

# Nassau County Department of Health

*2010 Health Needs Assessment*

## Community Health Profile In Nassau County

Prepared by:



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## EXECUTIVE SUMMARY

Nassau County is a county located in the northeast corner of Florida. This Community Health Profile report for Nassau County gives a snapshot of the county and contains current and historical indicators that have an affect on health and wellness in the community. The report is intended to provide a basis and direction for future actions related to health improvement in the county. The data was pulled from multiple sources as noted in the report. Some highlights from the report are included here.

### Population and Demographics

- The estimated population of Nassau County for 2010 is 75,886.
- The county is to a certain extent evenly distributed among age groups with approximately 30% of the population between the ages of 40-59.
- As of 2009, approximately 85.34% of the population of Nassau County is white, 9.44% is black, and remaining 5.22% is made up of other races.
- According to the estimates for 2008, 8.9% of the population lives below poverty level.

### Health Status

- The four leading major causes of death for Nassau County in 2008 were cancer (25.40%), heart disease (21.70%), chronic lower respiratory disease (7.60%), and unintentional injuries (7.30%).
- In 2008, the death rate per 100, 000 for cancer in Nassau County was 211.8 compared to the state of Florida at 215.5.
- In 2008, the non-white death rate per 100,000 for lung cancer in Nassau County was 83.8 compared to the white death rate of 69.4.
- In 2008, the non-white death rate per 100,000 for heart disease in Nassau County was 184.3 compared to the white death rate of 181.0.
- The death rate per 100,000 in Nassau County for chronic lower respiratory disease (including asthma) was 63.7 compared to 54.0 for the State of Florida in 2008.
- In 2008, the death rate per 100,000 in Nassau County for unintentional injuries was 60.9 compared to 47.4 for the State of Florida.
- In 2008, the death rate per 100,000 in Nassau County for suicides was 23.5 compared to 14.5 for the State of Florida.
- The infant mortality rate (deaths per 1,000 live births) for Nassau County in 2008 was 3.7 compared to 7.2 for the State of Florida, but the rate for black infants was 22.7 compared to 2.7 for whites in Nassau County. The infant mortality rate for black infants in 2008 represents one black infant death in a total of 44 black infants born. The infant mortality rate for white infants in 2008 represents two white infant deaths in a total of 754 white infants born.

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## **Access to Care**

- In 2007, the estimated number of uninsured in Nassau County for people under the age of 65 for all incomes was 12,386 (20.9%).
- In December of 2009, Nassau County had 13,603 people enrolled in an HMO plan (including Medicare or Medicaid HMO plans).
- Nassau County has one acute care hospital that has 54 acute care beds.
- In 2009, approximately 32% of Nassau County residents received inpatient care at Baptist Medical Center-Nassau.
- Of the total 8,798 inpatient hospital discharges of all Nassau County residents for 2009, nearly 40% of the discharges were western residents and 60% were eastern residents.
- In 2009, the leading adult hospital discharge diagnostic related (DRG) group was Psychoses (19.1%).

## **Next Steps**

Nassau County would benefit from engaging in a community driven health improvement process such as Mobilizing for Action through Planning and Partnerships (MAPP). This process includes a visioning component that includes:

- Completing a Local Public Health System Assessment (Nassau went through this assessment in 2005)
- Identifying threats and opportunities that may affect the local public health system through a forces of changes assessment
- Completing a Community Themes and Strengths Assessment
- From all of the data collected, identifying strategic issues and formulating goals and strategies to take on those issues
- Acting on the issues identified through a planning, implementing, and evaluating cycle

## HEALTH NEEDS ASSESSMENT OVERVIEW

A Health Needs Assessment (HNA) is a methodical process for reviewing the health issues facing a population that will help to identify concerns and establish priorities to improve health and reduce inequalities in a community. Data and analysis presented in this assessment provides baseline information needed as Nassau County Health Department (NCHD) moves through other elements of the health assessment including Mobilizing Action through Planning Processes (MAPP).

As a public health tool, the HNA is effective in providing evidence about the population. It provides citizens, health providers, service agencies and government officials with an opportunity to contribute to targeted health planning and resource allocation. The benefits of this process include:

- Strengthens community involvement
- Improves cross-sector partnerships
- Increases professional development of skills and experience
- Improves communication and decision making
- Efficiently uses resources and effectively uses relevant data
- Translates findings into effective action

This assessment updates the data from the 2005 [Healthy Nassau](#) needs assessment that includes demographic and socio-economic profiles; health indicators and status; and access to care and providers with currently available information. Other relevant data provided includes [County Health Rankings Comparisons](#) and [Healthcare Quality Measures-An Overview of Northeast Florida](#). The combined data and resources establish a community profile that provides a framework for focus groups and community engagement to determine the goals for future actions.

### HISTORIC REFERENCE

[A Healthier Tomorrow in Nassau County](#) was completed in 2000. Demographic and socio-economic indicators were collected and analyzed in addition to mortality rates, maternal and child health indicators, infectious disease rates, and health care utilization indicators. Results of the 1999 Behavioral Risk Factor Surveillance System Survey (BRFSS) were reported; a telephone survey of residents was completed; and five focus groups were conducted. Based on the health information collected, the following recommendations were made by the Nassau County Health Improvement Advisory Council:

- Continue to pursue grants and donations.
- Provide ongoing evaluation of health promotion and disease activities.
- Continue to develop community partners and implement community-wide programs.
- Continue to work with the media to emphasize the health risks of Nassau County and to increase awareness of community health promotion activities.
- Pursue additional health care providers to move into the area to expand health care services.

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Over the next five years, a number of health grants were awarded to Nassau County. A Rural Health Outreach Grant, Health N.O.W. (Nassau Outreach Westside) funded through the Health Services and Resources Administration (HRSA) was awarded to the Nassau County Health Department in 2003. This grant provided primary care and mental health services to chronically ill, low income uninsured adults in western Nassau County. The rural health grant also provides those with chronic disease access to reduced cost drug prescription programs. The Fit Families grant, awarded to Nassau County Health Department in 2003, helped families access health education which promotes healthy eating and exercise for the entire family.

In the 2004, the Nassau County Health Improvement Advisory Council, Nassau County Health Department, and the Health Planning Council of Northeast Florida updated the 2000 health needs assessment and presented the findings in the Healthy Nassau report. Although a county-wide assessment was needed, this assessment focused on Western Nassau. This area is geographically isolated from the eastern portion of the county where the majority of health resources and services are located. The HRSA Health N.O.W. grant, which focuses on Westside disparities, funded the Healthy Nassau project.

Components of the Healthy Nassau needs assessment included an analysis of demographics, health statistics, and access to care indicators for Nassau County residents. Community input was also obtained from focus group interviews with residents living in Western Nassau as well as underserved minorities in the county. In addition, a community-wide survey was distributed, with efforts made to obtain input from Western Nassau residents. Nassau County Health Department hosted four community presentations from November 2004 – March 2005 in order to give members of the community an opportunity to identify key health issues based on the assessment.

Recent health programs by the NCHD included a series of community leadership interviews and focus group sessions in an effort to garner input relative to developing a new public health initiative and improve delivery of services to the local community. A copy of this report is included in Appendix A. The common theme that emerged from this process was the importance of efficient and effective service delivery to individuals in close proximity to their homes, worksites, and schools. In addition, the need for increased transportation options and affordable housing for Nassau County residents was identified as a priority.

The themes and strengths assessment is part of a health planning process that utilizes community partners and community members in the planning and development of future health improvement initiatives. Outcomes provide valuable insight to help identify positive aspects of community life that should be maintained or utilized while also finding areas for improvement.

## FUTURE ACTIONS

The HNA provides a framework for translating findings in to effective actions. Community engagement is essential to the process as indicated from the outcomes in the recent leadership interviews and citizen focus groups. As NCHD moves to the next phase of the assessment which includes developing an action plan, Healthy People 2020 report, should be available. Healthy People is a program sponsored by the U.S. Department of Health and Human Services (HHS) to provide science-based, 10-year national objectives for promoting health and preventing disease. It establishes and monitors national health objectives to meet a broad range of health needs. The program encourages collaborations across sectors, guides individuals toward making informed health decisions, and measures the impact of prevention activities.

Currently, Healthy People 2010 is providing guidance to achieve increased healthy lifestyles and eliminate health disparities. This will be updated and replaced with the release of Healthy People 2020 which will contain new knowledge of current data, trends, and innovations. The release of Healthy People 2020 is anticipated in the Fall of 2010. It will reflect assessments of major risks to health and wellness, changing public health priorities, and emerging issues related to our nation's health preparedness and prevention. The following list outlines the lead indicators for Healthy People 2010 for reference. Indicators from Healthy People 2020, once available, should be used as a basis for continued assessments in Nassau County.

LEADING INDICATORS	DATA COLLECTED TO MEASURE THE INDICATORS
Physical Activity	Adolescents grades 9-12 who engaged in 20 minutes or more of vigorous physical activity 3 or more days per week Adults aged 18 and over who engaged in 30 minutes of moderate physical activity 5 of more days per week
Overweigh and obesity	Overweight or obese children and adolescents age 6-19 years Obese adults age 20 years or older
Tobacco Use	Adolescents in grades 9-12 who smoked one or more cigarettes in the past 30 days Adults age 18 years and older who smoked more than 100 cigarettes in their lifetime and smoked on some or all days in the past month
Substance Abuse	Adolescents aged 12-17 who reported no use of alcohol or illicit drugs in the last 30 days Adults aged 18 years or older who reported binge drinking in the past 30 days Adults aged 18 years or older who reported illicit drug use in the past 30 days
Responsible Sexual Behavior	Adolescents in grades 9-12 who reported they were not sexually active or used a condom Women 18-44 who reported partners used condoms
Mental Health	Adults aged 18 years and older with recognized depression who received treatment
Injury and Violence	Motor vehicle deaths Homicides
Environmental Quality	Exposure to ozone above EPA standards Exposure to environmental tobacco smoke
Immunization	Children ages 19 to 35 months who received all DTaP, polio, MMR, Hib, and HepB shots Non-institutionalized adults 65 and older who received influenza vaccine in the past 12 mos. Non-institutionalized adults 65 and older who ever received influenza vaccine
Access to Health Care	Persons under age 65 with health care coverage Persons of all ages with a specific source of primary care Females who received prenatal care in the first trimester



# NASSAU COUNTY PROFILE

Nassau County comprises 652 square miles in northeast Florida adjacent to the Georgia border. It is approximately 30 miles north of downtown Jacksonville with a diverse geography and culture. The western portion of the county is characterized as rural with an abundance of undeveloped wooded areas while the eastern portion of the county, adjacent to the Atlantic Ocean, is primarily beach and resort communities. There are three incorporated areas in Nassau County – Hilliard in the northwest region, Callahan in the south mid-west region, and Fernandina Beach on Amelia Island located on the east coast. Historic Fernandina Beach on Amelia Island is the county seat.

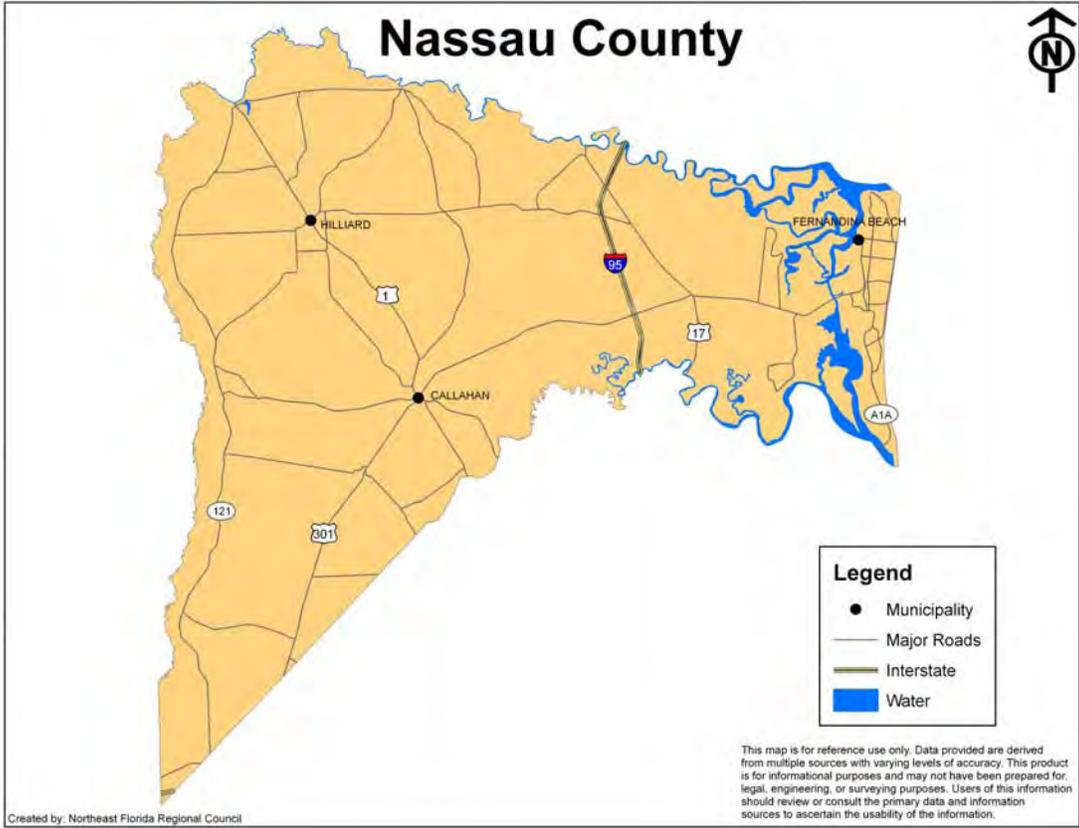


Figure 1– Nassau County Map

It is important to understand the characteristics of a community that influence health care needs and the way in which health services are provided. A county profile provides an overview of the demographics and socio-economic characteristics of the population in Nassau County.

The western portion of Nassau County, including and surrounding the incorporated municipalities of Hilliard and Callahan, account for nearly one-third of the county’s population. Western Nassau is classified as a medically underserved area (MUA) by the U.S. Department Health and Human Services. There is a lack of primary care health providers in the area. Residents must travel to Fernandina Beach in eastern Nassau County or to Duval County to access health care needs.

## POPULATION

The following tables summarize the population of Nassau County beginning with the last available census data from 2000 and population estimates for 2008, 2010 and 2020 for comparison. Figures 2 and 3 on page 16 indicate boundaries by incorporated municipality and zip codes, respectively. Nassau County has six zip code boundaries, with one overlapping in Duval County. The three municipalities encompass a smaller geographic area within the zip code boundaries.

It is estimated that Nassau County had a 31.72 percent increase in population from 2000 to 2010 and is projected to grow approximately 24.11 percent by 2020. Currently, Nassau County accounts for .41 percent of states population.

Table 1 2000 – 2020 Population Estimates				
Area	Population			
	2000	2008	2010	2020
Callahan	962	1,106	1,133	1,247
Fernandina Beach	10,524	11,905	12,320	14,135
Hilliard	2,702	2,948	3,093	3,732
Unincorporated	43,425	55,842	59,340	75,068
<b>Nassau County Total</b>	<b>57,613</b>	<b>71,801</b>	<b>75,886</b>	<b>94,182</b>
<b>Florida</b>	<b>16,072,832</b>	<b>18,468,557</b>	<b>18,648,774</b>	<b>21,182,185</b>

Source: Shimberg Center of Affordable Housing

Table 2 2010 Age Distribution by Area						
Age	Area					
	Callahan	Fernandina Beach	Hilliard	Unincorporated	Total Nassau	Florida
0-9	170	1,050	502	7,006	8,728	2,274,058
10-19	158	1,222	462	7,699	9,541	2,311,280
20-29	199	1,181	394	6,493	8,267	2,287,474
30-39	117	1,109	394	6,912	8,532	2,219,320
40-49	139	1,570	406	8,942	11,057	2,563,930
50-59	128	2,129	313	9,059	11,629	2,540,684
60-69	120	2,103	264	7,491	9,978	2,010,311
70+	102	1,956	358	5,738	8,154	2,441,717
<b>Total</b>	<b>1,133</b>	<b>12,320</b>	<b>3,093</b>	<b>59,340</b>	<b>75,886</b>	<b>18,648,774</b>

Source: Shimberg Center of Affordable Housing

The age distribution in Nassau County is fairly equalized among all age brackets. The highest percentages of residents in Nassau County are in the 40-49 and 50-59 age groups.

### Race and Ethnicity

The racial composition of Nassau County, as summarized in Table 3, estimates that 85.34 percent of the population is white. The geographic distribution for race in each zip code is summarized in Table 4. The percentages indicate the proportion of that race residing within the specific zip code area. Approximately 42.76 percent of the population resides in zip code 32034 in eastern Nassau County.

Table 3 2009 Population by Race		
Race	Nassau County	
	Number	Percent
American Indian	317	.43%
Asian	507	.69%
Black	7,088	9.67%
Multiple	929	1.27%
Pacific Islander	31	.04%
White	64,064	87.4%
Other	361	.49%
<b>Total</b>	<b>73,297</b>	<b>100%</b>
Hispanic*	1,775	

Source: ESRI Forecasts

\*Hispanic population can be of any race and are accounted for in each appropriate category, as reported.

Table 4 2009 Population by Race by Zip Code												
Race	Zip Code											
	32009		32011		32034		32046		32097		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Am. Indian	31	9.8%	56	17.7%	111	35.0%	31	9.8%	86	27.1%	315	100%
Asian	26	5.1%	58	11.4%	284	56.0%	38	7.5%	101	19.9%	507	100%
Black	56	.08%	1,040	14.7%	3,474	49.0%	884	12.5%	1,633	23.0%	7,087	100%
Multiple	23	2.5%	178	19.2%	378	40.7%	111	12.0%	128	13.8%	818	100%
Pacific Islander	0	0%	0	0%	15	48.4%	10	32.3%	6	19.4%	31	100%
White	3,922	6.12%	12,021	18.8%	26,772	41.8%	8,891	13.9%	12,343	19.3%	63,955	100%
Other	20	5.54%	33	9.1%	198	54.9%	22	6.09%	87	24.10%	360	100%
<b>Total</b>	<b>4,130</b>		<b>13,5733</b>		<b>32,248</b>		<b>10,112</b>		<b>14,776</b>		<b>73,373</b>	
Hispanic*	52	2.9%	187	10.5%	1,016	57.2%	125	7.0%	392	22.1%		

Source: ESRI Forecasts

\*Hispanic population can be of any race and are accounted for in each appropriate category, as reported.

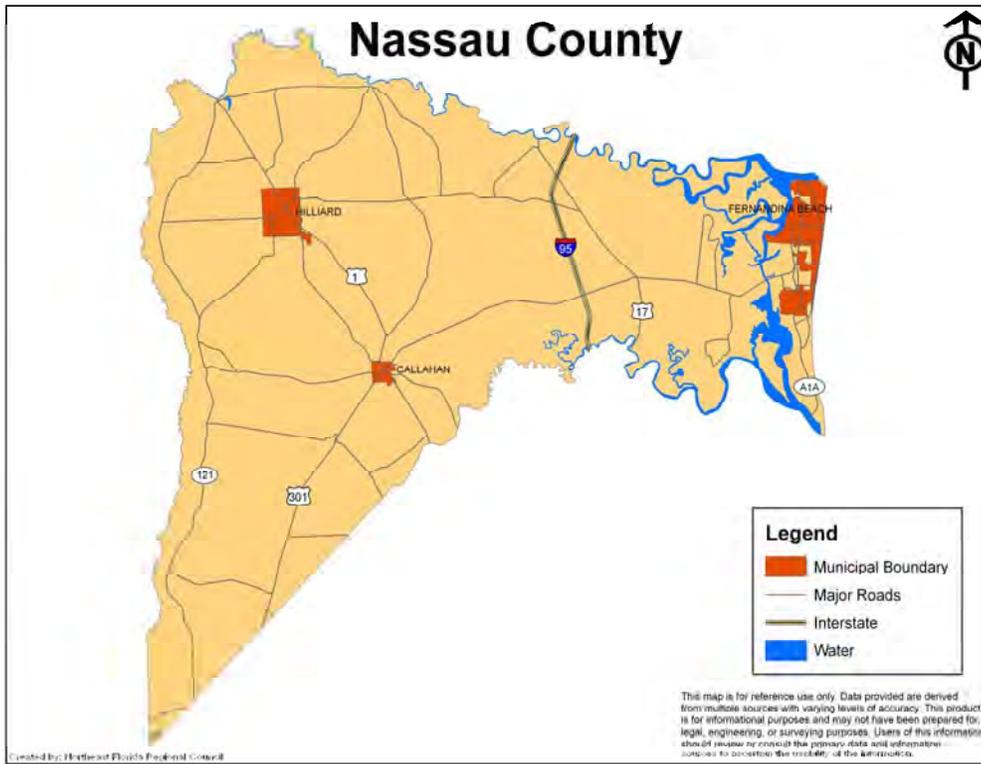


Figure 2 – Municipal Boundaries Map



Figure 3 – Zip Code Boundaries

### Households by Income

The average household income is \$70,751 with 27 percent of the population in this income range as summarized in Table 5. Nassau County had a per capita income of \$27,573 in 2009, compared to Florida's per capita income of \$27,128. Nassau County had a higher median household income than the state's average of \$50,413.

Table 5 2009 Households by Income		
Income Range	Number	Percent
< \$15,000	2,681	9.4%
\$15,000 - \$24,999	2,759	9.7%
\$25,000 - \$34,999	2,634	9.3%
\$35,000 - \$49,999	4,248	15.0%
\$50,000 - \$74,999	7,679	27.0%
\$75,000 - \$99,999	3,492	12.3%
\$100,000 - \$149,999	3,149	11.1%
\$150,000 - \$199,000	730	2.6%
\$200,000 +	1,025	3.6%
	Nassau County	Florida
Median Household Income	\$56,115	\$50,413
Average Household Income	\$70,751	\$67,518
Per Capita Income	\$27,563	\$27,128

Source: ESRI Forecasts

### Households by Cost Burden

Cost-burdened households are households that pay more than 30 percent of their household income for rent or mortgage costs. In 2008, 6,860 Nassau County households (24 percent) paid more than 30 percent of their income for housing. By comparison, 29 percent of households state-wide are cost-burdened. Approximately, 2,575 households in Nassau County (9 percent) pay more than 50% of income for housing.

Table 6 2008 Amount of Income Paid for Housing			
	0-30%	30-50%	50% or More
<b>Total</b>	<b>21,794</b>	<b>4,284</b>	<b>2,575</b>

Source: Shimberg Center of Affordable Housing

## Poverty

Poverty thresholds are established by the Social Security Administration and updated each year by the Census Bureau as summarized in Table 7 based on household income. There is a strong correlation between health and income. Families with low incomes are typically less healthy as revealed in benchmark assessments for mortality, the prevalence of acute or chronic diseases, or mental health. Approximately 8.9 percent of the population in Nassau lives below the poverty level as compared to the state which, is 13.3 percent.

Table 7 2008 Poverty Thresholds	
Size of Family Unit	Poverty Thresholds
One person (unrelated individual)	10,991
Under 65 years	11,201
65 years and over	10,326
Two people	14,051
Householder under 65 years	14,489
Householder 65 years and over	13,030
Three people	17,163
Four people	22,025
Five people	26,049
Six people	29,456
Seven people	33,529
Eight people	37,220
Nine people or more	44,346

Source: US Census Bureau Weighed Average Poverty Thresholds 2008

## Farmworkers

The most recent data on the farmworker population in Florida was compiled by the Shimberg Center for Affordable Housing in 2007 and based on the United States Bureau of Labor Statistics, Quarterly Census of Employment and Wages, 2005. In 2005, the number of farmworkers in the State of Florida was estimated at 117,981. No farmworker population for Nassau County was reported.

## Homeless

The Shimberg Center for Affordable Housing reports the number of homeless individuals and families based on local homeless coalition's 2007 point-in-time surveys. This includes people in emergency shelters, transitional housing and unsheltered locations. Homeless individuals are single adults, unaccompanied youth and married adults without children. Nassau County is grouped with Baker, Clay, and Duval Counties with an estimated number of homeless individuals at 2, 237 and total number families with children as 250 for the region. Further research is necessary to determine the homeless population in Nassau County.

## EDUCATION

There are 7 elementary schools (K-5), 4 middle schools (6-8), 3 high schools (9-12), and one combination school (6-12) in Nassau County, with a total enrollment for school year 2007 -08 of just over 11,079 students. The 2008-2009 high school graduation rate in Nassau County was 84.8 percent as compared to the state, which is 78.6 percent. Nassau County also has one adult high school.

The National School Lunch Program provides free and reduced-price lunches to schoolchildren from economically disadvantaged families. Approximately, 50 percent of all students enrolled in Nassau County Public Schools were eligible to receive free or reduced lunch. The United States Department of Agriculture establishes income guidelines for program eligibility that factor household income and size in relation to federal poverty guidelines. In 2009-10, for instance, a student from a four-person household in Florida with annual household income less than \$28,665 is eligible for free lunches. Table 8 reflects eligibility guidelines for 2009-2010.

Table 8 2009 - 2010 Income Eligibility Guidelines			
	Federal Poverty Guidelines	Reduced Meals - 185%	Free Meals - 130 %
Household Size	Annual Income		
1	10,830	20,036	14,079
2	14,570	26,955	18,941
3	18,310	33,874	23,803
4	22,050	40,793	28,665
5	25,790	47,712	33,527
6	29,530	54,631	38,389
7	33,270	61,550	43,251

Source: United States Department of Agriculture

## ECONOMY

### **Labor Force, Employment and Unemployment**

In June 2010, Florida Research and Economic Database (FRED) reported the total civilian labor force in Nassau County was 36,512, of which 32,606 were employed and 3,906 were unemployed. The unemployment rate was 10.7 percent as compared to the state unemployment rate of 11.6 percent. The average weekly wage for Nassau County in the 3rd Quarter of 2009 was \$642, which equates to \$16.05 per hour or \$33,384 per year, assuming a 40-hour work week.

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### **Industry, Workforce**

There were approximately 17,268 total number of employees located in Nassau County at the end of the 3rd quarter in 2009. The ten major employers in the county include:



The largest major industry sector was Accommodation and Food Services, Retail Trade, and Health Care and Social Assistance. The largest major occupational group was Office and Administrative Support Occupations, Sales and Related Occupations and Food Preparation and Serving Related Occupations.

# HEALTH STATUS

Health Status in a community is reflected in mortality rates or death rates by certain illnesses. There are approximately 12 key indicators that typically reveal a baseline measure for the state of health of a community. Table 9, below, indicates major causes of death in Nassau County for 2008. This section summarizes the major causes of deaths by race reported from 2006 to 2008 for comparison. The indicators are aligned with Healthy People leading indicators as outlined on page 11 of this report.

