



CHRONICLING THE COMMUNITY HEALTH CENTER STORY



Through CHroniCles, every health center and primary care association has the opportunity to tell its story, and together the contributed narratives, photos, documents, videos and other materials form an evolving tapestry showcasing a remarkable movement that has elevated health for millions of people.

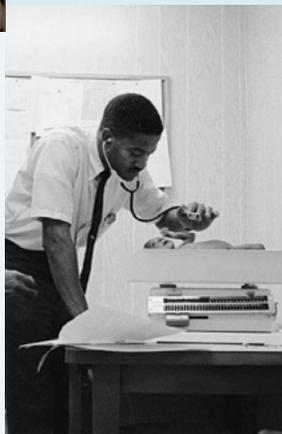


Photo by Daniel Bernstein

DEAR COLLEAGUES,

CHroniCles is an interactive, multimedia website dedicated to the living history of the community health center movement. A signature project of the RCHN Community Health Foundation, CHroniCles aims to record and preserve the vibrant, diverse, and important story of each community health center and of the health center movement as a whole, and make it accessible to viewers everywhere.

The story of the health center movement, starting in 1965 with the very first community health centers in Dorchester, Massachusetts and Mound Bayou, Mississippi and continuing to this day in urban and rural sites across America, is one of a broad vision based on a commitment to equity and community empowerment. While every health center has a unique story, all share a common dedication to core principles:

High-Quality Healthcare - offering affordable, accessible, comprehensive, person-centered preventive and primary care services and serving as medical homes for their patients.

Community-Based Leadership - under the direction of community-based boards, a majority of whose members receive care at the center, ensuring that programs and services are tailored to meet the unique clinical and cultural needs of those they serve.

Sustainable Impact - adding value by providing services effectively and efficiently, and generating economic opportunities in the communities they serve by providing good jobs for local residents, creating an important economic engine.

Improving the wellbeing of the broader community - by ensuring access, building and fostering trusting relationships with their patients, and weaving a strong thread through the fabric of the community.

More than 400 organizations have contributed to the CHroniCles site. While this book highlights the work of organizations from New York to Mississippi, California to Puerto Rico and many diverse communities in between, it features just a fraction of the material we have been so fortunate to curate and develop.

We are immensely grateful to our health center and primary care association colleagues, without whom this book would not be possible. We also extend special thanks to the Geiger Gibson Program in Community Health Policy at the Milken Institute School of Public Health at The George Washington University, and the National Association of Community Health Centers, with whom we partnered in the early development and launch of CHroniCles.

Every health center story is distinctive and reflects the needs and aspirations of its local community. We hope these profiles will inspire you to view the range of materials on the CHroniCles site, share your health center story, and help to document the exceptional history of the community health center movement and its unwavering contribution to health and healthcare justice.

Feygele Jacobs, DrPH
President and CEO, RCHN Community Health Foundation



Dr. John Li treats a young patient at the Charles B. Wang Community Health Center, New York, NY (1997)

HIGH-QUALITY HEALTHCARE
Read Stories



Groundbreaking by Native American leaders: celebratory opening of the Central Clinic, the Hunter Health Clinic, Wecho, AZ (2004)

COMMUNITIES FIRST
Read Stories



Winney M. Young, St. Elizabeth Center, Albany, NY (1976)

BEYOND MEDICINE
Read Stories



Dr. H. Jack Geiger and Dr. John H. Hatch during construction of the Delta Health Center, Albany, NY (1966)

SUSTAINABLE IMPACT
Read Stories

For more than 50 years, community health centers have provided **HIGH-QUALITY HEALTHCARE** in communities all across the country. Health centers put **COMMUNITIES FIRST** and reach **BEYOND MEDICINE**, improving the lives of those they serve, enhancing access, reducing healthcare costs and creating **SUSTAINABLE IMPACT** in their communities.

The Community Health Center Story



Migrant and Farmworker Historical Photos

Photo



CHC Movement: A National Program, Building on Local Roots

Photo



Migrant Health Centers: Historical Documents

Narrative



CHC History Photo Slideshow

Photo



Early Health Center Program Documents

Narrative



Part 1: The GEO and the early champions of neighborhood health centers

Video



Eye on the Movement: Alan Pogue Documents Migrant and Seasonal Farmworkers

Video



Part 1: Dr. H Jack Geiger and Dr. John Hatch on the Earliest CHCs

Video



Health care for the Homeless

Photo

FEATURED PROFILES

More than just the backbone of the primary care system for America's low-income, uninsured and underserved populations, community health centers empower those they serve. CHroniCles celebrates that empowerment and highlights the exceptional vision and value of health centers in urban and rural communities across the country.

1st Choice Healthcare
ACCESS Community Health Network
Ampla Health
Arbor Family Health
Asian Health Services
Asociación de Salud Primaria de Puerto Rico
Beaufort-Jasper-Hampton Comprehensive Health Services
Betances Health Center
Blue Ridge Medical Center
Bullhook Community Health Center
California Primary Care Association
Callen-Lorde Community Health Center
Care Alliance Health Center
CareSouth Carolina, Inc.
CareSTL Health
Charles B. Wang Community Health Center
Chase Brexton Health Care
Cherry Health
Clinica Sierra Vista
Colorado Community Health Network
Columbia Basin Health Association
Community Health Association of Mountain/Plains States
Community Health Center, Inc.
Community Health Centers of Burlington
Community Health Development, Inc.
Community Health of South Florida, Inc.
Compass Health Network (formerly Family Health Center)
Cornell Scott - Hill Health Center
Delta Health Center, Inc.
Denver Health
Desert Senita Community Health Center
Duffy Health Center
East Boston Neighborhood Health Center
Edward M. Kennedy Community Health Center
Erie Family Health Centers
Family HealthCare Network
Family Medicine Health Center
Fenway Health
Georgia Primary Care Association
Golden Valley Health Centers
Greater Portland Health
Greene County Health Care, Inc.
Hamilton Health Center

Hawai'i Primary Care Association
Healthcare Network
Horizon Health Care, Inc.
Hudson Headwaters Health Network
Hunter Health
InterCare Community Health Network
International Community Health Services
Jericho Road Community Health Center
La Maestra Family Clinic, Inc.
Lamprey Health Care
LifeLong Medical Care
Maine Primary Care Association
Manet Community Health Center
Mary's Center
Massachusetts League of Community Health Centers
Minnesota Association of Community Health Centers
Morris Heights Health Center
Nasson Health Care
Nuestra Clinica del Valle, Inc.
OneWorld Community Health Centers, Inc.
Open Door Community Health Centers
Open Door Family Medical Center
Peoples Community Health Clinic
Quality of Life Health Services, Inc.
Rural Health Group
Salud Family Health Centers
Sixteenth Street Community Health Centers
Su Clinica
Teche Action Clinic
Tennessee Primary Care Association
Terry Reilly Health Services
The Chautauqua Center
The Jane Pauley Community Health Center, Inc.
Unity Health Care
Valley Health
Virginia Community Healthcare Association
Virginia Garcia Memorial Health Center
Waianae Coast Comprehensive Health Center
Waikiki Health
Westside Family Healthcare
Whitman-Walker Health
Yakima Neighborhood Health Services
Zufall Health Center

1ST CHOICE HEALTHCARE

1stchoice-ar.org



In 1991, a group of citizens in Clay County, in the largely rural, north east part of Arkansas, identified the pressing need for health care and began to investigate the possibilities for bringing primary care services to the area. The state primary care association, Community Health Centers of Arkansas, undertook a needs assessment in conjunction with the Arkansas Department of Health Office of Primary Care, and the area was designated as high-need. Following this assessment it was determined that a community health center could best meet the needs of the area.

Corning Area Healthcare was established as a corporate entity in 1992 and a grant was written to obtain necessary funding. The center's Corning site opened in 1994, with a staff of just 12 employees. An expansion site, the Pocahontas Clinic, opened in 2000, and the Walnut Ridge site was opened in 2005. With the addition of a new location in Ash Flat in 2014, and expansion into new counties, the health center was renamed and rebranded as "1st Choice Healthcare." New sites followed in subsequent years with the addition of health center locations in Paragould and Salem, Arkansas.

Today, Joint Commission-accredited 1st Choice Healthcare operates health center sites in six northeast and central Arkansas counties, serving the cities of Corning, Pocahontas, Walnut Ridge, Ash Flat, Paragould and Salem. The health center offers comprehensive, patient- and family-centered primary and preventive care as well as behavioral health and podiatry services. In addition to providing comprehensive pediatrics care, 1st Choice Healthcare offers free vision exams and glasses to low-income, uninsured children through Sight for Students.



Proudly community-governed, 1st Choice Healthcare recognizes the centrality of health care in every community and aims to improve community health and well-being by providing compassionate, affordable health care for all individuals and helping to build healthier communities.



Corning, Arkansas

MAKE ACCESS YOUR MEDICAL HOME



ACCESS is recognized as a national leader in community health care delivery, and is committed to investing in real solutions to address the healthcare disparities that exist in Chicago's most underserved communities.



Chicago, Illinois

ACCESS COMMUNITY HEALTH NETWORK

achn.net



For thirty years, ACCESS has been at the forefront of transforming community health by providing accessible, quality health care to those most in need. Founded in 1991 with roots in serving public housing projects on Chicago's South and West sides, ACCESS operates 35 health center locations throughout Cook and DuPage counties, and is the single largest provider of primary care for Medicaid beneficiaries in Illinois, serving approximately 175,000 patients each year.

A patient-centered medical home, ACCESS offers comprehensive services for all ages with integrated behavioral health services, co-located pharmacy and dental care services at several locations, a 340B discount drug program, and dedicated care coordination services based on individual health care needs and conditions. From adopting a shared decision-making model to engage patients more directly in planning their care, to pivoting its care delivery model to offer telehealth services and on-site testing in the face of the COVID-19 pandemic, ACCESS continues to find new opportunities to innovate and support the total health care needs of its patient population.

In 2018, in anticipation of a major statewide Medicaid initiative, ACCESS piloted a virtual integrated health home (IHH) model to transform the delivery of care for individuals with serious mental illness, such as schizophrenia, bipolar disease and major depression. This innovative, intensive care coordination program, developed in collaboration with community partners and operated across nine health center sites, integrates primary care with mental health and substance use disorder treatment, housing, and employment support services. Through this pilot, the health center learned that leveraging an integrated network of providers helped address patients' basic needs first, such as food and housing, which in turn meant that patients were more able and willing to engage in behavioral and medical health care.

ACCESS also found that creating an integrated communications infrastructure that encompassed a shared electronic health record and care plan across all agencies ensured that patients' needs were met rapidly and that patients were stabilized and kept in care.

ACCESS is proud to serve as both a catalyst for adopting best practices in Integrated Health Home models and in addressing the unique, growing needs of our nation's medically vulnerable and seriously mentally ill population.



Ampla Health began in 1964 to provide medical care to migrant and seasonal farmworkers under the State Farm Workers Health Service and Migrant Health Act Fund. Known as the Sutter-Yuba Farm Workers Health Project, with the County of Sutter serving as the recipient grantee for the funds, it operated as a night clinic in the Sutter County General Hospital.

In 1973, at the suggestion of the U.S. Department of Health, Education, and Welfare (HEW), the Consumer Advisory Board incorporated as a non-profit organization to become Northern Sacramento Valley Rural Health Project, Inc. That year, the new corporation became the grantee for Migrant Health Act funds. Additional funding provided for a full-time executive director and for expansion of the services beyond Sutter to additional locations. In June 2011, the organization changed its name to Ampla Health to better reflect the health center's commitment to the broader community.



Today the Ampla Health network consists of 13 medical and six dental centers, which offer comprehensive, family-centered primary care, dental, behavioral health, pharmacy, and additional services including chiropractic and specialty care across six rural counties: Butte, Colusa, Glenn, Sutter, Tehama, and Yuba. Telehealth is available for both medical and dental services. Ampla Health's Chico, Oroville and Yuba City Medical locations offer the Alpha Recovery Center (ARC), to provide opioid treatment and counseling support. In Butte county a mobile medical unit provides primary care, immunizations, wound care, diabetes management and care for other chronic conditions to the homeless population. For immediate medical attention three locations offer "Xpress Care," 365 days a year with no appointment needed.



More than five decades since its founding, Ampla Health continues "to provide the individuals and communities [we serve] with high-quality, comprehensive, community directed health care that is accessible to all and culturally and linguistically appropriate."



Yuba City, California



Arbor Family Health's vision is to develop and promote, through direct service, collaboration, and partnerships, supportive health care services to all people who are medically underserved, so that they may experience the rights, privileges, and responsibilities as a member of their community.

Arbor Family Health, formerly known by the parent company name Innis Community Health Center, is located in rural southeast Louisiana. In 1999, an initial board of directors with the vision of community-based health care came together to develop the center as a resource for the underserved communities of Pointe Coupee, southern Avoyelles parish and northern Iberville parish. In some parts of the community, residents had to travel 50-plus miles for primary health care services and few providers would serve people with no coverage. The area was in dire need of preventive and affordable health care for all, regardless of the ability to pay.

The health center opened its doors in 2001, and has grown to serve more communities, with four comprehensive primary care sites including Livonia Health Center, Innis Health Center, Maringouin Health Center and New Roads. Available services include primary and preventive medical care, family practice, dental services, behavioral health, mental health counseling, substance use disorder therapy, podiatry, and on-site lab and diagnostics. Arbor Family Health also provides health education, family support, a Prescriptions Assistance program, Certified Application Counselors to assist with insurance eligibility determinations and enrollments, and referrals to community resources to assist its community members in accessing needed services to optimize their health.

In addition, the center began offering school-based health in 2007 and today operates three school-based sites, serving multiple schools in Brusly, Livonia and Pointe Coupe Parish. The health center offers preventive and restorative dentistry in Innis and Livonia to adults and children.

The health center is a National Committee for Quality Assurance-designated Patient-Centered Medical Home and has received recognition from the Health Resources and Services Administration for advancing health information technology (HIT) as well as its performance as a Health Center Quality Leader, Access Enhancer, and Health Disparities Reducer.

The health center's board of directors, comprised of a cross-section of community members who gave faithfully of their time and talent to lead the health center, has been crucial to Arbor's success as the community's "health care home of choice."



Livonia, Louisiana

ASIAN HEALTH SERVICES

asianhealthservices.org



Founded in Oakland 1974 as a one-room, volunteer-staffed clinic, Asian Health Services (AHS) grew out of the student activism of the civil rights and social justice movements. These movements gave rise to a commitment to serve and advocate for the Asian and Pacific Islander (API) community.

AHS now provides comprehensive medical, mental health, dental care and social services in 14 languages at 13 clinical and school-based sites. More than 70 percent of the health center's patients are best served in a language other than English. General Patient Meetings—where more than 400 patients gather to discuss relevant issues and policies that will impact themselves and their

families—are interpreted in 10 different languages, including Burmese, Cantonese, Karen, Khmer, Korean, Mandarin, Mien, Mongolian, Tagalog and Vietnamese.

In addition to clinical services, community organizing and engagement are an integral part of the AHS mission. Special projects include initiatives such as the “Revive Chinatown” campaign, which stemmed out of a pedestrian safety initiative to reduce pedestrian accidents, and aims to create a safer, more pedestrian-friendly and economically viable

neighborhood; the California Healthy Nail Salon Collaborative program, which educates nail salon workers and owners to better protect themselves against dangerous toxins contained in beauty salon products and advocates for safe and dignified working conditions; and Banteay Srei, a community-building and leadership development program developed in response to rising trends in sex trafficking and exploitation among Southeast Asian women in Oakland.

The health center also houses a robust research program that evaluates trends in patient health and social outcomes and includes community-based participatory research as well as research to inform policy advocacy. In 2019, AHS helped to spark the One Nation movement, focused on the essential place of immigrants in America and the need to address immigrants' rights. With these activities, AHS serves a dual mission of service and advocacy, lifting up the voice of the community and ensuring that its patients can assert their rights to health care.

Asian Health Services has earned national recognition as one of the country's top-performing health centers in quality and clinical care, and as a provider of comprehensive, whole-patient, culturally and linguistically relevant care for all, regardless of income, insurance status, immigration status, language, or culture.



Oakland, California



ASOCIACIÓN DE SALUD PRIMARIA DE PUERTO RICO

saludprimariapr.org



With its consistent track record of overcoming local challenges, the ASPPR remains dedicated to promoting the robust achievements of Puerto Rico's health centers, while working to ensure that ongoing support and resources are available to protect and strengthen health center services and expand access for people and communities in need.

Asociación de Salud Primaria de Puerto Rico (ASPPR) is the primary care association representing Puerto Rico's community health centers located across 67 municipalities. Together, in 2019 these health centers served more than 13 percent of the island's uniquely vulnerable population that has limited access to primary and preventive care services, including the uninsured and underinsured, agricultural workers, public housing residents, and people experiencing homelessness.

Founded in 1984, ASPPR has a long history and tradition of providing support to the island's community health centers to help promote access and the delivery of high-quality health care services. ASPPR provides programs and services that are directly targeted to the needs of its members. These include training and technical assistance, with learning focused on strengthening and improving operational capacity, the promotion of clinical excellence, workforce development, operational improvement and emergency preparedness and response. The ASPPR is the focal point for health center-related policy and advocacy, providing a strong collective voice to insure access to health care for all, and to promote the health center mission. Special programs include a comprehensive and multi-sector Zika initiative, and the Puerto Rico Primary Care Association Network (PR-PCAN), a health center network organized to address the operational and clinical challenges related to the adoption and effective use of health information technology (HIT).

Hurricanes Irma and Maria hit Puerto Rico in 2017, making landfall on an island already facing deep poverty, a fragile economy, and a uniquely vulnerable healthcare system. Health centers responded immediately on the front lines. With the support, coordination and leadership of the ASPPR, CHCs served a critical role as first responders to a widespread humanitarian and public health crisis, taking the lead in collaborations, partnerships, education, and policy initiatives focused on response, recovery, and rebuilding. The arrival of COVID-19 presented new challenges as Puerto Rico continued to rebuild from the damage sustained during the hurricanes and the earthquakes that rocked the island through the latter part of 2019 and into 2020. In response to the pandemic, the ASPPR established a free learning community series to support CHC leadership and managers. ASPPR is collaborating with the Puerto Rico Health Department in the administration of COVID-19 vaccine to vulnerable populations.



Puerto Rico

BEAUFORT-JASPER-HAMPTON COMPREHENSIVE HEALTH SERVICES

bjhchs.org



Beaufort-Jasper-Hampton Comprehensive Health Services (BJHCHS) was organized to deliver comprehensive health services to residents of the socially and economically deprived areas of Beaufort and Jasper Counties, South Carolina. The impetus for the center began after a news report illustrated the poverty and disease that affected the two counties. The negative attention drawn by the report awakened politicians who were eager to address the situation, and in 1970 the community was awarded a grant from the Federal Office of Economic Opportunity to start the health center.

Since its founding, the health center's board and leadership have promoted a comprehensive view of health, addressing the reality that health outcomes are a product of more than just patient care, and are deeply rooted in disparate social, economic and environmental circumstances. One of the health center's first large-scale projects was to address the community's need for clean drinking water; BJHCHS coordinated the installation of new septic tanks and deep wells to tackle the problem, and the benefits of that early intervention have improved health for generations.

In 1999, The Department of Health and Human Services approved expansion into Hampton County, extending the health center's reach across three counties in the South Carolina Lowcountry community. Today, the health center operates nine health center locations.

BJHCHS offers a wide range of community-focused services that include school-based programs, care for migrant and seasonal agricultural workers, geriatric outreach, telemedicine, on-site pharmacy, WIC (Women, Infants and Children program) and environmental health, in addition to comprehensive on-site adult, pediatric and family medicine, substance use disorder services and dental care. A leader in care for those living with HIV/AIDS, BJHCHS has received Ryan White funding since 1998; additional funding has allowed the health center to expand the scope of care and advance efforts to end the HIV epidemic.

BJHCHS serves as a community health center campus of A.T. Still University, where the University's medical students complete their clinical rotations and enhance their understanding of the local health system and community health practices.



The center's early recognition that social determinants such as hunger and poverty are a key factor in health outcomes, and that health care is a right, not a privilege, set BJHCHS apart. These values continue as a cornerstone of the center's commitment to improving health care, establishing it as leader in the Lowcountry and throughout the state.



Ridgeland, South Carolina



BETANCES HEALTH CENTER

Today, Betances operates three locations including two in Manhattan, and one in Brooklyn's Bushwick neighborhood. Betances continues to work to enhance the health and wellbeing of individuals and families from undeserved, ethnically rich communities by providing comprehensive, affordable health services, with community at the heart of everything it does.



New York, New York

Betances Health Center, located on Manhattan's Lower East Side, evolved out of a project that was started by Judson Memorial Church in 1969. Concerned about health conditions especially among youth and hippies in its East Village neighborhood, the Church approached

local community activist Paul Ramos to help develop the "East Village Youth Project," informally known as the Judson Mobile Health Unit.

Health services and screenings were initially provided from a parked construction trailer, which was later donated to the program. After several months, Ramos persuaded the church to expand the program to meet the broader health needs of the largely minority, low-income medically disenfranchised Lower East Side community. Initial services included screening, immunizations, family planning, health education, advocacy and referrals.

In 1970, under Ramos' leadership, and as the result of a grassroots effort, the center formed a board of directors, filed for incorporation and renamed the effort Betances Health Unit. The new name was a tribute to the 19th century Puerto Rican physician, poet and patriot Ramón Emeterio Betances, the "Father of the Poor," who fought to abolish slavery and end colonial repression, and established a hospital to fight the virulent cholera epidemic on the island. A fully-equipped mobile medical van was purchased in 1972, and the program was administered from an office above a pickle factory. By 1976, the organization had obtained the authorization to operate as a free clinic and secured a neighborhood medical office, and by 1978, having relied on volunteer providers and staff, Betances obtained grant funding to hire its own staff of medical providers. In 1986, Betances Health Center moved to its permanent home at 280 Henry St.



In the decades since its founding, Betances Health Center has grown in direct response to the changing health care needs of its community. Betances' pioneering strategy of integrated care merges traditional western medicine and specialty services with holistic treatments that are consonant with diverse health care beliefs and practices. A recognized patient-centered medical home, Betances offers primary care, pediatrics, women's health, behavioral health, podiatry and specialty care along with acupuncture, meditative therapies and nutrition services.

BLUE RIDGE MEDICAL CENTER

brmedical.org



Blue Ridge Medical Center (BRMC) was established to address the health care needs of residents of Nelson County, Virginia, a rural county where nearly half the residents had incomes at or below 200 percent of the poverty level. While the area was a designated health professional shortage area (HPSA) and medically underserved area (MUA), primary care services were provided by the overburdened local health department and there was no nearby hospital for secondary or tertiary care.

Beginning in 1983, Sarah Jane Stewart worked with the first group of planners to develop the concept and gain support for a health center in the county. The health center opened in 1985 as a single-doctor rural health practice with three exam rooms, housed in a small modular building. Over time, the health center expanded to meet the needs of the community and became a full-service community health center.

BRMC now operates a main site in Arrington and facilities in Amherst and Appomattox; it offers a full range of services including primary and preventive care for adults and children, dentistry, pharmacy, lab, nutritional services, physical therapy and behavioral health.

BRMC health center is a patient-centered medical home. It provides comprehensive community- and school-based services, making a real difference in the lives of the people it serves and the health status of the county's residents.

