

I. Executive Summary

Located on Nantucket, an island 30 miles south of the Massachusetts mainland, Nantucket Cottage Hospital delivers health care under unique circumstances: providing quality facilities, programs, and services to a year-round population of 10,000 residents, which increases to almost 60,000 during the summer months, all while being isolated from the mainland. Today, this 104-year-old hospital includes 19 in-patient beds, a wide range of modern diagnostic and treatment capabilities for both emergency and ongoing care, as well as surgical, labor and delivery, laboratory, outpatient, and numerous other outreach services and programs. This report is part of Nantucket Cottage Hospital's ongoing efforts to assess the health needs of the island community, and fulfills a mandate for non-profit hospitals to complete and report on a triennial basis a formal Community Health Needs Assessment and Implementation Plan to the Massachusetts Attorney General's Office and the U.S. Internal Revenue Service.



Community Benefit Mission

Approved by the Board of Trustees at the November 17, 2004 Board Meeting Reviewed and Updated by the Executive Committee on April 21, 2011

Reflecting a strong tradition of caring and sense of community, the mission of Nantucket Cottage Hospital (NCH) is to be the island's primary source of a full range of health and wellness services. NCH assumes the leadership role within the community by collaborating with other local organizations, by ensuring availability of an integrated array of health care services, and by responding to the needs of the increasingly diverse Nantucket community.

Comprising a proficient and dedicated team of physicians, management, staff, and volunteers, NCH provides services in an expert, compassionate, respectful, and responsive manner; is fiscally responsible; and is prepared to respond to essential health care needs directly from within the



community, or to meet expanded needs indirectly through an extensive network of off-island health care partners, including its affiliates Massachusetts General Hospital and Partners HealthCare.

NCH promotes wellness for people of all ages through prevention, education, and readily accessible health care services, in an effort to improve the general health, vitality, and quality of life for all Nantucket residents and visitors.

In 2015, we conducted a Community Health Assessment (CHA) survey and developed a plan that included an assessment of quantitative data and qualitative input from various segments of the community to provide the best possible strategic analysis of community needs.

Target Population

The population on Nantucket can be grouped into 3 residency types:

- 1. Year-round residents: Persons residing on Nantucket year-round
- 2. Summer residents: Persons residing on Nantucket in July and August
- 3. Shoulder residents: Persons residing on Nantucket in April, May, June, and September, October

Our Community Health Assessments focused on year-round residents who represent a disproportionate share of the medically-underserved and vulnerable on the island. These residents are also most directly impacted by the assets and deficits that exist on the island.

Community Health Assessment Key Findings

The top health needs identified through quantitative data review and qualitative input analysis were:

- 1. Alcohol Use Disorders (AUDs) and Substance Use Disorders (SUDs)
- 2. Access to Housing
- 3. Mental Health Disorders
- 4. Cancer

In addition, the following factors were identified as key to defining a health community:

- Access to Health Care
- Good Schools, Jobs, and Economy

Community Health Priorities

Based on these key findings, Nantucket Cottage Hospital adopted these four health needs as priorities for our Community Health Implementation Plan

Priority	Goal
Alcohol and Substance Use	To address the alcohol and substance use disorders issue in the Nantucket
Disorders	community, identify gaps in services for those in need, and support the efforts of the
	Nantucket Behavioral Health Task Force and other community efforts in these areas.
Access to Housing	Play a proactive role in helping to address the island's affordable housing crisis, and use NCH's position as one of the largest private employers on the island to advocate for and implement solutions.
Mental Health Disorders	Continue to serve as the acute safety net for island patients requiring psychiatric evaluation, stabilization, observation, and/or transfer off-island. Identify gaps in



	services and support the work of the Behavioral Health Task Force to fill them and collaborate with other community agencies and initiatives.
Cancer	To provide cancer screenings and education to the Nantucket community, while sustaining the growth in NCH's cancer care program to provide more on-island
	services to cancer patients.

II. Community Health Assessment (CHA)

Data Collection Methods

Quantitative Data: Reviewing Existing Secondary Data

To describe the socio-economic and health status of the Nantucket Cottage Hospital service area population, this report draws from authoritative secondary data sources at the county and city level. Sources of data included, but were not limited to, Community Commons, the U.S. Census, Centers for Disease Control and Prevention, County Health Rankings, Massachusetts Department of Public Health, Housing Nantucket, National Low Income Housing Coalition, and the F.B.I Uniform Crime Reports. Some of the data were extracted from the Community Commons website, and others were accessed directly. Other types of data included self-report of health behaviors from large, population based surveys such as the Behavioral Risk Factor Surveillance System (BRFSS), as well as vital statistics based on birth and death records. When possible, secondary data are compared to state averages.

Qualitative Data: Focus Groups and Surveys

In May 2015, Nantucket Cottage Hospital organized two focus groups with community health agencies and organizations, as well as a cross-section of Nantucket residents, to solicit input on the island's most pressing health needs, community assets, challenges, and solutions. The first focus group was held at a regular meeting of the Nantucket Healthy Community Collaborative, which includes representation from a wide range of community stakeholders – both public agencies and private organizations – that are committed to addressing Nantucket's human services needs. The second focus group was conducted during a special meeting of Nantucket Cottage Hospital's Patient and Family Advisory Council (PFAC). The PFAC, a standing committee of NCH, seeks the community's feedback and involvement to improve care at NCH, and helps the hospital fulfill its mission to meet the needs of an increasingly diverse and expanding Nantucket community. A semi-structured guide was used during both focus group sessions to ensure consistency in the topics covered. The sessions were facilitated by a moderator, and detailed notes were taken during conversations.

The 2015 Nantucket Quality of Life survey was distributed throughout all patient waiting areas within Nantucket Cottage Hospital during the month of May 2015 and the first two weeks of June, as well as during the annual NCH Health Fair on May 2. The start of the survey period was announced in the island newspaper, *The Inquirer and Mirror*, and posted on a local media website, The Nantucket Chronicle. An electronic version of the survey was posted on the NCH web site during May and June, as well as the Town of Nantucket's web site, and the Town of Nantucket Board of Health's web site. The electronic version was also sent to island residents via e-newsletters from NCH and the Town of Nantucket. Physical copies of the survey were distributed at several other locations around the island, including the Saltmarsh Senior Center, the Nantucket Community School, and St. Mary's Church, and collected by NCH staff following the close of the survey period.

Limitations

As with all research efforts, there are several limitations related to this reports' research methods that should be acknowledged.

Data based on self-reports should be interpreted with particular caution. In some instances, respondents



may over- or underreport behaviors and illnesses based on fear of social stigma or misunderstanding the question being asked. In addition, respondents may be prone to recall bias—that is, they may attempt to answer accurately but remember incorrectly. In some surveys, reporting and recall bias may differ according to a risk factor or health outcome of interest.

While the focus groups and surveys conducted for this report provide valuable insights, results are not statistically representative of a larger population due to non-random recruiting techniques and a small sample size. Recruitment for focus groups was conducted by community organizations, and participants were those individuals already involved in community programming. Because of this, it is possible that the responses received provide limited perspective on the issues discussed. Lastly, it is important to note data were collected at one point in time, so findings, while directional and descriptive, should not be interpreted as definitive. Nantucket Cottage Hospital will use this data but also continue to collect data from a variety of sources for input into our decision making.

FINDINGS

Demographics

Table 1

	Nantucket County	Massachusetts
Total Population	10,224	6,605,058
Total Land Area	44.96 mi ²	7,797.99 mi ²
Population Density	227.41 pop per mi ²	847.02 pop per mi ²
Population Change, 2000-2010	6.9%	3.1%
Males	50.3%	48.4%
Females	49.7%	51.6%

Data Source: US Census Bureau, 2009-2013 American Community Survey, data retrieved from Community Commons on 4/15/15.

Population

As seen in Table 1, Nantucket County covers a relatively small geographic area of 44.96 mi² and has a total year-round population of 10,224, making it the least-populous county in Massachusetts. In addition, the area's population density of 227.41 persons per square mile is significantly smaller than the statewide density of 847.02 persons per square mile. Between 2000 and 2010 Nantucket County experienced a population growth of 6.9% which was over two times greater than the statewide increase of 3.1%.

Although Nantucket is the least-populous county in Massachusetts, it was the fastest-growing county in the state last year, increasing its population 2.7 percent or 288 residents between July 2013 and July 2014. During the summer (July and August) and "shoulder" seasons (April, May, June and September, October) when seasonal home owners and vacationers are in residence, county officials estimate that the population increases to between 30,000 and 60,000. County officials further estimate that Nantucket may be home to as many as 20,000 year round residents, which is not reflected in the official Census Bureau figure.

Focus group participants noted the extreme seasonality and isolation of Nantucket present challenges for the community. Nantucket is very busy during the summer and shoulder seasons, but experiences a steep decline in terms of business, activity and population during the off season. Furthermore, its physical location 30 miles from the mainland limits opportunities for island residents, and collaborations with nearby communities, organizations and individuals. This has a significant impact on the community, including a lack of year-round employment



opportunities, no year-round public transportation, the high cost of travel to and from the island, and a restricted ability to share resources with other communities.

Table 2

	Nantucket County	Massachusetts
Median Age	39.9	39.2
Under 18	21.0%	21.3%
18 to 24 years	6.3%	10.4%
25-44	31.5%	26.4%
45-64	28.8%	27.8%
65+	12.5%	14.1%

Data Source: US Census Bureau, 2009-2013 American Community Survey, data retrieved from Community Commons on 4/15/15.

Age Distribution

As seen in Table 2, the median age on Nantucket (39.9 years) and population age under the age of 18 (21.0%) are similar to the state, though Nantucket has a smaller percentage of 18 to 24 olds (6.3% vs. 10.4%). The percentage of 25 to 44 year olds on Nantucket (31.5%) is higher than the statewide percentage of 26.4%. The percentage of residents aged 65 years and older on Nantucket is 12.5%, slightly lower than the statewide percentage of 14.1%.

