



CATALINA ISLAND
MEDICAL CENTER

COMMUNITY HEALTH NEEDS ASSESSMENT

Clare Kelley, Senior Consultant

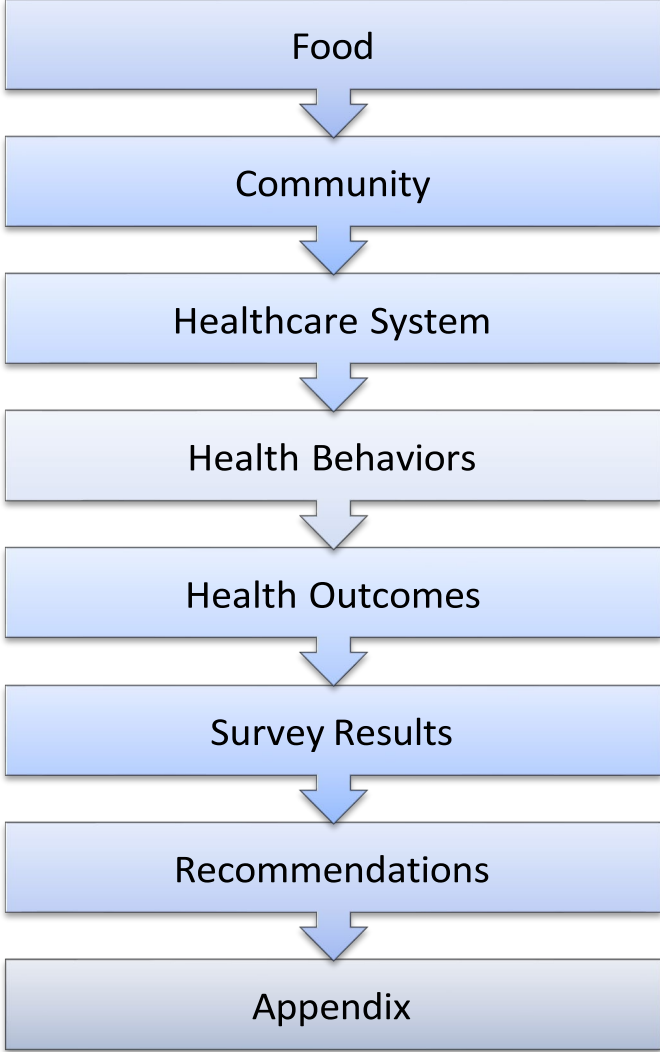
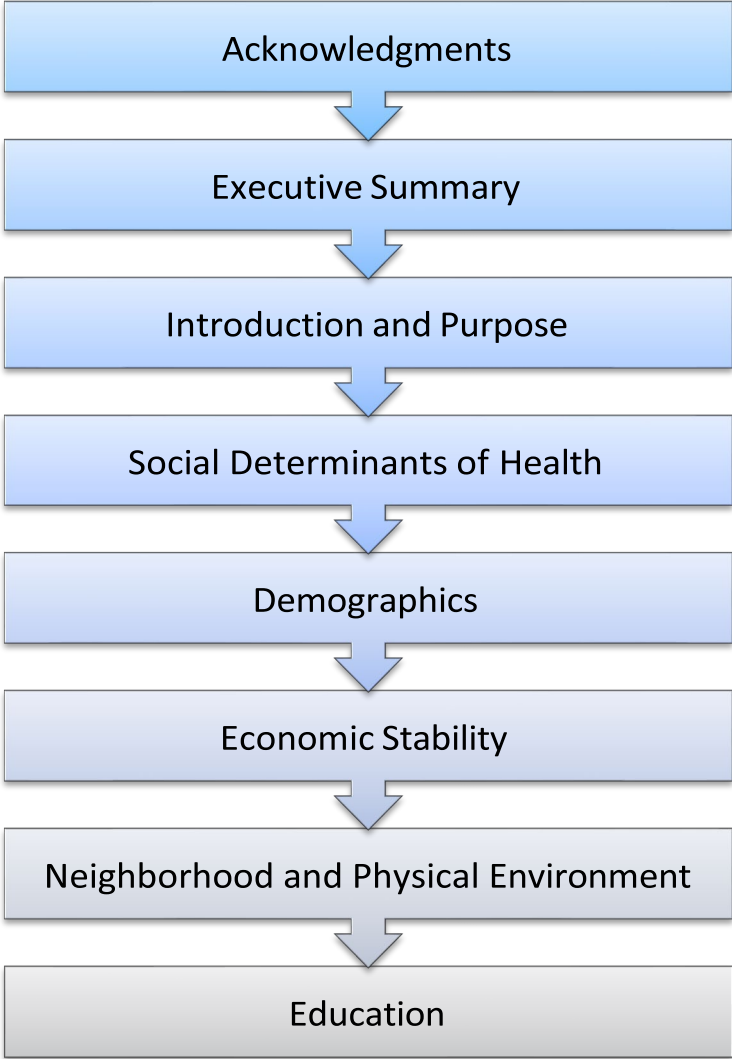
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STROUDWATER

Table of Contents



Acknowledgements

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Executive Summary - Overview

- Catalina Island Medical Center (“CIMC”) engaged Stroudwater Associates to assist with the development of their 2023 Community Health Needs Assessment (“CHNA”). The hospital CHNA is a document required by Section 501 (r) (3) of the Internal Revenue Service (“IRS”) to be developed every three years. Once this CHNA is adopted, CIMC will then develop an implementation strategy to address the key community health needs identified.
- To complete this analysis, CIMC and Stroudwater Associates completed interviews with 12 local health leaders, representing a broad cross-section of Catalina Island, and received online survey responses from 69 community members.
- Data sources, inclusive of Love Catalina Island Tourism, Centers for Medicare Services (CMS), Community Commons, County Health Rankings, and Merative, were combined with internal CIMC data to inform the analysis.



Executive Summary – Community

- Catalina Island Medical Center (“CIMC”) serves the population of Avalon, California, 30.5 miles off the coast of Long Beach California.
- Avalon currently represents approximately 4,400 year-round residents and is anticipated to grow by 2.6% over the next five years. The population is aging, with expected growth of 16.3% in the 65+ age cohort over the next five years. However, the majority of the population will be between the ages of 18 and 64.
- In addition to the projected population growth of the service area, Catalina Island can see on average 85,000 visitors per month based on 14 months of data or over 1,000,000 tourists per year.
- Catalina Island has a strong Hispanic/Latino population with over 47% of the population speaking Spanish at home.



Executive Summary – Social Determinants of Health

- Catalina Island Medical Center is the only acute care hospital on the island. To access certain specialty services patients must commute by ferry to the mainland. Community health is driven by many elements outside of the physical healthcare system, including:

Social Determinants	Catalina Island Highlights
Demographics	Growing year-round population that is 58% Hispanic/Latino and has a higher percentage than average of veterans.
Economic Stability	Larger total population living at or below 50% of the federal poverty level than county, state and national averages. About 70% of Catalina Island’s population is employed, with many individuals having multiple jobs.
Neighborhood and Physical Environment	Not enough affordable housing as many vacant houses are second homes or vacation rentals.
Education	Has over twice the county and state averages of homeless students, and over three times the national average. The chronic absence rate for children from school is high.
Food	Catalina Island residents have adequate access to food, but it may not be affordable.
Community	Although the actual numbers are small given the population, Catalina Island has a higher rate of rape incidences and drug claims than county or state averages.
Health System	Catalina Island has available mental and dental health providers, and for primary care, Catalina Island is above average compared to county, state, and national averages.
Health Behaviors	Larger proportion of residents who are prone to behaviors that are linked to greater incidences of chronic disease.
Health Outcomes	Higher cancer incidence rate and depression rate than county averages. Must maintain and enhance access to primary care providers and specialty care providers as well as care coordination given the higher rate of chronic illness compared to county averages.



Executive Summary – Recommendations

- While IRS regulations charge CIMC with developing this Community Health Needs Assessment, addressing the needs of the community will involve many organizations outside of CIMC. Addressing the most prominent health needs on Catalina Island based on the interviews, on-line surveys, and analysis of data should include in addition to existing action plan items outlined in the CIMC strategic plan:

Recommendation	CIMC Specific Steps
Mental Health	Continue to promote the availability of licensed social workers and collaborate with other providers to publicize mental health services available on Catalina Island.
	Work to break down cultural barriers to increase patient access to provider services.
	Continue to utilize and provide telepsych services.
	Educate community on services available and financial options available for services.
Housing	Collaborate with community organizations to increase availability of long-term affordable rentals.
	Collaborate with organizations to increase assisted housing units on Catalina Island.



Executive Summary – Recommendations cont.

Recommendation	CIMC Specific Steps
Specialty Access	Create marketing campaigns around the addition of new providers and services in the community in both Spanish and English.
Care Coordination and Education	Look at opportunities for greater coordination of care for patients between the hospital, and other health organizations in the community that can contribute substance abuse support, mental health support, consistent follow up treatment, and housing.
	Further education on health services available and healthy eating behaviors, such as nutrition services. Publicize services through primary care physicians and social media.





INTRODUCTION AND PURPOSE

CHNA Overview

Definition

- A Community Health Needs Assessment (“CHNA”) is a process to evaluate the health needs of a community or specific populations within a community and use the findings to address those needs and create improvement and change.

Process

- CHNAs are informed by primary and secondary data sources and are designed to be collaborative. Primary data sources used in this CHNA include a community survey completed by 69 people and in-person interviews with 12 community stakeholders. Secondary data sources include public, proprietary, and internal CIMC data. The survey, interview, and data are compiled into a public report that identifies priorities for the community to address.

Impact

- The collaborative process of the CHNA, and the resulting report and its list of actionable priorities, help inform the attention and strategy of the community and Catalina Island Medical Center, with the goal of creating a more effective, focused, and equitable healthcare delivery system.



CHNA Process Details

Primary Data Sources

Stroudwater Associates, on behalf of CIMC, created a 36-question online survey which was distributed among the Catalina Island residents through posts on social media, the CIMC website, word of mouth, and a marketing campaign run by CIMC. Surveys were available in both English and Spanish. The survey was open for responses from April 21st, 2023 through May 22nd, 2023. At the close of the survey, 69 community members had responded.

In addition, CIMC identified 12 people for in-person interviews with Stroudwater. These interviewees included community leaders, city council members, public safety, board members, and local business owners.

Secondary Data Sources

Stroudwater compiled data on the health status of Catalina Island through public data repositories including Community Commons, County Health Rankings, CMS, and Love Catalina Island Tourism Authority. Proprietary secondary data sources include Merative (formally IBM-Watson Health Data). Some data statistics were not able to be reported at the zip code level.

Reporting

Stroudwater submitted a draft report to CIMC representatives on May 31st, 2023. A final report was presented to CIMC Leadership and was released to the public in June of 2023.



A photograph of a male doctor in a white lab coat using a stethoscope to examine the back of a female patient in a yellow top. The scene is set in a clinical or hospital environment, with anatomical charts visible in the background. A semi-transparent white banner is overlaid across the middle of the image, containing the text 'SOCIAL DETERMINANTS OF HEALTH' in bold, dark blue, uppercase letters.

SOCIAL DETERMINANTS OF HEALTH

Social Determinants of Health

The social determinants of health exemplify how multiple factors in a community can impact overall health including general well-being and health outcomes. For the purpose of this CHNA, statistics were examined within each section in concert with possible health implications for the community.



Demographics



Economic Stability



Neighborhood and Physical Environment



Education



Food



Community



Healthcare System



Health Behaviors



Health Outcomes





DEMOGRAPHICS





Demographics

Demographics includes the geography where people live, the trends in the number of people that live there, the racial/ethnic makeup of the people, their ages, and any special characteristics or circumstances of the population. The following statistics were analyzed for Catalina Island.

- Service area
- Population growth/geographic mobility
- Population Growth by Age
- Population Growth of Tourism
- Population by race/ethnicity
- Veteran population
- Disability population

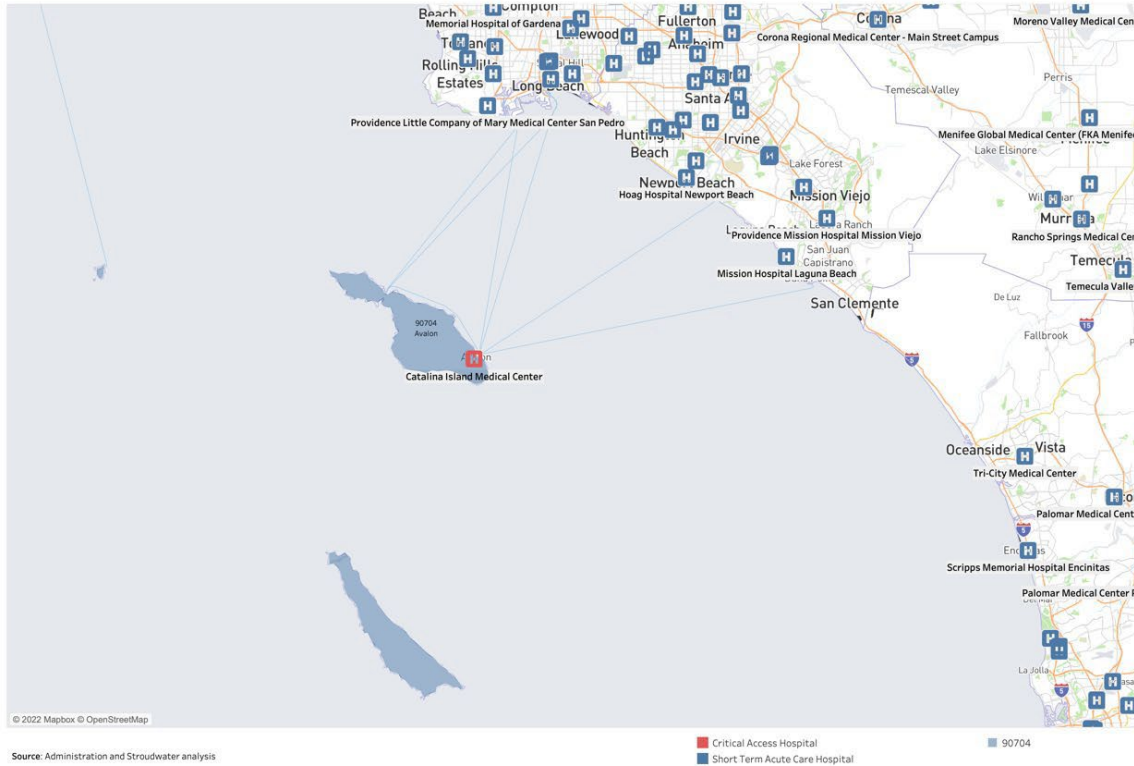
Key findings include:

Statistic Analyzed	Key Findings
Population Growth	Catalina Island is projected to grow by 2.6% in the next five years. Almost all age groups are part of this growth, but it is highest among the 65+ cohort.
Population Growth of Tourism	Catalina Island experiences an average of 85,000 tourists per month with some months being much higher. Large population swings can lead to increased use of emergency services, and exacerbate the affordable housing crises on the island.
Race/Ethnicity	58% of the Catalina Island population is Hispanic/Latino and 47% of the population speaks Spanish at home. It is critical that bilingual services continue to be available on the island.
Veterans and Disabled	Catalina Island has a higher-than-average percentage of residents who are veterans.





Service Area



Source: Administration and Stroudwater analysis

Source: Merative

Catalina Island is one of California's Channel Islands and lies 30.5 miles off the coast of Long Beach California. The island is 76 square miles, but 88% of the island remains in a conservancy trust and is protected from development.

Catalina Island Medical Center is the only hospital on the island and serves the community of Avalon (zip code 90704) which is considered part of Los Angeles County.





Population Growth

The current population in Avalon is **4,400** year-round residents and is estimated to increase by 2.6%, or 115 individuals in the next five years to **4,515**.

5-Year Change (%) by ZIP Code



ZIP Name	ZIP Code	Current	5-Year	# Change	% Change
Avalon	90704	4,400	4,515	115	2.6%

Source: Merative





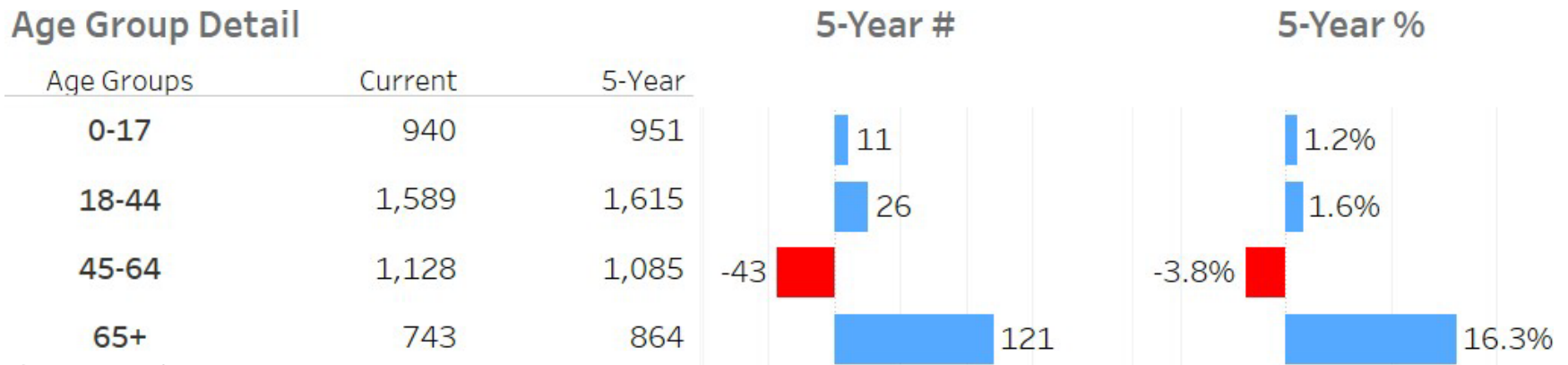
Population Growth by Age

Nearly all age cohorts in Avalon are expected to grow, except for ages 45-64. The 65+ cohort is expected to have the largest percentage of growth in the next 5 years at 16.3% (121 individuals).

The 65+ age cohort makes up 16.8% of the current year-round population, and with the growth will compose 19.1% of the population in five years. It has been noted, however, that this cohort may include some second home owners who are also registered to vote on Catalina.

However, the 18 – 44 and the declining 45 – 64 age cohorts will remain larger than the 65+ age cohort in the next five years composing 61.8% of the current year-round population, and 59.8% of the population in five years.

Typically, the 18 – 44 and 45 – 64 age cohorts have higher rates of commercial payers, while the 65+ age cohort is largely Medicare.



Source: Merative





Population Growth of Tourism

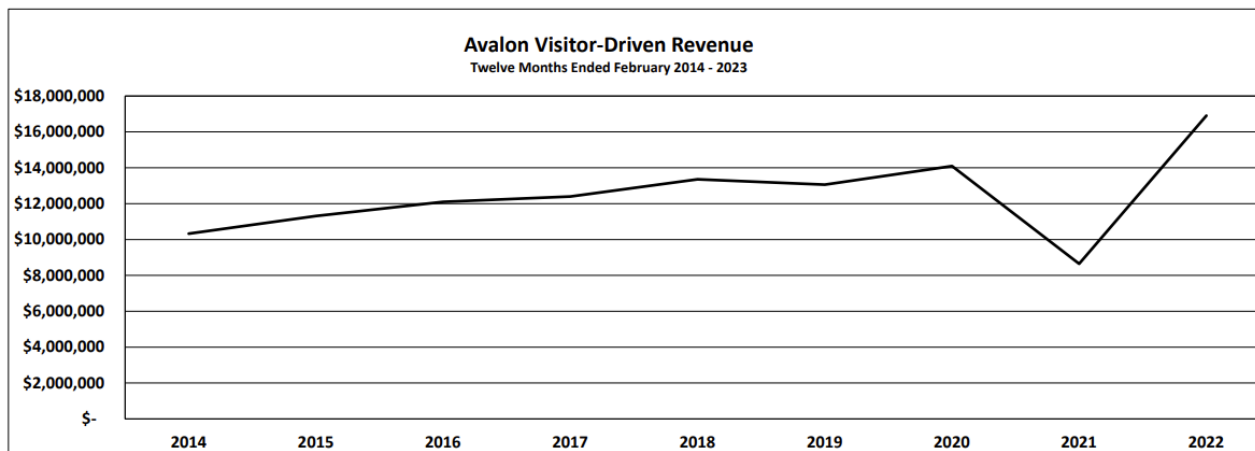
Catalina Island sees on average 85,000 visitors per month based on 14 months of data. In 2022 Catalina Island saw \$16M in revenue due to tourism.

Tourism can lead to enhanced use of healthcare emergency services including urgent care and the emergency department.

Catalina Island Visitor Counts

Record Type	Year Month	2023												Totals	
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec		
Cross Channel		20,901	25,798												46,699
Cruise		17,865	27,166												45,031
Private Boat		756	1,124												1,880
Private Aircraft		1,062	1,374												2,436
Helicopter		853	851												1,704
All Arrivals		41,437	56,313												97,750

Record Type	Year Month	2022												Totals
		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Cross Channel		25,269	36,540	55,368	69,111	67,797	86,814	108,376	96,382	70,656	55,475	39,400	30,714	741,902
Cruise		9,654	7,472	19,631	13,921	21,850	28,963	28,440	33,876	14,837	25,232	25,676	29,393	258,945
Private Boat		1,544	1,092	2,340	3,468	4,732	6,408	9,520	10,332	7,724	5,276	2,128	1,136	55,700
Private Aircraft		1,767	1,947	1,737	1,584	1,530	1,863	2,055	2,283	1,614	1,386	1,770	1,278	20,814
Helicopter		987	1,065	1,671	1,781	1,781	1,894	2,055	1,961	1,435	1,154	833	565	17,182
All Arrivals		39,221	48,116	80,747	89,865	97,690	125,942	150,446	144,834	96,266	88,523	69,807	63,086	1,094,543



Source: Love Catalina Island. (n.d.). *Catalina Island Visitor Statistics: Visit Catalina Island*. Catalina Island Chamber of Commerce & Visitors Bureau. <https://www.lovecatalina.com/community-information/visitor-statistics/#:~:text=Catalina%20Island%20welcomes%20over%201,in%20Avalon%20are%20tracked%20below.>

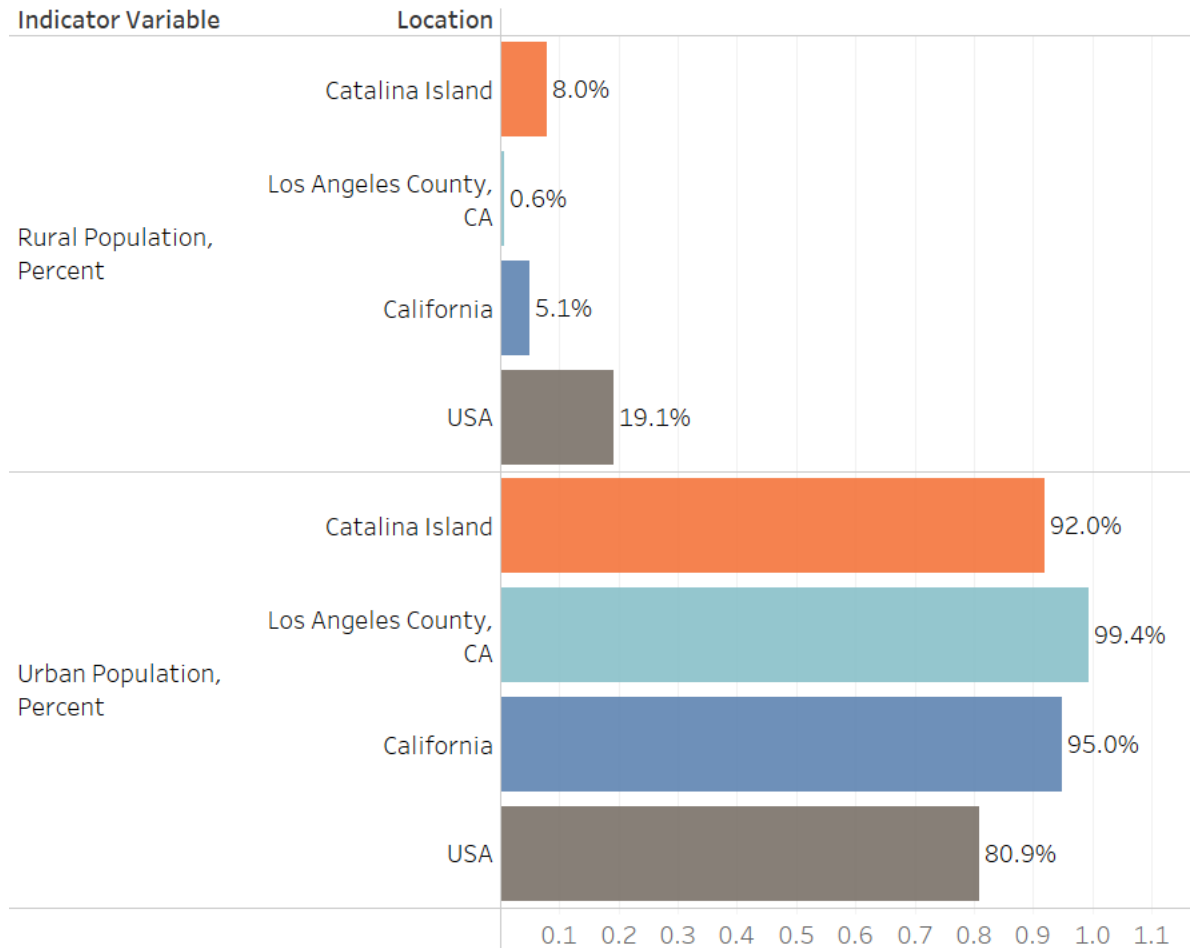


Urban and Rural Populations

Compared to LA County and California averages, Catalina Island is less urban and more rural in character.

As Catalina is an island, it presents a challenge for businesses to recruit and retain employees. This challenge extends to recruiting and retaining providers to meet demand and requires long commutes by patients seeking specialist care.

Urban and Rural Population



Data Source: US Census Bureau, Decennial Census. 2010. Source geography: Tract





Population by Ethnicity

Most Catalina Island residents are white or Hispanic/Latino. The island has a lower percentage of Black, Native American, Asian, and Native Hawaiian or Pacific Islander compared to LA County and California averages.

Additionally, 47% of the population speaks Spanish at home.

It is critical that Catalina Island Medical Center continue to provide bilingual services where necessary and translators are readily available.

Languages Spoken at Home

Total Population	4,148	% of Total
English	2,125	51%
Spanish	1,929	47%
Indo-European	27	1%
Asia-Pacific	60	1%
Other	7	0%

Race/Ethnicity

Total Population	4,407	% of Total
White	2,399	54%
Black	26	1%
Amer Indian Esk Aleut	26	1%
Asian	86	2%
Hawaiian Pacific	18	0%
Other Race Alone	1,657	38%
Two More Races	195	4%
Hisp/Latino	2,542	58%
Not Hisp/Latino	1,865	42%

“Many Hispanic/Latino individuals wait on treatment and go to Mexico for treatment during the holidays.”

