

Before, During, and After Disasters: Community Health Center Challenges, Needs, and Impacts



Community health centers serve 31.5 million patients annually across approximately 15,000 sites. Health centers provide essential care to millions of underserved individuals and communities across the U.S., playing a vital role in addressing health disparities. Centers are instrumental in ensuring that the most vulnerable and underserved populations have access to quality healthcare. Community health centers also result in overall savings for our health system. Research shows [for every \\$1 invested in primary care](#), like the services provided at community health centers, there is a downstream savings of \$13.

Preparedness efforts typically center around hospital systems despite health centers generating [\\$85 million in economic](#) activity in their communities and saving the overall health system [\\$24 billion each year](#). Policies and funding allocations must prioritize health center needs to support robust resiliency efforts.

Community Health Centers

Challenges, Needs, and Impacts

About **14,000 community health centers** across the US serve **31.5 million patients** annually, playing a vital role in providing healthcare and addressing health disparities underserved individuals.

Who are community health center patients?

Compared to the low-income population overall, community health center patients are **more racially diverse** and fall **further below on the poverty line**.



populations experiencing **homelessness**



populations residing in **public housing**



individuals who require care in **other languages**
(not English)



agricultural workers and their families

Community health center patients comprise 1 in 11 Americans.

80% of patients are racial and/or ethnic **minority populations**



90% of patients live **200% below the federal poverty line**



What types of health needs do community health centers treat?

Health centers frequently treat patients with complex health needs who suffer from **chronic conditions** at higher rates compared to the general population.

Compared to private medical facilities, community health centers have:

35% higher likelihood of caring for patients with **1 chronic condition**



31% higher likelihood of caring for patients with **2+ chronic conditions**

Source: <https://www.nachc.org/wp-content/uploads/2023/07/Community-Health-Center-Chartbook-2023-2021UDS.pdf>



Health centers' role through the disaster lifecycle

Community Health Centers play a core role in critical healthcare infrastructure, particularly during emergency events. Because health centers provide care to patients in already underserved areas, regardless of insurance or medical need, these communities often feel the impact of emergencies and disasters more severely. Health centers are uniquely positioned to support increased patient volume/needs in an emergency event and to consequently experience increased strain.

Preparedness



There are several key needs to ensure community health centers are best prepared for an emergency:

1. Adequate disaster response training for staff and providers
2. Sustained funding to provide response training and to stock medical supplies and medications
3. Outline and educate on defined plans-of-action in the event of emergencies
4. Increase broadband access expansion for patients to use telehealth for healthcare in emergencies
5. Sustained and sufficient funding reserves to accommodate medical surge during emergencies

During a disaster, health centers take on triage, treatment, and referral care to successfully treat patients, extend operating hours, and stand-up temporary locations for care delivery, making them a strong control point preventing patient surge in hospitals/ancillary facilities. During these surge events health centers increase coordination with local public health departments, emergency management agencies, and other healthcare facilities. Health centers alleviate strain on hospitals/

health systems and provide care because they establish long term relationships with patients, supporting chronic disease prevention, and act nimbly during disasters to meet patient needs. For example, patient mental health visits to community health centers [increased by 19%](#) during the COVID-19 pandemic. A survey conducted in 2021 revealed that [64% of community health centers](#) increased mental healthcare services for new and existing patients.

Response



There are several key needs to ensure community health centers are best equipped during emergency response:

1. Have on site sufficient equipment and supplies, medication, and personal protective equipment
2. Policies need to allow for staff portability, such as FTCA, to increase numbers of trained staff
3. Sufficient funding to allow providers to treat all patients, regardless of insurance status, to assuage concerns about reimbursement and enable them to treat all patients
4. Increase communication with other health centers and state government personnel
5. Increase broadband access expansion for patients to use telehealth for healthcare in emergencies
6. Adequate funding, resources, and logistics management to stand up temporary care delivery sites

In the recovery phase after a disaster, community health centers largely focus on maintaining patient treatment and providing follow up care to impacted patients.

Recovery



There are several key needs to ensure community health centers best recover from emergency response:

1. Sufficient funding for full recovery to prior capacity
2. Establish network of community supports for health centers and staff to connect with surrounding centers
3. Funding and resources to provide treatment and support for staff that have been impacted
4. Conduct after action report evaluating how response went to apply lessons learned to future preparations and response



Operational Challenges

Community health centers face key operational challenges that negatively impact their emergency preparedness and response capabilities.

