

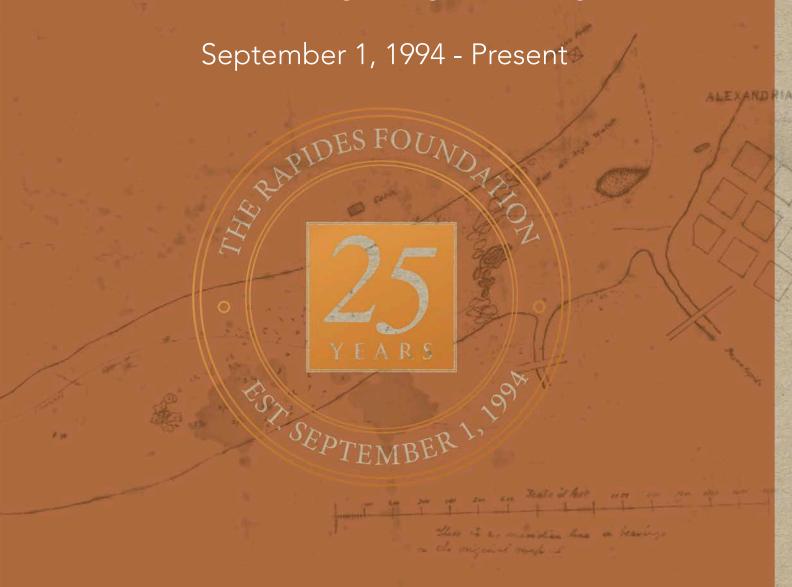


The Rapides Foundation





# HONORING THE FIRST 25 YEARS





## **FOREWORD**

n 1994 the trustees of Rapides Regional
Medical Center took a reasoned but bold step
in establishing Rapides Healthcare System, a
joint venture with HCA for the operation of
RRMC, and creating The Rapides Foundation.
Would this new structure ensure the viability of
RRMC and strengthen its services, quality and
community benefit? Would the Foundation
use its grantmaking consistent with its legacy to
improve health in the region? Could the expected
opportunities be realized and emerging concerns
be addressed for the benefit of Central Louisiana?

My answer to the above is a resounding yes.

This book reviews the advent, development and hard-earned successes of Rapides Healthcare System and The Rapides Foundation during the

ensuing 25 years. Success was driven and enabled by many who invested time, reputation and relationships to learn, decide, commit, resolve conflicts, work together and celebrate successes.

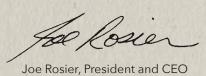
The contribution of many stakeholders must be recognized and preserved as we

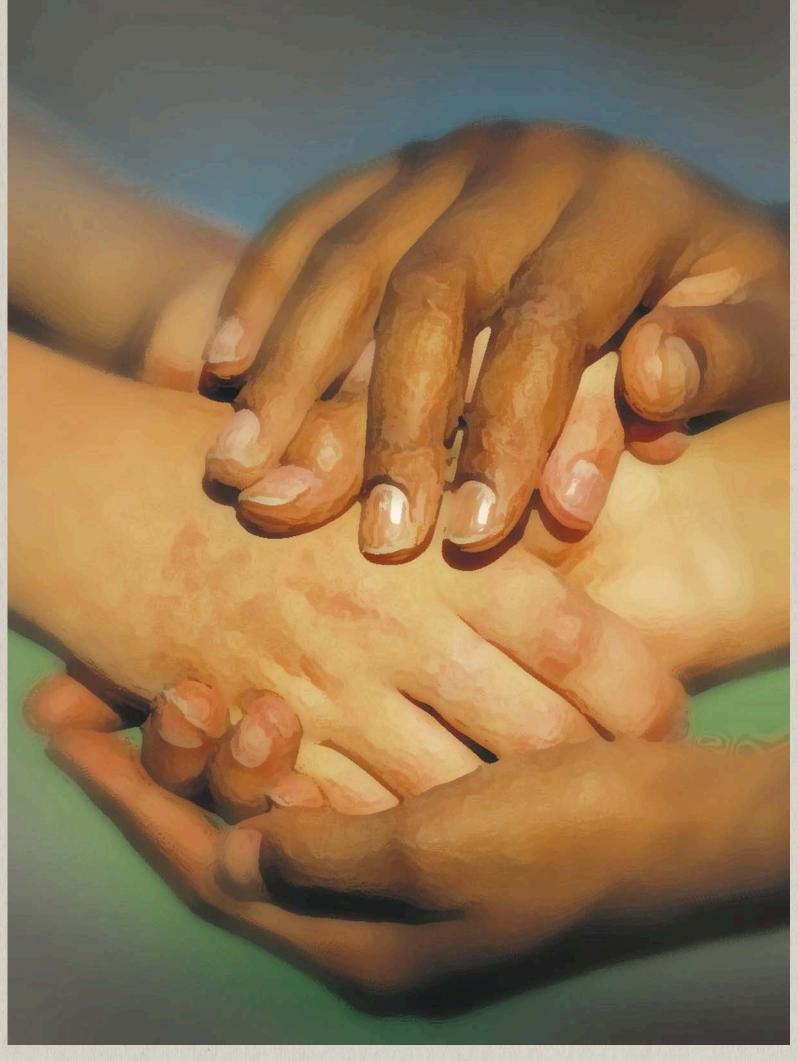
move past our 25th year. The Rapides Foundation would not have achieved the initial aims of its founders without the efforts of:

- Patient loyalty and community support.
- RRMC employees and medical staff.
- RRMC and HCA management.
- Grantees and funding partners.
- Foundation staff, counsel and consultants.
- But most importantly, our founding trustees and the nearly 80 residents of Central Louisiana who have provided leadership, ownership and community perspective as members of the Foundation's Board of Trustees.

At 25, The Rapides Foundation has evolved, grown and matured consistent with its initial purposes. It is poised to provide more and better healthcare in an even more uncertain environment than in 1994.

The Rapides Foundation continues to focus on addressing the most significant drivers of health in partnership with the community. It is a truly unique asset for Central Louisiana that will provide resources and leadership for improved health in the region.





# MISSION, VISION AND PHILANTHROPIC OBJECTIVES

### **MISSION**

To improve the health status of Central Louisiana.

### VISION

Central Louisiana will be positively impacted by the Foundation deploying resources to improve key factors of health status.

### PHILANTHROPIC OBJECTIVES

### **HEALTHY PEOPLE**

To improve access to healthcare and to promote healthy behaviors.

### **EDUCATION**

To increase the level of educational attainment and achievement as the primary path to improved economic, social and health status.

### **HEALTHY COMMUNITIES**

To improve economic opportunity and family income; and enhance civic and community opportunities for more effective leaders and organizations.

