



LIFETIMES OF CARING
20 years together

Catholic Healthcare West 2006 Annual Report

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A Letter from Our Sponsors, Chairperson, and President/CEO

Dear Friends,

2. This is a year of celebration and success for Catholic Healthcare West. Twenty years ago, two congregations of women religious joined their ten hospitals together, believing that they could do more for their communities as a unified organization than they could separately.

For two decades the organization they envisioned has grown, providing quality, compassionate care and strengthening communities across California, Arizona, and Nevada. Together, we have become a strong voice for the rights of the underserved, we are effecting positive change in the communities we serve, and we are delivering the next generation of excellent care.

Yet our twenty years together is not the full story of our heritage. Many of our hospitals have faithfully served their communities for generations – some for as long as 150 years. Each of the hospitals, clinics, home-care agencies, and medical groups in the Catholic Healthcare West family brings its own excellence, its own character, its own heritage to the care and service it provides.

As leaders of Catholic Healthcare West, we are honored to stand beside the 50,000 physicians, employees, and volunteers who serve our communities with excellence and compassion every day.

Through the years one thing has remained consistent: our mission. And we are proud of the progress we have made in the service of this ministry. During our 2006 fiscal year we continued our tradition of excellence in patient care, investing in our people, and supporting the overall health of the communities we serve. Today, our clinical quality measures place us among the best in the nation, our employee confidence stands at 80 percent, and our investment in community health has reached record levels.

We continue to grow and progress to meet the needs of all who need care. During the course of the year we provided \$803 million in charity care, community benefits, and unreimbursed patient care; we invested



(Clockwise from left) Sr. Patricia Simpson, Chairperson, Corporate Members; Lloyd Dean, President/CEO; Adrienne Crowe, Chairperson, Board of Directors

\$593 million in building and technology improvements at our hospitals and health clinics; and we launched the CHW International Healthcare Ministry to help support the worldwide efforts of our sponsoring congregations through sustainable investments in the communities they serve throughout third world countries by sharing our resources of medical supplies and equipment, volunteerism, and philanthropic support.

As we look to the future, we are filled with confidence and excitement. Those who came before us built a ministry that has stood the test of time. We are proud to be carrying out their vision, living the core values, and building a stronger ministry so that the next generation of caregivers can carry this remarkable ministry of healing and service well into the future.

Thank you to all of our caring physicians, employees, volunteers, community leaders, and supporters. It is an honor and a privilege to stand beside you in the service of this healing ministry.

Sincerely,

Sister Patricia Simpson, O.P.

Sr. Patricia Simpson, OP
Chairperson
Corporate Members

Adrienne Z. Crowe

Adrienne Crowe
Chairperson
Board of Directors

Lloyd H. Dean

Lloyd H. Dean
President/CEO

“The fruits of our efforts will be realized by providing quality health care to as many people as possible, in a way that affirms their dignity and goodness.”

Sr. Maura Power, RSM and Sr. Terese Marie Perry, RSM

CHW's Co-Founders, 1986

Since our founding in 1986, the women and men of Catholic Healthcare West have come together in common cause to deliver quality, compassionate health care services to all who need them.

We consider serving those in need both a privilege and a calling. And in fiscal year 2006, as we carried on the vision of our founders, we honored that calling and delivered on our mission to provide quality, compassionate health care to the communities that rely upon us.



The Year in Review:

Excellence and Compassion in Patient Care

The care and safety of our patients has been and remains our first priority. We are committed to placing our patients in a safe and compassionate healing environment, and to delivering excellent care that is attuned to each individual's physical, mental, and spiritual needs. In fiscal year 2006 we continued our long tradition of continuous quality improvement, seeing that each patient receives the very best from us each day, and raising the standards of care to ensure that we are delivering excellent care to everyone who comes to us.

Clinical Information Technology

To ensure that we are providing our clinical teams the tools they need to deliver high quality, compassionate patient care, over the next ten years we will invest more than \$300 million in a clinical information system, CareConnect, that will transform our organization into a virtually paperless clinical environment.

During 2006, CareConnect was deployed across four hospitals, integrating laboratory, radiology, and nursing documentation, and we are moving forward with our schedule to bring CareConnect to all hospitals in the Catholic Healthcare West family.

Through this initiative we are bringing computerized physician order entry (CPOE), clinical decision support,

adverse drug event rules, and bedside medical device interfaces to our hospitals, giving our clinicians more time to devote to patient care and ensuring that the best demonstrated clinical practices can be easily migrated across our network of caregivers.

Quality Measures

We believe that by making quality measures more transparent and available we can improve the quality of care delivered at hospitals across the nation. For this reason, Catholic Healthcare West supports and participates in public reporting programs that advance our medical knowledge and increase awareness by the public.

One such program is the Hospital Quality Alliance (HQA), a public-private collaboration with participation from The Joint Commission, the Centers for Medicare & Medicaid, the American Hospital Association, and the National Quality Forum. The HQA measures treatment for four conditions – heart attack, congestive heart failure, pneumonia and, most recently, surgical care – and reports on how often hospitals provide the treatments known to result in the best outcomes for most patients.

We are pleased to report that Catholic Healthcare West has superior system-wide scores in all of the treatment measures for those medical conditions. In fact, for treatment of pneumonia, heart attack, and congestive heart failure, Catholic Healthcare West's clinical measures average 15 percent above the national average. CHW has recently added data collection and quality improvement activities for the surgical care measures and we anticipate achieving the same high level of performance for these measures in the coming year.

Saving 100,000 Lives

Another important initiative is the Institute for Healthcare Improvement's *Saving 100,000 Lives Campaign*. Catholic Healthcare West has joined with hundreds of hospitals across the nation in this initiative, which has saved an estimated 122,000 lives according to published reports. Catholic Healthcare West hospitals are active participants in this campaign focusing on standards of care that are known to improve outcomes, such as:

- **Rapid Response Teams** – We have established rapid response teams (i.e., teams of clinicians that bring critical care expertise to medical/surgical floors to assist bedside nurses when patients begin to exhibit signs or symptoms of instability) in 90 percent of our hospitals. Through the use of these teams we have experienced a reduction in the number of cardiac or respiratory arrests, as well as unplanned transfers to the ICU.



- **Evidence-Based Care for Acute Myocardial Infarction (heart attack)** – More than 90 percent of heart attack patients cared for at our facilities received all eight evidence-based treatment elements that have been shown to help prevent deaths from heart attack.
- **Prevent Ventilator-Associated Pneumonia** – Catholic Healthcare West recently met our three-year goal to reduce the incidence of ventilator-associated pneumonia to only two percent in our intensive care and critical care units. System-wide, we have reduced the incidence of ventilator-associated pneumonia by 55 percent, and a number of our hospitals have gone as long as two years without an incident.

Despite these exemplary results, there is room for improvement, and we commit to our communities that we will continue our uncompromising evaluations of clinical performance. In collaboration with our employees and physicians, we will continue to establish and institutionalize the processes and procedures that result in the best possible care.

Profiles in Caring

"Our hospital was founded in the spirit of collaboration," says JoAnn Kemist, president of the Sequoia Hospital Foundation, and vice president of community relations. "Our community saw a need for a hospital in the 1940s and worked together to make it happen, and we are proud to continue that tradition." Tom Harshman, manager of spiritual care and mission integration for Sequoia Hospital, agrees. "We continue to carry on that collaborative spirit by working with the community we serve to understand their needs and then deliver our very best to them."



