ON THE COVER Edward M. Barksdale Jr, MD, is known for performing complex surgical procedures while providing compassionate care (see page 18).
Dear Friends,

Our new vision statement – **Advancing the Science of Health and the Art of Compassion** – defines who we are today and where our momentum will take us. We are constantly adapting, changing and looking for better ways to deliver on our commitment to fulfill our mission in our region and the world.

We are recognized leaders in research and discovery, illustrated by the more than 1,800 active clinical research studies, including more than 600 clinical trials under way, our academic affiliations with renowned centers of learning, and our clinical institutes that bring highly-trained specialists together for collaboration on treatment protocol best practices.

Outstanding compassionate care has defined UH for decades and remains centric to everything we do, evidenced by the continued improvement in patient satisfaction in 2017, with advances in every target area measured for patient experience. Our inpatient satisfaction increased and achieved its target scores – as did our outpatient provider offices and UH emergency departments.

2017 marked a year of milestones, reaching new heights and expanding our services for the betterment of our community. Noteworthy accomplishments include:

**Forging a new agreement with Medical Mutual of Ohio.** With this addition, UH now serves as an in-network provider for members of all major insurers.

**Attaining Level I trauma verification for UH Cleveland Medical Center.** Level I status, conferred by the American College of Surgeons, indicates our capability of providing comprehensive care for every aspect of injury. UH’s extended regional trauma system includes four community-based Level III trauma centers and Northeast Ohio’s only Level I center for children and adolescents.

**Commemorating the five-year anniversary of the Harrington Discovery Institute at University Hospitals, part of The Harrington Project for Discovery & Development.** This initiative has supported 85 Harrington Scholars and assisted 20 start-up companies aiming to bridge the gap between drug discovery and commercialization.

**Furthering our community commitment, we announced the expansion of the UH Otis Moss Jr. Health Center.** A revolutionary concept, the center pairs UH health services with church counselors and educators to deliver quality, outpatient care. The expansion will enhance health education with “on-demand” primary care and other specialty offerings.

**Starting construction for the new UH Rainbow Center for Women & Children,** set to open during the summer of 2018. The center signals a more outward-reaching approach to healthcare that includes integrated social and economic services.

**Celebrating the successful completion of our Discover the Difference campaign,** a multi-year effort made possible through the generosity of more than 83,500 donors contributing nearly 185,000 gifts totaling $1.5 billion.

For over 150 years, University Hospitals has been advancing its mission: **To Heal. To Teach. To Discover.** It’s the foundation for our actions, bestowed by our founders to ensure the citizens of Northeast Ohio had access to vital healthcare services. From these humble roots, UH has evolved into a super-regional health system by pioneering research, developing new technologies and educating the next generation of care providers while delivering compassionate patient care.

In 2017, we celebrated our best year yet on many fronts, which you will read more about on the pages that follow. Our achievements have resulted from the efforts of our clinicians and employees who live our **UH core values: Excellence, Diversity, Integrity, Compassion and Teamwork.** Our people dedicate themselves daily to lowering the barriers to best-in-class healthcare, pushing the boundaries that lead to exciting new discoveries and **Advancing the Science of Health and the Art of Compassion.**

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**THOMAS F. ZENTY III**
CEO, UNIVERSITY HOSPITALS

**SANDRA PIANALTO**
CHAIR, BOARD OF DIRECTORS
Healthcare reform remains a daily news headline. An annual survey by the American College of Healthcare Executives cited “financial challenges” as the top issue confronting hospital leaders in 2017. And the biggest driver noted for that concern was shrinking government reimbursement.²

With regulators insisting on continued cuts to Medicaid and Medicare reimbursements, healthcare systems are faced with a precarious conundrum of needing to generate earnings to further their mission of caring for the community, and at the same time risking that legislators will view a hospital’s earnings as justification for further cuts. By many measures, 2017 was one of UH’s most successful years. Net operating income increased 15 percent to $144 million³, a remarkable accomplishment against the backdrop of a volatile industry. As a nonprofit, we reinvest our earnings back into our system by procuring advanced medical technologies, pioneering research, and developing and expanding programs and services that address emerging needs in our community.

Compounding the issue, commercial payors are also looking for opportunities to cut costs, putting the onus on providers to deliver solutions. Additionally, new entrants, market disruptors and unique affiliations are making transformative changes to the competitive landscape.

For over 150 years, UH has weathered many changing environments. Survivability is determined by foresight, agility and rapid adaptability to a shifting situation.

Key operating programs implemented across our system have been instrumental in not only yielding improvement in our operating margin, but placing us ahead of many other health systems. These initiatives include High-Reliability Medicine that drives down variability in practice and costs; and our Value Improvement Program that captures savings utilizing a lean Six-Sigma® approach.

UH has a long history of contributions to science and medicine, taking a leadership role in accelerating discovery, innovation and translation of scientific breakthroughs that enhance the lives of our patients, our community and the world. In 2017, we took steps to further our mission in academic medicine, investing significantly in our research faculty, augmenting infrastructure to facilitate clinical research through the UH Clinical Research Center, and recruiting outstanding faculty and leaders. And, UH recently established the UH Research Division, a new operating structure to manage academic efforts.

In 2017, we expanded the ICU on our main campus; opened an urgent care and emergency department in Kent; began construction of the new UH Rainbow Women and Children’s Center in MidTown; formed the new UH Spine Institute; expanded UH Seidman Cancer Center satellites to two community hospitals; and introduced patient-centered scheduling technology. Our 2018 capital plans are equally exciting, with funds earmarked for medical center and ambulatory upgrades, IT platform integration and UH Ventures, a new entity established to identify alternative sources of revenue.

As stewards of the organization’s financial health, my team and I manage a multi-pronged investment strategy, monitored by our Board, that protects our assets, keeps our debt exposure in check, hedges our interest rate risk and opportunistically captures market investment returns.

While many opportunities will present themselves in a consolidating market, UH will pursue smart growth that enhances our ability to provide a full continuum of services while delivering value-based care for our patients and payors.³

¹ CMS.gov  
² ACHE.org  
³ Operating income for 2016 was restated from the $104.3 million originally reported to $124.8 million reported currently to include the impact of adopting a new accounting standard related to pension expense, hence yielding a 15 percent increase year over year.
## About UH

Founded in 1866, not-for-profit entity

$3.9 billion system annual revenues

1.2 million+ individual patients

18 hospital locations, including 3 joint ventures

50+ health centers and outpatient facilities

3,116 registered beds

15 counties in service area

28,000+ physicians, nurses and employees
  • 1,179 residents and fellows
  • 100+ resident training programs
  • Northeast Ohio’s third-largest employer\(^1\)

4,000+ volunteers

Largest primary care network in region

1,800+ active clinical research studies
  including 600+ clinical trials under way

Home to:
  • Region’s only freestanding cancer hospital:
    UH Seidman Cancer Center – a founding member of the National Cancer Institute (NCI)
    Case Comprehensive Cancer Network – designated by NCI as 1 of 49 Comprehensive Cancer Centers in the U.S.
  • First proton therapy center in Ohio
  • Internationally renowned
    UH Rainbow Babies & Children’s Hospital

12 clinical care delivery institutes

National leader in population health management
  • One of the largest accountable care organizations in the U.S. (350,000+ lives)\(^2\)
  • Comprehensive health plan administrator for self-funded employers

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\(^1\) Crain’s Cleveland Business
\(^2\) HealthDataManagement.com
UH CLEVELAND MEDICAL CENTER RANKS HIGH AMONG AMERICA’S BEST HOSPITALS for advanced care, according to U.S. News & World Report. Our flagship academic medical center ranks in the nation’s Top 50 in eight specialties: Cancer; Ear, Nose & Throat; Gastroenterology and GI Surgery; Geriatrics; Gynecology; Nephrology; Neurology & Neurosurgery; and Orthopedics. U.S. News & World Report Best Children’s Hospitals rankings recognized UH Rainbow Babies & Children’s Hospital as one of the nation’s top children’s hospitals, ranking in nine of 10 pediatric specialties.

UH EARNED GLOBAL RECOGNITION FOR THE FIFTH TIME in 2017 as one of the World’s Most Ethical Companies, thanks to the culture of integrity that employees, physicians, volunteers, leaders and board members uphold. The Ethisphere Institute uses objective, consistent and standardized methods to assess companies based on documented excellence.

UH WAS NAMED A 2017 MOST WIRED HOSPITAL by Hospitals & Health Networks for the third straight year, for adopting and maintaining advanced technology to enhance patient care and advance patient engagement. UH is one of 461 hospitals and health systems nationwide, and one of only 32 in Ohio, to earn this distinction.

UH EARNED 15 NATIONAL ENVIRONMENTAL EXCELLENCE AWARDS from Practice Greenhealth, including the prestigious System for Change award. Practice Greenhealth awards recognize achievements in environmental-sustainability programs and improvements.

UH CLEVELAND MEDICAL CENTER, UH ELYRIA MEDICAL CENTER AND SOUTHWEST GENERAL HEALTH CENTER are among only four hospitals in Northeast Ohio and 5 percent nationally to earn a 2017 Distinguished Hospital Award for Clinical Excellence from Healthgrades, an online consumer resource. The list recognizes 258 hospitals that deliver high-quality care across multiple conditions and procedures, as measured by objective clinical outcomes.

UH CLEVELAND MEDICAL CENTER, UH GEAUGA, ST. JOHN AND SAMARITAN MEDICAL CENTERS, and UH joint-venture hospital Southwest General Health Center, were each honored with an “A” Hospital Safety Score by the Leapfrog Group, a national nonprofit healthcare ratings organization. The Leapfrog Hospital Safety Grade uses 27 measures of publicly-available hospital safety data to assign letter grades to more than 2,600 U.S. hospitals twice per year.

UH CONNEAUT, GENEVA, PARMA AND ST. JOHN MEDICAL CENTERS earned the highest-possible, five-star quality rating from the Centers for Medicare & Medicaid Services. UH Cleveland Medical Center and UH Ahuja, Bedford/Richmond, Geauga and Samaritan medical centers were each awarded four stars. Of these, seven UH system hospitals advanced their ratings since 2016. As with all healthcare ratings and rankings, UH encourages consumers to review and evaluate multiple resources to help them make informed healthcare decisions. 🌟
And we’re doing exactly that.

Patients, especially those with complex conditions, often need the most up-to-date diagnostic tests, medications or devices unavailable elsewhere. They need the very latest treatments to be easily accessible and they need them now. These patients come to UH because we are considered the “court of last resort.”

We advance the science of health in many ways, including the following:

**The Proton Therapy Center at UH Seidman Cancer Center**, the only facility of its kind in northern Ohio, provides highly-focused energy to attack tumors more effectively than traditional radiation therapy and with fewer side effects.

**UH Harrington Heart & Vascular Center** performs aortic valve replacements in awake-and-talking patients. This minimalist approach was developed and introduced in the U.S. by our experts at UH, and we now train physicians worldwide.

**Care providers at UH Rainbow Babies & Children’s Hospital** are applying the latest medical techniques, developed by researchers here, to improve lung function and vision for our tiniest, most fragile patients in the Quentin & Elisabeth Alexander Level IIIc Neonatal Intensive Care Unit.

**The Harrington Discovery Institute at University Hospitals** – part of The Harrington Project for Discovery & Development – continues to advance breakthrough discoveries into new medicines for patients. Since its inception in 2012, Harrington Discovery Institute has supported promising drug-development efforts by 85 scientists from 43 premier institutions in the U.S. and U.K.

**With more than 600 active clinical trials, UH is the No.1 site in Ohio for patients who benefit from state-of-the-art modalities before they’re available anywhere else.**

**UH trains the next generation of providers** through comprehensive education programs for medical students, resident physicians, fellows, podiatrists, nurses and other healthcare professionals at UH Cleveland Medical Center and several UH community hospitals.

