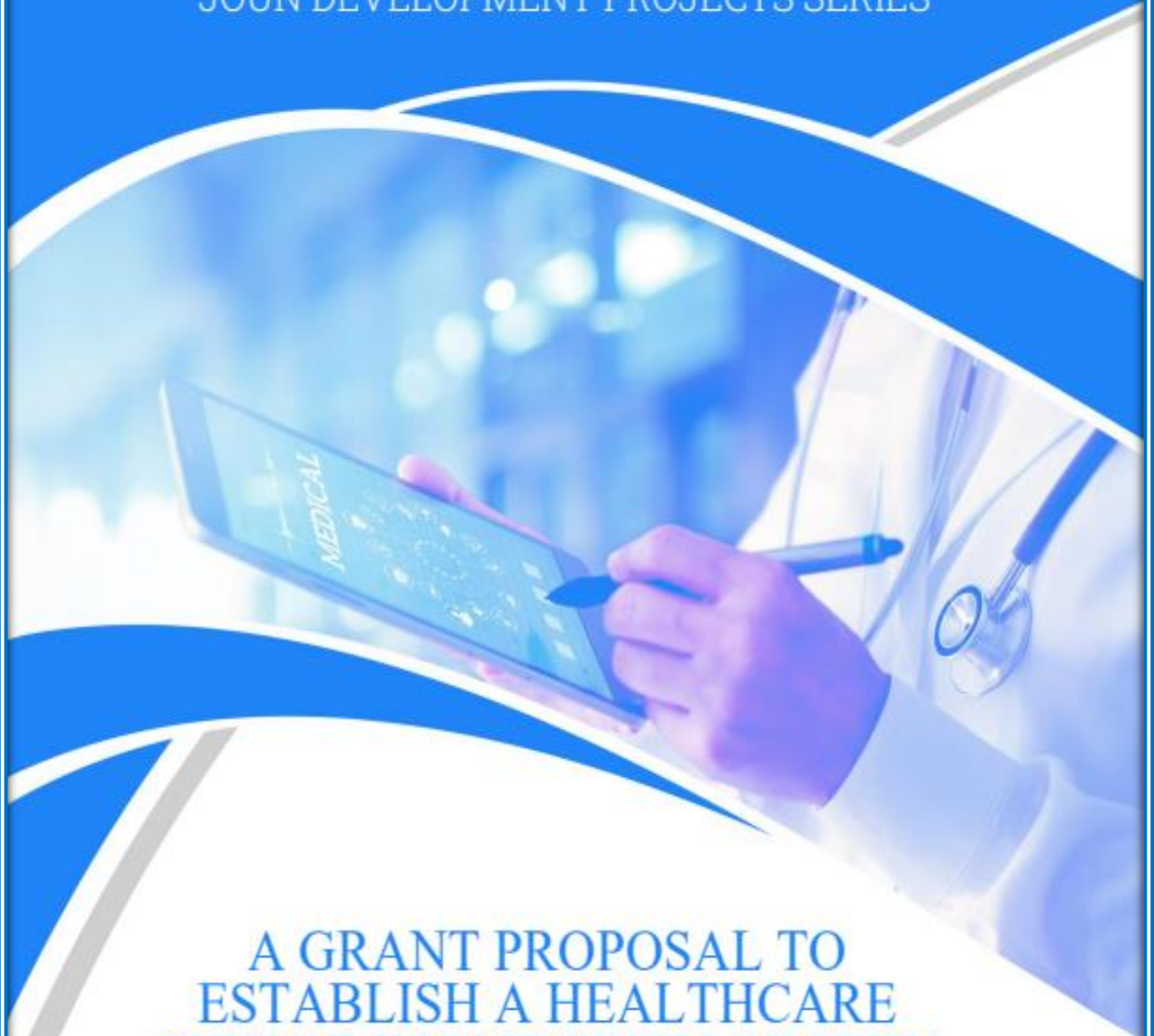


JOUN DEVELOPMENT PROJECTS SERIES



## A GRANT PROPOSAL TO ESTABLISH A HEALTHCARE CENTRE IN THE TOWN OF JOUN

Access to healthcare is a fundamental human right, yet many individuals and communities in rural or remote areas lack adequate facilities and services. In response to this pressing need, a grant proposal has been developed to establish a town health care facility in Joun. The Proposal to Establish Joun Health Care Centre (JHCC) aims to provide essential healthcare services to the community of Joun and the surrounding towns and address the various health challenges faced by residents in the area.

Prepared by:  
Antoine J. Burkush, PhD



# PROPOSAL TO ESTABLISH JOUN HEALTH CARE CENTRE (JHCC)

## A GRANT PROPOSAL

### Abstract

[Draw your reader in with an engaging abstract. It is typically a short summary of the document.

When you're ready to add your content, just click here and start typing.]

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## Acknowledgments

This collection of proposals is the result of a shared vision and a collaborative journey, guided by the input, dedication, and insights of countless individuals who hold Joun close to their hearts. It would not have been possible without the unwavering support and contributions of community members, experts, stakeholders, and local leaders, each of whom brought their unique perspectives to the table.

First and foremost, I extend my heartfelt gratitude to the residents of Joun, whose voices, ideas, and aspirations have been the foundation of this work. Your willingness to share your thoughts and dreams for our town has been invaluable in shaping proposals that truly reflect our community's spirit and goals. Your participation in discussions, surveys, and community gatherings has been a testament to your **commitment** to Joun's future.

Special thanks to all whose contributions were instrumental in refining our vision.

To the local leaders and stakeholders who championed this project, your support has been a vital source of encouragement. Your leadership and understanding of Joun's unique challenges and opportunities have given depth to these proposals, grounding them in both our town's history and its potential for growth.

Finally, I would like to thank everyone who worked behind the scenes—whether gathering data, conducting research, or organizing meetings—your efforts have been crucial in bringing this work to life.

Together, we have created a roadmap for Joun's future that honors our heritage and inspires a brighter tomorrow. I am truly grateful to each of you for your contributions, enthusiasm, and dedication to this endeavor.

With sincere appreciation,

Dr Antoine J. Burkush, PhD

## الشكر والتقدير

هذه المجموعة من المقترحات هي نتيجة رؤية مشتركة ورحلة تعاونية ، تسترشد بمدخلات وتفاني ورؤى عدد لا يحصى من الأفراد الذين يحملون جون قريبا من قلوبهم. لم يكن ذلك ممكنا بدون الدعم والمساهمات الثابتة من أعضاء المجتمع والخبراء وأصحاب المصلحة والقادة المحليين ، الذين قدم كل منهم وجهات نظره الفريدة إلى الطاولة.

أولا وقبل كل شيء، أعرب عن خالص امتناني لسكان جون، الذين كانت أصواتهم وأفكارهم وتطلعاتهم أساس هذا العمل. لقد كان استعدادك لمشاركة أفكارك وأحلامك لمدينتنا لا يقدر بثمن في تشكيل المقترحات التي تعكس حقا روح مجتمعنا وأهدافه. كانت مشاركتك في المناقشات والاستطلاعات والتجمعات المجتمعية شهادة على التزامك بمستقبل جون.

