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Physicians as an essential link

The Top 10 Roles They Can Play

In the Fall 2001 AHP Journal, Part I of this series addressed the objections physicians often present when faced with the idea of participating in fund development, and the ways fund raisers can address those objections. This article presents some of the many roles physicians can play in fund development.

Despite concerns of confidentiality, patient loyalty and HIPAA regulations, there are distinct roles a physician can play to advance health care through philanthropy. While there may be a number of variations to the following, this article will focus on what we believe to be the top 10 roles of physicians in fund development. They are sequenced from those that are the least involved and that physicians are likely to find least objectionable, to those that require the most involvement and commitment on the part of the physician.



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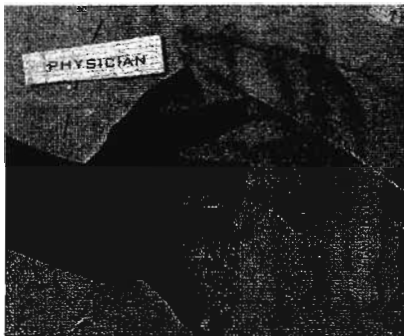


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By Rick Bragga, FAHP, CFRE and Steve Meyerson, CFRE

1 GOVERNANCE

Many physicians, if they are so inclined, have the opportunity to participate in medical staff or medical specialty governance and committees. Others are asked to be involved in trusteeship/governance committees—oftentimes for a medical office building or similar organization. Most physicians, like other individuals, are honored to participate in a governance role—especially at the hospital, health system or even at the



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foundation level. Depending upon time involved and other requirements, their acceptance is highly influenced by who has asked and who else is involved. Another, less commonplace, role is to serve on a Medical Staff Fundraising Board of Advisors. Each of these governance

opportunities gives physicians a sense of belonging and input to the determination of the hospital's future.

2 VOLUNTEERING

Whether physicians serve in a governance role or not, they can fulfill additional volunteer functions in fund development. Hospital-based development councils and area or service-line specific fundraising committees that require assistance can also benefit from a physician's expertise.

Physicians may also choose to be a part of the thank-you process (see also Role #10, "Stewardship").

3 PLANNING

Planning is an important activity in which physicians can play a fundamental part. A traditional planning role for physicians is to serve on the strategic planning committee for a hospital, foundation or health system. Their perspective on the industry brings to the process the viewpoints of two critical and influential market segments—physicians and patients. They may also bring a very self-interested and dynamic opinion to service-line or program-specific planning. Depending upon their background and interests, physicians also can be very technically-oriented and entrepreneurial.

Whether it is a proposal, case statement or other collateral material, physicians can provide a valuable reality check by reviewing plans and proposals. Will this document, video or proposal resonate with their patients, the community or other

physicians? Giving physicians the opportunity to provide this type of feedback can build interest and ownership in the project or product. In addition, broadening a document's perspective creates a richer and more diverse communication vehicle.

4 ORGANIZING

This is another role in which physicians can be helpful and yet not actually ask for funds. Physicians can assist staff in structuring fund-raising plans, identify key resources for organizing or leadership, and organize/chair the planning process. Whether assisting in the development of promotional plans or in packaging funding proposals, physicians can act as catalysts to move things ahead, encourage, prod and remind.

5 PROSPECTING

When looking for prospects for donations, a physician's input is priceless. Who else has the stature and contacts of a physician? They are often connected to the community in many ways. Their network of contacts—far beyond their patients—can be invaluable in advancing philanthropy at institutions. For example, physicians are often members of organizations, such as country clubs, other private clubs, service clubs and other civic associations, that have individuals of affluence and influence. Each holds a wealth of opportunity for raising awareness, presenting a case and generating support.



Like many other individuals of prominence, physicians have relationships with others who have wealth and connections to wealth.

A physician's family—spouse and children—usually attend activities and organizations that will serve as a pool for prospect research. Private schools, tennis academies, gymnastic clubs, equestrian academies, etc., are just a few obvious examples of the “kid/spouse-networks.”

The physician's spouse is particularly valuable as he/she can open another world of opportunity for the development of community contacts and prospects. The spouse is often involved in a different set of organizations and business and social groups than the physician. Due to a physician's time constraints, working with spouses to identify prospects, introduce development staff, etc. can often be easier than working with physicians directly.

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tionships include automobile dealers (direct donation or in-kind support), real estate, insurance and investment brokers, financial planners and investors in businesses, projects, banks, etc.

Other valuable groups to which physicians belong include:

- Religious organizations such as churches, synagogues or mosques;
- Private and family foundations;
- Neighborhood associations and friends;
- Other boards they serve or have served as board members.

Physicians can also identify groups of colleagues. Alumni of their colleges and medical schools living in the area, retired physicians, and widows and/or children of retired or deceased physicians all fit into this category of prospects.

A comprehensive discussion of grateful patients would completely fill a separate article (see *Physicians and Fund Development, Part I: Overcoming the Objections, AHP Journal, Fall 2001*). There are HIPAA regulations to consider, and some states have even more restrictive statutes. However,

there are generally some basic connections that physicians can make, such as a:

- Letter of introduction to a patient base with involvement and reply options;
- Display of materials in waiting rooms;
- Process for involvement and networking through their office managers and nurses;
- Contact with patients to determine interest and gain consent to be contacted by a development officer.

6 CULTIVATION

In this capacity, physicians can participate in the process without having to “ask for money.” While physicians may choose to extend their activity to contribution and solicitation, this role is more informational and educational.