-Community Stakeholder

Source: Merative



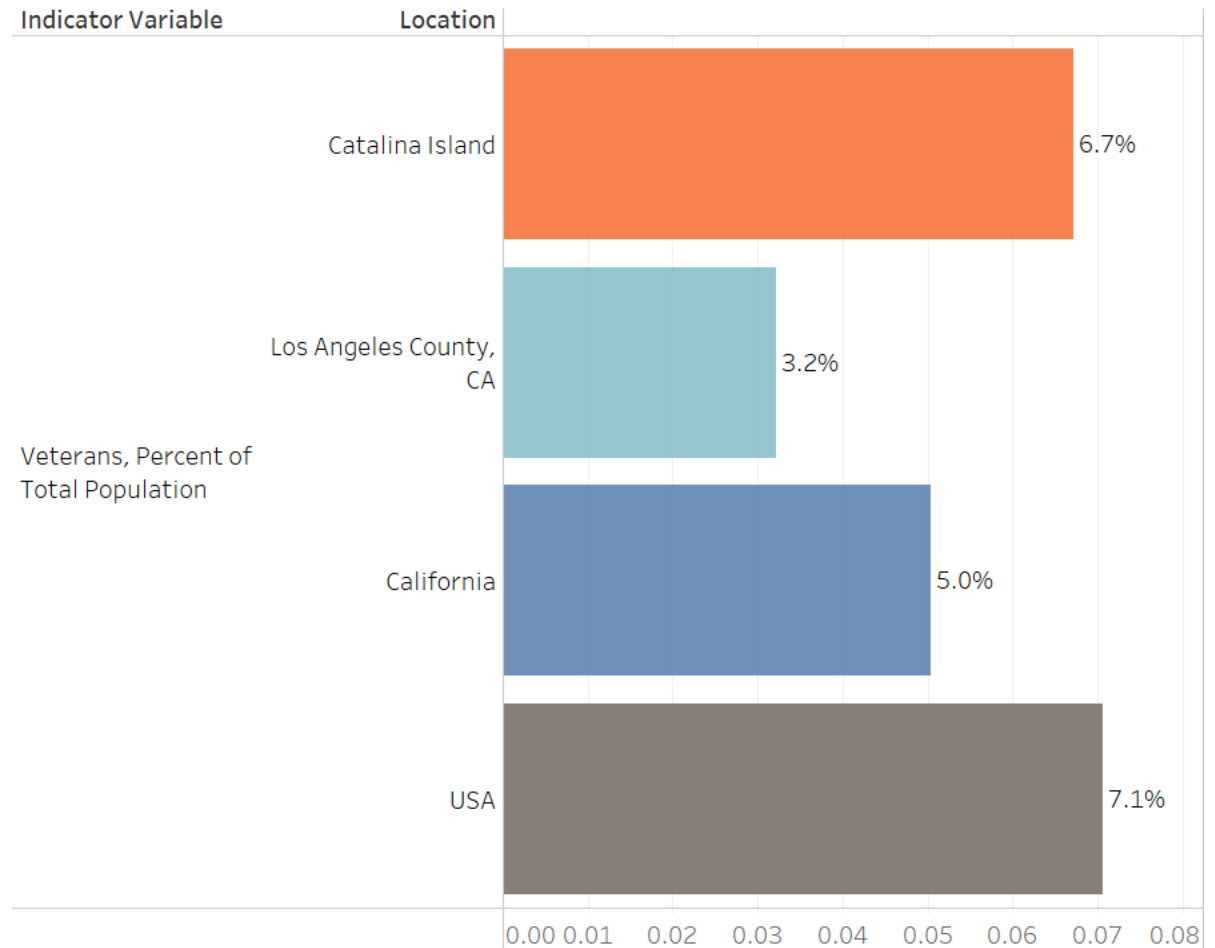


Veteran Population

Catalina Island has a much higher percentage of residents who are armed services veterans compared to state averages.

This population can present a unique set of healthcare needs for a population.

Veteran Population



Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: Tract

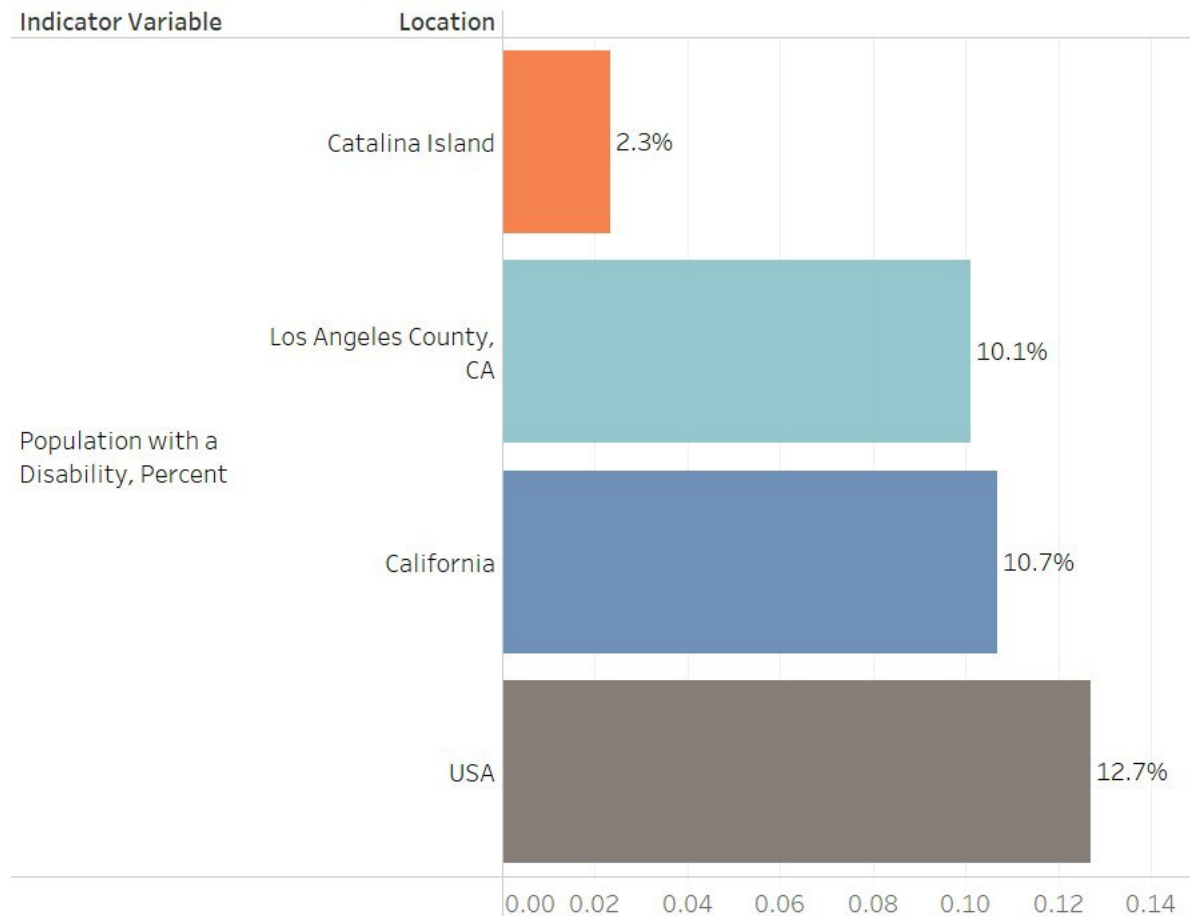




Disability Populations

Related to, but not independent of, the veteran population is the percentage of residents with any disability. Only 2.3% of the Catalina Island population has a disability, compared to 10.7% for California, and 12.6% for the U.S.

Population with Any Disability



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: Tract





ECONOMIC STABILITY





Economic Stability

Economic stability examines issues pertaining to income, poverty and unemployment within a community. Economic stability directly impacts the health of an individual or community and lower-income communities often are at a greater risk for poor health outcomes. The following statistics were analyzed for Catalina Island.

- Income Level
- Poverty level
 - Adult Population
 - Children
- Insurance
- Employment rate

Key findings include:

Statistic Analyzed	Key Findings
Income Level	The service area has a higher percentage of families making over \$75,000 compared to county, state, and national averages but lower average household income than county and state averages.
Poverty Level	The service area has a larger total population living at or below 50% of the federal poverty level than county, state and national averages.
Insurance	43% of the current population is covered by Medicare or Medicaid and is expected to grow 2.9 percentage points to 45.9% by 2032.
Employment	About 70% of Catalina Island’s population is employed, with many individuals having multiple jobs to generate adequate income.





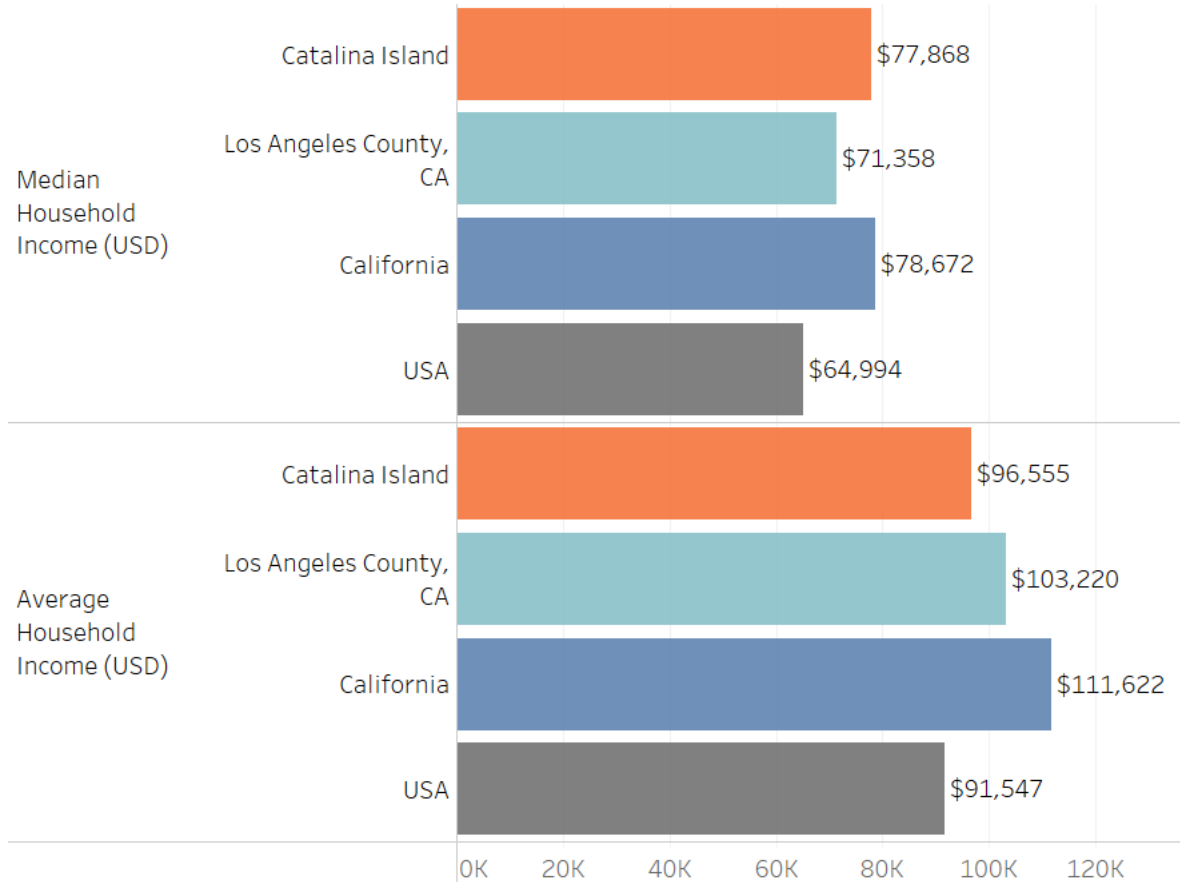
Income Level

Median family income on Catalina Island is 9.1% higher than that of Los Angeles County, 1.0% lower than the state of California, and 19.8% higher than the national.

Average family income is 6.9% lower than Los Angeles County, 15.6% lower than the state average, and 5.5% higher than the national.

The service area has a higher percentage of families making over \$75,000 compared to county, state, and national averages but lower average household income than county and state averages.

Income Level



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: Tract





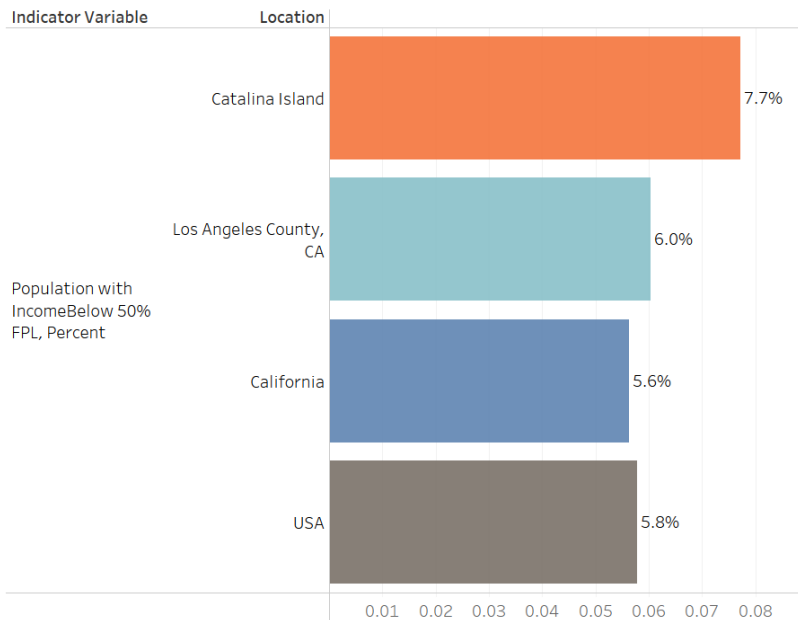
Poverty Level – Total Population

The service area has a larger total population living at or below 50% of the federal poverty level than county, state, and national averages.

However, Catalina Island has a smaller total population living at or below 100% of the federal poverty level than county, state and national averages.

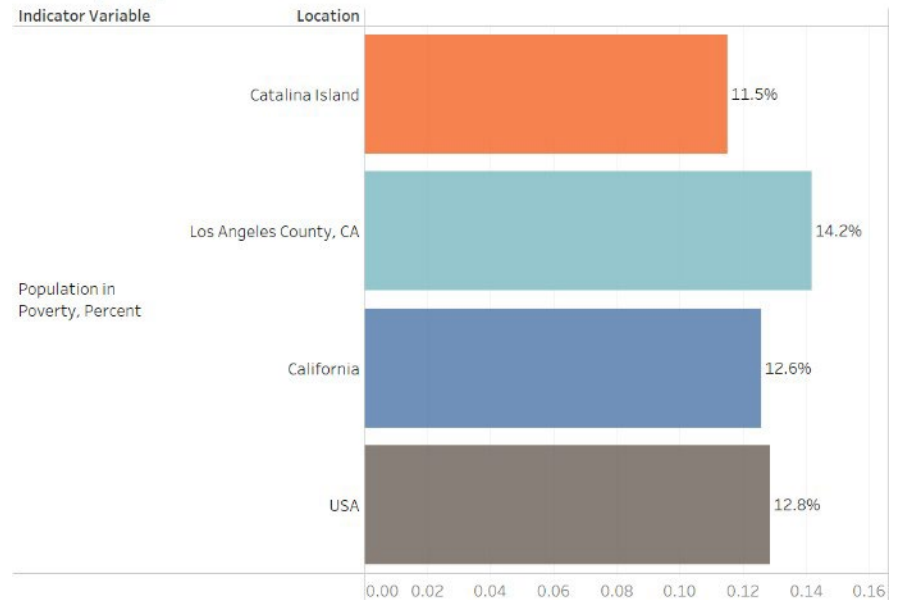
These populations must have access to healthcare throughout the county and public health options available to them.

Poverty - Population Below 50% FPL



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract

Poverty - Population Below 100% FPL



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract



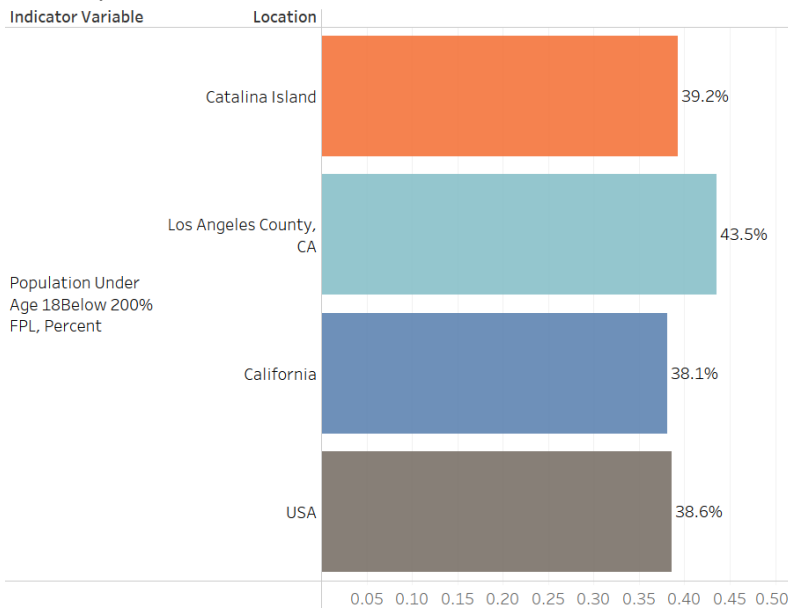


Poverty Level - Children

Nearly 40% of children in the service area live at or below 200% below the federal poverty level, which is lower than county, but higher than state and national averages. Catalina Island has a slightly lower than state and national average of children living 100% below the federal poverty level.

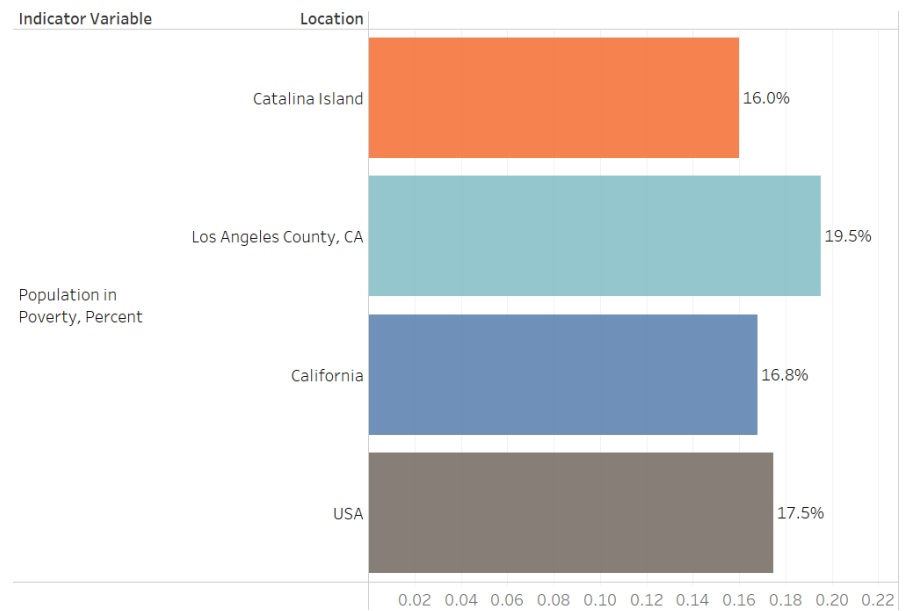
Poverty is one barrier to proper healthcare as it can prevent access to certain health services and healthy food.

Poverty – Children Below 200% FPL



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract

Poverty - Children Below 100% FPL



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract



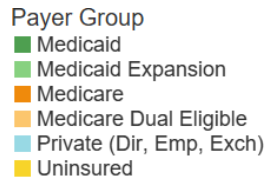


Insurance

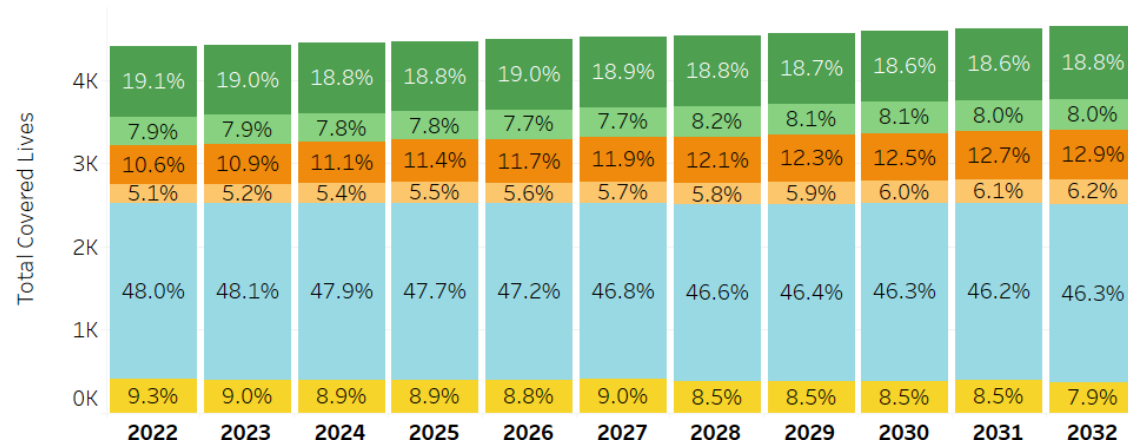
The percentage of lives covered by Medicare and Medicaid in Avalon is 43% (2023) and is the only payor group expected to increase by 2.9 percentage points to 45.9% by 2032, while private insurance is expected to decline by 1.8 percentage points from 48.1% in 2023 to 46.3% in 2032. The uninsured population is projected to decrease from 1.1 percentage points from 9.0% to 7.9%.

Total Covered Lives by Payer Category

Payer Group	Payer Category	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032
Medicaid	Medicaid	839	839	837	837	852	851	851	854	854	857	873
Medicaid Expansion	Medicaid Expansion	348	348	348	347	347	347	372	372	371	370	369
Medicare	Medicare	466	480	494	509	524	539	550	562	574	586	599
Medicare Dual Eligible	Dual Eligible	225	232	238	244	251	258	263	268	274	279	286
Private (Dir, Emp, Exch)	Private Direct	299	298	297	298	296	295	294	295	307	308	320
	Private Employer Sponsored	1,697	1,694	1,699	1,699	1,691	1,686	1,689	1,691	1,687	1,690	1,681
	Private Exchanges	117	132	132	132	132	132	132	131	131	131	145
Uninsured	Uninsured	408	397	396	397	396	407	386	388	388	390	366
Grand Total		4,400	4,419	4,440	4,463	4,488	4,515	4,538	4,561	4,586	4,612	4,639



Percentage of Covered Lives by Payer Category



Source: Merative



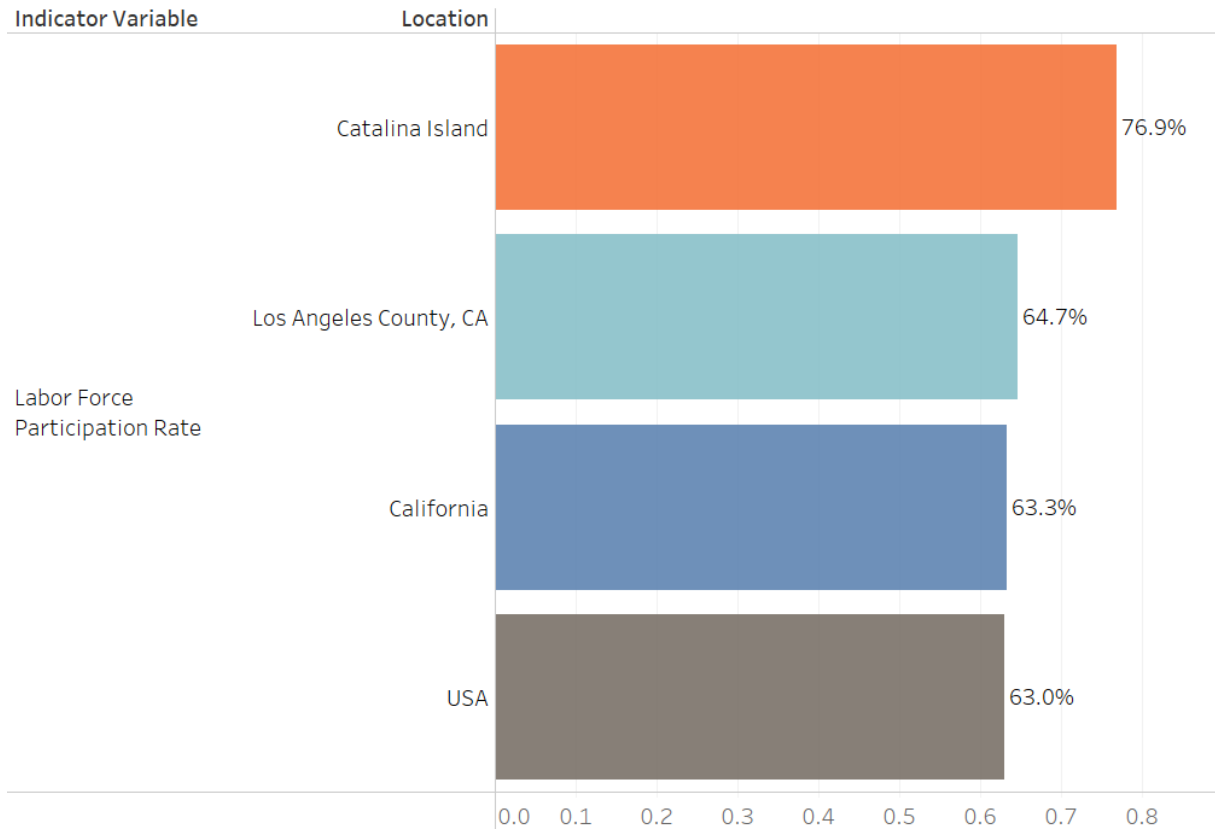
Employment/Labor Force

The employment rate of Catalina Island is over 10 percentage points higher than county, state, and national averages.

Stakeholder interviews indicate many individuals have multiple jobs to maintain an adequate household income.

“Folks are working around the clock with 2 – 4 jobs to be able to live on the island.”
-Community Stakeholder

Employment - Labor Force Participation Rate



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: County



A young child with curly hair, wearing a light blue t-shirt and red pants, is kneeling on a wooden floor. They are painting a large, vibrant rainbow on a window pane. The rainbow is composed of thick, brushstrokes in red, orange, yellow, green, and blue. The child is holding a paintbrush and is in the process of painting the red section. In the foreground, there is a wooden table with various art supplies, including several small jars of paint in different colors (red, blue, green, yellow, white), a larger jar of white paint, a red cloth, and a paintbrush. To the left of the table is a potted plant in a grey pot. The background shows a window with a view of a cityscape and a plant on the sill. The overall scene is bright and creative.

NEIGHBORHOOD AND PHYSICAL ENVIRONMENT





Neighborhood and Physical Environment

Where individuals live and how they access care are critical to the overall health of a community. Insufficient housing leads directly to poor health outcomes as it can expose individuals to harsh environmental elements. Public transportation availability enables the community to access not only health services but proper food sources as well. The following statistics were examined for Catalina Island:

- Housing Vacancy
- Assisted Housing
- Housing Costs and Value
- Housing Quality and Cost Burdens
- Social Vulnerability

Key findings include:

Statistic Analyzed	Key Findings
Housing Vacancy	Catalina Island has over 5 times the LA County average for vacant housing compared to close to 3 times the national average.
Assisted Housing	Catalina Island has fewer U.S Department of Housing and Urban Development assisted housing units than county, state and national averages.
Housing Costs and Value	Average monthly owner costs are 81% higher than state averages and 68% higher than county averages. Average household value on the island is 73% higher than the state average, and 53% higher than county averages.
Housing Structure and Cost Burdens	Housing on Catalina Island is an issue for many full-time working residents, especially single-parent households. The number of cost-burdened households will continue to rise as interest rates increase, and additional housing on the island is purchased by second homeowners or used for short-term rentals.
Social Vulnerability	The population of Catalina Island is considered more socially vulnerable than state or national averages.





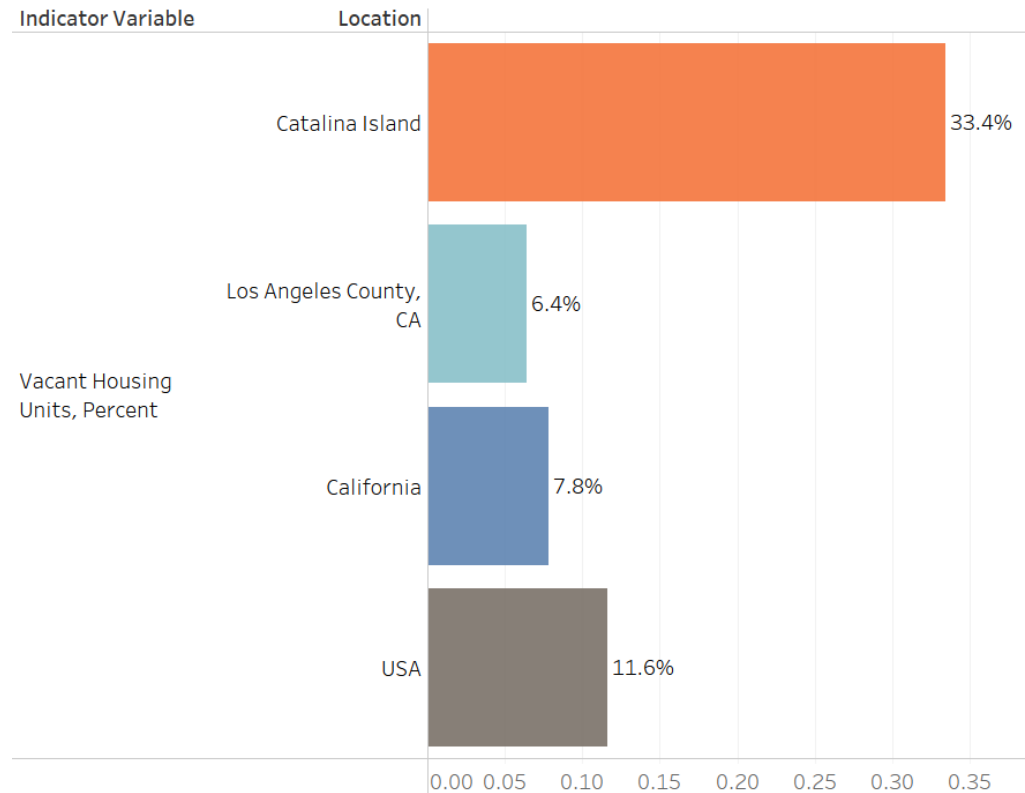
Housing Vacancy

Catalina Island has over 5 times the LA County average for vacant housing compared to close to 3 times the national average.

Currently, many vacant housing units are being used as vacation rentals, or second homes due to Catalina Island being a vacation destination.

Too many vacation rentals and second homes leaves less housing available for families and individuals who live and work on Catalina Island full-time.

Vacancy (ACS)



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract



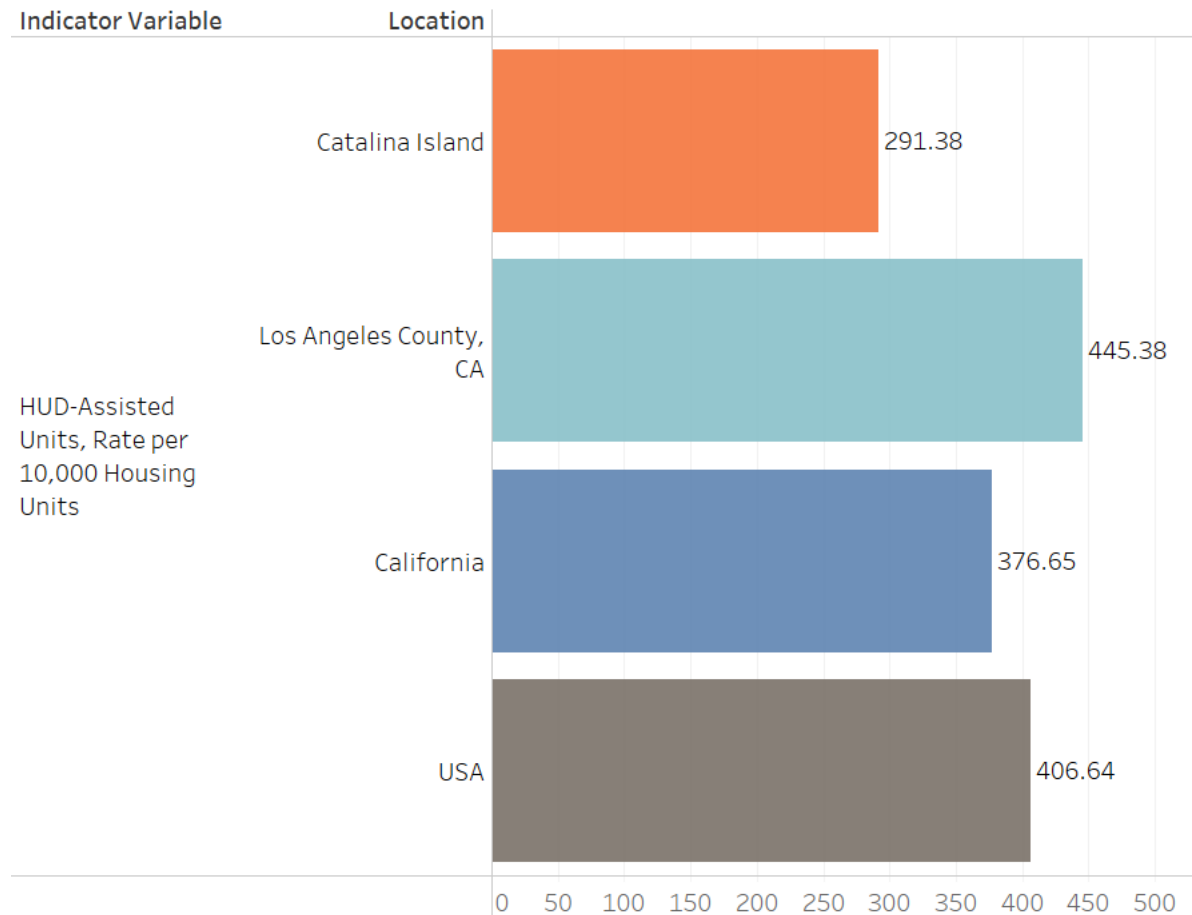


Assisted Housing

Catalina Island has fewer U.S. Department of Housing and Urban Development-assisted housing units than the county, state, and national averages.

Less affordable housing can cause some households to have multiple families living under one roof and overcrowding of units.

Affordable Housing - Assisted Housing Units



Note: This indicator is compared to the state average. Data Source: US Department of Housing and Urban Development. 2021. Source geography: County



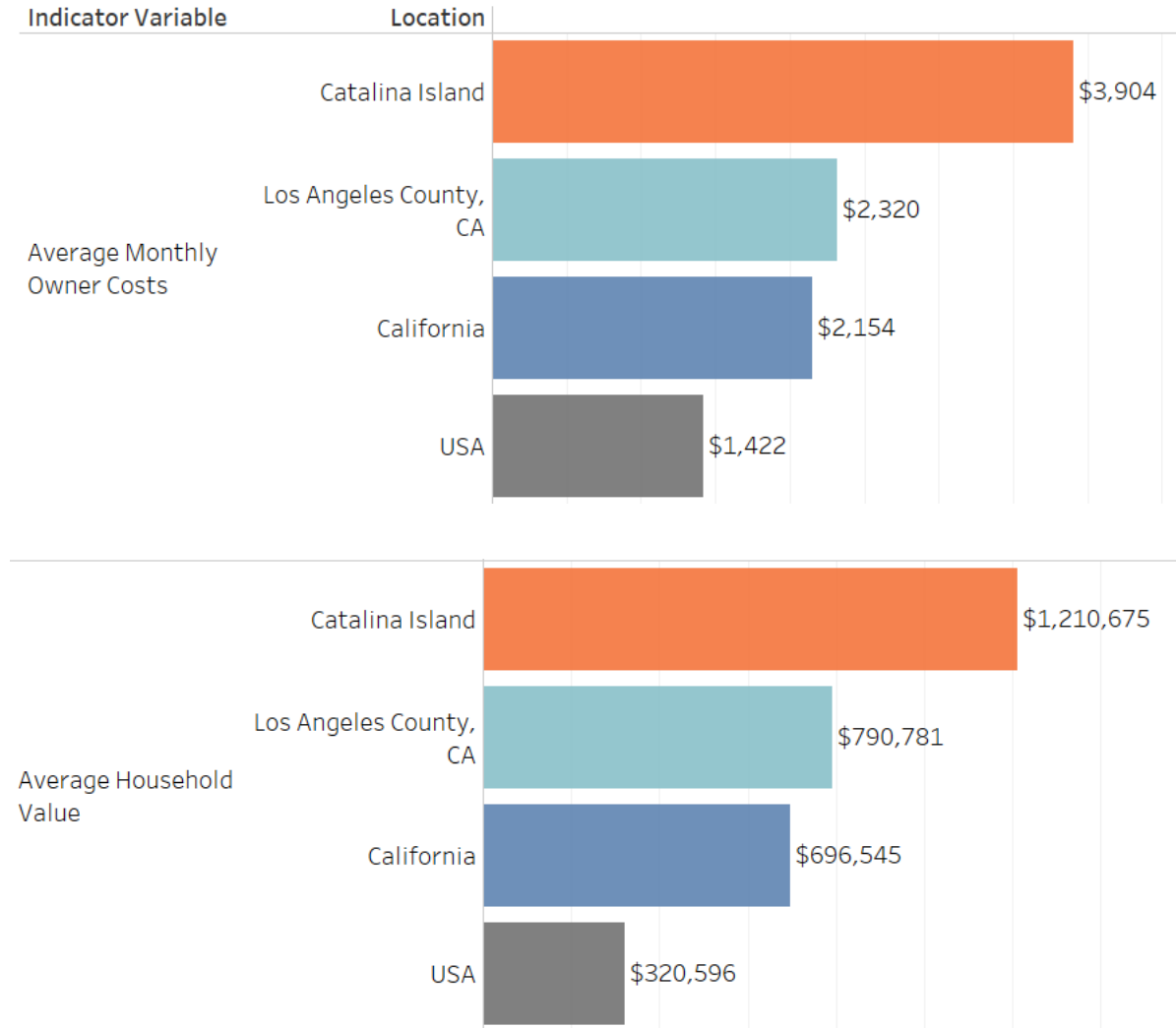


Housing Costs and Value

Affordable housing is an issue on Catalina Island. Many of the homes in the area are second homes, driving the real estate market upwards and out of a reasonable price range for working members of the community.

Average monthly owner costs are 81% higher than state averages and 68% higher than county averages. The average household value on the island is 73% higher than the state average, and 53% higher than county averages.

Affordable housing is a key issue when it comes to the recruitment of new health professionals to the area, including clinical support staff, advanced practice providers, and physicians.



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract





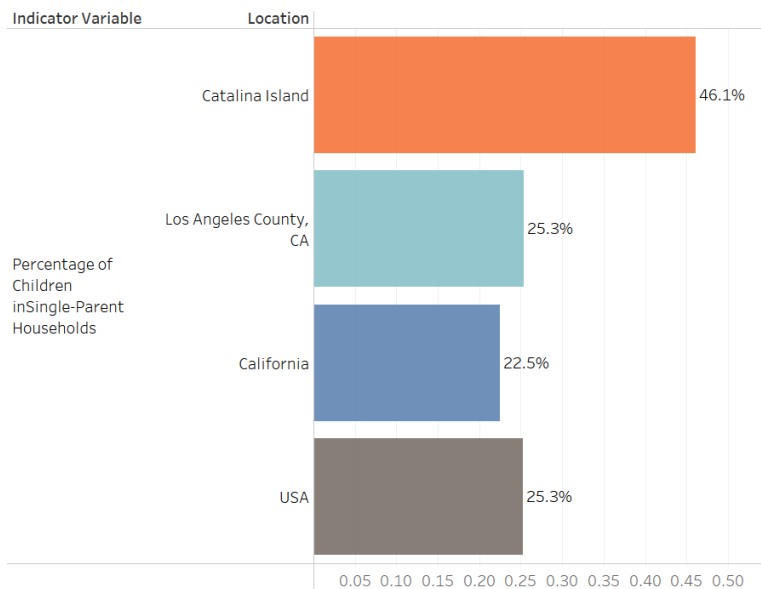
Housing Structure and Cost Burden

46% of children on Catalina Island are in single-parent households, which is 82% higher than the county and national average, and 104% higher than the state average.

Additionally, the cost burden for households on Catalina Island is higher than county, state, and national averages at 27.2%. As defined by the U.S Census Bureau houses are cost burdened if more than 30% of income is spent on rent, mortgage, or housing needs.

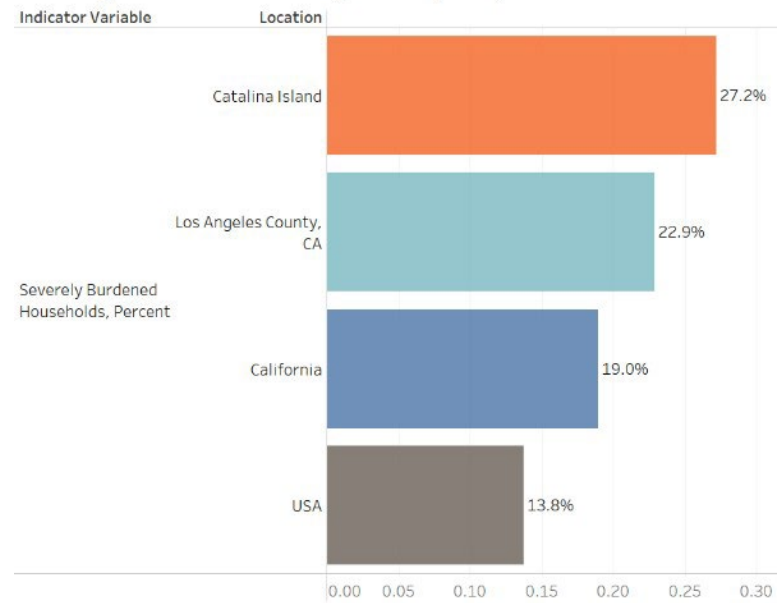
Housing on Catalina Island is an issue for many full-time working residents, especially single-parent households. The number of cost-burdened households will continue to rise as interest rates increase, and additional housing on the island is purchased by second homeowners or used for short-term rentals.

Household Structure - Single-Parent Households



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract

Housing Costs - Cost Burden, Severe (50%)



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract





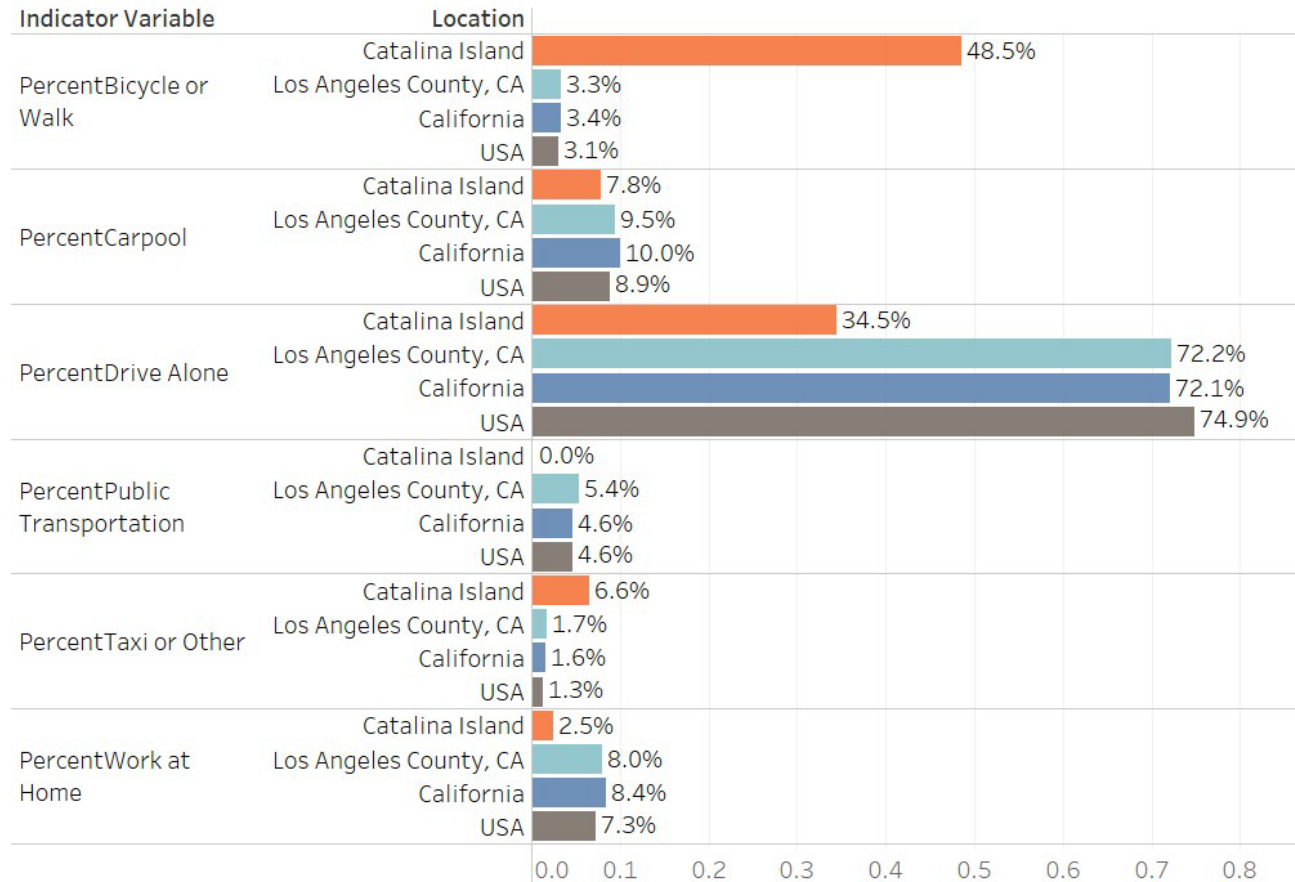
Commuter Patterns

Close to 50% of the Catalina Island population bikes or walks to work. This could be due to the following factors:

- Proximity to work
- Lack of public transport
- The lengthy permit process for cars on the island.
- Inability to afford a vehicle

Only 34.5% of Catalina Island residents drive alone (inclusive of golf carts) which is less than half the county, state, and national average. This could be due to the high rate of individuals who walk to work, and relatively short travel distances around the island.

Commuter Travel Patterns - Overview



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: County





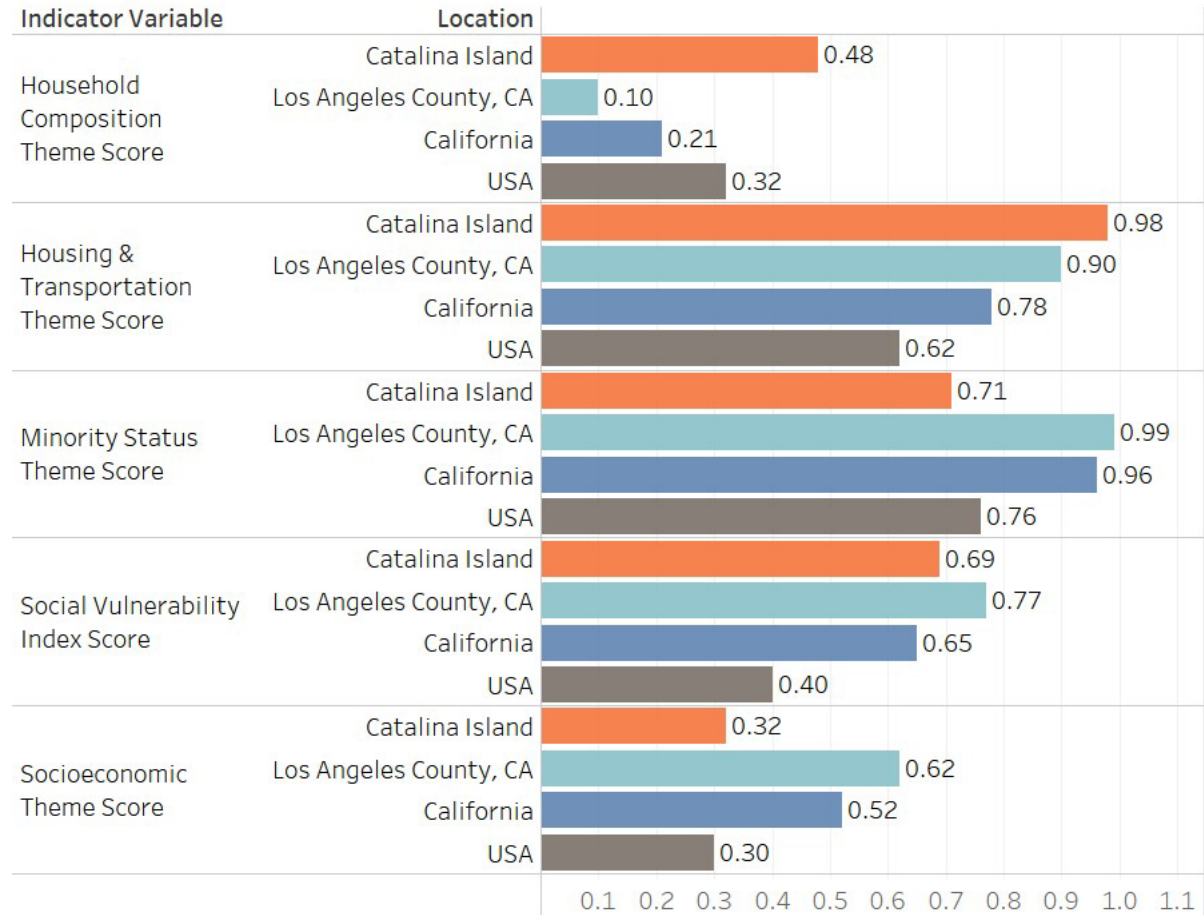
Social Vulnerability

“The degree to which a community exhibits certain social conditions, including high poverty, low percentage of vehicle access, or crowded households, may affect that community’s ability to prevent human suffering and financial loss in the event of disaster. These factors describe a community’s social vulnerability.” (CARES)

The service area vulnerability score is 0.69, which is less than the county average, but greater than both state and the national average.

Within the household composition and housing & transportation theme scores Catalina Island is higher than county, state and national averages.

Social Vulnerability Index (SoVI)



Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention and the National Center for Health Statistics, CDC - GRASP. 2018. Source geography: Tract





Public Transport and Recreation

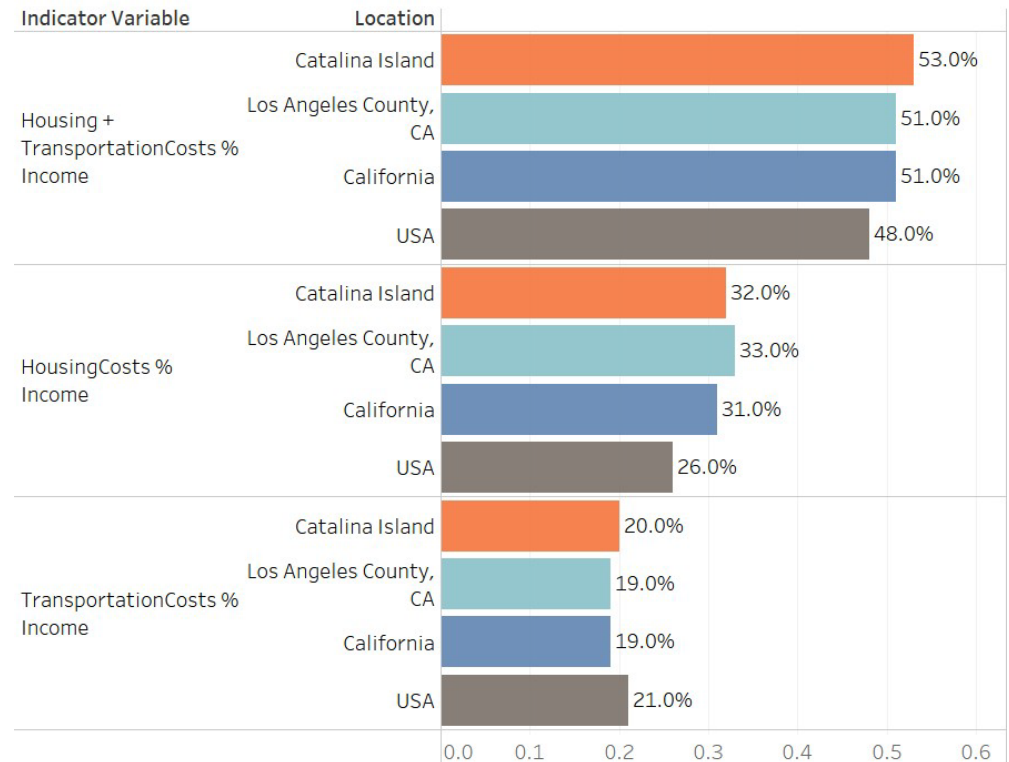
Transportation can act as a barrier to healthcare in a community if many individuals cannot find or afford rides to their appointments.

A higher percentage of income is spent on transportation costs for Catalina Island residents than county or state averages. Unlike most residents of LA County that rely on car travel, Catalina Island as shown in [Commuter Patterns](#) walk or bike to work. It is estimated that much of this cost stems from travel back and forth to the mainland via ferry.

Currently, Catalina Island residents must travel to the mainland for a variety of treatments including cancer care, and dialysis. It was reported in interviews that patients become exhausted from travel while undergoing treatment.

Sustainable local access to specialties and treatments such as hematology/oncology, and nephrology on a part time basis can reduce the burden of travel for patients.

Housing + Transportation Affordability Index (H+T Index)



Note: This indicator is compared to the state average. Data Source: Center for Neighborhood Technology, 2022. Source geography: Tract, County

“Traveling back and forth on the ferry can be an all-day affair and physically taxing for patients undergoing treatment.”

-Community Stakeholder





EDUCATION



Education

Education has been shown to link directly to the health of an individual or community. Higher education correlates with higher income, better education around health behaviors, and greater access to healthcare services. The following statistics were examined for Catalina Island:

- Early Education
- Educational Attainment
- Absence Rate
- Homeless Children and Youth

Key findings include:

Statistic Analyzed	Key Findings
Early Education	Pre-kindergarten early learning programs are strong in the service area.
Education Attainment	Catalina Island has a higher level of population with an associate's degree than county, state and national averages, but only 4.5% of the population with a graduate or professional degree, which is 7.2 percentage points less than the county's average.
Absence Rate	Catalina Island has a higher chronic absence rate than county and state averages.
Homeless Children and Youth	Catalina Island has a over twice the county and state averages of homeless students, and over three times the national average.



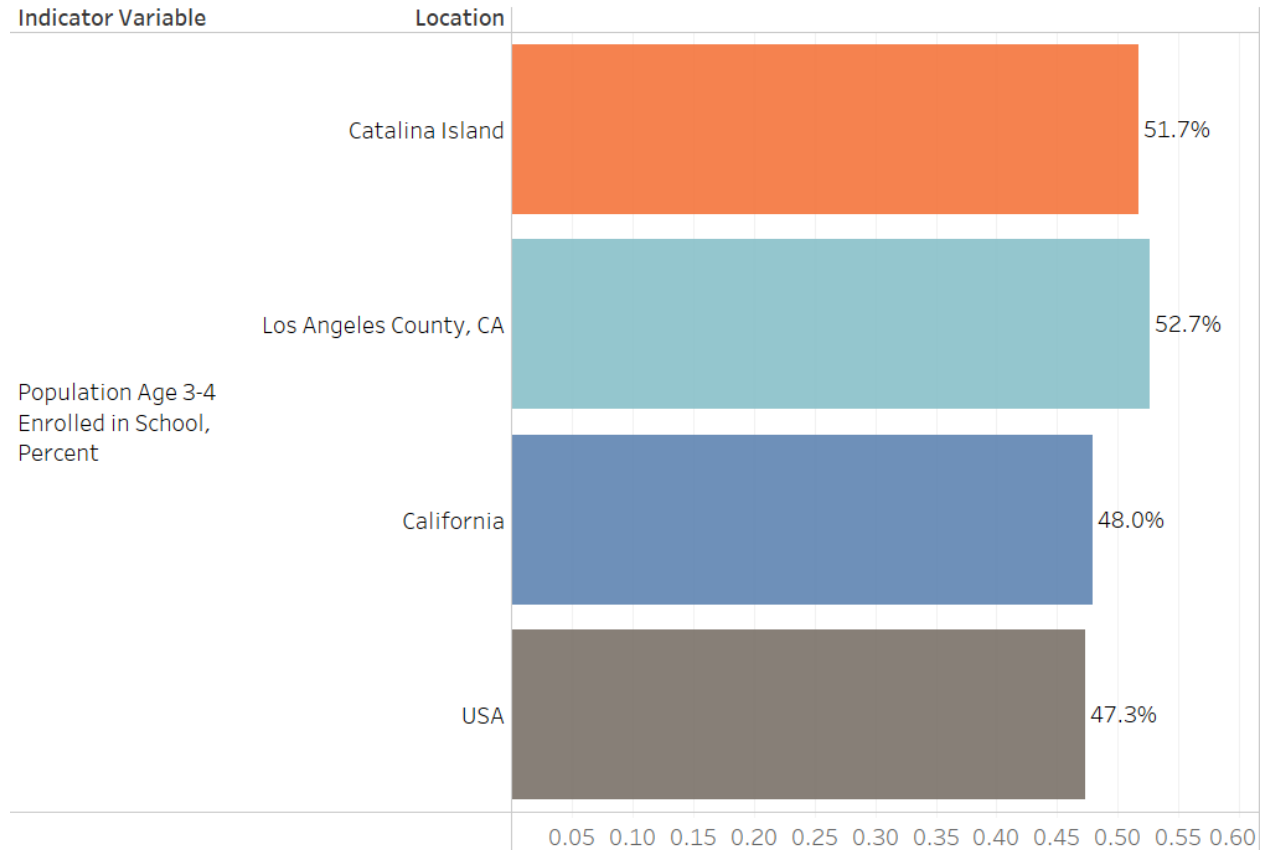


Education – Early Education

Prekindergarten early learning programs are strong in the service area.

