



# RELATIONSHIPS MATTER

## Community Benefit Connect: Community Benefit Panel Job Analysis

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# TABLE OF CONTENTS

EXECUTIVE SUMMARY	1
Community Benefit	1
Job Analysis	1
Background Research	2
Expert Panel Review	2
Development of the Knowledge Statements, Content Domains and Weightings	2
Knowledge Statements	2
Titles Used by Community Benefit Professionals	4
Summary	4
INTRODUCTION	6
Job Analysis Study and Adherence to Professional Standards	6
METHOD	8
1. Conduct of Planning Meeting	8
2. Development of the Tasks and Knowledge Statements	8
3. Expert Panel Review	9
4. Development of the Content Domains and Weightings	9
5. Other Findings	9
SUMMARY AND CONCLUSION	10
APPENDICES	11
Appendix A. Pre-Meeting Document	12
Appendix B. Task Force Committee	17
Appendix C. Task Force Committee Demographic Characteristics	18
Appendix D. Task Statements*	19
Appendix E. Knowledge Statements	22
Appendix F. Content Domains and Weightings	24
Appendix G. Titles Used by Community Benefit Professionals	25
Appendix H. Other Characteristics that Define the Community	26

# EXECUTIVE SUMMARY

## Community Benefit

Community benefit is a form of public trust that results in nonprofit hospitals obtaining tax-exempt status. Community benefit covers a full range of services and activities provided by nonprofit hospitals that address the cause and impact of health-related needs. According to the [Hilltop Institute](#), hospital community benefit refers to the initiatives and activities undertaken by nonprofit hospitals to improve health in the communities they serve. These services and activities must result in specific benefit to the community with the outcomes measured by the impact on the community. The community benefit standard includes a provision of care for the poor (charity care) but also must be thought of in larger terms to include the promotion of health. With the passage of the **Affordable Care Act**, the federal government now requires that all tax-exempt hospitals conduct a Community Health Needs Assessment every three years; develop an Implementation Strategy, based on identified significant health needs; measure the impact of community benefit programs; and report annually to the IRS on tax filing Form 990, Schedule H. [The Catholic Health Association \(CHA\)](#) notes that community benefit must respond to an identified community need and meet at least one of these criteria:

- + Improve access to health care services.
- + Enhance the health of the community.
- + Advance medical or health knowledge.
- + Relieve or reduce the burden of government or other community health efforts.

A program or activity is not considered community benefit, if it is:

- + Provided for marketing purposes.
- + Restricted to physicians and other hospital employees.
- + Required of all health care providers by hospital rules or standards.
- + Unrelated to community health or the mission of the hospital.

## Job Analysis

A job analysis, also called a *practice analysis* or a *role delineation study*, is an empirically-based study that describes the practice domains as well as identifies important tasks, knowledge and/or skills necessary for competent performance in a job role or occupation. This industry-recognized, well-documented process provides a valid and defensible foundation for an organization to use the outcomes from the study to generate a variety of products and services, as well as to make future decisions about a certificate or certificate program. A job analysis is also an appropriate and useful instrument to gather information to shape continuing education and professional development efforts.

## Background Research

The development of draft tasks and knowledge statements began with a scan of the literature. Sentinel articles that defined community benefit were reviewed with Prometric staff extracting task and knowledge statements to define the role of the professional working in this field. *Community Benefit Connect* provided a wealth of information used for this study. Background information was reviewed to assist in the development of the initial tasks and knowledge statements. The review of the literature was supplemented by analysis of sample job descriptions provided by persons currently working in community benefit, including job descriptions submitted by the expert panel members.

## Expert Panel Review

Community Benefit Connect, with the support of the Institute for Healthcare Advancement (IHA), convened an expert panel September 28-29, 2016. The Task Force was comprised of thirteen experts working in community benefit roles. Prometric staff guided the Task Force through the review, revision, and development of tasks and knowledge statements. The Knowledge Statements, Content Domains and Weightings are provided as part of this Executive Summary.

## Development of the Knowledge Statements, Content Domains and Weightings

The panel created a new organizing framework for the domains, developing five unique domains. Next, weights for each domain were developed by having each of the participants give their individual estimates, entering those estimates into a spreadsheet, and discussing the aggregated data. Table 1, below, shows each content domain and the percentage weights assigned. The related Knowledge Statements are provided immediately following Table 1, followed by professional titles used in the community benefit community.