In December 2011, BRMC moved to a new state-of-the-art medical facility made possible by a large federal grant and other community investments. The building has lobby space and exam rooms designed especially for children, a retail pharmacy, and telemedicine access to behavioral health services and off-site specialty care consults. The health center's original Arrington building was renovated and repurposed to accommodate a six-operatory dental facility. A new site in nearby Appomattox opened in early 2021.

Throughout its history and expansion, Blue Ridge has remained steadfast in its mission to provide quality health care to all people in Nelson County and neighboring communities and to improve their general health and well-being through prevention, education, and treatment. The communities of Amherst and Appomattox Counties can now enjoy these services at the health center's local satellite offices.



Arrington, Virginia



BULLHOOK COMMUNITY HEALTH CENTER

bullhook.com



Bullhook CHC's logo depicts a medicine wheel or Sacred Hoop from Native American traditions. It embodies the four directions, and the elements of nature - fire, earth, water, and air - which symbolize dimensions of health and the cycles of life and serves as a reminder that "we must be mindful of how we treat each other, Mother Earth, as well as being responsible and accountable in all our commitments."

through Planning and Partnership tools, a group of dedicated individuals and service agencies conducted a community-based needs assessment and gap analysis, and identified access to medical and dental care as a priority concern. With a modest budget and a handful of employees, a clinic opened in September 2005, funded by a federal Healthy Communities Access Planning (HCAP) grant. The grant allowed the Health Department's Bullhook Clinic to offer medical and care management services to the community on a sliding fee scale. Patients were able to access coordinated, holistic care with other providers in the community.

In January 2006, the Bullhook Clinic received notification that the HCAP grant funding would be cut from the federal budget. The budget cut forced the clinic to reorganize and reduce its non-medical staff, cut wages, and eliminate the outreach program, leaving only clinical and care management functions. Yet even in the face of adversity, the staff and board of directors were determined to continue providing high-quality low-cost health care services. In December 2006, Bullhook Clinic staff applied for federal New Access Point (NAP) funds to establish a free-standing health center. A NAP grant was awarded in July 2007 to the new nonprofit, community-governed organization - Bullhook Community Health Center, Inc.

Bullhook moved into its current space in Havre in 2014, after receiving a grant through the Health Resources & Services Administration. At its new location, the Bullhook Community Health Center expanded its services to the community with the addition of Family Nurse Practitioners.

The health center offers comprehensive primary medical, dental, and behavioral health care including Medication Assisted Treatment for substance use disorders and a full-service, on-site pharmacy. The health center participates in the grant-funded Montana Asthma Home Visiting Program, which focuses on patient education and home-based trigger mitigation. Today Bullhook continues to provide high-quality care to everyone who needs its services.



Havre, Montana

CALIFORNIA PRIMARY CARE ASSOCIATION

cpc.a.org



The California Primary Care Association (CPCA) represents the state's not-for-profit health centers and regional clinic associations; its diverse membership includes federally funded and federally designated health centers, free clinics, urban and rural health centers, large and small clinic corporations and organizations dedicated to special needs and special populations. Together, these organizations serve more than seven million people, or approximately one in five Californians, and generate more than \$12.1 billion in total economic activity.

The community health center (CHC) movement was born out of the civil rights movement in the 1960s with the mission to provide health care in communities where there are few or no options for care or where systemic barriers to care have been created. As public health organizations, CHCs provide care to anyone who walks through their doors. In the early 1970s, several independent, community-based health centers came together to establish the Alameda Health Consortium and in southern California, the Coalition of Orange County Community Health Clinics, non-profit consortia to share best practices, strengthen care and engage in collective advocacy. Other regional clinic networks and consortia followed. With the support of health center leaders statewide, the CPCA was established in 1994 to address emerging state and federal health reforms and help the state's health centers and consortia advocate with one voice.

CPCA's scope has evolved to meet the needs of its member base and the communities they serve, promoting investment in community-based services and delivery models that recognize the needs of California's diverse communities, sound policies to maintain a responsive community-based safety net, and comprehensive strategies that reduce or eliminate the social determinants that disproportionately impact CHC patients. CPCA continues to work closely on policy and program issues with a statewide coalition of regional clinic networks. CPCA sponsors a variety of trainings and co-sponsors trainings with federal and state organizations and regional associations. It is the goal of CPCA's training department to enhance community health centers' capacity and competitiveness through practical, strategic and relational skill building. CPCA members participate in workgroups, task forces and peer networks that provide educational and networking opportunities. Access, impact and innovation are at the heart of the Association.

Through innovative education, workforce and advocacy programs, CPCA continues to lead and promote the value of community health centers, clinics and networks as key players in the health care delivery system, dedicated to improving the health status of their communities.



California



CalLEN-LORDE

A global leader in LGBTQ+ health care, Callen-Lorde is committed to providing services that are “affirmative, sex-positive, culturally sensitive, consistent with risk reduction principles and that promote patient self-determination,” through excellent care, provided free of judgment and regardless of ability to pay.

NYC’s Callen-Lorde Community Health Center is the city’s only primary care center created specifically to serve LGBTQ+ communities, tracing its roots to the Stonewall era. In 1969, in conjunction with St. Mark’s Church-in-the-Bowery, the

St. Mark’s free clinic was founded to offer primary care and sexual health services to young people who found their way to the East Village. Just a few years later, a group of seven queer women banded together to create the Women’s Health Collective – the “Oldest Lesbian Clinic in the Nation” at St. Marks. Meanwhile, Gay Men’s Health Project - the first clinic for gay men on the East Coast - opened a few years later, in 1972, partnering with St. Marks to offer testing and treatment for STIs and other basic primary care. These two organizations merged in 1983 and became Community Health Project, a mostly volunteer-staffed program housing the nation’s first community-based HIV clinic.

With a loan through the Primary Care Development Corporation, Community Health Project purchased and renovated a condemned building and in 1998, moved into its new home and was renamed Callen-Lorde Community Health Center. The center’s new name was a tribute to both Michael Callen, a musician, pioneering AIDS activist and founder of the People with AIDS Coalition, and Audre Lorde, self-described “Black, lesbian, mother, warrior, poet,” a breast cancer survivor, civil rights activist and NY’s Poet Laureate in 1991-92.

Callen-Lorde has since grown into a network of primary care centers across the city, with locations in Manhattan, Brooklyn and the South Bronx, offering a wide variety of services, including comprehensive primary and dental care, on-site pharmacies, behavioral health services, women’s health, transgender health, and medical case management support. Callen-Lorde is home to the Health Outreach to Teens (HOTT) program, which serves youth between the ages of 13 and 24 in an on-premises clinic and a fully-equipped medical van.

In addition to direct service, Callen-Lorde is actively engaged in pioneering research, advocacy and education. A historic partnership between Callen-Lorde Community Health Center and the Keith Haring Foundation, announced in 2019, launched the Keith Haring Nurse Practitioner Postgraduate Fellowship in LGBTQ+ Health – a first of its kind program in the nation to train future leaders in LGBTQ+ health.



New York, New York

CARE ALLIANCE HEALTH CENTER

carealliance.org



Care Alliance Health Center was established in 1985 as “Cleveland Health Care for the Homeless,” one of the original 19 projects funded by the Robert Wood Johnson Foundation and Pew Charitable Trust to determine whether, and how, communities offering specialized health care for the homeless services could improve health care access and quality. In 1993, the clinic became an independent non-profit organization, and opened its first location. At the invitation of the Health Resources and Services Administration (HRSA), Care Alliance began providing health care to Cleveland’s public housing community in 1998. With Ryan White Title III grant funding, the health center then began offering primary health care and case management to individuals living with HIV/AIDS.



Care Alliance now operates two strategically located primary sites: downtown near the two largest homeless shelters in Cleveland and a stand-alone clinic in Central. The health center also has a mobile clinic which provides services throughout Cleveland, and a school-based program to address the needs of students in the Cleveland Metropolitan School District. Care Alliance Health Center is the only provider in the City of Cleveland that focuses on addressing the health care needs of individuals and families experiencing homelessness and of those residing in public housing.

The health center provides comprehensive primary and preventive medical, dental, behavioral health, podiatry, lab, patient advocacy, transportation, pharmacy, and related services. Addiction treatment services include counseling and Medication Assisted Treatment (MAT). In 2019, Care Alliance launched its telehealth program to provide remote and virtual patient care.

Care Alliance Health Center continues to provide high-quality comprehensive care to individuals and families regardless of ability to pay. Recognized as a Patient-Centered Medical Home (PCMH) by the National Committee for Quality Assurance (NCQA), Care Alliance fills an essential role within the community, ensuring that many of Cleveland’s most vulnerable residents have access to health care and other essential services.



To improve accessibility and quality for all patients, Care Alliance adopted the physical-behavioral health integration (PBHI) model, integrating behavioral health into primary care.



Cleveland, Ohio



At CareSouth Carolina, every patient is welcome and has a true medical home, where they can experience healing, caring relationships regardless of their personal circumstance.

CareSouth Carolina is a multi-site regional health system that serves as a medical home for the residents of South Carolina's Pee Dee region. The health center got its start when concerned citizens met to discuss the need for health care in their rural Society Hill community, which had been identified by the health systems agency as having a high level of need. In 1978, a Rural Health Initiative Grant was secured, and a 501(c)(3) corporation formed. Two years later, on April 1, 1980, the Society Hill Family Health Clinic opened, with the mission to "enhance and improve the health and wellbeing of everyone." Initially, Society Hill had only four employees, and it served 24 patients on its first day of operation. A name change to 'CareSouth Carolina' was made in 1996 and now the organization has more than 600 employees and serves communities across five counties in Chesterfield, Darlington, Dillon, Lee and Marlboro.

The health center offers a comprehensive array of services including family practice, women's health, geriatrics, social services, clinical counseling, pharmaceutical services, laboratory and X-ray, chiropractic care, dentistry, substance-abuse prevention, infectious disease, and school-based dental, and was one of the first health centers nationwide to offer an integrated approach to behavioral health counseling. In addition to its services offered within the health center offices, CareSouth Carolina also offers a comprehensive set of services within its communities through its mobile units and its newly-acquired MOBY units, which have been used in the fight against the COVID-19 pandemic through testing and vaccinations.

A Joint Commission accredited Patient-Centered Medical Home recognized for reducing disparities and achieving quality delivery of care, the center strives to continually meet community needs by implementing programs that make health care more accessible. For example, the Advanced Access scheduling process allows patients to be seen within one to two days, by their provider of choice. The regional family caregiver support program provides resources to help families who are caring for older adults with a chronic illness or disability; the health center is a designated as Area Agency on Aging and an Aging and Disability Resource Center (ADRC).



Hartsville, South Carolina



CareSTL Health began in 1969 as St. Louis Comprehensive Neighborhood Center, a professional training facility in the primarily African American Wells-Goodfellow neighborhood of North St. Louis City. The founding board of directors hired as the center's first Chief Executive Director Mr. Morris Henderson, a prominent civil rights leader who was committed to making sure everyone had access to workforce training and social services.



Under Mr. Henderson's leadership, the center established the first methadone clinic, WIC (Women, Infants and Children program) Food Nutrition Service on site and opened a satellite center at Prince Hall on Newstead and Pope.

In 1971, St. Louis Comprehensive Neighborhood Center graduated its first class of healthcare professionals and began delivering a wide array of medical services to the community, operating out of three trailers. Those services laid the groundwork for the expansion of care in the ensuing years. The center's first permanent, full-service facility was built in 1972 and was expanded in 1974. Upon Henderson's death in 1982, the directors appointed as CEO Myrtle Hilliard Davis,

a nurse by profession who had served on the health center's staff since its founding. Davis, a 1955 graduate of Homer G. Phillips Nursing School, knew the inner workings of the organization and had a strong professional background in health care. Davis would be the CEO to shift the focus of the organization to health care. In 2001, upon Ms. Davis' retirement, the health center changed its name to Myrtle Hilliard Davis Comprehensive Health Centers.

In the following decade, the organization expanded to Prince Hall, and through a transfer from St. Louis Connect Care in 2005 added the Riverview (Florence Hill) and Whittier (Homer G. Phillips) locations. Today, comprehensive and holistic medical, dental and behavioral health and specialty care services are offered across four sites, and its school-based health centers serve four local school districts (Jennings, Hazelwood, Riverview Gardens and Ritenour). The broad range of services now includes vision care, chiropractic, and pharmacy; new facilities for all locations are in the works, and a charitable arm, CareSTL Foundation, has been created to help sustain the future of the organization.



The health center rebranded in 2018 as CareSTL Health, as part of an initiative to reach new patients while continuing to support and serve the community as the provider of choice for comprehensive health services, dedicated to eliminating health disparities and empowering every community member to live a long, healthy life.



St. Louis, Missouri



Photo by Dr. Joseph Lau

CBWCHC is widely recognized nationally for its innovation, quality and focus on ensuring that everyone in the community has full and equal access to the highest level of health care.



New York, New York

CHARLES B. WANG COMMUNITY HEALTH CENTER

cbwchc.org



CHARLES B. WANG
COMMUNITY HEALTH CENTER
王嘉廉社區醫療中心

The Charles B. Wang Community Health Center (CBWCHC) has served the New York metropolitan area Asian American community since its establishment in 1971. That year, a group of volunteers organized the 10-day Chinatown Health Fair, the first of its kind to be held in the community, to provide free health screening and education and demonstrate the need for culturally relevant, Chinese-language health care services.

The fair's success inspired the creation of a free clinic known as the Chinatown Health Clinic. During the next six years, volunteer doctors, nurses, social workers and students provided services during three weekly clinic sessions. Project AHEAD, a program for Asian-American college students, was initiated by the clinic in 1975 to encourage community youth to pursue health careers. In 1979, the clinic received federal funding through the Bureau of Community Health Services Urban Health Initiative (UHI). With more secure funding, the clinic was able to add staff and open seven days a week.

In the ensuing years, new programs were added and milestones achieved. Following its successful 20th anniversary event, the health center initiated a capital campaign to renovate its facilities, and in 1994, moved into new quarters, doubling its capacity. A site in Flushing was opened in 1997 to serve the growing community of Asian Americans in Queens County. As the community grew, the health center initiated a project to expand its service in Manhattan. With the support of private philanthropy, the health center renovated additional space on Canal Street, Chinatown's main thoroughfare, and in recognition of a major donor, changed its name to Charles B. Wang Community Health Center in 1999.

Today CBWCHC is a leading provider of comprehensive primary care services for Asian Americans in the NY metropolitan area, operating five locations. CBWCHC provides internal medicine, pediatrics, obstetrics and gynecology, dental care, mental health care, and consultation for select medical specialties. Social work services, health education, insurance enrollment assistance and care management link patients to comprehensive community services.

The health center's bilingual and bicultural staff work tirelessly to provide care and treatment while advocating for the health and social needs of underserved Asian Americans. Over the decades, project AHEAD has trained hundreds of students who have pursued careers in the health professions. A robust research and education program supports the health center's core mission.

CHASE BREXTON HEALTH CARE

chasebrexton.org



Chase Brexton Health Care

Because everyone's health matters.

Founded in 1978, Chase Brexton began as a volunteer-run health clinic serving gay men in Baltimore's Mt. Vernon neighborhood. One of the first clinics on the front lines responding to the HIV/AIDS epidemic in the early 1980s, the clinic became an essential lifeline for those affected. As the epidemic spread beyond the gay community, Chase Brexton established itself as a leading provider for all HIV-infected people, including intravenous drug users who were at high risk for infection. The health center's Wall of Courage, originally created during the beginning of the AIDS epidemic, is Baltimore's only memorial devoted exclusively to those who have waged the battle against HIV/AIDS.



Seeing that the families and loved ones of those they served also needed access to care, Chase Brexton began to expand, adding behavioral health and case management services in 1991, and full primary care services in 1995. In 1999, the health center was designated a federally qualified community health center.

The health center expanded to a second location in 1999 and more growth followed. Today, Chase Brexton is a National Committee for Quality Assurance (NCQA) recognized Patient-Centered Medical Home serving people from all walks of life across central Maryland, with locations in Baltimore, Columbia, Easton, Glen Burnie, MICA, and Randallstown. The

health center provides a full range of primary care, behavioral health, dental and substance use disorder services, as well as laboratory, pharmacy and supportive services to support total wellness. Care for LGBT community members continues to be central to its programs. The LGBT Health Resource Center offers specialized behavioral health services, LGBT-focused support groups and education and training for organizations seeking greater LGBT competency.

Providing care that honors, affirms and supports each patient is at the core of the health center's work. Chase Brexton remains committed to providing individualized care that respects and empowers patients of all ages, races, gender identities, religions, sexual orientations, ethnicities and socioeconomic statuses.



Whether new to the community or new to the country, with or without insurance, gay or straight, all are welcome and receive compassionate, quality care at Chase Brexton.



Baltimore, Maryland



**Cherry Health's mission endures:
to improve the health and wellness
of individuals by providing
comprehensive primary and
behavioral health care while
encouraging access by those who
are underserved.**

Cherry Health was established as the successor to Grand Rapids' Neighborhood Health Services, which had served the community in the early 1970s. In an effort to improve access and address the needs of minority and disadvantaged community members, a blue-ribbon commission was formed, and Cherry Street Health Services was established. The health center opened in 1988 and operated a single facility at 550 Cherry Street offering both medical and dental services.

In the ensuing years, Cherry Street Health Services expanded its services and added new programs and locations. In 1995, it opened its first school-based health center and the Westside Health Center building. It later acquired Grand Rapids Pediatrics (1998) and added three more school-based health centers at area high schools (2005-2008), also expanding vision and dental screening, health education and referrals for follow-up care at several area public schools. A merger in 2011 with Touchstone Innovare, the county's largest provider of mental health services for adults, and Proaction Behavioral Health Alliance, a provider of addiction and recovery services, added extensive capacity in behavioral health, mental health and correctional health.

Steady growth continued, and today the health center offers integrated health care services at more than 20 locations. Patients have access to a full range of primary care, women's health and OB/GYN services, pediatrics, comprehensive dental and vision care, behavioral, mental health substance use treatment and counseling, correctional health, pharmacy, and case management services. In addition to its four school-based health centers, a traveling school-linked program active in 70 public schools offers both vision exams and comprehensive dental care. The health center's growth has been accompanied by statewide and national recognition for its work in the reduction of health disparities, improving chronic illness outcomes, smoking cessation and translating pediatric asthma research findings into effective front-line delivery.

In 2014, the health center changed its name to Cherry Health, a reflection of its expansion well beyond its original Cherry Street location to become the largest community health center in the state, serving Barry, Kent, Montcalm, Muskegon, Ottawa and Wayne counties. Cherry Health joined the fight against the COVID-19 pandemic in 2020 by becoming a testing site for the Janssen Pharmaceutical Companies of Johnson & Johnson's ENSEMBLE trial for a COVID-19 vaccine.



Grand Rapids, Michigan



Clinica Sierra Vista was formed in the small Kern County farming community of Weedpatch in 1971, during the early days of the community health center movement. A group of idealists and visionaries set out to provide quality health care to migrant farmworkers who harvested the lush agricultural fields in the rural southern San Joaquin Valley, but struggled to afford even basic needs like food, shelter and health care.

The health center evolved to serve ethnically diverse, frontier, rural, urban, homeless and migrant communities, and is now one of the largest comprehensive migrant community health center systems in the nation, a true patient-centered medical home offering primary medical, dental and behavioral health services as well as pharmacy, optometry and laboratory throughout the Kern, Fresno and Inyo regions.

Innovative programming is tailored to meet the needs of the community and has put the health center on the forefront of efforts to enhance services. In addition to clinical care, the organization's health education, promotion and prevention programs are an essential component of the delivery model. Intensive street outreach is offered to support the needs of persons experiencing homelessness, and a range of housing opportunities are offered for individuals living with HIV/AIDS and permanent disabilities. Other programs address the needs of high-risk youth, linking families to community-based services and providing care and resources for pregnant and parenting teens. Mobile units provide care to individuals experiencing homelessness, students, community members and migrant seasonal farmworkers and their families. The Rio Bravo Family Medicine Residency Program supports the recruitment, training and retention of Family Medicine physicians who are dedicated to serving the underserved in California's central San Joaquin Valley.

During the COVID-19 pandemic, Clinica Sierra Vista became one of the first community health centers in the nation to offer rapid testing and is now on the forefront of delivering COVID-19 vaccinations to thousands of vulnerable patients in the central valley.



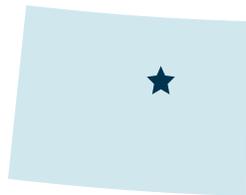
The center's growth reflects the dedication of a board and staff committed to both health care delivery and social justice. Through partnerships and tireless advocacy that supports and amplifies the voices of the community, Clinica Sierra Vista elevates the health of the communities it serves.



Bakersfield, California



CCHN has consistently provided effective advocacy and technical assistance to its members, supporting the provision of high-quality care across the state of Colorado, and advancing the cause of the state's community health centers, which today are the backbone of the primary care safety net, and serve more than 852,000 people.



Colorado

COLORADO COMMUNITY HEALTH NETWORK

cchn.org



Colorado Community Health Network (CCHN) began in 1982 when a small and determined group of visionaries formed a lifelong bond around a single cause: providing premium health care to all Coloradans, regardless of ability to pay. Their plan was to politically mobilize Colorado's community health centers - then numbering a dozen facilities stretched from farm towns to urban neighborhoods - that had provided health care to working families, including people without medical insurance, since 1966. The visionaries saw that to meet the needs in their individual communities, a statewide network of like-minded organizations was required. They worked to strengthen the network of health centers and elevate the community health center movement in Colorado to the next level by launching an alliance.

CCHN has worked since its inception to ensure that Colorado's low-income residents have access to affordable, high-quality comprehensive primary health care. To ensure that all Coloradans have a health care home, CCHN is committed to educating policy makers and stakeholders about the unique needs of community health centers (CHCs) and their patients, providing resources to ensure that the CHCs are strong organizations, and supporting its community health center members in maintaining the highest quality care. A robust Quality Initiatives Division provides resources for practice transformation and capacity building through ongoing practice facilitation and training in quality improvement. Extension for Community Health Outcomes (ECHO) Colorado is an initiative dedicated to increasing capacity for complex care management.

CCHN monitors, analyzes and influences state and federal legislative and regulatory policies that impact CHCs and their patients, and provides direct assistance including training, data analysis and various other resources to existing CHC organizations and those exploring the health center model.

COLUMBIA BASIN HEALTH ASSOCIATION

cbha.org



Columbia Basin Health Association (CBHA) was founded by a group of community citizens who wanted to guarantee equal access to health care to all people living and working within the Othello, WA trade area. In late 1971, a small group of concerned people gathered to brainstorm solutions to the health care crisis created by the growth of the population, lack of physicians and low reimbursement to medical providers. They were especially concerned about the medically indigent, as well as the special needs of the migrants and seasonal farmworkers, and wanted to bring preventive medicine and educational programs to their doorsteps.

Despite opposition to its vision, the group continued to push forward. Their struggle made national news and finally, their perseverance paid off. The clinic opened in August 1973, with one staff physician working out of four exam rooms.

In the ensuing years, the Othello Family Clinic in Adams County was joined by clinics in Grant and Franklin County. CBHA's Family Medicine paradigm offers a wide range of services including medical, dental, eye care, behavioral health and family service programs.

These services have filled a void in rural central Washington, a service area of nearly 3,700 square miles, and improved health outcomes throughout the community. In 2011, CBHA was presented with the Migrant Health Center of the Year Award by the National Association of Community Health Centers. The award recognized CBHA's outstanding achievements and contributions to the migrant health center mission and to community-based health care overall.

