

# New York Department of Health Delivery System Reform Incentive Payment (DSRIP) Program

DSRIP Scoring Summary: Forestland PPS

February 17 - 20, 2015



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### I. PPS Informational Page and Proposal Overview

**PPS Name:** Forestland PPS

PPS Lead Organization: Forestland Health Hospital Center

PPS Service Counties: Maple Hill, Willow Flatlands, Birchview, Sap Valley, Cedar Bay, Plum Ridge,

Juniper Hill, Forestland, Hazelcrest, Sweetgum, Tulip Park. Cherryburst

**Total Attributed Population: 234,000** 

#### Goals of the PPS:

- 1. Improve the coordination of care through stronger networks between providers particularly primary care, behavioral health and community care and create robust processes and protocols for collaboration, referral and handovers
- 2. Improve disease management and crisis prevention, particularly for those with chronic and behavioral conditions, through targeted outreach for specific populations
- 3. Improve engagement with at-risk individuals, supported by comprehensive patient registries and effective use of IT and data sharing.
- 4. Create a clinically interoperable data system (based on our existing HealthInsight system) that allows rapid information sharing between providers
- 5. Decrease the costs of accessing healthcare (both time and money) that are barriers to effective use of preventive and disease management services.
- 6. Improve access and provide more 'one-stop shop' experiences for patients through increased co-location of services and by bolstering the infrastructure of primary and community facilities.
- 7. Pro-actively prevent non-emergency care being delivered in the ER (including through the colocation of primary care services in the ER)
- 8. Identify and reach out to those groups that currently rely on emergency care (including the uninsured) and support them in accessing services more effectively;
- 9. Shift the focus of our providers, from providing inputs to delivering outcomes, through value-based contracts and payment structures

#### **Network Composition:**

- Composition	Total Providers in
Provider Types	Network
Primary Care Physicians	650
Non-PCP Practitioners	2322
Hospitals	21
Clinics	42
Health Home / Care Management	18
Behavioral Health	280
Substance Abuse	12
Skilled Nursing Facilities / Nursing Homes	60
Pharmacy	34
Hospice	5
Community Based Organizations	28
All Other	1984



### II. Projects Selected – Summary Table

Project Selection	Project Title	Index Score	Number of PPS' Pursuing Project	% of PPS' Selecting Project
2.a.i	Create Integrated Delivery Systems focused on Evidence-based Medicine/Population Health Management	56	22	88%
2.a.iv	Create a medical village using existing hospital infrastructure	54	4	16%
2.b.ii	Development of co-located primary care services in the emergency department (ED)	40	1	4%
2.b.iv	Care transitions intervention model to reduce 30 day readmissions for chronic health conditions	43	17	68%
2.d.i	Implementation of Patient Activation Activities to Engage, Educate and Integrate the uninsured and low/non-utilizing Medicaid populations into Community Based Care	56	14	56%
3.a.i	Integration of primary care and behavioral health services	39	25	100%
3.a.ii	Behavioral health community crisis stabilization services	37	11	44%
3.b.i	Evidence-based strategies for disease management in high risk/affected populations (adult only)	30	15	60%
3.c.i	Evidence-based strategies for disease management in high risk/affected populations (adults only)	30	10	40%
4.a.iii	Strengthen Mental Health and Substance Abuse Infrastructure across Systems	20	13	52%
4.b.ii	Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings (Note: This project targets chronic diseases that are not included in domain 3, such as cancer	17	11	44%
	Cumulative Index Score	422		
	PPS Rank by Cumulative Index Score	4		



### III. Organizational and Project Scoring Summary Tables

### i. Organizational Component Scores

Please note, the organizational component score is worth 30% of the final score with the Project score representing 70% of the overall score for each DSRIP project.

