

Lafayette County Community Health Assessment

Prevent

Promote

Protect



**Lafayette County
Health Department**



Lafayette County Health Assessment

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Overview

The information comprised in the community health assessment report has come from several public sources of information. In addition to Lafayette County, a comparative overview of the surrounding counties: Carroll, Clay, Jackson, Johnson, Pettis, and Ray along with the State of Missouri were included in the assessment.

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Introduction

INTRODUCTION

Public Health is often confused with health care. While health care providers diagnose and treat individual patients, public health professionals evaluate whole communities and develop a plan of action to improve the health status of the entire population. To accomplish this, the public health system uses a cyclical process of assessment, policy development, and assurance—the Core Functions of Public Health.

A Community Health Assessment is a fundamental assessment tool of public health practice. Using a process to collect and analyze data, local public health agencies may set priorities for continuing programs, or for developing and implementing programs to address key issues which otherwise would negatively impact the health of the population served.

As the local public health agency, the Lafayette County Health Department (LCHD) exists to prevent disease, and to protect and promote the health and well being of people in the county's communities. The mission of the Lafayette County Health Department is to empower people to develop safe and healthy lifestyles. Because public health practice is based on populations, carrying out the core functions of public health –assessment, policy development, and assurance—is a dynamic and constantly changing process. Periodic assessments will reveal what key issues are impacting the health of the population. Because resources are limited, priorities must be set to have the greatest impact on improving health outcomes. Programs may then be developed based on these priorities, which then leads to evaluating the programs to determine their effectiveness on impacting health outcomes. Following evaluation, the assessment cycle starts again to confirm if priorities have remained the same, or if new priorities have emerged.

This Community Health Assessment is a comprehensive collection and analysis of data regarding health indicators for Lafayette County. It will be used not only to present a snapshot of current key health issues, but also to evaluate the improvement plan implemented as a result of the previous assessment done in 2007 and then to set priorities for planning public health programs and services for the next cycle. Its purpose is to assist decision makers in identifying key issues and to inform community members and stakeholders about these issues. By sharing this information, it is the hope of the Board of Trustees and Staff of LCHD that strategies can be planned to improve the health of our county's communities.

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Lafayette County Health Department

Executive Summary

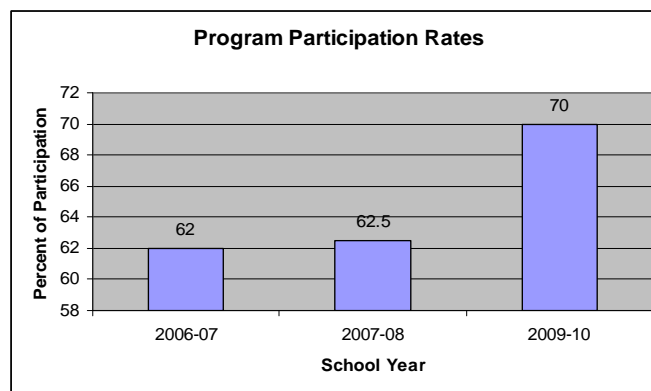
In using an assessment to develop health improvement plans, one must look back as well as forward. Below is a discussion of the previous Community Health Assessment and Improvement Plan and progress measured with regard to the issues revealed at that time. Following that discussion will be a dialogue of what issues have remained the same or changed, and the direction community health improvement planning will take based on findings from the 2012 assessment.

KEY ISSUES FROM THE 2007 COMMUNITY HEALTH ASSESSMENT

The Community Health Assessment completed in 2007 for Lafayette County indicated that the top three Priority Issues were: 1) Access to Care; 2) Chronic Disease; and 3) Accidental Injuries. A Health Improvement Action Plan was then completed for improving outcomes under these priority areas through programs that fit within the mission of public health and LCHD, which is to say not all strategies identified in an assessment are necessarily under the purview (authority or control) of a local health department.

2007 Issue 1: Access to Care

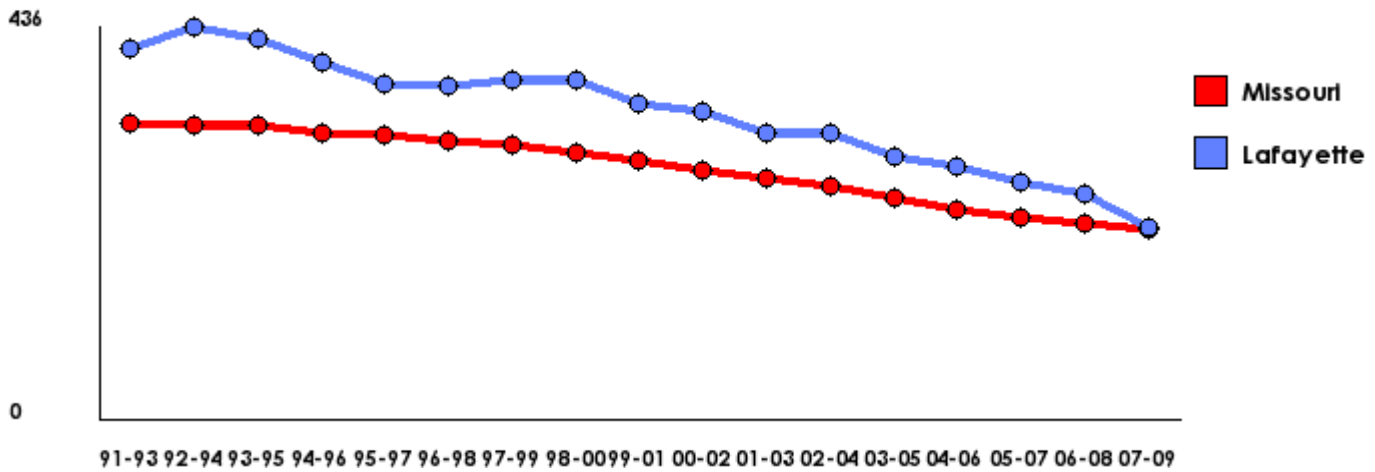
Access to care, for example, could mean lack of physical transportation or it could be a lack of primary care providers in a given geographical location. Neither of these fall under services that are feasible for a small rural public health department to provide. But one particular health concern revealed was oral health. In an attempt to improve oral health in the county through prevention, LCHD began the “Saving Smiles” -- a Preventive Service Program for school aged children. Elementary school aged children through grade 6 are eligible for annual screenings, fluoride varnish, and referral if: 1) their district elects to participate; and 2) a parent or legal guardian consents for their child/children to be enrolled in this voluntary service. The chart below left demonstrates that the percentage of children whose parents consented for them to be in the program is continually on the rise. Numbers of children referred who complete treatment is also increasing.



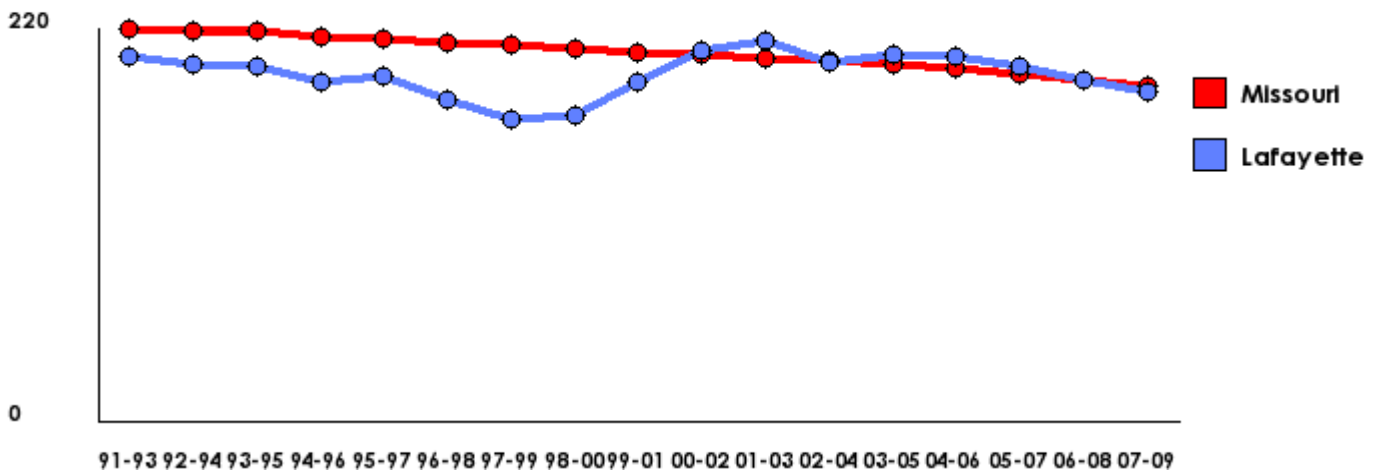
2007 Issue 2: Chronic Disease

The ideal of public health is to prevent disease. The 2007 assessment revealed a variety of chronic health issues affecting Lafayette County residents, which are preventable, but that with a change in lifestyle habits could be prevented. Childhood obesity, tobacco use, and physical inactivity were all predominant factors leading to the prevalence of chronic diseases which contributed to leading causes of death such as heart disease, stroke, and cancers. LCHD programs initiated to improve these indicators included school based nutrition and physical activity oriented health education; age appropriate curriculum for tobacco prevention in schools and adult cessation resources; and walking programs to encourage adults to get out and move more. The charts below show that the trend for deaths from heart disease and all cancers is falling toward rates within or slightly below the state average.

Deaths from Heart Disease



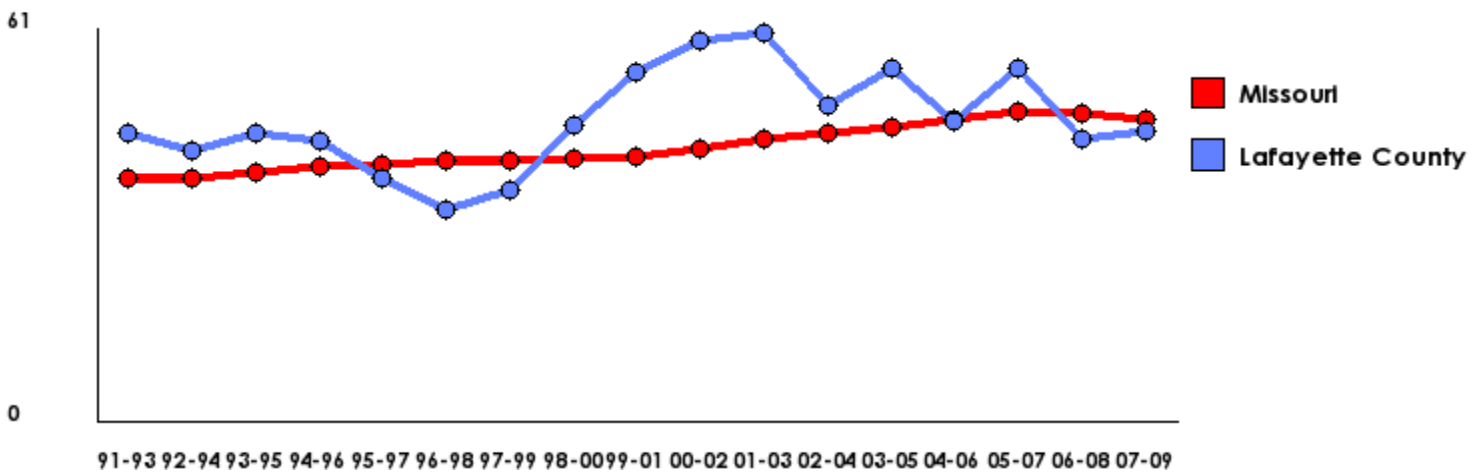
Deaths from All Cancers



2007 Issue 3: Accidental Injuries

The third leading cause of death in 2007 for Lafayette County was accidental injuries. Among children, these injuries were mainly a result of preventable accidents in the home. LCHD chose to continue support for a parenting resource group which gave financially disadvantaged families programs to develop better parenting skills including home safety, cribs for safe sleep, and car seats to prevent injuries during motor vehicle accidents. The table below shows that following the 2007 assessment and improvement plan, rates fell below the State average. While between 2007 and 2009 they have increased slightly, they have remained below that average.

Deaths from total unintentional injuries



COMMUNITY HEALTH ASSESSMENT 2012

LCHD was fortunate to be able to utilize a student intern from the University Of Missouri School Of Public Health to assist in compiling an updated Community Health Assessment for 2012. Data sources are listed at the end of the report. After a comprehensive review of this data and data from surrounding counties for comparison, the intern utilized the Missouri Department of Health and Senior Services tool “Missouri Information for Community Assessment (MICA)” to prioritize the leading issues for Lafayette County. The 2012 Community Assessment will be utilized to inform LCHD’s strategic planning and health improvement planning processes.

Data presented in the assessment is organized by demographic groups and health indicators: adolescents, women and children, adults, minorities, and senior citizens.

At the end of each section are found the MICA priorities for risk factors and priority diseases and conditions. In developing the overarching priorities for the general population

of Lafayette County, certain health risks and conditions emerged that impacted each of these demographic groups. They are represented in the table below:

	Infant/Children	Women	Adolescents	Adults	Seniors
Smoking	X (mother smoked during pregnancy)	X	X	X	X
Chronic disease (heart disease, cancers, stroke, respiratory disease)		X		X	X
Unintentional Injury (MVA's)	X	X	X	X	

According to the MDHSS Community Data Profiles (2011) the leading causes for death in Lafayette County are:

1. HEART DISEASE
2. CANCER
3. STROKE
4. RESPIRATORY COMPLICATIONS
5. UNINTENTIONAL INJURY

Leading cause #1, and also #2 through #4 are all chronic diseases for which smoking is a contributing factor. Therefore, for the purpose of developing the community health improvement plan, for the immediate future, the three priority problems that will be addressed are:

1. SMOKING/TOBACCO USE
2. CHRONIC DISEASE (EMPHASIS ON PROMOTING HEALTHY LIVING TO INCREASE PHYSICAL ACTIVITY, REDUCE OBESITY, ACHIEVE BETTER OUTCOMES FOR DIABETIC RESIDENTS, AND IMPROVE HEART HEALTH)
3. UNINTENTIONAL INJURIES

By continuing to conduct these periodic community health assessments, LCHD will review and update strategic and health improvement plans. This in turn will aid decision-makers in prioritizing program resources to have the greatest impact on these priority issues. Using these processes to engage and inform community partners, it is the hope of the Board of Trustees and the staff of LCHD that better health outcomes for all Lafayette County residents will be achieved.

LAFAYETTE COUNTY – LIVE HEALTHY LIVE WELL

The Lafayette County-Live Healthy, Live Well project was begun in 2011 with funds from the Social Innovation for Missouri grant through the Missouri Foundation for Health. Partnering with the Health Care Collaborative of Rural Missouri and the University of Missouri Extension, LCHD and partners will increase overall community health in Lafayette County by decreasing tobacco use and exposure to tobacco by persons of all ages, increasing access to healthy, fresh food, and providing an environment that encourages active and healthy lifestyles.

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Lafayette County Health Dept.

The tables and charts represent Lafayette County profile.

Population Demographics for Lafayette County

	Total	Males (%)	Females (%)
Lafayette County	33,381	49.4	49.0
State of Missouri	5,988,927	50.6	51.0

Source: Missouri Census Data Center

Race Demographics

Race	Percent
White	96.0
Black	3.0
Hispanic or Latino	2.2
American Indian and Alaska Native	1.3
Asian	0.6
Native Hawaiian and Other Pacific Islander	0.2
Multi Race - Person reporting more than one race	1.9

Source: Missouri Census Data Center

Age Demographics for Lafayette County

Age	Percent
Age 0 to 17	24.5
18 to 24	7.9
25 to 44	23.3
45 to 64	27.8
65 and over	16.5

Source: Missouri Census Data Center

Educational Attainment

The table below shows the distribution of educational attainment levels among Lafayette County compared to the State of Missouri.