Table 9 2008 Major Causes of Death				
Cause of Death	Deaths	Percent of Total Deaths	Rate Per 100,000	YPLL < 75 Per 100,000 Under 75
ALL CAUSES	603	100%	834.6	8734.5
CANCER	153	25.40%	211.8	1953.2
HEART DISEASE	131	21.70%	181.3	1376.5
CHRONIC LOWER RESPIRATORY DISEASE (CLRD)	46	7.60%	63.7	427.3
UNINTENTIONAL INJURIES	44	7.30%	60.9	2021.2
STROKE	27	4.50%	37.4	236.6
ALZHEIMER'S DISEASE	22	3.60%	30.5	13.3
SUICIDE	17	2.80%	23.5	635.8
DIABETES MELLITUS	15	2.50%	20.8	165.6
PNEUMONIA/INFLUENZA	14	2.30%	19.4	17.7
CHRONIC LIVER DISEASE AND CIRRHOSIS	3	0.50%	4.2	103.5
HOMICIDE	3	0.50%	4.2	212.9
AIDS/HIV	1	0.20%	1.4	71

Source: Florida Department of Health, Office of Health Statistics and Assessment

<http://www.floridacharts.com/charts/SpecReport.aspx?RepID=7226>

Age-adjusted death rates are computed using the year 2000 standard population.

YPLL = Years of Potential Life

Lost

Table 10  
2006 – 2008 All Deaths in Nassau County

	2008	2007	2006
<b>Nassau County</b>	603	566	596
White	557	521	546
Black	41	42	47
Non-white Other	5	3	3
Non-white Total	46	45	50

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Florida Deaths

<http://www.floridacharts.com/charts/chart.aspx>

**Comments**

This data is provided to give context to disease death rates, particularly as it relates to minorities due to their relatively small numbers. On average 7.9% of deaths occurred among non-whites.

**Table 11**  
Deaths from Cancer per 100,000 Population

	<b>2008</b>	<b>2007</b>	<b>2006</b>
<b>Nassau County</b>	211.8	182.1	228.7
White	211.0	192.4	226.6
Black	192.0	59.1	266.8
Non-white Other	395.3	136.2	145.8
Non-white Total	178.8	172.6	184.2
<b>State of Florida</b>	215.5	212.0	217.4

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Chronic Diseases > Deaths from Cancer  
<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Physical Activity  
Overweight and Obesity  
Tobacco Use  
Responsible Sexual Behavior  
Environmental Quality

The data provided measure the Community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

Environmental quality, includes exposure to tobacco smoke, which can cause cancer.

Table 12  
Cancer Deaths: Rolling 3-Year Rates for All Races All Sexes

County	Average Number of Deaths			Average Number of Total Population			Age-Adjusted 3-Year Death Rate		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
<b>Nassau</b>	<b>162</b>	<b>151</b>	<b>146</b>	<b>66,720</b>	<b>68,142</b>	<b>70,218</b>	<b>216.2</b>	<b>194.6</b>	<b>177</b>
Baker	45	49	56	24,422	24,963	25,609	208.8	219.6	240.1
Clay	301	313	337	171,636	178,685	183,333	189.7	186.1	190.4
Duval	1,583	1,584	1,594	864,537	883,483	896,553	202.3	195.3	189.4
Flagler	221	229	240	80,742	88,474	93,458	146	139.6	136.8
Putnam	232	222	228	73,960	74,421	74,775	230.2	216.3	218
St. Johns	351	350	368	159,278	167,414	175,043	178.6	167.5	165.7
State Total	39,968	40,064	40,140	18,024,188	18,396,828	18,661,381	169.8	165.9	162.3

Source: Florida Charts

Chronic Diseases > Deaths from Cancer

<http://www.floridacharts.com/charts/chart.aspx>

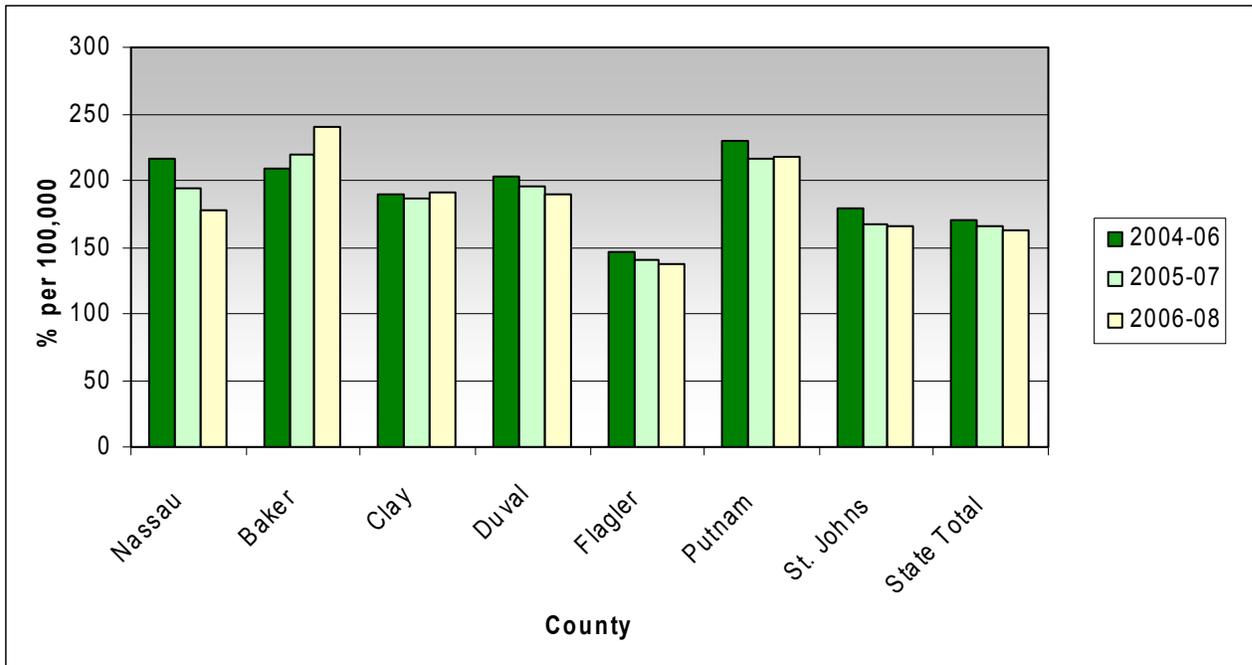


Figure 4— Total Cancer Deaths Rolling 3-year rates per 100,000

Table 13  
Lung Cancer Deaths per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	70.6	57.4	71.4
White	69.4	61.0	69.7
Black	57.6	19.7	82.1
Non-white Other	263.5	0.0	145.8
Non-white Total	83.8	17.2	90.0
<b>State of Florida</b>	63.2	62.2	64.8

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment

Florida CHARTS: Chronic Diseases > Deaths from Lung Cancer

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Tobacco Use  
Environmental Quality

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

Environmental quality, includes exposure to tobacco smoke, which can cause cancer.

Table 14  
Deaths from Breast Cancer per 100,000 Population  
(Women only)

	2008	2007	2006
<b>Nassau County</b>	27.0	25.5	20.1
White	29.0	27.9	22.0
Black	0.0	0.0	0.0
Non-white Other	0.0	0.0	0.0
Non-white Total	0.0	0.0	0.0
<b>State of Florida</b>	27.9	27.2	28.2

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Chronic Diseases > Deaths from Breast  
Cancer  
[http://www.floridacharts.com/charts/  
chart.aspx](http://www.floridacharts.com/charts/chart.aspx)

**Alignment with Healthy People 2010**

Overweight and Obesity  
Tobacco Use  
Environmental Quality

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

Environmental quality, includes exposure to tobacco smoke, which can cause cancer.

Table 15  
Deaths from Heart Disease Per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	181.0	177.8	176.2
White	181.0	179.9	174.3
Black	192.0	177.4	225.8
Non-white Other	131.8	0.0	0.0
Non-white Total	184.3	155.0	197.9
<b>State of Florida</b>	222.9	224.0	238.4

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Chronic Diseases > Deaths from Heart Diseases  
<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Physical Activity  
Overweight and Obesity  
Tobacco Use

The data provided measure the community's progress in addressing the indicators above as outlined in *Healthy People 2010*.

**Comments**

None

**Table 16**  
Deaths from Heart Diseases: Rolling 3-Year Rates for All Races All Sexes

County	Average Number of Deaths			Average Number of Total Population			Age-Adjusted 3-Year Death Rate		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
<b>Nassau</b>	<b>123</b>	<b>120</b>	<b>125</b>	<b>66,720</b>	<b>68,142</b>	<b>70,218</b>	<b>180.9</b>	<b>165.9</b>	<b>162.8</b>
Baker	39	36	38	24,422	24,963	25,609	203.3	176.9	179.8
Clay	279	280	265	171,636	178,685	183,333	187.2	175.2	158.1
Duval	1,599	1,561	1,538	864,537	883,483	896,553	207.2	196.2	185.7
Flagler	187	196	198	80,742	88,474	93,458	127.1	124	112.9
Putnam	191	186	176	73,960	74,421	74,775	195.3	188.4	171.1
St. Johns	264	262	263	159,278	167,414	175,043	137.4	128.4	119.8
State Total	45,600	43,972	42,618	18,024,188	18,396,828	18,661,381	182.8	172.5	162.2

Source: Florida Charts  
Chronic Diseases > Deaths from Heart Diseases

<http://www.floridacharts.com/charts/chart.aspx>

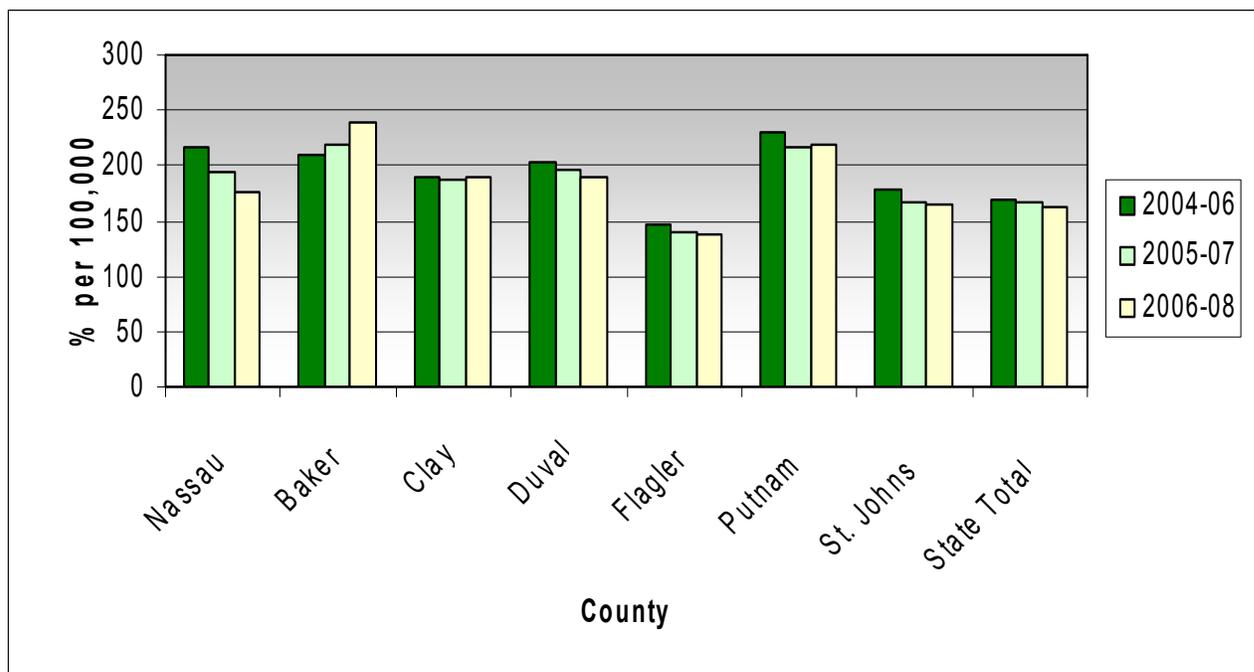


Figure 5— Deaths from Heart Disease Rolling 3-year rates per 100,000

**Table 17**  
Deaths from Chronic Lower Respiratory Disease (CLRD) including Asthma per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	63.7	71.7	46.6
White	67.9	76.6	50.7
Black	19.2	19.7	0.0
Non-white Other	0.0	0.0	0.0
Non-white Total	16.8	17.2	0.0
<b>State of Florida</b>	54.0	49.7	48.1

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Chronic Diseases > Deaths from CLRD  
(including Asthma)  
<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Physical Activity  
Overweight and Obesity  
Tobacco Use  
Environmental Quality

The data provided measure the community's progress in addressing the indicators as outlined in Healthy People 2010.

**Comments**

None

**Table 18**  
Deaths from CLRD (including Asthma) :Rolling 3-Year Rates for All Races All Sexes

County	Average Number of Deaths			Average Number of Total Population			Age-Adjusted 3-Year Death Rate		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
<b>Nassau</b>	<b>40</b>	<b>41</b>	<b>43</b>	<b>66,720</b>	<b>68,142</b>	<b>70,218</b>	<b>55.7</b>	<b>54.6</b>	<b>52.3</b>
Baker	14	16	18	24,422	24,963	25,609	67.4	77.3	88.7
Clay	87	91	94	171,636	178,685	183,333	59.9	57.7	56.9
Duval	359	360	379	864,537	883,483	896,553	47.5	46.1	46.8
Flagler	37	40	44	80,742	88,474	93,458	23.5	22.6	22.8
Putnam	66	69	73	73,960	74,421	74,775	64.8	66.4	69.2
St. Johns	68	72	79	159,278	167,414	175,043	34.9	34.9	36
State Total	9,085	9,213	9,447	18,024,188	18,396,828	18,661,381	36.6	36.3	36.2

Source: Florida Charts

Chronic Diseases > Deaths from CLRD (including Asthma)

<http://www.floridacharts.com/charts/chart.aspx>

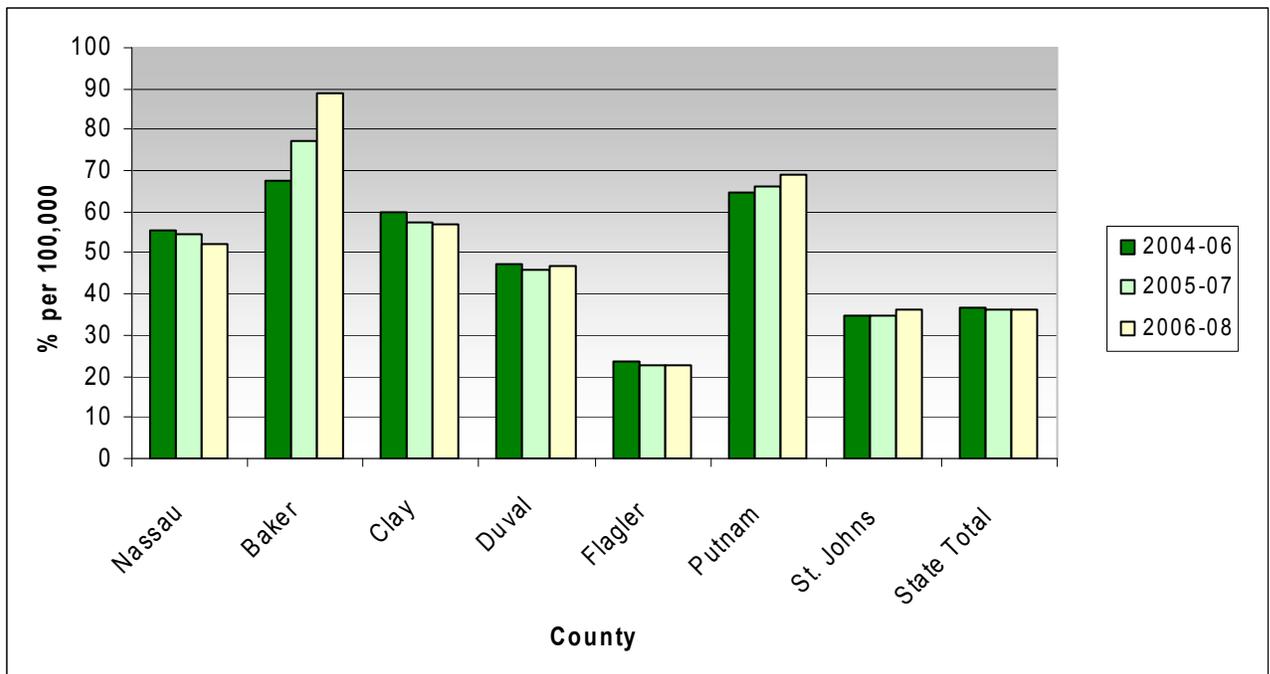


Figure 6— Total CLRD Deaths (including Asthma) Rolling 3-year rates per 100,000

**Table 19**  
**Total Deaths from Unintentional Injury (Accidents) per 100,000 Population**

	2008	2007	2006
<b>Nassau County</b>	60.9	76.0	69.9
White	63.4	75.1	71.3
Black	38.4	98.6	41.1
Non-white Other	0.0	0.0	145.8
Non-white Total	33.5	86.1	54.0
<b>State of Florida</b>	47.4	48.2	47.9

**Source**

Florida Department of Health  
 Office of Health Statistics & Assessment  
 Florida CHARTS: Injuries > Total Deaths from Unintentional  
 Injury (Accidents)

[http://www.floridacharts.com/charts/  
 chart.aspx](http://www.floridacharts.com/charts/chart.aspx)

**Alignment with Healthy People 2010**

Injury and Violence

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

Table 20  
Deaths from Unintentional Injuries: Rolling 3-Year Rates for All Races All Sexes

County	Average Number of Deaths			Average Number of Total Population			Age-Adjusted 3-Year Death Rate		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
<b>Nassau</b>	<b>47</b>	<b>50</b>	<b>48</b>	<b>66,720</b>	<b>68,142</b>	<b>70,218</b>	<b>74</b>	<b>77.5</b>	<b>72.1</b>
Baker	14	19	21	24,422	24,963	25,609	61.1	79.3	82.9
Clay	76	82	80	171,636	178,685	183,333	45.2	47.3	44.5
Duval	380	399	396	864,537	883,483	896,553	44.4	45.7	44.4
Flagler	34	34	40	80,742	88,474	93,458	42.8	37.6	42.3
Putnam	42	47	50	73,960	74,421	74,775	57.3	60.8	63.8
St. Johns	56	58	61	159,278	167,414	175,043	33.8	33.1	33.3
State Total	8,586	8,867	8,925	18,024,188	18,396,828	18,661,381	44.7	45.3	44.8

Source: Florida Charts  
Injuries > Total Deaths from Unintentional Injury  
(Accidents)  
<http://www.floridacharts.com/charts/chart.aspx>

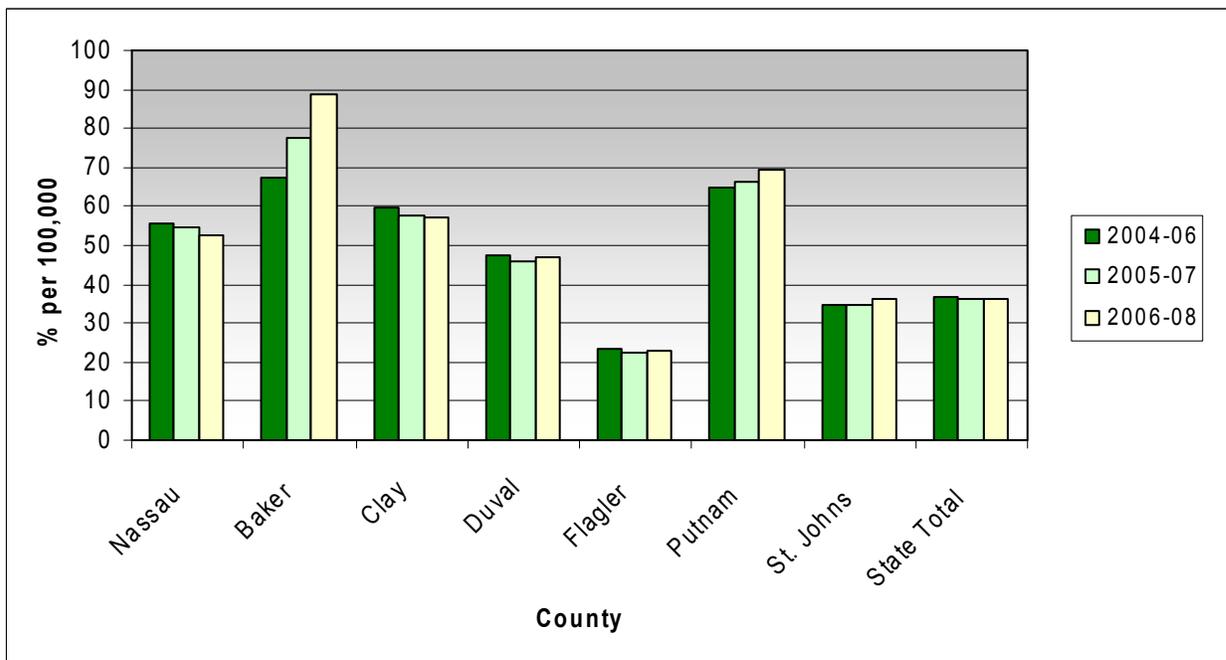


Figure 7 – Deaths from Unintentional Injuries Rolling 3-year Rates per 100,000

**Table 21**  
**Total Deaths From Motor Vehicle Traffic Crashes per 100,000 Population**

	<b>2008</b>	<b>2007</b>	<b>2006</b>
<b>Nassau County</b>	24.9	47.3	35.0
White	33.3	45.4	25.6
Black	19.2	78.8	41.1
Non-white Other	0.0	0.0	145.8
Non-white Total	16.8	68.9	54.0
<b>State of Florida</b>	16.1	17.6	18.5

**Source**

Florida Department of Health  
 Office of Health Statistics & Assessment  
 Florida CHARTS: Injuries > Total Deaths From Motor Vehicle  
 Traffic Crashes  
[http://www.floridacharts.com/charts/  
 chart.aspx](http://www.floridacharts.com/charts/chart.aspx)

**Alignment with Healthy People 2010**

Injury and Violence  
 Substance Abuse

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

Table 22  
Deaths from Stroke per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	37.4	40.1	36.4
White	39.2	37.5	39.6
Black	19.2	78.8	0.0
Non-white Other	0.0	0.0	0.0
Non-white Total	16.8	68.9	0.0
<b>State of Florida</b>	45.0	46.5	48.1

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Chronic Diseases > Deaths from Stroke  
<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Overweight and Obesity  
Tobacco Use  
Environmental Quality

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

Environmental quality, includes exposure to tobacco smoke, which has been linked to Stroke.

Table 23  
Deaths from Alzheimer's Disease per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	30.5	31.5	30.6
White	31.7	29.7	33.3
Black	19.2	59.1	0.0
Non-white Other	0.0	0.0	0.0
Non-white Total	16.8	51.7	0.0
<b>State of Florida</b>	25.1	24.7	25.4

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Chronic Diseases > Deaths from Alzheimer's Disease  
<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Physical Activity  
Overweight and Obesity  
Tobacco Use  
Substance Abuse  
Mental Health  
Injury and Violence

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

A variety of factors including poor physical health, mild cognitive impairment, alcohol abuse and head injury place people at greater risk for contracting Alzheimer's disease.

Table 24  
Deaths from Suicide per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	23.5	5.7	17.5
White	22.6	6.3	17.4
Black	19.2	0.0	20.5
Non-white Other	0.0	0.0	131.8
Non-white Total	18.0	0.0	33.5
<b>State of Florida</b>	14.5	13.7	13.1

**Source**

Florida Department of Health Office of Health Statistics & Assessment

Florida CHARTS: Injuries > Total Deaths from Suicide

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Mental Health  
Injury and Violence

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

Table 25  
Deaths from Diabetes per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	20.8	24.4	32.0
White	18.1	25.0	30.1
Black	57.6	19.7	61.6
Non-white Other	0.0	0.0	0.0
Non-white Total	50.3	17.2	54.0
<b>State of Florida</b>	27.4	27.2	27.9

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Chronic Diseases > Deaths from Diabetes  
<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Physical Activity  
Overweight and Obesity

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

**Table 26**  
Deaths from Influenza & Pneumonia per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	19.0	7.2	21.8
White	21.0	7.8	23.8
Black	0.0	0.0	0.0
Non-white Other	0.0	0.0	0.0
Non-white Total	0.0	0.0	0.0
<b>State of Florida</b>	12.2	11.9	13.1

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Communicable Diseases > Pneumonia/Influenza  
<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Immunization

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

Flu vaccines can prevent a community's most vulnerable citizens from contracting influenza.

**Table 27**  
Deaths from Chronic Liver Disease & Cirrhosis per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	4.2	4.3	7.3
White	4.5	4.7	7.9
Black	0.0	0.0	0.0
Non-white Other	0.0	0.0	0.0
Non-white Total	0.0	0.0	0.0
<b>State of Florida</b>	12.3	12.0	11.8

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment  
Florida CHARTS: Chronic Diseases > Deaths from Chronic Liver  
Disease & Cirrhosis  
<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Overweight and Obesity  
Substance Abuse  
Responsible Sexual Behavior

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

Risk factors for liver disease and cirrhosis include an unhealthy body weight, alcohol abuse, and exposure to Hepatitis B and C.

Table 28  
Deaths from Homicide per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	4.2	4.3	7.3
White	3.0	3.1	6.3
Black	19.2	19.7	20.5
Non-white Other	0.0	0.0	0.0
Non-white Total	16.8	17.2	18.0
<b>State of Florida</b>	6.9	7.0	6.6

**Source**

Florida Department of Health Office of Health Statistics & Assessment

Florida CHARTS: Injuries > Deaths from Homicide

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Injury and Violence

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

**Table 29**  
HIV and AIDS Cases per 100,000 Population

HIV Cases per  
100,000

	2008	2007	2006
<b>Nassau County</b>	11.0	15.8	4.4
<b>State of Florida</b>	37.8	31.9	26.6

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment

Florida CHARTS: Communicable Diseases > AIDS Cases

[http://www.floridacharts.com/charts/  
chart.aspx](http://www.floridacharts.com/charts/chart.aspx)

AIDS Cases per 100,000

	2008	2007	2006
<b>Nassau County</b>	5.5	4.3	5.8
<b>State of Florida</b>	23.7	24.0	27.2

**Source**

Florida Department of Health  
Office of Health Statistics & Assessment

Florida CHARTS: Communicable Diseases > HIV Cases

[http://www.floridacharts.com/charts/  
chart.aspx](http://www.floridacharts.com/charts/chart.aspx)

**Comments**

Exposure to HIV/AIDS is exacerbated by substance abuse, which limits sound decisions regarding the use of condoms or abstaining from sex.