"My job has always been exciting to me," says Dr. Henry Mok, a gastroenterologist at Woodland Hospital in Woodland, California. "I want to take care of people and this hospital supports me in putting patients first by taking most of the business side of things off my hands. And I know my patients appreciate the extra time I have to listen to their concerns."

Sherry Richards, RN, DSDE, has served at Marian Medical Center in Santa Maria, California for 26 years. In that time she has seen the hospital grow with the community. "We've really changed with the community," she says. "We've advanced in clinical excellence and we've stayed very connected to the needs of the community. We are always aware of what's going on in the community and meeting those needs."

"It is very important to me to deliver excellent care, not only because that is my work, but also because it is a reflection of what my beliefs are and who I am as a person," says Joel Beland, RN, an emergency room nurse at Methodist Hospital in Sacramento, California. "I chose this profession because I care about making a difference in people's lives. And for that reason, every patient contact, every family contact is an opportunity to deliver excellent care."



Debbie Agee, RN, is a home care nurse at Mercy Home Health & Hospice in Sacramento, California. Her work brings her into patients' homes, where she helps ensure the healing process continues after a hospital stay. "It's important for patients to receive care in the home," Debbie says, "because it's a familiar, comforting environment. It's very rewarding for me to be able to provide this kind of service, which means so much to my patients."

The Year in Review:

Investing in Our People

Our employees are the reason our healing ministry continues to succeed. The quality of their care and the quality of their caring has established Catholic Healthcare West hospitals as among the best in the nation, and we are committed to providing our employees with the tools and resources they need to grow both professionally and personally.

Encouraging Growth

During the 2006 fiscal year, Catholic Healthcare West continued to invest in our employees through tuition reimbursement programs, employer-paid dependent healthcare coverage, continuing education courses, and our in-house educational program, the CHW Learning Institute, that gives our employees the skills, tools, and opportunities to deepen their knowledge of healthcare practice and administration.

We continue to work with our labor unions on important training and education programs for our employees. Our nurse mentoring collaboration with the California Nurses Association is helping to train and prepare experienced nurses to serve as mentors for nurses just beginning their careers. And our work with the Service Employees International Union is progressing through the Joint Employer Education Fund, which is helping Catholic Healthcare West employees upgrade their skills, invest in their career growth, and make greater long-term contributions to our healing ministry.

Recognizing Employee Contributions

In recognition of the fact that our successes in 2006 would not be possible without our employees, we continued for the second year a program that provides eligible employees with cash awards in acknowledgement of their contributions.

Recruiting Caring Professionals

In the face of an on-going national nursing shortage, we continue to successfully employ more than 13,000 highly trained registered nurses to care for the patients we serve. In 2006, we hired 2,222 nurses, up from 1,943 new hires in 2005. Despite these solid numbers, our need for nursing talent continues to grow. To help fill the gap, many of our hospitals are partnering with local community colleges to support nursing programs and encourage more young people to consider a career in healthcare.



Leadership Development

In the last year Catholic Healthcare West joined with a number of our sister Catholic healthcare providers to ensure that the heritage and legacy of the Catholic health ministry continues as more lay people are called to executive leadership. The Ministry Leadership Program is a joint effort of Catholic Healthcare West, the Daughters of Charity Health System, Providence Health System, the Sisters of Charity of Leavenworth Health System, and St. Joseph Health System. The goal of this program is to ensure that leaders in Catholic healthcare have the background information and spiritual depth they need to be successful in their leadership roles. Currently, 240 executives from these systems are participating in the three-year program; 98 are from Catholic Healthcare West.

Best Places to Work

We are pleased to report that at the end of the 2006 fiscal year, 80 percent of our employees reported that they feel they are part of an effective organization, up from 76 percent in 2005, and in a number of our communities our employees have recognized their Catholic Healthcare West hospital as among the “Best Places to Work.”

We are honored and humbled by this recognition, and we commit to our employees that we will continue to partner with them. We want our employees to feel valued for who they are, not just what they do. Providing a working environment where our people can live the values and deliver on the mission is the most important thing we can do as an employer and we will continue our tradition of investing in the caring people who are the hearts and hands of our ministry.

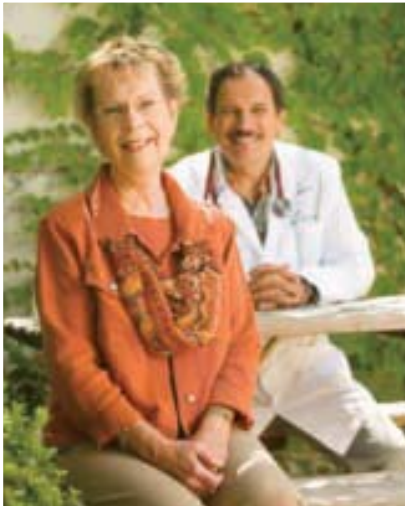
Profiles in Caring

On January 26, 2005, the Metrolink train **Patti Hudson** was taking to work struck an automobile that had been abandoned on the tracks. The collision killed eleven and wounded hundreds, including Hudson, who was rushed to Glendale Memorial Hospital with a severely dislocated neck and a broken pelvis. "The doctors and nurses were absolutely wonderful," she says of her six-week stay at the hospital and complete recovery. "They not only saved my life, but they made me a whole person."



For nearly 40 years, non-profit Golden Umbrella has provided health and living assistance to seniors in Shasta County, California. In 1997 Golden Umbrella affiliated with CHW, which has enabled the nonprofit to expand its services. "If it weren't for this partnership I don't believe Golden Umbrella could survive on its own," says **Larry Montgomery**, executive director and chief executive officer for the senior day health care center. "Together we are ensuring that excellent health care remains available to seniors in our community."

As the director of business and information services at Sierra Nevada Memorial Hospital in Grass Valley, California, **Mark Freitas** is involved in the patient experience from admission to discharge. "There's a lot of personal satisfaction in helping patients through the continuum of care," he says. "I feel like I make a difference in patient care, and I feel like I make a difference in the organization by really optimizing our environment and ensuring that our resources are effectively used to improve care."



Ruth Bode was diagnosed with breast cancer 22 years ago. Then again six years ago. And again four years ago. She sought treatment at Mercy Regional Cancer Center in Redding, California, where her oncologist, Dr. Mike Figueroa, spent time with her discussing her condition and customizing a treatment plan that fit her personal needs. "The experience I've had at this hospital is the very best," Ruth says. "It's been my hospital ever since I was first diagnosed, and it's why I chose to do volunteer work here also."

"Your first impression is often your lasting impression," says **Malcolm Russell**, public safety manager for Mercy General Hospital in Sacramento, California. "I want people to feel safe from the moment they walk into this facility." Russell's work in the service of public safety is more than a job; it's about ensuring a safe environment for healing. "We're here to help people heal, and it's my job to make sure that the environment is conducive to that."

The Year in Review:

Social Accountability and Community Benefit

Extending our care beyond the walls of our hospitals is an expression of our commitment to promote the total health of the community and to partner with others to improve the quality of life. In fiscal year 2006 we focused our efforts on expanding and/or enhancing services for people with unmet health needs. Paramount in this work is the active utilization of our Community Need Index, which pinpoints health disparity for every zip code in the United States. By focusing resources earlier in the disease cycle, we are working to prevent hospitalizations for conditions that can be managed in an outpatient environment.



One of our many accomplishments in this regard occurred at California Hospital Medical Center in Los Angeles, where a hospital-sponsored chronic disease management program significantly reduced preventable

hospitalizations. Participants in the program self-reported a reduction in hospitalizations from 74 nights prior to the class to 12, and emergency department use for care associated with their chronic conditions from 20 days to one. The initial group of participants numbered 100; an additional group of 75 are now going through the program.

