



Lafayette County Health Needs Assessment

November 2007



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Lafayette County Health Department

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Executive Summary

Introduction

In an effort to improve the health of the residents of Lafayette County, a collaborative partnership was formed between the Lafayette County Health Department and the WellFlorida Council for the purpose of conducting a needs assessment for use by the Lafayette County Health Department and other community partners. This needs assessment consists of demographic, socioeconomic and health status information that will be used to identify areas where targeted interventions and policy changes may have the greatest impact. Once community needs are identified through quantitative data analysis of demographic, socioeconomic, and health status information and qualitative interviews, the strategic planning process can begin.

A summary of key findings is presented at the end of each section.

Demographic and Socioeconomic Profile

The demographic and socioeconomic profile examines the population characteristics of Lafayette County. When data are available, a comparison is provided with the state of Florida. Zip code level data for Lafayette County are presented, where data are available.

Lafayette is one of the less populated counties in Florida. With a population of 8,089 and a land area of 548 square miles, the density is 13 people per square mile, less than a third of the state average. However, the population is growing. Between 2000 and 2007 the rate of increase was 15.2 percent as compared to Florida's 18.2 percent. While Lafayette County encompasses two zip codes, the area currently experiencing the largest growth is 32013, which includes the city of Day. Population growth in Lafayette County is predominantly due to in-migration.

In terms of the racial/ethnic distribution, 75.1 percent of Lafayette County's residents are white, 16.5 percent are black and 8.2 percent identify themselves as "other"; Hispanics comprise 12.8 percent of the population and those who identify themselves as Asian make up less than 1 percent.

The per capita and median household incomes in Lafayette are substantially lower than for the state. The percentage of people living in poverty in Lafayette County is notably higher than it is for the state of Florida. Over 25 percent of the children in Lafayette are living in poverty and 17.5 percent of all persons are living in poverty, which is higher than the state average of 12.5 percent.

In Lafayette County, the high school graduation rate is higher than the state and the drop out rate is lower than it is for the state. In Lafayette County, fewer people, 11.5 percent, achieve a bachelor's degree or higher than is typical for Florida, 29.4 percent.

Unemployment is decreasing in Lafayette County, as it is statewide and nationally. The unemployment rate has been consistently maintained as it has been for Florida. In 2006, the unemployment rate for Lafayette was 2.7 as compared to 3.3 for the state.

Health Status

Communities are interested in the health status of their population because healthy people are an essential resource. Numerous factors have a significant impact on good health: lifestyle and behavior, human biology, and environmental and socioeconomic conditions, as well as the individual's access to adequate and appropriate health care and medical services.

Currently, in Lafayette County, heart disease is the leading cause of death, followed by cancer. This is consistent with the state of Florida and the nation, in which heart disease is the leading cause of death, followed by cancer. Differences in crude rates between black, white, and non-white populations are reviewed in the health status section and summarized in the key findings. Reviews of age-adjusted and age-specific mortality rates are provided as well.

Morbidity, defined as the presence of disease, is another measure to determine a population's health status. Hospitalization and reported infectious disease data can be used as indicators of morbidity. A review of hospital discharge data indicate that the most frequent reason for discharge among all Lafayette County residents is normal newborn, followed by vaginal delivery without complicating diagnosis, simple pneumonia and pleurisy, heart failure and shock, and cesarean section. The rate of avoidable hospitalization discharges in Lafayette County is lower than for Florida.

Maternal health issues are also discussed in the health status section. Rates for teen pregnancy have been higher in Lafayette County than at the state level. Additionally, rates for prenatal care access during the first trimester are lower in Lafayette County than that of the state. The final maternal and child health birth indicator is repeat births to mothers 15-19. In Lafayette County the rate is currently higher than the rate for the state of Florida.

Mental health indicators such as suicide rates, domestic violence rates, hospitalizations rates for mental health issues, and Baker Act data can be used to assess the mental health of a community. Mental health is a vital and sometimes overlooked component to the overall health of an individual and community. Because Lafayette County has been federally designated as a medically underserved county, there is a county-wide mental health professional shortage.

Statistically, whites are more likely to commit suicide than any other racial/ethnic demographic. Lafayette County reflects this trend and with increased rates of suicide among white residents. Although the crude occurrences of domestic violence in Lafayette County are lower than for the state, the total rate per 100,000 in Lafayette County has significantly increased since 2002.

Health Resource Availability and Access

This section examines the health resources available to the citizens of Lafayette County and identifies gaps in service as well as barriers to health care.

As mentioned above, the Federal Government has designated Lafayette County as a Health Professional Shortage Area (HPSA) for primary, dental, and mental health care. It has also been deemed a Medically Underserved Area (MUA).

Over twenty (22.8) percent of the non-elderly residents in Lafayette County have no health insurance, which is higher than Florida's 19.2 percent. As of December 31, 2005, Lafayette County had 972residents who were eligible to receive Medicaid. The majority of Medicaid eligible in Lafayette County is children under the age of 18.

In Lafayette County during calendar year 2006, the rate of avoidable hospitalization was 13.8 per 1000, while the rate for Florida is 13.9 percent. Two of the main payor sources for avoidable hospitalizations in Lafayette are commercial insurance and Medicaid. The most frequent cause of avoidable hospitalization for the county is dehydration/volume depletion, followed by chronic obstructive pulmonary disease and cellulitis.

Community Input

As mentioned above, a community health needs assessment provides a cross-section of demographic and socioeconomic factors, health outcomes and health status data in order to better understand the needs of the community. In order to complete the process of conducting a needs assessment of a community, both qualitative and quantitative data must be collected to establish the community perspective, and are equally as important to the process. The Community Input section of this needs assessment represents qualitative data collection and highlights the community perspective.

This final stage in the data gathering process is to collect and evaluate various forms of qualitative community input and opinions on the issues uncovered in the quantitative data analysis of demographic and health status information. Qualitative data for this component of the process was collected through focus groups within the community and interviews with key informants and leaders in Lafayette County.

This Community Input section represents the effort to gauge community perspectives on health issues and priorities. This information is critical to the success of a county-wide needs assessment process and represents a key step in the process of ultimately achieving improved health care and health outcomes for residents of Lafayette County.

In this section fifteen community leaders who work in healthcare, government, and business share their views on healthcare in Lafayette County and the resources available to meet the needs of citizens. They discuss issues relating to access and affordability of healthcare, poverty, and the complex interactions between individuals and the health delivery system. Their comments serve to augment and inform the quantitative data provided in the previous sections. The health issue of greatest concern to community leaders was indigent care and care for non-English speaking members of the community. While many leaders indicated that services are available in the county, access for low income, uninsured, and Spanish speaking residents remains highly problematic.

Demographic and Socioeconomic Characteristics

Introduction

The demographic and socio-economic characteristics of Lafayette County residents are reviewed in this section. Demographic and socio-economic characteristics are often strong predictors of healthcare access and health outcome. Indicators selected for review in this section are some of the most influential in determining the extent of a community's overall health.

Data in this section is presented for Lafayette County and compared to Florida. In addition, zip code data is also presented when available and appropriate. Data indicators include population breakdown by age, race and gender; population growth and projections; poverty status; per capita and median income; educational attainment; unemployment rates; and employment by size and industry. The information provided in this section helps to establish a profile for the people of Lafayette County and to determine the demographic and socio-economic barriers and opportunities to the improvement of community health.

Population

Clearly, the sheer number of people in a community is the leading determinant of the demand for healthcare services. Lafayette County, which has a population of more than 8,000 (Table 1), is located in north central Florida (Figure 1). The county also shares borders with the following counties: Suwannee to the east, Gilchrist to the southeast, Dixie to the south, Taylor to the west and Madison to the northwest. As seen in Figure 1, Lafayette is one of 16 counties in north central Florida that comprise the Local Health Planning District 3 as designated by the Florida Agency for Health Care Administration (AHCA). Mayo, which is the county seat, is the largest incorporated municipality in the county. Mayo's population is more than 4,000.

For various population data elements, data is presented by zip code. Most zip codes are self-contained within the boundaries Lafayette County. However, some zip codes that are predominantly located in other counties may cross the Lafayette border. For instance, some residents of unincorporated areas located in Lafayette County may be technically located in Lafayette, though they are not included in the population.

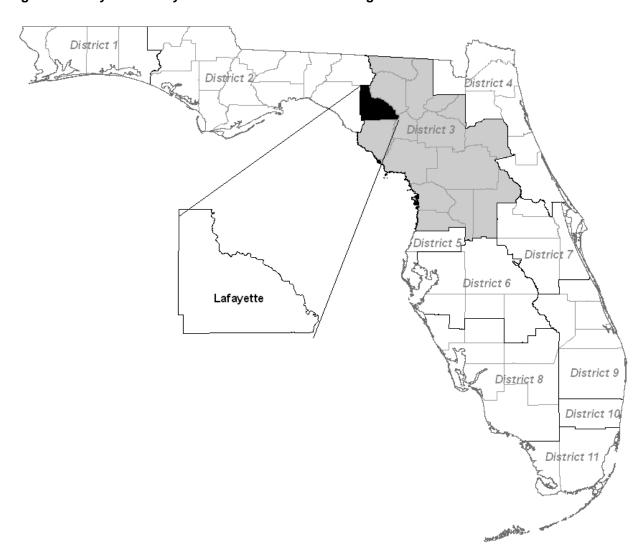
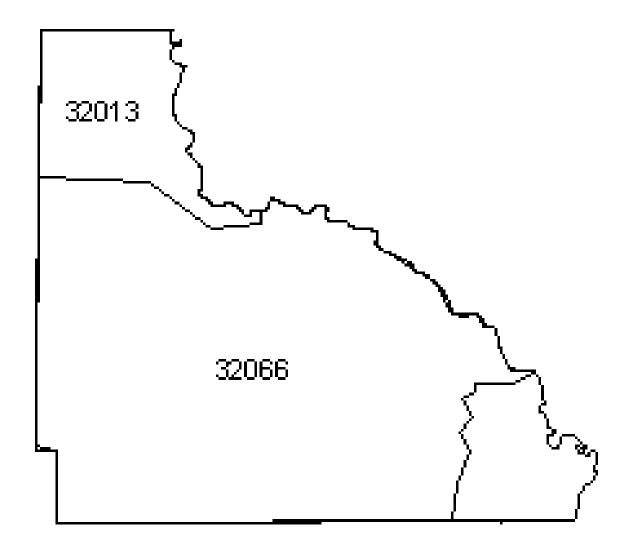


Figure 1. Lafayette County and the Local Health Planning District 3.

Prepared by WellFlorida Council, 2007.

Figure 2. Zip code map of Lafayette County, 2007.



Prepared by: WellFlorida Council, 2007.

Population Growth and Distribution

As seen in Table 1, the percent change in population between 2000 through 2007 in Lafayette County was 15.2 percent compared to 18.2 percent for the state. This trend where Lafayette County grows at a slower pace than the state is expected to continue through 2012 and beyond.

32013 and 32066 zip codes are the only zip codes in Lafayette County. Mayo, the largest zip code in the county is not expected to see the largest percentages of population growth in the future. It is the Day zip code (32013), which is anticipated to progress towards the statewide growth rate, 30.6 percent as compared to 33.3 percent between 2000 and 2012.

Table 1. Population growth and percent change by zip code, Lafayette County and Florida. 2000-2012.

Area	2000 Population	2007 Population	2012 Population	Percent Change 2000 - 2007	Percent Change 2007 - 2012	Percent Change 2000 - 2012
32013 Day	2,181	2,773	2,848	27.1	2.7	30.6
32066 Mayo	4,167	4,599	4,839	10.4	5.2	16.1
Lafayette Zip Codes	6,348	7,372	7,687	16.1	4.3	21.1
Lafayette County	7,022	8,089	8,435	15.2	4.3	20.1
Florida	15,982,378	18,893,813	21,311,920	18.2	12.8	33.3

Source: ESRI Business Solutions, 2007. Prepared by: WellFlorida Council, 2007.

Please note that the data in Tables 1 and 2 come from two different sources as zip code data projections are available from one source through 2012 and whole county population projections are available from another source through 2030. For this reason, total population estimates for all of Lafayette County for the same year might differ in the two tables as the sources employ different estimating techniques.

As stated, data is not available projecting population growth in zip code areas beyond 2012. Long-term (10, 15, 20 and 25-year) population growth projections for Lafayette County and Florida have been provided from the Bureau of Economic and Business Research at the University of Florida (Table 2). Table 2 shows that through 2030 Lafayette County will not experience population growth at rates near the state rate.

Table 2. Population growth and percent change, Lafayette County and Florida, 2006-2030.

2000-2000.						
	Numb	er	Percent Change			
Year	Lafayette County	Florida	Year	Lafayette County	Florida	
2006	8,060	18,349,132				
2015	8,863	21,831,514	2006-2015	10.0	19.0	
2020	9,267	23,552,136	2006-2020	15.0	28.4	
2025	9,639	25,085,972	2006-2025	19.6	36.7	
2030	9,992	26,513,332	2006-2030	24.0	44.5	

Source: Bureau of Economic and Business Research, University of Florida, *Florida Population Studies, 2006*. Prepared by: WellFlorida Council, 2007.

As shown in Table 3, Mayo is the only incorporated area of Lafayette County. The population in the Lafayette County unincorporated areas increased 16.6 percent from 2000 through 2006, while the growth of unincorporated areas for Florida as a whole was 11.6 percent.

Table 3. Population by incorporated and unincorporated areas, Lafayette County and Florida, 2000 and 2006.

Area	2000	2006	Total Change				
Area	Population	Population	Number	Percent			
Mayo	988	1,025	37	3.7			
Lafayette County	7,022	8,060	1,038	14.8			
Incorporated	988	1,025	37	3.7			
Unincorporated	6,034	7,035	1,001	16.6			
Florida	15,982,824	18,349,132	2,366,308	14.8			
Incorporated	7,905,318	9,331,989	1,426,671	18.0			
Unincorporated	8,077,506	9,017,143	939,637	11.6			

Source: Bureau of Economic and Business Research, University of Florida, *Florida Estimates of Population*, 2006.

Prepared by: WellFlorida Council, 2007.

Population by Age, Race and Gender

Age, race and gender are all factors that contribute to, or at the very least, help describe aspects of healthcare access and health outcome in the United States. Typically, older persons will have more healthcare service needs and be suffering from high mortality compared to their younger counterparts. Healthcare research in the United States has long shown that there exist racial disparities in access to healthcare and in key health outcomes. In addition, the primary healthcare needs of males and females can differ greatly, especially at different critical stages of life. Reviewing population characteristics based on age, race and gender allows for factoring into health needs analysis the differences and disparities that exist in certain population groups.

Age

As seen in Figure 3 and Table 4, Lafayette County is consistent with age population of Florida as a whole. 1,084 of Lafayette County's residents are age 65 and older. This equates to 13.4 percent of the population being 65+ while the state of Florida as a whole has 17.9 percent of its population age 65 and older. Because of the lower percentage of seniors in the Lafayette County population, the percentage of working-age adults (18-64) is slightly higher than the percentages for the state of Florida as a whole.

Table 4 shows that there is a large variation between the different zip codes in Lafayette County and also between the county and the state. The Mayo zip code (32066) has a larger percentage (16.2) of individuals ages 65 and over. This is slightly lower than the state, which is 17.9 percent. Zip code (32013), which includes the municipality of Day, has a smaller percentage (6.4) of residents ages 65 and over.

Day (32013) also has the largest number of working age adults (18-64) at 83.9 percent. The Mayo zip code has fewer individuals ages 18-64 at 59.2 percent. This number corresponds to the slightly higher percent of seniors in this area. Likewise, the 0-17 population in Day (32013) is also lower in the county at 9.7 percent, which is less than half of the state's 0-17 percentage of 21.5 percent.

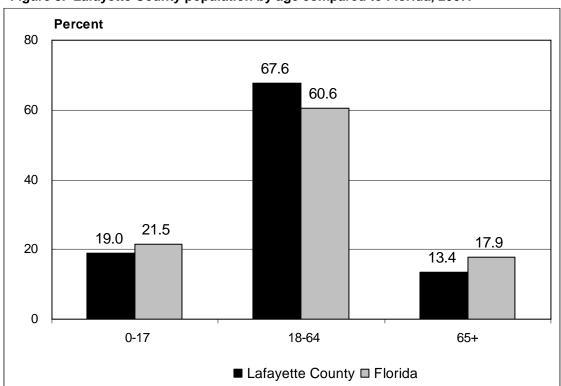


Figure 3. Lafayette County population by age compared to Florida, 2007.

Table 4. Population by age, by zip code, Lafayette County and Florida, 2007.

Area	2007	0-17		18-64		65+	
	Population	Number	Percent	Number	Percent	Number	Percent
32013 Day	2,773	269	9.7	2,327	83.9	177	6.4
32066 Mayo	4,599	1,131	24.6	2,723	59.2	745	16.2
Lafayette Zip Codes	7,372	1,400	19.0	5,049	68.5	923	12.5
Lafayette County	8,089	1,537	19.0	5,468	67.6	1,084	13.4
Florida	18,893,813	4,062,170	21.5	11,449,651	60.6	3,381,993	17.9

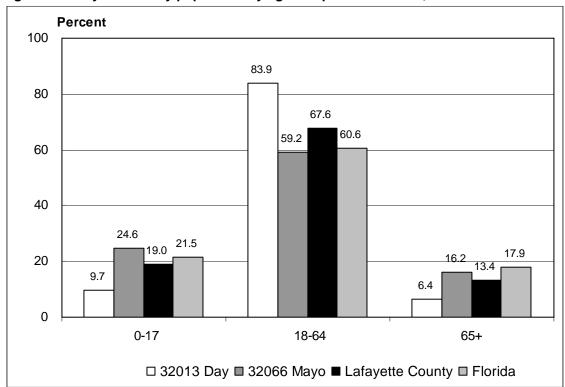


Figure 3. Lafayette County population by age compared to Florida, 2007.

Table 5. Population by age, by zip code, Lafayette County and Florida, 2007.

Aroo	2007	0-4		5-9	9	10-14	
Area	Population	Number	Percent	Number	Percent	Number	Percent
32013 Day	2,773	78	2.8	78	2.8	83	3.0
32066 Mayo	4,599	336	7.3	327	7.1	322	7.0
Lafayette Zip Codes	7,372	413	5.6	404	5.5	405	5.5
Lafayette County	8,089	445	5.5	437	5.4	453	5.6
Florida	18,893,813	1,133,629	6.0	1,058,054	5.6	1,133,629	6.0
Area	15-	24	2	5-44	45	5-64	
Area	Number	Percent	Number	Percent	Number	Percent	
32013 Day	433	15.6	1,486	53.6	435	15.7	
32066 Mayo	515	11.2	1,297	28.2	1,058	23.0	
Lafayette Zip Codes	948	12.9	2,783	37.8	1,493	20.3	
Lafayette County	1,043	12.9	2,944	36.4	1,691	20.9	
Florida	1,035	12.8	2,063	25.5	2,119	26.2	
Area	65-8	34	8	85+		18+	
Alea	Number	Percent	Number	Percent	Number	Percent	
32013 Day	164	5.9	14	0.5	2,496	90.0	
32066 Mayo	653	14.2	92	2.0	3,449	75.0	
Lafayette Zip Codes	817	11.1	106	1.4	5,945	80.6	
Lafayette County	963	11.9	121	1.5	6,552	81.0	
Florida	1,230	15.2	218	2.7	6,350	78.5	

Race and Ethnicity

Table 6 and Figure 4 provide information on the race of the population in Lafayette County. The percentage of the Florida population that is white is 75.4 percent, as compared to Lafayette County's white residents who represent 75.1 percent of the county total. While the black population in Florida is 15.6 percent of the total population, the black population is 16.5 percent of Lafayette County's total. The greatest concentration of black population, as a percentage of total population, resides in the Day zip code (32013).

The higher percentage of individuals who identify as either white or black corresponds to a lower percentage of individuals who identify as Asian/Pacific Islander and Other.

