



University Hospitals

Annual Report

2022

On a Continuous Quest for Quality



MISSION

To Heal. To Teach. To Discover.



VISION

Advancing the Science of Health and the Art of Compassion.



ABOUT THE COVER

In 2022, University Hospitals received the industry’s most prestigious honor – the American Hospital Association’s Quest for Quality Prize. This honor recognizes UH’s commitment to quality and safety, care innovations, efforts to address health care disparities and community collaboration to improve health outcomes. Our **Quest for Quality**, however, is not a final destination, but a continuous journey and centers around three core principles:

- We are democratizing excellence so all our caregivers **believe** that providing high-quality care and maximizing value is everyone’s responsibility.
- We are creating a culture of **belonging** by putting structures in place to elevate and amplify patient and caregiver voices. When everyone feels free to participate, innovative practices and diverse ideas emerge that accelerate learning and improvement for all.
- We are **building** management systems that promote health equity, enhance well-being and encourage accountability.



Our goal is to be the most trusted health care partner in Northeast Ohio, and this award serves as evidence that we are moving the needle in the right direction.



American Hospital Association
Quest for Quality Prize®

From left:
Dr. Peter Pronovost, Chief Quality & Clinical Transformation Officer;
Dr. Cliff Megerian, CEO; Karen Boyd, Director of Quality Improvement;
and Michelle Hereford, RN, System Chief Nursing Executive.

4 Message from Leadership

QUEST FOR QUALITY

6 Our Quest to Build a Culture of Trust

8 Re-engineering Community Health Investment to Promote Health Equity

14 Re-designing Care Models to Enhance Systemness and Deliver Value

16 Care Teams of Tomorrow Blend Interdisciplinary Skills to Provide Comprehensive Care

19 Discovery at UH Opens Doors for Our Patients

22 UH Ventures Charts the Future of Health Care, Hundreds of Ideas at a Time

24 Research by the Numbers

26 Award-winning Program Helps Surgery Patients at UH Recover Successfully

28 Quality Initiative at UH Saves the Limbs of 75 Percent of Patients Slated for Amputation

30 A First Look at UH Ahuja Medical Center's Phase 2 Expansion

HIGHLIGHTS OF 2022

36 System at a Glance

38 Awards and Accolades

40 UH Distinguished Physicians Class

41 UH Distinguished Nurses Class

GIVING AND SUPPORT

42 A New Record for Community Support

46 2022 Endowed Positions

MANAGEMENT & LOCATIONS

48 UH Board of Directors

50 UH Corporate and Hospital Leadership

51 UH System Map

Table *of* Contents



A Message *to our* Community and Caregivers

Dear Friends,

Resilience. That's the word best describing 2022 – not just at University Hospitals, but at health systems across the country. And once again, our caregivers faced what felt sometimes like insurmountable challenges, including another COVID-19 surge, unprecedented staffing shortages and escalating inflation. At UH, our caregivers demonstrated tremendous flexibility this past year – quickly reevaluating our cost structure, accelerating our strategic plan, innovating new ways to deliver care and preparing us to be the health care leader of the future. Yet in the process, our **Quest for Quality** never wavered.

On the pages that follow, we showcase examples of how we are advancing in this quest, including building a culture of trust that cultivates a sense of belonging, changing the way we invest in the community to better promote health equity, re-designing the way we provide care so maximum value is generated for our patients, engaging our caregivers so they have a say in enhancing our efficiency, and continually investing in research and innovation so we further our 156-year legacy of pioneering medical advancement and care models for generations to come.

But it's the stories of our patients, like those illustrated in this report, that show the real heart of health care and why we do what we do. But they're only possible when people work together, compassionately, to make them happen. At University Hospitals, our local focus sets us apart. We are the hometown team – more than 32,000 caregivers are dedicated to the Northeast Ohio communities where we live and serve our patients.

And, we are further sustained by an amazing village comprising board members, volunteers, business and community partners, government stakeholders and generous donors. In fact, UH dedication inspired an extraordinary, record-breaking year of giving: \$216.9 million in community and external support, which fueled new or expanded departments, programs and services across the health system.

Thank you for trusting us to be your health care champion.

Sincerely,



ARTHUR F. ANTON
Chair, UH Board of Directors



CLIFF A. MEGERIAN, MD, FACS
Chief Executive Officer, University Hospitals
Jane and Henry Meyer Chief Executive Officer Distinguished Chair



Our Quest to Build a Culture of Trust

with
Thomas D. Snowberger

UH Chief Administrative Officer

Q: What does it mean to have a Culture of Trust?

A: At UH, it means that we have trust in one another – that we believe our co-workers are all doing the right thing to support high-quality outcomes for our patients and supporting our core values and core mission. It's a continuous journey to create an environment where caregivers' voices are heard, respected and acted upon. Another aspect of this culture is that people trust that the organization is making the best decisions, even if they may not be the most popular ones that others would choose to make. Also, it's knowing that UH offers an environment where they can be their best, and provides them with the tools that allow them to do their jobs most effectively. In addition, it means that we collaborate in a way that instills confidence. You can't require trust – it's something that is earned over time, as we evolve.

Q: What do people see and experience in an organization in which trust is paramount?

A: They see not only their co-workers but also their leaders exhibiting the core values of the organization, and they feel that they work in an environment in which they can be themselves. They get support and recognition and have the freedom to act in a way that is consistent with all that we do. It means that their contributions are valued, their efforts are recognized and rewarded, and they feel safe and free from all forms of hostility. We want our caregivers to have a sense of belonging, so they know when they come to work that they are in a place where they are welcomed and recognized, and where they know they can pursue career advancement if they wish. It also is ensuring that people get the information they need to understand the "why" of an organization and how each of us contributes – that further advances the culture of trust.

“Trust is a hallmark at UH that is deeply rooted.
We build on it as our foundation.”

– Tom Snowberger



Q: How important is transparency?

A: You can't have trust without transparency. That means sharing more than just the good news with caregivers. It's a difficult time in health care, and we've had to make tough decisions to ensure the overall health of UH. But avoiding the sharing of difficult news is not how you build trust – people don't want to be “sold” something they know isn't true. You have to have honesty in order to have trust. The culture of trust starts from the top of the organization, and includes leadership across the enterprise, not just a select few. Leaders have to demonstrate trust in order to build trust within their teams.

Q: Can you tell us more about that?

A: We have a “Speak Up” culture at UH, and it is the role of all our leaders to create an environment where there is two-way dialogue. We need to continue to promote that speak-up culture throughout UH. Our leaders have to create an environment where there is a sense of belonging and everyone's opinions and perspectives matter. Celina Cunanan was recently appointed our new Chief Diversity, Equity & Belonging Officer, and she will help our leaders recognize the importance of all three aspects as part of her role, as well as provide the necessary tools we need through her consultative role. She will work collaboratively with all of us, discerning possible blind spots. Belonging takes many forms, such as embracing the differences that each person brings. That is another part of the culture of trust – that the organization sees each caregiver as an individual, who brings unique perspectives. When an organization works to truly include all employees and make them feel welcome, it creates the opportunity for employees to bring their authentic selves to work each day.

Q: What are some other efforts and endeavors to enhance the sense of belonging?

A: Just recently we had a prize competition in which every caregiver could participate and offer their ideas on how we could reduce costs, improve our processes or enhance efficiency. Additionally, our UH Ventures team manages a platform that regularly solicits ideas for the most promising innovations and medical device concepts that are at the earliest stages. People from all corners of the system contribute, and the winners can see their submissions become tangible tools and methods. We also recently kicked off our Employee Resource Groups, also called ERGs, which are small groups designed to empower caregivers and further promote engagement. ERGs provide our caregivers with opportunities to connect, develop leadership skills, build strong ties with our communities and expand views on diversity. They are just one more way we are enacting changes that solidify UH as a great place to work.



Re-engineering Community Health Investment to Promote Health Equity

with

Heidi L. Gartland, MHA, FACHE, CDM

UH Chief Government & Community Relations Officer

& Celina C. Cunanan, MSN, APRN-CNM

UH Chief Diversity, Equity & Belonging Officer

Q: Heidi, how has University Hospitals' approach to community health investment evolved in recent years, and how are decisions made about where to invest?

A: We are more intentional than ever about how we engage and partner with our communities to invest in people's health and wellness. We call this whole-person care in the neighborhoods of the communities we serve.

Good health begins where we live, learn, work and play. Stable housing, quality schools, access to good jobs and neighborhood safety are all important influences, as is culturally competent health care.

We engage community advisory groups, we use focus groups, and we collaborate with community agencies and the local health departments to learn what the community wants and needs. We just received the most recent results from the Community Health Needs Assessments, which are done every three years.

Through this community-connected approach and our collaboration with our public health departments, we collectively identify the most pressing health and social needs of our communities and traditionally disinvested populations. We seek to achieve health equity by addressing those needs and the social determinants of health, so that everyone can live the healthiest life possible.

Q: Celina, equity is a driving force at UH and a pillar in which you lead for the organization. How do you see UH's community health investment as equity work?

A: As the Chief Diversity, Equity & Belonging Officer, I lead and champion a culture of inclusion and belonging within our organization for all of our employees across the system, while also addressing health equity in the diverse communities in our region that we serve.

Our work in health equity is deeply tied to influencing our organization and implementing strategies to address social determinants of health, which are the main drivers of inequitable health outcomes. It also includes how we as an organization can invest in traditionally disinvested communities and convene partner organizations who are also focused on effecting change.

Q: Heidi & Celina, University Hospitals' efforts are focused outside the walls of our health system, right?

A: Yes, our strategy focuses on those we care for, live with, employ and insure. But it goes even deeper than that. Typically, when health systems have defined their community benefit, they rely on the IRS guidelines to measure impact. And while that criteria is certainly admirable, our intent is to go deeper – what we like to call Community Benefit 2.0, aka our **Community Health Engagement & Investment** strategy and operating model.

To ensure we remain focused and maximize our potential for impact, we have established four priority areas: **Well-being**; **Maternal & Child Health**; **Behavioral Health** and **Economic Opportunity**.

