

# LIFE WELL-LIVED

WELLSTAR-THE FIRST 20 YEARS

*Life Well-Lived: WellStar-the First 20 Years* is dedicated to our physicians and team members for their ongoing commitment to deliver safe, high-quality care and a superior experience to our patients, their families and the communities we serve.

Thank you for all you do in support of our vision to deliver world-class healthcare.



# LIFE WELL-LIVED

WELLSTAR-THE FIRST 20 YEARS

BY GINA SHAW

ESSEX PUBLISHING GROUP, INC.

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Produced and published by Essex Publishing Group, Inc.,  
St. Louis, Missouri  
[www.essexink.com](http://www.essexink.com)

Design by Clare Cunningham Graphic Design

Library of Congress Catalog Card Number: 2013931164

ISBN: 978-1-936713-02-8

First Printing: March 2013

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CHAPTER ONE:

# THE BIRTH OF A

A close-up photograph of a man with short brown hair, wearing a light-colored striped shirt, smiling warmly as he holds a baby. The baby has light brown hair and is looking off to the side. The background is softly blurred, showing what appears to be a window with a view of the ocean. A semi-transparent dark grey banner is overlaid at the bottom of the image.

**MODERN HEALTH SYSTEM**

A close-up photograph of a surgeon's head and shoulders in an operating room. The surgeon is wearing a white LuxTEC surgical helmet with a clear visor. The helmet has a blue and white logo on the side that reads "LUXTEC" and a white label on the front that reads "DR. COOPER". The surgeon is also wearing a black surgical mask and clear safety glasses. A surgical microscope is mounted on the helmet, with two large lenses and a central light source. The surgeon is wearing a blue surgical cap and a white surgical mask. The background is a blurred operating room environment.

IN THE TIME IT TAKES FOR AN INFANT  
TO BECOME AN ADULT, WELLSTAR  
HAS COME TOGETHER AS A SYSTEM,  
EARNING NATIONAL RECOGNITION AS  
A LEADER IN HEALTHCARE QUALITY.

No matter what the weather outside, it's always warm and steamy inside the low-slung industrial laundry, nearly the size of a city block, off Sandy Plains Road in Marietta, Ga. Over the hum of motors, the clang and clunk of conveyor tracks and the hiss of presses, workers call out to one another in Creole, Hindi, Vietnamese and Spanish. Above two large washing machines—each almost big enough to drive a small car through—an endless line of blue bags runs along a steel track, dropping some 30,000 pounds of linens into the washers' feeders every day. At the other end, blue-and-white pucks the size of manhole covers emerge, each comprised of dozens of sanitized hospital gowns, towels and sheets, ready to be separated, dried and fed into automated folding machines before being stacked in carefully inventoried carts.

Occupying the same building since it was established in 1992, this facility cleans and sanitizes more than 10 million pounds of laundry every year for WellStar Health System, one of the leading healthcare organizations in the southeastern United States. This is not merely where dirty laundry comes to be scrubbed; it's the one place that touches nearly everything WellStar does, and it was essentially inside this building that WellStar, the fifth most integrated healthcare delivery system in the country, as ranked by IMS Health, was born.

### THE RISE OF MANAGED CARE

In the late 1980s and early 1990s, the shadow of a strange and intimidating new force known as managed care loomed large over the healthcare landscape. It had taken hold first on the West Coast in major health markets like Portland and San Diego, and it gradually moved east. The ground shook with the consolidation of hospitals and



medical practices of all kinds, as providers sought scale in providing care and leverage in negotiating costs and reimbursements with insurers. By 1992, Atlanta—by population the third largest metropolitan area in the Southeast—was at the frontier of managed care's growth. There, a

nascent but growing managed care market was dominated by a few plans competing aggressively. Hospitals in this bellwether marketplace tried to establish their territory—and, if they could, to predict the future.

Physician practices, and smaller hospitals in particular, wondered what their place would be in the new order of things. Would they be swallowed whole or trampled out of existence by giant healthcare corporations? Hospital CEOs and physicians from the area flew to California and Oregon to see if they could find out what was coming their way.

The election of Bill Clinton as the 42<sup>nd</sup> U.S. president in November 1992 added another wild card to the mix. One of Clinton's signature campaign pledges had been healthcare reform. Although his initiative ultimately failed, it did draw attention to issues of efficiency and quality in healthcare. The government's first effort to improve these areas took the form of the Medicare Centers of Excellence programs, which rewarded high-performing institutions that offered an integrated model of care; Intermountain Healthcare in Utah and Geisinger in Pennsylvania were among the early innovators. The Centers of Excellence model rapidly spread beyond Medicare to Veterans Affairs hospitals and into the private sector.

As these forces stormed around the affluent, rapidly growing northwest Atlanta suburbs of Cobb County, two friendly rivals regarded each other with wary interest.

Ambulances carrying critically ill heart patients once had to race past WellStar Kennestone Hospital into downtown Atlanta for complex cardiac care. In 2004, a partnership between WellStar and Emory Healthcare brought open heart surgery to WellStar. Under the supervision of William Cooper, M.D., associate professor of cardiothoracic surgery at Emory University and medical director of cardiovascular surgery at WellStar, the open heart program put WellStar's cardiology division on the local and regional maps. Today, WellStar surgeons perform more than 600 open heart surgeries a year.

# A GREAT PLACE TO WORK

They called it “Snowmageddon.” On January 9, 2011, the Atlanta area came to a standstill when a storm dumped several inches of snow, and the freezing temperatures that followed left roads covered in ice. Most schools and businesses closed—but WellStar didn’t. Stalwart team members forged in, prepared to stay for days. Many team members slept in their chairs. Many other team members set up mattresses in the hospitals’ linen rooms. Day-shift workers toiled through the night, putting away supplies. With roads virtually impassable, some walked to and from work for a week.

Most workplaces don’t inspire that kind of devotion, but most workplaces don’t have WellStar’s “employer of choice” strategy—devised by former President and CEO Robert Lipson, M.D., who recognized that to build a world-class health system, you had to attract world-class

people at every level. “To find and retain the best team members and make sure that they are coming to work and giving their best, we have put together a carefully thought-out collection of benefits that sets WellStar apart among employers, not just in northwest Georgia but nationwide,” said Karen Mathews, WellStar’s director of Work-Life Services (how many companies even have one of those?). “We strive for programs, practices and policies that help employees find success both at work and at home.”

WellStar offers its employees many of the same benefits that other companies do, such as generous paid time off, retirement plans and health coverage, but at WellStar, that’s just the beginning. If a nurse needs to have her car inspected, she can call WellStar’s Best Upon Request concierge service, and someone will pick the

car up at her home, take it to get inspected and return it to her driveway. Best Upon Request handles those myriad chores that eat into a person’s free time: picking up and delivering dry cleaning, buying gifts and getting them wrapped, sitting at the house to wait for the cable company.

For the information technology (IT) specialist who gets an emergency call that his babysitter has gotten sick, WellStar offers a backup care program. Benefits-eligible team members are entitled to 80 hours of care, every year, for any last-minute needs. WellStar team members pay a nominal hourly fee, and the service is available not only in northwest Georgia but anywhere in the contiguous United States. “If your mother lived in Tennessee and fell and broke her hip, and she’d been discharged from the hospital but shouldn’t be home alone yet, you could call the backup care service and they’d take care of her,” said Mathews.

Two child care centers, at Cobb and Kennestone, care for nearly 250 children of WellStar team members every day. Opened in 1968, Kennestone’s Learning Center was the first employer-sponsored day care in Georgia. With highly credentialed caregivers, many of whom have been at the centers for decades, these programs cost less than many independent child care centers.

WellStar’s “employer of choice” strategy has earned the System numerous awards as an exemplary place to work. Left, team members and members of the WellStar Board of Trustees celebrated WellStar’s naming in 2012 as one of *Working Mother* magazine’s top 10 family-friendly employers for the third year in a row.





A flextime program called FlexWorks allows team members to use an online self-scheduling system to plan their working hours. More than 250 unique schedules were in place as of mid-2012, including job sharing, compressed work-weeks, telecommuting, and staggered arrival and departure times. The list goes on: adoption and infertility benefits, lactation services, a comprehensive wellness program including free vaccinations, and a wide variety of educational opportunities, many with scholarships. Furthermore, WellStar is one of only two health systems in the Atlanta area that offer a defined-benefit pension plan. “Our Board of Trustees has always been very forward-thinking and has never faltered in its commitment to ensuring WellStar is a great place to work, and I think it speaks very highly of them,” said David Anderson, WellStar’s

executive vice president of Human Resources and Organizational Learning and chief compliance officer.