CBHA maintains a strong tradition of excellence. The pillars of Services, Quality, People, Finance, Growth and Community provide the framework for setting organizational goals and directions, expanding access to health care and providing high-quality, comprehensive services.



Othello, Washington

COMMUNITY HEALTH ASSOCIATION OF MOUNTAIN/PLAINS STATES

championline.org



CHAMPS actively assesses the evolving needs of the region and works in close coordination with Region VIII state PCAs to ensure that Mountain/Plains states' issues are brought to the forefront of regional and national decision-making. Looking ahead, CHAMPS will continue to strengthen the Region VIII health center network to improve access and affordability.

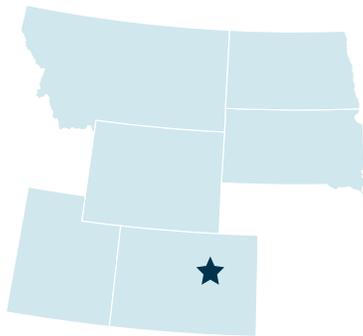
The mission of Community Health Association of Mountain/Plains States (CHAMPS) is to provide opportunities for education and training, networking, and workforce development so that health centers in Region VIII, comprising Colorado, Montana, North Dakota, South Dakota, Utah, and

Wyoming, can better serve their patients and communities. CHAMPS was founded in 1985 to bring together health centers and state Primary Care Associations (PCAs) in the Mountain/Plains region and celebrated its 35th anniversary in 2020.

CHAMPS provides a broad range of programs and services to help Region VIII health centers serve their communities more effectively. The Association collects and disseminates data related to health center recruitment and retention; salary, benefits, turnover, and vacancies; clinical staffing and productivity; demographics and health behaviors. CHAMPS provides timely communications about federal policy, funding and development opportunities, and offers innovative education and training for Region VIII health center staff at all levels via many modalities. CHAMPS also provides effective networking and partnering opportunities, houses a carefully curated on-line clearinghouse of resources and tools, supports workforce development, and promotes best practices in staff recruitment and retention and in clinical quality improvement.

Just a few examples of its myriad programs and services illustrate how CHAMPS works to promote its mission. The Mountain/Plains Clinical Network (MPCN), established in 1990, facilitates the professional, administrative, and educational development of all Region VIII health center providers and ensures a provider voice. CHAMPS initiated the Workforce Development Program in 2003 to address the unique but interrelated issues of current and future health center professionals on a variety of levels, from students considering their future in community health, to current clinicians, managers, administrators, and board members.

As a regional Primary Care Association, CHAMPS provides economies of scale and is a model of service integration and collaboration.



Colorado, Montana, North Dakota,
South Dakota, Utah, Wyoming

COMMUNITY HEALTH CENTER, INC.

chc1.com



Student activist Mark Masselli learned about the free clinic movement emerging across the country in 1971, and together with Wesleyan University students and community members, set out to start a clinic in Middletown to address the glaring need for health care services in the local area, where resources were scarce, and people depended on the emergency room for care. Leading the charge alongside Masselli were Reba Moses, the daughter of a sharecropper, who brought long experience in fighting for social justice, and Gerry Weitzman, the owner of a Main Street pharmacy and the first person in the business community to lend a hand to the fledgling organization.

The first Community Health Center, Inc. (CHC, Inc.) site opened in 1972, offering free dental care in a converted walk-up apartment. Services were provided by five local volunteer dentists, and - lacking local doctors - the physician friend of a board member, who commuted once a month from NYC, where he was finishing his medical residency. Following a state inspection that closed the site down and the move to another space, the clinic became licensed as an outpatient medical and dental facility.

The health center's first site expansion, to nearby Clinton, resulted from the invitation by elder-activist Gray Panthers seeking a solution to the fact that Medicare did not cover dental care. Despite local hurdles and challenges, other collaborations and expansions followed. In 1992, CHC, Inc. took over a city-run clinic in New London and received designation as a federally qualified health center. CHC, Inc. now provides comprehensive medical, dental and behavioral health services addressing the needs of the entire community, including the uninsured, underinsured and vulnerable populations, at multiple locations.

Workforce training programs are essential to its model. CHC, Inc. established the nation's first nurse practitioner residency program (2007), and a residency program for clinical psychologists (2011). CHC, Inc.'s Weitzman Institute is dedicated to transformational research and innovation in primary care. Through the Institute and other initiatives, CHC, Inc. offers technical assistance to health centers across the country. Special community programs include Vinnie's Jump and Jive community dance hall, New Horizons Domestic Violence Services and Shelter, Wherever You Are Healthcare for the Homeless and Family Wellness Centers.



Photo by David Apuzzo

At its health center hubs, school-based satellite locations and mobile outreach sites, CHC, Inc. continues to be both an innovative leader and a voice and vehicle for social change, dedicated to providing services that best meet the needs of its communities and patients.



Middletown, Connecticut



A careful steward of its bold mission, Community Health Centers of Burlington continues to grow and innovate as it provides affordable, quality health care to all who need it, regardless of financial status or life circumstances.



The seed for Community Health Centers of Burlington (CHCB) was planted in 1971, when the People's Free Clinic opened in a tiny storefront in Burlington's Old North End. Announcing "a new kind of health care," the People's Free Clinic founders defined an unequivocally resounding mission: every person - regardless of age, race, class, or gender - deserves good medical care, regardless of their ability to pay.

Staffed entirely by volunteers, including two local physicians, the small clinic saw 50 people per week by the end of the following year, treating minor wounds, offering health information, and providing sick visits. Soon, the clinic would strengthen its commitment to care in the local community, and be renamed the Community Health Centers of Burlington.

CHCB was officially awarded the status of a Health Care for the Homeless Program grantee in 1989, ensuring free access to health care for individuals and families experiencing homelessness, and today remains the only organization in Vermont with this designation. CHCB was then designated Vermont's second federally qualified health center, allowing for additional support and enabling services such as social work and financial assistance. The success of this model was demonstrated with the outpouring of community support in 2001 that enabled CHCB to create its 10,000 square-foot flagship Riverside Health Center facility.

New sites, programs and services followed. Today, CHCB offers a complete array of services across eight sites in Chittenden and southern Grand Isle counties, including medical, dental, integrated psychiatry and counseling, as well as treatment assistance for patients struggling with substance use disorders, a youth health program, doctor-at-home visits, maternal-child health program, LGBTQ+ specialty clinics, culturally competent care for refugees and new Americans, and connections to prescription discounts. A new outreach van, acquired in 2020, has enabled CHCB to expand access to medical outreach visits provided through the Homeless Healthcare Program.



Burlington, Vermont

COMMUNITY HEALTH DEVELOPMENT, INC.

chdi4health.org



Community Health Development, Inc. (CHDI), formerly Uvalde County Clinic, Inc., was incorporated in 1983 in Uvalde County, Texas. CHDI was founded by county residents concerned about the lack of access to quality and affordable health care for the underserved and working poor families. CHDI began operations in June 1984 as a Migrant Health Center with funding from the Bureau of Primary Health Care, Health Resources and Services Administration, and Department of Health and Human Services and additional city and county funding. It operated out of an 800 square-foot trailer, with a staff of four. In 1986, CHDI received expanded funding from the Bureau of Primary Health Care (BPHC) as a Community/Migrant Health Center.

At its inception, CHDI provided services solely to the residents of Uvalde and parts of Zavala counties from its main site, Our Health/Nuestro Centro De Salud. CHDI grew from these modest beginnings and now provides care at several locations. In 1993, the agency received additional funds from the BPHC under Section 330 of the Public Health Services Act, to expand services to Real and Edwards Counties. CHDI opened Rolling Hills Health in Leakey in 1993. In 2000, Our Health/Nuestro Centro De Salud moved to its current 21,300 square-foot primary care center. In 2002 in partnership with the City of Camp Wood, CHDI opened Canyon Health Center. In 2009, the dental program, previously based at Our Health, moved to its new location at the Center for Community Wellness in Uvalde. CHDI's entire service area is designated as a Medically Underserved Area as well as a Federal Empowerment Zone.

The scope of services provided by CHDI encompasses primary medical care including family and internal medicine, women's health and family planning, perinatal case management, diagnostic laboratory X-ray, dental, behavioral health, Class A and D pharmacies, preventive health care, disease screening and management, health education/promotion, community education and referrals to other social service organizations.

Innovative programs are tailored to the community's unique needs. The Fitness Center, opened in 2013, offers state-of-the-art exercise equipment, an indoor walking trail and personal trainers available to patients with the goal of improving clinical outcomes. Nutrition, dietary and diabetes self-management programs are offered at the center's Teaching Kitchen.



Community Health Development, Inc.'s philosophy – that the community's resources and needs are primary – guides its planning, operations and services delivery model. CHDI is dedicated to serving the wellbeing of its clients without regard to race, sex, color, religion, national origin, disability or ability to pay for services.



Uvalde, Texas



Today CHI operates 11 health center sites, two urgent care walk-in locations, four pharmacies and 35 school-based health centers, a mobile dental trailer and mobile medical van, serving patients from more than 30 different cultures. Doris Ison's vision was the starting point for a comprehensive community health center system that continues to innovate and expand.

In the 1960's South Miami-Dade County's predominately African-American, Bahamian and Mexican migrant and seasonal farmworker residents were largely uninsured and had limited access to health services. Trauma victims were transported to hospitals in downtown Miami. Treatment for routine medical problems and regular primary care were luxuries. The area's nearest hospital, James Archer Smith, did not treat African-Americans, and Jackson Memorial was 45 miles away, inaccessible by public transportation.

Doris Ison, an immigrant, former farmworker and seasonal cannery worker, was driven to secure health care access for the underserved in South Dade. Galvanizing community support, Ison organized a coalition to advocate for a health center, visiting churches and convincing doctors to volunteer. In 1971, with federal funds from the Office of Economic Opportunity and supplemental funds from Metropolitan Dade County, Community Health of South Dade Incorporated was established, initially located in two trailers near U.S. Highway 1, and staffed by physician volunteers. It would later become Community Health of South Florida, Inc. (CHI).

By 1972, Miami-Dade County agreed to help build a permanent facility with funds from the county's Decade of Progress Referendum. CHI offered primary care, pediatrics, dental, behavioral health, crisis stabilization services, laboratory, imaging, pharmacy, and patient transportation. A second facility – Martin Luther King Jr. Clinica Campesina – was later opened in Homestead.

Brodes H. Hartley, Jr. joined the health center as President and CEO in 1984 and CHI continued to expand under his leadership, initiating OB/GYN and urgent care services and opening new sites. Hartley also joined with other health center leaders to found Health Choice Network (HCN), which offered health information technology and centralized business services. During the 1990s CHI constructed state-of-the-art facilities at South Dade, Everglades, Naranja, West Perrine and the MLK Annex. The health center became a national leader in comprehensive, community-based care.

Hartley also advocated for CHI to become the first Teaching Health Center in Florida designated by Health Resources and Services Administration (HRSA). Its residency programs are ACGME accredited in family medicine and psychiatry. Blake Hall, a long-time CHI executive, was recently promoted to President of the organization.



Miami, Florida



Family Health Center (FHC) was established in 1992 through an innovative community effort to provide primary and preventive health care to the medically underserved in Columbia. Initial partners included three major hospitals, Columbia Area United Way, Columbia/Boone County Health Department, University School of Medicine, and the Missouri Department of Social Services. The health center was designed to offer high-quality care for the community's uninsured and underinsured residents, offering a medical home to those who had previously relied on emergency rooms. The health center's original operating budget was \$330,000, with donations making up \$315,000 of the revenue.

Operating a single site in Columbia's Parkade Center, the health center was initially staffed by just two part-time family practice physicians, one nurse practitioner, and a registered nurse. As many as 71 doctors who participated in the Boone County Medical Society program, "Doctors Sharing Care," also volunteered to help staff the clinic. In its first year, the center served approximately 5,000 patients. In 1995, FHC was reorganized as a not-for-profit corporation with a local governing board. FHC was designated a federally qualified health center and received its first federal grant in 1999.

Today, FHC has locations in Columbia, Marceline, and Salisbury. It continues to provide care to the medically underserved, and offers primary, mental health, and dental care as well as walk-in Express Care and innovative enabling services that are intended to increase access to health care. These important non-clinical services support and facilitate access to comprehensive patient care. Enabling services include medical social services, health insurance eligibility determination, medication assistance, interpretation services for non-English speaking patients, community health education, transportation assistance for those who need support to access the health center, outreach, and referrals to community-based resources.

Family Health Center's mission incorporates a commitment to access, improving the health of the community and training future healthcare providers. Physician residents practice at the health center through a collaboration with the University of Missouri Medical School. The health center is a true patient-centered medical home, and the backbone of the safety net for its community.

In 2020, Family Health Center announced a merger with Compass Health Network, a comprehensive provider of integrated behavioral health, primary care, and dental services and among the largest community health centers in the state, serving 45 counties. The two organizations have shared a common vision and will offer accessible, high-quality care to more people and communities.



Columbia, Missouri



CORNELL SCOTT - HILL HEALTH CENTER

CornellScott.org



Cornell Scott - Hill Health Center is a nationally recognized innovator, and a “community of caring.” Its mission, to measurably improve the health and well-being of the communities it serves by providing excellent and compassionate care, accessible to all, is reflected in more than 50 years of committed, comprehensive high-quality services.

Founded in 1968, Cornell Scott - Hill Health Center was the first community health center in Connecticut. Yale School of Medicine had received a modest grant from the federal government to operate pediatric services in the Hill, New Haven’s south-westernmost neighborhood. Residents of the New Haven community, including the health center’s future namesake, Mr. Cornell Scott, partnered with Yale to establish Hill Health Center, opening its first location in the former home of the Orange Street Bus Company garage. In 1970, with a grant from the U.S Department of Health Education and Welfare (HEW), the health center added adult medical services; ophthalmology was added in 1982, and it was only a matter of time before additional services were added and new sites opened to meet the needs of the community.

Known since 2009 as the Cornell Scott - Hill Health Center in honor and tribute to Cornell Scott’s legacy, the health center now operates care sites serving neighborhoods in New Haven, among the most disadvantaged in the state, as well as Derby, Ansonia and West Haven and towns in the Lower Naugatuck Valley, Ansonia, Seymour, Shelton, Naugatuck, and Oxford.

Cornell Scott - Hill Health Center provides a full range of medical, dental, and behavioral health care services, offering primary care for adults and children, as well as specialty medical care, from allergy and audiology to dermatology, rheumatology and urology and several other specialties.

Also offered are routine and emergency dental services. Behavioral and mental health services are among the most comprehensive in Connecticut, and include inpatient and outpatient substance use treatment, as well as individual, group and family therapy, psychiatric evaluations, and medication-assisted therapies. Walk-in/urgent care and pharmacy are available on site. A special program including case management is offered for those affected by homelessness in the Greater New Haven area. School-based health centers serve children from elementary through high school.



New Haven, Connecticut

DELTA HEALTH CENTER, INC.

deltahealthcenter.org



Mississippi is the home of Delta Health Center (DHC), America's first rural health center, and a cornerstone of the health center movement. In 1965, the Office of Economic Opportunity (OEO) awarded a grant to Tufts University to establish, as a demonstration project, the nation's first two health centers. A response to widespread urban and rural poverty and striking racial and income disparities in health outcomes, the health centers were conceived by Dr. H. Jack Geiger after two seminal experiences: working with community health pioneers Drs. Sidney and Emily Kark in South Africa; and serving in the Delta during the Freedom Summer of 1964 at the behest of Dr. Robert Smith of the Medical Committee for Human Rights, who organized physicians to provide medical services for civil rights workers.

Along with Dr. Count Gibson, the head of Tufts' Department of Preventive Medicine, and at the urging of Dr. Smith, Dr. Geiger proposed to adopt the Kark's model of Community Oriented Primary Care, integrating primary care with population-focused public health. The urban Columbia Point (MA) site opened in December 1965, and Mound Bayou, the oldest predominantly Black community in America, was chosen as the rural site. Dr. Geiger, who served as project director for both programs, arrived in Mound Bayou in 1966. Dr. John W. Hatch, the Center's Director of Community Health Action, came later that year to begin the organizing and outreach work of the Tufts Comprehensive Community Health Action Program, of which the health center was part. After nearly three years of planning, the Tufts-Delta Health Center opened in 1967.

Community development initiatives were central to the model, which also included local health associations and a health council. In 1968, the Farm Co-op opened, supported by a grant from OEO's Emergency Food and Medical Services Program. Dr. L.C. Dorsey, a community activist who later served as the health center's project director, was instrumental in starting the Farm Co-Op, Head Start, and other community programs.

Today, DHC provides comprehensive medical, dental, mental health and wellness care at 18 sites serving Bolivar, Issaquena, Sharkey, Sunflower and Washington counties. A key part of the community's fabric and a major employer, DHC is committed to community empowerment, supporting the struggle for better health for all, and achieving "A Healthier Delta – A Healthier Mississippi."

Delta Health Center flourished, overcoming challenges and funding struggles to add sites and expand services. In tribute to Dr. Geiger, in 2014 DHC opened the Dr. H. Jack Geiger Medical Center, a state-of-the-art health facility in Mound Bayou.



Mound Bayou, Mississippi



As Denver Health enters its sixth decade of service, the health center builds on a rich history of service, vision of quality, and commitment to health care for all.

Denver Health originated as part of Denver's City Hospital, which was established in 1860 to serve the rapidly developing city. Later known as Denver General, the hospital served as the city's safety-net institution. Like many public hospitals, it was underfunded and struggled to maintain its aging facilities and keep pace with the need for care, but continued to offer services consistent with its mission.

The establishment in 1964 of the Office for Economic Opportunity (OEO) as part of President Johnson's War on Poverty inspired the city to create the non-profit Denver's War on Poverty, and Dr. Samuel Johnson was tasked with developing the health-related programs. Together with then-Denver Mayor Tom Currigan, Johnson planned a network of health clinics in Denver's low-income neighborhoods to provide not only primary care, but also dental care, social services, transportation, daycare, and educational assistance, while addressing the need for job training and other services.

Denver's grant application to the OEO was the nation's first. On June 30, 1965, just days after awarding a grant to Tufts University, the OEO approved a one-year demonstration grant to Denver Health and Hospitals; additional cash and in-kind services were to be provided by the city.

Overcoming challenges from the medical establishment, Eastside Neighborhood Health, the first community health center west of the Mississippi River, opened on March 7, 1966. In addition to offering health care services and consistent with objectives to maximize community involvement, the clinic provided jobs to neighborhood residents. Johnson then began planning another full-scale health center, as well as smaller "health stations." A second family health center opened in 1968. In just over three years, the Denver Neighborhood Health Program included two large health centers and eight smaller health stations.

The network grew as it adapted to internal and external political struggles, changes in the availability of funding, reorganization of the hospital system, and community needs. Today, Denver Health operates 10 primary care locations and six dental sites, as well as 18 school-based clinics. Its newest location, Sloan's Lake Primary Care Center, developed in partnership with the Denver Housing Authority, opened in September 2020. A partnership with the Public Health Department helps address prevention and population health. Denver Health incorporates the principles of the LEAN model adopted across the organization, focusing on creating value to truly meet community need.



Denver, Colorado

DESERT SENITA COMMUNITY HEALTH CENTER

desertsenita.org



Desert Senita Community Health Center is located in the remote rural town of Ajo, Arizona. For decades, Ajo was a thriving mining town, the site of the Phelps Dodge New Cornelia Copper Mine. The health center grew out of an outpatient clinic that was part of a local hospital, constructed by Phelps Dodge.

With the closure of the mine in 1986, the outpatient facility relocated to what had previously been the Phelps Dodge men's dormitory. The health clinic continued to operate through the closing of the mine, and the subsequent closure of the hospital. For a few years, the clinic was run by a hospital management organization. It ultimately became an independent freestanding non-profit in 1997, and in 2001 was designated a federally qualified health center.

As the sole provider of medical services for the entire service area, Desert Senita worked hard to adjust to the changes resulting from the loss of the Phelps Dodge sponsorship and the shift from fully covered, company-insured patients to a population that included those who were uninsured, as well as Medicaid and Medicare enrollees and commercial patients whose coverage provided for only a limited scope of care.

Desert Senita now operates locations in both Ajo and Arizona City. It provides comprehensive services including medical, dental, behavioral health, pharmacy, lab and X-ray, and community outreach services focused on access and prevention. The Edible Ajo School Yard (EASY) School Gardening Program at Ajo Unified School District is certified by the Arizona Department of Health Services. The program is part of a regular curriculum for students in Pre-Kindergarten through sixth grade and provides them with hands-on gardening skills, nutrition education, and science-based lessons. Partnerships with other community organizations such as the Ajo Center for Sustainable Agriculture extend the health center's reach and improve the health of the entire community, which benefits from these best practices.

From the outset, the health center has emphasized its role as the focal point for health care in diverse, multicultural communities. While Desert Senita has expanded in size, scope, and geography since its founding, it truly lives by its mission by providing quality, local, affordable health care for all.



Ajo, Arizona



Duffy Health Center's mission is to provide comprehensive, integrated health care and support services to persons on Cape Cod who are experiencing or are at risk of homelessness, and to improve the quality of life for vulnerable populations through community collaborations, leadership, and advocacy.

A unique patient-centered medical home, Duffy works closely with community partners to achieve its vision of Cape Cod as a community where all persons have access to quality health care, safe and affordable housing and lives filled with hope and purpose.

Duffy Health Center has provided services in Barnstable County for more than three decades. What began in the early 1990s as a volunteer free clinic run by nurse practitioners and Dr. Arthur Bickford has evolved and expanded to meet client needs. In 1997, the clinic was incorporated as the O'Neill Health Center and licensed for primary care services. At that time the health center adjoined the Housing Assistance Corporation's NOAH shelter, now known as St. Joseph House, and primarily served individuals identified as chronically homeless. Judy Best-Lavigniac, a nurse practitioner involved in the volunteer operation of the O'Neill Health Center, became its first executive director.

In 2002, the center was awarded a grant through the Health Resources and Services Administration (HRSA) Health Care for the Homeless Program. In the 2000s, under the leadership of the next Executive Director, Claire Goyer, the center became a licensed mental health clinic and developed state-of-the-art, evidence-based case management programs, including the Housing First initiative through MassHealth. In 2006, the health center's name was officially changed to Duffy Health Center.

In 2011, Duffy realized its dream of housing all programs under one roof and moved to its current home. The additional space allowed the center to expand its definition of eligibility for services and the client base grew substantially. Duffy Health Center's growth over the past 10 years has been fueled by health center expansion funds granted through the Affordable Care Act (ACA), and state and federal funds for responding to the opiate use disorder epidemic.

Duffy provides a range of medical, behavioral health, case management and other services to persons who have complex medical and mental health needs. The center's outreach staff also provide medical care at St. Joseph's House, while the Housing First program prioritizes providing permanent housing for those experiencing homelessness, and In From the Street offers temporary shelter and case management for those who are medically frail or at risk due to severe weather.



Hyannis, Massachusetts

EAST BOSTON NEIGHBORHOOD HEALTH CENTER

EBNHC.org



East Boston Neighborhood Health Center (EBNHC) originated in the late 1960s when a community group mobilized to address the critical need for health care in its geographically isolated area. To access health services, residents had to travel to Greater Boston, a trip that could take two hours by public transportation. This distance prevented many people from accessing essential primary care, prenatal care, or health screenings.

The community advocates and health center's founding board members were committed to meeting the needs of a diverse, largely immigrant and economically disadvantaged community, and ensuring that high-quality care was available to everyone, regardless of ability to pay. With this objective, EBNHC first opened its doors in 1970 and since that launch, has operated 24 hours a day, 7 days a week. Today, it is the only health center in New England, and one of the few in the country, to provide continuous care, 365 days a year.

