

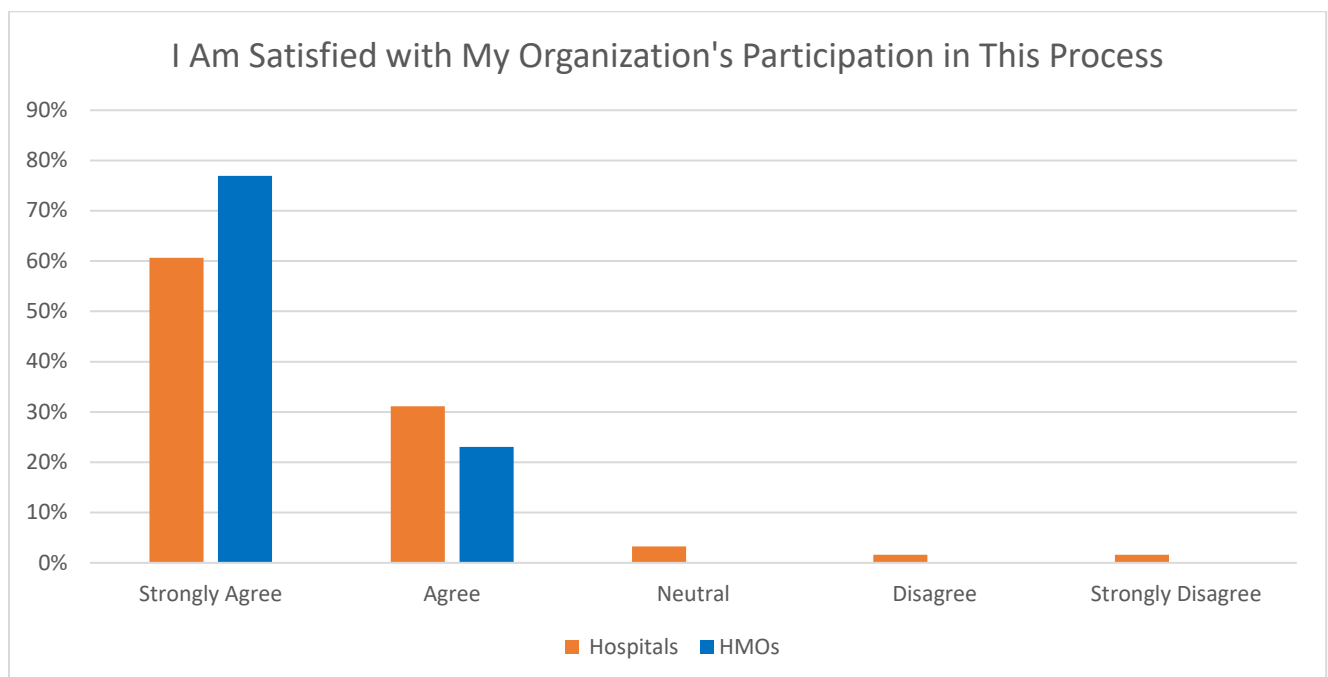
Overview of Community Benefits FY 2020 Community Representative Feedback Forms

In accordance with the AGO Community Benefits Guidelines, hospitals and HMOs distribute feedback forms to community representatives with whom they have engaged in developing a Community Health Needs Assessment and/or Implementation Strategy. Hospital Community Benefits Advisory Committees are invited to share the feedback form with community organizations who partnered with the hospital in its Community Benefits work. The aim of these forms is to help engage community representatives in assessing the Community Benefits process and to facilitate productive dialogue between community representatives and health care organizations.

