Anchor Mission Playbook

New Learnings and Findings in Anchor Mission Execution

prepared by

Rush University System for Health

with support from

Healthcare Anchor Network

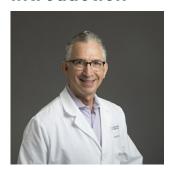






1 Introduction and Playbook Purpose

1.1 Introduction



David A. Ansell, MD, MPH
Senior Vice President for Community Health Equity for Rush University Medical
Center

Everyone deserves the <u>chance to be healthy</u>, and the multi-year life expectancy gap on Chicago's West Side communities when compared to affluent ones is a painful reminder of how much work we must do. Fueled by the ideal that everyone deserves better, I am proud to lead Rush's community health and economic vitality strategy.

Through my observations as a physician, I have witnessed the real-life impacts of health injustice on my patients and their communities. Serving patients who lacked access to food, housing, medical insurance, and more meant that their health problems were compounded. I saw first-hand the limitations of traditional medicine and knew we needed to address the social and structural causes of poor health like structural racism and poverty, and not just the symptoms.

Where you live should not determine how long you live. We can save lives by investing in communities as well as our patients. This is at the core of the Healthcare Anchor Mission Network – leveraging our collective human and economic capital by taking an active role in advancing inclusive community development. Hospitals as community pillars can help heal alongside doctors and nurses –raising the standard and improving health outcomes for everyone.

Since 2017, Rush's anchor mission has evolved into a framework that helps concentrate the impact of how we hire, purchase, invest and engage in our communities. Through strategic partnerships such as West Side United (WSU) – a racial health equity collaborative – Rush has been able to structure organizational resources in innovative ways to best serve our local communities.

Rush, WSU, and community partners recently broke ground on the Sankofa Wellness Village – a community-driven initiative that will connect West Garfield Park residents of all ages to health, wellness, recreational, and financial opportunities. As an investor and anchor tenant, Rush will offer health programing, mental health services, workforce development programs and more to residents at no cost.

Rush has continued to drive investments on Chicago's West Side. Rush became the first hospital system to contract with a new local laundry vendor, <u>Fillmore</u>
<u>Linen Service</u>. Through this local investment, Rush is supporting dozens of new

high-quality jobs and is expected to save hundreds of thousands of dollars annually – proving that community investment is good business.

As anchor mission work progresses, health systems need to adapt and create cross-departmental collaboration to ensure sustainability. That is why Rush is always looking to engage in workforce development initiatives like Jumphire – a cohort connecting underserved communities to quality jobs as supply chain technicians and purchasing buyers and the Rush Education & Career Hub – cradle-to-career pipeline programs putting under-represented youth on pathways to skilled jobs. These strategic investments mean that even though most hospital employees don't interact directly with patients, every Rush employee contributes to community health and revitalization through our purchasing, hiring, and investment practices.

Since the publication of the original anchor mission playbook in 2018, Rush has continued to deepen its commitment to anchor mission work across its system. As our work evolves, one aspect remains the same: we cannot do this alone. Rush is committed to sharing our experiences and learnings to advance anchor mission work across throughout Chicago, across the country, and beyond.



David ZuckermanPresident & Founder, Healthcare Anchor Network

Rush University System for Health has been an important pioneer of the anchor mission movement. Adopting and implementing the anchor mission framework is an ethos, which needs to be embedded in the institution's values and integrated and aligned with its operations. HAN appreciates Rush's bold leadership to continue to manifest—as well as improve upon— its commitment to health equity and building the economies of its surrounding neighborhoods.

We hope Rush's story and advice are inspiring and practical for others in their own anchor mission journeys as they pull from Rush's experience and innovation. However, we know that institutions will inevitably proceed with their own journeys, contexts, creativity, and the lived experiences of their own communities and staff. HAN thanks and acknowledges Rush for its willingness to move forward with the anchor mission ideas and strategies without other examples to rely upon. Rush is truly an anchor mission pioneer, helping us to build the anchor mission movement.

Purpose of Playbook Updates

Over the past five years, the landscape for executing anchor mission strategies has drastically changed. The original Anchor Mission Playbook outlined strategies and insights to execute an anchor mission approach when the field was developing. Six years later, Rush University System for Health has derived new insights, learnings, implications, and tools to aid in the execution of the anchor mission framework beyond establishing support from executive leadership and developing a reporting cadence in support of anchor mission implementation. During that time and the years following, healthcare institutions were affected by the COVID-19 pandemic, and the healthcare industry as a whole faced financial and organizational challenges that upended the traditional ways of delivering quality care.

In this update to Rush's original Anchor Mission Playbook, we outline new learnings, challenges, developments, and resources that have helped Rush University System for Health ensure the sustainability of its anchor mission in the current financial climate. The playbook was written for readers who possess a foundational understanding of anchor mission principles, and have read the original Anchor Mission Playbook. It will be particularly informative for readers who are or will deeply be involved in anchor mission implementation at their institutions. Learn about anchor mission strategies here.

This playbook was prepared by Rush University System for Health with support from the Healthcare Anchor Network (HAN).

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About the Healthcare Anchor Network

The <u>Healthcare Anchor Network (HAN)</u> catalyzes health systems to leverage individually and collectively their hiring, purchasing, investing and other key institutional assets to create economically and racially equitable local economies that sustain healthy communities.

HAN is a growing national collaboration of over 75 leading healthcare systems that together employ more than 2 million people, purchase over \$100 billion annually, and have over \$250 billion in investment assets. To contact Healthcare Anchor Network, email us at info@anchornetwork.org.

Rush's Anchor Mission

Rush University Medical Center is the largest non-governmental employer on Chicago's West Side and spends millions of dollars on goods and services each year. Our Anchor Mission Strategy outlines the ways in which we channel that economic power to improve the economic vitality of West Side neighborhoods and help residents achieve better health. We strive to address the causes of poor health, not simply treat the symptoms of disease.

The strategy, which incorporates the following four commitments, drives our efforts to concentrate the impact of how we hire, purchase, invest, and volunteer in the West Side communities we serve.

Hire Local

We are steadily increasing the number of new employees we hire from anchor mission neighborhoods by partnering with city-wide community-based organizations to align our hiring needs with job candidates and collaborate on training programs. We are also developing programs that help our current entry-level employees advance their careers within Rush.

Buy Local

We know that the Medical Center's purchasing power can catalyze economic development at the neighborhood level. Our purchasing managers are connecting with local vendors to increase the amount of goods and services we source directly from the West Side.

Invest Local

In partnership with local community development financial institutions, we have begun to invest capital in community-based organizations and projects that lack access to traditional lenders but have demonstrated the ability to create the wealth communities need — for example, affordable housing. These "impact investments" are not donations or grants; they are business loans that we expect will return a small profit and an even greater social impact.

RUSH Local

Rush employees and students have a strong commitment to volunteering and supporting community organizations each year. We launched an Employee Volunteer Program that allows them to volunteer during working hours, which will enable even more people to contribute to community-building work.

For further information about Rush's Anchor Mission, contact Nathalie Rosado Ortiz, System Manager, Anchor Mission and Community Engagement, Rush Office of Community Health Equity and Engagement, Nathalie_Rosado@rush.edu.

2 Aligning Business Imperatives with Anchor Mission Priorities

2.1

Return on Investment as an Anchor Mission Priority

Since the <u>original Anchor Mission Playbook</u>, limited resources and budget constraints have become commonplace for many institutions. For Rush, this has resulted in the need for its anchor mission team to innovate and pursue leaner and more cost-effective operational models. As such, Rush has learned the importance of aligning business imperatives with anchor mission priorities in order to engage business departments in anchor mission efforts during times of organizational and financial strain. In particular, for Rush the future return on investment has become more important to demonstrate, and in turn, most successful initiatives have served purposes that are equally socially minded as well as solving for an operational need of the institution.

2.2 FIELD PERSPECTIVE Support Services Employee Pipeline Initiative

An example of a strategic internal alignment for Rush was a collaboration among the Support Services department, the Human Resources talent acquisition team, and the Anchor Mission team to support the recruitment and onboarding of individuals in anchor mission focus communities who could staff frontline, patient facing entry-level roles at the newly built Joan and Paul Rubschlager Building, now known as the Rush MD Anderson Cancer Center. For Rush, frontline positions are defined as those that are patient-facing and crucial to hospital operations; they are not all necessarily



entry level, but most are lower wage and have high risk of turnover. Recruitment for these frontline, patient-facing positions is typically difficult, primarily because of competition from corporations like Amazon (that pay over \$20/hour and can onboard new hires almost immediately), the length of the onboarding process (including background and drug testing) for healthcare institutions, and the general shift schedules required of new employees.

Representatives from Support Services, Human Resources, and Anchor Mission teams met regularly, analyzing the yield of applicants referred by over 20 community partners that worked with anchor mission residents, and optimizing the application cycle and onboarding process for these applicants. The project brought together three departments to address an organizational need while simultaneously prioritizing an anchor mission initiative.

