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Accountability  
Beyond Four Walls

A Bright Future  
for Women's Health

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Research and Innovation

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**SUMMA MAGAZINE**

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**coverstory**

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**Accountability  
Beyond Four Walls**

Through collaboration and the development and coordination of resources in the region, Summa Health System is working to lead Northeast Ohio to a better, healthier future and become a model of healthcare reform.



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Dr. Vivian von Gruenigen is developing a new strategic plan for women's health that integrates services and reflects today's pressing needs.



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**Dear Friend:**

If you were here in northeast Ohio in 1832, this is what you'd see: A few small, isolated farms amid a dense and endless forest largely cut off from the rest of the world.

But the world was changing. Dr. Eliakim Crosby had come to Ohio seeking work and found it, running a furnace that forged plows and other agricultural equipment, and helping to build the Ohio-Erie Canal. Now, standing on the banks of that canal, Crosby could envision the change that was coming. Each day, canal boats brought eastern settlers west and took western goods east. An agricultural society was being transformed into a commercial, manufacturing one. It was a revolution Crosby wanted to lead. He wanted to build a town, nearly from scratch.

His plan was to build a millrace — a channel that cascaded down from Little Cuyahoga River to the canal. The fast flowing water alone would be enough to generate power for five mills — enough to spark northeastern Ohio's growth into a manufacturing hub.

Together with two business partners, he bought land up and down the Cuyahoga River. Crosby and his workers dug through the narrow corridor of land between the river and the canal. As they hit pockets of solid rock, more than a few backwoodsmen laughed at what seemed to be the impossibility of the team's task. But Crosby's men quarried the rock out and continued forward. By the end of 1832, they had built the millrace and a stone mill to go on it, near today's Mill Street.

By the end of the decade, five more mills, a distillery and an iron furnace sat at the center of a town Crosby had named Akron.

In the 1830s, it was one doctor with a vision who turned an agricultural town into an industrial one, ushering in a new era.

Today, it is more than 1,500 doctors with a shared vision who will transform healthcare in northeast Ohio, and in America.

Just miles away from where Crosby's mill once turned, we at Summa Health System know that the way many other hospitals do business isn't sustainable. The fee-for-service model isn't serving patients well, nor is it serving our nation well.

The health reform law signed by President Obama moves America's healthcare systems toward accountable care, a system whereby healthcare providers come together to take responsibility for the care – and the outcomes – for a patient or a group of patients.

This is where healthcare in America is headed. And, as you will read in this month's cover story, it is an area in which Summa is poised to lead.

It was a doctor from Akron that led a transformation 180 years ago. And it is a health system based in Akron that will lead an American healthcare transformation today.

A handwritten signature in black ink that reads "Thomas J. Strauss". The signature is written in a cursive, flowing style.

Thomas J. Strauss  
President & CEO  
Summa Health System



# Inspiring a Legacy of Exploration and Discovery

The Dr. William and Rebecca Sharp Fund for Surgical Education and Research

After a remarkable four decades with Summa Health System as a resident, surgeon, educator, researcher and administrator, William Sharp, M.D., FACS, and his wife Becky, who spent most of her career as a nurse anesthetist in surgery working with her husband, literally sailed away on the Atlantic Ocean to explore the far corners of the world when he retired in 1994. Wrapping up their travels that took them as far north as Norway and as far south as Venezuela, they arrived home in Florida in 2002 to pursue new adventures.

Fifteen years after retiring, the Sharps returned to Akron last fall to attend the Summa Research Forum, where Dr. Sharp was presented with the inaugural Summa Foundation Distinguished Clinical Research &

Innovation Award in honor of his work at Summa.

During that visit, through conversations with their peers about the advances and innovations underway within the surgical department, an idea that began as a seedling planted during the Sharp's active days in the medical community began to take shape. "It was always in the back of our minds that if we were in fortunate enough circumstances, we wanted to give back to the place where both of us spent our professional careers – to create a 'living gift,'" said the couple.

Their vision recently took the form of the broad-based Dr. William and Rebecca Sharp Fund for Surgical Education and Research with a \$250,000 gift. For the Sharps, it was

also important to know the money they gave would be used specifically in areas that were meaningful to them.

## A legacy still felt strongly today

"I think of Bill as an empire builder in the days of iron men and wooden ships," said William F. Fallon, M.D., MBA, FACS, Chair, Department of Surgery for Summa Akron City and St. Thomas Hospitals. "Medicine has changed considerably since he practiced and training the next generation of researchers and clinicians is increasingly difficult. Having Bill and Becky support this goal helps Summa Health System achieve its mission of providing high-quality, compassionate care."

During Dr. Sharp's residency, another inquisitive physician, William H. Falor, M.D., who performed the first adult open heart surgery in Akron (also one of the first in the country), was at the forefront of cardiothoracic and vascular surgery and served as his role model in the fields of clinical surgery and research. Dr. Falor was a catalyst for broadening the hospital's research program, including collaborative research with The University of Akron (UA). In those early days funding for research was very hard to find.



According to Dr. Fallon, today the combination of shrinking reimbursements and the expected shortage of physicians at a time when surgeons need broader cognitive, clinical and operative skill sets is creating a unique challenge for the healthcare industry. The Sharp Fund will help educate young physicians by emphasizing past learning and the use of tools such as robotic simulators while exposing them to research within an environment that applies discoveries to patient care. Although Summa Akron City, St. Thomas and Barberton Hospitals are teaching hospitals for NEOUCOM (Northeastern Ohio Universities Colleges of Medicine and Pharmacy) and Summa Western Reserve Hospital is affiliated with Ohio University College of Medicine, the expansion of research and surgical education will also help attract more top talent to the health system.

Dr. Fallon also believes the Sharps were impressed with the breadth and depth of the Department of Surgery: "We have the curiosity to explore new things and to understand the difference between what's feasible and what's possible. A lot of exciting projects are happening here, such as the collaboration among Summa Health System, NASA and NEOUCOM to explore issues such as the effects of weightlessness on muscle atrophy and the immune systems. We're also developing new education methodologies to train incoming surgeons that incorporate virtual

reality and simulations. This is a robust collaborative program linked to patient care."

### An inspiration to this day

Eric Espinal, M.D., a cardiothoracic surgeon recruited by and trained under Dr. Sharp, recalls him as an incredibly skilled surgeon who had a very broad base of surgical skills within his armamentarium to treat a broad array of patients.

"Under his leadership, the department transformed into a center for clinical excellence as well as a place for ground-breaking research. As medical students, we always were amazed at his skill and breadth of knowledge. In my opinion, Dr. Sharp was one of the first to emphasize evidence-based medicine. He looked at objective research and modified his techniques and practice to what the results dictated. At the same time, he had a strong interest in educating the surgeons of tomorrow. He and Becky are continuing that mission with this gift."

Having such an energetic and influential early mentor can leave a meaningful impression on a young physician. With similar energy and an eye toward improving patient care, Dr. Espinal has been instrumental in bringing minimally invasive surgery to Akron and is a nationally recognized pioneer in the field of minimally

invasive cardiothoracic surgical techniques. Summa's Institute for Minimally Invasive Therapeutics fosters clinical excellence by encouraging research, teaching future surgeons and commercializing discoveries in multiple specialties through the field of minimally invasive therapies.

### A brilliant mind

Among his many accomplishments, Dr. Sharp was a peripheral vascular surgeon, president of the medical staff of Summa Health System, Chair of Surgery at Summa Akron City Hospital and the first surgeon to perform an adult kidney transplant in Akron, leading to a transplant program that performed more than 400 transplants by the end of his 30-year surgical career. Despite his busy surgical schedule, he made time for research, resulting in nearly 100 published articles in peer-reviewed journals. His father, Dr. H. Vern Sharp, started practicing surgery at Akron City Hospital in 1932 and held several of the same administrative positions his son would hold many years later.

