This fact sheet reflects the Advancing Health Center Excellence Framework released in 2020. The framework is undergoing further refinement and development, and an updated version with additional resources is planned for later in 2023.

Advancing Health Center Excellence

The Health Resources and Services Administration (HRSA) Advancing Health Center Excellence Framework is a conceptual structure aimed at promoting Health Center Program grantee excellence in seven key domain areas, shown in Figure 1, which align with HRSA's mission – "to improve health outcomes and address health disparities through access to quality services, a skilled health workforce, and innovative, high-value programs."[1] By focusing on becoming leaders in primary care across the domains, applying the Advancing Health Center Excellence framework enables health centers to:

- Assess their current state of performance across the seven domains;
- Identify a desired future state of performance;
- Identify, prioritize, and inform strategies to address needs to narrow the gap between current performance and a desired future state of performance.
- Identify data-driven and evidence-based capabilities, activities, behaviors, and resources needed to reach and sustain a higher level of domain performance.

The framework will also help HRSA make decisions about deploying resources, including providing technical assistance and funding, with more intention and transparency.

The seven domain areas are interdependent and interact to achieve a common aim – high-quality primary and preventive care. Each of the seven domains include components that characterize ideal health center performance expectations, levels of maturity, and performance measures and activities. The performance measures and related activities can be adjusted to meet HRSA's Health Center Program goals and needs. Collectively, the domains and their corresponding parts promote health equity and innovation, and enable health centers to monitor their performance and achieve a sustainable, high-performing state.
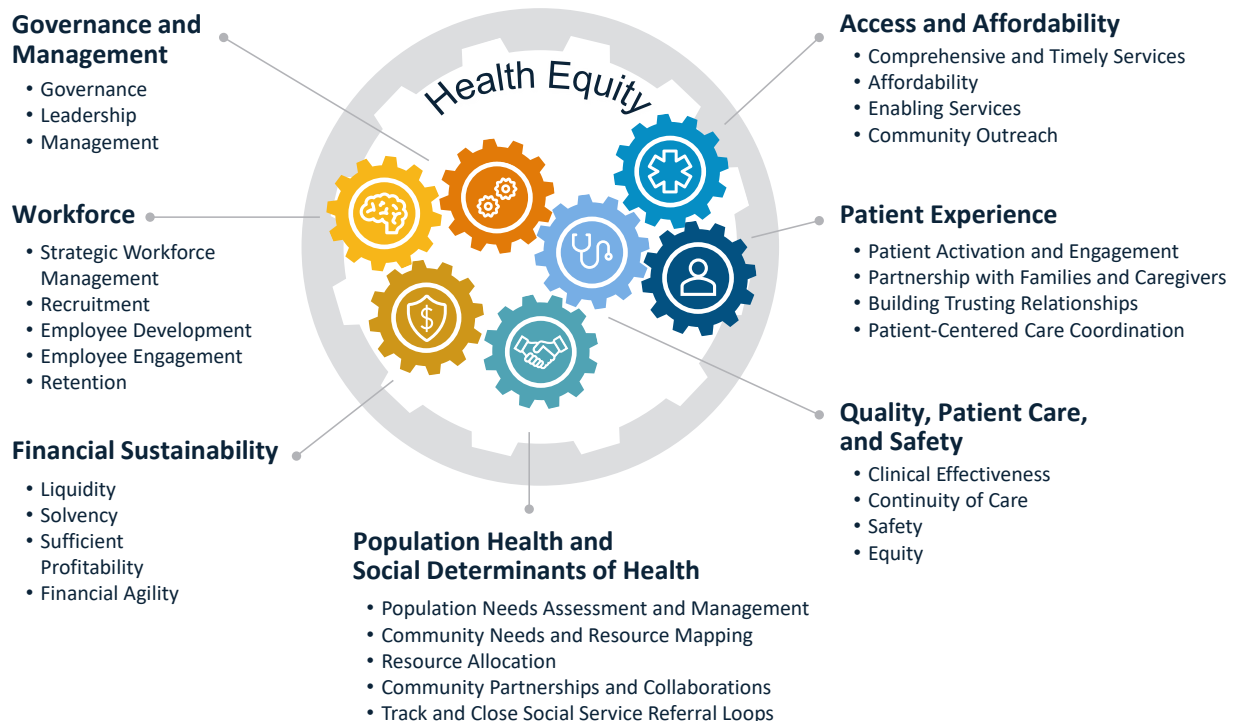

Governance and Management
- Governance
- Leadership
- Management

Workforce
- Strategic Workforce Management
- Recruitment
- Employee Development
- Employee Engagement
- Retention

Financial Sustainability
- Liquidity
- Solvency
- Sufficient Profitability
- Financial Agility

Health Equity

Access and Affordability
- Comprehensive and Timely Services
- Affordability
- Enabling Services
- Community Outreach