The health center grew rapidly to meet demand, offering adult and family medicine, women's health, pediatrics, behavioral health and on-site ancillary and specialty services. EBNHC operates a 24-hour Satellite Emergency Facility and a wide range of unique programs and innovative services to serve every member of the community: elder adults through the Program of All-Inclusive Care for the Elderly (PACE) program; children with multiple and severe disabilities; and individuals with HIV/AIDS. EBNHC operates a diverse, multi-site network including a state-of-the-art, LEED-certified flagship site at Maverick Square, East Boston, opened in 2012. The health center has also expanded to nearby Winthrop, opening Winthrop Neighborhood Health in 2016, and merged with South End Community Health Center in 2020. The health center now serves East Boston, Chelsea, Revere, Everett, Winthrop, and the South End.

A local economic anchor, the center's Education & Training Institute provides job skills training and career advancement opportunities for employees and the broader community.

EBNHC is the state's largest community health center, and a leading health care provider in the area. It is dedicated to providing easily accessible, affordable, appropriate, high-quality, personalized, coordinated primary care, for all who live and work in East Boston and the surrounding communities, without regard to age, income, insurance status, race/ethnicity, language, culture, or social circumstances.



East Boston, Massachusetts



EDWARD M. KENNEDY COMMUNITY HEALTH CENTER

kennedychc.org



Originally known as GBVHC, the health center was renamed in 2010 in honor of the late Senator Edward M. Kennedy, a titan in the Senate. Senator Kennedy represented Massachusetts for 47 years and was a fierce and lifelong supporter of community health centers. The renaming also recognized the health center's expansion beyond the Worcester community.

Edward M. Kennedy Community Health Center (Kennedy Community Health) was founded in 1972, as the Great Brook Valley Health Center, Inc. (GBVHC), by seven women living in the largest public housing complex in Massachusetts. These women came together to address the lack of access to primary care services that they, their families, and neighbors had been experiencing, forcing them to rely upon the local emergency room for their health care needs. Determined to find a better solution, these women obtained space from the local housing authority to bring a nurse practitioner to the Valley and formed a corporation.

Demand for services grew quickly, not only for medical care but for dental care as well, resulting in the launch of a dental practice in 1978. In 1992, having outgrown their space within the housing complex, a new, larger site was constructed across the street, which today remains the organization's flagship health care site.

Beyond the Worcester community, demand for community-based services was also increasing and with community support, a small medical site opened in downtown Framingham in 2004. The need for equitable, affordable health care in this city quickly overtook the small storefront location and in 2012, a new, larger facility was opened around the corner from the storefront to serve as a patient-centered medical home. A site in Milford opened soon after in 2014, again in response to the efforts of a community coalition to address the needs of low-income and uninsured individuals.

Today, Kennedy Community Health is a multi-site, National Committee for Quality Assurance (NCQA) recognized Patient-Centered Medical Home serving residents of Worcester, Framingham, Milford and the surrounding communities of MetroWest and Central Massachusetts. Over 28,000 patients receive comprehensive services, including primary care, dental, optometry, behavioral health, substance use and social services, HIV treatment and prevention, women's health services, pharmacy, and school-based care. It is recognized as a leader in LGBTQIA+ Health Care Equity by the Human Rights Campaign's Health Equity Index for its work to expand access to inclusive, equitable and accessible health care.

With a mission to "help people live healthier lives," Kennedy Community Health remains steadfast in its commitment to equitable, affordable health care for all.



Worcester, Massachusetts

ERIE FAMILY HEALTH CENTERS

eriefamilyhealth.org



Erie Family Health Centers (Erie) began in 1957, through the efforts of internist Dr. Robert Snyder, a faculty member at Northwestern University Medical School. Through Carmella Genova Jacob, a volunteer at Erie Neighborhood House, a social service agency that worked primarily with Chicago's West Town low-income, immigrant families, Dr. Snyder learned that community residents faced significant difficulty in accessing health care services.

In partnership with Northwestern University, Dr. Snyder and Ms. Jacob opened a free on-site medical clinic for senior citizens in one room at the Erie Neighborhood House, offering geriatric care two afternoons each week. The school's faculty members supervised senior medical students to provide care. Through the 1960s, participation increased to care for patients with acute illness, and the clinic initiated new services including counseling for teens, prenatal and preventive care. Northwestern students continued to staff the program, and in 1968, realized their dream of expanding the clinic's services to serve low-income families.

By 1970, Erie was a full-service health center, and officially incorporated as a separate non-profit entity from Erie Neighborhood House, called West Town Health Center. In 1983, the clinic was designated a federally qualified health center (FQHC) and renamed Erie Family Health Center.

Six decades since Dr. Snyder began offering care in the West Town neighborhood, Erie provides comprehensive medical, dental and behavioral health services at 13 health center locations across Chicago and the northern suburbs, serving patients residing in more than 190 zip codes. Among its innovative program and services are a comprehensive teen health center, the oldest and largest one of its kind serving the area, five school-based health centers, and a variety of health education programs and classes designed to care for the patient inside and outside the exam room. Erie was an original participant in the Teaching Health Center Program and currently provides training for more than 250 doctors and other medical professionals through five residency programs in which the residents' primary longitudinal outpatient training is based at Erie health centers.



Erie Family Health Centers' motivation remains deeply connected to its core belief – that healthcare is truly a human right.



Chicago, Illinois



Since its founding in 1976, Family HealthCare Network has advanced the development of community-based primary health care delivery to address the health care needs of underserved and vulnerable populations. FHCN is community-driven and committed to improving the quality of life in each and every community it serves.

Family HealthCare Network (FHCN) is a non-profit community-based organization that operates federally qualified health centers (FQHCs) throughout Fresno, Kings, and Tulare Counties. It is governed by a volunteer Board of Directors composed of community and business leaders. Family HealthCare Network is the third largest community health center in California.

Family HealthCare Network has earned a reputation for excellence as the first freestanding ambulatory health center in Tulare County to be accredited by The Joint Commission. It boasts the unique distinction of being recognized both by the National Committee for Quality Assurance (NCQA) as a Level 3 Patient-Centered Medical Home and with the Gold Seal of Approval® by The Joint Commission as a Primary Care Medical Home.

Today, FHCN has a comprehensive, patient-centered primary health care delivery model with health centers in Cutler-Orosi, Dinuba, Exeter, Farmersville, Fresno, Goshen, Hanford, Ivanhoe, Pixley, Porterville, Reedley, Selma, Strathmore, Springville, Squaw Valley, Terra Bella, Three Rivers, Traver, Tulare, Visalia, and Woodlake, as well as through an expansive Mobile and Dental Health Center Program reaching rural outlying communities.



Family HealthCare Network provides a comprehensive array of primary care and specialty services for adults and children as well as enabling services to improve access to care such as community outreach, eligibility assistance, translation/interpretation services, and transportation.

A leader in helping train the next generation, FHCN health centers serve as training ground for A.T. Still University's School of Osteopathic Medicine and Physician Assistant Degree Programs, NYU Lutheran Medical Center Dental, and University of California San Francisco (UCSF) Fresno Medical Education Program. This training gives future healthcare providers the opportunity to experience quality community-based health care while helping decrease the nationwide provider shortage.



Visalia, California

FAMILY MEDICINE HEALTH CENTER

fmridaho.org



FAMILY MEDICINE RESIDENCY OF IDAHO

The core mission of Family Medicine Health Center (FMHC), founded in 1975, is to provide high-quality, patient-centered, affordable health care services to satisfy the primary care needs of community members and assure access to care for all.

The health center is operated by the Family Medicine Residency of Idaho (FMRI), whose mission is to train outstanding physicians to work in underserved and rural areas. FMRI is one of the original 11 teaching health centers in the U.S., part of the Teaching Health Center Graduate Medical Education initiative (THCGME) which combines primary care-focused, community-based graduate medical education with health care to underserved populations, improving the distribution of the primary care workforce in economically disadvantaged rural and urban areas and expanding access to care. The program graduates 22 Family Medicine physicians and five Fellows each year. FMRI's graduates and Fellows go on to practice medicine in rural and urban communities throughout Idaho and other states.

Family Medicine Health Center offers care at sites located in Nampa, Boise, Meridian and Kuna, providing comprehensive medical, behavioral health and outreach services for families, infants, children, adolescents, teenagers, adults and seniors. Special services include geriatrics, integrative medicine, sports medicine, HIV services/wellness center, PrEP clinic, transgender clinic and more. On-site pharmacies are located at the center's Emerald Clinic office in West Boise, as well as in Meridian. Through a collaborative venture with the West Ada School District, FMHC also delivers high-quality, school-based health services to children and adolescents. Nurse-staffed phone support is available 24 hours a day, 7 days a week to extend the center's team based, patient-focused model of care and ensure continuity.

Describing its services and approach to care, FMHC notes, "We serve our community by focusing on providing comprehensive health care to individuals and families. Human beings are the population we serve. Gender, race, ethnicity, nationality, religion or sexual orientation do not interfere, in any way, with the care we aim to provide. We support diversity, compassion and our mission is to serve all. We constantly strive to make healthcare accessible and equitable to the underserved and vulnerable populations in our community."



Family Medicine Health Center serves patients from all across the world who speak more than 55 languages, and has qualified interpreters readily available to help assist individuals in communicating with their primary care physician about their health.



Boise, Idaho



Fenway Health's commitment to ensuring the provision of high-quality care, especially to marginalized communities, has continued unabated, championing its mission of enhancing the wellbeing of the lesbian, gay, bisexual and transgender community, and all people in their neighborhoods and beyond, through access to the highest quality health care, education, research and advocacy.

Fenway Community Health Center was founded in 1971 by politically active local residents and politicians who were motivated by the belief that health care is a right, not a privilege. They opened a one-day-a-week drop-in center in the basement of a Christian Science Church building, staffed by volunteer medical students. The center was dedicated to serving the diverse Fenway neighborhood - a community that was home to, and still includes, many seniors, LGBT people, low-income residents, and students.

In 1973, Fenway Community Health Center moved to a larger location. It also incorporated as a freestanding health center and elected a volunteer governing board. The health center hired its first paid medical director in 1976, and applied to become fully licensed by the Massachusetts Department of Public Health in 1978.

In 1981, Fenway made the first diagnosis of AIDS in New England, and throughout the 1980s, was a pioneer health in the fight against HIV/AIDS. A series of AIDS Forums to address the medical and psychosocial implications of AIDS later evolved to become the independent AIDS Action Committee of Massachusetts. By 1988, Fenway Community Health Center became the first medical facility to offer experimental aerosol pentamidine HIV treatment, hired its first full-time nurse, and updated its mission statement to reflect its commitment to the gay and lesbian community. New programs followed, including the Substance Abuse Counseling Program, Gay and Lesbian Helpline, Lesbian Health Task Force and Violence Recovery Program (VRP). It became one of the first medical facilities in the state to offer acupuncture as a pain management treatment for people with HIV. In 1991, with a successful \$4 million building campaign, the health center moved into a new state-of-the-art facility.

New programs, services and facilities expanded the center's reach. The Fenway Institute, launched in 2001, is a national interdisciplinary center dedicated to ensuring culturally competent health care for the LGBT community. The health center shortened its name to Fenway Health in 2009. That same year, it opened its doors at a new 10 story, 100,000 square-foot home, the largest building ever constructed by an organization with a LGBT-specific mission.



Boston, Massachusetts

GEORGIA PRIMARY CARE ASSOCIATION

georgiapca.org



Founded in 1977, the Georgia Primary Care Association (GPCA) is a member service organization representing its state's community health centers (CHCs). At its founding, the GPCA represented just six community health center members and 10 clinic sites. Today, GPCA represents the state's 35 CHCs, which together operate 229 clinic sites covering 129 counties throughout the state of Georgia.

GPCA works with its members to share information, assist them in reaching legislators, develop networks, and develop new health centers for underserved Georgians. Training and technical assistance is provided to help members expand and strengthen the community health center network. Additionally, GPCA identifies the need for and develops and implements programs and services to enhance the health care safety net and health center delivery system.

One such initiative is the Patient-Centered Medical Home (PCMH) Learning Community, part of the PCA's Clinical Quality Program, whose objectives are to provide a platform for collaboration and sharing between health centers, technical assistance and in-person training sessions to implement PCMH and quality principles, and most importantly, to promote sustainability of lessons learned long after project completion. A Tele-A-Psychiatry (TAP) program offers member network providers consultation with a psychiatrist for questions on screening, assessment and treatment options related to psychopharmacology, SBIRT (Screening, Brief Intervention, Referral for Treatment) and MAT (Medication Assisted Treatment), utilizing teleconferencing and screensharing.

The Georgia Primary Care Association created and maintains a health center controlled network (HCCN); services include PCMH coaching, Health Information Technology, data center services and application hosting, meaningful use/interoperability technical assistance, data analytics and quality improvement coaching.



The GPCA is steadfastly committed to its mission of improving access to comprehensive primary health care services for all medically underserved Georgians and supporting the continued development and expansion of community-based health center practice systems throughout the state.



Georgia



Over the years, Golden Valley Health Centers has been focused on its community, committed to its mission of “improving the health of our patients by providing quality, primary health care services to people in the communities we serve regardless of language, financial, or cultural barriers.”



Merced, California



Golden Valley Health Centers (GVHC) began as a migrant health program, with the goal of caring for underserved, uninsured farmworkers in the surrounding county. Early migrant health funding to the county health department supported some limited services, staffed by contract physicians and health department nurses.

In 1971, when changes were made to the direction of federal Migrant Health Program funding, the program came under the jurisdiction of the county hospital, Merced General. The hospital's Farm Workers' Health Program was expanded, and in 1972 the Merced County Board of Supervisors hired Mike Sullivan as the first project coordinator. The project delivered services part-time, using clinic space available after regular hospital service hours.

The project separated from the county and, in 1973, formed a not-for-profit corporation that could receive federal migrant health funds. The new entity, called Merced Family Health Center, purchased land in Merced and began constructing a small clinic to offer expanded services. The clinic was completed the following summer, and the health center hired its first full-time doctor and dentist. Primary and preventive medical and dental care were offered to migrant farmworkers and all low-income community members.

Rural Health Initiative funding allowed the health center to open a new clinic in Los Banos called Nueva Esperanza (New Hope) in 1976. Over the next two decades, despite what were at times significant challenges, Merced Family Health Centers opened 11 satellites in Merced and neighboring Stanislaus County. Recognizing that its service area had significantly expanded, the center changed its name to Golden Valley Health Centers in 1995.

Following Sullivan's retirement in 2014 after 40 years of service, Tony Weber was appointed CEO. The health center continued to grow and evolve, and now operates 44 clinical locations throughout the Merced, Stanislaus, and San Joaquin counties in California's Central Valley. It provides services in mobile vans, school-based sites, and Prompt Care clinics with after-hours walk-in care.

GVHC is highly regarded for its innovative services, cultural competency programs and high-quality care. GVHC has been a leader in the development of integrated behavioral health and recognized for its strong information technology systems that advance not only efficiency and efficacy, but ultimately, improve patient outcomes.

GREATER PORTLAND HEALTH

greaterportlandhealth.org



Greater Portland Health (GPH), founded in 2009 as Portland Community Health Center, is the only federally qualified health center in the state's most populous and urbanized area. Originally operated by the City of Portland, GPH was the culmination of a comprehensive needs assessment and planning process involving local hospital systems and healthcare non-profits. The health center was established to expand access to health services, improve service integration and coordination, and reduce the reliance on the area's hospital emergency departments. The health center became an independent non-profit organization in 2013.

GPH has expanded to offer care at 10 locations throughout Portland and South Portland, chosen to minimize transportation and access barriers, including five school-based sites and two public housing locations. The health center's integrated family practice model provides preventive services, primary care for all ages, and chronic disease management as well as behavioral health, substance use treatment including medication assisted treatment, dental care and supportive social services. Services are available six days a week as well as after hours. GPH's Children's Oral Health Program provides dental services in collaboration with the city's 13 public schools and the local Riverton Community Center.

A 2020 grant from the John T. Gorman Foundation will allow the health center's comprehensive Healthcare for the Homeless Program to continue to offer primary care, behavioral health care, medication-assisted treatment, and COVID-19-related services to Portland's homeless population via in-person and virtual (telehealth) appointments. A dedicated community health worker works to bridge the gap between health care services and individuals experiencing homelessness by providing outreach at the local soup kitchen, resource center, and on the street. GPH maintains a close relationship with the Frannie Peabody Center, which provides medical case management for people living with HIV/AIDS and assists patients with housing subsidies, transportation, oral health care, and food assistance.

These programs are examples of how Greater Portland Health has operationalized its vision to create and foster a healthy community in which everyone has access to integrated, culturally inclusive, affordable, and high-quality health care services promoting physical and emotional wellness.



Greater Portland Health's diverse and resilient community is reflected in its patients, many of whom are among the most underserved and at-risk, including low-income families, immigrants, refugees and asylum seekers who come from 43 countries the world over, and people experiencing homelessness, who comprise approximately 40 percent of all patients served.



Portland, Maine



GCHC is committed to quality as well as access; it has been recognized for improving clinical quality measures, using health information technology to increase both access and quality, and for earning Patient-Centered Medical Home (PCMH) recognition.



Snow Hill, North Carolina



**Greene County
Health Care Inc.**
Your best source of high quality, integrated,
affordable care in eastern North Carolina

Greene County Health Care, Inc. (GCHC) located in eastern North Carolina started in 1972. The health center started with a nurse practitioner-led site in Walstonburg, the first of its kind in the state. In 1978, the health center opened a site in downtown Snow Hill, and that same year, started the first school-based clinic in the state, to serve students at a local high school.

Since then, the health center has grown into a multi-site delivery system offering comprehensive, patient-centered primary medical and dental care for the entire family, including integrated behavioral health, counseling and therapies, medication assistance and supporting services. GCHC serves migrant and seasonal farmworkers with provider outreach teams in seven counties, participates in the Veterans Choice Program to expand access to care for veterans, serves homeless individuals through an extensive outreach program, and operates a mobile dental van to provide dental care in the region's elementary schools.

The health center is the lead agency for Community Partners HealthNet, a network of community health centers that serves as the application service provider for its member centers, delivering and supporting electronic health applications, managing a data warehouse, and tracking clinical and outcomes data.

Through these programs and under the leadership of a dedicated staff and board, GCHC fulfills its mission "to ensure the availability of quality health care to all residents of Greene, Pitt and Pamlico Counties and the surrounding rural area with an emphasis on providing health services to the underserved."

HAMILTON HEALTH CENTER

hamiltonhealthcenter.com



Hamilton Health Center has been providing quality medical care to residents of the greater Harrisburg area and Capital Region since 1969. Through its one-stop, state-of-the-art medical mall and additional sites, Hamilton provided medical, dental, vision and behavioral health care to more than 30,000 people in 2020 and serves more than 6,500 women and children through the WIC (Women, Infants, and Children) program. Hamilton's patients come from a multicultural, multilingual urban and rural region.

Hamilton's ambitious goals were evident even from its humble beginnings in a trailer in front of the Augsburg Lutheran Church in Harrisburg. Community leaders Mrs. Sarah Jones, Mr. Lorenzo Roland Sr., Mrs. Coleen Ivey, Dr. Claude Nichols, Mr. William Schirmer and Mr. Peter G. Alapas turned their vision to reality with a part-time clinic staffed by Harrisburg Hospital personnel, and received a Department of Health, Education and Welfare grant. The organizers soon recognized the importance of the clinic and began a drive to purchase and renovate the Augsburg Lutheran Church Education Center. By 1973 Hamilton Health Center had a permanent facility from which it operated for 40 years. As community need outgrew the space, the organization developed a two-phase capital campaign to meet the growing demand for care. Hamilton opened its new site in 2012, and shortly thereafter completed Phase 2 of its expansion, completing the medical mall concept in 2015.

At its main site, Hamilton offers on-site pharmacy (The Medicine Shoppe), imaging/X-ray and mammograms via UPMC/Pinnacle and on-site laboratory. The HOPE program includes an active HIV testing, treatment, and counseling program. In addition, Hamilton offers a Teen Health Resource Center dedicated to teen sexual health; the Centers of Excellence program addressing the opioid crisis; United Way ACCESS TO HEALTHCARE (Contact to Care) community care coordination program; Reach Out and Read early readers program; and the Greater Harrisburg Healthy Start and Baby Love programs which assist families in need.

Hamilton created a community health team addressing the COVID-19 pandemic and its newest endeavor is a workforce development program in partnership with Harrisburg University and the National Institute for Medical Assistant Advancement. Hamilton has additional locations at Foose and Downey elementary schools as well as in Harrisburg (Union Deposit Family Practice), Millersburg Northern Dauphin County (Hamilton Family Care at Millersburg) and in Newport, Perry County (Hamilton Health Center of Perry County).



Today Hamilton Health Center is a well-respected community leader and well-regarded and emulated health center, looking ahead to its next 50 years of serving the community.



Harrisburg, Pennsylvania



The Hawai'i Primary Care Association believes that a strong primary care infrastructure, particularly for underserved and vulnerable populations, is essential for its island communities and nurtures its health center partners and communities toward the goal of achieving health equity.



Hawai'i



For more than 30 years, the Hawai'i Primary Care Association (HPCA) has worked on behalf of vulnerable populations across the Hawaiian Islands, providing support for its 15 community health center members.

HPCA provides comprehensive training and technical assistance that is responsive to the operational needs of Hawai'i's network of community health centers. Its training programs focus on improvements in system quality and health outcomes, expansion and meaningful use of health information technology, and the development of strategic partnerships between health centers and other organizations to address statewide public health challenges. Learning networks foster collaboration across and among the centers. HPCA supports health centers on Oahu involved in medical legal partnerships and in addition, HPCA's Training and Technical Assistance division manages large-scale grant programs to leverage its collective strength in both health systems and collaboration.

HPCA is strategic in advancing the holistic health needs of the communities it serves. To address the critical gaps in care and their grave impacts on community health, the HPCA regularly convenes and facilitates technical assistance among professionals across the state. It served as the key facilitator of an \$11 million effort through the State and Local Public Health Actions to Prevent Obesity, Diabetes, and Heart Disease and Stroke grant program, also known as DPP 1422.

Funded through a portion of the Affordable Care Act, this initiative of the Centers for Disease Control was aimed at supporting a dual approach (population-wide and priority populations) to reduce disparities and prevent the onset of specific chronic diseases. HPCA forged partnerships with the Hawai'i Public Health Institute (HI-PHI), the Department of Health and the University of Hawai'i to develop a comprehensive approach that linked public health strategies and health systems interventions to identify and prevent diabetes and hypertension in Hawai'i's neediest communities.

With HPCA's guidance, nine health centers across the state were actively engaged in this initiative, which addressed an urgent public health need and supported other ongoing health systems improvements including patient-centered medical homes, population management and electronic health record (EHR) meaningful use. Current programs focus on oral health, outreach and disaster preparedness.



Initially known as Collier Health Services, Healthcare Network was founded in 1977 by community leaders who sought to address the health challenges faced by migrant and seasonal farmworkers, the rural poor, and other residents of Collier County.

The health center began in two trailers, which it rapidly outgrew as the need for services increased. In 1993, the health center relocated to a new facility, the Marion E. Fether Medical Center, to provide the growing Immokalee community with expanded services including family medicine, pediatrics, women's health, dental care, and care for people with chronic and infectious diseases. Eventually, behavioral health, laboratory, radiology, pharmacy, health education, transportation, social services support, and translation assistance were added. Because it serves a diverse population, the center's staff speak a range of languages, which in addition to English and Spanish include French and Creole.