The above priorities contribute to UH’s role as a fully integrated academic health system, as we offer personalized clinical care close to home and access to expert tertiary and quaternary services. As a super-regional health system focused on health and wellness, our expertise also helps keep our neighbors well and identifies individuals at risk for potential health challenges. UH’s impact on the health of our local community reaches over 1.2 million individuals, and the ripple effects of our teaching and discovery commitments contribute to a better world for us all.

By advancing the standard of care across our region, our nation and across the globe through our steadfast academic mission, the science of health is woven into the fabric of everything we do. 💪
Standing Up to Spinal Muscular Atrophy at UH

When 15-month-old Ja’Niyah Pinson lost her ability to sit, roll over and even hold her head up, her parents sought the advice of specialists at UH Rainbow Babies & Children’s Hospital.

Despite a diagnosis of 5q spinal muscular atrophy (SMA), the family now has hope for the future through the efforts of the UH Rainbow Spinal Muscular Atrophy Clinic team and a first-of-its-kind drug called Spinraza® (nusinersen). UH Rainbow was the first in Northeast Ohio, and only one of 123 medical centers in the U.S., to offer this advanced treatment.

SMA is a group of progressive and debilitating genetic diseases that can affect infants, children and young adults. In newborns, it is a leading genetic cause of infant mortality. Many patients never gain the ability to walk and lose other key motor skills, including sitting and moving their arms. Eventually, patients cannot breathe or swallow on their own. Before Spinraza was available for the treatment of 5q SMA (affecting 95 percent of patients with SMA), parents of children with the disease were only given instructions for supportive care because no treatment existed to stabilize the disease.

So, when Nancy Bass, MD, pediatric neurologist at UH Rainbow Babies & Children’s Hospital, learned about the life-changing effects of the spinal injection during the course of multiple trials in 2016, she asked Jessica Goldstein, MD, to join her to develop the UH Spinal Muscular Atrophy Clinic and begin Spinraza injections in patients. “We wanted to be able to provide this treatment for our patients with this disorder and become a center of excellence for this treatment,” said Dr. Bass.

In 2017, as UH Spinal Muscular Atrophy Clinic Co-directors, Drs. Bass and Goldstein treated 13 patients, both pediatric and adult, with remarkable results. Dr. Bass recalled her first meeting with Ja’Niyah. “She came to us as a floppy, hypotonic infant who was losing milestones,” said Dr. Bass. “She had learned to roll over and sit, but lost those skills. When I met her, she was very weak and couldn’t lift her arms above her head and couldn’t roll over at 15 months old.”

After her initial four doses of Spinraza, Dr. Bass said Ja’Niyah, now 2 years old, is reaching “amazing milestones,” such as sitting on her own and attempting to stand. “We have not seen this much of a response in any of our kids.”

“I think Dr. Bass is a miracle worker,” said Ja’Niyah’s mother Satin Ross. “The first day I met her, she assured me right away that we would find answers concerning my daughter – even after the diagnosis when I was scared about what was to come.

“Learning that there was a treatment for SMA made it a little easier to deal with, so I’m grateful for Spinraza and Dr. Bass. I know now with these treatments Ja’Niyah will be able to reach milestones she was unable to reach before.” 🧡
Knocking Out Cancer with CAR T Therapy

Every day, the battle rages on at the microscopic level in our bodies. T cells deploy, seeking and destroying infected or abnormal cells that cause illness.

Over the past decade, doctors and scientists have put this immune system machinery to work against some cancer cells. Through identifying markers on the surface of cancer cells, they’ve been able to take a person’s own normal T cells and reverse-engineer them to specifically seek out cells with those suspicious markers, thus destroying the cancer. These genetically engineered cells are known as chimeric antigen receptor, or CAR T cells.

A CAR T therapy clinical trial has received FDA approval to begin at UH Seidman Cancer Center, which will target lymphoma patients who haven’t responded to standard therapies.

“We hope this technique will avoid the need for a donor stem cell transplant,” said Marcos de Lima, MD, Director, Hematologic Malignancies and the Stem Cell Transplant Program, UH Seidman Medical Center; Don C. Dangler Endowed Director in Stem Cell Transplant. “It may well replace that. For lymphoma, we expect a 60-percent response rate. Of 10 people, three to four will experience long-lasting remissions.”

Unlike patients who receive re-engineered cells from a central processing facility, UH patients in the trial will receive cells engineered and cultured on site in the Cellular Therapy Laboratory shared by UH and Case Western Reserve University School of Medicine.

“Very few centers have established capacity to try this – very few have the capability to even talk about doing this,” Dr. de Lima explained. “It’s a platform that opens a lot of possibilities for us. Tomorrow an investigator may discover a new target, so we have the machinery to execute that. The sky is the limit. It’s not only a tool for the present, but a very solid investment for the future.”

As the science progresses, Dr. de Lima said he expects there will come a day when cancer patients are prescribed generic CAR T cells like any other drug, avoiding the cumbersome process of collecting, re-engineering, culturing and re-administering cells to individuals.

“We’d love to have an off-the-shelf product, and we are investigating toward that direction,” he said. “That’s definitely one of the dreams, that you’d have a medicine. Nobody is under the illusion that where we are now is the ‘destination’—there are lots of things to be done. But for now, it is for sure something fantastic.”
Amputation of a limb is one of the oldest surgeries on record – dating back to the first century.

Unfortunately, the procedure is still common today, fueled more recently by an aging population and the increasing number of patients with diabetes-related circulation problems. But at UH, Mehdi H. Shishehbor, DO, MPH, PhD, Director, Interventional Cardiovascular Center, UH Harrington Heart & Vascular Institute, in collaboration with colleagues in vascular surgery and wound care, is harnessing modern science and technology to make this oldest of surgeries a last resort for most patients.

Dr. Shishehbor is the national principal investigator – a “super-expert” to guide research – for four different clinical trials aimed at reducing leg amputation. “The most significant part of it is you have an opportunity to really impact the way a device or technology is used in medicine nationwide,” he said.

Potential solutions under study run the gamut, from an injected gene therapy that encourages new blood vessels to form around a non-healing wound, to a new device that relies on a drug-coated balloon (rather than a metal stent) to open blocked leg arteries.

Notably, UH is the first hospital system in the world to study whether patients with artery blockages in the legs can be successfully treated via the radial artery in the wrist using special devices that were developed in Japan in collaboration with Dr. Shishehbor.

“It’s a series of devices that are able to complete a procedure which is currently being done through the groin,” Dr. Shishehbor said. “After a major procedure, patients can go home in a couple of hours.”

This procedure could result in better patient stratification and reduce health care cost. And UH is one of just five centers in the U.S. offering a truly unique treatment for patients who seem otherwise destined for amputation. For these patients, Dr. Shishehbor and his team can re-engineer the circulatory system, diverting blood flow from the arteries that are blocked to the veins.

“Below the knee, we can take an artery and connect it to a vein, and have the vein become the new artery. We can then supply the blood to the foot through the vein.

“I’m really excited about it because it gives us the opportunity to treat patients that would otherwise undergo major amputation. It’s so novel and such a big deal.”
The Harrington Project for Discovery & Development extends UH’s vision for advancing the science of health across the U.S. and around the world. By enabling inventive scientists to turn their discoveries into medicines that improve human health, UH closes the gap between promising research and drug commercialization, elevating the standard of healthcare globally. A new funding model for drug discovery and development, The Harrington Project combines the nonprofit Harrington Discovery Institute with BioMotiv, a for-profit, mission-aligned development company.

The Harrington Scholars, top physician-scientists and academic researchers from leading medical institutions, form the core of Harrington Discovery Institute. Selected in a competitive application process, the scholars receive financial support and guidance on all aspects of drug discovery through Harrington Discovery Institute’s Innovation Support Center.

The unique combination of funding and mentoring successfully compresses the timeline for advancing promising discoveries into the commercial realm. At the appropriate stage, scholars have facilitated access to BioMotiv, and other investors, that can underwrite the commercialization of their work. Through this process, Harrington Scholars add to the store of knowledge about some of mankind’s most serious diseases, making meaningful contributions toward treatments and cures.

Since its founding in 2012, The Harrington Project has supported 85 scientists, the launch of 20 companies, the licensing of five programs to major pharmaceutical companies, and enabled five drugs to enter clinical trials. Established with a $50 million gift from the Harrington family of Hudson, Ohio, The Harrington Project has raised more than $300 million from supporters, investors and philanthropists who share in its vision of advancing the science of health by turning promising discoveries into medicines.
Advancing the Science of Cystic Fibrosis Treatment

Promising research is leading to advanced therapies for patients with cystic fibrosis (CF).

Benjamin Gaston, MD, Division Chief, Pediatric Pulmonology, Allergy & Immunology, UH Rainbow Babies & Children’s Hospital, received a $13.3 million grant from the National Heart, Lung and Blood Institute (NHLBI) of the National Institutes of Health (NIH) to create new, personalized therapies for patients with severe CF or asthma. Dr. Gaston and his co-investigators are studying the effects of novel drug combinations on airway cells to determine which drugs will likely work best on individual patients. “The idea is to get the right treatment to the right patient,” Dr. Gaston said. “It’s a new direction for NHLBI to personalize these therapies.”

While new CF drugs have been introduced, they are effective in only a relatively small population of CF patients because of the great patient-to-patient variability. This research holds great promise for developing individualized treatment for patients. Dr. Gaston and fellow researchers are also studying the effects of S-nitrosothiols on CF. “The airway naturally makes molecules that can improve CF cell function, but levels are very low in CF patients,” said Dr. Gaston. NIH trainee James Seckler, PhD, worked with Dr. Gaston and others to develop a new sensor that detects these molecules, so treatment conditions that increase levels can be identified.

In related work, Dr. Gaston is testing whether raising the pH of children’s airways with alkaline solutions will allow treatment drugs to work better, since many children with severe asthma or cystic fibrosis have chronically acidic airways.

UH researchers are also studying stem cells for potential future applications in CF. James Chmiel, MD, Director, Cystic Fibrosis Therapeutics Development Center, UH Rainbow Babies & Children’s Hospital, is the principal investigator of a first-in-the-world clinical trial using human adult mesenchymal stem cells (hMSCs) to reduce inflammation and infection among patients with CF.

“When these stem cells are infused, they go to sites of infection and inflammation,” said Dr. Chmiel. “Essentially, the cells monitor what’s going on in the environment and respond to it in an attempt to bring the abnormal environment back into equilibrium. In CF, the inflammatory response is really out of proportion to the burden of infection, and this results in damage to the lungs.”

Early results show the therapy is safe and well tolerated. Dr. Chmiel credits physicians and scientists within the Divisions of Pediatric Pulmonology, Hematology/Oncology, and the National Center of Regenerative Medicine at Case Western Reserve University with bringing this clinical trial to fruition. The CF stem cell trial at UH Rainbow is funded by the Cystic Fibrosis Foundation.

“We’re fortunate because our patients can benefit from the legacy of research here at UH Rainbow Babies & Children’s Hospital,” Dr. Chmiel said. “An active research program allows us as investigators to participate in cutting-edge science, which is exciting. But, more importantly, our research program allows us to create opportunities for our patients to avail themselves of new therapies before they’re commercially available.”

*In general, National Institutes of Health funding for basic and clinical research is awarded to the School of Medicine at Case Western Reserve University.
New Therapies for BPH

Urologists at the UH Kidney Stones and Minimally Invasive Prostate Surgery Program provide the latest therapies to treat benign prostatic hyperplasia (BPH), including HoLEP (holmium laser enucleation of the prostate), GreenLight and UroLift™. UH urologist Ehud Gnessin, MD, is the only surgeon in Northeast Ohio – and one of only a few in the U.S.– who performs HoLEP for treatment of BPH, an enlargement of the prostate gland. In this procedure, a holmium laser is used to separate the prostate gland tissue from the prostate capsule, allowing for complete removal of the benign tissue. “Probably the best modality available today is the HoLEP procedure,” said Dr. Gnessin. “We get excellent outcomes, and the patient is usually discharged either the day of surgery or the next day.”