Patient Experience
- Patient Activation and Engagement
- Partnership with Families and Caregivers
- Building Trusting Relationships
- Patient-Centered Care Coordination

Quality, Patient Care, and Safety
- Clinical Effectiveness
- Continuity of Care
- Safety
- Equity

Population Health and Social Determinants of Health
- Population Needs Assessment and Management
- Community Needs and Resource Mapping
- Resource Allocation
- Community Partnerships and Collaborations
- Track and Close Social Service Referral Loops

Figure 1. GPM system domains

[1] Health Resources and Services Administration. 2019. About HRSA. Retrieved from https://www.hrsa.gov/about/index.html

Performance Domains

The Advancing Health Center Excellence Framework includes two types of domain areas, 1) operational and 2) service delivery.

Operational Domain Areas: The operational domains include: governance and management; workforce; and financial sustainability. These domains assess the operational efficiencies and effectiveness of the health center. The health center operational domains are the foundation to measure the health center's ability to provide services that reflect the needs of their patient population and service area.

Service Delivery Domains: The service delivery domains include: quality, patient care, and safety; patient experience; access and affordability; and population health and social determinants of health (SDOH). These service delivery domains directly impact patient care and the community. Additionally, the distinct value health centers bring to their patients and the communities they serve is through the service delivery domains.

Grantee Performance and Levels of Maturity

Each Advancing Health Center Excellence domain has a maturity model to characterize the measures and activities representing health center capabilities and development. The foundation of performance is compliance with the Health Center Program. A health center can perform at different levels of maturity across different domains, as shown in Figure 2. The maturity levels provide benchmarks (through measures or activities) for evaluating the current capability level of a health center's practices and outcomes. These domain maturity models serve as a basis for setting performance improvement goals and provide context for achieving those goals.

There are four levels of health center maturity that characterize a continuum of performance for each domain, with leadership as highest performance level The levels progress in maturity from compliance-driven, fundamental, strategic, to leading as described in Figure 3. Each maturity level builds on the success of the previous level by adding a new functionality, an increase in capability, or an additional strategic integration. For each maturity level, a health center must conduct all activities within that level and the level(s) below.
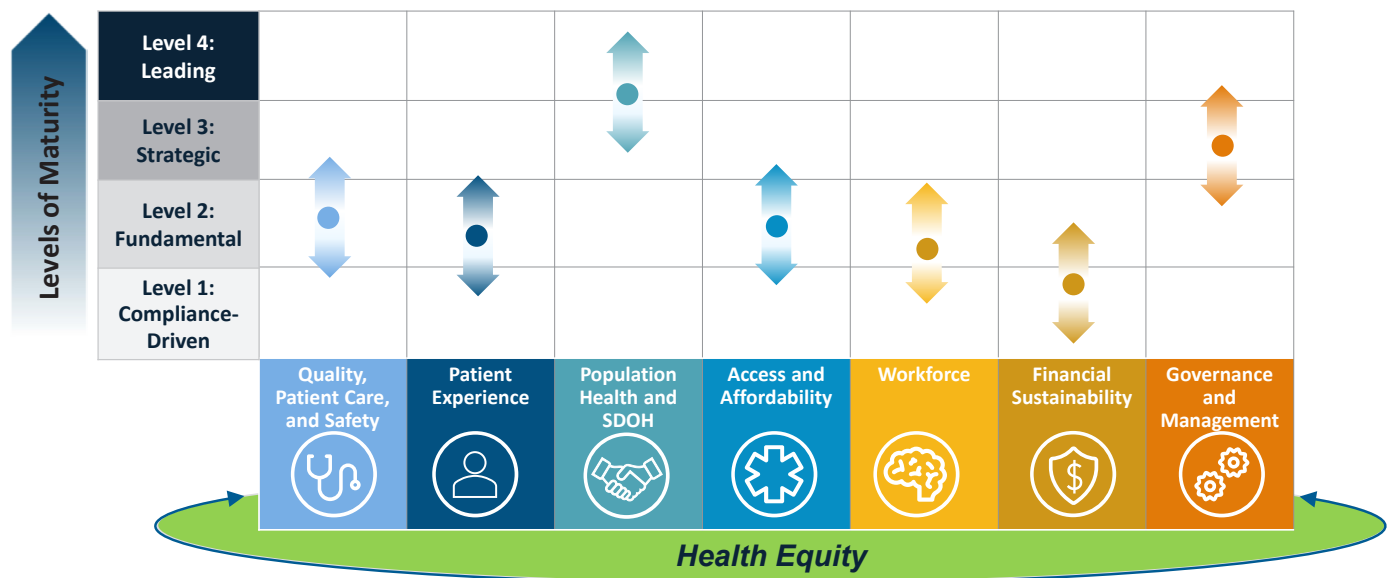

Figure 2. Illustrative health center domain performance

Level of Maturity	Level 4: Leading	Health center employs leading practices in the domain, fully integrating the domain area into the health center strategy.
	Level 3: Strategic	Domain area proactively managed and aligned with the health center strategy.
	Level 2: Fundamental	Domain area tactically managed and health center strategy is partially or fully defined.
	Level 1: Compliance-driven	Health center is compliant with all relevant program requirements to the domain area.