Table 3

	Nantucket County	Massachusetts
Asian	1.2%	6.2%
Black	6.3%	7.0%
Hispanic/Latino	10.0%	9.9%
White	88.3%	84.1%
Other	4.1%	2.8%

Data Source: US Census Bureau, 2009-2013 American Community Survey, data retrieved from Community Commons on 4/15/15.

Racial and Ethnic Diversity

As seen in Table 3, most of the residents on Nantucket are white (88.3%), higher than the statewide figure of 84.1%. Nantucket has a significantly lower percentage of Asian residents at 1.2% compared to the statewide percentage of 6.2%. The percentage of Nantucket residents who are black (6.3%) is slightly lower than the statewide percentage of 7.0%. In addition, Nantucket has a higher percentage of residents who identify as "Other" at 4.1% compared to 2.8% for Massachusetts overall. The percentage of Hispanic/Latino residents on Nantucket is 10.0% and similar to the statewide percentage.

Table 4

	Nantucket County	Massachusetts
Percentage Foreign Born	16.6%	15.0%
Europe	23.8%	23.6%
Asia	6.2%	29.2%
Africa	0.5%	8.3%
Oceania	0.8%	0.3%
Latin America	66.5%	35.5%
Northern America	2.1%	3.1%

Data Source: US Census Bureau, 2009-2013 American Community Survey, data retrieved From American Factfinder & Community Commons on 4/15/15.



Foreign Born Populations

As seen in Table 4, the percentage of residents on Nantucket who are of foreign birth is 16.6%, slightly higher than the statewide percentage of 15.0%. When looking at the distribution of foreign born residents on Nantucket, two thirds are from Latin America and just under a quarter from Europe. Nantucket has significantly smaller percentages of foreign born African (0.5%) and Asian (6.2%) populations compared to statewide percentages of 8.3% and 29.2%, respectively.

Some quality of life survey respondents referenced the growing population of immigrants on Nantucket and noted the demographics of Nantucket are changing rapidly. The Nantucket Public Schools reported in 2014 that its Hispanic student enrollment had increased to 21 percent of the entire student body, and that 12 percent of all students at the Nantucket Elementary School are identified English Language Learners.

Table 5

	Nantucket County	Massachusetts
Median Household Income	\$85,478	\$66,866
Families Below Federal Poverty Level (FPL)	6.6%	8.1%
Children Below 100% Federal Poverty Level (FPL)	15.4%	14.9%
Households receiving Supplemental Nutrition Assistance Program (SNAP) Benefits	4.2%	11.7%
Unemployment Rate	12.0%	6.9%

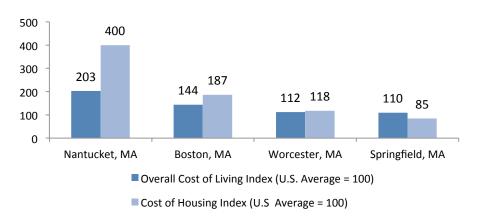
Data Source: US Census Bureau, 2009-2013 American Community Survey, data retrieved From American Factfinder & Community Commons on 4/15/15.

Income, Poverty, and Employment

As seen in Table 5, Nantucket's median household income of \$85,478 for year-round residents exceeds the statewide average of \$66,866. Of the 2,462 families living in Nantucket, 6.6% had incomes below the FPL in the past 12 months, slightly less than the statewide percentage of 8.1%. However when looking at children under 18 who are living in households with income below the FPL, Nantucket's percentage of 15.4% is higher than the statewide percentage of 14.9%.







Data Source: Council for Community and Economic Research's Cost of Living Index, retrieved 7/9/2015

As seen in Figure 1, the overall cost of living on Nantucket is twice the national average, and significantly higher in other areas of Massachusetts such as Boston, Worcester, and Springfield (cost of living data were not available at the state level). The cost of living index includes the following items in its calculation: groceries, housing, utilities, transportation, healthcare, and goods and services. In addition the cost of housing on Nantucket is quadruple the national average and significantly higher than Boston, Worcester, and Springfield. A primary theme throughout both focus groups was the toll the high cost of living on Nantucket has on the year-round community. Residents spend disproportionate amounts of their income on basic needs such as housing, groceries, and utilities. Focus groups participants also expressed a lack of recognition by business owners about the cost of living and corresponding wages for their employees. It should also be noted that the quantitative data likely does not reflect Nantucket's cash economy.

Just under half of quality of life survey respondents (45.8%) said they believe there is economic opportunity on Nantucket. Roughly two-thirds of survey respondents believe they have the opportunity to contribute to and participate in making Nantucket a better place to live. In addition, survey respondents ranked a healthy economy as the third most important factor defining a healthy community, after access to healthcare and affordable housing. Compared to Massachusetts overall, a lower percentage of Nantucket households (4.2%) received SNAP benefits compared to 11.7% statewide. The non-seasonally adjusted percentage of unemployed residents in Nantucket County was 12.0%, significantly higher than the statewide percentage of 6.9%.

When asked about food insecurity during the past 12 months, 6.3% (n = 19) of survey respondents said they have worried about food running out before being able to buy more and 3.7% (n=11) have run out of food and not been able to buy more.

Table 6

	Nantucket County	Massachusetts
Residents 25+ with No High School Diploma	6.0%	10.6%
Residents with Associate's Degree or Higher	52.2%	47.1%

Data Source: US Census Bureau, 2009-2013 American Community Survey, data retrieved

Educational Attainment

As seen in Table 6, Nantucket has a lower percentage of residents who did not graduate from high school at 6.0% compared to the statewide percentage of 10.6%. In addition, Nantucket has a higher percentage of residents (52.2%) who have an Associate's level degree or higher compared to the statewide percentage of 47.1%.



Quality of life survey respondents ranked good schools as the third most important factor defining a healthy community Just over two thirds of survey respondents ranked Nantucket as a good place to raise children (including quality, day care, after-school programs, recreation, etc.). Focus group participants, however, noted that the cost and accessibility of childcare are challenges for many families. When asked about the top three health problems that have the greatest impact on community health on Nantucket, 6.9% of survey respondents cited education (low graduation rates, quality of education, etc.).

Year Round, Shoulder, and Summer Residents

In 2012, Denneen & Company conducted a survey of 630 Nantucket residents on behalf of NCH to support its ongoing efforts to support the health needs of the island. Just over half of respondents (52%) were year round residents, 30% were summer residents, and 18% were shoulder residents. The findings are summarized in Table 7 below.

Table 7

Year Round Residents	Shoulder Residents	Summer Residents
Adults and Families	Wealthy retirees	Wealthy retirees and families with
All income and education levels	Over 55 years old	employed head(s)
Largely employed	College degree +	Mostly over 45 years old
Majority own home	Long time Island home owners	College degree +
Majority long term	Long time island nome owners	Long time Island home owners

Data Source: 2012 Nantucket Cottage Hospital Consumer Survey, Denneen & Company

Social and Physical Environment

Table 8

	Nantucket County	Massachusetts
Total Housing Units	11,650	2,813,641
Vacant Housing Units	65.1%	9.9%
Owner-occupied housing units	65.8%	62.7%
Renter-occupied housing units	34.2%	37.3%
Median Home Value	\$929,700	\$330,100
Homes Costing \$1,000,000 or more	43.0%	3.4%
Renter Costs Exceed 50% of Total Household Income (Worst Case Needs)	17.0%	-
Fair Market Rent (FMR) for 2 Bedroom Apartment*	\$1,799	\$1,252
Number of Full-time Minimum Wage Jobs Needed to Afford 2 Bedroom Apartment at FMR	4.3	3.0
Annual Income Needed to Afford 2 Bedroom Apartment at FMR	\$71,960	\$50,090
Homeless Population	0	21,237

Data Sources: US Census Bureau, 2009-2013 American Community Survey, data retrieved from Community Commons & American Factfinder on 4/15/15; 2015 Workforce Housing Needs Assessment by Housing Nantucket; and National Low Income Housing Commission

^{*}HUD Fair Market Rent is a payment standard for housing authorities that administer Section 8 assistance; it is not an affordable rent per se HUD's goal for the FMR is that it should be "high enough to permit a selection of units and neighborhoods and low enough to serve as many low-income families as possible.



Housing

As seen in Table 8, of the 11,650 housing units on Nantucket, 65.1% are seasonal housing unit, and thus vacant for a majority of the year. This is over six times the statewide percentage and reflective of the different residency types on Nantucket. In addition, Nantucket has a slightly higher percentage of home-owners (65.8%) as compared to the state percentages of 62.7%. The median home value of \$929,700 on Nantucket is almost three times the statewide value of \$330,100. Moreover, almost half of homes (43.0%) on Nantucket cost \$1 million or more, compared to 3.4% statewide.

A recent report conducted by Housing Nantucket estimated that homeownership is prohibitive to 90% of the island's households. The lack of price-appropriate housing for people who work on Nantucket throughout the year is a barrier to a decent quality of life for workers and their families and an obstacle to hiring qualified people for some specialized positions. As numerous past studies and reports show, the stock of affordable housing on Nantucket has been inadequate for a very long time.

Of Nantucket's 3,894 housing units that are rented, 17% of tenants spend more than 50 percent of their monthly income for housing (rent and basic utilities) – a condition known as worst-case housing needs. By definition, households that can have worst case needs are households that: are renters; have very low incomes i.e. no more than 50 percent of the Area Median Income (as adjusted for family size); and do not receive federal housing assistance. In addition, in order to afford the fair market rent (FMR) for a two bedroom apartment on Nantucket (\$1,799), a minimum wage earner must work 172 hours per week, 52 weeks per year (MA minimum wage is \$8.00 per hour). Alternately, a household must include 4.3 minimum wage earners working 40 hours per week yearround in order to make the two-bedroom FMR affordable. The annual income required on Nantucket to afford a two bedroom apartment at fair market rent is \$71,960 and significantly higher than the statewide figure of \$50,090.

Quality of life survey respondents listed access to housing as the second most important health problem on Nantucket. In addition, a primary theme throughout both focus groups was the lack of affordable housing options on the island for both year-round and seasonal residents. Many observed that although this has been a problem for decades, it is a crisis that has grown even more acute in recent years. Some shared stories of friends and neighbors who they considered to be valued, year-round members of the community who have been forced to move off-island because they were unable to find housing. This was reinforced by comments about the disproportionate amount of island residents' income going toward housing costs. When asked about housing instability, 7% of survey respondents stated they may not have access to housing in the next two months.

It should be noted that while Table 8 shows an official homeless population of zero, it is believed that there is a small number of homeless people living on Nantucket. As recently as late July, 2015, the Town of Nantucket had contacted NCH to discuss how it could help address the issue of homeless people on the island.

Table 9

	Nantucket County	Massachusetts
Means of Transportation to Work		
Car, Truck, or Van	76.1%	80.0%
Public Transportation (excluding taxicab)	1.4%	9.3%
Walked	11.2%	4.7%
Bicycle	4.1%	0.7%

Data Source: US Census Bureau, 2009-2013 American Community Survey, data retrieved from American Factfinder on 4/15/15.



Transportation

As seen in Table 9, the percentage of Nantucket County residents who take public transport to work (1.4%) is significantly lower than the statewide percentage of 9.3%. Nantucket County has just over twice the percentage (11.2%) of workers who walk to work compared to the statewide percentage of 4.7%. Similarly the percentage of people in Nantucket County who bike to work (4.1%) is larger than the statewide percentage of 0.7%.

Focus groups noted the lack of year round public transportation on Nantucket was a challenge in addition to the high cost of travel to and from the island.

Crime and Safety

As seen in Figure 2 below, when asked about how safe they felt walking in the community at night, three-quarters of respondents said they felt safe/somewhat safe. The majority of survey respondents stated that they felt safe/somewhat safe while in their homes, in addition to in parks, playgrounds, and other recreational areas. In addition, one quarter of quality of life survey respondents stated low crime and safe neighborhoods were in the top three factors that define a healthy community.

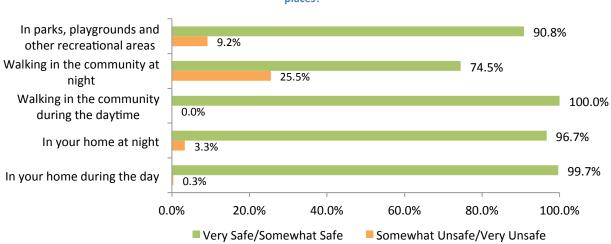


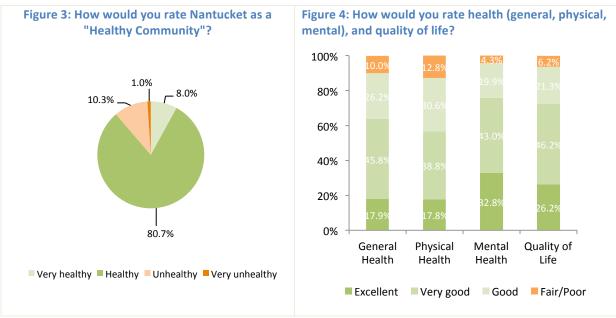
Figure 2: How safe would you say you feel in each of the following places?

Data Source: 2015 Nantucket Cottage Hospital Quality of Life Survey.



Health Indicators

Community Perceptions of Health



Data Source: 2015 Nantucket Cottage Hospital Quality of Life Survey.

As seen in Figure 3 above, when asked how they would rate Nantucket as a "healthy community", the majority of quality of life survey respondents (88.7%) considered it "healthy" or "very healthy" and 11.3% considered it "unhealthy" or "very unhealthy".

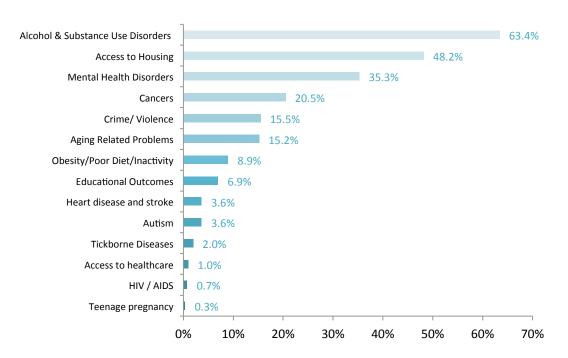
As seen in Figure 4 above, the of majority of quality of life survey respondents rated their general health (89.9%), physical health (87.2%), mental health (95.7%), and quality of life (93.7%) as "excellent", "very good" or "good". Respondents who rated their health or quality of life as "fair" or "poor" were distributed as follows: physical health (12.8%), general health (10.0%), quality of life (6.2%), and mental health (4.3%).



Leading Health Problems on Nantucket

As seen in Figure 5, when quality of life survey respondents were asked to identify the three most important health problems on Nantucket (e.g. those that have the greatest impact on overall community health), the leading problems identified were: alcohol and substance use disorders (63.4%); access to housing (48.2%); mental health disorders (35.3%); and cancers (20.5%).

Figure 5: Leading Health Problems on Nantucket



Data Source: 2015 Nantucket Cottage Hospital Quality of Life Survey.



Leading Factors That Define a "Healthy Community"

As seen in Figure 6, when quality of life survey respondents were asked what are the three most important health factors that define a "healthy community", the leading factors identified were: access to healthcare (60.7%); affordable housing (43.2%); good schools, jobs, and economy (38.6%); low crime/safe neighborhoods (26.7%); strong sense of community (25.4%); and healthy behaviors and lifestyles (22.1%).

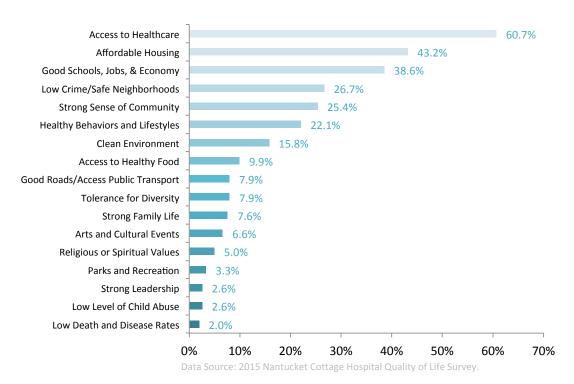


Figure 6: Leading Factors That Define a "Healthy Community"

Community Cohesion

Focus group participants highlighted the disconnect between year-round residents of the island and Nantucket's summer residents. Participants commented on the fact that many summer residents do not get involved with the community and its organizations (with a number of notable and generous exceptions), while some year-rounders do not respect and value the many positive contributions of the summer residents, and instead focus on the negative impacts of the seasonal influx.

One in four quality of life survey respondents said that a strong sense of community was a top three factor defining a healthy community. Just under three-quarters of survey respondents noted they feel connected to the community and that there are networks of support in place under times of stress and need. A similar proportion of



respondents noted that the businesses, agencies, and organizations on Nantucket contribute to making the community a better place to live. The majority of quality of life survey respondents (82.2%) believe they can contribute to and participate in making Nantucket a better place.

Just under two-thirds of survey respondents said they believe Nantucket is a good place to grow old when considering consider elder-friendly housing, transportation to medical services, churches, shopping, elder day care, and social support for the elderly.

Healthy Eating, Physical Activity, and Overweight/Obesity

Table 10

	Nantucket County	Massachusetts
Obese Adults 20+	20.2%	23.3%
Physical Inactivity	17.5%	21.1%
Access to Exercise Opportunities	95.0%	95.0%
Food Insecurity	8.8%	11.9%
Low-Income Population with Low Food	3.0%	4.3%
Access		

Data Sources: 2015 RWJ County Health Rankings & Roadmaps and U.S. Department of Agriculture, data retrieved from Community Commons on 4/15/15.

As seen in Table 10, Nantucket performed comparatively or better than statewide percentages on the following measures: adult obesity (20.2% vs. 23.3% statewide); physical inactivity (17.5% vs. 21.1% statewide); access to exercise opportunities (95% for both areas); food insecurity (8.8% vs. 11.9% statewide); and low income populations with low food access (3.0% vs. 4.3% statewide %).

Just under half of quality of life survey respondents cited healthy behaviors and lifestyles; access to healthy food; and a clean environment were leading factors that define a healthy community. In addition, nine percent of respondents said poor diet and inactivity were among the top three health problems on Nantucket.

Table 11

	Nantucket County	Massachusetts
Adult smoking	15%	15%
Excessive Drinking	26%	20%
Admissions to MA Department of Public Health (MA DPH) Funded Treatment Programs	594.4	1532.4
Alcohol & Drug Related Hospital Discharges per 100k Population	118.9	344.7
Unintentional Injury Death Rate Per 100,000	32.7	29.7

Data Sources: 2015 RWJ County Health Rankings & Roadmaps, data retrieved from Community Commons on 4/15/15; MA Department of Public Health, Health Status Indicators Report for Nantucket published 6/2013.

Alcohol & Substance Use Disorders

As seen in Table 11, Nantucket's percentage of adult smokers is the same as the state's percentage of 15%. However, Nantucket fares worse than the state with 26% of residents reporting excessive drinking, compared to 20% statewide. Admissions to MA DPH funded treatment programs were significantly lower at 594.4 per 100,000 persons compared to the state rate of 1,532.4 per 100,000 persons. Similarly Nantucket had fewer alcohol and



other drug related hospital discharges per 100,000 persons with 118.9 compared to 344.7 statewide. These favorable discharge statistics are likely reflective of a lack of on-island services, such as the absence of an inpatient psychiatric facility and the difficulty in accessing such facilities on the mainland.

Survey respondents cited substance use disorders as the most pressing health problem on Nantucket. Alcohol and drug use disorders on Nantucket were also key themes discussed in focus groups. These problems are not new on the island, but there is increased attention and awareness due to recent opioid overdoses, the growth of alcohol-fueled events on Nantucket such as the Figawi Race Weekend and the Fourth of July beach parties.

Participants further noted the lack of resources to appropriately address these problems and the need for additional counseling and support services, and a detoxification resource.

Injury-Related Behaviors

As seen in Table 11, when examining the age-adjusted death rate from unintentional injuries, Nantucket fares worse at 32.7 deaths per 100,000 residents when compared to the statewide figure of 29.7.

Table 12

Age-Adjusted Death Rates (Per 100,000 Pop.)	Nantucket County	Massachusetts
All Cause Mortality	632.6	667.8
Cancer	169.53	173.99
Coronary Heart Disease	150.02	155.93
Ischemic Heart Disease	115.81	96.8
Cerebrovascular Disease	41.15	33.12

Data Sources: Centers for Disease Control and Prevention, National Vital Statistics System, data retrieved from Community Commons on 4/15/15; MA Department of Public Health, Health Status Indicators Report for Nantucket published 6/2013.

As see in Table 12, the age adjusted death rate (per 100,000 persons) on Nantucket is 632.6, which is lower than the statewide rate of 667.8. Similarly, the rates of mortality for cancer and coronary heart disease are lower on Nantucket with rates of 169.53 and 150.02 respectively, compared to 173.99 and 155.93 statewide. The rates of ischaemic heart disease (115.81) and cerobrovascular disease (41.15) on Nantucket are higher than the statewide rates of 96.8 and 33.12, respectively.

Chronic Disease

Table 13

	Nantucket County	Massachusetts
2012 Ischemic Heart Disease Prevalence		
(Medicare Population)	20.6%	25.0%
2012 Diabetes Prevalence Age 20+	6.8%	8.1%

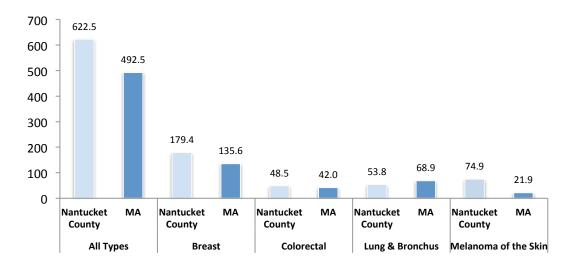
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, data retrieved from Community Commons on 4/15/15.

As seen in Table 13, Nantucket has a lower prevalence of heart disease (20.6%) and diabetes (6.8%) compared to statewide percentages of 25.0% and 8.1%, respectively.



Chronic Disease - Cancer

Figure 7: 2007-2011 Cancer Incidence - Cases Per 100,000



Data Source: Data retrieved from Surveillance, Epidemiology, and End Results (SEER) Program website (www.seer.cancer.gov) on 7/9/2015.

As seen in Figure 7 above, Nantucket's 2007-11 overall cancer incidence (622.5) is significantly greater than the statewide incidence of 492.5. Similarly, Nantucket exceeds statewide incidence rates for breast cancer (179.4 vs. 135.6) and colorectal cancer (48.5 vs. 42.0). The melanoma of the skin incidence on Nantucket is almost quadruple the statewide incidence at 74.9. The lung & bronchus cancer incidence on Nantucket is 53.8, which is less than the statewide incidence of 68.9. When asked about the three most important health problems on Nantucket that impact overall community health, 20.5% of quality of life survey respondents cited cancer as a leading health problem on Nantucket.

Mental Health Disorders

Quality of life survey respondents cited mental health disorders (anxiety, depression, etc) as the third most important health problem on Nantucket. Thirteen survey respondents specifically referred to the increase in suicides on Nantucket. When asked how they would rate their own mental health, 32.8% said it was excellent, 62.9% said it was very good/good, and 4.3% said it was fair/poor.

Focus group participants also noted the issue of mental health on Nantucket and referred to the number of suicides over the past year among middle-aged men. They also acknowledged the island's existing clinicians, providers, and agencies are all over-extended given the extent of the issues and noted the great need for an inpatient treatment capacity.

Nantucket is currently experiencing an increase in the number of suicides. Seven middle-age residents on Nantucket have committed suicide since October 2014. The last cluster of suicides happened between February 2007 and August 2008, when four teenagers killed themselves. According to data compiled by Barnstable County's Human Services Department, 320 residents of the Cape and Islands committed suicide between 2000 and 2011, the last year for which publicly available statistics are available. Eleven of those suicides were residents of



Nantucket. The Cape and Islands suicide rate of 12.1 per 100,000 persons is substantially higher than Massachusetts' overall 8.7rate.

Reproductive and Maternal Health

Table 14

	Nantucket County	Massachusetts
Adequate Prenatal Care	83.0%	84.9%
Infant Mortality Rate (Per 1,000 Births)	2.5	4.9
Low Birthweight	10.0%	7.8%

Data Source: MA Department of Public Health, 2010 Birth Records

As seen in Table 14, 83% of the area's 122 expectant mothers received adequate prenatal care in 2010. This was slightly lower than the overall statewide percentage of 84.9%. In addition, Nantucket County's 2010 infant mortality rate of 2.5 deaths of infants less than one year of age per 1,000 births was lower than the statewide rate of 4.9. Both the Nantucket County and statewide rates are more favorable to the HP2020 goal of 6.5 (HP2020 is the U.S. Dept. of Health and Human Services' science-based, 10-year national objectives for improving health in the U.S.). Lastly, 10% of Nantucket County's 122 births were of low birthweight compared to 7.8% statewide.

Sexually Transmitted Infections

Table 15

	Nantucket County	Massachusetts
2010 HIV Prevalence Per 100,000 Population	243.4	314.6
2012 Chlamydia Incidence Per 100,000 Population	246.5	357.5
2012 Gonorrhea Incidence Per 100,000 Population	29.6	35.9

Data Source: Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, data retrieved from Community Commons on 4/15/15.

As seen in Table 15, Nantucket has lower rates per 100,000 residents of HIV (243.4), chlamydia (246.5), and gonorrhea (29.6), compared to statewide figures of 314.6, 357.5, and 35.9, respectively.

Tickborne Diseases

Table 16

	Nantucket County	Massachusetts
2013 Lyme Disease Incidence Rate Per 100,000		
Population	570.0	86.0
2014 Babesiosis Incidence Rate Per 100,000		
Population	353.9	7.9
2014 Human Granulocytic Anaplasmosis (HGA)		
Incidence Rate Per 100,000 Population		
	88.5	9.2

Data Source: MA Department of Public Health, 2014 Tickborne Diseases Surveillance Summaries



As seen in Table 16, Nantucket surpasses statewide percentages for lyme disease, babesiosis, and HGA with incidence rates of 570.0 vs. 86.0 statewide, 353.9 vs. 7.9 statewide, and 88.5 vs. 9.2 statewide respectively. Although not identified as a leading health problem on Nantucket (2.2% n=7) in the quality of life survey, there has been extensive media coverage of this issue over the years, and awareness of tick-borne diseases and preventative measures is high. Furthermore, island physicians have extensive experience in diagnosing and treating these diseases, and both the hospital and the Town of Nantucket's Board of Health have engaged in education initiatives over the years, including a recent video produced by the Board of Health that featured Nantucket Cottage Hospital surgeon and tick disease expert Dr. Tim Lepore. It should also be noted that one effort to address the prevalence of tick-borne diseases on Nantucket has been controversial: the extended deer hunt authorized and later rescinded by the state Division of Fisheries and Wildlife in 2005.

Access to Care

Nantucket Cottage Hospital is the only medical facility on the island providing primary, urgent, emergency and surgical care, as well as outpatient services and appointments with medical and surgical specialists. NCH works closely with the island's mental health and substance use disorders agency, Family & Children's Services of Nantucket, and provides office space for this organization.

Table 17

	Nantucket	Massachusetts
Adults 18-64 without Health Insurance Coverage	7.7%	5.6%
Children under 19 without Health Insurance	2.5%	1.4%
Coverage		
Population Living in a "Health Professional Shortage	100%	14.6%
Area"		
Primary Care Physicians per 100,000 Population	58.3	102.7
Dentists per 100,000 Population	76.93	91.2
Percent of Female Medicare Enrollees with	70.9%	73.8%
Mammogram in Past 2 Years		
Adults 50+ Ever Had a Sigmoidoscopy or Colonoscopy	59.5%	71.0%

Risk Factor Surveillance System; US Department of Health & Human Services, Health Resources and Services Administration, retrieved from Community Commons on 4/15/15

As seen in Table 17, a higher percentage of Nantucket residents (7.7%) do not have health insurance compared to the statewide percentage of 5.6%. In addition, the percentage of children under 19 without health insurance coverage on Nantucket is almost twice the state percentage at 2.5%.

Nantucket's entire population is living in a federally designated "Heath Professional Shortage Area", compared to 14.6% of residents statewide. Nantucket has 58.3 primary care physicians and 76.9 dentists per 100,000 residents, compared to statewide figures of 102.7 and 91.2, respectively.

The 2012 Denneen & Company survey of a representative sample of Nantucket residents showed that 92.0% of year round residents, 42.0% of shoulder residents, and 17.0% of summer residents have a primary care physician on Nantucket. Nantucket residents reported they are generally able to get an appointment with an area primary care physician, although some of the appointments are farther away than expected. Summer residents tend to access emergency department and urgent care services more than primary care services.

In addition, Nantucket has lower percentages of screenings for breast cancer (70.9%) and colorectal cancer (59.5%) compared to statewide percentages of 73.8% and 71.0% respectively.



