

OUR MEDICAL BOARD

CUTTING-EDGE MEDICINE FOR OUR PATIENTS



RHÖN-KLINIKUM
AKTIENGESELLSCHAFT



The Board of Management of
RHÖN-KLINIKUM AG (f.l.t.r.):
Martin Menger,
Dr. med. Dr. jur. Martin Siebert,
Jens-Peter Neumann

Dear Readers,

RHÖN-KLINIKUM AG has been one of the largest healthcare providers in Germany for roughly four decades. With our ten hospitals in five locations we offer cutting-edge medical care to our patients with a direct link to universities and research institutes.

Since the very beginning we have stood for medical innovation and excellence in treatment. That makes us unique in the hospital market. This tradition is upheld with our "Medical Board".

In this expert body recognised leading physicians work across all locations and disciplines together with their colleagues in the individual hospitals to make sure our patients benefit quite specifically from the medical expertise of RHÖN-KLINIKUM AG. Medical innovations are evaluated and used in our diagnosis and therapeutic methods. The seven leading physicians apply a wide range of studies and their own research results as well as also ensure the use of state-of-the-art medical equipment in the best possible treatment of our patients. All this becomes clear from the projects on "innovation and research" and "excellence in treatment and network medicine" financed by RHÖN-KLINIKUM AG.

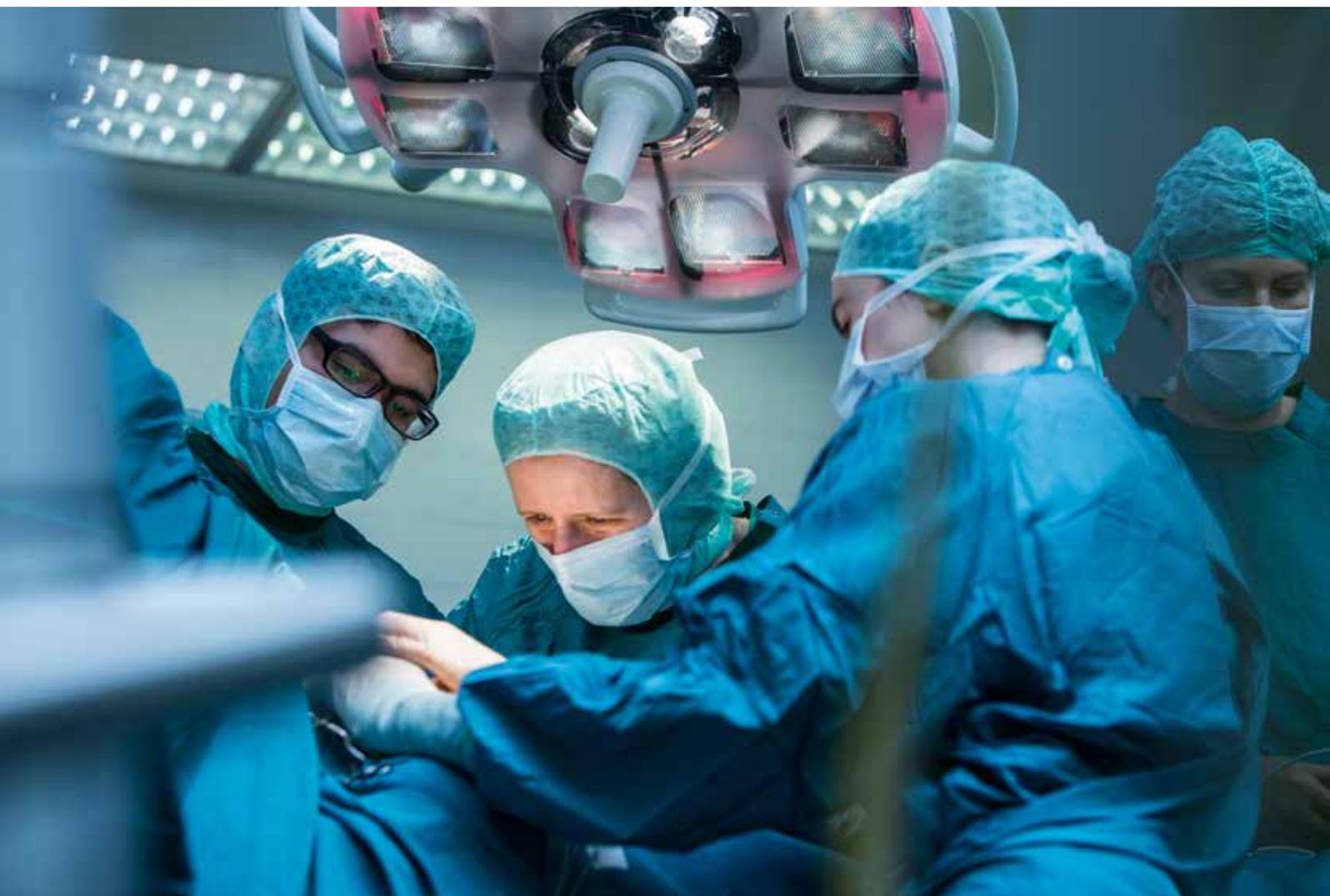
We kindly invite you to become familiar with our Medical Board and the above projects on the following pages of this brochure.

Dr. med. Dr. jur. Martin Siebert

Jens-Peter Neumann

Martin Menger

»We stand for innovation and
excellence in treatment.«



Medical innovation and excellence in treatment are the strategic cornerstones of RHÖN-KLINIKUM AG. Since 1 May 2014 the Medical Board has become what is now a seven-member body actively pressing on with the direct implementation of this strategy. The experts of the Medical Board deal above all with issues of the medical strategy of the Group and its individual clinics and harmonising this strategy with the Group's business goals.