	No High School Diploma (%)	High School Only (%)	Some College (%)	Bachelors (%)	Graduate or Professional (%)
Lafayette County	9.1%	40.6%	22.3%	10.9%	5.0%
State of Missouri	9.2%	32.6%	22.0%	15.8%	9.2%

Source: U.S. Census Bureau, 2010

Poverty

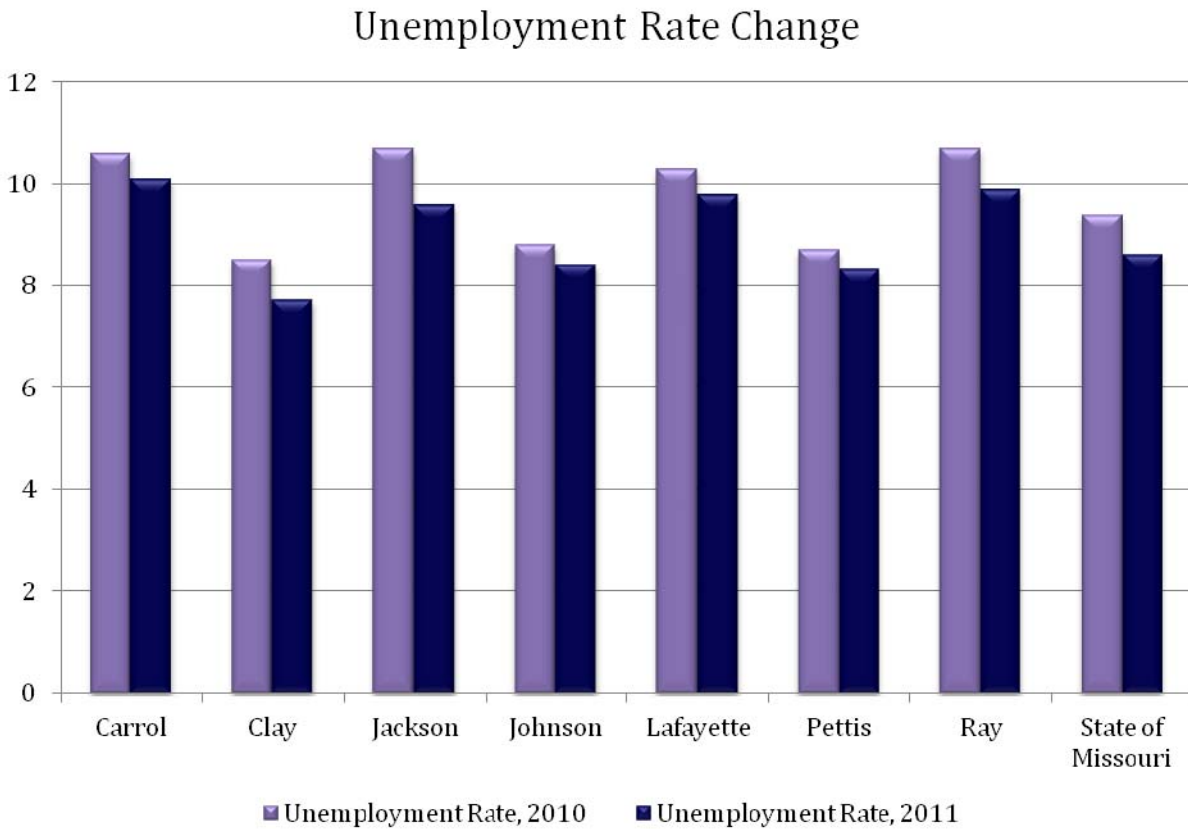
Poverty status over the last 12 months for Lafayette County is 32,240 and 5,744,590 for the State of Missouri. The table below shows the poverty level among different ages.

	Total (%)	Below Poverty Level (%) Under 18 years	Below Poverty Level (%) 18 to 64 years	Below Poverty Level (%) 65 years and over
Lafayette County	10.6%	12.7%	10.5%	7.5%
State of Missouri	14.0%	19.3%	12.9%	9.3%

Source: US Census Bureau, Poverty Status in the Past 12 Months, 2006-2010 American Community Survey 5-Year Estimates

Unemployment Change

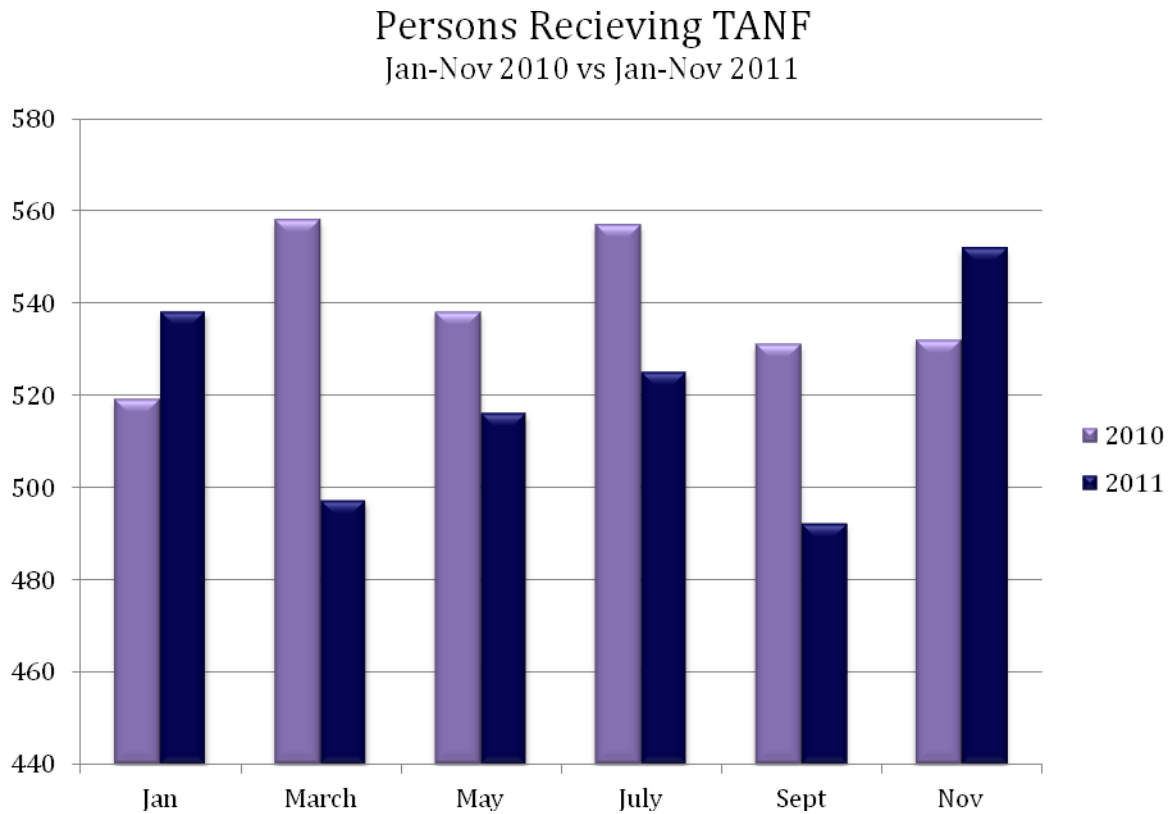
This chart represents the unemployment change among Lafayette County and its 6 surrounding counties from 2010 to 2011. The rate of change for Lafayette County was -0.5 compared to the state, which was -0.8.



Source: U.S. Department of Labor, Bureau of Labor Statistics, Labor Force Data by County, 2010 and 2011

Temporary Assistance for Needy Families

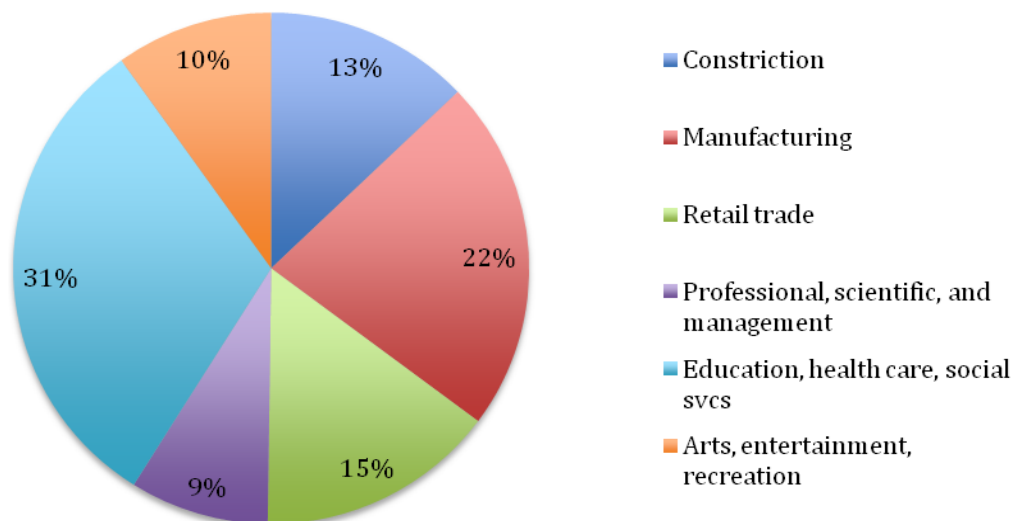
The chart below represents the number of residents in Lafayette County receiving Temporary Assistance for Needy Families (TANF).



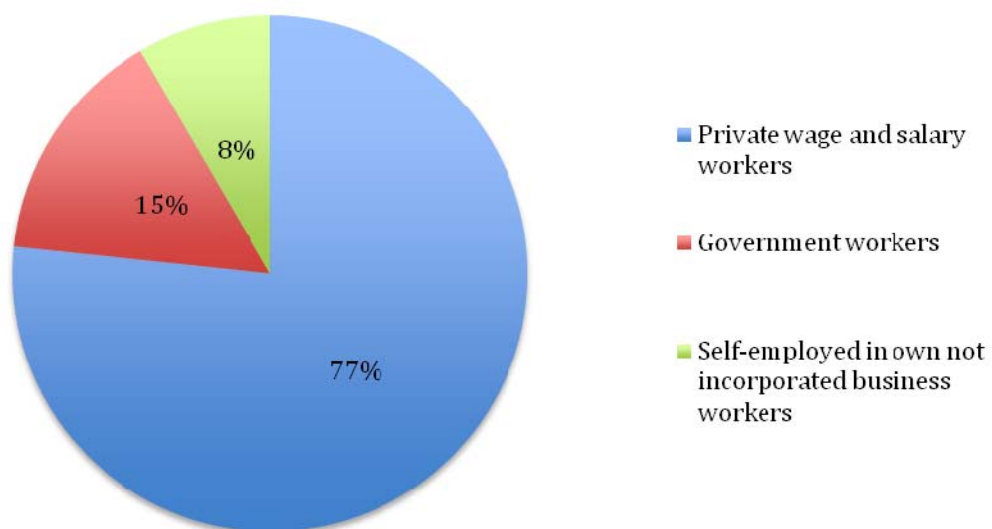
Source: MICA, 2010-2011

Employment

Percent Employment by Industry
2006-2010



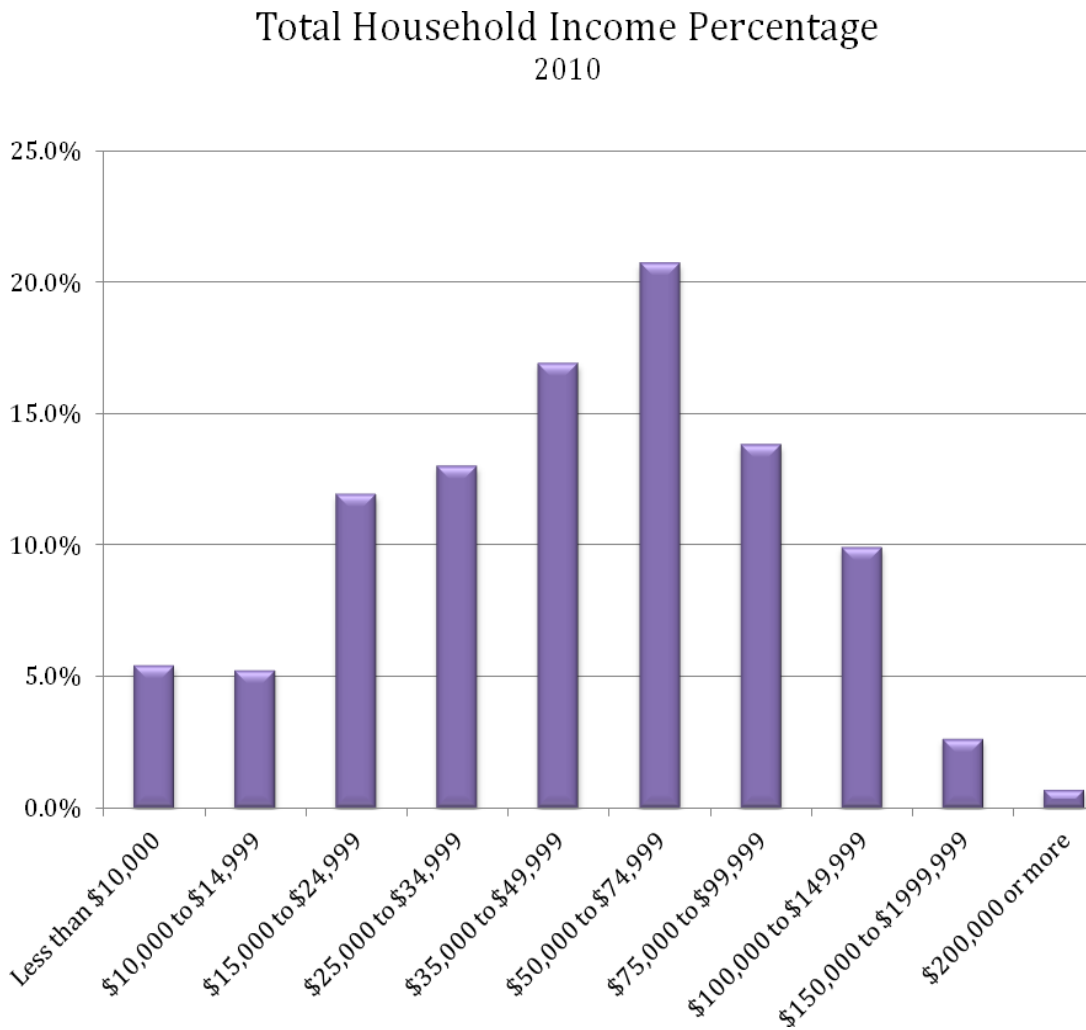
Class of Worker
2010



Source: U.S. Census Bureau, 2006-2010

Total Household Income Percentage

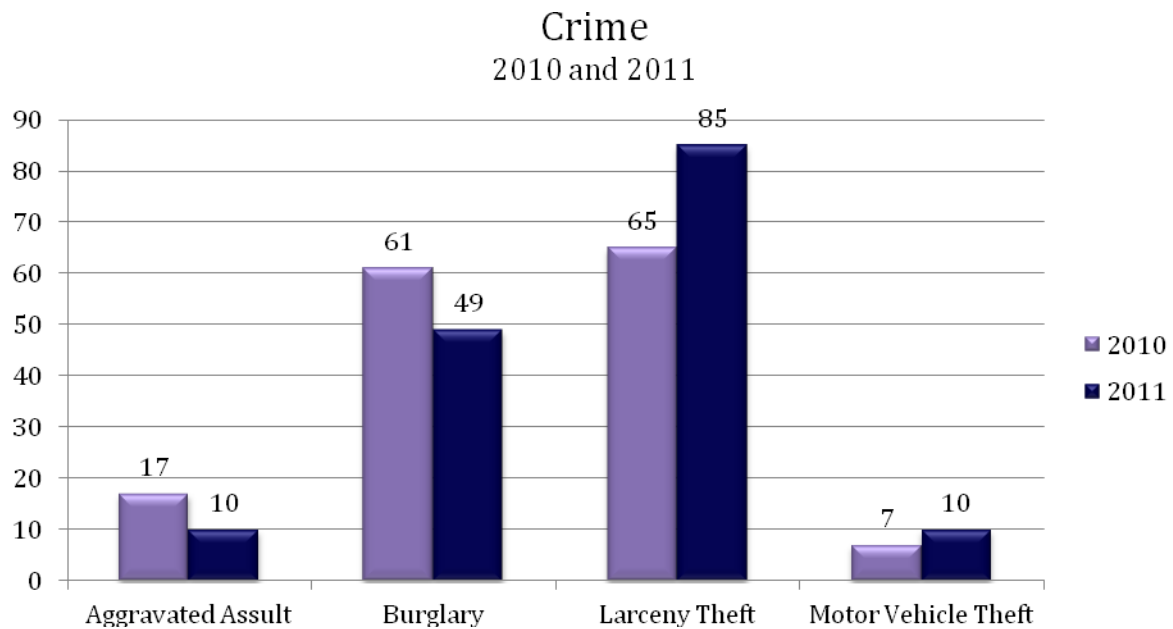
The graph below shows the total household income percentages in Lafayette County in 2010.



