



Strategic Plan
2014—2017

EXCELLENCE

COMMUNITY

CARING

INTEGRITY

INNOVATION

Thundermist!

H E A L T H C E N T E R

www.thundermisthealth.org



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Executive Summary

Thundermist Health Center has been improving the health of patients and communities for more than 45 years. Since the inception of our last strategic plan in 2010, “Transforming Lives and Communities”, we have expanded care to 50% more patients annually, all benefitting from a comprehensive model of advanced, patient centered, community-based health care. Here are a few highlights of Thundermist’s hallmark achievements over the past few years:

- Opened the ‘Cotton Shed’, our new 17,000 square foot Patient Centered Medical Home in West Warwick, RI*
- Served more than 11,000 patients in QuickCare’s first year of operation. QuickCare is Thundermist’s fully integrated walk-in service open evenings and 365 days per year at each of our medical offices*
- Achieved Patient-Centered Medical Home (PCMH) Level III¹ recognition in each of our sites*
- Expanded participation in Rhode Island’s Chronic Care Sustainability Initiative (CSI-RI) to include all medical sites*
- Implemented digital x-ray and electronic dental records in each of our dental departments*
- Adopted a physician residency program at Thundermist West Warwick, to become Rhode Island’s first PCMH Level III community-based physician residency program*
- Served nearly 42,000 patients in 2013*
- Employed more than 400 highly qualified, professional staff*
- Broke ground in the construction of a new 20,000 square foot Patient Centered Medical Home in Wakefield, with the support of a \$5M grant through the Affordable Care Act*
- Facilitated access to newly available health insurance for thousands of Thundermist patients and community members*

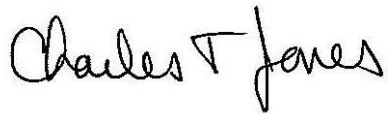
We achieved these impressive results through the hard work of our dedicated staff and partners, and the investment of time and money from our communities and funders. However, we are now at a crossroads. The promise of achieving the “Triple Aim” goals - improving the patient experience and overall community health while reducing costs - has never been so attainable. Yet significant work remains to be done in its pursuit.

¹Recognition certified by National Council for Quality Assurance

We must continue to develop Thundermist's capacity to create and measure value, and align it to reimbursement to ensure sustainability and motivate further coordination and improvement. This will create a framework for our long-term success and build a foundation capable of supporting an affordable, patient friendly, high quality health care system for all.

Being prepared is not enough. We must lead at the forefront of reform and innovation, recognizing that Thundermist has never been so well positioned to achieve significant and sustainable improvements in the health of our patients and communities.

The following plan represents the best effort of our Board of Directors, leadership, staff, and partners, to achieve this vision. We will tenaciously pursue these strategies while remaining open to new opportunities. We are tremendously optimistic about the future and hope you will join us on this exciting journey.

A handwritten signature in black ink that reads "Charles T. Jones". The script is fluid and cursive, with the first letters of each word being capitalized and prominent.

*Charles T. Jones
President & CEO*

A handwritten signature in black ink that reads "Lois Monteiro". The script is elegant and cursive, with the first letters of each name being capitalized and prominent.

*Lois Monteiro, Ph.D.
Board Chair*

MISSION

To improve the health of our patients and communities by delivering exceptional health care, removing barriers to that care and promoting healthy lifestyles.

VISION

Every member of the Thundermist community has the opportunity to lead a happy and productive life, built on a foundation of good health.

VALUES

Caring: We bring a passion for service to our communities, patients, and each other in the pursuit of our vision.

Community: We respect the contributions of our local community partners and employees. We support our communities by creating opportunities for local growth and development.

Innovation: We create and adopt advancements that show promise of improving the health of our patients and communities, whether in technology, services, programs or payment. We share this knowledge openly with our staff, partners, patients, and communities.

Excellence: We take pride in maintaining high standards and lofty goals, and hold each other accountable to achieve them.

Integrity: We stay true to our mission, vision and values. We are accountable to our partners, funders, patients, communities and to each other.

Deliver Exceptional Clinical Quality and Patient Experience

We are very proud to deliver high quality healthcare to tens of thousands of patients who may not have access otherwise. We will continue to measure and improve the quality of our care. We also recognize that improvements in health will rely on our patients' engagement in their own care, as an active member of their Thundermist care team. Therefore, in addition to redoubling our focus on clinical measures of performance, we will strive to measure and improve the patient experience to continue to build trust and engagement.

