

2011 Annual Report
Dorchester House Multi-Service Center Annual Meeting
June 9, 2011

Joel Abrams, President and CEO

I am pleased to present the FY 2011 annual report to the June 9, 2011 Dorchester House Multi-Service Center Annual Meeting. In response to the Governing Board's interest and involvement in regular re-engagement of our strategic planning process, this report is organized around our strategic goals and objectives. As the report demonstrates, our accomplishments for the year follow the goals and objectives presented to the board last year. Additionally, they tie directly to the strategic plan which was revised through the combined efforts of the board and staff and was adopted by the board in November of 2010. Thus, this report presents the strategic goals as headers for our accomplishments, irrespective of the department under which the accomplishments fall. In some cases – as with our legal services and food security case management - the accomplishments take the form of success stories. Following this, and where available, our annual goals and objectives are presented by department, as is the summary of likely strategic areas to be added in the coming year. As this report demonstrates Dorchester House has had an extraordinary year with extraordinary accomplishments. These could not have happened without the efforts of our outstanding staff and the dedication of the Governing Board.

I. Introduction:

Among its most important responsibilities the Governing Board of Dorchester House Multi-Service Center develops and monitors of the organization's strategic plan. Over the years the board has taken this responsibility seriously with the result that we have had a well thought out and dynamic plan. To keep it dynamic the board is regularly engaged in re-visiting the plan. This has allowed us to be assured of its continued relevance as we also assess the need for it to reflect new environmental challenges. Additionally, the board regularly asks the staff to tie its annual goals and objectives to the plan and subsequently monitors their accomplishments under the same rubric. This process assures the plan's continued relevancy and helps focus the organization's activities on strategic considerations as it maximizes the pro-active nature of these activities.

It should be noted that while some of the activities of the organization during the past year represent strategic responses to new challenges, the strategies themselves are not always captured in the existing plan. This is because of the need to act more quickly than the contemplative process of revising our plan would allow. One example of this is the concept of Accountable Care Organizations (ACO's). These are not mentioned in our current plan, yet we have been vigorously engaged with our partners and others in preparing for ACO involvement – and we have regularly reported to the board on these activities. In essence the board has accepted the need for us to make such preparations as strategic priorities created in response to developments that were not evident in our last revision. Of course ACO's, global payments and other environmental changes have been or will be introduced to the current board/staff review process.

As the report demonstrates Dorchester House has had a very challenging yet productive year. As health care reform in Massachusetts celebrated its fifth birthday – hosted at our health center – the national reform debate has been in full swing. This certainly has been impacted by the Republican mid-term election victories and by the continued concerns about the economy and the federal deficits. It has also meant potential and actual funding cuts in areas critical to our mission on both the federal and state levels. Some of this affects us directly while some affects our strategic partners – chief among them Boston Medical Center on whom we rely for some important funding. Yet we continue to be cautiously optimistic because we know that community health centers (CHC's) are viewed as essential to the success of any national and statewide health care efforts.

Irrespective of political party or philosophy it appears that legislators and policy makers understand the value that CHC's bring. This recognition has already brought us great opportunity through our Federally Qualified Health Center status in the form of operational and capital expansion funding. We believe that as health care financing moves toward paying integrated and quality related care (verses cost based) and global payments, we along with other primary care providers – especially CHC's - will be positioned to play prominent roles in how and where health care is delivered and how health dollars will be distributed. Between that aspiration and the final product however will be the need to work strategically and intelligently among ourselves and with our partners. The accomplishments that follow bolster the hope that we will see the needed results.

II. Accomplishments

Strategic Goals

GOAL 1: DORCHESTER HOUSE WILL PROVIDE EXCEPTIONAL CARE

To provide exceptional care, Dorchester House will focus on continuous performance improvement; recruit and retain the most highly skilled staff; maintain all levels of accreditation; develop innovative systems for delivering care; eliminate barriers and facilitate access to care regardless of language, age or disability; and foster a culture of patient safety and quality of care.

2011 Objectives and accomplishments

Clinical

Objective

To work with providers to meet budget goals for patient volumes

Accomplishment

While overall productivity lagged at the beginning of the fiscal year, in large part related to unanticipated staff departures and poor weather, the productivity numbers have been trending steadily upward and we have been on target the last two months.

Objective

To increase the number of new patients

Accomplishment

We have added over 200 new patients per month and a net growth of about 75 patients per month (900 per year).

Objective

As part of Medical Home initiative, to create quality standards in collaboration with department leaders, and meet those standards-

Accomplishment

We have formal standards in place for processes and outcomes in Diabetes, Hypertension, Asthma, Prenatal care, Developmental screening and several Cancer screening processes; the outcomes we are tracking are steadily improving as we make changes in how our practice functions; we still have areas where we need improvement but on the whole the trend is steadily upward.

Objective

To establish the new Urgent Care facility, expanding care options for our patients

Accomplishment

Last fall we expanded coverage to include Sundays; this summer we will move into our new facility.

Other clinical accomplishments

The Diabetic Program experienced some change this year. The position was upgraded from LPN to Registered Nurse with a Bachelors Degree. The program has been completely redesigned and updated including all teaching materials now provided in English and Vietnamese. In addition to the regularly scheduled appointments during the day, increased access was accomplished as the RN Diabetic Educator is now available for patient visits on Tuesday and Thursday evenings and Saturday mornings. She is also participates in the group Diabetic sessions.

The Radiology Department has recently expanded hours to provided availability on Tuesday evenings and Saturday mornings. The first few sessions have been nearly 100% booked with a low “no show” rate. If the need is demonstrated, we will expand the evening and weekend hours.

A federal, Title X: Action for Boston Community Development (ABCD) review of Family Planning services was performed by four federal surveyors. The Dorchester House program was chosen by ABCD as an exemplary site for Family planning. The surveyors agreed and the survey was successful.

Urgent Care has opened to see walk in patients on Sunday. This service has been well received by our patients allowing them to receive care seven days per week.