Community Grants

Across our system, Catholic Healthcare West supports the efforts of other nonprofit community

organizations through our Community Grants Program. Since 1990 CHW has made grant awards totaling \$22 million. Typically, grant awards range from \$5,000 to \$25,000, and projects funded must involve collaboration with others. In 2006, we made \$2.5 million in grant awards to 176 projects, the majority of which support culturally sensitive health and social services, such as:

- Chicanos Por La Causa, Phoenix, AZ
CHW's grant will be used to provide enhanced oral health services for low-income families who are agricultural workers, primarily of Hispanic origin.
- Larkin Street Youth Center, San Francisco, CA
CHW funds will be used to support the HIV/AIDS Assisted Care Program, which provides 24-hour residential services and medical care to HIV-positive

homeless and runaway youth, ages 18-24. The Assisted Care Program is the nation's first licensed residential care facility for HIV-positive young people.

- S.A.F.E. House, Henderson, NV
The Transitional Advocacy Housing Project enables victims of domestic violence to obtain safe, affordable, transitional housing. The grant funds will be used to provide clients with rental assistance.

Community Investments

Since 1992 we have also invested more than \$73.6 million in nonprofit community organizations. Our Community Investment Program is designed to expand access to capital for those who historically have been underserved. Through this program we make below-market interest rate loans to nonprofit organizations that are working to improve the health and quality of life in their communities. During the 2006 fiscal year, Catholic Healthcare West provided \$7.5 million in low- or no-interest loans and lines of credit to nonprofit community organizations, including:

- Sojourner Center, Phoenix, AZ
A CHW loan will cover the costs of building a supportive living campus in Phoenix for women and children who are victims of domestic violence.

- Native American Health Center, Oakland, CA
Bridge funding will support the construction of a community health care facility for Native Americans.

- Henderson Allied Community Advocates, Henderson, NV
A CHW loan will cover the costs of constructing a Family Resource and Education Center for low-income families.

Advocating for the Underserved

In addition to these direct investments in the communities we serve, our mission calls us to advocate on behalf of our sisters and brothers who are poor and disenfranchised. Through our work with local, state, and federal governments we are advocating for a national healthcare system that is affordable and available to all. We are also integrating our mission and values into investment decisions, promoting corporate social responsibility and accountability on a range of issues that affect the broader health of the communities we serve.

In collaboration with members and associates of the Interfaith Center on Corporate Responsibility, Catholic Healthcare West engaged 22 corporations on eight social and environmental issues during the 2006 proxy season. Eighty percent of our proposals received sufficient support to be re-filed in the coming year.



Care for the Earth

The 2006 fiscal year also marked our tenth year of formal commitment to environmental conservation and protection. Our annual environmental report is accessible at www.chwhealth.org/environment. Among our accomplishments during the year are:

Catholic Healthcare West is a member of the California Climate Action Registry and has committed to voluntarily measure and report all emissions of greenhouse gases. During the 2006 fiscal year, two CHW hospitals participated in a pilot project to measure emissions that will serve as a template for system-wide implementation of the measurement plan.

Catholic Healthcare West switched to PVC/DEHP-free products this year to better safeguard our patients. By using PVC/DEHP-free products, CHW

is eliminating approximately 840 tons of PVC/DEHP IV containers from both the patient care setting and the waste stream. Due to the lighter weight of materials, CHW is additionally reducing overall waste by 250 tons over the five-year course of the contract.

Award Winning Commitment

For our successes in improving the environmental performance in the healthcare field, Catholic Healthcare West was awarded the H2E Champion for Change Award by the international coalition Health Care Without Harm. Two Catholic Healthcare West hospitals, St. Joseph's Hospital in Stockton and Dominican Hospital in Santa Cruz, were also honored with the Environmental Leadership Award.

Profiles in Caring

"Volunteering is such a rewarding thing to do," says **Gretchen Basset**, a volunteer at Dominican Hospital in Santa Cruz, California, with more than 10,000 hours logged. "I love that I can make someone feel comfortable, help people find their way, and support my community. And the warmth and gratitude I receive from people is truly a gift."



"One of our values at CHW is excellence, and I really feel like we are providing that in food service," says **Elaine Patterson, RD**, clinical dietician at Mercy Medical Center in Mt. Shasta, California. "We are tailoring meals to the individual health needs of each patient, and we are extending that commitment to well-being beyond the walls of the hospital and using our purchasing power to support sustainable, organic food sources."

"I see my role as being first and foremost an advocate for my community," says **Morgan Clayton**, small business owner and chairperson of the community board at Mercy Hospital in Bakersfield, California. "Serving in this capacity gives me the opportunity to build a strong link between my hospital and the community. When we talk about service to the poor or building the infrastructure for a new tower, that's the community's voice being heard through the hospital."

"I'm very proud of the dedication that my staff and I have to delivering high-quality work," says **Debbie Martinez**, laboratory director at Mercy Hospital of Folsom in California. "We're committed to treating patients with dignity, and for us that means delivering timely and accurate results. What we do is an integral part of patient care and we're committed to ensuring patients begin receiving the right treatment at the right time."



Caroline Swinton is the manager of patient relations and risk management at Community Hospital of San Bernardino. "My job is really about listening," Swinton says. "I listen to patients, families, and employees to understand and improve their experience of care. Patient safety is at the heart of what we do and I am privileged to be able to keep the patient's voice at the forefront of our work."



Catholic Healthcare West was founded in 1986 when two orders of women religious joined their ten hospitals together to form a single healthcare system that could do more for their communities together than they could separately.

Yet our twenty years together is not the full story of Catholic Healthcare West. Many of our hospitals have faithfully served their communities for more than 100 years. Whether they were founded by a congregation of women religious or by a fellowship of dedicated community citizens, the hospitals of Catholic Healthcare West hold at their heart a fundamental desire to make a difference in the lives of those they serve.

In the following pages we present a timeline of significant events in the history of caring that is now known as Catholic Healthcare West.

1986

Catholic Healthcare West (CHW) is founded when two congregations of the Sisters of Mercy join their ten hospitals together.

CHW

The CHW Board of Directors publishes its first position paper: "Commitment to Care of the Poor in Times of Financial Crisis."

1987

The Adrian Dominican Sisters join CHW as a co-sponsor bringing in St. Rose Dominican Hospital in Henderson and Dominican Hospital in Santa Cruz.

1988

The CHW Advocacy Program is initiated.

The CHW Board of Directors publishes its second position paper: "Response to the Needs of People Affected by HIV Disease."

1989

The CHW Strategic Plan calls for health system reform and health care access for all as its number one priority.

1990

Mercy American River Hospital in Carmichael joins CHW.

The CHW Community Investment Program is initiated.

1991

1997

Two additional co-sponsors join CHW: the Sisters of St. Francis of Penance and Christian Charity bringing Marian Medical Center in Santa Maria; and the Franciscan Sisters of the Sacred Heart bringing St. Francis Medical Center in Santa Barbara.

1998

Community Hospital of San Bernardino, Mercy Westside Hospital in Taft, and Oak Valley Hospital in Oakdale join CHW.

UniHealth hospitals join CHW, bringing in: California Hospital Medical Center in Los Angeles, Glendale Memorial Hospital in Glendale, La Palma Intercommunity Hospital in La Palma, Long Beach Community Hospital in Long Beach, Martin Luther Hospital in Anaheim, Northridge Hospital Medical Center Roscoe Boulevard Campus in Northridge and Sherman Way Campus in Van Nuys, and San Gabriel Valley Medical Center in San Gabriel.

1999

Chandler Regional Hospital in Chandler, joins CHW.

Martin Luther Hospital in Anaheim and La Palma Intercommunity Hospital in La Palma are sold.

2000

St. Rose Dominican Hospital Siena Campus opens in Henderson.

Mercy American River Hospital is closed.

Long Beach Community Medical Center is closed.

2001

Daughters of Charity depart CHW, forming an independent health system.

Timeline

<p>Methodist Hospital of Sacramento becomes the first non-Catholic hospital to join CHW.</p> <p>The Sisters of Mercy open Mercy Southwest Hospital in Bakersfield.</p> <p>1992</p>	<p>The CHW Medical Foundation is established.</p> <p>St. John's Pleasant Valley Hospital in Camarillo and Saint Francis Memorial Hospital in San Francisco join CHW.</p> <p>1993</p>	<p>CHW formally adopts as its vision to promote wellness, develop regional systems and build a continuum of care.</p> <p>1994</p>	<p>St. Elizabeth Community Hospital in Red Bluff joins CHW.</p> <p>Mercy Hospital in San Diego affiliates with Scripps Health.</p> <p>Daughters of Charity, Province of the West, joins CHW bringing in Seton Medical Center in Daly City, Seton Coastside in Moss Beach, O'Connor Hospital in San Jose, Saint Louise Hospital in Morgan Hill, St. Vincent Medical Center in Los Angeles, and St. Francis Medical Center in Lynwood.</p> <p>1995</p>	<p>The Dominican Sisters of Kenosha, Wisconsin join CHW, bringing Mercy Medical Center in Merced.</p> <p>The Dominican Sisters of San Rafael join CHW, bringing St. Joseph's Medical Center in Stockton, St. Dominic's Hospital in Manteca, and Mark Twain St. Joseph's Hospital in San Andreas.</p> <p>The Sisters of Charity of the Incarnate Word of Houston, Texas join CHW, bringing St. Mary Medical Center in Long Beach and St. Bernardine Medical Center in San Bernardino.</p> <p>Additional community hospitals join CHW, including Bakersfield Memorial Hospital in Bakersfield, Sierra Nevada Memorial Hospital in Grass Valley, Sequoia Hospital in Redwood City, Robert F. Kennedy Medical Center in Hawthorne, and Woodland Healthcare in Woodland.</p> <p>1996</p>
<p>2002</p> <p>CHW adopts a formal Environmental Policy and Statement of Principles, committing to eliminate the use of mercury products in all hospitals and other facilities.</p> <p>Marian Medical Center West opens.</p> <p>Mercy Medical Center Merced Community Campus joins CHW.</p>	<p>2003</p> <p>CHW offers employer-paid dependent coverage to all benefited employees.</p> <p>Palliative Care programs are developed at all CHW hospitals to assure comfort and support for families living with chronic and terminal illness.</p> <p>St. Francis Medical Center in Santa Barbara is sold.</p> <p>Mercy Westside Hospital in Taft is closed.</p>	<p>2004</p> <p>CHW expands its financial assistance for patients earning up to 500 percent of the federal poverty level.</p> <p>Arroyo Grande Community Hospital in Arroyo Grande and French Hospital Medical Center in San Luis Obispo join CHW.</p> <p>St. Dominic's Hospital in Manteca is sold.</p> <p>Northridge Hospital Medical Center, Sherman Way Campus is closed.</p>	<p>2005</p> <p>CHW releases its Community Need Index, which pinpoints health disparities for every zip code in the United States.</p> <p>CHW establishes a vision to be a growing and diversified healthcare ministry distinguished by excellent quality and committed to expanding access to those in need.</p>	<p>2006</p> <p>Mercy Gilbert Medical Center in Gilbert opens.</p> <p>St. Rose Dominican Hospitals, San Martín Campus, opens in Las Vegas.</p>

20 years together

The Year in Review:

Funding Our Mission

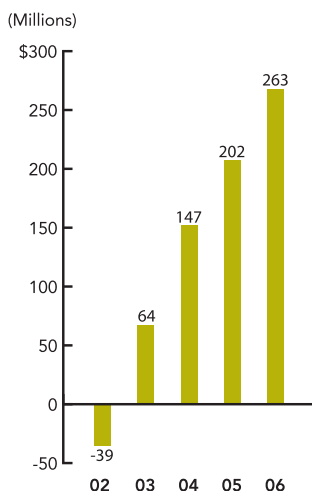
To ensure the long-term availability of quality care in the communities we serve, it is essential that we generate the resources needed to invest in the future and fulfill our mission. As a not-for-profit organization, we reinvest all our operating and investment income in hospital improvements, technology enhancements, community health programs, and employee benefits.

Financial Strength

We are proud to report that Catholic Healthcare West ended the fiscal year with a net income of \$438 million, up from \$349 million in 2005. Operating income was \$263 million compared to \$202 million in 2005.

Our financial stability enables us to provide quality, compassionate health care to everyone who comes to us for care, regardless of their ability to pay. It is also a testament to what can be achieved when we hold true to our mission and values, even in the face of rising numbers of the uninsured and underinsured and inadequate government reimbursements.

Financial Strength



Charity Care and Community Benefit

Despite ongoing financial pressures in the healthcare industry as a whole, Catholic Healthcare West provided \$465 million in community benefits and free care for the poor during the fiscal year, up from \$341 million in fiscal year 2005. This investment includes charity care, community grants, and free primary care provided at our many community health care clinics.

Based on guidance from the Catholic Health Association, Catholic Healthcare West no longer counts its Medicare shortfall as part of its community benefit expense. The Medicare shortfall to Catholic

Founding Stories of CHW's Co-Sponsoring Congregations

The Sisters of Mercy Founded in 1831

One hundred and seventy five years ago, Catherine McAuley set about realizing her dream to make life better for those less fortunate than herself. Left a large legacy as a result of her selfless care for a sick and aging couple, she immediately set about using it to care for those who were poor and destitute in her hometown of Dublin, Ireland. She opened the first House of Mercy as a refuge for young women to protect them from exploitation. Catherine's energy drew others to join her. Soon she had a circle of women who committed themselves to the works of mercy. This circle of women became the first Sisters of Mercy. Known as the "walking sisters", they were the first congregation of women religious to leave the confines of their convent to minister to the people. Catherine's legacy is primarily one of the heart. She told her Sisters that the "kind word, compassionate glance, and patient hearing of another's sorrows" was the most valuable service they could offer.

Sisters of St. Francis of Penance and Christian Charity Founded in 1835

The Sisters of St. Francis of Penance and Christian Charity were founded in 1835 by Catherine Damen, a simple woman who lived in the southern part of The Netherlands. Inspired by the life and spirit of St. Francis of Assisi, who dedicated his life to living the gospel and following the way of Christ, Catherine spoke little and labored much, insisting, "God will provide." Her simplicity of purpose launched a committed following, and on May 10, 1835, after much persistence and determination, she received the Church's approval to form a religious congregation based on Franciscan principles. Catherine changed her name to Mother Magdalene and the Sisters of St. Francis of Penance and Christian Charity grew, extending their ministry to the United States, The Netherlands, Germany, Poland, Italy, Indonesia, The Philippines, Brazil, Africa, Mexico, and Guatemala.

Dominican Sisters of San Rafael Founded in 1851

Sister Mary Goemaere, born Catherine Adelaide Goemaere in Belgium, took her vows at the age of 40 with the Dominican Order of Preachers, devoting her life to preaching and teaching. In 1850 she received and answered a call for assistance from Bishop Joseph Sadoc Alemany, OP, to join him in educating the residents of the newly formed see in California. Sister Mary (later known as Mother Mary) settled in Monterey, California, and together with two other women established the first Catholic school for children in the state. Their education, training, and experience led the Dominican Sisters to expand their professional skills to include social work and health care as ways to bring the compassion of Christ to the world.

Dominican Sisters of St. Catherine of Siena Founded in 1866

Teresa de Saldanha was born into Portuguese aristocracy in 1837, and though she fulfilled the ceremonial duties of her position, her attention was largely directed towards the care and comfort of poor children in her hometown of Lisbon. When she was eighteen she made the decision to commit to a religious life even though formal religious orders had been banned from Portugal for some time. Teresa would not have the opportunity to take vows herself until 1887. Nonetheless she worked to establish a religious community in Lisbon, sending two women to Ireland to take their vows in the Dominican charism. They returned as the first Dominican Sisters of St. Catherine of Siena. In only a few years Teresa and her Sisters were working in schools and hospitals all over the country.

Sisters of Charity of the Incarnate Word Founded in 1867

"Our Lord Jesus Christ, suffering in the persons of a multitude of sick and infirm of every kind, seeks relief at your hands." So wrote Bishop Claude Marie Dubuis in a plea to women religious in his native France in 1866. Dubuis was then the bishop of Galveston, a diocese that at that time spanned the entire state of Texas. In his long journeys on horseback throughout the state, he witnessed the overwhelming sickness, disease, and poverty of the people and reached out to his own homeland for help. Three Sisters immediately answered his call. Sister Mary Blandine, Sister Mary Joseph and Sister Mary Ange arrived in Galveston on October 25, 1866 and became the first members of the Congregation of the Sisters of Charity of the Incarnate Word.

Sisters of St. Dominic of Adrian, Michigan Founded in 1884

Like all of the Dominican Orders, the Sisters of St. Dominic of Adrian, Michigan, have their roots in the work of Saint Dominic de Guzmán, who founded the Order of Preachers (more commonly known as the Dominican Order) in 1216. Known for their commitment to learning and preaching, Dominican congregations have been established worldwide. In 1853, four Sisters from the Holy Cross Convent in Regensburg, Germany, arrived in New York to meet the needs of German Catholic immigrants. Mother Augustine Neuhierl was among them and is the Sister who figures most prominently in the Adrian Dominican story. The foundation in Michigan began with a deathbed vision of Mother Augustine in which she saw a "peninsula in the west dotted white with Dominican foundations." In 1884 six Sisters from Holy Rosary Convent came to Adrian, Michigan to open St. Joseph Hospital and Home for the Aged on the grounds of what is now the Adrian Dominican Motherhouse.



Eight Sisters of Mercy arrive in San Francisco, California and immediately begin caring for residents of a city struck by cholera, then typhoid and influenza.

1854



Merced Community Medical Center in Merced, California begins caring for the county's poor and indigent populations. In 2001 it is renamed Mercy Medical Center Merced, Community Campus.

1873

Los Angeles physicians open Dr. Lindley's Private Hospital. Today it is known as California Hospital Medical Center and was the official hospital for both the 1934 and 1984 Olympic Games.

1887



The Sisters of Mercy open St. Joseph's Hospital and Medical Center in Phoenix, Arizona. Originally a six-room cottage dedicated to treating tuberculosis patients, care cost only \$10 per week.

1895

The Sisters of Mercy open Mercy General Hospital in Sacramento, California, on Thanksgiving Day. Placed within the cornerstone are copies of the daily papers, Catholic journals, and a parchment on which was written the history of the hospital.

1897

1940

The Sisters of St. Francis of Penance and Christian Charity open Our Lady of Perpetual Help Hospital in Santa Maria, California. Many of the residents served by the hospital are tied economically to the land and pay for their care with gifts of vegetables and meat. The hospital is now known as Marian Medical Center.

1941

The Adrian Dominican Sisters of Adrian, Michigan, take over the abandoned 18-bed Hanley Hospital in Santa Cruz, California. The hospital is renamed Sisters Hospital. Today it is known as Dominican Hospital.

1946

Dr. Edison French, a doctor who served with the Navy Medical Corp., settles in San Luis Obispo, California, and purchases the San Luis Sanitarium. He re-names the facility French Hospital Medical Center and continues operating it as an acute care hospital.

1947

Seven Adrian Dominican Sisters arrive in Henderson, Nevada to purchase Basic Hospital from the government. The sale is made for \$1 and the hospital is renamed St. Rose Dominican Hospital.





1950

At the urging of seven women in the community, the City Council of Redwood City, California, forms a healthcare district specifically to build a hospital. Sequoia Hospital opens shortly thereafter.

1951

Mark Twain St. Joseph's Hospital in San Andreas, California, opens following the formation of a special healthcare district dedicated to ensuring that medical care was available in the rural community.

Lifetimes of

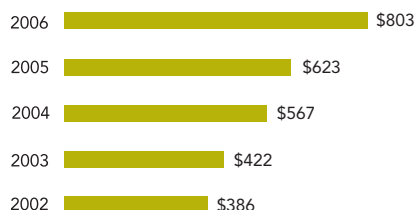
<p>St. Joseph's Home and Hospital opens in Stockton, California. Originally a home for aging men, the hospital's administrator transfers ownership in 1911 to the Dominican Sisters of San Rafael in gratitude for their 12 years of service without salary or compensation. The hospital is now known as St. Joseph's Medical Center.</p>	 <p>Five community physicians open Saint Francis Memorial Hospital in San Francisco, California. A few months after it opens, the great fire of 1906 destroys the facility. It is rebuilt in 1911.</p>	<p>The Sisters of Mercy open St. Elizabeth Community Hospital in Red Bluff, California, named in honor of Elizabeth Kraft, who donated much of the funds needed to build the facility.</p>	<p>Dr. Ferdinand Stabel opens St. Caroline Hospital in Redding, California. Upon Dr. Stabel's death in 1943, community citizens assist the Sisters of Mercy in raising the \$30,000 needed to purchase the hospital. In 1944, the Sisters of Mercy assume ownership of the hospital, renaming it Mercy Medical Center.</p> <p>The Woodland Sanitarium is opened in a rented two-story house by a registered nurse and her two sisters. It is the seed from which Woodland Memorial Hospital in Woodland, California grew.</p>	 <p>St. Clair Hospital in Bakersfield, California, opens.</p> <p>A group of private physicians opens Ramona Hospital in San Bernardino, California. It is later renamed Community Hospital of San Bernardino.</p>	<p>The Sisters of Mercy assume operations of St. Clair Hospital. In 1913, a new hospital is built and its name is changed to Mercy Hospital. During the opening celebration, guests were treated to a ride on the three-story hospital's elevator.</p>
1899	1905	1906	1907	1908	1910
<p>1955</p> <p>Thirty-seven physicians pool their money to open Northridge Hospital Medical Center in Northridge, California. The hospital opens with 102% occupancy and was the only hospital in the area to be "cooled by refrigerated air."</p>	<p>1956</p> <p>Bakersfield Memorial Hospital opens in Bakersfield, California following a campaign led by civic leaders and healthcare professionals.</p>	<p>1958</p> <p>Sierra Nevada Memorial Hospital opens in Grass Valley, California, after the community raises enough funds to complete construction on a hospital that had been started in 1934 by a local judge and two major gold mine operators.</p>	<p>1960</p> <p>Community Hospital of San Gabriel, in San Gabriel, California opens. The hospital's architecture allowed the public to view newborns in the nursery from a walkway outside the hospital. Today it is known as San Gabriel Valley Medical Center.</p> 	<p>1961</p> <p>Chandler Regional Hospital opens in Chandler, Arizona, after a grassroots fundraising campaign by community leaders.</p>	<p>1962</p> <p>Founded by four local physicians, Arroyo Grande Community Hospital opens in Arroyo Grande, California.</p> <p>Twin Lakes Community Hospital opens in Folsom, California. The hospital's founder, Jack Kipp, is also the facility's first administrator and later is elected mayor of Folsom. Today the hospital is known as Mercy Hospital of Folsom.</p> 