As WellStar’s work-life balance program has grown, so has team member engagement. Employee turnover rates dropped from 15 percent in 2006 to 9.8 percent in 2011. During the same period, WellStar went from low (18<sup>th</sup> percentile) to high (97<sup>th</sup> percentile) on Gallup’s employee engagement survey, comparing WellStar to other health systems in Gallup’s extensive healthcare database. WellStar also was recognized by Gallup as one of the 29 best companies worldwide.

WellStar’s dedication to its team members has earned nationwide recognition. Janie Maddox, the current chair of the WellStar Board of Trustees, and Connie Kirk, a long-serving trustee who recently retired from the Board, have been especially committed to building a

culture of employee engagement at WellStar. Thanks in part to their efforts, in every year since 2010, WellStar has been cited among the top ten in *Working Mother* magazine’s annual list of the 100 best companies to work for. WellStar also has earned the Alfred P. Sloan Award for Excellence in Workplace Effectiveness and Flexibility, appears on the Companies That Care Honor Roll, is an AARP Best Employer for Workers Over 50 and a Dave Thomas Adoption-Friendly Workplace. “When you’re creating a great culture, it isn’t just about the programs you offer,” said Anderson. “It’s the relationships, the sense of fairness, the consistency, the leadership, the camaraderie, the sense of team and family. Those things you don’t buy. Those are the things we’re seeking to create.”



“Healthcare in your own backyard” is the concept for WellStar’s new, outpatient-based health parks. The System’s first, above, in Acworth, opened in the fall of 2012, offering visitors hot-air balloon rides. Opposite, WellStar Kennestone Hospital became a primarily private-room campus upon the January 2013 opening of Blue Tower-West, a new, seven-story patient tower. Seen to the right of the hospital entrance, it is the completion of the Tom and Betty Phillips Tower.

Kennestone Hospital, in the heart of picturesque and historic Marietta, was by far the largest and oldest hospital in the area, with a 43-year history and, at the time, more than 500 beds and one of the busiest emergency rooms in the state. Cobb General Hospital, later renamed Cobb Hospital & Medical Center, opened in 1968 on a former peach orchard in the neighboring town of Austell. It was significantly smaller at about 300 beds, but it was strong and successful.

Both Kennestone and Cobb recently had acquired smaller, faltering hospitals. In 1980, Kennestone had purchased Urban Medical Center on Windy Hill Road, renaming it Kennestone Hospital at Windy Hill. Cobb, meanwhile, had reached a management agreement with Douglas General Hospital in nearby Douglasville.

#### STRENGTH IN NUMBERS

As strong and successful as these two community-grown institutions had been, the stability of both Kennestone and Cobb was being threatened in the new healthcare environment. For one thing, insurance companies that served large employers were limiting the number of hospitals with which they would contract. “When employers went to negotiate with a hospital, they’d look at the list of the top 10 hospitals that were taking care of their current employees. If you weren’t on the list, you wouldn’t get an offer,” said Don Campbell, M.D., a surgeon then practicing at Cobb who is now senior vice president of Physician Education and Student Affiliation for WellStar. “Cobb, because of its size, wasn’t on that list. I’d see someone in my office who needed a surgical procedure, and I couldn’t do it because I couldn’t put them at Cobb.”

When BellSouth, a large employer in the region, started paring down its list of covered hospitals, an alarm





TOM & BETTY PHILLIPS TOWER

TONE HOSPITAL

# STOPPING HEART ATTACKS BEFORE THEY START



Jim Bodiford's wife, Nancy, jokes that he gave her a heart screening as a Valentine's Day gift. When the couple went for their screening at WellStar in February 2011, Nancy "got an A+," as her husband put it. But Jim, a Cobb County Superior Court judge, did not. Told he got a "failing grade," Bodiford assured the WellStar doctors he planned to schedule a follow-up with his own physician. "They made me commit," he said.

His doctor ordered a series of tests, and the results were so worrisome that Bodiford was scheduled for a cardiac catheterization. "I thought the worst that might happen was they would put a stent in my heart, but

Dr. Barry Mangel and his team found that I had so many bad blockages that I needed open heart surgery. That was very overwhelming. I thought I was healthy!" he said.

WellStar provides hundreds of heart screenings every year. In the 15-minute screening, a CT scanner takes cross-sectional images of the heart, and physicians calculate the risk of heart disease based on calcium levels—as risk levels of heart disease are determined by calcium presence. Many people, like Nancy Bodiford, pass with flying colors, while others, like Jim, are shocked to learn they have serious heart

problems—but ultimately happy that they were detected before a serious heart attack.

Mangel and cardiothoracic surgeon Richard Myung, M.D., performed Bodiford's open heart surgery at WellStar Kennestone Hospital in April 2012. Afterward, he said, "That's when I began my new lifestyle. I watch what I eat much more, and I'm exercising all the time. And now, I truly have 50 percent more energy than I used to—I can't remember the last time I felt like I needed a nap! I think that's thanks to cardiac rehab. That screening really was a gift. We found out about my heart before I had a heart attack. It saved my life."



Rival hospital executives, Kennestone Hospital's Bernie Brown, above, at left, and Cobb Hospital & Medical Center's Tom Hill devised the original plan to create a multi-hospital health system serving five counties in northwest Georgia. John Maddox, far right, with patient, was inspired to volunteer at Kennestone after his treatment there for prostate cancer in 2003. He is a former president of the hospital's volunteer organization.

sounded for Tom Hill, then Cobb's president and CEO. Hill recalls sitting in his office one afternoon in the early 1990s and receiving notice from BellSouth that Cobb was no longer in-network for the company's employees. The reason? The company's managed care program was now requiring that hospitals have at least 300 annual admissions of BellSouth employees to be in its network. Cobb had never been able to reach such a threshold.

"We've got to do something about this," Hill declared. "We can't stand alone." He sought guidance from the members of his board. Hill wanted the board's advice: Should Cobb seek a deal with one of the major Atlanta hospitals, such as academic powerhouse Emory? Or should it look closer to home and try to build a sort of healthcare fortress within Cobb County, one that might bring together, sustain and even grow the rival hospitals that had sprouted in the area's tight-knit communities?

Kennestone and Cobb had been trying to poach each other's territories for some time. When, for example, Cobb developed an urgent care center on Dallas Highway, Kennestone put one right across the street.

"It didn't make a lot of sense," recalled Bernie Brown, then Kennestone's president and CEO. "We were duplicating efforts and competing with each other when we weren't the competition. The competition was other major systems trying to infiltrate our service area, for-profit ventures trying to pick off our service lines. We saw that there was a great opportunity here to leverage a new relationship and better serve the citizens of Cobb County with a merged system."

Conversations soon were underway toward a possible combination of Cobb and Kennestone. Kennestone held most of the cards—but not all of them. While Kennestone had the volume to rank within that golden top-10 hospitals list for employers, its volume was a double-edged sword.




"Kennestone could not possibly take care of everyone, and it needed a larger area from which to draw patients for complex things like open heart surgery," explained Campbell. "Kennestone needed Cobb and Douglas to draw those cases. Cobb needed Kennestone to get in on the insurance contracts." Coming together could be, in Campbell's words, "a real win-win" for both hospitals.

### THE LAUNDRY EXPERIMENT

Before plunging into a full and potentially risky merger involving two good-sized hospitals—each with its own entrenched culture—Hill and Brown wanted to try something smaller. They agreed that there was a perfect project: the laundry.



Surgeons at WellStar performed more than 2,000 joint-replacement surgeries in 2012, making the WellStar Musculoskeletal Network (MSK) one of the highest-volume programs in Georgia. In 2009, the System achieved The Joint Commission's Gold Seal certification in joint replacement surgery at its four participating MSK hospitals: Cobb, Douglas, Kennestone and Paulding.



“Kennestone and Cobb both had outdated laundries,” said Hill. The antiquated facilities were taking up valuable real estate that could be used for patient care. Rather than renovate two separate units, Hill and Brown decided to create a single, standalone laundry that would serve both hospitals.

The new laundry opened in 1992 in facilities convenient to both Cobb and Kennestone hospitals. Although it’s been vastly expanded and modernized over the years, that same laundry stands to this day and now serves the entire WellStar Health System.

“The laundry was a symbol,” said Brown. “It demonstrated that we could do things together more efficiently and economically than we could do them on our own. If we could do this, and do it so well, why couldn’t we do other things?”

### **“WE CHOSE COMMUNITY OVER COMPETITION”**

In Brown and Hill, Kennestone and Cobb had two administrators who did not try to protect their turf as others might have done, said Bob Prillaman, a prominent retired businessman who at the time served on the board of Cobb Hospital & Medical Center and later went on to chair the unified WellStar Board of Trustees. Prillaman, now an emeritus trustee, found that his fellow board members shared that sense of service.