Figure 3. Performance levels of maturity

Advancing Health Center Excellence

Domain measures or activities and levels of maturity will enable health centers to self-assess performance in each domain. Health centers can then use measures and activities in higher levels of maturity to map out performance improvement strategies and a path toward higher levels of maturity. A health center will do best to focus their performance improvement activities in a manner that is sustainable and manageable based on resources available. Health centers should consider the interdependence of the domains and any possible downstream effects of shifting their performance focus.

The Advancing Health Center Excellence framework provides a foundation for identification of health center performance across the seven domains and enables flexible application to HRSA's Health Center Program. While currently available measures through the Uniform Data System (UDS) are highlighted, possible measures for future use are also identified throughout the domains. Activities are identified across the levels of maturity for each domain to provide a qualitative assessment of health center maturity. Future work on measure development can supplement this qualitative assessment by quantitatively understanding how well health centers are conducting these activities.
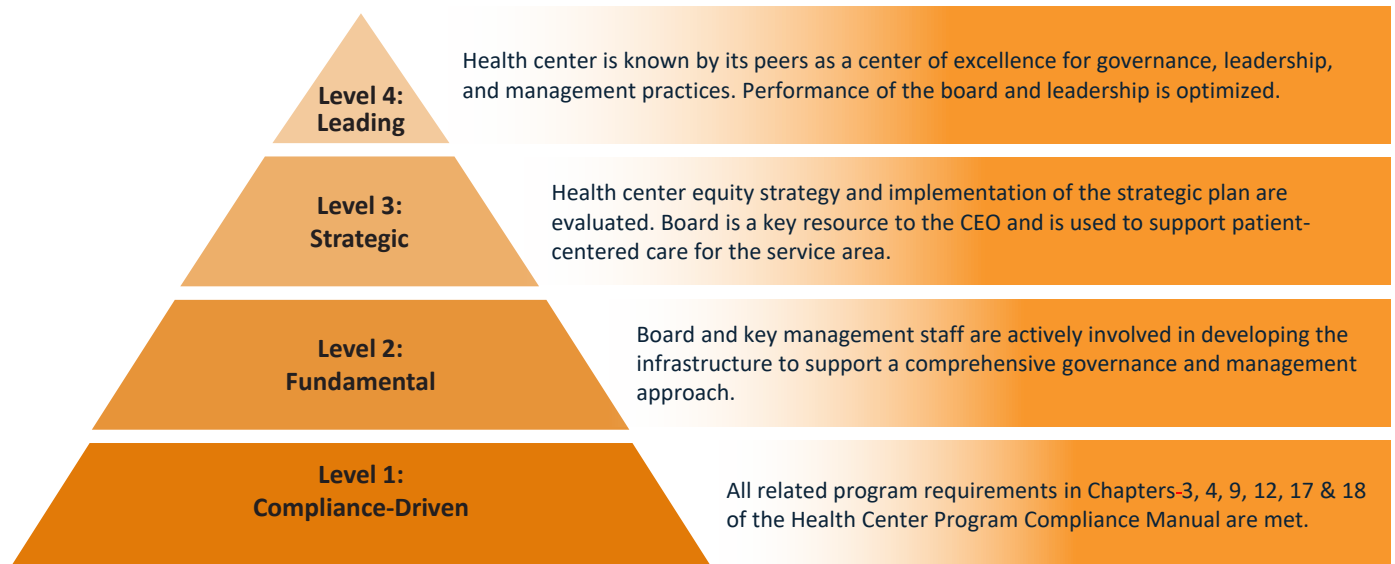
Governance and Management

Definition

The health center implements effective governance, leadership, and management that continuously promote operational excellence to support delivery of high-quality, cost-efficient, patient-centered, equitable care to the community. The health center board governs and provides strategic leadership. The CEO and health center management team are responsible for managing and implementing policies and plans set by the board.

Performance expectation areas that illustrate the priorities for Governance and Management are:

- Governance
- Leadership
- Management

Maturity Model

Level 4: Leading	Health center is known by its peers as a center of excellence for governance, leadership, and management practices. Performance of the board and leadership is optimized.
Level 3: Strategic	Health center equity strategy and implementation of the strategic plan are evaluated. Board is a key resource to the CEO and is used to support patient-centered care for the service area.
Level 2: Fundamental	Board and key management staff are actively involved in developing the infrastructure to support a comprehensive governance and management approach.
Level 1: Compliance-Driven	All related program requirements in Chapters-3, 4, 9, 12, 17 & 18 of the Health Center Program Compliance Manual are met.

