

Joint Community Health Needs Assessment Report



Bay Area Hospital
Coos Bay, Oregon



Coquille Valley Hospital
Coquille, Oregon

Published June 30, 2024

Introduction

Bay Area Hospital and Coquille Valley Hospital are pleased to submit this Community Health Needs Assessment. We do so both as a matter of compliance with Section 501(r)(3) of the Internal Revenue Code, as mandated in the Patient Protection and Affordable Care Act, and as an obligation to those we serve. As an organization, we view this project as an opportunity to improve our community service and continuously focus on meeting the changing health care needs of our community.

Consistent with the requirements of Section 501(r)(3) the Community Health Needs Assessment Report is organized as follows:

- Who We Are
- Our Community
- Actions Taken Since Last Community Health Needs Assessment
- Community Health Needs Assessment Methodology
- Prioritized Community Health Needs
- Conclusion
- Existing Community Health Resources

Who We Are

Bay Area Hospital

Bay Area Hospital is a 134-bed acute care hospital in Coos Bay, Oregon. Created and owned by local citizens, Bay Area Hospital has been the hub of Oregon's South Coast health care for nearly five decades. It has endured and grown despite hard economic times, continually adding new technology and broadening its services.

Bay Area Hospital is certified by the state as a Level III trauma center, providing comprehensive inpatient services to those patients who can be maintained in a stable or improving condition without specialized care. An in-house multidisciplinary trauma resuscitation team is immediately available upon arrival of the patient to the emergency department.

As the Medical Center for Oregon's South Coast, Bay Area Hospital offers a comprehensive range of diagnostic and therapeutic services. Physicians, nurses, and technologists are on duty 24-hours a day to meet the medical and emergency needs of South Coast residents and visitors. Our highly skilled staff is involved in a constant process of professional educational opportunities to keep abreast of the latest medical innovations.

Our Mission

We improve the health of our community every day.

Our Vision

Bay Area Hospital will be the model for regional health care excellence.

Bay Area Hospital is driven by a mission to provide high-quality health care that extends beyond the hospital walls. We are dedicated to promoting and improving the health of our local communities and residents by providing a range of vital services to meet the unique needs of the communities we serve. Much of what influences our health happens outside of the doctor's office—in our schools, workplaces, and neighborhoods. Bay Area Hospital shares a common goal of improving the health of our community and lowering the cost of care.

Bay Area Hospital provides the following services to our community:

- Family Medicine Services
 - Diabetes Program
 - Family Birth Center
 - Palliative Care
 - Kids' HOPE Center
 - Pediatrics
 - Psychiatric Services
- Surgical Services
 - General Surgery
 - Orthopedic Center
 - Robotic Surgery
 - Bariatric Center
 - Urology Care
- Clinic Services
 - Emergency Services
 - Medical Imaging
 - Cardiovascular Center
 - Wound Care
 - Pharmacy
 - Rehabilitation
 - Sleep Center
 - Lab and Pathology
 - Bay Area Cancer Center
 - Dialysis
 - Telemedicine

Bay Area Hospital also improves the health of our community through classes and other events that teach about coping with health problems, staying well, and improving your health. We provide continuing professional and medical education to our healthcare providers, as well as varied in-services and workshops. There are also many classes and support groups in our community that can help you cope with challenging health issues, such as maternity and well-baby classes, cancer support groups, diabetes self-management, and stop tobacco use.

Coquille Valley Hospital

Coquille Valley Hospital is a 96,000 square foot campus with a 51,000-square-foot state-of-the-art facility built in 2012. Bond-funded and 100% union-built, our three-story community hospital operates 16 inpatient beds. As a critical access facility, offering a broad range of health services for the people of Coquille, Myrtle Point, Powers, Bridge and Fairview, our hospital benefits many who visit and live in the Coquille River Valley.

Our Mission

Our mission is to improve the lives of people in the communities we serve by providing excellent quality, high-value healthcare services, delivered with professional competence and compassion.

Committed to excellence, Coquille Valley Hospital strives to exceed the expectations of our patients and community. We value everyone who walks through our doors. Our actions demonstrate care, compassion and human kindness in everything we do.

Coquille Valley Hospital provides the following services to our community:

- Emergency Room
- Inpatient Services
 - General Acute Inpatient Services
 - Swing Bed Rehabilitation
 - Surgical Services
- Outpatient Services
 - Anticoagulation Management
 - Cardiopulmonary
 - Infusions, Transfusions & Injections
 - Laboratory
 - Medical Imaging
 - Nutrition Services
 - Wound Care
- Clinical Care Services
 - Acute Illness Diagnosis & Treatment
 - Chronic Disease Management
 - Diabetes Care
 - Geriatric Care
 - Immunizations
 - LGBTQ Care
 - Orthopedics
 - Pre- and Post-Operative Evaluations
 - Routine Check-Ups
 - Sports Physicals & Exams
 - Well-Baby Checks
 - Women's Care & Family Planning
 - Orthopedics

Always striving to improve, we listen and find ways to help, as well as seek information, knowledge and opinions to further the care we provide. As a local hospital, we build and maintain important relationships in our community and always aim to do our best for those we serve.