شكر خاص للذين كانت مساهماتهم مفيدة في صقل رؤيتنا.

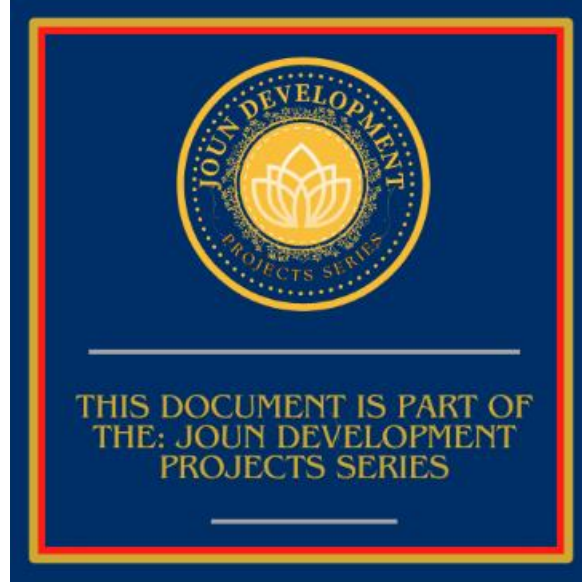
إلى القادة المحليين وأصحاب المصلحة الذين دافعوا عن هذا المشروع ، كان دعمكم مصدرا حيويا للتشجيع. لقد أعطت قيادتكم وفهمك لتحديات وفرص جون الفريدة عمقا لهذه المقترحات ، مما جعلها راسخة في كل من تاريخ مدينتنا وإمكاناتها للنمو.

أخيرا ، أود أن أشكر كل من عمل وراء الكواليس - سواء في جمع البيانات أو إجراء البحوث أو تنظيم الاجتماعات - كانت جهودك حاسمة في إحياء هذا العمل.

معا ، أنشأنا خارطة طريق لمستقبل جون تكرم تراثنا وتلهم غدا أكثر إشراقا. أنا ممتن حقا لكل واحد منكم على مساهماتكم وحماسكم وتفانيكم في هذا المسعى.

مع خالص التقدير،

د. انطوان جان البرخش



مشاريع

مبادرات شخصية

"من أجل الصالح العام"

## Joun Development Projects

"Pro Bono Publico"

Dr Antoine J. Burkush, PhD

رؤية واحدة، هوية واحدة، مجتمع واحد



## Preface

In a world where rapid change is the new normal, the importance of strategic, sustainable, and community-centered development is paramount. Joun, with its rich cultural heritage, natural beauty, and resilient community, stands at a crossroads—one that presents both challenges and extraordinary opportunities. As we look toward Joun’s future, it is essential that our plans honor the town’s heritage, respond to today’s needs, and set a course for future generations to thrive.

This series of proposals is the result of a deeply collaborative effort to envision Joun’s path forward. Each plan reflects input from residents, local stakeholders, and community leaders, resulting in a shared vision that is both ambitious and respectful of our town’s unique identity. These proposals encompass a comprehensive range of initiatives, from infrastructure and economic development to cultural preservation and environmental stewardship, with each component tailored to address Joun’s specific strengths, challenges, and aspirations.

Our proposals emphasize a commitment to public infrastructure improvements, economic empowerment, environmental sustainability, and cultural continuity. From plans to enhance recreational facilities and community services to initiatives for sustainable tourism and green energy, each proposal aims to make Joun a model of progressive yet grounded development. The ultimate goal is to create a vibrant, inclusive, and resilient community—one that embodies the values, dreams, and talents of its people.

I extend my heartfelt gratitude to everyone who has contributed to this vision. Your dedication, ideas, and insight have been invaluable, illuminating the pathway to a future that aligns with Joun’s core values while embracing growth and innovation. These proposals are an invitation to all residents of Joun to imagine, participate, and help build a community that harmonizes tradition with the possibilities of tomorrow.

As you review this collection, I encourage you to see not just plans, but a vision for what Joun can become. Let us move forward together, translating these ideas into action, and creating a brighter, thriving, and unified future for Joun.

With deep respect and optimism,

Dr Antoine J. Burkush, PhD

## مقدمة

في عالم حيث التغيير السريع هو الوضع الطبيعي الجديد ، فإن أهمية التنمية الاستراتيجية والمستدامة التي تركز على المجتمع أمر بالغ الأهمية. تقف جون ، بتراتها الثقافي الغني وجمالها الطبيعي ومجتمعها المرن ، على مفترق طرق - مفترق طرق يمثل تحديات وفرصا غير عادية. بينما نتطلع إلى مستقبل جون ، من الضروري أن تكرم خططنا تراث المدينة ، وتستجيب لاحتياجات اليوم ، وتضع مسارا للأجيال القادمة لتزدهر.

هذه السلسلة من المقترحات هي نتيجة جهد تعاوني عميق لتصور مسار جون إلى الأمام. تعكس كل خطة مدخلات من السكان وأصحاب المصلحة المحليين وقادة المجتمع ، مما يؤدي إلى رؤية مشتركة طموحة وتحترم الهوية الفريدة لمدينتنا. تشمل هذه المقترحات مجموعة شاملة من المبادرات ، من البنية التحتية والتنمية الاقتصادية إلى الحفاظ على الثقافة والإشراف البيئي ، مع تصميم كل مكون لمعالجة نقاط القوة والتحديات والتطلعات المحددة لجون.

تؤكد مقترحاتنا على الالتزام بتحسين البنية التحتية العامة ، والتمكين الاقتصادي ، والاستدامة البيئية ، والاستمرارية الثقافية. من خطط تعزيز المرافق الترفيهية والخدمات المجتمعية إلى مبادرات السياحة المستدامة والطاقة الخضراء ، يهدف كل اقتراح إلى جعل جون نموذجا للتنمية التقدمية والمرتكزة. الهدف النهائي هو إنشاء مجتمع نابض بالحياة وشامل ومرن - مجتمع يجسد قيم وأحلام ومواهب شعبه.

وأعرب عن خالص امتناني لكل من ساهم في هذه الرؤية. لقد كان تفانيك وأفكارك ورؤيتك لا تقدر بثمن ، مما يضيء الطريق إلى مستقبل يتماشى مع القيم الأساسية لجون مع احتضان النمو والابتكار. هذه المقترحات هي دعوة لجميع سكان جون للتخيل والمشاركة والمساعدة في بناء مجتمع ينسق التقاليد مع إمكانيات الغد.

أثناء مراجعتك لهذه المجموعة ، أشجعك على رؤية ليس فقط الخطط ، ولكن رؤية لما يمكن أن يصبح عليه جون. دعونا نمضي قدما معا، ونترجم هذه الأفكار إلى أفعال، ونخلق مستقبلا أكثر إشراقا وازدهارا وموحدا لجون.

