

2016 Community Health Needs Assessment



Bassett Healthcare Network

A.O. Fox Memorial Hospital
The Mary Imogene Bassett Hospital
(dba: Bassett Medical Center)

&

Otsego County Health Department



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I. Introduction:

Bassett Research Institute's Mohawk Valley Population Health Improvement Program (MVPHIP), a grant funded program from New York State Department of Health, conducted an assessment on behalf of The Mary Imogene Bassett Hospital (dba: Bassett Medical Center), A.O. Fox Memorial Hospital and Otsego County Health Department.

The Community Health Needs Assessment provides the hospitals, local county health department and stakeholders with data and key informant survey responses so that they may identify, prioritize and address health care challenges facing their communities. Utilizing the New York State's Prevention Agenda 2013-2018 the hospitals, local county health department and stakeholders can select interventions which target those identified needs.

a. Hospital Service Areas

Bassett Healthcare Network provides health services in more than 20 communities spanning 5,600 square miles. The service area for Bassett's facilities and its affiliates include: The Mary Imogene Bassett Hospital (dba: Bassett Medical Center), an acute care inpatient teaching facility in Cooperstown, Otsego County; A.O. Fox Memorial Hospital, an acute care hospital in Oneonta, Otsego County; O'Connor Hospital, a critical access hospital in Delhi, Delaware County; Cobleskill Regional Hospital, an acute care facility in Cobleskill, Schoharie County; Little Falls Hospital, an acute care facility in Little Falls, Herkimer County; Tri-Town Regional Hospital, a 24/7 emergency care facility in Sidney, Delaware County; the Bassett Clinic, an outpatient primary and specialty care center on the Bassett Medical Center campus in Cooperstown; 30 community based outpatient health centers, 19 school based health centers; two ambulatory surgery centers; Valley Health Services, a residential health care and rehabilitation facility; At Home Care, a certified home care agency; and First Community Care of Bassett, a medical supply company.

Bassett Medical Center is the foundation of Bassett Healthcare Network and is a 180-bed acute care inpatient teaching facility, located in Cooperstown, New York. Bassett Medical Center offers 24-hour emergency and trauma care, comprehensive cancer and heart care, dialysis, and most medical and surgical specialties. Additionally, the Bassett Clinic is located on the same campus as the medical center and provides outpatient primary and specialty care.

Bassett Medical Center maintains a strong academic program through its affiliation with Columbia University College of Physicians and Surgeons, highlighted by the establishment of a Columbia medical school campus at Bassett in 2009. The medical center provides postgraduate residency training programs in Medicine and Surgery. It includes the Bassett Medical Group (BMG), which is comprised of a full-time, salaried staff numbering over 400 physicians and other advanced practice clinicians who provide primary and specialty care at the Bassett Clinic and staff Bassett Medical Center in Cooperstown. Bassett physicians and other health professionals also provide preventive, primary and specialty outpatient care at rural health clinics and school-based health centers throughout nine counties. The Bassett Research Institute and the New York Center for Agricultural Medicine and Health (NYCAMH) conduct research in clinical science, population and public health studies.

Bassett Medical Center's primary service area includes the following zip codes:

Town	Zip Code	County
Burlington Flats	13315	Otsego
Charlottesville	12036	Delaware
Cherry Valley	13320	Otsego
Cooperstown	13326	Otsego
Davenport	13750	Delaware
Davenport Center	13751	Delaware
East Meredith	13757	Delaware
East Springfield	13333	Otsego
Fly Creek	13337	Otsego
Franklin	13775	Delaware
Garrattsville	13342	Otsego
Hartwick	13348	Otsego
Maryland	12116	Otsego
Milford	13807	Otsego
Richfield Springs	13439	Otsego
Roseboom	13450	Otsego

Bassett Medical Center's primary service area continued:

Town	Zip Code	County
Schuyler Lake	13457	Otsego
Springfield Center	13468	Otsego
West Burlington	13482	Otsego
Westford	13488	Otsego

A.O. Fox Memorial Hospital is a 100-bed acute care facility located in Oneonta, New York. In addition to inpatient hospital services, A.O. Fox Memorial Hospital also provides a broad spectrum of outpatient health care to the Oneonta region including emergency services, urgent care, family medicine/primary care, OB/GYN, and dental, as well as a retail pharmacy, fitness center and other specialty care. Outpatient services are provided in several satellite offices including the FoxCare Center in Oneonta.

On January 1, 2010, the Board of Trustees approved agreements making A.O. Fox Memorial Hospital an affiliate hospital within the Bassett Healthcare Network. The affiliation allows Bassett Medical Center and A.O. Fox Memorial Hospital to collaborate on the delivery of health care to people in the region. A.O. Fox Memorial Hospital will consolidate labor and delivery services with the program at the Bassett Medical Center's Birthing Center in Cooperstown by January 1, 2017.

The primary service area for A.O. Fox Memorial Hospital includes Otsego County and some zip codes in Northern Delaware County. The service area includes the following zip codes:

Town	Zip Code	County
Charlottesville	12036	Delaware
East Worcester	12064	Otsego
Maryland	12116	Otsego
Schenevus	12155	Otsego
Worcester	12197	Otsego
Burlington Flats	13315	Otsego
Edmeston	13335	Otsego
Garrattsville	13342	Otsego
Hartwick	13348	Otsego
New Berlin	13411	Otsego
New Lisbon	13415	Otsego
Westford	13488	Otsego
Colliersville	13747	Otsego
Davenport	13750	Delaware
Davenport Center	13751	Delaware
East Meredith	13757	Delaware
Franklin	13775	Delaware
Hobart	13788	Delaware
Laurens	13796	Otsego
Milford	13807	Otsego
Morris	13808	Otsego
Mount Vision	13810	Otsego
Oneonta	13820	Otsego
Otego	13825	Otsego
Portlandville	13834	Otsego
South Kortright	13842	Delaware
South New Berlin	13843	Otsego
Treadwell	13846	Delaware
Unadilla	13849	Otsego
Wells Bridge	13859	Otsego
West Oneonta	13861	Otsego

b. County Health Department

The mission of the Otsego County Health Department is to work in partnership with the community to improve and protect the health and well-being of all residents of Otsego County through health education, disease control and prevention, and public health preparedness.

Some of their services include information on health topics such as: communicable diseases, diabetes, head lice, health awareness and prevention, high blood pressure, immunizations, lead poisoning prevention and infant/child product recalls, maternal child health, MRSA, Flu, proper disposal of prescriptions and over the counter drugs, emergency preparedness, rabies, radon, sexually transmitted diseases, smoking and tobacco, and West Nile virus, as well as, a public health clinic for adult and child immunizations, checking for proper installation of car seat, the early intervention program to identify and track infant and toddlers for developmental delays and rabies clinics for pets.

c. Process and Methodology for Conducting the Assessment

MVPHIP collaborated with the local health department and hospital to compile a list of key informants in the service region. Those key informants represent a broad range of sectors, community interests and included organizations which represent the medically underserved, low-income and minority populations. The key informants were invited to participate in online survey from July through September 9, 2016. 135 stakeholders took part, see table below:

Key Informant Type	Number Invited	Number Participated
Aging/Senior Services	28	6
Behavioral Health (Mental Health & Substance Abuse)	29	9
Business	15	2
Early Childhood Services	8	3
Education	47	17
Employment & Training	3	1
Faith Based Community	15	3
Family Services	58	4
Health Care	143	46
Healthy Environment	13	1
Housing Services	9	2
Immigrant/Refugee Services	2	0
Intellectual or Developmental Disabilities	25	5
Law Enforcement	13	0
Municipal Governments	46	4
Physical Disability Services	10	1
Social Services	49	6
STI/HIV Prevention	1	0
Other	0	25
Total	514	135

Survey participants also indicated their organization's primary function and the population(s) they serve (see figures 1 and 2.)

Figure 1

What is your organization's primary function?

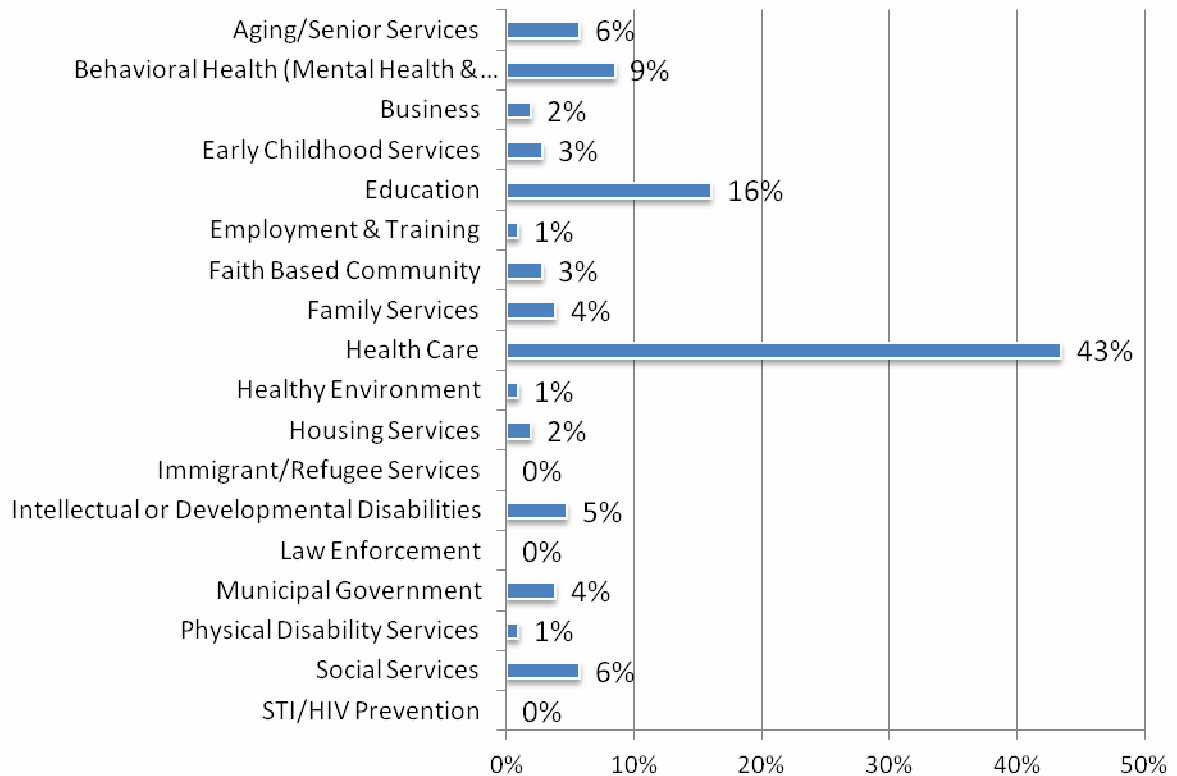
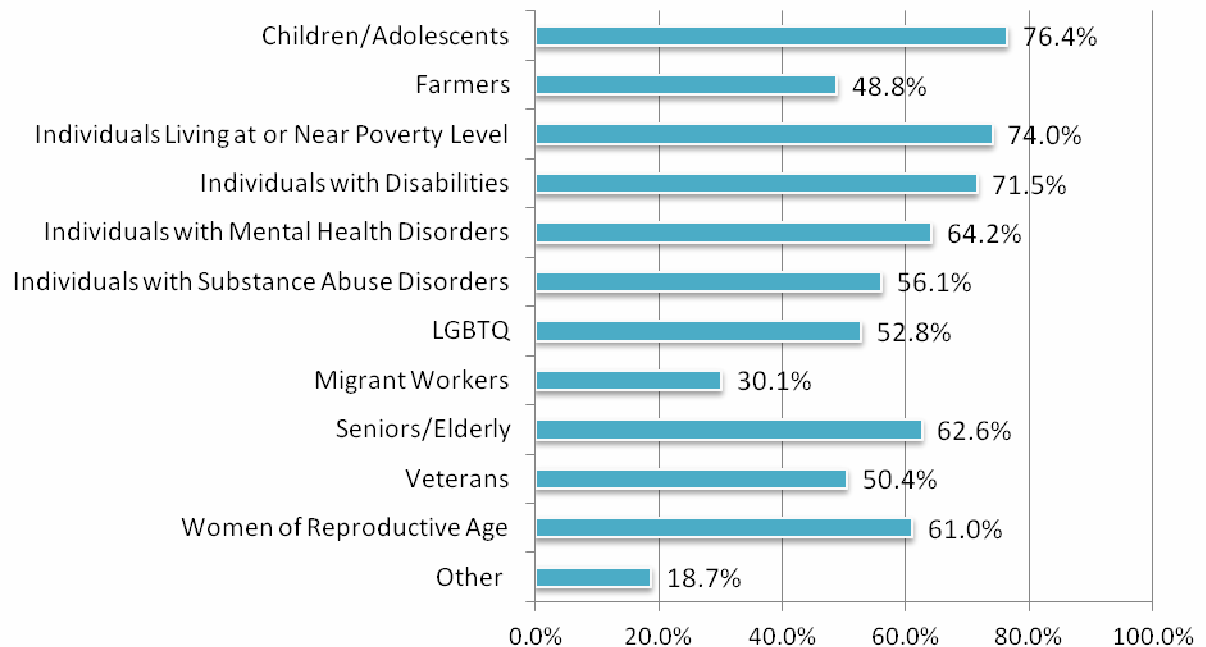


Figure 2

Which populations does your organization serve?



In addition to the key informant responses, the assessment includes primary data collection from Otsego County youth, quantitative data sources from over 300 different health indicators collected and published by New York State, as well as, 175 health indicators included on the MVPHIP website compiled by Healthy Communities Institute. The MVPHIP website brings non-biased data, local resources, and reporting tools to one accessible, user-friendly location. The site includes a comprehensive dashboard of community indicators covering over 20 topics in the areas of health, social determinants of health, and quality of life. The data is primarily derived from state and national public secondary data sources.

Secondary Data Sources Include:

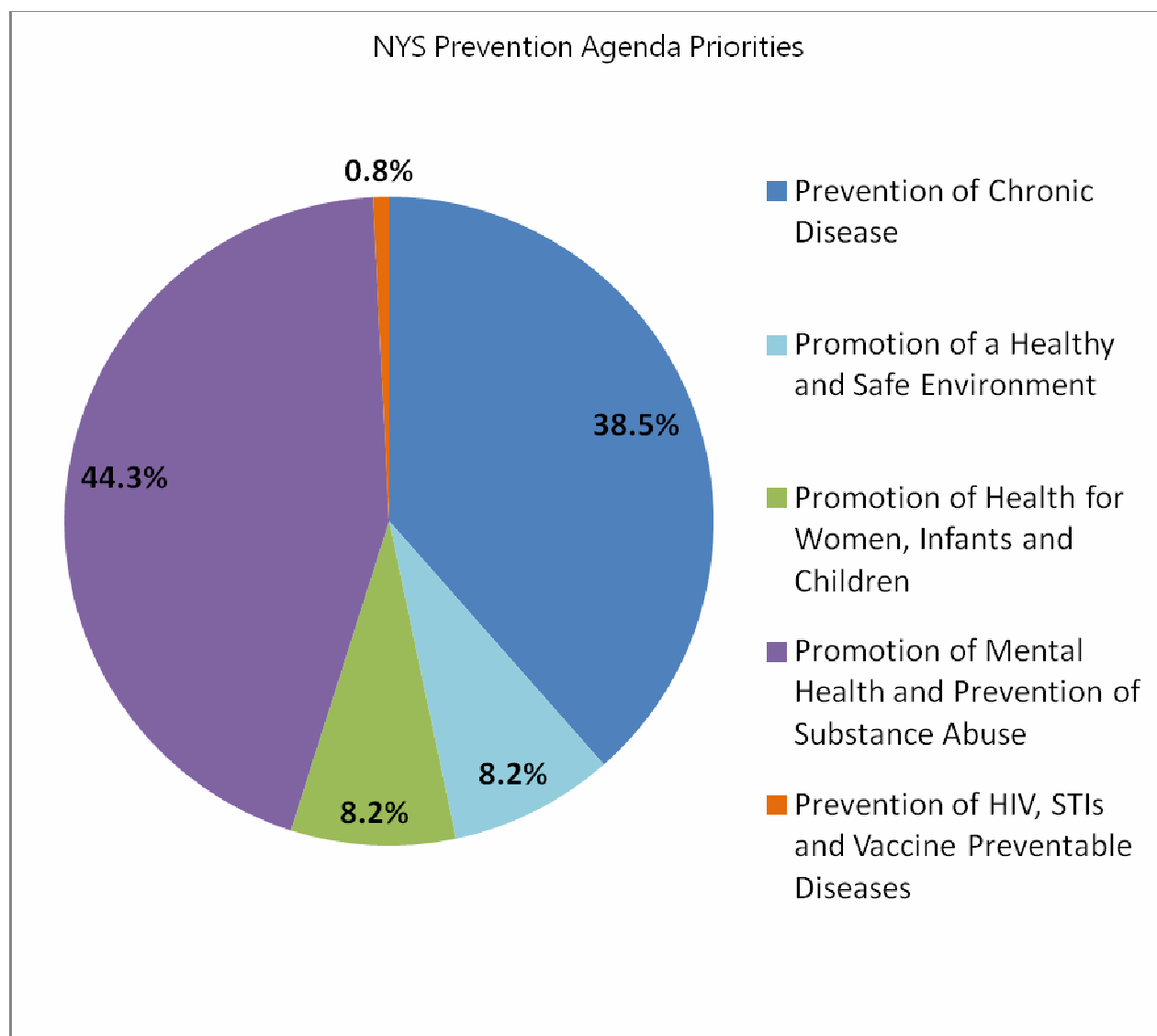
- American Community Survey
- Center for Medicare & Medicaid Services – Chronic Conditions
- Centers for Disease Control and Prevention - CDC Wonder
- Council on Children and Families Kids' Well-being Indicators Clearinghouse
- County Health Rankings & Roadmaps
- Feeding America
- Institute for Health Metrics and Evaluation
- National Cancer Institute – State Cancer Profiles
- New York Expanded Behavioral Risk Factor Surveillance System
- New York State Community Health Indicator Reports
- New York State Department of Health's Opioid Poisoning, Overdose and Prevention 2015 Report
- New York State Division of Criminal Justice Services - 2015 Crime Statistics by County
- New York Statewide Planning and Research Cooperative System (SPARCS)
- Small Area Health Insurance Estimates
- U.S. Census – County Business Patterns
- U.S. Census - QuickFacts
- U.S. Department of Agriculture – Food Environment Atlas
- U.S. Environmental Protection Agency Release - Geography Report

In addition to the secondary data sources, the MVPHIP, in conjunction with Otsego County Health Department, conducted an Otsego County Youth Risk Behavior Survey (YRBS) in April of 2016. The primary and secondary data indicators are grouped by New York State Prevention Agenda Action Plans and are compared with the county and state levels or by time series.

d. Ranking of Priorities

Stakeholders had an opportunity to identify and rank their health priorities in the survey.

