



2021

Community Health Needs Assessment

November 1, 2021

This Community Health Needs Assessment was approved by the NCH Board of Trustees in October 2021

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Executive Summary

Introduction

As the only large-scale medical service provider on Nantucket, the Nantucket Cottage Hospital (NCH) assumes a unique role in the community as one of the most trusted sources for healthcare leadership on the island. As the island’s healthcare leader, NCH frequently and proactively collaborates with the community, government agencies, and civic associations to better understand the health challenges impacting Nantucket’s year-round and seasonal residents.

The goals of this community health needs assessment (CHNA) are to 1) identify the primary health-related needs that residents of Nantucket face, 2) understand how those needs are currently being addressed, and 3) identify opportunities to address these needs in the future.

This CHNA report includes:

- A review of key demographic, social and environmental, and health outcomes data for Nantucket residents, and
- The findings from a community engagement process that included public town halls, surveys, and a robust series of stakeholder interviews.

Context

This CHNA took place during a period of unprecedented challenge as the COVID-19 pandemic limited our ability to meet with community stakeholders beginning in March 2020, and the movement for racial justice in the summer of 2020 increased nationwide awareness of the impact of racism on health and health inequities. Lockdowns and social distancing requirements impacted the methods by which we conducted our community outreach and stood at the forefront of many respondents' focus and feedback. Additionally, there was a heightened focus from many respondents across the racial spectrum on ensuring a diverse and inclusive process.

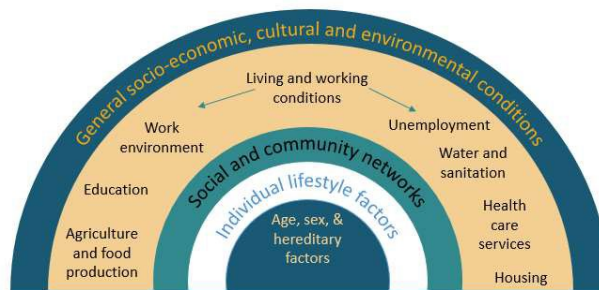
Methods

This CHNA seeks to identify and prioritize persistent and emerging community health needs on Nantucket Island. The assessment utilizes the World Health Organization social determinants of health framework (Figure 1.), defining health in the broadest sense and recognizing numerous factors at multiple levels, including:

- lifestyle behaviors including active living and healthy eating habits
- clinical care including access to medical and behavioral health services as well as insurance coverage

- social and economic factors including poverty, unemployment and access to affordable housing, and
- the physical environment including air and water quality

Figure 1: Social Determinants of Health Framework



SOURCE: World Health Organization, Commission on the Social Determinants of Health, Towards a Conceptual Framework for Analysis and Action on the Social Determinants of Health, 2005.

The process of gathering the qualitative and quantitative data involved a combination of direct community outreach through public town halls, surveys, and a robust series of stakeholder interviews. The stakeholder interviews targeted civic leaders, community advocates, and healthcare providers, emphasizing collecting feedback about the community issues facing our most vulnerable residents. Interviewees were asked to identify key health needs, populations impacted most heavily by these key health needs, perceived barriers to addressing needs, and suggestions for addressing these needs moving forward.

Community Health Needs

While many issues emerged during the community engagement process and data review, four

Affordable Housing

- Median home value on Nantucket is \$2.55 million
- 90% of Nantucket's year-round population cannot afford to buy a home

Mental Health

- Nantucket has the lowest provider density in Massachusetts
- Data suggests Nantucket has a higher mental health need compared to Massachusetts

Cancer

- Nantucket has a significantly higher cancer incidence rate than the statewide average
- Nantucket has a limited capacity for cancer care

Substance Use Disorder

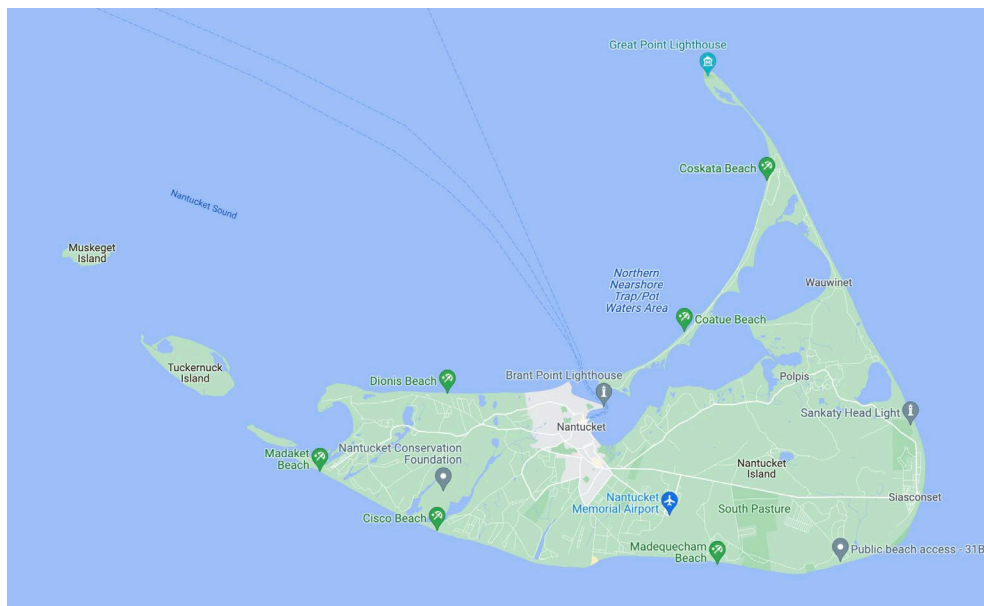
- Stakeholders identified addiction treatment as a key health need
- Nantucket has zero detox facilities and one suboxone provider

stood out as the most pressing: lack of affordable housing, access to mental and behavioral health care, access to cancer care, and substance use disorders.

Community Health Needs Assessment Report

Background

Nantucket is located 30 miles off the coast of Cape Cod, Massachusetts. It is a town, a county, and an island, with a geographic area of roughly 47 square miles. More than 60 percent of the island is permanently protected as conservation land.



Source: Google Maps

Located on Nantucket, Nantucket Cottage Hospital (NCH) delivers health care under unique circumstances: providing quality facilities, programs, and services to a year-round population of 14,000 residents, which increases to almost 100,000 during the summer months, all while being isolated from the mainland. Today, this 110-year-old hospital includes a complete inpatient ward, a full range of modern diagnostic and treatment capabilities for both emergency and ongoing care, and numerous outpatient services and programs.

The top health needs identified in the 2018 Community Health Needs Assessment included: 1) Behavioral Health; 2) Women’s and Children’s Health; 3) Access to Healthcare; 4) Access to Housing. These findings generally aligned with the conclusions in the Healthy Nantucket 2020 survey, which identified the priority needs areas as: 1) Behavioral Health; 2) Access to Housing; 3) Access to Health Care, and; 4) Women’s and Children’s health.

Definition of Community Served

As the single largest healthcare provider on Nantucket, NCH serves the entire Nantucket community, both year-round and seasonally. Recent 2020 U.S. Census data puts the year-round population at 14,255, though local experts dispute this finding and place their estimate closer to 17,000 year-round residents. A popular summer destination, Nantucket’s seasonal population swells in the summer, growing to what some local experts estimate at 70,000 to 100,000 seasonal visitors at any given time.

Context

This CHNA was conducted during both the COVID-19 pandemic and the national movement towards racial justice. This context impacted both the CHNA data collection process and topics and concerns that participants put forth in focus groups and interviews. On February 1, 2020, the first confirmed case of COVID-19 in Massachusetts was announced. On March 15, 2020, the Governor of Massachusetts issued an emergency order announcing emergency actions to address COVID-19, including school closures, business closures, and limitations on

gatherings. As a result, all primary data collection was shifted to a virtual setting (e.g., telephone, video focus groups, and an online survey).