Another option is GreenLight laser for photoselective vaporization of the prostate (PVP). “That’s a tool that uses laser energy to remove prostate tissue, as opposed to the traditional method for surgical removal,” said Edward Cherullo, MD, West Region Urology Director, University Hospitals. The procedure causes less blood loss and fewer symptoms during the recovery period.

A newer minimally invasive procedure is UroLift, which uses two to six implants to pull the prostate away from the urethra on both sides, and then holds it in place. “This procedure is a nice alternative, because the side effects are minimal,” said Irina Jaeger, MD, Division Chief, Urology, UH Ahuja Medical Center.

Calling on Smartphone Technology for Pediatric Cardiac Care

Although many teens rely heavily on their smartphones for entertainment, some adolescents with cardiac-related conditions depend on their mobile devices to provide lifesaving medical information. Bluetooth® technology has improved real-time data collection of cardiac events, and Christopher Snyder, MD, was the first in the U.S. to implant a smartphone-compatible cardiac monitor in a teen.

For individuals with spontaneous fainting or sporadic heart arrhythmias, Dr. Snyder, Division Chief, Pediatric Cardiology, UH Rainbow Babies & Children’s Hospital, KeyBank-Meyer Family Chair for Excellence in Leadership, can monitor heart rhythms and other activity within two to three minutes of an episode with an implanted Confirm Rx™. Dr. Snyder has implanted the technology in three patients. “We put it into the patient’s chest wall, just under the skin, and then this records his heart rhythm 24 hours a day, seven days a week,” he said. Previously, monitors would have to be hooked up to a machine to receive data. This new device, which is about the size of a paper clip, records the cardiac episode, stores it, and sends it to the patient’s smartphone and then the doctor.

Dr. Snyder believes patients gain a psychological benefit as well. Teens can monitor their heart from their smartphone, giving them a sense of control over their condition. “For a child or young adult, this is the greatest thing ever.” Parents gain peace of mind as well. “It reinvigorates me as a pediatric electrophysiologist to be able to tell a family, ‘When you call, you will hear from me within five or 10 minutes, and I will tell you exactly what is going on.’ That is so exciting.”

In 2017, UH transplant volume increased by 23 percent over the previous year. At the UH Transplant Institute, future growth is expected through several initiatives and program enhancements, for both adult and pediatric patients.
Talking with Ted Teknos, MD
PRESIDENT, UH SEIDMAN CANCER CENTER

Q: What attracted you to UH Seidman Cancer Center?
A: I knew the strong reputation UH Seidman Cancer Center had established in the field of oncology, and I was impressed with the compassion on display when I came here. Outstanding, compassionate, clinical care defines the culture here. I also was very pleasantly surprised with the depth of the research being done through our membership in the Case Comprehensive Cancer Center by an impressive array of scientists.

Q: How does UH Seidman Cancer Center’s expansive network benefit patients?
A: We are creating greater healthcare value for our patients, which translates into providing the highest-quality care while minimizing costs. Most healthcare systems aren’t able to report on health outcomes and cost because care is fragmented. I was drawn to the comprehensiveness of UH that includes every part of the patient continuum – from primary care to home care.

We want patients at any of our 18 clinical sites, and our cancer hospital downtown, to have a common patient-focused experience.

Q: What are the important trends in cancer care? How is UH addressing these developments?
Immunotherapy is the most exciting trend. CAR T cell therapy holds the greatest potential in providing targeted and curative treatments for a variety of hematologic and solid tumor malignancies. UH Seidman’s exceptional bone marrow transplant group has been able to successfully manufacture CAR T cells for human use – something very few health systems can generate – and we expect to launch clinical trials exclusively for UH patients. This is a particular point of pride for our institution.

Genetic sequencing is providing more targeted and precise treatments for cancer. UH Seidman currently performs next-generation sequencing on a large percentage of patients to better inform our therapeutic choices. UH Seidman has become a leader in precision medicine capabilities through a significant financial investment and tremendous technical expertise.

In radiation therapy, UH Seidman provides the region’s only proton beam. This modality is particularly effective in treating pediatric and adult brain tumors, allowing for optimal tumor eradication while minimizing damage to surrounding tissues.

Finally, minimally invasive surgical techniques allow for as little disruption as possible to normal anatomy while completely removing cancerous tissue. At UH, robotic surgery, image-guided surgery and augmented surgical resection through tumor labeling are at the leading edge of medicine.

Q: In addition to leading UH Seidman, do you continue to see patients and perform surgeries?
A: Being a surgeon and a clinician is in my DNA. That’s what I was trained to do, and that’s where I get the most satisfaction. The relationships I have formed with patients are the most treasured parts of my profession.
Proton Therapy Zeroes in to Attack Left-Sided Breast Cancer

UH is advancing the science of health as the first hospital in the state – and the only one in Northeast Ohio – to offer a leading-edge cancer treatment that targets tumors while sparing surrounding organs.

Proton therapy is especially useful for breast cancer on the left side, as it significantly reduces unnecessary radiation doses to the heart and lungs. This targeted treatment also is used in localized tumors, such as those in the head, neck, lungs and spinal cord. Highly-charged, radioactive particles penetrate the cancer, sparing healthy tissue and adjacent organs.

“If you can minimize radiation treatment to non-targeted tissue, in this case the heart and lungs, that’s a huge advantage,” said UH radiation oncologist Tithi Biswas, MD.

“When you are treating younger patients with early-stage breast cancer, you don’t want to cause treatment toxicity. We want to increase cure rates and lower treatment side effects for cancer patients.”

UH began offering proton therapy to children and adults in summer 2016. For children and young adults, proton therapy has the potential to reduce the risk for developing radiation-induced secondary cancers that may occur decades after treatment.

Before proton therapy was available at UH, patients had to travel hundreds of miles to take advantage of this advanced technology.

The Proton Therapy Center is located on UH’s main campus, providing easy access for patients of UH Seidman Cancer Center and UH Rainbow Babies & Children’s Hospital.
A PERSPECTIVE

On the Art of Compassion

Compassion is a feeling that you can’t touch with your fingers – but you definitely realize when you experience or witness it. I know I did.

One particularly lovely day last spring, I glanced out a window at UH Cleveland Medical Center and was fascinated by the sight of a small group of individuals in the adjacent courtyard. Five UH employees, each wearing a yellow isolation gown and mask, were chatting with a wheelchair-bound patient who was tethered to an intravenous line and several mechanical devices.

I later learned that these employees, from one of our intensive care units, had spent considerable time planning and coordinating this brief outdoor gathering. Working together, the team volunteered to carefully transport the patient and his lifesaving equipment from the unit to the courtyard. The reason? They listened to and acted on the patient’s humble request: The man had been in the ICU for an extended period and asked if he could go outside when the weather turned nice.

Although seriously ill, the man smiled while telling his care team about the joy he felt as the sun shone on his face for the first time in many days. He was truly grateful for the empathy his caregivers shared with him.

UH employees, physicians and volunteers constantly display their compassionate side as they interact with patients, families, visitors and each other. Kind-heartedness comes in many forms, like helping someone with directions in one of our hospitals, chatting with a person while their loved one is in surgery, or taking extra time to answer questions about a recently delivered diagnosis. Because compassion is firmly embedded in our DNA, people who come to UH physician offices, health centers and hospitals can expect to feel welcome, understood, listened to and comforted during some of the most vulnerable moments in their lives.

Today, consumers expect their care will be personalized and provide great value. After all, people have more choices for providers than ever before. And because UH has been Advancing the Science of Health and the Art of Compassion for more than 150 years, our patients don’t need to settle for one or the other. At UH, they are not just “a disease” – each patient is a unique person with unique concerns.

As we saw in the example above, compassion is truly an art form at UH. And, fortunately for our patients, the UH artists are true masters at their craft.

JEAN BARRETT BLAKE, RN, BSN, MJ
Chief Nursing Officer
University Hospitals
In his nondescript office filled with personal photos, plaques inscribed with historical quotes, and books offering inspiration, sits a basket of handwritten notes and pictures of patients who have kept in touch over the years with pediatric surgeon Edward M. Barksdale Jr., MD.

“I tell parents to forget my name after the surgery, but I don’t forget theirs,” said Dr. Barksdale, Vice Chairman, Department of Pediatric Surgery and Division Chief, Pediatric General and Thoracic Surgery, UH Rainbow Babies & Children’s Hospital, and Robert J. Izant, Jr., MD, Chair in Pediatric Surgery. “I read the notes the parents have written, and it empowers me.”

Beyond his technical skill as a board-certified pediatric and adult surgeon, Dr. Barksdale is greatly impacted by his upbringing and his philosophy on life that extend into the compassionate care he provides his patients. “I have to connect with families, particularly mothers, and mothers don’t connect with ego,” he explained. “Part of developing technical mastery is to do your very best to develop intrapersonal authenticity to show you’re real. I’ve often said that a mother will never allow you to touch her child, until you touch her heart.”

The connection is made through deep listening and being fully present with people – a skill Dr. Barksdale said his father practiced. “His life was to heal me when I was hurt, and to empower me to be strong. My goal with patients is to heal them when they’re hurt and to empower them to make them strong – and then different from my father – is to completely disappear from their life. I tell people my goal is to help them forget I ever existed.”

This ability to connect with patients can further healing, as noted in “How to Heal: A Guide for Caregivers,” by Jeff Kane – one of the books in Dr. Barksdale’s office. “I have often told residents and the team, we cannot cure everyone – I do a lot of cancer surgery, but we can heal everyone,” said Dr. Barksdale. “Cure and healing are very different. Part of healing is that ability to find out what the needs of that individual patient are and to try to connect with those needs – through your technique and through your head, hands and heart – how to fill in those gaps in those people who have become broken.”

Dr. Barksdale said that so much of who he is today was influenced by growing up in the south. In the 1960s, Rev. Dr. Martin Luther King Jr. visited his family’s home to encourage them to advance civil rights through nonviolence, as his sister, Lynda, and a friend were the first to integrate E.G. Glass High School, in Lynchburg, Virginia. He said that although he came from a “barely working-class family,” failure wasn’t about whether he would go to medical school though. “For me, failure meant that my life wouldn’t matter,” he said. “My grandmother would say to try to just matter and to have an impact – and to do that in a way that doesn’t necessarily celebrate you as an individual.”

Upon recollecting the complexity of several patients’ surgeries, Dr. Barksdale said the UH ICU offers the highest level of technique and care. “It is an orchestra in a symphony of care, and it isn’t just me.”

He also stated that his mission is to value everyone he meets and to bring value to everything he touches. “I have long used the term high tech and high touch. I don’t think the two components are disconnected.”

Before leaving to see a patient he hadn’t seen in five years – his first patient at UH – Dr. Barksdale noted a pearl of wisdom from his grandmother. “Remember to be a human being, not a human doing.” ♡
When a newborn’s peaceful slumber is interrupted by a distinctive, irritable cry beyond what most babies produce, UH nurses and physicians often recognize the symptoms of opiate withdrawal. Their compassionate care of babies with neonatal abstinence syndrome (NAS) goes beyond the strict weaning protocol to include comforting the infant and educating the mother.

Traci Craver, RN, CNP, Clinical Nurse Manager, Neonatal Step-down Unit, UH Rainbow Babies & Children’s Hospital, said NAS newborns are generally much fussier, exhibit light and sound sensitivity, and have feeding issues. “Right at the beginning, we provide nonpharmaceutical measures,” she said. “If the baby has been exposed in utero, we dim the lights and the babies are snuggled and wrapped. They are held and fed frequently.”

Nurses and eight trained volunteer “cuddlers” care for the babies. Volunteers must have at least one year of dedicated experience at UH, said Traci. “These volunteers are trained to understand the signs of NAS, and provide swaddling and feeding. Sometimes the babies need to be held up to three hours until the next feeding.”

Sadly, some babies remain inconsolable and do not respond to the nonpharmaceutical measures to calm down. That’s when NAS babies begin a 10-day medication dosing regimen. “We watch them for three days on a dose, and once they receive a stable Modified Finnegan Neonatal Abstinence Score, they are weaned every day and scored every three hours,” said Traci. “Sometimes they plateau and sometimes they go backward, so it takes about two weeks. They have to be off 48 hours to ensure that they don’t rebound.”

