This past year Down East Community Hospital focused on its mission of “improving the health of the people in the Sunrise County.” Efforts centered on balancing exceptional care, financial integrity, current technology, staff satisfaction and collaborative community involvement. Our overarching and ongoing goal has been to become both the employer and provider of choice for our region.

As the hospital’s interim CEO, it has been my privilege to provide leadership and vision while positioning the hospital for a successful future. Many have contributed to the accomplishments of the past twelve months. A committed Board, skilled leadership team, supportive medical staff and dedicated employees have enabled the hospital to accomplish much in the face of a rapidly changing healthcare environment.

Together we have:

• Implemented an ambitious strategic operations plan; DECH’s roadmap to the future
• Introduced specialty telemedicine services in cardiology, pulmonology, endocrinology, sleep medicine and neurology. This accomplishment allows for area patients to access care, close to home
• Integrated Dr. Massaad’s surgical practice into the hospital family
• Planned for an important $4.5 million expansion and renovation of our rural area’s critical Emergency Department
• Began important financial and capital campaign feasibility studies in support of the ED project
• Joined the Sunrise Coalition, a collaborative effort among the regions Federally Qualified Health Centers and Calais Regional Hospital
• Commenced exploring an arrangement with the Veterans Administration that allows for veterans to access care in their community
• Participated in Eastern Maine Healthcare’s innovative “Beacon Project” aimed directly at improving population health
• Crafted an operating budget that has brought much needed stability to the hospital’s financial performance
• Actively recruited for a new Chief Executive Officer to lead the hospital into the future

It has been an energetic, rewarding year that I have been proud to be a part of. I will leave this remarkable area with many fond thoughts and warm memories.

Ralph Gabarro, CEO
• Implemented a swing bed program that served 66 patients during 2014.

• Upgraded equipment in patient care areas such as a new GE LE9XDC Ultrasound Machine in Imaging, Pentax Endoscopy Unit in Surgical Services, and T-Systems Electronic Medical Record System in the Emergency Department.

• Received Harvard Pilgrim Health Care’s Hospital Honor Roll that recognizes those adult, acute care hospitals whose performance was among the top 25% of those measured nationally on a set of composite quality and patient experience measures, as reported by Centers for Medicare and Medicaid Services (CMS) on Hospital Compare and Leapfrog patient safety measures.

• Achieved top score in Medication Spotlight survey as reported by the Maine Health Management Coalition.

• Achieved top tier ranking in Anthem’s Quality-In-Sights Hospital Incentive Program (Q-HIP) which evaluates hospitals in their network based on patient safety, health outcomes and patient satisfaction.

• Focused on infection prevention measures and achieved success with hospital acquired infections by having no hospital acquired clostridium difficile (c-diff) cases, no inpatient catheter associated urinary tract infections (CAUTI’s), and no inpatient central line bloodstream infections (CLABSI’s).
# Financial Statements

## Consolidated Statements

### Consolidated Statements of Operations Years Ended December 31, 2014 and 2013

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unrestricted revenues, gains, and other support</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net patient service revenue</td>
<td>$35,064,319</td>
<td>$33,946,538</td>
</tr>
<tr>
<td>Investment income</td>
<td>186,846</td>
<td>600,828</td>
</tr>
<tr>
<td>Other revenue</td>
<td>806,714</td>
<td>850,167</td>
</tr>
<tr>
<td>Electronic health record incentives</td>
<td>82,329</td>
<td>561,505</td>
</tr>
<tr>
<td>Net assets released from restriction</td>
<td>1,857</td>
<td>10,585</td>
</tr>
<tr>
<td><strong>Total revenues, gains and other support</strong></td>
<td>36,142,065</td>
<td>35,969,523</td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries</td>
<td>18,456,562</td>
<td>17,414,659</td>
</tr>
<tr>
<td>Employee benefits</td>
<td>3,972,929</td>
<td>3,842,083</td>
</tr>
<tr>
<td>Purchased services</td>
<td>2,092,291</td>
<td>2,286,610</td>
</tr>
<tr>
<td>Temporary personnel</td>
<td>1,035,175</td>
<td>1,079,613</td>
</tr>
<tr>
<td>Professional fees</td>
<td>2,127,634</td>
<td>2,720,829</td>
</tr>
<tr>
<td>Supplies</td>
<td>3,553,741</td>
<td>3,315,965</td>
</tr>
<tr>
<td>Other</td>
<td>4,692,500</td>
<td>4,544,959</td>
</tr>
<tr>
<td>Depreciation and amortization</td>
<td>1,632,834</td>
<td>1,574,026</td>
</tr>
<tr>
<td>Interest</td>
<td>157,626</td>
<td>182,258</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td>37,721,292</td>
<td>36,961,002</td>
</tr>
</tbody>
</table>