Key Outcome Indicators:

- **Top quartile performance in patient experience nationally as measured by a standard, industry validated patient experience measure.²**
- **Top quartile performance in quality outcomes nationally as measured by annual health center Uniform Data Set submissions.³**

²Currently CAHPS: Consumer Assessment of Healthcare Providers and Systems

³Reported on Bureau of Primary Health Care website, Federally Qualified Health Center performance. <http://bphc.hrsa.gov/>. Relative performance rankings adjusted by demographics

Strategy	Initiatives	Timeline			
		2014	2015	2016	2017
Improve the patient experience through better collection, analysis and dissemination of performance information	Implement monthly patient experience survey/screening tool at each site (e.g. Net Promoter Score)	←→			
	Initiate quarterly patient focus groups to obtain qualitative feedback on patient experience	←→			
	Develop and implement initiatives to improve patient experience	←→			
	Review these results and activities with staff, board Quality Improvement Committee, and patient and community stakeholders	←→			
Improve patient communication	Initiate use of text/SMS communication for appointment confirmation and patient communication		←→		
	Expand adoption of the Patient Portal and utilization of new functionality and communication opportunities	←→			
Improve visit experience	Redesign visit flow with focus on the patient (e.g. online appointment scheduling, self-service check-in, in-room checkout)	←→			
	Implement facility design improvements in Woonsocket to support greater patient privacy and visit flow		←→		
Enhance patient health and health system literacy	Implement campaigns in each site and community to increase general health literacy for improved medication adherence and appropriate utilization of the health care services (e.g., 'Ask Me 3')		←→		
	Implement standardized group visit model for Behavioral Health and Medical across all communities		←→		
Develop culture of quality improvement throughout the organization	Develop standard methodology, tools and training for quality improvement activities applicable to all departments		←→		
	Implement training structure for quality improvement across all departments, including employee on-boarding, performance evaluation, incentives and job role descriptions		←→		
	Integrate oversight activities into staff and board QI oversight structure			←→	

Expand Access to Comprehensive & Coordinated Care

Despite Thundermist's dramatic growth of the past several years, demand continues to outstrip capacity. Thundermist will remain the only affordable option for access to primary care for thousands of patients for the foreseeable future. In addition, the sustainability of the recent expansions of affordable insurance will depend on a strong foundation of community-based care and resources. We must continue to expand our comprehensive model of community-based health care through new partnerships, recruitment, facility/service expansion and a renewed focus on wellness.

Key Outcome Indicators:

- New access points in northern and central Rhode Island serving more than 3,000 new patients each, annually.
- Completion and full staffing of new South County facility, serving more than 10,000 patients annually.
- New community-based programs serving special populations of need in each of our communities

Strategy	Initiatives	Timeline			
		2014	2015	2016	2017
Acquire new facilities and expand/renovate existing ones	Complete construction of new South County health center and expand staffing and services to maximum capacity	←→			
	Move administrative offices to central RI and convert existing administrative space at 450 Clinton Street to support patient service	←→			
	Develop new access points, maximizing opportunities for federal and state support		←→		
	Vacate/move or improve patient/staff environment of 191 Social Street in Woonsocket (approximately 9,000 sq ft)		←→		
Expand scope of services to existing patients or new populations	Implement and expand Community Health Teams in all communities	←→			
	Create or expand access to community-based substance abuse support services		←→		
	Evaluate and hire/partner to expand local access to specialty services, including: imaging, pain management, vision, podiatry, physical therapy, orthopedics, gastrointestinal, oncology, nutrition, oral surgery/endodontics, pharmacy, rheumatology, geriatrics and neurology		←→		
	Expand services to seniors by working with other community partners and insurance plans			←→	
Improve care coordination through the use of technology	Contribute clinical data to CurrentCare from the Thundermist EHR for patients who have consented		←→		
	Implement remote monitoring and reporting of patient health status from patients' home or other locations			←→	
	Implement provider to provider electronic, secure messaging for referrals and care coordination		←→		
Improve screening and coordination between medical, behavioral health and dental services	Implement universal screenings for substance abuse and childhood exposure to trauma and toxic stress (e.g. SBIRT, ACE, UCLA PTSD Index)			←→	
	Expand impact of BH beyond treatment of BH illness to increase impact on health behavior and lifestyle change and integration with the care team		←→		
	Integrate dental department focus on diseases and populations with medical to maximize impact of dental services on clinical outcomes (diabetes, HIV, pregnancy)	←→			

Be a Fantastic Place to Work

Great employees are our most important asset. In order to continue improvement as a high performing organization we must recruit and retain the highest performers. Continued success will be the result of several factors: a strong positive culture grounded in meaningful purpose; real opportunities for professional growth; and a workplace that fosters high performance and innovation at all levels. As Thundermist grows, the systems to sustain and develop this culture must respond.