Dr. Sharp had a keen interest in the biocompatibility of implanted materials when the field was just in its infancy stage. During these trailblazing days in the vascular research lab, staffing was extremely important. Dr. Sharp feels fortunate to have attracted highly qualified PhD candidates from Kent State University (KSU) and UA to work with him. Dr. Steve Schmidt

came to the lab in 1982 and 28 years later, is now vice president, Clinical Research and Innovation, a position that encompasses strategic and administrative oversight responsibilities for Summa's clinical research and innovation programs. Dr. Schmidt is intensely interested in vascular research and focused his doctoral dissertation on the biology of blood vessel walls.

The two worked to develop a biocompatible lining on synthetic vascular grafts by transplanting endothelial cells onto graft surfaces. Although the promise of this technology did not come to fruition clinically, the concepts they pioneered are currently used in successful strategies for tissue engineering or the process of combining cells with synthetic scaffolds to create tissues and organs that develop outside of the body in incubators.

## A life full of innovation and dedication

"His expertise at Summa as a clinician and educator is legendary. He literally mentored hundreds of surgical trainees over the years and operated on thousands of patients," said Dr. Schmidt. "I came to Summa Akron City Hospital in 1982 because of Bill, who was already leading a thriving research agenda as the Medical Director of the Vascular Research Laboratory."

At the same time, Dr. Sharp was conducting research funded by the National Institutes of Health, working in collaboration with The Goodyear Tire & Rubber and supervising Ph.D. students from KSU. And his research team focused on developing more successful synthetic artificial blood vessels by attaching heparin and carbon to vascular graft surfaces to minimize thrombosis. All the while, he kept a busy clinical schedule.

Dr. Sharp earned a patent for his carbon-coating work. Today, both carbon-coated and heparin-bonded artificial blood vessels are among the options available to surgeons for vascular repair. In addition, he devised new surgical approaches for implantation of aortic replacements,

researched issues related to kidney transplantation and created the Division of Surgical Research.

"While the Sharps' gift is certainly important, it's Bill's legacy that is really more meaningful to me. No other mentor has been more important," said Dr. Schmidt. "He truly was a pioneer in his field, driven by the desire to provide the best care possible for his patients based on solid academic research and scientific evidence at a time when Summa Akron City Hospital was only a community hospital. With all he did, he always had the energy to come to the research lab to talk about possibilities before he ended his day. Bill also cared unbelievably about patients and shared his clinical experience and questions from the operating room and follow-up treatment to improve care."

Dr. Sharp's main research interest was related to the interface between artificial materials and natural tissues and body fluids. The underlying themes of Dr. Sharp's research interests continue today. Working in collaboration with polymer scientists at UA, Dr. Schmidt's research team

continues to study new polymers with chemically and biochemically functionalized surfaces that are more compatible with human tissues. These studies recently have been funded by a research grant from the Austen BioInnovation Institute in Akron (ABIA) and by the National Institutes of Health. Dr. Schmidt is also working with Dr. Fallon and his research team to understand changes in immune function in the elderly. Understanding these changes will help surgeons better understand the challenges of caring for elderly surgical and trauma patients.

"After the stage was set for others to follow his legacy, Bill retired. He and Becky decided the time was right and they stopped exploring the world of medicine and began to explore the world. And now they've come full circle – encouraging discovery and innovation in the next generation," adds Schmidt.

► *Robin Suerig Holleran*







# A Bright Future for Women's Health

When a physician declines an offer to interview with Harvard Medical School because of a health system in Akron, Ohio, one can't help but be curious as to why.

"When I left Summa years ago, it was a two-hospital system. Now it's grown to an impressive six-hospital system with its own insurance plan that treats hundreds of thousands of women every year – and it still feels like home," said Vivian von Gruenigen, M.D., new department chair of Obstetrics/Gynecology at Summa Akron City and St. Thomas Hospitals and Summa Health System's medical director of Women's Health Services. "Summa has been growing exponentially and I am excited to be part of it.

"I also share Tom Strauss' [president and CEO of Summa Health System] views on accountable healthcare in the community and the need to sustain a culture of quality."

Since returning to Summa in November 2009 – she completed her residency at Summa Akron City Hospital – von Gruenigen has been evaluating and prioritizing the needs of the department. High on her agenda is developing a new strategic plan for women's health that integrates services and reflects today's healthcare concerns for women throughout their lives. Summa is already a leader in the field with a Pelvic Pain Specialty Center, the



Institute for Minimally Invasive Surgery, urogynecological/incontinence care, innovative low-risk maternity options and specialty care nursery, prevention and treatment for breast health program, and other specialty services. Summa Akron City Hospital includes a dedicated 23-bed women's floor within the hospital and a recently refurbished women's clinic as well.

Summa also recently received a risk management award from American Express Insurance Exchange for its excellence in prenatal care. The award included attending an industry conference to educate 3,000 other healthcare leaders across the country about its best practices, such as the monthly multidisciplinary obstetric and neonatal emergency simulation training and peer audit process for labor progress and electronic fetal monitoring.

Yet there's more to be done.

## Community outreach

True to Summa's mission "to provide the highest quality, compassionate care to patients and to contribute to a healthier community," women's health proponents at Summa are taking numerous steps to improve women's well-being throughout Northeast Ohio by raising awareness of key health issues. This past February, for example, Summa had its most successful Go Red for Women Day, with more than 500 female employees participating in the national campaign to fight heart disease in women.

"If you look at the top diseases, 27 percent of all women die from heart disease and 22 percent die from cancer. There's a lot of room for improvement," observed von Gruenigen. "Summa is the largest employer in the county; such a high participation rate in the Go Red campaign can't help but be noticed. Our hope is the message will spider web into the community."

Summa also sponsors women's health education classes for the general public on proper cardiovascular care, risks associated with smoking, obesity, diabetes, complicated pregnancies, hormone replacement, osteoporosis and other wellness and preventive healthcare topics. Programs are also offered for the local healthcare community of physicians and nurses, residents and medical students who need to keep abreast of the constantly evolving field of women's health and medicine.

"There was quite an emotional reaction to a recent study's suggestion of reducing the frequency of mammograms and The American College of Obstetricians and Gynecologists (ACOG) recently modified its guidelines for pap smears according to a sliding scale based on age and medical history. Here, within the Department of Obstetrics and Gynecology at Summa, we follow

evidence-based research and will continue to offer these tests as we always have,” said von Gruenigen.

Across Ohio, many health clinics are dealing with decreases in local, state and federal funding that along with the erosion of employer-based insurance and high unemployment rates, is driving more and more patients to seek treatment at hospitals. According to Strauss, Summa provided a record \$57.6 million in net uncompensated care (including nearly \$23 million in direct charity care) in 2008. Those numbers climbed more than \$5 million again in 2009 and are expected to continue to grow.

Even faced with these statistics, von Gruenigen's vision remains high: “Our goal is to become the premier provider of women's health services in Northeast Ohio by providing comprehensive, safe, science-based care. This fall, proceeds from the Summa Foundation's 2010 Sapphire Ball will support women's health services; helping us to continue enhancing our role as a community resource and improve the facilities in which women receive care, regardless of their ability to pay.”