Section Points Possible		Reviewer Scores				Subjective Scores				Objective Score	Final		
Section	Points Possible	1	2	3	4	5	6	Median	Average	Trimmed Average	Selected Subjective Score <sup>1</sup>	Workforce Score	Org Score <sup>2</sup>
Executive Summary	Pass/Fail	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	N/A	Pass
Governance	25	23.65	23.17	23.65	23.20	23.20	23.90	23.42	23.46	23.46	23.46	N/A	23.46
Community Needs Assessment	25	24.03	23.55	24.03	22.10	23.80	23.00	23.67	23.42	23.68	23.68	N/A	23.68
Workforce Strategy	16	15.83	15.44	15.83	14.50	14.20	14.70	15.07	15.08	15.08	15.08	4	19.08
Data Sharing, Confidentiality & Rapid Cycle Evaluation	5	3.61	3.54	3.61	4.50	4.10	4.50	3.86	3.98	3.98	3.98	N/A	3.98
PPS Cultural Competency/Health Literacy	15	7.50	7.35	7.50	14.50	14.60	14.40	10.95	10.98	10.98	10.98	N/A	10.98
DSRIP Budget & Flow of Funds	Pass/Fail	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	Pass	N/A	Pass
Financial Sustainability Plan	10	10.00	9.80	10.00	8.99	9.59	8.49	9.70	9.48	9.68	9.70	N/A	9.70
Total	100.00	88.62	86.85	88.62	91.79	93.49	92.99						90.87

<sup>&</sup>lt;sup>1</sup> **Selected Subjective Score** is the highest of the median, average, and trimmed average

<sup>&</sup>lt;sup>2</sup> Final Org Score is the sum of the Selected Subjective Score and Workforce Score



### ii. Project Scores

Please note, the project scores are worth 70% of the final score with the Organizational score representing 30% of the overall score for each DSRIP project.

Point	Points Possible			Reviewe	er Scores				Subjec	tive Scores		Objectiv	e Scores	Total
Project #	Subjective Points Possible	1	2	3	4	5	6	Median	Average	Trimmed Average	Selected Subjective Score <sup>1</sup>	Scale Score	Speed Score	Project Score <sup>2</sup>
2.a.i	40	38.33	33.33	28.89	37.78	37.78	35.56	36.67	35.28	36.56	36.67	15.99	33.00	85.66
2.a.iv	20	14.67	17.33	16.00	13.33	14.67	16.00	15.33	15.33	15.33	15.33	25.70	31.96	73.00
2.b.ii	20	15.00	11.67	11.67	16.67	15.00	16.67	15.00	14.44	14.44	15.00	29.58	35.71	80.29
2.b.iv	20	12.00	10.67	12.00	10.67	14.67	13.33	12.00	12.22	11.73	12.22	24.25	35.50	71.97
2.d.i	20	16.67	16.67	15.00	20.00	18.33	20.00	17.50	17.78	17.78	17.78	30.00	40.00	87.78
3.a.i	20	6.67	8.33	8.33	8.33	10.00	10.00	8.33	8.61	9.00	9.00	27.01	36.07	72.08
3.a.ii	20	13.33	15.00	13.33	13.33	13.33	16.67	13.33	14.17	13.67	14.17	31.35	33.25	78.76
3.b.i	20	12.00	12.00	12.00	12.00	13.33	10.67	12.00	12.00	12.00	12.00	29.72	33.06	74.78
3.c.i	20	12.00	9.33	10.67	12.00	13.33	10.67	11.33	11.33	11.33	11.33	32.25	37.14	80.73
4.a.iii	100	66.67	72.22	66.67	72.22	55.56	61.11	66.67	65.74	67.78	67.78	0.00	0.00	67.78
4.b.ii	100	88.89	83.33	94.44	100.00	83.33	83.33	86.11	88.89	86.67	88.89	0.00	0.00	88.89

<sup>&</sup>lt;sup>1</sup> Selected Subjective Score is the highest of the median, average, and trimmed average

<sup>&</sup>lt;sup>2</sup> **Total Project Score** is the sum of Selected Subjective Score, Scale Score, and Speed Score