Performance Expectation Descriptions

Governance

- Board provides oversight and strategic direction as the needs of the organization and service area evolve and as opportunities emerge
- Board encourages frequent evaluation and capacity building to strengthen board and CEO performance
- Board recognizes its key role in actualizing patient-centered care for the health center service area through leveraging patient-majority members' expertise

Leadership

- Health center leadership includes the board and CEO
- Promotes innovation and a community-minded approach in addressing the health needs of its patients and service area
- Guides development and implementation of the health center's strategic plan
- Promotes a culture of quality improvement and equity to enhance health center performance

Management

- Includes the CEO and key management staff
- Implements the health center strategic plan and reports on progress to the board
- Uses a holistic approach to maximize operational efficiency and excellence through performance accountability, policy implementation, enforcement, and risk management

Workforce

Definition

The health center recruits, develops, engages, and retains the appropriate staffing mix of qualified providers and staff needed to provide safe and culturally affirming care to its patient population.

Performance expectation areas that illustrate the priorities for Workforce are:

- Strategic workforce management
- Recruitment
- Employee development
- Employee engagement
- Retention

Maturity Model

Level	Description
Level 4: Leading	Leading workforce strategy integrated into health center strategy.
Level 3: Strategic	Workforce strategy aligned with health center strategy.
Level 2: Fundamental	Workforce strategy partially or fully defined. Gaps between current state and desired staffing ratios are known.
Level 1: Compliance-Driven	All related program requirements in Chapters 5 and 11 of the Health Center Program Compliance Manual are met.

Performance Expectation Descriptions

Strategic workforce management

- Maintain comprehensive plans for employee recruitment, development, engagement, and retention
- Integrate requirements for a culturally affirming staff that drives effective and efficient health center operations, and informed and equitable actions

Recruitment

- Engage in activities that bolster ability to fill vacancies with qualified staff in a timely manner
- Participate in programs that support staff recruitment and retention of staff that reflect the community they serve

Employee development

- Conduct effective talent development and training programs for staff at all levels
- Evaluate the programs' alignment to organizational objectives

Employee engagement

- Conduct employee engagement surveys to identify staff needs in the areas of professional fulfillment, burnout, productivity, stress, well-being, diversity, and inclusion
- Respond to feedback from survey results and evaluate their effectiveness in addressing opportunities for improvement and providing a healthy work environment

Retention

- Monitor ability to retain staff and leadership to support a stable operational environment and diverse workforce
- Utilize effective tools for retaining high-performing staff, including equitable compensation and benefits, professional development opportunities, employee engagement, open communication, positive leadership, team support, and formal recognition

Financial Sustainability

Definition

The health center has fiscally sound accounting, revenue cycle, and financial management and planning policies and practices. It seeks to optimally manage revenue diversity and financial viability while advancing patient outcomes.

Performance expectation areas that illustrate the priorities for Financial Sustainability are:

- Liquidity
- Solvency
- Sufficient Profitability
- Financial Agility

Maturity Model

Level 4: Leading — Proactive and innovative initiatives to effectively manage revenue sources and operational expenses. Financially sustain and respond with agility during challenging times.

Level 3: Strategic — Profitable and has sufficient reserves to support, maintain, and enhance operations of programs and services. Ability to predict operational revenues and costs.

Level 2: Fundamental — Enough cash flow to pay short-term debt and expenses. Focused on day-to-day cash management issues, rather than on forward-leaning planning.

Level 1: Compliance-Driven — All related program requirements in Chapters 15, 16, and 17 of the Health Center Program Compliance Manual are met.

Performance Expectation Descriptions

Liquidity

- Maintain sufficient cash and liquidity to meet current expenses
- Current liabilities can be paid with the current assets on hand
- Ability to convert current assets to cash

Solvency

- Meet long-term obligations, build reserves, and continue to run current operations long into the future
- Ability to pay debts as they become due

Sufficient profitability

- Maintain sufficient profitability to support, maintain, and enhance operations of programs and services
- Ability to generate income needed to sustain current operations and to support both short-term and long-term growth

