

Assurances for NC Farmworker Health Program Funding
Track I: Farmworker Health Service Delivery Site

I, the undersigned, agree to ensure the following obligations are met:

Program Expectations

1. Provide or have a formal referral arrangement for the following services: primary care, diagnostic x-ray, diagnostic laboratory, family planning, immunizations, well child services, gynecological care, obstetrical care, preventive dental services, nutrition, pharmaceuticals, behavioral health services, and environmental health services (prevent, detect, and mitigate unhealthy environmental conditions). *
2. Provide or link farmworkers with primary care services during some evening and/or weekend hours. *
3. Ensure that language and transportation are not barriers to health care services. *
4. Utilize a formal arrangement for hospitalization, discharge planning, and post discharge follow up to ensure continuity of care and the timely transfer of information between the clinic and the hospital. *
5. Utilize a linguistically accessible after-hours professional coverage system for patients when the agency is closed. *
6. Utilize a patient referral and tracking system when patients are referred outside of the agency for services. *
7. Utilize a sliding fee discount scale based on income and family size for those within 200% of Federal Poverty Guidelines to determine the fee for billable services. *
8. Provide eligibility assistance support to patients to help facilitate connection to local, state, and national resources when applicable.*
9. Ensure that no patients are denied primary care services due to an individual's inability to pay. *
10. Grantees that provide billable services will have billing, credit and collection policies and procedures to ensure appropriate collection of reimbursement from public and third-party payors and of patient payments for covered services within a reasonable amount of time. In order to prevent collection policies from being a barrier to necessary care, policies should include criteria to waive fees and extend payment timeframes.*
11. Ensure that all non-licensed staff funded by NCFHP to provide patient services have been initially credentialed and are being privileged in a recurring process according to your agency's policies. *
12. Ensure that outreach staff funded through this grant dedicate the majority of their time conducting outreach, health education, case management services and other enabling services with farmworkers outside of the agency (50% for outreach coordinators and 70% for outreach workers).
13. Ensure that all NCFHP supported outreach staff who utilize personal vehicles for work purposes, including transporting patients, have the appropriate insurance to cover the employee and patient in case of an accident.
14. Have an emergency plan that includes back-up systems to facilitate communications and ensuring patient records access. These plans will be shared with NCFHP in their grant application. *
15. Have at least one staff member trained and certified in Basic Life Support present at each service delivery site during regularly scheduled hours of operation. *
16. Have operating procedures to respond to patient medical emergencies during regularly scheduled hours of operation. *

Additional Program Expectations of Agencies Receiving Funds for Medical Care

17. Ensure that all licensed personnel caring for farmworkers, including licensed independent providers and other licensed or certified providers, have been credentialed and privileged according to your agency's credentialing and privileging policies and in accordance with applicable federal, state and local laws. This must include verification of provider licensure, certification, or registration. *

18. Ensure that privileging is a recurring process and includes routine assessment of fitness for duty and clinical competence to perform the duties that they have been privileged to perform.
19. Maintain individual medical records for each farmworker patient and perform at least quarterly peer review of these charts to inform privileging of providers and assessing their clinical competence. *
20. Have a written medical emergency policy to ensure staff preparedness to provide timely and effective response to medical emergencies. *
21. Conduct a yearly medical chart audit as requested by NCFHP. *
22. Have a farmworker-focused continuous quality improvement (CQI) team which conducts regular clinical CQI related to farmworkers or maintain farmworker representation in organizational level CQI committee. *
23. Use the PHQ-9 at each medical visit for every patient with an active diagnosis of depression. *

Meeting Requirements

1. Outreach Workers and Coordinators will attend required NCFHP Farmworker Health Outreach Trainings.
2. Outreach Coordinators and/or at least one agency administrator will attend the annual Operational Planning Retreat.
3. Participate in at least one site visit annually when the following may be assessed: charts, clinical protocols and policies, method of evaluation of medical providers, communication between outreach workers and providers, inclusion of Health Assessment in medical record, availability of interpretation services, identification of farmworker patients, and verification that agency is compliant with ORH contract expectations.

Documentation and Reporting Requirements

1. Utilize NCFHP's program forms as specified, including the Adult, Adolescent, and Pediatric Health Assessments and associated forms.
2. Utilize the PHQ-9 and offer a behavioral health referral when a patient screens positive for initial behavioral health questions on the health assessment.
3. Utilize Acute Illness Response (AIR) protocol during completion of health assessment when a farmworker indicates pesticide exposure with symptoms within the current agricultural season.
4. Ensure completed Health Assessment and associated forms are added to the patient's medical record.
5. Enter encounter data in NCFHP's customized software package, within 2 weeks of the encounter to assist with reporting required data elements of the Uniform Data System (UDS). This is a federal set of data that all Health Center Program grantees must submit to HRSA. NCFHP will provide access to the package.
6. Submit Farmworker Feedback Surveys to NCFHP as specified by deadlines. *
7. Submit required ORH documents associated with receipt of funds from state agency.
8. Submit COVID-19 case reports to NCFHP within one week.
9. Maintain compliance with HIPAA regulations, including adherence to a privacy and security policy that references unique risks associated with outreach.
10. Ensure outreach staff supported with NCFHP funds sign the NCFHP Confidentiality form on an annual basis.

Executive Director, Applicant Agency

Date

*Required under HRSA's Health Center Program Requirements