### iii. Final Application Score Calculation

30% Organizational Score, 70% Project Score + Bonuses

Project #	Organizational Score	Weighted Organizational Score (0.3)	Project Score	Weighted Project Score (0.7)	Bonus (2.a.i IDS)	Bonus (Workforce)	Final Application Score
2.a.i	90.87	27.26	85.66	59.96	3.00	3.00	93.22
2.a.iv	90.87	27.26	73.00	51.10	N/A	3.00	81.36
2.b.ii	90.87	27.26	80.29	56.20	N/A	3.00	86.47
2.b.iv	90.87	27.26	71.97	50.38	N/A	3.00	80.64
2.d.i	90.87	27.26	87.78	61.44	N/A	3.00	91.71
3.a.i	90.87	27.26	72.08	50.46	N/A	3.00	80.72
3.a.ii	90.87	27.26	78.76	55.13	N/A	3.00	85.39
3.b.i	90.87	27.26	74.78	52.34	N/A	3.00	82.60
3.c.i	90.87	27.26	80.73	56.51	N/A	3.00	86.77
4.a.iii	90.87	27.26	67.78	47.44	N/A	3.00	77.71
4.b.ii	90.87	27.26	88.89	62.22	N/A	3.00	92.48

### IV. Organizational Component – Narrative Summary

Section	Subjective Points	Points Possible	Strengths	Weaknesses
Governance	23.46	25	<ul> <li>PPS provided information on how the governance structure will ensure adequate governance and management of the DSRIP program</li> <li>Response contains detail describing of the decision making/voting process that will be implemented by the governing team</li> <li>Response successfully explains the role the Project Advisory Committee will play within the organization</li> <li>Response clearly outlines mechanisms for addressing compliance problems related the PPS's operations and performance</li> <li>Response sufficiently describes the PPS's process for monitoring performance</li> </ul>	<ul> <li>The description stated PPS is working on developing the processes to hold parties accountable but did not provide sufficient details regarding accountability approach</li> <li>PPS did not discretely identify the responsibilities of each governance member. Titles of roles provide a sense, but more explanation would be required for higher score</li> <li>PPS indicated they are working on finalizing financial policies and procedures, but did not provide a clear vision</li> </ul>
Community Needs Assessment	23.68	25	<ul> <li>Response adequately explains the Community Needs Assessment's process and methodology</li> <li>Response sufficiently outlines existing community resources, including the number and types of resources available to the PPS</li> <li>Response effectively explains how the composition of community resources need to be modified to meet the needs of the community</li> <li>Response includes data which sufficiently reveals causes for identified gaps</li> </ul>	<ul> <li>PPS did not provide a clear vision of how the network of providers will need to be modified to meet the needs of the community</li> <li>PPS did not provide sufficient description of the key findings of the stakeholder engagement process. There was not enough evidence that the process was detailed enough to drive the CNA process</li> </ul>
Workforce Strategy	19.08	20	<ul> <li>Response successfully summarizes how existing workers will be impacted by possible staff redeployment, retraining, and reductions to workforce</li> <li>Response effectively describes process and potential impact of retraining</li> <li>Response sufficiently describes the role of labor (intra/inter-entity) representatives</li> </ul>	Provided very little detail on the PPS' plans to engage workers on an ongoing basis

Section	Subjective Points	Points Possible	Strengths	Weaknesses
Data Sharing, Confidentiality, and Rapid Cycle Evaluation	3.98	5	<ul> <li>Response clearly describes the PPS's plan for an appropriate data sharing arrangement amongst its partner organizations</li> <li>Response successfully identifies the organizational unit within the organizational structure that will be accountable for reporting results and making recommendations on actions requiring further investigation into PPS performance</li> </ul>	<ul> <li>PPS did not provide specificity around protocols and guidance around maintaining privacy</li> <li>PPS referred back to Governance section regarding how the PPS will monitor compliance with regulatory requirements, such as HIPAA</li> <li>Response did not adequately address how RCE will be used in the successful development of a highly functioning PPS</li> <li>Did not include PPS strategy to conduct population-based activities to improve care</li> </ul>
Cultural Competency/Health Literacy	10.98	15	<ul> <li>Response sufficiently describes how the PPS will contract with community based organizations toward achieving and maintaining cultural competence</li> </ul>	<ul> <li>Response needed to bring together the various tactics under a clearer strategic vision</li> <li>Response did not adequately describe the plan to improve the health literacy of patients</li> </ul>
DSRIP Budget & Flow of Funds	Pass	Pass/Fail	<ul> <li>PPS received passing evaluations in all five Budget</li> <li>&amp; Flow of Funds categories from all scorers</li> </ul>	
Financial Sustainability Plan	9.70	10	<ul> <li>Response sufficiently describes the assessment the PPS has performed to identify financially challenged partners at risk for financial failure</li> <li>Response clearly describes how the PPS will ensure that fragile safety net providers achieve a path to financial sustainability</li> </ul>	<ul> <li>PPS could have been more detailed explaining the on-going process of identifying financially at- risk providers.</li> </ul>
Final Organizational Subjective Score	90.87	100		