Source: U.S. Census Bureau, 2010

Crime

The table below shows the occurrence of types of crime in Lafayette County according to the Missouri State Highway Patrol's Uniform Crime Reporting Program. The table demonstrates that the aggravated assault and burglary occurrences have decreased, while larceny theft and motor vehicle theft have increased.



Source: Missouri State Highway Patrol's Uniform Crime Reporting Program, 2010-2011

Domestic Violence

The domestic violence incidents reports includes: any dispute between spouses, former spouses, persons who have a common child regardless of marital status, persons related by blood, person related by marriage, person not married but presently residing together, and person not married but who have resided together in the past. The table below shows the domestic violence incidences in Lafayette County in addition to six surrounding counties and the State of Missouri for 2010 and 2011.

	2010	2011
Carrol County	32	40
Clay County	765	571
Jackson County	7717	6458
Johnson County	401	364
Lafayette County	42	48
Pettis County	527	500
Ray County	182	224
State of Missouri	41665	40591

Source: Missouri State Highway Patrol, Uniform Crime Reporting (UCR) Program, 2009.

Lafayette County Health Department Environmental Activities

The table below shows the number and type of environmental activities in Lafayette County in 2011.

Activity	Number of Activities
Phone calls	359
Faxes	25
Emails	320
Letters	48
Post Cards	1
Articles/news	5
Building use	7
Meetings Attended	8
Education	6
Referrals	6
Consult visits	7
Classes taught	8
Food handlers trained	28

Source: Lafayette County Health Department Environmental Public Health Program

	Food	Water	Sewage	Mold	Epi/PHEP	Other
Complaint	3	-	9	3		5
Investigation	-	1	4	-	56	2
Calls	127	23	48	18	152	56
Correspondence	46	4	26	1	10	14
Site visits	393	5	23	-	7	53

Source: Lafayette County Health Dept. Annual Report

Visits by Community

The table below represents the number of visits by cities in Lafayette County. The table shows that Lexington and Higginsville have the highest number of visits.

City	Number of Visits
Alma	14
Aullville	0
Bates City	23
Concordia	55
Corder	0
Dover	1
Emma	2
Higginsville	123
Lexington	129
Mayview	0
Napoleon	1
Oak Grove	2
Odessa	85
Waverly	25
Wellington	15

Source: LCHD Annual Report

Indicators of Child Well-Being

The indicators of the child's well being include education, economic conditions, and mental health.

	Trend Data	
		Current Year
Percent of students enrolled in free/reduced lunch 2005/2009	MO Lafayette	43.6 36.3
Percent of births to mothers without h.s. diploma 2005/2009	MO Lafayette	17.1 18.6
Percent low birthweight infants 2000-2004/2005-2009	MO Lafayette	8.1 6.1
Infant mortality (per 1,000 live births) 2000-2004/2005-2009	MO Lafayette	7.3 7.7
Child deaths, ages 1-14 (per 100,000) 2000-2004/2005-2009	MO Lafayette	19.3 3.1
Child abuse and neglect (per 1,000) 2005/2009	MO Lafayette	29.8 29.3
Percent annual high school dropouts 2005/2009	MO Lafayette	3.9 1.7
Births to teens, ages 15-19 (per 1,000) 2005/2009	MO Lafayette	41.6 47.4
Violent deaths, ages 15-19 (per 100,000) 2000-2004/2005-2009	MO Lafayette	64.0 58.7

Source: http://mcadc2.missouri.edu/pub/webrepts/kidscent/outcomes_facts/29107.html

Economic Condition of Families

	Trend Data	
		Current Year
Percent children in poverty 2000/2008	MO Lafayette	19.1 15.5
Children under age 6	MO Lafayette	23.0 26.2
Percent children in single parent families 2000/2008	MO Lafayette	32.2 26.1
High school graduation rate 2005/2009	MO Lafayette	85.2 92.7

Source: http://mcdc2.missouri.edu/pub/webrepts/kidscent/outcomes_facts/29107.html

Health/Mental Health

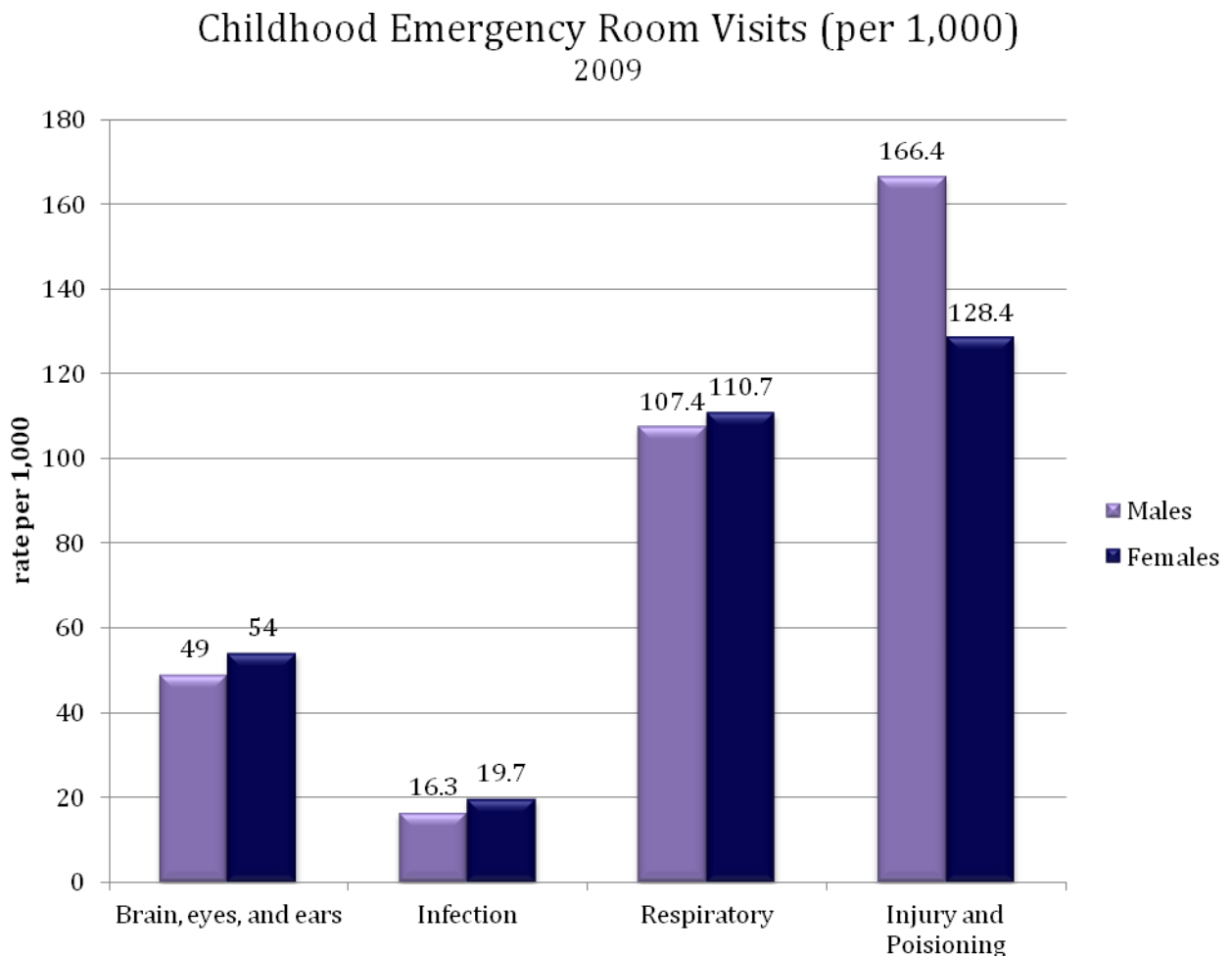
	Trent Data	
		Current Year
Percent children enrolled in MC+/Medicaid 2005/2009	MO Lafayette	35.0 33.4
Percent children with elevated blood lead levels 2005/2009	MO Lafayette	1.0 0.7
Juvenile law violation referrals, ages 10-17 (per 1,000) 2005/2008	MO Lafayette	55.2 70.2

Source: http://mcdc2.missouri.edu/pub/webrepts/kidscent/outcomes_facts/29107.html

Childhood Emergency Room Visits by Gender

Since 2005, the rate of respiratory, injury/poisoning, and brain, eyes, and ears emergency room visits has risen in both males and females. The rate of infection for both males and females has decreased since then.

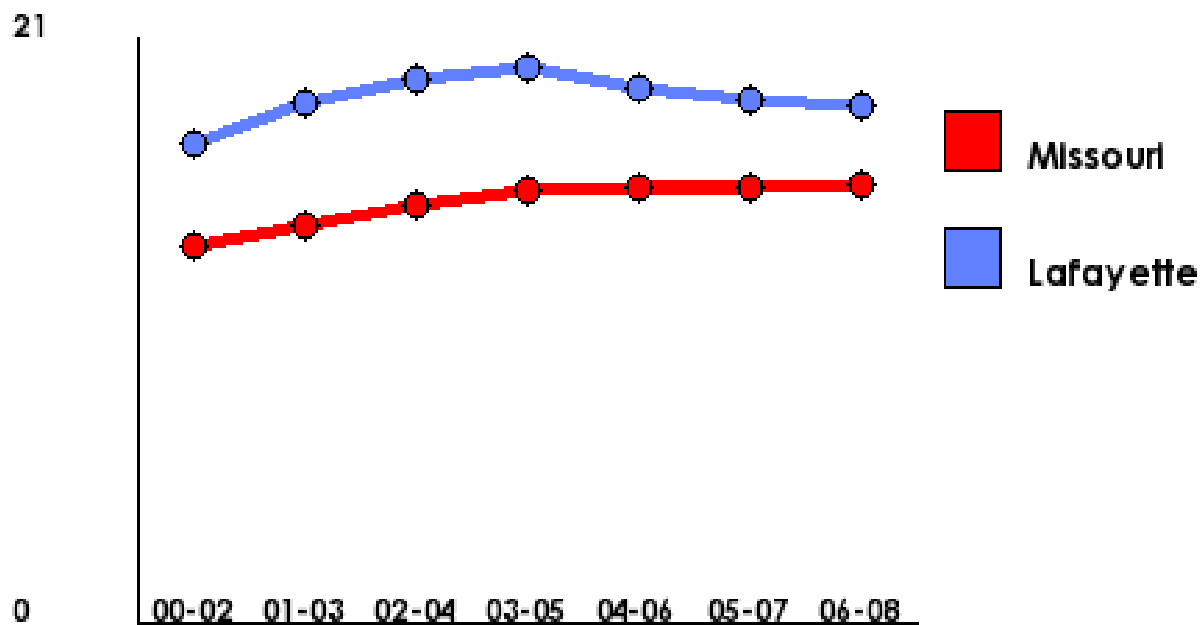
The graph below demonstrates the rate of male and female childhood emergency visits for children under 15 years in 2009.



Source: <http://health.mo.gov/data/mica/mica/er.php>

WIC Children Ages 24 to 29 months Overweight (BMI) compared to the state

WIC Children Ages 24 to 59 Months Overweight (BMI)
Three-Year Moving Average Rates



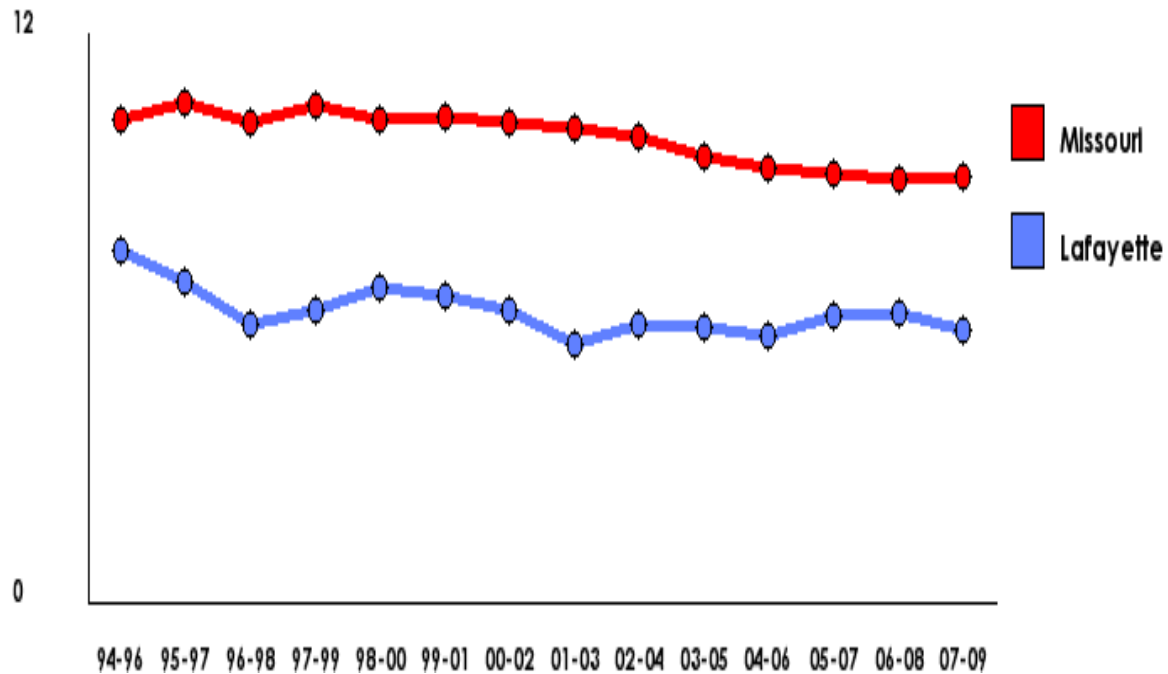
- Lafayette rate did not show a statistically significant trend.
- Missouri rate trend shows a statistically significant increase.

