As the nation responds to COVID-19, it is important to ensure medically underserved and uninsured populations have access to testing, and that COVID-19 patients receive follow-up services (e.g., contact tracing, case management, reporting, and isolation/quarantine). It is also important that health center patients, particularly those at higher risk of infection or severe symptoms, have access to the information and tools needed to mitigate exposure to SARS-CoV-2.

The National Association of Community Health Centers (NACHC) in collaboration with the Centers for Disease Control and Prevention (CDC) and in coordination with the Health Resources and Services Administration (HRSA), have aligned strategies and resources to support health centers’ efforts to better serve their patients. NACHC is developing and implementing a four-prong approach to help health centers build their capacity to more effectively respond to COVID-19 and future public health emergencies.

- **MULTI-STATE QUALITY IMPROVEMENT EFFORT**
  - to inform continuous improvement for COVID-19 care with innovative, collaborative and measurable models, to enhance health centers’ response and recovery
- **NATIONAL STRATEGY** for health center education around response, recovery, and reimagined care
- Tools and resources for creating evidence-based **CRISIS BUSINESS CONTINUITY PLANS** in response to COVID-19
- **AWAWARENESS CAMPAIGN** highlighting CDC and NACHC COVID-19 resources

**MULTI-STATE QUALITY IMPROVEMENT EFFORT**

**APPROACH**

- Engage 6 regional and state HCCNs and PCAs with reach across the United States as project partners
- Build an infrastructure for data aggregation, data quality improvement and connect partners to Health Information Technology (HIT) innovation opportunities
- Collaborate with partners to support better utilization of existing data, systems, and data collection of their patient populations to describe the health burden, disparities, and overall impact of COVID-19
- Gather and analyze data in the NACHC registry on COVID-19 for quality improvement, public health surveillance, and outcomes evaluation. Registry data will be used to inform local, state, and national COVID-19 response efforts

**ANTICIPATED OUTCOMES**

- NACHC’s infrastructure and data sharing procedures develop the foundation for a reusable infrastructure for community health center public health
Lessons learned and HIT data and tools are shared with NACHC, health centers, PCAs and HCCNs, CDC, HRSA, and other public health organizations to adapt and scale.

**NATIONAL STRATEGY**

**APPROACH**
- Design a three-part national webinar series to address COVID-19 response, recovery, and re-imagined care. Topics to include:
  - Business continuity planning
  - Data fundamentals—collecting, sharing standardized data, reporting, and analysis
  - Promising practice models in response to COVID-19
- Incorporate training and technical assistance that utilizes CDC guidance, resources, and tools

**ANTICIPATED OUTCOMES**
- Increased leadership decision-making to address COVID-19 needs strategically and systematically

**CRISIS BUSINESS CONTINUITY PLAN**

**APPROACH**
- Partner with Primary Care Development Corporation (PCDC) to build curriculum, tools, and templates and conduct technical assistance and trainings

**ANTICIPATED OUTCOMES**
- Produce a set of Business Continuity planning products and resources to assist health center leadership teams developing or improving their preparation and plans for responding to COVID-19 and other business disruption crises
- Identify key metrics for the Crisis Business Continuity Plan

**AWARENESS CAMPAIGN**

**APPROACH**
- Create a monthly NACHC COVID-19 Response and Recovery in Action e-newsletter as the central communication platform
- Amplify select stories and information published in the COVID-19 Response and Recovery in Action e-newsletter via NACHC’s social, digital, and electronic communication platforms

**ANTICIPATED OUTCOMES**
- Health center and PCA leadership and care teams remain consistently informed about CDC/NACHC’s COVID-19 pandemic response and recovery strategies, resources, and learnings and distribute content to their internal teams and/or patient population

**PROJECT TIMELINE**

<table>
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<th>MULTISTATE QUALITY IMPROVEMENT EFFORT</th>
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<td>Dissemination of Curriculum &amp; Action Guide to the field</td>
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<td>Extend &amp; Improve</td>
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<tr>
<td>Evaluate, Report, &amp; Disseminate Findings</td>
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**MULTISTATE QUALITY IMPROVEMENT EFFORT**

- Jul 2020
- Aug
- Sep
- Oct
- Nov
- Dec
- Jan 2021
- Feb
- Mar
- Apr
- May
- Jun
- Jul