### V. Project Scoring Narrative Summaries

### i. Project 2.a.i

PPS Name: Forestland PPS DSRIP Project Number: 2.a.i

DSRIP Project Title: Create Integrated Delivery Systems that are focused on Evidence Based Medicine/

Population Health Management

**Number of PPS' Pursuing This Project: 22** 

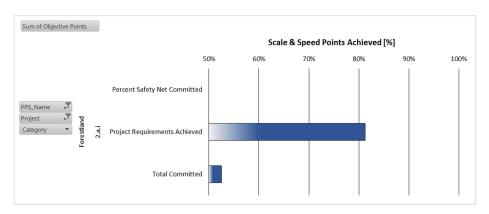
### Final Application Score 93.22

### **Individual Project Score:**

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Subjective Points	Points Possible	Strengths	Weaknesses
		Response sufficiently describes a comprehensive action plan for reducing the number of acute care or long-term care beds with developing community-based	<ul> <li>Mentioned specific population health tool, HealthInsight, as a key resource to be expanded that is currently being utilized at Forestland Hospital Center. However, response</li> </ul>
36.67	40	<ul> <li>healthcare services</li> <li>Response sufficiently identified project challenges the PPS will encounter in implementing this project and describes how these challenges will be addressed</li> </ul>	was not specific regarding the current resources within 3 hospitals that will be expanded –leveraging "staff capabilities"

### **Project Scale and Speed:**

Category	PPS Submissic	Points Achieve	Possible Points
Percent Safety Net Committed	31.00%	8.21	10
Project Requirements Achieved	DY3 Q3/Q4	33.00	40
Total Committed	294	7.78	10
	Total	48.99	60





### ii. Project 2.a.iv

**PPS Name:** Forestland PPS **DSRIP Project Number:** 2.a.iv

**DSRIP Project Title:** Create a medical village using existing hospital infrastructure

Number of PPS' Pursuing This Project: 4

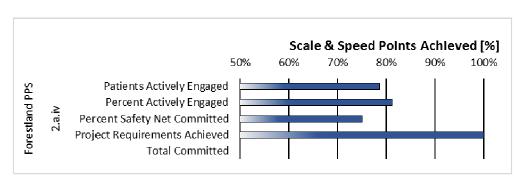
## Final Application Score 86.36

### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses
15.33	20	<ul> <li>Response effectively addressed gaps identified by the CNA and linked these findings with the project design and sites included</li> <li>Response sufficiently identified project challenges or anticipated issues the PPS will encounter in implementing this project and describes how these challenges will be appropriately addressed</li> </ul>	<ul> <li>Response describes current assets, however, resources for behavioral health and substance abuse are mentioned but not sufficiently defined</li> <li>No response provided regarding how the PPS will coordinate with other PPS who seek to implement the same project</li> </ul>

### **Project Scale and Speed:**

Category	PPS Submission	Points Achieved	Possible Points
Patients Actively Engaged	DY4 Q3/Q4	16.00	20
Percent Actively Engaged	11.05%	13.12	20
Percent Safety Net Committed	5.94%	5.61	10
Project Requirements Achieved	DY4 Q1/Q2	15.96	20
Total Committed	31	6.97	10
	Total	57.66	80





### iii. Project 2.b.ii

PPS Name: Forestland PPS DSRIP Project Number: 2.b.ii

**DSRIP Project Title:** Development of co-located primary care services in the emergency department (ED)

Number of PPS' Pursuing This Project: 1

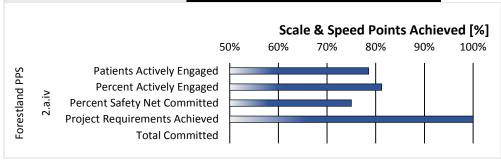
## Final Application Score 91.47

### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses
12	20	<ul> <li>Response effectively addressed gaps identified by the CNA and linked these findings with the project design and sites included</li> <li>Response provides a clear explanation of the patient population PPS is expecting to engage through the implementation of this project</li> </ul>	<ul> <li>The response address relocation of 3         PCMH sites but does not describe the         significance of why the choice of these         particular sites was made or any other         community resources that will be         mobilized</li> <li>Some of the solutions were identified as         out of the scope of the PPS         (under/unemployment) and indicate that         further research was necessary on how to         conduct screenings within ED</li> </ul>