Rate per 1,000

Source: DHSS, Child Profile for Lafayette Residents

Asthma ER Visits

Under Age 18: Asthma ER Visits
Three-Year Moving Average Rates



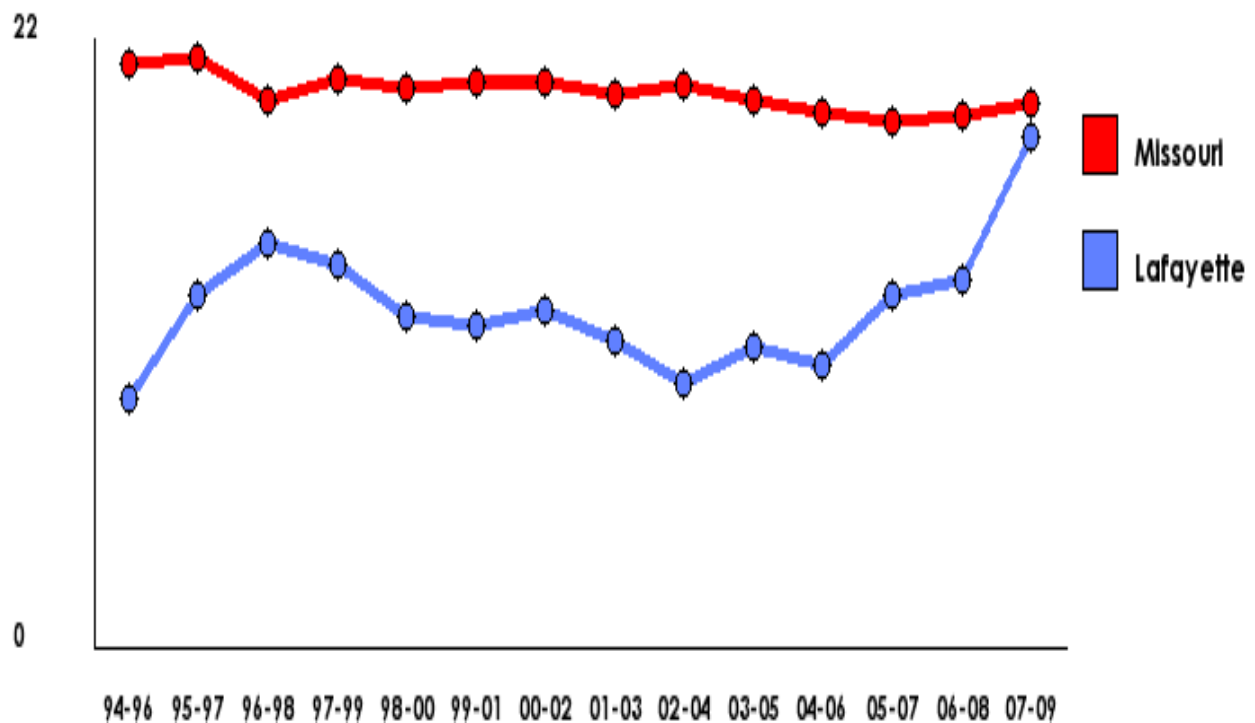
- Lafayette rate trend shows a statistically significant decrease.
- Missouri rate trend shows a statistically significant decrease.

The Asthma ER Visits rates are per year per 1,000

Source: DHSS, Child Profile for Lafayette Residents

Asthma Hospitalizations

Under Age 18: Asthma Hospitalizations
Three-Year Moving Average Rates



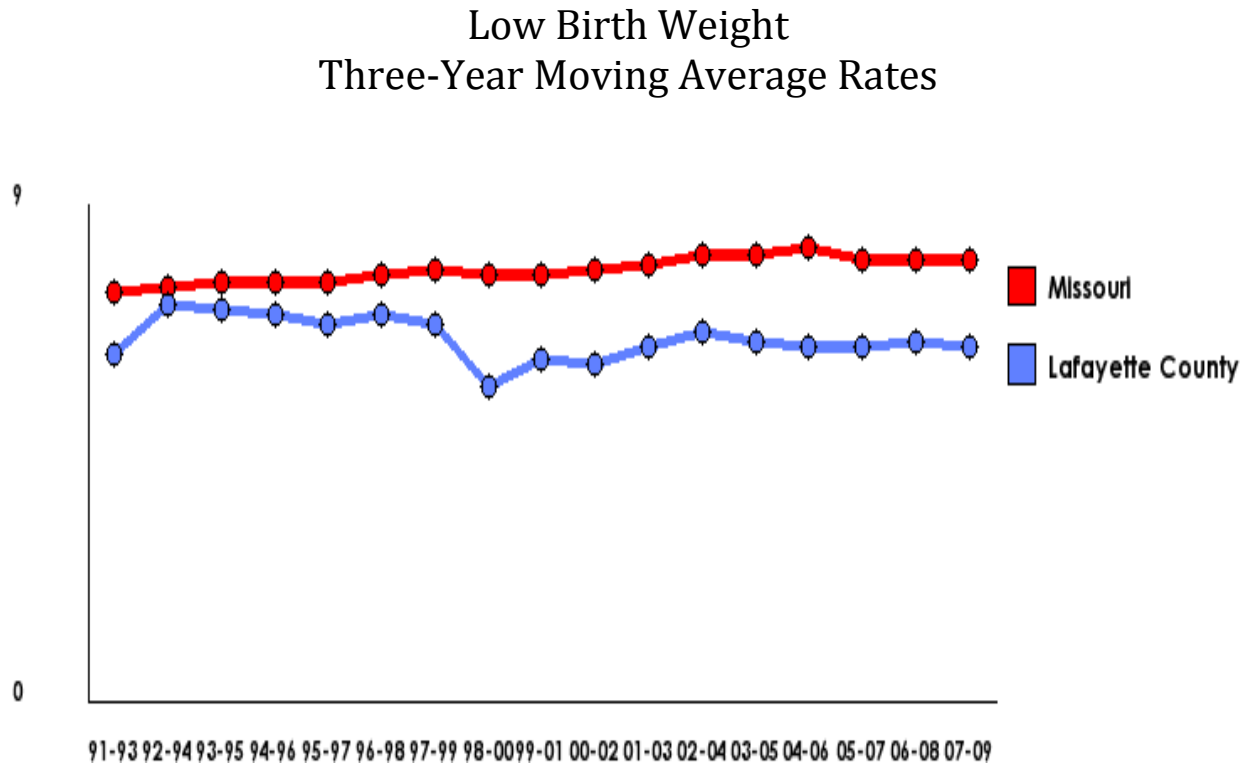
- Lafayette rate does not show a statistically significant trend.
- Missouri rate does not show a statistically significant trend

Asthma hospitalization rates are per year per 10,000

Source: DHSS, Child Health Profile for Lafayette Residents

Disparities

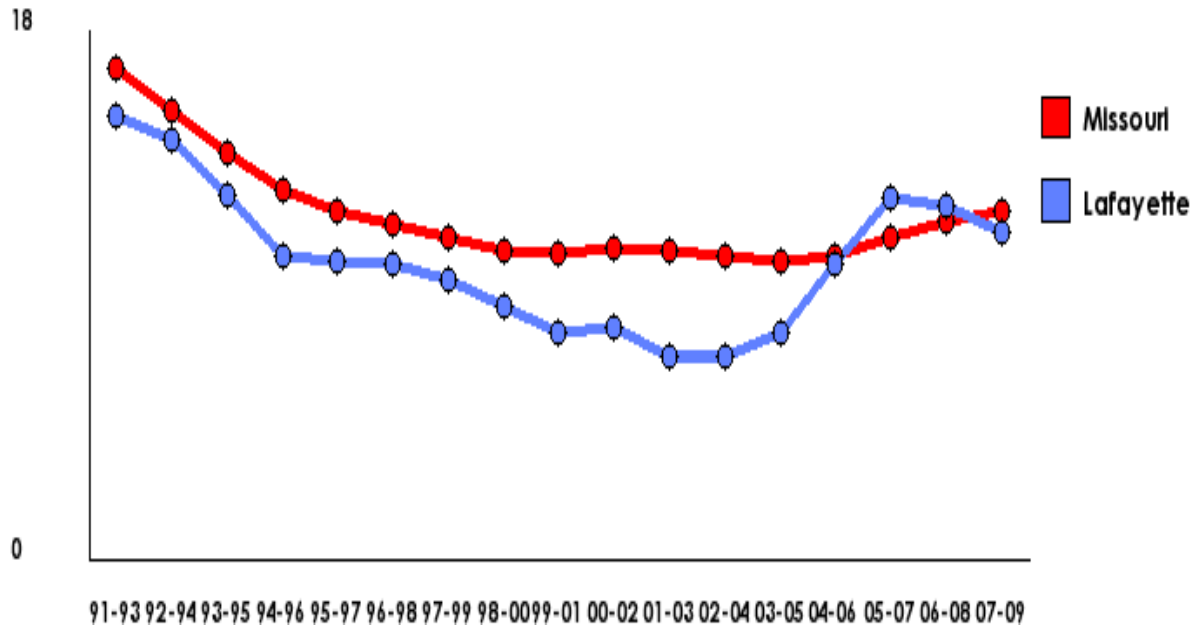
The following graphs are disparities in prenatal risk indicators.



- Lafayette County rate does not show a statistically significant trend.
- Missouri rate trend shows a statistically significant increase.

Source: DHSS, Child Health Profile for Lafayette Residents

Inadequate Prenatal Care Three-Year Moving Average Rates



- Lafayette rate did not show a statistically significant trend.
- Missouri rate trend shows a statistically significant decrease.

Source: DHSS

Women, Infants, and Children (WIC) Program

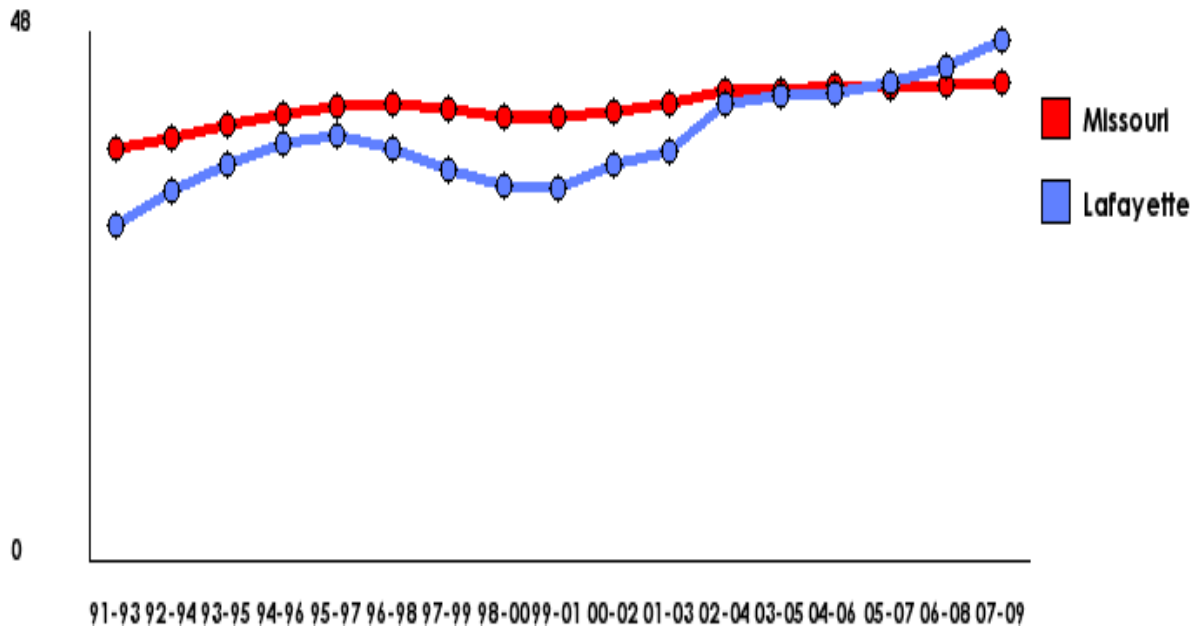
The table below shows the participation of prenatal/postpartum, infant, and children in the WIC program in 2008. In the table Lafayette County is compared to the six surrounding counties and the State of Missouri

	Prenatal/Postpartum	Infant	Child
Carroll	48	58	184
Clay	822	1,286	2,430
Lafayette	149	224	547
Jackson	5,076	7,040	15,778
Johnson	363	502	1,296
Pettis	373	514	1,388
Ray	116	171	426
State of Missouri	33,100	47,180	101,339

Source: Missouri Department of Health and Senior Services, Missouri Information for Community Assessment (MICA), Women, Infants, and Children, 2007.

Prenatal WIC

Prenatal WIC
Three-Year Moving Average Rates

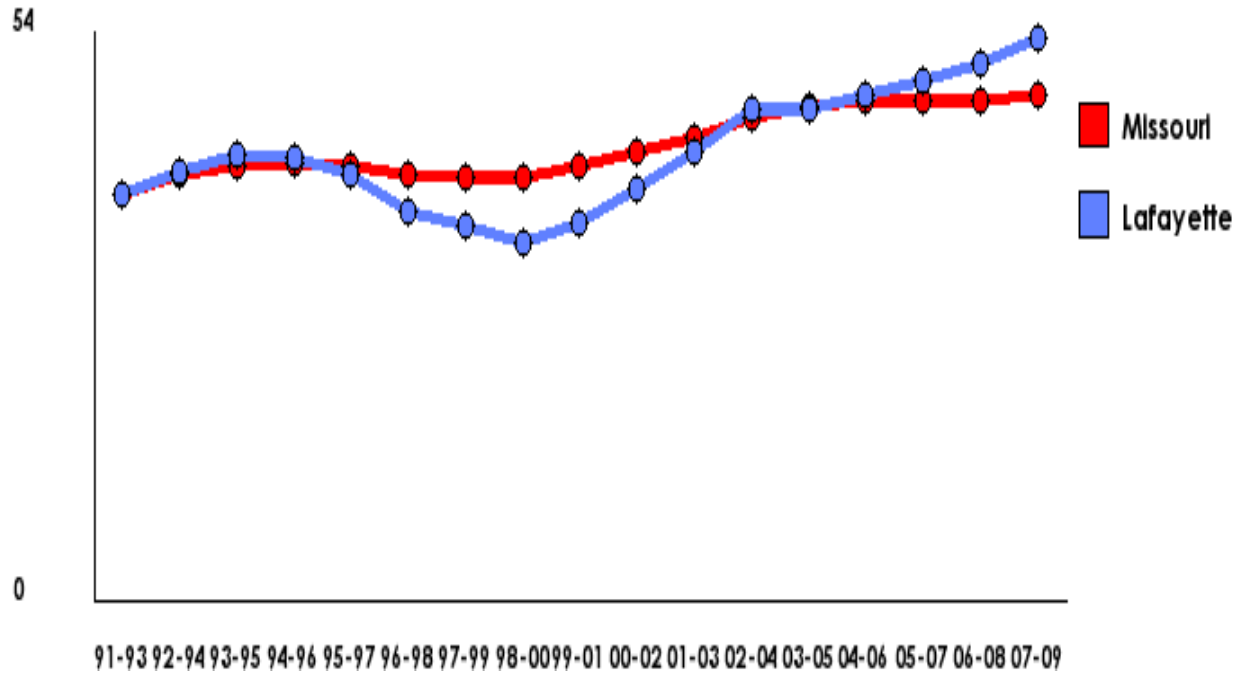


- Lafayette rate trend shows a statistically significant increase
- Missouri rate trend shows a statistically significant increase

Source: DHSS, Prenatal Profile for Lafayette County

Prenatal Medicaid

Prenatal Medicaid
Three-Year Moving Average Rates

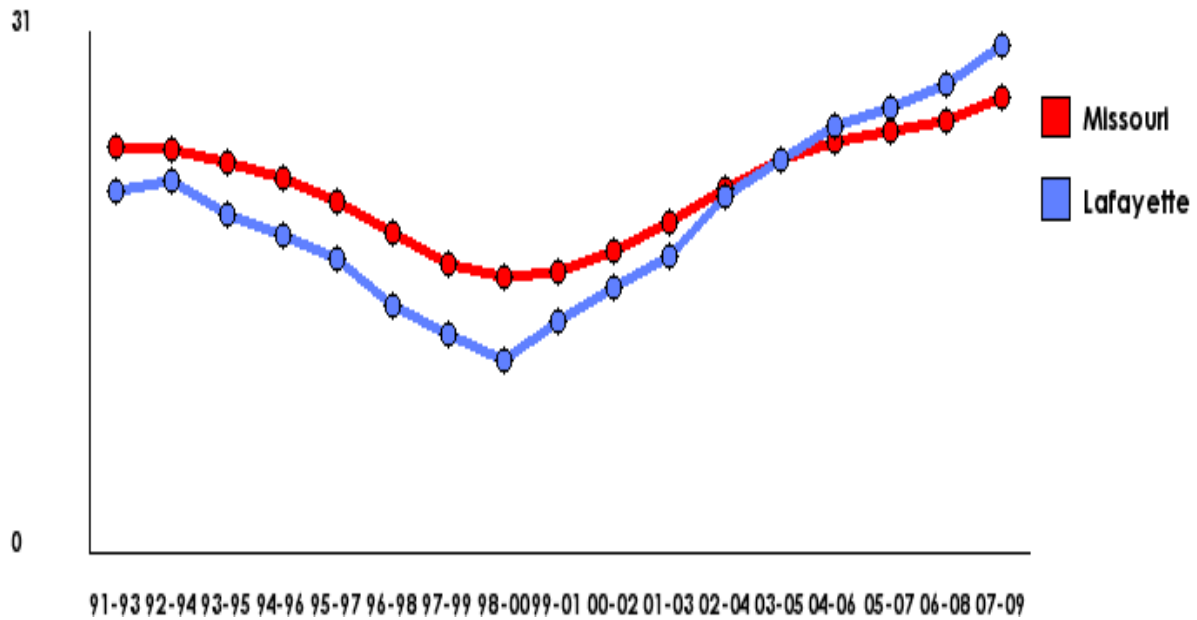


- Lafayette rate trend shows a statistically significant increase
- Missouri rate trend shows a statistically significant increase.