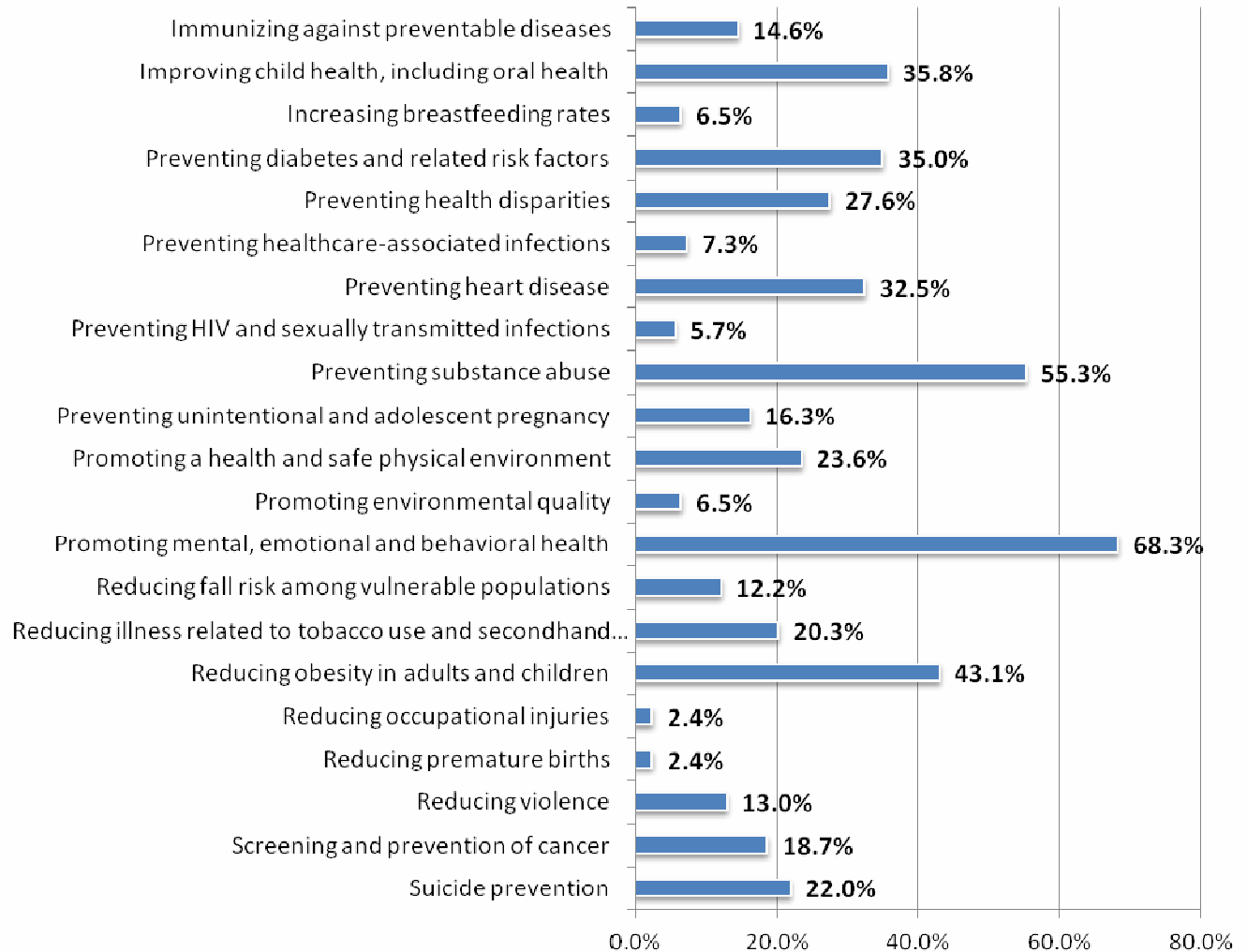
Survey key informants list of priorities:



Based on the key informant survey results, participants ranked Promotion of Mental Health and Prevention of Substance Abuse number one and Prevention of Chronic Disease ranked number two. After selecting the priorities, survey participants were asked to ranked their top five focus areas from all of the Prevention Agenda priorities (figure 3.)

Figure 3

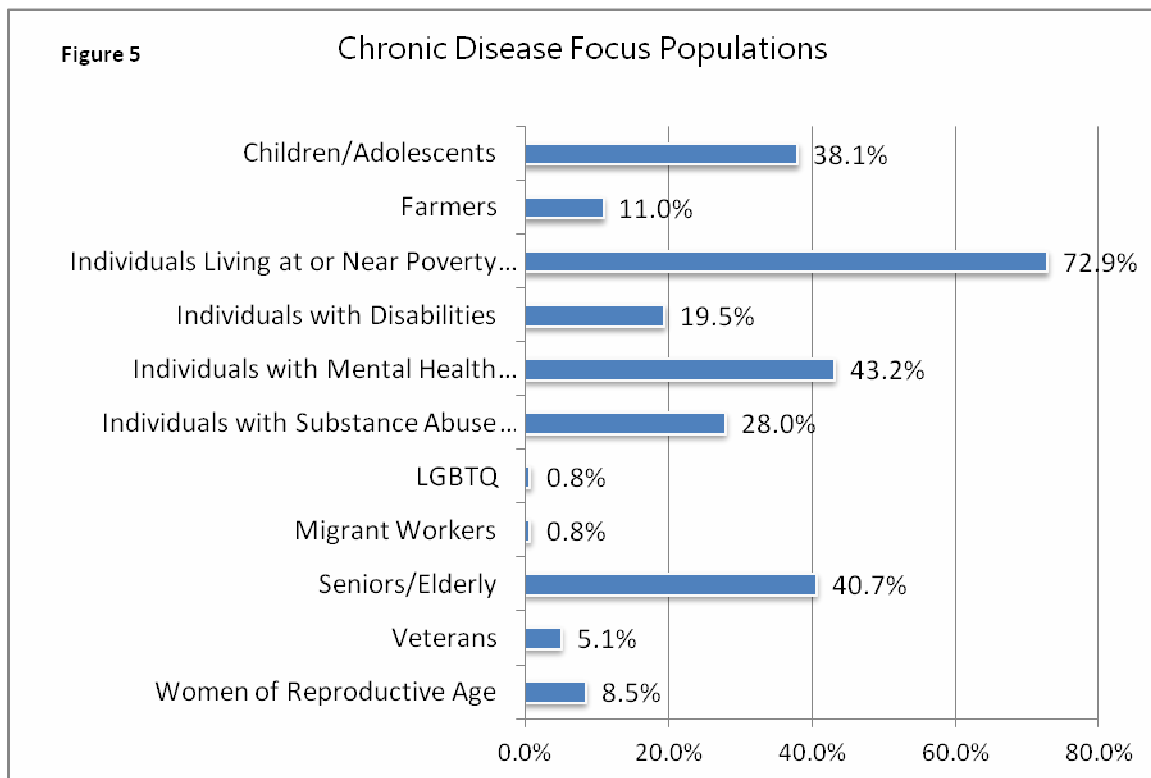
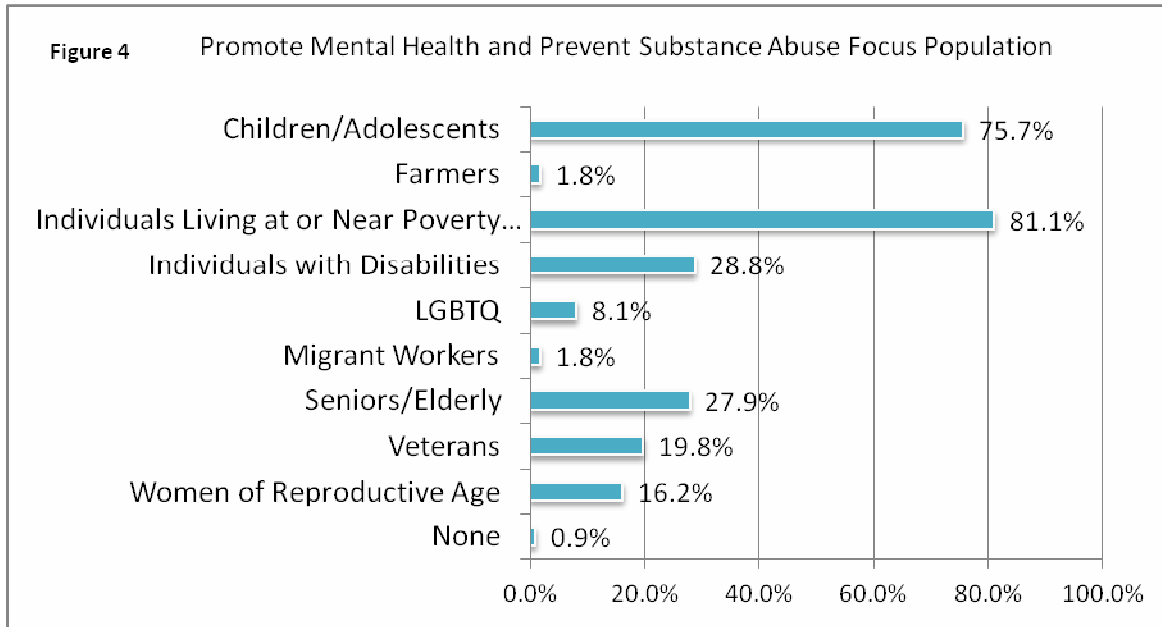
NYS Prevention Agenda Focus Areas



Based on the survey results, the following top five focus areas are tied to the top two selected priorities:

1. Promoting mental, emotional and behavioral health
2. Preventing substance abuse
3. Reducing obesity in adults and children
4. Preventing diabetes and related risk factors
5. Preventing heart disease

Survey participants indicated the following populations should be the focus of targeted efforts to promote mental health and prevent substance abuse in figure 4 and prevent chronic disease in figure 5:



II. New York State's Prevention Agenda 2013-2018:¹

In 2012 the New York State Public Health and Health Planning Council's Public Health Committee set up an Ad Hoc Committee to develop a five year state health improvement plan. The committee assessed the current health status of New York State's population, and the progress to date on Prevention Agenda 2008-2012 goals. The committee developed five priority specific action plans to be used as the blueprint by local health departments and hospitals to improve the health of New Yorkers and March 15, 2015 an additional action plan was added to improve health and reduce health disparities. The six action plans priorities are:

1. Improve Health Status and Reduce Health Disparities
2. Prevent Chronic Diseases
3. Promote a Healthy and Safe Environment
4. Promote Healthy Women, Infants and Children
5. Promote Mental Health and Prevent Substance Abuse
6. Prevent HIV, Sexually Transmitted Diseases, Vaccine-Preventable Diseases and Healthcare-Associated Infections

Each action plan includes specific focus areas, goals and interventions along with health indicators to measure progress toward achieving the goals, including reducing health disparities for individuals with low socio-economic status, disabilities, racial and ethnic groups, as well as other populations who experience them.

¹ Adapted from the New York State Department of Health's Prevention Agenda website, https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/

III. Community Description:

a. Geography:

Bassett Medical Center and A.O. Fox Memorial Hospital are located in Otsego County, New York. Schoharie County lies to the East, Madison and Chenango counties are to the West with Delaware County to the South and Herkimer County to the North. Otsego County is predominately rural and the land area in square miles is 1001.70 with a population per square mile at (62.2) compared with the state (411.2) and the U.S. (87.4). The county consists of the following municipalities: the villages of Cherry Valley, Cooperstown, Gilbertsville, Laurens, Milford, Morris, Otego, Richfield Springs and Unadilla, the towns of Burlington, Butternuts, Cherry Valley, Decatur, Edmeston, Exeter, Hartwick, Laurens, Maryland, Middlefield, Milford, Morris, New Lisbon, Oneonta, Otego, Otsego, Pittsfield, Plainfield, Richfield, Roseboom, Springfield, Unadilla, Westford and Worcester, and the City of Oneonta.

b. Economy:²

Otsego is one of 14 New York State counties in the Appalachian Region. The Appalachian Region's economy historically was dependent on mining, forestry, agriculture, and chemical and heavy industries but currently includes manufacturing and professional service industries. Agriculture remains one of Otsego County's industries through dairy farming. Tourism also contributes to the economy. It is home to the National Baseball Hall of Fame, Farmers Museum, Fenimore Art Museum, the Foothills Performing Arts and Civic Center, and The Glimmerglass Festival, as well as, two summer baseball camps: Cooperstown Dreams Park and Cooperstown All Star Village. In addition to agriculture and tourism, county has two colleges in the City of Oneonta: Hartwick College and the State University of New York at Oneonta.

² Adapted from New York State Counties descriptions, <http://www.ny.gov/counties/schoharie> and the Appalachian Regional Commission website, http://www.arc.gov/appalachian_region/TheAppalachianRegion.asp

c. Demographics:³

Demographics	Delaware County	Otsego County	New York State	United States
Population estimates	46,053	60,636	19,795,791	321,418,820
% White	95.2	94.4	70.1	77.1
% Black/African American	2.1	2.3	17.6	13.3
% American Indian and Alaska Native	0.3	0.2	1.0	1.2
% Asian	1.0	1.5	8.8	5.6
% Two or More races	1.3	1.6	2.4	2.6
% Hispanic/Latino	3.9	3.7	18.8	17.6
% Persons under 5 yrs.	4.5	4.2	6.0	6.2
% Person under 18 yrs.	17.7	16.6	21.3	22.9
% Persons 65 years and over	22.8	19.2	15.0	14.9
% High School graduate or higher, % of persons 25 years+, 2010-2014	87.5	89.4	85.4	86.3
% Bachelor's degree or higher, percent of persons age 25 years+, 2010 -2014	20.5	27.2	33.7	29.3
Median Household Income, 2010 -2014	\$44,183	\$47,884	\$58,687	\$53,482
% Individuals below poverty level	13.5	16.4	15.6	15.6
% With a disability, under age 65 years, 2010-2014	10.9	8.6	7.3	8.5

³ United States Census QuickFacts, July 1, 2015 and American Community Survey

IV. Community Assets and Resources:

a. New York State Health Care Transformation Initiatives:

New York State Department of Health has multiple initiatives to achieve the “Triple Aim.” The Triple Aim focuses on three dimensions: improving patient experience, improving population health and reducing health care costs. Each of these initiatives contributes to the pursuit of those dimensions.

- Accountable Care Organizations:⁴

Accountable Care Organizations (ACOs) are groups of doctors, hospitals, and other health care providers, working together to provide higher-quality coordinated care to their patients, while helping to slow health care cost growth. ACOs share with Medicare savings generated from lowering the growth in health care costs when they meet standards for high quality care. Bassett Healthcare Network’s Bassett Accountable Care Partners, LLC was selected as one of 89 new Medicare Shared Saving Programs beginning January 1, 2015. The Mary Imogene Bassett Hospital (dba: Bassett Medical Center) and A.O. Fox Memorial Hospital are Bassett Accountable Care Partners, LLC participants.

- Delivery System Reform Incentive Payment (DSRIP) Programs:⁵

On April 14, 2014 Governor Cuomo announced that Center of Medicaid and Medicare Services approved New York’s waiver request to reinvest the \$8 billion generated by Medicaid Redesign Team (MRT) reforms. DSRIP’s purpose is to fundamentally restructure the health care delivery system by reinvesting in the Medicaid program, with the primary goal of reducing avoidable hospital use by 25% over 5 years. Each DSRIP project has specific milestones and metrics with an incentive based payment model that allocates payout upon achieving predefined results in system transformation, clinical management and population health. Additionally, a number of quality goals must be achieved including access measures, preventive care and care coordination. The DSRIP program covers a five-year period beginning April 1, 2015 and ending March 31, 2020.

Bassett Medical Center, A.O. Fox Memorial Hospital and Otsego County Health Department are participating partners in Bassett Healthcare Network’s Leatherstocking Collaborative Health Partners (LCHP) PPS. LCHP includes providers and community based organizations

⁴ Adapted from Bassett Healthcare Network website, <http://www.bassett.org/information/myhealthy-decisions/news/bassett-accountable-care-partners-llc/>

⁵ Adapted from the LCHP website, <http://leatherstockingpartners.org/>

from Delaware, Herkimer, Madison, Otsego and Schoharie counties. LCHP has 11 projects from New York State approved list organized by three domains: system transformation, clinical improvement and population health.

Domain	Number	Name	Description
2: System Transformation	2.a.ii.	Patient Centered Medical Homes (PCMH)	Increase Certification of Primary Care Practitioners with PCMH Certification and/or Advanced Primary Care Models (as developed under the NYS Health Innovation Plan (SHIP)
2: System Transformation	2.b.vii	INTERACT in Skilled Nursing Facilities)/Long-Term Care	Implementing the INTERACT Project (Inpatient Transfer Avoidance Program for Skilled Nursing Facility).
2: System Transformation	2.b.viii	Hospital-Home Care Collaboration	Hospital-Home Care Collaboration Solutions.
2: System Transformation	2.c.i	Navigation Program	To Develop a Community Based Health Navigation Service to Assist Patients to Access Healthcare Services Efficiently.
2: System Transformation	2.d.i	Patient Activation Measure (PAM) for Uninsured	Implementation of Patient Activation Activities to Engage, Educate and Integrate the uninsured and low/non-utilizing Medicaid populations into Community Based Care.
3: Clinical Improvement	3.a.i	Behavioral Health	Integration of Primary Care and Behavioral Health Services.
3: Clinical Improvement	3.a.iv	Withdrawal Management	Development of Withdrawal Management (e.g., ambulatory detoxification, ancillary withdrawal service) Capabilities and Appropriate Enhanced Abstinence Services within Community-Based Addiction Treatment Programs.
3: Clinical Improvement	3.d.iii	Asthma	Implementation of Evidence Based Medicine Guidelines for Asthma Management.
3: Clinical Improvement	3.g.i	Palliative Care	Integration of Palliative Care into the Patient Centered Medical Home Model.
4: Population Health	4.a.iii	Mental Health and Substance Abuse	Strengthen Mental Health and Substance Abuse Infrastructure across Systems.
4: Population Health	4.b.i	Tobacco Cessation	Promote tobacco use cessation, especially among low SES and those with poor mental health.

- Population Health Improvement Programs:⁶

The Population Health Improvement Programs (PHIP) will promote the Triple Aim of: better care, better population health and lower health care costs by convening regional stakeholders and establishing neutral forums for identifying, disseminating, and implementing best practices and strategies to promote population health and reduce health care disparities in their respective regions. The PHIP will help achieve improvements in population health through stakeholder collaboration, data-driven prioritization, and regional strategies for addressing health disparities. The PHIP supports and advances the ongoing activities of New York State Prevention Agenda and the State Health Innovation Plan, as well as, serves as a resource for the local Performing Providers Systems.

Bassett Medical Center, A.O. Fox Memorial Hospital and Otsego County Health Department are active members of the Mohawk Valley PHIP board. The Bassett Healthcare Network's Bassett Research Institute is the contractor for the Mohawk Valley PHIP which comprises Fulton, Herkimer, Montgomery, Otsego and Schoharie counties. Following a careful review of local health data and extensive discussion, the Mohawk Valley PHIP board and stakeholders have identified two regional population health priorities of Behavioral Health and Obesity. Workgroups were formed to tackle these health priorities.

- NY State Health Innovation Plan and State Innovation Model:

State Health Innovation Plan (SHIP) drives the evolution of health delivery and payment systems. The goal is to identify and stimulate promising innovations in health care delivery and payment which result in optimal health outcomes for all New Yorkers.

New York's State Innovation Model (SIM) testing grant seeks to transform primary care delivery and payment models across the New York State, with the goal of reaching 80 percent of New York's primary care patients.

⁶ Adapted from the Mohawk Valley PHIP website, <http://www.mvphp.org/>

b. Resources Available to Address Health Needs:

The MVPHIP website contains links to community resources which connect the individuals to health and human service providers by region, counties and zip codes across New York State.⁷

- United Way's 2-1-1 is an easy-to-remember toll free telephone number with confidential community referral that connects callers with community based resources providing food, shelter, rent assistance, clothing, child care options and other types of community assistance. Trained referral specialists are available to help individuals. 2-1-1 Resources are also available on the web.
- New York State Office of Alcoholism and Substance Abuse Services' (OASAS) website has a treatment provider directory search, bed availability dashboard, gambling treatment and prevention, developmental disability services, and resources for providers of clinical screening, and assessment services for the impaired driving offender.
- NY Connects Resource Directory helps individuals connect to services and supports, such as health care, basic needs, consumer services, education, environment and public safety, income support and employment, individual and family life, mental health and substance abuse, organizational/community/international services, and criminal justice and legal services or individuals can browse by target populations. NY Connects serves individuals who have specific disabilities, medical diagnoses, ethnic backgrounds, national origins, family relationships, income levels, religious affiliations, special problems or considerations, or other targeted characteristics. They also work to help families, caregivers, and professionals.
- Eldercare Locator, a public service of the U.S. Administration on Aging connects individuals to services for older adults and their families on the web. Eldercare also has a toll free number 1-800-677-1116.