The Ronald McDonald Care Mobile Program® was launched in 2004 to provide medical and dental care to underserved children in Collier County. Today, the Care Mobile travels to elementary schools with a high percentage of students from low-income families as well as to select after-school programs and a variety of family-oriented festivals. Healthcare Network also acquired the Health and Smiles Mobile, a state-of-the-art dental office on wheels with two operatories, to help eliminate transportation barriers to care and address critical oral health needs.

As services expanded to meet the needs of communities in the East Naples, Golden Gate, North Naples, Marco Island and Immokalee areas, the center changed its name to Healthcare Network of Southwest Florida (in 2012), and later to Healthcare Network.

In 2020, Healthcare Network opened its newest facility, the Nichols Community Health Center, in Golden Gate, one of Collier County's most underserved regions. A three-story, 50,000 square-foot state-of-the-art building, the site offers a full range of primary care services including pediatric, adult and senior care, obstetrics and gynecology, pediatric dental, integrated behavioral health and drive-thru pharmacy and a new "convenient care" service line with extended hours coming soon. Opened at the height of a global pandemic, the Nichols Center provides an essential access point for the underserved, low-income residents of Golden Gate and neighboring Naples.

The health center's vision is to "strive for a community where every person has access to appropriate healthcare." For more than 40 years, Healthcare Network has worked to make that vision a reality.



Immokalee, Florida



Horizon's promise of "Keeping Communities Well" reinforces its commitment to providing the best health care in rural and frontier communities and to being an integral part of the fabric of life in these towns.

Horizon Health Care, Inc. began when concerned citizens from the South Dakota communities of Howard and Bryant, and Wessington Springs, Plankinton and Woonsocket established community health centers to ensure that accessible health care would remain in their communities.

Each organization received a grant from the Bureau of Primary Health Care (BPHC) to assist its communities in recruiting healthcare professionals and opening a primary care clinic. The Miner-Hamlin Health Care Project, in Howard and Bryant, received a three-year grant and established the Howard Clinic in February 1978 and the Bryant Clinic in March 1978. Meanwhile, non-profit Tri-County Health Care, with the assistance of the National Health Services Corps and Rural Health Initiative, opened the Jerauld County Clinic in Wessington Springs, the Aurora County Clinic in Plankinton and Whiting Memorial Clinic in Woonsocket shortly thereafter.

In 1998, East River Health, formerly the Miner-Hamlin Health Care Project, and Tri-County Health Care merged and formed Horizon Health Care, Inc. to better serve their respective patients and communities.

Today, Horizon Health Care is South Dakota's largest community health center with 32 community health sites in 22 communities. Over the past four decades, the organization has gone through multiple mergers, acquisitions, and New Access Points. It has also expanded its scope of practice to include dental services, telemedicine, behavioral health services, and embraced medical technology to enhance electronic health record (EHR) capabilities. Throughout all of these changes, Horizon has remained dedicated to its mission of providing quality, affordable healthcare to those in need. Horizon provides 110,000 visits annually, to nearly 28,000 patients.



Howard, South Dakota

HUDSON HEADWATERS HEALTH NETWORK

hahn.org



Hudson Headwaters Health Network, a not-for-profit 501(c)(3) organization, has served the Adirondack and North Country regions of Upstate New York as a federally qualified community health center (FQHC) since 1981. In 2020, Hudson Headwaters provided services to 96,046 unduplicated patients through 318,667 in-person and 34,462 virtual visits at 21 health center locations. Of these patients, approximately half are covered under Medicaid and Medicare programs while an additional four percent are uninsured.

The group that was to become the Hudson Headwaters Health Network started in 1974, with a single health center in Chestertown, NY. At that time, residents of neighboring towns had little or no local access to basic health services. Over the next few years, new health centers opened in Warrensburg, North Creek and Indian Lake. In each instance, the local health center was made possible by community support. Hudson Headwaters provided the care; the community provided the facility. Local guilds, composed of area residents, held bake sales, stuffed envelopes, and helped paint and decorate their community health centers. In 1981, these four health facilities officially became Hudson Headwaters Health Network, and a designated federally qualified health center.

Hudson Headwaters' current service area is large (approximately 7,200 square miles) and mostly rural, with limited east-west transportation routes. It serves all of Warren County and parts of Clinton, Essex, Franklin, Hamilton, Saratoga and Washington counties. Its service area includes the southern and eastern regions of the Adirondack Park, the City of Glens Falls and its surrounding suburbs, and the northern corridor communities centered on the towns of Champlain and Plattsburgh near the Canadian border. In many towns, Hudson Headwaters is still the sole medical provider.

Hudson Headwaters is unique in terms of the community it serves. Health disparities in this region are more a matter of economic means, education and age than race and ethnicity. Mean household incomes fall significantly below those in the rest of New York State, with nearly 36 percent of the patient population living at or below 200 percent of federal poverty guidelines. Nationally, it is second only to southwest Florida in terms of the overall percentage of residents 65 and older.

Hudson Headwaters publishes *Hudson Headwaters Health* magazine twice a year with the latest on new health centers, programs and services



Hudson Headwaters provides comprehensive primary care services to everyone in its service region regardless of income, insurance or ability to pay.



Queensbury, New York



Hunter Health is committed to continuing and sharing the legacy of a healthy community based on cultural values delivered through traditional, innovative and person-centered care.

Hunter Health was founded to address the overwhelming need for culturally competent health care for urban Indians. The clinic opened in a small back room at The Mid-America All-Indian Center in 1976, with volunteer medical services provided by Dr. Vernon Dyer, a Choctaw and Prairie Band Potawatomi OB/GYN physician. The health center expanded to larger quarters in 1978, and was incorporated as the Wichita Urban Indian Health Center. With funding from the Indian Health Service as a Title V Urban Indian Health Program and Buy Indian Contractor, the clinic was able to hire staff to expand medical services and add dental care.

By 1985, the health center had expanded to serve the broader community and became the first federally qualified health center in the state. It was renamed Hunter Health Clinic, in honor of Jay and Vera Hunter, respected Indian elders and schoolteachers who believed in helping people in all walks of life. Funding from the U.S. Public Health Service as a Stewart B. McKinney Health Care for the Homeless Center in 1987 allowed the health center to expand its services to include mental health, inpatient detoxification services, street outreach, nurse rounds at all homeless shelters and homeless case management.

Additional funding and partnerships provided for more growth and innovation. Today, Hunter Health serves patients at three locations in Wichita. The health center provides a comprehensive array of integrated, holistic and patient-centered services which include medical, dental, mental health, substance abuse, assistance for the homeless and HIV/AIDS. A Traditional Health Coordinator works as an advocate for American Indian/Alaska Native patients, helps connect people to a range of resources, and ensures that the services offered by Hunter Health are responsive to the needs of the local community.



Wichita, Kansas

INTERCARE COMMUNITY HEALTH NETWORK

intercare.org



InterCare Community Health Network was founded in 1972 to provide care for migrant and seasonal agricultural farmworkers. The health center was originally named BVC Health as it provided care primarily to Berrien, Van Buren and Cass Counties. The organization broadened its scope to provide services for rural residents in the mid-1970s and to acknowledge the larger scope, changed its name to MARCHA (Migrant and Rural Community Health Association). InterCare's scope of services changed again to include urban areas within additional counties. As the pace of expansion continued in response to community need, the health center added more sites and services, and changed its name in 1995 to InterCare Community Health Network.

Today, InterCare provides access to comprehensive quality care at seven fixed locations throughout Southwest Michigan including a women's health center as well as a school-based student health center. InterCare also has two mobile units, increasing access to quality care within its service area. InterCare provides primary medical, dental, behavioral health and substance use disorder treatment services as well as many unique programs and services to help meet the needs of their communities. InterCare also operates one of the largest WIC (Women, Infants and Children) programs in the state with over a dozen locations, some of which are co-located within InterCare's health facilities.

The largest provider of health care to agricultural workers in the state, InterCare continues to care for migrant and seasonal agricultural farmworkers and is recognized nationally for its ongoing commitment to agricultural workers. InterCare's highly skilled and trained outreach teams provide screening and assessments as well as health education and appropriate follow-up care. Care delivery is customized based on need. Services are provided directly in camps, at the health center locations and on the mobile medical and dental vans. InterCare also works to ensure that families and individuals are connected with local community resources.

InterCare's philosophy is that everyone has the right to equal access to high-quality health care. InterCare initially struggled against community opposition and prejudice while working to provide care to migrant and seasonal agricultural workers. However, despite the challenges it has faced over the years, InterCare has grown exponentially and is a valued community partner.



InterCare takes pride in the role it plays in reducing health disparities to many diverse populations across a broad geographic area.



Bangor, Michigan



International Community Health Services has experienced unprecedented growth, adding new sites and services as the area developed, offering care to meet the needs of community members who speak more than 50 languages and dialects.



Seattle, Washington

INTERNATIONAL COMMUNITY HEALTH SERVICES

ichs.com



International Community Health Services (ICHS) was founded in Seattle's International District as a storefront clinic serving low-income Chinese and Filipino immigrants. A local community health station was too far to reach by foot, leaving the area's residents no options when they needed a doctor who spoke their language.

In 1973, a group of dedicated advocates brought culturally appropriate medical services closer to the neighborhood. Dr. Eugene Ko, who owned the Jefferson Park Clinic in Beacon Hill, donated space to establish the Asian Community Health Clinic. It would become the site for in-language health care for mainly elderly Chinese and Filipino patients living in the area's single-room occupancy hotels. Volunteer doctors, interpreters and mental health staff operated the Asian Community Health Clinic from the Jefferson Park Clinic one weeknight and one weekend morning.

In 1975, the Asian Community Health Clinic moved to Chinatown, and International District (ID) Community Health Center was born, the first of its kind in the nation to serve a diverse Asian population at one location. In 1996, the ID Clinic added a second location in South Seattle, Holly Park Medical & Dental Clinic, and was renamed International Community Health Services (ICHS) to reflect the increasing diversity of its patients and neighborhood. In 2005, the Holly Park Clinic relocated to a new facility blocks from the old location.

Services are now provided at 11 locations, including four sites offering both medical and dental, a comprehensive primary care clinic in collaboration with Asian Counseling & Referral Service for patients with serious and persistent mental illness, a vision clinic, mobile dental clinic, and school-based health. In 2018, ICHS took over the operation of Legacy House from the Seattle Chinatown/International District Preservation and Development Authority. Legacy House is the only assisted living facility in Seattle with an emphasis on serving a multi-Asian clientele, drawing participants from beyond the neighborhood to its 75 assisted living units, adult day care and congregate meal program. Medical care, health monitoring and medication management are provided on site.

While much has changed in the more than four decades since ICHS opened its doors, its constant mission remains: to provide culturally and linguistically appropriate health services to improve the health of all in need, and to promote health equity for all.



JERICO ROAD COMMUNITY HEALTH CENTER

jrhc.org



Jericho Road Community Health Center (JRCHC) grew out of the Jericho Road Family Practice (JRFP). Founded by Dr. Myron and Joyce Glick in 1997 as a small family practice, JRFP provided safety-net health care for low-income and refugee community members, targeting areas of concentrated poverty in Buffalo. Meanwhile, the Jericho Road Ministries (JRM) was established to provide more integrated care through programs that address non-medical, poverty-related barriers through a wide range of programs, from mentoring pregnant refugee mothers and helping clients navigate social services, to providing interpretation support.

JRM merged with Hope Refugee Service in 2009, and in 2013, after partnering with JRFP, the two organizations merged to form a community health center, known as JRCHC. The health center designation allowed Jericho Road to expand its scope of care and serve the community more comprehensively.

Today, JRCHC offers a full spectrum of health care services including primary and preventive care for adults, children and families, maternity, pharmacy, dental and behavioral health to all who need it, regardless of insurance status or ability to pay. It also offers community programming to help patients address health-related social risks. These programs include: The Hope Refugee Drop-In Center, which offers case management for Buffalo area refugees to help them navigate systems, access services and overcome life challenges in a new country and culture; Priscilla Project, pregnancy mentoring for refugees and/or low-income women, to promote healthy moms and babies; and English as a Second Language (ESL) Initiative language learning program.

In 2015 the health center acquired Vive La Casa, an asylum-focused initiative of the Leadership Conference of Women Religious of the Catholic Diocese of Buffalo, NY, to expand its scope of services, and through the Vive shelter offers safe refuge to asylum seekers by providing safety, shelter, food and legal help. To train, equip and invest in the next generation of family physicians, the health center offers a family medicine residency track within the University at Buffalo's Family Medicine Residency program. JRCHC also operates a Global Health Program, with programs in Sierra Leone, Congo and Nepal.



Defining its core values as promoting Dignity, Sustainability, Participation, Integrity, Sensitivity, Holism and Justice, Jericho Road Community Health Center is committed to providing a culturally sensitive medical home, especially for refugee and low-income community members, facilitating wellness and promoting self-sufficiency by addressing health, education and economic barriers.



Buffalo, New York



Through its dynamic programming and commitment to those it serves, La Maestra continues “to provide quality health care and education to improve the overall well-being of the family, bringing the underserved, ethnically diverse communities into the mainstream of our society, through a caring, effective, culturally and linguistically competent manner, respecting the dignity of all patients.”



San Diego, California

La Maestra Family Clinic, Inc. is a non-profit 501(c)(3) federally qualified health center (FQHC). It operates locations in City Heights, National City, El Cajon and Lemon Grove in the central, south, and east regions of San Diego County, which are among the area’s most underserved and ethnically diverse.

The organization originally opened as La Maestra Amnesty Center in 1986 and became a pillar of the community by providing English as a Second Language (ESL), Vocational English as a Second Language (VESL), and Civics classes to refugees and immigrants. By 1990, La Maestra Amnesty Center’s more than 12,000 students voiced the need for culturally appropriate health services in an environment where families could feel safe, not worry about being denied services based on lack of insurance, and where providers spoke their languages and understood their cultural beliefs.

In response, President and Chief Executive Officer Dr. Zara Marselian founded the original clinic and leased a Fairmount Avenue residential unit, which was then converted into a licensed medical clinic. The Medically Trained Cultural Liaison model was formed and became a core component of all services developed within the La Maestra Circle of Care® which is a holistic solution-based approach to delivering upstream, social determinants of health-focused services. The model strives to improve overall wellness and self-sufficiency of all patients and ultimately of the community. Services offered include primary and specialty health care encompassing mental health and substance use disorder services, translation, interpretation, transportation, eligibility and enrollment assistance, immigration services, legal advocacy, transitional housing, services for victims of human trafficking and domestic violence, financial literacy, job training and placement, microenterprise and microcredit programs, a community garden, and a food pantry.

Since opening in 1990 with one volunteer physician, La Maestra has grown into a Level 3 accredited Patient-Centered Medical Home (PCMH) with 24 locations, offering primary care, behavioral health, substance use disorder services, dental suites, school-based health centers, pharmacies, and a mobile medical and dental unit. In 2020, amid the pandemic, La Maestra remained open and served 37,982 patients and provided 187,292 visits.

LAMPREY HEALTH CARE

Where Excellence and Caring go Hand in Hand

Lamprey Health Care (LHC) is the oldest and one of the largest non-profit community health centers in New Hampshire. Founded in 1971, LHC was launched as an information and referral service to improve access to health-related services in Newmarket. The founders recognized a lack of medical providers in the area and, a year later, started a transportation program for seniors. In 1973, they opened the town's first primary care center in donated space.

In 1981 the organization opened a location in Raymond. Over the decades, the Newmarket and Raymond centers grew to meet community needs, and a center was added in downtown Nashua in 2000. As it expanded geographically, LHC added new programs and services, including prenatal care in the 1980s and school-based dental care in the 1990s. More recently, LHC added integrated behavioral health, substance use disorder services, and a fellowship program to train highly qualified community health-oriented nurse practitioners.

Collaborations and partnerships to enhance care delivery and ensure access have been central to LHC's growth. LHC established the Southern NH Area Health Education Center to develop, promote, and coordinate multidisciplinary community and academic partnerships for health professions education, emphasizing minority and disadvantaged populations' needs. LHC is the host organization for the Seacoast Public Health Network, an entity dedicated to strengthening public health partnerships in emergency preparedness, community health, substance misuse prevention, coordinating regional planning, and developing effective systems and networks. With regional partners, LHC launched integrated primary care clinics within two community mental health centers and a shelter for the homeless.

Today, LHC is a full-service patient-centered medical home providing comprehensive primary and preventive medical and behavioral health care while removing barriers that impede access. The health center's service delivery model includes utilizing a family practice approach to care for people across the lifecycle; recruiting staff who meet each community's specific cultural and language needs; and assisting patients with enrollment, coverage, sliding fee applications, and medication assistance programs to minimize financial barriers. LHC's multidisciplinary "wrap-around" programs include social services, health education, diabetes education and counseling, wellness programs, chronic disease and case management, interpretation services, outreach, community clinics, and health screenings. In 2021, LHC will deploy a mobile health unit to further these activities.



As the health center celebrates its 50th anniversary, its comprehensive range of services, continual innovation, and commitment to offering outstanding, accessible primary care for all have distinguished Lamprey Health Care as a pacesetter in service, quality, and teaching and as a respected regional and national community health care leader.



Newmarket, New Hampshire



LifeLong Medical Care has earned widespread recognition for creative approaches to community health challenges, including the needs of the low-income elderly, people with disabilities, and high-risk pregnant women. LifeLong continues to innovate – and remains steadfastly devoted to its mission as an advocate for continuous improvement in the health of the communities it serves.

Lifelong Medical Care was founded in 1976 by a group of Gray Panthers, senior advocates who realized that the area’s growing low-income, aging population did not have access to essential health care services. Together, they developed the Over 60 Health Center, where older adults could receive support and quality health care. This first clinic evolved into the non-profit community health center network known today as Lifelong Medical Care.

Beginning with the addition of the Berkeley Primary Care Access Clinic in 1991 and West Berkeley Family Practice in 1995, Lifelong expanded to meet the needs of the broader community and people of all ages, offering primary and preventive care and behavioral health care services including counseling and recovery support. Today Lifelong operates 14 primary care health center sites, four dental centers, two dental vans, four immediate/urgent care centers, five street medicine teams, four school-based health centers and an Adult Day Health Center serving Marin County.

Lifelong continues to run The Over 60 Health Center, a geriatric-specific program where older patients receive care from a team that includes primary care providers, nurses, social workers, and specialists. Care for older people is also available across the health center’s network, and includes a range of medical, mental health and case management programs.

Another unique program, developed in conjunction with community partners, is the robust permanent supportive housing program to improve the quality of life for homeless adults. The Lifelong Supportive Housing Program (SHP) brings health and social services into subsidized affordable housing so that tenants who have experienced homelessness can achieve housing stability and with it, a higher quality of life. The Supportive Housing Program offers services to nearly 600 tenants at 13 different housing sites within Alameda County, as well as to residents living in individual subsidized units scattered throughout the county.



Berkeley, California

MAINE PRIMARY CARE ASSOCIATION

mepca.org



Maine Primary Care Association (MPCA) is a membership organization that represents the collective voices of Maine's 20 community health centers, which provide high-quality primary and preventive medical, behavioral health and dental services for one in six Maine residents at more than 180 service sites across the state.

Since its founding in 1981, MPCA has provided training and technical assistance, housed relevant programs and services and advocated on behalf of Maine's healthcare safety net and the hundreds of thousands of people it serves each year

In 2017, Maine Primary Care Association launched the first Primary Care Association-led, community health center-focused Patient Safety Organization (PSO) in the country. MPCA and its PSO member health centers are working to strengthen a culture of patient safety - deploying quality improvement (QI), systems improvement, data, and health equity to drive positive outcomes for patients, providers, and communities throughout Maine.

In addition, MPCA also operates a Health Center Controlled Network (HCCN), the Community Health Center Network of Maine (CHCNet), which launched in 2005. Recognized as an important source of health information technology (HIT)-related value, CHCNet has expanded to include 16 participating community health centers.

In 2019, MPCA received an additional three years of support for CHCNet under HRSA Health Center Controlled Network funding. This support will allow CHCNet to realize its overarching goal of advancing readiness for health center participation in value-based care models, which demand well-functioning health information technology and data systems.



MPCA's work is based on statewide needs and geared toward helping health centers improve programmatic, clinical and financial performance and operations and develop strategies to recruit and retain health center staff.



Maine



Manet Community Health Center's values and vision have endured for more than four decades; it is an innovative, compassionate, welcoming health center that is a provider, employer, partner, and charitable organization of choice.



Quincy, Massachusetts



Founded in 1979 by a group of dedicated residents and a city councilor, Manet Community Health Center was established through the dedication of its small staff and their families, who donated labor and time to bring comprehensive, quality care to the community.

Manet opened its first practice site in the Houghs Neck neighborhood of Quincy, a historically working-class community of Irish Americans located on a peninsula that juts out toward the Boston Harbor. Four years later, in 1983, a second practice location was opened within the Quincy Housing Authority's public housing complex at Snug Harbor, another medically underserved community in the Germantown neighborhood. Manet began offering primary care services at a third site in Hull in 1989 and in 1993, opened a site in North Quincy, now its largest site and administrative headquarters. The health center's newest location was opened in Taunton in 2014, bringing the total number of sites serving these southern Massachusetts communities to five.

The health center offers a full array of services and programs for infants, children, adolescents, adults, and seniors, providing family medicine and a true medical home for all members of the community. Services include primary and preventive medical care, prenatal and OB/GYN care, LGBTQ+ medical services, nutrition counseling and education, evidence-based wellness and health-education programs, chronic disease and case management, infectious disease care, access to specialists, diagnostic laboratory, screenings, HIV and STI prevention and risk assessment.

Continuity of care is ensured through Manet's primary clinical affiliation with Boston Medical Center Health System, as well as arrangements with other local hospitals and health systems. The health center provides a full range of behavioral and substance services including tobacco cessation counseling, opioid overdose prevention/Naloxone training and distribution, substance use risk counseling and emergency department diversion, and Medication Assisted Treatment for substance use disorders. To help reduce the risks associated with intravenous drug use, Manet provides a free and confidential needle exchange program. Pharmacy and vision care are available on-site. Health benefits counseling, insurance navigation and enrollment assistance is offered by Certified Navigators, along with food stamp assistance and connections to other important community resources. The SHINE (Serving the Health Information Needs of Elders) program provides health insurance counseling services to elderly and disabled adults.



The story of Mary's Center begins in 1988. Maria Gomez, then employed as a nurse by the District of Columbia's Department of Health and now the President and CEO of Mary's Center, witnessed a large increase in the number of Latin American immigrants migrating to the United States from El Salvador, Honduras and other countries fleeing war, poverty, and trauma. Once in the United States, they had little access to the services they needed, and those who were pregnant often went without prenatal care because they had nowhere to go.

Together, with a group of activists, Gomez founded Mary's Center to help meet the needs of these women. With funding from the DC Mayor's Office on Latino Affairs (OLA) and the DC Department of Health, Mary's Center started delivering bilingual health services, offering prenatal and postpartum care for women and their infants in Washington's Ward 1 community from a small basement clinic. In its first year of operation, the clinic served 200 women.

The health center moved out of the basement and into its current headquarters in Adams Morgan in 1994, and became designated a federally qualified community health center in 2005. Since then, Mary's Center constituency and services have broadened significantly. The health center operates comprehensive practice sites in DC's Adams Morgan, Fort Totten and Petworth neighborhoods, as well as in Silver Spring and Adelphi, Maryland, and manages two DC Department of Aging and Community Living senior wellness centers for people aged 60 and over. The array of available clinical services includes primary and preventive medical care, dental care and behavioral health services and pharmacy.