Not surprisingly, COVID-19 was a primary health concern for communities and exacerbated underlying inequities and social needs. The pandemic brought to light the capabilities and gaps in the healthcare system, the public health infrastructure, and social service networks. In this context, an assessment of the community's strengths and needs, particularly the social determinants of health, is critical and challenging. Where possible, CHNA participants were asked to reflect on health and social issues beyond those directly related to COVID-19, but the short-term and long-term impacts remained at the forefront of many conversations.

National Movement for Racial Justice

A wave of national protests for racial equity – sparked by the killing of George Floyd, Ahmaud Arbery, Breonna Taylor, Tony McDade, and many others – also coincided with the timeline of the CHNA. Local and national attention focused on how racism is embedded in every system and structure of our country, including housing, education, employment, and healthcare.

This context impacted the CHNA, including the design of data collection instruments and the input that was shared during interviews and focus groups, as well as through survey responses. While racism and oppression have persisted in this country for over 400 years, it is important to acknowledge the recent focus on these issues.

Population Characteristics

With a year-round population of approximately 14,000 individuals spread over 46 square miles, Nantucket County is the least populous Massachusetts county. Despite this small year-round population, during the summer months (July and August) and shoulder season (April, May, June, September, and October), the population of Nantucket swells to between 70,000 – 100,000, according to local experts. This large influx during the summer months is driven by seasonal homeowners, vacationers, and day visitors.

Table 1: Total Population - Massachusetts/Nantucket

Total Population by State, County, and City/Town, 2000, 2010, 2020			
Area	2000	2010	2020
Massachusetts	6,349,097	6,547,785	7,029,917
Nantucket	9,520	10,172	14,255

Source: U.S. Census Data (2000 – 2019). Estimated Percent change in the number of people between the periods of 2010-2014 and 2015-2019.

Population Growth

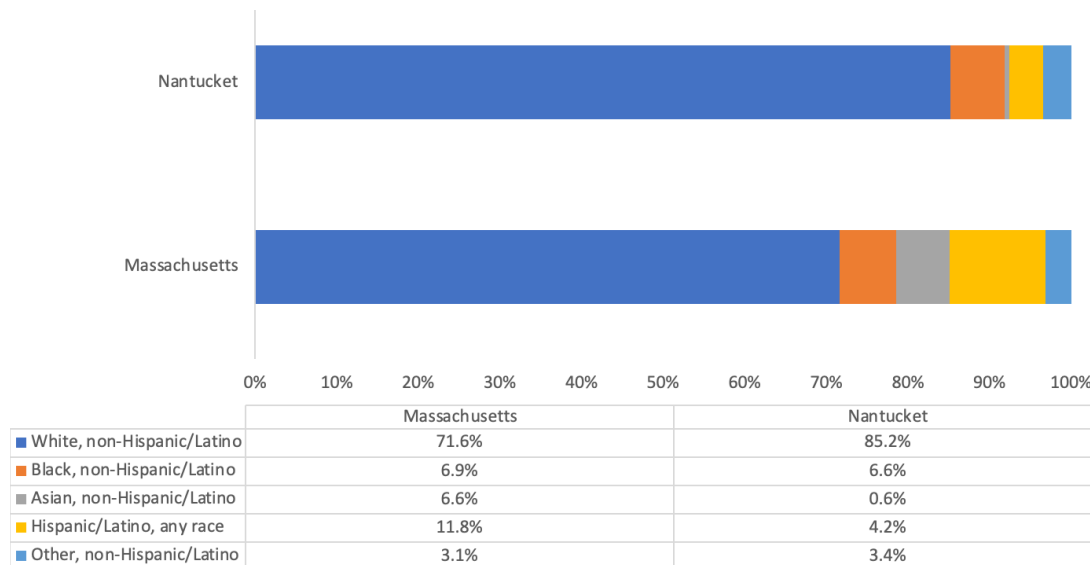
According to the Census, since 2000, the recorded year-round population for Nantucket has grown 49.7%, significantly outpacing the growth rate for Massachusetts, at 10.7% (Table 1.). Importantly, residents and statisticians on Nantucket have long acknowledged that the Census population is not reflective of the actual population of Nantucket. When accounting for a growing seasonal influx of residents and residents not captured in the Census data, the

effective population is likely significantly higher than the recorded population, leading to an even higher growth rate than what the Census data suggest.

Race Distribution

As seen in Figure 2, most of the residents on Nantucket are white (85.2%), higher than the state-wide figure of 71.6%. Nantucket has a significantly lower percentage of Asian residents at 0.6% compared to the state-wide percentage of 6.6%. The percentage of black Nantucket residents (6.6%) is slightly lower than the state-wide percentage of 6.9%. In addition, Nantucket has a higher percentage of residents who identify as Other at 3.5% compared to 3.2% for Massachusetts overall. The percentage of Hispanic/Latino residents on Nantucket is 4.2%, lower than the state-wide percentage of 11.8%, although local experts assert that the Hispanic/Latino population is significantly underrepresented.

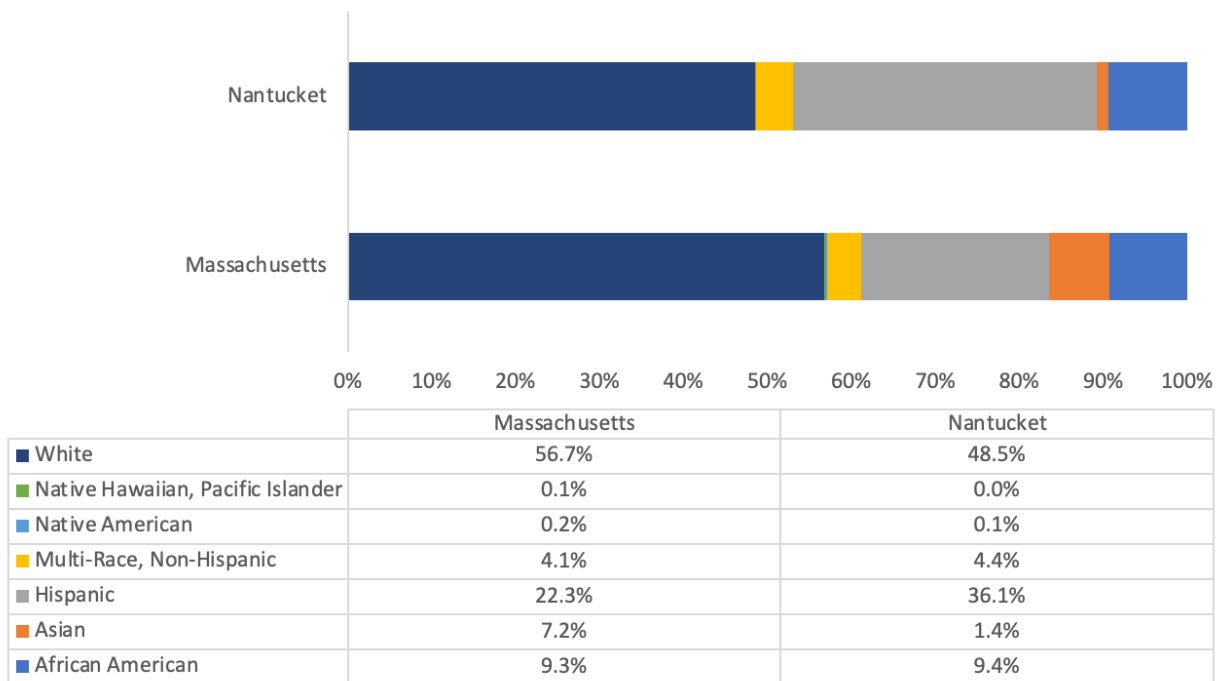
Figure 2: Racial Composition, 2015-2019



Source: U.S. Census Data (2015 – 2019)

The demographic data for public school enrollment on Nantucket paints a much more diverse portrait, with 36.1% of students registered as Hispanic/Latino, 9.4% African American, and 48.5% of the student body identified as white, non-Hispanic/Latino (Figure 3.). Additionally, the population identifying as white is also more ethnically diverse than the Census data capture, with a significant population of second-generation Bulgarians and Russians.