Source: DHSS, Prenatal Profile for Lafayette Residents

Prenatal Food Stamps

Prenatal Food Stamps Three-Year Moving Average Rates

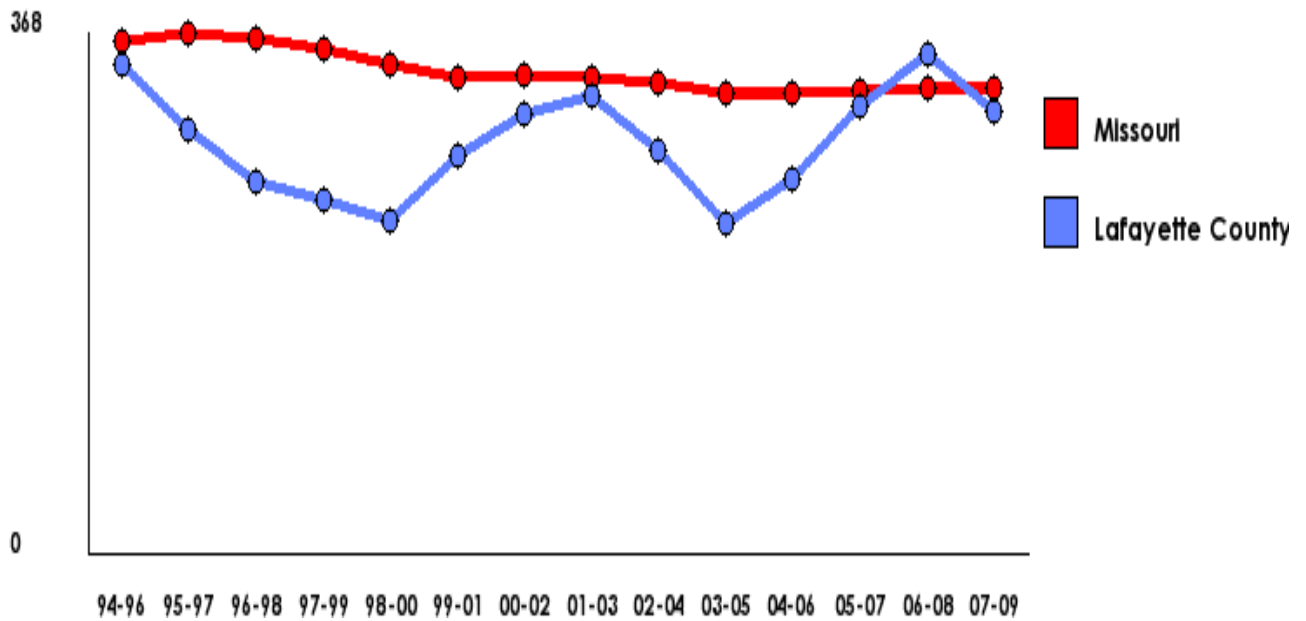


- Lafayette rate trend shows a statistically significant increase.
- Missouri rate does not show a statistically significant trend.

Source: DHSS, Prenatal Profile for Lafayette Residents

Intentional Injury

Injury: Assault Injuries
Three-Year Moving Average Rates

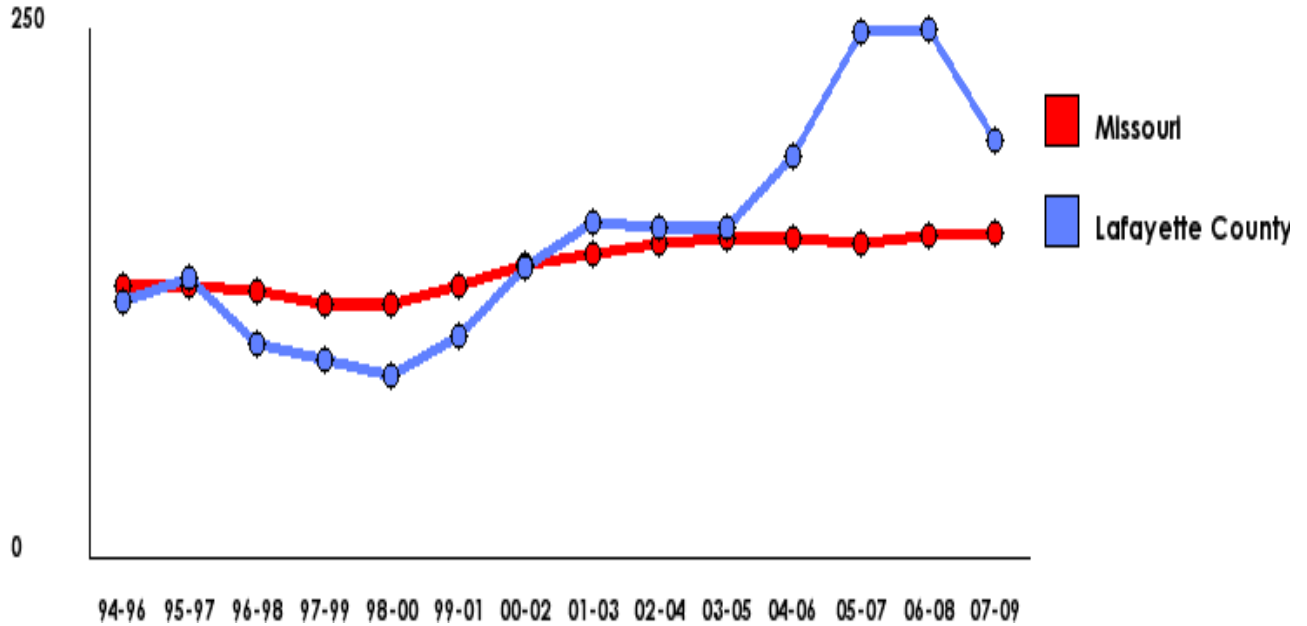


- Lafayette County rate does not show a statistically significant trend.
- Missouri rate trend shows a statistically significant decrease.

Rates are per year per 100,000 population

Source: DHSS, Women's Health Profile for Lafayette County

Injury: Self Inflicted Three-Year Moving Average Rates



- Lafayette County rate trend shows a statistically significant increase.
- Missouri rate trend shows a statistically significant increase.

Rates are per year per 100,000 population

Source: DHSS, Women's Health Profile for Lafayette County

Priority Diseases and Conditions in Infant/Children

1. Infant Health Problems
2. Motor Vehicle Accidents
3. Pneumonia and Influenza
4. Asthma
5. Dental Health Problems

The priority diseases and conditions in infants/children were based off of the DHSS MICA Priorities.

Priority Diseases and Conditions in Women

1. Heart Disease
2. Motor Vehicle Accidents
3. Chronic Obstructive Pulmonary Disease (COPD)
4. Pregnancy Complications
5. Diabetes

The priority diseases and conditions in women were based off of the DHSS MICA Priorities.

Adolescent Health

Birth to Teens

Births to teens, ages 15-19 (per 1,000)
2005/2009 Averages

	Birth per 1,000 Teens
Lafayette County	47.4
State of Missouri	41.6

Source: Missouri Census Data Center, 2009

High School Graduation Rate

The table below shows high school graduation rate for Lexington R-V school district from 2009-2011 compared to the State of Missouri.

	2009	2010	2011
Lafayette County	88.4%	90.7%	91.1%
State of Missouri	85.9%	85.9%	86.7%

Source: Missouri Comprehensive Data System

Priority Risk Factors for Adolescents

1. Mother Overweight
2. Smoking During Pregnancy
3. Child Abuse/Neglect
4. Out-of-Wedlock Births
5. Teenage Pregnancy Under Age 18

Priority Diseases and Conditions in Adolescents

1. Motor Vehicle Accidents
2. Affective Disorders
3. Anxiety-Related Mental Disorders
4. Alcohol and Substance Related
5. Pneumonia and Influenza

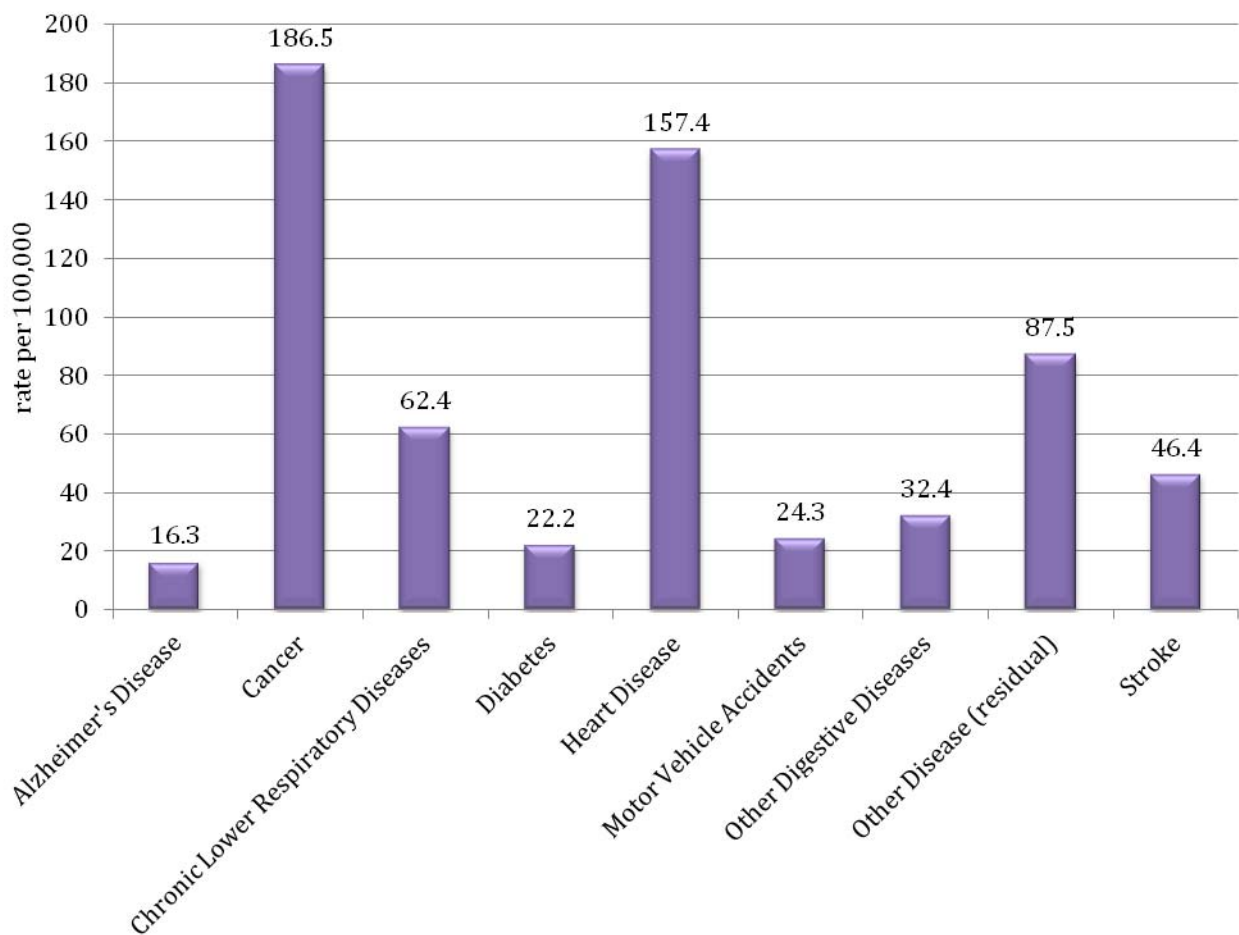
The priority diseases and conditions for adolescents are based off of DHSS MICA Priorities.

Adult Health

Cause of Death

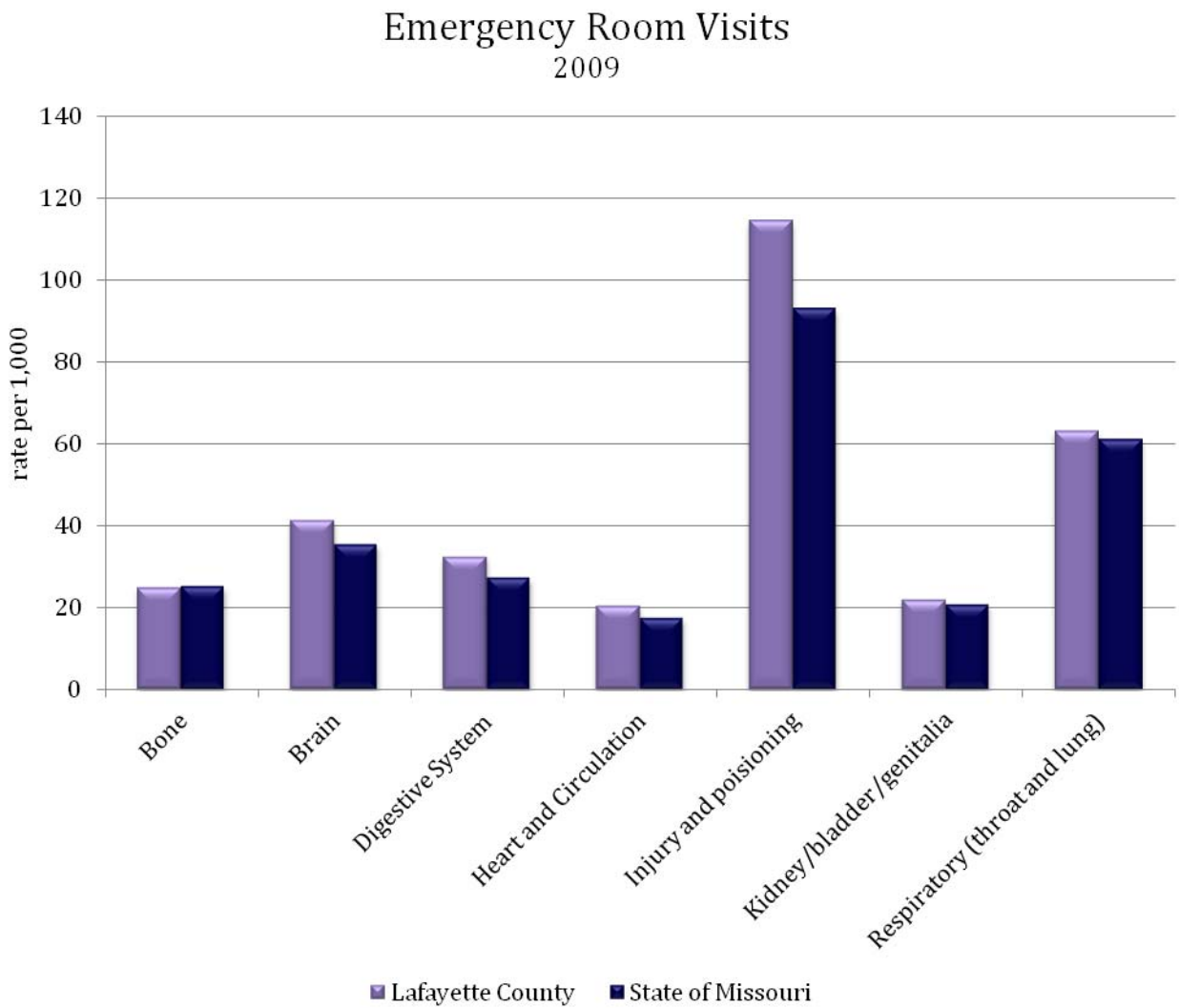
Since 1999 the rate of Alzheimer's disease, cancer, chronic lower respiratory diseases, diabetes, motor vehicle accidents and other digestive diseases has risen while heart disease, other diseases (residual), and stroke rates have decreased. The chart below shows the causes of death rates in Lafayette County in 2009.

