

Summary Report of the VIM Board of Directors Off-Site Planning Session
“Converting Strategies into Action: Identifying and Setting Implementation Priorities”
Hilton Head Island Library - Community Room
October 9, 2018 9:15 a.m. - 3:15 p.m.

Truly excellent Boards share similar characteristics regardless of Mission and Vision. Their members are engaged, informed and committed clear thinkers who appreciate that today’s decisions may well have long term impact. While focus is naturally on the immediate organization served, the potential to make a powerful difference in the broader community is often present and, as such, gaining widespread support and involvement exists and is worthy of exploration and pursuit.

The attached agenda for this off-site meeting was designed to ensure that we, the Board of Volunteers in Medicine – HHI continue to aim high, to do whatever it takes to remain an excellent Board. The proposed Strategic Plan served as the backdrop as well as the primary focus for the day’s activities. Input from the Board was deemed essential before moving forward to a vote at the Board meeting in December, 2018. The session structure very intentionally provided time for presentations and discussion where questions could be asked and answered, suggestions made and concerns addressed.

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Participants:

VIM BOD

Ned Allen, John Anderson, Tom Brettingen, Joseph Buckingham, Jim Collett, Dedria Cruden, Ric Gorman, Frederick Hack, Michael Hall, Jim Hicks, Robert Lindsey, Honorary Board Member Mary Ellen McConnell, Linda Meir, Paul Moeri, Mike Pasquale, Marion Payne, Marc Puntereri, Charles Sampson, Joe Scodari, Steve Siegelbaum, Lynn Jennings Taylor, Julie Tome and Andi Argast

VIM Staff

Ginger Allen, Raymond Cox, Susan Jones, Demetra Ladson, Stan Stolarczyk

VIM BOD Absent

Honorary Board Member Kay Bangs, Morris Campbell, Randy Light, Robert Sable

Welcome and Opening Remarks Jim Collett, Board Chair

As always, Jim’s enthusiasm and passion for Volunteers in Medicine were abundantly clear. He began his welcome by expressing his personal thanks for the amazing \$50,000 donation given to

the clinic by the Latino community. This remarkable amount represented the proceeds from the annual Food Festival at Shelter Cove.

While building relationships is an important intangible component to this type of meeting, tangible results are very real as evidenced by the output from the 2017 event. Jim highlighted the following:

- 1) Increased the number of Board meetings to 6 annually
- 2) Created a Technology Committee with an electronic records and data security focus
- 3) Restructured the Development Committee (continued emphasis on fundraising) and created a subset Marketing Committee with the purpose...as the name suggests.... of marketing VIM
- 4) Created a job description for Board of Directors
- 5) Added the Dental Director as a permanent Board member
- 6) Created a more structured Board recruitment process (additional info to come on the utilization of a Board Matrix, a form to be used to identify strengths and gaps in Board demographics)

“State of the Clinic” Raymond Cox, MD, Executive Director (Please see report included in the Board Retreat Package rec’d via email)

Dr. Cox commented that the “State of the Clinic” from a revenue and profit perspective is ***strong!*** With the sad loss of Dr. Jack at the end of 2017, it was difficult to predict how his passing would affect the clinic’s financial outlook. The manner in which donors (former as well as new) were determined to honor his memory and, in so doing, to ultimately help to sustain Dr. Jack’s priceless legacy was a reassuring outpouring of love and respect.

As he does at regular Board meetings, Dr. Cox shared a patient story, this time of a mother and son who were in need of medical attention and turned to VIM for help. The scenario he described highlights much of what we do each and every day. The clinic’s ability to intervene, to be with patients in time of crisis, is well documented and can never be taken for granted. Patients rarely do.

Dr. Cox introduced Demetra Ladson, recently hired Medical Records Manager. Her position will be covered for three years through a special fund designated for this purpose. Although in this role for only seventy days, her positive impact on Quality Improvement is already evident. She along with John Anderson and Joe Buckingham, new Board members with a high level of IT expertise are tackling a variety of issues, specifically several pertaining to HIPAA (i.e. password security) that have been a source of concern. Focus on IT infrastructure is ongoing and intense, permeating many levels of clinic operations. Proposed clinical metrics, another aspect of QI, were also introduced (and will be considered more fully in the afternoon session). Dr. Cox specifically pointed out that our mammogram program (patient coverage, adherence to appointment schedule) is above the national average.