### THE CREATION OF THE RAPIDES FOUNDATION

nder the guidance of its Board of Trustees and Chief Executive Officer, The Rapides Foundation has spent a quarter of a century fulfilling its mission of improving the health status of Central Louisiana in its dual role as part owner of Rapides Regional Medical Center and as a leading health grantmaker in the region.

It began on September 1, 1994, when a joint venture partnership between the hospital and HCA (formerly called Columbia/HCA) created a \$140 million endowment to establish the Foundation. At the time, The Rapides Foundation was the largest endowed charitable foundation in Louisiana. The partnership extended the hospital's ability to provide quality healthcare in a changing environment and created a wellspring of

Foundation resources dedicated to improving the health of Central Louisiana residents.

Today, the Foundation has assets of \$295 million, has disbursed more than \$223 million in grants, and continues to have a 26% ownership stake in the healthcare system that resulted.

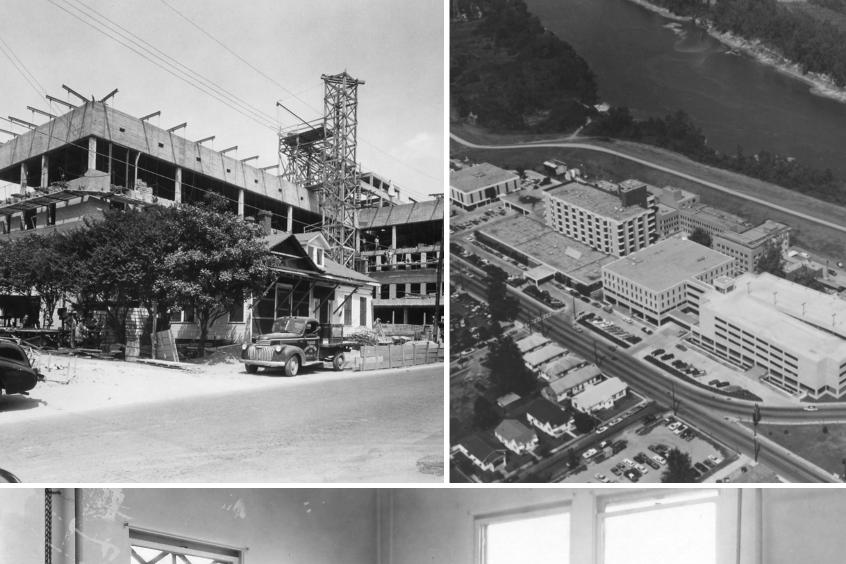
Joe Rosier was hired to lead the Foundation from the beginning and continues in the position as its President and Chief Executive Officer today.

"The Rapides Foundation is a unique organization that continues its legacy as a healthcare provider through continued ownership in Rapides Healthcare System and involvement in its success, but also as a significant grantmaker in Central Louisiana. Through both of those avenues we pursue our mission of improving health status to ensure that there is

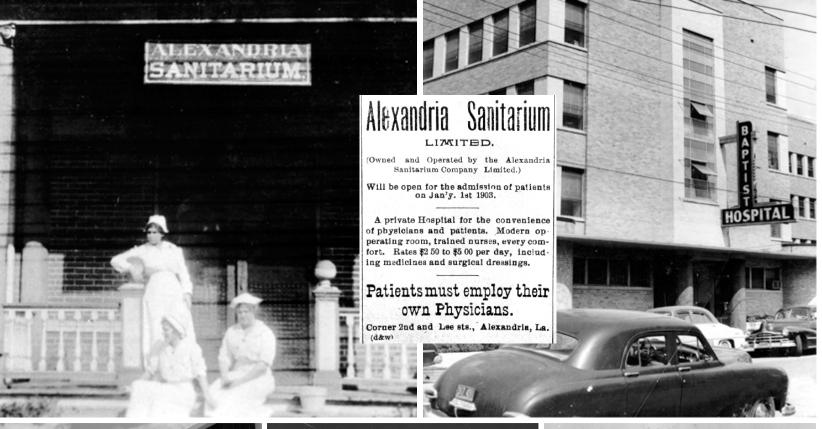
quality healthcare, there's access to that care, and other drivers of health are also addressed through our philanthropy. And we do that in a very intentional way that these resources can make a difference in Central Louisiana," Rosier said. "While our work has evolved through the past 25 years, our commitment to our mission remains steadfast."

### A Legacy of Healthcare

The Rapides Foundation stems from a legacy of healthcare and community service that spans nearly 12 decades. It began in 1903 when a group of six physicians formed the 20bed Alexandria Sanitarium at the corner of Second and Lee streets. The Louisiana Baptist Convention acquired the Sanitarium in 1917 and operated





















it as the Baptist Hospital until 1970 when it was turned over to the community as Rapides General Hospital. From that point, the hospital flourished as Rapides Regional Medical Center and developed into one of the leading nonprofit, acute care hospitals in the state.

By the hospital's 90th anniversary in 1993, challenges to its long-term ability to provide quality healthcare were recognized by the RRMC trustees. Hospital trustees and administration were concerned with market and competitive pricing pressures in a managed care environment that had become the focus of the industry.

Greg O'Quin was chairman of the Rapides Regional Medical Center board during the period leading up to the hospital's sale and the Foundation's creation. "In 1993 the new Clinton administration announced that they would be changing healthcare in the United States," O'Quin said. "Businesses were starting to align or partner with hospitals. We had about \$30 million in bonded indebtedness at Rapides Regional Medical Center. We knew that the wrong changes in healthcare or losing a large group to competing hospitals would cripple us financially. We started looking for options to ensure the future of Rapides Regional Medical Center. We met extensively with the leadership of Cabrini Hospital but were unable to reach a partnership. We then started meeting and interviewing with

large hospital organizations around the country."

The issues to be addressed were managed care contracting, managing operating costs and obtaining access to capital for the technology and facilities necessary to maintain and improve the level of excellence that the medical and patient community had come to expect. Extensive research indicated that a networked alliance could offer operating efficiencies and strengthen market potential as a managed care provider.

The RRMC board engaged a healthcare consulting company and local legal and tax exemption counsel to analyze the hospital's position and assist the board and administration as it explored options. In addition, a national accounting and management advisory firm was engaged to review and identify strategic managed care options for Rapides Regional Medical Center and its physicians.

During the fall of 1993, the Executive Committee of the hospital board appointed a task force composed of O'Quin, RRMC Administrator Jim Montgomery and Gregory Erwin, a member of the hospital board, to conduct the primary investigation, discussions and negotiations with possible venture partners.

