

## Serving Our Present, Caring for our Future

Progress in Community and Global Citizenship, 2015

# About the 2015 Report

Cleveland Clinic compiles this report for our patients, caregivers, communities and global stakeholders. Cleveland Clinic is the only top ranked healthcare system in the United States to utilize both the Global Reporting Initiative (GRI) and the ten principles of the United Nations Global Compact in our reporting.

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## Reporting



As a leader in the healthcare industry, we are accountable for our social, environmental and economic impacts. We develop this report annually to share our performance metrics and stories, to highlight our accomplishments and to communicate our challenges as we strive to reach our goals.

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## Patients



“Patients First” is our guiding principle. We believe our patient-centered culture focused on compassion ensures our sustainable, long-term and viable future.

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## Caregivers



Our 42,523 caregivers are our most important resource. Cleveland Clinic is committed to maintaining a healthy, safe and engaged workforce

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## Community



Cleveland Clinic is committed to serving our communities by providing high-quality healthcare and wellness services, medical research and education.

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## Environment



Cleveland Clinic recognizes the link between environmental and human health. We strive to responsibly address and mitigate our environmental impacts.

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## Governance



Cleveland Clinic is committed to conducting business the right way, by emphasizing corporate compliance, transparency, social responsibility, environmental stewardship and ethical decision-making

# Reporting

Cleveland Clinic compiles this report for our patients, caregivers, communities and global stakeholders. As a leader in the healthcare industry, we hold ourselves accountable for our social, environmental and economic impacts. We develop this report to share our performance metrics and stories with you. We use this opportunity to highlight both our accomplishments and communicate our challenges as we strive to reach our goals.

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## A Letter from Dr. Cosgrove, CEO and President

Cleveland Clinic is committed to responsible purchasing and resource use, intentional and beneficial enterprise growth, community engagement and preventative health programs.

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## About This Report

This report marks our sixth consecutive Communication on Progress and reflects our work in the 2014 calendar year. In addition to addressing the ten principles of the United Nations Global Compact, this report applies the Global Reporting Initiative G3.1 guidelines.

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## Organizational Profile

Located in Cleveland, Ohio, Cleveland Clinic is a nonprofit, multispecialty academic medical center that integrates clinical and hospital care with research and education.

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## A Letter from Dr. Cosgrove, CEO and President

### Dear Patients, Caregivers and Community Members,

We are pleased to present our fifth Communication on Progress as part of the United Nations Global Compact. Cleveland Clinic shares the UN Global Compact's Principles of human rights, environmental responsibility and corporate integrity. This report uses guidelines developed by the Global Reporting Initiative to measure our performance in these areas.

Cleveland Clinic continues to address the needs of a changing healthcare environment. Innovation and new knowledge have made it possible for us to do more for more patients than ever before. At the same time, we face challenges of chronic disease, demographics and access. North America must cope with an epidemic of obesity and consequent rise in cases of heart disease, diabetes, stroke and joint disease. As the population ages, we are already seeing a dramatic rise in neurological conditions related to aging. Governments and payers strain to meet the costs of treating these diseases.

Cleveland Clinic sees these challenges as opportunities. The collaborative approach to medicine pioneered by Cleveland Clinic in 1921 continues to be an efficient and effective model for care. All of our doctors, nurses and support caregivers are on the same team, with the same incentives to control costs, improve quality, and provide courteous, attentive and empathetic care. We are collaborating with our partners and communities to lower costs, support innovation, and most importantly, promote healthy behaviors that prevent disease and lower the need for expensive treatments.

Sustainability is an essential part of our strategy. We are committed to responsible purchasing and resource use, intentional and beneficial enterprise growth and community preventive health programs. We have joined with local governments and community groups to promote weight-loss and smoking cessation. Our Minority Men's Health Center provides free screenings and education. We urge leaders at all levels of society to promote nutrition, exercise and greater personal responsibility for health.

In 2013, Cleveland Clinic provided medical services to more patients from more places than ever before. We have been recognized among the World's Most Ethical Companies by Ethisphere Institute, and honored as a top five hospital by DiversityInc.

We are proud to share the information in this year's Communication on Progress. Thank you for your interest.

Sincerely,



Delos M. Cosgrove, MD  
Cleveland Clinic CEO and President



# About This Report

As a signatory of the United Nations Global Compact, a voluntary social responsibility body, Cleveland Clinic has pledged to promote sustainability policies and practices to advance our organization in ways that benefit the economies and societies we serve.

In this report we summarize Cleveland Clinic's progress in the areas of human rights, labor, environment and anti-corruption.

This report marks our fifth consecutive Communication on Progress and reflects our work in the 2013 calendar year. In addition to addressing the 10 Principles of the UN Global Compact, this report applies the Global Reporting Initiative G3.1 guidelines, the world's most common standard for sustainability reporting.

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## Oversight

An Executive Steering Committee comprised of leadership across the organization oversees the reporting process. This oversight includes materiality and data availability assessments, and informs the theme and direction of our report.

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## Scope

The scope of this report is limited to our North American operations that are wholly owned and operated. Environmental metrics include only our owned and operated facilities. Labor and human rights metrics include all Cleveland Clinic employees unless otherwise noted. The scope for all other data is defined within the content of this report.

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## Stakeholders

Many organizations look to Cleveland Clinic as a leader in the provision of patient care. By virtue of our scope and operations, Cleveland Clinic engages many stakeholder groups. Our stakeholders include the entire healthcare provider industry, trade associations, federal and state agencies, regional and national philanthropic foundations, media outlets, community groups, citizens and others.

Our stakeholders are directly affected by our operational decisions, including individuals and groups with an interest in our social, economic and environmental performance. As a community anchor and an economic engine, our operational decisions have far reaching impacts and we interact with these stakeholders to ensure that we address the needs of our local communities, employees and patient base.

We have prioritized the following stakeholder groups for reporting engagement:

- Patients
- Caregivers
- Communities
- National Sustainability Leaders

Stakeholders are typically contacted on a case by case basis, depending upon the areas affected by the issue at hand. These interactions usually involve in-person meetings for the purpose of discussing the issues and exchanging the views of each party. We perform periodic proactive outreach to these groups, inviting them to attend facility openings, addresses by Cleveland Clinic executives and other Clinic-hosted events open to the public and other officials. We also periodically travel to the seats of federal, state and local governments to provide briefings on issues of importance to healthcare providers. Occasionally stakeholders reach out directly to Cleveland Clinic in order to discuss issues of mutual importance and we typically convene internal subject matter experts for such interactions.

Cleveland Clinic continues to provide support and expertise in the area of healthcare reform for our public sector stakeholders. This may take many forms, including the support of changes to the government programs on the federal and state levels. Cleveland Clinic also leads or supports legislative and regulatory policy initiatives when it is in the best interest of our institution and our stakeholders.

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## Materiality

Report content is determined by materiality and data availability assessments. Following our 2014 online report, we conducted patient and caregiver interviews to shape the content and emphasis of this report. In December 2014 and January 2015, we interviewed local and national community stakeholders to inform our 2015 report content. All stakeholder groups showed the most interest in areas of the report with which they had a direct connection:

- Patients are most interested in patient safety and quality of care indicators
- Caregivers are most interested in caregiver demographics and caregiver stories
- Local community stakeholder groups are most interested in our contributions and impacts on our local communities
- Local community stakeholder groups are most interested in our contributions and impacts on our local communities.
- National environmental groups are most interested in our environmental performance and commitment to transparently reporting our progress.

These results and guidance from our Executive Steering Committee have informed both the content and structure of our 2015 report.

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## The Reporting Process

This report was compiled with the participation of the following internal organizations that support application of the UN Global Compact principles through Cleveland Clinic:

- Center for Medical Arts & Photography\*
- Arts & Medicine
- Buildings and Properties
- Clinical Affairs
- Corporate Communications
- Corporate Compliance Office
- Environmental Health and Safety
- Executive Administration
- Finance
- Human Resources
- Law Department
- Nursing Institute
- Office for a Healthy Environment
- Office of Diversity and Inclusion
- Office of Government and Community Relations
- Office of Patient Experience
- Protective Services
- Supply Chain Management
- Quality & Patient Safety Institute
- Transportation and Fleet Services
- Wellness Institute

\*Photographs from the Center for Medical Arts & Photography were contributed by the following photographers: Ken Baehr, Don Gerda, Matt Kohlmann, Willie McAllister, Tom Merce, Reen Nemeth and Stephen Travarca.

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## About the United Nations Global Compact

The United Nations Global Compact (UN Global Compact) is the world's largest voluntary corporate citizenship initiative with more than 10,000 corporate participants from more than 130 countries. In 2008, Cleveland Clinic became the first healthcare provider in the United States, and the second in the world, to commit to the UN Global Compact.

The UN Global Compact seeks to mainstream 10 principles in business activities around the world to ensure that markets, commerce, technology and finance advance in ways that benefit economies and societies everywhere. Cleveland Clinic has committed to aligning our operations and strategies with the 10 UN Global Compact principles and to publish an annual Communication on Progress.

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## About the Global Reporting Initiative

The Global Reporting Initiative (GRI) is a non-profit organization that promotes economic, environmental and social sustainability by providing the most universally used framework for sustainability reporting world-wide.

In 2012, Cleveland Clinic became the second U.S. healthcare provider to adopt this international gold-standard reporting process. By following the GRI framework, we enhance the rigor and quality of our Communication on Progress and facilitate continuous improvement through an incremental approach to reporting.

# Organizational Profile

Located in Cleveland, Ohio, Cleveland Clinic is a nonprofit, multispecialty academic medical center that integrates clinical and hospital healthcare services with research and education.

Four renowned physicians founded Cleveland Clinic in 1921 with a mission to provide better care of the sick, investigation into their problems and further education of those who serve. Drawing from military medicine, they believed in diverse specialists working and thinking as a unit. This kind of cooperation, efficiency and shared vision has fostered excellence in patient care, research and education.

Today, we continue to live and operate by the mission established by these visionary leaders, which is supported by six fundamental values: quality, innovation, teamwork, service, integrity and compassion.

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## Where We Operate

Cleveland Clinic is a physician-led, nonprofit organization with an independent board. We operate:

- 10 hospitals located in Northeastern Ohio
  - 18 Northeast Ohio outpatient family health centers including 10 ambulatory surgery centers located in a seven-county area
  - as minority member of Akron General Health System in Akron, Ohio
  - two specialized cancer centers in Mansfield and Sandusky, Ohio
  - Ashtabula County Medical Center in Ashtabula, Ohio by providing management services
  - a hospital, family health center and medical office in Weston, Florida
  - a health and wellness center in West Palm Beach, Florida
  - a specialized neurological and urological clinical center in Las Vegas, Nevada
  - a health and wellness center in Toronto, Canada. This facility is out of scope for this report.
  - a 364-bed hospital in Abu Dhabi, owned by the Mubadala Development Company. To learn more click [here](#).
  - 760 staffed beds and provide management services in cooperation with Abu Dhabi Health Services Company to the Sheikh Khalifa Medical City, a network of healthcare facilities in Abu Dhabi, United Arab Emirates.
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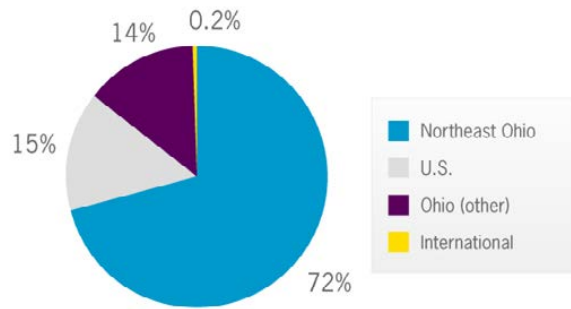
## Who Are Our Patients?

As a world-class health organization nationally ranked in 14 adult specializations and 10 pediatric specialties, Cleveland Clinic attracts patients from around the world. While most of our patients live in Northeast Ohio, we see patients from across the United States, Mexico, Europe, the Middle East, Asia and South America.

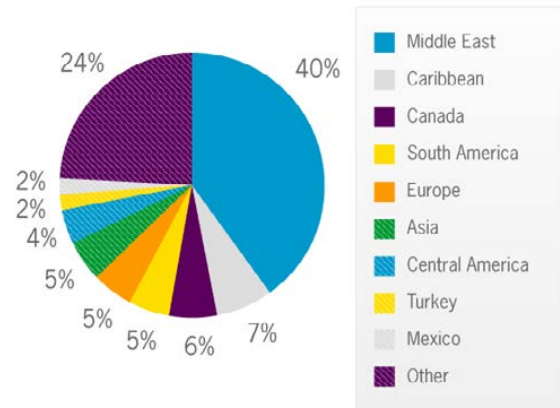
In 2014, 72% of patients came from Cleveland and the seven adjacent counties. This distribution has remained constant for the past several years.



## Patient Distribution



## International Patient Distribution



# Patients

“Patients First” is our guiding principle and we believe healthcare is all about patients and caregivers, with the patient at the center of the experience. Our goal is to provide the right care, at the right time, in the right place for all of our patients. Caregivers are committed to patient safety and empowered to develop new procedures, build new tools and make decisions that will result in better outcomes for patients.

To achieve optimal patient satisfaction, we are creating readily available access, driving superior quality and making healthcare affordable through efficient, evidence-based medicine. We believe our patient-centered compassionate culture ensures our sustainable and viable future.



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## Care Transformation

Cleveland Clinic is creating a model for the future of healthcare by focusing on access, quality and affordability. Our care paths, care coordination, distance health and patient-centered medical home programs are helping us transform our care.

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## Patient Safety

Lowering risk to patients and improving outcomes are goals shared by all healthcare providers. Cleveland Clinic has standardized our patient safety approaches and embedded safety and quality principles into the culture of our organization.

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## Quality of Care

Our patients come to us with the expectation that they will meet with world class professionals and receive individualized care for the best possible outcomes. Our Department of Quality and Patient Safety Institute (QPSI) oversees a comprehensive program to monitor, assess and improve the quality of patient care.

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## Patient Satisfaction

We recognize the patient and the caregiver have a reciprocal influence on one another and we believe this relationship is morally valuable. Cleveland Clinic was the first major academic medical center to make patient experience a strategic goal, and one of the first to establish an Office of Patient Experience.

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## Patient Data

Cleveland Clinic tracks patient data such as HCAHPS, patient safety indicators and outpatient satisfaction scores in order to better understand and improve our patients' experience.

# Care Transformation

The U.S. healthcare system is in the midst of an unprecedented transformation. We continue to draw upon our deep capabilities and spirit of innovation to lead the field in creating a model of healthcare for the future. Some of the most perplexing issues can be solved by answering the simple question: What is best for the patient? Our mission is to provide better access, quality, and affordability to all of our patients. Here is how we are working to achieve this goal:

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## Care Paths



Care paths are multidisciplinary plans of care that limit variation in care and optimize outcomes. Providers base treatment on documented evidence or shared experience to deliver consistent value for a patient or population of patients.

The care path initiative focuses on three main objectives:

- Standardizing physician clinical management with a focus on value-based, patient-centered care
- Integrating work flows and algorithms into the electronic medical record when appropriate
- Tracking patient-reported outcomes to improve care quality

We currently have 95 care paths in development, and 35 undergoing operational pilots. Our Center for Medicare and Medicaid Innovation provides a complete care path for total joint replacement patients. This bundled treatment plan along with a bundled payment plan provides efficient care for the patient.

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## Care Coordination



Every patient deserves the same safe, quality care at every encounter. Care coordination is a patient-centered, provider-driven, collaborative approach to cost-efficient healthcare delivery. Care coordinators provide high-risk patients with support to help them meet their clinical goals and achieve better outcomes. In our nation's new value-based healthcare model, our caregivers work to help these patients achieve optimal health.

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## Distance Health



Technology is transforming where and how we practice medicine. Through distance health, Cleveland Clinic is bringing our care to more patients in more locations. One of 2014's top-10 medical innovations is the Mobile Stroke Treatment Unit. High-tech ambulances bring the emergency department directly to the patient with stroke symptoms.

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## Patient-Centered Medical Home



A patient-centered medical home might sound like a place, or somewhere you would go, but it is not. It is a long-term, team-based approach for your primary health care. Patients are engaged with their care team across the continuum and have a direct relationship with their provider who coordinates a team of caregivers and arranges appropriate treatment as needed.

In 2013, the Joint Commission's surveyors evaluated us on how effectively primary care clinicians and interdisciplinary teams work in partnership with patients to provide comprehensive, coordinated and patient-centered care. The Primary Care Medical Home certification was launched for hospitals in February 2013 to help improve outcomes, reduce healthcare costs and ensure patients receive timely and appropriate treatment. As an outcome of The Joint Commission's survey, 39 Medicine Institute practices at 29 sites — involving 230 primary care physicians and advanced practice nurses — received Primary Care Medical Home certification at Cleveland Clinic.

Medical homes exist at our Family Health Centers and on our main campus.

# Patient Safety

Lowering risk to patients and improving outcomes are goals shared by all healthcare providers. Cleveland Clinic has standardized our patient safety approach and embedded safety and quality principles into the culture of our organization.

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## A Culture of Safety

Cleveland Clinic's culture of safety continues to evolve. We encourage caregivers to report, through our Safety Event Reporting System, any event that caused, or had the potential to cause a medical error or injury. Reporting on "near misses" allows us the opportunity to improve our practices and prevent future errors.

We assess our safety culture through a survey to caregivers and gauge performance on these key themes:

- Communication Openness
- Handoffs and Transitions
- Management Support for Safety
- Non-punitive Response to Error
- Organizational Learning and Continuous Improvement
- Staffing
- Teamwork
- Workplace Safety

We enforce the national safety requirements designed for hospitals to provide safety from fire, smoke and panic. National safety requirements reduce patient and caregiver exposure to harmful cleaning chemicals and potential allergens such as latex.

Cleveland Clinic's Department of Infection Prevention establishes and educates caregivers on policies such as equipment cleaning guidelines, influenza vaccination policies and hand washing protocols. The Department of Infection Protection applies epidemiologic strategies and conducts research to reduce incidences of hospital-acquired infections.

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## Patient Safety Goals

We measure success by meeting the National Patient Safety Goals as defined by the Joint Commission, a national healthcare accreditation organization. Patient safety measures include patient safety indicators, hospital-acquired conditions, infections and nursing quality indicators.

### Patient Safety Goals

MEASURE	2014 TARGET	2014 PROGRESS
Pulmonary Embolisms and Deep Vein Thrombosis	5.5/1000	7.5/1000

In 2014, we focused on the reduction of pulmonary embolisms and deep vein thrombosis. We continued to reduce the rate of post-operative blood clots and are poised for sustainment given the process improvements implemented over the past year. These gains are attributable to the diligence of the clinicians and largely credited to a marked increase in local awareness and accountability.

Initiatives included revised radiology ultrasound orders to reduce unwarranted lower leg scans, improved utilization and compliance with compression devices, reduced missed doses of pharmacologic prophylaxis, and enhanced screening of hospital transfer patients. Recognizing the importance of sharing best practices, Cleveland Clinic joined a new collaborative with several other academic medical centers through the Joint Commission Center for Transforming Healthcare. The goal of the program is to develop innovative new approaches to better serve patients at risk for hospital-acquired blood clots and will allow for new value-added learning networks with some of our major peer institutions.

# Quality of Care

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## Overview

Cleveland Clinic's Department of Quality oversees a comprehensive program to monitor, assess and improve the quality of patient care. It partners with our frontline caregivers in improving clinical practices for enhanced quality outcomes. Content experts bring knowledge of regulatory, safety, investigation and prevention strategies, as well as performance improvement tools to our front-line caregivers.

In addition, Cleveland Clinic supports transparent public reporting of healthcare quality data and participates in the following public reporting initiatives:

- Joint Commission Performance Measurement Initiative
- Centers for Medicare and Medicaid (CMS) Hospital Compare
- Ohio Department of Health Service Reporting
- National specialty society databases

Cleveland Clinic publishes our Quality Performance Reports annually. [Click here](#) to read our Quality Performance Reports for each hospital.

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## Standardizing Best Practices

Each clinical institute is required to measure and improve their quality of care. To do this, departments and institutes establish benchmarks and publish annual outcomes available on our website. [Click here](#) to find out more.

This data helps identify opportunities to standardize best practices. It also holds us accountable to our performance and provides the information external referring physicians require when choosing to send their patients to Cleveland Clinic for specialized care.

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## Catheter Associated Urinary Tract Infections (CAUTI) Success

### **Our Challenge:**

Catheter associated urinary tract infections (CAUTI) are recognized as the most common hospital acquired infection (HAI) and have reached national prominence with process and outcome mandated public reporting. Cleveland Clinic recognizes that decreasing CAUTIs is beneficial for patients, minimizes reputational risk, reduces cost of care and positively influences the organization's Value Based Purchasing Score.

### **Our Solution:**

Intense focus on proper insertion, maintenance and prompt removal of the device can mitigate risk of infection.



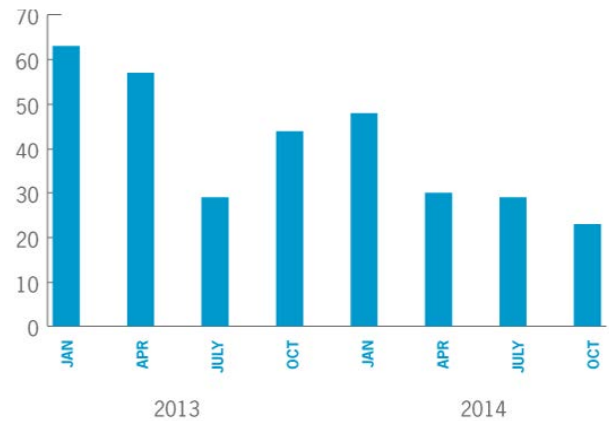
Appropriate catheter management crosses all disciplines as demonstrated by the best practice of discontinuing catheters by 48 hours in postoperative patients. Here are some steps Cleveland Clinic caregivers implemented in 2014 to achieve our success:

- Optimized ordering and refined maintenance of catheters
- Implemented enterprise-wide surgical care improvement project (SCIP) physician process and nursing documentation
- Confirmed fidelity of catheter documentation
- Established Nurse Driven Urinary Catheter Protocol for maintenance and removal
- Conducted electronic catheter maintenance audits
- Improved the collection and transport of urine cultures
- Optimized physician practice through evidence based care

**Our Success:**

ICU CAUTI rates across the enterprise dropped from 2.18 infections per 1,000 device days to 1.52. This is a 30% reduction that resulted in 63 fewer infections in our patients. The estimated reduction in cost of care for the enterprise is in excess of \$2.5 million.

**Enterprise ICU Number of CAUTI**



**Quality of Care Goals**

MEASURE	2014 TARGET	2014 PROGRESS
30-Day Readmission Rate	13%	14.03%

# Patient Satisfaction

Our patients come to us with the expectation that they will meet with world class professionals and receive individualized care for the best possible outcomes. To provide this level of care, Cleveland Clinic uses mechanisms to measure our patients' satisfaction and gather patient feedback on opportunities for improvement. This data informs our policies, procedures, communications and program development.

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## Patient Satisfaction Goals

MEASURE	2014 TARGETS	2014 PROGRESS
HCAHPS (Consumer Assessment of Healthcare Providers and Systems, Hospitals)	90 <sup>th</sup> Percentile	75 <sup>th</sup> Percentile
HCAHPS Recommend Hospital	90 <sup>th</sup> Percentile	80 <sup>th</sup> Percentile

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## Listening to Our Patients

### HCAHPS:

For acute care hospitals nationwide, the Centers for Medicare and Medicaid Services (CMS) has designed and required the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey. This survey measures patients' perspectives of their hospital care. Results are publicly reported at [medicare.gov/hospitalcompare](http://medicare.gov/hospitalcompare).

### Outpatient Satisfaction Surveys:

In addition to mandatory feedback channels, Cleveland Clinic also surveys outpatients with questions related to appointment scheduling, waiting time, communications, courtesy, care, overall assessments and recommendations.

We use this information internally to guide our organizational strategies and departmental goals. Survey results are used in quarterly clinical institute performance reviews to guide each clinical institute on opportunities for improvement.

### Ombudsman Office:

Patients and families provide direct feedback through our Ombudsman Office, which helps to investigate and resolve patient concerns. The Ombudsman Office tracks and shares this information with our top administrators and uses it in annual physician and department reviews.

### **Voice of the Patient Advisory Council:**

Patients and caregivers form the council to improve the service and quality of care at Cleveland Clinic. The council meets regularly and provides real-time feedback and solutions to specific challenges.

### **Patient Panel:**

Cleveland Clinic began our Patient Panel in 2008 as an anonymous mechanism to gain insight into patients' experiences and opinions. We currently have 5,521 active panelists, including patients from all 50 states and the District of Columbia.

### **Monthly Leadership Rounding:**

Cleveland Clinic leadership pursues patient and caregiver feedback through a formal monthly rounding program on inpatient units and outpatient clinics throughout the enterprise. All insights are coded for confidentiality and shared with appropriate caregivers, managers and leaders for follow-up.

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## Improving the Patient Experience

“We spend a lot of time thinking about how to define the patient experience, and perhaps the answer is that patients define their own experience. We just have to be willing to see it and adapt our models, delivery systems and care paths to them.”

– Adrienne Boissy, MD, MA, Chief Experience Officer

Cleveland Clinic recognizes the patient and the caregiver have reciprocal influence, and we believe this relationship is morally valuable. To nurture this connection and improve patient satisfaction, Cleveland Clinic began an initiative that partnered our institutes and community hospitals with the Office of Patient Experience (OPE).

### **Cultural Shift:**

Over the last several years, OPE has helped to support a concerted effort to build and sustain a culture of service excellence across the entire enterprise to put patients first at every discussion, interaction and encounter with patients, visitors and fellow co-workers.

### **Transparency:**

We publicly share patient satisfaction data with the general population and with all physicians and nursing units. At any time, caregivers can look up patient satisfaction ratings and feedback based on our hospitals and their own departments.

### **Standardization:**

We are working towards standardizing not only clinical care, but also emotional and empathetic care across the enterprise to nurture the value of our caregiver-patient relationships.

This is accomplished by engaging with our caregivers around our established nine expected service behaviors, sharing of best practices across the system and the work of our patient experience managers, who are staffed at

all of our regional community hospitals. These patient experience managers work hard to engage caregivers to help solve the unique patient experience-related challenges at each hospital and with every patient interaction.

# Patient Data

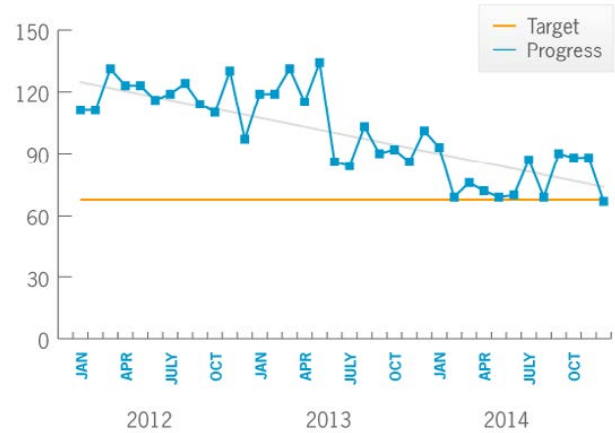
Understanding and improving our patients' experience is core to our service and mission. To better do this, we track measures of patient safety, quality of care and patient satisfaction. Where we meet our goals, we celebrate these accomplishments and where we find challenges, we develop solutions to improve.