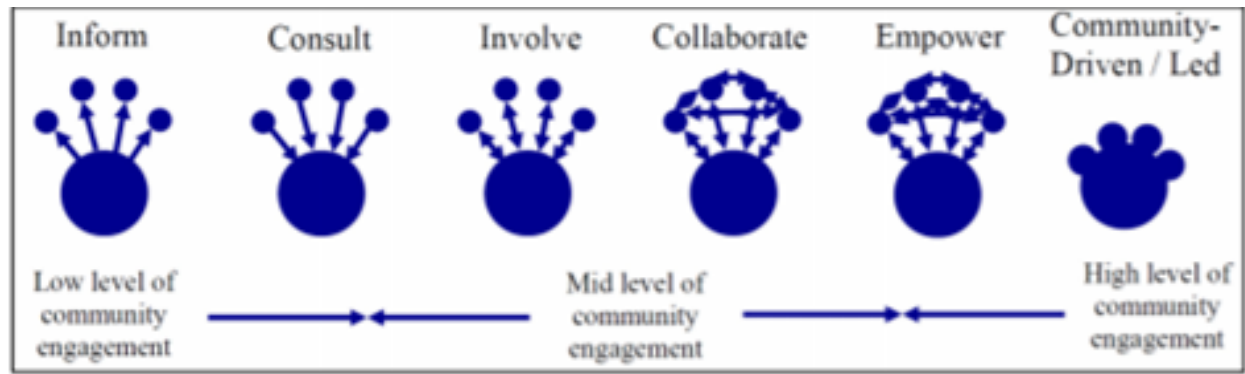
Community representatives are asked to complete the form and submit a copy to both the hospital or HMO and the AGO. In FY 2020, the AGO received a total of 183 Community Representative Feedback Forms regarding 43 hospitals and thirteen (13) Community Representative Feedback Forms regarding three (3) HMOs. Community representatives who submitted feedback on hospital and HMO community engagement included residents, community-based organization leaders, regional or municipal officials, health care providers, hospital affiliates and trustees, and local health department staff. Of the 183 community representatives evaluating hospital community engagement, 84% identified as members of the hospital's Community Benefits Advisory Committee.

Summary of FY 2020 Community Engagement Feedback Results

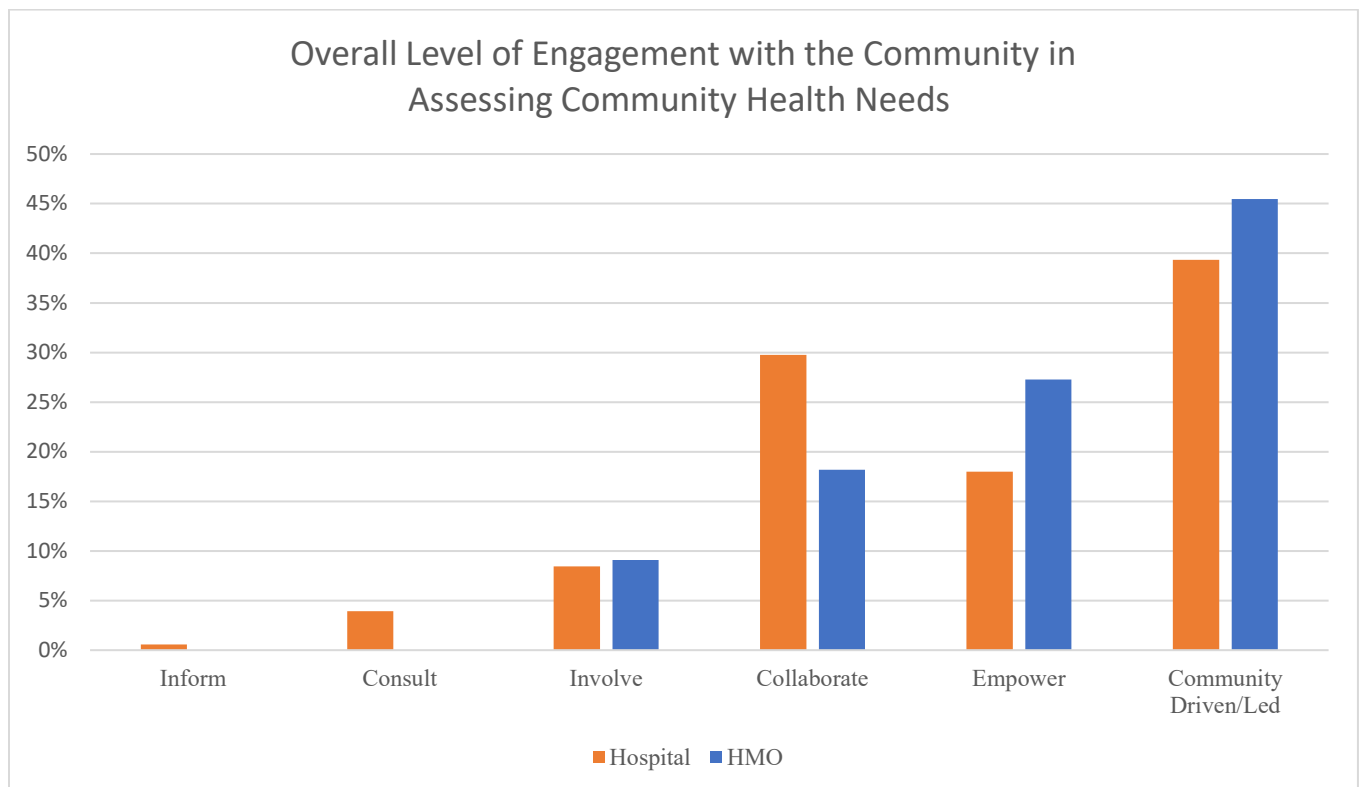
In FY 2020, most community representatives reported high levels of satisfaction with the hospital or HMO's engagement process and expressed comfort sharing their opinions with the organization.



