Dignity Health Dominican Hospital

Hospital HCAI ID: 106440755

Community Benefit 2025 Report and 2026 Plan

Adopted November 2025

Dignity Health
Dominican Hospital

A member of CommonSpirit

A message from

Nanette Mickiewicz, MD, President, and Carol Lezin, Chair of the Dignity Health Dominican Hospital Community Board.

Dignity Health's approach to community health improvement aims to address significant health needs identified in the Community Health Needs Assessments that we conduct with community input, including from the local public health department. Our initiatives to deliver community benefit include financial assistance for those unable to afford medically necessary care, a range of prevention and health improvement programs conducted by the hospital and with community partners, and investing in efforts that address social drivers of health.

Dominican Hospital shares a commitment with others to improve the health of our community and promote health equity, and delivers programs and services to help achieve that goal. The Community Benefit 2025 Report and 2026 Plan describes much of this work. This report meets requirements in California (Senate Bill 697) that not-for-profit hospitals produce an annual community benefit report and plan. We are proud of the outstanding programs, services and other community benefits our hospital delivers, and are pleased to report to our community.

In fiscal year 2025 (FY25), Dominican Hospital provided $53,524,989 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services and other community benefits. The hospital also incurred $60,734,087 in unreimbursed costs of caring for patients covered by Medicare fee-for-service.

The hospital's board reviewed, approved and adopted the Community Benefit 2025 Report and 2026 Plan at its November 5, 2025 meeting.

Thank you for taking the time to review this report and plan. We welcome any questions or comments, which can be submitted using the contact information in the At-a-Glance section of this report.

Nanette MIckiewicz, MD
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President

Carol Lezin
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Chairperson, Board of Directors

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At-a-Glance Summary

Hospital HCAI ID: 106440755

Report Period Start Date: July 1, 2024 **Report Period End Date**: June 30, 2025

Community Served	In 2024, an estimated 265,735 people resided in Santa Cruz County. The county occupies 445 square miles of land approximately 35 miles southwest of Silicon Valley, with the Pacific Ocean to the west. This land includes 29 miles of coastline, forming the northern coast of Monterey Bay, and more than 44,000 acres of parks. Santa Cruz County is a metropolitan area with only 13% of residents living in a rural area. Almost one in four county residents lives in the city of Santa Cruz, making it the largest local municipality by population. The other incorporated cities are Watsonville, Scotts Valley, and Capitola. Santa Cruz County also includes the following unincorporated towns and areas: Amesti, Aptos, Aptos Hills-Larkin Valley, Ben Lomond, Bonny Doon, Boulder Creek, Brookdale, Corralitos, Davenport, Day Valley, Felton, Freedom, Interlaken, La Selva Beach, Live Oak, Lompico, Mount Hermon, Pajaro Dunes, Paradise Park, Pasatiempo, Pleasure Point, Rio Del Mar, Soquel, Twin Lakes, and Zayante.
Economic Value of Community Benefit	$53,524,989 in patient financial assistance, unreimbursed costs of Medicaid, community health improvement services, community grants and other community benefits $60,734,087 in unreimbursed costs of caring for patients covered by Medicare fee-for-service. Community benefit expenses for services to vulnerable populations and to the broader community are listed by category in the Economic Value of Community Benefit section of this report.
Significant Community Health Needs Being Addressed	The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA). Needs being addressed by strategies and programs are: • Behavioral Health • Economic Security • Health Care Access & Delivery
FY25 Programs and Services	The hospital delivered several programs and services to help address identified significant community health needs. These included:

	• Dominican's PEP program is part of Dominican's Wellness Center. Wellness Center services are designed to deliver a continuum of care through a variety of hospital services, provide early interventions to high-risk patient groups, and help reduce emergency room visits and unnecessary hospital admissions. • The hospital's Mobile Wellness Clinic, which benefits from bilingual staff, provides evaluation and treatment of episodic medical conditions, identification of medical homes for those patients with chronic needs, and identification of social services and resources in the community. • An Emergency Department community health worker, who meets with Central Coast Alliance for Health (CCAH) patients in the ED to help connect or reconnect them with patient care providers post hospital discharge. Services also include provision of food, clothing, and medications for patients who are homeless. • Dominican Hospital's Katz Cancer Resource Center provides cancer care support and services, including oncology certified nurses and patient navigators. The Cancer Center provides a number of support services including support groups and classes. • The hospital's Medical Guidance Area, a specialized area for patients with substance abuse and mental health disorders. A psychiatric registered nurse is present on the unit as part of the Psychiatric Resource Team (PRT).
FY26 Planned Programs and Services	All programs listed above will continue to serve the community in FY26.