Because a high percentage of Rush's anchor mission hires work in the Support Services department, the leaders of the Support Services department proposed working in partnership with community hiring efforts to recruit new employees for the Rush MD Anderson Cancer Center. This involved representatives from Support Services, Human Resources, and Anchor Mission teams meeting regularly, analyzing the yield of applicants referred by over 20 community partners that worked with anchor mission residents, and optimizing the application cycle and onboarding process for these applicants. The project brought

together three departments to address an organizational need while simultaneously prioritizing an anchor mission initiative.

2.3 FIELD PERSPECTIVE Fillmore Linen Services Partnership

For Rush, another example of aligning business needs with anchor mission initiatives was an external partnership with a newly launched laundry and linen facility in one of Rush's anchor mission neighborhoods, North Lawndale. The path to launch this venture stemmed from an immediate need among healthcare institutions after the pandemic to have access to a local vendor for the laundry-linen category. Three factors drove this urgency: current suppliers for this category were not local and were out of state and the quality of service for this category was not optimal. In addition, the category itself was often at a moderate risk of disruption due to limited redundancy among the facilities, with



limited backup options or alternatives in place to ensure the continuity of operations during a supply chain crisis.

The partnership with Fillmore Linen Services allowed Rush to locally integrate their supply chain for this category and have more control over factors that impact operational efficiency.

With significant philanthropic support from the Steans Foundation (which filled funding gaps in the capital stack by making it possible for hospitals to not have to make a capital commitment in addition to redirecting their linen spend), and leadership from West Side United,

Fillmore Linen Services renovated a historic facility obtained from the City of Chicago, bought equipment, and secured working capital for its first months of operation that allowed it to provide competitive pricing to prospective clients. Rush was an early adopter and the first signatory with a contract agreement with Fillmore Linen Services to direct a partial amount of its poundage with the goal to fully redirect the entire category across the system to Fillmore by August 2024, which Rush anticipates will lead to significant savings on costs.

The partnership with Fillmore Linen Services allowed Rush to locally integrate their supply chain for this category and have more control over factors that impact operational efficiency.

Fillmore Linen Services will create more than 175

jobs with advancing skill levels for rising incomes and has capacity to handle more than 30 million pounds of laundry annually with its first facility. This model is a good example of the potential collective impact that is possible: providing economic and social return to multiple healthcare system purchases, supporting a locally owned supplier, and creating significant quality jobs for priority communities.

3.1

Relevant Topics in Maintaining an Anchor Mission

Beyond ensuring the progression of anchor mission initiatives after the pandemic, Rush experienced new learnings and opportunities that evolved during the execution of its anchor mission strategy. While the original playbook outlined a model for the establishment of anchor mission practices, the topics below illustrate the many implications of anchor mission implementation as institutions execute on their strategies over time.

3.2

Knowledge Management and Sustainability

Following the peak of the pandemic, Rush was impacted by the Great Resignation, which was a period marked by many people voluntarily leaving their jobs. The resulting high turnover across both clinical and non-clinical departments also impacted departments that contribute to annual anchor mission goals and strategies, posing a significant challenge to anchor mission execution. For this reason, establishing knowledge management practices to ensure the sustainability of program operations should be a priority in addition to the day-to-day operations of executing an anchor mission strategy.

Some recommendations of knowledge management practices that have worked for Rush are:



Goal Setting Dashboards and Historical Data Analyses

Knowledge management includes creating standardized goal setting and progress tracking dashboards that are stored over time and continuously updated based on historical results and regular progress updates for leadership. The dashboards should be managed by the anchor mission team with each department contributing data results to allow for regular updates.



Departmental Directory

Anchor mission teams should create a directory containing multiple contacts for each department and specifically noting the positions for all business leads. The directory should be kept up to date in order to track internal turnover and maintain continuity in anchor mission initiatives.



Other materials can include marketing collateral, external messaging, and internal/external collaborations that have been documented.



See <u>Section 6.5 Establishing an Internal Knowledge Management Framework</u> for more information on creating a framework in support of anchor mission sustainability.

Departmental Governance Structure and Organizational Reach

A documented governance structure is essential to establishing a core anchor mission team across initiatives and an executive leadership committee that will provide organizational guidance on the trajectory of anchor mission execution. A departmental governance structure expands on Rush's original anchor mission working group structure to include the contributions of the anchor mission core team and the business unit leads in advancing the anchor mission.

Governance Structure

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Rush's first foray into anchor mission execution primarily engaged executive departmental leaders in support of anchor mission

initiatives. Our departmental governance structure has shifted from that model to more intentionally engage other key roles within those departments: administrative coordinators, supply chain data analysts, HR recruiters, employee benefit analysts, etc. These individuals purchase, manage contracts, engage with prospective job seekers, and help employees with their benefits questions. Individuals tasked with administrative and operational work perform actions that are crucial to advancing anchor mission strategies but are often overlooked in anchor mission governance structures. Engaging these individuals and including them in the anchor mission directory increases your reach across the organization and further embeds the anchor mission as a priority within its operational structure.

Another learning in Rush's governance structure framework was to align complementary initiatives across departments, rather than separating initiatives based on a traditional organizational structure. The Rush Local pillar, for example, engages community health and human resources benefits departments in efforts to connect anchor mission activities to our employees and our West Side communities. Prior to that shift, the pillar was based around employee volunteerism, rather than a larger convening of multiple employee engagement initiatives. Similarly, Rush now houses its capital projects initiatives in the Buy Local section rather than employing a separate pillar for the department. This ensures that contracting with local labor is viewed as a purchasing strategy that supports overall efforts to shift spend locally.

3.4

Prioritizing Resource Allocation

Maintaining a consistent commitment to anchor mission implementation over time requires resource allocation that is consistent, defined across business departments, and documented. Anchor mission strategies need a variety of resources to thrive. Rush's resource allocation strategy was implemented to retain human resources (e.g., business leads carrying out anchor mission strategies), knowledge resources (e.g., anchor mission data and success measures), and financial resources in order to mitigate the risk posed by turnover in departments that support anchor mission implementation.

Managing Human Resources

- Creating project plans, RACI (responsible, accountable, consulted, and informed)
 charts, and an anchor mission strategic plan has ensured that business leads
 recognize and understand their role in implementing the anchor mission.
- In addition to a traditional RACI chart recommended in the original playbook, the Rush team has found that a 3-year strategic plan with corresponding project plans for each pillar has proven effective in advancing anchor mission initiatives and ensuring accountability.

Managing Knowledge Resources

 Rush has employed a Teams platform, a sharepoint for quarterly data collection, an anchor mission organizational guide, and an anchor mission resource guide so that employees can learn more about and execute on their anchor mission goals. The anchor mission team is responsible for creating and updating the resource guide, which includes information on Rush's anchor mission West Side neighborhoods (their demographics, major institutions, and community groups) and historical information about Rush's anchor mission framework.

Managing Financial Resources

- Budgeting and planning, aligning costs with business departments and other
 organizationally embedded initiatives, like CHNA (Community Health Needs
 Assessment) and CHIP (Community Health Improvement Plan), allows Rush to
 ensure sufficient resources for anchor mission implementation.
- Devised on an annual basis and in alignment with strategic planning.
- Align resource development with philanthropy department for allocation of grant funding to cover costs beyond programmatic/operational needs. This could involve developing a menu of anchor mission initiatives that philanthropy leads can have at hand when funding opportunities arise.

4 New Learnings in Anchor Mission Implementation

This section details new implications, learnings, and innovations in Local Hiring (Impact Workforce), Purchasing (Impact Purchasing), and Impact Investing (Place-based Investing) that Rush experienced in anchor mission implementation since publishing the original playbook in 2019.

Organized by Rush's main anchor mission initiatives, sections in this playbook provide examples of tactical strategies that institutions should consider when seeking to achieve anchor mission goals.

4.1 Human Resources Initiatives

Engaging Recruitment and Talent Acquisition Employees in the Anchor Mission

Engaging the individuals at the forefront of recruitment efforts is critical to onboarding an increased number of anchor mission hires from focus geographies into the larger workforce. Talent acquisition managers work to build intentional pipelines of qualified applicants, and recruiters engage directly with those individuals to help navigate the application and interview process. Ensuring a seamless interaction between both departments creates a smoother flow of qualified applicants into open positions.

Training Recruiters to Advance Impact Workforce Goals

After introducing recruiters to the anchor mission framework and building buy-in around local hiring, the next step is to create resources that support recruiters and talent acquisition consultants as they seek to hire local applicants. It is important to distinguish this process as a procedural one based on equitable access to available roles rather than a preferential one that gives priority to certain applicants.

A recruiter toolkit can be added to the general training curriculum for recruiters and should cover the following areas:

Anchor Mission Geographic Areas

Provide an overview of the focus geography, how it was designated (for example, by identifying significant health disparities such as differences in life expectancy), and how quality jobs can help low-income residents achieve the financial security needed to maintain good health and live fuller lives.

