

## Sutter Health

### Sutter Coast Hospital

2019 – 2021 Community Benefit Plan

Responding to the 2019 Community Health Needs Assessment

Submitted to the Office of Statewide Health Planning and Development May 2022

**Table of Contents**

**About Sutter Health.....3**

**2019 Community Health Needs Assessment Summary .....4**

**Definition of the Community Served by the Hospital.....5**

**Significant Health Needs Identified in the 2019 CHNA .....5**

**2019 – 2021 Implementation Strategy Plan .....7**

**Prioritized Significant Health Needs the Hospital will Address: .....7**

    Access to quality primary healthcare services..... 8

    Access to mental/behavioral/substance abuse services..... 8

    Access to basic needs such as housing, jobs, and food ..... 9

    Access to meeting functional needs (transportation and physical mobility)..... 10

    Access to specialty and extended care..... 11

**Needs Sutter Coast Hospital Plans Not to Address..... 11**

**Approval by Governing Board ..... 11**

**Appendix: 2021 Community Benefit Financials ..... 12**

**Note:** This community benefit plan is based on the hospital’s implementation strategy, which is written in accordance with Internal Revenue Service regulations pursuant to the Patient Protection and Affordable Care Act of 2010. This document format has been approved by OSHPD to satisfy the community benefit plan requirements for not-for-profit hospitals under California SB 697.

## Introduction

The Implementation Strategy Plan describes how Sutter Coast Hospital, a Sutter Health affiliate, plans to address significant health needs identified in the 2019 Community Health Needs Assessment (CHNA). The document describes how the hospital plans to address identified needs in calendar (tax) years 2019 through 2021.

The 2019 CHNA and the 2019 - 2021 Implementation Strategy Plan were undertaken by the hospital to understand and address community health needs, and in accordance with state law and the Internal Revenue Service (IRS) regulations pursuant to the Patient Protection and Affordable Care Act of 2010.

The Implementation Strategy Plan addresses the significant community health needs described in the CHNA that the hospital plans to address in whole or in part. The hospital reserves the right to amend this Implementation Strategy Plan as circumstances warrant. For example, certain needs may become more pronounced and merit enhancements to the described strategic initiatives. Alternately, other organizations in the community may decide to address certain community health needs, and the hospital may amend its strategies and refocus on other identified significant health needs. Beyond the initiatives and programs described herein, the hospital is addressing some of these needs simply by providing health care to the community, regardless of ability to pay.

Sutter Coast Hospital welcomes comments from the public on the 2019 Community Health Needs Assessment and 2019 - 2021 Implementation Strategy Plan. Written comments can be submitted:

- By emailing the Sutter Health System Office Community Benefit department at [SHCB@sutterhealth.org](mailto:SHCB@sutterhealth.org);
- Through the mail using the hospital's address at 800 E Washington Blvd, Crescent City, CA 95531, ATTN: Community Benefit, and
- In-person at the hospital's Information Desk.

## About Sutter Health

Sutter Health is the not-for-profit parent of not-for-profit and for-profit companies that together form an integrated healthcare system located in Northern California. The system is committed to health equity, community partnerships and innovative, high-quality patient care. Our over 65,000 employees and associated clinicians serve more than 3 million patients through our hospitals, clinics and home health services.

Learn more about how we're transforming healthcare at [sutterhealth.org](http://sutterhealth.org) and [vitals.sutterhealth.org](http://vitals.sutterhealth.org).

Sutter Health's total investment in community benefit in 2021 was \$872 million. This amount includes traditional charity care and unreimbursed costs of providing care to Medi-Cal patients. This amount also includes investments in community health programs to address prioritized health needs as identified by regional community health needs assessments.

As part of Sutter Health's commitment to fulfill its not-for-profit mission and help serve some of the most vulnerable in its communities, the Sutter Health network has implemented charity care policies to help provide access to medically necessary care for all patients, regardless of their ability to pay. In 2021, Sutter Health invested \$91 million in charity care. Sutter's charity care policies for hospital services include, but are not limited to, the following:

1. Uninsured patients are eligible for full charity care for medically necessary hospital services if their family income is at or below 400% of the Federal Poverty Level ("FPL").
2. Insured patients are eligible for High Medical Cost Charity Care for medically necessary hospital services if their family income is at or below 400% of the FPL and they incurred or paid medical expenses amounting to more than 10% of their family income over the last 12 months. (Sutter Health's Financial Assistance Policy determines the calculation of a patient's family income.)