⁷ Adapted from the Mohawk Valley PHIP website, <http://www.mvphip.org/>

V. Health Status by Prevention Agenda Indicators:

1. Improve Health Status and Reduce Health Disparities

Focus Area 1 – Improve the health status of all New Yorkers

According to Healthy People 2020 health disparities are defined as a health outcome which is seen to a greater or lesser extent between populations. Ethnicity, sex, sexual identity, age, race, disability, socio-economic status, and geographic location contribute to an individual's ability to attain good health.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of premature deaths (before age 65 yrs.) (Vital Records Data, 2014)	21.8	23.7	20.2	Better	20.7	Better
Premature deaths: ratio of blacks non-Hispanics to white non-Hispanics (Vital Records Data, 2012-2014)	1.87	1.98	1.76	Better	2.90	Worse
Premature deaths: ratio of Hispanics to white non-Hispanics (Vital Records Data, 2012-2014)	1.86	1.92	1.21	Better	1.45	Better
Age-adjusted preventable hospitalizations rate per 10,000 - Aged 18+ years (SPARCS, 2014)	122.0	119.0	103.9	Better	108.2	Better
Preventable hospitalizations: Ratio of Black non-Hispanics to White non-Hispanics (Vital Records Data, 2012-2014)	1.85	2.11	0.79	Better	0.85	Better
Preventable hospitalizations: Ratio of Hispanics to White non-Hispanics (Vital Records Data, 2012-2014)	1.38	1.52	0.32	Better	0.32	Better
Percentage of adults (aged 18-64) with health insurance (US Census Bureau, 2014)	100	87.6	88.7	Better	89.5	Better
Age-adjusted percentage of adults who have a regular health care provider-Aged 18+ yrs	90.8	84.4	81.8	Worse	83.3	Worse

1. Improve Health Status and Reduce Health Disparities

Focus Area 1 – Improve the health status of all New Yorkers

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Life Expectancy for Females (Institute for Health Metrics and Evaluation, 2010)	82.2	80.6	Worse	81.3	Worse
Life Expectancy for Males (Institute for Health Metrics and Evaluation, 2010)	77.7	76.4	Worse	76.8	Worse
Non-Physician Primary Care Provider Rate per 100,000 population (County Health Rankings, 2015)	86	73	Worse	258	Better
Percentage of Adults Aged 18-64 who saw a doctor for routine checkup within the last year (NYS eBRFSS, 2013-2014)	70.9	62.2*	Worse	67.5	Worse
Percentage of Adults aged 18-64 with healthcare coverage (NYS eBRFSS, 2013-2014)	86	83.9*	Worse	88*	Better
Percentage of Adults experiencing food insecurity in the past 12 months (NYS eBRFSS, 2013-2014)	29.4	26	Better	33.1	Worse
Percentage of Adults living with a disability (NYS eBRFSS, 2013-2014)	19.9	22.1	Worse	23.9	Worse
Percentage of Adults reporting poor self-reported health (NYS eBRFSS, 2013-2014)	4.3	4.2	Better	4.6	Worse
Percentage of Adults who did not receive medical care because of costs (NYS eBRFSS, 2013-2014)	13.6	7.9	Better	12.4	Better

*Rate should be viewed with caution due to a large standard error.

1. Improve Health Status and Reduce Health Disparities

Focus Area 1 – Improve the health status of all New Yorkers

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of Adults who had a dentist visit within the past year (NYS eBRFSS, 2013-2014)	69.3	56.9	Worse	66.4	Worse
Dentists per 100,000 population (County Health Rankings, 2014)	78	34	Worse	47	Worse
Percentage of Adults who report 14 or more days of poor physical health (NYS eBRFSS, 2013-2014)	11.3	12.3	Worse	13.9	Worse
Primary Care Provider Rate per 100,000 population (County Health Rankings, 2013)	83	41	Worse	112	Better

1. Prevent Chronic Diseases

Focus Area 1 – Reduce Obesity in Children and Adults:

Obesity is the second leading cause of preventable death. It increases the risk for asthma, heart disease, hypertension and type-2 diabetes. Among the United States, New York ranks second highest for healthcare costs attributed to obesity.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of adults aged 18 years and older with an annual household income less than \$25,000 who are obese (NYS eBRFSS, 2013-2014)	25.4	28.5	18.1	Better	27.8*	Better
Percentage of adults aged 18+ yrs. with disabilities who are obese (NYS eBRFSS, 2013-2014)	31.4	35.4	33.9*	Better	36.4*	Same
Percentage of adults who are obese (NYS eBRFSS, 2013-2014)	23.2	24.9	25.8	Worse	25.9	Worse
Percentage of adults who consume one or more sugary drinks daily (NYS eBRFSS, 2013-2014)	19.5	24.7	34.5	Worse	33.6	Worse
Percentage of adults who participated in leisure time physical activity in the past 30 days (NYS eBRFSS, 2013-2014)	77.4	72.9	74.7	Better	72.6	Same
Percentage of children and adolescents who are obese (Student Weight Status Category Reporting System 2012-2014)	16.7	17.3	19.3	Worse	15.9	Better

*Rate should be viewed with caution due to a large standard error.

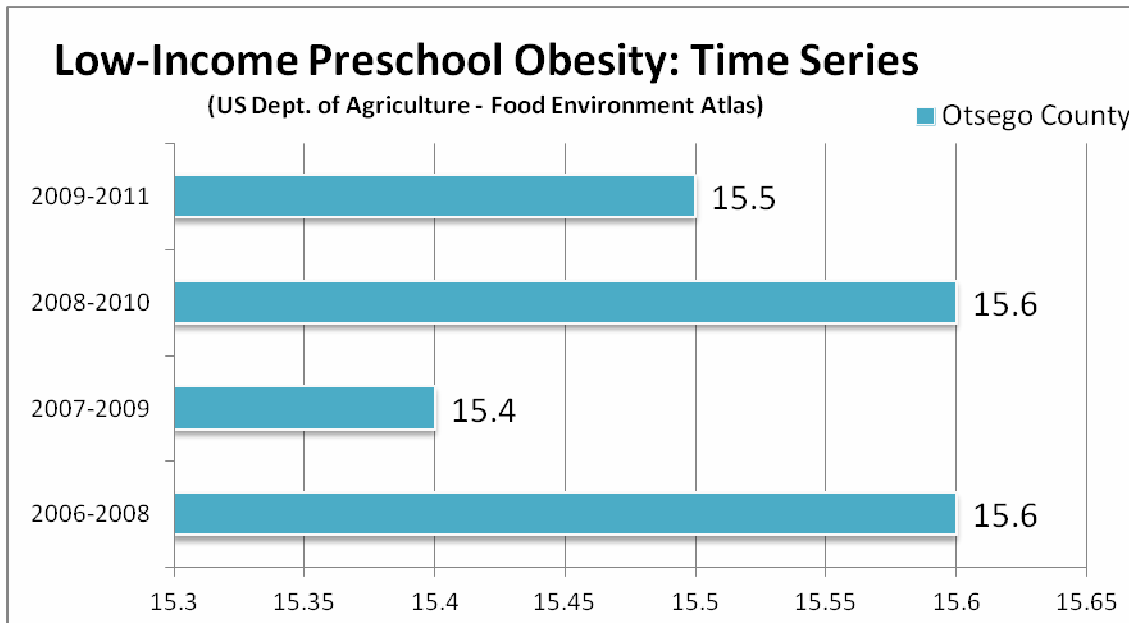
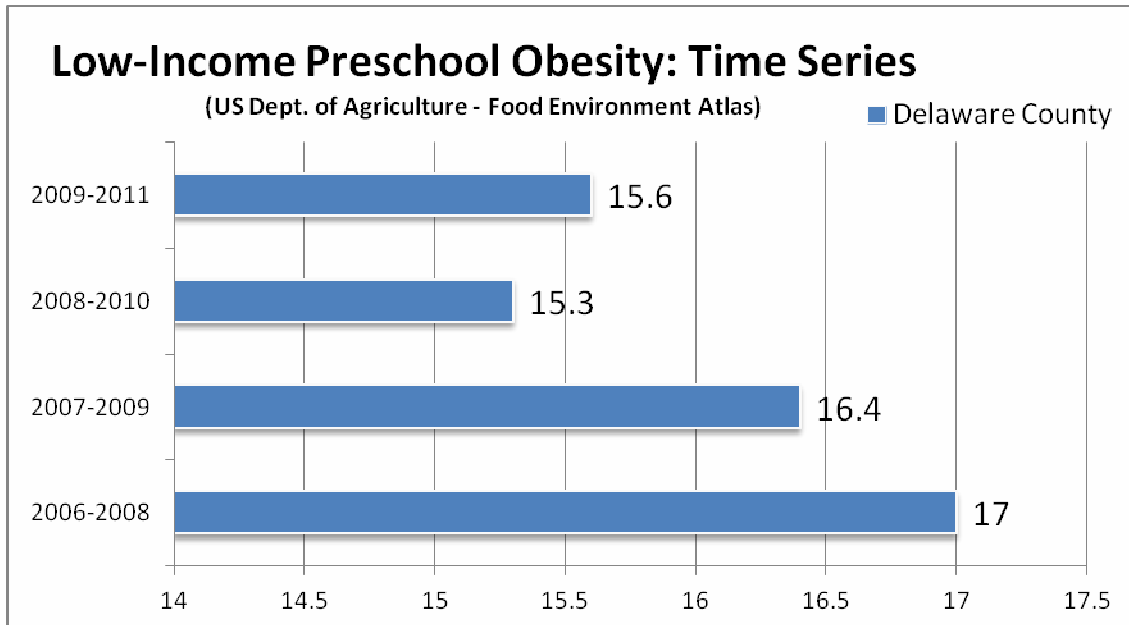
2. Prevent Chronic Diseases

Focus Area 1 – Reduce Obesity in Children and Adults:

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of Adults overweight and obese (NYS eBRFSS, 2013-2014)	60.5	58.6	Better	64	Worse
Percentage of Adult Fruit and Vegetable Consumption (NYS eBRFSS, 2008-2009)	27.1	24.2	Worse	28.1	Better
Percentage of Adults who consume fast-food three or more times per week (NYS eBRFSS, 2013-2014)	5.9	N/A	N/A	4.20	Better
Percentage of Elementary School Students who are Overweight or Obese (NYSDOH CHIRS, 2012-2014, NYS rate excludes NYC)	33.1	36.1	Worse	29.8	Better
Percentage of Food Insecurity (Feeding America 2014)	13.5	11.6	Better	11.6	Better
Percentage of Middle and High School Students who are Overweight or Obese (NYSDOH CHIRS, 2012-2014, NYS rate excludes NYC)	35.2	39.6	Worse	34.9	Better

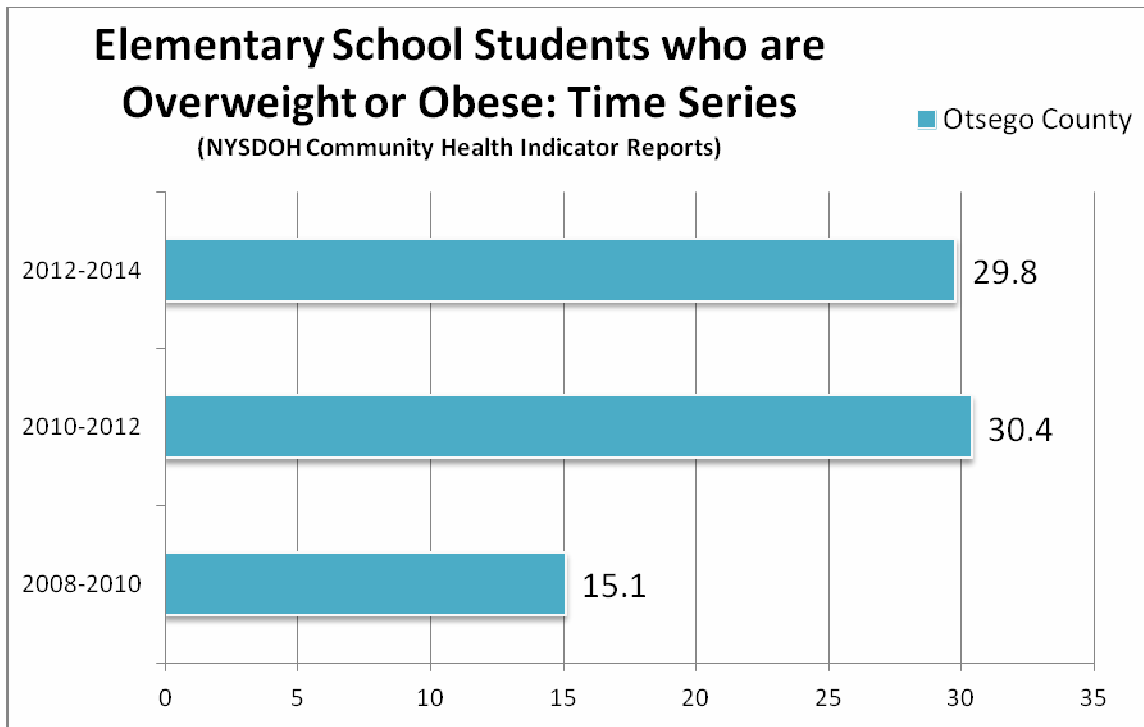
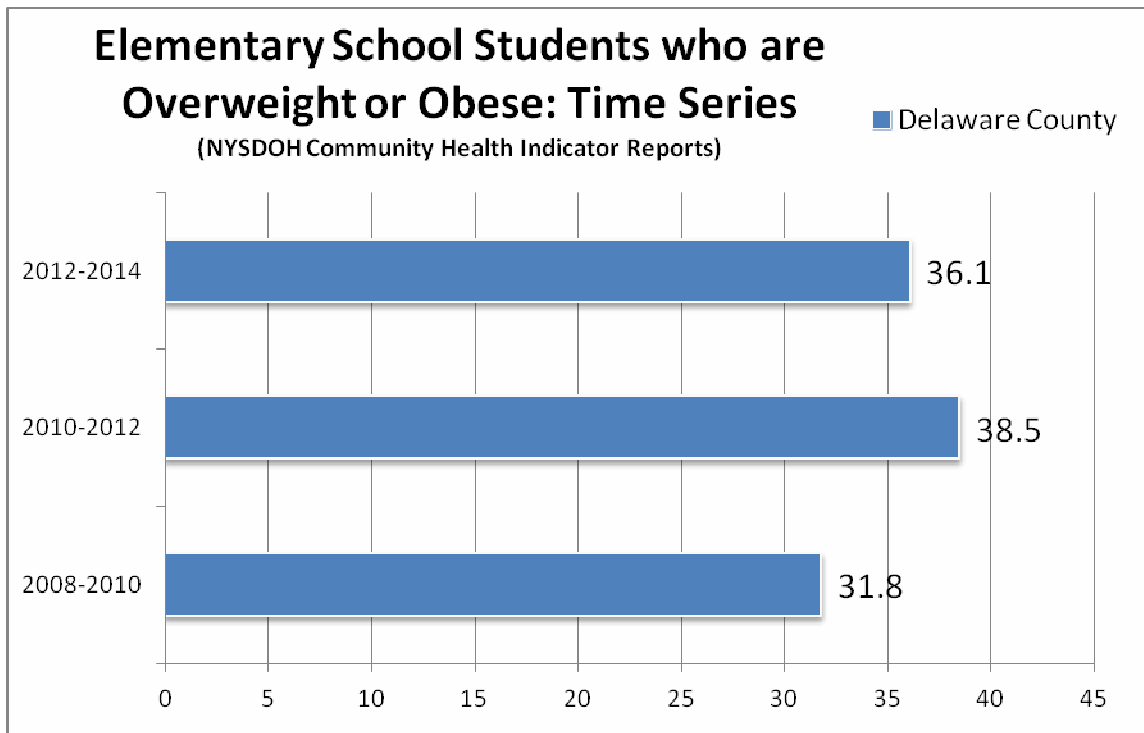
2. Prevent Chronic Diseases

Focus Area 1 – Reduce Obesity in Children and Adults:



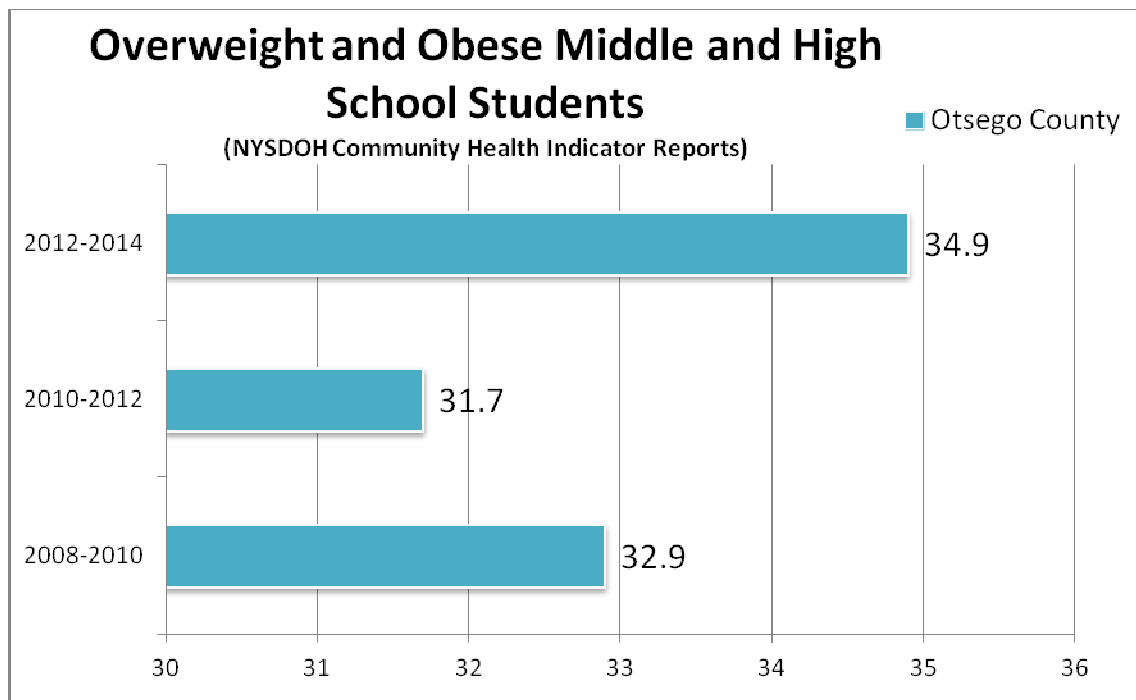
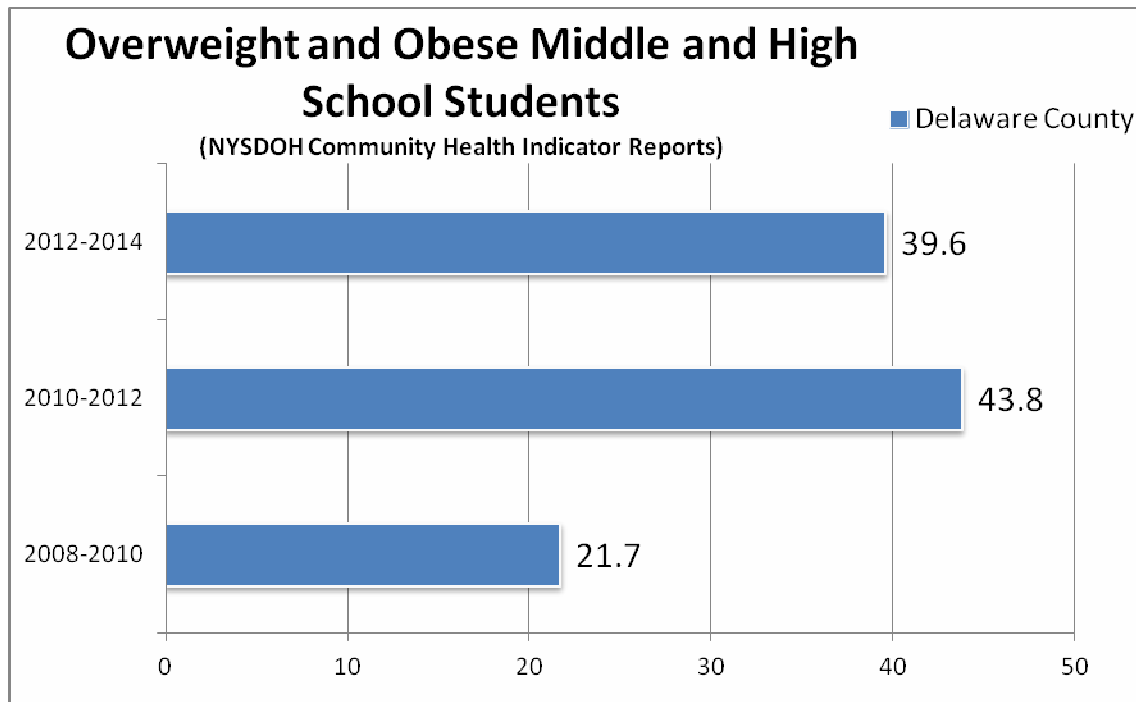
2. Prevent Chronic Diseases

Focus Area 1 – Reduce Obesity in Children and Adults:



2. Prevent Chronic Diseases

Focus Area 1 – Reduce Obesity in Children and Adults:



2. Prevent Chronic Diseases

Focus Area 1 – Reduce Obesity in Children and Adults:

Otsego County Youth Risk Behavior Survey Indicators compared to New York State	New York State 2015	Otsego County 2016	New York State Comparison
Percentage of High School Students Who Were Obese	13.1	10.1	Better
Percentage of High School Students Who Were Overweight	13.9	14.0	Same
Percentage of High School Students Who Described Themselves as Slightly or Very Overweight	29.6	32.7	Worse
Percentage of High School Students Who Were Trying to Lose Weight	44.0	43.8	Same
Percentage of High School Students Who Did Not Eat Fruit or Drink 100% Fruit Juices	9.1	3.9	Better
Percentage of High School Students Who Did Not Drink a can, bottle or glass of soda or pop	34.1	33.4	Better
Percentage of High School Students Who Did Not Drink Milk	30.5	14.2	Better
Percentage of High School Students Who Did Not Eat Breakfast	17.4	11.1	Better
Percentage of High School Students Who Ate Breakfast on All 7 days	34.6	45.6	Better
Percentage of High School Students Who Did Not Participate in at least 60 minutes of Physical Activity on at least 1 day	18.8	7.7	Better
Percentage of High School Students Who Were Physically Active at least 60 minutes per day on 5 or more days	41.8	64.5	Better
Percentage of High School Students Who Were Physically Active at least 60 minutes per day on all 7 days	23.3	38.1	Better

2. Prevent Chronic Diseases

Focus Area 1 – Reduce Obesity in Children and Adults:

Otsego County Youth Risk Behavior Survey Indicators compared to New York State	New York State 2015	Otsego County 2016	New York State Comparison
Percentage of High School Students Who Watched Television 3 or more hours per day	24.2	17.3	Better
Percentage of High School Students Who Played Video or Computer Games or Used a Computer for 3 or more hours per day	37.2	42.1	Worse
Percentage of High School Students Who Attended Physical Education classes on 1 or more days	87.8	96.5	Better
Percentage of High School Students Who Attended Physical Education classes on all 5 days	18.4	9.2	Worse
Percentage of High School Students Who Played on at least One Sports Team	N/A	71.2	N/A

2. Prevent Chronic Diseases

Focus Area 2 – Reduce Illness, Disability and Death Related to Tobacco Use and Secondhand Smoke Exposure:

Tobacco addiction is the leading cause of preventable death. Approximately one-third of all tobacco users will die prematurely. While New York State has had significant reductions in the adult and youth smoking rates, some health disparities exist for those with low-socioeconomic status and poor mental health.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of adults with annual household income less than \$25,000 who are current smokers (NYS eBRFSS, 2013-2014)	20.0	19.9	41.3*	Worse	40.5*	Worse
Percentage of cigarette smoking among adults (NYS eBRFSS, 2013-2014)	12.3	15.6	22.9	Worse	26.3	Worse

*Rate should be viewed with caution due to a large standard error.

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Esophagus Cancer	Esophagus Cancer Incidence Rate; cases per 100,000 population (National Cancer Institute, 2009-2013)	4.7	7.4	Worse	5.4	Worse
Lung Cancer	Age-Adjusted Death Rate 100,000 population due to Lung Cancer (National Cancer Institute, 2009-2013)	41.2	46.3	Worse	52.0	Worse
Lung Cancer	Lung and Bronchus Cancer Incidence Rate; cases per 100,000 population (National Cancer Institute, 2009-2013)	61.8	68.9	Worse	66.5	Worse
Oral Cancer	Oral Cavity and Pharynx Cancer Incidence Rate; cases per 100,000 population (National Cancer Institute, 2009-2013)	10.5	12.6	Worse	12.9	Worse

2. Prevent Chronic Diseases

Focus Area 2 – Reduce Illness, Disability and Death Related to Tobacco Use and Secondhand Smoke Exposure:

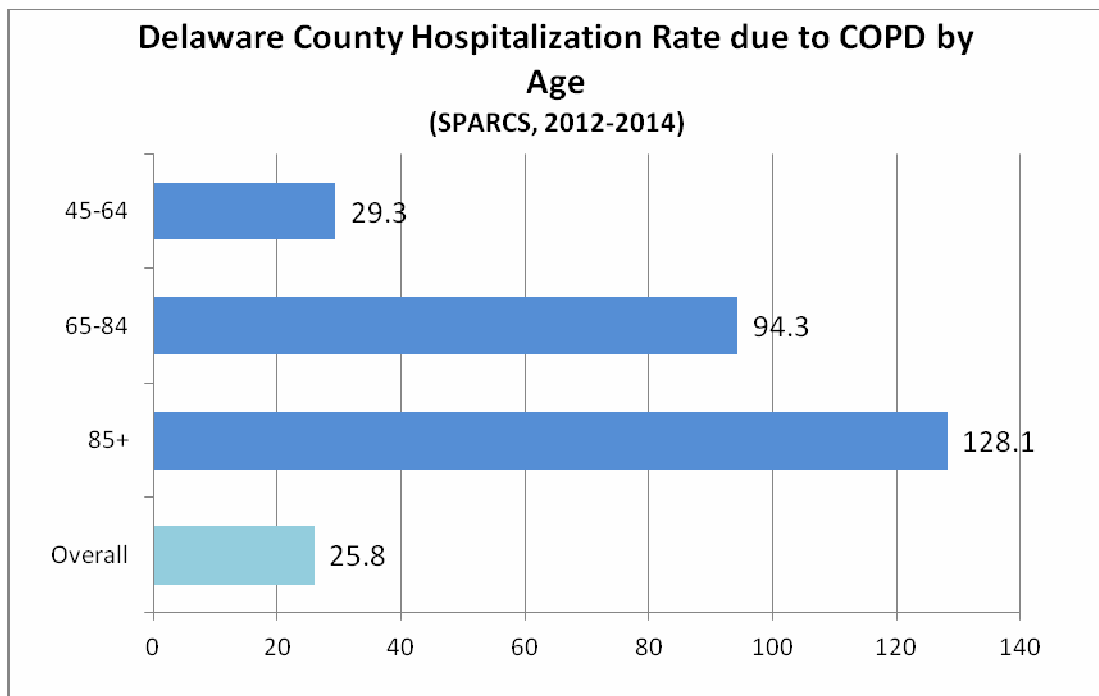
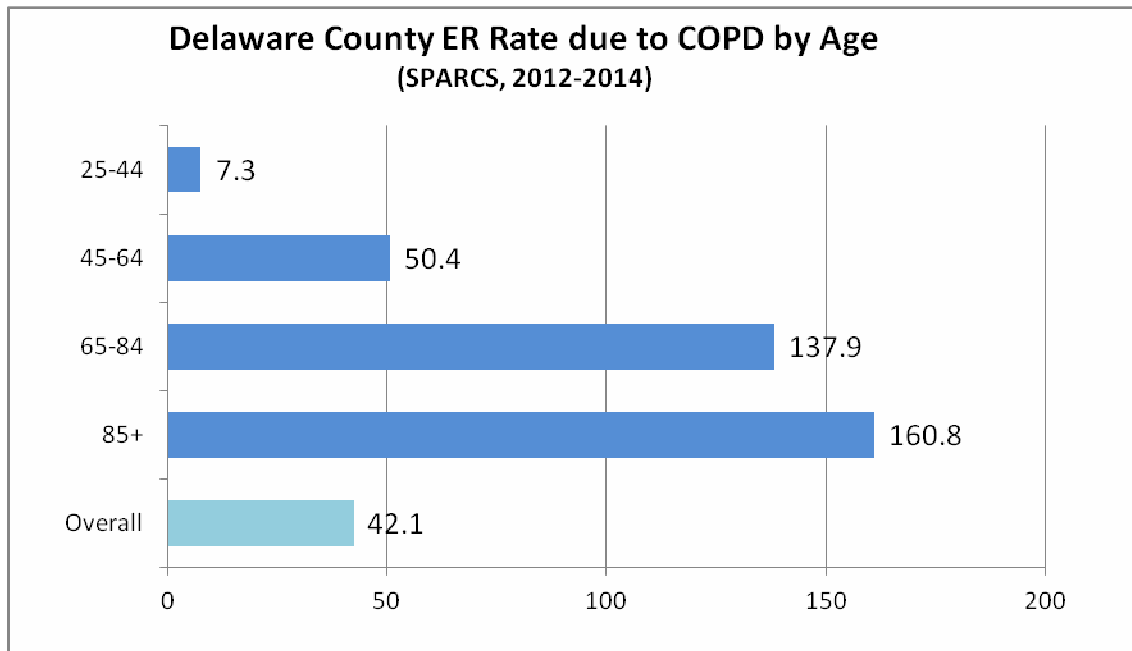
Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Respiratory Diseases	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases (CDC Wonder, 2012-2014)	30.3	57.3	Worse	50.4	Worse
Respiratory Diseases	Percentage of Medicare beneficiaries who were treated for chronic pulmonary disease (COPD) (Centers for Medicare & Medicaid, 2014)	10.3	13.0	Worse	9.8	Better

Other Indicators by Time Series and compared to New York State		Delaware County 2011-2013	Delaware County 2012-2014	New York State 2012-2014
Respiratory Diseases	Age-Adjusted ER Rate due to COPD; ER visits per 10,000 population 18+ yrs. (SPARCS)	38.4	42.1	14.3
Respiratory Diseases	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to COPD (SPARCS)	28.4	25.8	19.1

Other Indicators by Time Series and compared to New York State		Otsego County 2011-2013	Otsego County 2012-2014	New York State 2012-2014
Respiratory Diseases	Age-Adjusted ER Rate due to COPD; ER visits per 10,000 population 18+ yrs. (SPARCS)	17.6	18.5	14.3
Respiratory Diseases	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to COPD (SPARCS)	29.1	28.3	19.1

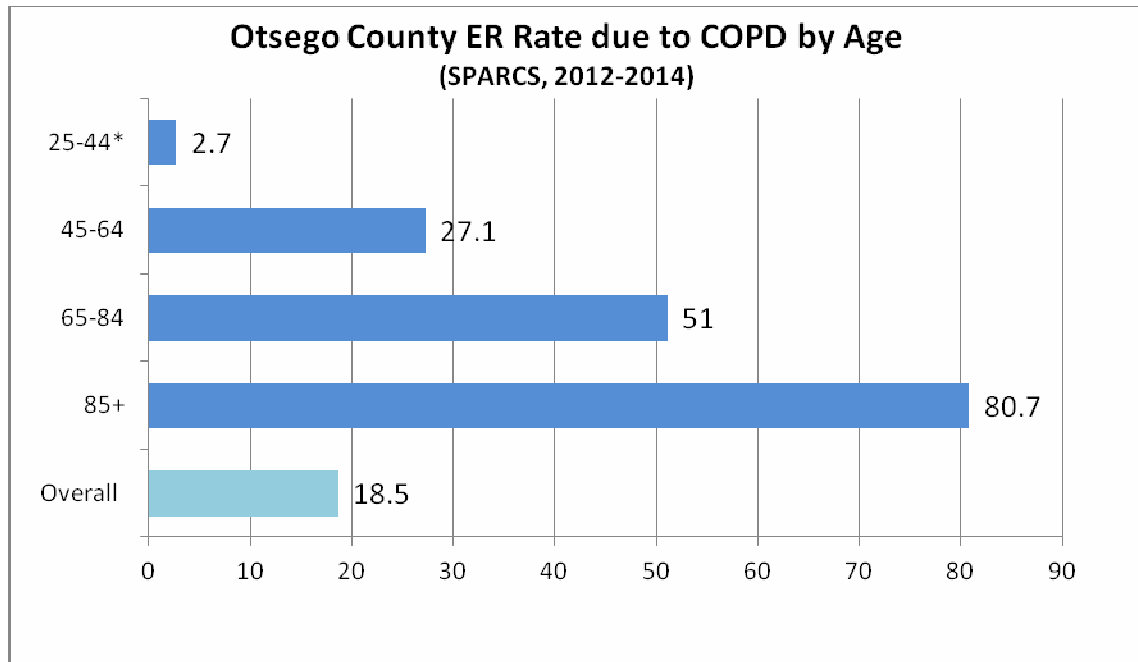
2. Prevent Chronic Diseases

Focus Area 2 – Reduce Illness, Disability and Death Related to Tobacco Use and Secondhand Smoke Exposure:

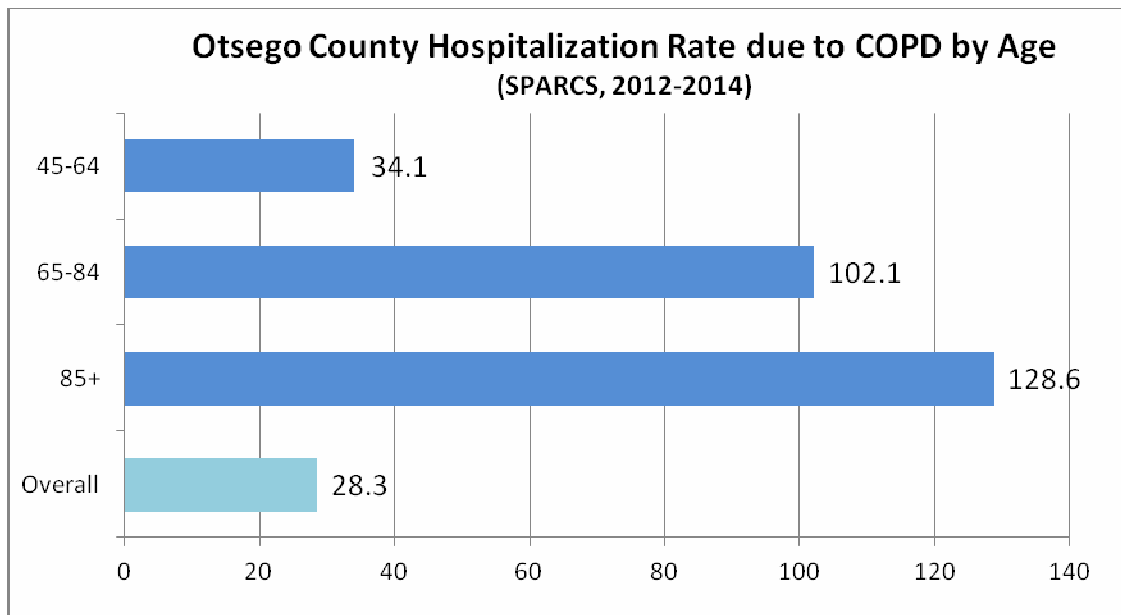


2. Prevent Chronic Diseases

Focus Area 2 – Reduce Illness, Disability and Death Related to Tobacco Use and Secondhand Smoke Exposure:



*Rate should be viewed with caution due to a large standard error.



2. Prevent Chronic Diseases

Focus Area 2 – Reduce Illness, Disability and Death Related to Tobacco Use and Secondhand Smoke Exposure:

Otsego County Youth Risk Behavior Survey Indicators compared to New York State	New York State 2015	Otsego County 2016	New York State Comparison
Percentage of High School Students Who Ever Tried Cigarette Smoking (Even 1 or 2 Puffs)	27.6	27.3	Same
Percentage of High School Students Who Currently Smoked Cigarettes	8.8	10.4	Worse
Percentage of High School Students a Who Currently Smoked Cigarettes Frequently (20 or more days)	2.9	4.0	Worse
Percentage of High School Students Who Smoked More than 10 Cigarettes per day	11.6	13.9	Worse
Percentage of High School Students a Who Smoked Cigarettes on All 30 Days	1.8	2.9	Worse
Percentage of High School Students Who Currently Used Smokeless Tobacco	6.7	8.1	Worse
Percentage of High School Students Who Currently Used Cigars	10.2	8.5	Better
Percentage of High School Students Who Currently Used Tobacco; Cigarette, smokeless tobacco or cigar	28.8	16.6	Better
Percentage of High School Student Who Have Ever Used Electronic Vapor Products	N/A	34.2	N/A
Percentage of High School Student Who Currently Used Electronic Vapor Products	21.7	15.8	Better

2. Prevent Chronic Diseases

Focus Area 2 – Reduce Illness, Disability and Death Related to Tobacco Use and Secondhand Smoke Exposure:

Otsego County Youth Risk Behavior Survey Indicators by Time Series	Otsego County 2007	Otsego County 2016
Percentage of High School Students Who Smoked a Whole Cigarette Before Age 13 Years	13.1	4.7
Percentage of High School Students Who Usually Obtained their own Cigarettes by Buying them in a Store or Gas Station	9.7	4.6
Percentage of High School Students Who Tried to Quit Smoking Cigarettes	63.5	45.7

2. Prevent Chronic Diseases

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Utilizing chronic disease management and preventive care can avoid many complications and reduce the disease burden. Many New York State adults have more than one chronic disease. Additionally many New York State adults do not receive screening tests, medications used to prevent disease, counseling, and immunizations as recommended.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Asthma emergency department visit rate per 10,000 population (SPARCS, 2014)	75.1	85.4	35.0	Better	19.3	Better
Percentage of adults aged 50-75 yrs. with annual household income less than \$25,000 receiving colorectal cancer screening (NYS eBRFSS, 2013-2014)	65.4	61.4	67.9*	Better	60.6*	Worse
Percentage of adults aged 50-75 yrs who received a colorectal cancer screening based on the most recent guideline (NYS eBRFSS, 2013-2014)	80.0	69.3	63.4	Worse	64.7*	Worse
Percentage of adults who had a test for high blood sugar or diabetes within the past 3 years (NYS eBRFSS, 2013-2014)	61.7	59.1	60.6	Better	62.6	Better
Rate of hospitalizations for short-term complications of diabetes per 10,000 – Aged 18+ yrs. (SPARCS, 2012-2014)	4.86	6.47	4.98	Better	5.04	Better
Age-adjusted heart attack hospitalization rate per 10,000 (SPARCS, 2014)	14.0	13.8	14.4	Worse	17.4	Worse

*Rate should be viewed with caution due to a large standard error.

2.

Prevent Chronic

Diseases

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Arthritis	Percentage of adults with Arthritis (NYS eBRFSS, 2013-2014)	21.8	25	Worse	20.5	Better
Arthritis	Percentage of Rheumatoid Arthritis or Osteoarthritis: Medicare Population (Centers for Medicare & Medicaid, 2014)	28.6	26.5	Better	25.3	Better
Asthma	Percentage of Adults with Asthma (NYS eBRFSS, 2013-2014)	10.1	13.3	Worse	13.9	Worse
Cancer	Age-Adjusted Death Rate per 100,000 females due to Breast Cancer (National Cancer Institute, 2009-2013)	21.2	19.0	Better	24.0	Worse
Cancer	Age-Adjusted Death Rate per 100,000 males due to Prostate Cancer (National Cancer Institute, 2009-2013)	19.9	16.4	Better	19.6	Same
Cancer	Age-Adjusted Death Rate per 100,000 population due to Colorectal Cancer (National Cancer Institute, 2009-2013)	14.6	12.7	Better	12.1	Better
Cancer	Age-Adjusted Death Rate per 100,000 females due to Ovarian Cancer (National Cancer Institute, 2009-2013)	7.6	9.9	Worse	9.8	Worse
Cancer	Kidney & Renal Pelvis Cancer Incidence Rate; cases per 100,000 population (National Cancer Institute, 2009-2013)	16.1	16.5	Same	17.2	Worse
Cancer	Melanoma Cancer Incidence Rate; cases per 100,000 population (National Cancer Institute, 2009-2013)	17.9	20.9	Worse	22.3	Worse

Cancer	Breast Cancer Incidence Rate; cases per 100,000 females (National Cancer Institute, 2009-2013)	128.4	105.3	Better	131.9	Worse
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Prevent Chronic

Diseases

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Cancer	Colorectal Cancer Incidence Rate; cases per 100,000 population (National Cancer Institute, 2009-2013)	41.5	45.4	Worse	40.0	Better
Cancer	Ovarian Cancer Incidence Rate; cases per 100,000 females (National Cancer Institute, 2009-2013)	12.7	18.0	Worse	13.2	Worse
Cancer	Percentage of women aged 21-65 years with annual household income of less than \$25,000 receiving cervical cancer screening (NYS eBRFSS, 2013-2014)	75.3*	N/A	N/A	77.7*	Better
Cancer	Percentage of women aged 21-65 years receiving cervical cancer screening based on recent guidelines (NYS eBRFSS, 2013-2014)	80.6	73.8*	Better	86.9	Better
Cancer	Percentage of women aged 50-74 yrs. receiving Breast Cancer Screening Based on recent guidelines (NYS eBRFSS, 2013-2014)	80.9	83.6	Better	81.9	Better
Cancer	Uterian Cancer Incidence Rate; cases per 100,000 females (National Cancer Institute, 2009-2013)	30.6	36.7	Worse	41.7	Worse

*Rate should be viewed with caution due to a large standard error.