## Patient Safety Indicators

Patient Safety Indicators are used to track specific hospital complications. Cleveland Clinic's goal is to reduce these to the lowest values in the country.

### Patient Safety Indicators

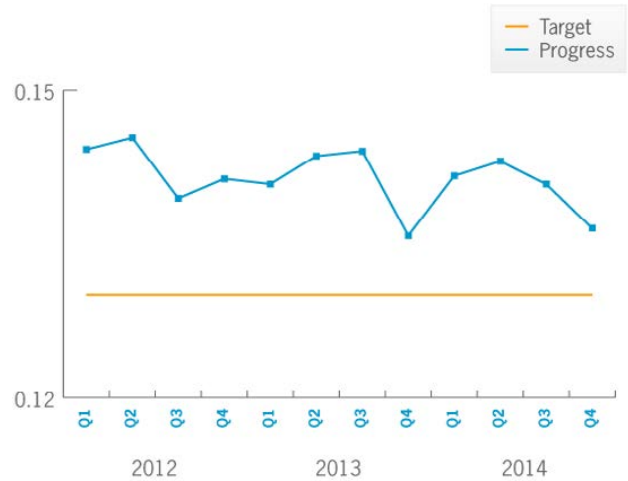
PSI 90 Component Occurrences



## Heart Failure Readmission Rates

In 2014, Readmissions work expanded in scope from just Heart Failure to All Cause Readmissions. Efforts are underway to ensure discharge readiness for all patients.

### Heart Failure Re-Admission Rate

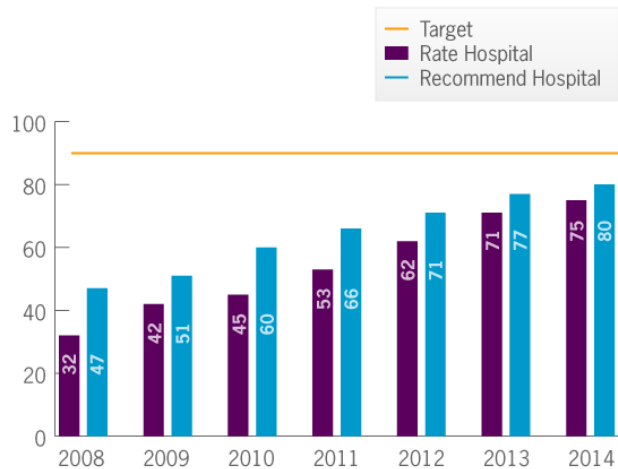


## Patient Satisfaction: HCAHPS

Cleveland Clinic's percentile rank in overall rating and likelihood to recommend the hospital continues to rise towards our goal of exceeding the 90th percentile.

Percentile rank performance compared to national survey results by discharge year, all U.S. hospitals. Results published quarterly by Center for Medicare and Medicaid Services.

## Patient Satisfaction: HCAHPS

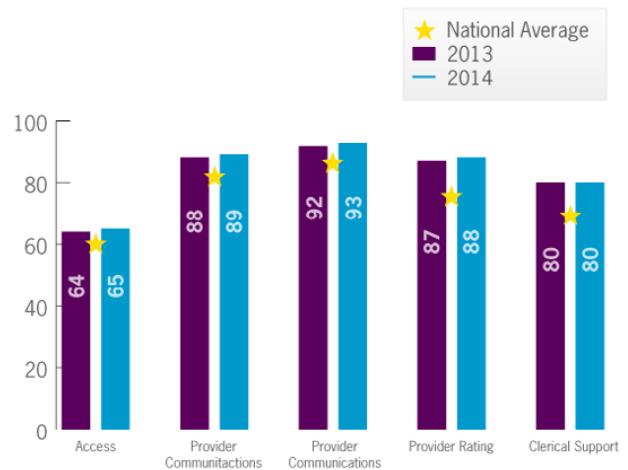


## Outpatient Satisfaction Scores

Cleveland Clinic measures our outpatient satisfaction and in most areas, we rank higher than the national database averages. In clerical support and access, we perform at the national average and continue to work on implementing process changes to increase the patient experience.

The National average benchmark is based on results voluntarily submitted from 2,172 medical practices to the Agency for Healthcare Research and Quality CAHPS database in 2013.

## Outpatient Satisfaction Scores



## Complaints and Grievances

The rate of complaints and grievances for every 1,000 encounters has continued to decline enterprise wide. As patient satisfaction scores continue to improve, the rate of complaints has continued to decrease.

## Complaints and Grievances



# Caregivers

Cleveland Clinic's mission is to provide better care of the sick, investigation into their problems and further education of those who serve. Healthcare is moving into a new era of value-based care and creating value is the responsibility of all caregivers. Together, Cleveland Clinic's caregivers work hard to put patients first and maintain Cleveland Clinic's high standards of care.

Cleveland Clinic works equally hard to care for our caregivers. The shifts in our industry have placed additional pressure on our caregivers, both nonclinical and those working with patients. Our employees are our most important resource, and with over 42,523 caregivers, Cleveland Clinic is committed to maintaining a healthy, sustainable, safe and engaged workforce.

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## Workplace Wellness

Over the past nine years, we have created a comprehensive culture of wellness, enabling caregivers to take an active role in support of their own health.

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## Talent Development

Our success relies on our caregivers' engagement, performance and willingness to embrace their roles as caregivers. Our goal is to create an environment in which caregivers develop new skills and hone their expertise as they continue down the career path of their choice.

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## Caregiver Safety

Cleveland Clinic is committed to the safety and well-being of our caregivers, patients and visitors.

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## Caregiver Engagement

When our caregivers are engaged, our patients' experiences improve. [Click here to read more on how we're engaging all caregivers.](#)

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## Diversity and Demographics

Cleveland Clinic's commitment to diversity is critical in our interactions with patients, caregivers, and the community.

# Workplace Wellness

Over the past nine years, we have created a comprehensive culture of wellness, enabling caregivers to take an active role in support of their own health. Our policies and programs are designed to make healthy choices easier for our caregivers, as well as offer recovery resources for those whose well-being is compromised.

Employee wellness is not only focused on individual employees, but on programs designed to impact the health of both our caregivers and our patients. For example, Gentle Yoga and Relaxation Therapy are offered to nursing and medical staff in Liver Transplant Units to reduce stress. We encourage all of our caregivers to take advantage of these programs.

In support of our caregivers, Cleveland Clinic offers:

## Fitness

Free use of on-site fitness centers, free memberships at Curves and discounts at area fitness clubs. Free group exercise classes, including yoga and ballroom dancing, are held throughout the health system.



## Shape Up & Go!™

A free online, team-oriented program to engage caregivers and assist in tracking healthy behaviors.



## Nutrition

Employees have access to free nutrition counseling and Weight Watchers memberships. Go!Foods is a program designed to inform our caregivers and patients about the healthiest options available in our cafeterias. The Go! Logo on a product indicates nutritious foods that follow Cleveland Clinic's healthy-eating guidelines. To encourage a healthy diet, foods with trans-fats and sugared drinks are no longer offered by Cleveland Clinic cafeterias or vending machines. In addition, calories are listed for all prepared food items in our cafeterias and, to the extent possible, by our retail vendors.

## Assistance Counselors

Free and confidential access to assistance counselors, confidential assistance programs and CONCERN, a short-term caregiver assistance counseling resource offering referrals for longer-term treatment.

## Healthy U

Access to online programs with healthy food guidelines, sleep hygiene and stress management, designed by Dr. Roizen, Chief Wellness Officer at Cleveland Clinic.

## Tobacco Cessation Program

Cleveland Clinic was one of the first healthcare organizations to ban smoking on our campuses, as well as implement a policy to refrain from hiring individuals who use tobacco products. Free tobacco cessation programs are made available to current caregivers who smoke and desire to quit and improve their health.



### **Educational Programs**

Cleveland Clinic employees have access to programs such as Wellness Grand Rounds, a bi-monthly, one-hour presentation given by an expert in the field of wellness. Patients and employees are encouraged to attend the Wellness Connection, a monthly half hour presentation by various wellness professionals. FitTalk is a monthly fitness-related presentation given by a Cleveland Clinic Fitness specialist.

### **Center for Integrative Medicine**

Cleveland Clinic's Center for Integrative Medicine offers employee discounts on their services and treatment options to improve overall health and well-being.

### **Art Therapy**

Arts & Medicine offers free art therapy activities to caregivers, patients and their families. Art therapy can help decrease pain and anxiety, improve coping skills and attention span, assist with rehabilitation and enhance self-esteem and relaxation.

# Talent Development

The success of Cleveland Clinic as a world class organization relies on our caregivers' engagement, performance, and willingness to embrace their roles as caregivers. New employees join our caregivers at every level of the organization throughout their career. Each individual has the opportunity to work in different departments and hold a variety of positions. Our goal is to create an environment where caregivers develop new skills and hone their expertise as they continue down the career path of their choice. Many of our caregivers have worked with us for decades, and we are committed to valuing their contributions and helping to develop their careers.

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## Development Opportunities

To help achieve our shared goals, we offer opportunities caregivers may self-select to take:

- Development course tracks for each level of leadership through the Center for Leadership and Learning
- Cleveland Clinic Academy curriculum for executive and medical management training
- A robust career planning website for caregivers
- Blended learning opportunities using classroom, online and on-the-job formats
- Mentoring programs
- School at Work® to support the career development of entry-level caregivers
- Accelerated development programs for high potential caregivers
- An Emerging Leader program for aspiring leaders
- Technical training in all clinical and technical fields
- Tuition reimbursement for undergraduate degrees

Additionally, we have caregivers in accelerated development programs. These participants are identified through Cleveland Clinic's Succession Planning and Individual Development Planning processes and represent our future leadership.

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## Managing Performance

Cleveland Clinic would like all of our caregivers to receive annual or biennial performance and development reviews from management. This allows caregivers and management the opportunity to address existing concerns and set performance and development goals for the future.

### Employees Receiving Regular Performance Reviews

	2013 PROGRESS	2014 PROGRESS
Overall	94.34%	98.50%
Female	95.55%	98.87%
Male	91.38%	97.16%

# Caregiver Safety

Cleveland Clinic is committed to the safety and well-being of our caregivers, patients and visitors. We maintain an environmental health and safety program that conforms with and/or exceeds all applicable local, state and federal environmental, health and safety standards and regulations. We provide on-going education and training to our caregivers that will assist them to appropriately respond to potential acts of violence that may occur at any of our hospitals, family health centers and satellite facilities.

## Environmental Health and Safety

Within Cleveland Clinic's Quality & Patient Safety Institute we have a formal Environmental Health and Safety (EHS) team charged with the implementation and monitoring of EHS management activities at Cleveland Clinic main campus and our family health centers. In addition, each community hospital maintains written management plans that address the "Environment of Care" based on management structure and individual needs.

Enterprise safety leadership regularly review regulations and standards and assess the need for changes to general safety policies, equipment, procedures, training and other activities. Ultimately, the responsibility for environmental health and safety at Cleveland Clinic extends through the entire supervisory force to every caregiver. Only through a cooperative effort by supervisors and caregivers can an effective accident prevention program be established and preserved.

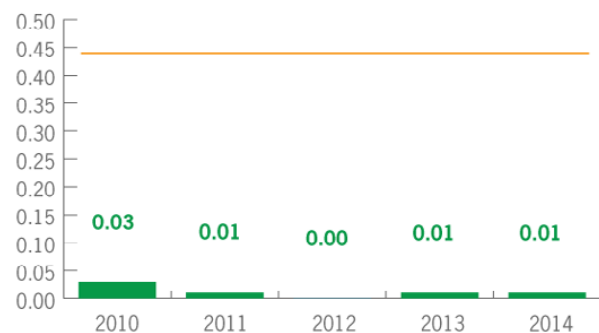


Cleveland Clinic also protects our caregivers and patients through risk control efforts related to serious diseases. For example, the Center for Corporate Health promotes the health and safety of our caregivers through new hire pre-placement assessments, urine drug screenings, annual compliance, TB testing, audiograms, as well as required immunization and flu vaccinations. In addition, we established a work restriction policy for caregivers with communicable diseases, a safety event reporting system and post-exposure guidelines and support for those exposed to blood-borne pathogens. Employees are encouraged to report all exposures and near-misses, and aggressive post-exposure follow-up procedures are followed. Exposures decreased almost 6% in 2014 compared to 2013, and a quality goal for a 20% reduction has been set for 2015.

## EHS Data

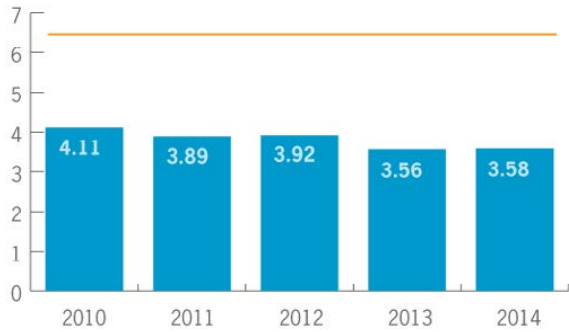
Cleveland Clinic's recording and reporting of accident statistics is in accordance with the requirements of the Occupational Safety and Health Administration (OSHA) and the Bureau of Labor Statistics (BLS). An injury or illness is considered to be work-related if an event or exposure in the work environment either caused or contributed to the resulting condition or significantly aggravated a pre-existing condition. Our injury data presented below represents the majority of caregivers, reflecting our Northeast Ohio enterprise. Injury rates are listed as the number of injuries per 100 full-time employees.

## Occupational Disease Rate

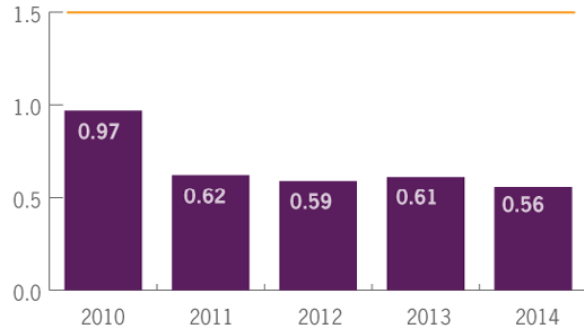


In 2014, Cleveland Clinic experienced an OSHA-recordable injury rate of 3.58 and a lost-time injury rate of 0.56, well below the U.S. hospital average. The Bureau of Labor Statistics indicated the average hospital had an OSHA-recordable injury rate of 6.4 and a lost-time injury rate of 1.5.

### OSHA Recordable Rate

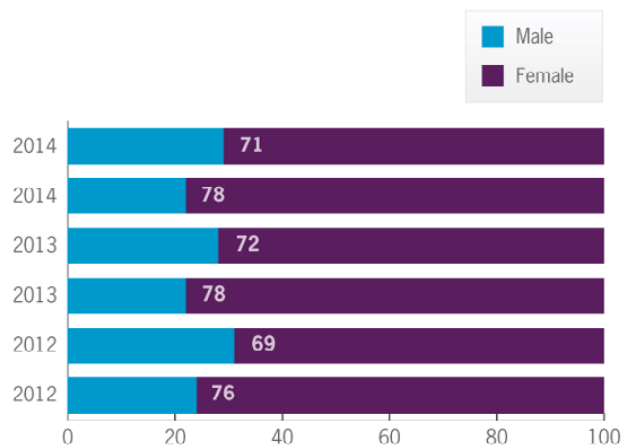


### Lost Time Injury Rate



There were no work-related fatalities in 2014 (LA 7). Injuries by gender relate closely to our overall male/female employment ratios.

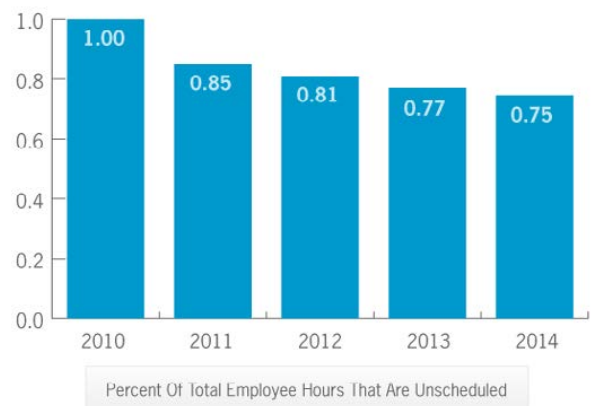
### Employee Injuries By Gender



Cleveland Clinic absenteeism, as measured by unscheduled paid time off (UPTO), dropped from 0.81 percent in 2011 to 0.75 percent in 2014. Absenteeism can be used to indicate employee health and wellness, employee engagement, job satisfaction and work-place effectiveness.

### Absenteeism

(as measured by unscheduled paid time off)



## A.L.I.C.E.

With the sudden rise in active shooter incidents in the United States, providing our caregivers with training to survive such an incident is a top priority at Cleveland Clinic. The Protective Services Department adopted the A.L.I.C.E. Active Shooter Response model that was developed by the A.L.I.C.E. Training Institute. Thirty-five caregivers from various disciplines across the Cleveland Clinic Health System received A.L.I.C.E. Instructor training in order to help facilitate enterprise-wide training.



The Emergency Management Department, in conjunction with the Cleveland Clinic Police Department, developed a healthcare-oriented A.L.I.C.E. training module that is used by all of our certified Instructors to provide consistency in the delivery of the material. The training is delivered through various media: as a module that is embedded in the annual mandatory online Emergency Management training; as “lunch-and-learn” live training sessions; during monthly department meetings; and as whole-house in-service training.

The A.L.I.C.E. Active-Shooter Response training has been a huge success with Cleveland Clinic caregivers. Every new caregiver and contracted vendor participates in training, and over 45,000 caregivers receive an annual refresher course.

## Victim Advocate Program

In 2014, Cleveland Clinic’s Police Department secured Victims of Crime Act grant funding for our Victim Assistance Program. This program is dedicated to providing Cleveland Clinic patients, visitors and employees with support, education, and resources to cope in the aftermath of a criminal offense. The Victim Assistance Program offers services to victims or survivors of any crime, such as domestic violence, sexual assault, workplace violence, harassment, assault or human trafficking. In 2014, 212 victims utilized the services, which are available free of charge at Cleveland Clinic main campus, regional hospitals and family health centers.



## LEAPT Grant Program

Beginning in November 2013 and continuing through December 2014, Cleveland Clinic’s main campus and family health & surgery centers participated in an Ohio Hospital Association (OHA) Leading Edge Advanced Practice Topic (LEAPT) grant program, with five other Ohio hospitals of varying size, to develop best practices for integrating patient and caregiver safety culture. Patient Safety has long been our primary goal and programs exist to excel in that arena. However caregiver safety has not had the same level of visibility. Our goal was to use existing patient safety programs and processes to link in caregiver safety as well.

Cleveland Clinic implemented a number of actions to assess and then improve caregiver injury performance, including: administration of the National Institute for Occupational Safety and Health (NIOSH) Safety Culture Survey, hands-on training of needlestick prevention devices during annual in-patient nursing competency days; initiated safe patient handling and mobility training and equipment in the Heart and Vascular Institute; developed a slip/trip/fall hazard assessment to identify and prioritize these hazards for corrective action; distributed a number of communications around the focus four injury types to our caregivers. The team also completed a gap analysis and each hospital developed an action plan to address areas of need.

At the end of the grant year, our team of hospitals had reduced compensable injuries by over 20 percent, exceeding our goal.

# Caregiver Engagement

As we transition to a new model of healthcare, engaging our caregivers is imperative to our success. When caregivers are engaged in their work, they are involved in, enthusiastic about and committed to creating a culture where quality care drives innovation and job satisfaction. When our caregivers are engaged, our patients' experiences improve.

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## How We Engage

Engagement at Cleveland Clinic extends beyond a single program to become a culture that guides our interactions with one another, our patients and our communities.

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## Caregiver Celebrations

Recognition is a key component of engagement and there are many ways that managers, caregivers and patients can recognize caregivers for exceptional work.

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## EcoCaregivers™

All Cleveland Clinic caregivers are EcoCaregivers™. In 2014, we launched mandatory energy demand training for all caregivers focused on our sustainability efforts.

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## How We Engage

Engagement at Cleveland Clinic extends beyond a single program to become a culture that guides our interactions with one another, our patients and our communities. Caregiver feedback is sought through various channels including surveys, weekly polls and team huddles. Actions and improvements based on that feedback are applied to engagement activities across the organization. Some of the ways we create and sustain an engaged organization include:

### Engagement with Dr. Cosgrove

Toby Cosgrove, MD, CEO and President of Cleveland Clinic, engages caregivers through quarterly Connection addresses, where he reviews the work of our clinical staff, operations, education and research teams to highlight our biggest successes and opportunities as a healthcare system.

### MyTwoCents

Caregivers contribute to MyTwoCents, an online forum to provide feedback and make suggestions for improvements. Since 2010, more than 6,000 ideas have been submitted, with over 800 caregiver ideas being implemented. These submissions have realized over \$2.5 Million in savings, with projected future additional savings of nearly \$3.5 Million.

### Engagement Coaches

Our engagement program includes leveraging enterprise-wide engagement coaches who partner with managers to support a collaborative team environment. They work together to develop clear communication methods and set well-defined role expectations and team priorities.

### Leadership Rounding

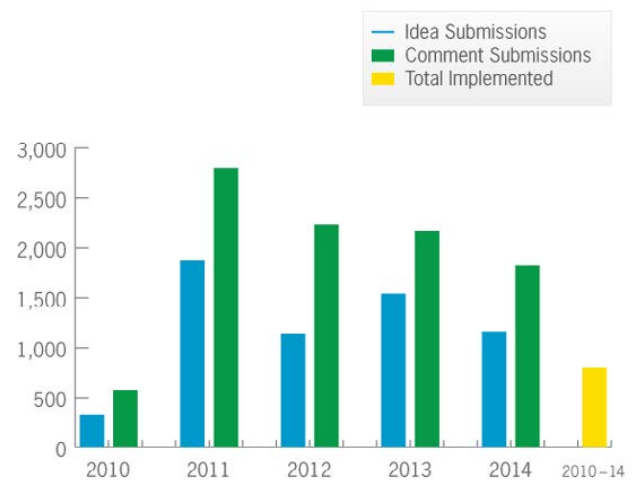
Leadership from around the organization partake in a monthly leadership rounding program to improve patient care, support engagement and recognize caregivers. All leaders gather together at the start of each rounding session before breaking into assigned teams on designated areas for approximately 75 minutes. Following the break out, leaders reconvene to share patient and caregiver stories.

### Press Ganey Caregiver Surveys

Press Ganey has conducted our patient satisfaction surveys for several years; so in 2014, we transitioned to them for our caregiver engagement surveys as well. In the process, we integrated safety into our engagement survey in order to better align results to the patient experience and improve patient care.

The new streamlined approach reduces survey fatigue and identifies system-wide drivers of engagement to help focus our efforts. The new system reduces cost and allows us to use the same process to determine engagement levels across our clinical and non-clinical caregiver population while helping all caregivers connect the dots between safety, engagement and patient satisfaction.

### How We Engage





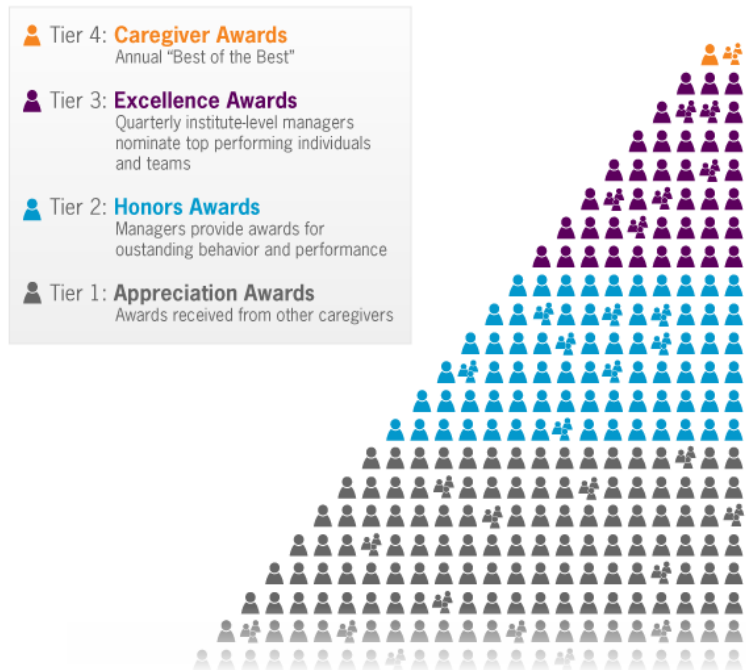
## Caregiver Celebrations

Recognition is another key component of engagement and there are many ways managers, caregivers and patients can recognize caregivers for exceptional work.

Cleveland Clinic developed Caregiver Celebrations as an innovative, fully automated rewards and recognition system to award caregivers for outstanding behaviors supporting our values: quality, innovation, teamwork, service, integrity and compassion.

Caregiver Celebration awards feature four ascending recognition tiers. The awards range from simple, on-the-spot, non-monetary e-certificates of Appreciation, to Honors for individuals and teams for outstanding behaviors and top performance, to quarterly Excellence recognitions presented at the institute level, to the top tier Caregiver Award given to the top 50 nominated individuals and teams, who receive \$2,000. Of these 50, one individual and one team are selected to receive the CEO award of \$10,000.

### 4 Tiers of Caregiver Celebrations



### Recipient Highlight

In 2014, the CEO award went to the Empathy Video Team for creating the patient experience video, "Empathy – The Human Connection to the Patient." Dr. Toby Cosgrove presented the award to the team after sharing that he wept the first time he saw the video and it touched his heart. "Our purpose as creators of the video is to take emotion and find ways to translate it into something you see, hear and most of all – feel," said Sue Andrella, producer and director of the video. "It's a privilege to take what happens every day throughout the enterprise and boil it down to the very essence of what matters most: people. It's an incredibly wonderful job to have because there are so many amazing and inspiring stories to tell from caregivers and patients."



*Empathy Video Team accepting the team CEO Award. Pictured from left to right: Front Row: Toby Cosgrove, MD, Shannon Phillips, MD, Joe Sgro, Susan Andrella, David Braun, William Roth, Ted Schroeder, Kelly Hancock, RN; Back Row: Marc Harrison, MD, Michael Wallace, Christopher King, Brian Donley, MD, Paul Monahan, James Merlino, MD; Not Pictured, Sara Clancy, Jamie De Pould*



This outstanding video has been viewed worldwide with over 2,000,000 hits on You Tube. “We never set out to create a viral video, for it to have been shared and seen across the world is really mind blowing for us!” said Sue. The thought-provoking and powerful video has been translated into Arabic and Turkish and many have commented that it is brilliantly produced. All who have seen it have a stronger focus on the human connection and greater empathy and compassion for patients and coworkers alike.

Caregivers who have seen the video have said that it inspired them to make a difference in the lives of our patients. The team asserts that the meaning of empathy is hard to put into words because it is something that needs to be felt. Sue Andrella personally believes, “Empathy is a shift in perspective; a moment when we are able to step out of our own story and stand fully in someone else’s.”

