

GOOD GOVERNANCE CASE STUDY

An Online Series by **The Governance Institute®**

Loma Linda University Health Reaches Out to Share Its Vision

By Elaine Zablocki, *Staff Writer, The Governance Institute*



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Loma Linda University Health Reaches Out to Share Its Vision

Organization Profiled

Loma Linda University Health, Loma Linda, California

Rachelle B. Bussell, CFRE, Senior Vice President for Advancement
Lowell C. Cooper, M.Div., M.P.H., Chair, Board of Trustees for Loma Linda University Health
Gary Fraser, M.D., Ph.D., FACC, Principal Investigator of Adventist Health Study-2
Roger Hadley, M.D., Executive Vice President for Medical Affairs and Dean, School of Medicine
Richard H. Hart, M.D., Dr.P.H., President, Loma Linda University Health
Kerry L. Heinrich, J.D., Executive Vice President, Hospital Affairs
Olivia Moses, Dr.P.H., M.P.H., Wellness Program Administrator

Statement of Interest

Loma Linda University Health includes a 371-bed medical center, five additional hospitals, and eight health-related professional schools. These organizations were all founded by the Seventh-day Adventist Church, which believes that treating our bodies with respect is an important aspect of religious practice. Because of this, Adventists tend to have healthy lifestyles, and Loma Linda has been a pioneer in research on wellness and preventive care.

Now Loma Linda University Health is building upon these strengths while adapting to the new demands of a rapidly changing U.S. healthcare system. In July 2014, Loma Linda proudly announced a \$100 million gift from a former patient, the start of a \$1.2 billion fundraising campaign called Vision 2020, designed to prepare the organization for success in coming decades.



Organization Profile

Loma Linda University Health (1,076 licensed beds):

- Loma Linda University Medical Center
- Loma Linda University Children's Hospital
- Loma Linda University Medical Center East Campus
- Loma Linda University Behavioral Medicine Center
- Loma Linda University Surgical Hospital
- Loma Linda University Medical Center-Murrieta

University Faculty Medical Group:

- 850 faculty physicians, 67 specialties and subspecialties

Loma Linda University:

- More than 100 certificate and degree programs
- More than 750 international students from close to 100 countries
- Eight professional schools:
 - » School of Allied Health Professions
 - » School of Behavioral Health
 - » School of Dentistry
 - » School of Medicine
 - » School of Nursing
 - » School of Pharmacy
 - » School of Public Health
 - » School of Religion

Loma Linda serves the "Inland Empire" region of California, centered on Riverside and San Bernardino counties, with over four million people. This is a fast-growing suburban area with many blue-collar workers and a high unemployment rate. In addition, many patients travel to the medical center from other states and internationally, to access specialized services such as proton therapy for cancer, which Loma Linda pioneered.

Loma Linda University Health Reaches Out to Share Its Vision

Loma Linda University Health is a unique organization. The campus includes a health sciences university with eight professional schools, teaching at both undergraduate and graduate levels, as well as four hospitals (970 beds) in the immediate area. They were founded by the Seventh-day Adventist Church, which places healing and a healthy lifestyle at the center of its spiritual journey. Since its founding, the church's mission has been "to continue the teaching and healing ministry of Jesus Christ." An official church statement says, "Christ ministered to the whole person. Following his example, the mission of the Seventh-day Adventist Church includes a ministry of healing to the whole person—body, mind, and spirit."

What does that mean in practice, in today's world?

"When we consider the ministry of Christ, we believe that he taught and healed because he loved," said Olivia Moses, Dr.P.H., M.P.H., Wellness Program Administrator. "We all understand what it means to love and be loved. If we are able to sincerely express that, people sense it. Here at Loma Linda, when we hire people, we seek those who care deeply about others. As practitioners, when we share information about healthy behaviors, we don't approach people from a sense of guilt, but from a place of love; our goal is to help them move where they themselves want to go."