مع الاحترام العميق والتفاؤل،

د. انطوان جان البرخش

# **PROPOSAL TO ESTABLISH JOUN HEALTH CARE CENTRE (JHCC)**

## EXECUTIVE SUMMARY

Access to healthcare is a fundamental human right, yet many individuals and communities in rural or remote areas lack adequate facilities and services. In response to this pressing need, a grant proposal has been developed to establish a town health care facility in Joun. The Proposal to Establish Joun Health Care Centre (JHCC) aims to provide essential healthcare services to the community of Joun and the surrounding towns and address the various health challenges faced by residents in the area.

The project addresses the critical issue of access to healthcare in the town of Joun. Lack of sufficient healthcare facilities and services in the area has resulted in limited access to essential medical care for the residents. The establishment of the JHCC will help bridge this gap and provide quality healthcare services to the community. The Centre will offer a range of direct services, including lab tests, emergency services, and patient health records management.

The JHCC will also implement a Project Volunteers Program, focusing on community health and disease prevention services. This program will engage volunteers to raise awareness about important health issues, provide health education and counseling, and promote healthy behaviors within the community. By involving community members in the delivery of healthcare services, the JHCC aims to foster a sense of ownership and responsibility for health among the residents of Joun and the Chouf Region.

Furthermore, the goals and objectives of the community health and disease prevention services at the JHCC are centered around improving the overall health and well-being of the community. By focusing on preventive measures and health promotion, the Centre aims to reduce the incidence of common diseases and health conditions in the area. The clientele of the community health services will include residents of all ages and backgrounds, with a particular emphasis on vulnerable populations such as children, the elderly, and individuals with chronic health conditions.

The methods employed by the JHCC to deliver community health and disease prevention services will be evidence-based and tailored to the specific needs of the community. This may include health screenings, vaccination campaigns, health education workshops, and outreach programs to underserved areas. The staff and administration of the Centre will be trained professionals with experience in public health, nursing, and community health management.

In terms of available resources, the JHCC will rely on a combination of funding sources, including government grants, donations, and partnerships with local businesses and organizations. The Centre will also collaborate with other healthcare facilities and providers in the area to ensure comprehensive healthcare services for the residents of Joun. Additional resources needed for the successful implementation of the project will be identified and secured through fundraising efforts and community support.

In conclusion, the Proposal to Establish Joun Health Care Centre (JHCC) represents a significant step towards improving access to healthcare in the town of Joun. By offering a range of essential healthcare services and engaging the community in disease prevention efforts, the JHCC aims to promote health and well-being for all residents. Through collaboration with stakeholders and the dedication of its staff and volunteers, the Centre has the potential to make a positive impact on the health of the community for years to come.

## BACKGROUND

# What are the components of Grant Proposals to establish a town health care facility?

## Grant Proposal for a Town Health Care Facility

### 1. Executive Summary

- Project Title: Town Health Care Facility
- Project Location: [Specify the location]
- Project Duration: [Specify the timeline]
- Total Budget: [Specify the budget]
- Funding Requested: [Specify the amount requested]
- Project Summary: Briefly describe the project, its goals, and the expected outcomes.

### 2. Introduction

- Background: Provide context about the town and the need for a health care facility.
- Problem Statement: Explain the current health care challenges and how the project will address them.
- Objectives: List the main objectives of the project, such as improving access to health care, enhancing health outcomes, and promoting community well-being.

### 3. Project Description

- Project Activities: Detail the specific activities that will be undertaken, such as site selection, construction, staffing, and community engagement.
- Timeline: Provide a detailed timeline of the project phases from planning to implementation.
- Expected Outcomes: Describe the expected benefits, such as improved health care access, reduced health disparities, and enhanced community health.

### 4. Technical Details

- Facility Design: Outline the design of the health care facility, including the number of rooms, types of services offered, and any special features.

- **Equipment and Technology:** List the medical equipment and technology that will be used in the facility.
- **Maintenance Plan:** Describe the maintenance plan to ensure the long-term sustainability of the facility.

## **5. Budget**

- **Detailed Budget:** Break down the budget into categories such as construction, equipment, staffing, and administrative costs.
- **Funding Sources:** List any other funding sources or in-kind contributions.

## **6. Community Engagement**

- **Stakeholder Involvement:** Describe how the community will be involved in the project, including any partnerships with local organizations.
- **Education and Outreach:** Outline plans for educating the community about the benefits of the health care facility and how they can participate.

## **7. Evaluation and Monitoring**

- **Performance Metrics:** Define the metrics that will be used to evaluate the success of the project.
- **Monitoring Plan:** Describe how the project will be monitored and evaluated over time.

## **8. Conclusion**

- **Summary:** Recap the key points of the proposal and reiterate the importance of the project.
- **Call to Action:** Encourage the funder to support the project and explain the next steps.

## **General Description of the Project: Proposal to Establish Joun Health Care Centre (JHCC)**

Access to healthcare services is critical to good health, yet residents in rural areas in Lebanon face a variety of access barriers.

Access means “the timely use of personal health services to achieve the best possible health outcomes.”.

### **INFORMATION / STATEMENT OF PROBLEM**

Major obstacles to towns health in the rural areas in Lebanon world include infections, parasitic diseases, malnutrition and the risks associated with low birth weight and high fertility.

A serious problem exists in the rural villages of Mount Lebanon Mohafazah (and other the Mohafazaat) of common illness and infections that are attributable to modest income households unable to go through expensive health services diagnostics. Though hospital services are available in the cities and large towns such as Saida and Chehim, it is apparent that some residents do not have an understanding of th importance of getting checked.

The use of volunteers to provide basic community health and disease prevention services is a new concept in Lebanon and can be capitalized upon as a viable way to provide trained manpower for the offering of community health services. The selection and training of student volunteers is conducted autonomously at each university.

### **Access to healthcare is important for:**

- Overall physical, social, and mental health status.
- Disease prevention.
- Detection, diagnosis, and treatment of illness.
- Quality of life.
- Avoiding preventable deaths.
- Life expectancy.



## Two Points to take into consideration:

Rural residents in any town in Lebanon may often encounter barriers to healthcare that limit their ability to obtain the care they need.

For instance, to have healthcare access, rural residents must also have:

- **Financial** means to pay for services, such as health or dental insurance that is accepted by the provider.
- **Confidence** that they will receive quality care.

## Location: Proposed only

A community-based **Joun Health Care Centre (JHCC)** or "Healthy Iqlim Al Kharroub Residents" project will be established in the Town of Joun, in the Chouf District, in Mount Lebanon). will focus on providing Direct Services and Lab Tests in addition to basic community health and disease prevention services to the residents and children of the town of Joun as well as the residents of the surrounding towns in the Iqlim Al Kharroub Region, especially those from the modest income brackets. It is expected that through the providing of basic health services to the Iqlim Al Kharroub Region that it will be possible to have a direct and positive effect on the wellbeing of the all of the Region's communities.

## Joun Health Care Centre's Direct Services and Lab Tests

Ideally, Joun residents should be able to conveniently and confidently access services such as primary care, dental care, behavioral health, emergency care, and public health services. May be this will materialize in the not too far future.

These are services that Joun Health Care Centre's staff must provide directly:

The Centre's staff must provide diagnostic and therapeutic services commonly furnished in a physician's office.

The Centre must be able to provide the following **six laboratory tests**.

1. Chemical examinations of urine.
2. Hemoglobin or Hematocrit.
3. Blood sugar.

4. Examination of stool specimens for occult blood.
5. Pregnancy test.
6. Primary culturing for transmittal.

## Emergency Services:

**Joun Health Care Centre's** must be able to provide "first response" services to common life-threatening injuries and acute illnesses. In addition, the Centre must have access to those drugs used commonly in life-saving procedures.

## Patient Health Records:

The Centre must maintain an accurate and up-to-date record keeping system that ensures patient confidentiality.

Records must include the following information:

- Identification data
- Physical exam findings
- Social data
- Consent forms
- Health status assessment
- Physicians orders
- Consultative findings
- Diagnostic and laboratory reports
- Medical history
- Signatures of the physician or other health care professionals

### Protection of Record Information Policies

In addition to maintaining the confidentiality of patient information, the Centre must have written policies and procedures that govern the use, removal and release of information.

## Project Volunteers Program: Community health and disease prevention services

**In addition to Emergency and direct services mentioned above the Centre will be providing basic community health and disease prevention services to the Iqlim Al Kharroub Residents**

**In this regard Joun Health Care Centre** in Joun will utilize volunteers who are Medical students in the Chouf and Iqlim Region. Each student will be expected to successfully participate in a 4-week training program at the beginning of their work with the CENTRE. This training program will provide basic community health and disease prevention services for patients and information on adult health and wellbeing methods. Student volunteers who demonstrate proficiency during the initial training program will be invited to participate in an advanced training program to learn effective basic community health and disease prevention services counseling techniques. Each student volunteer will be expected to contribute 3-5 hours each week and to continue with JOUN HEALTH CENTRE for a period of not less than 6 months.

**Joun Health Care Centre** will operate with 6 full and part time staff members. In addition, a Governing Board made up of community leaders and university staff will operate to provide overall sanctioning of the Center's operation. Periodic evaluations will be conducted to assess the value of **Joun Health Care Centre** on:

- Helping the student volunteers to become effective basic health services providers
- The development of new understandings on the part of local communities and
- The improvement of the wellbeing of children in the region.

## Goals and Objectives of the Community health and disease prevention services

There are two major goals for the "Healthy Iqlim Al Kharroub Residents" Project and specific objectives within each of the goals.

Goal #1 - To reduce the degree of basic health issues among modest income brackets of the region including the children.

Objective #1.1 - To provide mothers in Iqlim Al Kharroub with relevant health services and critical information regarding health and nutrition

Objective #1.2 - To assist mothers in Iqlim Al Kharroub in learning how to effectively apply health and nutrition information in helping their young children to be healthier.

Objective #1.3 - To teach mothers in Iqlim Al Kharroub how to evaluate changes in the health of their young children.

Goal #2 - To effectively use volunteers as a major factor in helping people to learn.

Objective #2.1 - To recruit a group of undergraduate students (15-20 students each semester) at recognized Lebanese Universities to become volunteers in the **Joun Health Care Centre** Project.

Objective #2.2 - To provide a 4-week training program for the volunteers that covers a) basic health and nutritional information for mothers and b) health related prevention information on adult teaching methods.

Objective #2.3 - To place the students in the **Joun Health Care Centre** to offer tutoring services to region's residents and local mothers.

Objective #2.4 - To compare the type and degree of volunteer learning that takes place in the **Joun Health Care Centre** Project as compared to volunteer involvement with other centers.

## Clientele of the Community health and disease prevention services

There are two different clientele groups for this project.

The first, and primary, clientele are the modest income residents and mothers of young children who live in Iqlim Al Kharroub. This clientele group is represented in the project objectives for Goal #1.

The second clientele group are the students at recognized Lebanese Universities who will participate in the Project as volunteers. This clientele group is represented in the project objectives for Goal #2.

Both clientele groups are important and essential components of this project. It is expected that significant learning will take place for both clientele groups.

## Methods of the Community health and disease prevention services

The primary methods for achieving the goals and objectives of the Project will be:

- the creation of a Center in the town of Joun (a part of the Iqlim All Kharroub region of the Chouf) that will become a focal point for providing health services, disease prevention and critical health information including information on health, food and nutrition for young children through workshops and one-on-one counseling of mothers, and
- the development of a recruitment/training program and supervised practicum for student volunteers.

In addition, a Documentation/Dissemination Plan will be developed by staff to guarantee the systematic collection of information about the operation of the Project and provide the basis for sharing information with other similar projects.

## Staff/Administration of the Community health and disease prevention services

In addition to the Medical staff, the Project will employ three full-time and three-part time staff.

- Project Director (full time): Responsible for hiring project staff, overseeing project development and operation, establishing and maintaining links with local government agencies, and budget. The Project Director will be selected.
- Center Coordinator (full time): Responsible for establishing the community Center, developing working relationships with formal and informal community leaders, establishing links to community women's organizations, and scheduling of Center programs.
- Volunteer Coordinator (full time): Responsible for recruiting university health student volunteers, establishing and developing and offering training programs for volunteers, scheduling volunteers for service at the Center. The Volunteer Coordinator will have a background in basic health, food and nutrition.
- Project Evaluator (part time): Responsible for collecting entry level data regarding residents', mothers' health and nutrition information and conducting periodic assessment of changes in their level of knowledge, comprehension, and application of that information. Also responsible for developing and implementing a system for periodic formative evaluation of the work of the student volunteers.
- Center Assistant (part time): Responsible for maintaining the structure and appearance of the Center, routine correspondence, and other forms of communication with mothers in the community.

- **Graphic Artist (part time):** Responsible for creating illustrated posters to teach about disease prevention, food and nutrition information, layout/design of project publications, and development of volunteer recruitment and training materials.
- **Governing Board:** Made up of both community leaders and university staff. Responsible for sanctioning the operation of the Center and providing feedback to the Project Director on Center policies and operation.

## Available Resources for the Community health and disease prevention services

- **Building** - small building for the Center will be provided by the community head.
- **Volunteer Meeting/Training Room and Office** - will be provided by the Municipality of the town of Joun or via the Union of Municipalities UoM) and used for housing the Volunteer Coordinator and the training of volunteers.
- **Volunteer Coordinator (50%)** - this person is currently on the staff of the Department of Food and Nutrition as a part time staff member.

## Needed Resources for the Community health and disease prevention services

- **Personnel:** Two full time staff at 100% salary, one full time staff at 50% salary, three part-time persons at 50% salary.
- **Facilities:** To be provided as per above.
  - **Equipment:**
    - Duplicating machine (for preparation of informational educational materials)
    - Chairs and desks for three offices
    - Chairs and tables for a large classroom/community meeting room
    - Chalk board
    - Laptops or Desktops computers
- **Supplies:** Paper, pencils, chalk, duplicating supplies, and materials preparation.