### Program Facts

Program Inception: **2010**

Caregiver Celebrations Received since 2010: **775,268**

Addition of Patient Recognition Awards: **2012**

Patient Recognition Awards Received since 2012: **31,582**

Miscellaneous Recognitions such as Shape Up and Go, Patient Safety Champions, Employee Wellness and Employee Engagement: **3,022**

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## EcoCaregivers™

In 2014, we launched an enterprise-wide EcoCaregiver™ Training: Energy Savings & You. This mandatory training on energy demand management is required for ALL caregivers. Three months post-launch, more than 29,000 caregivers (largely from our main campus) have completed the training. This 15-minute module will be updated and reassigned annually for ALL 40,000+ caregivers, including staff. It reinforces an organizational expectation for an environment of energy conversation and emphasizes the importance of individual caregiver contribution to our energy demand reduction goals. In addition to the training, we have developed a robust communications campaign to prompt desired workplace behaviors.

### South Point Paperless Clinic Highlight

The South Pointe Family Medicine Residency Program and the South Pointe Primary Care Clinic combined to create a modern, sustainable and cutting edge approach to medical education and patient care.

### An Apple a Day

In order to move to a more technologic and sustainable future, the South Pointe Paperless Clinic has quickly become part of the Apple ecosystem. By utilizing iPads (normal and mini), iPhones, and Apple TV, the team takes medical education to an entirely different place. Being connected through these devices means being able to access medical information in seconds, instead of paging through heavy word-dense books or drawers full of outdated and poorly copied journals.



*Pictured, from L to R: Rich Lea, Interim President, Euclid Hospital, Dawn Bailey, Chief Nursing Officer, Euclid Hospital, Steve Davis, MD, Chief Operating Officer, Hillcrest Hospital, Brian Harte, MD, President, Hillcrest Hospital*

## High Tech Workstations

Workstations are equipped with desktop computers, full EPIC access, and dictation software with microphones. Paper has been drastically reduced from workflows, keeping workstations clean, organized and paperless. Printing is minimized as much as possible by opting to communicate through the EPIC “in basket” feature.

## Central Digitization

Gone are the days of paper charts, paper patient instruction handouts, paper calendars, paper manuals, paper notes and paper lectures. These resources would quickly become outdated and needed to be frequently replaced with new printed resources.

Policies, manuals, schedules, calendars, notes, lectures, clinical guidelines, medical reference resources, full medical texts, and instructional patient handouts are now digitized and centrally stored. All residents can access these documents from any iPhone, iPad or computer. This allows for the immediate organization of these resources, but also, the ability to update and access the newest versions at any time. In addition, when print resources are received, they are immediately scanned into the central storage system via Dropbox and recycled.

All protected health information (PHI) remains in the EPIC electronic health record, ensuring HIPAA compliance. No PHI is stored or displayed on Apple devices, nor is PHI stored on Dropbox.

## AirPrint Printer

Despite a desire to be completely digital, the need to print patient instruction handouts remains. The team utilizes a wireless AirPrint printer to send our documents from iPhones or iPads. This printer was selected because of its ability to print 2-sided documents, thereby also decreasing the amount of paper used.

## Energy Conservation

At the end of the workday, all electronic devices are turned off, as well as lights in patient rooms. Air conditioning units are intentionally adjusted to a “low” setting throughout our day and turned off at night.

# Diversity and Demographics

Cleveland Clinic is a global healthcare provider and destination for patients seeking high quality healthcare. As demographics continue to change with ethnic and racial minorities becoming majority populations by 2042, Cleveland Clinic recognizes it is crucial we have diversity and inclusion integrated throughout our system to provide the best care for our patients, caregivers and the community. In 2014, for the fifth year in a row, Diversity Inc. recognized Cleveland Clinic as one of the top 10 healthcare systems for diversity and inclusion.

Our programming, which includes but is not limited to employee resource groups, diversity councils, organizational assessments, online and instructor-led training, complements our efforts in building and sustaining a culturally competent and diverse caregiver population. Cleveland Clinic works to promote and grow our community partnerships in an effort to impact the economic vitality of our diverse communities.

The support of the Executive Leadership for the Office of Diversity and Inclusion provides opportunity to creatively address population health issues in our community. The Office of Diversity and Inclusion sponsors annual community-wide events. The annual Martin Luther King Day of Celebration hosts more than 600 community-wide participants and caregivers and delivers a message of equity and equality for all. Celebrate Sisterhood is an event acting as a catalyst for multicultural women to self-manage and advocate for their health transformation. The positive effect the October 2014 event had on the community is reflected by the attendance of over 700 participants and more than 1,200 health screenings conducted for those in attendance. Annually, the Office of Diversity and Inclusion is a major sponsor for the Diversity Center of Northeast Ohio's Diversity Walk, Rock & Run and provides health screenings, information and Walk, Run participation to over 7,000 community-wide attendees.

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## Employee Resource Groups

The Office of Diversity & Inclusion's enterprise-wide Employee Resource Groups (ERGs) serve as organizational champions of their support of Cleveland Clinic's mission. of the Office of Diversity and Inclusion. These groups engaged over 6,000 caregivers in 65 programs in 2014.

The ERGs sponsor strategic programming that increases awareness of the healthcare and wellness needs of our diverse patient population and provide caregivers with the opportunity to increase their cultural competence.

Additionally, these groups provide Cleveland Clinic caregivers the unique networking opportunity to engage with caregivers from similar backgrounds, further promoting employee engagement.

The Clinic Pride (Lesbian, Gay, Bisexual, Transgender, Allies – LGBTA) Employee Resource Group under-went a pivotal year in 2014 as leaders and participants in the International Gay Games 9, hosted by the Northeast Ohio Region. Cleveland Clinic was a platinum sponsor and provider of health care to participating athletes. Cleveland Clinic physicians, nurses and certified athletic trainers, logged 264 hours at athletic events and 217 Clinic Pride ERG volunteers provided time and talent to Gay Games 9 activities throughout the week. One other achievement promoted by the Clinic Pride ERG resulted in Cleveland Clinic's main campus named as the Human Rights Campaign's Health Equality Index's "Leader in LGBT Health Equality."

The African American Employee Resource Group (AAERG) is a system-wide, employee-led group for Cleveland Clinic's African American caregivers. In addition to hosting educational forums to raise awareness about health disparities and wellness, the group's primary aim is to support Cleveland Clinic's diversity and inclusion strategy

to retain, develop and promote minority talent. To achieve this, the AAERG launched an annual Professional Development Workshop Series for front-line caregivers. The second workshop held in 2014 resulted in 42 front-line caregiver participants or an increase of 31% over 2013 attendance. Program participants have been promoted to coordinator and work leader positions, which is the first step for promotion into supervisory positions. The cumulative rate of promotion is 19%, whereas, the rate for employees in similar roles is 7%. Retention rates are also better for employees in similar positions; the rate for program participants is 86.4% and that of employees in similar positions is 83%. The outcome establishes this as a “best practice” initiative driving workforce engagement, development and retention.

2014 brought a nursing first facilitated by the Office of Diversity and Inclusion. The National Association of Hispanic Nurses - North East Ohio Chapter (NAHN-NEO) has its first members’ chapter in the state of Ohio. Over 25 Northeast Ohio Hispanic Nurses have come together to promote and provide quality health care to an under-represented population addressing access and equity among health care providers in the community.

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## Language Enrichment Programs

Language differences can interfere with a clinician’s ability to communicate with patients, colleagues and visitors. Through our Language Enrichment Programs, the Office of Diversity and Inclusion seek to improve and enhance patient relationships and provide professional development opportunities for caregivers.

REaL (Race, Ethnicity and Language) data indicated a need to build Spanish and Arabic language skills for caregivers. The Language Enrichment Programs assist physicians, nurses, administrators and allied healthcare professionals to enhance their communication skills, improve patient relations and the patient experience. Courses include Spanish for Healthcare Professionals, Basic Conversational Arabic and the Accent Modification program.



*Spanish Language Class*

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## Cultural Competence Training

Cleveland Clinic strives to create the most culturally competent caregivers to provide the best patient care and promote how we effectively work with each other. We start with cultural sensitivity, our awareness and respect of differences and strive for ongoing cultural competence. This is addressed by four components: 1) Awareness of one’s own cultural worldview; 2) Attitude towards cultural differences; 3) Cross-cultural skills development requiring time, practice and application; and 4) Knowledge of different cultural practices and worldviews. There is recognition that this is a life-long learning process.

An online Diversity and Inclusion module created by and for Cleveland Clinic caregivers is completed by all new hires and existing employee caregivers. All caregivers are required to complete this module on an annual basis.

## Pipeline Programs

Cleveland Clinic's diversity pipeline talent development programs aim to encourage more minorities to pursue careers in health care by engaging talented high school and college students interested in future careers within the healthcare industry. Through our Science Technology Engineering Math and Medicine (STEMM) plus Dentistry programs, participants gain team-based experiential learning, problem-solving expertise, professional etiquette skills, career information and coaching/mentoring from medical and business professionals.

Our goal is to foster the continuing education and development of talent and to present Cleveland Clinic as a great place to work and grow. One pipeline program is the Charles R. Drew Saturday Academy in collaboration with Health Legacy of Cleveland Incorporated, a 12-week enrichment program held on consecutive Saturdays in the first quarter of each year. Success has been measured in 2014 by Student Survey Summary results of 4.7 out of 5 and Parent Survey Summary results of 4.6 out of 5 overall satisfaction with this program.

A recent addition is the Alumni Association, which connects current and past pipeline program participants, maintains contact between alumni and Cleveland Clinic and tracks progress through high school, college and beyond. Results will be reviewed and processed for documentation of long-term results.

## Caregiver Demographics

Cleveland Clinic hires extensively from our local talent. In 2014, Cleveland Clinic employed 42,523 caregivers, over 94% in Northeast Ohio.

### Caregiver Demographics Data

In 2014, Cleveland Clinic employed 42,523 caregivers, 94% in Northeast Ohio. From across the U.S., 74% of all caregivers are women and 26% of all caregivers are men, 82% of all U.S. caregivers are full time and 18% of U.S. caregivers are part time employees. Approximately 0.45% of our caregivers are part of a union.

Cleveland Clinic recruits and hires extensively from our local talent. Our talent acquisition department attends career and job fairs at local high schools, universities, colleges and community organizations. We advertise online and in local newspapers and journals.

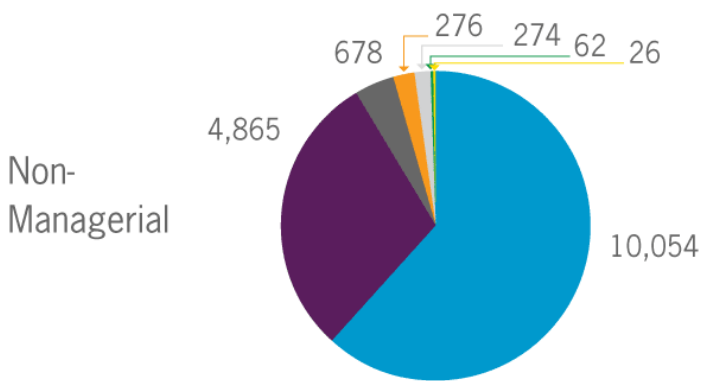
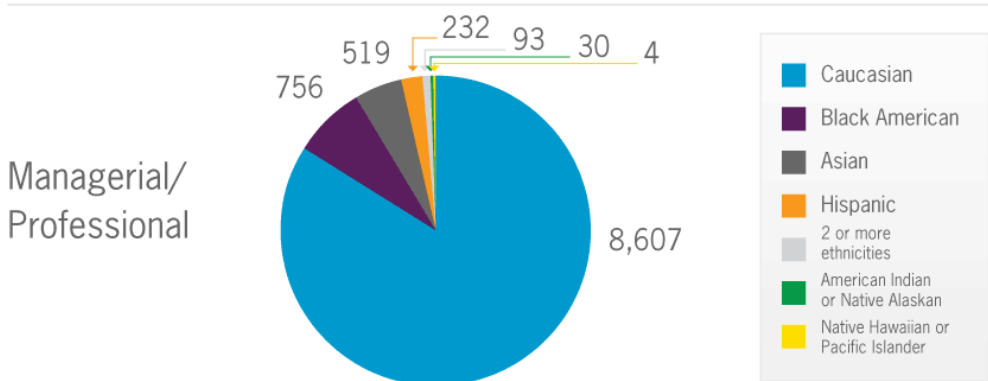
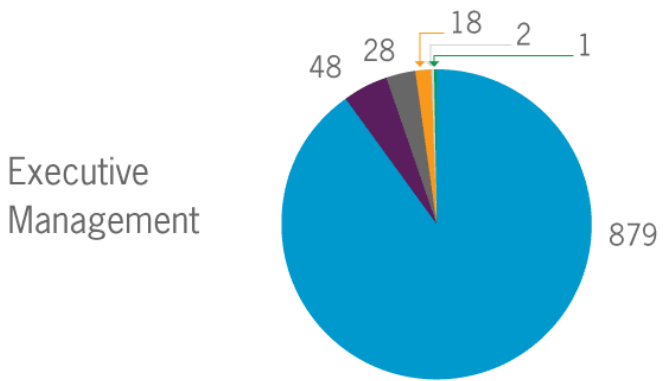
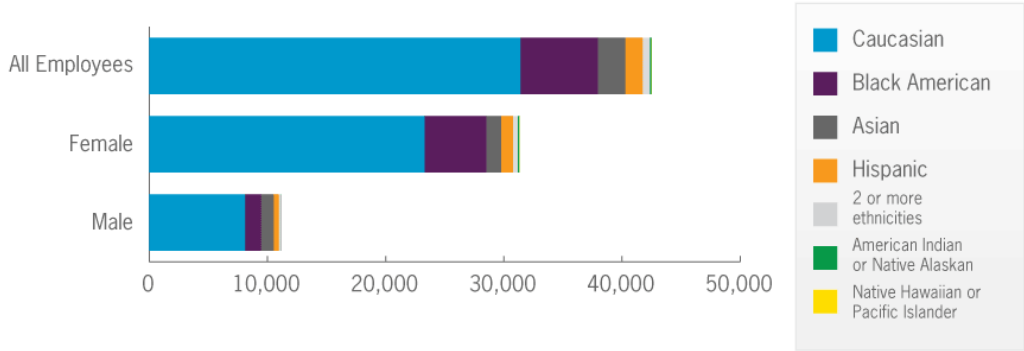
### 2014 Employee Counts by Region

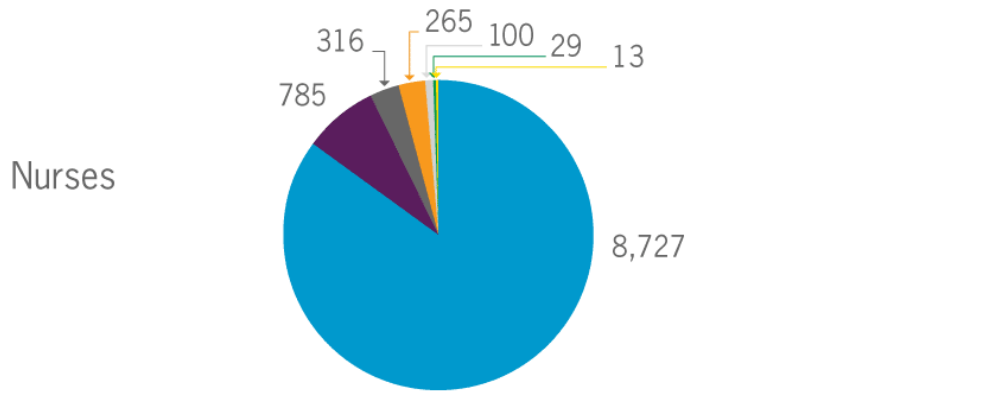
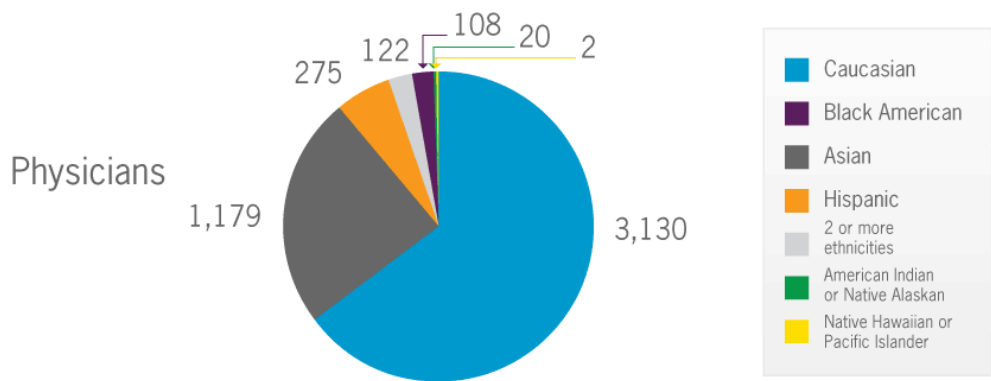
	REGION		
	FLORIDA	NEVADA	OHIO
All Employees	2,332	104	40,087
Female	1,733	79	29,511
Male	599	25	10,576
New Hires	534	28	4,845
Turnover	466	21	6,120

### 2014 Employee Counts by Age Group

	AGE GROUP		
	<30	30 – 50	>50
All Employees	7,558	21,269	13,696
Female	5,686	15,423	10,214
Male	1,872	5,846	3,482
New Hires	2,648	2,270	489
Turnover	2,004	3,001	1,602
Female Turnover	1,447	1,959	1,141
Male Turnover	557	1,042	461

## 2014 Employee Counts by Ethnicity





## Human Rights and Labor Standards

Cleveland Clinic understands the importance of human capital and is committed to diversity and inclusion. We provide equal opportunity across all employment practices, including recruitment, selection, training, promotion, transfer and compensation, without regard to age, gender, race, national origin, religion, creed, color, citizenship status, physical or mental disability, pregnancy, sexual orientation, gender identity or expression, marital status, genetic information, ethnicity, ancestry, veteran status, or any other characteristic protected by federal, state or local law (“protected categories”). In addition, Cleveland Clinic administers all personnel actions without regard to disability and provides reasonable accommodations for otherwise qualified disabled individuals.

Cleveland Clinic strives to foster a culturally sensitive workforce and provides cultural competency online training to new hires and to all caregivers annually, as well as instructor-led trainings and individual coaching to provide ongoing cultural competency development across the enterprise.

Under Cleveland Clinic policy, employees are entitled to file complaints relating to possible discriminatory treatment or other violations of policy with their managers, Human Resources and/or our confidential Compliance Reporting line. Investigations take place after each report is made and corrective action is taken as necessary. Employees are also entitled, by law, to submit complaints regarding alleged discriminatory actions with various state and federal agencies. During the calendar year 2014, no findings of probable cause were issued by any administrative agency.

Cleveland Clinic’s compensation system is designed to provide wages that are externally competitive and



internally equitable; it includes a review process for any market-driven salary offer that has the potential to disrupt internal equity. Cleveland Clinic offers an integrated, competitive and comprehensive benefits package that applies to substantially all part-time and full-time caregivers who are scheduled to work at least 40 hours per two-week pay period, with the exception of short-term disability and long-term disability benefits that are only available to full-time caregivers. All caregivers with the exception of students, residents/fellows and research associates participate in a noncontributory, defined contribution plan to assist with long-term financial planning and retirement. Cleveland Clinic's contribution for the plan is based upon a percentage of caregiver compensation and years of service. Cleveland Clinic also sponsors a defined contribution plan, an employee-guided investment fund (403b), which is available to full-time, part-time or PRN caregivers and has a participation rate of 80%. This plan matches caregiver investments in the fund at a rate of 50 percent, up to 6 percent of employee contribution. As plans change over time, employee contributions and benefits in defunct plans are frozen and future withholdings utilize active plans.

Our policies prohibit off-the-clock work for non-exempt caregivers, as well as supervisory behavior that permits, encourages or requires off-the-clock work. Our timekeeping systems and policies are designed to comply with applicable federal and state regulations regarding pay, including accurate calculation of overtime compensation. Human Resources policies address appropriate use of independent contractors, student interns and hospital volunteers. We adhere to state regulations regarding working hours, duties and breaks for caregivers who are minors. Prior to commencing employment, every minor under the age of 18 must possess a valid Age and Schooling Certificate (work permit) unless otherwise exempted as stated in Chapter 4109 of the Ohio Revised Code. Ohio law restricts the hours of work of minors and prohibits their employment in occupations that are considered hazardous to their health.



# Community

Cleveland Clinic is committed to serving our communities by providing high quality healthcare and wellness services, medical research and education.

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## Community Impacts

Cleveland Clinic strives to provide compassionate, high-quality healthcare services, medical research and education. We evaluated the needs of the communities we serve and support efforts to improve the health of our communities.

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## Community Engagement

Cleveland Clinic has an ongoing relationship with the leadership and members of the communities we serve.

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## Government Relations

Cleveland Clinic's political activities are primarily focused in the areas of healthcare reform. Specifically, we are interested in issues related to access to healthcare, patient outcomes, quality of care, wellness, health information technology, physician education and provider reimbursements.

# Community Impacts

Cleveland Clinic is committed to playing a strong role in our communities, providing compassionate high-quality healthcare and supporting efforts to improve the health of our neighbors and neighborhoods.

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## Community Benefit

Cleveland Clinic is a nonprofit, multispecialty academic medical center with a proud history of serving the needs of the residents of our communities. Cleveland Clinic serves the community by providing uncompensated healthcare to those in need, engaging in a broad range of medical research, education and training programs, and supporting community health initiatives.

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## Community Health Needs Assessments

Cleveland Clinic strives to provide compassionate, high-quality healthcare and support efforts to improve the health of our communities. We have conducted comprehensive community health needs assessments to understand and plan for the current and future health needs of the communities each of the Cleveland Clinic hospitals serves. In accordance with Internal Revenue Code Section 501(r), each hospital conducted its own community health needs assessment and developed its own implementation strategy report.

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## Economic Impact

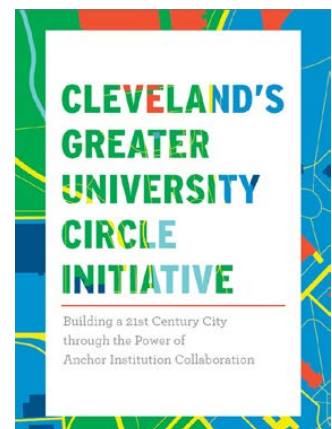
Cleveland Clinic is an economic driving force in Northeast Ohio, contributing substantially to growth in the region's innovation and employee base in our community. We are proud to be a part of the region's prominence as a national center of biomedical technology, research and quality patient care. Cleveland Clinic is the largest employer in Northeast Ohio and the second largest employer in the state. We continue to invest in our communities by building, hiring and expanding our services.

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## Greater University Circle Initiative

In 2005, Cleveland Clinic joined a collaborative redevelopment initiative with other anchor institutions in and around the Greater University Circle district to rebuild our neighborhoods and improve the economic opportunities of the residents who live there. As of 2012, the median income for a household within the University Circle and its seven adjacent neighborhoods was \$18,500 and unemployment was 24%.

The Cleveland Foundation convened the Greater University Circle Initiative (GUCI), bringing the leaders of the Cleveland Clinic, University Hospitals, and Case Western Reserve University together with the City of Cleveland government and other stakeholders to devise strategies that focus on institutional partnerships, physical



development, economic inclusion and community engagement.

In many cities like Cleveland, anchor institutions have surpassed traditional manufacturing corporations to become their region's leading employers. Cleveland Clinic is currently Northeast Ohio's largest employer, Ohio's second largest employer and recognizes the important role it plays as an anchor institution in the local economy.

There have been some remarkable early successes that national funders and other cities are noticing and trying to replicate, including:

- a leadership table that is the forum for collaboration for GUCI
- an evolving local procurement program to funnel purchasing power to local businesses
- the creation of the Evergreen Cooperatives (three employee-owned businesses that aim to create wealth in GUCI neighborhoods)
- Workforce Training programs
- a Greater Circle Living employer-assisted housing program
- a comprehensive community engagement strategy emphasizing the power of networks
- hundreds of millions of dollars in new real estate development that have boosted the area's commercial and residential base

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## Mobile Food Pantry

Stephanie Tubbs Jones Health Center (STJHC) sponsors a Mobile Food Pantry in East Cleveland on the 4th Saturday of each month in collaboration with the Greater Cleveland Food Bank. The Mobile Food Pantry operates like a Farmers Market, but the food is given away to community members for free.

The East Cleveland community is a “food desert,” lacking easily accessible grocery stores that provide fresh produce. This disparity impacts the community through high rates of obesity, diabetes, and hypertension. The Mobile Food Pantry provides healthy meal options for families, promotes healthy eating and improves health outcomes.

“Access to food is not only a social concern for our Health Center, but also a medical concern” said Alicia Richardson, a STJHC Patient Navigator dedicated to the Mobile Pantry and its purpose. “There are several prescribed medications that are most effective when taken with healthy food, and most importantly, when someone is hungry, accessing food becomes their primary concern, and healthcare is put on the back burner.”

Each month, the Greater Cleveland Food Bank provides STJHC with 10,000 to 12,000 pounds of fresh produce to feed 200-300 families. In 2014, STJHC's Mobile Food Pantry ran from April to November and served 2,827 families and 7,070 individuals. The pantry is staffed by volunteers from across the Cleveland Clinic enterprise and community, including the East Cleveland Fire Department. The Mobile Food Pantry plans to expand the model to other Cleveland Clinic Family Health Centers.



## Local and Diverse Spend

Cleveland Clinic is committed to serving our local communities by supporting and partnering with local and minority-owned business enterprises.

Cleveland Clinic is committed to serving our local communities by supporting and partnering with local and minority-owned business enterprises. Our supplier diversity strategy fosters and strengthens these relationships through mentoring programs and quarterly dialogues. Cleveland Clinic works with minority-owned and local suppliers to ensure we partner with our neighbors and with diverse organizations.

### Local Spend

Local purchasing has been defined as the Northeast Ohio Spend from 16 counties identified as Northeast Ohio (Ashland, Ashtabula, Carroll, Columbiana, Cuyahoga, Geauga, Lake, Lorain, Mahoning, Medina, Portage, Richland, Stark, Summit, Trumbull and Wayne).

### Local and Diverse Spend

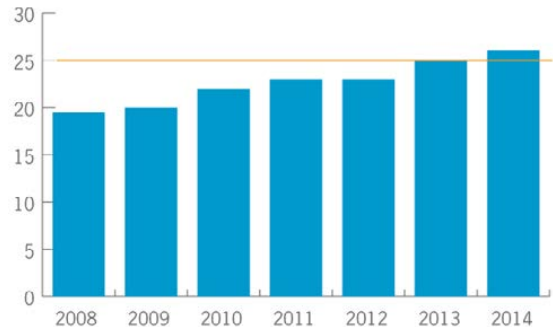
	SPEND	TOTAL SPEND
Northeast Ohio	\$462 M	27%
Cuyahoga County	\$368 M	21%
City of Cleveland	\$189 M	11%

### Buildings and Properties Diverse Spend

In 2014, our supplier diversity addressable spend goal in Buildings & Properties (construction) was 24%, which we surpassed in 2014 at 26%.

