CAPTURING PHYSICIAN REFERRALS IN THE RAISER'S EDGE®

Concepts and Approaches for Measuring and Managing Grateful Patient and Family Data

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CAPTURING PHYSICIAN REFERRALS IN THE RAISER'S EDGE®

Concepts and Approaches for Measuring and Managing Grateful Patient and Family Data

Establishing a clearly defined process for handling philanthropic referrals from physicians and other health professionals is critical. As we know, many physicians will be reluctant to refer their patients to development if they don't have a clear answer to the question,

"What are they going to do to my patient?"

Once you've developed your organization's referral-handling process, it's equally critical to have a system in place that enables you to manage, track, and measure components of the process effectively and efficiently.

This whitepaper explores concepts and approaches for measuring and managing grateful patient and family data in The Raiser's Edge®.

You Can't Manage What You Don't Measure

To create a successful grateful patient and family program, it is critical to establish a clear set of measures and have a system that allows all staff involved to monitor the program.

Without metrics and accessibility, staff are unable to achieve the goals of the grateful patient and family program. By investing time to develop clear measures and a usable system, you will set up your team—and yourself—for success.

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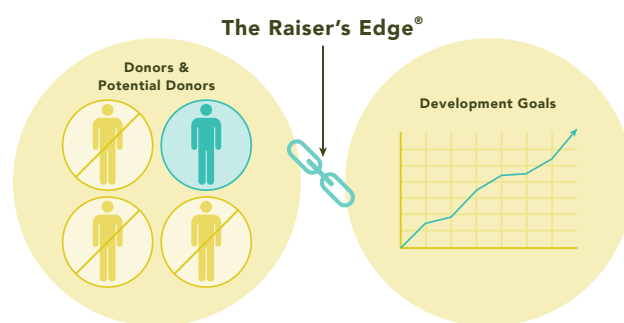
What Is the Purpose of a Grateful Patient Program?

