Seven Lessons Philanthropy Volunteers Need to Know

Elevating your impact on hospital and health system fundraising

Look inside for:
• Seven need-to-know lessons on philanthropy and the volunteer’s role
• Board 2020 position description
• Board chair job description
Strategic guidance

BEST FOR
Fundraising volunteers and board members

RECOMMENDED PREP
Review board bylaws, job description, and committee structures

WHAT YOU’LL LEARN
• How philanthropy can best support top hospital and health system priorities
• The evolution of boards and other volunteer structures across the country
• How to increase the efficacy of board meetings and committee structures
• Measures to ensure the volunteer structure remains highly impactful

RECOMMENDED FOLLOW-UP
• Engage in a dialogue about volunteer structure effectiveness
• Prepare improvement recommendations for philanthropy leadership
Seven Lessons Philanthropy Volunteers Need to Know

Elevating your impact on hospital and health system fundraising
Philanthropy Leadership Council

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Introduction and Table of Contents

Development staff rely on relationships with allies such as clinicians, executives, and volunteers in order to successfully raise philanthropic funds. As philanthropy becomes a more critical component of health care strategy, development leaders are turning to their allies more than ever to help them fundraise for transformational health care investments. However, many foundation boards and volunteer fundraising groups are under-equipped and under-leveraged to fully execute on this challenge.

Review the seven lessons and corresponding tools within this briefing to ensure that the volunteer structure at your organization drives the most value in today’s environment.

Seven Lessons Philanthropy Volunteers Should Know

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Lesson 1: Philanthropy Opportunity Growing in Health Care

Greatest Wealth Transfer in History Predicted for Next Half Century

The “golden age” of philanthropy in the United States has begun, with almost $27 trillion in anticipated donations over the next 50 years. While this trend represents a boon for fundraisers in all giving sectors, health-related nonprofits have particular reason to be optimistic. Health care issues rank in the top three policy concerns among high-net-worth donors, two-thirds of whom donate to health-related causes.

**Estimated Amount to Be Given to Charity 2007-2061**

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>$27 trillion Lifetime Giving</td>
</tr>
<tr>
<td>$6.3 Trillion Charitable Bequests</td>
</tr>
</tbody>
</table>

**Top Policy Issues Among High Net Worth Donors**

1. Education
2. Poverty
3. Health Care

CEOs Looking to Philanthropy as a Critical Lever

Concurrently, hospital and health systems are looking for more predictable funding sources amid challenging reimbursement trends and imperatives to stem cost growth. Many hospital CEOs are increasingly turning to the philanthropy enterprise to help fund top priorities. Executives no longer view philanthropy as just “icing on the cake,” but as a necessary component of financial viability.

“Most of what I’m talking about are unfunded mandates. We’re in a world that’s not about volume generation; we’re in a world of changing reimbursement formulas. I can’t offer a new program in the hospital and grow it and get margin from it to pay for these types of things. **We are counting more and more on philanthropy.**”

*Hospital President and System Senior Vice President*
*Health System in the Mid-Atlantic*


Lesson 2: Major Gifts Drive Philanthropy Revenue

High-Performing Teams Focus on Major Gifts Fundraising

To capitalize on the current market opportunity and meet institutional need, today’s philanthropy enterprises focus heavily on major gifts strategies. Outdated perspectives of philanthropy associate fundraising only with large-scale, public events like galas and golf tournaments. While these events can play a meaningful role, the key to maximizing return on investment is a focus on securing large gifts from individual donors.

**Philanthropy Return on Investment**

*By Fundraising Strategy*

n = 164 hospitals

<table>
<thead>
<tr>
<th></th>
<th>25th Percentile</th>
<th>50th Percentile</th>
<th>75th Percentile</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special Events</td>
<td>0.8</td>
<td>1.2</td>
<td>1.7</td>
</tr>
<tr>
<td>Overall</td>
<td>2.5</td>
<td>3.4</td>
<td>3.5</td>
</tr>
<tr>
<td>Major Gifts</td>
<td>1.7</td>
<td>1.7</td>
<td>5.3</td>
</tr>
</tbody>
</table>

Volunteer Time Should Disproportionately Support Major Gifts

Too often, hospital foundation boards, development committees, or advisory groups allow governance and administrative responsibilities to crowd out more impactful activities within the major gifts fundraising process. Best-in-class volunteer groups leverage their unparalleled credibility, connections, and passion to help build relationships with others in the community, advocate on behalf of the organization, and give personal gifts that set an example.