### (Deficiency) excess of revenues, gains, and other support over expenses

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Deficiency) excess of revenues, gains, and other support over expenses</td>
<td>(1,579,227)</td>
<td>(991,479)</td>
</tr>
</tbody>
</table>

| Change in net unrealized gains and losses on investments | 133,508       | (80,674)       |
| Unfunded pension liability adjustment          | (1,938,414)   | 1,573,225      |

| (Decrease) increase in unrestricted net assets | (3,384,133)   | $501,072      |
Our Mission Statement
At Down East Community our mission is to improve the health of the people in the Sunrise County by being as passionate, determined and resilient as those we serve and by balancing exceptional service, financial integrity, current technology, staff satisfaction and collaborative community involvement.

An integral part of the mission of Down East Community is to improve the health of the people in Sunrise County and our Community Benefit is a part of what we do to fulfill this mission.

Community Health Needs Assessment
Down East Community Hospital continues to take steps to improve the health of its communities. During 2014, DECH participated in a Community Health Needs Assessment led by Eastern Maine Health System that evaluated and documented the high risk health factors in Washington County. DECH focused its community health efforts based on the assessment by collaborating with area FQHC’s and State Agencies, by holding health fairs, flu shot clinics, and awareness events, and by developing and implementing new follow-up practices with primary care providers and care coordinators. High risk areas in Washington County are:

Prevention and Obesity
- Access to Care
- Immunizations
- Overweight/Obesity
- Developmental Delay/Disability
- Alcohol and Substance Abuse
- Interpersonal Violence

Chronic Conditions
- Heart Disease
- Cancer
- Diabetes
- Mental Health

Access to Care/Quality of Effectiveness
- High Hospital Admissions
- High ED Visits

Total: $1,104,617

Medical Services:
- NYU Dental Clinic
- Free Mammograms
- Free Medical Care
- Health Fairs and Flu Shot Clinics
- Community Health Needs
- Blueberry Festival First Aid Tent

Subsidized Programs:
- Sunrise Care Facility
- Women’s Health Resource Library
- Down East Hospice
- American Cancer Society
- Alzheimer’s Association
- Down East Aids Network
- Down East Youth Soccer League
- Lady Raiders Basketball Camp
- Machias Area Little League
- Outdoor Movie Project

Medical Education:
- Healthcare Professional Education

Medical Services $985,956
Subsidized Programs $12,063
Medical Education $106,598
Medical Staff

President
Rodney Sparks, MD

Vice President
Stephen Madigan, MD

Secretary/Treasurer
Thomas Ryan, DO

List Of Service Chiefs (as of December 31, 2014)

Rodney Sparks, MD ED Services
Jane Sande, MD Pediatric Services
Christian Inegbenijie, MD Obstetric Services
Thomas Crowe, MD Surgical Services
Thomas Ryan, DO Medicine Services
Stephen Madigan, MD Radiology Services

New Staff Members in 2014

Diane Zavotsky, MD
Howard Grayon, MD

In 2014 the following practitioners joined the DECH Staff:

Active, Courtesy & Professional Service Medical Staff

Anesthesiology
Leonid Brodsky, MD
Rita Ten, MD

Emergency Medicine
Robert Anderson, MD
Peter Clark, DO
Colin Coor, MD
Kerry Crowley, MD
Carl Germain, MD
Thomas Hewson, MD
James Hines, PA-C
John Joseph, MD
David Kearing, MD
Owen MacCausland, MD
Joseph Nabozny, MD
John Southall, MD
Rodney Sparks, MD
Daniel Stanhiser, MD