Overall, since the implementation of the Affordable Care Act, greater numbers of previously uninsured people now have more access to healthcare coverage through the Medi-Cal and Medicare programs. The payments for patients who are covered by Medi-Cal and Medicare do not cover the full costs of providing care. In 2021, Sutter Health invested \$557 million more than the state paid to care for Medi-Cal patients.

Through community benefit investments, Sutter helped local communities access primary, mental health and addiction care, and basic needs such as housing, jobs and food. See more about how Sutter Health reinvests into the community by visiting [sutterpartners.org](http://sutterpartners.org).

Through the 2019 Community Health Needs Assessment process the following significant community health needs were identified:

1. Access to quality primary healthcare services
2. Access to mental/behavioral/substance abuse services
3. Access to basic needs such as housing, jobs, and food
4. Access to meeting functional needs (transportation and physical mobility)
5. Injury and disease prevention and management
6. Access to specialty and extended care
7. Access to active living and healthy eating
8. Safe and violence-free environment
9. Access to dental care and preventative services
10. Pollution-free living environment

The 2019 Community Health Needs Assessment conducted by Sutter Coast Hospital is publicly available at [www.sutterhealth.org](http://www.sutterhealth.org).

### **2019 Community Health Needs Assessment Summary**

Community Health Insights ([www.communityhealthinsights.com](http://www.communityhealthinsights.com)) conducted the 2019 assessment on behalf of Sutter Coast Hospital. Community Health Insights is a Sacramento-based research-oriented consulting firm dedicated to improving the health and well-being of communities across Northern California.

The data used to conduct the CHNA were identified and organized using the widely recognized Robert Wood Johnson Foundation's County Health Rankings model. This model of population health includes many factors that impact and account for individual health and well-being. Further, to guide the overall process of conducting the assessment, a defined set of data-collection and analytic stages were developed. These included the collection and analysis of both primary (qualitative) and secondary (quantitative) data. Qualitative data included interviews with 19 community health experts, social-service providers, and medical personnel in one-on-one and group interviews, as well as four community member focus groups with 37 community residents in Del Norte and Curry Counties.

Using a social determinants focus to identify and organize secondary data, datasets included measures to describe mortality and morbidity and social and economic factors such as income, educational attainment, and employment. Further, measures also included indicators to describe health behaviors, clinical care (both quality and access), and data to describe the physical environment. Primary and secondary data were analyzed to identify and prioritize significant health needs. This began by identifying 10 potential health needs (PHNs). These PHNs were those identified in previously conducted CHNAs. Data were analyzed to discover which, if any, of the PHNs were present in the area. After these were identified, PHNs were prioritized based on an analysis of primary data sources that described the PHN as a significant health need. Data were also analyzed to detect emerging health needs beyond

those 10 PHNs identified in previous CHNAs.

The full 2019 Community Health Needs Assessment conducted by Sutter Coast Hospital is available at [www.sutterhealth.org](http://www.sutterhealth.org).

**Definition of the Community Served by the Hospital**

Sutter Coast Hospital’s hospital service area (HSA) includes Del Norte County, California, and the Brookings Harbor area of Curry County, Oregon, which are both coastal communities. The HSA was defined by five ZIP Codes, noted below:

ZIP Code	Total Population	% Minority	Median Age	Median Income	% Poverty	% Unemployed	% Uninsured	% No HS Graduation	% Living in High Housing Costs	% with Disability
95531	23,500	36.5	37.5	\$43,841	20.7	10.2	11.1	18.4	37.4	22.0
95543	792	23.0	50.7	\$32,500	24.6	0.0	1.4	8.3	39.6	25.0
95548	1,288	39.0	44.4	\$31,848	34.5	20.9	14.3	21.9	31.9	33.3
95567	2,048	45.6	38.7	\$44,572	23.7	10.3	9.5	12.0	24.9	20.1
<i>Del Norte County</i>	27,628	36.9	38.1	\$42,363	21.7	10.4	10.8	17.8	36.3	22.5
<i>California</i>	38,654,206	61.6	36.0	\$63,783	15.8	8.7	12.6	17.9	42.9	10.6
97415	13,816	15.1	55.1	\$37,672	14.1	11.1	9.8	10.6	41.1	25.3
<i>Curry County</i>	22,364	12.7	55.1	\$38,661	15.2	11.0	10.0	10.3	38.2	25.5
<i>Oregon</i>	3,982,267	23.0	39.1	\$53,270	15.7	8.1	10.4	10.0	36.1	14.7

**Significant Health Needs Identified in the 2019 CHNA**

The following significant health needs were identified in the 2019 CHNA:

- 1. Access to Quality Primary Care Health Services** – Two health needs tied as the highest-priority significant health needs for the SCH service area. The first was access to quality primary care health services. Primary care resources include community clinics, pediatricians, family-practice physicians, internists, nurse practitioners, pharmacists, telephone advice nurses, and similar. Primary care services are typically the first point of contact when an individual seeks healthcare. These services are the front line in the prevention and treatment of common diseases and injuries in a community.
- 2. Access to Mental/Behavioral/Substance Abuse Services** – Access to mental, behavioral, and substance abuse services was tied as the highest-priority significant health need for the SCH service area. Individual health and well-being are inseparable from individual mental and emotional outlook. Coping with daily life stressors is challenging for many people, especially when other social, familial, and economic challenges also occur. Adequate access to mental, behavioral, and substance abuse services helps community members obtain additional support when needed.
- 3. Access to Basic Needs, Such as Housing, Jobs, and Food** – Access to affordable and clean housing, stable employment, quality education, and adequate food for health maintenance are vital for survival. Maslow’s Hierarchy of Needs says that only when members of a society have their basic physiological and safety needs met can they then become engaged members of

society and self-actualize or live to their fullest potential, including enjoying good health.

4. **Access and Functional Needs – Transportation and Disability That Prevents Access through Movement** – Having access to transportation services to support individual mobility is a necessity of daily life. Without transportation, individuals struggle to attain their basic needs, including those that promote and support a healthy life. Examining the number of people that have a disability is also an important indicator for community health in an effort to assure that all community members have access to necessities for a high quality of life.
5. **Injury and Disease Prevention and Management** – Knowledge is important for individual health and well-being, and efforts aimed at prevention are powerful vehicles to improve community health. When community residents lack adequate information on how to prevent, manage, and control their health conditions, those conditions tend to worsen. Prevention efforts focused on reducing cases of injury, infectious disease control (e.g., STI prevention, influenza shots), and intensive strategies around the management of chronic diseases (e.g., diabetes, hypertension, obesity, and heart disease). These are important for community health improvement.
6. **Access to Specialty and Extended Care** – Specialty care services are those devoted to a particular branch of medicine and focusing on the treatment of a particular disease. Primary and specialty care go hand-in-hand, and without access to specialists such as endocrinologists, cardiologists, and gastroenterologists, community residents are often left to manage chronic diseases such as diabetes and high blood pressure on their own. In addition to specialty care, extended care refers to care needed in the community that supports overall physical health and wellness and that extends beyond primary care services such as skilled nursing facilities and hospice and in-home care.
7. **Active Living and Healthy Eating** – Physical activity and eating a healthy diet are extremely important for one’s overall health and well-being. Frequent physical activity is vital for prevention of disease and maintenance of a strong and healthy heart and mind. When access to healthy foods is challenging for community residents, many turn to unhealthy foods that are convenient, affordable, and readily available. Communities experiencing social vulnerability and poor health outcomes often are overloaded with fast food and other establishments where unhealthy food is sold.
8. **Active Living and Healthy Eating** – Physical activity and eating a healthy diet are extremely important for one’s overall health and well-being. Frequent physical activity is vital for prevention of disease and maintenance of a strong and healthy heart and mind. When access to healthy foods is challenging for community residents, many turn to unhealthy foods that are convenient, affordable, and readily available. Communities experiencing social vulnerability and poor health outcomes often are overloaded with fast food and other establishments where unhealthy food is sold.
9. **Access to Dental Care and Prevention** – Oral health is important for overall quality of life. When individuals have dental pain, it is difficult to eat, concentrate, and fully engage in life. Poor oral health impacts the health of the entire body, especially the heart, digestive, and endocrine systems.
10. **Pollution-Free Living Environment** – Living in a pollution-free environment is essential for health. Individual health is determined by a number of factors, and some models show that one’s living environment, including the physical (natural and manmade) and sociocultural environment, has more impact on individual health than one’s lifestyle, heredity, or access to medical services.