A common role for physicians is that of medical expert, whether as special speaker at a home reception or board meeting, host of a hospital luncheon or guide for a hospital or other facility tour. Their credibility,



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knowledge and commitment of time sends a strong message to all involved.

A physician can host a "vision reception" at his/her own home for neighbors, patients, friends and colleagues. This can be especially effective when the physician speaks about his or her own medical specialty or area of personal passion and what could happen if sufficient support is generated. He/she may even choose to co-host this dinner or one held elsewhere with the partners from the practice. Coalitions of physicians, from a variety of practices and specialties, who have interest in seeing the same goal accomplished, can also be highly motivating (e.g. Doctors Without Borders, etc.).

Other dinners or lunches a physician can facilitate would include a special dinner meeting with partners



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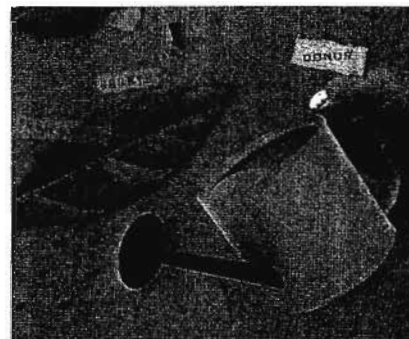
to encourage group support, or dinners with prospects or prior donors and their family members to present a program or project and request assistance.

One very unique role that physicians can play, because of their relationships and standing in the community, is to provide entry and introduction to ethnic groups and foreign citizens they may know or with whom they may be acquainted. Breaking the ice with more private or insular communities opens doors for both sides and provides opportunity for mutual benefit.

7

INVESTMENT-DONATION


By making their own personal investment/donation to a project or campaign, a physician's role becomes not only very personal, but also that of an investor. Their gift may be to a restricted fund supporting an area of personal interest, to physician education (through an annual symposium or other educa-




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tional vehicle), or to nursing or allied health professional education.

In the area of research especially, physicians have two roles open to them. First, there is the traditional one of supporting research and the



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infrastructure of people required to conduct medical research. Today, however, there is a second role that can involve and excite the more entrepreneurial physician. Creation of a fund to encourage and support specialized and experimental equipment and procedures is one example. Such an "incubator fund" advances medicine, enhances the institution's reputation and provides an opportunity for physicians to create a certain amount of visibility and good will among their colleagues. Once successfully piloted on a smaller scale, projects underwritten by the fund may even generate other funding opportunities through federal or private research grants.

8 SOLICITATION
(see Physicians and Fund Development, Part I: Overcoming the Objections, AHP Journal, Fall 2001)

As with grateful patients, HIPAA regulations, private inurement issues and state statutes must be considered. Physicians may participate in solicitation activities directly or indirectly.

Direct solicitation may involve any constituent group and include:

- Letters of solicitation attached to proposals; (also see Role #9, "Advocacy")
- Serving as chair of a fund-raising committee;
- Directly participating in the solicitation of individuals (patients who have given prior consent, former patients and others), vendors (hospital and private practice vendors), and other foundations and corporations.

Indirect solicitation includes some or all of the following:

- Letters of endorsement attached to proposals (also see Role #9 below, "Advocacy")
- Serving as honorary chair of a fund-raising committee;
- Listing on fund-raising project or committee letterhead.

9 ADVOCACY
To be most effective, everyone advocating on behalf of a program or project should be a donor. Through advocacy, physicians have another chance to work on behalf of the hospital without personally asking for a contribution. One way they can be an advocate is to write letters of endorsement, which



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can then be attached to proposals. Other roles would include speaking at external presentations such as Rotary or Kiwanis or at cultivation events like home receptions.

Finally, no one speaks more authoritatively to medical partners, medical staff colleagues and department physicians than another physician. In this particular instance, the value of the peer relationship can not be overestimated.

10 STEWARDSHIP
Perhaps the most often neglected area of the fund development process is the final activity in which physicians can participate without having to ask for a gift. In fact, this should be one of the first areas where we involve physicians. They can provide progress reports, personal letters to donors, widows and foundations.

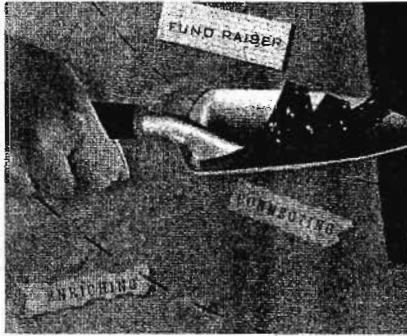
Another rewarding occasion is to be a part of and/or deliver a photographic memento showing equipment, room, patients being served as a result of the donor's contribution. This is the joyful part of philanthropy in which most donors demonstrate a great deal of gratefulness. It reinforces the value of going through the development process.

CONCLUSION

For physicians, there are innumerable variations and activities associated with the roles presented here. Nearly every physician has something that he/she is passionate about, or about which he/she cares deeply.

With some individuals, digging deeply enough to find that passion or

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interest may not be a cost efficient or effective use of your time. With physicians, however, you can count your efforts and multiply them by four. Once a physician is actively involved, many times you get his/her family involved as well. In addition, their personal commitment to this cause will create openings for them to educate and encourage their colleagues, their patients and the community.

Physicians are intelligent, well connected, dedicated and caring individuals who have a vested interest in the outcome of philanthropic activities that advance patient programs and services. In this article we have enumerated our top 10 roles for physicians—eight of which do not directly require giving or asking for money.

Discover the project or area that excites a physician's passion. You can then help him/her find their way through the process of involvement, which will ultimately lead to giving and getting gifts that improve your hospital, the health of their patients and the community. ■

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