profiles of care
The mission of Bay Area Hospital is to improve the health of our community every day. The vision of our hospital is to be the model for regional healthcare excellence. As we strive to achieve our mission and pursue our vision, we undergo constant self-examination. In this issue of Currents, we take a look at one of the ways in which we ensure that we are staying true to our mission. It is called Joint Commission accreditation, and it is a rigorous process that never ceases at Bay Area Hospital. We also introduce you to several people behind some of the great, and in some ways innovative, ways that we challenge ourselves to get better every day.

Also, in 2015 the Community Health Improvement Plan Steering Committee made mental health a priority area for 2015–2020. This is partly due to the high suicide rate in Coos County, as well as the close intersection of mental health with various other health areas.

In this issue we take a look at several areas in which Bay Area Hospital is already taking steps to prioritize mental health. As we say good-bye to one of the pillars of the local psychiatric community with the retirement of James Martin, MD, we introduce you to Drs. Robert Gerber and Pallav Pareek—two of the busiest physicians on the South Coast.

You will also learn how some of the money donated during our annual Bay Area Hospital Community Foundation grant awards will benefit the young people of our community who are facing their own mental health battles, thanks to an innovative program called MY-CRU.

Finally, not all of our good work comes from within. We introduce you to a couple who have helped the hospital in a variety of ways over many years. Tom and Joan Stamper, this year’s recipients of the John Whitty Award for Excellence, are a strong reminder that some of the best results come when we work together.

As an added bonus, we’ve included our community benefits report. Take a moment for a closer look at the numbers; they have an impressive story to tell, as well.

We feel good about what we are doing at Bay Area Hospital, and we believe that the programs and people you read about in these pages demonstrate our resolve to improve the health and welfare of our community every day.

Paul G. Janke, FACHE
President and CEO

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Music practitioner
Robin O’Neill plays acoustic guitar
for a patient.
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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
There are many ways to ensure that a hospital is doing its best for the safety of its patients. One of the most rigorous ways is for it to be subjected to The Joint Commission accreditation process.

Founded in 1951, The Joint Commission, an independent, not-for-profit organization, evaluates and accredits nearly 21,000 healthcare organizations and programs in the United States. Its Gold Seal of Approval must be maintained through an on-site survey by a Joint Commission survey team at least every three years.

Bay Area Hospital first received accreditation when the hospital opened in 1974. In 2016 it earned its fifth straight Gold Seal of Approval for quality and patient safety. But CEO Paul Janke says that the only way the average citizen really feels the impact of The Joint Commission is by not noticing anything out of the ordinary: “We put a lot of time and effort into maintaining our Joint Commission accreditation, and we are pleased that we have been reaccredited. It shows that we have once again reached the very high standards that The Joint Commission has set.”

A Joint Commission survey is basically a pop quiz of the highest order. It’s conducted, unannounced, by a team of highly trained experts, comprising doctors, nurses, hospital administrators, laboratory medical technologists, and other healthcare professionals. During the survey patients are randomly chosen to assist the team. The patient’s medical records are used as a road map to evaluate standards compliance. The experts also talk with the doctors, nurses, and other staff who interacted with the patient; they even observe doctors and nurses providing care, and they will often speak to the patients themselves as part of the process.

But all of this is just the start. You can’t just pass the pop quiz and then take it easy for the next three years. Under the Joint Commission process, hospitals continue to submit data every three months, detailing how they
Bay Area Hospital nurse, Megan Haveter, RN, confirms she has the right patient and the right medication at the bedside.

treat conditions such as heart attack and pneumonia. That data is then made available online to the public through a quarterly update at www.qualitycheck.org. It is a continuous process that becomes part of the hospital’s DNA.

“Joint Commission accreditation provides hospitals with the processes needed to improve in a variety of areas, from the enhancement of staff education to the improvement of daily business operations,” says Mark G. Pelletier, RN, MS, the chief operating officer in the Division of Accreditation and Certification Operations at The Joint Commission. That translates into patient safety over the long haul. If a healthcare organization provides care that meets or exceeds national standards, that increases the opportunity for better outcomes for the patient.

“This whole process ultimately is a testament to the care provided by our clinicians, including our doctors, nurses, and other healthcare professionals,” says Janke.
Healing Sounds

The Healing Sounds Project was years in the making, before the funds from Bay Area Hospital Community Foundation came through. In July two experienced musicians—and familiar faces around Bay Area Hospital—started playing soothing, therapeutic music at various locations in the hospital on Monday and Wednesday afternoons.

Lynda Cole, RN, a psychiatric and hospice nurse, plays harp and Native American flute. Robin O’Neill, a certified music practitioner, typically plays acoustic guitar. While both can also play other instruments, they say the therapeutic nature of the instrument is taken into account before it can be brought into the hospital.

“We are very careful to use instruments that use the lower tones,” O’Neill says, “that are much more soothing.”