Financial agility

- Strategically manage healthcare operations and community services while diversifying year-over-year revenue such that centers can respond to turbulent events
- Evaluate revenue sources (e.g., patients, grants, contracts) to identify financial dependencies
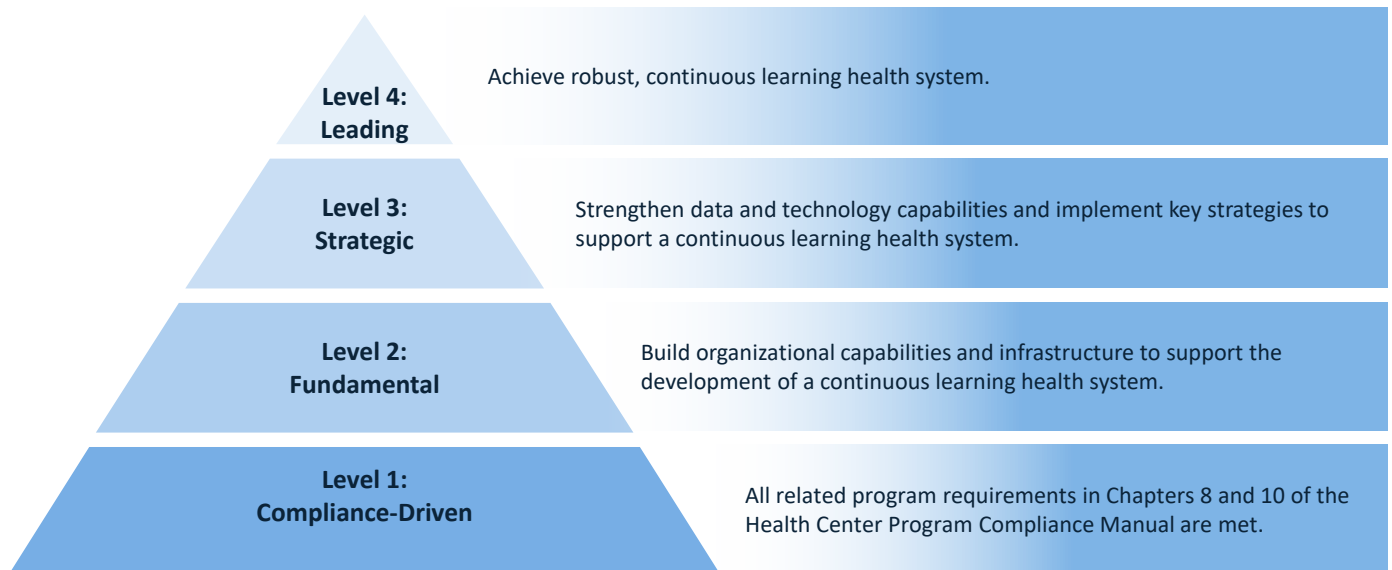
Quality, Patient Care, and Safety

Definition

The health center provides safe, effective, appropriate, timely, and equitable healthcare services to patients to increase the likelihood of desired health outcomes.

Performance expectation areas that illustrate the priorities for Quality, Patient Care, and Safety are:

- Clinical effectiveness
- Continuity of care
- Safety
- Equity

Maturity Model

Level	Description
Level 4: Leading	Achieve robust, continuous learning health system.
Level 3: Strategic	Strengthen data and technology capabilities and implement key strategies to support a continuous learning health system.
Level 2: Fundamental	Build organizational capabilities and infrastructure to support the development of a continuous learning health system.
Level 1: Compliance-Driven	All related program requirements in Chapters 8 and 10 of the Health Center Program Compliance Manual are met.

Performance Expectation Descriptions

Clinical effectiveness

- Provide high-quality services tailored to patient needs and values
- Collect data on structural, process, and outcome measures most meaningful to patients

Continuity of care

- Provide seamless care within health centers and across healthcare providers
- Establish effective communication tools and protocols, referral processes, and electronic exchange of patient health record information

Safety

- Create a culture of safety to proactively identify and address safety issues and transparently share information, metrics, and action plans for improvement