The data used to conduct the CHNA were identified and organized using the widely recognized Robert Wood Johnson Foundation’s County Health Rankings model. This model of population health includes the many factors that impact and account for individual health and well-being. Further, to guide the overall process of conducting the assessment, a defined set of data collection and analytic stages were developed.

Data collected and analyzed included both primary or qualitative data and secondary or quantitative data.

Primary data included 11 interviews with 19 community health experts as well as 4 focus groups conducted with a total of 37 community residents.

Secondary data included four datasets selected for use in the various stages of the analysis. In all, 64 different health outcome and factor indicators were collected for the CHNA.

Primary and secondary data were analyzed to identify and prioritize the significant health needs within the SCH service area. This included identifying 10 potential health needs (PHN) in these communities. These potential health needs were those identified in previously conducted CHNAs. Data were analyzed to discover which if any of the PHNs were present in the hospital's service area. After these were identified, health needs were prioritized based on an analysis of primary data sources that described the PHN as a significant health need.

Once identified for the area, the final set of SHNs was prioritized. To reflect the voice of the community, significant health need prioritization was based solely on primary data. Key informants and focus-group participants were asked to identify the three most significant health needs in their communities. These responses were associated with one or more of the potential health needs. This, along with the responses across the rest of the interviews and focus groups, was used to derive two measures for each significant health need.

### **2019 – 2021 Implementation Strategy Plan**

The implementation strategy plan describes how Sutter Coast Hospital plans to address significant health needs identified in the 2019 Community Health Needs Assessment and is aligned with the hospital's charitable mission. The strategy describes:

- Actions the hospital intends to take, including programs and resources it plans to commit;
- Anticipated impacts of these actions and a plan to evaluate impact; and
- Any planned collaboration between the hospital and other organizations in the community to address the significant health needs identified in the 2019 CHNA.

**Prioritized Significant Health Needs the Hospital will Address:** The Implementation Strategy Plan serves as a foundation for further alignment and connection of other Sutter Coast Hospital initiatives that may not be described herein, but which together advance the hospital's commitment to improving the health of the communities it serves. Each year, programs are evaluated for effectiveness, the need for continuation, discontinuation, or the need for enhancement. Depending on these variables, programs may change to continue focus on the health needs listed below.

1. Access to quality primary healthcare services
2. Access to mental/behavioral/substance abuse services
3. Access to basic needs such as housing, jobs, and food
4. Access to meeting functional needs (transportation and physical mobility)
5. Access to specialty and extended care

**Access to quality primary healthcare services**

<b>Name of program/activity/initiative</b>	Recruitment and Retention of Primary Care Providers
<b>Description</b>	Access to primary care services is directly tied to retention and recruitment. Frequently, the importance of retention is overlooked. Will utilize various data sources to discern and identify tactics which increase the likelihood of retaining primary care providers; e.g., increasing connection of the school district for providers with children; connecting new providers (and current) with the Chamber/Visitors Bureau to get more ingrained into the community; looking at social capital and the opportunities for spouses of providers to have enhanced opportunities in the local job market. Plan to review exit surveys of providers leaving the community to develop an appropriate retention plan.
<b>Goals</b>	For 2021, the ratio of total population to primary care provider will be equal to the baseline.
<b>Anticipated Outcomes</b>	Retaining community providers will improve access to Primary Care Services. When a provider departs, there is a gap in coverage until the person is replaced. If turnover can be avoided, then the gap in coverage will be avoided and thereby, there will be greater access to primary care services.
<b>2021 Impact</b>	Sutter Coast Hospital recruited 1 Primary Care Physician (Family Medicine) who began practicing in 2021.
<b>Metrics Used to Evaluate the program/activity/initiative</b>	The Hospital will evaluate success by tracking the ratio of Total Population to 1 Primary Care Provider.