Over the past two years, around 70 NAS babies have been seen each year, representing about five percent of NICU admissions, said Traci. “There are more who stay in UH MacDonald and go home not requiring treatment.”

Mothers of NAS babies may be currently opiate-addicted – either from street drugs or opioid medications – or in treatment. When mothers are provided a replacement drug in treatment, such as methadone, they may not know that their baby will still experience opiate withdrawal once born. Sadly, after delivery, some mothers never visit their babies and some of these infants will wind up in foster care, said Traci.

On a bright note, about 70 percent of NAS babies will stay with their mothers after hospital discharge, requiring a care plan from nurses and social workers. “We try to keep the family together and teach the parent to care for this baby and understand his or her needs,” said Traci. “We are their partners in care.” 🍼
In 2016 alone, 116 people died every day in the U.S. from an opioid-related drug overdose. The drain on our society continues to climb, with economic costs surpassing $500 billion in 2016. Ohio has been hit particularly hard by the epidemic, with an unintentional drug overdose death rate surpassed only by West Virginia. Nearly 3,500 Ohioans died from opioid-related overdoses in 2016, up 35 percent from the prior year.

These statistics are alarming, but what should hit home the hardest is that the epidemic is everywhere, affecting all ages and all neighborhoods. Addiction is a chronic illness just like diabetes.

According to the Federal Reserve, the opioid crisis has negatively impacted the job market. A growing segment of the population can’t work due to opioid usage or failing drug tests. Add to that, the lost productivity in the workforce due to employees worrying about a family member or friend afflicted with the disease.

So what do we do? Much like previous societal threats, such as teen pregnancy, drunk driving and AIDS, we need a cultural shift in how we talk about the issue. Teen pregnancy declined 46 percent; alcohol-impaired driving fatalities are down 27 percent; and the number of annual HIV infections in the U.S. decreased 18 percent. If we look at reduction efforts for historical societal burdens as a barometer for success, we have put more emphasis on alternative treatments to pain management, such as radiofrequency ablation, neuromodulation, acupuncture, physical therapy and music therapy. And soon, via the establishment of the UH Pain Management Institute, we will implement a comprehensive pain management strategy targeting acute pain, chronic pain and addiction treatment. We aren’t preaching a draconian approach. Prescription opioids still serve as an appropriate pain management therapy, but we must be pragmatic.

Mental illness plays a big factor in addiction, yet mental illness remains a taboo topic. We will continue to advocate at the local, state and federal levels to better align policy so that government and commercial insurers provide better coverage for alternative therapies and mental health counseling.

Join with UH as we take a stand to help eradicate the epidemic in our community.

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1 National Institute on Drug Abuse (NIDA).
2 HHS.gov; 2016 National Center for Health Statistics (NCHS) Data Brief No. 293, December 2017
3 HHS.gov; CEA Report: The underestimated cost of the opioid crisis, 2017
4 CDC Wonder database, 2016 unintentional drug-induced deaths by state
5 Ohio Department of Health; opioid drug overdose deaths includes prescription opioids, fentanyl and heroin
A nurse’s calling to help and heal people resonates throughout her entire life – and not just during an intense shift.

Andrea Delfs, RN, never hesitated when she came upon a terrible accident on her way to work one summer evening. Before the ambulance arrived, Andrea sprang into action when she spotted a limp, injured child being pulled from a wrecked van.

The UH Parma Medical Center registered nurse performed CPR on the 11-year-old girl, breathing life back into her body and hope into the shaken driver of the van. She called out to passersby not to move the other accident victims, which included six children between the ages of 1 to 10 years old.

“I was just meant to be there, in the right place at the right time,” said Andrea, who detoured from her usual commute to pick up coffee before her night shift at the hospital.

“I have always wanted to be a nurse, and as a nurse I have learned how precious life is, how precious each moment is. And if I can make a difference in one person’s life, then I know I am on the right path. This tragic event gave me the chance to see what our actions and training can really do. It gave that girl a chance to grow up.”

Even after the ambulance and fire truck arrived, Andrea, who works in UH Parma’s Harrington Heart & Vascular Institute, continued to assist the paramedics with the other accident victims. The Parma Fire Department thanked her for “outstanding assistance on a devastating accident,” and acknowledged Andrea’s actions likely saved the child’s life by keeping blood and oxygen flowing to her vital organs while EMS was en route.

“You have to realize the importance of these everyday heroes,” said fireman TJ Martin.
On the Road to Recovery

When 56-year-old Jeff Colvin, a long-haul driver from Alabama, suffered a “widow-maker” heart attack while at a truck stop in Northeast Ohio, he put his life in the hands of strangers. It didn’t take long for Jeff and his family to realize that his University Hospitals caregivers were people who cared.

“I received the phone call that no wife wants to receive,” Jeff’s wife, Rita, said, when she was told that her husband of 32 years had suffered a heart attack. In 12 hours, she and their daughter Chelsea made the 700-plus mile trip to Cleveland from Oxford, Alabama, to be by Jeff’s side.

“When I arrived, my husband was resting comfortably in the cardiac intensive care unit,” said Rita. UH Harrington Heart & Vascular Institute interventional cardiologist Ankur Kalra, MD, had performed an angioplasty on Jeff to restore blood flow in his left anterior descending artery, which had been 100-percent blocked.

“Dr. Kalra spent time with us explaining the procedure and showing us before-and-after photos. He told us that another of Jeff’s major vessels, the left circumflex artery, was 80 percent blocked, requiring a second stent.” Rita continued, “Dr. Kalra made me feel so comfortable I requested that he do that procedure as well.”

After two heart catheterizations in four days, Jeff and his family left Cleveland to go home to Alabama. Dr. Kalra texted the family several times throughout the trip to check on Jeff’s condition and to ensure they were safe. He also personally contacted Jeff’s local cardiologist to provide details that would help ensure continuity of care.

“I am still in awe of the love and care shown to us by Dr. Kalra,” said Rita. “I can honestly say I have never met a doctor more compassionate and more dedicated to his patients.

“If this had to happen, I know that God had Jeff in the right place. I don’t believe he’d be here if he had the heart attack while he was home. You are all angels to us… God bless you all!”

On the Road to Recovery
### 2017 By the Numbers

#### Patient Care

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
</tr>
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<tbody>
<tr>
<td>Outpatient procedures</td>
<td>10,453,507</td>
<td>10,881,895</td>
</tr>
<tr>
<td>Physician visits</td>
<td>2,589,996</td>
<td>2,713,684</td>
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<tr>
<td>Emergency Department visits</td>
<td>463,764</td>
<td>460,330</td>
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<tr>
<td>Urgent Care visits</td>
<td>122,014</td>
<td>120,174</td>
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<tr>
<td>Unique patients seen</td>
<td>1,161,931</td>
<td>1,242,578</td>
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<tr>
<td>Registered beds</td>
<td>3,100</td>
<td>3,116</td>
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<tr>
<td>Total</td>
<td>144,728</td>
<td>142,693</td>
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#### Discharges

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<thead>
<tr>
<th></th>
<th>2016</th>
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</thead>
<tbody>
<tr>
<td>Acute</td>
<td>102,113</td>
<td>102,407</td>
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<tr>
<td>Observations</td>
<td>33,258</td>
<td>31,328</td>
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<tr>
<td>Post-acute</td>
<td>1,130</td>
<td>1,055</td>
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<tr>
<td>Newborns</td>
<td>8,227</td>
<td>7,903</td>
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<tr>
<td>Total</td>
<td>144,728</td>
<td>142,693</td>
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#### Surgical Cases

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<thead>
<tr>
<th></th>
<th>2016</th>
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<tbody>
<tr>
<td>Inpatient</td>
<td>30,330</td>
<td>30,181</td>
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<tr>
<td>Outpatient</td>
<td>79,119</td>
<td>81,166</td>
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<td>Total</td>
<td>109,449</td>
<td>111,347</td>
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#### Key Financial Statistics

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<tr>
<th></th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total operating revenues ($ in billions)</td>
<td>$3.79</td>
<td>$3.90</td>
</tr>
<tr>
<td>Operating income ($ in millions)²</td>
<td>$124.8</td>
<td>$143.8</td>
</tr>
<tr>
<td>Operating income margin</td>
<td>3.29%</td>
<td>3.69%</td>
</tr>
<tr>
<td>Net income ($ in millions)</td>
<td>$130.5</td>
<td>$253.4</td>
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</table>

¹ Certain amounts included in 2016 have been restated to conform to the 2017 presentation.

² Operating income for 2016 was restated to include the impact of adopting a new accounting standard related to pension expense, which conforms to the 2017 methodology.

³ Includes providers at UH-owned practices, plus residents, fellows and allied-health providers.

⁴ Includes CNP, CNS, MD, DDS, DO, PhD and DMD at the medical centers and free-standing ambulatory surgery centers who are not UH employees.

Statistical data excludes Southwest General Health Center and UH Rehabilitation hospitals. Includes Health Design Plus.

#### Education

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residents and fellows in training</td>
<td>1,148</td>
<td>1,179</td>
</tr>
<tr>
<td>Residency training programs</td>
<td>116</td>
<td>106</td>
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#### Research ($ in millions)

<table>
<thead>
<tr>
<th>Research Area</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joint UH-Case Western Reserve University (CWRU) School of Medicine basic science research</td>
<td>$95</td>
<td>$92</td>
</tr>
<tr>
<td>Joint UH-CWRU clinical &amp; translational research</td>
<td>$101</td>
<td>$108</td>
</tr>
<tr>
<td>Total sponsored research funding to CWRU School of Medicine attributable to UH (including NIH grants awarded at UH Cleveland Medical Center)</td>
<td>$196</td>
<td>$200</td>
</tr>
<tr>
<td>Total sponsored research funding to UH Cleveland Medical Center (including industry-sponsored clinical trials)</td>
<td>$61</td>
<td>$56</td>
</tr>
<tr>
<td>Total research</td>
<td>$257</td>
<td>$256</td>
</tr>
</tbody>
</table>

#### Employment

<table>
<thead>
<tr>
<th>Employment Category</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total nonphysician employees</td>
<td>24,270</td>
<td>23,745</td>
</tr>
<tr>
<td>UH providers (UHMP and UHMG) ³</td>
<td>3,565</td>
<td>3,907</td>
</tr>
<tr>
<td>Independents ⁴</td>
<td>1,163</td>
<td>1,447</td>
</tr>
<tr>
<td>Total UH providers</td>
<td>4,728</td>
<td>5,354</td>
</tr>
</tbody>
</table>

#### Payor Mix

- Medicare: 44.1%
- Medicaid: 22.3%
- Commercial: 26.1%
- Self Pay: 1.4%
- Other: 6.1%
UH Strategy
Science of Health
Innovating patient-centric treatment strategies

Building on a legacy of high-quality and patient-centric care and service, UH has grown into a super-regional health system. Utilizing a hub-and-spoke model, our community hospital network and physician providers (the spokes) cohesively integrate with our main campus anchor, UH Cleveland Medical Center (the hub), creating a seamless patient experience. World-renowned medical care is provided beyond our main campus in the communities where many of our customers reside. Additional value is garnered from having a consistent level of care, sharing of best practices, increasingly uniform operating systems, leveraged purchasing power, and back-office shared services that leverage economies of scale and ultimately reduce costs for our patients.

As an academic medical center, this hub-and-spoke framework effectively trains interns and residents as they are rotated within the hub for tertiary and quaternary healthcare learning and between the spokes for secondary learning. In a hub location, our specialists elevate the practice of medicine through focused research on a particular disease-state or chronic condition. Our capital and growth plans include the enhancement of some spoke locations to be more “hub-like” to provide additional acute care services at a lower cost for the patients we serve and thus enhance the patient experience.

