We understand that we all have an important role to play in improving the health of our community, and we’re proud that one of our important roles is providing a Family Birth Center which serves Coos County and the entire South Coast region. That’s why we dedicated this issue of *Currents* to the topic of women’s obstetrical and gynecological care at Bay Area Hospital.

In this issue of *Currents*, you’ll read about:

- What members of our Board of Directors have to say about obstetrical care at Bay Area Hospital
- The unique programs and services offered to expectant mothers in our Family Birth Center
- What a real patient has to say about her experience giving birth at Bay Area Hospital twice in a span of just 18 months
- Our excellent on-staff obstetrician/gynecologists and certified nurse midwives
- How cutting-edge technology is changing gynecological surgery, resulting in less pain, faster recoveries, and reduced blood loss

We hope you enjoy learning about how we care for our youngest community members. It takes a lot of infrastructure and cooperation from multiple disciplines throughout the hospital to offer obstetrical care. It’s a service that financially doesn’t always make good business sense, but it’s an absolute necessity for the community. We are proud to have the only Family Birth Center in our region.

We have also included *Care in Action* in this issue of *Currents*. This community benefits report focuses on Bay Area Hospital’s financial stewardship and serves as an annual report to our community. We hope you will take time to read this report and learn how we are using our financial resources to promote our mission of improving the health of our community every day.

Paul G. Janke, FACHE
President and CEO
What’s Inside

Care in Action
Special issue of the 2017 Community Benefits Report included!
See center spread

4 Exceptional Care with a Personal Touch
10 Advancing Technology and Decreasing Pain
6 Continuum of Care
12 Meet Our Providers
8 Q&A with Board Members
16 Congratulations Are Due

MISSION
We improve the health of our community every day.

VISION
Bay Area Hospital will be the model for regional healthcare excellence.

VALUES
Kindness, Excellence, Teamwork, Ownership, Innovation

If you have questions about health issues, please visit our Mayo Clinic Health Library at:
www.bayareahospital.org/HealthLibrary.aspx

Care in Action 2017 Community Benefits Report included!
See center spread

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Having a baby at work. It sounds like a crazy scenario, but for Jammie Thompson it was a wonderful experience. Thompson is a human resources business partner at Bay Area Hospital, and she recently gave birth to her second child in our Family Birth Center.

“I know it sounds super cheesy because I work there,” Jammie says with a laugh, “but really they were fabulous!”

Jammie has gotten to know the Family Birth Center pretty well over the past two years, as she and her husband, Brian, welcomed their two sons just 18 months apart. Now with two healthy little boys at home, the Thompsons couldn’t be more pleased with their experience. Jammie says the quality of care she received was on par with what she has experienced at much larger hospitals: “It’s all that wrapped in and you have a personal touch as well.”

BEFORE BIRTH

With their first son, Reid, the Thompsons prepared themselves for parenthood by attending free classes through the MOMS (Management of Maternity Services) program. Unique to Bay Area Hospital, MOMS pairs specially trained registered nurses with expectant mothers and their families. The nurses help the families develop a birth plan, connect them with educational opportunities and community resources, and overall help them feel comfortable with their maternity experience. All of these services are free of charge.

Jammie says the classes and information gave her not only peace of mind but also the opportunity to build relationships with the labor-and-delivery nurses. Parents find that after they participate in the program, the Family
Birth Center is no longer full of strangers but rather familiar faces: “They’re not just professional; they’re really warm and caring too. They made it a nice, unintimidating environment.”

Seamless communication between the Family Birth Center and Jammie’s obstetrician, Stephan Groth, MD, gave her added comfort throughout her pregnancy. “There were never any glitches,” she says, “no delays, nothing.”

**THE DELIVERY**

In the early morning of August 28, 2017, little Miles Thompson decided it was time to make his grand entrance. Jammie and Brian rushed to the hospital, where she says they were quickly admitted and staff was ready and eager to cater to her needs. “They asked if I had any specific requests,” she says. “I really wanted something to help, using water, because I was in a lot of pain, so they got me in a shower right away and got me ready to go.”

Speed and efficiency proved to be especially valuable that morning, as Miles was born just an hour after the Thompsons arrived at the hospital. Mother and baby began bonding immediately through skin-to-skin contact, and within 15 minutes Miles latched on and successfully breastfed.

“I never felt pressured at all, especially with breastfeeding,” Jammie says. “It was definitely something that they encouraged but nothing that they ever would have pushed on me.”

**BACK HOME WITH BABY**

Jammie says that even after she left the hospital, the Family Birth Center was a reliable resource. Staff members were helpful over the phone when she needed lactation advice, and with both of her children she received an at-home visit from a nurse within a week of giving birth. Postpartum home visits are offered to all mothers who participate in the MOMS program, as a way to ensure that the baby is gaining weight, the mother is healthy, and the family has information about any resources that could benefit them. “They’re willing to make it as easy as possible for you to have access to their services,” Jammie says.

After being a patient, Jammie says she would recommend Bay Area Hospital for any type of service.
CARING FOR MOTHER

At Bay Area Hospital, our staff is prepared to give you expert coordinated care throughout your pregnancy. Of course, your doctor or midwife plays an essential role as your primary resource for prenatal care, but our pregnancy support system is hospitalwide.

Expert care is available in many forms throughout the entire pregnancy and birthing process. The MOMS (Management of Maternal Services) program offers free educational services and information to all expectant mothers. The team of certified obstetrical nurses helps families become familiar with the Family Birth Center prior to the baby’s arrival.

