Community health centers' new crisis: The need for backup power

June 11 2024, by Gabriela Aoun Angueira

The 2017 Tubbs Fire, which killed 22 people and destroyed 5,600 buildings, was already a stressful time at Alliance Medical Center's clinic here, as workers who picked grapes in the nearby vineyards streamed into the nonprofit community health center with burns, symptoms of smoke inhalation, and other crises.

Then, the power went out.

Work at the center, about 70 miles north of San Francisco ground to a halt. Staff couldn't access electronic health records or fill prescriptions. The refrigerators used to store medications stopped working, destroying $30,000 worth of vaccines.

"We'd be fine if we never had to live through that again, but the reality is we will," said Alliance CEO Sue Labbe. "But we'll be prepared now."

In May, the clinic—which serves 13,000 patients per year, mostly underinsured and uninsured essential workers who labor in the wine country's fields, hotels and restaurants—turned on a new rooftop solar and battery storage system. Dozens of solar panels, sprawled across the south- and west-facing sections of the clinic's green roof, generate enough power for the center's clinical areas, the server room that supports the electronic records, and the refrigerators that preserve crucial medications. Batteries stacked in metal closets in the building's back parking lot can keep things running for up to 15 hours after the sun goes down.
The humanitarian aid organization Direct Relief paid for the $500,000 system as part of its Power for Health initiative. The six-year-old program was created to help community health centers, serving the country's most vulnerable patients, confront more frequent power outages from extreme weather and fickle grid systems.

"We assume there will be power, but that presumption is no longer as valid as it was a few years ago," said Direct Relief President and CEO Thomas Tighe. "Places that are at a high risk of outages and where there is a high dependency on these health facilities should be prepared."

Direct Relief typically donates medications and supplies to these facilities and others like them. But when Hurricane Maria hit Puerto Rico in 2017, knocking out electricity in some areas for up to 11 months, clinics on the archipelago asked for something else: power.

"Before Maria, we were not a grantmaker for infrastructure projects," said Tighe. "But it was essential to doing our mission. You can't send drugs if they can't keep them cold, it's just a waste."

After that, Tighe realized unreliable power was a widespread problem for community health centers, which serve more than 30 million patients at 14,000 locations. Extreme weather was sometimes the culprit, but so were planned safety outages and rolling blackouts, when a utility cuts power during times of excess demand, like during a heat wave.

The impact could be financially crippling for clinics and devastating for patients who had few or no other options for healthcare. One of Direct Relief’s partners in New Orleans lost $250,000 of vaccines after Hurricane Ida in 2021.

Labbe said power became even more of an issue after the Tubbs fire, since the utility started preemptively shutting it off when the winds
picked up to prevent wildfires from igniting. Then there were the weather events themselves—not just fires, but winter rainstorms. "It came to when, not if, the disasters are coming fast and furious," she said. "This is the new normal if you're in an area prone to natural disasters."

The Power for Health grant covers the full cost of a rooftop solar and battery storage system and five years of maintenance support. Since 2018, Direct Relief has helped install systems on 19 centers nationwide. It has 48 projects under development in eight states and Puerto Rico, including at five tribal health facilities, with a goal to raise $100 million to fund more than 200 additional energy resilience projects across the United States.

Without outside support, it would be impossible for clinics like Alliance to afford systems, said Labbe. "We had been longing for solar, but we are a nonprofit with tight margins. It would come out of funds to pay for vulnerable patients," she said.

Adding rooftop solar and battery storage can save clinics money on their utility bills, too, especially in places where energy costs are rising. "The economic savings themselves will be like giving a grant every year," said Tighe.

Magali Nuñez has seen several blackouts in the three years that she has worked the front desk at the Healdsburg clinic. Once during a safety shutoff, a patient was in the middle of having his tooth drilled. He had walked to the clinic, so staff had to transport him by Lyft to another facility to finish the procedure. "It can get a little crazy," she said.

The new power source also opens up the possibility of helping patients in new ways, according to Rachel Farrell, founder and CEO of Harmony Health in Marysville, California, an hour's drive north of Sacramento. Harmony Health also installed a solar and storage system with a Direct
Relief grant this spring. The clinic had experienced dozens of outages in the last several years, so many that the clinic's vaccine fridge eventually blew out completely. "We lose so many vaccines, it's just terrible," she said.

On top of primary and behavioral care, Harmony Health offers a birthing center, substance abuse treatment, chiropractor and acupuncture services, and a free clinic for migrants at night.

Now that the backup power is installed, Farrell also wants to offer the clinic as a refuge for the community in times of extreme weather. She's known temperatures to reach well above 110 degrees in the summer, creating a dangerous situation if air conditioners shut off in an outage.

"We could be a cooling center during an emergency, where patients could come and have a safe place to be," she said.

© 2024 The Associated Press. All rights reserved. This material may not be published, broadcast, rewritten or redistributed without permission.


This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.