



Public Health

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CATTARAUGUS COUNTY BOARD OF HEALTH

1 Leo Moss Drive, Olean, NY 14760, Tel. (716) 373-8050, Fax (716) 701-3737

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MINUTES

April 4, 2012

The 804th meeting of the Cattaraugus County Board of Health was held at St. Bonaventure Clubhouse Route 417, Allegany, New York on April 4, 2012.

The following members were present:

Andrew Klaczynski, MD

Joseph Bohan, MD

Giles Hamlin, MD

Joseph Eade

Richard Haberer

James Lapey

Also present were:

Kevin D. Watkins, MD, MPH, Public Health Director

Kathleen Ellis, Administrative Officer

Karen Manners, Secretary to Public Health Director

Thomas Brady, County Attorney

Paula Stockman, County Legislator

Donna Vickman, County Legislator

Linda Edstrom, County Legislator

Howard VanRensselaer, County Legislator

Susan Labuhn, County Legislator

Gilbert Witte, MD, Medical Director

Eric Wohlers, Environmental Health Director

Raymond Jordan, Sr. Sanitarian

Susan Andrews, Director of Patient Services

Debra Nichols, Public Health Educator

David Porter, Hearing Officer

Sandra Brundage, MPH Student Intern

Rick Miller, Olean Times Herald

The meeting was called to order by Dr. Klaczynski. The roll was called and a quorum declared. Mr. Eade made a motion to approve the minutes of the March 7, 2012 Board of Health meeting. It was seconded by Mr. Haberer and unanimously approved.

Director's Report: Dr. Watkins introduced Sandra Brundage, MPH student intern who gave a PowerPoint presentation to the Board on Cattaraugus County mortality data for 2011 (attached). Ms. Brundage went over the information presented to the Board. She stated that after conducting this review of death certificates, the conclusions are that Cattaraugus County has low homicide and suicide rates, a low infant mortality rate and we are aligned with the national and state statistics with respect to the three leading causes of death being related to Cancer, Heart Disease and Chronic Obstructive Pulmonary Disease. Focus areas for Cattaraugus County to improve these outcomes include:

1. continuing with tobacco prevention and Cancer screening efforts
2. working toward community wellness programs aimed at reducing heart disease, obesity and chronic lung disease, and
3. reinforcing the benefits of education to reduce mortality

Dr. Witte stated that it was an excellent presentation and commented that nationwide deaths from lung disease seem to be rising, unlike Cancer and Heart Disease, which are dropping. He also commented that it would be interesting to see how many of the infant mortality figures are related to the lack of health insurance or prenatal care. Ms. Brundage stated that her research was restricted to reviewing the 2011 death certificates and that particular information was not listed nor was the level of education, however, there seems to be a correlation in research data between lack of education and infant mortality.

Dr. Watkins handed out and commented on the 2012 County Health Rankings (attached). The summary of health outcomes rankings are based on equal measuring of mortality and morbidity. The health factors summary rankings are based on four parameters that include health behaviors, clinical care, social and economic factors and physical environment.

The rankings for the four parameters of health factors in comparison to last year are:

	<u>2011</u>	<u>2012</u>
Health Behaviors	52	43
Clinical Care	62	54
Social & Economic Factors	54	51
Physical Environment	32	11

The health outcomes as compared to last year are:

	<u>2011</u>	<u>2012</u>
Mortality	59	58
Morbidity	34	35

Cattaraugus County has improved in the health rankings from last year in most areas. In Health outcomes, which represent how healthy a county is, Cattaraugus County ranked 50 out of 62 counties and last year we ranked 54. In the health factors category, which are what influences the health of a county, Cattaraugus County ranked 53 out of 62 counties and last year we ranked 56. Surveys and data used to determine these rankings varies in years from 2004-2010. In conclusion, Dr. Watkins stated that the Health Department programs and policies must continue to be implemented such as the tobacco cessation program, exercise and nutritional programs in order to help improve these outcomes.