The motivation for establishing the Medical Board was, among other things, the recognition that commercial hospital management on its own can no longer handle the current and future challenges of the health system without the involvement of medical expertise. Competition-related innovation in terms of patient care can, rather, only succeed if there is cooperation on equal terms between medicine and economics.

DESIGN AND IMPLEMENTATION OF KEY INNOVATIVE MEDICAL INITIATIVES

The Medical Board identified six areas as central challenges and has already got specific initiatives and projects off the ground. These subject areas are pre-clinical models of disease, clinical trials, healthcare research (network medicine), second opinion services, best practice / clinical processes and quality excellence. In these subjects the experts of the Medical Board are seen as technical advisers to the clinics and specialist departments of RHÖN-KLINIKUM AG. The work focuses on the design and implementation of key medical innovations. See page 11 for more information on the projects.

In this context we wish to strengthen our competitive position in treatment innovation and cutting-edge medicine in a specific manner by significantly increasing the research budget. In the course of this year a total of 61 projects will therefore be financed with an overall sum of approximately € 4 million and will mainly deal with the subjects of "research and innovation" and "excellence in treatment and network medicine". The research and innovation programme comprises projects across all five Group locations and is the result of a group-wide competition.

Since RHÖN-KLINIKUM AG provides full-service, cutting-edge medicine at its clinics with direct access to research, the use of the latest medical technology is as essential as the high-quality treatment and nursing care of our patients. This therefore results in the noticeable commitment to invest in the research and innovation programme and our unique position in the market in order to maintain and expand our attractive service offering. This gives RHÖN-KLINIKUM AG the prospect of creating additional competitive advantages and benefitting on the revenue and growth side. The projects entail clinically-oriented basic medical research and the evaluation of new types of treatment methods, such as in the field of oncology. On the other hand, they deal with organisational and logistical issues, such as improving the link between inpatient treatment and home care.

THE MEDICAL BOARD COMBINES ACADEMIC WITH NON-ACADEMIC MEDICINE

This example of targeted promotion shows just how pragmatically and tangibly the Medical Board operates as a direct interface between doctors and nurses on the one hand and the Group Board of Management on the other hand. Process optimisation, innovations, quality of care and patient safety are channelled through the Board. In this way the Medical Board combines academic with non-academic medicine. This bundling of medical expertise is an essential prerequisite for forward-looking action by our hospital group.

»It's about achieving a balance between medical necessities and what is economically possible.«

Prof. Dr. med. Bernd Griewing
Deputy Spokesperson of the Medical Board

Prof. Dr. med. Jochen A. Werner
Spokesperson of the Medical Board



Professor Griewing, Professor Werner, how did the idea of bringing a Medical Board to life come about?

Prof. Griewing: The idea emerged in the transitional period of selling a large part of our clinics to Helios. We all very quickly agreed, after having found our new structure, that we also had to ensure continuity and structure in the medical development of our Group. Furthermore, there were specific reasons, such as specialist questions or staffing senior consultant positions. This is where the idea emerged of finding synergies and solutions for these and other issues within the company too.

Prof. Werner: The issue of integrating medical expertise in the Board of Management decisions of a hospital group has occupied the doctors' community of the UKGM (University Hospitals of Giessen and Marburg) since privatisation. Many aspects have to be taken into account here, from medical necessity to innovations and economic framework conditions. Now, after the transaction and the re-orientation, there is a desire at all clinics to start joint projects, carry out trials together and help each other advance medically. The Medical Board emerged from this desire. Our positioning for this could not be better.

What's special about it?

Prof. Griewing: It's the composition of our company that no other hos-

pital group can demonstrate. On the one side, we have the scientific expertise at the University Hospitals of Giessen and Marburg, for example. On the other side, there are highly specialised clinics at the other locations that offer well above average excellence in treatment. This combination is unique.

Prof. Werner: Other hospital groups make efforts to provide this through cooperation agreements, of course. In an integrated company including the third largest university hospital in Germany through to follow-up care facilities, as is the case with us, pathways are much shorter and cooperation tends to be more a matter of course. With about 5,000 beds and 16,000 employees we are also just about the right size on the one hand to achieve valid results in clinical trials, for example and on the other hand also to drive forward developments rapidly and allow our patients directly to benefit directly from the results of research.

What is the Medical Board all about specifically? Does it focus on current issues in the clinics or the major medical issues of the future?

Prof. Griewing: These cannot be separated from each other. For example, staffing a senior consultant's position is a practical issue. At the same time, securing young talent, education measures and further training are key issues we will face in the future. Whoever has the best doctors and the best staff in

How the Medical Board works

The Medical Board, which consists of seven experts, meets every two months at each of our respective clinic locations. A telephone conference with the Group Head of the Medical Division takes place every Monday, in which current relevant issues are discussed. In addition the Board is in regular contact with the senior consultants of the clinics and with the Chairs of the Board of Management and the Supervisory Board of RHÖN-KLINIKUM AG. Expert panels have also been set up to deal with specialist areas such as cardiology, oncology and hygiene. These deal with issues raised in the clinics and work on them on a cross-clinic basis. The projects of the funding pools for innovation and excellence in treatment form a further focal point for the work of the Medical Board. The composition of the Board is discussed every two years. Medical Board depending on the current issues being discussed. New experts can then be appointed to the Medical Board.

No future without young talent

Young talent in medicine places a high demand on the need for education measures and further training, demands the Medical Board wants to meet with new offerings. Concepts are currently being prepared that make education measures and further training possible on a rotational basis across the individual locations, making it possible for young talent to take advantage of temporary stays at several clinics. An orthopaedic surgeon from Marburg can also benefit from the special expertise in hand surgery in Bad Neustadt, for example. Moreover, a scholarship programme is dedicated to securing young talent in the form of foreign doctors benefitting from periods of practical training. This concept was originally developed in Bad Neustadt and provides doctors with support from language teachers and lets them become acquainted with the medical culture in Germany. It is now intended to extend the idea to nursing.

the medical sector provides the best medicine. We want to show that we claim to provide the best medicine. We therefore ensure that the university departments where expert deal with issues at the future at the cutting edge of medical science work closely together with other clinics that primarily stand for practical excellence. In the Medical Board we bring this expertise together at one table to develop new therapies and processes and integrate them in clinical practice.

Prof. Werner: What is unique here is that in our company there is not just one medic sitting on the Board of Management who decides on the suitability of supporting specific development issues. Instead, a body of various experienced doctors has been set up that combines the expertise from the entire company. This also shows that it's not just about profit. It's much more about achieving a balance between medical necessities, innovation and what is economically possible. This is what the Medical Board stands for.

Has the Medical Board already had any success with this claim?

Prof. Werner: The Board of Management has provided around € 4 million for 2015 for a funding pool. This will be used to work on the key focal points of innovation and excellence in treatment. This

investment and the projects it is supporting are the best proof of how the strategic focus on innovation and excellence in treatment is being implemented.

What is being supported specifically?

Prof. Werner: Funds are going to the two fields of innovation and excellence in treatment. We issued invitations to tender for this money within the Group last year and experienced great enthusiasm at all locations. There was a wealth of applications for the projects and a real spirit of optimism spread. Then a body of experts, which included internationally recognised assessors, evaluated the projects submitted. We in the Medical Board supervised the entire process. We paid very close attention to avoiding projects just for university institutions on the one hand and specialist clinics on the other. Instead, we aimed at dealing with issues which we can process throughout the corporate group. The selection process was concluded in 2014 and the project teams started their work in spring 2015.

Prof. Griewing: In doing so we have, like other industrial companies too or those providing services established a veritable development department. It brings the cleverest people in the company together and occupies itself with the further development of medical care following trends and issues for the future.

Can you name some examples of specific projects?

Prof. Griewing: One example in the field of excellence in treatment concerns supervising the entire outpatient / inpatient treatment process of patients with cardiac arrhythmia by way of telemedicine. Here we look into the issue of how we can use telemedical solutions to intelligently look after patients who have been fitted with heart pacemakers after they leave hospital. Other projects are concerned with current hygiene procedures or issues relating to patient safety that we want to establish across all locations.

Prof. Werner: On the research side one large issue is, for example, personalised cancer therapy. No tumour is the same as another. The more precisely you can classify it, the more precisely you can assess whether a certain antibody can be used in treatment or not. But this only works if you analyse a large number of patients and collate the data. The clinic in Bad Berka and the Anneliese Pohl Cancer Centre at the UKGM in Marburg work closely together here, for example. The focus is on neuroendocrine tumours and also pancreatic cancer.

In the founding statutes of the Medical Board you prioritised six subject areas. Will the funding pool now be active in all the subject areas?

Prof. Griewing: The first subject area is Pre-Clinical Disease Models, where we want to bring basic university research together with the patient pool from the clinics. This is being actively implemented in many projects.

Prof. Werner: In the second field, Clinical Trials, we are strengthening existing structures to initially create the organisational conditions to be able to initiate and carry out clinical trials in the Group.



Care Research is the third subject ...

Prof. Griewing: ...with which we come to the keyword network medicine. After all, with our clinics we cover all large relevant illnesses. With the network medicine approach we now want to overcome the existing boundaries between inpatient and outpatient care, or between prevention and follow-up care. Our aim is to create patient-oriented care models that apply across all phases of a disease and involve external cooperation partners. This is the basic concept we are pursuing with our partners both regionally and nationally. Thought through to the end this



also means, of course, securing the refinancing of such care processes by presenting valid cost models to the statutory health insurers.

Prof. Werner: Our fourth subject, namely second opinion services, also plays a role in network medicine. This concerns patient safety and the quality of treatment. Both are important, not only to patients but also to doctors who can obtain a second opinion from their colleagues in the company. And we organise this through the Medical Board, just as we do our fifth

subject area, Best Practice / Clinical Processes. Here too it's all about bringing expertise together and sharing knowledge. We have brought expert panels into being on key subjects such as cardiology, oncology and anaesthetics. These experts regularly explore current issues from the clinics.

Prof. Griewing: This exchange of knowledge is also helping us in rebuilding our hospital campus in Bad Neustadt. If, for example, the organisation of the accident and emergency department in Frankfurt an der Oder has won many

awards, we want to use this experience for ourselves in Bad Neustadt, of course. The Medical Board is a strong catalyst for this transfer of knowledge.

Lastly, the subject area of Quality. What does this mean specifically?

Prof. Griewing: That is precisely the central question. We are currently looking at the most varied approaches and opinions of what is required from medicine in terms of quality in the long term. We are collecting the approaches and experiences in the company to help shape the answer to this future-based issue. Signals from politicians are indicating a change in the financing of services, where quality will have a direct effect.

Taking all the subjects together you have given yourselves a tall order.

Prof. Werner: That's true, but we are now in an excellent position to work on all these key issues, from basic research through to clinical application on site. I don't know of any other hospital group that organises focussed medical expertise and includes internationally recognised academic medicine in the Board of Management as comprehensively as us.

»Five Representative Projects for Innovation and Excellence in Treatment«



We are continuously driving medical progress forwards and are constantly working towards making the latest research results available to our patients as quickly as possible – thereby turning innovation and excellence in treatment into cutting-edge medicine every day. State-of-the-art medical technology also means innovative treatment with tailor-made therapy for the patients.

With our research and innovation programme we are financing forward-looking medical and nursing concepts at all of our five locations. The range of medical subjects is wide and stretches across the full spectrum. Five projects are presented in detail on the following pages.

Improving Clinical Processes

Klinikum Frankfurt (Oder)
(Hospital in Frankfurt / Oder)



Assessing the Older Patient in Accident and Emergency

Background:

Accident and Emergency Departments are registering a definite increase in the admissions of older people. Older patients usually have a variety of secondary disorders and unspecific ailments and take a number of different medicines. Identifying high-risk patients (e.g. risk of falling, confusion) is of crucial importance.

Aim:

The aim of the Older Patient in Accident and Emergency project is to use special examination methods to make out such patients and to treat them accordingly. If older patients with secondary disorders are not treated correctly, they frequently spend longer in hospital and often lose the ability to cope with day-to-day tasks which can in turn lead to the need for long-term care and a higher mortality rate. Follow-up care after time spent in hospital should be reduced or even avoided, if possible. Special examination methods are to be taken into use in several Accident and Emergency Departments.

Course of Action:

There will be special training courses so that older patients with functional disorders and risk factors are identified at an early stage and a record made thereof. Training and familiarising staff with the special particularities of age-related medicine as well as standardised and specific identification of psychological and other geriatric aspects will help patients to receive the best possible treatment and thus improve our medical care on a sustainable basis.

Personalised Healthcare

UKGM Giessen
(University Hospital in Giessen)



RHÖN Neuro-Oncology – Next Generation

Background:

Brain tumours are not only accompanied by high socio-economic costs but often also by psycho-social disorders since they affect the human consciousness and perception. Brain tumours are the second most common form of cancer among children and are otherwise among the most fatal types of cancer with few available therapeutic possibilities. The treatment of brain tumours has become increasingly personalised in the last few years. New studies show that carcinogenic brain tumours are characterised by recurring genetic mutations.

Aim:

The aim of the project is to improve the diagnosis and therapy of brain tumours by determining personal hereditary features. This will not only further develop the diagnostic methods for brain tumours but will also allow the application of individual therapies for patients which are tolerated better. The chances of recovery are generally raised by the possibilities of individual treatment.

Course of Action:

The project will normally be divided into the following stages:

- Setting up a routine examination for individual analysis of carcinogenic brain tumours
- Setting up a database with mutation data and hospital data
- Identifying mutation profiles to improve diagnosis and therapy

Cross-Sectoral Healthcare

UKGM Marburg
(University Hospital in Marburg)



Evaluation and Further Development of Epilepsy Consultation Services and Interdisciplinary Epilepsy Treatment in the Regions of Hesse and Lower Franconia

Background:

More than 800,000 people suffer from epilepsy in Germany. For more than one third of patients medication does not achieve the desired results in controlling bouts of the illness. This creates problems when trying to access the education system and labour market. Epilepsy consultation services and interdisciplinary inpatient treatment such as surgery for epilepsy, complicated treatment methods of forms of epilepsy which respond badly to therapy or inpatient rehabilitation care help to manage the disease. Yet there is still a lack of new data on the need for as well as the effectiveness and social-medical effects of such treatment.

Aim:

One aim of the study is to improve cooperation between the different treatment locations in Bad Neustadt, Giessen and Marburg. The relevant employees in the hospitals will receive appropriate training, and patients in the respective regions will be approached specifically.

Course of Action:

The quality of the respective treatment, patient satisfaction, therapeutic success and other social and economic effects on patients suffering from a form of epilepsy will be assessed. A specifically developed questionnaire will be used to collect the required data which will then be analysed. The results will provide major insights for the improved treatment of epilepsy patients in the future.

Telemedicine/E-Health

**Herz- und Gefäß-Klinik Bad Neustadt
(Cardiovascular Hospital in Bad Neustadt)**



Telemedical Monitoring and Follow-Up Care of Patients with Implantable Cardioverter-Defibrillators (ICD)

Background:

Modern defibrillators provide us with the possibility to monitor vital functional parameters, disorders and arrhythmias from a distance via telemedicine. It is therefore possible to monitor and take care of cardiac patients from a larger catchment area. Necessary treatment or complications can in particular be identified and detected directly via telemedicine without any time delays. Patient safety is therefore increased even during the period before the next medical examination.

Aim:

The project guarantees that cardiac patients who are frequently seriously ill can be monitored on a constant basis. We can therefore deal quickly and purposefully with possible problems which would otherwise only be discovered much later. The continuous monitoring significantly improves patient safety and the quality of care.

Course of Action:

Using the data acquired through telemedicine, therapies will be created which can be commenced directly and without a time delay as a consequence of the additional information. It will therefore be possible to react quickly and effectively in a central examination centre to possible changes in the clinical condition of the patient and to make technical adjustments to the implanted system.

Improving Patient Safety

Zentralklinik Bad Berka
(Central Clinic in Bad Berka)



Individual Vertebra Replacement in Cases of Severe Osteoporosis

Background:

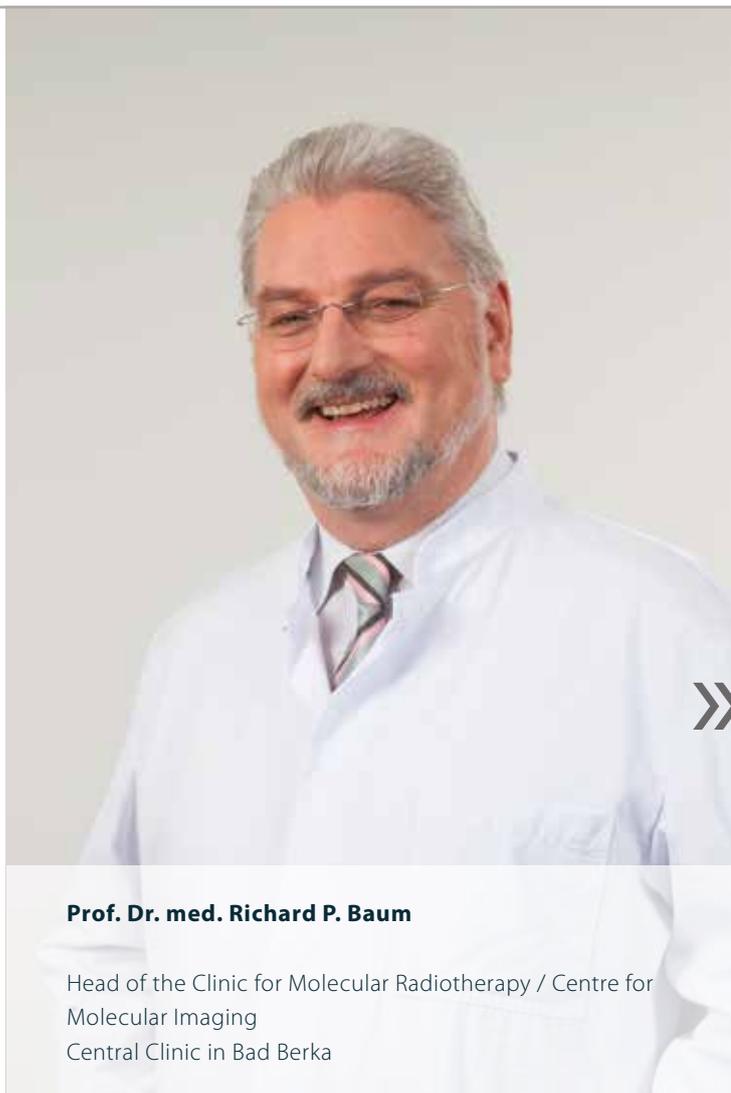
Spinal damage caused by osteoporosis through to the loss of an upright posture is rising rapidly against the background of demographic changes. This development places increasingly high demands on physicians and the healthcare system. Due to the modified shape of the neighbouring vertebrae standard implants in particular often lead to new fractures and further deformations of the spine.

Aim:

The project will benefit osteoporosis patients, avoid paraplegic disorders and achieve an improved quality of life. The patients will also benefit from shorter periods in hospital and briefer rehabilitation periods as well as becoming more independent.

Course of Action:

Images of patients with severe vertebral fractures caused by osteoporosis will be processed individually and used to produce tailor-made implants with 3D software. An analysis will be made how far such implants which are finely tuned to the modified anatomy and bone quality of the anchor vertebra produce better medical results than those which are currently available. Furthermore it will be analysed how far it is possible to apply the tailor-made implants to create operative solutions for serious osteoporosis cases for which there is currently no therapy available.



Prof. Dr. med. Richard P. Baum

Head of the Clinic for Molecular Radiotherapy / Centre for Molecular Imaging
Central Clinic in Bad Berka

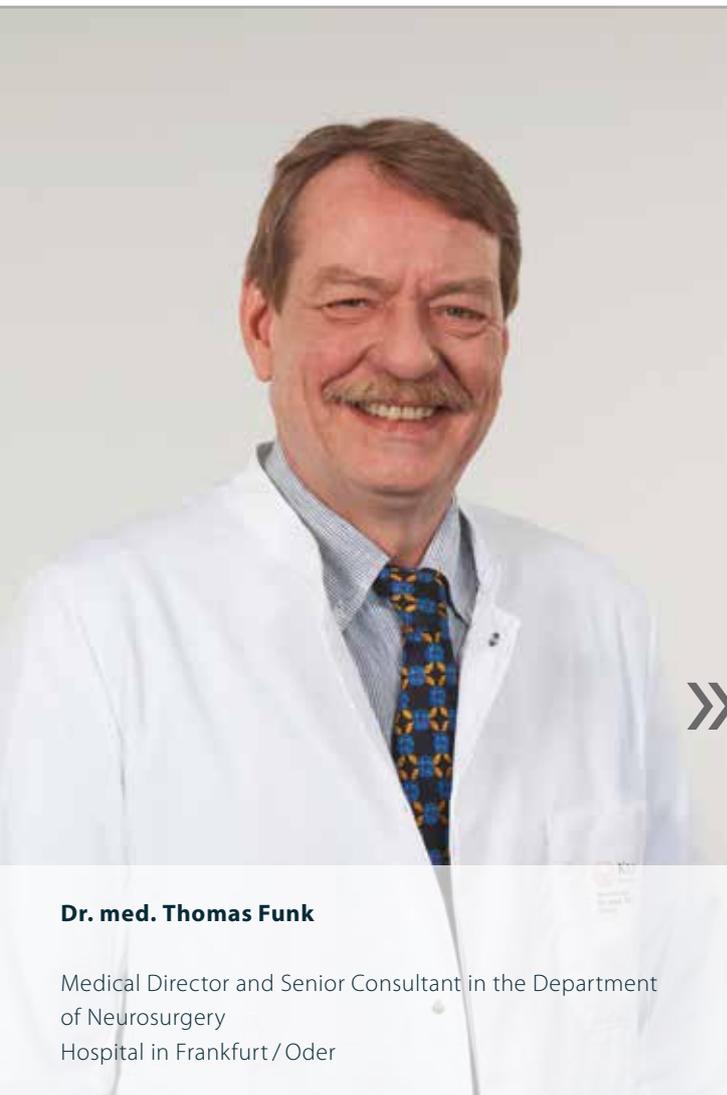
The nuclear medical specialist

Prof. Dr. med Richard P. Baum, who was born in Pirmasens in 1954, studied medicine at the University of Mainz. Since 1997 he has been a senior consultant at the Clinic for Molecular Radiotherapy at Zentralklinik Bad Berka. He is one of the pioneers behind the application of radiotherapy (isotope-labelled peptides and antibodies) in nuclear medicine and has played a key role in developing and researching different forms of treatment to which his election to the post of President of the international "World Association of Radiopharmaceutical and Molecular Therapy" (WARMTH) bears testament. Prof. Baum is also a visiting professor at universities in China (Xi'an and Nanjing) as well as in Belgrade. In addition to numerous, predominantly international prizes, Prof. Baum was awarded the GLORINeT prize from the self-help organisation Network for Neuro-Endocrine Tumours (NET) in 2014 which is awarded for outstanding services contributing to the well-being of patients with neuro-endocrine tumours (one of the focal points of the ENETS Center of Excellence at Zentralklinik Bad Berka).

Research as the Key

»With the Medical Board we clearly focus on medical expertise and excellence in healthcare.

For me it is crucial that we also make the most of applying our research expertise at the non-academic locations and make even better use of the group structure for future education and training. Research is the key to success. In this way knowledge of the genetic basis of diseases, for example, can give us indications regarding causal relationships, which can then be used for rational and more effective treatment. Therefore the scientific committee of internal and external experts, which we at the Medical Board have chosen to back, is of particular importance for medical progress. Personalised healthcare and fine-tuned, precise treatment especially in tumour therapy are also particularly close to my heart. Here we can achieve a lot with local doctors practising in the region, thanks to new imaging procedures and even better digital networking, for example. Digital media, big data as well as biotechnology and tissue databases open up entirely new possibilities in medicine today. A key success factor for the work of the Medical Board will be that we fully support the science in our Group clinics, promote specialists and also integrate nursing in our projects. One thing is clear: in all our activities the focus must be on the patient, and not only or primarily on economic gain.«



Dr. med. Thomas Funk

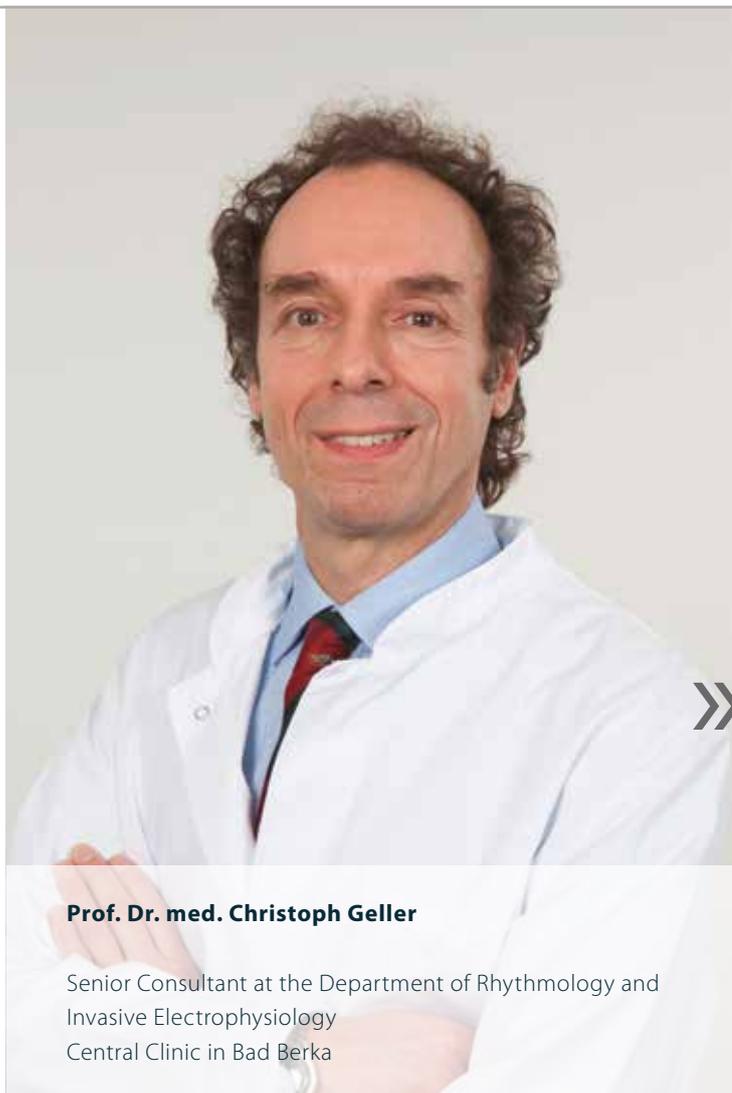
Medical Director and Senior Consultant in the Department of Neurosurgery
Hospital in Frankfurt/Oder

The neurosurgeon

Dr. med. Thomas Funk was born in Limburg a. d. Lahn in 1959. After studying medicine, he began his career in neurology at the state psychiatric hospital of Spandau / Berlin in 1985. From 1986 to 1999 he worked in the neurosurgery clinic of the „Benjamin Franklin“ University Hospital in Berlin, where he became deputy director in 1993. Since 1999 Funk has been the senior consultant at the Clinic for Neurosurgery in Frankfurt (Oder). In 2005 he was also appointed as Medical Director of the Klinikum Frankfurt (Oder).

Open Communication

»In the group of RHÖN clinics medical care has a sovereign status, and medical staff and economists meet as equal partners. I value this very much. For me it is especially important that we use the Medical Board to strengthen networking of networks within our Group. This gives us the opportunity to extend our medical expertise while achieving economic benefits. Second opinion services, the development of our staff through regularly exchanging information and knowledge, but also consultation and advice amongst colleagues can only bring us forward. The same is true for research studies where several clinics are involved. This has special significance for my field of expertise, namely neurosurgery. To understand how malignant brain tumours arise, we need to deal with molecular genetics. Many years of basic research are still needed for this. In addition, we will also need to network with competent partners outside our group so that we can develop new healing methods one day. The release of funds to support research, the excellence in treatment and the group medicine in the RHÖN-KLINIKUM Group are already exemplary in terms of the objectives of the Medical Board. It is crucial that we – the medical staff and the board of management – openly communicate with each other. Only then can the economy develop an understanding of medicine and vice versa. If we continue to succeed in this, we shall also occupy a leading role in innovative projects and cutting-edge medicine at the highest level in the future.«



Prof. Dr. med. Christoph Geller

Senior Consultant at the Department of Rhythmology and Invasive Electrophysiology
Central Clinic in Bad Berka



