Geneva General Hospital Community Service Plan 2013-2015

I. Mission Statement:

Geneva General Hospital, founded in 1898, is a 132-bed general acute care hospital providing both primary care and secondary level services. A full range of diagnostic modalities is available at GGH including 64-slice CT scanner, nuclear medicine, magnetic resonance imaging (MRI), cardiovascular diagnostics and complete gastroenterology service. The hospital's 13-station outpatient renal dialysis center and inpatient acute treatment service serves residents from a four-county area in the Finger Lakes. The hospital also operates a regional 15-bed acute physical rehabilitation program specializing on improving independence for persons following a life-changing event such as a stroke or significant orthopedic fracture. This is a unique service in the Central Finger Lakes region. GGH is staffed by a Hospitalist service comprised of 8 physicians who provide 24/7/365 medical supervision for inpatients.

Mission:

Finger Lakes Health is a community owned, not-for-profit organization dedicated to maintaining and improving the health of all people in the central Finger Lakes region.

We are committed to **safe, high quality, compassionate services** that are convenient, accessible and at reasonable cost, through the efforts of our employees, medical staff and volunteers.

We are a **center of health education** that lives its leadership and commitments through participation in and sponsorship of professional, allied health and community health education programs.

Vision:

Finger Lakes Health will deliver uncompromising quality, exceptional safety, and the best patient/resident experience in a culture of caring that is defined by:

- Our team of highly skilled people,
- Our rewarding work environment,
- Our innovation and advanced technologies,
- Our commitment to education,
- Our fiscal responsibility, and
- Our contribution to our communities.

Values:

To achieve our mission, we are guided by a common set of values that direct us in everything we do:

- **Service** To deliver the best patient/resident experience that exemplifies a system-wide philosophy of continuous quality improvement.
- **Teamwork** To blend our skills in unity of purpose.
- **Dignity** To act with compassion, sensitivity and courtesy.
- **Respect -** To treat each other with fairness, honesty and trust.
- **Responsibility** To use our financial and human resources in a way that will ensure the continuation of our mission.
- **Vision -** To build on the past and anticipate the future to realize our mission.

II. Service Area and Populations:

A. Hospital Service Area

Geneva General Hospital (GGH) is part of a multi-institutional health system, Finger Lakes Health, located in Ontario County, New York. This health care system provides a full range of acute and long term health services to residents of the Finger Lakes region in Upstate New York. Finger Lakes Health, and GGH as the largest hospital in the health system, serves a primary service area that includes Ontario, Seneca, and Yates counties.

B. Population Description

1. Overall Size

Ontario County is located 8 miles from Rochester in the heart of upstate New York. The County includes 2 cities, 16 towns, 9 villages, 2 colleges, and 17 school districts. The two major cities, Canandaigua (the County seat) and Geneva, are located at the northern ends of Canandaigua and Seneca Lakes respectively, and contain approximately 25% of the County's population. Honeoye and Canadice Lakes are also located in Ontario County, while Hemlock Lake forms a part of the County's western border. Ontario is also bordered in the north by Wayne and Monroe Counties, in the west by Monroe and Livingston Counties, in the south by Steuben and Yates Counties and in the east by Seneca County. Ontario is the most urbanized of the counties in the S2AY Rural Health Network due to its proximity to Rochester, but is still predominantly rural with a land mass of 644 square miles and a population of just over 100,000, resulting in a population density of approximately 167 persons per square mile. The New York State Thruway travels through the northern part of the County east to west, with routes 5 and 20 roughly paralleling the Thruway a few miles south. The major highways shape the population considerably by providing relatively quick access to jobs in neighboring labor market areas.

Census Data - People QuickFacts	Ontario County	New York
Population, 2012 estimate	108,519	19,570,261
Population, percent change, 4-1-2010 to 7-1-2012	0.5%	1.0%
Population, 2010	107,931	19,378,102

Overall as seen above, the total population of Ontario County has increased slightly from 2010 with a percent change of 0.5%. This follows a similar trend to New York State as a whole with a 1.0% change from 2010 to 2012.

Population Growth/Decline Since 2010 (%) - Ontario County U.S. Census Bureau (2012) - Cornell PAD

GENDER				
Male	9,341,547	48.4%	52,348	48.9%

Population growth /decline since 4/1/2010 (in %)

0.13%

0.56%

2010

2011

As seen in the graph above, population growth in Ontario County increased from 0.13% to 0.56% from 2010 to 2011. Population growth has stayed relatively the same in 2011 and 2012 with a growth of 0.56% and 0.54% respectively.

2. Gender

For the most part, Ontario County has an even population of males to females. As seen below, census data shows 2007-2011 estimates of the male to female population. This is almost identical to New York State rates as a whole.

GENDER			

ACS Demographic and Housing	New You	rk State	Ontario County, New York		
Estimates 2007-2011	Estimate	Percent	Estimate	Percent	
tal Pop.	19,302,448	19,30 2,448	107,070	107,070	
Male	9,341,547	48.4%	52,348	48.9%	
Female	9,960,901	51.6%	54,722	51.1%	

3. Age

In 2007-2011 census estimates, the largest age population was the 45-54 year old group, making up 16.4% of the total population. The 65+ population at 15.1% is slightly above the state average. The percentage of those under age 5, at 5.4% of the population, is slightly below the State and Federal rate and about average for the region. The 25 to 34 and 35 to 44 age bracket also surfaced as one of the larger age ranges represented in the county, both brackets compromising 22.8% of the county population

ACS Demographic and Housing Estimates	New Yo	rk State	Ontario County, New York	
2007-2011	Estimate	Percent	Estimate	Percent
AGE				
Under 5 years	1,158,007	6.0%	5,731	5.4%
5 to 9 years	1,159,958	6.0%	6,404	6.0%
10 to 14 years	1,226,675	6.4%	7,480	7.0%
15 to 19 years	1,371,903	7.1%	7,875	7.4%
20 to 24 years	1,386,432	7.2%	6,576	6.1%
25 to 34 years	2,634,078	13.6%	10,270	9.6%
35 to 44 years	2,669,148	13.8%	14,174	13.2%
45 to 54 years	2,852,308	14.8%	17,565	16.4%
55 to 59 years	1,221,127	6.3%	7,756	7.2%
60 to 64 years	1,031,913	5.3%	7,119	6.6%
65 to 74 years	1,335,166	6.9%	8,506	7.9%
75 to 84 years	877,643	4.5%	5,436	5.1%
85 years and over	378,090	2.0%	2,178	2.0%

Median age (years)	37.8	(X)	42.1	(X)
18 years and over	14,954,839	77.5%	82,710	77.2%
21 years and over	14,082,112	73.0%	77,949	72.8%
62 years and over	3,171,366	16.4%	19,964	18.6%
65 years and over	2,590,899	13.4%	16,120	15.1%

As seen in the table above, census data shows that Ontario County has a higher percentage of adults age 65 or older as compared to New York State as a whole and the country as a whole. Ontario County being significantly higher than the percentage of adults age 65 or older throughout the country.

Median Age Trend - Ontario County U.S. Census Bureau (2012) - Cornell PAD Overall, the median age in Ontario County has steadily grown over the last 12 years with a median age of 38.0 in 2000 to 42.8 in 2012. It seems that Ontario County has experienced an increase in median age, possibly due to the baby boomer generation. With an increasing older adult population, a focus on chronic disease, maintaining health and preventative health strategies are needed now more than ever.

ACS Demographic and Housing Estimates 2007-2011	New York		Ontario County, New York	
AGE AND SEX	Estimate	Percent	Estimate	Percent
18 years and over	14,954,839	14,954,839	82,710	82,710
Male	7,117,756	47.6%	39,857	48.2%
Female	7,837,083	52.4%	42,853	51.8%
65 years and over	2,590,899	2,590,899	16,120	16,120
Male	1,069,715	41.3%	7,047	43.7%
Female	1,521,184	58.7%	9,073	56.3%

Date	
2000	38.0
2001	38.4
2002	38.8
2003	39.3
2004	39.7
2005	40.1
2006	40.6
2007	41.0
2008	41.4
2009	41.8
2010	42.2
2011	42.5

2012 42.8

Distribution of the male to female population in those over 18 and those over 65 are similar within Ontario County and mimic that of New York State as a whole. In those over 18, male to female distribution is relatively even. In those over 65, there is a higher population for females than males with 56.3% as compared to 43.7% respectively.

4. Race

People QuickFacts (2012)	Ontario County	New York
White alone, percent, 2012 (a)	94.4%	71.2%
Black or African American alone, percent, 2012 (a)	2.5%	17.5%
American Indian and Alaska Native alone, percent, 2012 (a)	0.3%	1.0%
Asian alone, percent, 2012 (a)	1.1%	8.0%
Native Hawaiian and Other Pacific Islander alone, percent, 2012 (a)	Z	0.1%
Two or More Races, percent, 2012	1.6%	2.2%

Hispanic or Latino, percent, 2012 (b)	3.8%	18.2%
Foreign born persons, percent, 2007-2011	3.3%	21.8%

According to 2007-2011 census data, the percentage of racial minorities in Ontario County remains low at 6.2%; the percentage of blacks/African Americans is only 2.3% well below the state and national average. Native Americans and Asians together make up 1.3% of the population.

RACE				
One race	18,860,781	97.7%	105,109	98.2%
One race	18,860,781	97.7%	105,109	98.2%
White	12,768,805	66.2%	100,407	93.8%
Black or African American	3,013,740	15.6%	2,502	2.3%
American Indian and Alaska Native	67,766	0.4%	166	0.2%
Cherokee tribal grouping	3,469	0.0%	2	0.0%
Chippewa tribal grouping	436	0.0%	0	0.0%
Navajo tribal grouping	341	0.0%	0	0.0%
Sioux tribal grouping	566	0.0%	0	0.0%
Asian	1,415,147	7.3%	1,134	1.1%
Asian Indian	335,466	1.7%	118	0.1%
Chinese	574,870	3.0%	154	0.1%

RACE				
One race	18,860,781	97.7%	105,109	98.2%
Filipino	110,893	0.6%	119	0.1%
Japanese	40,339	0.2%	78	0.1%
Korean	137,503	0.7%	160	0.1%
Vietnamese	32,563	0.2%	225	0.2%
Other Asian	183,513	1.0%	280	0.3%
Native Hawaiian and Other Pacific Islander	6,706	0.0%	0	0.0%
Native Hawaiian	2,226	0.0%	0	0.0%
Guamanian or Chamorro	1,660	0.0%	0	0.0%
Samoan	817	0.0%	0	0.0%
Other Pacific Islander	2,003	0.0%	0	0.0%
Some other race	1,588,617	8.2%	900	0.8%
Two or more races	441,667	2.3%	1,961	1.8%
White and Black or African American	123,173	0.6%	818	0.8%
White and American Indian and Alaska Native	47,205	0.2%	460	0.4%
White and Asian	69,231	0.4%	229	0.2%
Black or African American and American Indian and Alaska Native	19,801	0.1%	33	0.0%

5. Education

Census Data - People QuickFacts	Ontario County	New York
High school graduate or higher, percent of persons age 25+, 2007-2011	91.6%	84.6%
Bachelor's degree or higher, percent of persons age 25+, 2007-2011	30.5%	32.5%

Overall, the number of those graduating from high school in Ontario County is very high as compared to the number of high school graduates in New York State as a whole, 7.6% higher than the state rate. Those earning a Bachelor's degree of higher in Ontario County is slightly less than the New York State rate with 30.5% as compared to 32.5% (or New York state being 6.2% higher).

Education Attainment (census data, 2010)	Population/Percent	Margin of Error
Population 25 years and over	73,004	+/-478
Less than high school diploma	8.5%	+/-0.5
High school graduate (includes equivalency)	28.5%	+/-1.1
Some college or associate's degree	32.6%	+/-0.9
Bachelor's degree	17.8%	+/-1.0
Graduate or professional degree	12.7%	+/-0.6
High school graduate or higher	91.6%	+/-0.6
Bachelor's degree or higher	30.5%	+/-1.1

Lack of education is often associated with a lower health status and a greater likelihood of not seeking health care, especially preventive services. According to the 2010 Census, 8.5% were not high school graduates. This rate is better than both the NY State and National average. While the proportion not completing high school is similar to the State and National rates, the percent completing four years of college is only 30.5%. Statewide approximately 32.5% of the population have a Bachelor's degree or higher and nationwide it is about 40%. In New York State 24.6% of the population aged 25 and older have some college or an Associate's degree compared to 13.8% with an Associate's degree and 18.8% with some college but no degree making a total of 32.6% in Ontario County. Nationwide since 2002 between 62% and 69% percent of high school graduates attend college with approximately 6 out of 10 completing at least a Bachelor's degree. According to the NYS-OASAS 2003 Prisms data, the percent of high school graduates not attending college is 21.8% for the state. Compared to New York State, Ontario County's adults have a much lower educational attainment overall with a much lower proportion completing four years of college. This lower level of educational attainment contributes to lower earning ability, which adversely affects health, but probably also to a lower level of knowledge regarding how to practice healthy behaviors, how to access appropriate preventive health care services and having a basic level of health literacy.

	SELECTED 2007-				THE UNITED 5-Year Estim			
		New	York			Ontario	County	
EDUCATIONAL ATTAINMENT	Estimate	Margin of Error	Percent	Percent Margin of Error	Estimate	Margin of Error	Percent	Percent Margin of Error
Population 25 years and over	12,999,473	+/- 9,1 56	12,999,47 3	(X)	73,004	+/-190	73,004	(X)
Less than 9th grade	904,283	+/- 6,213	7.0%	+/-0.1	1,942	+/-278	2.7%	+/-0.4
9th to 12th grade, no diploma	1,091,242	+/- 7,576	8.4%	+/-0.1	4,209	+/-443	5.8%	+/-0.6
High school graduate i ncludes euivalency)	3,612,232	+/ 16,76 0	27.8%	+/-0.1	20,777	+/-773	28.5%	+/-1.1
Some college, no degree	2,097,401	+/- 9,156	16.1%	+/-0.1	13,720	+/-641	18.8%	+/-0.9
Associate's degree	1,070,808	+/- 6,852	8.2%	+/-0.1	10,062	+/-621	13.8%	+/-0.9
Bachelor's degree	2,404,491	+/- 10,39 6	18.5%	+/-0.1	12,990	+/-749	17.8%	+/-1.0
Graduate or professional degree	1,819,016	+/- 13,26 1	14.0%	+/-0.1	9,304	+/-428	12.7%	+/-0.6

6. Housing

Within Ontario County, home ownership is high, more than 25% higher than the New York State rate (27.2% higher). Persons per household is relatively the same to the New York State average with 2.38 and 2.59 respectively.

Census Data - People QuickFacts	Ontario County	New York
Housing units, 2011	48,653	8,119,364
Homeownership rate, 2007-2011	75.3%	54.8%
Housing units in multi-unit structures, percent, 2007-2011	20.1%	50.5%
Median value of owner-occupied housing units, 2007-2011	\$133,600	\$301,000
Households, 2007-2011	43,474	7,215,687
Persons per household, 2007-2011	2.38	2.59
Per capita money income in the past 12 months (2011 dollars),	\$29,293	\$31,796
2007-2011		
Median household income, 2007-2011	\$57,069	\$56,951
Persons below poverty level, percent, 2007-2011	9.7%	14.5%

Ontario County stands out as being particularly low in persons below poverty level with 9.7% as compared to the New York State rate of 14.5%, more than 33% lower.

		New Y	York		On	tario Cou	nty, New Y	ork
Subject	Estimate	Margin of Error	Percent	Percent Margin of Error	Estimate	Margin of Error	Percent	Percent Margin of Error
HOUSING OCCUPANCY								
Total housing units	8,081,303	+/-891	8,081,303	(X)	47,816	+/-189	47,816	(X)
Occupied housing units	7,215,687	+/- 12,387	89.3%	+/-0.1	43,474	+/-519	90.9%	+/-1.0
Vacant housing units	865,616	+/- 11,986	10.7%	+/-0.1	4,342	+/-479	9.1%	+/-1.0
Homeowner vacancy rate	1.8	+/-0.1	(X)	(X)	1.1	+/-0.4	(X)	(X)
Rental vacancy rate	4.6	+/-0.1	(X)	(X)	5.5	+/-1.7	(X)	(X)
UNITS IN STRUCTURE								
Total housing units	8,081,303	+/-891	8,081,303	(X)	47,816	+/-189	47,816	(X)
1-unit, detached	3,400,678	+/-8,851	42.1%	+/-0.1	32,241	+/-601	67.4%	+/-1.3
1-unit, attached	392,846	+/-4,315	4.9%	+/-0.1	1,842	+/-237	3.9%	+/-0.5
2 units	872,040	+/-8,009	10.8%	+/-0.1	2,080	+/-347	4.4%	+/-0.7
3 or 4 units	597,327	+/-5,399	7.4%	+/-0.1	1,974	+/-287	4.1%	+/-0.6
5 to 9 units	430,219	+/-4,587	5.3%	+/-0.1	2,906	+/-359	6.1%	+/-0.8
10 to 19 units	332,979	+/-3,813	4.1%	+/-0.1	903	+/-215	1.9%	+/-0.4
20 or more units	1,851,046	+/-5,807	22.9%	+/-0.1	1,738	+/-197	3.6%	+/-0.4
Mobile home	200,756	+/-2,571	2.5%	+/-0.1	4,115	+/-354	8.6%	+/-0.7
Boat, RV, van, etc.	3,412	+/-462	0.0%	+/-0.1	17	+/-27	0.0%	+/-0.1
YEAR STRUCTURE BUILT								
Total housing units	8,081,303	+/-891	8,081,303	(X)	47,816	+/-189	47,816	(X)
Built 2005 or later	178,003	+/-2,878	2.2%	+/-0.1	2,276	+/-267	4.8%	+/-0.6
Built 2000 to 2004	291,104	+/-3,008	3.6%	+/-0.1	3,266	+/-377	6.8%	+/-0.8
Built 1990 to 1999	491,606	+/-3,753	6.1%	+/-0.1	5,493	+/-470	11.5%	+/-1.0
Built 1980 to 1989	604,173	+/-4,079	7.5%	+/-0.1	6,022	+/-458	12.6%	+/-1.0
Built 1970 to 1979	816,636	+/-5,575	10.1%	+/-0.1	6,988	+/-484	14.6%	+/-1.0
Built 1960 to 1969	998,945	+/-6,770	12.4%	+/-0.1	3,746	+/-326	7.8%	+/-0.7
Built 1950 to 1959	1,243,024	+/-6,276	15.4%	+/-0.1	2,938	+/-316	6.1%	+/-0.7
Built 1940 to 1949	730,940	+/-5,665	9.0%	+/-0.1	1,836	+/-274	3.8%	+/-0.6

		New Y	York		On	tario Cou	nty, New Y	ork
Subject	Estimate	Margin of Error	Percent	Percent Margin of Error	Estimate	Margin of Error	Percent	Percent Margin of Error
Built 1939 or earlier	2,726,872	+/-9,506	33.7%	+/-0.1	15,251	+/-586	31.9%	+/-1.2
HOUSING TENURE								
Occupied housing units	7,215,687	+/- 12,387	7,215,687	(X)	43,474	+/-519	43,474	(X)
Owner-occupied	3,955,232	+/- 18,033	54.8%	+/-0.2	32,732	+/-567	75.3%	+/-1.0
Renter-occupied	3,260,455	+/-9,801	45.2%	+/-0.2	10,742	+/-483	24.7%	+/-1.0
Average household size of owner-occupied unit	2.75	+/-0.01	(X)	(X)	2.51	+/-0.03	(X)	(X)
Average household size of renter-occupied unit	2.40	+/-0.01	(X)	(X)	1.96	+/-0.07	(X)	(X)
Census Data - 2010 YEAR HOUSEHOLDER MOVED INTO UNIT								
Occupied housing units	7,215,687	+/- 12,387	7,215,687	(X)	43,474	+/-519	43,474	(X)
Moved in 2005 or later	2,438,464	+/- 10,328	33.8%	+/-0.2	15,146	+/-587	34.8%	+/-1.3
Moved in 2000 to 2004	1,384,615	+/-7,697	19.2%	+/-0.1	8,904	+/-500	20.5%	+/-1.1
Moved in 1990 to 1999	1,505,466	+/-8,026	20.9%	+/-0.1	9,154	+/-498	21.1%	+/-1.2
Moved in 1980 to 1989	794,405	+/-6,559	11.0%	+/-0.1	4,802	+/-369	11.0%	+/-0.8
Moved in 1970 to 1979	578,901	+/-4,520	8.0%	+/-0.1	2,860	+/-272	6.6%	+/-0.6
Moved in 1969 or earlier	513,836	+/-3,959	7.1%	+/-0.1	2,608	+/-256	6.0%	+/-0.6
VEHICLES AVAILABLE								
Occupied housing units	7,215,687	+/- 12,387	7,215,687	(X)	43,474	+/-519	43,474	(X)
No vehicles available	2,077,343	+/-6,781	28.8%	+/-0.1	3,063	+/-378	7.0%	+/-0.9
1 vehicle available	2,340,149	+/-8,885	32.4%	+/-0.1	13,961	+/-633	32.1%	+/-1.3
2 vehicles available	1,954,301	+/-9,222	27.1%	+/-0.1	18,323	+/-605	42.1%	+/-1.3
3 or more vehicles available	843,894	+/-6,042	11.7%	+/-0.1	8,127	+/-422	18.7%	+/-1.0
HOUSE HEATING FUEL								
Occupied housing units	7,215,687	+/- 12,387	7,215,687	(X)	43,474	+/-519	43,474	(X)
Utility gas	3,908,626	+/-9,716	54.2%	+/-0.1	25,594	+/-635	58.9%	+/-1.4
Bottled, tank, or LP gas	224,689	+/-3,025	3.1%	+/-0.1	4,987	+/-424	11.5%	+/-1.0

		New Y	York		On	tario Cou	nty, New Y	ork
Subject	Estimate	Margin of Error	Percent	Percent Margin of Error	Estimate	Margin of Error	Percent	Percent Margin of Error
Electricity	653,872	+/-5,592	9.1%	+/-0.1	5,058	+/-470	11.6%	+/-1.1
Fuel oil, kerosene, etc.	2,173,724	+/-7,796	30.1%	+/-0.1	4,869	+/-450	11.2%	+/-1.0
Coal or coke	18,216	+/-786	0.3%	+/-0.1	479	+/-141	1.1%	+/-0.3
Wood	134,125	+/-2,244	1.9%	+/-0.1	2,038	+/-290	4.7%	+/-0.7
Solar energy	1,680	+/-276	0.0%	+/-0.1	0	+/-89	0.0%	+/-0.1
Other fuel	61,827	+/-1,575	0.9%	+/-0.1	287	+/-85	0.7%	+/-0.2
No fuel used	38,928	+/-1,470	0.5%	+/-0.1	162	+/-78	0.4%	+/-0.2
SELECTED CHARACTERISTICS								
Occupied housing units	7,215,687	+/- 12,387	7,215,687	(X)	43,474	+/-519	43,474	(X)
Lacking complete plumbing facilities	47,522	+/-1,943	0.7%	+/-0.1	340	+/-174	0.8%	+/-0.4
Lacking complete kitchen facilities	69,488	+/-2,177	1.0%	+/-0.1	606	+/-220	1.4%	+/-0.5
No telephone service available	232,964	+/-3,178	3.2%	+/-0.1	1,136	+/-231	2.6%	+/-0.5
OCCUPANTS PER ROOM								
Occupied housing units	7,215,687	+/- 12,387	7,215,687	(X)	43,474	+/-519	43,474	(X)
1.00 or less	6,877,182	+/- 13,805	95.3%	+/-0.1	43,137	+/-540	99.2%	+/-0.3
1.01 to 1.50	222,559	+/-3,779	3.1%	+/-0.1	198	+/-83	0.5%	+/-0.2
1.51 or more	115,946	+/-2,419	1.6%	+/-0.1	139	+/-87	0.3%	+/-0.2
VALUE								
Owner-occupied units	3,955,232	+/- 18,033	3,955,232	(X)	32,732	+/-567	32,732	(X)
Less than \$50,000	207,032	+/-2,525	5.2%	+/-0.1	3,002	+/-278	9.2%	+/-0.8
\$50,000 to \$99,999	502,723	+/-4,024	12.7%	+/-0.1	6,753	+/-460	20.6%	+/-1.3
\$100,000 to \$149,999	433,998	+/-3,931	11.0%	+/-0.1	9,144	+/-508	27.9%	+/-1.4
\$150,000 to \$199,999	351,731	+/-3,472	8.9%	+/-0.1	5,388	+/-414	16.5%	+/-1.2
\$200,000 to \$299,999	476,937	+/-4,842	12.1%	+/-0.1	4,734	+/-382	14.5%	+/-1.2
\$300,000 to \$499,999	963,566	+/-7,903	24.4%	+/-0.1	2,614	+/-291	8.0%	+/-0.9
\$500,000 to \$999,999	821,392	+/-6,077	20.8%	+/-0.1	919	+/-179	2.8%	+/-0.6
\$1,000,000 or more	197,853	+/-2,795	5.0%	+/-0.1	178	+/-91	0.5%	+/-0.3
Median (dollars)	301,000	+/-1,098	(X)	(X)	133,600	+/-3,519	(X)	(X)

		New !	York		On	tario Cou	nty, New Y	ork
Subject	Estimate	Margin of Error	Percent	Percent Margin of Error	Estimate	Margin of Error	Percent	Percent Margin of Error
MORTGAGE STATUS								
Owner-occupied units	3,955,232	18,033	3,955,232	(X)	32,732	+/-567	32,732	(X)
Housing units with a mortgage	2,572,183	14,096	65.0%	+/-0.1	22,234	+/-625	67.9%	+/-1.3
Housing units without a mortgage	1,383,049	+/-7,202	35.0%	+/-0.1	10,498	+/-444	32.1%	+/-1.3
GROSS RENT								
Occupied units paying rent	3,146,433	+/- 9,294	3,146,433	(X)	10,130	+/-478	10,130	(X)
Less than \$200	45,733	+/-1,385	1.5%	+/-0.1	145	+/-69	1.4%	+/-0.7
\$200 to \$299	138,887	+/-2,633	4.4%	+/-0.1	363	+/-110	3.6%	+/-1.1
\$300 to \$499	228,926	+/-2,894	7.3%	+/-0.1	915	+/-191	9.0%	+/-2.0
\$500 to \$749	504,588	+/-4,820	16.0%	+/-0.1	3,866	+/-330	38.2%	+/-2.7
\$750 to \$999	600,320	+/-5,331	19.1%	+/-0.2	2,805	+/-343	27.7%	+/-2.8
\$1,000 to \$1,499	925,976	+/-6,113	29.4%	+/-0.2	1,554	+/-235	15.3%	+/-2.2
\$1,500 or more	702,003	+/-6,475	22.3%	+/-0.2	482	+/-166	4.8%	+/-1.6
Median (dollars)	1,025	+/-3	(X)	(X)	738	+/-17	(X)	(X)
No rent paid	114,022	+/-2,396	(X)	(X)	612	+/-140	(X)	(X)
GROSS RENT AS A PERCENTAGE OF HOUSEHOLD INCOME (GRAPI)								
Occupied units paying rent (excluding units where GRAPI cannot be computed)		+/- 9,135	3,081,420	(X)	10,011	+/-466	10,011	(X)
Less than 15.0 percent	413,750	+/-4,394	13.4%	+/-0.1	1,166	+/-243	11.6%	+/-2.3
15.0 to 19.9 percent	357,726	+/-4,058	11.6%	+/-0.1	1,240	+/-192	12.4%	+/-1.9
20.0 to 24.9 percent	360,195	+/-4,274	11.7%	+/-0.1	1,507	+/-252	15.1%	+/-2.5
25.0 to 29.9 percent	339,170	+/-4,106	11.0%	+/-0.1	1,134	+/-228	11.3%	+/-2.2
30.0 to 34.9 percent	274,688	+/-3,642	8.9%	+/-0.1	992	+/-214	9.9%	+/-2.1
35.0 percent or more	1,335,891	+/-8,080	43.4%	+/-0.2	3,972	+/-416	39.7%	+/-3.7

The housing stock in Ontario County is generally newer and somewhat larger than that in most surrounding areas, with a lower percentage (33.7%) built prior to 1940, higher than the State and national percentages. Like most of the region and the State, residents are not as mobile as the rest of the nation, with 23.6% having been in the same home since at least 1989. At a median price of \$133,600 housing costs are much higher in Ontario than all counties in the region, but much lower than average for the State or nation. Median rents and mortgages are also the highest in the region. Approximately 7.0% (3,063 households) have no vehicle available for the household. Ontario County has the CATS (County Area Transit System) fixed route transportation system, along with a Dial A Ride program for demand responsive transportation needs. This is another advantage Ontario County has over many of the counties in the region. Approximately 0.8% of households lack complete plumbing (340 households) and 1.4% lack complete kitchen facilities (606 households) and only 2.6% do not have a telephone (1,136 households).

7. Employment/Industry

Employment within Ontario County is a much brighter picture than that of upstate New York and New York State as a whole. Unemployment in Ontario County is more than 10% lower than New York State (10.7%) and those below the poverty level falls almost 50% lower than New York State (45.1%). The number of high school dropouts is also significantly lower than the rest of the state.

Socio-Economic Status 2008-	2010 - Ontai	rio Coun	ty	
Indicator	3 Year Total	County Rate	NYS Rate	NYS Rate exc NYC
% unemployed (2008-10)	11,449	6.7	7.5	7.0
% of population at or below poverty level (2009)	N/A	7.8	14.2	10.8
% of children <18 at or below poverty level (2009)	N/A	10.7	20.2	14.8
Median family income in US dollars (2009)	N/A	52,764	54,554	N/A
% Annual high school drop outs (2008-10)	371	1.7	2.8	2.0
Behavior/Risk Indicator (2008-09)	County Rate	CI#	NYS Rate	Upstate
% of adults with health insurance	86.3	± 5.0	86.7	89.9
% of adults that did not receive medical care because of the cost	6.5	± 2.4	13.8	12.0

		New Yor	·k		Ontario County, New York				
Subject Census Data - 2010	Estimate	Margin of Error	Percent	Percent Margin of Error	Estimate	Margin of Error	Percent	Percent Margin of Error	
EMPLOYMENT STATUS									
Population 16 years and over	15,494,360	+/-2,687	15,494,360	(X)	85,829	+/-160	85,829	(X)	
In labor force	9,881,672	+/-14,190	63.8%	+/-0.1	56,995	+/-761	66.4%	+/-0.9	
Civilian labor force	9,855,104	+/-14,112	63.6%	+/-0.1	56,937	+/-752	66.3%	+/-0.9	

Employed	9,051,668	+/-14,550	58.4%	+/-0.1	53,459	+/-736	62.3%	+/-0.9
Armed Forces	26,568	+/-993	0.2%	+/-0.1	58	+/-48	0.1%	+/-0.1
Percent Unemployed	(X)	(X)	8.2%	+/-0.1	(X)	(X)	6.1%	+/-0.6
r creent onemployeu	(11)	(A)	0.270	17-0.1	(21)	(11)	0.170	17-0.0
Females 16 years and over	8,099,470	+/-2,026	8,099,470	(X)	44,255	+/-138	44,255	(X)
		li .						
Civilian labor force	4,750,587	+/-9,156	58.7%	+/-0.1	27,741	+/-530	62.7%	+/-1.2
Civinan labor force	1,730,307	17 7,130	30.770	17 0.1	27,711	17 330	02.770	1, 1.2
		li .						
All parents in family in labor force	827,605	+/-6,009	61.8%	+/-0.4	4,502	+/-387	67.9%	+/-5.0
Own children 6 to 17 years	2,812,187	+/-4,274	2,812,187	(X)	16,881	+/-236	16,881	(X)
All parents in family in labor force	1,955,310	+/-8,395	69.5%	+/-0.3	12,624	+/-499	74.8%	+/-2.9
COMMITTED TO								
COMMUTING TO WORK								
Workers 16 years and over	8,837,690	+/-14,726	8,837,690	(X)	52,493	+/-752	52,493	(X)
Car, truck, or van drove alone	4,777,615	+/-11,730	54.1%	+/-0.1	42,645	+/-852	81.2%	+/-1.2
Car, truck, or van carpooled	639,958	+/-7,520	7.2%	+/-0.1	4,949	+/-466	9.4%	+/-0.9
Public transportation (excluding taxicab)	2,355,484	+/-11,188	26.7%	+/-0.1	353	+/-108	0.7%	+/-0.2
Walked	564,197	+/-6,445	6.4%	+/-0.1	1,825	+/-295	3.5%	+/-0.6
Other means	160,020	+/-3,445	1.8%	+/-0.1	516	+/-155	1.0%	+/-0.3
Worked at home	340,416	+/-5,082	3.9%	+/-0.1	2,205	+/-281	4.2%	+/-0.5
L		l			l			l

The table above portrays the overall employment status of the working population within Ontario County. Over 50% of the working population in 2010 estimates were in the labor force (66.4%) with 66.3% being in the civilian workforce. The armed forces only represented 0.1% of the working population in Ontario County. Most families in Ontario County have all parents in the household in the labor force, higher than the rest of the state. Ontario County's unemployment rates are generally lower than the State, the region and the rest of upstate NY, a fact that is still in evidence at the present time.