**Desired Board Member Time Allocation**

| Governance and Trusteeship | 20% | Major Gifts Fundraising | 80% |

**Core Responsibilities of the 2020 Board Member**

**Supports Major Gifts Fundraising**
- Identifies, cultivates, and asks donors to fund top priorities
- Helps develop the case for support; share with connections

**Promotes Organization**
- Serves as an advocate for the organization at large, particularly during times of change
- Articulates the organizational value and funding priorities to community members

**Donates personally**
- Makes personal major gifts
- Encourages peers on foundation and governing boards to give

Source: Philanthropy Performance Benchmarking Initiative, 2015; Philanthropy Leadership Council interviews and analysis.
Lesson 3: Volunteer Groups Must Adapt

Current Environment Requires More Focused and Dynamic Support

As health systems begin a new chapter in care transformation, fundraising volunteers are in a unique position to champion different-in-kind funding priorities and engage current and prospective donors in their organization’s strategic direction. Volunteer groups need to evolve their structures and activities along several dimensions to execute effectively.

### Characteristics of High-Performing Volunteer Groups

<table>
<thead>
<tr>
<th>Scoped</th>
<th>Empowered</th>
<th>Agile</th>
<th>Accountable</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Scoped in terms of…</strong></td>
<td><strong>Empowered to…</strong></td>
<td><strong>Agile around…</strong></td>
<td><strong>Accountable for…</strong></td>
</tr>
<tr>
<td>Committee structure</td>
<td>Tell a peer about the institution’s priorities</td>
<td>Lifespan of substructures</td>
<td>Fulfilling personal requirements</td>
</tr>
<tr>
<td>Full board responsibilities</td>
<td>Ask for a major gift</td>
<td>Substructure focus and purpose</td>
<td>Knowing when to step down</td>
</tr>
<tr>
<td>Individual trustee responsibilities</td>
<td>Tell the institution’s story</td>
<td>Responsiveness to current needs</td>
<td>Maintaining priority alignment</td>
</tr>
<tr>
<td>Funding priorities</td>
<td>Be an advocate</td>
<td>Trustee tenure and retention</td>
<td>Ensuring peers, full board meet expectations</td>
</tr>
<tr>
<td>Meeting content</td>
<td>Suggest change</td>
<td>Strategic objectives</td>
<td></td>
</tr>
<tr>
<td>Meeting time</td>
<td>Hold one another accountable</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Four Implementation Components

The transition to a higher-impact volunteer group requires the adoption of four key components, listed below and explained further on subsequent pages.

#### PRESENT

- Meeting agendas and resources focused on retrospective review, passive listening
- Commitment largely confined to activities that occur at board meetings
- Standing committees rarely change; meetings may be frequent but agenda (and progress) feels stagnant
- Unclear expectations for how board members should be involved

#### FUTURE

1. **Action-Oriented Agenda**
   - Meeting agendas and resources structured to catalyze future action and advocacy
   - Commitment includes active participation in donor relationship-building outside of board meetings
   - Short-term task forces flex around top priorities to produce outsized results, then disband after milestones are reached
   - Transparent, mutual expectations and regular conversations about value

2. **Relationship-Building Activities**

3. **Task Force Approach**

4. **Mutual Value**

Source: Philanthropy Leadership Council interviews and analysis.
Lesson 4: Meetings Drive Action Outside Meetings

Make Time for Higher Priorities via Consent Agenda

Volunteer service should not be confined to the time spent attending meetings; high-performing volunteers take action within the course of their daily lives on the education provided at meetings. However, many group meetings tend to be retrospective, staff report-heavy, and didactic. To make room for more impactful activities, boards should address routine administrative and governance issues through a consent agenda.