### Supplier Diversity

#### Addressable Construction Spend

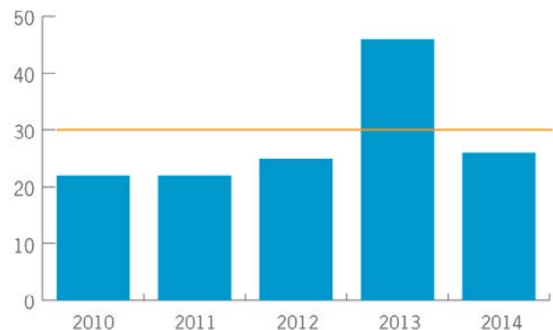


### Supply Chain Diverse Spend

Our 2014 Supplier diversity goal for addressable spend in supply chain was 30%. We met 86% of this goal with a diverse addressable spend of 26%.

### Supplier Diversity

#### Addressable Supply Chain Spend



# Community Engagement

Northeast Ohio, where the majority of our hospitals and health centers are located, is built on a unique system of communities. Through the Office of Government and Community Relations, Cleveland Clinic provides on-going health and wellness programming in collaboration with the communities in order to meet the needs outlined in the Community Health Needs Assessments.

Cleveland Clinic's Office of Government and Community Relations includes five focus areas: Community Relations, Regional Coordination, Policy, Government Relations and Operations. These offices serve our local, national and global communities to promote education, community growth and wellness based on specific community needs. By providing quality health screenings, education programs and building strong relationships in the communities we serve, Cleveland Clinic helps individuals make positive choices that impact short- and long-term health and wellness.

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## Healthy Communities Initiative

In response to a high prevalence of obesity, diabetes and other chronic conditions, Cleveland Clinic developed our Healthy Community Initiative (HCI) to promote wellness in our communities.

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## Civic Education

Cleveland Clinic works to improve health and wellness, promote academic achievement and foster career preparedness for students in grades pre-K through 12.

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## Langston Hughes Community Health and Education Center

The mission of this center is to make a difference in the health and wellness of the Northeast Ohio Fairfax community, where the center's health programs are widely used by residents.

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## Community Partnerships and Farmers Markets

Cleveland Clinic's community partnerships number well over 200. One of the most enjoyable educational experiences is inviting partner organizations to tour and experience the Cleveland Clinic Main Campus Farmers Market.

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## United Way Day of Caring

Cleveland Clinic supports the United Way through our United Way Campaign and annual United Way Day of Caring, where caregivers are able to spend a work day on community service.

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## Mentor Protégé Program

Cleveland Clinic in conjunction with local partners is active in promoting development and exposure to careers in facilities management to local young adults.

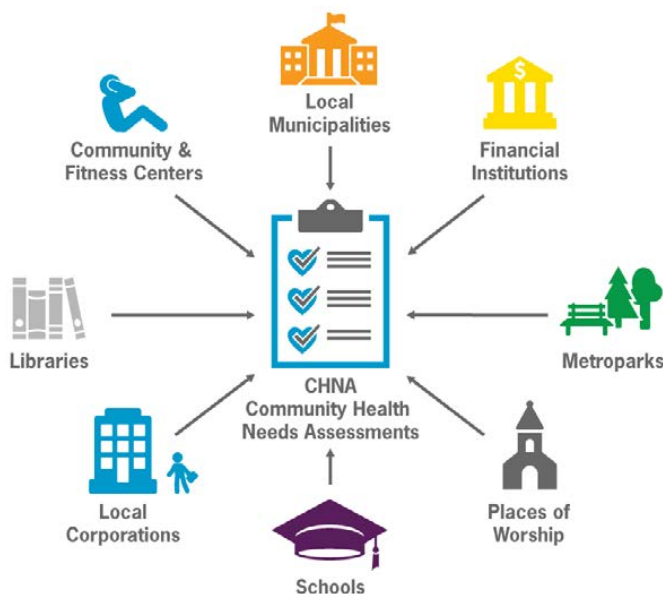
## Healthy Communities Initiative

The Community Health Needs Assessments indicated a high prevalence of obesity, diabetes and other chronic conditions in Cleveland Clinic's Northeast Ohio communities. In response to these indicators, Cleveland Clinic's Office of Government and Community Relations developed our Healthy Communities Initiative (HCI) to promote wellness in our Communities. Each program is specifically customized based on the needs of the community and through partnerships with local government and other organizations.

### HCI Background

The Healthy Communities Initiative is a collaborative, year-long partnership designed by and for a community with the goal of improving health status, developing sustainable partners and impacting the local economy. Using the Community Health Needs Assessment as our guide, Cleveland Clinic has partnered with local governments and community leaders to engage residents, businesses and other health care providers to improve overall health and wellness through the development of collaborative programming.

Our focus is on four key health components: education, nutrition, tobacco cessation and lifestyle management.



### HCI Community Partners

Collaborations and partnerships with community leaders in government, private and nonprofit sectors have enabled Cleveland Clinic to have a deep, broad influence on health and wellness. Partnerships for the Healthy Community Initiative are core to the success of each program and include but are not limited to:

- Local government agencies
- Local school districts
- Faith-based organizations
- Local and national business and non-profits
- Other health care providers



## HCI Locations

- Bay Village
- Cleveland (Fairfax Neighborhood)
- Cleveland (Ohio City Neighborhood)
- Cleveland (Tremont Neighborhood)
- Cleveland (West Park Neighborhood)
- Cleveland Heights / University Heights
- Fairview Park
- Garfield Heights
- Lyndhurst
- Mayfield Heights
- Medina
- Munson
- North Ridgeville
- Rocky River
- Wooster

## HCI Spotlight: Be Well West Park

Be Well West Park serves the neighborhood surrounding Fairview Hospital. 82 participants walked the Kamms' Corners area on eight Thursday evenings in increasing increments. Our partners were the YMCA, Cleveland Police, Council Ward 17, Kamm's Corners Development Corps, Walgreen's, Key Bank, Manorcare HCR, the West Park Historical Society, and the local Farmer's Market.

One participant who lost 16 pounds had the following comment upon completing the program:

"This eight-week program has been a real blessing to me. It really ignited a lifestyle change in my diet and exercise. All of the speakers and information really was an encouragement. This program was so much more than I could have ever imagined. Very informative and motivating, it benefitted me greatly. You all did a fantastic job. Thanks to all." – Dan S.

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## Civic Education

Cleveland Clinic's Office of Government and Community Relations' works to improve health and wellness, promote academic achievement, and foster career preparedness for students in grades pre-K through 12. Our Clinic-Based, School-Based, and Connected Learning programs provide a wide range of authentic learning experiences at Cleveland Clinic facilities, in schools, and through technology-mediated activities. Aligned with academic content standards and developed around real-world applications, these programs leverage organizational resources and community partnerships to support student success, both inside and beyond the classroom, empowering our community's next generation of leaders.

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## 5 to Go!™

5 to Go!™ is led by Cleveland Clinic's Community Relations Department and offers age-appropriate health and wellness curricula, a collection of body mass index data, and guidance for implementing school wellness policy changes that positively impact all children.

Cleveland Clinic is a proud leader in the movement to ensure all young people have access to essential information and the resources needed to grow up healthy. To accomplish this goal we collaborate with other childhood health champions in schools and community organizations to implement our 5 to Go!™ campaign.



5 to Go!™ incorporates a number of other new and existing programs under a single campaign to comprehensively engage students of all ages.

### 5 to Go!™ Background

5 to Go!™ is led by Cleveland Clinic's Community Relations Department and offers age-appropriate health and wellness curricula, a collection of body mass index data and assistance in implementing high-level policy changes that positively impact all children.

### 5 to Go!™ Methods

Cleveland Clinic knows that in order for children to grow up healthy, they must be fed healthy foods and learn about them in school. Food is Knowledge® is our pre-K through first grade curriculum that incorporates MyPlate, a government nutrition education program, and unique cartoon characters to teach children about the food groups, the importance of nutrients for our bodies, how the food we eat is grown and raised and table manners.



Food is Knowledge® is our pre-K through first grade curriculum that incorporates MyPlate, a government nutrition education program, and unique cartoon characters to teach children about the food groups, the importance of nutrients for our bodies, how the food we eat is grown and raised and table manners.

### 5 to Go!™ Implementation

During the 2014-2015 school year, more than 6,800 children experienced Food is Knowledge®, an increase of 51% from last year, and of this group, nearly 28% are early learners. Cleveland Clinic partners with community organizations such as the Council for Economic Opportunities in Greater Cleveland (CEOGC) to offer Food is Knowledge® to their Head Start programs.

Our curriculum for older students engaged in Healthy Futures includes units on nutrition, physical activity, mindfulness and tobacco avoidance. This program reached over 4,300 students across 64 schools and 5 community organizations

Food is Knowledge® and Healthy Futures are reinforced when school food service directors adopt our Eat Right at School Menu. Created in conjunction with dietitians from Cleveland Clinic's Center for Human Nutrition, the Eat Right at School criteria starts with the new USDA guidelines for school nutrition and further enhances those criteria for sodium, sugars and whole grains.

### 5 to Go!™ Results

Through all of the associated programs, Cleveland Clinic's 5 to Go!™ initiative touched 28,340 students in 2014-2015. With these impacts, Cleveland Clinic is helping to educate children on life-long healthy choices and ensuring the long-term health of our communities.

**Cleveland Clinic**  
Cleveland Clinic  
Healthy Kids  
Inside & Out

**5 to go!**

- 5** Eat **FIVE** fruits and veggies a day
- 4** Give and get **FOUR** compliments a day
- 3** Consume **THREE** calcium products a day
- 2** Limit media time to **TWO** hours a day
- 1** Get at least **ONE** hour of exercise a day
- 0** Consume **ZERO** sugar-sweetened drinks

**go!** Be healthy, inside and out!

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# eXpressions™

Launched in 2005, eXpressions™ is an award-winning educational initiative that utilizes creative expression to engage high school students in the exploration of science and medicine.

## **eXpressions™ Background**

Launched in 2005, eXpressions™ is an award-winning educational initiative that utilizes creative expression to engage high school students in the exploration of science and medicine. Through project-based, peer-to-peer learning, students translate research studies conducted by Cleveland Clinic high school interns, producing artistic, literary, and mathematical interpretations of the science.

## **eXpressions™ Methods**

In addition to providing participants with a deeper appreciation for science and its connections to other disciplines, eXpressions™ gives students and their teachers the chance to earn awards, exhibition opportunities, and even college credits. And since the program connects to Common Core State Standards, it provides a fun, creative way to cultivate 21st century skills.

## **eXpressions™ Implementation**

Since the program's inception, 7,351 creative interpretations have been submitted by eXpressions™ students.

Out of the 1,223 submissions received as part of the 2015 eXpressions™ program, there were 94 award-winning pieces that will be on display at the Global Center for Health Innovation.

## **eXpressions™ Results**

An esteemed panel of content specialists — arts educators, professional writers and editors, scientific researchers, and mathematicians — evaluated the eXpressions™ submissions on four criteria: interpretation of research, presentation of ideas, creativity, and initiative. Exceptional entries were awarded one of four levels of recognition: Blue Ribbon, Red Ribbon, White Ribbon, and Honorable Mention. One art submission, one language submission, and one math submission were also recognized as Best in Show for their respective programs.

We are proud to feature this year's Best in Show, Art piece, Liberation, created by Madeline Lee from Westlake High School in Westlake, Ohio. Madeline's eXpressions™ piece was inspired by Science Internship Program intern Maya Gaines-Smith's research project titled "Does Mobilization of Patients with a Cancer Diagnosis Decrease Pain?" Maya conducted her research under the guidance of her Cleveland Clinic mentor, Marianne Douglas, MS, and co-mentor, Scott Tremmel, PT.



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## Clinic-Based Programs

Clinic-Based Programs give Northeast Ohio middle and high school students the opportunity to learn and work alongside world-renowned caregivers at Cleveland Clinic's main campus, regional hospitals, and family health centers. The summer internship program introduces high school and middle school students to a variety of healthcare careers and give them the opportunity to participate in projects emphasizing the role of science and math in healthcare.

These programs promote learning in health and wellness, the arts, innovation, financial literacy, and more. Each program is formulated to inspire students to embrace a variety of disciplines as keys to success, and to foster skills that will help them become life-long learners.

### Clinic-Based Programs Methods

Students gain exposure to healthcare fields and careers, cultivate their 21st century skill set through hands-on learning opportunities and find practical, real-world applications for their academic knowledge.

### Clinic-Based Programs Implementation

Since the beginning of the program, a total of 1,293 interns have graduated from the Clinic-Based Programs. Additionally, the programs below have provided experiential placements for many students:

- Beyond the Chair Oncology Patient Pampering Program (561 students since 2005)
- St. Martin de Porres School to Work Program (235 students since 2005)
- CMSD Special Education School to Work Program (152 students since 2005)
- Trinity High School Pre-Professional Program (390 students since 2009)
- University Circle Future Connections Program (325 students since 2000)

During the summer of 2014, 85 interns from across the Northeast Ohio region participated in the Clinic-Based Programs. Interns have attained coveted admissions to top colleges, universities and educational advancement opportunities around the world and have been offered and accepted full and partial scholarships to pursue their interest in scientific or health and/or sciences professions.





## Clinic-Based Programs Research Projects Spotlight

All interns who participate in our Clinic-Based Programs are responsible for producing a final research project. The outcomes of this research have the potential to impact Cleveland Clinic patients immediately, as well as for years to come. Below are examples of two projects completed by our 2014 interns.

### **Intern: Emily Carmon**

Project Title: Assessing Ways to Improve Vaccine Immunization Rates in Asthma Patients.

School: Magnificat High School

Mentors: Wadie Shabab, MD, FAAP, Jennifer Schill, RN, BSN

Research Abstract: Asthma is an inflammatory disorder of the airway that causes breathing problems due to airway narrowing and obstruction. Many asthmatic patients at Avon Pointe Pediatrics are not vaccinated against Influenza. Influenza can cause asthma patients to develop complications with their asthma leading to asthma attacks, hospitalizations, and possibly death. The purpose of the project is to create new and effective ways to help increase the influenza immunization rate in asthma patients.



### **Intern Name: Oluchi Onyeukwu**

Project Title: Improved Discharge Instructions Will Increase Patient Satisfaction

School: Cleveland School of Science of Medicine

Mentors: Libby Hawk, BSN, RN, Mary Carey, BSN, RN

Research Abstract: Nurses' first priorities are to the patients; making sure they're cared for. In order to ensure this, they must have the appropriate tools, such as discharge instructions. Regardless of what procedure has been performed, every patient receives discharge instruction. There is a specific criterion when making instructions. The purpose of this study is to determine the effect of complete instructions on patient literacy and satisfaction.



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## Langston Hughes Community Health and Education Center

Cleveland Clinic provides support for Langston Hughes Community Health and Education Center in the Fairfax neighborhood of Northeast Ohio. The mission of this center is to make a difference in the health and wellness of the residents of Fairfax. This neighborhood has a 34% poverty rate and Cleveland Clinic's health programs are widely used by the community. Since its inception, the Langston Hughes Community Health and Education Center has been challenged to make a difference in Fairfax by improving the health and wellness of our neighbors and the broader community.

Our Center joined with community partners such as PNC Connection, Fairfax Renaissance Development Corporation, Karamu House and Cleveland City Council Ward 6 Representative Mamie Mitchell to build the outstanding Healthy Communities Initiative for this community: "Fit In Fairfax". Over 300 participants were in attendance at the introduction in September 2014 and, as a result, there was a snowball effect in building new relationships, partnerships, and program development.

We are especially grateful for the trust and partnership of the Taussig Cancer Institute. The institute leadership worked with our Cleveland Clinic Langston Hughes team to construct and manage the new mammography unit, a critical addition to the programs and services provided at our clinic. This mammography suite, renamed the Jonnie Ruth Brown Mammography Suite in early 2015, permits women to receive a scan and breast examination at no cost, with patient navigation services available as needed for support.

Throughout 2015 our team will work to establish Langston Hughes as the hub for community health and education programs in Fairfax and surrounding communities, providing a variety of activities to attract and improve the lives of the many residents who are underserved in this community. As an example, in January, the center began hosting the Ohio State University Extension staff and “Eating Smart, Being Active”, a free, eight week nutrition education series for parents and grandparents. Other community groups are also working to make Langston Hughes a program site in 2015.



## Community Farmers Markets

Cleveland Clinic's community partnerships are administered by the Community Relations department and number well over 200. One of the most enjoyable educational experiences is inviting partner organizations to tour and experience the Cleveland Clinic Main Campus Farmers Market.

The Office for a Healthy Environment, the Office of Government and Community Relations, and the Wellness Institute support Cleveland Clinic's Community Farmers Market Program, which serve our communities with local produce.

Our team of health educators discusses the importance of including fresh food as part of a healthy diet with dozens of young visitors in each session along with their adult chaperones and summer camp instructors. The students are often provided with five dollars to purchase food items that are then prepared at their community resource centers. In addition to the market tour, shopping and education session, these young people learn summer safety tips from a Clinic police officer.



## What is the Community Farmers Market Program?

Our 2014 Farmers Market season ran from June to October on Cleveland Clinic's main campus and at our Beachwood, Independence and Strongsville family health centers. All food at our markets originates from within 115 miles of the market and is sold directly by the farmer. These policies strengthen our local economy and curtail the emissions used in transporting conventionally grown food that, on average, has traveled 1,500 miles to reach your plate.

Farmers Markets address the need for healthy and fresh produce in underserved communities without access or transportation to these local resources. Cleveland Clinic Farmers Markets offer incentive benefits to WIC (Women, Infants, and Children) moms, SNAP (Supplemental Nutrition Assistance Program) recipients and seniors along public transportation routes, increasing the Market audience and value it brings to the community.

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## United Way Day of Caring

Cleveland Clinic supports United Way and its nearly 130 agencies through an annual campaign. Led by an administrator and a physician, the campaign's leadership team includes more than 40 volunteer caregivers from across the enterprise who work together to increase awareness and raise funds. In 2014, more than 9800 caregivers contributed more than \$1.56 million to United Way.

Cleveland Clinic caregivers also support the United Way through our annual Day of Caring, where caregivers are able to spend a work day on community service.

In September 2014, more than 100 caregivers headed to Hiram House Camp in Chagrin Falls, Ohio, to prepare Ohio's oldest campground for its 43rd annual October Pumpkin Festival. Caregivers cleaned the dining hall and cabins, washed windows, worked outdoors on landscaping and set up a hay bale maze.

Hiram House, a 118-year-old youth camp, enriches the lives of children through camping. It is just one of many agencies in greater Cleveland that benefit from support of United Way.





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## Building the Pipeline

Cleveland Clinic, in conjunction with local partners, is active in promoting development and exposure to careers in facilities management to local young adults. We host students from Max S. Hayes Career and Technical High School annually to give them the opportunity to engage with our caregivers on how skilled trades support healthcare facilities. Cleveland Clinic is also participating in a grant sponsored general maintenance technician internship program that engages students in their junior year to curriculum and work experience to prepare for post-secondary schooling and future employment.



For those qualified adults in our surrounding communities, Cleveland Clinic is collaborating with a local partner to deliver a Spring Internship in 2015. Candidates from the local neighborhoods receive soft skills support and participate in shop rotations at our main campus to gain exposure to the opportunities in the healthcare industry.

At the contractor partner level, the Mentor Protégé program has been in place for approximately two years. Diverse construction management and architectural firms are paired with leaders in the industry. At Cleveland Clinic, the mentors include mentees in every phase of the process and use agreed-upon key performance indicators to gauge success and opportunities. There is a high level of engagement, learning and successful award of work taking place. In 2014, Ariane Kirkpatrick, President, AKA Construction Management Team, Inc. bid and was awarded best value selection for the waterproofing package for the Cancer Institute building scheduled to open in 2017. [Click Here](#) to learn more about our healthy buildings.

# Government Relations

By virtue of our scope and operations, Cleveland Clinic engages with many stakeholder groups including our patients, employees and communities. As a major employer within the State of Ohio, and having operations in Florida, Nevada, Canada and the United Arab Emirates, Cleveland Clinic also interacts regularly with the citizens, governments and businesses of the communities served by Cleveland Clinic facilities.

Local and state governments in Ohio, Florida and Nevada are directly impacted by, and benefit from, Cleveland Clinic's role as a driver of economic growth. We interact with these stakeholders to ensure that we address the needs of our local communities, employees and patient base.

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## Government Engagement

Cleveland Clinic's political and legislative activities are primarily focused in the areas of healthcare delivery system reforms. Specifically, we are interested in issues related to access to healthcare, patient outcomes, quality of care, wellness, health information technology adoption, physician education and provider reimbursements. These activities can take many forms including support of legislation, providing comment on proposed regulations, participating in ad hoc committees, and offering testimony in state and federal legislative committee hearings. When deemed appropriate, Cleveland Clinic will participate in coalitions with peer institutions to maximize the impact of our efforts.

Cleveland Clinic, as an institution, does not provide donations or other support to individual legislators or political parties. We ensure that ethical practices are maintained by completing detailed reports of contact with elected officials and government agencies and by filing federal lobbying reports for the money and time spent by individuals from the Office of Government Relations and Cleveland Clinic for advocacy efforts. Cleveland Clinic caregivers may donate to organizations or legislators as private citizens and do not represent Cleveland Clinic by their actions.

Cleveland Clinic receives support from the federal and state government in the form of competitive research grants, education assistance, loans and contracts. This financial assistance goes towards furthering our three-pronged effort to care for the sick, educate caregivers, and perform leading edge research on diseases and conditions. In 2014, Cleveland Clinic received \$108,534,988 from federal and state grants, awards, and sub-awards.

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## Politics and Healthcare Reform

In 2014, The Government Relations Department hosted "Politics and Health Care Reform: A Discussion on 2014 Politics and Impact on Cleveland Clinic." Participants included: Steven LaTourette, who served 18 years as a member of the U.S. House of Representatives from Northeast Ohio and is President of McDonald Hopkins Government Strategies; Tim Cosgrove, one of Ohio's most influential government relations professionals and a partner at Squire, Patton, Boggs, a law firm in downtown





Cleveland; and Gina Petredis, Director of Government Relations, who served as moderator.

The meeting, which was attended by Cleveland Clinic leadership, covered the 2014 election platforms at the local, state, and federal levels, including the impact of the Affordable Care Act on the politics of the upcoming political races.

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## Two-Midnight Inpatient Admissions Policy

In January 2014, the American Hospital Association hosted a legislative Day of Action to help secure support for a bill in the U.S. House of Representatives that would delay the penalty provisions of the “Two-Midnight Rule.” In a special congressional briefing session, Cleveland Clinic’s Dr. David Bronson participated on an expert panel, along with other experts from Johns Hopkins Medical Center and Mayo Clinic. More than 100 congressional representatives and staffers, as well as policy experts from both sides of the aisle, attended the briefing.

The “Two-Midnight Rule” requires doctors to determine whether or not Medicare beneficiaries are likely to be in hospital across two or more midnights when deciding to admit a patient from the Emergency Department or an outpatient setting. The rule is intended to reduce the number of patients who are admitted to the hospital for treatment that could be provided on an outpatient basis. While the spirit of the rule is to reduce unnecessary inpatient admissions, implementing the rule has been challenging for most hospitals.

Dr. Bronson told a compelling story about two hypothetical heart failure patients who would have had very different financial outcomes from identical treatment because one arrived in the ED at 11:46 p.m. and the other at 12:15 a.m. The other panelists shared similar stories of confusion and difficulty in complying with the rule.

Less than 48 hours after this excellent briefing opportunity, the Centers for Medicare and Medicaid Services (CMS) delayed their implementation of the rule by an additional six months, through September 30, 2014. This extension gave the Cleveland Clinic and other hospital systems a much needed training and analysis period to help define the best way to comply with this rule so that it is fair and puts patients first.



*Pictured from left, Ashton Schatz, Medicare regulatory and reimbursement process manager at Mayo Clinic, Amy Deutschendorf, senior director of utilization and clinical resource management at Johns Hopkins Hospital in Baltimore, David Bronson, MD, senior public policy and external affairs advisor for Cleveland Clinic Regional Hospitals and AHA’s Erik Rasmussen. Photo credit to American Hospital Association*

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## Sustainable Cleveland 2019: Climate Action

As part of Sustainable Cleveland 2019, Cleveland Mayor Frank Jackson, the Mayor's Office of Sustainability and Cleveland's Climate Action Advisory Committee developed the Cleveland Climate Action Plan (CAP).

Cleveland's Climate Action Advisory Committee included representatives from Cleveland's leading organizations, including Cleveland Clinic. Cleveland Clinic's Office for a Healthy Environment helped shape the City of Cleveland's goal to reduce greenhouse gas emissions by 80% from 2010 to 2050 and helped to develop the 33 actions outlined in the CAP to achieve this goal.



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## Opiate Use and Medicaid

The US Attorney's Task Force meets regularly to discuss the ongoing efforts in the county and state to combat opiate abuse. Drug overdose deaths continue to be a public health crisis in Ohio with a 366 percent increase in the number of deaths from 2000 to 2012.

Cleveland Clinic has been actively involved in working to address the opiate crisis in Northeast Ohio, collaborating with government, law enforcement and addiction experts through the Task Force. Dr. Gregory Collins and Dr. Jason Jerry of Lutheran Hospital serve as the chairs of the subcommittees on Health Care Policy and Treatment. Other partners in this task force include University Hospitals, MetroHealth, Medical Examiner's Office, Drug Courts, Law Enforcement, and Alcohol, Drug Addition and Mental Health Services (ADAMHS) board.

The task force is developing several strategies to combat this epidemic, including:

- Reducing illicit acquisition of heroin and diversion of prescription drugs
- Promoting responsible prescribing of prescription opioids, benzodiazepines and other schedule II controlled substances
- Enhance prescription drug policies in law enforcement
- Increase public awareness and patient education concerning the risks of heroin and prescription drug misuse and pain management expectations
- Enhance assessment and referral to substance abuse treatment

Cleveland Clinic continues to engage opioid legislation by working with the state medical board on various draft rules and further discussing these bills with our legislative partners in Columbus, Ohio.

# Environment

Cleveland Clinic supports healthy environments for healthy communities. We understand that environmental health and human health are inherently linked and that we have a responsibility to take a precautionary approach to environmental stewardship. As a national leader in healthcare, we are in a position to lead by example in the adoption of environmental best practices as we deliver exceptional patient care.

With a built environment portfolio of more than 20 million square feet, and more than 42,523 caregivers, the impact we make on our community and ecosystem, both positive and negative, is substantial. As a result of our scale, we have the opportunity and responsibility to set an example for other hospitals and businesses. Even small changes applied broadly can provide significant opportunity.

Cleveland Clinic's Office for a Healthy Environment acknowledges our obligation and opportunity to minimize the health impacts of climate change. We are working to enhance the resilience of our facilities and communities, we are engaging our stakeholders to personalize climate action and we are embedding sustainability into our healthcare delivery model.