		New You	·k		Onta	rio Coun	ty, New Y	ork
Subject	Estimate	Margin of Error	Percent	Percent Margin of Error	Estimate	Margin of Error	Percent	Percent Margin of Error
OCCUPATION								
Civilian employed population 16 years and over	9,051,668	+/-14,550	9,051,668	(X)	53,459	+/-736	53,459	(X)
Management, business, science, and arts occupations	3,454,414	+/-16,748	38.2%	+/-0.2	20,142	+/-676	37.7%	+/-1.2
Service occupations	1,765,054	+/-9,232	19.5%	+/-0.1	9,237	+/-575	17.3%	+/-1.0
Sales and office occupations	2,254,494	+/-9,249	24.9%	+/-0.1	12,759	+/-599	23.9%	+/-1.1
Natural resources, construction, and maintenance occupations	693,011	+/-5,841	7.7%	+/-0.1	5,044	+/-467	9.4%	+/-0.9
Production, transportation, and material moving occupations	884,695	+/-7,699	9.8%	+/-0.1	6,277	+/-556	11.7%	+/-1.0
INDUSTRY								
Civilian employed population 16 years and over	9,051,668	+/-14,550	9,051,668	(X)	53,459	+/-736	53,459	(X)
Agriculture, forestry, fishing and hunting, and mining	54,806	+/-1,803	0.6%	+/-0.1	1,040	+/-258	1.9%	+/-0.5
Construction	524,793	+/-6,131	5.8%	+/-0.1	3,640	+/-399	6.8%	+/-0.7
Manufacturing	638,955	+/-5,287	7.1%	+/-0.1	7,368	+/-577	13.8%	+/-1.1
Wholesale trade	241,660	+/-3,443	2.7%	+/-0.1	1,382	+/-253	2.6%	+/-0.5
Retail trade	963,903	+/-8,729	10.6%	+/-0.1	6,516	+/-537	12.2%	+/-1.0
Transportation and warehousing, and utilities	476,450	+/-5,679	5.3%	+/-0.1	1,590	+/-251	3.0%	+/-0.5
Information	274,349	+/-3,781	3.0%	+/-0.1	1,193	+/-239	2.2%	+/-0.5
Finance and insurance, and real estate and rental and leasing		+/-5,540	8.5%	+/-0.1	2,477	+/-299	4.6%	+/-0.6
Professional, scientific, and management, and administrative and waste	985,821	+/-8,478	10.9%	+/-0.1	4,546	+/-423	8.5%	+/-0.8

management services								
Educational services, and health care and social assistance	2,443,001	+/-11,806	27.0%	+/-0.1	14,953	+/-536	28.0%	+/-0.9
Arts, entertainment, and recreation, and accommodation and food services	779,398	+/-7,052	8.6%	+/-0.1	4,386	+/-419	8.2%	+/-0.8
Other services, except public administration	456,955	+/-6,836	5.0%	+/-0.1	2,419	+/-307	4.5%	+/-0.6
Public administration	446,255	+/-4,714	4.9%	+/-0.1	1,949	+/-291	3.6%	+/-0.5
CLASS OF WORKER								
Civilian employed population 16 years and over	9,051,668	+/-14,550	9,051,668	(X)	53,459	+/-736	53,459	(X)
Private wage and salary workers	6,973,058	+/-15,793	77.0%	+/-0.1	41,473	+/-784	77.6%	+/-1.1
Government workers	1,514,208	+/-11,852	16.7%	+/-0.1	8,212	+/-539	15.4%	+/-1.0
Self-employed in own not incorporated business workers	553,818	+/-5,437	6.1%	+/-0.1	3,720	+/-440	7.0%	+/-0.8
Unpaid family workers	10,584	+/-726	0.1%	+/-0.1	54	+/-36	0.1%	+/-0.1

The largest area of occupation within Ontario County is management, business, science and art at 37.7%, followed by office and sales occupations at 23.9%. The largest industry within Ontario County is educational services, health care and social assistance at 28.0%, followed by manufacturing at 13.8%. Agriculture, foresting, fishing, hunting and mining only account for 1.9% of the industry within Ontario County. This can be surprising due to the rural classification of Ontario County, attesting to the fact that Ontario County has greater number of urban pockets as compared to the other network counties as a whole. This places Ontario County in a unique situation when it comes to providing adequate and accessible care because it must cater to both its urban and rural nature.

8. Income/Socioeconomic Factors

		New You	Ontario County, New York					
Subject				Percent				Percent
		Margin		Margin		Margin		Margin
Census Data - 2010		of		of		of		of
	Estimate	Error	Percent	Error	Estimate	Error	Percent	Error

Total households	7,215,687	+/-12,387	7,215,687	(X)	43,474	+/-519	43,474	(X)	
\$10,000 to \$14,999	377,349	+/-3,901	5.2%	+/-0.1	2,006	+/-278	4.6%	+/-0.6	
\$25,000 to \$34,999	668,253	+/-6,010	9.3%	+/-0.1	4,439	+/-382	10.2%	+/-0.9	
\$50,000 to \$74,999	1,233,315	+/-7,100	17.1%	+/-0.1	9,342	+/-541	21.5%	+/-1.2	
\$100,000 to \$149,999	1,002,264	+/-7,457	13.9%	+/-0.1	6,238	+/-430	14.3%	+/-1.0	
\$200,000 or more	472,295	+/-4,921	6.5%	+/-0.1	1,472	+/-240	3.4%	+/-0.6	
Mean household income (dollars)	82,698	+/-295	(X)	(X)	72,150	+/-2,019	(X)	(X)	
With earnings	5,655,471	+/-11,154	78.4%	+/-0.1	34,489	+/-590	79.3%	+/-1.0	
Mean earnings (dollars)	86,328	+/-323	(X)	(X)	71,067	+/-2,125	(X)	(X)	
With Social Security	2,026,768	+/-8,216	28.1%	+/-0.1	13,206	+/-367	30.4%	+/-0.9	
Mean Social Security income (dollars)	16,581	+/-38	(X)	(X)	17,504	+/-446	(X)	(X)	
With retirement income	1,264,147	+/-7,877	17.5%	+/-0.1	9,613	+/-442	22.1%	+/-1.0	
Mean retirement income (dollars)	23,831	+/-191	(X)	(X)	21,219	+/-1,066	(X)	(X)	
With Supplemental Security Income	379,518	+/-3,960	5.3%	+/-0.1	1,416	+/-230	3.3%	+/-0.5	
Mean Supplemental Security Income (dollars)	8,697	+/-59	(X)	(X)	9,972	+/-938	(X)	(X)	
With cash public assistance income	227,160	+/-3,271	3.1%	+/-0.1	1,078	+/-220	2.5%	+/-0.5	
Mean cash public assistance income (dollars)	3,905	+/-60	(X)	(X)	4,680	+/-1,142	(X)	(X)	

			_					_
Less than \$10,000	227,940	+/-3,536	4.9%	+/-0.1	572	+/-158	2.0%	+/-0.5
\$15,000 to \$24,999	358,954	+/-3,828	7.7%	+/-0.1	1,664	+/-256	5.9%	+/-0.9
\$35,000 to \$49,999	550,723	+/-4,649	11.8%	+/-0.1	3,690	+/-374	13.0%	+/-1.3
\$75,000 to \$99,999	639,156	+/-6,375	13.7%	+/-0.1	4,671	+/-404	16.4%	+/-1.5
\$150,000 to \$199,999	343,285	+/-3,936	7.4%	+/-0.1	1,505	+/-217	5.3%	+/-0.7
Median family income (dollars)	69,202	+/-353	(X)	(X)	70,645	+/-2,451	(X)	(X)
(donars)								
Median nonfamily income (dollars)	35,540	+/-223	(X)	(X)	31,660	+/-1,847	(X)	(X)
Median earnings for workers (dollars)	33,377	+/-109	(X)	(X)	30,710	+/-776	(X)	(X)
Median earnings for male full-time, year-round workers (dollars)	51,051	+/-143	(X)	(X)	50,069	+/-2,123	(X)	(X)
Median earnings for female full-time, year- round workers (dollars)	42,037	+/-126	(X)	(X)	38,225	+/-1,320	(X)	(X)

Ontario County has a population of 83,107 (or approximately 77%) who are 18 years or older. According to 2007-2011 census estimates the county has a population of 16,120 (or 15.1%) who are 65 or over, giving Ontario County a population of 99,227 who are between the ages of 16-65. Of those residents who are 18 years or older 56,995 are in the workforce with 56,937 in the civilian workforce and 58 in the armed services. Of those 56,995 residents in the labor force an average of 9.2% were unemployed between the years 2008-2010.

In 2010, 21.5% of households in Ontario County reported an income of \$50,000 to \$74,999. 4.2% of households reported earning less than \$10,000 and nearly 20% of households (19.5%) reported earning less than \$25,000.

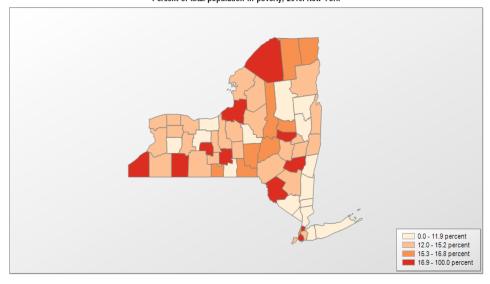
Family earnings yielded similar results with 9.9% of families earning less than \$25,000. The largest bracket represented was \$50,000 to \$74,999 with 23.5% of families reporting that level of income.

Overall, living in poverty is associated with lower health status, an increased risk of having inadequate health insurance, and lower use of health services. According to the 2010 census information the median income for a household in the county was \$57,069, and the median income for a family was \$70,645. Males had a median income of \$50,069 versus \$38,225 for females. The per capita income for the county was \$29,293.

Socio-Economic Status and General Health Indi	cators 200	8-2010 - On	tario Coun	nty
Indicator	3 Year Total	County Rate	NYS Rate	NYS Rate exc NYC
Total population (2010)	N/A	107,931.0	N/A	N/A
% of labor force unemployed (2011)	4,050	7.2	8.2	7.6
% of population at or below poverty level (2010)	N/A	10.1	15.0	N/A
% of children ages less than 18 years at or below poverty level (2010)	N/A	14.5	21.5	N/A
Median family income in US dollars (2010)	N/A	53,137.0	54,047.0	N/A
% of children ages less than 19 years with health insurance (2010)	N/A	95.1	94.9	N/A
% of adults ages 18-64 years with health insurance (2010)	N/A	87.1	83.1	N/A
High school drop out rate	371	1.7	2.8	2.0
Age-adjusted % of adults who did not receive medical care because of cost # (2008-2009)	N/A	6.5	13.8	12.0
Age-adjusted % of adults with regular health care provider (2008-2009)	N/A	92.0	83.0	87.1
Age-adjusted % of adults who had poor mental health 14 or	N/A	11.0	10.2	10.9

Socio-Economic Status and General Health Indi	icators 2008	8-2010 - On	tario Cour	nty
Indicator	3 Year Total	County Rate	NYS Rate	NYS Rate exc NYC
more days within the past month (2008-2009)				
Birth rate per 1,000 population	3,198	10.1	12.7	11.2
Total mortality rate per 100,000	2,923	919.0	748.6	842.2
Age-adjusted total mortality rate per 100,000		740.6	662.8	700.5
% premature deaths (ages less than 75 years)		38.7	40.0	37.2
Years of potential life lost per 100,000	18,273	6,182.5	5,728.2	5,843.8
Total emergency department visit rate per 10,000	117,614	3,697.9	3,821.2	3,544.4
Age-adjusted total emergency department visit rate per 10,000	117,614	3,697.2	3,819.5	3,556.7
Total hospitalization rate per 10,000	34,807	1,094.4	1,290.5	1,223.2
Age-adjusted total hospitalization rate per 10,000	34,807	1,020.4	1,242.5	1,167.6

Percent of total population in poverty, 2010: New York



Perc	ent of Population in Poverty	(NYSDOH)
	All Individuals (2010)	Children Under 18 (2010)
County	Percent	Percent
US	15.3	21.6
New York	14.2	20.2
Chemung	15.6	22.7
Livingston	13.5	16.7
Monroe	15.1	21.0
Ontario	10.1	14.5
Schuyler	13.1	23.4
Seneca	14.0	22.1
Steuben	14.4	21.6
Wayne	10.6	16.3
Yates	17.0	29.0

By the statistics poverty is more of a problem for the younger aged population in Ontario County. Ontario County's poverty rate overall in 2010 was 10.1% and for children under 18 was 14.5%.

B. Health Status of the Population and Distribution of Health Issues

For the most part, morbidity data for rural counties such as Ontario County is unreliable since it is statistically insignificant even over a three or five year period due to the very small numbers involved. The data is more useful as a method to track the presence of the disease in the County, rather than trends.

1. Family Planning/Natality

Family	Planning/Natality Indi	cators (NYSDOF	H) 2008	3-2010 - C	Ontario	County	
Indicator	Data Links		Count y Rate		Sig.Dif	NYS Rate exc NYC	Sig. Dif.	County Ranking Group
% of births within 24 months of previous pregnancy	(Table) (Trend) (Map)	725	22.7	18.0	Yes	21.1	No	2nd
Percentage of birth	s to teens							
Ages 15-17 years	(Table)(Trend) (Map)	45	1.4	1.9	No	1.9	No	1st
Ages 15-19 years	(Table)(Trend) (Map)	225	7.0	6.6	No	6.8	No	2nd
% of births to women 35 years and older	(Table) (Trend) (Map)	501	15.7	19.4	Yes	19.0	Yes	3rd
Fertility rate per 1,000 females								
Total (all births/female ages	(Table) (Trend) (Map)	3,198	54.0	60.9	Yes	58.2	Yes	2nd

Family	Planning/Natality Indi	cators (NYSDOF	H) 2008	3-2010 - C	Ontario	County	
Indicator	Data Links		Count y Rate	NYS Rate	Sig.Dif	NYS Rate exc NYC	Sig. Dif.	County Ranking Group
15-44 years)								
Ages 10-14 years (births to mothers ages 10-14 years/females ages 10-14 years)	(Table) (Trend) (Map)	0	0.0*	0.4	Yes	0.3	Yes	1st
Ages 15-17 years (births to mothers ages 15-17 years/females ages 15-17 years)	(Table) (Trend) (Map)	45	6.6	12.1	Yes	10.0	Yes	1st
Ages 15-19 years (births to mothers ages 15-19 years/females ages 15-19 years)	(Table) (Trend) (Map)	225	19.5	24.0	Yes	20.8	No	2nd
Ages 18-19 years (births to mothers ages 18-19 years/females ages 18-19 years)	(Table) (Trend) (Map)	180	37.6	40.3	No	35.4	No	2nd
Pregnancy rate per 1,000 (all pregnancies/femal e 15-44 years) #	(Table) (Trend) (Map)	3,960	66.9	93.6	Yes	77.0	Yes	2nd
Teen pregnancy rat	e per 1,000 #							
Ages 10-14 years	(Table)(Trend) (Map)	9	0.9*	1.4	No	0.8	No	3rd
Ages 15-17 years	(Table)(Trend) (Map)	79	11.7	31.1	Yes	20.4	Yes	1st
Ages 15-19 years	(Table)(Trend) (Map)	351	30.4	53.5	Yes	37.4	Yes	1st
Ages 18-19 years	(Table)(Trend) (Map)	272	56.8	84.1	Yes	60.3	No	2nd
Abortion ratio (indu	iced abortions per 100	live bir	ths) #			_		
Ages 15-19 years	(Table) (Trend) (Map)	117	52.0	116. 3	Yes	75.7	Yes	2nd
All ages	(Table)(Trend) (Map)	625	19.5	46.6	Yes	27.7	Yes	2nd

Ontario County's pregnancy rates overall are lower than the State and regional averages, at 67.3 per 1000 for the three year period 2007 - 2009, slightly greater than the 65 per 1000 for the period 2003 to 2005. Birth rates are also lower than State and regional averages for both time periods.

Pregnancies - Rate Per 1,000 Females Age 15-44

Source: 2007-2009 Vital Statistics Data As Of March, 2011

		Preg	nancies		Population	
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	1,368	1,397	1,300	4,065	60,403	67.3
Region Total	19,567	19,724	19,375	58,666	749,316	78.3
New York State Total	391,034	385,885	378,814	1,155,733	12,177,916	94.9

In general, teenage pregnancy has been decreasing throughout Ontario County, upstate New York and New York State as a whole. For the measurement period from 2007-2009, Ontario County was lower in teenage pregnancy in every age category as compared to the region and New York state. For females age 15-19, Ontario County decreased from 33.9 per 1,000 (2005-2007) to 32.5 per 1,000 (2007-2009), over a 4% decrease.

Teenage Pregnancies (Age 10-14) - Rate Per 1,000 Females Age 10-14

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Pregn	ancies	(Age	10-14)	Population	
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	1	5	3	9	10,049	0.9
Region Total	45	59	43	147	118,858	1.2
New York State Total	867	862	828	2,557	1,796,004	1.4

Teenage Pregnancies (Age 15-19) - Rate Per 1,000 Females Age 15-19

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Preg	nancie	15-19)	Population		
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	131	138	107	376	11,562	32.5
Region Total	2,396	2,478	2,304	7,178	145,251	49.4
New York State Total	39,910	38,450	36,230	114,590	2,038,303	56.2

Teenage Pregnancies (Age 18-19) - Rate Per 1,000 Females Age 18-19

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Preg	nancies	Population			
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	92	108	86	286	4,843	59.1
Region Total	1,541	1,649	1,593	4,783	63,752	75.0
New York State Total	25,899	25,363	24,078	75,340	860,174	87.6

Teenage Pregnancies (Age 15-17) - Rate Per 1,000 Females Age 15-17

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Preg	nancies	Population			
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	39	30	21	90	6,719	13.4
Region Total	855	829	711	2,395	81,499	29.4
New York State Total	14,011	13,087	12,152	39,250	1,178,129	33.3

Births for Ontario County follow a similar trend to pregnancies with 54.3 per 1,000, slightly lower than the region rate of 57.7 per 1,000 and the New York state rate at 61.5 per 1,000.

Births - Rate Per 1,000 Females Age 15-44

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	į.	Bir	Population			
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	1,119	1,111	1,051	3,281	60,403	54.3
Region Total	14,614	14,348	14,249	43,211	749,316	57.7
New York State Total	252,662	249,655	246,592	748,909	12,177,916	61.5

Teenage births have risen slightly within Ontario County as compared to the last measurement period (2005-2007). Teenage births (age 15-19) increased from 20.0 per 1,000 to 21.2 per 1,000, more than a 5% increase. A significant decrease can be noted in teenage births in the 15-17 year old age category with a rate of 9.7 per 1,000 in 2005-2007 to 7.7 in 2007-2009, an almost 21% decrease. The most burdened age group for teenage birth within Ontario County is the 18-19 year old age group within an increase from 34.9 per 1,000 in 2005-2007 to 39.9 per 1,000 a 12.5% increase. Overall, teenage pregnancies and births in the adolescent age range (10-17) in Ontario County seem to be decreasing while teenage pregnancies and births to older teens (18-19) seems to be increasing.

Teenage Births (Age 10-14) - Rate Per 1,000 Females Age 10-14

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Bir	ths (A	ge 10	Population		
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	0	0	0	0	10,049	0.0
Region Total	19	28	8	55	118,858	0.5
New York State Total	193	242	207	642	1,796,004	0.4

Teenage Births (Age 15-19) - Rate Per 1,000 Females Age 15-19

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Bi	irths (A	Population			
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	82	96	67	245	11,562	21.2
Region Total	1,375	1,400	1,302	4,077	145,251	28.1
New York State Total	17,599	17,245	16,248	51,092	2,038,303	25.1

Teenage Births (Age 15-17) - Rate Per 1,000 Females Age 15-17

Source: 2007-2009 Vital Statistics Data As Of March, 2011

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	Bi	rths (A	Age 15	Population		
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	19	20	13	52	6,719	7.7
Region Total	441	435	356	1,232	81,499	15.1
New York State Total	5,277	5,074	4,687	15,038	1,178,129	12.8

Teenage Births (Age 18-19) - Rate Per 1,000 Females Age 18-19

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Bi	irths (A	Population			
Region/County	2007	2008	2009	Total	2007-2009	Rate
<u>Ontario</u>	63	76	54	193	4,843	39.9
Region Total	934	965	946	2,845	63,752	44.6
New York State Total	12,322	12,171	11,561	36,054	860,174	41.9

Teenage Births (Age 15-17) - Percent of Live Births*

Source: 2007-2009 Vital Statistics Data As Of March, 2011

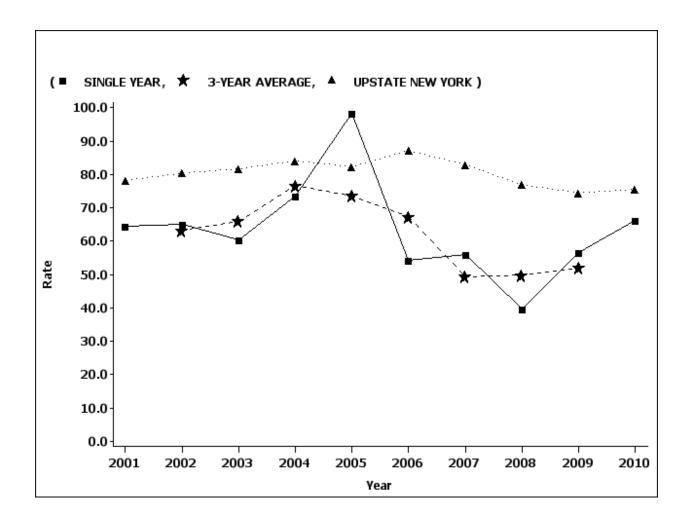
	Bi	rths (A	Age 15	Births*		
Region/County	2007	2008	2009	Total	2007-2009	Percent
<u>Ontario</u>	19	20	13	52	3,281	1.6
Region Total	441	435	356	1,232	43,203	2.9
New York State Total	5,277	5,074	4,687	15,038	750,012	2.0

Induced abortion rates have stayed the same throughout Ontario County with a rate of 20.1 per 100 live births from 2003-2005 and a rate of 20.2 from 2007-2009.

Induced Abortions - Ratio Per 100 Live Births

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	I	nduced A	Births			
Region/County	2007	2008	2009	Total	2007-2009	Ratio
<u>Ontario</u>	224	240	198	662	3,281	20.2
Region Total	4,498	4,893	4,629	14,020	43,211	32.4
New York State Total	120,554	118,381	115,008	353,943	748,909	47.3



Overall, Ontario County teenage abortion rates have stayed lower than upstate New York rates as a whole.

Ontario County/ZIP Code Perinatal Data Profile

Source: 2009-2011 New York State Vital Statistics Data as of March, 2013

			Pe	ercent of	Births		Infant and Neonatal Deaths				Teens	
ZIP Code	Tot Births 2009- 2011	Premat ure Births	Low Birth Wt	Out of Wedloc k	Medicaid or Self- pay	Late or No Prenatal Care	Infant Deaths 2009- 2011		Neonatal Deaths 2009- 2011	Neonatal Deaths Rate		Teen Pregnancy Rate
14424	742	12.5	7.5	42.1	40.2	0.5	3	4.0	2	2.7	17.2	32.8
14425	392	8.5	4.3	28.8	29.3	0.3	2	5.1	2	5.1	12.6	25.3
14432	161	14.6	4.3	39.1	42.9	1.2	2	12.4	2	12.4	22.9	27.8
14456	622	10.7	7.2	56.2	58.2	0.3	4	6.4	4	6.4	22.4	37.4
14466	43	7.3	14.0	39.5	39.5	0.0	0	0.0	0	0.0	10.3	25.6
14469	171	9.9	8.2	31.6	39.2	1.2	2	11.7	2	11.7	8.1	19.3

			Pe	ercent of	Births		Infa	nt and N	Neonatal D	eaths	Teens	
ZIP Code	Tot Births 2009- 2011	Premat ure Births	Low Birth Wt	Out of Wedloc k	Medicaid or Self- pay	Late or No Prenatal Care	Infant Deaths 2009- 2011		Neonatal Deaths 2009- 2011	Neonatal Deaths Rate		Teen Pregnancy Rate
14471	49	21.7	16.3	34.7	40.8	0.0	1	20.4	1	20.4	0.0	8.0
14504	60	8.9	6.7	46.7	58.3	0.0	0	0.0	0	0.0	29.0	43.5
14512	127	11.8	7.1	44.4	45.2	0.0	1	7.9	1	7.9	20.8	39.6
14532	139	7.4	6.5	30.2	36.7	0.0	1	7.2	1	7.2	20.5	36.5
14548	118	12.7	9.3	45.8	46.6	2.6	1	8.5	0	0.0	27.0	31.9
14560	68	10.8	10.3	35.3	45.6	0.0	0	0.0	0	0.0	15.4	20.5
14561	111	9.3	7.2	27.0	53.2	0.0	1	9.0	0	0.0	17.9	17.9
14564	368	9.6	7.1	15.2	15.8	0.0	2	5.4	1	2.7	6.0	13.5
Total	3,178	10.9	7.2	38.3	40.7	0.5	20	6.3	16	5.0	16.8	29.1

Low Birthweight Births (<2500 Grams) - Percent of Live Births*

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Bir	ths <25	500 Gra	ms	Births*	
Region/County	2007	2008	2009	Total	2007-2009	Percent
Chemung	92	76	98	266	3,034	8.8
<u>Livingston</u>	36	32	33	101	1,765	5.7
<u>Monroe</u>	694	702	740	2,136	25,962	8.2
<u>Ontario</u>	80	59	59	198	3,280	6.0
<u>Schuyler</u>	15	15	13	43	519	8.3
<u>Seneca</u>	29	11	19	59	1,136	5.2
<u>Steuben</u>	83	64	77	224	3,322	6.7
<u>Wayne</u>	62	81	77	220	3,227	6.8
Yates	15	8	18	41	952	4.3
Region Total	1,106	1,048	1,134	3,288	43,197	7.6
New York State Total	20,560	20,471	20,226	61,257	748,245	8.2

Very Low Birthweight Births (<1500 Grams) - Percent of Live Births*

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Bir	ths <1	500 G	Births*		
Region/County	2007	2008	2009	Total	2007-2009	Percent
Chemung	22	9	20	51	3,034	1.7
<u>Livingston</u>	10	10	4	24	1,765	1.4
<u>Monroe</u>	144	150	157	451	25,962	1.7
<u>Ontario</u>	10	7	9	26	3,280	0.8
<u>Schuyler</u>	3	4	1	8	519	1.5
<u>Seneca</u>	7	2	2	11	1,136	1.0
<u>Steuben</u>	19	12	19	50	3,322	1.5
<u>Wayne</u>	15	17	12	44	3,227	1.4
<u>Yates</u>	1	5	1	7	952	0.7
Region Total	231	216	225	672	43,197	1.6
New York State Total	3,716	3,733	3,763	11,212	748,245	1.5

Short Gestation (<37 Weeks) - Percent of Live Births*

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	В	irths <3	37 Weel	KS	Births*	
Region/County	2007	2008	2009	Total	2007-2009	Percent
Chemung	159	116	119	394	2,939	13.4
<u>Livingston</u>	66	54	44	164	1,690	9.7
<u>Monroe</u>	851	803	817	2,471	23,591	10.5
<u>Ontario</u>	106	115	104	325	3,096	10.5
<u>Schuyler</u>	24	18	22	64	496	12.9
<u>Seneca</u>	40	22	27	89	1,087	8.2
<u>Steuben</u>	146	106	96	348	3,185	10.9
<u>Wayne</u>	110	92	101	303	2,957	10.2
<u>Yates</u>	28	20	24	72	917	7.9
Region Total	1,530	1,346	1,354	4,230	39,958	10.6
New York State Total	30,222	28,978	28,979	88,179	719,747	12.3

Overall, low birth weight and short gestation are not major problems within Ontario County with rates around the average or lower than the region and New York state rates as a whole. Perinatal data shows fluctuations in zip code of births throughout the state from the lowest three year (2009-2011) total of 43 births ranging to 742 births. Fluctuations could be accounted to higher population areas.

2. Respiratory Disease

	Respiratory Disease In	dicators (N	NYSDOH) 2	2008-20	10 - Onta	rio County			
Indicator	Data Links	3 Year Total	County Rate	NYS Rate	Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group	
CLRD mortality rate per	CLRD mortality rate per 100,000								
Crude	(Table) (Trend) (Map)	165	51.9	34.7	Yes	46.0	No	2nd	
Age-adjusted	(Table) (Trend) (Map)	165	42.0	31.1	Yes	38.5	No	2nd	
CLRD hospitalization rate per 10,000									
Crude	(Table) (Trend) (Map)	979	30.8	39.3	Yes	35.2	Yes	1st	
Age-adjusted	(Table) (Trend) (Map)	979	25.8	37.5	Yes	31.7	Yes	1st	
Asthma hospitalization ra	Asthma hospitalization rate per 10,000								
Crude	(Table) (Trend) (Map)	204	6.4	20.3	Yes	12.4	Yes	1st	
Age-adjusted	(Table) (Trend) (Map)	204	6.2	20.3	Yes	12.3	Yes	1st	
Ages 0-4 years	(Table) (Trend) (Map)	25	14.5	58.8	Yes	36.1	Yes	1st	
Ages 5-14 years	(Table) (Trend) (Map)	19	4.8	20.9	Yes	11.2	Yes	1st	
Ages 0-17 years	(Table) (Trend) (Map)	46	6.5	29.0	Yes	16.1	Yes	1st	
Ages 5-64 years	(Table) (Trend) (Map)	135	5.3	15.4	Yes	9.5	Yes	1st	
Ages 15-24 years	(Table) (Trend) (Map)	8	1.8*	7.5	Yes	4.1	Yes	1st	
Ages 25-44 years	(Table) (Trend) (Map)	33	4.4	10.8	Yes	8.1	Yes	1st	
Ages 45-64 years	(Table) (Trend) (Map)	75	7.9	21.8	Yes	12.6	Yes	1st	
Ages 65 years +	(Table) (Trend) (Map)	44	9.2	32.2	Yes	19.2	Yes	1st	
Asthma mortality rate pe	r 100,000								

Respiratory Disease Indicators (NYSDOH) 2008-2010 - Ontario County										
Indicator	Data Links	3 Year Total	County Rate	NYS Rate	Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group		
Crude	(Table) (Trend) (Map)	0	0.0*	1.3	Yes	0.9	Yes	1st		
Age-adjusted	(Table) (Trend) (Map)	0	0.0*	1.2	Yes	0.7	Yes	1st		
Age-adjusted % of adults with current asthma (2008-2009)	(Table) (Map)	N/A	9.5	9.7	No	10.1	No	2nd		

The New York State Department of Health presents data using the last three years of available data for the numerator, and the three-year average for the county and state rates. The mid-year population was used for the denominator in generating these rates. County rates are compared to New York State and New York State excluding New York City, and tested to see whether the two rates are significantly different at the 95% level. A quartile ranking of the county rate, in relation to the rates of all 62 New York State counties, is also included (1- most favorable to 4 - least favorable). As seen above, Ontario County falls within the 1st or 2nd quartile for all respiratory disease indicators, showing a favorable status as compared to the rest of New York State. When considering asthmas hospitalization rates within Ontario County, the most burdened age group are those 0-4 years of age at 14.5 per 10,000. Although this is significantly lower than the state rate, it is more than double that of almost all other age groups.