Preschool enrollment for ages 3-4 has shown to be higher than state and national averages, and only slightly below county averages.

Access - Preschool Enrollment (Age 3-4)



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract





Education – Attainment

Catalina Island has a population on par with national averages for no high school diploma and high school only. Additionally, Catalina Island has a higher level of the population with an associate’s degree than the county, state, and national averages.

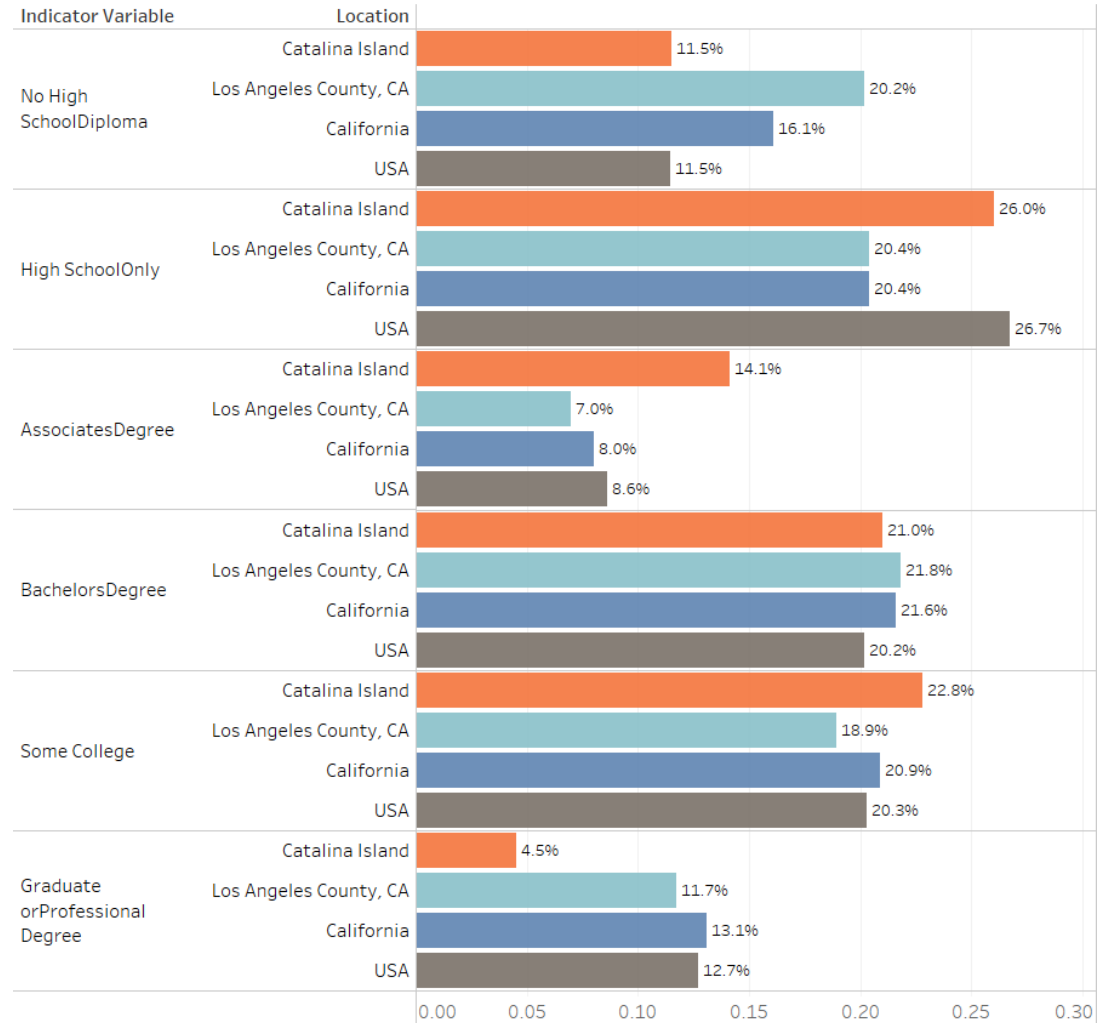
Catalina Island has only 4.5% of the population with a graduate or professional degree, which is 7.2 percentage points less than the county’s average.

Quality of education on Catalina Island is key to the recruitment of healthcare providers.

It is important to note that Catalina Island has a number of children who are homeschooled.

Education

Attainment - Overview



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: County





Education – Absence Rate

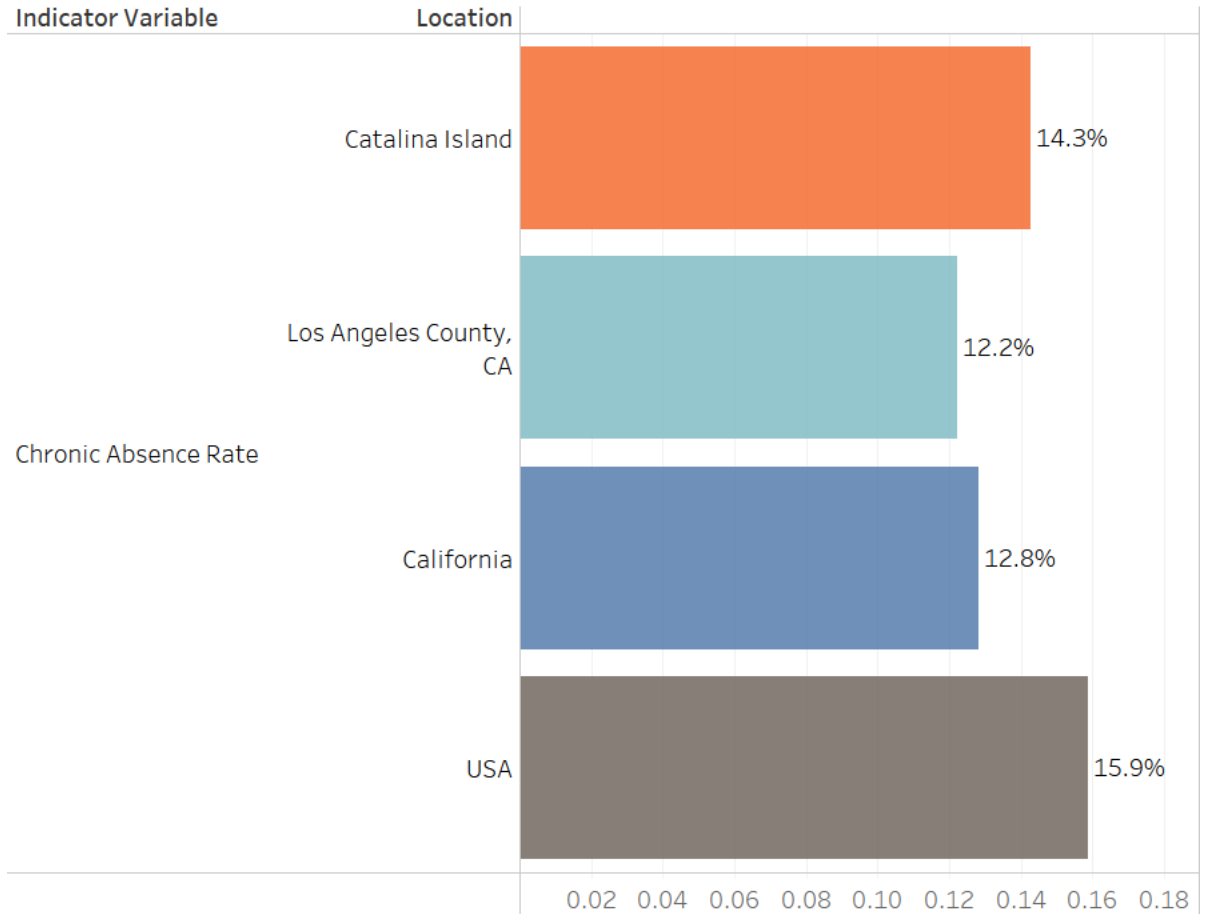
Catalina Island has a higher chronic absence rate than county and state averages, but 1.6 percentage points lower than national averages.

It was reported during interviews that businesses on the island have lost employees due to the quality of the education available.

The high school is under renovation on Catalina Island.

A renovated building will be attractive to future Catalina Island full-time residents and recruitment of educators.

Chronic Absence Rate



Note: This indicator is compared to the state average. Data Source: U.S. Department of Education, US Department of Education - Civil Rights Data Collection. 2017-18. Source geography: School District





Homeless Children & Youth

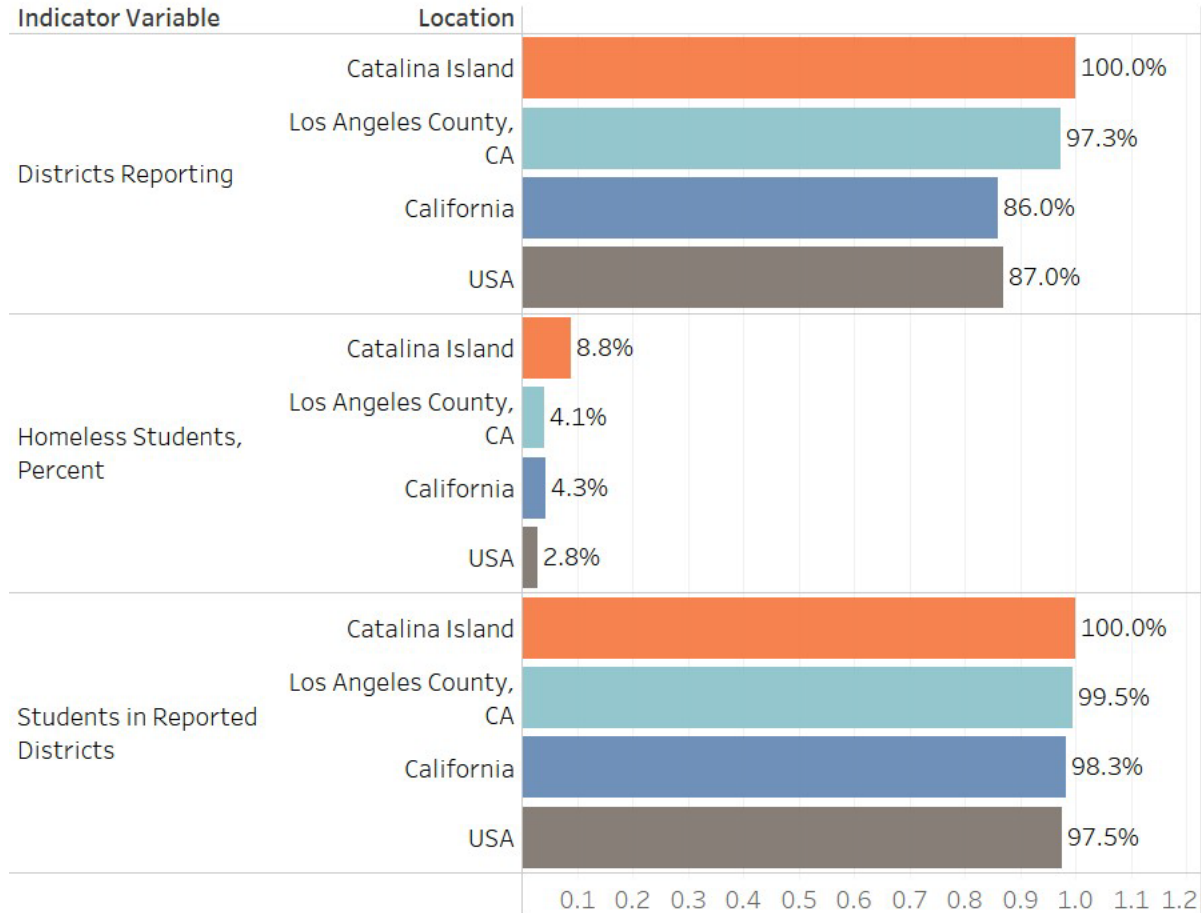
Catalina Island has a over twice the county and state averages of homeless students, and over three times the national average.

It is critical that additional support continue to be provided to students including services such as free lunch.

It was reported in interviews that mental health services are of high importance to many students. Catalina Island Medical Center should partner with school therapists to continue to ensure proper services are provided.

***“Kids are suffering from anxiety and depression”
-Community Stakeholder***

Homeless Children & Youth



Note: This indicator is compared to the state average. Data Source: US Department of Education, EDFacts. Additional data analysis by CARES. 2019-2020. Source geography: School District





FOOD



Food

Access to affordable and nutritious food and maintaining a healthy diet are important facets of health. Poor nutrition has been shown to lead to higher mortality and incidences of chronic disease. The following statistics were analyzed for Catalina Island.

- Low Food Access
- Supplemental Nutrition Assistance Programs (SNAP)

Key findings include:

Statistic Analyzed	Key Findings
Low Food Access	Nearly all residents have adequate access to food on the island.
Supplemental Nutrition Assistance Programs (SNAP)	Catalina Island residents have a low percentage of food retailers participating in the SNAP benefits program which is expected given the island geography and limited grocery stores and food retailers on the island.



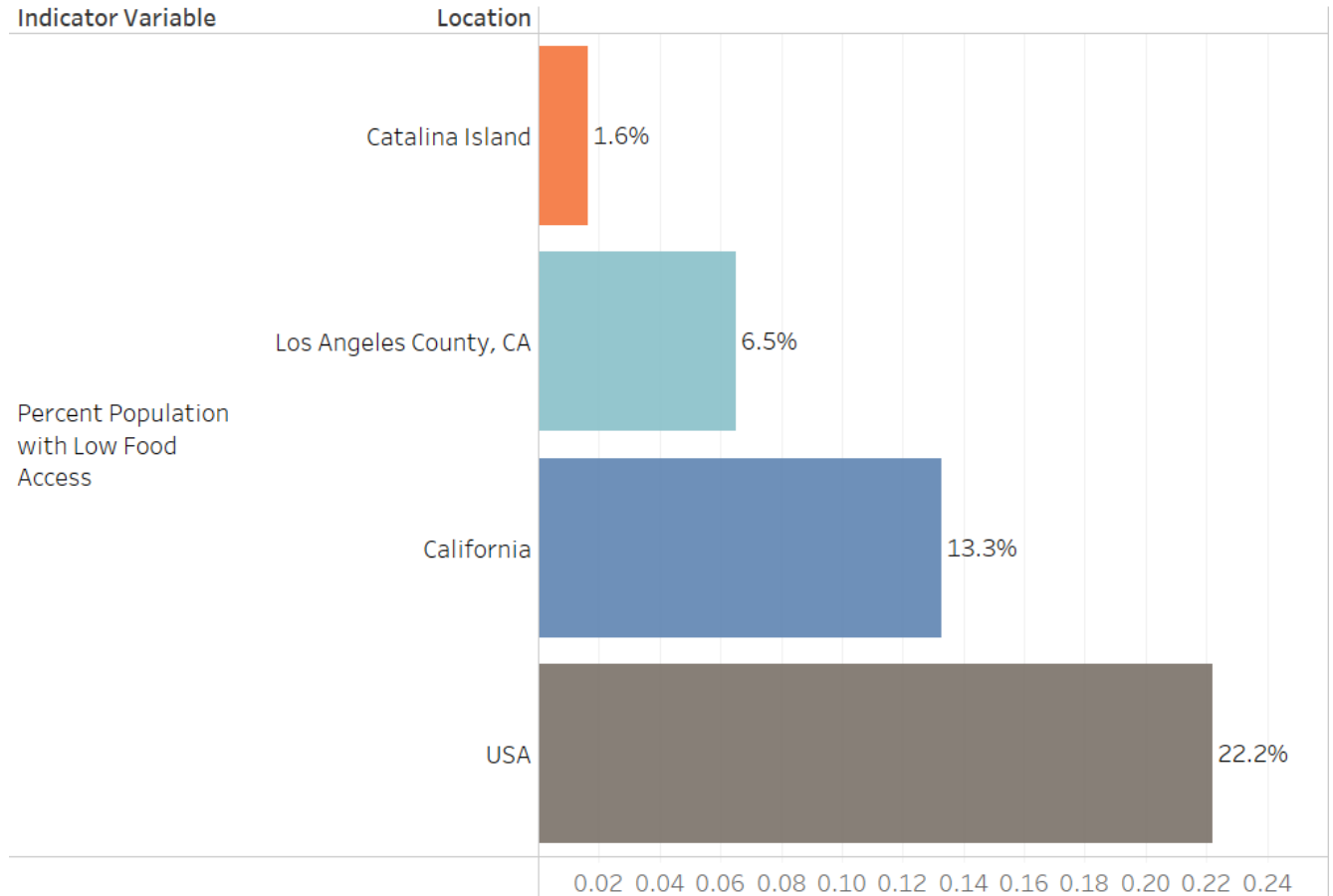


Food Environment – Low Food Access

Catalina Island only has 1.6% of the population with low food access, which is well below county, state, and national averages.

Based on this finding, close to all residents should have adequate access to food on the island.

Food Environment - Low Food Access



Note: This indicator is compared to the state average. Data Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2019. Source geography: Tract





Supplemental Nutrition Assistance Programs

The Supplemental Nutrition Assistance Program (SNAP) is a federal program that provides benefits to eligible populations that can be used in qualified stores for the purchase of food.

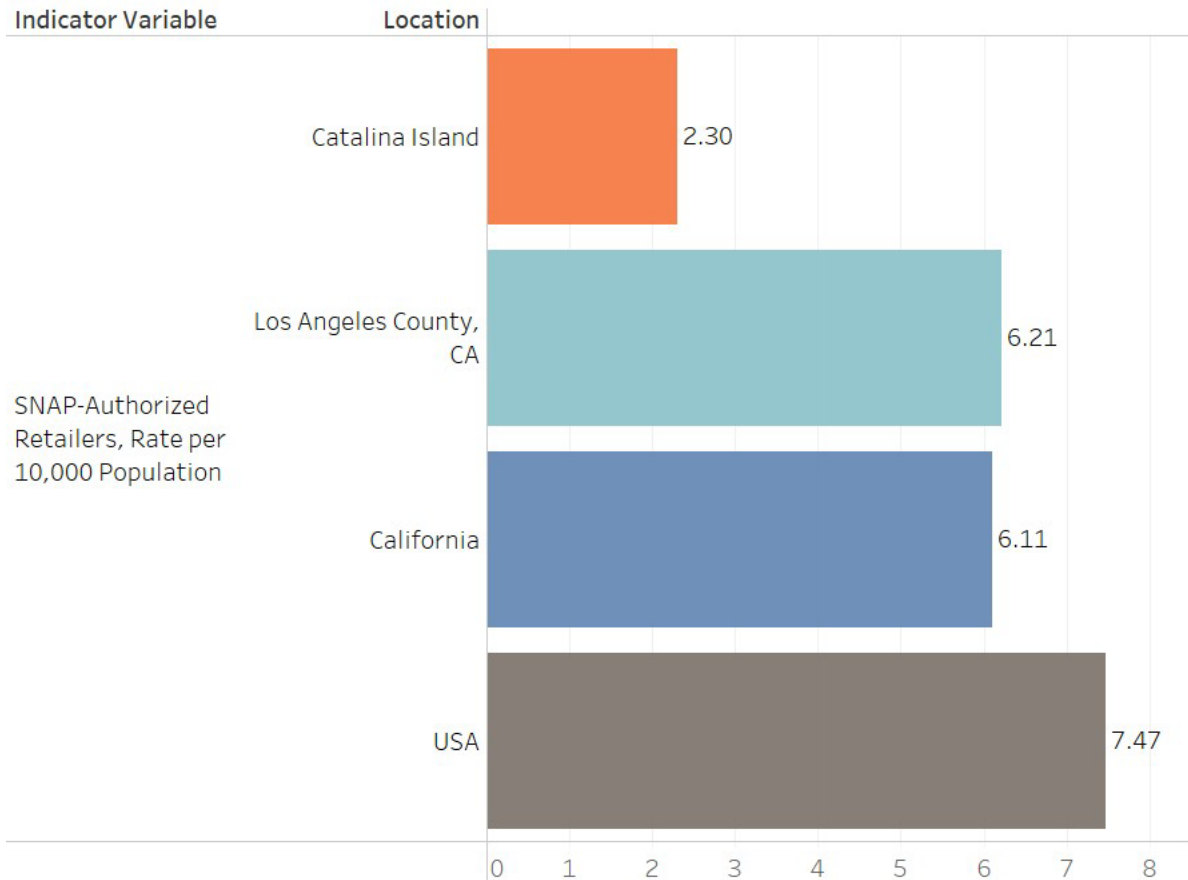
Catalina Island residents have a low percentage of food retailers participating in the SNAP benefits program which is expected given the island geography and limited grocery stores on the island.

While Catalina Island residents may have adequate access to food households may not be able to afford the food provided.

“Food assistance is provided by the food pantry. People don’t let people go hungry on the island.”

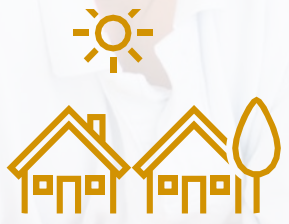
-Community Stakeholder

Food Environment - SNAP-Authorized Food Stores



Note: This indicator is compared to the state average. Data Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator. Additional data analysis by CARES. 2021. Source geography: Tract





COMMUNITY



Community

Social cohesion, social isolation, and the rate of crime and drug usage are examples of indicators that comprise the Community aspect of social determinants of health. The following statistics were analyzed for Catalina Island.

- Violent Crime
- Drug Claims

Key findings include:

Statistic Analyzed	Key Findings
Violent Crime	The rate of rape in Avalon exceeds that of county, and state averages, with 2 among a population of 4,400.
Drug Claims	Catalina Island has a higher amount of opioid drug claims filed compared to county, state and national averages.



Violent Crime

The City of Avalon has much lower rates per 100,000 people in total violent crime categories overall and specifically in aggravated assault, murder, and robbery categories, compared to the state and Los Angeles County.

The rate of rape exceeds the state and county and equates to approximately two incidences.

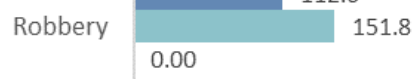
Data was limited on domestic abuse for the population but there were reports of incidents from stakeholder interviews.

A few entities offer safe spaces including the Catalina Island Women's Forum but many have to go off-island to seek help.

Violent Crime

<i>Rate per 100,000 people (2020)</i>	California	Los Angeles County	City of Avalon	Incidences
All Violent Crimes	437.3	545.6	190.4	8
Aggravated Assault	285.3	349.4	136.0	6
Murder	5.5	6.7	0.0	0
Rape	33.7	37.5	54.4	2
Robbery	112.6	151.8	0.00	0

Source: FBI UCR & DOJ



■ California ■ Los Angeles County ■ City of Avalon

Source: PolicyMap. (n.d.). DigDeeper. <https://www.policymap.com/newmaps#/>





Drug Claims

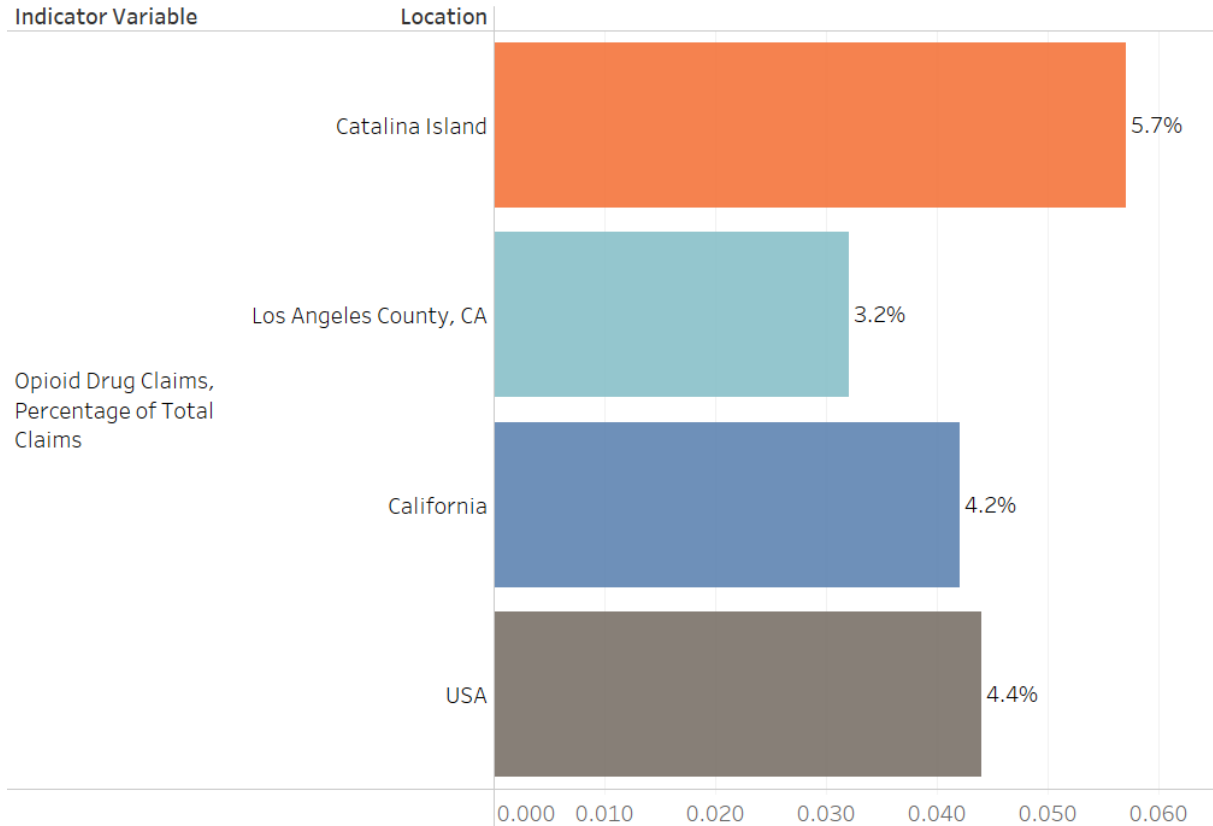
Catalina Island has a higher amount of opioid drug claims filed compared to county, state, and national averages.

However, Los Angeles County and the state of California have lower prescribing rates compared to the U.S. average, according to 2020 CDC data.

The opioid prescribing rate per 100 people:

- LA County: 24.5
- California: 28.5
- U.S.: 43.5

Opioid Drug Claims



Note: This indicator is compared to the state average. Data Source: Centers for Medicare & Medicaid Services, CMS - Part D Opioid Drug Mapping Tool. 2019. Source geography: ZIP code





HEALTHCARE SYSTEM



Healthcare System

Healthcare System analyzes health services available to the community, including preventative medicine and treatment. Access to health services affects both health behaviors and health outcomes within a community. The following statistics were examined for Catalina Island:

- Access to providers
 - Access to mental health providers
 - Access to primary care providers
 - Access to dentists
- Preventative Care

- Key findings include:

Statistic Analyzed	Key Findings
Access to Providers	Catalina Island has fewer mental health and dental health providers as a ratio to its population, compared to state and county benchmarks. However, the island does have available providers, especially compared nationally. For primary care, Catalina Island is above average compared to county, state, and national averages. Consistent access to primary care and mental health services is vital for the community.
Preventative Care	Catalina Island is about equal with county, state and national averages for routine check ups, and preventative services for adult males and females. Prevention statistics indicate that primary care providers are being utilized for routine prevention visits.



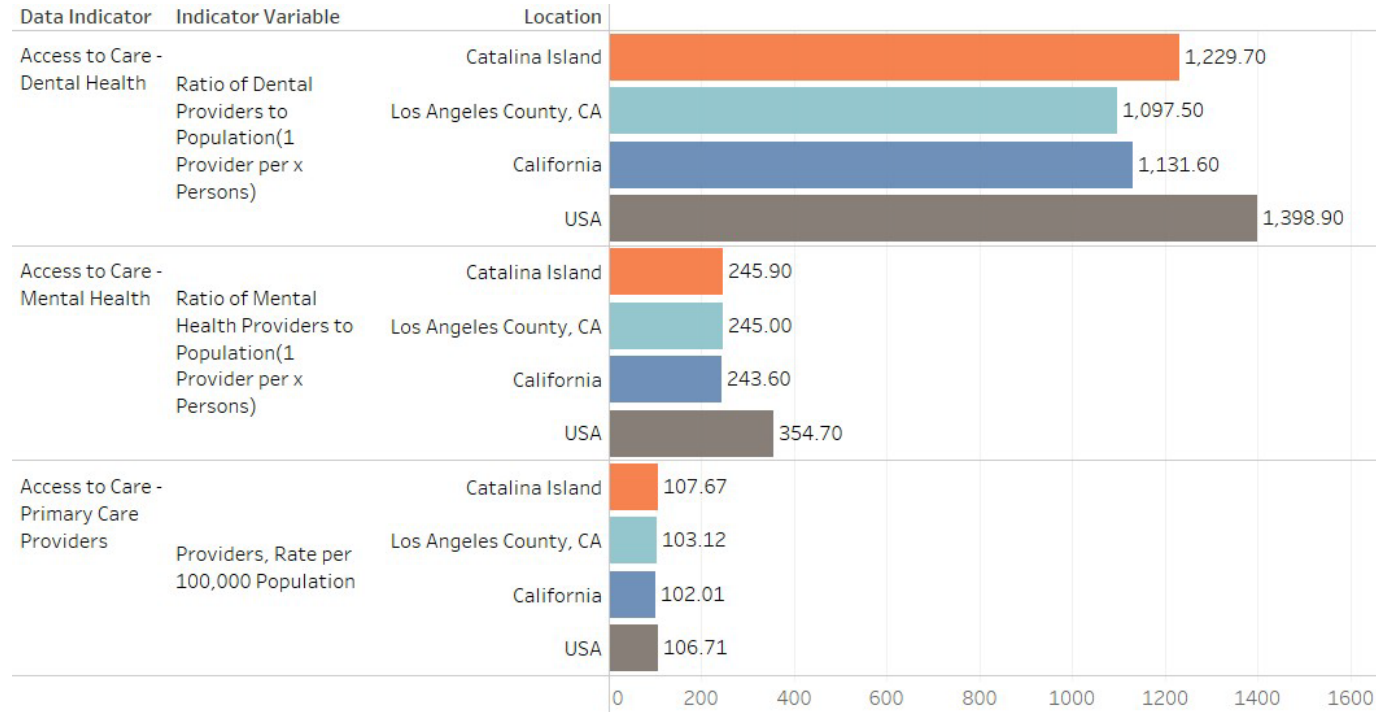


Access to Providers

Catalina Island is a rural community and is anticipated to have reduced access to providers compared to state and national averages.

According to federal data, Catalina Island has fewer mental health and dental health providers as a ratio to its population, compared to state and county benchmarks. However, the island does have available providers, especially compared nationally.

For primary care, Catalina Island is above average compared to county, state, and national averages.



Data Source: Health Resources and Services Administration and Centers for Medicare and Medicaid Services CMS

It was reported in stakeholder interviews that having consistent primary care providers was deeply important to the community for patients to build personal relationships with their chosen physician. Additionally, it was mentioned that primary care needs enhanced privacy in the new facility.

“Would like to see the hospital be the driver for holistic healthcare”

-Community Stakeholder

Mental health and access to mental health providers was brought up in almost every conversation. It was reported that cultural biases within the community are a large barrier to utilizing the provided mental health services. Many community members do not feel comfortable discussing their mental health.

Working to break down barriers to access as well as maintaining access to mental health and primary care is critical for



Access to Providers

Catalina Island.





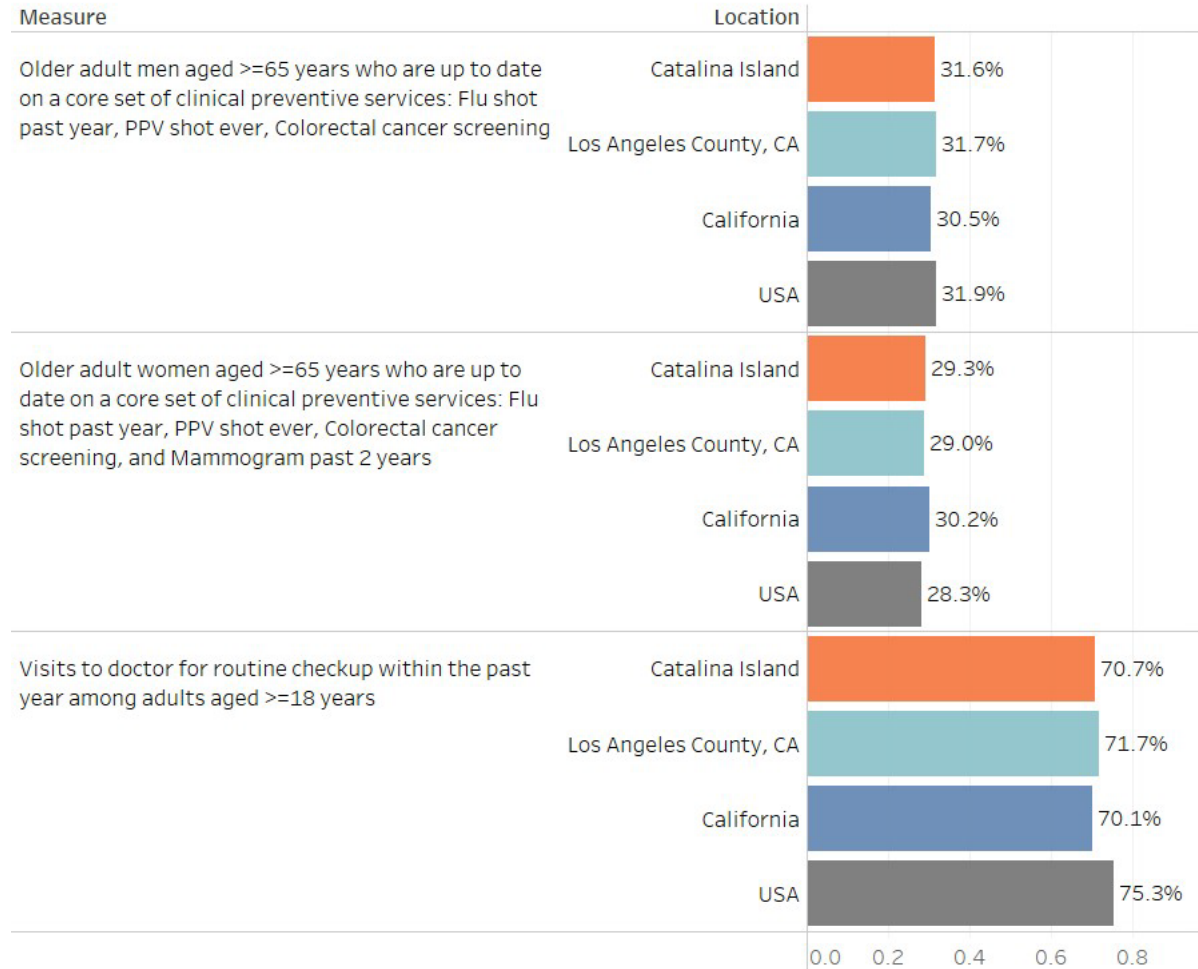
Preventative Care

Catalina Island is about equal with county, state, and national averages for routine checkups, and preventative services for adult males and females.

Over three-quarters of the population on Catalina Island have had routine primary checkups in the past year.

Catalina Island has a higher-than-average supply of primary care providers. Prevention statistics indicate that primary care providers are being adequately utilized for routine prevention visits.

Prevention



Source: PLACES: Local Data for Better Health, ZCTA Data, 2022 release (Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health)





Preventative Care

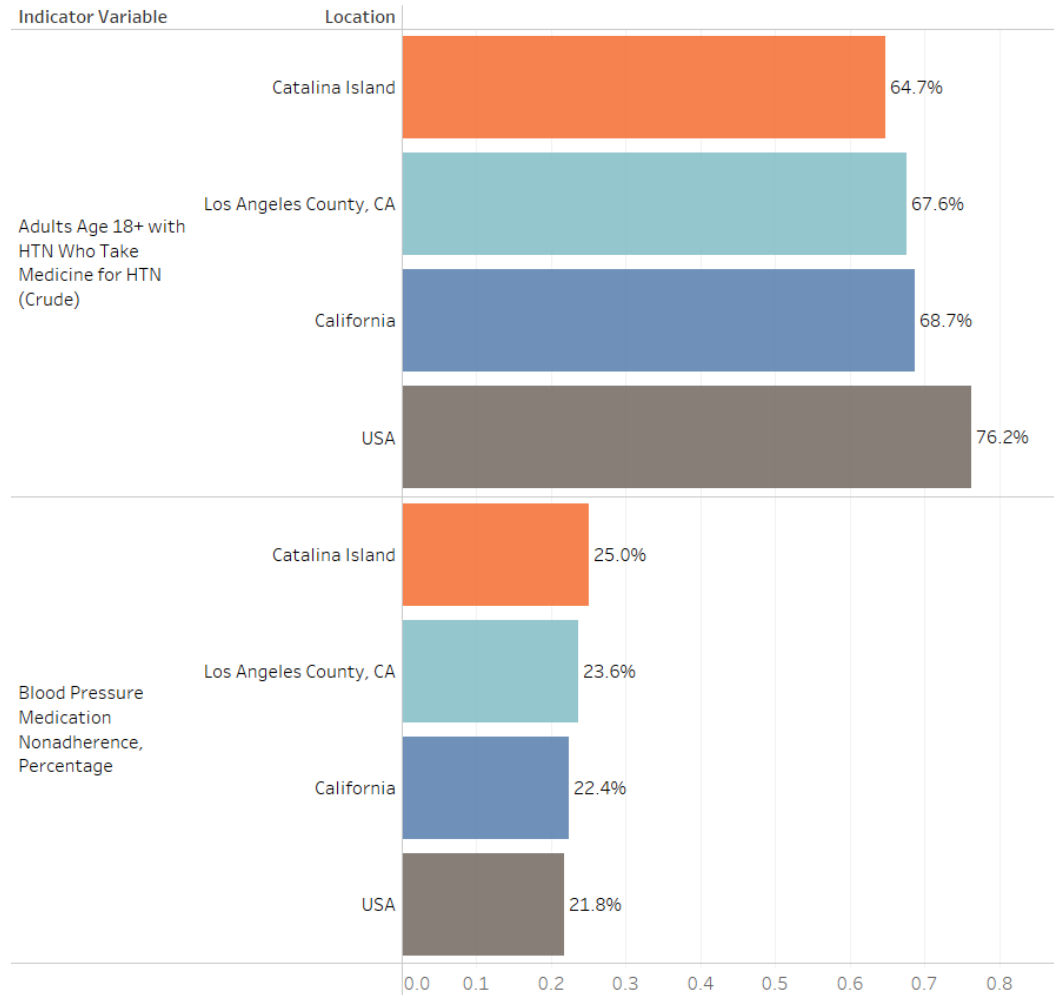
Catalina Island has a lower percentage of the population taking preventative medication for hypertension than the county, state, and national averages.

Additionally, Catalina Island has slightly higher than county, state, and national averages for blood pressure nonadherence. Increased nonadherence can indicate that:

- Individuals may have poor medication compliance
- Individuals may find it difficult to travel to receive care
- Individuals may not be able to afford treatment

Clinical Care and Prevention

Prevention - High Blood Pressure Management (Adult) & Prevention - High Blood Pressure Management (Medicare)



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract





HEALTH BEHAVIORS



Healthcare Behaviors

Healthcare behaviors have a significant impact on the health of an individual and community. Poor health behaviors and lack of vaccinations and screenings contribute to poor health outcomes. Statistics examined for Catalina Island include:

- Vaccinations
- Screenings
- High-Risk Health Behaviors
- Alcohol
- Preventative Care

Key findings include:

Statistic Analyzed	Key Findings
Vaccinations	Catalina Island is slightly above county, and state averages, and well above national averages in vaccinations for COVID-19.
Screenings	The population of Catalina Island falls slightly below the county, state, and national averages for cancer screening. In all other screening metrics, Catalina Island is above county and state averages. Education around screening availability and payment options is important to emphasize for patients.
High Risk Health Behaviors	Catalina Island has a larger proportion of residents who are prone to excessive drinking, current smoking among adults, and sleeping less than 7 hours among adults. These behaviors are linked to greater incidences of chronic disease.
Alcohol	Catalina Island has had a greater rate of binge drinking in the past 30 days than county, state, and national averages. It was reported in interviews that alcohol abuse is common on Catalina Island due to the culture of a vacation destination.
Preventative Care	Catalina Island has slightly higher than county, state, and national averages for blood pressure nonadherence.



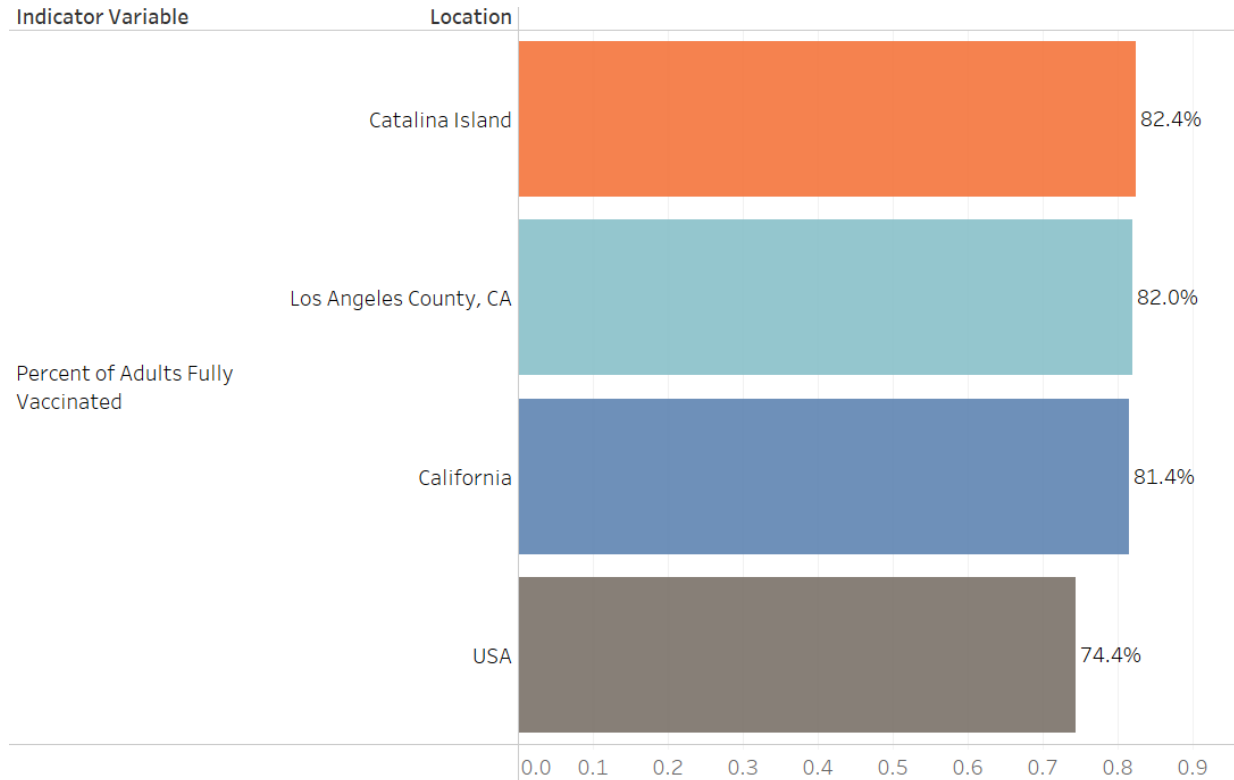


Vaccinations

Catalina Island is slightly above county, and state averages, and well above national averages in vaccinations for COVID-19.

Due to Catalina Island being an older, remote island population it is critical for CIMC to provide continued access to vaccines. This is inclusive of the island's more vulnerable populations.

COVID – 19 Vaccination Rate



Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention and the National Center for Health Statistics, CDC - GRASP. 2022. Source geography: County





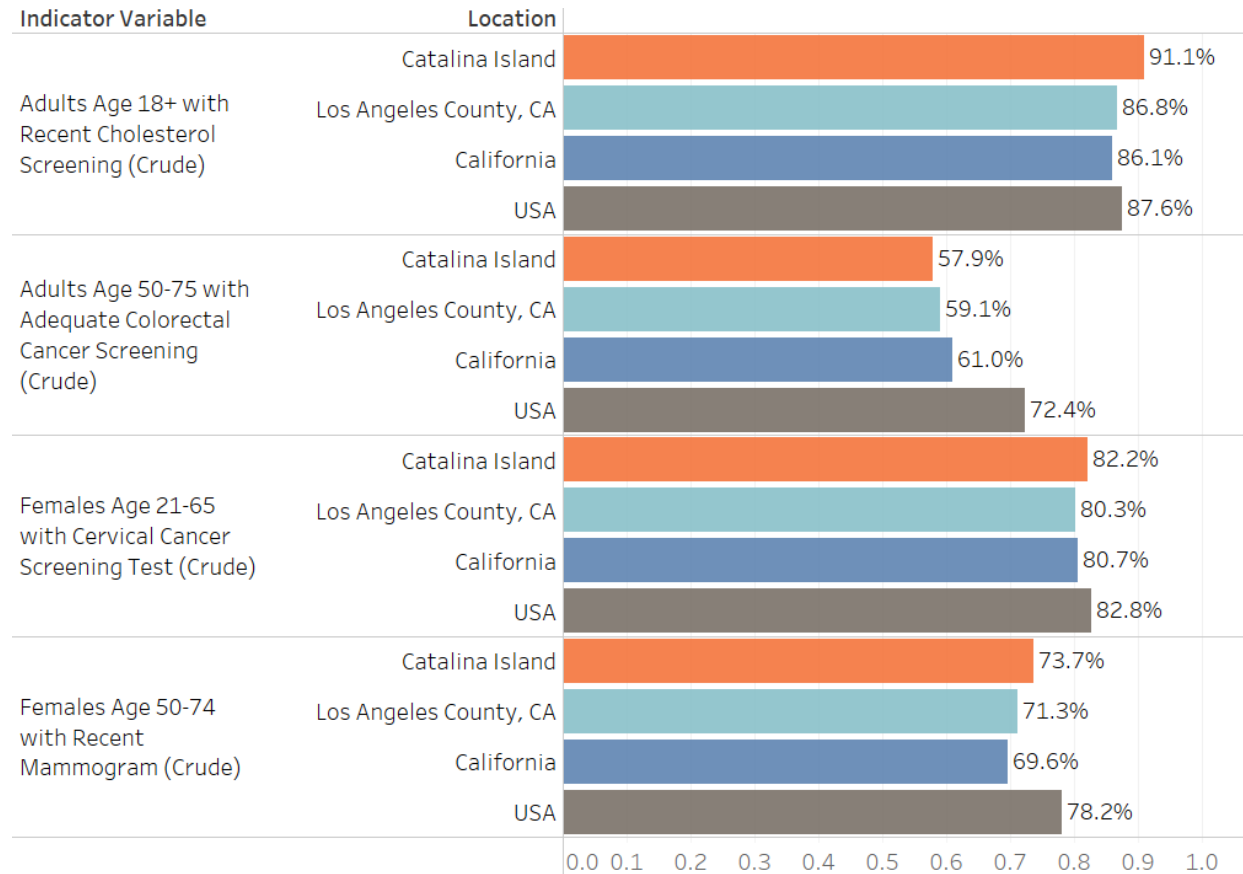
Screenings

The population of Catalina Island falls slightly below the county, state, and national averages for cancer screening.

In all other screening metrics, Catalina Island is above county and state averages.

Barriers to healthcare access, such as transportation to the mainland and availability of primary care and women's health providers, can contribute to lower screening rates.

The best practice for Catalina Island is to emphasize education around screening availability and payment options in the area at routine check-up appointments and community events.



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract





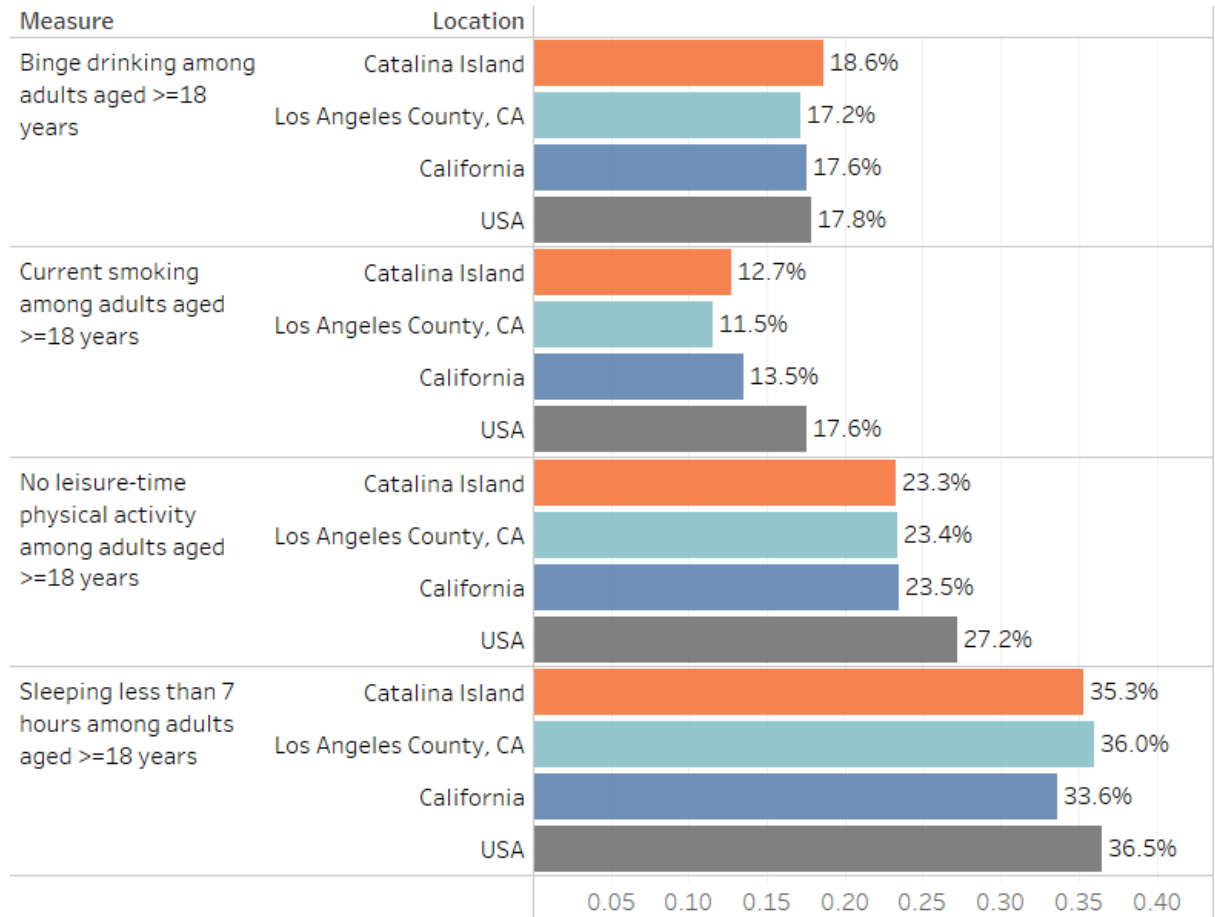
High Risk Health Behaviors

Catalina Island has a larger proportion of residents who are prone to excessive drinking.

Catalina has higher rates than county averages in current smoking among adults, and higher than state averages in sleeping less than 7 hours among adults.

These behaviors are linked to greater incidences of chronic disease such as obesity and poor cardiovascular health. Excessive drinking is defined as more than two drinks a day for men and more than one for women.

Health Risk Behaviors



Alcohol

Catalina Island has had a greater rate of binge drinking in the past 30 days than county, state, and national averages. Alcohol expenditures on Catalina Island are about even with state and lower than national averages.

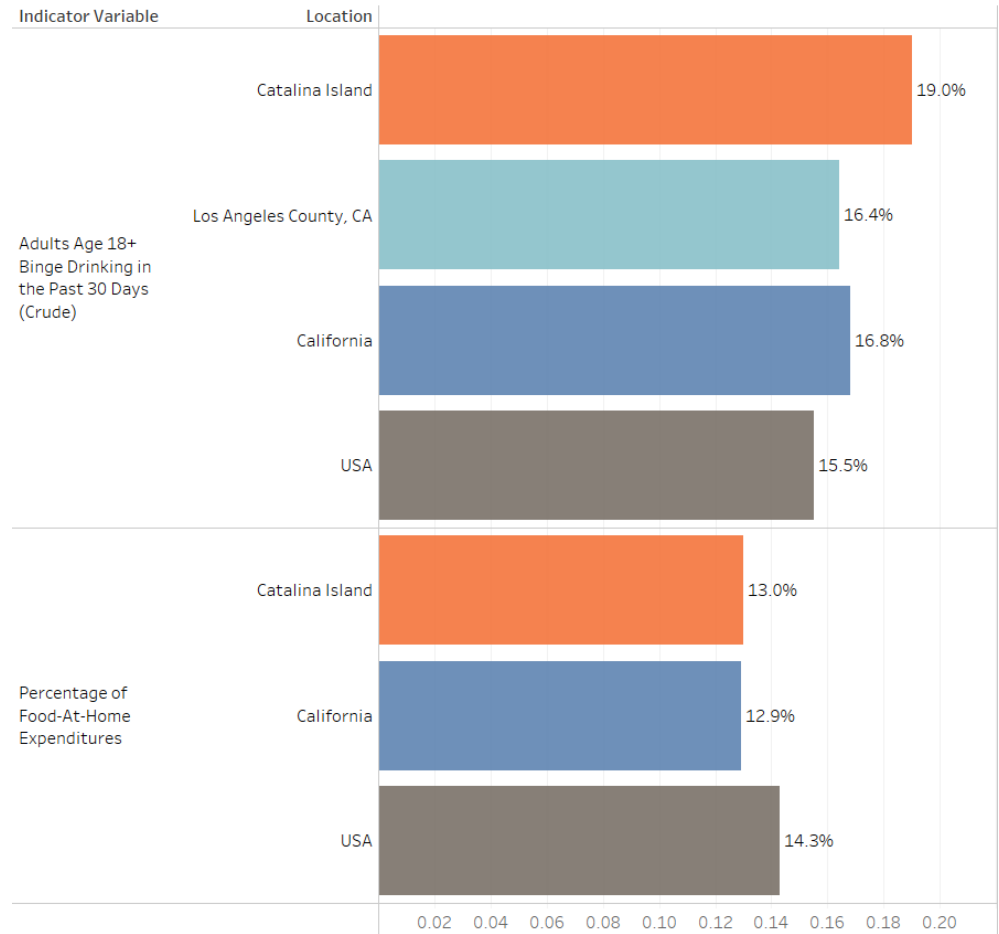
It was reported in interviews that alcohol abuse is common on Catalina Island due to the culture of a vacation destination.

Alcoholics Anonymous is available on the island, but given the small community, there is little anonymity associated with the organization. It was reported in interviews that strong cultural barriers around mental health, and the lack of privacy associated with the organization are preventing individuals from joining.

Working to educate and break down cultural barriers along with exploring hosting alcoholics anonymous in a less public place could encourage more individuals to attend meetings.

Health Behaviors

Alcohol - Binge Drinking & Alcohol - Expenditures



Note: This indicator is compared to the state average. Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: Tract

“Drug and alcohol problems are widespread due to large amount of bars and availability of alcohol.”
-Community Stakeholder



HEALTH OUTCOMES



Health Outcomes

Health outcomes can show the relative health of the population in the community. Typically, health outcomes are the result of the culmination of factors present in the other elements included in the social determinants of health. Statistics examined for Catalina Island include:

- Overall Health Outcomes
- Cancer Incidence
- Behavioral Health Outcomes
- Chronic Conditions

Key findings include:

Statistic Analyzed	Key Findings
Overall Health Outcomes	Catalina Island has a larger population with poor dental health, poor mental health and poor physical health than the county and state averages.
Cancer Incidence	Catalina Island has a higher cancer incidence rate than Los Angeles County but lower than state and national averages. CIMC must continue to monitor both cancer incidence rates and mortality rates for the population. CIMC should explore options to enhance cancer screenings, enable access and create transportation for treatment outside Catalina Island if services are not provided locally.
Behavioral Health Outcomes	Depression among adults on Catalina Island is higher than county averages but lower than state and national averages. Greater coordination of patient care among the hospital, schools, and non-profit organizations to provide substance abuse support, mental health support, consistent follow-up treatment, and housing is the optimal strategy to tackle this complex issue.
Chronic Conditions	Catalina Island has a slightly lower rate of arthritis, chronic kidney disease, COPD, and stroke among adults than state and national averages. It is critical for Catalina Island and CIMC to maintain and enhance access to primary care providers and specialty care providers as well as care coordination.



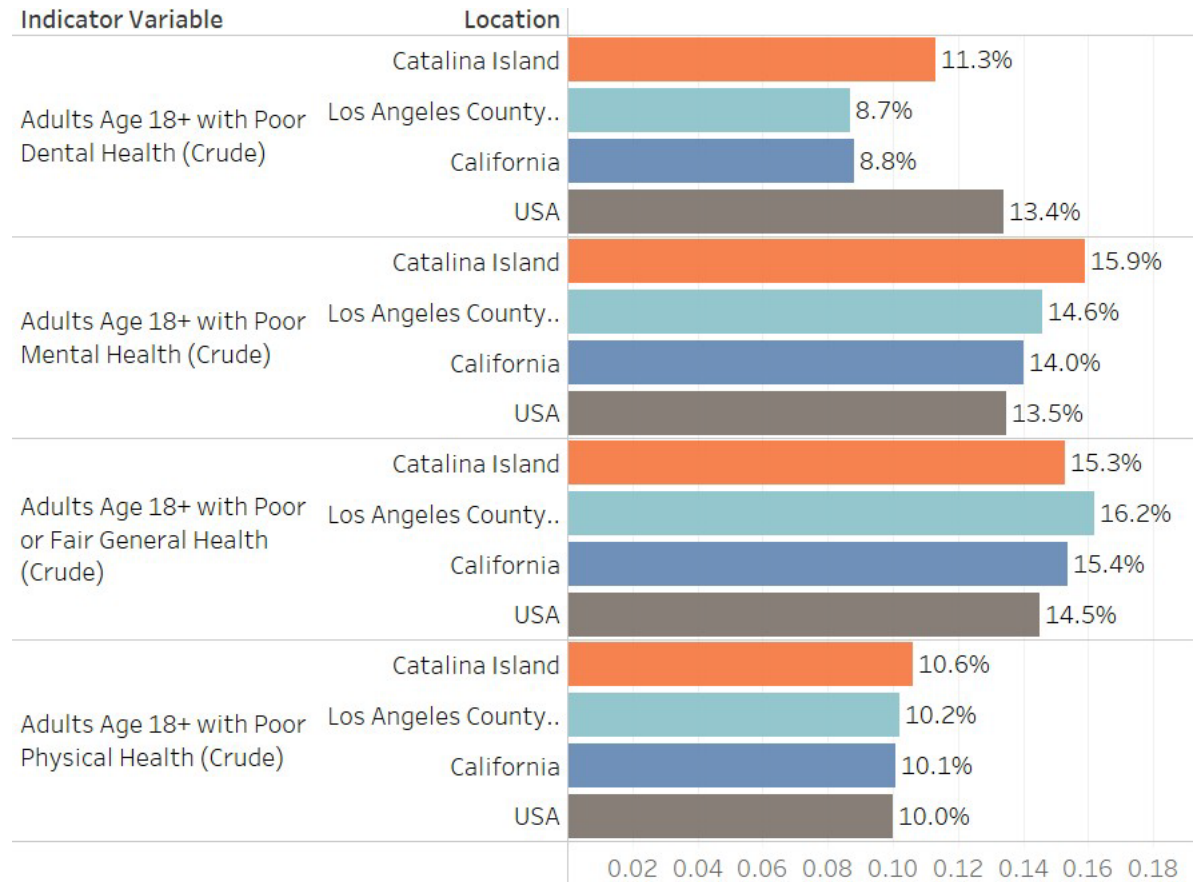


Overall Health Outcomes

Catalina Island has a larger population with poor dental health, poor mental health, and poor physical health than county and state averages.

Mental health is especially concerning given the reported cultural barriers to receiving provider services and the higher percentage of alcohol abuse and drug claims.

Poor physical health can correlate to obesity, which is an indicator of greater incidences of chronic disease.



Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2020. Source geography: Tract





Cancer Incidence

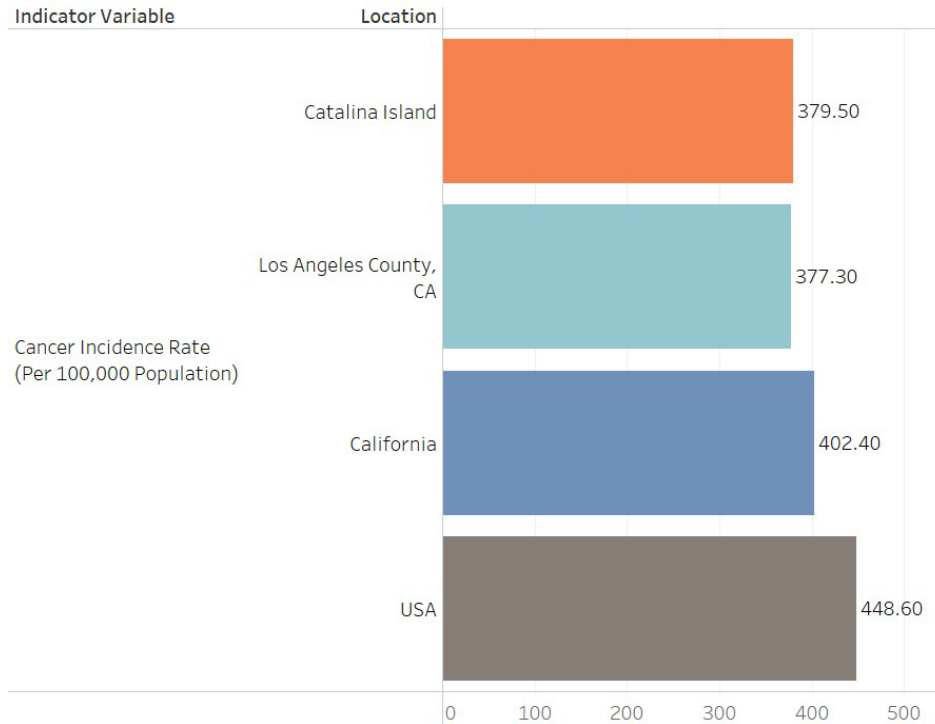
Catalina Island has a higher cancer incidence rate than Los Angeles County but lower than state and national averages. While this data is encouraging, it should be noted that while the cancer incidence rate may be low it is not an indicator for the cancer mortality rate on Catalina Island.

Patients must currently travel off the island for care, and many patients who are diagnosed with cancer choose to leave the island all together to receive treatment. Those that do not leave the island travel back and forth on the ferry for treatment which can be physically challenging for patients undergoing treatment. A low cancer incidence rate should be monitored due to the following:

- Low incidence rate coupled with a low screening rate indicates that cancers could be going undetected until it is too late to treat them effectively.
- Individuals may find it difficult to travel out of the area for treatment and forgo cancer care.
- Individuals may not be able to afford treatment.

It is critical that CIMC continue to monitor both cancer incidence rates and mortality rates for the population.

Cancer Incidence - All Sites



Note: This indicator is compared to the state average. Data Source: State Cancer Profiles. 2014-18. Source geography: County



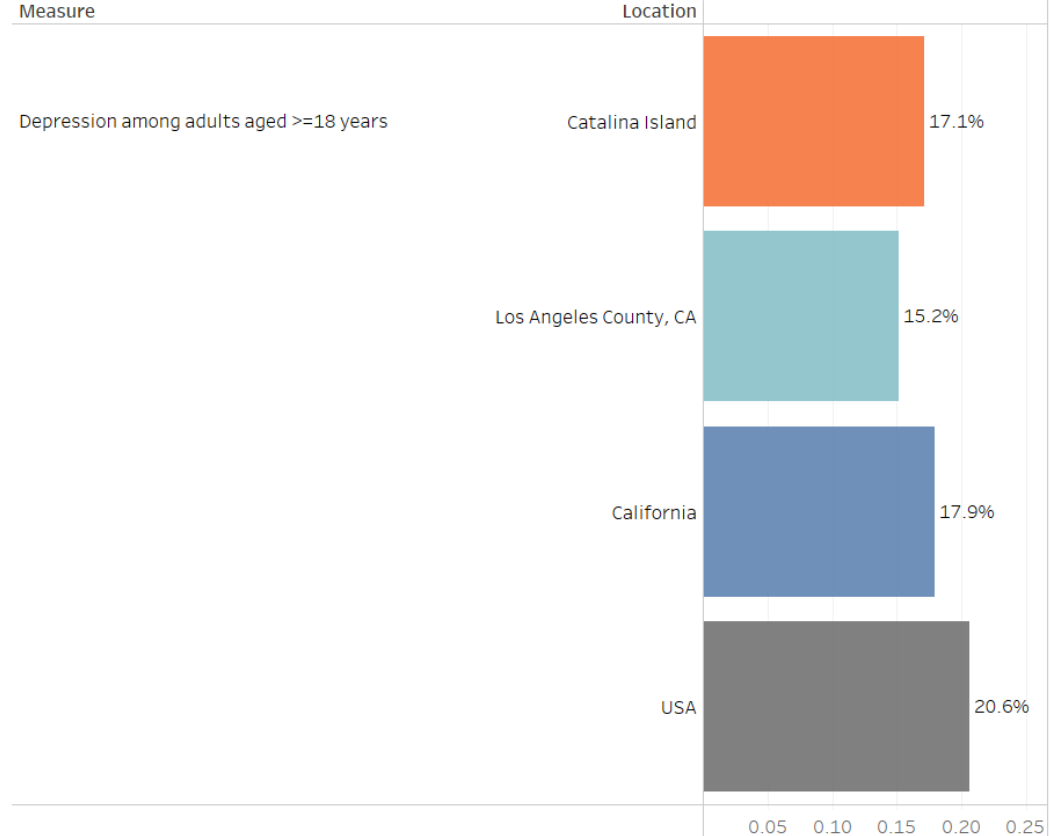


Behavioral Health Outcomes

Depression among adults on Catalina Island is higher than county averages but lower than state and national averages.

As mentioned in [Access to Providers](#) in the Healthcare System section, cultural barriers are reported to be impacting the utilization of mental health services on Catalina Island, along with a high incidence of drug claims in the community shown in [Drug Claims](#) in the Community section, and a greater amount of binge drinking shown in [Alcohol](#) in the Health Behaviors section.

Greater coordination of patient care among the hospital, schools, and non-profit organizations to provide substance abuse support, mental health support, consistent follow-up treatment, and housing is the optimal strategy to tackle this complex issue.



Source: PLACES: Local Data for Better Health, ZCTA Data, 2022 release (Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health)

***“We need better mental health services”
-Community Stakeholder***



Chronic Conditions

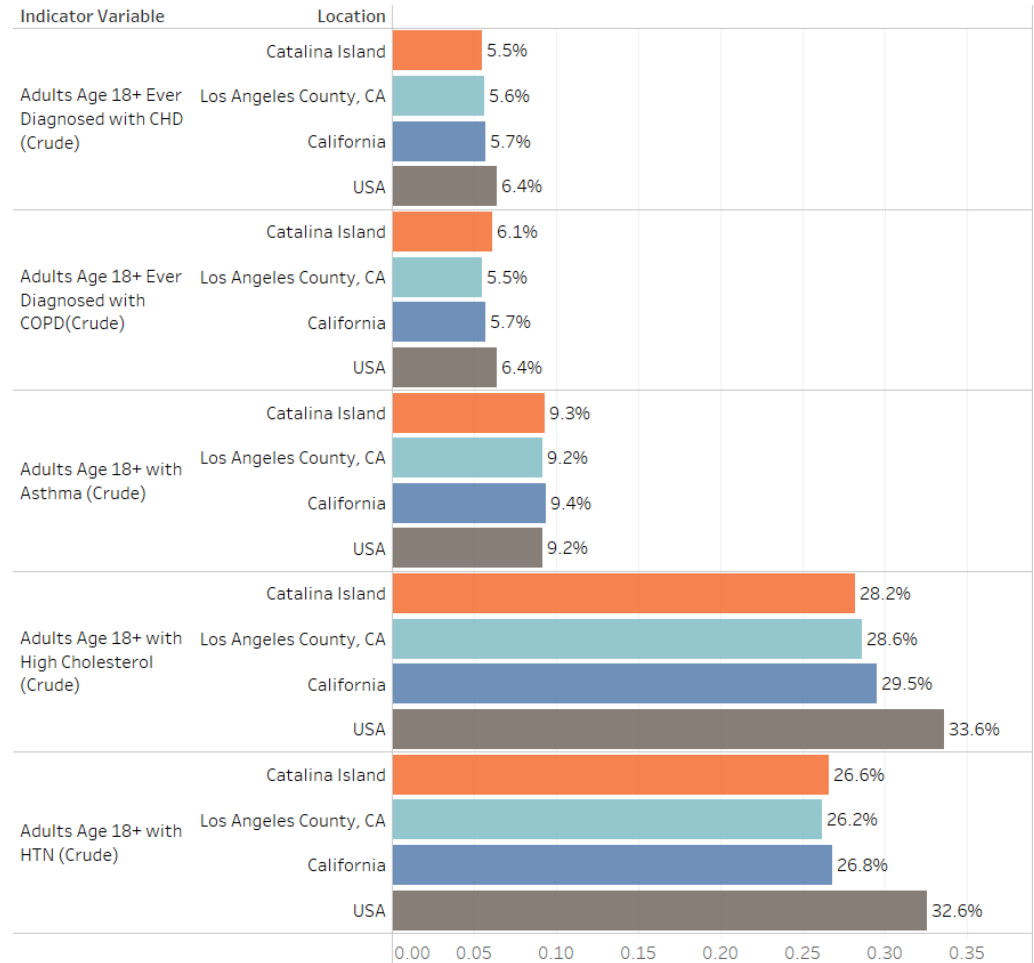
Other than “Adults Age 18+ Ever Diagnosed with COPD,” many chronic illness measures pertaining to high blood pressure, heart disease, high cholesterol, and asthma on Catalina Island are in range with the county or state averages.

A higher percentage of adults diagnosed with COPD is not surprising given that the percentage of current smokers on Catalina Island was higher than county averages.

COPD was described as the 4th largest health issue in the community survey.

Health Outcomes

Chronic Conditions - Asthma Prevalence (Adult), Chronic Conditions - Chronic Obstructive Pulmonary Disease (Adult), Chronic Conditions - Heart Disease (Adult) and 2 more



Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2020. Source geography: Tract



Chronic Conditions cont.

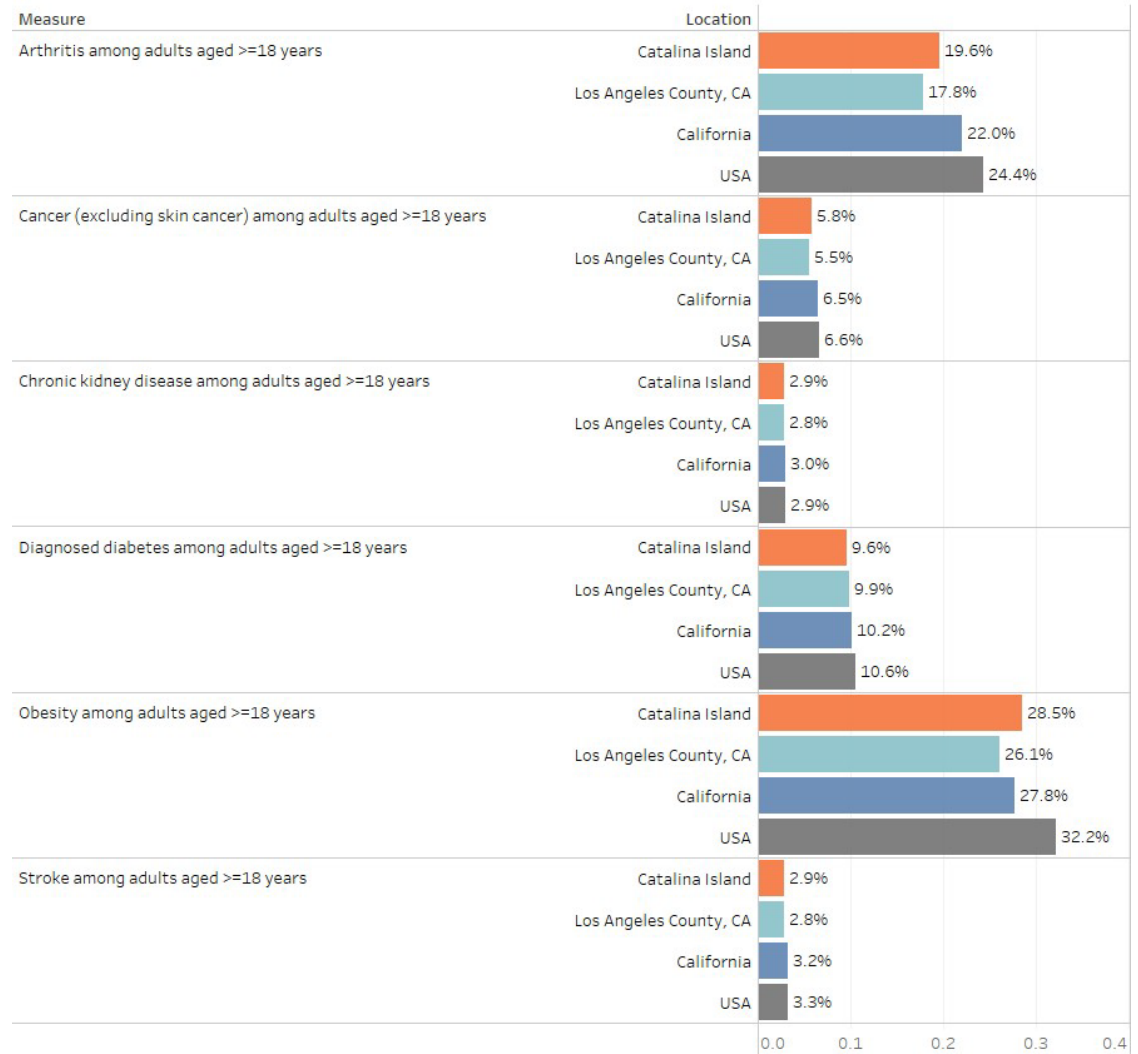
Diagnosed Diabetes rates are low compared to county, state, and national averages. However, the percentage of obesity among adults in the community is over county and state averages. This could be an indicator that there are individuals in the community who are undiagnosed. Additionally, exercise/fitness and diabetes were identified as major health challenges in the community survey.

Catalina Island has a lower rate of arthritis, chronic kidney disease, and stroke among adults than state or national averages, but slightly higher than LA County.

It is critical for Catalina Island and CIMC to maintain and enhance access to primary care providers and specialty care providers as well as care coordination.

98% of community survey respondents said the community needs more healthcare providers with the top priorities in specialists and primary care providers.

Health Outcomes



Source: PLACES: Local Data for Better Health, ZCTA Data, 2022 release (Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health)





 **SURVEY RESULTS**



Survey Results

An online survey helped to capture a broader understanding of the community's perception of healthcare issues and challenges on Catalina Island. The survey was distributed by Catalina Island Medical Center via weblink, email, and local postings. Additionally, a QR Code was created and posted for users to easily access the survey from cell phones. The survey was open for approximately 30 days. Some facts about the survey respondents:

- **69** people responded to the survey
- Almost **80%** of respondents were between the ages of 45 and 80. 17% were under age 45.
- **77%** were female
- **85%** were full-time residents of Catalina Island. 14% were part-time residents, and 2% commuted to the island for work.
- **72%** described themselves as White, 11% were Hispanic or Latino, and 9% were Multiracial or Multicultural
- **65%** were married, 11% were single, and 6% were divorced
- **45%** had employer-sponsored insurance as their primary insurance, 35% had Medicare, 5% were on Medi-Cal (Medicaid), and 6% had privately purchased insurance
- **26%** of those plans were high deductible plans, although 5% weren't sure. 30% said their deductible was under \$500.
- **89%** indicated that their insurance coverage was adequate for their health needs
- **92%** had at least some college education. Of those, 69% had either a bachelor's, post-grad, or doctorate degree.
- **75%** reported an annual income of more than \$75,000, and 9% were less than \$50,000





Survey Results

Key Findings

50.7% rate access to healthcare in the community as Good or Very Good

58.8% rate the overall quality of healthcare in the community as Good or Very Good

Among the top least-accessible services in the community were **Hospice, Family Planning, Optometry Services, and Nursing Home Services**

95.7% have received healthcare services off the island, with **87.9%** seeking specialist care and **54.6%** seeking primary care. **47%** of individuals received care off island because their health insurance was accepted.

78.3% had received care at CIMC or UCI Health at some time in the past three years. **60.9%** indicated they were satisfied or very satisfied with the care they received.

Issues described as major problems in the community are **Sexually Transmitted Disease, Teen Pregnancy, Maternal/Fetal Health, Chronic Obstructive Pulmonary Disease (COPD), and Suicide**

Alcohol, Exercise/Fitness, Aging, Diabetes, and Mental Illness were identified as major health challenges

64.6% of respondents described their health as good, but **22.7%** of respondents felt their health was worse than a year ago

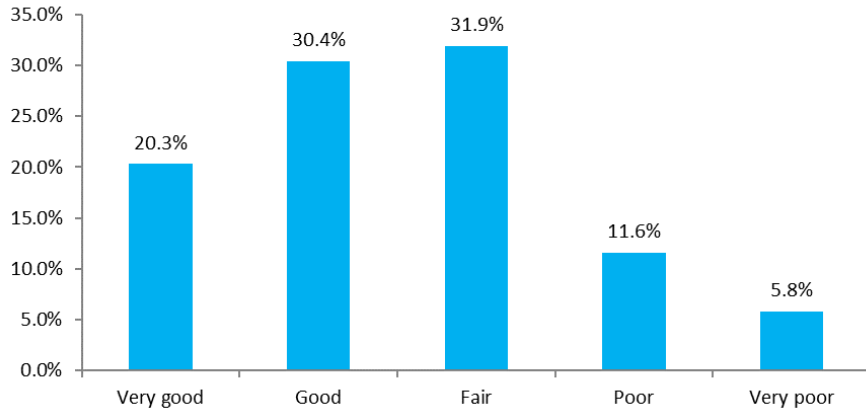
98% respondents said the community needs more healthcare providers. The top providers needed were **Specialists, Primary Care, Dentists, Behavioral/Mental Health specialists, and Pediatricians.**





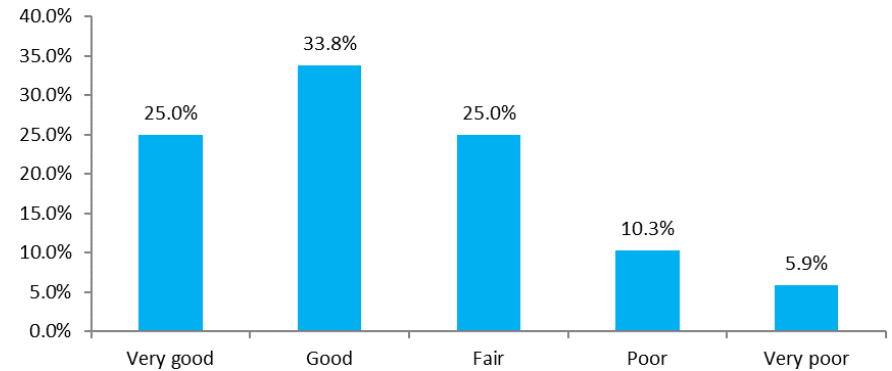
Survey Results

In general, how would you rate access to healthcare in your community?



Answer Choices	Responses	
Very good	20.3%	14
Good	30.4%	21
Fair	31.9%	22
Poor	11.6%	8
Very poor	5.8%	4
Answered		69

How would you rate the overall quality of the healthcare provided in your community?



Answer Choices	Responses	
Very good	25.0%	17
Good	33.8%	23
Fair	25.0%	17
Poor	10.3%	7
Very poor	5.9%	4
Answered		68

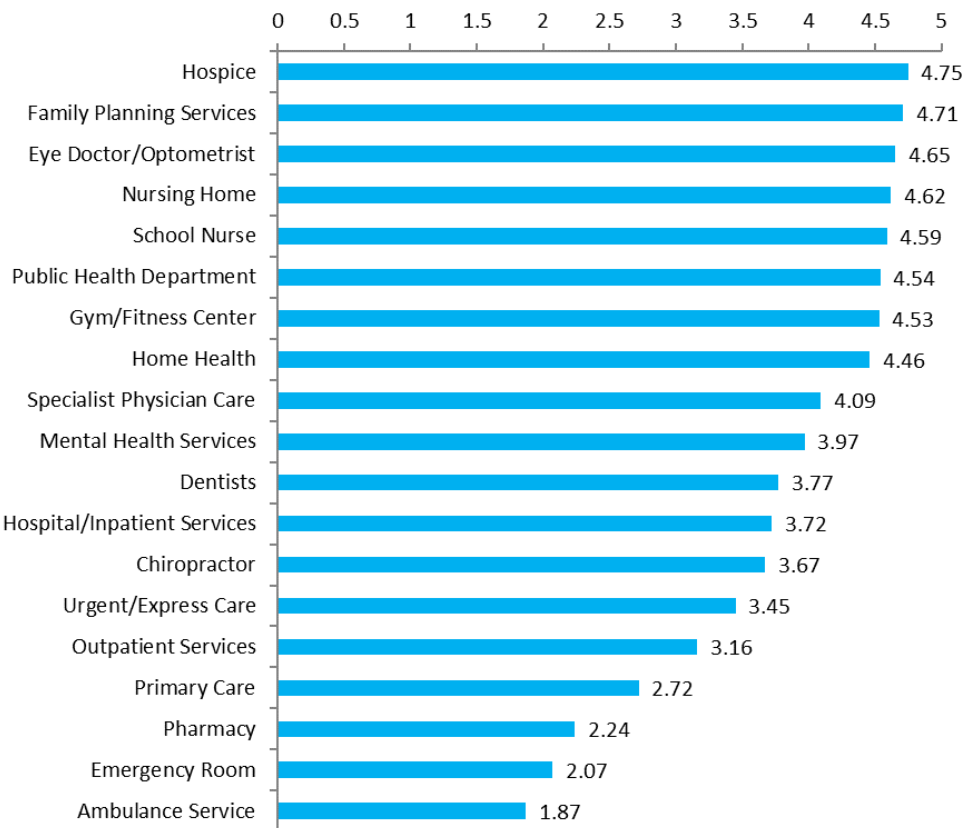




Survey Results

How would you rate the accessibility of each of the following health services in your community? (check one box per row)

The higher the weighted average, the poorer the access.



KEY	
Very Poor	5
Poor	4
Fair	3
Good	2
Very Good	1

	Weighted Average
Hospice	4.75
Family Planning Services	4.71
Eye Doctor/Optomtrist	4.65
Nursing Home	4.62
School Nurse	4.59
Public Health Department	4.54
Gym/Fitness Center	4.53
Home Health	4.46
Specialist Physician Care	4.09
Mental Health Services	3.97
Dentists	3.77
Hospital/Inpatient Services	3.72
Chiropractor	3.67
Urgent/Express Care	3.45
Outpatient Services	3.16
Primary Care	2.72
Pharmacy	2.24
Emergency Room	2.07
Ambulance Service	1.87

69

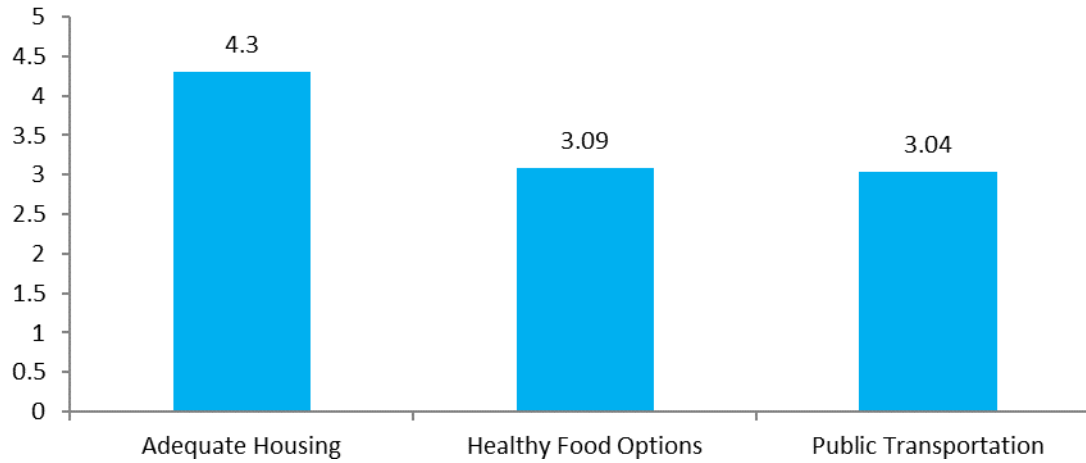




Survey Results

How would you rate the accessibility of each of the following resources in your community? (check one box per row)

KEY	
Very Poor	5
Poor	4
Fair	3
Good	2
Very Good	1



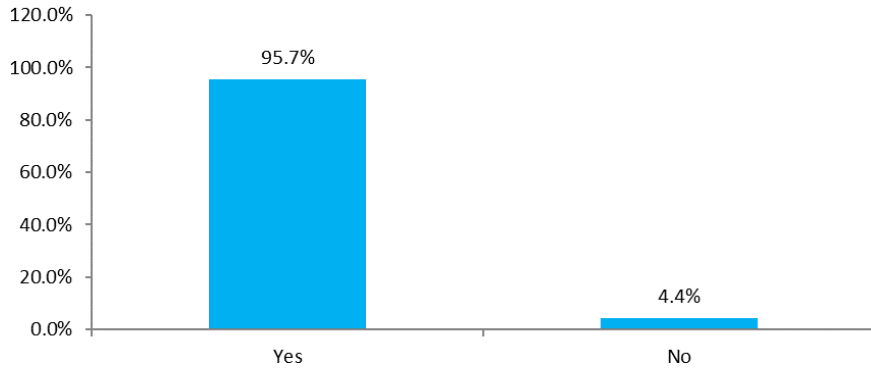
	Weighted Average
Adequate Housing	4.3
Healthy Food Options	3.09
Public Transportation	3.04





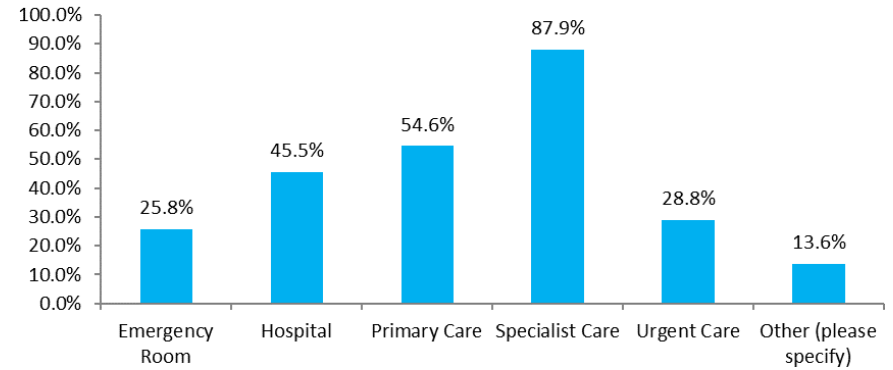
Survey Results

Over the past three years, did you or your household receive health services outside of Catalina Island?



Answer Choices	Responses	
Yes	95.7%	66
No	4.4%	3
Answered		69

If you answered Yes to Question 5, what types of services did you or your household receive?



Answer Choices	Responses	
Emergency Room	25.8%	17
Hospital	45.5%	30
Primary Care	54.6%	36
Specialist Care	87.9%	58
Urgent Care	28.8%	19
Other (please specify)	13.6%	9
Answered		66

Other (please specify)

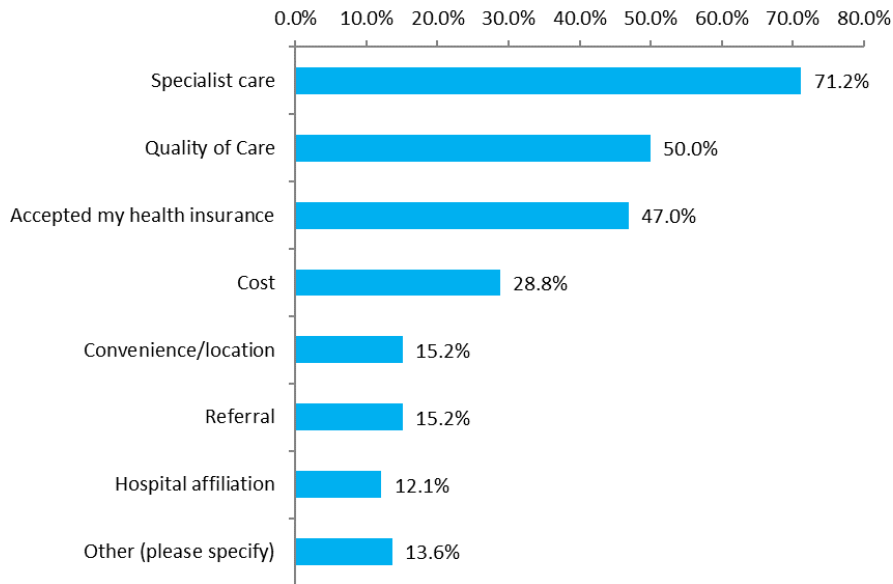
Dentist too
 Rehab
 dentist
 Family planning
 Vaccinations
 Dental/ orthodontist/ surgery/ MRI radiology
 Mammogram
 Dermatologist, mammogram, eye doctor, podiatrist, colonoscopy
 Vision, dental, physical therapy





Survey Results

If you answered Yes to Question 5, why did you choose services outside of Catalina Island?



Answer Choices	Responses	
Specialist care	71.2%	47
Quality of Care	50.0%	33
Accepted my health insurance	47.0%	31
Cost	28.8%	19
Convenience/location	15.2%	10
Referral	15.2%	10
Hospital affiliation	12.1%	8
Other (please specify)	13.6%	9
Answered		66

Other (please specify)

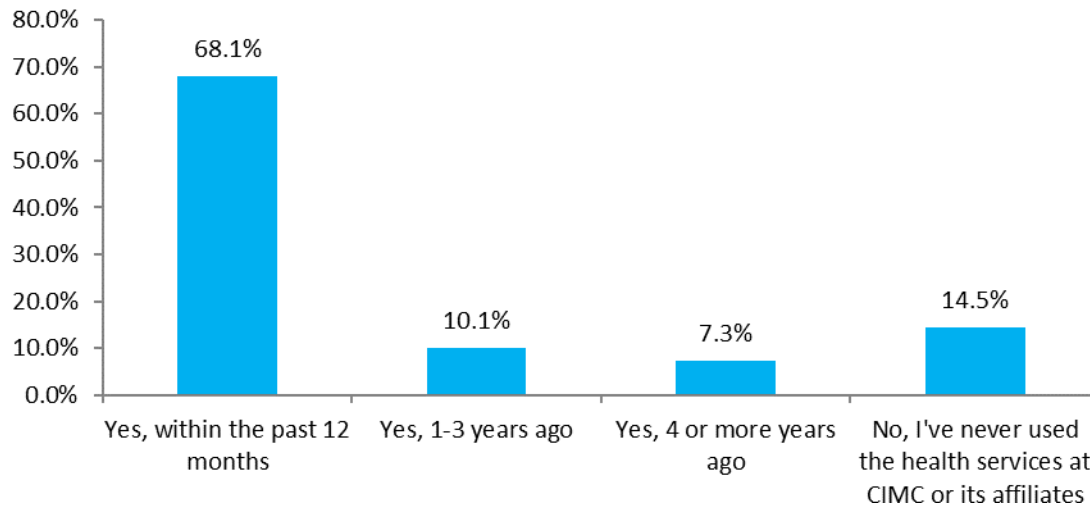
- no specialist on the island
- Kaiser
- Privacy
- Ongoing relationship with providers
- not available here
- Not available on island and / or not in network
- Not offered here
- Services not available on the island





Survey Results

Have you ever used the healthcare services of CIMC or its clinical affiliate University of California Irvine Health (UCI Health)?



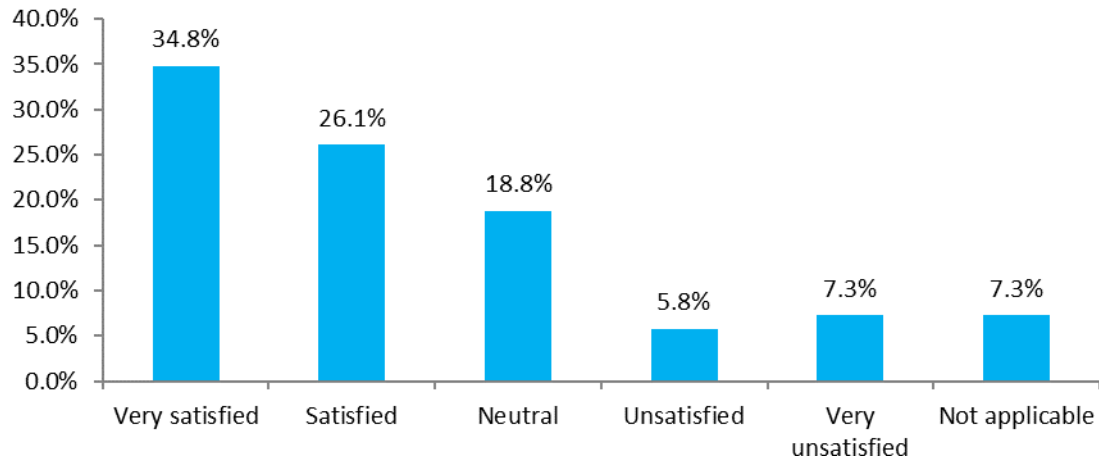
Answer Choices	Responses	
Yes, within the past 12 months	68.1%	47
Yes, 1-3 years ago	10.1%	7
Yes, 4 or more years ago	7.3%	5
No, I've never used the health services at CIMC or its affiliates	14.5%	10
	Answered	69





Survey Results

How would you rate your overall experience with the healthcare services you received from CIMC or its affiliates?



Answer Choices	Responses	
Very satisfied	34.8%	24
Satisfied	26.1%	18
Neutral	18.8%	13
Unsatisfied	5.8%	4
Very unsatisfied	7.3%	5
Not applicable	7.3%	5
Answered		69

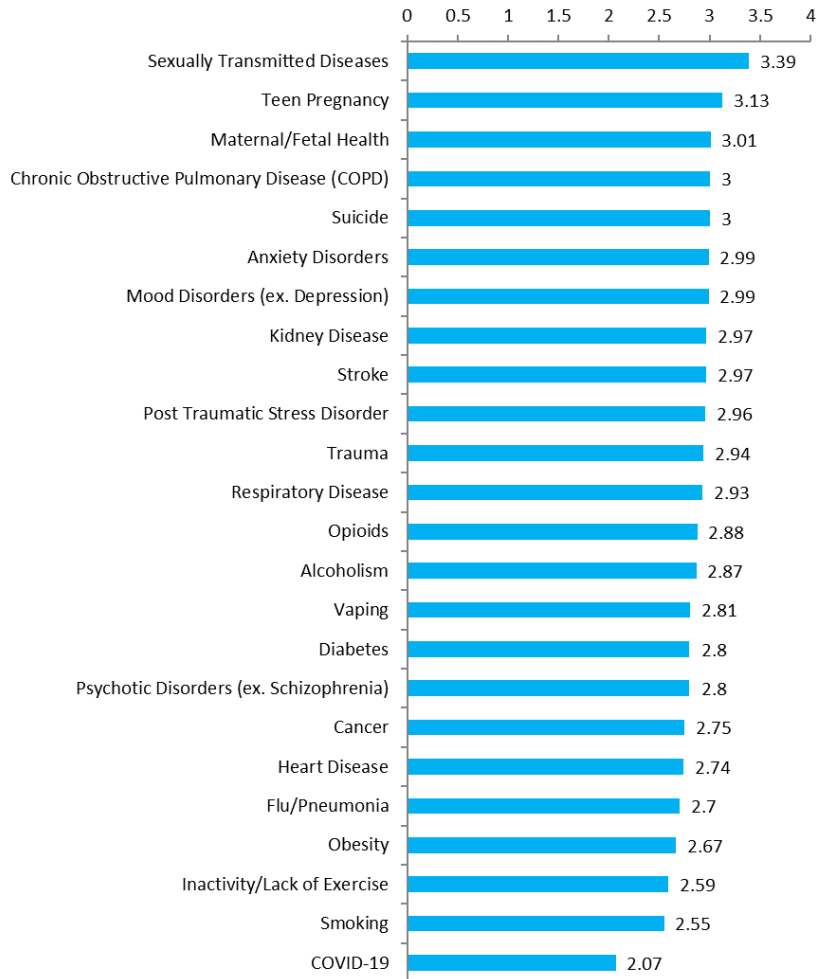




Survey Results

In your opinion, how significant of a problem are the following in your community? (check one box per row)

The higher the weighted average, the more significant the problem.



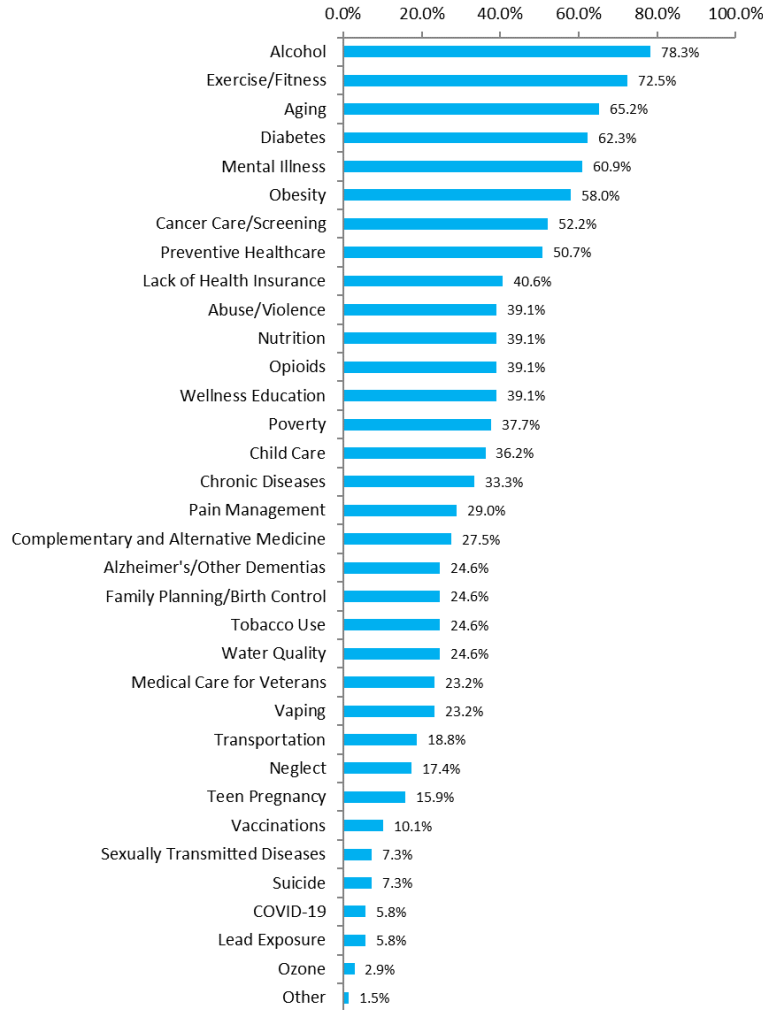
	Weighted Average
Sexually Transmitted Diseases	3.39
Teen Pregnancy	3.13
Maternal/Fetal Health	3.01
Chronic Obstructive Pulmonary Disease (COPD)	3
Suicide	3
Anxiety Disorders	2.99
Mood Disorders (ex. Depression)	2.99
Kidney Disease	2.97
Stroke	2.97
Post Traumatic Stress Disorder	2.96
Trauma	2.94
Respiratory Disease	2.93
Opioids	2.88
Alcoholism	2.87
Vaping	2.81
Diabetes	2.8
Psychotic Disorders (ex. Schizophrenia)	2.8
Cancer	2.75
Heart Disease	2.74
Flu/Pneumonia	2.7
Obesity	2.67
Inactivity/Lack of Exercise	2.59
Smoking	2.55
COVID-19	2.07





Survey Results

In your opinion, what are the major health challenges facing your community?
(check all that apply)



Answer Choices	Responses	Count
Alcohol	78.3%	54
Exercise/Fitness	72.5%	50
Aging	65.2%	45
Diabetes	62.3%	43
Mental Illness	60.9%	42
Obesity	58.0%	40
Cancer Care/Screening	52.2%	36
Preventive Healthcare	50.7%	35
Lack of Health Insurance	40.6%	28
Abuse/Violence	39.1%	27
Nutrition	39.1%	27
Opioids	39.1%	27
Wellness Education	39.1%	27
Poverty	37.7%	26
Child Care	36.2%	25
Chronic Diseases	33.3%	23
Pain Management	29.0%	20
Complementary and Alternative Medicine	27.5%	19
Alzheimer's/Other Dementias	24.6%	17
Family Planning/Birth Control	24.6%	17
Tobacco Use	24.6%	17
Water Quality	24.6%	17
Medical Care for Veterans	23.2%	16
Vaping	23.2%	16
Transportation	18.8%	13
Neglect	17.4%	12
Teen Pregnancy	15.9%	11
Vaccinations	10.1%	7
Sexually Transmitted Diseases	7.3%	5
Suicide	7.3%	5
COVID-19	5.8%	4
Lead Exposure	5.8%	4
Ozone	2.9%	2
Other	1.5%	1

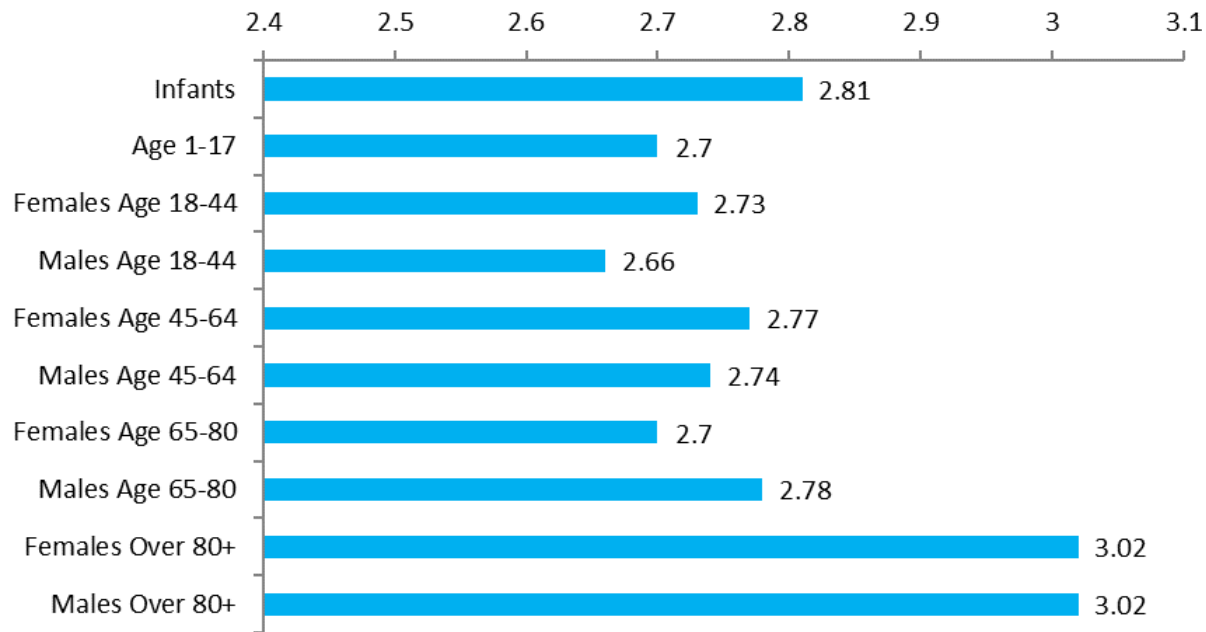
Answered 69





Survey Results

How would you rate CIMC in addressing the needs of the following age groups?
(check one per row)



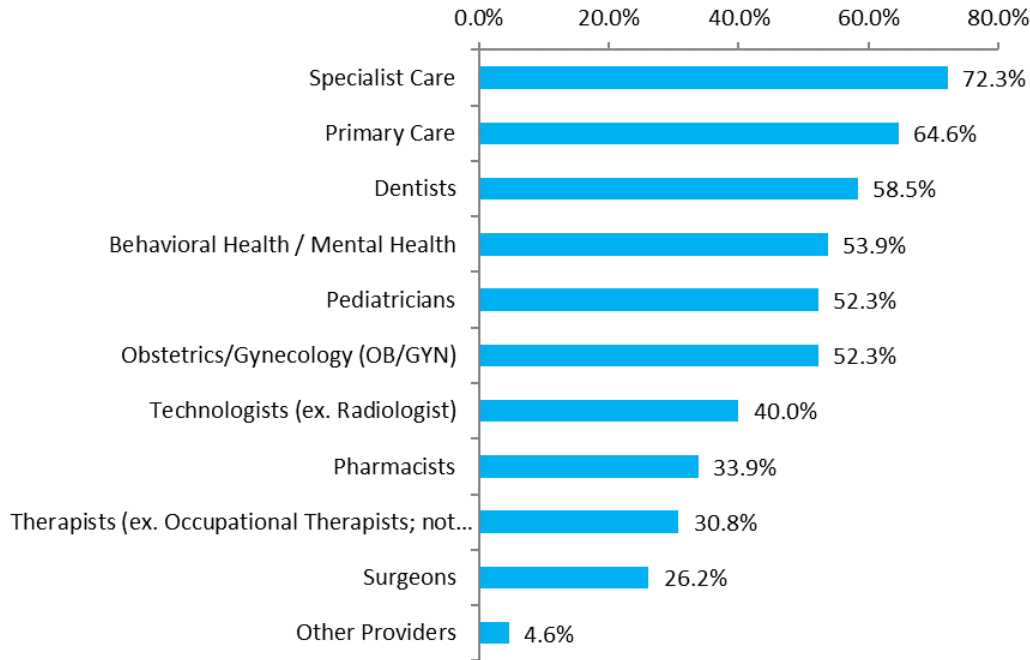
The higher the weighted average, the poorer the rating for addressing needs.





Survey Results

If Yes, what types of providers are needed? (check all that apply)



92.8% of respondents answered “Yes” to the question:
Do you think your community needs additional healthcare providers?

Answer Choices	Responses
Specialist Care	72.3% 47
Primary Care	64.6% 42
Dentists	58.5% 38
Behavioral Health / Mental Health	53.9% 35
Pediatricians	52.3% 34
Obstetrics/Gynecology (OB/GYN)	52.3% 34
Technologists (ex. Radiologist)	40.0% 26
Pharmacists	33.9% 22
Therapists (ex. Occupational Therapists; not Behavioral Health)	30.8% 20
Surgeons	26.2% 17
Other Providers	4.6% 3
	Answered 64

Please specify other providers

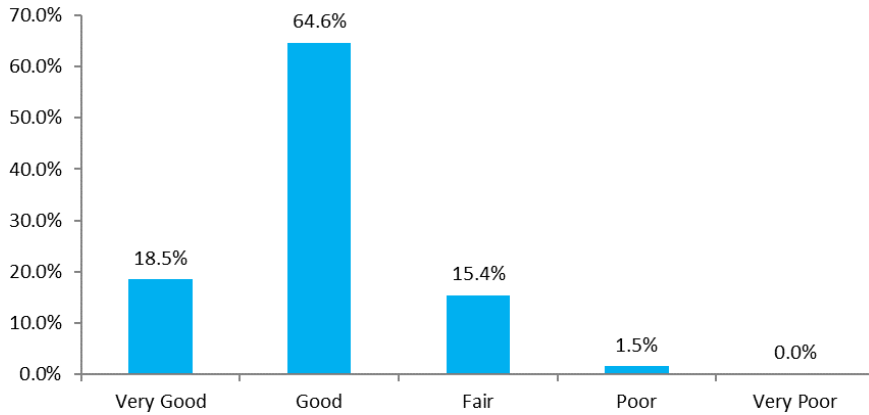
- One local insurances take
- On site Laboratory
- Professionally trained field related educated certified nurses and administration
- Dialysis
- Ophthalmologists.
- Eye Doctor
- Osteopath, nutrition





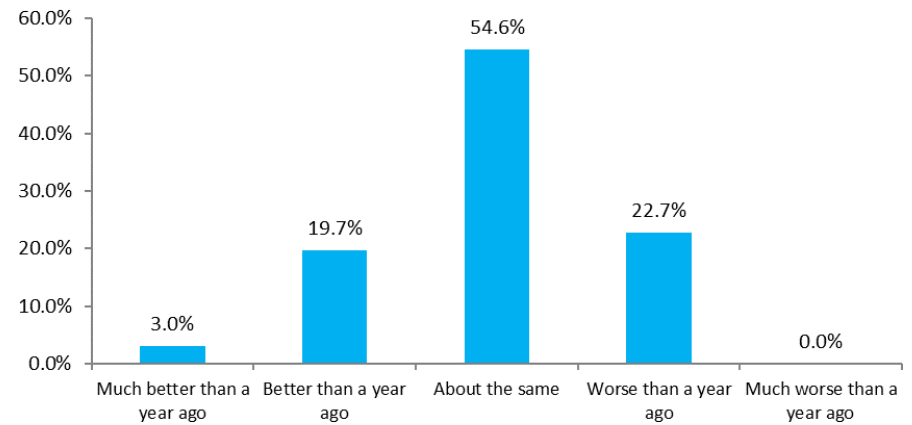
Survey Results

How would you best describe your health? (choose one)



Answer Choices	Responses	
Very Good	18.5%	12
Good	64.6%	42
Fair	15.4%	10
Poor	1.5%	1
Very Poor	0.0%	0
Answered		65

Compared to a year ago, how would you rate your overall health now?



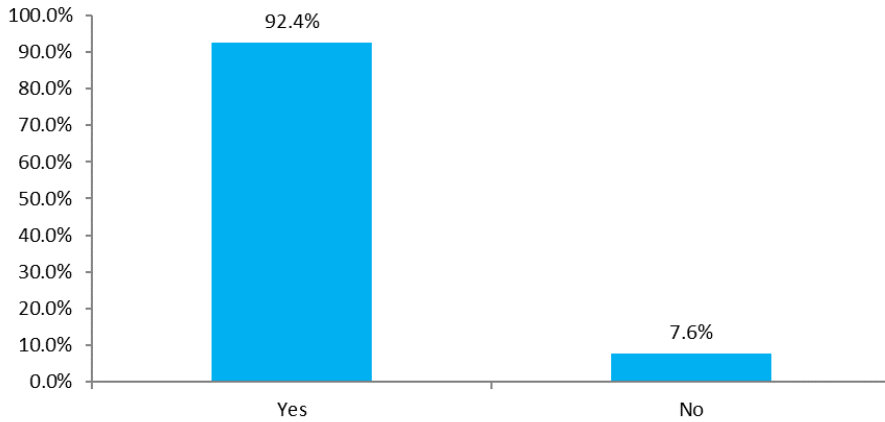
Answer Choices	Responses	
Much better than a year ago	3.0%	2
Better than a year ago	19.7%	13
About the same	54.6%	36
Worse than a year ago	22.7%	15
Much worse than a year ago	0.0%	0
Answered		66





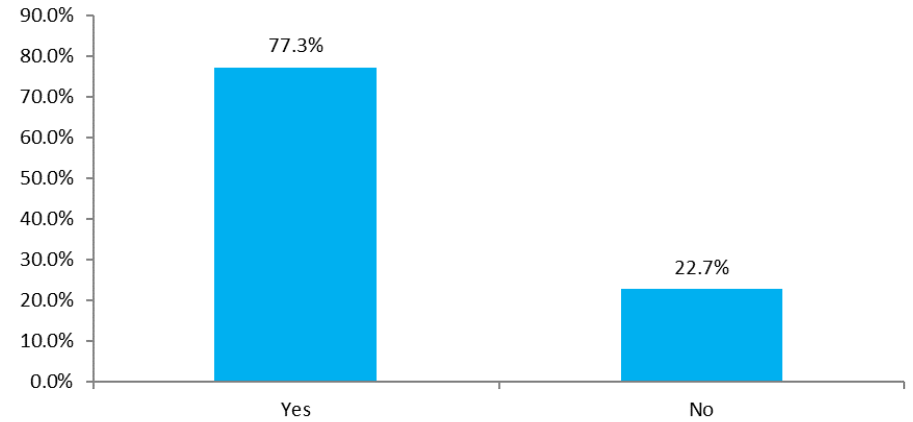
Survey Results

Does your household use a primary care provider?



Answer Choices	Responses	
Yes	92.4%	61
No	7.6%	5
Answered		66

Have you had an annual physical exam within the past 12 months?



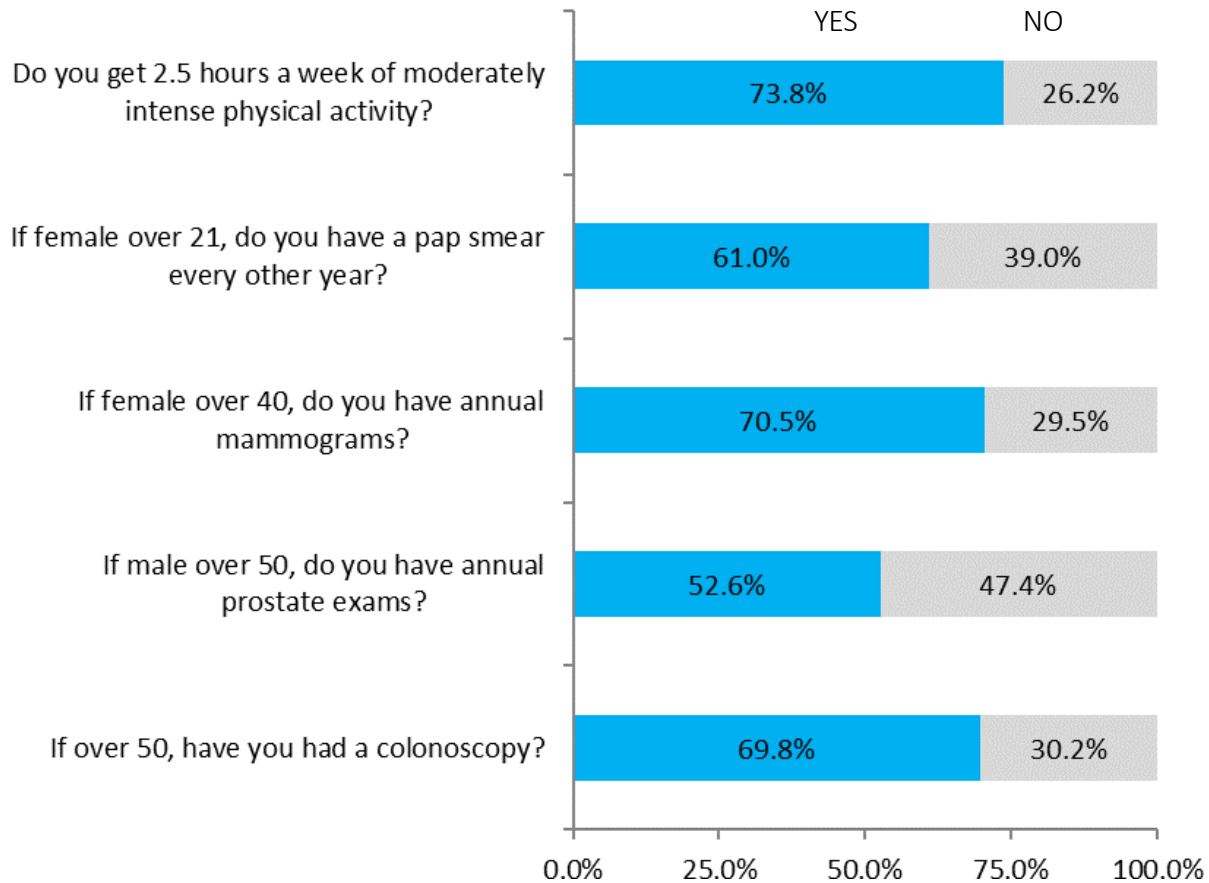
Answer Choices	Responses	
Yes	77.3%	51
No	22.7%	15
Answered		66





Survey Results

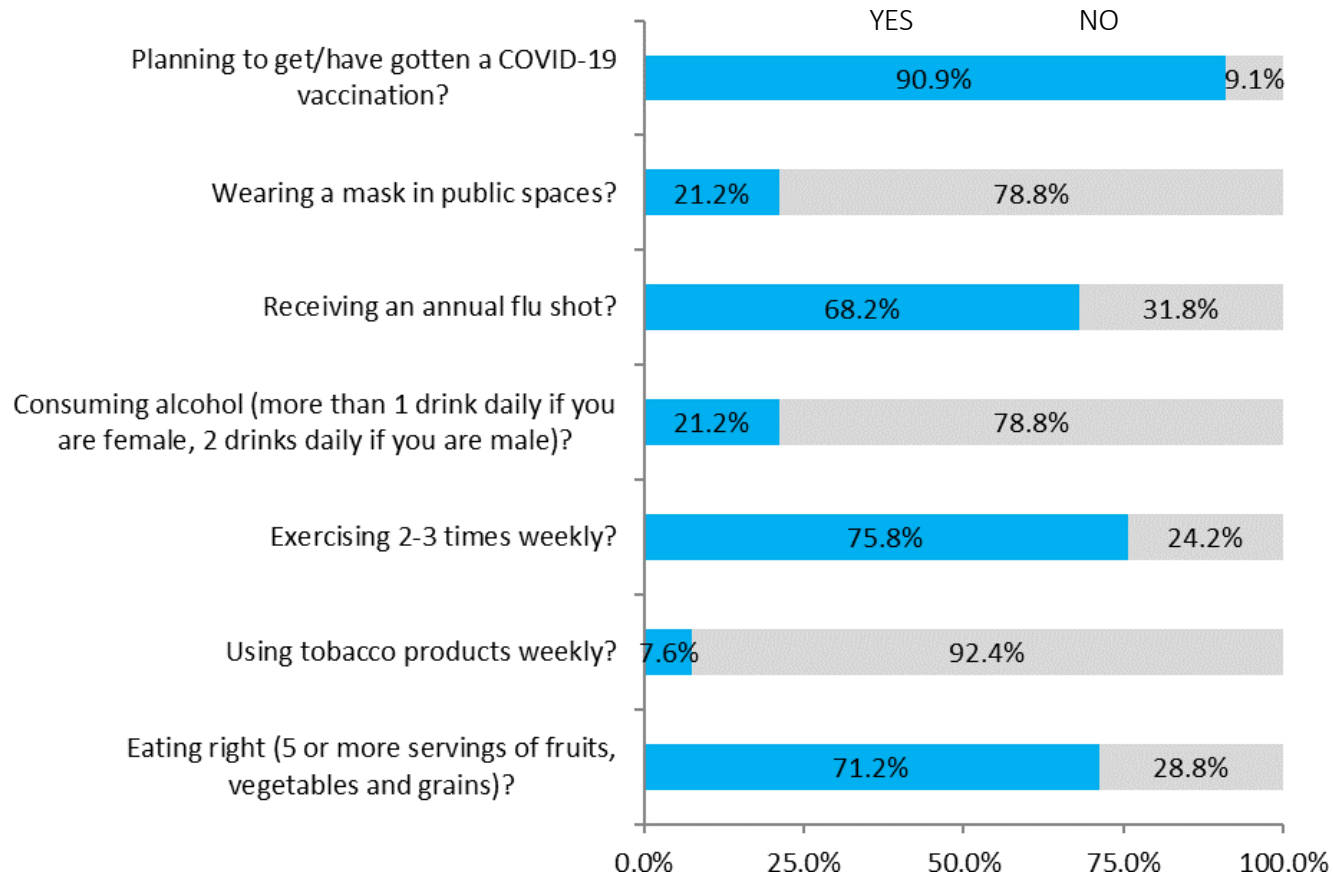
Please complete the questions below.





Survey Results

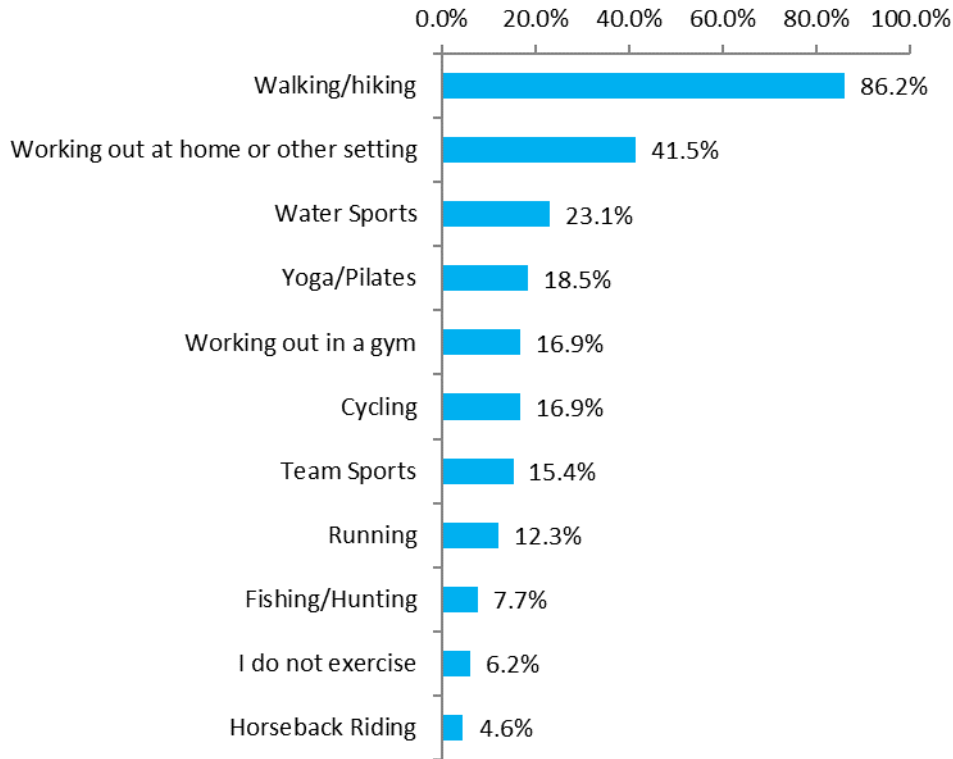
Please complete the questions below.





Survey Results

If you exercise, what are some activities you choose?



Answer Choices	Responses	Count
Walking/hiking	86.2%	56
Working out at home or other setting	41.5%	27
Water Sports	23.1%	15
Yoga/Pilates	18.5%	12
Working out in a gym	16.9%	11
Cycling	16.9%	11
Team Sports	15.4%	10
Running	12.3%	8
Fishing/Hunting	7.7%	5
I do not exercise	6.2%	4
Horseback Riding	4.6%	3
Other (please specify)		4
Answered		65
Skipped		4

Other (please specify)

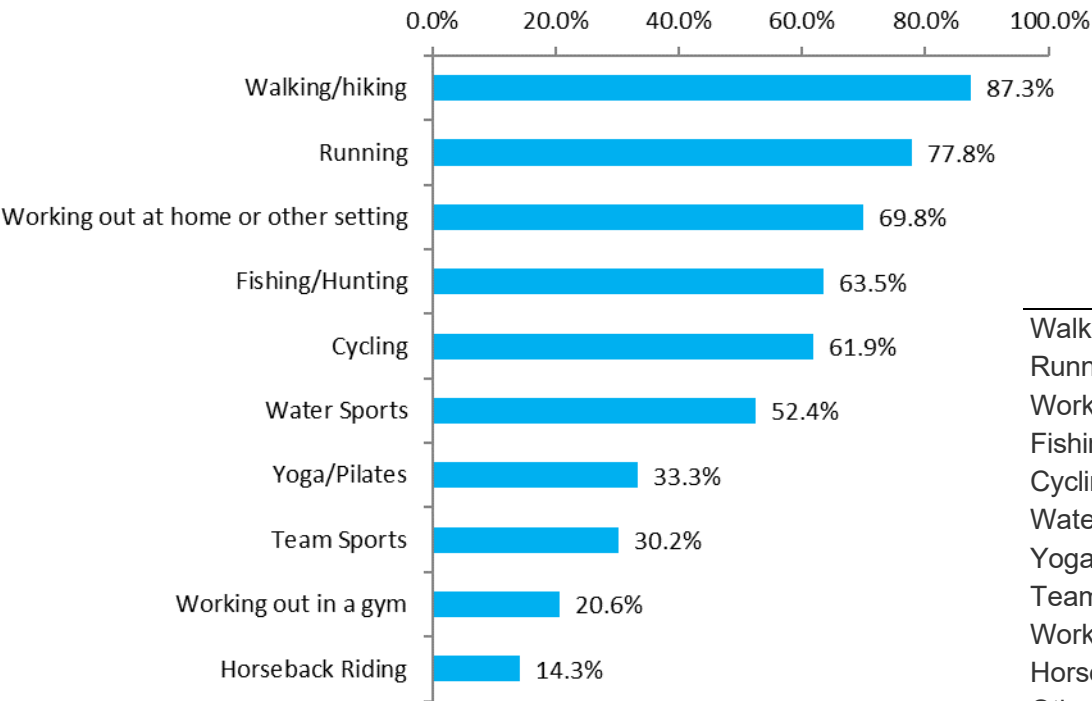
- Swimming
- Golf
- Inconsistent walking
- Tennis





Survey Results

What are some activities that are available to you in your community?



Answer Choices	Responses	
Walking/hiking	87.3%	55
Running	77.8%	49
Working out at home or other setting	69.8%	44
Fishing/Hunting	63.5%	40
Cycling	61.9%	39
Water Sports	52.4%	33
Yoga/Pilates	33.3%	21
Team Sports	30.2%	19
Working out in a gym	20.6%	13
Horseback Riding	14.3%	9
Other (please specify)		1
Answered		62





RECOMMENDATIONS

Health Needs in Avalon

Below are the most prominent health needs in Catalina Island based on the above analysis. Each need can be incorporated into the existing Strategic Plan for Catalina Island Medical Center.

Mental Health

Housing

Specialty
Access

Care
Coordination
and Education



Mental Health

- We recommend that CIMC modify some of its Strategic Plan goals to include collaboration with mental health providers instead of only primary care and specialty care.
- Data supporting this recommendation:
 - Mental health and substance abuse were brought up in almost every stakeholder interview.
 - Catalina Island has a larger population with poor mental health than county and state averages.
 - Catalina Island has had a greater rate of binge drinking in the past 30 days than county, state, and national averages.
 - Depression among adults aged 18 years or older is 15% greater on Catalina Island than in LA county.
 - Cultural biases within the community are a large barrier to utilizing the provided mental health services.
 - Alcohol, and Mental Illness were identified as major health challenges via the community survey.

Goal II B: Ensure Adequate Supply of Primary Care Providers to Meet Service Needs	
Additional Action Plans	Continue to promote the availability of licensed social workers and collaborate with other providers to publicize mental health services available on Catalina Island.
	Work to break down cultural barriers to increase patient access to provider services.
	Continue to utilize and provide telepsych services.
	Educate community on services available and financial options available for services.



Housing

- We recommend that CIMC modify some of its Strategic Plan goals to include greater collaboration and focus on the housing crises on Catalina Island. Data supporting this recommendation:
 - Catalina Island has over 5 times the LA County average for vacant housing compared to close to 3 times the national average. Too many vacation rentals and second homes leaves less housing available for families and individuals who live and work on Catalina Island full-time.
 - Catalina Island has fewer U.S. Department of Housing and Urban Development assisted housing units than the county, state, and national averages.
 - Average monthly homeowner costs are 81% higher than state averages and 68% higher than county averages. The average household value on the island is 73% higher than the state average, and 53% higher than county averages.
 - The cost burden for households on Catalina Island is higher than county, state, and national averages at 27.2%.
 - Catalina Island has over twice the county and state averages of homeless students, and over three times the national average.

Goal 1 B: CIMC to become employer of choice in Avalon		Goal IV C: Improve health equity across the entire service area	
Existing Action Plans	Develop a housing policy that meets the needs of CIMC and its employees	Additional Action Plans	Collaborate with community organizations to increase availability of long-term affordable rentals
			Collaborate with organizations to increase assisted housing units on Catalina Island



Specialty Access

- CIMC has existing action plan items associated with strategic goals around specialty care as outlined below. We recommend CIMC continue to execute these action items and monitor specialty needs on the island. Data supporting this recommendation:
 - Catalina Island has a larger population with poor dental health, poor mental health, and poor physical health relative to county and state averages.
 - Catalina has higher rates than county averages in current smoking among adults, and higher than state averages in sleeping less than 7 hours among adults. These behaviors are linked to greater incidences of chronic disease such as obesity and poor cardiovascular health. Excessive drinking is defined as more than two drinks a day for men and more than one for women.
 - Catalina Island has a slightly higher rate of arthritis, chronic kidney disease, and stroke among adults than LA County.
 - 98% of community survey respondents said the community needs more healthcare providers. The top providers needed were specialists and primary care.

Goal I C: Explore, maintain and expand services to increase patient volume and market share		Goal II C: Assess specialty care needs of our service area and further develop specialty care network to meet demands		Goal III A: Explore opportunities for mutually beneficial relationship with tertiary, regional and peer providers	
Existing Action Plans	Implement hospital infusion services program	Existing Action Plans	Proactively recruit specialists to come out physically and virtually to CIMC	Existing Action Plans	Evaluate opportunities with regional providers to develop high value, mutually beneficial relationships that would benefit our service area, provide additional in person and telemedicine specialty consultation / clinic opportunities while maintaining CIMC independence and flexibility to refer patients where appropriate
	Evaluate feasibility of dialysis program				
	Develop comprehensive telehealth services				
Additional Action Plans	Create marketing campaigns around the addition of new providers and services in the community in both Spanish and English.				



Care Coordination and Education

- We recommend that CIMC adapt its Strategic Plan to include public education on healthy behaviors and resources available to the Catalina Island community and create greater coordination of care with not only providers in the community but organizations. We find there is room for greater collaboration to help tackle the complex health issues present on Catalina Island. Data supporting this recommendation:
 - The percentage of obesity among adults in the community is over county and state averages.
 - Catalina Island has a larger proportion of residents who are prone to excessive drinking.
 - Catalina has higher rates than county averages in current smoking among adults, and higher than state averages in sleeping less than 7 hours among adults.

Goal III A: Explore opportunities for mutually beneficial relationship with tertiary, regional, and peer providers		Goal IV D: Improve community health	
Existing Action Plans	Evaluate opportunities with regional providers to develop high value, mutually beneficial relationships that would benefit our service area, provide additional in person and telemedicine specialty consultation / clinic opportunities while maintaining CIMC independence and flexibility to refer patients where appropriate	Existing Action Plans	Develop Community Outreach programs to improve community health (i.e., exercise programs, fitness center, yoga, nutrition, etc.)
		Additional Action Plans	Look at opportunities for greater coordination of care for patients between the hospital, and other health organizations in the community that can contribute substance abuse support, mental health support, consistent follow up treatment, and housing.
			Further education on health services available and healthy eating behaviors, such as nutrition services. Publicize services through primary care physicians and social media.



Outline of Implementation Plan

- Adoption of implementation strategy must be done before the 15th day of the fifth month after the end of the taxable year. An implementation strategy must describe how the hospital facility plans to address a significant health need identified in the CHNA and contains:
 - The actions the hospital facility intends to take to address the health need and the anticipated impact of these actions,
 - The resources the hospital facility plans to commit to addressing the health need, and
 - Any planned collaboration between the hospital facility and other facilities or organizations in addressing the health need.
- CIMC has done the work in creating a CHNA in combination with a strategic plan. The required implementation plan should tie directly into the strategic plan already created with the additional action plan items outlined in the recommendations section of the CHNA.



Outline of Implementation Plan: Priority 1 Mental Health

Health Need	Objectives	Strategy	Resources
Mental Health	Goal II B: Ensure Adequate Supply of Primary Care Providers to Meet Service Needs	Continue to promote the availability of licensed social workers and collaborate with other providers to publicize mental health services available on Catalina Island.	CIMC to identify
		Work to break down cultural barriers to increase patient access to provider services.	CIMC to identify
		Continue to utilize and provide telepsych services.	CIMC to identify
		Educate community on services available and financial options available for services.	CIMC to identify



Outline of Implementation Plan: Priority 2 Housing

Health Need	Objectives	Strategy	Resources
Housing	Goal 1 B: CIMC to become employer of choice in Avalon	Develop a housing policy that meets the needs of CIMC and its employees	CIMC to identify
	Goal IV C: Improve health equity across the entire service area	Collaborate with community organizations to increase availability of long-term affordable rentals	CIMC to identify
		Collaborate with organizations to increase assisted housing units on Catalina Island	CIMC to identify



Outline of Implementation Plan: Priority 3 Specialty Access

Health Need	Objectives	Strategy	Resources
Specialty Access	Goal I C: Explore, maintain and expand services to increase patient volume and market share	Implement hospital infusion services program	CIMC to identify
		Evaluate feasibility of dialysis program	CIMC to identify
		Develop comprehensive telehealth services	CIMC to identify
		Create marketing campaigns around the addition of new providers and services in the community in both Spanish and English	CIMC to identify
	Goal II C: Assess specialty care needs of our service area and further develop specialty care network to meet demands	Proactively recruit specialists to come out physically and virtually to CIMC	CIMC to identify
	Goal III A: Explore opportunities for mutually beneficial relationship with tertiary, regional and peer providers	Evaluate opportunities with regional providers to develop high value, mutually beneficial relationships that would benefit our service area, provide additional in person and telemedicine specialty consultation / clinic opportunities while maintaining CIMC independence and flexibility to refer patients where appropriate	CIMC to identify



Outline of Implementation Plan: Priority 4 Care Coordination and Education

Health Need	Objectives	Strategy	Resources
Care Coordination and Education	<p>Goal III A: Explore opportunities for mutually beneficial relationship with tertiary, regional, and peer providers</p>	<p>Evaluate opportunities with regional providers to develop high value, mutually beneficial relationships that would benefit our service area, provide additional in person and telemedicine specialty consultation / clinic opportunities while maintaining CIMC independence and flexibility to refer patients where appropriate</p>	<p>CIMC to identify</p>
		<p>Develop Community Outreach programs to improve community health (i.e., exercise programs, fitness center, yoga, nutrition, etc.)</p>	<p>CIMC to identify</p>
	<p>Goal IV D: Improve community health</p>	<p>Look at opportunities for greater coordination of care for patients between the hospital, and other health organizations in the community that can contribute substance abuse support, mental health support, consistent follow up treatment, and housing.</p>	<p>CIMC to identify</p>
		<p>Further education on health services available and healthy eating behaviors, such as nutrition services. Publicize services through primary care physicians and social media.</p>	<p>CIMC to identify</p>





APPENDIX

IRS Requirements for CHNA

The Internal Revenue Service requires hospitals to conduct a CHNA every three years. Below are the IRS requirements from Schedule H Form 990, Part V, Section B, with the corresponding section from this report:

Item	Description	Slides
3a	A definition of the community served by the hospital facility	16
3b	Demographics of the community	15 -23
3c	Existing healthcare facilities and resources within the community that are available to respond to the health needs of the community	56
3d	How data was obtained	11
3e	The significant health needs of the community	10 - 91
3f	Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups	65 - 71
3g	The process for identifying and prioritizing community health needs and services to meet the community health needs	11
3h	The process for consulting with persons representing the community's interests	11
3i	The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)	105 - 107



Impact of Action Taken Since 2020

Implementation Plan Priority #105

Priority #1	Resources	Objectives	Strategies	Outcomes
Engage the Community in Planning to Build a New Hospital	CIMC; K-12 School; rotary Club; Chamber of Commerce; Local Business	Complete architectural design of new hospital	Achieve passage of voter initiative to implement cross channel fee	Initiative passed November 2020
			Raise a minimum of \$15 million dollars from private donors and foundations	\$3.75 million raised to date
			Secure funding for remaining portion of capital costs through USDA	Application is in development for submittal



Impact of Action Taken Since 2020

Implementation Plan Priority #106

Priority #2	Resources	Objectives	Strategies	Outcomes
Decrease Obesity and Increase Physical Fitness	CIMC; Local Business	Prevent and reduce the level of obesity on Catalina through improved nutrition, physical activity and supportive environments.	Proactively help individual's management of diet, fitness and healthy behaviors with the supervision of a physician.	Medically supervised weight loss program beginning September 2023. Fitness center opened June 2023.
			Create a holistic approach to improve the lives of community members	CIMC is in the process of developing an integrative medicine program with a focus on the social determinants of health
			Develop program to perform a comprehensive assessment of patient's overall health.	Due to COVID-19 CIMC decided not to pursue strategy at the time
			Provide services and protocols for: <ul style="list-style-type: none"> • Diet and nutrition • Physical fitness • Hormone therapy • Sleep patterns • Counseling • Weight loss medications • Dietary supplements • Develop motivational information for participants 	<ul style="list-style-type: none"> • Nutritionist services available • Fitness facility opened • Personal trainers services available • Hormone therapy services available • Nurse Practitioner Psychiatry services available • Psychologist services available



Impact of Action Taken Since 2020

Implementation Plan Priority #107

Priority #3	Resources	Objectives	Strategies	Outcomes
Improve Access to Behavioral Health Services	CIMC; K-12 School; Tarzana Treatment Centers; Telemedicine	Increase patient access by 10%	Integrate psychology services into primary care	Psychologist employed, additional LCSW hired
			Build a full continuum of behavioral health services	Nurse Practitioner Psychiatry employed
			Link all the providers	Providers collaborate to address complex patient issues on a regular basis