Our Community

Bay Area Hospital and Coquille Valley Hospital serve individuals throughout Coos County as well as portions of Douglas and Curry Counties. The largest cities in our service area are Coos Bay, North Bend, Bandon, Coquille, Myrtle Point, Lakeside, and Reedsport. This geographic area encompasses approximately 90% of Bay Area Hospital’s inpatient and outpatient volume and almost 100% of Coquille Valley Hospital’s inpatient and outpatient volume. Throughout this document, any reference to “community” is meant to indicate this service area.

In 2020, the U.S. Census Bureau conducted the nation’s most recent census and published that data by state, county, and city. Similarly, the Population Health Institute collects and reports health data and demographic data by county on an annual basis. Although Coos County does not exactly align with our community, the data does provide a reasonable approximation of our community. All data is from 2023.

The following demographic table provides indicators of several important factors in understanding the nature of our community. Due to the timing of our 2020 community health needs assessments, the data captured at that time was immediately prior to the COVID pandemic. As a result, all changes indicated by this table include the impact of COVID on our community and the state.

	Oregon		Coos County	
	2020	2023	2020	2023
Population (2020)	4,217,737	4,233,358	64,487	64,212
Caucasian	86.7%	85.9%	90.4%	89.9%
Hispanic	13.4%	14.4%	6.8%	7.5%
Asian	4.9%	5.1%	1.3%	1.4%
African American	2.2%	2.3%	0.6%	0.7%
American Indian & Alaska Native	1.8%	1.9%	3.0%	3.0%
Age < 18	20.5%	19.7%	18.3%	17.7%
Age 65+	18.2%	19.2%	26.5%	28.1%
Under Age 65 With a Disability	9.9%	10.6%	16.8%	16.1%
Life Expectancy	79.9 years	79.9 years	76.8 years	77.5 years
Rural	18.9%	19.0%	38.4%	38.4%
High School Graduation	90.7%	91.6%	88.8%	90.0%
Bachelor’s Degree or Higher	33.7%	35.5%	17.8%	20.6%
Median Household Income	\$62,818	\$76,632	\$45,051	\$57,563
Living in Poverty	11.4%	12.1%	15.6%	16.5%
Unemployment Rate	3.7%	5.2%	4.9%	6.3%
Uninsured Adults	8.6%	7.3%	9.5%	7.8%

- Our community is shrinking. Between 2020 and 2023, Oregon State experienced population growth of 0.37%, but our community’s population decreased by 0.43%.
- Our community has less ethnic diversity than Oregon as a whole, with the exception of Native Americans, although diversity increased between 2020 and 2023. Our Native American community members are primarily from the Confederated Tribes of Coos, Lower Umpqua and Siuslaw Indians.
- Our community has relatively few youths and a relatively large elderly population. Compared to Oregon State, our community has two fewer youths and nine more elderly individuals per 100 people. Additionally, between 2020 and 2023, the youth population rate decreased and the elderly population rate increased.
- Our community has a lower life expectancy than does Oregon State, although the shortfall decreased from 3.1 years in 2020 to 2.4 years in 2023.
- Ours is a rural community. Although the general perspective of Oregon is that it’s an outdoors-oriented area due to the mountains and coast, our community has a much larger percentage of rural area – farms and forest – than the state does. Most of the large cities in our community are along the coast, with smaller towns spread throughout the inland area.
- Post-secondary education is a less common achievement in our community, although the disparity decreased between 2020 and 2023. Even though our community’s high school graduation rate is approximately the same as Oregon’s, the percentage of adults in our community who have a bachelor’s degree or higher is much lower than throughout Oregon.
- Our community is economically depressed, although there were some positive changes between 2020 and 2023. Comparing our community to Oregon State, the unemployment rate increased by approximately 1.5% and the percentage of people living in poverty increased by approximately 6%. Also, our community’s median household income continues to fall far below the state average, but that is improving. Our community’s median household income in 2020 was 71.7% of the state’s median household income, but that improved to 75.1% in 2023. Finally, the percentage of uninsured adults improved similarly in both Oregon and our community.

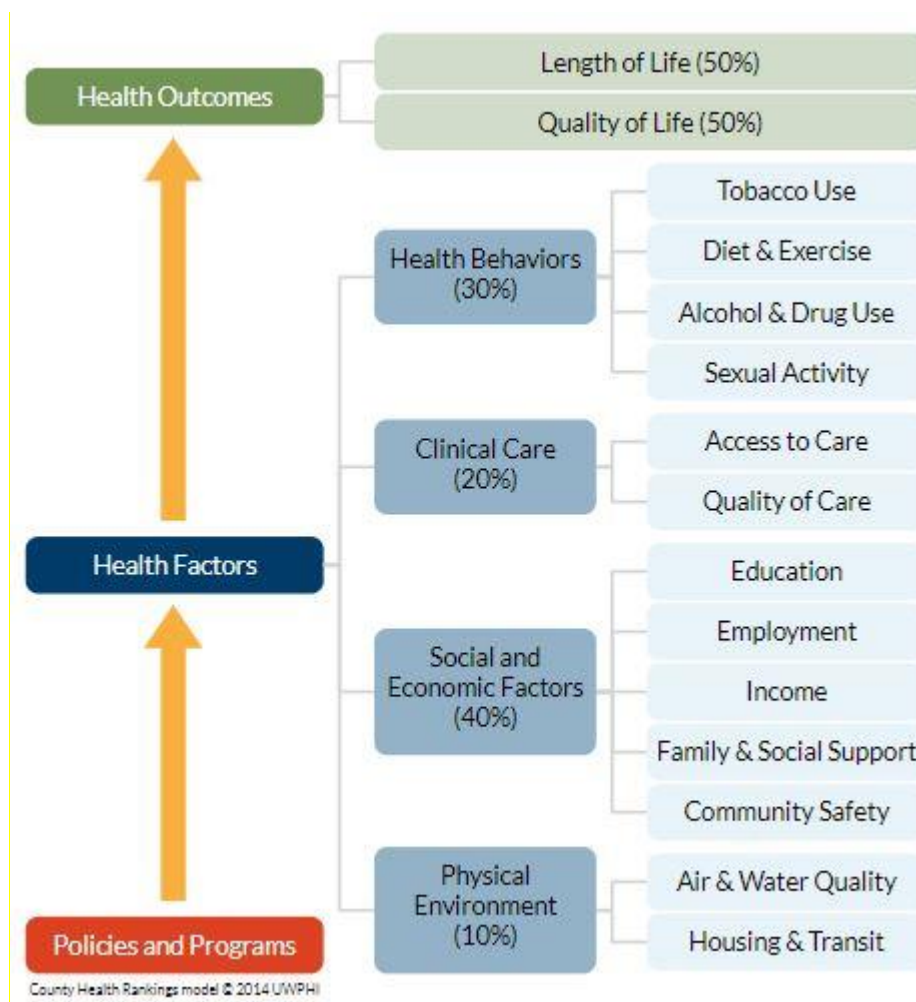
The Population Health Institute (“PHI”) publishes annual health data for every county in the United States. The data is aggregated into *health outcomes* and *health factors*. The PHI separates health outcomes into mortality (length of life) and morbidity (quality of life). Health factors are separated into four factors that largely influence the health outcomes: physical environment, society and economics, clinical care, and health behaviors.

Coos County Health Rankings (out of 36 Oregon Counties)		
	2020	2023
Mortality (length of life)	25	23
Morbidity (quality of life)	25	21
Overall Health Outcomes	24	20
Health Behaviors	31	29
Clinical Care	29	27
Social & Economic Factors	26	32

Physical Environment	20	18
Overall Health Factors	29	31

In 2020, Coos County’s overall health outcomes placed it at 24th out of 35 ranked counties and overall health factors placed it at 29th out of 35 ranked counties. These rankings indicate relatively poor health in our community. However, between 2020 and 2023, every health factor ranking improved by two spots, with the exception of “social & economic factors” which worsened significantly. This improvement in health factors led to a significant improvement in length of life and quality of life in our community. Between 2020 and 2023, overall health outcomes improved from 24th to 20th out of 35 ranked counties.

While this positive improvement is great to see, our community still falls in the bottom half of Oregon counties regarding all health factors and health outcomes so there is significant room for further improvement. Because health factors lead to health outcomes, Coos County’s rankings indicates that its residents are currently struggling from relatively poor health factors in the past and that this trend is likely to continue in the future.



Understanding our community requires an understanding of our area's declining timber industry in the 1970s and 1980s and the long-term economic struggles that followed. The following is taken from "Economic Outlook: Poor, South Coast's Economic Depression Lingers" published on October 19, 2013 by The World.

"No one can seem to put their finger on why the South Coast is stuck in an economic rut. The Coos region has been unable to attract new industry and continues to be stuck in an economic depression that has plagued the area since the timber industry plummeted in the 1970s and 1980s.

"U.S. Rep. Peter DeFazio, D-Ore., said the South Coast has sustained a number of 'body blows' since the 1970s that devastated its economy — particularly from failing lumber and wood products industries — and left hundreds without jobs. 'Since the mid- to late 90s Coos Bay has been trying very hard ... to diversify its economy and attract new business to the area,' DeFazio said. 'But the region has never fully recovered, taking small steps toward economic revival only to fall back when companies leave.' ...

"So if Coos Bay has all the assets necessary to attract industry, why hasn't it happened? 'One reality is that ... the (South Coast's) challenges are not dissimilar from the challenges faced in much of rural Oregon,' said Alex Campbell, executive director of The Partnership for Economic Development in Douglas County. 'If you look at the nature of manufacturing and how it's changed over the past couple of decades in Oregon, it's more heavily weighted towards the Portland metro area.' High-tech manufacturing also lends itself to an urban setting."

