

The BPHC Newly Funded Health Center Web Guide Resources for New and Existing Grantees

Developed by:

The U.S. Department of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Bureau of Primary Health Care (BPHC)
Office of Training and Technical Assistance Coordination (OTTAC)

The BPHC Newly Funded Health Center Web Guide is a self assessment tool designed to help new BPHC grantees provide high-quality primary health care from the day they open their doors for business. The Guide is a central hub for links to HRSA-approved templates, information pages, and policy documents, and many other resources. The intent of the Web Guide is to help Health Center grantees improve their quality and efficiency, work within Health Center Program Requirements, and access Federal policies, programs and resources intended for the specific needs of Health Centers.

This document is a printable version of a portion of the content available on the Web Guide. It was developed by the BPHC Office of Training and Technical Assistance Coordination and is hosted at:
<http://bphc.hrsa.gov/technicalassistance/index.html>

3d. Program Requirement 5: After Hours Coverage

Requirements:

- Health center provides professional coverage during hours when the center is closed.

Authority: Section 330(k)(3)(A) of the PHS Act

Where to Look for Answers: Policy for after-hours coverage.

Links and Additional Resources: There are no applicable resources on this topic. Your [State PCA](#) may have more information on this topic.

Table 1: After Hours Coverage Questions

These questions are intended to help grantees self-assess how well they are meeting the after-hours accessibility needs of their target populations.

#	Question	Answer
1	Is professional medical coverage available to patients when the center is closed?	
2	Does the general phone system provide information on how to access emergency care after hours?	
3	Is the answering service and/or provider able to communicate in the appropriate languages to serve the population?	
4	Is the written information and/or phone message about accessing care after hours provided in the appropriate languages?	
5	What mechanisms/arrangements does the grantee have for after hours coverage (e.g., does it include the health center clinicians, does it use other community clinicians)?	
6	Do all patients receive a written or verbal explanation regarding the procedures for accessing emergency medical/dental care after hours?	
7	Does the coverage system have established mechanisms for patients needing care to be seen in an appropriate location and assure timely follow-up by health center clinicians for patients seen after-hours?	