## A place to call their own

Last year, the Akron-based health system completed a much-needed renovation of the Women's Health Center at Summa Akron City Hospital, an outpatient clinic that serves uninsured and underinsured women. The refurbishment includes new lighting, flooring, wall coverings and furniture in the waiting area, as well as reconfiguring the patient registration area to meet HIPAA compliance standards. The layout was modified to be more efficient, a lab space for drawing blood was added and exam

tables were upgraded. The Women's Board of Summa Health System provided funds for new medical equipment, including new LED exam lights, a vital signs monitoring unit and a teaching microscope that has two “heads” so the attending physician and the resident can view slides at the same time. Feedback from patients about the changes has been tremendously positive.

Also within Summa Akron City Hospital is a 23-bed unit exclusively for female patients specializing in short-term medical care, minimally invasive surgery, urogynecological/incontinence care, gynecological oncology treatments, plastic surgery and therapies to control diabetes. One of the key advantages of having a dedicated space just for women is the ability of the staff to proactively provide personal information about the patient's condition as well as discuss sensitive topics such as mammography and colonoscopy in a same-sex environment. According to Susan Sorboro, RN, BSN, director of

Women's Health Services at Summa Akron City Hospital, many women also feel more comfortable in this type of setting.

“While we're fortunate to have the women-only unit, due to the age of the building, many of our other women's health services are logistically spread out across the hospital campus and not very functional,” said Sorboro. “Going forward, our goal is to create the exceptional experience for women with family-oriented care and that may require facility changes.”

## Alternatives to traditional surgery

There's also been considerable progress for women with more serious medical issues. “Historically, not all women were candidates for surgery due to their weight or other health conditions but with advances in minimally invasive surgical techniques, it's now possible for many more to get the treatments they need,” said von Gruenigen.





“Vivian is creating a legacy at an early stage in her career. Her leadership style comes from the heart and is all about doing the right thing for patients and the community,” said T. Clifford Deveny, M.D., vice president of physician alignment and president of Summa Physicians Inc. “She is truly a women’s health advocate and speaks often about taking charge of one’s health and treating the whole patient. Her vision goes beyond her personal background in gynecological oncology – she’s rejuvenated a department, makes everyone feel good about what they do and drives them to constantly improve.”

Gynecology is already the dominant user of a sophisticated robotic platform that enables surgeons to perform complex surgery using a minimally invasive approach console. However, because of the rapid pace at which innovations are introduced to the medical field, von Gruenigen plans to pursue funding for additional equipment and other innovations key to providing superior surgical and clinical care.

It’s not just technology that makes for quality care; there’s a need to constantly recruit top medical talent and professionally develop health leaders as well. Along these lines, von Gruenigen leads by example. She is active with the ACOG as a board examiner for gynecology and gynecologic oncology, The American Board of Obstetrics and Gynecology (ABOG) foundation board and the Society of Gynecologic Oncologists (SGO.) She also serves on a number

of national and local committees including the Gynecologic Oncology Group’s (GOC) Quality of Life Committee and the Gynecologic Cancer Foundation’s (GCF) board, as well as the editorial board for Gynecologic Oncology.

Prior to coming to Akron, von Gruenigen was in the Gynecologic Oncology Division of the Department of OB/GYN at University Hospitals’ MacDonald Women’s Hospital for eight years, where she also served as Director of Robotic Surgery at University Hospitals and Associate Professor for the Department of Reproductive Biology at the Case Western Reserve University School of Medicine. She also has authored or co-authored nearly 100 journal articles and abstracts and was named one of the “Best Doctors in America” by the Consumer’s Research Council of America.





## Driven by science-based evidence

“Clinical trials and research also are important avenues for improving healthcare,” added von Gruenigen. “It’s a challenging time, though. With the economy in flux, there is less government money available for research but a number of foundations now are stepping up to the plate to fill the gap.”

Her personal research interest focuses on cancer survivorship, quality of life during the end of life, outcomes of obese endometrial cancer patients and the use of chemotherapy in elderly patients. Affecting more than 40,000 women annually, endometrial cancer is the most common form of gynecologic cancer in the United States and obesity is the largest risk factor for development of the disease.

Previously, funding from the Lance Armstrong Foundation supported von Gruenigen’s studies on the combined impact of exercise and dietary counseling on endometrial cancer survivors to optimize health after cancer treatment. Her current research is funded for three years by the American Cancer Society.

“Obese women with endometrial cancer have a decreased quality of life and a significant risk of death,” said von Gruenigen. “Funding from the Lance Armstrong Foundation enabled us to design a nutrition and physical activity lifestyle intervention program for this group of women.”

Her multiple projects also include working as a principal investigator in two ground-breaking studies: the use of palliative chemotherapy in ovarian

cancer patients and chemotherapy in elderly ovarian cancer patients. In addition, she recently applied for more than \$2 million in grants from the National Institutes of Health, National Cancer Institute and a private foundation for improving clinical outcomes of endometrial cancer patients.

“We’re excited to have Dr. von Gruenigen back and the fresh perspective she brings to Summa,” said Deveny. “She is nationally known and highly respected by her peers for her research, clinical expertise and exceptional capabilities. Her energy and commitment to excellence are a huge catalyst here.”

► Robin Suerig Holleran



# Summa Institute for Clinical Research and Innovation Ushers in a New Era

The recent creation of the Summa Institute for Clinical Research and Innovation (ICRI) signifies the hopes – and new beginning – of national prominence for clinical research and biomedical product development at Summa Health System. The launch of ICRI coincides with an ambitious three-year strategic plan to attract funding for research into new therapies and the development of medical products.

“This is transformational,” said Thomas J. Strauss, president and CEO of Summa Health System. “This is a viable economic engine.”

ICRI essentially brings Summa’s existing research under one umbrella and positions Summa to participate fully in the high-level biomedical research agenda of the new Austen BioInnovation Institute in Akron (ABIA). With \$80 million in funding committed over the next five years, the nonprofit ABIA aims to drive economic growth through collaborative research that helps advance medicine in the 21st century.

Until now, Summa’s research typically took place within individual medical disciplines. “Now we’re moving away

from the traditional silo approach to a well-coordinated collaborative model,” said Steven P. Schmidt, Ph.D., vice president, Clinical Research and Innovation for Summa Health System. “ICRI takes the work we’re already doing and ties it together to position us for growth.”

The ICRI will have four major areas, all supported administratively by the office for research administration. The Center for Clinical Trials will conduct clinical trials across many disciplines including women’s health, oncology, orthopaedics, infectious disease and dentistry; the Center for Comparative Effectiveness and Care Delivery Research will focus on best practices and improved delivery of healthcare; the Center for Basic & Translational Research will develop new products for medical surgeries, diagnostics and other applications; and the Center for Healthcare Education Research will use innovative research to improve health education and training programs for healthcare workers.

Schmidt developed the four distinct areas to cluster overlapping research themes that have similar objectives. Each area will focus on original and innovative research while continuing to support departments and service lines within Summa Akron City Hospital and other Summa entities in the region. This organizational approach will promote and capture innovative concepts that can be developed and commercialized when appropriate.

“We’re looking at a strong education agenda,” Schmidt said. “We’ve always had medical residency training programs. More and more, we’ll build healthcare professional programs such as the dental residency program we established two years ago.”

“Collaboration with regional partners is vital,” Schmidt said.

One of ICRI’s early partners is Kent State University, including its new College of Public Health. Work with Kent State will take place through a new Kent-Summa Institute for Clinical and Translational Research. The two institutions will share expenses, for example, to recruit non-tenure-track faculty who are experienced in grant writing. Those faculty members will spend time regularly at Summa – listening and learning about everyday challenges so grants can be tailored to meet clinical needs.

Summa’s long-term goal is to attract public and private dollars for new research. The combination of new discovery and new support can translate into new jobs for the region, including those related to the production of yet-to-be-invented biomedical products and equipment.