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Age 0-4

Source: 2007-2009 Emergency Department Data as of February, 2011

		ED V	Visits	Population	Average	
Region/County	2007	2008	2009	Total	2008	Rate
<u>Ontario</u>	41	46	62	149	5,591	88.8
Region Total	1,059	1,007	1,086	3,152	70,316	149.4
New York State Total	26,291	25,827	27,063	79,181	1,208,495	218.4

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Age 5-14 Source: 2007-2009 Emergency Department Data as of February, 2011

ED Visits Population Average 2008 Region/County 2008 2009 Rate 2007 Total Ontario 64 58 204 12,339 55.1 Region Total 1,069 987 1,204 3,260 151,815 71.6 New York State Total 30,664 28,963 31,705 91,332 2,395,645 127.1

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Age 0-14 Source: 2007-2009 Emergency Department Data as of February, 2011

		ED	Visits	Population	Average	
Region/County	2007	2008	2009	Total	2008	Rate
<u>Ontario</u>	105	104	144	353	17,930	65.6
Region Total	2,128	1,994	2,290	6,412	222,131	96.2
New York State Total	56,955	54,790	58,768	170,513	3,604,140	157.7

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Age 0-17

Source: 2007-2009 Emergency Department Data as of February, 2011

	±	ED	Visits	Population	Average	
Region/County	2007	2008	2009	Total	2008	Rate
<u>Ontario</u>	121	120	162	403	22,408	59.9
Region Total	2,417	2,290	2,574	7,281	277,457	87.5
New York State Total	63,043	60,393	64,812	188,248	4,408,016	142.4

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Age 15-24

Source: 2007-2009 Emergency Department Data as of February, 2011

		ED V	Visits	Population	Average	
Region/County	2007	2008	2009	Total	2008	Rate
<u>Ontario</u>	89	93	100	282	15,063	62.4
Region Total	1,148	1,188	1,231	3,567	196,383	60.5
New York State Total	22,680	22,377	24,191	69,248	2,802,996	82.3

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Age 25-44

Source: 2007-2009 Emergency Department Data as of February, 2011

		ED	Visits	Population	Average	
Region/County	2007	2008	2009	Total	2008	Rate
<u>Ontario</u>	150	133	124	407	26,431	51.3
Region Total	1,795	1,850	2,022	5,667	313,827	60.2
New York State Total	41,128	41,738	41,626	124,492	5,355,235	77.5

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Age 45-64

Source: 2007-2009 Emergency Department Data as of February, 2011

		ED V	Visits	Population	Average	
Region/County	2007	2008	2009	Total	2008	Rate
<u>Ontario</u>	88	74	90	252	29,895	28.1
Region Total	1,156	1,246	1,269	3,671	345,829	35.4
New York State Total	31,416	33,321	34,275	99,012	5,120,254	64.5

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Age 18-64

Source: 2007-2009 Emergency Department Data as of February, 2011

		ED	Visits	Population	Average	
Region/County	2007	2008	2009	Total	2008	Rate
<u>Ontario</u>	311	284	296	891	66,911	44.4
Region Total	3,810	3,988	4,238	12,036	800,713	50.1
New York State Total	89,136	91,833	94,048	275,017	12,474,609	73.5

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Age 65+

Source: 2007-2009 Emergency Department Data as of February, 2011

		ED	Visits		Population	Average
Region/County	2007	2008	2009	Total	2008	Rate
<u>Ontario</u>	26	25	25	76	15,156	16.7
Region Total	327	368	343	1,038	175,797	19.7
New York State Total	7,853	8,534	8,202	24,589	2,607,672	31.4

Asthma Emergency Department (ED) Visits - Rate per 10,000 Population, Total

Source: 2007-2009 Emergency Department Data as of February, 2011

		ED V	Visits		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Average Rate	Average Rate
<u>Ontario</u>	458	429	483	1,370	104,475	43.7	46.6
Region Total	6,554	6,646	7,155	20,355	1,253,967	54.1	57.6
New York State Total	160,032	160,760	167,062	487,854	19,490,297	83.4	86.7

Chronic Lower Respiratory Disease - Deaths and Death Rates Per 100,000 Residents

Source: 2007-2009 Vital Statistics Data as of March, 2011

		De	aths		Population	Crude	Adjusted				
Region/County	2007	2008	2009	Total	2008	Rate	Rate				
Reg-2 Finger Lakes											
Chemung	81	77	88	246	87,813	93.4	71.5				
Livingston	35	40	42	117	63,154	61.8	57.6				
Monroe	259	272	267	798	732,762	36.3	31.2				
Ontario	54	54	51	159	104,475	50.7	42.4				
Schuyler	13	15	11	39	18,888	68.8	52.5				
Seneca	26	23	19	68	34,086	66.5	54.7				
Steuben	69	52	69	190	96,573	65.6	51.3				
Wayne	47	54	59	160	91,564	58.2	54.0				
Yates	16	14	19	49	24,652	66.3	50.0				
Region Total	600	601	625	1,826	1,253,967	48.5	41.2				
New York State Total	6,466	6,841	6,661	19,968	19,490,297	34.2	30.7				

3. Injury, Suicide and Homicide

Suicide - Deaths and Death Rates Per 100,000 Residents

Source: 2007-2009 Vital Statistics Data as of March, 2011

		Dea	ths		Population	Crude	Adjusted
Region/County	2007 2008 2009 Total		2008	Rate	Rate		
<u>Ontario</u>	9	7	12	28	104,475	8.9	8.7
Region Total	118	111	121	350	1,253,967	9.3	8.9
New York State Total	1,375	1,391	1,257	4,023	19,490,297	6.9	6.6

Adolescent/Young Adult Suicide (Age 15-19) - Deaths and Death Rates Per 100,000 Residents Age 15-19

Source: 2007-2009 Vital Statistics Data as of March, 2011

	Deaths			Population	Crude	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	3	0	0	3	6,151	16.3
<u>Livingston</u>	0	0	0	0	5,815	0.0
<u>Monroe</u>	2	0	1	3	60,525	1.7
<u>Ontario</u>	0	0	1	1	7,626	4.4

		Dea	aths	Population	Crude	
Region/County	2007	2008	2009	Total	2008	Rate
Schuyler	0	0	0	0	1,443	0.0
<u>Seneca</u>	0	0	0	0	2,253	0.0
<u>Steuben</u>	0	1	1	2	6,625	10.1
<u>Wayne</u>	0	0	2	2	6,666	10.0
Yates	0	0	0	0	2,107	0.0
Region Total	5	1	5	11	99,211	3.7
New York State Total	54	46	58	158	1,403,050	3.8

Education regarding injury prevention of all age groups in Ontario County is accomplished through various county government departments as well as community based organizations. At the present time, Ontario County Public Health emphasis in this discipline is through education of young families through proper use of child safety car seats. The new 2008 BRFSS data indicates the County is on par with NYS rates of injuries due to falls. With respect to the incidence of unintentional injuries and mortality from unintentional injuries, Ontario County in general has rates higher than the state and the region. Rates related to homicide and assault are lower.

Homicide - Deaths and Death Rates Per 100,000 Residents

Source: 2007-2009 Vital Statistics Data as of March, 2011

		Dea	aths		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	1	4	1	6	87,813	2.3	2.3
Livingston	1	1	1	3	63,154	1.6	1.9
Monroe	54	47	31	132	732,762	6.0	6.0
<u>Ontario</u>	5	1	4	10	104,475	3.2	3.7
Schuyler	0	0	0	0	18,888	0.0	0.0
<u>Seneca</u>	1	0	0	1	34,086	1.0	0.9
Steuben	2	0	1	3	96,573	1.0	1.1
<u>Wayne</u>	2	1	0	3	91,564	1.1	1.1
Yates	0	0	1	1	24,652	1.4	1.7
Region Total	66	54	39	159	1,253,967	4.2	4.3
New York State Total	832	857	804	2,493	19,490,297	4.3	4.3

Self-inflicted Injury - Discharge Rate Per 10,000 Population

Source: 2007-2009 SPARCS Data as of February, 2011

		Discl	narges		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	143	103	119	365	87,813	13.9	14.3
<u>Livingston</u>	39	48	50	137	63,154	7.2	6.8
<u>Monroe</u>	531	652	592	1,775	732,762	8.1	8.1
<u>Ontario</u>	53	63	50	166	104,475	5.3	5.4
Schuyler	9	15	6	30	18,888	5.3	5.4
<u>Seneca</u>	18	16	15	49	34,086	4.8	4.7
<u>Steuben</u>	64	52	64	180	96,573	6.2	6.5

		Discl	narges		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
<u>Wayne</u>	49	58	53	160	91,564	5.8	5.9
Yates	8	9	18	35	24,652	4.7	5.2
Region Total	914	1,016	967	2,897	1,253,967	7.7	7.7
New York State Total	9,420	9,943	9,714	29,077	19,490,297	5.0	4.9

Self-inflicted Injury (Age 15-19) - Discharge Rate Per 10,000 Population Age 15-19

Source: 2007-2009 SPARCS Data as of February, 2011

		Disch	arges		Population	Crude
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	22	15	12	49	6,151	26.6
<u>Livingston</u>	4	5	6	15	5,815	8.6
<u>Monroe</u>	56	79	62	197	60,525	10.8
<u>Ontario</u>	1	13	2	16	7,626	7.0
<u>Schuyler</u>	2	0	2	4	1,443	9.2
<u>Seneca</u>	0	2	0	2	2,253	3.0
<u>Steuben</u>	6	4	8	18	6,625	9.1
<u>Wayne</u>	9	4	7	20	6,666	10.0
Yates	1	2	2	5	2,107	7.9
Region Total	101	124	101	326	99,211	11.0
New York State Total	1,229	1,324	1,299	3,852	1,403,050	9.2

Assault - Discharge Rate Per 10,000 Population Source: 2007-2009 SPARCS Data as of February, 2011

		Discl	narges		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	21	21	24	66	87,813	2.5	2.5
<u>Livingston</u>	6	3	11	20	63,154	1.1	1.0
<u>Monroe</u>	291	310	282	883	732,762	4.0	4.0
<u>Ontario</u>	12	14	10	36	104,475	1.1	1.2
Schuyler	1	1	1	3	18,888	0.5	0.5
<u>Seneca</u>	4	7	4	15	34,086	1.5	1.5
<u>Steuben</u>	9	15	8	32	96,573	1.1	1.2
<u>Wayne</u>	14	15	12	41	91,564	1.5	1.6
<u>Yates</u>	0	4	3	7	24,652	0.9	1.1
Region Total	358	390	355	1,103	1,253,967	2.9	3.0
New York State Total	9,205	9,426	8,860	27,491	19,490,297	4.7	4.7

Unintentional Injury - Deaths and Death Rates Per 100,000 Residents

Source: 2007-2009 Vital Statistics Data as of March, 2011

		De	aths		Population	Crude	Adjusted
Region/County	2007 2008 2009 Total		2008	Rate	Rate		
Chemung	22	39	32	93	87,813	35.3	30.1
<u>Livingston</u>	17	25	20	62	63,154	32.7	29.9
Monroe	203	217	165	585	732,762	26.6	24.0
<u>Ontario</u>	32	40	31	103	104,475	32.9	28.9

		De	aths		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
<u>Schuyler</u>	3	10	4	17	18,888	30.0	27.0
<u>Seneca</u>	13	8	18	39	34,086	38.1	33.8
<u>Steuben</u>	56	36	32	124	96,573	42.8	38.7
Wayne	36	37	28	101	91,564	36.8	35.6
Yates	11	9	7	27	24,652	36.5	35.5
Region Total	393	421	337	1,151	1,253,967	30.6	27.6
New York State Total	4,914	4,988	4,267	14,169	19,490,297	24.2	22.8

Unintentional Injury - Discharge Rate Per 10,000 Population Source: 2007-2009 SPARCS Data as of February, 2011

		Disch	arges	Ž	Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	785	715	769	2,269	87,813	86.1	73.4
<u>Livingston</u>	397	456	449	1,302	63,154	68.7	64.9
<u>Monroe</u>	4,570	4,934	5,130	14,634	732,762	66.6	60.3
<u>Ontario</u>	706	760	759	2,225	104,475	71.0	62.2
<u>Schuyler</u>	149	148	125	422	18,888	74.5	61.9
<u>Seneca</u>	230	270	259	759	34,086	74.2	65.2
<u>Steuben</u>	837	790	815	2,442	96,573	84.3	73.2
<u>Wayne</u>	597	631	638	1,866	91,564	67.9	64.7
<u>Yates</u>	187	212	178	577	24,652	78.0	65.9
Region Total	8,458	8,916	9,122	26,496	1,253,967	70.4	63.2
New York State Total	133,793	134,624	135,969	404,386	19,490,297	69.2	64.6

Unintentional Injury (Age 65+) - Discharge Rate Per 10,000 Population Age 65+

Source: 2007-2009 SPARCS Data as of February, 2011

		Discl	harges		Population	Crude
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	434	403	452	1,289	13,467	319.1
<u>Livingston</u>	197	246	229	672	8,146	275.0
Monroe	2,442	2,598	2,739	7,779	99,525	260.5
<u>Ontario</u>	406	453	445	1,304	15,156	286.8
Schuyler	83	91	83	257	3,027	283.0
<u>Seneca</u>	117	155	152	424	4,989	283.3
<u>Steuben</u>	443	445	462	1,350	15,010	299.8
<u>Wayne</u>	295	337	308	940	12,372	253.3
<u>Yates</u>	106	135	99	340	4,105	276.1
Region Total	4,523	4,863	4,969	14,355	175,797	272.2
New York State Total	65,858	68,098	69,055	203,011	2,607,672	259.5

Unintentional Falls - Discharge Rate Per 10,000 Population Source: 2007-2009 SPARCS Data as of February, 2011

		Discl	narges		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	500	444	490	1,434	87,813	54.4	43.3
<u>Livingston</u>	216	256	252	724	63,154	38.2	35.8
<u>Monroe</u>	2,712	2,918	3,017	8,647	732,762	39.3	34.1
<u>Ontario</u>	449	479	461	1,389	104,475	44.3	37.3
Schuyler	98	93	84	275	18,888	48.5	37.3
<u>Seneca</u>	125	146	165	436	34,086	42.6	35.7
<u>Steuben</u>	496	461	479	1,436	96,573	49.6	40.7
Wayne	329	372	346	1,047	91,564	38.1	35.4
<u>Yates</u>	113	131	107	351	24,652	47.5	38.2
Region Total	5,038	5,300	5,401	15,739	1,253,967	41.8	35.9
New York State Total	75,734	77,511	78,872	232,117	19,490,297	39.7	36.1

Unintentional Falls (Age 25-64) - Discharge Rate Per 10,000 Population Age 25-64

Source: 2007-2009 SPARCS Data as of February, 2011

		Disch	arges		Population	Crude
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	123	103	124	350	46,718	25.0
Livingston	47	58	63	168	32,708	17.1
Monroe	590	681	696	1,967	380,848	17.2
<u>Ontario</u>	101	94	90	285	56,326	16.9
Schuyler	21	17	11	49	10,178	16.0
Seneca	33	27	24	84	18,760	14.9
<u>Steuben</u>	123	115	108	346	52,190	22.1
<u>Wayne</u>	75	77	89	241	49,870	16.1
Yates	29	23	21	73	12,058	20.2
Region Total	1,142	1,195	1,226	3,563	659,656	18.0
New York State Total	19,031	19,310	20,124	58,465	10,475,489	18.6

Unintentional Falls (Age 65-74) - Discharge Rate Per 10,000 Population Age 65-74

Source: 2007-2009 SPARCS Data as of February, 2011

		Discl	narges		Population	Crude
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	71	55	80	206	6,352	108.1
<u>Livingston</u>	31	33	28	92	4,232	72.5
<u>Monroe</u>	336	357	358	1,051	49,123	71.3
<u>Ontario</u>	56	68	84	208	7,868	88.1
Schuyler	13	16	16	45	1,601	93.7
<u>Seneca</u>	10	15	23	48	2,432	65.8
<u>Steuben</u>	67	66	71	204	7,692	88.4
<u>Wayne</u>	40	53	56	149	6,796	73.1
<u>Yates</u>	17	19	13	49	2,153	75.9
Region Total	641	682	729	2,052	88,249	77.5
New York State Total	9,950	10,213	10,911	31,074	1,332,093	77.8

Unintentional Falls (Age 75-84) - Discharge Rate Per 10,000 Population Age 75-84

Source:	2007-2009	SPARCS	Data as o	f February	2011
Dom cc.	2007 2007	DITITUD	Daia as o	i coinai y,	2011

		Disch	arges		Population	Crude
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	152	134	139	425	4,858	291.6
<u>Livingston</u>	62	61	62	185	2,749	224.3
<u>Monroe</u>	786	754	784	2,324	33,389	232.0
<u>Ontario</u>	125	142	113	380	5,076	249.5
<u>Schuyler</u>	26	21	23	70	957	243.8
<u>Seneca</u>	36	39	55	130	1,844	235.0
<u>Steuben</u>	152	135	138	425	5,120	276.7
<u>Wayne</u>	82	114	81	277	3,941	234.3
<u>Yates</u>	31	45	32	108	1,392	258.6
Region Total	1,452	1,445	1,427	4,324	59,326	243.0
New York State Total	20,611	20,659	20,427	61,697	877,625	234.3

Unintentional Falls (Age 85+) - Discharge Rate Per 10,000 Population Age 85+ Source: 2007-2009 SPARCS Data as of February, 2011

500.000		Disch		<u> </u>	Population	Crude
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	133	139	135	407	2,257	601.1
<u>Livingston</u>	60	85	84	229	1,165	655.2
<u>Monroe</u>	841	946	1,020	2,807	17,013	550.0
<u>Ontario</u>	149	154	157	460	2,212	693.2
Schuyler	34	35	31	100	469	710.7
<u>Seneca</u>	40	60	53	153	713	715.3
<u>Steuben</u>	133	123	141	397	2,198	602.1
Wayne	104	107	99	310	1,635	632.0
Yates	30	39	31	100	560	595.2
Region Total	1,524	1,688	1,751	4,963	28,222	586.2
New York State Total	20,609	22,152	22,292	65,053	397,954	544.9

Traumatic Brain Injury - Discharge Rate Per 10,000 Population Source: 2007-2009 SPARCS Data as of February, 2011

		Disch	arges	J	Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	73	54	69	196	87,813	7.4	6.6
<u>Livingston</u>	40	58	52	150	63,154	7.9	7.5
<u>Monroe</u>	514	558	589	1,661	732,762	7.6	7.0
<u>Ontario</u>	60	69	83	212	104,475	6.8	6.0
Schuyler	13	11	9	33	18,888	5.8	5.1
<u>Seneca</u>	19	32	27	78	34,086	7.6	6.9
<u>Steuben</u>	83	83	63	229	96,573	7.9	7.4
<u>Wayne</u>	67	76	70	213	91,564	7.8	7.5
<u>Yates</u>	19	39	23	81	24,652	11.0	10.0
Region Total	888	980	985	2,853	1,253,967	7.6	7.0
New York State Total	18,749	18,712	19,471	56,932	19,490,297	9.7	9.3

Poisoning - Discharge Rate Per 10,000 Population

Source: 2007-2009 SPARCS Data as of February, 2011

		Disch	arges		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	174	146	169	489	87,813	18.6	19.0
<u>Livingston</u>	54	75	75	204	63,154	10.8	10.4
<u>Monroe</u>	790	965	919	2,674	732,762	12.2	12.0
<u>Ontario</u>	77	78	94	249	104,475	7.9	7.7
<u>Schuyler</u>	9	18	11	38	18,888	6.7	6.5
<u>Seneca</u>	31	29	23	83	34,086	8.1	7.6
<u>Steuben</u>	122	97	135	354	96,573	12.2	12.0
<u>Wayne</u>	72	85	77	234	91,564	8.5	8.6
<u>Yates</u>	18	18	23	59	24,652	8.0	7.8
Region Total	1,347	1,511	1,526	4,384	1,253,967	11.7	11.5
New York State Total	18,928	20,235	20,110	59,273	19,490,297	10.1	9.9

Motor Vehicle - Deaths and Death Rates Per 100,000 Residents

Source: 2007-2009 Vital Statistics Data as of March, 2011

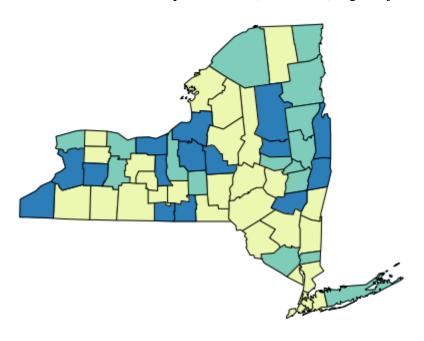
		Dea	ths		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	5	10	4	19	87,813	7.2	7.2
<u>Livingston</u>	9	7	10	26	63,154	13.7	12.2
Monroe	56	30	37	123	732,762	5.6	5.4
<u>Ontario</u>	14	10	6	30	104,475	9.6	9.1
Schuyler	1	1	1	3	18,888	5.3	6.6
<u>Seneca</u>	8	2	5	15	34,086	14.7	13.3
<u>Steuben</u>	24	9	8	41	96,573	14.2	14.1
Wayne	13	13	10	36	91,564	13.1	13.5
Yates	5	4	2	11	24,652	14.9	15.7
Region Total	135	86	83	304	1,253,967	8.1	7.8
New York State Total	1,402	1,240	1,164	3,806	19,490,297	6.5	6.3

Ontario County Public Health distributes car seats and booster seats to low income families through a grant from the New York State Department of Traffic Safety. Seats are purchased with money provided through this grant. One public health nurse has become a certified technician. Certified technicians check seats for proper installation, educate parents on car seat safety, and replace damaged or otherwise inappropriate child safety seats. The agency also assists local law enforcement agencies to provide Child Safety Seat Checkpoints. In the past the health department has partnered with the Geneva Child and Family Resource Center to distribute car seats and booster seats to low-income families.

4. Cancer

The burden of cancer within Ontario County is similar to that of the region and New York State as a whole. Specific cancers that rise to the top, with mortality rates in the 3rd or 4th quartile in Ontario County are lip, oral cavity, and pharynx cancer; lung and bronchus cancer; cervix and ovarian; prostate cancer; and melanoma cancer.

All Cancer Incidence Rate per 100,000 (2007-2009) Age Adjusted



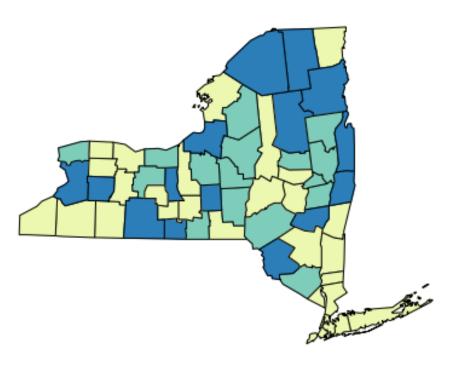


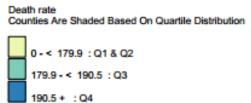
0 - < 515.3 : Q1 & Q2 515.3 - < 532.9 : Q3 532.9 + : Q4

Source: 2007-2009 Cancer Registry Data As Of July, 2012

When considering cancer incidence in Ontario County, overall the county falls within the 1st and second quartile or most favorable. When comparing Ontario County to the rest of the Network counties, Ontario County has much better cancer incidence rates, the lowest of all the counties in the region. As seen below, cancer mortality rates are higher, falling within the 3rd quartile or less favorable.

All Cancers Mortality Rate per 100,000 (2007-2009) Age Adjusted





Source: 2007-2009 Cancer Registry Data As Of July, 2012

As compared to the other counties in the Network, Ontario County has much lower cancer mortality rates. Ontario County has the lowest cancer mortality rate in the region.

Although cancer incidence and mortality rates are better in Ontario County than the rest of the Network region and New York State as a whole, Ontario County still falls within the 3rd quartile for cancer mortality.

Cancer Indicato	rs (NYSDOH) 2007-20	09 - Oı	ntario Co	unty				
Indicator	Data Links	3 Year Total	County		C:~ D:f	NYS Rate exc NYC	Sig.Dif.	County Ranking Group
All cancers	Data Links	Total	Rate	Kate	Sig.Dif.	NIC	Sig.Dii.	
	(Table) (Trend)(Map)	1,915	600.4	536.5	Yes	599.7	No	2nd
Crude incidence per 100,000 Age-adjusted incidence per 100,000	(Table) (Trend)(Map)	1,915		489.6	No		No	2nd 2nd
Crude mortality rate per 100,000	(Table) (Trend)(Map)	732		179.9	Yes		Yes	3rd
Age-adjusted mortality rate per 100,000		732		163.0		173.9		3rd
Lip, Oral Cavity, and Pharynx Cancer	(Table) (Trend)(Map)	132	109.4	105.0	Yes	1/3.9	Yes	Siu
	(Table) (Trand)(Man)	15	14.2	11.5	No	12.7	No	2md
Crude incidence per 100,000	(Table) (Trend)(Map)	45 45	14.3 12.0	11.5	No No	10.8	No No	3rd
Age-adjusted incidence per 100,000	(Table) (Trend)(Map)							3rd
Crude mortality rate per 100,000	(Table) (Trend)(Map)	9		2.3	No	2.4	No	3rd
Age-adjusted mortality rate per 100,000	(Table) (Trend)(Map)	9	2.3*	2.1	No	2.0	No	3rd
Colon and rectum cancer	(T.11) (T. 1) (1.1)	1.45	460	50. 4		50.0	3.7	4 .
Crude incidence per 100,000	(Table) (Trend)(Map)	147	46.8		No	53.9	No	1st
Age-adjusted incidence per 100,000	(Table) (Trend)(Map)	147	39.1	45.8	No	46.2	No	1st
Crude mortality rate per 100,000	(Table) (Trend)(Map)	53		17.4	No	18.5	No	2nd
Age-adjusted mortality rate per 100,000	(Table) (Trend)(Map)	53	14.0	15.7	No	15.7	No	1st
Lung and bronchus cancer	1	t	t		r .			
Crude incidence per 100,000	(Table) (Trend)(Map)	273	86.9	69.8	Yes	83.9	No	2nd
Age-adjusted incidence per 100,000	(Table) (Trend)(Map)	273	71.2	63.8	No	72.2	No	2nd
Crude mortality rate per 100,000	(Table) (Trend)(Map)	234	74.5	46.9	Yes	57.2	Yes	4th
Age-adjusted mortality rate per 100,000	(Table) (Trend)(Map)	234	60.4	42.8	Yes	49.0	Yes	4th
Female breast cancer	·	•			,			
Crude incidence per 100,000	(Table) (Trend)(Map)	260	162.9	147.1	No	164.9	No	3rd
Age-adjusted incidence per 100,000	(Table) (Trend)(Map)	260	127.8	126.9	No	136.1	No	3rd
Crude mortality rate per 100,000	(Table) (Trend)(Map)	37	23.2	26.7	No	28.8	No	1st
Age-adjusted mortality rate per 100,000	(Table) (Trend)(Map)	37	17.6	21.7	No	22.2	No	2nd
Crude late stage incidence per 100,000	(Table) (Trend)(Map)	9	5.6*	8.0	No	8.3	No	1st
Age-adjusted late stage incidence per 100,000	(Table) (Trend)(Map)	9	4.7*	6.8	No	6.8	No	2nd
Cervix uteri cancer								
Crude incidence per 100,000	(Table) (Trend)(Map)	9	5.6*	8.9	No	7.9	No	1st
Age-adjusted incidence per 100,000	(Table) (Trend)(Map)	9	4.1*	8.3	No	7.4	No	1st
Crude mortality rate per 100,000	(Table) (Trend)(Map)	4	2.5*	2.7	No	2.2	No	3rd
Age-adjusted mortality rate per 100,000	(Table) (Trend)(Map)	4	2.0*	2.3	No	1.9	No	3rd
Ovarian cancer								
Crude incidence per 100,000	(Table) (Trend)(Map)	31	19.4	15.2	No	16.5	No	4th
Age-adjusted incidence per 100,000	(Table) (Trend)(Map)	31	15.1	12.9	No	13.4	No	4th
Crude mortality rate per 100,000	(Table) (Trend)(Map)	25	15.7	9.6	Yes	11.0	No	4th
Age-adjusted mortality rate per 100,000	(Table) (Trend)(Map)	25	11.0	7.8	No	8.5	No	4th
Prostate cancer					•			<u> </u>

Cancer Indicator	rs (NYSDOH) 2007-20	09 - Oı	ntario Co	unty				
Indicator	Data Links	3 Year Total	County Rate		Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group
Crude incidence per 100,000	(Table) (Trend)(Map)	297	192.1	169.1	Yes	186.0	No	3rd
Age-adjusted incidence per 100,000	(Table) (Trend)(Map)	297	160.8	166.9	No	171.2	No	3rd
Crude mortality rate per 100,000	(Table) (Trend)(Map)	38	24.6	18.5	No	19.2	No	4th
Age-adjusted mortality rate per 100,000	(Table) (Trend)(Map)	38	25.9	21.6	No	20.8	No	4th
Crude late stage incidence per 100,000	(Table) (Trend)(Map)	13	8.4	6.7	No	6.6	No	3rd
Age-adjusted late stage incidence per 100,000	(Table) (Trend)(Map)	13	7.9	7.2	No	6.6	No	4th
Melanoma cancer mortality								
Crude mortality rate per 100,000	(Table) (Trend)(Map)	11	3.5	2.3	No	3.1	No	3rd
Age-adjusted mortality rate per 100,000	(Table) (Trend)(Map)	11	2.7	2.1	No	2.7	No	3rd
Age-adjusted % of women 18 years and older with pap smear in past 3 years (2008-2009)	(Table) (Map)	N/A	85.6	82.7	No	82.6	No	1st
% of women 40 years and older with mammography screening in past 2 years (2008-2009)	(Table) (Map)	N/A	82.2	79.7	No	81.9	No	1st

Cancer Incidence and Mortality for Ontario County, 2005-2009 Source: New York State Cancer Registry

			lence			Mortality						
		Males]	Females			Males]	Females	
Gu a G	Average Annual	Rate per 100,000	95% CI									
Site of Cancer	Cases	Males	(+/-)	Cases	Females	(+/-)	Deaths	Males	(+/-)	Deaths	Females	(+/-)
All Invasive Malignant Tumors	337.2	597.9	29.2	292.2	438.9	23.1	121.2	227.7	18.5	110.6	157.3	13.4
Oral cavity and pharynx	9.2	15.2	4.5	5.4	8.2	3.1	1.2	2.0	1.6	1.4	2.0	1.5
Esophagus	4.6	7.7	3.2	2.0	3.1	1.9	5.6	9.7	3.6	1.0	1.4	1.3
Stomach	5.4	9.6	3.7	2.2	3.6	2.2	2.6	4.8	2.7	1.6	2.4	1.7
Colorectal	24.6	46.0	8.3	21.8	31.5	6.0	9.0	18.3	5.5	8.2	11.4	3.6
Colon excluding rectum	18.6	34.9	7.2	15.8	23.2	5.2	7.8	16.5	5.3	5.8	8.2	3.0
Rectum & rectosigmoid	6.0	11.1	4.1	6.0	8.2	3.0	1.2	1.8	1.5	2.4	3.2	1.8
Liver / intrahepatic bile duct	4.0	7.1	3.2	1.8	2.5	1.6	3.6	6.1	2.9	2.4	3.1	1.7
Pancreas	8.6	14.9	4.6	9.2	13.3	3.9	8.0	14.0	4.4	7.4	10.3	3.4
Larynx	3.4	5.7	2.7	0.4	0.6	0.8	1.2	2.1	1.7	0.0	0.0	0.0
Lung and bronchus	52.2	94.5	11.7	41.0	60.8	8.4	41.0	74.9	10.5	33.0	48.6	7.5
Melanoma of the skin	19.2	35.4	7.3	13.2	20.4	5.1	2.6	4.1	2.3	0.8	1.1	1.1
Female breast				85.2	128.3	12.5				12.0	17.0	4.4
Cervix uteri				2.8	4.6	2.5				0.8	1.2	1.2
Corpus uterus and NOS				18.0	26.3	5.5				3.4	4.8	2.3
Ovary				11.8	17.6	4.6				6.6	9.1	3.2
Prostate	94.0	158.9	14.7				12.4	26.3	6.7			
Testis	4.2	8.7	3.8				0.2	0.5	0.9			
Urinary bladder (incl. in situ)	26.2	48.1	8.4	8.6	12.2	3.7	4.4	9.3	4.0	2.6	3.2	1.8
Kidney and renal pelvis	14.4	24.4	5.8	6.0	8.9	3.2	3.2	6.3	3.1	3.2	4.5	2.2
Brain and other nervous system	6.0	11.2	4.1	3.4	5.2	2.6	3.8	6.8	3.1	2.2	3.1	1.9

			Incie	dence			Mortality						
		Males]	Females			Males		Females			
	Average Annual	Rate per 100,000	95% CI			Average Annual	Rate per 100,000	95% CI	Average Annual	Rate per 100,000	95% CI		
Site of Cancer	Cases	Males	(+/-)	Cases	Females	(+/-)	Deaths	Males	(+/-)	Deaths	Females	(+/-)	
Thyroid	3.8	7.3	3.4	9.2	16.6	5.0	0.2	0.4	0.8	0.0	0.0	0.0	
Hodgkin lymphoma	2.4	4.7	2.8	1.4	2.7	2.0	0.8	1.1	1.1	0.0	0.0	0.0	
Non-Hodgkin lymphomas	16.4	28.9	6.4	11.8	17.4	4.6	3.6	6.7	3.2	3.8	5.6	2.6	
Multiple myeloma	4.2	7.6	3.3	2.6	3.6	2.0	1.8	3.5	2.3	2.0	2.6	1.7	
Leukemias	10.4	17.9	5.0	7.2	10.2	3.4	5.0	9.8	3.9	3.0	3.9	2.0	

Lip, Oral Cavity, & Pharynx Cancer - Deaths And Death Rates Per 100,000 Residents

Source: 2005-2009 Vital Statistics Data As Of March, 2011

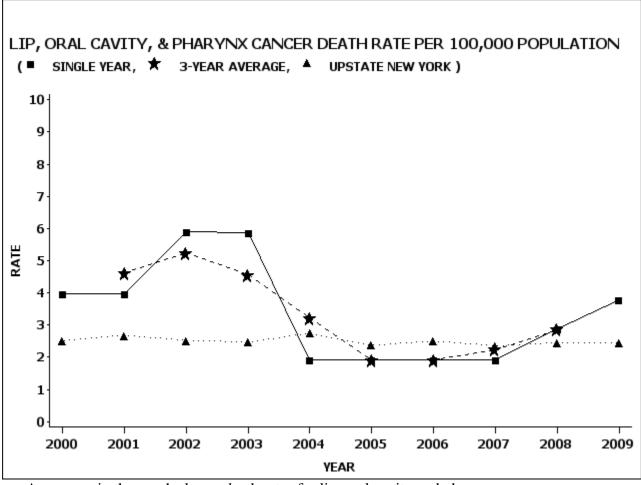
			Dea	aths		Population	Crude	Adjusted	
Region/County	2005	2006	2007	2008	2009	Total	2005-2009	Rate	Rate
Chemung	1	2	3	2	2	10	442,312	2.3	1.9
<u>Livingston</u>	1	0	2	1	2	6	317,599	1.9	1.6
<u>Monroe</u>	21	23	12	16	11	83	3,660,319	2.3	2.0
<u>Ontario</u>	2	2	2	3	4	13	522,895	2.5	2.1
<u>Schuyler</u>	0	0	1	1	0	2	95,392	2.1	1.6
<u>Seneca</u>	0	1	2	2	1	6	171,942	3.5	2.9
<u>Steuben</u>	2	1	7	11	2	23	486,867	4.7	3.7
<u>Wayne</u>	1	6	1	7	3	18	460,644	3.9	3.3
Yates	1	0	0	1	1	3	123,179	2.4	2.4
Region Total	29	35	30	44	26	164	6,281,149	2.6	2.3
New York State Total	458	439	452	448	469	2,266	96,890,292	2.3	2.1

Lip, Oral Cavity, & Pharynx Cancer - Cases and Incidence Rates Per 100,000 Residents Source: 2004-2008 Cancer Registry Data As Of September, 2011

			Ca	ases			Population	Crude	Adjusted
Region/County	2004	2005	2006	2007	2008	Total	2004-2008	Rate	Rate
Chemung	13	12	11	14	13	63	441,841	14.3	11.7
Livingston	8	5	9	10	11	43	316,882	13.6	12.8
Monroe	87	73	70	89	88	407	3,660,094	11.1	10.1
Ontario	10	13	15	9	14	61	518,029	11.8	9.8
Schuyler	4	2	5	4	2	17	94,935	17.9	13.6
Seneca	7	4	8	4	5	28	171,495	16.3	13.9
Steuben	17	8	18	16	20	79	484,552	16.3	13.6
Wayne	10	11	18	5	10	54	459,613	11.7	10.1
Yates	7	2	1	0	4	14	122,765	11.4	9.9
Region Total	163	130	155	151	167	766	6,270,206	12.2	10.7
New York State Total	2,048	1,991	2,083	2,242	2,172	10,536	96,875,954	10.9	10.0

Lip, Oral Cavity, & Pharynx Cancer-Age 45-74-Deaths and Death Rates/100,000 Residents Age 45-74 Source: 2005-2009 Vital Statistics Data As Of March, 2011

			Dea	aths			Population	Crude
Region/County	2005	2006	2007	2008	2009	Total	2005-2009	Rate
Chemung	0	2	2	2	2	8	151,114	5.3
<u>Livingston</u>	1	0	1	1	1	4	105,871	3.8
<u>Monroe</u>	14	16	6	11	5	52	1,219,792	4.3
<u>Ontario</u>	1	1	2	1	3	8	187,979	4.3
Schuyler	0	0	0	1	0	1	35,554	2.8
<u>Seneca</u>	0	0	1	1	0	2	58,294	3.4
<u>Steuben</u>	1	0	6	6	1	14	172,435	8.1
<u>Wayne</u>	1	3	1	5	3	13	165,385	7.9
Yates	0	0	0	0	0	0	43,323	0.0
Region Total	18	22	19	28	15	102	2,139,747	4.8
New York State Total	286	278	297	274	283	1,418	31,522,380	4.5



As seen as in the graph above, death rates for lip, oral cavity and pharynx cancer were high as compared to upstate New York from 2000 to 2003, dropping off in 2004 to the upstate average. Rates stayed consistent through 2007, but have begun to rise again in 2008.