### **Project Scale and Speed<sup>1</sup>:**

Category	PPS Submissi	Points Achieve	Possible Point
Patients Actively Engaged	DY4 Q3/Q4	15.71	20
Percent Actively Engaged	19.00%	16.25	20
Percent Safety Net Committed	5.94%	7.50	10
Project Requirements Achieved	DY4 Q1/Q2	20.00	20
Total Committed	212	5.00	10
	Total	64.46	80



<sup>&</sup>lt;sup>1</sup> The Speed and Scale tables below are for visual reference only and reflect sample data from project 2.a.iv



### iv. Project 2.b.iv

**PPS Name:** Forestland PPS **DSRIP Project Number:** 2.b.iv

**DSRIP Project Title:** Care transitions intervention model to reduce 30 day readmissions for chronic

health conditions

**Number of PPS' Pursuing This Project: 17** 

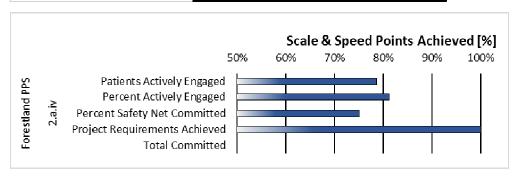
### Final Application Score 85.64

#### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses
15	20	<ul> <li>Response effectively addressed gaps identified by the CNA and linked these findings with the project design and sites included</li> <li>Response sufficiently identified project challenges or anticipated issues the PPS will encounter in implementing this project and describes how these challenges will be appropriately addressed</li> </ul>	<ul> <li>PPS describes intention to build upon an established pilot program but did not sufficiently describe the specific program components, resources, outcomes or demonstrated experience upon which the DSRIP program will be based</li> <li>No response provided in how the PPS will coordinate with other PPS who seek to implement the same project</li> </ul>

### **Project Scale and Speed<sup>2</sup>:**

Category	PPS Submissic	Points Achieve	Possible Points
Patients Actively Engaged	DY4 Q3/Q4	15.71	20
Percent Actively Engaged	19.00%	16.25	20
Percent Safety Net Committed	5.94%	7.50	10
Project Requirements Achieved	DY4 Q1/Q2	20.00	20
Total Committed	212	5.00	10
	Total	64.46	80



<sup>&</sup>lt;sup>2</sup> The Speed and Scale tables below are for visual reference only and reflect sample data from project 2.a.iv



### v. Project 2.d.i

PPS Name: Forestland PPS DSRIP Project Number: 2.d.i

**DSRIP Project Title:** Implementation of Patient Activation Activities to Engage, Educate and Integrate the

uninsured and low/non-utilizing Medicaid populations into Community Based Care

Number of PPS' Pursuing This Project: 14

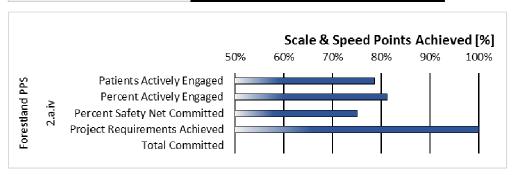
### Final Application Score 96.71

#### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses	
12	20	<ul> <li>Response effectively addressed gaps identified by the CNA and linked these findings with the project design and sites included</li> <li>Response sufficiently identified project challenges or anticipated issues the PPS will encounter in implementing this project and describes how these challenges will be appropriately addressed</li> </ul>	<ul> <li>Response provided some explanation of the target population by identifying the type of consumer to be targeted, however, more detail could have been provided about the characteristics of the population</li> <li>The response needed more detail about to other resources in the community that will be needed to fully engage consumers</li> </ul>	

### **Project Scale and Speed<sup>3</sup>:**

Category	PPS Submissic	Points Achieve	Possible Point
Patients Actively Engaged	DY4 Q3/Q4	15.71	20
Percent Actively Engaged	19.00%	16.25	20
Percent Safety Net Committed	5.94%	7.50	10
Project Requirements Achieved	DY4 Q1/Q2	20.00	20
Total Committed	212	5.00	10
	Total	64.46	80



