

# PHILANTHROPY MAKES A DIFFERENCE

## CHRISTUS Health Reaps the Benefits of Its Successful Community Efforts in Southern Texas

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The mission of CHRISTUS Health is “to extend the healing ministry of Jesus.” What this might mean and how the mission is concretized in our current reality is found in its vision statement: “To be a leader and advocate in creating exemplary health care services, processes and structures that improve the health of the local and global communities so all may experience God’s healing presence and love.” Without minimizing the importance of acute inpatient care, the CHRISTUS vision leads employees beyond the hospital walls and into the communities.

In addition to its regional foundations, the CHRISTUS Health system ([www.christushealth.org](http://www.christushealth.org)) helps the communities it serves address their needs via the CHRISTUS Fund. Formed as a result of a mandate from the two sponsoring congregations of CHRISTUS (Sisters of Charity of the Incarnate Word in Houston and San Antonio), the fund’s intent is to provide resources to community-based, not-for-profit organizations whose vision, mission and goals are

consistent with those of CHRISTUS Health. Creating access to health care and other services for the uninsured and under-insured in communities served by CHRISTUS Health gives specificity to the grants awarded. The CHRISTUS Fund acts as a community partner to assist in the development and implementation of services to create sustainable health and also help in leveraging challenge grants.

### REDEFINING HEALTH CARE

So often in the United States, “health care” is considered synonymous with hospital care. Many, if not most, not-for-profit hospitals have well-established foundations with a long history of raising money for what is commonly referred to as bricks and mortar. Many philanthropists are attracted to the idea of making contributions to build new buildings and acquire high technology like CAT Scans, MRIs and Cath labs, especially if this “health care” comes complete with naming rights. And, of course, with the reimbursement challenges hospitals and acute care face today, it often is essential to raise money through philanthropy to supplement the limited insurance and patient payments received. Hospital administrators and foundation executives have thus become partners in the quest for philanthropic dollars to maintain the nation’s health care systems.

Nearly everyone wants high-tech care to be available to them when needed. The truth, however, is that acute, hospital-based care is usually not the most cost effective care. Today, the United States spends \$1.8 trillion per year on health care, yet ranks 37th out of 191 countries on the eight health outcomes tracked by the World Health Organization. The U.S. acute care-based model is costly for the health system and for society in general.<sup>1</sup>

Today, private health care providers must collaborate with public health workers to improve



From left, Mr. Cave is president, CHRISTUS Foundation for HealthCare, CHRISTUS Health Gulf Coast Region, Houston, Texas; Sr. Jokerst is vice president, mission integration, CHRISTUS Spohn Health System, Corpus Christi, Texas; Dr. Meyer is system director for community health, CHRISTUS Health, Houston; and Mr. Swasko is system director of philanthropy, CHRISTUS Health, and president and executive director, CHRISTUS Health Foundation.

health status. Knowledge about health must be integrated into lifestyle. Health promotion and disease prevention and management must become an integral component in health care delivery even though there is no reimbursement for these services. To finance these programs, fees charged must be supplemented by gift and grants. A single health system may not be able to measure the benefit of these programs, but society as a whole will gain.

The current acute care system most dismally fails the 47 million who are uninsured (15.8 percent of the population, up from 45 million and 15.3 percent in 2005).<sup>2</sup> The percentage of uninsured children rose to 11.7 percent from 10.9 percent a year earlier. In many communities CHRISTUS serves, a quarter to a third of the population does not have access to affordable health care services. The most cost effective way to provide these services is with community-based health centers and services. Just as for disease prevention and management, little or no traditional reimbursement dollars are available to cover these community based services. Most of the programs are designed to collect a modest fee for service from the customer; programs rely on contributions or grants to fill the gap between collections and costs.

Philanthropy becomes the cornerstone to funding whether the intent is to improve the public's health through prevention and wellness programs or whether the focus is to offer primary care and disease management for uninsured. It is important that the precious money invested add maximum value to the community health.

## STRATEGIC PLANNING FOR HEALTH PROMOTION AND DISEASE PREVENTION

Communities that are most successful in building comprehensive community health services have a systematic planning process that builds on existing community assets. A sound planning process is important to assuring the community is aligned toward reaching common goals and maximum value is achieved with the investment dollars. Planning helps avoid "random acts of kindness" without clearly established goals. Community health professionals are usually participating in community-wide planning activities. They understand how to plan and deliver programs and care; how to assess community status; how to assist with identifying priorities; and how to measure results or outcomes. Raising funds is usually not their forte. Community planning may be a perfect opportunity for foundations and community health to begin working together. Communities will welcome foundation representatives at their planning table. Or, foundation executives can join when it is time to discuss funding and support. Building community-wide support for plans is as critical as identifying funding. Foundation directors can be helpful with both.