2.

Prevent Chronic

Diseases

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Cancer	Bladder Cancer Incidence Rate; cases per 100,000 population (National Cancer Institute, 2009-2013)	23.5	28.5	Worse	21.2	Better
Cancer	Liver & Bile Duct Cancer Incidence Rate; cases per 100,000 population (National Cancer Institute, 2009-2013)	8.4	5.3	Better	5.3	Better
Cancer	Prostate Cancer Incidence Rate; cases per 100,000 males (National Cancer Institute, 2009-2013)	145.2	89.3	Better	101.4	Better
Chronic Kidney Disease	Percentage of Chronic Kidney Disease: Medicare Population (Centers for Medicare & Medicaid, 2014)	15.4	12.1	Better	12.9	Better
Chronic Kidney Disease	Age-Adjusted Death Rate due to Kidney Disease (CDC Wonder, 2012-2014)	9.6	10.4	Worse	8.7	Better
Diabetes	Percentage of adults with physician diagnosed diabetes (NYS eBRFSS, 2013-2014)	8.9	6	Better	10.2	Worse
Diabetes	Percentage of Diabetic Screening: Medicare Population (County Health Rankings, 2013)	86	87.0	Better	86.0	Same

Diabetes	Percentage of adults with physician-diagnosed prediabetes (NYS eBRFSS, 2013-2014)	5.9	3.4	Better	5.9	Same
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Diseases

Prevent Chronic

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Heart Disease	Percentage of adults 18+ yrs and older with elevated cholesterol (NYS eBRFSS, 2013-2014)	34.5	27.7	Better	30.5	Better
Heart Disease	Percentage of adults who have taken a course or class to learn to manage their chronic disease or condition (NYS eBRFSS, 2013-2014)	9.7	7.2	Worse	10.7	Better
Heart Disease	Percentage of adults with cholesterol checked (NYS eBRFSS, 2013-2014)	83.4	80.7	Worse	86.2	Better
Heart Disease	Percentage of adults with diagnosed high blood pressure taking high blood pressure medication (NYS eBRFSS, 2013-2014)	55.6	43.3*	Worse	71.2*	Better
Heart Disease	Percentage of adults with physician diagnosed high blood pressure (NYS eBRFSS, 2013-2014)	27.3	28.6	Worse	24.7	Better
Heart Disease	Percentage of Medicare beneficiaries who were treated for (narrowing of the arteries) ischemic heart disease (Centers for Medicare & Medicaid, 2014)	31.4	29.4	Better	24.5	Better

Heart Disease	Percentage of Medicare beneficiaries who were treated for heart failure (Centers for Medicare & Medicaid, 2014)	15.8	13.5	Better	11.3	Better
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Prevent Chronic

Diseases

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Heart Disease	Percentage of Medicare beneficiaries who were treated for hypertension (Centers for Medicare & Medicaid, 2014)	55.8	54.5	Better	46.9	Better
Heart Disease	Percentage of Medicare beneficiaries who were treated for atrial fibrillation (Centers for Medicare & Medicaid, 2014)	8.5	9.3	Worse	9.1	Worse
Heart Disease	Percentage of Medicare beneficiaries who were treated for (cholesterol and triglycerides in the blood) hyperlipidemia (Centers for Medicare & Medicaid, 2014)	48.4	46.1	Better	35.2	Better
Stroke	Percentage of Stroke: Medicare Population (Centers for Medicare & Medicaid, 2014)	3.9	2.8	Better	3.0	Better

2.

Prevent Chronic

Diseases

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Other Indicators by Time Series and compared to New York State		Delaware County 2011-2013	Delaware County 2012-2014	New York State 2012-2014
Asthma	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Adult Asthma (SPARCS)	32.7	32.9	61.7
Asthma	Age-Adjusted Hospitalization Rate per 10,000 population due to Asthma (SPARCS)	6.8	5.3	16.8
Asthma	Age-Adjusted Hospitalization Rate per 10,000 18+ yrs. due to Adult Asthma (SPARCS)	6.5	5.5	14.1
Diabetes	Age-Adjusted Death Rate per 100,000 population due to Diabetes (CDC Wonder)	15.0	14.3	17.6
Diabetes	Age-Adjusted ER Rate due to Long-Term Complications of Diabetes; ER visits/10,000 population 18+ yrs. (SPARCS)	5.1	5.4	8.8
Diabetes	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Uncontrolled Diabetes (SPARCS)	3.0	2.7	2.3
Diabetes	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Uncontrolled Diabetes (SPARCS)	0.9	0.9	2.1

Diabetes	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Diabetes (SPARCS)	18.8	19.6	23.4
Diabetes	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Diabetes (SPARCS)	8.3	9.0	21.3
Diabetes	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Long-Term Complications of Diabetes (SPARCS)	5.1	4.9	12.5

2.

Prevent Chronic

Diseases

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Other Indicators by Time Series and compared to New York State		Delaware County 2011-2013	Delaware County 2012-2014	New York State 2012-2014
Heart Disease	Age-Adjusted Death Rate per 100,000 population due to Coronary Heart Disease (CDC Wonder)	141.9	120.5	129.7
Heart Disease	Age-Adjusted ER Rate due to Heart Failure per 10,000 population 18+ yrs (SPARCS)	14.0	14.8	4.0
Heart Disease	Age-Adjusted ER Rate due to Hypertension per 10,000 population 18+ yrs (SPARCS)	20.7	22.2	25.5
Heart Disease	Age-Adjusted Hospitalization Rate Due to Heart Failure per 10,000 population 18+ yrs (SPARCS)	29.4	26.7	31.6
Heart Disease	Age-Adjusted Hospitalization Rate due to Hypertension per 10,000 population 18+ yrs (SPARCS)	2.5	2.1	6.3
Stroke	Age-Adjusted Rate due to Cerebrovascular Disease (Stroke);	31.1	31.0	26.3

	deaths per 100,000 population (CDC Wonder)			
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Prevent Chronic

Diseases

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Other Indicators by Time Series and compared to New York State		Otsego County 2011-2013	Otsego County 2012-2014	New York State 2012-2014
Asthma	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Adult Asthma (SPARCS)	18.3	18.0	61.7
Asthma	Age-Adjusted Hospitalization Rate per 10,000 population due to Asthma (SPARCS)	7.4	6.3	16.8
Asthma	Age-Adjusted Hospitalization Rate per 10,000 18+ yrs. due to Adult Asthma (SPARCS)	6.9	6.1	14.1
Diabetes	Age-Adjusted Death Rate per 100,000 population due to Diabetes (CDC Wonder)	20.4	22.8	17.6
Diabetes	Age-Adjusted ER Rate due to Long-Term Complications of Diabetes; ER visits/10,000 population 18+ yrs. (SPARCS)	6.1	5.5	8.8
Diabetes	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Diabetes (SPARCS)	14.6	12.5	23.4

Diabetes	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Diabetes (SPARCS)	13.0	13.1	21.3
Diabetes	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Uncontrolled Diabetes (SPARCS)	1.0	0.8	2.1
Diabetes	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Long-Term Complications of Diabetes (SPARCS)	7.5	7.9	12.5

2.

Prevent Chronic

Diseases

Focus Area 3 – Increase Access to High-Quality Chronic Disease Preventive Care and Management in Clinical and Community Settings

Other Indicators by Time Series and compared to New York State		Otsego County 2011-2013	Otsego County 2012-2014	New York State 2012-2014
Heart Disease	Age-Adjusted Death Rate per 100,000 population due to Coronary Heart Disease (CDC Wonder)	118.4	112.8	129.7
Heart Disease	Age-Adjusted ER Rate due to Heart Failure per 10,000 population 18+ yrs. (SPARCS)	3.9	4.4	4.0
Heart Disease	Age-Adjusted ER Rate due to Hypertension per 10,000 population 18+ yrs. (SPARCS)	15.1	17.2	25.5
Heart Disease	Age-Adjusted Hospitalization Rate Due to Heart Failure per 10,000 population 18+ yrs. (SPARCS)	30.1	30.3	31.6
Heart Disease	Age-Adjusted Hospitalization Rate due to Hypertension per 10,000 population 18+ yrs. (SPARCS)	4.0	3.7	6.3

Stroke	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke); deaths per 100,000 population (CDC Wonder)	27.7	30.9	26.3

3. Promote a Healthy and Safe Environment

Focus Area 1 – Outdoor Air Quality

Poor outdoor air quality can contribute to environmental-related respiratory illnesses, such as asthma. New York asthma related hospitalization rates are higher than national rates for all age groups.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State (excluding NYC)	Delaware County	Otsego County
Annual number of days with unhealthy levels of ozone (Air Quality Index >100) (EPA Air Quality System Data, 2012-2014)	0	0	N/A	N/A
Annual number of days with unhealthy levels of particulate matter (Air Quality Index >100) (EPA Air Quality System Data, 2012-2014)	0	14	N/A	N/A

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Air pollution –average daily amount of fine particulate matter in micrograms per cubic meter (CDC Wonder, 2003-2011)	11.20	10.77	Better	10.80	Better

Other Indicators by Time Series	Delaware County 2010	Delaware County 2011	Delaware County 2012	Delaware County 2013	Delaware County 2014
Recognized Pounds of Carcinogens Released into the Air (EPA, 2014)	2,352	255	0	0	9,313

Other Indicators by Time Series	Otsego County 2010	Otsego County 2011	Otsego County 2012	Otsego County 2013	Otsego County 2014
Recognized Pounds of Carcinogens Released into the Air (EPA, 2014)	0	0	0	0	0

3. Promote a Healthy and Safe Environment

Focus Area 2 – Water Quality

Residents with optimally fluoridated municipal water systems can have better oral health. According to the Centers for Disease Control and Prevention drinking fluoridated water helps keep teeth strong and reduces tooth decay by approximately 25% in adults and children.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of residents served by community water systems with optimally fluoridated water (EPA Safe Drinking Water System, 2015)	78.5	72.1	45.4	Worse	63.7	Worse

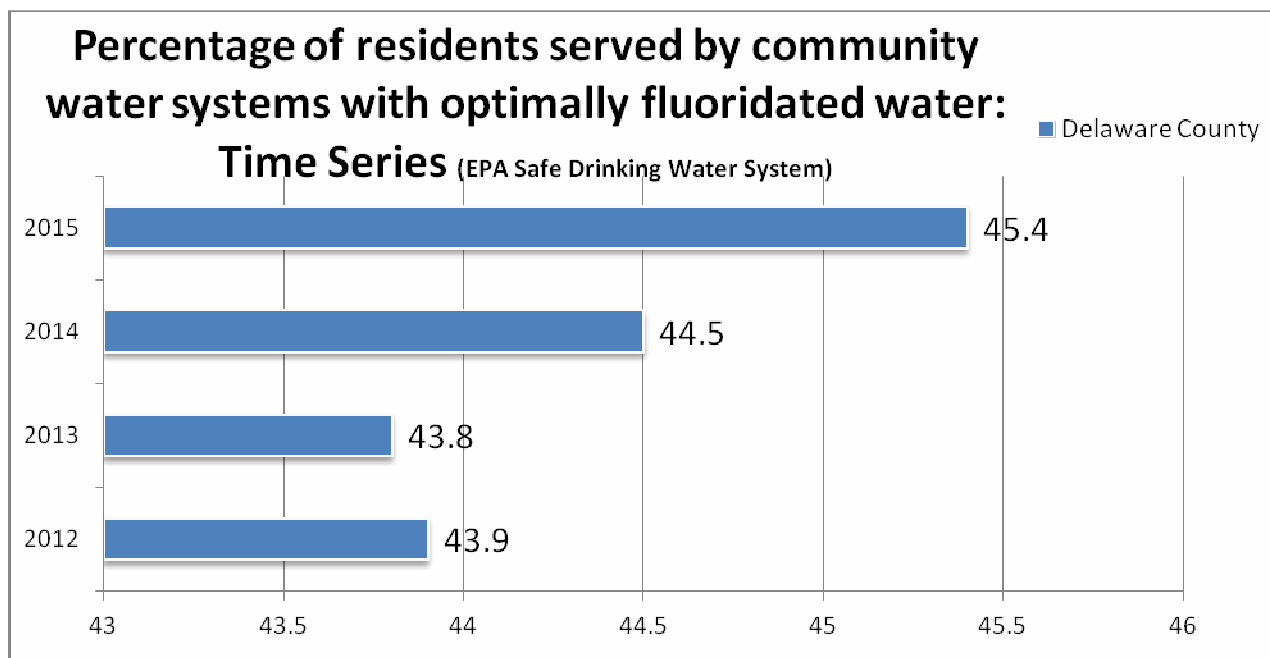
Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Drinking Water Violations; Municipal water systems (County Health Rankings, 2013-2014)	26.2	3.7	Better	6.1	Better

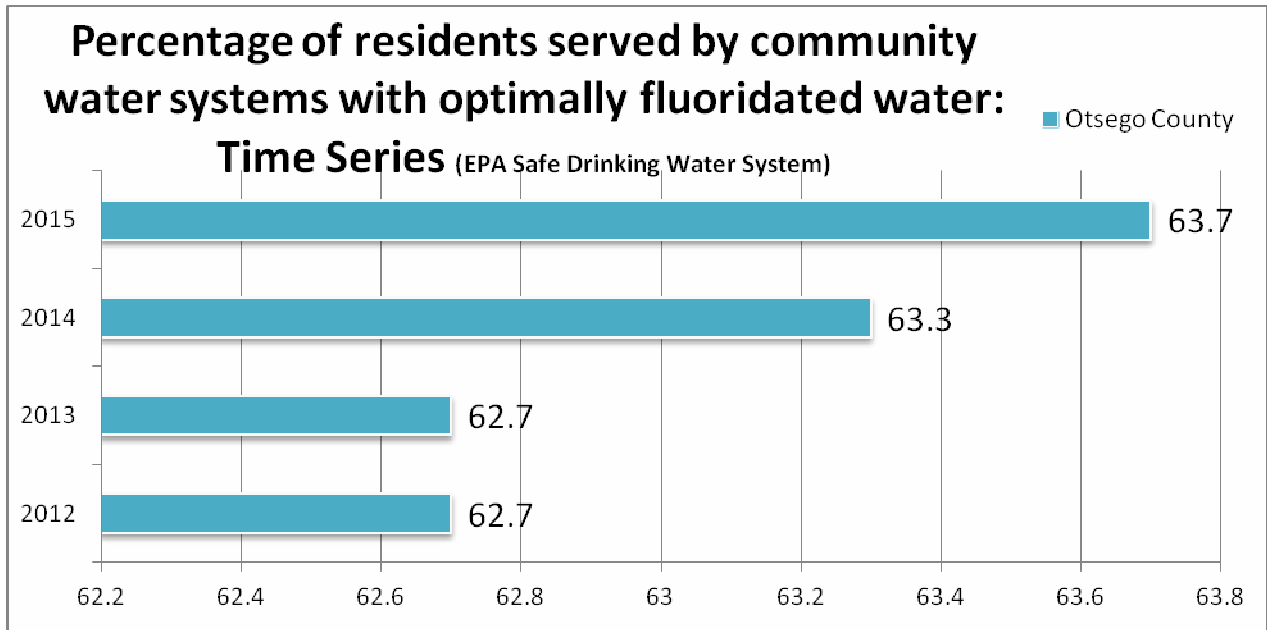
Other Indicators by Time Series	Delaware County 2010	Delaware County 2011	Delaware County 2012	Delaware County 2013	Delaware County 2014
Pounds of Persistent, Bioaccumulative and Toxic Chemicals (PBT) Released (EPA, 2014)	22	11	58	61	9,476

Other Indicators by Time Series	Otsego County 2010	Otsego County 2011	Otsego County 2012	Otsego County 2013	Otsego County 2014
Pounds of Persistent, Bioaccumulative and Toxic Chemicals (PBT) Released (EPA, 2014)	0	0	0	0	0

Promote a Healthy and Safe Environment

Focus Area 2 – Water Quality





3. Promote a Healthy and Safe Environment

Focus Area 3 – Built Environment

The built environment includes designing systems where people live, work, play and worship which improves the quality of life and makes the healthy choice, the easier choice. The U.S. Department of Health and Human Services' Healthy People 2010 describes it as "one that continuously creates and improves both its physical and social environments, helping people to support one another in aspects of daily life and develop to their fullest potential."