This document is publicly available online at:
https://www.dignityhealth.org/bayarea/locations/dominican/about-us/community-benefits/benefits-reports

Written comments on this report can be submitted to the Dominican Hospital Administration, 1555 Soquel Drive, Santa Cruz, CA 95065 or by e-mail to Dominique.Hollister@CommonSpirit.org.

Our Hospital and the Community Served

About Dominican Hospital

Dominican Hospital is a Dignity Health hospital. Dignity Health is a member of CommonSpirit Health.

- Dominican Hospital is located at 1555 Soquel Avenue, Santa Cruz, CA. • The hospital is licensed for 222 inpatient beds, has a staff of 1,500 employees and professional relationships with more than 470 local physicians and allied health professionals.
- Major programs and services include Cardiovascular, OB/GYN, Orthopedics, General Surgery, Pulmonary, Neurosciences, Oncology, Maternal/Child Health, Level III NICU, Cardio/Thoracic/Vascular Surgery, Intensive Care Unit, Emergency Services, and Rehabilitation.
- Established in 2022, Dominican Hospital's Family Medicine Residency is Santa Cruz County's only residency program, training full-spectrum family physicians with an emphasis on health equity and community-focused care. (https://www.dignityhealth.org/bayarea/locations/dominican/about-us/family-medicine-residency-program)

Our Mission

As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

Our Vision

A healthier future for all – inspired by faith, driven by innovation, and powered by our humanity.

Financial Assistance for Medically Necessary Care

It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay. This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.

Description of the Community Served

The hospital serves Santa Cruz County. A summary description of the community is below, and additional details can be found in the CHNA report online (https://www.dignityhealth.org/content/dam/dignity-health/pdfs/chna/2025/2025-CHNA-Dominican-Hospital-Report.pdf).

In 2024, an estimated 265,735 people resided in Santa Cruz County (a decrease of 2% since 2020). The county occupies 445 square miles of land approximately 35 miles southwest of Silicon Valley, with the Pacific Ocean to the west. This land includes 29 miles of coastline, forming the northern coast of Monterey Bay, and more than 44,000 acres of parks.

Santa Cruz County is a metropolitan area with only 13% of residents living in a rural area. Almost one in four county residents lives in the city of Santa Cruz, making it the largest local municipality by population. The other incorporated cities are Watsonville, Scotts Valley, and Capitola. Santa Cruz County has an aging population, with 18% under 18 and 20% aged 65 or older— slightly older than the state overall. The median age is 41.2 years, compared to 38.8 statewide. Among adults over 25 years old, 44% hold a bachelor's degree, higher than the state's 37%.

The majority of Santa Cruz County's population identifies as White, with smaller proportions of other racial and ethnic groups compared to the state overall. A total of 58% identify as White—much higher than California's 39%—while 36% are Latine, slightly below the state's 41%. Asian residents make up 5%, well under the state's 16%. Foreign-born residents account for 18% (compared to 27% statewide), and 13% have limited English proficiency, lower than the state's 18%. Life expectancy, mortality, hospitalization, and disability rates in the county are better than state averages, though Black residents—who represent just 1% of the population—have a notably lower life expectancy (75.4 years vs. 82.1 years).

The Real Cost Measure for a two-adult, two-child household in Santa Cruz County is $117,644 per year. While 53% of Santa Cruz County households earn $100,000 or more, 24% earn between $50,000 and $100,000, and another 24% earn below $50,000. Between 2018 and 2022, 26% of residents lived below 200% of the Federal Poverty Level ($27,750 for a family of four). Among youth, 46% of students are eligible for free lunch, and among adults under 65, 6% were uninsured.

According to the National Low Income Housing Coalition's 2024 Out of Reach report, Santa Cruz County is the most expensive metropolitan county in the United States

for renters.2 Housing costs in Santa Cruz County are extremely high with average apartment rents at $3,551 per month and median home prices at $1.2 million—both of which are increasing.