Consent Agenda Defined

Practice of relegating routine items on the board meeting agenda to email communication prior to the meeting and approving the entire list at once.

Sample Items That Can Be Approved via a Consent Agenda

- Meeting minutes
- Final approval of reports or proposals on the agenda for a long time
- Staff reports
- Background reports used for information only
- Committee reports
- Correspondence requiring no action
- Routine contracts within board policies

Sample Action-Oriented Meeting Agenda

Freed up time should then focus on education, engagement, and developing an action plan. This sample agenda from Oakwood HealthCare Foundation represents a high-impact board agenda. Review the five successful attributes and consider integrating them into your board meetings.

<table>
<thead>
<tr>
<th>Time</th>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 AM</td>
<td>Call to order, inspired giving stories, board nominations</td>
</tr>
<tr>
<td>8:10 AM</td>
<td>Panel discussion and Q&amp;A on women’s services</td>
</tr>
<tr>
<td>8:40 AM</td>
<td>Intro to women’s services funding initiative</td>
</tr>
<tr>
<td>9:00 AM</td>
<td>Role play activity</td>
</tr>
<tr>
<td>9:10 AM</td>
<td>Consent agenda approval</td>
</tr>
<tr>
<td>9:15 AM</td>
<td>Governance</td>
</tr>
<tr>
<td></td>
<td>• Board self-evaluation results</td>
</tr>
<tr>
<td></td>
<td>• Feedback from June campaign meeting</td>
</tr>
<tr>
<td>9:25 AM</td>
<td>Bylaws and articles of incorporation revisions</td>
</tr>
<tr>
<td>9:35 AM</td>
<td>System President and CEO report</td>
</tr>
<tr>
<td>9:50 AM</td>
<td>Conclusions and next steps</td>
</tr>
</tbody>
</table>

Successful Attributes

- Inspired giving stories: celebrate success, connect board to mission
- Educational sessions: relate to funding priorities, system initiatives
- Role play: ensures board education is actionable, allows volunteers to develop own scripting
- Quick consent agenda approval
- Quick discussion of board performance, needs
- Insider access to CEO

Lesson 5: Volunteers Critical for Advancing Relationships

Participate in the Moves Management Process

While there are numerous ways volunteers can be involved in fundraising, the activities that best leverage volunteers’ unique position include forging relationships with prospective donors, providing key information to tailor a high-value interaction with those individuals, and participating in events that deepen engagement between them and the institution.

Identification

The list below includes common reasons why an individual might give to a hospital or health system. Listen for cues during conversations with peers.

<table>
<thead>
<tr>
<th>Experience Considerations</th>
<th>What a Grateful Patient Might Say…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Particularly good treatment outcome</td>
<td>“I recovered so much faster than I expected!”</td>
</tr>
<tr>
<td>Close relationship to medical staff</td>
<td>“I’m so grateful that I’ve received such personal attention from my caregivers.”</td>
</tr>
<tr>
<td>Expressed interest in key priorities</td>
<td>“Can you tell me more about what the hospital is doing?”</td>
</tr>
<tr>
<td>Expressed gratitude for care</td>
<td>“I wish there was something I could do to thank my care team for all they’ve done for me.”</td>
</tr>
<tr>
<td>Asked how they could help or give back</td>
<td>“I’m so pleased with my care and want to help. What can I do?”</td>
</tr>
</tbody>
</table>

Qualification

As members of the community, volunteers often know key information about prospective donors that can help development staff determine the best approach. Consider sharing the information below.

Crucial Intelligence on Strong Prospects

- What are the individual’s philanthropic interests?
- What connections does the individual and his/her family members have to the institution?
- What are the individual’s current or prior philanthropic commitments?
- Who in the individual’s family takes greatest responsibility for philanthropic decisions?
- What current institutional project might be of most interest to the individual?
- Who is the best person to initiate or deepen the relationship with the individual?

Cultivation

Volunteer involvement during cultivation increases prospective donors’ attachment to the institution. Consider partnering with development on one of the activities included below.