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## Energy Conservation

Cleveland Clinic's energy program is designed to enhance patient outcomes and the patient experience while reducing operating expenses. As our model of healthcare evolves, we are firmly committed to reducing our environmental, economic and human impact by reducing our energy intensity.

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## Waste Reduction

Cleveland Clinic is committed to reducing waste across our healthcare system. By engaging our caregivers to minimize the waste we send to our landfills, we are protecting the environment, reducing costs and improving land, air and water quality in our communities.

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## Healthy Buildings

Our buildings must support the health of our caregivers, patients and communities. In 2014, we continued to grow and set new standards for our buildings and development.

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## Climate Resilience

Climate change has been linked to a host of impacts on public health. Cleveland Clinic is committed to improving our institution-wide initiatives to prepare for climate change.

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## Innovative Leadership

Cleveland Clinic's leadership at global, sector, federal, state, local and enterprise levels has made us a veritable leader in sustainable healthcare.

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## Water Stewardship

Freshwater resources represent an invaluable local asset that have shaped Cleveland's identity. Cleveland Clinic is actively protecting our water supply through conservation measures, such as condensate recovery and storm water management.

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## Environmental Performance

Our leadership understands what gets tracked gets managed. Improved transparency and accountability are goals for the next phase of our work.

# Energy Conservation

Cleveland Clinic's energy management work is an outgrowth of our sustainability commitment to our patients, community and caregivers. As population health payment models proliferate, the linkage between energy, pollution and human health intensifies. Energy efficiency is more aligned to our core mission than ever before.

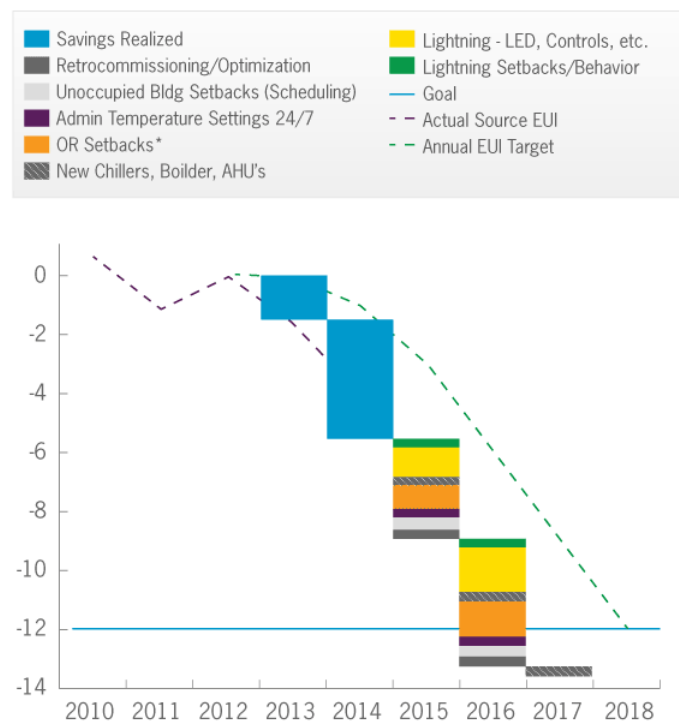
Cleveland Clinic's commitments to both affordable care and our external partnerships with ENERGY STAR and the Better Buildings Challenge drive us to become 20% more energy efficient by 2020 from a 2010 baseline on more than 20 million square feet of facilities.

In 2014, Cleveland Clinic began implementing a \$12M enterprise energy demand reduction strategy to improve our energy efficiency and become less resource-intensive. By decreasing energy intensity, Cleveland Clinic is providing value for our patients and leading the industry in responsible healthcare operations.

## Strategy Implementation

Our implementation strategy is fully resourced and supported by our executive leadership. This support includes initial capital spending and incentives realized from energy savings. Operational savings obtained are shared with building facility managers and operations teams to fund additional energy efficiency improvements. This helps to generate momentum and employee ownership of our energy policies. We allocated \$14 million specifically for high payback energy projects and implementation will continue in 2015.

## Strategy Implementation



## Lighting Setbacks & Behavior

Building setbacks and caregiver education offer significant energy reduction opportunities. We have programmed our lighting systems to reduce usage during unoccupied periods for administrative areas and are creating a culture of conservation through an enterprise-wide caregiver training initiative.

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## Light Emitting Diodes (LED)

The cost of LEDs has reached the point where the payback makes sense, even in Ohio where electricity prices are low relative to other regions. Cleveland Clinic is standardizing 100% LED for new construction and retrofits. We have identified opportunities to retrofit existing linear and can lights with LED tubes and bulbs. In late 2014, we replaced 1,800 metal halide fixtures with Cree LED fixtures in 2 Main Campus parking garages, saving more than 3 million kWh.

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## Chiller Optimization

In partnership with Gardiner Trane, we implemented several chiller optimizations in 2014 on main campus and several other hospitals. Chillers are machines used for cooling our facilities and contribute a significant portion of our HVAC costs. We anticipate savings of \$650,000/year based on internal studies and an external study performed by a third party.

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## Filter Optimization

We initiated a filter optimization program to replace HEPA filters with MERV 14 high efficiency filters for non-surgical spaces and utilize a more energy efficient filter package across the system. The conversion is projected to save approximately 23% in fan power for all affected air handling units with variable speed drives and deliver almost \$1 million in savings.

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## Operating Room (OR) Setbacks

Like people, ORs require ventilation, and specifically, fresh, outside air to remain healthy. In collaboration with the Surgical Operations Executive Committee, the Facilities Department developed an OR Setback plan to reduce energy while maintaining State and Federal regulations for air exchange.

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## Unoccupied Building Setbacks

The cost of LEDs has reached the point where the payback period is reasonable, even in Ohio where electricity prices are low relative to other regions. Cleveland Clinic is standardizing 100% LED for new construction and retrofits. We have identified opportunities to retrofit existing lights with LED tubes and bulbs.

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## Retro-Commissioning

We optimized equipment condition, controls and programmed operating conditions to achieve a 40% savings at our Strongsville Family Health and Surgery Center. Additional facility retro-commissioning is planned in future.

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## Chiller/Boiler/AHU replacement

We replaced Medina Hospital's 57 year-old boiler with a high-efficiency on-demand Miura boiler, which is expected to save more than \$250,000 in energy costs per year and to deliver significant reductions in CO2 emissions.

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## Integrated Building Management System (IBMS)

We integrated meter installations and developed energy dashboards to provide detailed building by building energy metering and monitoring. This resulted in caregivers competing to control their respective buildings at the lowest energy use per square foot.

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## Utility Bill Management

In 2014, we engaged a third party firm to manage all of our utility bills. In addition to processing utility invoices, this firm performs extensive data mining and analytics at the building level, offering assurance of facility performance over time. We are importing this data into ENERGY STAR Portfolio Manager® yielding higher accuracy with less effort.

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## EcoCaregiver™

All Cleveland Clinic caregivers are EcoCaregivers™ and are committed to helping us achieve our sustainability goals. In 2014, we launched mandatory energy demand training for all caregivers.

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## Caregiver Engagement -> Sparking Interest in Energy

A facility's energy performance ultimately hinges upon its occupants' mindset and behavior. In summer 2014, Hillcrest and Euclid Hospitals were struggling with stagnant recycling and energy program participation, so they challenged each other in a friendly competition.



## Service Level Agreements (SLAs)

In support of our programs, SLAs were drafted between all caregivers and the Office for a Healthy Environment to uphold a conservation mindset for energy demand reduction. The SLAs outline clear roles and responsibilities of each party, define the nature and parameters of the services to be provided and set expectations that recognize the needs of Cleveland Clinic patients, visitors and unit staff. SLAs are reviewed by both parties and revised as appropriate or requested by Administration, Patient Care units or visitor representatives. SLA Implementation is slated for early 2015 in support of set seasonal temperature ranges and lighting protocols.

## Hillcrest Hospital vs. Euclid Hospital

A facility's energy performance ultimately hinges upon its occupants' mindset and behavior. It involves rethinking the way we do things and changing old habits. Changing old habits and forming new ones is an ongoing process that takes time, patience and persistence. Key to the transformation is fun, creative programming, regular communications and leadership support.

In summer 2014, Hillcrest and Euclid Hospitals were struggling with stagnant recycling and energy program participation, so they challenged each other in a friendly competition. The goals of the contest were to conserve



*Pictured, from L to R: Rich Lea, Interim President, Euclid Hospital, Dawn Bailey, Chief Nursing Officer, Euclid Hospital, Steve Davis, MD, Chief Operating Officer, Hillcrest Hospital, Brian Harte, MD, President, Hillcrest Hospital*

### Hillcrest Hospital vs. Euclid Hospital

	Euclid	Hillcrest
Waste	-10.9%	-4.4%
Co-mingled	510.5%	43.6%
Paper	25.0%	10.2%
Clinical Plastics	-17.1%	26.4%
Total Diverted	51.9%	28.1%

	Baseline Weather Normalized Source EUI	
	Euclid	Hillcrest
2014		
August	466.5	53
September	464.4	527.9
October	463.9	521.7
November	465.2	514.9
	-0.28%	-3.49%

resources, reduce waste, drive adoption of existing programs, engage caregivers and improve performance in four categories over the course of 3 months: waste, blue-bin recycling, paper recycling, clinical-plastics recycling and energy use.

Both facilities had great success (see comparison below), but Euclid Hospital was declared the ultimate victor, crushing the competition with a 510% improvement in its co-mingled "blue bin" recycling program. Euclid Hospital credits its success to simply having fun with the challenge, from workspace rounds to sending out video challenges and dedicated program visibility.

In addition to progress achieved at both Euclid and Hillcrest Hospitals, the contest informed a facility playbook and scorecard for hospitals and family health centers seeking to improve larger body of work to improve facility performance.



# Parking Garage Retrofit

## Lighting upgrade generates triple bottom line success

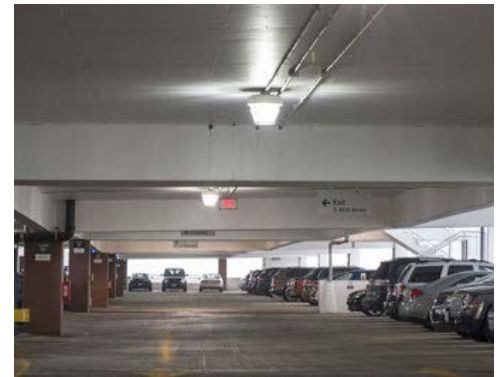
Cleveland Clinic has a basic and unavoidable need for safe, reliable and affordable energy to keep our facilities safe and operational. Because our parking garages operate 24/7, the case to upgrade to more energy efficient lighting solutions is compelling.

In January 2015, we completed the largest parking garage retrofit in our organization’s history, replacing more than 1650 metal halide lighting fixtures with LEDs in the main campus parking garages from interiors to stairwells to rooftops. Occupancy sensors and ambient light sensors help maximize savings and cut energy use in the garages.

This project reduced energy usage in the garages by more than 80% and savings are projected to be more than \$250,000/year. Additional benefits include long life, reduced maintenance costs, and improved lighting uniformity. Brighter lighting that responds to human presence is a key deterrent to crime and increases safety for all our patients and caregivers.



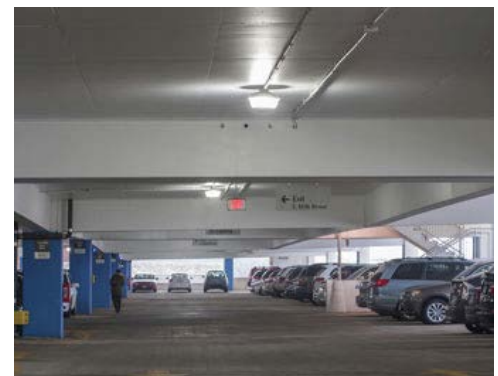
*Metal Halide Lamp (before)*



*LED Lamp (after)*



*MM garage (before)*



*MM garage (after)*

## Dollar-driven

Compared to conventional technologies such as metal halide fixtures, the new ultra-efficient LED fixtures deliver the same amount of light while using as little as 20% of the power. This is achieved by reducing the “on wattage” from 200W to 35W. These additional energy savings are realized by utilizing daylight harvesting and occupancy sensor features embedded in the Cree parking garage units.

Each parking garage fixture is individually tunable in its “on” wattage and occupancy time delay. If ambient light is sufficient, the fixture turns off. This means garage perimeter lights are often “off” in the daytime. During periods when the garage is not in use, the fixtures go to a setback mode utilizing only 5 watts while maintaining ambient light.

This significant reduction in energy consumption enables us to meet or exceed performance requirements while savings hundreds of dollars over the 10-year life of each light and avoid waste disposal fees for spent bulbs.



*Project Objective: Reduce operating costs while maintaining aesthetics, safety and security*

efficient lighting will save an estimated 3.4 million kWh/year, which is equivalent to the annual greenhouse gas emissions from 506 passenger vehicles. To put that in perspective, 500 cars can currently park on one level of our parking garage.

### Energy Matters

In Northeast Ohio, we burn coal to make electricity. Coal-fired power is dirty and resource-intensive. In 2011, a group from the Harvard Medical School estimated the full costs of coal consumption. Our electricity bill is large, but the cost of our energy use is larger than the dollars we spend. As a healthcare system, we are committed to improving the health of those we treat and the communities we share.

In December 2013, Cleveland Clinic set a goal to accelerate and achieve our 20% intensity reduction by 2017. This strengthens commitments already made by Toby Cosgrove, MD, CEO and President of Cleveland Clinic, who joined other national leaders in committing to the President's Better Buildings Challenge. Our commitment to the Better Buildings Challenge is a 20% reduction in our portfolio-wide energy intensity by 2020 from a 2010 baseline, bolstering our longstanding commitment to ENERGY STAR.

### Local Hires

As an anchor institution in the Greater University Circle area, Cleveland Clinic supports the Evergreen Cooperatives of Cleveland, Ohio are pioneering innovative models of job creation, wealth building, and sustainability. Evergreen's employee-owned, for-profit companies are based locally and hire locally. They create meaningful green jobs and keep precious financial resources within the Greater University Circle neighborhoods. Worker-owners at Evergreen earn a living wage and build equity in the firms as owners of the business.



### Longevity Reigns

Continually changing light fixtures in our parking garages is a dangerous and expensive project. LEDs have staying power and last for 10 years versus the 3-year life span of a metal halide fixture. In December 2014, Cleveland Clinic filed an energy efficiency rebate application with our utility provider to offset the costs of upgrading with more efficient technologies.

### Environmentally Minded

The production and use of LEDs requires significantly less energy than incandescent or CFL lamps. Longer life span means fewer disposal costs. Also, LED fixtures are free of mercury and other toxic materials, a clear win for the environment. Our newer, ultra-

Since the opening of its first worker-owner cooperative in 2008, Evergreen Cooperatives has grown to include three worker-owned cooperative businesses located in Cleveland. Each business has one primary service and offers additional “value-added” services. Our energy efficiency project work with Evergreen Energy Solutions (E2S) supports the growth of local markets in our community and the employment of our local community members. E2S is 100% owned by its workers who live in the City of Cleveland and face barriers to employment. E2S was awarded the contract to install the LED fixtures in our garages. Three E2S employees installed our new light fixtures on nights and weekends from November 2014 to January 2015.

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## Operating Room (OR) Setbacks

To meet our energy demand reduction target, we are fine tuning the systems that operate our buildings across the health system over the course of the next 3 years.

Heating, ventilation and air conditioning (HVAC) is the single most energy-intensive component in our energy profile (51%). There are 215 operating rooms (ORs) across our health system (86 on our main campus) running multiple cases per day. Because of the ORs’ requirements for air changes per hour, strict temperature and humidity parameters, pressure relationships and energy-intensive (and often heat-generating) surgical lighting systems, OR HVAC systems came into sharp focus as our largest strategic priority for energy demand reduction.



Our first step was to illustrate the scale of the opportunity that OR setbacks presented. A third party engineering firm assessed our OR occupancy, existing conditions and costs to implement, control and maintain an OR HVAC setback strategy. Some obvious wins emerged.

**“We don’t need belts and suspenders”– Paul Slebodnik, Cleveland Clinic Facilities Director**

Like people, ORs require ventilation, and, specifically, fresh, outside air to stay healthy. State and federal codes govern the minimum total and outdoor air change rates for ORs to maintain temperature, ensure particulate removal, and overcome equipment loads. For instance, ANSI/ ASHRAE/ ASHE Standard 170-2008: Ventilation of Health Care Facilities requires a minimum of 20 air changes per hour (ACH) total and 4 ACH of outdoor air when the room is in use. Cleveland Clinic’s design specification exceeded the guideline by 5 ACH, with no measurable benefits. In some cases, Cleveland Clinic was exchanging the air in excess of 30 ACH.

ASHRAE 170 and many state codes also allow the number of air changes to be reduced “when the space is unoccupied providing that the required pressure relationship to adjoining spaces is maintained while the space is unoccupied and that the minimum number of air changes, temperature and pressure relationships indicated is reestablished anytime the space becomes occupied” (7.1-Subsection 1.c).

In collaboration with the Surgical Operations Executive Committee, the Facilities Department has adjusted all main campus ORs to 20 ACH as a mechanism to reduce energy in the OR. Annual savings from this simple

adjustment are estimated at \$250,000. In collaboration with the Design and Planning Department, our OR design standards have been adjusted down to the 20 ACH per ASHRAE 170's guidance.

### Unoccupied settings present a different set of issues and stakeholder groups

OR HVAC setback, also referred to as “night setback” or “unoccupied setback” is an energy saving strategy that reduces the amount of air supplied to an OR when the room is not in use maintaining temperature and humidity ranges.

HVAC systems run all night, even when the OR is unoccupied. The obvious strategy is to program the HVAC system to reduce air changes when ORs are unoccupied in order to reduce energy use. But, where do you draw the line? Facilities recognized the enormous potential that unoccupied settings presented –on the order of \$1,000,000 per year. Yet, our clinicians had concerns about needing to condition the space at a moment's notice. The team is currently working with Surgery Operations to provide assurances that the implementation will not negatively impact patient safety or infection rates. “A focus on maintaining positive pressure, temperature, humidity and ACH as we prepared for the setback mode has allowed us to improve conditions after hours while surgery is not being performed,” says Paul Slebodnik, Director of Facilities.

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### The Task at Hand

- Identify peer facilities that implemented setbacks with no safety risks
- Identify what the users of the space needed versus wanted
- Articulate what permissions were necessary to override settings
- Map out HVAC usage per OR suite
- Research available technologies
- Pilot solutions and prove out setbacks
- Implement across the health system
- Evaluate costs

In the design and construction of a new OR, a setback strategy can be adopted with little or no additional upfront cost. However, in a retrofit of an existing facility, upfront costs must be weighed against the expected energy savings. Also, because most OR setback solutions require periodic maintenance, the cost of maintaining the system should be part of the equation. Generally, the finer the level of control, the more complex the system is,



which means a higher upfront cost. Pitching for a total cost setback strategy is not an easy sell to a management team focused on cost reductions.

OR Controls: It's Complicated.

### **OR Controls: It's Complicated.**

Different facilities and, in the case of our main campus, different buildings, have different and varied HVAC system controls. Designing the right control interface was very important to the success of this project for our various user groups for different reasons. Desk clerks can easily monitor OR conditions at a glance.

### **Facilities**

The Facilities Department is primarily concerned with the functionality of the building and how well it will hold up over time under heavy use. It runs and maintains the highly sophisticated systems that keep the surgical spaces' working conditions within range. Accurate, site-specific OR metrics i.e., temperatures, pressure, and humidity are necessary. Facilities also pays the utility bills for the organization, so fine tuning energy performance is a critical strategy for an aggressive energy demand reduction program.

### **Design and Planning Team**

The Design & Planning Team is a multi-disciplinary body tasked to deliver safe, current durable, adaptive and compliant rooms. The team is the keeper of OR design standards.

### **Surgical Operations**

Surgical Operations is responsible for managing a highly complex operating system that consistently delivers operational efficiency, safety, quality, financial performance and every detail of running a world-class surgical program. The team needed assurances that OR controls could be monitored and that the ORs would be primed and ready for incision at a moment's notice.

### **Infection Prevention**

Infection Prevention is responsible for influencing, supporting and improving the quality of health care through the practice and management of infection control, education, and the application of epidemiology and research. The team is committed to improving patient care, preventing adverse outcomes, and minimizing occupational hazards associated with the delivery of health care.

### **Surgical Staff**

Surgical caregivers are especially concerned about having facilities that support the safety and comfort of both the patient and the care delivery team. To date, the surgical teams have dictated the conditions in the space. Things that are important to these occupants are:

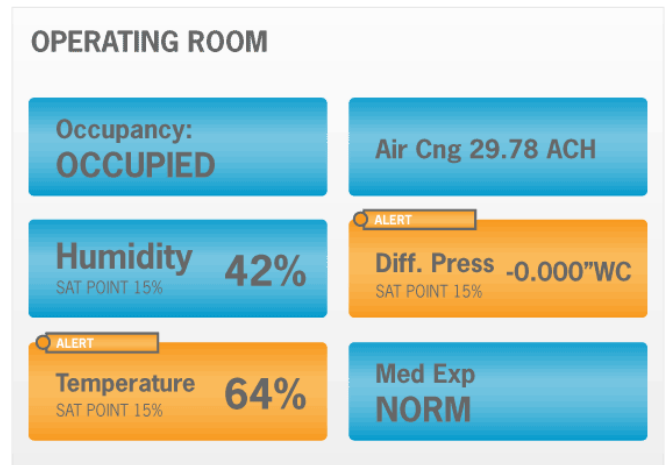
- Simple, intuitive view of critical OR conditions/Simple, intuitive automated room condition monitor
- Ability to manually override set controls through touch screen for special cases
- Ability to monitor remotely at central surgical control desk

Cleveland Clinic welcomes visitors from the Cleveland area and around the world. Our 'Red Coats' can be found across our hospital campuses to help visitors and patients with directions and any other information they may need.

In 2014, our facilities engineers recognized that recently constructed ORs possessed the untapped potential to be far more efficient without compromising occupant safety if variable-air volume features and digital controls could be integrated with advanced air quality and occupancy sensors driving smarter control logic. The end goal of this concept is to reduce the ACH when conditions permit, on a space-by-space basis. This concept was pilot-tested in one of our buildings' OR renovation projects, an integrated set of OR design criteria and performance standards.

Concurrent with OR setbacks, the benefit of following temperature guidelines has been discussed with physicians and more clearly understood. The monitoring system controlling OR setbacks also gives better visibility and control of prescribed temperature ranges.

## Custom Interactive OR Suite Dashboard



### Time schedule

OR setbacks will be automatically tied to the surgical schedule. This is achieved by linking setbacks to the OR scheduling system, "OpTime." ORs will be programmed to be set back once the schedule is completed and designed to return to normal /surgical operation mode 30 minutes prior to the initiation of the daily schedule. To ensure the cases that run longer than expected achieve proper operating conditions, a safety feature has been embedded into the surgical light. The fail-safe feature ensures that setbacks are not activated if the surgical light is still on.

### Adaptive comfort

To respond to these user differences, the control options may vary for ORs in the same facility. For instance, one OR may be kept in "ready" mode (i.e., in occupied mode), even though there is no code requirement to do so. Clinical and facility staff are working together to decide which control solution meets the surgical team's needs while still saving energy.

Enterprise implementation is slated for 2015.

# Waste Reduction

Cleveland Clinic is committed to reducing waste across our healthcare system. By engaging our caregivers to minimize the waste we send to our landfills, we are protecting the environment, reducing costs and improving land, air and water quality in our communities.

In 2014, Cleveland Clinic made significant progress in a number of areas that advanced our system in responsible waste management.

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## Purple Bag Expansion

In 2014, we completed a system-wide expansion of our clinical plastics recycling program that was created by Cleveland Clinic in partnership with Buckeye Industries and our waste vendor. In 2014, we diverted 92 tons of clinical plastics from landfill via this innovative partnership, as well as created 31 jobs for community members with developmental disabilities.

See our 2014 UNGC Report for a detailed program summary.

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## Single Stream Paper Shredding and Recycling

We offer a single stream paper shredding/recycling program to our facilities to further protect the personal information of our patients and to simplify the collection process for our employees. All paper, regardless of the sensitivity of the document is collected in our secured shredding containers. When this program became operational in 2010 we observed an increase on the order of 44% in the amount of paper captured in our secure shredding bins. Not only does this program improve our HIPAA compliance as we shred all paper, simplify the collection process for our employees, but it also reduces cost as we have leveraged the value of our paper waste commodity to negotiate lower service rates. This program is now among our lowest cost methods of recycling or disposal. In 2014, we recycled over 3000 tons of paper and installed inserts and placed notification labels on our secure paper shredding consoles at our regional hospitals to comply with Life Safety Code requirements.

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## Single-Use Device Reprocessing

When clinical instruments were unused but removed from their packaging pre-surgery in our ORs, these items were incinerated or treated as regulated medical waste. In 2011, we adopted a single-use device program where these devices are recycled and remade through an in-depth and strictly regulated process. The reprocessed items are then sold at a lower cost to healthcare providers. The reprocessed equipment is subject to greater regulations than when it was originally created, ensuring the safety of our patients and caregivers.

In November 2014, Cleveland Clinic began the conversion process between vendors for our Suture and EndoMechanical staplers. At our main campus we historically purchase around 875 powered staplers annually, but the transition provides the sustainability opportunity to reuse the handle up to 50 times. This will cut down our waste of these large handles from 876 units to almost 18 units – a reduction of nearly 98%! This will significantly reduce OR waste and Red bag waste.



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## Managing Hazardous and Regulated Wastes

Hazardous materials such as sterilization and water treatment chemicals, pharmaceuticals, cleaning products, electronic wastes, laboratory chemicals, and radiological films and wastes are an important part of the healthcare delivery model. Proper management of these materials is critical to protecting the health of our caregivers and the community at large. As part of our chemical disposal program, our pharmaceutical waste program was recently expanded to capture all pharmaceutical waste for responsible disposal thus preventing contamination of the environment. In addition, medical waste generated during the treatment of patients is regulated to protect public health. All hazardous and regulated waste generated at Cleveland Clinic is treated appropriately and disposed of domestically. Learn more about Environmental Health and safety.

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## At the Dock: Optimizing Capacity Utilization of Waste Containers

Conventional pricing from the waste industry for municipal solid waste is based on a haul charge to pick up a container and a variable per ton disposal fee to landfill the collected material. We can reduce the cost of service by ensuring our containers are full when they are picked up. We track the amount of material we send out in each load to ensure we set an appropriate service schedule to minimize the number of haul charges incurred.

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## Waste Segregation: A Cost Reduction Strategy

We track the average total cost per ton to dispose of a given material type to convey the importance of proper waste segregation. Regulated medical waste (RMW), due to the special treatment steps, whether they are performed on-site or downstream, requires proper disposal making it among the most costly waste stream – second only to hazardous waste. While we take great care to make sure that all appropriate medical waste is disposed of properly, inevitably there is a significant amount of waste that ends up in biohazard bags that is not contaminated and should not be treated as such.