Through their exploration, task force members identified HCA as offering the strongest national network, financial support and investment, and recommended in March 1994 that the Rapides Regional Medical Center Board of

Trustees consider entering into a Letter of Intent with the organization. After board approval and execution of the Letter of Intent, the task force, with Montgomery replaced by trustee Bill Patty, M.D., commenced final negotiations and decision-making during the spring and summer of 1994. The transaction was completed on September 1, 1994, and The Rapides Foundation was created. The joint venture partnership with HCA would extend the hospital's ability to provide quality healthcare in the changing environment and create a perpetual pool of resources to enable and improve the health status of Central Louisiana residents through grantmaking activities as The Rapides Foundation.

"After the joint venture with HCA was created, the trustees knew we had the resources, if managed properly, to benefit Central Louisiana for many, many years," O'Quin said. "The new Rapides Foundation was one of the largest foundations in the United States for a community our size. Our immediate goal was to structure the Foundation so the resources would be used wisely and the Foundation would serve our community for a long time. Twenty-five years later we can see the success of the seeds we planted in 1994."

The ensuing 25 years would be spent realizing the opportunity presented by the establishment of the joint venture partnership and The Rapides Foundation.

## FACING CHALLENGES

s part of the joint venture partnership, the operating assets and name of Rapides Regional Medical Center were contributed to Central Louisiana Healthcare System (now called Rapides Healthcare System) along with four smaller Central Louisiana hospitals contributed by HCA. The Foundation held a 50% limited partner interest in Central Louisiana Healthcare System, with HCA as the general partner with a management contract. Provisions in the agreement allowed for certain powers to be reserved for the limited partner in an effort to maintain local control over significant decisions and called for the hospitals to be operated as if they were not-forprofit hospitals in most relevant aspects.

Rosier explained maintaining part ownership of the hospital

was done intentionally so that the Foundation could have strong oversight of the community benefit the hospital provides. "There are hundreds of healthcare conversion foundations that sold the whole hospital, but our board sought to ensure community benefit by continuing its ownership of the hospital," he said.

In the years following the closing of the joint venture, The Rapides Foundation began to define itself while also continuously monitoring HCA and Central Louisiana Healthcare System's compliance with obligations founded in the Contribution and Partnership Agreements. In 1997, Foundation trustees recognized operational and governance concerns associated with the joint venture structure. In addition, legal difficulties encountered by

Columbia/HCA led to a change in top management at HCA.

After the HCA management change, Harry Silver, a founding trustee and chairman of the Foundation's board during the years 1997-1999, reached out to Tommy Frist, Jr., M.D., who had taken over the leadership role at HCA. Silver sought to resolve concerns among Foundation trustees and hospital physicians about the joint venture structure and through the diplomatic efforts of both men, the process began to negotiate a reorganization of the joint venture with the objective of improving local control and decision-making. A medical staff task force was included in the negotiation team and was heavily involved in defining the new governance structure. The result was a restructuring of the joint venture to a limited liability





corporation in 1998.

Silver said the medical community became partners in the Foundation's evolution. "After explaining what we were trying to do, they became true partners because at the end of the day, they realized that what we were doing was of mutual benefit for the people in need in our area."

As a result of the 1998 change in form and management arrangement to a limited liability corporation, HCA and The Rapides Foundation had equal rights as members. The composition of the LLC's Board of Governors was changed to seven appointees by HCA, seven appointees by The Rapides Foundation, and, uniquely, seven appointees by the hospital medical staff. The

prior management contract was voided, and HCA became a Management Advisor, subject to the direction, control and utilization by the Board of Governors of the LLC. The LLC changed its name to Rapides Healthcare System, LLC, in September 1999.

As The Rapides Foundation is a continuation of the nonprofit corporation that held Rapides Regional Medical Center and continues as a healthcare provider through its ownership of the hospital through Rapides Healthcare System, it maintains tax exemption as a public charity/hospital. This requires that Rapides Healthcare System continue to operate according to the IRS requirements for tax-exempt hospitals even though it is a taxable entity.

The Foundation sought from inception to have its tax exempt status affirmed by the IRS. With many similar partnerships formed across the country, the IRS scrutinized and even attempted to revoke the tax exempt status of similarly structured partnerships. Following much discussion and negotiation through May 2004, the IRS declined to issue The Rapides Foundation a closing agreement or explicit approval of its participation in the partnership. The Foundation realized it had to rigidly comply with the IRS rules in order to remain a public charity, so it worked with HCA to put in place governance structures, compliance policies, and procedures that control key aspects of the partnership's operations. The Foundation's







Healthy Behaviors Program grants fund healthy eating and active living activities in the region.



staff and board still maintain extremely active oversight of the partnership today to ensure all compliance guidelines are met. The IRS has subsequently issued rulings that affirm continued tax exemption for hospital joint ventures if all provisions for community benefit and private benefit are met.

Six years into the joint venture, the Foundation had faced challenges in realizing the expected benefits from the partnership. A right to sell option that allowed the Foundation to sell its interest to HCA at a predetermined price was set to expire in September 2001. In late 1999, Foundation trustees held a series of strategic meetings to consider the economic and community impact of its Rapides Healthcare System ownership, governance and income on the pursuit of the Foundation's

purpose, mission and objectives relative to the risks of ownership, primarily potential loss of its tax exempt status. The board began to explore its options and determined they would sell 24% of the Foundation's 50% interest in RHS while retaining the ability to have effective control associated with the community benefit. Through a May 2000 board resolution, trustees formalized the Foundation's commitment to its role as a tax-exempt healthcare provider through its continued ownership interest in Rapides Healthcare System, and asserted its continued commitment to ensuring community benefit through monitoring, oversight and community involvement in governance of the hospital. The Foundation continues to own a 26% interest in Rapides Healthcare System today.

"Through our deliberations, the board determined that selling an additional 24% interest of RHS to HCA would lower economic and tax-exemption risk thereby strengthening our capacity to pursue our dual mission. Our philanthropic resources were safeguarded while our continued 26% ownership interest preserved our 50% community voice in governance and the ability to assert effective control," said Greg Nesbitt, one of the founding trustees who served on the Foundation's board from 1994 to 2002 and was its chairman from 2000-2002. "These actions, and formalizing our commitment as a tax-exempt healthcare provider, would provide the greatest community benefit, and in the end, it strengthened the Foundation and allowed us to do even more to improve the health of Central Louisiana residents."

Another change for the system in 2009 was the sale of its three rural hospitals - Avoyelles Hospital in Marksville, Oakdale Community Hospital in Oakdale, and Winn Parish Medical Center in Winnfield - to Progressive Acute Care LLC. Also, in 2009, RHS transitioned its operations lease of Savoy Medical Center in Mamou to Savoy Medical Group and the Town of Mamou. These actions by RHS gave these hospitals a chance to pursue strategies that best met the needs of those hospitals and communities while allowing RHS to focus all of its efforts on RRMC.