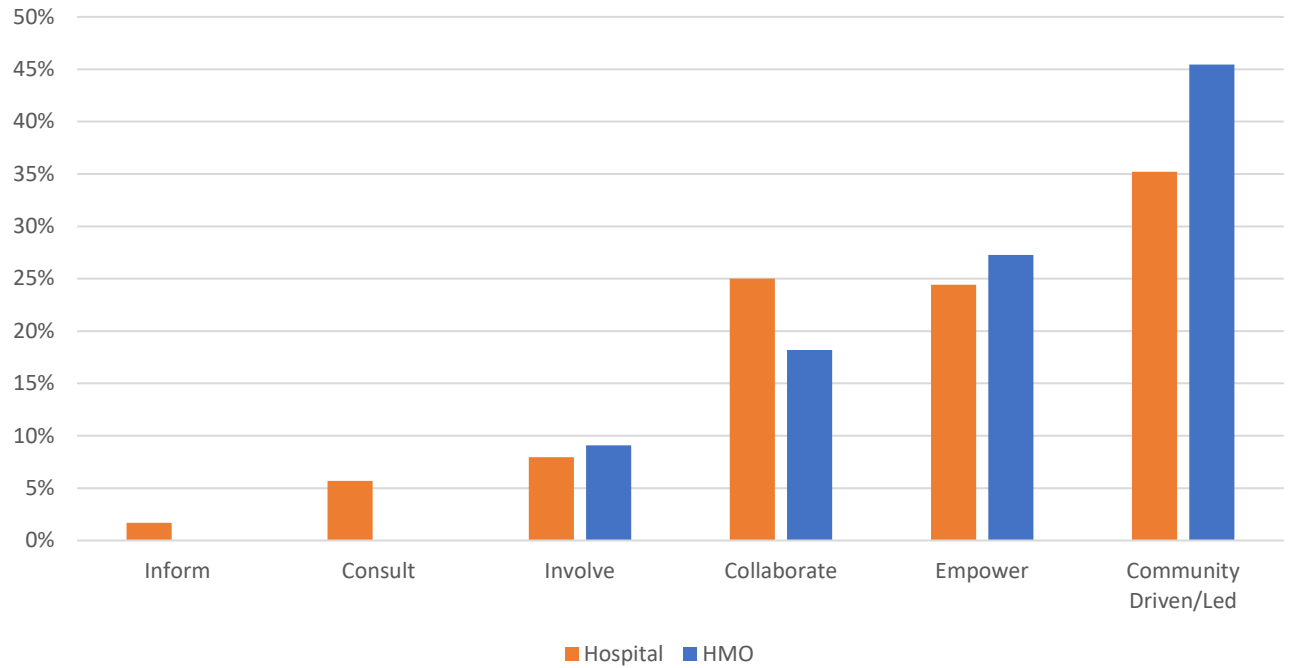
The Community Representative Feedback forms ask that community representatives reflect on the organization's level of community engagement in assessing and addressing community health needs, using the spectrum below:



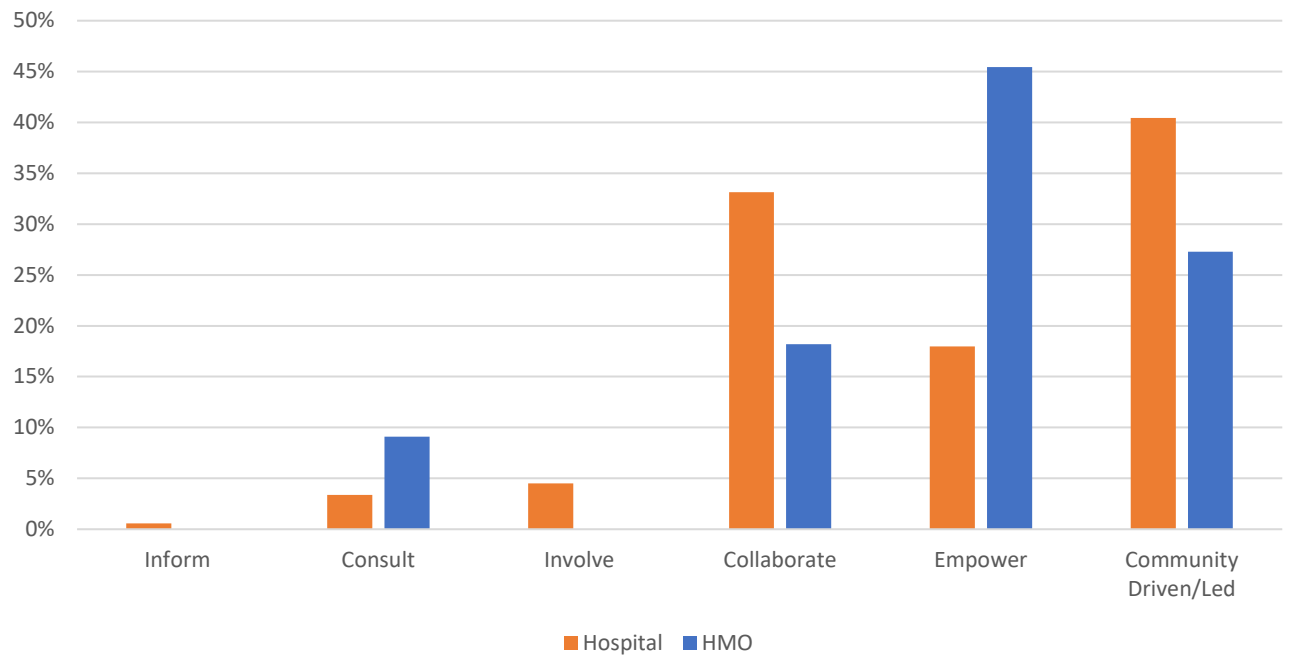
In FY 2020, most community representatives indicated that hospitals and HMOs conducted Community Health Needs Assessments and program implementation processes at a mid- or high-level of community engagement.