Figure 3: Public School District Enrollment 2020 - 2021



Source: Nantucket Public Schools

Age Distribution

As shown in Table 2, the median age for individuals on Nantucket and the population percentage under the age of 18 is similar for both Nantucket and Massachusetts, though Nantucket has a noticeably smaller proportion of 18 to 24-year old residents.

Table 2: Age Distribution - Massachusetts/Nantucket

Age Distribution	Nantucket	Massachusetts
Median Age	39.5	40.3
Under 5	6.3%	5.3%
5 to 17	14.4%	14.7%
18 to 24	6%	10.2%
25 to 44	30.3%	26.4%
45 to 54	15.2%	13.7%
55 to 64	13.2%	13.5%
65 to 74	8.8%	9.2%
Over 75	5.8%	6.9%

Source: U.S. Census Data (2015 – 2019)

Gender

As seen in Table 3, the gender split that we see on Massachusetts is inverted on Nantucket, with 51.2% of the population identifying as male, and 48.5% identifying as female.

Table 3: Gender Split – Massachusetts/Nantucket

Gender	Massachusetts	Nantucket
Male	48.5%	51.2%
Female	51.5%	48.8%

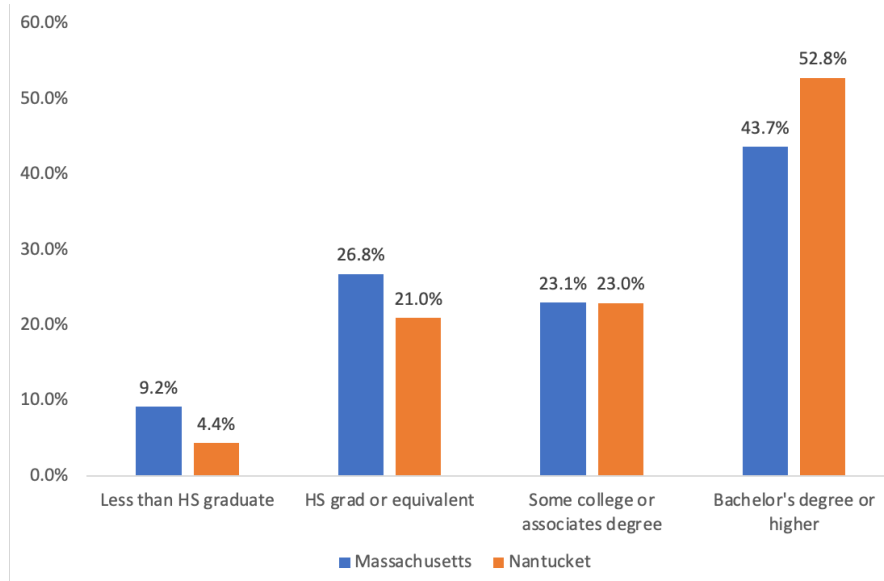
Source: U.S. Census Data

Social Determinants of Health

Educational Attainment

As seen in Figure 4, Nantucket has a higher percentage of residents who have achieved a bachelor’s degree or higher at 52.8% compared to the state-wide percentage of 43.7%, and a lower percent of residents who have achieved a high school equivalent or less. In contrast, Table 4 shows that students enrolled in high school on Nantucket have a slightly lower likelihood of graduating (86.2%) than their peers state-wide (89.0%).

Figure 4: Highest Education Attained



Source: U.S. Census Data (2015 – 2019)

Table 4: Local Four-Year High School Graduation Rate 2020

High School Graduation Rate	
Massachusetts	89.0%
Nantucket	86.2%

Source: U.S. Census Data (2020)

Housing

As shown in Table 5, housing costs are of particular concern for Nantucket residents, with 40.2% of Nantucket homeowners spending over 35% of their household income on housing, compared to 26.6% for Massachusetts.

Table 5: Housing Costs on Nantucket

Percent of Residents Whose Housing Costs are 35% or More of Household Income 2015-2019	% Owner	% Renter
Massachusetts	26.6%	46.7%
Nantucket	40.2%	45.3%

Source: U.S. Census Data (2015 – 2019)

Nantucket has a higher proportion of homeowners at 70.5% compared to 62.4% for Massachusetts (Table 6.).

Table 6: Rental/Owner Proportion on Nantucket

Percent of Households That Own or Rent Homes 2015-2019	Own (%)	Rent (%)
Massachusetts	62.4%	37.6%
Nantucket	70.5%	29.5%

Source: U.S. Census Data (2015 – 2019)

However, from 2015 to 2019, Census data shows that an estimated 69.9% of housing units in Nantucket are vacant, compared to a 9.7% average vacancy rate for Massachusetts. This significant vacancy rate is attributed to the seasonal nature of Nantucket’s population, with many owners leaving their homes vacant during the off-season.

Nantucket housing costs are among the highest in the United States, exacerbated by a limited inventory of affordable housing and little land available for development. In 2020, the median home value was \$2.55 million, and the average home value was \$3.37 million. The

Workforce Housing Needs assessment found in 2015 that half of the island’s year-round population struggles to pay their rent, and 90% of the year-round population cannot afford to buy a home according to a study conducted by RKG Associates on behalf of Housing Nantucket. The Economic Policy Institute used a family budget calculator to estimate “the income a family needs to attain a secure yet modest living standard”. The budget calculator developed by the Economic Policy Institute in 2018 found that a two-parent family with one child would need an annual income of \$101,224 - not including savings or discretionary spending. High costs often translate into lower-income families having to balance between rental payments or food purchases or result in residents sacrificing sleep to take on a second or third job to cover housing costs.

Food Insecurity

Food security was a significant need identified in the town halls, survey responses, and stakeholder interviews. According to the Greater Boston Food Bank, food insecurity in Massachusetts was projected to increase by 81.0%, making it the state with the 2nd highest percentage change in children at risk of food insecurity.

Nantucket county was identified as one of four counties that have seen their projected food insecurity rates increase by over 70.0%. The Mind the Meal Gap 2020 report also indicates that 1:4 food-insecure children are living in homes that are ineligible for public assistance programs. This is of particular importance to the Nantucket community due to large number of residents who do not have documented residency status.

Employment and Income

The Nantucket community fares significantly better than the state, with 2.9% of the population unemployed compared to an unemployment rate of 4.8% for Massachusetts. Similarly, the proportion of families under the federal poverty line is 3.4% for Nantucket, versus 7.0% for the state (Table 7.).

Table 7: Unemployment and Income

State, County, and City/Town, 2015-2019	Unemployment	Family Income Under the Federal Poverty Line in the last 12 months	Median Household Income (US\$)
Massachusetts	4.8%	7.0%	\$81,215
Nantucket	2.9%	3.4%	\$107,717

Source: Bureau of Labor Statistics Local Area Unemployment Statistics Program (2020 – 2021, monthly). Community Profile Report of County: Nantucket

Access to Care

NCH 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, the Fairwinds Center, and provides office space for this organization. NCH also provides office space for Health Imperatives, Nantucket’s only sexual and reproductive health care center.

As seen in Table 8, a higher percentage of Nantucket adults (5.0%) do not have health insurance compared to the state-wide average of 4.0%. In addition, 2.0% percent of children under 19 are without health insurance coverage on Nantucket - twice that of the state.