## DEVELOPING A GRANTMAKING APPROACH

arly in its 25-year history,
The Rapides Foundation's
Board of Trustees
recognized the need
for a structured, strategic and
deliberate way to spend its
limited resources in order to
have the biggest impact on
the health of Central Louisiana
residents.

By the end of its first full year of operations, the Foundation's CEO and board developed and adopted grant guidelines to establish a basic grantmaking infrastructure, adopted an Investment policy, invested its cash assets, and funded a broad array of grants totaling \$8.5 million, a major accomplishment for a health conversion startup.

"Initially we started out as quickly as we could with a responsive grant program that was very broad. At the time the Foundation didn't have priority interests so we responded to what the community brought to us," Rosier said. "But with that we found ourselves having more grant interest than there were resources, so the board had to begin a disciplined process of aligning our grant funding with the Foundation's mission."

Having established the Foundation as a grantmaker, the trustees and CEO began refining the process to ensure maximum community benefit consistent with its purposes. They began networking and learning about health philanthropy by engaging with other Foundations at the regional and national level. They found a valuable resource in Grantmakers in Health, a nonprofit, educational organization dedicated to helping foundations and corporate giving programs

improve the health of all people, and in the Southeastern Council of Foundations, an association of grantmakers working to strengthen, promote and increase philanthropy in the southeast.

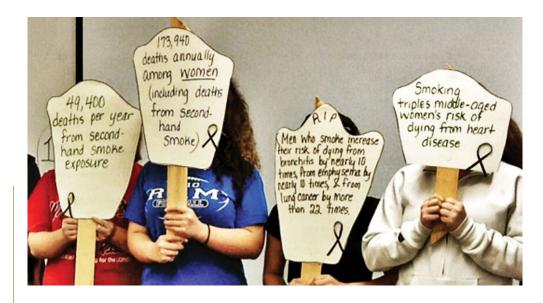
Following the Foundation's first board retreat in 1996, trustees directed Foundation staff to develop a more proactive grantmaking approach to include the components of assessment, issue selection and benchmarking, grant solicitation and awards, and outcome evaluation.

In researching its grantmaking approach, Foundation leaders were introduced to "The Actual Causes of Death in the United States" by William H. Foege, MD, MPH, and J. Michael McGinnis, MD, MPP. The connection was quickly made Healthy Behaviors School District Partnership grants are used to educate students about the dangers of tobacco use.

that the Foundation would best impact the health status of Central Louisiana by focusing on factors that represent the root determinants of mortality and disability.

"I think the largest movement we made in advancing our grantmaking was when we learned and became aware of the impact of behavioral and social determinants on health status. Certainly having access to healthcare is critical, but the larger driver on premature death or illness are behaviors," Rosier said.

In a June 1996 report,
Foundation CEO Joe Rosier
recommended to the board that
grantmaking address the risk
factors and underlying causes
which impact community health
status, and that a broader
definition of health would
ultimately include a breadth
of health factors rather than
strictly the absence of disease.



This early recognition of how the determinants of health impact the health status of a community placed The Rapides Foundation at the forefront of a national movement which addresses mostly generational issues through that approach to grantmaking.

In recognizing that community health status can be improved by addressing its behavioral and social determinants, the Foundation affirmed that its grantmaking extends and complements its legacy as a provider of acute medical care.

The Foundation began working with Leonard Dawson, MPH, an experienced community health educator and retired professor of public health at UNC-Chapel Hill, to assist in its efforts to develop a detailed grantmaking approach and strategic framework. Trustees and staff developed the Strategic Grantmaking Framework to guide their decision-making about the Foundation's significant, but finite, resources. The Strategic Grantmaking Framework provides a data-informed, bestpractice driven, and intentional approach to improving the drivers of health, and ultimately, health status. The framework, adopted in 1997, includes the Foundation's mission, vision, philanthropic objectives, guiding principles, and grant guidelines. Trustees paused grantmaking to allow time for implementation of the grantmaking framework.

"The board's Strategic Grantmaking Framework allows for a full array of grantmaking processes – awarding grants, providing technical assistance,



Cenla school administrators complete the three-year Learning for Better Instruction program under the Foundation's Education Initiative.



convening, facilitating, and advocacy — all with an emphasis on achieving mission-focused goals and outcomes. Trustees and staff continually seek to ensure that Foundation resources make measurable and sustainable improvements in health status and the determinants of health," Rosier said.

Anna Moreau, who is serving as The Rapides Foundation's board chairman in 2019, feels the Foundation's grantmaking approach is key to its success. "One of the things I feel makes The Rapides Foundation so impactful is the commitment to strategic grantmaking. There is a strong commitment to follow the vision and the strategic plan in order to get the community benefit we are hoping for," Moreau said. "That commitment is recognized and respected by

other Foundations in our area and beyond."

The Foundation also commissioned the Tulane School of Public Health to conduct a community assessment of the Foundation's service area. The comprehensive baseline study included secondary data, scientifically based community surveys using Centers for Disease Control and Prevention protocols, and data from focus groups. It included data about mortality and morbidity, but also information about health behaviors and social determinants of health.

The assessment findings were presented to the Foundation board in March 1998, and a resource panel of experts presented issue information aligned with the Strategic Grantmaking Framework selection criteria, which allowed

the board to select issues for initiative development and to assign funding percentages to guide the Foundation's grantmaking.

"Our Strategic Grantmaking Framework begins with a broad community assessment to understand what the status of health issues and health drivers are in the community and then begin to frame priorities and strategies off of those needs in the community," Rosier said.

Foundation staff immediately developed initiative funding guidelines for the priority health issues and a grant cycle was resumed in May 1998 with strategic grants awarded later that year.

Today, the Foundation continues to follow this ongoing cycle of assessing health status and addressing issues with intentionality and urgency



The Foundation's Education Initiative funds the Workplace Experience Exchange Camp each summer, where educators visit local employers to learn how classroom content is applied in the workplace.



through its grantmaking initiatives and strategies. It has served as the cornerstone for building trust with prospective grantees and partners, and allowed the community to understand the strategic direction behind the Foundation's work as it seeks to fill the role of catalyst for community health improvement as a convener, facilitator and funder.

The Foundation conducts
Community Health Needs
Assessments every five to six
years to keep the data fresh
and relevant. Foundation board
members gather for retreats
where they shape and adjust
strategic plans based on the
latest findings of these health
assessments. In addition, the
Foundation encourages local
nonprofits to use the information
to make informed decisions
and guide efforts to improve
community health and wellness.

"Our grantmaking cycle begins and ends with trying to understand the condition of the community relative to our mission. So we have a third party that collects existing data about how long people live, what they die from and what they're sick from, but they also do interviews and focus groups that start talking about those things in the community that drive their health. We end up with a very comprehensive environmental scan of the region, of not just health conditions but the drivers of health, education level, poverty," Rosier said. "Our board is able to see the larger picture, and to see the movement in it, not just where it is but where are the trends, what's getting better and worse. That's just a core part of what we do and it's a pretty big effort that we do every five to six vears."