Cole says that the reaction from staff and patients has been universally positive. Even the more seriously ill patients, she says, will respond through a softened demeanor, or you’ll see a small smile or hear a sigh of relaxation.

“We get everything, from tears of joy, tears of relief, to tears from family members who say they haven’t felt this relaxed in the whole time they’ve been watching a loved one go through an illness,” O’Neill says. “And, from staff, they’ve asked if we could come every day. They say, ‘This is so relaxing.’”

While more volunteer musicians are welcome, they do need to fit a certain criteria. “We are trained to be aware what is going on ‘in the moment’ and what would be appropriate,” Cole says, “and so far there have been zero complaints about our being a nuisance or too loud.”

If you would like to lend your talents or time, contact Human Resources at Bay Area Hospital.

Robin O’Neill and Lynda Cole prepare their harps before playing for patients.
Alexey Markelov, MD, and his wife came to the United States from Kazakhstan about a decade ago in search of the American dream. They believe that search may have ended in Coos Bay.

“I picked plastic surgery because I loved the diversity of it,” says Dr. Markelov, “and that is one of the reasons why I picked Coos Bay as an area to practice. Here I can utilize all of my diverse skills. I just want to be like the typical small-town doctor who can do everything.”

Part of the reason why Coos Bay became that small town was another doctor with big-city skills. The University of Pittsburgh is a worldwide leader in the field of plastic surgery. It is also where a Marshfield High School graduate was teaching aspiring and talented young surgeons. Ernest Manders, MD, spotted something in Dr. Markelov and helped pique his interest in Coos Bay.

While Dr. Markelov is building a truly unique body-contouring program with Steven Tersigni, MD, a bariatric surgeon, it’s what he is doing with the hand that is currently turning heads. Dr. Markelov specializes in minimally invasive carpal tunnel surgery, using smaller incisions that get people back to their daily routines in no time. But that just scratches the surface.

“There’s another cutting-edge procedure,” he says. “People frequently develop arthritis in the base of the thumb, and I can take a piece of cataract skin and put it there, and it creates a buffer between two bones so they don’t rub against each other. It gives people great pain relief, and recovery time is minimal.”

Dr. Markelov was a presidential scholar in Kazakhstan and graduated from one of the premier medical schools in the world, but he knows that his success depends on his skill. “I fell in love with this country because here you can be who you want to be. I came here with nothing—$50 in my pocket—with my wife. Now I’m a plastic surgeon,” he says with a smile. “Here people value you based on what you can do. I really love that about the United States.”
Cultivating the Mental Health Outlook

Psychiatric Services is reaching an exciting period of potential at Bay Area Hospital, and two local amateur gardeners are hoping it helps cultivate a great regeneration in mental health care for the area.

Robert Gerber, MD, and Pallav Pareek, MD, may hail from different backgrounds and generations, but both share some common interests. The 61-year-old Dr. Gerber and the 38-year-old Dr. Pareek both enjoy gardening, cooking, and being outdoors. They also want to change the perceptions people have about those who suffer from mental health issues and about the Psychiatric Services program at Bay Area Hospital.

“This is state of the art—world-class,” Dr. Pareek says. “It really is a very humane and compassionate place to be. If your loved ones are sick, this is a place where they can get the attention they need. It is not a punishment.”

The hospital provides both inpatient and outpatient care for the community. The inpatient unit is a secure 11-bed, acute care facility located inside the hospital; the outpatient services are located in an off-site clinic. The facilities are in demand because they are the only ones around for miles. Dr. Gerber likens it to an island outpost, as many surrounding communities either have never had psychiatric units or have had to close them down.

The overflow has stretched resources thin, which has made alliances quite necessary. Dr. Gerber, for example, is also the chief medical officer at Waterfall Community Health Center; Dr. Pareek works for the county at Coos Health & Wellness. Both say those arrangements have helped make for a more united mental health front in our area.
“Waterfall has increased its capacity to offer behavioral health visits tenfold in the past year and a half,” says Dr. Gerber, “and we hope to continue to work closely with the hospital and the county in serving the community and being available for both.”

Meanwhile Dr. Pareek says that the psychiatric unit in the hospital recently received some very welcome news: “We just got some money and are looking at expansion. We’re looking to make things more spacious and get more providers involved in the community.”

Dr. Pareek stated that with the leadership of Kera Hood in Psychiatric Services and Paul Janke, the future of mental health services has never looked brighter.

“That is also because the whole psych team and the staff here are so reliable,” says Dr. Pareek. “They are all just top-notch. I’m thankful to have such a great group.”

Hard to Replace

After working for more than 50 years in the field of psychiatry, James Martin, MD, has earned some time off. Doctors Gerber and Pareek say the man who has been operating the outpatient clinic for Bay Area Hospital since 2008 is an absolute “pillar.”

“He has handled, singlehandedly, the whole of the psychiatry needs for all of the Coos County area,” says Dr. Pareek. “I don’t think his retirement can ever really be filled.”

Dr. Martin, 81, has witnessed many changes in his field, but one stands out that pleases him: “There has always been a certain stigma attached to mental illness. But I think that, as people become more educated and informed, there is less of that issue that we have to deal with.”

Dr. Martin and his wife of 56 years, Georgia, have two sons and a grandchild that they will soon get to spend more time with, but don’t look for him to slow down completely. “I like the outdoors and still ride a bicycle,” he says.
Barbara Van Slyke, RN, BSN, OCN, has been in the patient navigator role at the Bay Area Cancer Center for little over a year now. Gary Salcedo, RN, ONC, was just recently named to the post for the Orthopedic unit. Both can draw on decades of nursing experience to help ease their patients’ anxieties and ensure that they are getting the best care.

“Once the physician says you will need total knee or joint replacement, there are things the patient needs to consider,” says Salcedo. “If they have medical conditions, we want to optimize those conditions before surgery to lesson any risks of complications.”

There are a lot of things to consider, but Salcedo, a certified RN and the secretary of the National Association of Orthopaedic Nurses who has been with the hospital since 1986, now has technology to help him keep track of those he is navigating: “When I started here, we had glass IV bottles and everything on paper records; now we have plastic IV bags, and it’s all computerized.”

Van Slyke has been a nurse in Oncology since those glass-bottle days, as well. She uses all of her 26 years of experience and studies, and her self-described “nerdlike scientific curiosity,” to stay on top of that constantly changing field.
The computerization helps her too, but only to a point. That’s because the patients she navigates through Bay Area Cancer Center don’t always have an illness that sticks to a schedule.

“There is no technology that can tell me who will be in distress,” she says. “It’s a little bit different. But there are different mechanisms and tools that we have to help decide who I help that day. For one, the patient can just walk in or call me, or the physician can come over and get me for a consult. I also do a lot of just reviewing—seeing what is going on in the documents in our charting—to find any potential barriers where a patient may need my assistance more.”

In the end this extra attention is there to benefit the patient.

“It really helps them to have the education they need to heal successfully after surgery,” Salcedo says. “It just lessens the issues that could land them back in the hospital.”

And the two navigators are really just the tip of the iceberg when it comes to care. Part of their role, Van Slyke says, is helping patients understand that there is a whole team behind them. Patients don’t have to know how to get ahold of the whole team; they only have to get ahold of one person. “But we’ve all got your back throughout this journey you are going through.”

Staying on the Path
Cancer Survivorship

Barbara Van Slyke, as an oncology nurse, has seen the emotional upheaval take place in the lives of her patients after they’ve beaten cancer. “They go through treatment, and family and friends have been there with them. When they complete treatment, everyone is like, ‘Yay, you’re done; you are yourself again!’ But it is not really like that. Inside you are not yourself.”

Van Slyke and three other motivated, dynamic healthcare professionals on the South Coast are developing a new program to help cancer survivors adapt. She says the workshop offers an individualized journey for the survivor looking to live healthier while minimizing the risk that the cancer will return. It is a mix of scientific and holistic approaches. “We are just superexcited!” she says.

There will be a cost associated with the workshop, and an optional seventh week is focused on smoking cessation. Check out the Southwestern Oregon Community College winter catalog for details.

If you have questions about cancer or other health issues, please visit:

[www.bayareahospital.org/HealthLibrary.aspx](http://www.bayareahospital.org/HealthLibrary.aspx)
Honoring the Stampers

JOHN WHITTY AWARD FOR EXCELLENCE

Tom and Joan Stamper have been married for more than 50 years, owned a business that dated back to when the town of Coos Bay was still known as Marshfield, and have lent a helping hand at Bay Area Hospital since its inception in 1974. When it comes to family, business, and community, the Stampers like to work for the long haul.

“I like building things that will last,” Tom explains. That drive helped him grow his father’s business, J&J Tire Service, from one Coos Bay location into six. When Tom decided to sell the stores and retire in 1999, the Stampers turned their attention to philanthropy. He and Joan have since assisted with a wide range of local causes. That commitment to the hospital and the community was honored by the Bay Area Hospital Community Foundation, with the Whitty Award for 2016.

One of those ways has been through Joan’s volunteer efforts. She has spent more than four decades volunteering with the hospital’s Auxiliary and, in fact, was a charter member. “Volunteers not only provide a free workforce,” Joan says, “but they can also provide the interest you need in new projects. They are right there, so they can see when there is a need.”

Tom and Joan say that is basically what they do now on a full-time basis: they see a need in the community, and then they see what they can do to help out.

“The John Whitty Award for Excellence recognizes individuals dedicated to improving the community’s health and well-being. It was named for Coos Bay attorney John Whitty, who was the award’s first

recipient. “Tom and Joan are really good people who go out of their way, in a very quiet way, to help this area and its institutions prosper,” says Whitty. “They’ve been very generous to the community in a variety of ways.”

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