New York State continues to run mass media educational campaigns on the effects of smoking and this has had a positive impact on the number of individuals who are thinking about quitting and those who are just starting to smoke. We will continue our nicotine replacement therapy program. Also, the Legislature recently passed a local law to prohibit the sale of herbal and e-cigarettes, this demonstrates how policymakers can play a part in working together to improve our health outcomes.

During the health education visits to the schools our staff continues to encourage daily exercise regiments to reduce body mass index. A body mass index greater than 30 is considered obese. We are seeing an increase in children who are developing diabetes at an early age which can be related to having a high body mass index. Nutritional programs and purchasing healthier food also need to be encouraged.

Dr. Watkins stated that we will continue to conduct and promote screenings for hypertension, hypercholesterolemia, mammography, colon and prostate cancer and pap smears for cervical cancer. Public health leaders, businesses and government need to continue to work together to create programs and policies to help people lead healthier lives in our community.

Dr. Bohan suggested that the Health Department include body mass index screenings at health fairs along with other screenings. Mrs. Labuhn, who works for the Salamanca School District, stated that they are required to submit that information to the State based on certain grade levels. She suggested that they collaborate with the Health Department to share that information. Mr. Lapey mentioned that some health problems in children are also related to poor dental care. There are still some communities that do not have fluoridated water. Ms. Edstrom stated that she knows this is true because there were 4-5 year old children that were losing their teeth because there was no fluoridation in their water and poor dental care. Dr. Watkins stated that we are working with area dentists to get more dentists into the area to help improve the dental health of these children.

Mr. Miller asked if we noticed any correlation between the efforts that we were focusing on and the outcomes. Dr. Watkins stated that because coronary artery disease is the number one cause of death, we have tried to focus on causative factors of coronary artery disease such as high cholesterol, high blood pressure and lack of exercise. We hope that preventive screenings will also help reduce the negative outcomes.

Dr. Watkins reported that we did fairly well with our consolidated review two weeks ago. We will have to submit a corrective action plan for the deficiencies that were found.

This week we are celebrating Public Health Week, last year we had a death secondary to whooping cough/Pertussis so we are concentrating on immunizations and the importance of vaccinations.

This month the County will participate in a national prescription drug drop off day at various locations on April 28, 2012.

New York State passed a law to prohibit the sale and distribution of synthetic marijuana. The product is sold in smoke shops and costs between \$10 - \$40. There are 2 - 3 smoke shops in Olean that sell these products and they have agreed to remove these products from their shelves.

The radon mitigation process in the Little Valley office building has been completed. The levels are far below the EPA recommendations and staff moved back into their work stations.

Nursing Division Report: Mrs. Andrews reported that the Nursing Division has conducted investigations as a result of an individual that tested positive for Pertussis. There were two adults treated in the household who had contact with the individual who has since recovered. There was also a case of Bacterial Meningitis.

There was a 24 month old child in the Olean area with a lead level of 16 ug/dl (normal is 0 - 9 ug/dl). Environmental Health has investigated the residence.

As part of the corrective action plan for the Article 28 survey, they would like us to formalize the way that we credential our medical staff which has to be done every two years; and also our infection control plan. There were also environmental facility issues that had to be corrected; a blocked air duct, electrical equipment was not adequately tested and also the sprinkler system was not tested as often as it should have been.

The Home Care plan of correction from the survey was accepted by the State. The issues that need to be addressed revolve around staff education. We are going to revise our electronic assessment and do increased surveillance with supervisors monitoring staff. On 4/20/12 we will be able to access the electronic State system and find out who has submitted an application to become a Certified Long Term Care Agency in Cattaraugus County. The average daily census for the month of March was 326 patients.

We are still looking for a Nurse Practitioner for the Family Planning Program. We interviewed one person but we haven't heard back from her yet. The contracted Nurse Practitioners are filling in until a replacement can be found.

Environmental Health Division: Mr. Wohlers reported that the environmental review process is being completed for another two year Community Development Block Grant to assist low and moderate income families replace failed septic systems and contaminated water supplies. We are expecting release of funds very shortly and we already have 2 or 3 qualified applicants. The funding this year is for \$278,000.00.

Mr. Wohlers stated that there was discussion last week at the semi-annual Environmental Health Director's conference in Syracuse regarding the presentation to the Governor's Advisory Panel on high volume hydraulic fracturing that has been postponed a couple of times. All of the counties are sending requests to the NYSDEC and commissioners to help get it rescheduled. Counties are very concerned about how this will impact our services because we don't have personnel and resources available for the added work load. We recognize that this will not impact us as much in the Western part of the Southern Tier or the northern counties in New York State, but it will affect the Eastern part of the Southern Tier in counties like Chemung, Steuben, Broome, Tompkins and Tioga.

Last year the State changed the definition of children's camps as far as how day camps are classified and permitted. Mr. Jordan is meeting with the individuals responsible for these camps that have not been regulated in the past to make sure that they meet all of the current qualifications for a permit.

The State is considering implementing state-wide tattooing or body art regulations. The Cattaraugus County Sanitary Code regulates tattooing and restricts anyone receiving body piercings to anyone over 18 years of age. There are still counties that do not regulate this, but by 2013 there may be state-wide body art regulations.

Mr. Wohlers mentioned the State Commissioner's Order banning synthetic cannabinoids. As soon as we received notice, Environmental Health staff visited the smoke shops where these products were sold to make sure they removed them from the shelves. The Seneca Nation also banned these products in Native American owned smoke shops and hopefully they are getting good compliance there as well.

As far as the State budget forecast for next year, it appears that our Drinking Water Enhancement grant and environmental health budget lines will not have any deep cuts next year.

Mr. Wohlers said that the County Attorney will review the revised sections of the County Sanitary Code and then it will be submitted to the State Health Department for their review and comment. Once we have the State's approval, we will present it to the Board of Health for approval, hopefully sometime this summer.

Mr. Wohlers went over projects going on this summer: 1) South Dayton – a new water tank with clean up work; 2) Olean Town sewer project; 3) Lime Lake sewer district and; 4) Perrysburg water district project. We are also working with communities and engineers for necessary approvals to the West Valley and Randolph water systems. They combined their water systems and need to comply with some regulatory issues.

There was discussion regarding a notice to municipalities from the State of New York regarding the option of the municipality becoming certified to do their own testing. Mr. Wohlers said that it would probably be more cost effective for the municipalities to become certified to run the tests; they will just have to pay the State to become certified. He added that the only community that has their own certified water lab is the City of Olean water plant.

Mr. Porter reported the following enforcement case for Board action:

DOCKET 11-065

ANDY J. MICHAEL, PORKY'S BAR, 2983 Rogers Road, Hinsdale

Violations: 10NYCRR, Part 5, Section 5-1.72(c)(1) Respondent failed to submit complete daily records for the operation of the public water supply for the month of November 2011 to CCHD by the 10th day of the following month. Notice of Hearing offering a \$50 civil compromise was hand delivered to Respondent by Mr. Richard Dayton, Public Health Technician for CCHD, on 2/28/12 explaining the violation.

DOCKET 11-065 (continued)

Administrative Hearing:

Sanitarian: Chris Covert appeared for CCHD and was sworn.

Respondent: Andy J. Michael appeared and was sworn.

Enf. 1 was read and affirmed to be correct by Ms. Covert and identified as People's Exhibit #1. A letter dated 10/19/11, identified as Peo. Ex. #2, was sent to Mr. Michael stating that the same violation was documented in September 2011. The letter states that enforcement action may be taken against Mr. Michael with a monetary fine for future violations.

Ms. Covert summarized that Mr. Michael was warned by letter dated 10/19/11 with September violation and then repeated violation in November 2011.

Mr. Michael said that both reports were handed in on time to CCHD but does not have receipt of delivery, copies of reports or the two parties as witnesses that delivered the reports. CCHD records show both reports were turned in late.


To alleviate the problem of report submission in the future, Mr. Michael will request a receipt for proof of delivery.