Equity

- Provide high-quality, safe, and effective care to members of the community, specifically minority and underserved populations
- Develop and implement strategies to identify and address disparities and inequities in care delivery and health outcomes
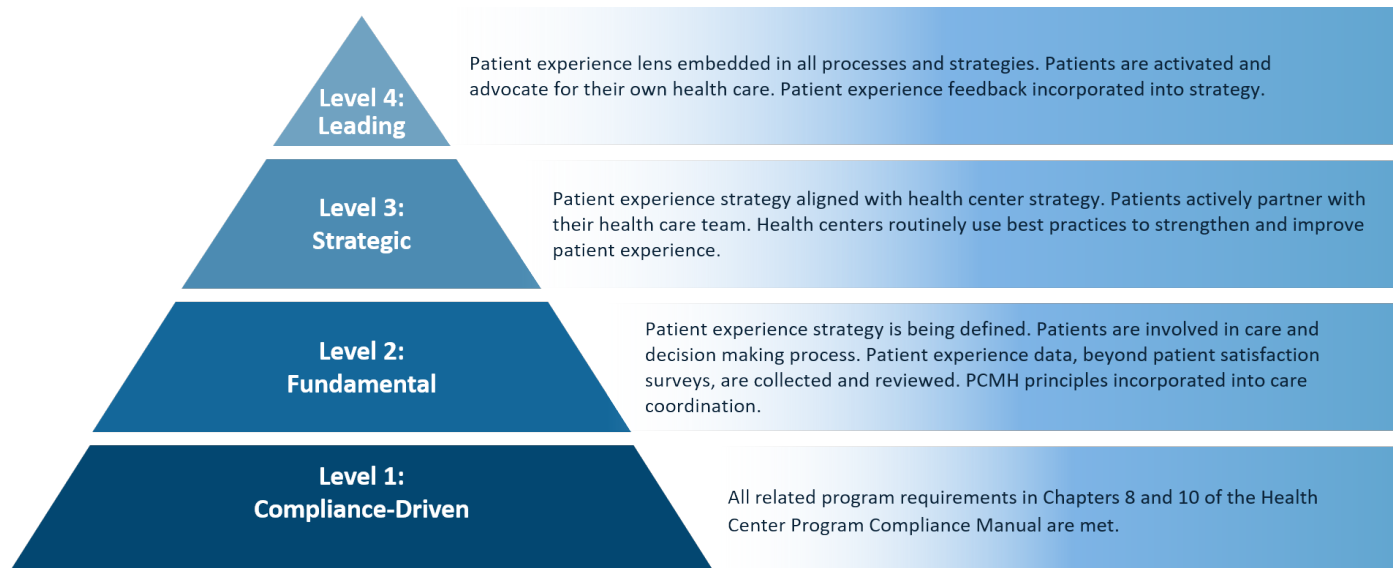
Patient Experience
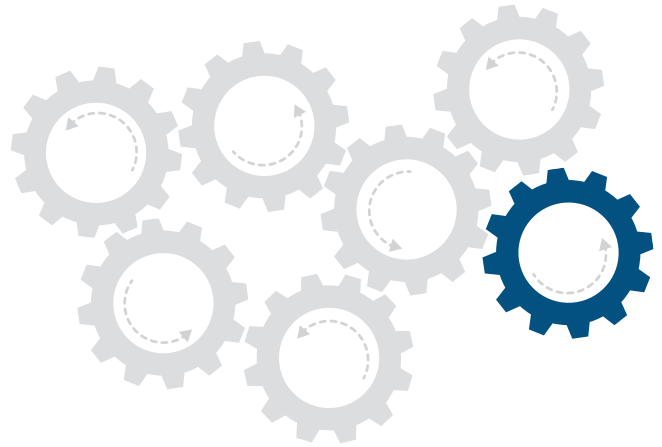
Definition

The health center provides care that is respectful of, and responsive to, individual patient preferences, culture, needs, and values when delivering care. The health center coordinates equity-oriented, patient-centered care and provides information and education to encourage patients, families, and caregivers to actively engage in their care.

Performance expectation areas that illustrate the priorities for Patient Experience are:

- Patient activation and engagement
- Partnerships with families and caregivers
- Building trusting relationships
- Patient-centered care coordination

Maturity Model

Level	Description
Level 4: Leading	Patient experience lens embedded in all processes and strategies. Patients are activated and advocate for their own health care. Patient experience feedback incorporated into strategy.
Level 3: Strategic	Patient experience strategy aligned with health center strategy. Patients actively partner with their health care team. Health centers routinely use best practices to strengthen and improve patient experience.
Level 2: Fundamental	Patient experience strategy is being defined. Patients are involved in care and decision making process. Patient experience data, beyond patient satisfaction surveys, are collected and reviewed. PCMH principles incorporated into care coordination.
Level 1: Compliance-Driven	All related program requirements in Chapters 8 and 10 of the Health Center Program Compliance Manual are met.

Performance Expectation Descriptions

Patient activation and engagement

- Maximize patient involvement in managing their health and health care across various levels of the healthcare system
- Assist patients in participating in the collaborative decision-making process of their individual care plans
- Encourage and support patient participation across the organization
- Listen to patients' personalized preferences and be respectful of and responsive to patients' needs

Partnerships with families and caregivers

- Have systems for engaging patients' family members and caregivers
- Provide opportunities for patients' family members and caregivers to actively co-manage patient's health care, as allowed by healthcare regulations and in alignment with patients' wishes

Building trusting relationships

- Treat patients with dignity and compassion, respecting and holistically meeting the patient's health care needs
- The patient community entrusts the health center system with their care and the care of their families