Special Considerations for Anchor Mission Applicants

Provide recruiters with an overview of the specific challenges community residents may face, such as long-term unemployment, lack of childcare, gaps in employment, justice impacted backgrounds, and lack of healthcare-specific experience. These individuals may also experience intimidation during the application process and may need extra encouragement from workforce development community partners to complete their application.

Collaborating with Workforce Development Partners

Compile a list of at least 10-15 workforce development partners that can serve as sourcing organizations by referring multiple candidates to apply for available positions. Enlisting these partners usually involves an introductory phone call to learn more about the organization, outline expectations for a partnership, and determine a meeting cadence with the partner. Recruiters and talent acquisition leads can choose to work directly with the partner or designate a lead that communicates with partners on behalf of the organization.

Facilitating the Flow of Qualified Local Candidates

Talent acquisition and recruiting leads should enact a strategy to review applications from focus geographies and ensure they are set aside for hiring managers to review if/when baseline job requirements are met. This strategy should include a designated time to review applications, follow up with candidates or workforce partners to provide feedback, and tracking the number of applications from individuals referred by workforce partners versus those that are successfully onboarded as employees (to determine the number of applicants encountering barriers in the process).

Follow Up with Candidates to Assess Application Experience

Providing feedback to anchor mission applicants that did not secure positions at Rush and receiving feedback from applicants who completed the application process will ensure consistency in the flow of applications. This can be done individually by the recruiters or through a workforce development partner that works closely with the applicant.

Tactical Tools for Local Hiring Success

Create a Partnership Tier System

- Assess yield of applicants from workforce partners.
- Prioritize maintenance, investment, and cultivation for partners referring the most applicants and engaging with Rush HR leads.
- This saves time for talent acquisition professionals as they determine how to engage with partners and
 prioritizes meetings, events, and general interactions with partners that are the most effective in referring
 candidates that will complete an application.

Leverage Applicant Tracking Systems

- Create designations on Applicants Tracking System (ATS) to identify anchor mission applicants.
- Create website landing pages that more efficiently direct candidates to the application.
- Design webpage that describes different clinical and non-clinical roles so applicants can learn more about them.

Consider and Make Space for Residents with the Greatest Barriers to Employment

Justice-Impacted Individuals

- Identify areas in the application process that have the potential to disqualify individuals with justiceimpacted backgrounds, including language that might dissuade these individuals from applying to jobs they are qualified for.
- In collaboration with Legal and Compliance teams, determine the types of prior justice-related offenses
 that would disqualify an applicant and how much time may need to have lapsed before disregarding the
 record.
- Employ a case-by-case approach when an applicant shows justice-related offenses in their background check.

Applicants with Disabilities

- Designate a talent acquisition lead to serve as a point of contact for individuals who identify as having a
 disability. This person can answer questions about access as prospective applicants apply for a role and
 ensure that there is equity in the hiring process.
- Rush has enacted various marketing campaigns to encourage employees to feel comfortable disclosing
 disabilities as part of their identity at Rush, which is often an important factor for prospective applicants
 when deciding to join the health system as an employee.

Beyond justice-impacted individuals and individuals with disabilities, there are other residents who may face difficulty getting through the traditional recruitment process. It is important for institutions to identify opportunities for interventions that can ensure an equitable flow of all candidates through the application process. For many institutions, non-traditional applicants could be closely tied to anchor mission geographies. It is helpful to analyze application trends and observe these connections in order to increase the flow of anchor mission hires.

Formalizing Employee Volunteer Policies

Process of Establishing a Policy for Volunteer Time Off (VTO)

Shaping a volunteerism program as part of community benefit initiatives provides a way to test the idea of volunteer programming before formalizing it as a human resources or benefit policy. At Rush, we have found that aligning employee volunteerism with employee engagement and employee benefits department leads has resulted in the most coordinated approach and has provided momentum to all three initiatives. In our work, we have found that formalizing a volunteer time off policy has financial and organizational implications that should be noted before embarking on the process.

Whether a volunteer program involves a formal policy or not, it is still a worthwhile endeavor that can be coordinated efficiently as a cross-departmental effort. Rush's volunteer program partners with community-based organizations in the anchor mission geography. Most volunteer opportunities at Rush are with food pantries or with educational organizations operating on the West Side, though Rush has ongoing efforts to expand the variety of volunteer opportunities available to employees as part of the Anchor Mission strategy plan.

Formalizing a VTO Policy

| Pros | Cons/Considerations |
|--|---|
| more parity in the ability of employees to take time off regardless of their role (hourly vs. salaried) at the institution increased accessibility for all employees to designate specific dates for volunteer activities can be promoted as a benefit alongside paid time off (PTO) | not cost-efficient, especially within budget constraints needs approval from HR leadership requires incorporation of process into departmental structures |

Employing Employee Resource Groups (ERGs) in Support of the Anchor Mission

Engaging with Diversity, Equity, and Inclusion (DEI) initiatives and Employee Resource Groups (ERG) can also strengthen anchor mission initiatives related to employee engagement. At Rush, the West Side Anchor Mission Employee Resource Group was created so that Rush employees could have the opportunity to learn more about community organizations serving the West Side and volunteer to support existing community development efforts. See <u>6.6 Aligning with Anchor Mission-Adjacent Internal Initiatives</u> to learn more about how to engage ERGs as a tool to advance anchor mission implementation.

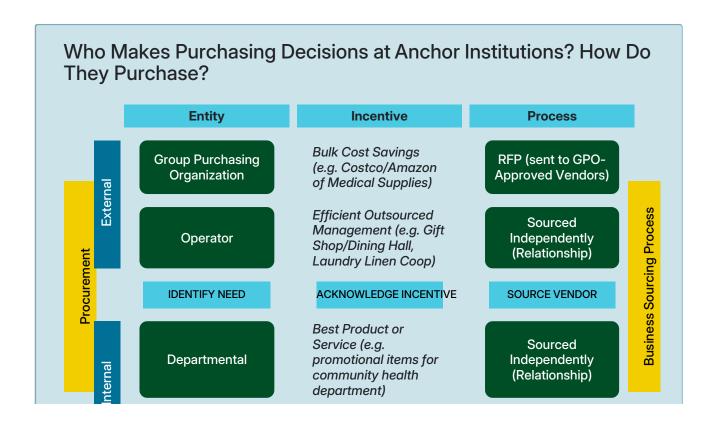
4.2 Procurement and Supply Chain Initiatives

Rush has learned that local purchasing can take many forms, and the learnings in this pillar reflect the everevolving nature of procurement of goods and services in a large institution. Understanding the organizational structure of purchasing and the incentives of cost savings within a healthcare institution are key to employing an anchor mission lens in these complex processes. Rush's new learnings in local purchasing over the past few years, including advancing this important work despite navigating increasing budgetary constraints, are detailed below.

Understanding an Institution's Purchasing Process

To create an effective impact purchasing strategy, it is essential to first understand all of the entities within an institution that can conduct purchasing and how each can best be leveraged in support of the anchor mission. After mapping all the entities, it will make it easier to assess how to add an anchor mission lens to the purchasing process of the supply chain department, individual departments that may control their own procurement, or other actors that control purchasing decisions. Every organization looks a bit different. For example, some institutions house the supply chain department within the clinical operations department and others are housed within the finance department. Having a full understanding of who purchases at an institution and how it operates provides more opportunity to increase anchor mission spend.

The best place to start is with an organization's purchasing policy—this organizational document usually details the policies that individuals and departments must follow to comply with an equitable purchasing process for a good or service. For example, one can usually find the maximum amount an employee can purchase before having to enact an RFP process, and which level of seniority a departmental leader needs to have in order to approve it, both of which are helpful in determining the institutional leaders that have purchasing power across the institution.



Strategic Sourcing

Cost Savings, Institutional Needs, Complex Sourcing (e.g. Infectious Diseases Department needs contact tracing software)

RFP (sent to preferred vendors only)

It is also important to consider the myriad of purchasing agents at an institution beyond the supply chain/strategic sourcing department and understand the incentives that drive those entities. Regardless of category, the individuals that drive purchasing decisions at an institution are varied and their purchasing activity may not be limited to contracts that flow through strategic sourcing and require a formal bid process. In this way, anchor mission practitioners can leverage spend that does not flow through procurement's decision-making process and engage with the purchasing agents directly. Concordance and Fooda are examples of strategic external partnerships Rush has leveraged to engage a purchasing entity in support of anchor mission spend goals, and the Rush anchor mission team continues to engage internal departments that purchase broadly in categories for which there could be a local and/or diverse supplier.

It is important to note that in many institutional purchasing policies, a department can often purchase up to \$150,000 worth of goods and services without procurement ever being involved so long as they have budgeted for it and the department's leader signs off on the contract. For example, a VP in the HR department could award a \$150,000 contract to a small, local/anchor mission marketing firm in order to fund an ongoing departmental project that requires marketing support. Though it is not a million-dollar contract (like other system-wide categories such as laundry/linen and janitorial), it is still an impactful amount that can grow a small, local business. As such, these types of contract opportunities should be examined and considered in support of anchor mission purchasing.