If a mother has a complex family history or an otherwise unusual case, an anesthesiologist is available to consult with her and her doctor about pain relief during delivery to ensure that everything goes according to plan. When the big day comes, our experienced labor and delivery nurses are ready and waiting to offer support and care. Our OBs (obstetricians), midwives, and anesthesiologists are also ready to take the call.

“It seems like when we’re busy in other parts of the hospital, immediately we’re called to do OB too,” says Mark Gillis, MD, director of anesthesia. “But it’s a pleasant emergency because you really feel like you’re doing a great thing when people are thanking you after you’ve done it.”
Most patients choose a pain relief option to make childbirth a much more pleasant experience. And mothers can know they’re in good hands in the Family Birth Center.

“Our team here is very close and very experienced,” says Dr. Gillis. “A lot of them have seen anesthesia through everything—from warfronts, to big cities, to rural hospitals, and everything in between.”

**CARING FOR BABY**

Our patients can feel comforted giving birth at Bay Area Hospital, knowing that the professionals who will care for their babies through childhood and beyond work within our facility. Local pediatricians work closely with our Family Birth Center staff, and in some cases begin caring for a baby even before birth.

“If there are any concerns about a child having trouble when they are born, a pediatrician is called to assist in the delivery,” says pediatrician Jenni DeLeon, MD. “A pediatrician or family practice doctor will come see the infant within one day of birth and continue to see that infant until they’re discharged.”

Dr. DeLeon says the MOMS program plays an important role in ensuring the continued well-being of newborns. Lactation consultants work with mothers to ensure that breastfeeding is established. A MOMS program nurse conducts a home visit, free of charge, to check on the health of the mother and baby and to ensure that the family has access to a pediatrician and other necessary resources.

“The MOMS program is very important,” says Dr. DeLeon. “I feel like it’s a shining star on our hospital because those first days after going home are crucial to the baby’s and mother’s well-being. I don’t know what we would do without it.”

There is no disputing that children are the future, so it’s imperative to give them a path to a healthy adulthood. Pediatricians have the unique privilege of caring for patients through the most formative years of their lives.

“I love watching people as they grow from infancy to toddlerhood to school age to high school and beyond,” says Dr. DeLeon. “I love watching that person mature and watching that person’s experiences mold what they end up being as an adult.”

After pediatric care the next step is moving on to a family practice doctor or internal medicine doctor, but if something unexpected happens along the way, Bay Area Hospital has the resources to help. The staff of our Pediatrics department understands the unique needs of children and strives to provide the best possible care.

“We understand how difficult it would be for them to be cared for in Portland,” Dr. DeLeon says, “so we do our best to keep them here in our community.”

“The health of our children is a direct marker of the health of our community.”

—Jenni DeLeon, MD
How does the community benefit from obstetrics care at the hospital?

Donna Rabin

I think taking care of pregnant women and babies who have yet to be born is the foundation of healthcare. That’s where everything starts. You can’t have healthy adults unless you have healthy children, and you can’t have healthy children without healthy babies. Considering that our new focus is on keeping people healthy instead of doing crisis care, there’s no better place to start than with pregnancy.

Tom McAndrew

That’s right. If you want to have a growing community, you must have this service, especially because we’re so regionally isolated.

Why is Bay Area Hospital’s Family Birth Center important to the community?

Tom McAndrew

We are the essential provider in our geographical area. There are no other hospitals in the region doing OB (obstetrics) anymore, so we are an essential resource.

Donna Rabin

Our birth center helps families begin with a solid foundation. In the past new parents had the support of extended family, but that support is now frequently unavailable for myriad reasons. Moms and dads are at their most vulnerable when a newborn enters their lives. The birth center provides the support, education, and nurturing environment that new parents need.

Lynn Menashian

A birth center setting is unique. Women giving birth can go through labor and delivery as well as the after-care period with family and caregivers right there by their side. Because the birth center is located in a hospital, if experts knowledgeable about specialized care are needed, they are already here.

Continued on page 9
Growing Our Own Nurses

It’s no secret—the United States is dealing with a national nursing shortage. Fewer young people are choosing a career in nursing, so hospitals across the country are struggling to keep their staffing levels high. It’s a universal issue, but Bay Area Hospital has an innovative solution: a new internship program is building strong, experienced nurses in the ICU (Intensive Care Unit). The goal is to find nursing students with great potential, enhance that potential, and keep those nurses here in our community.

After a successful pilot program in 2016, the hospital, SWOCC (Southwestern Oregon Community College), and some dedicated workers in the ICU collaborated to make the internship an accredited program. Now two nursing students are getting real-world experience and guidance from the nursing staff in the ICU.

“We take these new students, second year from SWOCC, and we help them think critically,” says Chris Borgens, RN. “We help them fine-tune their care for our patients. It’s an opportunity for us to grow our own nurses.”

The idea came from Wendy Haack, DO, who completed a similar program when she was in nursing school. When she pitched the idea in 2016, it was met with enthusiasm. Hospital administrators and the community college were on board, but two dedicated nurses from the ICU truly propelled the program forward. Borgens and Catherine Bice, RN, BSN, volunteered to develop the curriculum and work with the students. Bice is a natural leader and, several years ago, took it upon herself to develop a new training program in the ICU. Likewise, Borgens has a passion for helping people learn new things.

“They have been the core of this program,” says Dr. Haack of Borgens and Bice. “The nurses are dedicating their time to this, and it’s a lot of work. They’re going above and beyond.”

In the first quarter, the student interns work alongside their mentor for one 12-hour shift each week, and by the second quarter they’re expected to work two shifts per week. The mentors follow along with SWOCC’s curriculum, showing the students how their daily studies apply to real-world situations. The students are immersed in the critical care experience, where they’re taught the ins and outs of the ICU, but the mentors say the most important skill the interns can acquire is one that cannot be taught in the classroom: critical thinking.
“It’s SWOCC, Bay Area Hospital, and the ICU doing this all together. No one of us could do it on our own.”

—Chris Borgens, RN

“You know, we can save lives and return people back to their families,” Bice says. “I care about this community, and I want to make sure that when I retire there are people ready to step into my shoes.”

The goal is to keep staffing levels and quality of care high in the ICU, but the benefit of the program expands beyond the Intensive Care Unit. Students benefit by gaining hands-on experience, and the college benefits by being able to entice students with an innovative program.

“I don’t think I could thank Dr. Haack and the ICU staff enough for the opportunity they’re giving these students,” says Susan Walker, SWOCC’s director of nursing and allied health. “And they’re great role models for the students. It has been an overwhelmingly positive experience.”

Meanwhile, the community benefits by gaining skilled, experienced nurses. The internship is exclusively for students wishing to stay on the South Coast and work at Bay Area Hospital, and the program already has one success story: Caleb Gasche, who interned during the pilot program, now works at Bay Area Hospital.

“We are very careful about whom we select for hiring—and not only for the students,” says Bice. “We’re looking for someone who is planning to live here for a while; we really want to put our energy into our community.”

“The goal of critical thinking is to think of what’s coming next—what’s coming down the road,” Bice explains, adding that if you think ahead, you can determine what’s about to happen to your patient then make appropriate interventions.

By the end of the training program, students are expected to be able to manage time, chart accurately, stabilize ICU patients, and have a firm foundation on which to build their career at Bay Area Hospital.
Prescribed drugs are often necessary for patients’ healing and comfort, but the remnants of the prescription—the unused medication—can transform something positive into something hazardous. Pills forgotten in a medicine cabinet can end up in the wrong hands, and medications flushed down the toilet can wreak havoc on the environment. The Drug Disposal Coalition is dedicated to protecting local families and the environment by providing safe disposal of supplements and prescribed medications. The group was formed out of necessity.

“We had a lot of patients bringing in medications and supplements, and we didn’t have a place to dispose of them,” says Rachel Stappler, a physician’s assistant at North Bend Medical Center.

Local healthcare and law enforcement officials came together in 2015 to form the coalition and have held a drug take-back event in Coos Bay every year since—collecting more than 230 pounds of medications this past year. Community members are invited to anonymously turn in their unwanted, unused, or expired prescription and over-the-counter drugs. The medications are then securely transported to a facility in Salem, where they are properly incinerated.

Recognizing the need in the community, the coalition has plans to expand its impact in the future. Thanks to a $15,000 grant from Bay Area Hospital Community Foundation, the coalition has the necessary funds to purchase two secure drop boxes for drug collection. Stappler says one box will be placed at North Bend Medical Center, and the other will be placed at Bay Area Hospital later this year. Stappler says beyond financial support, the hospital has also provided advice, legal counsel, and other services to the Drug Disposal Coalition.

“The program could not function without the hospital’s support,” Stappler says. “It’s a critical component; it’s a cornerstone of the group.”

Coalition members Rex Zeebuyth and Barbara Bauder sort prescription drugs for disposal.
As an organization, we focus on improving the health of our community every day. We can handle the acute care hospitalization needs of our region, yet we understand the importance of our community partners and the role they play in improving the lives and well-being of those who live on the South Coast. That’s why Bay Area Hospital Community Foundation has awarded more than $3 million to local organizations over the past nine years.

In 2017 the Bay Area Hospital Community Foundation handed out $467,728 in grants, a number that far exceeds grant totals from previous years. The recipients ranged from the Ready to Smile program, which offers thousands of children free dental care, to the Healing Sounds Project, which brings volunteer musicians into hospital rooms to soothe patients with calming melodies. While each of the 33 recipients is doing impressive, innovative work to promote healthy living on the South Coast, the largest grant—a $250,000 gift—went toward the future SWOCC (Southwestern Oregon Community College) Health and Science Technology building.

Continued on page 6
SWOCC announced plans for the project in 2016. Bay Area Hospital immediately pledged to donate a total of $1 million toward the new building and challenged the greater medical community to make the same investment in the future of local healthcare. Western Oregon Advanced Health (formerly Doctors of the Oregon Coast South) stepped up and pledged an additional $1 million.

“It’s a little overwhelming,” SWOCC President Patty Scott says of the community support of the project. Now, just one and a half years later, the college is within arm’s reach of its $18 million fundraising goal. SWOCC is on track to break ground this spring.

The college has offered nursing education since 1962, but the new facility will make a career in healthcare more attainable for local students. The Health and Science Technology building will replace outdated training spaces, introduce new technology into the classroom, and allow SWOCC to accept more applicants into its nursing and allied health programs.

Nearly all SWOCC nursing students go on to work at Bay Area Hospital, so larger class sizes could lessen the impact of the current nationwide nursing shortage. As we continue our mission of improving the health of our community every day, this project is on track to improve the local healthcare services of tomorrow.

March 1, 2018, is the application deadline for this year’s grant awards. For more information or to make a tax-deductible gift, call Barbara Bauder at (541) 269-8543.
Alternative Youth Activities
Provide students with transportation to medical appointments

Bay Area Rotary Club’s Shots for Tots
Assist with providing immunizations for local children

Bob Belloni Ranch, Inc.
Deliver foster teen-specific workshops on family planning, health, and hygiene

Boys & Girls Club of SW Oregon
Expand the triple-play program to help teach youth the benefits of a healthy lifestyle

Camp Millennium
Purchase an automated external defibrillator, a required resource for the camp, which caters to children with cancer

Charleston Rural Fire Protection District
Purchase external defibrillators, replacing equipment from 2006

City of Myrtle Point—Ambulance
Purchase a new transport ventilator with CPAP and BIPAP treatment capabilities

Coos Bay Downtown Association
Support the SNAP program, which helps low-income consumers buy healthy food

Coos Bay Public Schools’ ARK Project
Provide workshops to homeless youth regarding healthy food choices on a limited budget

Coos Bay Area Transit
Support affordable public transportation for senior citizens, people with disabilities, and the general public

Coos County Friends of Public Health
Provide vouchers for health services through Coos County Public Health

Coos History Museum
Support the development of a one-day veterans reconciliation event

Drug Disposal Coalition
Purchase two secure drop boxes for drug collection

Healing Sounds Project/Seven Fires Foundation
Support the program that brings musicians into Bay Area Hospital, soothing patients with therapeutic music

Knights of Columbus
Support the holiday food basket program

Mental Health Association of Southwestern Oregon
Support a part-time peer support employment specialist

Mingus Park Pool
Help purchase tarps for the pool to conserve fuel usage, energy consumption, and chemicals

Nancy Devereux Center
Facilitate and recruit volunteer advocates to work with and on behalf of clients

North Bend School Foundation
Provide clothing and necessities to homeless and at-risk students in North Bend

North Bend Senior Center
Help purchase a new convection oven and some needed repairs in the kitchen

Oregon Coast Community Action
Provide training to volunteers who advocate for abused or neglected children in the court system

Pediatric Psychiatrist Crisis Response Team
Support the team’s proactive prevention responses, processes, and resources for pediatric psychiatric crises

Ready to Smile
Help provide oral health education, screenings, sealants, fluoride varnishes, and dental kits to children at no cost

Continued on page 8
Coos Bay psychiatrist James Martin, MD, is the recipient of the 2017 John Whitty Award for Excellence.

Dr. Martin moved to the Oregon Coast with his wife, Georgia, and his two sons in 1973, becoming Coos Bay’s only psychiatrist, but his contributions to mental health started much earlier.

After graduating from University of Colorado Medical School, Dr. Martin joined the US Air Force. He played an important role as the only psychiatrist for a specialized correctional program rehabilitating air force offenders who had been court-martialed. It was the only program of its kind, and it proved to be successful: about 80 percent of servicemen who entered the program returned to service.

After discharge from the air force, Dr. Martin made huge contributions to the mental and physical well-being of people in his home state of Idaho. He helped develop an inpatient psychiatric unit and also started a free clinic, which to this day continues to serve uninsured and underinsured clients with dental and medical care. Eventually, a longing for ocean air brought the Martins to Coos Bay, where Dr. Martin opened his practice. Suddenly, he had very few blank spaces on his calendar.
“He was the only psychiatrist here for so many years and was always on-call, so he was gone a lot,” Georgia recalls. But it wasn’t long before she joined her husband at his office, doing biofeedback and counseling. Employees at Dr. Martin’s office say the clinic became a safe space for many people. Over the years the staff became like a family, and a 20-plus-year career at Dr. Martin’s office became the status quo.

“When I started back in 1989, he was working at his private clinic, he was still once a week going over to Coos County Mental Health, he was working with the folks at the Nancy Devereux Center, and he was part-time at the former Pacific Child Center, while also working at the hospital all by himself,” says Kim Davidson, who worked in Dr. Martin’s office for more than 20 years.

“He was the guy, and he made it look easy.”

—Kim Davidson

Dr. Martin became a Bay Area Hospital employee in 2008, and his office became the new Outpatient Psychiatric Services Unit. Throughout his decades-long career, he also served as chief of staff at Bay Area Hospital, president of Southwestern Oregon Medical Society, and even a delegate to the Oregon Medical Association. He officially resigned from the hospital in January 2017, but even in retirement he demonstrates true dedication to the health and well-being of residents of the South Coast. He maintains hospital privileges, is still on-call twice a week, and works one weekend per month.

The Whitty Award was established nine years ago in honor of Coos Bay attorney John Whitty, who was instrumental in establishing Bay Area Hospital more than 40 years ago. The annual Whitty Award recognizes individuals who make an extraordinary contribution to the health and well-being of our community.
For the Well-Being of Our Community