Otolaryngology (ENT)
Thomas Holzen, MD

Pain Management
Rita Ten, MD

Pathology
Marek Skacel, MD

Pediatrics
Jane Sande, MD
Alfred Wakeman, PA-C

Podiatry
Nima Moghaddas, DPM

Radiology
Stephen Madigan, MD
Jason Rexroad, MD

Surgery, Colorectal
Aziz Massaad, MD

Surgery, General
Aziz Massaad, MD

Urology
Dhanvant Rathod, MD

Women’s Health
Christine Kuhni, WHNP

New England Telemedicine Consultants

Pulmonology
Trustin Enacheril, MD

Cardiology
Alexander Morss, MD

Endocrinology
Himani Chandra, MD

Pulmonology
Dilip Nataraj, MD

Neurology
Marcus Yountz, MD
Once again this past year we had a resident celebrate her 100th birthday and our “youngest” resident is celebrating her 102nd birthday in May of this year. Birthday celebrations are always fun but when the centennial celebrations come along they are very special to everyone.

We are proud to announce that our Activity Director, Lisa Cirone, received her “Certified Dementia Practitioner” certification this past year. Activities are such an important part of Sunrise, not only for the residents but also staff. It is very challenging to plan activities for residents with dementia and to also educate staff on how they can do activities with a resident who has dementia. Because of her certification, the facility has access to a library of in-services that we can use to better educate everyone on this terrible illness.

Last August Lisa started the "Dreams Do Come True" program in activities. She started asking residents if they had a dream of doing something that they enjoyed doing but never thought they would do again. One resident wanted to go fishing on the lake where they had a camp. Lisa and another CNA made her dream come true. She got to go fishing and had a great picnic. This coming summer we have a resident who wants to go to a concert so plans are in motion for that to happen.

This past year we purchased a commercial freezer, refrigerator and a double stack dryer. We also purchased some new wardrobes and bedside stands for three resident rooms.

In closing, a special thank you to all our staff from all departments that go "Above and Beyond" every day to make our residents feel special and loved.

Geri Bryant
Administrator - Sunrise Care Facility
11 Ocean Street · Jonesport, ME 04649 · 207-497-2363 · gbryant@dech.org
My problems began in 2012. It started with some gastrointestinal issues. Because I have a family history of Crohn's Disease (my son and my cousin), my primary care provider referred me outside the area for a colonoscopy. So away I went South for my first ever colonoscopy. The prep was not completely successful, but the doctor told me that “what he saw” was fine and that we should try again in a year. A year later, same story. From what the doctor could see everything was fine, and he recommended another one in 10 years, when I was 50. Meanwhile, I was still having gastrointestinal symptoms, but thought, “OK, I’m all right.”

I went to the emergency room at DECH with pelvic pain in the summer of 2014. The doctor believed I had a Bartholin cyst and recommended I see my gynecologist. So that following Monday I made the trip South to see my doctor. She found that I didn’t have a cyst, but I had an anal abscess. They referred me to the doctor who had done my colonoscopies and he confirmed the diagnosis. I had the procedure to have it removed. It wasn't a pleasant experience but it was taken care of. My gynecologist and I really pushed the doctor to look into it further and see if there was an underlying cause of the abscess. I was told that he could do another colonoscopy, but if it were found that I had Crohn’s Disease he would refer me to a gastroenterologist so it made good sense to start there instead of end up there. He referred me to Bangor, but the waiting list was long and I waited months without hearing anything so I asked to be referred to another facility.

I did get scheduled for a colonoscopy and because of my prep history, he prescribed a 2 day prep to see if we could get better results. So, I fasted for two days, followed the directions to a tee, and still did not get good results. I fasted for a third day doing different procedures trying for better results, but ended up fasting a 4th day and having yet another prep. You could have knocked me over with a feather from four days of starvation and still, not good results. You could have knocked me over with a feather from four days of starvation and still, not good results. Later, I got another phone call to setup yet another colonoscopy. I just cried....because to what end? They felt that since I had been on Miralax every day that we could have better results. So I said, “I’ll do it, what do I have to lose at this point?” Another two day prep with poor results. This time, the doctor was able to get to the end of my terminal ileum and thought that he could see a small ulcer at the end but that it wasn't consistent with Crohn's Disease. Now I understand that being unable to get a clean prep is a “red flag” but hindsight is 20/20.