A grateful patient and family program has multiple goals, but ultimately, it is to raise money. How much money you raise is a good measure of the program's success, but it can be difficult to connect contributions to day-to-day grateful patient/family activities (e.g., referrals, data screening, patient visits, etc.). Contributions as a key performance indicator is a "lagging indicator." That means that by the time you are able to measure it, the outcome is final—you have no control over it, and you cannot affect it. Lagging indicators, like "dollars raised," are good measures, but they are incomplete. Your performance indicators should be complemented with "leading indicators," which monitor the activities staff perform every day. These are the things you can control.
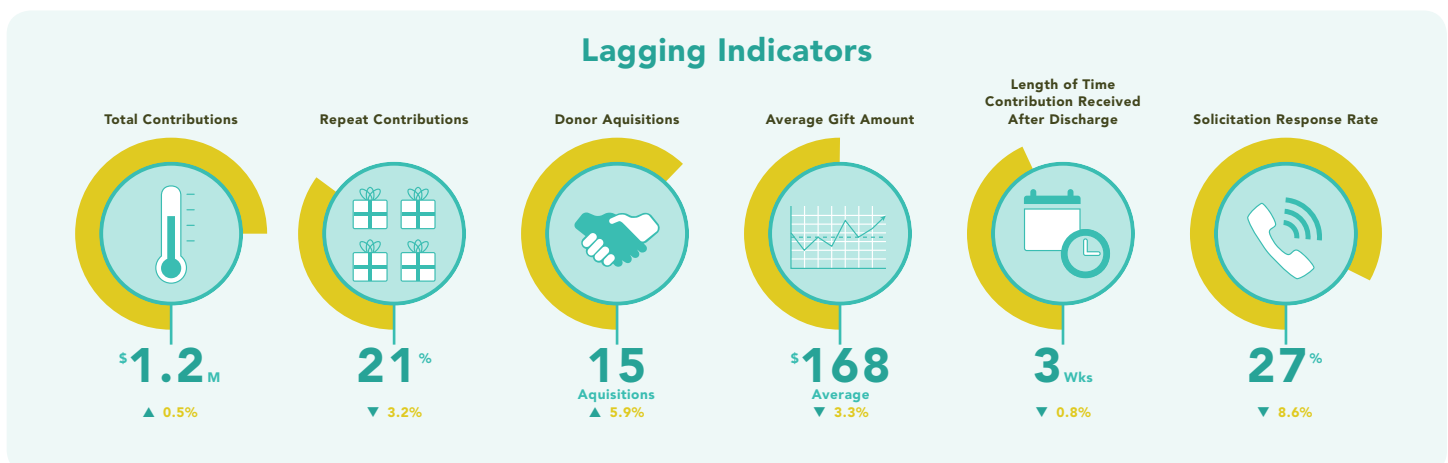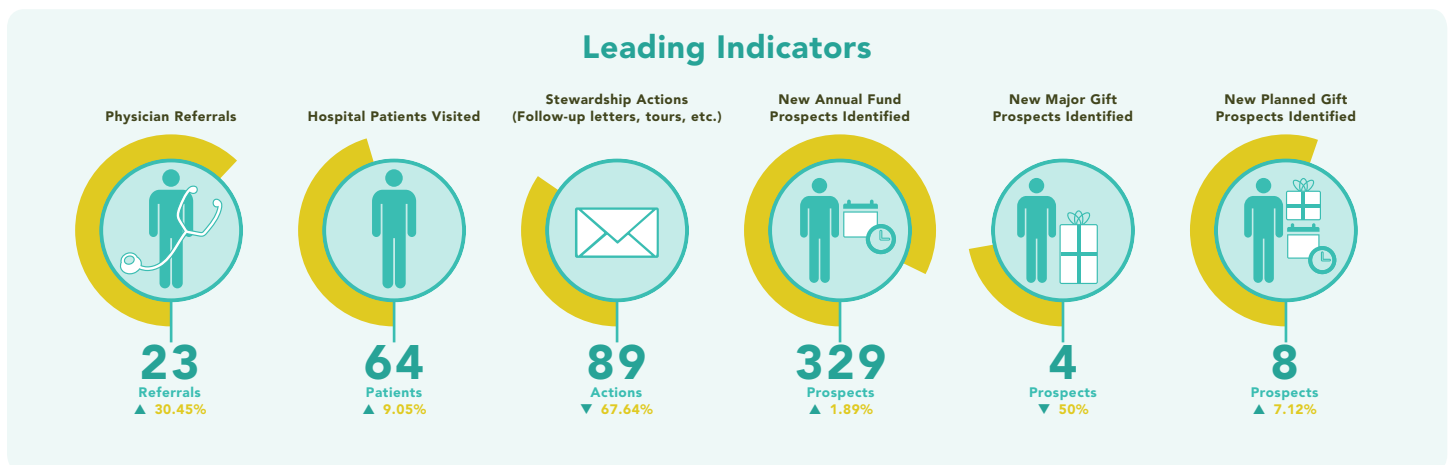
What Should You Measure?

To begin, write your plan for a grateful patient and family program. This will allow you to create measures that reflect and directly relate to your plan.

To identify your measures, you should seek answers to questions such as:

- How do you plan to interact with patients/families?
- Will you visit them while they are still admitted?
- Will you contact patients/families weeks or months after they are discharged?
- How do you plan to solicit them?
- Will physicians and other health professionals be referring patients and family members?
- If so, how will you measure their engagement?
- What is a good return on the program?

The answers to these questions are different for all organizations, so be sure to focus on your unique organization during this process.

Like most endeavors, remember that it is most important to simply start and improve your measures with usage. Below are some examples to consider.

Leading Indicators

Physician Referrals	Hospital Patients Visited	Stewardship Actions (Follow-up letters, tours, etc.)	New Annual Fund Prospects Identified	New Major Gift Prospects Identified	New Planned Gift Prospects Identified
23	**64**	**89**	**329**	**4**	**8**
Referrals	Patients	Actions	Prospects	Prospects	Prospects
▲ 30.45%	▲ 9.05%	▼ 67.64%	▲ 1.89%	▼ 50%	▲ 7.12%

Lagging Indicators

Total Contributions	Repeat Contributions	Donor Aquisitions	Average Gift Amount	Length of Time Contribution Received After Discharge	Solicitation Response Rate
$**1.2**M	**21**%	**15**	$**168**	**3** Wks	**27**%
		Aquisitions	Average		
▲ 0.5%	▼ 3.2%	▲ 5.9%	▼ 3.3%	▼ 0.8%	▼ 8.6%