“In one of our early meetings, I said that if we formed a board, I didn’t think it could be done unless we had an equal number of board members,” Prillaman said. “To my surprise, and in a testament to the wisdom of everyone around the table, that was agreed to. We were smaller, and Kennestone could have asked for more. I thought, ‘These people care about our community. This isn’t a turf



battle.’ We chose community over competition. We had good sense enough to know that we were hurting our own county and our own people by competing, and we all put aside many personal wishes to do what was the best thing for the people of our communities.”

No one involved realized it at the time, but in founding the new system, which they named Northwest Georgia Health System, Inc. (NGHS), the two hospitals were creating a revolutionary vision for healthcare in Georgia and much of the Southeast. The five counties that the new system ultimately would serve primarily—Cherokee, Cobb, Douglas, Paulding and, recently added, Bartow—were poised to grow exponentially over the next two decades. Indeed, Paulding County has consistently ranked among the fastest-growing counties in the nation. As the counties grew, WellStar would be there to provide care for their expanding populations, to employ thousands of their citizens and to further drive economic growth as the hospitals themselves drew more employers to this part of northwest Georgia.

Over the next 20 years, in roughly the amount of time it takes an infant to grow into a fully independent adult, two rival hospitals came together to create a richly integrated health system that comprises five hospitals, a large, multispecialty medical group that employs more than 500 providers, a 1,200-member medical staff practicing in more than 30 specialties, 16 imaging centers, six urgent care centers, an assisted living facility, a nursing center, two inpatient hospice facilities, a home healthcare service and a growing network of innovative health parks that bring outpatient care and wellness services conveniently close to patients’ homes.

Known today simply as WellStar, the health system

# A FOUNDATION OF EXCELLENCE

In 1989, leaders at both Kennestone and Cobb hospitals separately realized the need for foundations to raise funds for community projects. When the five hospitals merged four years later, the Kennestone Foundation and the Cobb Foundation also merged.

The newly created foundation—today, the WellStar Foundation—grew rapidly. At first, their annual golf tournament and a dinner gala became the social events of the season in Cobb County. Then, according to Sandy White, former executive director of the WellStar Foundation, things moved to the next level: “We hired a consultant and focused on raising major and estate gifts through corporate sponsorships, internal employee giving and community contributions,” she said.

The Foundation reached a point where it was raising about \$3.5 million a year, and WellStar put much of that money back into its community: partnering with the Cobb County School District to provide school nurses and create a program for children called Healthy Futures, building six Habitat for Humanity homes, helping to build a family shelter in Douglas County, and establishing partnerships with the Junior League and Cobb County Defensive Driving. Then came the Foundation’s greatest achievement: almost singlehandedly raising the funds to launch Tranquility, one of the first inpatient hospices in Georgia. It opened in 1998 on the WellStar Cobb campus. According to Allen Separk, a member of the boards of WellStar and the WellStar Foundation, WellStar provided \$500,000 in seed money for the hospice, but the rest of the \$4 million price tag came primarily from

community donations to the Foundation.

“That hospice might not have happened at all had it not been for the Foundation, and it’s been an absolute blessing to the people of our community,” said Separk. The Foundation also raised a substantial percentage of the \$12 million cost of building Tranquility at Kennesaw Mountain, the second WellStar inpatient hospice, which opened in 2012 near the WellStar Kennestone Hospital campus.

Donors stepped up significantly after the economic crash of 2008, a testament to the community’s longstanding support for WellStar and its hospitals—support that’s crucial if the System is to continue to provide world-class care to those who need it. “These are very difficult times to raise money,” said Separk. “People see huge hospital bills and read headlines saying WellStar has consistently strong revenues, so they don’t think we need their support. But they don’t realize we’re a not-for-profit health system and all that money goes right back into services to our community and uncompensated care for people without insurance—and today there are more people than ever without insurance, unable to pay for their care.”

To better target its programs, the Foundation completed an audit of all of its community programs in 2011. “We want to focus on the top diagnoses in our community and understand how those affect uninsured people—those that we as a community and a society ought to be taking care of,” said Tracey Atwater, the Foundation’s president.





WellStar Health Place, located on the WellStar Kennestone Regional Medical Center campus, is the first hospital-based public fitness center in Georgia—exemplifying WellStar’s comprehensive focus on preventive healthcare. “Exercise reduces so many of the risk factors for disease,” said cardiac rehab physician Joe Phillips, Jr., M.D., himself a former heart patient.



WellStar sponsors hundreds of community events every year. In 2006, volunteers from all five WellStar hospitals and WellStar's then-president and CEO, Robert Lipson, M.D., front row, right, joined then-Georgia Governor Sonny Perdue, front row, left, at the state capitol to kick off the American Heart Association's Go Red for Women campaign. The campaign raises awareness of heart disease as the leading killer of women. Opposite, WellStar sponsored and was the official healthcare provider for the Atlanta Beat, a Women's Professional Soccer team that played in the city in 2010 and 2011.

Level III neonatal intensive care units (NICUs) at WellStar Cobb and Kennestone hospitals provide state-of-the-art care to give fragile, premature babies the best possible start in life and to offer privacy and comfort to help anxious new families bond.





has grown up to achieve statewide, regional and national recognition as a leader in providing high-quality healthcare. With more than 12,500 team members, more than 66,000 inpatient stays and 300,000 Emergency Department visits every year, WellStar's hospitals regularly rank among the best in metro Atlanta, according to *U.S. News and World Report*. Its emergency rooms are among the busiest in Georgia and its key quality statistics, such as the reduction and elimination of certain hospital-acquired infections, rival those of national leaders like the Mayo Clinic and Cleveland Clinic. According to surveys conducted by the Society of Thoracic Surgeons and other prestigious organizations, WellStar's heart surgery and cancer programs consistently rank in the country's top 10 percent on a number of important quality measures.

With a Level II trauma center, state-leading neonatal intensive care units (NICUs) and the first CyberKnife robotic radiosurgery system in the state, WellStar has grown considerably and established itself as a center of excellence in healthcare in Georgia and throughout the Southeast. All the while, it has maintained financial stewardship and stability that ranks among the top 20 percent of not-for-profit health systems in the country and provides more than \$200 million in uncompensated care every year. WellStar is the 10<sup>th</sup> largest employer in Atlanta, and more than 1,000 new jobs are on the horizon with the opening of the health parks, an expanded WellStar Medical Group and a replacement hospital in Paulding County.

None of this was a foregone conclusion when the hospitals that became WellStar first came together. Many hospitals in Georgia and elsewhere failed—in some cases, spectacularly—in attempts to establish health systems around the same time. For the upstarts in Cobb County, seeking success as a system required facing many of the same challenges that these other systems couldn't endure.





CHAPTER TWO:

# THE FIVE HOSPITALS



**BETWEEN 1948 AND 1973, FIVE HOSPITALS  
SPROUTED IN THE REGION NORTHWEST  
OF ATLANTA, BORN AND NOURISHED  
BY THE NEEDS, DEDICATION AND HARD  
WORK OF COMMUNITY MEMBERS.**

In the late 1930s, the economy of northwest Georgia lay fallow. The Union Army had occupied and then burned the picturesque streets of Marietta during the Civil War. The Great Depression fell hard on the long recovery that followed, leaving largely agricultural Cobb County struggling. World War II, however, set the stage for a reversal of fortune. In 1941, with American involvement in the war looming, the U.S. Civil Aeronautics Administration built Rickenbacker Field (later renamed Dobbins Air Reserve Base) in southeast Marietta. Within a year, a 200-acre Bell Aircraft plant had sprung up next to it. Over the next four years, as the plant feverishly assembled the B-29 Superfortress planes that would eventually be used in the bombing campaign against Japan, employment surged to 28,000—more than three times the town's population. The plant closed in 1946, but it soon reopened as the Lockheed-Georgia Company. It was the largest employer in Georgia, with 31,000 employees.

Between 1940 and 1950, the population of Marietta nearly tripled, from 8,667 to 20,687. Local businesses began to prosper, and thousands of new homes sprang up virtually overnight. What Cobb County didn't have and desperately needed was a hospital that could meet the needs of this rapidly growing community. The simple, 54-bed Marietta Hospital on Cherokee Street had been built in 1925 to serve a far sleepier and smaller Cobb County.

### THE HILL-BURTON ACT

An effort in 1946 to build a larger, city-financed hospital met with failure. Ground was broken and a foundation was poured on land just off Church Street in downtown Marietta, but funding ran out and the plans were abandoned. That same year, however, Congress passed a law that would prove instrumental in establishing all five hospitals that today form WellStar Health System: the Hill-

Burton Act. Sponsored by U.S. Senators Harold Burton of Ohio and Lister Hill of Alabama, the act aimed to improve the nation's healthcare by providing federal grants and guaranteed loans to states and municipalities to build new hospitals or improve and expand existing ones.