Causes of Death in Lafayette County 2009



Source: <http://health.mo.gov/data/mica/mica/death.php>

Emergency Room Visits



Source: MICA, Emergency Room Visits

Heart Disease Profile for Hospitalization Rates

The table below shows the three year moving average hospitalization rates for heart disease in Lafayette County.

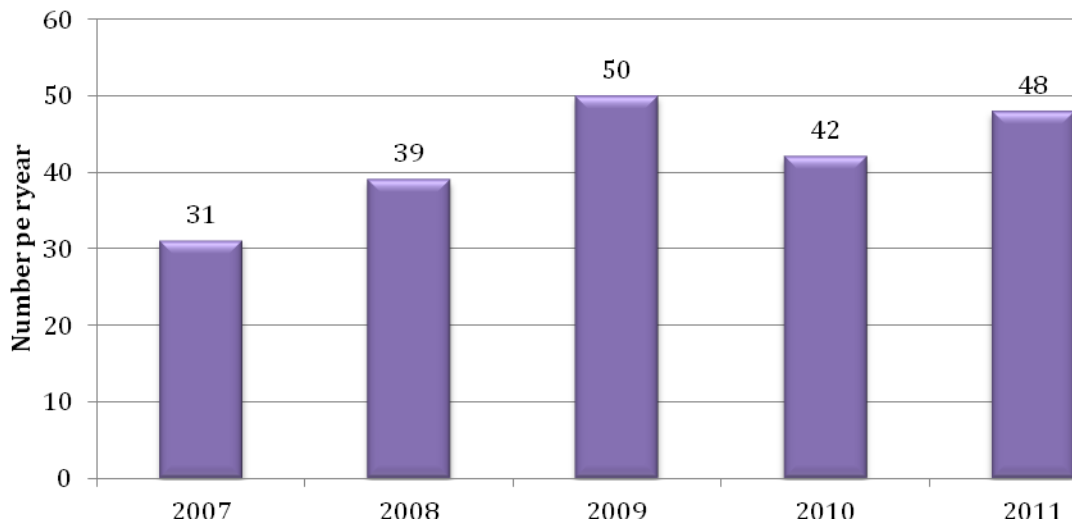
Three- year Moving Average Rates									
	99-01	00-02	01-03	02-04	03-05	04-06	05-07	06-08	07-09
Lafayette County	172.2	179.0	185.7	179.7	181.1	177.8	163.9	152.6	139.8
State of Missouri	168.2	176.7	179.7	178.3	175.1	170.5	162.3	151.5	142.5

Hospitalization rates are per year per 10,000 population and are age-adjusted to the U.S. 2000 standard population.

Source: DHSS, Heart Disease Profile for Lafayette County

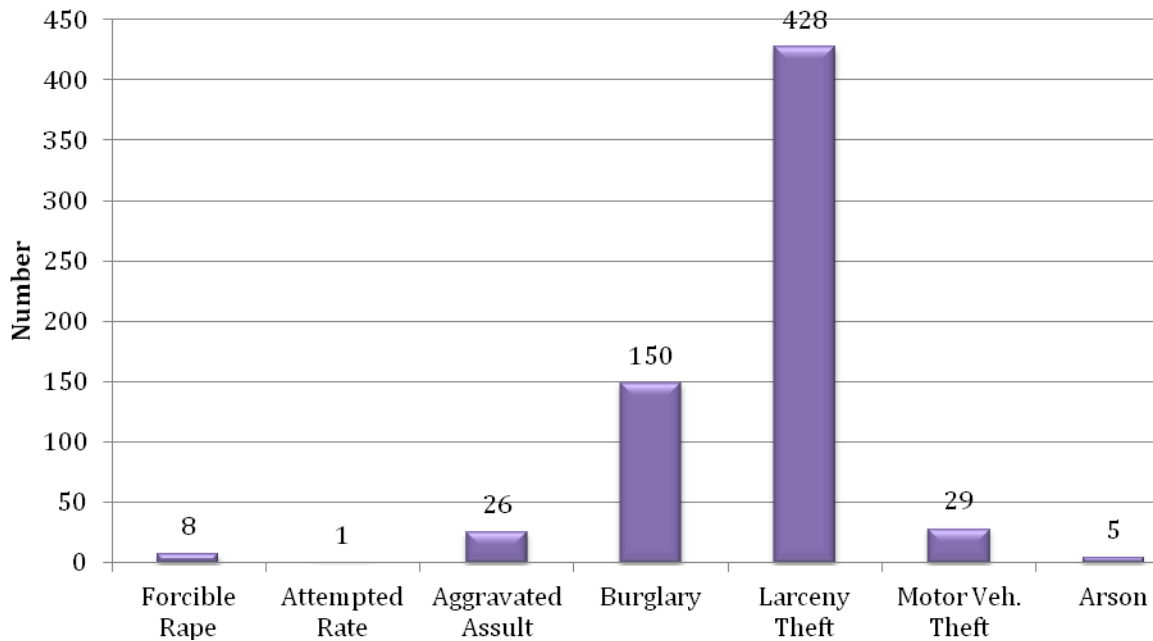
Family Violence and Crime

Lafayette County Domestic Violence Uniform Reporting



Source: Missouri State Highway Patrol Statistical Analysis Center

Lafayette County 2011 Uniform Crime Reporting



Source: Missouri State Highway Patrol Statistical Analysis Center

Priority Risk Factors

1. Obesity
2. Mother Overweight
3. Smoking
4. No Exercise
5. No Mammography

The priority risk factors are based off of the DHSS MICA Priorities.

Priority Diseases or Conditions in Adults

1. Heart Disease
2. Chronic Obstructive Pulmonary Disease (COPD)
3. Alcohol and Substance Related
4. Motor Vehicle Accidents
5. Diabetes

The priority diseases and conditions are based off of the DHSS MICA Priorities.

Minority Health

The tables represent the maternal child health indicators, injuries, and emergency room visits for minorities in Lafayette County. The tables compare minorities to Caucasians in Lafayette County. In addition, the rates are compared in Lafayette County to the State of Missouri.

Maternal Child Health Indicators

The table shows the number of maternal child health indicators and rates of maternal child health indicators in Lafayette County compared to the State of Missouri. In addition, the table demonstrates that the rate for inadequate prenatal care is statistically significant because it is higher among African Americans in Lafayette County than the State of Missouri.

	Date Years	White Number of Events	White Rate	African American Number of Events	African American Rate	White State Rate	Black State Rate
Out-of-Wedlock Births	2005-2009	755	38.0	27	64.3	33.1	78.5
Inadequate Prenatal Care	2005-2009	209	10.9	11	28.2	9.1	21.8
Low Birth Weight	2005-2009	118	5.9	5	11.9	7.0	13.8

Source: <http://health.mo.gov/data/mica/ASPsMinorityHealth/header.php?cnty=107>

Injuries

The table shows the number of injuries and rates of injuries in Lafayette County compared to the State of Missouri.

	Date Years	White Number of Events	White Rate	Black Number of Events	Black Rate	White State Rate	Black State Rate
All Injuries	1999-2009	38,544	0.0	1,247	0.0	10,062.2	11,853.7
Bicyclist (Unintentional)	1999 - 2009	17	0.0	1	0.0	7.0	16.0
Firearm (Assault)	1999-2009	5	0.0	0	0.0	3.0	100.4
Pedestrian (Unintentional)	1999-2009	74	0.0	4	0.0	27.6	89.9
Physical Abuse	1999-2009	38	0.0	4	0.0	5.6	42.9
Sexual Abuse	1999-2009	22	0.0	2	0.0	4.5	21.3

Source: <http://health.mo.gov/data/mica/ASPsMinorityHealth/header.php?cnty=107>

Emergency Room Visits

The table shows the number of emergency room visits and rates of emergency room visits in Lafayette County compared to the State of Missouri.

	Date Years	White Number of Events	White Rate	Black Number of Events	Black Rate	White State Rate	Black State Rate
All Diseases and Conditions	2005-2009	57,078	0.0	2,041	0.0	331.3	550.7
Alcohol/Drug	2005-2009	246	0.0	17	0.0	2.6	4.8
Asthma	2005-2009	416	0.0	38	0.0	3.3	16.0
Congestive Heart Failure	2005-2009	199	0.0	11	0.0	0.6	1.2
Diabetes Mellitus	2005-2009	246	0.0	36	0.0	1.3	4.8
Epilepsy	2005-2009	387	0.0	21	0.0	2.3	5.3
Hypertension	2005-2009	287	0.0	30	0.0	1.5	5.9
Eye Infection	2005-2009	395	0.0	16	0.0	2.5	6.9
Osteoarthritis	2005-2009	67	0.0	5	0.0	0.3	1.1
Schizophrenia	2005-2009	26	0.0	2	0.0	0.3	2.3

Emergency Room rates are per year per 1,000 population and are age-adjusted to the U.S. 2000 standard population.

Source: <http://health.mo.gov/data/mica/ASPsMinorityHealth/header.php?cnty=107>

Senior Health

Senior Profile

		Trend Data	
		Base Year	Current Year
Total Population (all ages) 2000/2008 (Base year/Current year)	Missouri Lafayette	5,606,140 33,013	5,911,605 32,913
Percent Population 65+ 2000/2008	Missouri Lafayette	13.5 15.4	13.6 16.4
Percent Population 85+ 2000/2008	Missouri Lafayette	1.8 2.5	2.1 2.9
Pct Population 65+ that is Female 2000/2008	Missouri Lafayette	59.3 59.1	58.0 57.6
Percent Population 65+ that is Male 2000/2008	Missouri Lafayette	40.7 40.9	42.0 42.4
Pct Population 85+ that is Female 2000/2008	Missouri Lafayette	72.5 72.3	69.4 71.7
Percent Population 85+ that is Male 2000/2008	Missouri Lafayette	27.5 27.7	30.6 28.3

Source: http://mcdc2.missouri.edu/webrepts/mosenior/profile_reports09/29107.html

Outcome Indicators

Status	Measure	Trend
All indicators are for persons age 65+		
Social Security as % of total personal income (2007)	0.33%	↓
Percent working for pay (2007)	11.9%	↑
Percent with Missouri driver's license	84.2%	↑
Voters Index	59.1	
Medicaid costs for long term care per capita	\$143	↓
Property & violent crime per 1,000 persons	35.4	
Hospitalization & ER visits for diabetes per 10,000 seniors	72.6%	↑
Primary care physicians per 1,000 seniors (2008)	13.1%	↑
Population 65+ (2008)	32,913	
Senior owner-occupied housing (2008)	80.7%	
Seniors in poverty (2008)	11.1%	
No exercise (2007)	38.1%	
No sigmoidoscopy or colonoscopy (2007)	38.1%	
High blood pressure (2007)	40.1%	
Obesity (2007)	22.2%	
Smoking (2007)	3.9%	
No mammogram (2007)	43.1%	
High cholesterol (2007)	28.9%	

Source: Missouri Senior Report, 2009

Seniors in Poverty

The table below is the population 60 years and over in the United States 2006-2010 American Community Survey 5-Year Estimates for seniors in poverty in the past 12 months.

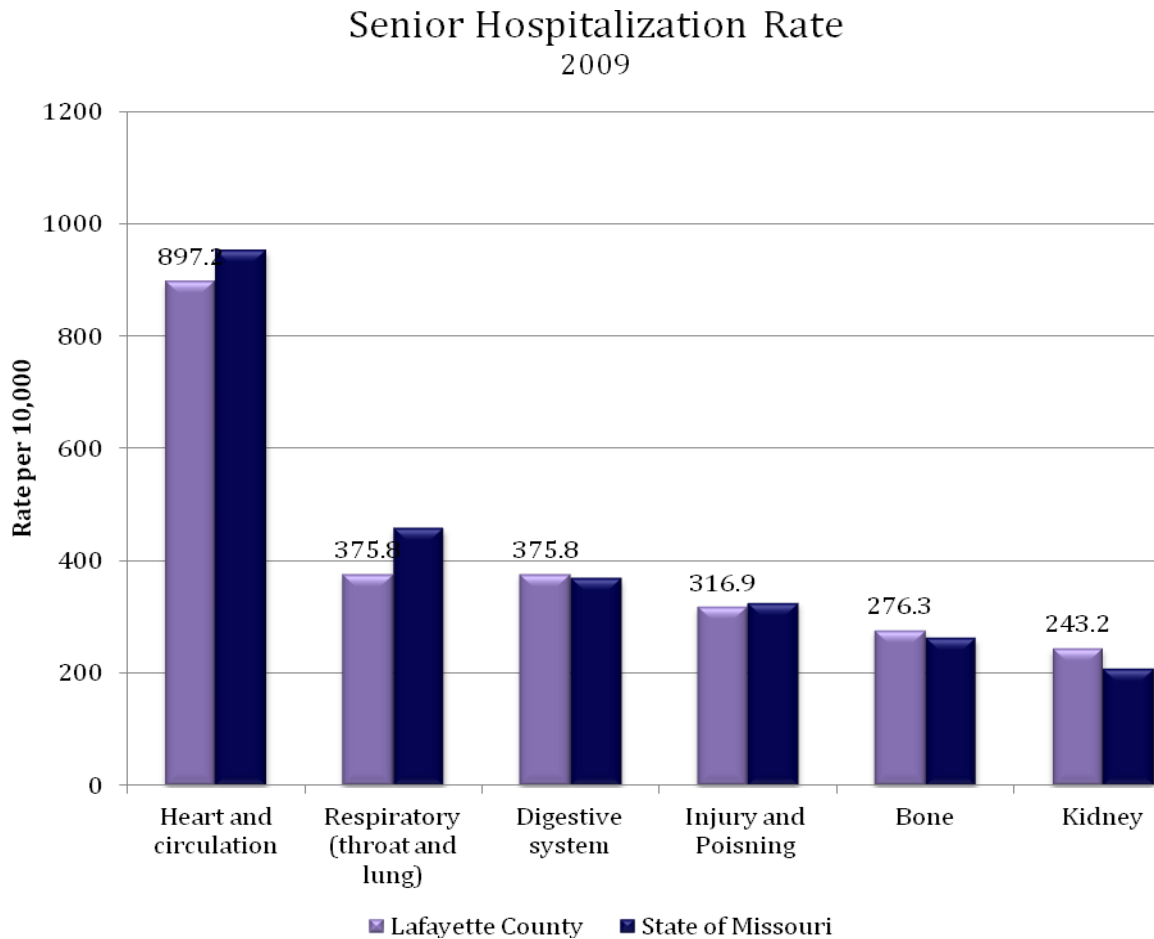
Poverty Status in the past 12 months

	Missouri		Lafayette County	
	Total	60 year and over	Total	60 years and over
Population for whom poverty status is determined	5,744,590	1,082,116	32,240	6,705
Below 100 percent of the poverty level	14.0%	9.2%	10.6%	7.8%
100 to 149 percent of the poverty level	9.6%	10.7%	8.7%	10.2%
At or above 150 percent of the poverty level	76.5%	80.0%	80.7%	82.0%

Source:

http://factfinder2.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_10_5YR_S0102&prodType=table