Moreau believes the board has a long history of relying on

the gathering and analyzing of data in its grantmaking approach and decisions. "The board is blessed to have an abundance of information to help guide our decision-making. The wealth of information and data that has been carefully gathered by both the Foundation staff and other industry experts that pertains to our work is truly remarkable," Moreau said. "Our task as board members is to look at the information that is provided to ensure we are headed in the right direction and make adjustments as necessary."

Rosier also reinforced the Foundation's determination to bring in content experts to guide their decisions. "It's been a key part of what we've done, to be knowledge-based and to try to identify the most knowledgeable people in these areas that we can bring in either with our board or with our staff or with our grant partners."

### PRIORITY AREAS EVOLVE

he Foundation board arrived at its strategic priority areas in a very intentional way. "We did these really comprehensive community health assessments that don't just measure the status of health, but also measure the drivers of health," Rosier said. "That's always been and still is the baseline we work from. That is coupled with what are the research-based, best knowledge practices that are known to make a difference in those areas. So that's what drives a continuous cycle we have of assessment, identification of effective strategies, finding partners to implement those, and then evaluating it; and then the cycle starts over again."

The Foundation began its Healthcare Access Initiative in 1998, focusing its efforts to increase the levels of care

available for people with financial and geographic access issues. In 2007 it added its Healthy Behaviors Initiative, which seeks to improve health by improving behaviors.

Trustees added focuses on Education and Economic Development with the knowledge and understanding that increasing a person's level of educational attainment and achievement, and improving economic opportunity and family income, can improve overall health outcomes.

The Foundation in 2000 added a capacity-building focus, which soon became Community Development Works, in order to help nonprofits build the social environment of Cenla.

Today, the Foundation's work is focused on three interconnected priority areas: Healthy People, to improve

access to healthcare and promote healthy behaviors; Education, to increase the level of educational attainment and achievement as the primary path to improved economic, social and health status; and Healthy Communities, to improve economic opportunity and family income, and enhance civic and community opportunities for more effective leaders and organizations.

From the early years, the board recognized the importance of identifying community partners to help carry out this important work.

"As we identified these critical issues, it's been essential for us to find community partners that work in those areas and then to support the work through our grantmaking or with technical assistance," Rosier said. "So part of our work is to







find those partners, cultivate those relationships, and work with them in a very respectful way that we can continue those partnerships to make a difference."

The Foundation also found that certain efforts require the Foundation to be responsible for implementing its own body of community improvement work. Some of the Foundation's work is handled through its subsidiaries, The Orchard Foundation and the Cenla Medication Access Program, or its operating program, Community Development Works.

The Rapides Foundation established the Cenla Medication Access Program, or CMAP, in 2001 to provide chronic care prescription medications for people who cannot afford them. CMAP's work has grown to include administration of

additional grant-funded efforts for The Rapides Foundation. These include the Cancer Screening Project, funded under the Healthcare Access Initiative, and the Healthy Lifestyle Program, funded under the Healthy Behaviors Initiative.

In 2004, The Rapides Foundation established The Orchard Foundation as a resource for Central Louisiana that works with school districts, businesses, and communities to improve educational opportunities by promoting best practices; recruiting, retaining and rewarding excellent and innovative teachers; building school leadership; and strengthening school and community relationships. The Orchard Foundation administers multiple grant-funded programs under The Rapides Foundation's Education Initiative.

In 2003, The Rapides Foundation funded an extensive review of the area's need for an employer-driven economic development program focused on business infrastructure supports like local supplier development, school-to-work programs, and development of outside markets. Based on consensus findings of the review, the Foundation issued a challenge match of \$1.5 million, which resulted in the creation of the Cenla Advantage Partnership, or CAP, an 18-member private sector board representing a wide range of backgrounds from throughout the region. In 2011 CAP successfully merged with the Central Louisiana Economic Development Alliance, to form a unified regional organization that significantly advances economic opportunities in the



Community Development Works'
Cenla BoardBuilders program prepares
residents for nonprofit board service.





community. The Foundation continues its support of regional economic development and entrepreneurship efforts through its CLEDA challenge match.

In 2000, the Foundation created its Community Development Works program to offer nonprofit management training, capacity-building and leadership programs to nonprofit organizations, communities and individuals to develop their ability to respond to the opportunities around them.

"Certainly the capacity within a community to address issues of concern is of ultimate importance. Given our strategic focus, there are a lot of wonderful organizations that really might not be the subject of a Foundation grant. But in that cross-cutting way, we have Community Development Works to provide nonprofit capacity building, training sessions, consultancies and other ways

to help all nonprofits, whether or not they are a Foundation grantee. Building capacity of nonprofits is key to improving and developing the region," Rosier said.

As the Foundation moves into its next quarter century, it will continue its reliance on planning, implementation and critical, ongoing examination of its work, all with the goal of working toward a healthier Central Louisiana.

"Our mission is to improve the health status of Central Louisiana," Moreau said. "Understanding the complexity and interconnectedness of the many factors that drive health, we aim to make decisions that are relevant to the needs of today and also strive to make decisions that favorably impact the anticipated needs of the future. This is a difficult task because the needle is always moving."

Moreau believes that by being strategic and adhering to the strategic plan that the board approves, its decisions will be supported by the best knowledge available. "We are also committed to looking at new data and knowledge regularly to ensure we are on the right track."

"Our board has always paid great attention to the mission, not just as some words but as the rallying point, the north star," Rosier said. "The Foundation plans to be here for the long term. We know it will take many years to address these issues. Change does not take place overnight, but it can happen. Day by day, working together – the Foundation seeks partners who share the same mission for Central Louisiana to be a healthier place to live."







## MOVING FORWARD - 2019 AND BEYOND

s it celebrates its 25-year anniversary, The Rapides Foundation continues to keep an eye on the future of Central Louisiana from both its perspective as a grantmaker for the region and as a hospital through its ownership of Rapides Regional Medical Center.

"For an organization to be successful, it must have a lens that it looks through to do its work," Rosier said. "For The Rapides Foundation that lens is our mission, which is to improve the health status of Central Louisiana, and our vision, which is to deploy our resources against the key drivers of health. We pursue our mission through our hospital ownership and also through our grantmaking, and we do that in a very intentional way so that these resources can make a difference in Central Louisiana."

### Foundation Grantmaking Strategies Will Impact Future Generations

The Rapides Foundation has set forth updated five-year strategic plans that strengthen and in some cases deepen existing projects and initiatives. The Board of Trustees met in 2018 to update these plans, carefully basing their decisions on expert advice, Community Health Needs Assessment data, issuespecific research and knowledge, and current best practices.

