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2015 Edition

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Printed in the United States of America.

Appendix A: Reference for Chapter 1

A

COMMUNITY BENEFIT INVENTORY TEMPLATE

The instructions and template below can be downloaded at www.chausa.org/guideresources.

Instructions: Use this form to document programs or services that your department provides for the benefit of the community. Here are some criteria you can use to determine if the program/service is a “community benefit.”

- The program or activity addresses a community need. The Internal Revenue Service states that community need can be demonstrated through the following:
 - A community health needs assessment developed or accessed by the organization.
 - Documentation that demonstrated community need or a request from a public agency or community group was the basis for initiating or continuing the activity or program.
 - The involvement of unrelated, collaborative tax-exempt or government organizations as partners in the activity or program.
- The program or activity addresses a community benefit objective:
 - Improve access to health services.
 - Enhance public health.
 - Advance increased general knowledge.
 - Relieve or reduce the burden of government to improve health.
- The program was started/provided primarily to benefit the community as opposed to benefiting the organization (such as marketing or case-finding).

*Also attached is a document, *Community Benefit Categories and Definitions*, that provides specific examples.*

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Name and brief description of the program:
Community health need being addressed and how the need was demonstrated:
Sponsoring department:
Target population:
Program site (community, hospital, campus):
Number of persons served or other unit of service:
Cost (if known):
Funding/Revenue (if known):
Contact person name, phone number and e-mail address:
List community partners:
Comments: