“We believe that fostering diversity is morally and ethically the right thing to do. We enrich our community by serving as a model of diversity in race, gender, ethnicity, age, sexual orientation, religion, language, education and experience.”

- Thomas F. Zenty III, Chief Executive Officer, University Hospitals

For years, Carlisa Green was paralyzed daily by seizures. Activities outside her home were restricted, her ability to function was limited, and she suffered from severe memory loss. “She had temporal lobe epilepsy and what later turned out to be a brain tumor that caused her seizures. She was not responding to medications,” explains her neurologist, Samden D. Lhatoo, MD.

Dr. Lhatoo and Jonathan Miller, MD, worked closely as a team to provide a surgical course of action to help Ms. Green.

Ms. Green is now seizure-free. “The operations were successful,” Dr. Lhatoo points out. “We are all very happy for her. She had the kind of brain surgery that is not done in many hospitals throughout the United States. We used sophisticated, modern technology to cure her of epilepsy.”

A better life with her family and a career in the entertainment industry are in Carlisa Green’s future plans. “I am only looking forward,” declares Ms. Green.

Among the nation’s leading academic medical centers, University Hospitals Case Medical Center is the primary affiliate of Case Western Reserve University School of Medicine, a nationally recognized leader in medical research and education.

UH Case Medical Center is the 2012 recipient of the American Hospital Association-McKesson Quest for Quality Prize.
going FURTHER with Teamwork

University Hospitals care teams help our patients recover and live the life they love.

Jonathan Miller, MD, Director, Functional and Restorative Neurosurgery

Samden Lhatoo, MD, Director, Epilepsy Center, UH Neurological Institute

Kimberly Pierce, Secretary, Epilepsy Center, UH Neurological Institute

Jonathan Miller, MD, Director, Functional and Restorative Neurosurgery
Working closely with Dr. Lhatoo, Dr. Miller performed Carlisa Green’s complex surgeries to end her seizures.

Samden Lhatoo, MD, Director, Epilepsy Center, UH Neurological Institute
As Carlisa Green’s neurologist, Dr. Lhatoo worked with the UH care team to plan a course of action.

Kimberly Pierce, Secretary, Epilepsy Center, UH Neurological Institute
Kimberly Pierce, along with many others on Ms. Green’s University Hospitals care team, provided communication and other vital support needed to bring about her positive outcome.
Dear Friends,

At University Hospitals, diversity is one of our core values – and much more.

We have made it a corporate priority and a strategic business process to nurture and strengthen a culture of diversity and inclusion, both within our system and across our community.

We establish objectives for diversifying our work force and our vendor base, measure our progress and insist upon accountability. We focus our efforts on community outreach to increase health literacy and provide better access to quality care to those in need. And we constantly scan our environment, locally and nationally, for new ideas and best practices that support our commitment.

We do all this because diversity is a moral imperative at UH. We believe that fostering it is morally and ethically the right thing to do. We enrich our community by serving as a model of diversity in race, gender, ethnicity, age, sexual orientation, religion, language, education and experience.

Diversity is also a business imperative at UH. Northeast Ohio is a highly competitive health care marketplace with a diverse population. We can compete best in a diverse market by having diverse providers: Study after study has shown that many people are more likely to seek care if they can get it from providers who look like them. By being culturally competent and inclusive, we respect and reflect our market, and welcome and honor all cultures in Northeast Ohio.

Outside evaluators commend our progress. The recognitions UH earned in 2012 included a best-in-class honor for board diversity from the Greater Cleveland Partnership’s Commission on Economic Inclusion for the second straight year; the highest possible score on the Human Rights Campaign’s LGBT Healthcare Equality Index; and a No. 2 ranking among DiversityInc magazine’s Top 5 Hospital Systems in the nation, above all other Ohio health care systems.

We’re pleased to be held up as a model. Yet these awards are not endpoints. They are milestones on our journey as we live our mission: To Heal. To Teach. To Discover. We hope you join us as we move ahead and grow.

Thomas F. Zenty III
Chief Executive Officer, University Hospitals

Alfred M. Rankin Jr.
Chairman, Board of Directors, University Hospitals
Q: What does federal health care reform mean from a diversity standpoint?
A: In Northeast Ohio, it most likely means tens of thousands of economically disadvantaged people will become newly insured – perhaps even hundreds of thousands, depending on how Ohio implements the law. In our market, many, or even most, of those newly insured will be people of color, because minorities here have historically been more likely to be uninsured, for many reasons. So the reforms could provide an opportunity to address some persistent health care disparities, get people healthier and manage overall costs.