Community Assessment and Significant Needs

The hospital engages in multiple activities to conduct its community health improvement planning process. These include, but are not limited, to conducting a Community Health Needs Assessment with community input at least every three years, identifying collaborating community stakeholder organizations, describing anticipated impacts of program activities and measuring program indicators.

Community Health Needs Assessment

The health issues that form the basis of the hospital's community benefit plan and programs were identified in the most recent CHNA report, which was adopted in May 2025. The hospital makes the CHNA report widely available to the public online and a written copy is available upon request.

CHNA web address:
https://www.dignityhealth.org/bayarea/locations/dominican/about-us/community-benefits/benefits-reports

The CHNA contains several key elements, including:

- Description of the assessed community served by the hospital;
- Description of assessment processes and methods;
- Presentation of data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Discussion of impacts of actions taken by the hospital since the preceding CHNA.

This community benefit report also includes programs delivered during fiscal year 2025 that were responsive to needs prioritized in the hospital's previous CHNA report.

Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors and health care services, and also health-related social needs that have an impact on health and well-being.

Significant Health Need	Description	Intend to Address?
Housing & Homelessness	Housing and Homelessness includes the cost, availability, and stability of housing for both renters and homeowners, as well as the impact of homelessness on individuals, families, and vulnerable populations. It also encompasses overcrowded housing, economic drivers of homelessness, and barriers to health and social services for unhoused individuals.	☐
Behavioral Health	Behavioral Health includes mental health, substance use, and the effects of trauma. It refers to the connection between emotional, mental, and physical well-being, and involves addressing conditions such as depression, anxiety, substance use disorders, co-occurring conditions, and stress-related symptoms. Behavioral health care also considers social and environmental factors—such as stigma, economic hardship, and geographic or cultural barriers—that impact access to services and overall health.	☑
Health Care Access & Delivery	Health Care Access & Delivery includes the availability, affordability, and coordination of medical and dental services across all levels of care. It involves prevention, early intervention, and continuity of care—particularly for uninsured and underinsured populations—while addressing social determinants of health. It also includes timely access to a culturally and linguistically competent healthcare workforce that can meet diverse community needs.	☑
Education	Education includes the quality of schools, student academic achievement, graduation rates, early childhood development, and access to support services within schools. It also covers the impact of economic challenges on students' ability to succeed academically.	☐
Economic Security	Economic Security is defined by the ability to afford essential living expenses—such as housing, food, transportation, and childcare— through stable employment and adequate income. It also involves financial stability that enables individuals and families to meet basic needs without hardship and accessing necessary services.	☑
Community Safety	Community safety includes both intentional violence—such as crime, abuse, bullying, and systemic racism—and unintentional injuries like accidents, poisonings, and environmental hazards. It involves efforts to prevent harm, ensure timely	☐

Significant Health Need	Description	Intend to Address?
	emergency response, and create safe environments in homes, schools, and communities.	
Maternal & Infant Health	Maternal and infant health includes prenatal and postpartum care, birth outcomes, and access to culturally competent services such as midwifery and doula support.	☐
Healthy Lifestyles	Healthy lifestyles involve healthy eating, physical activity, and managing obesity and diabetes, along with equitable access to nutritious food and exercise opportunities.	☐
Cancer	Cancer includes cancer incidence and mortality by demographics, access to prevention, screening, treatment, and supportive care.	☐

Significant Needs the Hospital Does Not Intend to Address

	Reason for not Addressing Health Need			
Health Need	Beyond mission	Beyond capacity and services	Limited Resources	Addressed by Other Organizations in the Community
Housing & Homelessness		☑		☑
Education	☑	☑		☑
Community Safety	☑	☑		☑
Maternal & Infant Health			☑	☑
Healthy Lifestyles			☑	☑
Cancer			☑	☑

2025 Report and 2026 Plan

This section presents strategies and program activities the hospital is delivering, funding or on which it is collaborating with others to address significant community health needs. It summarizes actions taken in FY25 and planned activities for FY26, with statements on impacts and community collaboration. Program Highlights provide additional detail on select programs.

Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

Creating the Community Benefit Plan

The hospital is dedicated to improving community health and delivering community benefit with the engagement of its management team, board, clinicians and staff, and in collaboration with community partners.