There was a catch: the state and local municipality *each* had to match the federal money, leaving the government to pay one-third of the cost. In 1948, a group of local citizens formed the Marietta Hospital Authority and helped pass a \$400,000 bond issue to support the new hospital. The state of Georgia provided an additional \$350,000, and with \$407,000 in Hill-Burton funds, the authority had what it needed to begin making the vision of a true hospital in Marietta a reality.

Construction on the abandoned Church Street site resumed on March 7, 1949, and on May 21 of the following year, the four-story, 105-bed hospital was dedicated in a ceremony open to "all North Georgia citizens," featuring a keynote address from then-Georgia Governor Herman Talmadge. From its vantage point atop sloping Campbell Hill Street, the new hospital looked onto two Georgia landmarks: Kennesaw Mountain, the highest point in the Atlanta area and site of a bloody Civil War battle, and Stone Mountain, a remarkable quartz dome featuring a bas-relief Confederate memorial carving. The names of these two mountains were combined to give the hospital the name it bears to this day: Kennestone.

The front page of the May 21 edition of the *Marietta Daily Journal* (MDJ) was devoted to rapturous coverage of the dedication. "Today, in its classic beauty and its scientific

The original Kennestone Hospital, shown opposite, cost \$1.5 million to build. The first patient to undergo surgery there was a little girl who needed a tonsillectomy. Two babies also were born at Kennestone on the first day it opened its doors on June 12, 1950, a few weeks after the dedication ceremony featured in the *Marietta Daily Journal*, below.



# HEALTHY HEARTS

In 2009, after having a heart attack, getting a stent placed and going through triple bypass surgery all in one year, obstetrician-gynecologist Joseph Phillips, Jr., M.D.—“Dr. Joe” to all who know him—said, “I finally decided to pay attention to this disease that was trying to kill me.”



The physician began taking seriously the old adage to heal himself, devotedly participating in a personally designed program of cardiac rehabilitation exercise at WellStar’s Health Place, located on the campus of WellStar Kennestone Hospital.

Health Place was established in 1986 as the first hospital-based fitness center in Georgia. Open to the public, it’s ranked as one of Atlanta’s top 10 fitness centers, offering a full complement of exercise equipment and programs. Since 1989, it also has hosted the cardiac rehabilitation program that gave Phillips and thousands of others a new lease on life.

One of those physicians is Phillips, who pursued continuing education so he could devote himself to his new medical passion: bringing damaged hearts back to better health through an improved lifestyle. “These patients have been given the diagnosis of a fatal disease that’s trying to kill them every day,” he said. “Although we do miraculous things with science

and technology to alter this disease, we still can’t totally cure it. That’s the bad news. The good news is that, unlike other disease processes, the patient can do so much to stop the disease in its tracks and stabilize it, and that’s what we help them to do here at WellStar Health Place.”

Some 300 patients every week exercise under the careful supervision of cardiac rehabilitation experts at Health Place. Initial one-hour sessions, for patients who have very recently had heart episodes, feature monitoring by a two-lead electrocardiogram (EKG) during the workout and cool-down period.

Patients then graduate to the next phase—a decision, Phillips said, that is all too often unfortunately made for them by their insurance coverage—in which they are still supervised by exercise physiologists but are no longer on EKG monitoring. That phase can last the rest of their lives—and it should, said Phillips, who faithfully keeps up his cardiac rehabilitation exercise. “It’s a lot cheaper than most gyms, and you’re getting what amounts to a personal trainer,” Phillips said. “And it will help you to live longer and feel better.”

WellStar Health Place, which is open to the public, is one of the Atlanta area’s top-ranked fitness centers and houses WellStar’s Cardiac Rehabilitation Program. Prospective members get a complimentary fitness evaluation from a degreed exercise specialist and a healthy workout program designed just for them.







completeness, it stands to even surpass the fondest hopes envisioned a year ago,” the paper reported. It described the new building in meticulous detail, from the switchboard room to the cardiograph and cystoscopy facilities, emergency department, surgical rooms and obstetrical suites. These facilities, the paper declared, “are said to be among the best available in hospital circles in the Southeast.” In a brief article that would be unimaginable under today’s patient privacy laws, the *MDJ* named some of the hospital’s first patients, including an operating room nurse who had a tonsillectomy.

### **KENNESTONE: A PRESIDENTIAL HOSPITAL**

As Cobb County continued to grow, so did Kennestone Hospital. In its first decade of operation, the hospital more than doubled its patient capacity, reaching 300 beds when the south wing opened in 1959. As the hospital grew, it constantly sought to offer Cobb County citizens the kind of care that was once thought only to be available in Atlanta. In 1968, Kennestone opened a new coronary care unit, the most up-to-date in the Atlanta area and the only one staffed entirely by registered nurses. That milestone was followed the next year with the opening of its first intensive care unit. In 1975, a \$21 million expansion increased Kennestone’s capacity to 539 beds. Today, Kennestone’s capacity is 633 beds.

When U.S. presidents visit Atlanta, they land at Dobbins Air Reserve Base, just six miles from Kennestone. After the election of Jimmy Carter in 1976, those visits took place often—and Kennestone had to be prepared for any emergency involving the commander in chief.

“We had a red hotline that stayed in the emergency room the whole time he was president,” recalled Michele Wilhoit, RN, who has worked in Kennestone’s Emergency Department since 1974. “We had to have a room ready



Kennesaw Mountain, one of the two peaks for which the hospital is named, stands behind an artist’s rendering, above, of the long-range expansion plans for Kennestone Hospital in the 1960s. The original Kennestone, its entrance shown at left, had a 28-member medical staff and 80 team members to serve its 105 beds. By the time the crew of nurses gathered for training in an online information system called MedStar at a nursing station, opposite, in 1979, the hospital had more than tripled its capacity.



for him and available at all times and a room next to that one for the Secret Service.”

By the end of the 1970s, Kennestone was no longer the only hospital in this part of northwest Georgia, or even in Cobb County. Cobb General Hospital, which had opened in Austell in June 1968, was thriving, although some other nearby institutions—such as Paulding Memorial Hospital in Paulding County—were struggling. Though Kennestone remained the premier healthcare institution in Cobb County and continued to grow, there were pieces missing from the puzzle. One thing that Kennestone’s board and administration felt would be essential to establish their hospital as a genuine leader in the all-important field of cardiovascular medicine was a cardiac catheterization lab. Kennestone’s administrators felt they couldn’t recruit top-notch cardiologists without one.

There was just one hitch. To add cardiac catheterization services, Kennestone needed a certificate of need from the state of Georgia, something the state wasn’t inclined to offer. But less than 10 miles away on Interstate 75 sat Urban Medical Center, a small, acute-care facility that was having financial problems and a bit of an identity crisis. The hospital didn’t have many assets, but it did have a certificate of need for its cardiac catheterization lab. So in early 1980, Kennestone acquired Urban Medical Center and gave it the name Kennestone Hospital at Windy Hill. The certificate of need for cardiac catheterization was then transferred from Windy Hill to Kennestone, laying the foundation for a vibrant cardiovascular medicine program that would ultimately help to rank WellStar Health System among the best in the Southeast.

Another Kennestone milestone didn’t occur in the hospital at all but rather in a small surgery center across the street. On June 22, 1988, Kennestone’s then head of

## A LONG LIFE WELL-LIVED

Walking through Atherton Place, the senior living community located behind WellStar Kennestone Hospital on Tower Road, with Director Joe Van Horn is like being introduced to a new family. Every few steps, Van Horn stops to chat with a resident, discussing golf games or a team member’s new baby. “This isn’t just a job,” said Van Horn. “It’s a cross between a lifestyle and a ministry.”

For its approximately 185 residents, Atherton Place offers everything from basic independent to assisted living to advanced care for seniors with memory needs. Most of Atherton Place’s residences are independent studio and one- or two-bedroom apartments. However, in 2009, it opened a memory unit enabling residents with dementia to stay in familiar surroundings instead of being confused or frightened by a move to a specialized dementia facility.


Van Horn likens the spacious facility to “a sitting cruise ship.” There’s a beauty salon, a gift shop with a drug store and grocery items, a podiatrist, and, once a week, representatives from a bank set up shop at Atherton Place so residents can do their banking. Almost every day, the large community room rings with the sound of local musicians. A weekly calendar lists a variety of outings: to a Chick-Fil-A for lunch or a longer excursion to Savannah and Hilton Head.

Atherton Place first came to life in 1988, the brainchild of a local pharmacist and Kennestone Board member, Lucius Atherton. It was the first independent living center associated with a

hospital in Georgia—and although other hospitals copied the model, their living centers all failed or were spun off from their health systems.