UH’s goal is to provide the right care, at the right place, at the right time. Coordinated care results in higher quality, more efficient outcomes and improves the communication between patient and provider. Today, in addition to primary, secondary (specialty care), tertiary and quaternary care, and community hospitals, the UH super-regional network comprises: virtual and telehealth, ambulatory centers, urgent care, trauma and emergency centers, behavioral health, home health care, rehabilitation services, skilled nursing, integrative health, hospice and palliative care services.
Guided by our mission, we are furthering our investment in our **academic efforts** by focusing on five key components: supporting discovery and drug development; integrating research and clinical strengths and priorities through institute-based, disease-focused research; growing clinical and community-linked research programs; enhancing advanced clinical care programs; and training the next generation of medical providers. Through these efforts, we aim to enhance the standards of care and improve the lives of our patients, community and the world. Simply stated, research creates value. It enables the acquisition of top medical talent. And it attracts patients who want to seek the highest levels of care.

**Research Vision**
Clinical Care & Research Synergistically Drive Excellence

Recently, we established the **UH Research Division**, a new operating structure to manage academic efforts. The UH Clinical Research Center is home to the largest clinical trial site in Ohio with more than 1,800 active clinical research studies including more than 600 clinical trials in process. And, the Harrington Project for Discovery & Development, a unique initiative based at UH, continues to garner international praise as an innovative model to support drug discovery and development.

Beyond the operational aspects of the model lie the strategic components that drive the system forward. While many opportunities will present themselves in a consolidating market, UH will pursue strategic opportunities that align with our goal of providing a full continuum of care while enhancing value-based care for our patients and payor partners.

These opportunities may be through organic growth, such as our recent formation of UH Ventures where revenues for our Specialty Pharmacy division surpassed $29 million in 2017, far exceeding our target. They may be through joint ventures, such as our agreements with Southwest General or Kindred Healthcare for rehabilitation services. Or we may pursue affiliation agreements, such as The Congenital Heart Collaborative with Nationwide Children’s Hospital in Columbus. Our previous experience in successfully integrating community hospitals demonstrates our ability to grow inorganically as well should sound opportunities arise.

**Art of Compassion**
**Painting a masterpiece for our community**
With 1.2 million patients coming through our doors every year, we are in a unique position to improve the overall health of our community. It’s not a responsibility we take lightly. As such, we have invested significantly in health education and wellness programs, building the largest primary care network in the region, developing screening campaigns, deploying targeted outreach for the management of chronic conditions, and providing individualized case management for those who have more complex care needs.
Population health management starts with our primary care providers and specialists. In 2016, we launched the **UH Quality Care Network (UHQCN)**, a clinically integrated network comprising UH-employed and independent providers in Northeast Ohio. With over 5,600 providers in the network, UHQCN accelerates population health improvement through the implementation of evidence-based guidelines for standards of care. Providers in the network are rewarded for patient care collaboration as well as attainment of quality goals.

**UH ACO Population Health Services**

Accountable Care Organizations (ACOs) are another key component in population health management. An ACO works with providers, members and payors to reduce medical costs while improving the patient experience and quality of care. In a nutshell, providers are encouraged to keep patients healthy. UH first started an ACO in 2010 to better manage the cost and quality of care for our own self-insured employee medical plan. Recognizing the value we can provide to the community, we expanded our ACO to commercially-insured, Medicare and Medicaid populations. Today, the UH ACO covers more than 350,000 members and beneficiaries and ranks as one of the largest ACOs in the nation. For UH ACO populations, we regularly trend below industry benchmarks for cost of care. In 2017, the UH ACO achieved shared savings in its commercial ACO programs by surpassing targets for quality and for controlling medical costs. The UH ACO also earned quality and financial performance incentive payments for our commercial and Medicare Advantage ACO programs, generating over $4 million in shared savings for participating providers.

Health Design Plus (HDP), a third-party claims administrator acquired in 2015, takes us deeper into population health management and value-based care. As the manager of industry-leading **Centers of Excellence** (CoE) programs in cardiac, joint replacement, spine and bariatric surgery being offered by Fortune 500 companies, HDP has become a trusted name in CoE program administration. UH now serves as one of four CoE providers for bariatric surgery and opportunities are being pursued to expand UH’s reach as a CoE provider. These CoEs are chosen through a highly-selective process for providing excellent care and patient experience at a greater value to both the patient and the patient’s employer-sponsored health benefit plan.

Population health is also managed through outreach services in the community. **UH Otis Moss Jr. Health Center** provides high-quality patient care in a spiritually supportive environment, with a particular focus on at-risk individuals. The center offers family medicine and general pediatric services, plus social services and referrals to dietitians, pharmacists and other healthcare professionals. In 2017, we announced expansion of the center to include obesity/diabetes prevention and treatment, cancer and cardiovascular screening, mental health and addiction services.
In 2017, construction moved full speed ahead on our new outpatient healthcare center for obstetrics and gynecology and pediatrics in MidTown Cleveland. The **UH Rainbow Center for Women & Children**, opening summer of 2018, will house innovative programs for pediatric primary care, women’s healthcare, and social services as well as education programs to support patients, their families and the community.

Expansion projects like these also benefit the community via economic contribution. New construction creates business for others, adding jobs and new money into the local economy. Recently, we measured our **Economic Impact** to the state of Ohio and it surpassed $7.7 billion.

### UH’s Ohio Economic Impact

- **Total Economic Output**: $7.7+ (in billions)
- **Direct & Indirect Jobs**: 63,000
- **Spending on Goods & Services**: $580+ (in billions)
- **Labor Income**: $4.0+ (in billions)
- **Households Supported**: 44,000
- **Total State & Local Taxes**: $350+ (in millions)
- **Household Spending**: $2.5+ (in billions)

* Study conducted for calendar year 2016.

### Advancing the Business of Health

University Hospitals is consistently recognized for the quality and safety of care we provide to over one million patients every year. In 2016, we began a journey to become a **High-Reliability Organization** so we provide safe, evidence-based and effective care, driving out unnecessary variation and creating value for every patient, every day. Multidisciplinary teams comprising physicians, nurses, pharmacists, lab clinicians, imaging specialists, supply chain operators, IT personnel and front-line staff collaborate to achieve our stated objectives for **High Reliability Medicine** (HRM). HRM employs a new methodology that shifts from traditional expense reduction initiatives and instead combines all aspects of clinical delivery into one disease-based focus.

With these tenets in mind, the HRM teams focused on: improving patient safety and quality outcomes; improving throughput and efficiencies; lowering per-case direct variable costs; improving transparency around expectations of care and communication; and increasing use of technology for enhancing standardization around care. Our 2017 results for this HRM program exceeded our expectations with our total realized opportunity, which includes both cost savings and revenue improvement, surpassing $13 million.

Another way we advance HRM philosophies is through **12 UH clinical care institutes** that promote evidence-based standards of care. These institutes bring highly trained subspecialists together to share best practices in treatment modalities across the system. In 2017, UH added the Spine Institute and the Diagnostic Institute to the already established Digestive Health; Ear, Nose & Throat; Eye; Harrington Heart & Vascular; Neurological; Primary Care; Sports; Transplant; Urology; and Angie Fowler Adolescent & Young Adult Cancer institutes. But the benefits of “systemness” go beyond the clinical realm.
In a world where consumers are inundated with a barrage of choices, whether it’s television programming, shopping options or healthcare providers, the driver of distinction boils down to experience. In our business, that experience includes not only the quality and reliability of care our patients receive, but the ease of how they interact with us. And from our lens, that ease also translates to providing compassionate care. Patient experience permeates every strategic endeavor we initiate, including technological innovation.

From patient-facing applications like **UH Now** – which provides self-scheduling functionality, electronic health records information and provider locator options – to virtual visits and remote health monitoring, we offer patients convenient access to the care they need any time, any place. In 2017, we commenced the OneUH technology integration project that will consolidate all of our locations on common platforms for back-office infrastructure management, patient-safety compliance, clinical management and medical-records administration, thereby improving the patient experience and enhancing the brand proposition. By aggregating data onto common platforms, we also improve our ability to provide value-based care and population health management.

The industry rapidity of change in regulation, third-party payor requirements and medical policy as well as reimbursement parameters have created ongoing challenges and administrative burden for providers and patients. We have witnessed a cultural change driven by transparency, awareness, accountability and action for improvement that has elevated the principle of revenue cycle to the next level. At UH, we strive to positively impact the patient-payor-provider trilogy, ensuring optimization of clinical documentation and claims-processing collection of expected payment from both the payor and patient. Never before has “systemness” been more pronounced as a game-changer. Root cause resolution, standardization, normalization and repeatable processes drive our success. UH has made substantial investment in patient-centered clinical and business health-related technologies that enable seamless scheduling, billing, claims-payment processes and connectivity that drive toward our goal of providing our patients with “single billing” capability. In 2016, UH implemented strategies to mitigate payor denials by improving workflow, automation and clinical documentation to support acuity and severity of care, and expanded on mitigation efforts and strategies in 2017. Additionally, in an environment with higher volume and increasing regulatory requirements, we maintained a strong overall cost-to-collect ratio at 2.2 percent, below the industry median of 3.0 percent.*

Our **Value Improvement Program** captured $165 million in savings in 2017 utilizing a lean Six-Sigma® approach to identify cost-reduction and revenue-enhancement opportunities. This multi-year initiative comprises 18 strategic teams focused on identifying new system initiatives that coincide with their team objectives. Teams yielding the strongest results in 2017 included: Revenue Optimization, Pharmacy Services, Workforce Planning, Continuum of Care and Supply Chain.

In summary, we have built a healthcare system that puts the patient front-and-center with regard to every decision we make and every strategic initiative we deploy. We have built a system that provides high-quality healthcare close to home. We strengthened our academic mission and invested in population health management to ensure we continue pioneering medical breakthroughs and innovating community-based care models that will improve lives and lead to a healthier community. To safeguard UH’s leadership position and solidify its continued strength for both our patients and our employees, we have prepared for uncertainty surrounding our industry, positioned UH to capitalize on new opportunities, eliminated excess expense from the business, and provided for future capital reinvestment into the system. Most importantly, we have painted a healthy landscape where the **science of health** blends with the **art of compassion**.

*Advisory Board: 2017 Hospital Revenue Cycle Benchmarking Study
DEAR FRIENDS,

For University Hospitals, the communities we serve and the generations of patients that will be cared for in the years to come, 2017 was an historic and mission-affirming year, marked by profound generosity and inspiring impact.

• Support from Sara and Chris Connor is helping UH further its commitment to total health and wellness by expanding UH Connor Integrative Health Network. Led by Francoise Adan, MD, evidence-based nonpharmacologic therapies will be woven into patient care, leading to more comprehensive and tailored treatment plans.

• UH Harrington Discovery Institute, created through the visionary philanthropy of the Harrington Family, entered its fifth year of innovation and breakthrough research. A revolutionary model that carries groundbreaking drugs from bench to bedside, the institute has changed the conversation in the medical community and inspired novel collaborations.

• Construction began on the new UH Rainbow Center for Women & Children in Cleveland’s MidTown neighborhood. Focused on primary pediatric care and women’s health, the center will be the home of UH’s nationally recognized, innovative model of care to transform the health and wellness of the Cleveland community. Fully funded through philanthropy and external funding, the center is slated to open in summer 2018.

• And, of course, 2017 was the year we celebrated the completion of our monumental $1.5 billion Discover the Difference Campaign. The largest fundraising effort in UH history, it touched all areas of our health system, helping to expand services, support recruitment and training, and endow programs for future generations. The campaign changed the landscape of healthcare in our halls and in our community, transforming lives forever.

Like never before, last year was a true reflection of the unending compassion and support of our friends, benefactors and volunteer leaders. Their philanthropy fuels our pursuit of scientific achievement and their encouragement speaks to the core of our patient-focused mission.

Thank you for helping make 2017 a momentous year and for joining us in UH’s guiding vision: Advancing the Science of Health and the Art of Compassion.

SHELDON G. ADELMAN
Chair, Board Development Committee
University Hospitals
CARE FOR THE WHOLE PERSON

Sara and Chris Connor appreciate the power of integrative medicine, which is why, in 2011, they launched UH Connor Integrative Health Network led by program director Francoise Adan, MD. Blending conventional and integrative medicine, the program focuses on the whole person and empowers patients to partner with their healthcare team to take charge of their well-being.