Q: How will health care change?
A: One of the biggest changes will be that society will increasingly hold hospitals and other care providers accountable for helping people stay healthy, instead of rewarding us for treating the sick. Increasingly, providers will be expected to do more to keep people out of hospitals, where the cost of care is high – especially in emergency departments.
Dentist Got Back on His Feet Thanks to University Hospitals

When he felt his medical condition needed attention, not having to wait weeks to consult a doctor turned out to be the best thing that could happen to Leonard Russell, DDS, of A Dental TLC.

“I had a hernia which I felt needed to be repaired,” explains Dr. Russell. “We were at the other major Cleveland hospital. When I called for an appointment, the earliest they had was a month away.”

Dr. Russell, a graduate of Case Western Reserve University School of Dentistry, is a general dentist with an office in Cleveland Heights. Not satisfied with the response from his request, he called University Hospitals and was able to obtain an appointment with Robert Cirino, MD, on the same day. “He is a compassionate, very confident doctor. He referred me to Raymond Onders, MD. My surgery was scheduled for the next week,” says Dr. Russell.

“I was diagnosed and surgically treated and back in my office working before I would have been seen by the other hospital. UH did me good,” relates Dr. Russell.

This UH experience was the first for Dr. Russell and he is emphatic about his care. “The treatment I received at UH is family-style care. We give the same care to our patients here at A Dental TLC. I would without a doubt recommend University Hospitals to others.”

Rainbow Care Connection is an innovative, broad-based community collaboration aimed to align the health care transformation goals of hospitals, physicians, managed care plans, community allied health organizations and the community at large. These efforts will help transform pediatric ambulatory care and accomplish the following:

1. Improve the quality of care delivered
2. Improve the health of children
3. Lower medical costs

Rainbow Care Connection services will be provided to approximately 65,000 Medicaid enrollees, and another 120,000 commercially insured children who receive care from 120 pediatricians in Northeast Ohio.

Andrew Hertz, MD, Vice President and Medical Director, Rainbow Care Connection, is responsible for integrating pediatric care across UH. “We believe this new model will provide better health care at a more appropriate level,” says Dr. Hertz. “The Rainbow Care Connection model represents an innovative way to deliver integrated care, and we believe it can be easily replicated nationally with high-impact savings to the Medicaid and other insurance systems. All children receive a greater level of care.”

Q: How can that change happen?
A: Health insurers, both government and private, are creating new financial rewards for care providers. Consider that millions of people don’t have a primary-care doctor; their idea of health care is to go to the emergency room when they are hurt or sick. What if providers get paid more for getting folks to start seeing primary-care physicians regularly, and paid less for hospitalizations? We might catch diseases earlier, when they’re more manageable. We might persuade more people to avoid disease by eating healthy and staying fit. We might help people get more benefit from medications. At UH, we’re completely reinventing the way we operate to try to achieve those goals.

Q: Does the Affordable Care Act tie into UH’s diversity initiatives?
A: Absolutely. Research shows that many people relate and respond better to health care providers who look like they do. We have a diverse population to manage. So we want diverse, culturally competent providers who understand barriers to good health and help patients overcome them. That helps UH – but best of all, it helps patients.
University Hospitals is focused on going further with quality patient care. At the core of this initiative is Donnie Perkins, Vice President for Diversity and Inclusion. Perkins worked with a systemwide task force in 2011 to set diversity and inclusion goals and initiatives for the University Hospitals system. He also oversees the system’s Office of Diversity and Inclusion.

**-going FURTHER with Diversity at the Core-

For a little more than one year, Perkins has led the effort to implement the systemwide strategic plan for diversity and inclusion by focusing on increasing leadership and physician diversity, strengthening and growing Employee Resource Groups (ERGs), enhancing physician pipeline programs, promoting diversity and inclusion education initiatives, conducting community engagement programs and providing sponsorship support for community organizations and events.

The office continues to build a strong foundation that collaborates with other system units to “diversify the system,” says Mr. Perkins, “so that UH can fully embrace diversity and realize the full benefits of being a diverse and inclusive organization. This means that physicians are better able to provide quality patient care. Research has shown that many people are more likely to seek care from people who look and sound like them. Therefore, our objective is to increase diversity of our board, leadership, physicians and our entire work force, and to sustain a climate of dignity, respect and equity that meets the needs of our patients and the community we serve,” he says.

At University Hospitals, diversity is defined as race, gender, ethnicity, sexual orientation, religion, disability and, from a broader perspective, diversity of ideas, thoughts and perspectives.

**University Hospitals Diversity and Inclusion Goals**

There are multiple diversity initiatives that address three main principles: Recruitment, Community Engagement and Supplier Diversity. All three of these principles are needed to accomplish our most significant initiative – to reduce Health Care Disparities in Northeast Ohio.
When asked about UH’s diversity initiatives, Mr. Perkins says UH will continue to provide high-quality, culturally competent, patient-equitable care to citizens of Northeast Ohio. “We also want to be the health care system and employer of choice and to be a strong partner supporting the community in terms of health care, economic development and education,” says Mr. Perkins.

When asked how UH will be accountable to the goals laid out in the plan, Mr. Perkins makes it clear that he reports to UH’s Chief Executive Officer Thomas F. Zenty III, and works with the Executive Committee which consists of executive officers of UH system’s leadership. “We track and report our progress in each one of our objectives to the Cultural Diversity Committee of the Board on a biannual basis,” says Mr. Perkins. “We also participate in annual national, state and local benchmarking surveys conducted by DiversityInc magazine, locally with The Commission on Economic Inclusion, and this year we participated in the National Human Rights Campaign’s health equity index survey.”

Mr. Perkins is pleased to announce that after two years, UH has increased board diversity to 24 percent. This has resulted in recognition as “Best in Class” for the second year from the Commission on Economic Inclusion for board diversity. “Nationally, we were recognized by DiversityInc magazine for the third time as one of the Top 5 hospitals in the country, No. 2 of the Top 5 hospitals ranking for 2012, and No. 1 hospital in Ohio for diversity,” Mr. Perkins proudly states.

Cleveland boasts many ethnic groups. University Hospitals has and will continue to serve Cleveland’s diverse population. For this and other reasons, the Board of Directors understands the importance of a diverse representation on its governing board.

“As corporate leaders in Greater Cleveland, the Board members vividly understand that an inclusive environment is a priority for University Hospitals,” says Hilton O. Smith, Chair of the Cultural Diversity Committee of the Board at University Hospitals. “Today’s environment calls for inclusion and a clear understanding of a diverse patient base. UH has been widely recognized for its inclusive environment. Diversity and inclusion are the cornerstones of the UH philosophy.”

“UH has remained steady in terms of leadership, workforce and physician diversity. With regard to leadership, we have a Leadership Academy that has identified 22 high-potential physicians and administrators. They are completing a program with Case Western Reserve University Weatherhead School of Business that prepares them for leadership in the UH system. That group is diverse in race, ethnicity and gender. We also have a mentoring program with 22 individuals, where 44 percent of this group is from a diverse background. These individuals are being mentored by senior leaders to provide a broader perspective of the system and the role of leaders in the organization,” says Mr. Perkins.

(continued on page 6)

- To Reduce Health Care Disparities in Northeast Ohio, University Hospitals must address three principles:

Recruitment – specifically to increase
  - Board diversity
  - Leadership diversity
  - Physician and workforce diversity

Community Engagement
  - Increase community engagement and outcomes

Supplier Diversity
  - Enhance the utilization of diverse suppliers
Thirty percent of UH’s work force is racially and ethnically diverse; however, 96 percent of its physicians are white. “We’re continuing to develop programs that will change those numbers,” says a concerned Mr. Perkins. “By working on retention through our minority faculty development program and the Henry L. Meyer III KeyBank Faculty Fellowship Program, our numbers will grow.”

UH is also engaged in providing sponsorship to events and programs that align with its mission. “We’ve provided numerous sponsorships of community organizations and specific community-based programs,” adds Mr. Perkins.

Lastly, under supplier diversity, UH has focused efforts on increasing diversity in its supply chain. “Diversity is included in every Request for Proposal (RFP) that comes out of UH. We are working to expand the number of minority-, woman-, and LGBT (lesbian, gay, bisexual, transgender)-owned businesses that could possibly do business with us,” explains Mr. Perkins.

We are making steady progress toward our strategic goals and recognize that it requires a sustained commitment from leadership, employees and an effective collaboration with all stakeholders. “We have a three-year plan that we will review and upgrade as we make progress. We still have work to do,” Mr. Perkins states emphatically. “We are not satisfied with the progress we are making. We can do better. We are just getting started.”

**The Henry L. Meyer III KeyBank Faculty Fellowship Program**

The Henry L. Meyer III KeyBank Faculty Fellowship Program was funded by the KeyBank Foundation and established to increase the number of talented, diverse full-time faculty physicians and leaders in the University Hospitals system.

Candidates selected for the 2012 Fellowship receive a grant of $100,000 over an 18-month period which can be used to help provide salary support, research, and professional and leadership development opportunities that will help advance their careers at University Hospitals.

Tia M. Melton, MD (left), Assistant Professor, Department of Obstetrics & Gynecology, University Hospitals Case Medical Center; and Stephanie L. Hunter (right), Instructor, Emergency Medicine, are the Henry L. Meyer III KeyBank Faculty Fellowship Program recipients.