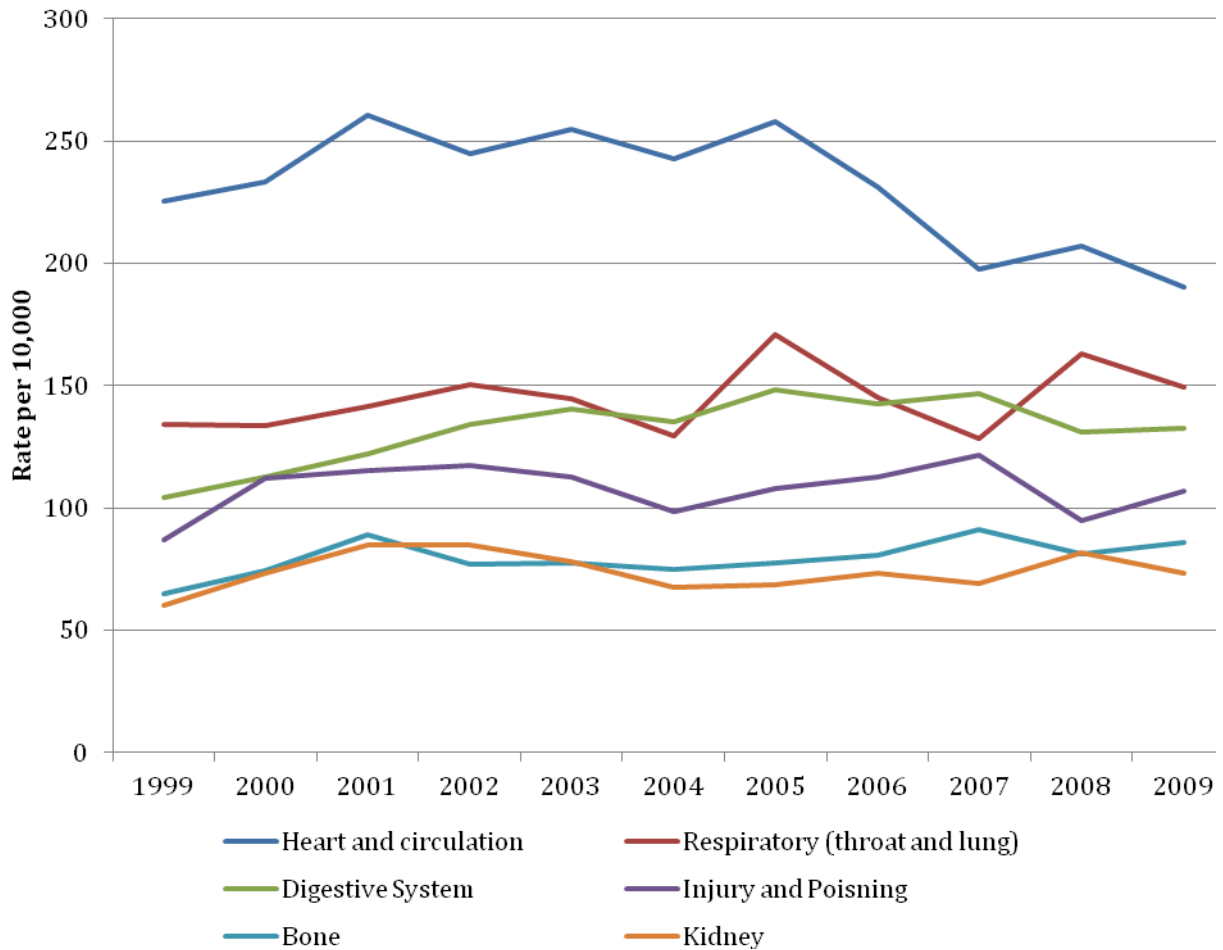
Senior Hospitalization



The senior hospitalization rate for Lafayette County 2009 was highest for heart and circulation with a rate of 897.2 compared to the state, which had a rate of 952.8. The senior hospitalization rate for the digestive system was 375.8, which is higher compared to the state, which has a rate of 367.8. The hospitalization rate for bone was higher than the state with rate of 276.3 compared to state rate of 262. In addition the senior hospitalization rate for kidneys in 2009 was 243.2, while the state had a rate of 208.

Source: http://health.mo.gov/data/mica/mica/hosp_new.php

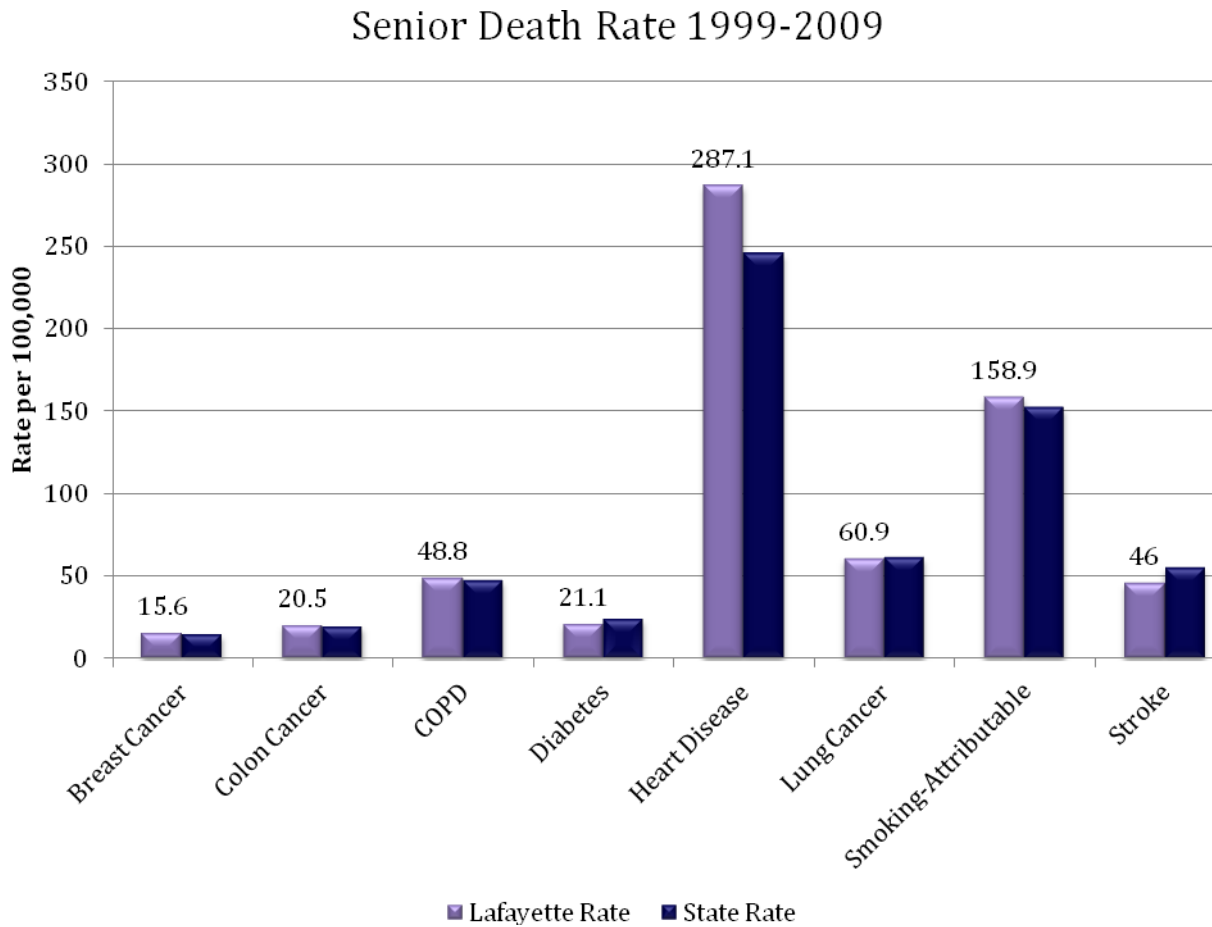
10 Year Senior Hospitalization Rate for Lafayette County



The line graph demonstrates the rates of various diagnoses for senior inpatient hospitalization rate for Lafayette County from 1999 to 2009. The graph shows that over a 10 year period the heart and circulation rate has decreased, while the respiratory rate and digestive system rate has increased. In addition, the bone, kidney, and injury rates have fluctuated over the 10 year period.

Source: http://health.mo.gov/data/mica/mica/hosp_new.php

Senior Death Rate



The graph shows that the leading causes of senior death rate in Lafayette County compared to the state of Missouri. Lafayette County has a higher rate of heart disease deaths, smoking-attributable deaths, COPD deaths, and colon cancer deaths among senior citizens compared to the state of Missouri.

Source: <http://health.mo.gov/data/mica/ASPChronicDisease/header.php?cnty=107>

Priority Risk Factors for Seniors

- Smoking
- Obesity
- No Physical Activity

Priority Diseases and Conditions in Seniors

1. Chronic Obstructive Pulmonary Disease (COPD)
2. Heart Disease
3. Diabetes
4. Stroke/Other Cerebrovascular Diseases
5. Alzheimer's/Dementia/Senility

The priority diseases and conditions in seniors are based off of the DHSS MICA Priorities.

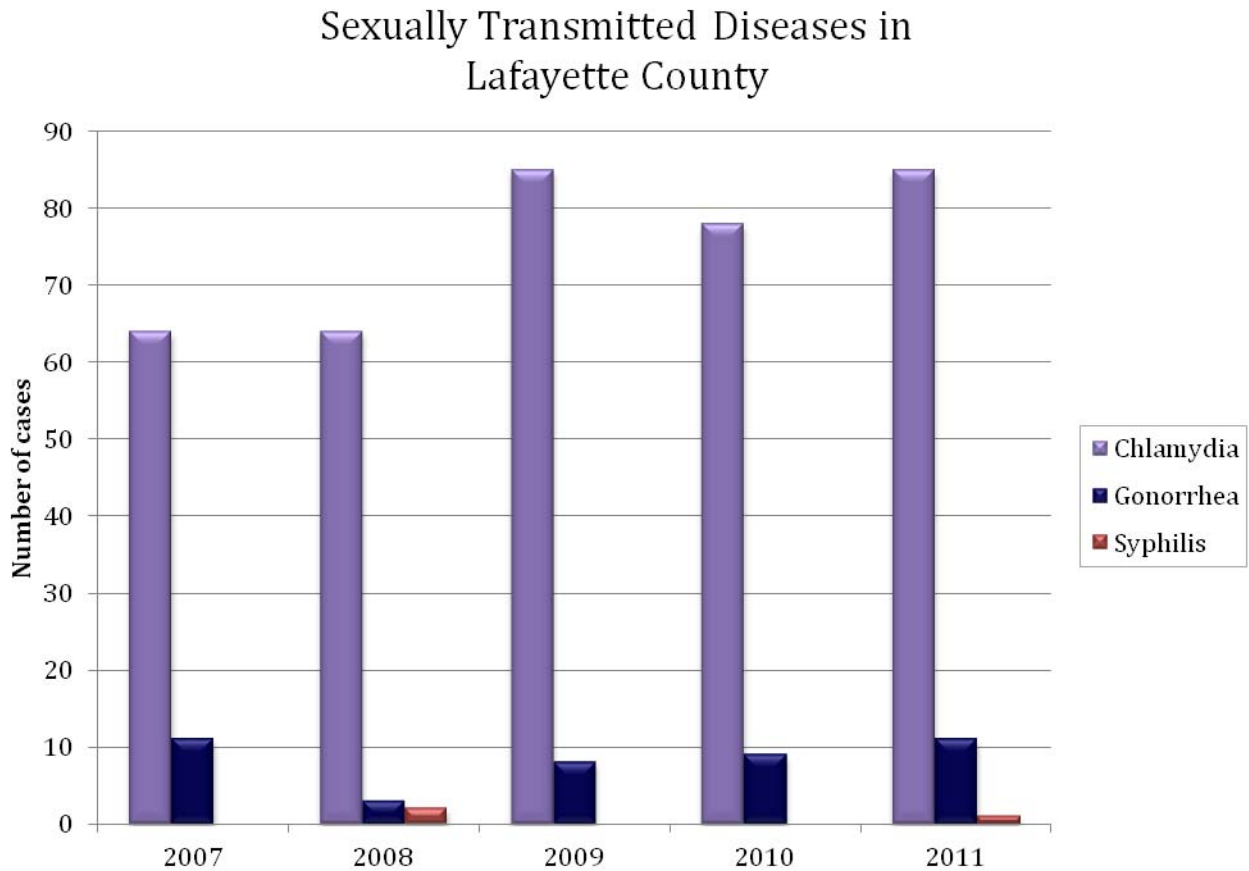
Conclusion

The illnesses and deaths that occur among seniors citizens in Lafayette County who are 65 years of age and older are partially due to the lack of primary prevention. Lack of physical activity, poor diet, smoking, and lack of regular screenings are among some of the primary prevention mechanisms that are not being practiced.

Analysis of Communicable Disease Rates

Lafayette County's Sexually Transmitted Diseases

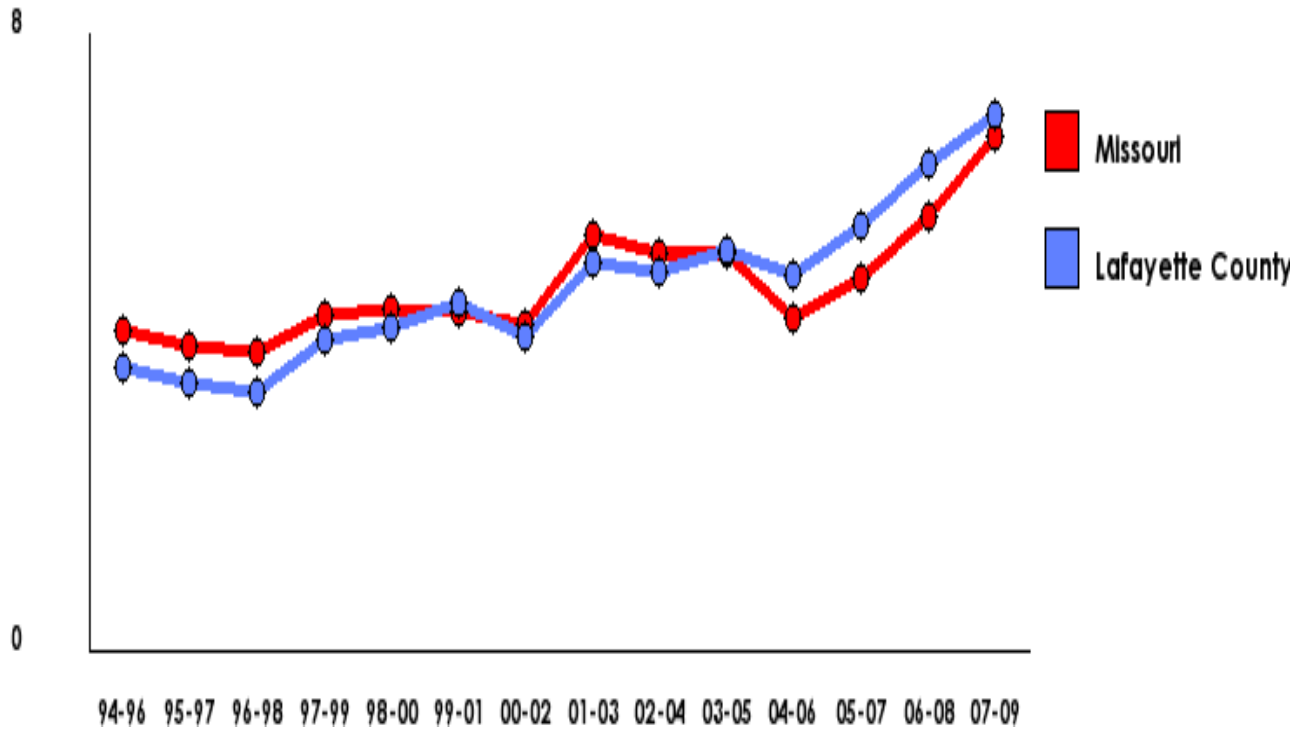
The chart below shows the number of chlamydia, gonorrhea, and syphilis cases in Lafayette County.