This strong commitment to service shapes Loma Linda's institutional goals and attracts people with similar views as both students and faculty. A recently published booklet from Loma Linda University Health, "Health Care and Religious Beliefs," emphasizes the spiritual aspect of healthcare and asks, "How can we offer our patients, with their rich diversity of religious backgrounds, care that is spiritually nurturing and culturally competent?" The booklet summarizes key beliefs of a dozen different religious faiths, so care providers will be able to support each patient in the most appropriate way when coping with major illnesses and approaching death.¹

In addition, Loma Linda University Health serves as the flagship organization for a network of 175 hospitals, half of them based in the United States, half of them located all over the world. Its service-oriented viewpoint attracts many students from the broader Christian community, and also a substantial contingent of international students from a wide range of religious backgrounds. A recent survey from the online salary-information company PayScale found that 91 percent of Loma Linda University graduates agree that their work makes the world a better place. (Loma Linda scored 16 percentage points higher than the next-ranked organization.)²

- 1 Loma Linda University Health, "Health Care and Religious Beliefs" (available at <http://lomalindahealth.org/media/medical-center/departments/employee-wholeness/healthcare-religious-beliefs.pdf>).
- 2 Douglas Belkin, "Harvard Law Graduates Top Salary Survey," *The Wall Street Journal*, October 22, 2014 (available at www.wsj.com/articles/harvard-law-graduates-top-salary-survey-1413957603).

Restructuring Loma Linda's Governing Boards

At present, Loma Linda is composed of three core corporations: the hospitals, the university, and the faculty medical group, as well as multiple other subsidiary corporations with overlapping board membership. All directors are members of the Seventh-day Adventist Church. The Loma Linda University Health board serves as the umbrella, which oversees the entire system.

Loma Linda boards meet on campus at least four times a year for two days each time, with additional teleconference meetings as needed. They meet in concurrent sessions. That means LLUH is in session throughout the day. When an issue comes up that also relates to one of the separate corporations, individual votes are taken, and their decisions recorded concurrently.

Since One Loma Linda is designed to reduce separate silos and create joint decision making, which benefits the organization as a whole, as one aspect of this process the boards will be restructured. "A broader, more inclusive board will mean aligned incentives," Cooper said. "Our three dimensions of activity, hospital management, education management, and direct clinical care, will be considered as integrated processes, instead of three different silos." While Loma Linda has not made a final decision about board restructuring, it is definitely leaning towards creating a unified structure. In December, the board voted to call for a special membership meeting in April where revised bylaws creating One Loma Linda University Health will be approved and a new board appointed.

Many Silos Becoming One Loma Linda

Over the years, Loma Linda has developed a complex organization, with separate corporate structures for the university, the medical center, affiliated hospitals, and several physician organizations. Now it is working to create one corporation that embraces both academic and healthcare aspects of its institutional activity. "Our goal is to align our entire organization to its central mission, and to balance academic and healthcare delivery components," said Lowell C. Cooper, M.Div., M.P.H., Chair of the Loma Linda University Health board of trustees. "We believe this will lead to more efficient accountable systems and infrastructure for the entire corporate structure."

Loma Linda plans to integrate its six hospitals, 850 faculty physicians, and the university into one organizational structure. "We started off more than 100 years ago as a hospital and a college," reflected Richard H. Hart, M.D., Dr.P.H., President of Loma Linda University Health. "Ever since then we have faced the question, 'Are we primarily a hospital taking care of people with a college on the side, or are we a university that educates students and relies on the hospital as a teaching laboratory?' Of course the answer is yes, we are both and we will always be both."

"One of the keys to success in our emerging value-based healthcare system is close integration between physicians and hospitals. However, the legal structure in California does not permit a hospital to directly employ physicians. For many years, the 850 physicians who teach at the medical school and practice at the hospital were organized into several independent specialty

group practices. Now, as part of the One Loma Linda process, they will coalesce into a centralized faculty practice plan with one leadership structure and one contracting mechanism,” Dr. Hart said. “This is an unusual step for a group of doctors to take, and one that we really appreciate.” Going forward, the physician group will be an integrated part of the system, with a number of physicians becoming part of the system board.

“Our goal and plan is to create an environment where each of the key components of the institution has a seat at the table, at the leadership level,” said Kerry L. Heinrich, J.D., Executive Vice President, Hospital Affairs. “We will end up making decisions that benefit the system as a whole, not decisions that benefit one aspect of the campus as opposed to another.”