**Going Further with Women in Leadership**

Five of our hospitals are led by three women. Two have been appointed within the past year. They are uniquely qualified to strategically move University Hospitals forward in our goal to provide quality patient care to the Northeast Ohio community.
Going Further with
Patricia M. DePompei, RN, MSN, President, University Hospitals Rainbow Babies & Children’s Hospital and University Hospitals MacDonald Women’s Hospital

Patricia DePompei’s career path began humbly as a bedside nurse and progressed to RN. Working in neonatal intensive care gave her the experience needed to understand the skill sets required to care for University Hospitals’ littlest patients, their mothers and to lead two hospitals. She recognizes that she typically is the only female and nurse in many high-level meetings she attends. “Many of my colleagues came up through a financial background or are physicians. What’s nice is to have a diverse group at the table, with different experiences and different frames of reference. It is important that leaders have a diverse background,” says Mrs. DePompei.

Susan V. Juris, President, University Hospitals Ahuja Medical Center

Susan V. Juris leads University Hospitals Ahuja Medical Center, our newest community hospital.

Ms. Juris walked the nontraditional path to leading UH Ahuja Medical Center. She holds a degree in psychology and an MBA. Her early career years were spent in mental health and later at large publicly traded service management and health care firms.

Ms. Juris explains that strategic marketing is key to positioning the new hospital. Her background serves her well as UH Ahuja Medical Center is proving to be a different type of hospital – offering wellness, community activities, integrative therapies, yoga and acupuncture. The ability to differentiate and offer diverse community programming is very important.

Ms. Juris mentions that all health care and business executives share many skill sets such as financial acumen, strategic and operational planning and workforce development. “I think women are better system thinkers. We have a tendency to see a broad set of factors influencing a situation. We are better suited to build strong team-oriented organizational cultures.”

Laurie S. Delgado, President, Univerity Hospitals Bedford and Richmond Medical Centers, campuses of UH Regional Hospitals

Laurie S. Delgado’s experience in Health Information Management and Quality helped prepare her for a stellar UH career.

After 17 years at University Hospitals Geneva Medical Center serving as a manager, director and chief operating officer, she spent the last five of those years serving as President. In 2008, Ms. Delgado began serving as President at UH Richmond Medical Center and as UH Bedford Medical Center’s President in 2011.

“As President, my primary goal is to ensure there is strategic direction for both campuses and that we are providing high-quality care for our patients, and ensuring we are meeting the needs of our community,” offers Ms. Delgado.

Ms. Delgado’s varied experiences have allowed her to focus on improving the awareness of the unique characteristics of the populations UH Richmond Medical Center serves. Those populations include veterans, Baby Boomers, GenXers and Millennials.

Patricia M. DePompei’s career path began humbly as a bedside nurse and progressed to RN. Working in neonatal intensive care gave her the experience needed to understand the skill sets required to care for University Hospitals’ littlest patients, their mothers and to lead two hospitals. She recognizes that she typically is the only female and nurse in many high-level meetings she attends. “Many of my colleagues came up through a financial background or are physicians. What’s nice is to have a diverse group at the table, with different experiences and different frames of reference. It is important that leaders have a diverse background,” says Mrs. DePompei.

She thinks women can be very encouraging of others, “so typically I view us as wanting to see everybody win. It is not so much about competition; there is healthy competition. I personally strive to make it a win-win for everyone involved,” she says.

“Hospitals are very fast-paced. Very complicated situations are going on all the time and you have to be able to adapt and adjust quickly to the situation and to a diverse work group,” says Mrs. DePompei.

“A leader has to have a keen sense and high regard for the contributions that everybody makes.”
University Hospitals Program Helps Employees Take the Next Step to a Successful Career

University Hospitals believes that investing in our employees creates win-win opportunities. The Bridge to Your Future Work Force Development Program began in 2011. It prepares our employees to be successful in college by honing math and English skills and learning about careers in the health care field. They are then better prepared to accept greater opportunities within the UH system.

High-Quality Equitable Care Begins with Understanding Cultural Differences

“Cultural competency means understanding the patient’s world view and background – how they see you as a doctor, the health care system and their disease,” explains Keith B. Armitage, MD, Vice Chair for Education and Residency Director, Department of Medicine at UH Case Medical Center. “It’s important to understand how patients view their doctors, disease and medical care in general in order to give them the best care possible.”

Keith B. Armitage, MD, Vice Chair for Education and Residency Director, Department of Medicine, UH Case Medical Center

Debbi Perkul
Work Force Development Professional
Organizational Development and Learning, University Hospitals

Percentage of UH entry-level employees interested in career advancement

83%

Since its inception, 177 employees enrolled in the program. Of those enrolled...