- **Small Dinner Parties**
  - Small functions at volunteer homes
  - Physicians, staff, and/or administrators can attend informal discussions

- **Hospital Tours**
  - Volunteers and friends tour hospital
  - Tour new technologies, renovations; witness live procedures

- **Panel Discussions**
  - Volunteers and friends attend panel discussions
  - Experts and physicians present on new and interesting research

- **CEO Briefings**
  - Breakfast meeting hosted by CEO for select prospects
  - Discussion of hospital priorities, strategies, and special events

- **Expert Lectures**
  - Volunteers and friends invited to lecture by physician or researcher
  - Information on exciting new research, clinical innovations

- **Physician Coffees**
  - Volunteers and friends attend coffee with physician
  - Hosted in volunteer home, primarily social and educational
Lesson 6: High-Performing Groups Leverage Task Forces

Flexible Task Forces Orient Around Impact

Many volunteer committees are organized to support outdated fundraising strategies, rather than those at the top of the philanthropy or health system strategic plan. Philanthropy volunteer groups are reconsidering the utility of permanent committees and instead implementing more short-term rotating task forces. These groups work toward achieving the highest-priority goals within a specific time-frame and dissolve once those goals are achieved.

Comparison of Traditional vs. Progressive Volunteer Substructures

<table>
<thead>
<tr>
<th></th>
<th>Old Paradigm</th>
<th>New Paradigm</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nomenclature</strong></td>
<td>Committees</td>
<td>Task forces</td>
</tr>
<tr>
<td><strong>Duration</strong></td>
<td>Long-standing; written into the bylaws</td>
<td>Short-term; dissipated at end of year or as soon as priority is funded</td>
</tr>
<tr>
<td><strong>Focus Area</strong></td>
<td>Aligned with area of interest to volunteers</td>
<td>Tied to specific fundraising goal (e.g., fund a top priority item)</td>
</tr>
<tr>
<td><strong>Staffing</strong></td>
<td>Volunteers mandated to join at least one</td>
<td>Staffed via an &quot;opt-in&quot; choice</td>
</tr>
<tr>
<td><strong>Alignment</strong></td>
<td>Aligned with volunteer’s goals</td>
<td>Aligned with volunteer’s, foundation’s, and hospital’s goals</td>
</tr>
<tr>
<td><strong>Leadership</strong></td>
<td>Development staff or board champion</td>
<td>Board champion</td>
</tr>
</tbody>
</table>

Application at Children’s Hospital and Clinics of Minnesota

Children’s Hospital and Clinics of Minnesota forms select short-term task forces for top priorities. The task forces help raise funds, initiate and cultivate prospective donors, and develop program strategy in conjunction with the foundation.

Task Force Charter Excerpt

**Charge:**
- Assist in raising funds
- Initiate and cultivate prospective and current donor relationships
- Inform and guide fundraising strategy for the program in conjunction with foundation board

**Charter:**
- Make a gift to the program
- Work with staff to identify potential donors and secure funds for the project
- Keep staff updated on fundraising progress
- Assist with fundraising events, which may include hosting an event to educate and solicit prospective donors, and hosting tours with prospective donors

Task Force Chair Responsibilities

**Operations**
- Recruit board and community members
- Sit on the executive committee shared by the foundation and system board

**Fundraising**
- Refer prospect names and open doors for MGOs
- Build relationships with key physicians
- Understand and explain the priority for which their task force is fundraising

**Accountability Enforcement**
- Oversee group of board members and community members; encourage them to give philanthropically and open doors for MGOs
- Hold members accountable between task force meetings
- Present 3-5 sentences on task force performance at board meetings

Source: Children’s Hospital and Clinics of Minnesota, Minneapolis, MN; Philanthropy Leadership Council interviews and analysis.
Lesson 7: Expectations Must Be Mutually Fulfilled

Regularly Check In Regarding Value of Volunteer Experience

Health care leaders should meet with volunteers annually to ensure that both parties maintain value form the relationship. Volunteers should use this time to ask for support when needed and provide feedback on the volunteer experience. Health care leaders should use the time to set expectations about partnership across the coming year. This open dialogue ensures continued alignment and resolves problems early.