This economic decline has impacted almost every other facet of life in our community. The relative scarcity of college degrees means that blue collar jobs that provide steady employment, a livable wage, and appropriate benefits are especially important in our community and the local timber industry has historically been one of the primary providers of such jobs.

Along with the decline in timber-related jobs, homes have become increasingly difficult to afford in recent years, although this has several causes. First, as mentioned above, our community has a high percentage of farm and forest land. This is important because Oregon State's land use planning program seeks to limit the conversion of such land away from their farm and forest use. From the Oregon State Department of Land Conservation and Development's website:

"The statewide planning goals work to limit conversion of farm and forest land to other uses and to limit conflicts for these resource industries. To limit conversion, the program requires an urban growth boundary (or UGB) around each city in the state and urban uses must be contained within the boundary. To limit conflicts, counties are required to apply strict zoning to

farm and forest lands that permit only uses that will sustainably coexist with the farming and forestry activities around them.”

The second reason that housing is a major concern in our area is that the Oregon coast is a major vacation area, so homes in the area have become popular rental properties for companies like Airbnb and VRBO. Each home that is converted to a rental property is another home unavailable to individuals who live in the area. Related to this, the recent popularity of homes as rental properties has resulted in increased “bidding wars” for the purchase of those properties, which drives up prices across our community. As properties close to the coast become more expensive, everybody looks inland in hopes of finding lower cost homes, but that increased attention from numerous potential buyers also drives up the price of the inland homes. Third, during the COVID pandemic, new home construction costs – especially lumber and labor – have increased dramatically across the nation, with some costs doubling or tripling in less than two years.

In July 2023, Oregon Public Broadcasting (OPB) published a story discussing the state’s housing crisis:

“Across the state — from big and mid-size cities to small, rural towns — Oregonians are straining under the pressure of an increasingly unaffordable housing market....

“Renters are the hardest hit. More than half of renters in the state don’t have enough money after paying rent to afford other basics, including food, child care, internet access and transportation. Because the state’s housing inventory is so limited - Oregon simply doesn’t have enough units for the number of people who need them - there are limited rental vacancies, so landlords can raise rents with few repercussions. As a result, Oregon is among states with the lowest supply of rentals that are affordable to people at or below poverty levels. (A unit is considered affordable if it costs someone 30% or less of their income.)...

“As housing has become more unaffordable, more people have been pushed into homelessness. In a 2022 national homelessness report, Oregon had a 22% increase in people experiencing homelessness between 2020 and 2022 — the second highest increase in the country, behind California....

“Housing experts say homelessness is intertwined with the availability of affordable housing in a given area. And the crux of Oregon’s housing affordability issues, Lehner and other local researchers say, is decades of underproduction. Oregon just hasn’t been building enough homes for everyone. And while much of the country is experiencing a housing crunch, Oregon is among the worst cases: It ranks fourth in underproducing housing, behind California, Colorado and Utah.

“It’s tempting to oversimplify how Oregon’s housing market failed to keep up with demand. Some people blame the state’s stringent land-use laws for restricting the ability to expand where new construction could go. Others blame the private sector’s control of real estate, or developers who only want to build large single-family homes, or bureaucratic permitting processes.

“‘It’s a really complex issue, and there are all these different parts, and pointing the finger at one thing — that’s what makes us lose sight of the overall systematic issues,’ said Rebecca Lewis, an associate professor in planning public policy and management at the University of Oregon....

“They say the state’s history of restrictive housing laws and laissez faire approach to increasing and diversifying housing stock — as well as a national shortage of builders, rising materials costs and stagnant incomes — are among a web of factors impacting people’s ability to pay for housing.”

Our local community’s housing struggle was confirmed by the Oregon Housing Alliance, which found in 2021 that Coos County experienced the following:

- For every 100 families with extremely low incomes, there were only 33 affordable units available.
- One in four renters paid more than 50% of their income in rent. That jumps to five out of seven extremely low-income renters.
- In 2019-2020, one in every thirteen students experienced homelessness; that’s approximately 750 children in our community.
- The median home value increased by 10.7% between 2019 and 2020.

It is difficult to overstate the significance of our community’s housing shortage. The combined impact of these events is an economic depression that has lasted multiple generations. As adults struggle to provide the basic daily needs for their families, there is a natural increase in anxiety, depression, frustration, and anger. Participants in this community health needs assessment frequently referred to the area’s economic struggles and housing shortage as significant root causes of other health concerns.