Referring to Kennestone Hospital’s former president and CEO, Van Horn said, “Bernie Brown did his due diligence and felt that having a senior living community as part of Kennestone would be good—a way to not only take care of acute healthcare needs but also to emphasize wellness. Today, Atherton Place perfectly fits WellStar’s brand expression: “We believe in life well-lived.”

The logo for Atherton Place features the name "ATHERTON PLACE" in a serif font, with three stylized red flowers or leaves positioned below the word "ATHERTON".



“Independent living today resembles the assisted living of 20 years ago,” said Joe Van Horn, the director of Atherton Place, WellStar’s senior living community. Atherton Place has seen the average age of its residents increase from around 79 when it opened in 1988 (its first brochure is shown in inset) to about 85 in 2012. Therefore, residents typically have more health issues and a greater need for memory care.



Waller Hosiery Mill  
Employees

B. Crook  
Finnell  
Hudson  
Lee Johnston  
Brewell  
Smith  
Southernland  
Wiggner  
Willingham  
Bester  
Bester  
Jackson  
Manor  
Ratan  
Jett  
Clay  
McNamee  
Pearson  
Walters  
Bater  
Paller  
Robertson  
Smith  
Kinsaid  
Rogdale  
H. Foster

582 77

Warren  
Babb  
Stratton  
Clay  
\$ 3364

Rakstraw 640

Employees 4622 71

## Cash Received

19

Apr 12 From Hand Election 65 43 ✓  
15 Dr Scott. Pledge 50 00  
Mr. Ralph Butler 10 00  
R. W. Denton 15 00  
Mrs Kate Rakstraw 4 00  
19 Helma Rakstraw 6 40  
17 Mr Bert Wood 7 71  
Mrs " Wood's Grand 2 23  
Apr 20 J. B. Shursh 10 00  
J. C. Massey 20 00  
John Pittard 5 00  
A. B. Payne 10 00  
Byford Cole 5 00  
23 Hal Hyatt 10 00  
Kerschel Smith 8 00  
Rayd Kenfroe 8 00  
23 Receipts Loring Heron 284 00 ✓  
Mrs E. Janson 100 00 ✓  
24 J. M. Adolph 1 00  
" 28 Mrs W. Peckley 20 00  
11  
Apr 30 Refund In E. B. Peme 36 75 ✓  
" 30 Intermittent Contributions 10 00 ✓  
May 1 Mrs Pipe W. W. 25 00 ✓  
3 Wimpsey Wiseman 5 00  
3 Fred Shuff 10 00  
Mrs Mrs Glenn Hay 5 00  
Miss Ruth Bell 7 25  
Mrs J. McMichon 10 00  
J. McMichon 10 00  
Layman Cochran 14 00  
J. C. Cooper 11 00  
George Dale 14 00  
Janet Huff 14 00  
Denton Huff 14 00  
Petey A. Ken 8 00  
Bide Samuel 8 00  
Seal Smith 8 00  
Allen Bennett 14 00  
W. H. Pope 14 00  
Ravels Morris 8 00  
Mrs John R. Denton 10 00  
15 00

obstetrics, William Saye, M.D., and general surgeon Barry McKernan, M.D., performed the nation's first laparoscopic gall bladder removal—bringing minimally invasive procedures to general surgery.

"That single procedure on that day changed the way general surgery would be done forever," said thoracic surgeon William Mayfield, M.D., WellStar's chief surgical officer. "From a training center in the office building across the street from Kennestone, two of our leading surgeons trained more than 15,000 of their colleagues to perform laparoscopic cholecystectomies." Today, all WellStar surgeons in all specialties are trained in minimally invasive procedures.

### PAULDING HOSPITAL: "BULLY" FOR HEALTHCARE

When a young Loran Wills came home to Paulding County in February 1953 after serving in the Navy during the Korean War, he began hearing talk about a hospital in the county. After decades of flat or declining population, Paulding, like Cobb County, was growing.

In 1954, Paulding County's ordinary—the probate judge who operated out of a tiny, one-man office—appointed a seven-member hospital authority board to lead efforts to establish the county's first hospital. Wills' father, John Loran Columbus Wills, a hardware store owner known to everyone as "Bully," was appointed as treasurer. The judge couldn't have made a better choice.

"My dad was like a little bulldog," recalled the younger Wills. To raise the daunting sum of \$131,000 that they needed to get Hill-Burton funds, Bully and other Paulding County citizens on the board held cake walks, raffled off an Edsel car and put penny jars in the shops of local merchants. Bully Wills kept a logbook of pledges from family members, friends, neighbors, employees of local businesses and community members. "My wife,

Peggy, and I signed a pledge for \$100," Loran said. "My dad said, 'You don't have to pay me now, but one day, I'll come to you and say it's time to pay.' Three years later, we paid the \$100."

By 1957, the people of Paulding County had raised the money they needed. Samuel Braly, M.D., who would become the hospital's first medical director, often told the story of the day the authority board met with a man named Ezell who represented the state of Georgia—which had to pony up the other third of the funds for the hospital under the Hill-Burton Act. "Bully Wills hooked his thumbs in his suspenders and looked the man straight in the eye," Braly recalled. "He said, 'Okay, Mr. Ezell, we've got our money. What about yours?' Mr. Ezell smiled, and the plans were approved."

With \$2,452 of the funds, the hospital authority bought a 22-acre property in the county seat of Dallas from landowner George Bullock. Groundbreaking for Paulding Memorial Hospital, later renamed Paulding Memorial Medical Center, was held on August 2, 1957. A year later, on August 20, 1958, a 25-bed, 14,000-square-foot hospital was dedicated. In November of the following year, Bully Wills, who had faithfully attended authority meetings and canvassed the county for pledges even as his health faltered, died of congestive heart failure in the hospital he had helped to build.

Raising the money to build Paulding Memorial was just the beginning of a long financial struggle. "We needed a census of

19 people in the hospital to keep it going and keep paying the nurses and the other staff. We'd struggle in meetings, burning the midnight oil to make payments," said Loran Wills. Everyone sacrificed to keep their homegrown hospital open: board members dug into their own pockets and missed mortgage payments to help Paulding meet payroll. Well into the 1970s, staff members quietly agreed to take no salary for an occasional pay period.

Even under these financial pressures, Paulding Memorial grew. Between 1963 and 1976, it recorded 52,803 admissions, 9,752 surgeries and 3,073 births. In 1965, the hospital opened its own nursing center. "There was a terrific need for it," said Wills. "At the time, there was nothing at all in the county to take care of the infirm or the aged."

To this day, the nursing center remains a crown jewel of WellStar Paulding Hospital. Its halls still carry

John "Bully" Wills, the driving force behind the establishment of Paulding Memorial Hospital, kept a meticulous logbook, opposite, of pledges, some as small as \$1. In March 1956, 26 employees of the Dallas Hosierey Mill contributed \$582.77. Later entries reveal the popularity of a raffle of an Edsel car. The hospital's groundbreaking, below, took place in August 1957 on a site purchased from local landowner George Bullock. "Okay, son, it's time to ante up," Bully Wills told his son Loran, a long-serving member of both the Paulding County Hospital Authority and WellStar Paulding Regional Health boards, when he took Loran's pledge of \$100 in 1954. As the canceled check and receipt below testify, the younger Wills paid up just before groundbreaking.





Paulding Memorial Hospital operated a school for licensed practical nurses from 1965 to 1985. Below, left to right, are members of the program's first

graduating class in 1966: Grace Carter, Bernice McClure, Athaleen Garner, Maude Hitchcock, Etta Cooper, Edna Johnston and Carolyn Fields. Paulding

Memorial Hospital changed its name in February 1990 to Paulding Memorial Medical Center. Left, a team member's 20-year service pin.





The Emergency Department in the current WellStar Paulding Hospital, above, uses a “green zone” to speed patients with minor health issues like sore throats through quickly, while those with potentially more severe ailments receive care in the main emergency room. That process will continue in the new replacement hospital, which, with 30 adult emergency exam rooms and 10 pediatric exam rooms, is expected to open in April 2014.

an old-fashioned air, but its reputation for personal, compassionate care for the elderly exceeds that of many, more modern facilities.

In June 1970, Paulding Memorial built a three-story addition, bringing the number of beds to 130 in the hospital and 45 in the nursing center. By then, founding Medical Director Braly and founding physicians John Covington, M.D., Jerry Worthy, M.D., and Darius Smith, M.D., had been joined by more than a dozen other doctors. “They weren’t all stationed here,” Wills said. “Some would come over two days a week from Kennestone and other places for their clinics. But once they came, I don’t think we ever lost any of those doctors. They loved it out here, because many of them came from small rural towns just like this one.”