## THE HOSPITAL FOUNDATION'S ROLE

Why and how would a hospital foundation become involved in this effort? Our belief is the foundation can raise awareness, promote, publicize and educate potential donors about community health needs. They also know the interests of donors and can often link donors with specific community projects or programs.

### CORPUS CHRISTI SAIL AWAY PROGRAM

CHRISTUS Spohn Health System is located in south Texas, primarily in the Corpus Christi area. Many residents enjoy living near the Gulf of Mexico and take advantage of the beaches and water sports.

Take your eyes off the sea and look around. You will see another part of south Texas. Many persons have diabetes. A disproportionate share of the population has experienced amputations, loss of vision and other limiting conditions.

Local citizens from different sectors became conscious of the need to offer more activities for persons with physical limitations. This idea motivated Richard E. King III, a local leader, philanthropist, and then-chairman of the CHRISTUS Spohn Development Foundation, to move into action. With support from the Foundation Board, the proceeds of the 2005 Richard King Golf and Tennis Classic were designated as funding to develop such a program.

It did not take long to decide that an ideal program for

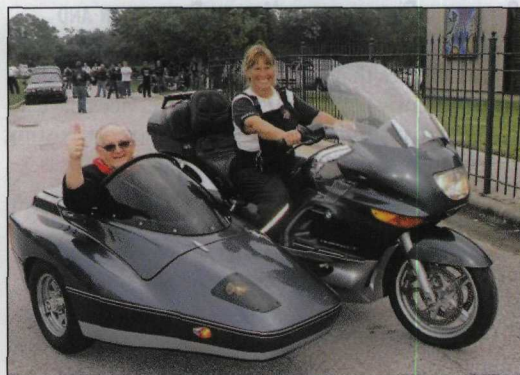


Volunteers for the CC Sail AWAY program in Corpus Christi, Texas.

persons in the area would include water. Visits to locations with adaptive water programs led to the birth of CC Sail AWAY (Adaptive Water sports for Adults and Youth.) CC Sail AWAY uses sailboats built

for safety. They are unsinkable and won't tip over.

Volunteers partner with individuals who have cerebral palsy, paraplegia, muscular dystrophy, amputations, stroke, loss of vision and other challenges. The program is held in the Corpus Christi Bay yacht basin where there is plenty of wind, yet the water remains calm. The basin is large and protected.



"Nun Run"

Two examples of this synergy in Corpus Christi, Texas, are the First Friday program and the Sail AWAY program. The First Friday program began in the mid-1990s when a group of women experienced many friends being diagnosed with breast cancer. They started planning fundraisers to make screening mammograms available to women with limited access. CHRISTUS Spohn Hospital was engaged as the medical partner to provide the mammograms. First Friday sponsors annual fundraisers, a walk to raise consciousness about breast cancer, a prayer breakfast, etc. As a result, more than 900 mammograms are provided free of charge every year. The CHRISTUS Spohn Development Foundation and the marketing

department help with planning, publicizing and staffing.

The adaptive sailing program, CC Sail AWAY, was developed as a result of a dream of the late Richard King III, former chairman of the CHRISTUS Spohn Development Foundation Board for many years. King was eager to begin a program that would respond to health and wellness needs. The CHRISTUS Spohn Rehabilitation associates suggested a sailing program because of our location. Adaptive Sailing uses special boats, which are unsinkable and will not turn over. Sailors can have disabilities such as cerebral palsy, paraplegia, amputations, stroke and blindness and still be able to sail in the CC Bay yacht basin where there is plenty of wind yet the water remains calm. Proceeds of the annual Richard King Golf and Tennis Classic in 2005 were designated for this program. The Sail AWAY adaptive sailing program was initiated in the summer of 2006 in collaboration with the U.S. Coast Guard Auxiliary, the City of Corpus Christi, and other organizations.

Another example of this kind of synergy is the one between the CHRISTUS Southwest Community Health Center, which is located in the densely populated Gulfton neighborhood in southwest Houston, and the CHRISTUS Foundation for HealthCare. Serving the neighborhood's 50,000 to 60,000 residents since 1991, Southwest Community Health Center strives to be their medical home — promoting and providing primary and specialty care in this medically under-served area.

Annually, the CHRISTUS Foundation for HealthCare helps raise funds to support the health center and all CHRISTUS Health ministries in the Gulf Coast. Most support comes from Houston families and foundations. Recently, the foundation joined the health center staff to promote the "Nun Run," a motorcycle rally from Houston to Galveston, Texas. Proceeds from the Nun Run help fund the center's annual children's Christmas party and programs serving children and families. In 2006, the run raised more than \$70,000.

The Nun Run has helped the health center and Foundation successfully accomplish three goals: 1) raise new funds for the health center's ministries; 2) increase community awareness of the needs of uninsured families and how to help address their needs; and 3) gain more community involvement.