Table 6. Population by race, by zip code, Lafayette County and Florida, 2007

Table 6. Population by	race, by zip co	ue, Larayette	County and	1011ua, 2007.		
Area	2007	Asian/Pac	ific Islander	Black		
7.1.00	Population	Number	Percent	Number	Percent	
32013 Day	2,773	14	0.5	940	33.9	
32066 Mayo	4,599	0	0.0	391	8.5	
Lafayette Zip Codes	7,372	14	0.2	1,331	18.1	
Lafayette County	8,089	16	0.2	1,335	16.5	
Florida	18,893,813	415,664	2.2	2,947,435	15.6	
Area	White	е	Oth			
Alea	Number	Percent	Number	Percent		
32013 Day	1,614	58.2	205	7.4		
32066 Mayo	3,785	82.3	423	9.2		
Lafayette Zip Codes	5,399	73.2	628	8.5		
Lafayette County	6,075	75.1	663	8.2		
Florida	14,245,935	75.4	1,284,779	6.8		

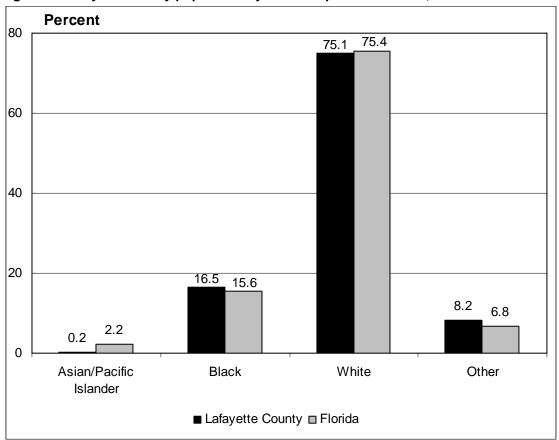


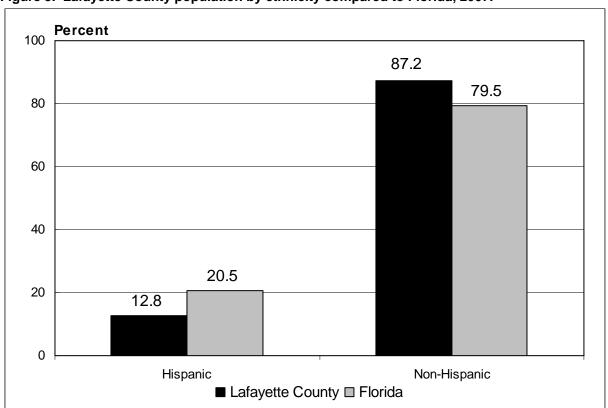
Figure 4. Lafayette County population by race compared to Florida, 2007.

As seen in Table 7 and Figure 5, over 20 percent of Florida's total population is of Hispanic ethnicity. The percentage is substantially lower in Lafayette County (12.8 percent) than for the state as a whole. The Lafayette County zip code area with the lowest percentage (11.9) of Hispanic residents is 32013(Day), while the zip code area with the highest percentage (14.6) is 32064 (Mayo).

Table 7. Population by Hispanic ethnicity, by zip code, Lafayette County and Florida, 2007.

1 lolida, 2001.							
A == =	2007 Population	Hispa	nic	Non-Hispanic			
Area	2007 Fopulation	Number	Percent	Number	Percent		
32013 Day	2,773	330	11.9	2,443	88.1		
32066 Mayo	4,599	671	14.6	3,928	85.4		
Lafayette Zip Codes	7,372	1,001	13.6	6,371	86.4		
Lafayette County	8,089	1,035	12.8	7,054	87.2		
Florida	18,893,813	3,873,232	20.5	15,020,581	79.5		

Figure 5. Lafayette County population by ethnicity compared to Florida, 2007.



Gender

Females typically have longer life expectancies in the United States and in Florida. Because of this phenomenon, communities that are older tend to have a higher percentage of females in the population. Table 8 shows that this is not the case in Lafayette County. While Lafayette has 37.9 percent females and Florida has 51.2 percent residents that are female, the male population is significantly higher than the state. 62.1 percent of Lafayette County residents are male, while only 48.8 percent of Florida residents are male. The male population in zip code 32013, Day, is at 80 percent of the population.

Table 2-8. Population by gender, by zip code, Lafayette County and Florida, 2007.

	<u>, , , , , , , , , , , , , , , , , , , </u>						
Aron		2007	Ma	lles	Females		
Area		Population	Number	Percent	Number	Percent	
32013 Day		2,773	2,218	80.0	555	20.0	
32066 Mayo		4,599	2,424	52.7	2,175	47.3	
Lafayette Zip Cod	es	7,372	4,642	63.0	2,730	37.0	
Lafayette County		8,089	5,023	62.1	3,066	37.9	
Florida		18,893,813	9,220,181	48.8	9,673,632	51.2	

Source: ESRI Business Solutions, 2007. Prepared by: WellFlorida Council, 2007.

Economic Characteristics

The economic status, and often the health status, of a region and its residents can be assessed by examining a variety of economic characteristics. Some of the most critical include income, poverty status and employment. Higher incomes, lower poverty and better employment have all been shown to impact health access and health outcome favorably. Conversely, lower income, higher poverty and poorer employment are definite predictors of a lack of access to healthcare and adverse health outcomes. In this section, these standard measures of income, poverty status and employment are used to compare Lafayette County with the state of Florida.

Income

As shown in Table 9, the median household income for Lafayette County (\$35,595) is substantially lower than the state (\$48,591). The median household income in Lafayette County varies slightly from \$35,619 in 32066 (Mayo) to \$36,204 in 32013 (Day). No zip code area in Lafayette County has a median income higher than the state of Florida.

Table 9 also shows per capita income levels for Lafayette County and all of its zip code areas as they compare to the state. As with median income, the per capita income in Lafayette County

(\$17,787) is less than Florida (\$27,311). Per capita income in Lafayette County ranges from a low of \$16,443 in 32013 (Day) to a high of \$18,215 in 32066 (Mayo).

Table 9. Median household income and per capita income by zip code, Lafayette

County and Florida, 2007.

County and Florida, 2007.							
Area	Total Households	1		Per Capita Income			
32013 Day	434	2.6	36,204	16,443			
32066 Mayo	1,644	2.7	35,619	18,215			
Lafayette Zip Codes	2,078	NA	35,839	NA			
Lafayette County	2,375	2.6	35,595	17,787			
Florida	7,510,601	2.5	48,591	27,311			

Source: ESRI Business Solutions, 2007. Prepared by: WellFlorida Council, 2007.

Table 10 depicts household income distribution in Lafayette County by zip code. The percentage of households with less than \$25,000 total household income ranges from 32.3 percent in 32013 (Day) to 33.4 percent in 32066 (Mayo). All of the Lafayette County zip code areas have a higher proportion of residents with incomes under \$25,000 than the state of Florida.

At the opposite end of the spectrum, while 7.0 percent of Florida households have incomes over \$150,000, only 3.1 percent of Lafayette County households have the same. None of Lafayette County's zip code areas have a higher proportion of households with incomes above \$150,000 than the state.

Table 10. Households by income levels, by zip code, Lafayette County and Florida, 2007.

A	Total	Less than	Less than \$25,000		\$25,000-\$49,999		
Area	Households	Number	Percent	Number	Percent		
32013 Day	434	140	32.3	153	35.3		
32066 Mayo	1,644	549	33.4	552	33.6		
Lafayette Zip Codes	2,078	689	33.2	706	34.0		
Lafayette County	2,375	791	33.3	798	33.6		
Florida	7,510,601	1,749,970	23.3	2,102,968	28.0		
Aroa	\$ 50,000-\$99,999		\$100,000-\$149,999		\$150,000 and Over		
Area	Number	Percent	Number	Percent	Number	Percent	
32013 Day	104	24.0	30	6.9	7	1.6	
32066 Mayo	437	26.6	51	3.1	58	3.5	
Lafayette Zip Codes	541	26.1	81	3.9	64	3.1	
Lafayette County	620	26.1	93	3.9	74	3.1	
Florida	2,350,818	31.3	781,103	10.4	525,742	7.0	

Source: ESRI Business Solutions, 2007. Prepared by: WellFlorida Council, 2007.

Poverty

Each year, the United States Department of Health and Human Services (DHHS) establishes national poverty levels (Table 11). These levels are established by comparing annual income to "poverty thresholds." The thresholds vary by family size. For example, a family of four living in the 48 contiguous states and D.C is considered to be living in poverty in 2007 if the household income is below \$20,650. A poverty rate for a county is the percentage of the county's individuals that have an annual income or live in a household with an annual income below the poverty threshold.

Table 11. 2007 Federal Poverty Levels.

Persons in Family or Household	48 Contiguous States and	Alaska	Hawaii
	D.C.		
1	\$10,210	\$12,770	\$11,750
2	13,690	17,120	15,750
3	17,170	21,470	19,750
4	20,650	25,820	23,750
5	24,130	30,170	27,750
6	27,610	34,520	31,750
7	31,090	38,870	35,750
8	34,570	43,220	39,750
For each additional person, add	3,480	4,350	4,000

Source: Federal Register, vol. 72, no. 15, January 24, 2007.

Prepared by: WellFlorida Council, 2006.

Poverty data is estimated during each decennial census. The latest poverty rates available are for the 2000 census (based on 1999 income). In the analysis that follows, it is assumed that the latest poverty rate from the 2000 census is the best available estimate of the state and local poverty rate. In order to calculate numbers of persons in poverty, children and households in poverty (Tables 12 through 14), the 2000 census poverty percentages are used with the 2007 population data.

Figure 6 shows that, in terms of poverty rate, Lafayette County compares unfavorably to the state as a whole. While 12.5 percent of Florida's population is estimated to be in poverty, 17.5 percent of Lafayette County's population lives below the poverty threshold (i.e. 100 percent of the federal poverty level). Moreover, Figure 6 and Table 12 show that 26.1 percent of Lafayette County residents are estimated to be between 100 and 200 percent of the federal poverty level compared to only 18.7 percent for all of Florida. While Lafayette County does have the high levels of very low-income persons it also has a high percentage of lower middle income persons. This is reflected in the earlier analysis of the median and per capita incomes.

An examination of poverty status by zip code (Table 13) reveals that 32066 (Mayo) is the only zip code area in Lafayette County with a poverty rate. Lafayette County has a significantly higher number of children, 25.3 percent, who are living at or below the Federal Poverty Threshold whereas Florida has only 17.6 percent. As a whole, Lafayette County has a higher percentage of households in poverty than Florida except in the 200% and above category.

Percent 80 68.9 56.4 60 40 17.5 20 13.3 12.8 12.5 9.5 9.2 0 < 100% 100% - 149% 150% - 199% 200% + ■ Lafayette County □ Florida

Figure 6. Lafayette County estimated persons in poverty by level of poverty compared to Florida, 2007.

Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007. Prepared by: WellFlorida Council, 2007.

Table 12. Estimated persons in poverty by level of poverty, Lafayette County and Florida, 2007.

	Lafayette	e County	Florida		
Level of Poverty	Number	Percent	Number	Percent	
< 100%	1,413	17.5	2,364,097	12.5	
100%-124%	474	5.9	820,425	4.3	
125%-149%	604	7.5	913,575	4.8	
150%-174%	583	7.2	884,524	4.7	
175%-184%	235	2.9	384,040	2.0	
185%-199%	216	2.7	517,960	2.7	
200% +	4,564	56.4	13,009,192	68.9	
Total Population (2007)		8,089		18,893,813	

^{*}Note: Poverty percentages from the 2000 Census are used as poverty percentage estimates for 2007 in order to estimate the number in poverty, 2007.

Prepared by: WellFlorida Council, 2007.

Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007.

Table 13. Estimated persons, children and households in poverty, by zip code, Lafayette County and Florida 2007

County and Florida, 2007.										
	Ind	ividuals (All Ag	es)	Children (0-17)						
Area	Total Number	Number in Poverty	Percent in Poverty	Total Number	Number in Poverty	Percent in Poverty				
32013 Day	2,773	0	0.0	269	0	0.0				
32066 Mayo	4,599	890	19.3	1,131	309	27.3				
Lafayette Zip Codes	7,372	1,415	19.2	1,400	382	27.3				
Lafayette County	8,089	1,413	17.5	1,537	389	25.3				
Florida	18,893,813	2,364,097	12.5	4,062,170	715,253	17.6				
		Households								
Area	Total Number	Number in Poverty	Percent in Poverty							
32013 Day	434	0	0.0							
32066 Mayo	1,644	279	17.0							
Lafayette Zip Codes	2,078	348	16.7							
Lafayette County	2,375	353	14.9							
Florida	7,510,601	880,652	11.7							

^{*}Note: Poverty percentages from the 2000 Census are used as poverty percentage estimates for 2007 in order to estimate the number in poverty, 2007.

Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007. Prepared by: WellFlorida Council, 2007.

Table 14. Estimated persons in poverty by level of poverty, by zip code, Lafavette County and Florida. 2007.

Ediayette County	<u>,</u>	~				
Area	Total Number	< 100% o	f Poverty	100%-149% of Poverty		
71104	Total Hambol	Number	Percent	Number	Percent	
32013 Day	2,773	0	0.0	0	0.0	
32066 Mayo	4,599	890	19.3	569	12.4	
Lafayette Zip Codes	7,372	1,415	19.2	905	12.3	
Lafayette County	8,089	1,413	17.5	1,078	13.3	
Florida	18,893,813	2,364,097	12.5	1,734,000	9.2	
Area	150%-199%	of Poverty	200% + 0			
Alea	Number	Percent	Number	Percent		
32013 Day	2,773	100.0	0	0.0		
32066 Mayo	512	11.1	2,628	57.2		
Lafayette Zip Codes	872	11.8	4,180	56.7		
Lafayette County	1,034	12.8	4,564	56.4		
Florida	1,786,524	9.5	13,009,192	68.9		

^{*}Note: Poverty percentages from the 2000 Census are used as poverty percentage estimates for 2007 in order to estimate the number in poverty in 2007.

Employment

Being employed with health benefits or being the spouse or dependent of someone whose employer provides health insurance is still the most common ways to obtain private health insurance in the United States. Unemployed individuals are thus vastly less likely to have private health insurance coverage. In addition, smaller companies and retail and service sector employers have been shown to have more difficulty in providing health insurance for their employees. For these reasons, unemployment rates and type and size of employer data for Lafayette County is provided in this section.

As seen in Table 15 and Figure 7, the unemployment rate in Lafayette County has been consistently lower than the state of Florida since 2001. Like Florida and the rest of the nation, the unemployment rate in Lafayette County has been decreasing since 2002.

Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007

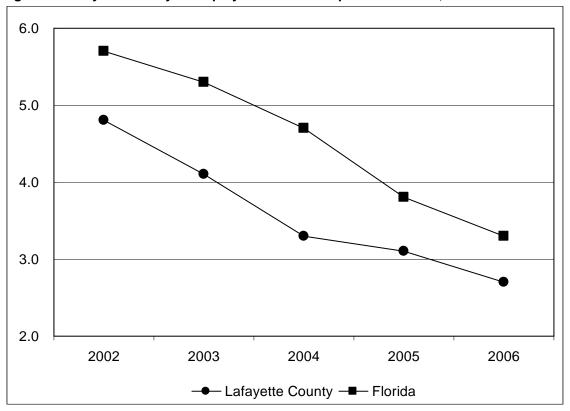
Prepared by: WellFlorida Council, 2007.

Table 15. Unemployment rates, Lafayette County and Florida, 2000-2006.

Area	2000	2001	2002	2003	2004	2005	2006
Lafayette	4.0	5.3	4.8	4.1	3.3	3.1	2.7
Florida	3.8	4.7	5.7	5.3	4.7	3.8	3.3

Source: Labor Market Info, Florida Research & Economic Database, assessed 8-14-07. Prepared by: WellFlorida Council, 2007.

Figure 7. Lafayette County unemployment rates compared to Florida, 2002-2006.



Source: Labor Market Info, Florida Research & Economic Database, assessed August 14, 2007. Prepared by: WellFlorida Council, 2007.

Table 16 depicts that 88.3 percent of Lafayette County businesses are small (defined as fewer than 20 employees) compared to 88.7 percent for Florida as a whole. In addition, Table 17 shows that out of the total labor force in Lafayette County, 47.8 percent are employed in small business as compared to 18.9 percent for the state of Florida.

Table 18 shows that 61.7 percent of businesses in Lafayette County are retail trade and service sector employers compared to 61.5 percent for Florida. Employees of smaller businesses in the retail trade and service sectors are workers who are the least likely to have access to or to be able to afford private healthcare insurance.

Retail trade and service sector includes the following:

- Retail sales:
- Administration and support;

- Waste management;
- Healthcare and social assistance;
- Educational services;
- Arts, entertainment and recreation
- Accommodations and food services;
- Other services (not including public administration or government).

Larger employers, especially those in the public administration and governmental sectors are more likely to offer health insurance to and in many instances provide a subsidy to their employees for healthcare insurance.

Table 16. Number of non-governmental businesses by size of business, Lafayette County and Florida, 2005.

and Florida, 2005.									
		Size of Business							
Area	Total Business Establishments	Less then 20 employees		20 - 99 em	nployees	100+ employees			
		Number	Percent	Number	Percent	Number	Percent		
Lafayette									
County	94	83	88.3	11	11.7	0	0.0		
Florida	504,662	447,764	88.7	46,664	9.2	10,234	2.0		

^{*} The U.S. Census Bureau determines from a sample of businesses; thus, these are not all businesses in Lafayette County but a representative sample of businesses. Governmental and public administration businesses are not included in the sample.

Source: U.S. Department of Commerce, Census Bureau, County Business Patterns, 2005.

Prepared by: WellFlorida Council, 2007.

Table 17. Number of employees in non-governmental businesses by size of business, Lafayette County and Florida, 2002.

County and Fior	,	α, ====							
		Size of Business							
Area	Total Employees	Less then 20 employees		20 - 99 employees		100+ employees			
		Number	Percent	Number	Percent	Number	Percent		
Lafayette County	648	310	47.8	230	35.5	108	16.7		
Florida	6,366,964	1,205,396	18.9	1,016,969	16.0	4,144,599	65.1		

^{**} The U.S. Census Bureau determines the number of employees from a sample of businesses; thus, total employees reflect the total employees in the sample. Governmental and public administration businesses are not included in the sample. Source: U.S. Department of Commerce, Census Bureau, *County Business Patterns Special Report*, 2002. Prepared by: WellFlorida Council, 2007.

Table 18. Retail trade and service (nongovernmental) businesses, Lafayette County and Florida, 2005.

	Larayette County and Florida, 2000:										
Area	Total Businesses	Retail Trade *		Services *							
	Total Busillesses	Number	Percent	Number	Percent						
	Lafayette	94	18	19.1	40	42.6					
	Florida	504,662	72,469	14.4	237,635	47.1					

^{*} The U.S. Census Bureau determines this from a sample of businesses; thus, total businesses reflect the total businesses in the sample. Governmental and public administration businesses are not included in the sample.

Educational Attainment

Today's complex healthcare systems and treatment guidelines are often difficult to navigate and understand. Generally, persons with higher educational levels utilize healthcare systems somewhat more effectively and efficiently than their counterparts without higher levels of educational attainment. In addition, research has suggested that educational level also has a bearing on health outcome.

Over 31 percent of Lafayette County residents (age 25 and over) have no high school diploma compared to 20 percent for Florida as a whole (Table 19). For nearly 57 percent of Lafayette County's residents, a high school diploma was their highest educational attainment compared to nearly 51 percent for Florida residents. Only 11.5 percent of Lafayette County residents achieved a college degree compared to 29.4 percent of all Florida residents.

As seen in Table 20, the high school graduation rate in Lafayette County since the 2002-2003 school years has been lower than the state of Florida. Figure 8 shows that graduation rates have indeed fallen below that of the state and continue to trend downward in comparison. Note that graduation and drop-out rates do not add up to 100 percent due to the fact of high mobility of students in the school system. There is neither graduation nor drop-out rates available for students that leave the Lafayette County school system. Zip code 32013, Day, was accurately recorded as having a 100 percent high school graduation rate according to the US Census.

^{**} North American Industry Classification (NAIC) codes for retail trade: 44-45; services: 54-56, 61, 62, 71, 72, And 81.

Source: U.S. Department of Commerce, Census Bureau, *County Business Patterns*, 2005. Prepared by: WellFlorida Council, 2007.

Table 19. Estimated number of persons 25 and over by highest level of educational attainment, by zip code, Lafayette County and Florida, 2007.

Area	Population	No High School Diploma		High So Diplo		College Degree	
	25+	Number	Percent	Number	Percent	Number	Percent
32013 Day	2,099	0	0.0	2,099	100.0	0	0.0
32066 Mayo	3,100	1,062	34.3	1,693	54.6	344	11.1
Lafayette Zip Codes	5,199	1,768	34.0	2,858	55.0	572	11.0
Lafayette County	5,719	1,817	31.8	3,241	56.7	658	11.5
Florida	13,150,094	2,647,933	20.1	6,642,512	50.5	3,859,649	29.4

^{*}Note: Educational attainment percentages from the 2000 Census are used as educational attainment estimates for 2007 in order to estimate the number by level of highest level of educational attainment in 2007.

Table 20. Graduation and dropout rates, Lafayette County and Florida, 2000 - 2006.

2006.								
	School Year							
Area	2000-2001		2001-	2002	2002-2003			
	Graduation Rate	Dropout Rate	Graduation Rate	Dropout Rate	Graduation Rate	Dropout Rate		
Lafayette County	58.0	0.9	69.0	4.5	79.5	2.3		
Florida	63.8	3.8	67.9	3.2	69.0	3.1		
	School Year							
Area	2003-2	2004	2004-	2005	2005-2006			
	Graduation Rate	Dropout Rate	Graduation Rate	Dropout Rate	Graduation Rate	Dropout Rate		
Lafayette County	80.0	1.7	79.4	2.6	81.7	2.8		
Florida	71.6	2.9	71.9	3.0	71.0	3.5		

Source: Florida Department of Education, Statistical Brief, assessed 8-14-07.

Prepared by: WellFlorida Council, 2007.

Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007. Prepared by: WellFlorida Council, 2007.

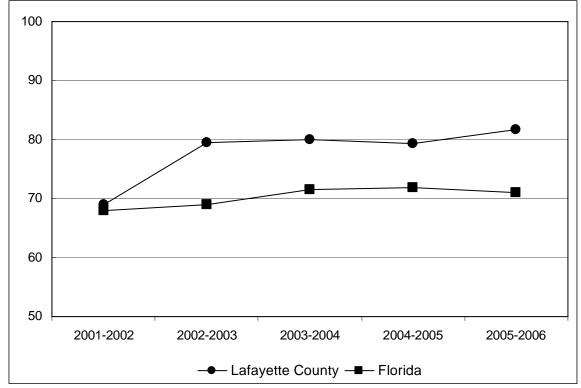


Figure 8. Lafayette County graduation rates compared to Florida, 2001 - 2006.

Source: Florida Department of Education, Statistical Brief, assessed August 14, 2007. Prepared by: WellFlorida Council, 2007.

Summary of Key Findings

Population

- Lafayette County's population now exceeds 8,000.
- During the next 25 years, Lafayette County's population is expected to increase 24 percent compared to 44.5 percent for Florida.
- The 32013 (Day) zip code is expected to be the fastest growing zip code from 2000 through 2012.
- With 13.4 percent of its population older than age 65 compared to 17.9 percent for Florida as a whole, Lafayette County is slightly "younger" than some counties in Florida.
- In every zip code in Lafayette County over 86 percent of the population is "non-elderly".
- Lafayette County has a slightly lower percentage (75.1) of white residents than Florida as a whole (75.4). At the same time, Lafayette County has a slightly higher percentage (16.5) of black residents than the state (15.6). The county does have lower percentages of individuals who identify themselves as Asian/Pacific Islander, but is higher than the state in classification of Other Race.
- 12.8 percent of Lafayette County residents identify themselves as Hispanic compared to 20.5 percent of all Florida residents.

Economic Characteristics

- Median and per capita incomes of Lafayette County residents are substantially lower than those of all Florida residents.
- No zip code area has a median household income or a per capita income that is higher than Florida.
- 33.3 percent of Lafayette County households have income less than \$25,000 compared to 23.3 percent for the state.
- While 7.0 percent of Florida households have incomes over \$150,000, only 3.1 percent of Lafayette County households have the same.
- 17.5 percent of persons in Lafayette County fall below the federal poverty threshold compared to 12.5 percent for the state. Lafayette County has a higher percentage of its children in poverty (25.3) than the state (17.6).
- Since 2002, the unemployment rate in Lafayette County has been lower than the state of Florida.
- Lafayette County has a slightly lower percentage of small businesses (fewer than 20 employees) than Florida as a whole.
- In Lafayette County, 61.7 percent of private business establishments are retail trade and service sector employers compared to 61.5 percent for Florida.

Educational Attainment

- Over 31 percent of Lafayette County residents (age 25 and older) have no high school diploma compared to slightly more than 20 percent for Florida as a whole.
- Only 11.5 percent of Lafayette County residents have achieved a college degree compared to 29.4 percent of all Florida residents.
- Since 2001-02, the high school graduation rate has been lower than the state of Florida.
- Lafayette County's drop-out rates have consistently been lower than the state since 2002-03.

Health Status

Introduction

This section of the assessment reviews the health status of Lafayette County residents. The primary focus of the health status assessment is a review of various mortality and hospitalization data. This in-depth assessment of the mortality and morbidity of Lafayette County residents will enable the community to identify specific health indicators resulting in early death or unnecessary hospitalization and implement programs that will improve the overall health of the community.

The Health Status section will detail various mortality data, hospitalization statistics (in lieu of any other readily available morbidity data sources) and birth indicator data. An analysis of Behavioral Risk Factor data and mental health status indicators will be presented as well.

Leading Causes of Death

Average Annual Crude Mortality Rates

Rates for All Residents

Average annual crude (i.e. Number of deaths) mortality rates are utilized to identify the major causes of death in the county. These rates assist providers and community leaders in healthcare delivery and policy in determining the medical service, prevention and education service needs of the community.

Since the 1950s, heart disease has been the leading cause of death in the nation and the state. Lafayette County, with an average of 20 heart disease deaths per year from 2001-2005, is no exception (Table 21). This equates to an age adjusted rate of 275.6 for heart disease deaths per 100,000 population during this time period. Within Lafayette County, 32013 (Day) has the highest crude mortality rate for heart disease, but they also have a lower population with only 1 average case reported. However, since crude rates cannot be used to compare geographic regions, due to discrepancies in age distribution, age-adjusted rates will be utilized later in this section.

Tables 21 and 22 compare Lafayette County with the state for annual crude mortality rates. All of Lafayette County's leading causes of death are presented. The rank of that cause of death for Lafayette is in parentheses. Lafayette County's top10 leading causes of death are the same as for the state of Florida, although in some cases they are ranked differently. For example, influenza/ pneumonia and suicide both rank as the seventh leading cause of death in Lafayette County though suicide is ninth for all of Florida.

November 2007

Rates by Race and Ethnicity

Table 23 shows crude mortality rates for 2000-2004 for white residents while Table 24 shows these rates for black residents. Because of the relatively small number of black and Hispanic residents in Lafayette County (as detailed in the Demographic and Socioeconomic Profile section), analysis of their crude rates should be done carefully and with perspective. The low numbers in the population translate to low numbers overall and even fewer deaths. These few numbers of deaths and relatively low populations yield crude rates which are subject to wide fluctuation on an annual basis. This could but not necessarily result in dramatic shifts in the leading causes of death for Hispanic residents from year-to-year in Lafayette County; attempts have been made to dampen this effect by utilizing a five-year average rate.

Because white residents make up the largest majority of Lafayette County's population, they drive the overall leading causes of death in Lafayette County. However, some causes of death, though they rank in the top 10, occur in a different order for white residents as compared to all residents. For whites, respiratory disease ranks 3 and stroke ranks 4, in comparison to all residents of Lafayette County, stroke ranks 3 and respiratory disease ranks 4.

For black residents, the picture is somewhat different. As seen in Table 24, diabetes is the fourth leading cause of death for black residents in Lafayette County compared to the sixth for white residents.

Table 21. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for all races for the top 10 leading causes of death in Lafayette County, 2001-2005.

Tot all faces for the top 10 leading causes of dealtr in Larayette County, 2001-2005.								
	La	fayette Coun	ty	Florida				
Cause of Death	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate		
All Causes	71.0	950.8	976.3	168,305.8	978.7	751.8		
Heart (1)	20.0	267.8	275.6	48,056.6	279.5	205.5		
Cancer (2)	17.0	227.7	226.1	39,353.6	228.9	175.8		
Stroke (3)	5.0	67.0	69.2	9,886.2	57.5	42.0		
Respiratory (4)	4.8	64.3	63.3	9,071.8	52.8	38.6		
Unintentional Injuries (5)	3.4	45.5	46.3	7,794.4	45.3	42.8		
MV Crashes	1.0	13.4	13.5	3,233.2	18.8	18.6		
Diabetes (6)	2.2	29.5	29.7	4,775.2	27.8	21.2		
Influenza & Pneumonia (7)	1.6	21.4	22.8	3,070.4	17.9	13.1		
Suicide (7)	1.6	21.4	21.8	2,319.6	13.5	12.8		
Alzheimer's (9)	1.4	18.7	20.4	4,176.4	24.3	17.0		
Nephritis (10)	1.2	16.1	17.0	2,282.8	13.3	9.8		

Numbers in parentheses (*) are the rank of that cause of death for Lafayette County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Table 22. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for all races for the top 10 leading causes of death in Lafayette County, 2001-2005.

population for all faces to	ine top ro		ses oi dealii	In Larayette County, 2001-2005.			
		All Causes	1	Heart (1)			
Cause of Death	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate	
32013 Day	2.6	4,482.8	3,588.0	1.0	1,724.1	1,110.4	
32066 Mayo	51.2	932.4	1,021.6	15.2	276.8	302.6	
Lafayette Zip Codes	53.8	969.5	1,049.9	16.2	291.9	315.6	
Lafayette County	71.0	950.8	976.3	20.0	267.8	275.6	
Florida	168,305.8	978.7	751.8	48,056.6	279.5	205.5	
		Cancer (2)			Stroke (3)		
Cause of Death	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate	
32013 Day	1.0	1,724.1	1,574.2	-	-	-	
32066 Mayo	11.4	207.6	225.0	3.6	65.6	71.9	
Lafayette Zip Codes	12.4	223.5	240.5	3.6	64.9	70.4	
Lafayette County	17.0	227.7	226.1	5.0	67.0	69.2	
Florida	39,353.6	228.9	175.8	9,886.2	57.5	42.0	
	1	Respiratory (4	!)	Unintentional Injuries (5)			
Cause of Death	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate	
32013 Day	0.2	344.8	440.2	-	-	-	
32066 Mayo	3.8	69.2	75.1	2.6	47.4	49.6	
Lafayette Zip Codes	4.0	72.1	77.4	2.6	46.9	48.9	
Lafayette County	4.8	64.3	63.3	3.4	45.5	46.3	
Florida	9,071.8	52.8	38.6	7,794.4	45.3	42.8	

Numbers in parentheses (*) are the rank of that cause of death for Lafayette County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005. Prepared by: WellFlorida Council, 2007.

Table 22 Cont. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for all races for the top 10 leading causes of death in Lafayette County, 2001-2005.

population for all races for				Lalayelle		
		MV Crashes			Diabetes (6)	_
Cause of Death	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
32013 Day	-	-	-	-	-	-
32066 Mayo	1.0	18.2	17.8	1.0	18.2	19.4
Lafayette Zip Codes	1.0	18.0	17.7	1.0	18.0	19.1
Lafayette County	1.0	13.4	13.5	2.2	29.5	29.7
Florida	3,233.2	18.8	18.6	4,775.2	27.8	21.2
	Influer	za & Pneumo	onia (7)		Suicide (7)	
Cause of Death	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
32013 Day	-	-	-	0.2	344.8	308.1
32066 Mayo	1.2	21.9	24.7	1.0	18.2	18.9
Lafayette Zip Codes	1.2	21.6	23.9	1.2	21.6	21.8
Lafayette County	1.6	21.4	22.8	1.6	21.4	21.8
Florida	3,070.4	17.9	13.1	2,319.6	13.5	12.8
	Alzhe	eimer's Disea	se (9)		Nephritis (10))
Cause of Death	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
32013 Day	-	-	-	-	-	-
32066 Mayo	0.8	14.6	16.5	1.0	18.2	20.8
Lafayette Zip Codes	0.8	14.4	16.0	1.0	18.0	20.2
Lafayette County	1.4	18.7	20.4	1.2	16.1	17.0
Florida	4,176.4	24.3	17.0	2,282.8	13.3	9.8

Table 23. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for white races for the top 10 leading causes of death in Lafayette County, 2001-2005.

2003.	La	afayette Cour	nty		Florida	
Cause of Death	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
All Causes	68.2	1,085.3	991.0	149,222.8	1,062.8	729.8
Heart (1)	19.6	311.9	282.7	43,346.0	308.7	200.2
Cancer (2)	16.2	257.8	228.0	35,414.6	252.2	174.3
Respiratory (3)	4.8	76.4	65.8	8,581.4	61.1	39.6
Stroke (4)	4.6	73.2	66.5	8,571.6	61.0	39.1
Unintentional Injuries (5)	3.4	54.1	53.8	6,815.8	48.5	44.9
MV Crashes	1.0	15.9	16.8	2,713.0	19.3	19.1
Diabetes (6)	2.0	31.8	28.1	3,866.6	27.5	18.7
Influenza & Pneumonia (7)	1.6	25.5	23.6	2,762.6	19.7	12.7
Suicide (7)	1.6	25.5	25.3	2,177.0	15.5	14.4
Alzheimer's (9)	1.4	22.3	21.0	3,961.6	28.2	17.2
Nephritis (10)	1.2	19.1	17.5	1,884.6	13.4	8.7

Table 24. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for black races for the top 10 leading causes of death in Lafayette County, 2001-2005.

	ı	_afayette Count	ty	Florida			
Cause of Death	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate	
All Causes	2.8	254.4	1,081.3	17,881.2	657.6	978.4	
Cancer (1)	0.8	72.7	411.0	3,644.4	134.0	202.5	
Heart (2)	0.4	36.3	188.6	4,445.2	163.5	267.0	
Stroke (3)	0.4	36.3	44.6	1,224.8	45.0	75.1	
Diabetes (4)	0.2	18.2	91.7	860.4	31.6	49.7	

Numbers in parentheses (*) are the rank of that cause of death for Lafayette County. Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005. Prepared by: WellFlorida Council, 2007.

Table 25. Average number of Hispanic deaths and crude mortality rates per 100,000 population. Lafavette County and Florida 2001-2005.

population, Euroyetto Gearity and T	Lafayette		Florida		
Cause of Death	Average Number Crude Rate		Average Number	Crude Rate	
All Causes	1.0	136.8	15,646.2	510.7	
Cancer (1)	0.2	27.4	3,367.0	109.9	
Heart (1)	0.2	27.4	4,732.4	154.5	
Unintentional Injuries (1)	0.2	27.4	1,015.0	33.1	
Suicide (1)	0.2	27.4	214.0	7.0	

Age-Adjusted Mortality Rates

To further explore the health status of Lafayette County residents, age-adjusted mortality rates are used to compare Lafayette County to Florida. In order to compare accurately mortality rates between differing geographic areas, adjustments must be made to account for the differences in age-group distributions between populations. This is called "age-adjusting" a mortality rate. The age-group distribution of a "standard" population is used for this purpose. The standard population for purposes of this study is the 2000 U.S. Population.

Age-adjusted rates are those rates that would have been observed if the age distribution of the areas being compared were the same as that of the standard 2000 U.S. Population. Basically, age-adjusted rates represent a summary or indicator rate by cause of death and permit an unbiased comparison regardless in difference in age distribution of populations being compared.

Rates for All Residents

Table 21 presents an examination of the age-adjusted mortality rate for the 10 leading causes of death in Lafayette County for 2001-2005 compared to Florida. This table also shows that Lafayette County exceeds the state's age-adjusted mortality rate in 9 out of the top 10 causes of death. This remains true for the majority of zip codes within the county.

In 32013 (Day), there were no deaths attributable to strokes, unintentional injuries, motor vehicle crashes, Influenza/Pneumonia, Diabetes, Alzheimer's Disease and Nephritis, therefore, in all other cases it falls below the state rate. In 32066 (Mayo) the rates for motor vehicle crash deaths, Diabetes, and Alzheimer's Disease deaths have been lower than the state rates.

The greatest disparity in age-adjusted death rates between Lafayette County and Florida is for respiratory disease.

Rates by Race and Ethnicity

Because white residents make up the majority of Lafayette County's population, they drive the age-adjusted mortality rates in Lafayette County much as they do the crude rates. As such, Figure 10 demonstrates a similar situation for white residents as for all residents in Figure 9. The unfavorable comparison with the state of white resident age-adjusted death rates for leading causes of death is reflected in the poor overall rates for all residents. Trends in the white population's age-adjusted mortality rates therefore closely resemble those for the total population.

There are some differences with respect to the black population. Like the crude rate, smaller population numbers can affect age-adjusted mortality rates and since black residents represent a smaller percentage of the population, analysis of their age-adjusted death rates should be done carefully and with perspective. Given that the black population is smaller than the white population, there may be a wider fluctuation of death rates for specific causes on an annual basis. However, it should be noted that attempts have been made to dampen this effect by utilizing a five-year average rate.

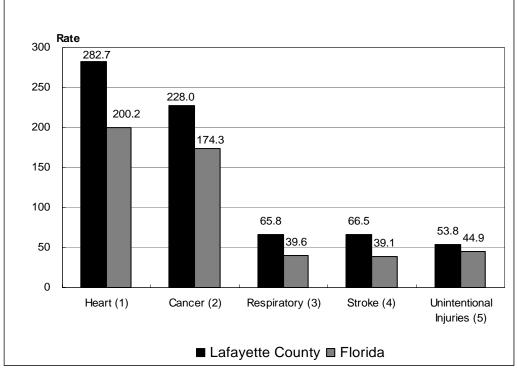
It should be noted that age-adjusted death rates are not calculated for the Hispanic population because the age-specific population estimates needed to calculate an age-adjusted death rate are not available for the study period of 2001 to 2005.

In Lafayette County, the rate of heart disease and cancer is higher for black residents than for white residents. Other cause, which ranked in the top four, and for which blacks have a higher age-adjusted rate compared to whites includes diabetes. While stroke were ranked in the top four for age-adjusted deaths, the rate was much lower in comparison to their white counterparts within the county.

Rate 300 275.6 250 226.1 205.5 200 175.8 150 100 69.2 63.3 46.3 42.8 42.0 38.6 50 Heart (1) Cancer (2) Stroke (3) Respiratory (4) Unintentional Injuries (5) ■ Lafayette County ■ Florida

Figure 9. Age adjusted mortality rates per 100,000 population for all races for top 5 leading causes of death, Lafayette County and Florida, 2001-2005.

Figure 10. Age adjusted mortality rates per 100,000 population for whites for top 5 leading causes of death, Lafayette County and Florida, 2001-2005.



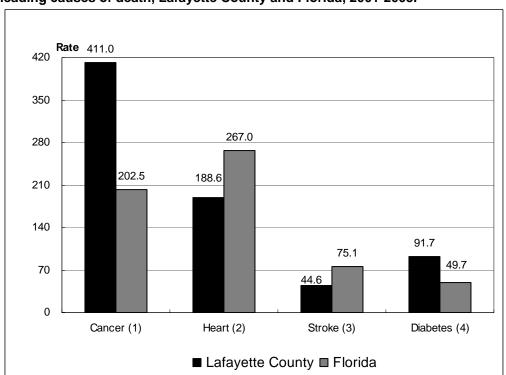


Figure 11. Age adjusted mortality rates per 100,000 population for blacks for top 5 leading causes of death, Lafayette County and Florida, 2001-2005.

Health Disparities

Figure 12 through Figure 16 gives us a glimpse at the health disparities that exist in Lafayette County as they do throughout Florida and the United States. While racial disparities in Lafayette County are similar to those observed at the state level, the actual proportions of the disparities tend to differ.

Figure 12 compares the age-adjusted heart disease mortality rates for white and black residents in Lafayette County and for Florida. The rates for blacks in Lafayette County are lower than the rates for their counterparts at the state level. The disparity between whites and blacks within Lafayette County is very high.

Age-adjusted death rates for cancer follow an opposite pattern (Figure 13). While both the white and black residents of Lafayette County fair poorly than their counterparts throughout the state in terms of age-adjusted cancer death rates, the disparity gap is extremely significant in Lafayette County between white and black residents. The rate for blacks is over two times higher than that of their counterparts statewide.

As seen in Figure 14, stroke age-adjusted mortality rates for white residents in Lafayette County are almost double the rates for whites in Florida. At the same time, within Lafayette County, black residents are almost two times lower than that of their counterparts on a state level.

The disparity gaps in respiratory disease and unintentional age-adjusted mortality rates (Figures 15 and 16) are unique in that no deaths were reported in either condition for black residents.

Rate

282.7

267.0

250

188.6

200.2

100

Lafayette County

Florida

White ■ Black

Figure 12. Heart disease age adjusted mortality rate per 100,000 population by race, Lafayette County and Florida, 2001-2005.

Rate 411.0

280
210
140
70
Lafayette County Florida

White ■ Black

Figure 13. Cancer age adjusted mortality rate per 100,000 population by race Lafayette County and Florida, 2001-2005.

Figure 14. Stroke age adjusted mortality rate per 100,000 population by race, Lafayette County and Florida, 2001-2005.

Figure 15. Respiratory disease age adjusted mortality rate per 100,000 population by race, Lafayette County and Florida, 2001-2005.

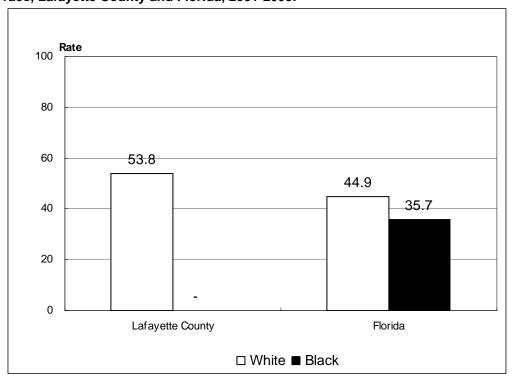


Figure 16. Unintentional injuries age adjusted mortality rate per 100,000 population by race, Lafayette County and Florida, 2001-2005.

Trends

Table 26 and Figures 17 through 22 detail trends since 1997 in the top 5 causes of death in Lafayette County. Table 27 shows that since 1997 the overall age-adjusted mortality rate for Lafayette County has for the majority decreased during this time frame. This is in spite of the fact that the rates for some of the specific causes of death for Lafayette County have gone down over the past ten years, while others have increased.

As seen in Figure 17, Lafayette's age-adjusted heart disease mortality rate is substantially higher than Florida. While the rate for Lafayette County has decreased over the past decade it has done so to a lesser extent than the state rate.

Figure 18 illustrates the age-adjusted cancer mortality rate for Lafayette County and the state. In this case, the rate for Lafayette County has increased by a larger measure in Lafayette County than in Florida.

Figure 19 shows a moderate increase for the stroke age adjusted death rate. While the age-adjusted stroke death rate has slightly decreased in the state of Florida over the past decade, it has remained fairly consistent in Lafayette County since an initial increase in 1997-2001, from 42.1 per 100,000 during the period, to 71.7 per 100,000 during the 1999-2003 years. In this case, the rate for Lafayette County is almost double the rate for Florida.

The age-adjusted respiratory disease death rate is illustrated in Figure 20. While Lafayette is significantly higher than the state, the rate has remained fairly consistent. A slight decrease has been noted from 2001-2005.

The age-adjusted unintentional injury mortality rate has been increasing in Lafayette County for the last 10 years (Figure 21). Although a decline was noted during 1999-2003, the trend continued to fluctuate from high to low during each evaluated time frame. The rate in Florida is lower and it has been increasing at a much slower pace.

The age-adjusted motor vehicle crash mortality rate (Figure 22) is declining much more precipitously in Lafayette County than at the state level. .

Table 26. Age adjusted morality rate per 100,000 population for all races for the top 5 leading causes of death in Lafavette County. 1997-2005.

Cause	1997-2		1998-2002		1999-2	2003	2000-2	2004	2001-2	2005
Death	Lafayette County	Florida								
All Causes	919.4	803.7	987.2	794.3	964.4	784.3	1,019.0	766.2	976.3	751.8
Heart (1)	302.3	243.6	320.3	235.8	285.1	226.9	284.6	215.3	275.6	205.5
Cancer (2)	193.4	190.3	203.6	186.1	207.7	182.6	234.9	178.9	226.1	175.8
Stroke (3)	42.1	49.3	52.3	48.1	71.7	46.6	72.0	44.2	69.2	42.0
Respiratory (4)	65.0	40.7	66.7	40.5	64.7	40.2	67.9	38.9	63.3	38.6
Unintentional Injuries (5)	47.8	36.9	51.3	38.2	43.6	39.8	52.7	41.3	46.3	42.8
MV Crashes	18.5	17.1	18.2	17.2	14.9	17.3	13.9	18.0	13.5	18.6

Rates in trend tables and graphs may differ slightly from those displayed earlier in the section as these populations estimates come from different sources and influence the calculation of the rates.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Rate 360 340 320 300 280 260 240 220 200 1997-2001 1998-2002 1999-2003 2000-2004 2001-2005 — Lafayette County — Florida

Figure 17. Heart disease age adjusted mortality rate per 100,000 population for all races, 1997-2005.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

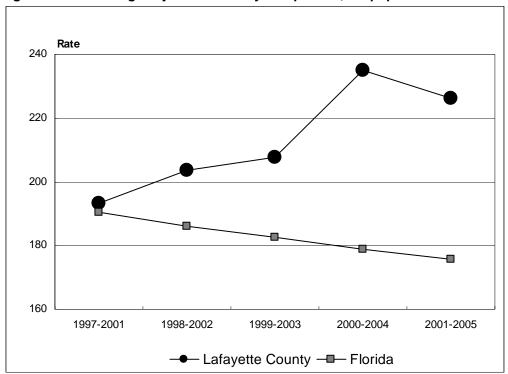


Figure 18. Cancer age adjusted mortality rate per 100,000 population for all races, 1997-2005.

Rate

60

40

1997-2001 1998-2002 1999-2003 2000-2004 2001-2005

— Lafayette County — Florida

Figure 19. Stroke age adjusted mortality rate per 100,000 population for all races, 1997-2005.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Rate

60

40

20

1997-2001 1998-2002 1999-2003 2000-2004 2001-2005

— Lafayette County — Florida

Figure 20. Respiratory disease age adjusted mortality rate per 100,000 population for all races, 1997-2005.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Rate

60

40

20

1997-2001 1998-2002 1999-2003 2000-2004 2001-2005

— Lafayette County — Florida

Figure 21. Unintentional injuries age adjusted mortality rate per 100,000 population for all races, 1997-2005.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Rate

25

10

1997-2001 1998-2002 1999-2003 2000-2004 2001-2005

— Lafayette County — Florida

Figure 22. Motor vehicle crashes age adjusted mortality rate per 100,000 population for all races, 1997-2005.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Hospitalization

Tables 27 through 38 provide a glimpse at the major causes of hospitalization for various populations within Lafayette County. Table 27 summarizes the top 5 causes of hospitalization for the following populations in Lafayette County:

- All residents
- Females
- Males
- Black residents
- White residents
- Age 0-17
- Age 18-64, and
- Age 65 and older.

As seen in Table 27, the leading cause of hospitalization in Lafayette County between 2004 and 2006 was for being a normal newborn. In this time period, there were 187 normal newborn hospitalizations of Lafayette County residents (Table 28). Vaginal delivery without complicating diagnosis followed by simple pneumonia and pleurisy make up the second and third leading causes of hospitalization for all residents. Heart failure/shock and caesarian section without CC account for the fourth and fifth causes to round out the top five.

Table 27 demonstrates a pattern that is seen in much of the other health status data. Because white residents make up such a large percentage of the total population, 4 of the 5 leading reasons for hospitalization among white residents mirrors the top 5 for all residents exactly.

The analysis of leading causes of hospitalization yields some interesting insights. Of course, for children age 0-17 their overwhelmingly leading cause of hospitalization is being born (i.e. normal newborn). However, neonate with other problems and nutritional/miscellaneous metabolic disorders is their second and third leading causes, followed by Bronchitis/Asthma and Prematurity without complications round out the top five.

Interestingly, psychoses and GI hemorrhage with CC are in the top five for black residents, but not in either white or Hispanic populations. Persons age 65 and older were hospitalized for heart failure and shock most often. They were also the only group that had Cardiac Arrhythmia and Conduction Disorders with complications/co-morbid conditions.

Tables 29-38 also show some of the impact of these leading causes of hospitalization by showing comparisons among gender, race and ethnicity. Table 38 shows the hospitalizations by zip code of resident. Interestingly Mayo (32066) was the only zip code in which Chronic Obstructive Pulmonary Disease ranked in the top 5 hospitalizations compared to the surrounding areas.

Table 27. Top 5 leading causes of hospitalizations for various Lafayette County resident populations, calendar year 2004-2006.

Population	ear 2004-2006. 1st	2nd	3rd	4th	5th
i opulation	151	-		401	Jui
All Residents	Normal Newborn	Vaginal Delivery without complicating diagnosis	Simple Pneumonia and Pleurisy, Age > 17 with CC	Heart Failure and Shock	Cesarean Section without CC
Females	Vaginal Delivery without complicating diagnosis	Normal Newborn	Cesarean Section without CC	Simple Pneumonia and Pleurisy, Age > 17 with CC	Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC
Males	Normal Newborn	Simple Pneumonia and Pleurisy, Age > 17 with CC	Chronic Obstructive Pulmonary Disease	Heart Failure and Shock	Psychoses
Black	Normal Newborn	Vaginal Delivery without complicating diagnosis	Psychoses	GI Hemorrhage with CC	Cesarean Section without CC
White	Normal Newborn	Vaginal Delivery without complicating diagnosis	Simple Pneumonia and Pleurisy, Age > 17 with CC	Heart Failure and Shock	Chronic Obstructive Pulmonary Disease
0-17	Normal Newborn	Neonate with other significant problems	Nutritional and Miscellaneous Metabolic Disorders, Age 0- 17	Bronchitis and Asthma	Prematurity without Major Problems
18 - 64	Vaginal Delivery without complicating diagnosis	Cesarean Section without CC	Psychoses	Simple Pneumonia and Pleurisy, Age > 17 with CC	Chest Pain
65+	Heart Failure and Shock	Simple Pneumonia and Pleurisy, Age > 17 with CC	Chronic Obstructive Pulmonary Disease	Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC	Kidney and Urinary Tract Infections, Age> 17 with CC
Hispanics	Vaginal Delivery without complicating diagnosis	Normal Newborn	Neonate with other significant problems	Bronchitis and Asthma	Cesarean Section without CC
Non- Hispanics	Normal Newborn	Vaginal Delivery without complicating diagnosis	Simple Pneumonia and Pleurisy, Age > 17 with CC	Heart Failure and Shock	Chronic Obstructive Pulmonary Disease

Table 28. Hospital discharges for all Lafayette County residents by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

nospitalizations, calendar year 2004-2006.										
DRG	20	04	20	05	20	06	2004-	-2006		
DKG	Number	Percent	Number	Percent	Number	Percent	Number	Percent		
Normal Newborn (391)	53	6.5	78	9.1	56	7.0	187	7.6		
Vaginal Delivery without complicating diagnosis (373)	47	5.7	60	7.0	40	5.0	147	5.9		
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	31	3.8	28	3.3	23	2.9	82	3.3		
Heart Failure and Shock (127)	15	1.8	30	3.5	26	3.2	71	2.9		
Cesarean Section without CC (371)	22	2.7	26	3.0	22	2.7	70	2.8		
Chronic Obstructive Pulmonary Disease (088) Esophagitis, Gastroenteritis	24	2.9	30	3.5	13	1.6	67	2.7		
and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	19	2.3	20	2.3	21	2.6	60	2.4		
Psychoses (430)	16	2.0	19	2.2	15	1.9	50	2.0		
Chest Pain (143)	15	1.8	13	1.5	18	2.2	46	1.9		
Neonate with other significant problems (390)	15	1.8	10	1.2	10	1.2	35	1.4		
Kidney and Urinary Tract Infections, Age > 17 with CC (320)	13	1.6	7	0.8	14	1.7	34	1.4		
Nutritional and Miscellaneous Metabolic Disorders, Age 0-17 (298)	17	2.1	9	1.1	7	0.9	33	1.3		
Bronchitis and Asthma, Age 0-17 (098)	13	1.6	13	1.5	5	0.6	31	1.3		
GI Hemorrhage with CC (174)	11	1.3	9	1.1	9	1.1	29	1.2		
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 without CC (183)	8	1.0	12	1.4	7	0.9	27	1.1		
All Others	500	61.1	490	57.4	515	64.3	1505	60.8		
Total	819	100.0	854	100.0	801	100.0	2,474	100.0		

Table 29. Hospital discharges for female Lafayette County residents by top 10 leading reasons of hospitalizations, calendar year 2004-2006.

or nospitalizations, caler	20		20	05	20	06	2004-	2006
DRG								
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Vaginal Delivery without complicating diagnosis (373)	47	9.4	60	11.5	40	8.0	147	9.7
Normal Newborn (391)	20	4.0	40	7.7	32	6.4	92	6.0
Cesarean Section without CC (371)	22	4.4	26	5.0	22	4.4	70	4.6
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	18	3.6	11	2.1	14	2.8	43	2.8
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age >								
17 with CC (182)	13	2.6	14	2.7	16	3.2	43	2.8
Heart Failure and Shock (127)	12	2.4	15	2.9	15	3.0	42	2.8
Chronic Obstructive Pulmonary Disease (088)	13	2.6	11	2.1	10	2.0	34	2.2
Chest Pain (143)	12	2.4	9	1.7	11	2.2	32	2.1
Kidney and Urinary Tract Infections, Age> 17 with CC (320)	10	2.0	7	1.3	14	2.8	31	2.0
(320)	10	2.0	,	1.0	17	2.0	31	2.0
Psychoses (430)	8	1.6	11	2.1	7	1.4	26	1.7
All Others	327	65.1	316	60.8	318	63.7	961	63.2
Total	502	100.0	520	100.0	499	100.0	1521	100.0

Table 30. Hospital discharges for male Lafayette County residents by top 10 leading reasons of hospitalizations, calendar year 2004-2006.

of nospitalizations, calendar year 2004-2006.										
DRG	20	04	20	05	20	06	2004-	2006		
DIG	Number	Percent	Number	Percent	Number	Percent	Number	Percent		
Normal Newborn (391)	33	10.4	38	11.4	24	7.9	95	10.0		
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	13	4.1	17	5.1	9	3.0	39	4.1		
Chronic Obstructive Pulmonary Disease (088)	11	3.5	19	5.7	3	1.0	33	3.5		
Heart Failure and Shock (127)	3	0.9	15	4.5	11	3.6	29	3.0		
Psychoses (430)	8	2.5	8	2.4	8	2.6	24	2.5		
Bronchitis and Asthma, Age 0-17 (098)	11	3.5	5	1.5	4	1.3	20	2.1		
Neonate with other significant problems (390)	8	2.5	6	1.8	5	1.7	19	2.0		
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	6	1.9	6	1.8	5	1.7	17	1.8		
GI Hemorrhage with CC (174)	6	1.9	6	1.8	4	1.3	16	1.7		
Nutritional and Miscellaneous Metabolic Disorders, Age 0-17 (298)	7	2.2	5	1.5	4	1.3	16	1.7		
All Others	211	66.6	209	62.6	225	74.5	645	67.7		
Total	317	100.0	334	100.0	302	100.0	953	100.0		

Table 31. Hospital discharges for white race Lafayette County residents by top 11 leading reasons of hospitalizations, calendar year 2004-2006.

reasons of nospitalizatio	,	, , , , , , , , , , , , , , , , , , ,						
DRG	20	04	20	05	20	06	2004-2006	
DRG	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	46	6.3	70	9.1	51	6.9	167	7.5
Vaginal Delivery without complicating diagnosis (373)	41	5.6	53	6.9	35	4.8	129	5.8
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	31	4.2	27	3.5	23	3.1	81	3.6
Heart Failure and Shock (127)	14	1.9	28	3.6	23	3.1	65	2.9
Chronic Obstructive Pulmonary Disease (088)	23	3.1	28	3.6	13	1.8	64	2.9
Cesarean Section without CC (371)	19	2.6	23	3.0	19	2.6	61	2.7
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	17	2.3	19	2.5	19	2.6	55	2.5
Chest Pain (143)	15	2.0	13	1.7	15	2.0	43	1.9
Psychoses (430)	13	1.8	15	1.9	12	1.6	40	1.8
Nutritional and Miscellaneous Metabolic Disorders, Age 0-17 (298)	14	1.9	8	1.0	7	1.0	29	1.3
Neonate with other significant problems (390)	12	1.6	8	1.0	9	1.2	29	1.3
All Others	487	66.5	481	62.2	509	69.3	1477	65.9
Total	732	100.0	773	100.0	735	100.0	2240	100.0

Table 32. Hospital discharges for black race Lafayette County residents by top 10 leading reasons of hospitalizations, calendar year 2004-2006.