Caring

					
At the request of community leaders, the Sisters of Mercy open St. John's Regional Medical Center in Oxnard, California, to care for the thousands of residents who had settled in the Oxnard plains.	Members of the Merced, California community open Mercy Hospital to care for the area's rural residents. The Sisters of Mercy assume ownership of the facility in 1949. The Sisters cultivate a vegetable garden behind the hospital to provide food for the patients.	The Sisters of Charity of the Incarnate Word purchase the Long Beach Sanitarium in Long Beach, California, expanding services to a full service hospital, now known as St. Mary Medical Center.	Several doctors and community leaders open Physicians and Surgeons Hospital in Glendale, California. It is later renamed Glendale Memorial Hospital and Health Center. The hospital's indoor swimming pool keeps the hospital solvent through the Depression as a treatment facility for polio patients.	The Sisters of Charity of the Incarnate Word open St. Bernardine Medical Center in San Bernardino, California. During the Depression, many patients paid their bills with walnuts, poultry, or citrus.	The Sisters of Mercy open Mercy Medical Center in Mt. Shasta, California. Dr. William E. Smith, the hospital's first administrator, also serves as the chief surgeon, pharmacist, electrician, plumber, and carpenter.
1912	1923		1926	1931	1938
1967	1973	1974			
The Sisters of Mercy open Mercy San Juan Medical Center in Carmichael, California.	Retired California Supreme Court Judge and son of a Methodist minister, Frank K. Richardson, opens Methodist Hospital in Sacramento, California, after a decade-long effort to bring acute care services to the rural community. Oak Valley District Hospital opens in Oakdale, California. The hospital's "first button response system" allowed patients to see their nurse on a five-inch television in the patient's room.	St. John's Pleasant Valley Hospital in Camarillo, California is founded by a group of community leaders. It is later sponsored by the Sisters of Mercy.			

Healthcare West in fiscal year 2006 was \$337 million, bringing our year-end unreimbursed expense to \$803 million for both patient care and proactive efforts to improve the health of the communities we serve.¹

CHW Charity Care & Community Benefit*



*Includes traditional charity care and unpaid costs of certain government programs, as well as a variety of other programs for the poor and the broader community.

Financial Assistance for the Uninsured

For those families who come to our hospitals and are unable to pay for their care, Catholic Healthcare West has maintained our financial assistance program, which provides free and discounted care to uninsured families making up to 500 percent of the federal poverty level (or \$100,000 for a family of four). It remains one of the most generous financial assistance policies in the nation. And as we provide financial assistance to many of the Americans living without health care insurance, we also assist eligible uninsured patients through the enrollment process for government-funded insurance programs. Since 2003 we have assisted nearly 140,000 people through this process to secure insurance coverage.

Investing in our Hospitals

Funding our mission also means investing in our hospitals, ensuring that state-of-the-art care remains available in our communities. During the fiscal year, Catholic Healthcare West invested more than \$590 million in capital improvements and technology, up from \$452 million in 2005. Among these investments:

- In June 2006, we opened the first full-service acute care hospital in Gilbert, Arizona. The \$152 million state-of-the-art Mercy Gilbert Medical Center

brought more than 300 jobs to one of the fastest growing communities in the U.S. The medical center opened with 92 private beds and the capacity to expand to 400 as the community grows.

- We completed construction of our third hospital campus in Nevada, the \$148 million St. Rose Dominican Hospital, San Martin Campus, which opened in November 2006.
- Construction was completed on a 430,000 square-foot Barrow Neurological Institute tower at St. Joseph's Medical Center in Phoenix, Arizona. The \$164-million, 144-bed tower houses a level-one trauma center, 11 state-of-the-art neurosurgery suites, and the only 3-Tesla Interoperative MRI machine to be installed in a hospital, allowing surgeons to view detailed images of the brain during surgery.

Philanthropic Foundations

The work of our fundraising foundations has also helped sustain our ministry. The 31 foundations that support Catholic Healthcare West hospitals raise funds that allow us to continue our tradition of caring, our ministry of healing, and our vision of excellence. In our 2006 fiscal year, these foundations received gifts from nearly 40,000 individuals, philanthropies, and corporations totaling \$99 million, up from \$76.5 million in 2005. We are grateful that so many people chose to join us in our mission of healing by providing this generous and needed philanthropic support. These funds enable us to expand and invest in emergency departments, purchase state-of-the-art equipment, and provide advanced training and education for patients and caregivers.

We do all of this in adherence to our mission and to Catholic social teaching, which states that every person has a right to be treated with dignity. In the coming years and decades we will continue to invest in this healthcare ministry, bringing healing and hope to all who come to us for care.

¹ In fiscal year 2005, Catholic Healthcare West's Medicare shortfall was \$282 million, bringing our total unreimbursed expense to \$623 million, as previously reported.

Profiles in Caring

"Trauma begs for compassion," says **Dr. Leon Owens**, director of trauma services at Mercy San Juan Medical Center in Carmichael, California. "Seeing a person harmed, especially seriously harmed, calls out to anyone. In a trauma center, no one individual can do all the things that a trauma patient needs. Every discipline has to deliver exemplary service and they have to deliver it 24 hours a day. And there's no way to do that without working shoulder-to-shoulder with other people who are as devoted and care as much as you do."



Sister Mary Mebane calls her work as a chaplain a "ministry of presence." Her most recent work at Marian Hospice in Santa Maria, California, allows her to spend more time with patients and their families than she would in a traditional hospital environment. "Being present to the person and the family is something I can do very well in a hospice environment," she says. "I can provide the space for them to talk and spend the time that they need."

"The strength and courage of my patients—their faith—is amazing to me," says **Nancy Cunningham, RN**, an oncology nurse at Mercy Medical Center in Merced, California. "As much as I give to them, they give right back. They teach me a lot about life and courage and strength. They are the reason why I chose health care as a profession and they are what makes it such a joy to be here."



"It doesn't always take a lot to make a huge difference in a person's life," says **Dr. Lynn Yonekura**, director of community benefits at California Hospital Medical Center in Los Angeles, California. The downtown hospital has established medical clinics, family resource centers, English-as-a-second-language courses, and health education seminars for the community it serves. "We partner with more than a hundred community based organizations to support the services that our communities say they need."

Tom Laubacher has served on the St. John's Regional Medical Center community board for 12 years. His family's ties to the Oxnard, California hospital go back much further—to 1912 when Reverend John Laubacher, Tom's great uncle, asked the Sisters of Mercy to open a hospital in the burgeoning community. "I'm really proud to be part of this hospital," Laubacher says. "For my whole family, to serve the community in this way and to see the hospital grow and prosper has been a real joy."