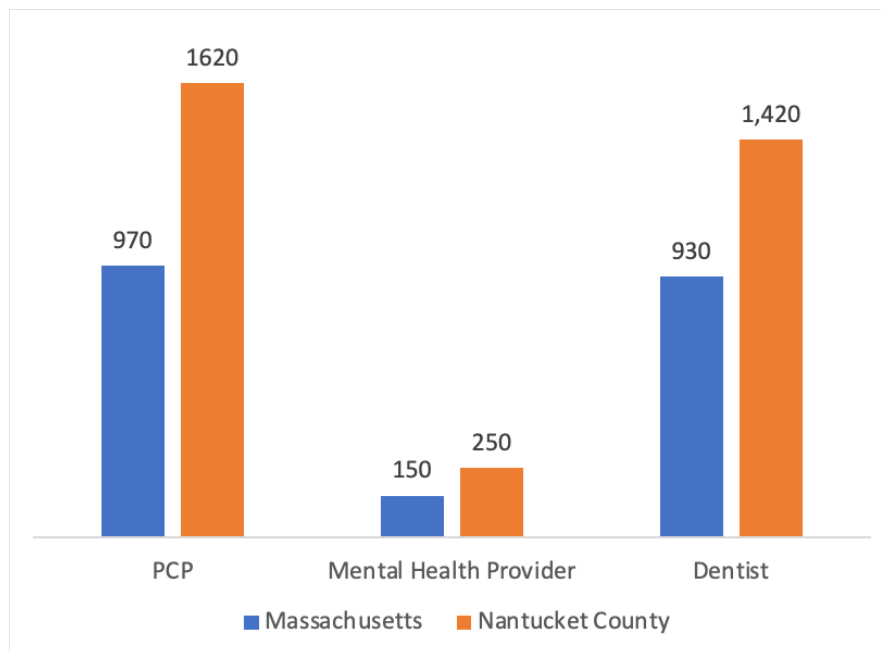
Table 8: Population Without Health Insurance

Population without Insurance	Adults <65	Children <19	White alone	Black alone	Asian alone	Hispanic/Latino, any race
Massachusetts	4.0%	1.0%	2.3%	4.4%	3.1%	5.3%
Nantucket County	5.0%	2.0%	4.8%	1.5%	12.7%	11.4%

Source: U.S. Census Data (2015 – 2019)

By race group, we see that Asian and Hispanic residents of Nantucket are more likely to be uninsured than Asian and Hispanic residents statewide, at 12.7% and 11.4% respectively.

Figure 5: Population Per Medical Provider



Source: U.S. Census Data (2015 – 2019)

Health Outcomes

Overall Mortality

Mortality rates measure the impact of disease on a population, while premature mortality data (deaths before the age of 56 years old) helps to provide a picture of preventable deaths and points to areas where additional health and public health interventions may be warranted. Age-adjusted mortality rates per 100,000 population on Nantucket stood at 482.5, a lower than the state-wide rate of 656.1 per 100,000 population (Table 9.).

Table 9: Mortality Rates Nantucket/Massachusetts

County	Deaths	Population	Crude Rate	Age Adjusted Rate	Age Adjusted Rate	Age Adjusted Rate
					Lower 95% CI	Upper 95% CI
MA	58,630	6,892,503	850.6	656.1	650.6	661.5
Nantucket	64	11,399	561.5	482.5	369.9	618.5

Source: CDC National Center for Health Statistics, USALEEP (2010 – 2015). Life Expectancy at birth, as of 2010-2015

While data shows that Nantucket’s mortality rate is lower than Massachusetts’, there are areas of insufficient data, such as on Nantucket’s leading causes of death. Though current data are not available for Nantucket, we can use state-wide data as an indicator. Table 10 shows that for Massachusetts, the leading cause of death is all-site cancer, followed by heart disease and injuries/poisonings.

Table 10: State-wide Causes of Death

Leading Causes of Death by State, 2014	
Rank	Massachusetts
1	All-Site Cancer
2	Heart Disease
3	Injuries and Poisoning

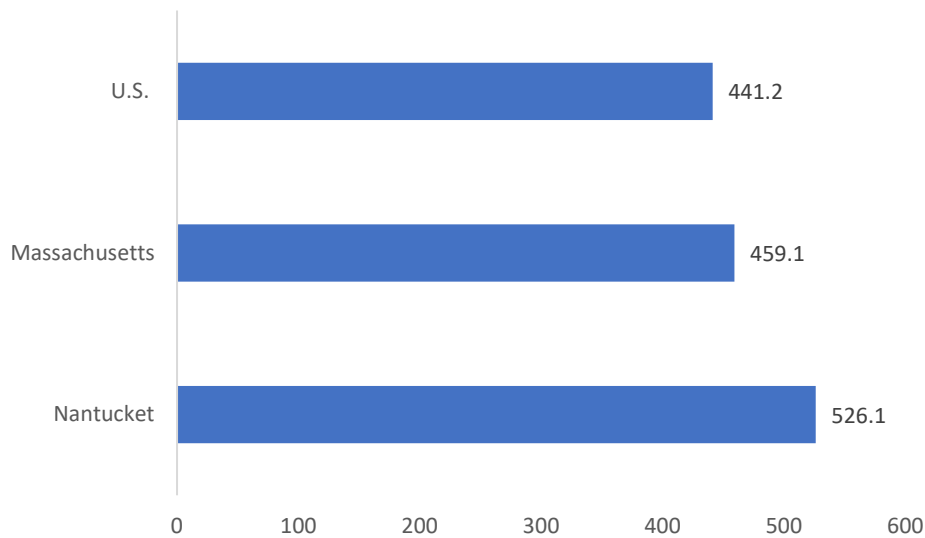
Source: CDC National Center for Health Statistics, USALEEP (2010 – 2015). Life Expectancy at birth, as of 2010-2015

Cancer

Cancer remains the leading cause of death in Massachusetts. On Nantucket, data show higher rates for cancers compared to the state. As shown in Figure 6, Nantucket has a higher all cause

rate of 526.1 per 100k population, higher than the state (459.1 per 100k population) and the U.S. (441.2 per 100k population).

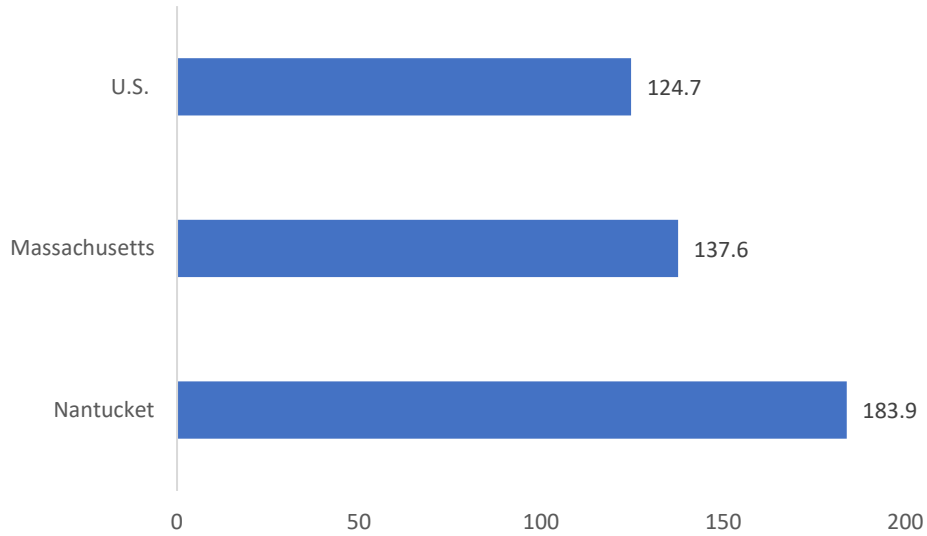
Figure 6: All Cause Cancer Rate per 100k Population - U.S., Massachusetts, and Nantucket



Source: Centers for Disease Control and Prevention (CDC) and National Cancer Institute (NCI) (2011-2015). Annual cancer incidence per 100,000 persons, as measure in 2011-2015