Teasons of nospitalizations, calcinal year 2004-2000.										
DRG	20	04	20	05	20	06	2004-	-2006		
DKG	Number	Percent	Number	Percent	Number	Percent	Number	Percent		
Normal Newborn (391)	7	8.5	8	10.8	5	9.1	20	9.5		
Vaginal Delivery without complicating diagnosis (373)	6	7.3	7	9.5	4	7.3	17	8.1		
Psychoses (430)	2	2.4	4	5.4	3	5.5	9	4.3		
GI Hemorrhage with CC (174)	2	2.4	5	6.8	1	1.8	8	3.8		
Cesarean Section without CC (371)	2	2.4	3	4.1	3	5.5	8	3.8		
Heart Failure and Shock (127)	1	1.2	2	2.7	3	5.5	6	2.8		
Neonate with other significant problems (390)	3	3.7	2	2.7	1	1.8	6	2.8		
GI Hemorrhage without CC (175)	5	6.1	0	-	0	-	5	2.4		
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	2	2.4	1	1.4	2	3.6	5	2.4		
Neonates, Died or Transferred to Another Acute Care Facility (385)	1	1.2	3	4.1	1	1.8	5	2.4		
All Others	51	62.2	39	52.7	32	58.2	122	57.8		
Total	82	100.0	74	100.0	55	100.0	211	100.0		

Table 33. Hospital discharges for Lafayette County residents (0-17 years of age) by top 10 leading reasons of hospitalizations, calendar year 2004-2006.

leading reasons of hospitalizations, calendar year 2004-2000.										
DRG	20	04	20	05	20	06	2004-	-2006		
DIG	Number	Percent	Number	Percent	Number	Percent	Number	Percent		
Normal Newborn (391)	53	32.3	78	42.2	56	38.4	187	37.8		
Neonate with other significant problems (390)	15	9.1	10	5.4	10	6.8	35	7.1		
Nutritional and Miscellaneous Metabolic Disorders, Age 0-17 (298)	17	10.4	9	4.9	7	4.8	33	6.7		
Bronchitis and Asthma (098)	13	7.9	13	7.0	5	3.4	31	6.3		
Prematurity without Major Problems (388)	7	4.3	7	3.8	4	2.7	18	3.6		
Viral Illness and Fever of Unknown Origin, age 0-17 (422)	5	3.0	7	3.8	3	2.1	15	3.0		
Simple Pneumonia and Pleurisy, Age 0-17 (091)	4	2.4	7	3.8	3	2.1	14	2.8		
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age 0- 17 (184)	4	2.4	2	1.1	4	2.7	10	2.0		
Full Term Neonate with Major Problems (389)	4	2.4	1	0.5	5	3.4	10	2.0		
Depressive Neuroses (426)	3	1.8	2	1.1	4	2.7	9	1.8		
All Others	39	23.8	49	26.5	45	30.8	133	26.9		
Total	164	100.0	185	100.0	146	100.0	495	100.0		

Table 34. Hospital discharges for Lafayette County residents (18-64 years of age) by top 10 leading reasons of hospitalizations, calendar year 2004-2006.

leading reasons of hospitalizations, calendar year 2004-2006.										
DRG	2004		20	05	20	06	2004-2006			
DICO	Number	Percent	Number	Percent	Number	Percent	Number	Percent		
Vaginal Delivery without complicating diagnosis (373)	47	13.2	56	14.2	38	10.0	141	12.5		
Cesarean Section without CC (371)	21	5.9	25	6.4	22	5.8	68	6.0		
Psychoses (430)	15	4.2	16	4.1	10	2.6	41	3.6		
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	12	3.4	13	3.3	9	2.4	34	3.0		
Chest Pain (143)	9	2.5	10	2.5	10	2.6	29	2.6		
Chronic Obstructive Pulmonary Disease (088)	9	2.5	5	1.3	10	2.6	24	2.1		
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	10	2.8	7	1.8	7	1.8	24	2.1		
Heart Failure and Shock (127)	4	1.1	8	2.0	10	2.6	22	2.0		
Uterine and Adnexa Procedures for Nonmalignancy without CC (359)	7	2.0	6	1.5	8	2.1	21	1.9		
Vaginal Delivery with Sterilization and/or D and C (374)	7	2.0	9	2.3	3	0.8	19	1.7		
All Others	215	60.4	238	60.6	252	66.5	705	62.5		
Total	356	100.0	393	100.0	379	100.0	1128	100.0		

Table 35. Hospital discharges for Lafayette County residents (65 years of age and older) by top 11 leading reasons of hospitalizations, calendar year 2004-2006.

top 11 leading reasons of nospitalizations, calendar year 2004-2006.									
DRG	2004		20	05	2006		2004-2006		
DKG	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
Heart Failure and Shock (127)	11	3.7	22	8.0	16	5.8	49	5.8	
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	19	6.4	15	5.4	14	5.1	48	5.6	
Chronic Obstructive Pulmonary Disease (088)	15	5.0	25	9.1	3	1.1	43	5.1	
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	9	3.0	13	4.7	14	5.1	36	4.2	
Kidney and Urinary Tract Infections, Age> 17 with CC (320)	11	3.7	6	2.2	10	3.6	27	3.2	
Septicemia, Age > 17 (416)	6	2.0	5	1.8	8	2.9	19	2.2	
GI Hemorrhage with CC (174)	9	3.0	4	1.4	5	1.8	18	2.1	
Chest Pain (143)	6	2.0	3	1.1	8	2.9	17	2.0	
Major Joint and Limb Reattachment Procedures of Lower Extremity (209)	10	3.3	6	2.2	0	-	16	1.9	
Circulatory Disorders with Acute Myocardial Infarction and Major Complications, Discharged Alive (121)	5	1.7	5	1.8	5	1.8	15	1.8	
Cardiac Arrhythmia and Conduction Disorders with CC (138)	3	1.0	6	2.2	6	2.2	15	1.8	
All Others	195	65.2	166	60.1	187	67.8	548	64.4	
Total	299	100.0	276	100.0	276	100.0	851	100.0	

Table 36. Hospital discharges for Hispanic Lafayette County residents by top 5 leading reasons of hospitalizations, calendar year 2004-2006.

reasons of hospitalizations, calendar year 2004-2000.									
DRG	2004		20	05	2006		2004-2006		
DRG	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
Vaginal Delivery without complicating diagnosis (373)	7	21.2	7	33.3	6	15.8	20	21.7	
Normal Newborn (391)	7	21.2	5	23.8	7	18.4	19	20.7	
Neonate with other significant problems (390)	2	6.1	2	9.5	4	10.5	8	8.7	
Bronchitis and Asthma (098)	6	18.2	0	,	1	2.6	7	7.6	
Cesarean Section without CC (371)	2	6.1	0	-	4	10.5	6	6.5	
All Others	9	27.3	7	33.3	16	42.1	32	34.8	
Total	33	100.0	21	100.0	38	100.0	92	100.0	

Table 37. Hospital discharges for Non-Hispanic Lafayette County residents by top 10 leading reasons of hospitalizations, calendar year 2004-2006.

Todoono of Hoopitanzano	,	,		<u> </u>				
DRG	20	04	2005		2006		2004-2006	
DRG	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	46	5.9	73	8.8	49	6.4	168	7.1
Vaginal Delivery without complicating diagnosis (373)	40	5.1	53	6.4	34	4.5	127	5.3
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	31	3.9	28	3.4	23	3.0	82	3.4
Heart Failure and Shock (127)	15	1.9	30	3.6	26	3.4	71	3.0
Chronic Obstructive Pulmonary Disease (088)	24	3.1	30	3.6	13	1.7	67	2.8
Cesarean Section without CC (371)	20	2.5	26	3.1	18	2.4	64	2.7
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	19	2.4	20	2.4	20	2.6	59	2.5
Psychoses (430)	15	1.9	19	2.3	15	2.0	49	2.1
Chest Pain (143)	15	1.9	13	1.6	18	2.4	46	1.9
Kidney and Urinary Tract Infections, Age > 17 with CC (320)	13	1.7	7	0.8	14	1.8	34	1.4
All Others	548	69.7	534	64.1	533	69.9	1615	67.8
Total	786	100.0	833	100.0	763	100.0	2382	100.0

Table 38. Hospital discharges for all Lafayette County residents by zipcode for top 5 leading reasons of hospitalizations, calendar year 2004-2006.

	1100pitalizationo, o				
Zip Code	1st	2nd	3rd	4th	5th
32013 Day	Normal Newborn (391)	Heart Failure and Shock (127)	Cesarean Section without CC (371)	Age > 17 with	nia and Pleurisy, CC (089) and ses (430)
32066 Mayo	Normal Newborn (391)	Vaginal Delivery without complicating diagnosis (373)	Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	Chronic Obstructive Pulmonary Disease (088)	Heart Failure and Shock (127)
Lafayette Zip Codes	Normal Newborn (391)	Vaginal Delivery without complicating diagnosis (373)	Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	Heart Failure and Shock (127)	Cesarean Section without CC (371)
Lafayette County	Normal Newborn (391)	Vaginal Delivery without complicating diagnosis (373)	Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	Heart Failure and Shock (127)	Cesarean Section without CC (371)

Birth Indicators

Birth outcome indicators are a critical measure of a society and a community's health status. Unfortunately, Florida's birth outcome indicators in the last decade have consistently ranked in the bottom half of the nation according to the *National Kids Count Data Book* prepared by the Annie E. Casey Foundation.

Overall, these rankings remain poor for Florida but progress has been made. Substantial progress has been seen in these indicators in Lafayette County as well though work remains to be done, especially in the disparity of outcome between races and ethnicities.

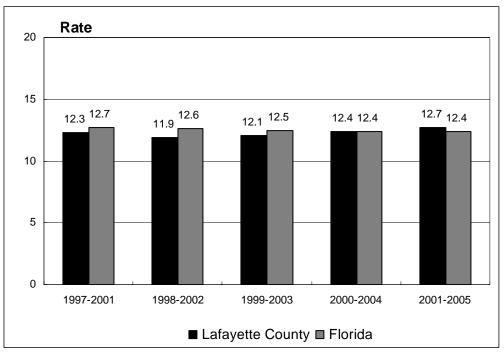
Birth Rates

Figure 23 shows that between 1997 and 2003, Lafayette County's birth rate was lower than the state as a whole. When evaluating the time frame from 2000-2004 the county was equal to the state rate, but from 2001-2005 the county was slightly higher than the state. This is to be expected in a county with a smaller population of non-elderly citizens who are beyond the traditional age of childbearing.

In Table 39 it can be seen that while the birth rate for whites in Lafayette County has been higher than the birth rates for whites at the state level. The rates for blacks have been consistently lower than for blacks at the state level.

Figure 23 and Table 39 shows that birth rates in Lafayette County have remained fairly steady. Table 40 shows that like its Hispanic population in general, the number of Hispanic births in Lafayette County has increased.

Figure 23. Birth rates per 1,000 total population for all races, Lafayette County and Florida, 1997-2005.



Rates are per 1,000 total population. Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005. Prepared by: WellFlorida Council, 2007.

Table 39. Birth rates per 1,000 population, by race, Lafayette County and Florida, 1997-2005.

	All Races									
Area	1997-2001		1998-20	02	1999-2003		2000-2004		2001-2005	
	Number	Rate								
Lafayette										
County	419	12.3	414	11.9	429	12.1	452	12.4	475	12.7
Florida	994,661	12.7	1,007,937	12.6	1,024,616	12.5	1,045,603	12.4	1,067,751	12.4
					White R	aces				
Area	1997-2001		1998-20	02	1999-2003		2000-2004		2001-2005	
	Number	Rate								
Lafayette County	373	12.8	374	12.7	395	13.2	416	13.6	437	13.9
Florida	737,702	11.4	746,062	11.3	757,596	11.3	771,345	11.2	622,135	8.9
					Black R	aces				
Area	1997-2	001	1998-20	02	1999-2003		2000-2004		2001-2005	
	Number	Rate								
Lafayette										
County	43	9.0	37	7.5	33	6.5	35	6.5	37	6.7
Florida	227,164	18.8	229,807	18.5	232,607	18.2	234,562	17.9	235,262	17.3

Rates are per 1,000 total population.
Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.
Prepared by: WellFlorida Council, 2007.

Table 40. Hispanic birth rates per 1,000 population, Lafayette County and Florida, 1997-2005.

Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
Alea	Number	Rate								
Lafayette County	55	1.6	56	1.6	67	1.9	66	1.8	69	1.8
Florida	213,799	2.7	228,069	2.8	243,402	3.0	260,448	3.1	278,365	3.2

Rates are per 1,000 total population.
Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Early Access to Prenatal Care

During the 1990s, Florida experience several improvements on measures that reflect the status of maternal and child health, including reductions to the births to mothers who regularly smoked, repeat births to teenagers and births to women who received no or late prenatal care. The proportion of births to mothers who received late or not prenatal care was cut in half from 7.0 percent in 1990 to 3.5 percent in 1998. During this time, substantial gains were also made in the percentage of mothers who received early access to prenatal care (defined as care in their first trimester).

Table 41 shows that a smaller percentage of overall births in Lafayette County had access to prenatal care between 1997-2005. Moreover, the percentage decreased from 79.7 percent in the 1997-2001 periods to 78.7 percent during the 2001-2005 period. When examined by race, it can be seen that for whites in Lafayette County, the percentage of births with access to prenatal care has declined from 79.4 percent to 78.5 percent over the past decade. While the percentage of black births with access to prenatal care has remained higher than the state, the percentage for black county residents decreased from 86.1 percent to 83.8 percent from 1997 to 2005.

Figure 24 shows that while early access to prenatal care has been fairly stable in Lafayette County as well as Florida over the last decade, both the county and the state have substantial improvements to make in the forthcoming years.

Just as concerning is the disparity depicted in Table 42 and Figure 25 between Hispanic moms who had access to prenatal care in Lafayette County and Florida. While the percent of Hispanic moms in Florida who are able to gain access to prenatal care is close to the percentage for all races from year to year, the percent for Hispanics in Lafayette County is substantially less. During the period of 2001-2005 only 56.5 percent of Hispanic moms were able to get early access to prenatal care. This is however a small decrease from the previous year.

Table 41. Percent of births with early access to care by race, Lafayette County and Florida, 1997-2005.

Tubic +1.	1 CIOCITE O	ercent of births with early access to care by face, Larayette County and Florida, 1997-2005.								
					All R	aces				
Area	1997-	2001	1998-	2002	1999-	2003	2000-	2004	2001-	2005
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Lafayette	334	79.7	331	80.0	340	79.3	360	79.7	374	78.7
Florida	825,719	83.0	839,620	83.3	857,515	83.7	850,600	81.3	840,057	79.3
					White	Races				
Area	1997-	2001	1998-	2002	1999-	2003	2000-	2004	2001-	2005
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Lafayette	296	79.4	297	79.4	311	78.7	329	79.1	343	78.5
Florida	637,361	86.4	645,536	86.5	657,001	86.7	649,954	84.3	521,164	83.8
					Black	Races				
Area	1997-	2001	1998-	2002	1999-	2003	2000-	2004	2001-	2005
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Lafayette	37	86.1	33	89.2	29	87.9	31	88.6	31	83.8
Florida	164,140	72.3	168,045	73.1	172,377	74.1	169,648	72.3	135,536	72.3

Rates are per 1,000 total population. Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005. Prepared by: WellFlorida Council, 2007.

Percent 79.7 83.0 83.3 83.7 79.7 81.3 80.0 79.3 78.7 79.3 80 60 40 20 0 1997-2001 1998-2002 1999-2003 2000-2004 2001-2005 ■ Lafayette County ■ Florida

Figure 24. Percent of births with early access to care for all races, Lafayette County and Florida, 1997-2005.

Percent of total births.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Table 42. Percent of Hispanic births with early access to care by race, Lafayette County and Florida, 1997-2005.

1001 200	•									
Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
Alea	Number	Rate								
Lafayette	35	63.6	35	62.5	42	62.7	38	57.6	39	56.5
Florida	173,312	81.1	185,878	81.5	199,567	82.0	207,503	79.7	213,667	76.8

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Rate 100 82.0 81.1 81.5 79.7 76.8 80 63.6 62.5 62.7 57.6 56.5 60 40 20 0 1997-2001 1998-2002 1999-2003 2000-2004 2001-2005 ■ Lafayette County ■ Florida

Figure 25. Percent of Hispanic moms who had early access to prenatal care, Lafayette County and Florida, 1997-2005.

Percent of all Hispanic births.

Early access to prenatal care means care started in first trimester.

Source: CHARTS, Florida Department of Health, Office of Vital Statistics, November, 2007.

Low Birthweight

An infant may be born small for gestational age, early or a combination of the two. A low birthweight infant is defined as weighing less than 2,500 grams (5 pounds 8 ounces) at birth. Low birthweight babies may face serious health problems as newborns and are at increased risk for long-term disabilities and may require adaptive care throughout their lifespan.

Table 43 shows a rate of 92.6 babies per 1,000 live births annually in Lafayette County between 2001-2005 were low birthweight. This is higher than the 84.9 low birthweight births per 1,000 Florida live births. Unfortunately, the low birthweight rate for black residents is much higher than that of white residents at a county rate of 243.2 to 130.2 for their state counterparts.

Table 43 and Figure 26 show that low birthweight rates have fluctuated in Lafayette County over the last decade. However, the low birthweight rate in Lafayette County has been notably higher than the Florida rate during the 2000 to 2004 years.

Table 44 and Figure 27 show that Hispanic low birthweight rates have dropped dramatically when evaluating the 2000-2004 and the 2001-2005 time periods.

Table 43. Low Birthweight rates per 1,000 live births by race, Lafayette County and Florida, 1997-2005.

					All Ra	aces				
Area	1997-	1997-2001		1998-2002		2003	2000-	2004	2001-	2005
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	32	76.4	26	62.8	37	86.2	46	101.8	44	92.6
Florida	80,480	80.9	82,369	81.7	84,619	82.6	87,163	83.4	90,681	84.9
					White I	Races				
Area	1997-	2001	1998-	2002	1999-	2003	2000-	2004	2001-	2005
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	24	64.3	19	50.8	28	70.9	36	86.5	35	80.1
Florida	50,014	67.8	51,135	68.5	52,385	69.1	53,839	69.8	56,163	90.3
					Black F	Races				
Area	1997-	2001	1998-	2002	1999-	2003	2000-	2004	2001-	2005
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	8	186.0	7	189.2	9	272.7	10	285.7	9	243.2
Florida	28,015	123.3	28,571	124.3	29,342	126.1	29,955	127.7	30,636	130.2

Rates are per 1,000 total population. Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005. Prepared by: WellFlorida Council, 2007.

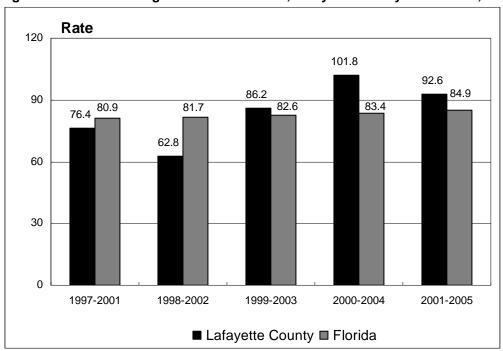


Figure 26. Low birthweight rates for all races, Lafayette County and Florida, 1997-2005.

Rates are per 1,000 live births.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Table 44. Hispanic low birthweight and rates per 1,000 live births Lafayette County and Florida, 1997-2005.

Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
Alea	Number	Rate								
Lafayette County	3	54.5	3	53.6	3	44.8	5	75.8	4	58.0
Florida	13,980	65.4	14,975	65.7	16,188	66.5	17,616	67.6	19,118	68.7

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005. Prepared by: WellFlorida Council, 2007.

Rate 100 80 75.8 68.7 67.6 66.5 65.4 65.7 58.0 60 54.5 53.6 44.8 40 20 0 1997-2001 1998-2002 1999-2003 2000-2004 2001-2005 ■ Lafayette County ■ Florida

Figure 27. Hispanic low birthweight rates per 1,000 live births Lafayette County and Florida, 1997-2005.

Rate is per 1,000 live births. Source: CHARTS, Florida Department of Health, Office of Vital Statistics, November, 2007. Prepared by: WellFlorida Council, 2007.

Infant Mortality

Infant mortality is an excellent indicator of health status and is used to compare the health and well being of populations across and within countries. Infant mortality is defined as the number of deaths to infants less than one year per 1,000 live births.

Table 45 shows that there were 4.2 deaths per 1,000 live births in Lafayette County between 2001 and 2005. This is notably lower than the Florida infant mortality rate for the same time period. The infant mortality rate for white residents of Lafayette County is also lower than for white residents of Florida as a whole. In addition, the infant morality rate for black residents of Lafayette County is higher than their counterparts throughout the state although this is due to the low number of black residents for the county and due to the fact of no reported infant deaths during the 1998-2002 and 1999-2003 time periods. It should be noted that only 2 infant deaths were reported from 2001-2005.

Table 45 and Figure 28 show that infant mortality has declined rapidly in Lafayette County over the last decade, as Florida's rate remained constant during the same period of time. There have been no reported Hispanic infant deaths within the past decade.

Table 45. Infant death rates by race. Lafavette County and Florida. 1997-2005.

Table 45. IIII			, .u.o., <u>_</u> u.u	your c	All Rad		<u>u, 1001 200</u>	<u>. </u>		
Area	1997-2	001	1998-2002		1999-20	03	2000-20	04	2001-20	05
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	4	9.5	2	4.8	1	2.3	1	2.2	2	4.2
Florida	7,133	7.2	7,323	7.3	7,492	7.3	7,586	7.3	7,789	7.3
					White R	aces				
Area	1997-2	001	1998-20	02	1999-20	03	2000-20	04	2001-20	05
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	3	8.0	2	5.3	1	2.5	-	-	1	2.3
Florida	4,119	5.6	4,206	5.6	4,263	5.6	4,324	5.6	4,396	7.1
					Black R	aces				
Area	1997-2	001	1998-20	02	1999-20	03	2000-20	04	2001-20	05
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	1	23.3	•	-	•	-	1	28.6	1	27.0
Florida	2,916	12.8	3,011	13.1	3,110	13.4	3,126	13.3	3,184	13.5

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

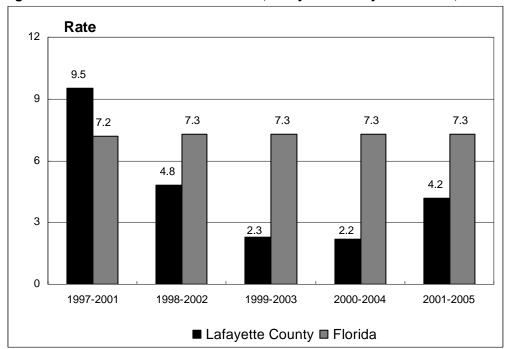


Figure 28. Infant death rates for all races, Lafayette County and Florida, 1997-2005.

