Health Center Program
Site Visit Protocol:

Collaborative Relationships

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COLLABORATIVE RELATIONSHIPS

Primary Reviewer: Governance/Administrative Expert
Secondary Reviewer: Clinical Expert

Authority: Section 330(k)(3)(B) of the PHS Act; and 42 CFR 51c.303(n), 42 CFR 56.303(n), and 42 CFR 51c.305(h)

Document Checklist for Health Center Staff

Documents Provided at the Start of the Site Visit:

☐ Documentation (e.g., memoranda of agreement (MOAs) or memoranda of understanding (MOUs), letters, monthly collaboration meeting agendas with health center leaders, cross-referral of patients between health centers, evidence of membership on a city-wide community health planning council) of established collaboration with other providers and organizations in the health center’s service area, including local hospitals, specialty providers, and social service organizations, to provide access to services not available through the health center

☐ Documentation of coordination efforts with other federally-funded, state, and local health services delivery projects and programs serving similar patient populations in the service area. At a minimum, this includes documentation of efforts to establish coordination with one or more health centers in the service area (e.g., email or other correspondence of requests and responses for coordination)

Demonstrating Compliance

Element a: Coordination and Integration of Activities

The health center documents its efforts to collaborate with other providers or programs in the service area, including local hospitals, specialty providers, and social service organizations (including those that serve special populations), to provide access to services not available through the health center in order to support:

- Reductions in the non-urgent use of hospital emergency departments;
- Continuity of care across community providers; and
- Access to other health or community services that impact the patient population.

Site Visit Team Methodology

- Interview Project Director/CEO regarding collaboration activities, including example(s) of how the health center’s collaborative relationship(s) supports each of the following:
  - Reductions in the non-urgent use of hospital emergency departments;
  - Continuity of care across community providers; and
Site Visit Findings

1. Does the health center make efforts to collaborate with other providers or programs in the service area, specifically local hospitals, specialty providers, and social service organizations (including those that serve special populations), to provide access to services not available through the health center?
   - YES
   - NO

   If No, an explanation is required:

______________________________________________________________________

2. Was the health center able to provide at least one example of how its collaborative relationship(s) supports each of the following:
   - Reductions in the non-urgent use of hospital emergency departments;
   - Continuity of care across community providers; and
   - Access to other health or community services that impact the patient population?
   - YES
   - NO

   If No, an explanation is required:

______________________________________________________________________

Element b: Collaboration with Other Primary Care Providers

The health center documents its efforts to coordinate and integrate activities with other federally-funded, as well as State and local, health services delivery projects and programs serving similar patient populations in the service area (at a minimum, this would include establishing and maintaining relationships with other health centers in the service area).

Site Visit Team Methodology

- Review Uniform Data System (UDS) Mapper to identify other health centers with sites in the service area.
- Interview health center Project Director/CEO regarding coordination with other federally-funded, state, and local health services delivery projects and programs serving similar patient populations in the service area (at a minimum, other health centers in the service area).
- Review relevant documentation of efforts to coordinate or documentation of established coordination.
Site Visit Findings

3. Does the health center make efforts to coordinate and integrate with other federally-funded, state, and local health services delivery projects and programs serving similar patient populations in the service area?
   □ YES    □ NO

   If No, an explanation is required, including stating if there are no other health centers or primary care providers in the service area:

___________________________________________________________________________

4. Was the health center able to describe established relationships with at least one health center in the service area?
   □ YES    □ NO

   If No, an explanation is required, including stating if there are no other health centers or primary care providers in the service area:

___________________________________________________________________________

Element c: Expansion of HRSA-Approved Scope of Project

If the health center expands its HRSA-approved scope of project:

   • The health center obtains letters or other appropriate documents specific to the request or application that describe areas of coordination or collaboration with health care providers serving similar patient populations in the service area (health centers, rural health clinics, local hospitals including critical access hospitals, health departments, other providers including specialty providers, as applicable); or
   
   • If such letters or documents cannot be obtained from these providers, the health center documents its attempts to coordinate or collaborate with these health care providers (health centers, rural health clinics, local hospitals including critical access hospitals, health departments, other providers including specialty providers, as applicable) on the specific request or application proposal.

Site Visit Team Methodology

   N/A – HRSA assesses whether the health center has demonstrated compliance with this element through its internal review of change in scope requests and/or competing applications. No onsite review of this element is required.

Site Visit Findings

70 Expanding the HRSA-approved scope of project may occur by adding sites or services through change in scope requests, New Access Point competitive applications, or other supplemental funding applications.

71 Additional requirements for documented collaboration may apply based on specific Notices of Funding Opportunity (NOFOs), Notices of Award (NOAs), look-alike designation instructions, or other federal statutes, regulations, or policies.
N/A – HRSA assesses whether the health center has demonstrated compliance with this element through its internal review of change in scope requests and/or competing applications. No onsite review of this element is required.