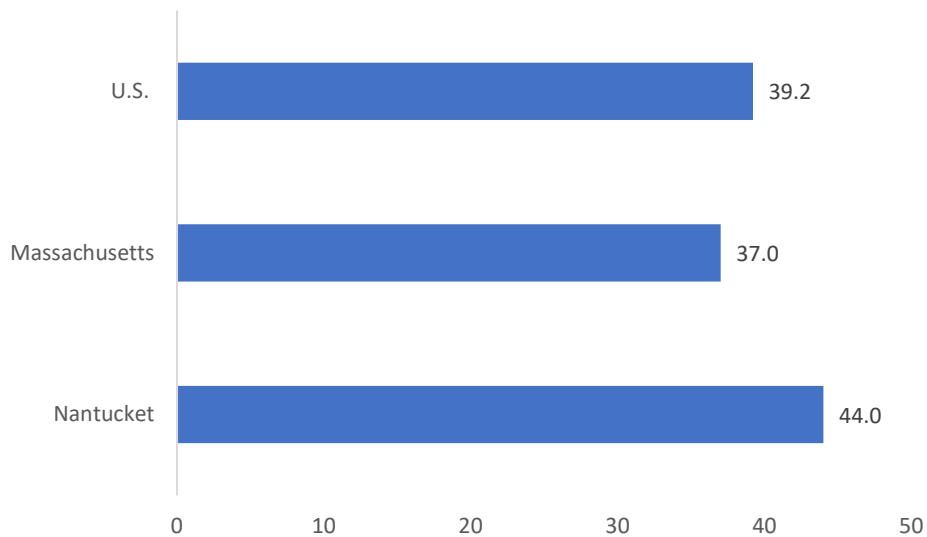
Looking at specific cancers, the breast cancer rate for Nantucket was 183.9 per 100k population compared to 137.6 per 100k population for the state (Figure 7.); the colon/rectal cancer rate for Nantucket was 44.0 per 100k population compared to 37.0 for the state (Figure 8.); and the melanoma rate for Nantucket was 54.0 per 100k population compared to 20.0 for the state (Figure 9.). While this number may be overreported due to a lack of accurate Census data, it is important to note, especially given the limited capacity of cancer care providers on Nantucket.

Figure 7: Breast Cancer Rate per 100k Population - U.S., Massachusetts, and Nantucket



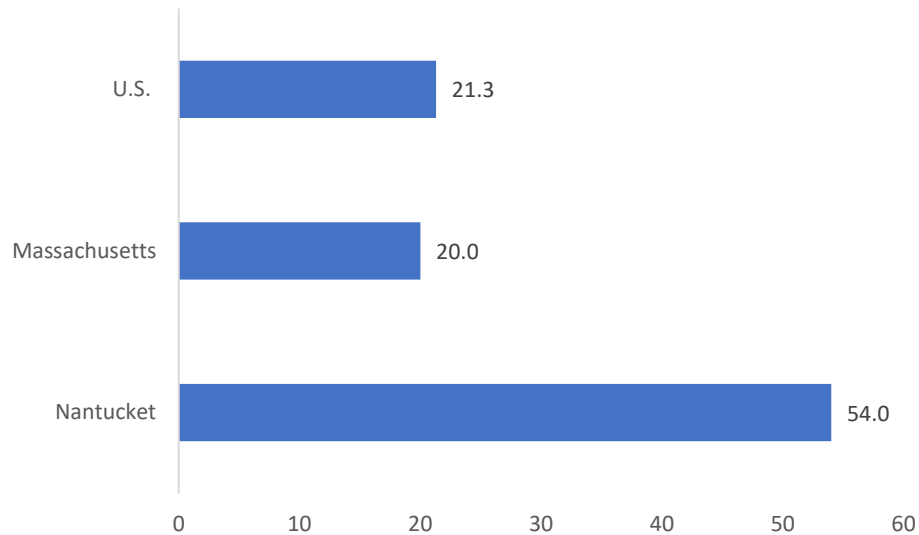
Source: Centers for Disease Control and Prevention (CDC) and National Cancer Institute (NCI) (2011-2015). Annual cancer incidence per 100,000 persons, as measure in 2011-2015

Figure 8: Colon/Rectal Cancer Rate per 100k Population - U.S., Massachusetts, and Nantucket



Source: Centers for Disease Control and Prevention (CDC) and National Cancer Institute (NCI) (2011-2015). Annual cancer incidence per 100,000 persons, as measure in 2011-2015

Figure 9: Melanoma Incidence Rate per 100k Population - U.S., Massachusetts, and Nantucket



Source: Centers for Disease Control and Prevention (CDC) and National Cancer Institute (NCI) (2011-2015). Annual cancer incidence per 100,000 persons, as measure in 2011-2015

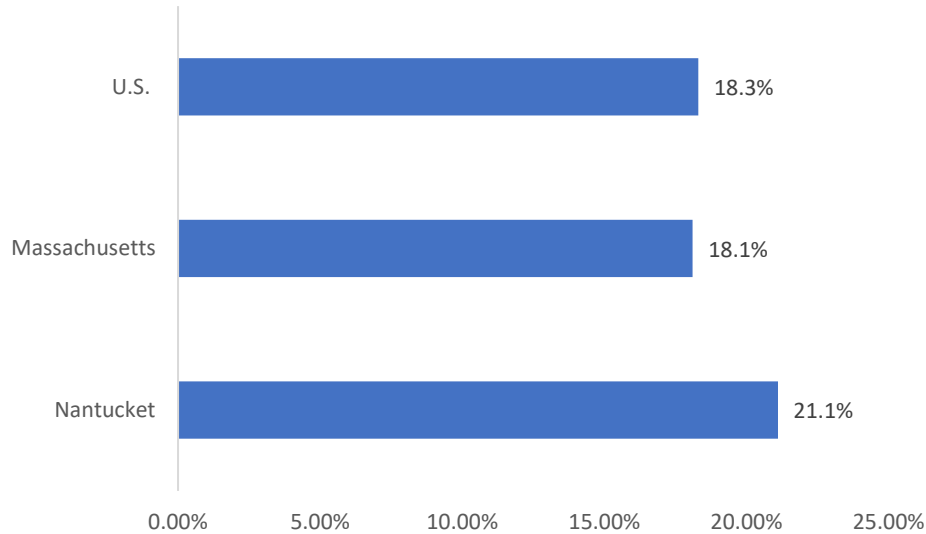
Mental Health

During Nantucket’s 2018 CHNA process, behavioral health was the community’s number one concern and remained a significant concern for all stakeholders interviewed during the 2021 CHNA process. One of the major drivers for this concern is a lack of mental health providers on Nantucket, with the community having the lowest provider density in the state. This issue is compounded by significant privacy concerns from local residents, many of whom opt to seek treatment off-island or forgo treatment altogether due to the likelihood that providers are residents, friends, or neighbors. The hesitation to seek treatment by residents combined with the lack of services on Nantucket contributes to the fact that 90.0% of patients

admitted to NCH for behavior health concerns haven't seen a mental health professional in the 90-days leading up to their assessment at NCH.

Evidence also suggests that the Nantucket community has a higher mental health need compared to the rest of the state. The island has weathered two suicide clusters: One involving high school aged youth in 2008; and the second involving adult men in 2014-2015. As shown in Figure 10, Nantucket also has a higher reported incidence of depression (21.1%) compared to the state (18%). From 1999-2017, Nantucket has reported 24 deaths related to self-inflicted harm. In Massachusetts, there were 9,921 deaths related to self-inflicted harm during the same period. The local community mental health clinic estimates that they provided 8,690 hours of clinical services in 2020, but they and clinicians in private practice are often running waitlists. The provider shortage is exacerbated by the affordable housing crisis, which leads to frequent provider turnover.