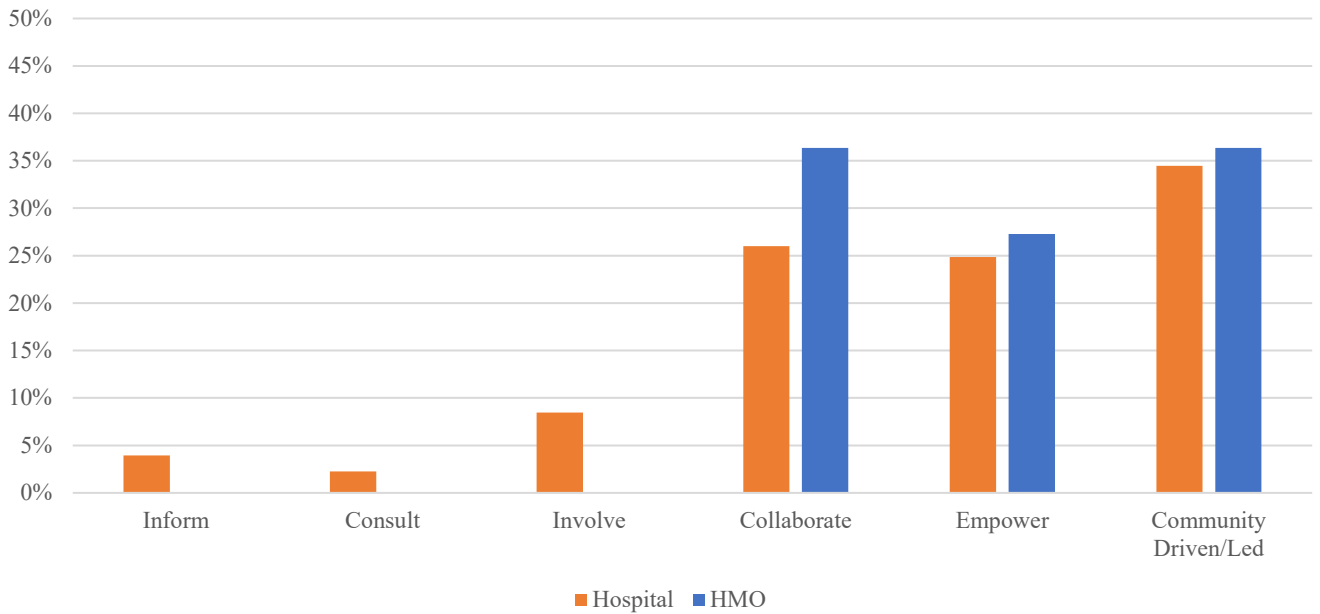
Level of Engagement in Defining the Community to be Served



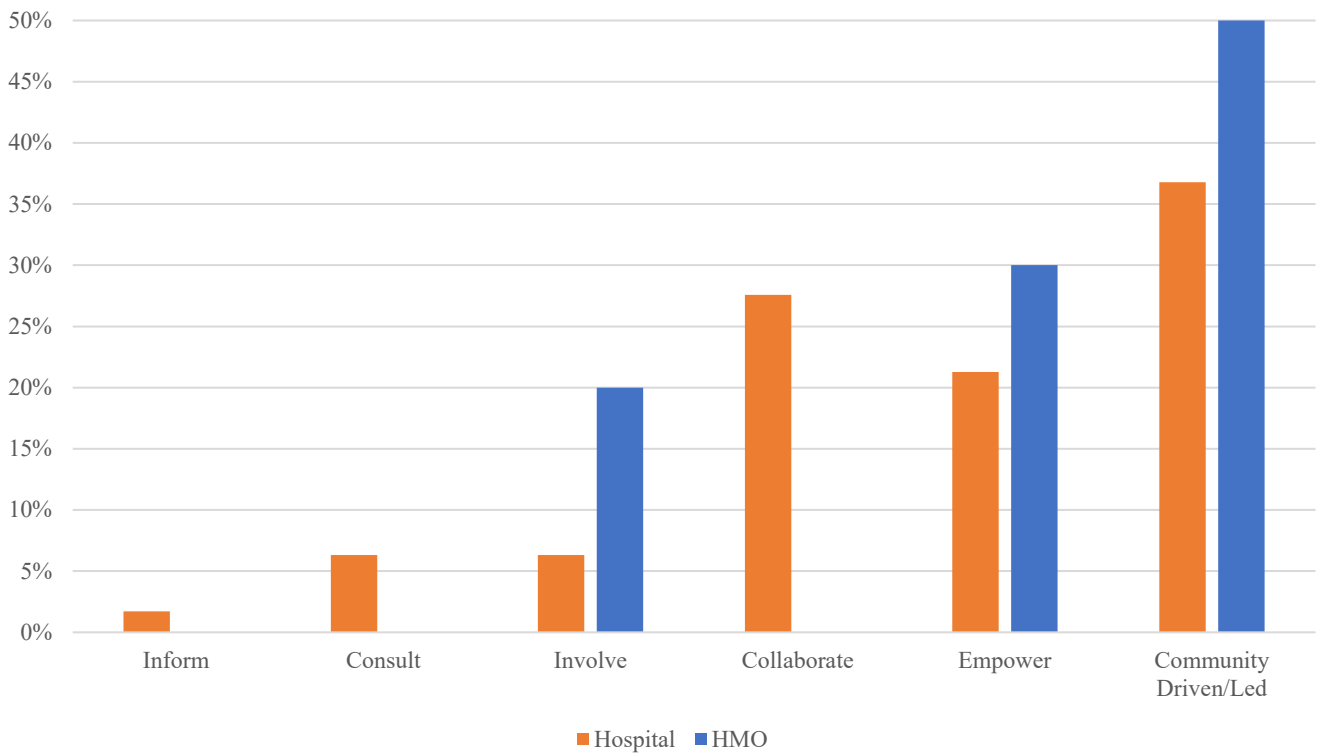
Level of Engagement in Establishing Priorities