**Access to mental/behavioral/substance abuse services**

<b>Name of program/activity/initiative</b>	Suicide Risk Assessment
<b>Description</b>	Assessing patients that come to SCH to identify if they are actively at risk for suicide and connecting them to mental and behavioral health services.
<b>Goals</b>	To identify and connect those individuals experiencing suicidal ideations with services to assist them in staying safe.
<b>Anticipated Outcomes</b>	Early and ongoing assessments to identify if a patient is at high risk for suicide will help prevent suicide as well as identify patients who are in need of additional services that can then be provided.
<b>2021 Impact</b>	Suicide risk assessments are in place for patients coming into the ED and In-Patient units. These assessments allow for early and ongoing assessment of patients who are at high risk for suicide. Sutter Coast is partnering with Del Norte County Mental and Behavioral Health to help in identifying additional services for the patients.
<b>Metrics Used to Evaluate the program/activity/initiative</b>	The Hospital will evaluate success with A) the implementation of a Suicide Risk Assessment policy and B) # of patients identified as high risk.

<b>Name of program/activity/initiative</b>	Psychiatric Services
<b>Description</b>	In collaboration with other community agencies, revitalize the effort to recruit a psychiatrist to the SCH Service Area.



<b>Goals</b>	Improve access to psychiatric services locally by adding a full time equivalent psychiatric provider to the community.
<b>Anticipated Outcomes</b>	A collaborative effort among community leaders to successfully recruit a full-time psychiatrist to the SCH Service area. With success, some patients will experience local access to psychiatric services resulting in improved mental health outcomes. For physicians and mid-level providers to have a local resource to refer patients to and to have local access to physician colleague to coordinate patient mental health needs. For the community, to have an additional mental health professional to collaborate with relative to the local mental health delivery system (operations & design).
<b>2021 Impact</b>	SCH engages tele-psychiatry services routinely for patients experiencing mental/behavioral health ailments. Additionally, SCH and Del Norte County Mental Health Services work collaboratively to care for those patients who come into the emergency department. SCH engaged Stallant Health in discussions and recruitment efforts to bring a 1 FTE psychiatric provider to serve Del Norte County. While the provider has not yet been hired, recruitment efforts are underway.
<b>Metrics Used to Evaluate the program/activity/initiative</b>	Increase access to psychiatric providers by 1 FTE to serve Del Norte County residents.

<b>Name of program/activity/initiative</b>	Safe Patient Discharge Planning
<b>Description</b>	Improving discharge planning to ensure individuals experiencing homelessness connect with necessary resources and shelter post discharge.
<b>Goals</b>	To connect individuals experiencing homelessness with the continuum of care to improve health outcomes.
<b>Anticipated Outcomes</b>	Decreased utilization of emergency services by the homeless population; increased utilization of wraparound support services.
<b>2021 Impact</b>	Sutter Coast Hospital continued to commit funds to help connect individuals experiencing homelessness to wraparound support services throughout 2019-2021.
<b>Metrics Used to Evaluate the program/activity/initiative</b>	# of referrals to community resources; readmission rates for individuals experiencing homelessness.

#### Access to basic needs such as housing, jobs, and food

<b>Name of program/activity/initiative</b>	Humboldt State
<b>Description</b>	RN to BSN bridge program in partnership with Humboldt State and University of the Redwoods.
<b>Goals</b>	Create greater opportunities for nurses to advance in their field and provide higher quality care.
<b>Anticipated Outcomes</b>	Increase the number of BSN nurses in the hospital service area.
<b>2021 Impact</b>	The RN to BSN program at Cal Poly Humboldt is in place.
<b>Metrics Used to Evaluate the program/activity/initiative</b>	# of participants in the program who obtain BSN.

<b>Name of program/activity/initiative</b>	Food Banks
<b>Description</b>	Partner with local food banks to distribute healthy food options to low-income and underserved residents.
<b>Goals</b>	Our goal is to assist in providing food/meals to individuals in our community who do not have access to food.
<b>Anticipated Outcomes</b>	Provide access to basic needs such as food to underserved residents.
<b>2021 Impact</b>	Sutter Coast Hospital provided financial support to Rural Human Services and Brookings Harbor Community Helpers, Inc. in the Fall of 2021.
<b>Metrics Used to Evaluate the program/activity/initiative</b>	# of pounds of food donated as well as dollars contributed.