## Budget: Of the Community health and disease prevention services (Does not include the Medical Staff Services)

Year 1 - Development of Center Operation and Recruitment/Training of First Group of Student Volunteers

- Personnel \$38,000

Project Director	Full time - 12 months	\$12,700
Center Coordinator	Full time - 12 months	\$8,500
Volunteer Coordinator*	Full time - 12 months	\$4,200
Project Evaluator	Part time - 12 months	\$4,900
Center Assistant	Part time - 12 months	\$4,200
Graphic Artist	Part time - 12 months	\$4,200

\*Note: Volunteer Coordinator is currently a 50% staff member of the Department of Food and Nutrition. The Project will pay the other 50% of this person's salary to bring her up to 100%.

- Development/Production of Educational Materials \$3,900
- Advertising/Promotion \$1,750
- Evaluation M\$8,500

YEAR ONE TOTAL \$45,200

Year 2 - Operation/Maintenance of Center and Recruitment/Training of Two Student Volunteer Groups

- Personnel (assumes 3% yearly increment) \$3,986
- Production of Educational Materials \$600
- Advertising/Promotion \$400
- Evaluation \$300

YEAR TWO TOTAL \$41,200

Year 3 and beyond (assume 3% yearly increment on Year 2 budget)

YEAR THREE TOTAL \$42,400

## EVALUATION PLAN of the Community health and disease prevention services

Project evaluation will be the responsibility of the Project Evaluator and consist of two different evaluative strategies - formative and summative.

**Formative Evaluation:** Primarily qualitative in nature, the formative evaluation will be conducted through interviews and open-ended questionnaires. Residents, mothers and student volunteers will be asked about the day-to-day operation of the Center, the topics covered in the volunteer training program, the attractiveness of the training materials, and other questions to provide feedback for the ongoing improvement of the operation of the Project. The Project Evaluator will meet regularly with project staff to share findings from the formative evaluation effort. Periodic reports will be prepared that identify the major findings of the formative evaluation and how they have been used to improve Project operation.

**Summative Evaluation:** Primarily quantitative in nature, the summative evaluation will begin with the establishment of baseline data at the beginning of the Project (using a random sample of residents, mothers of young children to assess their health and disease prevention, food and nutrition knowledge) and then be conducted at 6 month intervals (just prior to each group of volunteers completing their Project service). Data for the summative evaluation will focus on the two primary goals of the project and the objectives of each.

### Goal #1

- Pre/post tests of knowledge gain on the part of the residents, mothers of young children in health and nutrition information (Objective 1.1).
- Selected interviews of residents, mothers of young children to assess their ability to effectively apply health and nutrition information (Objective 1.2).
- Selected interviews of residents, mothers of young children to evaluate changes in the health of their household and that of their children (Objective 1.3).

### Goal #2



- Records of number of students involved in the project (Objective 2.1).
- Documentation of agendas/attendance rosters from all training programs (Objective 2.1).
- Documentation of number of mothers served and number of volunteer hours recorded at the JOUN HEALTH CENTRE (Objective 2.3).
- Comparative analysis of Goal #2 data with similar data from similar centers if available (Objective 2.4)

A yearly report will be issued that presents the formative and summative findings.

## TIME LINE (First Year)

### Month One

- Advertising of Project staff positions
- Meetings with community leaders
- Meeting with university administrators

### Month Two

- Interviewing of candidates for Project staff positions
- Finalizing location of Center

### Month Three

- Selection/hiring of Project staff members
- Preparation for Center operation

### Month Four - Six

- Preliminary advertising of Center operation
- Hosting community meetings at Center
- Collection of baseline data on mothers of young children
- Recruitment/selection/training of student volunteers

### Month Seven - Twelve

- Conducting of regular formative evaluation
- Final summative evaluation at end of twelfth month

## Economic Impact of Community Health Centers

Community health centers funded by grants have proven to have a substantial economic impact. They not only provide essential health services but also contribute to local economies by creating jobs and supporting local businesses<sup>4</sup>.

International track records highlight the significant role that grant funding plays in establishing and sustaining community health care facilities.

## Examples of successful funded health care projects in Lebanon

Here are some examples of successful health care projects in Lebanon that have been funded by international donors:

### 1. Lebanon Health Resilience Project

This project, in collaboration with the World Bank, aims to increase access to quality health care services for poor Lebanese and displaced Syrians. The project focuses on upgrading primary health care centers, training health workers, and improving public hospitals. It builds on the success of the Emergency Primary Healthcare Restoration Project (EPHRP), which provided essential health services to 150,000 poor Lebanese<sup>1</sup>.

### 2. Lebanon Humanitarian Fund (LHF)

The LHF, managed by the United Nations, allocated \$6 million to support vulnerable populations in Lebanon. This funding supports various health-related initiatives, including child protection, gender-based violence prevention, and education assistance. The projects target Lebanese, Syrian refugees, Palestine refugees, and migrants, focusing on those most in need<sup>2</sup>.

### 3. CARMAH Project by ANERA

The CARMAH (Chronic Disease Access to Medicines and Health) project, funded by international donors, aims to expand access to medicines for vulnerable populations in Lebanon. In its second year, the project plans to support over 50 additional healthcare centers, benefiting at least 20,000 new patients from refugee and Lebanese communities. It is projected to distribute approximately 25 million defined daily doses of chronic illness treatments<sup>3</sup>.

## 4. CARE International's Health Initiatives

CARE International has been active in Lebanon, providing essential health services to refugees and host communities. Their initiatives include water, sanitation, hygiene, cash assistance, and non-food items like mattresses and kitchen sets. These efforts help meet the basic and pressing needs of newly arrived families in Mount and North Lebanon<sup>4</sup>.

These examples demonstrate the impact of international donor funding on improving health care access and quality in Lebanon. If you need more detailed information on any specific project or assistance with your own health care project, feel free to ask!

## More Possible Funding Resources in Lebanon:

Finding grant opportunities for your community health care project involves several steps. Here are some strategies and resources to help you get started:

### 1. Government Grants

- **Lebanese Government:** Check with local and national government agencies in Lebanon for health care funding opportunities. The Ministry of Public Health often has programs and grants available for health care projects.
- **International Agencies:** Organizations like the World Bank and the United Nations offer grants for health care projects in Lebanon. For example, the Global Concessional Financing Facility has funded health resilience projects in Lebanon<sup>1</sup>.
- **The Sustainable Development Goals in Lebanon**
- 
- The Sustainable Development Goals are a global call to action to end poverty, protect the earth's environment and climate, and ensure that people everywhere can enjoy peace and prosperity. These are the goals the UN is working on in Lebanon:

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### 2. Foundations and NGOs

- **Mérieux Foundation:** This foundation supports community health centers in Lebanon, particularly in rural areas like the Bekaa Valley. They have partnered with local NGOs to improve health care access<sup>2</sup>.
- **Lebanon Area Foundation:** Although primarily focused on Lebanon, Missouri, the Community Cares program offers a model for how local foundations can support health care projects<sup>3</sup>.

### 3. International Donors

- **USAID:** The United States Agency for International Development provides grants for health care projects in developing countries, including Lebanon.
- **European Union:** The EU has various funding programs for health care and development projects in Lebanon.