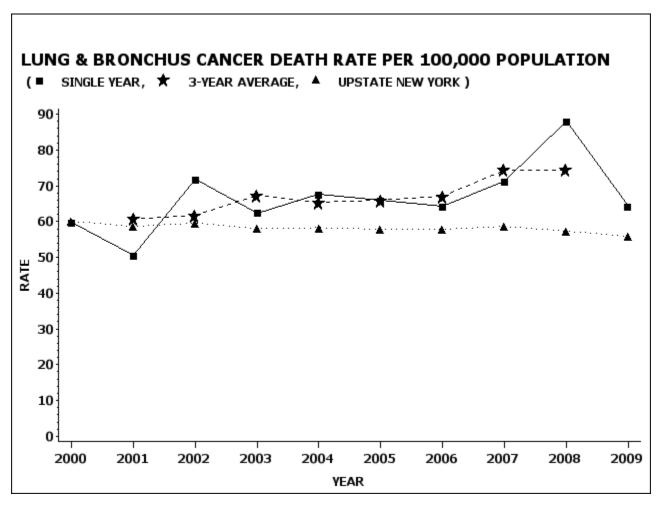
Lung & Bronchus Cancer - Cases and Incidence Rates Per 100,000 Residents Source: 2004-2008 Cancer Registry Data As Of September, 2011

			Ca	ses		Population	Crude	Adjusted	
Region/County	2004	2005	2006	2007	2008	Total	2004-2008	Rate	Rate
Chemung	90	79	96	112	106	483	441,841	109.3	87.5
Livingston	44	45	63	58	42	252	316,882	79.5	75.7
Monroe	508	535	540	528	570	2,681	3,660,094	73.2	67.4
Ontario	81	98	96	99	87	461	518,029	89.0	76.4
Schuyler	22	16	17	13	24	92	94,935	96.9	76.8
Seneca	29	37	38	25	40	169	171,495	98.5	82.6
Steuben	108	100	104	115	104	531	484,552	109.6	89.2
Wayne	63	69	76	85	88	381	459,613	82.9	74.9
Yates	23	18	20	12	25	98	122,765	79.8	63.4
Region Total	968	997	1,050	1,047	1,086	5,148	6,270,206	82.1	73.1
New York State Total	13,011	13,203	13,319	13,443	13,468	66,444	96,875,954	68.6	63.9

Lung & Bronchus Cancer - Deaths and Death Rates Per 100,000 Residents

Source: 2005-2009 Vital Statistics Data As Of March, 2011

			De	aths			Population	Crude	Adjusted
Region/County	2005	2006	2007	2008	2009	Total	2005-2009	Rate	Rate
Chemung	71	73	80	88	71	383	442,312	86.6	69.2
<u>Livingston</u>	44	34	35	39	41	193	317,599	60.8	57.5
<u>Monroe</u>	416	405	436	438	385	2,080	3,660,319	56.8	50.9
<u>Ontario</u>	69	67	74	92	68	370	522,895	70.8	59.7
<u>Schuyler</u>	9	13	9	12	13	56	95,392	58.7	46.0
<u>Seneca</u>	32	21	23	28	17	121	171,942	70.4	58.7
<u>Steuben</u>	67	79	84	96	68	394	486,867	80.9	65.0
<u>Wayne</u>	48	50	61	62	67	288	460,644	62.5	56.0
<u>Yates</u>	10	16	8	11	20	65	123,179	52.8	40.9
Region Total	766	758	810	866	750	3,950	6,281,149	62.9	54.9
New York State Total	9,286	9,189	9,317	9,180	8,918	45,890	96,890,292	47.4	43.5



As seen above, lung and bronchus cancer death rates have consistently been above the upstate rate for Ontario County since 2002, with the highest rate observed in 2008. One major factor in lung and bronchus cancer is smoking/tobacco use, which has traditionally been high within Ontario County. The county's close proximity to Seneca County could be a contributing factor to high smoking rates, due to the presence of the reservation where cigarettes are much less expensive. As stated in the work plan, Ontario County has chosen to focus on reducing hypertension, specifically through healthy eating and physical activity. Efforts to reduce hypertension could also potentially benefit lung and bronchus cancer rates through a concentration on programs focusing on reducing smoking/tobacco use.

Female Breast Cancer - Cases and Incidence Rates Per 100,000 Female Residents

Source: 2004-2008 Cancer Registry Data As Of September, 2011

			Ca	ses			Female Population	Crude	Adjusted
Region/County	2004	2005	2006	2007	2008	Total	2004-2008	Rate	Rate
Chemung	76	72	97	65	62	372	222,583	167.1	132.6
Livingston	44	50	45	60	53	252	158,247	159.2	142.8
Monroe	533	601	612	646	678	3,070	1,886,485	162.7	140.9
Ontario	83	77	88	81	85	414	263,570	157.1	127.2
Schuyler	16	10	18	9	17	70	47,133	148.5	115.3
Seneca	18	33	32	32	37	152	82,604	184.0	146.5
Steuben	73	70	63	77	63	346	246,394	140.4	115.3
Wayne	71	62	65	84	61	343	231,366	148.2	125.3
Yates	18	23	23	22	17	103	62,826	163.9	129.6
Region Total	932	998	1,043	1,076	1,073	5,122	3,201,208	160.0	135.6
New York State Total	13,718	13,862	14,240	14,384	14,566	70,770	49,917,498	141.8	124.3

Female Breast Cancer - Deaths and Death Rates Per 100,000 Female Residents

Source: 2005-2009 Vital Statistics Data As Of March, 2011

			De	aths		J	Population	Crude	Adjusted
Region/County	2005	2006	2007	2008	2009	Total	2005-2009	Rate	Rate
Chemung	20	14	17	12	14	77	222,784	34.6	24.3
<u>Livingston</u>	6	4	10	9	8	37	158,890	23.3	21.0
<u>Monroe</u>	86	101	92	124	112	515	1,884,360	27.3	22.1
<u>Ontario</u>	12	11	8	16	13	60	266,134	22.5	17.2
<u>Schuyler</u>	0	3	0	1	1	5	47,553	10.5	7.4
<u>Seneca</u>	5	4	4	5	6	24	82,665	29.0	22.6
<u>Steuben</u>	20	18	18	18	17	91	247,987	36.7	28.4
<u>Wayne</u>	12	15	11	12	15	65	232,869	27.9	23.1
Yates	6	5	4	6	3	24	63,150	38.0	29.9
Region Total	167	175	164	203	189	898	3,206,392	28.0	22.3
New York State Total	2,840	2,717	2,715	2,639	2,654	13,565	49,886,258	27.2	22.4

Uterine Cervical Cancer - Cases and Incidence Rates Per 100,000 Female Residents

Source: 2004-2008 Cancer Registry Data As Of September, 2011

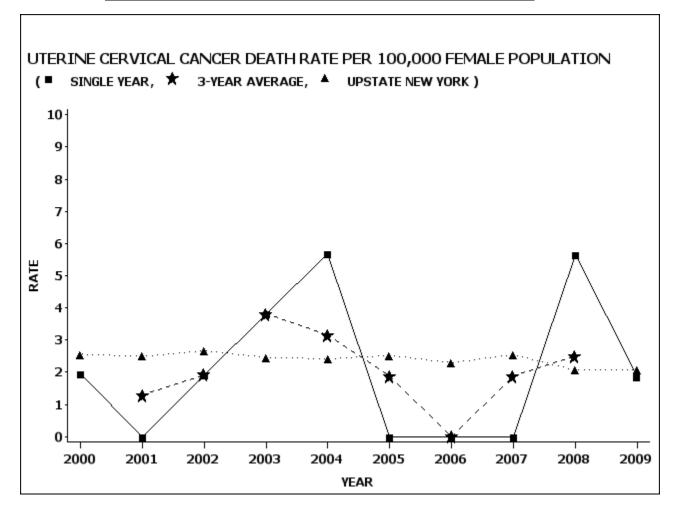
			Ca	ises			Female Population	Crude	Adjusted
Region/County	2004	2005	2006	2007	2008	Total	2004-2008	Rate	Rate
Chemung	1	4	1	4	1	11	222,583	4.9	5.5
Livingston	0	3	2	4	4	13	158,247	8.2	9.3
Monroe	22	27	24	23	25	121	1,886,485	6.4	6.1
Ontario	2	1	4	3	4	14	263,570	5.3	4.9
Schuyler	2	0	0	1	1	4	47,133	8.5	6.1
Seneca	1	1	1	1	2	6	82,604	7.3	6.8
Steuben	8	7	4	4	8	31	246,394	12.6	13.0
Wayne	7	2	3	3	6	21	231,366	9.1	9.1
Yates	1	0	0	0	1	2	62,826	3.2	2.4
Region Total	44	45	39	43	52	223	3,201,208	7.0	6.7

		Cases					Female Population	Crude	Adjusted
Region/County	2004	2005	2006	2007	2008	Total	2004-2008	Rate	Rate
New York State Total	854	973	910	908	898	4,543	49,917,498	9.1	8.5

Uterine Cervical Cancer - Deaths and Death Rates Per 100,000 Female Residents

Source: 2005-2009 Vital Statistics Data As Of March, 2011

			Dea	aths			Population	Crude	Adjusted
Region/County	2005	2006	2007	2008	2009	Total	2005-2009	Rate	Rate
Chemung	1	1	1	0	1	4	222,784	1.8	1.5
<u>Livingston</u>	3	0	0	0	0	3	158,890	1.9	1.7
<u>Monroe</u>	10	7	8	3	7	35	1,884,360	1.9	1.6
<u>Ontario</u>	0	0	0	3	1	4	266,134	1.5	1.3
Schuyler	2	0	0	1	0	3	47,553	6.3	6.2
<u>Seneca</u>	0	1	1	0	1	3	82,665	3.6	3.0
<u>Steuben</u>	1	2	1	2	1	7	247,987	2.8	2.0
<u>Wayne</u>	3	3	0	2	2	10	232,869	4.3	3.7
Yates	0	1	0	0	0	1	63,150	1.6	1.5
Region Total	20	15	11	11	13	70	3,206,392	2.2	1.8
New York State Total	288	275	295	250	252	1,360	49,886,258	2.7	2.4



Uterine cervical cancers rates have fluctuated in Ontario County over the last 10 years, with spikes in 2004 and 2008. As of 2009 rates have been similar to upstate New York rates.

Colorectal Cancer - Deaths and Death Rates Per 100,000 Residents

Source: 2005	-2009 Vital	Statistics	Data As	Of March	2011

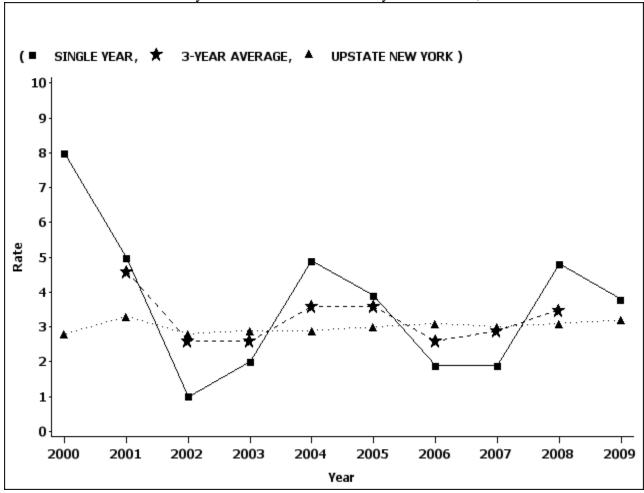
			De	aths		Ĭ	Population	Crude	Adjusted
Region/County	2005	2006	2007	2008	2009	Total	2005-2009	Rate	Rate
Chemung	27	18	17	22	21	105	442,312	23.7	18.3
<u>Livingston</u>	13	11	8	14	8	54	317,599	17.0	15.9
<u>Monroe</u>	125	130	142	137	124	658	3,660,319	18.0	15.6
<u>Ontario</u>	17	16	18	21	14	86	522,895	16.4	13.9
<u>Schuyler</u>	6	5	8	7	5	31	95,392	32.5	24.4
<u>Seneca</u>	6	8	5	10	3	32	171,942	18.6	15.4
<u>Steuben</u>	22	17	18	21	20	98	486,867	20.1	16.2
Wayne	10	14	22	9	18	73	460,644	15.8	14.7
Yates	7	5	4	5	2	23	123,179	18.7	14.4
Region Total	233	224	242	246	215	1,160	6,281,149	18.5	15.8
New York State Total	3,506	3,510	3,437	3,399	3,318	17,170	96,890,292	17.7	16.1

Colorectal Cancer - Cases and Incidence Rates Per 100,000 Residents

Source: 2004-2008 Cancer Registry Data As Of September, 2011

			Cas	ses	Population	Crude	Adjusted		
Region/County	2004	2005	2006	2007	2008	Total	2004-2008	Rate	Rate
Chemung	47	51	56	50	59	263	441,841	59.5	48.1
Livingston	57	43	39	30	39	208	316,882	65.6	62.1
Monroe	408	345	377	383	381	1,894	3,660,094	51.7	46.5
Ontario	61	48	38	38	55	240	518,029	46.3	39.1
Schuyler	17	22	13	15	8	75	94,935	79.0	62.7
Seneca	24	14	19	27	24	108	171,495	63.0	52.3
Steuben	67	58	66	56	59	306	484,552	63.2	51.9
Wayne	47	54	51	61	49	262	459,613	57.0	51.9
Yates	16	18	13	14	9	70	122,765	57.0	44.8
Region Total	744	653	672	674	683	3,426	6,270,206	54.6	47.9
New York State Total	10,782	10,351	10,019	10,109	9,798	51,059	96,875,954	52.7	48.8

Ontario County Melanoma Cancer Mortality Rate Per 100,000



Melanoma mortality rates have also fluctuated over the last 10 years within Ontario County, with the highest rate observed in 2000. In 2004 and 2005 rates were higher than the upstate average, as well as in 2008 and 2009. With an increased focus on prevention, promoting the use of sunscreen and discouraging the use of UV tanning devices over the last five years, public health hopes to start to see a decline in melanoma skin cancer specifically.

5. Infant Mortality

Ontario County maternal child health rates are encouraging. We have relatively similar rates to the Finger Lakes region and New York State for infant mortality, short gestation, post neonatal mortality, neonatal mortality and spontaneous fetal death rates. Some individual rates per year are of a little concern, but figures are statistically inaccurate due to low numbers.

Infant Mortality - Rate Per 1,000 Live Births Source: 2007-2009 Vital Statistics Data As Of March, 2011

	D	eaths -	Births			
Region/County	2007	2008	2009	Total	2007-2009	Rate
Chemung	10	5	9	24	3,035	7.9
<u>Livingston</u>	4	2	2	8	1,765	4.5
<u>Monroe</u>	60	66	73	199	25,965	7.7
<u>Ontario</u>	10	6	9	25	3,281	7.6
<u>Schuyler</u>	2	1	0	3	519	5.8
<u>Seneca</u>	0	2	2	4	1,137	3.5
<u>Steuben</u>	7	6	8	21	3,325	6.3
<u>Wayne</u>	9	8	2	19	3,227	5.9
<u>Yates</u>	2	3	1	6	957	6.3
Region Total	104	99	106	309	43,211	7.2
New York State Total	1,382	1,359	1,296	4,037	748,909	5.4

Neonatal Mortality - Rate Per 1,000 Live Births Source: 2007-2009 Vital Statistics Data As Of March, 2011

Births Deaths <28 Days

Region/County	2007	2008	2009	Total	2007-2009	Rate
Chemung	5	3	5	13	3,035	4.3
<u>Livingston</u>	3	2	2	7	1,765	4.0
<u>Monroe</u>	39	51	52	142	25,965	5.5
<u>Ontario</u>	6	4	8	18	3,281	5.5
<u>Schuyler</u>	2	1	0	3	519	5.8
Seneca	0	2	1	3	1,137	2.6
<u>Steuben</u>	6	3	6	15	3,325	4.5
Wayne	8	5	2	15	3,227	4.6
Yates	1	2	0	3	957	3.1
Region Total	70	73	76	219	43,211	5.1
New York State Total	909	919	886	2,714	748,909	3.6

Postneonatal Mortality - Rate Per 1,000 Live Births

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Death	s >28 I	Births			
Region/County	2007	2008	2009	Total	2007-2009	Rate
Chemung	5	2	4	11	3,035	3.6
<u>Livingston</u>	1	0	0	1	1,765	0.6
<u>Monroe</u>	21	15	21	57	25,965	2.2
<u>Ontario</u>	4	2	1	7	3,281	2.1
<u>Schuyler</u>	0	0	0	0	519	0.0
<u>Seneca</u>	0	0	1	1	1,137	0.9
<u>Steuben</u>	1	3	2	6	3,325	1.8
<u>Wayne</u>	1	3	0	4	3,227	1.2
Yates	1	1	1	3	957	3.1
Region Total	34	26	30	90	43,211	2.1
New York State Total	473	440	410	1,323	748,909	1.8

Spontaneous Fetal Deaths (20+ Weeks Gestation) - Rate Per 1,000 Live Births+Spont Fetal Deaths 20+ WKS

Source: 2007-2009 Vital Statistics Data As Of March, 2011

	Fetal	Death	s 20+ V	Weeks	Births+SFDS	
Region/County	2007	2008	2009	Total	2007-2009	Rate
Chemung	8	5	6	19	3,054	6.2
<u>Livingston</u>	1	5	6	12	1,777	6.8
<u>Monroe</u>	38	34	33	105	26,070	4.0
<u>Ontario</u>	6	6	6	18	3,299	5.5
<u>Schuyler</u>	1	3	2	6	525	11.4
<u>Seneca</u>	1	1	2	4	1,141	3.5
<u>Steuben</u>	13	10	5	28	3,353	8.4
<u>Wayne</u>	3	7	1	11	3,238	3.4
Yates	0	5	2	7	964	7.3
Region Total	71	76	63	210	43,421	4.8
New York State Total	1,673	1,760	1,711	5,144	754,055	6.8

6. Diseases of the Heart, Stroke and Hypertension

Cardiovascular Disease Indicators (NYSDOH) 2008-2010 - Ontario County								
Indicator	Data Links	3 Year Total	County Rate	NYS Rate	Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group
Cardiovascular disease mortality rate per 10	00,000							
Crude	(Table) (Trend)(Map)	887	278.9	289.2	No	302.9	Yes	2nd
Age-adjusted	(Table) (Trend)(Map)	887	218.6	250.9	Yes	244.7	Yes	1st
Premature death (ages 35-64 years)	(Table) (Trend)(Map)	142	104.4	102.0	No	95.3	No	3rd
Pretransport mortality	(Table) (Trend)(Map)	447	140.5	144.1	No	155.9	Yes	2nd
Cardiovascular disease hospitalization rate j	per 10,000							
Crude	(Table) (Trend)(Map)	5,431	170.8	183.3	Yes	184.6	Yes	2nd
Age-adjusted	(Table) (Trend)(Map)	5,431	139.1	165.6	Yes	157.5	Yes	2nd

Cardiovascular D	Disease Indicators (NYS	SDOH)	2008-2010) - Onta	ario Coun	ty		
	D (V)	3 Year	County	NYS	GL DIA	NYS Rate exc	Ci. Die	County Ranking Group
Indicator	Data Links	Total	Rate	Rate	Sig.Dif.	NYC	Sig.Dif.	
Disease of the heart mortality rate per 100,0		670	212.5	220.7	37	242.6	**	2.1
Crude	(Table) (Trend)(Map)	679	213.5		Yes	243.6	Yes	2nd
Age-adjusted	(Table) (Trend)(Map)	679	166.6		Yes	196.5	Yes	1st
Premature death (ages 35-64 years)	(Table) (Trend)(Map)	106	77.9	83.3	No	78.0	No	2nd
Pretransport mortality	(Table) (Trend)(Map)	369	116.0	125.3	No	129.7	Yes	2nd
Disease of the heart hospitalization rate per	<u> </u>	1			1			ſ
Crude	(Table) (Trend)(Map)	3,897	122.5	125.7	No	128.4	Yes	2nd
Age-adjusted	(Table) (Trend)(Map)	3,897	99.4	113.3	Yes	109.2	Yes	2nd
Coronary heart disease mortality rate per 10	00,000	ı			1			
Crude	(Table) (Trend)(Map)	493	155.0	195.6	Yes	180.0	Yes	2nd
Age-adjusted	(Table) (Trend)(Map)	493	121.3	169.4	Yes	145.1	Yes	1st
Premature death (ages 35-64 years)	(Table) (Trend)(Map)	91	66.9	69.0	No	59.9	No	3rd
Pretransport mortality	(Table) (Trend)(Map)	270	84.9	105.2	Yes	99.0	Yes	2nd
Coronary heart disease hospitalization rate	per 10,000		•		-			
Crude	(Table) (Trend)(Map)	1,518	47.7	52.3	Yes	51.6	Yes	2nd
Age-adjusted	(Table) (Trend)(Map)	1,518	38.4	46.9	Yes	43.7	Yes	2nd
Congestive heart failure mortality rate per 1	00,000							
Crude	(Table) (Trend)(Map)	63	19.8	13.3	Yes	19.8	No	3rd
Age-adjusted	(Table) (Trend)(Map)	63	14.8	11.3	No	15.5	No	2nd
Premature death (ages 35-64 years)	(Table) (Trend)(Map)	3	2.2*	1.6	No	2.0	No	3rd
Pretransport mortality	(Table) (Trend)(Map)	38	11.9	7.2	Yes	10.9	No	3rd
Congestive heart failure hospitalization rate	l	Į.		<u> </u>	II			
Crude	(Table) (Trend)(Map)	904	28.4	32.3	Yes	32.2	Yes	2nd
Age-adjusted	(Table) (Trend)(Map)	904	22.6	28.9	Yes	26.9	Yes	1st
Cerebrovascular disease (stroke) mortality i		l			I			
Crude	(Table) (Trend)(Map)	151	47.5	30.5	Yes	39.3	Yes	3rd
Age-adjusted	(Table) (Trend)(Map)	151	37.5	26.7	Yes	31.9	No	4th
Premature death (ages 35-64 years)	(Table) (Trend)(Map)	25	18.4	10.6	Yes	10.5	Yes	4th
Pretransport mortality	(Table) (Trend)(Map)	66	20.8	10.9	Yes	16.5	No	3rd
Cerebrovascular disease (stroke) hospitaliza					11			
Crude	(Table) (Trend)(Map)	939	29.5	27.8	No	29.8	No	3rd
Age-adjusted	(Table) (Trend)(Map)	939	23.8	25.1	No	25.3	No	2nd
	(Table) (Trend)(Map)	85	3.4	7.9	Yes	5.3	Yes	2nd
10,000 (ages 18 years and older)		63	3.4	7.9	168	5.5	168	2110
Age-adjusted % of adults with physician diagnosed angina, heart attack or stroke # (2008-2009)		N/A	7.8	7.6	No	7.2	No	2nd
Age-adjusted % of adults with cholesterol checked in the last 5 years # (2008-2009)	(Table) (Map)	N/A	77.5	77.3	No	79.3	No	2nd
Age-adjusted % of adults ever told they have high blood pressure (2008-2009)	(Table) (Map)	N/A	29.7	25.7	No	27.1	No	3rd

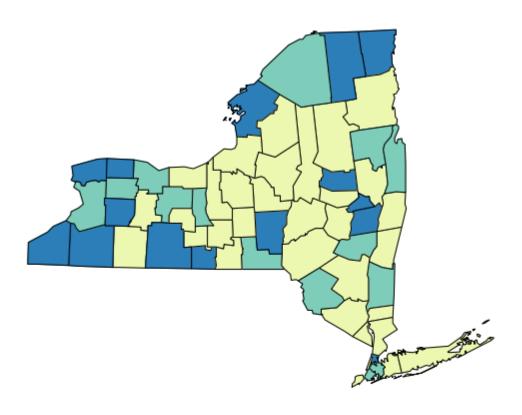
As stated in the work plan, Ontario County has chosen to focus on hypertension within the chronic disease category. Although hypertension hospitalization rates in Ontario County are low as compared to the upstate New York average, rates have steadily increased over the last 12 years. In 2000 the rate of hypertension hospitalizations per 100,000 was 2.0, increasing to 3.2 in 2010, almost a 40% increase (37.5%). To deter a further increase in hypertension and reduce the prevalence of the disease overall, measures must be implemented now.

Year

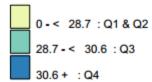
0.0

Age-adjusted percentage of adults with physician diagnosed angina, heart attack or stroke Source: 2008-2009 NYS Expanded Behavioral Risk Factor Surveillance System Data as of 2010.

	Percentage
Region/County	(CI)
Reg- 2 Finger Lakes	
Chemung	11.2 (7.2-15.2)
Livingston	7.7 (5.6-9.8)
Monroe	5.9 (4.0-7.7)
Ontario	7.8 (5.6-10.1)
Schuyler	7.5 (5.6-9.5)
Seneca	9.1 (7.0-11.3)
Steuben	7.4 (5.4-9.3)
Wayne	8.1 (5.6-10.7)
Yates	5.8 (4.1-7.5)
New York State Total	7.6 (6.4-8.7)



Age-adjusted percentage of adults Counties Are Shaded Based On Quartile Distribution



Source: 2008-2009 NYS Expanded Behavioral Risk Factor Surveillance System Data as of 2010

Cerebrovascular Disease (Stroke) - Deaths and Death Rates Per 100,000 Residents Source: 2007-2009 Vital Statistics Data as of March, 2011

		De	aths		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	56	54	43	153	87,813	58.1	42.2
<u>Livingston</u>	23	27	32	82	63,154	43.3	39.8
<u>Monroe</u>	335	309	326	970	732,762	44.1	35.8
<u>Ontario</u>	47	45	52	144	104,475	45.9	37.7
<u>Schuyler</u>	5	11	6	22	18,888	38.8	29.6
<u>Seneca</u>	12	15	17	44	34,086	43.0	34.5
<u>Steuben</u>	50	37	37	124	96,573	42.8	33.3
<u>Wayne</u>	35	35	35	105	91,564	38.2	33.8
<u>Yates</u>	10	7	12	29	24,652	39.2	29.1
Region Total	573	540	560	1,673	1,253,967	44.5	36.2
New York State Total	5,882	5,882	5,823	17,587	19,490,297	30.1	26.3

Diseases of the Heart - Deaths and Death Rates Per 100,000 Residents Source: 2007-2009 Vital Statistics Data as of March, 2011

		De	aths		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	234	237	206	677	87,813	257.0	191.1
<u>Livingston</u>	135	127	105	367	63,154	193.7	175.7
<u>Monroe</u>	1,522	1,492	1,434	4,448	732,762	202.3	164.8
<u>Ontario</u>	205	224	226	655	104,475	209.0	168.6
<u>Schuyler</u>	49	55	51	155	18,888	273.5	200.8
<u>Seneca</u>	92	70	77	239	34,086	233.7	187.7
<u>Steuben</u>	254	234	241	729	96,573	251.6	194.3
<u>Wayne</u>	196	196	184	576	91,564	209.7	188.8
<u>Yates</u>	59	70	55	184	24,652	248.8	186.7
Region Total	2,746	2,705	2,579	8,030	1,253,967	213.5	173.1
New York State Total	49,312	49,133	46,312	144,757	19,490,297	247.6	214.2

Coronary Heart Disease - Deaths and Death Rates Per 100,000 Residents Source: 2007-2009 Vital Statistics Data as of March, 2011

		De	aths		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	153	149	137	439	87,813	166.6	125.3
<u>Livingston</u>	111	83	72	266	63,154	140.4	127.0
<u>Monroe</u>	1,071	998	965	3,034	732,762	138.0	113.4
<u>Ontario</u>	138	154	171	463	104,475	147.7	119.4
<u>Schuyler</u>	40	36	37	113	18,888	199.4	146.7
<u>Seneca</u>	60	44	47	151	34,086	147.7	118.9
<u>Steuben</u>	173	158	177	508	96,573	175.3	135.8
<u>Wayne</u>	153	144	130	427	91,564	155.4	139.0
<u>Yates</u>	40	49	41	130	24,652	175.8	133.4
Region Total	1,939	1,815	1,777	5,531	1,253,967	147.0	119.9

New York State Total 40,450	40,364 37,987	118,801	19,490,297	203.2	175.8
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Cardiovascular Disease - Discharge Rate Per 10,000 Population Source: 2007-2009 SPARCS Data as of February, 2011

		Discharges			Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	1,792	1,792	1,637	5,221	87,813	198.2	162.1
Livingston	1,189	1,154	1,123	3,466	63,154	182.9	170.3
<u>Monroe</u>	12,616	12,649	12,966	38,231	732,762	173.9	153.6
<u>Ontario</u>	1,898	1,857	1,926	5,681	104,475	181.3	152.5
Schuyler	307	361	323	991	18,888	174.9	136.7
<u>Seneca</u>	727	638	663	2,028	34,086	198.3	168.6
<u>Steuben</u>	1,874	1,819	1,858	5,551	96,573	191.6	155.7
<u>Wayne</u>	1,745	1,816	1,809	5,370	91,564	195.5	175.5
Yates	518	539	493	1,550	24,652	209.6	167.4
Region Total	22,666	22,625	22,798	68,089	1,253,967	181.0	156.9
New York State Total	364,474	362,932	359,887	1,087,293	19,490,297	186.0	168.7

Cerebrovascular Disease (Stroke) - Discharge Rate Per 10,000 Population Source: 2007-2009 SPARCS Data as of February, 2011

		Discl	narges		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	330	317	281	928	87,813	35.2	28.4
<u>Livingston</u>	165	174	184	523	63,154	27.6	25.8
<u>Monroe</u>	1,944	1,997	2,215	6,156	732,762	28.0	24.6
<u>Ontario</u>	309	304	347	960	104,475	30.6	25.7
<u>Schuyler</u>	55	53	63	171	18,888	30.2	24.1
<u>Seneca</u>	94	97	109	300	34,086	29.3	24.3
<u>Steuben</u>	282	276	299	857	96,573	29.6	23.8
<u>Wayne</u>	253	261	302	816	91,564	29.7	26.6
Yates	85	83	69	237	24,652	32.0	25.1
Region Total	3,517	3,562	3,869	10,948	1,253,967	29.1	25.1
New York State Total	54,351	53,789	54,479	162,619	19,490,297	27.8	25.2

Hypertension (Age 18+) - Discharge Rate Per 10,000 Population

Source: 2007-2009 SPARCS Data as of February, 2011

		Disch	arges		Population	Crude
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	44	55	45	144	68,880	7.0
<u>Livingston</u>	10	8	11	29	51,102	1.9
<u>Monroe</u>	210	212	240	662	567,858	3.9
<u>Ontario</u>	22	30	28	80	82,067	3.2
Schuyler	3	4	9	16	15,030	3.5
<u>Seneca</u>	8	10	7	25	27,219	3.1
<u>Steuben</u>	24	28	26	78	75,258	3.5
<u>Wayne</u>	9	15	17	41	70,154	1.9
Yates	5	5	4	14	18,942	2.5
Region Total	335	367	387	1,089	976,510	3.7

New York State Total	10,877	11,739	12,055	34,671	15,082,281	7.7
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7. Oral Health

The need for dental health education, and dental services, continues to be strong. Ontario County conducted a needs assessment from late January through March 2009 in which survey respondents were asked their opinion of the county's needs from three (3) different perspectives:

- personal needs areas of need for them, personally
- community needs areas where they perceived general needs in the county
- unmet needs specific areas of greatest unmet needs in the county

The oral health indicators for Ontario County show that those 3rd grade children of low socioeconomic status have poorer rates across the board than those with a high socioeconomic status. Third grade children had a rate of 48.2 of caries experience compared to 45.4 for the NYS rate of 54.1 (excluding NYC).