In the mid-1970s, 37 of the hospital’s beds were converted to nursing center beds, which reduced the number of beds to 93 in the hospital and increased them to 82 in the nursing center. In 1978, Braly, who had been a fixture in the Dallas community, passed away. Two years later, the Samuel Braly Annex, with an additional 50 nursing center beds, was dedicated in the hospital he had helped to shape. “He used to call in on the dictation line and recite poetry to us,” recalled Donna Garner, RN, who has worked at Paulding since 1972.

Tales like that are common among longtime employees. Paulding, even as it grew, remained a deeply homegrown hospital at the heart of its small community. “During the holidays, we used to have a time when all the families in the area would bring a dish,” recalled Joyce

Hulsey, LPN, director of nursing, Long-Term Care, who has worked at WellStar Paulding since 1971. “One Christmas, there were 350 people lined up in the hallways for a potluck dinner.”

Despite its community’s devotion, WellStar Paulding had never been able to create a sound financial footing. The fact that it managed to grow at all during the 1970s and 1980s is remarkable; there were years when the hospital’s census was so low around the holidays, Hulsey recalls, that the nursing center staff was asked to take paid time off so hospital staff could work its hours and earn money for Christmas. T. E. “Rusty” Durham, a longtime member of the WellStar Board of Trustees who at the time chaired the Paulding County Hospital Authority, recalls the struggle. “We were having difficulty attracting physicians, and we needed a new hospital or improvements to the old one, but we couldn’t get the county commissioners’ backing to invest in new facilities. As a small, rural system, we knew we wouldn’t be able to survive in the future within managed care, so we began to have discussions with potential partners.”

One of those potential partners was Georgia Baptist Hospital in Atlanta. Another was Cobb Hospital & Medical Center—17 miles to the east of Paulding. In February 1992, Cobb President and CEO Tom Hill proposed a merger, but Paulding initially rejected the idea. “We were still unsure about whether that was the best match, and some of the doctors wanted to remain independent,” said Durham. A year later, Hill and his new ally, Kennestone CEO Bernie Brown, were back with a new proposal: that Paulding join the fledgling Northwest



Georgia Health System. The idea of becoming part of a larger health system rather than merging with another hospital sounded attractive to Durham and the rest of the Paulding leadership. The hospital authority board approved the idea, and Paulding became the last of the five hospitals to join NGHS, on August 17, 1994.

“Everything became better as a result of the merger,” said Durham. “We went from having the reputation of being a dated local hospital to the reputation of WellStar as it evolved. Today, we still have that family-oriented, local atmosphere with that personal touch but with the WellStar reputation for excellence.”

### COBB HOSPITAL: TOWERS IN A PEACH ORCHARD

Marietta wasn’t alone in its phenomenal growth between 1940 and 1960. Cobb County, which surrounded it, was also at the beginning of an upswing that would take it from a population of 38,000 in 1940 to nearly 115,000 by 1960. At one point during the 1960s, nine schools opened in a single year.

In southern Cobb County, community leaders watched Kennestone Hospital’s growth and began to think that they needed a hospital closer to home. One of the goals of the Hill-Burton Act had been to ensure that there were 4.3 hospital beds for every 1,000 people in a given area; the 300 beds that Kennestone boasted didn’t come close to fulfilling that need. So in 1962, two local leaders—family practice physician Richard Hammonds, M.D., and businessman Charles “Pete” Wood, a vice president with Bank South—became the driving forces behind the formation of the Hospital





WellStar Cobb Hospital includes a four-story North Tower, a seven-story South Tower and a four-story Women's Center. In 1986, Cobb opened the Barrett Center, a comprehensive outpatient surgery unit. Today, 65 percent of surgeries at Cobb are performed on an outpatient basis. Opposite, Paulding Memorial Hospital had conducted a major disaster drill just a week before Southern Airways Flight 24 crashed nearby in April 1977, killing 67 people, including several on the ground. The plane barely missed hitting an elementary school.

Cobb General Hospital dedicated its seven-story South Tower in September 1975, but it had begun moving patients to the new wing beforehand. The first patient, the *Marietta Daily Journal* reported, was a Mrs. Marie Johnson, who was given a dozen roses. Cutting the ribbon along with Cobb County Hospital Authority Chairman Don Hames was Cobb County Commission Chairman Ernest Barrett, in whose honor the Barrett Center would later be named. The new wing put Cobb General Hospital among the top 10 percent of Georgia hospitals by size.



**SUPPORT YOUR LOCAL HOSPITAL**  
**COBB GENERAL HOSPITAL AUXILIARY**

Authority of Cobb County. Wood was a community leader in Smyrna. Hammonds grew up in Austell and had a small office on Austell Road.

Originally, there had been talk of locating the new hospital in the town of Smyrna, but businessman M. Floyd Grainger, who also was a county commissioner, donated some of his property—a 50-acre peach orchard—in Austell for the hospital.

Ground was broken in early 1965, and on June 3, 1968, Cobb General Hospital opened as a 167-bed, acute-care general hospital with a 58-member medical staff and 150 employees. The four-story building, featuring three patient-care floors, still stands as WellStar Cobb's North Tower. As with Kennestone and Paulding hospitals, Hill-Burton funds were instrumental in building Cobb General: once the Hospital Authority of Cobb County provided its share of funding through the sale of \$1.8 million in revenue bonds, the federal government contributed its promised \$1.7 million.

Pictures of Cobb General Hospital from that time show what today's leaders still recall as a "country hospital in the middle of nowhere." But that didn't last long: by 1970, Cobb County's population had reached nearly 200,000; by 1980, it was almost 300,000, more than double the size of the community the hospital was built to serve. Like Kennestone, Cobb General Hospital set out on a nearly continuous journey of growth from the moment it opened its doors.

In 1972, Cobb General opened a 10,000-square-foot expansion of its emergency department; in 1975, it added a six-story South Tower; and in 1993, it unveiled the first two stories of the Cobb Hospital & Medical Center (Cobb had acquired its new name by this time) Women's Center. A two-story addition would be constructed 10 years later. The state-of-the-art Women's Center included the Family



Birthplace, a maternity section with 20 private rooms—a standard of care that many hospitals offer today but that was almost unheard of at the time.

By this time, Cobb Hospital & Medical Center had nearly doubled its patient capacity; it was licensed for 322 beds and maintained a medical staff of 247 physicians. (Cobb would ultimately grow to a capacity of 382 beds by 2012.) It also had the financial wherewithal to play angel to another struggling West Georgia institution, Douglas General Hospital in the Douglas County town of Douglasville. Talks toward a possible union began in the summer of 1992, and by that September, the two institutions had agreed to a contract under which Cobb

Hospital would manage Douglas.

Bob Prillaman, a WellStar emeritus trustee who also served on the Cobb Hospital & Medical Center board for many years, recalls a meeting between Cobb and Douglas officials as the negotiations neared their end. “I got to Douglas Hospital a little early, and I’d never been there before,” he said. “I met the most pleasant lady at the information desk and asked her where the two boards were meeting. She told me, and then hesitated and asked, ‘You’re from Cobb Hospital, aren’t you?’ When I said yes, the tears just started streaming down. She said, ‘You know, this hospital is so important to our community. It’s all we have. I hope you folks do something to keep it alive.’”



Charles “Pete” Wood was 28 years old when he was appointed to the Hospital Authority of Cobb County in 1962. A lifelong resident of Cobb County, Wood served Cobb Hospital and WellStar without interruption for the next 50 years, including several stints as chair of the Hospital Authority of Cobb County as well as a term chairing the WellStar Board of Trustees. Cobb Hospital’s therapeutic horticulture garden, left, opened in 1992 with a fragrance garden, a butterfly garden and texture garden for the blind. In June 2000, the Board voted to name the garden in Wood’s honor.

The role of WellStar Windy Hill Hospital, below, has evolved over time. Today, it is a leader in long-term acute care and offers specialty outpatient services such as interventional radiology and sleep studies. Windy Hill also is the only WellStar hospital to offer retinal surgery.

Prillaman couldn't walk away from the desk. "She told me about the many things it had done for her friends and what it meant to the employees. I'm sure we would have voted for the partnership anyway, but I couldn't break that lady's heart!" After the meeting, during which the hospitals had worked out terms of the merger, he found the woman still waiting at the desk, long after she should have gone home. "I told her, 'I think everything is going to be okay.'"

#### **WINDY HILL HOSPITAL: A CARDIAC KICKSTARTER**

Unlike the other four hospitals in WellStar Health System, Windy Hill was not founded as a not-for-profit hospital. Instead, in the early 1970s, a physician named Larry Cooper and two local businessmen saw the potential for growth in this still relatively undeveloped part of Cobb County, almost literally a stone's throw from Dobbins

Air Reserve Base. In 1973, with no hospital authority or Hill-Burton funds, they opened a private hospital, Urban Medical Center, on Windy Hill Road in Marietta.