Considerable emphasis has been directed toward achieving fiscal sustainability.....an all-out effort to establish approaches that are more long term / ongoing. This could lessen the intensity

(and dependency) surrounding the annual, repetitive search for funds required to support the budget. Development is key to this action plan.

The total budget line for fiscal year 2019 is **\$1,770,400**. This is a challenge made more so by several factors including: 1) the lack of funding from Hilton Head Hospital; 2) the elimination of the \$15 patient fee; 3) the loss of the Avon & Komen mammogram funding; 4) costs associated with IT infra structure enhancements (a critical project). However, on a positive note, there are also very encouraging signs on the financial horizon. These include: 1) VIM as the beneficiary of several large grants; 2) the anticipated \$700,000 annual appeal goal seems to be a realistic one; 3) measurable strides underway in VIM's Marketing efforts; 4) financially successful fundraising events; and last but definitely not least 5) a capable, energetic team prepared to support the "cause".

Ice Breaker Marion Payne, Facilitator

Building relationships strengthens a team, enhancing its ability to work together for the common good. This year's "ice breaker", once again facilitated by Marion Payne, very effectively met this objective. She instructed participants to create a vanity plate.....something that represented who we are as individuals, what's important in our lives, in twelve or fewer letters. Each of us had the opportunity to then briefly explain the meaning behind our personal vanity plate. Multiply those explanations by thirty or so and by the end of the exercise, the "ice" was truly broken!

Defining A VIM Board Member Role Mike Hall, Governance & Planning Chair (Please see the Director Job Description included in the Board Retreat package rec'd via email)

One of the "to – do's" emanating from the 2017 retreat was the need for a Director job description that would replace the Expectations and Responsibilities document included in the handbook as of 2014. According to Mike, the one term that most succinctly captures expectations is *engagement*, actively serving as a fully involved Board member in order to move Volunteers in Medicine forward. Directors must be Ambassadors and Advocates with three major pillars of responsibility (regardless of specific committee assignments). They are 1) Policy Making; 2) Philanthropy; and 3) Fiduciary. Understanding and adhering to these job description components are integral to the Director's role, exercising sensitivity to established boundaries between the Board and Clinic operations, ensuring the delivery of high caliber patient care and monitoring financial management....all under the umbrella of Board oversight.

Volunteers – Our Critical Resource Stan Stolarcyk, Director of Volunteers (Please see presentation overview included in the Board Retreat package rec'd via email)

By definition, volunteers are the heart and soul of Volunteers in Medicine. Day in and day out to the tune of 1,000 donated hours each week, they make it happen. And they do this under the direction and management of Stan Stolarcyk and his part time assistants, Dottie Byers and Jacque Montgomery. Their customer set includes both Volunteers and Patients. In his role as Director, Stan oversees Recruitment, Orientation (mandatory for a number of reasons including the reinforcing the importance of confidentiality), Placement and Training, Creating and

updating job descriptions, Department meetings, Communication, Scheduling and Staffing and Recognition. Although detail of the responsibilities listed above was provided in Stan's presentation, for the sake of emphasis.....concerning what every Director should know and be able to comfortably communicate ...the following fundamental information was extracted:

Patient (Volume) Stats – using August 2018 (31 sessions) as an example

- Clinic patients seen.....1579
- Dental patients seen.....360
- Mental Health patients seen.....134
- Total # of patients seen.....2073

Eligibility - the screening process

- To be eligible for clinic services.....a patient must live or work on HHI or Daufuskie or be a dependent of someone who does
- Must earn less than 200% of federal poverty level (*Note: At a minimum, 70% of patients are employed, majority under 18 are in school*)
- Does not have *usable* insurance
- Is able to provide documentation of the above
- Is rescreened annually
- If unsure about eligibility, we err on the side of compassion

Volunteer Stats.....Significant in #'s, Unparalleled in Dedication

- 120 Physicians
- 125 Nurses
- 26 Dentists, 6 Dental Assistants
- 40 Specialized personnel (12 Counselors, 1 Podiatrist, 1 Chiropractor, 2 Physical Therapists, 18 Pharmacy Associates, 7 Lab techs)
- 24 Med Students
- 15 Cadets
- 250 Non-Professional or lay volunteers
- Each shift requires 20 – 60 lay volunteers (depending on the # of physicians, nurses, dentists and support personnel on duty)

Recruitment – How do we ensure an ongoing supply of volunteers?