How I ended up at DECH.

In the meantime, between the first series of colonoscopies in Bangor and the last one, I developed a terrible pain in my side. I really thought it was my ovary so I went to see my gynecologist and she thought from the ultrasound that I had an ovarian cyst. She said that they usually go away after a couple of cycles...so I should just wait it out. I kept feeling worse and worse and I couldn't sleep at night...it was just awful. Finally, I called her and said that I wanted to have the cyst removed. She explained that it would be an “open” surgery, they don’t do laparoscopy. She said I would have a 3” incision, would be in the hospital for a couple days, and would be out of work for a couple weeks. Well that didn't seem like much fun so I had to think about it. It just so happens that I am friends with Stephanie Wood, who is a nurse at DECH, and we were sitting next to each other at a ball game and I was telling her my story. She told me about Dr. Dwight and the laparoscopic surgeries she performs with a tiny incision. You can go home that day and go to work in a few days. Low and behold, Dr. Dwight was able to see me the following Monday. Dr. Dwight had all my records and because of a cancellation was able to perform my surgery the following morning. It was just like the stars had aligned.
My husband and I went to the hospital the next morning. Dr. Dwight began the surgery, but needed to call in Dr. Massaad because it wasn’t an ovarian cyst at all, it was a softball-sized abscess, caused by Crohn’s Disease, that had adhered to my ovary! In addition to the abscess, there were many other adhesions that Dr. Massaad had to take care of. So they did what had to be done and I was admitted to the hospital.

After a surgery like this, there are certain gastrointestinal functions that need to take place before you can go home…that didn’t happen for me and I was having pain. Dr. Massaad came in and explained to me what was happening. A fistula had formed, allowing intestinal fluid to leak into my abdomen and it needed to be surgically repaired. A nurse by the name of Rob Janssen was getting me set up for an IV when Dr. Massaad told me that I might need to have an ileostomy. For those of you who don’t know, an ileostomy is an abdominal opening from the intestines which allows stool/feces to drain into a pouch. I was just a mess and told my husband, Jamie, that I didn’t think I could do that and he said, “Shelley, you don’t have a choice.” I needed Dr. Massaad to promise that it would be temporary. He said that if everything went the way he expected, it would be temporary.

Off I went into surgery and low and behold the next thing I knew, I woke up with an ileostomy. Dr. Massaad said that the lower part of my bowel was…...rotten…that was the word he used. Hearing him say that I had to wonder how that wasn’t spotted during my 5 different colonoscopies.

While Dr. Massaad was on vacation during the holidays, a trip to the Emergency Department showed that I had developed an abscess, a side effect from the type of surgery I had. I was able to reach Dr. Massaad from the emergency department and he, with the assistance of Dr. Inegbenijie, set the process in motion for me to go to EMMC to have the abscess drained. I told the doctors that when this process was finished I was going back home to be under the care of Dr. Massaad and Dr. Massaad only.

I’ve lived here my entire life and I always had this notion that to get real good quality care you go to Bangor or Ellsworth and I did. I had my children in Ellsworth and have been going to Ellsworth for my gynecologic needs my whole life. Now, I’m switching my care to Dr. Dwight. I don’t think that everybody knows the caliber of doctors we have here. My kids play baseball and basketball with Dr. Massaad’s kids and still I had no idea what a skilled surgeon he is. Another thing that I didn’t know is that DECH has private patient rooms. That is a great thing from a patient’s perspective. In the other hospitals you not only have the disruptions while getting your care, you also are disrupted with your roommates care. The nurses at DECH went way above my expectations. They even brought a bed in for my husband; I was very sick and so appreciated that he could be there. I received great care while at the hospital from people like Heidi Schwinn, a nurse in the OR and Stacey Dorr, a nurse on the inpatient floor and so many people in between. I want to name them all, but am afraid I would miss somebody. It’s that small town feeling that you don’t get in the larger facilities. I would so much rather spend the night at DECH than in Bangor….a thousand times more… and that is something you don’t know until you’ve experienced it.

Having this great care practically in my back yard meant so much to me. We live 2 minutes away from DECH. I didn’t worry about my two teenagers at home when my husband was in the hospital with me because I knew they were right down the street. I wouldn’t have felt that way if I was in Bangor. It’s so much easier for people to come visit you.

We need local people to support this gem of a hospital in order for it to stay here. With someone the caliber of Aziz Massaad in Machias, doctors should be referring their patients to Aziz Massaad. I just wish that 3 years ago I would have known that because I truly believe that I wouldn’t have gone through what I went through.

I am now doing perfectly well. I had the ileostomy for 15 weeks and then Dr. Massaad reversed it. I still have Crohn’s disease, obviously, but I almost feel normal again. This is my second day of wearing real pants, not yoga pants, real pants and that makes me feel good.
A Message from the Board

Setting a course for the future of Down East Community Hospital

The board of trustees has worked very closely with staff and community members in 2014 to set a course for the future of Down East Community Hospital. We held a 2 day strategic planning retreat in June in which we encouraged many to help set the vision. Trustees, corporators, physicians, division leaders, senior staff, outside healthcare leaders, and our yet to be named interim CEO, Ralph Gabarro, all participated in this process. What became acutely evident was how critical the long term viability our hospital is for the future healthcare needs as well as the economy of Downeast Maine.

Some of the key strategies your board provided oversight to hospital staff were:

- Leveraging technology, in particular telemedicine
- Exploring meaningful relationships - We have partnered with local hospitals and FQHCs as part of the Sunrise Coalition with a mission to collaborate for the health and well being of the local patient
- Planning for an Emergency Department expansion
- Designing a capital campaign in support of the ED project
- Strengthening our relationship with the community
- Strengthening our hospital’s financial future

We were delighted to have the energy, experience, and steady hand of interim CEO, Ralph Gabarro. Ralph brought with him a level of leadership which staff, community, and board have greatly benefitted from. His direct and reasonable demeanor has helped this hospital and community in ways which we will benefit from for years to come. Thank you, Ralph!

In early fall we started a search process for a permanent CEO with the help of a very energetic CEO Search Committee. Our search was thorough. Applications were submitted from Alaska to Florida. We narrowed our search and identified the absolute right person for the job, Dennis Welsh. Dennis is doing a fine job in transitioning into the CEO role.

Your board of trustees has a diversified skill sets. They are actively engaged. They care deeply about your hospital. I am proud to be a part of this fine group and this fine hospital. I feel strongly that this hospital’s best days lie ahead.

Sincerely,

David M. Whitney
Chairman of the Board
Our Donors

Gratitude for Giving! Our hearts are filled with gratitude for the gifts of our generous donors during 2014.

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Bar Harbor Bank & Trust
Bella Vita Salon & Spa
Berry Vines
Bluebird Ranch Family Restaurant
Coopersmith, Simon and Vogel PC
DECH Auxiliary
Down East Credit Union
EBS Building Supplies
Evergreen Realty
Helen’s Restaurant, Inc.
Stephen King Foundation
Kozak & Gayer, PA
Machias Dental
Machias Friendly Pharmacy
Machias Hardware
Machias Laundromat
Machias Savings Bank
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Carolyn Rodick
John & Betty Sawyer II
Peter Sawyer
Marilyn Schoppee
Bessie Schoppee
Trey & Nicole Shaw
In Memory of:

Light A Life gifts were given to:

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Keith Albee
A. & C. Anderson
N. & O. Anderson
Annie
Lindell Larry Beal
Curtis O. Beal
Hillson & Ruth Beal
Jacob Beal
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Aunt Kay Johnson
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Papa Rod
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Ferne Pennell
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Irvng Petegrow
Gilbert Petegrow
Leona Petegrow
Dale Pottle
Adian & Edna Preston
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