



2017

Employee Giving Campaign Survey



The Angeletti Group, LLC

Employee Giving Campaign Survey

In July 2017, The Angeletti Group conducted a survey of 6 hospitals and health care systems regarding their employee giving campaigns in order to better gain an understanding of the strategies and tools most often used and at what rate of success. These organizations ranged in size and budget from smaller community hospitals to larger health systems. The information that follows represents blind results compiled from this survey. We appreciate each organization's involvement in this brief survey and share the results to illustrate trends among leading providers.

- 1) How is your employee campaign structured? How many appeals do you send per year and in what format? (i.e. letter to the employee's home, all-staff email, etc.) Who signs the appeal(s)?

Hospital A: We send an annual letter to all employees' homes, signed by an employee campaign chair. Email reminders are used for follow-up.

Hospital B: We do not have a solidly structured employee campaign, although we are working toward developing one. Currently, we offer all employees, including the new ones at orientation, the opportunity to support the Foundation with a payroll deduction option. We send regular appeal (donors and patients) to employee's homes. That letter is either signed by a donor, patient, or doctor. As of yet, no employee-specific is mailed to them.

Hospital C: We do 2 employee mailings to their home – one for employees of the hospital and another for employees of the health system. No email. Signers have been campaign committee members and also the president of the hospital or president of the health system depending on the audience.

Hospital D: There is no employee campaign at this time. The Foundation has been pushing for one for the past 5 years to no avail. We are about to introduce a new proposal for conducting such a campaign.

Hospital E: We do an annual appeal to employee's homes driving them to online registration for payroll deductions. This is followed up with a series of emails over a span of 2 months (used to be 3 months). At the kick-off and end of the campaign an email comes from the President and the CEO, others come from the VP of Development.

Hospital F: Other C-suite officers, COO, chief human resource office, and other C-suite officers that have been there for a long time or are well known send an email. No

formalized employee giving campaign but we have two fundraisers that are primarily employee supported – one is a giving society and internal grantmaking group; of the money 100% is granted back out to innovative programs and research projects created by employees. Averages about \$600k a year. There is an allocation committee that meets to review submitted proposals to determine awardees. Second campaign is adopt a patient program. Starts with Giving Tuesday and runs through end of December, donations are used to purchase gifts for every inpatient across the network. Raises about \$15k, very feel good and tangible. Plateaued a bit, looking into ways to increase that. A challenge is that there are so many third party fundraising opportunities promoted by the network, such as united way.

- 2) Do you ask for specific amounts? If so, how is that amount determined?

Hospital A: No

Hospital B: No but we do encourage participation at any level. We provide a sample of a sliding schedule for them to consider. For example; \$5 per pay (x26 paydays) = \$130 per year. \$10 (x26) = \$260 per year, ect.

Hospital C: No

Hospital D: Our new proposal would call for us to include specific amounts and allow the employee/donor to direct their gift to a specifically approved and designated area of need.

Hospital E: We do not ask for specific amounts beyond a minimum of \$2 per fund. We have toyed with the idea of suggested amounts and I would especially like to test that for senior administration

Hospital F: No

- 3) In addition to appeal letters/emails, what other communication vehicles do you use to reach employees for giving?

Hospital A: Where possible, our development director attends department staff meetings to request support. In the past, we have posted information on computer screensavers and distributed posters/flyers about the campaign.

Hospital B: Screen savers throughout the organization and emails.

Hospital C: We hold what we call “Open House” events in various areas around the hospital. We have light breakfast or lunch and the staff is welcome to stop in during the hours we are there to learn more about the Foundation. We provide some materials about what we have raised for that specific area and we discuss employee giving. Usually, the Director of Annual Giving along with the MGO for that area will be the hosts. During a campaign, we were hosting larger events for anyone at the hospital, like Cider & Donuts in the fall or a Lemonade Stand in the spring, but we found that the smaller more focused Open Houses are a better venue to talk with folks.

Hospital D: LCD displays on monitors within the Hospital and on desktops. Regular mentions/pitches at Leadership sessions and notices in employee focused publications.

Hospital E: We use LCD screens and clinical work station screens as well as posters hung throughout the hospital/break rooms, etc. The campaign is mentioned 2 times in the employee newsletter. We also conduct a few “information” tables outside of the cafeteria several times during the campaign.

Hospital F: We do mailings, cafeteria table time, emails from senior leadership asking for support, social media campaign, a dedicated webpage, and a video series. Occurs March through June, with a dinner honoring two grant awardees from the fund as well as a certain level of membership by donation amount. Will send personalized emails to the giving society to ask for renewals.

4) What metrics do you use to measure your employee giving campaign's success?

Hospital A: We look at dollars raised and percentage of employees giving compared to previous years.

Hospital B: Because we don't hound the employees or have a specific financial number in mind as of now, we gauge our success based on the participation rate. For example, 1,000 employee's, year 1, we'd like to see 10% of employees involved...dollar amount notwithstanding, and increase that year after year. Realistically, anything close to 50% should be viewed as an incredible success, considering you are starting with 0%. The smaller the organization the larger the percentages should be.

Hospital C: ROI – the cost vs what was raised, we also look at number of employees that give but without a culture of gratitude, the number of employees that give has not been very large.

Hospital D: To be determined

Hospital E: I consider our program to still be in its youth (5 years) and we have also competed with the United Way since we began. We have stayed fairly flat over the last few years and are currently looking into a combined campaign with UW for FY19. Many folks I've spoken with indicate that a percentage of participation is the preferred measurement vs. income. Our participation rate has grown from 3% to 7% in the past 3 years. We've raised \$600k in 5 years, but based on the size of our staff, we must improve that number. I decided to test several patient focused funds this year vs. bricks & mortar campaigns and unrestricted. I am hopeful this will be more appealing to employees.

Hospital F: Participation. We received 546 gifts last year, 125 gifts were new. A little down from last year because of resignation of chief human resource.

5) What incentives, if any, are offered to employees for participating in the campaign?

Hospital A: Employees that donate within a specified time frame are entered into a raffle for various prizes. All participants are invited to an annual breakfast where they receive a small token of appreciation.

Hospital B: We had in the past gave away lanyards for ID badges with the giving year printed. The color would also change each year. We are considering a few different incentives at the moment. For example, everyone that signs up for payroll deduction gets a drinking mug or water bottle and one day each month they are entitled free refills in the cafeteria. Or they get to wear (appropriate) jeans each Friday, or they get a special pin to wear on their lapel or ID badge, etc.

Hospital C: Names on donor walls

Hospital D: We are likely to have drawings for prizes; special recognition to campaign "captains"; and other perks.

Hospital E: We have offered several giveaway products at the information tables noted above. They have included: hand sanitizer, a lip balm/sun screen combo, badge lanyard, pens, and anti-bacterial wipes. We also enter anyone who is enrolled a chance to win one of 3 iPads. This year we are increasing that number to 5.

Hospital F: Every donor no matter size gets a giveaway of some sort, card holder to adhere to the back of cell phone, pen, etc. This year we added paid time off as an incentive but there was not a huge response from that.