With this framework, we aim to measure our impact by establishing tangible community health and health equity goals, monitoring our adherence and holding ourselves accountable for achievement through public reporting of results. We also plan

to utilize a business planning management structure that will apply consistent decision-making criteria for new programming across our system while also ensuring sufficient capital and leadership resources for optimization and growth of the initiatives.

Q: Heidi & Celina, what are some of the initiatives University Hospitals has already implemented in the four priority areas related to the Community Health Engagement & Investment strategy?

A: We have already established a number of initiatives for which we are very proud, but we know we can and must do more. Examples of our success thus far include:

Well-being

This effort involves our Mobile Clinical Research Unit that ensures diverse populations are represented in clinical trials and research studies. It also includes those programs aimed at improving food security, such as our Food for Life Markets and school-based summer lunch programs. Food insecurity is a major issue across the UH service area with many people living in 'food deserts,' meaning they do not have access to fresh and healthy produce, meat, fish and dairy, and other nutritious options. In 2022, we opened our fourth Food for Life Market at UH Conneaut Medical Center. In fact, since opening our first such market in 2018, we have served more than 5,000 people.

Additionally, in 2022 we made progress on the development of three Community Wellness Centers, which will open in 2023 in the communities of Bedford, Richmond and Glenville. The UH Community Wellness Center in Glenville will open at The Davis, which is an affordable housing complex that will contain our fifth UH Food for Life Market, a teaching kitchen, as well as other programs for residents, including community health workers, Centering Pregnancy, health education and workforce development



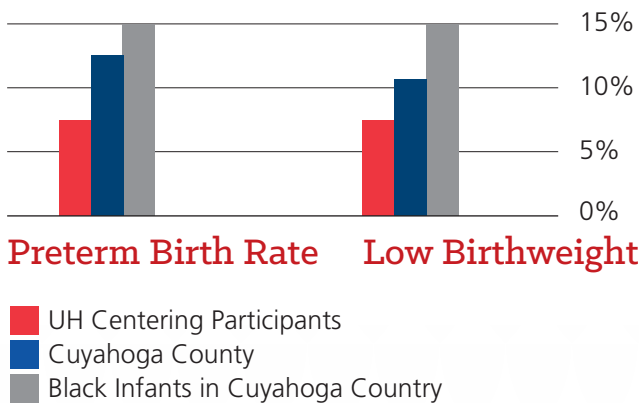
Re-engineering Community Health Investment to Promote Health Equity

opportunities. With this initiative, we are partnering with the NRP Group, Cleveland Metropolitan Housing Authority, Cleveland Metropolitan School District and the city of Cleveland.

In fact, all of these Community Wellness Centers will provide resources such as free health screenings and health education classes, as well as programs aimed at workforce development, reducing food insecurity and improving maternal and child health.

Maternal & Child Health

The Centering Pregnancy Program at UH Rainbow Babies & Children's Ahuja Center for Women & Children is an evidence-based group prenatal care program aimed at addressing high infant mortality rates. In this program, preterm births and low birthweights are drastically lower among Centering Pregnancy patients when compared to county rates. In 2022, the program expanded to include special topics in diabetes, breastfeeding/lactation and mental health.



Behavioral Health

Our UH Behavioral Health Hub in Westlake is a 'one-stop' resource for individuals with complex conditions. Additionally, our Rainbow Interdisciplinary Substance Exposure (RISE) program provides team-based care for mothers with current or previous history of substance misuse or addiction, and also offers care for their children.

Economic Opportunity

This effort comprises our signature workforce development programs. They are designed to help people reach their full career potential and aspirations, and increase their earning power while also helping UH attain and retain talent.

For example, the Step Up to UH program was created to teach a variety of job-readiness skills. It's aimed at people who live in Greater Cleveland and make less than \$15 per hour. Career Coaching and Bridge to Your Future help employees get accepted into college or technical training programs so that they can attain their career goals.

And our UH Health Scholars program is an opportunity for minoritized students in grades 8-12 to be introduced to the health sciences and health care professions, including medicine, nursing, physical/speech/occupational therapy, mental/behavioral health and medical technology. We have an imperative to diversify our workplaces to reflect the diversity of the communities we serve and live in. UH Health Scholars have the opportunity for increased exposure to health professions and mentors to increase the amount of diversity represented in health care.

We want people to have access to all kinds of jobs in health care and create more connections for our community. We believe the talent in the community should be reflected and fostered at UH. In 2022, we hired or promoted nearly 300 people via our workforce development programs.

UH Focus on Community Provides an Employment Pipeline

Lisa Pointer had always wanted to work at UH, but her applications were unsuccessful. Then a friend told her about Towards Employment, a job-readiness training program that UH partners with to help recruit new talent, and that proved fruitful.

"I attended classes they offered, including one with 'mock' patient interactions, which was super helpful, and there was career coaching too," explained Lisa. "Then, hearing the recruiters from UH, I knew I still wanted to work there."

Initially, Lisa was interested in a patient care nurse assistant position, but a UH recruiter noticed that previous job experience made her a good fit for another role as a licensed community health worker.

"Knowing that someone cared enough to look at me as an individual and suggest that meant so much," Lisa noted. She started at a primary care practice, and today she is based at the Emergency Department at UH Cleveland Medical Center. Her two-year UH anniversary is this summer.

"I talk to patients about many aspects of their lives, including social determinants of health," said Lisa of her role. "By helping them address those, we give patients some of their power back."



UH Health Scholars Learn to See a Future in Medicine

Rohini Kumar will always remember June 21, 2016, when Clevelanders flooded the streets to honor the Cavs for winning the NBA Championship.

She was in an operating room at UH MacDonald Women's Hospital, where she got to observe both a hysterectomy and a C-section. Rohini was 13, and a UH Health Scholar. The summer program is designed for the mentorship of minoritized students in Cleveland and Northeast Ohio who are interested in a medical career.

Today, Rohini is a Shaker Heights High School graduate and a sophomore at The Ohio State University, majoring in biology/pre-med.

As Health Scholars, students spend time on such activities as shadowing physicians on their rounds, creating community-based health projects, organizing debates on issues related to bioethics and doing dissections after school.

Rohini plans to become a doctor in Emergency Medicine. She and the other scholars were exposed to many different kinds of careers in health care.

"Also, it was not just learning about medicine, but about deeper issues, such as why does some patients' mistrust keep them from seeing a doctor?" she said. "How does race, gender and socioeconomic status affect that?"

"And how will we, as future physicians, deal with implicit bias? Learning about all of this really expanded my view of the medical field."



Making a Difference Beyond Our Hospitals' Walls

From left: Celina Cunanan, MSN, APRN-CNM, Chief Diversity, Equity & Belonging Officer; LaVonne Pulliam, JD, Chief Compliance Officer; and Stathis Antoniadis, MPH, FABC, President, UH Cleveland Medical Center

Leveraging the power of UH's 32,000 caregivers to make a difference in our communities through volunteerism, UH created the UH Caregiver Community Volunteer Time Off (VTO) program. The VTO program, a key aspect of our Community Health Investment Strategy, provides UH caregivers paid time off to volunteer at UH-approved nonprofit partner organizations. Since its launch in early 2022, UH caregivers have provided more than 1,000 hours of community service, including the UH Executive Leadership Team who volunteered at Providence House.

This kind of service allows UH caregivers to make an even greater contribution to the health and well-being of the communities we serve, while learning first-hand about the neighborhoods and needs of their residents. It also further demonstrates the unique, compassionate culture at UH, where the 'hometown team' cares for the community outside its system walls.





UH Food for Life Markets Help Patients Create and Maintain Healthy Nutrition Habits

Nevada Sellers-Moton was at her doctor's office in Ravenna in early 2021 when she found out about the new Food for Life Market that had opened in Portage County.

"I read about the mission and what it was about, and I saw that we qualified," said Sellers-Moton, meaning that she and her family were considered food insecure. She also has type 2 diabetes and wanted to make more healthy meals from scratch.

"I thought, 'Wow, I should try this,'" she said.

Finding fresh and healthy fare hadn't been easy or affordable, since she has six children between the ages of four and 21 for whom she's cooking.

Now, visiting the market once a month, she buys a variety of fresh fruits and vegetables, as well as whole grains, dairy and some meat products. She especially loves fresh beets, cabbage and sweet potatoes.

"I also appreciate that they give you recipes, so if I haven't cooked a particular food before, the recipe will show me how. I've been able to save a lot of money by cooking this way."



Re-designing Care Models to Enhance Systemness & Deliver Value

with

Paul R. Hinchey, MD, MBA

UH Chief Operating Officer

Q: What are some of the challenges the health care industry is facing today?

A: Historically, we've always faced hurdles, yet this time it feels much more disruptive due to the urgency for solutions. The pandemic significantly stressed our global supply chain and workforce, highlighting structural vulnerabilities. As patients begin to seek care after pandemic-fueled delays, we have to meet the demand with increasingly scarce resources. Additionally, health care costs continue to rise while government payors and private insurers are looking for ways to reduce expenses, which puts significant pressure on reimbursement rates paid to health care providers. We are also seeing an increase in competition from non-traditional participants in care delivery (e.g. CVS, Amazon) looking for opportunities to broaden their reach into the provider space. This confluence of events necessitates re-imagining how we deliver care at a lower cost, while also ensuring UH continues to deliver high-quality care in ways that meet health care consumers changing needs and preferences.

Q: How will re-designing care models address these challenges, while also advancing "systemness" and enhancing value for our patients?