From its earliest days, Urban Medical Center was marketed primarily as a general service hospital for private-pay patients. It struggled to find a role in the community, however, and as early as the late 1970s, the undercapitalized hospital was struggling. Nevertheless, it had managed to do something that larger and more established Kennestone Hospital hadn't: convince the state of Georgia to grant a certificate of need to start a program to provide cardiac catheterizations and open heart surgery. The first procedures were performed by December 1977.

In January 1980, the Cobb County Kennestone Hospital Authority purchased Urban Medical Center and began operating Kennestone Hospital and Windy Hill Hospital under the umbrella of the Kennestone Regional



# WORLD-CLASS SLEEP CENTER MAKES A WORLD OF DIFFERENCE



When Chris Parks got the call telling him that his Army buddy had died of a sleep apnea–related heart attack, his wife pressed him to have a sleep study.

“She said I snored a lot and would occasionally stop breathing and gasp for air,” said the 35-year-old Powder Springs resident. “My buddy was 30 years old

and left behind a wife and two young children. That really hit home. He had put on a lot of weight after he got out of the service, just like I had.” Though Parks did not realize he snored and stopped breathing when he slept, he did constantly feel lethargic. “I could sleep for 10 hours and still wake up tired and groggy,” he said.

Parks is not alone. According to the National Institute of Neurological Disorders and Stroke, about 40 million people in the United States suffer from chronic long-term sleep disorders. An additional 20 million people experience occasional sleep problems.

Parks went to the Sleep Center at WellStar Windy Hill Hospital, where, according to pulmonologist Neelima Kothari, M.D., “WellStar sleep physicians and technicians are experienced, passionate and well versed in a broad range of sleep disorders.” Kothari administered a polysomnogram to measure Parks’ breathing pattern, electrical brain and heart activity, eye movement and chin and limb muscle movement. He was diagnosed with obstructive sleep apnea, a common but potentially dangerous disorder in which breathing repeatedly stops and starts. It can increase a person’s risk of high blood pressure, heart disease and stroke.

Like many people with sleep apnea, Parks was prescribed continuous positive airway pressure (CPAP) therapy. A CPAP machine delivers pressurized air through a mask placed over the nose or whole face while sleeping. The pressurized air ensures that the upper airway passages remain open, preventing apnea and snoring.

Parks said that, once he started sleeping with a CPAP, he became much more alert and better able to focus on his work as a Department of Defense information assurance officer and on his role at home as a husband and father of three children, with a fourth child on the way. “My job is extremely detail oriented, requiring a lot of coordination with entities inside and outside of our department,” Parks said.

The opening of the Douglas General Hospital gift shop, opposite, in 1975 gave the hospital's volunteers a source of revenue. To raise funds for equipment such as wheelchairs, blanket warmers and over-the-bed tables, the volunteers also would hold raffles—at one point raffling a car donated by Western Auto owner Ike Owings, whose wife, Ann, volunteered at the hospital.

Healthcare System. In January 1987, the hospital's name was changed to Kennestone Hospital at Windy Hill. To this day, Windy Hill remains legally owned by the Cobb County Kennestone Hospital Authority, although with a separate license and separate Medicare status.

As Kennestone continued its growth in the 1980s, Windy Hill was just treading water, according to Lou Little, WellStar's senior vice president for Post-Acute Services and president of WellStar Windy Hill Hospital. "A number of other services migrated to Kennestone," he said. There were some initiatives to try and build growth on this campus, but they were largely unsuccessful." Windy Hill did add some services, such as an 18,900-square-foot outpatient surgery center and pharmacy in 1987 and a 4,000-square-foot emergency and rehabilitative center and intensive care unit in early 1993. During the late 1980s and early 1990s, Windy Hill's emergency room was the seventh busiest in the nation among hospitals with fewer than 100 beds. The hospital nonetheless had trouble

attracting the mix of specialty physicians—ear, nose and throat specialists, orthopedists and vascular surgeons—necessary to support the cases that the emergency room was admitting. Moreover, it still wasn't clear what sort of hospital Windy Hill wanted to be. As the system that would ultimately become WellStar came together in 1993, Windy Hill's future was uncertain.

### DOUGLAS HOSPITAL: BIRTHING CENTER PIONEER

A few local doctors practiced medicine in Douglas County in the 1940s, but the nearest hospitals were in Atlanta. "Back in those days, U.S. Highway 78 was a long and tedious road to Atlanta, and Interstate 20 didn't exist," said Betty Noland, a member of the Douglas Hospital Auxiliary since 1974. "We had no real hospital facilities then, just a building where the doctors came," and babies were delivered at mothers' homes.

One night in 1946, a mother died in childbirth because there wasn't enough time to get her to the hospital after she developed complications. According to *Douglas County, Georgia: From Indian Trail to Interstate 20*, a book about the county, the midwife who had assisted the physician at the dying woman's bedside stood in tears before the Douglas County Board of Commissioners the next morning, pleading with the authorities to permit the county to build a hospital. On May 9, 1946, the Hospital Authority of Douglas County was formed, and on April 1, 1948, the first Douglas Hospital opened its doors—with just 15 beds—in a building on Fairburn Road that had been the old Clover Mills School building.

By 1965, the hospital had expanded to 50 beds, but the space and the facilities were inadequate for the county's growing needs. "It looked like a first aid station in an army barracks," recalled Hospital Authority of Douglas County board member Billy Mayhew. It wasn't







MAIN STREET  
SURGERY CENTER

WELLSTAR  
Douglas Hospital

until 1971, when the authority managed to generate the needed share of Hill-Burton money, that a new hospital could be built. In 1974, construction was completed on the new Douglas General Hospital, a general acute-care hospital providing a full range of services: medical, surgical and obstetrical inpatient and outpatient care, including emergency services. The initial cost of the 98-bed facility plus an adjoining medical office complex on a 50-acre campus in Douglasville was nearly \$4 million.

“It was beautiful, wonderful, the greatest thing that ever happened to this county,” said Noland, who found herself one of the first patients in the new hospital after her blood pressure skyrocketed—a situation that required days of hospitalization in the early 1970s. “We were so proud to have it! For a long time, there had been only three physicians for the whole county, but after we opened the hospital, we began to have more doctors.”

Douglas County was far more rural than Cobb County, but it grew, too, as roads to Atlanta were paved and commuters came looking for affordable homes and bigger yards. Between 1970 and 1980, Douglas County’s population nearly doubled, from almost 29,000 to more than 54,000.

At first, Douglas General grew along with the county. In 1978, it reported a 22 percent increase in admissions and a 62 percent increase in births over the previous year. More surgical procedures and lab tests were done, too, and the hospital began adding services, such as in-house electroencephalography and a gamma camera, used in medical imaging.

In late 1976, Douglas opened its birthing center, believed to be one of the first of its kind in the Southeast. Most deliveries were performed by nurse-midwives, and Douglas became one of the first hospitals in the nation to offer a then-innovative model in which newborns roomed



While WellStar Douglas Hospital has a welcoming lobby, opposite, about 90 percent of its patients—60,000 a year—come in through the busy emergency room. Hospital President Craig Owens sees Douglas as a pioneer

in the burgeoning field of hospitalist care: more than half of Douglas’ inpatients are treated at some point by one of the hospitalists on staff. Above, pulmonary medicine specialist Salim Harianawala, M.D., confers with nurses at Douglas.

# AN ARMY OF VOLUNTEERS

When Douglas General Hospital was new and a full house was 50 or 60 patients, hospital volunteer Betty Noland and her friends in the Douglas Hospital Auxiliary visited every patient room every day with their “cheer carts,” dispensing juice and water and selling crackers and candy.

“Everybody wore the same thing: a little apron, like a tunic, with a skirt—no pants!” recalled Noland. “After 50 volunteer hours, you were capped, just like the nursing caps. We thought that was wonderful. At 100 hours, you got your pin. I’ve been volunteering on Tuesdays since the world began, and every Tuesday afternoon, I would take the money home and count out the nickels and pennies.”

Those “nickels and pennies” have added up over the years—at Douglas and at the other WellStar hospitals, each of which has its own longstanding volunteer organization. In addition to working in gift shops, helping transport patients and greeting visitors, these organizations also support WellStar’s mission through the funding of special projects. “At Douglas, we’ve redecorated the children’s area in the Emergency Department (ED), bought a golf cart for the maintenance crew, put an electric door on the ED and even built the helipad,” said Noland.