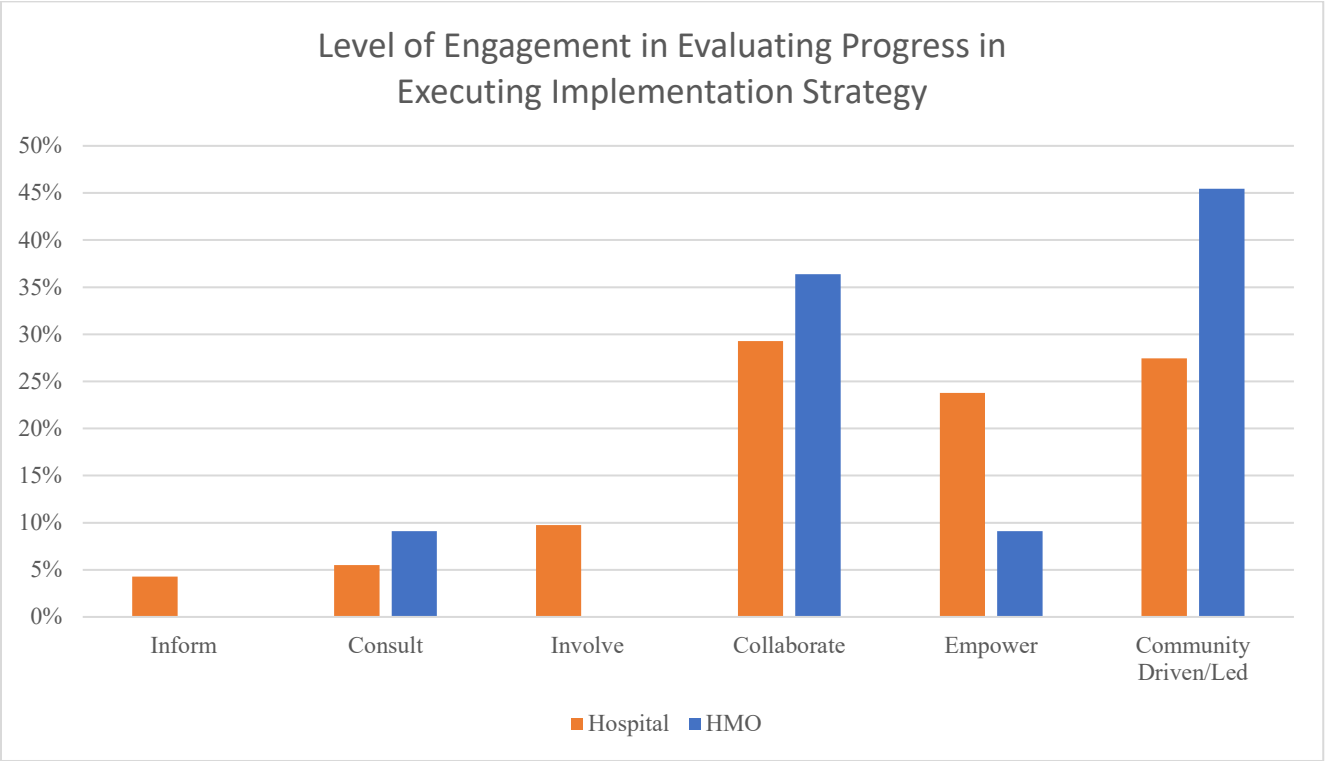