Hospital and health system participants included the Dominican Community Advisors (DCA) group, who provided health need prioritization input. The DCA group consisted of Dominican Hospital's President and Chief Executive Officer, Chief Medical Officer, Chief Nurse Officer, Vice President of Ancillary Services, Director of Administrative Services & Community Benefit, Director of Mission Integration and Patient Experience, Director of Care Coordination, Director of Health and Rehabilitation, Physician Advisor, Social Worker, and Board Members as well as the Chief Philanthropy Officer from the Dominican Hospital Foundation.

Community input or contributions to this implementation strategy included 12 key informant interviews and 2 focus groups including 34 community members, community leaders, health experts and representatives of various organizations and sectors.

The programs and initiatives described here were selected based on input from community members during focus groups and interviews. Participants offered suggestions for addressing each health need, and strategies were chosen that aligned with Dominican Hospital's Community Benefit goals and organizational capacity. Selected strategies were informed by existing programs with evidence of success/impact, expanding or adapting a partner's program, access to appropriate skills or resources, ability to measure impact, and goal to address an urgent services need.

Community Health Core Strategies

The hospital intends that program activities to help address significant community health needs reflect a strategic use of resources. CommonSpirit Health has established three community health improvement core strategies to help ensure that program activities overall address strategic aims while meeting locally-identified needs.

- Extend the care continuum by aligning and integrating clinical and community-based interventions.
- Implement and sustain evidence-based health improvement program initiatives.
- Strengthen community capacity to achieve equitable health and well-being.

Report and Plan by Health Need

The tables below present strategies and program activities the hospital has delivered or intends to deliver to help address significant health needs identified in the community health needs assessment. They are organized by health need and include statements of goals and anticipated impact, and any collaboration with other organizations in their delivery.

Health Need: Behavioral Health

Strategy or Program	Summary Description	Active FY25	Planned FY26
Dominican Hospital Psychiatric Resource Team	Psychiatric clinical assessment, case management, and social services providing referrals to individuals with substance abuse and mental health disorders.	☑	☑
Dominican Hospital Medical Guidance Area (MGA)	The MGA is a specialized area for patients with substance abuse and mental health disorders. A psychiatric registered nurse (psych RN) is present on the unit as part of the PRT.	☑	☑

Goal and Impact: The hospital's initiative to address mental illness and substance abuse anticipates improved case management and care coordination, increased focus on prevention and early intervention, and an increase in education for professionals regarding risk assessment, intervention strategies and protocols.

Collaborators: The PRT works to decrease the suicide rate in Santa Cruz County by proving access to behavioral health services through collaboration with the county Health Services Agency. The MGA provides clinical care and support to patients with substance abuse and mental health disorders.

Health Need: Healthcare Access and Delivery

Strategy or Program	Summary Description	Active FY25	Planned FY26

Financial Assistance	The hospital provides emergency medical care and medically necessary care to all patients, without regard to a patient's financial ability to pay, and has a financial assistance policy.	☑	☑
Morehouse School of Medicine and Dominican Hospital Family Residency Program	The Family Residency Program promotes health equity for all by training family physicians to provide excellent patient-centered whole-person care for all individuals, through a biopsychosocial-spiritual model.	☑	☑
Support of Santa Cruz Community Health and Dientes Live Oak Expansion	Santa Cruz Community Health serves the primary health care needs for patients of all ages, gender identities, ethnicities, abilities and sexual orientations in English and Spanish, regardless of their immigration status, or the ability to pay. Dientes works to ensure that cost, insurance, income, race, language, and transportation do not prevent people from visiting the dentist. Dientes provides affordable, high-quality, and comprehensive dental care for patients who are on public insurance or uninsured. Dominican is providing capital funding for the Live Oak Expansion project, which serves approximately 10,000 low income and uninsured patients.	☑	☐
Dominican Hospital Wellness Center	The Wellness Center addresses the needs of chronically ill and high-risk patients throughout the continuum of care. The Wellness Center services provides ambulatory care and support to keep people out of the hospital, and offer opportunities to manage high-risk patient groups. The program offers patients the full spectrum of care, from preventive to post-acute.	☑	☑
Dominican Hospital Mobile Wellness Clinic	Provides episodic health and preventive services at locations throughout Santa Cruz County at no cost to the patient.	☑	☑
Funding for RotaCare Free Health Clinic at the Live Oak Senior Center	A walk-in clinic providing primary health care services, treatment, referral for diagnostic testing, and follow-up care. Services provided once a week by physicians, nurses, allied health professionals, and other volunteers from local Rotary clubs and the county.	☑	☑

Goal and Impact: These programs target the un-/underinsured residents of Santa Cruz County. The initiatives will improve access to primary care and provide support and recovery services to those experiencing serious illness.
Collaborators: The hospital will partner with the Morehouse School of Medicine, RotaCare, Santa Cruz Community Health, Salud, Para La Gente, local faith-based organizations, and other community partners to deliver this access-to-care strategy. In addition to funding, the hospital will provide in-kind services.

