REPORT OF THE CHIEF EXECUTIVE OFFICER | Keith Hovan

Annual Meeting December 2017

Annual meetings are a chance to take stock. We reflect on what we accomplished during the year past. And we talk about our plans for the year ahead.

For the better part of a decade, challenge and change have been the themes of our annual meetings. They are the twin constants of health care.

Shrinking reimbursements, an ever-changing and uncertain policy environment and the incredible — if sometimes thrilling — pace of medical progress. The shifting nature of patient expectations — excellent clinical outcomes are no longer enough; we must also satisfy consumers' wants and needs, And the possibilities and demands of digital technology.

The pace of change has been, and remains, relentless.

This year, however, let's take a break from focusing on challenges. They will still be here tomorrow. Instead, let's reflect on Southcoast's many successes. And let's celebrate those successes and the people — including you here tonight — who have helped Southcoast achieve them.

There is a lot to celebrate. We have used the most daunting challenges as opportunities to become stronger, to offer our patients better and more integrated treatment, and to become a national leader in community-based healthcare.

But in our ceaseless drive to ensure that the people of our region receive the care they need, the care they deserve, close to home — the cardiac care, the cancer care, the orthopedic care, and the maternity and pediatric care.... the surgery, the emergency and urgent care services and the ongoing disease management.... with all that work, we have barely taken time to appreciate the magnitude of our accomplishments.

Tonight, we will do just that, and it is fitting because we are about to enter a new era at Southcoast Health.

Several leaders who have been responsible for helping to guide us to this point in our history are moving on to new chapters in their life, and a new leadership team is forming.

But people like Linda Bodenmann, who will retire as our Executive Vice President and Chief Operating Officer after 23 years, are leaving a strong foundation for our new leadership to build on.

Linda joined us as Chief Financial Officer in 1994, just as Southcoast Hospitals Group was first forming. Her energy, drive and vision have enabled us to unify a single healthcare system from three independent hospitals.

Linda, my deepest thanks for all you have done. I know your retirement is well deserved — but I have to say, I have a hard time imagining you being *really* retired. I have a feeling you will make important contributions to our community for years to come.

Paul Ianinni, our Physician-in-Chief for Medicine, is also retiring. With Paul's clinical leadership, Southcoast expanded its range of specialty services and established the metrics that have improved care across all three hospitals.

No matter where a patient enters our system, he or she receives the same high standard of care guided by the latest and best medical protocols. Even with the best medical and administrative leadership, great community healthcare needs great community leadership. In this, Southcoast is unusually blessed.

This year, three long-term members of our board of trustees are stepping down, Carl Taber, Joe Ciffolillo, and former Chair, Dr. Jean MacCormack. They offered a steady hand through some of Southcoast's most turbulent in recent times, and I cannot thank them enough for their wisdom, courage and support.

I am grateful that Jean will continue to lead the Campaign for Southcoast Health, as co-chair with Nick Christ. By the way, the campaign has raised over \$17 million, so is well on its way to our goal of \$25 million.

While it is sad to say farewell to such special individuals, I am delighted that equally dedicated and qualified people will be taking their places.

Renee Clark, who has served ably as Senior Vice President and Chief Operating Officer of Southcoast Hospitals Group, will become the next Executive Vice President and COO of Southcoast Health.

Dr. Rayford Kruger, the accomplished surgeon who established our renowned Weight Loss Surgery Program, will become Physician-in-Chief for Surgery. He is replacing thoracic surgeon, Dr. Richard Miller who is stepping down to return to full-time practice. Dr. Ronnie Brownsworth joined Southcoast as President of Southcoast Health Network, formerly known as Southcoast Physician Network. And Wade Broughman joined as Executive Vice President and Chief Financial Officer.

Our Board of Trustees will welcome four new trustees – Elizabeth "Beppie" Hudiekoper, Dr. Salman Bashir, Helena DaSilva Hughes and Christopher Hodgson whose father served as Chair of the St. Luke's Board at the time of the merger.

There are other people I want to recognize tonight, as well. People who quietly provide untold value to our organization. Behind me on the screen, you see our 2017 President's Award Recipients. These individuals were chosen by their peers for this honor because they represent the very best in Southcoast caring, service and integrity. Some of these exceptional employees are with us tonight.

Would our President's Award recipients please stand to be recognized?

