The Importance of Community Governance

HEALTH CENTERS AND COMMUNITY INVOLVEMENT

Health Centers are unique among health care providers in that they are required to be community-directed, non-profits with patients making up more than half of their governing boards. Health centers must be located in areas where the demand for care far exceeds the supply, and open to all regardless of their insurance status or ability to pay. While all health centers provide primary and preventive care, most also provide on-site dental, pharmaceutical, mental health and substance abuse, and services that facilitate the use of health care, such as transportation, translation, outreach, home visits, and health education. As a result, health centers improve access to care for 17* million people across the nation, including 1 in 5 low income, uninsured individuals, 1 in 9 Medicaid beneficiaries, and almost 1 in 4 of low income minorities. Currently, over 1,200 health centers deliver care through over 6,000 service delivery sites. Research points to the fact that health centers improve health outcomes, reduce health disparities, and lower the use of costly hospital services.  

PATIENT-MAJORITY GOVERNING BOARDS

Key to health centers’ successes is their community governance involvement in service delivery decisions. They are the only health care provider type required by law to be governed by a patient majority board. At least 51% of a health center’s board must be active patients of the health center. Board members represent the races, ethnicities, and backgrounds of the community served by the health center, and can therefore speak to the communities’ needs. Community board members make decisions on the services offered by the health center, monitor finances and operations, set policy, and draft comprehensive strategic plans, thereby giving the community a voice in the care they receive.

The boards’ function is extremely important, allowing for democratic, community control over health center operations, including long range planning and policy development of the health center. A recent survey of health center board chairs found that a majority (83%) are community or consumer representatives. Additionally, most the board chairs agreed or strongly agreed that “consumer members have a major role in decision making” and identified the most important board function as assuring access to health services for the poor and underinsured in the community.  

ADVANTAGES OF A PATIENT-MAJORITY-RUN HEALTH CENTER BOARD

Community participation in health care decision making makes health care providers more responsive to community-defined needs. Studies indicate that consumer participation on governing boards ensures greater board focus on the scope of the care delivered, and results in higher quality care, lower cost services, and better procedures for consumer complaints.4 According to a study on the effect of consumer participation in health plan operations, boards with the most consumer participation have a higher quality of overall programs. As a result, the community-governed organizations excel in addressing patient needs and complaints. Another study found that community-run non-profits actually reduce both financial and cultural barriers to care. They also employ more minority individuals and more frequently provide community health programs and outreach services than their for-profit counterparts. Thus, health centers, with their patient-majority boards, are better able to respond to the needs of the community since many of their board members are of ethnic/minority groups.  

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