



## **Community Sponsorship Guidelines and Approval Process**

### **Background**

1. Sherman Health is a not-for-profit community resource that practices prudent stewardship of financial resources.
2. Sherman Health receives numerous requests from community agencies and not-for-profit organizations seeking sponsorship funding for various events.
3. The same request may be received by more than one department within Sherman Health and could create confusion and duplication.
4. A proactive process is needed to coordinate these efforts to ensure maximum effectiveness and resource utilization in support of the organization's strategic plan.
5. Therefore, each request will be reviewed and evaluated based on the criteria below and available funding.

### **Mission, Vision & Strategic Plan**

1. Mission: Sherman Health's mission is to make a positive difference through outstanding healthcare and service, every life, every moment, every day.
2. Vision: Sherman Health is committed to becoming one of the best community hospitals in the nation.
3. Our Strategic Plan includes the following objectives:
  - Understand our community health care needs and work together to address them.
  - Communicate our capabilities to meet the region's health care needs.
  - Educate our partners and enlist their help to achieve our vision.
  - Support essential programs for our community and mission.

### **Guidelines**

#### ***Consistent with Sherman Health's Mission and Vision***

In evaluating sponsorship requests/opportunities, we must first consider whether the requesting organization and the event/activity are in keeping with our mission and vision.

### ***Requests to Sponsor Individuals Not Accepted***

Sherman Health cannot sponsor employees or other individuals who may approach the organization for financial support for their individual participation in a fundraising effort or event.

### ***Supports Sherman Health's Strategic Plan***

If the organization/event is consistent with our mission, then we must ask ourselves the following questions that tie back to the strategic plan:

1. Does the community organization and event/activity seek to address a community health care need?
2. Will the sponsorship request provide us with an opportunity to communicate our capabilities?
3. Will the sponsorship request provide us with an opportunity to market/promote key services?

In order to further consider a sponsorship request, we must answer "YES" to at least one of these questions. Preference will be given to those requests where the answer is "YES" to more than just one question.

If this minimum requirement is met, then the following guidelines will be used to help further determine how to allocate limited sponsorship dollars:

- **Value:** The event/activity provides good promotional value for the dollars invested.
- **Geographic Reach/Size of Audience:** The event/activity reaches a desirable target audience in our service area such as consumers, physicians, potential donors, community and government leaders. The larger the target audience reached, the better value provided.
- **Exclusivity:** If Sherman Health is asked to be a major sponsor, the number of major sponsors must be limited to three, including Sherman Health. Ideally, we would also like to be the only health care or hospital sponsor.
- **On-Site Involvement:** There is an opportunity for on-site involvement at the event, including:
  - Opportunity for Sherman Health leadership to be present and interact with community leaders, donors or other stakeholders.
  - Opportunity for the appropriate Sherman Health service line area or content experts to staff an informational table, provide an interactive activity such as a screening, or provide an educational talk.

Consideration will be given to events where service line staff or other Sherman Health staff are committed to participating on site at the event.

- **Public Relations/Political Sensitivities:** Our participation in the event will leave a good impression within the community.

### **Review and Approval Process**

1. All organizations approaching Sherman Health for sponsorship must fill out a copy of our sponsorship request form.
2. To receive a copy of this form, please send an email request to the following address: [christine.priester@shermanhospital.org](mailto:christine.priester@shermanhospital.org).
3. This form, and any other information about the requesting organization, will be circulated internally at Sherman Health for review.
4. We ask that community organizations submit requests four months to a year in advance, especially if this is a first-time sponsorship, rather than one we have funded in the past.
5. Requests that are received less than four months in advance of the deadline for making a decision risk being excluded from consideration.
6. Questions about our sponsorship process and criteria may be directed to Christine Priester in the Marketing & Public Relations Department: Telephone – 224.783.8470 or email: [christine.priester@shermanhospital.org](mailto:christine.priester@shermanhospital.org).