Now if you would all join me in a round of applause to thank these individuals for their exemplary service and compassion. [LEAD APPLAUSE]

And there is one more group of outstanding people —our Volunteer of the Year Award recipients. This year, Southcoast is honoring four outstanding individuals who go above and beyond in their service to our patients. Again, I ask our Volunteers of the Year who are here tonight to stand and be recognized.

Let's all give these volunteers a round of applause to show our appreciation for their exceptional caring and dedication. [LEAD APPLAUSE]

All of these people — administrators, community leaders, staff and volunteers — contribute to the first-class care that Southcoast patients have come to expect.

I could go on and on, listing the year's progress and awards. But I'd like to do something different. I'd like to let our patients tell you the kind of healthcare system we have become.

Patients like **Wally Nichols**, who in 2015 discovered that there was a serious problem with his implantable cardiac defibrillator.

For seven years, Wally had relied on that defibrillator to administer a shock should his ventricular fibrillation cause his heart to go into sudden arrest. Through a remote monitor, the cardiac team at Southcoast discovered a problem. The insulation on the device's wire was wearing thin and Wally was at risk for sudden death.

Dr. Nitesh Sood, a cardiologist and electro-physiologist, determined that removing the wire was too risky. So, he found a new channel in the vein that carried the wire, expanded the channel and sent a second wire to the heart. The venoplasty procedure that allowed this to happen is typically performed only at tertiary care academic centers…but we have it *here*.

Or patients like **Maureen Sylvia Armstrong**, one of our trustees, who suffered a problem on a New Year's ski trip in 2013. Her hip popped out on the first run. Even Maureen couldn't keep skiing that day. She knew that she no longer could avoid the surgery that she had long put off.

Dr. Michael Langworthy, Southcoast's Chair of Orthopedic Surgery, recommended a total hip replacement and Maureen agreed to surgery only after her company's holiday party. "I had to dance," she said.

After surgery, Maureen was walking unaided within three weeks. That's an incredibly short time, but Dr. Langworthy has a practiced, efficient surgical team. They perform complex surgeries in under an hour, reducing blood loss and the risk of infection, and ultimately reducing recovery time. "When I put my hand out, they give me the instrument I need," said Dr. Langworthy. "It's like a dance. I lead and they follow."

And now, Maureen is back dancing and skiing and hosting big holiday dinners for her family. "You can be operated on by a <u>rock star surgeon</u>, right here at St. Luke's," she said.

Or patients like **Chad Ritchie**, who, as an oil rig worker in his 40s could barely stand because of the pain in his legs that had intensified over 10 years. Dr. David Gillespie, Chief of Vascular and Endovascular Surgery at Southcoast, discovered that Chad was suffering from severe varicose veins. Special ultrasound technology at the Southcoast Vein Center revealed that valves in his great saphenous veins, which run the length of each leg, were no longer working and blood was pooling in his legs. Dr. Gillespie sealed those veins and later removed them, changing Chad's life.

"I just wanted something done to relieve the pain, so I could stand and walk longer. I had no idea the result could be this good," Chad said. He now joins his wife on mountain hikes and his teenage daughter on all-day treks through theme parks, where he used to wait for her on a bench.

Sister Beverly Furtado is a volunteer at the surgi-center at Charlton Memorial Hospital. But not that long ago, she was a patient herself at the Southcoast Centers for Cancer Care. In 2014, she was diagnosed with stage 4 lung and brain cancer. She relied on her team of caregivers, including a thoracic surgeon, medical oncologist and radiation oncologist — and rejected their suggestion that she might seek a second opinion.

"I was so confident in what they were saying, that I decided I didn't need to go to Boston," she said.

She underwent lung surgery, a craniotomy, chemotherapy and radiation treatments. She now is cancer free, a testament to her courage and faith — as well as to the skill of her oncologists and surgeons. The medicine she takes was identified for her through genetic testing done at the Cancer Center. Today, she works to spread the word about Southcoast's care. She wants other patients to feel confident that they, too, will have a good outcome.

When **Peter Latham** felt an odd pulsing in his belly, he was pretty sure he knew what was wrong. Aneurysms run in his family and he recognized the symptom. A CAT scan proved him right. He had an abdominal aortic aneurysm — a weakness in the wall of the aorta that expands until it is at risk of rupture.

Even worse, he was among the 10 to 20 percent of cases in which the traditional, minimally invasive repair involving a stent graft was impossible. His aneurysm was located too close to the

arteries that supply blood to his kidneys and intestines. Normally, the alternative treatment requires a large incision in the abdomen and sometimes the chest. It involves manipulating the arteries and temporarily interrupts blood flow to the kidney and intestines. The surgery carries a relatively high risk of potential complications and even death.