<table>
<thead>
<tr>
<th>Volunteers Expect</th>
<th>Development Staff Expect</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Education on health system priorities, funding priorities, and commonly asked questions</td>
<td>✓ Board members to meet requirements laid out in bylaws or job description</td>
</tr>
<tr>
<td>✓ Training on how to achieve requirements outlined in bylaws or job description</td>
<td>✓ Board members to advocate for the organization in the community</td>
</tr>
<tr>
<td>✓ On-demand support from development</td>
<td>✓ Help with major gifts fundraising</td>
</tr>
<tr>
<td>✓ Board to have substantive impact on organizational success and growth</td>
<td>✓ Board to have substantive impact on organizational success and growth</td>
</tr>
</tbody>
</table>

**Recommendation: Host Annual Dual-Value Conversations**

Dedicate time to ensure board can ask for necessary support, training, and education, and to engage in mutual performance discussions.
Key Takeaways: Activity

**Overview:** Use the form below to reflect and apply the seven lessons in this publication at your organization.

**Self-Reflection**
Please answer the questions below.

What new board meeting practices will you recommend, if any?

In what ways will you partner more with the development team as a fundraiser and ambassador?

What new committee or task force changes will you recommend, if any?

What mutual-value practices will you recommend, if any?

**Pulse Check**
Review the questions below. Determine whether you have a strong answer to each. If not, spend time developing a solid response.

*Hospital or Health System Strategy*
- What are your organization’s top strategic priorities?
- Which of these include a philanthropic component for completion or success?

*Foundation or Development Department Strategy*
- What are your institution’s top funding priorities?
- What prospects has philanthropy recently funded?

*Elevator Pitch for Personal Value Statement*
- Why do you support the institution?
- Why do you serve on the board?
Appendix: Related Resources

- Board 2020 Position Description
- Board Chair Job Description
Board 2020 Position Description

Role and Expectations

PURPOSE:

The [hospital name] foundation board or development committee exists to support the fundraising arm of [hospital name] and ensure its success in raising funds to support the institution’s most critical needs.

As the foundation/development office is affiliated with the larger health system, it draws operational strength and support from that institution, enabling the foundation board to stay focused on supporting philanthropic endeavors.

RESPONSIBILITIES:

Fundraising

<table>
<thead>
<tr>
<th>Volunteer Expectations</th>
<th>Staff Expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approximately 80% of the board’s role is related to fundraising. Volunteers’ primary focus is on supporting the major gift enterprise, which has the highest ROI and which benefits most significantly from active volunteer participation. Major gift fundraising activities include referring and identifying new prospects, cultivating prospects to increase their desire to make a gift, supporting staff in solicitation visits, and helping to thank donors for their gifts and continue their relationship with the institution.</td>
<td>Staff pledges to provide education to ensure you fully understand the major gifts “moves management” process and where you can best support staff in that process. Staff will work with you on each prospect or donor you refer to identify where you can be involved in their moves management process. Staff will ensure you feel comfortable, confident, and properly trained to participate in donor relationships. Staff will treat each donor relationship with respect and privacy.</td>
</tr>
<tr>
<td>Volunteers’ second focus area is serving as advocates for [hospital name]—both at the institution level and for specific projects. Volunteers share with peers, colleagues, relatives, and others the institution’s vision, community role, impact, and opportunities. They advocate for the specific priorities for which the foundation is raising funds, bringing these projects to others who may be interested in providing support.</td>
<td>Staff pledges to not only inform you, but teach you to be a steward of the institution’s message and ensure you feel fully informed and prepared to talk about the institution-at-large and specific funding needs. Staff will provide engaging educational and interactive sessions, accompanied by collateral to support you in conversations.</td>
</tr>
</tbody>
</table>