- Volunteer referrals are an excellent resource; direct interested individuals to Stan
- In addition, formal avenues include the Lowcountry Volunteer Connections, Community newsletters, Events, VIM's Website, In person inquiries, Island Packet
- Knowledgeable Directors can be very effective recruiters

- Volunteer assignments are based on skills and availability; schedules are flexible and designed to be compatible with the volunteer's calendar...a recruiting plus

Volunteer Recognition - Simple by other standards, perfect for VIM

- Low keyed at the request of the volunteers in order to minimize expenses (and instead direct \$'s to patient care)
- Annual "We appreciate you bringing your own lunch" event; service pins awarded

Communication - How is it possible to keep everyone informed?

- Constant Contact manages VIM's 3,500 email contacts; provides an opportunity for staff to effectively communicate, on a real time basis, with volunteers and vice versa; contains links to weekly enewsletters

Patients – VIM's culture guides approach to care

- All belong to our Circle of Caring first envisioned by Dr. Jack
- Courtesy, kindness, respect and dignity embedded in all that we do

Strategic Framework Overview - Joe Scodari, Board Vice Chair (Please see 2018 Strategic Planning Effort included in the Board Retreat Package)

Volunteers in Medicine....The Staff and Board of Directors are grateful to Joe for his outstanding leadership on this project. He has provided the following perspectives on the strategic planning process and its outcomes:

- The clinic has typically updated strategic plans approximately every 5 years
- This year's effort is focused on the period from 2019 through 2023, and took place during the 25th anniversary of the clinic
- Process involved a working group of volunteers, employees, board members and also included input from outside the clinic
- The foundation of the plan is the Mission and Vision that was established many years before
- Four "Strategic Imperatives" were identified during the process; these are defined as the initiatives that must occur to support the mission and vision of the clinic; in brief, these initiatives/priorities are as follows:
 - Deliver high quality care to our patient population
 - Recruit a large team of highly talented medical professional and lay person volunteers, and a small team of dedicated compensated employees
 - Secure the revenue necessary to operate the clinic each year, manage expenses in line with charitable organization benchmarks, and carefully manage the clinic's endowment
 - Effectively market and communicate VIM to the entire stakeholder community in order to build awareness and support fundraising.
- Each of these strategic imperatives is supported by a short list of key actions to accomplish them

- The plan is summarized in a one page “Strategic Framework” and is supported by two pages that identify the Clinical “Key Performance Indicators” and Financial “Key Performance Indicators” and when finalized will be available to all stakeholders.

Key learnings during the process were as follows:

- The original vision of Dr. Jack McConnell is as strong today as it was when he conceived it; it lives on in the volunteers and employees that serve the clinic today
- The metrics used to define quality care are derived from the standards of care identified by the relevant specialty medical communities in the U.S. and globally
- Through “required reading” recommended by the clinic’s financial lead, executive director, and head of development, the working group came to understand that the best charitable organizations in the country are often judged by the degree to which they deliver on what is called their “Organizational Value Proposition”. That is, the return on the investment made by the contributors and grantors to the organizations they support
 - Because VIM delivers its value largely through the efforts of a large cadre of volunteer physicians, nurses, and other lay professionals, the payback on each dollar contributed to the organization is extraordinary - \$2.63 for each dollar contributed.
- The entire community served by VIM benefits from this return, not just the patients treated by the clinic
- We have extraordinary group of people that serve the clinic — volunteers, employees, and contributors alike!

**Technology Update - Demetra Ladson, Medical Records / e-MDs Support Manager
(Please see presentation overview included in the Board Retreat Package)**

The Board welcomed Demetra Ladson, the newest staff member, whose energy and positive attitude are apparent. In her short tenure, she has already formulated goals and established a plan to deliver much needed efficiencies to her area of responsibility. She discussed steps underway to increase Physician / Nurse usage (and comfort level) in e-MDs through on going, daily training sessions and all-day user support. More providers are using e-MDs and this will eventually improve accuracy and help decrease charting and scanning time. Demetra also mentioned the new vital machines capable of integrating data into the computer network plus her objective to upgrade EMR software coding capability that would allow for more accurate notation of specific diagnosis. Modifications in the medical records room and a separate workspace for scanning are already proving to be positive improvements.