**Table 1. Content Domains Weighting**

1. Community Health Improvement and Strategic Planning	25%
2. Regulatory Requirements, Compliance, and Reporting	23%
3. Infrastructure	18%
4. External Stakeholder Engagement	18%
5. Data Collection, Reporting, and Evaluation	16%

## Knowledge Statements

- 1 Accounting principles
- 2 Advocacy
- 3 Affordable Care Act
- 4 Annual Community Benefits Reports and Plans
- 5 Bad debt
- 6 Barriers to care
- 7 Benchmarking principles
- 8 Best practice models for community benefit programs

- 9 Budget development
- 10 Budget maintenance
- 11 Change management theory
- 12 Charity care/financial assistance
- 13 Collaboration principles
- 14 Collective impact
- 15 Communication strategies
- 16 Community based organizations and other resources
- 17 Community benefit policies
- 18 Community benefit tracking software/tool
- 19 Community engagement
- 20 Community health improvement principles
- 21 Community Health Needs Assessment
- 22 Community needs
- 23 Coordination of program activities
- 24 Cost-benefit analysis
- 25 Cultural competency
- 26 Data analysis
- 27 Evaluation methodology
- 28 Evidence based practices
- 29 Facilitation skills
- 30 Federal, state and local laws applicable to community benefit
- 31 Federal, state, and local agencies
- 32 Federally Qualified Health Centers and community clinics
- 33 Financial assistance policies
- 34 Financial principles
- 35 Funding sources for community benefit
- 36 Grants administration and management
- 37 Health care systems
- 38 Health equity
- 39 How to develop a community benefit program
- 40 Implementation Strategies
- 41 IRS reporting requirements
- 42 Medicaid and other means-tested insurance programs
- 43 Organizational work planning
- 44 Performance improvement
- 45 Policy development and implementation
- 46 Policy, systems and environmental change
- 47 Population health
- 48 Populations facing inequities
- 49 Prevalent health conditions
- 50 Primary care (patient centered) medical home principles
- 51 Priority setting
- 52 Project management
- 53 Public health

- 54 Quality and safety
- 55 Quality of life
- 56 Report production
- 57 Research principles
- 58 Return on Investment (ROI)
- 59 Social accountability
- 60 Social determinants of health
- 61 Social justice
- 62 Standards for community benefit
- 63 Strategic planning
- 64 Tax-exempt status
- 65 Training and technical assistance
- 66 Trends in community benefit
- 67 Triple AIM
- 68 Uncompensated and undercompensated care expenses
- 69 Working with multidisciplinary teams

### **Titles Used by Community Benefit Professionals**

Assoc. Director, Community Benefit Systems and Planning (Health System Manager)  
 Community Benefit Health Education Coordinator  
 Community Benefits Coordinator  
 Community Health and Outreach Director  
 Director, Community Benefits  
 Manager of Community Health and Social Responsibility  
 Manager, Community Benefit and Program Evaluation  
 Manager, Community Benefits Compliance  
 Program Manager of Community Benefits and Health Improvement  
 Senior Community Benefits Administrator  
 Supervisor Community Health

### **Summary**

In summary, this panel job analysis used a sound approach to identify the knowledge, skills and abilities that are important to the competent performance of the professional engaged in work related to community benefit. The job analysis process allowed for input from a representative group of professionals who currently work within the community benefit role and was conducted within the guidelines of professionally sound practice.

The information presented here includes the domains, weightings and knowledge statements developed as a result of the job analysis process. Additional information, including an in-depth description of the methodology used to conduct the job analysis, the task statements for each domain, and a description of the professional standards used to conduct this study, were provided to *Community Benefit Connect* for their use in creating services and products for the community benefit audience such as educational offerings and ideal job descriptions. In addition, these more

detailed findings may serve as a foundation for a future certificate or certification program. All the information presented herein and in the related study documents is the property of *Community Benefit Connect* and may not be shared without their expressed, written permission.

To learn more about this process, or to receive permission to share this document or related information, contact Melissa Biel at [mbiel@communitybenefitconnect.org](mailto:mbiel@communitybenefitconnect.org).

# INTRODUCTION

The major purpose of the panel job analysis study was to identify the tasks and knowledge that are important for competent role performance for community benefit professionals.

This report describes the job analysis, including the:

- + rationale for conducting the job analysis;
- + methods used to define job-related tasks and knowledge; and,
- + creation of the final content specifications.

## Job Analysis Study and Adherence to Professional Standards

Job analysis refers to procedures designed to obtain descriptive information about the tasks performed on a job and/or the knowledge, skills, or abilities necessary to adequately perform those tasks. The specific type of information collected during a job analysis is determined by the purpose for which the information will be used.

The use of a job analysis (also known as practice analysis, role and function study, or role delineation study) to define the content domain(s) is a critical component in establishing content validity. Content validity refers to the extent to which the content covered by a program or product is representative of the tasks and knowledge of a job (tasks, knowledge, skills, or abilities).

A well-designed job analysis should include a representative group of subject-matter experts who reflect the diversity within the profession. Diversity refers to regional or job context factors and to subject-matter expert factors such as experience, gender, and race/ethnicity. Demonstration of content validity is accomplished through the judgments of subject-matter experts. The process is enhanced by the inclusion of subject-matter experts who represent the diversity of the relevant areas of expertise.