A: We have to equalize the demand-supply imbalance between those needing care and our capacity to deliver it. Our caregivers are the foundation of the care we provide and there are too few people entering health care. We are looking to our future and creating entry-level opportunities for young people to experience the satisfaction of a career dedicated to caring for others so that they go on to be our caregivers of the future. Those efforts take time, so we will continue to seek new ways to support our current team while enhancing our caregiver pipeline to encourage people to experience the amazing caring culture that is UH. We are finding ways to reduce unnecessary work for our caregivers with a focus on top-of-license activity, eliminating activities that do not improve care and exploring new technologies to help reduce work load. There are also opportunities to address unnecessary demand. For example, we can reduce readmission rates through better population health management; we can decrease length of stay through improvements in discharge planning and increase utilization of our Hospital@Home program to reduce the need for hospital beds. We are also enhancing use of alternative sites of care to provide services at a lower cost for our patients and payors. In addition, we are increasing efficiency by evaluating our footprint against market demand, creating specialized hubs of care. This enables us to maintain consistent care delivery and access while increasing

the convenience for patients. Like our Centers of Excellence (COE), volume centers in our hospitals will be created to concentrate the delivery of some procedures. This not only improves efficiency and lowers cost, but we know quality improves when volumes for those services are concentrated in a location and sites specialize in a particular service (e.g. cardiovascular or cancer care).

Q: Can you give an example of how UH has advanced value-based care?

A: Our COE model is a perfect example. These COEs feature a multidisciplinary team of experts dedicated to a particular condition and are laser-focused on creating a great patient experience, controlling costs and producing better outcomes – all increasingly attractive to employers and their employees. The COE uses best practices that include a wide swath of care options, which allows many patients to achieve optimal outcomes with out the need for surgery. In fact, 30 percent of patients referred for joint replacement surgery and 50 percent of patients referred for spine surgery at our COEs were able to avoid unnecessary surgery. In addition, among patients who have joint replacement, the length of stay in our COE was 1.08 days, compared with 3.15 days in an Ohio peer group. Readmission rates also showed significant differences, with a readmission rate of 0.65 percent in our COE compared with 3.67 percent in an Ohio peer group. Statistics such as these drive significant cost savings for the system but, importantly, represent a better outcome and experience for our patients.

Q: What is UH doing to address the accelerating shift to the ambulatory market? What role will acute care settings play in the future?

A: UH continues to increase its utilization of our existing ambulatory surgery sites while expanding our offerings. In 2022, we broke ground on the UH Amherst health campus, including the state-of-the-art UH Amherst Beaver Creek Surgery Center, which is a joint venture with ValueHealth and key local physicians. Our quaternary and tertiary care settings will continue to care for our sickest patients, while also advancing medical innovation through clinical research and revolutionary care models such as those recently launched at our UH Ahuja Medical Center campus. (see page 30)



UH's Hospital@Home Program Continues to Expand

What started as a solution to care for COVID-19 patients safely in their home, expanded significantly in 2022 with the number of patients using the program nearly tripling from last year. Different from “home care,” Hospital@Home follows these patients via a home monitoring device, where registered nurses remotely watch their vital signs on a 24/7 basis. Should a patient’s numbers deteriorate, they are immediately contacted, and if necessary, emergency services are dispatched. In fact, a clinical provider visits the patient in their home at least twice per day. This year, UH added the care of patients with cardiology and nephrology concerns to the program and also cared for patients with congestive heart failure, pneumonia, cellulitis and severe urinary tract infections. We also now provide care to some patients recovering from surgery. “We continue to provide a unique patient-centered approach to care delivery, as we allow our patients to heal and recover in their home environment,” said Brooke Nutter, Vice President, Integrated Delivery Solutions.

“Our patients constantly express their gratitude for the program, and our goal is to continue expanding to other service lines throughout the system.”

– Brooke Nutter





Care Teams of Tomorrow Blend Interdisciplinary Skills to Provide Comprehensive Care

with

Michelle D. Hereford, MSHA, RN, FACHE

UH System Chief Nursing Executive, Ethel Morikis Endowed Chair in Nursing Leadership

Q: Why is UH creating a new way to deliver care to patients through the Care Teams of Tomorrow?

A: There is a crucial need to do this now. The pandemic was one of many factors that led to staffing shortages here and in hospitals around the country. Retaining and recruiting highly skilled nurses remains a top priority at UH, but that will take time.

So we have to change how we do things, and I think this will be one of the most important health care initiatives in decades.

Q: This effort began very differently than other strategies at UH. Can you describe why?

A: In health care, we frequently discuss ways to become more efficient while providing safe and high-quality care for a superb patient experience. Naturally we asked, "What will we do in nursing?" My response was that it needs to not just be nursing, but inclusive of the entire health care team. Instead of quickly embarking on a care delivery re-design from the shelf, we stepped back to first engage with our caregivers, and we asked them for their input because they have the expertise.

In 2022, we started this process with a survey to better understand the needs of our caregivers. They overwhelmingly shared that there was a need to address the workload. We then held two half-day sessions in which we brought together teams from across our facilities and the organization. These sessions were attended and led by various disciplines to include nurses, pharmacists, rehab professionals, radiology technologists, environmental, and food and nutrition services, among many others. Because we know that care delivery is a team sport and all disciplines play a role in patient outcomes, we had to think differently.

We asked: What work could or should be done by someone else; what are you not doing that you should; how can we change to be more efficient and innovative?

Many fresh ideas resulted from our brainstorming sessions. Then the team ultimately developed a more efficient way to engage with patients. There are tasks that today's nurses might do that can easily be done by another caregiver: helping patients with mobility, for example. That provides opportunities for nurses to attend to other needed care that only they can do. This is a perfect example of just one way we have democratized excellence at UH.

Q: What will this all look like and how will it work?

A: The models we created were for two areas, med-surg and critical care, which we piloted beginning last June at UH Cleveland, UH Ahuja and UH Parma medical centers. The idea was to start small, pilot it, improve it, perfect it, then roll it out to other locations across the system.

Instead of the traditional duties of nurses and others on the care team, we have a group of caregivers who each have a specialty – so every member of the team will be working at the top of their license.

We have some entirely new or redesigned roles and duties on that team:



The most important part of this model is that the patient is kept at the center of what everyone on the team does.

Here's an example of efficiency gained through this new model: sometimes a patient's discharge can be delayed because a medication reconciliation is needed, and this process typically involves multiple people and departments. By having a unit pharmacist, who has worked with the patient during their stay, the reconciliation takes place by one person right in the unit, significantly improving the discharge process.

Q: How does the newly designed care team benefit from these changes?

A: We want this to work well for members of the care team. We want to see them thrive by delivering care to the full extent of their training, certification and experience. As team members, they can support each other to serve patients and accomplish tasks in a timely way. We will leverage technology and tools to create workflow efficiencies (such as by having a virtual admission nurse) and reduce redundancies across the care team.

We also expect that this will resolve any existing bottlenecks that impact efficiency, which benefits the patient, the care team and everyone on the unit.



Caregivers Find New Roles in the Care Team of Tomorrow – and Efficiency as a Team

It's been almost a year since Nurse Manager Matt Eckinger's unit – Lerner Tower 7 UH Harrington Heart & Vascular Institute at UH Cleveland Medical Center – began participating in the pilot for the UH Care Team of Tomorrow.

And he and his team have been seeing the benefits of how it works at the patient's bedside and sharing those details – as well as other insights – with nursing leaders.

“For example, we've already seen the difference that a mobility aide and a hygiene expert make for the patient,” said Matt. “Patients enjoy being washed up, and it's such a basic need – now it's not something we just have to try to fit in to our workflow, but is done every day.

“Having another person there who is a mobility aide, to get the patient up and walking, makes them feel like they are getting closer to going home. And the patient experience ambassador has dedicated time to sit and talk with patients, and the patients really appreciate that.”

Matt says many of the people on his staff have been enjoying their new roles – some even to their surprise. “They like that it's given them some variety in their work. Also, before we had these roles, it really was up to the nurse and the patient care nurse assistant to try and do all these things, and some days that was a challenge.

“By having people dedicated to these new roles, it helps assure that essential components of patient care are completed for our patients.”



with
Daniel I. Simon, MD
*President, Academic & External Affairs and Chief Scientific Officer;
Ernie and Patti Novak Distinguished Chair in Health Care Leadership*

Discovery at UH Opens Doors for Our Patients

Q: University Hospitals is a national leader in research, where discoveries are not only made, but new therapies that have taken years to develop are finally tested in patients. To what do you attribute this success?

A: The bottom line is that we have a terrific, aggressive group of researchers who are very interested in bringing new drugs, devices and cell-based therapies to our patients. Our physician-scientists and PhD scientists are relentlessly focused on taking discoveries from the bench to the bedside. Their goal is simple — to improve patient care and clinical outcomes. We are also innovators in how we conduct and enroll patients in clinical trials. For instance, we have one of only two mobile research units in the U.S. that travels into urban and rural communities, helping us to bring hope to patients and their families who in the past had difficulty participating in a clinical study. Take, for example, the amazing work of Grace McComsey, MD, Vice President of the UH Clinical Research Center and the Rainbow Babies & Children's Foundation John Kennell Chair of Excellence in Pediatrics, among other roles. She leads the nation in recruiting patients and, particularly under-represented minoritized patients, to participate in the large federally funded RECOVER study on long COVID. It's a testament to the power of Dr. McComsey and the ingenuity of her Clinical Research Center team that we were able to lead enrollment despite the difficulties of conducting research during the pandemic.

Q: How will the recently expanded Wesley Center for Immunotherapy at UH Seidman Cancer Center make a measurable difference for our cancer patients?

A: The Wesley Center for Immunotherapy is a new state-of-the-art facility that will enhance our ability to produce cell-based therapies for cancer and non-cancer indications. It's expanding the types of cancers that we treat. Cell-based therapies like CAR T have typically been used to treat patients with lymphoma and leukemia. We now have a new protocol for treating multiple myeloma that's attracting patients from all over the U.S. The Wesley Center is also aggressively moving forward with solid tumor CAR T-cell applications for head and neck, prostate, pancreas and breast cancer. Importantly, the Wesley Center for Immunotherapy allows us to continue to accelerate new therapies for non-cancer indications such as osteoarthritis and inflammatory bowel disease.



Discovery at UH Opens Doors for Our Patients

Q: UH has unique collaborative relationships with other research institutions around the world, such as our relationship with the University of Oxford. How does this lead to better outcomes for our patients?