Figure 10: Percentage of Adults Diagnosed with Depression (2018)



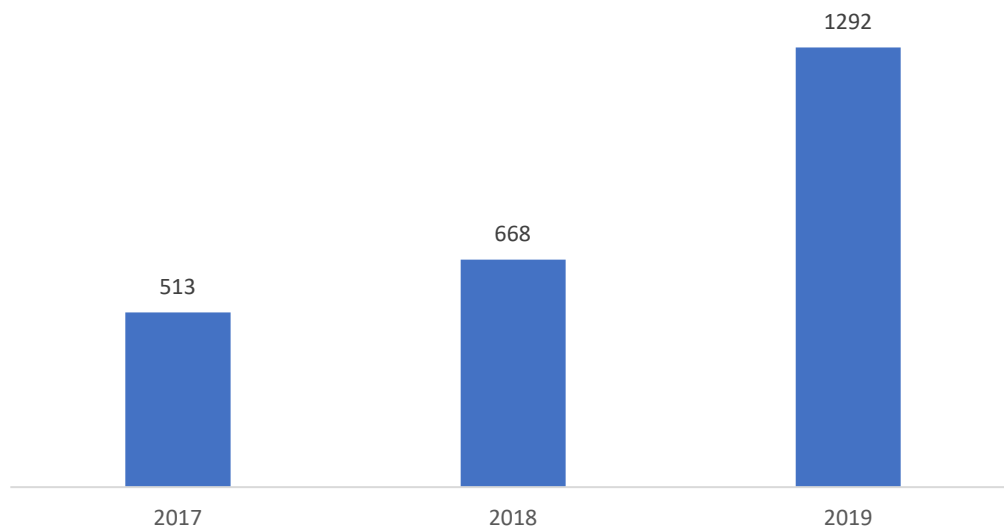
Source: Policy Map & CDC BRFSS (2018). Estimated percent of adults reporting fourteen or more days of poor mental health in the past 30 days in 2018

Substance Use Disorder

Stakeholder interviews indicated addiction and the need for treatment as a key health need. While substance use disorder statistics specific to Nantucket are hard to isolate, stakeholders spoke about their concern that our reliance on a tourist-based economy unintentionally glamorizes drug and alcohol use, and that people who want to seek treatment for substance misuse have few resources in terms of qualified providers or levels of care. For example, patients must travel off-island to access detoxification facilities, and while there is one provider on the island who prescribes suboxone, there are no methadone providers on the island, nor are there sober houses or residential rehabilitation programs.

Fairwinds – the local community mental health center reported a recent increase in patients referred to complete court-mandated treatment for Operating Under the Influence (OUI), 513 hours of patient care in 2017, 668 hours in 2018 and 1,292 hours in 2019.

Figure 11: Patients Referred to Court Mandated Treatment for OUI



Source: Fairwinds Counseling Center

The most recent Alliance for Substance Abuse and Prevention Pride survey completed at Nantucket High School indicates that 27.8% of 11th graders and 62.7% of 12th graders regularly drink alcohol on the weekends and 41% of 12th graders and 19% of 11th graders reporting cannabis use on the weekends.

Table 11: PRIDE Survey Results - 11th and 12th Graders Self-Report

PRIDE Survey Question	11 th Graders	12 th Graders
Reporting regularly drink alcohol on the weekends	27.8%	62.7%
Reporting cannabis use on the weekends	19.0%	41.0%

Source: Nantucket Public Schools

The number of Police and Fire Department responses to drug overdoses has decreased from 15 in 2018 to 6 in 2019, but it is unclear if this represents a decrease in opiate use, or an increase in community availability of Narcan leading to less reliance on municipal response.

Key Themes and Conclusions

Since 2019, NCH has engaged the Nantucket community in an attempt to gain insight into the underlying health needs of the community. With the COVID-19 Pandemic reaching the shores of Nantucket during the middle of this engagement, the community had an increased interest and awareness of many of the needs that had been exacerbated by the Pandemic. The result of this increased awareness and interest resulted in some new findings on top of many of the longstanding needs of Nantucket. This CHNA marks the first-time food insecurity was highlighted by the community as a potential need, and a newfound awareness of racial inequities’ impact on health helped to create a more robust and inclusive understanding of community health needs.

While many issues emerged throughout the community engagement period, four stood out as the most consistently concerning and pressing, lack of affordable housing, the need for increased mental health care, the high demand for cancer care and substance use disorders.

Affordable Housing	<ul style="list-style-type: none"> • Median home value on Nantucket is \$2.55 million • 90% of Nantucket's year-round population cannot afford to buy a home
Mental Health	<ul style="list-style-type: none"> • Nantucket has the lowest provider density in Massachusetts • Data suggests Nantucket has a higher mental health need compared to Massachusetts
Cancer	<ul style="list-style-type: none"> • Nantucket has a significantly higher cancer incidence rate than the statewide average • Nantucket has a limited capacity for cancer care
Substance Use Disorder	<ul style="list-style-type: none"> • Stakeholders identified addiction treatment as a key health need • Nantucket has zero detox facilities and one suboxone provider

Implementation Plan and Strategies

Priority Area 1: Affordable Housing

Goal 1: Ensure access to safe, stable and affordable year-round housing across all income levels on Nantucket.

1.1: Advocate for the passage of Massachusetts House Bill 4201, *An Act authorizing the Town of Nantucket to impose a real estate transfer fee for affordable and workforce housing* and House Bill 1377, *An Act empowering cities and towns to support affordable housing with a fee on certain real estate transactions.*

1.1.1: Nantucket Cottage Hospital will leverage Mass General Brigham Government Affairs department to lobby the Massachusetts House to pass H. 4201 and H. 1377.

1.2: Increase the total number of affordable and accessible year-round rentals on Nantucket

1.2.1: Use grant funding from Nantucket Cottage Hospital's Determination of Needs to support Nantucket's [Habitat for Humanity](#), a local non-profit seeking to make decent, affordable shelter accessible for all Nantucketers, providing deed-restricted homeownership opportunities.

1.2.2: Use grant funding from Nantucket Cottage Hospital's Determination of Needs to

support [Housing Nantucket](#), a local non-profit dedicated to preserving and providing equitable housing solutions for Nantucket's year-round community through providing rental housing, homeownership and educational programs.

Priority Area 2: Mental Health and Substance Abuse

Goal 2: Enhance access to high quality mental health resources on Nantucket.

2.1 Deliver an inclusive and interconnected system of prevention, intervention, treatment, and recovery opportunities that helps the community get well and stay well.

2.1:1: Play a leadership role in identifying Nantucket's behavioral health resources by participating in the creation of a roadmap for system integration, in line with the State of Massachusetts's [Roadmap for Behavioral Health Reform](#), and funding the development of the roadmap through Behavioral Health Initiative Group.

2.2: Expand the types of behavioral health resources on Nantucket.

2.2.1: Provide funding through Nantucket Cottage Hospital's Determination of Needs funds to the [Artists Association of Nantucket](#) to develop a healing through creative arts program.

2.3: Increase the total number of behavioral health practitioners on Nantucket.

2.3.1: Provide funding through Nantucket Cottage Hospital's Determination of Needs funds to [Fairwinds – Nantucket's Counseling Center](#) to develop a healing and on island human services training institute.

2.4: Inform the community of mental health, and drug misuse resources.

2.4.1: Provide funding through Nantucket Cottage Hospital's Determination of Needs funds to [NAMI on Nantucket](#) to increase mental health and drug misuse messaging.

Priority Area 3: Cancer

Goal 3: Develop an understanding of the key characteristics and drivers of Nantucket's high incidence rate for cancer.

3.1 Research the data and epidemiological reports pertaining to cancer on Nantucket.

3.1.1: Nantucket Cottage Hospital will select a clinical lead to conduct an assessment on the data indicating that Nantucket has a higher incidence of certain types of cancer than statewide averages.

3.1.2: Nantucket Cottage Hospital’s clinical lead will integrate with the Town of Nantucket’s health officials to develop a comprehensive assessment to be presented to community health leaders.

Appendix

Appendix A: CHNA Steering Committee Members

Tibby Allen
Jessie Brescher
Sarah Chotkowski
Jeannie Critchley
Chris Glowacki
Taylor Hilst
Brenda Johnson
Patty Keneally
Dr. Margaret Koehm
Marsha Kotalac
James Lanza
Dr. Janet Jodi Larson
Shay Maguire
Melissa Philbrick
Tavinder Phull
Gary Shaw
Barbara Spittler

Appendix B: CHNA Online Community Survey (English)

Introduction: Nantucket Cottage Hospital is conducting the Community Health Needs Assessment. The goal of the assessment is to identify the island's most important health concerns and identify new ways to address them.