65% Graduated

48% Enrolled in College

16% Were Hired to a New Position within University Hospitals
“There is often a huge gap between high school graduation and college readiness for a lot of people,” says Debbi Perkul, UH Work Force Development Professional. “Research shows that if literacy skills improve, people will have greater success in college.

“We want to promote employees from within,” adds Ms. Perkul. “With additional education, employees will be able to acquire higher-skilled jobs that are more in demand at our facilities. In order to participate in the program, candidates must be strong performers in their current jobs, be employed for one year, receive good performance evaluations and provide a supervisor recommendation.” Ms. Perkul also mentions that moving beyond entry-level positions allows departments within UH to become more diverse.

In a survey completed by entry-level employees, 83 percent were interested in advancing their careers within University Hospitals. The Bridge Program is designed to eliminate barriers to success some of our employees may experience. Examples of those barriers include: English and math skills not college-ready, previous unsuccessful college experience, student loan debt, intimidation of going back to school, personal challenges, unaware of career opportunities, and how to navigate the education and career development system.

To ensure employees have positive and successful experiences, the program offers online learning, methods to remove barriers to success, career exploration and development, college access and support. Within its first two years, the Bridge Program experienced an 82 percent completion rate where 177 employees enrolled and 115 graduated. Eighty-five enrolled in college (the majority at local community colleges) and 28 landed new jobs.

Recent Bridge Graduates Find Success

Danielle Melton worked in Environmental Services for one year before joining the Bridge Program. The day Ms. Melton graduated in December 2011, she received a new assignment as a Patient Care Assistant. “It was an amazing program, a dream come true,” shares Ms. Melton. “It motivated me to do what I’m doing now, to continue to strive to succeed and be the best that I can be.” Ms. Melton is in the phlebotomy program at Lakeland Community College.

Helen Love, also a Bridge Program graduate, initially worked in medical records as a Health Information Representative. In her new position in the Accountable Care Organization, she is responsible for follow-up care, case management, and ensuring patients get preventive care to help reduce health costs.

“I thought the program was awesome,” says Ms. Love, who explains she had gone back and forth to school, never having the opportunity to finish. “The Bridge Program helped me get the prerequisites out of the way. The workshops were excellent. They taught us how to interview and write résumés,” she says.

Danielle Melton, Patient Care Assistant
Helen Love, Member Outreach Liaison

All residents participate in a two-week training rotation where group learning is the focus. “We do a cultural competency module. There are about five to seven interns per group. We devote a half-day session to cultural competency,” Dr. Armitage explains.

He clarifies that “all physicians are likely to practice in a setting where there is great diversity among patients. It is important to be able to understand the patient’s world view and be able to communicate to the patient and family the details about their disease.”

Dr. Armitage mentions that sometimes there is a distrust of the health care system and patients may feel that doctors are just “experimenting.” “It comes up a lot with end-of-life care,” says Dr. Armitage. He gives examples where some patients’ religious beliefs prevent them from following through with doctor’s orders.

There are patients who may have an illness where the primary focus is comfort, and the family may worry about food and nutrition. There are religions that forbid blood transfusions. “It is not uncommon for someone to have gastrointestinal bleeding and doctors are confronted with these beliefs,” adds Dr. Armitage. “This is something we have to understand, appreciate and work with the patient’s family for the best care.”
How Going Global Benefits Northeast Ohio Patients

WONDOOR Program

Women in low-resource communities and countries continue to succumb to death from preventable causes. These include complications from pregnancy and gender-based violence.

“Women, no matter where they live in the world, should be able to enter the same door and receive the same quality health care,” says Margaret D. Larkins-Pettigrew, MD, creator of the WOmen and Neonates, Diversity, Opportunity, Outreach and Research WONDOOR (one door) program, and a 2011 Minority Faculty Development Award recipient.

“The program is built around educating future health providers as they work to help reduce the women and child morbidity and mortality rates here and abroad.”

Dr. Pettigrew used part of her award to conduct research and provide support for the program.

Now in its second year, WONDOOR seeks to answer the question, How do we educate our Obstetrics and Gynecology (OB/GYN) residents to become global health providers? One component of the program is the Global Health Scholars Program. “This 30-month curriculum takes residents who have been accepted in the OB/GYN program and educates them on how the health environment and work force affect women in low-resource and war-torn countries. They learn what will help them become better health care providers. There is an intensive curriculum along with their OB/GYN residency requirements.”

In addition to educating specialists here at UH, the WONDOOR program is committed to establishing sustainable training programs abroad. “Collaborating with Guyana, South America, WONDOOR has developed and implemented the first post-graduate residency program in OB/GYN for the country,” continues Dr. Larkins-Pettigrew. “The University of Guyana, Guyana Ministry of Health, Georgetown Public Hospital (Guyana) and University Hospitals Case Medical Center are the four major players that collaborated to address Guyana’s brain-drain phenomena. In many low-resource countries, this is a problem and is also a challenge in our communities,” says Dr. Larkins-Pettigrew. “There is one provider for thousands of patients.