Quality of life survey respondents noted that access to healthcare is the number one factor that defines a healthy community and just over half of respondents stated that they were satisfied with the existing health system on Nantucket.

Several survey respondents noted the lack of specialists, especially those qualified to treat mental health and substance use disorders. Focus group participants acknowledged that the island's existing clinicians, providers and agencies are all over-extended given the extent of the behavioral health issues.

III. PROCESS FOR PRIORITIZING NEEDS IDENTIFIED

A team of NCH staff members, along with Partners Healthcare Community Health Reporting & Compliance staff, analyzed and reviewed the results of the 2015 Nantucket Quality of Life Survey and summarized the comments and feedback gathered during the focus group sessions on Nantucket. Quantitative data from local, state and federal sources was also reviewed and analyzed. The data were used to prioritize the health needs of island residents based on the frequency with which the issues were identified in the survey and focus groups. The analysis identified the top health needs and issues for Nantucket, including alcohol and substance use disorders, housing, mental health, and cancer. This prioritization of health needs will continue to be refined and analyzed by different pieces of the Nantucket Cottage Hospital government apparatus, including the Strategic Planning Committee, the Clinical Advisory Council, and the Patient & Family Advisory Council, among others.

IV. IMPLEMENTATION STRATEGY/COMMUNITY BENEFIT ACTION PLANS

Detailed action plans for each priority area are detailed below. Action plans are evaluated annually by the Nantucket Cottage Hospital Strategic Planning Committee and refined based on changing community needs and collaboration among the hospital, its partners, and other community organizations.

Priority 1: Alcohol and Substance Use Disorders/Addiction			
Goal: To address the issue of alcohol and substance use	Timeline: Year 1,2,3	Partners	
disorders in the Nantucket community, identify gaps in services for those in need, and support the efforts of the Nantucket Behavioral Health Task Force in these areas.	1,2,3	A Safe Place, Family & Children's Services, Sherburne Commons, Access Nantucket, Autism Speaks, Nantucket Police Department, Community Foundation for Nantucket, Our Island Home, Town of Nantucket Human Services Dept., Alliance for Substance Abuse Prevention, the Nantucket Board of Health	
Strategy	Action	Action Status	



1.	Strengthen and support the ongoing work of the Nantucket Behavioral Health Task Force, which was spearheaded by NCH in response to the identified need for substance use and behavioral health services on Nantucket, by meeting monthly with the task force partners.	Enhance awareness of the Task Force's efforts; support efficient use of grant funds for substance use disorders; work to secure additional grant funds	In FY14, NCH was instrumental in securing a two-year, \$400,000 grant for the Behavioral Health Task Force. The funds were budgeted for training, education and advocacy. Currently working toward establishment of new providers and counselors to provide mental health/substance use services using the grant funds.
2.	Create greater awareness of the opioid crisis on Nantucket as well as the resources available to community members.	Provide opportunities for education and dialogue with NCH; continue to provide space for AA/NA meetings	Organized an Opioid Symposium for the community with the Town of Nantucket Board of Health in May 2015, as well as a follow-up Q&A session. Hospital staff participated. Plans to hold more in the future.
3.	Continue to support Nantucket's NARCAN program in collaboration with Nantucket's first responders, including the Nantucket Police Department and Fire Department	Continue to provide funding to purchase NARCAN and medical supervision of the program	In FY14 NCH signed a memorandum of understanding with the Nantucket Police Department to provide medical supervision and training for a NARCAN program on the island.

Goal: Play a proactive role in helping to address the island's		Timeline: Year 1,2,3	Partners
use lar	ordable housing crisis, and e NCH's position as one of the gest private employers on the and to advocate for solutions	1,2,3	Housing Nantucket, Town of Nantucket
	Strategy	Action	Action Status
1.	Maximize NCH's existing resources for housing for employees and support the work of the newly formed internal NCH Housing Task Force.	Seek to understand the problem using data and feedback from NCH employees	In FY14 NCH formed a Housing Task Force and completed a survey of employees
2.	Collaborate with island housing advocates and public/private agencies on potential solutions	Engage these groups and participate in ongoing island housing efforts	Initiated contact with Housing Nantucket ahead of Town Meeting



Pi	Priority 3: Mental Health			
	al: Continue to serve as the	Timeline: Year 1,2,3	Partners	
eva obs isla and Bel	ate safety net for island tients requiring psychiatric aluation, stabilization, servation and/or transfer off-and. Identify gaps in services d support the work of the havioral Health Task Force to them	1,2,3	A Safe Place, Family & Children's Services, Sherburne Commons, Access Nantucket, Autism Speaks, Nantucket Police Department, Community Foundation for Nantucket, Our Island Home, Town of Nantucket Human Services Dept., Alliance for Substance Abuse Prevention, the Nantucket Board of Health	
	Strategy	Action	Action Status	
1.	Strengthen and support the ongoing work of the Nantucket Behavioral Health Task Force, which was spearheaded by NCH in response to the identified need for substance use and behavioral health services on Nantucket, by meeting monthly with the task force partners.	Enhance awareness of the Task Force's efforts; support efficient use of grant funds for mental health services; work to secure additional grant funds.	In FY14, NCH was instrumental in securing a two-year, \$400,000 grant for the Behavioral Health Task Force. The funds were budgeted for training, education and advocacy. Currently working toward establishment of new providers and counselors to provide mental health/substance use services using the grant funds. Assisted in the organization and promotion of the Nantucket Behavioral Health Symposium.	
2.	Leverage affiliation with MGH and Partners to increase available resources to Nantucket patients	Establish contact with, MGH behavioral health and substance abuse program teams	Pending	



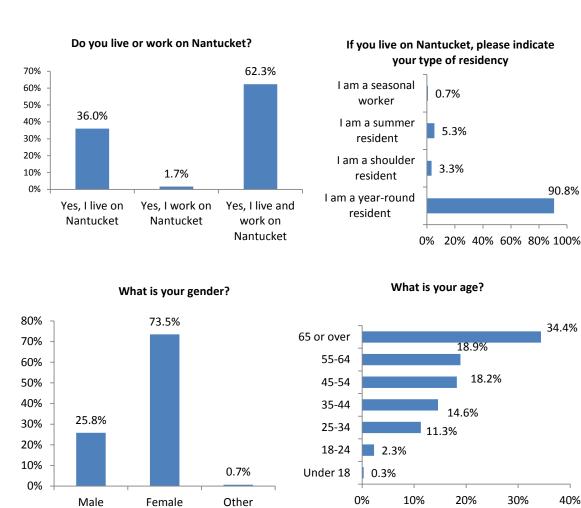
who present to NCH emergency dept. with behavioral health issues	3.	·	Formalize relationships with these agencies and groups	Pending
--	----	---	--	---------

Goal: To provide cancer screenings and education to the Nantucket community while sustaining the growth in NCH's cancer care program to provide more on-island services to cancer patients.		Timeline: Year 1,2,3	Partners Mass General Cancer Center Palliative & Supportive Care of Nantucket Swim Across America, Inc		
		1,2,3			
	Strategies	Action	Action Status		
1.	Sustain and grow Mass General Hematology/Oncology program at NCH to allow island cancer patients to receive as much care as possible on Nantucket.	Support the Swim Across America event which provides funding, and continue to grow on- island integrated and diagnostic cancer care services.	In partnership with Mass General, the NCH Hematology/Oncology program has grown significantly (chemotherapy treatments doubled) and APRN is now full-time onisland		
2.	Support the island's cancer support services, including PASCON and the Marla Lamb Cancer Travel Fund.	Collaborate on education, awareness through marketing and communication strategies, as well as fundraising.	NCH works collaboratively with PASCON and promotes events that support the Marla Lamb Fund.		
3.	Expand and/or enhance opportunities for preventative screenings and education	Sustain mammography clinic for uninsured women and review potential for additional free screening events	In FY15 NCH continued its free mammography clinic for uninsured women		

V. APPENDIX

- Quality of Life Survey Sample Demographics
- Quality of Life Survey Questions
- Focus Group Characteristics
- Focus Group Facilitator Guide

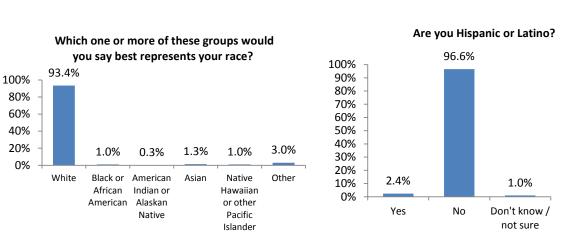
Nantucket Quality of Life Survey 2015 Respondent Demographics (N=300)



90.8%

34.4%

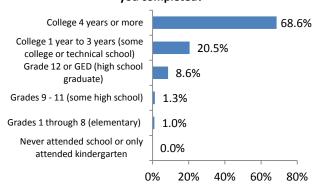
40%



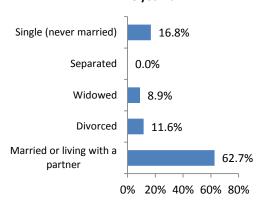
Where you born in the United States?

92.7% 80% -60% -40% -20% -7.3% No

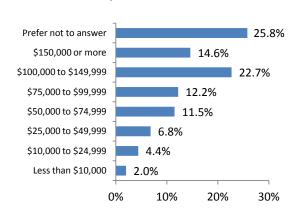
Which is the highest grade or year of school you completed?



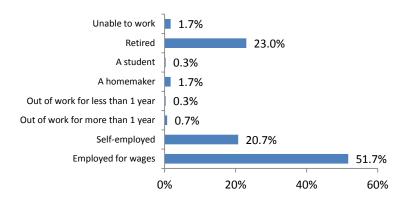
Are you...?



What is your annual household income?



Are you...?



Nantucket Quality of Life Survey 2015

Nantucket Cottage Hospital is partnering with residents, local agencies and organizations and we are pleased to release Nantucket's 2015 Quality of Life Survey.

