

Appendix 1: CHA Community Benefit Categories - SUMMARY

Chelsea Hospital supports our community partners with cash and in-kind gifts through our community benefit program. These gifts must be used for a community benefit purpose, to address a need identified in the hospital's community health needs assessment. This document outlines the relevant categories of community benefit activities, and should be used as a guide in program planning. The following information is from the Catholic Health Association's Guide for Planning and Reporting Community Benefit.

Community benefits are programs or activities that provide treatment or promote health and healing as a response to identified community needs and meet at least one of these objectives:

- Improve access to health care services.
- Enhance population health
- Advance increased general knowledge
- Relieve or reduce the burden of government to improve health.

A. Community Health Improvement Services

A1. Community Health Education

Community health education includes lectures, presentations, and other group programs and activities apart from clinical or diagnostic services.

Count if the program addresses a community need and meets a community benefit objective:

- Caregiver training for persons caring for family members at home.
- Community newsletters primarily intended to educate the community about health issues and free community health programs.
- Consumer health libraries.
- Education on specific diseases or conditions, such as diabetes or heart disease.
- Health fairs in response to community need (not primarily for marketing).
- Health law topics for consumers
- Health promotion and wellness programs.
- Health education lectures and workshops by staff to community groups.
- Parish and congregational health-related programs.
- Information provided through news releases and other modes to the media to educate the public about health issues (such as wearing bike helmets, treatment news, health resources in the community, etc.).
- School health-education programs (Note: Report school-based programs on health care careers and workforce enhancement efforts in F8. Report school-based health services for students in A2.).
- Web-based consumer health information.
- Worksite health education programs.

Support groups

- Support groups typically are established to address social, psychological, or emotional issues related to specific diagnoses or occurrences: diseases and disabilities, grief, infertility, support for patients' families and the community.

Self-help programs

- These include wellness and health-promotion programs for the community, such as those for smoking cessation, exercise, and weight loss.

Count if the program addresses a community need and meets a community benefit objective:

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- Anger management programs, Exercise classes, Smoking cessation programs, Stress management classes, weight loss and nutrition programs

A2. Community-Based Clinical Services

- These are health services and screenings provided on a one-time basis or as a special event in the community. They do not include permanent subsidized hospital outpatient services; report these in C3. As with other categories of community benefit, these programs and activities should be counted only if they are designed to meet identified community health needs.

Screenings

- Screenings are health tests conducted in the community as a public service, such as blood pressure measurements, cholesterol checks, and school physicals. They are a secondary prevention activity designed to detect the early onset of illness and disease and can result in a referral to any community medical resource. To be considered community benefit, screenings should provide follow-up care as needed, including assistance for persons who are uninsured and underinsured.

Count if the program addresses a community need and meets a community benefit objective:

- Screenings: Behavioral health, Blood pressure, Lipid profile and/or cholesterol, hearing, general, mammography, osteoporosis, skin cancer, stroke risk, eyes
- Health-risk appraisals.
- School and sports physical examinations (only if there is a demonstrated need).

One-time or occasionally held clinics

Count if the program addresses a community need and meets a community benefit objective:

- Blood pressure and/or lipid profile/cholesterol screening clinics.
- Cardiology risk factor screening clinics, Colon cancer screenings.
- Dental care clinics, Immunization clinics.
- Mobile units that deliver primary care to underserved populations on an occasional or one-time basis.
- One-time or occasionally held primary care clinics.
- School physical clinics to increase access to health care.

Do not count:

- Free school team physicals, unless there is a demonstrated need for this service.

A3. Health Care Support Services

Health care support services are provided by the hospital to increase access and quality of care in health services to individuals, especially persons living in poverty and those in other vulnerable populations.

Count if the program addresses a community need and meets a community benefit objective:

- Information and referral to community services for community members (not routine discharge planning).
- Chronic disease management of underinsured and uninsured persons open to the community that goes beyond routine discharge planning.
- Telephone information services, such as Ask a Nurse, medical and mental health service hotlines, and poison control centers.
- Physician referral programs for Medicaid and uninsured persons.

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- Transportation programs for patients and families to enhance patient access to care (include cab vouchers provided to low-income patients and families but not to increase the use of the facility's services).
- Assistance to enroll in public programs, such as SCHIP and Medicaid.
- Personal response systems, such as Lifeline.
- Translation/interpreter services that go beyond what is required by law or for accreditation. For example, translation services for a group that comprises less than a prescribed percentage of the population.

A4. Social and Environmental Improvement Activities

- These are programs and activities that improve the health of persons in the community by addressing the determinants of health, which includes the social, economic and physical environment. They may be related to activities in Category F.

Count:

- Removal of harmful materials (such as asbestos, lead) in public housing.
- Improving availability of fresh fruits and vegetables in areas known as "food deserts."
- Violence prevention.
- Coalitions involved in task-specific projects and initiatives that address community health needs.

A5. Prescription Pharmacy Programs

A7. Enrollment Assistance

A8. Safety Net Clinics - Non-billing

F. Community-Building Activities

Community-building activities improve the community's health and safety by addressing the root causes of health problems, such as poverty, homelessness, and environmental hazards. These activities strengthen the community's capacity to promote the health and well-being of its residents by offering the expertise and resources of the health care organization. Costs for these activities include cash and in-kind donations and expenses for the development of a variety of community-building programs and partnerships.

F1. Physical Improvements and Housing

- Neighborhood improvement and revitalization projects.
- Public works, lighting, tree planting, and graffiti removal.
- Housing rehabilitation, contributions to community-based assisted living, and senior and low-income housing projects.
- Habitat for Humanity activities.

F2. Economic Development

- Participation in an economic development council or chamber of commerce on issues impacting the community's health and safety.
- Grants to community businesses for the purpose of economic development to revitalize depressed community.

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F3. Community Support

- This includes efforts to establish or enhance community support networks, such as neighborhood watch groups and childcare cooperatives. Activities include both community-based initiatives and facility-based initiatives.
- Child care for community residents with qualified need.
- Mentoring programs to improve graduation rates.
- Neighborhood systems, such as watch groups.
- Youth asset development.

F4. Environmental Improvements

- Training community members to monitor and reduce environmental hazards.
- Neighborhood and community improvements to decrease litter.
- Safe removal or treatment of garbage and other waste products.
- Activities that reduce the environmental hazards caused by the organization, if their primary purpose is to improve community health, addresses an issue known to affect community health and must be subsidized by the organization, including:
 - Waste reduction to minimize incineration, which presents hazards to local community health by triggering asthma and other problems.
 - Purchasing cleaner energy from power plants in order to reduce harmful emissions that impact community health.
 - Eliminating use of toxic materials such as mercury.
 - Buying regionally grown or organic food to reduce transport-related emissions, non-organic pesticides and herbicides.

F5. Leadership Development and Leadership Training for Community Members

- Conflict resolution training.
- Community leadership development.
- Cultural skills training.
- Language skills development.
- Life or civic skills training programs.

F8. Workforce Development

- These programs address community-wide workforce issues – not the workforce needs of the health care organization, which should be considered human resource activities rather than community benefit.
- Recruitment of underrepresented minorities.
- Job creation and training programs.
- Participation in community workforce boards, workforce partnerships, and welfare-to-work initiatives.
- Partnerships with community colleges and universities to address the health care workforce shortage.
- Workforce development programs that benefit the community, such as English as a Second Language (ESL) training.
- School-based programs on health care careers.
- Community programs that drive entry into health careers and nursing practice.
- Health career mentoring projects such as job shadowing.