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of employed civilian workers age 16 and over who use alternate modes of transportation to work or work from home (American Community Survey,	49.2	45.1	24.9	Worse	28.0	Worse

2010-2014)						
Percentage of population that lives in a jurisdiction that adopted the Climate Smart Communities pledge (Dept. of Environmental Conservation, 2015)	32.0	32.8	0.0	Worse	35.8	Better
Percentage of population with low-income and low access to a supermarket or large grocery store (USDA Food Environment Atlas, 2010)	2.24	2.49	0.92	Better	9.61	Worse

3. Promote a Healthy and Safe Environment

Focus Area 3 – Built Environment

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Exercise & Nutrition	Food Environment Index (Index ranges from 0-worst to 10-best) (County Health Rankings, 2016)	7.9	8.3	Better	7.4	Worse
Exercise & Nutrition	Percentage of Access to Exercise Opportunities (County Health Rankings, 2016)	90.7	55.1	Worse	61.1	Worse
Exercise & Nutrition	Percentage of adults who consider their neighborhood suitable for walking and physical activity	91.3	92.6	Better	96.6	Better

	(NYS eBRFSS, 2013-2014)					
Housing	Percentage of Homes Built Prior to 1950 (American Community Survey, 2010-2014)	41.4	36.1	Better	46.4	Worse
Housing	Percentage of Severe Housing Problems (County Health Rankings, 2008-2012)	24.2	16.3	Better	17.1	Better
Housing	Percentage of adults experiencing housing insecurity in the past 12 months (NYS eBRFSS, 2013-2014)	43.7	41.1	Better	43.2	Same
Housing	Homeownership (American Community Survey, 2010-2014)	47.9	46.0	Worse	57.3	Better
Housing	Renters Spending 30% or More of Household Income on Rent (American Community Survey, 2010-2014)	53.9	49.2	Better	57.9	Worse
Housing	Homeowner Vacancy Rate (American Community Survey, 2010-2014)	1.8	2.9	Worse	2.0	Worse

3. Promote a Healthy and Safe Environment

Focus Area 3 – Built Environment

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Transportation	Percentage of Solo Drivers with a Long Commute (County Health Rankings, 2010-2014)	35.9	31.9	Better	29.5	Better
Transportation	Percentage of worker Aged 16 yrs+ who commute to work by public transportation (American Community Survey, 2010-2014)	27.4	1.5	Worse	1.6	Worse
Transportation	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions per 100,000 population (CDC Wonder, 2010-2012)	6.4		Worse	11.0	Worse
Transportation	Percentage of Households that do not have a Vehicle (American	29.3	9.4	Better	8.5	Better

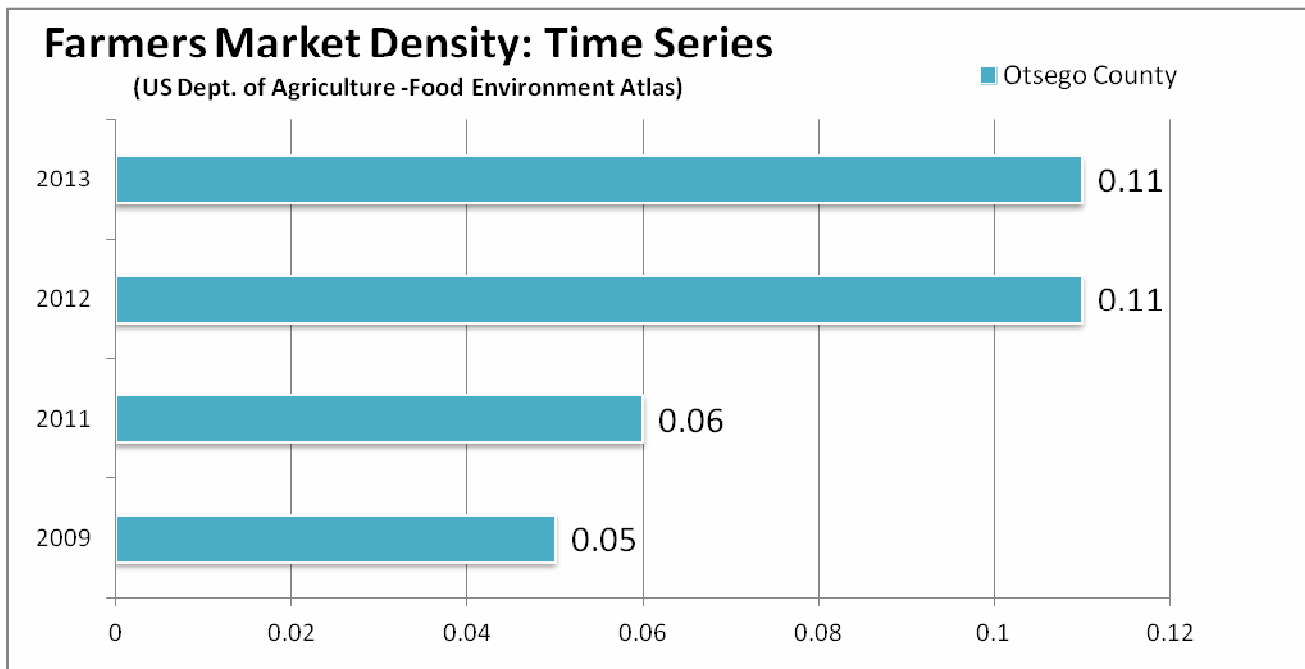
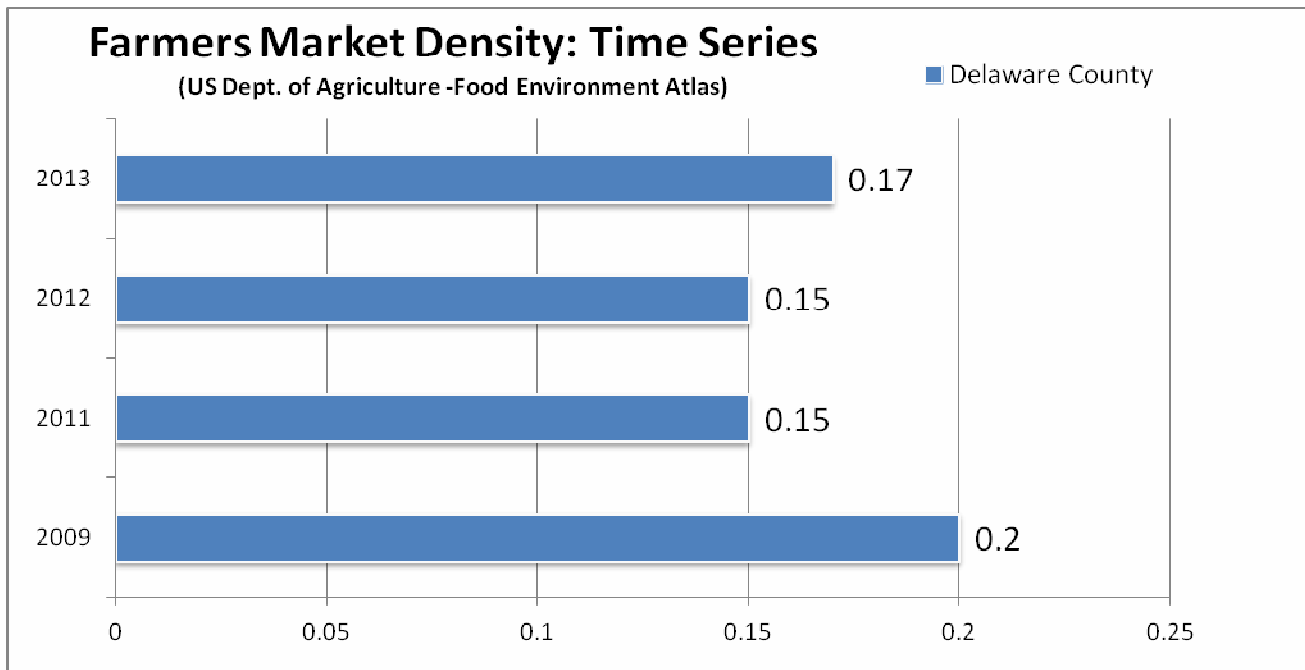
	Community Survey, 2010-2014)					
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Other Indicators by Time Series		Delaware County 2011	Delaware County 2012
Exercise & Nutrition	Fast Food Restaurant Density per 1,000 population (USDA Food Environment Atlas)	0.63	0.55
Exercise & Nutrition	Grocery Store Density per 1,000 population (USDA Food Environment Atlas)	0.27	0.32
Exercise & Nutrition	Recreation and Fitness Facilities per 1,000 population (USDA Food Environment Atlas)	0.04	0.02

Other Indicators by Time Series		Otsego County 2011	Otsego County 2012
Exercise & Nutrition	Fast Food Restaurant Density per 1,000 population (USDA Food Environment Atlas)	0.58	0.60
Exercise & Nutrition	Grocery Store Density per 1,000 population (USDA Food Environment Atlas)	0.29	0.31
Exercise & Nutrition	Recreation and Fitness Facilities per 1,000 population (USDA Food Environment Atlas)	0.08	0.06

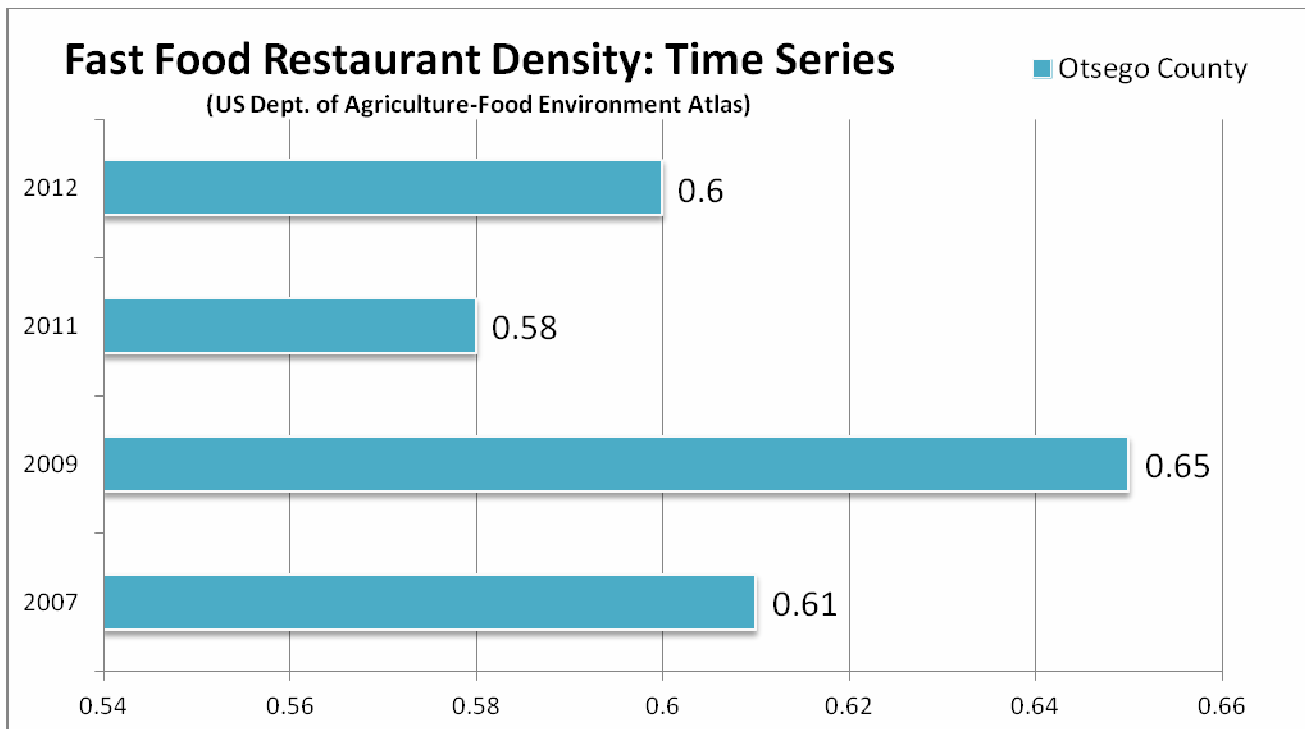
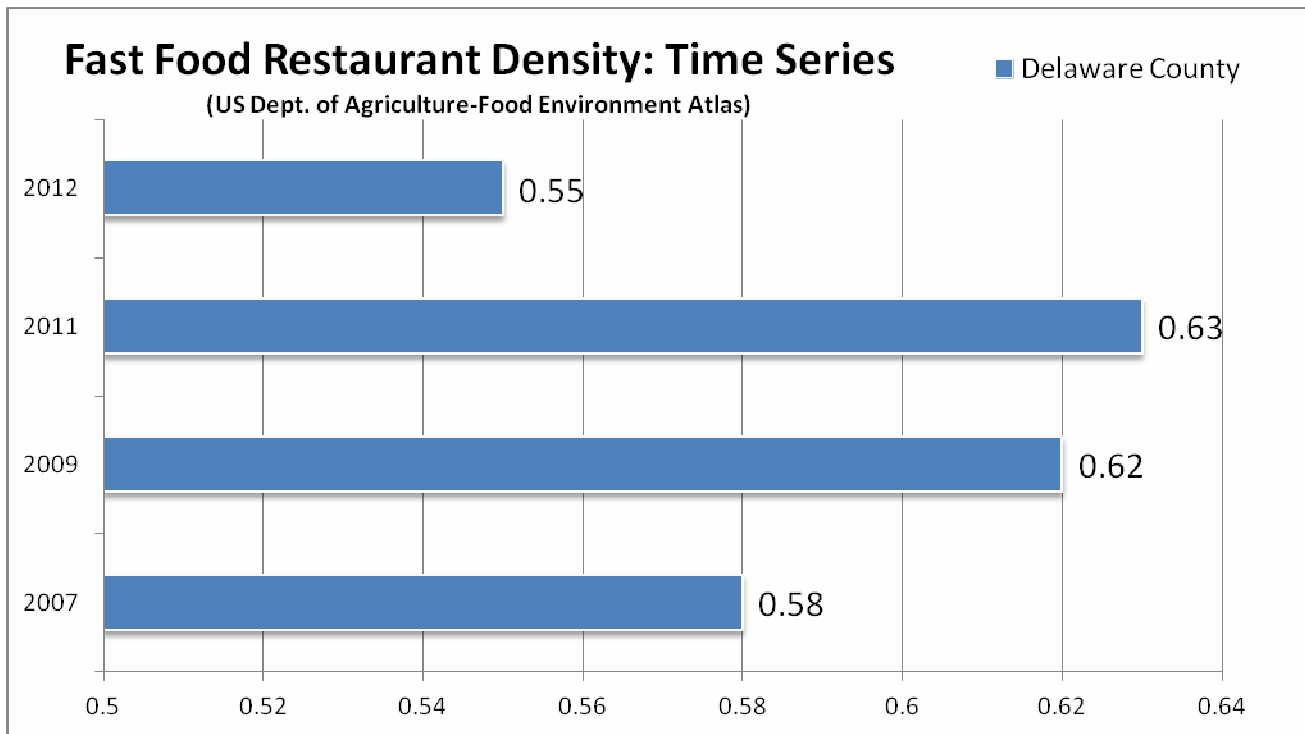
3. Promote a Healthy and Safe Environment

Focus Area 3 – Built Environment



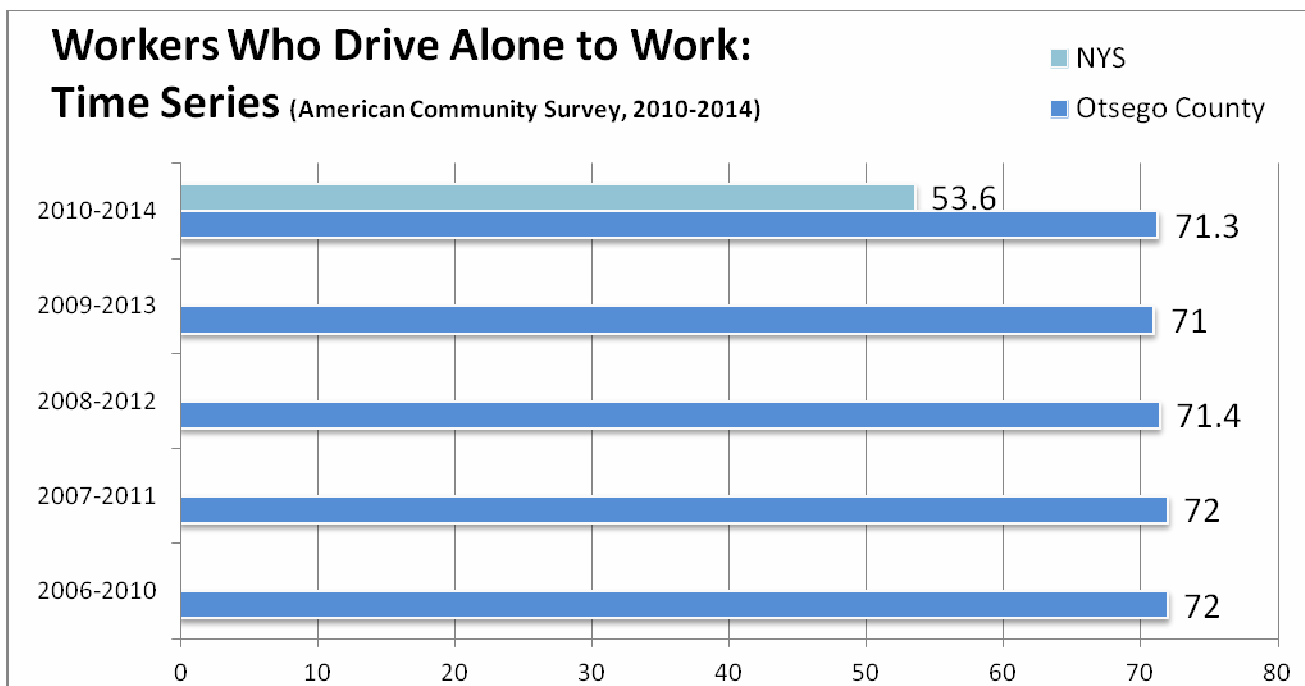
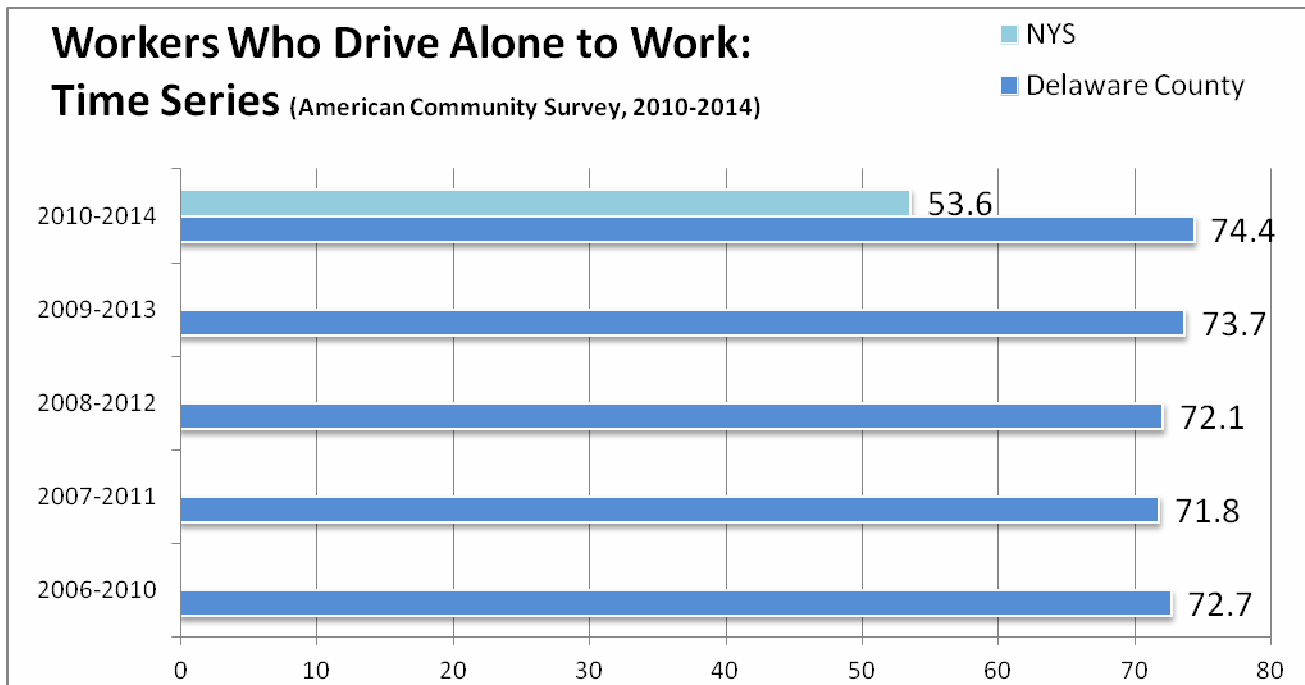
3. Promote a Healthy and Safe Environment

Focus Area 3 – Built Environment



3. Promote a Healthy and Safe Environment

Focus Area 3 – Built Environment



3. Promote a Healthy and Safe Environment

Focus Area 4 – Injuries, Violence and Occupational Health

Based on the New York State Department Health's data, injuries are the leading cause of death and disability in state. Falls are leading cause of unintentional injury and death. Non-fatal injuries can result in poor health outcomes such as: short term pain, chronic pain, and loss of mobility.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Assault-related hospitalization rate per 10,000 (SPARCS, 2012-2014)	4.3	3.9	0.8	Better	1.1	Better
Assault-related hospitalization: Ratio of Black non-Hispanics to White non-Hispanics (SPARCS, 2012-2014)	6.69	7.28	0.00	Better	N/A	N/A
Assault-related hospitalization: Ratio of Hispanics to White non-Hispanics (SPARCS, 2012-2014)	2.75	3.45	0.00	Better	N/A	N/A
Rate of emergency department visits due to falls per 10,000 –Aged 1-4 yrs (SPARCS, 2014)	429.1	440.1	534.5	Worse	490.8	Worse
Rate of hospitalizations due to falls per 10,000 – Aged 65+ years (SPARCS, 2014)	204.6	183.6	132.4	Better	179.7	Better
Rate of occupational injuries treated in ED per 10,000 adolescents–Aged 15-19 yrs. (SPARCS, 2014)	33.0	20.6	40.1	Worse	38.7	Worse

3. Promote a Healthy and Safe Environment

Focus Area 4 – Injuries, Violence and Occupational Health

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Child Abuse	Children/Youth in Indicated Reports of Abuse / Maltreatment rate per 1,000 children/youth ages 0-17 yrs. (NYS Kids' Well-being Indicators Clearinghouse, 2015)	13.8	44.4	Worse	21.4	Worse
Crime	Violent Crime Rate per 100,000 population (NYS Division of Criminal Justice Services, 2015)	378.0	171.9	Better	128.4	Better
Crime	Violent Crime Rate With Firearm per 100,000 population (NYS Division of Criminal Justice Services, 2015)	55.4	17.6	Better	6.6	Better
Crime	Young adult Arrests –Property Crimes per 10,000 ages 16-21 (NYS Division of Criminal Justice Services, 2015)	126.3	92.5	Better	86.1	Better
Crime	Young adult Arrests –Violent Crimes per 10,000 ages 16-21 (NYS Division of Criminal Justice Services, 2015)	66.2	11.6*	Better	9.1*	Better
Injuries	Age-Adjusted Death per 100,000 population due to Unintentional Injuries (CDC Wonder, 2012-2014)	27.6	43.9	Worse	29.0	Worse
Injuries	Percentage of adults aged 65+ yrs. with at least one fall in the past 12 months (NYS eBRFSS, 2013-2014)	30.8	33.9*	Worse	31.8*	Worse
Injuries	Among adults aged 65+ years with at least one fall in the past 12 months, percent that resulted in injury (NYS eBRFSS, 2013-2014)	38.3	N/A	N/A	52.9*	Worse
Injuries	Percentage of Osteoporosis: Medicare Population (Centers for Medicare & Medicaid, 2014)	6.9	4.8	Better	4.3	Better

* Rate should be viewed with caution, fewer than 20 events.

3. Promote a Healthy and Safe Environment

Focus Area 4 – Injuries, Violence and Occupational Health

Otsego County Youth Risk Behavior Survey Indicators compared to New York State		New York State 2015	Otsego County 2016	New York State Comparison
Injuries	Percentage of High School Students Who Never or Rarely Wore a Bicycle Helmet	78.1	55.6	Better
Injuries	Percentage of High School Students Who Texted or emailed While Driving a Car or Other Vehicle	28.9	23.5	Better
Violence	Percentage of High School Students Who Carried a Weapon	13.0	20.3	Worse
Violence	Percentage of High School Students Who Carried a Gun	4.1	9.2	Worse
Violence	Percentage of High School Students Who Carried a Weapon on School Property	4.5	3.5	Better
Violence	Percentage of High School Students Who Did Not Go to School Because they Felt Unsafe at School or on their Way to or from School	7.6	2.8	Better
Violence	Percentage of High School Students Who were Threatened or Injured with a Weapon on School Property	8.3	3.6	Better
Violence	Percentage of High School Students Who were in a Physical Fight	20.2	20.3	Same
Violence	Percentage of High School Students Who Experienced Physical Dating Violence	11.5	8.6	Better
Violence	Percentage of High School Students Who Experienced Sexual Dating Violence	14.7	8.6	Better

3. Promote a Healthy and Safe Environment

Focus Area 4 – Injuries, Violence and Occupational Health

Otsego County Youth Risk Behavior Survey Indicators compared to New York State		New York State 2015	Otsego County 2016	New York State Comparison
Violence	Percentage of High School Students Who Were Bullied on School Property	20.6	20.7	Same
Violence	Percentage of High School Students Who Were Electronically Bullied	15.3	15.2	Same

Otsego County Youth Risk Behavior Survey Indicators by Time Series		Otsego County 2007	Otsego County 2016
Injuries	Percentage of High School Students Who Never or Rarely Wore a Seat Belt	5.2	3.1
Violence	Percentage of High School Students Who were injured in a Physical Fight	3.0	2.3
Violence	Percentage of High School Students Who Were in a Physical Fight on School Property	11.4	8.3
Violence	Percentage of High School Students Who Were Ever Physically Force to Have Sexual Intercourse	7.3	7.5

4. Promote Healthy Women, Infants and Children

Focus Area 1 – Maternal and Infant Health

Maternal and infant health is essential to the health of populations. Childhood health begins with conception through proper nutrition and healthy lifestyle. Maternal health has improved, but many women have pregnancy complications and maternal mortality. According to the Centers for Disease Control and Prevention one in four pregnancy-related deaths are related to heart conditions. Women also die of infections, bleeding, blood clots and high blood pressure.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Exclusively breastfed: Ratio of Medicaid births to non-Medicaid births (Vital Records, 2012-2014)	0.66	0.58	0.82	Better	0.78	Better
Exclusively breastfed: Ratio of Hispanics to White non-Hispanics (Vital Records, 2012-2014)	0.64	0.54	0.90	Better	0.92	Better
Maternal mortality rate per 100,000 births (Vital Records, 2012-2014)	21.0	18.7	0.00	Better	0.00	Better
Percentage of infants exclusively breastfed in the hospital (Vital Records, 2014)	48.1	43.1	62.0	Better	63.9	Better
Percentage of preterm births (Vital Records, 2014)	10.2	10.8	7.7	Better	9.0	Better
Premature births: Ratio of Hispanics to White non-Hispanics (Vital Records, 2012-2014)	1.12	1.25	0.88	Better	0.23	Better
Premature births: Ratio of Medicaid births to non-Medicaid births (Vital Records, 2012-2014)	1.00	1.07	0.59	Better	0.56	Better

4. Promote Healthy Women, Infants and Children

Focus Area 1 – Maternal and Infant Health

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of Babies with Low Birth Weight (NYSDOH CHIRS, 2012-2014)	7.9	8.0	Worse	6.1	Better
Percentage of births to women aged 25 years and older without a high school education (NYSDOH CHIRS, 2012-2014)	13.7	7.2	Better	7.4	Better
Percentage of Mothers who received Late or No Prenatal Care (NYSDOH CHIRS, 2012-2014)	5.6	3.4	Better	4.4	Better
Newborn drug-related diagnosis rate per 10,000 newborn discharges (NYSDOH CHIRS, 2012-2014)	103.5	156.9	Worse	174.4	Worse
Percentage of pregnant women in WIC with gestational diabetes (NYSDOH CHIRS, 2009-2011)	5.5	5.9	Worse	8.0	Worse
Percentage of pregnant women in WIC with gestational weight gain greater than ideal (NYSDOH CHIRS, 2009-2011)	41.7	49.2	Worse	51.9	Worse
Percentage of pregnant women in WIC with hypertension during pregnancy (NYSDOH CHIRS, 2009-2011)	7.1	8.5	Worse	10.8	Worse
Percentage of WIC infants breastfeeding at least 6 months (NYSDOH CHIRS, 2012-2014)	41.8	62.1	Better	65.9	Better
Percentage of women aged 18-44 yrs. who had dental visit within the last year (NYS eBRFSS, 2013-2014)	70.7	N/A	N/A	83.3*	Better
Women aged 18-44 years who saw a doctor for a routine checkup within the last year (NYS eBRFSS, 2013-2014)	72.5	N/A	N/A	68.6*	Worse
Percentage of women aged 18-44 years whose health care provider discussed planning a healthy pregnancy (NYS eBRFSS, 2013-2014)	39.3	N/A	N/A	57.8*	Better

*Rate should be viewed with caution due to a large standard error.

4. Promote Healthy Women, Infants and Children

Focus Area 2 – Child Health

Creating a healthy foundation in young people can lead to future healthier adults. Regular preventive health care visits allow parents to address concerns and receive guidance from providers; and make certain their children are meeting developmental milestones.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Asthma emergency department visit rate per 10,000 –Aged 0-4 yrs. (SPARCS, 2014)	196.5	205.6	54.6	Better	47.6	Better
Percentage of children (aged under 19 years) with health insurance (US Census Bureau, 2014)	100	96.6	95.4	Worse	95.9	Worse
Rate of hospitalizations for short-term complications of diabetes per 10,000 - Aged 6-17 years (SPARCS, 2014)	3.06	3.04	3.36	Worse	6.73	Worse
Percentage of children who have had the recommended number of well child visits in government sponsored insurance programs (NYSDOH Office of Quality & Patient Safety, 2014)	76.9	72.4	62.8	Worse	66.7	Worse
Percentage of children aged 0-15 months who have had the recommended number of well child visits in government sponsored insurance programs (NYSDOH Office of Quality & Patient Safety, 2014)	91.3	80.8	88.2	Better	91.8	Better

4. Promote Healthy Women, Infants and Children

Focus Area 2 – Child Health

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of children aged 3-6 years who have had the recommended number of well child visits in government sponsored insurance programs (NYSDOH Office of Quality & Patient Safety, 2014)	91.3	84.2	75.2	Worse	80.0	Worse
Percentage of children aged 12-21 years who have had the recommended number of well child visits in government sponsored insurance programs (NYSDOH Office of Quality & Patient Safety, 2014)	67.1	64.9	52.2	Worse	57.2	Worse
Percentage of third-grade children with evidence of untreated tooth decay (NYSDOH Bureau of Dental Health 2009-2011)	21.6	24.0	31.9	Worse	22.4	Better
Tooth decay: Ratio of low-income children to non-low income children (NYSDOH Bureau of Dental Health 2009-2011)	2.21	2.46	2.88	Worse	2.57	Worse

4. Promote Healthy Women, Infants and Children

Focus Area 2 – Child Health

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of Child Food Insecurity (Feeding America, 2014)	20.9	11.6	Better	21.7	Worse
Percentage of Children born in 2011 with at least two lead screening before 36 months (NYSDOH CHIRS, 2011-2014)	56.3	49.7	Worse	46.9	Worse
Pneumonia hospitalization rate per 10,000 –Aged 0-4 yrs. (SPARCS, 2012-2014)	34.4	20.6	Better	32.6	Better
Percentage of Children and Youth Living Below Poverty ages birth – 17 yrs. (NYS Kids' Well-being Indicators Clearinghouse, 2014)	22.9	22.6	Same	22.3	Same
Percentage of Children and Youth Receiving Supplemental Nutrition Assistance Program Benefits birth – 17 yrs. (NYS Kids' Well-being Indicators Clearinghouse, 2015)	25.8	24.8	Better	18.6	Better
Percentage of Children and Youth Receiving Public Assistance ages birth -17 yrs. (NYS Kids' Well-being Indicators Clearinghouse, 2015)	6.8	2.9	Better	1.5	Better
Percentage of High School Students who ever been told by a doctor or nurse that they had asthma (Otsego County YRBS, 2016)	25.6	N/A	N/A	30.8	Worse
Percentage of High School Students that have not seen a dentist in the past 12 months (Otsego County YRBS, 2016)	27.0	N/A	N/A	13.5	Better

4. Promote Healthy Women, Infants and Children

Focus Area 3 – Reproductive, Preconception and Inter-Conception Health

Approximately one half of all pregnancies are unplanned. Engaging women early in health services prior to conception can increase positive maternal and child health outcomes.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Adolescent pregnancy rate per 1,000 females - Aged 15-17 years (Vital Records, 2014)	25.6	17.0	4.7	Better	8.1	Better
Adolescent pregnancy rate per 1,000 females - Aged 15-17 years: Ratio of Hispanics to White non-Hispanics (Vital Records, 2012-2014)	4.10	4.41	1.36	Better	0.00	Better
Percentage of unintended pregnancy among live births (Vital Records, 2014)	23.8	24.5	34.5	Worse	27.2	Worse
Unintended pregnancy: Ratio of Medicaid births to non-Medicaid births (Vital Records, 2014)	1.54	1.76	1.64	Better	2.35	Worse
Percentage of women (aged 18-64) with health insurance (US Census Bureau, 2014)	100	89.7	89.6	Same	90.9	Better
Percentage of live births that occur within 24 months of a previous pregnancy (Vital Records, 2014)	17.0	18.9	25.1	Worse	27.2	Worse

4. Promote Healthy Women, Infants and Children

Focus Area 3 – Reproductive, Preconception and Inter-Conception Health

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Teen Birth Rate: live births per 1,000 females Aged 15-19 yrs. (NYS Kids' Well-being Indicators Clearinghouse, 2011-2013)	19.5	16.3	Better	10.1	Better
Adolescent Pregnancies per 1,000 females Aged 15-19 yrs. (NYS Kids' Well-being Indicators Clearinghouse, 2011-2013)	41.3	24.5	Better	17.1	Better

Otsego County Youth Risk Behavior Survey Indicators compared to New York State	New York State 2015	Otsego County 2016	New York State Comparison
Percentage of High School Students Who Ever Had Sexual Intercourse	30.4	40.1	Worse
Percentage of High School Students Who Had Sexual Intercourse before age 13 years	3.7	3.2	Same
Percentage of High School Students Who Had Sexual Intercourse with four or more persons	7.2	7.7	Same
Percentage of High School Students Who were currently Sexually Active	23.6	27.5	Worse
Percentage of High School Students Who drank alcohol or used drugs before last sexual intercourse	24.6	19.1	Better
Percentage of High School Student Who used a condom	58.1	58.8	Same
Percentage of High School Student Who used birth control pills	22.1	30.0	Better
Percentage of High School Students Who Used birth control pills; an IUD or implant; or a shot, patch or birth control ring	30.1	38.9	Better
Percentage of High School Students Who Did Not Use Any Method to Prevent Pregnancy	15.1	9.3	Better

5. Promote Mental Health and Prevent Substance Abuse

Focus Area 1 – Promote Mental, Emotional and Behavioral Well-Being in Communities

Mental, emotional and behavioral health is crucial to overall wellbeing. Psychological distress can manifest in all aspects of our lives. Recognizing and addressing concerns before they become critical is important.

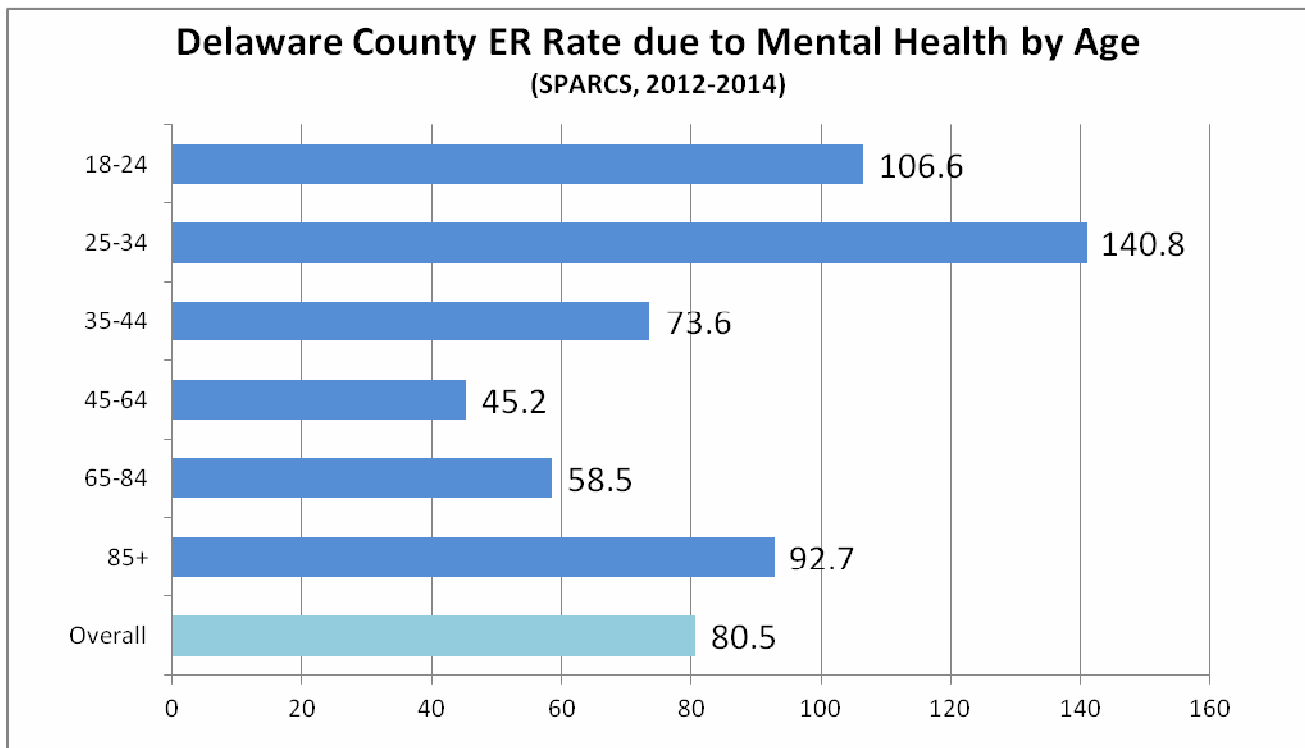
Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Age-Adjusted percentage of adults with poor mental health for 14 or more days in the last month (NYS eBRFSS, 2013-2014)	10.1	11.2	6.6	Better	10.5	Better

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of Depression: Medicare Population (Centers for Medicare & Medicaid, 2014)	14.9	13.9	Better	13.6	Better
Percentage of Frequent Mental Distress (County Health Rankings, 2014)	10.0	10.7	Same	11.0	Worse
Mental Health Provider Rate per 100,000 population (County Health Rankings, 2015)	238	105	Worse	165	Worse

5. Promote Mental Health and Prevent Substance Abuse

Focus Area 1 – Promote Mental, Emotional and Behavioral Well-Being in Communities

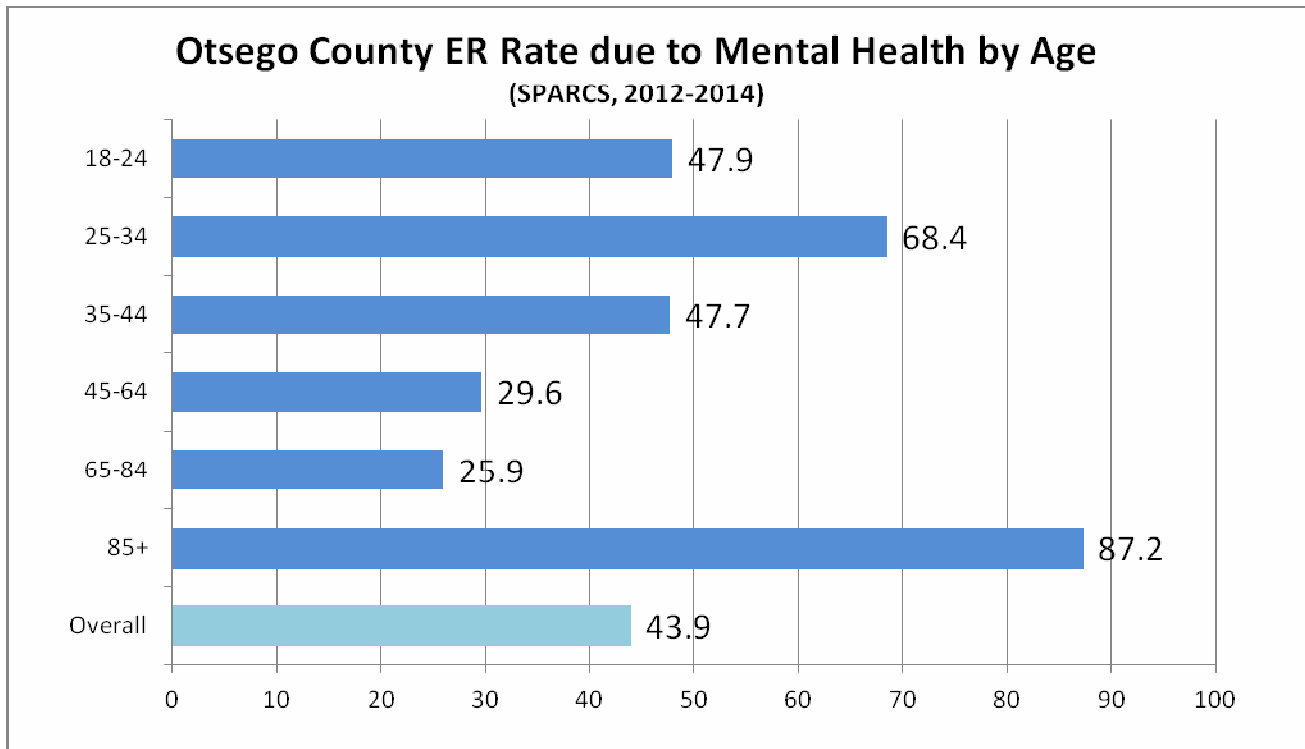
Other Indicators by Time Series and compared to New York State	Delaware County 2011-2013	Delaware County 2012-2014	New York State 2012-2014
Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Mental Health (SPARCS)	80.8	80.5	107.1
Age-Adjusted ER Rate per 10,000 population under 18 yrs. due to Pediatric Mental Health (SPARCS)	44.2	45.1	90.3
Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Mental Health (SPARCS)	50.2	45.4	62.7



5. Promote Mental Health and Prevent Substance Abuse

Focus Area 1 – Promote Mental, Emotional and Behavioral Well-Being in Communities

Other Indicators by Time Series and compared to New York State	Otsego County 2011-2013	Otsego County 2012-2014	New York State 2012-2014
Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Mental Health (SPARCS)	42.7	43.9	107.1
Age-Adjusted ER Rate per 10,000 population under 18 yrs. due to Pediatric Mental Health (SPARCS)	18.6	21.5	90.3
Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Mental Health (SPARCS)	62.6	55.0	62.7



5. Promote Mental Health and Prevent Substance Abuse

Focus Area 2 – Prevent Substance Abuse and other Mental Emotional Behavioral Disorders

Prevention, early detection and treatment of substance abuse and mental, emotional, and behavioral disorders can improve health of the individual. According to the New York State Department of Health, identification and social support can prevent and lessen serious consequences such as chronic illness, death and poor functioning.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Age-adjusted percentage of adult binge drinking during the past month (NYS eBRFSS, 2013-2014)	18.4	17.8	18.5	Worse	18.6	Worse
Age-adjusted suicide death rate per 100,000 (Vital Records, 2012-2014)	5.9	7.9	18.5	Worse	14.5	Worse

Other Indicators compared to New York State		New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Alcohol Abuse	Liquor Store Density; stores per 100,000 population (US Census-County Business Patterns, 2014)	15.5	19.3	Worse	16.4	Worse
Alcohol Abuse	Percentage of Alcohol-Impaired Driving Deaths (County Health Rankings, 2010-2014)	23.4	25.6	Worse	23.8	Same
Alcohol Abuse	Young Adults Driving While Intoxicated; arrests per 10,000 population Aged 16-21 yrs. (NYS Kids' Well-being Indicators Clearinghouse, 2015)	21.4	34.7*	Worse	34.0	Worse
Substance Abuse	Young Adult Arrests –Drug Use/ Possession/ Sale per 10,000 arrests for ages 16-21 yrs. (NYS Kids' Well-being Indicators Clearinghouse, 2015)	110.2	67.1	Better	28.3	Better
Substance Abuse	Death Rate due to Drug Poisoning per 100,000 population (County Health Rankings, 2012-2014)	11.4	7.1	Better	10.3	Better

*Rate not stable; the number is less than 20.