This survey, in combination with conversations in the community and updated data from state and local sources, will be used to help identify health needs and collectively determine ways to address them. We plan to repeat this survey every three years to gauge our progress in improving the quality of life in Nantucket.

We want to hear from you!

Please take the next 5-10 minutes to answer the attached questions. By answering these questions you will be able to share what it is like to live or work on Nantucket and what issues you think are important for the community to work on. Your responses are completely anonymous. The survey will not ask for your name. If you do not feel comfortable answering a question, you may skip it.

Nantucket is a diverse and vibrant community rich with history and wonderful traditions. Like any community, Nantucket is faced with many issues that affect health, such as drug addiction and pollution. Collectively we can work to make Nantucket an even better place, but we need to hear from you.

1. Do you live or work on Nantucket?
Yes, I live on Nantucket
Yes, I work on Nantucket
Yes, I live and work on Nantucket
No, I don't live or work on Nantucket- Thank you for your interest in the survey, but we would only like to hear from individuals who live or
work
1b. If you live on Nantucket, please indicate your residence type.
I am a year round resident
I am a year round resident I am a shoulder resident
I am a shoulder resident

Nantucket Quality of Life Survey 2015						
2. Using a scale of 1-5 (as show below), please rate how much you agree or disagree with the following statements:						
•	Strongly Disagree (1)	2	3	4	Strongly Agree (5)	Don't know / Unsure
I am satisfied with the health care system on Nantucket. (Consider access, cost, availability, quality, options in health care, etc.)	Ö	0	0	0	Ö	O
Nantucket is a good place to raise children. (Consider school quality, day care, after school programs, recreation, etc)	0	0	0	0	0	0
Nantucket is a good place to grow old. (Consider elder-friendly housing, transportation to medical services, churches, shopping; elder day care, social support for the elderly living alone, meals on wheels, etc.)	0	0	0	0	0	0
There is economic opportunity on Nantucket. (Consider locally owned and operated businesses, jobs with career growth, job training/higher education.)	d 🔾	0	0	0	0	0
Nantucket is a safe place to live. (Consider residents' perceptions of safety in the home, the workplace, schools, playgrounds, parks.)	• 🔾	0	0	0	0	0
There are networks of support for individuals and families on Nantucket during times of stres and need. (Consider neighbors, support groups, faith community outreach, agencies, and organizations)	\$ (0	0	0	0	0
I feel connected to my neighbors and my community.	\circ	\bigcirc	\circ	\circ	\circ	\bigcirc
The businesses, agencies and organizations on Nantucket contribute to making the community a better place to live.	Ŏ	Ŏ	Ŏ	Ŏ	Ŏ	Ŏ
<u>All</u> residents have the opportunity to contribute to and participate in making Nantucket a better place to live. (Consider minority populations, new residents, etc.)	0	0	0	0	0	0
I believe that I can contribute to and participate in making Nantucket a better place to live. Overall, I am satisfied with the quality of life on Nantucket.		0	0	0	0	\bigcirc

Nantucket Quality of Life Survey 2015 *3. Think about your ideal community...From the following list, what do you think are the THREE MOST IMPORTANT factors that define a "Healthy Community"? Access to health care Low crime/safe neighborhoods Access to healthy food Low death and disease rates Accessible public transportation Low infant deaths Low level of child abuse Affordable housing Arts and cultural events Parks and recreation Religious or spiritual values Clean environment Good jobs and a healthy economy Strong family life Good roads/infrastructure Strong leadership Good schools Strong sense of community Healthy behaviors and lifestyles Tolerance for diversity Other (please specify)

Nantucket Quality of Life Survey 2015 *4. From the following list, what do you think are the THREE MOST IMPORTANT health problems on Nantucket? (Those problems which have the greatest impact on overall community health.) Aging problems (arthritis, falls, Environment (air quality, traffic, airport Motor vehicle injuries hearing/vision loss, etc.) noise, airport pollution, etc.) Alcohol abuse / addiction Gambling Poor diet / inactivity Asthma Heart disease and stroke Rape/sexual assault Autism High blood pressure Respiratory/lung disease HIV/AIDS Cancers Sexually transmitted diseases (STDs) Child abuse/neglect Homelessness Smoking Crime & violence Housing Suicide Dental problems Hunger/malnutrition Teenage pregnancy Diabetes Infant death Trauma Domestic violence Infectious diseases (Hepatitis, TB, etc.) Drug abuse / addiction / overdose Mental health (anxiety, depression, etc.) Education (low graduation rates, quality Miscarriage of education, etc.) Other (please specify) 5. How would you rate Nantucket as a "Healthy Community"? () Very unhealthy Unhealthy Healthy Very healthy 6. Compared to three years ago, how would you say your community has changed overall? The community has improved a lot The community has improved some The community has stayed about the same The community has declined some The community has declined a lot I don't know or I am unsure

7. Thinking sho					
I iiiiii kiiig abo	out the next three year	s, how would	l you say you	r community is	likely to
change?					
This community w	vill improve a lot				
This community w	vill improve some				
This community w	rill stay about the same				
This community w	vill decline some				
This community w	vill decline a lot				
I don't know or I ar	m unsure				
9 How sofe wa	uld vou sov vou fool ir	s ann of the	following pla		
o. now sale wo	ould you say you feel ir	Very Safe	Somewhat Safe	Somewhat Unsafe	Very Unsafe
a) In your home during	the day	Ó	0	0	Ó
b) In your home at nigh	t	\bigcirc	\bigcirc	\circ	\bigcirc
c) Walking in the comm	nunity during the day time	\circ	\circ	0	0
d) Walking in the comm	nunity at night	O	Q	Q	O
e) In parks, playgrounds	s and other recreational areas	0	0	0	0
The next set	of questions ask ab	out househ	old informa	tion and dem	ographics.
9 Were you hou	rn in the United States	2			
	rn in the United States	5?			
Yes	rn in the United States	s?			
	rn in the United States	s?			
Yes No	rn in the United States many months or years		ed in the US?	?	
Yes No			ed in the US?	?	
Yes No 10. If NO, How			ed in the US?	?	
Yes No No 10. If NO, How months years	many months or years	s have you liv			ket)
Yes No No 10. If NO, How months years		s have you liv			ket)
Yes No No 10. If NO, How months years 11. How long ha	many months or years	s have you liv			ket)
Yes No No No 10. If NO, How months years 11. How long hamonths	many months or years	s have you liv			ket)
Yes No No No 10. If NO, How months years 11. How long hamonths	many months or years	s have you liv			ket)
Yes No No No 10. If NO, How months years 11. How long hamonths	many months or years	s have you liv			ket)
Yes No No No 10. If NO, How months years 11. How long hamonths	many months or years	s have you liv			ket)
Yes No No No 10. If NO, How months years 11. How long hamonths	many months or years	s have you liv			ket)
Yes No No No 10. If NO, How months years 11. How long hamonths	many months or years	s have you liv			ket)

12. Looking at the map, in which neighborhood do you live?



Brant Point	Wauwinet
Eel Point	I do not/have not lived on Nantucket
Madaket	
Miacomet	
Mid-Island	
Monomoy	
Pocomo	
Polpis	
Quidnet	
Sconset	
Surfside	

Tom Nevers

O Town

Nantucket Qua	lity of Life Survey 2015			
13. How long have you lived in this neighborhood? (Skip if you do not live on Nantucket)				
months				
years				
14. What is your g	ender?			
Male				
Female				
Other				
15. What is your a	ge?			
Under 18				
18 - 24				
25 - 34				
35 - 44				
45 - 54				
55 - 64				
65 and over				
16. Which one or n	nore of these groups would you say best represents your race?			
White				
Black or African Americ	an			
American Indian or Alas	skan Native			
Asian				
Native Hawaiian or othe	er Pacific Islander			
Other				
17. Are you Hispar	nic or Latino?			
Yes				
O No				
On't know/Not sure				

Nantucket Quality of Life Survey 20	15
18. Which is the highest grade or year of sch	nool you completed?
Never attended school or only attended kindergarten	
Grades 1 through 8 (Elementary)	
Grades 9 – 11 (Some high school)	
Grade 12 or GED (High school graduate)	
College 1 year to 3 years (Some college or technical school)	
College 4 years or more	
19. Are you?	
Married or living with a partner	
Divorced	
Widowed	
Separated	
Single (Never married)	
20. Are you?	
Employed for wages	
Self-employed	
Out of work for more than 1 year	
Our of work for less than 1 year	
A Homemaker	
A Student	
Retired	
Unable to work	
21. What is your annual household income?	
Less than \$10,000	\$75,000 to \$99,999
\$10,000 to \$24,999	\$100,000 to \$149,999
\$25,000 to \$49,999	\$150,000 or more
\$50,000 to \$74,999	Prefer not to answer
22. How many children under 18 years of ag	e live in your household?
	•

Nantucket Quality of Life Survey 2015
23. Would you say that in general your health is?
C Excellent
Very Good
Good
○ Fair
Poor
24. In general would you say your quality of life is
Excellent
Very Good
Good
○ Fair
Poor
25. In general, how would you rate your mental health, including your mood and your ability to think?
C Excellent
Very Good
Good
○ Fair
Poor
26. In general, how would you rate your physical health?
C Excellent
Very Good
Good
○ Fair
Poor
Adequate food and shelter are two of the most important elements that influence health and well being. The following questions below ask specifically about the stability of food and shelter in one's life.

Nantucket Quality of Life Survey 2015
27. In the past year, have you worried about food running out before you could buy more?
Yes
○ No
28. In the past year, has the food you bought not lasted long enough and you couldn't buy
more?
Yes
○ No
29. What is your housing type? (Choose 1)
Own home
Rent home
Residential program/dormitory
○ Shelter
O Hotel
Street or vehicle
Living with friend or relative
30. How many people do you live with currently?
Number of people
31. Are you worried or concerned that in the next 2 months you may NOT have stable
housing that you own, rent, or stay in as part of a household?
Yes
○ No
32. In the past 12 months have you gambled (Gambling includes betting on the lottery,
bingo, sporting events, casino games, cards, or racing) more than you intended to?
Yes
○ No
No, I have never gambled

Na	ntucket Quality of Life Survey 2015				
33.	Where do you find out what is happening on Nantucket? (Check all that apply)				
	Local newspaper				
	Local cable station				
	Neighbors, family or friends				
	Schools				
	City website, newsletters or social media (like Facebook or Twitter)				
	Organizational websites, newsletters or social media (like Facebook or Twitter)				
	Religious meeting place				
	Recreation site				
	Other (please specify)				
34.	What language do you prefer to receive information in?				
\bigcirc	English				
\bigcirc	Spanish				
$\tilde{\bigcirc}$	Portuguese				
$\tilde{\Box}$	Arabic				
\bigcirc	Other (please specify)				
\cup					
36.	Please feel free to share any additional thoughts in the space provided.				
	Thank you for completing this survey!				
	If you have any questions about this survey, please send an email to JGradziadei@partners.org or call Jason Gradziadei at 508-825-8246				

Nantucket Encuesta de Calidad de Vida 2015

1. ¿Vives o trabajas en Nantucket?

El Hospital de Nantucket esta asociado con los residentes , agencias locales y la organizaciónes y nos complace lanzar la Encuesta de Calidad de Vida en Nantucket para el año 2015.

Esta encuesta , en combinación con las conversaciones en la comunidad y los datos actualizados de fuentes estatales y locales , se utilizará para ayudar a identificar las necesidades de salud y colectivamente determinar formas de abordarlos. Tenemos la intención de repetir esta encuesta cada tres años para evaluar nuestro progreso en mejorando la calidad de vida en Nantucket .

Queremos saber de usted!

Por favor, tome los próximos 5 a 10 minutos para responder a las preguntas en este folleto. Al contestar estas preguntas usted será capaz de compartir lo que se siente acerca de vivir o trabajar en Nantucket, y lo que usted piensa sobre temas que son importantes para la comunidad. Sus respuestas son completamente anónimas . La encuesta no le pedirá su nombre. Si usted no se siente cómodo respondiendo a una pregunta, omitir la pregunta.

Nantucket es una comunidad diversa y vibrante, rica en historia y tradiciones maravillosas . Como cualquier comunidad , Nantucket se enfrenta a muchos problemas que afectan a la salud , como la adicción a las drogas y la contaminación. Colectivamente podemos trabajar para hacer Nantucket un lugar aún mejor , pero necesitamos su colaboración.

Gracias antemano por completar esta encuesta y hacer su parte para hacer Nantucket un mejor lugar para vivir! Para obtener más información sobre esta encuesta o cómo participar en las futuras reuniones de la comunidad por favor póngase en contacto con Jason Graziadei (JGraziadei@partners.org)

	•
(C) s	Sí , yo vivo en Nantucket
(C) s	Sí , yo trabajo en Nantucket
(C) s	Sí , vivo Y trabajo en Nantucket
	lo, yo no vivo o trabajo en Nantucket - Gracias por su interés en la encuesta, pero nos gustaría saber de las personas que viven o trabajan e lantucket.
41	0
1D. 3	Si usted vive en Nantucket , indique el tipo de residencia.
\bigcirc :	Soy residente durante todo el año
\bigcirc	Soy residente aquí desde alrededor de Mayo a Octubre
\bigcirc 5	Soy un residente de verano
\bigcirc	Soy un trabajador de temporada

Nantucket Encuesta de Calidad de Vida 2015						
2. Utilizando una escala de 1-5 (como se muestra más abajo) , por favor califique qué tan						
de acuerdo o en desacuerdo con las siguientes afirmacio	muy en				Muy de	No se no
	desacue	rdo 2	3	4	acuerd (5)	o estoy /
Estoy satisfecho con el sistema de salud en Nantucket. (Considere el acceso , costo, disponibilidad , calidad, opciones etc.)	Ö	0	0	0	Ö	O
Nantucket es un buen lugar para criar a los hijos . (Considere la calidad escolar , guarderías , programas después de escuela , recreación, etc.)	0	0	0	0	0	\bigcirc
Nantucket es un buen lugar para envejecer . (Considere viviendas para ancianos, el transporte a los servicios médicos , iglesias , centro de compras ; guarderías para ancianos, apoyo de servicios sociales etc.)	0	0	0	0	0	0
Hay oportunidades económicas en Nantucket. (Considere empresas de propiedad local que son operados por locales, etc.)	\circ	0	0	0	0	\circ
Nantucket es un lugar seguro para vivir . (Considere la percepción de residentes en caunto a la seguridad en el hogar, el lugar de trabajo	0	0	0	0	0	0
Existen redes de apoyo a las personas y familias en Nantucket durante momentos de estrés y necesidad . (Considere vecinos, grupos de apoyo, la fe de la comunidad, agencias y organizaciones.)	0	0	0	0	0	0
Me siento conectado con mis vecinos y mi comunidad. Las empresas, agencias y organizaciones en Nantucket contribuyen y participan en hacer Nantucket un lugar mejor para vivir.	0	0	0	0	0	0
Todos los residentes tienen la oportunidad de contribuir y participar en hacer Nantucket un lugar mejor para vivir	0	0	0	0	0	0
Creo que me estoy contribuyendo y participando en hacer Nantucket un lugar mejor para vivir. (En general, estoy satisfecho con la calidad de vida en Nantucket.	0	0	0	0	0	0

Nantucket Encuesta de Calidad de	Vida 2015
*3. Piense en la comunidad ideal De la s FACTORES MÁS IMPORTANTES que de	siguiente lista , ¿qué cree usted que son los TRES efinen a un " COMUNIDAD SANA ? "
El acceso a la ayuda médica	bajo nivel de crimen/ vecindarios seguros
El acceso a una alimentación saludable	bajo nivel de la mortalidad y baja nivel de enfermedad
Transporte público accesible	Los bajos niveles de mortalidad infantil
Vivienda asequible	bajo nivel de abuso de menores
Artes y eventos culturales	Parques y recreación
Ambiente limpio	Valores religiosos y espirituales
Los buenos trabajos y una economía sana	La vida familiar fuerte
Buenas carreteras / infraestructura	Fuerte iniciativa
Las buenas escuelas	Fuerte sentido de comunidad
Comportamientos y estilos de vida saludables	Tolerancia a la diversidad
Otros (especifique)	

Nantucket Encuesta de Calidad de Vida 2015 *4. De la siguiente lista, ¿qué cree usted que son los tres problemas de salud más importantes en Nantucket ? (Esos problemas que tienen el mayor impacto en la salud en general comunidad.) problemas de envejecimiento (artritis, Lesiones de vehículos de motor Medio ambiente (calidad del aire , el caídas, pérdida de la visión/ audición , tráfico , el ruido del aeropuerto , la contaminación del aeropuerto, etc.) Obesidad Juegos de azar El abuso de alcohol / adicción La mala alimentación / inactividad Las enfermedades del corazón Asma Violación / asalto sexual autismo La presión arterial alta Respiratorio / enfermedad pulmonar cánceres EI VIH / SIDA Enfermedades de transmisión sexual El abuso infantil / negligencia Falta de vivienda crimen y la violencia Vivienda suicidio Problemas dentales Hambre / malnutrición El embarazo adolescente Diabetes muerte infantil Trauma la violencia domestica Las enfermedades infecciosas El abuso de drogas / adicción Salud mental (ansiedad, depresión, etc.) Educación (bajas tasas de graduación , la calidad de la Aborto Involuntario educación, etc.) Otros (especifique) 5. ¿Cómo calificaría Nantucket como una "Comunidad Saludable"? Muy poco saludable insalubre saludable muy saludable 6. En comparación con hace tres años, ¿ como diría usted que su comunidad ha cambiado en general? La comunidad ha mejorado mucho La comunidad ha mejorado un poco La comunidad ha permanecido casi igual La comunidad ha disminuido un poco La comunidad ha disminuido mucho No sé o no estoy seguro

Nantucket Encuesta de Calida	au ue viua	2013		
7. Pensando en los próximos tres años, ¿ diría usted que su comunidad es				
probable que cambie?				
Esta comunidad mejorará mucho				
Esta comunidad mejorará alguno				
Esta comunidad se quedara sobre el mismo				
Esta comunidad se reducirá un poco				
Esta comunidad se reducirá mucho				
No sé o no estoy seguro				
	a alanta an a	ada una da la	o oleviontos l	lugges 2
8. ¿Qué tan seguro diría usted que s	Muy seguro	ada uno de lo algo seguro	algo inseguro	muy inseguro
a) En su casa durante el día	O	Ô	0	O
b) en su casa por la noche	Ŏ	Ŏ	Ŏ	Ö
c) El caminar en la comunidad durante el día	Ō	Ö	Ō	Ō
d) El caminar en la comunidad en la noche	\circ	\bigcirc	\circ	\circ
e) En los parques, campos de juego, otras áreas recreativo	\bigcirc	\circ	\circ	\bigcirc
DEMOGRAFÍA . 9. ¿Nació en los Estados Unidos? Si No				
10. En caso negativo, ¿Cuántos mes	es o años ha	vivido en los	Estados Unio	los.?
meses				
años				
11. ¿Cuánto tiempo ha vivido en Nantuck	tet? (omita esta	a pregunta si us	ted no vive en	Nantucket)
meses				
años				

12. Mirando el mapa , en que vecindario vive usted ?



Brant Point	
Eel Point	
Madaket	
Miacomet	
Mid-Island	
Monomoy	
Pocomo	
Polpis	
Quidnet	
Sconset	