<sup>&</sup>lt;sup>3</sup> The Speed and Scale tables below are for visual reference only and reflect sample data from project 2.a.iv

### vi. Project 3.a.i

PPS Name: Forestland PPS DSRIP Project Number: 3.a.i

**DSRIP Project Title:** Integration of primary care and behavioral health services

**Number of PPS' Pursuing This Project: 25** 

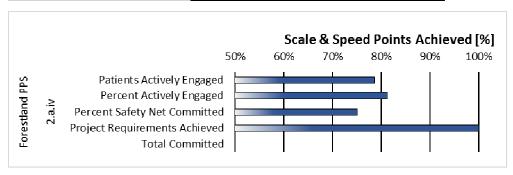
### Final Application Score 85.72

### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses
12	20	Response provided a clear description of PPS assets	<ul> <li>The response did not sufficiently describe the needs of the community. Response references numerous studies but supplies insufficient PPS-specific examples</li> <li>Insufficient response. "MA patients with behavioral health conditions" does not provide enough detail to define the targeted population</li> <li>Response but not describe the non-PPS assets (community resources) that will be mobilized</li> </ul>

### **Project Scale and Speed<sup>4</sup>:**

Category	PPS Submissic	Points Achieve	Possible Point
Patients Actively Engaged	DY4 Q3/Q4	15.71	20
Percent Actively Engaged	19.00%	16.25	20
Percent Safety Net Committed	5.94%	7.50	10
Project Requirements Achieved	DY4 Q1/Q2	20.00	20
Total Committed	212	5.00	10
	Total	64.46	80



<sup>&</sup>lt;sup>4</sup> The Speed and Scale tables below are for visual reference only and reflect sample data from project 2.a.iv



### vii. Project 3.a.ii

PPS Name: Forestland PPS DSRIP Project Number: 3.a.ii

**DSRIP Project Title:** Behavioral health community crisis stabilization services

Number of PPS' Pursuing This Project: 11

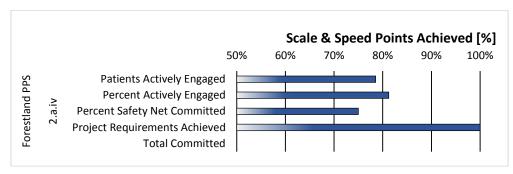
## Final Application Score 90.39

### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses
12	20	Response effectively addressed gaps identified by the CNA and linked these findings with the project design and sites included	<ul> <li>Response does not sufficiently identify the population the PPS intends to engage through implementation of this project</li> <li>Response does not clearly identify how all project hospitals will be better mobilized to effectively deal with patients who are experiencing a psychiatric crisis</li> </ul>

### **Project Scale and Speed<sup>5</sup>:**

Category	PPS Submissic	Points Achieve	Possible Points
Patients Actively Engaged	DY4 Q3/Q4	15.71	20
Percent Actively Engaged	19.00%	16.25	20
Percent Safety Net Committed	5.94%	7.50	10
Project Requirements Achieved	DY4 Q1/Q2	20.00	20
Total Committed	212	5.00	10
	Total	64.46	80



<sup>&</sup>lt;sup>5</sup> The Speed and Scale tables below are for visual reference only and reflect sample data from project 2.a.iv



viii. Project 3.b.i

PPS Name: Forestland PPS DSRIP Project Number: 3.b.i

**DSRIP Project Title:** Evidence-based strategies for disease management in high risk/affected populations

(adult only)

**Number of PPS' Pursuing This Project: 15** 

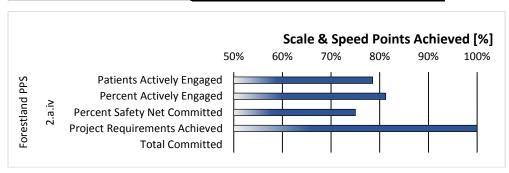
### Final Application Score 87.60

#### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses
15	20	Response effectively addressed gaps identified by the CNA and linked these findings with the project design and sites included	<ul> <li>Response does not sufficiently address how these challenges will be addressed, does not sufficiently identify interventions that will address the problems</li> <li>Response provided but inadequately addressed how the PPS will coordinate approach with other PPS operating same project in service area</li> </ul>