A: We live in a global world, and many medical technologies are developed and approved for clinical use in other countries before the U.S. UH has made a commitment to be on the leading edge of international research collaborations to help develop and study new drugs and devices wherever they may be. One great example of this comes from my own specialty of interventional cardiology. UH's global reach and the research relationships we had in Portugal and Sicily allowed our UH Harrington Heart & Vascular team to be trained on emerging minimally invasive technology for catheter-based aortic valve replacement in the awake and talking patient. By training in Europe, we were able to play a leading role in clinical trials here in the U.S. In fact, we used those devices here at UH for four years before they were ever approved by the FDA, to the great benefit of our patients in Northeast Ohio and beyond.

Another example includes our effort with the Oxford-Harrington Rare Disease Centre through the Harrington Discovery Institute. This affiliation gives us a global collaboration with the number one ranked research university in the world seven years in a row – the institution responsible for developing and licensing the technology that vaccinated 3.5 billion patients globally against COVID-19. Working with institutions like this is transformative for UH, especially in new gene therapy and base correction approaches for rare diseases in children and adults. There's no question that the versatility of our research relationships – the wide number, the varying locations from Asia to the Middle East to Europe to South America – provide us with access to the best for our patients in our community. Everybody benefits.

Expanded Research Facility at UH Also Expands Options for Tallmadge Man with Aggressive Cancer

Immunotherapy is a big word, but it's a pretty simple concept. Doctors and scientists use advanced techniques to harness the powerful cells of an individual's immune system, then re-engineer and re-deploy them back to the patient to fight disease, creating a living treatment.

UH has been involved in this groundbreaking work for decades. But with the recent expansion of the Wesley Center for Immunotherapy at UH Seidman Cancer Center, completed in 2022, more patients than ever can benefit.

Already, this investment in science is paying off: UH Seidman researchers, for example, have shown they can manufacture a specific type of immunotherapy cell called CAR T in just 24 hours – an improvement over the team's previous benchmark of eight days and commercial suppliers that take up to four to six weeks.

Jack Boyle is one of many patients benefitting from the Wesley Center. He came to UH Seidman Cancer Center for a second opinion on an aggressive cancer. After a few different rounds of chemotherapy and a stem cell transplant, Jack's cancer returned in early 2022. It was clear that the tiny fighters of CAR T-cell therapy were his best option.

Today, Jack is beating the odds.

"Estimated survival is under one year for patients in Jack's circumstances," said his UH Seidman oncologist Molly Gallogly, MD, PhD. "CAR T treatment has given Jack the chance of a longer-than-average progression-free survival after his post-transplant relapse. He is almost back to his clinical baseline with no evidence of cancer recurrence six months after CAR T-cell therapy."



"Cancer treatments are growing by leaps and bounds. CAR T-cell treatment is like **a miracle**, and it was a relief to be eligible for this option at UH." – Jack Boyle

UH Ventures Charts the Future of Health Care, Hundreds of Ideas at a Time

UH Ventures identifies, develops and deploys the most disruptive and creative innovations that originate from within University Hospitals as well as organizations across the globe. Built to draw on UH's historic and present strengths and the ingenuity of its caregivers, UH Ventures pursues the innovative opportunities that drive definitive, sustainable and scalable value to the way care is delivered.

HIGHLIGHTS FROM 2022:



23 licensing/options agreements signed with companies to use UH caregiver IP



6 products piloted within the system to test for clinical viability/effectiveness



678 ideas crowdsourced from UH caregivers for innovation or process efficiency



2 new system innovation capabilities developed to advance artificial intelligence (AI) and men's health



2 awards by international professional design associations recognizing UH innovation



14 early concept/device projects funded through three UH start-up accelerators



6 consulting relationships formed with outside entities to co-create or advance medical/surgical product development



64 outreach events held, including internal and external conferences, speaking engagements and podcasts



6 investments in early-stage companies

DEMOCRATIZING EXCELLENCE IN ACTION: "Rainbow Runner" Expands the World for Kids on Ventilators

Babies born today at less than 25 weeks are beating the odds and surviving, but they face significant challenges. For one, they often face two years or more with a tracheostomy and a ventilator that enables them to breathe, which typically confines them to a hospital bed and robs them of the mobility so important to healthy development.

Looking for a way to improve the lives of these tiny patients, a team of therapists from UH Rainbow Babies & Children's is hard at work on a solution. Supported by funding from Michael and Ellen Feuer via the Feuer Accelerator and UH Ventures, these clinicians are developing a mobile cart that secures the ventilator and tubing to the child, creating the mobility so necessary to the child's growth and development.

The ventilator accessory in development, dubbed "Rainbow Runner," would be unique in the pediatric marketplace. The UH therapists behind the idea are currently working with guidance from UH Ventures on a second-generation prototype and securing expert advice to maximize ventilator safety and optimize the design.

There is much work ahead. But team member Anna Maus, OTR/L, Supervisor in Pediatric Rehabilitation, Physical Therapy and Occupational Therapy at UH Rainbow, says they're excited about the potential Rainbow Runner creates for their young patients – and for others like them across the U.S.

"The more that we can facilitate those typical experiences, the better our patients' outcomes are going to be," she said. "There are so many kids all across the country that if they got this,

the benefit would just be amazing for their development."



From left: Rainbow Runner team:
Susan Dewhirst, PT;
Michelle Drabish, BS, RRT-NPS;
Molly Wiberg, OTR/L, CNT, CLC, NTMTC;
Anna Maus, OTR/L

Research by the Numbers

A robust commitment to research has always been part of the identity of University Hospitals. It's the "discover" in our three-part mission: To Heal. To Teach. To Discover. Our patients and community count on us to develop and test the next generation of drugs, medical devices and cell-based therapies, providing them with hope where there once was none.

Our approach to discovery at UH includes the full spectrum of research, from basic and translational studies to clinical research and studies of health outcomes or implementation science. At the same time, UH researchers engage and collaborate with multiple external partners – a process that increases both the quality and impact of their important work.

RESEARCH HIGHLIGHTS FOR 2022:



3,400+ Active Clinical Research Studies



1,286 Peer Reviewed Articles



\$177.2M Research Funding



1,114 Faculty



695 Faculty Engaged in Research



106 Invention Disclosures¹

¹Includes efforts pursued in collaboration with Case Western Reserve University

RESEARCH SPOTLIGHT:

United States Flu Vaccine Effectiveness Network

- **\$12.5M** grant awarded by Centers for Disease Control and Prevention, with the potential for another \$8M
- One of seven sites nationwide
- Local study branch is **CORVETS** – Cleveland Ohio Respiratory viruses Vaccines Effectiveness across Traditional risk factors and Social determinants of health
- Aim is providing accurate estimates of the effectiveness of flu, COVID-19 and other vaccines against respiratory virus-associated illness
- Researchers will also investigate the body's response to the infection or the vaccine to better understand how to lessen infection risk
- Study team includes investigators from UH, Louis Stokes Cleveland Department of Veterans Affairs Medical Center and Case Western Reserve University

Harrington Discovery Institute at University Hospitals Accelerates Promising Discoveries into Medicines

Now in its 10th year, Harrington Discovery Institute supports the most talented physicians and scientists whose research is close to making a difference for some of the world's most challenging health problems. It has a singular mission to create new medicines.

Harrington Discovery Institute's model has expanded to include all scientists with discoveries in unmet medical needs, with special focus on brain health, rare diseases, COVID-19 and major diseases affecting society.

HARRINGTON DISCOVERY INSTITUTE HIGHLIGHTS:



Advanced **165**
medicines in the making



Supported **65**
academic medical centers



Enabled **13**
licenses to pharma



Awarded **15** Scholar grants
to top researchers both
nationally and internationally



Facilitated **18**
medicines being
tested in clinical trials



Launched **31** start-ups created
through partnerships with venture
capital and other investors



Together with the Oxford-Harrington Rare Disease Centre, named its first Scholar, who is advancing a novel treatment for Duchenne Muscular Dystrophy: **Angela Russell, DPhil**, Professor of Medicinal Chemistry at the University of Oxford.

Award-winning Program Helps Surgery Patients at UH Recover Successfully

There's a science to creating the best recovery after surgery – and University Hospitals is at the forefront of it. Perhaps best of all, this novel approach to improving the quality of care also empowers patients to take ownership of their own health.

Here's how it works: Surgery patients at UH follow what's known as the **Enhanced Recovery After Surgery (ERAS)** protocol. The protocol focuses on aiding patients so that they are physically prepared for their surgical journey. Specific elements can include high-protein nutritional drinks for the days pre- and post-surgery, carbohydrate-loading drinks for the night before and morning of surgery, and exercise instructions developed by UH physical therapists.

No matter what their individual elements might be, the pre-op preparation gets patients engaged. Clinicians using ERAS have noted that patients seem to be less anxious about an upcoming procedure because they know exactly what will happen, and they are participating in the process before and after the surgery.

Other crucial elements of the ERAS protocol fall more to the caregiving team – minimizing the use of narcotic pain relievers and getting the patient up and walking as soon as possible after surgery. Patient education post-surgery is also key. ERAS patients receive a recovery booklet, "Passport to Home," which helps them set goals for post-op pain management, nutrition and physical activities.

So is the ERAS protocol at UH actually enhancing recovery after surgery as advertised? The answer is unquestionably "yes." Results show that patients following the ERAS protocol have shorter hospital stays, use fewer opioids, have fewer post-surgical infections and have lower costs. **In fact, the ERAS protocol at UH has resulted in a 63 percent reduction in narcotics prescribed at discharge.**

Others are taking notice of these remarkable results. The ERAS Society recently recognized UH's success with this approach, certifying the UH colorectal surgery service line as a Qualified Center for ERAS – one of fewer than 10 such centers in the United States. The UH experience with ERAS was also an important factor in UH being honored with the American Hospital Association's Quest for Quality Prize in 2022.