Mary's Center's social change model defines the health center's programs and has been the foundation of its innovation and success in meeting both, individual and community-level health needs, by addressing the needs of the culturally diverse communities that now call the DC metropolitan area their home.



Mary's Center's social change model is the backbone of its approach to providing services. By embracing a holistic model, Mary's Center integrates medical care with education and social services to address the social determinants of health.



Washington, DC



The Mass League's steady growth and national visibility reflect its funding diversification, strategic planning, disciplined alignment of member needs with available resources, strong dedicated leadership, and laser-sharp mission focus to promote population health equity and advance the health center model.

Massachusetts is home to the Massachusetts League of Community Health Centers (Mass League) and America's first urban health center, opened in 1965 in the Columbia Point housing development in Boston's Dorchester neighborhood. In Boston, access to primary and preventive health care emerged as a key issue as part of President Lyndon Johnson's Great Society initiatives and fostered a grassroots movement of Consumer Health Committees that began planning for a system of Neighborhood Health Centers (NHCs). Participants in a 1971 conference of the Health Committees recommended the formation of a permanent association of NHCs, and the Massachusetts League of Neighborhood Health Centers, one of the first primary care associations (PCAs) in the country, was founded in 1972. It would later be renamed the Massachusetts League of Community Health Centers.

Mass League's work has evolved as health centers expanded across the state. It provides a wide range of technical assistance services including: workforce development; analysis of state and federal health regulation and policy; health information technology (HIT) development; management of and support for clinical quality initiatives; training and education for health center administrators, clinicians, and board members; and support to expand health access through work with state leaders and local health and advocacy organizations seeking to open health centers in their communities. The League serves as a resource for policymakers, opinion leaders and the media and partners with academia, philanthropy, and state agencies to expand comprehensive services. The James W. Hunt, Jr. Training & Learning Center, named in honor of the organization's President Emeritus, opened in 2018 and offers teleconferencing technology for learning, teaching, and training.

Mass League also oversees two special programs. The Massachusetts' Health Center Controlled Network (HCCN), a Health Resources and Services Administration-funded initiative, assists the state's health centers in better leveraging HIT. The Connecticut River Valley Farmworker Health Program (CRVFHP), a voucher program funded under Section 330 (g) of the Public Health Service Act, enables qualified migrant and seasonal agricultural workers and their families to receive health services through participating providers in the Connecticut River Valley. The Mass League is a founder of, and partner in, Capital Link, as well as a founder of Commonwealth Purchasing Group, LLC. and Massachusetts Association of Community Health.



Massachusetts

MINNESOTA ASSOCIATION OF COMMUNITY HEALTH CENTERS

mnachc.org



Founded in 1980 as the Minnesota Rural Primary Care Association, the organization was established to assist with the development of primary health care in rural areas of Minnesota. In 1984, the Association was renamed the Minnesota Primary Care Association (MPCA) in recognition of the health centers serving diverse urban and rural medically underserved areas. Twenty years later, MPCA was again renamed and today operates as Minnesota Association of Community Health Centers (MNACHC).

MNACHC supports the state's 17 community health centers (CHCs) that together provide affordable health care services at more than 85 sites. The association aims to improve access to high-quality primary care, and to promote the cost-effective delivery of affordable, community-based health care services at health centers that serve as the state's healthcare safety net.

MNACHC is the unified voice of health centers with MNSure, the state's health insurance marketplace, and works to promote public and private partnerships at state and federal levels to support health center infrastructure and opportunities for growth.

MNACHC provides training and technical assistance (T/A), through peer learning opportunities, webinars and in-depth conferences that equip its members with the administrative, financial, quality improvement and clinical tools necessary to sustain high-quality operations. The T/A program focuses on a range of mission-critical areas, helping its member centers improve clinical quality measures, achieve health care home recognition, prepare for emergencies, and enhance compliance. MNACHC also works to develop new community health centers and expand existing health center capacity in the state's underserved rural and urban areas.

MNACHC recorded 567 training and T/A engagements and engaged 7,542 health center staff in 2019, had 165 interactions with external partners and held more than 25 peer-learning roundtables. Its impact extends far beyond these quantifiable achievements, and is reflected in the enduring value, access to care and quality that Minnesota's health centers have attained for residents across the state.

The Association represents health center interests in state and national discussions on all aspects of health care reform, including payment reform, risk adjustment, and the social determinants of health, while working to inform and cultivate state policy that is responsive to the needs of Minnesota's medically underserved populations, and the health centers that serve them.



Minnesota



Forty years since its founding, Morris Heights Health Center - known as “The Caring Place” - remains true to its mission of being “the vanguard for quality, affordable and accessible health care for all.”

Morris Heights Health Center (MHHHC) in the Bronx, NY, was founded by the Morris Heights Neighborhood Improvement Association in 1981 to address the crisis of medical abandonment and the need for high-quality care in the surrounding West Bronx neighborhood. MHHHC now operates 10 health center sites throughout the Bronx, as well as 20 public school-based health centers that offer comprehensive services to students from pre-kindergarten to the 12th grade.

The center has a record of historic “firsts”: In 1983, MHHHC was the first federally funded community health center in New York City to be accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO, now The Joint Commission). It was also the first community health center in the country to offer a community-based, midwifery-run, childbearing center in a low-income community. This service was the predecessor to the Women’s Health Pavilion, one of MHHHC’s most robust programs, serving women throughout the Bronx. An early pioneer of on-site HIV/AIDS services, MHHHC was chosen to be one of the three national pilot projects to demonstrate an integrated centralized model of HIV/AIDS services, now replicated nationwide.



Today, MHHHC provides comprehensive health care programs for children, adults, elders and their family members offering a wide range of primary, specialty, dental, mental health, educational, supportive and social services.

MHHHC Foundation, the philanthropic arm of Morris Heights Health Center, established a needs-based scholarship program to provide financial support to low-income, college bound students from the Bronx, empowering the area’s youth to seek diverse, postsecondary academic opportunities. Through 2020, the MHHHC Foundation awarded 133 scholarships totaling more than \$530,000.



Bronx, New York

NASSON HEALTH CARE

nassonhealthcare.org



The southernmost county in Maine is home to Nasson Health Care. Located in Springvale, the health center is a division of York County Community Action Corporation (YCCAC), which was incorporated by area residents in 1965, on the heels of the Economic Opportunity Act of 1964, to provide services to vulnerable, low-income York County individuals and families.

YCCAC first opened York County Community Health Care in 2005 to provide affordable health care, initially offering a Healthcare for the Homeless program and Public Housing health services, both supported with Public Health Service Act Section 330 funds. Four years later, the Sanford region was designated as a Medically Underserved Population (MUP) by the Health Resources and Services Administration. Subsequently, with the support of local partners including the area's hospitals, social service providers and community organizations, YCCAC was awarded federal funds in 2013 to establish a New Access Point (NAP).

York County's first and only full-fledged community health center opened in the science building on the campus of the former Nasson College. The operations of York County Community Health Care were merged with the NAP under the name Nasson Health Care.

Today, Nasson Health Care provides comprehensive primary medical, dental and behavioral health care to residents of York County and neighboring communities. Services include preventive care for people of all ages, as well as treatment for acute and chronic conditions. In addition, Nasson offers health education, care management, referrals to specialists and other programs. Other services available through the YCCAC include Community Outreach, Energy Assistance (including LIHEAP and Weatherization), Head Start and Early Head Start, Housing Services, Transportation and WIC (Women, Infants and Children program).



Nasson Health Care is a recognized patient-centered medical home, committed to ensuring that all patients receive well-coordinated care that addresses the complete health and wellness picture.



Springvale, Maine



With a service area that spans nearly 2,800 square miles, NCDV is a comprehensive primary care provider in the border community that opens its doors to the medically needy, uninsured population and in so doing, helps to mitigate the disparities that threaten the area's residents, and advance better health for all.

Nuestra Clinica del Valle, Inc. (NCDV), formerly known as Hidalgo County Health Care Corporation, was incorporated in 1971 as the Migrant Program of the local health department. Initially, the program served South Texas migrant and seasonal farmworkers. In 1978 the program was expanded to serve the broader community of low-income and uninsured families of Hidalgo and Starr Counties in the Lower Rio Grande Valle, directly on the US/México border.

The health center has evolved beyond its original single-site, migrant-focused clinic to offer comprehensive care at 11 locations - nine in Hidalgo County and two in Starr County - including two school-based clinics. The health center's growth reflects the growing number of people without access to affordable health care. One in three of the area's residents has an income below the poverty level, and most of the community is Spanish-speaking and at high risk of health problems, particularly diabetes and hypertension. Both counties are defined as Medically Underserved Areas and Mental Health Professional Shortage Area (HPSAs). Starr County is also designated as a HPSA in primary care and dental health.

NCDV brings a unique public health perspective to the provision of primary care services. Recognizing the needs of its high-need community, prevention activities and community outreach have long been integral components of NCDV services. Health services include family medicine, internal medicine, and pediatric care, as well as a full range of women's health care including gynecology, obstetrics and prenatal care to ensure that moms have healthy pregnancies and babies get a healthy start. Pharmacy, laboratory services, radiological services, social services, case management, nutrition/health education, and integrated eligibility assistance are also provided. Dental care is available at two clinic locations. NCDV's behavioral health department follows the Integrated Behavioral Health model and offers both preventive and comprehensive care. Brief behavioral health sessions can be held during the primary care provider visit; traditional mental health services are also offered upon referral by the NCDV primary care provider. All sites are linked through a centralized administration and data system. The center is accredited by The Joint Commission.



San Juan, Texas

ONEWORLD COMMUNITY HEALTH CENTERS, INC.

oneworldomaha.org



OneWorld Community Health Centers, Inc. was established in 1970 as a volunteer-staffed free clinic to care for South Omaha residents facing financial, cultural and linguistic barriers. Prompted by the closure of meatpacking plants and abandonment of once-thriving stockyards, leaders of hard-hit Hispanic and Native American communities united with medical students from Creighton University, members of Gethsemane Lutheran Church, Creighton University School of Dentistry and Lutheran Metropolitan Ministries. Together they established the Indian-Chicano Health Center, a walk-in evening clinic located in space donated by the church and staffed by students from Creighton University's dental, nursing, medical and pharmaceutical schools, the Clarkson College of Nursing and the University of Nebraska Medical Center.

The clinic incorporated as a non-profit in 1973, and in 1974, received funding from the United Way. In 1979, Lutheran Metropolitan Ministries purchased and renovated a building and offered administrative support to the operation, allowing for its growth. In the next decade, the health center continued to operate as a grassroots, largely volunteer-staffed clinic, adding community outreach, translation and transportation services, and the board of directors decided to establish a freestanding organization, hiring the health center's first full-time executive director in 1995. The clinic was subsequently designated a federally qualified health center (2001), and accredited by The Joint Commission (2002), setting the course for further growth. The following year, the health center was renamed OneWorld Community Health Centers, Inc., to better reflect its changing patient base and community. OneWorld moved into Omaha's historic Livestock Exchange Building in 2005, a highly visible landmark truly befitting its history.

Today, OneWorld is the largest health center in the state, the largest provider of primary health care in South Omaha, and the only primary care clinic in the area where the majority of staff are bilingual and bicultural. OneWorld has 13 clinical locations providing a full range of medical, behavioral health, dental, and pharmacy services, including school-based and walk-in services.

OneWorld's expansion was fueled by sustained and dedicated leadership, public and private investments, and thoughtful partnerships. A collaboration with local food pantries offers healthy options for patients at OneWorld's Women's Health Center. A partnership with the Learning Community of Douglas and Sarpy Counties provides education opportunities for immigrant families, OneWorld also partners with the Immigrant Legal Center to provide access to legal services.



OneWorld was named one of the Best Places to Work in Omaha (2018), reflecting its continuing concern for staff and patients alike.



Omaha, Nebraska



OPEN DOOR COMMUNITY HEALTH CENTERS

opendoorhealth.com



Open Door Community Health Centers was founded in 1971, with a vision of providing high-quality health care and health education to a rural, underserved part of California, at a time when the region suffered from a shortage of access to health care services. Open Door was born from the efforts of local community leaders and volunteers in Arcata. The first clinic – the Humboldt Open Door Clinic – operated on the site of a former bank, until it could afford to move to a larger location.

From its humble beginnings in 1971, as a volunteer-run clinic in Arcata, Open Door now has over 600 employees and operates a network of 12 community health centers and clinics across an area larger than the state of Connecticut, serving more than 59,000 “friends, family, and neighbors.”

Herrmann Spetzler became Open Door’s chief executive officer in 1977, building on the clinic’s early volunteer-driven programs, activism, and optimism, and leading the organization through turmoil, adaptation, and growth, until his unexpected death in 2018. Throughout his lifetime of leadership, Herrmann Spetzler championed the cause of community and rural healthcare at the state and federal levels.

Along with his wife and Open Door’s Chief Operations Officer, Cheyenne Spetzler, Herrmann initiated and cultivated innovative programs and initiatives at Open Door and beyond, in service of lowering barriers and increasing patient access to health care services. Programs such as Open Door’s Nurse Practitioner and Family Medicine Residency programs, mobile health services, patient navigation services, and a telehealth-focused health center – of particular benefit to rural communities, where specialty care can be limited – are a testament to their vision.

One initiative that embodies Open Door’s vision of integrating health services is Open Door’s Health and Wellness Gardens. Staff and volunteers maintain the community gardens at health centers throughout Humboldt and Del Norte counties, which are both sites of learning and provide seasonal produce for patients, for distribution at the health centers. Programs like this, along with initiatives such as the food pantries at all Open Door health centers, where patients and community members can get nutritious food items, contribute to county and community efforts to combat food insecurity.

Fifty years on Open Door has grown and changed, but its mission remains the same – to provide “quality medical, dental, and behavioral health services, and education to all, regardless of financial, geographic, or social barriers.”



Arcata, California

OPEN DOOR FAMILY MEDICAL CENTER

opendoormedical.org



Open Door Family Medical Center has served the most vulnerable residents of Westchester, Putnam and Ulster counties since 1972. From its start providing free services in a church basement, to operating a network of family medical centers, school-based health centers and a mobile dental van, Open Door has remained committed to providing accessible, equitable health care and wellness services to those who are hardest to reach.

Open Door now offers care in the communities of Ossining, Port Chester, Sleepy Hollow, Mount Kisco, Brewster, Mamaroneck and Saugerties. The health center provides integrated medical care, dental care, behavioral health care, and chronic disease management for children and adults, under one roof. Special programs are tailored and enriched to best meet the needs of the community, and include patient advocacy/care coordination, prenatal care, and wellness and nutrition. Additional specialties are women's health, sexual health, HIV services, vision care and podiatry.

A deep mission focus has helped the health center garner both local and national recognition for enhancing access, reducing disparities and providing high-quality care. Open Door Family Health is accredited by The Joint Commission and has achieved the highest level of recognition as a Patient-Centered Medical Home by the National Committee for Quality Assurance (NCQA).

Open Door believes that when you help one person, you can lift up an entire community. The health center calls this the Open Door Effect, which is broadly focused on improving local communities through innovative prevention programs, expanded wellness services and patient advocacy. The Open Door Effect depends on health care that is accessible, affordable, patient-centered and far-reaching, as well efficient, respectful and empowering. It is the cornerstone on which the health center achieves its goal of building healthier communities and finding health care solutions for all, one patient at a time.



From prevention and wellness programs to the treatment of chronic conditions, Open Door's primary mission is to keep the people of the lower Hudson Valley healthy and strong, regardless of their ability to pay.



Ossining, New York



The concept of “community” remains at the heart of the Peoples Community Health Clinic organization and is actualized in practice every day.

Peoples Community Health Clinic, which started in a church basement in 1976, is guided by its mission to provide access to affordable, compassionate, high-quality health care for all, while helping to improve the health of the community as a whole. Both uninsured and insured patients are welcome.

In 1999, the clinic relocated to a 40,000 square-foot facility in the heart of downtown Waterloo. A second site, People’s Clinic Butler County in Clarksville, opened in 2008. Both locations are recognized as patient-centered medical homes and focus on strengthening relationships between patients and their healthcare teams. In partnership with Waterloo Community Schools through Success Street, the health center began providing school-based health services at East High School and West High School in 2020.

The health center offers comprehensive health care to adults and children including primary care, 24-hour physician on call services for emergencies, dental care, urgent care, counseling for substance use disorders and other needs, medication assisted treatment (MAT), and on-site laboratory, pharmacy and X-ray.

Special programs include a Homeless Outreach Program, care for children with special needs, and chronic care management. On-site interpreters are available to those whose primary languages are Bosnian, Spanish, Burmese and French. In conjunction with the University of Northern Iowa Center for Energy and Environmental Education and AmeriCorps, the health center launched the Peoples Community Garden in 2019. Aimed at reducing food insecurity and providing fresh, wholesome produce, the garden is open to patients and community members, who may select vegetables completely free of charge. In its first season of operation, 744 households received free produce from the garden.



Waterloo, Iowa

QUALITY OF LIFE HEALTH SERVICES, INC.

qolhs.org



Quality of Life Health Services, Inc. was founded by nurse educator Dr. Roberta O. Watts, who became familiar with the health center model of care during her fellowship training. Determined to bring this model to Alabama, in 1977 she founded Etowah Quality of Life Council, Inc., to meet the health care needs of Gadsden's underserved.

In 1978, with the dedicated work of community leaders who constituted the board of directors, the Council secured funds for the Gadsden Neighborhood Health Center. By early 1981, unexpected growth led to approval for a second health center site, the J.W. Stewart Medical Center, named after a founding board member of Etowah Quality of Life Council and the health center's first medical director. That same year, Gadsden Neighborhood Health was renamed the Roberta O. Watts Neighborhood Health Clinic in tribute to its founder.

In 1982, Mr. Wayne C. Rowe was named chief executive officer of the organization, and since that time, has led it through decades of expansion and transformation. A merger with Sardis City Medical Center (1985) led to the opening of the first rural location. Within a decade, Quality of Life was operating three health center sites in Etowah and surrounding counties. By the end of 1994, six health center sites were in operation, including a location serving residents of public housing, and plans were underway for new sites. The organization was renamed Quality of Life Health Services, Inc. (QOLHS) in 1995, a reflection of its commitment to complete health care for the residents of Gadsden, Etowah, and the surrounding counties.

A full range of services are offered to meet the needs of the whole family, including primary care for children and adults, behavioral health care, medication assisted treatment, dental health, podiatry, telehealth, and pharmacy. School-based services – available to students as well as their families – and the mobile Quality Health Express medical vans extend access into the broader community. These services, rendered over decades and across locations by dedicated professionals, reflect the health center's commitment to provide quality health care that will foster the development and dignity of the individual, family, and community regardless of ability to pay.



Today, Quality of Life Health Services is a major health network in Northeast Alabama, providing comprehensive care in 24 rural and urban locations. Recognizing in its mission that health care is the right of every individual, the health center strives to break down the barriers of affordability, availability, and accessibility.



Gadsden, Alabama



Founder Dr. Melvin Broadnax worked tirelessly with the North Carolina Office of Rural Health, local politicians, and community leaders to make his dream of medical care in Jackson a reality. In the years since then, RHG has grown to more than 15 locations in 6 counties serving 35,000 to 40,000 patients each year.

Rural Health Group (RHG) was founded in 1974 by civic leader Dr. Melvin Broadnax and other community leaders and concerned citizens, who were determined to bring low-cost health care services to the people living in northeastern North Carolina's Northampton County.

A community-founded, community-focused, and community governed organization, RHG is committed to offering high-quality health care to all. As the area's safety-net provider, all services are offered on a sliding fee scale based on household size and income. RHG's medical, dental, pharmacy, and school-based health center sites offer a full range of primary and preventive medical and dental care, women's health care and family planning, pediatric care, well-child check-ups, and integrated behavioral health, creating a true patient-centered medical home.

Outreach services include the Breast & Cervical Cancer Control Program, which offers free or low-cost breast cancer screenings, mammograms, and cervical screenings to qualifying uninsured/underinsured women; primary care and case management services for uninsured/underinsured persons living with HIV/AIDS; Migrant Seasonal Farmworker outreach; and more. RHG participates in the Coastal Plains Network Medicare Accountable Care Organization.

Dr. Broadnax, who demonstrated compassion for others and passion for equal access to superior, culturally sensitive quality health care for all, was chairman of the health center's board of directors for almost 40 years. In 2009, RHG dedicated a new state-of-the-art site in Jackson, the Melvin F. Broadnax Health Center, in his honor. The late Dr. Broadnax's vision, values and dedication formed the health center's foundation and continue to drive Rural Health Group today.



Roanoke Rapids, North Carolina

SALUD FAMILY HEALTH CENTERS

saludclinic.org



Salud's rich history was born of the urgent need to serve agricultural workers. In 1969, the Colorado Department of Health closed a large migrant labor camp in the Fort Lupton valley due to severe environmental risks. The resulting housing displacement compounded the urgent health care needs of the farmworkers.

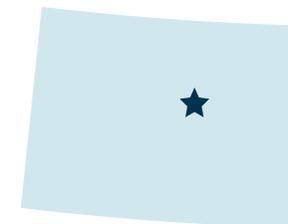
To address these needs and the general social unrest in the region, the Foundation for Urban Neighborhood Development (FUND), a Denver-based non-profit, worked with the University of Colorado School of Medicine to submit a proposal to the U.S. Public Health Service to establish a migrant health program. The proposal departed from conventional approaches and emphasized comprehensive, culturally sensitive, accessible and multidisciplinary care, including patient transportation and outreach services. FUND established an advisory group of local consumers to assist in implementing the project and this group became the Board of Directors of Plan de Salud del Valle, the non-profit formed to offer the services. The center opened on July 1, 1970, in a small apartment in Fort Lupton. A nearby former onion warehouse was later purchased and converted into a medical and dental facility, which served as the health center's home for over a decade.

Throughout the 1970s, Salud established itself as a significant health care provider focused on removing barriers to care. In 1979, Salud acquired its first mobile unit, and in 1982, opened new headquarters in Fort Lupton. Growth continued over the next decades, expanding the health center's geographic reach and extending access to more communities.

Today, Salud is a health care home serving northeastern Colorado and a southeastern community with 13 locations as well as a state-of-the-art mobile unit dedicated to the needs of agricultural workers and community-based school and partner sites. In addition to offering a broad range of medical, behavioral health, pharmacy and dental services, Salud provides programs to facilitate access and address disparities, including the Salud Schools Dental Program and a Medical Legal Partnership offered in conjunction with the Colorado Legal Services. Dedicated to transforming health care, Salud is a founding partner, along with Community Health Center, Inc. (CT) of the National Institute for Medical Assistant Advancement a non-profit educational institute that trains medical assistants to work effectively in high-performing primary care settings.



Since 1970, Salud Family Health Centers has provided high-quality culturally relevant primary health care to all, with a focus on low-income, medically underserved populations including the area's many migrant and seasonal farmworkers.



Fort Lupton, Colorado



Building on these values and its mission of improving the health and wellbeing of Milwaukee and surrounding communities, Sixteenth Street provides a comprehensive range of services, free from linguistic, cultural and economic barriers.



Milwaukee, Wisconsin

SIXTEENTH STREET COMMUNITY HEALTH CENTERS

sschc.org



Sixteenth Street Community Health Centers has provided high-quality health care, health education and social services to low-income residents of Milwaukee's culturally diverse south side for more than 50 years. In 1969, a group of neighborhood residents and advocates established the "Health Contact Center" in rented space on South 16th Street. There, anyone - regardless of ability to pay - could access health services and informational resources. In 1971, the Health Organization for Public Ethics, or H.O.P.E. Inc., was legally incorporated, with the philosophy that no one would be denied care.