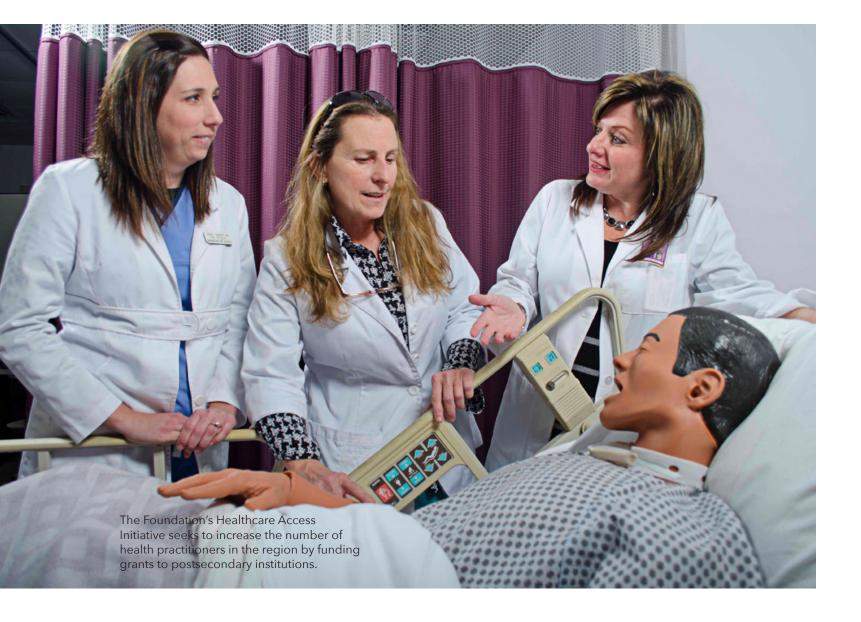
The five-year strategic plans are aligned with the Foundation's mission of improving the health status of Central Louisiana, and they are designed to impact future generations.

Moreau said the retreat allowed the board to review the effectiveness of the Foundation's current work and explore

potential areas of opportunity for the future. "We were able to judge effectiveness of our current programs by reviewing program evaluation data that had been gathered prior to the retreat. We were able to identify areas of opportunity by reviewing current community needs assessment data and listening to industry experts. Our task was then to assimilate all of this data and determine the direction and plan for the next five-year cycle. We saw many current programs demonstrating positive trends and were able to continue our work in these areas, and we also saw areas of opportunity in our region and were able to focus more resources in these areas."

Moving forward, the Foundation will continue its work in three strategic areas:

Healthy People: to improve



access to healthcare and promote healthy behaviors.

- Education: to increase the level of educational attainment and achievement as the primary path to improved economic, social and health status.
- Healthy Communities: to improve economic opportunity and family income; and to enhance civic and community opportunities for more effective leaders and organizations.

"Through our 25-year history, we have developed an understanding of what health status is and what drives health status, and have arrived at a place where we are confident in the priorities we've selected. Given the depth of these

issues – and most of them are generational – I think a lot of the priority levels probably won't change that much moving forward," Rosier said. "I think as we learn we get better at what we do, and as more research comes out the tactics and the strategies may change, but the major issues of healthy behaviors, education levels, income, and poverty, are chronic issues that are really hard to move."

As a result of its most recent board retreat, trustees determined there was a need to learn more about disconnected youth in Central Louisiana. Staff members are currently researching and developing

programs and strategies that will address ways to reach out to young, unemployed adults.

"We've really focused recently on disconnected youth, the residents of our community from the ages 16-24 who aren't in school and are not working. And so they're not making an income for themselves or their family and they're not contributing to the economy of the region," Rosier said.

Moreau said trustees found the statistics on disconnected youth alarming, particularly since the numbers are statistically higher in Central Louisiana compared with other areas of the state and nation.

"We know that the reasons



for this statistic are multifactorial and we will need to determine which of the reasons we have the possibility to impact. But we also know that the interrelatedness of the subject of disconnected youth and much of our existing work is strong," she said. "We know that if we can engage our youth and get them into the workforce following graduation, we can decrease this statistic in future generations. Whether that be by continuing our efforts in early childhood education, or enhancing existing school-based grants to help students better understand their options after graduation, we have the ability and the opportunity to make change here."

The goal will be to get disconnected youth engaged either by continuing their education or by working in their community, Moreau said. "This not only affects them from an economic standpoint, but from a health standpoint as well. Sometimes targeting the populations that we intend to affect can be difficult. However, on this topic, our goal is to target these kids before they become disengaged and the school system can provide both a framework and target audience for our efforts. We feel optimistic about our ability to make change here."

As the Foundation implements these strategic

plans, it will continue to refine, evaluate and make adjustments as needed.

"It is an evolving process, and we realize in order to make the greatest impact over a period of time, our work must be focused, disciplined and outcome-oriented," Rosier said. "We know many factors impact health. With significant but finite resources to move the needle on health status for Central Louisiana, it is necessary that we strategically focus on the key factors that most drive health with sufficient dosage to make a difference. The priority areas for The Rapides Foundation reflect the best judgment of trustees and staff of where we should invest and intervene."



# Foundation's Ownership of RRMC Ensures Community Benefit

Through its ownership in Rapides Healthcare System, the Foundation will continue to provide oversight to the community benefit delivered by Rapides Regional Medical Center. The founding trustees developed policies and practices to guide the Foundation's engagement with Rapides Healthcare System to assert that the Foundation's three ownership objectives for RHS are met. Today, Foundation trustees are guided by these ownership objectives for Rapides Healthcare System:

- Compliance: Rapides
  Healthcare System shall meet
  the community benefit standards
  generally required of hospitals
  under Section 501(c)(3) of the
  Internal Revenue Service Code.
- Patient Care: Rapides
  Healthcare System shall provide
  the highest standard of patient
  care that is safe, effective,
  efficient, timely, patient-centered
  and equitable.

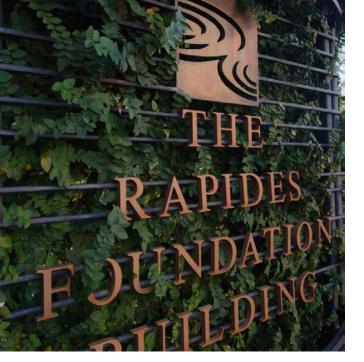
• Access: Rapides Healthcare System shall provide care consistent with the Federal Community Benefit Standard, and assert, develop and support access to non-urgent care for the uninsured and underinsured populations.

"Over the course of the last 25 years, Foundation leadership and trustees have worked together with hospital leadership and medical staff and HCA leadership to arrive at a very good outcome for the community," Rosier said. "We have dealt with challenges, addressed structural needs and met opportunities, and as a result Rapides Regional Medical Center is a leading tertiary care hospital providing more advanced services than ever before for the region."