ROI for Non-Profits - Susan Jones, Accounting Manager (Please see presentation overview included in the Board Retreat Package)

Volunteers in Medicine is as relevant today as it was yesterday and will be in the foreseeable future. It is, therefore, our responsibility to provide the facts that prove our “importance”, the *value of our services*. As Susan’s presentation indicated, the population of the Bluffton / HHI area is approximately 55,000 and of this number, 14,000 are low-income and uninsured. 68% of the low-income, uninsured population is part of our “active patient” base. In that sense, VIM has

established itself successfully as a trusted provider. (Dr. Cox's earlier presentation indicates that our location places the clinic very much in the midst of an identified area of poverty.)

Susan outlined the principle(s) of the book "ROI (Return on Investments) for Non-Profits. It involves a paradigm shift not only in terminology but more importantly in methodology.....what is required of a non-profit to be financially successful in today's world. Donors are investors, gifts are investments, outputs are outcomes. Impact replaces emotion. Although we know that clinic services are priceless, we need to be able to prove how we contribute to community life, to show how we make a tangible difference.

It is a relatively new phenomenon for Volunteers in Medicine to be capable of attaching a credible, fact-based price tag on its services. However, since we are now better able to capture specific supporting data, our value on several fronts can be unequivocally stated and should be generously communicated. ***The Total Value of Services Provided is over six million dollars! Hospital Costs Avoided = \$6,862,925, Hospital Costs Avoided Per Patient = \$1,904!!*** (Based on data that assumes potential hospital ER visits of the uninsured are approximately 5,000 annually.)

Particularly in light of the zero funding of VIM by Hilton Head Hospital (Tenant), we have a story that needs to and will be told. Our ability to sustain and thrive, to be successful, is dependent upon it.

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Breakout Session – The Board divided into four groups with the facilitator of each reporting back to the full Board on its assigned discussion statement. The outputs are outlined below:

Group # 1 (Drs. Cox and Siegelbaum) Assessing and improving the quality of care provided in our patient centered model

The following was provided by the facilitators:

- The clinical and financial metrics developed to date are the result of collaborative work involving multiple clinic departments and Board representatives and have been produced with assistance from USC.
- There are certain KPI's (Key Performance Indicators) that will take time. Although the need may have been identified, accurate collection and implementation is an evolving process. However, vetting of clinical and financial data sets is continuous as is information exchange with other free and charitable clinics.
- There is agreement concerning the clinical metrics presented (see Dr. Cox's report in the pre-meeting package) with one slight modification.....Dental caries diagnosed will now read "Dental caries diagnosed *and addressed*"
- Environmental scans from the state are in a pending status.
- The Quality Committee has been expanded to include representation from the pharmacy and nursing staff. Others will be added as deemed necessary.
- The discussion group recommended the Medical Executive Committee participants be sufficiently diverse to ensure adequate representation of / from the Quality function.

In full Board discussion, a suggestion was put forward regarding the possible increase of medical professionals serving on the BOD. Governance and Planning will review.

Group # 2 (Mike Hall) Strategies for attracting and retaining the necessary mix of volunteers and employees

Discussion highlights:

- VIM's 600 plus volunteers are a built-in army of recruiters. To be effective, they must be equipped with basic information.....talking points (e.g. no government funding, community supported, # of patient visits, breadth of services provided).....ready to share as the situation requires. Their passion for our mission and vision is powerful and probably without equal (even when compared to more sophisticated, more costly recruiting efforts or materials).
- Board members can also serve as excellent VIM Ambassadors and in so doing help to source professional and lay volunteers and potentially to identify future BOD's. They too must have access to VIM fundamentals.
- There has to be tie-in with the local Chamber and Realtor Association(s). Need to pursue how best this can be accomplished. Even something as simple as a small brochure or pamphlet for inclusion in a new resident packet (if indeed the Chamber distributes one)....."important places and faces on the island" that you should be aware of..... e.g. Volunteers in Medicine...would be a helpful communication vehicle.
- Concerning employees.....Employer competitiveness is evaluated on a few levels. Salary obviously, amount of paid as well as unpaid time off and, of course, the availability of medical benefits. An external salary review is currently underway. At some point, sooner rather than later, we need to review and ultimately address the medical benefits component. Yes, our FT employees have an allowance to help offset the monthly cost but there is no plan, no insurance umbrella as such. The fact that we are an organization dedicated to health and well-being but are without a defined program for our employees is ironic at best.