The Data Flow

The following series of steps describes a best-practice approach for managing data related to a grateful patient and family program. Grateful patient and family data generally comes from two sources: hospital census data and referrals.
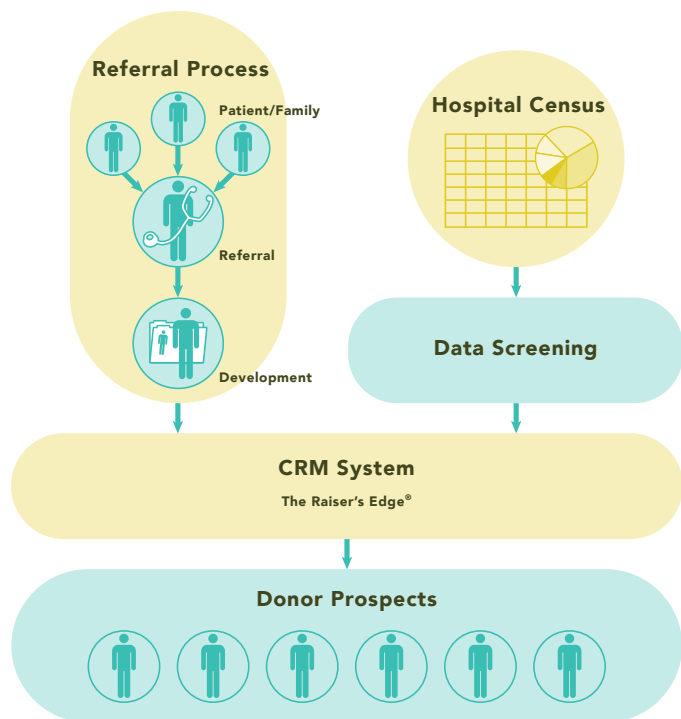
Receiving Data From the Hospital
Get the hospital IT staff on your team. Work with them to arrange a recurring delivery of the daily/weekly/ monthly patient files. This can vary in complexity based on the system in place, the connectedness of your IT staff, and the volume of data. Look to your IT team to help you think through the implications of different approaches (e.g., loading the data into your CRM system, like The Raiser's Edge®; adding it to a data mart/warehouse; or other options).

Screening It
Use a data screening vendor (e.g., DonorSearch, WealthEngine) to process and rate the file, and then load this information into a shared directory that is accessible by the import process (e.g., ImportOmatic or a solution IT already has in place). The result of the screening will be a preliminary score you can use to stratify patients based on their ability and likelihood to give. Screening is not a magic score that tells you who to contact. Rather, it is another data point to help you be more efficient. If you

have 100 or 1,000 names to assess, screening will help you focus your team's energy.

The vast majority of patients will not have major giving potential. Being able to identify the small percentage of patients that may have that capacity can greatly improve a gift officer's efficiency. For those patients who are not suited for major giving, the wealth information can support annual fund efforts in terms of ask amounts and messaging.

Putting the Data Into The Raiser's Edge®
Depending on the volume of data you will need to manage, we typically recommend using a tool like ImportOmatic to load the patient data into The Raiser's Edge®. Be aware that the data can add up over time and diminish the overall quality of the data in The Raiser's Edge®. To mitigate that issue, you may consider putting the information into a "holding area" instead of loading all the names directly into The Raiser's Edge®. ImportOmatic will allow you to do this along with some basic cleaning and matching, mapping it to the appropriate fields based on your database usage, and applying custom logic based on your business rules (e.g., assigning the prospect to a major gift officer or the direct marketing track).

In addition to helping raise money, the program can also improve the quality of your data and, as a result, also improve your ability to communicate with constituents. You will add new emails, update addresses, and generally improve contact information.

Where Do I Put the Data?

There are two main types of data: data about the patient/ family and data about the interactions.

Not all patients are added to The Raiser's Edge®. In fact, most won't be. Look at your grateful patient and family program as a special type of acquisition pool. Many patients will visit your hospital, but only a small percentage will engage with you philanthropically, and an even smaller number will become major and planned giving donors. These are the people you will add to The Raiser's Edge®. Once they are in the system, you need

to manage a relationship with them (that's the "RM" in CRM).