#### Access to meeting functional needs (transportation and physical mobility)

<b>Name of program/activity/initiative</b>	Taxi Vouchers for Low-Income Patients
<b>Description</b>	Provide taxi vouchers for low-income, often Medi-Cal patients who are discharged from the hospital and do not have means to obtain transportation home or to a shelter.
<b>Goals</b>	Our goal is to provide individuals with access to safe and reliable transportation from the hospital.
<b>Anticipated Outcomes</b>	We anticipate there will be a decrease in emergency department readmissions for individuals who are able to be transported to a safe location after their hospital stay.
<b>2021 Impact</b>	In 2021, SCH purchased 188 taxi vouchers to assist patients in need.
<b>Metrics Used to Evaluate the program/activity/initiative</b>	Number of taxi vouchers provided.

<b>Name of program/activity/initiative</b>	Recruitment for Specialty Providers
<b>Description</b>	While retaining current physicians, continue to recruit into the following specialty disciplines: Ear, Nose and Throat; Orthopedics; and Urology.
<b>Goals</b>	Improve access to specialty services locally and reduce the number of patients having to obtain services outside of the community by adding a full-time equivalent specialty provider to the community.
<b>Anticipated Outcomes</b>	With increased access to Specialty Care, the number of preventable hospital stays should decline – with the assistance of specialist, patients are avoiding medical crisis which result in hospitalizations.
<b>2021 Impact</b>	Sutter Coast Hospital recruited one additional orthopedic specialist and a neurologist in 2021.
<b>Metrics Used to Evaluate the program/activity/initiative</b>	Increase local specialty provider FTE by 1 FTE.

**Access to specialty and extended care**

<b>Name of program/activity/initiative</b>	Oncology Patient Navigation Program
<b>Description</b>	Implement an oncology patient navigation program to help navigate individuals in our community who suffer from cancer through the various components of care needed.
<b>Goals</b>	Offer a nurse navigation program to our oncology patients.
<b>Anticipated Outcomes</b>	Improved outcomes and expedited care for individuals in our community suffering from cancer diagnosis.
<b>2021 Impact</b>	SCH continued to recruit for an oncology nurse navigator in 2021, the program is planned to begin in 2022.
<b>Metrics Used to Evaluate the program/activity/initiative</b>	Higher and implement a nurse navigator.

**Needs Sutter Coast Hospital Plans Not to Address**

No hospital can address all of the health needs present in its community. Sutter Coast Hospital is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a wide range of community benefits. The implementation strategy plan does not include specific plans to address the following significant health needs that were identified in the 2019 Community Health Needs Assessment for the following reasons:

1. Injury and disease prevention and management – While SCH will not specifically address this area, we will improve access to primary and specialty care. This in turn will allow more patients to better prevent and manage their chronic conditions.
2. Access to active living and healthy eating – Due to limited capacity and resources we will not be focused on this area.
3. Safe and violence-free environment – Due to limited capacity and resources we will not be focused on this area.
4. Access to dental care and preventative services – Due to limited capacity and resources we will not be focused on this area.
5. Pollution-free living environment – Due to limited resources and ability to impact environmental policies, the hospital does not intend to directly address this health issue at this time.