#### 4. Online Grant Databases

- **Grants.gov:** This is a comprehensive database of U.S. government grant opportunities. While it primarily lists U.S.-based grants, some international opportunities are also available.
- **Funds for NGOs:** This website offers a list of grant opportunities for NGOs worldwide, including health care projects.

#### 5. Local Partnerships

- **Municipalities and Local Organizations:** Partnering with local municipalities and organizations can open up additional funding opportunities. They may have access to regional or national grants that can support your project.

#### 6. Corporate Social Responsibility (CSR) Programs

- **Private Sector:** Many corporations have CSR programs that fund health care projects. Reach out to companies with a presence in Lebanon to explore potential partnerships.

#### 7. Networking and Conferences

- **Health Care Conferences:** Attending conferences and networking events can help you connect with potential funders and learn about new grant opportunities.

By leveraging these resources and strategies, you can increase your chances of finding suitable grant opportunities for your community health care project. If you need more specific information or assistance with any of these steps, feel free to ask!

#### About The Lebanon Humanitarian Fund (LHF)

**Source:** <https://www.unocha.org/lebanon/about-lebanon-humanitarian-fund>

The Lebanon Humanitarian Fund (LHF) is one of OCHA's Country-Based Pooled Funds (CBPF), established in 2014 following the decentralization of the Regional Syria Fund. Today it is a well-capacitated and flexible CBPF which, under the leadership of the Humanitarian Coordinator, continues to support the most vulnerable in Lebanon.

The Fund's activities are aligned with coordinated in-country humanitarian response planning, including the Lebanon Crisis Response Plan (LCRP), allowing the fund to be a predictable and complementary source of humanitarian financing, making timely and flexible funding available for life-saving humanitarian activities.

Since its establishment, the LHF has allocated over US \$80 million to support critical humanitarian needs in Lebanon, almost 90 percent of which went to national and international NGOs. As a result of generous donor contributions totaling \$22 million in 2020, the LHF launched four evidence-based multi-sectoral allocations for a value of \$16.3 million through 21 partners and 23 projects targeting beneficiaries with acute vulnerabilities. In line with the LHF's person-centered approach, all funded projects targeted those most vulnerable profiles of people, including the elderly, people with special needs and those with chronic medical conditions.

As the overall situation in Lebanon continued to deteriorate as a result of the ongoing socio-economic crisis, the COVID-19 pandemic and the impact of the 4th August explosions in Beirut, the LHF has proven a flexible and accountable funding mechanism to respond to new and growing needs in Lebanon. Recent allocations supported the critical life-saving needs of most vulnerable people across all populations cohorts, mitigating against their increase vulnerability as a result of Lebanon's multiple crises.

Additional information on the LHF is available at: [Data on Country-Based Pooled Funds' activities](#) is also available at the [Country-Based Pooled Funds Data Hub](#).

## **Objectives**

Inclusiveness, flexibility, timeliness, efficiency, partnership, transparency and value for money are the principles which underpin the use of the LHF. The LHF enables the delivery of humanitarian assistance by specifically focusing on:

- Assisting all vulnerable communities in Lebanon regardless of status, nationality, gender or age
- Responding in a timely manner to any unforeseen humanitarian emergency
- Addressing the challenges of underfunded sectors and ensuring the continuity of services provided to the most vulnerable
- Empowering NNGOs and increasing their outreach
- Ensuring a reserve fund for unforeseen emergencies.

## Eligibility

**Source:** <https://www.unocha.org/lebanon/eligibility>

Eligible Lebanon Humanitarian Fund (LHF) recipients include NGOs, UN agencies, the Red Cross/Crescent and organizations providing support to humanitarian activities in Lebanon. Eligibility is determined by the comparative advantage of each organization to deliver effective response.

Interested NGOs participate in a three-step eligibility assessment process to become LHF partners and apply for funding under the LHF allocations:

### **Step 1: GMS registration**

Prospective partners must obtain access to the Grant Management System (GMS) where they will later submit the full project proposal. To request access to the system, prospective partners should contact the HFU attaching the following:

1. A copy of registration certificate indicating the organization's full name
2. A bank letter including account name and banking information

### **Step 2: Due Diligence (DD)**

Once granted access to the GMS, prospective partners should submit a full project proposal via the online system. A thorough review of DD applications and documents is then performed to ensure that partners meet the minimum requirements.

### **Step 3: Internal Capacity Assessment (ICA)**

The capacity assessment aims to evaluate the NGO's capacity in terms of institutional, managerial, financial and technical expertise. It allows the Humanitarian Financing Unit (HFU) to determine the risk level of the NGO (high, medium or low) and to decide on the required control mechanisms which will be applied if the project has been awarded.

## About CARE International

**Source:** <https://www.care-international.org/our-work/where-we-work/lebanon>

### **What CARE International does in Lebanon**

CARE Lebanon meets refugees' and host communities' most basic and pressing needs, providing water, sanitation, hygiene, cash assistance, and non-food items in the form of mattresses, blankets, kitchen sets, and more to newly arrived families in the areas of Mount and North Lebanon.

We also work with municipalities to improve water supply and sanitation infrastructure for refugees as well as for their hosts. In the winter, CARE Lebanon helps families to prepare for and cope with the cold weather, distributing cash for heaters and fuel, as well as blankets and floor mats.

In August 2020, two explosions rocked Beirut, Lebanon's capital city and largest port. Hundreds died and thousands were injured or lost their homes. Today, the destruction of the port is still causing supply chain disruptions. In response, CARE Lebanon distributed food, cash, and hygiene materials and provided psychosocial support to survivors.



# BUSINES PLAN FOR ESTABLISHING A COMMUNITY HEALTH CENTER (CHC) IN JOUN

Here's a detailed business plan for establishing a Community Health Center (CHC) in Joun, which will offer accessible and comprehensive healthcare services to local residents. This center aims to improve healthcare access, focusing on primary care, preventive services, and mental health support.

## Business Plan for Joun Community Health Center

### Executive Summary

The Joun Community Health Center (JCHC) will provide affordable and quality healthcare services to Joun's residents, with a particular focus on low-income and underserved populations. This non-profit center will offer primary care, mental health services, dental care, and preventive programs aimed at improving overall community health. To address local healthcare gaps, JCHC will implement a sliding fee scale, ensuring no one is turned away due to inability to pay, and work with local and regional partners to offer essential services.

### Mission Statement

To enhance the health and well-being of Joun's residents by providing affordable, accessible, and high-quality healthcare services in a welcoming and community-oriented environment.

### Objectives

1. **Expand Access to Primary Healthcare:** Offer a range of medical services for individuals and families, with particular focus on underserved populations.
2. **Promote Preventive Care and Wellness:** Provide screenings, vaccinations, wellness programs, and health education to encourage proactive health management.
3. **Support Mental and Dental Health Needs:** Offer accessible mental health counseling, dental care, and crisis intervention.
4. **Ensure Financial Sustainability:** Generate revenue through government funding, patient fees, grants, and donations to cover operating costs and support subsidized care for low-income patients.