In December, the Connors reinforced their commitment with a $6.5 million gift to strengthen and expand the program. Their contributions, totaling $8.5 million, are among the largest in the nation for integrative health and are positioning UH to become the nationally recognized model for clinical integration of evidence-based nonpharmacologic therapies.

Since established, UH Connor Integrative Health Network has grown significantly, serving more than 17,000 patients in 2017 with therapies ranging from acupuncture, massage therapy and meditation to osteopathic manipulative treatments, recommendations on supplements and nutrition, and more.

“Chris and Sara’s extraordinary generosity will allow us to accelerate our growth, expanding our services into more institutes and departments,” said Dr. Adan, who holds the Christopher M. and Sara H. Connor Chair in Integrative Health. “It will support clinician recruitment and help us train current UH physicians and staff to be internal champions. And it will also benefit our research arm, enabling us to provide further evidence of the benefits of these modalities.

For Dr. Adan, support from the Connors has meant much more than financial support. “Chris and Sara have been true mentors and guides. They have impacted my life and those of so many people through their gifts.” 🧡
World leaders in medicine, science and academia assembled in Cleveland to attend the Fifth Annual Harrington Scientific Symposium on May 23 and 24, 2017 and mark the significant milestones Harrington Discovery Institute – part of The Harrington Project – achieved in its first five years. “In 2012, the new drug development model we designed began to attract the notice of investigators, investors and the pharmaceutical industry. Now, five years later, they are taking notice of our accomplishments,” said Jonathan S. Stamler, MD, Harrington Discovery Institute President and Robert S. and Sylvia K. Reitman Family Foundation Distinguished Chair in Cardiovascular Innovation.

Ronald G. Harrington and his family’s vision for the future has been expressed through their extraordinary generosity. The significant financial support The Harrington Project has attracted is a means to an end – bringing new medicines to the bedside.

In addition to presentations from world-renowned physician-scientists, two Harrington Scholars shared their experiences as recipients of Harrington awards. 2015 Harrington Scholar-Innovator Marikki Laiho, MD, PhD, Johns Hopkins School of Medicine, described the progress she has made in two years with a potential cancer drug. She credited the Harrington Innovation Support Center for “bringing in really great experts in the areas where we have needed them,” helping to advance her lead compound to preclinical trials.

Likewise, for Jerri Rook, PhD, Vanderbilt University and a 2015 ADDF-Harrington Scholar, the Harrington Innovation Support Center has played a pivotal role in advancing her drug. She and her team discovered and are developing a new drug therapy to improve memory in Alzheimer’s disease patients. They began enrolling patients in a Phase I clinical trial in the summer of 2017. “Through the help of the Innovation Support Center, in two short years we have been able to navigate the Investigational New Drug process,” Dr. Rook stated. “Without the generosity of the Harrington family and this unprecedented model, we would not be going into this trial.”
GIFTS BENEFIT NEW CENTER IN MIDTOWN

Located on the corner of Euclid Avenue and East 59th Street, the new UH Rainbow Center for Women & Children will open summer 2018. The 40,000-square foot, three-story outpatient center will improve access to quality healthcare for area residents. Features will include proximity to the RTA HealthLine, ample free parking and co-located programs for pediatric primary care, women’s health, and social services, as well as dental and vision care. In 2017, the center received two significant gifts from local foundations:

Mandel Family Gift Benefits Community-Focused Center

In 1982, Morton L. Mandel began his role as founding chairman of MidTown Corridor, Inc., with a vision to promote and revitalize the connecting space between Downtown Cleveland and University Circle. Today, more than 35 years later, a diverse group of residents, businesses and nonprofits call MidTown home, and UH is proud to be moving into the neighborhood with the opening of the new UH Rainbow Center for Women & Children. Adding to this pride is that the Jack, Joseph and Mort Mandel Foundation and the Mandel Supporting Foundations made a $1 million commitment to the construction of the new center. The Jack, Joseph and Morton Mandel Lobby on the first floor will be named in recognition of their generous support.

“Mort Mandel is the father of MidTown,” said Patricia M. DePompei, RN, MSN, President, UH Rainbow Babies & Children’s and UH MacDonald Women’s hospitals. “Because of this connection, it is especially meaningful to receive the Mandel family’s investment in this vital community-focused project.”

KeyBank Foundation Supports Social Needs Programming

The KeyBank Foundation made a $1 million gift to support programming at the UH Rainbow Center.

Aligned with KeyBank’s longstanding focus on helping organizations that serve the public interest and address critical needs within the community, the grant will support UH’s efforts in social needs navigation and community outreach, and the efforts of the Community Advisory Board. The advisory board has been essential in strengthening connections within the community and providing insights for the new center. Helping navigate the social needs of patients, such as food access, safe housing, employment and more is part of caring for the whole person and family – a focus of the center’s model.

“KeyBank makes philanthropic investments in organizations and programs that prepare individuals for thriving futures,” said Lorraine Vega, Senior Vice President, Corporate Philanthropy, KeyBank. “We are proud to support programming at the new UH Rainbow Center.”

Members of the UH Rainbow Center for Women & Children Community Advisory Board
In September, UH friends and benefactors gathered at the Cleveland Museum of Art for the Annual Society of 1866 Celebration. UH presented 2017 Samuel Mather Visionary Awards to longtime supporters Connie and Jim Brown, as well as the Miracle Fund, with special recognition to Diana and Edward J. Hyland and Becky and Sean P. Hennessy. Jackson T. Wright Jr., MD, PhD was named the 2017 UH Distinguished Physician Award honoree.

Jim Brown, who passed away soon after receiving the Mather Award, and his wife Connie have advanced pediatric pulmonary research at UH Rainbow Babies & Children’s Hospital and supported the 6th floor renovations of Lerner Tower to provide dedicated space for cystic fibrosis care and research.

The Miracle Fund, inspired by Diana Hyland’s courageous battle against metastatic breast cancer, has raised more than $4.5 million since its inception in 2008, benefitting research at UH Seidman Cancer Center. Ned Hyland, Sean and Becky Hennessy and many friends and family members have played a role in the fund’s success.

Dr. Jackson Wright, Program Director, William T. Dahms, MD, Clinical Research Unit; and Director, Clinical Hypertension Program, UH Cleveland Medical Center, is widely regarded for his groundbreaking research and advancement of clinical care guidelines in hypertension for the benefit of patients worldwide. *(honored posthumously)*

From left: Daniel I. Simon, MD, President, UH Cleveland Medical Center; Sean Hennessy; Ned Hyland; Connie Brown; Jackson T. Wright Jr., MD, PhD; Thomas F. Zenty III, CEO, University Hospitals
SAMUEL MATHER SOCIETY

We gratefully acknowledge our distinguished members of the Samuel Mather Society for cumulative (lifetime) giving of $1 million or more. Samuel Mather (1837-1931), a renowned Cleveland industrialist, philanthropist and former University Hospitals Board Chairman and patient, was one of the most generous benefactors in the history of University Hospitals.

Mr.* and Mrs.* Severance A. Millikin Mr. and Mrs. Thomas G. Murdock Jr. Ride the Rainbow

SAMUEL MATHER SOCIETY $1 MILLION - $4.99 MILLION

Anonymous (5)


SAMUEL MATHER SOCIETY $5 MILLION - $9.99 MILLION

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Sheldon G. and Terry Adelman Alzheimer’s Drug Discovery Foundation Hudson B. Bishop, MD* Mary Jane and Jack Breen Centers for Dialysis Care’s Leonard C. Rosenberger Renal Research Foundation Mr. and Mrs. Christopher M. Connor John and Sharon Ferrich Family Fidelity Charitable Gift Fund Roe Green Barbara M. Jacobs* Key Foundation

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We gratefully acknowledge the exceptional generosity of our Benefactor Society members, whose cumulative (lifetime) giving totals $25,000-$999,999. The society recognizes individuals, family foundations, special events, associations, corporations and foundations.

* Deceased
◊ Children’s Miracle Network

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MEANINGFUL GIFTS OF APPRECIATION AND TRIBUTE

Every endowed position at UH has a story. From a grateful patient expressing appreciation for exceptional care to a family paying lasting tribute to a loved one, the meaning behind each endowed chair, master clinician and director is as unique as the title itself. They all, however, are advancing the field of medicine for the benefit of patients today, and for generations to come.

**Alexander and Sarah Cutler Chair in Men’s Health**

A generous $1.5 million gift from Sandy and Sally Cutler created the Alexander and Sarah Cutler Chair in Men’s Health. The endowed position recognizes the innovative and life-saving work of Chris M. Gonzalez, MD, Chair, Department of Urology, UH Cleveland Medical Center and Director, UH Urology Institute, who was named the Cutler Chair in December.

“The Cutlers are amazing advocates and allies in our efforts to expand care in men’s health,” said Dr. Gonzalez. “This chair will help drive innovation and research in the particularly important areas of urology, oncology, endocrinology and digestive health.”

**Michael and Grace Drusinsky Chair in Orthopaedic Surgery and Sports Medicine**

Michael and Grace Drusinsky, longtime UH supporters and volunteer leaders, committed $1.5 million to establish the Michael and Grace Drusinsky Chair in Orthopaedic Surgery and Sports Medicine. The gift was inspired by the extraordinary care Michael received at UH Sports Medicine Institute and, specifically, from Robert J. Gillespie, MD, Associate Program Director, Orthopedic Surgery and Chief, Shoulder and Elbow Surgery, UH Cleveland Medical Center.

“Michael and Grace are incredibly generous and are committed to our community and its healthcare,” said Dr. Gillespie, who was appointed the Drusinsky Chair last summer. “I am incredibly humbled to be the first recipient of a chair that bears their name.”
Ida and Irwin Haber and Wei-Shen Chin, MD, Chair in Radiology

The Ida and Irwin Haber and Wei-Shen Chin, MD, Chair in Radiology was established in December by Ida and Irwin Haber, with fellow philanthropists Wei-Shen Chin, MD, and Lynn Thi Le, MD, Kevin and Lisa Chernikoff, Terry and Mary Fergus, and Mike and Laura Heuer of the Andrews Foundation. Pablo R. Ros, MD, MPH, PhD, FACR, who has led the Department of Radiology since 2009, was named the inaugural Haber Chin Chair in December.

“Endowed positions recognize the best physicians in the nation, and Pablo is the best of the best,” said Ida. “He is a tremendous asset to UH and we’re proud to support his vision for making the Department of Radiology a national leader in imaging innovation.”

Alan H. Markowitz, MD, Master Clinician for Cardiac and Vascular Surgery

In June, the Alan H. Markowitz, MD, Master Clinician for Cardiac and Vascular Surgery was created through the collective philanthropy of many friends and benefactors. The position recognizes the distinguished career of Alan H. Markowitz, MD, Director, UH Heart Valve Center, UH Harrington Heart & Vascular Institute and Marcella “Dolly” Haugh Chair in Valvular Surgery. Vikram S. Kashyap, MD, was named the inaugural appointee in July.

“The treatment of complex aortic diseases spans vascular and cardiac surgery,” said Dr. Markowitz. “This position will support Vik’s efforts to create a seamless, innovative collaboration between these two divisions.”

STERIS Chair of Excellence in Medicine

A $1.5 million contribution from the STERIS Foundation endowed the STERIS Chair of Excellence in Medicine in August. UH Physician-in-Chief, Robert A. Salata, MD, is the inaugural appointee to the position. An internationally recognized researcher and expert in infectious diseases and global health, Dr. Salata also serves as Medical Director, Infection Control and Prevention; Chair, Department of Medicine, University Hospitals; and oversees the Roe Green Center for Travel Medicine. In 2015, he was named Master Clinician in Infectious Disease, a position funded in part by STERIS Corporation.
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In 1903, the Philoptochos Society of the Greek Orthodox Archdiocese of America was founded to carry on a ministry of love and charity through the establishment of auxiliaries and related organizations throughout the Archdiocese. Today, the Philoptochos is a vast network of local and regional foundations and auxiliaries that have raised millions of dollars over the years. The Philoptochos offers grants that support charitable, health, educational, and social service programs that benefit the poor and those in need throughout the Archdiocese of America.