Hearing Officer Finding: The Respondent is in violation of 10NYCRR, Section 5-1.72(c)(1) – failure to submit complete daily records for the operation of the public water supply for the month of November 2011.

Recommendation: \$50 fine to be received by CCHD on or before 4/30/12 with a \$10 per diem fine if the fine is not paid by that date.

There being no further business to discuss, Mr. Eade made a motion to adjourn. It was seconded by Dr. Bohan and carried to adjourn.

Respectfully submitted,



Kevin D. Watkins, M.D., M.P.H.

Secretary

KDW/km

Cattaraugus County Mortality Review-2011

A Brief Presentation by:
Sandra L. Brundage, MSED
MPH Student Intern

Review of Population Statistics

- According to 2010 Census, Cattaraugus County has 80,317 residents.
- In 2011 we lost 649 (.007%) residents of Cattaraugus County.

Reference: US Census Bureau, 2011, 2010 Census Data, Interactive Population Information Page.

Data Compilation

- Data was compiled using 2011 death certificates reviewed. It is provisional at this time, pending New York State review and release of data in 2013.
- Data was entered into Excel spreadsheets, on a month to month basis
- Cause of death information was gathered as primary, secondary, tertiary, and contributing factor causes of death.
- What follows is a brief review of this data.

The Year in Review

- In 2011 there were 649 recorded death certificates filed with the Cattaraugus County Health Department. (As of 3/8/12)
- Of those 346 were male and 303 were female
- The median age of death in Cattaraugus County in 2011 was 72.62, 2.38 years below the National life expectancy age of 75

The Year in Review Continued

- Trends noted include newborn deaths on a monthly basis (at least one per month) beginning in May and lasting through November, National trend is 6.75 infant deaths per 1,000 live births. Latest data from NYSDOH indicates that we had 982 births in 2005.
- Oldest person who died was 105 years old.
- The most common Zip Code noted was Olean, 14760, however that is where the population is concentrated
- 146 individuals (22%) were seen by our 4 County Coroners because their death occurred either at home, in an accident, etc.

Infant Mortality Data

- There were 8 deaths of Newborn children (ages 0-3mos of age) Assuming we had 1000 births in 2011, we would be 1.25 higher than the national average.
- 4 were premature birth related deaths
- 1 resp. arrest at birth
- 2 are pending investigation of death
- 1 was diagnosed with trisomy 18
- Deaths occurred from May thru Nov of 2011

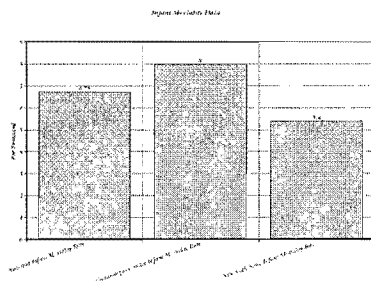
Infant Mortality Data

- National infant mortality rate (2007) is 6.75 infant deaths per 1000 births.
- The 10 leading causes of infant death were:
 - Congenital malformations, deformations and chromosomal abnormalities (congenital malformations)
 - Disorders related to short gestation and low birth weight, not elsewhere classified (low birthweight)

Infant Mortality Data (Con't)

- Sudden infant death syndrome (SIDS)
 - Newborn affected by maternal complications of pregnancy (maternal complications)
 - Accidents (unintentional injuries)
 - Newborn affected by complications of placenta, cord and membranes (cord and placental complications)
 - Bacterial sepsis of newborn
 - Respiratory distress of newborn
 - Diseases of the circulatory system
 - Neonatal hemorrhage
- Reference: Center for Disease Control and Prevention, (2010) National Vital Statistics Reports, 58(19).