Heather McFarland, DO, FASA, System Director of the Anesthesia Value Network and Vice Chair of Clinical Operations, leads the ERAS project at UH, along with Soozan Abouhassan, MD, a critical care anesthesiologist; Ronald Charles, MD, a colorectal surgeon; Naomi Compton, BSN, RN, ERAS Nurse Coordinator; and Maggie Canitia, ERAS Operations Data Analyst. She says the team is motivated by finding new ways to improve outcomes for patients.

"The foundation of ERAS is a paradigm shift in health care," Dr. McFarland said. "It breaks down silos and takes care of patients across the continuum in the best way possible."



“We’re really optimizing outcomes for our patients. We want to get them back to their jobs, get them back to their families as safely as we can.”

– Heather McFarland, DO, FASA



Saving Limbs, Saving Lives

Quality Initiative at UH Saves the Limbs of 75% of Patients Slated for Amputation

High-quality health care means exhausting every option to get the best outcome for the patient. At UH, one important way this goal comes to life is through an innovative panel that treats some of the highest-stakes patients – those scheduled for major amputation of a limb.

The Limb Salvage Advisory Council (LSAC) in the UH Harrington Heart & Vascular Institute engages diverse medical experts from across UH to thoroughly review and discuss each patient slated for amputation – quickly and in real-time. Vascular surgeons, endovascular and vascular medicine specialists, podiatrists and wound care experts all participate. The motivation is clear: Every patient deserves at least a second or third attempt at restoring blood flow to the arteries to save the leg. Eventually, the LSAC reaches one of two conclusions: the patient’s limb can be salvaged and the team creates a plan to do so, or the panel recommends the originally scheduled amputation. The LSAC model at UH is unique in the U.S.

Results published in 2022 show that this innovative approach to quality is working. A study published in *Circulation: Cardiovascular Interventions* reveals that the LSAC at UH saved the limbs of about 75 percent of the people they worked on.

Maurice Edwards is a case in point. Plagued by poor circulation in his right leg, he knew he might lose his leg someday to amputation. He lived with moderate to severe pain. But after a day when his foot was cold to the touch through his sock, he found himself under the care of the LSAC and its leader, Mehdi Shishehbor, DO, MPH, PhD, President of UH Harrington Heart & Vascular Institute, and Angela and James Hambrick Chair in Innovation.

“Maurice’s condition was very poor,” Dr. Shishehbor said. “His leg was dying and he was, in fact, scheduled for an amputation. But we created LSAC at UH to help patients like Maurice. Our team worked together to create a plan to save his leg, which was successful.”

“I’m okay now,” Maurice said. “I’m used to my legs being numb sometimes and aching sometimes, but they’re still warm and have blood flowing. I thank God and I thank Dr. Shishehbor.”

“It’s a great honor to help patients like Maurice,” Dr. Shishehbor added.

“Everyone deserves a dedicated team of clinicians working in their best interest, and we’re proud to provide that here at UH Harrington Heart & Vascular Institute. We have made a commitment to save every limb that we can.”

– Mehdi Shishehbor, DO, MPH, PhD

A First Look at UH Ahuja Medical Center's Phase 2 Expansion

Intended as a facility that would grow and evolve with the community, UH Ahuja Medical Center charged forward with a \$236 million expansion that almost doubles the size of the medical center's footprint while revolutionizing the way we deliver care.

"As an anchor institution on Cleveland's east side, UH Ahuja is evolving to meet the needs of our residents," said UH Ahuja's Chief Operating Officer Percival Kane, Jr., MHA. Opened to the public in June 2023, UH Ahuja Phase 2 brings world-class care closer to home for residents on the east side, while at the same time allowing UH caregivers to provide an enhanced patient experience.



OFFERINGS IN THIS 300,000 SQUARE FOOT EXPANSION INCLUDE:

16
SPORTS REHAB
EXAM ROOMS

16 SPORTS
CLINIC ROOMS

18
OPERATING
ROOMS

43
EMERGENCY
ROOM BEDS

9
LABOR/DELIVERY
ROOMS

12
SPECIAL CARE
NEONATAL ROOMS

23
BED
SHORT-STAY
UNIT

500+
NEW JOBS
CREATED

“We are reimagining the way health care is delivered, both in-person and through technology, and are excited to introduce a new level of customer service that will support and make it easy for people to be and stay healthy.” – Percival Kane, Jr., MHA

UH Drusinsky Sports Medicine Institute

Serving athletes from peewee to pro, the UH Drusinsky Sports Medicine Institute is a local and national leader in delivering superior, comprehensive sports medicine services. Featuring one of the most advanced sports performance centers in the nation – including a 45-yard football training field, an outpatient rehabilitation space, a sports walk-in clinic and dedicated high-tech imaging – the multi-story complex is a valuable resource for sports performance patients and athletes, including from more than 70 area high schools and colleges. Additionally, the UH Drusinsky Sports Medicine Institute provides full-team physician coverage for the Cleveland Browns, Cleveland Monsters and the Cleveland Ballet.





78,000

SQUARE FOOT SPORTS
MEDICINE COMPLEX

45

YARD SPORTS PERFORMANCE
FOOTBALL TRAINING FIELD

Steve and Loree Potash Women & Newborn Center

UH Ahuja Medical Center brings the trusted and collaborative care of University Hospitals obstetric experts and UH Rainbow Babies & Children's to the eastside of Cleveland with the addition of the Steve and Loree Potash Women & Newborn Center. Designed to meet the growing need for maternity and neonatal services in an easy and accessible location, the Center offers labor and delivery, neonatal care, high-risk pregnancy services and on-site surgical suites. The spacious and spa-like labor and delivery rooms in the Danielle and Michael Weiner Maternity Suite are designed to support multiple birth plans and postpartum stay, while the Richard Horvitz and Erica Hartman-Horvitz Level II Special Care Neonatal Unit features private rooms so family members can stay close to baby. Moms also have peace of mind knowing they have access to obstetric and neonatal specialists.



UH Cutler Center for Men

The unique and engaging design of the UH Cutler Center for Men aims to revolutionize the way men engage in their health care, motivating them to see a doctor more regularly and address concerns before they become major health problems. Overlooking the football field and including features like a community and mindfulness space, UH Cutler Center for Men delivers a full range of coordinated services, ranging from preventive to specialty care, and offers an additional focus on minority men's health. The center is also helping men take control of their health in part through personalized, patient concierges, called the Joe Team. These caregivers, affectionately named "Joes," help men navigate our wide network of men's health experts. And by leveraging digital technology through a Microsoft app, the center hopes to make it easier for men to coordinate all of their care in one place.



Surgery Center & Central Sterile Processing

The Phase 2 expansion increases operating room (OR) capacity at UH Ahuja by 80 percent with the addition of eight new ORs, bringing the total number of OR suites to 18. Initially, four ORs will open and allow for expanded surgical and endoscopy services, including more orthopedic, general and gynecology services. By diversifying its surgical footprint, UH Ahuja will be able to offer more complex surgeries in the future.

The Surgery Center also features a new Central Sterile Processing (CSP) area, which cleans, sterilizes and prepares medical instruments, and features STERIS' new MEDglas™ walls. From an infection prevention standpoint, the walls are easy to clean, but they also allow our CSP caregivers to customize their work background with an environmental image embedded in the walls.



Emergency Department & Short-Stay Unit

The new ED at UH Ahuja nearly doubles in size to 43 beds and includes two trauma bays and five fast-track rooms. Offering both adult and pediatric emergency care, the ED was designed with the family in mind, as spacious rooms allow family to stay nearby. In addition, a new 23-bed Short-Stay Unit will provide dedicated observation services.

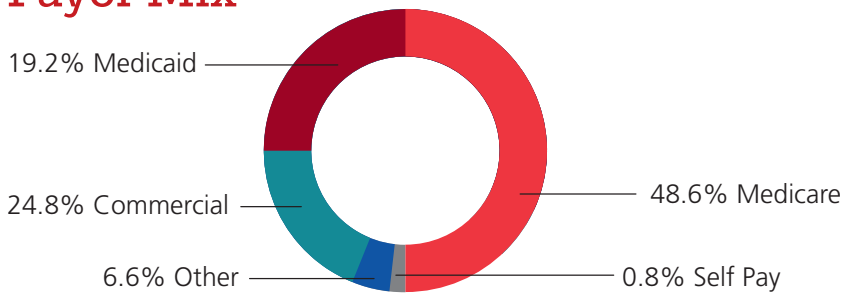


UH Breast Center

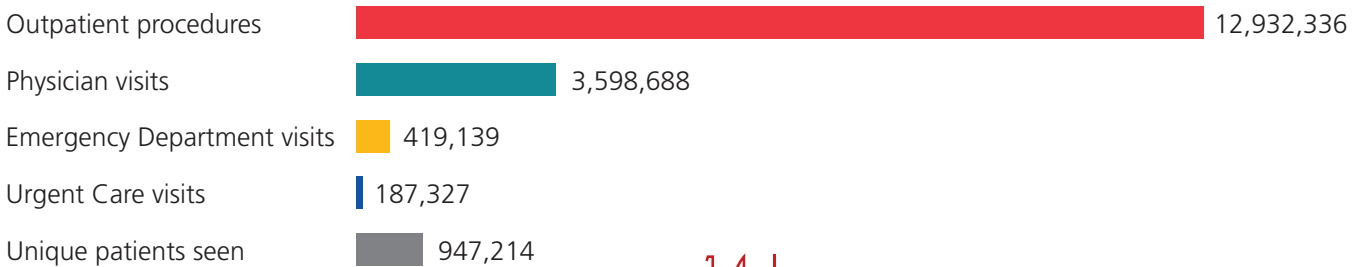
The UH Breast Center provides innovative and personalized care aimed at preventing, diagnosing and treating benign and malignant breast disease. As part of the UH Seidman Cancer Center, the Breast Center at UH Ahuja Medical Center serves as a one-stop resource, where women can receive a diagnosis, treatment plan and have surgery – all in one place. And, the UH Breast Center features the newest diagnostic technology, including five new mammography rooms in the Ida and Irwin Haber Breast Imaging Suite. In addition to breast health, UH Ahuja also offers a comprehensive menu of other women's services, including fertility and gynecology services.