In 2014, Matthew Davis, MD, and Ken Lee, a Memorial Fellow, conducted a 10-day blinded audit of OR RMW waste container utilization. Findings indicated an opportunity to improve RMW container optimization, as between 50-70% of supposed RMW waste was, in actuality, regular waste. After right-sizing containers in OR suites, a second blinded audit was conducted to the hypothesis that incorrect waste disposal was largely due to lack of proactivity towards correct waste segregation.

Dr. Davis will seek to publish his findings in a peer-reviewed journal, with the intent to inform on caregiver engagement and sustainability in healthcare. His findings will inform a broad internal re-education campaign targeting use and composition of RMW in 2015.

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## Leveraging the Commodity Value

We are always working to ensure that we realize a portion of the economic value of the material waste that we generate that has recycle, reprocess, or reuse value. The impact of this strategy can take the form of reduced service charges or even revenue streams to the organization. Our secure shredding paper recycling program is one good working example of this strategy.

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## Source Reduction

The disposal fate of a product is determined at the point of purchase; we recognize the value of considering product attributes, such as end of life disposal, reusability and the ability to be reprocessed. We have found some success in integrating waste considerations into our sourcing activity.

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## Active program measurement and management

We monitor and measure all of our waste streams in a comprehensive manner. This practice is the fundamental reason we have the visibility and management capability to track the key indicators and implement the strategies described above.

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## Going Green By Using Blue

The Wound, Ostomy, Continence Nursing Department is made of committed and compassionate caregivers. The WOC team engaged Cleveland Clinic's Office for a Healthy Environment around methods to right size their recycling containers and adjust service frequencies to better fit their needs. The team's sustainability motto: "Going green by using blue", referring to their commitment to recycling efficiently.



# Healthy Buildings

Cleveland Clinic was founded by four physicians in 1921. Since then, the healthcare system has expanded to include more than 42,523 caregivers and more than 20 million square feet. As we continue to expand, the fundamental values of our founders can be seen by the quality, innovation, teamwork, service, integrity and compassion with which we grow.

Cleveland Clinic's mission is to be the world's leader in patient experience, access, clinical outcomes, research and education. Our buildings support this mission by addressing the intrinsic link between a person's health and their environment. In this sense, their environment includes the air they breathe and the water they drink, their behaviors including exercise and nutrition, and their values including their choice of healthcare system. Our buildings must support the health of our caregivers, patients and communities. To date, we have achieved 15 LEED certified buildings – 8 silver and 4 gold. In 2014, we continued to grow and set new standards for our buildings and development.

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## Brunswick Emergency Department

Cleveland Clinic expanded our Brunswick Family Health Center that went operational in July of 2014. The project followed the LEED-NC 2009 standard and has applied to receive certification from the U.S. Green Building Council. The facility earned this designation because of its environmentally responsible design and efficient operating systems.

LEED (Leadership in Energy and Environmental Design) is a third-party certification program and the nationally accepted benchmark for the design, construction and operation of high-performance green buildings. High-performance buildings conserve energy and water, save money, reduce greenhouse gas emissions and contribute to a healthier environment for residents, workers and the larger community.

"This demonstrates our continuing commitment to designing and building safe, efficient buildings using the U.S. Green Building Council's LEED system and evidence-based design. This results in healthier and safer environments in which employees can work and patients can heal," said Jon Utech, Senior Director, for Cleveland Clinic's Office for a Healthy Environment.



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## WELL Building Standard

Case Western Reserve University and Cleveland Clinic are expanding their health education collaboration to include dental and nursing students on the campus already planned for the institutions' medical students.

The world-renowned architecture firm Foster + Partners designed the 485,000-square-foot Health Education Campus (HEC) to stand on the same 11-acre parcel originally designated for the medical education building. Slated for 2019 completion, the HEC will be located on East 93rd Street between Euclid and Chester Avenues, it will include even more of the cutting-edge technology and innovative learning spaces previously planned for medical education.

“Studies show that team-based health care improves patients’ experiences and results, lowers costs, and increases the job satisfaction of those involved in care,” Case Western Reserve President Barbara R. Snyder said. “Yet most of our education programs still separate the professions throughout students’ academic careers. This project allows us to bring these future health care leaders together from the very start, and to do so in a thoughtful and intentional way.”

The soaring, state-of-the-art space is expressly designed to encourage interaction among all students – not only in classrooms, but in dining and study areas as well. The goal is for students to graduate with a deeper understanding of how these caregivers complement one another’s work, as well as appreciation for the unique roles each plays in enhanced outcomes for patients. “Healthcare is in the midst of an unprecedented transformation and is changing how we deliver care to patients and how we get reimbursed for services. The focus is now on quality and outcomes for patients, while moving away from fee for services,” said Cleveland Clinic President and CEO Toby Cosgrove, M.D. “This requires a team of providers – with a variety of expertise and experience – working together to care for patients and why an integrated medical education program is not just important, but essential.”

The four-story building’s academic spaces and offices will wrap around an airy atrium where students, faculty and staff can gather for meals and conversation. All of the furniture in the space is movable so the atrium can host large events such as lectures, convocations, and banquets. The structure is designed to be as energy efficient and environmentally friendly as possible. At minimum, the building will meet LEED Silver environmental building standards. Local architects Westlake Reed Leskosky also are involved with the project. Going beyond LEED, the building is also pursuing the WELL Building Standard, a new green building approach focused on how the built environment directly impacts human health.



Case Western Reserve’s dental medicine and nursing programs together enroll just over 1,500 students, while the medical school’s M.D. tracks total nearly 1,000. The Cleveland Clinic Lerner College of Medicine track enrolls 160 of these students, with the remainder in the university’s M.D. and M.D.-Ph.D. tracks. The medical school also plans to add a physician’s assistant program that will grow to enroll 100 students, all of whom also would learn on the new campus.

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## Initiation of Cancer Center

In August 2014, Cleveland Clinic announced plans to build a new \$276 million multidisciplinary cancer building that will unite all treatment care teams on our main campus in one central facility and accelerate one of the most

robust cancer research enterprises in the country. The new seven-story facility, which will be located north of Carnegie Avenue between East 102nd and East 105th streets (adjacent to the Crile building), is part of Cleveland Clinic's Master Plan, which aims to build a more open and welcoming campus for patients and visitors, as well as stronger collaboration among staff.

The 377,000-square-foot facility has been designed to optimize patient experience and physician collaboration with clinical space focused on multidisciplinary care and conveniently accessible expanded support services. The project will be pursuing LEED certification under the 2009-HC designation, continuing Cleveland Clinic's green building tradition.



Brian Bolwell, MD, Taussig Cancer Institute Chairman, notes that whether patients are treated on main campus or in one of our regional centers, they will benefit from a more integrated, collaborative approach, which is essential to making progress against cancer.

Innovative clinical research to develop new cancer drugs and therapies for patients will remain an integral component of the comprehensive cancer center. The new building will have designated space for expanded Phase I clinical trials, academics and research.

The new space will accommodate projected growth with an emphasis on features specifically for patients, including:

- Maximum use of natural light and outdoor courtyard views to comfort and calm patients receiving treatment
- An additional 19 exam rooms for a total of 126
- An additional 17 private and semi-private chemo infusion rooms for a total of 98
- Expanded patient services in a central location including healing and support services, genetic counseling, social workers, wig boutique, art therapy and complimentary massages, pedicures/manicures, prosthetics services and make-up application
- Spiritual support center
- Leading-edge technology and equipment to fight and treat cancer including Gamma Knife, six Linear Accelerators for radiation treatment with the latest imaging services including an MRI
- Groundbreaking for the Cleveland Clinic cancer building is slated for Sept. 29, with completion projected in early 2017

# Climate Resilience

A healthy planet is essential for human health. Understanding the health impacts and outcomes of global climate change is critical for two reasons:

1. To aid in the design of health systems to serve the emerging need of populations increasingly impacted by environmental trends
2. To initiate the conversation about healthcare's role in adaptation and mitigation of human impact on the environment

Climate change threatens the health of the world's population in a direct way through changes in rainfall distribution, disruptions of ecosystems and the spread of vector diseases. At home in Cleveland, we have faced changes in weather patterns and have felt the impact of super storms, flooding and extreme cold events.

We have an important role to play and our response to these challenges will guide the evolution of our organization in the coming decades. We will continue to lead our sector and explore creative solutions to environmental challenges that benefit our community and support economic health. Our efforts are strategically aligned with those of our community, providing increasing opportunities to collaborate, innovate and form meaningful shared goals.

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## Resilience Strategy Development

Launched in December 2014, Cleveland Clinic worked with the National Institutes of Health (NIH) and the United States Department of Health and Human Services (HHS) to develop a Climate Resilience Toolkit for Healthcare. Bill Peacock, Cleveland Clinic Chief of Operations, represented Cleveland Clinic with other healthcare leaders in a discussion including Secretary Burwell of HHS and John Podesta from the White House. We signed up for President Obama's Climate Action Plan to implement these tools and lead the sector in preparing for the health challenges presented by climate change. [Click here to read more from the Council on Environmental Quality.](#)

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## Resilience Strategy Implementation

Cleveland Clinic is taking climate planning to heart. We've conducted system and region-wide emergency preparedness exercises around weather related crises. We're reducing our overall energy needs and strengthening our facilities' ability to withstand extreme weather. And we're leading efforts around broader community resilience through planning, training, and supporting local workforce development.

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## Education and Outreach

Education and outreach contribute to increased awareness and opportunities for early recognition of cause and effects, mitigation and innovation. At the heart of education and collaboration is communication where conversations about the personalized side of climate change and healthcare are being discussed.



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## Resilience Strategy Implementation

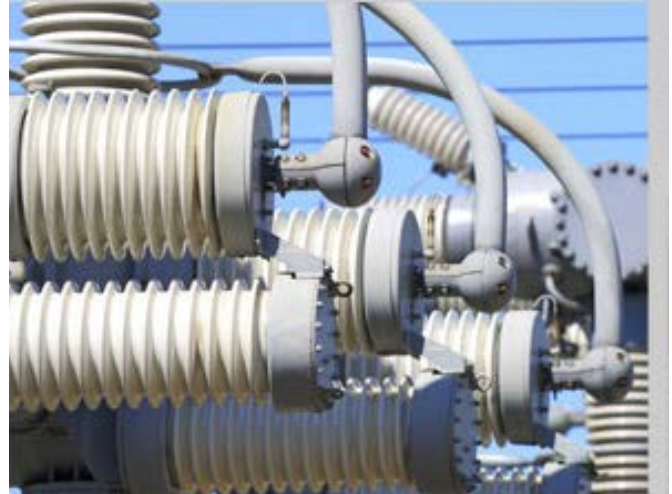
Healthcare's response to climate change is merely a continuation of medicine's great tradition as a leader and innovator to the needs of patient populations. We are positioned as protectors of the health and well-being of both people and the planet, including future generations. The role of healthcare as a first responder challenges us to align our actions with those values, and provides an opportunity to influence the choices of mitigation and adaptation approaches we collectively make.

### Ring Bus

**Program Description:** Cleveland Clinic main campus runs on two electrical substations—both running near capacity with dated assets. Cleveland Clinic has developed a program to provide a reliable and efficient electric-utility source throughout our facilities to better serve our patients, visitors and caregivers.

**Our Commitment:** Cleveland Clinic, in conjunction with First Energy, is building a new power-distribution system called the Ring Bus.

**Our Progress:** First Energy's conduit and conductors will support four Cleveland Clinic-owned substations. Cleveland Clinic is building the four substations, each housing our transformers and electrical distribution equipment. Over a period of time, Cleveland Clinic is transitioning all existing buildings to the new Ring Bus substations. The Ring Bus project ultimately delivers a more reliable electric supply, with a greater capacity to support Cleveland Clinic's needs into the future.



### Impact-Resistant Window Films

Florida has more than a thousand miles of coastline making it one of the most vulnerable states to the impacts of climate change due to rising sea-levels and the increased frequency and strength of hurricanes. At Cleveland Clinic Florida in Weston, Florida, we installed missile-resistant window films to protect our patients and caregivers from the potential impacts of future hurricanes. A Category 5 hurricane can have wind speeds exceeding 175mph and if a palm tree is moving at that fast the damage of its potential impact would resemble that of a small missile. It starts with anticipating the unexpected. Climate change has created a new norm of heightened public health risk, and healthcare needs to adapt to meet that challenge

### Energy Demand Reduction

Cleveland Clinic is vigilant in our focus on readiness for extreme events as we begin to forecast the implications for our region and for our neighbors. More extreme heat, worsening air quality, drought, the rising incidence of infectious disease, harmful algal blooms, and extreme rainfall and flooding are a few examples of climate events that can affect the health of members of our community.

### Healthy Communities

Cleveland Clinic is committed to serving our communities by providing health and wellness leadership, medical research, education and resources. By providing quality health screenings, education programs such as our



Healthy Communities Initiative, and project-driven human resources, Cleveland Clinic helps individuals and neighbors to make positive choices impacting short and long-term health and wellness.

### **Emergency Preparedness**

At a regional level, we take emergency preparedness seriously. Cleveland Clinic leads rigorous and extensive emergency management exercises to train and prepare for and respond to crises, including weather-related events like tornadoes and extreme cold events, as well as potential outbreaks such as Ebola. During these exercises, more than 500 caregivers and participants share their experiences and help develop best practices for the organization.

### **Building Standards**

Cleveland Clinic has also been focusing on setting new standards in building resiliency. At our main campus, we are investing in our energy infrastructure to optimize power redundancy and maximize energy grid availability for our campus. At our hospital campus in Weston, Florida, our last three construction projects have included enhancements to make our facilities more resilient to hurricanes and flooding.

### **New Construction**

As a healthcare system, we are committed to improving the health of our community through responsible, efficient and judicious use of our resources. Sustainability has been a top priority of our new construction projects. Since 2007, all of Cleveland Clinic's construction projects have been LEED certified. We have built 11 LEED certified buildings and completed an additional 4 LEED certified projects, in both clinical and administrative spaces. Through ENERGY STAR and the Better Buildings Challenge, we have committed to 20% enterprise-wide reduction in our energy usage by the year 2020. And we are on track, having achieved a 8% reduction in energy intensity since the end of 2012.

### **Continuous Improvement**

But most importantly, our energy efficiency efforts improve our ability to deliver world-class care to our patients, regardless of extreme climate events. Energy intensity reduction efforts allow us to extend our capacity for operations during extreme climate or energy emergencies. These efforts include standardizing on 100% LED lighting and water reduction initiatives. We are also maximizing our internal commitment and engagement in these efforts through "greening" clinical and support spaces including our ORs, labs, and kitchens.

### **Carbon Footprint**

Cleveland Clinic's 2014 Carbon Footprint totaled 460,706 Metric Tons of CO<sub>2</sub>e.

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## Education and Outreach

Cleveland Clinic views the road to transformation as an exciting one. We have made significant progress, but we are still in the very early stages of truly making healthcare sustainable and maximizing patient health and environmental stewardship. Education and outreach contribute to increased awareness and opportunities for early recognition of cause and effects, mitigation and innovation. At the heart of education and collaboration is communication where conversations about the personalized side of climate change and healthcare are being discussed.

## EPA Administrator McCarthy Visit

Speaking with physicians, senior leadership, and community members at Cleveland Clinic, Gina McCarthy, Administrator of the U.S. Environmental Protection Agency, made a connection between natural disasters, carbon emissions and climate change and spoke of the urgency for action. “In 2012, the US government spent \$120 billion on disaster response. That’s from floods; that’s from droughts; that’s from Hurricane Sandy. These are challenges that impact directly people’s lives, their well-being, as well as regional economies, so these are significant. But we also have climate change basically exacerbating issues like ozone because it raises temperature which is part of a factor that contributes to the formation of ozone,” she said.



The landmark regulations publicly unveiled in June 2014 are central to President Obama’s climate-change agenda. They will tighten carbon limits for existing power plants and outline requirements that states must implement to limit greenhouse gases. McCarthy says the new carbon limits will reduce air pollution overall and help bring down the number of illnesses associated with it.

## Lung Health Day

In June 2014, Cleveland Clinic hosted Lung Health Day, a community event at our main campus organized to promote the importance of maintaining lung health. The event included free screenings, lung function tests, education sessions and engagement activities for children.

Cleveland Clinic is aware we consume a significant amount of coal-generated energy in the delivery of patient care due to Northeast Ohio’s energy mix. Areas of Northeast Ohio are designated by the U.S. EPA as nonattainment areas for ozone and fine particles, airborne pollutants linked to long-term health effects including chronic respiratory disease, heart disease and other adverse conditions. These conditions make Cleveland one of the top 25 most challenging places to live with asthma in the United States.

We are committed to driving down our energy use and educating our communities about the early signs and symptoms of asthma, chronic obstructive pulmonary disease (COPD) and other lung diseases.

## Healthy Transportation

Fleet vehicle transportation and caregiver commuting are significant sources of Cleveland Clinic fuel use and emissions footprint. Each of these areas presents opportunities for Cleveland Clinic to promote healthy transportation alternatives, contribute to local public transportation infrastructure in our communities and reduce our environmental impacts.

Cleveland Clinic has a fleet of 290 vehicles that are used by 85 departments across the system. In late 2013, the Cleveland Clinic fleet added five electric vehicles, four to the Police Department on Cleveland Clinic main campus and one to Euclid Protective Services Department. An additional eleven hybrid cars were purchased for the Robert J. Tomisch Pathology & Laboratory Medicine Institute to replace larger, older and less fuel efficient vehicles. In 2014, one additional hybrid vehicle was purchased for the fleet. As a healthy and environmentally friendly alternative to traditional motor vehicles, Protective Services on our main campus employs the use of eight bicycles and one Segway® during warm weather seasons. Additionally, Parking Services use global electric

motor or GEM cars for parking garage maintenance to reduce fuel use and greenhouse gas emissions.

Cleveland Clinic employees 42,523 caregivers, most of whom commute to work every day. This creates a significant source of fuel consumption and greenhouse gas emissions. Parking Services, the Office for a Healthy Environment and local authorities have developed the following programs for our caregivers nationally, in Northeast Ohio and commuting to Cleveland Clinic main campus as indicated.

- Employee Carpool Program: a carpooling program for caregivers facilitated through online connections.
- RTA Advantage Program: pre-tax price for public bus and rapid transit system passes and reduced single day parking fees
- Bicycling: indoor bike racks and showers on main campus
- Low Emitting and Fuel Efficient Vehicle Parking Discount Program: anyone driving a vehicle with a LEED score above 40 qualifies for a 20% discount on parking
- Vehicle Rebate: for qualifying vehicles, all caregivers nationally are eligible for a \$1,000 or \$500 rebate on the purchase of hybrid or fuel-efficient vehicles
- New Home Subsidy: new homes purchased within walking distance to our main campus may qualify for a subsidy
- Across the healthcare system, Cleveland Clinic has a no idling policy for parked cars, which also reduces emissions.

### **CARES Symposium**

Program Description: The CARES model (Customer Experience, Available Parking, Responsible Finance, Engaged Employees and Sustainable Business) was enhanced by the Balanced Scorecard designed by Cleveland Clinic Caregivers. The Balanced Scorecard is a performance management tool using a series of business reviews to create a continuous improvement cycle.

Our Commitment: Cleveland Clinic is committed to using the Balanced Scorecard for continuous improvements in all aspects of patient care. Parking Services has adopted the use of this scorecard to identify best practices.

Our Progress: In 2014, 50 attendees from 23 different organizations including UPMC, Texas Medical Center, Hersey Medical Center, University of Rochester, and Oregon Health & Science University participated.

### **MM Charging Station**

Cleveland Clinic has three total electric vehicle (EV) charging stations at our Main Campus: two in MM (Employee) Garage, and one in JJ (Mixed Use) Garage. Parking Services installed the EV stations in order to meet the demand of employees using electric vehicles on campus. This solution provides on average four employees or visitors a day with electricity for their vehicle. Electric vehicle charging continues to provide fuel efficiencies for our users as well.

### **Bike Rack Installation**

Bike rack installation was performed by local company Metro Metal Works. The racks were installed to comply with the City of Cleveland ordinance regarding bicycle parking. The racks were installed in concentrated areas to provide the most proximate parking, as well as provide different levels of coverage and security. A bicycle repair station was also installed at one location for convenience.

# Innovative Leadership

As Cleveland Clinic caregivers, we cannot increase the health of our patients and the environment on our own. As a leader in healthcare, we have the opportunity to educate our staff, patients and communities on how to increase human health and prepare for the future.

Cleveland Clinic's leadership at multiple levels, from global to local, has made us a veritable leader in sustainable healthcare. We work in collaboration with governments, non-governmental organizations (NGOs) and communities to support strategies for mitigation and adaptation. We engage with these groups and provide leadership in both thought and practice.

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## Global Leadership

This report, "Serving Our Present, Caring for Our Future," is a unique hybrid report that describes how our health system addresses labor, human rights and environmental issues in rich detail. It includes key successes and challenges and transparently reports our progress in a manner that forms a key pillar of our best practice sharing. This endeavor requires a significant investment of time and resources. We are pleased to see others begin to adopt this model of reporting.

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## Sector Leadership

Cross-sector collaboration provides hospitals and healthcare systems an accessible way to improve the health of patients, workers and communities, and yield savings that support the delivery of quality care. By leveraging the influence and visibility of the health care sector, positive changes are timely and meaningful and reach beyond our industry.

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## Federal Engagement

Cleveland Clinic's Office for a Healthy Environment, in close coordination with our government relations team, advocated for change that examines and supports the interdependency of human and environmental health. Our clinicians and our senior leadership are working to ensure we are equipped to handle the health challenges presented by a changing climate.

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## State Leadership

Cleveland Clinic is a member of the Ohio Hospital Association (OHA). The Ohio Hospital Association is committed to collaborating with its hospital and health system members as well as other professional and community organizations on a wide variety of programs and initiatives. OHA's Energy and Sustainability Program

assists hospitals with energy conservation projects, operating both a natural gas program and an electricity program.

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## Local Leadership

In 2019, our region will recognize the 50th anniversary of Cleveland's burning river, in recognition of the incredible progress that we have and will have made in such a short timeframe. Our internal goals will also be shaped by the desire to accelerate progress as we approach this landmark date. As a result, our program will increasingly be engaged in civic dialogue and innovation.

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## Enterprise Leadership

Cleveland Clinic embraces creating a culture of sustainability through major programs and everyday interactions with our caregivers and messages the value of and our sustainability commitments to sustainability to our patients and visitors.

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## Sector Leadership

The health profession is the natural choice to advocate for mitigating environmental impact because protecting human health is its core professional obligation. Every day, health professionals help their patients see the connection between how they live and their personal health. In the same way, there are tremendous health co-benefits for making the connection between a low carbon, low toxic, low material consumption lifestyle and public health.

### Practice Greenhealth (PGH)

Cleveland Clinic is a member of Practice Greenhealth, the nation's leading health care community that empowers its members to increase their efficiencies and environmental stewardship while improving patient safety and care through tools, best practices and knowledge.



Our PGH membership represents a pillar of information-sharing. Through this annual awards process we share information, best practices and innovations. We are active contributors, thought partners and users of this system. As a benefit of our membership, all Cleveland Clinic employees are entitled to Practice Greenhealth's tools and resources, including a robust webinar series that are available live or via online archive.

### Healthier Hospitals Initiative (HHI)

The Healthier Hospitals Initiative (HHI) is a national campaign to lead change across the healthcare sector by embedding sustainability into the culture and daily operations. With HHI, hospitals use their collective sustainability experience, purchasing power and industry representation to speed the process of greening the health care sector. It is an invitation for healthcare organizations across the country to join the shift to a more sustainable business model, and a



challenge for them to address the health and environmental impacts of their industry.

By creating a collaborative setting which engages all stakeholder groups and gives each individual player the tools they need to succeed, HHI has created a platform to help healthcare organizations affect widespread, meaningful change.

We participate in the Energy and Recycling Challenges and share detailed metrics with HHI. We benchmark our progress against other hospitals regionally and nationally to improve patient outcomes and workplace safety, prevent illness, create environmental benefits and see significant cost savings.

## CleanMed 2014

CleanMed is the nation's premier sustainability conference for the healthcare sector. In 2014, CleanMed was held at the groundbreaking Global Center for Health Innovation, which provides a space for education and innovation in healthcare in a silver LEED facility. The organization has a long history of support from the companies and organizations that provide the essential, preferable products that influential leaders in sustainability require.



In 2014, CleanMed was held on June 2-5 in Cleveland, which offered an ideal opportunity to design a program to pull Ohio hospitals into HHI, showcase exemplary Ohio hospitals, and advance a climate and health advocacy agenda at the conference. CleanMed had nearly 1,000 attendees, with over 200 of those representing Ohio.

One of the CleanMed plenary sessions was used to highlight the sustainability and “anchor institution” work of the Cleveland hospitals. The Chief of Operations of the Cleveland Clinic, Bill Peacock, participated in this panel discussion and outlined the exciting results that their sustainability, energy work, and local procurement practices had on the health of the community.

The national CleanMed conference (full agenda can be found [here](#)) was also an opportunity to share best practices with other hospitals. Some examples of the sessions included

- Health Care Resilience in a Changing Climate (included Cleveland Clinic)
- Toward a Greener Operating Room: The Cleveland Clinic Experience
- First Responder: Health Care Leadership for a Sustainable World (Cleveland Clinic)

Thanks to the conference's close proximity to many of our facilities, we welcomed more than 50 Cleveland Clinic caregivers to the conference.

## Greening Committees

We are able expand our reach through specific service lines and work spaces by adopting initiatives within our health system. The physician-led, cross-functional, enterprise-wide initiatives apply actionable recommendations based on proven strategies and develop communication tools to help further the effort.

In 2014, key enterprise initiatives included Greening the OR®, Greening the Labs, and Greening the Supply Chain. Our Greening the OR® efforts matured and expanded in 2014. Our engagement in the myriad issues that an OR environment presents enjoys both depth and breadth amongst multiple stakeholder groups. Highlights include:

- Engagement of Clinical leadership
- Complete regional expansion of clinical plastics recycling
- Building energy into OR construction standards



- Embedding sustainability into Surgical Operations administration
- Legacy fellowship with dedicated support for resident education and environmental program research
- Promoting Greening OR efforts externally, including panel presentation at CleanMed 2014.

Greening the Labs focused on waste container optimization, laboratory plastics recycling program expansion and education and outreach through formal and informal methods. In mid-2014, the initiative expanded to include activities within the Lerner Research Institute.

Greening the Supply Chain efforts focused on implementation of a Strategic Sourcing Table to provide sourcing leadership to all purchasing decisions. Key priorities include packaging and end of life disposal.

## Federal Engagement

As leaders in the healthcare industry, Cleveland Clinic's Office for a Healthy Environment, in close coordination with our government relations team, advocated for change that examines and supports the interdependency of human and environmental health. Our clinicians and our senior leadership are working to ensure we are equipped to handle the health challenges presented by a changing climate.

### HHS Guidance Document

Launched in December 2014, Cleveland Clinic worked with the National Institutes of Health (NIH) and the United States Department of Health and Human Services (HHS) to develop a Climate Resilience Toolkit for Healthcare.

### EPA

Speaking with physicians, senior leadership, and community members at Cleveland Clinic, Gina McCarthy, Administrator of the U.S. Environmental Protection Agency, made a connection between natural disasters, carbon emissions and climate change and spoke of the urgency for action.