**Alignment with Healthy People 2010**

Substance Abuse  
Responsible Sexual Behavior

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

Table 30  
AIDS Cases: Rolling 3-Year Rates for All Races All Sexes

County	Average Number of Reported New AIDS Cases			Average Number of Total Population			Rate Per 100,000		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
<b>Nassau</b>	<b>4</b>	<b>3</b>	<b>4</b>	<b>66,720</b>	<b>68,142</b>	<b>70,218</b>	<b>5.5</b>	<b>4.4</b>	<b>5.2</b>
Baker	3	3	2	24,422	24,963	25,609	13.6	10.7	7.8
Clay	12	12	13	171,636	178,685	183,333	7.2	6.5	7.1
Duval	281	270	275	864,537	883,483	896,553	32.5	30.6	30.6
Flagler	7	5	5	80,742	88,474	93,458	8.3	6	5
Putnam	12	12	12	73,960	74,421	74,775	16.2	16.6	16
St. Johns	16	15	16	159,278	167,414	175,043	10	9	9
State Total	4,898	4,408	4,428	18,024,188	18,396,828	18,661,381	27.2	24	23.7

Source: Florida Charts

Communicable Diseases > AIDS Cases

<http://www.floridacharts.com/charts/chart.aspx>

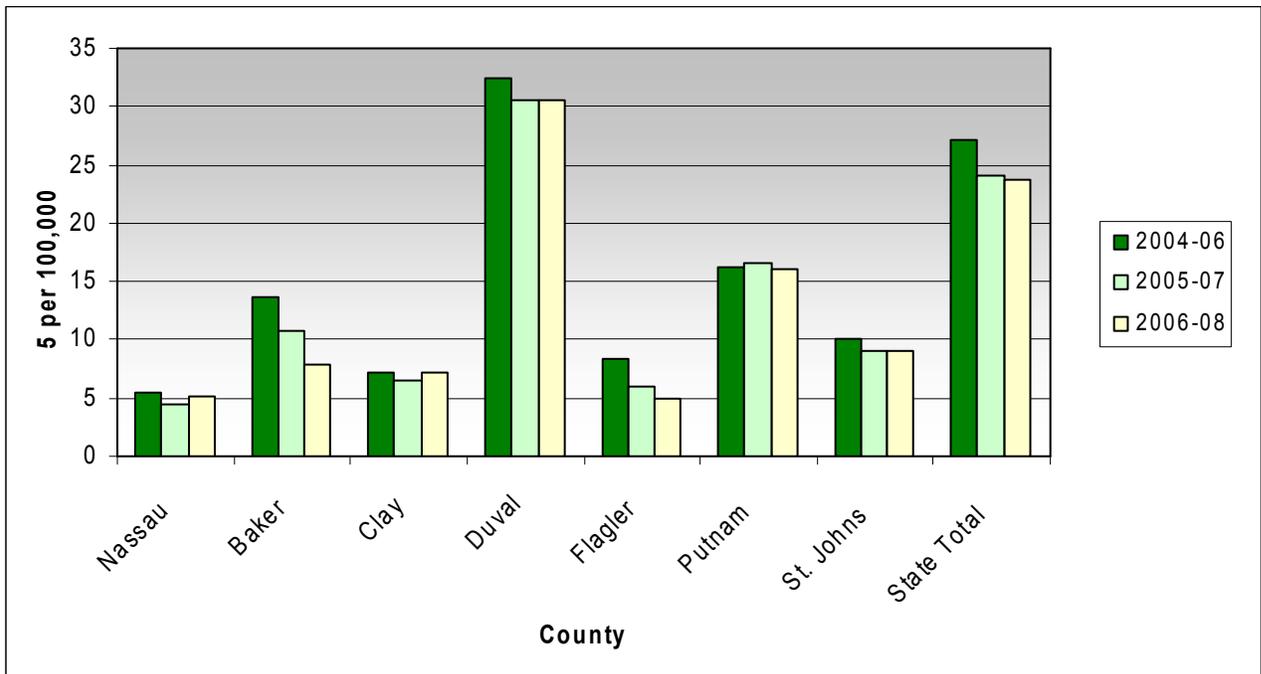


Figure 8— Deaths from AIDS Cases: Rolling 3-year Rates per 100,000

Table 31  
HIV Cases: Rolling 3-Year Rates for All Races All Sexes

County	Average Number of Reported New AIDS Cases			Average Number of Total Population			Rate Per 100,000		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
<b>Nassau</b>	<b>6</b>	<b>7</b>	<b>7</b>	<b>66,720</b>	<b>68,142</b>	<b>70,218</b>	<b>9</b>	<b>9.8</b>	<b>10.4</b>
Baker	3	3	3	24,422	24,963	25,609	12.3	13.4	11.7
Clay	12	14	19	171,636	178,685	183,333	6.8	8	10.5
Duval	315	328	356	864,537	883,483	896,553	36.4	37.1	39.7
Flagler	7	9	7	80,742	88,474	93,458	9.1	9.8	7.8
Putnam	15	16	19	73,960	74,421	74,775	19.8	21.9	25.4
St. Johns	17	18	18	159,278	167,414	175,043	10.9	10.6	10.3
State Total	5,305	5,398	6,002	18,024,188	18,396,828	18,661,381	29.4	29.3	32.2

Source: Florida Charts

Communicable Diseases > HIV Cases

<http://www.floridacharts.com/charts/chart.aspx>

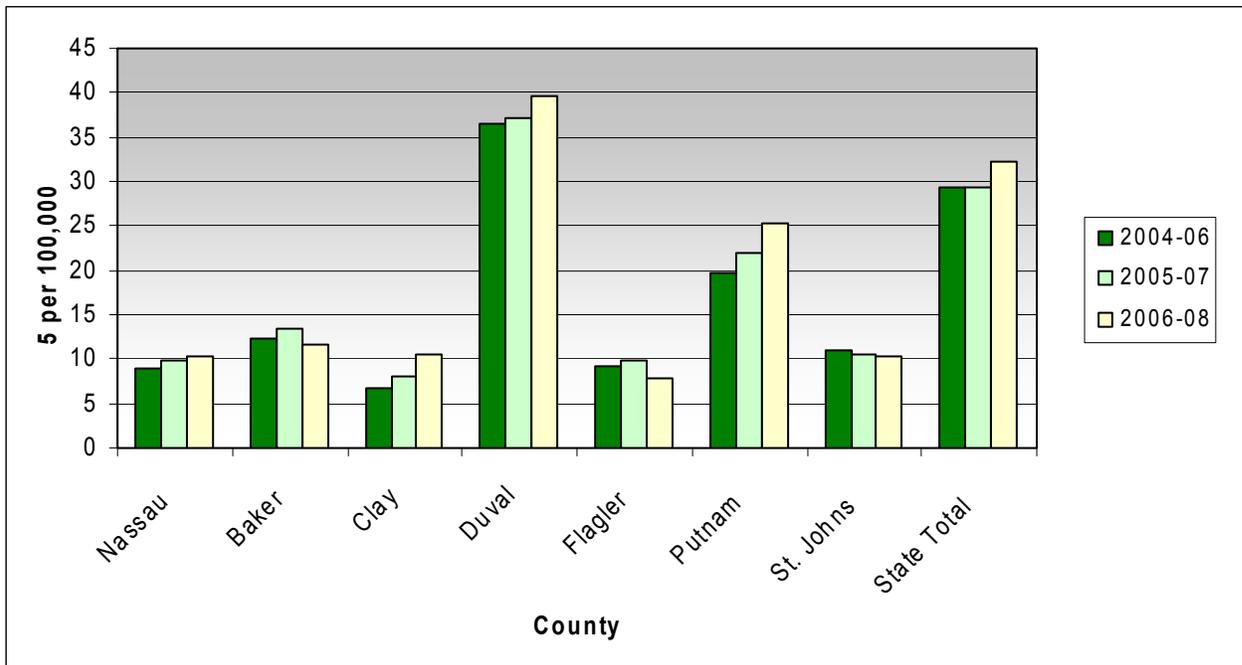


Figure 9— Deaths from HIV Cases Rolling 3-year rates per 100,000

Table 32  
Persons Presumed Living with HIV/AIDS

	2009	2008	2007
<b>Nassau County</b>	90	82	79
<b>State of Florida</b>	95,975	91,628	86,838

**Source**

Florida Department of Health

Totals for November 2007, November 2008, November 2009

[http://www.doh.state.fl.us/disease\\_ctrl/aids/trends/msr/2007/msr\\_2007.htm](http://www.doh.state.fl.us/disease_ctrl/aids/trends/msr/2007/msr_2007.htm)

**Alignment with Healthy People 2010**

Substance Abuse  
Responsible Sexual Behavior

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

As of June 2010, 94 persons were presumed to be living with HIV/AIDS in Nassau County, which ranks 31 out of 67 counties for HIV/AIDS case load. Miami Dade County ranks 1 with 24,919 persons living with HIV/AIDS during the same period.

**Table 33**  
Chlamydia, Gonorrhea & Infectious Syphilis Rates Per 100,000 Population

	2008	2007	2006
<b>Nassau County</b>	400.0	265.3	329.1
<b>State of Florida</b>	399.2	437.8	505.1

**Source**

Florida Department of Health

Office of Health Statistics & Assessment

Florida CHARTS: Communicable Diseases > Total Gonorrhea, Chlamydia & Infectious Syphilis

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Substance Abuse  
Responsible Sexual Behavior

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

Exposure to HIV/AIDS is exacerbated by substance abuse, which limits sound decisions regarding the use of condoms or abstaining from sex.

**Table 34**  
**Chlamydia, Gonorrhea, Syphilis Cases: Rolling 3-Year Rates for All Races All Sexes**

County	Average Number of Reported Cases			Average Number of Total Population			Rate Per 100,000		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
<b>Nassau</b>	<b>165</b>	<b>187</b>	<b>233</b>	<b>66,720</b>	<b>68,142</b>	<b>70,218</b>	<b>246.8</b>	<b>273.9</b>	<b>332.3</b>
Baker	108	118	114	24,422	24,963	25,609	442.2	472.7	443.9
Clay	438	520	625	171,636	178,685	183,333	255.2	291.2	340.9
Duval	7,000	7,627	8,234	864,537	883,483	896,553	809.6	863.3	918.4
Flagler	118	175	235	80,742	88,474	93,458	146.1	197.4	251.4
Putnam	371	374	401	73,960	74,421	74,775	502.1	502.1	536.7
St. Johns	201	255	323	159,278	167,414	175,043	126.4	152.3	184.3
State Total	66,597	73,313	83,543	18,024,188	18,396,828	18,661,381	369.5	398.5	447.7

Source: Florida Charts

Communicable Diseases > Total Gonorrhea, Chlamydia & Infectious Syphilis

<http://www.floridacharts.com/charts/chart.aspx>

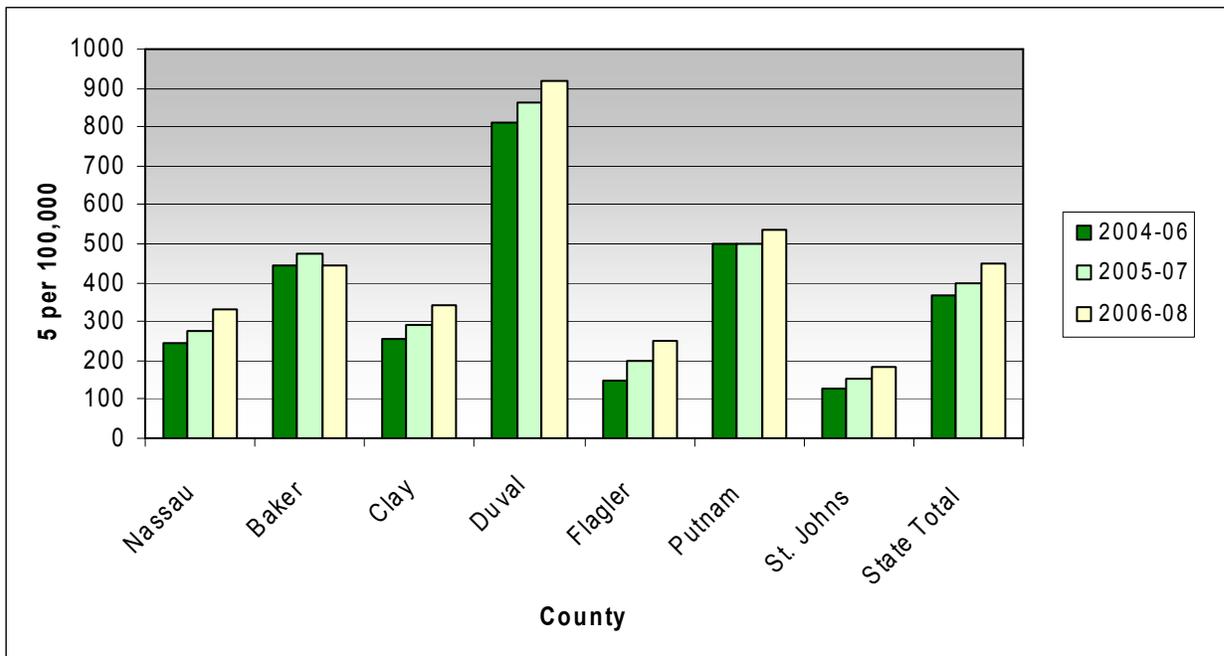


Figure 10— Total Cases of Chlamydia, Gonorrhea, Syphilis Cases Rolling 3-year rates per 100,000

Table 35  
Births in Nassau County

	2008	2007	2006
<b>Nassau County</b>	820	787	813
White	754	711	739
Black	44	58	52
Non-white Other	22	17	22
Unknown	0	1	0
<b>State of Florida</b>	231,417	239,120	237,166

**Source**

Florida Department of Health Office of Health Statistics & Assessment

Florida CHARTS: Florida Births

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Responsible Sexual Behavior

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

Table 36  
Births to Mothers Under 18 Years Old

Actual Births

	2008	2007	2006
<b>Nassau County</b>	36	40	35
White	35	34	33
Black	1	5	1
Non-white Other	1	1	1
Unknown	0	0	0
<b>State of Florida</b>	7,642	8,495	8,488

\*Percentage of all Births Born to Mothers Under 18 Years Old

	2008	2007	2006
<b>Nassau County</b>	4%	5%	4%
White	5%	5%	4%
Black	2%	9%	2%
Non-white Other	5%	6%	5%
Unknown	0%	0%	0%
<b>State of Florida</b>	3%	4%	4%

\*Actual Births to Mothers Under 18 ÷ Total Births

[Total Births](#)

**Source**

Florida Department of Health Office of Health Statistics & Assessment

Florida CHARTS: Florida Births

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Responsible Sexual Behavior

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

**Table 37**  
**Births to Mothers 15-17 Years Old**

**Actual Births**

	2008	2007	2006
<b>Nassau County</b>	35	40	35
White	33	34	33
Black	1	5	1
Non-white Other	1	1	1
Unknown	0	0	0
<b>State of Florida</b>	7,286	8,119	8,135

**\*Percentage of all Births Born to Mothers 15-17 Years of Age**

	2008	2007	2006
<b>Nassau County</b>	4%	5%	4%
White	4%	5%	4%
Black	2%	9%	2%
Non-white Other	5%	6%	5%
Unknown	0%	0%	0%
<b>State of Florida</b>	3%	3%	3%

\*Actual Births to Mothers 15-17 Years Old ÷ Total Births

Total Births

**Source**

Florida Department of Health Office of Health Statistics & Assessment

Florida CHARTS: Florida Births

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Responsible Sexual Behavior

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

**Table 38**  
**Low Birth Weight Babies (<2500 grams)**

Actual Low Birth weight Babies

	2008	2007	2006
<b>Nassau County</b>	58	58	77
White	49	46	65
Black	6	9	12
Non-white Other	3	3	0
Unknown	0	0	0
<b>State of Florida</b>	20,369	20,767	20,714

\*Percentage of Births: Low Birthweight Babies

	2008	2007	2006
<b>Nassau County</b>	7%	7%	9%
White	6%	6%	9%
Black	14%	16%	23%
Non-white Other	14%	18%	0%
Unknown	0%	0%	0%
<b>State of Florida</b>	9%	9%	9%

\*Actual Low Birth weight Babies ÷ Total Births

[Total Births](#)

**Source**

Florida Department of Health Office of Health Statistics & Assessment

Florida CHARTS: Florida Births

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Overweight and Obesity  
 Tobacco Use  
 Substance Abuse  
 Mental Health  
 Injury and Violence  
 Environmental Quality

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

Table 39  
Low Birth Weight Babies: Rolling 3-Year Rates for All Races Females

County	Average Number of LBW Births			Average Number of Total Births			Rate Percent		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
<b>Nassau</b>	<b>64</b>	<b>65</b>	<b>64</b>	<b>777</b>	<b>804</b>	<b>807</b>	<b>8.3</b>	<b>8.1</b>	<b>8</b>
Baker	33	38	36	379	398	408	8.8	9.5	8.8
Clay	169	175	178	2,236	2,339	2,351	7.5	7.5	7.6
Duval	1,273	1,295	1,293	13,121	13,479	13,638	9.7	9.6	9.5
Flagler	65	73	78	742	873	943	8.7	8.4	8
Putnam	108	105	102	1,024	1,061	1,053	10.6	9.9	9.7
St. Johns	116	127	123	1,698	1,795	1,800	6.8	7.1	6.9
State Total	19,729	20,428	20,617	227,143	234,168	235,901	8.7	8.7	8.7

Source: Florida Charts

Maternal & Child Health > Live Births Under 2500 Grams (Low Birth Weight)

<http://www.floridacharts.com/charts/chart.aspx>

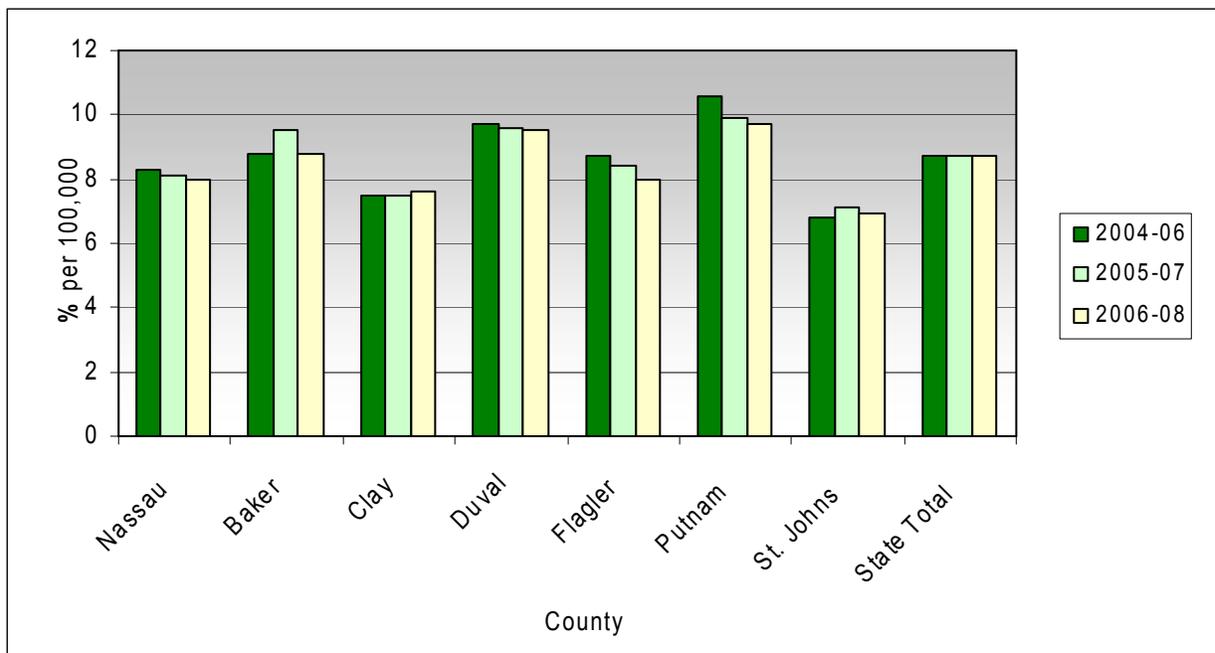


Figure 11— Total Cases of Low Birth Weight Babies Rolling 3-year rates per 100,000

**Table 40**  
Births to Mothers who Smoked During Pregnancy

	2008	2007	2006
<b>Nassau County</b>	130	147	164
White	125	141	155
Black	3	3	4
Non-white Other	2	2	5
Unknown	0	1	0
<b>State of Florida</b>	19,273	21,124	22,231

**Source**

Florida Department of Health Office of Health Statistics & Assessment

Florida CHARTS: Florida Births

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Tobacco Use

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

This chart contains data for women who answered their smoking status during pregnancy as either "Yes" or "Yes, but quit during pregnancy."

**Table 41**  
**Percentage of Pregnant Women Receiving Care in the First Trimester**

	<b>2008</b>	<b>2007</b>	<b>2006</b>
<b>Nassau County</b>	75.0%	72.3%	70.5%
White	76.3%	73.8%	70.5%
Black	54.5%	56.9%	65.4%
Non-white Other	72.7%	64.7%	81.8%
Unknown	0.0%	0.0%	0.0%
<b>State of Florida</b>	68.9%	69.2%	69.6%

**Source**

Florida Department of Health Office of Health Statistics & Assessment

Florida CHARTS: Florida Births

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

N/A

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

Women who forgo prenatal care do so for a variety of reasons including lack of insurance, access to transportation, lack of clarity regarding the importance of prenatal care, and difficulty accessing the public health system.

Table 42  
Infant Mortality Rate (Deaths per 1,000 Live Births)

	2008	2007	2006
<b>Nassau County</b>	3.7	7.6	4.9
White	2.7	5.6	4.1
Black	22.7	17.2	19.2
Non-white Other	0.0	58.8	0.0
Unknown	15.0	26.7	13.5
<b>State of Florida</b>	7.2	7.1	7.2

**Source**

Florida Department of Health Office of Health Statistics & Assessment

Florida CHARTS: Maternal & Child Health > Fetal and Infant Deaths

<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Physical Activity  
Overweight and Obesity  
Tobacco Use  
Substance Abuse  
Mental Health  
Injury and Violence  
Environmental Quality

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

Though the infant mortality rates for Blacks is high, Florida Charts indicates that 1 black child under the age of one-year died in 2008, 2007, and 2006. The same is true for the non-white population in 2007.

Table 43  
 Infant Mortality : Rolling 3-Year Rates for All Races All Sexes

County	Average Number of Infant Deaths			Average Number of Total Live Births			Rate Per 1,000		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
<b>Nassau</b>	<b>4</b>	<b>6</b>	<b>4</b>	<b>777</b>	<b>804</b>	<b>807</b>	<b>5.6</b>	<b>7.5</b>	<b>5.4</b>
Baker	5	5	3	379	398	408	13.2	13.4	8
Clay	13	12	14	2,236	2,339	2,351	5.7	5.3	6
Duval	139	135	128	13,121	13,479	13,638	10.6	10	9.4
Flagler	4	5	5	742	873	943	5.4	5.7	5.7
Putnam	14	12	8	1,024	1,061	1,053	14	11	7.6
St. Johns	9	8	9	1,698	1,795	1,800	5.3	4.5	4.8
State Total	1,625	1,676	1,690	227,143	234,168	235,901	7.2	7.2	7.2

Source: Florida Charts

Maternal & Child Health > Infant Mortality (0-364 days from birth)

<http://www.floridacharts.com/charts/chart.aspx>

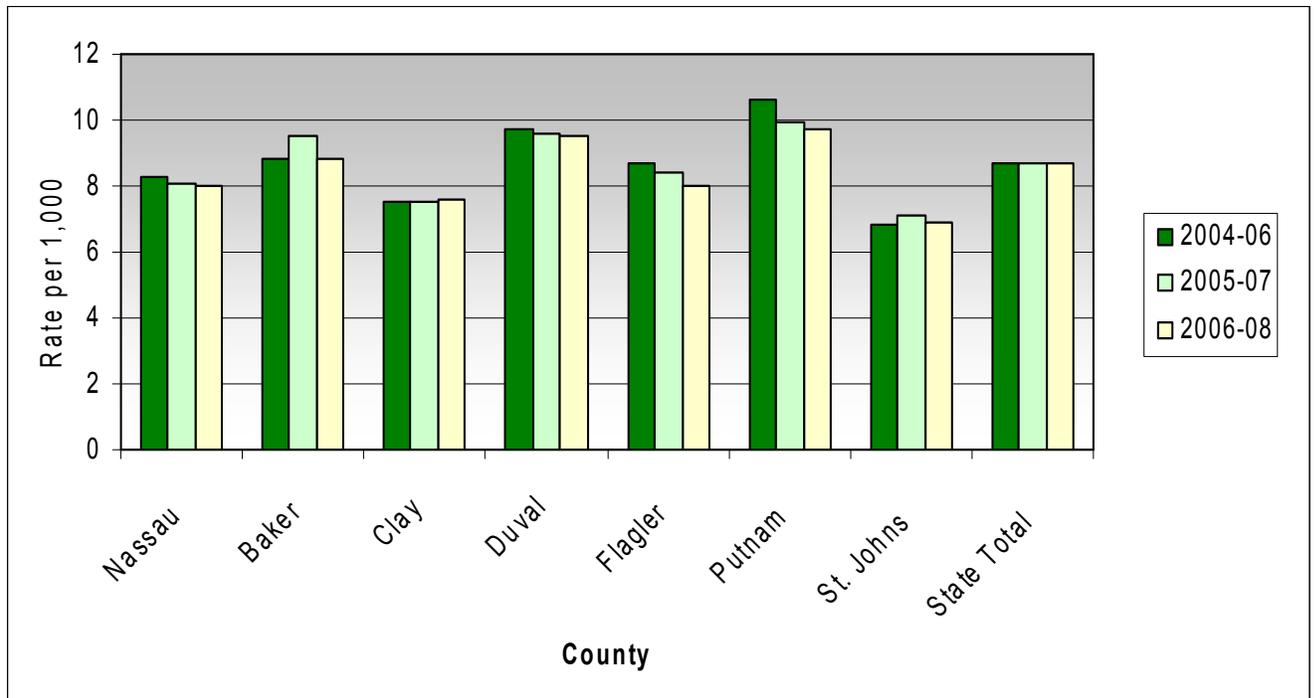


Figure 12– Total Infant Mortality Cases Rolling 3-year rates per 100,000

Table 44  
Domestic Violence Offenses per 100,000 Population

	2008	2007	2006
Nassau County	601.3	615.0	624.5
State of Florida	601.3	534.8	324.8

**Source**

Florida Department of Health Office of Health Statistics & Assessment  
 Florida CHARTS: Injuries >Total Domestic Violence Offenses  
<http://www.floridacharts.com/charts/chart.aspx>

**Alignment with Healthy People 2010**

Substance Abuse  
 Mental Health  
 Injury and Violence

The data provided measure the community's progress in addressing the indicators above as outlined in Healthy People 2010.

**Comments**

None

## ACCESS TO CARE

Access to healthcare continues to be a central focus for health policy in Florida and it is crucial in determining the health of a community. An assessment of existing health care systems will help to identify the current status of care available in the community. It is also a method to identify any significant gaps that precludes access to health care services for vulnerable populations such as the uninsured and underinsured. The following summary provides a review of health coverage available to Nassau County residents, health care providers practicing in the county, health care facilities, licensed health care services and other community resources.

### HEALTH COVERAGE

As the national economic climate continues to fluctuate, local economies are extremely vulnerable to market changes. The effect of this economic state is experienced throughout all service sectors. With the rising costs of health care, individuals and families are struggling to pay for adequate health care services. The majority of individuals rely on insurance coverage to spread the risk and financial cost of treatment. Most health coverage is obtained through an employer (their own or their spouse's) or received through Medicaid or Medicare.

Workplace insurance is typically offered through a type of managed care plan - either an HMO or PPO— offered as an employment benefit. The most common types of managed care plans are health maintenance organizations (HMOs) and preferred provider organizations (PPOs). Less common are point-of-service (POS) plans that combine the features of an HMO and a PPO. Managed health care plans save money by contracting with doctors and hospitals to control the associated fees for services. These cost savings are intended to hold down the cost that an individual and employer pay each month for the health insurance premium.

Medicare health insurance is provided to people age 65 or older, some disabled people under age 65, and people of all ages with End-Stage Renal Disease (permanent kidney failure treated with dialysis or a transplant). Medicare services are available with several options for coverage depending on the client's needs.

Medicaid is a state administered program available to certain low-income individuals and families who meet specific state and federal eligibility requirements. It is also available to eligible women who are pregnant women, emergency medical assistance for non-citizens, the elderly and disabled.

According to data provided by the US Census Bureau in the State and County by Demographic and Income Characteristics for 2007 report, the estimated number of uninsured in Nassau County for people under the age of 65 for all incomes was 12,386, which represented 20.9% of that population. From the same data set in 2007, 9,656 (22.1%) people between the ages of 18-64 were uninsured and 2,886 (17.6%) children under the age of 19 were uninsured.

Nassau County's reported HMO enrollment in 2009 was 13,068, as shown by type in Table 45. This includes HMO plans associated with Medicare and Medicaid. Appendix B-1 contains HMO enrollment figures by county in the Northeast Florida's seven county region for comparison.

Table 45 Health Insurance Coverage											
Percent of Population by Type of Health Coverage											
Area	2009 Population	*Medicare		Medicare HMO		Medicaid		Medicaid HMO		Commercial HMO	
		Enrollment	%	Enrollment	%	Enrollment	%	Enrollment	%	Enrollment	%
Nassau	73,297	12,507	17.1	1,557	2.1	8,392	11.4	5,060	6.9	6,451	9.0
Florida	19,021,613	3,247,677	17.1	750,336	3.9	2,727,362	14.3	946,066	5.0	1,573,347	8.3

Source: \*Medicare Enrollment as of March, 2009, Florida Medical Quality Assurance (FMQAI). Medicaid eligible as of 11/30/09, Agency for Health Care Administration (ACHA). Medicare, Medicaid and Commercial HMO Enrollment as of 6/30/09, Florida Office of Insurance Regulation. Percentages based on ESRI Population Estimates 2009.

In Florida, over 2.5 million residents receive Medicaid services. Approximately half of those are children and adolescents under the age of 21. While children are the bulk of the beneficiaries, most of the costs arise from providing services to seniors, especially nursing home care, and people with disabilities who have significant medical costs. Table 46 summarizes Medicare enrollment in Nassau County for aged and disabled by hospital insurance (HI) and supplemental medical insurance (SMI).

Table 46 Medicare County Enrollment and Aged and Disabled Enrollment, 2007									
Area	Aged			Disabled			Total Aged & Disabled		
	HI &/or SMI	HI	SMI	HI &/or SMI	HI	SMI	HI &/or SMI	HI	SMI
Nassau	9,620	9,616	9,244	1,896	1,896	1,704	11,516	11,512	10,948
Florida	2,699,180	2,693,37	2,591,664	429,344	429,329	389,450	3,128,524	3,122,706	2,981,114

Source: Medicare Enrollment, Centers for Medicare & Medicaid Services (CMS) as of July 2007  
Aged and Disabled Enrollment, Centers for Medicare & Medical Services (CMS), as of July 2007

Federal government provisions for children's health coverage include Medicaid and Title XXI of the Social Security Act. The states use Title XXI block grants to fund child health care coverage through an expansion of the Medicaid program, health insurance, or a combination of the two.

The KidCare Act of 1997 expanded Medicaid eligibility and the Healthy Kids Program, and initiated the MediKids program. Currently, there are four KidsCare programs: Healthy Kids, MediaKids, Children's Medical Service (CMS) and Medicaid. A description of each follows.

**Healthy Kids Program** - The Healthy Kids program provides medical coverage for children ages 5 through 19 who reside in households whose income is between 100 – 200% of the federal poverty level (FPL). Approximately 535 children from Nassau were enrolled in this program.

**MediKids** - MediKids covers children age 1 through 5 whose income is between 133-200% of the federal poverty level.

**Children's Medical Services (CMS)** - CMS covers children from birth through 18 who have special behavioral or physical health needs or chronic medical conditions.

**Medicaid** - Medicaid is the fourth KidCare program for children birth through 18 years and eligibility is based on the age of child and household income. Children less than age 1 are covered if the household income is below 200% of FPL, children ages 1 through 5 if household income is less than 133% of FPL, and children ages 6 through 19 if household income is below 100% of FPL.

### **PRIMARY CARE**

Primary care providers (PCP) give routine medical care for the diagnosis, treatment, and prevention of common medical conditions. Primary care is typically the first point of entry into the health care system for non-emergent services. PCP's refer patients requiring additional care to specialists for treatment and play an important role in the coordination of care in the managed care environment.

Family practitioners, internists, pediatric and general medicine physicians, obstetricians and gynecologists, nurse midwives, physician assistants, and nurse practitioners are all considered primary care providers. Additionally, public health nurses and school nurses provide primary care services to designated populations.

The Department of Health and Human Services (HHS) considers a primary care physician-to-population ratio of 1:3,500 persons adequate for most communities. In areas where more than 20% of the population lives in poverty, the ratio is increased to 3,000 persons per primary care physician.

HHS uses physician/population ratios to determine Health Professional Shortage Areas (HPSA) and eligibility for the development of federally funded primary care programs and placement of National Health Service Corps personnel. Primary care HPSA designation is based on the described ratio, the availability of care in nearby areas, infant mortality, birth rates, and poverty level. In November of 2000, Nassau County was given a primary care HPSA, with a primary care physician-to-population ratio of 1:5,382.

There are approximately 95 licensed medical professionals in Nassau County. This includes 58 Doctor's of Medicine (MD), 2 PhD's in Psychological Services, one Doctor of Optometry (OD), 2 Doctor's of Podiatric Medicine (DPM), 6 Physician's Assistants (PA), 5 Advanced Registered Nurse Practitioners (ARNP), and 19 Doctor's of Dental Medicine (DDS) and Dental Surgery (DMD). The majority of medical offices are located in eastern Nassau County within the City of Fernandina Beach at Baptist Medical Center (BMC)-Nassau. Many of the specialists hold office hours in Nassau County on limited days in addition to practicing at BMC in downtown Jacksonville. Approximately 51 physicians are associated with BMC-Nassau. Other physicians in Nassau County practice in the health department, family practices offices, pediatric practices, and other non-specified practices. A complete list of licensed medical providers is included in Appendix B2.

There are 14 licensed primary care clinics and laboratories in Nassau County, as listed in Appendix B2. This includes a Rural Health Clinic (RHC) located in Hilliard. The purpose of the RHC is to improve access to primary care in underserved rural areas and is certified to receive special Medicare and Medicaid reimbursement. Rural Health Clinics are required to use a team approach of physicians and midlevel practitioners (nurse practitioners, physician assistants or certified nurse midwives) to provide services. Hilliard Medical Center is designated as a RHC and is served by one part-time physician and one full-time nurse practitioner.

The Nassau County Health Department has 4 clinics to serve community residents — Callahan Clinic, Fernandina Beach Clinic, Hilliard Clinic and Yulee Clinic. There are also 3 licensed rehabilitation clinics and 14 specialty medical services. A listing of these facilities are provided in Appendix B2.

## **HEALTH CARE FACILITIES**

### **Acute Care**

Acute care hospitals play a key role in the delivery of health care services in a community. In addition to providing traditional inpatient services, hospitals also provide extensive diagnostic and treatment services on an outpatient basis. BMC-Nassau is the only hospital in Nassau County and is located at the east end of the county in Fernandina Beach. The hospital has 54 licensed beds and is a satellite medical center of Baptist Medical Center in Jacksonville. The hospital had an occupancy rate of 61.5% and average length of stay of 3.8 days during 2009. Table 47 summarizes the services available at BMC-Nassau as well as other hospitals in surrounding counties. A Patient Origin Report is presented in Appendix B3 which indicates the number of hospitalized patients from each zip code and to which hospital they went.

Residents living in the western Nassau County must travel between 35 to 50 miles to BMC-Nassau. Nassau County does not have a public transportation system. Transportation services are offered by Council on Aging of Nassau County through their Transportation Disadvantaged Program. This program provides transportation services to the elderly, disabled, economically disadvantaged, children at risk and for other without a means of transportation.

**Table 47**  
**2010 Acute Care Hospital Inventory of Services**

Area/Name of Hospital	Total Licensed Beds	Acute Care Beds	Inventory of Medical Services					
			Peds	OB	NICU Level II	NICU Level III	Psych	HBSNU <sup>^</sup>
<b>BAKER</b>								
Ed Fraser Memorial	25	25						
<b>CLAY</b>								
Orange Park Medical Center	255	224		*	*		*	
<b>DUVAL</b>								
BMC-Beaches	146	146		*				
Baptist Medical Center (BMC)	619	521	*	*	*	*	*	
Baptist Medical Center—South	196	782		*	*			
Mayo Clinic	214	214						
Memorial Hospital –Jax	425	415		*	*			
Shands Jax Medical Center	695	548	*	*	*	*	*	*
St Luke’s Hospital	313	284		*	*			*
St. Vincent’s Medical Center	528	518		*	*			
<b>NASSAU</b>								
BMC-Nassau	54	54		*				

Note: <sup>^</sup>HBSNF = Hospital Based Skilled Nursing Facility

+ St Vincent’s Medical Center was approved to convert all 34 HBSNU beds to acute care beds

Source: AHCA Inventory of Licensed Hospital Beds July 2010

Approximately 32% of Nassau County residents received inpatient care at Baptist Medical Center-Nassau. Of the total 8,798 inpatient hospital discharges of all Nassau County residents, nearly 40% of the discharges were western residents and 60% were eastern residents. Table 48 and 49 illustrates Nassau County's top ten hospital discharges by diagnostic related groups (DRGs) for adults and children, respectively, according to AHCA Hospital Discharge Data Files 2009.

Table 48 Adult Discharges, Nassau County Residents, 2009		
Adult Top 10 DRG's (Adults age 18 and over)	Total	% of Top 10 DRG's
Psychoses	367	19.1%
Vaginal Delivery W/O Complicating Diagnoses	351	18.3%
Major Joint & Limb Reattach Procedures of Lower Extremity	254	13.2%
Cesarean Section W/O CC	202	10.5%
Esophagitis, Gastroent & Misc. Digest Disorders With CC	173	9.0%
Cellulitis W/O MCC	137	7.1%
Uterine & Adnexa Procedures for Non-Malignancy W/O CC	122	6.4%
Simple Pneumonia & Pleurisy With Complicating Conditions (CC)	111	5.8%
Chronic obstructive pulmonary disease/o CC.MCC	104	5.4%
Chest Pain	99	5.2%
<b>Total Top 10 DRG's</b>	<b>1,920</b>	<b>100%</b>

Table 49 Pediatric Discharges, Nassau County Residents, 2009		
Pediatric Top 10 DRG's (Children age 0-17 years)	Total	% of Top 10 DRG's
Normal Newborn	578	69.6%
Neonate With Other Significant Problems	95	11.4%
Prematurity Without Major Problems	41	4.9%
Full Term Neonate With Major Problems	22	2.7%
Prematurity With Major Problems	21	2.5%
Extreme immaturity or respiratory distress syndrome, neonate	19	2.3%
Cellulitis W/O MCC	17	2.0%
Bronchitis & Asthma W/O MCC	15	1.8%
Chemotherapy W/O acute leukemia as secondary diagnosis w CC	11	1.3%
Vaginal Delivery Without Complicating Diagnosis	11	1.3%
<b>Total Top 10 DRG's</b>	<b>830</b>	<b>100%</b>

### Emergency Room Care

Local hospital emergency room utilization is a good indicator of the availability and accessibility of area health care services. Many appropriate visits to an emergency room do not result in hospital admissions. Emergency room utilization for the hospital in the region is provided in Appendix B4. The report indicates the number of people by zip code that have used the emergency room for each hospital in the region. A total of 22,310 residents from Nassau County used hospital services in 2008 for outpatient care and 4,077 for inpatient care.

### Ambulatory Care Sensitive Conditions

Access to routine primary care services can prevent the start of an illness or condition, control an acute episodic illness or condition, or manage a chronic disease or condition and avoid the need for hospitalization. Many chronic diseases are referred to as Ambulatory Care Sensitive (ACS) conditions. ACS conditions are those which hospital use might have been prevented or reduced by timely and effective access to outpatient primary care services.

### Long-Term Care

Long-term care is defined as "those services designed to provide diagnostic, preventive, therapeutic, rehabilitative, supportive, and maintenance services for individuals who have chronic physical and/or mental impairments, in a variety of settings ranging from home to institutional settings, to ensure the quality of life."

Long-term care includes nursing home care. Medicaid is the primary funding source of nursing home care, paying for 66% of all nursing home days. Medicaid typically pays for long-term care while Medicare provides funding for short-term care following hospital discharge. Many nursing homes limit the number of dedicated Medicaid beds in their facilities in order to control the number of low-reimbursing, long-term Medicaid patients admitted. There are 2 nursing homes in Nassau County. Table 50 summarizes the number of nursing home beds and occupancy rates of these 2 facilities.

Table 50 Free Standing Community Nursing Homes, 2009					
	Licensed Beds	Total Census Days	Occupancy Rate	Medicaid Rate	Medicare Rate
Life Care Center of Hilliard	120	39,628	90.5%	62.7%	20.1%
Quality Health of Fernandina Beach	120	36,747	83.9%	69.9%	15.7%
Total	240	76,375	87.2%	66.2%	18.0%

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### **Assisted Living Facilities**

Assisted Living Facilities (ALFs) provide a residential setting where a group of older or disabled persons unable to live independently receive room, meals, and variety of personal supportive services. There are a total of 4 ALF's in Nassau County. Savannah Grand, The Jane Adams House, and Osprey Village at Amelia Island are located in Fernandina Beach and Dayspring Village is located in Hilliard.

### **Mental Health and Substance Abuse**

Sutton Place Behavioral Health is a not-for-profit agency incorporated in 1992. It is the only community mental health/substance abuse treatment agency in Nassau County and is the single point of accountability designated by the Board of County Commissioners to manage alcohol/drug/mental health (ADM) services for the county. The agency has locations in Fernandina Beach and Hilliard. Services provided include prevention, intervention, outpatient, aftercare, day treatment, case management, intensive therapeutic onsite services, psychiatric/medication management, and HIV/AIDS testing and counseling.

There are numerous Alcoholics Anonymous support group meetings throughout the county. In addition, some churches in the community offer mental health and substance abuse counseling and services to residents of the county, though certain churches will provide these services only to their own members.

### **LICENSED HEALTH CARE SERVICES**

#### **Hospice**

Hospice provides a coordinated program of palliative care to terminally ill patients and supportive services to their family members. Hospice patients must be certified as terminally ill by their physicians and typically are in their last six months of life. Nassau County is served by Hospice of Northeast Florida, located in Yulee.

#### **Home Health Care**

Home health care agencies provide intermittent skilled nursing and rehabilitative services as well as basic personal care to those needing assistance in their homes. There are several home health agencies based in Jacksonville which serve the greater Northeast Florida area, including Nassau County. There are 3 licensed home health agencies located in Nassau County. These include Amelia Home Health Services located in Fernandina Beach, Florida/Georgia Home Medical Supply located in Callahan, and Life Line Home Care Services located in Fernandina Beach.

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### **Emergency Medical Services**

Emergency Medical Services (EMS) are provided to Floridians by over 250 licensed EMS provider services located throughout the state. Each provider service is staffed with emergency medical technicians (EMTs) and paramedics to provide service to their area 24 hours per day, 7 days a week. These services include ground and air transportation for patients and may be associated with hospitals, fire departments, city or county governments, or private corporations. Nassau County has one licensed EMS provider, the Nassau County Department of Public Safety.

### **OTHER COMMUNITY RESOURCES**

There are numerous social service agencies and organizations in Nassau County. The Nassau County Health Department in collaboration with Nassau County Health Improvement Coalition developed the Nassau County Resource Directory. The brief two-page reference sheet for the directory can be found in Appendix B5. The full guide can be found at <http://www.nassaucountyhealth.org>



## NEXT STEPS

Nassau County would benefit from engaging in a community driven health improvement process such as Mobilizing for Action through Planning and Partnerships (MAPP). This process includes a visioning component that includes:

- Completing a Local Public Health System Assessment (Nassau went through this assessment in 2005)
- Identifying threats and opportunities that may affect the local public health system through a forces of changes assessment
- Completing a Community Themes and Strengths Assessment
- From all of the data collected, identifying strategic issues and formulating goals and strategies to take on those issues
- Acting on the issues identified through a planning, implementing, and evaluating cycle



# APPENDIX A

## Community Leadership Interview and Focus Group Sessions



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## Nassau County Health Department

### Community Leadership Interviews and Focus Group Sessions

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#### **Introduction:**

The Nassau County Health Department (NCHD), in an effort to collect feedback on how to best develop new public health initiatives and deliver services to the local community, interviewed six individuals with strong leadership abilities and experience representing marginalized populations. Additionally in order to gather community feedback, NCHD hosted two focus groups with residents of Nassau County at one Westside location and at one Fernandina Beach location.

#### **Overall Conclusions:**

One of the most common initiatives voiced by community leaders and focus groups participants was providing health care services which are affordable and accessible to the community. When asked what their top priorities are for improving the lives of people in Nassau County, health care access was listed as the top priority by greater than 50% of the community leaders interviewed.

One common theme in the data collected was the importance of meeting people where they are (i.e. deliver services to individuals so they do not have to travel beyond their homes, places of employment, and schools). Common themes identified were the need for affordable housing and transportation for Nassau County residents. The importance of marketing and coordinating services was highlighted due to a need to have a better knowledge of available health services, an issue that was repeated several times.

By bringing together participants from a variety of backgrounds and professional experiences, the focus group sessions and community leader interviews helped establish a channel of communication between governmental agencies and the local communities they serve. A continued dialogue is necessary to design a project which is community supported and universally adopted by multiple persons.

#### **Future Uses:**

This themes and strengths assessment is part of a health planning process that utilizes community partners and community members in the planning and development of future health improvement initiatives. Themes and strengths assessments are useful tools for identifying positive aspects of community life that should be maintained or utilized while also finding areas for improvement. The information in this and other assessments can be used as the driving force behind targeted health endeavors in Nassau County.

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## Nassau County Health Department

### Summary of Community Leadership Interviews and Focus Group Sessions

May 1, 2009

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#### Introduction

The Nassau County Health Department (NCHD), in an effort to collect feedback on how to best develop new public health initiatives and deliver services to the local community, interviewed six individuals with strong leadership abilities and experience representing marginalized populations. On January 2, 2009, the first of six interviews began with Jim Mayo, a representative of Nassau Baptist Medical Center Hospital. Following the first interview, five other community leadership interviews included Laureen Pagel, Sutton Place Behavioral Health Center; Dr. Washburn, Barnabas Center, Nassau County Homeless Coalition; Lynn Peterson, Salvation Army Hope House; Pastor Serrano, Promised Land Ministries; and Mr. Coakley, West Nassau High School.

#### Methods

Six interviewees were recruited by the Director of the Nassau County Health Department and follow-up communications were conducted to schedule one-hour interviews with each participant. All six leaders were interviewed by telephone and the majority of interviews lasted from 45-60 minutes. Responses were entered and analyzed in "Survey Monkey," an online survey tool designed for developing surveys and collecting qualitative and quantitative data. In the following results section, when an answer was mentioned by multiple interviewees, a number in parenthesis was inserted at the end of the sentence to indicate the number of times the response was received.

#### Results

##### **Question 1:**

Interviewees were asked to describe their greatest achievement as a community leader. Lynn Peterson's response was her work experience as a crisis counselor with The Department of Children and Families where she spent five years assisting at-risk families affected by domestic violence, sexual abuse, and divorce. Lynn's work helped reunite countless families and find safe places for children to live. Lynn mentioned "We don't respect the wisdom of the elderly. As a kid my parents and I sung to the elderly and they would come to our home and hold my brothers and sisters. The elderly were such a big part of our lives as a kid. They were not related but they were part of our family."

Jim Mayo recounted his involvement in the Nassau Chamber of Commerce and Economic Board where he contributed to a decision making process which helped expand Nassau County's economy and shape the area's future.

Laureen Pagel recalled her role in expanding preventative services at Sutton Place Behavioral Center to reduce the rates of substance abuse in middle and high school age groups, an intervention that was awarded a best practices award in 2007.

Dr. Washburn recounted a lifetime of service while providing healthcare to underserved populations in Baltimore, Maryland and Manatee and Nassau counties in Florida.

Pastor Serrano's work as a translator linked Spanish speaking individuals in Nassau County with translation services to help persons overcome communication barriers and gain access to available services.

Dr. Coakley provided mentorship to children in Callahan as a physical education coach and principle. He cites making an impact in the lives of adolescents to be his greatest joy and professional accomplishment.

#### **Questions 2-4**

When asked to cite what they would consider the three most important issues to citizens of Nassau County, 33% of interviewees mentioned the following three issues to be of highest importance:

- Improving transportation
- Providing services for non-English speaking individuals
- Creating a more unified effort to reduce health disparities

The following issues were listed as the top three issues of 16.7% of those surveyed: affordable housing, green spaces for recreational activity, access to affordable and healthy food options, social network venues for the elderly, social network venues for non-English speaking individuals, and additional services (non-specified) for non-English speaking individuals.

The following three issues were not ranked in the top three lists of those interviewed: services for low-income individuals, mental health services, and rural health services. Fifty percent of participants answered "other" unlisted topics to be their major concern.

When asked to prioritize what interviewees consider the number one most important need of the Nassau County population, health care was mentioned by 50% of the six persons surveyed, making it the most important topic repeatedly cited by interviewees. Other topics mentioned were developing more affordable recreational activities for the youth, dental care (1), transportation (1), affordable housing (1), mental health services, and medications for the uninsured youth (1).

When asked where they see the most marginalized populations in Nassau County the following areas were identified: between 8-14<sup>th</sup> streets (Amelia Island), rural areas (undefined), and the low-income population (all locations).

When asked what the marginalized populations would ask from their government, the following needs were identified: decent living conditions and affordable housing (4), access to health care, assistance with addictions issues, counseling for mental health issues, services for low-income persons, local health services, better water sewage and waste disposal, better communication from the government about available health services, reducing the victimization of persons with criminal histories, and improved employment opportunities.

### **Questions 5-10**

When asked what are the most difficult career challenges they face, the following responses were gathered: recruiting medical staff who are willing to live in Nassau County (2), meeting the mental health needs of the community, a lack of mentoring programs for children and elderly persons, assisting the community with receiving adequate shelter and food, and the lack of flood protection for homes and businesses. One interviewee stated, "I would like to see a program to facilitate the elderly and children to co-mentor one another. The elderly would feel needed and would have a reason for living. Because the children and elderly populations get along so well, this would be an ideal population partnership."

When asked to list the strengths of existing care networks in Nassau, the following were identified: partnerships between community leaders and networks (i.e. personal relationships), the development of the Homeless Coalition, Barnabas Center, The Hope House, The Nassau County Health Department, Sutton Place Behavioral Center, Council of Aging, and Baptist Medical Center.

Barriers identified were: health care, mental health services, primary care in west Nassau, education, opportunities for moving up in the economy, lack of resources, and the competition between similar agencies for the same resources.

Interviewees were asked how they think the local government could better serve the needs of marginalized populations in Nassau County and what suggestions they have for increasing the dialog between the community and the local government. The following three responses were received:

- 1.) Health care issues need to be addressed nationally to create change because the state has limited funds.
- 2.) Local organizations need more stability in funding. Government should do an analysis of the relationship between poverty and income and look at the local low-income community first as a place for interventions.
- 3.) Utilizing local resources and experts is an important part of the process.

Interviewees suggested that a forum should be established in the form of a town hall meeting as a place for the community to have County Commissioners hear their ideas. They suggested hosting one meeting per quarter throughout the community. It was mentioned that County Commissioners need to be more fully educated about the needs of marginalized populations.

Community leaders mentioned that local organizations need to stop competing with each other and should recognize their common goals. It was noted that affordable housing should be available to low-income persons and those with disabilities. Also taxes should be lowered for the elderly and there should be more advocacy groups for the elderly. The need for improved education, health-care, and more bi-lingual language classes for students to learn English were all identified as concerns. One interviewee commented that there should be more surveys of marginalized populations like this NCHD survey effort.

When surveyed regarding what populations have been left behind in terms of economic development, as Nassau transitioned from a service economy to a tourist economy, the following feedback was gathered. The first interviewee did not agree that Nassau is changing. He mentioned that tourism is really suffering but tourism dollars are only a small portion of the economy. He said the people “left behind” in terms of economic development are not “taking advantage of the educational system.”

Three interviewees suggested assisting non-English speaking populations with language barriers and citizenship status to help them become better represented in the community. Two interviewees mentioned that the African American community on Amelia Island needs assistance since they tend to be a low-income population (2). It was also noted that the elderly population needs assistance. It was mentioned that persons earning less than \$10,000 annually need jobs and small businesses need tax breaks.