System at a Glance

Payor Mix



Patient Care



122,854 Total Surgical Cases

96,300 Outpatient

26,554 Inpatient

139,571 Total Discharges



104,663

Acute



25,781

Observations



906

Post-acute



8,221

Newborns

*Statistical data excludes Southwest General Health Center, UH Rehabilitation hospitals, Western Reserve Hospital and UH joint ventures.

1,220 Residents and fellows

120 Residency training programs



Education

5,986 Total UH Providers

4,854 UH providers (UHMP and UHMG)¹

1,132

Independent providers²

27,764 Non-physician employees



Employment

\$5.4

billion

Total operating revenues

\$(211)³

million

Net operating loss

(3.9)%³

Operating margin



Key Financial Statistics

Joint UH-CWRU clinical & translational research (includes NIH grants to CWRU School of Medicine attributable to UH Cleveland Medical Center): **\$89 million**

Sponsored research funding to UH Cleveland Medical Center (including industry-sponsored clinical trials): **\$88.2 million**

Total Research Portfolio: **\$177.2 million**



Research⁴

¹ Includes UH Medical Practices (UHMP) and UH Medical Group (UHMG) providers at UH-owned practices, plus residents, fellows and allied-health providers.

² Includes MD, DDS, DO, PhD and DMD at the medical centers and freestanding ambulatory surgery centers who are not UH-employed providers.

³ Amounts exclude certain non-standard items that are not expected to repeat in future years. Including these non-standard charges, the GAAP reported operating loss is \$(302) million, (5.6%).

⁴ The amounts represent research funding to the UH clinical departments through the CWRU School of Medicine and the research conducted at UH Cleveland Medical Center, including clinical trials.

Highlights & Awards

A TOP EMPLOYER



largest health care employer in Ohio¹



largest employer in the state of Ohio¹

- **Forbes Best Large Employer**

#1 in the
"Healthcare & Social"
sector in Ohio

#4 among employers
headquartered
in Ohio

Among
Top 85
across the U.S.

- **Becker's Healthcare 100 of the Largest Hospitals and Health Systems in America**
- **Becker's Healthcare 150 Top Workplaces to Work in Healthcare for 2023²**
- **Modern Healthcare Top Organization for Diversity**, two consecutive years
- **Ethisphere's World's Most Ethical Companies**, 11 years²
- **America's Most Innovative Companies for 2023 by Fortune²**
- University Hospitals was recently recognized for its positive reputation, ranking **#1 in Ohio** in a report from Reputation, a business-to-business online reputation management company. UH also ranked 17th among the 30 largest U.S. health systems.²

¹ Ohio Department of Development

² As of April 2023

NATIONALLY RECOGNIZED MEDICAL CENTERS

- **U.S. News & World Report Best Hospital 2022-2023**

UH Cleveland Medical Center has been recognized as a Best Hospital for 2022-2023 by U.S. News & World Report. UH Cleveland Medical Center ranked in four of 15 adult specialties. It is ranked **third among all hospitals in Ohio**.

- UH Samaritan Medical Center named one of the nation's **100 Top Rural & Community Hospitals for 2022** by The Chartis Center for Rural Health.

- UH Cleveland Medical Center achieved **Magnet status** for the fourth consecutive time by the American Nurses Credentialing Center.

- UH Rainbow Babies & Children's Hospital verified as a **Level 1 Children's Surgery Center** from the American College of Surgeons Children's Surgery Verification Program.

- UH Cleveland Medical Center is among **Top 25 Academic Medical Centers in the World** according to Brand Finance.²

- **U.S. News & World Report Best Children's Hospital 2022-2023**

University Hospitals Rainbow Babies & Children's Hospital has been recognized as a Best Children's Hospital for 2022-2023 by U.S. News & World Report. UH Rainbow ranks among the nation's Top 50 children's hospitals in nine specialties, five of which rank in the top 25.



UH Distinguished Physicians Class

In 2022, University Hospitals awarded 42 physicians with the Distinguished Physician title. Joining an elite group, these physicians were recognized by their peers for their exceptional clinical skills and dedication to patient care. They also serve as the top role models and mentors in the training of the next generation of physicians, including medical students, residents and fellows.

The UH Distinguished Physician Class of 2022

ANESTHESIA

BRIAN C. FITZSIMONS, MD
EVAN J. GOODMAN, MD

DERMATOLOGY

ARI L. KONHEIM, MD

EMERGENCY MEDICINE

JERRI A. ROSE, MD

GENETICS

ADITI S. PARIKH, MD

MEDICINE

DAVID E. BLUMENTHAL, MD
SHELBY J. CASH, MD
PAULA PARKER-DEULEY, MD
JOHN C. EYRE, MD
PIERRE M. GHOLAM, MD
BETUL A. HATIOGLU, MD
NATHAN R. STEHOUWER, MD
BENJAMIN P. YOUNG, MD
MICHAEL P. ZACHARIAS, DO

NEUROLOGY

MICHAEL A. DEGEORGIA, MD
ANTHONY J. FURLAN, MD

NEUROSURGERY

YIN C. HU, MD
KRYSTAL L. TOMEI, MD, MPH

OB/GYN

CORINNE A. BAZELLA, MD
DAVID N. HACKNEY, MD

ORTHOPAEDIC SURGERY

GEORGE OCHENJELE, MD
MICHAEL J. SALATA, MD
BRIAN N. VICTOROFF, MD

OTOLARYNGOLOGY HEAD & NECK SURGERY

HASSAN ABBASS, MD

PATHOLOGY

MARTA E. COUCE, MD, PHD
MARK S. RODGERS, MD, JD
JOSEPH E. WILLIS, MD

PEDIATRICS

RINA LAZEBNIK, MD
MARLENE R. MILLER, MD
STEVEN L. SHEIN, MD
TERESA N. ZIMMERMAN, MD

PSYCHIATRY

KATHLEEN A. CLEGG, MD
PHILIPP L. DINES, MD, PHD
SUSAN J. HATTERS-FRIEDMAN, MD
STEPHEN L. RUEDRICH, MD

RADIOLOGY

NAMI R. AZAR, MD
HOLLY N. MARSHALL, MD

SURGERY

JOHN B. AMMORI, MD
AMITABH P. GOEL, MD
PHILIP A. LINDEN, MD
MATTHEW L. MOORMAN, MD, MBA

UROLOGY

JASON T. JANKOWSKI, MD

Nurses Class

University Hospitals recognized the exceptional work of 22 nurses with the inaugural UH Distinguished Nurse Award. Nominated by their peers, these direct care nurses distinguished themselves in their knowledge, compassionate care, professional development, teamwork, teaching and service to the nursing profession.

The 2022 Inaugural Class of UH Distinguished Nurses

CASIE BEHREND, MN, RN, CPN
UH Avon Health Center

KAREN DONATO, BSN, RN, OCN
UH St. John Medical Center

LAUREN EYRING, BSN, RN
UH Medical Offices

MARY GILCHRIST, MSN, RN, CCRN
UH Elyria Medical Center

DANA HALLMAN, BSN, RN
UH Elyria Medical Center

KYLE HUNT, BSN, RN
UH Parma Medical Center

KRISTINA KRUMREI, BSN, RN, CCRN
UH Cleveland Medical Center

BONNIE LANGERMEIER, BSN, RN, CPN
UH Rainbow Babies & Children's Hospital

DEBORAH LEISTER, BSN, RN, CEFM
UH MacDonald Women's Hospital

BETH MCCLUSKEY, BSN, RN
UH Cleveland Medical Center

MARLENE MITCHELL, RN, CMSRN
UH Cleveland Medical Center

ALNITA PATERSON, RN, WCC, DWC
UH Geauga Medical Center

CAROLINE (KRAKOWSKI) POCHEDLY,
BSN, RN-BC
UH Ahuja Medical Center

DENISE ROBINSON, BSN, RN, SANE-A
UH Cleveland Medical Center

ASHLEY ROHDE, BSN, RN
UH MacDonald Women's Hospital

LINDA SCAVNICKY, BSN, RN,
CCRN-CSC
UH Cleveland Medical Center

LISA SCHARBACH, BSN, RN
UH Cleveland Medical Center

HANNAH SCHMIKLA, BSN, RN
UH Seidman Cancer Center

ANN SPARKS, BSN, RN, BA,
OCN, CMSRN
UH Seidman Cancer Center

JENNIFER STONE, BSN, RN, AMB-BC
UH Rainbow Babies & Children's Hospital

KARRIE ANN WHELAN, RNC-OB
UH MacDonald Women's Hospital

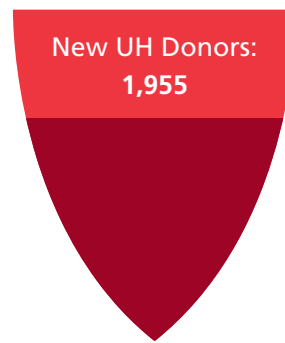
ANGELA ZAMBITO, BSN, RN, OCN
UH Outpatient Specialty Care
Infusion Center

2022 Giving & Support

A New Record for Community Support

A new University Hospitals milestone was set in 2022 as our generous community contributed a **record-breaking \$216.9 million in support**.

Together, UH friends and supporters contributed **more than 12,600 gifts** to sustain the UH mission. These contributions, ranging from transformational gifts to annual fund donations, fueled departments, programs and services across the health system, as well as the phase 2 expansion of UH Ahuja Medical Center and the establishment of 12 new endowed positions.



More than 6,800 donors supported UH in 2022; **28% of these individuals were first-time donors** to the health system.

Total Donors:
6,864

Transformational Support For UH Drusinsky Sports Medicine Institute

Last year, community leaders Michael and Grace Drusinsky made a visionary gift to advance orthopedic and sports medicine care at UH. In recognition, the system named its nationally recognized sports medicine program in their honor – UH Drusinsky Sports Medicine Institute.

“Grace and I are both immigrants to this country but Cleveland is our home,” said Michael. “We are passionate about supporting and strengthening this community, and sports medicine is the perfect conduit because it benefits people of all ages and abilities.”