The CHRISTUS Foundation for HealthCare has also become a master at utilizing the availability of matching grants from CHRISTUS Fund to leverage other donations from the community to support programs for the underserved in Houston. This

## EVALUATING COMMUNITY BENEFITS

Not-for-profit health care organizations exist to address the need for health services in their communities. Faith-based and other not-for-profit organizations have a long and rich tradition of providing "community benefit." How do these organizations demonstrate the "value" of their contributions toward improving the health of the community? Two essential components exist in a community benefit report.

The first component is the quantitative report prepared by using standardized accounting principles and policies. This financial accounting includes the costs of charity care and other unpaid indigent care as well as the uncovered costs of providing proactive community services, such as providing programs for the uninsured or making contributions to groups that create healthier communities.

Most organizations complement this quantitative report with a second component featuring stories about community health activities. If done well, these stories will increase public understanding of health improvement and the stories can strengthen community coalitions by highlighting the work of partnerships.

The publication, *A Guide for Planning and Reporting Community Benefit*, is available through the Catholic Health Association of the United States. It is a comprehensive source of information about community planning and reporting of community benefit.

leveraging, in effect, doubles the monies CHRISTUS is able to invest in this community.

### CREATING A NEW FOUNDATION FOLLOWING THE SALE OF A FACILITY

What better way is there to practice “Philanthropy Outside the Walls” than to leave a foundation in the community following the sale of a Catholic health facility? Creating and leaving a legacy foundation helps put closure on what otherwise might be a painful and difficult decision to have to leave a community.

CHRISTUS Health and the Sisters of Charity of the Incarnate Word sponsored a hospital in Paris, Texas, for more than 92 years when they made the difficult decision to sell in late 2003. The surviving hospital was for-profit, and consequently, the foundation could no longer directly support them.

So, CHRISTUS Health decided to leave the previous foundation and its full, accumulated assets of almost \$2.4 million as a “gift” to the community. CHRISTUS Health had to basically reform the foundation and had to go back through the Internal Revenue Service, and rewrite the articles of incorporation and bylaws, to obtain this new status. The legal steps are basically the same for forming any new 501(c)(3) corporation.

In awarding grants, the St. Joseph’s Community Foundation focuses on programs that serve the economically poor and under-served, women and children and seniors, and whose mission and values are compatible with those of the foundation. A driving principle of the foundation is that collaboration among community organizations is essential to maximize financial and human resources.

Since its inception, the foundation has awarded more than \$320,000 in grants and scholarships in the community. The magnitude of these grants in a city of about 25,000 and a county of about 40,000 people cannot be overstated.

The following are a few examples of grants provided:

- \$7,500 to CASA (Court Appointed Special Advocates) for Kids to implement Nine Months PLUS program
- \$27,224 to a diabetic research project, collaborative partners including Texas A&M Health Science Center and Paris Eye Physicians and Surgeons
- \$7,000 to the local nursing department to help provide additional training and certification in critical needs areas

### FUTURE TRENDS

More hospital foundations are actively addressing health needs outside the walls of the hospital and beyond bricks and mortar. Health care philanthropy can grow, perhaps redefining it to include a broader participation in community health projects, including active involvement in the planning process, funding and evaluation. ■

### NOTES

1. Health Research & Educational Trust. *Report of the National Steering Committee on Hospitals and the Public’s Health*, September 2006, ([www.hret.org/hret/programs/content/reportnsc.pdf](http://www.hret.org/hret/programs/content/reportnsc.pdf)).
2. U.S. Census Bureau’s Annual Census Report, *Wall Street Journal*, Aug. 29, 2007.

## TREATING DIABETES AT THE CHRISTUS SOUTHWEST COMMUNITY HEALTH CENTER IN HOUSTON

Monstruo Diabetes — these disquieting words are emblazoned on the poster hanging in the large, multi-purpose meeting room at CHRISTUS Southwest Community Health Center in Houston.

On this morning, near the front of the room, a nurse takes a patient’s vital signs. To her right, in a kitchen area, a woman prepares a luncheon salad. At the back, behind a privacy screen, the clinic’s chief physician hears of a patient’s experiences since they last met, consults on matters such as medication, glucose levels, exercise and dietary challenges, and then enlightens, encourages or lovingly scolds — whatever’s warranted.

A dozen ladies, some with infants, chatter in Spanish, as each awaits her turn.

Staffers at the center call this bi-monthly event “happy

chaos.” All is not happy, though. There is, as the poster testifies, a monster in the room. It’s the chronic metabolic disease of diabetes mellitus.

Diabetes is one of several diseases epidemic in the densely populated, economically disadvantaged Gulfton-area of Houston served by the center. The care these women receive is their best weapon available in a fight to prolong their lives and protect themselves from artery disease, amputations, kidney failure and blindness.

The center’s program in diabetes management, a component of the center’s family practice — and a past winner of CHRISTUS Health’s “Touchstone Award” for excellence — exemplifies the quality of care provided here and at all CHRISTUS Health ministries.

—Developed by Steve Barnhill, *Edge Creative Strategies*