Women’s Health has new nursing leadership this year. Under the new leader, many changes, updating and revising of protocols was accomplished. A few examples are:

Devised a system of tracking “At Risk” prenatal patients and established a monthly, multi-disciplinary case conference for these patients.

Established a communication system with Pediatrics to keep them informed of “At Risk” patients who are close to delivery.

Revised and confirmed peri-natal Clinical Guidelines.

Revised and updated a system to track patients who have had a therapeutic or spontaneous abortion.

Revised and updated a resource binder for Nursing which includes protocols for routine functions carried out by Women’s Health Nurses. This will maintain continuity of care as well as provide a clinical resource.

DotWell – Management Services

(Information Technology)

Accomplishments

CPS (Centricity Practice Management System) Implementation:

As part of enhancing business and clinical operations at both health centers, the replacement of our current practice management system (MSI) is fully under way. The Organization and Planning stage that started about two months ago is now complete and we are currently in the building and design phase of the projects. We had the official project kick-off with BMC, internal working groups and essential stakeholders and the project is currently on target to meet the various milestones. Additional key project phases are: data conversion, testing, training and go-live. Go live dates are scheduled for the end of August and September for Codman Square and Dorchester House respectively.

Additional clinical projects that Information Systems is working on are:

Advanced ePrescribing which affects our Medicare reimbursement. This project just started with an end of year deliverable to have each provider submit 25 eRx (Electronic Prescriptions) by the end of the year.

Billing & Orders Module is moving out of the pilot and building phase and is about to commence training and implementation with providers and the billing teams. Once the CPS system is live this process will become a complete electronic process from registration, office visit and care to billing for the visit. The goal is to improve charge capture, improve coding, reduce paper and improve cash flow.

Enterprise Telephone System Implementation: (VOIP)

The Voice over IP telephony system project has also been officially kicked off. Through a competitive bidding process, we procured Cisco as the hardware vendor and INX as the project implementation team. Both are leaders in the industry and have proven track records in the healthcare industries. Key milestones include: planning and data gathering, build and configuration, testing, training and go-live. We are approximately 50% complete with the planning phase which involves interviewing each department on current configuration issues and future needs. Our go-live targets for each of the five buildings that are part of this project is the month of July, each staggered one week apart. This project is on time and within budget.

DotWell ISMS (Information Security Management System)

This project is also an enterprise wide scope and the cross-site working group is comprised of members from Operations, Human Resources, Information Technology, Legal, Compliance and Quality and also includes the consultants – Hirsch Roberts Weinstein LLP (HRW). HRW researched and catalogued the business, regulatory, statutory and customer requirements for protection of personal information and the team is currently working on identifying and capturing the “current” state of compliance on spreadsheets for all of the regulatory and statutory requirements identified in Phase One. Then we will develop recommendations for changes as compared with best practices and a plan for implementation including revising and or drafting new policies, process changes, security audit and compliance program as well as staff training.

Public Policy

Accomplishment

We maintained our compliance as a Section 330, federally qualified health center including continuing FTCA coverage and change in scope requests

Case Management

Accomplishments

Case Managers provided over 7,000 case management encounters/visits this year. This is an area of extreme growth for the health center. Manage 7 social services case managers, including those case managers funded under the following grants: Parent to Parent (Tufts), Boston Healthy Start Initiative (Boston Health Commission) and the Ryan White HIV/AIDS Program (Health and Human Services). Insured compliance with grant requirements and outcome measures to obtain continued funding.

Developed a case management encounter form tied to the medical record to accurately account for the numbers and types of case management support services provided to our patients. Launch of the pilot form began in March 2011.

Dorchester House is one of four community health center sites working on the MY CHILD project. MY CHILD is a federally funded project through collaboration with the Boston Public Health Commission. This project provides a behavioral health clinician and family partners to work with patients under the age of 6 who have serious emotional disturbances and their families. This staff is embedded in the pediatric department to bridge the perceived and real barriers to behavioral health services for very young children.

Case Management Advocacy for Food Security

Accomplishments

Food security is a major issue for Dorchester House patients. Access to quality, affordable food is hard to come by in our neighborhood since we live in a food desert, with no major grocer within walking distance of the health center. The case management department has placed a strong emphasis on helping our patients reach food security. Dorchester House is fortunate to have several resources on site to help prevent hunger including the capacity of each case manager to file a food stamps application for eligible patients. This can be done by case

management staff, so the patient doesn't have to go to the Department of Transitional Assistance to apply. Instead applications can be done in a familiar setting by a helpful member of our case management staff. In addition, patients can access other food resources at Dorchester House including the food pantry, WIC services, and a Farmer's Market. Finally, all case managers are able to provide linkages to patients about other food resources in the area.

This knowledge base has aided our patients in their challenge to achieve food security. Our efforts in this area have long been supported by Project Bread, who provides us with funding to buy grocery gift cards for new food stamp applicants as they wait for their benefits to begin. From June 2010-December 2010, Project Bread provided us with another opportunity to address hunger issues within our patient population. Through a partnership with The Boston Foundation, we were paid \$75 for every new Food Stamp application we submitted on behalf of our clients. Case Managers conducted their usual, robust assessment of patients' food security and connected them to food stamps and other resources. By the end of this six month period the case managers had reached the maximum amount of 80 applications allowed under the grant.. This earned the health center \$6,000 to continue to support case management's ongoing efforts to achieve food security with our patients.

School Based Health Center

Accomplishment

Continued our involvement as the sponsoring agency of the School-Based Health Center at the Harbor Middle School, offering behavioral health and primary care within the school setting. In collaboration with DotWell and the city of Boston we are working on an exciting partnership for the summer of 2011 that will blend academic and recreational opportunities to 7th and 8th graders at the Harbor School.

Legal Services Clinic

Objective

To provide access for our patients to legal services

Accomplishments

MLP/Ropes & Gray: For the past three years we have had a dynamic partnership with Medical Legal Partnership-Boston and the law firm of Ropes & Gray. This collaboration enables our medical staff to refer patients for legal consultation and representation in the areas of immigration, housing, education, family law and income supports. This is a tremendous service to our patients, especially in a climate of underfunding legal services resulting in unmet need among vulnerable populations. MLP manages several legal-medical partnerships with other health centers and hospitals, but proudly Dorchester House is the star in the system. Our health center routinely yields the most annual triage calls to MLP, insuring that our patients' potential and continuing legal problems are addressed by a staff of attorneys and paralegals who are professional, kind and committed to achieving social justice. In addition to the staff at MLP that triages our initial calls and provides continuing education to our medical staff, our patients legal cases are handled by Ropes & Gray, a leading Boston law firm. There are 144 attorneys and paralegals at Ropes who offer expertise on the legal cases of Dorchester House patients. This stunning donation of time and talent is only matched by the warm nature in which the Ropes team interacts with our patients and works tirelessly on their behalf. The final kudos in this

partnership is to the Dorchester House staff who have embraced and utilized this collaboration in service of our patients. Dr. Peter Loewinthan has been the chief medical champion on this project and continues to mentor staff on connecting patients to legal services. In addition, Dorchester House's pediatric case manager – Bichphuong Do – was awarded the 2011 Advocate Award from the Medical Legal Partnership Boston in recognition of her advocacy on behalf of the patients she works with.

GOAL 2: DORCHESTER HOUSE WILL BE THE PROVIDER OF CHOICE FOR CURRENT AND NEW PATIENT MARKETS.

In order to be the provider of choice, Dorchester House will improve its marketing; strive to increase the diversity of the patient and payer mix; increase capacity to meet demand; and provide walk-in service and urgent care.

2011 Objectives and Accomplishments

Clinical

Objective

To maximize the percentage of patients seen by primary care providers (reduce no-shows)

Accomplishment

Overall show rate is increasing to 75% and above.

Objective

To continue to improve the subjective experience of patients who receive care at DH

Accomplishment

Our quarterly surveys continue to show high levels of satisfaction on the part of our patients

Other clinical accomplishments

RN's have begun accompanying the Director of Community Outreach to various community settings to provide services such as blood pressure screening, diabetes screening and education. Each community member is provided with material, in several languages, that provides a description of available services at Dorchester House. At this time, patients can also schedule an appointment for themselves or a family member with a Dorchester House provider.

Developed Provider Teams in Adult, Family Medicine and Vision Services with the goal to ensure continuous weekly coverage by providers and further support patient access to schedule appointments on a day and time that is convenient for them

Reporting on the number and type of incidents from our Tracking Report System is now incorporated as part of the Clinical Counsel Meeting. The goal is to assess trends and implement system changes when necessary.

Medical Records scanning of documents were prioritized to set standards to improve access for providers to patient information. Priority scanning is completed daily and routine documents are scanned within 3-4 business days.

Marketing

Objective

To increase the sophistication of our marketing

- A. Gain a better understanding of the marketplace and of our own performance within it.
- B. Evaluate our brand image and re-brand as necessary.
- C. Develop a marketing plan:
 - 1) That addresses what we have learned; and,
 - 2) Takes advantage of all available technologies, such as our website and other web-based marketing strategies, and opportunities to broaden our marketing impact.

Accomplishment

We have begun to expand our presence on the Web through social marketing, launching our Facebook Page, Twitter account, and LinkedIn activity in January. Since then we have 105 Facebook followers and average 2,500 post hits per month. On Twitter, we have 102 followers. In addition, we are collaborating with Codman through our DotWell partnership to review and revise our health center websites in order to enhance their look and make them more patient-user friendly. In addition, we developed an electronic newsletter which is issued quarterly. Combining postings on our web presence, electronic newsletter distribution and print media, we promoted access to our services by focusing on walk-in/urgent care – in the fall and winter with our “Flu Shot Today” campaign and our current “Just Walk Right In” theme.

Objective

To increase the diversity of the patient and payer mix

Position Dorchester House to gain maximum penetration of the identified segments of the market

Accomplishment

Recognizing that our target market is very diverse, “human” social networking can be more effective for introducing our services. To that end, we created a new position – Director of External Affairs – and hired Mary Truong, who has a proven record for community outreach.

Since her engagement in October, we will have held community forums addressing specific ethnic constituencies (Vietnamese in March, Cape Verdean in July), will have co-sponsored a public health forum with the Boston Public Health Commission covering 3 specific health issues prevalent in our community, and provided dozens of workshops, information sessions and health screenings at local churches and organizations.

We produced the 18th Annual Children’s Holiday Party in December, attended by nearly 700 children and their families. Even though we were in construction, with the fantastic cooperation of Shawmut Construction, each child was able to get a visit with Santa and come away with a wrapped toy.

Case Management

Accomplishment

Created a case management brochure to serve as a calling card for providers and other staff on how to connect patients to case management and the types of services provided. Launch of the form is slated for this summer.

GOAL 3: DORCHESTER HOUSE WILL BE A LEADING PUBLIC HEALTH RESOURCE FOR THE COMMUNITY.

As a public health resource, Dorchester House will assist in community-wide disease surveillance and other epidemiological objectives; develop prevention and education programs, as well as community-based programs; develop public health advocacy efforts; and develop and maintain the capacity for evaluating the efficacy of programs.

2011 Objectives and Accomplishments

Clinical

Objective

To expand HIV care, solidify infrastructure

Accomplishment

Our recent grant from DPH recognizes our ongoing work and helps us to provide a full time case manager.

Objective

To establish a Center of Excellence for Hepatitis care

Accomplishment

Dr Julita Mir won an award from the MassLeague to support the Center of Excellence; Dr Von Nguyen has been part of the team and Dr Carlton Moore, a Gastroenterologist from BMC will be joining us this month to allow us to provide full service care for patients with Hepatitis B and Hepatitis C.

Objective

To apply public health principles and strategies to other prevalent conditions

Accomplishment

We now include support for legal, financial and other social determinants of health in our primary care practice

Other clinical accomplishments

During the fall flu season, one dedicated flu clinic was held on a Saturday. The attendance was excellent. After that initial clinic, open access was initiated in Urgent Care. This allowed the patients to come to Dorchester House and receive their vaccination on their schedule. The available hours were 9am - 7pm.

Public Policy

Disseminated policy updates, alerts and action requests to all staff regarding regulatory and legislative changes and budget matters.

Case Management

Accomplishments

Dorchester House is the hub agency in Fields Corner for Boston Child Thrive, a citywide effort to improve school readiness, often called Thrive in 5. Fields Corner is one of five Boston neighborhoods selected to participate in this effort. As the hub agency, Dorchester House facilitated a community-based planning process to create an action plan that supports parents in

their role as their child's first teacher, while increasing programming opportunities for families. Implementation of this action plan has begun with a kick-off celebration to be held on July 9th at the Dorchester House.

Continuing to support case managers' roles in offering parenting support and education groups at Dorchester House, including Dot Dads and our Connected Dot Mom's Group.

GOAL 4: LEVERAGE OUR SETTLEMENT HOUSE TRADITION AND THE FACILITY AVAILABLE TO US TO OFFER THE WIDEST RANGE OF COMMUNITY SERVICES.

Leveraging Dorchester House's settlement house tradition means developing programs that respond to our community's needs; developing programs that prioritize the needs of our contiguous geographic areas, and reach beyond to welcome other users; creating a wellness center; provide the opportunity for our customers to access multiple programs; and assuring that meeting these objectives are aligned with fundraising goals.

2011 Objectives and Accomplishments

Clinical

Objective

To provide longitudinal, integrated care and services in a pipeline fashion for a local community in collaboration with Dotwell, CSHC and other agencies.

Accomplishment

We have assembled several programs that focus on young children (age 0-6), including case management, behavioral health, as well as primary care that provide a supportive track for school readiness.

DotWell

Accomplishments

Dorchester House believes that clinical services alone are not sufficient to address the multiple and complex social determinants of health such as poverty, education, substance abuse, lack of or inadequate housing, and community and family violence. Through our DotWell partnership with CSHC we step well outside the traditional medical model of health care, and embrace education, food and fitness, environmental health, and financial health as core components of our strategy to address health disparities and public health in the Dorchester community.

Furthermore, increasingly, there is a common understanding that the environment in which we live, work and play affects our health. For people who face the challenges of living in poverty, who lack access to quality education for their children, and who have limited safe places to exercise and seek out resources, the impact is much more profound. Within a faltering economy, struggles are more difficult and present impossible choices, such as between food, shelter, and medication. The need for strong and productive families and communities is urgent and Dorchester House is at the forefront of facilitating the community transformation. Examples include:

- Through DotWell's Earned Income Tax credit clinics we served over 3,000 taxpayers and returned over \$6M back to the Dorchester community.

- At Dorchester House we screened 57 patients to determine their financial health as a key vital sign (not unlike blood pressure checks) at the time of their primary care visit with the doctor and results show that our patients will benefit from asset building support and services, career awareness and job training as well as employment assistance in an effort to address social determinants of health and establish the foundation towards economic sufficiency. For example 93% had health insurance yet 35% could not afford their co-pay and 70% did not claim the earned income tax credit.
- With a focus on education and school readiness, Dot House is the hub agency for Thrive in Five to facilitate the development of a community action plan to improve universal school readiness for preschoolers living in the Dorchester neighborhood .
- In 2010 we trained 30 Boston public high school students to become financial health Ambassadors as well as IRS-certified tax preparers through the Skills for Life (S4L) program. S4L teaches high school students practical financial skills that are immediately useful in benefiting their community, developing their career interests, and providing a foundation for marketable money management skills that will last a lifetime. 63% completed the 10-session educational portion and 100% passed the IRS Tax Certification exam -80% passed on their first attempt.
- DotWell’s Generation Next Academy (**GNA**) Teen Center housed here at the Dorchester House hosted its first annual “College Fair and Health Expo” in our GYM. Over a dozen colleges and universities had representation at the event. Over 60 youth and family members attended the event and had the opportunity to learn more about their options for a college education.
- *Eat Green Save Green (EGSG)* promotes the use of food and financial resources available in the community, including SNAP, food pantries, and Earned Income Tax
- Credits. EGSG teaches community members how to manage finances, how to grocery shop for foods that are both affordable and nutritious, and how to prepare them in healthful ways. EGSG creatively helps families increase their financial resources to help make eating a healthy diet possible. Of the participants we served in 2010, 95% indicated they learned how to manage their resources to live a healthier life and 90% stated they now understand how financial planning supports healthy eating.
- For the past ten years we have been providing HIV/AIDS education in an effort to increase awareness and prevent HIV infection transmission in the Dorchester community as well as Roxbury and Mattapan. In 2010 our Community Health Outreach Workers reached out to over 10,000 individuals through workshops, various community events and street level outreach and distributed over 20,000 condoms over the year.

Public Policy

Accomplishments

Managed and leveraged partnerships with the following organizations to bring resources to Dorchester House patients and clients: Medical Legal Partnership, Ropes & Gray, Project Bread, The Greater Boston Food Bank, Massachusetts Coalition for the Homeless, Cradles to Crayons, Family Nurturing Center.

Case Management

Accomplishment

Case Managers began to implement the Fiscal Health Signs assessment tool with financially vulnerable patients to design a work plan on how to improve their financial health. This project was done in collaboration with DotWell, through Doreen Treacy's leadership. Doreen created the tool and provided continuing education with the case managers to implement this important survey that gets to the root cause of a patient's challenges.

GOAL 5: ASSURE THAT OUR FACILITIES ALWAYS MEET STATE OF THE ART STANDARDS AND RESPECT THE DIGNITY AND THE NEEDS OF THE PEOPLE WHO WORK WITHIN THEM AND ARE SERVED BY THEM.

Dorchester House will ensure that we have sufficient capacity to support current and future programs, including new additions if necessary; we will ensure that staff have comfortable and productive space which adhere to all licensing and accreditation standards; that our facility is comfortable and accessible for our customers; that our facility contributes to the betterment of our community as well as being socially responsible ("Green"). We commit to developing a capital campaign to meet this goal.

2011 Objectives and Accomplishments

Planning and Community Affairs

Objectives and Strategies

- A. To conduct a space plan and an assessment of both our clinical and non-clinical facilities needs.
- B. To ensure that the Dorchester House facility is used to its maximum potential and greatest efficiency.
- C. To develop the empty lot on Leedsville Street in order to accommodate expansion of current clinical space, and possibly:
 1. Relocate finance department in order to expand pharmacy
 2. Relocate administrative offices in order to expand administrative capacity, and expand clinical capacity in space adjacent to exiting exam room space.
 3. Relocate eye care in order to move Walk-in and Urgent Care to larger, more accessible first floor space

Accomplishments

Having launched the planning for "The Doctor Will See You NOW!" expansion project in the spring of 2010, in the summer of 2010 we completed the community review process, and by October 5th we successfully completed the Zoning Board review. Mayor Menino along with our local elected officials helped us break ground on the project on October 26th, and we were underway. Since then, we have been working with the project management, architect and contractor in order to make multitudes of decisions regarding furniture, equipment, IT, millwork, even door lock keying schedules. In particular, a great deal of effort has gone into developing a whole new signage system for the health center which will use internationally recognizable pictograms in order to better accommodate the number of non-English speakers who come here, making it easier for our patients to find their way around our newly expanded health center.

Operations

Accomplishments

Facility staff participated in BMC Environmental Rounds to ensure the appropriate Life and Safety concerns were met on a continuous basis.

Fire Safety and Right To Know trainings were provided to all staff to ensure they are educated on the rights and responsibilities as employees.

Facility staff provided continuous safety responsibilities for all customers during a severe winter by clearing snow and maintaining access to our facility.

GOAL 6: DORCHESTER HOUSE WILL BUILD, MAINTAIN AND NURTURE A HEALTHY, HIGHLY SKILLED, QUALIFIED AND DIVERSE WORKFORCE THAT IS ABLE TO SUPPORT OUR VISION.

The quality of our staff is key to our success and we commit to recruit and retain the most highly qualified staff; we will create and maintain a workforce succession plan; continue to maintain a diverse workforce which reflects our community; build a culture that promotes effective utilization of technology; and build and maintain high levels of loyalty, morale and satisfaction.

2011 Objectives and Accomplishments

Clinical/Operations

Objective

To recruit at least two more physicians and two more mid-level providers, preferably with language skills and cultural experience that matches our patient population

Accomplishment

We have hired 6 new providers including one Vietnamese speaker and two Spanish speakers

Other clinical accomplishments

Formal presentations on the Health Insurance Portability and Accountability Act (HIPAA) and Corporate Compliance have been developed and presented at a monthly All Staff meeting. A post test was given to demonstrate understanding of the material presented.

New hire orientation has added a presentation on Quality and the HIPAA.

We have begun an affiliation with the Salter School and the Kaplan School to provide an externship for Medical Assistants. One Dorchester House Medical Assistant coordinates the externship and acts as the preceptor for each student. This has proved very successful. Several Medical Assistants have been hired after completion of their externship.

We cross trained staff in Medical Records in the Appointment and Switchboard areas to improve their skills and further enable them to provide additional support when necessary to maintain access to our facility and appointments for our customers

Human Resources

Accomplishments

- Although there was less emphasis on outside recruitment for positions this year than in the past, we were able to promote a number of individuals. This supports our efforts to develop and implement internal career paths and to offer career ladders for our staff
- We continue to celebrate the diversity of our staff. Having held our 2nd annual multicultural luncheon this time last year, we will again hold this event this month. The luncheon features eight cultures. This year \$1,252 was raised by the employee activities committee through the generosity of the Dorchester House staff. This provided support to each group represented in addition to the regular contribution by the organization.
- Employees have participated in several important trainings and seminars. Among them are: The Massachusetts Community Health Institute for Leadership, sponsored by Blue Cross/Blue Shield; The Lend Program (Leadership Education in Neurodevelopmental and Related Disabilities); Customer Service; and others. Ten employees participated in our tuition reimbursement program this year.
- This evening we hand out 43 longevity awards among them: 30 years (1 recipient), 25 years (2 recipients), 20 years (5 recipients), 15 years (4 recipients), 10 years (9 recipients), and 5 years (22 recipients).

Goal 7: Maintain the highest standards of organizational leadership and financial performance in order to prosper in a dynamic environment and to ensure that we can meet the current and emerging needs of our community

Dorchester House will ensure financial strength by building and maintaining financial reserves; expanding the financial infrastructure to support growth; build capacity for more sophisticated financial planning and modeling; investigate new sources of revenues; and communicate our financial strength to our constituencies.

2011 Objectives and Accomplishments

Finance

(Many of these cross walk to other strategic goals as well. These are noted along with the objectives within those goals to which they apply.)

- Successfully completed a clean audit for two years in a row. Goal 8 (obj. 4& 5)
- Timely completion of all annual reporting including audit, 990, UDS, UFR, Cost Reporting and departmental Profit and Loss Statements for all internal and external customers. Goal 8 (obj. 5) and Goal 7 (obj. 2,3,4)
- Began to utilize a paperless payroll system. Goal 7
- Worked closely with BMC to enhance the HSN rates and PAPE rates. Goal 7 and 10

- Began to utilize a staffing plan to better enhance to budget and actual results of staffing by provider. Goal 7
- Revision and centralization of all fee schedules utilizing not only productivity standards but relative value units. Allowing for the measurement of time and effort to encounters. Goal 7 and Goal 3 (obj. 5)
- Established a Board representative Finance Committee and opened up training on the financials for the DHMSC board. Goal 8 (obj. 4 & 5)
- Provided Staff Development for the billing staff in a “retreat format”. Goal 1 & Goal 6
- Began the order entry process in preparation for system conversion (complete in August). Goal 7
- Renegotiated Pharmacy contract and laboratory agreements (cost savings). Goal 7
- Renegotiated Managed Care contracts including a prior year settlement of over \$200,000. Goal 7 and 10
- Budget process included various department managers. Goal 7
- Continuously improved programs by working with providers monthly to enhance performance and identify gaps in fiscal stability. Goal 7
- Maintained budget for construction project. Goal 5
- Applied for financing of the construction project through traditional and NMTC process.
- Established a CPS steering committee in preparation of the conversion from MSI to CPS. Goal 7 and 10
- Established a Billing Steering committee to work on common problems and solutions across system. Goal 1 and 10
- Increased Net Revenue per visit over budgeted projections through updated contractual agreements
- Decreased Lab Contractual expenses over \$70,000
- Increased assets of \$3.8 million (this fiscal year) with very little change in cash position.
- Maintained salaries expenses below budget projections.
- Successfully renegotiated employee benefits below budgeted cost expectations

Public Policy

Accomplishments

Utilized Increased Demand for Services federal stimulus dollars to support 4 case management positions. Advocated with federal elected officials to make this funding permanent. This funding now has been added to our 330 grant award.

Continued to advocate with federal and state policymakers on accessing transition dollars to stem the loss of Section 122 funds and increased our Section 330 funding.

Attended the 2011 National Association of Community Health Centers annual Policy and Issues Conference in Washington, DC

Provided information and education on the impact of recent federal budget cuts to policymakers and staff

GOAL 8: MAXIMIZE THE EFFICACY OF THE BOARD.

The strength of Dorchester House starts with the strength of its board of directors, and we commit to diversify and strengthen the make-up of the board; develop clear process of developing leadership; strengthen the board's capacity to fundraise; ensure that the board meets all federal and state legal requirements; and ensure that all board members are fully engaged and educated.

2011 Objectives and Accomplishments

Objective

To diversify and strengthen the make-up of the board

Ensure strong input from senior staff in the nominating process to identify potential board members who are constituents, possess key skill-sets and are representative of the community.

Accomplishments

With one third of the board members' terms expiring each year, there is an opportunity to recruit new board members. In recent years, the recruitment effort has focused primarily, though not exclusively, on an internal campaign to identify health center patients. Additionally, staff and board members are encouraged to help identify other members of the community from whom the

board would benefit. This has been very successful, and this past year we elected 2 consumer board members who were identified by the internal program, and 1 new board member who was nominated by staff. This brings the total number of board members to 19, with more than 63% consumer representation.

Objective

To create opportunities for board members to be more visible to staff and the community

Accomplishment

Efforts were increased over the past year to ensure that board members received invitations and notices of staff and public events, and as a result, more board members have taken advantage of the opportunities. Several board members have volunteered at programs such as the Children's Holiday Party, assisted at staff events like the Halloween Pumpkin Contest, or attended one of regular the monthly staff meetings. Attendance by board members during community meetings regarding the building expansion were very helpful, as were their attendance at the Business Community Breakfast and Community Lunch.

Objective

To strengthen the board of directors' capability to fundraise and to serve as ambassadors to the community

- A. Create the expectation that all board members will make annual, personal financial contributions to Dorchester House and make that expectation clear during the recruitment and nominating process.

- B. Utilize the board chair and Development Director to drive personal giving by all board members.

Accomplishment

Board Chair Laurie Martinelli has stressed on several occasions, at board meetings but also at board recruitment interviews, the importance of 100% board participation in annual giving. She emphasized that it wasn't the size of the donation that mattered, it was the personal commitment demonstrated by the board as leverage when approaching outside funding sources. This has been very successful and last year.

Goal 9: TO SUPPORT AND STRENGTHEN THE MISSION AND OPERATIONS OF DORCHESTER HOUSE, WE COMMIT TO THE DOTWELL PARTNERSHIP.

Dorchester House commits to an efficient, effective and economically responsible partnership. We commit to ensuring that the Dorchester House board understands its role in the partnership, as well as the vision, potential and strategic plan of DotWell. Further, we will refine the process by which management is fully engaged in decision-making for the direction of DotWell. We will create and utilize mechanisms for communication and accountability. We will nurture and strengthen clinical, staff and managerial relationships between Dorchester House and Codman Square Health Center, and work to further integrate financial relationships whenever appropriate. Dorchester House will maintain its mission and identity as DotWell grows and thrives.

2011 Objectives and Accomplishments

Operations

Accomplishments

Worked collaboratively with ISMS Team focusing on the Provider Credentialing system to assess the security of their personal information required for hospital and insurance credentialing

Implemented a Windows-based, user friendly SYMED Provider Credentialing System to provide a more comprehensive system of tracking and maintaining provider information.

Finance

- Streamlined Grant Management process
- Developed departmental and program level budgets
- Compared departmental and program level budgets to actual (monthly)
- Strong communications from finance to program managers effecting positive results
- Established cash flow reporting
- Produced a clean audit
- Completed 990

GOAL 10: BUILD A ROBUST DEVELOPMENT CAPACITY THAT PROVIDES NEW REVENUE STREAMS TO SUPPORT NON-REIMBURSABLE AND UNDER-REIMBURSED SERVICES.

2011 Objectives and Accomplishments

Development

Objective

To create key systems, protocols, and processes to support increased development activity

Accomplishments

- Coordinated efforts across the enterprise to implement new Customer Relationship Management (CRM) software going live in June 2011.
- Continued to work on internal protocols in terms of donor management. This is ongoing as finance restructures and we find new ways to reconcile donor records with them and as we create a style guide of protocols for our new CRM. This requires a lot of coordination and work across the entire enterprise.
- We continue to refine our grant strategy with DotWell and internal process flows for grant development.

Objective

To build an individual donor base

Accomplishments

- By collecting and processing information from health screenings, flu shot clinics, our ground-breaking, community meetings, etc. we have built a contact list of over 1,000.
- Successfully held a Community Breakfast and Groundbreaking Event to engage local business and nonprofit leaders in Dot House.
- Pulled together contacts from senior managers for use in the CRM.
- Pulled together a special event committee made up of 12 community volunteers outside of the board of directors.

Objective

To create an overall marketing plan

Accomplishments

- Building a database of contacts.
- Developed quarterly newsletter.
- Using Vertical Response to communicate via email with constituents – sending newsletter via email as well as notices, invitations, etc.
- Conducted an audit of current marketing collateral and have started plans with a designer for new departmental brochures, etc.
- Retooled Annual Report to be more focused on donors as the audience.

Objective:

To incorporate special events for revenue generation

Accomplishments

- Currently building a signature event, Masquer-Aid, which will take place for the first time ever on October 28, 2011

- Engaged 12 community members to serve on Maquer-Aid committee.

Objective

To engage board members in fundraising

Accomplishments

- Four board members serve on the Masquer-Aid Committee.
- 100% board participation in annual giving in FY 2010
- Board Chair instrumental in driving board giving campaign.
- Solicited names for groundbreaking and community breakfast from board members with limited success

DotWell

Accomplishment

DotWell provides leadership and support with the grants management development function for Dorchester House and our partner health center Codman Square, as an important way to help support our public health, out of school time, asset building and wellness programs and services. In 2010, Dotwell submitted a total 92 grant proposals for funding to support programs and services across the enterprise and received \$1.9M through this process.

GOAL 11: DORCHESTER HOUSE WILL STRIVE TO REDUCE HEALTH DISPARITIES IN THE COMMUNITY.

Dorchester House will address the eight health disparities recommendations made by the Health Disparities Project of the Boston Public Health Commission. To that end, we will educate the board and staff as to the recommendations; use the Health Disparities Project report as a guide to conduct a gap analysis; and develop a plan of action based on that analysis.

III. 2012 Goals

In my view the goals in our strategic plan remain relevant and are likely to continue guiding us for several years. On the other hand developments around health care reform and health care payment reform compel us to re-engage the strategic planning process. The Governing Board has already begun that effort. Even while this is going on we are preparing ourselves for the challenges ahead. As some of our accomplishments demonstrate, we have been organizing ourselves to be recognized as a Patient Centered Medical Home (PCMH). By next year we expect to receive accreditation by the National Council on Quality Assurance as a level 3 PCMH.

Closely tied to that is our goal to begin receiving incentive payments from the Centers for Medicare and Medicaid, recognizing that we meet the criteria for “Meaningful Use” of our electronic medical record. We are well on our way toward that accomplishment.

We will also engage with our institutional and health center partners in defining how we community-based primary care providers will play substantially new roles in helping to manage the care of our patients. The new emphasis on integrated and value-based health care through Accountable Care Organizations provides the pathway for this. We expect that by next year we will be engaged in the development of and participation in at least one ACO. During this time we will be assessing the degree to which we can take financial risk and the extent to which opportunities will be presented for primary care in general, and Dorchester House in particular will be able to receive appropriate reimbursements for the care that we give.

During this year our expanded facility will be fully available and we will be looking to increased patient care volume. We understand that such growth is likely to occur over several years, but at the very least we believe that our new walk-in/urgent care center should help us to achieve new volumes and new patients. We will also be working with our third party payers to measure how well our increased access through this center and our increased hours of care will help reduce inappropriate use of hospital emergency rooms by our patients.

2012 will be a year in which Dorchester House expands its commitment to healthy lifestyles – for our staff as well as our consumers. Our new facility will afford opportunities for activities that promote health and well being. A volunteer staff committee has enthusiastically begun to form new ideas for our becoming a center of excellence for good nutrition and exercise.

While we will continue to strive for a healthy bottom line, we understand that funding cutbacks on the national and state levels will impact us. Our fiscal performance in FY 2011 was indeed strained as operational losses continued to grow. Our goal for 2012 is to stem those losses and to look toward new patient volume as a key objective in order to make that happen.

On the technology front we expect to complete our major IT infrastructure improvements, including the implementation of Centricity Practice Systems' integrated electronic health record and practice management system. This will help us to utilize physician order entry capabilities, electronic billing, easier access to clinical information exchanges, and numerous other efficient ways to access and use the critical data we generate. At the same time we will be continuing to work diligently toward a comprehensive data security model. All this will be part of our PCMH and Meaningful Use requirements, so it will not just be us who attests to the value and safety we will be creating.

Along with the continued success of DotWell management support we will be implementing VoIP (Voice over Internet Protocol) for our enterprise (DotWell, Dot House and Codman Square Health Center) telephone needs. This promises to provide us with new capabilities and capacity that our present system lacks. Among the benefits of VoIP are the following:

- Call handling will be more efficient. Real-time monitoring for proper workload distribution
- Mobility to allow callers to reach someone who may not be at their phone. Extending to cell phones if needed
- Unified messaging to leverage email as a work queue tool to again be more efficient at processing voicemails

- Network that far exceeds the limitations of traditional telecom circuits. One that can scale to handle growth, that can provide business continuity when a disaster or failure occurs, allowing calls to go through.
 - Applications that could never be achieved with the traditional system, such as call centers, operator call management, and integration with EMR to facilitate patient calls.
 - Management tools to allow us to assure the call routing we put in place is meeting our target patient service satisfaction goals.
 - Better caller id management so that calls to patients are identified as the health center.
- Furthermore, allowing providers to route calls through our systems so that afterhours calls made to patients homes will present as DH vs. a private provider's number.
- E911 improves patient and staff safety for quicker response from first responders.

With respect to fundraising we will be conducting our first and hoped for signature event – a masquerade ball - in October

Consistent with our commitment to exceptional care while leveraging our settlement house legacy we will be pursuing the following policy and case management objectives:

- To position Dorchester House to be a player in payment reform – As payment reform efforts take hold in Massachusetts Dorchester House will conduct analysis on and formulate models of payment the benefit and support our operations and patient population. We will advocate these models with state policymakers and other regulatory bodies.
- To investigate and obtain funding streams to support case management services at Dorchester House – This may figure its way into payment reform conversations and affects all health centers. How can we be reimbursed for the unique enabling services we provide, knowing that they have a role in producing improved health outcomes, as well as overall health?
- To pursue Performance Improvement in Case Management – With our new encounter form system in place, we can now accurately track the case management services we provide. This provides us with the opportunity to conduct analysis on services utilized and create performance improvement efforts around the findings.
- To work with the new occupants to the Harbor School – CASH (Community Academy of Health and Science) who will be moving into 11 Charles St. The Harbor School will share the campus with CASH's staff and students. We need to determine if our school-based health services will be offered to CASH, how that will impact our partnership with the Harbor and what would a delivery service model look like.
- Healthy Dorchester House – In May 2011, the Wellness Committee (formerly known as Healthy Dorchester House) reconvened to address the opportunities present in the new facility with providing health education and fitness benefits to staff. The committee will meet monthly and has diverse representation from across the health center.

As we complete our new addition, we will begin to turn our attention to staffing and new patient volume. These were part of the commitment we made to our benefactors in the Bureau of Primary Health Care, who were charged with matching federal stimulus dollars for Facility

Improvement Projects, to expressed community needs. We developed a successful proposal to bring in these dollars (\$7.1 million), and now we need to fulfill the commitments we made. The need to do this goes beyond the federal expectations; it goes to being assured that the new space will contribute sufficient revenues to cover the new expenses it will add – such as depreciation, debt service, utilities, staff costs, etc. While we do not expect to see this happen in one year, we expect to experience an upward trend in visit volume especially in primary and urgent care.

Below are examples of specific departmental goals (headed by strategic areas) pertaining to our clinical service.

(Exceptional Care):

- continue to develop and implement the Patient-Centered Medical Home
- as part of Medical Home initiative, create quality standards in collaboration with department leaders and subsequently meet those standards
- as stated above complete NCQA Medical Home application criteria in 2012, achieving Level III accreditation
- maximize appropriate utilization of new Urgent Care facility, providing care options for our patients
- provide 24 hours access to patient's team
- provide one week access to new patient appointments
- work with providers to meet budget goals for patient volumes
- increase the number of new patients to 300 (total) and 100 (net) per month
- expand the role of the Clinical Operations Council (our performance improvement committee) and integrate performance improvement into routine work of staff

(Provider of Choice)

- maximize percentage of patients seen by primary care provider and care team
- continue to improve the subjective experience of patients who receive care at DH or utilize DH for other services (per satisfaction survey)
- review our patient satisfaction survey-consider changes/improvements-conduct survey quarterly
- develop staff satisfaction survey or other assessment-quarterly

(Public Health Resource)

- establish a Center of Excellence for Hepatitis care
- develop institutional expertise in young child/school readiness issues
- apply public health principles and strategies to other prevalent conditions
- be alert for emerging public health issues

(Settlement House Tradition)

- continue to look toward finding a way to provide longitudinal, integrated care and services in a pipeline fashion for a local community in collaboration with Dotwell, CSHC and other agencies
- integrate Fiscal Health Vital Signs into patient care

(Skilled and diverse workforce)

- recruit at least two more physicians and two more mid-level providers, preferably with language skills and cultural experience that matches our patient population

-find appropriate staffing for Urgent Care and expanded Primary Care space

(Financial Performance)

- meet budget goals
- work with CFO on revenue task force

(Dotwell)

- complete orders module-eReferrals, lab/radiology ordering, electronic billing

(Disparities)

- create an ongoing reporting structure to look at health outcomes by race/ethnicity
- identify specific areas of disparity
- create programs, of case management, increased language/cultural staffing or other mechanisms to address the disparities.

An overarching concern, and one in which the Governing Board has expressed particular interest is that of the patient experience. This is especially true with respect to patient satisfaction and patient complaint policies and procedures. This concern is consistent with the consumer majority that constitutes the make-up of our board. Accordingly, the staff will be working closely with the board to identify how we can continue to maximize patient satisfaction, and deal effectively with patient complaints when care is perceived as inadequate.

Another area in which the board has expressed interest is in how we best reflect the diversity of our staff and the community we serve. Accordingly, a board/staff diversity committee has been established and will continue to explore ways to take best advantage of the diversity opportunities and challenges presented to us.

As more detailed goals and objectives are submitted to the Governing Board, the shape of Dorchester House during the coming year will be brought more into focus. The environment around us is rapidly changing and we need to both adapt and pro-actively prepare ourselves for it. The good news is that we are a fiscally strong organization staffed by outstanding individuals. We therefore have good reason to optimistically view the opportunities that our internal environment will bring us with our new building, and that the emerging structures of health care will present to us. I look forward to a robust and healthy 2012.

IV. Acknowledgements

I would like to acknowledge the following individuals, who as members of my senior management team documented their achievements and those of their departments for this report. More important is the leadership they exercised during the year that allowed for these achievements.

John Chambers, Comptroller

Patrick Egan, M.D., Chief Medical Officer

Kathryn Harris, M.D., Adult Provider

Mary Irwin, Director, Human Resources

Tobey Johnson, Director Applications and Data Management, DotWell

Jessica Loew, Director, Development

Danny McNeil, Chief Information Officer, DotWell

Michelle Nadow, Director Public Policy (DotWell), Director, Case Management and Outreach

Maria Nolido, Executive Assistant

Huy Nguyen, Pediatrics Provider

Diane Picard, Director, Operations

Patti Ross, Chief Financial Officer, DotWell, Dorchester House and Codman Square Health Center

Ira Schlosser, Director, Planning and Community Affairs

Mary Truong, Director, External Affairs

Karen van Unen, Chief Operating Officer, DotWell

Pat Wheeler, Director, Clinical Operations

Thanks as well to staff throughout Dorchester House whose steadfast commitment to our mission and values contributed to the high quality of services we provided during the year, to our Governing Board, whose hard work created the policies and oversight for all that we accomplished, and of course to the wonderful community and consumers whom we proudly served. We look forward to more of the same in 2012.

Thank you.

JA