*The Standards for Educational and Psychological Testing*<sup>1</sup> (2014) (*The Standards*) is a comprehensive technical guide that provides criteria for the evaluation of tests, testing practices, and the effects of test use. It was developed jointly by the American Psychological Association (APA), the American Educational Research Association (AERA), and the National Council on Measurement in Education (NCME). The guidelines presented in *The Standards*, by professional consensus, have come to define the necessary components of quality testing. As a consequence, an assessment program that adheres to *The Standards* is more likely to be judged as valid and defensible than one that does not

As stated in Standard 11.13, “The content domain to be covered by a credentialing test should be defined clearly and justified in terms of the importance of the content for credential-worthy performance in an occupation or profession. A rationale and evidence should be provided to support the claim that the knowledge or skills being assessed are required for credential-worthy performance in that occupation and are consistent with the purpose for which the credentialing program was instituted... Typically; some form of job or practice analysis provides the primary basis for defining the content domain...” (2014, pp.181-182).

Two approaches to conducting a job analysis are well recognized within the assessment industry; a survey job analysis and a panel job analysis. While both approaches produce outcomes based on an empirical data collection process, the approaches are contrasted by the use of a survey instrument versus the opinions of an expert panel. Both approaches begin with the identification of tasks and knowledge statements that define the job role under study. A survey job analysis introduces the use of a survey instrument to collect data from a representative sample of the population of interest while a panel job analysis relies on the judgment of experts selected based on their representativeness of the wider population. Panel job analyses are most often used in new and evolving job roles where identification of a large sample of subjects working in that job role would be challenging. Based on this criterion, the decision to use a panel job analysis for the community benefit professional was made. The study undertaken followed the guidelines presented in *The Standards* and adhered to accepted professional practice.

# METHOD

The job analysis for the community benefit professional involved a methodical approach that included an expert panel review. A draft list of tasks and knowledge statements was developed based on current literature and job descriptions submitted by the panel members. The draft task and knowledge statements were reviewed by a panel of experts. The purpose of the panel expert review was to obtain verification (or refutation) that the tasks and knowledge identified are important to the work of community benefit.

Utilizing multiple experts to review and validate the tasks and knowledge statements functions as a “check and balance” and reduces the likelihood that unimportant areas will be identified as well as important areas not included. The use of multiple experts eliminates the chance that one expert’s input will be overly influential in any decisions reached.

The methodology used to conduct the job analysis is described below.

## 1. Conduct of Planning Meeting

A project-planning meeting was held with project staff on May 11, 2016, via telephone conference. Meeting participants included community benefit staff, the consultant and the Prometric staff responsible for the conduct of the job analysis. During the planning meeting, several issues were discussed, including selection of the expert panel, meeting dates, logistics, and job analysis methodologies.

## 2. Development of the Tasks and Knowledge Statements

A draft list of tasks and knowledge statements was developed by Prometric staff based on literature provided describing the job role working in community benefit. In addition, members of the expert panel were asked to provide their job descriptions. Activities identified across these job descriptions were included as draft statements as well as the knowledge areas required to perform the tasks.

A pre-meeting document was sent to the Task Force containing information about the panel job analysis process, expectations for the in-person meeting and the draft list of task and knowledge statements. Panel members were asked to review these materials prior to the meeting and were assigned responsibility for editing the draft lists as they deemed appropriate to describe the community benefit role. In addition, panel members were asked to review the suggested seven domains corresponding to the Community Benefit process defined on the *Community Benefit Connect* website that were used to group the task statements. The seven domains used for the initial grouping were assess, engage, prioritize, complete, implement, evaluate, and report. Panel members were advised to view this classification format as a draft only and to suggest alternate organizing frameworks. The pre-meeting document is included in *Appendix A*.

### 3. Expert Panel Review

IHA convened an expert panel September 28-29, 2016, in Las Vegas, Nevada. The Task Force was comprised of thirteen experts working in community benefit roles. A complete list of the Task Force participants is provided in *Appendix B* with the panel members’ demographic characteristics defined in *Appendix C*. Prometric staff guided the Task Force through the review, revision, and development of tasks and knowledge statements. *Appendix D* contains the final list of approved task statements and *Appendix E* contains the final knowledge statements.

### 4. Development of the Content Domains and Weightings

After the panel approved the knowledge and tasks statements (*Appendix D* and *Appendix E*), they organized the tasks statements by content domains and assigned weights to each domain. The panel created a new organizing framework for the domains, developing five unique domains. Next, weights for each domain were developed by having each of the participants give their individual estimates, entering those estimates into a spreadsheet, and discussing the aggregated data. Table 1, below, shows each content domain and the percentage weights assigned.