► *Diane Evans*





Cleveland

Cuyahoga Falls

Wadsworth

BIOMEDICAL CORRIDOR

SUMMA

BioInnovation

MR. BOB'S WAY

GOODBYE

Barberton

Akron



# Summa Health System Accountability Beyond Four Walls

*“Over the next decade, we are going to see more change come to healthcare than we have seen at any time in our history. The business model that this system has relied upon for the past 40 years is disappearing. Fee for service is going away. A system that pays for sick care over healthcare is going away.”*

*“For organizations like Summa, the goal is no longer simply to be an island of excellence, to provide the best care for everyone who passes through our doors – although we do, and we will continue to provide world-class care.”*

***The goal is to be accountable beyond our four walls, to every citizen of Northeast Ohio, to make our entire population as healthy as possible.”***

Thomas J. Strauss  
Summa Health System President and CEO

AND NOW, FOR THE HARD PART  
OF HEALTH CARE REFORM . . .

Imagine for a moment that the nation's healthcare system was a car. If that car had the kinds of problems that were articulated during the often-intense healthcare debate of the past year, it would be a vehicle with a sputtering engine, faulty brakes, no navigation system, bald tires badly in need of alignment, a radio that had trouble picking up signals, and various systems that were badly leaking money. In short, a car sorely in need of repairs.

The hard-fought and historic health care reform legislation recently passed by the 111th Congress and signed into law by President Barack Obama primarily affects this car in one dramatic way: it unlocks the doors and lets a lot more people into the passenger seats. After a century of trying to expand access, nearly all Americans will soon be on board.

But at the same time, it only begins to address the changes needed to ensure that the car doesn't break down completely, doesn't bankrupt its owner with repairs, runs efficiently – and ultimately reaches its destination.

As the policy debate begins to shift from the discussion on expanding coverage and ensuring access to one on improving outcomes and controlling costs, the early focus is on accountable care organizations, medical home models, bundled payments, and patient-centered care. However, academic investigators are beginning to notice one type of organization that is proving unusually adept at cutting costs, improving care and driving dramatically better outcomes for patients: integrated delivery systems.



Integrated delivery systems are usually defined as organizations comprised of provider and payer components. The organizations have insurance and diverse care delivery capabilities. Of all the specific health systems mentioned publicly by President Obama as examples of cost and quality during the healthcare debate, it is no accident that more than 80 percent of those he cited as models of reform were integrated delivery

systems – like the Mayo Clinic in Minnesota and Geisinger Health System in Pennsylvania – despite the fact that only 15 percent of providers in America are integrated systems. In fact, many of the integrated delivery systems, including Summa Health System, are already producing exactly the kinds of long-term improvements in healthcare delivery that Americans are hoping for.

## The Federal response: Pilot programs toward accountability

The healthcare reform law establishes a new Center for Medicare and Medicaid Innovation (CMI) that will provide the means for communities and health systems to explore moving away from the current payment system, creating new and better ways to improve outcomes, while improving quality and decreasing costs. CMI, with \$10 billion in funding between now and 2019, will use pilot programs to test various innovative payment and service delivery models.

These pilot programs – many of which are already underway – are specifically designed to change the way healthcare is delivered. “The changes that are derived will help usher in a third era of medicine, returning us to the days when medicine was defined as a social good,” said Thomas J. Strauss, president and CEO of Summa Health System. “As we see the results of these pilot programs, when it is clear what works and what doesn’t, we are going to see these solutions rapidly duplicate across the Medicare system. You may see replication in the private system as well.”

As the Robert Wood Johnson Foundation describes it, the most commonly discussed payment and delivery reforms fall into three categories.

The first category calls for encouraging effective, comprehensive primary care through more generous reimbursements while meeting performance, quality and efficiency standards, the most common version of which is known as a “medical home.”

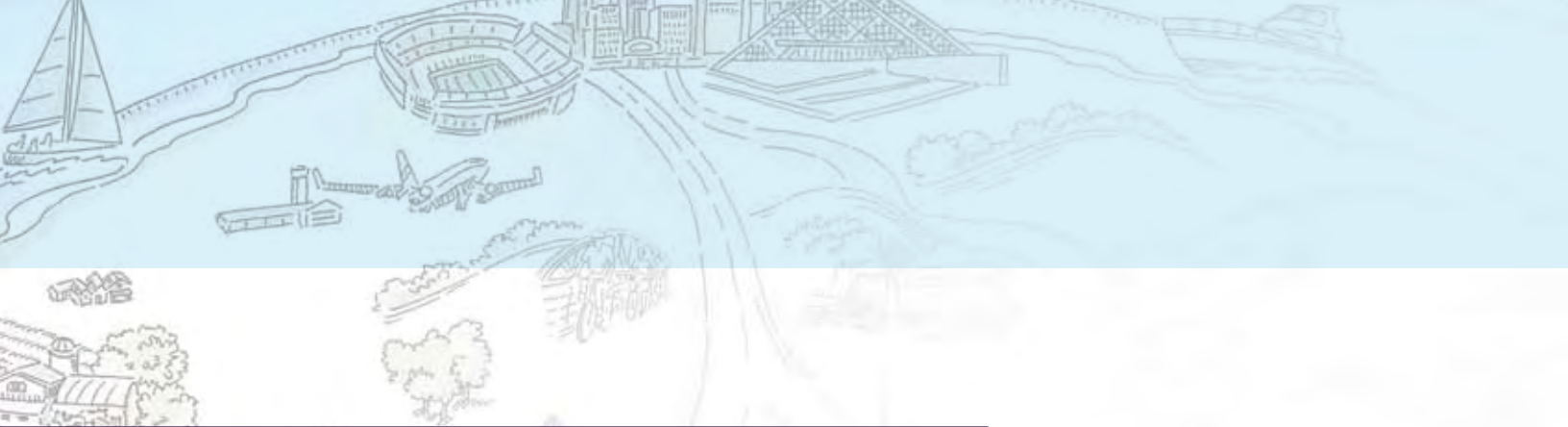


The second category calls for shifting away from separate payments for each discrete service to a single payment for all of a patient’s needs over a particular episode of illness, both outside and inside the hospital. This is the kind of “bundled payment” or “episode-based care” that has been associated with the Geisinger Health System and Marshfield Clinic in Wisconsin.

The third category approach calls for the creation of coordinated delivery systems, better known as accountable care organizations or ACOs. These are more expansive than the medical home and bundled payment models, and reward providers who deliver lower-cost, higher-quality care for a given population of patients. A typical ACO would include a hospital, primary care physicians, specialists, post acute care and community-based care support.

The Deloitte Center for Health Solutions further defined ACOs in an April 2010 report, saying, “A functional ACO should include, at a minimum, primary care physicians, specialists and, typically, a hospital; it also should be able to administer payments, set benchmarks, measure performance and distribute shared savings. ACOs are more likely to have specific competencies in governance and leadership, operational and clinical effectiveness, IT and infrastructure, risk management and workforce organization.”

What all of these models have in common is that they encourage collaboration among physicians, hospitals and other providers involved in a patient’s care; while actively working to reduce complications of care and the costs associated with them.



Summa's health plan, SummaCare, was established in 1993 as a way to provide healthcare services for local businesses while investing resources back into the Akron community. Today, SummaCare administers benefits to a Medicare population of 23,000 older Americans among its 109,000 members.

Like many integrated delivery systems, Summa has managed to transcend the tension that exists between insurers who benefit when hospital beds are empty and service providers who benefit when beds are full. Resources that come into the system through either the hospitals side or health plan side are circulated back into the system so everyone – including the community – will benefit. For the past 17 years, the absence of that tension has allowed everyone in the system to find new ways to cooperate and coordinate patient care.

The results are remarkable. Summa's overall costs are 30 percent lower than the national average and its outcomes are 30 percent better than the national average.