**Approval by Governing Board**

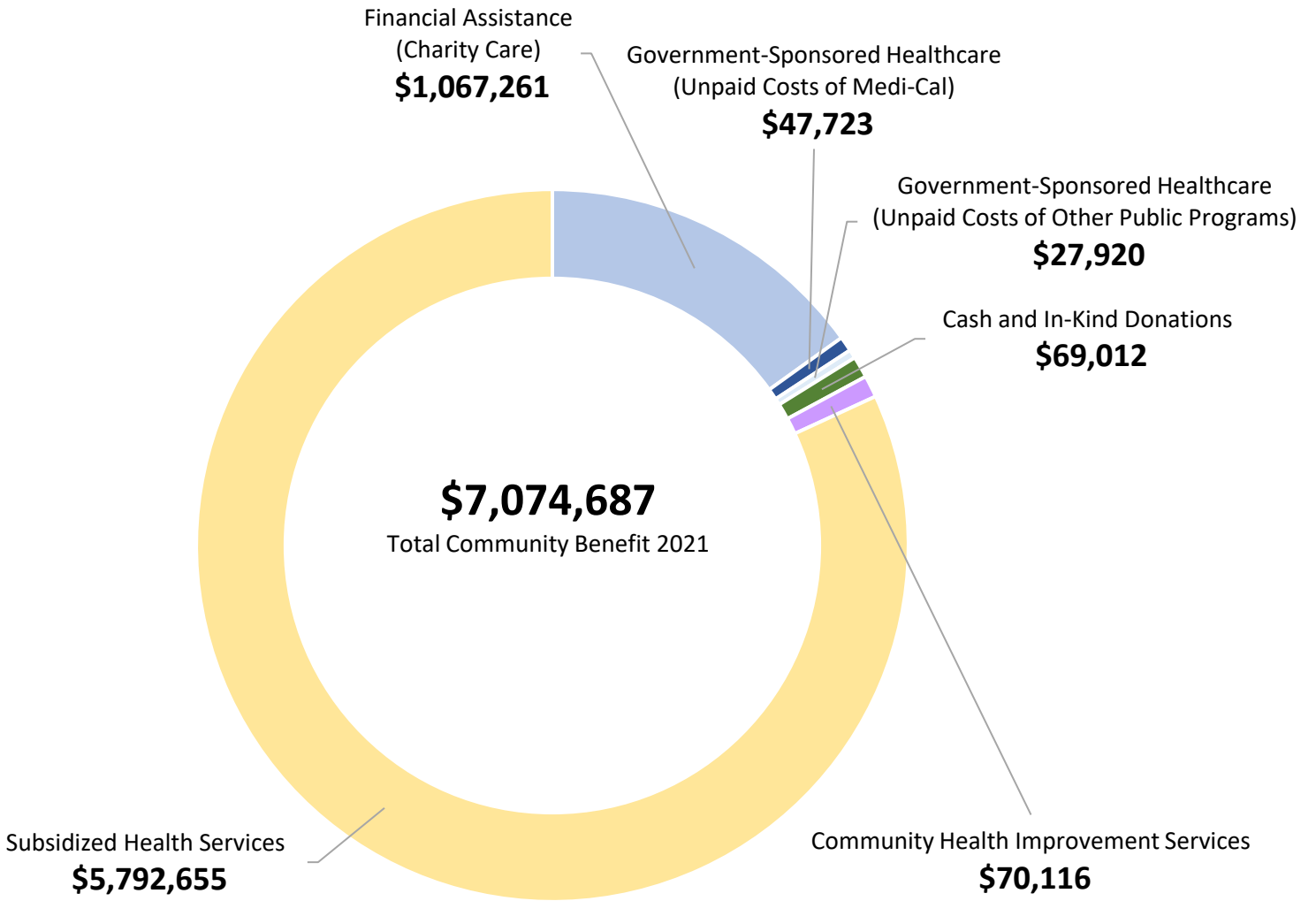
The Community Health Needs Assessment and Implementation Strategy Plan was approved by the Sutter Health Coast Hospital Board on November 21, 2019.

## Appendix: 2021 Community Benefit Financials

Sutter Health hospitals and many other healthcare systems around the country voluntarily subscribe to a common definition of community benefit developed by the Catholic Health Association. Community benefits are programs or activities that provide treatment and/or promote health and healing as a response to community needs.

Community benefit programs include traditional charity care which covers healthcare services provided to persons who meet certain criteria and cannot afford to pay, as well as the unpaid costs of public programs treating Medi-Cal and indigent beneficiaries. Costs are computed based on a relationship of costs to charges. Additional community benefit programs include the cost of other services provided to persons who cannot afford healthcare because of inadequate resources and are uninsured or underinsured, cash donations on behalf of the poor and needy as well as contributions made to community agencies to fund charitable activities, training health professionals, the cost of performing medical research, and other services including health screenings and educating the community with various seminars and classes, and the costs associated with providing free clinics and community services. Sutter Health affiliates provide some or all of these community benefit activities.

# Sutter Coast Hospital 2021 Total Community Benefit & Unpaid Costs of Medicare



2021 unpaid costs of Medicare were \$2,268,806