By the end of 1971, H.O.P.E. Inc. had moved to S. 16th Street and became known as the Sixteenth Street Clinic. Services were expanded with funds from United Way of Greater Milwaukee & Waukesha County and the Social Development Commission. A partnership with St. Mary's Hospital (1975) formed the basis for a continuing residency program and ongoing support for low-income pregnant women. The clinic doubled its staffing to meet the needs of the growing bilingual community, hired its first full-time provider, renovated sites, and added services such as WIC (Women, Infants and Children program). In 1984, "la clínica de la dieciséis" – The Sixteenth Street Clinic – gained recognition as a federally qualified health center and received its first federal grant.

Through the 1990s, the clinic became more intentionally focused on addressing the social determinants of health. A facility expansion allowed for greater provision of social services, establishment of case management for persons living with HIV/AIDS, creation of a Department of Environmental Health and launch of the Behavioral Health Department. Other new services and sites followed: physical therapy and dental hygiene; sites in Parkway, Waukesha, and Layton; school-based clinics; and a geriatric care satellite at United Community Center's Senior Center.

Sixteenth Street is now Joint Commission accredited, a Level 3 National Committee for Quality Assurance (NCQA) recognized Patient-Centered Medical Home, and the state's largest health center. Sixteenth Street was one of two health centers in the state to receive HRSA recognition as a National Quality Leader.

The health center's services reflect its core values: respect for human dignity; respect for patients and one another; access to quality health care for all people; adaptability in a changing environment; the inherent value of diverse cultures; responsible stewardship of all resources; and patient-focused care.

Su Clínica

The seeds for Su Clínica were planted in the late 1960s, when advocates and church leaders came together to seek health care services for the uninsured and underserved in their rural, underserved community. In 1969, a community delegation approached Catholic Charities of the Diocese of Brownsville for support of a proposal to the Department of Health, Education and Welfare for a medical clinic. Su Clínica Familiar opened its first clinic sites in 1971 in Harlingen (Cameron County) and Raymondville (Willacy County), after receiving a Migrant Health Program grant to provide services for migrant and seasonal farmworkers on the Texas-Mexico border.

Initially staffed entirely by volunteer physicians and nurses working alongside VISTA volunteers, nuns and activists from *Organizaciones Unidas*, a federation of grassroots community groups, the clinic's first full-time physician arrived later that year. When the National Health Service Corps (NHSC) was founded to support care in underserved communities, Su Clínica Familiar applied to become one of the first placement sites; a NHSC physician joined the staff in 1973. The health center also became a training site for nurse-midwives.

The health center moved to a new, larger location in 1976. Throughout the following decades, it expanded by developing an inpatient hospitalization service for agricultural workers, expanding pediatrics, adding dental services, opening a small community clinic to serve the residents of Santa Rosa, and initiating WIC (Women, Infants and Children program) services in Willacy County. Three NHSC-supported obstetrician-gynecologists joined the staff in 1978, making possible the expansion of care to higher-risk patients. In 1980, new facilities were built in both Willacy and Southern Cameron County. New state-of-the-art clinical facilities opened in 2002 and 2012.

Continuing its longstanding commitment to education, the health center became a key player in bringing a medical education presence to South Texas. First, in 1988, as a teaching facility partner with the University of Texas Health Science Center at San Antonio's Regional Academic Health Center in Harlingen, and now, continuing that partnership by providing a unique training opportunity for medical residents from the University of Texas – Rio Grande Valley School of Medicine.

Now known as Su Clínica, it is the region's leading community health center, offering comprehensive, patient-centered services in Brownsville, Harlingen, Raymondville and Santa Rosa.



Su Clínica's commitment to community health and continuous quality improvement strengthens its reputation as the medical home of choice in the Rio Grande Valley, and fulfills the promise that everyone should have access to affordable, high-quality health care in facilities of the highest standard.



Harlingen, Texas



**Teche Action Clinic,
Louisiana's first community
health center, opened its
doors in the City of Franklin in 1974,
in rented office space across from the
area hospital.**



Franklin, Louisiana



Alice Drefchinski, one of the state's first pediatric nurse practitioners along with Rosemary Broussard, led the charge to open Teche Action Clinic because she believed low-income people and migrant sugar cane farm workers, who desperately needed medical care and could not afford it, were being ignored.

Drefchinski wrote a competing federal grant for the group's mission, because of a rift she and a small number of locals had with Family Medical Clinic, which had been awarded money from the government, but was planning to use the funds to unionize the sugar cane workers, similar to the work Cesar Chavez had completed in 1962 by forming the National Farm Worker Association.

Drefchinski named the clinic Teche Action because of its location near Bayou Teche, a 125-mile waterway that was once the primary means of transportation for the Chitimacha Indians who lived in the region. The Chitimacha named the waterway Teche, which is their word for snake, because of the bayou's twists and turns resembling a snake's movement.

The clinic opened with an initial board of directors that included 11 farmworkers, three doctors, one pharmacist and two members of the African American community. The Board hired Rosemae Broussard, who had served as administrator of the rival Family Medical Clinic, as its first chief executive officer. Federal funds were threatened as the clinic grew. During the first funding strife, Broussard mortgaged her home to keep the clinic open. When a second threat occurred in 1982, the clinic resorted to utilizing some volunteer staff alongside National Health Service Corps (NHSC) - supported physicians. Drefchinski, who had replaced Broussard as the CEO, hired New Orleans native and Tulane University Medical School graduate Dr. Gary Wiltz, a NHSC member, as the medical director. Wiltz held that position for 20 years, before being appointed CEO in 2003.

Teche Action Clinic now operates 15 sites, six of which are school-based clinics, and a mobile unit. The health center provides comprehensive internal and family medicine, pediatrics, OB/GYN, dental, and mental health service. Three sites offer WIC (Women, Infants and Children program), laboratory and pharmacy. Under Dr. Wiltz's visionary leadership, Teche Action Clinic serves a diverse multicultural population, with nearly 30,000 patients on record.

TENNESSEE PRIMARY CARE ASSOCIATION

tnpca.org



Tennessee Primary Care Association (TPCA) was formed in 1976 as the Tennessee Association of Primary Health Care Centers when the state's Board of Pharmacy promulgated regulations that would have made it impossible for nurse practitioners to write prescriptions, threatening care at the state's rural, nurse practitioner- and physician assistant-staffed health centers. The conflict with the Board of Pharmacy, and its successful resolution, underscored the need for health centers to coalesce into a unified, statewide organization to represent their interests and ensure continued access to care for underserved communities.

Initially focusing on the state's rural health centers, the organization adopted by-laws, elected the first board of directors, and held its first conference in 1977; in 1978 it sought status as a 501(c)(3) not-for-profit organization. In 1982, with support from the Robert Wood Johnson, Lyndhurst, and Commonwealth Foundations, it initiated a pilot program for Medicaid managed care. TPCA received its first federal grant from the Bureau of Primary Health Care in 1984.

Today the TPCA represents 30 non-profit primary health care organizations that operate more than 200 clinic sites. It serves as a vehicle through which health centers and providers of health care to the medically underserved share information and resources and work collaboratively to strengthen community-based primary health care systems in Tennessee. TPCA provides a wide range of training, technical assistance and collaborative learning opportunities addressing clinical data analytics, governance, health policy, operational excellence, oral health, outreach and enrollment, health information technology (HIT) and telehealth.

The Association's health policy and advocacy program connects health centers with policy makers, providing a unified voice in the state legislature by introducing legislation, tracking policy developments, testifying at committee hearings, educating legislators, and facilitating health center communication with state and federal legislators. Through these leadership, advocacy, and support services, the TPCA serves as a bridge between community needs and the decision-makers at the federal, state, local, and corporate levels. In 2001 TPCA and its member organizations achieved a long-standing goal of securing cost-based reimbursement for the state's federally qualified health centers through the implementation of the Prospective Payment System.



TPCA's programs and accomplishments reflect the Association's longstanding and fundamental commitment to maximizing access to health services for all Tennesseans with emphasis on the working poor, the uninsured, TennCare (Medicaid) patients, and others most in need.



Tennessee



In the tradition of its founders, Terry Reilly Health Services provides integrated, comprehensive medical, behavioral health and dental services throughout Ada, Canyon and Owyhee counties in Idaho's Treasure Valley, providing a positive, high-quality, patient-centered medical home for all members of the community and improving not just their health, but quality of life.



Nampa, Idaho



Terry Reilly Health Services' story begins in 1971. At the behest of the Roman Catholic Diocese of Boise, Idaho native Terry Reilly, a community activist and conscientious objector to the Vietnam War, and his wife Rosie Delgadillo Reilly came to Nampa to help provide services to the area's large seasonal farmworker community. Working out of a home named Gente House (House of the People), they started a neighborhood center and offered tutoring for children; they soon became acquainted with farmworker families who had limited access to health care and needed support.

The Reillys convinced a local pediatrician to volunteer his services and together they started a clinic in the back of Gente House on May 1, 1971. The clinic helped demonstrate to local, regional, and national leaders the plight of the large, indigent medically underserved population in southwestern Idaho. Strong local advocacy helped secure a federal grant and Community Health Clinics, Inc. was chartered as a not-for-profit health center, operating initially out of a repurposed Nampa grocery store.

The organization grew quickly, focusing on serving low-income and uninsured farmworkers and medically indigent people. The operation expanded to neighboring Homedale, Parma and Marsing. Advocacy and program development were strong themes. Among the notable accomplishments of that period was the SANE Solutions Program, which provides counseling for both the victims and offenders of sexual abuse and continues to exist today. Tragically, Reilly died in a 1986 plane crash while campaigning to become Idaho's Lieutenant Governor and the clinic subsequently adopted the name Terry Reilly Health Services.

Under new leadership and in response to shifting needs, the Parma Clinic was sold, and a Boise site opened in 1988, providing care to people experiencing homelessness. During the early 1990s, dental and behavioral health services were added and expansion continued, with the opening of Boise Dental (2000), the Melba Clinic which served a small farming community (2002), and the Melba and Homedale Dental clinics (2003). A Caldwell Clinic opened thanks to the donation of a building by local physicians and with start-up funding from the state (2006). Additional sites followed in the ensuing decade, adding access points and services.

THE CHAUTAUQUA CENTER

tcchealth.org



For many years, the rural southwestern corner of New York State along the New York-Pennsylvania border, in Chautauqua County, faced a shortage of healthcare professionals and services. In 2010, the Health Foundation of Western and Central New York set out to assess the gaps in service and formulate a plan to address that need, and ultimately determined that the area was sorely in need of a community health center.

The Chautauqua County Health Network, an organization dedicated to strengthening the local delivery system, was asked to help assemble key partners within the county to determine who might be willing to move forward with the formation of a federally qualified health center but was unable to identify an organization to serve as the lead agency. Undeterred, community members continued to work toward the goal of establishing a health center, and a community Board of Directors was formed in 2011. The Health Resources and Services Administration (HRSA) awarded funding to the health center in 2012 and, after a false start when the intended location for the health center fell through, a new location in Dunkirk was identified. The Chautauqua Center (TCC) opened its doors to the community in January 2013, finally bringing comprehensive, high-quality care to the region.

Since its opening, TCC has grown at a rapid pace in both Dunkirk and Jamestown, NY, and now provides care to over 10,000 people annually, fostering wellness by serving a diverse community. TCC offers a total-healthcare model including mental health, preventive services, telehealth, dental, pediatric, chiropractic, adult medicine, care coordination, health and nutrition assistance with transportation, medical translation, and assistance with health insurance applications. Along with chiropractic care, TCC's new nutrition program is another progression toward providing health care for community members. In addition, the health center reaches beyond conventional medicine and collaborates directly with many partners to address social determinants of health such as unstable and inadequate housing, insurance enrollment, and food security.

In recognition of its contribution to the development, quality of life and stability of the region, TCC was the recipient of the Chautauqua County Economic Impact Award in 2020.

A recognized patient-centered medical home, TCC and its professional staff are a true example of “our family caring for your family.” Dedicated to the principles of access, treatment, education and prevention, the health center delivers comprehensive, high-quality health care and support services, and is a recognized leader in the Chautauqua region.



Dunkirk, New York



THE JANE PAULEY COMMUNITY HEALTH CENTER, INC.

janepauleychc.org



Day by day, The Jane Pauley Community Health Center advances its vision to “build on its partnerships, collaborations, and community resources to revolutionize healthcare and dramatically improve the personal health and happiness for all residents of the JPCHC neighborhoods and the overall health of the community.”

The Jane Pauley Community Health Center, Inc. (JPCHC) is named for respected broadcast journalist and author Jane Pauley, who grew up in the area and is well-known as the anchor of “CBS Sunday Morning” and a powerful advocate in the field of mental health.

JPCHC was established in 2009 with generous support from the Metropolitan School District of Warren Township, Community Health Network, and the Community Health Network Foundation. Its mission is to promote a healthy community through the provision of accessible, respectful, and integrated healthcare with local partners to any and all individuals and families, regardless of insurance status.

In 2011, it was designated by the Health and Resources Administration (HRSA) as a federally qualified health center, and consequently was able to expand services and increase access to more people in need of health care, truly reflecting its core values of quality care, integrity, community, stewardship, partnership, and cultural competency.

JPCHC now operates in four counties. It offers family medicine, pediatrics, OB/GYN, behavioral health, and dental care for adults and children. Services range from routine preventive care to chronic disease management. Outreach advocates assist patients and community members with enrollment in state-based coverage programs, prescription assistance, Marketplace health plans, and sliding-scale, income-based care.



Indianapolis, Indiana



Unity Health Care (Unity) was originally established as Health Care for the Homeless Project (HCHP) in 1985, operating out of a small room in a local shelter in Washington, DC. HCHP was co-founded by local physicians Drs. Jesse Barber and Janelle Goetcheus who were passionate about helping the most vulnerable.

HCHP provided primary health care services to individuals and families who resided in local emergency shelters or on the streets of the District of Columbia. In 1987, HCHP became one of 13 public-private partnership grantees awarded funding from the Robert Wood Johnson Foundation, paving the way for it to become designated as a federally qualified health center. This allowed the organization to grow, and in 1997, HCHP officially changed its name to Unity Health Care as primary and specialty care services were expanded to offer care to all residents of the District.

Long recognized for its innovation and for embracing all members of the community, Unity offers comprehensive primary care, specialty services, healthcare for the homeless, Medication Assisted Treatment and opioid recovery, a teen clinic, and CODA, a clinic specializing in care for deaf children and adults, offered by an ASL-fluent provider. A community-based correctional health care model, implemented in 2006, provides physical and behavioral health care in the DC Department of Corrections jails, and includes post-incarceration services to help people adjust to life after serving time.

Unity is also committed to training clinicians, and serves as a Teaching Health Center offering a Family Medicine Residency through The Wright Center for Graduate Medical Education in collaboration with A.T. Still University and its School of Osteopathic Medicine in Arizona.

Unity Health Care has developed into the largest health center network in the District, and now comprises nine community health centers, 11 medical sites in local homeless shelters, two school-based health centers and medical walking outreach, as well as the Department of Corrections program. The health center's newest location, East of the River Health, was opened in 2019 in partnership with So Others Might Eat and Howard University Hospital. This health center site provides, in addition to general primary care, behavioral health, and substance use disorder treatment and counseling, specialized co-located services in high-risk maternal and fetal medicine and oncology.



Unity Health Care celebrated its 35th anniversary in 2020 and remains deeply rooted in the community and dedicated to providing accessible and high-quality care to all DC residents, regardless of their circumstances or ability to pay.



Washington, DC



In 2019, with the support of a HRSA Health Infrastructure Investment Program grant, Valley Health cut the ribbon on its newly constructed, state-of-the-art 15,000 square-foot community health center in Milton. Oakwood Road, a new QuickCare site in Charleston, was opened in 2020. These new facilities and locations reflect the health center's continued focus on community and build on the deep roots it has nurtured since its founding.

Valley Health has been providing high-quality health care services in West Virginia since it started in 1975, with the goal of providing access in its rural community. The health center's Barboursville and Wayne locations opened in 1976, followed by a site in Milton, in 1978. Each of the sites had its own community board of directors in addition to the Valley board. In the early 1990s, the organization consolidated governance to one system-wide board of directors, but remained deeply rooted in each community.

A dental site was opened in 1979 and other new programs, services and locations followed. WIC (Women, Infants and Children program) was initiated in 1981 and by 1991, Valley Health had become the largest regional lead agency for the WIC program. The enactment of the Stewart B. McKinney Homeless Assistance Act (1987), the first significant federal legislation in response to the growing crisis of homelessness, helped support Valley Health's development as a significant provider of care to the homeless. Valley Health has been both a grantee and a sub-grantor for the Health Care for the Homeless grant overseeing the Harmony House Homeless Clinic in Huntington, West Virginia, and programs in Charleston, Wheeling, and Morgantown.

Additionally, Valley Health has managed and supervised grant programs such as the federal Community Health Center (CHC) Perinatal grant, Rural Health Outreach grants, the Community Access Program, and the federal Black Lung Clinic grant through the West Virginia Bureau for Public Health. In collaboration with the Children's Health Fund, in 1992 Valley Health began the operation of the unique West Virginia Children's Health Project, a mobile medical unit that brings medical care directly to children in isolated areas.

Valley Health now provides primary and preventive care at more than 40 locations serving southern West Virginia, southeastern Ohio, and eastern Kentucky, where dedicated staff provide family and internal medicine, women's health, dentistry, optometry, pediatrics and behavioral health. Lab, diagnostics, optometry, and pharmacy are part of the health center's comprehensive approach to care. School-based health operates in seven schools.



Huntington, West Virginia

VIRGINIA COMMUNITY HEALTHCARE ASSOCIATION

vacommunityhealth.org



The Virginia Community Healthcare Association was founded in 1980 when there were only 13 community health centers (CHCs) in Virginia. Today, the state's primary care association (PCA) represents 30 member organizations with nearly 150 service sites across the Commonwealth. Vast portions of the state are designated as medically underserved, and 10 percent of the state's residents – more than 700,000 Virginians – have no health insurance; approximately 25 percent of patients served by Virginia's health centers are uninsured (2019). The state's health centers are also crucial to the state and local economy, providing more than 2,600 jobs and generating more than \$459 million in economic impact.

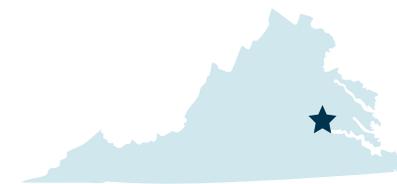
The Virginia Community Healthcare Association is dedicated to ensuring that the state's health centers have the resources they need to serve their communities and provide access to all, regardless of ability to pay.

The Association offers training and technical assistance to CHCs so that they can provide high-quality, comprehensive, convenient primary care services, including medical, dental, behavioral health and pharmacy assistance. The PCA provides advocacy and policy resources and offers comprehensive webinars, and in-person trainings and technical assistance, to health center leadership and staff. Other services include cooperative purchasing for laboratory, medical and office supplies and other common needs, and consulting. Staff also work closely with regional and national partners to provide essential information about federal and state initiatives and to advance policy that supports health center priorities.

The Association has been a driving force in establishing and maintaining both local and statewide efforts to improve primary care, such as the Virginia Five Point Plan to Strengthen the Primary Care System; Area Health Education Centers, Virginia Center for the Advancement of Generalist Medicine, and the Practice Sights Initiative.



Virginia's community health centers are an integral part of the health care safety net and in collaboration with the Association, work to ensure and expand access for all.



Virginia



Virginia Garcia Memorial
HEALTH CENTER

Virginia Garcia strives to eliminate health disparities by providing high-quality care regardless of a person’s socioeconomic status while advocating for health policy consistent with its mission and community focus.

Virginia Garcia Memorial Health Center owes its name and origin to a tragic 1975 event, when six-year-old Virginia Garcia and her farmworker parents traveled from their home in Mission, Texas to California and Oregon to work in the fields. Along the way, Virginia cut her foot, and by the time the family reached Oregon, the wound had become infected. Hampered by economic, language and cultural barriers to health care, Virginia died from what should have been an easily treatable injury.

In response to Virginia’s untimely death, the community quickly rallied together to open a health center in her memory. The first Virginia Garcia Memorial Health Center opened in a three-car garage, determined to prevent future tragedies and serve as a catalyst for change in healthcare delivery. The health center’s enduring mission focus is dedicated to providing high-quality, comprehensive and culturally appropriate primary health care to the communities of Washington and Yamhill counties, with a special emphasis on migrant and seasonal farmworkers and others with barriers to receiving health care.

With a committed staff and leadership motivated to remove obstacles to accessing health care, innovation and growth followed. Today, Virginia Garcia operates a network of comprehensive, patient-centered health center sites in Washington and Yamhill counties, and school-based health centers serving five school districts. Dental, on-site pharmacy, and mental health services are available throughout the network. The health center also provides wellness care and a broad program of outreach, advocacy and enabling services through schools and community health fairs and to migrant and seasonal agricultural workers at local camps and commercial nurseries through a bright, new, state-of-the-art mobile clinic.

Maintaining its proud tradition of providing high-quality care to all regardless of ability to pay, including the area’s large population of migrant farmworkers, Virginia Garcia Memorial Health Center served 52,000 community residents in 2019, with a dedicated staff numbering 650 strong.



Hillsboro, Oregon

WAIANAЕ COAST COMPREHENSIVE HEALTH CENTER

wcchc.com



**WAIANAЕ COAST
COMPREHENSIVE
HEALTH CENTER**
www.wcchc.com

Waianae Coast Comprehensive Health Center (WCCHC), located on the island of Oahu, will celebrate its 50th anniversary in 2022. Intending to meet the human service needs of rural Waianae and surrounding communities, the center started with just one physician and a staff of five. Today it is the largest community health center in the state of Hawai'i.

The Waianae Coast Comprehensive Health Center is first and foremost a healing center, committed to providing accessible, high-quality and affordable, comprehensive health care, while preserving native Hawaiian culture and traditions in order to help community members achieve complete wellness.

Today, along with a main site in Waianae, the health center operates satellite clinics in Nanakuli, Kapolei, Ewa Beach and Waipahu, KWIC (walk-in) Clinics at Waianae Mall and the West Oahu Community Health, and school-based health clinics at Waianae High and Intermediate schools, Nanakuli High and Intermediate School, and Kamaile Academy.

The health center achieves its mission by incorporating the goal of improving the overall health status of the community it serves, offering primary care, a 24-hour emergency room, laboratory, imaging, dental, vision, pharmacy, behavioral health and specialty services. Essential support services include case management, health promotion, transportation, outreach, food distribution and farmers' markets, WIC (Women, Infants and Children program), and nutrition.

Providing healing through accessible and affordable medical care and offering traditional healing services with aloha is central to its mission. Equally, WCCHC recognizes that promoting and achieving wellness goes well beyond providing medical services. Essential is innovation in care delivery, by using leading-edge technology to deliver the highest quality of medical services to the community. As a health care home, WCCHC promotes job training and job development that are crucial to the health of the community.

To provide local access to educational opportunities and training for the health professions, WCCHC developed the Health Careers Pipeline. WCCHC offers residency programs for nurse practitioners, psychologists and pediatric dentists, and serves as a campus for the A.T. Still University School of Osteopathic Medicine health center-oriented Hometown Scholars Program, offered in collaboration with the National Association of Community Health Centers. This program is one of several offered to promote training and education at all levels.



