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Physician Solicitation Agenda

The following agenda and speaking notes is from a hospital campaign that was directed by Capital Quest (www.capitalquestinc.com). The purpose of the reception is to get local physicians to support the concept of a new hospital and make financial commitment to the campaign.

DETAILED AGENDA Physician Reception

I. Welcome and Introduction (5 Minutes)

<name> role will be to welcome everyone to the reception (special mention to spouses if they are in attendance), thank them for attending, and transition the event from a social occasion to a more business function. It is important that he is able to make this transition BEFORE launching into the video so that people have a firm understanding of why they are there.

<Name> can transition to the video with a statement like, *“over the last several months, key staff and board members have been working to develop the plans for paying for the new hospital. This is not going to be easy, and you, as local physicians,, will need to play a critical role in it. People in the community, rightly or wrongly, are going to expect to see leadership from the doctors who practice at <hospital>. One of the things our leadership group has been working on is an eight minute video that we will use to share the story with the community. I’d like to share it with you now ...”*

II. Video Presentation (12 Minutes)

Show the video presentation.

(<Name>) should, at the conclusion of the video, ask if there are any questions/comments BUT should be careful not to usurp the later speakers OR spend too much time at this point answering questions. We’ll have a full Q and A at the end.

Once the video is complete, <Name> should introduce <Name>. <Name> might also want to share the story of the board chair indicating that, after approving the concept of a new hospital, <hospital> had moved from a “mission” of <system name> to a full partner in its healthcare mission.

III. Support of CHN (5 Minutes)

<name> role has to be to show CHN's commitment ... not just in terms of the \$10 million lead gift, but also that the new hospital and its role in the strategy for <system>. The talk she gives needs to be uplifting and motivating, but also challenging. She has to indicate that the physician's role in this process – designing, building and, yes, even paying for the new hospital – will be critical.

III. New Hospital Update (Ten Minutes)

<name> should address an update about the planning for the new hospital, emphasizing how great everything is going and how we are right on schedule. The objective with this part is to get the physicians excited about the building project. CONFIDENCE is the key here ... we have ALL the answers, THIS is REALLY going to happen, and the physicians need to get on-board.

<name> does not need to get into the fundraising aspect of this at all. That's coming later. His job must be to create confidence that this new hospital is going to be a REALITY – with their support. Rich can explain the great things a new hospital can accomplish and how it will affect staff, physicians and, most important, the community.

This part is about vision, not details.

IV. Fundraising Plan (Five Minutes)

Consultant

Consultant will outline, briefly, the fundraising plan and talk about how important physician support is for the campaign. He'll address the employee campaign, physician giving, the board campaign, the PaceSetter effort and also address what will happen after the tax issue is approved. He will just touch on the election issue as it relates to the fundraising plan. The one thing we don't want this meeting to devolve into is debate about whether politics will allow for a tax increase.

Our answer to the question “will the tax increase pass?” must be “yes” with an explanation of everything <tax consultant> and the committee(s) are working to make it a reality. We also should simply refuse to answer the “what if it doesn't pass” question by saying “it's really moot point at this time since, if it doesn't pass, no one is going to have to pay on their gifts”.

V. Request for Participation/Response (Ten Minutes)

TBD

(Ideally this will be a physician, but it has to be the right person to ask. I'd rather have a non-physician do it if the non-physician will do it according to script. Ideally, though, a physician that can follow the script would be the best). Our fallback person, and this isn't a bad thing, is one of the volunteers.

This person's job is "the ask". S/he can speak best to how important it is for every physician to make a truly sacrificial gift, and, most important, to do it quickly so we can move on with other aspects of the campaign. This needs to be motivational in nature.

We'll announce the results of the board and employee campaign at THIS time, emphasizing how well our board and staff have done. We'll actually start talking money now, pointing out that, from just our board and staff, we've received x gifts of \$25,000 or more, x gifts at \$10,000 to \$25,000 and x gifts at \$5,000 to \$10,000. The point is to raise sights of the physicians and show them that others are making the exact same size gifts they are being asked to do right now.

We need to **challenge** these physicians like they've never been challenged before. There is NO way the community supports this unless we can show the physicians believe in it. The best way they can show they believe in it is to make a significant personal gift. And we need to emphasize that if the new hospital does NOT happen, they don't have to pay their gift. It's a sure bet for the physicians, and now is the time to step forward.

Just as we did the employees, we have to be direct and point out the consequences of not participating. We can acknowledge ALL their issues (malpractice insurance, lower reimbursements, med school debt, etc) but we have to collectively shrug our shoulders and say that we can't do anything about THAT, but we can build a new hospital. And certainly, not having a hospital in <city> is NOT going to help their other problems. Be direct, honest, and make the firm request. No equivocation – if for no other reason that it wouldn't be fair to the employees of <name of hospital> who have stepped forward and sacrificed already.

The speaker should then ask to have the packets passed out to everyone. Once everyone has their packet ... the speaker needs to take a sample packet and walk them through it. Explain the commemorative insert, then the pledge card and then, finally, talk about the letter in packet that asks for a specific level of gift. Don't skip this part!

It would be particularly important for the speaker to hold up and show examples of each part of the packet – namely the gift insert and the gift card. By having them open the packets and having the speaker do a "show and tell" with them, we can be assured they've at least looked at it and fully understand the importance of filling out the card.

The speaker can also point out that we'd love them to fill the pledge card out that night – much like the management team did when we asked them (92% of the management team returned their cards – totaling over \$50,000 – at the end of their solicitation meeting). You can apologize for being so direct, while pointing out that when the wolf is at the door, sometimes the niceties of life are put aside.

We need to give them a deadline to make a decision. Since this is a sure-bet in the sense they aren't being asked to start paying until they are sure a new hospital will be a reality, we should give them a short decision timetable, probably one week (Sept. 26) to return their cards, completed, to <Development/Administrator> (the keeper of all the signed pledge cards). We need to emphasize that we are going to start asking PaceSetter major

gift prospects for \$100,000 gifts after the 26th, so we need their decision fast in order for us to have any chance of using this campaign to motivate the voters.

The speaker can mention that <name> will start follow-up calls and visits on doctors who don't respond one way or another by Sept. 26. We'll start immediate visits on those doctors not present.

Open for group discussion/questions/answers.

VI. Closing/Conclusion/Q and A (Five Minutes)

We really have to show the doctors we're serious about this and they need to step up. Some will likely whine and complain about any number of things, but we have to hold fast to our timetable and their accountability. This is no time to equivocate.

Between us, many doctors love to whine. Some think they are the only ones with problems, financial and otherwise, and that they are often unappreciated and overworked. It's fine to acknowledge their feelings, BUT it really doesn't matter in this case. In the end, we need to communicate a simple message, as we did with the employees: we raise the money or the hospital closes. Which do they want? And they need to decide now.

Using spot humor is helpful, but our best option is to be "over serious", get a message to them of how important this is, and make them accountable.