

# **MISSION, GOALS, RESOURCE INVENTORY AND SWAT ANALYSIS FOR FRIENDS OF IMCK - SEPTEMBER 9, 2013**

## **MISSION STATEMENT:**

**The mission of FIMCK is to expand awareness about and concern for IMCK in the interest of raising donations for a permanent endowment for IMCK.**

## **GOALS:**

### **GOAL I:**

**To establish an endowment for IMCK substantial enough to support health services and health education at IMCK.**

#### **Objective 1:**

**To raise an initial \$500,000 by January 1, 2015**

**Activity 1: Recruit at least two volunteers by September 1, 2013 to assist in sending out request letters.**

**Activity 2: Send request letters to all 10,000 churches in the PC(USA) by July 1, 2014. (ie: Send approximately 200 letters per week.)**

**Activity 3: Complete development of two donation appeal videos for on-line and live presentations by October 1, 2013.**

**Step 1: Obtain comments from experts.**

**Step 2: Revise scripts.**

**Step 3: Collect new video material from Jimmy Shafe & others.**

**Step 4: Get someone to record the new scripts and assemble all.**

**Activity 4: Propagate a campaign for online donations through Facebook and Twitter by January 1, 2014.**

**Activity 5: Double the number of named funds from 3 to 6 and to establish targets and member lists for each by January 1, 2014.**

#### **Objective 2:**

**To monitor the fund's performance and take ongoing steps as necessary to maximize returns.**

**Activity 1: Prepare report and recommendations to the Board after receiving the June statement from MBF.**

**Activity 2: Have funds moved by August 1, 2013 if so decided by the Board.**

**Activity 3: Re-evaluate at the end of each quarter to see what further actions, if any are needed.**

**Objective 3:**

**To develop a payout plan and procedures and to begin payouts by January 1, 2018.**

**Activity 1: Develop proposed plan and procedures for the Board's consideration by January 1, 2014.**

**Activity 2: Use description of the payout plan in fundraising efforts, as appropriate.**

**Activity 3: Re-evaluate the payout plan in January of 2016 to see if any changes are needed. Prepare to implement on target date.**

**Objective 4:**

**To raise \$2 million by January 1, 2020.**

**Activity 1: Develop and submit applications for grants to fund a dedicated fundraiser position and expenses by January 1, 2014.**

**Activity 2: By January 1, 2014, draft proposed contract to be signed with fundraiser once grant is awarded.**

**Activity 3: Recruit and interview for fundraiser beginning in January 2014. Hire as soon as grant is awarded.**

**Activity 4: Work with fundraiser to compile lists of organizations and individuals to be approached for large donations. Target initial completion date: Summer-Fall of 2014; ongoing thereafter.**

**Activity 5: Work with fundraiser to develop promotional materials -- brochures, videos, etc. -- aimed specifically at appealing to potential large donors. Target initial completion date: Summer-Fall of 2014 with annual updates thereafter.**

**Activity 2: Recruit a cadre of volunteers in all parts of the country who can help to introduce us to local prospective donors, host and chauffeur the hired fundraiser when visiting their region, and help with setting up or even conducting presentation within their areas. Target date by which to have at least 10 such volunteers in place: Fall of 2014.**

**Activity 6: Develop work schedule with fundraiser for contacting prospective donors and review progress monthly. Summer-Fall of 2014.**

**Activity 7: Re-evaluate the overall productivity of the fundraiser and make a go/no-go decision on continuing the activity by January 1, 2016.**

**Objective 5:**

**To ensure continuity of operations and ongoing efforts beyond 2020.**

**Activity 1: Recruit at least 2 new Board members who will specialize in fundraising and oversight of funds management by December 1, 2013.**

**Activity 2: Involve the new Board members in the foregoing activities all during 2014.**

**Activity 3: Turn over key Board positions to new members by January 1, 2015.**

**GOAL II:**

**To promote the work of IMCK through marketing and publishing & public relations. Procure 2 more volunteers and part time paid staff for this.**

**Objective 1:**

**Construct A Current Audience List (Donors/IMCKExpats/Newsletter/ Religious) by End of October 2013.**

**Activity 1 – Update the email list of people interested in IMCK by August 30.**

**Activity 2 – Procure an updated list of FIMCK donors/address/email.**

**Activity 3 – PCUSA list of presbyteries and churches.**

**Activity 3 – Create a list of non PCUSA Presbyterian churches and Mennonite Churches, who might be interested in IMCK.**

**Activity 4 – Propose to FIMCK Board the cost of an email outreach service by September 2013 meeting. Move current lists to that service in Sept/Oct. Consider how to maintain a list with email opt in/opt out.**

**Objective 2:**

**Research other medical/philanthropic organizations with similar interests by end of November 2013.**

**Activity 1 – Research/list medical philanthropic organizations with similar goals.**

**Activity 2 – Research/list medical teaching facilities - Congo/French interest.**

**Activity 3 – Send letter to select group from above asking if they wish to be on the newsletters list or to learn more about how to participate.**

### **Objective 3:**

#### **Survey a focus group about FIMCK goals for IMCK and summarize their responses by February 2014.**

**Activity 1 – Decide on goals of questionnaire and create a questionnaire.**

**Activity 2 – Send a questionnaire in English and French to Focus group (expats who formally worked at IMCK, IMCK Board and administration, IMCK physicians, MBF, designated churches) asking about specific goals for FIMCK.**

**Activity 3– Tabulate and summarize response to questionnaire and present to FIMCK Board by February 2014. Also send to IMCK Board and MBF.**

### **Objective 4**

#### **Develop Marketing Tools:**

**Activity 1 – By April 2014, develop networking package for speaking to groups or for communicating by email and web:**

- Pamphlet in English and French
- Electronic slide presentation in English and French
- Video – solicitation videos as well as an information video.
- One page email summary in English and French.

**Activity 2 – Press release written for newspaper, fax, email. Send to focused list: churches or local communities. This is focused for immediate release.**

**Activity 3 – Maintain email list with email outreach service: identify that emails are *from* FIMCK (but don't always be asking or they will not open), opt in and out, encourage to forward, link to other web sites, keep their emails private.**

**Activity 4: Regular media connection:**

- Maintain bimonthly IMCK newsletter (seek funding to pay for French translation by January 2014.
- Maintain current web site and consider one consultant fee.
- Connect to other media sites.
- Facebook, blog, twitter by March 2014

### **Objective 5**

#### **Maintain public relations system for those who have supported FIMCK through donations (financial and in-kind.)**

**Activity 1 – Print material for sending personal thanks: letter of thanks, bookmark with thanks/basic FIMCK info, envelope.**

**Activity 2 – Send a report letter annually to donors/supporters.**

**GOAL III:**

**To discover and collaborate with partner organizations and individuals who are committed to the work of IMCK.**

**Objective 1**

**To develop interest in IMCK among church groups.**

Activity 1 – Speak to whatever church groups may be interested or where interest could be developed.

Activity 2 – whenever possible, work to establish an endowment fund in the name of the church to which individuals can contribute.

**Objective 2**

**To work with health care educators and providers to provide in-kind activities that might supplement the endowment drive.**

Activity 1 – Discuss the work of IMCK to discover where there might be complementary activities.

Activity 2 – Develop an online capability that might be available for IMCK personnel or educational enrichment.

**Objective 3**

**Investigate philanthropic organizations that might be interested in supporting our endowment efforts.**

**Objective 4**

**Develop a broader base of interest to complement the work of endowment raising. All activities feed into this objective.**

**Objective 5**

**Maintain and encourage support from our present partners. Be mindful of the skills and abilities that are needed on the Board of FIMCK.**

## **FIMCK INVENTORY OF RESOURCES**

1. CASH as of August 31, 2013 -- \$1,213.94 in the Administrative Fund  
\$173,018.46 in the Endowment  
  
RECEIVED since 9/20/2011 for Administrative Fund -- \$2,638.00  
SPENT since 9/20/2012 from Administrative Fund -- \$1,424.06  
(Letterhead, Brochures, Stamps, Paper, Envelopes, Ink Cartridges)  
~1,200 appeal letters sent out
2. EQUIPMENT -- None owned but all Board members and volunteers contribute the use of their own personal computers, printers, telephones, etc.
3. PRODUCTS -- Two videos produced and one under development. Two brochures, one poster and one service bulletin insert.
4. STAFF -- None
5. VOLUNTEERS -- Five Board members  
SKILLS: Computer use, Website development, Public speaking, Brochure & Publications design, Financial management, Medical training, Language skills, Knowledge of DRC and IMCK culture and history.  
Six volunteers have helped in mailings  
One volunteer helped with letterhead design  
Two volunteers are helping with video development  
Potential for a dozen more.
6. DONORS -- Approximately 150 individuals, couples and organizations (primarily churches) have donated to the Endowment and to the Administrative Fund. Many are repeat givers. The donor mailing list is much larger (~300+). Donation amounts range from \$10 to \$25,000. Six named or memorial funds have been set up within the Endowment.
7. PARTNERS -- Medical Benevolence Foundation, Presbyterian Foundation and PC(USA), all are 501(c)3. IMCK is a beneficiary/partner.
8. MEDIA/CELEBRITIES CONTACTS -- None
9. SPONSORS -- None
10. GRANTS -- None

## **SWOC ANALYSIS**

### STRENGTHS

- Large group of potential volunteers in mish/Congo community
- Many potentially interested churches
- Availability of experienced non-profit partners
- Some computer skills available

### WEAKNESSES

- Limited media skills
- Limited investment management knowledge/experience/skills
- No good contacts with celebrities or others of wealth
- Limited non-church contacts
- Ages of those currently involved
- No funds for paid staff
- Limited grant-writing experience/skills/time
- Difficulties of promoting an endowment vs immediate aid projects

### OPPORTUNITIES

- Congo partner presbyteries not currently involved
- Large congregations not yet approached
- Medical and professional organizations/schools not yet approached
- Grant applications not yet made
- Social networks not yet exploited
- Media opportunities not yet exploited

### CHALLENGES

- Diminution and schisms in PC(USA)
- Potential bear market
- Dwindling population of those familiar with IMCK
- Hostility of some presbyteries with other priorities
- Competition from other projects seeking donations for IMCK/Congo

## **A Summary of the Strategic Plan under development by the Friends of the Institute Medicale Chretien du Kasai (FIMCK)**

The Christian Medical Institute of the Kasai Province of the Democratic Republic of Congo consists of two hospitals, two nursing schools, a medical residency program, and several other medical/dental initiatives in the process of implementation. This medical complex has the reputation of being the best source of care in the interior of the DRC. In 2010 the two hospitals and their outpatient clinics treated more than 32,000 cases. In 2013 the two schools had a combined enrollment of almost 300. In 2013 the two hospitals provided medical residencies for 5 doctors and internships for 12 medical students. They also perform many other medical and educational services.

The Friends of IMCK have adopted the following statement:

**The mission of FIMCK is to expand awareness about and concern for IMCK in the interest of raising donations for a permanent endowment for IMCK.**

The short-term goal of the FIMCK is to raise \$500,000 by January 2015. As of September, 2013, the endowment funds invested with the Medical Benevolence Foundation, a 501(c)3 organization, are \$175,000. The two other major goals of the strategic plan are designed to promote and further the endowment. They are: Raising awareness of the need for this endowment, and Establishing collaborations that will support the raising of this endowment.

The Board of FIMCK has chosen to raise endowment rather than to target specific projects for several reasons: One is simply that an endowment which will generate an annual draw can systematize salaries for Congolese doctors and other personnel; can serve to supplement funds for medical equipment; and can underwrite such necessary materials such as hospital sheets, renovation of buildings, and the purchase of vital pharmaceuticals. Rather than attempt to determine the needs and target them, the Board has decided that such decisions are best left up to indigenous staff and physicians. We believe this course will better serve the needs of the sick since relevant decisions will be left with those on the ground.

In order to achieve our primary objectives, we are dedicated to adopting the most efficient methods of fund-raising and investment possible. We intend to implement payout procedures by 2018; to insure continuity of objectives and procedures; and to mount a campaign to raise \$2,000,000 as the second phase of our endowment drive. There is a web site devoted to this project --- [www.imck.org](http://www.imck.org). Two videos have been developed and others are in production. Two full-color brochures and a PowerPoint presentation have also been developed. Work is ongoing in various local churches, as are attempts to develop partnerships with medical schools and other agencies. There is an ongoing relationship with Myers Park Presbyterian Church, and other partnerships are in the process of establishment.



This project is vital to the health and well being of the institution which has a fifty-nine year history, was begun by the mission agency of the Presbyterian Church (U.S.), has the support of the Mennonite Church and is ecumenical and universal in its scope of operation. It takes as its model the healing ministry of Jesus Christ.