Patient-centered care coordination

- Strive to reduce system barriers to ensure health services and/or timely appointments are available when the patient wants them
- Respond and communicate with patients and assist them to navigate care
- Integrate and coordinate essential primary health services that are culturally and linguistically appropriate
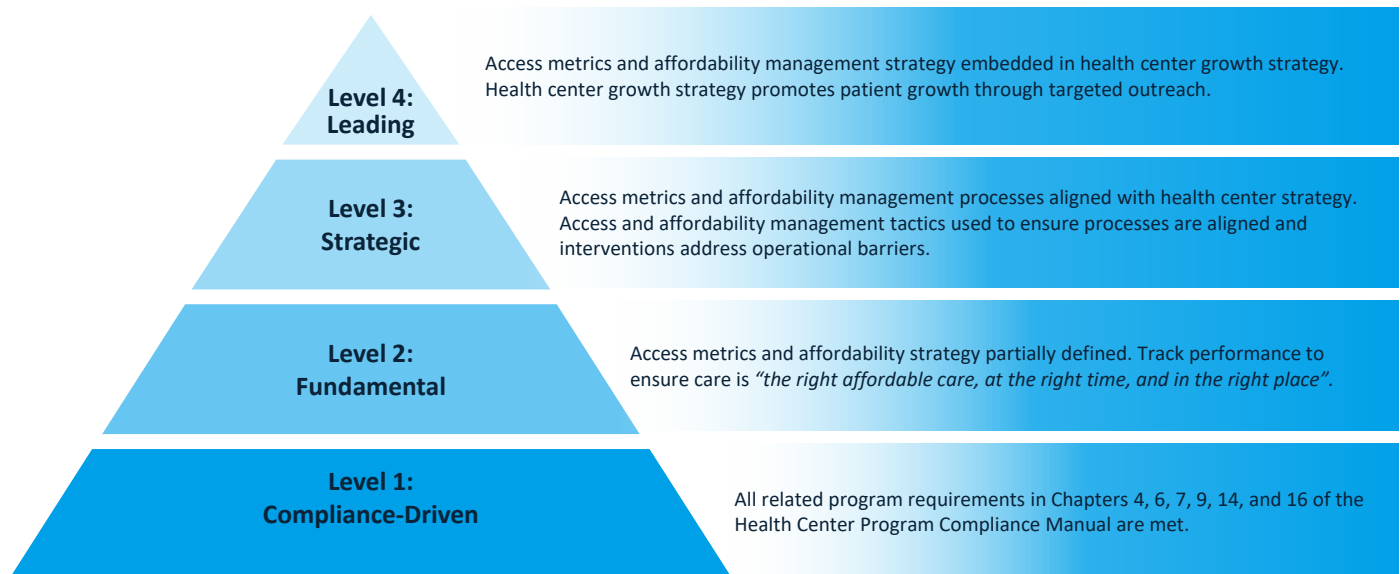
Access and Affordability
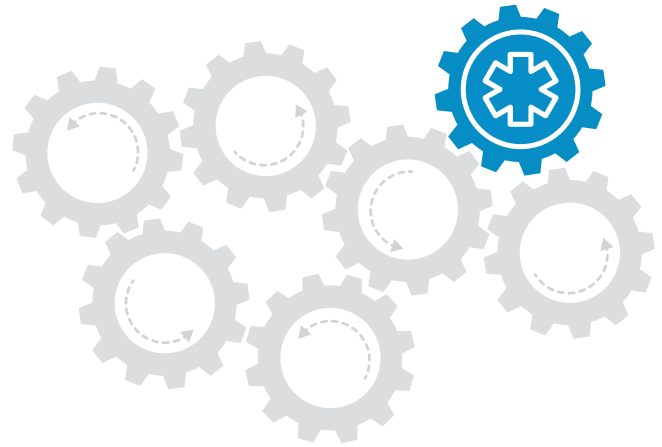
Definition

The health center provides comprehensive, affordable, and culturally and linguistically appropriate health services in a timely manner.

Performance expectation areas that illustrate the priorities for Access and Affordability are:

- Comprehensive and timely services
- Affordability
- Enabling services
- Community outreach

Maturity Model

Level	Description
Level 4: Leading	Access metrics and affordability management strategy embedded in health center growth strategy. Health center growth strategy promotes patient growth through targeted outreach.
Level 3: Strategic	Access metrics and affordability management processes aligned with health center strategy. Access and affordability management tactics used to ensure processes are aligned and interventions address operational barriers.
Level 2: Fundamental	Access metrics and affordability strategy partially defined. Track performance to ensure care is *"the right affordable care, at the right time, and in the right place"*.
Level 1: Compliance-Driven	All related program requirements in Chapters 4, 6, 7, 9, 14, and 16 of the Health Center Program Compliance Manual are met.