All interviewees were asked to list three specific solutions that they think would address the problems stated above as well as to best advise the Nassau Health Improvement Coalition to improve the health outcomes of the most marginalized persons in the county. The following solutions were documented:

- Need better access to primary care services
- Need to educate students about all the things they can accomplish, especially for low-income students
- Improve housing for low-income individuals
- Host focus groups in areas where the affected populations live
- Bring services to the community through a mobile van from St. Vincent's
- Identify spokespersons in the African American and Latino communities and ask them what they think are the most important needs in their communities
- Improve access to dental services
- Create a NCHD mobile health clinic at the Peck or MLK Center to provide care there instead of the Nectarine clinic

- Provide services and economic assistance for the elderly to assist with fuel, electric, food, water bills, house cleaning, and pest control
- Improve client services. One person stated that, “People who do not have health care are treated worse than those who do. Healthcare is a very big issue here, because people who have a part-time job do not qualify for welfare”
- Educate people on how to improve their health and also teach them how to get out of poverty
- Assist youth by providing anger management classes

Give pregnant women more leave of absence time from school

### **Question 11**

#### **Introduction**

Each interviewee was read the following background statement and asked to respond to the four main themes generated during the feedback sessions which followed the NCHD “Unnatural Causes” film screenings.

*“In March of 2008 the Nassau County Health Department aired two community screenings of the film Unnatural Causes, a film that challenges viewers to consider the role of economic disparities and how health is affected by income, stress, financial stability, social stratum in society, and genetics. This film generated a moderated group discussion on these and other topics and community feedback was elicited, recorded, and used to extract key themes that describe the public reaction to the film. Four main points were identified and I will ask you to react to each and discuss the methods you would apply to solve each issue. The following feedback was gathered at the Unnatural Causes film screenings and the sections below ask each key informant to respond to these four themes: food, education, funding, and prevention.”*

#### **Theme One: Food**

**Community Feedback:** To improve access to healthy foods and lifestyles, more economic investment is needed to make healthier food options more affordable. People want to improve their health, but finding the resources (time/money) limits their efforts.

**Community Leader Response:** Low-income individuals may consume cheaper and often less nutritious foods. “It is easier to eat things that are high caloric rather than things that are more nutritious and take longer to prepare. It is important for young children and pregnant women to get nutrition for healthy development. During these tough economic times people do not have funds to buy healthier food options. Money is an issue and people eat frozen food because they do not have time to prepare better options.” Another interviewee stated “I guess it is not as bad as some urban areas but I think many low-income persons do not have money for the products. A community gardens is starting near St. Peters Church and there are areas in the African American community where they could

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### ***Theme Two: Education***

**Community Feedback:** Engaging key stakeholders and persons from all educational backgrounds is important to advance awareness so that policy changes can be made. Many highly educated people attended the film screenings but it would have been better to have more diversity in educational levels as well as more elected officials present.

**Community Leader Response:** “We need to do more to solve these issues than simply put a program in place and say the problem is solved. The whole goal of a program is to say it needs to ends suffering, but we need to monitor the programs to make sure they are effective. I think we spend so much time worrying that maybe we are giving services to those that do not need it that we are not giving them to those that need the services.”

When you do random surveys, they need a representative to show un-biased data and have a diversity of input. One person commented that, “The middle class pays attention because they can; lower classes are more interested in making money and surviving. Middle classes are taught differently and are more attentive to these things.” It was suggested that we must present this idea to city officials at one of their meetings. The NCHD could ask to present at one of their meetings and address the city officials at their own events to let them know what is going on in their community. Phone and emails are not effective, in person meeting are the preferred method for communication.

### ***Theme Three: Funding***

**Community Feedback:** Connecting the efforts of local community organizations and providing stability in funding is integral. Good programs are ended due to lack in funds and existing organizations are segmented. Local organizations are working on different pieces of the same problem, but need to be unified under a common purpose.

**Community Leader Response:** The funds being cut are the funds that go to the ones who need it most. “Funds come too sporadically. If we don't apply for grants we run out of money. Surviving on donations is hard, most money we get through donations pays administration costs and we need more money to go back to the community.”

### ***Theme Four: Prevention***

**Community Feedback:** Prevention is instrumental because many of the problems faced by the community are preventable. Key community needs identified were: opportunities for improving healthy lifestyles (food, transportation, green spaces, community networking/social environments), support from local leadership, access to healthcare, and a unified effort to reduce health disparities.

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**Community Leader Response:** Leaders should create a community center where people can come and learn how to eat and live a healthier lifestyle. “People don't know how to be healthy. There should be a community center for low-income persons, for the people who really need it. I think the government is not going to be able to come up with enough programs, the churches and organizations need to step up. Utilizing the caravan is hard, everyone is waiting for it. Also there needs to be an elderly day center for people to go to.”

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## Focus Groups Final Report

### Introduction:

In order to gather community feedback NCHD hosted two focus groups with residents of Nassau County at two locations. This first focus group was held in conjunction with the annual "Railroad Days" at the Callahan Historical Society on March 28, 2009. The facilitator for the event was Becky Lazensky, MPH, Regional Environmental Epidemiologist. The recorders were Dr. Seidel, MD, MPH, Nassau County Health Department Director, and Karen Scoggins, MPH, Epidemiologist. The second focus group was held on March 30, 2009 at the Martin Luther King Center in Fernandina Beach in conjunction with the "Children's Day" event. Karen Scoggins facilitated the discussion. Dr. Seidel and Kim Geib, MSN, ARNP, Disease Control Manager, served as the recorders.

### Methods

The sessions both lasted for 45 minutes with a five minute introduction from the facilitator and recorders. A survey tool containing four questions was used as an interview guide for the sessions. The group had 10 minutes to give feedback on each question. Feedback was recorded with written note taking and a tape recorder. Each participant signed a consent form disclosing that their identifying information would not be solicited or released. In addition, each participant was asked to remain anonymous throughout the session. Four participants attended the first focus group on March 28 and 13 attended the second on March 30. Participants were selected by convenience sampling by the NCHD by choosing known community representatives or recruiting, at random, citizens who attended the Children's Day and Railroad Days events.

### Results: Focus Groups

Participants identified the following themes to be a priority: access to affordable healthcare and transportation. It was stated that although there are assistance programs, they are not able to meet the high demand of the public. Barriers to receiving services were listed as: limited services are available and long waiting for appointments. The highest need population was identified as city residents, rural populations with no public transportation, underinsured and uninsured (3), and working poor with no insurance or limited insurance.

It was mentioned that use of the Emergency Room for primary care by at-risk persons with uncontrolled diabetes and high blood pressure is a problem. There needs to be preventive services for at-risk persons and health departments need more funding to be able to see more people. It was also said that minorities have been negatively impacted by an increasing unemployment rate.

It was stated that when people perceive that a service is not “good” or if they were treated poorly, they will travel far distances to another county or state to receive that service. Also being treated poorly can be an experience that “scars” the individual. A story of a recent shooting at a pharmacy was due to how an employee treated customers poorly and unfortunately a patient with mental illness responded violently.

A comment was made that health care is more accessible in other states and that the Health Department was more accessible when it was located downtown rather than the new location.

### **Question 1**

*Several health and lifestyle topics were identified in recent community interviews with residents of Nassau County. Several key themes were considered of high importance to those who live in the Nassau community. These include: access to affordable healthcare, improved transportation, and services for non-English speaking individuals. How would you respond to these topics and if you had to prioritize these, which would you rate of highest importance?*

When asked to prioritize the most important factor in improving health in their community, access to affordable healthcare was identified. It was stated that some families cannot afford “KidCare” which is designed to be an affordable solution. Single moms were identified persons who have difficulty “making ends meet.” Over time it was observed that “things are getting worse” in terms of everyone’s ability to make ends meet.

Pride issues exist and even if services are available people might not want to take advantage of the services. One suggestion was to have a community town hall meeting in the different towns or at health fairs so people can find out what services are available in their local communities. Another vulnerable population identified was widows who have minimal incomes.

Comments were received regarding medical services which are located in Yulee, Jacksonville, and Fernandina Beach, but which are not available in Callahan. People mentioned that there are no specialized services in west Nassau.

### **Question 2**

*If you had to choose a specific population in Nassau County that you think has the highest need for governmental assistance in order to experience a healthy lifestyle, where do you see that the needs of residents are the highest and who do you think would benefit from additional spending of grant monies the most? You can choose a specific population/s (race or ethnic group) or a specific location (neighborhood or city).*

The following highest need populations were identified: the elderly (in particular those living in west Nassau, widows, those living off social security paychecks, grandparents serve as the primary guardians of their grandchildren, and migrant workers who are often of Hispanic ethnicity. One chief concern for migrant populations was their lack of insurance and transportation and the language barriers that make acquiring these services difficult. One comment was that migrant workers contribute to their communities by spending money, attending church, and “behaving”.

### Question 3

*If you could improve your local community by providing a health program, project, or service for disadvantaged or low income persons, what would you create and for what reasons did you choose this particular health initiative?*

Responses included designing a preventive program, teaching self-sufficiency, and improving disease prevention knowledge. When asked how participants would design their initiatives, they mentioned that the following conditions would be most important: hypertension, stroke, cancer, heart disease, and diabetes. One participant mentioned that even through health information is available, additional funding is needed to provide services. In order to access services, when transportation is not available, participants need home health nurses to provide services. It was mentioned that when community health programs are available to the public, program administrators need to be non-judgmental by refraining from making recipients feel “below” service providers. One comment received was that homeless persons, substance abusers, and inmates are often treated poorly by those in the “ivory towers.” It was mentioned that empathy is important when providing services. Participants mentioned the need to have immediate needs met, such as receiving access to food. One participant was quoted saying, “All the teaching won’t fill my baby’s stomach.”

When participants were asked what type of health project they would develop, free health exams were mentioned. Participants stated that many people do not seek services because they cannot afford the associated fees. Free exams are needed especially for those in the 30-50 year age group. One participant mentioned that there needs to be a pediatrician at the Health Department more frequently. Another comment was that dental exams are too expensive to afford, therefore free dental services are needed for adults and children. Services should be available to those with and without insurance.

One person commented that young women need regular health exams and gynecological services. Younger women need more routine checkups. A participant inquired if NCHD provides sex education in school. Persons asked if transportation to NCHD is available to students and whether students know what services are available.

Participants noted that childhood nutrition is important in both home and school environments. Teachers are finding alternative rewards for students that diverge from the common practice of giving candy as a reward for good behavior. Schools now offer a balance in food choices, but high school students can choose any item off the menu. Students need more nutritional guidance on making better food choices. Parents who are at work cannot supervise children and because they are in a hurry they cannot prepare nutritional food.

A comment was received that service providers can be difficult to reach especially by phone when users have to push numbers rather than speaking to a live person. Participants mentioned that it is even more difficult for those with no phone or those calling by payphone. Participants stated that some churches operate food banks for low-income persons. One participant mentioned that there are groups of homeless persons living in the woods near I-95 in Callahan.

#### **Question 4**

*What do you consider the best or most effective way/s for health information to be communicated to you and on what topic/s would you like to receive more information? (Examples: video-conferencing, newspapers, magazines, snail mail, internet/web-based learning, town hall meetings, lectures, television). Alternatively, what non-virtual locations are best for you to receive health information? (Examples: local library, health department, community college, school)*

Participants were asked what the best ways to receive health information are and the following responses were gathered. The best ways listed were word-of-mouth, newspaper, internet, local free newspapers, health fairs, churches, school assemblies, senior citizens dinners, grocery store parking lots, and anything mobile (i.e. blood banks). One participant commented that pamphlets are not effective because people discard them quickly. The Health Department should give lectures about the available free services at senior dinners and school assemblies. Those interviewed thought it would be better if health services were brought to their house, removed from the “ivory tower” of educators and government officials, connected through transportation services, and presented at health fairs and community events. The following communication methods were identified as effective: newsletters, word-of-mouth, radio (difficult as many stations are based in Jacksonville and the reception is poor in Nassau), and flyers.

One participant mentioned that teens would benefit from receiving health information on pregnancy as students are more likely to listen to trusted individuals. Teens are more willing to discuss personal information with healthcare workers than teachers and parents. Teens need a trusted individual they can talk to about issues surrounding pregnancy because trust and confidentiality are paramount. Participants commented that children are raising themselves. Parents send their children to school when they are sick because parents have to go to work. Counseling is needed because many children suffer from emotional issues stemming from being raised in broken homes.

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Participants stated that agencies should refrain from selectively inviting people because certain events announce that all are welcome, when it is not the case. Community organizations need to work together as many agencies are not sure what the mission statements are for other local organizations. The more agencies know about each other, the more they can refer clients to other resources. Several suggestions were received such as: agencies should share their email distribution lists, limit barriers to access, and make persons feel comfortable because people are tired of being lied to when seeking care.

### **Nassau County Community Leadership Interviews and Focus Group Conclusions**

One of the most common initiatives voiced by community leaders and focus groups participants was providing health care services which are affordable and accessible to the community. When asked what their top priorities are for improving the lives of people in Nassau County, health care access was listed as the top priority by greater than 50% of the community leaders interviewed.

One common theme in the data collected was the importance of meeting people where they are (i.e. deliver services to individuals so they do not have to travel beyond their homes, places of employment, and schools). Common themes identified were the need for affordable housing and transportation for Nassau County residents. The importance of marketing and coordinating services was highlighted due to a need to have a better knowledge of available health services, an issue that was repeated several times.

By bringing together participants from a variety of backgrounds and professional experiences, the focus group sessions and community leader interviews helped establish a channel of communication between governmental agencies and the local communities they serve. A continued dialogue is necessary to design a project which is community supported and universally adopted by multiple persons.

# Appendix 1: Community Leader Survey Questionnaire

## Mapp Project

### 1. Default Section

The Nassau County Health Department has chosen you to participate in a study of local community leadership and their capacity to improve the health and wellbeing of the local community. The purpose of this survey is to draw upon the experiences of local experts who have worked in the field of public service in Nassau County. Your opinions regarding the most critical and important issues will be counted in this interview as a way to direct the future outreach activities of the Nassau County Health Improvement Advisory Coalition.

#### 1. Fill in

**Name:**   
**Company:**   
**City/Town:**   
**State:**   
**ZIP/Postal Code:**   
**Country:**   
**Email Address:**   
**Phone Number:**

#### 2. Describe the opportunities you have had in your lifetime to serve your local community and please describe your greatest success as a community leader?

#### 3. Please choose 3 issues that you think should be of greatest concern to Nassau County's community leadership.

- access to affordable healthcare
- housing needs
- transportation
- green space for recreational activity
- services for non-english speaking individuals
- services for low-income individuals
- access to healthy/affordable food
- mental health services
- rural health services
- social network venues (SNVs) for the elderly
- SNVs for non-English speaking individuals
- unified effort to reduce health disparities
- more stability in funding for local non-profit orgs working to serve the citizens of Nassau County
- other

## Mapp Project

4. Of the 3 issues you previously mentioned, chose ONE that you would consider the most important issue for the Nassau community?

5. Where do you see the most marginalized populations in Nassau and if you had to be their spokesperson what do you think they would ask from their local government and health authorities?

6. What is the most difficult part of your job and how would additional support (infrastructure/resources) reduce these challenges?

7. What strengths do you see in the existing care networks in Nassau County? Where do you feel that are gaps in the local care community (those who provide services to marginalized populations)?

8. How do you think local government can better serve the needs of marginalized populations in Nassau? What would you suggest be done to increase the dialog between the Nassau community and their governmental leadership?

9. What populations do you think have been left behind in terms of economic development during the last 10 years as Nassau transitions from a fishing/service economy to a more tourist economy and which populations were most economically isolated and strained during the transition?

10. How would you advise the Nassau health improvement coalition to improve the health outcomes of the most marginalized persons in the county? Please list three specific solutions that you think would address the problem.

## Mapp Project

**11. In March of 2008 the Nassau County Health Department aired two community screenings of the film Unnatural Causes, a film that challenges viewers to consider the role of economic disparities and how health is affected by income, stress, financial stability, social stratum in society, and genetics. This film generated a moderated group discussion on these and other topics and community feedback was elicited, recorded, and used to extract key themes that describe the public reaction to the film. Four main points were identified and I will ask you to react to each and discuss the methods you would apply to solve each issue.**

**1.) Improving access to healthy foods and lifestyles, more economic investment is needed to make healthier options more affordable. People want to improve their health, but finding the resources (time/money) limits their efforts.**

**2.) Engaging key stakeholders and persons from all educational backgrounds is important to advance awareness so that policy changes can be made. Many highly educated people attended the film screenings but it would have been better to have more diversity in educational levels as well as more elected officials present.**

**3.) Connecting the efforts of local community organizations and providing stability in funding is integral. Good programs are ended due to lack in funds and existing organizations are segmented. Local organizations are working on different pieces of the same problem, but need to be unified under a common purpose.**

**4.) Prevention is instrumental because many of the problems faced by the community are preventable. Key community needs identified were: opportunities for improving healthy lifestyles (food, transportation, green spaces, community networking/social environments), support from local leadership, access to healthcare, and a unified effort to reduce health disparities.**

## Appendix 2: Nassau County Health Department Focus Group Questionnaire

1.) Several health and lifestyle topics were identified in recent community interviews with residents of Nassau County. Several key themes were considered of high importance to those who live in the Nassau community. These include: access to affordable healthcare, improved transportation, and services for non-English speaking individuals. How would you respond to these topics and if you had to prioritize these, which would you rate of highest importance?

\*(Read the 3 topics again: access to affordable healthcare, improved transportation, and services for non-English speaking individuals)

2.) If you had to choose a specific population in Nassau County that you think has the highest need for governmental assistance in order to experience a healthy lifestyle, where do you see that the needs of residents are the highest and who do you think would benefit from additional spending of grant monies the most? You can choose a specific population/s (race or ethnic group) or a specific location (neighborhood or city).

3.) If you could improve your local community by providing a health program, project, or service for disadvantaged or low income persons, what would you create and for what reasons did you choose this particular health initiative?

4.) What do you consider the best or most effective way/s for health information to be communicated to you and on what topic/s would you like to receive more information? (Examples: video-conferencing, newspapers, magazines, snail mail, internet/web-based learning, town hall meetings, lectures, television). Alternatively, what non-virtual locations are best for you to receive health information? (Examples: local library, health department, community college, school)



HMO Insurance Summary



# HMO Enrollment

## Grand Total

As of December 31, 2009

Health Maintenance Organization	Baker	Clay	Duval	Flagler	Nassau	St. Johns	Volusia	TOTAL Qtr 09	TOTAL 4TH Qtr 08
Aetna Health, Inc.	879	10,636	45,648	1,182	3,769	7,526	8,534	78,174	84,519
Amerigroup Florida, Inc.	0	0	5	0	0	53	5,666	5,724	3,063
AvMed, Inc.	2,972	2,351	10,630	14	806	1,027	0	17,800	17,065
Cigna HealthCare of Florida, Inc.	1	39	199	0	50	11	52	352	244
Citrus Health Care, Inc.	2	10	50	4	5	10	1,324	1,405	1,884
Florida Health Care Plan, Inc.	0	0	0	6,228	0	0	38,047	44,275	47,377
Freedom Health, Inc.	0	27	267	0	0	0	43	337	N/A
Health Options, Inc.	397	1,714	7,661	141	1,484	1,465	1,249	14,111	20,953
Healthease of Florida, Inc.	0	1,525	6,228	0	535	0	10,623	18,911	51,943
Humana Advantagecare Plan, Inc.	0	0	0	0	0	0	4	4	N/A
Humana Medical Plan, Inc.	390	629	12,472	2,162	1,737	1,459	19,795	38,644	38,658
Optimum Healthcare	0	2	69	0	0	0	25	96	N/A
Quality Health Plans, Inc.	9	418	1,083	8	21	72	948	2,559	1,618
Sunshine State Health Plans	2,493	8,340	37,388	0	3,954	0	0	52,175	N/A
Universal Healthcare, Inc.	0	102	5,662	1	0	0	2	5,767	2,015
United Healthcare Plans of Florida, Inc.	1,068	4,106	6,877	2,209	1,242	5,310	23,925	44,737	42,638
Well Care of Florida	0	164	3,130	0	0	0	0	3,294	7,090
County Total as of December 31, 2009	8,211	30,063	137,369	11,949	13,603	16,933	110,237	328,365	
County Total as of December 31, 2008	5,777	22,533	146,188	12,143	10,418	13,262	108,746	319,067	
Percent Change from 12/31/08 to 12/31/09	42.1%	33.4%	-6.0%	-1.6%	30.6%	27.7%	1.4%	2.9%	

## Small Group

As of December 31, 2009

Health Maintenance Organization	Baker	Clay	Duval	Flagler	Nassau	St. Johns	Volusia	TOTALS
Aetna Health, Inc.	305	2,370	13,167	205	1,188	3,000	1,756	21,991
AvMed, Inc.	23	285	1,191	0	90	159	0	1,748
Florida Health Care Plan, Inc.	0	0	0	523	0	0	3,371	3,894
Health Options, Inc.	18	228	949	7	45	283	56	1,586
Humana Medical Plan, Inc.	12	236	1,219	55	96	193	496	2,307
United Healthcare Plans of Florida, Inc.	0	11	13	3	0	12	8	47
<b>TOTAL</b>	<b>358</b>	<b>3,130</b>	<b>16,539</b>	<b>793</b>	<b>1,419</b>	<b>3,647</b>	<b>5,687</b>	<b>31,573</b>

## Large Group

As of December 31, 2009

Health Maintenance Organization	Baker	Clay	Duval	Flagler	Nassau	St. Johns	Volusia	TOTALS
Aetna U.S. Healthcare	550	7,818	28,859	784	2,304	3,432	5,509	49,256
AvMed, Inc.	2,948	2,065	9,439	0	716	868	0	16,036
CIGNA Healthcare of Florida, Inc.	1	39	199	0	50	11	52	352
Florida Health Care Plan, Inc.	0	0	0	2,974	0	0	22,472	25,446
Health Options, Inc.	179	1,459	6,554	133	1,429	1,169	1,138	12,061
Humana Medical Plan, Inc.	47	295	2,371	6	97	255	125	3,196
United HealthCare of Florida, Inc.	448	560	2,427	969	138	850	4,641	10,033
<b>TOTAL</b>	<b>4,173</b>	<b>12,236</b>	<b>49,849</b>	<b>4,866</b>	<b>4,734</b>	<b>6,585</b>	<b>33,937</b>	<b>116,380</b>

## individual \*

As of December 31, 2009

Health Maintenance Organization	Baker	Clay	Duval	Flagler	Nassau	St. Johns	Volusia	TOTALS
Aetna U.S. Healthcare	24	448	2,726	193	268	898	1,248	5,805
AvMed, Inc.	1	1	0	14	0	0	0	16
Florida Health Care Plan, Inc.	0	0	0	132	0	0	792	924
Health Options, Inc.	1	26	97	1	10	12	50	197
Humana Medical Plan, Inc.	0	0	3	0	0	0	4	7
United HealthCare of Florida, Inc.	3	4	17	7	1	6	33	71
<b>TOTAL</b>	<b>29</b>	<b>479</b>	<b>2,843</b>	<b>347</b>	<b>279</b>	<b>916</b>	<b>2,127</b>	<b>7,020</b>

\* Includes Commercial Group Conversions

## HealthyKids

As of December 31, 2009

Health Maintenance Organization	Baker	Clay	Duval	Flagler	Nassau	St. Johns	Volusia	TOTALS
HealthEase of Florida	0	1,525	5,759	0	535	0	0	7,819
Health Options, Inc.	199	0	7	0	0	0	0	206
United HealthCare of Florida, Inc.	0	3	1	1,183	0	3,362	5,601	10,150
<b>TOTAL</b>	199	1,528	5,767	1,183	535	3,362	5,601	18,175

## Medicaid

As of December 31, 2009

Health Maintenance Organization	Baker	Clay	Duval	Flagler	Nassau	St. Johns	Volusia	TOTALS
Amerigroup Florida, Inc.	0	0	5	0	0	53	5,666	5,724
Citrus Health Care, Inc.	2	10	50	4	5	10	88	169
HealthEase of Florida	0	0	469	0	0	0	10,623	11,092
Humana Medical Plan, Inc.	0	3	19	2	0	4	15	43
Sunshine State Health Plans	2,493	8,340	37,388	0	3,954	0	0	52,175
Universal Healthcare, Inc.	0	1	5,217	0	0	0	0	5,218
United HealthCare of Florida, Inc.	611	3,521	4,387	34	1,101	96	13,582	23,332
<b>TOTAL</b>	3,106	11,875	47,535	40	5,060	163	29,974	97,753

## Medicare

As of December 31, 2009

Health Maintenance Organization	Baker	Clay	Duval	Flagler	Nassau	St. Johns	Volusia	TOTALS
Aetna Health, Inc.	0	0	896	0	9	196	21	1,122
Citrus Health Care, Inc.	0	0	0	0	0	0	1,236	1,236
Florida Health Care Plan, Inc.	0	0	0	2,599	0	0	11,412	14,011
Freedom Health, Inc.	0	27	267	0	0	0	43	337
Health Options, Inc.	0	1	54	0	0	1	5	61
Humana Advantagecare Plan, Inc.	0	0	0	0	0	0	4	4
Humana Medical Plan, Inc.	331	30	8,643	2,098	1,527	999	19,140	32,768
Optimum Healthcare	0	2	69	0	0	0	25	96
Quality Health Plans, Inc.	9	418	1,083	8	21	72	948	2,559
Universal Healthcare, Inc.	0	101	445	1	0	0	2	549
United HealthCare of Florida, Inc.	0	0	1	0	0	973	0	974
Well Care of Florida	0	164	3,130	0	0	0	0	3,294
<b>TOTAL</b>	340	743	14,588	4,706	1,557	2,241	32,836	57,011

**Federal Employees**

**As of December 31, 2009**

Health Maintenance Organization	Baker	Clay	Duval	Flagler	Nassau	St. Johns	Volusia	TOTALS
Humana Medical Plan, Inc.	0	65	217	1	17	8	15	323
United HealthCare of Florida, Inc.	6	7	31	13	2	11	60	130
<b>TOTAL</b>	<b>6</b>	<b>72</b>	<b>248</b>	<b>14</b>	<b>19</b>	<b>19</b>	<b>75</b>	<b>453</b>

*Source: FLOIR Managed Care Quarterly Data Summary Reports*

## APPENDIX B2

### Licensed Medical Providers



## Nassau County Physicians and Dentists

Name	Company	Street Address	Street City	ST	Zip	Phone
<b>Doctor of Medicine</b>						
1 Robert Frost, MD	Baptist Medical Center - Nassau	463832 State Road 200	Yulee	FL	32097	904-225-2311
2 Edward Tribuzio, MD	Baptist Medical Center - Nassau	1340 South 18th Street Suite 204	Fernandina Beach	FL	32034	904-261-0643
3 Diana Twiggs, MD	Baptist Medical Center - Nassau	1888 South 14th Street	Fernandina Beach	FL	32034	(904) 261-0922
4 Donald Twiggs, MD	Baptist Medical Center - Nassau	96084 Victorias Pla	Yulee	FL	32097	904-268-5200
5 Kevin White, MD	Baptist Medical Center - Nassau	463832 State Road 200	Yulee	FL	32097	904-225-2311
6 Gerald Buford, MD	Baptist Medical Center - Nassau	1250 South 18th Street Suite 202	Fernandina Beach	FL	32034	904-277-4690
7 Todd DeVane, MD	Baptist Medical Center - Nassau	1250 South 18th Street Suite 202	Fernandina Beach	FL	32034	904-277-4690
8 Alex Llarena, MD	Baptist Medical Center - Nassau	1340 S 18th St, Ste. 201	Fernandina Beach	FL	32034	(904) 261-7221
9 Henry Rodeffer, MD	Baptist Medical Center - Nassau	1250 South 18th Street	Fernandina Beach	FL	32034	(904) 277-4690
10 Jesse Greenblum, MD	Baptist Medical Center - Nassau	1411 South 14th Street	Fernandina Beach	FL	32034	(904) 261-5605
11 William McGath, MD	Baptist Medical Center - Nassau	307 Po Box	Yulee	FL	32041	904-714-1107
12 Robert Frost, MD	Baptist Medical Center - Nassau	463832 State Road 200	Yulee	FL	32097	904-225-2311
13 Samuel Divaker, MD	Baptist Medical Center - Nassau	1250 S 18th St	Fernandina Beach	FL	32034	(407) 850-3497
14 Tae Rho, MD	Baptist Medical Center - Nassau	1250 S 18th St	Fernandina Beach	FL	32034	(904) 261-7707
15 Christian Koppel, MD	Baptist Medical Center - Nassau	23 Wax Myrtle Road	Fernandina Beach	FL	32034	(904) 277-6634
16 Farid Ullah, MD	Baptist Medical Center - Nassau	2334 South 8th Street	Fernandina Beach	FL	32034	(904) 261-6135
17 Yash Sangwan, MD	Baptist Medical Center - Nassau	Ste C, 1411 South 14th Street	Fernandina Beach	FL	32034	(904) 261-6209
18 Clarence Bourdreaux, MD	Baptist Medical Center - Nassau	1545 South 14th Street	Fernandina Beach	FL	32034	(904) 261-7500
19 Russell Metz, MD	Baptist Medical Center - Nassau	1545 South 14th Street	Fernandina Beach	FL	32034	(904) 261-7500
20 William Bauer, MD	Baptist Medical Center - Nassau	Ste 102, 1340 South 18th Street	Fernandina Beach	FL	32034	(904) 321-1417
21 Jeff Brink, MD	Baptist Medical Center - Nassau	1411 South 14th Street Suite A	Fernandina Beach	FL	32034	(904) 321-4341
22 John Fraker, MD	Baptist Medical Center - Nassau	1361 13th Avenue South Suite 110	Jacksonville Beach	FL	32250	(904) 247-8182
23 Don Lerner, MD	Baptist Medical Center - Nassau	836 Prudential Drive	Jacksonville	FL	32207	(904) 398-5301
24 Scott Trimas, MD	Baptist Medical Center - Nassau	1545 South 14th Street	Fernandina Beach	FL	32034	(904) 321-2580
25 William Drewry, MD	Baptist Medical Center - Nassau	1340 South 18th Street	Fernandina Beach	FL	32034	(904) 261-0878
26 Robert Hogan, MD	Baptist Medical Center - Nassau		Fernandina Beach	FL	32034	(904) 491-5600
27 Chester Nieland, MD	Baptist Medical Center - Nassau					(904) 261-0878
28 Robert Joyce, MD	Baptist Medical Center - Nassau					(904) 277-9728
29 Mathew Luke, MD	Baptist Medical Center - Nassau					(904) 277-9728
30 Gil Cu, MD	Baptist Medical Center - Nassau					(904) 430-0176
31 Patrick Garrett, MD	Baptist Medical Center - Nassau					

## Nassau County Physicians and Dentists

Name	Company	Street Address	Street City	ST	Zip	Phone
<b>Doctor of Medicine</b>						
32 Richard Boehme, MD	Baptist Medical Center - Nassau					(904) 249-4456
33 Gregory Sengstock, MD	Baptist Medical Center - Nassau					(904) 292-4049
34 Charles Adams, MD	Baptist Medical Center - Nassau					(904) 261-5741
35 Greg Smith, MD	Baptist Medical Center - Nassau					(904) 261-8787
36 Dennis George, MD	Baptist Medical Center - Nassau					(904) 261-8400
37 Dayan Sandler, MD	Baptist Medical Center - Nassau					(904) 202-2257
38 Donald Pollock, MD	Baptist Medical Center - Nassau					(904) 376-3800
39 Heidi Pomm, PhD	Baptist Medical Center - Nassau					
40 William Ross, PhD	Baptist Medical Center - Nassau					(9904) 277-2052
41 Robert Marino, MD	Baptist Medical Center - Nassau					(904) 277-3600
42 Shailendu Shah, MD	Baptist Medical Center - Nassau					(904) 321-3435
43 David Page, MD	Family Practice					(904) 491-3688
44 Carmita Marrero, MD	First Coast Pediatrics					(904) 491-0177
45 Elmarie Sabban, MD	First Coast Pediatrics					(904) 491-0177
46 James Price, MD	Yulee Family Practice Center					(904) 261-7030
47 John Winnie, MD						(904) 321-0363
48 Judy Rivenbark, MD						
49 Eugenia Ngo-Seidel, MD	Nassau County Health Department					(904) 548-1800
50 Harry Turner, MD	Nassau County Health Department					
51 Tom Washburn, MD	Nassau County Health Department					(904) 548-1880
52 Asteria Ferrer, MD	Nassau County Health Department					(904) 548-1880
53 Terry Collins, MD	Nassau County Health Department					(904) 548-1880
54 William Hansberry, MD	Nassau County Health Department					(904) 786-9600
55 Jim Dawsey, MD	Nassau County Health Department					(904) 548-1880
56 Jeff Blake, MD	Nassau County Health Department					(904) 548-1860
57 Michael Sharpe, MD	Hilliard Medical Center					(904) 845-3574
58 William Solomon, MD	Callahan Family Practice					(904) 879-3416
59 Dennis Pallan, MD	Baptist Primary Care of Callahan					(904) 879-4544
60 Andrea Norwood, MD	Children's Medical Center					(904) 879-0860

<b>Doctor of Optometry</b>						
1	John McClane, OD	Baptist Medical Center - Nassau				(904) 261-5741
<b>Doctor of Podiatric Medicine</b>						
1	James Gildenson, DPM	Baptist Medical Center - Nassau				(904) 548-1860
2	Jeff Burmeister, DPM					904) 277-8370
<b>Physicians Assistant</b>						
1	Mark Balester, PA	Baptist Medical Center - Nassau	7740 Point Meadows Drive SUITE 6	Jacksonville	FL	32256 904-641-6110
2	Barbara Bayko, PA	Baptist Medical Center - Nassau	463832 State Road 200	Yulee	FL	32097 904-225-2311
3	Arthur Forbes, PA	Baptist Medical Center - Nassau	1888 South 14th Street	Fernandina Beach	FL	32034 (904) 261-0922
4	Wilbur Johnson, PA	Yulee Family Practice Center				(904) 225-9043
5	Michael Gross, PA	Callahan Family Practice				
6	James Long, PA	Baptist Primary Care of Callahan				904.879.4544
<b>Advance Registered Nurse Practitioner</b>						
1	Sharon Belcher, ARNP	First Coast Pediatrics				904-491-0177
2	Darlene Brown, ARNP	Yulee Family Practice Center				(904) 225-9043
3	Jan Meires, ARNP	Nassau County Health Department				
4	Susan Irvin, ARNP	Hilliard Medical Center				(904) 845-3574
5	Janet Gilbert, ARNP	Callahan Family Practice				(904) 879-9803
2						

<b>Doctor of Dental Medicine / Doctor of Dental Surgery</b>						
Alvin Bayer, DDS						(904) 261-6666
Michael Cook, DDS						904) 261-0022
Stephen English, DDS						904) 261-0022
Robert Friedman, DDS						904 261 6826
David (Tod) Garner, DDS						904-261-2156
Robert Johnson, DDS						(904) 261-0851
Laurie Anne Kitson, DDS						<a href="tel:904-261-7181">904-261-7181</a>
Kenneth Mertz, DDS						(904) 491-1222
Mark Olbina, DDS						(904) 277-8500
Claude Owens, DDS						(904) 261-7181
Stephen Potter, DDS						<a href="tel:904-225-0607">904-225-0607</a>
Sueellen Rodeffer, DDS						(904) 261-2156
William Rodeffer, DDS						(904) 261-3306
Jeffrey Slavkovsky, DDS						<a href="tel:904-225-4999">904-225-4999</a>
George Van Etta, DDS						(904) 261-7181
J Roger Harrison, DDS						<a href="tel:904-879-1893">904-879-1893</a>
Kenneth Rice, DDS						<a href="tel:904-879-6998">904-879-6998</a>
Parker Shaffer, DDS						(904) 879-3786
Robert Friedman, DMD	Baptist Medical Center - Nassau					904-261-6826
<b>Specialty Practices</b>						
Southern Heart Group	Baptist Medical Center - Nassau	1340 South 18th Street	Fernandina Beach	FL	32034	904-261-9786
First Coast Oncology	Baptist Medical Center - Nassau					

Patient Origin Report by Zip Code



Number Of Hospitalized Patients From Each Zip Code  
And Which Hospital They Went To

ZIP CODE	TOTAL PATIENTS	BAPTIST	BAPTIST BEACHES	BAPTIST SOUTH	MAYO CLINIC	MEMORIAL	SPECIALTY HOSPITAL	ST. LUKE'S	ST. VINCENT'S	SHANDS JAX	ORANGE PARK	FLAGLER HOSPITAL	BAPTIST NASSAU	ED FRASER	KINDRED NORTH FL	RIVER POINT	WEKIVA SPRINGS
32202	732	160	4	5	3	51	2	14	89	386	6	1	0	0	0	7	4
32204	826	104	5	13	12	29	4	10	438	174	15	1	0	0	0	16	5
32206	2,075	399	3	14	7	179	6	36	229	1,142	21	2	2	0	0	32	3
32209	4,288	695	5	27	18	273	20	64	719	2,364	21	0	3	0	5	65	9
CORE DUVAL	7,921	1,358	17	59	40	532	32	124	1,475	4,066	63	4	5	0	5	120	21
32208	3,115	675	11	21	29	243	22	47	623	1,338	19	3	3	0	6	67	8
32218	3,263	891	27	48	54	287	12	117	535	1,142	40	3	60	0	2	30	15
32219	841	194	4	11	11	77	7	10	211	282	17	0	1	0	2	10	4
32226	809	215	15	17	44	162	8	34	104	161	16	1	20	0	1	8	3
NORTH DUVAL	8,028	1,975	57	97	138	769	49	208	1,473	2,923	92	7	84	0	11	115	30
32205	2,224	480	6	29	23	106	7	41	985	428	50	3	0	0	9	39	18
32210	4,199	804	15	77	54	165	14	65	1,753	792	372	7	3	0	3	39	26
32220	838	218	4	20	7	37	4	28	329	127	46	4	1	0	1	11	1
32221	1,510	366	9	38	20	78	4	33	590	246	104	2	2	0	2	13	3
32222,15	506	98	7	18	5	18	1	18	167	69	89	5	0	0	0	5	6
32234	434	83	2	4	2	19	1	7	171	66	72	0	1	0	2	1	3
32244,12,14	3,218	552	16	114	51	155	9	74	822	566	786	4	3	0	17	36	13
32254	1,362	250	2	9	10	100	3	11	418	505	29	1	2	0	0	22	0
WEST DUVAL	14,291	2,851	61	309	182	678	43	277	5,235	2,799	1,548	26	12	0	34	166	70
32207	2,493	690	24	58	61	890	17	128	149	369	21	7	0	0	2	56	21
32211	2,419	413	60	41	65	1,040	19	124	127	435	19	3	2	0	1	56	14
32216	2,451	367	54	80	81	913	24	408	132	268	21	2	3	0	3	68	27
32217	1,280	280	11	141	53	339	7	186	66	155	12	4	0	0	0	20	6
32223	1,100	214	6	405	57	128	4	81	88	46	32	5	1	0	1	17	15
32224	1,434	176	416	43	302	146	6	152	58	89	7	5	2	0	1	20	11
32225	2,538	506	347	77	265	638	15	266	127	219	9	3	1	0	3	45	17
32246	2,327	323	264	81	205	652	13	292	95	309	23	3	1	0	2	45	19
32256	1,803	279	61	277	180	241	12	438	91	137	23	6	1	0	0	40	17
32257	1,973	366	21	675	83	299	19	180	95	161	36	1	1	0	3	21	12
32258	1,038	173	21	526	41	67	4	68	41	47	20	11	0	0	1	10	8
32277	1,647	293	27	33	69	654	7	135	113	270	11	2	0	0	3	22	8
SOUTH DUVAL	22,503	4,080	1,312	2,437	1,462	6,007	147	2,458	1,182	2,505	234	52	12	0	20	420	175
32227,28	71	14	11	1	1	16	0	2	3	10	2	1	0	0	0	9	1
32233	1,248	184	664	12	119	74	8	36	30	88	8	2	3	0	0	14	6
32250	1,571	221	791	19	160	105	12	71	34	95	10	13	1	0	1	28	10
32266	339	56	179	4	28	26	2	12	11	12	0	1	0	0	6	2	
BEACHES	3,229	475	1,645	36	308	221	22	121	78	205	20	17	4	0	1	57	19
DUVAL TOTAL	55,972	10,739	3,092	2,938	2,130	8,207	293	3,188	9,443	12,498	1,957	106	117	0	71	878	315

*Report Excludes Normal Newborns*

## PATIENT ORIGIN STUDY

JULY - DECEMBER 2009

Number Of Hospitalized Patients From Each Zip Code  
And Which Hospital They Went To

ZIP CODE	TOTAL PATIENTS	BAPTIST BAPTIST	BAPTIST BEACHES	BAPTIST SOUTH	MAYO CLINIC	MEMORIAL	SPECIALTY HOSPITAL	ST. LUKE'S	ST. VINCENT'S	SHANDS JAX	ORANGE PARK	FLAGLER HOSPITAL	BAPTIST NASSAU	ED FRASER	KINDRED NORTH FL	RIVER POINT	WEKIVA SPRINGS
32003	973	114	1	44	56	31	0	25	179	41	463	6	0	0	2	7	4
32043	1,512	119	3	58	44	58	2	27	178	61	923	13	1	0	15	5	5
32065	1,401	175	2	36	44	67	4	36	208	63	744	6	1	0	5	7	3
32068	2,823	298	1	77	66	122	5	45	307	138	1,712	12	0	0	9	18	13
32073,30	2,678	208	10	90	67	108	5	51	313	128	1,638	9	0	0	20	19	12
32656,60	238	21	0	4	0	9	0	5	16	5	166	6	0	0	1	4	1
<b>CLAY TOTAL</b>	<b>9,625</b>	<b>935</b>	<b>17</b>	<b>309</b>	<b>277</b>	<b>395</b>	<b>16</b>	<b>189</b>	<b>1,201</b>	<b>436</b>	<b>5,646</b>	<b>52</b>	<b>2</b>	<b>0</b>	<b>52</b>	<b>60</b>	<b>38</b>
32009	174	52	0	5	5	7	2	2	62	31	4	0	3	0	0	1	0
32011	917	329	8	11	21	56	5	19	180	167	16	0	95	0	2	4	4
32034	1,565	408	9	10	73	58	3	22	138	114	9	1	688	0	0	20	12
32046	607	199	4	4	14	37	2	7	117	98	7	0	81	0	0	34	3
32097	898	250	4	11	23	62	0	12	74	106	0	0	338	0	0	11	7
<b>NASSAU TOTAL</b>	<b>4,161</b>	<b>1,238</b>	<b>25</b>	<b>41</b>	<b>136</b>	<b>220</b>	<b>12</b>	<b>62</b>	<b>571</b>	<b>516</b>	<b>36</b>	<b>1</b>	<b>1,205</b>	<b>0</b>	<b>2</b>	<b>70</b>	<b>26</b>
32259	1,200	284	15	495	48	97	3	77	69	43	17	32	0	0	2	8	10
32033	298	7	0	6	13	1	0	1	0	12	2	256	0	0	0	0	0
32080	1,102	32	2	29	64	8	3	9	33	17	2	897	1	0	2	0	3
32081	124	23	15	40	6	0	0	10	6	2	0	21	0	0	0	0	1
32082	1,189	140	448	31	311	42	4	61	47	26	6	43	0	0	0	13	17
32084	1,328	78	8	48	50	15	1	12	17	61	9	1,613	1	0	1	6	8
32086	1,744	63	3	27	54	15	1	11	23	25	6	1,506	1	0	3	1	5
32092	1,055	184	20	311	58	35	2	35	30	33	15	322	0	0	0	3	7
32095	414	24	4	36	20	10	0	8	10	16	1	279	0	0	1	2	3
32145	297	10	0	6	4	3	0	0	3	6	1	260	0	0	2	0	2
<b>ST.JOHN'S TOTAL</b>	<b>9,351</b>	<b>845</b>	<b>515</b>	<b>1,029</b>	<b>628</b>	<b>226</b>	<b>14</b>	<b>224</b>	<b>238</b>	<b>241</b>	<b>59</b>	<b>5,229</b>	<b>3</b>	<b>0</b>	<b>11</b>	<b>33</b>	<b>56</b>
32040	468	107	2	7	8	25	2	8	189	57	47	0	2	1	0	12	1
32063	781	211	1	13	4	63	4	10	336	90	36	0	1	1	1	10	0
32087	245	50	0	2	1	16	2	7	104	24	31	2	0	0	1	4	1
<b>BAKER TOTAL</b>	<b>1,494</b>	<b>368</b>	<b>3</b>	<b>22</b>	<b>13</b>	<b>104</b>	<b>8</b>	<b>25</b>	<b>629</b>	<b>171</b>	<b>114</b>	<b>2</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>26</b>	<b>2</b>
<b>OTHER FLORIDA</b>	<b>5,899</b>	<b>486</b>	<b>29</b>	<b>115</b>	<b>1,416</b>	<b>933</b>	<b>11</b>	<b>89</b>	<b>339</b>	<b>489</b>	<b>348</b>	<b>1,395</b>	<b>14</b>	<b>0</b>	<b>96</b>	<b>82</b>	<b>57</b>
<b>GEORGIA</b>	<b>2,977</b>	<b>470</b>	<b>11</b>	<b>25</b>	<b>556</b>	<b>232</b>	<b>49</b>	<b>57</b>	<b>957</b>	<b>416</b>	<b>31</b>	<b>35</b>	<b>71</b>	<b>0</b>	<b>44</b>	<b>14</b>	<b>9</b>
<b>OTHER U.S.</b>	<b>1,607</b>	<b>206</b>	<b>66</b>	<b>65</b>	<b>536</b>	<b>95</b>	<b>2</b>	<b>54</b>	<b>89</b>	<b>126</b>	<b>87</b>	<b>132</b>	<b>26</b>	<b>0</b>	<b>2</b>	<b>92</b>	<b>29</b>
<b>GRAND TOTAL</b>	<b>91,086</b>	<b>15,287</b>	<b>3,758</b>	<b>4,544</b>	<b>5,692</b>	<b>10,412</b>	<b>405</b>	<b>3,888</b>	<b>13,467</b>	<b>14,893</b>	<b>8,278</b>	<b>6,952</b>	<b>1,441</b>	<b>2</b>	<b>280</b>	<b>1,255</b>	<b>532</b>

Report Excludes Normal Newborns

## PATIENT ORIGIN STUDY

JULY - DECEMBER 2009

Percent of Hospitalized Patients from each Zip Code  
And Which Hospital They Went To

ZIP CODE	BAPTIST	BAPTIST	BAPTIST	MAYO	SPECIALTY			ST.	SHANDS	ORANGE	FLAGLER	BAPTIST	ED	KINDRED	RIVER	WEKIVA	
	BAPTIST	BEACHES	SOUTH	CLINIC	MEMORIAL	HOSPITAL	ST. LUKE'S	VINCENT'S	JAX	PARK	HOSPITAL	NASSAU	FRASER	NORTH FL	POINT	SPRINGS	
32202	21.9%	0.5%	0.7%	0.4%	7.0%	0.3%	1.9%	12.2%	52.7%	0.8%	0.1%	0.0%	0.0%	0.0%	1.0%	0.5%	100%
32204	12.6%	0.6%	1.6%	1.5%	3.5%	0.5%	1.2%	53.0%	21.1%	1.8%	0.1%	0.0%	0.0%	0.0%	1.9%	0.6%	100%
32206	19.2%	0.1%	0.7%	0.3%	8.6%	0.3%	1.7%	11.0%	55.0%	1.0%	0.1%	0.0%	0.0%	0.0%	1.5%	0.1%	100%
32209	16.2%	0.1%	0.6%	0.4%	6.4%	0.5%	1.5%	16.8%	55.1%	0.5%	0.0%	0.1%	0.0%	0.1%	1.5%	0.2%	100%
<b>CORE DUVAL</b>	<b>17.1%</b>	<b>0.2%</b>	<b>0.7%</b>	<b>0.5%</b>	<b>6.7%</b>	<b>0.4%</b>	<b>1.6%</b>	<b>18.6%</b>	<b>51.3%</b>	<b>0.8%</b>	<b>0.1%</b>	<b>0.1%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>1.5%</b>	<b>0.3%</b>	<b>100%</b>
32208	21.7%	0.4%	0.7%	0.9%	7.8%	0.7%	1.5%	20.0%	43.0%	0.6%	0.1%	0.1%	0.0%	0.2%	2.2%	0.3%	100%
32218	27.3%	0.8%	1.5%	1.7%	8.8%	0.4%	3.6%	16.4%	35.0%	1.2%	1.8%	0.0%	0.1%	0.9%	0.5%	0.5%	100%
32219	23.1%	0.5%	1.3%	1.3%	9.2%	0.8%	1.2%	25.1%	33.5%	2.0%	0.0%	0.1%	0.0%	0.2%	1.2%	0.5%	100%
32226	26.6%	1.9%	2.1%	5.4%	20.0%	1.0%	4.2%	12.9%	19.9%	2.0%	0.1%	2.5%	0.0%	0.1%	1.0%	0.4%	100%
<b>NORTH DUVAL</b>	<b>24.6%</b>	<b>0.7%</b>	<b>1.2%</b>	<b>1.7%</b>	<b>9.6%</b>	<b>0.6%</b>	<b>2.6%</b>	<b>18.3%</b>	<b>36.4%</b>	<b>1.1%</b>	<b>0.1%</b>	<b>1.0%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>1.4%</b>	<b>0.4%</b>	<b>100%</b>
32205	21.6%	0.3%	1.3%	1.0%	4.8%	0.3%	1.8%	44.3%	19.2%	2.2%	0.1%	0.0%	0.0%	0.4%	1.8%	0.8%	100%
32210	19.1%	0.4%	1.8%	1.5%	3.9%	0.3%	1.5%	41.7%	18.9%	8.9%	0.2%	0.1%	0.0%	0.1%	0.9%	0.6%	100%
32220	26.0%	0.5%	2.4%	0.8%	4.4%	0.5%	3.3%	39.3%	15.2%	5.5%	0.5%	0.1%	0.0%	0.1%	1.3%	0.1%	100%
32221	24.2%	0.6%	2.5%	1.3%	5.2%	0.3%	2.2%	39.1%	16.3%	6.9%	0.1%	0.1%	0.0%	0.1%	0.9%	0.2%	100%
32222,15	19.4%	1.4%	3.6%	1.0%	3.6%	0.2%	3.6%	33.0%	13.6%	17.6%	1.0%	0.0%	0.0%	0.0%	1.0%	1.2%	100%
32234	19.1%	0.5%	0.9%	0.5%	4.4%	0.2%	1.6%	39.4%	15.2%	16.6%	0.0%	0.2%	0.0%	0.5%	0.2%	0.7%	100%
32244,12,14	17.2%	0.5%	3.5%	1.6%	4.8%	0.3%	2.3%	25.5%	17.6%	24.4%	0.1%	0.1%	0.0%	0.5%	1.1%	0.4%	100%
32254	13.4%	0.1%	0.7%	0.7%	7.3%	0.2%	0.8%	30.7%	37.1%	2.1%	0.1%	0.1%	0.0%	0.0%	1.6%	0.0%	100%
<b>WEST DUVAL</b>	<b>19.9%</b>	<b>0.4%</b>	<b>2.2%</b>	<b>1.3%</b>	<b>4.7%</b>	<b>0.3%</b>	<b>1.9%</b>	<b>36.6%</b>	<b>19.6%</b>	<b>10.8%</b>	<b>0.2%</b>	<b>0.1%</b>	<b>0.0%</b>	<b>0.2%</b>	<b>1.2%</b>	<b>0.5%</b>	<b>100%</b>
32207	27.7%	1.0%	2.3%	2.4%	35.7%	0.7%	5.1%	6.0%	14.8%	0.8%	0.3%	0.0%	0.0%	0.1%	2.2%	0.8%	100%
32211	17.1%	2.5%	1.7%	2.7%	43.0%	0.8%	5.1%	5.3%	18.0%	0.8%	0.1%	0.1%	0.0%	0.0%	2.3%	0.6%	100%
32216	15.0%	2.2%	3.3%	3.3%	37.3%	1.0%	16.6%	5.4%	10.9%	0.9%	0.1%	0.0%	0.0%	0.1%	2.8%	1.1%	100%
32217	21.9%	0.9%	11.0%	4.1%	26.5%	0.5%	14.5%	5.2%	12.1%	0.9%	0.3%	0.0%	0.0%	0.0%	1.6%	0.5%	100%
32223	19.5%	0.5%	36.8%	5.2%	11.6%	0.4%	7.4%	8.0%	4.2%	2.9%	0.5%	0.1%	0.0%	0.1%	1.5%	1.4%	100%
32224	12.3%	29.0%	3.0%	21.1%	10.2%	0.4%	10.6%	4.0%	6.2%	0.5%	0.3%	0.1%	0.0%	0.1%	1.4%	0.8%	100%
32225	19.9%	13.7%	3.0%	10.4%	25.1%	0.6%	10.5%	5.0%	8.6%	0.4%	0.1%	0.0%	0.0%	0.1%	1.8%	0.7%	100%
32246	13.9%	11.3%	3.5%	8.8%	28.0%	0.6%	12.5%	4.1%	13.3%	1.0%	0.1%	0.0%	0.0%	0.1%	1.9%	0.8%	100%
32256	15.5%	3.4%	15.4%	10.0%	13.4%	0.7%	24.3%	5.0%	7.6%	1.3%	0.3%	0.1%	0.0%	0.0%	2.2%	0.9%	100%
32257	13.6%	1.1%	34.2%	4.2%	15.2%	1.0%	9.1%	4.8%	8.2%	1.8%	0.1%	0.1%	0.0%	0.2%	1.1%	0.6%	100%
32258	16.7%	2.0%	50.7%	3.9%	6.5%	0.4%	6.6%	3.9%	4.5%	1.9%	1.1%	0.0%	0.0%	0.1%	1.0%	0.8%	100%
32277	17.8%	1.6%	2.0%	4.2%	39.7%	0.4%	8.2%	6.9%	16.4%	0.7%	0.1%	0.0%	0.0%	0.2%	1.3%	0.5%	100%
<b>SOUTH DUVAL</b>	<b>18.1%</b>	<b>5.8%</b>	<b>10.8%</b>	<b>6.5%</b>	<b>26.7%</b>	<b>0.7%</b>	<b>10.9%</b>	<b>5.3%</b>	<b>11.1%</b>	<b>1.0%</b>	<b>0.2%</b>	<b>0.1%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>1.9%</b>	<b>0.8%</b>	<b>100%</b>
32227,28	19.7%	15.5%	1.4%	1.4%	22.5%	0.0%	2.8%	4.2%	14.1%	2.8%	1.4%	0.0%	0.0%	0.0%	12.7%	1.4%	100%
32233	14.7%	53.2%	1.0%	9.5%	5.9%	0.6%	2.9%	2.4%	7.1%	0.6%	0.2%	0.2%	0.0%	0.0%	1.1%	0.5%	100%
32250	14.1%	50.4%	1.2%	10.2%	6.7%	0.8%	4.5%	2.2%	6.0%	0.6%	0.8%	0.1%	0.0%	0.1%	1.8%	0.6%	100%
32286	16.5%	52.8%	1.2%	8.3%	7.7%	0.6%	3.5%	3.2%	3.5%	0.0%	0.3%	0.0%	0.0%	0.0%	1.8%	0.6%	100%
<b>BEACHES</b>	<b>14.7%</b>	<b>50.9%</b>	<b>1.1%</b>	<b>9.5%</b>	<b>6.8%</b>	<b>0.7%</b>	<b>3.7%</b>	<b>2.4%</b>	<b>6.3%</b>	<b>0.6%</b>	<b>0.5%</b>	<b>0.1%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>1.8%</b>	<b>0.6%</b>	<b>100%</b>
<b>DUVAL TOTAL</b>	<b>19.2%</b>	<b>5.5%</b>	<b>5.2%</b>	<b>3.8%</b>	<b>14.7%</b>	<b>0.5%</b>	<b>5.7%</b>	<b>16.9%</b>	<b>22.3%</b>	<b>3.5%</b>	<b>0.2%</b>	<b>0.2%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>1.6%</b>	<b>0.6%</b>	<b>100%</b>

## PATIENT ORIGIN STUDY

JULY - DECEMBER 2009

Percent of Hospitalized Patients from each Zip Code  
And Which Hospital They Went To

ZIP CODE	BAPTIST BAPTIST	BAPTIST BEACHES	BAPTIST SOUTH	MAYO CLINIC	SPECIALTY MEMORIAL	SPECIALTY HOSPITAL	ST. LUKE'S	ST. VINCENT'S	SHANDS JAX	ORANGE PARK	FLAGLER HOSPITAL	BAPTIST NASSAU	ED FRASER	KINDRED NORTH FL	RIVER POINT	WEKIVA SPRINGS	
32003	11.7%	0.1%	4.5%	5.8%	3.2%	0.0%	2.6%	18.4%	4.2%	47.6%	0.6%	0.0%	0.0%	0.2%	0.7%	0.4%	100%
32043	7.9%	0.2%	3.8%	2.9%	3.8%	0.1%	1.8%	11.8%	4.3%	61.0%	0.9%	0.1%	0.0%	1.0%	0.3%	0.3%	100%
32065	12.5%	0.1%	2.6%	3.1%	4.8%	0.3%	2.6%	14.8%	4.5%	53.1%	0.4%	0.1%	0.0%	0.4%	0.5%	0.2%	100%
32068	10.6%	0.0%	2.7%	2.3%	4.3%	0.2%	1.6%	10.9%	4.3%	60.6%	0.4%	0.0%	0.0%	0.3%	0.6%	0.5%	100%
32073,30	7.8%	0.4%	3.4%	2.5%	4.0%	0.2%	1.9%	11.7%	4.3%	61.2%	0.3%	0.0%	0.0%	0.7%	0.7%	0.4%	100%
32656,60	8.8%	0.0%	1.7%	0.0%	3.8%	0.0%	2.1%	6.7%	2.1%	69.7%	2.5%	0.0%	0.0%	0.4%	1.7%	0.4%	100%
<b>CLAY TOTAL</b>	<b>9.7%</b>	<b>0.2%</b>	<b>3.2%</b>	<b>2.9%</b>	<b>4.1%</b>	<b>0.2%</b>	<b>2.0%</b>	<b>12.5%</b>	<b>4.5%</b>	<b>58.7%</b>	<b>0.5%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.5%</b>	<b>0.6%</b>	<b>0.4%</b>	<b>100%</b>
32009	29.9%	0.0%	2.9%	2.9%	4.0%	1.1%	1.1%	35.6%	17.8%	2.3%	0.0%	1.7%	0.0%	0.0%	0.6%	0.0%	100%
32011	35.9%	0.9%	1.2%	2.3%	6.1%	0.5%	2.1%	19.6%	18.2%	1.7%	0.0%	10.4%	0.0%	0.2%	0.4%	0.4%	100%
32034	26.1%	0.6%	0.6%	4.7%	3.7%	0.2%	1.4%	8.8%	7.3%	0.6%	0.1%	44.0%	0.0%	0.0%	1.3%	0.8%	100%
32046	32.8%	0.7%	0.7%	2.3%	6.1%	0.3%	1.2%	19.3%	16.1%	1.2%	0.0%	13.3%	0.0%	0.0%	5.6%	0.5%	100%
32097	27.8%	0.4%	1.2%	2.6%	6.9%	0.0%	1.3%	8.2%	11.8%	0.0%	0.0%	37.6%	0.0%	0.0%	1.2%	0.8%	100%
<b>NASSAU TOTAL</b>	<b>29.8%</b>	<b>0.6%</b>	<b>1.0%</b>	<b>3.3%</b>	<b>5.3%</b>	<b>0.3%</b>	<b>1.5%</b>	<b>13.7%</b>	<b>12.4%</b>	<b>0.9%</b>	<b>0.0%</b>	<b>29.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>1.7%</b>	<b>0.6%</b>	<b>100%</b>
32259	23.7%	1.3%	41.3%	4.0%	8.1%	0.3%	6.4%	5.8%	3.6%	1.4%	2.7%	0.0%	0.0%	0.2%	0.7%	0.8%	100%
32033	2.3%	0.0%	2.0%	4.4%	0.3%	0.0%	0.3%	0.0%	4.0%	0.7%	85.9%	0.0%	0.0%	0.0%	0.0%	0.0%	100%
32080	2.9%	0.2%	2.6%	5.8%	0.7%	0.3%	0.8%	3.0%	1.5%	0.2%	81.4%	0.1%	0.0%	0.2%	0.0%	0.3%	100%
32081	18.5%	12.1%	32.3%	4.8%	0.0%	0.0%	8.1%	4.8%	1.6%	0.0%	16.9%	0.0%	0.0%	0.0%	0.0%	0.8%	100%
32082	11.8%	37.7%	2.6%	26.2%	3.5%	0.3%	5.1%	4.0%	2.2%	0.5%	3.6%	0.0%	0.0%	0.0%	1.1%	1.4%	100%
32084	4.0%	0.4%	2.5%	2.6%	0.8%	0.1%	0.6%	0.9%	3.2%	0.5%	83.7%	0.1%	0.0%	0.1%	0.3%	0.4%	100%
32086	3.6%	0.2%	1.5%	3.1%	0.9%	0.1%	0.6%	1.3%	1.4%	0.3%	86.4%	0.1%	0.0%	0.2%	0.1%	0.3%	100%
32092	17.4%	1.9%	29.5%	5.5%	3.3%	0.2%	3.3%	2.8%	3.1%	1.4%	30.5%	0.0%	0.0%	0.0%	0.3%	0.7%	100%
32095	5.8%	1.0%	8.7%	4.8%	2.4%	0.0%	1.9%	2.4%	3.9%	0.2%	67.4%	0.0%	0.0%	0.2%	0.5%	0.7%	100%
32145	3.4%	0.0%	2.0%	1.3%	1.0%	0.0%	0.0%	1.0%	2.0%	0.3%	87.5%	0.0%	0.0%	0.7%	0.0%	0.7%	100%
<b>ST.JOHN'S TOTAL</b>	<b>9.0%</b>	<b>5.5%</b>	<b>11.0%</b>	<b>6.7%</b>	<b>2.4%</b>	<b>0.1%</b>	<b>2.4%</b>	<b>2.5%</b>	<b>2.6%</b>	<b>0.6%</b>	<b>55.9%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>0.4%</b>	<b>0.6%</b>	<b>100%</b>
32040	22.9%	0.4%	1.5%	1.7%	5.3%	0.4%	1.7%	40.4%	12.2%	10.0%	0.0%	0.4%	0.2%	0.0%	2.5%	0.2%	100%
32063	27.0%	0.1%	1.7%	0.5%	8.1%	0.5%	1.3%	43.0%	11.5%	4.6%	0.0%	0.1%	0.1%	0.1%	1.3%	0.0%	100%
32087	20.4%	0.0%	0.8%	0.4%	6.5%	0.8%	2.9%	42.4%	9.6%	12.7%	0.8%	0.0%	0.0%	0.4%	1.5%	0.4%	100%
<b>BAKER TOTAL</b>	<b>24.6%</b>	<b>0.2%</b>	<b>1.5%</b>	<b>0.9%</b>	<b>7.0%</b>	<b>0.5%</b>	<b>1.7%</b>	<b>42.1%</b>	<b>11.4%</b>	<b>7.6%</b>	<b>0.1%</b>	<b>0.2%</b>	<b>0.1%</b>	<b>0.1%</b>	<b>1.7%</b>	<b>0.1%</b>	<b>100%</b>
<b>OTHER FLORIDA</b>	<b>8.2%</b>	<b>0.5%</b>	<b>1.9%</b>	<b>24.0%</b>	<b>15.8%</b>	<b>0.2%</b>	<b>1.5%</b>	<b>5.7%</b>	<b>8.3%</b>	<b>5.9%</b>	<b>23.6%</b>	<b>0.2%</b>	<b>0.0%</b>	<b>1.6%</b>	<b>1.4%</b>	<b>1.0%</b>	<b>100%</b>
<b>GEORGIA</b>	<b>15.8%</b>	<b>0.4%</b>	<b>0.8%</b>	<b>18.7%</b>	<b>7.8%</b>	<b>1.6%</b>	<b>1.9%</b>	<b>32.1%</b>	<b>14.0%</b>	<b>1.0%</b>	<b>1.2%</b>	<b>2.4%</b>	<b>0.0%</b>	<b>1.5%</b>	<b>0.5%</b>	<b>0.3%</b>	<b>100%</b>
<b>OTHER U.S.</b>	<b>12.8%</b>	<b>4.1%</b>	<b>4.0%</b>	<b>33.4%</b>	<b>5.9%</b>	<b>0.1%</b>	<b>3.4%</b>	<b>5.5%</b>	<b>7.8%</b>	<b>5.4%</b>	<b>8.2%</b>	<b>1.6%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>5.7%</b>	<b>1.8%</b>	<b>100%</b>
<b>GRAND TOTAL</b>	<b>16.8%</b>	<b>4.1%</b>	<b>5.0%</b>	<b>6.2%</b>	<b>11.4%</b>	<b>0.4%</b>	<b>4.3%</b>	<b>14.8%</b>	<b>16.4%</b>	<b>9.1%</b>	<b>7.6%</b>	<b>1.6%</b>	<b>0.0%</b>	<b>0.3%</b>	<b>1.4%</b>	<b>0.6%</b>	<b>100%</b>

## PATIENT ORIGIN STUDY

JULY - DECEMBER 2009

Percent of Hospitalized Patients  
(WHERE EACH HOSPITAL'S PATIENT COME FROM)

ZIP CODE	BAPTIST	BAPTIST	MAYO	SPECIALTY			ST.		SHANDS	ORANGE	FLAGLER	BAPTIST	ED	KINDRED	RIVER	WEKIVA
	BAPTIST	BEACHES	SOUTH	CLINIC	MEMORIAL	HOSPITAL	ST. LUKE'S	VINCENT'S	JAX	PARK	HOSPITAL	NASSAU	FRASER	NORTH FL	POINT	SPRINGS
32202	1.0%	0.1%	0.1%	0.1%	0.5%	0.5%	0.4%	0.7%	2.6%	0.1%	0.0%	0.0%	0.0%	0.0%	0.6%	0.8%
32204	0.7%	0.1%	0.3%	0.2%	0.3%	1.0%	0.3%	3.3%	1.2%	0.2%	0.0%	0.0%	0.0%	0.0%	1.3%	0.9%
32206	2.6%	0.1%	0.3%	0.1%	1.7%	1.5%	0.9%	1.7%	7.7%	0.3%	0.0%	0.1%	0.0%	0.0%	2.5%	0.6%
32209	4.5%	0.1%	0.6%	0.3%	2.6%	4.9%	1.6%	5.3%	15.9%	0.3%	0.0%	0.2%	0.0%	1.8%	5.2%	1.7%
<b>CORE DUVAL</b>	<b>8.9%</b>	<b>0.5%</b>	<b>1.3%</b>	<b>0.7%</b>	<b>5.1%</b>	<b>7.9%</b>	<b>3.2%</b>	<b>11.0%</b>	<b>27.3%</b>	<b>0.8%</b>	<b>0.1%</b>	<b>0.3%</b>	<b>0.0%</b>	<b>1.8%</b>	<b>9.6%</b>	<b>3.9%</b>
32208	4.4%	0.3%	0.5%	0.5%	2.3%	5.4%	1.2%	4.6%	9.0%	0.2%	0.0%	0.2%	0.0%	2.1%	5.3%	1.5%
32218	5.8%	0.7%	1.1%	0.9%	2.8%	3.0%	3.0%	4.0%	7.7%	0.5%	0.0%	4.2%	0.0%	0.7%	2.4%	2.8%
32219	1.3%	0.1%	0.2%	0.2%	0.7%	1.7%	0.3%	1.6%	1.9%	0.2%	0.0%	0.1%	0.0%	0.7%	0.8%	0.8%
32226	1.4%	0.4%	0.4%	0.8%	1.6%	2.0%	0.9%	0.8%	1.1%	0.2%	0.0%	1.4%	0.0%	0.4%	0.6%	0.6%
<b>NORTH DUVAL</b>	<b>12.9%</b>	<b>1.5%</b>	<b>2.1%</b>	<b>2.4%</b>	<b>7.4%</b>	<b>12.1%</b>	<b>5.3%</b>	<b>10.9%</b>	<b>19.6%</b>	<b>1.1%</b>	<b>0.1%</b>	<b>5.8%</b>	<b>0.0%</b>	<b>3.9%</b>	<b>9.2%</b>	<b>5.6%</b>
32205	3.1%	0.2%	0.6%	0.4%	1.0%	1.7%	1.1%	7.3%	2.9%	0.6%	0.0%	0.0%	0.0%	3.2%	3.1%	3.4%
32210	5.3%	0.4%	1.7%	1.1%	1.6%	3.5%	1.7%	13.0%	5.3%	4.5%	0.1%	0.2%	0.0%	1.1%	3.1%	4.9%
32220	1.4%	0.1%	0.4%	0.1%	0.4%	1.0%	0.7%	2.4%	0.9%	0.6%	0.1%	0.1%	0.0%	0.4%	0.9%	0.2%
32221	2.4%	0.2%	0.8%	0.4%	0.7%	1.0%	0.8%	4.4%	1.7%	1.3%	0.0%	0.1%	0.0%	0.7%	1.0%	0.6%
32222,15	0.6%	0.2%	0.4%	0.1%	0.2%	0.2%	0.5%	1.2%	0.5%	1.1%	0.1%	0.0%	0.0%	0.0%	0.4%	1.1%
32234	0.5%	0.1%	0.1%	0.0%	0.2%	0.2%	0.2%	1.3%	0.4%	0.9%	0.0%	0.1%	0.0%	0.7%	0.1%	0.6%
32244,12,14	3.6%	0.4%	2.5%	0.9%	1.5%	2.2%	1.9%	6.1%	3.8%	9.5%	0.1%	0.2%	0.0%	6.1%	2.9%	2.4%
32254	1.6%	0.1%	0.2%	0.2%	1.0%	0.7%	0.3%	3.1%	3.4%	0.4%	0.0%	0.1%	0.0%	0.0%	1.8%	0.0%
<b>WEST DUVAL</b>	<b>18.6%</b>	<b>1.6%</b>	<b>6.8%</b>	<b>3.2%</b>	<b>6.5%</b>	<b>10.6%</b>	<b>7.1%</b>	<b>38.9%</b>	<b>18.8%</b>	<b>18.7%</b>	<b>0.4%</b>	<b>0.8%</b>	<b>0.0%</b>	<b>12.1%</b>	<b>13.2%</b>	<b>13.2%</b>
32207	4.5%	0.6%	1.3%	1.1%	8.5%	4.2%	3.3%	1.1%	2.5%	0.3%	0.1%	0.0%	0.0%	0.7%	4.5%	3.9%
32211	2.7%	1.6%	0.9%	1.1%	10.0%	4.7%	3.2%	0.9%	2.9%	0.2%	0.0%	0.1%	0.0%	0.4%	4.5%	2.6%
32216	2.4%	1.4%	1.8%	1.4%	8.8%	5.9%	10.5%	1.0%	1.8%	0.3%	0.0%	0.2%	0.0%	1.1%	5.4%	5.1%
32217	1.8%	0.3%	3.1%	0.9%	3.3%	1.7%	4.8%	0.5%	1.0%	0.1%	0.1%	0.0%	0.0%	0.0%	1.6%	1.1%
32223	1.4%	0.2%	8.9%	1.0%	1.2%	1.0%	2.1%	0.7%	0.3%	0.4%	0.1%	0.1%	0.0%	0.4%	1.4%	2.8%
32224	1.2%	11.1%	0.9%	5.3%	1.4%	1.5%	3.9%	0.4%	0.6%	0.1%	0.1%	0.1%	0.0%	0.4%	1.6%	2.1%
32225	3.3%	9.2%	1.7%	4.7%	6.1%	3.7%	6.8%	0.9%	1.5%	0.1%	0.0%	0.1%	0.0%	1.1%	3.6%	3.2%
32246	2.1%	7.0%	1.8%	3.6%	6.3%	3.2%	7.5%	0.7%	2.1%	0.3%	0.0%	0.1%	0.0%	0.7%	3.6%	3.6%
32256	1.8%	1.6%	6.1%	3.2%	2.3%	3.0%	11.3%	0.7%	0.9%	0.3%	0.1%	0.1%	0.0%	0.0%	3.2%	3.2%
32257	2.4%	0.6%	14.9%	1.5%	2.9%	4.7%	4.6%	0.7%	1.1%	0.4%	0.0%	0.1%	0.0%	1.1%	1.7%	2.3%
32258	1.1%	0.6%	11.6%	0.7%	0.6%	1.0%	1.7%	0.3%	0.3%	0.2%	0.2%	0.0%	0.0%	0.4%	0.8%	1.5%
32277	1.9%	0.7%	0.7%	1.2%	6.3%	1.7%	3.5%	0.8%	1.8%	0.1%	0.0%	0.0%	0.0%	1.1%	1.8%	1.5%
<b>SOUTH DUVAL</b>	<b>26.7%</b>	<b>34.9%</b>	<b>53.6%</b>	<b>25.7%</b>	<b>57.7%</b>	<b>36.3%</b>	<b>63.2%</b>	<b>8.8%</b>	<b>16.8%</b>	<b>2.8%</b>	<b>0.7%</b>	<b>0.8%</b>	<b>0.0%</b>	<b>7.1%</b>	<b>33.5%</b>	<b>32.9%</b>
32227,28	0.1%	0.3%	0.0%	0.0%	0.2%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.7%	0.2%
32233	1.2%	17.7%	0.3%	2.1%	0.7%	2.0%	0.9%	0.2%	0.6%	0.1%	0.0%	0.2%	0.0%	0.0%	1.1%	1.1%
32250	1.4%	21.0%	0.4%	2.8%	1.0%	3.0%	1.8%	0.3%	0.6%	0.1%	0.2%	0.1%	0.0%	0.4%	2.2%	1.9%
32266	0.4%	4.8%	0.1%	0.5%	0.2%	0.5%	0.3%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.5%	0.4%
<b>BEACHES</b>	<b>3.1%</b>	<b>43.8%</b>	<b>0.8%</b>	<b>5.4%</b>	<b>2.1%</b>	<b>5.4%</b>	<b>3.1%</b>	<b>0.6%</b>	<b>1.4%</b>	<b>0.2%</b>	<b>0.2%</b>	<b>0.3%</b>	<b>0.0%</b>	<b>0.4%</b>	<b>4.5%</b>	<b>3.6%</b>
<b>DUVAL TOTAL</b>	<b>70.2%</b>	<b>82.3%</b>	<b>64.7%</b>	<b>37.4%</b>	<b>78.8%</b>	<b>72.3%</b>	<b>82.0%</b>	<b>70.1%</b>	<b>83.9%</b>	<b>23.6%</b>	<b>1.5%</b>	<b>8.1%</b>	<b>0.0%</b>	<b>25.4%</b>	<b>70.0%</b>	<b>59.2%</b>



Emergency Room Utilization



**EMERGENCY DEPARTMENT UTILIZATION SUMMARY REPORT FOR HOSPITALS IN THE  
GREATER JACKSONVILLE AREA - CY 2008**

ZIPCODE	TYPE OF VISIT	Total Of PATIENTS	BAPTIST MEDICAL CENTER	BAPTIST MEDICAL CENTER - BEACHES	BAPTIST MEDICAL CENTER - NASSAU	BAPTIST MEDICAL CENTER SOUTH	ED FRASER MEMORIAL HOSPITAL	FLAGLER HOSPITAL	MAYO CLINIC	MEMORIAL HOSPITAL JACKSONVILLE	ORANGE PARK MEDICAL CENTER	SANT VINCENT'S MEDICAL CENTER	SHANDS JACKSONVILLE MEDICAL CENTER	ST LUKE'S HOSPITAL
32040	OutPt	4,359	492	5	5	26	3,362	2	11	44	78	241	85	8
32040	Inpt	429	77		1		2		6	24	29	229	58	3
32063	OutPt	7,576	676	4	5	46	5,986	11	16	66	174	361	215	16
32063	Inpt	796	213	1	13		1	1	1	37	53	354	117	5
32087	OutPt	2,371	252		4	12	1,856	3	4	23	40	86	86	5
32087	Inpt	220	66		2			1	3	15	12	84	33	4
<b>Baker Total</b>	<b>OutPt.</b>	<b>14,306</b>	<b>1,420</b>	<b>9</b>	<b>14</b>	<b>84</b>	<b>11,204</b>	<b>16</b>	<b>31</b>	<b>133</b>	<b>292</b>	<b>688</b>	<b>386</b>	<b>29</b>
<b>Baker Total</b>	<b>InPt.</b>	<b>1,445</b>	<b>356</b>	<b>1</b>	<b>0</b>	<b>16</b>	<b>3</b>	<b>2</b>	<b>10</b>	<b>76</b>	<b>94</b>	<b>667</b>	<b>208</b>	<b>12</b>
<b>Baker</b>	<b>Total ED Visits</b>	<b>15,751</b>	<b>1,776</b>	<b>10</b>	<b>14</b>	<b>100</b>	<b>11,207</b>	<b>18</b>	<b>41</b>	<b>209</b>	<b>386</b>	<b>1,355</b>	<b>594</b>	<b>41</b>
	<b>% OutPt.</b>	<b>90.8%</b>	<b>80.0%</b>	<b>90.0%</b>	<b>100.0%</b>	<b>84.0%</b>	<b>100.0%</b>	<b>88.9%</b>	<b>75.6%</b>	<b>63.6%</b>	<b>75.6%</b>	<b>50.8%</b>	<b>65.0%</b>	<b>70.7%</b>
	<b>% InPt.</b>	<b>9.2%</b>	<b>20.0%</b>	<b>10.0%</b>	<b>0.0%</b>	<b>16.0%</b>	<b>0.0%</b>	<b>11.1%</b>	<b>24.4%</b>	<b>36.4%</b>	<b>24.4%</b>	<b>49.2%</b>	<b>35.0%</b>	<b>29.3%</b>
32003	OutPt	3,368	466	15	4	217	3	24	109	27	2,212	207	59	25
32003	Inpt	939	89	3		48		2	45	22	576	116	30	8
32043	OutPt	6,825	571	14	12	327	13	115	75	78	5,244	213	145	18
32043	Inpt	1,763	102	1		51		22	36	32	1,250	195	68	6
32065	OutPt	7,631	1,035	25	7	355	8	15	106	141	5,327	333	216	63
32065	Inpt	1,466	164	2		51		1	35	46	924	149	76	18
32068	OutPt	14,683	1,483	47	13	442	113	64	141	182	11,191	598	341	68
32068	Inpt	2,844	246	2		67		2	45	84	1,992	257	128	21
32073	OutPt	12,965	1,211	41	6	445	17	31	147	177	9,890	559	362	79
32073	Inpt	3,211	216	1		107		5	75	73	2,257	313	140	24
32656	OutPt	888	85	12	6	16	8	29	9	21	631	32	36	3
32656	Inpt	247	20	2		3		8	4	10	161	28	10	1
<b>Clay Total</b>	<b>OutPt.</b>	<b>46,360</b>	<b>4,851</b>	<b>154</b>	<b>48</b>	<b>1,802</b>	<b>162</b>	<b>278</b>	<b>587</b>	<b>626</b>	<b>34,495</b>	<b>1,942</b>	<b>1,159</b>	<b>256</b>
<b>Clay Total</b>	<b>InPt.</b>	<b>10,470</b>	<b>837</b>	<b>11</b>	<b>0</b>	<b>327</b>	<b>0</b>	<b>40</b>	<b>240</b>	<b>267</b>	<b>7,160</b>	<b>1,058</b>	<b>452</b>	<b>78</b>
<b>Clay</b>	<b>Total ED Visits</b>	<b>56,830</b>	<b>5,688</b>	<b>165</b>	<b>48</b>	<b>2,129</b>	<b>162</b>	<b>318</b>	<b>827</b>	<b>893</b>	<b>41,655</b>	<b>3,000</b>	<b>1,611</b>	<b>334</b>
	<b>% OutPt.</b>	<b>81.6%</b>	<b>85.3%</b>	<b>93.3%</b>	<b>100.0%</b>	<b>84.6%</b>	<b>100.0%</b>	<b>87.4%</b>	<b>71.0%</b>	<b>70.1%</b>	<b>82.8%</b>	<b>64.7%</b>	<b>71.9%</b>	<b>76.6%</b>
	<b>% InPt.</b>	<b>18.4%</b>	<b>14.7%</b>	<b>6.7%</b>	<b>0.0%</b>	<b>15.4%</b>	<b>0.0%</b>	<b>12.6%</b>	<b>29.0%</b>	<b>29.9%</b>	<b>17.2%</b>	<b>35.3%</b>	<b>28.1%</b>	<b>23.4%</b>

**EMERGENCY DEPARTMENT UTILIZATION SUMMARY REPORT FOR HOSPITALS IN THE  
GREATER JACKSONVILLE AREA - CY 2008**

ZIPCODE	TYPE OF VISIT	Total Of PATIENTS	BAPTIST MEDICAL CENTER	BAPTIST MEDICAL CENTER - BEACHES	BAPTIST MEDICAL CENTER - NASSAU	BAPTIST MEDICAL CENTER SOUTH	ED FRASER MEMORIAL HOSPITAL	FLAGLER HOSPITAL	MAYO CLINIC	MEMORIAL HOSPITAL JACKSONVILLE	ORANGE PARK MEDICAL CENTER	SAINT VINCENT'S MEDICAL CENTER	SHANDS JACKSONVILLE MEDICAL CENTER	ST LUKE'S HOSPITAL
32202	OutPt	3,779	1,009	40	4	32	4	4	47	328	35	385	1,851	40
32202	Inpt	995	198	8		4		5	6	74	5	158	525	12
32204	OutPt	4,353	900	29	14	47	13	8	35	262	60	1,784	1,160	41
32204	Inpt	1,228	154	4	1	14		1	18	67	8	656	298	7
32205	OutPt	12,861	3,685	60	17	178	68	29	133	640	490	5,075	2,343	143
32205	Inpt	2,737	532	5		16		1	41	104	85	1,383	552	18
32206	OutPt	14,352	4,040	58	15	67	10	28	82	1,664	78	1,190	6,993	127
32206	Inpt	3,027	657	3		3			24	251	14	357	1,686	32
32207	OutPt	13,441	4,069	142	11	303	12	52	392	5,676	98	476	1,668	542
32207	Inpt	3,058	976	24	1	65		5	116	1,202	20	137	415	97
32208	OutPt	18,076	6,141	83	46	164	9	21	172	1,689	125	2,263	7,173	190
32208	Inpt	4,480	1,103	5	2	12		4	66	341	15	839	2,047	46
32209	OutPt	28,599	7,097	53	29	121	15	16	167	2,432	129	3,355	14,981	204
32209	Inpt	5,998	1,064	2	1	21		2	54	352	11	1,117	3,333	41
32210	OutPt	25,261	7,463	101	48	507	187	53	255	987	4,181	7,617	3,637	225
32210	Inpt	4,942	960	1	3	31		5	59	147	399	2,329	992	16
32211	OutPt	14,700	3,032	341	43	200	10	21	393	7,537	118	460	1,974	571
32211	Inpt	2,915	529	43	1	34		6	120	1,428	16	130	525	83
32216	OutPt	12,743	2,075	270	16	334	10	29	894	6,076	74	280	1,096	1,589
32216	Inpt	3,028	417	45		43		5	280	1,404	15	100	308	411
32217	OutPt	6,073	1,343	97	11	674	5	9	410	2,279	63	155	546	481
32217	Inpt	1,524	334	9		102		1	157	516	16	67	179	143
32218	OutPt	18,127	7,528	187	676	213	27	23	289	1,839	190	1,715	5,138	302
32218	Inpt	3,967	1,161	20	24	21		1	81	378	24	652	1,534	71
32219	OutPt	4,781	1,793	23	45	70	44	4	43	373	97	830	1,408	51
32219	Inpt	1,078	258	2	4	16		1	12	86	16	300	371	12
32220	OutPt	4,797	1,790	24	10	88	245	10	37	197	295	1,317	732	52
32220	Inpt	1,051	246	2		3			9	32	36	454	262	7
32221	OutPt	7,973	3,025	37	20	189	159	7	85	384	895	2,022	1,063	87
32221	Inpt	1,703	406	3		30		3	23	80	120	698	321	19

**EMERGENCY DEPARTMENT UTILIZATION SUMMARY REPORT FOR HOSPITALS IN THE  
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ZIPCODE	TYPE OF VISIT	Total Of PATIENTS	BAPTIST MEDICAL CENTER	BAPTIST MEDICAL CENTER - BEACHES	BAPTIST MEDICAL CENTER - NASSAU	BAPTIST MEDICAL CENTER SOUTH	ED FRASER MEMORIAL HOSPITAL	FLAGLER HOSPITAL	MAYO CLINIC	MEMORIAL HOSPITAL JACKSONVILLE	ORANGE PARK MEDICAL CENTER	SAINT VINCENT'S MEDICAL CENTER	SHANDS JACKSONVILLE MEDICAL CENTER	ST LUKE'S HOSPITAL
32222	OutPt	2,827	653	18	8	109	32	4	29	93	1,002	516	335	28
32222	Inpt	562	99	4		7		2	8	23	130	191	93	5
32223	OutPt	4,551	561	74	3	2,753	4	23	253	248	118	103	213	198
32223	Inpt	1,160	172	9		562		5	116	109	24	43	62	58
32224	OutPt	7,288	807	3,011	11	195	18	23	1,676	634	44	82	276	511
32224	Inpt	1,466	158	468	1	20		5	467	151	6	12	108	70
32225	OutPt	11,961	2,266	3,256	14	312	8	26	1,111	2,986	80	249	867	786
32225	Inpt	2,633	461	399		38		5	361	840	15	91	253	170
32226	OutPt	3,625	1,321	152	287	90	11	9	120	540	19	209	722	145
32226	Inpt	929	268	17	22	12		2	43	163	8	88	284	22
32227	OutPt	491	61	298	4	13		2	18	44	4	4	32	11
32227	Inpt	48	10	5		2		2		10		3	16	
32233	OutPt	8,059	395	6,202	12	43	3	20	464	374	15	45	373	113
32233	Inpt	1,410	102	893		11		2	143	87	1	8	143	20
32234	OutPt	2,825	604	6	7	29	1,019	4	6	50	436	411	241	12
32234	Inpt	548	87	2	1	2			3	14	93	243	100	3
32244	OutPt	20,693	4,787	117	23	815	69	57	211	742	7,772	3,589	2,282	229
32244	Inpt	3,775	683	11	2	91		1	42	134	1,021	1,117	639	34
32246	OutPt	13,256	2,006	2,390	18	390	7	21	1,192	4,415	111	247	1,028	1,431
32246	Inpt	2,332	331	284		42		8	269	806	12	73	306	201
32250	OutPt	7,323	407	5,251	13	86	10	16	693	294	36	90	318	109
32250	Inpt	1,671	140	1,064		11		6	204	91	6	15	106	28
32254	OutPt	9,726	2,828	34	14	72	52	9	57	578	194	2,958	2,866	64
32254	Inpt	1,865	325	2		9		3	16	77	30	742	654	7
32256	OutPt	8,128	1,131	273	24	1,822	1	31	1,320	1,093	114	147	436	1,736
32256	Inpt	1,710	234	37	1	266		5	379	267	19	55	119	328
32257	OutPt	9,216	1,541	88	11	3,996	10	43	536	1,255	217	169	552	798
32257	Inpt	2,179	352	5		824		9	171	294	44	101	185	194
32258	OutPt	4,603	508	48	2	3,300	4	38	161	162	71	45	156	108
32258	Inpt	932	109	12		538		3	64	64	14	30	52	46

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32266	OutPt	1,473	92	1,052	1	16	1	4	148	49	9	13	48	40
32266	Inpt	345	28	199		1			54	23	4	4	24	8
32277	OutPt	9,225	2,314	288	8	166	2	10	311	4,267	68	269	1,194	328
32277	Inpt	1,840	353	23	1	19		2	96	887	13	75	294	77
MASKED	OutPt	452	77	283		5	1	1	6	21	4	22	25	7
Duval Total	OutPt.	315,638	77,349	24,386	1,465	17,399	2,070	655	11,746	50,208	17,242	38,092	63,727	11,299
Duval Total	InPt.	67,136	12,907	3,610	65	2,870	0	100	3,502	10,502	2,240	12,268	16,786	2,286
Duval	Total ED Visits	382,774	90,256	27,996	1,530	20,269	2,070	755	15,248	60,710	19,482	50,360	80,513	13,585
	% OutPt.	82.5%	85.7%	87.1%	95.8%	85.8%	100.0%	86.8%	77.0%	82.7%	88.5%	75.6%	79.2%	83.2%
	% InPt.	17.5%	14.3%	12.9%	4.2%	14.2%	0.0%	13.2%	23.0%	17.3%	11.5%	24.4%	20.8%	16.8%
32009	OutPt	835	279	1	56	6	259	1	3	18	38	129	41	4
32009	Inpt	210	56		4	1			2	9	6	86	45	1
32011	OutPt	4,578	1,437	32	1,763	34	63	6	68	165	90	352	542	26
32011	Inpt	1,022	374	6	93	7			14	49	5	195	269	10
32034	OutPt	9,087	385	16	8,158	21	22	2	78	54	16	64	251	20
32034	Inpt	1,381	287	1	819	3		1	39	30	3	66	129	3
32046	OutPt	2,531	619	8	1,208	16	115	4	25	47	48	161	277	3
32046	Inpt	660	242		71	1			8	20	8	152	156	2
32097	OutPt	5,279	491	6	4,274	15	2	5	31	88	19	68	271	9
32097	Inpt	804	203	2	352			1	11	31	5	37	156	6
Nassau Total	OutPt.	22,310	3,211	63	15,459	92	461	18	205	372	211	774	1,382	62
Nassau Total	InPt.	4,077	1,162	9	1,339	12	0	2	74	139	27	536	755	22
Nassau	Total ED Visits	26,387	4,373	72	16,798	104	461	20	279	511	238	1,310	2,137	84
	% OutPt.	84.5%	73.4%	87.5%	92.0%	88.5%	100.0%	90.0%	73.5%	72.8%	88.7%	59.1%	64.7%	73.8%
	% InPt.	15.5%	26.6%	12.5%	8.0%	11.5%	0.0%	10.0%	26.5%	27.2%	11.3%	40.9%	35.3%	26.2%

**EMERGENCY DEPARTMENT UTILIZATION SUMMARY REPORT FOR HOSPITALS IN THE  
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ZIPCODE	TYPE OF VISIT	Total Of PATIENTS	BAPTIST MEDICAL CENTER	BAPTIST MEDICAL CENTER - BEACHES	BAPTIST MEDICAL CENTER - NASSAU	BAPTIST MEDICAL CENTER SOUTH	ED FRASER MEMORIAL HOSPITAL	FLAGLER HOSPITAL	MAYO CLINIC	MEMORIAL HOSPITAL JACKSONVILLE	ORANGE PARK MEDICAL CENTER	SAINT VINCENT'S MEDICAL CENTER	SHANDS JACKSONVILLE MEDICAL CENTER	ST LUKE'S HOSPITAL
32033	OutPt	1,280	15	1		41	1	1,176	18	6	6	7	7	2
32033	Inpt	309	5			6		282	9		1	1	5	
32080	OutPt	4,097	64	22	3	85		3,781	83	13	9	5	19	13
32080	Inpt	1,149	16	4	1	12		1,060	23	6	4		20	3
32081	OutPt	567	62	48	1	350		46	31	10	1	8	7	3
32081	Inpt	84	8	10		32		9	14			1	7	3
32082	OutPt	4,606	338	2,594	6	166	3	166	1,084	54	15	39	51	90
32082	Inpt	1,243	76	616		23		52	370	40	4	14	22	26
32084	OutPt	13,386	174	58	6	469	3	12,340	110	48	29	24	80	45
32084	Inpt	2,311	55	3		41		2,078	37	15	5	17	54	6
32086	OutPt	7,703	110	13	1	156	1	7,248	60	21	11	21	52	9
32086	Inpt	1,935	46	6		9		1,788	30	7	1	4	40	4
32092	OutPt	5,379	431	42	6	2,404	1	2,031	193	57	69	29	61	55
32092	Inpt	1,033	99	3		322		406	82	25	23	23	38	12
32095	OutPt	2,818	95	29		420		2,163	33	28	15	6	16	13
32095	Inpt	422	12	3		44		335	2	8	3	6	7	2
32145	OutPt	2,410	48			49		2,262	9	5	8	3	24	2
32145	Inpt	411	5					390	3	4	2	1	6	
32259	OutPt	4,922	701	51	5	3,257	1	125	228	158	90	69	89	148
32259	Inpt	1,136	186	4		609		43	104	72	21	28	30	39
St. Johns Total	OutPt.	47,168	2,038	2,858	28	7,397	10	31,338	1,849	400	253	211	406	380
St. Johns Total	InPt.	10,033	508	649	1	1,098	0	6,443	674	177	64	95	229	95
St. Johns	Total ED Visits	57,201	2,546	3,507	29	8,495	10	37,781	2,523	577	317	306	635	475
	% OutPt.	82.5%	80.0%	81.5%	96.6%	87.1%	100.0%	82.9%	73.3%	69.3%	79.8%	69.0%	63.9%	80.0%
	% InPt.	17.5%	20.0%	18.5%	3.4%	12.9%	0.0%	17.1%	26.7%	30.7%	20.2%	31.0%	36.1%	20.0%

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Other FL Total	OutPt.	12,849	1,155	449	236	642	391	5,077	1,190	751	1,280	405	899	374
Other FL Total	InPt.	3,405	340	37	13	121	0	1,097	505	444	290	166	336	56
Other Florida	Total ED Visits	16,254	1,495	486	249	763	391	6,174	1,695	1,195	1,570	571	1,235	430
	% OutPt.	79.1%	77.3%	92.4%	94.8%	84.1%	100.0%	82.2%	70.2%	62.8%	81.5%	70.9%	72.8%	87.0%
	% InPt.	20.9%	22.7%	7.6%	5.2%	15.9%	0.0%	17.8%	29.8%	37.2%	18.5%	29.1%	27.2%	13.0%
Other U.S. Total	OutPt.	16,311	2,161	1,233	1,436	889	762	2,345	1,468	1,863	1,155	839	1,482	678
Other U.S. Total	InPt.	3,472	616	153	100	138	0	394	523	239	156	510	539	104
Other U. S.	Total ED Visits	19,783	2,777	1,386	1,536	1,027	762	2,739	1,991	2,102	1,311	1,349	2,021	782
	% OutPt.	82.4%	77.8%	89.0%	93.5%	86.6%	100.0%	85.6%	73.7%	88.6%	88.1%	62.2%	73.3%	86.7%
	% InPt.	17.6%	22.2%	11.0%	6.5%	13.4%	0.0%	14.4%	26.3%	11.4%	11.9%	37.8%	26.7%	13.3%
OUTPATIENTS	Total	474,942	92,185	29,152	18,686	28,305	15,060	39,727	17,076	54,353	54,928	42,951	69,441	13,078
INPATIENTS	Total	100,038	16,726	4,470	1,518	4,582	3	8,078	5,528	11,844	10,031	15,300	19,305	2,653
GRAND	Total	574,980	108,911	33,622	20,204	32,887	15,063	47,805	22,604	66,197	64,959	58,251	88,746	15,731
	Hospital % of Total ED Visits		18.9%	5.8%	3.5%	5.7%	2.6%	8.3%	3.9%	11.5%	11.3%	10.1%	15.4%	2.7%

Source: AHCA Hospital Inpatient and Outpatient Emergency Department files.

Community Resources



# Nassau County Resource Directory

**ORGANIZATION CONTACT INFORMATION**

<b>AL- ANON ALATEEN- AA</b> .....	(904) 350-0600
<b>ALACHUA CLUB-AA</b> .....	(904) 261-3580
<b>AMELIA URGENT CARE</b> .....	(904) 321-0088
<b>AMELIA ROOM-AA</b> .....	(904) 261-8349
<b>AMERICAN CANCER SOCIETY-NASSAU UNIT</b> .....	(904) 391-3644
1-800-227-2345	
<b>BAPTIST MEDICAL CENTER-NASSAU</b> .....	Main: (904) 321-3500
Admin: (904) 321-3501	
Man to Man Cancer Support Group.....	1-800-227-9954
Pink Ribbon Ladies Cancer Support Group.....	(904) 321-2057
(904) 261-2976	
<b>BARNABAS CENTER</b>	
Main Office.....	(904) 261-7000
1-888-277-1986	
<b><a href="mailto:barnabascenter@comcast.net">barnabascenter@comcast.net</a></b>	
Dental Clinic.....	(904) 261-9988
Hilliard Satellite Office.....	(904) 845-4999
Medical Clinic.....	(904) 261-7887
“New to You” Resale Store.....	(904) 321-2334
<b>BIG BROTHERS BIG SISTERS</b> .....	(904) 261-9500
<b>BOYS AND GIRLS CLUB OF NASSAU COUNTY</b>	
Miller Freedom Center.....	(904) 261-1075
Fernandina Beach Club.....	(904) 491-9102
<b>CHILD ABUSE HOTLINE</b> .....	1-800-962-2873
<b>CHILD ADVOCATE RAPID RESPONSE TEAM (C.A.R.R.T.)</b> .....	(904) 548-1849
<b>COUNCIL ON AGING</b>	
Eastside Senior Center.....	(904) 261-0701
Transportation Office.....	(904) 261-0700
Westside Senior Center.....	(904) 845-3331
Alzheimer’s Support Group.....	(904) 261-0701
<b>DEPARTMENT OF CHILDREN AND FAMILIES</b> .....	(904) 548-9300
<b>ELDER SOURCE</b> .....	(904) 391-6699
1-888-242-4464	
<b><a href="mailto:information@myeldersource.org">information@myeldersource.org</a></b>	
<b>EPISCOPAL CHILDREN’S SERVICES</b> .....	(904) 491-3638
<b>FERNANDINA BEACH CHURCH OF CHRIST</b> .....	(904) 277-2517
Angel Food Ministries	
Cold-Night Shelter	
<b>FERNANDINA BEACH POLICE DEPARTMENT</b> .....	(904) 225-0067
Bosom Buddies Cancer Support Group	
<b>FIRST ASSEMBLY OF GOD</b> .....	(904) 261-6448
Shelter	
<b>FLORIDA COMMUNITY PREVENTION CENTER</b> .....	(904) 321-4097
1-866-366-8990	
<b>FLORIDA KIDCARE</b> .....	1-888-540-5437
<b>FLORIDA MEDICAID</b> .....	(904) 548-9305
<b>FLORIDA SUICIDE AND CRISIS HOTLINE</b> .....	(904) 632-0600
1-800-346-6185	
United Way 211	
<b>FLORIDA QUITLINE</b> .....	1-877-U-CAN-NOW (1-877-277-6669)
<b>FOOD STAMPS</b> .....	(904) 548-9305
<b>GERRI’S CORNER</b> .....	(904) 277-0099
<b><a href="mailto:gerriscorner@bellsouth.net">gerriscorner@bellsouth.net</a></b>	
<b>GLEANERS DISPATCH</b> .....	(904) 777-6344
<b><a href="mailto:gleaners4u@bellsouth.net">gleaners4u@bellsouth.net</a></b>	
<b>GOODWILL</b> .....	(904) 321-0086
<b>GOODWILL-JOB JUNCTION</b> .....	(904) 779-2894
<b>GRAY GABLES CHURCH</b> .....	(904) 879-2986
<b>GUARDIAN AD LITEM</b> .....	(904) 630-1200
<b>HABITAT FOR HUMANITY</b> .....	(904) 277-0600
<b><a href="mailto:nhfh@net-magic.net">nhfh@net-magic.net</a></b>	
<b>HEAD START</b> .....	Enrollment: (904) 491-3631
Callahan Head Start.....	(904) 879-5019
Peck Head Start.....	(904) 491-3630



Nassau County Health Department

[www.nassaucountyhealth.org](http://www.nassaucountyhealth.org)

# Nassau County Resource Directory

**ORGANIZATION      CONTACT INFORMATION**

<b>HUBBARD HOUSE OUTREACH CENTER</b> .....	Admin: (904) 354-0076
24 hour: (904) 354-3114	
24 hour toll free: 1-800-500-1119	
<a href="mailto:hubbardhouse@hubbardhouse.org">hubbardhouse@hubbardhouse.org</a>	
<b>HUBBARD HOUSE THRIFT STORE</b> .....	(904) 400-6333
<b>HOUSING AUTHORITY</b> .....	(904) 261-5051
<b>ILRC OF NORTHEAST FLORIDA</b> .....	(904) 327-0774
<b>JO HELLER TRANSITION HOUSE</b> .....	(904) 206-4120
<b>JOBCORPS</b> .....	(904) 360-8200
1-800-733-5627	
<b>LIFE CARE CENTER OF HILLIARD</b> .....	(904) 879-3684
Alzheimer's Support Group	
<b>MCPHERSON COUNSELING SERVICES</b> .....	(904) 548-0160
<a href="mailto:thera@mtcinc1.com">thera@mtcinc1.com</a>	
<b>MEDICARE</b> .....	1-800-MEDICARE (1-800-633-4227)
<b>MICAH'S PLACE</b> .....	Admin: (904) 491-6364
24 hour: (904) 225-9979	
24 hour toll free: 1-800-500-1119	
<a href="mailto:executivedirector@micahsplace.org">executivedirector@micahsplace.org</a>	
<b>NARCOTICS ANONYMOUS</b> .....	(904) 723-LOVE
<b>NASSAU COUNTY EMERGENCY MANAGEMENT SERVICES</b> .....	(904) 548-4980
1-800-958-3494	
<a href="mailto:ncem@nassaucountyfl.com">ncem@nassaucountyfl.com</a>	
<b>NASSAU COUNTY HEALTH DEPARTMENT</b>	
Administration.....	(904) 548-1800
Callahan Clinic.....	(904) 879-2306
Environmental Health.....	(904) 548-1830
(904) 879-6606	
Fernandina Beach Clinic.....	(904) 548-1860
Healthy Start.....	(904) 548-1810
Hilliard Clinic.....	(904) 845-4761
Dental Clinic at Nassau County Children and Family Education Center.....	(904) 548-1849
Tobacco Education Department.....	(904) 548-1867
Yulee Clinic.....	(904) 548-1880
<b>NASSAU COUNTY PARKS AND RECREATION</b> .....	(904) 548-4689
(904) 879-3751	
<b>NASSAU COUNTY VETERAN'S SERVICES</b> .....	(904) 548-4670
<b>NATIONAL ALLIANCE FOR THE MENTALLY ILL (NAMI NASSAU COUNTY)</b> .....	(904) 277-1886
<b>NORTHEAST FLORIDA COMMUNITY ACTION AGENCY</b> .....	(904) 261-0801
<a href="mailto:contact@nfcaa.org">contact@nfcaa.org</a>	
<b>NORTHEAST FLORIDA COMMUNITY HOSPICE</b> .....	(904) 225-0411
<b>SALVATION ARMY HOPE HOUSE</b> .....	(904) 321-0435
<b>SECOND HARVEST FOOD BANK OF NORTHEAST FLORIDA</b> .....	(904) 353-3663
<b>SOLANTIC URGENT CARE</b> .....	(904) 261-3913
<b>SUTTON PLACE BEHAVIORAL CENTER</b> .....	(904) 225-8280
<b>THE BRIDGE FAMILY WORSHIP CENTER</b> .....	(904) 225-486
Angel Food Ministries <a href="mailto:info@thebridgeflorida.com">info@thebridgeflorida.com</a>	
<b>THE PURPLE DOVE RESALE CENTER</b> .....	(904) 261-5227
<a href="mailto:executivedirector@micahsplace.org">executivedirector@micahsplace.org</a>	
<b>TLC PREGNANCY CENTER</b> .....	(904) 321-2008
<b>VICTIM SERVICES ADVOCATE</b> .....	Victim Advocate: (904) 548-4099
After hours call Sheriff's Office	
Sheriff Phone: (904) 225-0331	
Sheriff Phone: (904) 879-1563	
<b>WIC-NASSAU COUNTY HEALTH DEPARTMENT</b>	
Callahan Clinic.....	(904) 879-6377
Fernandina Beach Clinic.....	(904) 548-1870
Hilliard Clinic.....	(904) 845-2660
Yulee Clinic.....	(904) 845-1890
<b>WORKSOURCE</b> .....	(904) 432-0009
<b>YMCA</b>	
McArthur Family YMCA.....	(904) 261-1080
Hilliard Family YMCA.....	(904) 845-2733

ADDITIONAL RESOURCES

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BRFSS Data Summary



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The Behavioral Risk Factor Surveillance System (BRFSS) is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury. This system was established in 1984 by the Centers for Disease Control and Prevention (CDC) as a telephone-based health survey that is administered in all 50 states. Each year approximately 350,000 adults are interviewed. States use BRFSS data to identify emerging health problems, establish and track health objectives, and develop and evaluate public health policies and programs.

In 2002, the Florida Department of Health, Bureau of Epidemiology with support from CDC, a state-based telephone surveillance system was designed to collect data on individual risk behaviors and preventive health practices related to the leading causes of morbidity and mortality for each of Florida's 67 counties. Information from the survey is used for health planning, program evaluation, and monitoring health objectives within the Department of Health. The next BRFSS surveillance was completed in 2007 for all Florida counties and was modified to include all of the questions in the state survey rather than the abbreviated questionnaire that was used for the 2002 survey.

A total of 546 surveys were administered in Nassau for the 2007 survey. A summary of the county's BRFSS report can be accessed from the Florida Department of Health's website at: [http://www.doh.state.fl.us/disease\\_ctrl/epi/BRFSS\\_Reports/2007BRFSS/Nassau.pdf](http://www.doh.state.fl.us/disease_ctrl/epi/BRFSS_Reports/2007BRFSS/Nassau.pdf). Survey findings are based on self-reported data from the adult population.

Generally, Nassau resident responses were inline to the state percentages on a majority of chronic diseases and disease prevention related issues. Some questions pertaining to quality of life seemed to be ranked higher than that of the State. For instance 81.1 percent of adults believed that they received the social and emotional support they need compared to the State measure of 77.9 percent. The percentage of adults who felt that they were in good health received a 90.6 percent rank compared to the State's 88.78 percent. Significantly higher than the State's percent of 77.1, Nassau County's measure for adults that had a personal doctor is 85.3 percent.