## Market Analysis

### Target Market

- **Local Residents:** Individuals and families in Joun needing accessible, high-quality healthcare services.
- **Low-Income and Uninsured Residents:** People without health insurance or with limited access to healthcare, who will benefit from affordable care options.
- **Seniors and Elderly Population:** Older adults who need regular check-ups, chronic disease management, and preventive services.

### Market Need

- Joun currently lacks a dedicated healthcare facility that offers affordable, accessible primary and preventive care. A community health center would fill this gap, helping reduce healthcare disparities and promote overall wellness in the region.

## Services and Programs

### 1. Primary Care Services

- **General Medicine:** Routine check-ups, illness diagnosis and treatment, and chronic disease management.
- **Pediatric Care:** Immunizations, well-child visits, and health education for families.
- **Women's Health:** Preventive screenings, reproductive health services, and prenatal and postnatal care.
- **Geriatric Care:** Support for aging-related health needs, including mobility assessments and chronic illness management.

### 2. Preventive and Wellness Services

- **Vaccination Programs:** Essential immunizations for children, adults, and seniors.

- Health Screenings: Regular screenings for diabetes, hypertension, cancer, and cholesterol.
- Health Education and Workshops: Topics on nutrition, exercise, diabetes prevention, and smoking cessation.

### **3. Mental Health and Counseling Services**

- Individual and Family Counseling: Providing support for emotional and mental well-being.
- Group Therapy: Support groups for addiction, chronic illness, stress management, and anxiety.
- Crisis Intervention and Referral: Immediate support for individuals experiencing mental health crises.

### **4. Dental Care Services**

- Preventive Dental Care: Routine cleanings, exams, and dental hygiene education.
- Basic Restorative Services: Fillings, extractions, and emergency dental care.
- Pediatric Dental Care: Oral health education, preventive care, and treatment for children.

### **5. Outreach and Community Health Programs**

- Mobile Clinics: Offering health screenings and vaccinations in nearby rural areas.
- School and Workplace Health Programs: Onsite check-ups, health fairs, and wellness sessions.
- Chronic Disease Management Programs: Education and support for managing conditions like diabetes and heart disease.

## Facility Design and Layout

1. Reception and Waiting Area: Comfortable seating and registration area, with patient information resources.
2. Primary Care Examination Rooms: Consultation rooms for general and specialty care.
3. Mental Health Counseling Rooms: Private, soundproofed rooms for counseling sessions.
4. Dental Clinic Area: Equipped dental examination rooms with necessary dental equipment.
5. Community Room: Multi-purpose room for workshops, support groups, and health education events.
6. Pharmacy: In-house pharmacy offering prescription medications at reduced rates.

## Financial Plan

### Startup Costs

Category	Estimated Cost (USD)	Description
Facility Acquisition/Renovation	\$250,000 - \$350,000	Purchase, renovation, and setup
Medical and Dental Equipment	\$120,000 - \$180,000	Diagnostic tools, dental equipment
Pharmacy Setup	\$20,000 - \$30,000	Medication storage and management
IT and Health Record Systems	\$25,000	Computers, electronic health records
Initial Operating Reserve	\$50,000	Reserve for initial operational expenses

Total Startup Costs: \$465,000 - \$635,000

## Monthly Operating Costs

Category	Monthly Cost (USD)	Annual Cost (USD)
Staff Salaries	\$20,000 - \$25,000	\$240,000 - \$300,000
Medical Supplies	\$3,000	\$36,000
Utilities and Maintenance	\$2,500	\$30,000
Insurance	\$1,500	\$18,000
Marketing and Community Outreach	\$700	\$8,400
Miscellaneous Supplies	\$500	\$6,000

Total Monthly Operating Costs: \$28,200 - \$32,200

Total Annual Operating Costs: \$338,400 - \$386,400

## Revenue Streams

### 1. Patient Fees

- Primary Care Visits: Average of 500 visits/month at \$25/visit (accounting for sliding scale) = \$12,500/month
- Mental Health Counseling: Average of 150 sessions/month at \$20/session = \$3,000/month
- Dental Services: Average of 200 patients/month at \$30/visit = \$6,000/month

Total Monthly Service Revenue = \$21,500

### 2. Government and Public Health Grants

- Annual Health Grant: \$75,000 - \$100,000 for community health programs

### 3. Pharmacy Sales

- Pharmacy Sales: \$5,000/month

#### **4. Donations and Community Fundraising**

- Annual Goal: \$30,000 - \$50,000

Total Monthly Revenue = \$26,500

Total Annual Revenue (with grants and donations) = \$338,000 - \$418,000

Projected Annual Profit/Loss = \$-48,400 to \$31,600

## **Marketing Strategy**

1. **Community Engagement and Partnerships:** Establish partnerships with local schools, businesses, and nonprofits to increase outreach and referral networks.
2. **Online Presence and Education:** Use a website and social media to inform residents about available services, events, and health tips.
3. **Health Fairs and Open Houses:** Host community events to promote the center's services, offer free health screenings, and engage with local residents.
4. **Sliding Fee Scale Promotion:** Communicate widely about the center's sliding fee scale, ensuring that no resident is deterred by financial barriers.

## **Management and Staffing**

1. **Executive Director:** Oversees center operations, financials, and strategic planning.
2. **Primary Care Physicians and Nurses:** Provide essential medical care, preventive services, and chronic disease management.
3. **Mental Health Counselor:** Offers counseling services and mental health education.

4. Dentist and Dental Hygienist: Provide preventive and emergency dental services.
5. Pharmacist and Pharmacy Technician: Manage pharmacy services and medication distribution.
6. Community Outreach Coordinator: Manages health programs, community engagement, and marketing efforts.
7. Administrative and Support Staff: Handle patient registration, billing, and general operations.

## **Funding Sources**

1. Government Grants and Health Programs: Apply for health grants supporting rural and underserved community health services.
2. Nonprofit Health Foundations: Seek funding from health-focused foundations for community health initiatives.
3. Corporate Sponsorships and Donations: Engage local businesses and corporations as sponsors for specific programs.
4. Community Donations and Fundraising: Launch annual fundraising campaigns and offer a donor recognition program to engage local supporters.
5. Patient Revenue and Insurance Billing: Charge for services on a sliding scale and bill insurance providers where applicable.

## **Conclusion**

The Joun Community Health Center will address a critical need for accessible healthcare, offering primary and preventive services that are financially accessible to all residents. With a comprehensive range of healthcare and outreach services, JCHC will work to elevate community health, build trust among residents, and provide much-needed mental and dental care options. Through effective management and diverse funding strategies, JCHC aims to become a sustainable health resource and a cornerstone for community wellness in Joun

## APPENDIX

### More Useful Resources:

About Rural Health Information Hub



**Source:** <https://www.ruralhealthinfo.org/topics/grantwriting>

### Community Vitality and Rural Healthcare

In rural communities, healthcare and the overall vitality of the community are intrinsically linked. A robust community supports and sustains quality health and social services for its residents by attracting and retaining well-trained and committed healthcare professionals. Communities with strong economies may be more likely to financially support their healthcare system through philanthropic giving and by investing in infrastructure that can be leveraged by the healthcare system. In return, a high-quality healthcare system can support economic and community development initiatives. Together, strong rural economies and rural healthcare systems can address the five domains of the Social Determinants of Health: economic stability, education, health and healthcare access, the built environment, and social cohesion.