### ENERGY STAR Partner

ENERGY STAR is the Environmental Protection Agency's voluntary program to help businesses, organizations and individuals save money and protect the climate through better energy efficiency.



Cleveland Clinic has committed to partnering with ENERGY STAR. We track and benchmark utility use across our portfolio using ENERGY STAR's Portfolio Manager, a free software program available for tracking energy usage and cost. All facility managers have access to ENERGY STAR Portfolio Manager where they are encouraged to review the building characteristics and details, along with monthly energy use. They have access to a specialized Cleveland Clinic EUI Template in the reporting feature that allows them to easily track their performance since 2010.

We have continued to reduce our energy use index and make progress towards our goal of 20% energy reduction between 2010 and 2020.

When possible, Cleveland Clinic purchases ENERGY STAR certified products, those that are more energy efficient than the competition. In 2014, we purchased ENERGY STAR certified computers, vending machines and lighting products.



## Department of Energy (DOE) Better Buildings Challenge

Cleveland Clinic participates in the DOE's Better Buildings Challenge as a Corporate Partner. Results are shared publically every six months and Cleveland Clinic hospitals and entire healthcare system are benchmarked against other like-facilities. Leading up to each six month benchmark, data is tracked and reviewed internally by our Office for a Healthy Environment and Buildings and Properties Departments, along with our facility managers and CBRE, our real estate management company. Our Better Building Challenge commitment ensures that we make transparent progress towards our 20% reduction goal and allows us to learn what other healthcare systems and other industries are doing within this construct.

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## State Leadership

Cleveland Clinic is a member of the Ohio Hospital Association (OHA) and participates in its Environmental Leadership Council (ELC). OHA assists hospitals with all energy-related matters, including advocacy, ENERGY STAR benchmarking, energy audits, recognition and energy procurement. See more at: <http://www.ohiohospitals.org/energy-and-sustainability#sthash.9xFUYIPK.dpuf>.

### Ohio Hospital Association (OHA)

We present our programs and share our experiences at OHA's biannual ELC meetings. Cleveland Clinic also works with Ohio Hospital Association to benchmark hospitals and medical buildings and offices, as well as to participate in the OHA Energy Cup challenge to reduce annual energy usage.



### Energy Program

OHA's Energy Program has been active before the Public Utilities Commission of Ohio (PUCO) on behalf of hospitals since the 1990s, saving hospitals millions of dollars, working to connect them with financial incentives offered by utilities and government for the completion of energy efficiency projects. OHA offers participating hospitals access to the energy utilization database, enabling them to benchmark their energy efficiency and qualify for an ENERGY STAR rating.

OHA offers a variety of educational programs and opportunities throughout the year designed specifically for the health care community. OHA offers webinars, teleconferences, and seminars. - See more at: <http://ohiohospitals.org/Member-Services/Education-Events.aspx#sthash.CUxoLV36.dpuf>

The evolution of Ohio S.B. 310/58 provided an opportunity for Ohio hospitals to participate in policy discussions and how this relates to health care's overall mission. The Cleveland Clinic was able to contribute through a Letter to the Editor on the Plain Dealer website co-authored by Dr. Aparna Bole, University Hospitals, and Dr. Sumita Khatri, Cleveland Clinic.

### CleanMed 2014: OHA Energy and Sustainability Pre-Conference

Partnering with Healthier Hospitals Initiative and Ohio Hospital Association, Cleveland Clinic provided support for a pre-conference educational day which included Clark Reed, National Program Manager at the US EPA, as the keynote speaker, other hospital speakers on efficiencies and increasing resilience, and a tour at the GE Lighting Institute to learn about the latest lighting innovations. With 84 registrants and over 60 in attendance, we were able to reach a large hospital audience about energy management practices in their hospitals. Following

this conference and CleanMed, we had a large increase in HHI enrollment and an increase in engagement as demonstrated by numerous hospital requests to connect regionally to their colleagues.

### **Rebate Program**

Participation in utility rebate programs reduces demand for electricity, which results in the creation of energy efficiency resource credits. Through participation in these programs, customers agree to allow your utility to take ownership of and sell these credits to reduce the costs charged to customers to administer energy efficiency programs.

FirstEnergy's Ohio utilities have amended their energy efficiency plan to reduce customers' costs while aligning with the state's recent action to freeze and evaluate energy efficiency mandates over a two-year period. As part of the amended plan, a number of energy efficiency programs were suspended on December 31, 2014. In 2014, Cleveland Clinic was awarded energy efficiency rebates for our PC power management software implementation.

Cleveland Clinic was awarded \$252,000 in rebates for committing energy efficiency and peak demand reduction projects to FirstEnergy's energy efficiency compliance program.

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## **Local Leadership**

In 2019, our region will recognize the 50th anniversary of Cleveland's burning river, in recognition of the incredible progress that we have and will have made in such a short timeframe. Our internal goals will also be shaped by the desire to accelerate progress as we approach this landmark date. As a result, our program will increasingly be engaged in civic dialogue and innovation.

### **Sustainable Cleveland 2019 (SC2019)**

Cleveland Clinic's Office for a Healthy Environment helped shape the City of Cleveland's goal to reduce greenhouse gas (GHG) emissions by 80% from 2010 to 2050 and helped to develop the 33 actions outlined in the Community Action Plan to achieve this goal

### **Greater University Circle Initiative (GUCI)**

In 2005, Cleveland Clinic joined a collaborative redevelopment initiative with other anchor institutions in and around the Greater University Circle district to rebuild our neighborhoods and improve the economic opportunities of the residents who live there.

### **Economic Inclusion Management Committee (EIMC)**

The EIMC was created in 2011 to expand the scope and leadership of the GUCI. It is comprised of representatives from GUCI organizations and is a hands-on committee that makes plans and solves problems as they arise. Neighborhood Connections, a small grassroots community building program created by the Cleveland Foundation, plays an important role in the structure as it is the "connective tissue" providing a channel of communication between Greater University Circle residents and the EIMC.

Two projects are intimately connected to the GUCI are Evergreen Cooperative Initiative and the Health Tech Corridor (HTC). Both of these entities are complex networks that are a part of the Cleveland Model that were initiated as projects under the GUCI but have since evolved into their own organizations.

In 2014, Jon Utech, Sr. Director, Office for a Healthy Environment, was named to the board. Cleveland Clinic

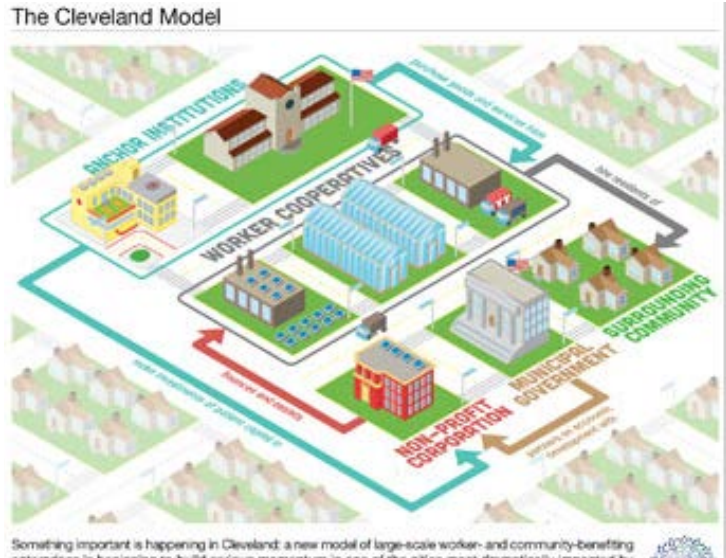
employees Andrea Jacobs, Executive Director of Operations, Pam Holmes, Sr. Director Government & Community Relations and Vickie Johnson, Sr. Director, Government & Community Relations also serve on the board.

## The Cleveland Model

The Democracy Collaborative, in partnership with the Cleveland Foundation, the Ohio Employee Ownership Center, the City of Cleveland, Cleveland Clinic and the city's other major hospitals and universities, is helping to implement a new model of large-scale worker-owned and community-benefiting businesses.

The Cleveland Model brings community economic development and the purchasing power of anchor institutions like hospitals and universities together into a single coordinated strategy to build democratized wealth and cooperative business ownership in low-income neighborhoods.

Other cities nationwide have begun the process of replicating and adapting this innovative approach to economic development, green job creation, and neighborhood stabilization. Find out more about the model [here](#).



## Evergreen Cooperatives

The Evergreen Cooperatives are an integrated network of for-profit, employee-owned, green businesses in Cleveland. The Cooperatives seek to transform lives and neighborhoods by building profitable and sustainable business linked to the supply chains of the city's anchor institutions like the Cleveland Clinic and other locally based customers.

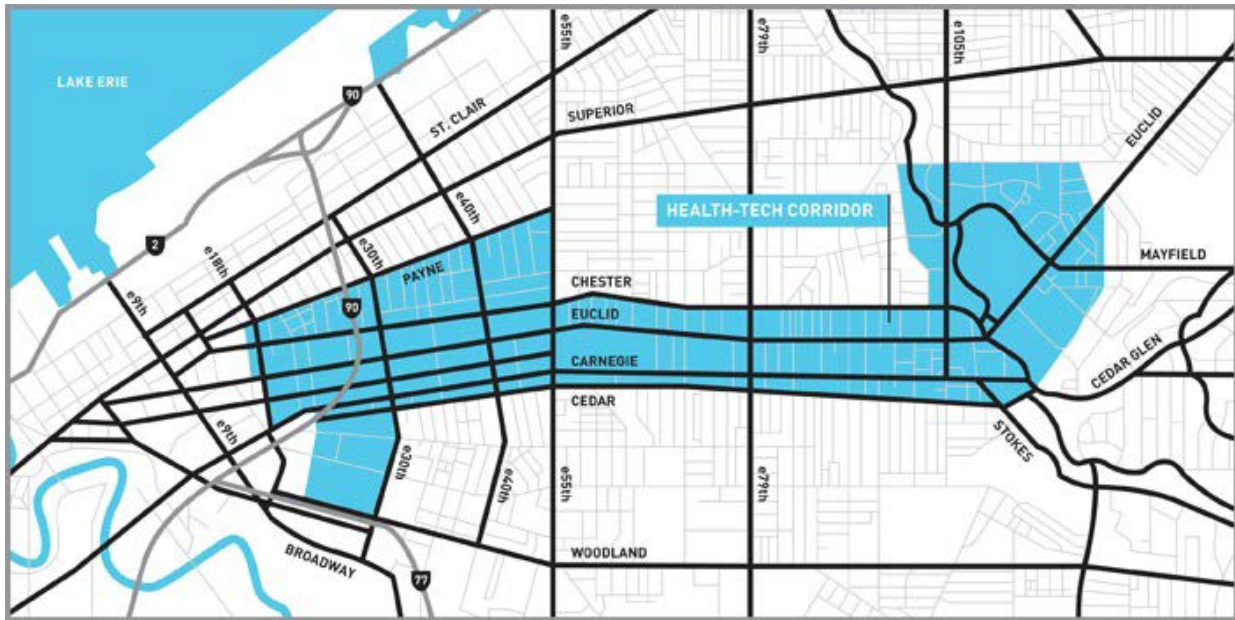
- Green City Growers – Part of the Evergreen Cooperatives, Green City Growers is a 3.25-acre leafy greens, hydroponic greenhouse in the Central neighborhood of Cleveland that supplies Cleveland Clinic with lettuce. [Read More](#).
- Evergreen Cooperative Laundry: Part of the Evergreen Cooperatives, Evergreen Cooperative Laundry provides clients and the local marketplace with laundry service that consistently meets their needs and expectations. [Read More >](#)
- Evergreen Energy Solutions (E2S) – Part of the Evergreen Cooperatives, E2S is a company that designs, installs, and develops PV solar panel arrays for institutional, governmental and commercial markets.

## Health Tech Corridor (HTC)

The HTC covers 1,600 acres, spans three miles, and includes a vibrant concentration of biomedical and technology assets in Cleveland. It is ideal for business attraction and retention and enables us to leverage the RTA's Health Line. Its location is prime for biomedical, healthcare and technology companies who seek to take advantage of close proximity to four world-class healthcare institutions including Cleveland Clinic and University Hospitals, eight business incubators, four academic centers and more than 130 high-tech companies engaged in the business of innovation.

Cleveland Clinic Innovations (CCI) is the commercialization arm of Cleveland Clinic. CCI delivers the critical mass

needed to bring ground-breaking medical innovations to market. Its disciplined, collaborative and multifaceted approach has established CCI as a recognized leader in global leadership in healthcare corporate venturing. Examples include Cleveland Heart Lab and Explorys.



### Global Center for Health Innovation (The “Globe”)

Cleveland Clinic’s space on the second floor of the Global Center for Health Innovation educates visitors on how our physician-led organization serves as a model for 21st century healthcare. Since Cleveland Clinic’s founding in 1921, innovation has played an integral role in how we care for patients. A rotating exhibit features patients and their innovative treatment, cutting-edge medical devices and wellness videos on common healthcare topics. The first clinical area to be explored is heart care, in which Cleveland Clinic has ranked No. 1 for 20 straight years, according to U.S. News and World Report.

The exhibit is self-guided, designed with the conference attendees and general public in mind. Our inviting space encourages collaboration and conversation. It is also a place for programming by Cleveland Clinic experts, who speak with various experts about leading edge health care topics. [Click here to learn more about the Global Center for Health Innovation.](#)

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## Enterprise Leadership

Cleveland Clinic embraces creating a culture of sustainability through major programs and everyday interactions with our caregivers and messages the value of and our sustainability commitments to sustainability to our patients and visitors. Leadership in sustainability is driven through senior leadership, specific functional leadership and regional coordination to system standards.

### The Office for a Healthy Environment (OHE)

OHE is the keeper of best practices and driver of sustainability strategy for the enterprise. We are leaders in thought, word and action as we create a sustainable future for our industry. We use a variety of leadership platforms to broadcast our message to more than 42,523 caregivers. We benchmark energy, waste, water,

engagement, transportation and transparency metrics across the top hospital and healthcare system performers in the U.S. We use this benchmarking tool as a means to guide our own efforts.

### **C-Suite Leadership**

In February 2015, Toby Cosgrove, MD, CEO and President of Cleveland Clinic, highlighted performance on our key metrics of energy and recycling as successes during his annual State of the Clinic address. His high level support is paramount to our ability to make continuous progress towards our goals.

### **Regional Engagement**

Our sustainability scorecard distills key programs and metrics that are pushed out to regional hospitals and family health center CEO/COOs through a regional integration process. Tracking facility performance against peers in the in the health system has been a key motivator.

### **Green Teams**

Green teams drive execution at a local level across the health system. Leadership is distributed to each facility where green teams convene monthly to track execution of key programs. New initiatives are introduced and driven during our monthly system-green team webcast meetings.

### **Initiative-driven Committees**

We have 15 enterprise-level committees in six main focus areas designed to work cross-functionally and enterprise-wide to collaboratively and cost-effectively mitigate the intensity with which our facilities consume resources through the expansion and optimization of existing efforts, identification and pursuit of new opportunities and education of caregivers. Examples include our Greening the OR and Greening the Labs Committees.

### **Facilities**

Our facilities managers drive implementation at a local level across the health system. Facilities Management drives the adoption of energy intensity reduction through a competition rewarding the hospitals, family health centers and administrative facilities that achieve the highest reduction in energy intensity per square foot.

### **Environmental Services (EVS)**

EVS leads by example in redesigning its systems to support recycling and waste stream optimization.

### **Environmentally Preferable Purchasing (EPP)**

As our program matures, our energy intensity declines and recycling rate improves, we see EPP as an area of tremendous potential to impact our health system and impact the local and global economy. Our Supply Chain Management team prioritizes, implements and tracks progress against annual goals. Procurement influences all healthy building and healthy operations strategies, and, as such, is a key player in any successful program. Procurement is, however, incredibly complex, typically enacted contract by contract. This movement will take time to mature and fully implement. In 2014, we implemented two exciting developments:

1. Sustainability requirements embedded in every RFP requiring any winning vendor to adhere to certain standards of responsibility and reporting.
2. A Strategic Sourcing Table reviews every RFP with Sustainability at the table.



# Water Stewardship

While Cleveland's location on Lake Erie – the 12th largest body of fresh water in the world – provides Cleveland with a distinct comparative advantage, the city's reputation has also been blemished by the historic Cuyahoga River fire in 1969 that resulted from excessive levels of pollution caused by heavy manufacturing and industrial contamination.

Freshwater resources represent an invaluable local asset that has shaped Cleveland's identity, both in the way that the city has perceived itself and how it has been recognized outside the region. As stewards of our community's health, we see preservation of our community's natural resources as a vital part of our health mission. Cleveland Clinic is actively protecting our water supply through conservation measures, such as condensate recovery and storm water management.

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## 2015 Year of Clean Water Working Group

The Cleveland Water Alliance is facilitating the 2015 Year of Clean Water Working Group as part of Sustainable Cleveland 2019. This working group launched its activities in 2014 and is elevating the conversation around clean and abundant freshwater as a regional asset, forging collaborations among partners to collectively implement water education and outreach projects, and promoting the multitude of watershed and water-related organizations, programs, and events throughout Northeast Ohio.

Cleveland has the responsibility to protect the 128 trillion gallons of fresh water directly off its shores in order to maintain the city's water supply and ensure that its residents will have clean and readily available water resources for generations to come, but it also has the opportunity to leverage this invaluable asset as a driver of sustainable economic growth and prosperity for the local economy.

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## Utility Bill Management

In Northeast Ohio, the regional water utility has struggled with accurate billing, monitoring and volume data. In 2014, we began utilizing a vendor to centralize the tracking our water use with greater accuracy. After we have established a water use baseline, we will be able to set goals and strategies around our water consumption.

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## Avon Bed Tower

The expansion of Cleveland Clinic's Richard E. Jacobs Family Health Center was planned with great attention and care to the natural environment. The Avon, Ohio site contains extensive areas of wetlands, forests and large amounts of streams. Throughout the project planning process, we coordinated directly with natural resource and regulatory agencies, including U.S. Army Corps of Engineers, Ohio Environmental Protection Agency, U.S. Fish and Wildlife Service, and Ohio Department of Natural Resources, to ensure that the hospital expansion was in compliance with all state and Federal laws in place to protect these important resources.

As the Avon project required impacts to wetlands and streams in order to accommodate the new bed tower and expanded parking, Cleveland Clinic submitted permit applications to U.S. Army Corps of Engineers and Ohio

Environmental Protection Agency in 2014. The permit reviews conducted by the regulatory agencies include analyses of different off-site and on-site alternatives to ensure that the expansion project was avoiding and minimizing impacts to wetlands, streams, and water quality to the maximum extent practicable. Additionally, we had to provide supporting information regarding the need for the project and the benefit it will have for the community.

The permits received from the state and Federal governments authorized impacts to 3.97 acres of wetlands and 671 feet of stream. However, these important resources were not lost forever. As a condition of receiving the permits, Cleveland Clinic was required to

provide replacement wetlands and streams to compensate for the impacts resulting from the project. To mitigate the loss of wetlands on the site in accordance with state and federal rules, we purchased a total of over 9 acres of wetlands from The Nature Conservancy and Ohio Wetlands Foundation, two organizations that work to restore wetlands within Ohio.

These replacement wetlands were restored within the same watershed where the Avon site is located. The Cleveland Clinic relocated the stream that was impacted on the project site into a larger channel that now measures over 1,000 feet long. The new stream channel was built with wide adjacent floodplains and will provide improved habitat and water quality functions when compared to the deeply incised stream previously on the site. Finally, the Clinic also purchased stream restoration credits from The Nature Conservancy to completely replace any functions temporarily lost from the on-site stream relocation.

In addition to providing replacement mitigation, Cleveland Clinic is protecting all of the remaining wetlands and streams on the Avon site by placing a third-party conservation easement on the avoided water resources. This easement will restrict what activities can occur within those portions of the site and will serve to protect these natural areas in perpetuity.

Finally, Cleveland Clinic committed to the extensive use of permeable pavers across the new parking on the property. Permeable pavers are an important green infrastructure technology that helps to protect the water quality of our streams. When rain hits permeable pavers, it is retained for an extended period of time within the deep gravel sub-base, which also serves to filter out contaminants from the storm water before it is released. Permeable pavers provide great benefits when compared to traditional asphalt or concrete pavement. The use of permeable pavers at the Avon site is the largest of its kind within the greater Cleveland area.



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## Water Optimization

We have 28 different controllers on main campus that run the irrigation system. Twenty-three are older Hunter controllers that must be manually adjusted. All are equipped with rain sensors, so they do not operate during a rain. We have five Tucor controllers that can be remotely accessed from a computer. These take care of the MM garage, 89th Street green space, the Crile Mall, the new lab building, the area around the heart center and along the Euclid corridor, the Aillee and JJ building and the Crile Mall east and part of Cole Eye. These are designed



to get information from a weather station located on top of a fence in the 89th street greenspace. The weather station and the Tucor controller have an evapo-transpiration setting which takes the amount of rain fall, wind speed and temperature and uses those amounts to meet a preset need for water.

For example: grass needs one inch of water per week to stay green and grow. Depending on whether the day is hotter or colder than usual and how much rain our area has received, the computer will adjust the time and quantity to only put down another the specific amount of irrigation the grass needs. Each zone of irrigation is also preset based on amount of sun different areas get during a day.

Rainbow Sprinklers and our Grounds Coordinator try to adjust the times and frequency of watering of each controller on a bi-weekly interval. We have already reduced the time of watering around campus due to the cool weather and rainfall. Historically, in September we shut off sections wherever we can.

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## Ongoing Facility Retrofit

We are implementing condensate recovery on our main campus to optimize return. Measure recovery exceeds 85% based on improvements and maintenance performed in 2014. We are retrofitting low flow fixtures on existing faucets and renovating to low-flow faucets and showers in renovations. There is a fitting that goes in-line with the piping that reduces flow rates from 4-6 gallons per minute to 1.5 gallons per minutes.

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## Waterless Hand Scrub

Led by physician champion Matthew Davis, MD, our Greening OR committee promoted water conservation through use of dry scrub (taps off while lathering) in our ORs. With Facilities' assistance to install (hidden) water sub-meters on surgical sinks, Dr. Davis conducted a water audit in late 2013 to establish a baseline practice. He then educated the House Staff Association on the effectiveness of a dry scrub technique, citing the American Journal of Infection Control's publication on the effect of surgical site infections with waterless and traditional hand scrubbing protocols on bacterial growth. In 2014, Dr. Davis audited the sinks again to determine the impact of the education intervention on behavior.

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## Triple Bottle Rinse

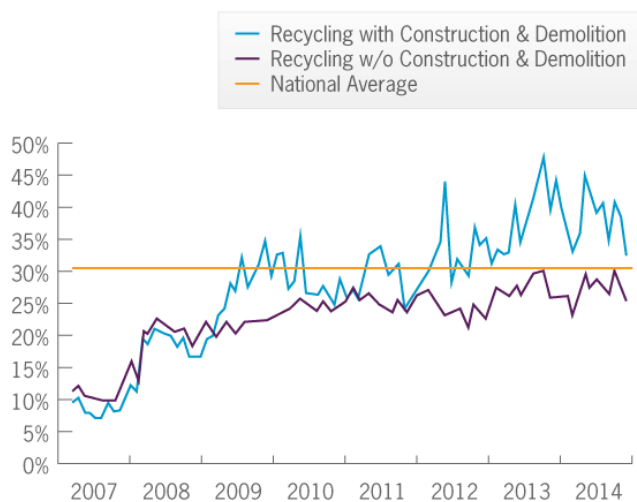
Led by physician champion Ilyssa O. Gordon, MD, PhD, our Greening the Labs initiative implemented an expanded laboratory plastics "purple bag" recycling program in 2014. In anticipation that the rinsing bottles before recycling in unlined blue bins would prompt inquiries about water conservation, water meters were installed pre- and post-implementation to demonstrate the environmental impact of the intervention.

# Environmental Performance

Our leadership understands that what gets tracked gets managed. Improved transparency and accountability are goals for the next phase of our work. Communicating our goals, opportunities and successes internally and with our stakeholders fosters trust and relationships that can accelerate change. Our approach focuses on the creation of a culture of conservation and stewardship to produce results that will sustain Cleveland Clinic as a leader in our sector and beyond. We currently focus on transparently tracking and improving our waste and energy metrics, and in 2014 we began tracking our water use with greater accuracy.

## Waste

### Main Campus Recycling Rate

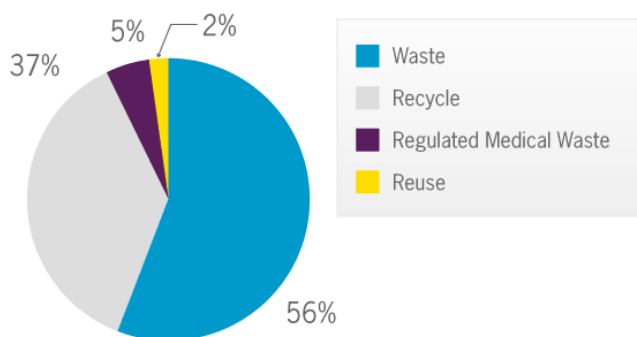


Recycling rate refers to the percentage of waste that is recycled rather than sent to landfill. It excludes items that are reused such as donations to MedWish.

Cleveland Clinic has continued our recycling efforts system-wide and most of our facilities have continued to improve.

On Cleveland Clinic main campus, we reached our 35% recycling rate goal inclusive of construction and demolition debris (+C&D). In 2015, we are committed to achieving a 50% recycling rate.

### 2014 Main Campus Waste Streams

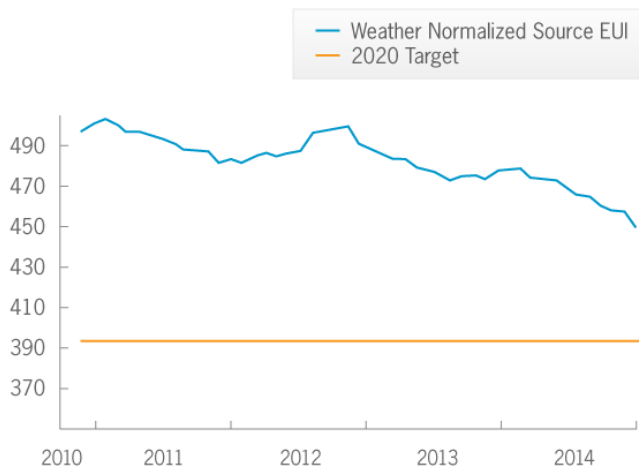


As Cleveland Clinic improves our recycling programs, not only will recycling rates change but the percentage of waste by types will also begin to change.

All Cleveland Clinic facilities are encouraged to reduce their use of products like paper through programs such as Default Duplexing, where all computers are set to print on both sides of a page. Recycling tonnage from paper-waste continues to decrease due to these efforts, which is another indicator of our success. Other programs, such as our clinical recycling program and education around proper waste container usage should result in a lower RMW amount and higher MSW and recycling weights.

## Energy and Emissions

### Source Energy Use Intensity



Energy Use Intensity, or EUI, measures the energy consumed by a building relative to its size. Cleveland Clinic uses source EUI or the total amount of raw fuel used. This includes transmission, delivery and production losses of that fuel as it is used as energy.