Actions Taken Since Last Community Health Needs Assessment

Bay Area Hospital

Bay Area Hospital last completed a community health needs assessment in the year ended December 31, 2021. In that Community Health Needs Assessment, the prioritized significant community health needs were:

- Mental Health
- Substance Abuse
- Care for and Protection of Youth
- Access to Healthcare Services

Between then and now, Bay Area Hospital has taken the following actions to address those significant community health needs:

- **Mental Health**
 - Hosted and participated in a Behavioral Health Summit meeting with local providers and community partners.
 - Held monthly behavioral health meetings with service partners.
 - Hired 2-4 locums providers to help support mental health services.
 - Gathered input and sent letters of support for Oregon legislative bills, specifically:
 - HB 3126 to expand emergency behavioral health services for children and adolescents, and
 - HB 2743 to provide funding for the OMCC.
 - Partnered with Signet Health to provide management services for inpatient behavioral health. This action broadened our expertise, allowed access to resources, and created a nationwide peer network specializing in psychiatric care and acute rehabilitation programs.
- **Substance Abuse**
 - Hosted and participated in a Behavioral Health Summit meeting with local providers and community partners.
 - Submitted a letter of support to gain grant funds to increase coordination of community partners in caring for those in need.
- **Care for and Protection of Youth**
 - Conducted monthly “Darkness to Light” training classes for the community, which focused on teaching adults how to prevent, recognize and react responsibly to child sexual abuse.
- **Access to Health Care Services**
 - Contracted with a firm to draft architectural drawings for a second cardiac catheterization lab.
 - Targeted recruiting and hiring efforts to hire ICU intensivists.
 - Completed a pharmacy rebuild to optimize space, increase capacity and allow for faster, more efficient services to hospital patients.
 - Negotiated a new contract for virtual ICU services to expand capacity and support of care for higher acuity patients.

Coquille Valley Hospital

Coquille Valley Hospital last completed a community health needs assessment in the fiscal year ended June 30, 2021. In that Community Health Needs Assessment, the prioritized significant community health needs were:

- **Primary health needs:**
 - Mental Health
 - Substance Abuse
 - Care for and Protection of Youth and Vulnerable Adults
- **Secondary health needs**
 - Access to Health Care
 - Chronic Conditions

Between then and now, Coquille Valley Hospital has taken the following actions to address those significant community health needs:

- **Mental Health and Substance Abuse**
 - Transitioned the Senior Life Solutions project back to in-person sessions and increased the number of people served.
 - Successfully retained a provider by transferring their employment to another area employer.
 - Planned for additional services, including at the Myrtle Point clinic and the hospital's replacement clinic.
 - Brought the Community Health Worker program online at our clinics.
- **Access to Health Care**
 - Developed a \$24 million replacement clinic on the hospital's campus, which will begin in September 2024. The clinic will provide space for twelve providers and medical students, a new Emergency Room entry/waiting space, pharmacy, infusion, surgery, sterile instrument processing, wound care, behavioral health, senior life solutions, physical therapy, and space for future growth.
 - Held a community health fair with thirty community health vendors and four health topic presentations.
 - Increased access to health care services by recruiting two internal medicine physicians, four family nurse practitioners, two family physicians and one gynecologist.
 - Developed a "Women's Health" service line.
 - Developed the Myrtle Point medical clinic, which includes three family medicine providers and one behavioral health provider.
 - Worked with state and federal agencies to carve out an Eastern Coos County designation with an HPSA ("health professions shortage area") score of 13, which enhanced our ability to recruit providers.
 - Improved clinic operating systems and schedules to increase access.
 - Began using artificial intelligence and voice recognition in exam rooms.
- **Chronic Conditions**
 - Joined a Medicare ACO ("accountable care organization").
 - Developed a Medicare Annual Wellness Exam program, which currently provides approximately 1,000 exams per year.
 - Developed a Chronic Care Management program, which currently serves 130 patients and provides 100% follow-up with non-participating Emergency Room patients.
 - Integrated nutrition counseling into our clinics.

Community Health Needs Assessment Methodology

A joint team consisting of Bay Area Hospital's executives and Coquille Valley Hospital's executives led the planning, conducting, and reporting of the community health needs assessment. We contracted with CliftonLarsonAllen LLP, a professional services firm, to

conduct community interviews and community forums and to assist in preparing this Joint Community Health Needs Assessment Report and the related Joint Implementation Strategy.

Interviews

We gathered qualitative information and perspectives on community health needs through one-on-one and small group interviews with key community stakeholders. These interviews were conducted in April 2024. The primary goal of these interviews was to obtain a range of perspectives on the community's health needs. We gathered information from the following specified groups within our community:

- People with special knowledge or expertise in public health
- Government health departments and other government agencies
- Leaders, representatives, or members of low-income populations
- Leaders, representatives, or members of minority populations
- Leaders, representatives, or members of other medically underserved populations, such as young, elderly, and rural individuals

Individuals from the following agencies, organizations and businesses participated in the community health needs assessment process by contributing their perspectives, opinions, and observations. We thank them for their past and continued assistance.

- ADAPT Integrated Health Care
- Advanced Health
- Bay Area Hospital
- Bay Clinic
- City of Coos Bay
- Coquille School District
- Coquille Valley Hospital
- Coos County Sheriff's Department
- Coos Health & Wellness
- Ko-Kwel Wellness Center
- Oregon Department of Human Services, District 7 (Coos & Curry Counties)
- Three Rivers Health Center, operated by the Confederated Tribes of Coos, Lower Umpqua, Siuslaw
- Waterfall Clinic

We believe the individuals who participated in interviews are qualified representatives of the low-income, minority and other medically underserved populations within our community because the nature of their work brings them into contact with those groups on a regular basis. For many of the individuals listed, the nature of their occupation *requires* them to consider the special needs of the groups identified.

Community Forums

We gathered further qualitative information and perspectives on community health needs through two community forums held on April 30, 2024, at the Mill Casino in Coos Bay. One of the community forums was specifically for medical providers in the community. The other community forum was open to any community members who wished to attend and participate. Between the two community forums, approximately 50 people provided their input.

Quantitative Data

We supplemented the qualitative input provided through interviews and community forums with quantitative data that provided further insights, clarification, etc. The community health needs assessment included consideration and analysis of the following publicly available quantitative data.

- Bay Area Hospital
 - www.bayareahospital.org
- Coquille Valley Hospital
 - <https://www.cvhospital.org>
- “Economic Outlook: Poor. South Coast’s Economic Depression Lingers”, The World
 - www.theworldlink.com/news/local/south-coasts-economic-depression-lingers/article_7170f762-3748-11e3-8d7f-001a4bcf887a.html
- “Finding Home: A True Story of Life Outside”, AllCare Health
 - <https://www.allcarehealth.com/media/r4pff3/findinghome-allcarehealth.pdf>
- Oregon Department of Land Conservation and Development
 - www.oregon.gov/lcd/FF/pages/index.aspx
- “Oregon has an extreme housing shortage. Here’s what could be done.”, Oregon Public Broadcasting
 - <https://www.opb.org/article/2023/07/26/oregon-cost-of-living-housing-construction-building-land-use-high-rent/?outputType=amp>
- Population Health Institute, County Health Rankins
 - <https://www.countyhealthrankings.org/health-data/oregon/data-and-resources>
- U.S. Census Bureau, Quick Facts
 - <https://www.census.gov/quickfacts/fact/table/OR,cooscountyoregon/SBO030217>

Information Gaps

Although we are unable to identify any specific information gaps, we recognize members of the community representing different organizations, groups, etc., have differing opinions concerning community health needs and priorities and may have provided different input.

Analytical Methods Applied

We applied various analytical methods to the available data. During interviews and community forums, we asked participants for their input regarding health needs, whether

any demographic groups in the community are disproportionately impacted by any of those health needs and recommendations about how to prioritize those health needs. We analyzed the historic prevalence of various health issues in our community and compared those with county, state, and national averages. Finally, we reviewed previously identified health priorities as identified by national, state and county health organizations.

Request for Feedback

If any reader would like to provide input on this joint community health needs assessment, they can submit their comment(s), in writing, to any of the locations:

Bay Area Hospital Administration
1775 Thompson Road
Coos Bay, OR 97420
communication@bayareahospital.org

CVH Administration
940 E 5th Street
Coquille, OR 97423
info@cvhospital.org

Determination of Significance

While many needs were identified during the community health needs assessment process, this report focuses on those needs that were deemed *significant* by Bay Area Hospital and/or Coquille Valley Hospital. A health need’s significance was evaluated based on many factors. The factor given the most weight was the relative importance placed on the health need by the community participants. Other factors included the number of people in our community impacted by the health need, the impact of that health need on quality of life and length of life, and the impact on low-income, minority, and other medically underserved populations. The decision was made by the executive leadership teams from Bay Area Hospital and Coquille Valley Hospital, who were involved throughout the community health needs assessment process.

Process and Criteria for Prioritizing Identified Health Needs

The significant health needs were prioritized based on the same factors and by the same groups as determined which needs are significant.

Prioritized Community Health Needs

Based on interviews and focus groups, as well as reviews of hospital, county, state, and national health data, each hospital identified the following significant community health needs:

Bay Area Hospital:

Primary health needs:

- Mental Health
- Obesity
- Care for & Protection of Youth
- Access to health care

Secondary health needs:

- Chronic health conditions

Coquille Valley Hospital:

Primary health needs:

- Access to health care
- Mental health
- Obesity & chronic conditions

Secondary health needs:

- Substance abuse
- Housing

Access to health care within our community includes:

- Local availability of family practice providers
- Local availability of specialty services and/or distance required to obtain such specialty services, especially related to mental health, substance abuse, adolescent services and geriatric services
- Community access to and use of emergency services
- Locations of hospitals and clinics for more rural communities
- The cost of health care services, prescriptions and medical supplies
- The availability of transportation to/from clinics and hospitals
- The availability, cost and effectiveness of telemedical services

The community's mental health needs relate to anxiety and depression, as well as acute illnesses such as bipolar disorder, schizophrenia, post-traumatic stress disorder ("PTSD"), etc. The community's health needs also relate to accessing each part of the broad spectrum of health care services needed to treat each kind of mental health need.

Obesity and chronic conditions within our community include:

- Healthy eating
 - Availability and affordability of healthy foods
 - Willingness and ability to prepare and eat healthy meals
- Healthy living
 - Availability and affordability of healthy activities
 - Time to participate in healthy activity
- Heart disease and related cardiovascular issues
- Diabetes
- Cancer
- Lung diseases
- Brain function
- Kidney disease/failure
- Arthritis and joint issues

Substances being abused in our community include alcohol, methamphetamines ("meth"), fentanyl, marijuana, opiates (prescription pain killers and heroin), cigarettes and vaping. The community's health needs also relate to accessing each part of the broad spectrum of health care services needed to treat addictions and recovery.