For those efforts, Summa Health System since 1997 has consistently been ranked one of America's best health systems by leading healthcare rating organizations. "We have worked hard to serve the people of this community with a combination of low-cost and high-quality compassionate care," said Strauss. "And we have been recognized for that leadership time and time again."



### Collaboration equals value

While Summa Akron City Hospital has been around since 1892, Summa Health System actually began in 1989, when Akron City merged with St. Thomas Hospital. Today, Summa Health System is one of the largest nonprofit integrated delivery systems in Ohio and is nationally recognized for excellence in patient care. Summa encompasses six hospitals, 14 ambulatory sites, more than 2,060 licensed inpatient beds, a foundation, four community health centers, more than 11,000 employees, a physician-hospital organization with more than 1,000 physicians', a multi-specialty physicians group with more than 200 members and a health plan covering more than 150,000 members.

## Planning ahead for success

In anticipation of the changes coming because of healthcare reform efforts, Summa leaders sat down at the table more than a year ago to assess the system's position and strengths and try to determine what factors will drive success through this time of transition.

The leadership team created work groups to address the needs of four distinct areas: a care model, a delivery network, finance, and informatics and technology. Each work group is charged with developing and defining the roles and responsibilities for their area.

The fundamentals of healthcare reform are closely aligned with Summa's mission, vision and experience. The work groups identified five reasons why Summa is well-positioned for success as healthcare reform is refined and implemented:



- 1 Commitment to the community** – with the creation of a Department of Community Benefit and a community benefit committee within the Summa Foundation board of directors, Summa is reaffirming its commitment to initiatives affecting community health, workforce development, community-based research and community economic development.
- 2 High quality at low cost** – Summa already provides high-quality care at low cost and is recognized nationally for its quality while still keeping a lower cost structure than comparable local, regional and national health systems.
- 3 Population management experience** – through its insurance company, SummaCare, Summa has developed an expertise in chronic disease management through an aggressive tracking program of intervention and outreach, and managing the overall health of populations toward effective lower-cost models of care.
- 4 Integration along the continuum** – as a fully integrated delivery system since 1993, Summa has a tremendous head start in aligning the work of hospitals, physicians, patients, the insurance company and community partners.
- 5 Ease of access** – Summa has convenient local access points across a broad geography in Northeast Ohio, including primary care and other physician offices, ambulatory centers, urgent care centers, emergency rooms and community hospitals

*Summa's vision is to be a clinician-led care organization that partners with communities to care for and serve its populations in a compassionate, accountable, value- and evidence-based manner.*



## Taking the first steps

Providing high-quality healthcare at the lowest cost is the main goal of the Premier healthcare alliance, a long-established group representing more than 2,300 hospitals and more than 66,000 healthcare facilities in the United States. That's also a goal of Summa Health System, a Premier member since 1985.

Owned by approximately 200 nonprofit hospitals and healthcare systems, Premier members unite to share their knowledge to improve local healthcare in several ways, including collecting and analyzing member data, evaluating and negotiating costs with suppliers as a group to reduce costs, and pooling knowledge about patient safety and

liability issues to gain control over insurance costs.

"The benefits go beyond financial savings," said Strauss, a member of Premier's board of directors since 2006. "As a network, the group shares best practices, collects and analyzes data used to implement system changes, and is able to have a greater voice on Capitol Hill."

Taking proactive, definitive steps toward reforming healthcare, the Premier alliance recently announced the launch of two Accountable Care Organizations Collaboratives. The ACO Implementation Collaborative is designed for health systems

able to pursue ACOs for patients today, leveraging existing payer partnerships and a tightly aligned, engaged physician network. The ACO Readiness Collaborative is designed for health systems that must first develop the organization, skills, team and operational capabilities necessary to become an ACO and ultimately join the Implementation Collaborative.

Nineteen of Premier's member health systems in 15 states across the country will take part in the ACO Implementation Collaborative, including Summa Health System. Collaborative participants will work together to evaluate the effectiveness of healthcare delivery models, using a disciplined and organized performance improvement methodology to measure results.



“We are uniquely positioned to build on our strong foundation of quality care, innovative care models and investment in infrastructure like health information technology,” Strauss explained. “The new health reform laws provide an exciting opportunity for Summa and other Premier members to advance our goals in delivering high value care and services to serve defined patient populations.”

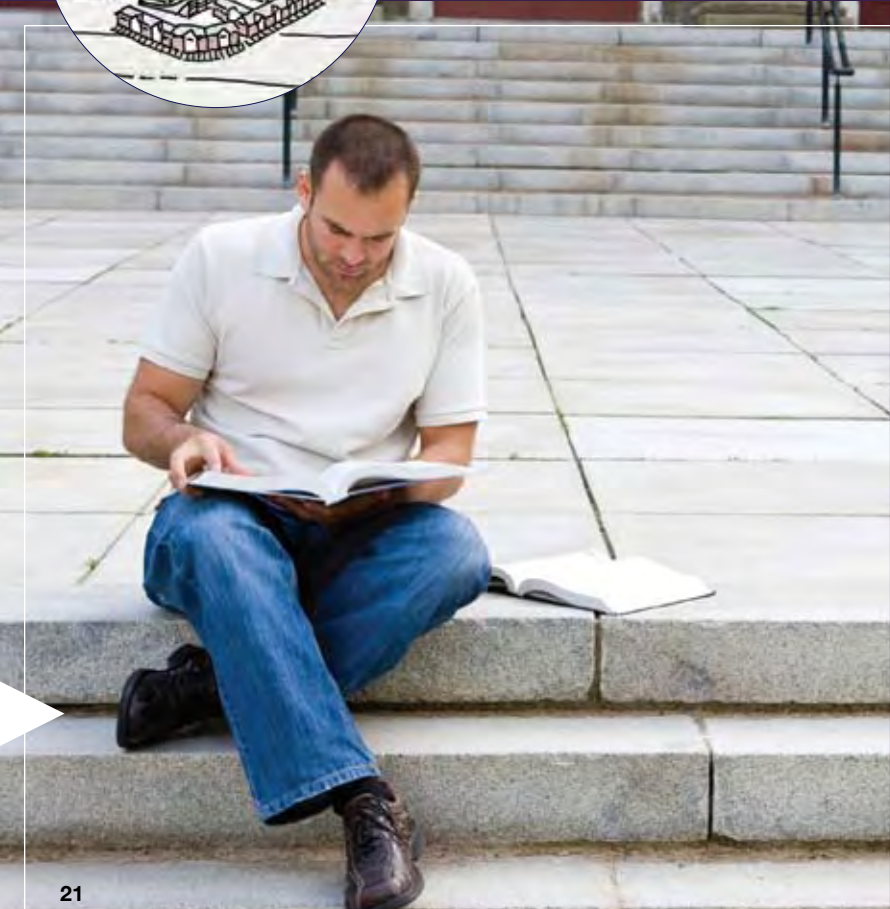


## Defining our own transformation

As an integrated delivery system, Summa already has all the components in place – the delivery system, physicians and health plan – working together to create innovative care delivery that is centered on patients. Since its inception, Summa has been committed to – and is accountable for – the health and well-being of the communities in the region and is well-positioned to be a leader in this new era of healthcare.

As health reform laws begins to shape a new system of healthcare in America – to fix all of the problems with the car, not just unlock the doors to let more people into the passenger seats – effective integrated delivery systems like Summa are proving that better outcomes, better quality and lower costs are possible. Now, as part of Premier’s national collaborative reform initiative to implement the ACO model, Summa and organizations like it should play a lead role in creating and defining a better system.