Seeing the Big Picture

»The ageing of society is associated with an increase in diseases for which we need specialists in medicine. These include joint and spinal disorders as well as dementia, for example. In addition, more and more people in Germany are suffering from heart arrhythmias which are still being treated inadequately. As a member of the Medical Board, I will work to ensure that cardiology, neurology, orthopaedics and cardiac surgery find common solutions to support such patients optimally. The very good and collegial collaboration between different disciplines within RHÖN-KLINIKUM AG is certainly one of the strengths that we should draw on even more in the future. Key factors for the success of the Medical Board will be openness and creative thinking, also in relation to new approaches. In addition the ability to see the big picture is essential. Instead of just focusing on their own small area, everyone should work towards cooperating in an interdisciplinary manner and especially establishing future prospects for younger colleagues. For the Group's five clinics it will be extremely important to achieve a strategic direction and focus of effort as well as the appropriate allocation of resources. The clinical expertise which RHÖN-KLINIKUM AG has in plenty is crucial for these key strategic decisions.«

The specialist for cardiac arrhythmias

Prof. Dr. med. J. Christoph Geller was born in Bonn in 1959. He studied medicine at the university of his native city and at the University of Basel. After his sub-specialisation training in cardiac electrophysiology which he undertook in the USA, he was a consultant at the Clinic for Cardiology at the University of Magdeburg from 1995. Since 2004 he has been the senior consultant at the Department of Rhythmology and Invasive Electrophysiology at the Zentralklinik Bad Berka. He has also been an adjunct professor at the University of Magdeburg since 2007. He specialises in the field of cardiac arrhythmias.



Prof. Dr. med. Bernd Griewing

Medical Director and Senior Consultant in the Neurology Department, Stroke Unit, Neurological Intensive Care Neurological Clinic on the RHÖN-KLINIKUM Campus in Bad Neustadt a. d. Saale

The stroke expert

Prof. Dr. med. Bernd Griewing was born in Siegen in 1961 and studied human medicine at the Westphalian Wilhelms University in Munster. After working as a senior physician at the Neurological University Hospitals in Marburg and Greifswald, he joined the Neurological Clinic in Bad Neustadt an der Saale as a senior consultant in 1998. He has also worked here as the Medical Director since 2000. Prof. Dr. med. Griewing has received many awards for his involvement in the treatment of stroke patients, particularly for his "Stroke Angel Initiative".

On Equal Terms

»In today's medicine we need innovations which set us apart from the competition and provide real benefits for patient care. Such innovations will

only succeed if medicine and economics work together as equals – a key function of the Medical Board. In the neurological clinic in Bad Neustadt, we have, for example, been developing for several years now integrative care processes for major illnesses, such as stroke, multiple sclerosis and Parkinson's disease. We wish to promote such processes for both inpatients and outpatients and also in the acute medical and rehabilitation areas. We specifically search for innovations for communicative and technological assistance so that as many sick people as possible across the board have access to our solutions. It is very exciting to see how medical professionals, technicians and representatives of health economics cooperate here with each other. In general neurology is, for me, one of the key medical specialities of the modern era. Today we have fascinating new diagnostic methods and scientific knowledge. Diseases of the blood vessels in the brain, Parkinson's syndrome, dementia, epilepsy and chronic inflammations are increasing in Germany as part of demographic trends. These are enormous challenges for medicine and healthcare systems. The structure of RHÖN-KLINIKUM AG gives us a unique position that we should use to overcome these challenges. We combine clinical centres of excellence in practical treatment and active academic research facilities under one roof. The main task of the Medical Board will be to bring together, coordinate and support the respective special competencies.«



Prof. Dr. med. Werner Seeger

Medical Director and Vice Chairman of the Board of Management as well as Director of the Medical Clinic and Outpatient Department II – Pneumology, Infectious Diseases, Gastroenterology, Nephrology and Intensive Care for Internal Medicine
University Hospital in Giessen and Marburg

The lung specialist

Werner Seeger is Professor of Internal Medicine at the Justus-Liebig University in Giessen and Director at the Max-Planck Institute for Heart and Lung Research in Bad Nauheim. He is Chairman of the Lung Center at the Universities of Giessen and Marburg (UGMLC), the Excellence Cluster Cardio-Pulmonary System (ECCPS), the German Centre for Lung Research (DZL). His research activities focus on acute and chronic lung diseases as well as the interaction of the heart and lungs whereby it has been possible to obtain an international permit for several new therapy approaches developed at the Lung Center he runs. Professor Seeger was President of the German Society for Respiratory, the German Society for Medicine as well as the German Society for Internal Intensive Care for internal medicine. For many years he was a member of the German Council of Science and Humanities and the Health Research Council and is a member of the German National Academy of Sciences Leopoldina. He has won several national and international prizes including leading awards from the European Respiratory Society and the American Colleges for Cardiology.

Promoting Promise

»By establishing the Medical Board Rhön-Klinikum AG proved its willingness to be open to innovative future-based concepts relating to

cutting-edge medical care. What providing cutting-edge medical care means today, and this will apply much more in the future, is integrating the latest scientific expertise in treatment programmes. To this end a direct link to research is of decisive importance which is what the recently-restructured Rhön-Klinikum AG is all about. It is the only privatised German group of hospitals which also has sites devoted to academic medicine, i.e. university hospitals. Access to the latest scientific knowledge does not simply mean implementing the latest guidelines but having access to the appropriate clinical studies far in advance of this is increasingly becoming a marketing tool argument for informed patients. This is precisely what I see my role in the Medical Board as being – accentuating this distinguishing feature of RHÖN-KLINIKUM AG by supervising expert opinions and allocating additional funds for research opinions.«