Rates are per 1,000 live births.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Teen Births and Repeat Births

Teens are often unprepared for the realities of childbirth. This lack of preparation is often translated into poor health for the child if the teen does not have an adequate support structure to assist her with raising and caring for the child. As such, teen birth rates are also an important indicator or marker for a healthy community. In general, the lower the teen birth rate, the "healthier" a community.

Table 46 shows that teen birth rates (defined as births to females age 15-17 per 1,000 females age 15-17 in the population) were higher in Lafayette County between 1997-2005 than Florida. With regard to race, while whites in Lafayette County have higher rates than their counterparts at the state level, the rates for blacks are lower for the county than they are for the state.

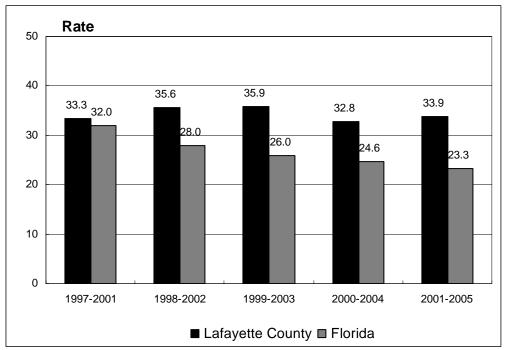
Table 46 and Figure 29 show that teen birth rates have remained consistent for Lafayette County teens; their counterparts at the state level have slightly declined for the past decade. However, Hispanic teen birth rates have lowered in the past decade in Lafayette County, but have exceeded the state rate by a substantial margin (Table 47 and Figure 30). Repeat birth rates to mothers age 15-19 have almost doubled since 1997 (Table 48 and Figure 31).

Table 46. Teen birth rates per 1000 females 15-17 by race, Lafayette County and Florida, 1997-2005.

2000.										
					All Rad	ces				
Area	1997-2	001	1998-20	02	1999-20	03	2000-20	04	2001-20	05
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	23	33.3	21	35.6	21	35.9	19	32.8	20	33.9
Florida	44,141	32.0	42,123	28.0	40,077	26.0	38,749	24.6	37,694	23.3
					White R	aces				
Area	1997-2	001	1998-20	02	1999-20	03	2000-20	04	2001-20	05
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	19	30.2	18	33.3	19	35.5	17	32.1	19	35.2
Florida	25,674	25.2	24,738	22.0	23,753	20.6	23,098	19.6	22,776	18.9
					Black R	aces				
Area	1997-2	001	1998-20	02	1999-20	03	2000-20	04	2001-20	05
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	4	72.7	3	60.0	2	40.0	2	40.0	1	20.0
Florida	17,831	55.9	16,746	50.6	17,658	51.7	17,929	51.5	17,071	47.8

Rates are per 1,000 total population. Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005. Prepared by: WellFlorida Council, 2007.

Figure 29. Teen birth rates per 1,000 females 15-17, all races, Lafayette County and Florida, 1997-2005.



Rates are per 1,000 females 15-17 years of age. Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005. Prepared by: WellFlorida Council, 2007.

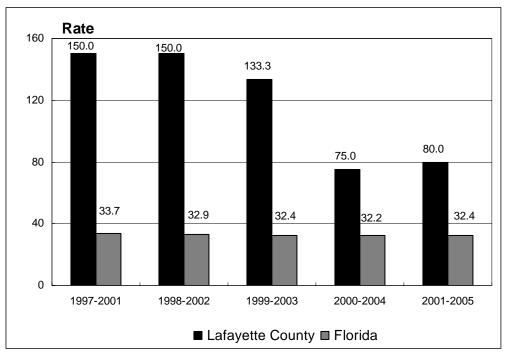
Table 47. Hispanic teen births 15-17 and rates per 1,000 females 15-17, Lafayette County and Florida, 1997-2005.

Area	1997-2	001	1998-20	002	1999-	2003	2000-2	2004	2001-2	2005
Alea	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Lafayette County	3	150.0	3	150.0	4	133.3	3	75.0	4	80.0
Florida	9,621	33.7	9,826	32.9	10,012	32.4	10,287	32.2	10,662	32.4

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005. Prepared by: WellFlorida Council, 2007.

Figure 30. Hispanic teen birth rates per 1,000 females 15-17, Lafayette County and Florida, 1997-2005.



Rate is per 1,000 Hispanic females 15-17 years of age.

Source: Florida Department of Health, Office of Vital Statistics, September 2007

Table 48. Repeat birth rates to moms 15-19 who had a previous birth for all races, Lafayette County and Florida. 1997-2005.

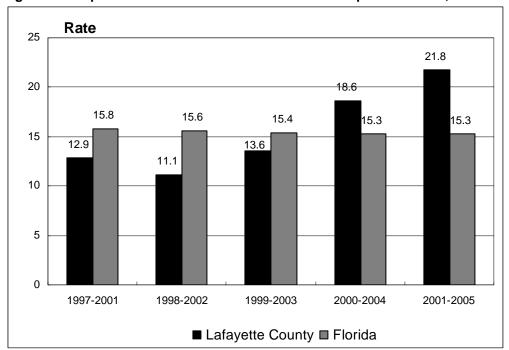
Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
Alea	Number	Rate								
Lafayette County	11	12.9	10	11.1	12	13.6	16	18.6	17	21.8
Florida	27,534	15.8	26,419	15.6	25,157	15.4	23,956	15.3	22,968	15.3

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 31. Repeat birth rates to moms 15-19 who had a previous birth, 1997-2005.



Rates are per 1,000 moms 15-19 who had a previous birth.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Key Mental Health Indicators

In general, morbidity data for mental health diseases and conditions is often difficult to obtain. This is often due to the long-standing view that mental health is not a "health issue" because it does not manifest in a physical ailment, therefore, oftentimes little baseline data pertaining to particular mental health indicators has been collected or compiled.

According to the Health Resources and Services Administration within the U.S. Department of Health and Human Services, Lafayette County is classified as a county in Florida that suffers a shortage of mental health professionals and is medically underserved. Lafayette County was designated as a medically underserved area by the U.S. Department of Health and Human Services, Bureau of Health Professions on November 1, 1978. The status was last updated on September 25, 2002.

In order to present some insight into the mental health status of Lafayette County residents, this assessment will review suicide rates, domestic violence rates, hospitalization for mental illness rates, and Baker Act rates.

Suicide Rates

Statistically, whites are more likely to commit suicide than any other racial/ethnic demographic. The rates in Lafayette County reflect this trend. The following table examines the average number, crude and age-adjusted rates from both Lafayette County and Florida residents from 2001-2005. As seen below in Table 50, the average number of death for all races equals 1.6 deaths over the five-year span. When adjusted for age distribution, it can be seen that Lafayette County has a higher death rate due to suicide compared to the state of Florida.

It should be noted that completed or successful suicides are only part of the problem. A greater number of people are hospitalized or treated and released as a result of suicide attempts than are fatally injured. While suicide is often viewed as a response to a single stressful event, it is a far more complicated issue. Suicide results from complex interactions between biological, psychological, social, and environmental factors. Moreover, because there is a tendency to blame the victim and to stigmatize family members, there is a reticence among individuals who have been affected by suicide to discuss it openly.

Table 50. Suicide age adjusted mortality rates per 100,000 population, by race, Lafayette County and Florida, 2001-2005.

population, by rad	o, Lalayotto oot	All Races	
Area	Average Number of Deaths	Crude Rate	Age Adjusted Death Rate
Lafayette County	1.6	21.4	21.8
Florida	2,319.6	13.5	12.8
		White Races	
Area	Average Number of Deaths	Crude Rate	Age Adjusted Death Rate
Lafayette County	1.6	25.5	25.3
Florida	2,177.0	15.5	14.4
		Black Races	
Area	Average Number of Deaths	Crude Rate	Age Adjusted Death Rate
Lafayette County	-	-	-
Florida	117.2	4.3	4.4

Source: State of Florida, Department of Health, Office of Vital Statistics, Public

Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Domestic Violence

A statewide survey was conducted by the Florida Department of Corrections in June 1999 to assess the attitudes and opinions concerning domestic violence. More than 91 percent (91.5) of those surveyed believe domestic violence is a widespread problem in our society and is present in over 40 percent of households. More than 55.0 percent of the population reported knowing someone who is a victim of domestic violence and almost 44.0 percent have actually witnessed the abuse. The vast majority of Floridians (92.0 percent) indicate that treatment should be required for people who have physically abused someone.

Domestic Violence is associated with eight out of the ten leading health concerns for Healthy People 2010. Medical studies link long-term effects of domestic violence and abuse with a myriad of major health problems including smoking, diabetes, obesity, eating disorders and substance abuse, according to the Florida Department of Health.

In 2003, Florida domestic violence offenses accounted for approximately 20.0 percent of violent crimes. In addition, domestic violence plays a key role in juvenile crime, the need for foster care placements, and the existence of poverty in female-headed households (Department of Children and Families). Domestic violence, specifically sexual violence more often goes unreported to authorities, therefore statistics may be lower that the reality of the crimes.

Table 51 illustrates the differences in types of offenses of domestic violence between Lafayette County and the state. Simple assault was the most reported offense in 2006 with 14 cases reported. While the rate of domestic violence in Lafayette County was substantially lower than the state average, 273 as compared to 627.7, in 2006, this represents a marked increase for Lafayette County from the previous year.

These rates should be interpreted with some perspective. The actual number of incidents at the state and possibly at the county level is higher than these tables suggest because the Florida Department of Law Enforcement only reports on the incidents their agency is involved in. Many more cases may be disposed at the city or county level and reporting criteria may vary from place to place and time to time. It is also possible that many domestic violence offenses are never reported to the authorities.

Table 51. Domestic violence offenses by type, Lafayette County and Florida, 2006.

Туре	Lafayette County	Florida
Murder	0	164
Manslaughter	1	19
Forcible Rape	0	1,089
Forcible Sodomy	0	369
Forcible Fondling	0	947
Aggravated Assault	7	20,193
Aggravated Stalking	0	259
Simple Assault	14	88,110
Threat/Intimidation	0	3,690
Stalking	0	330
Total	22	115,170
Population	8,060	18,349,132
Rate Per 100,000 Population	273.0	627.7

Source: Florida Department of Law Enforcement, Domestic Violence Annual

Report, 2006.

Prepared by: WellFlorida Council, 2007.

Table 52. Domestic violence offenses by year, Lafayette County and Florida, 2002-2006.

1 1011dd, 2002				
	Lafayette	e County	Florida	ı
Type	Number of Offenses	Rate Per 100,000	Number of Offenses	Rate Per 100,000
2002	4	55.5	121,834	730.7
2003	6	81.6	120,697	707.0
2004	20	265.4	119,772	683.8
2005	14	175.6	120,386	671.9
2006	22	273.0	115,170	627.7

Source: Florida Department of Law Enforcement, Domestic Violence Annual Report, 2000-2006.

Hospitalization Rates for Mental Health Issues

As noted in Table 53 below, the DRGs used to define the hospitalizations rates for mental health issues are 424-428, 430-433, and 521-523. These include:

Table 53. DRGs used to define the hospitalizations rates for mental health issues.

424	OR Procedure with principal diagnosis of mental illness
425	Acute adjustment reactions and psychosocial dysfunction
426	Depressive neuroses
427	Neuroses except depressive
428	Disorders of personality and impulse control
430	Psychosis
431	Childhood mental disorders
432	Other mental disorders diagnoses
433	Alcohol/drug abuse or dependence, left against medical advice
521	Alcohol/drug abuse or dependence
522	Alcohol/drug abuse or dependence with rehab
523	Alcohol/drug abuse or dependence without rehab

Source: AHCA Detailed Discharge Data, 2002-2006, CHARTS assessed 11-5-07.

Prepared by WellFlorida Council, 2007.

Table 54 below illustrates the number of hospitalizations in Lafayette County and Florida for mental health issues. The rate of hospitalization from 2002 to 2006 is consistently lower than the rates for the state. As mentioned previously, it is commonly accepted that those with mental illness are often stigmatized, specifically in small, rural communities. Therefore, these rates might represent only a fraction of those needing mental healthcare and stabilization.

Table 54. Number and rate of hospitalizations due to mental health issues, 2002-2006.

_	Lafayette	e County	Florida		
Туре	Number	Number Rate Per 1,000		Rate Per 1,000	
2002	11	1.5	123,579	7.4	
2003	23	3.1	123,742	7.2	
2004	24	3.2	127,257	7.2	
2005	25	3.1	127,295	7.1	
2006	25	3.1	126,772	6.9	

Rates are per 1,000 population.

Prepared by: WellFlorida Council, 2007.

Baker Act Rates

There are two different acts that can be initiated to involuntarily treat either the mentally ill or substance abusers. There is sufficient data concerning the Baker Act initiations for Lafayette County and the state, but data for Marchment Act rates are not compiled centrally. Therefore, this needs assessment cannot present Marchment Act rates from Lafayette County and Florida.

Baker Act

The Baker Act is the involuntary treatment of anyone who is mentally ill and is unable to understand his or her need for stabilization and/or treatment. Any person, who has witnessed the actions of the said individual and feels that he/she, is a threat to himself or someone else, may address local authorities and complete a sworn affidavit stating the said person's actions. This petition is then presented to a judge for review. If the person meets the criteria, an order is signed and the person is taken to the hospital for an evaluation and/or treatment. If further examination is needed, that person will be transported to the nearest Baker Act Receiving Facility.

Table 55 below charts the number, and rate of Baker Act initiations for the state and Lafayette County in single year counts from 2001-2005. There has been increase of Baker Act initiations since 2001 in Lafayette County. The state follows a similar trend with the number of initiations increasing over the past several years. Overall, the rate for the state is higher than the rate for Lafayette County.

^{*} Mental health issues are defined as DRGs 424-428, 430-433 and 521-523.

Source: AHCA Detailed Discharge Data, 2002-2006, CHARTS assessed 11-5-07.

The source of this data, the 2005 Florida Mental Health Act report, uses county of residence as an indicator for county level initiations. Using the county of residence is especially important for counties that have no Baker Act receiving facility. Using the county of residence also gives a better picture of the number of residents of each county that have a Baker Act exam rather than using the county of initiation or the county of the facility.

The type of initiator is generally related to age, such that increased age is related to higher likelihood of mental health professional initiation and a lower likelihood of law enforcement initiation (and vice versa).

Table 55. Single year rates for Baker Act initiations in Lafayette

County and Florida, 2001-2005.

County and Florida, 2001-2005.								
_	Lafayette	e County	Florida					
Type			Number of Initiations	Rate Per 100,000				
2001	19	268.5	90,368	550.6				
2002	20	276.1	99,772	594.9				
2003	27	365.2	104,600	609.4				
2004	30	396.9	110,697	628.5				
2005	20	248.0	122,206	678.2				

Source: AHCA, The Florida Mental Health Act (The Baker Act) 2005 Annual Report,

CHARTS assessed 11-5-07.

Prepared by: WellFlorida Council, 2007.

Marchment Act

The Marchment Act involves the involuntary treatment of anyone who is chemically or alcohol addicted. Any one family member or three non-family members may file a petition for treatment of an individual. The family or friends must make arrangements with a treatment facility prior to completing a sworn petition stating the actions of this person and requesting a hearing.

Marchment Act data are not submitted like Baker Act data are. The Louis de la Parte Mental Health Institute at the University of South Florida has been working over the past several years to educate people about the utility of such data, but at this point, no data are centrally collected.

Summary of Key Findings

Leading Causes of Death

- Lafayette County's top10 leading causes of death are the same as for the state of Florida, although in some cases they are ranked differently. For example, influenza/pneumonia and suicide both rank as the seventh leading cause of death in Lafayette County though suicide is ninth for all of Florida.
- White residents make up the largest majority of Lafayette County's population, they drive the overall leading causes of death in Lafayette County.
- The greatest disparity in age-adjusted death rates between Lafayette County and Florida is for respiratory disease.
- In Lafayette County, the rate of heart disease and cancer is higher for black residents than for white residents.

Hospitalization

The leading cause of hospitalization in Lafayette County from 2004-2006 was for being a normal newborn. Vaginal delivery without complicating diagnosis followed by simple pneumonia and pleurisy chest pain make up the second and third leading causes of hospitalization for all residents. Heart failure and shock, and cesarean section round out the top five.

Birth Indicators

- Birth rates in Lafayette County have been lower than birth rates in the state of Florida from 1997-2003.
- The percentage of mothers in Lafayette County who have been able to obtain early access to prenatal care has been less than the percentage in the state of Florida for the past ten years.
- Low birthweight rates from 2001-2005 were 92.6 percent, while Florida was 84.9 percent.
- As is true for the state as a whole, the rate of low birthweight infants among blacks is substantially higher than the rate for whites in Lafayette County.
- The infant mortality rate for black residents is substantially higher than of white residents.
- The teen birth rate in Lafayette County has increased over the past ten years.

Mental Health Indicators

- In Lafayette County, the rate of suicide is higher than the rate for Florida.
- The rate of domestic violence offenses is lower than it is for the state.
- The rate of hospitalization for mental health issues and Baker Acts in Lafayette County is lower than it is at the state level.

Health Resource Availability and Access

Introduction

The availability of health resources is a critical component to the health of a county's residents and a measure of the soundness of the area's healthcare delivery system. Without an adequate supply of healthcare facilities, providers and services, maintaining good health status is a daunting challenge. Fewer facilities, providers and services means diminished opportunity to obtain healthcare in a timely fashion. Limited supply of health resources, especially providers, results in the limited capacity of the healthcare delivery system to absorb indigent and charity care as there are fewer providers upon which to distribute the burden. This section will address the availability of health care resources to the residents of Lafayette County.

Provider and Facility Supply

Medically Underserved and Health Professional Shortage Areas

As defined by the federal government's Health Resources and Services Administration (HRSA), the medically underserved area or population (MUA/P) designation involves the application of the Index of Medical Underservice (IMU) to data on a service area to obtain a measurement of underservice for a defined area or population. The IMU scale runs from 0 to 100, where 0 represents completely underserved and 100 represents best served or least underserved. Under the established criteria, each service area found to have an IMU of 62.0 or less qualifies for designation as an MUA.

The IMU involves four variables – ratio of primary medical care physicians per 1,000 population; infant mortality rate; percentage of population with incomes below the federal poverty level; and percentage of the population age 65 or older. The value of each of these variables for the service area is created to a weighted value, according to established criteria. The four values are then summed to obtain an area's IMU score.

In November 1978, the whole Lafayette County area was designated as an MUA. In September 2002 the score was updated, Lafayette County received a score of 56.1 which placed it below the 62.0 threshold.

HRSA also evaluates primary care, dental and mental health care shortage areas and populations on a regular basis. The Shortage Designation Branch in the HRSA Bureau of Health Professions has developed shortage designation criteria and utilizes them to determine whether or not a geographic area or population group is a Health Professional Shortage Area (HPSA) in one of the three critical service areas. More than 34 federal programs depend on the shortage designation to determine eligibility or as a funding preference. About 20 percent of the U.S.