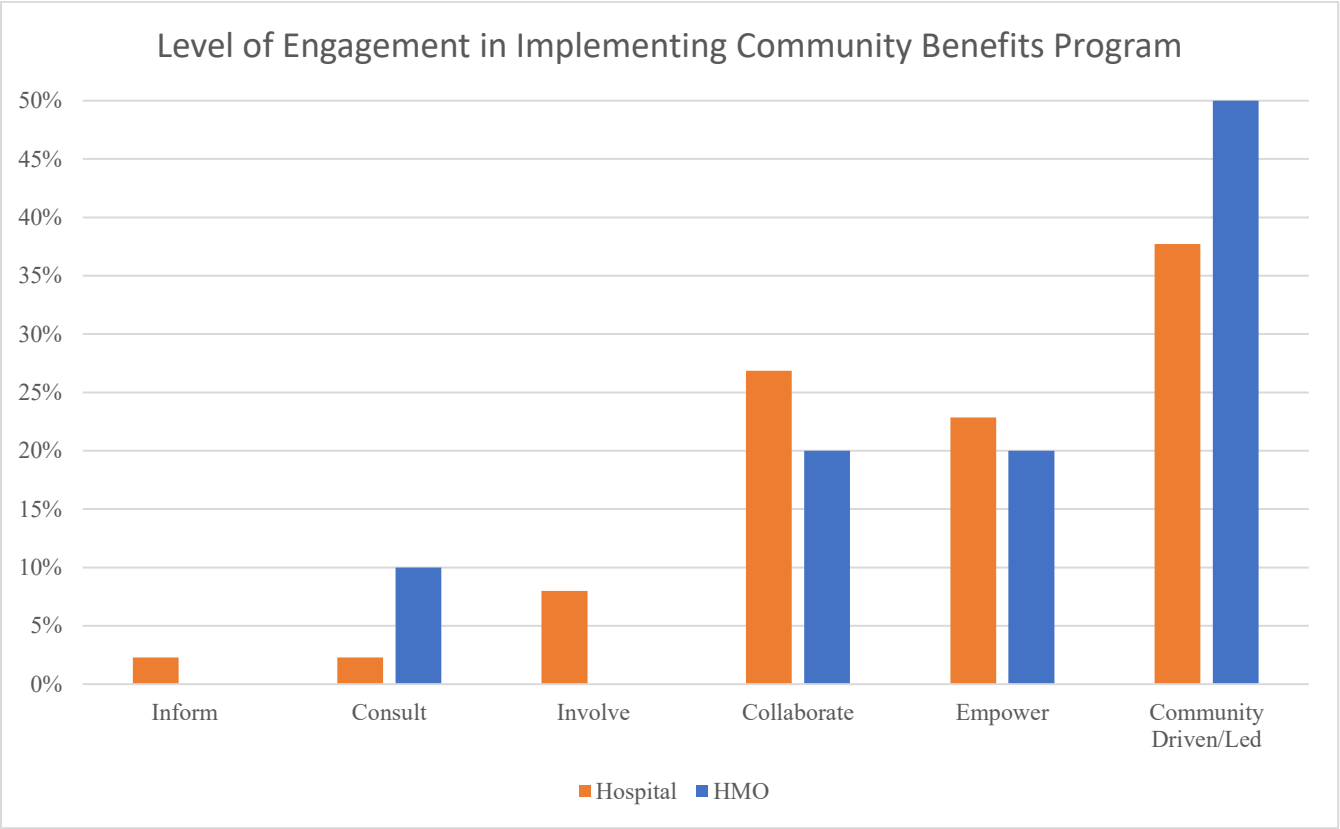