Dr. med. Holger Thiemann MBA

Head of the Group Medicine Division Bad Neustadt a. d. Saale
RHÖN-KLINIKUM AG

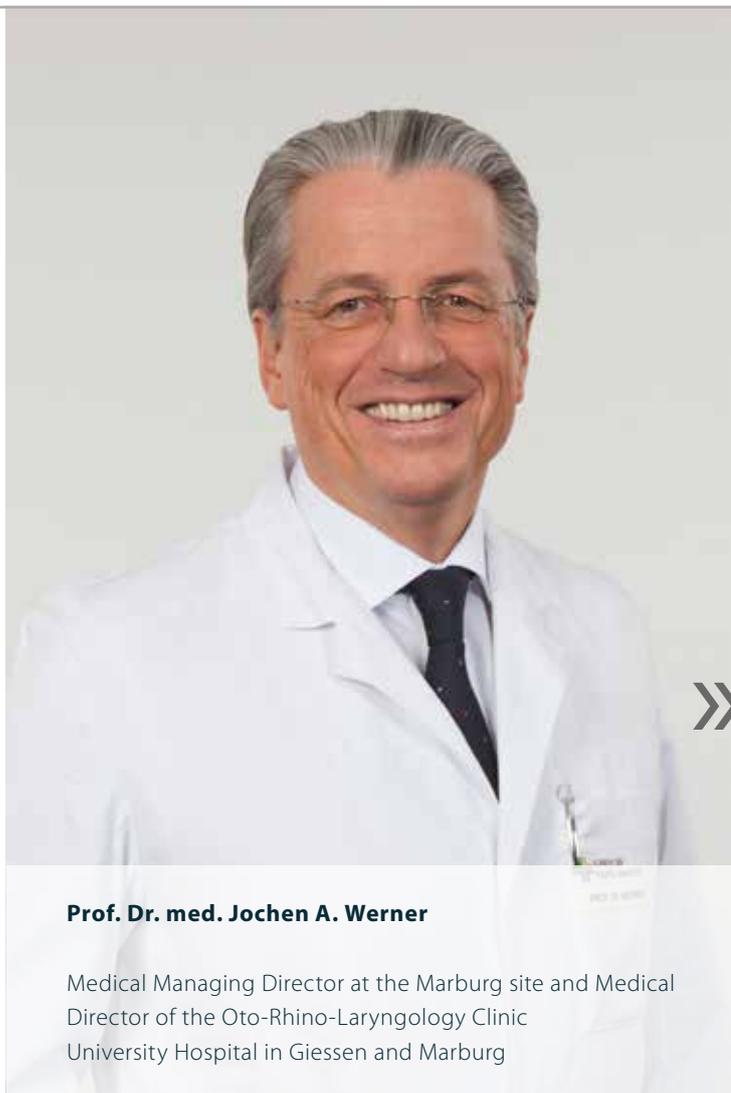
The doctor and manager

Dr. med. Holger Thiemann, born in Lubeck in 1961, studied medicine in Marburg and has also completed an international MBA programme. In the 1990s he first built a training company for doctors before holding executive positions in several clinics. In 2012 he joined the University Hospital of Marburg as Commercial Director. Since 2014 Dr. med. Thiemann has headed the Group Medicine Division of RHÖN-KLINIKUM AG. He is also a lecturer at the Mittelhessen University of Applied Sciences.

Effective patient care

»How will medical advances be available to everyone? How can large-scale medical care be achieved? For me, these are

central questions affecting the future of medicine in Germany. The Medical Board can make a key contribution towards finding answers to these questions. We will consistently pursue and implement the reorientation of the Group towards excellence in treatment and innovative medicine. This requires a body with great clinical and scientific expertise in order to evaluate developments. In addition the linking of remuneration to the quality of care and hospital planning, which is being planned by politicians, is a further challenge. We focus on addressing the question of how innovative medicine can be managed and how adequate compensation for this can be ensured. We have already achieved a lot in recent months. We have set the direction for quality assurance and patient safety, established panels of experts and defined how the Medical Board and the Group Medicine Division should work together as a joint force. The research project on patient safety, for example, is already a step in the right direction. Based on this we can now develop new strategies to prevent errors. For me other milestones are our Centre for Unidentified Diseases, the Marburg Ion-Beam Therapy Centre for improved oncological care and our research concept for hospital hygiene, which focuses on multi-resistant bacteria. I am convinced that if the Board of Management, doctors and nurses pull together to improve patient care, we will achieve our goals.«



Prof. Dr. med. Jochen A. Werner

Medical Managing Director at the Marburg site and Medical Director of the Oto-Rhino-Laryngology Clinic University Hospital in Giessen and Marburg

The expert for the head and neck area

Prof. Dr. med. Jochen A. Werner, born in Flensburg in 1958, began his career after completing his medical studies at Kiel University Hospital for Ear, Nose and Throat Medicine, where he worked as a senior consultant from 1995. In 1998 he took on a professorship for ear, nose and throat medicine at the Philipps University in Marburg. He has worked as the Medical Director at the University Hospital of Giessen and Marburg since 2011. He specialises in tumours of the blood vessels and malformations of lymphatic and blood vessels in the head and neck area. Prof. Dr. med. Werner has received various scientific awards and is a member of numerous international bodies.

Progress through Cooperation

»The Medical Board is the direct interface between doctors and nurses and the Group

Board of Management. We want to be drivers of process optimisation, quality of care and patient safety. Furthermore the Medical Board is a platform that brings together academic and non-academic medicine. I am heavily involved in this area which addresses cooperation with other hospitals and large medical practices for example in order to integrate the latest developments and findings into the Group. One of our projects is therefore the consistent development of a biobank here in Marburg which will be used throughout the Group. In a biobank biological samples are stored together with the medical history of the patient. This wealth of data allows us to compare the progression of diseases in order to develop better treatment and more effective prevention. Overall I value the opportunity to participate in the restructuring process of the Marburg University Hospital. For us and the other Groups hospitals, being able to share the ideas of others is a major bonus. In my view all this will result in the long-term optimisation of the entire RHÖN Group.«

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