The couple’s support will also benefit the new, world-class sports medicine complex at UH Ahuja Medical Center, offering comprehensive sports performance services from peewee to pro as well as advanced orthopedics, rehabilitation and walk-in urgent care.

“Living a healthy and active lifestyle is a lifelong pursuit, and UH Drusinsky Sports Medicine Institute is your partner throughout the journey,” said James E. Voos, MD, Chair, UH Department of Orthopaedic Surgery; Jack and Mary Herrick Distinguished Chair in Orthopaedics and Sports Medicine. “Michael and Grace are the best advocates and allies I could hope for in bringing our vision to life.”



Michael and Grace Drusinsky

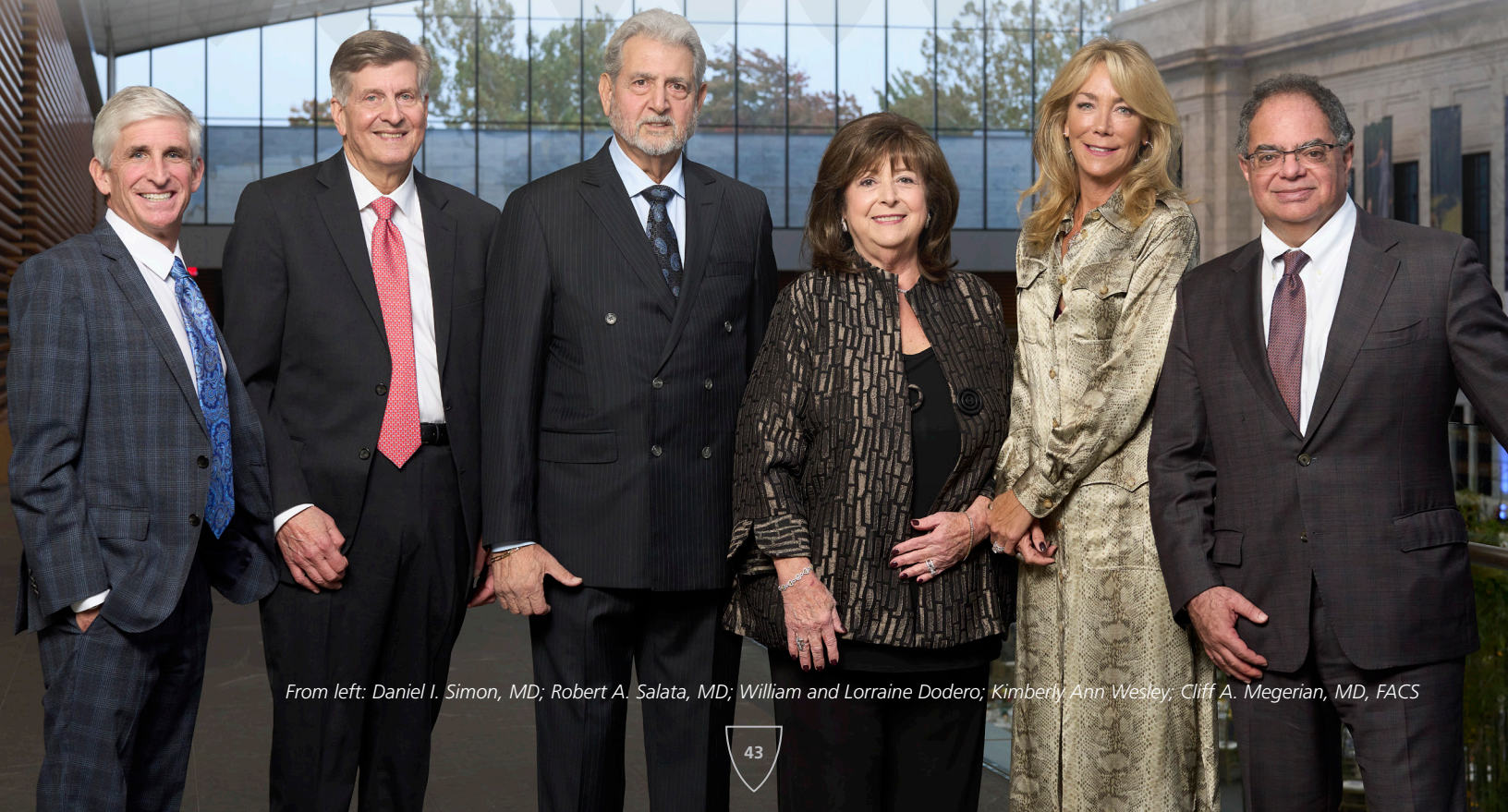
Annual Celebration

UH friends and benefactors gathered at the Cleveland Museum of Art in October for the Annual Society of 1866 Celebration. Lorraine and William Dodero and Kimberly Ann and the late Joseph O. Wesley received the prestigious Samuel L. Mather Visionary Award for their outstanding generosity, and Robert A. Salata, MD, received the 2022 Distinguished Physician Award.

Lorraine and William Dodero have generously supported UH for more than two decades, making leadership gifts to UH's Discover the Difference campaign and to advance cancer research, pediatric care and the health system's COVID-19 response. Most recently, the couple established the Lorraine and Bill Dodero Endowed Chair in Heart Failure and Transplantation. Lorraine also gives of her time, serving as a member of the UH Seidman Cancer Center National Leadership Council.

Kimberly Ann Wesley and her late husband Joseph Wesley made a transformational gift in 2020, establishing the Wesley Center for Immunotherapy and the Kimberly and Joseph Wesley Chair in Immunotherapy at UH Seidman Cancer Center. A UH patient for many years, Joseph benefitted from immunotherapy, a ground-breaking technique that empowers a patient's own immune system to identify and attack cancer cells. It was his wish that others have the same opportunity to receive life-extending immunotherapy treatment.

Dr. Robert Salata is UH Physician-in-Chief; Chair, UH Department of Medicine; Program Director, UH Roe Green Center for Travel Medicine & Global Health; and STERIS Chair of Excellence in Medicine. An internationally acclaimed infectious disease specialist and researcher, he has called UH his professional home since 1985. Since the first days of COVID-19, Dr. Salata has been the face and voice of UH, providing knowledge and comfort to a vast audience seeking information about diagnosis, treatment and vaccination.



From left: Daniel I. Simon, MD; Robert A. Salata, MD; William and Lorraine Dodero; Kimberly Ann Wesley; Cliff A. Megerian, MD, FACS

Ongoing Support For UH Connor Whole Health

UH Connor Whole Health, one of the largest integrative medicine programs in the country, is expanding services thanks to significant local support received in 2022.

A \$3 million gift from Connor Foundation is helping expand UH Connor Whole Health with particular focus on integrative oncology services through UH Seidman Cancer Center and a system-wide Reiki program. The gift also established the Connor Endowed Director of Reproductive Well-being and is inspiring additional giving through challenge grants.

“Supporting health and wellness needs in our community is core to Connor Foundation; this gift delivers on that and reiterates our commitment to UH Connor Whole Health,” said foundation executive director Erin Connor Reif. Since 2010, the Connor family has contributed more than \$11.5 million to the program and helped to position UH as a nationally recognized model for the clinical integration of whole health services.

Also in 2022, the program received \$3.15 million from the Elisabeth Severance Prentiss Foundation to fuel critically needed integrative medicine research. Under the direction of Françoise Adan, MD, Chief Whole Health & Well-being Officer and Christopher M. and Sara H. Connor Chair in Integrative Health, a team will explore how integrative therapies are best utilized in the current medical practice model, while identifying the impact of these services on patient outcomes, standards of care and cost.

“The whole health approach is the future of health care, as patients take greater control of their own mental and physical wellness,” said Dr. Adan. “UH Connor Whole Health is equipped to lead this effort not just in Northeast Ohio, but across the country, thanks to supporters like the Connor Foundation and the Prentiss Foundation.”

Connor Family, from left: Erin Connor Reif and Nick Reif; Sara and Chris Connor; Morgan and Dan Connor; Allie and Kevin Connor





Ashley and Michael Fisher

Local Couple Expands Pediatric Mental Health Services

A \$2 million gift from Ashley and Michael Fisher is expanding UH Rainbow Babies & Children's network of mental health services across the region. Their generosity will support additional mental health workers, new technology systems and specialized programs to meet the needs of teens and young adults.

"We've seen this crisis with our own friends and family," said Ashley Fisher. "Making sure the right resources are available at the right time is so important. We have the opportunity to help UH Rainbow change the paradigm and better integrate mental health services."

The COVID-19 pandemic exacerbated the national crisis in pediatric and adolescent mental health. UH Rainbow Babies & Children's is experiencing a 20 percent increase in patients receiving mental and behavioral health services.

"It's easy to see the physical effect of the pandemic," said Mike Fisher. "What isn't as obvious is the mental health aspect that comes from the stress, the isolation and the worry. When you're struggling with your mental health, it can be debilitating. I hope our gift can help UH Rainbow increase capacity, including telemedicine options, and help make sure all the services patients are receiving are aligned."

UH Samaritan Medical Center Receives Historic \$10M Grant

In 2022, Samaritan Hospital Foundation awarded an unprecedented \$10 million grant to UH Samaritan Medical Center. The gift supplemented the foundation's annual support of the hospital and will positively impact patient care and services for decades to come.

"UH Samaritan Medical Center is Ashland County's only hospital," said Paul R. Myers, Chair, Samaritan Hospital Foundation Board of Directors. "Our foundation exists to support the mission of the hospital and, with this gift, we are doing our part to ensure local health care needs are met."

The \$10 million grant will advance a variety of initiatives to meet growing demand at UH Samaritan Medical Center, which serves a significant number of patients from Ashland County as well as Richland, Wayne and other counties. Community health needs assessments have identified critical health issues in the area, including high rates of chronic disease such as diabetes, arthritis, obesity and mental health issues.

"Samaritan Hospital Foundation is a trusted community leader in health care philanthropy and we are beyond grateful for their tremendous generosity," said Sylvia Radziszewski, RRT, MBA, Chief Operating Officer, UH Samaritan Medical Center.