Population resides in primary medical care HPSAs. The following criteria are utilized for primary medical care shortage designations:

A geographic area will be designated as having a shortage of primary medical care professionals if the following three criteria are met:

- 1. The area is a rational area for the delivery of primary medical care services.
- 2. One of the following conditions prevails within the area:
 - a. The area has a population to full-time-equivalent primary care physician ratio of at least 3.500:1.
 - b. The area has a population to full-time-equivalent primary care physician ratio of less than 3,500:1 but greater than 3,000:1 and has unusually high needs for primary care services or insufficient capacity of existing primary care providers.
- 3. Primary medical care professionals in contiguous areas are over-utilized, excessively distant, or inaccessible to the population of the area under consideration

Lafayette County has HPSA designations for all three of the core service areas: primary medical care, dental care and mental health care. These designations are for different populations and are summarized in Table 55.

The entire Lafayette County area has been designated as primary medical care HPSA. The low income population has been designated a dental health HPSA. The whole County was designated a mental health HPSA as well. In each category the correctional institution was also designated a HPSA.

HPSAs are customarily reviewed every four years. The next review should occur in 2011.

Table 56. Summary of Health Professional Shortage Areas (HPSAs) and Medically Underserved Area

Populations (MUA/Ps), Lafayette County.

Professional Shortage Area/ Underserved Area	Designation Status	Designation Type
Primary Health	Yes	Entire County, Correctional Institution
Filliary Health	169	Entire County, Correctional institution
Dental Health	Yes	Low Income, Correctional Institution
Mental Health	Yes	Entire County; Correctional Institution
Medically Underserved	Yes	Entire County

Source: US Department of Health and Human Services, Bureau of Health Professions, November 6, 2007. Prepared by: WellFlorida Council, Inc., 2007.

Licensed Physicians

The availability of licensed physicians is critical to meeting the healthcare needs of a community. However, it is often difficult to get an accurate number of physicians that are

practicing and providing services in a community. The Florida Department of Health's Division of Medical Quality Assurance licenses these professionals. However, the only information the county stored for licensees in the database is their mailing address, which may or may not be identical to the county in which they are providing services.

According to Table 57, there are 239.4 licensed medical doctors and doctors of osteopathy per 100,000 for all of Florida while there are only 12.4 per 100,000 population for Lafayette County. Of course, this number does not capture those doctors that provide services in Lafayette County but who are licensed elsewhere and doctors that are licensed in Lafayette County but provide services in another county. Only 1 medical doctor was listed as living in Lafayette County.

Table 57. Number and rate of active licensed medical doctors and doctors of osteopathy. Lafavette County and Florida, 2007.

Area		Rate Per 100,000		
	MD	DO	MD/DO Total	Population
Lafayette County	1	-	1	12.4
Florida	41,480	3,748	45,228	239.4

Source: Florida Department of Health Division of Medical Quality Assurance as of November 10, 2007; ESRI Business Solutions, 2007.

Prepared by: WellFlorida Council, 2007.

Licensed Facilities

Table 58 is presented solely as an overview of the inventory of licensed facilities in Lafayette County. The total number of facilities and total capacity change regularly for the most up-to-date numbers on licensed facilities consult *www.Floridahealthstat.com*.

Table 58. Licensed facilities by type in Lafayette County, 2007.

Type of Facility	Total Number	Total Capacity
Assisted Living Facility	2	78
Clinical Laboratory	2	NA
Skilled Nursing Facility	1	60
Rural Health Clinic	1	NA

Source: Agency for Health Care Administration, Licensure, 2007.

Access to Healthcare

The Uninsured

Utilizing estimates from the 2004 Florida Health Insurance Study, conducted by the Florida Agency for Health Care Administration, in 2005, 19.2 percent of Floridians, more than 2.8 million residents, under the age of 65 were uninsured. In Lafayette County, over 7,000 residents age 0-64, more than 20 percent, had no form of public or private health insurance coverage.

The rate of the uninsured in Florida climbed to 19.2 percent compared to 16.8 percent in 2000. In Lafayette County, the current number of non-elderly individuals living without health insurance equals 22.8 percent (Table 59). The highest percentage of uninsured citizens (23.5) resides in the 32066 zip code of Mayo. The zip codes with the lowest percentage of uninsured (19.4) reside in the 32013 (Day) area.

Table 59. Estimated number of non-elderly uninsured by zip code, Lafayette County and Florida, 2007.

Area	2007 Population	Uninsured		
Alea	(0-64)	Estimated Number	Percent	
32013 Day	2,596	504	19.4	
32066 Mayo	3,854	906	23.5	
Lafayette Zip Codes	6,449	1,409	21.9	
Lafayette County	7,005	1,597	22.8	
Florida	15,511,820	2,978,269	19.2	

Source: ESRI Business Solutions, 2007; Agency for Health Care Administration, Florida Health Insurance Study 2004, Zip Code Estimates of People Without Health Insurance.

Prepared by: WellFlorida Council, 2007.

Medicaid

The Florida Medicaid program provides healthcare to various low-income and other special needs groups. The program is administered by the Agency for Health Care Administration and is funded through federal and state cost-sharing, with local counties contributing to inpatient hospital and nursing home service.

In Florida, eligibility for most Medicaid primary medical care is reserved for pregnant women (up to 185 percent of the federal poverty level) and children. All Medicaid recipients are

required to enroll in one of the managed care systems (either a Medicaid HMO or Medipass) implemented by Florida's Medicaid program.

The number of individuals eligible to receive Medicaid varies month by month. Figure 32 and Table 60 displays data for the year end number of eligible on December 31 of each year. At year's end in 2006, there were 972 Medicaid eligible in Lafayette County.

Number 1,200 1,060 1,038 1,039 1,003 972 900 600 300 0 2002 2003 2004 2005 2006

Figure 32. Number of Medicaid eligible in Lafayette County as of December 31, 2002-2006.

Source: Agency for Health Care Administration, Medicaid Program Analysis, 2007. Prepared by: WellFlorida Council, 2007.

Table 60 shows the number of Medicaid Eligibles by zip code for Lafayette County from 2002 through 2006. The largest increase in Medicaid Eligibles occurred in Mayo (32066).

Table 60. Number of Medicaid Eligibles by zipcode, by county and Florida as of December 31, 2002-2006.

Area	December 2002	December 2003	December 2004	December 2005	December 2006
32013 Day	31	31	38	32	20
32066 Mayo	955	976	948	1,000	968
Lafayette Zip Codes	986	1,007	986	1,032	988
Lafayette County	1,038	1,060	1,039	1,003	972
Florida	2,102,411	2,087,652	2,168,332	2,233,946	2,129,623

Source: Agency for Health Care Administration, Medicaid Program Analysis, 2006.

Prepared by: WellFlorida Council, 2007.

Table 61 shows the average monthly number of Medicaid eligible in various age groups. In Lafayette County from November 2006 to October 2007, on average, 57.3 percent of the Medicaid eligible was age 0-18, which is lower than the percent for the state of Florida (55.2). It is noteworthy that in Lafayette County 26.4 percent of Medicaid Eligibles was age 19-59.

Table 61. Average number of Medicaid Eligibles by age in Lafayette County and Florida, November 1, 2006 - October 31, 2007.

A	Lafayette		Florida		
Age	Number	Percent	Number	Percent	
0-5	251	26.1	534,688	25.2	
6-10	135	14.0	275,394	13.0	
11-18	165	17.2	360,151	17.0	
19-20	22	2.2	42,851	2.0	
21-35	128	13.3	243,541	11.5	
36-59	113	11.7	272,716	12.9	
60-64	29	3.0	49,759	2.3	
65-74	51	5.3	153,582	7.3	
75-84	39	4.0	123,202	5.8	
85+	30	3.1	62,303	2.9	
TOTAL	964	100.0	2,118,186	100.0	

Source: Agency for Health Care Administration, Medicaid Program Analysis, 2006-2007. Prepared by: WellFlorida Council, 2007.

Table 62 shows Medicaid expenditures by type for Lafayette County and Florida for a recent 8-month period. Expenditures for this period amounted to more than \$1.3 million. In Lafayette County, Inpatient Hospital services accounted for 40.2 percent of the expenditures compared to only 18.2 percent in Florida as a whole. In addition, prescribed drugs accounted for nearly 14.8 percent of all Medicaid expenditures in Lafayette County compared to only 8.7 percent for all of Florida.

Table 62. Medical expenditures by type by county and Florida. July 1, 2006 - May 31, 2007.

Table 62. Medical	expenditures by type by county and Florida,							
Towns of Mariliana	Lafayette County				Florida			
Type of Medical Assistance	Clients Dollars		I	Clients		Dollars		
	Number	Percent	Number	Percent	Number	Perce nt	Number	Percent
Adult Day Care	0	-	\$ 0.00	-	0	-	\$ 0.00	-
Ambulatory Surgical	7	0.9	\$ 3,641.30	0.3	37,119	1.2	\$ 14,115,099.76	0.1
Birthing Center	0	-	\$ 0.00	-	2,182	0.1	\$ 1,205,557.40	0.0
Case Management	11	1.5	\$ 3,733.50	0.3	70,729	2.2	\$ 31,377,974.23	0.3
Chiropractor Services	1	0.1	\$ 223.06	0.0	8,576	0.3	\$ 1,071,393.14	0.0
Comm Mental Services	20	2.7	\$ 5,439.00	0.4	95,656	3.0	\$ 143,411,070.82	1.3
Dental Care	23	3.1	\$ 5,697.16	0.4	311,924	9.8	\$ 84,438,072.51	0.8
DME Dial Crossover	17	2.3	\$ 3,024.95	0.2	51,237	1.6	\$ 34,324,474.83	0.3
End-Stage Renal	0	-	\$ 0.00	-	1,550	0.0	\$ 12,977,701.59	0.1
EPSDT	14	1.9	\$ 1,520.11	0.1	362,780	11.4	\$ 50,535,270.45	0.5
Family Planning	0	-	\$ 0.00	-	0	-	\$ 0.00	-
Hearing Services	4	0.5	\$ 1,710.16	0.1	18,427	0.6	\$ 3,615,827.51	0.0
HMO - PHP	111	15.0	\$ 67,765.60	4.9	2,041,590	64.2	\$ 2,147,235,531.87	20.0
Home And Comm Based Svcs	55	7.4	\$ 126,969.08	9.2	266,300	8.4	\$ 1,014,850,050.94	9.4
Home Health	26	3.5	\$ 8,990.14	0.6	114,613	3.6	\$ 254,290,298.48	2.4
Hospice	3	0.4	\$ 15,619.24	1.1	16,987	0.5	\$ 229,276,796.67	2.1
ICF - MR	0	-	\$ 0.00	-	3,276	0.1	\$ 291,109,415.50	2.7
Inpatient Hospital	159	21.5	\$ 557,849.18	40.2	421,667	13.3	\$ 1,950,883,170.38	18.2
Lab And X-ray	75	10.1	\$ 6,218.47	0.4	447,449	14.1	\$ 48,214,767.13	0.4
Medipass	112	15.1	\$ 2,727.00	0.2	1,033,225	32.5	\$ 22,205,743.04	0.2
Nurse Practitioner	25	3.4	\$ 2,537.65	0.2	213,675	6.7	\$ 41,206,647.79	0.4
Outpatient Hospital	573	77.4	\$ 67,643.04	4.9	1,041,135	32.7	\$ 486,499,280.66	4.5
Physician Care	128	17.3	\$ 56,122.03	4.0	1,312,394	41.3	\$ 596,712,222.06	5.6
Podiatry	2	0.3	\$ 217.94	0.0	37,425	1.2	\$ 3,234,079.58	0.0
Portable X-ray	6	0.8	\$ 214.90	0.0	28,316	0.9	\$ 1,536,206.94	0.0
Practitioner Crossover	0	-	\$ 0.00	-	454	0.0	\$ 13,753.51	0.0
Prescribed Drugs	131	17.7	\$ 205,562.13	14.8	1,013,706	31.9	\$ 935,760,618.58	8.7
Primary Care Management	0	-	\$ 0.00	-	0	-	\$ 0.00 fare Medical Assistance I	-

Source: Agency for Health Care Administration Medicaid Management Information System Recap of Welfare Medical Assistance Report, July 1, 2006 - May 31, 2007.

Prepared by: WellFlorida Council, 2007.

Table 62 Cont. Medical expenditures by type by county and Florida, July 1, 2006 - May 31, 2007.

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Rural Health	93	12.6	\$ 26,826.04	1.9	199,984	6.3	\$ 61,094,205.65	0.6
Rural Hospital Swing Bed	0	-	\$ 0.00	1	48	0.0	\$ 1,080,617.62	0.0
SNF	17	2.3	\$ 200,224.59	14.4	132,957	4.2	\$ 2,105,951,396.03	19.6
State Mental Hospital	0	-	\$ 0.00	-	157	0.0	\$ 6,474,235.19	0.1
Therapy Services	9	1.2	\$ 4,099.96	0.3	60,183	1.9	\$ 109,376,483.49	1.0
Transportation	19	2.6	\$ 9,030.65	0.7	167,894	5.3	\$ 41,796,846.56	0.4
Unassigned	0	-	\$ 0.00		57	0.0	\$ 267,281.33	0.0
Visual	41	5.5	\$ 3,523.04	0.3	168,049	5.3	\$ 17,289,665.45	0.2
Total	740		\$ 1,387,129.92	100.0	3,181,538		\$ 10,743,431,756.69	100.0

Source: Agency for Health Care Administration Medicaid Management Information System Recap of Welfare Medical Assistance Report, July 1, 2006 - May 31, 2007.

Prepared by: WellFlorida Council, 2007.

HMO Enrollment

Health maintenance organization (HMO) health insurance plans are often more affordable than standard private insurance and preferred provider organization (PPO) plans. In theory, the insured person is subjected to care management by a primary care provider that often leads to more efficient utilization of healthcare resources and subsequent lower costs.

According to the Florida Department of Insurance (DOI), as seen in Table 63, six of Florida's 36 HMOs are enrolling clients in Lafayette County. As of June 30, 2006, there were 160 Lafayette County residents were enrolled in HMOs. However, Lafayette County's HMO enrollment rate of 20.7 persons per 1,000 population is substantially lower than the state of Florida rate of 203.4 per 1,000.

Table 64 shows that more than 99.4 percent of Lafayette County's HMO enrollment is in "All other" plans compared to only 61.9 percent statewide. Only 1 individual or less than 1 percent is enrolled in Medicare HMOs, and there are no Medicaid HMO enrollees.

Table 63. Total and percent HMO's and enrollees, by county and Florida as of June 30, 2006.

	Total I	HMO's	Total HMO Enrollees			
Area	Number	Percent of State	Number	Percent of State	Rate Per 1,000 Population	
Lafayette	3	8.3	160	0.004	20.7	
Florida	36	100	3,758,544	100	203.4	

Source: State of Florida, Department of Financial Services, Managed Care Summary Report as of June 30, 2006; ESRI

Business Solutions, 2006.

Prepared by: WellFlorida Council, 2007.

Table 64. Total and percent HMO's enrollment by type, by county and Florida as of June 30, 2006.

Area Total HMO Enrollees		HMO Enrollment Type							
		Medicare		Medicaid		All Others			
		Number	Percent	Number	Percent	Number	Percent		
Lafayette	160	1	0.6	1	1	159	99.4		
Florida	3,758,544	651,903	17.3	779,909	20.8	2,326,732	61.9		

All Others include: individuals, small groups, healthy kids and federal employees.

Source: State of Florida, Department of Financial Services, Managed Care Summary Report as of June 30, 2006; ESRI

Business Solutions, 2006.

Prepared by: WellFlorida Council, 2007.

Avoidable Hospitalizations

The Institute of Medicine (IOM) defines access as the "timely use of personal health services to achieve the best possible outcome." This definition suggests that an evaluation of effective utilization and access must include consideration of indicators of health status or health outcomes. In order to determine appropriate and effective utilization of hospital services and availability of primary care, a methodology has been developed to analyze hospital discharge data for (non-elderly) residents to determine the level of hospitalization for certain illnesses susceptible to primary care intervention.

The methodology is based on a study of the impact of the socioeconomic status on hospital use in New York; the results of which were released in 1993. In that study, specific diseases from the International Classification of Disease (ICD) codes were selected and proven in research to be reflective of the efficiency and effectiveness of access to the healthcare delivery system in the region. These diseases were called ambulatory care sensitive (ACS) because they had been

shown to be avoidable in many cases if timely and appropriate ambulatory and primary care is available and utilized.

In 2006, there were 13.8 avoidable hospitalizations per 1,000 population in Lafayette County which was substantially higher than the nearly 13.5 avoidable hospitalizations per 1,000 population for the state as a whole (Table 65). Table 66 and Figure 33 break out these avoidable hospitalizations by payor or insurance status. Oftentimes, the self-pay/charity and Medicaid populations demonstrate a disproportionately high number of avoidable hospitalizations since timely access can be a questionable proposition for these groups.

The percentage of self pay avoidable hospitalizations in Lafayette is higher, 12.4 percent, as compared to 12.0 percent for Florida. The percentage of Medicaid avoidable hospitalizations are higher in Lafayette County also, 30.9 percent as compared to 25.5 percent for Florida. In the "all other" category Lafayette County's avoidable hospitalizations are less than Florida's (as a percentage of overall avoidable hospitalizations).

As seen in Table 67, the overwhelmingly leading cause for avoidable hospitalization is dehydration/volume depletion accounting for almost a third of all avoidable hospitalizations. The second leading cause of avoidable hospitalization in Lafayette County is chronic obstructive pulmonary disease, followed by cellulitis, congestive heart failure, and asthma rounding out the top five.

Table 65. Lafayette County residents 0-64 years of age avoidable rate and total hospitalization rate per 1,000 population compared to Florida, calendar year 2004-2006.

Region	2004		2005		2006	
Region	Avoidable	Total	Avoidable	Total	Avoidable	Total
Lafayette County	30.9	108.3	30.3	105.9	13.8	99.0
Florida	15.7	136.5	16.1	135.8	13.5	133.5

Avoidable rates are based on 0-64 years of age; total rates are based on total population. Source: AHCA Detailed Discharge Data, 2004-2006; CHARTS assessed 10-15-07.

Table 66. Lafayette County residents, 0-64 years of age who had an avoidable hospitalization by payor source compared to Florida, calendar year 2006.

	Lafayette County						
Payor	Discharges	Percent of Discharges	Patient Days	Total Charges			
Medicare	22	22.7	203	\$673,977			
Medicaid	30	30.9	97	\$283,861			
Commercial Insurance	32	33.0	94	\$328,160			
Self Pay	12	12.4	43	\$93,061			
Charity	0	0.0	0	\$0			
All Others	1	1.0	6	\$13,299			
Total	97	97.0	443	1,392,358			
	Florida						
	Discharges	Percent of Discharges	Patient Days	Total Charges			
Medicare	35,808	17.4	207,868	\$1,135,520,571			
Medicaid	52,603	25.5	245,773	\$1,232,502,175			
Commercial Insurance	72,226	35.1	304,693	\$1,788,578,002			
Self Pay	24,818	12.0	99,715	\$543,840,073			
Charity	10,374	5.0	45,495	\$239,243,672			
All Others	10,145	4.9	47,496	\$259,632,687			
Total	205,974	100.0	951,040	\$5,199,317,180			

All Others include: Workers Comp, Champus, VA, Other State/Local Government, Other and KidCare. Source: AHCA Detailed Discharge Data Tapes, 2006. Prepared by: WellFlorida Council, 2007.

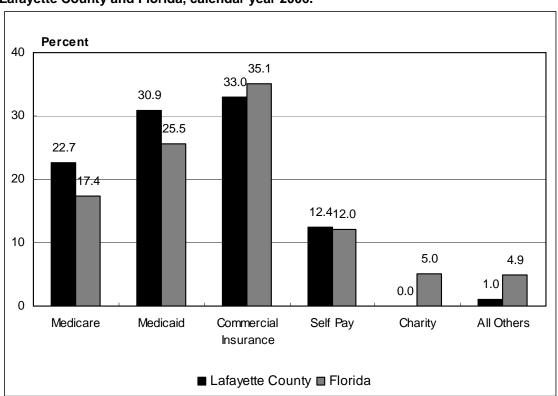


Figure 33. Percent of avoidable hospitalizations by payor source for residents (age 0-64), Lafayette County and Florida, calendar year 2006.