**Table 1. Content Domains Weighting**

<b>1. Community Health Improvement and Strategic Planning</b>	25%
<b>2. Regulatory Requirements, Compliance, and Reporting</b>	23%
<b>3. Infrastructure</b>	18%
<b>4. External Stakeholder Engagement</b>	18%
<b>5. Data Collection, Reporting, and Evaluation</b>	16%

### 5. Other Findings

The panel members were also asked to identify other titles used for community benefit professionals. Those titles are included as *Appendix G*.

Secondly, panel members were asked what job characteristics, in addition to the tasks and knowledge statements, are needed for successful practice as a community benefit professionals. These characteristics are defined in *Appendix H*.

## SUMMARY AND CONCLUSION

The panel job analysis for community benefit was conducted to:

- + identify tasks and knowledge statements important to the work provided by community benefit professionals and
- + create a weighted set of content domains that may be used by IHA as the foundation for the development of product and services related to community benefit.

Most often job analysis studies are conducted as the first step in developing a certificate or certification program. For an evolving field such as community benefit, the currency of the job analysis study can be expected to remain valid for a five to seven year period. In addition to this use, the rich data obtained from a job analysis can also be leveraged for other products and services including:

- Identification of professional education – The tasks and knowledge statements that result from the job analysis process provide a user with an extensive list of content areas where professional education can be focused. These topics can be compared to what is currently available for professionals working in the field as well as those professionals who want to enter the field. Since preparation for the community benefit role does not currently exist as a formal educational program, professionals must seek knowledge of the role in a variety of ways. Using the list of tasks and knowledge statements may serve as a proxy for a community benefit proposed curriculum.
- Ideal job descriptions – Knowing what tasks and skills a panel of subject matter experts has deemed most important for the community benefit role allows employers to use this information in drafting ideal job descriptions for the community benefit professional. Using these statements as the foundation, job descriptions can be customized to match the vision, mission and values of the employing institution. This will be especially important when the role is being developed and implemented for the first time or when major changes within the institution are occurring.
- Performance Appraisals – When employees are in unique roles, it can be challenging to determine how to evaluate that person's performance. Job analysis findings may serve as the benchmark against which an employee's contribution to the organization may be assessed.

In summary, the job analysis utilized a multi-method, iterative approach to identify the tasks and knowledge important to the work performed by community benefit professionals.

# APPENDICES

## APPENDIX A. PRE-MEETING DOCUMENT

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PREPARING FOR YOUR  
PARTICIPATION IN THE

TASK FORCE MEETING  
FOR THE  
COMMUNITY BENEFIT CONNECT  
COMMUNITY BENEFIT JOB ANALYSIS STUDY

SEPTEMBER 28-29, 2016

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PREPARED BY: LINDA WATERS AND ROBERT CORRIGAN



TEST DEVELOPMENT SOLUTIONS

## INTRODUCTION

Community Benefit Connect has commissioned the Community Benefit Job Analysis Study from Prometric.

A job analysis (JA) study is designed to obtain descriptive information about the tasks performed on a job and the knowledge needed to support their performance. The purpose of the job analysis study is to:

- Develop a list of tasks performed by individuals engaged in community benefit
- Develop a list of knowledge/skill statements required by individuals to successfully engage in community benefit

## PARTICIPATION IN A TASK FORCE MEETING

During the meeting we will develop the major content areas that encompass the breadth of categories individuals engaged in community benefit will experience. These content areas, often referred to as domains, will provide the general framework for categorizing tasks. In addition, specific task and knowledge/skill statements will be reviewed and developed in order to cover all aspects of community benefit.

Your role—along with the other task force members— is to actively provide information during the meeting based on your professional expertise regarding the work performed by individuals engaged in community benefit.

On behalf of Community Benefit Connect, we welcome you as a critical contributor by serving on the Job Analysis Panel!

## PREPARING FOR THE TASK FORCE MEETING

This document provides information to prepare you for participation in the job analysis meeting, including

- the meeting agenda
- an overview of the job analysis study process and how tasks and knowledge are developed
- a pre-meeting assignment

Linda Waters and Robert Corrigan will serve as the meeting facilitators on behalf of Prometric.

## JOB ANALYSIS STUDY DEFINED

A job analysis study (also known as a professional activities knowledge and skill study, practice analysis, role and function study, body of knowledge study, or role delineation) refers to procedures designed to obtain descriptive information about the tasks performed on a job and the important knowledge needed to competently perform those tasks. The specific type of job information collected is determined by the purpose for which the information will be used. For purposes of developing a program for the community benefit profession, the study should identify important tasks, knowledge/skills, and other job characteristics necessary for competent performance of the community benefit professional. Specifically, the job analysis study is designed to solicit the opinions of importance for tasks and knowledge related to the work to be performed by individuals engaged in community benefit.

In addition, a well-designed job analysis study should reflect the diversity within the job. Diversity refers to regional or job context factors (e.g., geographic region, practice setting) and to subject-matter expert factors (e.g., professional experience, education).

By asking people of diverse backgrounds to develop and define the importance of tasks and knowledge, fairness is built into the job analysis process from the start. If diverse people perceive the job in similar ways, then that perception can be applied in support of including that content in the community benefit program.

## ADHERENCE TO THE STANDARDS FOR EDUCATIONAL AND PSYCHOLOGICAL TESTING

The job analyses studies conducted by Prometric are designed to adhere to professional practice guidelines presented in *The Standards for Educational and Psychological Testing (2014) (The Standards)*. While these are specific to testing, the principles within are valid across various job analysis applications.

*The Standards* is a comprehensive technical guide that provides criteria for the evaluation of tests, testing practices, and the effects of test use. It was developed jointly by the American Psychological Association (APA), the American Educational Research Association (AERA), and the National Council on Measurement in Education (NCME). The guidelines presented in *The Standards* have, by professional consensus, come to define the necessary components of quality testing. Consequently, a testing program that adheres to *The Standards* is more likely to be judged valid and defensible than one that does not.

The Standards emphasize the concept of content validity and the need to conduct a JA study to assure that the knowledge assessed in credentialing initiatives are in fact limited to those important for competent performance. As noted in Standard 11.13, “The content domain to be covered by a credentialing test should be defined clearly and justified in terms of the importance of the content for credential-worthy performance in an occupation or profession. A rationale and evidence should be provided to support the claim that the knowledge or skills being assessed are required for credential-worthy performance in that occupation and are consistent with the purpose for which the credentialing program was instituted...Typically, some form of job or practice analysis provides the primary basis for defining the content domain...” (p.181-182).

## OBJECTIVES OF THE JOB ANALYSIS STUDY

The objectives of the study are two-fold: (1) to construct a comprehensive delineation of tasks and knowledge related to important work activities, and (2) to obtain verification/refutation through deliberation on the proposed task and knowledge statements.

The verification/refutation component plays a critical part in ensuring that the content area (in whole or in part) is judged relevant to the work in the profession being examined. The verified list of important tasks and knowledge can be used in the development of a program for the community benefit profession.

## THE TASK FORCE MEETING: DELINEATION OF DOMAINS, TASKS, AND KNOWLEDGE

The major aim of conducting a job analysis study is to develop a concise and logical compilation of what professionals do in specific terms that can be readily communicated and understood. The delineation procedure involves a number of steps including the identification of: (1) domains; (2) tasks; and (3) the knowledge/skills underlying the performance of tasks:

1. Domains (also known as topic areas, content areas, or dimensions) represent the principal areas of a) job responsibility and b) knowledge and skills needed to perform one's professional responsibilities. These may be characterized as major headings in an outline format and may include a brief behavioral description of the domain.
2. When all domains have been identified, each domain will be described in terms of the tasks performed to fulfill important job responsibilities. The tasks identified in the study must cover all aspects of the work that are relevant to the objectives of the study.
3. After the domains, tasks have been compiled, the knowledge/skills associated with the performance of those tasks are identified.

## EXAMPLE: DOMAINS (CONTENT AREAS) > KNOWLEDGE

Below is an example of the aforementioned hierarchy. A draft of the potential task and knowledge statements is included with the pre-meeting materials. These materials were developed from documents provided to Prometric in preparation for this job analysis study (e.g., resumes, job descriptions, related websites, etc.). Please note that the list of tasks and knowledge statements provided to you were assembled by non-subject matter experts and may not fully reflect the entire scope of practice of a professional engaged in community benefit.

### Domain 1: Assess

- 1) *Conducts a community health needs assessment (CHNA)*
  - a) *Steps in the CHNA*
- 2) *Build relationships with community organizations that have stake in improving the health of the community*
  - a) *Stakeholders in the local community*

## WRITING TASKS STATEMENTS

Tasks are distinct, identifiable, specific job-related tasks performed by professionals in your field that are necessary for competent performance. Tasks should begin with action verbs such as:

Administer	Calculate	Counsel	Document	Identify	Interview	Negotiate	Read	Revise
Analyze	Compute	Describe	Establish	Instruct	Maintain	Obtain	Recommend	Schedule
Assess	Conduct	Design	Evaluate	Integrate	Measure	Perform	Report	Supervise
Audit	Consult	Discuss	Formulate	Interpret	Monitor	Plan	Review	Write

A few examples of some *commonly misused verbs* that should be avoided because of ambiguity are:

Assist	Consider	Determine	Help	Know	Participate	Process	Understand
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Since tasks vary in complexity, the writer should expect to have statements of varying length and complexity. The following are examples of appropriately written tasks:

- Report on metric goals
- Writes, coordinates and submits the annual Community Benefit Report

## WRITING KNOWLEDGE/SKILLS STATEMENTS

The development of knowledge/skills requires inferring behaviors from the tasks. In the writing of these statements, conciseness with specificity is the goal. Adjectives modifying the level or extent of the knowledge/skills (e.g., some, thorough, clearly, effectively) should *not* be used. Doing so introduces a qualifier that is not appropriate or necessary in the JA study process. The following are a few examples of knowledge/skills:

Knowledge of:

- Cost-benefit analysis
- Behavioral health issues
- Benchmarking principles

## REVIEWING THE TASKS AND KNOWLEDGE

The following questions will be used to review the draft listing of tasks and knowledge/skills after it has been created:

**CLARITY:** Are the domains succinct? Are tasks and knowledge/skills clearly worded?

**RELEVANCE:** Are the tasks and knowledge/skills relevant to the work performed by community benefit professionals?

**REDUNDANCY:** Are the tasks and knowledge/skills unique and discrete?

**OMISSIONS:** Have any important tasks and knowledge/skills been omitted?

**COMPREHENSIVENESS:** Are the domains, tasks, and knowledge/skills comprehensive and representative?

## ASSIGNMENT IN PREPARATION FOR THE IN-PERSON MEETING

Prior to the in-person meeting please review the attached Excel document – note there are three tabs to the file. The first tab contains Task Statements that describe the activities that individuals engaged in community benefit may perform. The second tab includes a listing of Knowledge areas for the job role.

As a pre-meeting assignment, please:

- i) Review the list of Task Statements making any edits or deletions needed.

- ii) Please note whether there are important tasks that have not been included and add those in.
- iii) You will note that, tentatively, these Tasks have been organized based on the 7 steps in the Community Benefit Process. We will discuss at the meeting whether this is the best way to organize these statement. In the meantime, please determine whether the current Task Statements are correctly categorized. If not, please make suggestions for change.
- iv) Review each of the Knowledge statements and make any additions or deletions needed.

The meeting will be a highly interactive, thought producing session. We look forward to hearing from each of you and having great discussions!

## APPENDIX B. TASK FORCE COMMITTEE

1	Jillian Barber, MPH Program Manager, Community Benefit and Health Improvement Sharp Healthcare San Diego, CA
2	Coletta Barrett, RN, MHA, FAHA, FACHE Vice President, Mission Our Lady of the Lake Hospital Baton Rouge, LA
3	Melissa Biel, DPA, RN Co-founder, Community Benefit Connect Long Beach, CA
4	Ashley Brand, MA, MPH, CPH Director, Community Health and Outreach Dignity Health Rancho Cordova, CA
5	Toni Conley, CPA Manager, Community Benefit Compliance Trinity Health Livonia, MI
6	Desiree de la Torre, MPH, MBA Director, Community Affairs and Population Health Improvement Children's National Health System Washington, DC
7	John Eaton, BS Community Benefit Coordinator Flagler Hospital St. Augustine, FL
8	Renee Hanrahan, MA Director of Community Benefit Via Christi Health, Inc. Wichita, KS
9	Celeste A. James, BA Director, Community Health Initiatives Kaiser Permanente of the Mid-Atlantic States Rockville, MD
10	Cindy Levey, MPH Associate Director, Community Benefit Systems and Planning Cedars-Sinai Medical Center Los Angeles, CA
11	Augusta S. Mueller, MBA Community Benefits Manager Yale New Haven Health New Haven, CT
12	Jill Schafer, BSN, RN Community Benefit/Health Education Coordinator-Community Relations Fisher-Titus Medical Center Norwalk OH
13	Elissa Fay Southward, PhD Supervisor, Community Health Yakima Valley Memorial Hospital Yakima, WA

## APPENDIX C. TASK FORCE COMMITTEE DEMOGRAPHIC CHARACTERISTICS

Panel Member No.	Yrs in Field	Highest Degree	Field	Certification/License	Gender	Age	Race/Ethnicity	Region of Practice
1	3.5	B.S.	Health Education	Tobacco Treatment Counselor	M	21-30	Caucasian/White	FL
2	20	D.P.A.	Public Administration	RN	F	51-60	Caucasian/White	N/A
3	9	Ph.D.	Applied Sociology	None noted	F	61+	Caucasian/White	KS
4	8	M.P.H.	Public Health	CPH	F	31-40	Caucasian/White	N/A
5	8	M.P.H.	Health Policy & Management	None noted	F	31-40	Caucasian/White	N/A
6	40	M.H.P.	Administration	RN, FACHE, CUNS	F	61+	Caucasian/White	CA
7	1	Ph.D.	Exercise & Health Science	None noted	M	21-30	Caucasian/White	N/A
8	20	B.A.	Business	CPA	F	41-50	Caucasian/White	MI
9	30	B.A.	BSN	None noted	F	51-60	Caucasian/White	OH
10	18	B.A.	Business Administration & Management	None noted	F	51-60	African American	MD
11	20	M.B.A.	Finance	Community Benefits Certification	F	41-50	Caucasian/White	CT
12	12	MPH, M.B.A	Social & Behavioral Health	None noted	F	31-40	Hispanic/Latino	Washington, DC
13	24	MPH	Health Promotion & Education	None noted	F	41-50	Caucasian/White	CA