<table>
<thead>
<tr>
<th>Program</th>
<th>Key Facts</th>
<th>Staff*</th>
<th>Direct Annual Expense</th>
<th>BAH Subsidy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charity Care</td>
<td>Bills were wholly or partially written off for 1,554 patients in FY2016**</td>
<td>25</td>
<td>$1,628,148</td>
<td>$1,628,148</td>
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<tr>
<td>Community Education and Support Groups</td>
<td>175 education sessions reached 1,800 people in 2016. Diabetic Education is also provided to patients throughout the year.</td>
<td>7</td>
<td>$133,266</td>
<td>$133,266</td>
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<tr>
<td>Community Grants</td>
<td>27 agencies received grants in FY 2016</td>
<td>1</td>
<td>$239,000</td>
<td>$239,000</td>
</tr>
<tr>
<td>Health Screenings</td>
<td>1,052 participants</td>
<td>12 plus Volunteers</td>
<td>$7,773</td>
<td>$7,773</td>
</tr>
<tr>
<td>Health Professionals Education (Surgical Residents/Externs)</td>
<td>Provides undergraduate training and assistance in preparing future healthcare professionals. Supports two full time surgical residents and medical externs.</td>
<td>3</td>
<td>$213,121</td>
<td>$213,121</td>
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<tr>
<td>Home Health Agency</td>
<td>8,756 billable visits</td>
<td>30</td>
<td>$3,099,584</td>
<td>$949,502</td>
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<tr>
<td>Kids’ HOPE Center</td>
<td>295 child victims served this fiscal year; 91 medical exams; 165 referred to counseling; 189 forensic interviews</td>
<td>5</td>
<td>$311,789</td>
<td>$59,564</td>
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<tr>
<td>Management of Maternity Services (MOMS)</td>
<td>Nearly 90 percent of all women giving birth at Bay Area Hospital rely on MOMS</td>
<td>4</td>
<td>$417,741</td>
<td>$417,741</td>
</tr>
<tr>
<td>Cancer Support Services</td>
<td>Answers more than 400 annual physician requests to aid patients</td>
<td>4</td>
<td>$770,000</td>
<td>$770,000</td>
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<tr>
<td>Psychiatric Services</td>
<td>3,928 inpatient and outpatient encounters in FY 2016</td>
<td>24</td>
<td>$2,669,121</td>
<td>$1,205,304</td>
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<tr>
<td>Cardiac Services</td>
<td>Helps cardiac patients live longer, healthier lives with ongoing follow-up and education</td>
<td>1</td>
<td>$108,980</td>
<td>$108,980</td>
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<tr>
<td>Inpatient Dialysis Services</td>
<td>Provides local service to inpatients and avoids transfer to out of area hospitals</td>
<td>23</td>
<td>$22,660</td>
<td>$22,660</td>
</tr>
<tr>
<td>Student Volunteers</td>
<td>31 students</td>
<td>1</td>
<td>$29,000</td>
<td>$29,000</td>
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<tr>
<td>Family Housing Unit</td>
<td>Free housing provided for patients who live more than 50 miles from hospital</td>
<td>1</td>
<td>$35,000</td>
<td>$35,000</td>
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<tr>
<td>Miscellaneous Community Services</td>
<td>Additional services provided to community include: SANE (Sexual Assault Nurse Examiners) Exams, Body Walk sponsorships, taxi, food, and prescripton vouchers, annual drug take back program and miscellaneous other monetary and in-kind donations</td>
<td>20</td>
<td>115,983</td>
<td>$115,983</td>
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<tr>
<td><strong>Totals</strong></td>
<td></td>
<td></td>
<td><strong>$9,801,166</strong></td>
<td><strong>$5,935,042</strong></td>
</tr>
</tbody>
</table>

*Bay Area Hospital employees and volunteers who devote all or part of their time to the program  
** FY 2016 denotes the 2016 fiscal year: July 2015 through June 2016; 2016 is calendar-year 2016.
### Summary Balance Sheet

*As of June 30, 2017*

**Assets**
- Current assets: $55,157,199
- Investments: $59,739,614
- Property, plant, and equipment, net: $79,902,716
- Other assets: $8,652,703
- **Total assets**: $203,452,232

**Liabilities**
- Current liabilities: $20,929,938
- Long-term debt: $8,919,480
- Other liabilities and minority interest: $13,398,531
- Net position: $160,204,283
- **Total liabilities and net position**: $203,452,232

### Summary Statement of Revenues and Expenses

*As of June 30, 2017*

**Operating Revenue**
- Net operating revenue: $183,874,412

**Operating Expenses**
- Wages and benefits: $86,789,723
- Supplies: $51,084,080
- Depreciation: $8,351,750
- Other expenses: $26,181,138
- **Total operating expense**: $172,406,691

**Income (loss) from operations**: $11,467,721
**Net nonoperational gains (losses)**: ($274,905)
**Revenue in excess of expenses**: $11,192,816

### Key Operating Indicators - Fiscal Year 2017

- Average available beds: 129
- Patient days (inpatient): 24,576
- Patient days (observation): 2,318
- Average daily census: 67
- Discharges: 6,822
- Adjusted discharges: 13,954
- Average length of stay (days): 3.98
- Babies delivered: 648
- Surgeries: 4,783
- Emergency department visits: 29,068

### Workforce Statistics - Fiscal Year 2017

- Average number of employees: 1,070
- Average age of employee: 45.89
- Average length of service: 9.67
- % Regular full-time: 67%
- % Regular part-time: 17%
- % Supplemental, on-call, and per diem: 16%
- % Physicians: 1%
- % Managers: 3%
- % Registered Nurses: 38%
- % Certified Nursing Assistants/Licensed Practical Nurses: 11%
- % Office, trades, services: 47%
- % Total: 100%
Together for the
Health of Our Community

It takes people caring about each other to make the dream of a healthy community into a reality. This was true many decades ago when the first hospital was built here and it’s still true today. Bay Area Hospital is our hospital, and with continued community support, we can address the major health issues in our region and improve the quality of life for everyone who lives here.