Data About the Patient

Much of the information you will want to track about the patient already has a predefined home in The Raiser's Edge®. This includes data like name, age, employment, wealth ratings, and charitable giving. Other data points are distinct to grateful patient and family programs and need to be tracked differently at each organization. While that depends on each organization and how the system has been configured, there are some best practices to consider.

Identifying Grateful Patients and Families

Create a constituent code that identifies the constituent as a "grateful patient/family."

If the patient is a child, create a constituent record for the child and a relationship to the parent or guarantor.

Treating Physician

The simple option is to create a constituent attribute that allows you to link the physician to the patient.
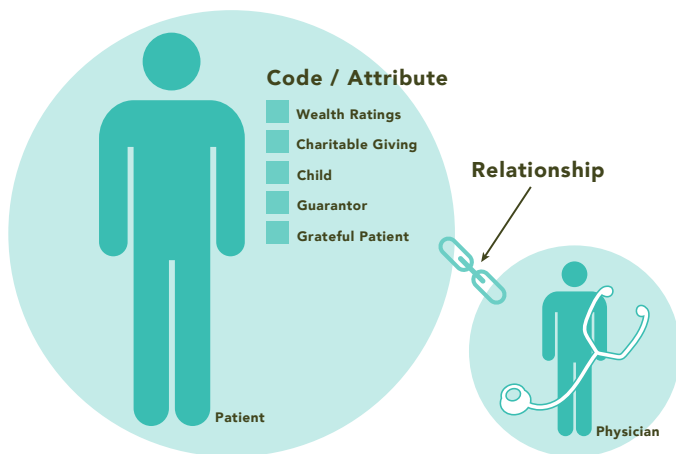
If you require a more sophisticated approach, create a relationship between the patient and the physician. This allows you to track more information, but it comes with more overhead—it takes more time to manage the data, and it makes queries and reports more complex.

Presence of Children

You may not know or need to track a child's record, but it can be helpful to know if the constituent has children. In this case, create a yes/no constituent attribute to track this data.

About Relationship Records

When you use a relationship record to link a physician to a patient, you can choose to create a full constituent record for the physician, or you can create a non-constituent relationship. A non-constituent record allows you to track the physician without having to create a full record. Generally, since physicians are key constituents, you should opt to create full constituent records for them.

The primary reason you would choose to create a relationship record, as opposed to a constituent attribute, is when you need to track more information about the relationship. For example, a relationship record allows you to track a relationship type, start and end dates, relationship attributes, notes, and automatic soft-credits.

If you are not sure which option is best, start with the simplest approach: use a constituent attribute. If you find that doesn't meet your needs, you can always switch to full relationship records.

Guarantor Name and Address

Tracking who is responsible for payment can be a valuable data point for research. Similar to tracking physicians, create a relationship to track the name and address of the guarantor, or a constituent attribute to simply link the accounts.

Methods of Payment

This is used to capture how the patient paid for his or her visit. If you choose to track it, a constituent attribute is best.

Data About Interactions

Interactions are extremely important to track for a successful grateful patient and family program. Hospital visits, physician referrals, and follow-up calls are all leading indicators of contributions and should be captured in The Raiser's Edge®.
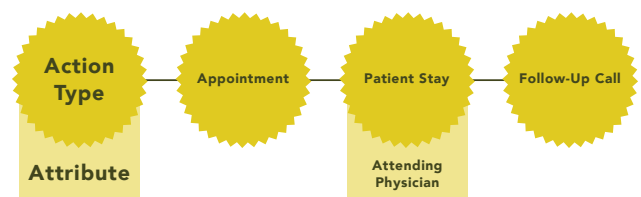
Patient Stays

Track patient stays as actions, using action types to distinguish them. Use the action record to capture the date of the visit and any attributes or notes to describe it in more detail, such as the attending physician(s).

Use census data to inform staff of upcoming visits and create actions to remind staff to take appropriate action. Admittance data will be effective to capture stays from the past.

Physician Referrals

Use actions to record the physician referrals. Create a distinct action type, capture the date of the referral, and track the referring physician using an action attribute.

It is essential that you also create distinct follow-up actions with a staff person who is accountable for contacting the patient and updating the physician. You can set a user option that will prompt a user to create a follow-up action.

Other Referrals

You may get referrals from other sources, such as current major donors, board members, etc. Use actions to track these instances. Assign this action to the accountable staff person and create an action notification reminder to ensure it was completed.