## APPENDIX D. TASK STATEMENTS\*

<b><u>Domain 1</u></b> <b>(25%)</b>	<b><u>Community Health Improvement and Strategic Planning</u></b>
1	Advocates for organizational policy and practice changes to support community health improvement
2	Analyzes healthcare landscape to identify opportunities for the advancement of community benefit
3	Creates the business case for community benefit
4	Determines the community readiness incorporating the internal needs of what should be measured
5	Establishes the links between population health improvement and community benefit
6	Facilitates the development of measurable community health improvement plans and implementation strategies that link with the health system's strategic plans
7	Identifies best practices to improve quality of life and reduce health disparities in the communities served by the health system
8	Identifies policy levers that align and support community benefit initiatives
9	Identifies potential opportunities to provide funding for identified health needs
10	Integrates strategic planning methodologies into community benefit program planning
11	Launches pilot innovations to improve the health of the community
12	Leverages community benefit efforts and investments to align with organization's mission, vision and strategic priorities and implementation strategies
13	Provides analyses to inform budgeting process for community benefit
14	Provides data as a resource for decision-making in related efforts throughout the hospital/health system
15	Provides leadership and advocacy to address health improvement through policy, systems, and environmental change
16	Provides leadership for community benefit programs to address social determinants of health and health equity
17	Promotes integration of community benefit planning into the organization's strategic and financial planning processes
18	Strategizes new opportunities for community benefit with key internal leaders
19	Supports development of community benefit program goals, objectives, and measures
20	Supports the creation of community-based and community-partnered initiatives to enhance and improve the health of targeted populations as identified in the CHNA and other sources
21	Utilizes benchmarking and performance improvement tools to enhance strategic planning, priority setting and alignment of programs
<b><u>Domain 2</u></b> <b>(23%)</b>	<b><u>Regulatory Requirements, Compliance, and Reporting</u></b>
1	Assists with additional community assessments
2	Collaborates with internal auditors to identify and provide expertise on community benefit programs for compliance with regulatory reporting guidelines and current standards
3	Completes all aspects of the Community Health Needs Assessment (CHNA)
4	Completes all aspects of the Implementation Strategy
5	Develops the annual Community Benefit Report
6	Ensures IRS Schedule H narrative responses are completed and aligned with current federal guidance

7	Maintains a working knowledge of applicable Federal, State and local laws and regulations to ensure adherence in a manner that reflects honest, ethical and professional behavior
8	Manages timely and accurate coordination for community benefit external regulatory requirements and internal community benefit systems
9	Serves as a liaison to the various departments that support patient access to care (e.g., finance, legal), keeping them apprised of the reporting requirements for financial assistance
10	Serves as the community benefit expert in interpreting standards and accounting guidelines
11	Works with Finance Department regarding Schedule H/Form 990 submission
<b>Domain 3 (18%)</b>	<b><u>Infrastructure</u></b>
1	Applies for funding opportunities for identified health needs
2	Builds internal capacity to address identified community health needs
3	Collaborates with marketing and communications functions to employ various media to tell the community benefit story
4	Coordinates community benefit related research projects
5	Evaluates proposals/applications for grant making
6	Facilitates multidisciplinary teams to address community needs
7	Facilitates the development, communication and implementation of community benefit policies and procedures
8	Facilitates work of committees that oversee community benefit
9	Identifies potential opportunities to obtain funding for identified health needs
10	Makes recommendations to grant committees
11	Manages grant committees
12	Oversees community benefit budgeting process
13	Oversees students pursuing opportunities specific to community benefit, community health needs assessments and/or implementation strategies
14	Participates in ongoing professional development related to community benefit
15	Performs site visits for grant making
16	Provides technical assistance through training, in services, and webinars to standardize reporting for community benefit programs, activities and investments
17	Recommends organizational structure to ensure effective community benefit outcomes
18	Serves as a resource for staff working in activities that qualify as community benefit
19	Supports reporting of community benefit expenditures
20	Trains community benefit team and health system/hospital leaders in health equity principles to improve health (e.g., diversity, inclusion, intentional and unintentional bias)
21	Works with key internal clinical leaders and administrators to strengthen community health outreach, health education and prevention programs that are best practices/evidence-based
<b>Domain 4 (18%)</b>	<b><u>External Stakeholder Engagement</u></b>
1	Develops outreach materials for user education
2	Develops training for outreach in the community
3	Facilitates cross-sector teams to address community health needs
4	Facilitates sharing of best practices/evidence-based and innovations related to community benefit
5	Fosters relationships with key community partners and networks to plan, set priorities, align programs
6	Partners with public health organizations