The Philoptochos is committed to making a lasting difference in the lives of those in need. The Philoptochos funds selected charities that align with the values and mission of the Archdiocese of America. These charities are committed to providing support to those in need, improving the quality of life for those living in poverty, and advancing the mission of the Church. The Philoptochos uses its resources to support these organizations and help ensure that they can continue to provide critical services to those in need.

The Philoptochos is a network of local and regional foundations and auxiliaries that has raised millions of dollars over the years. The Philoptochos funds selected charities that align with the values and mission of the Archdiocese of America. These charities are committed to providing support to those in need, improving the quality of life for those living in poverty, and advancing the mission of the Church. The Philoptochos uses its resources to support these organizations and help ensure that they can continue to provide critical services to those in need.
Jane and Jon Outcalt’s involvement at UH began in 1970 with the birth of their son, Ken, at UH MacDonald Women’s Hospital. In the years that followed, Jane served on the Board of Rainbow Babies & Children’s Foundation and Jon later joined the UH Ahuja Medical Center Leadership Council. Active in their community and both possessing a charitable nature, the couple supported the mission of the hospital, but it was a family medical emergency that forever tied the Outcalts to UH Rainbow Babies & Children’s Hospital.

“Years ago, our family found itself in urgent need of backup support, and additional pediatric expertise and guidance. We immediately contacted UH Rainbow,” said Jon. “The doctors and nurses there were absolutely fabulous and provided invaluable advice over several months. We could not have been more thankful, and have felt indebted to UH Rainbow ever since.”

The Outcalts recently found a way to express some of their immense gratitude while supporting a project close to the hearts of their friends, Char and Chuck Fowler. They made a significant contribution to support the Angie Fowler Adolescent & Young Adult Cancer Institute at UH Rainbow Babies & Children’s Hospital, a gift that doubled in impact thanks to a match from an anonymous donor.

“We have tremendous admiration and respect for the Fowlers and strongly believe in the mission of Angie’s Institute to fill the gap between pediatric and adult cancer care,” said Jon.

“This institute is tremendously important to the hospital,” added Jane, who is particularly fond of the outdoor respite at Angie’s Garden on the rooftop of Horvitz Tower at UH Rainbow Babies & Children’s Hospital. “We feel good about being a part of this project.”

Though they prefer to be quiet philanthropists, the Outcalts hope that their giving inspires others to give back, including their own children and grandchildren. “We’ve been fortunate in our lives and feel that we have an obligation to help better the community,” said Jon. “Gifts like this reinforce that message. We hope and expect that our family will carry on this tradition.”
HEALTHY PHILANTHROPY, HEALTHY COMMUNITY

UH Samaritan Medical Center serves people in and around Ashland County, providing high-quality, compassionate care. Particular credit for the hospital's continued growth goes to the Samaritan Hospital Foundation, created to support the principles established in 1912 when Samaritan Hospital was founded on the belief that no sick person should ever be refused care.

Foundation funding is far-reaching – donations to the hospital in 2016-2017 surpassed $3.4 million and supported 93 projects, including the purchase of an Intrapulmonary Percussive Ventilator, fetal monitoring equipment, a 4-D ultrasound machine, 3-D mammogram machine and a state-of-the-art CT scanner. Foundation grants renovated and expanded the Emergency Department, the Birthing and Women's Unit, the Cancer Infusion Center and the Acute Medical Surgical Unit.

Richard L. Beal, President, Samaritan Hospital Foundation, reflected, “Every dollar raised benefits our community. The Foundation makes sure critical healthcare services are available to the greater Ashland community and provides donors an opportunity to establish a legacy of compassion and care for future generations.”

A century has passed, but the goal of the Samaritan Hospital Foundation remains – to provide the Ashland community an opportunity to live the healthiest lives possible.

3-D mammogram machine at UH Samaritan Medical Center
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MEETING COMMUNITY HEALTH NEEDS IN LORAIN COUNTY

UH Elyria Medical Center is a leading community hospital, committed to providing high-quality care to the residents of Lorain County. Results from the hospital’s most recent community health needs assessment identified some of the county’s most pressing health-related priorities, prompting UH Elyria Medical Center to further tailor its programs for its patients. Quick to respond and advance these efforts was Elyria Medical Center Foundation, which made a gift of more than $1 million to support community wellness programming in 2017.

The foundation’s generous support will allow UH Elyria Medical Center to become more deeply involved with the community as it relates to three of its identified priority areas – diabetes education, breast health education and lactation support programs.

“UH Elyria Medical Center and the Elyria Medical Center Foundation are committed to improving the health of the communities we serve. The foundation’s support will help us invest in programs and services that are important to our patients,” said Kristi M. Sink, MHA, FACHE, President, UH Elyria Medical Center. “Through this gift, our diabetes educators will empower patients with the confidence to take control of their disease; our Breast Health Program will deliver outreach programming on breast cancer and prevention to increase the likelihood of early detection; and our onsite lactation consultant will provide one-on-one consultation services for mom and baby to help improve breastfeeding outcomes.”

Kristi M. Sink, MHA, FACHE
Ellen Greenberger

UH’s Department of Orthopedics is one of the oldest, most highly-recognized of its kind in the nation, known for first-rate medical care, innovative scientific research and top residency training. This outstanding reputation is due, in part, to its collaborative approach to care.

For the last 40 years, UH Orthopedic Academic Residency Program Coordinator Ellen Greenberger has been an essential part of the UH team, advising and guiding more than 500 residents and fellows in the Orthopedic Training Program.

Upon her retirement last May, Ellen’s dedication and service were commemorated with the creation of the Ellen Greenberger Education Fund, established through the generosity of more than 60 of Ellen’s colleagues at UH as well as past program participants. An enduring tribute to Ellen’s contributions to the department, the fund will help support the education of future orthopedic trainees and coordinators.

“Ellen played an integral role in our leadership efforts to build a world-renowned education program in orthopedic surgery,” said Randall E. Marcus, MD, former Chairman, Department of Orthopedic Surgery, UH Cleveland Medical Center, who himself was inspired by Ellen’s service to make a gift to the fund by Ellen’s service. “She did an exemplary job guiding residents, fellows, faculty and coworkers, as evidenced from our growth and superior rankings. It was wonderful to see so many physicians, employees and others come together to honor her in this way.”

2017 ANNUAL SOCIETY

Annual giving at University Hospitals reflects the shared commitment of our benefactors and friends to the health and well-being of our community. The Society of 1866 recognizes those individuals and family foundations making annual gifts of $1,000 or more. UH gratefully acknowledges the members of the Society of 1866 as well as those special events, associations, corporations and foundations contributing $5,000 or more for their sustaining support of the UH mission in 2017.

* Deceased
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SUPPORT FOR EMERGENCY CARE IN PORTAGE

The Emergency Department at UH Portage Medical Center is among the busiest in the area, treating an average of 40,000 patients a year. To meet the growing need and ensure the continued delivery of high-quality care, the hospital has received more than $2 million in gifts to renovate the space.

Renovations, slated to begin in spring 2018, will transform the space into a new, bright facility designed to minimize patients’ time-to-treatment. It will include a Fast Track system, a separate process for patients with less-serious conditions who can be treated more quickly.

"With the demand for services and the growth in patient volume that we are experiencing, it was time to not only renovate our physical facility but also redesign the patient flow," said UH Portage Medical Center President William Benoit. "Our plan is to continue to deliver the highest-quality emergency care to all our patients."

The Portage Medical Center Foundation launched the campaign in August 2016 with a $1 million Community Challenge Grant. Numerous significant gifts have helped unlock funds from that grant, including generous contributions from Ronald and Joan Burbick, Peg's Foundation, Allen Aircraft Company, Inc., The Auxiliary of UH Portage Medical Center and an anonymous donor.

From left: UH Portage Medical Center Campaign Co-Chairs Joan and Ronald Burbick, and William Benoit
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Newbury resident Billie Howland Steffee was an exceedingly generous benefactor in the Geauga community and a champion for children’s causes throughout Cleveland. She established the Billie Howland Steffee Family Fund, a supporting organization of the Cleveland Foundation, in 1998, serving as president until her passing in October 2016. Among the many organizations and charities that Billie supported was UH Geauga Medical Center.

Billie’s last gift to the hospital was a matching grant through the Cleveland Foundation of $250,000 to support the expansion of pediatric care services. Her generosity matched contributions from the community dollar for dollar, enabling renovations for a dedicated nurses station and four pediatric observation rooms as well as training and continuing education for nursing and hospitalist staff. In March 2017, the new Pediatric Observation Suite was dedicated in recognition of Billie’s deep personal commitment to the hospital’s youngest patients.

“My mother really loved this community,” said Billie’s son, David Steffee. “She wanted it to be a safe and happy place for children to live. This suite is a great expression of that vision.”

David and Laura Steffee
In 2006, Kali Pung suffered a paralyzing diving accident. After spending time in hospitals and rehabilitation facilities, Kali’s family and friends came together to help her create a foundation with a mission to better the lives of others living with paralysis through research and rehabilitation while working to help find a cure.

Today, more than 10 years later, Kali is a passionate fundraiser and advocate. Through her hard work and the generosity of numerous donors, Kali’s Cure for Paralysis has donated more than $750,000 to UH. This funding has supported the work of Raymond Onders, MD, Director, Adult Minimally Invasive Surgery, UH Cleveland Medical Center and Margaret G. and Walter K. Remen Chair in Surgical Innovation, and his team in diaphragm pacing, an innovative technology that applies rhythmic electrical impulses to the diaphragm for breathing support.

“Thanks to our generous donors, it has been an honor to support Dr. Onders’ diaphragm pacing program which was the recipient of our first contribution and, 10 years later, we haven’t missed a year,” said Kali. “With the constant advancements taking place, a cure for paralysis is just around the corner and we believe that Dr. Onders will be on the forefront. Driven by this exciting news, our donors continue to rally together as we look forward to hitting the $1 million mark of giving to UH.”

From left, standing: Ray Onders, MD; John Morgan; Mike Pung; Mike Pung Jr.; and Alice Pung

From left, seated: Col. Greg Gadson; Kali Pung; and Frank Beckmann
AN EXAMPLE TO LIVE BY

Sandra Pianalto appreciates the value of hard work and education more than most. Born in Italy, she and her family immigrated to America when Sandy was five years old. In the years that followed, she took advantage of every opportunity to further her own personal growth and to better serve her community.

With advanced degrees in economics and management, she built a career at the Federal Reserve Bank of Cleveland that spanned more than 30 years. From 2003 until her retirement in 2014, she served as the bank’s president and chief executive officer, helping to shape the economic health and well-being of Greater Cleveland and the monetary policy of the nation.

Through it all, Sandy was a passionate advocate for the city she loves, serving on numerous boards and championing causes in education, healthcare and human services. In 2015, Sandy was elected Chair of the UH Board of Directors where she continues to serve the best interests of her community.

Last year, she furthered her commitment to UH, establishing the Sandra Pianalto Leadership Fund to support ongoing efforts to identify, develop and sustain high-performing leaders and, particularly, under-represented minorities.

“I hope that my support of this important initiative will be a catalyst to inspire others to invest in leadership and diversity at UH,” said Sandy. “I had mentors and advocates throughout my career who helped me achieve my goals. I want to give the high-potential employees that fill the corridors of UH the resources to achieve theirs.”

Sandy Pianalto
Having grown up in Medina, Maribeth Gainard met Hal Goltz, a New York native, through a mutual friend while both were living in London after college. A few years later, after asking Maribeth’s father for his blessing, Hal proposed and wedding planning ensued. “Our families lived in different states and we had friends all over the world. We were thrilled so many could come to Cleveland to celebrate our special day with us,” said Maribeth.