Infant Mortality Data



Motor Vehicle Accident Death Data

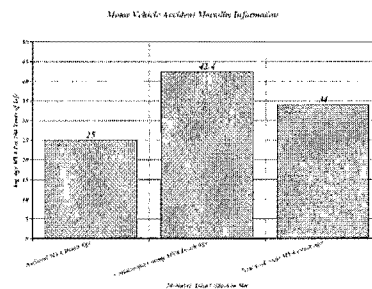
- There were 10 Motor Vehicle Accidents in 2011
- Two each noted in September and November
- One child (aged 2) died as a result of riding in an Amish Buggy and being hit by a motor vehicle
- Two deaths were motorcycle related.
- Deaths occurred in January, February, March, May, July, September, October, and November.
- Oldest person who died in an MVA was 68, youngest was 2.

Motor Vehicle Accident Death Data

- Average age is 42.2, National Average 25-34 year old male. *
- NYS aged 25-34 has highest rate of MVA, 2nd Highest is 45-54. *
- Percentage of individuals who died as a result of MVA in Cattaraugus county is 1%
- All victims of MVA were male.
- National statistics men are twice as likely to die from MVA as women. *

Source: National Highway Traffic Safety Administration, (2009) Fatality Analysis Report (FARS) Retrieved from : <http://nhtsa.org>

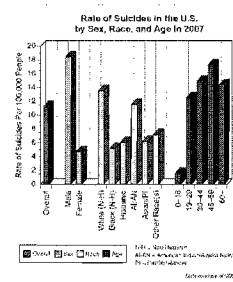
MVA Accident Mortality Information



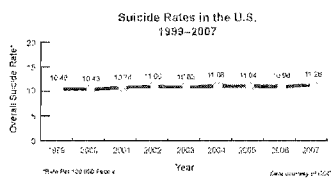
Suicide Rate Data

- There were 9 suicides in Cattaraugus County in 2011
- 7 were Male, 2 were Female
- Youngest person was 21, Oldest was 84
- Average age was 47 years old
- Compared with National Suicide rate 45-59 years
- 4 were the result of hanging, 3 were the result of gun shot wounds, one overdose, and one carbon monoxide poisoning
- March and July both had 2 suicides each
- Percentage of individuals who died as a result of suicide in 2011 is 1%

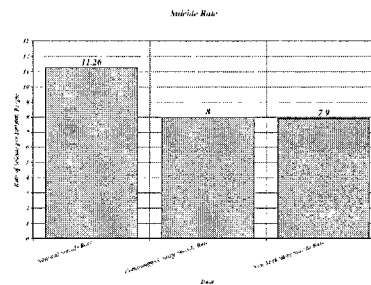
National Trends



National Suicide Data



Comparative Data



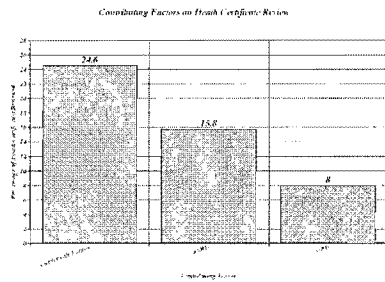
Homicide Rate

- There was one reported homicide in Cattaraugus County and this occurred in October of 2011
- Percentage of individuals who died as a result of homicide in Cattaraugus County is .001%.
- With a low homicide rate, we can be perceived as a safe community.

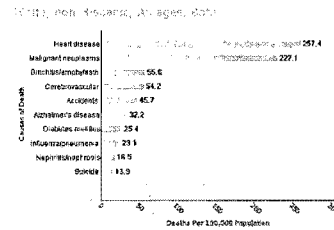
Morbidity Data

- The top three causes of death were reviewed from death certificates on a monthly basis. This data was then tabulated for year end 2011. The top three comorbid conditions on death Certificates in Cattaraugus County were:
 1. Cancer (24.6%)
 2. Atherosclerotic Heart Disease (15.8%)
 3. Chronic Obstructive Pulmonary Disease (8%)