But Dr. Richard Pin, a Southcoast vascular surgeon, offered a new option — one that is available at only a handful of hospitals in Massachusetts. It is called a fenestrated endovascular aortic aneurysm repair. The surgeon uses a catheter to insert a new, custom-designed lining in the aorta, so it no longer bulges.

"This is really pushing the frontier in community medicine and surgery," Dr. Pin said.

Instead of suffering many weeks of painful recovery, Peter Latham resumed most normal activities within two weeks of the procedure and was back at work as a real estate agent in three weeks.

Melissa Robillard suffers from a progressive neurological disease called leukodystrophy. At 38, her short-term memory is diminished, and she requires a wheelchair. But Melissa is an amazing young woman who focuses on life's gifts, not on its limitations. Kari Star, a talented speech-language pathologist with Southcoast Physicians Group Ears, Nose & Throat practice, recognized Melissa's spirit and wanted to help stimulate her memory and language skills.

So, she looked for stories about animals, which Melissa loves. Soon, the pair started creating their own story about a rare white lion in South Africa. That turned into a book called *Snowball's Great Adventure*, a tale that Melissa wrote to help children understand that being different can be a strength.

Melissa has earned more than \$800 in book sales, which she donates to leukodystrophy research. And her Facebook page has put newly diagnosed children and their parents into a network of support for the rare disease

"Like Snowball, I've faced many obstacles and challenges," Melissa said. "But with the kindness of many people and my own determination and hard work, I've managed to live a full and wonderful life."

Telling these stories fills me with pride and awe, at the resolve of our patients and the dedication and expertise of our clinicians. They offer just a glimpse of what Southcoast Health means to our community — and of the remarkable community we serve.

We continue to expand our services. Last week, we cut the ribbon on the re-dedicated Knowles Unit at St. Luke's, where patients will recover from complex brain and spine surgery. This dedicated unit will provide our neurosurgery patients with the same level of comprehensive care that our cardiac patients receive at the cardiac step-down unit at Charlton.

This year, we also opened urgent care centers in Dartmouth and Seekonk, which joined the popular centers in Fairhaven and Wareham. Because these clinics answer our patient's needs for care at convenient times in convenient settings, we will continue to expand our network of urgent care centers in 2018.

There is more that we need to do together. Our community faces an epidemic of opioid addiction and overdoses. We must work together to address poverty, homelessness and growing behavioral health problems. The health of our communities depends on it, and we are committed to continue our work with community partners to improve the lives of all South Coast residents.

We live in an incredible area, full of history, culture, art and natural beauty. It is a region that made excellent health care a priority, with neighbors caring for neighbors. And we, in turn, make our region's wellbeing a priority. Our Model of More means that we not only deliver *More than medicine* to our patients and their families. We embrace our entire region, its challenges and aspirations.

Tonight, I want to share a video with you that will show you the dramatic impact we have on people's lives and celebrate who we are — as a community and as a healthcare system. Because Southcoast Health, just like our South Coast region, doesn't always get the credit it deserves.

What do you think?

This year, I hope you leave this event feeling proud of what we have accomplished together, rather than daunted by what we have yet to achieve. Tomorrow, we will roll up our sleeves and return to work.

But for the next few minutes, I invite you to enjoy this video. It provides a glimpse into the inspiring journeys of three Southcoast Health patients. These are stories with ups and downs; of extensive journeys that have really only just begun. Southcoast Health has played a role in these moving stories and I'm very proud that we will continue to be there all along the way no matter where the road leads these incredible individuals.

[VIDEO PLAYS]

Jill Fearons, Dan O'Brien and Roseanna Camaioni are here with us tonight. Would you please stand?

[LEADS APPLAUSE]

Thank you all for sharing your stories of hope with us.

I am so proud of all we have done together — an extraordinary community creating an extraordinary health care system. Now, I invite you to join us for a celebration of these accomplishments prior to going home and spreading the word.

Talk about Southcoast in your neighborhoods, churches, mosques and synagogues, in your offices and children's playgrounds.

Follow us and post about us on social media. Remind your neighbors, friends and family why they, too, should be proud of both their local not-for-profit health system and our region.

Thank you for that and for the support I know Southcoast can count on in the year to come.