A week after the couple was engaged in Paris in June 2016, however, Maribeth’s father, Joe Gainard, received a devastating diagnosis of esophageal cancer. “Doctors at another hospital told him that treatment was not possible,” said Hal. “They gave him less than a year to live and his first thought was that he would miss the wedding.”

Faced with a bleak prognosis, Joe sought a second opinion at UH Seidman Cancer Center where physicians gave him hope. “UH said there were alternatives he could try and that treatment, including surgery, was possible,” said Maribeth.

Joe quickly agreed to the treatments, hoping to gain enough time to share in his daughter’s big day. With the help of UH physicians Yaron Perry, MD, and Jennifer Dorth, MD, along with an incredible team of nurses and staff, he underwent radiation and chemotherapy, followed by a successful esophagectomy.

On October 21, 2017, Joe Gainard proudly walked his daughter down the aisle and gave her hand in marriage to the love of her life, Hal. “This moment was incredibly important to me and my dad,” said Maribeth. “The care my dad received at UH was amazing and I will be eternally grateful to them for giving us that day together.”

In lieu of wedding gifts, Maribeth and Hal asked their guests to make donations to UH Seidman Cancer in honor of the doctors and staff who treated Joe. They, too, also contributed to the fund, making one of their first philanthropic donations together as husband and wife. To date, the Gainard Goltz Esophageal Cancer Research Fund has raised more than $25,000.

“Our wedding would not have been the same without Maribeth’s father,” said Hal. “It would have been filled with competing emotions. But thanks to UH, it will always be a happy and joy-filled memory for us.”
We gratefully acknowledge the following individuals who have made an estate, endowed or other planned gift to University Hospitals. Charitable estate planning provides an opportunity to make a meaningful commitment, maximize philanthropic objectives and receive important tax benefits.

* Deceased

DIAMOND LEGACY SOCIETY
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Anthony J. Caruso, PhD
Hilda B. Case*
Carol Schoenewald and her late husband, Henry, moved to Cleveland from Chicago in 1954. Until their sons were born in the 1960s, Carol was employed at UH as a medical technician in the Department of Pathology, working with bacteria and viruses, and it was there that she developed a lifelong appreciation for advancements in medicine.

Over the years, Carol has also had firsthand experience as a patient at UH, having been successfully treated for skin, colon and breast cancer. “The physicians at UH have always taken care of us. I am extremely grateful for their compassion and exceptional care,” she said.

Carol and Henry were married one month shy of 50 years when he passed away in 2003. In his memory, Carol established the Henry Schoenewald Stem Cell Research Endowed Fund. She has taken advantage of the IRA Charitable Rollover to make generous annual gifts to this fund, and has also named UH as the beneficiary of her IRA.

In October, Carol was formally inducted into the Samuel Mather Society at UH’s Annual Society of 1866 Celebration. Named in honor of the renowned Cleveland industrialist, philanthropist and former UH Board Chairman and patient, Samuel Mather, the society honors those whose cumulative giving to UH totals $1 million or more.

With her proud family in attendance, Carol participated in the traditional white coat ceremony and took her place among UH’s most generous benefactors.

Carol’s lifelong gifts to UH are the result of her dedication to science and philanthropy and her appreciation for the outstanding and compassionate medical care she and her family experienced at UH. Thanks to her forward thinking, the Schoenewald legacy will continue to advance the UH mission for generations to come. 💙
DIAMOND ADVISORY GROUP
HONORS DISTINGUISHED MEMBER

The Diamond Advisory Group annual meeting, chaired by James A. Goldsmith, Esq., Partner, Ulmer & Berne, was held in June at Progressive Field. Honorary Chair Paul J. Dolan, Chairman and Chief Executive Officer of the Cleveland Indians, welcomed the group before Patricia M. DePompeii, RN, MSN, President, UH Rainbow Babies & Children’s and UH MacDonald Women’s hospitals, presented the vision for the new UH Rainbow Center for Women & Children, slated to open in MidTown in summer 2018.

Janet W. Havener, MBA, Director of Wealth Advisory Services at Fairport Asset Management, was honored with the 2017 Distinguished Advisor Award presented by Daniel I. Simon, MD, President, UH Cleveland Medical Center. Janet, who has more than 30 years of experience in estate, tax, charitable, financial and retirement planning, was recognized for her role in helping individuals and families create meaningful legacies at UH. “One of the joys of my profession as a wealth planner is working with such wonderful, philanthropic families who show their love for UH by their generous giving.”

From left: Daniel I. Simon, MD; Paul J. Dolan; Honoree Janet W. Havener; Patricia M. DePompeii, RN, MSN; and, James A. Goldsmith, Esq.
INAUGURAL BECKY HENNESSY GOLF OUTING

Inspired by Diana Hyland’s life and legacy, breast cancer patient Becky Hennessy was an active volunteer and advocate for the Diana Hyland Miracle Fund and its efforts to fuel clinical research for advanced breast cancer. Becky served as a longtime co-chair of the fund’s annual golf outing until her passing early last year. The 2017 event was renamed in her memory.

In July, the inaugural Becky Hennessy Golf Classic, co-chaired by Becky’s husband Sean Hennessy, Tony Anselmo and “Becky’s Buds,” raised more than $120,000 to benefit the Miracle Fund. Presenting sponsors for the event included Sherwin Williams, Swagelok and Tammy and John Morikis.
Giving Tuesday falls on the first Tuesday after Thanksgiving and serves as a reminder to give back during the holiday season. This year, supporters from throughout the community came together to make a meaningful difference in the lives of adolescent and young adult (AYA) cancer patients, collectively contributing more than $22,000 and helping to create a dedicated inpatient unit at the Angie Fowler Adolescent & Young Adult Cancer Institute at UH Rainbow Babies & Children's Hospital.

Established in 2011, Angie's Institute is the first cancer treatment center in the country to offer separate, age-appropriate space and amenities for pediatric and AYA patients. When complete, the Andrew Uhrman Inpatient Unit will join the dedicated outpatient unit and rooftop garden to provide one contiguous, life-affirming space for AYA patients and their families.
Philanthropic Trusts in Perpetuity

From as early as 1890, visionary benefactors have established trusts in perpetuity that currently provide nearly $8 million annually to support University Hospitals. These enduring gifts make a difference in the lives of our patients and families and will continue to support our mission for generations to come.

Lewis* and Ruth* Affelder 1995
William David Bartlett* 1929
Douglas* and Janet Henderson Page* Brews 1928
William* and Lois* Briggs 2010
Gertnude H. Britton* 1936
Nellie H. Canfield* 1915
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Washington S.* and Marion C.* Tyler 1918
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John E.* and Florence M.* Wood 1971
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2017 Estate Gifts

We gratefully acknowledge the following individuals whose farsighted philanthropy benefited University Hospitals through their realized estate gifts in 2017.

Hudson D. Bishop, MD*
Albert F. Broadwater*
Dr. Arthur* and Edwin* Burns
Stanley Capinsky*
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Daniel J. Sheehan*
Harry Lundy Taylor IV, MD*
Kathryn* and George* Woodward

Maximizing Holiday Joy at UH Rainbow

The lobby at UH Rainbow Babies & Children’s Hospital is decorated for the holidays every year to make the season more special for patients, their families and staff. In 2017, however, the hospital was in need of a sponsor to help purchase a new tree. Tim Garton, one of the owners of RE/MAX Results, rallied RE/MAX offices throughout Northeast Ohio to help bring the holiday spirit to UH Rainbow. Together, they provided not one, but nine beautifully decorated trees to display throughout the hospital – one for the main lobby and one for each of UH Rainbow’s patient floors.

“No one wants to be in the hospital, especially during the holidays,” said Tim. “We wanted to make sure that the patients and families that had to be at UH Rainbow still experienced the joy of the season. This was a small way for us to brighten people’s days and to show them we care.”

From thoughtful gifts like holiday trees to agent and office donations through the Miracle Home program, RE/MAX of Ohio has been a committed corporate partner of UH Rainbow Babies & Children’s Hospital through Children’s Miracle Network for more than 20 years. Cumulatively, RE/MAX has raised over $1 million to benefit UH Rainbow patients and families.
QUITE THE SENSATION

The landmark culinary celebration Five Star Sensation once again dazzled guests in 2017. Host Chef Michael Symon and a star-studded list of more than 80 chefs and vintners delighted attendees with world-class food and drink at Cuyahoga Community College Eastern Campus in June. The successful event was led by co-chairs and UH benefactors Kathy Coleman and Debbie Wert with corporate chair Sean Richardson, president of Huntington Bank’s Greater Cleveland Region.

From left: Sherri L. Bishop, Esq., Chief Development Officer; Co-Chair Debbie Wert; Chef Michael Symon; Co-Chair Kathy Coleman; and Corporate Chair Sean Richardson

The premier benefit for UH Seidman Cancer Center, Five Star Sensation debuted in 1987. In the 30 years since, the biennial event has raised nearly $20 million to support cancer research and community outreach programming.

OUTREACH PROGRAM ENGAGES UH FRIENDS IN FLORIDA

In February 2017, UH’s annual Florida outreach program returned to Naples and Palm Beach, engaging more than 700 friends and benefactors with a discussion on the future of cancer and stroke care at UH. Daniel I. Simon, MD, President, UH Cleveland Medical Center and Chief Academic Officer, University Hospitals, served as moderator and was joined by physician leaders Jill R. Dietz, MD, Director, Breast Center Operations, UH Seidman Cancer Center; and Cathy A. Sila, MD, Director, Comprehensive Stroke Center and UH System Stroke Program, UH Neurological Institute and George M. Humphrey II Chair in Neurology.

From left: Event attendees Connie and John Kappus with Jackie and Jack Woods
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1. UH Cleveland Medical Center
   UH Rainbow Babies & Children’s Hospital
   UH Seidman Cancer Center
2. UH Ahuja Medical Center
3. UH Bedford Medical Center,
   a campus of UH Regional Hospitals
4. UH Conneaut Medical Center1
5. UH Elvia Medical Center
6. UH Geauga Medical Center
7. UH Geneva Medical Center
8. UH Parma Medical Center
9. UH Portage Medical Center
10. UH Richmond Medical Center,
    a campus of UH Regional Hospitals
11. UH St. John Medical Center,
    a Catholic hospital
12. UH Samaritan Medical Center

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13. UH Amherst Health Center1
14. UH Ashtabula Health Center1
15. UH Aurora Health Center
16. UH Avon Health Center1
17. UH Baybride Health Center
18. UH Bayley Road Health Center
19. UH Broadview Heights Health Center1
20. UH Chagrin Highlands Health Center1
21. UH Chesteland Health Center
22. UH Concord Health Center1
23. UH Euclid Health Center
24. UH Fairlawn Health Center1
25. UH Geauga Health Center
26. UH Hudson Health Center
27. UH Independence Health Center
28. UH Kent Health Center
29. UH Kettering Health Center
30. UH Landerbrook Health Center
31. UH Madison Health Center
32. UH Mantua Health Center
33. UH Mayfield Village Health Center
34. UH Medina Health Center1
35. UH Mentor Health Center1
36. UH North Olmsted Health Center
37. UH North Ridgeville Health Center1 (opening 2018)
38. UH Otis Moss Jr. Health Center
39. UH Rainbow Center for Women and Children (opening 2018)
40. UH St. John Health Center
41. UH Samaritan Health Center
42. UH Sharon Health Center
43. UH Sheffield Health Center
44. UH Solon Health Center
45. UH Streetsboro Health Center1
46. UH Twinsburg Health Center1
47. UH University Suburban Health Center
48. UH Walden Health Center
49. UH Wellington Health Center
50. UH Westlake Health Center1
51. UH Urgent Care partnering with Southwest General Brook Park2
52. Southwest General Brunswick Medical Center1
53. Southwest General Strongsville Medical Center2

UH Joint-Venture Hospitals
54. Southwest General Health Center1
55. UH Avon Rehabilitation Hospital,
    a Joint Venture with Kindred Healthcare
56. UH Rehabilitation Hospital,
    a Joint Venture with Kindred Healthcare

1 24-hour emergency department
2 Urgent care center
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