This topic guide focuses on how community and economic development can complement health services in rural areas, how rural communities can identify and build on their unique assets, and how collaboration between various sectors can address challenges, including issues related to population health and public health.

### Frequently Asked Questions

- [What is community resilience and how does it affect the health of rural populations?](#)
- [What is asset-mapping and how does it contribute to rural community vitality?](#)
- How do healthcare services, facilities, and providers contribute to the economic vitality of rural communities?
- Why should local healthcare leadership be involved in community and economic development efforts and what role can they play?



- [How can the availability of healthcare services be leveraged in economic and community development efforts?](#)
- [How can communities illustrate the importance of healthcare to our local economy?](#)
- Where can our rural community find the resources to determine the economic impact of our healthcare sector or a component of the healthcare sector?
- Where can our community find training on economic impact and other tools to enhance our local healthcare services and ultimately enhance our local community?
- [How does the vitality of a rural community affect health workforce recruitment and retention?](#)
- What opportunities are available for rural communities to invest in their infrastructure to support their healthcare system?
- [Why is it important to consider the capacity of the local healthcare system to anticipate economic growth?](#)
- [What is the role of philanthropy and nonprofit organizations in community development?](#)
- Who can I contact regarding additional information and resources focused on community vitality and its effect on the healthcare system?

## How can I learn about funding opportunities for rural health-related organizations?

### Rural Aging in Place Toolkit

Welcome to the Rural Aging in Place Toolkit. The toolkit compiles evidence-based and promising models and resources to support organizations implementing aging in place in rural communities across the United States.

The modules in the toolkit contain resources and information focused on developing, implementing, evaluating, and sustaining rural aging in place programs. There are more resources on general community health strategies available in the [Rural Community Health Toolkit](#).

#### [Module 1: Introduction](#)

Overview of aging in place in the U.S. and unique challenges that rural communities face.

### Module 2: Program Models

Models for aging in place programs, from individual to community-level.

### Module 3: Program Clearinghouse

Examples of promising aging in place programs that have been implemented in rural communities.

### Module 4: Implementation

Important issues to consider and address when implementing a rural aging in place program.

### Module 5: Evaluation

Tools that can help with the evaluation of an aging in place program.

### Module 6: Funding & Sustainability

Resources to help with planning for the sustainability of an aging in place program.

### Module 7: Dissemination

Ideas and resources for disseminating findings from an aging in place program.

## Frequently Asked Questions

- What types of low-interest loan programs are available to rural healthcare facilities for capital investment projects?
- What are the major government grant programs that support capital projects for rural healthcare facilities?
- What is a loan guarantee and how can it help fund a capital project in a rural hospital or clinic?
- [What is an Essential Community Facility and how can it help rural healthcare facilities access capital?](#)
- [What is the Community Development Block Grant \(CDBG\) Program and how can it help rural facilities?](#)
- [Do foundations support capital projects?](#)
- Can for-profit healthcare facilities apply for grant funds, or are only nonprofit organizations eligible?
- What other avenues of funding are available to finance capital projects for rural medical facilities?
- What is a Community Development Financial Institution (CDFI) and how do they help rural healthcare facilities?
- [What are some strategies for seeking out capital funding?](#)

- What are some strategies for running a successful fundraising campaign for capital projects?
- [What is a capital stack, and how do you build one?](#)
- Are there funding programs that specifically support electronic health record implementation or telehealth projects in rural healthcare facilities?
- What are State Health Facilities Finance Authorities, and how can they help with capital funding?

## About Rural Health Clinics (RHCs)

- [Resources](#)
- [Organizations](#)
- [Funding & Opportunities](#)
- [News](#)
- [Events](#)
- [Models and Innovations](#)
- [About This Guide](#)

The Rural Health Clinic (RHC) program is intended to increase access to primary care services for patients in rural communities. RHCs can be public, nonprofit, or for-profit healthcare facilities. To receive Centers for Medicare & Medicaid Services (CMS) certification, they must be located in a rural area that is designated as an underserved or shortage area. RHCs are required to use a team approach to healthcare delivery, using physicians working with non-physician providers such as nurse practitioners (NPs), physician assistants (PAs), and certified nurse midwives (CNMs) to provide services. The clinic must be staffed at least 50% of the time with an NP, PA, or CNM. RHCs are required to provide outpatient primary care services, basic laboratory services, and be able to provide “first response” services to common life-threatening injuries and acute illnesses.

The main advantage of RHC status for rural providers is enhanced reimbursement rates for providing Medicare and Medicaid services. The CMS Medicare Learning Network Fact Sheet, [Information for Rural Health Clinics](#), describes how RHCs are reimbursed “an all-inclusive rate (AIR) for medically-necessary primary health services and qualified preventive health services furnished by an RHC practitioner.” For Medicaid, a [2016 CMS letter to state health officials](#) details how Medicaid visits are reimbursed under a Prospective Payment System (PPS) or an alternative payment methodology (APM), providing a payment that is at minimum the same amount required under a PPS. For specific Medicare regulations governing the RHC program, see the Centers for

Medicare and Medicaid Services (CMS) [Medicare Rural Health Clinics Center](#) or the National Association of Rural Health Clinics' [Rural Health Clinics - Rules and Guidelines](#).

The 2022 *Rural Monitor* article [Rural Health Clinic Program at 45 Years: Created for Access and Still Delivering Care](#) details the origin and history of the Rural Health Clinic program.

The Maine Rural Health Research Center's 2022 publication [Community Characteristics and Financial and Operational Performance of Rural Health Clinics in the United States: A Chartbook](#) provides an overview of RHCs in the United States, including clinical and operational data.

#### Frequently Asked Questions:

- Who do I contact if I have questions regarding the development and ongoing management of RHCs?
- [How do I get certified as an RHC?](#)
- [Are there any other considerations before becoming an RHC?](#)
- [What is the difference between a provider-based RHC and an independent RHC?](#)
- [Are there location requirements for RHCs?](#)
- If a location loses its geographic eligibility and/or shortage designation, is it possible to remain a Rural Health Clinic?
- [Are there special staffing requirements for RHCs?](#)
- [What resources are available to help RHCs maintain their primary care workforce?](#)
- [How does Medicare reimburse RHCs?](#)
- [How do states reimburse RHCs through Medicaid?](#)
- [Can RHCs be reimbursed for telehealth services?](#)
- [How does the Merit-Based Incentive Payment System \(MIPS\) affect RHCs?](#)
- [Can Rural Health Clinics be certified as Patient-Centered Medical Homes \(PCMHs\)?](#)
- [Can RHCs join Accountable Care Organizations \(ACOs\)?](#)
- What is the difference between a Federally Qualified Health Center (FQHC) and a Rural Health Clinic (RHC)?
- [How do RHCs meet the healthcare needs of rural Medicare beneficiaries?](#)

- What are the demographics and most common medical characteristics of RHC Medicare patients?

**END OF DOCUMENT**