Overall Level of Engagement with the Community in Developing and Implementing a Plan to Address Identified Health Needs



Level of Engagement in Selecting Community Benefits Programs

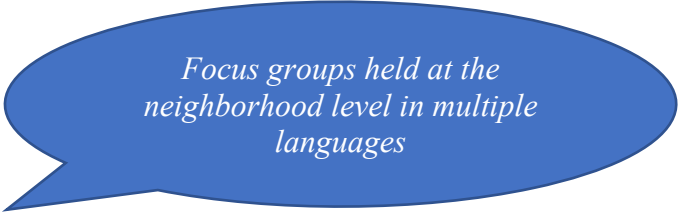




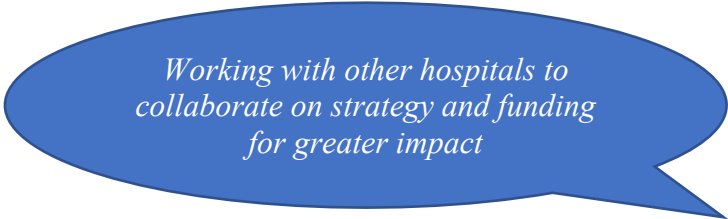
Excerpts from FY 2020 Community Representative Reflections

The Community Representative Feedback forms also ask community representatives to provide examples of successful community engagement strategies by hospitals and HMOs and to reflect on changes to community engagement strategies that they would like to see moving forward.

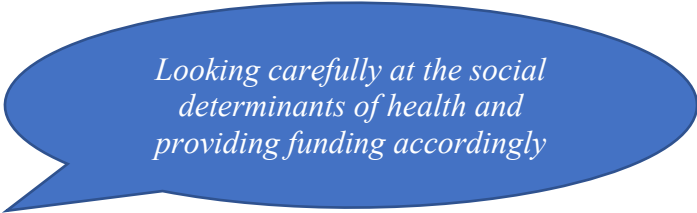
What hospital or HMO community engagement strategy has worked well over the last year?




Focus groups held at the neighborhood level in multiple languages



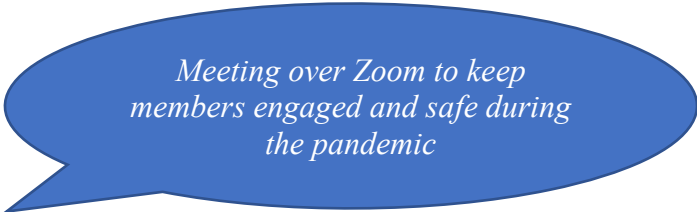
Working with other hospitals to collaborate on strategy and funding for greater impact



Looking carefully at the social determinants of health and providing funding accordingly



Having an active leadership role in the community, not just inside the hospital walls



Meeting over Zoom to keep members engaged and safe during the pandemic

*Robust surveys and stakeholder
interviews*

*Transparency of COVID-related
and health equity data*

What changes would you most like to see in your engagement moving forward?

Do a better job at dissemination

*More active outreach &
engagement with persons of color,
LGBTQ, young adults,
bilingual/bicultural community*

*Find ways for community members to
share about sensitive topics and
experiences that do not involve public
disclosure*

*Promote cross-sector partnerships,
collaboration, and information
sharing across the broad health
system*

*Be open to new and emerging needs
as a result of the pandemic and
include representatives that can best
speak to those needs*

*Evaluate the impact and feasibility of
making one or two larger grant
awards rather than 12 or so smaller
grant awards*

*I would like to better understand my
role as a CHNA participant*

*Looking forward to eventually getting
back to in person meetings!*

*I always feel that too much jargon is
used. I hope to see that there is less
usage of acronyms and more
explanation*