

# **Health Center Program Site Visit Protocol:**

## **Coverage for Medical Emergencies During and After Hours**

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# COVERAGE FOR MEDICAL EMERGENCIES DURING AND AFTER HOURS

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**Primary Reviewer:** Clinical Expert

**Secondary Reviewer:** TBD

**Authority:** Section 330(b)(1)(A)(IV) and Section 330(k)(3)(A) of the PHS Act; and 42 CFR 51c.102(h)(4), 42 CFR 56.102(l)(4), 42 CFR 51c.303(a), and 42 CFR 56.303(a)

## Document Checklist for Health Center Staff

### Documents Provided Prior to Site Visit:

- Operating procedures for addressing medical emergencies during health center's hours of operation
- Operating procedures for responding to patient medical emergencies after hours

### Documents Provided at the Start of the Site Visit:

- Provider on-call schedules and answering service contract (if applicable; for health centers whose own providers cover after-hours calls)
- Written arrangements with non-health center providers/entities (e.g., formal agreements with other community providers, "nurse call" lines) for after-hours coverage (if applicable; for health centers that utilize non-health center providers)
- List of service delivery sites with names of at least one individual (clinical or non-clinical staff member) at each site trained and certified in basic life support, including a copy of that individual's current certification (e.g., credentialing file for licensed independent practitioner (LIP) or other licensed or certified practitioner (OLCP), certification of training if non-clinical staff)
- Instructions or information provided to patients for accessing after-hours coverage
- Three samples of after-hours clinical advice documentation in the patient record (e.g., screenshots selected by the health center)
- Documentation demonstrating systems/methods of tracking, recording and storing of after-hours coverage interactions (e.g., log of patient calls) and, if applicable, related follow-up

## Demonstrating Compliance

### Element a: Clinical Capacity for Responding to Emergencies During Hours of Operation

The health center has at least one staff member trained and certified in basic life support present at each HRSA-approved service site (as documented on Form 5B: Service Sites) to ensure the health center has the clinical capacity to respond to patient medical emergencies<sup>26</sup> during the health center's regularly scheduled hours of operation.<sup>27</sup>

#### Site Visit Team Methodology

- Interview health center clinical leadership.
- Review list of service delivery sites that identifies at least one individual per site with current certification in basic life support.

#### Site Visit Findings

1. Was there documentation that at least one staff member (clinical or non-clinical) trained and certified in basic life support is present at each HRSA-approved service delivery site?  
 YES       NO

If No, an explanation is required, including stating what, if any, provisions the health center has in place to respond to patient medical emergencies during regularly scheduled hours of operation at those site(s):

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### Element b: Procedures for Responding to Emergencies During Hours of Operation

The health center has and follows its applicable operating procedures when responding to patient medical emergencies during regularly scheduled hours of operation.

#### Site Visit Team Methodology

- Review health center's operating procedures for responding to medical emergencies.
- Interview CMO, Clinical Director and/or equivalent regarding how the health center HAS or WOULD follow its operating procedure when responding to a patient emergency.

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<sup>26</sup> Medical emergencies may, for example, include those related to physical, oral, behavioral, or other emergent health needs.

<sup>27</sup> See Health Center Program Compliance Manual, [Chapter 6: Accessible Location and Hours of Operation](#) for more information on hours of operation.

## Site Visit Findings

2. Were you able to confirm that the health center has operating procedures for responding to patient medical emergencies during the health center's regularly scheduled hours of operation?

YES       NO

If No, an explanation is required:

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3. Was the health center able to describe how it either has responded to or is prepared to respond to (e.g., staff training or drills on use of procedures) patient medical emergencies during regularly scheduled hours of operation?

YES       NO

If No, an explanation is required:

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## Element c: Procedures or Arrangements for After Hours Coverage

The health center has after-hours coverage operating procedures, which may include formal arrangements<sup>28</sup> with non-health center providers/entities that ensure:

- Coverage is provided via telephone or face-to-face by an individual with the qualification and training necessary to exercise professional judgment in assessing a health center patient's need for emergency medical care;
- Coverage includes the ability to refer patients either to a licensed independent practitioner for further consultation or to locations such as emergency rooms or urgent care facilities for further assessment or immediate care as needed; and
- Patients, including those with limited English proficiency,<sup>29</sup> are informed of and are able to access after-hours coverage, including being provided information and instructions in the language(s), literacy levels, and formats accessible to the health center's patient population.