“We’ve been on this journey for 20 years,” said Strauss, “developing and coordinating resources within the healthcare environment and community to improve the health of individuals and defined populations. Summa has initiated innovation in care delivery and has made significant investments to lead healthcare reform in Ohio.”



### ABOUT SUMMA HEALTH SYSTEM

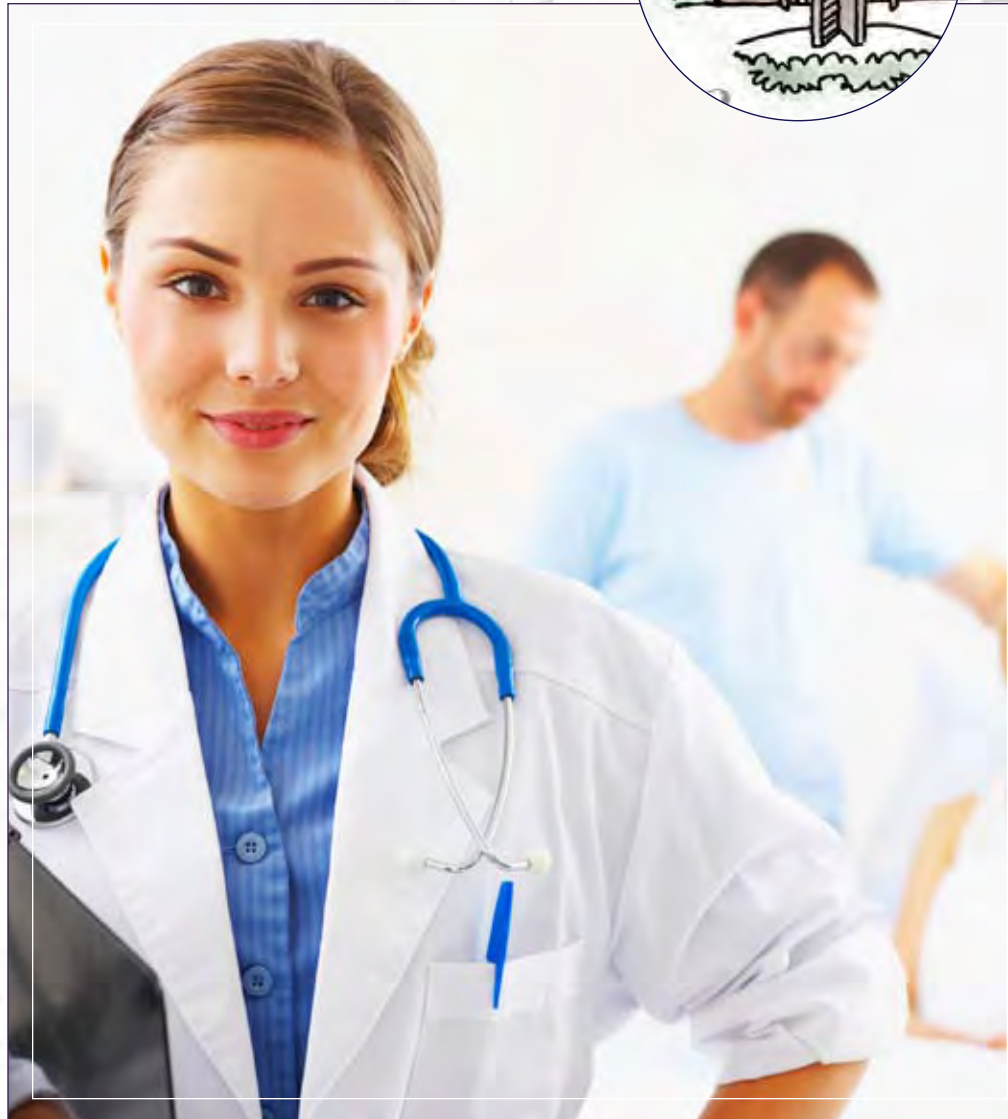
- **Founded in 1989**
- **Six Hospitals (Three Teaching) with 20 Residency Programs**
- **Health Plan with 105,000 Members**
- **Foundation**
- **Fourteen Ambulatory Sites**
- **11 Joint Ventures with Physicians**
- **230 Employed Physicians, 1,200 Total**
- **Total Employees: 11,000**
- **Admissions: 62,000**
- **Surgeries: 42,000**
- **Managed Medicare Population: 150,000 Members**
- **2009 Uncompensated Care, including Charity Care: \$58 million**
- **Total Net Revenues: \$1.8 billion**
- **Market Share in Greater Akron Region: 58.5%**



“Make no mistake, like it or not, in the next three to five years Summa will be transformed,” predicted Michael Hillman, M.D., MBA, Summa Health System vice president for quality and medical affairs. “The only question is whether we define our transformation or let others define it for us.”

Strauss agrees.

**“If we work together in the years to come, to execute the plan we’ve undertaken, while continuing to adapt to the changes happening at the federal level – Summa Health System won’t just survive, we will thrive,” he said. “We will lead the people of this community to a better, healthier future – and build a legacy over the next 10 years of which we can all be proud.”**





# Summa Health System Takes Giant Leap into Research

In what would be a giant leap for medical research in Akron, doctors and clinicians at Summa Health System are planning for the development of a medical toolkit that could serve U.S. astronauts on future space missions — potentially including Mars.

Through an agreement pending with the National Aeronautics and Space Administration, Summa would develop medical tools compact enough to fit inside a breadbox, yet adequate enough for minimally invasive surgeries in the weightless environment of outer space. Summa and NASA currently are working toward a memorandum of understanding to finalize a relationship.

Imagine this: An astronaut experiences sudden pain during a mission. The space captain's laptop doubles as a medical imaging device so the designated "doctor" on board can determine the cause. If necessary, minimally invasive surgeries could take place within the tight quarters of the space ship.

The next generation of space exploration, following the end of shuttle missions in September 2010, is certain to usher in all-new challenges requiring a new wave of innovation and discovery. Longer trips to more distant places in outer space will necessitate new routines and procedures – yet to be developed, tested and fine-tuned. Astronauts traveling to Mars, for example, would be in travel a minimum of 26 to 30 months. That means new challenges relating to food supplies, health and fitness, communications and countless other issues relating both to aeronautics and everyday living. The astronauts, in short, would need to function more autonomously than ever before – as if they were on an island. No longer would they be in constant real-time contact with mission control for immediate help in solving problems.

"Food, medicine, everything would have to be self-sustaining," said James D. Polk, D.O., chief of space medicine at the NASA Johnson Space Center in Houston. "There would be no freight trains carrying in supplies."

In this spectrum of new discovery and invention that NASA will need, Summa is eyeing a niche in supplying medical research and innovation. The task of developing a surgical toolkit alone

would require movement into a new frontier of medical research – where the issues relate not just to emergency medical response in space, but also how to keep astronauts physically fit during long journeys in a weightless environment.

"We don't know how the body will adapt to an extended stay in space," said William F. Fallon, M.D., MBA, FACS, chair of the Department of Surgery for Summa Akron City and St. Thomas Hospitals, who is leading Summa's effort to collaborate with NASA. "Astronauts, for example, lose muscle mass and bone density when they are in space. What can we do to prevent that?"

Existing space stations would likely serve as platforms to test new products, techniques and therapies. Even training programs would need to be invented – including those to teach astronauts how to become stand-in surgeons in space.

## So why Summa for such a project of galactic impact?

If you're wondering about Summa's connection with NASA, the short answer is this: Expect to hear more about Summa in conjunction with research and innovation having national and global implications.