Performance Expectation Descriptions

Comprehensive and timely services

- Provide all patients with the right care, at the right time, in the right place
- Partner with neighboring health organizations to provide additional health services to meet patient and community needs
- Optimize systems and remove barriers to enable and enhance patient access

Affordability

- Assist all patients by establishing eligibility for federal, state, and local programs that provide financial support for medical and related services
- Provide needed information to support patients' informed decision making

Enabling services

- Provide non-clinical services to enhance patient experience and facilitate access to care, including culturally and linguistically appropriate services, transportation, health education, referrals, and case management

Community outreach

- Conduct outreach activities to underserved low-income populations in their communities

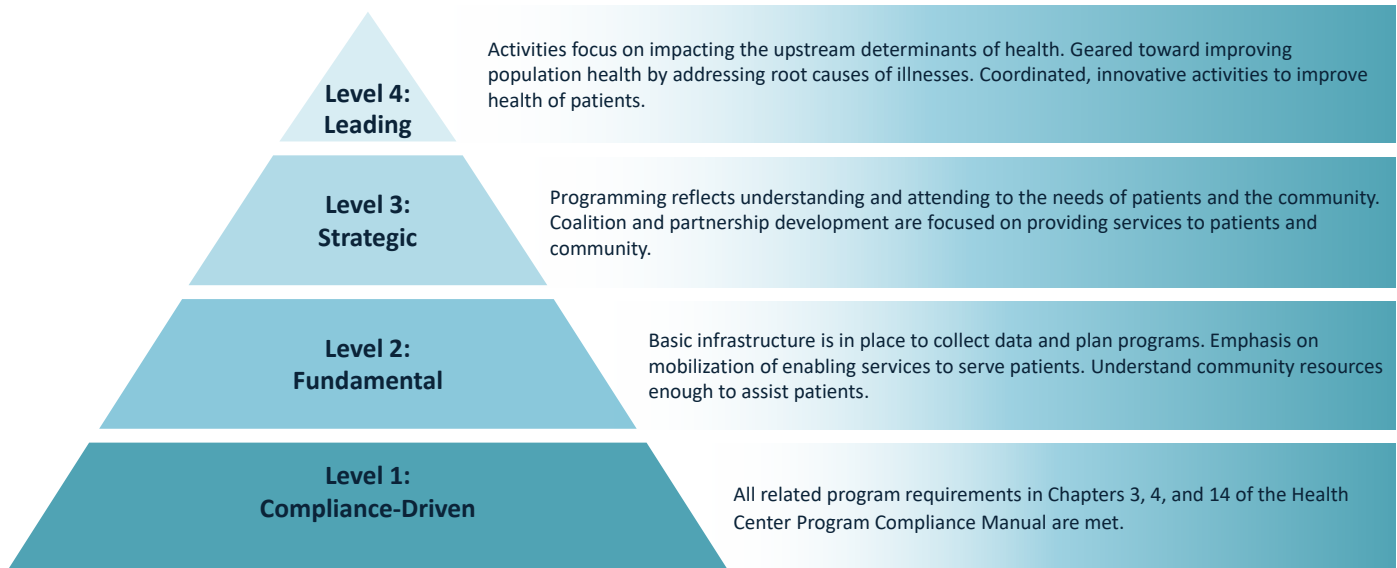# Population Health and Social Determinants of Health (SDOH)

Definition

The health center provides comprehensive services to address needs of the patient population. It achieves this by understanding the social risk factors and social needs in the community and by collaborating with diverse partners to address key drivers of poor health and improve health equity.

Performance expectation areas that illustrate the priorities for Population Health and SDOH are:

- Population needs assessment and management
- Community needs and resource mapping
- Resource allocation
- Community partnerships and collaborations
- Track and close social service referral loops

Maturity Model

Level 4: Leading
Activities focus on impacting the upstream determinants of health. Geared toward improving population health by addressing root causes of illnesses. Coordinated, innovative activities to improve health of patients.

Level 3: Strategic
Programming reflects understanding and attending to the needs of patients and the community. Coalition and partnership development are focused on providing services to patients and community.

Level 2: Fundamental
Basic infrastructure is in place to collect data and plan programs. Emphasis on mobilization of enabling services to serve patients. Understand community resources enough to assist patients.

Level 1: Compliance-Driven
All related program requirements in Chapters 3, 4, and 14 of the Health Center Program Compliance Manual are met.

Performance Expectation Descriptions

Population needs assessment and management

- Systematically collect data on social risk factors and other barriers that influence patients' health outcomes and receipt of health care
- Analyze and use the data to risk stratify patient population for case management
- Identify gaps in available resources needed to facilitate receipt of health care services

Community needs and resource mapping

- Conduct a needs assessment and use it to understand the needs, strengths, opportunities, and priorities of the community
- Use the information to understand the leading causes of morbidity and mortality and the dominant social risk factors influencing these causes in the community

Resource allocation

- Allocate resources by enacting the right mix of enabling, outreach, and other services to address needs of the patient population and community
- Offer healthcare and social services in alignment with the needs of the patient population

Community partnerships and collaborations

- Develop multisectoral partnerships to offer social services
- Have a system for cataloguing social services available to patients and the community
- Engage in multi-sectoral collaborations to achieve health equity

Track and close social service referral loops

- Periodically review the availability of social services offered to patients and community members to identify gaps in services
- Close the referral loop by reviewing the outcomes of social service referrals
- Use aggregate referral outcomes data to conduct targeted outreach to at-risk and underserved patients and community members