

## **Community Benefit Professional Model Job Description<sup>1</sup>**

### **Summary**

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. Community benefit refers to the initiatives and activities undertaken by nonprofit hospitals to improve health in the communities they serve. These services and activities should result in benefit to the community. Hospitals are accountable for describing the impact on actions taken in the community.

To meet the hospital's community benefit obligation, the Community Benefit Professional must demonstrate knowledge and experience in five established content domains:

1. Community health improvement and strategic planning
2. Regulatory requirements, compliance and reporting
3. Infrastructure
4. External stakeholder engagement
5. Data collection, reporting and evaluation

The Community Benefit Professional has the ability to work within a complex, formal organizational structure while also conversely being able to anticipate, respond and quickly adapt to evolving community needs and shifting regulations. He/she possesses an ability to independently manage and lead through a process of influence and motivation. The Community Benefit Professional displays a proven track record of achieving consensus among diverging opinions, and a proclivity to be a relationship builder with community organizations to address identified community health needs.

### **Job Functions**

#### **Community Health Improvement and Strategic Planning**

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- Initiates and leads the development and execution of data-informed initiatives to enhance and improve the health of targeted populations as identified in the Community Health Needs Assessment (CHNA) and other sources.
- Analyzes the health care environment to identify and lead opportunities for the advancement of community benefit.
- Creates or integrates programs that implement community benefit priorities.

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<sup>1</sup> This job description was developed from a structured job analysis that engaged an expert panel of community benefit professionals. It includes a comprehensive list of possible competencies needed to perform in a community benefit role, and organizations can determine which competencies are most appropriate for their particular needs and settings. The Job Analysis Report can be accessed at [www.communitybenefitconnect.org](http://www.communitybenefitconnect.org).

- Provides program leadership to address the social determinants of health and health equity.
- Advocates health improvement efforts through policy, systemic and environmental change.
- Works with key internal hospital leaders to ensure inclusion of community benefit within the organization's overall strategic and financial planning processes.
- Integrates strategic planning methodologies, and benchmarking and performance improvement tools into community benefit program planning, priority setting, and evaluation.
- Leverages and supports community benefit expenditures and Implementation Strategies to align with the organization's strategic priorities.
- Associates population health improvement with community benefit by identifying best practices to improve quality of life and reduce health disparities in the community.

### **Regulatory Requirements, Compliance and Reporting**

- Maintains a working knowledge of applicable Federal, State and local laws to ensure adherence and compliance with community benefit regulations and guidelines.
- Manages timely and accurate compliance with state and federal regulatory guidelines and standards including Community Health Needs Assessments (CHNAs), Implementation Strategies, annual state Community Benefit Reports [if applicable], and IRS Schedule H narrative responses.
- Collaborates with Patient Access, Finance and Legal departments to keep them apprised of community benefit reporting requirements for financial assistance, provide expertise on regulatory guidelines and current standards, and collaborate on reporting.

### **Infrastructure**

- Partners with key internal hospital and health system clinical leaders and administrators to strengthen community health outreach.
- Works with internal team members to ensure health education and prevention programs are evidence-based/best practices.
- Builds internal capacity and awareness among staff and leadership to address identified community health needs.
- Provides technical assistance through training, in-services, and webinars to ensure the standardization of reporting of programs, activities and investments for staff working in activities that qualify as community benefit.
- Identifies and/or applies for funding opportunities to support prioritized community health needs.
- Oversees management and operations of the Community Grants program, including overseeing the committee, creating funding criteria and guidelines, providing grant recommendations, performing site visits and evaluating proposals and performance under the grant [if applicable].
- Collaborates with Marketing and Communications to employ media resources that effectively share the organization's community benefit practices.
- Facilitates the development, communication and implementation of community benefit policies and procedures.

### **External Stakeholder Engagement**

- Forges alliances, analyzes community assets and fosters collaborative relationships with key community stakeholders, community based organizations, businesses and government partners

to address community health needs, set priorities and align programs to amplify health outcomes.

- Serves as the organization's voice in the community, representing the commitments to community health endeavors and partnerships
- Prioritizes ongoing authentic and culturally competent community engagement.
- Facilitates sharing of evidence-based best practices and innovations to address identified community health needs.

#### **Data Collection, Reporting and Evaluation**

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- Develops or implements a framework for evaluating health outcomes data to report progress and provide evaluation of community health improvement goals.
- Demonstrates ability to interpret and apply data to inform program planning and improvement.
- Manages community benefit data utilizing specialized software or other designated tools.
- Analyzes and integrates primary and secondary data from relevant sources to engage leadership and influence strategic planning, advocacy and mission driven programs.
- Communicates program implementation, evaluation and outcomes to stakeholders.

#### **Other Professional Qualifications and Education**

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- Educational achievement appropriate to the complexity of the position is likely to include advanced degree(s) or equivalent in public health, health care administration, nonprofit administration or related field.
- Seven to ten years of experience in a leadership level/supervisory capacity with proven strategic planning, fiscal management and leadership capability.
- Strong working knowledge of health care delivery systems, health insurance coverage and reform, uncompensated and undercompensated care, health disparities, social determinates of health, community organizations, Triple Aim and population health management concepts.
- Grant administration and evaluation experience [if applicable].
- Participates in ongoing professional development related to community benefit and community health.