1

Insufficient staff and healthcare workforce.

2

Insufficient funding to recruit and retain healthcare workforce.

3

Limited resources to build up preparedness training and supplies.

Needs

Community health centers require sustained investments to bolster resiliency in the face of disasters.

1

Federal policies that promote recruitment and retention.

2

Long-term, federal funding to sustain staff and healthcare workforce.

3

Federal funding to train staff and prepare supplies (PPE, medications, etc.) for emergency response and recovery.

Policies important to community health center preparedness



Telehealth

Telehealth is a valuable tool for health centers to use before and during disasters to provide increased and sustained access to care to impacted patients. In health centers throughout the U.S., [99.3% \(1,364\) use telehealth](#) to provide various services.



Telehealth Reimbursement

Beyond broadband access, telehealth delivered care will be more accessible with expansion of reimbursement. Reimbursement expansion allows for more patients to access care [during emergencies](#) (and otherwise) and reimbursement must be established before an event.



Broadband access

[Broadband access is limited](#), particularly in rural areas where community health centers are heavily relied on. Studies show that [health outcomes and internet access](#) are strongly correlated. Implementation of [broadband is viewed as a social determinant of health](#) and lack of internet access is correlated with worse health outcomes. Telehealth care is has been [shown effective in improving health outcomes](#) when treating patients among racial/ethnic populations. However, there are [barriers to equitable implementation](#) including high cost and lack of technological literacy. Broadband expansion would improve telehealth reach to health center patients before a disaster and during a disaster to increase access to care. Increased broadband access is important to care continuity during an event.



Staff portability

Flexible staffing is important during a disaster because community health centers rely on robust and complete staffing to serve the full breadth of patient needs. The healthcare workforce relies on liability protections to treat patients. The Federal Tort Claims Act (FTCA) is an important tool to increase staff and workforce during a disaster and emergency.

The FTCA, [enacted in 1946](#), is federal legislation providing compensation, through legal means, for individuals who have suffered personal injury, death, or damage caused by negligent acts of an employee of the federal government. FTCA coverage expanded to include malpractice liability protection for health centers through the [Federally Supported Health Centers Assistance Act of 1992 and 1995](#). The [FTCA](#) has critical application for health centers in emergencies. During a disaster, health centers may rely more heavily on volunteers or temporary healthcare workers to meet the needs of medical surges.

Find More Resources and Ways to Support Community Health Centers

To learn more about ways to support community health centers.

Workforce Resources

-  Publication: [Building a Resilient & Trauma-Informed Workforce Factsheet](#)
-  Resource: [C-Suite Toolkit: HPET for Recruitment and Retention](#)
-  Publication: [Health Center Onboarding Checklist](#)

Sign up now to become an [ACU Advocate](#) and get the latest news on how to support increased funding for community health centers and for essential primary care workforce programs -- the National Health Service Corps and Teaching Health Center Graduate Medical Education programs, which support residents and providers who practice in underserved communities.

Further community health center resources

-  <https://healthcareready.org/community-health-centers-and-clinic-resources/>
-  <https://healthcareready.org/telehealths-applications-for-preparedness-and-response/>
-  <https://healthcareready.org/cdrt/>
-  <https://healthcareready.org/resource-center/>



Association of Clinicians for the Underserved

ACU leads advocacy, clinical, operational and equity excellence to develop and support clinicians and the healthcare workforce caring for America's underserved communities. The Association of Clinicians for the Underserved is a uniquely transdisciplinary membership organization striving to establish a robust and diverse workforce to help transform communities to achieve health equity for all. To support clinicians and organizations caring for medically underserved communities, ACU provides professional education, training and technical assistance, clinical tools, and more.



Healthcare Ready

Healthcare Ready builds resilient communities that are prepared for, can respond to, and recover from disasters and disease outbreaks. The health of all, especially those most impacted by these crises, depends on strong infrastructure, seamless emergency response and supply chain coordination to ensure continuity of care. Healthcare Ready leverages unique relationships with government, nonprofit and medical supply chains to build and enhance the resiliency of communities before, during and after disasters.