At the group level and in the full board discussion that followed, the concept of partnering with other free and charitable clinics (~1200) or with other reliable non-profits....widening the pool of potential insureds.....is worthy of pursuit. It is hoped that Ned Allen, as a VIM Director and also an Alliance Director, could be an effective advocate on this subject.

Group #3 (Ginger Allen, Susan Jones) Fiscal sustainability and / or in-kind services

Ginger provided the following discussion highlights:

- Discussed importance of linking clinical KPI's to financial metrics so that we can better illustrate community impact. This is particularly important as we seek new funding partnerships. Health information manager will be collecting quantitative data specific to the ten chosen KPI's which will in turn be linked to financial savings for the community.

- Sustained revenue sources...implementing CARS donation program. VIM Institute selected this car donation program which is the largest of its kind. VIM HHI will be leading the pilot program for the car donation program which has huge potential as annual revenue source with very minimal expense of effort to the clinic.
- Planned Giving initiative – we certainly have a Planned Giving program in place as we do receive bequests; however, little to no response on mailings. Planned Giving is a sensitive topic and group opinion that should be done on more face to face efforts as opposed to mass appeal.
- Capital Campaign on the horizon and will be addressed as an organization.
- Companies who Care initiative will continue – VIM is only non-profit that directly affects local businesses' bottom line with improved worker health and productivity, decreased absenteeism and general workforce readiness.
- Discussed need to identify grant researcher as seeking new sources of funding from foundations whose priorities align with Volunteers in Medicine's mission.

Group #4 (Ric Gorman) Enhance Fundraising efforts through aggressive Marketing of the VIM Brand

Ric provided the following summary which he describes as very relevant to goals for the newly formed Marketing Committee:

- We have begun building a new image campaign for VIM, which is based upon powerful testimonials
 - Primarily from patients, and one or two volunteer and Companies that Care stories
- A rebuild of the VIM website is underway
 - Target delivery date is first week of November
 - This medium will be a primary focus as we move forward
- An effort to get selected stories to the main stream press is underway, and should play a key role in the future
 - The suggestion was made to work on a story like “what if VIM did not exist on Hilton Head”
- Best Practices as a resource is being used with
 - Other VIM affiliates

- Make A Wish (which uses “patient stories” to drive donations)
- Key partnerships in the community need to be fostered (need a working group to lead these efforts)
 - Community Foundation of the Low Country
 - United Way
 - Both of these have serious grant potential as we learn more about how to target specific fund requests per these organizations grant processes
- Working Groups need to be formed to focus on key revenue targets, with these three identified specifically;
 - The Hospital (hold them accountable for how much VIM saves them)
 - The Chamber of Commerce (pursue their open endorsement of VIM as essential to employers on HHI, especially in a worker crisis as currently exists), pursue being named as the Chamber’s local non-profit organization of the year
 - Governmental support-Beaufort County/Town of HH (pursue funding because VIM is a vital component to easing the worker crisis)
- A working group needs to be formed inclusive of VIM Hilton Head and VIM Bluffton to establish common goals and a comradery, non-competitive relationship
- The quantitative data that Susan is producing related to the key clinical performance indicators (KPI) can provide marketing and Development with tangible data to facilitate better targeting of new potential grants.

In Conclusion

Volunteers in Medicine has never wavered in its commitment to provide high-caliber patient care to the uninsured and underinsured. The challenges experienced over the last twenty-five years have changed a bit and some may even have gotten more sophisticated. We will always be concerned with operating expenses and cash flow, but we need never worry about the dedication of the team.....that’s a given. We are troubled about how to repair an aging facility, a leaking roof, flooring that needs to be replaced, how best to “market” the clinic and reach all those who need us most, how to fix old computers or find funds to replace the ones that don’t respond, but again, we have proven time and time again that we have what it takes to overcome any number of obstacles that may surface. We have been, after all, commissioned to carry the torch Dr. Jack first lit a quarter century ago!

Special thanks to Kayla Westerbaan whose can-do attitude and administrative support are much appreciated by all who have been involved in this offsite meeting!

Report Respectfully Submitted By: Andrea J. Argast 10/20/2018