Health Need: Economic Security

Strategy or Program	Summary Description	Active FY25	Planned FY26
Second Harvest Food Bank	The Second Harvest Food Bank reaches people in need through a vast network of partner agencies and non-profits and directly through food distribution and nutrition education at dozens of program sites. The hospital provides financial support in the form of sponsorships and donations.	☑	☑
Tattoo Removal Program	The Catholic Charities' Tattoo Removal Program (TRP) helps remove tattoo barriers to viable employment and broadens economic and social opportunities for individuals committed to changing the direction of their lives. The hospital provides space free of charge to the TRP.	☑	☑
Goal and Impact: These initiatives provide adequate food and nutrition, so children can learn, adults work and contribute to a thriving community and remove barriers to employment.			
Collaborators: The hospital collaborates with Catholic Charities and Second Harvest Food Bank to support projects and programs that address food insecurity and economic insecurity.			

Community Health Improvement Grants Program

One important way the hospital helps to address community health needs is by awarding restricted financial grants to non-profit organizations working to improve health status and quality of life. Grant funds are used to deliver services and strengthen service systems, to improve the health and well-being of vulnerable and underserved populations related to CHNA priorities.

In FY25, the hospital awarded the grants below totaling $229,000. Some projects also may be described elsewhere in this report.

Grant Recipient	Project Name	Health Needs Addressed	Amount
Dientes Community Dental Care	Access to Dental Care for People who are experiencing homelessness	Healthcare Access and Delivery	$40,000
Diversity Center of Santa Cruz County	The Diversity Center's Health and Well-being Initiative	Behavioral Health, Healthcare Access and Delivery	$35,000
FoodWhat	Economic Security and Behavioral Health Supports Through Food, Farming, and Community	Behavioral Health, Economic Security	$40,000
KidPower	Kidpower Teenpower Fullpower	Behavioral Health	$30,000
Monarch Services - Servicios Monarch	Monarch Services	Healthcare Access and Delivery, Behavioral Health	$49,000
WomenCare	Cancer Support Services	Healthcare Access and Delivery, Economic Security	$35,000

Program Highlights

The following pages describe a sampling of programs and initiatives listed above in additional detail, illustrating the work undertaken to help address significant community health needs.

Morehouse School of Medicine Dominican Hospital Family Residency Program	
Significant Health Needs Addressed	• Behavioral Health • Economic Security • Healthcare Access and Delivery
Program Description	The Morehouse School of Medicine / Dominican Hospital Family Medicine Residency Program in Santa Cruz, California, is a three-year, full-spectrum training program designed to develop compassionate, skilled, and community-oriented family physicians. As the only residency program in Santa Cruz County, it offers unopposed training across a broad range of clinical settings, with strong community partnerships that reflect the region's diversity—from Dominican Hospital, a 222-bed acute care facility, to Federally Qualified Health Centers such as Salud Para La Gente and Santa Cruz Community Health, which serve largely Latinx, farmworker, and underserved populations. The program's mission is to promote health equity for all by training physicians to deliver excellent, patient-centered, whole-person care rooted in the biopsychosocial-spiritual model. In alignment with CommonSpirit Health's mission of advancing social justice and making healing presence known, the residency emphasizes service to vulnerable communities while nurturing residents' personal and professional growth. The curriculum integrates Community-Oriented Primary Care, Integrated Behavioral Health, and Functional and Integrative Medicine, reflecting a deep commitment to both evidence-based practice and holistic wellness. The program has continued Osteopathic Recognition, training in Point-of-Care Ultrasound (POCUS), and the opportunity to pursue specialized tracks such as Osteopathic Medicine for the Underserved (OM4US). Across three years, residents engage in inpatient, outpatient, obstetric, pediatric, and emergency care, as well as