Paulding’s first cadre of volunteers, formed in the 1960s, was known as the Red Cross Gray Ladies. “We did all sorts of things that volunteers can’t do now because of regulations, such as serve meals and make rounds with the physicians,” said Elaine Lane, a longtime Paulding volunteer and member of the Paulding Authority Board. The Gray Ladies program at Paulding was phased out in the late 1960s, but it was revived a few years later when the hospital opened a gift shop, which to this day is staffed entirely by volunteers. “Now we have volunteers everywhere—close to 100 in the hospital, the doctors’

building, ED, the pharmacy and the nursing center,” Lane said.

With their much larger censuses, Cobb and Kennestone built even greater volunteer forces—approximately 200 at Cobb and more than 400 at



Kennestone. “In 2011, those 400-plus volunteers contributed 65,000 hours of service at Kennestone alone,” said John Maddox, a former president of the WellStar Kennestone Hospital Volunteers. “Georgia Hospital Association puts a value on volunteer service of about \$19 per hour, so that’s more than \$1.2 million in donated time every year.” Cobb’s volunteers, for their part, served more than 40,000 hours in 2011—a value of more than \$700,000 to the hospital.

Maddox began volunteering at the WellStar Kennestone Cancer Center in 2006, after his own brush with the disease taught him the value of a friendly face and a warm smile during a tough time. After surviving a bout with prostate cancer in 2002, he learned in 2006

that the disease had returned, and he underwent six weeks of radiation therapy. “So at 7:15 every weekday morning, I would go through the lobby, and each day there was an individual there—not a volunteer actually, but a parking attendant. He greeted me every morning with a smile and a welcome to WellStar, and that inspired me,” Maddox said. “I’ve been through the routine of what some patients have to go through. We try to make the individual patient, and the families of the patients, as comfortable as we can: assisting them out of cars, taking them to the offices, answering their questions and just giving them our support.”

The much smaller Windy Hill Hospital has its own devoted volunteer organization. Numbering about half a dozen, volunteers provide pet therapy, assist families of patients in the long-term care unit and operate the gift shop. Among them, Carolyn Wingate has given her time to Windy Hill for more than 30 years; she also is a member of the Kennestone Volunteer Board.

As the new health system evolved, volunteer groups at the individual hospitals were brought together under one umbrella: they wore the same uniform and worked under the same bylaws and policies. They now make up an army of nearly 1,000 volunteers—women and men wearing the familiar purple and red colors of WellStar. Volunteers are asked to give four hours once a week, but many choose to give a whole day or more. Some of the hospital’s longest-serving volunteers have amassed 40,000 hours of service—the equivalent of almost 20 years at a full-time job.

“The volunteers at all the WellStar hospitals are like goodwill ambassadors,” said John Maddox. “Their job is first and foremost the patient, but they also are there to represent WellStar in a professional, caring and welcoming way.”



Longtime volunteers like Betty Noland are the heart of WellStar Douglas Hospital. "I feel like I have an investment in this community," said Noland. "I was born here and I've lived here for 84 years. My investment has been genuine care."

Paulding Memorial Medical Center initially resisted overtures to merge with the other hospitals. A 1993 letter, opposite, to Tom Hill at Northwest Georgia Health System (NGHS) explained that Paulding's leadership chose NGHS over other merger options because its origins could be traced to "hospital authorities that were established to serve the healthcare needs of their local communities, which mirrors the goals and mission" of Paulding.

with their mothers rather than being whisked away to spend most of their time in the nursery. County doctors formed their first medical society in the spring of 1979, and that year, Douglas General was doing so well that the hospital authority offered to purchase Atlanta West Hospital, a not-for-profit hospital then in bankruptcy. The \$12 million bid fell short, and Atlanta West was purchased by Nashville-based Hospital Corporation of America and renamed Parkway Regional.

Douglas General's string of successes eventually broke. It struggled under the burden of a large population of patients who couldn't pay for their care. "The taxpayers were paying more than \$1 million a year in indigent care at Douglas," said Mayhew. The hospital had an agreement with the county in which the county was to reimburse it for the indigent care it provided, but the county wasn't paying. By the mid-1980s, the "best thing that ever happened to Douglas County" had become something that local citizens passed by. Gary Miller, a longtime Douglasville resident who now serves on the WellStar Board of Trustees, said Douglas General "looked like an antique, something from the 1940s. Perception is reality—if that's how it looks on the outside, I'm going to assume the equipment is old, too. The community was growing, but the hospital wasn't keeping up."

The decline continued through the end of the 1980s. The hospital sank deep into debt. By the end of the summer of 1992, Douglas General was operating on a cash-only basis with its vendors, had used up a \$1.5 million credit line with the local bank and had a \$300,000 payroll due with no money to pay it. Then, a chance encounter in church changed Douglas General's fortunes.

James Fowler, who at the time was chair of the Cobb Hospital & Medical Center Board of Directors, attended the same church as then-Hospital Authority of Douglas County

Board Chair Katherine Gunnell. "I'd known Katherine for a good long while," Fowler said. "As services ended, she came over and asked me how things were going with Cobb. I said we were doing pretty well, and I asked about Douglas. Were they doing okay over there?" Gunnell said no. "She told me they were having some very serious problems. I said, 'Katherine, what kind of problems?' She said, 'Well, we're probably going to shut down within the month.'"

Gunnell and Fowler sat under a tree in front of the church for the next hour, talking about the condition of Douglas General. "She said they were about \$16 million in debt," Fowler recalled. "I don't know why it came to me, but somehow it did. I asked, 'Would you like to consider a merger?' She said, 'Well, a merger would be better than closing!' I didn't know if our hospital would be interested, but Douglas was a great market. They just needed some help."

Fowler brought the idea to Cobb President and CEO Tom Hill, who liked what he heard. "He didn't get a good reception from the hierarchy there, but it was hard to say no to Tom Hill," laughs Fowler. A few days later, Mark Haney, then a vice president at Cobb Hospital & Medical Center, got a call from Hill. "We've signed a management contract with Douglas Hospital," Hill told Haney, who today is a senior vice president of WellStar and president of WellStar Paulding Hospital and Nursing Center. "I'd like you to report out there tomorrow as interim CEO."

As Haney walked into Douglas General, ambulances were bypassing the hospital's emergency room, taking patients three exits further east toward Atlanta to the then more successful Parkway Regional Hospital. "Cobb paid our salaries that Friday," recalled Robert Cross, M.D., who at the time was Douglas' full-time radiologist. "I don't think we could have made payroll that week

without them.” Cross is a member and former chair of the WellStar Board of Trustees.

Over time, Haney said, “We turned Douglas around, giving it the financial resources that it needed to operate, paying off the bank loan and working with the local newspaper to turn around coverage of the hospital. During the time I was there, I don’t think we had one negative newspaper article.”

The rescue of Douglas General Hospital by its neighbor and one-time rival underscores something unique about the five WellStar hospitals that helped to make their eventual merger into an integrated health system so successful: Every one of the hospitals was homegrown, built from the ground up on local passion and support. They were community-based institutions in the truest and best sense of the term, driven by local need and brought into existence by the dedication, determination and sheer will of the citizens who formed their boards and leadership.

“One of the most unusual things about our health system is that the board members and community people with no official title would go out and give all their time to whatever the hospitals needed,” said Pete Wood, a founding member of the Hospital Authority of Cobb County and former chair of the WellStar Board of Trustees. “I can remember many times when we met on Saturday mornings or long into the night. I’ve never seen anything like it with any other organization I’ve been a part of.”

Over the next few years, the

members of the new Northwest Georgia Health System would need every ounce of that devotion—because, as challenging as it had been to create the health system, that turned out to be the easy part.



July 20, 1993

Mr. Thomas E. Hill  
Senior Executive Vice President, Community Hospitals  
Northwest Georgia Health System, Inc.  
3950 Austell Road  
Austell, GA 30001

Dear Mr. Hill:

I am pleased to inform you that the Paulding County Hospital Authority (PCHA) has authorized Mr. Randy Hughes, a partner with the law firm of Powell, Goldstein, Frazer and Murphy, and me to negotiate with you and your attorney a formal agreement that will merge the operation of Paulding Memorial Medical Center (PMMC) into the new Northwest Georgia Health System, Inc. (NGHS). At this time, Mr. Hughes and I have limited authority, limited solely to negotiations, and any agreement that results will require the approval of the PCHA before it can be finalized.

We came to the conclusion that becoming a part of NGHS would be the best way for our community's health needs to be served. This conclusion was reached after hours of consideration by our Authority, doctors, and management. After considering several alternatives, we narrowed our focus to the NGHS because of the following items:

The origin of NGHS can be traced to its foundation of hospital authorities that were established to serve the healthcare needs of their local communities, which mirrors the goals and mission of the PCHA. The development of NGHS furthers these original goals by creating an expanded community health system network. This system will make it possible to better meet the health needs of this extended community by providing higher quality services more efficiently and at lower cost.

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