Source: DHSS Reportable Sexually Transmitted Diseases by County

Emergency Room: 3-Year Average Rates for Pneumonia and Influenza

ER Visit Rates: Pneumonia and Influenza
Three-Year Moving Average Rates

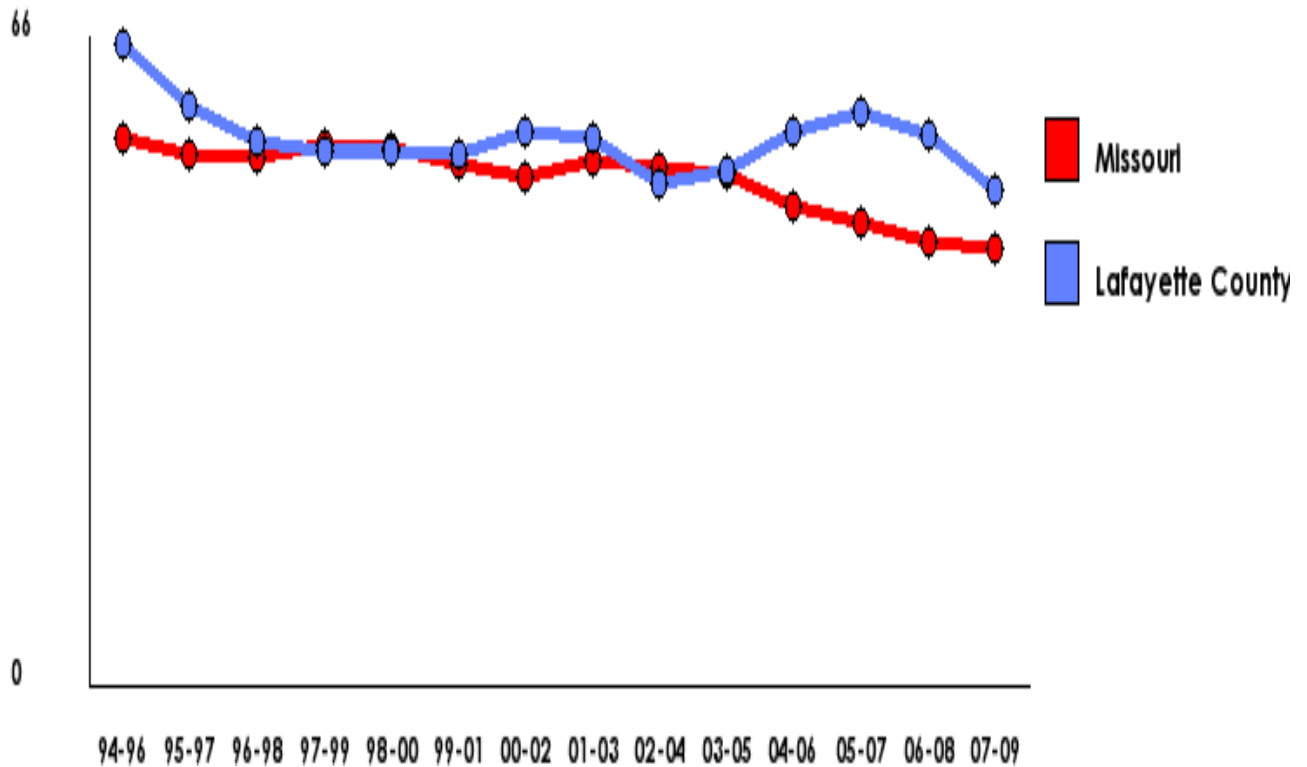


- Lafayette County rate shows a statistically significant increase.
- Missouri rate trend shows a statistically significant increase.

Source: DHSS Community Profile for Emergency Room Visits

Hospitalization Profile 3-Year Average Rates for Pneumonia and Influenza for Lafayette County Residents

Inpatient Hospitalization Rate: Pneumonia and Influenza
Three-Year Moving Average Rates



- Lafayette County rate does not show a statistically significant trend
- Missouri rate trend shows a statistically significant decrease

Source: DHSS Community Data Profile for Hospitalization

Analysis of Chronic Disease Rates

Lack of physical activity in combination with excessive and improper food consumption plays a significant role in many of the chronic disease rates in Lafayette County. In addition, low primary prevention plays a role in the onset of many of the chronic diseases.

The County Level Study below shows the chronic disease indicators for adults in Lafayette County.

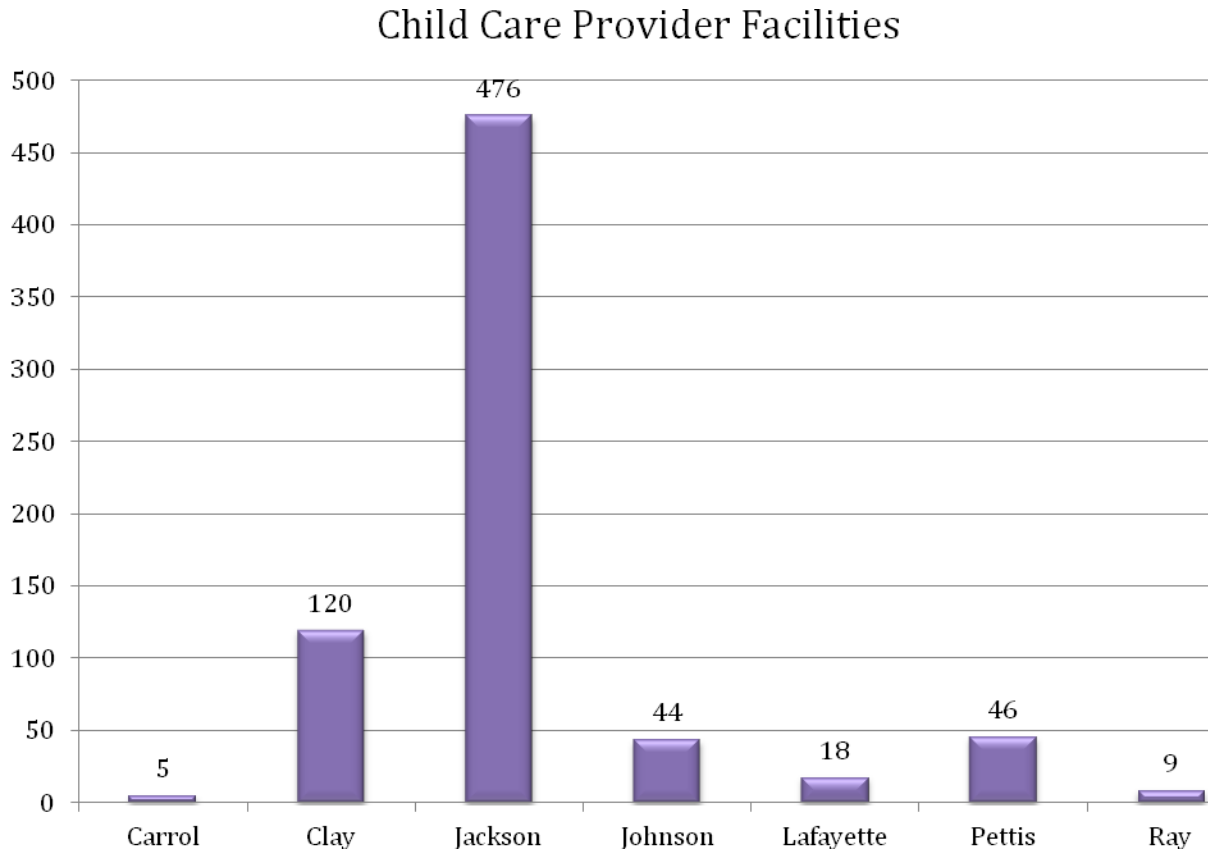
Indicator	Percent
No health coverage	9.6
Activity limitation	19.6
Smoking	20.9
No leisure-time physical activity	25.6
Less than 5 fruits and vegetables per day	75.4
Overweight (25.0-29.9 BMI)	39.2
Obese (≥ 30 BMI)	31.7
High blood pressure	21.4
High cholesterol	20.5
Asthma	8.8
Diabetes	11.8
No mammograms or breast exam in last year	31.2
No pap smear in last 3 years	20.0
Never had a blood stool test	64.2

Source: DHSS Health & Preventive Practices for Lafayette County Adults, 2007

Community Resources

Child Care Facilities

The chart below shows the number of child care provider facilities in Lafayette County and its 6 surrounding counties. The number of child care provider facilities range from 5 to 476.



Source: Missouri Department of Health and Senior Services, Child Care Provider.

Lafayette County Child Care Provider Facilities

Facility	City	Address	Age Range
Aversman, Ronda	Alma	115 S County Rd	Birth – 10 years
His Little lambs Child Development	Concordia	401 Main St	
Bright Future DayCare and Preschool	Higginsville	715 N Main St	6 weeks – 12 years
Kids First	Higginsville	1907 Peach St	
Lafayette County C-1 School District	Higginsville	705 W 31 st St	5years – 12 years
Lafayette County C1 School District	Higginsville	705 W 31 st St	36 months – 6 years
Missouri Valley Community Action Agency	Higginsville	15E 22 nd St	36 months – 5 years
New Family Life DayCare	Higginsville	409 W 19 th St	
Discovery Room Preschool	Lexington	10 th and Franklin	
Grace Lutheran Church Preschool	Lexington	806 S 13 HWY	
Lexington R V School District	Lexington	811 S 13 Highway	36 months – 5 years
Little Steps Learning Center LLC	Lexington	1223 S 13 HWY	6 weeks – 12 years
Missouri Valley Community Action Agency	Lexington	624 S 20 th St	36 months – 5 years
Bright Beginnings Academy LLC	Odessa	305 N Park Ln	Birth – 12 years
Odessa Community Day Care Center INC	Odessa	100 N 4 th St	6 weeks – 13 years
Odessa R VII School District	Odessa	607 S Third St	5 years – 12 years
Wonderfull Daycare and Preschool	Waverly	903 W Walnut	
Willoughby, Regena B	Wellington	700 W Highway 224	24 months – 12 years

Source: Missouri Department of Health and Senior Services, Child Care Provider.

Longterm Care Facilities

The table below shows the current list of long term care facilities in Lafayette County

Facility Name	Level of License	City
Apple Ridge Care Center	Skilled Nursing Facility	Waverly
Benchmark Healthcare of Lexington	Skilled Nursing Facility	Lexington
Bristol Manor of Lexington	Residential Care Facility I	Lexington
Bristol Manor of Odessa	Residential Care Facility I	Odessa
Essex of Concordia	Residential Care Facility I	Concordia
Golden Livingcenter-New Haven	Skilled Nursing Facility	Odessa
Lutheran Good Shepherd Home	Intermediate Care Facility	Concordia
Lutheran Good Shepherd Home	Residential Care Facility II	Concordia
Lutheran Good Shepered Home	Residential Care Facility I	Concordia
Lutheran Nursing Home	Skilled Nursing Facility	Concordia
Meyer Care Center	Skilled Nursing Facility	Higginsville
Meyer Care Center	Intermediate Care Facility	Higginsville
Meyer Care Center	Assisted Living Facility Option 2	Higginsville

Source: DHSS

Other Resources for Seniors

The Division of Senior and Disability Services Region 4 office is located in Lexington:

736 State Road 113

P.O. Box 370

Lexington, MO 64067

Phone: (660) 259-2294

Fax: (660) 259-3834

Assisted living – Nursing Homes, Senior Apartments, and Retirement Centers:

Apple Ridge Care Center: 100 West Thomas Avenue, Waverly, MO 64096

Golden LivingCenter: New Haven: 609 Golf Street, Odessa, MO 64076

John Knox Village East: 1201 West 19th Street, Higginsville, MO 64037

Lexington Care Center: 1221 South Highway 13, Lexington, MO 64067

Lutheran Nursing Home: 202 South West Street, Concordia, MO 64020

Community Capacity for Health Care

Hospitals in Lexington, Missouri

Lafayette Regional Health Center

	2008	2009	2010
Licensed Beds	25	25	25
Inpatient Days	5,148	4,973	4,191
Discharges	1,459	1,400	1,182
Average Length of Stay	3.5	3.6	3.5
Occupancy	56.4	54.5	45.9

Source: DHSS County Data Profiles Hospitals

Lafayette County Health Department

The Lafayette County Health Department helps people develop safe and healthy lifestyles by providing a variety of public health services. The services include immunizations, car seat inspections, pregnancy testing, HIV testing, and treatment for certain STDs. Additional resources such as daycare information, senior health, environmental health, and disaster preparation are available through the health department. The website for the Lafayette County Health Department: <http://www.lafayettecountyhealth.org/>

Quick Reference to Indicator Rates

Preconception

Term	Definition
Births to females by age of mother	Percent of total live births
STDS (Chlamydia, Gonorrhea, Syphilis)	Per 100,000 females 15-44
Births to females with less than 12 years of education	Percent of total live births
Mother >=20 percent overweight for height	Percent of total live births with known pre-pregnancy weight and height
Mother >15 percent underweight for height	Percent of total live births with known pre-pregnancy weight and height
Total live births and fertility rate	Rate per 1,000 females ages 15-44
Live Births – 5 year change	Percent change
Fertility rate – 5 year change	Percent change in rate
Teen Fertility Rate Under Age 18	Per 1,000 females 15-17
Teen Pregnancy Rate Under Age 18	Per 1,000 females 15-17
Repeat Births Under Age 20	Percent of total live births
Out-of-wedlock births	Percent of total live births
Spacing less than 18 months	Percent of second and higher order births with known spacing
Parity 4 +	Percent of total live births
Unintended deliveries	Percent of total live births plus fetal deaths

Prenatal

Care Began First Trimester	Percent of total live births with known month prenatal care began
Late care (2nd/3rd Trimester)	Percent of total live births with known month prenatal care began
No care	Percent of total live births with known month prenatal care began
Inadequate prenatal care	Percent of total live births with

	known adequacy of care
Prenatal Medicaid participation	Percent of total live births with known Medicaid status
Prenatal WIC participants	Percent of total live births with known WIC status
Prenatal Food Stamps participation	Percent of total live births with known Food Stamps status
Weight gain <15 pounds full-term singletons	Percent of full-term singleton live births with known weight gain/loss
Weight gain > =45 pounds full-term singletons	Percent of full-term singleton live births with known weight gain/loss
Mother smoking	Percent of total live births

Morbidity

Premature <37 weeks gestation	Percent of total live births with known gestational age
Low birth weight <2500 grams	Percent of total live births
Low Birth Weight & Term	Percent of total term live births
Very low birth weight <1500 grams	Percent of total live births
Small for gestational age	Percent of total singleton live births with known gestational age
Birth Defects	Rate per 10,000 live births
Neural Tube Defects	Rate per 10,000 live births

Mortality

Neonatal Deaths	Rate per 1,000 live births
Perinatal Deaths	Rate per 1,000 (live births plus fetal deaths)
Postneonatal deaths	Rate per 1,000 live births
Infant deaths	Rate per 1,000 live births
Sudden Infant Death Syndrome(SIDS)	Rate per 1,000 live births

List of Acronyms

DHSS	Department of Health and Senior Services
MCDC	Missouri Census Data Center
MICA	Missouri Information for Community Assessment
STD	Sexually transmitted disease
WIC	Women Infants and Children Program

Data Sources for the Report

1. Department of Health and Senior Services Missouri Information for Community Assessment: <http://health.mo.gov/index.php>
2. LCHD Annual Report
3. LCHD Environmental Public Health
4. Missouri Center Data Center: <http://mcdc2.missouri.edu/>
5. Missouri Comprehensive Data System: <http://mcds.dese.mo.gov/Pages/default.aspx>
6. MICA: <http://health.mo.gov/data/mica/MICA/>
7. Missouri State Highway Patrol Universal Crime Report: http://www.mshp.dps.missouri.gov/MSHPWeb/SAC/data_and_statistics_ucr.html
8. U.S. Census Bureau: <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>