### **Project Scale and Speed<sup>6</sup>:**

Category	PPS Submissi	Points Achieve	Possible Point
Patients Actively Engaged	DY4 Q3/Q4	15.71	20
Percent Actively Engaged	19.00%	16.25	20
Percent Safety Net Committed	5.94%	7.50	10
Project Requirements Achieved	DY4 Q1/Q2	20.00	20
Total Committed	212	5.00	10
	Total	64.46	80



<sup>6</sup> The Speed and Scale tables below are for visual reference only and reflect sample data from project 2.a.iv

### ix. Project 3.c.i

**PPS Name:** Forestland PPS **DSRIP Project Number:** 3.c.i

**DSRIP Project Title:** Evidence-based strategies for disease management in high risk/affected populations

(adults only)

Number of PPS' Pursuing This Project: 10

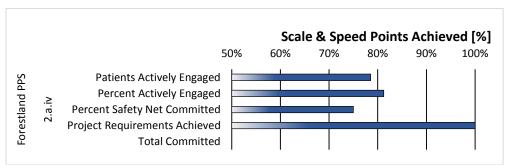
### Final Application Score 91.77

#### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses
15	20	<ul> <li>Response effectively addressed gaps identified by the CNA and linked these findings with the project design and sites included</li> <li>Response provides a clear explanation of the patient population PPS is expecting to engage through the implementation of this project</li> </ul>	<ul> <li>Response was non-specific to project scope. Response does not mention community resources that will be mobilized or repurposed</li> <li>The response identified challenges that are non-specific to project completion or success. Strategies are not aligned with challenges</li> <li>PPS provided response but did not identify how PPS would coordinate with other PPSs</li> </ul>

### **Project Scale and Speed**<sup>7</sup>:

Category	PPS Submissicp	Points Achieve	Possible Points
Patients Actively Engaged	DY4 Q3/Q4	15.71	20
Percent Actively Engaged	19.00%	16.25	20
Percent Safety Net Committed	5.94%	7.50	10
Project Requirements Achieved	DY4 Q1/Q2	20.00	20
Total Committed	212	5.00	10
	Total	64.46	80



<sup>&</sup>lt;sup>7</sup> The Speed and Scale tables below are for visual reference only and reflect sample data from project 2.a.iv



### x. Project 4.a.iii

PPS Name: Forestland PPS DSRIP Project Number: 4.a.iii

**DSRIP Project Title:** Strengthen Mental Health and Substance Abuse Infrastructure across Systems

**Number of PPS' Pursuing This Project: 13** 

## Final Application Score 82.71

### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses
18	100	<ul> <li>Response provides a clear explanation of the patient population PPS is expecting to engage through the implementation of this project</li> <li>Response identifies and describes the important project milestones relative to the implementation of this project and provides the anticipated timeline for achieving these milestones</li> </ul>	<ul> <li>The response indicates a lack of mental health services, the response could have been more detailed in terms of the specific service gaps in Forestland</li> <li>The response lacked detail regarding how social factors challenge will be addressed</li> <li>No response provided in how the PPS will coordinate with other PPS who seek to implement the same project</li> </ul>



### xi. Project 4.b.ii

PPS Name: Forestland PPS DSRIP Project Number: 4.b.ii

**DSRIP Project Title:** Increase Access to High Quality Chronic Disease Preventive Care and Management in Both Clinical and Community Settings (Note: This project targets chronic diseases that are not

included in domain 3, such as cancer

Number of PPS' Pursuing This Project: 11

## Final Application Score 97.48

#### **Individual Project Score:**

Subjective Points	Points Possible	Strengths	Weaknesses
18	100	<ul> <li>Response effectively addressed gaps identified by the CNA and linked these findings with the project design and sites included</li> <li>Response identifies and describes the important project milestones relative to the implementation of this project and provides the anticipated timeline for achieving these milestones</li> </ul>	Response noted 3 other PPSs in Forestland, but adequate response would have included partnering or collaboration strategies to most efficiently target the populations in Forestland with chronic conditions