Key Outcome Indicators:

- **Achieve staff turnover less than 15%**
- **75% of eligible staff utilizing Individual Wellness Accounts**
- **External recognition in state or national press as healthy or family friendly workplace**

Strategy	Initiatives	Timeline			
		2014	2015	2016	2017
Define and develop the Thundermist Culture	Define culture and values; incorporate into onboarding and recurring all staff training	←→			
	Create accountability to culture and values as component of annual performance evaluations for all staff	←→			
	Implement web-based exit interview survey to systematize capture of feedback from departing staff	←→			
	Maximize alignment between staff incentive program and organizational strategic goals	←→			→
Develop career pathways for employee growth	Create clear and achievable development opportunities for all staff by defining and supporting progression along career pathways	←→			→
	Create succession planning model for all leadership roles; include individual development plans, formal training, mentorship and coaching		←→		
Promote a healthy workplace and work-life balance	Support healthy/active lifestyles through programs and physical infrastructure at all sites (i.e. showers/fitness equipment)	←→			→
	Provide Emergency child care options on-site or near-site		←→		→
	Benchmark Wellness benefits against other like-sized organizations by participating in recognition programs and related reports		←→		→
	Establish incentives for actions consistent with good health (i.e. annual physical, BMI, cholesterol, smoke free status)		←→		
Improve provider retention and recruitment	Reevaluate HPSA score for medical and dental providers to attract National Health Service Corps candidates		←→		
	Strengthen recruitment strategies from West Warwick Residency Program; integrate program with Brown Medical School		←→		→
	Implement predictive modeling tool in recruitment/selection process to improve new hire fit with specific job roles			←→	
	Expand precepting opportunities for Thundermist providers to train students and residents	←→			→

Shift Reimbursement to Support Value

We must measure the value of our work and tie reimbursement to results. We know that many of our patients' needs can be met through community-based services that not only result in better outcomes but are less expensive than non-local or institution-based services. With the gains in access to insurance for many of our patients and focus on reductions in total cost of the healthcare system, major sources of non-value related reimbursement for Thundermist have come under fire. Undertaking strategies to shift reimbursement to demonstrable value will ultimately result in improved health of our patients and communities and increased sustainability of a health care system which provides access to all.