	community medicine and leadership development. The program's longitudinal "Clinic First" model ensures residents build continuity with patients while developing the skills to lead effective primary care teams. With a focus on diversity, equity, inclusion, and belonging woven throughout the curriculum, the residency fosters physicians who are not only clinically competent but also socially responsive and culturally humble.
Population Served	Physicians, medical students, the patients they serve, the broader community.
Program Goal / Anticipated Impact	Train compassionate, skilled physicians who advance health equity through whole-person, community-centered care. We aim to prepare doctors who provide comprehensive, culturally responsive care to diverse and underserved populations in our community while leading with empathy, integrity, and excellence.
FY 2025 Report	
Activities Summary	The program underwent 2 ACGME site visits, achieved continued accreditation for the program with no AFIs or citations, and secured continued Osteopathic Recognition. Residents and faculty provided full-spectrum, equity-focused care across key community sites, including Dominican Hospital, Salud Para La Gente, and Santa Cruz Community Health, Watsonville Community Hospital, while engaging in a curriculum emphasizing point-of-care ultrasound, integrated behavioral health, and whole-person care. Faculty development, resident wellness initiatives, and DEIB-focused training further strengthened the program's learning environment. Overall, the residency remains mission-driven and academically robust, preparing family physicians to deliver compassionate, culturally responsive care and to lead with excellence in diverse communities.
Performance / Impact	Residents deliver high-quality care to diverse and underserved populations to bridge gaps in access to care for the underserved across hospital and community settings, while contributing to initiatives in behavioral health, preventive care, and osteopathic-integrative medicine. The program's continued accreditation and Osteopathic Recognition reflect its commitment to educational excellence, clinical competence, and community health leadership.

Hospital's Contribution / Program Expense	$3,743,569
FY 2026 Plan	
Program Goal / Anticipated Impact	Same as noted in the FY25 report section of this digest.
Planned Activities	Same as noted in the FY25 report section of this digest.

Katz Cancer Resource Center

Significant Health Needs Addressed	• Behavioral Health • Economic Security • Healthcare Access and Delivery
Program Description	The Katz Cancer Resource Center offers patients and their families the medical, physical, and emotional support they need when facing cancer. These services include nurse navigation, social work intervention, nutrition consultations, and insurance optimization. Supportive care programs include support groups, Look Good Feel Better, Creative Expression through Art, Hispanic Support Group, and referrals to community resources. The Katz Cancer Resource Center is the only accredited cancer program in the county through the American College of Surgeons and participants in yearly quality improvement projects, bi-monthly tumor boards, lung cancer screening program, prevention and screening events, and community outreach.
Population Served	Oncology patients and caregivers, community members are also served through oncology screening events and cancer prevention educational events.
Program Goal / Anticipated Impact	• Provide high quality, evidence based, multidisciplinary cancer care for oncology patients and caregivers. • To improve services, continuum of care, and outcomes for patients and their families. • To support community programs and cancer prevention and education.
FY 2025 Report	
Activities Summary	• Provided lymphedema education prior to surgery for breast cancer patients.

	• Planned and executed a mobile mammography screening event for underinsured community members who experience barriers to access to care. • Hired a bilingual nurse navigator. • Created a warm and welcoming space for wig and head covering fittings. • Continued to provide expert presentations on topics surrounding cancer and survivorship.
Performance / Impact	In FY25, the Katz Cancer Resource Center had 6,219 patient encounters. Additionally, the center supported 2,478 people through support groups and outreach events, for a total of 8,697 people served last year.
Hospital's Contribution / Program Expense	$842,036
FY 2026 Plan	
Program Goal / Anticipated Impact	• Provide high quality, evidence based, multidisciplinary cancer care for oncology patients and caregivers. • To improve services, continuum of care, and outcomes for patients and their families. • To support community programs and cancer prevention and education.
Planned Activities	• In addition to the services provided in FY25, The Katz Cancer Centers plans an increased number of mammography events, a prostate cancer symposium, and additional survivorship support classes.

Dominican Hospital Mobile Wellness Clinic	
Significant Health Needs Addressed	• Behavioral Health • Economic Security • Healthcare Access and Delivery
Program Description	Dominican Hospital's Mobile Wellness Clinic is a 38-foot mobile medical van that helps address community needs by providing patients with episodic health and preventive services at no cost. Services are provided by a multidisciplinary team of nurse practitioners, allied health professionals, and clinic coordinators. Operating Monday through Friday, the program targets the underserved and uninsured population and reaches the broader community.
Population Served	Un-/underinsured children, youth, and adults.