Governance

<table>
<thead>
<tr>
<th>Volunteer Expectations</th>
<th>Staff Expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td>The remaining 20% of the board’s role is related to governance. This includes 1) approve the overall budget and determine if an audit is needed, and 2) recruit and train new trustees and ensure all trustees meet expectations. Standing committees will own each of these two areas, with committee members handling the majority of the related work and sharing updates for review and vote by the full board.</td>
<td>Staff pledges to provide the information and data needed to make informed budget approval and audit decisions. Staff will also provide the training, education, and resources necessary for volunteers to carry out expected duties, and support the trusteeship committee in facilitating board self-assessments.</td>
</tr>
</tbody>
</table>

Source: Philanthropy Leadership Council interviews and analysis.
Time Commitment:

Meetings
Board members are expected to attend four [X-hour] meetings per year, held quarterly at the hospital. Meetings are designed to:
1. Educate volunteers about the institution and specific funding projects, empower volunteers to share what they learn out in the community, and enlighten to the fundraising process and how to support fundraising activities
2. Foster mutual learning and idea sharing between volunteers and hospital executives/clinicians
3. Build camaraderie across the volunteer group
4. Inspire action outside of meetings

Outside of Meetings
Time spent in meetings is intended to be at most one-quarter of the amount of time each volunteer gives to the organization. The greater time commitment is in independently fulfilling the expected philanthropic and advocacy duties in the community.

Committee Service:
Based on experience and interest, board members may be asked to serve on one of the two standing committees of the board: Executive (approves the overall budget, audit) and Trusteeship (recruit and train new trustees; ensure volunteers meet expectations).

All board members are asked to serve on rotating funding priority committees, which will be created in alignment with top strategic needs for which the foundation is raising funds, then disbanded upon reaching the funding goal. Board members can select committees most aligned with their personal interest and are asked to serve on approximately one committee per year. Committee meetings vary based on funding needs, including a mix of in-person and phone meetings; activity requirements focus on leveraging personal passion for the cause and supporting the major gift fundraising process.

Personal Giving:
We expect that each board member will make a personal contribution to the board, and ask that if not the top charity to which you give, that [hospital name] foundation is at a minimum in your top three.

Annual Value Conversation:
Every year, board members will participate in an assessment to evaluate their volunteer experience and opportunities for improvement, as well as the volunteer’s contribution to the foundation. All board members are asked to complete the survey and review results with a Trusteeship Committee member.

I understand and agree to the expectations as outlined.

Board Member signature    Date    Chief Development Officer signature    Date
Board Chair Job Description

Overview: The board chair plays a critical role in leading his/her peers and supporting development staff. Use the role description below to enhance your current board chair job description or to draft a new one. Conclude your contract with a signature line, such as the one below.

ROLE
Be an exemplar of how to fulfill the expectations of board members and act as a role model for peers by the following actions: Attend and actively participate in all or most board meetings

• Partner with development on fundraising efforts by: passing referrals, making introductions, attending cultivation events and activities, helping with gift proposal development and solicitations, and stewarding donors for their contributions
• Contribute a personally significant philanthropic gift
• Actively participate in task forces or other substructures

Support development staff in achieving their goals by fulfilling the chair-specific responsibilities listed below.

CHAIR-SPECIFIC RESPONSIBILITIES
Peer Recruitment & Accountability
• Recruit and vet new board members
• Meet with prospective and new board members to discuss the responsibilities of membership
• Join conversations with volunteers about performance; provide both positive and negative feedback on performance, and respond to questions and concerns about the value volunteers receive from membership
• In some cases, may be required to ask board members to agree to a subsequent term on the board or discontinue service

Leadership
• Act as a liaison between development staff and volunteers
• Disseminate messages about forthcoming board changes
• Maintain relationships with key allies such as physicians, executives, community leaders, etc.

Thought Partnership
• Contribute ideas to advance the mission of the foundation / development department and board
• Look for new efficiencies to cut down unnecessary board tasks and free up time for volunteers to focus on higher value activities

CONTRACT
I ___________________________ agree to perform the duties mentioned above.

(Board Chair signature)

I ___________________________ agree to provide the support required for the board chair to complete their duties.

(CDO/ED/President signature)

Source: Philanthropy Leadership Council interviews and analysis.