Housing is considered a significant health need in our community because of the significant lack of available housing, regardless of affordability. While the housing shortage hits low-income individuals the hardest, wealthy individuals also struggle to find housing in our community. The housing shortage has turned into homelessness for many people in our community, which naturally leads to more serious health needs of all kinds for those individuals. The housing shortage also makes it difficult to recruit medical providers to the community to address access issues.

Conclusion

Bay Area Hospital and Coquille Valley Hospital conducted this community health needs assessment to better understand our community and the individuals we serve. Each hospital will develop specific responses to its identified significant community health needs and will create an Implementation Strategy document to formalize those responses. Coquille Valley Hospital's Implementation Strategy will be approved by its board of directors no later than November 15, 2024. Bay Area Hospital's Implementation Strategy will be approved by its board of directors no later than May 15, 2025. Each organization will use its Implementation Strategy as a guide for thoughtful, impactful decisions and actions in the coming years.

Existing Community Health Resources

The following resources are currently available in our community to address the significant community health needs discussed in this report. Despite our efforts, we recognize that this list may not be all-inclusive and welcome any information to add available resources and increase its usefulness. Such information can be sent to the addresses provided on page 14 of this report.

Coos Health & Wellness provides support to our community members in numerous ways, including substance abuse, counseling, education, employment, food, handicapped and learning disability services, housing, LGBTQ rights, maternal/child/youth care, transportation, veterans, gambling, and senior services. For a complete list of their activities, we recommend visiting their office or website:

- 281 LaClair Street, Coos Bay
- <https://cooshealthandwellness.org>
- 24-hour crisis hotline – (888) 543-5763 or (541) 266-6800

In addition to governmental support, the following health care facilities and related organizations are currently available within our community:

General Health Care

- Aceso Medical Clinic
 - 375 Park Avenue, Suite 5, Coos Bay
 - (541) 808-3066
- Advanced Health
 - 289 LaClair Street, Coos Bay
 - (541) 269-7400
- Bay Area Hospital
 - 1775 Thompson Road, Coos Bay
 - (541) 269-8111
- Bay Clinic
 - 1750 Thompson Road, Coos Bay
 - (541) 269-0333
- BestMed Urgent Care
 - 1226 Virginia Avenue, North Bend
 - (541) 305-4224
- Coast Community Health Center
 - 1010 First Street SE, #110, Bandon
 - (541) 347-2529
- Coquille Valley Hospital
 - 940 East 5th Street, Coquille
 - (541) 396-3101
- Coquille Valley Hospital Clinic
 - 790 East 5th Street, Coquille
 - (541) 396-3111

- Coquille Valley Hospital Orthopedics Clinic
 - 940 East 5th Street, Coquille
 - (541) 396-3111
- Ko-Kwel Wellness Center
 - 600 Miluk Drive, Coos Bay
 - (541) 888-9494
- Lions Club
 - 3491 Broadway Avenue, North Bend
- North Bend Medical Center
 - 1900 Woodland Drive, North Bend
 - (541) 267-5151
- NBMC – Bandon
 - 110 10th Street SE, Bandon
 - (541) 347-5191
- NBMC – Coquille
 - 790 East 5th Street, Coquille
 - (541) 396-7295
- NBMC – Myrtle Point
 - 324 4th Street, Myrtle Point
 - (541) 572-2111
- Pacific Pregnancy Clinic
 - 1250 Thompson Road, Coos Bay
 - (541) 267-5204
- Pregnancy Resource Center
 - 490 Commercial Avenue, Coos Bay
 - (541) 267-5204
- Southern Coos Hospital
 - 900 11th Street SE, Bandon
 - (541) 347-2426
- North Bend V.A. Clinic
 - 2191 Marion Street, North Bend
 - (541) 756-8002
- Three Rivers Health Center
 - 150 South Wall Street, Coos Bay
 - (541) 435-7200
- U.S. Coast Guard Medical Clinic
 - 2000 Connecticut Avenue, North Bend
 - (514) 756-9234
- Waterfall Clinic – Coos Bay (school-based clinic)
 - 826 S 11th Street, Coos Bay
 - (541) 756-6232
- Waterfall Clinic – North Bend
 - 1890 Waite Street, Suite 1, North Bend
 - (541) 756-6232

- Waterfall Behavioral Health Center
 - 1300 North Bayshore Drive, Suite 202, Coos Bay
 - (541) 435-7000
- Women/Infant/Children (“WIC”)
 - 281 LaClair Street, Coos Bay
 - (541) 266-6705

Substance Abuse and Mental Health

Some of the health care providers identified in the “General Health Care” section also provide substance abuse and/or mental health care services, including Coos Health & Wellness, Bay Area Hospital, Coquille Valley Hospital, Three Rivers Health Center and Waterfall Clinic.

- A Better Reality
 - 2690 North 17th Street, Coos Bay
 - (541) 217-8762
- ADAPT Integrated Health Care
 - 400 Virginia Avenue, Suite 201, North Bend
 - (541) 751-0357
- Alcoholics Anonymous
 - 7651 Timber Park Lane, Coos Bay
 - (541) 266-4269
- Bay Area First Step
 - 155 S Empire Boulevard, Coos Bay
 - (541) 756-3111
- Christian Counseling Services of Coos County
 - 3803 Vista Court, North Bend
 - (541) 756-7453
- Coastal Center
 - 1834 McPherson Avenue, North Bend
 - (541) 267-2113
- Coos County Correctional Treatment Center
 - 155 North Adams Street, Suite B, Coquille
 - (541) 396-7700
- Coos Crisis Resolution Center
 - 1885 Thompson Road, Coos Bay
 - (541) 266-8480
- Gentle Breeze Counseling
 - 222 East 2nd Street, Coquille
 - (541) 824-0990
- Hope Mental Wellness
 - 632W Anderson Avenue, Coos Bay
 - (541) 236-2086
- Kids’ HOPE Center
 - 1925 Thompson Road, Coos Bay
 - (541) 266-8806

- Monarch Mental Health
 - 320 Central Avenue, Suite 212, Coos Bay
 - (401) 217-9333
- Nancy Devereaux Center
 - 1200 Newmark Avenue, Coos Bay
 - (541) 888-3202
- Oregon Coast Mind and Body
 - 137 Hall Avenue, Coos Bay
 - (541) 236-2088
- Out of the Rain Counseling Solutions
 - 455 South 4th Street, Suite 5, Coos Bay
 - (541) 229-7879
- Rand Hunt, MS, LPC-Intern
 - 14 West First Street, Coquille
 - (541) 279-2790
- Root Insights Counseling
 - 375 Park Avenue, Coos Bay
 - (541) 841-1404
- Substance Abuse and Mental Health Services Administration
 - www.samhsa.gov
 - (541) 396-7575, ext. 7576
- Mental Health Association of Southwestern Oregon
 - 377 LaClair Street, Coos Bay
 - (541) 756-2057
- Women’s Safety & Resource Center
 - 1681 Newmark Avenue, Coos Bay
 - (541) 888-1048

Care for and Protection of Youth

Some of the health care providers identified in the “General Health Care” and “Substance Abuse and Mental Health” sections also provide adolescent health care and protection services, including Coos Health & Wellness, Bay Area Hospital, the Kids’ HOPE Center, Pregnancy Resource Center and WIC.

- 4-H Club
 - 631 Alder Street, Myrtle Point
 - (541) 572-5263
- Al-a-teen
 - <https://www.oregonal-anon.org>
 - (541) 266-7203
- Alternative Youth Activities
 - 575 S Main Street, Coos Bay
 - (541) 888-2432
- Bandon Community Youth Center
 - 101 11th Street, Bandon
 - (541) 347-8336

- Boys & Girls Club (SWOYA)
 - 3333 Walnut Avenue, Coos Bay
 - (541) 267-3635
- Coos County Child Support
 - 240 North Collier Street, Coquille
 - (541) 396-7570
- The Coos Drop (Youth M.O.V.E. Oregon)
 - 1960 Sherman Avenue, North Bend
 - (541) 521-0043
- Domestic Violence Victim Services
 - www.oregon.gov/DHS/abuse/domestic/pages/index.aspx
- Kairos Coastline Services
 - 1913 Meade Avenue, North Bend
 - (541) 756-4508
- Maslow Project (outreach for homeless youth)
 - 740 South 2nd Street, Coos Bay
 - (541) 297-4448
- Newmark Family Center / Care Connections
 - 1988 Newmark Avenue, Coos Bay
 - (541) 888-7957
- Oregon Coast Community Action
 - 1855 Thomas Avenue, Coos Bay
 - (541) 435-7080
- Oregon Youth Authority
 - 400 Virginia Street, Suite 114, North Bend
 - (541) 756-4290
- SafeOregon
 - www.safeoregon.com
 - (844) 472-3367
- Social and Protective Services, Juvenile Department
 - 250 North Baxter Street, Coquille
 - (541) 396-7880

Transportation

- Bay Cities Brokerage
 - 3505 Ocean Boulevard SE, Coos Bay
 - (877) 324-8109
- Coastal Express
 - www.currypublictransit.org
 - (541) 412-8806
- DAV Van Service - transportation for V.A. medical appointments)
 - (541) 440-1293, ext. 44358
- Dial-a-Ride & Coos County Area Transit
 - www.coostransit.org
 - (541) 267-7111

- TransLink – rides/reimbursement for medical appointments for open card clients
 - 239 East Barnett Road, Medford
 - (888) 518-8160
- Yellow Cab Taxi
 - 2756 Woodland Drive, Coos Bay
 - (541) 267-3111

Many additional services are available in our community. We recommend using the “community resources” link on Coos Health and Wellness’s website for further information about those resources – <https://cooshealthandwellness.org/community-resources>.