As 2018 begins, join your many friends and neighbors who give to the Bay Area Hospital Community Foundation—ensuring high-quality healthcare for generations to come.

For more information regarding donations, contact Barbara Bauder, Bay Area Hospital’s Chief Development Officer, at (541) 269-8543 or Barbara.Bauder@bayareahospital.org.

All contributions are significant and tax deductible.
Why don’t more hospitals have family birth centers?

Lynn Menashian
An acute care hospital, that is, a hospital geared to taking care of sick people with urgent medical needs, has a lot of competing priorities for time, budget, staying on top of regulatory requirements—it’s all of that; and it can be hard to build capacity and the expertise to do something like a birth center.

Tom McAndrew
You’re trying to make this a nonmedical experience. You want this to feel like a family. You want knowledgeable people by your side. But a lot of resources are needed to create this environment. You need a staff of great obstetricians and specialized nurses, but you also need things like anesthesia support and pediatric care. On the surface, OB appears to be wellness care, but in reality it is very complex and requires a lot of infrastructure.

As healthcare continuously changes, what is Bay Area Hospital doing to adapt?

Tom McAndrew
Innovation is one of our organizational values, and it’s something we really strive for. One example is our MOMS (Management of Maternity Services) program, which gives support and information to expectant mothers. No other hospital has this program. It’s amazing. We also offer VBAC (vaginal birth after cesarean). That’s something that more and more patients are asking for but not a lot of hospitals are doing.

Lynn Menashian
I would add that the hospital has the advantage of a strong leadership team plus a medical staff, employees, and a board of directors that care deeply about the people in this community and how they receive medical care. We are continuously keeping an ear to the ground for what’s up ahead: changes to the laws, new equipment that may be needed, and services we don’t have and need to think about providing. Bay Area Hospital’s openness to technology and acceptance of the resulting changes will be key to our ongoing success.

Bay Area Hospital has a sharpened focus on collaboration with other local clinics and healthcare providers. Why are these partnerships so important?

Donna Rabin
If you’re going to take care of somebody from birth to death, which ideally is what the hospital wants to be able to do, you can’t do it by yourself; you have to do it with a community. That requires collaboration with other local organizations, and that’s something the hospital is starting to do. We understand that patient care begins before someone enters the hospital and continues after they leave. The goal is to provide a comprehensive continuum of care, especially for high-risk patients, through an interdisciplinary communitywide system. That requires partnerships and collaboration across the community.

Fun Facts
Did you know?
648 babies were delivered at Bay Area Hospital in 2017!
Advancing Technology and Decreasing Pain

A hysterectomy used to come with large scars, severe pain, and a lengthy recovery. Fortunately, times have changed. Thanks to robotic technology, like that offered at Bay Area Hospital, hysterectomies and other surgeries can be done as minimally invasive procedures, resulting in reduced pain, less blood loss, and faster recovery time.

“Patients go home the same day from hysterectomies and procedures like that,” says Hope Vermaire, DO. “The blood loss is minimal, and the risk of injury is decreased. I think it’s been really changing the field of gynecology.”

Dr. Vermaire and Stephan Groth, MD—both doctors of obstetrics and gynecology—perform robotic-assisted surgery at Bay Area Hospital. Gynecological procedures include hysterectomies, removal of ovarian cysts, detection and treatment of endometriosis, and sacral colpopexy. Robotic technology is also used in urology and general surgery.

Dr. Groth says that feedback from patients who have undergone robotic-assisted surgery has been overwhelmingly positive: “We now have patients coming in who have friends who have had it done, and they request, ‘Can my surgery be done with the robot?’”

Similar to the laparoscopic method, robotic-assisted surgery involves small incisions and cameras inside the body, but robotic surgery includes an added layer of technology. The system registers the surgeon’s hand movements and translates them into more-delicate gestures, which are carried out by the tiny instruments inside the patient’s body. Furthermore, the surgeons say the image is much more detailed.
“The visualization is amazing,” says Dr. Groth. “It’s superior to both open and laparoscopic surgery. You can just see the planes and the tissue so much better, and you can zoom in way closer than you can with any other technique.”

In December 2017, Bay Area Hospital took its commitment to leading-edge technology one step further by purchasing a new robot, the da Vinci Xi Surgical System. The new system replaced the previous robot, purchased in 2013. In terms of gynecology, Dr. Vermaire says, procedures have ultimately remained the same with the new technology, but robot operation is simplified for the surgical team: “The new robot allows you to work in multiple quadrants without needing to turn your camera around or things like that. It’s a much more streamlined approach to surgery that occurs throughout the entire abdomen.”

The new technology has clear advantages for gynecological surgery, but it is a game changer for general surgery at Bay Area Hospital. The da Vinci Xi system allows surgeons to perform more procedures, including advanced colon surgeries and improved hernia repairs. Members of the robotics team also say that procedures take less time with the new robot, allowing them to do more cases per day.

“We act as a medical hub for the area,” says Dr. Vermaire, “and I think it’s great that we’re able to offer that technology and the most up-to-date surgical methods.”

Fun Facts
Did you know?
A total of 4,783 surgeries were conducted at Bay Area Hospital in 2017.
Dr. Britta Fink
North Bend Medical Center

As a young child in Tucson, Arizona, Britta Fink, MD, knew she was meant to be a doctor. She attended a liberal arts college, double-majoring in English and biology, knowing that medical school was the next part of her grand plan.