Cleveland Clinic's building portfolio is 16.1 Million ft<sup>2</sup> excluding parking lots and garages, with 20.7M ft<sup>2</sup> including them.

Our goal is to reduce our EUI to 393 by 2020. As of December 2014, we have reduced our EUI by 9.03% from our 2010 baseline.

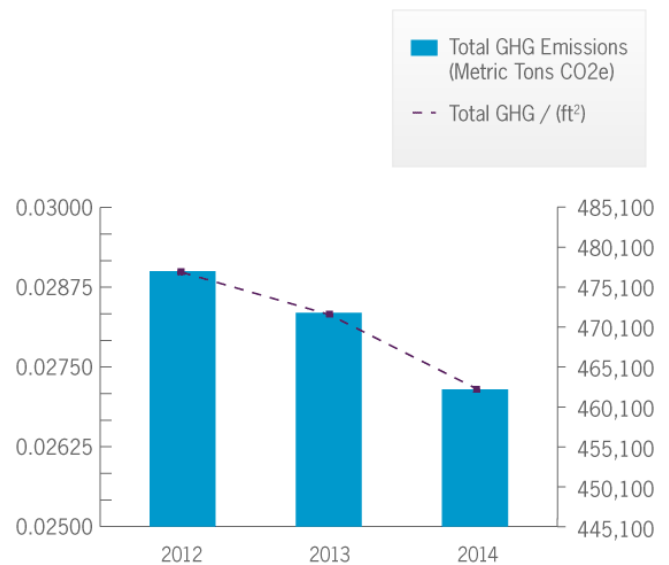
### Regulated Air Emissions

(Main Campus, 2014)

	Tons
Nitrogen Oxides	30.9985
Carbon Monoxides	33.7715
Organic Compounds	3.6061
Volatile Organic Compounds (VOC)	2.4357
Primary Particular Matter (PM)	4.366
Total of Chargeable Pollutants	35.8173

<sup>1</sup> Inventory conducted as required by 40 CFR 98, reported to EPA  
<sup>2</sup> Title V annual Emissions Inventory Summary per OAC rule 3745-15-03 submitted to Ohio EPA

### Total CCF System GHG Emissions Improvement from 2012 Baseline



### Direct and Indirect Emissions

2014 Emissions	
Direct Emissions GHG <sup>1</sup>	114,742
Indirect Emissions GHG <sup>2</sup>	345,963
Total Direct & Indirect Emissions GHG <sup>3</sup>	460,706

<sup>1</sup> The presumed result of natural gas consumption  
<sup>2</sup> The presumed result of electricity consumption  
<sup>3</sup> The sum of natural gas and electricity emissions

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## Water

Northeast Ohio's regional water utility has struggled with accurate billing, monitoring and volume data. In 2014, we implemented a utility bill-pay vendor that reliably tracks enterprise-wide water usage. Cleveland Clinic is currently establishing a baseline for water use for 2014 and will use this baseline for future reporting purposes.

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## Transportation

In 2014, Cleveland Clinic's fleet vehicles improved by a 3% mpg over 2013, avoiding the use of 45,807 gallons of fuel and resulting in a CO2 emissions avoidance of 418 metric tons. Since 2009, the fleet vehicles have had a 26% improvement in miles per gallon (mpg), avoiding the use of 277,118 gallons of fuel and resulting in 2,531 metric tons of CO2 emissions avoidance.



*New e-vehicle for Euclid Hospital Protective Services.*

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## Carbon Footprint

Cleveland Clinic's 2014 Carbon Footprint totaled 460,706 Metric Tons of CO<sub>2</sub>e. 75% of our footprint is from purchased electricity, 24% is from direct usage of fuels in assets owned by Cleveland Clinic and 0.3% is from anesthesia gases. More than 96% of our carbon footprint is located in NorthEast Ohio in our Hospitals, Family Health Centers, Medical Office Buildings and Administrative Facilities.

Ohio's total carbon footprint in 2011 was 233 million metric tons according to the US EPA. Thus, Cleveland Clinic's scope 1 and 2 footprint would represent 0.2% of Ohio's total carbon footprint.

The proportion of our carbon footprint from natural gas has increased as the usage of natural gas is supplanting coal with our suppliers. The U.S. EPA's Clean Power Plan as proposed would cut emissions relating to electricity by an additional 30% by 2030 in Ohio.

Cleveland Clinic calculated its scope 1 and 2 carbon footprint using the GHG protocol for electricity, natural gas, fuels used by generators and vehicles and anesthesia gases. ENERGY STAR's Portfolio Manager was used to calculate the electricity carbon footprint since it utilizes site specific eGRID factors for each location. For locations not tracked in portfolio manager a system average factor was applied to the electricity usage. Natural gas footprint was calculated using fuel usage for our owned fleet of patient transport vehicles, vans and cars was drawn from our central fleet management group. Anesthesia gas emissions were calculated based on purchased cylinder volumes and intensity factors from "Carbon Footprint from Anesthetic gas use" study published by UK's Sustainable Development Unit in 2012.

# Governance

Cleveland Clinic is striving to be the world leader in patient experience, clinical outcomes, research and education. To achieve our vision, Cleveland Clinic leadership upholds our mission and values by putting patients first, operating responsibly and reporting transparently.

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## By the Numbers (2014)

Located in Cleveland, Ohio, Cleveland Clinic is a nonprofit, multispecialty academic medical center that integrates clinical and hospital care with research and education. Read a list of Cleveland Clinic's vital statistics.

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## Awards

Cleveland Clinic received many awards in 2014, maintaining its reputation as one of the largest and most respected hospitals in the country.

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## Membership

Cleveland Clinic is a member of several organizations. Our affiliations and memberships are critical mechanisms of knowledge transfer.

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## Governance

Successful pursuit of the mission of Cleveland Clinic depends upon effective leadership. The information presented here is intended to explain our governance practices, and in particular, the composition, structure and responsibilities of Cleveland Clinic's governing boards. Our policies are modeled on good governance principles for nonprofit corporations, are consistent with legal requirements and help ensure that we fulfill our mission for the benefit of the community.

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## Transparency

Cleveland Clinic is committed to creating a transparent and ethical business environment that discourages any form of corruption.

# By the Numbers



Number of Physicians and Scientists: 3,262

Number of Nurses: 10,824

Residents and Fellows in Training: 1,757

Cleveland Clinic National Locations: 30

Cleveland Clinic International Locations: 3

Number of Hospitals: 11

Number of Family Health Centers: 18

Number of Institutes: 27

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Number of Beds on Cleveland Clinic main campus: more than 1,428

Number of Beds System-wide: 4,383

Number of Patient Visits: 5.9 million

Number of Admissions: 152,532

Number of Surgical Cases: 192,646

Number of Subspecialties: 120

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Operating Revenue: \$6.69 billion

Total Grant and Contract Revenue: \$167.6 million

Total Federal Revenue: \$98 million

Accredited Training Programs: 70

# Awards

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## FOR CLEVELAND CLINIC

### U.S. News & World Report, 2014 National Rankings

- #1 Cardiology and Heart Surgery
  - #1 Urology
  - #2 Diabetes and Endocrinology
  - #2 Gastroenterology and GI Surgery
  - #2 Nephrology
  - #2 Rheumatology
  - #3 Gynecology
  - #3 Orthopedics
  - #3 Pulmonology
  - #6 Ear, Nose and Throat
  - #6 Neurology and Neurosurgery
  - #7 Ophthalmology
  - #9 Geriatrics
  - #13 Cancer
- Pediatrics is Nationally Ranked in 10 out of 10 specialties.
- 



### 2014 DiversityInc Top 10 Hospital Systems

In 2015, Cleveland Clinic ranked in the top 5 hospital systems nationally. More than 1,600 companies participated in the survey in 2015. There is no fee involved to participate and every company receives a free report card assessing its performance against all competitors. The survey, now in its 16th year, leads to a detailed, empirically driven ranking. The free report card assesses performance based on four key areas of diversity management:

- Talent Pipeline: workforce breakdown, recruitment, diameter of existing talent and structures
  - Equitable Talent Development: employee resource groups, mentoring, philanthropy, movement and fairness
  - CEO/Leadership Commitment: accountability for results, personal communications and visibility
  - Supplier Diversity: spend with companies owned by people from underrepresented groups, accountability and support
-





### **Security 500 #2 Ranking Hospital/Medical Center**

Cleveland Clinic Protective Services earned the 2014 Security 500 #2 healthcare sector ranking in 2014. For the fifth consecutive year, Cleveland Clinic ranked in the top two, including 3 years as number one.

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### **University Healthsystem Consortium Quality Leadership Award**

The award is given to members who demonstrate excellence in delivering high-quality care, as measured by the Quality and Accountability Study. The study was designed by UHC to serve as a model to help academic medical centers identify structures and processes associated with high performance in quality and safety across patient populations.

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### **2014 World's Most Ethical Companies**

For the fourth time in six years, Cleveland Clinic has been named one of the World's Most Ethical Companies by the Ethisphere Institute. Cleveland Clinic has established itself as an industry leader through a variety of innovative initiatives to manage potential conflicts of interest, provide transparency on the industry relationships of physicians and researchers, publicly report clinical outcomes, offer free health and wellness programs to employees and their dependents and promote environmentally friendly building and sustainability programs.

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### **Healthcare Information and Management Systems Society Stage 7 Ambulatory Award**

Stage 7 healthcare organizations demonstrate superior implementation and utilization of health IT systems. Their achievement has resulted in the true sharing, information exchange and immediate delivery of patient data to improve process performance, quality of care and safety.

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### **Ohio Minority Supplier Development Council Corporation of the Year Award**

The Corporation of the Year award recognizes a corporation or organization that is dedicated to improving the overall participation of Asian, Black, Hispanic and Native American suppliers in the global corporate supply chain.

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### **Human Rights Campaign's Healthcare Equality Index, 2014 Leader in LGBT Healthcare Equality**

Since 2007, this national LGBT healthcare benchmarking tool has guided hundreds of healthcare facilities seeking to provide better and more equitable care to their lesbian, gay, bisexual and transgender patients.



### NorthCoast 99 – Northeast Ohio’s Best Places to Work

For the 9th consecutive year, Cleveland Clinic has been named one of NorthCoast 99’s great workplaces for top talent in Northeast Ohio.

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### Top 10 Organizations for Leadership Development — Healthcare Organizations

114 organizations who participated in the survey process conducted by the National Center for Healthcare Leadership in support of continuously improving their own leadership development systems. Cleveland Clinic was named in the top 10 for 2014.

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### Milestone Autism Resources Visionary Employer Award

Milestones Autism Resources helps individuals with autism reach their unique potential. The organization focuses on educating and coaching family members and professionals in evidence-based practical strategies.

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## FOR REGIONAL HOSPITALS AND FACILITIES

### Press Ganey Excellence

Press Ganey recognizes a select group of its clients with awards that recognize efforts to improve the quality and safety of patient care, to provide a positive and collaborative environment for employees and physicians, and ultimately to deliver exceptional patient experiences.

#### **Guardian of Excellence Award (Patient Experience)**

- Richard E. Jacobs Family Health Center Emergency Department
- Sagamore Hills Emergency Department
- South Pointe Hospital
- Twinsburg Family Health and Surgery Center Emergency Department

#### **Press Ganey NDNQI Award for Outstanding Nursing Quality**

- Sheikh Khalifa Medical City

#### **Press Ganey Commitment to Excellence Award**

- Lutheran Hospital
-

## American Nurses Credentialing Center

The mission of the American Nurses Credentialing Center (ANCC), a subsidiary of the American Nurses Association (ANA), is to promote excellence in nursing and health care globally through credentialing programs.

### Magnet Recognition

The Magnet Recognition Program® recognizes healthcare organizations for quality patient care, nursing excellence and innovations in professional nursing practice. Consumers rely on Magnet designation as the ultimate credential for high quality nursing.

- Main Campus
- Cleveland Clinic Children's Hospital for Rehabilitation
- Cleveland Clinic family health centers
- Fairview Hospital
- Hillcrest Hospital

### Pathway to Excellence Designation

The Pathway to Excellence® Program recognizes health care and long term care organizations for positive practice environments where nurses excel. To qualify, organizations meet 12 practice standards essential to an ideal nursing practice environment. Nurses trust that Pathway-designated institutions respect their contributions, support professional development and nurture optimal work settings.

- Cleveland Clinic Florida
- Euclid Hospital
- Lakewood Hospital
- Lutheran Hospital
- Marymount Hospital
- South Pointe Hospital

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## American College of Cardiology Foundation's National Cardiovascular Data Registry

ACTION Registry Get with the Guidelines Gold Performance Achievement Award

- Hillcrest Hospital

Platinum Performance Achievement Award

- Hillcrest Hospital
-

## American Heart Association and American Stroke Association Get with the Guidelines

### Gold Plus — Heart Failure

- Cleveland Clinic – main campus
- Cleveland Clinic Florida, Weston Hospital

### Gold Plus — Stroke

- Cleveland Clinic Florida
- Euclid Hospital
- Fairview Hospital
- Hillcrest Hospital
- Marymount Hospital
- Medina Hospital
- South Pointe Hospital

### Silver Plus — Stroke

- Lakewood Hospital

### Fit-Friendly Worksites, Gold Award Recognition

- Ashtabula County Medical Center
  - Fairview Hospital
  - Hillcrest Hospital
- 

## Joint Commission Top Performer on Key Quality Measures

Launched in September 2011, The Joint Commission's Top Performer on Key Quality Measures® program recognizes accredited hospitals that attain excellence on accountability measure performance

- Ashtabula County Medical Center
  - Cleveland Clinic Florida
  - Lutheran Hospital
  - South Pointe Hospital
- 

## UNICEF/World Health Organization Baby-Friendly

The Baby-friendly Hospital Initiative (BFHI) was launched by WHO and UNICEF in 1991, following the Innocenti Declaration of 1990. The initiative is a global effort to implement practices that protect, promote and support breastfeeding.

- Fairview Hospital

- Hillcrest Hospital
  - Lakewood Hospital
- 

### **Becker's Hospital Review and Axial Exchange 100 Top Hospitals for Patient Engagement**

The national ranking evaluated all 3,077 U.S. hospitals' engagement efforts based on an analysis of publicly available data, including readmissions, patient satisfaction and the extent to which organizations offered information and tools that help engage patients in self-care.

- Lutheran Hospital
- 

### **Consumer Reports Safest Hospitals in the U.S.**

Consumer Reports help patients compare hospitals based on our patient safety score, as well as individual measures relating to patient experience, patient outcomes, and certain hospital practices.

- Lutheran Hospital
- 

### **Healthgrades**

Healthgrades is the long-standing leader in making information on physicians and hospitals more accessible and transparent. Top 50 U.S. Hospitals

- Marymount Hospital
- South Pointe Hospital

Distinguished Hospital Award for Clinical Excellence

- Marymount Hospital
- South Pointe Hospital

Patient Safety Excellence Award

- Euclid Hospital
- 

## **ENVIRONMENTAL AWARDS**



Practice Greenhealth is a nonprofit membership organization founded on the principles of positive environmental stewardship and best practices by organizations in the healthcare community



## Top 25 in the Country

The Top 25 Environmental Excellence award is now Practice Greenhealth's highest honors for hospitals. To apply for this award, facilities fill out the Greenhealth Partner for Change award application. Practice Greenhealth's Top 25 Environmental Excellence award will be presented to the 25 hospitals that have the highest overall scoring and best meet key performance indicator targets across all ten categories of the Greenhealth Partner for Change award application.

- Cleveland Clinic Main Campus

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## Environmental Leadership Circle of Excellence

These awards recognize hospitals for outstanding performance in specific areas of expertise. The Circles of Excellence are presented to facilities that have the highest overall scoring and best meet key performance indicator targets in each category on the Partner for Change application.

- Cleveland Clinic, Four Categories: Chemical, Energy Reduction, Climate Change and Greening the OR



## System for Change

This award recognizes health care systems that have implemented a significant number of environmental programs, and continuously improve and expand upon these programs on the path to sustainability.

- Cleveland Clinic Health System



## Emerald Award

This award is presented to hospitals that demonstrate superior sustainability programs. To apply for this Award, facilities fill out the Greenhealth Partner for Change Award application. Award determinations will be made using Practice Greenhealth's improved scoring and evaluation system.

- Euclid Hospital
- Marymount Hospital



## Partner for Change Award

This award recognizes facilities that have implemented a significant number of environmental programs, and continuously improve and expand upon these programs on the path to sustainability.

- Ashtabula County Medical Center



- Beachwood Family Health and Surgery Center
- Brunswick Family Health Center
- Chagrin Falls Family Health Center
- Cleveland Clinic Florida
- Fairview Hospital
- Hillcrest Hospital
- Lakewood Hospital
- Lutheran Hospital
- Medina Hospital
- Richard E. Jacobs Family Health and Surgery Center
- Solon Family Health Center
- South Pointe Hospital
- Strongsville Family Health and Surgery Center
- Stephanie Tubbs Jones Family Health Center
- Twinsburg Family Health and Surgery Center
- Willoughby Hills Family Health Center



### Partner Recognition Award

The Partner Recognition award (PR) is for healthcare facilities that have begun to work on environmental improvements, have achieved progress in several areas, and have at least 10% recycling rate for their total waste stream.

- Independence Family Health Center
- Wooster Family Health Center



### US Green Building Council LEED Certification

To receive LEED certification, building projects satisfy prerequisites and earn points to achieve different levels of certification. Prerequisites and credits differ for each rating system, and teams choose the best fit for their project.

- Cleveland Clinic Abu Dhabi was awarded LEED Gold certification for new construction.



### **Illuminating Engineering Society Lighting Control Innovation Award**

The IES Illumination Awards provides a unique opportunity for public recognition of professionalism, ingenuity, and originality in lighting design based upon the individual merit of each entry judged against specific criteria.

- Fairview Hospital

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## COMMUNICATIONS HONORS AND AWARDS

### **Time Magazine 140 Best Twitter Feeds of 2014**

Follow us @ClevelandClinic for health tips and the latest news on research and innovation.

### **Strategic Health Care Communications eHealthcare Leadership**

#### **ClevelandClinic.org**

- Platinum Award for Best Health/Healthcare Content (healthcare system category)
- Platinum Award for Best Overall Internet Site (healthcare system category)
- Platinum Award for Best Social Networking (healthcare system category)
- Gold Award for Best Doctor Directory (healthcare system category)

#### **ClevelandClinic.org/MyConsult**

- Gold Award for Best Care/Disease Management Site (hospital subsite/center of excellence category)

#### **ClevelandClinicMedEd.com**

- Platinum Award for Best Health/Healthcare Content (physician/clinician-focused site category)
- Gold Award for Best Overall Internet Site (physician/clinician-focused site category)
- Gold Award for Best Rich Media (physician/clinician-focused site category)

# Memberships

Cleveland Clinic is a member of the following organizations:

- American Association of Medical Colleges
- American Clinical Laboratories Association
- American College of Physicians
- American Hospital Association
- American Medical Group Association
- Association of Health System Pharmacies
- Greater Cleveland Health Association
- Health Management Academy
- Healthcare Leadership Council
- National Quality Forum
- Ohio Hospital Association
- Research!America
- Association for Community Health Improvement
- Association of American Medical Colleges
- Center for Health Affairs
- DiversityInc.
- Greater Cleveland Partnership
- Leadership Cleveland
- Ohio Minority Supplier Development Council
- Practice Greenhealth
- Society of Black Academic Surgeons (SBAS)
- Society for Human Resource Management (SHRM)
- Sustainable Cleveland, 2019
- US Green Building Council

In addition to serving on many of the boards and committees of these organizations, we provide guidance to these organizations on their healthcare policy positions, and by extension benefit from their lobbying activities (as do their other member organizations).

Our individual physicians and researchers participate as individual members of organizations related to their specific areas of practice or interest, such as the American College of Radiology.

# Governance

The Cleveland Clinic Board of Directors is the primary governing body for CCHS and is charged with the fiduciary duty to act on behalf of Cleveland Clinic. Directors are selected on the basis of their expertise and experience in a variety of areas beneficial to Cleveland Clinic and CCHS and are not compensated for their services. A majority of the directors are required to be independent. Directors are elected for four-year terms. The Governance Committee of the Board of Directors makes nominations to the Members of candidates for election by the voting Members as Directors. Upon the expiration of a Director's term, the Governance Committee will evaluate the Director to determine whether that person should be re-nominated. Any Director may voluntarily resign from active service and request appointment as an Emeritus Trustee.

The Cleveland Clinic Board of Trustees serves as an advisor to the Board of Directors. Trustees are non-voting and are selected on the basis of their expertise and experience in a variety of areas beneficial to CCHS, including service to the community, and are not compensated for their services. Trustees also serve on the committees of the Board of Directors.

The Members of the Cleveland Clinic are elected by existing voting Members. Members must possess specific qualifications as delineated in Cleveland Clinic's Code of Regulations. Only Members serving as Directors of the Cleveland Clinic have voting rights. The voting Members meet at least annually to elect new Directors to the Board of Directors, to consider and adopt amendments to the governing documents and to act upon such other matters as may be appropriate.

The committees of the Board of Directors are: Audit, Board Policy, Compensation, Conflict of Interest and Managing Innovations, Finance, Governance, Government and Community Relations, Medical Staff Appointment, Research and Education, Quality, Safety and Patient Experience and Philanthropy. There is also a Special Committee on Community Health Needs.

The Governance Committee nominates individuals annually to serve as Directors and Trustees of the Cleveland Clinic. This Committee also designates certain Trustees as Emeritus. When considering Director and Trustee candidates for nomination, the Governance Committee considers business and professional expertise, independence and other factors such as judgment, skill, diversity and civic involvement.

To improve effectiveness and maintain consistency throughout CCHS, the Community Hospitals' Board Task Force was formed to review each hospital entity's board governance structure and develop a mechanism to achieve the goal of maintaining one standard for quality, safety and patient experience throughout CCHS. The Task Force was chaired by the Chair of the Cleveland Clinic Board of Directors and included representation by Cleveland Clinic Board members, Cleveland Clinic Regional Hospitals' Board members and Cleveland Clinic executives. In May 2013, Cleveland Clinic and the Regional Hospital Boards agreed to a new structure whereby each hospital entity would be governed by a fiduciary Board of Directors, consisting of representatives from the previous hospital entity governing Boards and members of the Cleveland Clinic Board of Directors. Each hospital Board of Directors would also delegate certain responsibilities and duties to a newly structured Board of Trustees. Each Regional Hospital Board of Trustees would oversee certain matters relating to quality, safety, patient experience, credentialing, community engagement and hospital leadership evaluation, subject to final approval by its respective Regional Hospital Board of Directors.

# Transparency

## Anti-Corruption

Cleveland Clinic is committed to ethical business practices. To support this, the organization has an appointed Chief Integrity Officer with a direct line to the Board of Directors. The Chief Integrity Officer oversees the audit office and is responsible for auditing yearly expenses and invoicing, reviewing Protective Services' procedures for conducting background checks, ensuring the completion of the Foreign Corrupt Practices Act training and performing audits to detect fraud. The Chief Integrity Officer also oversees the Corporate Compliance Department that ensures compliance with federal, state and local laws and regulations, and operates an anonymous whistleblowing hotline (MD Corruption).

The entire Cleveland Clinic healthcare system is included in our anti-corruption risk analysis (SO2). All caregivers are able to read the Code of Conduct policies and procedures, however training is only required for management and foreign travelers (SO3). Caregivers found to be involved in fraud are terminated and prosecuted (SO4).

## Conflict of Interest

Cleveland Clinic is a prominent medical, research and academic healthcare system. We lead the way in healthcare with our model of care, innovations and patient care standards. Within all of our institutes and work places, including research, medical practices, purchasing and labor decisions, we maintain high ethical standards. These standards are established and preserved at the highest level.

Cleveland Clinic's Board of Directors is responsible for creating a culture of transparency and ethical behavior throughout our healthcare system. The Conflict of Interest and Managing Innovations Committee from Cleveland Clinic's Board of Directors oversees conflict of interest matters. The value we place on ethical and transparent behavior is maintained throughout all levels of the organization and support from our Board of Directors guarantees that the practices and intentions of all caregivers reflect our standards.

The Conflict of Interest Office and the Chief Governance Officer, through the Law Department, coordinate all conflict of interest programs and committees, including the Professional Staff Conflict of Interest Committee.

To ensure our integrity across all aspects of our organization, Cleveland Clinic maintains a comprehensive conflict of interest program for staff physicians, other caregivers and board members. Cleveland Clinic's conflict of interest program includes policies that require regular reporting and updating of interests that may present a conflict. Cleveland Clinic's website also includes a current directory of all its physicians, listing their educational and professional backgrounds, their medical specializations and any relationships with industry (PR 6). Any potential conflicts of interest are formally reviewed by one or more authorities within Cleveland Clinic, such as the Conflict of Interest committees of the Professional Staff and/or the Board of Directors.

## Regulatory Compliance

Cleveland Clinic developed a formal corporate compliance program in 1996 and established the Office of Corporate Compliance, under the appointment of the Chief Integrity Officer to oversee this program in 1998. The corporate compliance program ensures that caregivers, contractors and vendors conduct activities in full compliance with applicable federal, state and local laws, regulations, policies and ethical standards.

In 2003, the Privacy Office was established in response to the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Under the Office of Corporate Compliance, the Privacy Office has been responsible for guaranteeing the healthcare system follows HIPAA regulations and ensuring these policies are integrated into the organization's culture and procedures. Today, the Office of Corporate Compliance works in partnership with the

Information Technology Security Department to protect patient health and financial information. This includes the 2012 implementation of a new Electronic Data Stewardship program focused on data loss prevention, advanced malware protection and fraud identification (MD Customer Privacy).

In 2012, Cleveland Clinic established the Office of Clinical Compliance to ensure clinical processes are aligned with the development of a value-based care model. In 2014, the Office of Clinical Compliance continued to collaborate with institutes, regional medical executive committees and independent practitioners to audit and monitor inpatient and outpatient clinical activities. (MD Compliance)

## **A Culture of Principles**

Cleveland Clinic established a Code of Conduct for all caregivers and set regulations for ethical and safe workplace policies. To maintain a culture of principles, Cleveland Clinic manages anonymous hotlines and email accounts for employees to voice concerns about employment practice breaches to issues of privacy and business ethics. In addition, the Office of Corporate Compliance directly receives and responds to compliance-related inquiries from concerned patients and employees.

In 2014, the Office of Corporate Compliance Responded to:

- 119 calls to anonymous hotlines
- 24 anonymous emails
- 1,173 compliance-related questions/inquiries

Transparency is a key part of the Cleveland Clinic model of care. We disclose detailed information about our physicians and their affiliations on our websites. We share information about our environmental, social and economic impacts with our stakeholders. We believe that, by operating transparently, we can create the best value for our patients, caregivers and communities.

Cleveland Clinic became a signatory of the UN Global Compact and wrote our first communication on progress in 2010. Each year since that time we have compiled an increasingly complex and detailed report to benchmark our goals and performance against these goals. We include our management strategies and intentions in these reports as an extension of Cleveland Clinic culture. This report both reflects and reinforces our commitment to ethical and transparent organizational behavior.