5. Promote Mental Health and Prevent Substance Abuse

Focus Area 2 – Prevent Substance Abuse and other Mental Emotional Behavioral Disorders

Other Indicators by Time Series and compared to New York State		Delaware County 2011-2013	Delaware County 2012-2014	New York State 2012-2014
Alcohol Abuse	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Alcohol Abuse (SPARCS)	26.9	29.0	72.9
Alcohol Abuse	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Alcohol Abuse (SPARCS)	15.9	16.4	25.3
Substance Abuse	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Substance Abuse (SPARCS)	21.0	19.5	28.7
Substance Abuse	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Substance Abuse (SPARCS)	15.8	12.6	22.6
Substance Abuse	Emergency Department Admission Rate per 100,000 population due to Opioids (SPARCS)	114.6	108.4	194.8
Substance Abuse	Hospital Admission rate per 100,000 population due to Opioids (SPARCS)	235.5	177.2	387.6
Suicide and Self-Inflicted Injury	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Suicide and Intentional Self-inflicted Injury (SPARCS)	17.3	18.3	12.1
Suicide and Self-Inflicted Injury	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Suicide and Intentional Self-inflicted Injury (SPARCS)	9.8	14.0	20.6
Suicide and Self-Inflicted Injury	Age-Adjusted ER Rate per 10,000 population Aged 12-17 due to Suicide and Intentional Self-inflicted Injury (SPARCS)	21.8	24.2	26.6

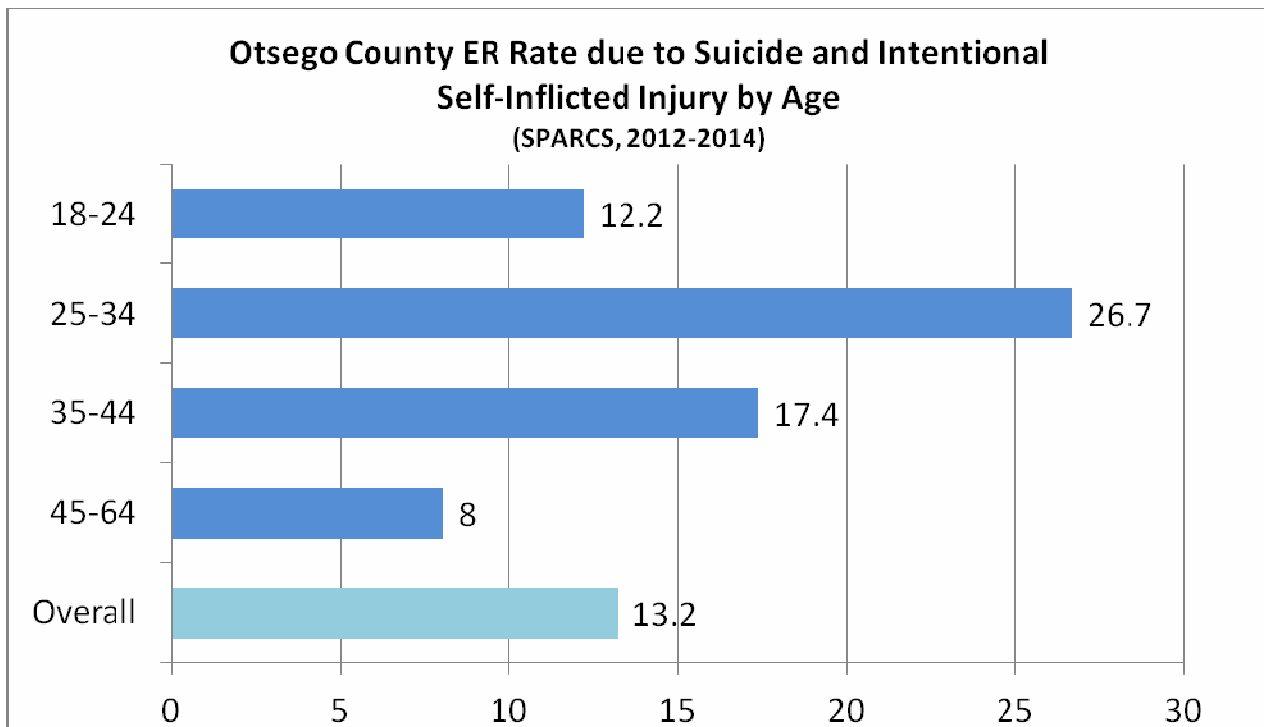
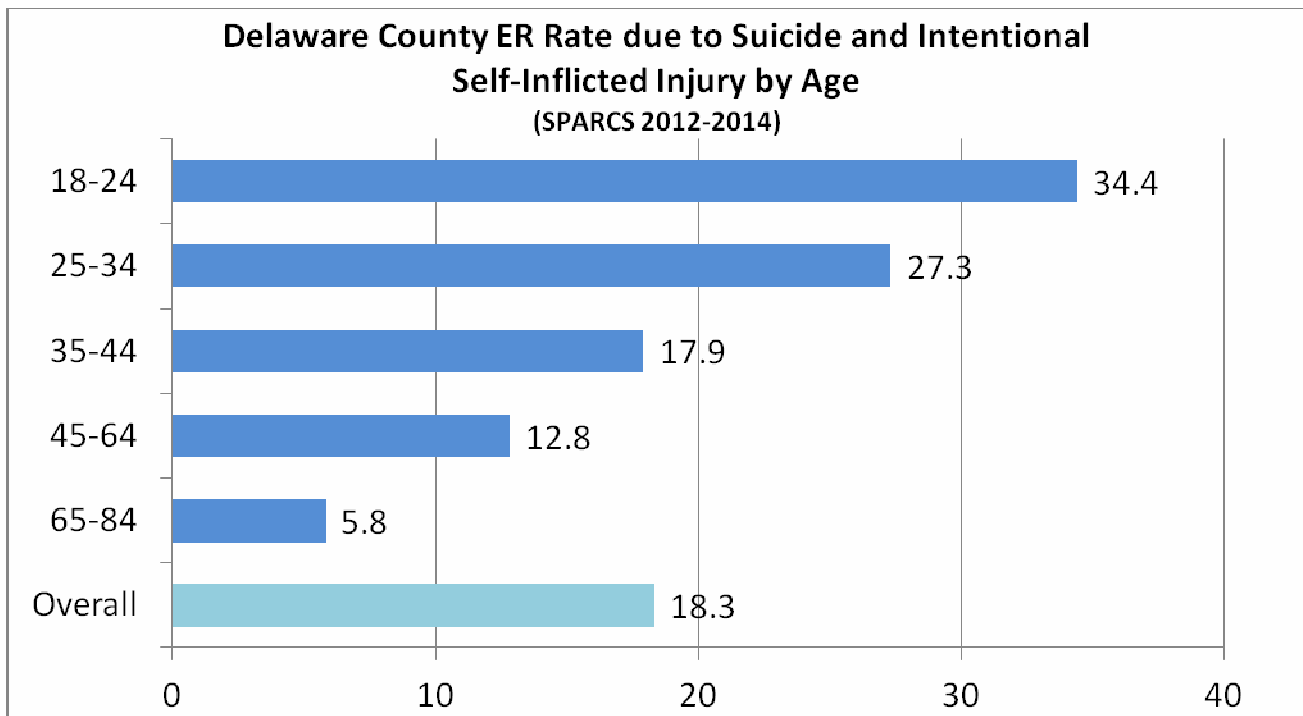
5. Promote Mental Health and Prevent Substance Abuse

Focus Area 2 – Prevent Substance Abuse and other Mental Emotional Behavioral Disorders

Other Indicators by Time Series and compared to New York State		Otsego County 2011-2013	Otsego County 2012-2014	New York State 2012-2014
Alcohol Abuse	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Alcohol Abuse (SPARCS)	21.8	23.4	72.9
Alcohol Abuse	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Alcohol Abuse (SPARCS)	17.4	16.4	25.3
Substance Abuse	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Substance Abuse (SPARCS)	13.5	14.7	28.7
Substance Abuse	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Substance Abuse (SPARCS)	14.0	14.7	22.6
Substance Abuse	Emergency Department Admission Rate per 100,000 population due to Opioids (SPARCS)	99.6	147.8	194.8
Substance Abuse	Hospital Admission rate per 100,000 population due to Opioids (SPARCS)	208.8	202.4	387.6
Suicide and Self-Inflicted Injury	Age-Adjusted ER Rate per 10,000 population 18+ yrs. due to Suicide and Intentional Self-inflicted Injury (SPARCS)	11.6	13.2	12.1
Suicide and Self-Inflicted Injury	Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs. due to Suicide and Intentional Self-inflicted Injury (SPARCS)	12.0	14.1	20.6
Suicide and Self-Inflicted Injury	Age-Adjusted ER Rate per 10,000 population Aged 12-17 due to Suicide and Intentional Self-inflicted Injury (SPARCS)	21.6	24.7	26.6

5. Promote Mental Health and Prevent Substance Abuse

Focus Area 2 – Prevent Substance Abuse and other Mental Emotional Behavioral Disorders



5. Promote Mental Health and Prevent Substance Abuse

Focus Area 2 – Prevent Substance Abuse and other Mental Emotional Behavioral Disorders

Otsego County Youth Risk Behavior Survey Indicators compared to New York State		New York State 2015	Otsego County 2016	New York State Comparison
Alcohol Abuse	Percentage of High School Students Who Drove When Drinking Alcohol	8.0	7.1	Better
Alcohol Abuse	Percentage of High School Students Who Drank Alcohol before 13 years	16.1	11.6	Better
Alcohol Abuse	Percentage of High School Students Who Currently Drank Alcohol (at least 1 drink on at least 1 day during the 30 days before the survey)	29.7	35.3	Worse
Alcohol Abuse	Percentage of High School Students Who Reported That Their Largest Number of Drinks in a Row Was 10 or More	3.0	3.5	Same
Alcohol Abuse	Percentage of High School Students Who Usually Obtained the Alcohol They Drank by Someone Giving It to Them	32.2	39.8	Worse
Substance Abuse	Percentage of High School Students Who tried Marijuana before 13 years	6.5	6.2	Same
Substance Abuse	Percentage of High School Students Who Currently used Marijuana	19.3	22.1	Worse
Substance Abuse	Percentage of High School Students Who Ever Used Cocaine	7.6	4.3	Better
Substance Abuse	Percentage of High School Students Who Ever Used Heroin	4.8	2.2	Better
Substance Abuse	Percentage of High School Students Who Ever Used Methamphetamines	4.5	2.2	Better

5. Promote Mental Health and Prevent Substance Abuse

Focus Area 2 – Prevent Substance Abuse and other Mental Emotional Behavioral Disorders

Otsego County Youth Risk Behavior Survey Indicators compared to New York State		New York State 2015	Otsego County 2016	New York State Comparison
Substance Abuse	Percentage of High School Students Who Ever Used Ecstasy	7.0	4.3	Better
Substance Abuse	Percentage of High School Students Who Ever Used Synthetic Marijuana	10.0	6.2	Better
Substance Abuse	Percentage of High School Students Who Ever Injected Any Illegal Drug	3.4	2.1	Better
Suicide and Self-Inflicted Injury	Percentage of High School Students Who Felt Sad or Hopeless	28.6	23.1	Better
Suicide and Self-Inflicted Injury	Percentage of High School Students Who Seriously Considered Attempting Suicide	15.7	13.4	Better
Suicide and Self-Inflicted Injury	Percentage of High School Students Who Attempted Suicide	9.9	5.7	Better
Suicide and Self-Inflicted Injury	Percentage of High School Students Who Attempted Suicide that Resulted in an Injury, Poisoning, or Overdose that Had to be Treated by a Doctor or Nurse	4.4	1.9	Better

5. Promote Mental Health and Prevent Substance Abuse

Focus Area 2 – Prevent Substance Abuse and other Mental Emotional Behavioral Disorders

Otsego County Youth Risk Behavior Survey Indicators by Time Series		Otsego County 2007	Otsego County 2016
Alcohol Abuse	Percentage of High School Students Who Ever Had a least one drink of Alcohol	72.5	64.1
Substance Abuse	Percentage of High School Students Who Ever used Marijuana	37.2	36.6
Substance Abuse	Percentage of High School Students Who Ever Used Inhalants	12.9	5.6
Substance Abuse	Percentage of High School Students Who Ever Took Steroids Without a Doctor's Prescription	2.9	2.1
Substance Abuse	Percentage of High School Students Who were Offered, Sold or Given an illegal drug on School Property	20.3	17.9
Suicide and Self-Inflicted Injury	Percentage of High School Students Who Made a Plan About How They Would Attempt Suicide	8.0	11.0

6. Prevent HIV, Sexually Transmitted Diseases, Vaccine-Preventable Diseases and Healthcare-Associated Infections

Focus Area 1 – Prevent HIV and STDs

Based on information from the New York State Department of Health, New York State remains the epicenter of the HIV epidemic in the U.S., ranking first in the number of persons living with HIV/AIDS. The same risk factors associated with HIV also put communities at risk for Sexually Transmitted Diseases and viral hepatitis.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Newly diagnosed HIV case rate per 100,000 (NYSDOH Bureau of HIV/AIDS Epidemiology, 2012-2014)	16.1	17.9	2.1	Better	4.3	Better
Gonorrhea case rate per 100,000 women- Aged 15-44 yrs. (NYS STD Surveillance System, 2014)	183.4	165.4	13.3	Better	40.0	Better
Gonorrhea case rate per 100,000 men - Aged 15-44 years (NYS STD Surveillance System, 2014)	199.5	303.1	24.9	Better	8.3	Better
Chlamydia case rate per 100,000 women - Aged 15-44 years (NYS STD Surveillance System, 2014)	1458.0	1536.4	811.4	Better	1433.4	Better
Primary and secondary syphilis case rate per 100,000 men (NYS STD Surveillance System, 2014)	10.1	17.3	0.00	Better	6.7	Better
Primary and secondary syphilis case rate per 100,000 women (NYS STD Surveillance System, 2014)	0.4	0.5	N/A	N/A	N/A	N/A

6. Prevent HIV, Sexually Transmitted Diseases, Vaccine-Preventable Diseases and Healthcare-Associated Infections

Focus Area 1 – Prevent HIV and STDs

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of High School Students Who Were Ever Tested for HIV (Otsego County YRBS, 2016)	18.0	N/A	N/A	10.6	Worse
Percentage of adults aged 47-68 yrs. reporting ever tested for Hepatitis C (HCV) (NYS eBRFSS, 2013-2014)	37.3	35.4*	Worse	28.9*	Worse
Gonorrhea Incidence Rate; cases per 100,000 population (NYSDOH CHIRS, 2012-2014)	107.7	5.7*	Better	21.1	Better

*Rate should be viewed with caution, fewer than 10 events in the numerator.

Other Indicators by Time Series and compared to New York State	Delaware County 2011-2013	Delaware County 2012-2014	New York State 2012-2014
Chlamydia Incidence Rate; cases per 100,000 population (NYSDOH CHIRS)	176.6	209.1	499.9

Other Indicators by Time Series and compared to New York State	Otsego County 2011-2013	Otsego County 2012-2014	New York State 2012-2014
Chlamydia Incidence Rate; cases per 100,000 population (NYSDOH CHIRS)	301.1	354.4	499.9

6. Prevent HIV, Sexually Transmitted Diseases, Vaccine-Preventable Diseases and Healthcare-Associated Infections

Focus Area 2 – Prevent Vaccine-Preventable Diseases

Immunizations help prevent the spread of communicable diseases.

Prevention Agenda Indicators	Prevention Agenda 2018 Benchmark	New York State	Delaware County	Benchmark Comparison	Otsego County	Benchmark Comparison
Percentage of children with 4:3:1:3:3:1:4 immunizations series – Aged 19-35 months (NYS Immunization Information System, 2014)	80.0	N/A	61.4	Worse	62.1	Worse
Percentage of adolescent females with 3 or more doses of HPV immunization - Aged 13-17 years (NYS Immunization Information System, 2014)	50.0	N/A	27.8	Worse	36.6	Worse
Percentage of adults with flu immunization - Aged 65+ years (NYS eBRFSS, 2013-2014)	70.0	72.4	72.1	Better	68.1*	Worse

Other Indicators compared to New York State	New York State	Delaware County	New York State Comparison	Otsego County	New York State Comparison
Percentage of adults with Pneumonia immunization - Aged 65+ years (NYS eBRFSS, 2013-2014)	65.1	63.8	Worse	68*	Better
Percentage of adults aged 18+ yrs. with flu immunization (NYS eBRFSS, 2013-2014)	46	41	Worse	45.1	Worse
Lyme Disease Incidence Rate per 100,000 population (NYSDOH CHIRS, 2012-2014)	34.2	43.4	Worse	80.2	Worse

*Rate should be viewed with caution due to a large standard error.

6. Prevent HIV, Sexually Transmitted Diseases, Vaccine-Preventable Diseases and Healthcare-Associated Infections

Focus Area 2 – Prevent Vaccine-Preventable Diseases

Other Indicators by Time Series and compared to New York State	Delaware County 2011-2013	Delaware County 2012-2014	New York State 2012-2014
Age-Adjusted ER Rate per 10,000 population 18+ yrs due to Bacterial Pneumonia (SPARCS)	26.9	26.5	13.9
Age-Adjusted ER Rate per 10,000 population 18+ yrs due to Immunization-Preventable Pneumonia and flu (SPARCS)	4.5	5.5	7.3
Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs due to Bacterial Pneumonia (SPARCS)	32.9	30.0	21.1

Other Indicators by Time Series and compared to New York State	Otsego County 2011-2013	Otsego County 2012-2014	New York State 2012-2014
Age-Adjusted ER Rate per 10,000 population 18+ yrs due to Bacterial Pneumonia (SPARCS)	13.5	13.3	13.9
Age-Adjusted ER Rate per 10,000 population 18+ yrs due to Immunization-Preventable Pneumonia and flu (SPARCS)	2.9	3.6	7.3
Age-Adjusted Hospitalization Rate per 10,000 population 18+ yrs due to Bacterial Pneumonia (SPARCS)	31.9	28.4	21.1