Program Goal / Anticipated Impact	The Mobile Wellness Clinic will reduce the barriers to healthcare that many individuals face.
FY 2025 Report	
Activities Summary	• The Mobile Wellness Clinic delivers health education, which reduces overall medical costs, addresses behavior and lifestyle choices, and helps motivate families to improve and maintain their health. • The Mobile Wellness Clinic provided services ranging from immunizations, preventive checkups, and treatment for chronic and acute illnesses to dental and mental health screenings. • The Mobile Wellness Clinic worked with families to help them access ongoing care with specialists as needed. • In FY25 the Mobile Wellness Clinic partnered with a mobile mammogram provider to provide screenings and services in south county outside of normal business hours. The pilot clinics were held on Sundays and addressed the healthcare access and delivery significant health need.
Performance / Impact	In FY25 the Mobile Wellness Clinic had 495 visits and 581 screenings.
Hospital's Contribution / Program Expense	$213, 975
FY 2026 Plan	
Program Goal / Anticipated Impact	The expansion of the Mobile Wellness Clinic will continue in FY26. The program has added additional staff, including a medical director and additional medical assistant. A new mobile wellness van will be brought into service mid FY26.
Planned Activities	In addition to its current services, the Mobile Wellness Clinic will expand its reach though additional locations, partnership, and expanded hours/days of service. The new mobile wellness van has advanced medical technology that allows the maximization of services and number of patients serviced.

Dominican Hospital Wellness Center	
Significant Health Needs Addressed	• Behavioral Health • Economic Security • Healthcare Access and Delivery
Program Description	The Wellness Center addresses the functional mobility needs of chronically ill and high-risk patients throughout the continuum of care. Wellness Center services provide health education,

	resources, and physical, cognitive and social support to keep people out of the hospital, and as independent as possible. The Wellness Center staff coordinates with primary care, rehabilitation and hospital providers to offer opportunities to manage high-risk patient groups. The Wellness Center program offers patients the full spectrum of care, from preventive to post-acute and post-rehabilitation.
Population Served	● Pre and postnatal parents ● High risk infants ● Seniors ● Community members with acquired disabilities, chronic illnesses and progressive neurological disorders. ● Community members with post-rehabilitative health and wellness needs
Program Goal / Anticipated Impact	● Support the populations served in improving or maintaining their functional independence, or early development. ● Support Dominican Hospital by reducing unnecessary emergency room visits and hospital re-admissions. ● Support Dignity Medical Foundation with at risk population surveillance and reporting, help with patient navigation to appropriate levels of care and acceptance of referrals to improve overall health. ● Partner with community not for profit organizations to ensure that at risk populations receive appropriate resources.
FY 2025 Report	
Activities Summary	● Provide health education classes that focus on physical, cognitive and social support to keep people out of the hospital and as independent as possible. ● Provide resources on health education.
Performance / Impact	Participants and Registrations: In FY 2025 we saw an 11% increase in the number of participants (from 1300 to 1441 served) and a 17% increase in the number of registrations. This shows that more individuals are using the center, and the individuals are also doing more classes. Outcomes: In the Infant development program we saw a 31% decrease in the average score of depression in parents from before to after the class series, as measured by the PHQ-9 scale. We also saw a 28% decrease in the average score of anxiety in parents from before to after the class series, as measured by the GAD-7 Scale.

	The Parkinson's patients who take classes at the wellness center show a 37% improved score over community dwelling Parkinson's patients in the Timed Up and Go (TUG) test which measures risk for falls. The seniors who take classes at the wellness center show an average of a 12% improved score over community dwelling seniors in the TUG.
Hospital's Contribution / Program Expense	$1,632,059
FY 2026 Plan	
Program Goal / Anticipated Impact	The Dominican Hospital Wellness program will continue to work to increase both participants, and the number of classes participants attend.
Planned Activities	• Continue to expand partnerships with community organizations to improve awareness and access to our services as well as ensure referrals to other community resources. • Continue to strengthen the partnership with the Medical Foundation and outpatient programs to ensure that appropriate patients are referred for wellness. • Continue to help improve independence for the most vulnerable members of our community while promoting health equity and ensuring healthcare advocacy. • Expand class offerings to facilitate human connection and boost resilience for the expanding population of seniors in our community.