Management Discussion and Analysis

Catholic Healthcare West's financial performance improved for a sixth consecutive year in fiscal year 2006 primarily as a result of operating efficiency, revenue growth stemming from serving more patients, and improved managed care reimbursement. CHW reported a gain from operations of \$263 million for fiscal year 2006 on revenues of \$6.7 billion. Our continued success has again resulted in improved ratings by major bond rating agencies, with "A" ratings from Standard and Poor's, Moody's, and Fitch Ratings.

We have achieved these strong, positive financial results through continued, disciplined monthly operating reviews, clear goals and metrics, and a streamlined decision-making process. Our increased scrutiny on productivity measures continues to result in greater efficiencies and expense containment. Additionally, long-term labor contracts have afforded increased stability.

Productivity remains a challenge, and wage and benefit cost pressures continue to be high as shortages in nursing and other professional categories persist. Retention and recruitment efforts are ongoing areas of focus resulting in a variety of programs and incentives.

Liquidity, consisting of cash and investments, continues to improve. At fiscal year-end, balances increased to more than \$2.7 billion as a result of strong operating and investment performance.

Investment income remained strong at \$175 million for 2006. The significant amount of available cash has been an important factor in achieving the higher credit ratings and is critical to ensuring that we will have the borrowing capacity to carry out our significant capital plans over the next several years.

CHW remains committed to serving those in need. Unsponsored community benefit, representing uncovered costs of programs and services provided to the poor and broader community, amounted to \$465 million in fiscal year 2006, which is more than 7% of total operating expenses for the year. CHW follows the guidelines established by the Catholic Health Association to identify and quantify these programs and services. In addition to these amounts, CHW incurred more than \$337 million in uncompensated care to Medicare beneficiaries in fiscal year 2006; CHW, as with many health systems, helps fund the burden of this public program.

2006 Annual Financial Summary

RESULTS OF OPERATIONS	\$ (in 000's)
Revenue from Operations	6,730,138
Operating and Administrative Expenses	6,079,947
Depreciation and Interest	365,859
Loss on Early Extinguishment of Debt	<u>21,668</u>
Total Expenses	<u>6,467,474</u>
Net Operating Income	262,664
Investment Income	175,253
Net Income	<u>437,917</u>
FINANCIAL POSITION	
Assets	
Current Assets	2,454,437
Assets Limited as to Use	3,269,338
Property and Equipment, Net	2,540,922
Other Non-Current Assets	373,094
Total Assets	<u>8,637,791</u>
Liabilities and Net Assets	
Current Liabilities	1,426,314
Other Non-Current Liabilities	637,327
Long-Term Debt, Net of Current Portion	<u>3,302,757</u>
Total Liabilities	5,366,398
Net Assets (Mission Equity)	<u>3,271,393</u>
Total Liabilities and Net Assets	<u>8,637,791</u>

This is only a summary of certain financial information and is not a complete presentation of Catholic Healthcare West's financial condition. The reader is referred to the complete consolidated financial statements of Catholic Healthcare West and Subordinate Corporations for fiscal year ending June 30, 2006, including the related notes, which can be found along with other, more recent, financial information online at www.chwHEALTH.org/financial_info.

Corporate Members

Fiscal Year 2006

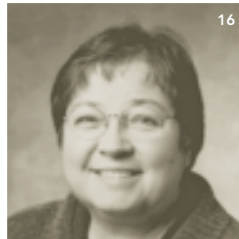
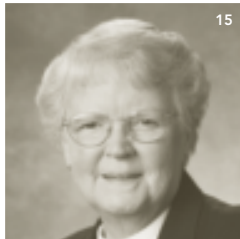
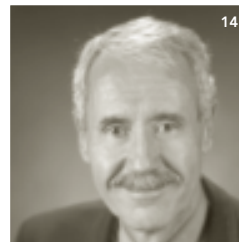


Corporate Members

1. Sheila Browne, RSM
President
Sisters of Mercy of the Americas
Auburn Regional Community
Auburn, CA
2. Judy Cannon, RSM
Institute Integration Team
Sisters of Mercy of the Americas
Burlingame Regional Community
Burlingame, CA
3. Lillian Anne Healy, CCVI
Congregational Leader
Sisters of Charity of the Incarnate Word
Houston, TX
4. Patricia Rayburn, OSF
First Councilor
Sisters of St. Francis of Penance and
Christian Charity
Redwood City, CA
5. Judy Rimbey, OP
General Councilor/Administrator
Adrian Dominican Sisters
Adrian, MI
6. Patricia Simpson, OP
Prioress General
Dominican Sisters of San Rafael
San Rafael, CA
7. Susan Snyder, OP
Prioress
Dominican Sisters of Kenosha, Wisconsin
Kenosha, WI

Board of Directors

Fiscal Year 2006



Board of Directors

1. Jarrett Anderson, Esq.
CHW Board Vice Chair
Partner
Melby & Anderson
Glendale, CA
2. Sheila Browne, RSM
President
Sisters of Mercy of the Americas
Auburn Regional Community
Auburn, CA
3. Judy Cannon, RSM
Institute Integration Team
Sisters of Mercy of the Americas
Burlingame Regional Community
Burlingame, CA
4. Adrienne Crowe
CHW Board Chair
Retired Banking Executive
Sacramento, CA
5. Lloyd H. Dean
President/CEO
Catholic Healthcare West
San Francisco, CA
6. Mark DeMichele
Chairman & CEO
Urban Realty Partners
Coronado, CA
7. James Givens, CFA
Retired Investment Counselor
Glendale, CA
8. Tessie Guillermo
CHW Board Secretary
President/CEO
Community Technology
Foundation of California
San Francisco, CA
9. Lillian Anne Healy, CCVI
Congregational Leader
Sisters of Charity of the
Incarnate Word
Houston, TX
10. Luis R. Marcos, MD
Professor of Psychiatry
New York University
School of Medicine
New York, NY
11. Kenneth Mills, MD
Private Practice
Internal Medicine
San Francisco, CA
12. Patricia Rayburn, OSF
First Councilor
Sisters of St. Francis of Penance
and Christian Charity
Redwood City, CA
13. Judy Rimbey, OP
General Councilor/Administrator
Adrian Dominican Sisters
Adrian, MI
14. José M. Santiago, MD
Chief Medical Officer
Senior Vice President
Carondelet Health Network
Tucson, AZ
15. Patricia Simpson, OP
Prioress General
Dominican Sisters of San Rafael
San Rafael, CA
16. Susan Snyder, OP
Prioress
Dominican Sisters of Kenosha,
Wisconsin
Kenosha, WI

Executive Management Team

Lloyd H. Dean
President/CEO

Michael D. Blaszyk
EVP/Chief Financial Officer

George Bo-Linn, MD
SVP/Chief Medical Officer

Derek F. Covert
SVP/General Counsel

Michael Erne
EVP/Chief Operating Officer

Charles P. Francis
SVP/Chief Strategy Officer

Bernita McTernan
SVP, Sponsorship and Mission Integration

Elizabeth Shih
SVP/Chief Administrative Officer

Ernest H. Urquhart
SVP/Chief Human Resources Officer

John Wray
SVP, Managed Care

Our Sponsors

Sisters of Mercy of the Americas,
Auburn Regional Community,
Auburn, California

Sisters of Mercy of the Americas,
Burlingame Regional Community,
Burlingame, California

Adrian Dominican Sisters,
Adrian, Michigan

Sisters of Charity of the Incarnate Word,
Houston, Texas

Dominican Sisters of San Rafael,
San Rafael, California

Dominican Sisters of Kenosha, Wisconsin,
Kenosha, Wisconsin

Sisters of St. Francis of Penance and
Christian Charity,
Redwood City, California