Once the tire capital of the world, Akron's economic future, and that of northeast Ohio, is now tied to biomedical research and innovation. And in this emerging industry sector, the rubber meets the road – and produces jobs and income – in projects such as the one with NASA. The expectation is that such high-level research will draw in funding and jobs as a result of grants from government, private foundations, philanthropists and other charitable sources. There is further opportunity for business development – and new jobs – in producing products and equipment that result from new discoveries.

The NASA endeavor demonstrates just why this area is positioned to become a leader in the highest level of biomedical research and product development. It's because of the collective strength that already exists in our own region.

In addition to Summa, the Cleveland Clinic and University Hospitals make the area a powerhouse for innovative research. The region's two medical schools, Case Western Reserve University School of Medicine in Cleveland and Northeastern Ohio Universities Colleges of Medicine and Pharmacy (NEOUCOM) in Rootstown, both have impressive research to their credit. The University of Akron's (UA) bio-medical engineering program, coupled with their world-renowned College of Polymer Science and Polymer Engineering, offer the wherewithal to test and develop new medical products and equipment. Kent State University's (KSU) School of Biomedical Sciences, which includes a graduate program in cellular and molecular biology, offers still another research arm, along with their recently established College of Public Health.

Now add to the list the new Austen BioInnovation Institute in Akron (ABIA), which has been established as an umbrella organization to drive global leadership in biomaterials, medical research, education, clinical services and commercialization. ABIA's mission is to transform Akron through biomedical research and innovation for the 21st century – and Summa is among its founding partners, along with NEOUCOM, KSU, UA, Akron Children's Hospital and Akron General Medical Center. A five-year funding commitment of \$80 million to ABIA from its partners, along with the John S. and James L. Knight Foundation, the Ohio Third Frontier and First Energy Corp. speaks to the strength of this initiative.

In this spirit of collaboration that is expected to define Akron's future in bio-innovation, Summa already is turning to regional partners in planning



for the NASA project. For example, current research at NEOUCOM is investigating bone health in hibernating woodchucks. Findings indicate these animals do not lose bone and actually maintain skeletal integrity during hibernation. Identification of the genetic and hormonal mechanisms protecting a hibernator’s skeleton might provide insights into preventing and correcting bone loss in astronauts.

Similarly, in the development of a surgical tool kit, Summa would turn to UA’s experts in biomedical research and product development.

Collaboration of this kind is actually the old American way for new discoveries in medicine. At the dawn of the millennium, *Time* magazine described the 1900s as a time of “epidemic” medical discovery. Think penicillin, pacemakers, heart-lung pumps, CAT scans, PET scans, magnetic resonance imaging and the untold lives saved by these and other advances.

“It was (an) alliance of government, university laboratories and the private

sector that became the driving force of the wave of invention and refinement that has ranged from the submicroscopic . . . to the spectacular arena of major-organ replacements,” the Yale author and surgery professor Sherwin B. Nuland wrote in *Time* in 2001.

If medical discovery changed America last century, imagine what’s ahead. In cooperation with its partners in northeast Ohio, Summa is carving out its role in the next level of life-changing discovery

## The Summa-NASA connection

Leading up to initial conversations with medical experts at NASA, Summa’s President and CEO Thomas J. Strauss and his executive team developed a strategic plan that elevated the role of research in transforming Summa’s future.

Strauss credits August Napoli, president and chief operating officer of the Summa Foundation, for holding out a vision of greatness in research.

“Augie is taking us beyond where we thought we could go historically in research,” said Strauss. “He got us to believe we can do this. Everything about it is positive – the idea of bringing in new money and creating jobs while innovating in ways that save and improve lives.”

Summa’s goal is to distinguish itself in three areas of medical research:

- The development of new products and therapies to advance minimally invasive surgery
- Innovation in the use of polymers in medical procedures and equipment
- Advancements in orthopedics and wound care

Yet it’s one thing to set ambitious new goals. It’s quite another to start off running.

How did Summa attract NASA’s attention so quickly in a project that may potentially result in a flow of research money and new jobs to Akron over many years?

Quite simply, Fallon picked up the phone. He worked his network in calling Polk, his former colleague.

As chairman of surgery at Summa Akron City Hospital, Fallon works closely with Summa's Institute for Minimally Invasive Therapies (iMIT). For more than two years now, iMIT has been developing new procedures to help replace traditional surgeries – typically requiring long incisions – with minimally invasive techniques in which the incision may be as wide as a pencil top. There are lots of advantages, including faster recovery time, less pain and fewer post-operative complications from blood loss and infection. That's why minimally invasive therapies are evolving rapidly – and why they would be particularly suited to treating medical emergencies in space.

Fallon's phone call to Polk was to see what NASA might need in planning future space missions and whether iMIT might play a role.

Early in their careers, Fallon and Polk worked together in the life-flight program at Cleveland Metropolitan General Hospital. Even then, both doctors had a bend toward research into improved medical care in flight. They and their colleagues at Metro were the first to use ultra-sound in flight.

This past December, Polk, along with two other NASA flight physicians and a physiologist, spent a day at Summa at Fallon's invitation. The meeting led to a verbal agreement to formalize a relationship in which Summa researchers would begin work on a toolkit for future space missions. There is no funding commitment at this time, but the project would enable Summa to seek grant money from a variety of sources in addition to NASA.

## Let the research soar

As with other NASA research efforts, Summa's effort to develop new therapies and products for use in outer space would surely have implications right here on Earth.

Eric. A. Espinal, M.D., director of Summa's minimally invasive cardiothoracic surgery program and co-director of iMIT, noted the wide applications that often result from narrow research. One example: the U.S. Department of Defense supported early research into robotic surgery for the benefit of treating injured soldiers. Now, those same discoveries are put to use every day in surgical procedures.

Espinal already envisions ways that research conducted for space travel could lead to advances that will benefit everyone. One result might be better diagnostic procedures. Another, in the case of research into the loss of bone mass, might be new treatments and even prevention of osteoporosis.

"Think about the impact on society if we could figure out how to slow the process of osteoporosis," Espinal said. "It's absolutely fascinating to think about the possibilities."

To be sure, as great as the possibilities may be, so are the hurdles ahead.

"We need to do a lot more work to understand the physiology of outer space," said John G. Zografakis, M.D., Summa's director of Advanced Laparoscopic Surgical Services and also a co-director of iMIT. "I know how to control bleeding in an operating room, for example. But I don't know how blood will react in space. It could be a mist or it could bead up like a drop of water on the hood of a car after you wax it. We would need to break down each component of surgery and know what to anticipate."

The first goal, Zografakis said, should be preventative measures to avoid



the need for surgeries in space if at all possible. In some cases in the future, it may be possible to transport astronauts to a space station, where robotic surgery may be performed with doctors controlling instruments from mission control in Houston.

For Summa, Dr. Zografakis noted, the journey itself will produce benefits, not the least of which will be improved educational opportunities for residents and students in health-related fields. “Everyone is advancing in technology and we need to do that too,” Zografakis said. “We’ll turn out better doctors and that will improve our ability to provide the best patient care we can.”

In no small way, the NASA project would set the table for Summa’s new focus on research – demonstrating the real possibility of a revolutionary role for Akron in influencing improved delivery of health care, new product development, advances in therapies, better education and economic development.

“It’s about bringing people together,” said Steven P. Schmidt, Ph.D., director of Summa’s Division of Surgical Research. “We are building the critical mass necessary to support a focused research agenda that will impact health care and medical education as well as jobs and the economy in Akron.”

The space of a breadbox never seemed so large.