Other Community Health and Community Building Programs

The hospital delivers community programs, services and non-quantifiable benefits in addition to those described elsewhere in this report. Like those programs and initiatives, the ones below are a reflection of the hospital's mission and its commitment to improving community health and well-being.

Improving Access to Health Care	
Program/Activity	***Description***
Community Service	Consultation and referrals
Human Trafficking	Education and referrals
Preventing and/or Managing Chronic Conditions	

Program/Activity	***Description***
Lifestyle Management	Physical, Neuro, Diabetes, Cardio
Well Health Checks	Health fairs
Health Screenings	Church locations and Libraries
Cardiac Stroke Program	Education
Diabetes Program	Education
Personal Enrichment Program	Education addressing health problems
Annual Crisis Intervention Symposium	Community education
Improving Physical Activity/Nutritional Health	
Program/Activity	***Description***
First Aid at Community Events	Health treatment
Improving Women's Health and Birth Outcomes	
Program/Activity	***Description***
Lactation	Consultation
Cancer Detection	Early identification and treatment
Katz Cancer Resource Center	Navigation system once identified
Early Infant Development	Collaboration with Stanford
Community Investment Program Loan/Investment Recipients	
Program/Activity	***Description***
New Way Homes	Affordable Housing
Santa Cruz Community Health Centers	Expansion of services and affordable housing
California Farm Link	Affordable Housing
Corporation for Supportive Housing (CSH)	Affordable Housing

Economic Value of Community Benefit -

The economic value of all community benefit is reported at cost. Patient financial assistance (charity care) reported here is as reported to the Department of Health Care Access and Information in Hospital Annual Financial Disclosure Reports, as required by Assembly Bill 204. The community benefit of Medicaid, other means-tested programs and Medicare is calculated using a cost-to-charge ratio to determine costs, minus revenue received for providing that care. Other net community benefit expenses are calculated using a cost accounting methodology. Restricted offsetting revenue for a given activity, where applicable, is subtracted from total expenses to determine net benefit in dollars.

Financial Assistance and Means-Tested Government Programs	Vulnerable Population	Broader Community	Total
Traditional Charity Care	$5,088,244		$5,088,244
Medi-Cal	$40,202,662		$40,202,662
Other Means-Tested Government (Indigent Care)	$0		$0
Sum Financial Assistance and Means-Tested Government Programs	**$45,290,906**		**$45,290,906**
Other Benefits			
Community Health Improvement Services	$285,075	$2,788,154	$3,073,229
Community Benefit Operations	$184,445	$50,721	$235,166
Health Professions Education	$0	$3,743,569	$3,743,569
Subsidized Health Services	$0	$0	$0
Research	$0	$0	$0
Cash and In-Kind Contributions for Community Benefit	$195,798	$986,321	$1,182,119
Other Community Benefits	$0	$0	$0
Total Other Benefits	**$665,318**	**$7,568,765**	**$8,234,083**
Community Benefits Spending			
Total Community Benefits	**$45,956,224**	**$7,568,765**	**$53,524,989**
Medicare	$60,734,087		$60,734,087
Total Community Benefits with Medicare	**$106,690,311**	**$7,568,765**	**$114,259,076**

*The hospital also invested $2,812,165 in community building activities, which are reported separately from community benefit expenses in accordance with IRS Schedule H instructions.

Hospital Board and Committee Rosters

Board Member	Affiliation
Michael Alexander, MD	Physician
Isaac Chankai, MD	Physician
Rita Eileen Dean, OP	Adrian Dominican
Dean Kashino, MD	Physician
Carol Lezin	Realtor
Marjory O'Connor, MD	Retired Nurse
Elisa Orona	Executive Director, Health Advocate Organization
Erica Padilla Chavez	Executive Director, Nonprofit
Carolyn Roeber, OP	Legacy Religious Sponsor, Attorney
Maritina Rodriguez, MD	Physician
Faris Sabbah, ED.D.	Educator
Jon Sisk	Banker
Ex Officio Board Members	Affiliation
Rodney Terra	Philanthropic Foundation President, Construction
Paul Godin, MD	Chief of Staff, Physician
Nanette Mickiewicz, MD	Hospital President and CEO, Physician