Surfside
Tom Nevers

O Town

Wauwinet

usted no vive en Nantucket

Nantaoket Enda	uesta de Calidad de Vida 2015
13. ¿Cuánto tiempo h	ha vivido en ese vecindario? (omita esta pregunta si usted no vive en Nantucket)
meses	
años	
14. Cuál es su sexo	o?
Masculino	
Femenino	
Otro/otra	
15. Cuál es tu edad	d??
menos de 18	
18 - 24	
25 - 34	
35 - 44	
45 - 54	
55 - 64	
65 o mas	
16. ¿Cuál o cuáles	de estos grupos diría usted que representa mejor su raza?
raza blanca	
Negro o afroamericano	
indio Americano o Nativo	o de Alaska
asiático	
Nativo de Hawai u otras	islas del Pacífico
Otro	
17. Eres hispano o	latino?
17. Eres hispano o	latino?
	latino?
O Si	
Si No	
Si No	
Si No	

Nantucket Encuesta de Calidad de Vida 2015 18. ¿Cuál fue el grado o ano mas alto de escuela que completó? Nunca asistí a la escuela o sólo asistí guardería Grados 1through 8 (Primaria) Grados 9-11 (Algunos estudios secundarios) Grado 12 o GED (Graduado de la escuela) Colegio 1 año a 3 años (Un poco de universidad o técnica) Universidad 4 años o más 19. ¿Usted es...? Casado o junto con una pareja Divorciado Viudo Separado Soltero(a) (Nunca se ha casado) 20. ¿Usted es...? Empleado por salarios o por hora Soy mi propio emple Sin trabajo por más de 1 año Sin trabajo por menos de 1 año Un ama de casa Un estudiante Jubilado Incapaz de trabajar 21. Cual es el ingreso anual de su hogar? \$75,000 A \$99,999 O Menos de \$10,000 γ0,000 A \$149,999 \$10,000 A \$24,999 \$150,000 o más \$25,000 A \$49,999 Prefiero no responder \$50,000 A \$74,999 22. ¿Cuántos niños menores de 18 años viven en su hogar?

Nantucket Encuesta de Calidad de Vida 2015
23. En general yo diría que mi salud es
C Excelente
Muy bueno(a)
Bueno(a)
Regular
Pobre
24. En general yo diría que mi calidad de vida es
Excelente
Muy bueno(a)
Bueno (a)
Regular
OPobre
25. En general , ¿cómo calificaría su salud mental, incluyendo su estado de ánimo y su capacidad de pensar ?
Excelente
Muy bueno (a)
Bueno (a)
Regular
Pobre
26. En general , ¿cómo calificaría su salud física?
Excelente
Muy bueno (a)
Bueno (a)
Regular
Pobre
Alimento y refugio adecuado son dos de los elementos más importantes que influyen en la salud y el bienestar. Las siguientes preguntas a continuación piden específicamente sobre la estabilidad del alimento y refugio en la vida de uno .

Nantucket Encuesta de Calidad de Vida 2015
27. En el último año , ¿se ha preocupado por quedarse sin alimentos antes de poder comprar más ?
◯ si
○ No
28. En el año pasado, la comida que a comprado no le a durado lo suficiente y no a podía comprar más ?
◯ Si
O No
29. ¿Cuál es tu tipo de vivienda? (elige uno)
Mi propia casa
Alquilo casa
Programa Residencial / dormitorio
Albergue
Hotel
Calle o vehículo
Estoy viviendo con un amigo o familiar
30. ¿Con cuántas personas vive actualmente?
Numero de personas
31. ¿Le preocupa que en los próximos 2 meses puede que no tenga una vivienda estable en que
usted es el dueno, o un lugar donde puedes alquilar, o un lugar donde usted puede quedarse?
◯ Si
○ No
32. En los últimos 12 meses ¿ha apostado (esto incluye las apuestas en la lotería, bingo, eventos
deportivos, juegos de casino, tarjetas, o los de carreras) más de lo usted a previsto?
◯ Si
○ No
No, nunca he apostado

Nantucket Encuesta de Calidad de Vida 2015 33. ¿Dónde encuentra lo que está sucediendo en Nantucket? (Marque todo lo que corresponda) Periódico local Estación de cable local Vecinos, familiares o amigos Escuelas La pagina de el web de la ciudad, boletines de noticias o las redes sociales (como Facebook o Twitter) La pagina de el web de la organizativo, boletines de noticias o las redes sociales (como Facebook o Twitter) Lugar de encuentro religioso Sitio de recreación Otro (especifique) 34. En qué idioma prefiere recibir información? O Inglés árabe Otro (especifique) 36. Por favor sientase libre de compartir pensamiento adicionales en el espacio proporcionado Gracias por completar esta encuesta! Para obtener más información sobre esta encuesta o cómo participar en las futuras reuniones de la comunidad por favor póngase en contacto con Jason Graziadei (JGraziadei@partners.org).

Focus Group Characteristics

The first focus group was held at a regular meeting of the Nantucket Healthy Community Collaborative, which includes representation from a wide range of community stakeholders — both public agencies and private organizations — that are committed to addressing Nantucket's human service needs. The second focus group was conducted during a special meeting of Nantucket Cottage Hospital's Patient and Family Advisory Council (PFAC). The PFAC seeks the community's feedback and involvement to improve care at NCH, and helps the hospital to fulfill its mission to meet the needs of an increasingly diverse and expanding Nantucket community. A semi-structured guide was used during both focus group sessions to ensure consistency in the topics covered. The sessions were facilitated by a moderator, and detailed notes were taken during conversations.

Focus Group Facilitator Guide

	PFAC	Question: COMMUNITY ASSETS
1		Safety- people feel safe
1		Overall sense of community
1	1	Wealth of options for health and wellness i.e. Many non-profits
1		Pet friendliness.
1		Brain power that visits the island.
1		Collaboration
1	1	Rich in culture/arts
1		Access to parks and conservation land
1		Contained area which makes change possible
1		Huge tax base/ access to philanthropists
1		Ability to use natural resources
1	1	Community working on mental health/ Behavioral health task force
1		Concentration of wealth
1		Recreational choices
		Size keeps us in touch with communities needs
	1	Rich history
	1	Isolation makes us work together on issues
	1	Atheneum
		Water and Air quality
	1	Hospital affiliation with MGH
		Diversity
	1	Mutual respect for each other
NCHCC		Question: COMMUNITY CHALLENGES
4		
1	11111	Housing
1		Substance Abuse
1		Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities
1 1111	111	Substance Abuse Cost of utilities/ living
1 1111 1 1 1	111	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation
1 1111 1 1 1 1	111	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island
1 1111 1 1 1 1 1	111	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare
1 1111 1 1 1 1	111	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island
1 1111 1 1 1 1 1	111 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated
1 1111 1 1 1 1 1	111 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated Support for ESL population and access
1 1111 1 1 1 1 1 1 1 1	111 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated Support for ESL population and access Diversity not always represented
1 1111 1 1 1 1 1 1 1 1 1 1	111 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated Support for ESL population and access Diversity not always represented Participation of ESL population not always easy
1 1111 1 1 1 1 1 1 1 1	111 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated Support for ESL population and access Diversity not always represented Participation of ESL population not always easy Competitive funding options for donors
1 1111 1 1 1 1 1 1 1 1 1 1	111 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated Support for ESL population and access Diversity not always represented Participation of ESL population not always easy Competitive funding options for donors Lack of resources
1 11111 1 1 1 1 1 1 1 1 1 1	111 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated Support for ESL population and access Diversity not always represented Participation of ESL population not always easy Competitive funding options for donors Lack of resources Difficult to attract young professionals
1 1111 1 1 1 1 1 1 1 1 1 1 1	111 1 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated Support for ESL population and access Diversity not always represented Participation of ESL population not always easy Competitive funding options for donors Lack of resources
1 1111 1 1 1 1 1 1 1 1 1 1 1 1	111 1 1 1 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated Support for ESL population and access Diversity not always represented Participation of ESL population not always easy Competitive funding options for donors Lack of resources Difficult to attract young professionals
1 1111 1 1 1 1 1 1 1 1 1 1 1 1 1	111 1 1 1 1	Substance Abuse Cost of utilities/ living Seasonal nature of employment opportunities Limited activities for families Lack of year-round transportation Expensive to travel off island Childcare Can't access shared resources from other counties Isolated Support for ESL population and access Diversity not always represented Participation of ESL population not always easy Competitive funding options for donors Lack of resources Difficult to attract young professionals Recognition (by the state) that Nantucket is a different

NCHCC	PFAC	Question: COMMUNITY CHALLENGES, continued
1	1	Disconnect between business owners and recognizing the cost of living on island
1		Wage compensation study – no comparable counties
1	11	Disproportionate amount of salary spent on housing and basic costs.
`1		Culture of independence can be detrimental because people aren't able to
		collaborate or ask for help
1		Form of government – Town Meeting
1		Lack of support from press (lack of media coverage)
1		Need better transparency
1		Small town stigma/ privacy
	1	Unhealthy living conditions due to poor housing options
	1	Landbank makes housing problem worse
	1	Neighbors interfering with neighbors
	1	Mental health issues in the community
	1	Consequences of unhealthy living conditions/ housing/ obesity, diabetes
	1	Hospital specialists go through so much to get here.
NCHCC	PFACC	Question: HOLDING COMMUNITY BACK
1		People get frozen / things are overwhelming
1		"They" should do this. (Who is they?)
1		Issues are overwhelming. Where do we start?
1		Cynicism
1		Shift of paradigm – re-identifying ourselves as the community
NCHCC	PFAC	Question: SOLUTIONS
1		Community conversations - Atheneum
1		Encourage summer residents to interact with year-round residents
1		Wellness outweighs servility
1	1	Behavioral health task force
1		Hospital wants to incorporate the needs of the community into our future plans.
	1	Share/ sponsorships with island farms
	1	Mentorships/ training in exchange for years of service on island
	1	Spanish speaking nutritionist