of programming. Funds assisted in providing the BH CP with incentives for recruitment and hiring in a competitive market, where the demand currently outweighs the supply and available resources. Training funds allowed development of required and important trainings in Training Management System, to meet the needs of a newly recruited workforce as well as continued skill development and understanding of not only a complex patient population but also system of care.

Most existing programs operate individually, with very little true coordination, leaving the individuals with complex BH needs to navigate challenging BH and Health Care systems. BY1 DSRIP funds afforded the Greater Lowell BH CP the opportunity to develop an infrastructure to provide highly specialized wraparound care coordination supports to members with certain complex BH

needs who are enrolled in ACOs, MCOs, or the Adult Community Clinical Services (ACCS). The time and resources DSRIP funds allowed the BH CP to begin to create a more holistic, systemic, collaborative approach, which is critical to shifting the existing culture within BH, health care and our communities.