Dr. Hart estimates that to be a success under value-based purchasing, the system needs to decrease expenses by 20 percent. That is doable, he says. “Just think about the way we purchase disposable goods. Right now the head of our orthopedic department is reviewing our operating room supplies. If we can get our doctors to standardize and use one brand of devices for joint replacements, rather than everybody wanting their favorite brand, we can save several million dollars on purchases.” Similarly, the surgery department is examining ways to standardize sutures and dressings. “Coronary stents, pulse generators, pacemakers—in each case we’re going with a single vendor that offers high-quality equipment and a good deal financially,” said Roger Hadley, M.D., Executive Vice President for Medical Affairs and Dean, School of Medicine. “Some departments are doing better than others, but in general we’re making headway. We are taking these steps because it’s the best thing for the patient, and also because it’s the only way for a healthcare organization to survive the next 10 years.”

“You start by looking at your high-dollar areas, your greatest consumers of supplies and therapeutics and devices, because that’s where you get your greatest return on investment,” Heinrich said. “But in the end we have to approach all aspects of medicine in this way. We will develop an integrated approach to the delivery of care, so that we maintain quality standards and also find ways of delivering that care for far less money.”

Another part of this effort is designing a care system that will facilitate much better communication with patients. Loma Linda is developing a new access center. When it is up and running, patients will make just one phone call to schedule a whole series of appointments. In the past, they needed to call several different departments and make separate appointments. Now they make one call, come to the hospital one time, and do all the necessary lab tests/x-rays/scans during one visit. This is better for the hospital, which only needs to check the person in one time instead of checking them in five times, and it is also much more user-friendly for the patient.

The most important change is increased communication and shared decision making among physicians and hospital administrators. “What’s happening internally now is we have committees cross-fertilized so physicians sit on the administrative committee at the medical center, and the medical center leadership sits with the doctors on their committees,” said Dr. Hart. “Now each group is asking itself, ‘How can we become more efficient working with you, rather than competing with you?’”



Transforming from separate silos into a unified organization takes quite a while, and Loma Linda has been preparing for it over many years. “We have been working over the past decade to get the right leadership in place, leadership that is committed to this transformation,” Dr. Hart said. “As you recruit new people, you discuss your future course so they have a good sense of the changes they can expect over coming years. Now we have reached a level of leadership agreement that enables us to come together and take these meaningful steps.”

“Coronary stents, pulse generators, pacemakers—in each case we’re going with a single vendor that offers high-quality equipment and a good deal financially. We are taking these steps because it’s the best thing for the patient, and also because it’s the only way for a healthcare organization to survive the next 10 years.”

—Roger Hadley, M.D., Executive Vice President for Medical Affairs and Dean, School of Medicine

Employees Living Whole

Loma Linda self-insures its employees and their families (about 24,000 people). Since 2006, the organization has invested a great deal of energy in its corporate wellness program, encouraging all employees to take personal steps to improve their health. “We’re trying to create a corporate culture that says wellness is the norm,” said Moses. “Our program is called Living Whole. We consider that living whole is not a fixed destination; it’s not something where you get a gold star and you’re done. Living whole is an active process that we refresh every day.”

The wellness program includes many innovative ways to support employees. All campus cafeterias offer wellness meals that meet specific criteria in terms of salt content, fat, and calories. The Cancer Fighting Kitchen offers live demonstrations of ways to cook healthy meals, using foods that fight cancer. Some seats at the demonstrations are reserved specifically for cancer patients and their families.

The Say No to OverWeight (Say NOW) Program offers opportunities to discuss lifestyle changes related to exercise, diet, and sleep. Participants experience an average 15-pound weight loss, and more specialized programs are available for those who are clinically obese.

The Step It Up Pedometer Competition recruits employees into teams of four, and the teams compete to count the greatest number of steps during a two-month walking challenge. Better Understanding for Individuals Living with Diabetes (the BUILD program) includes four physician visits and a series of educational classes. Those who complete the program receive reimbursements for all of their diabetes-related copayments and injectable or oral medications.

Appropriately enough, Loma Linda has developed an “Unstuck Program” for anyone who feels stuck in a particular situation. Perhaps they can’t lose weight, or they’re stuck in a bad relationship, or they feel they’ve hit a ceiling in their job. This is a 12-week educational and cognitive support class in which people explore their personal barriers to life changes and set specific new goals each week.