“It’s hard to explain how I knew that was my calling when I was a much younger person,” she says, “but I think it combined my interest in science and helping my fellow human beings in a way that I knew I’d probably be pretty good at.”

After she attended Wake Forest School of Medicine in North Carolina and completed her residency at Maricopa Medical Center in Arizona, Dr. Fink’s lifelong ambition became a reality. She has now been an OB/GYN for 14 years. She says she takes particular interest in caring for patients with vulvar disorder, endometriosis, and polycystic ovary syndrome.

“My favorite part is explaining to people how their body works and how we can help make it work better,” says Dr. Fink.

When she’s not caring for patients or delivering babies, Dr. Fink enjoys spending time in her garden and keeping up with her three daughters.

Dr. Stephan Groth
Bay Clinic

Stephan Groth, MD, has been an OB/GYN for more than 20 years, but when he enrolled in the University of Kansas School of Medicine, he had envisioned a very different career path: “I went to medical school, and they always ask you what you think you want to do,” he says. “I said, ‘I don’t know. I just know I don’t want to be a psychiatrist or a gynecologist.’”

Throughout his OB/GYN rotation, Dr. Groth was drawn to the diversity of the job: doing primary care, seeing patients regularly, performing surgery, and of course delivering babies. After completing his residency at the University of Texas Health Science Center in San Antonio,

Dr. Groth started his first practice in Pennsylvania and moved to Coos Bay just two years later.

“Oregon is where I think I was meant to be,” he says. “I get to look out my window and see the bay and be out in nature every day. And I have elk that come in my yard. It’s just the whole package.”

Dr. Groth has been with Bay Clinic for 18 years and says having personal interactions with his patients is the best part of the job. In recent years he has also enjoyed adding robotic-assisted surgery to his list of specialties.

“Part of the reason why I’m in this specialty is you get to do so much,” he says.

When he’s not at work, Dr. Groth enjoys skiing, mountain biking, hiking, and enjoying all that Oregon has to offer.

Bay Area Hospital offers VBAC (vaginal birth after cesarean). These deliveries require anesthesia and an operating team to be on-site, but it’s worth it to ensure that the birthing process meets the mother’s wishes and preferences.
Hope Vermaire, DO, is one of our area’s newest OB/GYNs, having moved here in the fall of 2016. Originally from Michigan, Dr. Vermaire was looking for an escape from the snow, and she found just what she was looking for when she interviewed in Coos Bay. She came to town on a sunny autumn day, and the Oregon Coast won her over.

“I went surfing and ran along the coast,” she says. “It was amazing.”

Dr. Vermaire attended Michigan State University College of Osteopathic Medicine and completed her residency at St. Joseph Mercy Oakland in Pontiac. She has a special interest in minimally invasive surgery and appreciates the diversity of her job.

“I love connecting with my patients and being able to follow them through their pregnancies,” she says, “and I see my patients in the office regularly. But I also love that I get to be in the OR (operating room) and do surgeries.”

When she’s not at work, Dr. Vermaire likes to spend time outdoors. Her hobbies include hiking with her dog, surfing, camping, and cooking.

Kimberly James, MD, started at North Bend Medical Center in July 2017, but she’s no stranger to the area. After serving in the US Navy for 16 years and working in other parts of Oregon, the Marshfield High School graduate has finally returned home.

Dr. James had attended medical school and completed her residency while on active duty with the navy. She’d intended to become an orthopedic surgeon, but an OB/GYN rotation changed her mind: “It was funny because that was the only thing I knew I didn’t want to do,” she says.

Dr. James moved back to Oregon in 2006 and had practices in both Bend and Lebanon before returning to the South Coast.

“Delivering babies is the best job in the world,” she says. “I’m very fortunate. It’s obviously very challenging and complicated, but it’s such a major thing for a family to bring a life into the world, and to help with that is very special.”

When she’s not at work, Dr. James enjoys true Pacific Northwest living with her family: “We fish, we crab, we camp, we’re big outdoors people. That’s why we love the Southern Oregon Coast.”

You could say that it was Julie Abbott’s sister who led her to a career as a midwife. As a teenager, Abbott had the experience of being a labor coach and support person for her sister when she became a young mother. All was well, and a few years down the road, Abbott’s sister gave birth again, but this time things were different. The baby was lost due to a heart defect, and Abbott says her sister’s grief process was not handled well.

“That’s when it was cemented in my brain that I really wanted to become a nurse, become a nurse midwife and make a difference in obstetrics,” she says. “I had a calling to become a midwife and to help women not only in the happiest of times but also in the saddest of times.”

Abbott completed nursing school and went on to receive her master’s degree from Case Western Reserve University. She has been a certified nurse midwife for nearly 14 years. She says that while catching babies is fun and exciting, her favorite part of the job is doing full-scope care.
“I just feel very blessed to help women build families, but caring for women across the lifespan and building relationships with them has been a joy for me,” says Abbott.

In her free time, Abbott enjoys singing at church and drawing. She has worked hard to refine her artistic talents in recent years and now uses her skills to host wine-and-paint nights. All the money she raises is donated to charities or families who have lost children.

Susan Chaney
Certified Nurse Midwife
Bay Clinic

Susan Chaney has a combined 20 years of experience in labor and delivery, having been a certified nurse midwife for the past 16 years and a labor and delivery nurse for 20.