“We want to make a difference in other countries by helping to educate their own, so they will remain in their country caring for their own communities,” she says.

University Hospitals Recognizes Our Excellent Staff

University Hospitals is proud of the many award-winning professionals on our staff.

Congresswoman Marcia Fudge was the Keynote Speaker at the 22nd Annual Minority Faculty, Residents and Fellows Reception and Dinner.

Congresswoman Marcia Fudge
Katya H. Chiong, MD, Anesthesiology and Perioperative Medicine, 2012 Minority Faculty Development Award recipient
Robert W. Maitta, MD, PhD, Clinical Pathology, Assistant Medical Director, Transfusion Medicine, Blood Bank and Apheresis Center, 2012 Minority Faculty Development Award recipient
WONDOOR also provides a global health think tank, which encourages large-scale global discussions on institution and humanitarian health issues. The common goals and vision for the think tank are being responsible global citizens so that there are safe places and a legitimate clearing house where residents, faculty and students can travel to train and provide health services.

Through their global training, residents become better equipped to offer quality services to Northeast Ohio patients. “We’re training our own residents to ask the right questions, ‘What is in your refrigerator when you’re pregnant? What is stopping you from coming to your appointments?’” offers Dr. Larkins-Pettigrew. “The training allows them to become better health care providers here, because the challenges are even greater abroad. It also teaches doctors or residents to become humanitarians,” continues Dr. Larkins-Pettigrew. “People assume that doctors are automatically compassionate. Many learn compassion from their experiences traveling abroad. They are then better able to serve their communities when they return home to Northeast Ohio.”

The multifaceted WONDOOR program provides diversity and residency training, fellowship opportunities and a think tank with the overarching goal of creating a sustainable global health model for women and children around the world.

DID YOU KNOW?

University Hospitals funded the Kent State Kick Start College Partnership Program. Fifteen rising juniors from Cleveland Central Catholic High School participated in a week-long summer residency to inspire urban youth to pursue university study, especially in the areas of science, technology, engineering and math (STEM).

David Satcher Clerkship – Mentors Provide Home Away from Home

Named for the former United States Surgeon General, the University Hospitals David Satcher Clerkship focuses on recruiting minority medical students into UH medical programs and centers.

Since the clerkship began in 1991, UH has increased its minority representation in training programs from 3 to 10 percent. Through the program, minority medical students are exposed to the many career opportunities available. An integral part of the student’s success, while participating in the clerkship, is the mentoring component.

Geri Blair, Co-Founder and Executive Director of Minority Women with Breast Cancer Uniting; Former nurse at University Hospitals

Geri Blair, Co-Founder and Executive Director of Minority Women with Breast Cancer Uniting, has volunteered as a David Satcher Clerkship mentor for three years. Her role is to make the student, often coming from another state or country, feel comfortable in his or her temporary environment. “When I get a new student, I call to talk, invite them to dinner at my home, show them around Cleveland, and ask if they need assistance with anything,” says Ms. Blair.

“When students come here, they really don’t have a lot of time. Students complete one-month rotations from August through November each year. They still have to work, take tests and perform research. They are very appreciative of a good home-cooked meal instead of eating fast food all the time. I enjoy communicating with them and being available. Coming to a strange city can be very scary. It’s good to have an adult you can trust while you’re here,” explains Ms. Blair.

UH acknowledges that minority physicians are under-represented nationally. We are committed to developing a dynamic, thriving and diverse team of physicians, nurses, health care professionals and management staff that more fully represents the population we serve.
With the first group projects in phase one of the new construction project now complete, Cassandra L. Johnson, Director of Construction, is ensuring that the St. John Medical Center Modernization Project continues to move forward. St. John Medical Center is a joint venture with University Hospitals and the Sisters of Charity Health System.

Completed projects include a new main/visitor entrance, gift shop, Breast Health Center, new front door, west and south additions, a Same-Day Surgery Department and a new Post-Acute Care Unit. Other projects include lab, radiology and surgery upgrades, a Progressive Care Unit and obstetrics. The St. John Medical Center modernization concludes in 2015.

Ms. Johnson also ensures the supplier diversity goals are met for the modernization. “We are on pace to meet supplier diversity goals of 15 percent MBE and 5 percent FBE,” says Ms. Johnson, adding that the project has added professional services to its goals.

There are 26 female- and minority-owned businesses on the project. Expertise areas include contractors, engineers, electrical suppliers, architects, materials suppliers and graphic designers.