## Site Visit Team Methodology

- Review the health center's operating procedures or, if applicable, other documentation of arrangements for responding to patient medical emergencies after hours.
- Review provider on-call schedules and answering service contract (if applicable).

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<sup>28</sup> See Health Center Program Compliance Manual, [Chapter 12: Contracts and Subawards](#) for more information on oversight over such arrangements.

<sup>29</sup> Under Section 602 of Title VI of the Civil Rights Act and the Department of Health and Human Services implementing regulations (45 C.F.R. Section 80.3(b)(2)), recipients of Federal financial assistance, including health centers, must take reasonable steps to ensure meaningful access to their programs, services, and activities by eligible Limited English Proficient (LEP) persons. See <http://www.hhs.gov/ocr/civilrights/resources/laws/summaryguidance.html> for further guidance on translating vital documents for LEP persons.

- Review instructions or information provided to patients for accessing after-hours coverage.
- Interview CMO, Clinical Director and/or equivalent and, if applicable, outreach or front desk staff regarding methods of informing patients of after-hours coverage.
- Using contact information for after-hours coverage (e.g., phone number provided by front desk staff), call the health center once the health center is closed. Identify yourself as the site visit reviewer.

## Site Visit Findings

4. Does the health center have written operating procedures or other documented arrangements for responding to patient medical emergencies after hours?

YES       NO

If No, an explanation is required:

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5. Based on the interview with clinical leadership and/or front desk staff, is information provided to patients at all health center service sites (as listed on Form 5B) on how to access after-hours coverage?

YES       NO

If No, an explanation is required:

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6. Has the health center addressed barriers that patients might face in attempting to utilize the health center's after-hours coverage? This would include barriers due to limited English proficiency or literacy levels.

YES       NO

If No, an explanation is required:

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7. Did the results from the call made to the health center after hours confirm the following:

- You were connected to an individual with the qualification and training necessary to exercise professional judgment to address an after-hours call?  
 YES       NO
- This individual would have the ability (if appropriate) to refer patients to a covering licensed independent practitioner for further consultation or to locations such as emergency rooms or urgent care facilities for further assessment or immediate care?  
 YES       NO
- Provisions are in place for calls received from patients with LEP?  
 YES       NO

If No was selected for any of the above, an explanation is required:

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## Element d: After Hours Call Documentation

The health center has documentation of after-hours calls and any necessary follow-up resulting from such calls for the purposes of continuity of care.<sup>30</sup>

### Site Visit Team Methodology

- Interview CMO, Clinical Director and/or equivalent.
- Review the health center's operating procedures or, if applicable, other documentation of arrangements (e.g., contract with nurse call line) for responding to patient medical emergencies after hours.
- Review three samples of after-hours documentation within the patient record (a screenshot of the record is also acceptable) provided by the health center.
- Request to view documentation or systems/methods for tracking, recording and storing after-hours call coverage interactions and, if applicable, related follow-up.

### Site Visit Findings

8. Does the health center document after-hours calls or, if no such calls have been received, does the health center have the capacity to document such calls?
- YES       NO

If No, an explanation is required:

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9. Does the health center (based on review of systems or the sample of records) provide the necessary follow-up, based on the nature of after-hours calls (e.g., health center contacts the patient within a prescribed number of days to check in on the patient's condition, schedule an appointment)?

**Note:** For health centers that had no after-hours calls that required follow-up (e.g., a newly-funded health center that has just started its operations), a review of operating procedures and results of the interview(s) with health center staff can be used when responding to this question.

YES       NO

If No, an explanation is required:

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<sup>30</sup> See Health Center Program Compliance Manual, [Chapter 8: Continuity of Care and Hospital Admitting](#) for more information on continuity of care.