HRSA Operational Site Visits

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Origins of the Process

- Government Accountability Office report identified issues with HRSA grantee compliance process
  - “HRSA’s ability to identify grantees’ noncompliance with Health Center Program requirements is insufficient”
  - “GAO recommends that, among other things, HRSA… strengthen its ability to consistently identify and cite grantee noncompliance”

http://www.gao.gov/products/GAO-12-546
Operational Assessment 101

- Assesses compliance with all 19 Health Center program requirements
- Occurs once during every project period (3 years)
- Uses a standard review instrument call the “Health Center Site Visit Guide”
- Site visit team is generally comprised of three HRSA consultants and project officer
- Team will request documents for review in advance of visit and on-site
- Visit typically lasts three days
Program Requirements

1. Needs Assessment
2. Required and Additional Services
3. Staffing
4. Accessible Hours/Locations
5. After Hours Coverage
6. Hospital Privileges and Continuum of Care
7. Sliding Fee Discounts
8. QI/Assurance Plan
9. Key Management Staff
10. Contractual/Affiliation Agreements
11. Collaborative Relationships
12. Financial Management and Control
13. Billing and Collections
14. Budget
15. Program Data Reporting Systems
16. Scope of Project
17. Board Authority
18. Board Composition
19. Conflict of Interest

http://bphc.hrsa.gov/about/requirements/index.html
Site Visit Guide

Program Requirement 16: SCOPE OF PROJECT

**Authority:** 45 CFR Part 74.25

**Documents to Review Onsite or in Advance:**
1. Health Center UDS Trend Report
2. Health center’s official scope of project for sites and services (Forms 5A, 5B, and 5C)
3. Most Recent Form 2 Staffing Profile
4. Notice of Award and information for any recent New Access Point or other supplemental grant awards.

**Related HRSA Resources:**

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Questions</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health center maintains its funded scope of project (sites, services, service area, target population and providers), including any increases based on recent grant awards.</td>
<td>Has the health center <strong>significantly reduced its scope of project</strong> in terms of sites or services (e.g., stopped offering additional services, closed service sites) in the past 3 years?</td>
<td></td>
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<tr>
<td></td>
<td><em>(Grantees Only)</em> Has the grantee received any additional BPHC grant awards in the last 3 years that have expanded their funded scope of project (e.g., New Access Point, Service Expansion, Expanded Medical Capacity)? If yes, has the grantee successfully implemented the newly funded activity(ies) within the expected timeframe (e.g., hired new staff, expanded services, opened new sites, begun or completed minor alterations and renovations, reached the projected patient or visit levels if applicable)?</td>
<td></td>
</tr>
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<td></td>
<td>For grantees that received a FY 2013 or FY 2014 New Access Point Award <em>(Satellite or Newly Funded)</em>: Is at least one full-time, permanent primary care site open and operational?</td>
<td></td>
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</tbody>
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## Site Visit Agenda

- Entrance Conference
- Tours
- Board Meeting
- Working / Review Time
- Staff Meetings
- CEO Debriefings
- Exit Conference

### Draft Site Visit Agenda

**DAY 1:**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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</table>
| 9:00 AM – 11 AM | Entrance Conference  
Introduce Consultant Team/Purpose of the Site Visit
Health Center Overview- Sr. Management Team/Board Leadership |
| 11:00 AM - 11:00 AM | Tour representative sites (Timing and sites to be determined)                                       |
| 1:00 – 2:00 PM | Lunch                                                                                              |
| 2:00 PM - 4:30 PM | Individual Interviews. Information gathering/document review                                       |
| 4:30 PM – 5:00 PM | Update the Chief Executive Officer                                                               |

**DAY 2:**

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>8:30 AM - 12:00 PM</td>
<td>Continue Meeting with Senior Management Team and Health Center Staff. Information gathering/document review</td>
</tr>
<tr>
<td>12:00 PM – 1:00 PM</td>
<td>Working Lunch with Board of Directors (Or, if preferred, we can arrange an evening meeting with the Board to facilitate attendance.)</td>
</tr>
<tr>
<td>1:00 PM - 4:30 PM</td>
<td>Continue Meeting with Senior Management Team and Health Center Staff. Continue information gathering/document review</td>
</tr>
<tr>
<td>4:30 PM – 5:00 PM</td>
<td>Update the Chief Executive Officer</td>
</tr>
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**DAY 3:**

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<td>8:30 AM - 12:00 AM</td>
<td>Continue Meeting with Senior Management Team and Health Center Staff. Continue information gathering/document review</td>
</tr>
<tr>
<td>12:00 AM – 1:00 PM</td>
<td>Lunch</td>
</tr>
<tr>
<td>1:00 PM - 3:00 PM</td>
<td>Continue Meeting with Senior Management Team and Health Center Staff. Continue information gathering/document review, review and finalize Technical Assistance recommendations</td>
</tr>
<tr>
<td>3:00 PM</td>
<td>Exit Interview with Senior Management Team/Board leadership. Consultants summarize findings.</td>
</tr>
<tr>
<td>4:30 PM</td>
<td>Team departs</td>
</tr>
</tbody>
</table>
Health Center Board Preparation

- Health Center boards play a critical (and mandatory) role in review and approval of the policies and actions HRSA review consultants rely on to assess compliance
  - Patient/community control is a central tenant of the Health Center program and reviewers look for engaged governance
- MPCA recommends board members participate in site visit preparation to become comfortable with the process
Health Center Board Participation

- Board participation in the site visit process is welcome and encouraged by both HRSA and MPCA.
- Beyond the specific board meeting with HRSA review consultants, board members often attend the entrance and exit conferences.
- Robust board participation during the site visit reflects positively on the Health Center organization.
Site Visit Outcomes

- The site visit team will deliver their findings in several ways:
  - “Met” or “Not Met” for each program requirement
  - Discussion on what needs to be altered or improved to meet requirements
  - Documentation of “best practices” and “innovative strategies” in areas where the Health Center has exemplary performance

- The team will verbally share findings at the end of their visit and provide a written final report
Grant Condition Process

- “Not met” program requirements generally trigger grant conditions
- The grant condition process follows a specific progressive pattern:
  - Condition placed
  - 90 days to respond
  - 30 days for HRSA review
  - 120 days to implement (if needed)
  - Condition removed if response is adequate
What is Happening in Michigan

- Almost all centers have had review
- Some centers moved to a 1 year grant cycles, others on 3 year cycles
All Health Centers Not Met by Program Requirement

1. Needs Assessment
2. Required and Additional Services
3. Staffing
4. Accessible Hours/Locations
5. After Hours Coverage
6. Hospital Privileges and Continuum of Care
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New Health Centers Compared to Established Health Centers

1. Needs Assessment
2. Required and Additional Services
3. Staffing
4. Accessible Hours/Locations
5. After Hours Coverage
6. Hospital Privileges and Continuum of Care
7. Sliding Fee Discounts
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*New center is defined as two years or fewer as a grantee*
Questions?