► *Diane Evans*



summa magazine

**Jay C. Williamson, M.D., CPE**

# A Day In The Life





**5:00am** Jay C. Williamson, M.D., CPE, begins his day at home in Tallmadge with a routine – stretching, a shower, a bowl of raisin bran and a fiber drink (“my boring breakfast,” he calls it). He takes a quick look at the Akron Beacon Journal and chats with his wife of 41 years, Janice, as she drinks tea. It’s a routine that grounds him for a day in which he will fill many roles – as a family physician and Summa Health System family medicine specialist, a teacher in (and formerly president of) the Summa Family Medical Residents Program, and as the interim dean of the College of Medicine at the Northeastern Ohio Universities Colleges of Medicine and Pharmacy (NEOUCOM) in Rootstown. But his morning chat with Jan and their talk at the end of the day bookend his busy schedule with what is most important to him – family.

They may talk about their two sons or four grandchildren, who are all under the age of three and frequent visitors to their house, or their plans for the day. “I get a handle at the beginning of the day on where he’s going to be and if he’s going to be home,” says Jan, who is used to the dinner meetings he is committed to five or more nights a week as a board member of several community health organizations. “I learned early on, everything is tenuous. You can make plans, but you never know...”

His multiple roles are fulfilling in different ways, Williamson says. At 63, he has been the primary physician for some patients for 30 years. He likes the immediate gratification of seeing a sick patient get better. But he also values the longer-term rewards of having a student set up a successful practice or working on policies and teaching practices that will help determine how family medicine is delivered.

“There are things I feel very strongly about,” he says, such as continuing education for physicians. He chairs the state accreditation task force on Continuing Medical Education (CME)

and has been involved with it since the 1970s. “I’ve just always felt that physicians need continuing education to improve their skills and stay up-to-date. The world changes, medicine changes and you need to change, too.”

Yet for all the changes in medicine, including the technical ones (his own practice switched to electronic records three years ago and he calls it a terrific help) he wants to make sure medical students don’t lose the personal touch that makes family medicine so rewarding.



“When I see patients now after 30 years or so – I know so much about them,” he says. He has helped families through multiple problems, illness and death. “It’s about the relationships I’ve developed with my patients over the years.”

**7:00am** Williamson’s first stop is one of the Summa hospitals in Akron, where he checks on his own patients and may attend a meeting. His practice, Primary Care Physicians, is located in a professional building on the campus of Summa Akron City Hospital. He sees patients there on a limited basis now, usually on Fridays.

His close relationships with his patients influence the advice he gives to medical students. Research shows

doctors typically spend less than 17 seconds from the time they say “hi” to a patient until they begin asking routine questions about the patient’s condition. It’s just not enough, he says. “You need to spend time just to get to know people – it pays great dividends.”

NEOUCOM emphasizes to its students the importance of interacting with patients. Each year the students must be observed and graded by an experienced physician as they meet with a patient in a mock examination. The patient is also asked to evaluate the student’s approach.

**9:00am** By now Williamson is at the NEOUCOM campus in Rootstown, where a series of meetings will usually consume most of his mornings. On Mondays, he starts with a leadership team meeting of the president, deans and vice presidents. Williamson’s schedule is maintained by Lori Nestor, his assistant. She contacts him frequently on his iPhone and tries to organize the day so that he’s not driving between Akron and Rootstown multiple times.

“He stays on schedule,” she says. “He’s good at that.” As interim dean, a post he assumed in January in addition to his other duties, Williamson has what amount to two full-time jobs in one eight-hour day, she notes.

**12:00pm** His lunch menu, Williamson says, is also boringly predictable – yogurt, a granola bar and an apple, usually eaten while he works at his desk or talks with students who drop by.

NEOUCOM's mission is to orient students to practice at the community level and its goal is to get more doctors into first contact primary care. Up to 60 percent of its students choose primary care. Founded in 1973, it is small for a medical school – 115 medical and 75 pharmacy students a year, drawn from The University of Akron, Kent State



and Youngstown State University – but plans are forming to expand it to 150 medical and 100 pharmacy students, perhaps drawing in students from Cleveland State University, too.

“We believe there is a need to train more primary care physicians,” Williamson says.

The key to getting more people to practice family medicine, he believes, is making sure the job is satisfying and that family physicians, who make less money than specialists, get loan forgiveness for their medical school debts which can be as much as \$150,000. One emerging model for making primary care more satisfying is being tried in Canada – patient-centered medical teams that include physicians, social workers and behavioral specialists.

If he could have one wish granted for healthcare reform, it would be greater access to medical care for all citizens. Williamson was instrumental in getting the Portage County Community Health Center opened last year to serve people without health insurance

and is associated with the Summa affiliate Robinson Memorial Hospital. Williamson volunteers as a physician one evening a month.

That work has been “a great learning experience for me,” he says. He wants to make sure NEOUCOM students get involved, too, so they understand the issues faced by patients who have no ready access to transportation or regular medical care.

Williamson's role model for his career was his father, the late Albert Louis (Lou) Williamson, an old-style family physician in Niles. For 35 years Lou Williamson treated people in the community, sometimes taking pizza or cookies in payment for his services. The family home was above his office.

“If I wanted to see my dad, I'd walk through the waiting room where the patients were,” says Williamson.

At times his father was the only physician in Niles. He would do major abdominal surgery or remove gall bladders at the hospital in the morning, then see 40 or 50 patients in the afternoon. And he delivered babies.

Williamson decided he wanted to be a family doctor when he was a senior at Niles McKinley High School. After graduating in zoology from Ohio University, he went to medical school at Ohio State University, then trained at Akron City (now Summa Akron City Hospital) and stayed to teach residents and set up his practice. It was a tough decision not to join his father's practice.

Along the way, he had met Janice Jones in his junior year of high school. They both graduated from Ohio University in 1969; then married. She worked as a kindergarten teacher in an inner city Columbus school while he earned his medical degree.

**1:00 - 4:00pm** More meetings at NEOUCOM take up many of his days or Williamson may drive from Rootstown to Canton, Youngstown or Akron hospitals, a 30- to 45-minute trip in any direction, for meetings. In a year, his Nissan Altima ticks off 10,000 miles in work mileage. His iPhone is his constant companion as he checks his schedule, e-mails and calls to keep up with the status of patients.

He also has late day and evening meetings as a board member of several community health boards, including the Summit Country District of Health. He is a past president of the Summit County chapter of the Ohio Academy of Family Physicians and served on committees and boards in a variety of leadership roles at Summa continuously since 1979. Williamson currently serves as a member of the Summa Health System board.

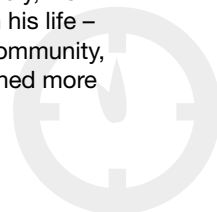
**5:00 - 8:00pm** Absent a dinner meeting, Williamson will check back on patients in Akron. His attention to his patients is well-known. One doctor who has covered for him on weekends says he always has to promise the patients that he will relay their full stories to Dr. Williamson.

As the day draws to a close, Williamson tries to stop by the Tallmadge Recreation Center for a two-mile walk/jog. When he gets home, he'll rest for a half hour or so, then go over parts of his day with Jan. She has gotten to know some of his patients personally, even visiting elderly patients at home or taking them to appointments. She also served as a referral for patients who are diagnosed with breast cancer and want to talk to someone who has been through it. Jan is a two-time survivor of breast cancer and a former volunteer for Reach to Recovery. She says she feels very fortunate to be a survivor; her cancer was caught early both times. “It doesn't define me,” she says simply.

But it is another touchstone for what illness means to families. Because her husband lived through these experiences with her, she says, “It has helped him in his practice, dealing with other women and what they go through – and their spouses.”

**10:00pm** Williamson often works on paperwork at night; then he and Jan might watch sports on TV, especially if the Cavs are playing.

The long day eventually catches up with him and he sleeps soundly, his ties to the various families in his life – his patients, students, the community, his wife and children – fastened more securely every day.



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