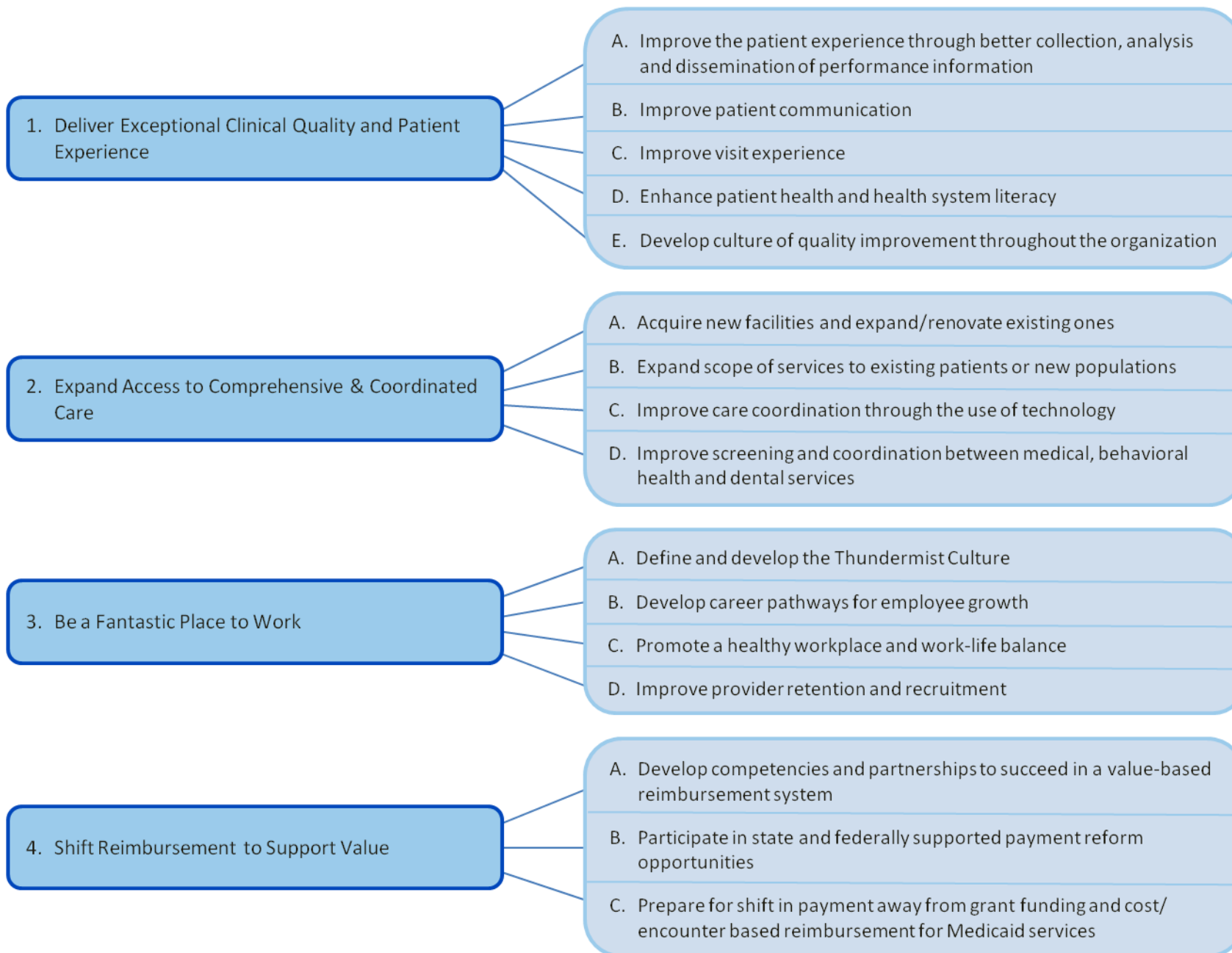
Key Outcome Indicators:

- More than 50% of Medicaid enrollees will be part of a Medicaid ACO or risk-adjusted shared savings program which includes value based alternatives to encounter-based reimbursement.

Strategy	Initiatives	Timeline			
		2014	2015	2016	2017
Develop competencies and partnerships to succeed in a value-based reimbursement system	Develop intervention standards and communication protocols for management of high cost/high risk populations between hospitals, care teams, community teams, community mental health centers and others	←			→
	Identify and expand relationships with partners capable of delivering high quality, low cost, coordinated, local services for Thundermist patients		←		→
	Support opportunities for leadership and provider participation in payment reform education/training sessions	←			→
	Develop capacity to monitor and coach key areas of primary care practice standardization for referrals, prescribing, imaging, etc.		←		→
Participate in state and federally supported payment reform opportunities	Support development and implementation (if awarded) of State Innovation Model CMS-funded project	←			→
	Participate in development of Medicaid ACO with state, insurer and health center partners			←	→
	Explore opportunities for a pediatric ACO	←		→	
Prepare for shift in payment away from grant funding and cost/ encounter based reimbursement for Medicaid services	Develop sufficient reserves to enable Thundermist to assume accountability for financial risk and incentives.	←			→
	Support state and federal advocacy to ensure controlled migration to value-based reimbursement to avoid a fiscal 'cliff'		←		→

THUNDERMIST STRATEGIC GOALS AND STRATEGIES

AT A GLANCE



Opportunity Screen

New opportunities will continue to arise over the course of this strategic plan, and Thundermist must be agile in our decision-making. This framework is intended to guide our decisions around future opportunities and our potential investment of resources (financial, people, and otherwise) in response.

These future decisions will be made with consideration of the following factors:

- Is the strategy aligned with our mission? Will the strategy or intervention impact the health of our patients and communities?
- Does the strategy build or enhance strategic skills or competencies? Will undertaking the strategy develop skills or competencies we see as crucial to our future?
- Is the strategy feasible and sustainable? Will the strategy produce a sustainable financial return? If so over what time period? Do we have the resources needed to undertake the work?
- Is there evidence or past experience to show that the strategy can be effective? Have Thundermist or others demonstrated success with this strategy?
- Does the strategy enhance the overall sustainability of the health care system? In addition to being financially feasible for Thundermist, does the strategy reduce overall cost of care for our patients?
- Is Thundermist the best agency to execute this strategy? Does Thundermist have experience delivering this kind of work or would it be better to consider a partnership?

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