To encourage stair climbing, the hospital posted colorful outdoor murals in the main stairwell in the medical center. The second floor walkway connecting the children’s hospital to the adult hospital is now called “Wellness Way.” It is decorated with huge photos of employees who have won Living Whole honors and also photos of top institutional leaders engaged in their personal wellness activities. For example, there’s a photo of Dr. Hart, who cuts and splits three to four cords of wood every winter, with his boots, sledgehammer, and wedges.

In 2014, Loma Linda for the first time offered its employees two different health plans: one called the Wholeness Health Plan, and one called the Base Plan. To join the Wholeness Health Plan, each employee and spouse agreed to participate in appropriate care management programs if they were invited to do so. Adults needed to complete online health risk assessments and brief biometric screenings that included pulse rate, blood pressure, a finger stick, and a lipid panel. An astonishing 97 percent of employees and spouses completed the assessment and biometric screening.

Initially the Wholeness Health Plan is going to focus on high-risk members (smokers, people with high lipid levels, etc.). About 3 to 5 percent of members will be referred for additional support from care managers and health coaches, and patients with significant chronic disease will be referred to intensive primary care models such as patient-centered medical homes.

Employees who choose to stay in the Base Plan pay higher premiums and copayments. Eventually Loma Linda expects to offer a more comprehensive structure with more services for employees who participate in the Wholeness Health Plan. “Over time we will increase the incentives for employees to participate in a medical home,” Heinrich said. “We expect to just make it more and more attractive.”

Adventist Health Studies

By Gary Fraser, M.D., Ph.D., FACC,
Principal Investigator, Adventist Health Study-2

The Seventh-day Adventist Church emphasizes that healthful living is a virtue. Adventists are encouraged to abstain from tobacco and alcohol and about half of them are vegetarians. This has led to an unparalleled research opportunity to study the effects of different dietary habits on health experience. Over 57 years, the LLU faculty has had continuous U.S. federal funding for epidemiologic studies.

The wide range of dietary habits lends power to statistical analyses and the Adventist population is particularly valuable because it matches or goes beyond the dietary recommendations of well-known professional organizations. Three large cohorts of Adventists, two in California, plus the current national cohort (with 96,000 subjects) have provided and will continue to provide groundbreaking new evidence of important health effects due to dietary and other habits.

The first studies in the 1960s offered some of the early U.S. evidence about the adverse health consequences of cigarette smoking by comparing the experience of non-smoking Adventists, who had relatively low rates of cancer and heart disease and longer life expectancy, to results from a concurrent large American Cancer Society study of non-Adventists.

Since then the research focus has largely been on diet, comparing the health experience of Adventists who eat in different ways. Based on careful actuarial analyses, the California Adventist population has been labelled the only American “blue zone.” That’s a term coined by others to indicate a region where people live unusually long lives. Indeed, as compared to other Californians, Adventist men live 7.3 years longer, and Adventist women live 4.4 years longer. Much of this appears to be due to dietary preferences, aided also by a lack of smoking and somewhat greater attention to regular physical activity.

The LLU studies were among the first to offer strong evidence that consumption of a wide variety of fruits and vegetables is associated with lower risk of several common cancers. They were also the first to discover that regular consumption of small quantities of nuts is associated with lower rates of heart attack, a finding now confirmed by other studies.

Research analyses and publications continue apace. At present, research focuses particularly on risks related to cancers of the colon, breast, and prostate, exploring associations with vegetarian dietary habits, various meats, omega-3 fatty acids, dairy foods, and consumption of soy (half of Adventists eat soy foods at Asian levels). LLU is now seeking to expand these endeavors to include studies of dementia, congestive heart failure, and gene expression.³

3 For more information, see www.llu.edu/public-health/health/early_findings.page.

Philanthropy Priorities

Clinical Care \$225 million

- New Adult Hospital
- Expanded Children's Hospital
- Enhanced Proton Treatment Center
- Enhanced International Heart Institute
- New East Campus Operating Suite



Education \$60 million

- Scholarships
- Faculty Development
- Research Discoveries
- New Educational Approaches



VISION 2020

The Campaign for a
WHOLE Tomorrow

Research \$50 million

- New Research Laboratories
- Research Program Endowments



Wellness \$15 million

- New Wholeness Institute
- Enhanced Community Programs
- Interprofessional Education
- Seminars and Publishing



MANY STRENGTHS. ONE MISSION.