Concierge Visits

Any time grateful patient/family staff members interact with patients, create an action with a distinct action type.

## To Make a Program Successful, You Need:

A Conductor

The best system in the world will not work if you do not have a single person who oversees and is responsible for the program. Assign one person to own the program and provide guidance when needed. Also, ensure his or her job duties and accountabilities are clear and measurable.

Measures and Systems

As stated previously, if you aren't measuring it, then you can't manage it. A good measure includes a target (what does success look like?) and a baseline (where are we today?). To make the measures work, it is essential that your systems (e.g., The Raiser's Edge® and a reporting tool) are configured to track the grateful patient/family data we have outlined above.
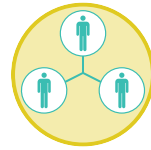
A Team Approach

Grateful patient family programs require the support of development, hospital IT, operations staff, and leadership. Garner this support by communicating proactively about the program and building trust through follow-up.

Efficiency

All physician referrals must be handled on a timely basis. This includes following up with the referred patient/family, entering measurable data into The Raiser's Edge®, and reporting back to the physician about next steps.

Monitoring and Learning

It is important to monitor your efforts regularly and adjust accordingly. If you have established the items above, you will be in a position to learn, adjust, improve, and then learn some more.

Time

At one successful institution, it took a year of testing before they were ready to roll it out to the full hospital, and then over the next three years to the institution as a whole (all hospitals and locations). Don't expect a smooth process and results too soon.

Adjustments

This paper is intended to give you guidelines, but it is not a one-size-fits-all approach. It will fit everyone differently. Take into consideration your size, technical capabilities, and culture.

Lanes: Patient | Physician | Development Officer | The Raiser's Edge® Admin

Action

Expresses interest through the Patient-Physician relationship

Contacts Development Officer with referral

Sends referral and patient information to The Raiser's Edge® Admin

Ensures the patient record exists and is complete

Creates "Physician Referral" relationship record between Physician and Patient

Adds relevant notes to constituent record

Creates action record to capture the referral
- Put Referrer in the action attribute (while this may duplicate info that is in the relationship record, there may be instances where more than one person is involved in the process)
- Mark the action complete

Adds actions for the next steps
- Development Officer to follow up with Physician
- Development Officer to contact Patient

Sends patient research report to Development Officer

Contacts Physician to coordinate Patient contact
- Captures information about Patient interest, relevent funding priorities, Physician's desired level of involvement, etc.

Sends captured information to The Raiser's Edge® Admin

Adds information to Patient and Physician records

Contacts Patient

Adds/**Adds** contact report to The Raiser's Edge®:
- Create an action record to capture the contact report
- Solicitor is the Development Officer and anyone who participated in the call
- Capture the content of the call on the notes tab
- Mark the action complete

Should the Patient move into the Major and Planned Giving Pipeline?

YES	NOT YET
• **Creates** solicitor relationship record between the Physician, Development Officer, and Patient	• Updates Physician
• **Updates** Physician to determine next steps	• **Adds**/**Adds** cultivation plan (e.g. annual giving, lead annual) actions to The Raiser's Edge®
• **Adds**/**Adds** cultivation plan actions or proposal record to The Raiser's Edge®	

Sends referral report to Development Officer

Produces monthly referral status report/dashboard

About Benefactor Group

Benefactor Group serves organizations that serve the common good…through capital campaigns, strategic planning, and nonprofit technology. Given a clear strategy and practical tools, you can raise more money today and build your capacity to sustain your mission into the future.

Benefactor Group has won a reputation for innovative nonprofit consulting services that support fundraising, philanthropy, volunteer leadership, leadership development, technology, talent management, and executive transition. Our staff brings extensive fundraising experience to our clients and a broad range of individual skills to each project.

About Advancement Resources

As a world leader in research-based professional education in philanthropy, Advancement Resources is honored to serve hundreds of academic and medical institutions as well as healthcare and nonprofit organizations.

Our comprehensive, donor-centric curriculum offers something for every member of your development and leadership teams. Each client receives a highly customized training plan featuring concepts and tools for effectively contributing to the institution's mission and fundraising goals.

Advancement Resources' professional instructional design and best-in-class facilitation create a one-of-a-kind experience for participants through the precise knowledge, skills, and learning experience required for each target audience.

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