1.) This is a list of health concerns previously reported by Nantucket residents. Please choose the ones that you believe are important to Nantucket today:

- Mental health
- Women's health
- Children's health
- High rates of cancer
- Healthcare for elders
- Tick-borne diseases

2.) Now select the top three most important health concerns:

- Mental health

Women's health
Children's health
High rates of cancer
Healthcare for elders
Tick-borne diseases

3.) Did we forget anything? Please type it here:

4.) This is a list of things that impact people's ability to be healthy. Please choose the ones that you believe are important to Nantucket today:

Lack of affordable housing
Access to health care
Good schools
Strong economy
Language barriers

5.) Now select your top three:

Lack of affordable housing
Access to health care
Good schools
Strong economy
Language barriers

6.) Did we forget anything? Please type it here:

7.) Mental health is often called one of the biggest issues in our community. Below are some examples of mental health problems, which do you think are problems in our community?

Alcohol use disorders
Opiate use disorders
Serious mental illness (like schizophrenia)
Anxiety disorders
Mood disorders (like depression and bipolar)
Seasonal affective disorders
All of the above
None of the above

8.) Did we forget anything? Please type it here:

9.) What do you think we should do to fix mental health in our community?

- Educate people to remove negative beliefs about people with mental illness
- Reach out to people who are at high risk of mental illness
- Provide education in the schools that focus on preventing drug and alcohol use
- Increase availability of therapists
- Provide more services (like a sober house, detoxification facility, partial hospitalization program)
- Create a “wellness center” where all of these services can be located together

10.) Anything else? Please type it here:

11.) These are some examples of issues that effect women and children. Which do you think are problems in our community?

- Not enough childcare spots for children under the age of 5
- Lack of childcare agencies
- Lack of awareness about what services exist that can help women and children
- Lack of dental care
- Lack of openings for primary care doctor appointments
- Lack of information about eating healthy foods
- Lack of access to childcare experts

12.) Anything else? Please type it here:

13.) Do you think there needs to be more access to certain types of medical providers on the island? Choose all that apply

- Physical therapy
- Oncology (treatment for cancer)
- Annual exams for children
- Primary care (doctors, nurses)
- Cardiac (heart) services
- Alternative healthcare (like acupuncture, yoga, meditation)
- Mental health

14.) Anything else? Please type it here:

15.) Affordable housing is often called one of the biggest issues in our community. What do you think should be done to fix this?

- More affordable homes for people to buy
- More housing provided by employers for year-round employees

More housing provided by employers to seasonal employees
More employers providing subsidized housing costs (employers paying extra money that employees can use to pay rent)

16.) Anything else? Please type it here:

17.) These are a list of barriers to people pursuing health and happiness on Nantucket. Which do you think are important? Choose all that apply:

Racism
Discrimination against people who are not U.S. citizens
Financial hardship
Lack of health insurance
Discrimination against people who do not speak English, or speak it well
Discrimination against people who do not have a lot of education

18.) Anything else? Please type it here:

Appendix C: CHNA Online Community Survey (Spanish)

Introducción: Nantucket Cottage Hospital está realizando la evaluación de necesidades de salud de la comunidad. El objetivo de la evaluación es identificar las inquietudes de salud más importantes de la isla y nuevas formas de abordarlas.

1.) Esta es una lista de las inquietudes de salud previamente informadas por los habitantes de Nantucket. Seleccione aquellas que cree que son importantes para Nantucket en la actualidad:

Salud mental.
Salud de la mujer.
Salud infantil.
Tasas elevadas de cáncer.
Atención médica para adultos mayores.
Enfermedades transmitidas por garrapatas.

2.) Ahora seleccione las tres inquietudes de salud más importantes:

Salud mental.
Salud de la mujer.
Salud infantil.
Tasas elevadas de cáncer.
Atención médica para adultos mayores.

Enfermedades transmitidas por garrapatas.

3.) ¿Nos olvidamos de algo? Escríbalo aquí:

4.) Esta es una lista de cuestiones que afectan la capacidad de las personas para mantenerse saludables. Seleccione aquellas que cree que son importantes para Nantucket en la actualidad:

- Falta de viviendas asequibles.
- Acceso a la atención médica.
- Buenas escuelas.
- Buenos empleos.
- Barreras lingüísticas.

5.) Ahora seleccione las tres principales:

- Falta de viviendas asequibles.
- Acceso a la atención médica.
- Buenas escuelas.
- Buenos empleos.
- Barreras lingüísticas.

6.) ¿Nos olvidamos de algo? Escríbalo aquí:

7.) La salud mental con frecuencia se considera uno de los mayores problemas de nuestra comunidad. A continuación, se mencionan algunos ejemplos de problemas de salud mental. ¿Cuáles cree que son propios de nuestra comunidad?

- Trastornos relacionados con el consumo de alcohol.
- Trastornos relacionados con el uso de opioides.
- Enfermedad mental grave (como esquizofrenia).
- Trastornos de ansiedad.
- Trastornos del estado de ánimo (como depresión y bipolaridad).
- Trastorno afectivo estacional.
- Todos los anteriores.
- Ninguno de los anteriores.

8.) ¿Nos olvidamos de algo? Escríbalo aquí:

9.) ¿Qué cree que deberíamos hacer para resolver los problemas de salud mental en nuestra comunidad?

Educar a las personas para que dejen de lado las opiniones negativas sobre las personas

con enfermedades mentales.

Contactar a las personas que tienen riesgo de padecer una enfermedad mental.

Brindar educación en las escuelas que se centre en la prevención del consumo de drogas y alcohol.

Aumentar la disponibilidad de terapeutas.

Ofrecer más servicios (como una casa de vida sobria, centro de desintoxicación, programa de hospitalización parcial).

Crear un “centro de bienestar” donde se pueda acceder a todos estos servicios.

10.) ¿Algo más? Escríbalo aquí:

11.) Estos son algunos ejemplos de problemas que afectan a mujeres y niños. ¿Cuáles cree que son propios de nuestra comunidad?

Lugares insuficientes de cuidado infantil para niños menores de 5 años.

Falta de agencias de cuidado infantil.

Desconocimiento de los servicios existentes que pueden ayudar a las mujeres y niños.

Falta de atención dental.

Falta de disponibilidad de citas con médicos de atención primaria.

Falta de información sobre el consumo de alimentos saludables.

Falta de acceso a expertos en cuidado infantil.

12.) ¿Algo más? Escríbalo aquí:

13.) ¿Cree que debe haber más acceso a ciertos tipos de proveedores de atención médica en la isla? Seleccione todas las opciones que correspondan.

Terapia física.

Oncología (tratamiento para el cáncer).

Exámenes anuales para niños.

Diagnóstico por imágenes (como rayos X, ultrasonido, MRI, etc.).

Atención primaria (médicos, enfermeros).

Servicios cardíacos (del corazón).

Atención médica alternativa (como acupuntura, yoga, meditación).

Salud mental.

14.) ¿Algo más? Escríbalo aquí:

15.) La atención primaria implica visitar con regularidad a un médico o enfermero especializado, tanto para controles anuales como para situaciones en las que no se siente bien o tiene inquietudes relacionadas con su salud. Estos son algunos ejemplos de problemas que pueden

tener lugar en la atención primaria. ¿Experimentó alguno de ellos? Seleccione todas las opciones que correspondan.

Creo que mi médico no hace un buen trabajo ni me brinda una explicación de mi diagnóstico.

Creo que mi médico no se toma mis inquietudes con seriedad.

Experimento dificultades para programar una cita con mi médico.

Experimento dificultades para comunicarme con mi médico por teléfono o a través del portal.

No considero que se me expliquen de manera adecuada los resultados de las pruebas o los estudios por imágenes (como rayos X) que indica mi médico.

16.) ¿Algo más? Escríbalo aquí:

17.) Las viviendas asequibles con frecuencia se consideran uno de los mayores problemas de nuestra comunidad. ¿Qué cree que se debería hacer para resolverlo?

Más hogares asequibles para que las personas compren.

Más viviendas ofrecidas por empleadores a empleados estables.

Más viviendas ofrecidas por empleadores a empleados temporales.

Más empleadores que subsidien los costos de vivienda (empleadores que ofrecen dinero adicional para que los empleados puedan usar en el pago del alquiler).

18.) ¿Algo más? Escríbalo aquí:

19.) Esta es una lista de barreras para personas que buscan la salud y felicidad en Nantucket. ¿Cuáles cree que son importantes? Seleccione todas las opciones que correspondan:

Racismo.

Discriminación de personas que no son ciudadanas de los EE. UU.

Dificultades económicas.

Falta de seguro médico.

Discriminación de personas que no hablan en inglés o que tienen dificultades para hacerlo.

Discriminación de personas que no tienen un nivel de educación elevado.

20.) ¿Algo más? Escríbalo aquí:

21.) Solicitar atención médica si no habla en inglés puede resultar difícil. Díganos si experimentó algo de lo siguiente:

No se me ofrecen los servicios de un intérprete cuando recorro a un hospital.
No tengo acceso a información por escrito traducida a mi idioma de preferencia.
Se me ofrecen los servicios de un intérprete, pero el tiempo de espera es prolongado.
Experimento dificultades para acceder al portal del paciente en mi idioma de preferencia.

Quando se me ofrecen los servicios de interpretación presenciales, considero que estos no

son de buena calidad.

Quando se me ofrecen servicios de interpretación por teléfono o video, considero que estos no son de buena calidad.

22.) ¿Tiene otros comentarios sobre los servicios de interpretación que desee compartir?
Escríbalos aquí:

Appendix D: CHNA Online Community Survey (Portuguese)

Introdução: O Nantucket Cottage Hospital está realizando a Avaliação de necessidades mentais da comunidade. O objetivo desta avaliação é identificar as principais questões de saúde da ilha e identificar novas abordagens para tais questões.

1.) Esta é uma lista de questões de saúde previamente relatadas pelos residentes de Nantucket. Escolha aquelas que considera mais importantes para Nantucket na atualidade:

- Saúde mental
- Saúde da mulher
- Saúde infantil
- Índices elevados de câncer
- Saúde para os idosos
- Doenças transmitidas por carrapatos

2.) Agora selecione as três questões de saúde que considera mais importantes:

- Saúde mental
- Saúde da mulher
- Saúde infantil
- Índices elevados de câncer
- Saúde para os idosos
- Doenças transmitidas por carrapatos

3). Esquecemos de alguma coisa? Escreva aqui:

4.) Esta é uma lista dos fatores que afetam o acesso à saúde pela população. Escolha aquelas que considera mais importantes para Nantucket na atualidade:

- Falta de moradia acessível
- Acesso ao sistema de saúde
- Boas escolas
- Bons empregos
- Barreiras linguísticas

5.) Agora, selecione as três que considera mais importantes:

- Falta de moradia acessível
- Acesso ao sistema de saúde
- Boas escolas
- Bons empregos
- Barreiras linguísticas

6.) Esquecemos de alguma coisa? Escreva aqui:

7.) A saúde mental é geralmente considerada um dos principais problemas em nossa comunidade. Abaixo temos alguns exemplos de problemas de saúde mental. Quais você acha que estão presentes em nossa comunidade?

- Transtornos de dependência de álcool
- Transtornos de dependência de opioides
- Doenças mentais graves (como esquizofrenia)
- Transtornos de ansiedade
- Transtornos do humor (como depressão e bipolaridade)
- Transtornos afetivos sazonais
- Todos os anteriores
- Nenhum dos anteriores

8.) Esquecemos de alguma coisa? Escreva aqui:

9.) O que você acha que podemos fazer para melhorar a saúde mental na nossa comunidade?

- Educar as pessoas, visando acabar com o preconceito contra as pessoas com doenças mentais
- Ajudar às pessoas que têm risco de sofrer doenças mentais
- Oferecer educação nas escolas, alertando sobre os riscos do alcoolismo e do uso de drogas

Aumentar a disponibilidade de médicos
Oferecer mais serviços (como uma clínica para sobriedade, um centro de tratamento para dependentes de drogas, programa de internação curta)
Criar um “centro do bem-estar” onde seja possível ter acesso a todos esses serviços

10.) Mais alguma coisa? Escreva aqui:

11.) Estes são alguns exemplos de questões que afetam a mulheres e crianças. Quais você acha que são problemas presentes na nossa comunidade?

Não há vagas de creche suficientes para crianças menores de 5 anos
Falta de creches disponíveis
Falta de conhecimento sobre os serviços existentes para beneficiar mulheres e crianças
Falta de atendimento odontológico
Falta de vagas para o agendamento de consultas com clínico geral
Falta de informações sobre alimentação saudável
Falta de acesso a especialistas em pediatria

12.) Mais alguma coisa? Escreva aqui:

13.) Você acha que é necessário facilitar o acesso a certas especialidades médicas na ilha?
Selecione todas as opções aplicáveis

Fisioterapia
Oncologia (tratamento para o câncer)
Exames anuais para crianças
Diagnóstico por imagem (como radiografias, ultrassonografias, RM etc.)
Atenção primária (médicos, enfermeiras)
Serviços de cardiologia (coração)
Medicina alternativa (como acupuntura, ioga, meditação)
Saúde mental

14.) Mais alguma coisa? Escreva aqui:

15.) A atenção primária é a realização periódica de consultas com médicos ou enfermeiras, para baterias anuais de exames e para verificar sintomas quando você não se sente bem ou está preocupado/a com a sua saúde. Abaixo, alguns exemplos de problemas que podem acontecer na atenção primária. Algum destes problemas aconteceu com você? Marque todas as opções aplicáveis

Acho que meu médico não explicou bem o meu diagnóstico
Sinto que o meu médico leva a sério as minhas preocupações

Tenho problemas para agendar uma consulta com o meu médico
Tenho problemas para falar com meu médico pelo telefone ou pelo portal
Quando meu médico pede exames de sangue ou por imagem (como radiografias), acho que os resultados não são bem explicados

16.) Mais alguma coisa? Escreva aqui:

17.) A disponibilidade de moradia acessível é geralmente considerada um dos principais problemas da nossa comunidade. O que você acha que deveria ser feito para solucionar esta questão?

Mais casas acessíveis disponíveis para compra
Mais alojamentos fornecidos pelos empregadores aos funcionários contratados em regime anual
Mais alojamentos fornecidos pelos empregadores aos funcionários contratados em regime sazonal
Mais empregadores fornecendo subsídios para alojamento (pagamento de valores adicionais que os funcionários possam utilizar para pagar o aluguel)

18.) Mais alguma coisa? Escreva aqui:

19.) Essa é uma lista de obstáculos para as pessoas que buscam a saúde e a felicidade aqui em Nantucket. Quais você acha que são importantes? Selecione todas as opções aplicáveis:

Racismo
Discriminação contra estrangeiros
Problemas financeiros
Ausência de um plano de saúde
Discriminação contra pessoas que não falam inglês ou que têm problemas para falar o idioma
Discriminação contra pessoas que não tiveram uma educação adequada

20.) Mais alguma coisa? Escreva aqui:

21.) Pode ser difícil procurar atenção médica quando não se fala inglês. Nos conte se alguma destas situações aconteceu com você:

Não me ofereceram um intérprete quando vim ao hospital
Não recebi as informações escritas traduzidas ao meu idioma de preferência
Me ofereceram um intérprete, mas o tempo para atendimento era muito demorado

Tenho dificuldade para acessar o portal do paciente em meu idioma de preferência
Quando me oferecem interpretação em pessoa, tenho a sensação de que o intérprete
não se expressa corretamente
Quando me oferecem interpretação por telefone ou vídeo, tenho a sensação de que o
intérprete não se expressa corretamente

22.) Você tem mais comentários sobre os serviços de interpretação? Escreva aqui: