CAPITAL EXPENDITURES TO FEMALE-OWNED, MINORITY-OWNED, VETERAN-OWNED AND SMALL BUSINESS ENTERPRISES

Under the provisions of the Illinois Health Facilities Planning Act (20 ILCS 3960/5.3 (b) (2)), **any hospital having more than 100 authorized beds, and having any capital expenditures in excess of $350,000 for the erection, building, alteration, reconstruction, modernization, improvement, extension, or demolition of or by the hospital,** is required to complete this section of the annual hospital questionnaire (items A through J). The hospital may include capital expenditures below the $350,000 threshold, if desired.

A health care system may develop a system-wide annual report that includes all hospitals in order to comply with this requirement. If the health care system chooses to report in this manner, please indicate the health care system as the reporting entity. The health care system shall use as much State-specific data as possible in this report. If State-specific data is not available, the health care system shall include national data and explain why State-specific data is not available, and what steps the system will take to provide State-specific data in future reports.

If information pertaining to the open-ended questions in this section is currently available for the hospital or health care system on-line, the hospital or health care system may provide the on-line reference for the pertinent information.

Hospital or Health Care System*	SSM Health/St. Mary's Centralia Hospital
Contact Person for this Section	Reuben Hamilton, Manager Supplier Engagement, Sustainability & Social Respon
Contact Telephone	(314) 989-2664
Contact E-Mail	Reuben.hamilton@ssmhealth.com

* If the reported information is for a Health Care System, please indicate in the space below the hospitals included in the Health Care system.

If the reporting entity cannot provide all State-specific data, explain why State-specific data is not available, and what steps will be taken to provide State-specific data in future reports:

We are unable to provide State-specific data because there were no capital expenditures lower than or in excess of $350,000 for the erection, building, alteration, reconstruction, modernization, improvement, extension or demolition of or by our hospital.

When projects come up for erection, building, alteration, reconstruction, modernization, improvement, extension or demolition of or by our hospital we will take step to identify State-specific diverse suppliers (MBE's & WBE's) in our Supplier Registration system, and work with the State of Illinois Department of Central Management Services BEP (Business Enterprise Program) Division, as well as other local MBE & WBE advocacy groups such as the Chicago MSDC and Chicago WBDC to identify suppliers.

Please provide the following information based on your hospital or health system's most recently completed fiscal year

For this section, **Qualifying capital expenditures** include "only expenditures ... for the erection, building, alteration, reconstruction, modernization, improvement, extension, or demolition of or by a hospital" [20 ILCS 3960/5.3(b)(1)].

A. What was your organization's goal for qualifying capital expenditures to the following categories of businesses?

	Percentage
Female-Owned Businesses	0.0 %
Minority-Owned Businesses	0.0 %
Veteran-Owned Businesses	0.0 %
Small Business Enterprises	0.0 %

B. What was the amount of your organization's total qualifying capital expenditures for the reporting period? **If your organization had no qualifying capital expenditures, proceed to question D.**

Total Qualifying Capital Expenditures for the Reporting Period (Dollars)	$	25,660,866.00

C. What amount of your organization's qualifying capital expenditures actually were to the following types of businesses?

	Actual Amount Expended (Dollars)	Percentage of Total (Calculated)
Female-Owned Businesses	$ 169,924.00	0.66 %
Minority-Owned Businesses	$ 132,597.00	0.52 %
Veteran-Owned Businesses	$ 149,336.00	0.58 %
Small Business Enterprises	$ 1,054,565.00	4.11 %

D. For what type or types of qualifying capital expenditures is/are your organization actively seeking supplier diversity?

We look to drive inclusion for diverse suppliers in all parts of our operations from a tier I & tier II prospective. This would include but not limited to (Construction, Electrical, General Contractor, Professional Staffing, Landscaping, Legal, Information Technology, Consulting, Accounting, Health Care, Transportation, Care Giver, Medical Supply/PPE, etc.)

CAPITAL EXPENDITURES TO FEMALE-OWNED, MINORITY-OWNED, VETERAN-OWNED AND SMALL BUSINESS ENTERPRISES

E. What is your organization's plan for alerting and encouraging enterprises of your efforts to promote supplier diversity in your planned qualifying capital expenditures?

We have established a Supplier Diversity Portal on our Corporate Supply Chain website that will allow suppliers to register themselves for consideration for upcoming opportunities. We plan to work with the SOI, CMS, & BEP Divisions as well as other local community based organizations & advocacy groups to promote upcoming opportunities and have webinars and/or live sessions on how to do business with SSM Health. In 2024 we are re-focusing our efforts to engage with diverse supplier that are in the communities we serve as part of our Anchor Action Network Community Health Initiative. The link to our registration site is (SSM Health (suppliergateway.com).

F. What challenges has your organization encountered in its efforts to promote and encourage supplier diversity?

Challenges we have encountered have been related to the impact that Covid-19 has had on our operation and the communities we serve. Other challenges have to do with suppliers having the capacity and capability to be able to provide services. Another challenge has to do with the number of available suppliers to select from, and the suppliers having the operational capital needed for their business operation.

G. What could the Illinois Health Facilities and Services Review Board do to assist your efforts to increase supplier diversity?

The IHF & SRB could assist us with helping to provide operational funding/capital to local suppliers to enable them, either thru State funded programs or Governmental funded programs, work with us to create opportunity fairs in conjunction with other corporations and local advocacy groups. Offering training course to suppliers on working with large companies and/or stabilizing their business operations.

H. What certifications does your organization recognize in the recruitment of diversely-owned vendors/suppliers?

SSM Health recognize the following types of certifications;

MBE	PWD
WBE	SDB
VBE	DBE
SDVBE	WOSB
HUBZone	ANC/Indian Tribes
HBCU	ACDBE
ED-WOSB	

CAPITAL EXPENDITURES TO FEMALE-OWNED, MINORITY-OWNED, VETERAN-OWNED AND SMALL BUSINESS ENTERPRISES

I. How should a potential vendor/supplier contact your organization (point of contact)?

A supplier interested in doing business with SSM Health can go onto our Corporate Supply Chain Website, select the Supplier Diversity link to learn more about our process and get registered. The supplier can also email us at SupplierDiversity@ssmhealth.com or contact;
Reuben Hamilton Jr
Manager Supplier Engagement/Sustainability and Social Responsibility
SSM Health – Saint Louis
12800 Corporate Hill Dr., Supply Chain-4th Floor, St. Louis, MO., 63131

J. How would a vendor/supplier enroll with your organization to be recognized as a vendor/supplier of diversity ownership?

A supplier can enroll to do business with SSM Health by going to our Corporate Supply Chain Website, select the Supplier Diversity link to learn more about our process and get registered. Here is a link to our registration portal (SSM Health (suppliergateway.com).

K. Do you have particular examples of successful recruitment of diversely-owned vendors/suppliers which could be instructive to other organizations to emulate in their efforts to recruit diversely-owned vendors/suppliers?

Some successful recruitment activities will include conducting webinars, having community vendor fairs, working with local community based organizations and diverse supplier advocacy groups, working with governmental agencies and having in house vendor fairs.