



The National Health Center Training and Technical Assistance (TTA) Needs Assessment

The Health Resources and Services Administration’s Bureau of Primary Health Care (HRSA/BPHC) tasked the National Association of Community Health Centers (NACHC) with conducting a single, consolidated national needs assessment in partnership with all 20 National Cooperative Agreement (NCA) entities. The results are intended to inform the design and delivery of training and technical assistance (TTA) provided by HRSA/BPHC through National Cooperative Agreement (NCA) holders. The national health center TTA needs assessment questionnaire was distributed electronically during Fall 2018 among health centers throughout the country, with 56% of health centers responding. This State Profile provides a “top line” summary of needs assessment findings based on respondents in a specific state.

Top Line Results - Alabama

Response Rate

# Of State Health Centers	15
# Of Unique Health Centers Participating	7
# Of Individual Respondents	8
Health Center Response Rate	47%

Health Centers Accessing TTA Services ¹

Accessed TTA in the Past Year	88%
Did Not Access TTA in the Past Year	13%
*Plan to Access TTA in the Next Year	0%

**Of those that did NOT access TTA in the Past Year*

Top Ranked TTA Need by Percent Reporting ^{1, 2}

Value-based Health Care Transformation	43%
Clinical	29%
Enabling Services and Addressing Social Determinants of Health	14%
Operations	14%

Note: *One respondent represented a Health Center Program look-alike organization, which is not included in this count.*

¹Analysis of this data at the individual respondent level

²Respondents rated eight TTA categories by priority of need. Information provided here includes the percent of individual respondents reporting each category as their top TTA need.



The list below is reflective of the TTA topics covered in the National Health Center Needs Assessment. Respondents ranked TTA topics of greatest importance to their Health Center organization.

- **Clinical TTA**: Refers to TTA intended to improve health center delivery of quality primary care services.
- **Finance TTA**: Refers to TTA intended to improve health center awareness, understanding of relevant financial programs, policies and related regulations and capital financing planning.
- **Operations TTA**: Refers to TTA intended to promote operational excellence and efficiencies in the areas of governance, expansion planning, emergency preparedness, programs, policies and procedures.
- **Workforce, Building Staff Skills, Leadership Development TTA**: Refers to TTA intended to support health centers in the areas of leadership, management, recruitment and retention.
- **Health Information Technology TTA**: Refers to TTA intended to support health centers' improvement in EHR capabilities, quality recognition, receipt of related health IT incentive payments due to use of EHR systems and implementation of telehealth services.
- **Special and Vulnerable Populations TTA**: Refers to TTA intended to help health centers improve delivery of services to medically underserved, or a special medically underserved population comprised of migratory and seasonal agricultural workers, the homeless, and residents of public housing.
- **Enabling Services and Addressing Social Determinants of Health TTA**: Refers to TTA to support improvement of health centers' delivery of non-clinical services that do not include direct patient services that enable individuals to access health care and improve health outcomes.
- **Value –based Health Care Transformation TTA**: Refers to TTA that helps promotes clinical, financial, operational improvements and/or other process-related activities necessary to ensure health centers can successfully participate in value-based payment environments or other services delivery models which reward or incentivize delivery of high quality health care.