Adding Anchor Mission Lens to Existing Purchasing Process

For spend categories that go through a Request for Proposal (RFP) process, strategic sourcing departments usually have a process for determining when contracts are coming up for bid (with contracts usually spanning 2-5 years in many categories). As such, it is efficient to add an anchor mission lens to existing purchasing incentives that drive vendor selection (like employing cost savings) when considering contract renewals. The process to incorporating an anchor mission lens to existing strategic sourcing operations can be visualized below:

Purchasing directors analyze the contract pipeline for the next 1-2 years, identifying those that are coming up for renewal.

Category managers determine contracts for which other vendors are available that meet the following criteria:

- 1. Cost Savings
- 2. Sustainability
- 3. Local State/City
- 4. Anchor Mission
- 5. Diversity

Purchasing leaders determine implications of a potential shift, with some convening a value analysis committee or key stakeholders to determine the impact of a new vendor across the hospital system.

Purchasing leaders make a decision about switching vendor(s) based on the criteria set for a specific bid or RFP including cost, quality, and nonmonetary value. Ensuring that the anchor mission is considered during this process is the most efficient way to enable local purchasing as part of the existing operations of shifting spend to new vendors and not as an add-on in special circumstances. In order to carry out this process, it is helpful to maintain an active meeting cadence across purchasing, anchor mission, DEI, sustainability, and other relevant departments to ensure continuity and transparency in the vendor selection process.

Turning Vendors (Big and Small) into Strategic Partners

Eventually, employing a strategy of cultivating existing suppliers and looking for areas where they can add value to the anchor mission is just as impactful as sourcing a new anchor mission vendor. The impact of Rush's partnership with Concordance and Fooda is detailed in a separate Healthcare Anchor Network (HAN) case study, and underscores how deepening partnerships with vendors can often provide a high-impact way to support anchor mission goals. These partnerships helped Rush scale local purchasing without the need to engage multiple stakeholders in the work, though they do require support from anchor mission staff in order to help them fulfill their aligned mission to purchase or hire locally.

The same can be accomplished with smaller, local vendors. It is helpful to draw a list of all local vendors for a given year and look for opportunities to increase contract amounts with existing vendors by extending their contracts or adding stipulations to their contract that support anchor mission initiatives. Rush has implemented this tactic in support of its goal to decrease chemicals of concern in furniture purchased for Rush's new cancer center. This process has allowed the purchasing teams to collaborate with capital projects and sustainability to ensure compliance with anchor mission requirements and the cultivation of an existing relationship with a local vendor that supplies furniture.

Leveraging Departmental Spend and Creating Transparency in the Vendor Onboarding Process

Another key factor to consider when increasing spend is leveraging existing departmental spend categories that can be shifted to local suppliers. This involves working directly with departments that may be purchasing goods and services through their own departmental purchasing agent (typically for contracts of a smaller dollar amount). For Rush, opportunities for shifting spend have emerged in the food and nutrition department (typically to shift to local and sustainable vendors) and marketing departments (local marketing and promotional item vendors) that have the capacity to work with department leaders effectively to provide goods and services (often through a purchase order, P-Card (credit card for purchasing lower cost items), check, or similar) without necessarily executing a formal contract. In both instances, the Rush team is looking for vendors to satisfy specific departmental needs that do not require formal and complex legal documentation.

On a tactical level, creating a brief slide deck to guide new suppliers through the process of filling out a general information form, uploading a W-9, and enclosing their third-party diversity certifications ensures a clear and transparent onboarding process. For institutions that use a platform for supplier management (e.g., Supplier.io or Supplier Gateway), creating a brief presentation on how to create an account and navigate the platform is helpful for suppliers. Once transparency in the onboarding process is achieved, sharing the process with community partners and departmental leaders is the most efficient way to reach prospective vendors.

Focusing on and Tracking Categories of Opportunity

When looking to increase local spend, Rush has found it important to have a target set of categories to focus on rather than considering only a larger, system-wide dollar amount of spend to be shifted. Rush has often analyzed categories of opportunity, which we define as a category for which there is a high level of spend organizationally and also a good pool of vendors available locally. In sum, a category of opportunity is one for which demand and supply are both equally strong and one in which the institution has complete control of the purchasing process (versus a category controlled by a GPO or outsourced vendor). Focusing on these categories ensures that institutions prioritize categories for which they directly control the contract.

Once those categories are prioritized, institutions are able to visualize which ones need to shift contracts (and how many contracts, and in what period of time) in order to facilitate an increase in overall anchor mission spend for the institution. For Rush, an annual spend analysis provided by an outside vendor has facilitated the identification of opportunity categories, but it is possible to conduct an informal analysis internally by obtaining lists of local vendors from local community partners, like government agencies, third-party certification agencies, business service organizations, chambers of commerce, and other community-based partners.

Once institutions have identified opportunity categories of spend over which the supply chain/strategic sourcing team has direct control of the bid process, they should create a target list of 10-15 categories of opportunity that will become a strategic priority for local/diverse spend. This will help keep the work focused and aligned with departmental purchasing priorities. See <u>6.3 Engaging Supply Chain Category Managers</u> for strategies to engage category managers in tracking categorical spend once categories of opportunity have been identified.

Understanding Group Purchasing Organizations (GPOs)

As you advance in employing an anchor mission purchasing strategy, you will find that contract management for many categories of opportunity at hospitals are managed by Group Purchasing Organizations (GPOs). Today the industry has consolidated significantly, and although over 600 GPOs operate nationally, three of them significantly dominate the sector: Vizient, Premier, and HealthTrust. Although there is limited and sometimes conflicting evidence, the intent of a GPO is to work with multiple hospitals to serve as a collective buyer to drive down costs when purchasing products and services.

Thus, GPOs use economies of scale to buy items such as medicine, supplies, and services in bulk so that they can sell them back to hospitals. They make money by negotiating lower prices from the original manufacturers/suppliers and charging them a fee to sell their products. In this way, hospitals themselves do not have to negotiate, purchase, and manage contracts for every single item they need to buy. GPOs therefore lessen the complexity cost that would accompany direct ownership of multiple categories of spend for a single hospital system.

The existence of GPOs makes competition from small businesses difficult because manufacturers and businesses don't have the ability to pay the GPOs' fees, distribute to multiple states nationally, and/or produce the volume required for such a partnership. At least one GPO, Vizient, has started to develop tools to engage smaller, diverse suppliers through their community contracting program that connects Vizient member hospitals with local, diverse suppliers. Although other health systems have sought to work with their GPOs around increasing local and diverse spend, GPO engagement is not a strategic partnership that Rush has found successful or prioritized.

Instead, Rush has pursued direct strategic partnerships with large suppliers in support of local hiring and purchasing and has found it to be far more effective. Partnering with a large supplier that is local to a hospital's geographic area to execute an anchor mission strategy leverages the supplier's organizational resources while minimizing that of business leads and anchor mission staff at your institution.

Additionally, institutions could still leverage other categories for which the bid process is under the direct control of the hospital rather than under the management of a GPO (and alongside several member hospitals that also direct spending for those categories). Laundry is one such example.

Data Tracking

One important learning in tracking spend data for local purchasing initiatives involves developing the right metrics to track the reach of local spend beyond the dollar amount spent with vendors in the anchor mission geography. Focusing only on the annual amount in the entirety of an institution's spend obscures the potential for tracking progress in opportunity categories with specific contracts and departmental spending that truly move the needle. For this reason, it is important to set a goal for specific categories of spend throughout the year.

Below are some examples of local purchasing vehicles that can be tracked and employed to shift spend instead of tracking a total amount:

Strategic Sourcing

Amount can be tracked from specific contracts and stratified to specify categories of spend

Departmental

Spend amount can be tracked by noting the annual spend and use of local and diverse suppliers in purchase orders of a specific department

Strategic Partners

Spend directed to strategic partners that buy and hire from anchor mission geography businesses and residents (like Concordance and Fooda at Rush)

Operators

Track gift shop spend with local vendors

Tracking a single indicator of local purchasing spend is a great starting point, but increasing that amount by 3 to 5% over time will typically only account for natural variations in annual spend, rather than an intentional and concerted effort to shift specific contracts to local vendors. If feasible, it is helpful to track the amount of new spend moved to local vendors each year as a way of determining how local spend shifts over time. Even if shifts do not occur regularly (especially due to the nature and timing of contract renewals), denoting an amount of spend shifted when it happens could help visualize an institution's impact in a category.

4.3 Treasury Initiatives

Revisiting Rush's CDFI-Centered Impact Investment Model

Rush's current strategy of impact investing through Community Development Financial Institutions (CDFIs) has proven to be a low-risk and low-touch way to provide capital for community projects and help local CDFIs to expand their lending portfolios, particularly in high need geographies. CDFIs are mission-driven institutions that provide essential financial services in communities that are underserved by the traditional banking sector.

Investing in CDFIs is an efficient approach to impact investing because it involves underwriting one CDFI, which in turn makes multiple investments, rather than Rush underwriting and managing individual investments internally. However, this approach does limit Rush's ability as an investor to influence the selection criteria and decisions about which projects are funded. Further, each CDFI has an area of specialty (e.g., affordable housing, small business lending), so as an investor, Rush is beholden to the focus areas of the CDFIs where it makes investments.

Rush has been successful in quantifying the impact on the West Side by assessing loan data and qualitative impact information from loan disbursements across the entire portfolios of each CDFI partner. Overall, investing through CDFI partners allows the impact investment portfolio to grow in alignment with an institution's balance sheet and provides a low-touch way to make impact investments that do not require Rush to manage its own portfolio. The only caveat of this strategy is that quantifying impact requires close relationships with CDFI partners and reliance on the loan data they already collect.

Organizational Alignment

Rush's impact investing strategy has grown and evolved in the five years since its inception. The focus for impact investing has turned to organizational optimization and increased engagement with the CDFIs that disburse loans as a result of Rush's investment. For Rush, organizational optimization for impact investing involves four components:

- Recycling capital allows investors to deploy the principal plus profits from mature loans to reinvest in new borrowers and projects.
- Ensuring program sustainability by exploring new models of impact investing and innovations
 in traditional philanthropy: this includes aligning grants with investments, collaborating with
 philanthropy alongside our impact investing strategies, and exploring new models of impact
 investing for future investments.
- Developing a framework for data collection and impact assessment will allow Rush, alongside
 its <u>West Side United investor partners</u>, to assess the impact of loan disbursements across the
 anchor mission geography over time.
- Supporting CDFIs in their efforts to promote economic development: aligning with CDFIs to collaborate on a place-based approach to community development through impact investments.

Qualitative Markers and Benchmarks for Impact

Due to the structure of CDFI-centered impact investments, it is more efficient to devote time to supporting CDFIs and developing new ways of assessing impact investments rather than setting goals for the quantity and amount of loan disbursements made each year. It has proven more efficient to collaborate on a reporting system that works for all investors rather than requiring them to report into a preset structure that does not consider their individual data capacity and needs. Rush has helped to clarify its impact investing strategy by developing a framework to track outputs in terms of loan disbursements, and a framework to track collective outcomes for the entire impact investment portfolio (which includes other hospitals) that is still in development in partnership with West Side United.

Quarterly, Rush reports to leadership total capital disbursements to CDFIs and loans made in the anchor mission geography. This qualitative data is complemented by qualitative markers and benchmarks for what the future of impact investing can look like as an organizational initiative. Scheduling quarterly check-ins with Rush's collective of CDFI partners and hosting annual reporting discussions with each of them has aligned the goals of the collective and shaped the trajectory of how Rush assesses outcomes of its impact investments beyond financial gain. The impact investment collective's top loan-supported project sectors have included community development, healthy foods, housing, commercial retail, and facilities. From this data, it is possible to infer that many of these projects contribute to neighborhood development, and it is Rush's goal to continue to support that growth.

Impact Assessment Framework

When executing a CDFI-centered impact investing strategy, deriving impact indicators from the quantitative data that CDFIs typically collect is not always possible. At most, investors can feasibly only rely on anecdotal success stories from individual loan recipients that CDFIs can readily share. Because of this lack of access to data that could inform the impact of loan disbursement on the development of neighborhoods, Rush partnered with West Side United (WSU) and its investors to create a new way of assessing impact from capital deployed through impact investments. This engagement addressed data collection limitations by developing a framework that reflects the impact of CDFI loans in community development.

The decision to undertake this engagement was due in part to the publication of WSU's The Journey to Impact Investing, which was a report that detailed the progress of the impact investment collective's efforts. The report was launched in December 2022 to provide stakeholders with an overview of how WSU's impact investments have served as a catalyst of economic growth over time. The findings helped to catalyze the WSU impact investing committee's efforts to prioritize communications with CDFIs about collective data reporting tools and opportunities for demonstrating impact.

Rather than burdening CDFI partners with additional requests for metrics, the impact investing committee took a collective approach in identifying a real need to align on neighborhood and community level indicators for community investment. After participating in an engagement with CLF Ventures as part of their Community Investment HealthScore™ training in 2022 and identifying success indicators for community investment as an opportunity for growth, WSU and CLF Ventures began a new engagement in September 2023. These efforts informed an impact measurement framework for investors in the WSU impact investing committee.

Starting in 2024, WSU has produced biannual reports for the impact investing committee that features loan

activity data from CDFI partners such as aggregate investing amounts, project sectors, project outputs related to jobs created or preserved, housing units, commercial real estate, and others. The reports also include economic indicators associated with health equity such as community level median income, unemployment, and housing cost burden, as well as complementary catalytic investments across West Side communities to demonstrate the ecosystem of investment.

These reports reflect the existing reach of coordinated investments and the opportunities to leverage investments relative to CDFI and other financing partners in the public sector and philanthropy. WSU intends that this measurement framework will inform investing strategies among its partners and increase engagement with the community to address gaps in additional development or necessary approaches to increase economic vitality and therefore health equity.

Rush, alongside other WSU investors, is helping to shape efforts to measure the community impacts of impact investing, which is still a relatively new field on a national level. According to the aforementioned study (The Journey to Impact Investing), "SROI [Social Return on Investment] is an emergent principles-based field in the United States. Given the relative newness of SROI analysis in the US, the ability to scope, carry out and implement SROI analysis has been limited." Due to the dearth of public reporting on social impact initiatives, West Side United's efforts to align investor hospitals in quantifying impact through a consistent framework will be among the first of its kind. With that in mind, Rush recognizes that this is still a developing framework and it is worthwhile to continue to explore the ways in which impact can be tracked over time.

5 Updates on Data Framework, Reporting Structures, and System Integration

5.1

Standardizing and Integrating Data Collection

Rush's data framework has evolved significantly in the years following the publication of the original Anchor Mission Playbook. It is therefore worthwhile to note the ways in which Rush has standardized data collection and analysis and brought these standardized practices to its satellite hospitals as part of its system integration process.

5.2

Data Collection Framework

It is helpful to create and consistently edit a master data management framework that outlines metrics, data sources, and reporting cadences for all anchor initiatives. A template for that data management can be found here. A data collection framework outlines the data that the anchor mission department analyzes along with a schedule of when data reporting is due for internal and external audiences.



Implementing standardized metrics with consistent reporting timelines improves the sustainability of anchor mission initiatives over time. Standardization is also necessary when implementing an anchor mission across a hospital system that includes hospitals in different locations. The standard metrics for Rush can be found here. These have grown and evolved over time in alignment with metrics collected for Rush's Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP), and metrics already collected by business departments.



Creating templates for business units to report on their progress allows for consistent reporting that does not create an organizational burden on business leads. Rush uses standard templates for business leads to submit quarterly data and describe activities they have engaged in to support anchor mission strategies.



Once a data framework is established, Rush's experience was that the most feasible initiatives to pursue when it was beginning its anchor mission journey and trying to integrate the anchor mission across the system was within human resources and employee benefits and volunteerism (both of which typically reside in the human resources department).

As discussed in the original Anchor Mission Playbook, anchor mission implementation often begins with data analysis based on anchor mission-specific metrics in order to benchmark the current state of each department before pursuing anchor mission initiatives. Rather than determining new metrics for each system hospital based on their data collection practices, it is more efficient to adhere to one to two standard metrics already being collected by the original hospital engaged in anchor mission work. The original Anchor Mission Playbook provides an overview of potential metrics that can be tracked in order to assess impact. In Rush's experience, being selective and intentional (only choosing one to three metrics to track that are also directly related to the anchor mission activities that will be undertaken) is the most efficient way to track progress over time without creating undue reporting burdens for business leads.

For example, looking up the amount of local hires based on their geographic location can be easily accomplished by a data pull from an applicant tracking system (which human resources departments rely on to hire employees). Thus, it is a consistent metric that hospitals can track across the wider system. It can also be directly correlated with the activities that a talent acquisition team undertakes such as recruiting applicants at hiring fairs, hosting community hiring events, and partnering with a community organization to interview referred applicants.

It is important to note that some initiatives will require more exploration and data assessments in order to fully integrate them into the scope of anchor mission strategies. Some obstacles hospitals can face are logistical, such as using different data tracking systems (e.g., one hospital uses Workday and another uses iGreentree as an applicant tracking system (ATS) or one uses supplier io and another uses Supplier Gateway for Tier II spend tracking). Other obstacles are organizational; there may be a hesitation of satellite hospital staff to adhere to the main hospital's impact tracking structure and anchor mission methodology, especially if it does not easily align with their community health or philanthropic initiatives.

To address these obstacles, standardization is key, but flexibility is important—having a specific ask of metrics and reporting creates a starting point for initial anchor mission conversations, but allowing each hospital to select what they can feasibly track and along what timeline creates a more dynamic structure that can evolve as resources are developed to support anchor mission efforts. Once metrics are selected, a reporting cadence should be established, and monthly, quarterly, and annual options are the ones most common to allow for intentional analysis of progress over time. Timelines for reporting should allow for flexibility and can be interchangeable across different hospitals without impacting reporting structures.

An example of an efficient way of visualizing progress across the system with metrics that are similar and understood by leadership in the same context.

img

Quarterly Report – Executive Summary

| Pillar | Metrics | FY24 Target | YTD Results | Status |
|--------------|---|------------------------|-----------------------------|--|
| Hire Local | % of new hires from AM zip codes % of new hires from AM zip codes retained at least 90 days % of new hires from AM zip codes retained at least 6 months % of new hires from AM zip codes retained at least 1 year* | % % % | % % % | On Track On Track On Track On Track |
| Buy Local | \$ of AM spend doing business with RUMC (in millions) | \$ | \$ | On Track |
| Invest Local | Rush loan commitments in AM community (\$MM) WSU loan commitment in AM community (\$MM) Actual CDFI dollars loaned (\$MM) Total WSU grant pool with hospitals and banks (\$MM) | \$ \$ \$ \$ | | On Track |
| Rush Local | \$ value of volunteer hours # of volunteer hours # of participating employees # of families served % of AM employees saving at 6% or more % of AM employees invested in target date funds % of AM employees participating in health plan % of employees making a living wage* | \$ # # % % | \$ # # % % % | On Track |

5.4 FIELD PERSPECTIVE System Integration at Rush

Rush has begun the process of integrating the community health equity and anchor mission initiatives of Rush Oak Park Hospital and Rush Copley Medical Center in the broader anchor mission framework of Rush University System for Health. System integration efforts began with identifying key stakeholders in anchor mission implementation at each hospital and providing them with an anchor mission overview led by Rush's anchor mission team. After that, the team assisted both hospitals with determining focus geographies(based on factors like the life-expectancy gap, areas with high patient volume, and areas with the lowest median income) for Oak Park and for Copley and determining metrics to



track annually. Once targets were set, Rush incorporated anchor mission metrics within the Senior Leadership Team Corporate Dashboard, which is closely monitored by senior executives at all three hospitals. This ensured that anchor mission system integration aligns with the larger strategic priority of standardizing practices to improve the coordination of care at all three Rush System hospitals.

6 Organizational Engagement and Internal Alignment

6.1

Engaging Business Leads and Aligning with Anchor Mission-Adjacent Departments

At Rush, anchor mission execution has taught the anchor mission team that organizational engagement and internal alignment are the biggest keys to success in achieving anchor mission goals. This section explains how to engage additional business leads who serve key functions in anchor mission execution—these individuals are more deeply involved in the everyday work than executive leadership sponsors and already-designated champions are sometimes difficult to engage. The section also illustrates how having an understanding of the way business departments are structured and what drives operational success as part of their internal strategies is key to discerning how the anchor mission fits within the department's existing priorities. Without having clarity on the business imperatives that drive each business department, it is not possible to align anchor mission execution in a way that is operationally efficient and sustainable.

6.2

Tackling Departmental Complexity: HR Organizational Charts

Human Resources (HR) is a department that encompasses many functions that go beyond hiring and onboarding new employees, and anchor mission teams should leverage each and every HR function to advance their strategies. As such, it is important to understand how these different functions contribute to executing the anchor mission.

| HR functions and their general goals and how they tie into anchor mission execution | | |
|---|----------------------------------|---|
| HIRING | Talent Acquisition & Recruitment | Tasked with maximizing the amount of applicants for requisitions, sourcing applicants for specific roles, and working with hiring managers during the hiring process |
| | Employee Benefits | Tasked with managing employee benefits and total rewards packages, including negotiation, administration, and promotion to employees (e.g., open enrollment, employee handbooks, retirement, and overall financial stability) |
| | Compensation | Determines market rate for salaries and conducts pay analyses to stay on top of the sector and ensure equity in compensation |
| 888 888 888 | Talent Management | Leads strategy to develop and retain employees during the span of an employee's life cycle with an institution |
| | | |

| Learning & Development | Leads development of resources and tools for employees to develop their skill sets and knowledge of their field in order to advance in their careers and meet the needs of the company |
|--|---|
| Human Resources Information System (HRIS) | Manages employee information systems and all data related to employees |
| Employee Engagement | Conducts the annual employee survey and determines benchmarks for employee wellbeing |

In addition to outlining all stakeholders in HR, developing a workforce strategy requires collaborative work among several HR departments and the Rush departments that onboard new employees, particularly those in high-need roles. A workforce development council (WDC) was a good solution for Rush that allowed multiple, cross-departmental voices to align in one system-wide council. The WDC is an internal initiative tasked with leading the efforts of the system and its subsidiary hospitals, Rush University, and all associated medical groups, to build and maintain an equitable and inclusive workforce. The council also leads oversight of the facilitation, evaluation, reporting, funding and quality assurance of pathway programs. The WDC created four subcommittees (Education and Community Partnerships, HR Policy and Employee Experience, Pathway Programming, and Funding and Advocacy) to manage its initiatives and engage Rush employees across a variety of departments/entities within the Rush system, including HR, student affairs at Rush University, Rush University Medical Group, and hospital operations.

6.3

Tackling Departmental Complexity: Engaging Supply Chain Category Managers

An organizational tool for executing local purchasing work is the regular engagement of category managers (also known as strategic sourcing managers, procurement managers, and purchasing managers, etc.) in support of shifting spend to local suppliers. Category managers manage the process of procuring goods, services, and supplies for specific categories of products in an organization. In their role, they manage contract development, bid processes, negotiations, and execution.

Category managers work with departmental leaders in need of goods, suppliers, or services to ensure the process of procurement is efficient, compliant with regulations, and equitable. A key responsibility of category managers is to maximize profits and cost savings for the organization, which may sometimes put their directives at odds with local purchasing initiatives. It is thus important to engage them in the anchor mission to ensure that as they oversee product categories, they take a comprehensive approach at considering local suppliers who may have distinct qualities indicative of success that they may not typically consider as they review their roster of qualified suppliers.

Bid Calendars and Quarterly Internal Bid Reviews

Once a rapport with category managers is established, the supply chain and anchor mission teams must then shift their focus to developing tools to create and manage a pipeline of local and diverse suppliers and create a process that allows them to seamlessly bid for a contract or complete a purchase order to do business with the institution.

Having an assessment of what contracts are coming down the pipeline is an essential function when seeking to shift spend from an existing vendor to a local one. In most hospital settings, there are often few categories that are directly controlled by strategic sourcing rather than a Group Purchasing Organization (GPO) and the pool of available local and diverse businesses need to be sourced and cultivated over time.

For this reason, it is helpful to have ongoing internal bid opportunity reviews with the supply chain team and the anchor mission teams to determine any upcoming opportunities that may be worth exploring in case it could result in shifting spend to a local supplier. A bid calendar is a useful tool and helps to outline upcoming contract renewals and any RFP timelines that could be shared with business service organizations to source eligible businesses for bid opportunities.

If contract opportunities are sparse, departmental purchasing also provides an opportunity for shifting spend by using contracts that are managed by departmental leaders without having to complete a formal bid process. These opportunities are budgeted for by departments and are under a certain dollar amount threshold (usually under \$100,000). Many departments outsource part of their annually procured goods and services (usually in professional services) to small firms that can deliver quickly and efficiently. Common categories for these engagements include printing, marketing, promotional items, and one-off information technology contracts to create internal platforms for a specific purpose.

Departmental purchasing may be an ideal place to start for some institutions looking to shift spend locally. Having a clear and easy-to-understand purchase order process is helpful for both prospective suppliers and internal employees looking to purchase goods and services for their departments. Rush attempted to employ a departmental purchasing strategy just before the pandemic, and the process involved choosing select departments to pilot a local purchasing program. Rush selected its marketing and IT departments to varying degrees of success. Finding space in existing departmental budgets proved to be difficult, and departments usually did not have knowledge of local anchor mission vendors that could supply their needs. This experience taught the anchor mission team at Rush that engaging vendors and cultivating relationships with them before opportunities become available is a key strategy that should be implemented beforehand and consistently applied throughout the year.

6.4

Understanding and Visualizing Impact Investing

With impact investing initiatives, it is sometimes difficult to explain and understand the way that treasury investments drive community growth, so making that connection explicit among key stakeholders is important in anchor mission implementation. Internal alignment involves the way that internal stakeholders understand, support, and sustain the key drivers of an institution's impact investing strategy. At Rush, helping internal stakeholders better visualize the impact investing process and outcomes has helped in clarifying its role

among other initiatives in the anchor mission strategy. Treasury initiatives can often employ exclusive jargon and language that distances internal and external stakeholders from understanding the place of impact investing in anchor mission execution. To remedy this, Rush employed visualization tools to help its internal anchor mission stakeholders understand how impact investments flow into Community Development Financial Institutions (CDFIs) and become tools for the growth of local businesses in the anchor mission geography. The two examples below outline tactics Rush has employed to help its stakeholders understand impact investing as a key anchor mission strategy.

Visualization of Disbursements

- Visualizing the amount of money
 Rush has invested over time into
 CDFIs for our internal
 departments has improved the
 ability of our employees to
 understand the role of our
 treasury department in our anchor
 mission commitment.
- Because finance-related
 initiatives often use jargon that is
 exclusive to the industry, Rush
 has made efforts to engage its
 wider employee base in getting to
 learn more about our impact
 investments and developed a
 glossary of common terms for
 anchor mission strategies.



Goal: Rush, as a Healthcare Anchor Network (HAN) member, has pledged to allocate at least \$8.5 million to place-based investments to be deployed over five-years starting 2021

Target: Allocate at least \$ MM over 5 years from 2021

Relationships with CDFIs and Success Stories

- Once an impact investing strategy has been implemented, it should remain a top priority for investor hospitals to regularly communicate and support the CDFI partners as they disburse loans throughout the fiscal year. Quarterly meetings are helpful to assess the progress and impact of active loans in the community.
- Another way to engage internal stakeholders in impact investing strategies is to consistently create and share success stories of business growth facilitated by disbursed loans in the impact investment portfolio.



In 2001, Angelina Mendez opened her grocery store and taqueria, La Chaparrita, bringing a slice of Mexico City to Chicago's Little Village neighborhood. Read More...

6.5

Establishing an Internal Knowledge Management Framework for Anchor Mission

Another strategy to support the sustainability of anchor mission initiatives is having a knowledge management framework. Knowledge management involves the process of creating, using, storing, and sharing knowledge within an organization. For anchor mission initiatives, it means keeping close track of historical data analyses, goal setting documents, dashboards, departmental directories, RACI charts, and marketing materials related to all anchor mission pillars. Creating a central place to store these materials on a cross-departmental collaborative platform already in use by your institution (like Teams, Sharepoint, or Google Drive) is a cost-effective and user-friendly way to manage knowledge outside of the institution's servers. For example, the Rush anchor mission team developed a Teams site for anchor mission, an organizational guide, and a data management framework guide to assist new and future anchor mission employees at Rush during their onboarding to the anchor mission strategy.

Knowledge Management and Sustainability Chart

Goal Setting Dashboards and Historical Data Analyses

Create standardized dashboard templates for business leads to report on anchor mission progress and maintain historical report submissions in a central location.

Marketing Materials

Work closely with marketing to create a menu of marketing materials that promote anchor mission among employees and external partners. Save all marketing materials over time and work with editable templates that can be used year over year.

Department Directory

Create a document with contacts for each department and include the official titles or all business leads. This will ensure that the anchor mission role is aligned with a function, not a person.

Aligning with Anchor Mission-Adjacent Internal Initiatives

A major part of anchor mission implementation involves aligning with institutional initiatives that promote an equitable framework for the way the institution operates and how it engages with surrounding communities. It should be an organizational imperative for anchor mission teams to partner with similar internal initiatives so as not to duplicate efforts or miss opportunities to scale the impact of aligned efforts. Aligned initiatives can include Diversity, Equity, and Inclusion (DEI), Environmental, Sustainability, and Governance (ESG), Community Health Improvement Plan (CHIP), Health Equity, and many others. Below are a couple of examples of how Rush has collaborated with internal initiatives that are aligned with the anchor mission.

Diversity, Equity, and Inclusion (DEI)

At Rush, Employee Resource Groups (ERGs) drive employee engagement in support of diversity initiatives. An ERG is a voluntary group of employees who align behind a common characteristic, interest, or identity and then convene regularly to drive professional development opportunities and create a more inclusive employee culture through events, activities, and resource sharing. Partnerships between anchor mission leads and ERGs facilitate connection with employees on topics of diversity. For example, at Rush, the Disabilities Employee Resource Group focuses its activities on building an inclusive culture that welcomes and provides appropriate accommodations to prospective applicants and existing employees with disabilities, which supports local hiring efforts.

Rush also created a West Side Anchor Mission Resource Group to specifically engage and support employees who reside in Rush's focus geography and other allies. The group focuses on connecting employees to existing initiatives located in the West Side by hosting events with community-based organizations. The group also focuses on advocating for the advancement and development of anchor mission employees and regularly meets with HR and the community health equity departments to seek opportunities for collaboration. Whether operating in the HR or DEI departments, ERGs provide an opportunity to connect the larger anchor mission to current employees and engage them in activities that support anchor mission goals.

Community Health

The anchor mission team partners with the community health benefit department in its annual Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP). In this collaboration, the CHIP includes local hiring, local purchasing, and impact investing as markers of community health. Anchor mission data from local hiring, purchasing, and impact investing also contributes to annual community benefit reporting. For the Community Benefit Report, Rush reports on anchor mission-related workforce development results, such as the percentage of locally-hired employees and participants in its many career pathway programs. For the CHIP report, Rush reports on its anchor mission-related workforce development, local purchasing, impact investing, and employee volunteer metrics.

Environmental Sustainability

The anchor mission team also partnered with the sustainability department to conduct a webinar on environmental justice and how pollution disproportionately affects Rush's anchor mission communities, which brought into perspective the way environmental determinants of health impact underserved communities. The anchor mission team also partnered with sustainability to create a local restaurant and retail business list for Rush employees. The list details local sustainable vendors that employees can patronize in Rush's anchor mission area. The sustainability and anchor mission departments also collaborate often on local purchasing, as Rush's supply chain department is directly tasked with prioritizing sustainability in products sourced as part of the larger supply chain strategy and HAN's Impact Purchasing Commitment.

6.7

Post-COVID Updates and Implications

The COVID-19 pandemic had significant repercussions that challenged Rush's existing strategies when executing on anchor mission strategies in a way that the original Anchor Mission Playbook may not have accounted for. Below are examples of the multi-faceted ways in which some anchor mission focus areas were notably affected by the disruption of the pandemic:

Local Hiring and Talent Development (Impact Workforce)

Resulted in an upended job market, with mass layoffs and voluntary turnover over a period of two years that came to be known as The Great Resignation. For hospitals, that meant increased turnover and difficulty in hiring candidates for high-need roles. Decreased budgets meant less discretionary spending for staff development beyond the resources included in the benefits packages of institutions. Also, the inability to meet in person interrupted the delivery of career pathways programming for many community members and students seeking to advance through additional training.

Local Procurement and Supply Chain (Impact Purchasing)

Rush's supply chain team experienced tighter budgets, Rush decreased annual spend targets for local procurement by 50% because of smaller organizational budgets. To support local businesses, Rush participated in a number of city-wide collaborative efforts to support local food businesses and continued to assess its annual spend data to determine opportunities to shift spend. Nevertheless, virtual work environments posed barriers when connecting with new vendors, which in turn created challenges in shifting spend locally. Additionally, the pandemic saw many small businesses in certain categories pivot to e-commerce, develop new lines of business, or cease operations entirely.

Place-Based Impact Investing

Rush's treasury department saw an increased need for capital to be disbursed to entrepreneurs through Community Development Financial Institution (CDFI) partners. Many small businesses sought to pivot in a new environment and needed additional debt financing to pursue e-commerce, launch new products and services, and increase their online presence.

Employee and Community Engagement

In-person volunteer work was halted, while at the same time the need for resources, particularly access to COVID-19 vaccines for West Side residents, increased. Rush created the Community Command Center, which was a monthly cross-departmental meeting, to communicate about COVID-19-related needs in the community during this time.

7 External Engagement and Reporting

7.1

Aligning Anchor Mission with Other Local, State, and National Initiatives

While integrating anchor mission practices internally takes intention, time, and addressing implementation challenges, institutions must also create a space to contribute to larger external initiatives that drive economic growth. Many external initiatives do this by aligning institutions around a common goal and establishing data collection and reporting practices that facilitate greater collaboration and collective impact to achieve it. Although these additional reporting cadences to anchor mission strategies may seem counterintuitive, Rush has found that this additional data collection helps strengthen and grow its anchor mission approach over time. Aligning with external partners and initiatives is helpful to secure and advance anchor mission initiatives as part of the larger ecosystem of economic and community development. For Rush, Illinois U.S. Senator Richard Durbin's HEAL Initiative and West Side United have been instrumental in bringing publicity, resources, funding, and strategic direction to the anchor mission and thereby helping to scale its success.

7.2 Senator Durbin's HEAL Initiative

In Chicago, the HEAL (Hospital Engagement, Action, and Leadership) initiative, led by U.S. Senator Richard Durbin, has brought together a collective of 10 hospitals across Illinois focused on decreasing violence in their respective communities through an approach that involves data sharing and collaboration among hospital members. The initiative has created a network of healthcare providers and community organizations working to reduce violence and improve the overall health of residents in 18 underserved neighborhoods on Chicago's South and West Sides. This initiative has enabled Rush to align both its local hiring and local purchasing strategies as part of a larger mission to achieve violence reduction in Chicago. Since its inception, all 10 hospitals meet regularly as collaborators, rather than competitors, to advance health equity and anchor mission strategies. Rush reports on its workforce development efforts (along with data on its community-based practices) on an annual basis. The initiative has made significant progress in addressing the root causes of violence and health disparities.



Learn more about the HEAL initiative...

7.3 West Side United (WSU)

West Side United (WSU) is a group of Chicago health care institutions, residents, civic leaders, and health care professionals that include Rush University Medical Center, that are committed to reducing the 14-year gap in life expectancy between people living in Chicago's Loop and in some of the city's West Side neighborhoods. Rush's incubation of WSU and the impact of WSU acting as a catalyst for anchor mission initiatives on Chicago's West Side has been widely documented.

In the time since the publication of the original Anchor Mission Playbook, Rush has collaborated with WSU to scale and standardize its impact investments, leverage the collective power of other West Side hospitals for collaborative local purchasing initiatives, and collectively engage West Side vendors for purchasing opportunities. Partnering with WSU has provided the



opportunity for Rush to advance anchor mission strategies across other institutions that want to adopt anchor mission practices, all while developing strategies to standardize and further develop its own contributions to the field. Rush reports to WSU on its anchor mission initiatives on a quarterly basis, and the WSU team creates a report containing data that details the collective impact of the WSU anchor collective.

7.4

Healthcare Anchor Network

As a founding member of the Healthcare Anchor Network, Rush submits an annual report on several metrics across its anchor mission initiatives as part of HAN's framework for data collection and evaluation. Since 2018, HAN has worked in collaboration with its members to standardize nearly 50 indicators for the areas of Human Resources, Supply



Chain, Treasury, and Sustainability. One of the critical shifts—or a systemic change in the healthcare sector that needs to occur to normalize the anchor mission approach is the need to build a compelling evidence base for this work. The HAN framework for evaluation and metrics collection seeks to create an understanding of the connections between program level activities within health systems (e.g., impact purchasing) and health and economic outcomes in their communities (e.g., health disparity measures). Collecting this data will help enable systems to track their progress in creating more equitable and healthy communities through the adoption of anchor strategies. For Rush, HAN's evaluation and metrics collection framework has helped establish benchmarks for success that are necessary to assess progress by leveraging data provided by a variety of anchor mission practitioners nationwide.

8 Anchor Mission Implementation Tools and Resources

Templates and Dashboards

A documented governance structure is essential to establishing a core anchor mission team across initiatives and an executive leadership committee that will provide organizational guidance on the trajectory of anchor mission execution. A departmental governance structure expands on Rush's original anchor mission working group structure to include the contributions of the anchor mission core team and the business unit leads in advancing the anchor mission.



It is helpful to create and consistently edit a master data management framework that outlines metrics, data sources, and reporting cadences for all anchor initiatives. A template for that data management can be found here. A data collection framework outlines the data that the anchor mission department analyzes along with a schedule of when data reporting is due for internal and external audiences.



Implementing standardized metrics with consistent reporting timelines improves the sustainability of anchor mission initiatives over time. Standardization is also necessary when implementing an anchor mission across a hospital system that includes hospitals in different locations. The standard metrics for Rush can be found here. These have grown and evolved over time in alignment with metrics collected for Rush's Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP), and metrics already collected by business departments.



Creating templates for business units to report on their progress allows for consistent reporting that does not create an organizational burden on business leads. Rush uses standard templates for business leads to submit quarterly data and describe activities they have engaged in to support anchor mission strategies.



West Side United's Impact Investing Health Equity Evaluation

The Journey to Impact Investing

Healthcare Anchor Network's Impact Purchasing Case Study

Rush University System for Health

Healthcare Anchor Network's Collaborating with Community Stakeholders Case Study

Rush University Medical Center (RUMC)

Key Terms

| Anchor Institutions | Nonprofit or public institutions including hospitals, universities, local governments, utilities, large cultural organizations, and place-based foundations. Anchor institutions are geographically tied to their community through their social or public-facing mission, invested capital, or clientele. Due to the scale of their operations, anchor institutions produce a significant economic impact in their surrounding community, and given their social mission and place-based focus, have a vested interest in the long-term health and well-being of their surrounding community. |
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| Anchor Mission | A commitment to apply an institutions economic and human capital in partnership with its local community to mutually benefit the long-term well-being of both. |
| Anchor Mission Hire | Individuals who have been onboarded as Rush employees and whose primary residence is in a defined anchor mission zip code. |
| Anchor Mission Spend | Amount of money spent through supply chain contracts doing business with anchor mission area vendors. |
| Anchor Mission Zip Codes | Hyperlocal zip codes designated by each institution as a focus area for anchor mission work, with usually a combination of geography and economic hardship status. |
| Anchor Collaborative | A place-based network of anchor institutions that utilize an anchor mission framework in partnership with the community in order to advance economic and racial equity through increased economic opportunity, equitable economic development, and community wealth building. |
| CDFI | A Community Development Financial Institution, which is a specialized lender that provides financial services in low-income communities and to people who lack access to financing. |
| Community wealth building | A system-changing approach to community economic development that works to produce broadly shared economic prosperity, racial equity, and ecological sustainability through the reconfiguration of institutions and local economies on the basis of greater democratic ownership, participation, and control (The Democracy Collaborative). |
| Employee Retention | The percentage of employees who remain employed at Rush after a period of time (namely 3 months and 6 months after their start date). |

Equitable Economic Development

Economic development promotes economic well-being and improves the quality of life in communities by creating and retaining jobs, enhancing wealth, and providing a stable tax base. Equitable economic development is achieved when every member of a community is able to share in and benefit from economic growth (Rockefeller Foundation).

Impact Purchasing

This strategy involves anchor institutions prioritizing spending with local, diverse, and high-impact (e.g., employee-owned) businesses that better reflect the socio-demographic diversity of their community to help strengthen local economies and address the racial wealth gap.

A comprehensive inclusive, local sourcing strategy includes creating connections and building capacity. "Connection strategies" focus on how health systems can intentionally link existing local, diverse businesses that employ residents from underserved neighborhoods to contracting opportunities. "Capacity strategies" aim to strengthen the local business community's ability to meet health system supply chain needs—helping scale existing diverse businesses and develop new inclusive enterprises that can create wealth building opportunities in underserved neighborhoods for long-term residents.

Impact Workforce

This strategy involves anchor institutions committing to local and inclusive hiring and workforce development that connects individuals from nearby economically disadvantaged neighborhoods to quality jobs and career pathways.

A comprehensive inclusive, local hiring pipeline has two components: outside-in and then inside-up. *Outside-in* strategies prepare local residents experiencing barriers to employment to high-demand jobs at the institution through training and skills development, and then provide specific entry points for these candidates. *Inside-up strategies* then connect these hires, and other incumbent employees reach their full potential through accessible learning opportunities, job coaching, wraparound support, and clear pathways for career advancement within the institutions.

Local

Geographic designation based on the service area of each hospital.

Place-based Investing

An impact investment approach that generates positive social and economic impacts in historically disinvested communities and geographies, while achieving a modest financial return, or at least preserving the principal of the investment. Place-based Investing is used interchangeably with "community investment," geographically targeted "impact investing," or "local investing" by some anchor institutions or collaboratives.

| Racial Equity | A process of eliminating racial disparities and improving outcomes for everyone. It is the intentional and continual practice of changing policies, practices, systems, and structures by prioritizing measurable change in the lives of people of color (Race Forward). Specific to equitable economic development, racial equity means just and fair inclusion in an economy in which all can participate, prosper, and reach their full potential. We achieve racial equity when race no longer predicts life outcomes (Federal Reserve Bank of San Francisco). |
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| Recycled Capital | Capital that is generated as a profit from a first round of financing provided for a CDFI that is then used to re-invest into the same CDFI for the disbursement of more loans into the community. |
| Supplier Diversity | A competitive and equitable purchasing process that encourages departments to proactively consider qualified certified businesses owned by minorities, women, persons with disabilities, and veterans for their contracting needs. |
| System Integration | When a healthcare institution integrates its services across multiple facilities/hospitals (especially those acquired through a merger) into one system, thereby employing economies of scale to more effectively deliver |

care and act as a coordinated entity.

Over the past five years, the landscape for executing anchor mission strategies has drastically changed. The original **Anchor Mission Playbook** outlined strategies and insights to execute an anchor mission approach when the field was developing. Six years later, Rush University System for Health has derived new insights, implications, and tools to aid in the execution of the anchor mission framework.

In this update to Rush's original Playbook, we outline new learnings, challenges, developments and resources that have helped Rush University System for Health ensure the sustainability of its anchor mission in the current financial climate.