Dedicated to learning, innovation and healing, the Waianae Coast Comprehensive Health Center is an institution of medical, teaching and cultural excellence incorporating unique native Hawaiian traditional healing practices.



Waianae, Hawai'i



Waikiki Health is the oldest community health center in Hawai'i. The health center traces its roots to 1967, when community members concerned about the growing problem of drug use established the Waikiki Drug Clinic. In the 1970s, the clinic began offering expanded primary and preventive care, became a 501(c)(3) non-profit agency, and changed its name to Waikiki Health Center. It has provided comprehensive, high-quality medical care and social services to vulnerable populations ever since.

Waikiki Health is a multiservice, multi-site health center offering medical and social services in Waikiki and across Oahu, with outreach services throughout the State of Hawai'i. It provides affordable, high-quality, compassionate, culturally competent healing and expert care, where "you're not just a patient or client, you're a member of our ohana."

In the following decade, Waikiki Health Center began offering care for HIV patients as well as services for people experiencing homelessness, subcontracting to several other Hawaiian health centers. The health center is Hawai'i's only recipient of federal Ryan White funding for HIV/Early Intervention Services and of 330 (h) Homeless Outreach funding, targeting patients experiencing homelessness, often with a dual diagnosis of mental health and substance use challenges.

Over the ensuing years, rebranded as Waikiki Health (WH), the health center continued to expand and grow. The health center's service locations include the Oahu Clinic, Makahiki Medical & Dental Clinic, PATH Clinic, Next Step Shelter, Keauhou Shelter and Youth Outreach (YO!) as well as two pharmacy sites. The WH Care-A-Van operates specially-equipped vans to provide mobile medical and behavioral health outreach services. A patient-centered medical home, the health center counts primary care medicine, dental, behavioral health, women's health, pharmacy and optometry among its many services, and complements the clinical services with Native Hawaiian Healing, which is available to all patients at no cost.



Special services include Pu'uohonua, a community reentry program for incarcerated individuals offering services pre- and post-release to help reduce recidivism, focusing on documents, benefits, enrollment in health insurance plans and housing. Auxiliary services include medical nutrition therapy, tobacco treatment, nurse care coordination, behavioral health care coordination, health education, case management, insurance eligibility for Medicaid and other health plans, and transportation.



Honolulu, Hawai'i

WESTSIDE FAMILY HEALTHCARE

westsidehealth.org



In the early 1980s, H. Salle McDaniel, a community nurse, convened volunteers to bring culturally responsive health care to the Latino community residing in the West Side of Wilmington, Delaware. They fought to get the neighborhood designated as a medically underserved area, and to establish the first “nurse managed” community health center in Delaware. In 1986, Westside Family Healthcare won its first major funding award - a six-year challenge grant under the Robert Wood Johnson Foundation’s community partners funding program. Together with community leaders and funders, Ms. McDaniel worked for two years to raise critical operational funds to serve this community.

By 1988, Westside opened its doors on the West Side of Wilmington in the Adams Four Shopping Center with a small medical team and staff. In 1990, Ms. McDaniel and her Board members hired Executive Director Lolita Lopez, who continues to lead Westside’s remarkable growth. In 1992, Westside achieved its first benchmark - designation as a federally qualified health center (FQHC) “lookalike,” the 17th in the nation. This designation positioned the health center to receive federal funding to subsidize care for under- and uninsured patients. By 1994, Westside had become a fully funded federally qualified health center. In 2000, Westside received accreditation by The Joint Commission in Ambulatory Health Care and in 2012 as a Primary Care Medical Home.

With the visionary leadership of Ms. Lopez, Westside has grown into a successful, dynamic community health center serving more than 27,000 patients annually. The health center operates five offices serving statewide, providing comprehensive primary and preventive medical services, dental care, and behavioral health for children, teens and adults. The agricultural worker community is served through a mobile health unit and outreach team that remove barriers to care. Westside maintains affiliated partnerships with the major hospital systems in Delaware. In collaboration with ChristianaCare, Westside operates a continuity training site for family medicine residents and general practice dentistry residents, creating a workforce pipeline for providers to practice in community health.

As Westside’s story continues to unfold, its commitment to the community and its mission to provide equal access to quality healthcare, regardless of ability to pay, remains strong and passionate.



Westside Family Healthcare is a resource for the compassionate care that families depend on to live vibrant, healthy lives, reaching beyond conventional medicine to address social, emotional, and economic factors that affect their patients.



Wilmington, Delaware

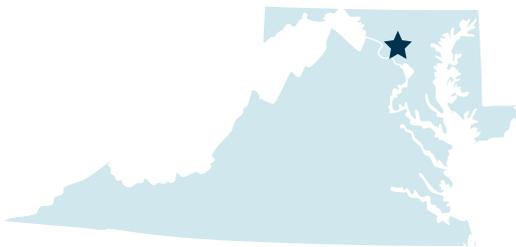


Whitman-Walker provides a full range of services including medical, dental, mental health, peer support, legal services, public benefits navigation, youth programming, and HIV testing and prevention services, offering affirming community-based health and wellness services to all, with an expertise in LGBTQ and HIV care. It empowers all persons to live healthy, love openly and achieve equality and inclusion.

Whitman-Walker has served the Washington, DC community continuously since 1973. It began as the Gay Men's VD clinic operating as part of the Washington Free Clinic, but separated in 1977 to develop a new healthcare organization. Whitman-Walker was chartered in January 1978, named for gay poet Walt Whitman, a former DC resident, and Dr. Mary Edwards Walker, a noted Civil War-era physician, and the only woman recipient of the Medal of Honor to date.

Facing a financial crisis, the clinic relocated in 1981. Simultaneously, the first medical reports emerged on what would come to be known as AIDS. To address this crisis, Whitman-Walker launched the AIDS Education Fund to provide information, counseling and direct services to people with AIDS, and was awarded the first DC contract for AIDS services to start the DC AIDS Infoline. In 1984, the clinic opened an AIDS Evaluation Unit, the first gay, community-based medical unit in the country devoted to the evaluation and diagnosis of AIDS symptoms. An attorney was hired to help people with HIV/AIDS handle legal matters. This was the beginning of what would become Whitman-Walker Legal Services, now the nation's oldest medical-legal partnership. The health center added dental care in 1987, one of just three clinics in the nation offering dental health to people with HIV/AIDS.

Throughout the next few years, Whitman-Walker fought the AIDS epidemic while reaffirming its dedication to lesbian and gay health and expanding services. With federal Ryan White CARE Act funds, it added transportation, interpreting, a Spanish-speaking physician and a full-time dentist. Whitman-Walker became a health center look-alike in 2007, and in 2013, was designated a federally qualified health center (FQHC). Whitman-Walker opened a new state-of-the-art health center in 2015, followed by the opening of Whitman-Walker at LIZ – a mixed-use building with, apartments, retail, and Whitman-Walker office space and a cultural center called The Corner. A transformative expansion underway at Saint Elizabeths East Campus in Southeast DC, slated to be completed in 2023, will significantly improve access to care and expand capacity. Whitman-Walker Health System, launched in 2019, will help meet community health care needs and address financial sustainability.



Washington, DC

YAKIMA NEIGHBORHOOD HEALTH SERVICES

ynhs.org



Yakima Neighborhood Health Services (YNHS), located in Central Washington, opened its doors in 1975 to serve the needs of low-income people in southeast Yakima. The clinic focused initially on preventive health services, but by 1979 it had become increasingly clear that the area's low-income community had a huge unmet need for health care services, and the board of directors and staff began to develop a full-scope primary care center to provide affordable quality health care. In 1980, YNHS was awarded its first state contract to provide ongoing, comprehensive health services for low-income and otherwise disadvantaged families. The health center obtained its first Maternal Child Health grant funds, augmenting its services to children and young adults up to age 21, and uninsured women in the Upper Yakima Valley and Sunnyside. The health center also purchased the adjacent building and connected it to the original site, making it possible to expand the medical clinic and add the WIC (Women, Infants and Children) program.

A decade later, with the support of the private medical community and the County Medical Society, YNHS took the lead in obtaining Medically Underserved Area (MUA) designations for all parts of Yakima County. Once the MUA designation was achieved, YNHS applied for and achieved designation as a federally qualified health center (FQHC), allowing it to receive financial support for expanded services including interpreters, transportation and education to families who could not otherwise access needed health care, and making the health center eligible as a loan repayment site for the National Health Service Corps.

The health center continued to expand, building a new facility in 1994 and adding new services and locations to meet community-specific needs. The original building was remodeled and became a dental services site.

Today, YNHS offers medical and dental clinics in Yakima, Sunnyside and Granger and operates a fully-equipped mobile medical van. The YNHS provides comprehensive care for those experiencing homelessness and, along with area partners, provides transitional housing, permanent supportive housing and case management for those in the community at risk of experiencing homelessness. YNHS' commitment to excellence and to "build healthy neighborhoods, one life at a time," is reflected in its accessible, comprehensive, high-quality services and programs.

Now in its fourth decade of operations, YNHS continues to provide affordable, accessible, quality health care, promote learning opportunities for students of health professions, end homelessness, and improve the quality of life in its surrounding communities.



Yakima, Washington



Today, Zufall operates seven days a week and has eight fixed sites as well as two mobile vans providing comprehensive high-quality, primary medical, dental, and behavioral health services to underserved adults and children across six counties in northern and central New Jersey.



Dover, New Jersey

Zufall Health Center started as a once-a-week clinic in Dover, NJ in 1990, founded by Dr. Robert Zufall, a retired urologist, and his late wife, Kathryn. After doing volunteer work in Peru, the Zufalls sought a meaningful retirement closer to home. With a cadre of volunteers and some seed money, they opened the weekly Dover Free Clinic in a modest room in the Morris County Organization of Hispanic Affairs.

Serving a community of poor, mostly immigrant Latino families, Dr. Zufall treated patients while Mrs. Zufall provided administrative support. Almost instantly, the demand for care grew, and the Zufalls deepened their commitment, moving the clinic to larger quarters, and expanding its hours. Dr. Zufall studied pediatrics and internal medicine, while Mrs. Zufall pursued options for public and private funding. Their personal dedication and tenacity in enlisting volunteers generated a core team of physicians, dentists and support staff who could provide a full spectrum of services. While the uncertainty of funding for what became known as the Dover Community Clinic or “La Clinica,” was an ever-present threat, the private, not-for-profit clinic’s survival was finally assured in 2004 by its designation as a federally qualified health center. The clinic was renamed to honor the Zufalls in 2006.

Zufall offers an extensive array of outreach services to agricultural workers, people experiencing homelessness, veterans, seniors and public housing residents. Diverse community programs include the Health, Education and Legal Program, a medical-legal partnership with the Legal Services of Northwest Jersey and the Maternal Wraparound Program, an initiative funded by the New Jersey Division of Mental Health and Addiction Services to provide intensive case management to opioid-dependent pregnant/postpartum women residing in Morris, Sussex and Warren counties.

These and all of Zufall’s innovations and achievements, including its designation as a National Quality Leader, CDC Million Hearts Hypertension Champion, and AMA/AHA Target BP Gold Status winner are a tremendous source of pride for the center’s current leadership and for Dr. Zufall himself. A hero to the health center staff, in 2021 Dr. Zufall continues to serve as a member of the board of directors, providing deep expertise and sustained inspiration to colleagues, staff and patients.

FOUNDERS AND EARLY LEADERS

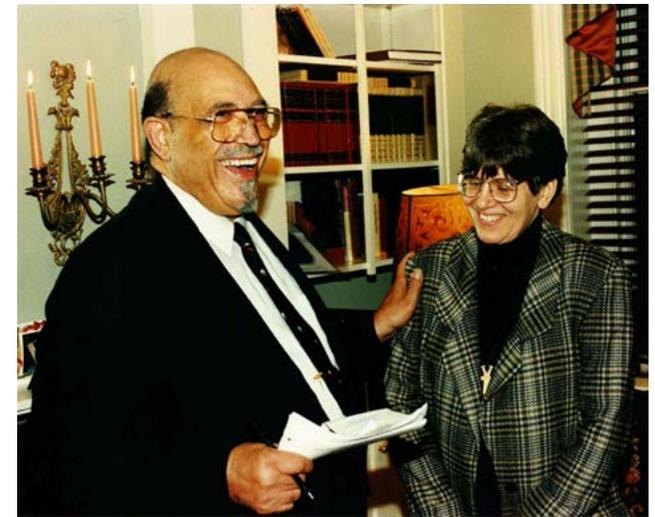
All over America, community health centers were founded by visionary local leaders, activists and advocates who saw a pressing need for health care services and committed to meeting those needs. Together with early health center staff and community-based board leadership, they created the foundation not just for local services, but for the comprehensive community health center system of care that we know today.



▲ Founders Terry Reilly and Rosie Delgadillo Reilly on the front steps of Gente House, the original home of the neighborhood clinic in Nampa, Idaho that became Community Health Clinics, Inc. and was later renamed the Terry Reilly Health Services in tribute.



▲ Ms. Betty Jean Kerr RN, BSN, PNP, MA joined the People's Health Center as CEO in 1977 and turned the volunteer-led storefront free clinic into a comprehensive network. Upon her retirement, the health center was renamed the Betty Jean Kerr People's Health Center (PHC) in her honor (St. Louis, MO).



▲ Dr. Janelle Goetcheus and Dr. Jesse Barber founded Washington DC's Health Care for the Homeless Project (HCHP) in 1985. The organization expanded and is now known as Unity Health Care, the largest network of community health centers in Washington, DC, and a provider of comprehensive care open to all residents of the communities it serves (Washington, DC).

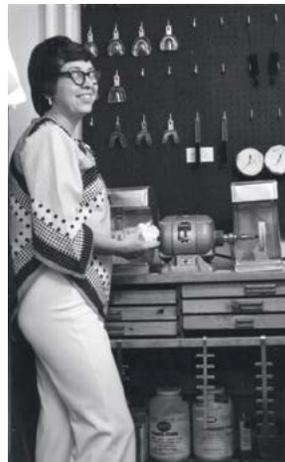


◀ Sun River Health was founded more than 45 years ago when a group of four women – the “Founding Mothers” Mary Woods, Willie Mae Jackson, Pearl Woods, and Reverend Jeannette Phillips – worked with community members and religious leaders to address the need for affordable health care in Peekskill, one of the poorest cities in NY's Hudson River region. Originally known as Peekskill Area Ambulatory Health Center, and then as Hudson River Health Care, Sun River Health now serves the Hudson Valley, New York City, and Long Island (Peekskill, NY).

HEALTH CENTERS THROUGH THE YEARS



▲ Now known as Family Health Centers at NYU Langone (Brooklyn, NY) in 1967 a handful of community members united to form the Sunset Park Health Council, Inc. Partnering with a local hospital, the Lutheran Medical Center, they opened the doors of the Sunset Park Family Health Center (SPFHC) – one of the nation’s first community health centers. Here, staff enjoy a holiday party in the late-1960s.



▲ Community Health Center, Inc. (Middletown, CT) started out as a free clinic, opening in 1972 in a converted apartment in Middletown, and today is the largest community health center in Connecticut. Dental services were provided from the start, by volunteer dentists, working alongside colleagues in the dental lab.



▲ In the mid-1970s, there was only one doctor in the town of Yanceyville, North Carolina. As he neared retirement, concerned citizens came together and formed what would come to be known as Caswell Family Medical Center (CFMC) in 1978 to ensure medical care for everyone in the community, including the uninsured and the underinsured. Staff in this photo conduct equipment testing as the center readies for patients in the earliest years. Today the health center is called Compassion Health Care, Inc.

Spanning more than fifty years, health centers have changed with the times, and things sure looked different back then. But community health centers will never go out of fashion!



▲ CHC leaders and advocates Bill Hobson (then of Central Seattle Community Health Centers, WA), Julio Bellber (Ryan Community Health Network, NY), Wilford Payne (Primary Care Health Services, PA), Roland Gardner (Beaufort-Jasper-Hampton Comprehensive Health Services, Inc., Beaufort, SC) at the NACHC Policy and Issues Forum in Washington, DC (1990).



◀ Now part of Greater Seacoast Community Health (Somersworth, NH) the Goodwin Community Health Center was started by Avis Goodwin, pictured here, then Director of Social Services at Wentworth Douglass Hospital, who was concerned that laboring women were appearing in the hospital’s Emergency Department without having had prenatal care. With volunteer support, she founded the nation’s first prenatal clinic in 1969, initially supported entirely by donations of space, time and supplies. In 1971, it incorporated as a non-profit prenatal and family planning clinic and grew over the years, becoming a community health center in 1994. Ms. Goodwin passed away in 2014, but her inspiration remains.



◀ Mariposa Community Health Center (Nogales, AZ), initially part of the Santa Cruz County Health Department, was founded in 1980 to address the lack of affordable and accessible primary medical and dental care. County Health Officer Dr. Tad Pfister recruited James R. Welden to spearhead and implement the innovative new County medical program. Welden chose to seize the opportunity as the founding CEO – and provided leadership at Mariposa until his retirement in 2015. Welden is pictured, with his wife Claudia (1978).

MOBILIZATION AND GRASSROOTS ADVOCACY

Through mobilization and grassroots advocacy, we raise our collective voices to expand access and empower our communities, address the key needs of those we serve, and strengthen the health center movement. Here, some images from the front lines.



▲ Whitney M. Young, Jr. Health Center (Albany, NY) was established in 1971 to provide access to care, without regard to ability to pay. The health center was named for Whitney Moore Young, Jr. who was the executive director of the National Urban League. Staff and patients from Whitney M. Young, Jr. Health Center participated in a Walk for a Healthy Heart during the 1970s.



▲ Founded in 1964, St. John's Well Child and Family Center (Los Angeles, CA) began as a one-room volunteer-operated clinic to address the poverty and disturbing health inequalities of vulnerable, underserved South L.A. residents. It expanded into an independent, non-profit health center network. Pictured here, CEO James Mangia, colleagues and residents march to save Obamacare.



▲ Headed to the Hill representing their health centers and communities, the Texas Delegation – including Iris Hernandez, Paula Gomez, Jesse Soto, Horace Sarabia, Bernice Watson, and Samuel Sanchez. NACHC Policy and Issues Forum (early 1980s).



▲ Whitman-Walker Health (Washington, DC), founded in the 1970s, has fought for health care justice for decades, fighting the AIDS epidemic on the front lines and offering affirming community-based health and wellness services to all with a special expertise in LGBTQ and HIV care. Pictured here at AIDS Walk Washington with colleagues, friends and supporters are the late Jim Graham, former Executive Director of Whitman-Walker, Congresswoman Eleanor Holmes Norton, Carol Schwartz and Pat Hawkins (2004).



◀ Yakima Neighborhood Health Services (Yakima, WA) was established in 1975 to provide preventive health care and education services to low-income people. Continuing its ongoing advocacy work, YNHS participated in the Health Security Express bus caravan, which traveled from points across the U.S. to Washington, DC in support of health reform (1994).

MOBILE HEALTH SERVICES AND OUTREACH



▲ BVC Health, later known as MARCHA (Migrant and Rural Community Health Association) was renamed InterCare Community Health Network. The health center's mobile medical and dental vans date back to its earliest days and continue to serve agricultural workers as well as the broader community in Southwest Michigan (Bangor, MI).



▲ Indiana Health Centers started in 1977, providing care to seasonal and migrant farmworkers in Kokomo and Marion. While the health center added year-round services a short time later, and in 1980 expanded to serve the broader community, it continues to provide mobile services to agricultural workers (Indianapolis, IN).

Reaching everyone who needs health care can be difficult, especially where transportation options are limited.

Since their earliest days, community health centers have gone on the road to bring health care to the people who need it most.

Here's a look at just a few of the health center mobile sites that have expanded access to high-quality health center services in rural and urban communities alike.



◀ The Erie County Community Health Center/Erie County Health Department mobile health unit provided services for mothers and infants as part of a comprehensive strategy to improve health outcomes for newborns (Sandusky, OH).



◀ The mobile van operated by the Betty Jean Kerr People's Health Centers serves St. Louis area neighborhoods and communities, bringing services directly to area residents (St. Louis, MO).



◀ North Country HealthCare, established in 1991 as the Flagstaff Community Free Clinic, operates this big, bright beautiful Mobile Medical Unit serving communities in Flagstaff and throughout the state's northern region (Flagstaff, AZ).

COMMUNITY HEALTH FAIRS

Community health fairs and events offer important screening, provide essential health care information, promote prevention and wellness, and help community members access essential services in a fun environment. These photos capture the spirit of health fairs at health centers around the country and through the years.



▲ Delta Health Center, Inc. (Mound Bayou, MS) the first rural community health center established in the United States, in 1965, is a linchpin in the foundation of the community health center movement. At this health fair, teenagers gathered around a nurse offering blood pressure checks and wellness information (1999).



▲ Family HealthCare Network (Visalia, CA) was founded in 1976 to serve the farmworker community, and today is a comprehensive multi-site healthcare network serving communities across three counties. The health center provides health information and resources through an extensive community outreach program. Here kids learn about the importance of drinking water, at the Goshen Health Fair (2014).



◀ Betances Health Center (New York, NY) evolved out of a project started by Judson Memorial Church in 1969, known as the Judson Mobile Health Unit. The church worked with local activist Paul Ramos to develop the East Village Youth Project, and with grassroots support and Ramos' leadership, created the Betances Health Unit. This community health fair featured information about the importance of dental health and dealing with dental anxiety (2017).



◀ The Charles B. Wang Community Health Center (CBWCHC) (New York, NY) was established in 1971, when volunteers organized the Chinatown Health Fair to provide free health screenings and health education and to demonstrate the need for Chinese-speaking health care professionals.

The fair's success inspired the volunteers to create the Chinatown Health Clinic, staffed by volunteer doctors, nurses, social workers, and students. Today CBWCHC is a leading provider of care to NYC's Asian American communities. The Center's annual Good Health Day features health screenings, health education, family-friendly activities, live entertainment – and participatory Tai Chi demonstrations.

MILESTONE ANNIVERSARIES



▲ InterCare Community Health Network (Bangor, MI), founded as BVC Health in 1972, was later known as Migrant and Rural Community Health Association (MARCHA). The health center expanded and changed its name to InterCare Community Health Network in 1995. Board members, former directors, NACHC leadership and guests enjoyed the center's 25th anniversary celebration (1998).



▲ Now known as Sun River Health, Hudson River Health Care (Peekskill, NY) celebrated its 40th anniversary with CHC luminary Dr. H. Jack Geiger, Founding Mother Rev. Jeannette J. Phillips, Board Chair Hon. Alan Steiner and Health Center President & CEO Anne Kauffman Nolon (2015).



▲ Rachel Gonzales-Hanson, then President & CEO of Community Health Development, Inc. (Uvalde, TX) celebrated the health center's 35th anniversary with NACHC President & CEO Thomas Van Coverden, colleagues and friends (2018).



◀ Board Members and Executive Director Alicia Suárez of the Asociación de Salud Primaria de Puerto Rico (ASPPR) celebrated 35 years of CHC leadership at the annual conference in San Juan, Puerto Rico (2019).



▲ Members of the health center's Campeones de Salud/Champions of Health joined the Santa Rosa Community Health (Santa Rosa, CA) 20th anniversary celebration (2016).

The nation's first community health centers were launched in 1965, starting a movement that is going strong, more than 55 years later. Milestone anniversaries recognize and celebrate the longevity, dedication and growth of America's health centers.

This book is dedicated in tribute to

Dr. H. Jack Geiger

November 1925 - December 2020

whose vision and work inspired the community health center movement