From left: Sylvia Radziszewski, RRT, MBA; Jack Vanosdall; Paul R. Myers

2022 Endowed Positions

Created by UH friends and supporters as a lasting tribute to a loved one or a show of gratitude for outstanding care, Endowed Chairs, Directors and Master Clinicians fuel the UH mission, providing a perpetual source of funds for education, research and discovery. These prestigious titles also offer unique opportunities to recruit and retain top physician-scientists and to recognize top talent.

In 2022, UH established 12 new endowed positions and celebrated the appointments of more than 25 caregivers to endowed titles in an open-air tent ceremony at UH Ahuja Medical Center. To learn more, visit UHGiving.org/endowedpositions.

143 endowed positions (as of 12/31/2022)

12 positions established in 2022

JOHN B. LALLY FAMILY MASTER CLINICIAN IN FIBROMUSCULAR DYSPLASIA AND VASCULAR CARE

Established: February 11, 2022 | Appointee: Heather Gornik, MD

- Donors: The John and Louise Lally Family Foundation, with support from the Dr. Donald J. and Ruth W. Goodman Philanthropic Fund of the Cleveland Foundation

JANE AND HENRY MEYER CHIEF EXECUTIVE OFFICER DISTINGUISHED CHAIR

Established: February 11, 2022 | Appointee: Cliff A. Megerian, MD, FACS

- Donor: Jane Meyer

PATRICIA AND KENNETH I. CLEVELAND MASTER CLINICIAN IN HEMATOLOGY AND ONCOLOGY

Established: February 11, 2022 | Appointee: Suresh Mendpara, MD, MBA

- Donors: Ken Cleveland Foundation, with support from the Dr. Donald J. and Ruth W. Goodman Philanthropic Fund of the Cleveland Foundation

LUBRIZOL ENDOWED DIRECTOR FOR EDUCATION

Established: April 7, 2022

- Donors: The Lubrizol Foundation, with matching funds from the Rainbow Babies & Children's Foundation

SUSAN STERN TURIEL CHAIR IN SUPPORTIVE AND PALLIATIVE ONCOLOGY CARE

Established: April 7, 2022

- Donors: Joseph Stern, Successor Trustee of Susan Stern Turiel Declaration of Trust, with support from the Dr. Donald J. and Ruth W. Goodman Philanthropic Fund of the Cleveland Foundation

RUHLMAN FAMILY CHAIR IN MATERNAL FETAL MEDICINE

Established: May 18, 2022 | Appointee: Giancarlo Mari, MD, MBA

- Donors: Ruhlman Family, with matching funds from the Rainbow Babies & Children's Foundation

CONNOR ENDOWED DIRECTOR OF REPRODUCTIVE WELL-BEING

Established: May 18, 2022 | Appointee: Christine Kaiser, DACM, Lac, LCH, FABORM

- Donor: Connor Foundation

DANIEL I. SIMON, MD, CHAIR IN CARDIOVASCULAR EXCELLENCE

Established: August 17, 2022 | Appointee: Eiran Gorodeski, MD, MPH

- Donors: Jane and Jim Wolf and the Wolf Family Foundation, a supporting foundation of the Jewish Federation of Cleveland

NANCY AND DONALD MALTBY MASTER CLINICIAN IN BREAST HEALTH

Established: June 23, 2022

- Donors: Nancy D. and Donald G. Maltby, along with many friends and support from the Dr. Donald J. and Ruth W. Goodman Philanthropic Fund of the Cleveland Foundation

CYNTHIA F. BEARER, MD, PHD, CHAIR OF NEURO-NEONATOLOGY

Established: June 23, 2022

- Donors: Cynthia F. Bearer, MD, PhD, with matching funds from the Rainbow Babies & Children's Foundation

LINDA SANDHAUS, MD, AND ROLAND PHILIP, MD, CHAIR IN PATHOLOGY AND LABORATORY MEDICINE

Established: November 9, 2022

- Donors: Linda Sandhaus, MD, and Roland Philip, MD

SYLVIA K. REITMAN CHAIR IN DISCOVERY AND INNOVATION

Established: November 9, 2022

- Donors: Robert S. and Sylvia K. Reitman, with matching funds from the JobsOhio Cleveland Innovation District

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¹As of May 1, 2023

²Term Expired May 2, 2022

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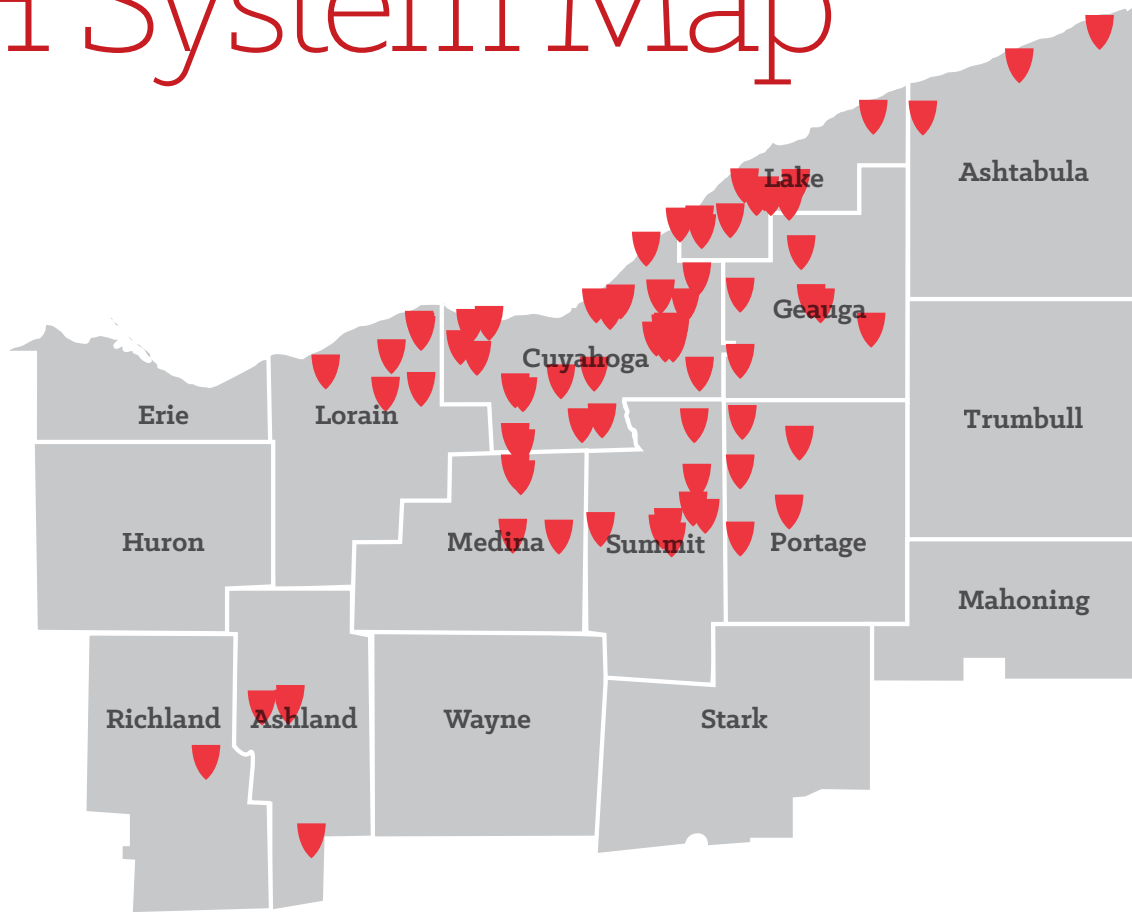
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UH Samaritan Medical Center
 UH Baney Road Health Center
 UH Samaritan Health Center
 UH Kettering Health Center

ASHTABULA

UH Conneaut Medical Center
 UH Geneva Medical Center
 UH Ashtabula Health Center

CUYAHOGA

UH Ahuja Medical Center
 UH Beachwood Medical Center
 UH Cleveland Medical Center
 UH Parma Medical Center
 UH St. John Medical Center
 UH Broadview Heights Health Center
 UH Euclid Health Center
 UH Foley ElderHealth Center
 UH Independence Health Center
 UH Landerbrook Health Center
 UH Mayfield Village Health Center
 UH Minoff Health Center at Chagrin Highlands

UH North Olmsted Health Center
 UH North Ridgeville Health Center
 UH Otis Moss Jr. Health Center
 UH Rainbow Babies & Children's Ahuja Center for Women & Children
 UH St. John Health Center
 UH Solon Health Center
 UH Suburban Health Center
 UH Wellpointe Health Center
 UH Westlake Health Center
 Highland Springs Hospital
 UH Rehabilitation Hospital
 Southwest General Hospital
 Southwest General Strongsville Medical Center

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UH Geauga Medical Center
 UH Bainbridge Health Center
 UH Chardon Health Center
 UH Chesterland Health Center
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 UH Geauga Health Center

LORAIN

UH Elyria Medical Center
 UH Avon Health Center
 UH Amherst Health Center
 UH Sheffield Health Center
 UH Avon Rehabilitation Hospital

LAKE

UH Lake West Medical Center
 UH TriPoint Medical Center
 UH Brunner Sanden Deitrick Wellness Center
 UH Concord Health Center
 UH Lake Continuing Care Center
 UH Lake SOM Health Center
 UH Madison Health Center
 UH Mentor Health Center
 UH Mentor Hopkins Health Center
 UH Perrico Health Center
 UH Willowick Health Center

MEDINA

UH Medina Health Center
 UH Sharon Health Center
 Southwest General Brunswick Medical Center

PORTAGE

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 UH Aurora Health Center
 UH Kent Health Center
 UH Mantua Health Center
 UH Streetsboro Health Center

RICHLAND

UH Samaritan Richland Health Center

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UH Cuyahoga Falls Health Center
 UH Fairlawn Health Center
 UH Hudson Health Center
 UH Twinsburg Health Center
 Western Reserve Hospital
 Western Reserve Hospital Urgent Care



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