#### **ATTACHMENT B**

# DELIVERY SYSTEM REFORM INCENTIVE PAYMENT (DSRIP) PROGRAM COMMUNITY PARTNER (CP) BP4 ANNUAL REPORT RESPONSE FORM

## PART 1: BP4 ANNUAL REPORT EXECUTIVE SUMMARY

#### **General Information**

Full CP Name:	North Region LTSS Partnership
CP Address:	8 Silsbee St, Lynn, MA 01901

## Part 1. BP4 Annual Report Executive Summary

The past year comprised months of both siege and subsequent recovery from the COVID 19 pandemic. This has meant that overall operations have had to shift in rhythm with both rapidly changing contexts in general as well as changing member needs in particular. NRLP has done this well, developing infrastructure supports to manage a "hybrid" staffing model accommodating both remote as well as on-site work as appropriate. Maintaining both staff and member safety has required careful consideration of vaccine and PPP mandates as well as development of clear protocols about when exemptions are warranted and how "work-arounds" will be implemented that optimize well-being and prevention.

During BP4, NRLP focused significant effort on quality improvement, using TA Vendor support to conduct gap analyses and develop critical dashboard metrics to provide better guidance around performance management. We also focused on integrating social determinant of health indicators within our ongoing metrics in an effort to develop a more comprehensive scorecard. Using both clinical and social determinant of health data, NRLP – in conjunction with a TA vendor -- has begun to develop a "rapid response/enhanced care coordination" capacity which we hope to implement more fully in BP5. We are also working on building out a "data lake" to better connect otherwise discrete data files in ways that will allow better analysis of our interventions impact.

NRLP has also begun to focus on developing stronger community partnerships and launched a pilot program last fall with the Lynn Public Schools to support our pediatric members more effectively through various strategies, including parent education. This effort will intensify in BP5 and we are hopeful that it will yield significant improvement across health and well-being indicators.

Labor shortages – which appears to be a lasting legacy of the pandemic – has been problematic relative to recruitment and hiring. This reality prompted workflow realignments that have actually benefited the program significantly, at least for the short term. By creating a separate intake function, we have been able to strengthen the time and resources our care coordinators can devote to supporting the members. We intend to maintain the restructured system but are hopeful that the labor market will soon shift so that vacancies will be appropriately filled.