After starting its journey in 1903 as the 20-bed Alexandria Sanitarium opened by six physicians to treat medical and surgical cases, today Rapides Regional Medical Center is a 362-bed acute care hospital offering advanced medical care with more than 450 physicians from 50 medical specialties. Through the efforts of its employees, physicians and volunteers, RRMC strives daily to meet its mission to provide high-quality, efficient and compassionate healthcare services for its patients and community.

The hospital serves approximately 16 Central Louisiana parishes and offers a wide array of services ranging from cutting-edge cancer treatment and orthopedic services to the area's most comprehensive cardiac program. RRMC has the area's only pediatric intensive care unit and the area's largest neonatal intensive care unit. It was the first verified Level II trauma center in the state.

The hospital is certified as a Primary Stroke Center and an Accredited Chest Pain Center. Its campus is home to Rapides Women's and Children's Hospital, Rapides Cancer Center, Rapides Outpatient Center, Rapides Regional Trauma Center, 51-bed emergency department, NICU, PICU and ICU.



Rapides Regional Medical Center also operates multiple HP Long Outpatient Clinics to take on the urgent, specialty and primary care previously offered through the state-run Huey P. Long Medical Center. The clinics serve Medicare, Medicaid and uninsured patients with services including primary care, general surgery, cardiology, orthopedics, gynecology, ophthalmology, oral and maxillofacial surgery, dental care and urgent care.

"As we celebrate our 25year anniversary, The Rapides Foundation continues to focus as a modern system of health in our roles as a high-performing hospital that provides access to quality care for all members of the community, and as a community health philanthropy addressing behavioral and social determinants of health," Rosier said. "This dual role, we believe, serves as the ideal structure for providing quality healthcare and health improvement for Central Louisiana residents for generations to come."

## 2019-2023 GRANTMAKING STRATEGY

### **HEALTHY PEOPLE**

### 39% OF SPENDING POLICY

**HEALTHCARE ACCESS** will foster the establishment and expansion of primary, behavioral and quality patient-centered services through integration with community health clinics; and will address screenings, medication access and related medical manpower issues.

**HEALTHY BEHAVIORS** will address tobacco use, substance and alcohol abuse prevention, healthy eating and active living.

### **EDUCATION**

### **40% OF SPENDING POLICY**

**EFFECTIVE SCHOOLS** will support professional and leadership development dedicated to capacity building for K-12 teachers and other instructional leaders.

**school readiness** will address access to high-quality early childhood programs for children birth to five through the support of professional and leadership development focused on teacher-child interactions; through the support of programs focused on family-child interactions; and by supporting an increase in access and utilization of early childhood programs.

## CAREER AND POSTSECONDARY READINESS will

focus on achieving career and postsecondary success through implementation and support of counseling, skill development, credential and advance credit programs for youth.

### **HEALTHY COMMUNITIES**

### 21% OF SPENDING POLICY

**ECONOMIC ENVIRONMENT** will focus on building the region's competitive capacity to continuously produce higher value goods and services in traded sectors through the support of Business Startups and Expansions, a workforce skills and development system, and a regional economic development infrastructure.

**SOCIAL ENVIRONMENT** will address social capital by supporting leadership and nonprofit development; and increasing community engagement.



## TRUSTEES GUIDE THE FOUNDATION'S WORK

ver the past 25 years, nearly 80 individuals from throughout Central Louisiana have guided The Rapides Foundation as members of its Board of Trustees. This diverse group has worked hard to ensure the Foundation's assets are being spent responsibly and intentionally and will impact generations to come.

After the joint venture was finalized, the founding trustees set the stage for success by being careful and deliberate in the attention they gave to the board's initial development. The founding members imposed staggered term limits to ensure continuity, imposed a rigorous recruiting process and mandated thorough training for incoming board members, all with the goal of bringing the board to a higher level. In addition, the board insisted on transparency

of its finances, operations and results; and it built a constructive partnership with the CEO.

"Previous board chairs had made a conscious effort to clearly define roles to ensure that day-to-day leadership would remain the purview of the chief executive. We ensure this institutional attitude remains in place, even though trustees rotate, by having policies that clearly explain roles," said Regionald Seastrunk, who served as the Foundation's board chairman in 2004 through 2006.

The board has received national accolades for its professionalism and exceptional governance, and its success is partly due to the early leaders recognizing the importance of creating thoughtful guidelines and instructions for service.

Their attention to detail in the board's development has

become the model for other hospital conversion foundations throughout the years. Board members and CEO Joe Rosier routinely are invited to national conferences to share the Foundation's recipe for success. In 2005, BoardSource, a nonprofit organization with the mission to inspire and support excellence in nonprofit governance and board/staff leadership, recognized the Foundation for adhering to the principles of exceptional governance.

In a 2005 article to spotlight what it termed the Foundation's "prescription for greatness," BoardSource praised the Foundation for maintaining a strong board/chief executive partnership, being open and honest in communications, asking hard questions about performance and being results-

oriented and committed to continuous improvement.

The founding members imposed staggered term limits to ensure continuity, and members are carefully selected to ensure regions of the service area are represented. In addition, members come from varying walks of life to support all aspects of the Foundation's mission and operations. For example, board members represent healthcare, education, finance and economic development industries, to name a few.

When the Foundation was created, the board of Rapides Regional Medical Center immediately became the board of The Rapides Foundation, and they were the ones who recognized the need for a governance model that would guide their successors.

"It was essential for the board to represent the community. So over time as we took on a broader geographic area, we sought to have board members from throughout the region from different professions and diversity, because they have to bring that perspective into the board room to make sure that as decisions are made they take into consideration the community that we're attempting to serve," Rosier said.

Fifteen individuals make up the Board of Trustees at any given time. Trustees gather for an annual meeting each December to elect new members. Each member is elected for a term of three years and may be re-elected for one additional term. Sixteen individuals have served as board





chairman in the Foundation's first 25 years.

The recruiting process is rigorous to ensure the right people lead the charge. "Our intent was to recruit members in such a way that we would bring the board to a higher level," Seastrunk said. "We wanted to get fresh ideas while maintaining our commitment to our mission. So trustee terms are staggered to ensure continuity, and each new trustee gets orientation and training in duties, responsibilities, mission, goals, culture and so forth."

Moreau said Rosier plays an important role to help trustees understand the board's role.

"Even though the composition of the board changes each year as some trustees complete a term of service and others begin, Joe ensures each trustee is carefully oriented to the vision of the board and the strategic plan the Foundation follows," Moreau said. "For the board, that is so powerful because the strategic plan allows new trustees to acclimate quickly and also serves as a reminder to veteran trustees to stay on track."