Cattaraugus County Morbidity Data

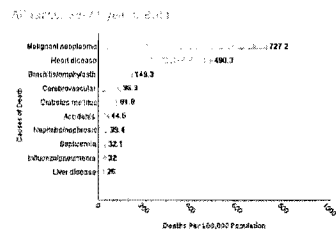


National Data



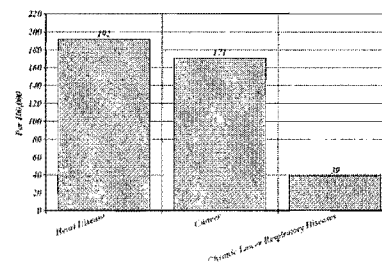
National Data

From CDC Website-as of 2006



New York State Data

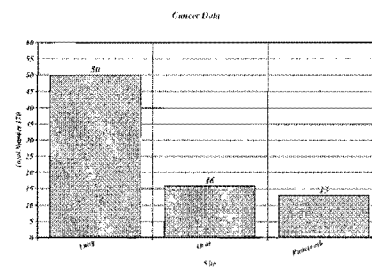
New York State Cause of Death Data



Cancer Causes of Death

- After reviewing the types of Cancer listed on death certificates, the cancer primary site listed on death certificates began to stand out. The Number of deaths attributed to Cancer was 170. The most common cancer sites listed on death certificates are:
 - Lung-50 (7% of all deaths, 30 % of cancer deaths)
 - Oral- 16 (tongue, esophagus, pharynx) (2% of all deaths, 9% of all cancer deaths)
 - Pancreatic- 13 (2% of all deaths, 7% of all cancer deaths)

Cancer Data by Site



Lung Cancer Causes

1. Tobacco Use/ Exposure
2. Radon-

Cancer Screening Programs

- Allegany and Cattaraugus County Cancer Services Program Data-
- February 2011-February 2012
- Total of 390 Individuals Seen
- 336 Screening Mammograms
- 199 Screening Pelvic and Pap Exams
- 298 Screening CBE Exams

Cancer Screening Programs (Continued)

- 4 Carcinoma In-Situ identified as a result of follow ups to screening Mammography.
- 2 Carcinoma In –Situ identified as a result of Cervical/ Pelvic screenings.
- 4 Adenomatous polyps identified as a result of Colonoscopy screenings.

Comparative Data

- The most recent non provisional data regarding cause of death information gathered is from the NYS department of Vital Statistics 2009
- This data reflects the top 3 causes of death in Cattaraugus County as:
 1. Diseases of the Heart
 2. Cancer (Malignant Neoplasms)
 3. Cerebrovascular Disease

National Mortality Review Data

- The 15 leading causes of death in the United States for year 2007 are:
 1. Diseases of heart
 2. Malignant Neoplasms (Cancer)
 3. Cerebrovascular diseases
 4. Chronic Lower Respiratory Diseases
 5. Accidents
 6. Alzheimer’s Disease

National Mortality Review Data

7. Diabetes Mellitus
 8. Influenza and Pneumonia
 9. Nephritis, Nephrotic Syndrome, Nephrosis
 10. Septicemia
 11. Intentional Self harm (Suicide)
 12. Chronic Liver Disease and Cirrhosis
 13. Essential Hypertension/Hypertensive Liver Disease
 14. Parkinson’s Disease
 15. Assault
- Reference: Center for Disease Control and Prevention, (2010)
National Vital Statistics Reports, 58(19).

Links to Lung Cancer

- Tobacco use is a major contributor to lung cancer.
- Tobacco is listed as the leading cause of preventable and premature death, killing an estimated 443,000 Americans a year.
- Cigarette smoking costs the nation \$96 billion in direct medical costs and \$97 billion in lost productivity annually.

Reference: U.S. Department of Health and Human Services. Executive Summary on Preventing Tobacco Use among Youth and Young Adults. 2012

Cattaraugus County Tobacco Use

- Clean Indoor Air Act established in New York State in July of 2003.
- Percentage of Cattaraugus County adults aged 18 and older who are current smokers (2009) 24.4%.
- Compared with New York State , 17%
- Prevention agenda 2013 objective is 12%

Reference: New York State Department of Health, (2010) New York State Expanded Behavioral Risk Factor Surveillance System, July 2008-June 2009.

Radon

- Second leading cause of Lung Cancer
- Cattaraugus County Radon Data (10/2011)
- 1, 418 basements in Cattaraugus County Tested
- Avg. tested is 9.39 (pCi/L) , mean is 4.21.
- 24% of the homes in Cattaraugus County have rate of pCi/L greater than 4.21
- Highest incidence of Radon detected in the home are in Yorkshire, Farmersville, Lyndon, Little Valley, New Albion.

Reference: New York State Department of Health, (2012) Environmental Health/ Radon, http://www.health.ny.gov/environmental/radon/radon_testing_statistics.htm

Societal Factors

- Social Change vs. medical advances in disease reduction.
- There is a disconnect between a low education attainment rate (not completing high school) and college-educated adults.
- Each year, on average, 195, 619 deaths would have been averted if mortality rates among adults with an inadequate education had been the same as mortality rates among those with a higher educational attainment.

Reference: World, S., Johnson, R., Phillips, R., & Pridgen, M., (2007) Doing Everyone the Health of the Educated: An Examination of Whether Social Change Would Save More Lives Than Medical Advances, American Journal of Public Health, 97, No. 6.

Educational Attainment Rate in Cattaraugus County

- 87.7% Have a High School Diploma
- 18.1% Hold a Bachelor's Degree or higher
- Per capita money income in past 12 months \$20, 824
- Median household income 2006-2010 \$42, 466
- Persons below the poverty level, 2006-2010 16%

Reference: U.S. Census Bureau, (2010) Cattaraugus County Quick Facts, Retrieved from <http://www.census.gov/cattaraugus/quickfacts/2010/2010.html>

Conclusions

- In Cattaraugus County we have low homicide and suicide rates as causes of death.
- We also have a low infant mortality rate.
- We are aligned with national and state statistics with respect to causes of death being related to heart disease, cancer, and lung disease.

Conclusions Continued

- Work/ focus areas for Cattaraugus County include:
 1. Continue Tobacco Prevention Efforts.
 2. Continue Cancer Screening Efforts, with an emphasis on early detection/diagnosis.
 3. Work toward Community Wellness Programs aimed at reduction of Heart Disease, Obesity, Chronic Lung Disease.
 4. Reinforce the benefits of education to reduce mortality.

Questions



Thank You!

- I appreciate your time and attention today.
- My internship at the Cattaraugus County Health Department has been rewarding, with all staff welcoming me and being helpful.
- I look forward to continuing to work and learn with you all.

References:

Center for Disease Control and Prevention, (2010) National Vital Statistics Reports, 58(19).

National Highway Traffic Safety Administration, (2009) Fatality Analysis Report (FARS)
Retrieved from : <http://nhtsa.org>

New Yorks State Department of Health, (2010) New York State Expanded Behavioral Risk
Factor Surveillance System, July 2008-June 2009.

Reference: US Census Bureau, 2011, 2010 Census Data, Interactive Population Information Page

U.S. Department of Health and Human Services, Executive Summary on Preventing Tobacco Use
among Youth and Young Adults, 2012.

	Cattaraugus County	Error Margin	National Benchmark*	New York	Trend	Rank (of 62)
Health Outcomes						50
Mortality						58
Premature death	7,155	6,486- 7,824	5,466	5,812		
Morbidity						35
Poor or fair health	20%	15-26%	10%	16%		
Poor physical health days	3.8	2.8-4.9	2.6	3.5		
Poor mental health days	3.2	2.1-4.2	2.3	3.4		
Low birthweight	6.9%	6.3-7.5%	6.0%	8.1%		
Health Factors						53
Health Behaviors						43
Adult smoking	23%	18-30%	14%	18%		
Adult obesity	29%	24-35%	25%	25%		
Physical inactivity	27%	22-32%	21%	25%		
Excessive drinking	16%	12-22%	8%	17%		
Motor vehicle crash death rate	13	10-16	12	8		
Sexually transmitted infections	192		84	472		

	Cattaraugus County	Error Margin	National Benchmark*	New York	Trend	Rank (of 62)
Teen birth rate	33	31-35	22	27		
Clinical Care						54
Uninsured	13%	11-14%	11%	13%		
Primary care physicians	1,109:1		631:1	689:1		
Preventable hospital stays	96	89-103	49	69		
Diabetic screening	84%	77-91%	89%	83%		
Mammography screening	65%	57-73%	74%	66%		
Social & Economic Factors						51
High school graduation	76%			65%		
Some college	53%	50-56%	68%	64%		
Unemployment	9.1%		5.4%	8.6%		
Children in poverty	22%	17-27%	13%	22%		
Inadequate social support	25%	18-34%	14%	24%		
Children in single-parent households	33%	30-37%	20%	34%		
Violent crime rate	234		73	399		

	Cattaraugus County	Error Margin	National Benchmark*	New York	Trend	Rank (of 62)
Physical Environment						11
Air pollution-particulate matter days	0		0	4		
Air pollution-ozone days	0		0	5		
Access to recreational facilities	6		16	11		
Limited access to healthy foods	0%		0%	4%		
Fast food restaurants	37%		25%	45%		

* 90th percentile, i.e., only 10% are better

Note: Blank

2012 County Health Rankings: Measures, Data Sources, and Years of Data

	Measure	Data Source	Years of Data
HEALTH OUTCOMES			
Mortality	Premature death	National Center for Health Statistics	2006-2008
Morbidity	Poor or fair health	Behavioral Risk Factor Surveillance System	2004-2010
	Poor physical health days	Behavioral Risk Factor Surveillance System	2004-2010
	Poor mental health days	Behavioral Risk Factor Surveillance System	2004-2010
	Low birthweight	National Center for Health Statistics	2002-2008
HEALTH FACTORS			
HEALTH BEHAVIORS			
Tobacco Use	Adult smoking	Behavioral Risk Factor Surveillance System	2004-2010
Diet and Exercise	Adult obesity	National Center for Chronic Disease Prevention and Health Promotion	2009
	Physical inactivity	National Center for Chronic Disease Prevention and Health Promotion	2009
Alcohol Use	Excessive drinking	Behavioral Risk Factor Surveillance System	2004-2010
	Motor vehicle crash death rate	National Center for Health Statistics	2002-2008
Sexual Activity	Sexually transmitted infections	National Center for Hepatitis, HIV, STD and TB Prevention	2009
	Teen birth rate	National Center for Health Statistics	2002-2008
CLINICAL CARE			
Access to Care	Uninsured	Small Area Health Insurance Estimates	2009
	Primary care physicians	Health Resources & Services Administration	2009
Quality of Care	Preventable hospital stays	Medicare/Dartmouth Institute	2009
	Diabetic screening	Medicare/Dartmouth Institute	2009
	Mammography screening	Medicare/Dartmouth Institute	2009
SOCIAL AND ECONOMIC FACTORS			
Education	High school graduation	National Center for Education Statistics and state-specific sources ¹	2008-2010
	Some college	American Community Survey	2006-2010
Employment	Unemployment	Bureau of Labor Statistics	2010
Income	Children in poverty	Small Area Income and Poverty Estimates	2010
Family and Social Support	Inadequate social support	Behavioral Risk Factor Surveillance System	2006-2010
	Children in single-parent households	American Community Survey	2006-2010
Community Safety	Violent crime rate ²	Federal Bureau of Investigation	2007-2009
PHYSICAL ENVIRONMENT			
Environmental Quality ³	Air pollution-particulate matter days	U.S. Environmental Protection Agency	2007
	Air pollution-ozone days	U.S. Environmental Protection Agency	2007
Built Environment	Access to recreational facilities	Census County Business Patterns	2009
	Limited access to healthy foods ⁴	U.S. Department of Agriculture	2006
	Fast food restaurants	Census County Business Patterns	2009

¹ NCES used for AK, AL, AR, CA, CT, FL, HI, ID, KY, MT, ND, NJ, OK, SD and TN

² State data source for IL.

³ Not available for AK and HI.

⁴ Access to Healthy Foods (2009) from Census Zip Code Business Patterns for AK and HI.