A Seventh-day Adventist Organization



LOMA LINDA
UNIVERSITY
HEALTH

Vision 2020: The Campaign for a WHOLE Tomorrow

In 2012, Loma Linda began planning a massive fundraising campaign, six times larger than anything it has ever done. One reason is the urgent need for new hospital buildings that will meet the state's updated codes for earthquake preparedness. However, Loma Linda used this urgent need as an opportunity to re-envision and plan for possible future roles. Vision 2020 is named "The Campaign for a WHOLE Tomorrow."

The brochures for the campaign say, "A Vision Begins with Imagination" and invite readers to imagine a tomorrow where:

- Children play and thrive
- People live longer and happier
- Good health is global
- Lives are restored
- Being well means wholeness in body, mind, and spirit

The total fundraising goal for Vision 2020 is \$1.2 billion, and a major portion of that money will be used for construction of new buildings. Loma Linda plans to raise \$360 million through philanthropic contributions. The total project will also utilize a state bond initiative for Loma Linda University Children's Hospital, operating gains, and some bond financing.

The Loma Linda campus is near the San Andreas Fault. During an earthquake hospitals are particularly vulnerable, since something as small as a broken water pipe can flood patient rooms, damage electrical systems, and put the hospital out of commission just when it is needed most. California regulations require hospitals to retrofit or replace current buildings so that patients will be safe if there's an earthquake, and the deadline is 2020.

Loma Linda University Medical Center has three towers that can be repurposed for outpatient services, but the hospital must construct a new building that meets seismic regulations for inpatient care. The Vision 2020 campaign will fund:

- A new adult hospital (256 beds with capacity for an additional 64 beds and 16 dedicated operating rooms)
- An expanded children's hospital (84 new pediatric med/surg beds plus additional beds to total 100 for neonatal intensive care)
- Research laboratories and expanded research programs
- Faculty development and student scholarships
- New educational approaches
- Wholeness initiatives

The Wholeness Institute builds upon Loma Linda's experience encouraging its own employees to live in ways that enhance physical, mental, and spiritual health. The institute will transmit Loma Linda's practices and philosophy outwards, in expanding circles, using many different methods.

Academically, the institute will support continuing research on interventions to improve health outcomes and lower health costs. Specific wholeness learning objectives will be integrated throughout the curriculum of the eight professional schools on campus. Educators will rely on interprofessional education and collaborative practice models to prepare students for the team-based care of the future.

In the Campus Work Environment, the institute will work to facilitate a vibrant culture of health on campus. That means:

- Encouraging comfortable working attire, walking breaks, and standing desks
- Discounted prices for healthy meals
- No more deep-fat frying
- Mini-fitness corners located throughout the campus
- Mixed-use residential/commercial development on campus

In the City Center, the institute will work to develop vibrant spaces that encourage and support a healthy lifestyle. That means:

- More trees, parks, and pedestrian plazas
- Restaurants with locally grown vegetarian cuisine
- Healthy fast-casual eateries serving smoothies, whole grains, and ethnic foods
- Cultural activities and related retail shops

Community Wholeness includes:

- Partnerships with local churches and schools
- Classes in cooking and nutrition
- Health education, fitness training, job searches, and other workshops
- Developing a wholeness-themed residence for seniors
- Offering lifelong learning, wellness, and support programs to promote healthy aging

For Sharing Information Broadly, the institute will:

- Develop a certificate course for Whole Health Coaches, available on campus and also nationwide through distance learning
- Publish a Wholeness Primer and other materials for varied mainstream audiences, introducing potential lifestyle changes in an intuitive and compelling way

Advancing Vision 2020

In mid-July 2014, Loma Linda University Health announced a \$100 million gift to its Vision 2020 campaign from Dennis and Carol Troesh, long-time Riverside, CA, residents and business leaders. This is believed to be the largest single-gift commitment to healthcare in the history of the Inland Empire.

A gift of this magnitude depends on many different factors. The family has a years-long connection with the hospital. Several of their grandchildren were born there, and their daughter studied nursing at the LLU School of Nursing. At the public ceremony announcing the gift, Mrs. Troesh said, "We could see how much people at the hospital cared. Over the years, God has abundantly blessed our family, and it is our privilege and honor to give back to the community we have called home for most of our lives."