Source: AHCA Detailed Discharge Data, 2006. Prepared by: WellFlorida Council, 2007.

Table 67. Top 9 avoidable hospitalizations for 0-64 years of age in Lafayette County, 2006.

Avoidable Hospitalization	Number	Percent of Total
Dehydration - Volume Depletion (1)	36	34.0
Chronic Obstructive Pulmonary Disease (2)	13	12.3
Cellulitis (3)	12	11.3
Congestive Heart Failure (4)	11	10.4
Asthma (5)	7	6.6
Angina (6)	5	4.7
Kidney/Urinary Infection (7)	4	3.8
Grand mal status and other epileptic convulsions (8)	3	2.8
Severe ENT Infections (8)	3	2.8
All Others	12	11.3
Total	106	100.0

Source: AHCA Detailed Discharge Data, 2006. Prepared by: WellFlorida Council, 2007.

Summary of Key Findings

Provider and Facility Supply

- The low income population of Lafayette County has been designated as a medically underserved population by the federal government.
- The entire county has been designated a health professional shortage area by the federal government for primary medical care and mental health care.
- The low income population has been designated a health professional shortage area by the federal government for dental care.
- The rate of licensed physicians and doctors of osteopathy per 100,000 population, with license addresses in Lafayette County, is substantially less than for Florida.

Access to Healthcare

- In 2007, there were nearly 1,600 non-elderly uninsured in Lafayette County.
- The percentage of non-elderly uninsured in Lafayette County in 2007 is 22.8 percent compared to 19.2 percent for the state.
- As of December 31, 2006, there were 972 Medicaid Eligibles in Lafayette County.
- The avoidable hospitalization rate in Lafayette County is 13.8 per 1,000 population compared to 13.5 per 1,000 for Florida.
- In 2006, avoidable hospitalizations which incurred more than \$1.3 million in charges.

Community Input

Interviews with Community Leaders

Introduction

The WellFlorida Council conducted key informant interviews during the month of October and November 2007 with the cooperation of the Lafayette County Health Department. The purpose of conducting the interviews is to better understand the perspectives of key community leaders on the health and healthcare needs of Lafayette County residents. These interviews are intended to ascertain opinions among individuals likely to be knowledgeable about the community and who are influential over the opinions of others about health concerns in the county. The findings provide qualitative information and reveal factors affecting the views and sentiments regarding healthcare services in Lafayette County. A summary of community leaders' opinions is reported without judging the veracity of their comments.

Methodology

The Lafayette County Health Department compiled a list of possible interview subjects and the WellFlorida Council staff made the initial contacts. The list included governmental representatives, including elected officials and public employees; healthcare providers, mental health professionals, and representatives of local businesses and community organizations.

Council staff conducted interviews by telephone to. Fifteen key community leaders agreed to be interviewed, and the interviews were conducted during October and November 2007. To assure the confidentiality of their comments, the names and any other identifying information of the interviewees has not been included in this report.

All interviews were conducted using a standard questionnaire. The instrument used to conduct the interviews is included in Appendix A. Community leaders provided comments on the following issues:

- Overall perspective on healthcare in Lafayette County;
- Perception of essential services of the county's healthcare system;
- Opinions of important health issues that affect county residents and types of services needed to address these issues;
- Impressions on specific health services available in the county; and
- Opinions on the parties responsible for initiating and addressing health issues for the county.

Interview Analysis

The leaders interviewed were asked whether they serve on any boards or have any affiliations with healthcare providers in the community that deliver healthcare services that may have helped form their opinions.

The business and community leaders interviewed served or worked with on various professional, political, and trade organizations.

The interview questions for each community leader are identical. The questions have been grouped into five major categories. A summary of the leaders' responses by each of these categories follows. Paraphrases are included to reflect some commonly held opinions and direct quotes are employed to emphasize strong feelings associated with statements. This section of the report summarizes what the community leaders said without assessing credibility of their comments.

General Perceptions

When asked to share their impressions about health and healthcare in Lafayette County, community leaders spoke at length about the assets and deficiencies of the system. First and for most, interviewees consider the county's greatest deficiency to be the economical barriers that exist throughout the community. Although they were quick to acknowledge that some people may harbor negative perceptions of smaller rural community's healthcare systems, they maintained the quality of care in Lafayette County is quite high.

While hospitals play an important role in a community's ability to administer healthcare to its citizens, community leaders also discussed other services such as the Health Department, which they regarded as important components of healthcare in Lafayette County. Community leaders consistently indicated that there were not enough doctors or facilities to offer services to residents. Although they often remarked that their network of facilities and providers are below average, community leaders also noted that access to larger cities such as Gainesville, Jacksonville and Tallahassee offered options to residents that may not be available to other rural areas of the state.

Community leaders are well aware that an individual's ability to access healthcare is most often predicated on that person's ability to pay for it. They noted that there is a significant population of uninsured in Lafayette County and that those individuals have limited options when it comes to healthcare. In some cases, community leaders discussed the fact that people simply do without basic healthcare, especially preventative services. In other instances, the uninsured may be forced to use the emergency room for services other than those for which it is intended.

Lack of insurance, transportation and availability of services were noted most often when asked what the most pressing healthcare concern for Lafayette County currently is. What emerged throughout the comments of community leaders is that while the healthcare system in Lafayette County is generally good, some of the most vulnerable individuals in the population, namely

children, the uninsured and the indigent, are running into barriers that prevent them from getting the services they need. These barriers occur at the personal level as well as the systemic level and they have a synergistic effect on one another. Community leaders went on to point out that when access to primary care is constrained, it could contribute to the degradation of the system as a whole.

Essential Services

The community leaders were asked to list some of the essential services of the healthcare system in Lafayette County. The top five essentials they discussed were indigent care, primary care, and mental, dental and emergency care.

Indigent Care

Many interviewees placed a premium on the importance of providing health services for those who are unable to afford them. While noting that the Health Department works hard to reach this population, many needs are still going unmet. In particular, community leaders expressed concern for the growing number of Lafayette County residents who are not able to obtain health insurance, but at the same time are not eligible to receive Medicaid. Several observed that any growth in the healthcare infrastructure should contemplate the need for free clinics and other "safety net services". Many leaders noted that emergency room services in other counties were being used by residents to receive primary care. One person stated that the lack of a birthing center in the county has created great hardships on individuals with limited transportation and that the travel time to other counties can jeopardize the health of the women and the unborn child.

Primary Care

In discussing the availability of appropriate treatment, community leaders often cited primary care as a concern. Primary care was most often described as the basic and routine services that people use most often. Many leaders felt that there are not a sufficient number of primary care doctors available in the county for residents to easily access.

Mental Healthcare

Mental healthcare was most often described as "not available" to residents. Leaders often stated that residents would have to travel out of county a majority of time to receive any mental health services. It was also noted that most often mental health services would be addressed by professional association such as Meridian Behavioral Health.

Dental Healthcare

All community leaders were in agreement that dental care in Lafayette County is very poor. Several commented that it is common for a relatively small community to have problems delivering dental health services. In spite of this, a number of community leaders expressed concern that the number of accessible dental health providers in the county is insufficient. Many

also stated that affordable dental healthcare was hard to find even in larger adjacent cities such as Gainesville, Lake City and Tallahassee.

Community Focus Groups

Introduction

The purpose of a focus group is to listen and gather information. It is a way to better understand how people feel or think about an issue, product or service. Participants are selected because they have certain characteristics in common that relate to the topic of the focus group. As part of the 2007 Community Needs Assessment, the Lafayette County Health Department recruited individuals to participate in two local focus groups. While recruitment efforts went above and beyond the call of duty, the overall participation was minimal. Originally there were four target interest groups who included, elderly residents, uninsured residents, African-American/black resident and Hispanic residents. The elderly focus group and the Hispanic focus group were the only groups that had participants.

Methodology

Two trained focus group facilitators conducted two focus groups during the month of October and November 2007. The two groups were comprised of elderly residents and Hispanic residents. Focus group protocols and questions were developed by the WellFlorida Council, Inc. and Lafayette County Health Department.

Participants for these groups were recruited by newspaper advertisement; recruitment advertisements posted at local shopping centers, churches and neighborhood bulletin boards; and through word of mouth recruiting. A \$10.00 gift card from a local business was offered as a participation incentive and was issued to participants at the conclusion of each meeting. Participant recruitment began approximately three weeks prior to the first group meeting.

Participant registration was made through a designated telephone line at which time a brief "screening" was performed to insure the appropriateness of the caller for participation in the group, i.e., the caller fit into one of the identified race, age or economic target groups. All qualified individuals scheduled for a focus group received a reminder call before their scheduled meeting time.

The Hispanic focus group was held at Grace Baptist Church in Mayo. The church pastor recruited members from the congregation to participate. Church volunteers served as interpreters for the group. The elderly focus group was held at the Lafayette County Regional Library in Mayo.

One facilitator acted as discussion moderator and the other as recorder. The meetings were audio tape recorded with the permission of all participants. After introduction and explanation of meeting format, nine questions were sequentially presented to participants for discussion. At the

end of each focus group meeting, the recorder gave a summary of the discussion to participants to insure that the notes taken accurately reflected the discussion.

Focus Group Question and Answer Summaries

Q1. Where would you recommend I get health information?

Brief Summary

The most frequent responses to this question from most of the groups were the Lafayette County Health Department, Doctor's Memorial Clinic and word-of-mouth was mentioned as resources.

Q2. Where would you not recommend I get health information?

Brief Summary

The participants stated that there are only two places to receive information and the resources for Spanish speaking residents are limited to the word-of-mouth from other residents.

Notable Quotes

- "The health department is good, but there is not doctor there."
- "There's not much information available in Spanish."
- "The emergency rooms do not really help."

Q3. What do you think about health care in Lafayette County?

Brief Summary

A majority of respondents stated that they have to go out of county, usually to Gainesville to get services. Many participants felt that residents of the county were no likely to be unhealthy when compared to other small rural areas.

Notable Quotes

- "There are not enough doctors in town."
- "Transportation is only available on Tuesday and Thursday for Medicaid Transport, if your appointment is on another day what are you to do?"
- "We need an emergency room or urgent care center for after hours."

Q4. What has helped you or your family to improve or maintain your health?

Brief Summary

Most participants felt that applying healthy lifestyle behaviors, access to health insurance and going to the doctor has helped them improve or maintain their health.

Notable Quotes

- "I try to eat right and exercise."
- "If I didn't have insurance I would be in bad shape."
- "I try to do what the doctor tells me."

Q5. What are problems or barriers that keep you from being healthy?

Brief Summary

Overwhelmingly, residents stated that the lack of health insurance was the greatest barrier to health care. Many stated that if they had insurance they would seek preventative services and not utilize the emergency room for basic primary care.

Notable Quotes

- "The Mayo Family Pharmacy does not always care the supplies and medicine I need. I usually have to plan about a week in advance if I'm running out of medicine"
- "The closet hospital is Live Oak or Perry."

Q6. What do you go to other counties for and what health care services do you and your families go out of Lafayette County to receive?

Brief Summary

All participants stated that they go out of county for all specialty services. Dental services were noted most often as a service sought in other areas.

Notable Quotes

- "We need dentists"
- "We don't have any specialists. My son has hearing aides and I can't get anyone to help me get them checked and regulated. I have to go to Gainesville for it and I just can't afford it."

Q7. What do you need to keep you and your family healthy?

Basic Summary

Health education was discussed most often when asked what residents need to remain healthy. The Hispanic participants stated that they need a Spanish speaking doctor.

Notable Quotes

- "We need doctors that speak Spanish."
- "We need to have some sort of number to call and ask questions, like the As-A-Nurse."

Q8. What do you think are the most pressing or most serious health care needs in Lafayette County? Overall, what would you say is the most important health need we have just come up with?

Basic Summary

The focus again was on prescription assistance, emergency care and dental care.

Notable Quotes

- "We need an emergency room. You can't even have a baby in this county."
- "There are no dentists for adults."
- "There's no help getting prescriptions. We also need emergency housing, some preventative programs, dental cleanings, diabetes screenings and high blood pressure screenings."

Q9. What do you think can be done to address these health care needs?

Basic Summary

The majority of participants felt that having a local health fair and offering free health screening would be a good start. They also suggested making this an annual or semi-annual event. It was also suggested that involving the church or offering services at the church would be beneficial to the Hispanic residents.

Q10. What is your perspective on how the community members feel about the Lafayette County Health Department?

Basic Summary

The majority of participants felt that the Lafayette County Health Department was doing a good job. Many felt that the staff has a good reputation within the community. Several residents noted that they do not know what services are available at the health department.

Notable Quotes

- "It's good, but the wait times are very long."
- "They have a sliding fee scale so I go there. I've never had any real problems."
- "They need more doctors and translators. A friend of mine went there and was told she would need to go to Gainesville because they didn't have anyone available to speak Spanish."

APPENDIX A

Lafayette County Needs Assessment 2007 Key Informant Interview Instrument

The **Lafayette County Health Department** is conducting a county-wide health needs assessment. The goal of this assessment is to identify the most pressing health needs of residents of Lafayette County including issues like access to health care, barriers to receiving health care, and the most pressing health issues of residents. As a part of this study, we are conducting a series of interviews with key individuals throughout the county who have knowledge of the health needs of individuals in Lafayette County. You have been identified by the project team as a key informant based on your knowledge of the health-related issues for your County residents. This interview will take approximately 30 minutes. Do you have 30 minutes now or can we schedule a time to talk in the near future?

- Could you briefly describe your position and how long have lived and/or worked in Lafayette
 County?
- 2. It is important that we understand any affiliations you have with health care providers in the community that may have helped form your opinions about these issues. Do you serve on any boards or participate in any organization that delivers health care services?
- 3. Please comment on your overall perspective on health care in Lafayette County, the services available to meet health care needs and the health of Lafayette County residents?
- 4. Where do you think the residents of Lafayette County go to get needed health information?
- 5. What do you think are the most pressing health care needs in Lafayette County?
- 6. What do you think are the most important health issues that affect Lafayette County residents? (Prompt: you may want to consider separate issues for children, adolescents, and adults and other groups.)
- 7. What residents of Lafayette County have more difficulties with health care than others? What are these difficulties? Why do you believe these folks have more difficulties with health care?
- 8. What do you think are the essential components of a quality health care system for a community like Lafayette County? (Prompt: What kinds of services/programs/facilities do you think are necessary for a good system of health care for county residents?) Are we meeting these essential components in Lafayette County?

- 9. Please share anything you know about how the following services are available to all persons in Lafayette County and whether there are any obstacles to receiving these types of services:
 - a. Primary care (the basic and routine services that most people use most often)
 - b. Mental health
- 10. Are there other types of services that individuals in Lafayette County have difficulty accessing?(Prompt: dental care, specialty care, pharmaceuticals/prescription)
- 11. Of all the issues and services we have discussed, which do you think is the most important health care issue in Lafayette County?
- 12. What actions are necessary to address this issue?
- 13. Who should take responsibility for addressing this issue (or what are the responsibilities of different parties [individuals, providers, and government, business] in addressing this issue)?
- 14. What is your perspective on how the community members feel about the Lafayette County Health
 Department? (Prompt: Do they utilize the services available? Do they know what types of
 services exist?)
- 15. What is your perspective on the role of community members play in improving the overall health of Lafayette County?
- 16. Do you have any additional comments you would like to share about health care in Lafayette County?

That completes the interview. I would like to thank you very much for your time. Your input is valued by the project team. The Lafayette County Needs Assessment is scheduled to be completed in mid-November.

If you have any additional information you would like to share please call me

APPENDIX B

Lafayette County Health Needs Assessment Focus Group Moderators Guide

Hello and welcome to our focus group. A focus group is a discussion among people who have something in common. Each of you is here today as a resident of Lafayette County and have unique perspectives on the health of your community. I'd like to thank you for agreeing to join our discussion group today where we will be talking about the health needs of individuals in our community.

My name is Shane Bailey and assisting me with this discussion is ______. We are both representing The Lafayette County Health Department Needs Assessment Committee. This committee is working on a Health Needs Assessment Report to help our local policy makers and health care providers focus on health needs that you feel are important.

We are conducting 4 focus groups in Lafayette County. The purpose is to understand what you think are the most pressing health care needs of your community and the factors that influence an individual's health and health care. Health and health care needs are anything that would help you achieve an acceptable quality of life. Your input into this process is extremely important.

To help manage our discussion, I am going to review some guidelines:

- I will be asking you all some questions over the next hour and a half. I encourage each of you to share as much as you feel comfortable. All of your opinions are important to us and this project.
 Feel free to say what ever you like; there is no right or wrong answers to our questions.
- We ask you to respect what other people in the group say and for you avoid negative comments about other peoples' thoughts or opinions.
- We ask that only one person talk at a time, we do not want to miss anything that anyone says, so
 it is important we do not talk over one another or break into separate conversations. If you think
 you might forget your ideas, please write them down. Then you can share them at the next
 opportunity in our conversation.

- Most importantly, what you say in here today will remain between us. We will not be using your
 name when we report the results of this study. We also ask that you not share what we talk about
 today in the group with others outside the group. It is important that we trust each other and that
 you are comfortable sharing your thoughts.
- We are taping today's meeting. The tape will only be used by our staff to make sure that our
 written reports are accurate. We do not want to miss any of your comments. Once those reports
 are complete, we will destroy the tapes.
- As you walked in we handed you a brief questionnaire. This will be used to help describe the
 discussion group. Please take a minute and complete these questions before we start. We will not
 be using this information to identify you in anyway.
- If you have a cell phone, please turn them off or put them on vibrate. If you must answer the
 phone, please do so outside and return as quickly as you can.
- You will be receiving your incentive for participating at the end of the session.

Our session will last about 90 minutes	s, and we will not be taking	g a formal break. If yo	u must use the
restroom, they are located	.		

Are there any questions about what we're doing today? If there are no additional questions, we'll begin.

QUESTIONS

As a way of getting started and getting to know each other, I would like around the room one at a time. Please tell us your name and how long you have lived in Lafayette County?

Now that we have heard from each of you, I would like to ask some questions for anyone to answer. Please, I ask you to remember to talk one at a time because each one of you have important things to say and we want to make sure that we hear what you have to say. There are not right or wrong answers; we only want to get your input.

- Let's suppose I am new to the community, and I need some health information, where would you suggest I go?
- 2. Where would you suggest I not go?
- Considering your own experiences, what do you think about health care in _Lafayette_ County?
 (Prompt: Perspective on the services available in the county and the health of the residents of the county.)
- 4. Considering your own experiences, what are some things that have helped improve or maintain the health of you or your family? What are some things that have been helpful (*Prompt: types of programs*)
- 5. What are problems or barriers that keep you from being healthy? (*Prompt: barriers to care including insurance, cost, access to care primary care/mental health/dental*)
- 6. What do you go to other counties for and what health care services do you and your families go out of Lafayette County to receive?
- 7. What do you need to keep you and your family healthy? (*Prompt: Identification of services and resources that could help to improve health.*) Looking at our community as a whole, is there anything else you would like to add to the list?
- 8. What do you think are the most pressing or most serious health care needs in Lafayette County?

 Overall, what would you say is the most important health need we have just come up with?
- 9. What do you think can be done to address these health care needs? (*Prompt: What community groups can work together?*)

- 10. What is your perspective on how the community members feel about the Lafayette County Health Department? (*Prompt:* What do people use their services for? Do community members use the HD services available? Do they know what types of services exist? Why?)
- 11. What is your perspective on the role of community members, like yourselves; play in improving the overall health of Lafayette County? What do you think you can do to improve your overall health?
- 12. Do you have any additional comments you would like to share about health care in Lafayette County?

I would like to take a few minutes and briefly summarize what we talked about today. [Provide summary of notes for each question] Our discussion today was to help us understand how the community feels on the health needs in Lafayette County. Have we missed anything?

Now, if there are no further comments, we would like to thank you all for your participation in this very important project, and please remember to keep everything you have heard today inside this room and among us.

We are now going to come around the room and distribute your incentive for participation.

Again, thank you for participating in this discussion with us. We really appreciate your thoughts and comments.