7	Prioritizes ongoing authentic and culturally competent community engagement
8	Serves as a convener of stakeholders to address identified community health needs
9	Serves as community benefit resource externally, representing organization's commitments in community health endeavors and partnerships
<b><u>Domain 5</u></b> <b><u>(16%)</u></b>	<b><u>Data Collection, Reporting, and Evaluation</u></b>
1	Analyzes community benefit Inventory data and other data sources (Healthy Communities Institute); and provide leadership on using data to enhance community benefit systems and planning
2	Communicates program implementation, evaluation, and outcomes to stakeholders
3	Creates standard measurement system to report progress and provide evaluation of community health improvement goals, interpreting information for ongoing plan revision
4	Develops framework for evaluating health outcomes
5	Manages the community benefit reporting data using specialized software or other designated tools
6	Provides and interprets data for the community
7	Provides data for use in strategic planning, advocacy and other functional areas

\* The order of presentation of the task statements does not reflect any significance or order.

## APPENDIX E. KNOWLEDGE STATEMENTS

- 1 Accounting principles
- 2 Advocacy
- 3 Affordable Care Act
- 4 Annual Community Benefits Reports and Plans
- 5 Bad debt
- 6 Barriers to care
- 7 Benchmarking principles
- 8 Best practice models for community benefit programs
- 9 Budget development
- 10 Budget maintenance
- 11 Change management theory
- 12 Charity care/financial assistance
- 13 Collaboration principles
- 14 Collective impact
- 15 Communication strategies
- 16 Community based organizations and other resources
- 17 Community benefit policies
- 18 Community benefit tracking software/tool
- 19 Community engagement
- 20 Community health improvement principles
- 21 Community Health Needs Assessment
- 22 Community needs
- 23 Coordination of program activities
- 24 Cost-benefit analysis
- 25 Cultural competency
- 26 Data analysis
- 27 Evaluation methodology
- 28 Evidence-based practices
- 29 Facilitation skills
- 30 Federal, state and local laws applicable to community benefit
- 31 Federal, state, and local agencies
- 32 Federally Qualified Health Centers and community clinics
- 33 Financial assistance policies
- 34 Financial principles
- 35 Funding sources for community benefit
- 36 Grants administration and management
- 37 Health care systems
- 38 Health equity
- 39 How to develop a community benefit program
- 40 Implementation Strategies
- 41 IRS reporting requirements
- 42 Medicaid and other means-tested insurance programs

- 43 Organizational work planning
- 44 Performance improvement
- 45 Policy development and implementation
- 46 Policy, systems and environmental change
- 47 Population health
- 48 Populations facing inequities
- 49 Prevalent health conditions
- 50 Primary care (patient centered) medical home principles
- 51 Priority setting
- 52 Project management
- 53 Public health
- 54 Quality and safety
- 55 Quality of life
- 56 Report production
- 57 Research principles
- 58 Return on Investment (ROI)
- 59 Social accountability
- 60 Social determinants of health
- 61 Social justice
- 62 Standards for community benefit
- 63 Strategic planning
- 64 Tax-exempt status
- 65 Training and technical assistance
- 66 Trends in community benefit
- 67 Triple AIM
- 68 Uncompensated and undercompensated care expenses
- 69 Working with multidisciplinary teams

## APPENDIX F. CONTENT DOMAINS AND WEIGHTINGS

<b>Content Domains</b>	<i>Mean</i>	<i>Stand Dev.</i>	<i>Median</i>	<i>Mode</i>	<i>Minimum</i>	<i>Maximum</i>
1. Community Health Improvement and Strategic Planning	25%	7.76	20	20	15	45
2. Infrastructure	18%	5.45	20	20	10	25
3. External Stakeholder Engagement	18%	7.15	20	20	10	30
4. Regulatory Requirements, Compliance, and Reporting	23%	12.87	30	30	5	50
5. Data Collection, Reporting, and Evaluation	16%	4.03	15	20	10	20

## **APPENDIX G. TITLES USED BY COMMUNITY BENEFIT PROFESSIONALS**

Assoc. Director, Community Benefit Systems and Planning (Health System Manager)  
Community Benefit Health Education Coordinator  
Community Benefits Coordinator  
Community Health and Outreach Director  
Director, Community Benefits  
Manager of Community Health and Social Responsibility  
Manager, Community Benefit and Program Evaluation  
Manager, Community Benefits Compliance  
Program Manager of Community Benefits and Health Improvement  
Senior Community Benefits Administrator  
Supervisor Community Health

## **APPENDIX H. OTHER CHARACTERISTICS THAT DEFINE THE COMMUNITY**

Ability to exert 20 lbs. of force occasional or up to 10 lbs. of force frequently  
Ability to influence people in their opinions/attitudes  
Adaptability to changing priorities  
Computer skills  
Customer service  
Extensive use of computer  
Foster relationships between organizations  
Manage consultants  
Manage several projects simultaneously  
Manage staff  
Master's degree in health related field preferred  
Work with different stakeholders  
Work within an office environment  
Work within hospitals  
Work within the community