Contributing factors also include a years-long process of preparation and careful thought, defining a new vision for Loma Linda, and then communicating that vision clearly to many different audiences.

When Rachelle B. Bussell, CFRE, Senior Vice President for Advancement, arrived at Loma Linda in January 2011, the university and medical center had separate public relations/advancement departments. Each of the eight schools had a separate connection to its own alumni. If a graduate of the nursing school

married a graduate of the medical school, in future years they each received separate fundraising letters from their own school.

Bussell's first assignment was to consolidate these separate fundraising departments into a unified body, serving the entire Loma Linda organization with a unified message, expressed in similar language and graphics throughout the entire organization.

This was a big change and it was not easy. It meant, for example, going to the dean of the School of Dentistry or the School of Medicine and explaining that in the future its development team would report directly to the organization-wide advancement department. "I'd say, 'We'll keep you in the loop, and we'll work with you on your priorities, but your advancement officer has to understand the full richness the institution has to offer,'" Bussell recalled.

Another key step was developing a rebranding tool that defines the message and vision of the whole institution. It uses key phrases to encapsulate the new vision for Loma Linda: "Unstoppable, LIVE IT. Active, LIVE IT. Consider one thing you can do—one change you can make—to embrace a lifestyle centered on wellness and wholeness." Another page sets forth, "Our Brand Promise: Loma Linda University Health is here to support you—no matter where you are in your journey to health, well-being, and wholeness." Going forward, all messaging and public relations and marketing campaigns from Loma Linda University Health will use these concepts and language to represent the institution as a whole. (Loma Linda created an educational brochure for employees and the community describing what the brand means. If you would like to receive an electronic copy of this brochure, please contact The Governance Institute or download it from the Resource Library at library.governanceinstitute.com.)

Then the advancement team sat down with researchers from the hospital and the university to communicate the strengths of Loma Linda and how they mutually support and influence what Loma Linda can contribute to healthcare over the next decades. From this effort they began to develop specific ideas and plans for Vision 2020.

While the advancement team was developing the case statement for Vision 2020, it was also reaching out to potential major donors, such as the Troeshes, who had served on the children's hospital foundation board for a number of years. When Loma Linda decided to build leadership support for the Vision 2020 campaign, it invited key individuals to serve on the president's advisory cabinet, and the Troeshes were part of that group. Eventually the advancement department tailored a specific proposal connected to their particular passions and priorities. "We knew they had a special concern for children; we talked to them about being the lead gift to inspire others," Bussell said. "Frankly, when they came back and told us what they had decided to do, they gave us a gift greater than what we asked for. It was amazing."

Since the initial campaign kickoff in July 2014, the advancement department has been reaching out to alumni and former patients throughout the country, with video presentations and live speakers. In addition to the general methods most hospitals and universities use for fundraising, the Loma Linda advancement department has developed specialized methods that work

particularly well for Loma Linda. Some organizations have three separate offices: one dealing with smaller annual gifts, another dealing with major gifts, and a third for planned giving. Loma Linda looks at donor relationships as a continuum, so the same person will be the point of contact for a new graduate who makes a small annual gift, and for the same person 20 or 30 years later, when they may become a major donor. "We find donors really appreciate this personal continuity," Bussell said.

Because the campus has eight professional schools, Loma Linda developed a special case statement for alumni, so they understand the connection between their specific school and the broad clinical settings that make professional education possible. "This is unique, and it requires intentional storytelling and drawing clear connections," Bussell said. "For example, why should dental school alumni donate to the medical center? We need to explain that trauma often involves the face and mouth. When we are able to put dental operatories in the emergency room, this offers better training for dental students as well as improved continuity of care for patients."

In addition, over the past 18 months the advancement department has trained more than 200 hospital leaders on how to accept gratitude from a patient. What happens at a hospital is very important to people, and they often want to express their appreciation and gratitude. This means that physicians—and everyone who works at the hospital—need to know how to acknowledge those feelings. For example, a physician might say, "I enjoyed taking care of your loved one, and I appreciate you sharing what this meant for you."

When patients say, "I wish I could contribute to this work," it's appropriate for physicians, nurses, and all employees to mention that there are many ways available to support the work. Loma Linda, for example, has a Healing Hands program, and copies of its Healing Hands brochure are readily available throughout the hospital.