The Coquille native attended nursing school at OHSU (Oregon Health & Science University) with the intention of one day becoming an OB/GYN, but when she met a midwife for the first time, her plans changed.

“I had never heard of midwifery or midwives before,” she says. “She taught me about what they do, and I was just, like, This is what I was destined to be!”

Chaney went on to receive her MS from OHSU and dove into her new career. In her eyes the most rewarding part of the job is getting to be with women throughout their pregnancy and birth, which she says is often a once- or twice-in-a-lifetime experience for women.

“It is often one of the most joyous experiences of their lives,” she says, “so getting to be with them is pretty incredible on a daily basis.”

When she’s not at work, Chaney enjoys spending time with her family. She often accompanies her husband on his photography outings and is also involved in the local theater, although due to the unpredictable schedule of a midwife, she stays behind the scenes and leaves the spotlight to her children.

Heather MacLean
Certified Nurse Midwife, Nurse Practitioner
North Bend Medical Center

When Heather MacLean graduated from Marshfield High School, she already had a pretty clear idea of what the future had in store. “I knew from a young age that I wanted to be in Women’s Healthcare,” MacLean said. “So that was always my focus.”

After attending SWOCC and Linfield College, she was drawn to the Midwifery approach to women’s healthcare, and went on to receive her Master’s from Case Western Reserve University. “What I really appreciate the most about midwifery is the foundation is educating and involving the woman in making decisions,” MacLean said.

She’s now in her 20th year as a Certified Nurse Midwife at North Bend Medical Center, and she loves that she is able to give back in her hometown. “It’s fantastic. I see people that I went to school with,” MacLean said. “I see patients around the community, because it’s small. So that’s a fun experience, to run into people in town and watch their children grow and be healthy and successful.”

When she’s not at work, MacLean can be found spending time with her daughter, or outside, appreciating the Pacific Northwest.

Fun Facts
Did you know?

Our Family Birth Center offers skin-to-skin contact after C-sections. Whenever possible and at the patient’s request, the baby is immediately placed on the mother’s chest and tucked into her gown as the doctor completes the surgery.
Anita Merritt, CNM  
Certified Nurse Midwife  
Bay Area Hospital

Anita Merritt has been a certified nurse midwife for nine years, but her background in labor and delivery goes even further back. Several years ago she was working as a labor and delivery nurse, seriously considering midwifery. One day during her shift, a mother was in labor and her midwife couldn’t make it to the hospital. Merritt caught her first baby that day, and she was hooked. She went on to attend Frontier School of Midwifery and Family Nursing in Kentucky.

Merritt now works as the night midwife on staff at Bay Area Hospital, a position that comes with a unique role. Rather than having her own practice, Merritt takes care of any laboring mother who comes into the Family Birth Center at night; she manages the mother’s care until just before the birth, when the patient’s assigned OB or midwife arrives to deliver the baby.

Merritt also assists with C-sections, takes late-night calls for the other providers, and handles other needs throughout the Family Birth Center. It’s a job she says she feels lucky to have: “Seeing the joy and wonder and the look on women’s faces when they meet their babies for the first time—that’s the best part.”

Merritt says that allowing the other providers to sleep through the night ensures that they are able to take care of the rest of their patients during the day: “Statistically, hospitals that have a person in this position have lower C-section rates and better outcomes because everyone is more rested.”

When she’s not working, Merritt enjoys spending time with her husband and two daughters. On a nice day, you might find them at a great camping spot with their two dogs or working hard on their home remodel.

Dr. Catherine Gruchacz  
833 Anderson Ave., Coos Bay

As a high schooler in New Jersey, Catherine Gruchacz, MD, was inspired to go into medicine by her high school biology teacher. She thought her heart was set on pediatrics, but while going through her clinical rotations at New Jersey Medical School, she changed course.

“I decided I wanted to be an OB/GYN,” Gruchacz said. “Mainly because I like taking care of a woman through the entire scope of her lifespan, and delivering babies, and being able to do surgery.”

She completed her residency at Rutgers University and opened her first practice 31 years ago. Although 20 years ago, Gruchachz gave up obstetrical care and began practicing solely gynecology, in order to provide a more reliable schedule for her son. Gruchacz first spent some time in Coos Bay beginning in 1991. Her career has taken her in and out of the area several times, but in 2006, she decided to make Coos Bay her permanent home. She now has a private practice in Coos Bay.

“I’m kind of like an old-fashioned practice. I believe in sitting down and talking with a patient, and not rushing in and out and seeing people like on an assembly line,” Gruchacz said. “Women need to take care of their bodies and I can help them do that.”

Gruchacz spent many years as a busy baseball mom and band mom, but now that her son is grown and out of the house, she spends her free time working in the garden and redecorating her home.
Congratulations
Are Due

Frank Mukaida, MD, has spent the past 17 years welcoming Coos County’s newest residents to the world. He has offered exceptional obstetrics/gynecological services in our Family Birth Center and at North Bend Medical Center, but at the end of October, Dr. Mukaida decided retirement was due.

“‘It’s been a privilege having a great team to work with—the nursing staff here at the hospital and my office staff also,” Dr. Mukaida says. When asked about his favorite part of the job, Dr. Mukaida answered without hesitation: “I do enjoy seeing the babies grow up in the community. That’s wonderful. I’m very privileged that patients have chosen me as their provider, and I feel blessed.”

In his retirement Dr. Mukaida is looking forward to spending more time with his own children as they complete high school.