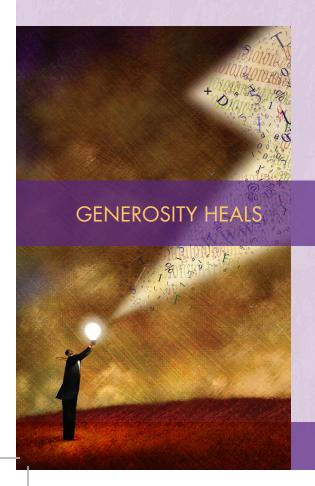


If we think about philanthropy as just another source of money to use in the same way we use operational money, we dilute its power. Its leverage is as risk capital to fund new care models, learnings, and organizational evolution. It enables us to discover and reinvent. Philanthropy makes the greatest impact when used for innovation.

Innovation also attracts strategic givers. Some people give from emotion. Others give out of habit. But strategic givers are intent on impact. They're entrepreneurial, ambitious, and inventive. The surest way to lose them is to be boring—to make things small, safe, and slow. Strategic givers want ambitious partners on a quest for what has not been done before.



When they engage, they do so with intensity. Some decide where to live because of the organizations they support. Many migrate from their business to philanthropy as a full-time pursuit. They often invest in just one organization, or a very few, where they make an all-out commitment of time, money, and savvy. Strategic givers relate to organizations as partners, not just funders.

In the past, many organizations looked to donors to fund *things*. They thought in terms of one-time investments for buildings or technologies. Only rarely did they shape the relationship as a journey in pursuit of an ambitious health outcome where the organization and philanthropist invest and improve together in perpetual movement.

If we simply purchase a **thing**, we're easily done. And once done, the relationship stalls. It is for this reason that so many organizations lurch from campaign to campaign. Gifts become end points rather than beginning points. It takes a new **thing** to ignite momentum again.

We want evolutionary relationships where together we dream, prototype, and refine. We want every gift to be the beginning of a conversation. When a donor makes a gift, we don't just thank them. We measure the difference the investment made and design what could happen next as we progress toward our destination.

The organizations attracting mega-philanthropy are not those who are poor, but those who offer givers the opportunity to participate in something momentous. Donors want to know their resources and their lives make a difference. If we put clinical innovation at the core of our relationship, we set out together on a continuously-unfolding adventure.

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