As University Hospitals construction projects continue to grow, there is a need for more diverse representation. “We have a new sourcing policy we are putting into place by 2013 which requires that a local or diverse supplier be included in the bid process,” says Alan H. Wilde, Vice President, System Services. “We believe that by initiating this policy, we will increase the number of local and diverse suppliers.”

We are proud of our engagement with diverse suppliers and the progress we are making on our diversity supplier goals.

University Hospitals remains committed to increasing the representation and contributions of diverse suppliers in contracting, consulting, supply chain and other relevant areas.

We are further with Supplier Diversity

St. John Medical Center
MBE & FBE Vendors

FiveStar Supply Company
AKA Construction
Management Team, Inc.
A C Plastering, Inc.
Aster Elements
Builders Glass
Clark Mechanical
Custom Millwork
G. Stephens, Inc.
Gatto Electric Supply
Gratton Building Specialties, Inc.
Lakeland Electric, Inc.
Leff Electric, Inc.
Mobius Grey, LLC
Mull Iron
Pardo Consultants, Inc.
Power Mike, Inc.
Ralph Tyler Companies
Mr. Wilde helps to connect diverse suppliers with internal department leaders. “So far it’s been an informal process. We are working with the Cleveland Foundation and other major health care and academic institutions to use Supplier Gateway,” he adds.

Mr. Wilde explains that Supplier Gateway is a local repository where companies are on one database. “Instead of each company having its own database,” explains Mr. Wilde, “we will share one database and the local suppliers will go there without having to register multiple times.”

Ms. Johnson and Mr. Wilde are leading examples that diversity initiatives in construction projects help UH continue to go further.

Regency Construction Services, Inc.
R.K. Levitz LLC
Safeguard Associates Inc.
Sandhu & Associates, Inc.
Tech Ready Mix, Inc.
Troutman Supply, LLC
Ubiquitous Design, LTD
Van Auken Akins Architects, LLC
Whitley & Whitley Architects

UH Connects Minority Suppliers to One Another to Help Build Capacity

Architect Richard K. Levitz, a native of Colombia, South America, knows firsthand the frustrations of minority firms while seeking opportunities. He is a Trustee of the Northeast Ohio Hispanic Chamber of Commerce and the owner of R.K. Levitz LLC, a Hispanic Business Enterprise specializing in environmental design, including architecture, planning, graphics and signs.

He explained that in most organizations, design professionals are often not considered for supplier diversity opportunities. “Most institutions do outreach to the construction trades, while the design world is overlooked during the start of a project. Also, small companies are viewed as not having capacity. That’s why connecting to other suppliers is important,” he says. His experience at University Hospitals, however, was very positive.

Through the outreach of Cassandra Johnson and Christopher Trotta at Array Architects, Mr. Levitz had the opportunity to connect with other firms, winning the signage and graphics contract for St. John Medical Center in Westlake, and for the UH Seidman Cancer Center on the same campus. As Project Manager, Mr. Levitz was responsible for managing the team’s efforts and for securing municipal design approvals and permits for exterior and interior signage and graphics.

“The staff leadership at UH was very encouraging and provided the right environment that resulted in the forming of my strategic team,” says Mr. Levitz. “UH helped us build the necessary capacity by helping smaller firms like ours connect with each other. This gave us the opportunity to work directly for UH and earn trust for the next project and grow. With this experience, I continue to build credibility, helping me when bidding other projects.”
Employee Resource Groups (ERGs) at University Hospitals exemplify the full dimensions of diversity, inclusion and shared experience at UH. They align with and support the mission, vision and values of UH. ERGs enrich cultural competence and build community.
University Hospitals Home Care Services is one of the largest providers of home care services in the state of Ohio and provides a comprehensive array of adult and pediatric nursing, therapy, social work, nutrition, private duty, telemonitoring, IV infusion and specialty pharmacy services to over 2,000 patients daily.

Such services are provided across a broad geography and range of culturally diverse patients and families. “It is extremely important that our staff members embrace cultural diversity and are knowledgeable and respectful of the various cultural norms of our patients,” states Keith E. Maitland, President, UH Home Care Services.

“When we are invited into a patient’s home, it is their cultural norms that are paramount. We take that responsibility very seriously and work hard to be the most culturally diverse and sensitive provider we can be.”

University Hospitals Conneaut Medical Center and University Hospitals Geneva Medical Center are designated by the Centers for Medicare and Medicaid Services as Critical Access Hospitals. “One of the reasons we were granted this designation was due to the fact that we serve a very high Medicare population,” explains Robert G. David, President, UH Conneaut Medical Center and UH Geneva Medical Center. “Consequently, we have many programs, services and educational opportunities that cater to this growing segment of our community.”

Working in collaboration with UH Case Medical Center, Mr. David is responsible for planning, growing and expanding the key service lines and maintaining the highest levels of quality and patient outcomes. We have a strong commitment to our small communities. Many success stories revolve around our commitment to adding services in these smaller communities. “Our patients no longer have to travel great distances to obtain quality health care,” says Mr. David. “Dr. Fred Rothstein, Dr. Michael Nochomovitz and the UH faculty chairs have been instrumental in providing some of the best-trained physicians in the world. They truly practice our mission: To Heal. To Teach. To Discover.”

Mr. David mentions that it is gratifying to hear positive feedback from patients who live in the community. “I cannot tell you how many times someone comes up to me and says, ‘Thank you so very much for providing the specialty services.’ Patients tell me they are of Medicare age and they do not have the same level of sight or hearing as they once had a few years ago. They are grateful they can receive these services close to home.”

Employee Resource Groups contribute to UH’s diversity and inclusion success by providing insights on the work environment and community connections, assisting with recruitment, onboarding new employees and by providing informal mentoring and supporting professional development. They participate in community engagement initiatives, host diversity workshops, and maintain an employee advocacy and support network.

**Employee Resource Groups:**
- Employee Committee for Diversity and Inclusion
- Minority Leadership Committee
- Minority House Staff
- Minority Faculty Group
- Nursing Diversity Council
- Women’s Leadership Institute

**Special Interest Groups:**
- Hispanic/Latino
- Veterans
- LGBT
University Hospitals is serious about diversity. As we strive to meet the diversity goals and objectives we’ve set, the community also recognizes and appreciates our commitment. We are proud to receive recognition for our continued diversity efforts as we stay focused on our six diversity goals outlined in our strategic plan. The latest national and community recognition affirms our commitment to **going FURTHER with Diversity and Inclusion at the core.**

**DiversityInc**

University Hospitals was recognized for the third time as a **Top Five Hospital in the nation** for Diversity and Inclusion and ranked second on the list.

**The Human Rights Campaign**

The Human Rights Campaign (HRC), America’s largest civil rights organization working to achieve lesbian, gay, bisexual and transgender (LGBT) equality, recently recognized University Hospitals as the sole health care provider in Northeast Ohio to earn a Top 100 Leadership ranking on the **2012 HRC Healthcare Equality Index (HEI).**

The annual HEI surveys and rates respondents on their policies and practices related to LGBT patients and families. Each year, hundreds of health care facilities use the online HEI survey to evaluate themselves against established criteria for LGBT patient-centered care.

The Cleveland Chapter of HRC also presented the **2012 Corporate Equality Award to UH at its 19th Annual HRC Gala.**

**Commission on Economic Inclusion Best in Class**

University Hospitals was ranked Best in Class for Board Diversity for the second time in two years. UH was selected based on results of the annual Employers Survey on Diversity™ and follow-up interviews by commission staff. The awards are presented for **achievement in board, senior management, work force and supplier diversity.**

**NAACP**

University Hospitals accepted the NAACP Freedom Fund Award at the Cleveland Branch of the NAACP 53rd Annual Freedom Fund Dinner and Centennial Celebration.

The award recognized UH’s ongoing efforts and achievements providing quality, equitable patient-centered health care, implementing a strong results-driven supplier diversity program, supporting economic development and promoting positive health and educational outcomes for all children.

**Commission 50**

University Hospitals was recognized for **progress in creating, enhancing and sustaining its diversity and inclusion strategies.** This recognition is based on its responses to the annual Employers Survey on Diversity™.
For years, Carlisa Green was paralyzed daily by seizures. Activities outside her home were restricted, her ability to function was limited, and she suffered from severe memory loss. “She had temporal lobe epilepsy and what later turned out to be a brain tumor that caused her seizures. She was not responding to medication,” explains her neurologist, Samden D. Lhatoo, MD.

Dr. Lhatoo and Jonathan Miller, MD, worked closely as a team to provide a surgical course of action to help Ms. Green.

Ms. Green is now seizure-free. “The operations were successful,” Dr. Lhatoo points out. “We are all very happy for her. She had the kind of brain surgery that is not done in many hospitals throughout the United States. We used sophisticated, modern technology to cure her of epilepsy.”

A better life with her family and a career in the entertainment industry are in Carlisa Green’s future plans. “I am only looking forward,” declares Ms. Green.

“We believe that fostering diversity is morally and ethically the right thing to do. We enrich our community by serving as a model of diversity in race, gender, ethnicity, age, sexual orientation, religion, language, education and experience.”

- Thomas F. Zenty III, Chief Executive Officer, University Hospitals