Oral Health Indicat	ors (NYSDOH) 2009-2	2011 - O	ntario Co	unty				
Indicator	Data Links	3 Year Total	County Rate		Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group
Oral health survey of 3rd grade children			I.					
% of 3rd grade children with caries experience #	(Table) (Map)	N/A	48.2	N/A	N/A	45.4	Yes	3rd
% of 3rd grade children with untreated caries #	(Table) (Map)	N/A	17.4	N/A	N/A	24.0	Yes	1st
% of 3rd grade children with dental sealants #	(Table) (Map)	N/A	42.8	N/A	N/A	41.9	Yes	2nd
% of 3rd grade children with dental insurance #	(Table) (Map)	N/A	83.1	N/A	N/A	81.8	Yes	2nd
% of 3rd grade children with at least one dental visit in last year #	(Table) (Map)	N/A	88.4	N/A	N/A	83.4	Yes	4th
% of 3rd grade children reported taking fluoride tablets regularly #	(Table) (Map)	N/A	32.1	N/A	N/A	41.9	Yes	1st
Age-adjusted % of adults who had a dentist visit within the past year # (2008-2009)	(Table) (Map)	N/A	75.8	71.1	No	72.7	No	1st
Caries emergency department visit rate per 10,000 (ages 3-5 years) (2008-2010)	(Table) (Trend)(Map)	87	82.2	65.8	No	69.9	No	3rd
Medicaid oral health indicators						•	•	
% of Medicaid enrollees with at least one dental visit within the last year # (2008-2010)	(Table) (Trend)(Map)	12,034	26.1	31.3	Yes	29.4	Yes	3rd
% of Medicaid enrollees with at least one preventive dental visit within the last year # (2008-2010)	(Table) (Trend)(Map)	9,743	21.1	25.9	Yes	23.4	Yes	2nd
% of Medicaid enrollees (ages 2-20 years) who had at least one dental visit within the last year # (2008-2010)	(Table) (Trend)(Map)	5,780	37.4	40.8	Yes	40.5	Yes	3rd
Oral cancer	•		·		•		•	
Age-adjusted incidence per 100,000 (2007-2009)	(Table) (Trend)(Map)	45	12.0	10.4	No	10.8	No	3rd
Age-adjusted mortality rate per 100,000 (2007-2009)	(Table) (Trend)(Map)	9	2.3*	2.1	No	2.0	No	3rd
Mortality per 100,000 (ages 45-74 years) (2007-2009)	(Table) (Trend)(Map)	6	5.0*	4.4	No	4.2	No	3rd

8. Obesity

As stated in the Executive Summary, Ontario County has chosen to focus on chronic disease, specifically obesity over the next three years. Obesity has been a growing epidemic both national and within New York State over the last decade. Prevention strategies, education and evidenced based/best practices must be implemented now to help deter this epidemic from growing any further. The health factors and conditions that accompany obesity (hypertension, heart disease, stroke, diabetes, etc.) heavily burden the health care system, making quality, affordable care even more difficult to provide to the population as a whole.

Obesity and Related Indicat	ors (NYSDOH) 2008-2	2010 - C	ntario C	ounty				
Indicator	Data Links	3 Year Total	County Rate	NYS Rate	Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group
All students (elementary - PreK, K, 2nd and 4th grades, middle -					<u>orçazırı</u>	1(10	Signation	
% overweight but not obese (85th-less than 95th percentile) #	(Table) (Map)	N/A	13.7	N/A	N/A	14.7	N/A	3rd
% obese (95th percentile or higher) #	(Table) (Map)	N/A	17.4	N/A	N/A	16.5	N/A	3rd
% overweight or obese (85th percentile or higher) #	(Table) (Map)	N/A	31.1	N/A	N/A	31.3	N/A	2nd
Elementary students (PreK, K, 2nd and 4th grades)	-				ı		ı	
% overweight but not obese (85th-less than 95th percentile) #	(Table) (Map)	N/A	12.0	N/A	N/A	13.3	N/A	3rd
% obese (95th percentile or higher) #	(Table) (Map)	N/A	14.9	N/A	N/A	15.2	N/A	3rd
% overweight or obese (85th percentile or higher) #	(Table) (Map)	N/A	26.8	N/A	N/A	28.5	N/A	2nd
Middle and high school students (7th and 10th grades)								
% overweight but not obese (85th-less than 95th percentile) #	(Table) (Map)	N/A	16.1	N/A	N/A	16.6	N/A	3rd
% obese (95th percentile or higher) #	(Table) (Map)	N/A	20.7	N/A	N/A	18.3	N/A	3rd
% overweight or obese (85th percentile or higher) #	(Table) (Map)	N/A	36.8	N/A	N/A	34.9	N/A	3rd
% of pregnant women in WIC who were pre-pregnancy overweight but not obese (BMI 25-less than 30)~	(Table) (Trend)(Map)	350	23.7	26.6	Yes	26.3	Yes	2nd
% of pregnant women in WIC who were pre-pregnancy obese (BMI 30 or higher)~	(Table) (Trend)(Map)	428	29.0	23.4	Yes	26.7	No	2nd
% obese (95th percentile or higher) children in WIC (ages 2-4 years)	(Table) (Trend)(Map)	396	15.1	14.5	No	15.2	No	3rd
% of children in WIC viewing TV 2 hours or less per day (ages 0-4 years)	(Table) (Trend)(Map)	2,021	79.6	78.6	No	80.7	No	2nd
% of WIC mothers breastfeeding at 6 months	(Table) (Trend)(Map)	208	20.7	39.7	Yes	28.7	Yes	2nd
Age-adjusted % of adults overweight or obese (BMI 25 or higher) (2008-2009)	(Table) (Map)	N/A	56.4	59.3	No	60.6	No	1st
Age-adjusted % of adults obese (BMI 30 or higher) (2008-2009)	(Table) (Map)	N/A	23.1	23.1	No	24.3	No	1st
Age-adjusted % of adults who did not participate in leisure time physical activity in last 30 days (2008-2009)	(Table) (Map)	N/A	82.1	76.3	No	78.9	No	4th
Age-adjusted % of adults eating 5 or more fruits or vegetables per day (2008-2009)	(Table) (Map)	N/A	32.9	27.1	No	27.7	No	1st
Age-adjusted % of adults with physician diagnosed diabetes (2008-2009)	(Table) (Map)	N/A	7.4	9.0	No	8.5	No	1st
Age-adjusted % of adults with physician diagnosed angina, heart attack or stroke # (2008-2009)	(Table) (Map)	N/A	7.8	7.6	No	7.2	No	2nd
Age-adjusted mortality rate per 100,000								
Cardiovascular disease mortality	(Table) (Trend)(Map)	887	218.6	250.9	Yes	244.7	Yes	1st

Cerebrovascular disease (stroke) mortality	(Table) (Trend)(Map)	151	37.5	26.7	Yes	31.9	No	4th
Diabetes mortality	(Table) (Trend)(Map)	62	15.9	16.6	No	14.9	No	2nd
Age-adjusted hospitalization rate per 100,000								
Cardiovascular disease hospitalizations	(Table) (Trend)(Map)	5,431	139.1	165.6	Yes	157.5	Yes	2nd
Cerebrovascular disease (stroke) hospitalizations	(Table) (Trend)(Map)	939	23.8	25.1	No	25.3	No	2nd
Diabetes hospitalizations (primary diagnosis)	(Table) (Trend)(Map)	390	11.0	19.0	Yes	14.3	Yes	2nd

Age-Adjusted Percentage of Adults Who Did Not Participate in Leisure Time Physical Activity in the Last 30 Days 2008-2009

Although obesity rates as a whole for adults in Ontario County is better than national and state rates, the number of adults participating in no leisure time physical activity is very high, falling in the fourth quartile. Ontario County has the highest number of sedentary adults in the Network region.

Percentage overweight or obese (85th percentile or higher) - Elementary students Source:2008-2010 Student Weight Status Category Reporting System Data as of July, 2012

	Percentage
Region/County	
Reg- 2 Finger La	akes
Chemung	27.1
Livingston	24.2
Monroe	22.4
Ontario	26.8
Schuyler	26.2
Seneca	32.7
Steuben	19.5
Wayne	24.6
Yates	26.4

Percentage overweight or obese (85th percentile or higher) - Middle and high school students Source:2008-2010 Student Weight Status Category Reporting System Data as of July, 2012

	Percentage
Region/County	
Reg- 2 Finger La	akes
Chemung	38.5
Livingston	26.3
Monroe	34.9
Ontario	36.8
Schuyler	28.4
Seneca	39.6
Steuben	33.8
Wayne	30.5
Yates	36.1

Percentage overweight or obese (85th percentile or higher) - All students (elementary, middle and high school)

Source: 2008-2010 Student Weight Status Category Reporting System Data as of July, 2012

	Percentage
Region/County	
Reg- 2 Finger La	akes
Chemung	31.5
Livingston	25.1
Monroe	28.0
Ontario	31.1
Schuyler	27.1
Seneca	35.8
Steuben	25.6
Wayne	27.0
Yates	30.8

Although adult obesity rates for Ontario County are not particularly high, rates for school aged children are concerning. Ontario County stands as the second highest county in the Network region in overall percent of students overweight or obese (31.1%). Ontario County is also second highest in the Network region percent of overweight or obese elementary and middle and high school students categorized separately with 26.8% and 36.8% respectively.

Children in WIC Viewing TV <=2 Hours per Day 0-4 years(Low SES) - Per Children Tested Source: 2007-2009 Division of Nutrition Data as of April, 2011

	Children in WIC Viewing TV <=2 Hours per Day 0-4 years(Low SES)								
Region/County	Total 2007-2009	Per Children Tested 2007-2009	Percent						
Ontario	2,012	2,469	81.5						
Region Total	29,269	35,762	81.8						
New York State Total	545,682	694,948	78.5						

WIC Children (AGE 0-4) Who are Underweight - Per Children Tested Source: 2007-2009 Division of Nutrition Data as of April, 2011

	WIC Children (AGE 0-4) Who are Underweight								
Region/County	Total 2007-2009	Per Children Tested 2007-2009	Percent						
Ontario	59	5,363	1.1						
Region Total	2,555	74,299	3.4						
New York State Total	64,109	1,439,589	4.5						

WIC Children (Age 2-4) Who are Obese - Per Children Tested Source: 2007-2009 Division of Nutrition Data as of April, 2011

	WIC Children (Age 2-4) Who are Obese								
Region/County	Total 2007-2009	Per Children Tested 2007-2009	Percent						
Ontario	374	2,544	14.7						
Region Total	4,752	34,068	13.9						
New York State Total	91,610	630,700	14.5						

Children (6 Months-4 Years) Who are Anemic - Per Children Tested Source: 2007-2009 Division of Nutrition Data as of April, 2011

	Children (6 Months-4 Years) Who are Anemic								
Region/County	Total 2007-2009	Percent							
Ontario	759	3,892	19.5						
Region Total	6,656	54,173	12.3						
New York State Total	126,742	1,060,232	12.0						

WIC Children (6 Months) Who were breastfed - Per Children Tested Source: 2007-2009 Division of Nutrition Data as of April, 2011

	WIC Children (6 Months) Who were breastfed								
Region/County	Total 2007-2009								
Ontario	200	986	20.3						
Region Total	2,599	13,405	19.4						
New York State Total	105,914	260,612	40.6						

As stated in the Action Plan, Ontario County has chosen to focus on chronic disease, specifically obesity over the next three years. Ontario County must implement preventative measures now to help fight the obesity epidemic and stop obesity rates from increasing.

9. Cirrhosis/Diabetes

Although diabetes rates within Ontario County are similar or lower than upstate New York and state rates as a whole, rates within the county have risen since 2008. With obesity being a major risk factor for developing diabetes, Ontario County choosing obesity as a priority to work on over the next three years, will hope to decrease diabetes rates as well.

Cirrhosis/Diabetes Indicators (NYSDOH) 2008-2010 - Ontario County								
		3 Year	County	NYS		NYS Rate exc		County Ranking
Indicator	Data Links	Total	Rate	Rate	Sig.Dif.	NYC	Sig.Dif.	<u>Group</u>
Cirrhosis mortality rate per 100,000								
Crude	(Table) (Trend) (Map)	32	10.1	6.9	No	7.7	No	3rd
Age-adjusted	(Table) (Trend) (Map)	32	8.0	6.2	No	6.6	No	3rd
Cirrhosis hospitalization rate per 10,000								

Cirrhosis/Diabetes Indicators (NYSDOH) 2008-2010 - Ontario County									
Indicator	Data Links	3 Year Total	County Rate	NYS Rate	Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group	
Crude	(Table) (Trend) (Map)	69	2.2	2.9	Yes	2.5	No	2nd	
Age-adjusted	(Table) (Trend) (Map)	69	2.0	2.7	Yes	2.2	No	2nd	
Diabetes mortality rate per 100,000									
Crude	(Table) (Trend) (Map)	62	19.5	18.6	No	17.7	No	2nd	
Age-adjusted	(Table) (Trend) (Map)	62	15.9	16.6	No	14.9	No	2nd	
Diabetes hospitalization rate per 10,000 (p	rimary diagnosis)							•	
Crude	(Table) (Trend) (Map)	390	12.3	20.3	Yes	15.5	Yes	1st	
Age-adjusted	(Table) (Trend) (Map)	390	11.0	19.0	Yes	14.3	Yes	2nd	
Diabetes hospitalization rate per 10,000 (a	Diabetes hospitalization rate per 10,000 (any diagnosis)								
Crude	(Table) (Trend) (Map)	6,678	210.0	248.7	Yes	228.9	Yes	1st	
Age-adjusted	(Table) (Trend) (Map)	6,678	174.4	226.1	Yes	198.2	Yes	1st	
Age-adjusted % of adults with physician diagnosed diabetes (2008-2009)	(Table) (Map)	N/A	7.4	9.0	No	8.5	No	1st	

Diabetes (Primary Diagnosis) - Discharge Rate Per 10,000 Population Source: 2007-2009 SPARCS Data as of February, 2011

	Discharges				Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	234	209	189	632	87,813	24.0	21.9
Livingston	69	72	57	198	63,154	10.5	10.1
Monroe	1,069	1,193	1,169	3,431	732,762	15.6	14.9
Ontario	141	116	124	381	104,475	12.2	11.1
Schuyler	15	23	13	51	18,888	9.0	7.9
Seneca	32	38	38	108	34,086	10.6	9.8
Steuben	167	170	153	490	96,573	16.9	15.5
Wayne	105	121	119	345	91,564	12.6	11.9
Yates	26	23	31	80	24,652	10.8	9.6
Region Total	1,858	1,965	1,893	5,716	1,253,967	15.2	14.3
New York State Total	40,454	39,941	39,491	119,886	19,490,297	20.5	19.3

Diabetes (Any Diagnosis) - Discharge Rate Per 10,000 Population

Source: 2007-2009 SPARCS Data as of February, 2011

		Disc	harges	Population	Crude	Adjusted	
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	2,782	2,777	2,743	8,302	87,813	315.1	265.0
Livingston	1,355	1,350	1,464	4,169	63,154	220.0	205.5
Monroe	15,005	16,410	17,164	48,579	732,762	221.0	199.6
Ontario	2,204	2,197	2,260	6,661	104,475	212.5	181.8
Schuyler	418	478	387	1,283	18,888	226.4	177.4
Seneca	717	747	723	2,187	34,086	213.9	183.5
Steuben	2,452	2,412	2,460	7,324	96,573	252.8	209.1
Wayne	1,929	1,992	2,121	6,042	91,564	220.0	196.6
Yates	553	594	606	1,753	24,652	237.0	192.3
Region Total	27,415	28,957	29,928	86,300	1,253,967	229.4	202.7
New York State Total	467,111	477,584	484,681	1,429,376	19,490,297	244.5	223.5

10. Tobacco/Alcohol/Substance Abuse

Tobacco, Alcohol and Other Substance Abuse Indicators (NYSDOH) 2008-2010 - Ontario County									
Indicator	Data Links	3 Year Total	County Rate	NYS Rate	Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group	
Drug-related hospitalization rate per 10,000	1								
Crude	(Table) (Trend) (Map)	379	11.9	27.3	Yes	21.2	Yes	1st	
Age-adjusted	(Table) (Trend) (Map)	379	12.2	27.2	Yes	21.8	Yes	1st	
Newborn drug-related hospitalization rate per 10,000 newborn discharges	(Table) (Trend) (Map)	17	56.2	64.0	No	78.4	No	3rd	
Alcohol related motor vehicle injuries and deaths per 100,000	(Table) (Trend) (Map)	159	50.0	36.2	Yes	50.0	No	2nd	
Age-adjusted % of adults who smoke cigarettes (2008-2009)	(Table) (Map)	N/A	20.0	17.0	No	18.9	No	2nd	
Age-adjusted % of adults living in homes where smoking is prohibited (2008-2009)	(Table) (Map)	N/A	79.2	80.9	No	79.3	No	2nd	
Age-adjusted % of adults who binge drink (2008-2009)	(Table) (Map)	N/A	21.0	18.1	No	19.8	No	3rd	

Tobacco and alcohol use stands as a problem in Ontario County. The percent of adults who smoke cigarettes stands at 20.0%, higher than both the New York state and upstate New York rate. Alcohol statistics are even worse with the percentage of adults who binge drink standing at 21.0%, again higher than the New York state and upstate New York rate. With Ontario County being so close in proximity to Seneca County, where a reservation is located, this could be contributing to the number of adults smoking cigarettes.

Drug-Related - Discharge Rate Per 10,000 Population Source: 2007-2009 SPARCS Data as of February, 2011

<u>Ontario</u>	148	131	127	406	104,475	13.0	12.9
Region Total	2,230	1,961	2,162	6,353	1,253,967	16.9	17.0
New York State Total	54,106	54,953	54,192	163,251	19,490,297	27.9	28.0

11. HIV/AIDS and Sexually Transmitted Infections

HIV/AIDS and Other Sexually Transmitted Infection Indicators (NYSDOH) 2008-2010 - Ontario County										
Indicator	Data Links	3 Year Total	County Rate	NYS Rate	Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group		
HIV case rate per 100,000										
Crude	(Table) (Trend)(Map)	7	2.2*	21.4	Yes	7.4	Yes	1st		
AIDS case rate per 100,000										
Crude	(Table) (Trend)(Map)	3	0.9*	17.6	Yes	5.6	Yes	1st		
AIDS mortality rate per 100,000										
Crude	(Table) (Trend)(Map)	1	0.3*	5.7	Yes	1.7	No	1st		
Age-adjusted	(Table) (Trend)(Map)	1	0.3*	5.3	Yes	1.6	Yes	1st		
Early syphilis case rate per 100,000	(Table) (Trend)(Map)	0	0.0*	12.8	Yes	2.5	Yes	1st		
Gonorrhea case rate per 100,000										

HIV/AIDS and Other	Sexually Transmitted In	nfection In	dicators (N	YSDOH)	2008-201	0 - Ontario Co	ounty	
Indicator	Data Links	3 Year Total	County Rate	NYS Rate	Sig.Dif.	NYS Rate exc NYC	Sig.Dif.	County Ranking Group
All ages	(Table) (Trend)(Map)	52	16.3	89.7	Yes	55.7	Yes	2nd
Ages 15-19 years	(Table) (Trend)(Map)	7	29.9*	335.5	Yes	210.3	Yes	2nd
Chlamydia case rate per 100,000 males								
All ages	(Table) (Trend)(Map)	167	107.0	305.1	Yes	178.9	Yes	2nd
Ages 15-19 years	(Table) (Trend)(Map)	47	396.7	1,013.5	Yes	586.9	Yes	3rd
Ages 20-24 years	(Table) (Trend)(Map)	72	677.1	1,410.1	Yes	920.6	Yes	2nd
Chlamydia case rate per 100,000 females								
All ages	(Table) (Trend)(Map)	450	277.9	644.6	Yes	426.2	Yes	2nd
Ages 15-19 years	(Table) (Trend)(Map)	215	1,860.2	3,587.6	Yes	2,334.5	Yes	3rd
Ages 20-24 years	(Table) (Trend)(Map)	163	1,532.8	3,114.6	Yes	2,200.4	Yes	2nd
Pelvic inflammatory disease (PID) hospitalization rate per 10,000 females (ages 15-44 years)	(Table) (Trend)(Map)	12	2.0	3.7	Yes	2.5	No	2nd

AIDS - Deaths and Death Rates Per 100,000 Residents Source: 2007-2009 Vital Statistics Data as of March, 2011

		Dea	aths		Population	Crude	Adjusted
Region/County	2007	2008	2009	Total	2008	Rate	Rate
Chemung	1	2	2	5	87,813	1.9	1.6
Livingston	1	0	0	1	63,154	0.5	0.5
Monroe	24	26	15	65	732,762	3.0	2.9
Ontario	0	0	0	0	104,475	0.0	0.0
Schuyler	1	0	0	1	18,888	1.8	1.6
Seneca	1	0	0	1	34,086	1.0	1.2
Steuben	0	2	3	5	96,573	1.7	1.8
Wayne	0	1	0	1	91,564	0.4	0.3
Yates	0	0	0	0	24,652	0.0	0.0
Region Total	28	31	20	79	1,253,967	2.1	2.0
New York State Total	1,327	1,250	1,080	3,657	19,490,297	6.3	5.9

Newly Diagnosed HIV Cases Per 100,000 Population Source: 2007-2009 Bureau of HIV/AIDS Epidemiology Data as of May, 2011

	Newly	Diagno	sed HI	V Cases	Newly Diagnosed HIV Cases	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	2	6	2	10	87,813	3.8
Livingston	2	1	3	6	63,154	3.2
Monroe	96	90	90	276	732,762	12.6
Ontario	5	2	3	10	104,475	3.2
Schuyler	1	1	0	2	18,888	3.5
Seneca	2	2	0	4	34,086	3.9
Steuben	2	4	3	9	96,573	3.1
Wayne	3	5	5	13	91,564	4.7
Yates	0	0	0	0	24,652	0.0
Region Total	113	111	106	330	1,253,967	8.8

New York State Total 4,688	4,540	4,111	13,339	19,490,297	22.8
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Overall, as a rural county, Ontario County has very low rates of HIV/AIDS deaths, cases and those that have been newly infected. Although rates are low, the number of those that could be infected and do not know because that have not been tested could yield a larger number than is portrayed here. Continued efforts to promote safe sex and sexually transmitted infection testing are encouraged.

Early Syphilis Per 100,000 Population Source: 2007-2009 Bureau of STD Control Data as of May, 2011

	F	Early S	Syphili	Population		
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	0	5	5	10	87,813	3.8
Livingston	0	0	0	0	63,154	0.0
Monroe	18	11	16	45	732,762	2.0
Ontario	2	0	0	2	104,475	0.6
Schuyler	0	0	0	0	18,888	0.0
Seneca	0	1	1	2	34,086	2.0
Steuben	2	0	0	2	96,573	0.7
Wayne	1	3	1	5	91,564	1.8
Yates	1	0	0	1	24,652	1.4
Region Total	24	20	23	67	1,253,967	1.8
New York State Total	2,222	2,576	2,452	7,250	19,490,297	12.4

Gonorrhea Per 100,000 Population

Source: 2007-2009 Bureau of STD Control Data as of May, 2011

		Gono		Population		
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	111	98	51	260	87,813	98.7
Livingston	6	5	5	16	63,154	8.4
Monroe	1,133	1,300	1,414	3,847	732,762	175.0
Ontario	29	19	13	61	104,475	19.5
Schuyler	4	4	0	8	18,888	14.1
Seneca	7	10	7	24	34,086	23.5
Steuben	14	18	14	46	96,573	15.9
Wayne	15	16	21	52	91,564	18.9
Yates	5	2	0	7	24,652	9.5
Region Total	1,324	1,472	1,525	4,321	1,253,967	114.9
New York State Total	17,699	17,120	17,009	51,828	19,490,297	88.6

Gonorrhea rates for Ontario County are relatively high as compared to the Network counties, falling at 19.5 cases per 100,000 of the population, with only Seneca County being higher with 23.5 per 100,000.

Pelvic Inflammatory Disease - Discharge Rate Per 10,000 Females Age 15-44 Source: 2007-2009 SPARCS Data as of February, 2011

		Disch	arges		Population	Crude
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	9	3	7	19	16,711	3.8
Livingston	2	5	0	7	13,878	1.7
Monroe	31	47	45	123	149,873	2.7
Ontario	5	4	4	13	20,677	2.1
Schuyler	2	0	2	4	3,560	3.7
Seneca	0	1	2	3	6,376	1.6
Steuben	9	3	10	22	19,039	3.9
Wayne	1	6	3	10	17,646	1.9
Yates	1	0	1	2	4,861	1.4
Region Total	60	69	74	203	252,621	2.7
New York State Total	1,755	1,545	1,515	4,815	4,076,182	3.9

Male Chlamydia Per 100,000 Males

Source: 2007-2009 Bureau of STD Prevention and Epidemiology Data as of September, 2011

	N	Aale Ch	a	Males		
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	81	89	67	237	43,653	181.0
Livingston	18	33	32	83	31,593	87.6
Monroe	1,362	1,543	1,736	4,641	355,721	434.9
Ontario	39	59	49	147	51,330	95.5
Schuyler	4	5	2	11	9,464	38.7
Seneca	29	34	43	106	17,731	199.3
Steuben	40	40	61	141	47,361	99.2
Wayne	45	45	57	147	45,240	108.3
Yates	9	10	12	31	12,023	85.9
Region Total	1,627	1,858	2,059	5,544	614,116	300.9
New York State Total	24,052	27,088	28,283	79,423	9,462,063	279.8

Male Chlamydia (Age 15-19) Per 100,000 Males Source: 2007-2009 Bureau of STD Control Data as of May, 2011

	Male (Chlamy	dia (Ag	e 15-19)	Males	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	19	28	14	61	3,113	653.2
Livingston	6	8	5	19	2,642	239.7
Monroe	392	461	522	1,375	31,459	1456.9
Ontario	8	19	16	43	3,798	377.4
Schuyler	1	2	1	4	875	152.4
Seneca	1	9	5	15	1,224	408.5
Steuben	10	12	12	34	3,386	334.7
Wayne	14	11	16	41	3,565	383.4
Yates	1	1	3	5	970	171.8
Region Total	452	551	594	1,597	51,032	1043.1

New York State Total 5,564 6,749 7,071 19,384 716,555 901.7

Female Chlamydia Per 100,000 Females

Source: 2007-2009 Bureau of STD Prevention and Epidemiology Data as of September, 2011

	F	emale (Females			
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	161	191	141	493	44,160	372.1
Livingston	77	67	76	220	31,561	232.4
Monroe	2,862	3,124	3,382	9,368	377,041	828.2
Ontario	121	141	144	406	53,145	254.6
Schuyler	13	22	20	55	9,424	194.5
Seneca	55	44	56	155	16,355	315.9
Steuben	117	129	142	388	49,212	262.8
Wayne	165	140	149	454	46,324	326.7
Yates	38	27	40	105	12,629	277.1
Region Total	3,609	3,885	4,150	11,644	639,851	606.6
New York State Total	56,599	61,349	64,105	182,053	10,028,234	605.1

Female Chlamydia (Age 15-19) Per 100,000 Females Source: 2007-2009 Bureau of STD Control Data as of May, 2011

	Female	Chlamy	Females			
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	65	80	53	198	3,038	2172.5
Livingston	24	31	26	81	3,173	850.9
Monroe	1,219	1,367	1,455	4,041	29,066	4634.3
Ontario	47	65	70	182	3,828	1584.8
Schuyler	21	14	5	40	568	2347.4
Seneca	63	16	15	94	1,029	3045.0
Steuben	54	70	49	173	3,239	1780.4
Wayne	69	64	64	197	3,101	2117.6
Yates	15	9	17	41	1,137	1202.0
Region Total	1,577	1,716	1,754	5,047	48,179	3491.8
New York State Total	20,378	23,104	24,085	67,567	686,495	3280.8

Female Chlamydia (Age 20-24) Per 100,000 Females Source: 2007-2009 Bureau of STD Control Data as of May, 2011

	Female Chlamydia (Age 20-24) Females						
Region/County	2007	2008	2009	Total	2008	Rate	
Chemung	70	79	56	205	2,990	2285.4	
Livingston	32	30	38	100	3,600	925.9	
Monroe	965	1,049	1,179	3,193	28,491	3735.7	
Ontario	53	49	55	157	3,775	1386.3	
Schuyler	4	7	11	22	529	1386.3	
Seneca	21	16	25	62	1,116	1851.9	
Steuben	49	35	60	144	2,842	1689.0	
Wayne	63	52	64	179	2,771	2153.3	
Yates	15	10	14	39	952	1365.5	
Region Total	1,272	1,327	1,502	4,101	47,066	2904.4	

12. Communicable Disease

Communicable disease control, one of the core functions of Public Health, is aimed at preventing and controlling the spread of communicable diseases that may occur in our community. Physicians and laboratories are required to report cases of communicable disease to Public Health. Public Health initiates prompt contact investigations to identify sources of infection and to prevent the spread of disease. Education is an important part of each follow-up. Communicable disease reports are then forwarded to the New York State Health Department, Bureau of Communicable Disease directly by Internet.

Pertussis Cases Per 100,000 Population

Source: 2007-2009 Bureau of Communicable Disease Control Data as of April, 2011

	P	ertuss	is Ca	ses	Population	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	0	1	0	1	87,813	0.4
Livingston	1	0	2	3	63,154	1.6
Monroe	64	6	7	77	732,762	3.5
Ontario	4	5	0	9	104,475	2.9
Schuyler	0	2	0	2	18,888	3.5
Seneca	2	0	0	2	34,086	2.0
Steuben	0	1	15	16	96,573	5.5
Wayne	11	0	2	13	91,564	4.7
Yates	0	0	0	0	24,652	0.0
Region Total	82	15	26	123	1,253,967	3.3
New York State Total	705	568	364	1,637	19,490,297	2.8

Haemophilus Influenza Per 100,000 Population

Source: 2007-2009 Bureau of Communicable Disease Control Data as of April, 2011

	Haen	ophil	us Infl	luenza	Population	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	1	1	0	2	87,813	0.76
Livingston	0	0	1	1	63,154	0.53
Monroe	12	12	12	36	732,762	1.64
Ontario	2	0	1	3	104,475	0.96
Schuyler	2	0	0	2	18,888	3.53
Seneca	0	1	1	2	34,086	1.96
Steuben	3	1	2	6	96,573	2.07
Wayne	1	1	4	6	91,564	2.18
Yates	0	0	0	0	24,652	0.00
Region Total	21	16	21	58	1,253,967	1.54
New York State Total	254	258	249	761	19,490,297	1.30

Tuberculosis Per 100,000 Population

Source: 2007-2009 Bureau of Communicable Disease Control Data as of April, 2011

	,	Tuber	culosis	5	Population	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	2	2	1	5	87,813	1.9
Livingston	0	0	0	0	63,154	0.0
Monroe	21	16	18	55	732,762	2.5
Ontario	1	1	0	2	104,475	0.6
Schuyler	0	0	1	1	18,888	1.8
Seneca	0	0	1	1	34,086	1.0
Steuben	1	1	0	2	96,573	0.7
Wayne	2	0	4	6	91,564	2.2
Yates	0	0	0	0	24,652	0.0
Region Total	27	20	25	72	1,253,967	1.9
New York State Total	1,173	1,196	1,006	3,375	19,490,297	5.8

Hepatitis A Per 100,000 Population

Source: 2007-2009 Bureau of Communicable Disease Control Data as of April, 2011

		Hepa	titis A	1	Population	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	0	0	0	0	87,813	0.0
Livingston	0	2	0	2	63,154	1.1
Monroe	4	3	1	8	732,762	0.4
Ontario	1	0	0	1	104,475	0.3
Schuyler	0	0	0	0	18,888	0.0
Seneca	0	0	0	0	34,086	0.0
Steuben	0	0	0	0	96,573	0.0
Wayne	1	0	0	1	91,564	0.4
Yates	0	0	1	1	24,652	1.4
Region Total	6	5	2	13	1,253,967	0.3
New York State Total	235	179	136	550	19,490,297	0.9

Hepatitis B Per 100,000 Population
Source: 2007-2009 Bureau of Communicable Disease Control Data as of April, 2011

		Hepa	titis E	3	Population	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	0	0	0	0	87,813	0.0
Livingston	0	0	0	0	63,154	0.0
Monroe	14	2	3	19	732,762	0.9
Ontario	0	0	2	2	104,475	0.6
Schuyler	0	0	0	0	18,888	0.0
Seneca	0	0	0	0	34,086	0.0
Steuben	1	1	0	2	96,573	0.7
Wayne	0	0	0	0	91,564	0.0
Yates	0	0	0	0	24,652	0.0
Region Total	15	3	5	23	1,253,967	0.6
New York State Total	211	171	130	512	19,490,297	0.9

Lyme Disease Per 100,000 Population

Source: 2007-2009 Bureau of Communicable Disease Control Data as of April, 2011

		Lyme	Diseas	se	Population	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	2	0	3	5	87,813	1.9
Livingston	0	2	2	4	63,154	2.1
Monroe	10	12	25	47	732,762	2.1
Ontario	3	2	3	8	104,475	2.6
Schuyler	1	1	1	3	18,888	5.3
Seneca	0	0	3	3	34,086	2.9
Steuben	0	5	2	7	96,573	2.4
Wayne	2	2	1	5	91,564	1.8
Yates	0	0	0	0	24,652	0.0
Region Total	18	24	40	82	1,253,967	2.2
New York State Total	4,604	9,152	9,279	23,035	19,490,297	39.4

Pneumoconiosis Hospitalizations per 100,000 Persons Ages 15 Years and Older Source: 2007-2009 SPARCS Data as of July, 2011

20.		00, 20	0	11105	Daia as of July, 2011	
	Pneumo	coniosis	Hospital	lizations	Population - Ages 15 Years and Older	
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	17	23	15	55	72,510	25.3
Livingston	12	16	14	42	53,520	26.2
Monroe	49	48	40	137	600,582	7.6
Ontario	12	6	8	26	86,545	10.0
Schuyler	5	8	4	17	15,871	35.7
Seneca	4	8	3	15	28,658	17.4
Steuben	15	9	12	36	79,549	15.1
Wayne	5	7	7	19	74,517	8.5
Yates	3	1	4	8	20,084	13.3
Region Total	122	126	107	355	1,031,836	11.5
New York State Total	2,101	2,095	2,309	6,505	15,886,157	13.6

Overall, immunization rates throughout the S2AY Network region are typical to Upstate New York rates and New York State as a whole with close to all children (NYS School Immunization Survey) being completely immunized. The only two counties within the Network region that display significantly different rates are Seneca and Yates counties. This could be due to larger Amish and Mennonite populations, which do not believe in immunizations.

2012-2013 NYS School Immunization Survey

% Immunized, Total - Pre-Kindergarten through 12th Grade

County	Medical	Religious	Diphtheria	Polio	Measles	Rubella	Mumps	Нер	Varicella	Completely
	Exempt	Exempt						В		Immunized
Ontario	0.20	0.61	99	99	99	99	99	99	99	98
Schuyler	0.00	0.62	99	99	99	99	99	99	99	99
Seneca	0.06	4.10	95	95	95	95	95	95	94	94

County	Medical	Religious	Diphtheria	Polio	Measles	Rubella	Mumps	Нер	Varicella	Completely
	Exempt	Exempt						В		Immunized
Steuben	0.16	0.25	99	99	98	98	98	99	98	98
Wayne	0.23	0.31	99	99	99	99	99	99	99	98
Yates	0.03	8.53	91	91	90	91	91	90	89	88
NYS										
Excl.	0.17	0.64	99	99	98	98	98	98	98	97
NYC										
NYS	0.12	0.49	98	99	98	98	98	98	98	97
Total	0.12	0.47	90	27	90	90	90	90	90	21

2012-2013 NYS School Immunization Survey

% Immunized, Total - All Pre-Kindergarten Excluded

County	Medical	Religious	Diphtheria	Polio	Measles	Rubella	Mumps		Varicella	Completely
County		- C	D ірпіпена	FOIIO	weasies	Кирена	winps	Нер	variceiia	Completely
	Exempt	Exempt						В		Immunized
Ontario	0.22	0.60	99	99	99	99	99	99	99	99
Schuyler	0.00	0.69	99	99	99	99	99	99	99	99
Seneca	0.07	4.34	95	95	95	95	95	95	94	94
Steuben	0.16	0.26	99	99	99	99	99	99	99	99
Wayne	0.25	0.32	99	99	99	99	99	99	99	99
Yates	0.03	9.06	91	90	90	90	90	90	89	88
NYS										
Excl.	0.17	0.65	99	99	99	99	99	99	99	98
NYC										
NYS	0.11	0.48	00	99	99	99	99	99	00	98
Total	0.11	0.48	99	79	99	99	99	77	99	98

2012-2013 NYS School Immunization Survey

% Immunized, Total - Pre-Kindergarten < 12 Months Excluded

County	Medical	Religious	Diphtheria	Polio	Measles	Rubella	Mumps	Нер	Varicella	Completely
	Exempt	Exempt						В		Immunized
Ontario	0.20	0.60	99	99	99	99	99	99	99	99
Schuyler	0.00	0.62	99	99	99	99	99	99	99	99
Seneca	0.06	4.10	95	95	95	95	95	95	94	94
Steuben	0.15	0.25	99	99	99	99	99	99	99	99
Wayne	0.23	0.31	99	99	99	99	99	99	99	98
Yates	0.03	8.54	91	91	90	91	91	90	89	88
NYS										
Excl.	0.17	0.64	99	99	99	99	99	99	98	98
NYC										
NYS	0.11	0.49	99	99	98	99	99	99	98	98
Total	0.11	0.43	27	27	90	27	27	27	90	90

13. Work-Related Injury

Overall, work related injury rates with Ontario County are low as compared to the Network region, upstate New York and the state as a whole. With the largest percentage of the workforce working in more office-type job positions instead of factory or more

heavy labor based work, this could account for lower rates than counties with a more industrial workforce.

Asbestosis Hospitalizations per 100,000 Persons Ages 15 Years and Older Source: 2007-2009 SPARCS Data as of July, 2011

	Asbestosis Hospitalizations			zations	Population - Ages 15 Years and Older		
Region/County	2007	2008	2009	Total	2008	Rate	
Chemung	11	13	13	37	72,510	17.0	
Livingston	11	7	9	27	53,520	16.8	
Monroe	43	43	40	126	600,582	7.0	
Ontario	12	4	8	24	86,545	9.2	
Schuyler	2	2	0	4	15,871	8.4	
Seneca	3	8	2	13	28,658	15.1	
Steuben	11	6	10	27	79,549	11.3	
Wayne	4	7	6	17	74,517	7.6	
Yates	3	1	4	8	20,084	13.3	
Region Total	100	91	92	283	1,031,836	9.1	
New York State Total	1,840	1,876	2,117	5,833	15,886,157	12.2	

Work-related Injury Hospitalizations per 10,000 Employed Persons Ages 16 Years and Older *Source:* 2007-2009 SPARCS Data as of July, 2011

Source. 2			J	Employed		
Region/County	2007	2008	2009	Total	2008	Rate
Chemung	55	84	87	226	39,044	19.3
Livingston	66	56	66	188	30,513	20.5
Monroe	437	448	517	1,402	356,456	13.1
Ontario	98	89	82	269	53,898	16.6
Schuyler	28	23	32	83	9,542	29.0
Seneca	41	38	37	116	16,194	23.9
Steuben	127	113	116	356	43,016	27.6
Wayne	95	93	116	304	45,249	22.4
Yates	25	36	22	83	12,559	22.0
Region Total	972	980	1,075	3,027	606,471	16.6
New York State Total	14,225	14,093	14,831	43,149	9,138,035	15.7

Elevated Blood Lead Levels Among Adults (10 mcg/dL plus) per 100,000 Employed Persons Ages 16 and Older

Source: 2007-2009 New York State Department of Health Heavy Metals Registry-HMR Data as of July, 2011

	Elevated Blood	Elevated Blood Lead Levels Among Adults (10 mcg/dL plus) Employe						
Region/County	2007	2007 2008 2009 Total				Rate		
Chemung	30	58	18	106	39,044	90.5		

Livingston	6	13	15	34	30,513	37.1
Monroe	70	59	52	181	356,456	16.9
Ontario	18	17	11	46	53,898	28.4
Schuyler	16	20	9	45	9,542	157.2
Seneca	18	14	10	42	16,194	86.5
Steuben	2	7	5	14	43,016	10.8
Wayne	2	1	6	9	45,249	6.6
Yates	1	0	0	1	12,559	2.7
Region Total	163	189	126	478	606,471	26.3
New York State Total	2,329	2,115	1,903	6,347	9,138,035	23.2

14. Health Indicators by Race and Ethnicity

Health Indicators by Race/Ethnicity (NYSDOH) 2008-2010 - Ontario County								
		Non-His	panic					
Health Indicator	White	Black	Asian/Pacific Islander	Hispanic	Total			
Socio-Demographic Indicators								
Population (2010)	100,044	2,642	1,281	3,679	107,931			
Percent of Population	92.7%	2.4%	1.2%	3.4%	100.0%			
Median Annual Household Income in US Dollars (2008-10) *	57,786	23,514	35,521	36,555	56,390			
Percent of Families Below Poverty (2008-10) *	5.2%	<u>s</u>	<u>s</u>	<u>s</u>	6.1%			
General Health Indicators								
Total Mortality per 100,000, Age-adjusted	739.9	700.7	<u>s</u>	523.8	740.6			
Percent Premature Deaths (< 75 Years)	37.9%	68.9%	0.0%~	69.2% <u>~</u>	38.7%			
Years of Potential Life Lost per 100,000, Ageadjusted	5,647	10,161	0 <u>~</u>	5,506 <u>~</u>	5,706			
Birth-Related Indicators								
Number of Births per Year (3 Year Average)	944	20	16	65	1,066			
Percent Births with Early (1st Trimester) Prenatal Care	79.2%	53.7%	77.8%	66.8%	77.5%			
Percent Adequate Prenatal Care (Kotelchuck Index)	56.6%	51.9%	40.9% <u>~</u>	57.2%	56.1%			
Percent Premature Births (< 37 Weeks Gestation)	10.9%	16.7% <u>~</u>	10.6% <u>~</u>	11.3%	10.9%			
Percent Low Birthweight Births (< 2.5 Kg)	6.0%	4.9% <u>~</u>	6.1% <u>~</u>	7.7% <u>~</u>	6.2%			
Teen (Age 15-17) Pregnancy Rate per 1,000	7.5	37.0 <u>~</u>	<u>s</u>	64.9 <u>~</u>	11.5			
Total Pregnancy Rate per 1,000 Age 15-44 Females	63.9	57.8	61.7	109.9	69.3			
Fertility Rate per 1,000 (All Births/Female Population 15-44)	54.1	36.4	53.0	90.8	55.9			

Health Indicators by Race/Ethnicity (N	YSDOH) 2	2008-20	10 - Ontario Co	ounty	
		Non-His	panic		
			Asian/Pacific		Takal
Health Indicator	White	Black	Islander	Hispanic	Total
Infant Mortality per 1,000 Live Births	6.4 <u>~</u>	<u>S</u>	0.0 <u>~</u>	<u>S</u>	6.9
Injury-Related Indicators				1	
Motor Vehicle-Related Mortality per 100,000, Ageadjusted	6.4	<u>s</u>	0.0 <u>~</u>	0.0~	6.3
Unintentional Injury Mortality per 100,000, Ageadjusted	28.5	<u>s</u>	0.0~	<u>s</u>	28.4
Unintentional Injury Hospitalizations per 10,000, Age-adjusted	62.0	52.1	18.5 <u>~</u>	32.6	62.6
Poisoning Hospitalizations per 10,000, Ageadjusted	8.5	11.4 <u>~</u>	0.0~	11.0~	8.6
Fall Hospitalizations per 10,000, Age 65+ Years	230.4	187.8 <u>~</u>	0.0~	<u>s</u>	227.1
Respiratory Disease Indicators					
Asthma Hospitalizations per 10,000, Age-adjusted	5.4	10.2~	0.0~	10.3~	6.2
Asthma Hospitalizations per 10,000, Age 0-17 Years	5.5	15.9 <u>~</u>	0.0~	<u>s</u>	6.5
CLRD/COPD Mortality per 100,000, 18+ Years	70.9	0.0~	0.0~	<u>s</u>	67.0
COPD/CLRD Hospitalizations per 10,000, 18+ Years	38.8	28.7~	0.0~	13.7~	37.9
Heart Disease and Stroke Indicators					
Diseases of the Heart Mortality per 100,000, Ageadjusted	167.3	128.1 <u>~</u>	<u>s</u>	62.5 <u>~</u>	166.6
Diseases of the Heart Hospitalizations per 10,000, Age-adjusted	95.4	133.0	26.7 <u>~</u>	114.2	99.4
Cerebrovascular Disease (Stroke) Mortality per 100,000, Age-adjusted	38.0	<u>s</u>	0.0~	<u>S</u>	37.5
Cerebrovascular Disease (Stroke) Hospitalizations per 10,000, Age-adjusted	23.0	52.0	<u>s</u>	21.9~	23.8
Coronary Heart Disease Mortality per 100,000, Age-adjusted	122.2	79.8 <u>~</u>	0.0~	<u>s</u>	121.3
Coronary Heart Disease Hospitalizations per 10,000, Age-adjusted	36.6	22.0 <u>~</u>	<u>s</u>	52.2	38.4
Congestive Heart Failure Mortality per 100,000, 18+ Years	26.4	0.0~	<u>s</u>	<u>S</u>	25.6
Congestive Heart Failure Hospitalizations per 10,000, Age 18+ Years	36.9	49.7	<u>s</u>	24.4 <u>~</u>	36.7
Diabetes Indicators					

Health Indicators by Race/Ethnicity (NYSDOH) 2008-2010 - Ontario County									
		Non-His	panic						
			Asian/Pacific						
Health Indicator	White	Black	Islander	Hispanic	Total				
Diabetes Mortality per 100,000, Age-adjusted	15.5	<u>s</u>	0.0~	<u>s</u>	15.9				
Diabetes Hospitalizations per 10,000 (Primary Dx ICD9 250), Age-adjusted	10.4	27.7 <u>~</u>	0.0~	8.4 <u>~</u>	11.0				
Diabetes Hospitalizations per 10,000 (Any Dx ICD9 250), Age-adjusted	167.0	360.2	39.4 <u>~</u>	253.1	174.4				
Diabetes Short-term Complications Hospitalizations per 10,000, Age 6-18 Years	2.3 <u>~</u>	0.0~	0.0~	<u>S</u>	2.4 <u>~</u>				
Diabetes Short-term Complications Hospitalizations per 10,000, Age 18+ Years	4.7	19.1 <u>~</u>	0.0~	<u>S</u>	5.0				
Cancer Indicators									
Lung Cancer Incidence per 100,000, Age-adjusted (2007-09)	71.6	<u>s</u>	<u>s</u>	<u>s</u>	71.2				
Colorectal Cancer Mortality per 100,000, Ageadjusted (2007-09)	13.7	<u>s</u>	<u>s</u>	<u>s</u>	14.0				
Female Breast Cancer Mortality per 100,000, Ageadjusted (2007-09)	18.3	<u>s</u>	<u>s</u>	<u>s</u>	17.6				
Cervix Uteri Cancer Mortality per 100,000, Ageadjusted (2007-09)	<u>s</u>	<u>s</u>	<u>s</u>	<u>s</u>	<u>s</u>				
Percent Early Stage Colorectal Cancer (2007-09)	45.7%	<u>S</u>	<u>s</u>	<u>s</u>	47.5%				
Percent Early Stage Female Breast Cancer (2007-09)	67.5%	<u>s</u>	<u>s</u>	<u>s</u>	67.2%				
Percent Early Stage Cervical Cancer (2007-09)	<u>s</u>	<u>s</u>	<u>s</u>	<u>s</u>	<u>s</u>				
Substance Abuse and Mental Health-Related Indica	Substance Abuse and Mental Health-Related Indicators								
Drug-related Hospitalizations per 10,000, Ageadjusted	11.7	18.8~	0.0~	17.9~	12.2				
Suicide Mortality per 100,000, Age-adjusted	9.5	0.0~	0.0~	0.0~	9.1				

Overall, racial diversity within Ontario County is low, with the population being mostly white or Caucasian. Ontario County does have a higher migrant population than most of the Network counties, which does account for some of the diversity.

15. Leading Causes of Death

Leading Causes of Death by County, New York State, 2011

Source: Vital Statistics Data as of March, 2013

New York State Department of Health - Bureau of Biometrics and Health Statistics

County and # of Deaths	#1 Cause of Death and # of Deaths Age- adjusted Death Rate	#2 Cause of Death and # of Deaths Age- adjusted Death Rate	#3 Cause of Death and # of Deaths Age-adjusted Death Rate	#4 Cause of Death and # of Deaths Age-adjusted Death Rate	#5 Cause of Death and # of Deaths Age-adjusted Death Rate
Ontario Total: 1,060	Heart Disease 256 177 per 100,000	Cancer 229 162 per 100,000	Stroke 61 43 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 60 42 per 100,000	Unintentional Injury 44 33 per 100,000
New York City Total: 51,344	Heart Disease 16,794 196 per 100,000	Cancer 12,476 148 per 100,000	Pneumonia and Influenza 2,490 29 per 100,000	Diseases (CLRD)	Stroke 1,778 21 per 100,000
Rest of State Total: 95,734	Heart Disease 27,165 189 per 100,000	Cancer 22,556 165 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 5,117 37 per 100,000	Stroke 4,374 31 per 100,000	Unintentional Injury 3,680 30 per 100,000
New York State Total: 147,078	Heart Disease 43,959 191 per 100,000	Cancer 35,032 159 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 6,902 31 per 100,000	Stroke 6,152 27 per 100,000	Unintentional Injury 5,246 25 per 100,000

Leading causes of death within Ontario County mimics that of New York State and upstate New York with the top two causes of death being heart disease and cancer. The third cause of death within Ontario County is stroke, which is one of the chosen priorities being addressed over the next three years.

Leading Causes of Death Among Females by County, New York State, 2011

Source: Vital Statistics Data as of March, 2013

New York State Department of Health - Bureau of Biometrics and Health Statistics

County and # of Deaths	#1 Cause of Death and # of Deaths Age- adjusted Death Rate	#2 Cause of Death and # of Deaths Age- adjusted Death Rate	#3 Cause of Death and # of Deaths Age-adjusted Death Rate	#4 Cause of Death and # of Deaths Age-adjusted Death Rate	#5 Cause of Death and # of Deaths Age-adjusted Death Rate
Ontario Total: 509	Heart Disease 117 128 per 100,000	Cancer 109 138 per 100,000	Stroke 35 38 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 23 29 per 100,000	Unintentional Injury 16 19 per 100,000*
New York City Total: 26,672	Heart Disease 9,108 167 per 100,000	Cancer 6,430 129 per 100,000	Pneumonia and Influenza 1,303 24 per 100,000	Stroke 1,051 20 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 959 18 per 100,000
Rest of State Total: 49,802	Heart Disease 14,164 156 per 100,000	Cancer 11,284 146 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 2,782 34 per 100,000	Stroke 2,680 30 per 100,000	Unintentional Injury 1,371 19 per 100,000
New York State Total: 76,474	Heart Disease 23,272 160 per 100,000	Cancer 17,714 140 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 3,741 28 per 100,000	Stroke 3,731 26 per 100,000	Pneumonia and Influenza 2,506 17 per 100,000

Leading Causes of Death Among Males by County, New York State, 2011

Source: Vital Statistics Data as of March, 2013

New York State Department of Health - Bureau of Biometrics and Health Statistics

County and # of Deaths	#1 Cause of Death and # of Deaths Age- adjusted Death Rate	#2 Cause of Death and # of Deaths Age- adjusted Death Rate	#3 Cause of Death and # of Deaths Age-adjusted Death Rate	#4 Cause of Death and # of Deaths Age-adjusted Death Rate	#5 Cause of Death and # of Deaths Age-adjusted Death Rate
Ontario Total: 551	Heart Disease 139 242 per 100,000	Cancer 120 196 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 37 62 per 100,000	Unintentional Injury 28 50 per 100,000	Stroke 26 46 per 100,000
New York City Total: 24,672	Heart Disease 7,686 237 per 100,000	Cancer 6,046 177 per 100,000	Pneumonia and Influenza 1,187 38 per 100,000	Unintentional Injury 1,033 27 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 826 26 per 100,000
Rest of State Total: 45,927	Heart Disease 13,000 230 per 100,000	Cancer 11,271 192 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 2,335 42 per 100,000	Unintentional Injury 2,309 42 per 100,000	Stroke 1,693 31 per 100,000
New York State Total: 70,599	Heart Disease 20,686 233 per 100,000	Cancer 17,317 187 per 100,000	Unintentional Injury 3,342 35 per 100,000	Chronic Lower Respiratory Diseases (CLRD) 3,161 36 per 100,000	Stroke 2,420 27 per 100,000

III. Public Participation:

A. Participants Involved

Hospital leadership works diligently to search out potential collaborative partners throughout its service area in efforts to enhance needed health care services to those most vulnerable residents. Due to the rural nature of the County, Geneva General Hospital understands the need to create meaningful partnerships to best serve the community at large. Currently, the Hospital has formed collaborative relationships with the following organizations and community agencies: Local school districts, local government and other governmental agencies, health care providers, Ontario County Public Health, the S2AY Rural Health Network, other county hospitals, local media, local educational institutions and community-based organizations. Additionally, as part of our governance structure, Finger Lakes Health has a Community Advisory Committee (CAC), which is a subcommittee of the health system Board of Directors. The CAC brings together representatives of many community agencies and organizations who offer input to the health system on many matters, including the health needs of our constituents. The CAC membership list can be found in Attachment C.

B. Public Participation

Ontario County Public Health in collaboration with Ontario County hospitals, the S2AY Rural Health Network, and community based agencies conducted a survey of Ontario County residents through the community health needs assessment process. Surveys were disseminated through many different methods including e-mail, web pages (link to survey provided), mailing of paper copies, dissemination of paper copies in local stores, health care facilities, public health and community facilities, and direct assistance within county buildings/agencies. Finger Lakes Health invited public participation in the needs assessment through the Spring 2012 edition of *Thrive*, our community health magazine. Thrive is mailed to more than 90,000 households in the health system's service area. Readers were invited to log-in to the online survey or to contact Finger Lakes Health for a paper version of the survey. Overall, 578 participants completed the survey. Representation of participants that completed the survey as compared to New York State census data is shown below.

	Ontario	Census (2010)								
# surveys	578	104,205								
Under 35 yo	13.5%	41.7%								
35 to 65 yo	77.1%	44.4%								
White	97.6%	93.8%								
AAS or more	75.5%	44.5%								
Bach or more	49.1%	30.9%								
\$25k or more	92.7%	79.9%								
\$50k or more	69.4%	55.6%								
Married	64.9%	52.4%								
Insured	96.8%	86.3% (EBRFSS)								
Female	30.6									
Average BMI	3	31.7								
Female BMI		29.4								
Male BMI	9	2.7%								
Full time	8	4.2%								
Town	Canandaigua - 38.0%									
TOWII	Geneva - 15.7%									
20+ yrs in county	6	3.6%								
Comp survey	8	4.2%								

Further input from the public was collected through a number of focus group sessions that were held throughout the county. Overall, Ontario County Public Health and its partners, including Geneva General Hospital, strived to organize focus groups that reached out to populations that were under-represented by the paper/online survey.

Community Focus Groups Held

- 12/03/2012 Bloomfield Fire Department, fire chiefs meeting
- 01/12/2013 Geneva Community Center, African American men's group
- 02/08/2013 FLACRA (Finger Lakes Addictions Counseling and Referral Agency), group meeting

A summary of notes from the focus groups can be found in Attachment B.

C. Public Notification of Sessions

Ontario County Public Health informed the public of community focus group/input sessions and the community health assessment survey through various means. Public health spoke with various leaders of community agencies and local government to set up focus group sessions. Community and organization members were then informed through e-mail, flyers, the internet and within county

buildings. Tear off flyers with the community survey link as well as paper copies of the survey were provided at local business and community agencies, county buildings, health care providers and at public health.

IV. Assessment and Selection of Public Health Priorities

The MAPP (Mobilizing for Action through Planning and Partnership) process was used to conduct a Community Health Assessment for Ontario county to assess and ultimately choose 2 Prevention Agenda Priorities. This included four component assessments:

The first assessment looked at Community Health Status Indicators, which were determined both by looking at key statistics available regarding various health indicators and by conducting a comprehensive survey among a random sample of community residents to determine their opinions, health behaviors and health needs. Just over 800 completed surveys were returned in Ontario County. Surveys were distributed through placement throughout county establishments as well as through employers, health, educational and human services agencies and through other community groups. The survey was designed to encompass questions in the twelve areas that the New York State Department of Health (NYSDOH) has identified as high priority issues on a statewide basis. Results of the Health Priorities Survey and report were then combined with additional statistical data and information regarding community resources to develop the Community Health Assessment. A summary of the survey can be found in Attachment A.

The second assessment evaluated the effectiveness of the Public Health System and the role of the Public Health Department within that system. This was done using a modification of the Local Public Health System Assessment tool developed by the CDC and NACCHO. A diverse group of community members, community agencies and key community leaders who are familiar in some way with the local public health system completed this ranking. The assessment was completed through the use of a more user-friendly version of the CDC and NACCHO tool, Local Public Health System Assessment (LPHSA). Each of the ten essential public health services were ranked by the group by ranking the series of indicators within each Essential Service to determine areas of strength and areas needing improvement within the Local Public Health System.

The third assessment was the Community Themes and Strengths Assessment that was conducted through Focus Group meetings throughout the County (listed above) with community residents. This assessment looked at the issues that affect the quality of life among community residents and the assets the County has available to address health needs.

The fourth assessment was also conducted through Focus Group meetings and looked at the "Forces of Change" that are at work locally, statewide and nationally, and what types of threats and/or opportunities are created by these changes. This

assessment was conducted among the same groups as the assessment above, and at the same time.

When the assessment process was completed, the community health assessment facilitator (S2AY Rural Health Network) combined and analyzed the results of the assessments, and prepared a list of the issues that had either been identified through more than one assessment as a top issue OR that were identified in one of the assessments as a major issue. Once these results were tallied, a Focus Group made up of service providers was again brought together to the rank the issues identified and begin the creation of the Community Health Improvement Plan (CHIP) process.

It was decided to use a ranking system that focused most heavily on how effective any interventions might be, so the Hanlon Method was selected for ranking priorities, which uses the following formula to rank priorities:

(A & 2B) X C

Where A = the size of the problem, B = the severity of the problem and C = the effectiveness of the solution. The effectiveness of the solution obviously is given a lot more weight than the size or seriousness of the problem, with the hope of making wise use of limited resources by targeting solutions that are known to be effective.

In the Hanlon Method, numbers are assigned through which to measure size, severity and effectiveness, and the numbers are then plugged into the formula as the focus group ranked each relative factor. It is important to note that while the Hanlon Method offers a numerical and systematic method of ranking public health priorities, the method is still largely subjective, with much room for error and interpretation. Measures of effectiveness in the public health area are not absolute, and questions arise as to the application of the measurement, which make measurement more than a little "fuzzy," and include assumptions about human behavior. For example, when addressing the issue of unintended pregnancy, the rating group might note that birth control methods would mostly have a ranking of "highly effective" as an intervention based on the relative effectiveness of each method of birth control at achieving the desired goal of preventing pregnancy. However, birth control methods are not necessarily applied, or are applied inconsistently, resulting in a much lower measure of effectiveness than the intervention actually achieves. So the measures of effectiveness often included consideration of a variety of factors that influence effectiveness and may reduce the effectiveness measure since, for whatever reason, the intervention may not be uniformly applied. Based upon the ranking through the Hanlon Method, Ontario County determined the following priorities:

- Cerebrovascular Disease (stroke, hypertension)
- Cancer (lung, ovarian, prostate)
- Poor Nutrition (unhealthy eating)
- Obesity (including lack of physical activity & fitness)
- Behavioral Problems in Young Children

- Dental Health
- Depression/Other Mental Illness
- Smoking/Tobacco Use/Secondhand Smoke
- Access to Specialty Health Care
- Drug & Alcohol Abuse/Abuse of Prescription Drugs or Illegal Drugs
- CLRD (COPD)
- Unintentional Injuries

Two Prevention Agenda Priorities Chosen - Ontario County:

- Prevent Chronic Disease reduce obesity in children and adults
- Prevent Chronic Disease reduce hypertension/stroke

Disparity to be Worked on:

• Reducing obesity among low-income individuals.

Within the chronic disease category, obesity was chosen as a primary focus, specifically to reduce obesity in children and adults. The committee also chose to focus on reducing hypertension and stroke within the county with a focus on reducing sodium consumption and tobacco use. Smoking rates with Ontario are particularly high, possibly due to reservations close by with inexpensive tobacco products.

Finger Lakes Health also collaborated with Seneca County Public Health and other partnering organizations in that county, as well as Yates County Public Health and partnership organizations in that county, to conduct needs assessments using the same methods, analyze data, determine priorities and develop Plans of Action.

Two Prevention Agenda Priorities Chosen – Seneca County:

- Prevent Chronic Disease with the goal of Reducing Obesity in Adults & Children
- Promote Mental Health & Prevent Substance Abuse

Two Prevention Agenda Priorities Chosen – Yates County:

- Prevent Chronic Disease reduce obesity in children and adults
- Prevent Chronic Disease reduce hypertension/stroke

V. Three Year Plan of Action – Ontario County

		Prevention Agenda Focus Area: Objective: Reduce Obesity in			
Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/ Evaluation
		1 - A1. Research existing use of fruits and vegetables and other healthy options at food pantries and food distribution program (e.g. soup kitchens, back pack programs, summer feeding programs, etc.) Identify barriers to providing healthier meals. Determine how we can help to increase use of produce/healthy food options in these venues. 1 - A2. Contact 10 county restaurants to mark healthy	Collaborative (OCHC), Salvation Army, faith based community, food pantries, CCE, Food Link, schools, participating YMCAs, OFAs	On-going	Research and assessment completed. # Food pantries using local produce # clients educated # restaurants participating
1. Reduce Obesity in Children and	A. Create community environments that promote and support healthy food	choices on menus. (Adopt committee definition of healthy choices) 1 - A3. Determine who else needs to be involved in OCHC and invite their participation (Food Link, CCE, Salvation, schools, faith-based community, OFA, Mental Health, WIC)	Commerce, FLH	On-going Nov 15, 2013	% of needed partners recruited
Adults	and beverage choices and physical activity	1 - A4. Work together to increase breastfeeding in Ontario County. Support hospitals in becoming baby friendly by supporting the 10 steps to successful breastfeeding	Health, Geneva General, Breastfeeding coalition OCHC, WIC	On-going	EHR documentation of education, document # of women who are still breastfeeding upon discharge from hospital, % increase of WIC mothers breastfeeding at 6 months, % exclusively breastfeeding in the hospital, % breastfeeding at all in the hospital
		1 - A5. Annually encourage 10 OCHC member organizations, non-profits, schools and local businesses to adopt breast feeding policies.		On-going	# of policies implemented.

Prevention Agenda Focus Area: Prevent Chronic Disease
Objective: Reduce Obesity in Children and Adults

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Strategy	Objective	Activities	Partners	Timeframe	Measurement/ Evaluation
Area					
		1 - A6. Investigate further initiatives to support	OCPHD, Hospitals,	Jan 2014 –	Initiatives implemented
		breastfeeding within the county. (Work with		On-going	
		Doctors on EHR to track persistence of	OCHC, PCPs/		
		breastfeeding at 1, 3, 6 and 12 months)	Pediatricians		
		1 - A7. Advocate/promote/sustain the implementation	OCPHD, Hospitals,	Jan 2015 –	# organizations with healthy
	A. Create	of healthier vending policy in County facilities,	_	Oct 2017	vending policies
	community	hospitals and OCHC members.			
1. Reduce	environments	1 - A8. Annually encourage 10 OCHC member	OCHC, United Way,	Jan. 2015 -	# organizations/worksites that
Obesity in	that promote	organizations, non-profits, schools and local	Chamber of Commerce	Oct 2017	adopt policy
Children and	and support	businesses to adopt Healthy meeting guidelines.			
Adults	healthy food	1 - A9. Encourage OCHC members, non-profits and			# organizations/worksites that
	and beverage	local businesses to adopt and expand sugar sweetened		Oct 2017	adopt policy
	choices and	beverage policies. Provide sample policies to 10			
	physical	worksites	o ave	1 2014	
	activity	1 - A10. Investigate the feasibility of promoting use			Feasibility determined. Next
		of EBT cards at Farmer's Markets through WIC Clinics.		On-going	steps taken is appropriate.
			Ontario Cty. DSS, WIC	I 2015	Guide promoted, online
		1 - A11. Promote the visitors guide and online			Guide promoted, online resource created, link provided
		resource of county hiking, biking and walking trails and other natural resources to promote physical		*	· · ·
		activity within the community. Include stroller and		an annual basis	guide promoted
		handicapped accessible references. Investigate the		04313	guide promoted
		possibility of using interactive media using existing			
		apps.			
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Prevention Agenda Focus Area: Prevent Chronic Disease Objective: Reduce Obesity in Children and Adults

Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/ Evaluation
		1 - A12. Investigate creating an annual county-wide competition centered around the promotion of physical activity and fitness (i.e. "Walk-Off" between Canandaigua/Geneva, Wegmans Eat Well Live Well, Staff Steps, Step Up)	Employers, hospitals	2014 - Annually thereafter	Annual contest created and held, # of participants
1. Reduce Obesity in	A. Create community environments	1- A13. Investigate the use of and work on promoting 5-2-1-0 in the after-school programs, backpack program, community centers, day cares, Head Start, C&FRC, Foodlink, YMCA, Boys and Girls Club, Sal Army	Foodlink, Boys	June 2015	Number of organizations participating; number of people educated,; number of policies adopted
Children and Adults	that promote and support healthy food and beverage choices and physical activity	1 - A14. Increase the use of and engage local media and online resources (i.e. social media, county/community/PH websites, online news websites, radio, television, local publications) to promote the importance of good nutrition and physical activity using consistent measurements. Include examples of ways to increase physical activity and county resources that are available to community members to increase physical activity.	Media, Local Hospitals, Other non-profits	Ongoing	# of media outlets reached out to, # of communications published/posted,
		1 - A15. Educate municipal officials regarding how to improve the built environment and keep them informed and educated about good nutrition and physical activities as outlined in the CHIP- at least 5 municipal officials.	Public Health,	December 2014	# of municipal officials educated

Prevention Agenda Focus Area: Prevent Chronic Disease Objective: Reduce Obesity in Children and Adults

Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/ Evaluation
		1 - B1. Attempt to have committee members on the Wellness Committees at each school district in the County.	OCHC/Hospitals	,	Adherence to wellness standards
1. Reduce Obesity in Children and	B. Prevent childhood obesity through	1 - B2. Partner with local schools and after school programs to promote reducing screen time, healthy living, healthy eating and physical activity. Continue and expand the "Get Up! Fuel Up!" and "Food, Fun, Fitness" programs. Explore program with Midlakes. Explore homeschoolers and parochial schools.	Hospitals,	On-going	# of students reached # of new students reached
Adults	early-care and schools	1 - B3. Work with farms, food service directors and Seeking Common Ground to encourage use of local produce and farms in schools, restaurants, healthcare facilities, etc.		On-going	# of schools, restaurants and health care facilities utilizing local produce
		1 - B4. Create and annually update inventory of existing opportunities for physical activities available to community members at schools. Continue to encourage, develop and expand opportunities for physical activity for community members in school facilities.		April 2014 – and annually thereafter	# of schools expanding use

Geneva General Hospital - Community Service Plan 2013-2015

Prevention Agenda Focus Area: Prevent Chronic Disease Objective: Reduce Obesity in Children and Adults							
Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/ Evaluation		
Obesity in Children and Adults	C. Expand the role of health care, health service providers, and insurers in obesity prevention						

Prevention Agenda Focus Area: Prevent Chronic Disease Objective: Decrease Hypertension Rates

Strategy Area	Objective	Activities	Partners	Timefram e	Measurement/ Evaluation
diceace	A. Decrease Hypertension Rates	 2 - A1. Work to prevent hypertension by assisting hospitals, nursing homes and senior meal providers in reducing sodium content in all meals served including to patients, visitors, staff and public. 2 - A2. Work with the FLHSA to bring the hypertension reduction program down to Ontario County (Expand description of FLHSA program here) 	OCHC, Hospitals, Nursing Homes, Office for the Aging, RHIO, S2AY FLHSA/S2AY RHN	January 2014 On- going	Reduce sodium content by 30% over 3 years, by November 2017 Program replicated and imitated Hypertension rates reduced

V. Three Year Plan of Action – Seneca County

Prevention Agenda Focus Area: Prevent Chronic Disease

Strategy Area 1. Create	Objective	Activities			
	A D	1A -1. Educate the public about the risk	Partners CCE, PH,	Timeframe	-Decrease by 2% the number of adults who consume
	A. By December 31,	associated with the overconsumption of sugary	workplaces	To begin Jan 2014	sugary beverages in accordance with data reported from
community environments	2017, decrease	drinks through Re-think Your Drink presentations	County	Jan 2014	BRFSS
that promote	the percentage	to adults, community groups, youth groups, county	government,		-# of SSB Policies implemented or adopted by
and support	of adults ages	employees, SNAP Nutrition Education series and	PH, Seneca		workplaces, schools, local gov't by 12/2017.
healthy food	18 and older	through the use of educational displays at health	County		-Survey at least 50 Seneca County employees during
and beverage	who consume	fairs and libraries in Seneca County.	Employee		annual benefits fair re: eliminating soda machine and
choices and	1 or more		Wellness		the total # of sugary beverages consumed daily.
physical	sugary drinks		Committee		-Increase by 20% the number of SNAP Education
activity	per day				participants who consume sugar sweetened beverages
					daily thru pre and post participant surveys.
		1A - 2. Utilize a variety of Social Media to	CCE/PH	1/2014	# of articles/posts/publications released
		educate the public about the risk associated with			-
		overconsumption of sugary drinks. Examples			
		include Press releases, articles, public service			
		announcements and web postings.			
		1A - 3. Increase access to healthy foods through	Local schools,	Ongoing	Increase by 5% the number of adults and youth receiving
		community gardens/and local producers to	local summer		food from community gardens through Back Pack
		distribute locally grown produce to food pantries	programs, PH		Programs and Food Pantries receiving fresh produce by
		and to students and families enrolled in the Seneca	Back Pack		12/17
		County backpack programs.	Program		
			Coordinators,		
			CCE Master		
			Gardeners		
		1A - 4. Promote use of Farmer's Markets and	WIC, CCE	Ongoing	-Measure increased use of EBTs at Farmer's Markets
		SNAP/EBT use within the community and	OFA, PH		(CCEs)
		specifically at WIC Clinics.			-# of OFA vouchers given
					-# of Redeemed WIC checks
					-EBT Use at Seneca Falls Farmer's market tracked
					annually

Coal 1: Reduc	e Obesity in Child	Prevention Agenda Focus A	Area: Prevent Cl	nronic Disease	
Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/Evaluation
W	A. By December 31, 2017, decrease the percentage of adults ages 18 and older who consume	1A-5. To increase community physical activity, investigate and contact applicable parties to compile resources and create a central guide to promote local hiking trails and the area's natural resources. Investigate creating and annually updating an online resource guide as well as the cost of printed copies ie Loca-Motion Map.	PH, Visitors Bureau, Traffic Safety Board, NYCC, CCE, FL Health	Ongoing	-Resource guide created, online link made - # of hits online -# of Loca-motion maps distributed
	1 or more sugary drinks per day	1A-6. To strengthen and promote joint-use agreements such as the Step Up Program with the New York Chiropractic College and the Health Dept	PH, NYCC	Ongoing	-To survey participants regarding their current and post program levels of physical activityTotal # of Joint Use Agreements -# of adults participating in Step Up Program annuallyThe total % of Step Up participant s who report increase participation in leisure time physical activity through participant surveys -Biometric screening #'s before and after program completion.
2. Expand the role of public and private employers in obesity prevention		2A - 1. Implement evidenced based strategies for County Employee Wellness Program that facilitates increased physical activity and nutrition	PH/Wellness Committee/ Finger Lakes Breastfeeding Coalition	Ongoing	 -Increase in the total # of employees participating in the wellness program by at least 5% annually. -Track employee participation annually -Continue to track employees BMI, blood pressure, cholesterol and glucose annual through biometric screenings conducted by Health Department Nursing staff.
	B. By December 31, 2017 to increase the % of employers with support for breastfeeding at the worksite by 10% in Seneca County.	2B - 1. Work with Seneca County government or another Seneca County municipality to investigate and adopt at least 1 healthy vending machine and/or healthy meeting policy. Compile and disseminate information to employers to encourage participation.	PH/Wellness Committee/ Finger Lakes Breastfeeding Coalition	By 2017 Start 2015	-Adoption of healthy vending policy and/or documented changes in vending machines, increase in sales of healthy options# information disseminated, # employers contacted

Prevention Agenda Focus Area: Prevent Chronic Disease Goal 1: Reduce Obesity in Children and Adults							
Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/Evaluation		
the role of public and private ir employers in obesity en prevention ws bri w 11 S	B. By December 31, 2017 to increase the % of employers with support for breastfeedi	2B - 2. Work with the Finger Lakes Breast Feeding Coalition to increase access to breastfeeding information and encourage continued breastfeeding after delivery for new moms.	FL Breastfeeding Coalition, PH, Seneca County Employee Wellness Committee, CCE	Ongoing	-EHR documentation (where available) of education, % of women exclusively breastfeeding and breastfeeding at 6 months, -10% increase of WIC mothers breastfeeding at 6 months and BRFSS data by 12/2017		
	ng at the worksite by 10% in Seneca County.	2B - 3. Develop and adopt a Seneca County Employee Policy for support of breastfeeding in the workplace.	FL Breastfeeding Coalition, PH, Seneca County Employee Wellness Committee, CCE	October 2013	Adoption of a Seneca County supports for breastfeeding at the worksite policy.		
		2B - 4. Post breastfeeding friendly signs in county office buildings for employees and the public. Outline designated areas for staff and public to breast feed. Educate the public and employees about the policy.	FL Breastfeeding Coalition, PH, Seneca County Employee Wellness Committee, CCE	January 2014	The #of new policies with supports for breastfeeding at the worksite policies in place. Number of county employees who report continuing to breastfeed and/or pump upon returning to the workforce.		
		2B - 5. Identify at least 2 Seneca County employers to work with to adopt a breast feeding support policy for their workplace	FL Breastfeeding Coalition, PH, Seneca County Employee Wellness Committee, CCE	2016	The #of new policies with supports for breastfeeding at the worksite policies in place.		

Prevention Agenda Focus Area: Prevent Chronic Disease

Goal 1: Reduce Obesity in Children and Adults

			_		
Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/Evaluation
2. Expand the role of public and private employers in obesity prevention	B. By December 31, 2017 to increase the % of employers with support for breastfeedi ng at the worksite by 10% in Seneca County.	2B - 6. Encourage, promote and support initiatives within Head start and early childhood programs to teach children early about nutrition. Provide support to the Family Resource Center and Head Start Programs in reducing screen time, improving nutrition and increasing physical activity in child care settings.	Head start, Early Childhood Programs, PH, CCE, Family Resource Center	January 2014	# of policies developed or revised that are adopted in accordance with best practice
3. Reduce Obesity in Children and Adults	C. Prevent childhood obesity through early-care and schools	3C - 1. Provide evidence based programming for parents that focus on healthy eating, increased physical activity and reduced screen time such as the WE CAN Program.	Head start, Early Childhood Programs, PH, CCE, Family Resource Center	Annually	# Of parents completing WE CAN Program.
		3C - 2. Train childcare staff in benefits of obesity prevention, and regulations and policies that support breastfeeding, quality nutrition, increased physical activity and reduce screen time for children.	Head start, Early Childhood Programs, PH, CCE, Family Resource Center	Annually	-Track Baseline BMI for Head Start children at the beginning of the school year and the endScreen time logs, physical activity logs -Pre and Post Test of childcare staff -Total # of new policies implemented
		3C - 3. Implementation of Choose Health: Food, Fun and Fitness in 2/4 Seneca County public elementary schools and at least one summer recreation/after-school program.	PH/Seneca County Employee Wellness Committee	Annually beginning 1/2014	# of classes held and total # of students, pre and post tests Increase in the number of Schools and/or Recreation/Summer Programs implementing program.

Geneva General Hospital - Community Service Plan 2013-2015

Prevention Agenda Focus Area: Prevent Chronic Disease

Goal 1: Reduce Obesity in Children and Adults

Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/Evaluation
3. Reduce Obesity in Children and Adults	D. Expand the role of health care and health service providers and insurers in obesity prevention	3D - 1. Develop curriculum and educate health care professionals to talk with their patients about their weight (including physical activity and diet) and their tobacco use, as appropriate. Encourage discussions that include dividing goals into manageable milestones and that health care professionals can easily link their patients with available community resources. Investigate the use of EHR as a tool for health care providers to link patients with appropriate community resources.	Local Health Care Providers, PH, Finger Lakes Health	July 2015 – On-going	Curriculum developed, # educated, # resources disseminated, track usage of EHR where applicable
		3D - 2. Offer the Stanford Chronic Disease Self-Management program Healthy Living at least 2 times annually for Seneca County residents diagnosed with Chronic Diseases.	SCHD, RSVP, SCOFA	Annually starting 1/14	At least 20 people with chronic disease annually will have taken a course and demonstrate improved management of their condition via QTAC surveys. -Attendance rosters will be maintained, participant surveys will be utilized.
4. Increase access to high quality chronic disease preventive care and management in clinical and community settings	E. Promote culturally relevant chronic disease self-manageme nt education	4E - 1. Ensure that decision support/reminder tools of and the community resources sections of EHRs are being used, and assist in providing information to populate community resources sections, if needed	FLH, Seneca County Health Solutions Team	January 2015	Implementation of decision support/reminder tools in EHR, documentations of use of community resources

Geneva General Hospital - Community Service Plan 2013-2015

Prevention Agenda Focus Area: Prevent Chronic Disease

Goal 1: Reduce Obesity in Children and Adults

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Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/Evaluation
4. Increase	F. Train primary care	4F - 1. Monitor implementation of	FLH, Seneca	July 2015	Implementation monitored through EHR.
access to high	providers (PCPs) to talk	EHR use	County Health		
quality	with their patients about		Solutions		
chronic	their weight (including		Team		
disease	physical activity and diet)				
preventive	and their tobacco use, as				
care and	appropriate. Ensure that				
management	such discussions include				
in clinical and	dividing goals into				
community	manageable milestones and				
settings	that PCPs can easily link				
	their patients with available				
	community resources				
	simply, through the EHR				

	Prevention Agenda Focus Area: Promote Mental Health and Prevent Substance Abuse								
Goal 2: Preven	Goal 2: Prevent Substance Abuse and other Mental Emotional Behavioral Disorders								
Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/Evaluation				
1. Prevent	A. Reduce	1A - 1. Adoption of social host law in Seneca County.	Seneca County	Done	-Policy adopted				
Substance	underage	Education to the general public to increase awareness of the	Substance	Effective	-# of arrests made				
Abuse and	drinking	new Social Host Law and to promote social norm against	Abuse Coalition	7/29/13	-#of underage youth referred to ADPEP -				
other Mental		underage drinking	(SCSAC)		Program				
Emotional		Publicize Seneca County Social Host Law and the legal	Committee,		-# referred to SC Probation for Community				
Behavioral		consequences for providing or allowing underage drinking.	Local		Service				
Disorders		Distribute brochures to churches, libraries, schools, use of	Government,						
		social media, website.	Local Law						
			Enforcement						
		1A - 2. Support the implementation of "drug free	SCSAC	DFC	Implementation of 7 DFC Strategies and data				
		communities" and evidence based strategies to reduce		awarded to	driven planning efforts				
		underage drinking and drug use (such as those promulgated		Seneca					
		by the US Surgeon General and CDC) among youth.		County					
				Substance					

		1A - 3. Seek additional funding to advocate for underage drinking initiatives, drug free programs and increased	SCSAC	Abuse Coalition Oct 2013 DFC awarded	-Dollars awarded -In-kind leveraged dollars
		alcohol education within the community.		Dec 2013	-DFC grant application funding reward letter -SCSAC Sustainability Plan
		1A - 4. Work to decrease the % of favorable parental attitudes toward underage drinking through community forums to educate parents and other community members on the risk of underage drinking , how youth obtain alcohol, and the role of adults in influencing youth attitudes about drinking.	SCSAC	Dec 2013- 9/29/14	-# social media messages posted, # educational materials disseminated, # adults reached, 3 of print media -Community Underage Drinking Survey will be used to measure change in attitudes and perceptions re: acceptance of underage drinking every 2 years by 2016)
Goal 2: Preven	t Substance Abı	Prevention Agenda Focus Area: Promote Menta use and other Mental Emotional Behavioral Disorders	al Health and Prev	vent Substance	e Abuse
Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/Evaluation
1. Prevent Substance Abuse and other Mental Emotional Behavioral	B. Strengthen Social Norms that Reduce Substance	1B - 1. Create a curriculum and/or disseminate information to health care providers on the warning signs of substance abuse among youth.	PH, Local Health Care Providers, FLACRA, Council on Alcoholism	2013	Curriculum developed, # educated, # disseminated
Disorders	Use among youth. Reduce excessive alcohol	1B - 2. Survey youth regarding access to alcohol, marijuana, tobacco and prescription drugs for minors	SCSAC	Ongoing - 2017	-Data compiled from Youth Development Survey to be implemented in all 4 Seneca County School Districts MS/HS students. Survey conducted every 2 years. -Reduce youth access to alcohol
	consumption among adults.	1B - 3. Work with local schools to disseminate letters regarding underage drinking to community members during key times of the year (prom, graduation, holidays, etc.). Presentations to school boards, parent groups, information	SCSAC	Annually	-Letters created, # of letters sent, feedback from law enforcement in reduction of underage drinking parties after dissemination of letters -# of community engagement opportunities -
		distributed at Open Houses 1B-4. Partner with TACFL to reduce visibility and	PH		Prom Pledges signed -# of youth led initiatives

		avail	ability of tobacco products to youth.		SCSAC TACFL		-Increased participation from Seneca County Schools and youth groups -Laws or policy adopted re: Tobacco Point of Sale
	and/or policies for clean smoke free outdoor spaces		TACFL PH SCSAC	Ongoing	# of smoke-free outdoor policies or laws adopted		
		1B - 6. Encourage health care providers to speak with their patients about their alcohol use (substance abuse)			FLACRA Council on Alcoholism Seneca County Addictions Program, PH	2014-2017	Curriculum developed, # educated, # disseminate
			7. Encourage providers to refer ptx for appropriate older appropriate treated appropriate appropriate treated appropriate		FLACRA Council on Alcoholism Seneca County Addictions Program, PH	2014-2017	Increase in the # of referrals from providers to Substance Abuse Treatment Providers
Coal 2: Provent	Substance Abi	150 011	Prevention Agenda Focus Area: Promot dother Mental Emotional Behavioral Disorders	e Menta	al Health and Prev	ent Substance	Abuse
Strategy Area	Objecti		Activities		Partners	Timeframe	Measurement/Evaluation
1. Prevent Substance Abuse and other Mental Emotional Behavioral Disorders	C. Prevent Substance		1C - 1. Work with local agencies to adopt tobacco-free regulations for mental health facilities (Disparity - reduce the prevalence of cigarette smoking among adults who report poor mental health).	1	Mental Health ies, PH, TACFL	2013-2014	# facilities that adopt regulation
			1C - 2. Work with local agencies to understand evidence-based practices for smoking cessation among individuals with mental illness and/or substance abuse and look for opportunities where these might apply (Disparity - reduce the prevalence of cigarette smoking among adults who report poor mental health).	Facilit and TA	Mental Health ies, PH, GRATC ACFL, Ovid nunity Health	1 Annually beginning 2015	# evidence based practices researched, # opportunities identified, # implemented
	D. Preven	e	1D - 1. Work with local agencies to understand evidence-based practices for MEB health promotion and MEB disorder	Menta	l Health	Ongoing	# practices researched, # implemented, # school contacted

mental emotional a behavioral	prevention. Promote evidence-based curriculums in school settings.			
disorders among you and adults.	1D - 2. Promote universal screening of all children for mental emotional and behavioral disorders among children through the Early Recognition and Screening Grant.	Mental Health Seneca County System of Care Group Partners for Youth and Children 0-8 Committee Franziska Racker Center	2014-2016	-# of Seneca County children screened -# of Seneca County Providers educated and utilizing universal screening tool

V: Three-Year Plan of Action – Yates County:

Prevention Agenda Focus Area: Prevent Chronic Diseas	e
Goal 1: Reduce Obesity in Children and Adults	

Strategy	Objective	Activities	Partners	Timefram	Measurement/Evaluation		
Area				e			
1.	A. Create	1A - 1. Work with local food programs to		June 2014	# Food pantries using local		
Reduce	community	increase use of local food produce	(CHY)	_	produce		
Obesity	environments	(<u>www.ampleharvest.org</u>) and provide		On-going	# Clients educated		
in	that promote	education to clients.					
Childre	and support						
n and	healthy food	1A - 2. Contact county restaurants to mark	CHY	January	# Restaurants participating		
Adults	and beverage	healthy choices on menus.		2014 and	# Contacted		
	choices and			on-going			
	physical						
	activity	1A - 3. Encourage CHY members,	CHY/Chamber/	January	# Organizations that adopt		
		YCHPC members, non-profits and local	YCHPC	2014 and	policy		
		businesses to adopt healthy meetings		on-going	# Contacted		
		guidelines.					
		1A - 4. Encourage CHY and YCHPC	CHY/Chamber/	January	# Organizations that adopt		
		members, non-profits and local businesses	YCHPC	2015 and	policy		
		to adopt sugar sweetened beverage		on-going	# Contacted		
		policies.					
		1A - 5. Work together to increase	Breastfeeding	June 2014	EHR documentation of		
		breastfeeding in Yates County. Encourage	coalition/Chamber/	and on-	education, document # of		
		CHY members, YCHPC members, non-	WIC/Physicians/CHY/	going	all referrals made to breast		
		profits and local businesses to adopt breast	YCHPC	_	feeding specialist, %		
		feeding policies.			increase of WIC mothers		
					breastfeeding at 6 months		
					# Contacted		
					# Organizations that		
					choose to implement a		

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				policy
	1A - 6. Investigate further initiatives to	Breastfeeding Coalition	January	10% increase of WIC
	support breastfeeding within the county.	CHY	2016 and	mothers breastfeeding at 6
			on-going	months years annually for 3

Prevention Ag	genda Focus Area:	Prevent Chronic Disease
Goal 1:	Reduce Obesity in	Children and Adults

Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/Evaluation
1. Reduce Obesity in		1A - 7. Advocate for the implementation of	CHY/Chamber/	January	# Organizations that adopt
Children and Adults	A. Create community environmen	healthy vending policy in County facilities, hospitals and among YCHPC and CHY members.	YCHPC	2016 and on-going	policy # Contacted
	ts that promote and support	1A - 8. Promote use of Farmer's Markets (and EBT use for) at WIC Clinics.	CHY/WIC/DSS/ Office of the Aging	June 2014	Measure increased use of EBTs at Farmer's Markets # Contacted
	healthy food and beverage choices and	1A - 9. Encourage use of walking programs and other physical activity competitions, including county 5ks/races, triathlons, bike races etc.	FLH/CHY/libraries/ Community Center/Our Town Rocks	Spring 2014 and on- going	# of participants # of miles walked
	physical activity	1A - 10. Implement Girls on the Run program in Penn Yan and Dundee for grades 3-5.	CHY/Youth Bureau	Spring 2014	Minimum of 8 girls per team (one team in Penn Yan, one team in Dundee)
	B. Prevent childhood obesity through	1B - 1. Partner with child care centers, Head Start programs, local schools and after school programs to promote reducing screen time, healthy living, eating and physical	CHY/Child and Family Resources	June 2014 and on- going	Track changes in nutrition, physical activity and reduced screen time # Contacted

	activity.			# That report implementing a change
	1B - 2. Work with school cafeterias			
early-care	encouraging use of local produce and farms.			
and	1B - 3. Continue to develop, expand and			# of contacts made/
schools	publicize joint use agreements with schools.			encouraged
schoois				# of joint use agreements
	1B - 4. Ensure that women enrolled in	YCPH	March 2014	% of patients educated
	MOMS program are getting adequate		and annual	# and type of referrals
	education and referrals for diet, physical		check-ins	made
	activity and breastfeeding education.		thereafter	
	Provention Agenda Focus Area	Provent Chronic Disc	asa	

Prevention Agenda Focus Area: Prevent Chronic Disease **Goal 1:** Reduce Obesity in Children and Adults

Strategy	Objective	Activities	Partners	Timeframe	Measurement/Evaluation
Area					
		1C - 1. Encourage that providers use their EHRs to trigger them to speak to their patients about their weight, diet and exercise and refer them to community resources.		January 2015	% of providers who use decision support software in the EHRs to help them discuss diet and exercise with their patients (if available) % referring to community resources # Contacted/educated # of providers who have EHR

Prevention Agenda Focus Area: Prevent Chronic Disease **Goal 1:** Reduce Obesity in Children and Adults

Strategy Area	Objective	Activities	Partners	Timeframe	Measurement/Evaluatio n		
Aita	D. Expand the	1D - 1. Develop list of free resources available to support worksite wellness efforts.	СНҮ	January 2015	Resource list developed		
	role of public and private employers in obesity	1D - 2. Disseminate resources to worksites.	CHY/Chamber	March 2015- June 2015	Distribute to at least 40 worksites		
	prevention	1D - 3. Continue to seek grants to implement worksite wellness programs.	CHY/S2AY	As grant opportunities arise	Attempt to apply for at least 2 grants annually		
1. Reduce Obesity in Children and Adults	E. Develop and implement community-led, place-based interventions targeted to address the social determinants of health in high-priority vulnerable communities.	1E - 1. Engage Dundee area residents to use the assets of their neighborhood to carry out activities that will impact the physical, social and economic health of the community. Including: - Make healthy eating and being active easier choices by offering healthy foods, providing pedometers, creating walking trails, improving parks. - Improve social connections by residents working together to create programs, events that bring other residents together-community events, youth trips and activities. - Enable children to become proficient readers by providing age-appropriate books	OTR/S2AY/ YCHPC	Private Foundation funding through 1/2016. May be renewed.	Quarterly and annual reports to the Foundation. Participant and community-level outcomes.		

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birth-Grade 3 and creating a community		
culture that supports reading.		
- Encourage small business growth by		
providing Micro-enterprise loans.		
- Encourage business and tourism by		
working to beautify the environment		

Prevention Agenda Focus Area: Prevent Chronic Disease **Goal 2:** Reduce Hypertension

Strategy	Objective	Activities	Partners	Timeframe	Measurement/Evaluation
Area 2.	A. Prevent chronic disease	2A - 1. <i>Disparity:</i> Utilize alternative methods of care, including telehealth, teledentistry and rural rotations (cardiology and nephrology services) to meet the needs of low-income rural residents.	FLH and FLCH	11/13 and on-going	# of low-income and rural patients using alternative methods of care
Increase access to high quality chronic disease		2B - 1. Work to prevent hypertension by assisting hospitals, nursing homes and senior meal providers in reducing sodium content in all meals served including to patients, visitors, staff and public.	YCPH/Hospitals/ Nursing Homes/ Office for the Aging/S2AY/ CHY	January 2014 and on-going	Reduce sodium content by 30% over 3 years, by November 2017
preventive care and management in clinical and community	B. Decrease hypertension rates	2B - 2. Work with the FLHSA to bring the hypertension reduction program down to Yates County. Work with/seek other funding sources as applicable.	FLHSA/S2AY RHN/CHY	•	Implementation of program and at least 75 people enrolled by December 2015. Increase percentage of people managing their hypertension to 75% by December 2017.
settings		2B - 3. Encourage and educate 2 dental offices (FQHC's) to take blood pressure of adults and refer to primary care provider if appropriate	RPCN/FLCH/ CHY	January 2014 and on-going	Track number of dental patients receiving preventive care and who have their blood pressures assessed, and number of those with high

	blood pressure committing to being seen by their primary care physician.
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Finger Lakes Health Strategies for Identified Priorities:

Finger Lakes Health believes that healthcare consumers taking active responsibility for their own health is the single most vital aspect to improving the quality of healthcare and to having healthier individuals and healthier communities.

According to the World Health Organization (WHO), if the major risk factors for chronic disease including inactivity, poor nutrition, excessive alcohol consumption and smoking were eliminated, at least 80 percent of heart disease, stroke and Type 2 diabetes would be eradicated and 40 percent of cancer would be prevented. Finger Lakes Health's goal, as a healthcare provider, is to be a vital partner with healthcare consumers (our patients) to encourage awareness and dialogue about modifiable risk factors, outline the path and provide necessary support to achieve good health outcomes, and positively impact the health of the communities we serve. We are committed to ensuring local access to care. As part of that commitment, we continue to recruit physicians, including specialists who provide multiple access points to care across our communities. For instance, cardiology, orthopaedics and physiatry services are offered at multiple offices across our service area.

We also are developing initiatives, and designing our new facilities with patient-centered, evidence-based, outcome driven goals in mind. Our team has been working to achieve the best quality care outcomes to keep patients healthy and to develop prevention-oriented programs aimed at creating and sustaining healthy communities.

A sampling of recent accomplishments toward this end includes:

- Geneva General Hospital being one of the top hospitals in our state and nation for the highest quality and lowest readmission rate for inpatient care;
- Our "Journey to the Best" Modernization and Expansion project at Geneva General Hospital, which will include 106,000 square feet of new construction and 45,000 square feet of renovation leading to 100% private patient suites with room for family and caregiver; a new 14-bed Intensive Care Unit for our most acutely ill patients; an expanded Surgical Services department with four new operating rooms supporting less invasive procedures; and of course the new, recently opened, expanded Emergency Department;
- Participation in the NYS Partnership for Patients Initiative with SSMH being recognized as an "exemplary hospital" achieving the highest scores in seven of nine categories and GGH being recognized as an "exemplary hospital" and one of the top ten safest facilities in New York State due to the lowest infection rate;
- Development and implementation of a Cardiac Pre-Hab program focusing on prevention of heart disease for at-risk patients;

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- Recognition by the American Heart Association/American Stroke Association with the Gold Plus Quality Award for our Stroke Center and continued recognition as a NYS Stroke Center and Joint Commission Stroke Center of Excellence;
- Expanded rehabilitation services within our Long Term Care facilities focused on maintaining and improving function and strength for our residents;
- Soldiers & Sailors being recognized at the Island Peer Review (IPRO) with the Critical Access Hospital Quality Award; and
- Our pharmacy team working with patients prior to admission to reconcile medication lists and ensure appropriate planning for patients' standard medications to be managed during an inpatient stay.

In addition to collaborating with the Public Health Departments for the counties in our service area, Finger Lakes Health has been and will continue to focus efforts and resources with some of our own initiatives related to common identified priorities across our service area at the same time as we support each of the plans as developed by our county partners.

PREVENT CHRONIC DISEASE - Reduce Obesity in Children & Adults & Reduce Hypertension & Stroke

- Finger Lakes Health provides educational information in its community health magazine *Thrive*, which is mailed to more than 90,000 homes in our service area. Articles have included:
 - o Advice to Thrive on − a Message from the CEO
 - Prevention tips for stroke, high blood pressure, high cholesterol, diabetes
 - Suggestions for staying healthy and preventing chronic disease such as stop smoking; limit alcohol consumption, maintain a healthy weight, include exercise I your daily routine, eat a nutritious, balanced diet, maintain good oral health.
 - Know & Manage Your Numbers blood pressure, blood glucose, cholesterol and triglycerides.
 - o Turn off the TV Challenge
- Finger Lakes Health Matters is an educational radio show aired 26 times each year on the regional Finger Lakes Radio Network featuring health system professionals speaking to a wide range of health topics.

- Dine & Discuss Lecture Series is conducted in the spring and fall. It features educational lectures presented by health system physicians and other healthcare professionals on carried topics, including such things as COPD and stress management.
- Finger Lakes Health conducts free Support Groups to help individuals and their families/caregivers cope with chronic diseases including Diabetes & Stroke.
- In addition to the Diabetes Support Groups, held monthly in two communities, we have dedicated Certified Diabetes Educators who do one-on-one counseling with diabetics, as well as conducting educational classes for diabetics and their support person and providing continuous glucose monitoring services for diabetics.
- Geneva General Hospital is a Joint Commission accredited and New York State-designated Stroke Center. Providers conduct Stroke Education, in addition to the Support Group, on a regular schedule for Emergency Medical Services providers in our service area, as well as for general community members. The education covers signs and symptoms, as well as risk factors and prevention information.
- Finger Lakes Health offers one-on-one nutrition counseling to community members.
- Weight Watchers and TOPS weight management programs are offered at Geneva General Hospital.
- Blood Pressure screenings are offered by the Cardiac Rehab program at Soldiers & Sailors Memorial Hospital, Penn Yan; by the Acute Rehab Unit at Geneva General, and by health system staff at the Community Lunch program in Geneva, as well as at work places or special events, as requested by community organizations.
- Finger Lakes Health will present the fifth season of its Walk & Talk for Health program in 2014. The community walking program is led by healthcare professionals in three communities who offer fitness and healthy nutrition tips. Walkers are given pedometers and walking journals to track steps. In addition, they are provided free cholesterol, A1C and blood pressure screenings at the beginning and end of each program cycle. More than 200 community members have participated in the program the last four seasons. Additionally, we have a Walk at Work program, now called Staff Steps, in which our employees participate as individuals or on teams, similar to the community program. The employee program has been held twice, with approximately 400 employees participating in the 2013 program. Our plan is to expand these efforts by engaging local businesses in our service areas to encourage their staff to walk and participate in a friendly competition with other local

businesses. We have found with our employee programs, that the fun of the competition makes the benefit of fitness more enjoyable and easier.

- The Geneva General Child Care Center has offered five Cubby Chase events a 5K and Family Fun Run. The event has grown to include a 10K event and plans are to expand to a half marathon as well. As the Cubby Chase has evolved, a program called "From Couch to Cubby" was started. Couch to Cubby provider trainers who work with "couch potatoes" to get them moving. They safely increase their exercise level and stamina with the goal of completing the 5K.
- The Finger Lakes Health Running Club was born out of the Cubby Chase. This is a group of regular runners who condition together and participate in other area races.
- The health system has recently developed a nutrition mentoring program for local schools utilizing a program called "Food, Fun & Fitness", based on the evidence-based curriculum of Cornell Cooperative Extension. The program involves training high school age students as mentors who in turn will go into classes of elementary age children and teach them healthy habits. The program started in the fall of 2013, with training of the first group of mentors from the Geneva City School District. They will begin providing the mentoring program in 2014. We also are starting discussions with Marcus Whitman Central School District, Rushville, (located in Yates and Ontario counties), with plans to initiate the program in that school district.
- Finger Lakes Health's Chief of Cardiology created a program called "Cardiac PRE-hab" to provide the best option to heart disease, stroke, obesity, and other chronic health problems PREVENTION. Based on the premise of very successful Cardiac Rehab programs for those who have already suffered a cardiac incident, Cardiac PRE-hab is a health and fitness program designed to teach participants how to stay health and prevent a heart incident. The 10-week program incorporates risk factor modification, learning about the benefits of physical activity and healthy nutrition/cooking, and strategies for encouraging others to lead a healthy lifestyle. The first two, 10-week sessions were held in 2013 in Seneca County, which has a high incidence of heart-related illnesses. Finger Lakes Health will expand the PRE-hab program to Ontario and Yates counties during 2014. The program sessions include:
 - Specially designed lectures from practitioners who understand the importance of education with respect to risk factor modification;
 - Sessions with nutritionists to help you improve your eating habits;
 - Sessions with certified athletic trainers, and

 Personal cardiac health screenings to determine your Body Mass Index, lipid and glucose levels, and blood pressure.
Finger Lakes Health sees the challenge for all initiatives aimed at addressing the health priorities as being engaging the community – getting
people to take an active role in improving and maintaining their own health. We will seek to address this challenge through all our community
outreach programs in an effort to improve the health status of the communities we serve.

VI. Dissemination of the Plan to the Public

Geneva General Hospital disseminates information to the public regarding its community health programs in a number of ways: The Community Service Plan and annual updates of the plan are posted on the Finger Lakes Health website www.flhealth.org. The Community Service Plan is shared with board members and community leaders. The plan's content, along with data from our federal community benefit report, photos and narrative about our community outreach programs, both Prevention Agenda priority programs and non-Prevention Agenda programs, our financial aid program and information related to the economic impact of the region, is included in our annual "Report to the Community". The report is distributed through our website, our community programs, at presentations for local clubs and organizations, in waiting areas throughout our facilities, to our partner organizations at meetings, etc.

VII. Maintaining Engagement with Local Partners

To continue engagement with local partners to successfully implement the Community Service Plan and improve health within Finger Lakes Health's service area – Ontario, Seneca and Yates counties, Geneva General Hospital and Finger Lakes Health actively participates in a variety of coalitions/committees. Standing committees include: Ontario County Health Collaborative, made up of representatives from Geneva General and other Ontario County hospitals, Ontario County Public Health Department, as well as the Seneca Health Solutions Team in Seneca County, and the Yates County Health Planning Council and Choose Health Yates Coalition in Yates County. Finger Lakes Health, as a relatively large health system serving the constituent counties, makes up its own committee in some sense. Each of these groups will meet regularly to share progress and relay any barriers that they are experiencing throughout the course of the Community Service Plan implementation. Progress will be tracked through the work plans that were developed in each county, using input from each participating organization. Each entity will be responsible for tracking their objectives and communicating to the committee any problems that may interfere with completion of objectives (changes to timeframe, evaluation methods, data tracking, etc.). Committees will work together to break down barriers that arise and collaborate to meet the objectives outlined within the work plan.

Each county will use their respective Activity Work Plans to assure that activities and goals are being met and timeframes are being adhered to. The Activity Work Plans will also help to predict if an activity or objective needs to be reassessed and adjusted to overcome barriers and meet timeframe goals.

Finger Lakes Health also will work on the strategies it has identified to work on across its service area, will track results of the strategies and report them to our partners across our service area as well as in the Community Service Plan updates in the future.

<u>Attachment A</u>– Ontario County Community Health Assessment Summary

Ontario County Community Health Assessment

County	Ontario	Census
# surveys	578	104,205
Under 35 yo	13.5%	41.7%
35 to 65 yo	77.1%	44.4%
White	97.6%	93.8%
AAS or more	75.5%	44.5%
Bach or more	49.1%	30.9%
Full time	84.2%	
Town	Canandaigua 38.0% Geneva 15.7%	
20+ yrs in cty	63.6%	
\$25k or more	92.7%	79.9%
\$50k or more	69.4%	55.6%
Married	64.9%	52.4%
Insured	96.8%	86.3% (EBRFSS)
Average BMI	30.6	
Female Average BMI	31.7	
Male Average BMI	29.4	
Comp survey	81.7% (472)	

Do you think that access to primary health care (family doctor) is a problem in Ontario county:					
Answer Options	Problem for YOU	Problem in Ontario County	Don't know or unsure	Response Count	
For low-income families?	2.76%	57.87%	39.76%	508	
For the elderly?	0.62%	54.62%	44.97%	487	
For all in community?	1.05%	44.51%	54.64%	474	
For persons with disabilities?	1.04%	45.32%	53.64%	481	
For persons new to the area?	1.64%	49.28%	49.49%	487	
Total Respondents	539				

Do you think that access to behavioral health care in the following areas is a problem in Ontario County for:						
Answer Options	Problem for YOU	Problem in Ontario County Don't know or unsure		Response Count		
Alcoholism	0.84%	52.30%	47.28%	478		
Developmental Disability	1.54%	37.14%	61.76%	455		
Drug Abuse	0.62%	57.70%	42.09%	487		
Gambling Addictions	0.63%	36.84%	62.74%	475		
Mental Health	2.61%	57.11%	41.28%	499		
Total Respondents	531					

CHOO - Choose Health Ontario	Problem for YOU	Problem in Ontario County	Don't know or unsure	Respons e Count	% Adults Affected EBRFSS/DOH Ontario County	% Adults Affected EBRFSS/DOH NYS
15. Lack of physical activity & fitness	19%	59%	24%	508	17.9%	23.7%
14. High blood pressure, stroke	13%	44%	43%	465		
16. Poor nutrition (unhealthy eating)	9%	64%	29%	498	67.1%	72.9%
9. Depression / other mental illnesses	8%	66%	27%	503		
17. Problems with teeth or gums	8%	38%	55%	470		
5. Arthritis, Alzheimer's, Dementia, Memory Loss	8%	54%	39%	488		
3. Access to specialty health care	7%	49%	45%	484		
19. Quality of well water	7%	23%	71%	480		
18. Pulmonary diseases (COPD, Emphysema, Asthma)	7%	41%	53%	456		
10. Diabetes	6%	48%	47%	470	7.4%	9.0%
8. Cancer	4%	55%	41%	459		
21. Smoking / tobacco use	4%	65%	31%	477	20.0%	17.0%
13. Heart disease (Congestive Heart Failure, Angina, "A-fib")	4%	47%	50%	453	7.1%	6.3%
6. Behavioral problems in children	4%	62%	35%	514		
12. Eating disorders	3%	35%	63%	468		
23. Transportation to health care	2%	55%	43%	478		
1. Access to home care	2%	42%	56%	494		
2. Access to pregnancy care	1%	16%	83%	445		
22. Teen pregnancy	1%	51%	49%	475	1.6%	2.1%
25. Unplanned pregnancy	1%	43%	57%	465		
7. Birth defects	1%	13%	86%	456		
24. Underweight or premature babies	0%	13%	86%	443	6.0%	8.2%
20. Sexually transmitted diseases (Chlamydia, Herpes, HIV/AIDS)	0%	34%	66%	459		
4. Alcohol abuse	0%	55%	44%	480	21.0%	18.1%
11. Drug abuse/abuse of prescription drugs or illegal drugs	0%	72%	28%	499		
Total Respondents				571		

		#1 Duis with A four VOLL						
	#1 Priority for YOU							
1. Access to home care	9. Depression / other	3. Access to specialty	8. Cancer	15. Lack of physical				
1.7 tocos to nome care	mental illnesses	health care	o. cancer	activity & fitness				
6.56% (32)	7.58% (37)	7.99% (39)	8.81% (43)	15.16% (74)				
		#2 Priority for YOU						
	5. Arthritis,							
14. High blood	Alzheimer's,	9. Depression / other	15. Lack of physical	16. Poor nutrition				
pressure, stroke	Dementia, Memory	mental illnesses	activity & fitness	(unhealthy eating)				
	Loss							
6.43% (29)	7.76% (35)	7.76% (35)	9.09% (41)	9.09% (41)				
		#3 Priority for YOU						
3. Access to specialty	16. Poor nutrition	6. Behavioral problems	9. Depression / other	15. Lack of physical				
health care	(unhealthy eating)	in children	mental illnesses	activity & fitness				
6.35%(25)	6.35%(25)	6.85% (27)	7.87% (31)	12.18% (48)				
Total Respondents	Total Respondents 491							

Most Important Problem						
9. Depression / other mental illnesses	1 15 Tack of physical 1					
10.87% (54)	10.87% (54)	9.46% (47)	9.05% (45)	6.84% (34)	6.84% (34)	
Total Respondents			498			

Do you think that violence in the following areas is a problem in Ontario County?						
Answer Options	Problem for YOU Problem in Ontario County Don't know or County Responsion County					
Child abuse / neglect	0.59%	62.06%	37.55%	506		
Elder abuse / neglect	0.40%	43.95%	55.85%	496		
Sexual assault	0.63%	38.78%	60.80%	477		
Spouse / partner abuse	0.82%	43.88%	55.31%	490		
Violence among young adults - bullying	2.30%	67.56%	31.29%	521		
Total Respondents	539					

Do you think that there is a problem being seen by or receiving services from any of the following in Ontario County?					
Answer Options	Problem for YOU	Problem in Ontario County	Don't know or unsure	Response Count	
Home care services and supports	1.72%	41.59%	56.90%	464	
Mental/behavioral health	3.09%	52.99%	45.15%	485	
Nursing homes	0.66%	44.40%	55.16%	455	
Nutritionists / Dieticians	2.45%	28.06%	69.71%	449	
Pharmacies	1.75%	13.03%	85.46%	399	
Specialized support groups	2.28%	33.26%	64.92%	439	
Specialty doctors	5.92%	43.42%	51.97%	456	
Therapists (physical, speech, occupational)	2.13%	24.59%	73.52%	423	
Total Respondents	534				

Which of your health behaviors would you like to improve? Check all that apply					
Answer Options Response Percent Count					
Alcohol consumption	5.3%	27			
Eating habits	50.5%	256			
Managing stress	48.5%	246			
Physical activity	61.9%	314			
Tobacco use 6.5% 33					
Weight 70.8% 359					
Total Respondents 507					

How many times per week do you exercise?						
Answer Options	Response Percent	Response Count	% with no leisure time activity EBRFSS Ontario County	% with no leisure time activity EBRFSS NYS		
One	10.9%	57				
Two	19.9%	104				
Three	19.7%	103				
Four	11.3%	59	17.9%	23.7%		
Five or more	16.9%	88				
None	19.7%	103				
Does not apply	1.5%	8				
Total Respondents 522						

If you don't exercise, what keeps you from exercising? Check all that apply						
Answer Options	Response Percent	Response Count				
Lack of transportation	0.9%	3				
Safety (no street lights or sidewalks)	11.7%	38				
Lack of money	19.4%	63				
Choose not to	20.4%	66				
Lack of time	78.1%	253				
Total Respondents	324					

In your community do you have: Check all that apply						
Answer Options	Response Percent	Response Count				
Bike paths	57.9%	265				
Public gym	34.1%	156				
Public pool	23.4%	107				
Sidewalks	76.2%	349				
Street lights	75.3%	345				
Trails	64.4%	295				
Total Respondents	4	158				

If you exercise how long do you exercise for?						
Answer Options	Response Percent	Response Count				
15 minutes or less	10.8%	55				
46 - 60 minutes	14.5%	74				
16 - 30 minutes	32.9%	168				
1 hour or more	9.8%	50				
31 - 45 minutes	16.6%	85				
Does Not Apply	15.5%	79				
Total Respondents 511						

Answer Options	5 or more	3-4	1-2	0 (Rarely)	Response Count	% eating 5+ a day EBRFSS Ontario County	% eating 5+ a day EBRFSS NYS
Yourself?	22%	39%	34%	4%	532	32.9%	27.1%
Your children?	12%	41%	33%	14%	283		
Other adults?	12%	38%	37%	13%	358		
Total Respondents			•	•	535	•	

If fewer than five servings, why? Check all that apply							
Answer Options Response Percent Response Count							
Cost	43.6%	158					
Don't like them	14.9%	54					
Short shelf life	46.4%	168					
Time needed to prepare	40.9%	148					
Total Respondents	362						

Are you currently taking care of? Check all that apply								
Answer Options	Response Percent	% of Total Respondents	Response Count					
Elderly or disabled parent	62.9%	16.5%	78					
Disabled spouse	16.1%	4.2%	20					
Disabled child	14.5%	3.8%	18					
Grandchild	16.1%	4.2%	20					
Total Respondents		124						

Please answer the following questions for yourself or any member of your household who has used any of the listed services in the last 12 months.

in the last 12 months.								
Answer Options	Yes	No, I didn't feel it was needed	No, my insurance doesn't cover it	No, I didn't have time	No, I couldn't afford it	No, I didn't know I/we/they should get it	Response Count	
Did the adults in your household receive a flu shot during the fall or winter of 2011-2012	80%	19%	0%	1%	1%	1%	515	
Did the children in your household receive a flu shot during the fall or winter of 2011-2012	72%	22%	1%	2%	0%	4%	247	
Have the adults in your household received a tetenus shot in the last ten years?	90%	5%	0%	0%	1%	4%	494	
Total Respondents	522							

Please answer the following questions for yourself or any member of your household who has used any of the
listed services in the last 12 months

iisted services in the last 12 months.	Used	Used				
	in	out of	Quality	Distance	Cost	Response
Answer Options	County	County	OK?	OK?	OK?	Count
Adult Day Care	65%	29%	47%	41%	41%	17
Adult Respite Care	50%	40%	40%	40%	50%	10
Alcohol / Drug treatment	67%	42%	50%	33%	46%	24
Ambulance services	85%	21%	67%	52%	38%	84
Audiology (hearing care)	73%	25%	44%	40%	29%	55
Counseling / Mental Health for adults	72%	33%	62%	51%	44%	81
Counseling / Mental Health for children	66%	32%	55%	47%	45%	38
Dentists	84%	18%	66%	59%	42%	419
Doctor's Office	85%	21%	65%	59%	48%	463
Domestic Violence (abuse, Safe House, Catholic Charities)	67%	0%	33%	33%	67%	3
Emergency Response System (Lifeline, Link to Life, Alertlink)	75%	21%	64%	43%	57%	28
Eye care	85%	14%	66%	61%	44%	353
Family Planning Services	82%	9%	73%	68%	64%	22
Farm Safety Education	80%	0%	40%	40%	60%	5
Home Health Services	70%	33%	39%	36%	39%	33
Hospice	67%	29%	48%	29%	38%	21
Hospital	88%	20%	60%	56%	37%	245
Immunizations	86%	12%	62%	58%	55%	138
Lactation Consultant (help with breastfeeding)	77%	23%	77%	54%	62%	13
Mammograms	75%	26%	64%	58%	55%	233
Meals on Wheels	73%	20%	40%	47%	60%	15
Orthodontists (braces for teeth)	73%	22%	65%	57%	33%	63
Orthopedics (bones)	85%	17%	61%	57%	45%	110
Pharmacies	92%	13%	63%	59%	47%	352
Physical therapy services	89%	12%	66%	63%	41%	98
Prenatal care (pregnancy)	82%	14%	73%	64%	59%	22
Senior Meal Sites	57%	14%	29%	0%	14%	7
Support Groups	75%	19%	56%	44%	50%	16
Testing, Counseling & Treatment of STDs, including HIV / AIDS	57%	14%	57%	43%	57%	7
Transportation	85%	23%	46%	46%	46%	13
Total Respondents				511		

Considering all types of alcoholic beverages, how many times in the last 30 days did you have more than 5 drinks (if a man) or 4 drinks (if a woman) on one occasion?								
Answer Options	Response Percent	Response Count	% Binge Drinking (last month) EBRFSS Ontario County	% Binge Drinking (last month) EBRFSS NYS				
None	79.6%	410						
Once	10.3%	53						
Twice	5.6%	29	21.0%	18.1%				
3 or 4	2.1%	11						
4 or more	2.3%	12						
Total Respondents			517					

Please answer these questions regarding alcohol use: (One drink is a beer, a glass of wine or a mixed drink)								
Answer Options	None	1 or 2 a month	1 or 2 a week	1 or 2 a day	More than 2 a day	Response Count	% Heavy Drinkers EBRFSS Ontario County	% Heavy Drinkers EBRFSS NYS
How much alcohol do you drink?	32%	34%	24%	8%	2%	528		
How much do others in your household drink?	38%	22%	22%	11%	6%	454	7.8%	5.0%
Total Respondents		528						

Do you smoke cigarettes now?							
Answer Options	Response Percent	Response Count	EBRFSS Ontario County	EBRFSS NYS			
No	91.8%	479	80.0%	83.0%			
Yes	8.2%	43	20.0%	17.0%			
Yes, one pack (20) per day	1.7%	9					
Yes, Two packs (40) per day	0.0%	0					
Yes, half a pack (10) per day	6.3%	33					
Yes, One and a half (30) per day	0.2%	1					
Yes, more than two packs per day	0.0%	0					
Total Respondents		522	<u>.</u>				

Do you currently use any smokeless tobacco products such as chewing tobacco or snuff?					
Answer Options	Response Percent	Response Count			
Yes, chewing tobacco	0.5%	2			
Yes, both	0.5%	2			
Yes, snuff	0.0%	0			
No, neither	99.0%	392			
Total Respondents	Respondents 396				

Do you use an electronic smoking device (ecigarettes)?					
Answer Options	Response Percent	Response Count			
Yes	2.3%	8			
No	97.7%	338			
Total Respondents	346				

Answer Options	Never	Some times	Always	Response Count
If you have a child age 14 or younger, do your children wear helmets when riding bicycles?	2.96%	11.85%	85.19%	367
If you live where there is an unfluoridated public water supply, would you support putting fluoride in the water supply to improve dental health in the community?	21.84%	10.34%	67.82%	378
Total Respondents	399			

Have the children in your house received immunizations (shots) against childhood diseases?					
Answer Options	Response Percent	Response Count			
No	1.7%	8			
Some, not all	0.2%	1			
Does not apply	41.0%	194			
Yes	56.7%	268			
Not sure	0.4%	2			
Total Respondents	473				

Would you say that in general your health is:					
Answer Options	Response Percent	Response Count	EBRFSS Ontario County	EBRFSS NYS	
Excellent	11.3%	55			
Very good	40.0%	195			
Good	40.0%	195			
Fair	7.6%	37	11.3%	16.7%	
Poor	1.2%	6			
Total Respondents	488				

If you're a current smoker, how long have you smoked?				
Answer Options	Response Percent	Response Count		
One year or less	1.2%	3		
1 - 5 years	1.6%	4		
5 - 10 years	3.2%	8		
10 - 15 years	2.4%	6		
15 - 20 years	0.8%	2		
20 - 25 years	3.2%	8		
25 years or more	7.3%	18		
Does Not Apply	80.2%	198		
Total Respondents	247			

Please choose:	Yes	No	Response Count	EBRFSS Ontario County	EBRFSS NYS
Has your health care provider (doctor) asked about your sexual history during your routine visits?	51%	49%	476	58.0% (No)	61.4% (No)
Has your health care provider (doctor) offered to test you for HIV in the last 12 months?	29%	71%	472		
Have you received advice from your health care provider (doctor) about your weight?	54%	46%	473	20.9%	27.1%
Was there a time in the past 12 months when you needed to see a health care provider (doctor) but could not because of cost?	9%	91%	471		
Total Respondents			479		

Please answer yes or no	Yes	No	Response Count
Do you limit your intake of fatty foods?	79%	21%	483
Are you exposed to second-hand smoke?	15%	85%	482
Has violence or abuse been a problem for any member of your household (including children)?	10%	90%	483
If so, have you sought assistance?	22%	78%	153
Do you feel that you are overweight?	75%	25%	480
Do you feel that you are underweight?	1%	99%	439
Do you need help with managing stress?	33%	67%	476
Does someone in your household need help with managing stress?	31%	69%	460
Do you need help managing depression?	17%	83%	476
Do you feel you would use some kind of program aimed at managing depression?	15%	85%	456
Do you feel any person in your household would use some kind of program aimed at managing depression?	24%	76%	454
Do you feel you or anyone in your household would use some kind of program aimed at suicide prevention?	4%	96%	462
During the past month, did you participate in any physical exercise?	90%	10%	478
Have you removed a tick from your body or from your pet's body in the last year?	10%	90%	478
If you heat with wood, coal or natural gas do you have carbon monoxide detectors in your home?	77%	23%	400
If you have a well, have you tested your well water in the last year?	15%	85%	213
Total Respondents		484	

If you have children have they been tested for lead poisoning?					
Answer Options	Response Percent	Response Count	Incidence Rate DOH Ontario County	Incidence Rate DOH NYS	
Yes, at age one	12.9%	32	_	11.1	
Yes, at age one and age two	13.7%	34			
No	29.8%	74	4.5		
Yes, at age two	7.7%	19	4.5		
Yes, but I don't remember their age.	30.2%	75			
No, I didn't know it was needed	5.6%	14			
Total Respondents		2	48		

Do you use any other form of health care services? Choose all that apply.				
Answer Options	Response Percent	Response Count		
Acupuncture	9.0%	37		
Herbal medicine	7.0%	29		
No	52.9%	218		
Chiropractor	31.6%	130		
Massage Therapy	25.2%	104		
Total Respondents	41	2		

About how long has it been since you last visited a health care provider (doctor) for a routine checkup?						
Answer Options	Response Percent	Response Count	EBRFSS Ontario County	EBRFSS NYS		
1 to 12 months ago	84.2%	401	64.9%	72.7%		
2 to 5 years ago	6.3%	30				
1 to 2 years ago	8.8%	42	80.4%	85.7%		
Never	0.6%	3				
Total Respondents	476					

Answer Options	Response Percent	% of Total Respondents	Response Count
Child Care	16.6%	13.6%	64
Child Health Plus	19.7%	16.1%	76
Chlamydia test	9.9%	8.1%	38
Early Intervention	11.2%	9.1%	43
Family Health Plus	16.1%	13.1%	62
Food Stamps	19.2%	15.7%	74
Healthy Families	11.9%	9.7%	46
HEAP	18.7%	15.3%	72
Home Care	12.5%	10.2%	48
Hospice	11.4%	9.3%	44
Medicaid	18.7%	15.3%	72
MOMS	11.2%	9.1%	43
WIC	16.9%	13.8%	65
Not needed, does not apply	74.0%	60.4%	285
Total Respondents		385	

Have you had the following exams:	Does Not Apply	Yes, 1-12 months ago	vears	Yes, 2-3 years ago	Yes, 3-5 years ago	Yes, 5 or more years ago.	No	Response Count	% ever screened EBRFSS Ontario County	% ever screened EBRFSS NYS
Women: A Pap smear and pelvic exam?	10%	61%	13%	6%	2%	4%	3%	429	95.9%	91.8%
Women: A mammogram to look for breast cancer?	16%	56%	8%	3%	2%	3%	13%	425	93.7%	91.1%
Men: A prostate examination?	45%	26%	10%	2%	1%	1%	14%	271	78.1%	73.7%
Women and Men: An exam for colorectal cancer?	9%	26%	10%	7%	7%	7%	35%	438	70.6%	66.6%
Total Respondents		469								

Please answer the following questions for yourself or any member of your household who has used any of the listed services in the last 12 months.		No	Does Not Apply	Response Count
In the last 12 months, when you wanted to be seen as soon as possible, did you have to wait an 3 days for an appointment to see a doctor for primary (not specialty) health care?		75%	11%	457
In the last 12 months, did you have to wait more than 30 minutes in the doctor's waiting room for primary (not specialty) health care?		67%	6%	456
If disabled did you receive necessary accommodations (i.e. wheelchair accessibility, interpreters, etc.) to fully benefit from services?	2%	2%	96%	380
Total Respondents			458	

Please choose one	Non e	1 – 2 times	3 – 4 times	More than 4 times	Respons e Count	Visit in last year EBRFSS Ontario County	Visit in last year EBRFSS NYS
How many times have you seen a dentist during the past 12 months?	15%	72%	11%	2%	465	75.8%	71.1%
How many times have you seen a health care provider (doctor) during the past 12 months?	5%	62%	19%	13%	464		
How many times have you seen a behavioral(mental) health specialist during the past 12 months?	88%	5%	2%	5%	461		
Total Respondents				465	•		

Is it important to you to have a hospital in Ontario County?					
Answer Options					
Yes	95.9%	442			
No 4.1% 19					
Total Respondents	46	1			

How much do you estimate your household paid for all medical expenses in the last calendar year ("out of pocket expenses"; prescriptions, dental care, vision, health insurance premiums, medical care, hospitalization, co-payments, deductibles)?

Answer Options	Response Percent	Response Count	
\$0 - \$500	14.7%	66	
\$501 - \$1000	22.3%	100	
\$1001 - \$2000	20.3%	91	
\$2001 - \$3000	17.6%	79	
\$3001 - \$4000	10.0%	45	
\$4001 - \$5000	5.1%	23	
\$5001 - \$7500	4.2%	19	
\$7501 or more	5.6%	25	
Total Respondents	448		

If you or a family member needed to enter a hospital, which one would you prefer to enter:					
Answer Options	Response Percent	Response Count			
Geneva General Hospital (Geneva General)	11.2%	51			
Ira Davenport	0.0%	0			
Strong Memorial Hospital	17.6%	80			
F F Thompson Hospital	51.5%	234			
Noyes Memorial	0.0%	0			
Cayuga Medical	0.0%	0			
Geneva General (FL Health)	12.1%	55			
Rochester General	7.5%	34			
Total Respondents	45	4			

If you don't have health insurance why not? Choose one.	Response Percent	Response Count
Not offered where I work	0.7%	1
Does not apply, I have insurance	92.5%	135
Can't afford it	6.2%	9
Prefer to pay my own medical expenses	0.0%	0
Choose not to have it	0.7%	1
Total Respondents	14	46

If you do have health coverage what kind is it? Check all that apply.					
Answer Options	Response Percent	Response Count			
Blue Cross/Blue Shield	69.9%	307			
Medicaid (Blue Choice Option)	2.5%	11			
Medicare (Social Security)	4.3%	19			
Child Health Plus	3.9%	17			
Family Health Plus	1.1%	5			
Blue Choice	20.7%	91			
Monroe Plan	0.0%	0			
Preferred Care	0.2%	1			
V. A.	2.3%	10			
Medicaid	2.1%	9			
MVP	7.7%	34			
Includes dental insurance	32.8%	144			
Includes vision coverage	25.5%	112			
Total Respondents 439					

Have you been unable to get any type of health care service due to inability to pay?							
Answer Options	wer Response Response Ontario NYS						
Yes	8.6%	32	6.5%	13.8%			
No 91.4% 338							
Total 370 Responses							

If you can't afford a prescription what do you do?						
Answer Options Response Percent Count						
Tell my doctor 16.4% 59						
Do not fill prescription 17.8% 64						
Tell my pharmacist 4.2% 15						
Does Not Apply	69.2%	249				

Do you have supplies of the following for emergencies:					
Answer Options	Response Percent	Response Count			
Batteries	80.3%	301			
Bottled Water	59.5%	223			
Canned food	83.7%	314			
Candles/Matches	92.3%	346			
Battery Operated Radio	55.2%	207			
Total Respondents	3	75			

Take medicine less often 5.3% 19	Total Respondents	30	60
	Take medicine less often	5.3%	19

Do you have a plan for these emergencies? Check all that apply.						
Answer Options	Response % of Total Response Percent Respondents Count					
Fire	96.3%	49.4%	233			
Flood	31.8%	16.3%	77			
Natural disaster	51.7%	26.5%	125			
Man-made disaster	38.0%	19.5%	92			
Total Respondents		242				

Which services have you been unable to get? Check all that apply:							
Answer Options	Response Percent	Response Count					
Doctor	6.8%	18					
Dentist	11.4%	30					
Podiatrist (foot doctor)	1.5%	4					
Prescriptions (medications)	7.6%	20					
Does Not Apply	85.2%	224					
Total Respondents 263							

Please answer the following questions:	Yes	No	Response Count
Do you have working smoke detectors in your home?	97%	3%	464
Do you have working carbon monoxide detectors?	80%	20%	456
Total Respondents		4	164

Please answer the following:	Never	Once a year	2 x per year	Quarterly	Monthly	Response Count
How often do you test your smoke detector(s)?	12%	45%	33%	7%	3%	457
How often do you test your carbon monoxide detector(s)?	21%	43%	26%	7%	3%	401
Total Respondents	458					

If you are currently employed, what is your current occupation?	Response Percent	Response Count	Census Ontario County	Census NYS
Management, business, science and arts (includes education, computers, engineering, social services)	37.2%	141	38.9%	37.9%
Services (includes health, law enforcement, firefighting)	61.2%	232	16.2%	19.1%
Natural resources/Construction and Maintenance (includes farming/forestry)	1.3%	5	9.5%	7.8%
Production/transportation (includes manufacturing)	0.5%	2	12.2%	9.9%
Sales	2.1%	8	23.3%	25.2%
Total Respondents	379			

Do you have health insurance?									
Answer Options	Yes	No	N/A	Can't afford	Prefer to pay my own	Choose not to have it	Response Count	EBRFSS Ontario County	EBRFSS NYS
Medical insurance for yourself	97%	2%	1%	1%	2%	0%	439	86.3% (Yes)	86.7% (Yes)
Medical insurance for your children	65%	1%	34%	0%	0%	0%	329		
Dental insurance for yourself	90%	8%	1%	2%	7%	1%	420		
Dental insurance for your children	58%	7%	34%	2%	0%	1%	323		
Total Respondents	439								

If you have insurance who pays for it?	Response Percent	Response Count	
Ido	12.3%	52	
My employer does	35.3%	149	
I share the cost with my employer	52.4%	221	
Total Respondents	422		

Attachment B- Focus Group Notes

Ontario County Focus Group Bloomfield Fire Department 12/3/2012

What are we missing?

- -Dental care
- -Mental health issues... not many places to access care
- -Alzheimer's, elderly care, hard to find services
- -Cancer, affecting more people
- -Transportation... limited public transportation, if you don't have a car... you have no way to get to appointments, used to have spot hop
- -EMT, ambulance services... couldn't keep up with calls
- -Geriatric related issues rising... monopolizing services and resources (80-90% of calls when the county had an ambulance)... paid service now because volunteers could not keep up. Finger Lakes Ambulance Service.
- -Need more health education in the teenage population
- -Asthma becoming a huge problem
- -Adolescent drug abuse... prescription and illegal drugs, mostly marijuana... bath salts, synthetic marijuana (getting more calls)
- -Dealing with health insurance, Medicaid, prescription plans, dealing with insurance companies
- -Urgent care... one in Farmington
- -Communication between physicians... continuity of care

What factors influence health in the community?

- -Loss of ambulance services in parts of the county (lost volunteers during the day, turned to paid staff during the day... can't keep up, training etc.)
- -The county does have a lot of volunteers
- -For the most part people in the county are active
- -Parks and recreational areas

What are strengths in the community?

- -Hiking trails
- -The lake
- -Fire departments
- -Collaboration within the community... trainings, services, etc.
- -County has a good training facility, offer a lot of different courses
- -Hospitals within the county, close by
- -Hospitals are active with the public health department
- -Proximity to Rochester... easy to get to

Ontario County Focus Group 1-12-13 African American Men's group

Missing

District Wide 63% qualified free and reduced lunches
Low educational status
People eat out too much
Nutrition status tied to economic status
Behavior/young children- relation to family makeup and school suspension/media
Cause/Effect – need to get to the root cause

Factors

Poverty level
Economic disparity
Quality Housing
Day Care
Transportation
Hospitality Industry
Language-Spanish Speaking

Assets

Service Hub- Geneva Strong community partnership Worship places – strong churches Lake, walking trail Cultural diversity Ontario County Focus Group FLACRA (Finger Lakes Addictions Counseling and Referral Agency) February 8th, 2013

What is missing in our assessment?

- -Lack of things to do in the community
 - Especially for children and youth
- -Access to services
 - Transportation there is dial a ride and the CATS bus system, but many do not know about them, advertisement and promotion of services is a major issue... some people don't have access to computers, don't know where to look to get information
 - Access to mental health services is an issue in particular, wait times are four to five months
 - Wait times for a primary care doctor are on average three to four weeks
 - Hardly any providers take Medicaid
- -Public health has put together a book of all services available in the county, but it is on the public health website under "Maternal and Child Health"... many didn't know of this resource and would never think to look under maternal and child health, this is confusing
- -Nutrition
- -Lack of determination and motivation within the community to get healthy
- -Women's health need more resources for the young
- -Parenting classes a lot has been cut, there is some in Geneva... but transportation is an issue
 - You can find classes if you are mandated to take them, but there is nothing for people to take if they just want some help and education
- -Prescriptions you are given some medication when you leave rehab and get to a halfway house, but if wait times are long to get into a primary care doctor or mental health professional... often patients run out of medication ,which can cause serious problem and delays in recovery
 - Some people seek medication at the ER when this happens misuse of ER
- -Communicable disease counseling and support
 - Nowhere to get counseling for chronic disease, if there are resources they are not well publicized

What factors are influencing health?

- -Hardness of the water dries out skin and hair
- -Rural County isolated, doesn't have easy transportation like in larger cities etc.
- -Awareness need more consciousness/awareness/education within the community about health
- -Clifton Springs hospital just laid off 70-80 people
 - This could have a huge impact on the community, resources are already scarce... now they will be even more short staffed
 - Larger issue cutting of aid from the state and federal government
- -Wages poverty growing within the community, the economy is still low
- -Dr. Ahmed has a nurse practitioner that can help with women's services
 - This is a positive factor influencing health
 - Can go to one place to get a range of services
- -Overall many think that the healthcare in Ontario county is much better and more easily accessible than the surrounding counties

What are the strengths of Ontario County?

- -Natural resources lakes, waterways, forests
- -Beautiful scenery a great place for recovery
- -Mennonites
- -Caring and giving people tight, close knit community
- -Feels safe
- -A great place to raise children, low crime, beautiful
- -There isn't much to do in Geneva, but it is close to Canandaigua where there are a lot of things to do... shopping, large grocery stores, parks, etc.
- -The library system is great within the county
- -More than one hospital within the county this is a great resource and attribute
- -YMCA and CATS bus available to everyone in the county
- -Doctors care about their patients many will make home visits if needed

Attachment C:

Finger Lakes Health Community Advisory Committee * Asterisk denotes FLH Board Member

*Rev. Jim Adams, Vice Chair

St. Peter's Episcopal Church

*Dr. Jose Acevedo

President & CEO, Finger Lakes Health

Mr. Nelson Acquilano

Council on Alcoholism and Addictions of the Finger Lakes

Mr. Ron Alcock

Geneva Printing Company

Mr. Osbaldo Arce

Legal Assistance of WNY

*Mr. Phil Beckley, Chair

SPLASH Public Relations & Marketing

Ms. Mary Beer

Director, Ontario County Public Health

*Mr. Mike Briggs

USNY Bank

*Mr. Dave Bunnell

Bunnell Associates, LLC

Ms. Rossana Burgess

Community Services Admin. Assistant

Finger Lakes Health

*Mr. Steve DeRaddo

Lyons National Bank

Stu Einstein

Success for Geneva's Children

Ms. Katie Flowers

Hobart and William Smith Colleges

*Mr. Dom Fonte

Chair, FLH Board of Directors

(EX-OFFICIO)

Ms. Andrea Haradon

S2AY Network

Ms. Kimberly Kelsey

Marketing & Planning Manager

Finger Lakes Health

Dr. Alejandra Molina

Hobart & William Smith Colleges

Ms. Kristen Lanphear

AIDS Care of Rochester

Dr. Reverend Deborah Lind-Schmitz

Geneva Presbyterian Church

*Mr. Jim Long

Long's Cards and Books

Ms. Loree MacKerchar

Community Relations Manager

Finger Lakes Health

Ms. Deb Minor

Yates County Public Health

*Ms. Kelly Mittiga

Senior VP Retail, First Niagara Bank

Ms. Trina Newton

Superintendent, Geneva City Schools

Ms. Danielle Ouillette

Associate Principal, Geneva High School

Ms. Laura Pedersen

Pedersen Farms

Ms. Connie Richardson

United Way of Seneca County

Ms. Barbara Roszak

Ontario County Public Health

Ms. Christen Smith

Community Outreach Coordinator

Finger Lakes Health

Ms. Lauren Snyder

Dundee Community Health Project

Ms. Vickie Swinehart

Director, Seneca County, DOH

Ms. Moira Tidball

Seneca County Cornell Cooperative Extension

Ms. Janelle Drach

Geneva Recreation Department

Ms. Virginia Torruella

Safe Harbors of the Finger Lakes

Ms. Lara Chatel Turbide

VP, Community Services Finger Lakes Health

Ms. Mary Ann Zelazny

Finger Lakes Community Health

Geneva General Hospital - Community Service Plan 2013-2015