As the Foundation's
President and CEO, Rosier serves
ex-officio as a trustee, and as a
result has worked closely and
served with each of the trustees
from years past. He praised their

commitment to their fiduciary obligations and for taking seriously their responsibility to make hard decisions that will impact the health status of Central Louisiana.

"We've had close to 80 people serve on this board, and they come from all walks of life, bringing their perspective to the board so that the conversations and decisions have the perspective on whatever issues we're addressing," Rosier said. "It's been a great experience through every iteration of our board. We've had excellent boards and board leadership."

### FOUNDING TRUSTEES

Formerly 1994 RRMC Board of Trustees

**BOARD CHAIRS** 

1994-Present

James R. Baker, Jr.

James R. Byrd

Richard L. Crowell, Jr.

Vanda L. Davidson, M.D.

Gregory S. Erwin

W. Ray Frye

JoAnn Kellogg

James L. Meyer

Robert C. Morrison, M.D.

Gregory L. Nesbitt

Gregory B. O'Quin

Bernard E. Patty, M.D.

Harry B. Silver

Larry D. Smith

Foster Walker, III

Honorary Members

Paul M. Davis, Jr., M.D.

Roane Hathorn

W. Don Rodemacher

Foster Walker, Jr.

1994-1996: Gregory B. O'Quin

1997-1999: Harry B. Silver

2000-2002: Gregory L. Nesbitt

2003: Vanda L. Davidson, M.D.

2004-2006: Regionald Seastrunk

2007: Melanie Torbett

2008-2009: Albin M. Lemoine, Jr.

2010-2011: Bruce Barton, M.D.

2012: Mike Newton

2013: Howard Wold, M.D.

2014: Tammi Salazar

2015: Cynthia Gillespie, Ph.D.

2016: Jacquelyn S. Daenen, CPA, CCIFP

2017: Robert C. Hughes, P.E.

2018: Michael D. Reese

2019: Anna B. Moreau, D.D.S., M.S.



### THE RAPIDES FOUNDATION BOARD OF TRUSTEES

1994-Present

Reverend Doyle L. Bailey, 2002-2007

James R. Baker, Jr., 1994-1995, 2008-2013

Bruce Barton, M.D., 2006-2011

Lynn J. Bordelon, 2002-2006

Joan Brunson, M.D., 2009-2014

Michael G. Buck, M.D., 1997, 2004-2008

James R. Byrd, 1994-2002

Jacque Caplan, 2003-2008

Blake Chatelain, 2002-2007

Ilyas Chaudry, M.D., 2002-2007

Laura J. Clark, 2016-present

Benjamin Close, M.D., 2016-present

Richard L. Crowell, Jr., 1994-1999

Jacquelyn S. Daenen, CPA, 2013-2018

Laura L. Dauzat, 2009-2014

Vanda L. Davidson, M.D., 1994-2003

Paul "Mack" Davis, Jr., M.D. Honorary Trustee

Wesley W. Davis, M.D., 1998-1999

M. Lawrence Drerup, M.D., 1999-2001

Debbie Eddlemon, 2019-present

Gregory S. Erwin, 1994-1997

Rosa C. Fields, 2011-2016

Kelvin Freeman, 2005-2010

W. Ray Frye, 1994

Curman L. Gaines, Ph.D., 2014-present

David R. Gilchrist, 2008-2013

Cynthia Gillespie, Ph.D., 2010-2015

Doug Godard, 2015-present

Roane Hathorn, Honorary Trustee

Robert C. Hughes, P.E., 2013-2018

Lafe Jones, 2019-present

P.K. Kaimal, M.D., 1995-1998

JoAnn W. Kellogg, 1994-2001

Ernest Kelly, M.D., 2009-2014

Donald Kramer, 2007-2012

Albin M. Lemoine, Jr., 2004-2009

Philip Lindsay, M.D., 1996

Gail C. Little, 1998-2002

Donald R. Mallet, 2007-2012

Shahid Mansoor, M.D., 2018-present

Alfred Mansour, Jr., M.D., 2000-2001

Roseada Mayeux, 2015-present

John McCabe, M.D., 2002

Nancy McCabe, RN, 2008-2012

Murphy McMillin, 2015-present

James L. Meyer, P.E., 1994-1998

Anna B. Moreau, D.D.S., M.S., 2014-present

Robert C. Morrison, M.D., 1994-2001

Gregory Nesbitt, 1994-2002

Mike Newton, 2007-2013

Kathleen Nolen, 2001-2006

Gregory B. O'Quin, 1994-2000

Bernard E. Patty, III, M.D., 1994-2002

Craig Pearce, M.D., 2012-2017

Maxine Pickens, RN, 2004-2009

Robert T. Ratcliff, 1996-2002

Michael D. Reese, 2013-2018

John Rhodes, M.D., 2003-2004

Daphne R. Robinson, 1999-2004

W. Don Rodemacher, Honorary Trustee

Frankie Rosenthal, MSN, RN, 2010-2015

Joseph R. Rosier, Jr., 1995-present

Tammi Salazar, 2009-2014

Jannease Seastrunk, M.S., 2017-present

Regionald Seastrunk, 2001-2006

Harry B. Silver, 1994-2002

Larry D. Smith, 1994-1995

Jane Texada, 1996-2001

Caroline Theus, 2003-2008

Melanie Torbett, 2002-2007

Edwin S. Urbi, M.D., 2014-present

W. Foster Walker, Jr., Honorary Trustee

W. Foster Walker, III, 1994-1999

Renick P. Webb, M.D., 2003-2008

Betty Westerchil, 2019-present

Henry Williams, 2015-present

Dennis E. Wimmert, 2013-present

Howard Wold, M.D., 2008-2013



## THE STORY BEHIND THE RIPPLE ICON

he Rapides Foundation's ripple box icon dates back to its 1994 beginnings. The Foundation was created through a joint venture partnership between Rapides Regional Medical Center and HCA (formerly called Columbia/HCA). This partnership extended the hospital's ability to provide quality healthcare in a changing environment and created a wellspring of Foundation resources dedicated to improving the health status of Central Louisiana.

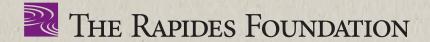
Through its ripple box icon, the Foundation seeks to embody this perpetual pool of resources through the representation of a rippling body of water.

The rippling effect is also symbolic of the way the Foundation's grantmaking, initiatives, programs and capacity building can be a catalyst for change and improvement across the communities it serves.

Finally, the element of water has geographical connection based on the Foundation's location near the historic Red River Rapids, the namesake for our parish, hospital and Foundation.

# THE RAPIDES FOUNDATION SERVICE AREA





Additional copies of this book are available from The Rapides Foundation Communications Department, 1101 Fourth Street, Suite 300, Alexandria, LA 71301





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