Our Hospitals and Facilities

System Headquarters

Catholic Healthcare West
185 Berry Street, Suite 300
San Francisco, CA 94107
(415) 438-550

Acute Care Facilities

Arroyo Grande
Community Hospital
345 South Halcyon Road
Arroyo Grande, CA 93420
(805) 489-4261

Bakersfield Memorial
Hospital
420 34th Street
Bakersfield, CA 93301
(661) 327-4647

California Hospital
Medical Center
1401 South Grand Avenue
Los Angeles, CA 90015
(213) 748-2411

Chandler Regional Hospital
475 South Dobson Road
Chandler, AZ 85224
(480) 963-4561

Community Hospital
of San Bernardino
1805 Medical Center Drive
San Bernardino, CA 92411
(909) 887-6333

Dominican Hospital
1555 Soquel Drive
Santa Cruz, CA 95065
(831) 462-7700

French Hospital
Medical Center
1911 Johnson Avenue
San Luis Obispo, CA 93401
(805) 543-5353

Glendale Memorial Hospital
and Health Center
1420 South Central Avenue
Glendale, CA 91204
(818) 502-1900

Marian Medical Center
1400 East Church Street
Santa Maria, CA 93454
(805) 739-3000

Marian Medical Center West
505 East Plaza Drive
Santa Maria, CA 9345
(805) 739-3100

Mark Twain
St. Joseph's Hospital
768 Mountain Ranch Road
San Andreas, CA 95249
(209) 754-3521

Mercy General Hospital
4001 "J" Street
Sacramento, CA 95819
(916) 453-4545

Mercy Gilbert Medical Center
3555 South Val Vista Drive
Gilbert, AZ 85296
(480) 728-8000

Mercy Hospital
2215 Truxtun Avenue
Bakersfield, CA 93301
(661) 632-5000

Mercy Hospital of Folsom
1650 Creekside Drive
Folsom, CA 95630
(916) 983-7400

Mercy Medical Center Merced
Community Campus
301 East 13th Street
Merced, CA 95340
(209) 385-7000

Mercy Medical Center Merced
Dominican Campus
2740 "M" Street
Merced, CA 95340
(209) 384-6444

Mercy Medical Center
Mt. Shasta
914 Pine Street
Mt. Shasta, CA 96067
(530) 926-6111

Mercy Medical Center
Redding
2175 Rosaline Avenue
P.O. Box 496009
Redding, CA 96049
(530) 225-6000

Mercy San Juan
Medical Center
6501 Coyle Avenue
Carmichael, CA 95608
(916) 537-5000

Mercy Southwest Hospital
400 Old River Road
Bakersfield, CA 93311
(661) 663-6223

Methodist Hospital of
Sacramento
7500 Hospital Drive
Sacramento, CA 95823
(916) 423-3000

Northridge Hospital
Medical Center
18300 Roscoe Boulevard
Northridge, CA 91328
(818) 885-8500

Oak Valley Hospital
350 South Oak Avenue
Oakdale, CA 95360
(209) 847-3011

Saint Francis Memorial
Hospital
900 Hyde Street
San Francisco, CA 94109
(415) 353-6000

San Gabriel Valley
Medical Center
438 West Las Tunas Drive
P.O. Box 1507
San Gabriel, CA 91778
(626) 289-5454

Sequoia Hospital
170 Alameda de las Pulgas
Redwood City, CA 94062
(650) 369-5811

Sierra Nevada Memorial
Hospital
155 Glasson Way
Grass Valley, CA 95945
(530) 274-6000

St. Bernardine
Medical Center
2101 North Waterman Avenue
San Bernardino, CA 92404
(909) 883-8711

St. Elizabeth
Community Hospital
2550 Sister Mary
Columba Drive
Red Bluff, CA 96080
(530) 529-8000

St. John's
Pleasant Valley Hospital
2309 Antonio Avenue
Camarillo, CA 93010
(805) 389-5800

St. John's Regional
Medical Center
1600 North Rose Avenue
Oxnard, CA 93030
(805) 988-2500

St. Joseph's
Behavioral Health Center
2510 North California Street
Stockton, CA 95204
(209) 461-2000

St. Joseph's Hospital
and Medical Center
350 West Thomas Road
Phoenix, AZ 85013
(602) 406-3000

St. Joseph's Medical Center
1800 North California Street
Stockton, CA 95204
(209) 943-2000

St. Mary Medical Center
1050 Linden Avenue
Long Beach, CA 90813
(562) 491-9000

St. Mary's Medical Center
450 Stanyan Street
San Francisco, CA 94117
(415) 668-1000

Saint Mary's
Regional Medical Center
235 West Sixth Street
Reno, NV 89503
(775) 770-3000

St. Rose Dominican Hospitals
Rose de Lima Campus
102 East Lake Mead Drive
Henderson, NV 89015
(702) 616-5000

St. Rose Dominican Hospitals
San Martin Campus
8280 West Warm Springs Road
Las Vegas, NV 89113
(702) 492-8000

St. Rose Dominican Hospitals
Siena Campus
3001 St. Rose Parkway
Henderson, NV 89052
(702) 616-5000

Woodland Healthcare
1325 Cottonwood Street
Woodland, CA 95695
(530) 662-3961

Non-Acute Care Affiliation Information

CHW Medical Foundation
3160 Folsom Boulevard
Sacramento, CA 95816
(916) 733-3333

Our Mission, Vision, and Values

Our Mission

Catholic Healthcare West and our Sponsoring Congregations are committed to furthering the healing ministry of Jesus. We dedicate our resources to:

- delivering compassionate, high-quality, affordable health services;
- serving and advocating for our sisters and brothers who are poor and disenfranchised; and
- partnering with others in the community to improve the quality of life.

Our Vision

A growing and diversified health care ministry distinguished by excellent quality and committed to expanding access to those in need.

Our Values

Catholic Healthcare West is committed to providing high-quality, affordable health care to the communities we serve. Above all else we value:

Dignity – Respecting the inherent value and worth of each person.

Collaboration – Working together with people who support common values and vision to achieve shared goals.

Justice – Advocating for social change and acting in ways that promote respect for all persons and demonstrate compassion for our sisters and brothers who are powerless.

Stewardship – Cultivating the resources entrusted to us to promote healing and wholeness.

Excellence – Exceeding expectations through teamwork and innovation.



Sister Diane Grassilli, RSM
1949~2006

*Dedicated to the memory of Sister Diane Grassilli, RSM,
whose love, intellect, leadership, and compassion lives on through the
ministry and people of Catholic Healthcare West*



“Let me tell you what I want for us as an organization, but more importantly, what I want for us as a community where each of us is important and together we are stronger.

I want us to use the voice we have found 20 years after our beginning. I want us to speak clearly for those who cannot yet speak for themselves, for those who are on the margins of our communities, who can’t get to our door, and if they do, don’t have the means to cross the threshold without jeopardizing the little they have.

I want us to model for our colleagues how to care for our patients and care for our earth.

I want us to recognize our core values in every program developed on our floors, in every discussion heard in our administrative suites and in every decision made at boardroom tables.

I want us to give as much attention to how we do things as we do to doing them.

I want us to treasure one another for the gifts we bring to our work, for the commitment that keeps us climbing to new heights, for the humor that lightens our step.

I want us to welcome all who seek comfort and healing from our gifted hands and to have their spirit touched as well. And when the doors of the next world begin to open before them, I want us to stand along side and usher them into the presence of their God.”

~ Excerpted from Sister Diane’s keynote address to Mission leaders in 2005