Regional Alliances for a Changing Healthcare System

For the past 20 years, Loma Linda has provided care for the MediCal (Medicaid) population in San Bernardino and Riverside counties through a managed MediCal initiative called the Inland Empire Health Plan (IEHP), initially serving less than 10,000 people. Now, under the Affordable Care Act, IEHP has grown dramatically, with over one million lives at the start of 2015. The plan will probably peak at 1.2 million lives, a quarter of the population in the region. The two counties have invited Loma Linda to form a major partnership, embedding specialists from the medical school within county hospitals, and receiving many referrals for patients who need tertiary and quaternary care.

In addition, the medical center has entered conversations with a significant number of community hospitals in the area, all of whom want to be part of a larger system. "Both the public sector and the private sector are seeking increased collaboration. As the only academic health science center in the region, most of them consider Loma Linda to be a potential partner," Dr. Hart said. "We will probably develop some sort of affiliation with most of those hospitals as we go forward."

“These days no one wants to be alone,” he added. “Everybody senses that the patient population is getting locked into contracts. Increasingly, employers are selecting a preferred provider network, and free choice among patients is dwindling. Unless you have vertical integration with referral sources, you may lose a significant number of patients.”

“Today hospitals are competitors with each other under the remainder of the fee-for-service system, which is still the dominant portion of the system. At the same time the world is changing and we need to move to at-risk contracting relationships. On the one hand you have to build a regional integrated network with other hospitals; at the same time you put up billboards along the freeway to compete with them for patients. It’s quite a challenge!”

—Kerry L. Heinrich, J.D.,
Executive Vice President, Hospital Affairs

Accepting the Challenge: Creating Wholeness

Loma Linda has a deep-seated, historic commitment to promoting health, not just fighting disease. It benefits from years of research on healthy lifestyles, years of practical experience in developing and maintaining healthy lifestyles. “Our business is really health, not disease,” Cooper said. “Historically, the U.S. healthcare system has been based on fee-for-service. Now that it’s moving to a value proposition, it offers a much better opportunity to demonstrate that healthy lifestyle approaches will increase population health. We need to think beyond the walls of the institutions that treat disease. Now we need to think in terms of increasing education, community-wide systems, and improving community behaviors.”

How does Loma Linda carry out its commitment to “comfort the suffering and heal the sick” in today’s world? Many graduates embark on service programs in developing countries. “Right now,

in the middle of the Ebola epidemic, we have two young alumni maintaining a hospital in Monrovia, Liberia,” said Dr. Hart.

Closer to home, Loma Linda has formed a special relationship with the city of San Bernardino, five miles to the north. The city has a high unemployment rate, and declared bankruptcy in 2012. For the past 20 years, Loma Linda has maintained a community health center there on the grounds of a former air force base, with 41,000 patient visits a year. Now it is expanding its clinical services. In December 2014, Loma Linda broke ground on a 150,000-square-foot building in downtown San Bernardino. In addition to clinical care, the building will house a gateway college where high school students will train for health professions such as medical assisting, nursing assisting, coding, and phlebotomy. “This initiative is our way of saying we are part of the community,” Dr. Hart said. “We’ll engage the community, not just to provide healthcare but also to offer job training for young people.”

At the same time, the landscape of healthcare is undergoing rapid change, and healthcare organizations need to adjust on the go. “Everybody in healthcare is aware of this,” said Cooper. “We must make bold decisions in an uncertain environment.”

“What makes this so hard is that we have a schizophrenic healthcare system,” agreed Heinrich. “Today hospitals are competitors with each other under the remainder of the fee-for-service system, which is still the dominant portion of the system. At the same time the world is changing and we need to move to at-risk contracting relationships. On the one hand you have to build a regional integrated network with other hospitals; at the same time you put up billboards along the freeway to compete with them for patients. It’s quite a challenge!”

The steps Loma Linda has taken to break down silos and create an integrated organization, to cut costs and deliver excellent care efficiently, are preparations for the new world of value-based, at-risk healthcare. Eventually, Loma Linda University Health could develop its own accountable care organization, using team-based care to maintain the health of a defined population. Eventually, it may develop its own health plan. Loma Linda is positioning itself to maintain its historic traditions, to continue as a successful organization, and to share its distinctive viewpoint with wider audiences.

